



Rwanda

Humanitarian Situation Report



DATE OF SITREP – July 29

IN NUMBERS

Highlights

- Rwanda continued to receive a steady influx of refugees from Burundi. The total number has now reached 71,485.
- The shelter strategy is being revised to accommodate the large number of refugees in hangars, tents and semi-permanent facilities.
- Alternative modes of providing water to the growing number of refugees are being put in place, while working on permanent/sustainable solutions.
- Negotiations are ongoing to ensure refugee children’s participation in national education examinations.
- There is a decreasing trend in cases of severe acute malnutrition.
- Prevalence of childhood illnesses remains high and the hospital tent at the camp is working at maximum capacity.
- UNICEF Rwanda continues to experience a significant funding gap of 78 per cent, making a comprehensive timely response to the Burundian refugee crisis challenging.

UNHCR figures as of 27 July 2015

71,485

Recently-arrived Burundian refugees now in Rwanda

30,974

Hosted at Mahama refugee camp
76% are children and women

Main Issues

- Meeting growing demand for WASH
- Ensuring access to education
- Meeting minimum standards for maternal and newborn health services
- Child protection cases

UNICEF funding requirements

\$4,050,000

(based on Regional Refugee Response Plan)

Key targets and results – UNICEF with partners, according to Refugee Response Plan (RRP)		
Sector	Target*	Results
WASH: People provided with minimum 10 litres clean water daily	120,000	>50,000
Health: Children under-15 vaccinated against measles and children under 5 against polio	54,000	> 23,300 children
Nutrition: Severely malnourished under-5s being treated	2,400	258**
Child Protection: Unaccompanied/separated children reached with tracing and alternative care arrangements	3,660	2,067
Education: Children with access to education programmes	30,000	9,135
ECD: Children 0-59 months receiving ECD services	24,000	3,009

* Targets based on RRP calculation of 120,000 refugees over six months

**Cases of severely acute malnourished children have decreased as they have been successfully treated (117 children so far).

Situation Overview & Humanitarian Needs

The situation in Burundi remains volatile after Presidential elections were held on 21 July. A steady influx of refugees arrived in Rwanda, with a peak of 372 arrivals on 19 July. Refugees report leaving without their belongings and travelling through the forest at night so that they will not be stopped from leaving the country.

As of 27 July, a total of 71,485 Burundian refugees are in Rwanda, with 30,974 registered in Mahama refugee camp. There are a further 14,809 refugees currently in Bugesera reception centre, 1,155 refugees in Nyanza reception centre and 766 in Nyagatare transit centre. The remaining 20,705 are urban refugees mainly based in Kigali, and their registration is ongoing.

Currently there is a large number of refugees registered at the Bugesera and Nyanza reception centres waiting to be referred to Mahama camp. MIDIMAR and UNHCR are reviewing their strategy for shelter provision. By 10 August, up to 80 hangars will be installed in Mahama camp to accommodate the newest refugees from reception centres. The complete relocation of all refugees from Bugesera and Nyanza to Mahama camp is planned by 26 August. In a second step, within Mahama camp the refugees will transition into temporary accommodation (smaller tents), with the ultimate goal to have semi-permanent housing (so far 86 semi-permanent housing facilities are constructed).

During this reporting period, it remained a challenge to meet the demand for clean water and sanitation facilities due to the increased number of refugees. Water continues to be brought in on trucks and surface water treatment in Mahama refugee camp has started. In Mahama camp currently each refugee receives an average of 12.3 litres of water per day; in Bugesera reception centre, refugees are receiving only 14 litres per day compared to 35 litres in Nyanza reception centre. Regarding latrines and shower facilities, in Mahama there are 25 refugees per latrine and 35 refugees per shower facility; in Bugesera reception centre, there are 20 refugees per latrine and 35 refugees per shower facility; and in Nyanza, there are 21 refugees per latrine and 35 refugees per shower.

The nutrition status among newly arrived children significantly improved since the beginning of the refugee influx. However, UNICEF and partners remain on alert and are prepared for further waves of refugees which could entail a significant increase in number of children with severe acute malnutrition (SAM).

