**Highlights**

- Through COVAX facility, UNICEF continues to support the delivery and distribution of COVID-19 vaccine doses. Over 1.2 million people have received at least one dose of vaccine in Rwanda.
- Over 2,000,000 people continue to be regularly reached with key messages on COVID-19 prevention and access to services.
- 7,443 children aged 0-6 years (51 per cent girls) are enrolled in ECD services in Mahama refugee camp through centre-based and home-based settings.
- In 2021, UNICEF has mobilized US$ 1.8 million, representing 30 per cent of the funding needed to address the urgent needs of women and children.

**UNICEF’s Response and Funding Status**

<table>
<thead>
<tr>
<th>Area</th>
<th>Activity</th>
<th>Funding Status</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Health &amp; Nutrition</strong></td>
<td>Children vaccinated against measles in refugee camps</td>
<td>60%</td>
</tr>
<tr>
<td></td>
<td>Funding status</td>
<td>41%</td>
</tr>
<tr>
<td></td>
<td>Number of Children reached with HP</td>
<td>17%</td>
</tr>
<tr>
<td></td>
<td>Health facilities with adequate hygiene facilities</td>
<td>54%</td>
</tr>
<tr>
<td></td>
<td>Funding status</td>
<td>35%</td>
</tr>
<tr>
<td><strong>WASH</strong></td>
<td>Women and Children accessing GBV risks</td>
<td>43%</td>
</tr>
<tr>
<td></td>
<td>Unaccompanied and separated children reunified</td>
<td>21%</td>
</tr>
<tr>
<td></td>
<td>Funding status</td>
<td>24%</td>
</tr>
<tr>
<td><strong>Child Protection</strong></td>
<td>Refugee children reached with quality, inclusive education</td>
<td>100%</td>
</tr>
<tr>
<td></td>
<td>Funding status</td>
<td>34%</td>
</tr>
<tr>
<td><strong>Education</strong></td>
<td>People reached through messaging on prevention</td>
<td>100%</td>
</tr>
<tr>
<td></td>
<td>People engaged on EVD through RCCE actions</td>
<td>90%</td>
</tr>
<tr>
<td></td>
<td>Funding status</td>
<td>15%</td>
</tr>
</tbody>
</table>

**UNICEF Appeal 2021**

**US$ 6 million**

**Situation in Numbers**

- 2,000,000 children in need of humanitarian assistance (UNICEF 2021 HAC)
- 4,000,000 people in need (UNICEF 2021 HAC)
- 146,831 Refugees (UNHCR December 2020)

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**UNICEF’s Response and Funding Status**

**UNICEF Appeal 2021**

**US$ 6 million**
Funding Overview and Partnerships

UNICEF Rwanda Country Office continues to mobilize funding to be able to maintain and scale up its humanitarian action to address the essential and critical needs of refugees – more than half of whom are women and children – in the current context of heightened vulnerability in and outside of camps due to COVID-19 pandemic.

As of 30 September, UNICEF has raised US$ 1.8 million, representing 30 per cent of the appealed $6 million amount needed to continue delivering life-saving services to refugees, children and families affected by the COVID-19 pandemic and its socio-economic impacts.

Situation Overview & Humanitarian Needs

In addition to the continuing assistance to people who have sought refuge in Rwanda, the sharp increase in COVID-19 cases which started in June, the emergence of new variants, and the increase in the number of deaths related to COVID-19 were among the salient elements of the humanitarian context during the third quarter of 2021.

To control the spread of the COVID-19 pandemic, the Government of Rwanda (GoR) decided a lockdown in the city of Kigali and in 8 out of 30 districts of the country from 17 to 31 July. The lockdown has been lifted since the beginning of August following an improvement of the pandemic situation while maintaining other preventive measures to control the spread of the virus. As of 28 September 2021, with the support of the COVID-19 Vaccines Global Access (COVAX) facility, more than 1.2 million people have received at least one dose of the vaccine and around 2.8 million tests have been conducted. Rwanda has cumulatively reported 1,259 COVID-19 deaths related to COVID-19, almost the triple of those reported by end June (420 deaths)¹.

