



Justin is only two-years-old and he is in the red zone, it means he suffers from severe acute malnutrition.
Photo © UNICEF Burundi/Yves Nijimbere

Burundi

Humanitarian Situation Report

Highlights

- With over 8 million malaria cases in 2016 and almost 2 million to date this year, the Ministry of Health has officially declared the malaria outbreak in Burundi on 13 March and is seeking support from the international community for preventing and treating malaria.
- In February and March 2017, 200 children, primarily boys, living or working in the streets have been arbitrary arrested by the police. UNICEF and partners advocated for their release and the respect of children rights while a realistic and sustainable approach is found for these children.
- Thanks go to the Government of Japan for their contribution to the WASH emergency response. Protection and Education remain largely underfunded.

Key figures

400,733
Refugees seeking asylum in neighboring countries (UNHCR, 24 March 2017)

148,490
Internally displaced people in 11 provinces (IOM, February 2017)

1,960,620
Reported malaria cases (MOH, 23 March 2017)

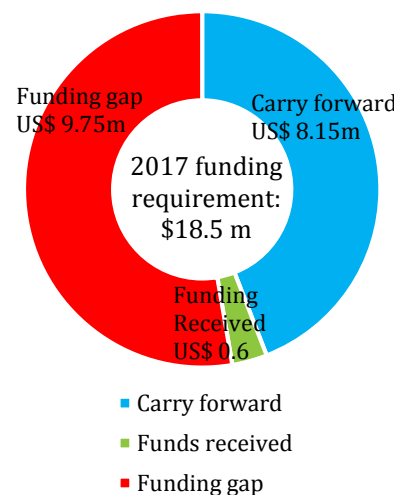
53 % unfunded
UNICEF Burundi 2017 Humanitarian Action for Children (HAC) appeal: US\$18.5 m

UNICEF response with partners

INDICATORS	UNICEF 2017		SECTOR 2017	
	UNICEF Target	Cumulative Results	SECTOR Target	Cumulative Results
Nutrition: Number of children under 5 with SAM admitted to therapeutic feeding programmes	50,000	5,305	62,825	5,305
Health: Number and % of people treated for cholera ¹	400 (100 %)	169 (100 %)	400 (100%)	169 (100%)
WASH: Number of affected people accessing a minimum of 7.5 liters of clean and safe water per person per day	170,000	5,300	393,155	5,300
Child Protection: Number of children and adolescents benefitting from critical Child Protection services	30,000	1,908	45,000	1,908
Education: Number of children benefitting from Education in Emergencies support	100,000	42,412	225,000	42,412
C4D: Number of children and adolescents benefitting from peace, social mobilization and life skills education	125,000	21,113	n/a	n/a

¹ 100% of the 169 cases identified have been treated.

Funding Status



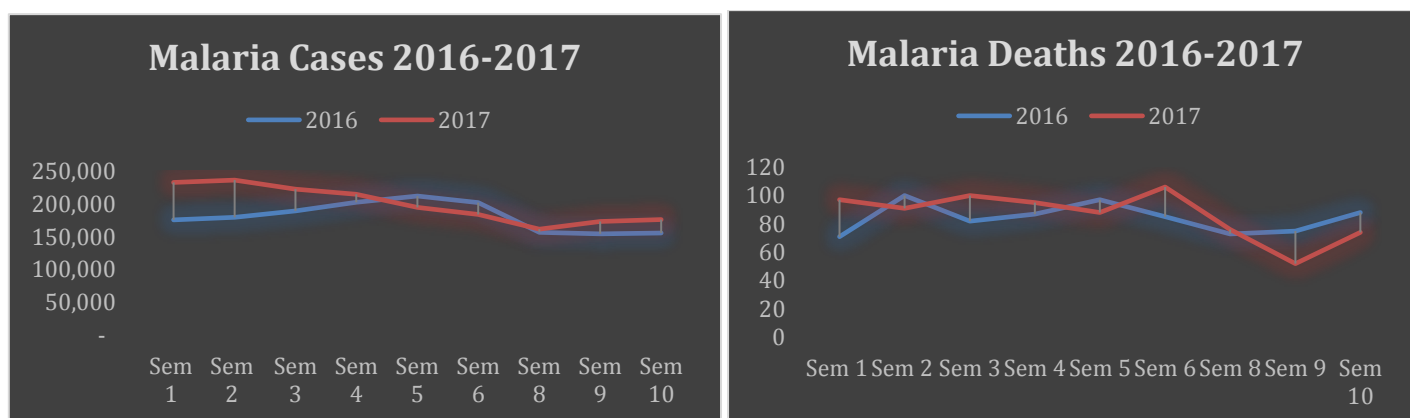
Situation Overview and Humanitarian Needs