The main health issues remain respiratory infections (42 per cent), watery diarrhoea (14 per cent) and malaria (12 per cent). There have been, on average, 45 hospitalizations each week, and the tent serving as a hospital has reached over 100 per cent capacity with all 22 beds full. In the past two weeks, 33 deliveries took place in one small delivery room in the camp's health centre. The minimum standards for maternal and newborn health services are not being met. There is only one ambulance at the camp. Last week, one premature newborn died.

A total number of 9,135 pupils enrolled in education orientation classes in Mahama camp, with Burundian teachers from the refugee community working alongside Rwandan teachers.

As of 29 July, out of a total of 2,067 unaccompanied and separated children, nearly 300 have been reunited with their parents, customary caregivers or relatives. In addition, so far, 83 cases of sexual and gender based violence have been reported, mostly domestic violence and denial of resources to meet basic needs (food items; non-food items etc.).

Humanitarian leadership and coordination

The Rwandan Ministry of Disaster Management and Refugee Affairs (MIDIMAR) and UNHCR are the overall coordinators of the inter-agency response to the refugee situation. Humanitarian partners' priorities were initially to provide life-saving emergency protection and assistance, including building and managing the Mahama camp. Under the leadership of UNHCR, UNICEF is the UN Co-Coordinator for the response in WASH, Child Protection, Early Childhood Development, Education, Health (with WHO and UNFPA), and Nutrition (with WFP). The main implementing partners are: district and community authorities; the Ministry of Health

and the Rwanda Biomedical Centre, district hospitals and health centres; AHA, ARC (Health and Nutrition); Plan International (Child Protection); CARE (ECD), ADRA (Education); ARC (shelter) and the Ministry of Infrastructure, Rwanda Water and Sanitation Corporation (WASAC), and World Vision Rwanda (WASH).

Humanitarian Strategy

The initial focus was to register refugees, provide them with shelter, household equipment, food and water, maintain sanitation and hygiene, and give emergency health and nutrition services. To support WASH and shelter, UNICEF distributed pre-positioned supplies (tents for health and nutrition services, water tanks and other) and activated contingency cooperation agreements with partners to address child protection, nutrition and education (including ECD) needs from the onset of the emergency.

UNICEF continues to provide WASH supplies and technical assistance; screening and management of severe acute malnutrition; and provision of polio and measles vaccines for children (as well as routine immunization). In addition, unaccompanied and separated children are registered, while their families are traced, and child-friendly spaces are organized. Support to prevent and respond to violence against children is provided. UNICEF is supporting access to early learning and basic education for refugee children.

Summary Analysis of Programme response

Water, Sanitation and Hygiene (WASH)

UNHCR and UNICEF, in partnership with World Vision and PAJER, are providing water, sanitation and hygiene (WASH) services to over 50,000 refugees in Mahama camp as well as in Bugesera and Nyanza reception centres.

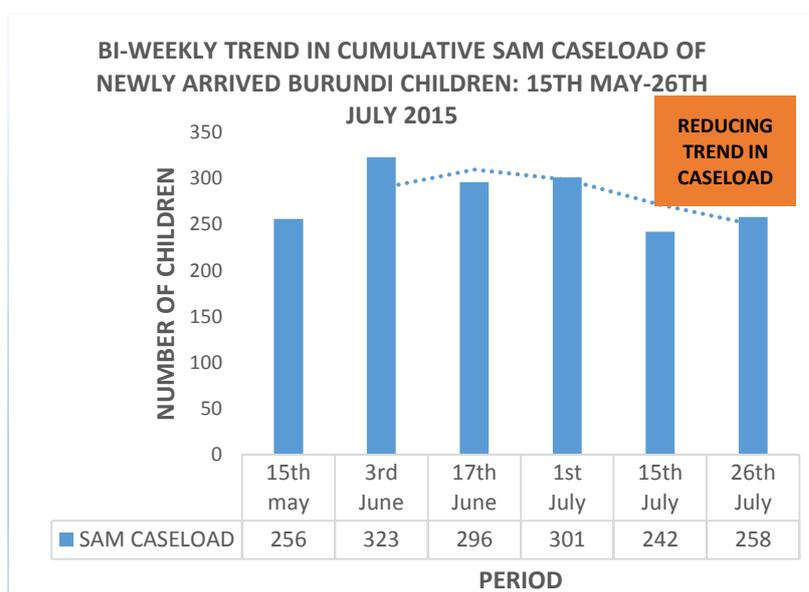
Construction of additional water and sanitation facilities continued in Mahama camp to meet the increased demand due to a continued influx of refugees around the parliamentary elections, but meeting the recommended daily minimum requirement of drinking water of 15 litres for each refugee remains a challenge.

