Landlocked and densely populated, Rwanda (estimated population 12.7 million) has made important economic and structural reforms. It recorded strong economic growth over the past two decades, reaching 9.4 per cent in 2019. Rwanda now aspires to reach Middle Income Country status by 2035 and High-Income Country status by 2050 through a series of National Strategies for Transformation that aim to achieve the Sustainable Development Goals (SDGs).

In 2021, the government continued to contain COVID-19 and reopen socio-economic activities. The International Monetary Fund (IMF) reports Rwanda’s GDP growth to be 5.1 per cent, compared with -3.4 per cent in 2020. The government invests substantially in children’s welfare, with the national budget invested in priority sectors for children growing from FRW 567.9 billion in 2017/18 to FRW 1,035 billion in 2021/22. COVID-19 and related restrictions were likely to cause 550,000 to fall into poverty in 2021, according to the World Bank.

Maternal and child mortality rates have stagnated despite intervention having increased (the proportion of children aged 0-59 months with diarrhoea who received oral rehydration solution increased from 28 per cent in 2014/15 to 42 per cent in 2019/20). Prevention of Mother to Child Transmission of HIV/AIDS (PMTCT) coverage remained above 95 per cent, and country-led efforts to validate elimination of MTCT continue. Improvements are threatened by the COVID-19 pandemic – the maternal and community health programme report of July 2020 to June 2021 found that only 87 per cent of children were vaccinated with three doses of pentavalent vaccine.

Nutrition represents an unfinished agenda. Despite low levels of wasting (1.1 per cent) and the low prevalence of underweight (7.7 per cent), stunting in under-five children (33 per cent) and anaemia in under-five children and women (37 per cent and 13.1 per cent respectively) remain above acceptable levels. Stunting affects more boys (37 per cent) than girls (29 per cent). Children in rural areas are more affected (36 per cent) than those in urban areas (20 per cent) and the difference in stunting between the lowest (49 per cent) and the highest wealth quintiles (11 per cent) has increased since 2014/15. Only 22 per cent of Rwandan children aged 6-23 months are fed a minimum acceptable diet, while exclusive breastfeeding decreased from 87 per cent in 2014/15 to 81 per cent in 2019/20. Overnutrition is increasing, particularly among women in urban areas, with overweight increasing from 37 per cent in 2014/15 to 42 per cent in 2019/20.

Following pandemic-related school closures for most of 2020, schools reopened fully in February 2021. The National Examination and School Inspection Authority reported that 95 per cent of primary school students had re-enrolled by March 2021, helped by back-to-school initiatives. Some 450,000 students took national exams in July 2021, despite some districts being under lockdown. The education budget has been protected relative to other sectors, with investment on school infrastructure and teacher recruitment prioritized.

The full impact of the pandemic cannot yet be analysed. 2019 data shows net primary enrolment is 98 per cent, but there are high levels of repetition (10 per cent) and dropout (7 per cent) from primary school, plus challenges in transition rates from primary to lower secondary (72 per cent). UNESCO data reports 121,348 out-of-school children and that enrolment in pre-primary education remains low (25 per cent). Many children therefore start primary school late and are ill-prepared – this may be related to children’s repetition or dropout from primary school.

Access to early childhood development (ECD) services has increased, with 24 per cent of children
aged 3-6 years receiving organized early learning in 2019/20 compared to 13 per cent in 2014/15. The number of children who are developmentally on-track has also increased from 63 per cent to 76 per cent. This reflects the increased provision of integrated ECD services – through UNICEF-supported programmes, 19,753 children (10,384 girls, 9,369 boys) accessed integrated ECD services - this included 7,443 children (3,804 girls, 3,639 boys) in Mahama refugee camp.

