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Item 4 (a) of the provisional agenda*

Country programme document

Burundi

Summary

The country programme document (CPD) for Burundi is presented to the Executive Board for discussion and approval at the present session, on a no-objection basis. The CPD includes a proposed overall indicative budget of \$39,600,000 from regular resources, subject to the availability of funds, and \$114,500,000 from other resources, subject to the availability of specific-purpose contributions, for the period 2024–2027.

* [E/ICEF/2023/24](#).

Note: The present document was processed in its entirety by UNICEF

Programme rationale

1. Burundi is among the most densely populated countries in Africa, with an estimated population of 12.8 million,¹ 80 per cent of whom are working in the agricultural sector.² The country's population growth is rapid with an estimated fertility rate of 5.2 children per woman.³ Overall, 47 per cent of the population are children.⁴

2. With a gross domestic product per capita of \$221, most people are poor. The monetary poverty rate reaches 51.4 per cent of the population, while the multidimensional poverty rate is 53.1 per cent.⁵ Some 64 per cent of children suffer from at least three concurrent deprivations related to food, health, water, sanitation, housing, education or child protection.⁶ The socioeconomic impact of the coronavirus disease 2019 (COVID-19) pandemic, climate-related shocks and disease outbreaks, including cholera, aggravate an already difficult economic situation, especially for the most vulnerable. In 2021, Burundi ranked 187 out of 191 countries on the Human Development Index.⁷

3. Burundi children are highly vulnerable to climate change – Burundi ranks 165 out of 182 countries in the Notre Dame-Global Adaptation Initiative Country Index (ND-GAIN).⁸ The increasing risk of exposure to extreme storms, floods, landslides and drought affects basic social services as well as food security. While Burundi has pledged to reduce its carbon emissions by 12.6 per cent,⁹ the ND-GAIN index rates Burundi as 18 in the list of countries least ready to leverage investments for adaptation actions.¹⁰

4. The arrival of a new Government in 2020, the gradual transition towards political stability and increasing engagement with the regional and international community are providing momentum for peace and development. Between 2018 and 2022, the overall number of people in need of humanitarian assistance decreased from 3.6 million to 1.8 million and the number of internally displaced people from 127,832 to 83,588.¹¹ The natural disasters linked to climate change have accounted for about 84 per cent of displacements in the country in 2021.¹² In addition, the country hosts

¹ Institute for Statistics and Economic Studies of Burundi (ISTEEBU), *Demographic Projections at Municipal Level* (2020). Available in French at <https://www.insbu.bi/wp-content/uploads/2023/04/PROJECTIONS-COMMUNALES-020620-rapport-VF.pdf>.

² World Bank, "The World Bank in Burundi". Available at www.worldbank.org/en/country/burundi/overview.

³ World Bank, "Fertility rate, total (births per woman) – Burundi". Available at <https://donnees.banquemondiale.org/indicateur/SP.DYN.TFRT.IN?locations=BI>.

⁴ ISTEEBU, *Demographic Projections at Municipal Level* (2020).

⁵ ISTEEBU, *Report on the Integrated Household Living Conditions Survey in Burundi 2019–2020* (2021). Available in French at http://www.isteebu.bi/wp-content/uploads/2023/01/EICVMB_Rapport-final_Profil-et-d%E2%80%99EF%BF%BDterminants-de-la-pauvrete_2021-1.pdf.

⁶ National Institute of Statistics of Burundi (INSBU), Social Policy Research Institute and UNICEF, *Multidimensional and Monetary Poverty among Children in Burundi: Final report* (December 2022). Available at www.unicef.org/burundi/media/3791/file/Multidimensional%20and%20%20monetary%20poverty%20%20among%20children%20in%20Burundi.pdf.

⁷ United Nations Development Programme, *Human Development Report 2021–2022*.

⁸ University of Notre Dame, "ND-GAIN country index" (2020). Available at <https://gain.nd.edu/our-work/country-index/rankings>.

⁹ Burundi, *Contribution determined at national level 2020*, Annex (July 2021). Available in French at <https://unfccc.int/sites/default/files/NDC/2022-06/CDN%20%20Burundi%20ANNEXE%201.pdf>.

¹⁰ "ND-GAIN country index", 2020.

¹¹ United Nations Office for the Coordination of Humanitarian Affairs, *Humanitarian Transition Plan, 2023*.

¹² International Organization for Migration, "Internal Displacement Report, July 2021". Available at: <https://dtm.iom.int/reports/burundi-%E2%80%94-internal-displacement-report-july-2021>.

85,000 refugees, mainly in camps,¹³ and more than 200,000 Burundian refugees have been repatriated since 2017, with 21,788 in 2022.

