

Child Protection in Rwanda

A situation analysis

Key achievements

- **Rwanda is on course to achieve universal, free birth registration**, with 85.6 per cent of births registered in 2019/20, up from 56 per cent in 2014-2015.
- **De-institutionalization has been a major success** with over 90 per cent of the 3,782 children who were in institutional care since 2012 now placed in family care.
- **The child protection workforce continues to be developed**; workforce around care reform is now available for all child protection work.
- **There are now 29,674 community child protection volunteers, known as Inshuti z' Umuryango or just IZU (Friends of the Family)**, 50 per cent of whom are female.
- **Rwanda has recently developed and launched a National Child Protection Case Management Framework** to standardize and coordinate service provision.

Key strategic issues

- **Violence against children remains high**, with physical violence affecting 60 per cent of boys and 37 per cent of girls, and sexual violence affecting 24 per cent of girls and 10 per cent of boys in 2017; more recent data are required.
- **Adolescent pregnancies are a cause for concern**; in 2020, 5 per cent of 15–19-year-old girls were mothers or pregnant with their first child. In 2023, there have been around 2,000 new adolescent pregnancies every month.
- **Some children remain deprived of family and parental care**: while there are no recent data on children on the streets, over 4,000 were reunified with their families in 2020 and 2021 during the COVID-19 pandemic, but close to 2,000 children with disabilities remain in institutional care.
- **Children with disabilities are disproportionately discriminated against** due to negative cultural perceptions and social stigma, a lack of specific interventions for their special needs and parental care support, financial barriers and higher poverty rates.
- **Children in conflict with the law face punitive justice** due to processes and practices that are less sensitive to their needs, and do not divert children to more friendly processes.
- **Child protection is underfunded; there are no child protection social workers in the civil service structure**, with the lack of budget tagging complicating analysis of child protection financing.



1. Introduction

Every child without distinction by gender or any other characteristic has the right to grow up free from violence, exploitation, abuse, neglect and harmful practices. This right is embedded in the Convention on the Rights of the Child (CRC) and multiple Sustainable Development Goal (SDG) targets. For example, SDG target 16.2 commits the international community to “end abuse, exploitation, trafficking and all forms of violence against children”; target 5.2 to “eliminate all forms of violence against women and girls”; and SDG targets 16.9 and 17.19 are intended to ensure that all children have their births registered.

Rwanda’s child protection system is currently developing and strengthening. Considerable efforts have been made to strengthen key pillars of the child protection system. However, more needs to be done as the system solidifies and progresses, to provide an ecosystem of support, care and protection for all children in Rwanda.

2. The child protection system

Rwanda has progressively developed legal and policy provisions related to child protection. Law 71/2018 on the Protection of the Child and the Integrated Child Rights Policy (ICRP) – along with several other legal and policy instruments – provide for both prevention and response systems, including addressing cultural norms to prevent violence and abuse, and the criminalization of sexual violence. National legislation also includes specific provisions for victims of crime, witnesses, children in contact with the law, those placed in alternative family care, children affected by divorce and family law-related matters, children in institutions, orphaned and other vulnerable children, and children of parents accused of crimes.¹

The ICRP developed in 2011 includes the right to protection and children’s rights to be free from violence, abuse, exploitation and neglect. The ICRP also establishes a national system for reporting of, referral of and response to child protection cases. Further, it outlines conditions for children to gain Rwandan nationality for non-Rwandans and provisions for age-appropriate sexual and reproductive health education.² The National Child Development Agency (NCDA) is charged with coordinating the continuum of child protection services through relevant policies and guidelines, and promoting stakeholders’ synergic engagement in the wider child protection system. The NCDA is guided by the ICRP Strategic Plan 2019- 2024 in the coordination and implementation of child protection priority actions.

The roles and responsibilities of different actors are often not identified. At national level, the Ministry of Gender and Family Promotion is charged with the overall coordination of child protection policy implementation, but legal provisions for children are spread across different laws and policies, requiring coordination across sector ministries. Child protection is multisectoral by nature and thus falls within the mandate and responsibilities of several government institutions.

Rwanda has recently developed and launched a National Child Protection Case Management Framework. Child protection service provision, including service coordination, has continued to develop over time, culminating in the development and launch in 2023 of the National Child Protection Case Management Framework. The Framework enables an integrated response and improves service coordination, child-centredness, accountability and efficiency. More support is needed to staff and resource the system as it rolls out nationally.

¹ National Child Development Agency (NCDA) (2023) Assessment of the Child Protection System in Rwanda

² Ibid.