UNICEF support to position child protection within Rwanda’s social sector has seen increased attention by government and lawmakers. A lot however still needs to be done to translate this recognition into government investment in child protection – fiscal funding allocations remain low. Children continue to face significant risk of abandonment, neglect, abuse and exploitation. For instance, data shows that 50 per cent of girls have experienced some form of violence during their childhood. This situation has been exacerbated by the COVID-19 pandemic which has heightened the risks of child neglect, abandonment and exposure to domestic violence during periods of lockdown. UNICEF continues to work to improve the situation of children and the operational context for child protection. Significant progress has been made in strengthening child protection systems.

Despite continuing efforts to increase access to water, sanitation and hygiene (WASH) services, progress remains slow. In 2020, 55 per cent of Rwanda’s population had access to basic drinking water services while 61 per cent had access to basic sanitation services in 2020. Just 25 per cent of households had access to a handwashing facility with soap and water in 2020 (2019/20 Rwanda Demographic and Health Survey, RDHS). Urban areas are better served than rural areas.

UNICEF assisted the National Institute of Statistics of Rwanda (NISR) to develop a multiple overlapping deprivations analysis using the 2019/20 RDHS. The recent creation of the National Child Development (NCD) Agency through the merger of the National Commission for Children and the National ECD Programme requires capacity building of middle managers to drive the coordination of child welfare priorities. UNICEF has built on experience in nutrition budgeting to engage more strategically in the planning and budgeting processes with the NCD Agency.

UNICEF’s programming was bolstered by high-impact strategic communication and outreach. Its social media platforms have been growing, especially Instagram (which more than doubled in 2021). UNICEF reinforced its presence in the news media/online space – it featured in 30 media reports, UNICEF staff were interviewed at least once every month, and 18 human-interest stories and 7 press statements were published on www.unicef.org/rwanda.

**Major contributions and drivers of results**

The programmatic and operational challenges continued in 2021 due to pandemic-related prevention and containment measures such as restrictions on travel and meetings, as well as full lockdowns. Many workshops were delayed, and monitoring field visits did not take place as regularly or as frequently as desired. Despite these challenges, UNICEF Rwanda ensured effective and efficient annual implementation of the Country Programme, achieving planned results and compliance on all performance indicators.

UNICEF leveraged its role as co-chair of technical working groups (including maternal and child health (MCH) and community health) to strengthen systems for the future. For example, with direct technical support from UNICEF, Rwanda developed the Community Health Investment Case. This, plus the community health policy developed in 2020 and integrated community health training manuals, guided the roll-out of the new polyvalent community health programme to three districts – it is expected to reach all districts in 2022. The development and implementation of digital health initiatives (such as Rapid-Pro) were accelerated, enabling access to real-time data and promoting
evidence-based decisions. Support to advanced intrapartum and newborn care was extended to 22
district hospitals and health centres in their catchment areas, through intensive clinical mentorship, and
provision of life-saving medical equipment.

UNICEF continued to provide technical support to the government on COVID-19 Vaccines Global
Access (COVAX) procurement, logistics and vaccine rollout. It also supported the provision of
vaccination devices, COVID-19 test kits and personal protective equipment (PPE). UNICEF also
continued to support in-country logistics, including distribution and rollout of COVID-19 vaccines.
UNICEF procured 27,000 COVID-19 test kits and PPE for about 58,000 community health workers,
plus more than 3 million syringes to support both routine and COVID-19 vaccinations.

The HIV prevention package was scaled up to three more districts, making five in total. UNICEF also
supported pilot HIV self-testing among adolescents and young people in these five districts, reaching
nearly 3,000 adolescents – lessons from this pilot phase will shape future interventions. During 2021, a
total of 58,175 adolescents and young people were reached with HIV prevention education messages
through peer-led interpersonal communication, and 22,941 adolescents and young people (13,347 girls,
9,594 boys) received HIV testing services at various entry points.

Rwanda Biomedical Centre (RBC, the lead government agency for pandemic management) and the
NCD Agency continued their collaboration to provide nurturing care through the health system. This,
coupled with support from UNICEF and others, enabled the implementation of the national parenting
curriculum (covering care to children from birth to 24 months). UNICEF also provided support to
adapt and implement the care for caregivers framework – 157 community frontline workers were
trained, and they supported 4,120 families through home visits and counselling.