5. Despite the ratification of the Convention on the Rights of Persons with Disabilities in 2014, the needs of children with disabilities often remain neglected in policies and programmes. Stigma, rejection, lack of awareness and lack of access to services adapted to their needs prevent children with disabilities from enjoying their rights.

6. While absolute budget allocations to the social sectors that benefit children have increased in recent years, the percentage of budget allocated to the key social sectors of health, education, social protection, child protection, water, sanitation and hygiene (WASH) decreased to 36.6 per cent of public expenditure in 2022–2023¹⁴ compared to 50.6 per cent in 2021–2022,¹⁵ with education and health getting 14.8 per cent and 9.6 per cent of the national budget in 2022–2023 respectively. The current budget allocations are insufficient to meet the needs of the population when considering its rapid growth.

7. Children aged 0–6 years are among the most vulnerable and suffer from significant deprivations. Between 2017 and 2021, the mortality rate for children under the age of 5 years decreased from 62 to 53 per 1,000 live births.¹⁶ Acute respiratory infections, malaria, diarrhoea and malnutrition are the main causes of these deaths. There has been limited progress in neonatal mortality, which decreased from 22.4 to 20.9 per 1,000 live births in the same period.¹⁷ This is due to a slow improvement in the supply of good-quality care. Health-care facilities provide 87.4 per cent of deliveries,¹⁸ but the postnatal consultation rate does not exceed 51.1 per cent¹⁹ because half of the facilities do not have the necessary staff and equipment. Despite good immunization coverage nationally (94 per cent)²⁰ among babies (0–11 months), pockets of unvaccinated children still cause occasional measles outbreaks and, in early 2023, cases of vaccine-derived poliovirus. Only 30 per cent of health facilities have basic drinking water services, with only 52 per cent having basic sanitation services.²¹

8. The stunting prevalence for children under the age of 5 years has remained at about 56 per cent for more than a decade, the highest rate in the world, and little progress has been made to reduce it.²² Causes include recurrent diseases, food insecurity, lack of access to nutritious food and inadequate feeding practices among children (only 13.3 per cent of children aged 6–23 months have access to a minimum acceptable diet),²³ poor maternal nutrition, household poverty, poor access to drinking

¹³ United Nations High Commissioner for Refugees, “Burundi” (May 2022). Available at <https://reporting.unhcr.org/document/2538>.

¹⁴ UNICEF, National Budget Brief, 2022–2023. Available at https://www.unicef.org/burundi/media/2866/file/3_ENG_Analysis_State_Budget%202022-2023.pdf.

¹⁵ Ibid.

¹⁶ United Nations Inter-Agency Group for Child Mortality Estimation, “Child mortality and stillbirth estimates” (January 2023). Available at <https://childmortality.org>.

¹⁷ Ibid.

¹⁸ Burundi, Ministry of Public Health and the Fight Against AIDS (MoH), General Planning Department, National Health Information System Department, *Health Statistics Yearbook 2020*. Available in French at http://minisante.bi/wp-content/uploads/annuaires_statistiques/Annuaire%20Statistique%202020.pdf.

¹⁹ Burundi, *Third Demographic and Health Survey in Burundi 2016–2017*, Key indicators (May 2017). Available in French at www.unicef.org/esa/media/5941/file/UNICEF-Burundi-Third-DHS-Summary-2017-FR.pdf.

²⁰ WHO, “Immunization Dashboard Burundi”. Available at <https://immunizationdata.who.int/pages/profiles/bdi.html>.

²¹ WHO/UNICEF, JMP 2022. Available at <https://washdata.org/data/household#!/bdi>.

²² Burundi, MoH and Ministry of Finance, Budget and Economic Planning, *National Survey on Nutrition and Mortality in Burundi 2022*.

²³ Ibid.

water (58 per cent of the population has drinking water within a 30-minute walk)²⁴ and sanitation (46 per cent of the population use improved sanitation facilities)²⁵ as well as a lack of good-quality health services. The fight against malnutrition needs a more holistic approach across sectors and communities.

9. The rate of children under the age of 5 years registered at birth increased from 75.2 per cent in 2010 to 84 per cent in 2016–2017; however, 34 per cent of children under the age of 5 years do not have a birth certificate²⁶ due to the cost, the distance from registration centres or its loss during forced displacement.

