



# Rwanda COVID-19 Situation Report No. 3



Reporting Period: 18 May to 15 June 2020

## Highlights

- On 2 June, the Government of Rwanda further eased lockdown measures, allowing movement between districts.
- UNICEF received additional funding to support the government response plan from both DFID and the Government of Japan.
- 4 million people have been reached by UNICEF and partners with messaging on COVID-19 prevention and access to related services.
- 5,100 persons with disabilities were reached with more inclusive communication materials which incorporated Braille and sign language.
- UNICEF procured 20 ventilators distributed to 10 district hospitals, in addition to 40 oxygen concentrators and 10 CPAP machines.
- 560 children without parental or family care were provided with alternative care arrangements.

## Situation in Numbers

463 CONFIRMED CASES

300 RECOVERED

161 ACTIVE CASES

2 DEATHS

Source: Rwanda Ministry of Health  
[Daily update](#) on 9 June 2020

## UNICEF's Response and Funding Status

### Pilar 1

No. of people reached on COVID-19 prevention messages	67%	33%
No. of people engaged on COVID-19 through RCCE actions	2%	98%
<b>Funding status</b>	27%	73%

### Pilar 2

No. of health workers provided with PPE	0%	100%
No. of health workers trained on IPC	13%	87%
<b>Funding status</b>	5%	95%

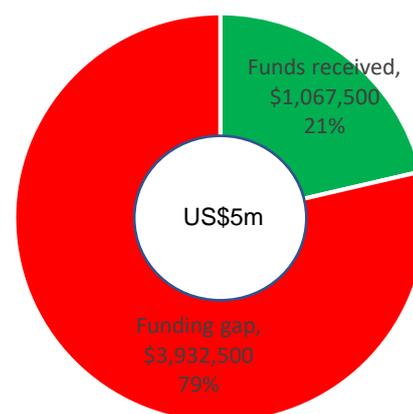
### Pilar 3

No. of healthcare providers trained in COVID-19	0%	100%
No. of primary caregivers received IYCF counselling	12%	88%
<b>Funding status</b>	47%	53%

### Pilar 4

No. of children supported with home-based learning.	66%	34%
No. of schools implementing safe school protocols	0%	100%
No. of children without parental or family care provided with appropriate alternative care arrangements.	100%	
<b>Funding status</b>	31%	69%

## UNICEF Appeal 2020 US\$ 5 million



## Funding Overview and Partnerships

In 2020, UNICEF Rwanda has appealed for US\$ 5 million to support the Government of Rwanda's National COVID-19 Response Plan. The current funding gap is US\$ 3,932,500 (79 per cent). Without additional funding, UNICEF will not be able to address the most urgent needs of children and families in Rwanda who are affected by the COVID-19 crisis.

## Situation Overview and Humanitarian Needs

Rwanda's first case of COVID-19 was confirmed on 14 March 2020. As of 9 June, there were 463 confirmed cases of whom 300 have recovered. Two deaths have been reported. Most confirmed cases have recent travel history or are contacts of COVID-19 cases. According to the Ministry of Health, the individuals who were reported to have succumbed to the disease were both Rwandan nationals living abroad who only returned when they were already in critical condition. All confirmed cases of COVID-19 are in isolation in designated locations and are being closely monitored.

On 2 June, the Government of Rwanda passed new resolutions which partially lifted lockdown measures, allowing movement between districts except Rusizi and Rubavu, which remain under lockdown. Movements are allowed until 9:00 pm and moto taxis are allowed to carry passengers. Schools and places of worship remain closed. Borders also remain closed except for transport of commercial goods.

UNICEF is supporting the Government of Rwanda to mitigate the secondary effects of COVID-19 on children and families, including in remote learning opportunities for children, identifying family-based care options for street children, and training frontline workers in infection prevention and control. These sectors are crucial in mitigating the longer term negative effects of the pandemic on vulnerable communities.

## Coordination and Partnerships

The COVID-19 response is led by the Rwandan Ministry of Health and Rwanda Biomedical Center. An eight-pillar National COVID-19 Response Plan was developed in March 2020 as follows: i) Leadership and coordination; ii) Epidemiological surveillance; iii) Points of entry; iv) Laboratory; v) Infection Prevention and Control (IPC); vi) Case management; vii) Risk communication and community engagement; and viii) Logistics.

UNICEF, along with other UN agencies and development partners, is working closely with the Ministry of Health and other government entities to implement this plan which has been costed at US\$ 74 million.