UNICEF continued its support to improve the quality of both nutrition-specific and nutrition-sensitive
interventions. Efforts were made to improve dietary diversity and reduce stunting in children underive in 14 target districts. Essential nutrition-specific interventions were supported, including Vitamin
A supplementation for more than 1.3 million children under five. Growth monitoring and promotion
was supported for 1,503,833 under-five children. UNICEF provided ready-to-use therapeutic food
(RUTF) and therapeutic milk and lobbied the government to include these commodities in the national
budget.

National systems to deliver quality interventions for maternal, infant and young child nutrition were
strengthened. This included the peer-to-peer community support model and the child scorecard
programme, which was scaled up in 17 districts. Governance capacity was strengthened in policy
development, planning and coordination. This included support to finalize the national nutrition policy,
to develop the adolescent nutrition booklet and to finalize the community health worker training
package. UNICEF also continued its partnership with the women’s parliamentary forum (FFRP).
Nutrition budget briefs analysing the budget allocations to nutrition interventions were developed with
the Ministry of Finance and Economic Planning (MINECOFIN).

When schools fully reopened in February 2021, several children were at risk of school dropout.
UNICEF, Rwanda Basic Education Board (REB) and stakeholders therefore conducted a back-to
school campaign with the slogan ‘Don’t lose your dream, Go back to school’. The campaign, extended
over seven months, aimed to ensure all children (including vulnerable children) are back in school and
learning. As part of the implementation of a blended learning approach, UNICEF supported the
digitalization of learning materials for pre- and lower primary school.

UNICEF is the grant agent of the USD 30 million Global Partnership for Education (GPE) Rwanda
Education Sector Programme Implementation Grant. It supported the Ministry of Education
(MINEDUC) with Year 1 implementation and is now working on Year 2 planning.
Data remains a challenge for the education sector, and UNICEF continued to work with MINEDUC to integrate data systems for ease of use. By the end of 2021 policy and procedures for the education management information system had been drafted and the framework for education metadata had been developed – this initiative builds on the teacher management information system launched in June 2021.

GIGA – connecting all schools to the internet – made good progress in 2021, thanks to strong government ownership supported by UNICEF and the International Telecommunications Union (ITU). Of the 63 schools in the GIGA pilot (some 50,000 students), 43 are now connected – the others should be connected by early 2022. Teachers (1,941) in all pilot schools were trained on digital literacy, and UNICEF procured 400 laptops for GIGA schools.

UNICEF continued to support MINEDUC in increasing access to education for children with disabilities – 1,692 children with disabilities (872 boys and 820 girls) accessed learning in 60 inclusive model schools and 189 inclusive cluster schools. In partnership with Humanity and Inclusion, physical accessibility was improved in 30 schools and 3,700 teachers (1,998 men and 1,702 women) were trained in inclusive pedagogy. In partnership with REB, 24 accessible digital textbooks were developed for upper primary grades.

UNICEF continued to support marginalized girls in schools in the lowest performing districts, addressing teacher capacity and negative social norms. Boys are included too. By the end of 2021, remedial education was reaching 13,906 students (74 per cent girls) in 151 schools.

In September 2020, the government launched the Generation Unlimited (GenU) Initiative, aiming to ensure that everyone aged 10–24 is in school, training or employment by 2030. In response, UNICEF and the Imbuto Foundation expanded their partnership with the Ministry of Youth and Culture, and Digital Opportunity Trust Rwanda to operationalize ten youth centres providing digital literacy, entrepreneurial and life skills – more than 5,000 youths were reached in 2021.

UNICEF has supported an assessment of child protection services to recommend areas for systemic improvement and to establish the best approach to case management. The professional child protection workforce were trained as trainers on three issues – violence against children, child protection in emergencies and disability inclusion. More than 890 Inshuti z’Umuryango (IZU/Friends of the Family) sector and district officers were subsequently trained on the ‘children in emergencies’ module.