10. Young children lack early stimulation because of their parents' absence of awareness about its importance, as well as the burden of caregivers' household chores and livelihoods that leave little time for parenting. In addition, only 13.4 per cent of children of preschool age are enrolled²⁷ in the preschool system. Most preschool institutions are private, urban and unaffordable for poor families. Preschool education accounts for 0.03 per cent of the funds allocated to education.²⁸

11. The net enrolment rate in basic education is 88.4 per cent, with parity between girls and boys. However, significant disparities in enrolment persist for children in rural areas, who account for 90 per cent of those who have never attended school;²⁹ children from the lowest wealth quintiles;³⁰ and children with disabilities who are underrepresented in basic education making up only 0.4 per cent of the total school population.³¹ Every year, nearly 10 per cent of the 2.7 million pupils in the primary cycle drop out of school.³² The completion rate for primary education remains at 50 per cent, with girls performing better than boys.³³ Burundian students perform poorly, particularly in literary subjects, with 15 per cent of students reaching the 'sufficient' threshold in Kirundi and 55 per cent achieving 'sufficient' in mathematics at Grade 2 of basic education, and only 2 per cent of students reaching 'sufficient' in French at Grade 4.³⁴ Learning conditions also remain poor with an average teacher-student ratio estimated at 52.³⁵ Overall, 55 per cent of schools are without latrines and 54 per cent without water points,³⁶ and few girls have access to menstrual hygiene products and information.

12. Some 90 per cent of children aged 1 to 14 years have experienced some form of violence and 31 per cent of those aged 5 to 17 years are involved in labour.³⁷ More than one in 10 girls aged 15 to 19 years have experienced sexual violence.³⁸ The main causes are household poverty, and prevailing social and gender norms. In 2021, there

²⁴ Ibid.

²⁵ WHO/UNICEF, JMP 2022.

²⁶ *Third Demographic and Health Survey in Burundi* (2017).

²⁷ Ministry of National Education and Scientific Research (MENRS), "School Statistic Yearbook 2020–2021". Available in French at http://www.isteebu.bi/wp-content/uploads/2023/01/MENRS_Annuaire_Stat_TOME1_2020_2021preface.pdf.

²⁸ UNICEF, National Budget Brief, 2021–2022.

²⁹ United Nations Educational, Scientific and Cultural Organization (UNESCO), *Burundi – Education Sector Analysis 2021* (UNESCO Office for Africa International Institute for Educational Planning, 2021). Available in French at <https://dakar.iiep.unesco.org/en/resources/burundi-education-sector-analysis-2021>.

³⁰ Ibid.

³¹ MENRS, "School Statistic Yearbook 2020–2021".

³² Ibid.

³³ Ibid.

³⁴ MENRS, *Competencies and Performance Factors of Burundian Pupils in Grades 2 and 4: Reference situation – Project to improve learning at the start of schooling, 2020*. Available in French at https://crdes.sn/assets/publications/Rapport_Final_paadesco.pdf.

³⁵ UNESCO, *Burundi – Education Sector Analysis 2021*.

³⁶ *National Survey on Nutrition and Mortality in Burundi* (2022).

³⁷ *Third Demographic and Health Survey in Burundi* (2017).

³⁸ Ibid.

were an estimated 7,000 street children, 90 per cent of whom were boys.³⁹ Between February 2022 and February 2023, more than 400 children were in detention.⁴⁰ Child protection services are inadequate, with gaps in legislation and weak budgets.

13. Gender inequalities that start early in childhood intensify throughout adolescence. The chances of finishing post-basic education are higher for boys (21 per cent) than girls (15 per cent).⁴¹ During the 2019/20 school year, more than 1,200 pregnancies were recorded among schoolgirls. Adolescent pregnancies are often consequences of harmful social practices, sexual violence and exploitation, and lack of knowledge about, or access to, sexual and reproductive health information and services. The prevalence of HIV is higher among women (1.2 per cent) compared to men (0.7 per cent),⁴² while adolescents aged 15–19 years accounted for 29 per cent of 2,043 new infections in 2021.⁴³ The mother-to-child transmission rate of HIV remains high (15 per cent) while the coverage of paediatrics antiretroviral treatment is very low (32 per cent).⁴⁴ Few primary health facilities can deliver sexual and reproductive health care for adolescents and young people or mental health and psychosocial support services.

14. Between 2019 and 2021, the gross post-basic enrolment rate of adolescents aged 16–18 years decreased from 33.7 per cent to 29.2 per cent. In rural areas only 26 per cent access post-basic education compared to 53 per cent among their peers in urban areas.⁴⁵ The mismatch between the needs of the labour market and vocational training results in many young people contributing only marginally to the economy.⁴⁶

15. Children's opinions were sought as part of developing the country programme. They emphasized the importance of social protection, as well as the challenges of access to health, education, water and menstrual hygiene. Difficulties in getting food due to rising costs were also highlighted, as was the need for greater support in education and skills development and in addressing issues of violence and discrimination.

16. Lessons learned also show that:

(a) Stunting and children's diets remain a challenge with the need for greater emphasis on multisectoral approaches, using an approach that uses and reinforces food and social protection systems;

(b) Community-based interventions for early childhood development require a package of integrated multisectoral interventions;

(c) Social and behavioural change should be placed at the centre of all programmes, to address discriminatory norms and ensure gender-transformative and inclusive action; and

(d) Data collection using digitized platforms is necessary to enable faster evidence-based decision-making.