The sociopolitical situation in Burundi remains tense and continues to spur on migration and humanitarian needs. During the reporting period, 33,608 people found refuge in neighboring countries (mainly in Tanzania, DRC, Rwanda, and Uganda) reaching a total of 400,733 refugees, the majority of whom continue to be children (54.6 per cent).

Many people leaving are confronted with extreme poverty and severe food insecurity in Burundi. In Tanzania, asylum seekers are struggling to get the refugee status as the Government stopped applying the *prima facie* policy as of 20 January 2017.

The number of internally displaced people (IDPs) registered in eleven provinces also increased to 148,490 (IOM, February 2017); 57 per cent are children. Some 37 per cent of these IDPs have been displaced for social and political reasons, while 63 per cent were forced out of their homes due to natural hazard. Almost 2/3 have noted severe food insecurity as a reason for leaving their homes.

The country is facing a major malaria outbreak which was officially declared by the MoH on 13 March 2017. The North and North health districts are the ones more affected by this outbreak. According to the MoH, the cumulative number of malaria cases reported during the first 10 weeks of 2017 is 1,960,620 with 869 deaths (MoH, 23 March 2017), this is higher than the same period in 2016 (1,804,258 cases and 841 deaths).



Natural disasters, epidemics and the persistent socio-politic crisis remain the major drivers of limited access to schools, dropouts, and insecurity in and around schools. In February 2017, heavy rains destroyed over 100 classrooms in the provinces of Bubanza, Makamba, Ngozi, Rutana and Ruyigi. The damage to schools and immediate needs were assessed by the Provincial Directors of Education. UNICEF supported the Ministry of Education for the rehabilitation of 79 damaged classrooms and set up temporarily learning spaces that benefited more than 1,000 children. In addition, 660 children aged 3-5 have benefited from Early Childhood Development activities, and 2,000 children received supplies to enable them to continue their schooling.

In February and March 2017, arbitrary arrests of children living or working in the streets by police continued. Reportedly, over 200 children were arrested, primarily boys. Most were forcibly returned to their commune of origin or released after detention in police cells, sometimes after more than one week of detention with limited access to food or water. These children are perceived as a threat to security because they might be recruited by armed groups in the event of a deterioration in the security situation. UNICEF provided support for a workshop led by the Ministry of Human Rights, Social Affairs and Gender from 22-23 March, which included the participation of multiple ministries, civil society organizations and UNICEF, to study the issue of children living and working in the streets. Ongoing UNICEF and partner advocacy is focused on respect of the rights of children during these operations and a realistic and sustainable solution involving all stakeholders.

Humanitarian Leadership and Coordination

UNICEF actively participates in the UN Country Team (UNCT) and inter-sectoral meetings, which lead the strategic and cross-sectoral coordination of the humanitarian response. UNICEF currently leads the WASH, Nutrition and Education sectors and co-leads the Health sector and Child Protection sub-cluster.

On 7 March 2017, the inaugural Partner Coordination Forum took place. All donors and international partners in Burundi were in attendance. The meeting was chaired by the Resident Coordinator a.i. and focused on issues related to the political, human rights, development and humanitarian agendas. The next meeting will be thematic and will focus on providing an update on the socio-economic situation in Burundi, building on the socio-economic consultation in Geneva in November 2016.