UNICEF supported the development of RIB’s first comprehensive standard operating procedures and training of investigators to ensure child-friendly investigation and processing of suspects – 270 investigators have been trained to date. RIB has also been supported to launch a pilot child-friendly space (CFS), which includes a separate private space for all children while waiting and being interviewed.

With UNICEF support, coordination structures to protect children online are now operational. These include a national technical working group and a steering committee. The 4-year implementation plan for the child online protection policy has been drafted.

UNICEF continued to work closely with the NCD Agency in ensuring continuity of child protection interventions and awareness of protection risks during the COVID-19 pandemic. UNICEF provided technical, financial and material support for continuity of remote services (including phone-based case management) by district child protection and welfare officers, IZU reporting through a digital platform and the national hotline for reporting cases. IZU supported almost 500,000 children through family visits and telephone calls.

UNICEF supported RBC and the NCD Agency to collaborate and develop the capacity of child
protection and health professionals to handle protection risks affecting children during the pandemic.

UNICEF also supported the government to extend the WASH management information system to operate in 13 more districts. A climate risk assessment for WASH was undertaken, and work began on developing a climate rationale for WASH, guidelines on climate-resilient programming and WASH sector financing strategy.

Some 14,515 people gained access to basic sanitation and handwashing facilities and more than 2 million people were reached with messages on safe hygiene practices and COVID-19. As part of the Blueprint for Joint Action with UNHCR, permanent group handwashing facilities were constructed in 85 schools, benefiting some 82,250 children. Over 13,000 children attending 900 home-based ECD centres benefited from sanitation facilities and WASH supply packages provided to households. As part of support for the COVID-19 response, 27 health centres were provided with durable handwashing facilities. UNICEF supported the Ministry of Health (MOH) in effective infection protection and control (IPC) through an IPC specialist. Over 7,500 people were trained on sanitation and hygiene promotion, building quality latrines and on COVID-19 IPC.

Following the eruption of Nyiragongo Volcano in the Democratic Republic of Congo (DRC) in May 2021, critical WASH supplies provided by UNICEF benefited over 3,000 displaced people who had moved to Rwanda. UNICEF, together with NCD Agency, Plan International and Save the Children, supported the identification and emergency/temporary placement of 788 unaccompanied and separated children (400 boys, 388 girls) in foster families. Most of these children were reunited with families and have returned to the DRC. UNICEF also provided recreational materials for child- and youth-friendly spaces as part of the immediate child protection response.

UNICEF contributed to policy discussions on the socio-economic impact of COVID-19. In April, UNICEF analysed the Budget Framework Paper 2021–2024 to examine the extent to which priority sectors for children are being considered – findings were shared with CSOs and presented to parliament. In November, UNICEF published its fifth budget brief, highlighting allocations to children’s priorities for the 2021/22 fiscal year.

UNICEF expanded its public finance portfolio through the Joint Programme on SDG Financing, commencing key analytical works such as a fiscal space analysis for social sectors and a sustainable WASH financing strategy. Work continued with MINECOFIN on budget transparency and new financial resources were mobilized to expand collaboration in public financial management. UNICEF supported participatory mechanisms to engage children, adolescents and other stakeholders in planning and budgeting, in consultation with the NCD Agency and MINECOFIN.

The modelling of nutrition-sensitive social protection (Cash Plus) interventions was completed in 12 administrative cells and continues in five cells under the umbrella of the Joint Programme for Social Protection together with WFP and FAO. Extremely poor households benefited from integrated case management and referral and were supported to access nutrient-rich fruit and vegetables as well as livestock. Village savings and lending associations (VSLAs) were rolled out targeting different groups (including the youth) leading to increased entrepreneurial activity and financial inclusion. These interventions were supplemented with social behaviour change communication activities implemented in partnership with Urunana Development Communication. Tools and guidelines to train para-social workers nationwide were institutionalized and rolled out.