Figure 1:
The child protection case management system in Rwanda

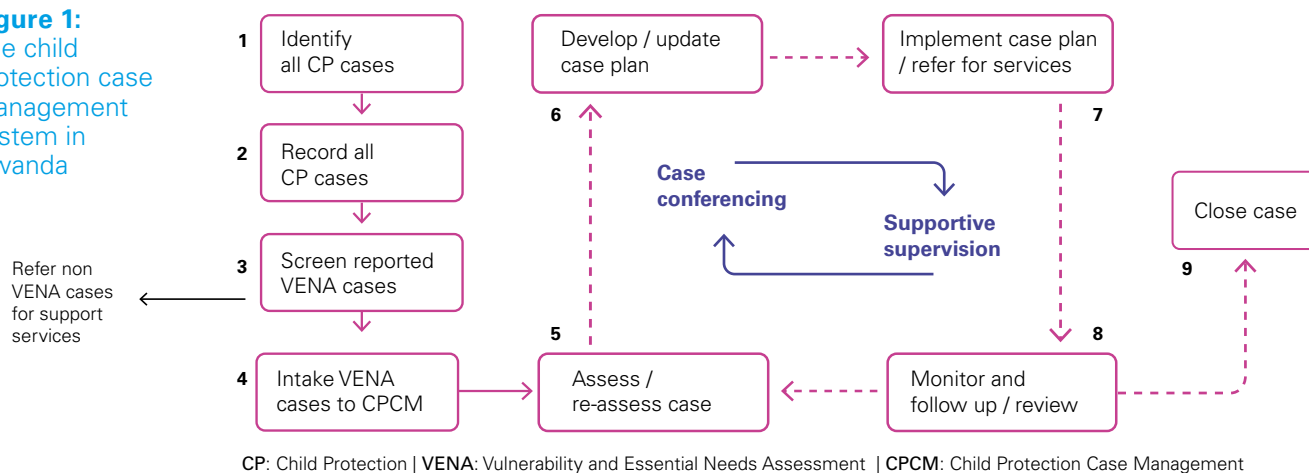
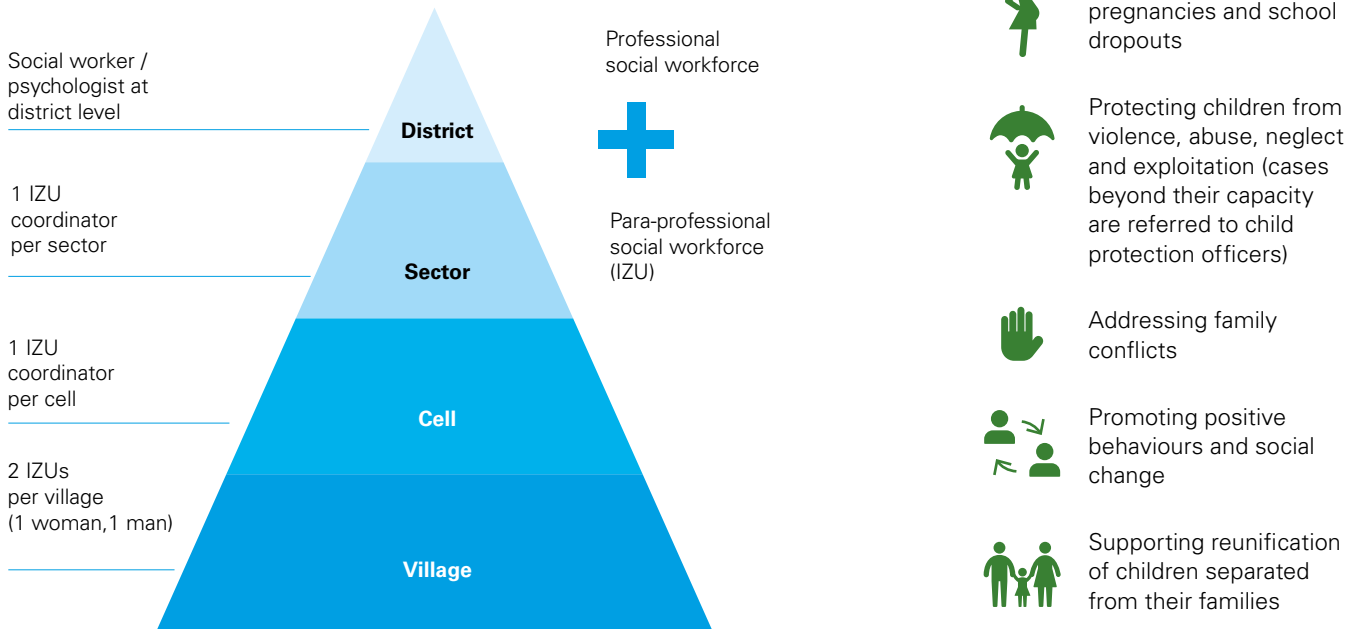