³⁹ Ministry of National Solidarity, Social Affairs, Human Rights and Gender, National Strategy for the Prevention of Street Children and Adult Beggars and their Community Reintegration (2021).

⁴⁰ Ministry of Justice, Reports on the prison situation, 2022–2023.

⁴¹ *Burundi – Education Sector Analysis 2021*.

⁴² *Third Demographic and Health Survey in Burundi (2017)*.

⁴³ Burundi, MoH, *Annual Report of the National AIDS and Sexually Transmitted Infections Control Programme, 2021* (August 2022). Available in French at http://minisante.bi/wp-content/uploads/pnls/RAPPORT%20ANNUEL%202021_PNLS-IST.pdf.

⁴⁴ *Ibid.*

⁴⁵ *Burundi – Education Sector Analysis 2021*.

⁴⁶ *Report on the Integrated Household Living Conditions Survey in Burundi 2019–2020*.

Programme priorities and partnerships

17. The vision of the country programme is that, by 2027, all girls and boys aged 0–18 years, especially the most vulnerable, survive, thrive, learn and acquire skills to develop their potential, are protected, and grow up in less poverty and thus are able to participate in the development of their communities.

18. The country programme is aligned with the 2018–2027 National Development Plan, Government of Burundi sector policies, the African Union Agenda 2063 and UNICEF Strategic Plan, 2022–2025, while adhering to UNICEF Core Commitments for Children. It derives from the United Nations Sustainable Development Cooperation Framework (UNSDCF) 2023–2027 for a more prosperous, inclusive Burundian society, resilient to climate change and other shocks, and contributing to its five strategic priorities of:

- (a) Inclusive and sustainable food systems;
- (b) Reinforced governance system and a more diversified and inclusive economy;
- (c) Social protection system;
- (d) Equitable access to quality basic social services; and
- (e) Improved management of environment and natural resources and preparedness and response to climate and human induced disasters.

19. UNICEF will contribute to the Government's efforts to implement the Convention on the Rights of the Child, the Convention on the Elimination of All Forms of Discrimination against Women, and other human rights treaties by supporting policies and programmes that achieve rights-based social systems and norms. UNICEF will combat gender-based discrimination and enhance inclusion, prioritizing interventions to catalyse systemic changes for a sustainable and durable impact.

20. The theory of change predicts that, if families' resilience to economic, health and climatic shocks is strengthened; if social sector mechanisms distribute resources equitably for sustainable development; if health, nutrition, education, water and sanitation, child protection and social protection services offer high quality integrated services, including to the most marginalized children; and if communities are aware of their rights and duties and participate in the prioritization, implementation and monitoring of development solutions, including by changing their attitudes towards children; then every child will survive, thrive and participate in the development of their community and country.

21. Improving the resilience of systems and communities will be at the core of the programme ensuring that development and humanitarian interventions reinforce each other, which will contribute to the operationalization of the humanitarian-development-peace nexus.

22. Given the high prevalence of stunting, the provision of an integrated package of interventions during the first 1,000 days will be prioritized to ensure children get the best possible start in terms of survival, growth and development.⁴⁷

23. UNICEF will introduce a geographic convergence approach to improve the effective delivery of services at the commune level. The areas with the highest rates

⁴⁷ UNICEF, *Cost-Benefit Analysis of Investments in Early Childhood in Burundi: Study report 2021* (UNICEF Burundi, January 2022). Available at <https://www.unicef.org/esa/documents/costbenefit-analysis-investments-early-childhood-burundi>.

of multidimensional deprivation according to the Multiple Overlapping Deprivation Analysis⁴⁸ will be prioritized and about 1.1 million children will be reached with multisectoral intervention packages.

24. UNICEF will use several strategies:

- (a) Ensure national budgets prioritize children and support families in innovative ways;
- (b) Programmatic and geographical convergence to maximize programmes' impact;
- (c) Social and behaviour change to enhance the demand for social services and promote favourable norms such as positive masculinity and parenting;
- (d) Community engagement in line with the principles of participation, inclusion and accountability towards affected populations;
- (e) Increase access to social protection given the poverty rates;
- (f) Systems strengthening and risk-informed programming to improve the resilience of communities and basic social systems to climate change and other shocks;
- (g) A holistic response to girls' needs (sexual and reproductive health and menstrual hygiene management, good-quality education and skills development), protecting them from violence and empowering them to become healthy and competent adults;
- (h) Promotion of the rights of children with disabilities in all programmes by advocating for disability-inclusive policy and legal frameworks, combating stigma and discrimination and empowering children with disabilities; and
- (i) Data, research and knowledge management for evidence-based decision-making and continuous programme improvement and innovation.