Strategic partnerships with the Association of Rwandan Journalists and The New Times paid dividends – journalists were mobilized for key events, and UNICEF spokespersons were quoted or appeared in news articles on a dozen occasions. UNICEF was active in key advocacy milestones including Global Hand Washing, World Toilet Day, World Children’s Day and the International Day of Persons with Disabilities. Strategic communications on key issues including child online protection, mental health
and COVID-19-related behaviour were regularly broadcast, and advocacy campaigns were published on the country office social media platforms.

UNICEF continued to highlight the issue of children and young people with disabilities through Activate Talks events, where individuals with direct experience of disability share their stories. UNICEF also supported the design and rollout of national campaigns on mental health, getting back to school, and to address stigma and discrimination against children with disabilities. A 5-year social and behaviour change strategy and a 2-year action plan to promote routine immunization were developed, and UNICEF continued assisting the government to implement the national integrated ECD, nutrition and WASH behaviour and social change strategy. Itetero radio and TV programmes were broadcast and included live quizzes and call-in features, allowing UNICEF to interact with communities. Over 100,000 people (52 per cent female) living in the Mahama refugee camp and host communities were engaged in COVID-19 risk communication and community engagement (RCCE) efforts.

UNICEF led the design and implementation of a study to assess attitudes towards children with disabilities – 81 per cent of the respondents believed that institutions are the best place for raising such children. The findings were widely disseminated and informed a set of cross-sectoral social and behaviour change interventions. A study on routine immunization found that about 5 per of parents/caregivers were not bringing their children for vaccination because of religious beliefs, gender roles, infrastructure barriers and fear of COVID-19.

GenU Rwanda continues to grow under the strong leadership of the Ministry of Youth and Culture and in collaboration with government, CSO and private sector partners. In 2021, the youth ministry and UNICEF launched two challenges for young people to formulate innovative ideas related to national development and COVID-19 recovery. These challenges will conclude in January 2022 and winners will receive grants to implement their ideas. The Ministry of Youth and Culture also organized a capacity building initiative for over 50 youth organizations, covering key issues such as project management, leadership skills, entrepreneurship, understanding of child protection, proposal writing and mental health. Partners (including UNICEF, CSO and private sector organizations) donated their time to facilitate the training sessions. There is ongoing discussion with the Ministry of Youth and Culture on an initiative to bring together youth and private sector organizations in a series of co-creation workshops to find solutions to the challenges faced by young people moving from school to work. This will be taken forward in 2022.

UNICEF provided technical and financial support to develop, implement and finalize the 2019/20 RDHS. NISR was supported to provide capacity building, and PME (in partnership with communication, advocacy and partnerships) worked on community rapid assessment of the COVID-19 response. The country office has been involved in a regional initiative – real-time assessment the COVID-19 response – by providing inputs and coordinating data collection.

Achievements in the harmonized approach to cash transfer (HACT) depended on collaboration with programme sections and working with UNICEF implementing partners. During 2021, the office used eTools and 21 partners were registered. HACT assurance activities were also supported to ensure accountability and proper use of UNICEF resources. No major risks were found in 2021.

The country office played critical role in the deployment of COVAX and other government-planned vaccination activities related to COVID-19 – 7.4 million vaccines worth USD 12 million were received under COVAX during the year. The office laid foundations for innovation and technology for development through review and integration of ICT/T4D functions into existing programmes. A portfolio of T4D-supported programme results has been adopted, including support to the digital transformation of healthcare.
UN Collaboration and Other Partnerships

UNICEF leads or co-leads 10 sector or DP coordination groups, including Education, Social Protection, RCCE etc. In the UN, UNICEF leads the Social Protection Joint Programme, the Results Group on Human Capital, three sub-groups of the OMT (HR, procurement and ICT), and the Common Premises Working Group. UNICEF also participates in the SDG Fund’s Innovative Financing Joint Programme, and JPs for Youth, Gender, Data, Nutrition and Health.

