

Rwanda

Update on the context and situation of children

Rwanda's economy grew between 7 and 10 per cent in 2022, but inflation has spiked due to high energy and food costs. Average annual inflation was 12.3 per cent to November 2022. The urban consumer price index for food and non-alcoholic beverages increased by 45.4 per cent (by 82.5 per cent for vegetables). Two-thirds of households rely on markets for food shopping and 29.5 per cent of households spend more than 65 per cent of their total expenditure on food. Inflationary pressures will likely continue in 2023.

A Multiple Overlapping Deprivations Analysis revealed that 65.8 per cent of under-five children are multi-dimensionally deprived. Deprivation is higher among rural children (70.4 per cent against 43.4 per cent in urban areas). Almost one in four children aged 0–23 months are simultaneously deprived in nutrition, health and sanitation.

During the 2021/22 fiscal year (FY), coverage of social protection schemes increased by 5.6 per cent with 533,918 households reached, covering 618,850 children under 18.

Public spending on social sectors has risen from FRW 700.1 billion (USD 656 million) in 2018/19 to FRW 1,189.3 billion (USD 1.114 billion) in 2022/23. Allocations for children represent 25.5 per cent of the national budget for FY 2022/23. There were important budget increases in education to increase teachers' salary, recruit more teachers and for the school feeding programme and social protection schemes.

The economic context is limiting investment in Rwanda's social services and slowing progress toward National Strategy for Transformation targets and the Sustainable Development Goals (SDGs). A new fiscal space analysis offers various financing options and suggests that the gap for child-specific expenditure can be closed by 2030.

The Government envisions Rwanda becoming a digital and innovation hub of Africa. Rwanda hosted several events (the Commonwealth Heads of Government Meeting, the World Telecommunication Development Conference, the Youth Connekt Africa Summit, and the International Conference on Public Health in Africa) that provided opportunities to promote child, adolescent and youth rights.

Maternal and child health and nutrition have improved, but healthy practices and care-seeking are constrained by social and economic challenges. Rwanda's immunization programme is recovering from COVID-19 effects, with the pentavalent vaccine coverage increasing from 87 to 92 per cent of children and human papillomavirus (HPV) vaccination from 74 to 78 per cent compared to 2021. It has not come back to the state of pre COVID-19, however. Moreover, over 30,000 children miss their first dose of diphtheria, pertussis and tetanus (DPT1) vaccine and other life-saving health services, highlighting that there is a substantial cadre of 'zero-dose' children in the country. Rwanda also reduced stunting from 38 per cent in 2015 to 33 per cent in 2020 though this was not sufficient to meet national or global targets.

Anaemia (37 per cent) remains a serious concern, but obesity is also rising, particularly in urban areas. 53 per cent of Rwandan children suffer from child food poverty.

HIV prevalence among pregnant women who attended antenatal care decreased from 2.8 to 1.9 per cent. At the same time, the proportion of pregnant women living with HIV receiving antiretroviral medicine to reduce the risk of mother-to-child transmission of HIV declined from 99 per cent to 87 per

cent. The retention after one year of antiretroviral therapy initiation is lower among children and adolescents than adults, which translates into lower viral load suppression: 76 per cent and 84 per cent among girls and boys respectively compared to 94 per cent overall.

By 18 December 2022, 75 per cent (9.8 million) of the population (including children aged 5–18 years) had been fully immunized against COVID-19. 79 per cent (10.3 million) had received at least one dose. The cumulative COVID-19 cases were 132,919.

Rwanda was at high risk of an Ebola Virus Disease (EVD) outbreak, due to Uganda's declaration of an outbreak on 20 September 2022. By 15 December, 142 cases and 55 deaths had been confirmed in Uganda. The Government's preparation and response, supported by UNICEF and others, prevented transmission to Rwanda.

Schools were uninterrupted by COVID-19 related closures, which enabled continued recovery of learning losses caused by the pandemic. Learning outcomes improved except in English, especially in Grade-3 where only 10 per cent of students (8 per cent for girls) met the benchmark. The net enrolment rate (NER) remains above 98 per cent in primary and increased to about 26 per cent in pre-primary. However, dropout rates increased by 2 percentage points in both primary and secondary schools, while the repetition rate in secondary schools increased by nearly 4 percentage points. NER at secondary school remains under 40 per cent.

