



© UNICEF/Kate Holt/2014

# Tanzania Humanitarian Situation Report No. 4



Reporting Period: January-December 2020

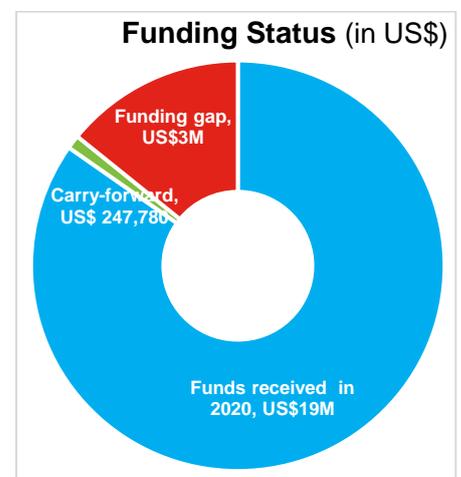
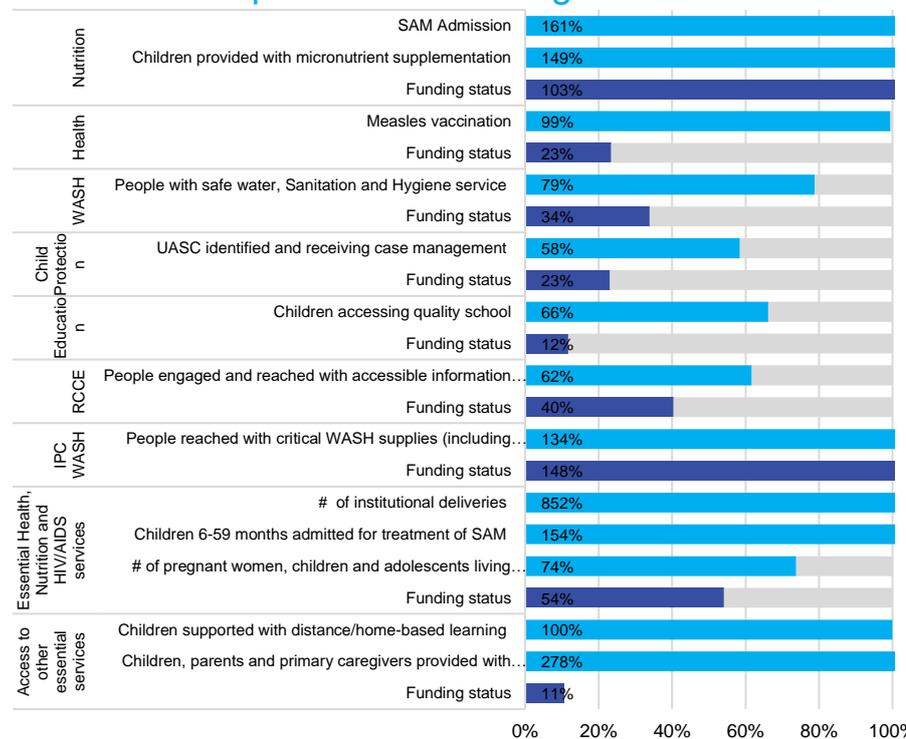
## Highlights

- At the end of 2020 UNICEF Tanzania's humanitarian appeal still had a funding gap of a US\$ 3.2 million to continue supporting the provision of life-saving services linked to multiple risks of COVID-19, floods and refugee children hosted in three camps in Kigoma region.
- Over 25 million people have been reached through the combination of print materials, mass media, interpersonal communication through community health workers and volunteers.
- A total of 6,661 unaccompanied and separated children have been supported through tailored case management services and 14,260 children were provided with community-based mental health and psychosocial support services.
- Over 35,000 refugee children were vaccinated against measles, rubella and polio in collaboration with partners.
- UNICEF supported the treatment of 2,053 refugee children with severe acute malnutrition and provided 206,627 children with Vitamin A supplementation.
- Over 800,000 households in Dar es Salaam benefitted from COVID-19 prevention messages and continued to use essential services with the support of Community Health Workers.
- A total of 13 million school children returned following school re-opening in June 2020.
- Water and sanitation supplies benefitting over 140,000 refugees to practice handwashing and prevent themselves from contracting COVID-19 and other communicable diseases.

## Situation in Numbers

-  **127,622** refugee children in need of humanitarian assistance (UNHCR/MOHA Nov 2020)
-  **289,379** refugees and asylum seekers in need (UNHCR/MOHA, Nov 2020)
- 70 per cent (40.5M)** COVID-19 target Population in Mainland and Zanzibar (MOHCDGEC, June 2020)
-  **509 confirmed COVID 19 cases** **21 deaths** (as of 29 April 2020 for Mainland; 7 May 2020 for Zanzibar)

## UNICEF's Response and Funding Status



## Funding Overview and Partnerships

In 2020 UNICEF Tanzania appealed for US\$ 22.9 million to sustain provision of critical life-saving services for vulnerable women and children who have been affected by the COVID-19 pandemic (US\$ 19 million); floods (US\$ 0,7 million) and refugee children living (US\$3 million) in three camps in north-western Tanzania. UNICEF expresses its sincere gratitude to all public and private donors who provided financial support to reach vulnerable children and women affected by emergencies. These included the Governments of the United States of America (USAID and State Department BPRM), Japan, United Kingdom (FCDO), Ireland, Denmark, Canada, Netherlands, Finland, as well as the GIZ, Conrad N. Hilton Foundation through UNICEF USA and the CERF Secretariat. By the end of December 2020, the UNICEF Humanitarian Appeal has a remaining funding gap of US\$ 3.2 million (14 per cent) affecting COVID-19 response specifically for Risk Communication and Community Engagement (RCCE), continuation of essential health and other services. UNICEF is appealing to donors to continue to provide additional flexible and timely support to the continuation of its emergency response in 2021 for about 120,000 refugee children and over 40 million people to continue accessing essential health and other services as well as prevention messages against COVID-19.

