



UNICEF Burundi/2020/Le Du

Children participate in a COVID-19 awareness session during the back-to-school campaign organized by UNICEF in Ruyigi.

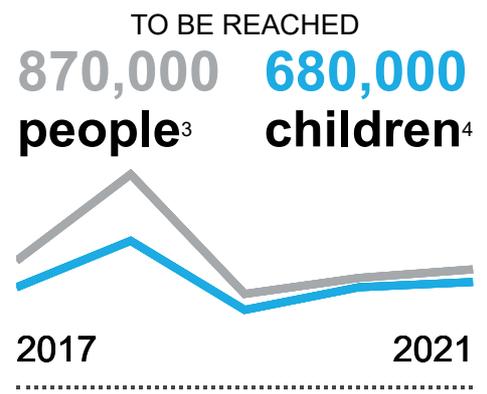
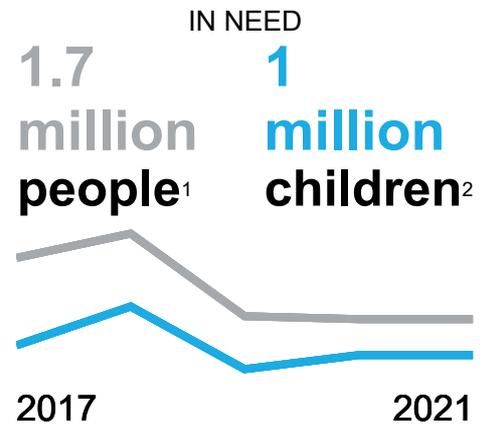
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Humanitarian Action for Children

Burundi

HIGHLIGHTS

- Burundi is experiencing recurrent humanitarian crises, including high incidences of malaria, cholera and measles; natural disasters such as floods, landslides and drought; population movements; and the socio-economic crisis that has been ongoing since 2015. In recent years, the country has also confronted the potential spillover of the Ebola outbreak in the Democratic Republic of the Congo in recent years, and in 2020, faced the coronavirus disease 2019 (COVID-19) pandemic.
- UNICEF and its partners are mobilizing a multi-sectoral approach to support affected and at-risk populations. The strategy will emphasize pooling resources, linking humanitarian action and development programming and strengthening the resilience of communities and systems. Preparedness, prevention and control will be essential to limiting the spread of COVID-19 and reducing its impacts on the population.
- In 2021, UNICEF requires US\$27 million to respond to the multiple humanitarian crises affecting Burundi. This includes US\$8 million for the first-line response to the COVID-19 pandemic.



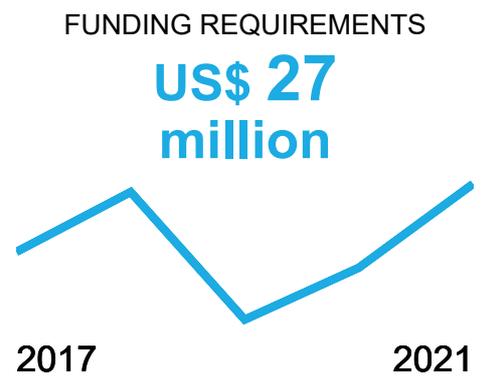
KEY PLANNED TARGETS

 **52,000**
children admitted for treatment for severe acute malnutrition

 **580,000**
people accessing a sufficient quantity of safe water

 **170,000**
children/caregivers accessing mental health and psychosocial support

 **650,000**
people reached through messaging on access to services



Figures are provisional and subject to change upon finalization of the inter-agency planning documents.