The quality of teachers is a continuing barrier. The pupil-trained teacher ratio averages 59:1 (120:1 in some schools). In 2022, the Government recruited more than 20,000 uncertified teachers. Qualified primary schoolteacher salaries were increased by 88 per cent to improve retention and motivation.

Following the modernization of the civil registration and vital statistics system, with immediate birth registration of newborns at health facilities, Rwanda achieved 91 per cent birth registration in 2022.

During 2022, 13,340 children (12,005 girls, 1,335 boys) experienced violence and were referred for professional services. There were 11,995 cases in 2021 and 13,601 in 2020. It is unclear whether service-seeking behaviour is increasing. More evidence is needed to better understand changes in trends in violence against children.

Fifty five per cent of the population (83 per cent in urban, 56 in rural areas) has access to basic drinking water and 61 per cent (55 per cent in urban, 70 in rural) has access to basic sanitation. While government spending on water, sanitation and hygiene (WASH) increased from RWF 55.7 billion (USD 55 million) in 2021/22 to RWF 78.3 billion (USD 77 million) in 2022/23, lack of resources is still a key barrier.

Rwanda is affected by climate change. Average temperatures are rising. Extreme rainfall and drought are now common and pose serious threats to children's health, education, housing and protection. By September 2022, 3,378 houses, 1,631 hectares of crops and infrastructure (roads, bridges, classrooms and power lines) had been destroyed.

Major contributions and drivers of results

SP Goal 1: Health and nutrition

Working with the Rwanda Paediatric Association and the UK Royal College of Paediatrics and Child Health, technical and mentoring support improved care quality for 104,000 births and 16,400 neonatal admissions. Neonatal mortality fell from 9 per cent to 8 per cent in the 86 health centres and 22 hospitals directly supported by UNICEF.

UNICEF helped COVID-19 vaccination with COVAX vaccine forecasting, procurement of 11 million syringes and 47 refrigerators, and provided logistics and monitoring assistance. Community engagement focused on combating vaccine hesitancy. UNICEF also procured and supported the inactivated polio vaccine catch-up campaign, reaching 80 per cent of targeted children. Following the pandemic-related school closures, TV spots facilitated a back-to-school campaign: TV and radio broadcasts reached an estimated six million people daily for two weeks.

UNICEF developed training manuals and tools and trained 185 service providers in all 30 districts on the early detection of disability and 691 children (369 boys, 322 girls) were assessed and treated. As part of a demonstration pilot in four districts, 691 children (369 boys, 322 girls) were examined by ear, nose and throat experts and 1,224 hearing aids were procured for children, with 580 distributed to 295 children (152 boys, 143 girls).

With UNICEF's advocacy and technical assistance, the Government now provides at least one staff member per health facility to provide adolescent mental health services. 46 mental health professionals from all 46 district and provincial hospitals as well as mental health nurses, psychologists and general nurses from 521 health centres received training on the Adolescent Mental Health module. Some 2,770 adolescents were clinically assessed; 709 children and adolescents were referred from schools.

Through training 66 providers and 137 peer educators on quality of care, 30 quality-of-care projects were implemented and sustained at 17 high-caseload facilities. 83 per cent of pregnant women were tested for HIV in their first trimester, with 100 per cent retention on anti-retroviral therapy and 95 per cent viral load suppression. Over 95 per cent of children between the ages of 6 weeks and 24 months were tested for HIV.

UNICEF helped Rwanda prepare for a possible Ebola outbreak by providing personal protective equipment, laboratory equipment and test kits. UNICEF continued to second an infection prevention and control (IPC) specialist to the Ministry of Health (MOH).

UNICEF provided anthropometric equipment for malnutrition screening; therapeutic feeding for treatment of Severe Acute Malnutrition (SAM) effectively reaching 15,439 children under five suffering from SAM; micronutrient supplementation for children 6-59 months; and seeds and equipment for kitchen gardens. UNICEF helped create village savings and loans associations, and built capacity of service providers to implement nutrition-specific and sensitive interventions. These high-impact and low-cost interventions reached over 1.6 million beneficiaries, covering 93 per cent of under-five children and 82 per cent of adolescents and women with nutrition-specific services countrywide, including vulnerable refugee communities. 105,129 families established kitchen gardens and 1,309 village savings and loans associations (VSLAs) were created and given peer-to-peer support in nutrition.