25. The country programme will have six components:

- (a) Health and nutrition;
- (b) WASH;
- (c) Education and skills;
- (d) Child protection;
- (e) Social policy; and
- (f) Programme effectiveness.

Every child survives and thrives with access to nutritious diets, good-quality nutrition services and primary health care, as well as nurturing practices

26. This component will contribute to the implementation of the National Health Development Plan so that every child has equitable access to good-quality health and nutrition services.

27. UNICEF support will build community resilience and capacities to respond to child and adolescent health, nutrition and their development needs through social and behaviour change, involving local leaders, solidarity groups and community members. UNICEF will promote the use of a package of essential family practices covering early childhood development needs including health, nutrition (including

⁴⁸ INSBU, Social Policy Research Institute and UNICEF, *Multidimensional and monetary poverty among children in Burundi* (2022).

early detection), early stimulation and birth registration. UNICEF will also support the early detection of paediatric HIV cases, while maintaining antiretroviral treatment for the prevention of mother-to-child transmission.

28. UNICEF will support the Government to build the capacity of health workers and equip health units, so that good-quality basic maternal, newborn, child and adolescent health and nutrition care (including nurturing care), including HIV/AIDS care for newborn and sexual and reproductive health for adolescents, can be provided. Emphasis will also be placed on improving emergency obstetric and neonatal care structures.

29. UNICEF will contribute to implementing a multi-system approach to nutrition which will help to address the multisectoral causes of malnutrition in all its forms. UNICEF will focus on child, adolescent and maternal nutrition and social protection systems, to ensure nutritious diets for children are accessible, affordable, acceptable and of high quality. UNICEF will work to strengthen advocacy to increase domestic and external funding for health and nutrition and to support the development of integrated policies, as well as supporting knowledge management and evidence generation. UNICEF will help strengthen the national supply chain system including building the capacity of staff in charge of its maintenance, and revising the national health information system to embed decentralized monitoring, as well as ensuring that multi-system efforts to improve nutrition are monitored.

Every child uses safe and equitable WASH services

30. This component will contribute to the implementation of the National Water and Sanitation Strategy to make children's and adolescents' access (including during emergencies) to safely managed WASH services that are climate-resilient, sustainable and equitable.

31. UNICEF will help strengthen the capacity of the communities to effectively manage WASH services with improved sector governance at community level. Communities will be trained on accountability mechanisms and the sustainable management of WASH services. Partnerships with adolescents and women will be promoted to address innovative solutions.

32. UNICEF will contribute to improving children's and adolescents' access to safe WASH services in households, health facilities and schools. UNICEF support will include the construction of climate-resilient water and sanitation infrastructures, alleviate girls' burden of fetching water, support the needs of children with disabilities and take into account the menstrual hygiene needs of adolescent girls. UNICEF will ensure that the environmental and social impacts of infrastructure are considered.

33. UNICEF will support the harmonization of sector policies and plans by supporting intersectoral coordination and promoting the strategic role of the private sector in scaling up successful models. UNICEF will help ensure that policies are more sensitive to children and their vulnerability to the impacts of climate change, and are more respectful of gender and the environment. UNICEF will support the Government and other local actors in mobilizing resources for WASH, including from climate-financing mechanisms, and will strengthen the capacities to coordinate, plan and monitor the implementation of sustainable WASH services.

Every child learns and acquires skills for the future

34. This component will contribute to the implementation of the Education Sector Plan 2022–2030 so that children, especially girls and the most vulnerable, have equitable access to good-quality preschool, basic and post-basic education services.

35. UNICEF will support efforts by the Government to increase access for the most vulnerable children and adolescents to preschool, basic and post-basic education, through the construction/rehabilitation of school infrastructure that is inclusive and takes account of climate change. UNICEF will support the development and implementation of awareness and community mobilization campaigns on education, gender perceptions, early childhood development and preschool as well as participation in school management.

36. UNICEF will work with the Government to develop an environment that is conducive to learning through the provision of adapted teaching and learning tools, including those that introduce digital education. The programme will support efforts to prevent and respond to violence in school, including gender-based violence in the school environment, while addressing gender inequalities in learning, and working closely with the child protection sector.

37. UNICEF will contribute to the Government's efforts to improve equitable access for adolescent girls and boys, both in and out of school, to blended and flexible learning pathways. To promote the engagement of adolescents, UNICEF will support the development of a volunteer and community engagement programme to enable adolescents' contributions to community change while developing skills that will prepare them for the workforce. UNICEF will use its flagship social messaging tool U-Report to gather information and opinions and support adolescents to strengthen community awareness of early childhood development and climate change and bring about positive change.