As the pandemic continues, significant gap persists with regards to the coverage of WASH services in the refugee camps and host communities. Despite funding constraints, UNICEF continues to support the GoR to mitigate the secondary effects of COVID-19 on children and families, including in providing Personal Protective Equipment (PPE) for community health workers (CHWs) and child protection volunteers. UNICEF also continues to support the GoR response to refugees and preparedness efforts to prevent other deadly outbreaks, including EVD.

Summary Analysis of Programme Response

Health

UNICEF through Health Section is supporting the GoR to continue the response to Covid-19 as a member of COVAX facility and member of the coordination-SAG committee with focus on three pillars of the national deployment and vaccination plan. For the vaccine pillar, UNICEF provided technical assistance for logistics, vaccines delivery, and the management of the main vaccination camp in the city of Kigali. UNICEF distributed 10,568 boxes of surgical masks and 53,572 sanitizers during the reporting period. For the diagnostic pillar, UNICEF supported the procurement and the delivery of 27,000 test kits; and for the Therapeutic pillar, UNICEF is supporting Oxygen project to the tune of US$ 500,000 and facilitated the identification of needed items to enhance the GoR oxygen system.

UNICEF continued its support to Burundi refugees in Mahama camp focusing on the availability of vaccines and immunization services for all children under the age of five. For the reporting period an additional 2,873 children under five were vaccinated making a total of 5,985. In 2021, there is a decrease in the number of vaccinated children compared to the year 2020. This is mainly due to the ongoing returning movements of Burundi refugees from Mahama Camp.

Nutrition

To ensure continuity of nutrition specific and sensitive programmes countrywide, during this reporting period, UNICEF continued to support districts to maintain the promotion of dietary diversity and other good nutrition practices to vulnerable families with children under five years, supporting them to fight against malnutrition among their children. During the reporting period, 3,984 pregnant and lactating women received messages on infant and young child feeding (IYCF) in the COVID-19 context. Those messages included the promotion

of good nutrition, optimal breastfeeding in the context of COVID-19, hygiene, and the preparation of balanced diet through cooking demonstration.

UNICEF also continued to provide technical, financial and supply support to health structures for the management of severe acute malnutrition (SAM). According to Health Management Information System, 4,304 under five children were admitted for SAM (out and in patient), including 3,093 who were treated and cured, 98 who were referred to in patient for treatment, and 53 who defaulted. In addition, UNICEF continued its technical support to SAM programme in the Mahama refugee camp where 24 children (including 15 girls) were admitted for SAM. All of them were treated and cured.

Due to insufficient funding, planned training for 31,000 health staff and community health workers on maternal infant and young child feeding in the context of COVID19 has not started despite the easing of COVID-19 related measures. Around US$ 150,000 continue to be needed to cover the cost of this training.

**Education**

During the reporting period, UNICEFs continued to support the implementation of the UNHCR-UNICEF Blue-Print Plan 2021.

UNICEF continued partnering with ADRA and UNHCR to support the early childhood development (ECD) programme in Mahama refugee camp. In line with the school calendar where ECD/pre-primary and lower primary were completing the third term of the school year up to mid-September, children aged 0-6 years in Mahama refugee camp benefitted provision of early learning, childcare and stimulation services in ECD centres and home-based ECD settings. A total of 7,443 children aged 0-6 years (3,804 girls and 3,639 boys) benefitting integrated ECD services in 39 existing ECD stimulation rooms and 88 home-based groups. Among them, 5,787 children aged 3-6 years (2,897 girls and 2,890 boys) were supported by trained caregivers in ECD centres, while 1,656 children aged 0-3 (907 girls and 749 boys) were supported in 88 home-based ECD settings by trained parent leaders. A slight increase in numbers of children was noted mainly due to scale-up of the home-based ECD approach to 12 villages increasing the number of groups from 72 to 88. The ongoing relocation of refugees from Congolese refugee camps to Mahama camp has also contributed to increased numbers of children and further increase can be predicted for next quarter. During the reported period, UNICEF and ADRA kept enforcement of COVID-19 prevention measures in the ECD settings.