Figure 2: The structure of the social workforce in Rwanda'

Inshuti z'Umuryango (IZU) 29,674



The child protection workforce is still developing. Rwanda developed its first professional child protection workforce as part of care reform and this workforce has now successfully transitioned to be available for all child protection work (see Figure 2). However, the workforce is yet to be integrated into government structures, and remains inadequate to implement key strategies like the National Child Protection Case Management Framework.

Rwanda's community child protection workforce – the Inshuti z'Umuryango (Friends of the Family, or IZU) – has been a major success. Established in 2016, there are now 29,674 IZU volunteers, 50 per cent of whom are female. Two IZUs are available in each village in Rwanda. Among other tasks, the IZUs are charged with monitoring and following up with affected children and their families. In their communities, IZUs promote positive parenting, raise awareness of child rights issues and how to report child protection issues and provide basic counselling that can prevent conflict and limit the risk of violence. The IZUs also interact with foster carers to support the reintegration of children into communities, including children with disabilities. Use of existing community events increases their capacity to reach a larger number of people.

IZUs also refer children and families to government child protection welfare officers (CWPOs) or the relevant service providers. However, there is still a major gap when it comes to professional workforce, as CPWOs do not yet have a statutory role in the public service structure, weakening their role and position, and in turn reducing their effectiveness and increasing turnover.

Child protection is underfunded. Budgetary allocations for child protection have remained very low and continue to decline. There is no child protection budget tagging in all sectors that include child protection within their mandates, making it difficult to trace and produce analytical work on child protection financing. However, UNICEF research has found that only 6 per cent of financing for the two child protection-focused sub-programmes in the government's 2022-2023 budget came from domestic resources, and the rest was funded by international partners.

Rwanda lacks a single **data management** system for reporting or response by various groups of professionals working on child protection cases. Multiple systems are used to report cases, including at district level, where reports on cases are prepared using different digitalized systems or even ad hoc non-digital formats. At national level, a Disability Management Information System (DMIS) is under development for disability-specific data. Crucially, there is no system to analyse and break down data that have been collected due to interoperability challenges as oftentimes different information systems are not designed to share information.

3. Violence and abuse

Violence against children is slightly above the regional average – 60 per cent of boys and 37 per cent of girls in Rwanda experience physical violence. Sexual violence rates are also high, with 24 per cent of girls and 10 per cent of boys experiencing sexual violence before age 18. School-based violence is an issue of concern as 10 per cent of first incidence of sexual violence for girls takes place in a school setting.³ Violence-related risks are on the increase due to threats posed by online violence. Any form of violence against children often leads to emotional trauma for children, with lifelong implications on mental health, early pregnancy, sexual risk taking and perpetration of violence. 57 per cent of young women who had experienced emotional abuse as children had considered suicide compared to 30 per cent who had not.⁴

Social norms contribute to creating an environment in which some forms of violence against children and gender-based violence (GBV) are tolerated or even accepted. Episodes of violence are often kept within the family while patriarchal rules can at times condone the use of violence by men.

The community volunteer workforce for childcare and Isange One Stop Centres provide free multisectoral services to victims of GBV and child abuse. During 2022, 13,340 children (of whom 12,005 were girls) were referred for professional services through Isange centres and health centres after they experienced violence. It is widely recognized⁵ that this number represents only a small proportion of the child protection violations that occur and that the child protection and welfare workforce available in the country is insufficient.

There are limited services with specialized professionals to prevent and respond to violence – including violence against children and GBV, particularly at local level – and to provide mental health and psychosocial support. However, the IZU for childcare, and Isange One Stop Centres, provide free multisectoral services to victims of GBV and child abuse. The Isange centres are present in all referral hospital and provide medical, psychological, legal services and referrals.