## Situation Overview & Humanitarian Needs

Between January and December 2020, UNICEF Tanzania responded to multiple emergencies including COVID-19, protracted refugee situation and localized floods. A total of 509 COVID-19 cases were reported on April 29th and May 7th for Mainland (375) and Zanzibar (134) respectively when last official data was released. Tanzania registered its first case of COVID-19 on 16 March, and by April, confirmed cases were reported in 24 out of 26 regions in Mainland and both Unguja and Pemba islands in Zanzibar<sup>1</sup>.

While Tanzania, enforced a light lock-down from March to May 2020, restrictions on education were lifted in mid-June 2020. Restrictions for sport and other community activities were also lifted. The Government of Tanzania declared a significant reduction of COVID-19 cases and the Ministry of Health, Community Development, Gender, Elderly and Children (MoHCDGEC) declared the end of the first wave but suggested that the country may experience a second wave which requires the continuity of a robust readiness. The country has since experienced a serious decline in practice of public health prevention measures especially in open areas like marketplaces, political rallies, sports and in public transport. Modifications to programme implementation became necessary to ensure the continuation of essential services and adjustment to the new situation caused by the pandemic.

During the first quarter of the year, UNICEF in collaboration with WHO and partners strengthened preparedness for a threat of Ebola Virus Disease importation from the Democratic Republic of Congo (DRC). UNICEF Tanzania stepped up RCCE prevention messages in at risk regions in collaboration with the Health Promotion section in the MoHCDGEC. Infection, Prevention and Control measures were improved at Ports of Entry along the borders with DRC and at Health Facilities. WASH supplies (including soap, chlorine, buckets and PPE kits) were prepositioned allowing for timely distribution. Community Health Workers in at risk regions bordering DRC were trained to ensure early detection and reporting of cases.

The protracted situation of refugees from Burundi and the Democratic Republic of the Congo remains a concern. The number of refugees reduced from 278,275 in 2019 to 227,896 (including 56 per cent children) as of November 2020 due to the ongoing voluntary repatriations which started in 2017<sup>2</sup>. The refugee response in Tanzania is severely underfunded and received less than 10 per cent of the required budget, making it difficult to respond to critical emergency needs for Health, Nutrition, WASH, Child Protection and Education. While supplementary feeding programmes for refugees with health conditions have remained at 100 per cent throughout the year, food rations fluctuated between 70-80 percent.

Refugees were severely affected by this situation in 2020: all livelihood activities have been closed in the camps posing a significant risk for increased cases of Severe Acute Malnutrition (SAM). Voluntary repatriation of Burundian refugees resumed in June 2020 after a temporary hold from May due to Presidential elections in Burundi. As of November 2020, 29,374 Burundian refugees have been repatriated in 2020, making a cumulative total of 108,000 since November 2017<sup>3</sup>. UNICEF through the UN Kigoma Joint Program has also expanded the support to hosting communities in Kigoma region to improve services for children in host communities with poor child development indicators while also being impacted by decades of refugee influxes.

As a result of “Vuli” and “Masika” rains, about 20,000 people have been affected by floods/landslides at various degrees in 16 regions across the country: Morogoro, Pwani, Njombe, Rukwa, Kagera, Dar es Salaam, Singida, Tabora, Kilimanjaro, Mwanza, Mbeya, Mara, Iringa, Arusha, Tanga, Lindi<sup>4</sup>. UNICEF supported the affected populations with non-

<sup>1</sup> Situation updates from Ministry of Health, Community Development, Gender Elderly and Children; April and May 2020

<sup>2</sup> Refugee population updates; November 2020; Ministry of Home Affairs and UNHCR

<sup>3</sup> Voluntary repatriation updates, 31<sup>st</sup> October 2020; UNHCR and IOM

<sup>4</sup> Prime Minister's Office-Emergency Operation Center Updates; Vuli and Masika rains (October 2019/2020)

food items (NFIs) and WASH supplies prepositioned through the Prime Minister's Office - Disaster Management Department (PMO-DMD) and with the Tanzania Red Cross Society. In coordination of the Resident Coordinators Office and UNDP, UNICEF has procured additional NFIs (sleeping bags, mattresses, blankets) to support floods affected population including replenishing of used supplies in the government warehouses. To enhance emergency coordination and communication at the PMO-DMD, UNICEF procured video conference equipment and GIS software.

## Summary Analysis of Programme Response

### Nutrition

UNICEF in collaboration with Tanzania Red Cross Society (TRCS) and *Médecins Sans Frontiers* (MSF), maintained and supported a nutrition emergency response to identify, rehabilitate and treat acutely malnourished children in the three refugee camps. A total of 68,528 (99 per cent) refugee children were screened, identified and referred to health facilities using an innovative approach of mother-led mid-upper arm circumference (MUAC) screening adopted in the refugee camps for detection of SAM cases. About 2,053 refugee children were admitted for SAM treatment surpassing the planned target of 1,200 children. In September 2020, 51,446 refugee children (Mtendeli: 6,722; Nyarugusu: 27,542 Nduta: 17,182) and 155,183 Zanzibari children aged 6-59 months received Vitamin A supplementation following the Child Health and Nutrition Month (CHNM) campaign. In mainland the campaign was conducted during the COVID-19 pandemic. To ensure promotion of appropriate Infant and Young Child Feeding (IYCF) practices during the COVID-19 pandemic in the refugee camps, UNICEF in collaboration with partners trained 75 (50 Health Information Teams (HITs) in Nyarugusu and 25 Community Nutrition Volunteers (CNV) in Mtendeli camp.

To ensure continuity of essential nutrition services in health facilities during COVID-19 in Mainland and Zanzibar, UNICEF supported regions of Mbeya, Iringa, Njombe, Songwe to admit and treat 3,949 children 6-59, out of which 2,595 (80 per cent) recovered. In Zanzibar, 1,491 children 6-59 months (836 boys and 655 girls) were treated for SAM with a recovery rate of 57 per cent. Overall 123 healthcare and nutrition staff benefitted from the e-learning course on COVID-19 on nutrition and infectious diseases supported by UNICEF in collaboration with the Tanzania Food and Nutrition Centre. Similarly, in Mainland and Zanzibar, 1,198 Community Health Workers were trained in various aspects of COVID-19 response including nutrition.