Development partners have established COVID-19 technical coordination mechanisms with groups in health, social protection, food security and economics. UNICEF is actively involved in the first three of these groups, co-leading the group on social protection along with DFID. Under the development partner health group, which meets once a week, three sub-working groups have been established in risk communication, case management/IPC, and reproductive and sexual health. UNICEF leads the sub-group on risk communication and co-leads the case management/IPC group along with WHO. These mechanisms keep development partners informed on COVID-19 response, collect and share feedback for the Government, and coordinate the development partner response to COVID-19.

## Summary Analysis of Programme Response

### Risk Communication and Community Engagement (RCCE)

During this reporting period, UNICEF has reached 4,000,000 people with COVID-19 messages on prevention and access to services.

UNICEF engaged over 180 persons with disabilities in formative research to develop more inclusive communication materials. Following these discussions, over 5,100 people were reached with materials in Braille, sign language, and for text readers. In addition to COVID-19 prevention, materials featured key messages relevant for persons with disabilities, such as proper cleaning of orthopaedic materials.

UNICEF continued engaging children at home through children's radio and TV programmes. Scripts for eight new radio episodes have been developed, including information on COVID-19 in the context of ECD, child protection, health, education, nutrition and WASH. UNICEF continued engaging 32 radio stations in local markets and car parks, especially in Rusizi District where most new COVID-19 cases have been identified.

UNICEF has contracted four individual consultants to support RCCE efforts; these consultants have been deployed to four provinces to focus on C4D and health promotion in key affected areas. In Kirehe District, UNICEF also continues supporting RBC/RHCC on strengthening COVID-19 risk communication at Rwanda's Rusumo border with Tanzania, including the quarantine site at Kiyanzi, where truck drivers pass to get tested for COVID-19 and have their trucks decontaminated. Around 50 street banners in Kiswahili and 100 street banners in Kinyarwanda were produced and displayed in public areas in Kirehe, as well as 1,000 Kinyarwanda posters, 500 Swahili posters, and 2,000 flyers. Two new LED screens were installed in Kiyanzi and Rusumo to display COVID-19 prevention messages at the border for the next seven months.

Noting that many children are spending more time online due to COVID-19 school closures and stay home orders, UNICEF is supporting the Government to launch a Child Online Protection Campaign this week.

### Provision of critical medical and water, sanitation and hygiene (WASH) supplies and improving infection prevention and control (IPC)

UNICEF developed a guidance document and provided an information session to WASH partners on protecting workers and communities while continuing to provide WASH services. All cleaners at UN agency offices in Rwanda have been trained on basic standard precaution and IPC by WHO, with training material support from UNICEF.

In addition to one full-time staff member dedicated to supporting Ministry of Health to develop and roll out WASH/IPC training; UNICEF has seconded two additional staff to the COVID-19 Command Centre to significantly increase capacity, planning, coordination and documentation on IPC within the COVID-19 response. Key activities include:

- Leading coordinated development of one set of national training materials to be approved by the Ministry of Health and used by all partners;
- Training 132 health workers (nurses, doctors, lab technicians and data managers) in 66 private clinics in Kigali on case management and IPC;
- Developing a national IPC training plan and budget to consolidate all partner funds towards a Ministry of Health-led plan to be implemented in all health centres and other critical areas;
- Conducting IPC assessments and training at one quarantine site and two large factories, with 60 people trained;
- Technical support to daily reporting, IPC supply management, maintenance of decontamination equipment;
- Coordinating with RCCE to ensure messages are appropriate for various settings in the local language (quarantine sites, isolation sites, hot spots, large workplaces, etc).

UNICEF is working with the Ministry of Education to design and cost a durable group handwashing facility which can be installed in all primary and secondary schools before school reopening in September.

### Supporting the provision of continued access to essential health care services for women, children and vulnerable communities, including case management

Data presented in recent technical working groups in community health and maternal and child health did not show a major drop in access to health services; communities continue to access these services, especially immunisation. Surveillance of vaccine-preventable diseases also continues. UNICEF continues to support vaccine stock management and procurement, newborn care, HIV services, community health platforms, and efforts to strengthen health systems. In this reporting period, UNICEF supported radio spots encouraging continued use of maternal, child and newborn health, including immunisation services.

UNICEF procured 40 oxygen concentrators, 10 Continuous Positive Airway Pressure devices (CPAPs), five newborn ventilators, and associated consumables. These are in various stages of procurement process. Due to global shortage, the delivery of oxygen supplies is planned in three phases; Rwanda has received the first

batch of 20 ventilators which were delivered to 10 district hospitals. UNICEF is procuring four additional ventilators for adults and children and personal protective equipment (hand sanitizer and barrier masks) for about 58,000 community health workers.

### [Access to continuous education, social protection, child protection and gender-based violence services](#)

UNICEF, in the role of Coordinating Agent, has supported the Government of Rwanda in their application to the COVID-19 Accelerated Funding opportunity, which resulted in US\$ 10 million in additional resources to support the education sector response.