38. UNICEF will support improving the environment for education through sustained policy dialogue with stakeholders, particularly on equity. UNICEF will advocate for increased accountability at national and subnational levels, and for prioritized budgetary commitments for education and its efficient allocation. UNICEF will support evidence-based planning in education, including through the generation, dissemination and use of reliable and disaggregated data from Education Management Information Systems, as well as surveys, evaluations and research.

Every child is protected from violence, exploitation, abuse and neglect

39. This component will contribute to national efforts to ensure that children under 5 years of age have birth certificates and that girls and boys, especially adolescent girls, are protected from violence, exploitation and abuse, including in humanitarian situations.

40. To develop and implement strong social and behavioural change strategies for the Government, UNICEF will support evidence generation on the determinants of prevailing norms. Support to families and communities will focus on the promotion of positive parenting and positive masculinity through community engagement, partnerships with faith-based organizations and peer support for adolescent girls. There will be particular emphasis on preventing sexual and gender-based violence, which particularly affects adolescent girls, as well as promoting birth registration. Psychosocial support and referral to mental health services will be offered to children and adolescents, as well as parents. UNICEF will support interventions linking child protection with social protection, such as linking parenting support and cash transfers for vulnerable families, with the aim of addressing the different determinants of violence and exploitation.

41. Improving the availability and quality of protection services, including for the most vulnerable, will be based on strengthening the social service workforce, including community actors, and the establishment of a national child protection case management system and information management system. UNICEF will promote

stronger multisectoral programming for the prevention and response to violence, including sexual and gender-based violence. With the aim of attaining universal birth registration, the interoperability between health and civil registration systems will be strengthened. Access to child-friendly justice for children in contact with the law will be increased through alternatives to detention and sustainable reintegration measures.

42. UNICEF will contribute to strengthening the legal and policy framework for protection by advocating for, and providing technical support to, developing, revising and implementing laws, policies and administrative procedures. UNICEF will advocate for increased budgets for child protection and civil registration; and generate evidence on the prevalence of child protection issues and effective child protection interventions.

Every child has access to inclusive social protection and lives free from poverty

43. This component will contribute to efforts to increase the number of vulnerable children and adolescents benefiting from good-quality, inclusive and shock-responsive social protection and other essential social services.

44. UNICEF will support strengthening the national social protection system. This will include establishing a single registry, reviewing targeting criteria and designing a grievance redress system. UNICEF will work with community groups such as solidarity groups in social protection and service delivery mechanisms while strengthening the responsiveness of the system during emergency response situations.

45. UNICEF will strengthen the capacity of the Government and generate timely evidence to use it in planning, programming and budgeting. The evidence will feed into policy, budgeting and social service delivery processes and decision-making at national and subnational levels. UNICEF will also support relevant public financial management reforms, such as programme-based budgeting, strengthening open budget practices and fiscal decentralization.

Programme effectiveness

46. This component will coordinate the planned multisectoral interventions and ensure critical cross-sectoral priorities, such as social and behavioural change; climate change, resilience, gender transformation and inclusion are prominent across all programmes. This component will also contribute to enhancing the planned programme results through data; programme planning, monitoring and evaluation; communication, advocacy, partnerships and resource mobilization; and operations.

Summary budget table

<i>Programme components</i>	<i>(In thousands of United States dollars)</i>		
	<i>Regular resources</i>	<i>Other resources</i>	<i>Total</i>
Health and nutrition	7 500	42 000	49 500
WASH	5 000	11 500	16 500
Education and skills	7 200	37 000	44 200
Child protection	4 800	10 400	15 200
Social policy and advocacy	3 100	4 900	8 000
Programme effectiveness	12 000	8 700	20 700
Total	39 600	114 500	154 100

47. This country programme document summarizes the planned contributions of UNICEF to national results and is the principal mechanism for accountability to the Executive Board for results achievement and resources assigned to the programme at the country level. The responsibilities and accountabilities of managers at national, regional and headquarter levels are defined in the policies and procedures regarding the organization's programmes and operations.

48. The planning and monitoring of the programme will be coordinated by the Ministry of Foreign Affairs and Development Cooperation with the support of sectoral ministries.

49. As a member of the United Nations country team, UNICEF will lead the UNSDCF outcome 4 results group, the inter-agency group on partnerships and resource mobilization, and contribute to other groups/committees including the Humanitarian Advisory Team. As the lead agency for education, WASH, nutrition, child protection thematic groups, UNICEF will continue to work with development partners, public and private, including UNICEF National Committees, while diversifying its resource mobilization strategy. UNICEF will raise awareness about particularly vulnerable children and strengthen the capacity of the media, civil society and children to advocate for policy change and greater social accountability. UNICEF will continue its collaboration with the Independent National Commission on Human Rights.