Additionally, UNICEF provided 2,725 cartons of Ready to Use Therapeutic Food (RUTF), 260 cartons of therapeutic milk and 460 cartons of F-75 therapeutic milk benefiting 614 children (534 in Mbeya, Iringa, Njombe, Songwe, Zanzibar and 80 children in the refugee camps).

### Health

UNICEF in collaboration with MoHCDGEC, TRCS and MSF supported the provision of immunization services targeting refugee children 6-59 months. UNICEF procured vaccines (including 221,400 doses Td, 42,400 doses BCG, 56,000 doses bOPV and - 54,600 doses MR) and supported the vaccination of 35,697 refugees against Measles-Rubella. In efforts to contain the measles outbreak in Nduta camp, 1,811 (95 per cent) refugee children aged 6-11 months were reached by UNICEF and partners through an integrated Measles-Rubella, Vitamin A supplementation, deworming and Rapid Mid Upper Arm Circumference (MUAC) screening campaign conducted in July 2020. To improve recording and analysis of immunization data, UNICEF supported training of healthcare workers one from each refugee camps on Tanzania's Electronic Immunization Registry which is part of the routine government health system.

To ensure continuity of health services in the refugee camps during the COVID-19 pandemic, UNICEF supported maintenance of essential services for children, adolescent and pregnant women through provision of medicines, equipment and supplies benefitting 57,080 women and children. In response to outbreak of acute watery diarrhoea (63 cases and 2 deaths) in November 2020 in the two refugee hosting villages of Lyabumusedded and Msihezi in the shores of Lake Tanganyika, UNICEF provided technical support and medical supplies.

In response to the COVID-19 pandemic, UNICEF in collaboration with the national NGO, Benjamin Mkapa Foundation (BMF) reached 1.4 million households and over 5 million people with COVID-19 prevention messages including education on other essential services through 620 Community Health Workers (CHWs). To enhance monitoring by CHWs, and to ensure timely collection of basic data reported from the community, UNICEF supported BMF to provide 565 CHWs with mobile smart phones installed with a purpose designed mobile health application. While the data collected is analysed by the MoHCDGEC, information sharing remains however limited.

UNICEF in partnership with the Ministry of Health, Community Development, Gender, Elderly and Children (MoHCDGEC), Presidents Office-Regional Administration and Local Government (PORALG), Local Government Authorities (LGAs) and BMF, supported the development of the national package for training of CHWs on community-based surveillance (CBS) which has been rolled out in Zanzibar and Mainland. A total of 42 national TOTs (23 in Tanzania Mainland and 19 in Zanzibar) were trained on community-based surveillance and risk communication for highly infectious diseases including COVID-19. Another 1,655 CHWs/Vs (970 CHWs in 13 high risk regions in Mainland, and 685 CHVs in Zanzibar), were trained on CBS and RCCE as well as supported for continual skills development through regular supportive supervision and mentorship. All trained CHWs/Vs were provided with tools and gear including basic personal protective equipment (PPE) for safe conduction of household visits. Through the visits made by 562 CHWs in Dar es Salaam, more than 805,097 households, and about 3,8 million (57 per cent of Dar es Salaam population) were reached with key messages on COVID-19 prevention and continual utilization of essential services in the region. A total of 1,091 pregnant women, under-five children and person with chronic illnesses were identified in the community by trained CHWs and referred to health facilities for essential services. UNICEF continues to support surveillance of COVID-19 and other infectious diseases in Unguja and Pemba through provision of transport to facilitate follow up of suspected and confirmed cases of COVID-19 at home and in the health facilities.

To improve IPC practices at health care facilities, UNICEF supported the development of training curriculum and materials based on national guideline and IPC Standard Operating Procedures (SOP) including revision to reflect COVID-19 pandemic and new WHO recommendations. Specifically, for Mainland, UNICEF supported the revision and dissemination of six documents (SOPs and national standards for different health care providers including Community Health Workers. UNICEF supported knowledge sharing between the Ministries of Health Zanzibar and MoHCDGEC in Mainland in development of the guidelines and SOPs and customizing them for Zanzibar.

The IPC training for medical and non-medical workers started in November 2020, and is expected to increase a capacity of 8,860 (800 in Zanzibar) medical and non-medical workers in 297 (33 in Zanzibar) health facilities to practice appropriate IPC to continue provision of essential health care services in challenging circumstances such as COVID-19 pandemic. Through a cascading approach 40 national master trainers were trained (in September 2020) and are since November conducting regional and district level virtual training targeting 354 people (three people from each regional/council health management team). The training focused on strengthening triaging practices to identify patients needing immediate resuscitation; to assign patients to a pre-designated area of care, thereby prioritizing their care and to initiate diagnostic or therapeutic measures as appropriate.

UNICEF is supporting hospitals with high congestion for introducing, redesigning and realigning triage services to improve the identification and care of patients with severe illnesses and injuries. After completion of comprehensive needs assessment of regional referral hospitals in twelve regions, six hospitals in most needed will be selected and supported in renovation, training and procuring triaging equipment.

UNICEF in partnership with the International organization AMREF, supported MoHCDGEC and PORALG to improve IPC and ringfencing practices at all levels of health care facilities to ensure continued and safe provision of essential health care services during emergencies. UNICEF supported procurement of PPE kits and has trained more than 3,000 healthcare staff and CHWs in IPC. UNICEF support covers twelve regions in mainland (Arusha, Dar es Salaam, Dodoma, Iringa, Kilimanjaro, Manyara, Mbeya, Morogoro, Mwanza, Tanga, Njombe, Songwe) and in Zanzibar.

UNICEF supported the procurement of equipment and supplies for case management including PPEs: 45,564 masks; 46,030 gloves; 38,458 aprons; 4,300 safety boots; 93,356 respirators (N95); 36,446 safety glasses; 1,656 face shield; 62,884 gowns; 2,540 body bags; 893 waste bins; 880 sharp containers; 1,546 thermometers; 34,213 hand sanitizers; 217 oxygen concentrator; 550 pulse Oximeter; 370 flow splitter for oxygen concentrators and 9,730 nasal prongs.