UNICEF continues to support the development of radio and television lessons, as well as production and airing, in partnership with Rwanda Education Board, Rwanda Broadcasting Agency, and a local NGO, Inspire, Educate, and Empower (IEE). Approximately 158,700 nursery/pre-primary students, 1,752,595 primary students, and 71,800 secondary students were reached by remote learning opportunities within this reporting period.

For children with disabilities, UNICEF continues to partner with Humanity and Inclusion to ensure remote learning opportunities are available for all students. This includes sign language interpretation of any video content developed and aired on television; printing and distribution of braille learning materials; and outreach to families with children with disabilities for individualised support.

To provide essential child protection information to families, UNICEF supported the National Commission for Children (NCC) to initiate a toll-free hotline. During this reporting period, 30 child protection cases were reported through this hotline.

With partial relaxation of lockdown measures, many parents have returned to work. However, due to school closures, many children now remain home without adult supervision. While the professional and volunteer social workforce now have increased capability to move and visit families, this remains severely constrained in Rusizi and Rubavu Districts where lockdown is still enforced.

In Kigali, a coordinated effort to remove children from the living and begging on the streets has resulted in large numbers of children identified and placed in transit centres, placing a significant burden on the limited professional workforce to undertake rapid assessments and place children back into families. During this reporting period, UNICEF has supported NCC to place 560 children into family care who were separated from their own families, 558 of whom were living on the streets.

### [Human Interest Stories and External Media](#)

During this reporting period, UNICEF published a [video on formative research with persons with disabilities](#) to create inclusive communication materials. UNICEF also published [story on WASH supplies](#) distributed to 12 institutions for children with disabilities. The children's book "My Hero Is You" on how children can understand and help prevent COVID-19 was [published in Kinyarwanda](#) and is available for public download.

UNICEF Rwanda Humanitarian Action for Children Appeal: <https://www.unicef.org/appeals/>

### [Next SitRep: 15 July 2020](#)

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## Annex A: Summary of Programme Results

Indicators		UNICEF and Partners Reported Results		
		Target 2020	Total Results 15 June	Change since last report ▲ ▼
<b>1. Risk Communication and Community Engagement RCCE)</b>				
1	Number of people reached on COVID-19 through messaging on prevention and access to services.	6,000,000	4,000,000	▲ 1,000,000
2	Number of people engaged on COVID-19 through RCCE actions	500,000	10,000	0
<b>2. Provision of critical medical and water, sanitation and hygiene (WASH) supplies and improving infection prevention and control (IPC)</b>				
1	Number of healthcare facilities staff and community health workers provided with Personal Protective Equipment (PPE).	10,000	0	0
2	Number of healthcare facility staff and community health workers trained in Infection Prevention and Control (IPC)	1,000	132	▲ 132
<b>3. Supporting the provision of continued access to essential health care services for women, children and vulnerable communities, including case management</b>				
1	Number of healthcare providers trained in detecting, referral and appropriate management of COVID-19 cases among children, pregnant and breastfeeding women.	10,000	0	0
2	Number of primary caregivers of children aged 0-23 months who received IYCF counselling through facilities and community platforms.	75,000	9,000	▲ 1,000
<b>4. Access to continuous education, social protection, child protection and gender-based violence (GBV) services</b>				
1	Number of children supported with distance/home-based learning.	3,000,000	1,983,095	0
2	Number of schools implementing safe school protocols (COVID-19 prevention and control)	3,000	0	0
3	Number of children without parental or family care provided with appropriate alternative care arrangements.	450	560	▲ 548

## Annex B: Funding Status

Pillar	Total Requirements	Funds available 2020		Funding gap	
		Funds Received 2020	Carry-Over from 2019	\$	%
1. Risk Communication and Community Engagement (RCCE)	475,000	130,000	-	345,000	73%
2. Provision of critical medical, water, sanitation and hygiene (WASH) supplies & improving infection prevention and control	2,425,000	130,000	-	2,295,000	95%
3. Supporting the provision of continued access to essential health care services for women, children and vulnerable communities, including case management	1,000,000	475,000	-	525,000	53%
4. Access to continuous education, social protection, child protection and gender-based violence (GBV) services	542,500	170,000	-	372,500	69%
5. Data collection and social science research on the secondary impacts on children and women	50,000	30,000	-	20,000	40%
6. Coordination and Operational costs	507,500	132,500	-	375,000	74%
<b>Total</b>	<b>5,000,000</b>	<b>1,067,500</b>	<b>-</b>	<b>3,932,500</b>	<b>79%</b>