With the National Child Development Agency (NCDA) and the Rwanda Broadcasting Agency and financial contribution from the Netherlands Government, a 'One egg per child per day' campaign was implemented in 14 districts with high stunting rates, reaching over 70,000 people.

Some 470,000 families with children aged 0–6 years were reached with messages on responsive caregiving. Capacity building for 2,400 ECD caregivers and 416 sector officers in 17 districts was conducted; technical guidance was provided to ECD facilities in plantations, mines and markets. Approximately 14,200 families were reached through home visits, with the focus on pregnant and lactating mothers, and on developmental delays and/or malnutrition.

UNICEF supported the transformation of the health system through a competency based integrated package focusing on the capacity building of community health workers, the development of digital

tools, and the establishment of five second-generation health posts. Several health guidelines and eight positive-parenting guides were developed. Capacity for nutrition governance was strengthened, and better coordination increased synergies between interventions.

SP Goal 2: Education

UNICEF introduced remedial education to enable children, especially girls, to regain pandemic-related learning losses. Some 24,261 learners (16,423 girls) benefited, supported by 201 trained educators; 402 community education workers engaged to help children at risk of irregular school attendance or dropping out.

In collaboration with the LEGO Foundation, UNICEF built the capacity of 2,068 school-based mentors (1,096 females) who worked with 43,500 primary school teachers on play-based learning. The teachers in turn improved the learning of 1,740,000 children. UNICEF also provided laptops to over 1,000 teachers to enrich teaching and learning.

UNICEF, with partners, ensured that 7,200 children (3,188 girls) with disabilities and 43,093 refugee children (21,216 girls) had access to inclusive education.

Some 3,933 young children (2,006 girls), including 150 children with disabilities in poor families, accessed integrated ECD services in facilities established with partners. Some 418 children with disabilities who were at risk of dropping out due to unresolved social issues were referred to health and social protection services.

As a GIGA pilot country, UNICEF provided 63 schools with a full package for digital transformation. UNICEF also helped the Ministry and Education (MINEDUC) and the Ministry of Information, Communication and Technology to mobilize technical and financial resources to scale up GIGA.

UNICEF and the Ministry of Education developed a national strategy on dropout and repetition, especially in primary and lower-secondary schools.

UNICEF focused on improving the provision of reliable data to guide decisions. An integrated education management information system, which includes a teacher management information system linked to the payroll to improve efficiency, received positive feedback from MINEDUC and teachers.

SP Goal 3: Child protection

The 2022 child protection system assessment lays the ground for an internationally benchmarked system that works for all children in Rwanda; it will be used to develop a costed implementation plan to guide cross-sectoral efforts. The assessment, plus the new national child protection case management framework, create a progressive way of providing child-protection services.

With UNICEF's technical and financial support, the Government has boosted the reintegration of children with disabilities into family care. The pilot on community-based rehabilitation of children with disabilities initiated in Huye and Bugesera districts with Chance for Childhood has shown the potential of leveraging community care with basic service provision across all sectors. 6,689 children with disabilities (2,855 girls, 3,834 boys) were referred to services based on their needs. In addition, 545,970 children and their families were supported with community-based care including 184,286 children reached with mental health and psychosocial support interventions. Partly due to UNICEF advocacy and technical assistance, the Kigali Declaration on Child Care and Protection Reform was adopted in June, committing Commonwealth Heads of Government, including Rwanda, to uphold every child's right to care and protection.

In October, Cabinet approved two policies affecting children in conflict with the law – UNICEF will use this opportunity (with NCDA, MINIJUST and partners) to develop a diversion programme for such children. This complements ongoing capacity development work – over 500 professionals (42 per cent female) were trained, giving 840 practitioners trained to date.

SP Goal 4: WASH

About 68,000 people, 32 schools (37,614 pupils, 51 per cent girls) and 14 health centres gained access to basic water supply. Some 35,405 people were provided access to basic sanitation facilities while 28,875 people, 25 schools (20,937 pupils, 51 per cent girls) and nine health centres gained access to basic hygiene facilities. Support was also provided to develop a national WASH preparedness plan.