## HIV and AIDS

More than 10,000 children, adolescents and pregnant women living with HIV in 11 districts in Zanzibar and 23 districts in Dar es Salaam, Mbeya, Songwe, Iringa, and Njombe regions benefited from reusable face masks, hygiene products, psychosocial support as well as access to HIV services through a UNICEF partnership with four national NGOs.

The National Council of People living with HIV (PLHIV) in collaboration with the Network of Youth living with HIV (NYP+) provided sanitary kits to 4,000 beneficiaries from poor households in nine selected districts and conducted media sessions on COVID-19 prevention messages and stigma around HIV. A total of 5,000 adolescents, pregnant women living with HIV and care givers of children living with HIV benefitted from the distribution of 5,000 masks. Reusable cloth

masks were tailored by members of NYP+ and disseminated COVID-19 prevention messages during education sessions to adolescents, pregnant mothers and caretakers of children living with HIV.

In Zanzibar, UNICEF supported 3,740 people living with HIV (70 per cent) including 210 pregnant/lactating women, 457 children and adolescents living with (ALHIV) and 3,073 adults on ART adherence and COVID-19 prevention education from 11 Care and Treatment Centres (CTCs) and 10 PMTCT sites. Furthermore 2,000 pregnant/lactating women and children and adolescents living with HIV were provided with handwashing kits and 13,264 community members were reached with information to protect themselves from HIV, COVID-19 and other infections through community and private radio programmes, brochures, posters and social media. Specific support to peer educators included the provision of COVID-19 preventive kits (soap/sanitizer, face masks, gloves), reflective/labelled jackets, ID cards and bags. Similarly, the beneficiaries were given hand-washing kits (buckets and soaps) and IEC materials for education purposes.

In Dar es Salaam region, UNICEF in collaboration with Management and Development for Health (MDH) and 65 health facilities, supplied 125 Health Care Professionals at Care and Treatment Centres with 10,000 face masks. Over 18,000 soap bars and 20,000 reusable masks were distributed to 3,857 children, adolescents and pregnant women living with HIV. Specific financial support for additional airtime was given to 482 children and adolescents with high viral load for psychosocial support and information sharing.

In high HIV burden regions of Southern Highlands, UNICEF collaborated with Baylor Tanzania to support 12 out of 23 districts in Southern Highlands, 4,254 out of 41,635 ALHIV (10.2 per cent) were informed and provided with sanitary materials to protect themselves from COVID-19. In addition, Psychosocial Support (PSS) and counselling services were provided to ALHIV through mobile messages and home visits while observing prevention measures. As a result of UNICEF's support, 219 out of 450 unstable ALHIV in Njombe region transitioned to stable status. UNICEF advocated for shift of monthly ARV refilling to 3-monthly for stable clients which was part of improving adherence and COVID-19 prevention. To further ensure continuity of HIV services during the pandemic, 160 health workers and CHW from 12 districts in mainland were trained on COVID-19 prevention and provided with sanitary materials to protect themselves and their clients.

UNICEF supported the National AIDS Control Programme to monitor continuity of essential HIV services for children, adolescents and pregnant women who are living with HIV during the COVID-19 outbreak. In addition, the national strategic documents contributing to HIV prevention, care and treatment for children, adolescents and pregnant mothers were also developed. UNICEF supported the convening of the national led task force in the (MoHCDGEC) which supported monitoring of HIV programme service delivery data. The national HIV/COVID-19 task team developed a set of Standard Operating Procedures (SOPs) for the continuation of HIV services to clients in circumstances where facilities are temporarily closed due for establishment of COVID-19 centres. The task force also supported the development of COVID-19 and HIV national guidance, tools and job aids for health workers in collaboration with other development partners (PEPFAR, Global Fund, USAID and CDC). The Guidance Note on the provision of HIV prevention, care and treatment services in the context of COVID-19 proposed measures in the provision of HIV prevention, care and treatment services in COVID-19 context with an overarching goal to maintain standard precautions against COVID-19 as per national guide while ensuring uninterrupted services to people living with HIV. Recommendations targeted health facility managers, Health Care Workers (HCWs) and recipients of care. The guidance note provides further recommendations specific to people living with HIV including suggestions for provision of services for children in the context of COVID-19.

HIV-specific information, education and communication (IEC) materials for people living with HIV and development of job aids for health workers serving children, adolescents and pregnant women living with HIV have been developed with support of UNICEF. UNICEF further supported resource mobilization for COVID-19 in the context of continuity of essential HIV services. One of the good examples was the technical support provided on the Global Fund COVID-19 proposal for Zanzibar whereby US\$ 600,000 was raised to support development of guidelines and procurement of PPEs for COVID-19 response among people living with HIV.

## WASH

Through UNICEF support, a total of 689 (585 male, 104 female) clinical and ancillary staff from Mbeya, Iringa, Njombe and Songwe (MINS) and Kigoma were trained on essential WASH IPC behaviours, community and household drinking water treatment options to ensure water safety, solid wastes management at community and household level, environmental sanitation, and hand hygiene. The trained health personnel are expected to trigger community-initiated efforts to break the COVID-19 transmission chain, limit exposure and stop further transmission of the disease in the community.

To promote handwashing and environmental sanitation as a first-line measure of IPC against transmission of COVID-19, UNICEF supported the procurement and distribution of WASH IPC supplies and PPE kits to 25 selected COVID-19 isolation centres in Mainland Tanzania and Zanzibar. A total of 25 isolation and healthcare facilities (16 in MINS regions, 8 in Kigoma and 1 in Zanzibar) received handwashing and hygiene kits, healthcare waste management equipment's and PPEs equipment, hand sanitizers, handheld thermometers and water purification tablets.

In the efforts to avert COVID-19 in the refugee response, UNICEF in partnership with the Norwegian Refugee Council (NRC) supported over 140,000 refugees with water guard sachets and tablets, installed 300 foot-operated handwashing stations equipped with soap in all mass gathering places including health posts, and enabled 146,167 (71,621 male, 74,546 female) refugees to practice handwashing and prevent themselves from contracting COVID-19 and other communicable diseases.