UNICEF has supported a temporary solution through the treatment of Akagera river surface water in the camp that yielded up to 150 m³ of water per day (the water was tested and found to be clean and suitable for drinking). This is complementing the water being trucked from a remote source. In parallel, UNICEF is working on exploring options for a long term solution for water supply – a consulting company was hired and a site assessment was conducted. With the continued influx of refugees, it becomes increasingly difficult to meet the recommended UNICEF standards.

Nutrition

UNICEF and partners continue to provide dedicated technical support and a regular supply of essential nutrition commodities and equipment for the treatment of SAM among children under five.

UNICEF continues to monitor trends in the nutrition status of new arrivals in reception centers through a surveillance system (using MUAC) jointly designed by UNICEF and AHA. Despite an increase in the number of Burundian refugees in Rwanda, SAM cases show a decreasing trend (see graph on right). Beyond screening new arrivals, screening of the existing refugee population continues to identify and treat any residual cases.



UNICEF has so far dispatched 460 cartons of RUTF as well as anthropometric equipment to Mahama camp and reception centers. Furthermore, with UNICEF's technical and financial support, community health worker (CHW) training targeting a total of 110 new recruits from the refugee population in Mahama camp was recently completed in Kirehe. This will further increase the capacity of the health care system to provide quality nutrition and health services to children and women in the camp.



@UNICEF Rwanda/2015
Burundian refugee child receiving RUTF in Mahama refugee camp

With UNICEF's support, a total of 117 severe acutely malnourished children have recovered from SAM since the onset of the influx of Burundian refugees. Currently a total of 258 children with SAM are being treated in Mahama camp, referral hospitals, and the reception centres.

Health

UNICEF support is mainly focused on immunization and community health. Technical support is given at bi-monthly sector coordination meetings chaired by UNHCR during which all health-related issues are discussed and necessary actions are recommended.

Routine Immunization activities started in Mahama Camp; the package of routine immunization includes: OPV (four doses), BCG, Penta (three doses), PCV13 (three doses), MR (two doses) and Rota (three doses) as well as HPV for 12-year-old girls and TT for pregnant mothers. Measles-rubella (for nine months to 15 years) and polio (for all under-fives) vaccination is being carried out daily at the reception centres as children register. So far, in total over 23,300 children have been vaccinated at the reception centres and during two vaccination campaigns in Mahama camp.

110 CHWs were trained on key family health practices including the community integrated management of childhood illness and behaviour change communication (IMCI/BCC), and they received tools to facilitate their work in the camp.

Prevention of mother-to-child transmission of HIV (PMTCT) services started last month, integrated with antenatal care (ANC) services.

An isolation tent is set up in case of a cholera outbreak, and the prevention and response plan for cholera is being developed, with diarrhoea diseases kits currently in procurement by UNICEF.

UNICEF is exploring options to introduce integrated community case management in Mahama camp, with CHWs to be trained on case management in their respective villages¹.

Child Protection

There are now 2,067 unaccompanied and separated children (677 separated children and 1,390 unaccompanied children) who were registered at the reception centres and received support. Out of these, nearly 300 have been reunited with their families or caregivers so far. The number of registered child protection cases (physical, sexual and emotional abuse of children) has more than doubled since the last SitRep, now totalling 63. The increased number of reports can be seen a result of sensitization activities on children's rights, which informed the refugee community on available child protection services and referral pathways.



