END OF YEAR SITREP: January – December 2017

- 2,561 severe acute malnourished (SAM) refugee children were admitted into SAM treatment programs with a cure rate of 85.4 per cent.

- UNICEF supported WASH (handwashing, latrines and water points) in all camps covering 91,323 children both in schools and child friendly spaces. With support from UNICEF, 34,468 refugee children under five were vaccinated against measles and 194,236 people with malaria were treated.

- UNICEF supported 2,786 Burundian students to take their national exams for the milestone grades in both primary and secondary schools. In total 70,235 refugee children were supported by UNICEF.

- UNICEF worked together with UNHCR and NGOs to strengthen procedures for the safe return of unaccompanied and separated children. 12,014 Burundian refugees (57 per cent children) were assisted to voluntarily repatriate to Burundi. Over 11,400 children benefitted from a combination of child friendly places as well as range of social welfare services.

UNICEF’s Response with Partners

<table>
<thead>
<tr>
<th>UNICEF</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>WASH:</strong> Children provided with adequate WASH facilities in schools and Child Friendly Spaces</td>
</tr>
<tr>
<td><strong>Education:</strong> School aged children (3-18 years) accessing quality education</td>
</tr>
<tr>
<td><strong>Health:</strong> Child under five years vaccinated against measles and polio</td>
</tr>
<tr>
<td><strong>Nutrition:</strong> Children under 5 years with severe acute malnutrition (SAM) admitted to therapeutic services</td>
</tr>
<tr>
<td><strong>Nutrition:</strong> Children under 5 years provided with Vitamin A supplementation</td>
</tr>
<tr>
<td><strong>Child Protection:</strong> Children including Unaccompanied and Separated Children (UASC) provided with appropriate care and protection services</td>
</tr>
</tbody>
</table>

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*WASH: Exceeding the target was largely due to new funds in education sector which also covered SWASH.

**Education: due to overcrowding of schools and CFSs these facilities are not meeting sphere/CCC standards, which UNICEF is working to address so not all 90,000 are accessing quality

***Child Protection: Due to funding constraints, UNICEF focus is only on these unaccompanied and separated children whereas the target was aiming to a wider group of children and services.

January-December 2017

315,144
# of refugees and asylum seekers; Burundians and Congolese in three camps (UNHCR, December 2017)

179,633 (57%)
# of refugee children in need of humanitarian assistance (UNHCR, November 2017)

69,332 (22%)
# of under 5 children living in the 3 refugee camps

12,014
# of refugees voluntarily returned to Burundi of the 38,526 registered.

UNICEF Appeal 2017
USD$6,991,000
Situation Overview & Humanitarian Needs

Tanzania hosts the largest number of Burundian refugees in Africa, with over 264,000 refugees from this country¹. In total, Tanzania hosts 315,144² refugees from Burundi and the Democratic Republic of Congo. Fifty seven percent of the entire population are children under eighteen years and more than 5,000 children are unaccompanied and separated.

Refugees in Tanzania are hosted in three camps (Nyarugusu, Mtendeli and Nduta), all of which are overcrowded and there is an inadequate number of schools, shortage of water, and health and nutrition facilities are overstretched. Malaria is the leading cause of morbidity, accounting for 30 per cent of all Out-Patient Department (OPD) attendances.

There has been intermittent outbreaks of cholera throughout the year with 326 cumulative cases and 9 deaths³ outside of the camps in the 4 refugee hosting districts of Kigoma region, however no cases in the camps. General food distribution continued at a reduced ration for all commodities ranging between 50- 70 per cent of the full basket due shortages in the food pipeline. However, food rations and supplementary feeding programmes targeting vulnerable groups of people, including children under five, pregnant and lactating women and people at entry points, as well as people at transit and reception centers were not affected by this food ration reduction.

In 2017 Tanzania experienced new arrivals as well as repatriation of refugees at the same time. The number of new arrivals from Burundi decreased from a high of over 18,498 in January 2017 to zero in October through December, and this might be attributed to tighter border measures after the Prima Facie status was revoked in January 2017. However, during the last week of November a total of 1,893 asylum seekers were received into Tanzania were hosted in a transit center pending government screening and clearance. Only 987 were given refugee status and moved onward to camps in December. Since the commencement of voluntary repatriation in September 2017, over 12,014 refugees of the 38,526 registered have voluntarily returned to Burundi following the tripartite agreement between the governments of Tanzania, Burundi and UNHCR. See Graph A.