Ahead of the new school year that will start in the second week of October, UNICEF has initiated procurement of PPEs and COVID-19 prevention supplies meant for ECD centres in refugee settings. The procured items include infrared thermometers, reusable face masks, sanitizers, dishwash and handwashing soap. These supplies will support strengthening prevention measures in the ECD settings across different refugee camps in Rwanda to contain spread of the virus.

In regards with education inputs on COVID-19, UNICEF supported the Ministry of Education and Rwanda Basic Education Board (REB) in the preparation of the Back-to-school Campaign in collaboration with other partners. With the overall theme of "Don't lose your dream, go to school", the 2021 Back-to-school Campaign aims at supporting the return to school of all children for the new school year 2021-22. Such a campaign is required as school closures and concerns about the impact of COVID-19 on the safety of children have raised fears that many vulnerable children may drop out of school without a concerted effort by school personnel and education authorities, which will include community mobilization and media efforts.

Assessment of the impact of COVID-19 on education of vulnerable children: This assessment which initially was focusing on refugee children, children with disabilities (CwD), pregnant adolescents and adolescents bearing children and teachers that started to be conducted by UNICEF in partnership with UNHCR and GoR is being amended to incorporate the aspect of impact of COVID-19 on girls education. The findings from the assessment will provide information on how COVID-19 has impacted the learning of girls compared to boys as well as vulnerable groups particularly refugee children and CwD, detailing how learners form their choice, possible pathway at each level and proposing strategic recommendations to address issues.

**Child Protection**

UNICEF in collaboration with Save the Children International (SCI) and UNHCR, and as part of the Blueprint For Joint Action, continued to support child protection activities in Mahama refugee camp. The support goes mainly to strengthening the capacity of community-based child protection volunteers to assist children at risk in the camp including outreach support. Since this period has been characterized by on-going lockdown and closure of Child and Youth Friendly Spaces (CYFS) and the Library in the camp as part of COVID-19 containment measures, there have been limited entertainment opportunities for the 23,437 children (11,854
boys and 11,583 girls) currently in the camp. This has had some effects on their mental health and psychosocial wellbeing.

Support for mental health and psychosocial support (MHPSS) was prioritized with outreach and home-based recreational opportunities created in line with COVID-19 prevention measures. This support is provided as part of the Blueprint for joint action with UNHCR. Recreational and learning materials were distributed to 251 children with disabilities (147 boys and 104 girls) for home-based play and games. Other inclusive sports were also conducted outside the CYFS which has remained closed due to COVID-19 containment measures. The activities conducted including athletics, arts, painting and reading books resourced from the camp Library. In total, 285 Child Protection Committee (CPC) members (195 males and 90 females) were trained to facilitate home-based and outreach recreational activities within agreed COVID-19 prevention measures. Two additional Child Friendly Spaces (CFS) were renovated in addition to the five completed between October 2020 and June 2021. This will improve accessibility and promote inclusive sports for all children including CwD, once the CFS are reopened.

COVID-19 restriction measures reduced access to protection services for children. To address potential protection issues during periods of lockdowns, home visits were intensified to ensure continuity of support to children and families in need. During the period July to September, 739 visits were carried out by trained volunteers to support unaccompanied and separated children (UASC), to prevent child protection risks and to identify, monitor and report cases of abuse, neglect, and violence. In total, 29 child protection cases were reported during this period including 19 (10 boys and 9 girls) Sexual and Gender Based Violence (SGBV) cases. Support was also provided to 197 separated children (118 boys and 79 girls) and 64 unaccompanied children (49 boys and 15 girls), including placement of eight (4 boys and 4 girls) of them in foster care.