UNICEF worked with the Government to develop a WASH sector financing strategy. It analyses the financing landscape and estimates funding gaps in the provision of climate-resilient WASH services to meet national targets and the SDGs. The strategy also identifies financial bottlenecks and suggests how to close them.

UNICEF helped to strengthen the WASH management information system (MIS) through the secondment of an expert in the Ministry of Infrastructure (MININFRA). The second round of data collection for the WASH MIS has started. UNICEF also helped a sector review to develop an action plan to achieve key WASH sector targets.

UNICEF developed a climate rationale for the WASH sector and guidelines on climate-resilient programming, in collaboration with MININFRA. Work began on a climate landscape analysis for children, assessing the issues affecting children and recommending how climate, energy and environment-related issues can be better integrated into child protection, education, health, nutrition and WASH.

UNICEF and Rwanda Water Resources Board installed five remote groundwater monitoring stations and initiated a groundwater mapping study in drought-prone districts. UNICEF also helped the development of a concept note and launch of a two-year national sanitation and hygiene campaign.

SP Goal 5: Social protection

UNICEF developed a fiscal space analysis for social sectors which recommended measures (taxation, overseas development assistance, efficiency and innovative financing) to increase investment in priority sectors for children and close the financing gap for SDGs.

UNICEF played a central role in the social protection sector and in discussions on the cost-of-living crisis, co-leading the development partner social protection group. Consultation with the Government on the national strategy for sustainable graduation from extreme poverty and revision of the Vision *Umurenge* Programme (VUP) document culminated in their adoption by Cabinet. The revised VUP framework foresees the introduction of grants embracing a lifecycle approach to social protection for which UNICEF is mobilizing technical assistance.

Under the UNICEF-led UN Joint Programme (JP) for Social Protection, UNICEF reached 3,325 households (51 per cent of them female-headed) through ‘Cash Plus’ interventions. The JP delivered capacity strengthening and direct assistance to community livelihoods through seed-funding business plans and productive agricultural assets, inputs, and infrastructure. The JP also supported the roll-out of the integrated case management and referral system with the support of village para-social workers. These interventions led to greater coverage of advisory services, increased access to kitchen gardens, increased participation in VSLAs, increased resilience to shocks and higher incomes among target beneficiaries.

Cross-sectoral

UNICEF Rwanda rolled out Human Centred Design (HCD), which places local viewpoints at the centre of issues such as gender inequality, aiming to solve them from an integrated systems perspective. Over 60 experts (60 per cent female) from Government, NGOs and the private sector learned to use HCD to design programmes based on facts derived from people within their communities. The approach is now in use – over 100 community members from two pilot districts co-designed programmes in line with demand for the COVID-19 vaccine (especially for children). A process of understanding the underlying drivers and barriers for vaccine demand and uptake was undertaken; several other programmes (the ‘One egg per child per day’ campaign, routine immunization, learning through play, ECD and WASH) have been enhanced by using HCD directly with communities, testing ideas and taking them to scale.

UNICEF continued to promote gender equality and girls’ rights through social norms and behaviour change and mainstreaming in all programme interventions. The Country Office strengthened its capacity and cooperation with the UN system for the Protection from Sexual Exploitation and Abuse (PSEA). Leveraging on technical support from Regional Office, UNICEF facilitated training of UN agencies PSEA focal persons to strengthen knowledge and skills on the UN common assessment framework, reporting procedures and survivor support services available in-county.

UNICEF and the Umbrella of Persons with Disabilities continued to engage youth to combat stigma and discrimination towards children with disabilities. The findings of the formative research on knowledge, attitude, practices, social norms towards children with disabilities and their access to basic services are used in guiding interventions on disability inclusion, including behaviour-change messages and community engagement efforts – these reached 100,130 community members (54 per cent female) who participated in community dialogues from which 15 champions (9 female) of disability inclusion were identified. Another channel of communication is a serial drama – ‘*Barashoboye*’ (they can) – accessible via the VIAMO 3-2-1 mobile platform – that attracted more than 35,095 listeners (65 per cent female) in the past six months.

The *Itetero* Radio/TV program has produced 323 episodes over seven years with UNICEF’s support. *Itetero* attracts more than two million weekly listeners; audience surveillance allows the collection of feedback on attitudes towards the issues covered (including immunization literacy, men’s involvement in ECD, child protection and nutrition diversification).