HUMANITARIAN SITUATION AND NEEDS

Burundi is one of the poorest countries in the world and one of the most densely populated countries in Africa.⁵ More than two thirds of Burundian children live in poverty.⁶ Years of socio-political and economic crisis have had a serious impact on the population's access to basic services and the resilience of systems and communities to cope with recurring crises. At the beginning of 2020, 1.7 million people in Burundi, including over 1 million children, were in urgent need of humanitarian assistance.⁷

Burundi is particularly vulnerable to climate change and is affected by natural disasters that cause significant human and material damage throughout the year. Over 114,000 people – 83 per cent of the internally displaced population in Burundi – are displaced due to disasters.⁸ While the number of displaced persons has been steadily declining since 2018, in 2020, the number of displaced persons increased due to recurring high winds and rainfall.⁹ Increased temperatures and dry spells predicted for 2021 will negatively impact harvests and generate additional population movement, putting children at risk of protection violations, school drop out and undernutrition.¹⁰

In 2020, Burundi's fragile health system confronted multiple health emergencies, including malaria, cholera, measles and COVID-19, among other issues. Since 2018, the country has mobilized efforts to prevent and prepare for a potential spillover of the Ebola outbreak from the Democratic Republic of Congo. The threat of an Ebola outbreak in 2021 remains significant, and Burundi will need to continue to strengthen its capacity to respond.

Following the 2020 elections, Burundi is expected to see a significant return of refugees, particularly those that sought refuge in Rwanda and the United Republic of Tanzania. Since 2017, over 88,000 Burundian refugees have received assistance to return home through the voluntary repatriation process supported by the United Nations High Commissioner for Refugees (UNHCR). Approximately 390,000 Burundians (56 per cent children) are still hosted in the Democratic Republic of the Congo, Rwanda, the United Republic of Tanzania and Uganda.¹¹ Less than half of Burundian households report that their children have birth certificates,¹² further undermining access to health and education services.

The nutritional situation of children remains poor. Burundi has one of the highest rates of stunting in the world, with more than half of children under 5 years suffering from chronic malnutrition.¹³ More than 63,000 Burundian children are at risk of severe acute malnutrition (SAM).¹⁴

SECTOR NEEDS



Nutrition

63,000 children need SAM treatment¹⁵



Water, sanitation and hygiene

540,000 people lack access to safe water¹⁶



Child protection, GBViE and PSEA

245,000 children need protection services^{17,18}



Education

150,000 children need access to school¹⁹

STORY FROM THE FIELD



In April 2020, 90 per cent of Gatumba's population lost their belongings to the river. Some 10,000 homes were swept away by heavy rains and water flowing down from the hills. After losing his belongings, Jean-Pierre realized that his school was flooded, on the verge of collapse and would have to shut down.

UNICEF and its partners supported the affected population by deploying mobile clinics and providing access to safe water and adequate hygiene, child protection services and psychosocial support in displacement sites. Children also received learning materials to enable them to continue their schooling.

[Read more about this story here](#)

Jean-Pierre holds the catch of the day from a water puddle in Gatumba. He fishes to support his family, which was affected by the floods in April 2020.

HUMANITARIAN STRATEGY

In 2021, UNICEF will reach children and families in Burundi affected by natural hazards, disease outbreaks, malnutrition and population movement with life-saving services. UNICEF's interventions will be aligned with inter-agency strategies, including the Burundi Humanitarian Response Plan, the COVID-19 Strategic Response Plan and returnee reintegration and refugee plans.²⁰

In line with its Grand Bargain commitments,²¹ UNICEF will strengthen the linkages between humanitarian action and development programmes in Burundi, and reinforce the resilience of systems and communities. This will include expanding disaster risk reduction and emergency preparedness interventions and establishing medium- and long-term solutions while continuing to respond to immediate humanitarian needs.

To enable an effective response to several crises simultaneously and optimize the impact of available resources, response efforts will be pooled to the extent possible. For example, the response to health emergencies will build on existing approaches to preventing and/or responding to cholera, Ebola and the COVID-19 pandemic. UNICEF will also expand the reach of its refugee response by making services for returnees and refugees accessible for host communities.

Across its humanitarian strategy in Burundi, UNICEF will adopt a holistic, multi-sectoral approach to address the needs of affected and at-risk populations. UNICEF's position as the lead agency for the water, sanitation and hygiene (WASH), education, nutrition and child protection clusters and co-lead of the health sector will enable this approach. The emergency response will be complemented by a social protection component to reduce the impacts of shocks on other sectors. Communication for development will be mainstreamed throughout the response and used to disseminate essential information on accessible services and preventive/protective measures for affected and at-risk communities. By including youth in behaviour change and mobilization actions as key engagement actors and vectors of change in their communities, UNICEF will support young people to develop key skills and become active participants in the response.