UNICEF continues to work with the Ministry of Health/Rwanda Biomedical Center and NCD Agency to build the capacity of child protection social workforce to effectively handle child protection issues during pandemics. This stems from current experience with the ongoing COVID-19 pandemic and previous lessons from both the EVD preparedness in 2019 that have shown a gap and the need to integrate child protection within the health response to pandemics. The situation analysis report based on lessons learnt from COVID-19 and as part of the ongoing consultancy to support this integration was validated and the consultant is now working on developing guides and training materials for both health and child protection workforce on how to provide child protection and MHPSS to affected children and their families during pandemics.

**Water, Sanitation and Hygiene (WASH)**

UNICEF continued to support the GoR in infection prevention and control (IPC) for COVID-19 through secondment of an IPC Specialist in the Ministry of Health. During the reporting period, the IPC Specialist provided critical technical support for effective IPC and COVID-19 response, including training of 454 people on IPC, and continued technical support for decontamination of households, facilities, vehicles, burial management and monitoring of IPC measures compliance. The IPC specialist also supported a knowledge, attitude and practices (KAP) survey on the prevention of healthcare-associated COVID-19 infections in Kicukiro and Gasabo districts. Based on the findings of the survey, an IPC remedial action plan was developed to reduce the infections acquired during the process of receiving health care for the health facilities in these districts.

During the reporting period, UNICEF partnered with WaterAid to support the construction of handwashing facilities in 50 additional schools in host communities surrounding the refugee camps, under the Blueprint for Joint Action with UNHCR. These handwashing facilities, once completed, will benefit over 50,000 school children. In addition, as part of COVID-19 response, work on the construction of handwashing facilities in 32 additional health care facilities and the dissemination of COVID-19 prevention and sanitation and hygiene messages targeting 130,000 people has also commenced in partnership with WaterAid.

**Communication for Development (C4D), Community Engagement and Accountability.**

During the reporting period, UNICEF and partners continued to reach over 2,000,000 people (52 per cent female and 48 per cent male) with key messages on COVID-19 prevention and access to services. This was done through mass media (radio, TV, print and online), as well as social media, messengers, Internet of Good Things, WhatsApp Tree, and various community engagement mechanisms.

Up to 150,000 people participated in COVID-19 prevention and vaccine acceptance rumour tracking and feedback collection activities in Mahama refugee camp and host community in July.
Through UNICEF partnership with a popular FM radio station (KissFM), more than 2,000,000 young people and celebrities have continued to be mobilized as agents of change and engaged in COVID-19 prevention, vaccine acceptance, mental health awareness and education, tackling stigma as a crucial means to reducing the burden of the COVID-19 pandemic and its consequences.

Regarding leveraging the use of technology and innovation to respond to COVID-19, UNICEF, WHO and Rwanda Health Communication Centre (RHCC) contributed to building the capacity of 60 Risk Communication and Community Engagement (RCCE) task force members at district level. They were trained on the use of Internet of Good Things and WhatsApp Tree to reach masses with information. They were also trained on community participation/engagement and adverse event following immunization (AEFI). The expectation is for the trainees to continue to mobilize communities at the grassroots level and regularly share updated information with their audiences.

UNICEF in collaboration with RHCC and Rwanda Media Council, trained 25 journalists from community radios on media and community engagement roles in strengthening COVID-19 recommended behaviours and addressing vaccine hesitancy. The purpose was to enhance their knowledge so that they can undertake community sensitization through their various channels.

UNICEF in partnership with RHCC, Association of Rwandan Journalists and WaterAid, organized a strategic communication workshop on the role of the media in reinforcing COVID-19 recommended behaviours and address vaccine hesitancy. As a result of this initiative, 30 key journalists have written and published various stories from all over the country. The stories focus on ongoing COVID-19 prevention, vaccine communication efforts, as well as COVID-19 pandemic impacts on children and parents, including the most vulnerable. The stories also make a call to action on various issues.

Change in the national campaign slogan #SINDOHOKA" - "I will never give up" calls for more of individual accountability, this significantly contributed to building more trust in the RCCE and COVID-19 vaccine communication efforts. According to the July community rapid assessment report on COVID-19 undertaken by UNICEF, nearly 89 per cent of the respondents of the survey said they are willing to get vaccinated if the vaccine is available to them.