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Graph A: Monthly Number of Refugee Arrivals and Assisted Returns to/from Tanzania 2017

The socio-political situation in Burundi and DRC remains tense and unpredictable and cross-border influxes are expected to continue in 2018. Without counting new arrivals, the refugee population continues to grow with over 1,500 babies born each month in all three camps. As Tanzania has hosted refugees for over 50 years and new influxes continue, more effort is being made to strengthen national systems to provide basic services for refugees as well as focussing on development gaps in refugee hosting communities via the UN joint programme.

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¹ UNHCR portal, December 2017 https://data2.unhcr.org/en/situations/burundi
² UNHCR statistical report of December/ November 2017
³ Ministry of Health-Weekly Cholera updates; 17th December 2017
Humanitarian Leadership and Coordination

The refugee response in Tanzania is coordinated at four levels and UNICEF is engaged at each level. At the central level, the Ministry of Home Affairs-Refugee Service Department (MHA) and UNHCR coordinate the UN Refugee Programme Working Group, which oversees the overall management of the response by UN agencies and government focusing on planning, oversight and policy implications. At the regional (sub-national) level the head of the Kigoma Regional Government coordinates all UN agencies and NGOs who work on the refugee response. At the interagency and camp level, UNHCR and the MHA are responsible for coordinating UN agencies, NGOs and sector response.

Humanitarian Strategy

UNICEF is working closely with the government, UNHCR, and partners to support immediate life-saving interventions and to expand services for refugee children and women in refugee camps and host communities in northern Tanzania. UNICEF supports children to access quality education and provides scholastic materials, teacher training and supports children to sit for their exams. Additionally, UNICEF provides water, sanitation and hygiene services in schools and child-friendly spaces; screening and management of severe acute malnutrition; the promotion of infant and young child feeding practices; vitamin A supplementation and deworming for children under five years of age; immunization against measles and polio; provision of malaria medication and outreach activities. Child protection interventions focus on prevention and response to violence against children through access to services including registration of unaccompanied and separated children; family tracing; provision of psychosocial support and procurement of recreation materials for child-friendly spaces. In addition, strengthening of a comprehensive case management system through deployment of social welfare officers within camp and host communities is ensured.

Summary Analysis of Programme Response

Nutrition

In collaboration with the Tanzania Red Cross Society (TRCS) and “Medecins Sans Frontieres” (MSF), UNICEF continues to support the assessment of children’s nutritional status, the identification and treatment of severely acute malnourished (SAM) children, supplementation of children with vitamin A and deworming, and promotion of infant and young child feeding in all three refugee camps.

In 2017, 2,561 SAM cases were admitted into the treatment program. The performance of the programme is within the SPHERE standards (cure rate exceeded the target by 10.4 percent and death rate below 5%). Cases per month occurred as per the chart on the left. Children who recover from severe acute malnutrition are transferred to the supplementary feeding programme supported by the World Food Programme (WFP).

To ensure quality nutritional assessments being carried out in the refugee’s camps, UNICEF in collaboration with UNHCR has supported the TRCS to undertake a Standardized Expanded Nutrition Survey (SENS). The results of the survey have been disseminated in January 2018 and will be used to inform the development of nutrition action plan for 2018.
Health
Between January-December 2017, 34,468 children under five have been vaccinated against measles and polio and no outbreak of vaccine preventable disease has been reported. Malaria remains to be the main cause of morbidity accounting for 30 percent of illnesses among children under five in all the camps. To address this, UNICEF has distributed 20,211 insecticide treated mosquito nets to pregnant women and 194,236 people with malaria were treated with antimalarial medication in Mtendeli and Nyarugusu camps.

During the reporting period UNICEF continued to support ‘on arrival’ and routine immunization in all camps for children between zero to 18 months through the provision of vaccines while ensuring the cold chain is maintained by providing refrigerators to the three refugee hosting districts and to the health facilities in the three refugee camps. UNICEF continues to support the Tanzania Red Cross Society (TRCS) to improve the quality of maternal, newborn and child health services in health facilities in Nyarugusu and Mtendeli refugee camps through the provision of supplies (medicine & equipment), technical assistance and building the capacity of health providers.