UNICEF will take steps to increase the integration of gender-based violence risk mitigation in all sectors, and scale up gender-based violence prevention and response programming. Strong emphasis will be placed on accountability to affected populations to facilitate the participation of communities in the humanitarian project cycle and in the establishment of feedback and complaint mechanisms.

Progress against the 2020 programme targets is available in the humanitarian situation reports:

<https://www.unicef.org/appeals/burundi/situation-reports>

2021 PROGRAMME TARGETS



Nutrition

- **52,000** children aged 6 to 59 months with severe acute malnutrition admitted for treatment
- **600,000** children assessed for acute malnutrition through mass screening



Health

- **80,000** children aged 6 to 59 months vaccinated against measles
- **360,000** children and women accessing primary health care in UNICEF-supported facilities²²



Water, sanitation and hygiene

- **580,000** people accessing a sufficient quantity of safe water for drinking, cooking and personal hygiene²³
- **250,000** people reached with handwashing behaviour change programmes



Child protection, GBViE and PSEA

- **170,000** children and caregivers accessing mental health and psychosocial support
- **200,000** women, girls and boys accessing gender-based violence risk mitigation, prevention or response interventions²⁴
- **1,650** unaccompanied and separated children reunified with their primary caregiver or provided with family-based care/alternative care services



Education

- **100,000** children accessing formal or non-formal education, including early learning



Social protection and cash transfers

- **13,000** households reached with humanitarian cash transfers across sectors



C4D, community engagement and AAP

- **650,000** people reached with messages on access to services
- **35,000** people, including 18,000 youth, participating in engagement actions for social and behavioural change

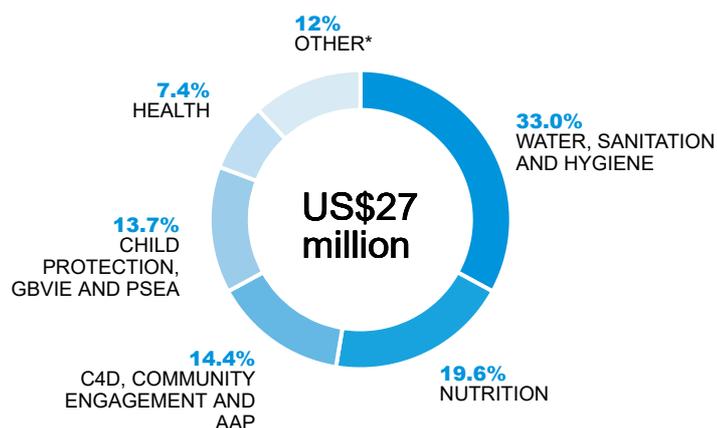
FUNDING REQUIREMENTS IN 2021

UNICEF requires US\$27 million to meet the humanitarian needs of 870,000 children and their families who are at risk of or affected by natural disasters, population movement and epidemics.

This appeal is in line with Burundi's 2021 Humanitarian Response Plan and includes additional funding for refugees from the Democratic Republic of the Congo and the response to the COVID-19 pandemic. This funding will enable UNICEF to provide critical life-saving interventions in WASH, education, health, nutrition, child protection, communication for development and social protection, while also minimizing risks and strengthening the capacities of affected populations to overcome shocks.

Of the total funding request, US\$8 million will support emergency action to prevent and control COVID-19. This will enable UNICEF's first line of response to reduce the socio-economic impacts of the pandemic, including its effect on access to essential services.

Without adequate and timely funding, UNICEF and its partners will be unable to address the needs of children who are displaced or refugees, at risk of school drop out, experiencing undernutrition and affected by violence, exploitation and abuse.



Sector	2021 requirements (US\$)
Nutrition	5,300,000
Health	2,000,000
Water, sanitation and hygiene	8,900,000
Child protection, GBVIE and PSEA	3,700,000 ²⁵
Education	2,000,000
Social protection and cash transfers	1,200,000 ²⁶
C4D, community engagement and AAP	3,900,000
Total	27,000,000

*This includes costs from other sectors/interventions : Education (7.4%), Social protection and cash transfers (4.4%).