Partnerships with the Association of Rwandan Journalists, The New Times and popular online news outlet IGIHE resulted in more than 120 media articles. Information sessions were organized for more than 30 journalists and media practitioners on mental health, the Monkeypox virus, disability inclusion and COVID-19 paediatric vaccines to improve media reporting.

Key advocacy moments were leveraged, including the International Day of Persons with Disabilities. Salima Mukansanga, the first female referee to officiate at the Africa Cup of Nations, became a UNICEF Champion for Children. With key partners, UNICEF led the ‘World Cup in My Village’ campaign, which involved tens of thousands of Rwandans at football screenings across 14 districts. UNICEF’s social media followers increased by approximately 10 per cent.

Engagement with the private sector continued to deliver strong results. UNICEF helped establish ECD centres in 10 companies and cooperatives, reaching over 2,200 children. In collaboration with the UK Foreign, Commonwealth and Development Office (FCDO), UNICEF helped develop a toolkit (endorsed by NCDA) for employer-supported childcare: 30 stakeholders participated in a launch and training event in November. Leveraging the successful model of the tea sector, UNICEF partnered with the Rwanda Extractive Industry Workers Union (REWU) to strengthen ECD, child protection and

sexual and reproductive health and rights in the mining and quarrying sectors; 130 caregivers and REWU representatives were trained in holistic childcare and development. Approximately 1,500 people in and around mining companies received messaging and 280 parents/caregivers were trained to provide responsive care to young children.

Through the CEO Forum for Children, several companies introduced new family-friendly workplace policies such as extended paternity leave, while others committed to establishing ECD Centres for their employees. UNICEF also supported 'nanny training' with 50 participants; and through the CEO Forum encouraged companies to make similar investments for their employees.

Notable bilateral private sector partnerships included Bank of Kigali which used its digital platforms to amplify mental health messaging. IHS Towers funded the construction of two ECD centres. Airtel extended its partnership with UNICEF on the Internet of Good Things and began a new partnership on re-imagining education, including building teachers' digital literacy. This is expected to benefit 5,000 learners and 500 teachers in 10 schools.

NISR concluded a new Population and Housing Census and UNICEF provided financial and technical support to census design, implementation and development of the thematic analytical reports. Under the One UN JP on Data, UNICEF has built government capacity in data production, analysis, dissemination and use – results include supporting NISR to produce 30 District Profiles and a WASH Index based on the 2019/20 DHS.

The UNICEF operations team provided vital assistance to the Government in vaccine planning, procurement and shipment of vaccines equivalent to USD 13.5 million. The Country Office is supporting the Rwanda Food and Drug Authority on supply-chain verification and traceability: the initial focus on vaccines will later shift to other pharmaceutical products.

UN Collaboration and Other Partnerships

UNICEF actively contributes to UN Reform, leading the UNSDCF Result Group on social development until June and becoming the UN Champion on Diversity and Inclusion in July.

UNICEF engaged in seven UN Joint Programmes on Nutrition, Youth, Social Protection, Integrated National Financing Frameworks (INFF), Data, Elimination of Mother to Child Transmission (EMTCT) of HIV/AIDS and supporting persons/children with disabilities under the UNPRPD, contributing to achieving the SDGs.

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UNICEF worked with the World Food Programme (WFP) on nutrition, food security and the national school-feeding programme. Collaboration with UNHCR focused on education, child protection and WASH for refugee children. UNICEF and UNDP offered complementary support to the Ministry of Finance and Economic Planning (MINECOFIN) under the INFF JP. Collaboration with UNDP included engagement with Generation Unlimited (GenU) to contribute to the YouthConnekt Africa Summit, reaching over 10,000 children and youth development advocates.

UNICEF chairs the HR, Procurement, and Common Premises working groups of the OMT and led the reporting on efficiency gains due to the UN reform agenda.

UNICEF chairs the SUN UN group and collaborates with USAID, which chairs the DP SUN group, to align messaging on nutrition and to help NCD Agency to organize a research colloquium. The colloquium resulted in a ten-point plan for all Ministries to take short- and long-term action to reduce stunting.