WASH
Through the support from UNICEF, water supply to the refugees has improved, meeting the sphere standard with exception of Mtendeli camp. In Nduta, UNICEF supported in the provision of water by supplying a high capacity surface pump able to supply 1.26 million litres of water giving access to 15 litres per person per day (l/p/d) for 82,632 refugees. In Mtendeli, UNICEF provided a back-up generator to run the three borehole pumps benefitting 50,713 refugees. In Nyarugusu, UNICEF generator and an electric submersible water pump ensured water is supplied at the required standard of 15 l/p/d for 63,857 refugees. A total of 600,021 water guard tablets were distributed benefitting 2,160 refugees from households in remote parts of the camp with frequent water shortages so they could access safe water from nearby rivers and other open sources. UNICEF has ordered an additional high capacity surface pump and two electric submersible pumps as a back-up for the pumps in operation in the camp.

In response to a cholera outbreak in Kigoma, UNICEF supported the development of Kigoma Regional Cholera Response plan that is being rolled out and has provided 506,940 water purification tablets benefitting 20,845 people, and a field water quality test kit to the Regional Medical Office.

Education
A total of 70,235 (35,057 girls) Burundian children attend Pre-primary, Primary and secondary schools through UNICEF support. All primary schools were supported with scholastic materials distributed to all students and 3,210 textbooks on the new Burundian Curriculum were procured and distributed to children in grades 1-5 classes. In addition to materials and textbooks, UNICEF supported training of teachers to improve their use of teaching aids and understanding and use of new curriculum and preparation for national exams.

UNICEF in partnership with Oxfam and the Tanganyika Christian Refugee Services has been supporting WASH in the three camps covering 91,323 children both in schools and child friendly spaces to access to full services that meets the national school WASH guidelines. These facilities include a room for menstrual hygiene management and room for children with disabilities. In addition, 13,105 menstrual hygiene kits were distributed for pubescent girls in schools in the three camps. UNICEF also provided 96.3 metric tons of multi-purpose soap to support UNHCR’s general soap distribution for 322,059 refugees to combat high cases of skin diseases in the camps.
Through successful advocacy from UNICEF and UNHCR with the Governments of Tanzania and Burundi, two sessions of the national exams were successfully organized this year for Burundian Children in all three camps. A total of 1,317 Burundi refugee children (460 girls) in grades 9, 13 and 14 were able to sit for their national examinations in March 2017 with 59.2 per cent passing with internationally recognized certificates. The second examination round took place in October, 2017 for 1469 (561 girls) and results will be released by the end of January, 2018. UNICEF support covers all the exam costs: printing of exams, logistical movement of exam supervisors as well as the training to teachers who support the students leading up to the exam period.

Insufficient classrooms is a major challenge leading to a high pupil teacher ratio currently at 200:1. An additional 533 classrooms are needed to accommodate all the learners in a double shift system. With funding from USAID and Swedish Natcom, UNICEF will construct 120 semi permanent classrooms in 12 schools in Nduta to ease the congestion and expand access to quality education reaching up to 12,000 more children.

A Joint Education Needs Assessment (JENA) was conducted at the end of the year in all camps to identify immediate education priorities through an analysis of the capacities and needs of affected children, youth and other relevant stakeholders. The findings of the report will be used to refine the education programme in accordance with national and global standards that benefits both refugee and host communities in Tanzania.

**Child Protection**

During the course of the year, UNICEF provided 118 Recreation Kits and 110 Early Childhood Development Kits to support psychosocial and play needs of 11,400 children in child friendly spaces in all three camps, and also to UNHCR for use in GBV-related service facilities and refugee registration centres.

Unique to this refugee context has been UNICEF’s support to the Government of Tanzania in its deployment of 110 Government Social Welfare Officers (SWOs) from other districts in Tanzania who are already trained in case management. The SWOs were incorporated into the Plan International and IRC child protection teams to conduct best interest assessments (a critical first step in the identifying protection needs of children), ensure appropriate alternative care arrangements, and conduct case follow up including counselling. By year-end, there were 2,523 unaccompanied minors and separated children living in alternative care arrangements, in the case management system.