Who to contact for further information:

John Agbor
Representative, Burundi
T +257 79 96 00 44
jagbor@unicef.org

Manuel Fontaine
Director, Office of Emergency Programmes (EMOPS)
T +1 212 326 7163
mfontaine@unicef.org

Carla Haddad Mardini
Director, Public Partnership Division (PPD)
T +1 212 326 7160
chaddadmardini@unicef.org

ENDNOTES

1. Office for the Coordination of Humanitarian Affairs, 'Burundi: Suivi des financements de la réponse humanitaire 2020', OCHA, 31 August 2020.
2. Ibid.
3. This figure includes adults to be reached with primary health care as part of the refugee and displacement response (166,000); people to be reached with handwashing behaviour-change programmes for cholera response (24,000 adults and 29,000 children); children under 5 years to be reached with screening for SAM (550,000); and children older than 5 years to be reached with formal or non-formal education (101,000). The total figure includes 443,700 women/girls (51 per cent) and an estimated 130,500 people with disabilities (15 per cent). UNICEF is committed to needs-based targeting, which means covering the unmet needs of children; and will serve as the provider of last resort where it has cluster coordination responsibilities.
4. This figure includes children to be reached with handwashing behaviour-change programmes for cholera response (29,000); children under 5 years to be reached with screening for SAM (550,000); and children older than 5 years to be reached with formal or non-formal education (101,000). The total figure includes 346,800 girls (51 per cent) and an estimated 102,000 children with disabilities (15 per cent).
5. World Bank, 'The World Bank in Burundi', <www.worldbank.org/en/country/burundi/overview>, accessed 30 September 2020.
6. Institut de statistiques et d'études économiques du Burundi, 'Enquête sur les conditions de vie des ménages au Burundi (ECVMB), 2013-2014', 29 March 2019.
7. 'Burundi: Suivi des financements de la réponse humanitaire 2020'.
8. International Organization for Migration Displacement Tracking Matrix, 'IOM Burundi Internal Displacement Dashboard', IOM DTM, June 2020.
9. Ibid.
10. Intergovernmental Authority on Development Climate Prediction and Applications Centre, 'August 2020', <www.icpac.net/monthly-forecast/august-2020/>, accessed 30 September 2020.
11. United Nations High Commissioner for Refugees, 'Refugee Operational Portal Burundi', August 2020, <<https://data2.unhcr.org/fr/situations/burundi/>>, accessed 30 September 2020.
12. Ibid.
13. Burundi Joint Approach to Nutrition and Food Security Assessment, 2019.
14. District Health Information System II, December 2019.
15. Ibid.
16. Office for the Coordination of Humanitarian Affairs, 'Burundi: 2020 Aperçu des Besoins Humanitaires', OCHA, 2020.
17. Due to space constraints, the following acronyms appear in the appeal: GBViE (gender-based violence in emergencies); PSEA (prevention of sexual exploitation and abuse); C4D (communication for development); and AAP (accountability to affected populations).
18. 'Burundi: 2020 Aperçu des Besoins Humanitaires'.
19. Ibid.
20. UNICEF leads cluster coordination for the WASH, nutrition and education clusters and the child protection area of responsibility.
21. The Grand Bargain is a unique agreement between some of the largest donors and humanitarian organizations, who have committed to getting more means into the hands of people in need and improving the effectiveness and efficiency of humanitarian action.
22. Access to primary health care will also be supported for an additional 80,000 men.
23. The WASH target is higher than Humanitarian Response Plan sector needs because UNICEF interventions also include COVID-19 response activities.
24. In addition to the 43,000 women, 80,000 girls and 77,000 boys covered under this target, UNICEF gender-based violence risk mitigation, prevention and response interventions will target 41,400 men.
25. This funding requirement includes US\$600,000 for gender-based violence in emergencies interventions and US\$400,000 to support the prevention of sexual exploitation and abuse across sectors.
26. US\$1million will support the establishment of solidarity groups and cash transfers, and US\$200,000 will support the strengthening of the national social protection system.