In line with the UNDAF extension until the end of 2018, the Joint Work Plan UNDAF 2017-2018 was adopted by the UNCT on 22 March. The Plan articulates development and humanitarian interventions and focuses on priority areas identified during the Geneva consultation: health, agriculture/food security, education, early recovery/displaced populations.

The Chair of the Peacebuilding Commission, Ambassador Lauber visited Burundi from 28-21 March 2017 and met with key stakeholders from the Government of Burundi, the donor community, United Nations Agencies, NGOs and civil society to support the continued dialogue with the Government of Burundi and multilateral actors with regards to how best support the country during the ongoing socio-economic crises.

Humanitarian Strategy

Due to the protracted nature of ongoing crisis, which is slowly eroding coping mechanisms at community level, UNICEF continues to assess the impact on the population and their urgent needs, particularly for children and women.

Summary Analysis of Programme Response

Child Protection

UNICEF and partners continued providing support to child-friendly spaces (CFS) in Bujumbura-Mairie, Rumonge and Makamba provinces, and referring children with special protection needs to appropriate services. During the reporting period, 1,341 children participated in 51 CFS where they accessed recreational activities and referral to services and benefited from protection-related awareness messages. Some 322 children (210 boys and 112 girls) benefited from psycho-social support. Among these cases, 28 are new (21 boys and 7 girls) including 9 children who have been exposed to gender-based violence (3 boys and 6 girls) and 294 are old. The main symptoms identified are fear or anger, social exclusion and permanent headache. Progress in the recovery process is affected by economic and social issues within households, which hamper the necessary protective environment to support affected children. This is especially the case in single women headed households where there is a higher risk for ongoing tensions between children and the mother. Some 12 parents, including 1 male and 11 female, are also benefiting from psychological support by the Platform of Organizations Psychosocial Support and Mental Health (PPSM), a UNICEF partner.

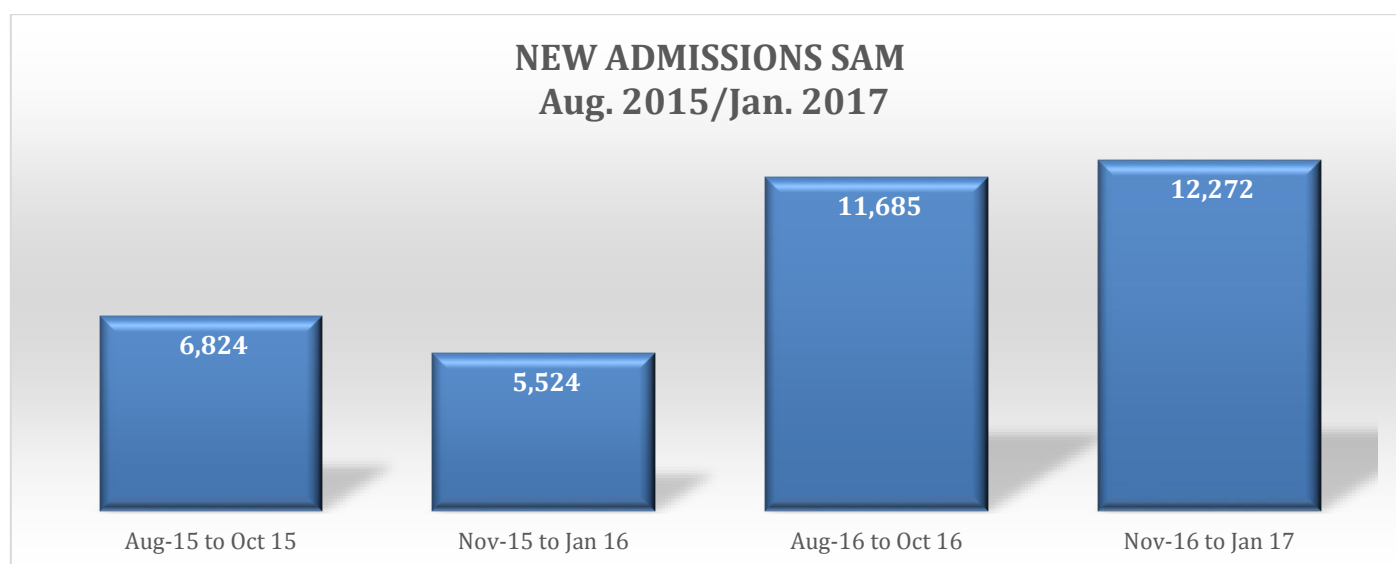
During the reporting period there have been continued allegations of trafficking within Burundi and beyond. Although a law passed in 2014 focuses on prevention of trafficking, the lack of awareness of the law hampers implementation. UNICEF supported the Ministry of Human Rights, Social Affairs and Gender in the organization of a workshop to promulgate the law related to trafficking benefiting justice and child protection actors. In addition, a new partnership agreement with the Federation of Organizations Working with Children (FENADEB) was finalized in February 2017. Two trainings of civil society focal points led by trainers from UNICEF, FENADEB and IOM were organized in Bujumbura-Mairie from 15-17 March and Gitega from 29-31 March focused on trafficking and ethical monitoring, reaching 50 monitors.