UNICEF signed a Programme Cooperation Agreement (PCA) with Plan International to bolster case management in Nduta camp, and pilot two initiatives: a community based positive parenting programme and a community based adolescent life-skills programme that builds on an existing peer educator programme already started by Plan. The latter component of the programme is designed to address prevention of gender-based violence, which is a persistent protection concern.

UNICEF’s Child Protection support also reaches the four refugee host community districts of Kasulu Rural, Kasulu Town, Kibondo, and Kakonko under the auspices of the UN Joint Programme for Kigoma Violence Against Women and Children (VAWC). This involves UNICEF, UNWOMEN, UNFPA, and IOM to “bridge the humanitarian-development divide” to identify ways in which the host district child protection system can be more inclusive of refugee children. This included UNICEF support to open a gender and child police desk in Kasulu district in which 483 cases were handled with 91 being children (81 Girls/12 Boys) and 392 women.

**Communications for Development (C4D), Community Engagement & Accountability**

This year a total over 220,000 refugees were reached with messages on the importance of vaccination, proper utilization of mosquito nets, attending ante-natal care services, timely delivery at health facilities, personal hygiene and sanitation, as well as proper infant and young child feeding practices. These messages were aimed at sensitizing the refugee community to take the lead role in prevention and control of communicable diseases, as well as emphasis on early health seeking behavior especially targeting pregnant mothers and families with small children.

This was a made possible through harmonization and dissemination of key C4D messages from different sectors of health, WASH and nutrition that were delivered by 295 Health Information Teams (HITs) reaching up to 1000 refugees per week by each HIT (Rob here I want to say that each HIT reaches 1000 refugees per week) in twelve months. These teams reach the community on daily basis through household visits, community meetings, music performances and school visits.

In the refugee hosting districts that frequently experience cholera outbreaks, UNICEF worked closely with the Regional Secretariat and the Local governments of Kigoma and Uvinza district to intensify Cholera prevention activities including
community sensitization on personal and environmental hygiene. The recently launched UN joint WASH initiative focuses on eliminating Cholera in refugee camps and high risk host communities of Kigoma region.

Media and External Communication

The UN Joint Programme in Kigoma was launched on 20th September 2017. This joint programme focusses on development gaps in refugee hosting districts which lag far behind national development indicators. UNICEF is leading two sectors; WASH and Protection and is a core partner for Education sector. During the launch, the UNICEF Representative inaugurated a gender and children’s desk at the police station in Kasulu district, which handles cases of children from the host communities and refugee camps

On 27th November 2017, the Kigoma Regional Commissioner with support from the UN launched the 16 days’ campaign to end violence against women and children as part of the national plan of action to end violence against women and girls in Tanzania (2017/18-2021/22). The key message was “Leave no one behind: End violence against women and girls”. There was a display of different items and entertainment with key messages to promote empowerment of women and girls and to ensure they are protected.

Security

The overall security situation in Kigoma region remained calm with few incidences of bandits intercepting vehicles travelling along the main roads between camps being reported. The police conducted a sweep to try clear areas that have been targets for ambushes. Host communities surrounding the refugee camps frequently protest against increased banditry incidents in their villages. There have been periodic protests within the camps mostly related to food ration cuts and changes in food distribution procedures. During field missions, UNICEF staff follow security procedures and no incidents involving UNICEF staff were reported during this period. Security procedures such as mandatory radio checks and escorts in areas that have had ambushes continue to be followed.

Funding

UNICEF is grateful to donors who have contributed in making a difference to the lives of the most vulnerable refugee children in Kigoma region, and for their contributions to support this largely underfunded refugee crisis and the hosting districts.

Tanzania’s 2017 Humanitarian Action for Children (HAC) appeal is US$6,991,000 and as of December 2017, only 36 per of the required funding has been received to support critical needs of refugees leaving a gap of 64 per cent. The funding gap creates major limitations in the capacities to respond to the immediate acute needs of refugee children across all sectors.

Continued and timely donor support is critical to scaling up the response to meet the remaining humanitarian needs of refugee children and hosting districts in Tanzania into 2018.

<table>
<thead>
<tr>
<th>Appeal Sector</th>
<th>Requirements</th>
<th>Funds available</th>
<th>Funding gap</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Requirements</td>
<td>Funds Received</td>
<td>Carry-Over</td>
</tr>
<tr>
<td>WASH</td>
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<tr>
<td>Total</td>
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</table>

Next SitRep: 28/February/2018

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