UNICEF partnered with 14 national and 13 international NGOs in 2021, and presentations and meetings were held with the Network of International NGOs and the Rwanda Civil Society Platform. UNICEF was also newly partnered/funded by public donors such as the US Government. Norway supported the disability inclusion programme as the enabler for the results achieved in 2021.

UNICEF undertook strategic partnerships with radio stations, the Rwanda Association of Journalists, the Private Sector Federation, private companies such as Airtel, Bank of Kigali, Institute of Legal Practice and Development etc. Rwanda’s First daughter Ms. Ange Kagame recorded a video on positive parenting tips, focusing on developing a baby’s brain through play.

UNICEF continued to partner with 13 Ministries and affiliated agencies.

UNICEF ensured logistics support to government on procurement and delivery of COVAX vaccines and devices to help speedy roll-out of COVID-19 vaccination.

UNICEF and UNESCO collaborated under a multi-country programme funded by the UN Partnership to Promote the Rights of Persons with Disabilities. The national ECD agenda was supported via the NCD Agency and agreements with CSO partners, and children aged 3-6 in Mahama refugee camp received school-readiness programmes through partnerships (including UNHCR) to support the Ministry of Emergency Management.

The social policy portfolio has attracted new development partners following the pandemic. UNICEF’s engagement with NCD Agency’s planning and finance departments was strengthened through technical assistance for more integrated central planning and budgeting, and monitoring of decentralized nutrition governance.

UNICEF is the co-chair of the RCCE technical working group for COVID-19 prevention and vaccine uptake and coordinates all RCCE activities in this sector. UNICEF also manages multiple partnerships including the CEO Forum, promoting Children’s Rights and Business in the mining sector and institutional relationships with Airtel and MTN.

UNICEF also supported NISR to produce and disseminate statistics such as 2019/20 RDHS, achieved through UNICEF’s technical support, and the implementation of the Joint Programme of Data with NISR and several UN agencies.

UNICEF supported UNDAP II implementation and played a key role as the chair and secretariat of one of the largest results groups which focuses on health, nutrition, education, ECD and WASH.

Partnership with UN agencies have resulted in cost savings and financial gains. Operations has become a strategic partner with programme sections to deliver HACT to implementing partners through joint quality assurance and timely disbursements.
UNICEF’s experience in health logistics has been invaluable during the pandemic. The MOH continued to receive COVID-19 vaccine doses through COVAX, bilateral agreements and direct government procurement. UNICEF increased efforts to coordinate vaccine and syringe arrivals – including in-country distribution and delivery – and ensure that vaccines were utilized before expiry dates. UNICEF advocated that syringes be donated alongside vaccines and provided direct procurement support to mitigate syringe shortages.

**Strengthening disability systems and institutions requires partnerships beyond UNICEF.** UNICEF, working collaboratively with partners such as GIZ, supported the National Council of Persons with Disabilities in the ongoing development of the Disability Management Information System. This innovative tool supports the identification and registry of persons with disabilities, and facilitates multisectoral service mapping, provision and reporting. It will also complement existing efforts to strengthen data and intersectoral coordination. UNICEF is already strengthening internal coordination and inclusive office practices with the reactivation of the country office Disability Taskforce.

**Technology and data continue to grow in importance.** UNICEF contributed to the upgrade of DHIS-2 with new applications – the scorecard, a bottleneck analysis and the action tracker – to improve data visualization and analytics. These innovations were designed to improve routine MCH services, but COVID-19 interventions also benefited – everyone receiving a COVID-19 vaccine was directly registered into DHIS-2, and invitations for second doses were sent by SMS. Online correspondence and using smart phones to share progress and mentor service-providers, plus community radio, digital means such as WhatsApp groups and field-based coordinators, ensured continuity of health services during lockdowns. The community adolescent peer-led platform was also leveraged to promote COVID-19 prevention messages.