UNICEF developed and adapted materials for persons with disabilities and were disseminated through the ongoing partnership with UPHLS and other partners. Approximately 10,172 persons with disabilities (5,565 females) were reached with this information across 20 districts. These activities are ongoing as spelled out in the ongoing partnership.

**Humanitarian Leadership, Coordination and Strategy**

The Ministry of Emergency Management and UNHCR continue to be the overall coordinators of inter-agency efforts. The humanitarian strategy agreed between the Government and development partners is to provide comprehensive services to refugees and seek fulfilment of their basic rights. This includes provision of registration, shelter, household equipment, food and water, maintaining sanitation and hygiene, health and nutrition services, education, and protection. Refugee coordination meetings are held each month and include donors and development partners.

UNICEF and UNHCR also finalised a new agreement “The Blue Print” which aims to strengthen their current collaboration in 2021 and 2022 to address the needs and rights of refugees, and build new synergies including to support advocacy, fundraising and inclusion of refugees in national policies and strategies.

The Ministry of Health continues to lead the COVID -19 response with the support of WHO and all UN and development partners. UNICEF is supporting the COVAX roll out, risk communications efforts, and children access to essential services including education, child protection, WASH and health and nutrition.

UNICEF alongside WHO, WFP, UNHCR and IOM contributed to establishing COVID-19 technical coordination mechanisms, with groups focusing on health, social protection, food security, and the socio-economic impact of COVID-19. UNICEF has been actively involved in the first three of these groups, co-leading the group on social protection. These mechanisms are keeping development partners informed on the COVID-19 response, collect and share feedback for the Government, and coordinate the development partner response to COVID-19.

In the capacity of Co-Chair of RCCE Technical Working Group, UNICEF in collaboration with RHCC organized three technical meetings during the reporting period. The purpose of the monthly meetings is to
share updates for SINDOHOKA and other ongoing related RC initiatives as well as learning from each other’s innovative ways related to RCCE.

Human Interest Stories and External Media

In this reporting period, UNICEF Rwanda produced a video on students sitting for their National Exams in Rwanda, a milestone achievement despite COVID-19 disruptions. The video gained widespread popularity and was shared on the UNICEF regional and global platforms as well.

- Human Interest Stories produced during Quarter II, 2021:
  
  **Students Sitting in National Exams in Rwanda, a milestone achievement despite COVID-19 disruptions**
  Despite COVID-19 disruptions, Marie Chantal aspires to finish her education and achieve her dreams
  **Learning by Playing - a powerful approach to help children deal with the uncertain times of COVID-19**

- Social Media posts:

  **Twitter:**
  1. https://twitter.com/unicefrw/status/1429475735098560517
  2. https://twitter.com/unicefrw/status/1438030019947896832
  3. https://twitter.com/unicefrw/status/1414836997944905728
  4. https://twitter.com/unicefrw/status/1437695238966071302
  5. https://twitter.com/unicefrw/status/1430124072608882688

  **Facebook:**

  **Instagram:**
  1. https://www.instagram.com/p/CTy71zKgRGE/
  2. https://www.instagram.com/p/CTY6zN2Nm4D/
  3. https://www.instagram.com/p/CS_HvUNq7/
  4. https://www.instagram.com/p/CRVeF3cA7q1/

Next SitRep: 31 December 2021


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## Summary of Programme Results