50. Risks that could affect the achievement of programme outcomes include persisting limited national fiscal space, unequal management and implementation capacities of different national and subnational institutions, uncertainty of external support, and natural hazards. UNICEF will monitor them and implement mitigation measures including the use of the harmonized approach to cash transfers and follow-up missions.

Monitoring, learning and evaluation

51. UNICEF will collaborate with research organizations and the National Institute of Statistics of Burundi (INSBU) in conducting periodic surveys that provide good-quality data. UNICEF will work to strengthen real-time programme monitoring and the availability of disaggregated data to strengthen adaptive programme management.

52. UNICEF will assess its contribution to the outcomes of the UNSDCF in regular reviews with the Government and other partners. UNICEF will assist the country in

preparing the State party's next periodic report on the implementation of the Convention on the Rights of the Child and its Optional Protocols.

53. Evaluations included in the costed evaluation plan will be conducted to strengthen the accountability and enable the identification of high-impact, cost-effective strategies for scale-up.

Annex

Results and resources framework

Burundi – UNICEF country programme of cooperation, 2024–2027

<p>Convention on the Rights of the Child: all articles National priorities: National Development Plan 2018–2027</p>
<p>Corresponding Sustainable Development Goals: 2, 3, 4, 5, 6, 9 and 10</p>
<p>Related UNICEF Strategic Plan, 2022–2025 Goal Areas: 1–5</p>

UNSDCF outcomes	UNICEF outcomes	Key progress indicators, baselines (B) and targets (T)	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (in thousands of United States dollars)		
						RR	OR	Total
<p>Outcome 1: By 2027, the people of Burundi benefit from inclusive and sustainable food systems.</p> <p>Outcome 4: By 2027, the people of Burundi, including children, youth, women and the most vulnerable, have equitable and quality access to basic social services adapted to the life cycle.</p>	<p>By 2027, newborns, children, adolescents, women and communities have access to high-impact equitable health, nutrition and early childhood development interventions, including in humanitarian settings.</p>	<p>Percentage of children under 5 years of age who are stunted B: 56% T: 44%</p> <p>Percentage of children aged 6–23 months who consumed a minimum acceptable diet B: 13.3% T: 25%</p> <p>Percentage of children aged 0–11 months vaccinated with 3 doses of DTP-containing/Penta vaccine nationally B: 87% T: 96%</p>	<p>Nutrition and Mortality Survey (SMART+)</p> <p>District Health Information System 2 (DHIS2)</p> <p>Multiple Indicator Cluster Surveys (MICS)/ Demographic and Health Surveys (DHS)</p>	<p>Communities have increased capacity to respond to health and nutrition challenges</p> <p>Health facilities offer integrated package of health and nutrition interventions for children</p> <p>Government and partners have strengthened capacity to plan, finance, coordinate, health nutrition response</p>	<p>Concerned ministries</p> <p>World Health Organization (WHO)</p> <p>GAVI, the Vaccine Alliance</p> <p>Civil society organizations (CSOs)</p> <p>Private sector</p>	7 500	42 000	49 500

UNSDCF outcomes	UNICEF outcomes	Key progress indicators, baselines (B) and targets (T)	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (in thousands of United States dollars)		
						RR	OR	Total
Outcome 5: By 2027, the people of Burundi benefit from improved environmental and natural resource management practices and preparedness and response systems for natural and human-made hazards.		<p>Percentage of children aged 0–59 months with diarrhoea receiving oral rehydration salts B: 92% T: 95%</p> <p>Newborns receiving postnatal care within two days of birth B: 58.1% T: 79%</p> <p>Percentage and number of pregnant women living with HIV with lifelong access to antiretroviral therapy to prevent mother-to-child transmission and for their own health B: 86% T: 90%</p>						
	By 2027, children and their families, particularly the most vulnerable living in rural and peri-urban areas, have access to adequate and affordable WASH services, including in humanitarian settings.	<p>Proportion of population using at least basic drinking water services B: 58% T: 90%</p> <p>Proportion of population using basic sanitation services B: 46% T: 73%</p>	<p>Modular Survey of Household Living Conditions (ECVMBU)</p> <p>Nutrition and Mortality Survey (SMART+)</p> <p>JMP Joint Tracking Programme</p>	<p>Communities have capacity to manage WASH services and adopt good hygiene practices</p> <p>Households, schools and health facilities have increased capacity to provide climate-resilient and gender-sensitive WASH services</p>	<p>Concerned ministries</p> <p>African Development Bank</p> <p>CSOs</p> <p>Private sector</p>	5 000	11 500	16 500