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Burundian refugee children dancing at the child friendly space in Mahama refugee camp

¹ For administrative purposes, the refugee population in Mahama camp has been sub-divided into 'villages'.

UNICEF works with partners to provide a comprehensive response to child protection risks on the ground; reunite children with their families; provide alternative care arrangements where needed; and set up and manage safe spaces for children to play and engage with peers in a stimulating and nurturing environment, serving their psychosocial support needs.

To date, a total of 13 Child Friendly Spaces (CFS) have been set up, and approximately 6,000 children are attending regular recreational and psychosocial support activities. To further strengthen UNICEF's Child Protection response on the ground, a Child Protection in Emergencies consultant has been deployed, who will provide capacity support to implementing partners in Mahama camp.

Education/ECD

UNICEF, in partnership with CARE, supported the construction of 30 temporary classrooms for the ECD / pre-school programme in Mahama refugee camp. Fifteen classrooms were completed and are now used by children for early learning and stimulation under the guidance of trained caregivers. The construction of 15 more classrooms, two kitchens and two storage spaces is almost complete. The new facilities will be used starting next week. Children attending the ECD programme continue to receive nutritional support in the form of a cereal plus porridge, which is provided by the American Refugee Committee (ARC) and supported by WFP.



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Burundian refugee children attending pre-primary program in Mahama refugee camp

UNICEF collaborates with World Vision to install water connections that reach the ECD sites; the work is ongoing and soon all children at ECD centres will have access to clean water.



@UNICEF Rwanda/2015
Burundian refugee children attending pre-primary

A six-month education orientation is continuing with enrolment of more than 9,135 school-aged Burundian refugee children. UNICEF provided 60 School-in-a-Box kits. Teacher training is starting soon, with UNICEF support and through a partnership with IEE. In addition, further emergency surge support is being recruited from the UNICEF Kenya Country Office, to strengthen the education response for Burundian refugee children.

UNICEF works closely with the Rwanda Education Board, UNHCR and ADRA in the development of an Education in Emergencies costed strategic plan, and discussions on G6 national examination for Burundian refugee children is ongoing, with UNICEF strongly

advocating for the refugee children's right to quality education, including the participation in exams.

Communication for Development (C4D)

UNICEF reviewed and produced the training materials and job aids to enhance community health workers' capacities to implement sensitization activities. The trained CHWs will facilitate community dialogue, through organized meetings or home visits, on key family health practices, and will build capacities of the refugees in general to observe key family practices.



@UNICEF Rwanda/2015
Burundian refugees identified as community health workers during the training

Media and External Communication

The news on the Burundi crisis continues to be featured prominently in the Rwandan print and online media. Social media posts are being updated through official UNICEF Rwanda channels ([Facebook](#) and [Twitter](#)) on a regular basis. Human interest stories on immunisation and community health workers were posted, generating increased traffic to the country office [website](#). Other materials including photo essays and stories on education, nutrition, health and child protection are being finalised for sharing with the UNICEF Regional Office, National Committees and Headquarters.

Funding Requirements

Significant gaps remain at 78 per cent underfunding from the requirement of US\$4,050,000. UNICEF welcomes the timely support from the CERF Rapid Response Mechanism for Child Protection and Nutrition totalling US\$270,000, and a further US\$80,000 from the French National Committee. DFID funding was received on 14 July, supporting Nutrition, WASH and Health with a total amount of US\$550,000. Timely funding will be critical for scaling up operations.

Funding

The table below collates funding requirements according to UNICEF's share of the revised Burundi RRRP. It assumes a total of 120,000 Burundi refugees in Rwanda in the six months to September.

Sectors	2015 Requirements (US\$)	Funding Received (US\$)	Funding Gap (US\$)	Funding gap in %
Nutrition	500,000	314,112	185,888	37%
Health (including HIV/AIDS and C4D)	900,000	148,000	752,000	84%
WASH	1,000,000	330,000	670,000	67%
Education and ECD	1,050,000	0	1,050,000	100%
Child Protection	600,000	109,461	490,539	82%
Total	4,050,000	901,573	3,148,427	78%

Next UNICEF Rwanda SitRep: 10 August 2015

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