UNICEF strengthened its strategic partnerships with the World Bank, USAID, JICA, the EU and FCDO in the education sector to intensify advocacy on foundational learning. Collaboration leveraged USD 30 million from the Global Partnership for Education to access an additional USD 100 million from the World Bank financing. Other key partners include the Mastercard, LEGO and Hempel Foundations.

New partnerships were developed with the Ministry of Environment and the Rwanda Environmental Management Authority to cover climate change and environmental protection. UNICEF has signed a two-year rolling workplan with Parliament, expanding its partnership from nutrition to include health, ECD, education, child protection and social protection. UNICEF's partnership with the local government continues to improve, focusing on low-performing districts.

Lessons Learned and Innovations

Research was a catalyst for accelerated development in several areas. As Chair of the Scaling Up Nutrition UN group, UNICEF collaborated with USAID (Chair of the SUN DP group) and NCDA to plan a research colloquium showcasing four new studies on stunting and nutrition financing. The event resulted in a multi-ministry action plan for short- and long-term steps to reduce stunting. The final evaluation of the JP on Social Protection strengthened the evidence base for investing in integrated social protection interventions, and lessons learned will support the implementation of the National Strategy for Sustainable Graduation adopted by the Cabinet in 2022. In a deliberate effort to generate evidence to inform programming on the prevention of and response to VAC, UNICEF commissioned a desk study covering both the social and gender norms condoning violence and broader

drivers of VAC, contributing to much needed data sources for future programming in GBV and VAC.

Collaboration with sister UN Agencies on joint programmes yielded improvements for children.

UNICEF coordinated the Joint Programme on Social Protection with WFP and FAO. UNICEF and WFP planned joint social protection interventions and organized a follow-up retreat to map out new joint activities and resource mobilization opportunities. With UNDP in the Integrated National Financing Framework joint programme, the UNICEF-supported fiscal space analysis fed into the full INFF recommendations. The GIGA project benefitted from ITU's regulatory and technical expertise. UNICEF and UNHCR collaborated to develop and implement the Blueprint for Joint Action for Refugee Children. UNICEF also worked with UNHCR in the development of the Rwanda Refugee Response Plan. UNICEF hosts ILO and UNESCO staff in our premises in Kigali.

UNICEF innovations were once again scaled up by other partners. For example, USAID provided USD 38 million to a Catholic Relief Services (CRS)-led consortium to roll out the nutrition approach that combines VSLAs, ECD centres, and home gardens. In social protection, a model combining livelihood empowerment pathways, seed funding, VSLAs, psycho-social support from the community workforce enhanced the resilience of vulnerable and food-insecure households. This model has been adopted and is being rolled out by the Government and partners.

Digital technology continued to make programmes more efficient and effective. UNICEF's coordination and advocacy brought together the World Bank, USAID, Enabel and JICA to integrate community health worker training on the CHW multi-topic package, eLearning and RapidPro, which is expected to be scaled up in all 30 districts by the end of 2023. UNICEF supported the development and finalization of the Vaccine Management Stock module under the DHIS2 in partnership with the University of Oslo and HISP under MOH guidance. All vaccines can now be monitored, requested, distributed and reported via electronic tools. UNICEF contributed to the roll-out to all 511 health facilities of an eTracker for routine immunization and COVID-19 vaccinations. The eTracker is linked with children's birth registration. The Giga programme provided Internet connectivity in 63 pilot schools, plus digital contents development and digital skill capacity building of teachers. The Disability Management Information System (DMIS) jointly supported by UNICEF, GIZ and other partners is close to finalization and is being tested in selected districts.

UNICEF took new measures to protect the environment. The Rwanda Country Office was the first UN Agency in Rwanda to procure a hybrid vehicle, and a second vehicle will be operational in early 2023. The office also began a recycling programme and kicked off a Climate Landscape Analysis for Children, the findings of which will be shared widely and used for new programming in 2023. Finally, the WASH team initiated climate-resilient programming by reinforcing water systems to withstand floods and installing solar-powered water systems in areas prone to climate-induced infrastructure damage.

Young personnel added ideas and energy to the UNICEF Rwanda team. Three interns and four UN Volunteers joined the team and played key roles in analyzing and presenting data, preparing briefing notes, drafting social media inputs, managing child protection activities, and preparing reports. The office plans to add more interns and UN Volunteers to the team in 2023.