UNICEF supported MoHCDGEC in the development of the rapid WASH assessment tool, to collect and analyse the conditions of WASH services including identifying gaps in the COVID-19 treatment and isolation facilities. Based on the results of the rapid assessment, UNICEF, through Water Mission Tanzania, Tanganyika Christian Refugee Services and Oxfam supported the repair and maintenance of WASH infrastructure in 24 COVID-19 isolation facilities in Kigoma region and MINS regions. This included replacing taps, sinks, toilets, pipes, upgrading of water storage tanks, waste management infrastructure and connection of water supply to the health facilities. The support further included installation of water treatment units, solar systems and handwashing stations benefitting about 1.2 million people. The improvement of WASH services in these health facilities has helped to create a conducive environment for healthcare service delivery by making available adequate and reliable improved water supply, access to handwashing facilities and sanitation services. These services are essential in reduction of healthcare-acquired infections and communicable diseases such as COVID-19.

To ensure that children are returning safely to schools and adhering to the MoHCDGEC guidelines for reopening schools, UNICEF supported the Regional Administrative Secretary Offices in Kigoma and MINS regions to conduct a rapid WASH assessment in all primary schools to understand the level of preparedness and response to COVID-19. Based on the results of the assessment, UNICEF supported 489 (334 in Kigoma and 155 in MINS) primary schools with handwashing facilities, benefitting more than 391,200 (191,688 boys; 199,512 girls) school children and teachers to practice effective hand washing at critical times. The schools were provided with handwashing stations (group handwashing stations and foot operated) soap, alcohol-based hand sanitiser, 1000L and 100l water drums with three taps and stands as well as buckets.



UNICEF Country representative Shalini Bahuguna helping one of the women at Kalela village in Kasulu DC to collect water at one of the public water points constructed through UNICEF supported under UN Kigoma Joint Programme (KJP) @UNICEF 2020/Truphena Folleni

In collaboration with the NRC, UNICEF supported the construction of four improved block latrines at four primary schools in Nyarugusu refugee camp which will add 36 drop holes (18 for girls, 18 for boys). The construction of ventilated improved pit latrines which includes Menstrual Health and Hygiene rooms for adolescent girls and provisions for disabled school children will significantly reduce waiting time for school children and improve the learning environment. More than 9,200 (4,508 boys, 4,692 girls) school children have gained access to improved sanitation facilities

Furthermore, UNICEF through WASH implementing partners Rural Water and Sanitation Agency (RUWASA), Tanganyika Christian Refugees Service (TCRS) and OXFAM has completed and commissioned nine (9) Water Supply Projects under the UN Kigoma Joint Program (KJP) which enabled 65,590 people (32,139 men; 33,451 women) to gain access to equitable and improved water services. Through a Community Led Total Sanitation Campaign conducted by District Councils in Kakonko, Kibondo and Uvinza (Kigoma region), UNICEF supported, 17,614 households to construct and use improved latrines while the construction of 11 improved school latrines benefitted 11 primary Schools in Kasulu and Kibondo.

## Education

Over 2.5 million school age children in Mainland and Zanzibar continued learning during COVID-19 related school closure from March-May 2020 through radio, television broadcasted lessons and home learning packages developed with support of UNICEF and Ministry of Education. 10 key lifesaving messages targeting children were developed and

disseminated through social media. In response to the pandemic, UNICEF and development partners supported the Government to develop a National Education Response and Recovery Plan and secured US\$ 16.5 million from Global Partnership for Education (GPE), where UNICEF is the grant agent for Zanzibar and Sweden is the grant agent for Mainland.

During school re-opening UNICEF supported the Ministry of Education to develop and disseminate 300,000 posters on safety measures for students and teachers to all schools benefiting 14 million school children nationally. Primary schools in MINS regions were provided with soap and handwashing facilities. Additionally, UNICEF supported back to school campaigns in collaboration with Local Government Authorities in Mbeya, Songwe, Iringa, Njombe and in Zanzibar that contributed to 98 per cent pre-primary, primary and secondary school attendance by end of October. By end of September, about 13.8 million (97 per cent) out of 14.2 million registered school children in pre-primary, primary and lower secondary school have returned to school and are learning countrywide. UNICEF continues to support the LGAs to conduct targeted campaigns for girls in secondary level, children with disabilities and boys and girls in primary schools. The major challenge in some schools is water availability and overcrowding, making it difficult to adhere to handwashing requirement with soap and maintaining physical distance.

UNICEF continues to support over 78,786 (37,888 girls; 40,898 boys) refugee school children and 2,500 refugee teachers in three refugee camps with teaching and learning materials in collaboration with International Rescue Committee (IRC) and Caritas. Approximately 90 per cent of the refugee school children have returned to school by end of November. In collaboration with the education working group partners, a verification of school attendance and school children in refugee camp is ongoing across the three camps.

Over 8,000 refugee children in grades 7, 8 and 9 in Burundian and grades 5, 6 and 8 Congolese camps benefitted from catch-up lessons broadcasted through Jesuit Refugee Services- Radio Kwizera (JRS-RK) with support of UNICEF. All 2500 refugee teachers have been trained on providing support to children who are benefiting from the radio programme complementary to the radio programmes while providing extra lessons to compensate with the reduced classroom time due to double shifts. In addition, COVID-19 prevention messages on school re-opening targeting school children, their teachers and parents/caregivers continue to be broadcasted. The education sector for refugees continue to be affected by acute shortage of classrooms, lack of qualified teachers and reduced funding. UNHCR, UNICEF and partners in the education working group are working to improve the quality of education for refugee children.

During the reporting year, UNICEF and UNHCR supported the National Examination Council of Tanzania (NECTA) to administer two rounds of the national examinations to Burundian refugee children. In January, out of 1,010 (369 girls, 641 boys) candidates who had registered for national exams, 990 Burundian students sat for the exam; where 67.1 per cent (665) passed and received certificates that reflect about 5.2 per cent increase compared to 2019. Additionally, in October, 1,378 Burundian students sat for national exam administered by NECTA through UNICEF and UNHCR support. Results for the examination will be released in early 2021. Some of the challenges related to these exams include high cost of exams (US\$ 198-220 per child), high drop out of registered students and lack of synchronization of refugee school examination calendar with that of the government. UNICEF and UNHCR are exploring with government partners for a sustainable medium and long-term plan for Burundian refugees' examination and certification.