**The country office continually explores innovative approaches to programmatic problem solving.** Breakthroughs in innovation and technology application resulted from consistent dialogue between programme sections and operations/ICT. Similar success was seen in strengthened accountabilities in HACT, owing to internal partnership and dialogue. Technology such as interactive voice response (IVR) is increasingly important, especially given the challenges of COVID-19. In response to rapid changes in the business environment, the country office has used three strategies: a ‘Solutions Team’ to develop responsive activities; using innovation and technology to leverage the thriving ICT ecosystem in Rwanda; and more efficient use of resources in a context of declining funding. By negotiating individual contracts, the office saved US$ 223,000 in 2021.

**Inequalities in the access and use of digital technology remain an issue.** The 2019 education statistical yearbook shows that only 35 per cent of primary schools have internet connectivity and only 58 per cent of primary schools have ICT infrastructure for teaching and learning. These inequalities reduce the accessibility of opportunities for learning, employment and civic engagement. The pandemic and a move to online and blended learning has highlighted the need to accelerate investment in ICT in education and to increase digital connectivity, especially for the most marginalized students. The GIGA programme is part of the solution and 2021 saw strong government ownership of GIGA. The need for a comprehensive approach that also covers teacher training, provision of devices, and availability of content is clearly understood.

**The importance of working face-to-face was realised.** The country office learned that, although remote working can keep things moving, learning, training, new brainstorming and building teams work best in person. A hybrid of remote and face-to-face approaches will continue in 2022, giving flexibility to staff while encouraging in-person collaboration.
Dealing with the unexpected requires an agile approach. As grant agent for the Rwanda Education Sector Programme Implementation Grant, UNICEF embedded technical assistance within MINEDUC to support GPE processes. However, COVID-19 restrictions meant that some programmes had to be reimagined. In the remedial education programme (which focuses on girls) it was not possible to bring communities together to address gender norms. Re-thinking led to a switch to other media (radio and TV) to communicate messages on gender equality and gender norms. In the Learning Through Play programme, because face-to-face training sessions were delayed, agreement was reached with the government to develop videos of good teaching practice which can be used as an alternative to face-to-face training.

The pandemic highlighted the lack of institutional and workforce preparedness in child protection. Efforts have been made to build more responsive and adaptive child protection systems to all types of emergencies. The main lesson learned from the pandemic is that child protection is an essential component of preparedness, response and recovery during emergencies – this lesson is being transformed into specific guidance on child protection in health emergencies.

Peer-to-peer engagement among private companies and businesses is effective. UNICEF has engaged with influential businesses on sharing best practice and investment in child-friendly spaces and has piggybacked on their marketing channels to amplify COVID-19 and other critical messaging. A UNICEF-published business case for employer-supported childcare showed that such investment is not simply a social responsibility objective but can increase profits – 16 out of 19 tea companies invested over USD 300,000 in child-friendly workspaces and family-friendly policies, and childcare has been institutionalized in the contracts of all tea companies. Two mining companies are now investing in child-friendly workspaces too. Peer-to-peer learning visits have had wide influence, with rice and horticulture companies learning from the success of the tea sector. A CEO forum has been set up to bring together CEOs who share a common vision for children’s wellbeing.

The medium affects the message. While the country office social media platforms have a significant and increasing following, the rate of engagement on posts remains disappointing. The local language (Kinyarwanda) will therefore be used in social media posts, and the Kinyarwanda version of the website will be regularly updated. The use of influencers on social media and other platforms is being considered in 2022. Similarly, changing the tone of a national campaign from SHISHOZA ‘Think Twice’ (instructional) to SINDOHOKA ‘I will never give up’ (individual accountability) created more trust in the government-led RCCE. And a radio partnership specifically tailored for young people (KISS FM) helps to mobilize young people as agents of change and fights ‘message fatigue’.