<table>
<thead>
<tr>
<th>Sector</th>
<th>Overall needs</th>
<th>2021 target</th>
<th>Total results</th>
<th>Change since last report</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Health &amp; Nutrition</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Children vaccinated against measles in refugee camps</td>
<td>20,000</td>
<td>10,000</td>
<td>5,985</td>
<td>▲ 2,873</td>
</tr>
<tr>
<td>Children aged 6 to 59 months with severe acute malnutrition (SAM) admitted for treatment</td>
<td>6,000</td>
<td>6,000</td>
<td>4,328</td>
<td>▲ 3,328</td>
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<tr>
<td>Health care facility staff and community health workers trained on infection prevention and control</td>
<td>55,000</td>
<td>55,000</td>
<td>0</td>
<td>No Change</td>
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<tr>
<td>Facility staff and community health workers trained on maternal, infant and young child feeding, including in the context of COVID19</td>
<td>31,000</td>
<td>31,000</td>
<td>0</td>
<td>No Change</td>
</tr>
<tr>
<td><strong>WASH</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of Children reached with hygiene promotion(^2)</td>
<td>1,000,000</td>
<td>500,000</td>
<td>85,480</td>
<td>No Change</td>
</tr>
<tr>
<td>Health facilities with adequate hygiene facilities(^3)</td>
<td>200</td>
<td>100</td>
<td>54</td>
<td>No change</td>
</tr>
<tr>
<td><strong>Child Protection</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Women and Children accessing gender-based violence risks mitigations prevention/response</td>
<td>500,000</td>
<td>500,000</td>
<td>7,000</td>
<td>No change</td>
</tr>
<tr>
<td>People with access to safe channels to report sexual exploitation and abuse(^4)</td>
<td>30,000</td>
<td>30,000</td>
<td>29,674</td>
<td>No change</td>
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<tr>
<td>Unaccompanied and separated children reunified with their primary caregiver or provided with family-based care/alternative care services(^5)</td>
<td>2000</td>
<td>2,000</td>
<td>1,572</td>
<td>▲ 66</td>
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<tr>
<td><strong>Education</strong></td>
<td></td>
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<tr>
<td>Refugee children reached with quality, inclusive education</td>
<td>75,000</td>
<td>30,000</td>
<td>30,000</td>
<td>▲ 2,473</td>
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<tr>
<td>Schools implementing safe school protocols (infection prevention and control)</td>
<td>8,145</td>
<td>3,000</td>
<td>3,000</td>
<td>▲ 365</td>
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<td><strong>Communication for Development (C4D)</strong></td>
<td></td>
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<td></td>
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<tr>
<td>People reached through messaging on prevention and access to services</td>
<td>2,000,000</td>
<td>2,000,000</td>
<td>2,000,000</td>
<td>No change</td>
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<tr>
<td>People engaged on EVD through RCCE actions</td>
<td>200,000</td>
<td>200,000</td>
<td>180,000</td>
<td>▲ 150,000</td>
</tr>
</tbody>
</table>

\(^2\) Target for hygiene promotion was increased to 500,000 children based on the needs
\(^3\) Target for WASH was increased to 100 health facilities based on the needs
\(^4\) Includes all IZU trained on VAC + professionals
\(^5\) This includes unaccompanied and separated children in camps
### Annex B

#### Funding Status

<table>
<thead>
<tr>
<th>Sector</th>
<th>Total Requirements</th>
<th>Funds available 2021</th>
<th>Funding gap</th>
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</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Funds Received</td>
<td>Carry-Over</td>
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<tr>
<td></td>
<td></td>
<td>Current Year</td>
<td>from 2020</td>
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<tr>
<td>Health and Nutrition</td>
<td>1,750,000</td>
<td>580,662</td>
<td>128,967</td>
</tr>
<tr>
<td>Water, Sanitation and Hygiene</td>
<td>750,000</td>
<td>241,054</td>
<td>22,840</td>
</tr>
<tr>
<td>Child Protection, GBVIE and PSEA</td>
<td>1,000,000</td>
<td>241,054</td>
<td>82</td>
</tr>
<tr>
<td>Education</td>
<td>1,000,000</td>
<td>141,054</td>
<td>195,872</td>
</tr>
<tr>
<td>Communication for Development,</td>
<td>1,500,000</td>
<td>183,284</td>
<td>48,947</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>6,000,000</strong></td>
<td><strong>1,387,109</strong></td>
<td><strong>396,709</strong></td>
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