## **Child Protection**

In 2020, there has been a slight increase on the number of unaccompanied and separated children (UASC) supported through tailored case management services from 6,195 reported in the 1st quarter (2,726 girls; 3,469 boys) to 6,661 (2,961 girls; 3,700 boys) reported at the end of the year. These has been due to active identification and referrals by trained community-based structures, referrals from other sectors and ongoing verification of UASC and other vulnerable children. Out of the total number of UASC, 4,473 unaccompanied children (1,849 girls and 2,624 boys) have been placed with foster parents and all continue receiving appropriate case management services. 3,888 adolescents across the three refugee camps (2,123 girls; 1,765 boys) have benefitted from life skills programme through a collaboration of UNICEF, Plan International and IRC.

To enhance prevention and response to COVID-19 across the camps, UNICEF supported Plan International to ensure that 14,260 children (5,158 girls; 9,102 boys) and 15,073 parents and caregivers (9,455 women; 5,618 male) have access to community-based mental health and psychosocial support services.

During the reporting period, UNICEF in collaboration with Plan International (designated agency leading Child Protection component across the 3 refugees camp) has continued to strengthen the case management including implementation

of the Primero cloud-based child protection information management system (CPIMS+), to ensure identified unaccompanied minors and separated children are assessed and their protection needs as well as alternative care arrangement are being responded accordingly. In 2020, a of total 1,690 cases have been uploaded in the system, with 452 cases being closed. Through UNICEF support (both technical and financial), CPIMS+ has been well managed and operationalized, improving the data, following up on the cases and overall provision of services to beneficiaries.

Throughout the year, Social Welfare Officers have successfully attended a total of 1,304 cases, of these, 894 cases involve children in conflict and in contact with the law, and 410 cases are related to violence, abuse, neglect and exploitation. Through the KJP Violence Against Women and Children intervention UNICEF supported the Government to develop a TOR for deployed Social Welfare Officers which was signed and disseminated to respective officers working in the camps and host communities.

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

The Risk Communication and Community Engagement (RCCE) pillar co-chaired by UNICEF and MoHCDGEC / Health Promotion Section (HPS) progressively brought together about 50 local, international, bilateral and multi-lateral agencies to support the National Preparedness and Response Plan for COVID-19. UNICEF supported the HPS in the MoHCDGEC to develop the RCCE component of the COVID-19 operational plan. The Committee worked through 5 regular sub-groups and task-oriented Thematic Task Teams which dissolved after completion of assigned tasks in the operationalization of the RCCE response plan. The RCCE Committee established a school-based RCCE subgroup bringing together MoHCDGEC, Ministry of Education and partners focusing on COVID-19 RCCE for schools. The objective is to revive the School Health Programme to support school health interventions beyond COVID-19.

Between January-December 2020, a Knowledge Attitudes and Practices (KAP) and an Ethnographic Study on Ebola Virus Disease (EVD), and two rounds of a KAP study on COVID-19 were conducted in collaboration with National Institute of Medical Research to better understand behavioural risk factors and to inform design of appropriate messages and strategies in Mainland and Zanzibar. A third-round study is planned to take place in February/March 2021. Findings from these studies informed the development and revision of RCCE multi-media messages disseminated across varied platforms.

MoHCDGEC developed a comprehensive message guide to inform development of RCCE messages and to guide the delivery of health promotion information in the country. A total of 149 messages have been produced in multi-media formats including print, audio, and audio visual. These have been disseminated in over 42 media platforms (national and community radio, TV, and social media. All the materials produced by the MoHCDGEC are uploaded on to the Elimu ya Afya social media platform.

In October 2020, UNICEF supported HPS to repackage RCCE messages and realign them to the evolving COVID-19 context in the country and to address the results of the KAP. A total of 36 new RCCE messages were produced and are expected to be disseminated across different platforms soon. In addition to focusing on COVID-19, the repackaged messages also focus on promoting continuity of essential health services in the country.

As part of Ebola preparedness in early 2020, UNICEF supported TRCS to conduct a social mapping of community mobilization and leadership structures in 31 Ebola high-risk districts, and to orient and train CHV on community mobilization for EVD. The mapped structures and trained volunteers were brought on board for COVID-19 community mobilization activities. A total of 2,790 volunteers were engaged in COVID-19 activities between May and August 2020. 10,414 public hotspots (open markets, public transport terminus, high density residential areas, and schools) in 12 regions (Kigoma, Kagera, Katavi, Mwanza, Dodoma, Arusha, Kilimanjaro, Dar Es Salaam, Pwani, Tanga, Tabora and Morogoro) prioritized at the beginning of the pandemic as high-risk regions, were reached with intensive community mobilization interventions comprising mobile vans with pre-recorded audio messages, and interpersonal communication through CHWs/Volunteers and health promotion officers. Overall, over 25 million people have been reached through the combination of RCCE strategies of print materials, mass media, interpersonal communication through CHWs and Volunteers.

In the refugee camps, UNICEF supported training on COVID-19 prevention and mitigation messages for 5,129 Front Line Workers (FLWs) including (90 trainers, 3,949 community mobilizers (including 180 CHWs<sup>5</sup>) and 1,090 community influencers (285 community feedback tracers) where 44 per cent of all participants were women. These have in turn reached a total of 728,379 contacts<sup>6</sup> of refugees (including 386,041 females and 163,885 children) with COVID-19 prevention and hygiene messages. In addition, COVID-19 community feedback was analysed every week in the call

---

<sup>5</sup> CHWs trained according to the MoHCDGEC package that includes multisectoral messages (health nutrition, CP etc) and epidemic diseases such as Cholera, EVD, Covid19 and Interpersonal Communication skills (IPC)

<sup>6</sup> number of people reached with same message and counted once or more than once

centre and addressed through the dissemination of correct messages using mobile public announcements and community mobilizers.