UNSDCF outcomes	UNICEF outcomes	Key progress indicators, baselines (B) and targets (T)	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (in thousands of United States dollars)		
						RR	OR	Total
				Government and partners have strengthened capacity to plan, budget and monitor WASH interventions				
	By 2027, children and adolescents, especially girls and the most disadvantaged, have increased and equitable access to quality early childhood education, basic and post-basic education and transferable skills for an effective transition to adult life, including in humanitarian settings.	<p>Gross enrolment ratio in pre-primary education B: 13.4% T: 35%</p> <p>Primary education net enrolment rate B: 87.9% T: 97%</p> <p>Primary education completion rate B: 50% T: 60%</p>	Education Statistics Information System	<p>Preschool, basic and post-basic education facilities have increased capacity to provide inclusive access to children and adolescents</p> <p>Children including adolescents have improved learning environment in preschool, basic and post-basic education</p> <p>Government and partners have increased capacity to provide flexible learning pathways or transferrable skills for adolescents in and out of school</p> <p>Government and partners have increased capacity to monitor policies and strategies</p>	Concerned ministries CSOs	7 200	37 000	44 200

<i>UNSDCF outcomes</i>	<i>UNICEF outcomes</i>	<i>Key progress indicators, baselines (B) and targets (T)</i>	<i>Means of verification</i>	<i>Indicative country programme outputs</i>	<i>Major partners, partnership frameworks</i>	<i>Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (in thousands of United States dollars)</i>		
						<i>RR</i>	<i>OR</i>	<i>Total</i>
	By 2027, children under 5 years of age have birth certificates and girls and boys, especially adolescent girls, are progressively protected from violence, abuse and exploitation, including in humanitarian settings.	<p>Percentage of children under 5 years of age whose birth is registered and have a birth certificate B: 66% T: 75%</p> <p>Number of children who have experienced violence, exploitation, abuse and neglect reached by health, social work or justice/law enforcement services B: 2 579 T: 12 800</p>	<p>MICS/DHS</p> <p>Follow-up reports</p>	<p>Children, families and communities commit to shift social and gender norms and adopt positive practices to protect children from violence, abuse and exploitation</p> <p>Institutional and community child protection actors have increased capacity to provide quality and inclusive services for civil registration, restorative justice, prevention and response to violence and exploitation</p> <p>Government and partners have increased capacity to strengthen the legal and policy framework and create an enabling environment for the protection of children</p>	<p>Concerned ministries</p> <p>Independent National Human Rights Commission</p> <p>CSOs</p>	4 800	10 400	15 200

<i>UNSDCF outcomes</i>	<i>UNICEF outcomes</i>	<i>Key progress indicators, baselines (B) and targets (T)</i>	<i>Means of verification</i>	<i>Indicative country programme outputs</i>	<i>Major partners, partnership frameworks</i>	<i>Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (in thousands of United States dollars)</i>		
						<i>RR</i>	<i>OR</i>	<i>Total</i>
<p>Outcome 2: By 2027, the people of Burundi, especially the most vulnerable, benefit from a strengthened governance system and a more diversified and inclusive economy, including through regional integration.</p> <p>Outcome 3: By 2027, the people of Burundi, for each age group, especially the most vulnerable, use an adapted social protection system.</p>	By 2027, children and their families have access to quality, inclusive and shock-responsive social protection that reduces poverty in all its forms.	<p>Percentage of children living in multidimensional poverty B: 64% T: 58%</p> <p>Number of households reached by cash transfers through UNICEF-supported programmes B: 56 090 T: 145 000</p> <p>Proportion of total government spending on essential services (education, health and social protection) B: 48% T: 51%</p>	Analysis of overlapping multiple deprivations	<p>Government and partners have strengthened capacity to mobilize and allocate resources equitably</p> <p>Government and partners have strengthened capacity to expand child-friendly and shock-responsive social protection programmes</p>	<p>Concerned ministries</p> <p>Parliament</p> <p>Court of Accounts</p> <p>INSBU</p> <p>CSOs</p>	3 100	4 900	8 000
	The country programme is coordinated and managed effectively.		Programme monitoring	<p>Effective implementation and coordination of multisectoral programmes, inclusion of persons with disabilities and gender mainstreaming</p> <p>Operational support</p> <p>Quality and timely data</p>		12 000	8 700	20 700

<i>UNSDCF outcomes</i>	<i>UNICEF outcomes</i>	<i>Key progress indicators, baselines (B) and targets (T)</i>	<i>Means of verification</i>	<i>Indicative country programme outputs</i>	<i>Major partners, partnership frameworks</i>	<i>Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (in thousands of United States dollars)</i>		
						<i>RR</i>	<i>OR</i>	<i>Total</i>
				Programme planning and monitoring Social and behavioural change Climate change and resilience Programme evaluation Communication, advocacy, partnerships and resource mobilization				
						39 600	114 500	154 100