4. Teenage pregnancy

Teenage pregnancies are a cause of concern. While prevalence of early pregnancy is lower than regional averages, in 2020, an estimated 5.2 per cent of adolescent girls (aged 15-19 years) were mothers or pregnant with their first child. A 2023 position paper by the National Child Development Agency (NCDA) reports around 2,000 cases of adolescent pregnancies per month, with numbers still rising. Limited Rwanda-specific evidence shows that poverty and lower economic status increase the risk of becoming pregnant early for girls. Poverty and lower education levels are also associated with some forms of sexual and gender-based violence, and associated risks of unwanted pregnancies. Adolescent girls are not always comfortable accessing and using the sexual and reproductive health (SRH) services that they need, due to service providers' attitudes. Knowledge and skills on SRH rights among adolescent girls and boys remain limited, with widespread misconceptions and taboos. Many pregnant adolescents and adolescent mothers have experienced violence. However, adolescent girls still face barriers to reporting violence and accessing justice and GBV services. Pregnant adolescents and adolescent mothers face difficulties in staying in school or accessing alternative learning pathways. Adolescent mothers lack options to care for their newborn children and normally face economic challenges in raising their children with limited support.

5. Children without parental care

In Rwanda, concerns persist about children deprived of family or parental care, with 9 per cent of children not living with either parent.⁶ Over 2,800 children were living and working on the streets in 2017 and most of them – 63 per cent – were not in school as a result.⁷

Between 2020 and 2021, 4,186 children connected to the streets were placed in family care, indicating that the numbers have doubled since the 2017 survey. The current approach by the authorities is to round up and remove all identified children on the streets and transfer them to rehabilitation facilities. This system provides limited potential for holistic social work-supported reintegration back into family care that would recognize the importance of addressing both the child's family environment and the child's personal behavioural problems.

³ UNICEF (2017) *Violence Against Children and Youth Survey, 2015/2016*.

⁴ Ibid.

⁵ See for example: NCDA (2023).

⁶ 2022 Census.

⁷ National Commission for Children (2019) *A Comprehensive Assessment of the Street Children Phenomenon in Rwanda*.

De-institutionalization of children has been a major success. Over 90 per cent of the 3,782 children without disabilities who were in institutional care since 2012 had been placed in family care by the end of 2022. This has been mainly due to the success of the Tubarerere Mu Muryango (TMM) programme, part of the national childcare reform strategy.

However, more still needs to be done to achieve similar levels of success for children with disabilities remaining in institutional care. Only 150 of the 2,040 children and young people with disabilities who had been placed in residential care were in family care by the end of 2022.

Meanwhile, a 2023 Ministerial Order includes a provision for registration of social well-being institutions. This may lead to the re-emergence of residential care institutions and placement of children in such institutions. The Ministerial Order would need to be supported by well-defined gatekeeping mechanisms, to reduce the likelihood of new institutional placements.

The country has not yet fully developed an alternative care system that caters for different care arrangements in special circumstances – short, medium to long-term, including foster care. When a child is abandoned or neglected, but no temporary foster care has been established, there are no arrangements for emergency alternative care. Similarly, some children with disabilities require specialized care for short periods, but such services have not yet been developed to safeguard against institutionalization.

6. Birth registration

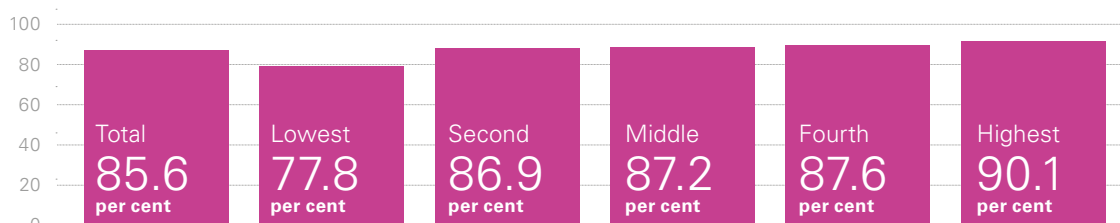
Rwanda is on course to achieve universal, free birth registration. The proportion of children under 5 years of age whose births have been registered with the civil authorities has increased over time, from 56 per cent in 2014-15 to 86 per cent in 2020, and to 94 per cent of those aged under 18 in 2022.⁸ This achievement is due, in larger part, to a strong civil registration and vital statistics (CRVS) system established and digitalized in close collaboration with the health-care system and local governance. However, only 77.8 per cent of children under 5 from families in the lowest income quintile are registered compared to 90 per cent from the richest income quintile.⁹

Administrative data also show that non-registered children are frequently those born to teen mothers, due to societal stigma, the marital status of the mothers, the absence of fathers, lack of information on legal rights, and biases by service providers.

Figure 3:

Birth registration rate by income quintile, 2020

Proportion of children under five whose births have been registered with the civil authorities, by income quintile, 2020



7. Children in contact with the law

Child justice processes and practices are not sensitive to children in contact with the law. The justice system is currently punitive and there are no diversion mechanisms for children facing justice. This contradicts international standards, which uphold that diversion should be preferred for dealing with children in most cases, and that governments should continually extend the range of offences for which diversion is possible.