UNICEF together with implementing partners in the Social and Behaviour Change Working Group customized COVID-19 messages to fit the needs of visual and hearing-impaired individuals. This included brochures in braille, banners with sign language and an audio video application on COVID-19 facts. UNICEF also supported Oxfam and WASH partners in the contextualization and dissemination of communication materials (26,000 posters and leaflets) for the general refugee community which are posted in strategic areas (schools, child friendly spaces, health facilities, worship places, food and NFI distribution points, and departure centres). Furthermore, UNICEF supported child protection partners to tailor COVID-19 prevention messages to children and to develop child friendly messages to encourage children to stay, learn and play at home, adhere to key prevention measures like hand washing and use of face mask. These messages were disseminated via school buildings and child play areas in the refugee camps and villages hosting the camps.

In partnership with JRS-Radio Kwizera, UNICEF ensured that the refugee community is kept informed about key preventive measures of COVID-19 through radio programmes. A total of 10,080 sixty-seconds radio spots, 8,200 mentions, 20 radio documentaries, communicating individuals and community voices, 10 one-hour live broadcasts involving government and professional panellists promoting hygienic practices to avoid diarrhoea and epidemic diseases, have been aired in the reporting period. 308,000 contacts of adults and 121,000 children contacts were reached with COVID19 messages in the three refugee camps. All programmes are aired in languages spoken by refugees and in Swahili to also benefit about 13 million of Tanzanians living in six regions of the eastern part of the country.

UNICEF leveraged its existing partnership with the top religious leaders' network as one of main stakeholders to advocate and influence action for the prevention of COVID-19. The faith leaders platform Tanzania Interfaith Alliance for Children (TIAC) which under the leadership of Tanzania Interfaith Partnership (TIP) brings together the major religions in Tanzania - the Muslims and Christians - through the Catholic Bishops Secretariat – Tanzania Episcopal Conference (TEC), Christian Council of Tanzania (CCT), Muslims Council of Tanzania ( BAKWATA) and Office of Mufti of Zanzibar (MoZ) became instrumental for COVID-19 preparedness efforts. The four religious organizations established and adopted COVID-19 safety guidelines and protocols with a strong monitoring system to ensure adequate prevention compliance in places of worship. On top of that, UNICEF organized two separate online meetings for leader to leader advocacy on the important role of Faith Leaders in Africa and India in responding to COVID-19 for Muslims and Christian leaders that lead to strong commitment to step up safety measures in their places of worships and to continue to advocate for key preventive messages across their congregations. In addition, the faith leaders issued strict guidelines that were followed by their congregations. A total of 16 public service announcements were recorded with top Christians and Muslims leaders on key prevention messages on COVID-19 and shared across multimedia channels.

UNICEF leveraged its partnership with key mainstream media editors and empowered them with key facts and messages on COVID-19 for their wide dissemination through their multiple channels including their digital platforms. As part of UNICEF's partnership with Tanzania Editors Forum (TEF), a total of 979 stories on COVID-19 with Approximate Advertising Value Equivalency (AVE) of US\$ 377,309 were published/aired by a pool of journalists trained by TEF through by end October. Out of these, 453 stories focused on prevention messaging on handwashing, wearing masks and social distancing. Further 10 radio jockeys (RJ) from 5 radios stations that are part of a pool of RJs trained through the TEF partnership were promoting social/physical distancing messages across their 11 radio programmes on daily basis reaching approximately 4 million people daily. The programmes featured ordinary people, health experts and business people on how they apply prevention measures. In addition, nine media interviews featuring UNICEF staff were organized including with the UNICEF Representative. A total of 27,161 COVID-19 related stories were published/aired across print, electronic and social media channels between March and October 2020. Through RCCE, 26 Media editors and producers were trained on lifeline programming through partnership between UNICEF and BBC Media Action.

UNICEF social media channels have been critical platforms on raising awareness on COVID-19 and addressing misinformation. UNICEF organized key campaigns on handwashing which featured videos from UN heads of agencies, top Government leadership, business leaders and diplomats. The #StaySafeNyumbani campaign highlighted the need to practice social distancing and featured a number of celebrity influencers and young champions. UNICEF leveraged 17 celebrity influencers including Masanja Mkandamizaji (top Tanzanian actor), Idris Sultan (popular comedian), Barnaba Classic (Bongo Flava music artist) and Abby Chamz (young musician) to share messaging on COVID. UNICEF held 11 sessions on COVID through its digital partner, Elimika and reached over 2 million people in each session. Additionally, UNICEF managed to reach over 7 million people on Facebook with COVID-related messaging during March-June 2020. A jingle sharing key messages on COVID-19 featuring popular Tanzanian artists @BarnabaClassic @Mataluma @Sherry has been produced by UNICEF Tanzania in collaboration with the MoHCDGEC. The jingle was

played across the country and was added in the playlist of 5 radio stations, 3 TV networks and of 34 community radios across the country and helped in raising awareness on COVID-19.

An estimated 2,6 million young people have been reached with innovative content around COVID-19 developed by 14 young COVID-19 champions as part of the partnership between UNICEF and civil society organizations. The reach of the campaign was achieved through dissemination of five produced videos, five audio spots, artworks, SMS photos, and radio programmes (local and FM).

On the onset of COVID-19, UNICEF Tanzania initiated a partnership with the National Private Sector Forum - 'CEO Roundtable Tanzania' - to support activities aimed at combating the spread of WASH related communicable diseases by fast tracking the supply and distribution of critical hygiene products and protective equipment including soap, hand sanitizer, disinfectant and masks. To ensure the sustainability of the initiative, the partnership will implement a focused behavioural change awareness and education campaign to drive behaviour change for socio-economic impact. Through this programme 100,000 vulnerable households in 3 municipalities in Dar es Salaam region are initially targeted, with a plan for scale up to the other WASH stressed regions.

## Humanitarian Leadership, Coordination and Strategy

To oversee the implementation of the revised National COVID-19 Response Plan (July 2020-June 2021), the Government of Tanzania is being led by the Coordination pillar chaired by the Head of the Emergency Preparedness and Response Section in the MoHCDGEC. Eleven pillars have been established in Mainland to coordinate the implementation of the National COVID-19 Response Plan namely: Coordination, Surveillance, POE, Laboratory, Case Management/IPC, RCCE and Logistics, WASH, Traditional Medicine and Research, Psychosocial Support and Public Health Emergency Operation Centre (PHEOC). Zanzibar has a COVID-19 Response Plan (July-December 2020) which has seven pillars: Coordination, Surveillance, POE, Laboratory, Case Management, IPC and WASH, RCCE and Logistics. In both Mainland and Zanzibar UNICEF and the governments are co-leading the RCCE pillar. In addition, UNICEF is chairing the Development Partners Group-Health which has been tasked to ensure continuity of primary health services. Through the established pillars in mainland and Zanzibar UNICEF Tanzania continues to utilize the experience gained in responding to the ongoing COVID-19 pandemic in the country to ensure continuity of essential services for health, nutrition, WASH, HIV, Child Protection/GBV MHPSS, education and social protection.

UNICEF is a regular member of the WHO lead monthly coordination meeting which includes UN partners, development partners as well as I/NGO where situation updates and pillar updates including resource mobilisation are discussed.

The refugee response is coordinated at central level by the Ministry of Home Affairs (MOHA) Refugees Service Department and UNHCR, who oversees daily management of the response focusing on planning, oversight and policy implications. At regional level, the Kigoma Regional Government and MOHA-Regional Refugee Liaison Office are coordinating the response. Similarly, an inter-agency coordination forum also operates in the field with a monthly meeting rotating between the Field Offices in Kasulu and Kibondo, and sector meetings taking place regularly using virtual technology since the COVID-19 pandemic was reported. UNICEF is a regular member in all refugee coordination meetings at all levels. The UN Resident Coordinator's Office coordinates the UN Kigoma Joint Programme at national and field level ensuring that the UN is also addressing development gaps in refugee hosting districts.

**Next SitRep: 15 April 2021**

**UNICEF Tanzania Facebook page: <https://web.facebook.com/UNICEFTanzania/?ref=ts>**

**Who to  
contact for  
further  
information:**

**Shalini Bahuguna**  
Representative  
UNICEF Tanzania  
Tel: +255 787600071  
Email : sbahuguna@unicef.org

**Christine Hofer**  
Chief of Planning, Monitoring and Field Coordination  
UNICEF Tanzania  
Tel: +255 787600077  
Email : chofer@unicef.org

## Summary of Programme Results

UNICEF Response with Partners			
Sector	Target	Total results	Change since last report ▲▼
<b>Nutrition</b>			
SAM Admission	1276	2,053	▲ 1,726
Children provided with micronutrient supplementation	34,546	51,446	▲ 32,830
<b>Health</b>			
Measles vaccination	35,887	35,697	No change
<b>WASH</b>			
People with safe water, Sanitation and Hygiene service	250,000	194,084	No change
<b>Child Protection</b>			
# of UASC identified and receiving case management (including placement in alternative care arrangements). Inclusive of CPIMS+ support.	11,400	6,661	▲ 373
<b>Education</b>			
Children accessing quality school	119,000	78,786	▼ 4,391
<b>Risk Communication and community Engagement</b>			
# of COVID-19 IEC materials produced (TV, radio spots, printed material, media statement etc.) and disseminated / broadcasted	45	142	▲ 29
# of media (traditional and digital) disseminating COVID-19 information	51	57	▲ 15
# of people engaged and reached with accessible information on COVID-19 and targeted messages on prevention and on access to services	40,500,000	25,000,000	▲ 638,119
<b>IPC/WASH</b>			
Number of people reached with critical WASH supplies (including hygiene items) and services	2,200,000	2,953,223	▲ 1,561,459
Number of healthcare facility staff and community health workers trained in Infection Prevention and Control (IPC)	3,120 (Mainland: 1,320 Zanzibar: 1,800)	3,143 (Mainland: 1593 Zanzibar: 1550)	▲ 597
<b>Continuation of Essential Health services</b>			
# of institutional deliveries	190,525 (Mainland: 185,511 Zanzibar: 5,013)	1,622,799 (Mainland: 1,582,902 Zanzibar: 3,090)	▲ 1,463,225
# of health workers trained on nutrition in the context of COVID-19	8,372	2,779	▲ 1,422
# of children 6-59 months admitted for treatment of severe acute malnutrition (SAM)	4,064	6,241	▲ 2,076
Presence of IYCF promotion and treatment of severe wasting within the national health plan on continuation of essential health services	Yes	Yes	N/A
# of pregnant women, children and adolescents (disaggregated) living with HIV on ART who remain on treatment	143,193	105,621	▼ 3,709
<b>Continuation of other essential services</b>			
# of children supported with distance/home-based learning	2,500,000	2,500,000 (Mainland: 2,2 million; Zanzibar: 300,000)	No change
# of children, parents and primary caregivers provided with community based mental health and psychosocial support	3,000	8,343	▲ 5,878
<b>Social Protection</b>			
Number of households (affected by COVID-19) receiving humanitarian multi-sector cash grant for basic needs	tbd	tbc	N/A
Number of households benefitting from new or additional social assistance measures provided by governments to respond to COVID-19 with UNICEF support	1,200,000	N/A	N/A

## Annex B

## Funding Status

Sector	Requirements	Funds available		Funding gap	
	Total	Received Current Year	Carry-over	\$	%
WASH	1,439,400	486,724		952,676	66
Education	1,154,130	135,467		1,018,663	88
Health	325,655	76,000		249,655	77
Nutrition	58,756	60,800		-2,044	-3
Child Protection	853,000	196,300		656,700	77
RCCE	3,720,000	1,500,000		2,220,000	60
IPC/Critical Medical & WASH	4,070,000	7,746,798		-3,676,798	-90
Continuation of essential health services/ surveillance /nutrition	6,760,000	4,365,875	247,780	2,146,345	32
Continuation of other essential services Education/ CP/ SP/GBV	4,220,000	4,753,916		-533,916	-13
Social Research	225,000	108,000		117,000	52
Coordination and monitoring	120,000	17,120		102,880	86
<b>Total</b>	<b>22,945,941</b>	<b>19,450,926</b>	<b>247,780</b>	<b>3,247,235</b>	<b>14</b>