No guidelines are in place for child-sensitive justice services for children in conflict with the law, child witnesses, victims and survivors. Limited coordination and cross sectoral referral links mean that children passing through the justice system are not supported with child protection and social work services, leading to disconnect with families throughout the justice process.

As of December 2021, there were 426 convicted minor inmates (406 boys and 20 girls) between the ages of 14 and 18 years in the Nyagatare Juvenile Prison, a slight fall from the 557 minors (15 of them girls) in prison in 2020. The number of minors incarcerated in the Nyagatare Juveniles' Prison increased quickly, from 209 in 2017, 385 in 2018, 440 in April 2019, 557 in August 2020, before falling to 426 in December 2021.¹⁰

⁸ 2022 Census

⁹ Demographic and Health Survey (2020)

¹⁰ Ministry of Justice reports

The reasons boys are overrepresented in the juvenile prison could include peer influence and pressure, societal expectations and influence of patriarchy, mental health and other factors.

About 35 per cent of minors in conflict with the law remain in detention for more than a month before they meet a judge.¹¹ Most children in prison are not visited by relatives, sometimes because they lack money for transportation, which can affect them psychologically over time and complicates their reintegration back into society at the end of their sentence.

Mothers with infants below 3 years of age also get custodial sentences and serve prison terms with their babies. According to the latest available data from the Ministry of Justice, 487 women were in prison with infants under three years of age in 2021. In addition, there is no proper mechanism in place to cater for children whose parents are in conflict with the law and are sent to jail. Children whose parents, especially mothers, are sent to jail remain without parental care and support, thus exposing them to risk of poor development, separation from support systems, interruptions to education, and exposure to neglect, all forms of abuse, trauma and stigma. More than 5,000 women are currently in prison.

8. Children with disabilities

Children with disabilities face disproportionate discrimination. A 2022 UNICEF study¹² concluded that negative cultural perceptions and social stigma, lack of specific interventions to meet their needs, financial barriers and higher poverty rates exacerbate inequalities for children with disabilities. The report emphasizes that social stigma often causes families and/or caretakers to hide their children with disabilities.

The study showed that stigma and discrimination remain major challenges: 52 per cent of the respondents agreed that most families of children with disabilities are ashamed of them and 43 per cent indicated that most parents of children with disabilities would try to hide them. 82 per cent of the respondents agreed that the best place for a child with a disability is an institution, while 64 per cent agreed that students with disabilities create too much confusion in the classroom.¹³

In 2018, UNICEF and the Government of Rwanda published a qualitative study showing that children with disabilities living in communities and families experience multiple forms of violence. This may be due to negative beliefs around disabilities, lack of guidance or time on how to care for children with disabilities, and lack of services. Boys and girls with disabilities are often surrounded by people who have minimal expectations for what they can contribute and accomplish in their lives, which has a damaging impact on these children. This can result in children with disabilities being isolated, discriminated against, or deprived of services and being placed into institutional care. An assessment of children with disabilities in institutional care in 2020 established that there were over 2,000 children and youth with disabilities in various institutional care settings.

9. Opportunities and recommendations

The following areas of action emerge as crucial. If they are placed at the heart of national efforts they can accelerate progress towards addressing the remaining barriers and bottlenecks that hamper the realization of every child's right to protection:

Build a comprehensive, strengthened child protection system supported by adequately developed and supported social services workforce. Prioritize investments and resourcing for the continued development and strengthening of an inclusive and effective child protection system including a strong social services workforce that promotes a protective environment for children while preventing and responding to child protection violations.

Consolidate and sustain an inclusive alternative care system that focuses on preventing child-family separation and links to child protection case management to provide for short-term, medium-term and long-term care of different categories of children, including children connected to the streets.

Strengthen mechanisms for ending all violence, exploitation and abuse of boys, girls and women, to effectively address the social, cultural and economic determinants of violence at scale and effectively prevent and respond to all forms of violence against children and women offline and online in both development and humanitarian situations.

Strengthen the juvenile justice system, including promotion of restorative justice and ending all forms of detention for children and stronger linkages with the child protection sector.

¹¹ Transparency International Rwanda (2019) *Analysis on the Effectiveness of Legal Representation for Minors in Rwandan Courts*; 2019, p.39.

¹² UNICEF (2022) *Disability Inclusion in Rwanda: Cross-sectoral community-based integrated support to children with disabilities*. p.2

¹³ Ibid.