Health & Nutrition

In collaboration with all health partners, UNICEF supported the MoH to finalize its malaria response plan which integrated six major interventions: strengthening the routine diagnostic and treatment of malaria in health centers, mass treatment, vector control with MIILDA distribution and pulverization in targeted zones, as well as communications behavior changes activities and surveillance.

The malaria response plan was approved by MoH and budgeted at US\$ 36.8 million, to which UNICEF will contribute US\$ 4.4 million for: (i) provision of malaria drugs, (ii) support to communications and behavior changes activities, (iii) strengthening of the weekly monitoring report with RapidPro technology and (iv) contribution to the MIILDAs distribution. Currently there is a financial gap of US\$ 12 million against the planned budget.

Malnutrition continues to be a significant concern. With the completion of 2016 data, which became available with a 2 months delay, it should be noted that 50,693 children suffering from severe acute malnutrition (SAM) were treated with a programme coverage rate of 105 per cent. This is higher than the last 4 years and exceeded the 2016 sector target. The cumulative data from November to January 2017 is also more than double the data from the same period last year, demonstrating the clear deterioration of the malnutrition of children under five. As of February 2017, 5,305 SAM cases were already admitted and treated (with a reporting rate of 50 per cent).



To ensure high quality of CMAM program implementation, formative supervision was organized jointly by MoH and UNICEF covering all 46 health districts. UNICEF has developed a provision plan to support the national nutrition programme to ensure zero stock out of nutrition supplies at district health level in 2017. In 2017, two RUTF and drug distributions were organized.

With support from UNICEF, the MoH decided to scale up the coverage of nutrition services with an additional 125 health centers, which exercise will also reinforce the existing 244 health centers offering appropriate nutrition services (CMAM). Finally, UNICEF and Pronianut are gearing up for the next mass screening of 600,000 children under five that will begin in mid-April in 8 most food insecurity affected provinces to identify and treat children suffering from severe acute malnutrition.

WASH

There were no new cases of cholera in 2 months. As part of the cholera prevention and response plan, UNICEF and its partners the Burundi Red Cross (BRC) and the MoH continued the emergency water supply and the

cholera awareness campaign in the affected commune of Rugombo. Approximately 5,000 households (about 25,000 people) were covered by house to house outreach sessions of hygiene promotion.

In addition, the BRC and MoH, with UNICEF support, have trained 60 BRC volunteers and 53 community health workers in Rugombo commune on hygiene promotion to reinforce the local capacity to respond to future cholera outbreaks. UNICEF and these partners have also initiated monitoring at the household level to assess the impact of house to house sensitization in cholera epidemics.

To sustain and increase access to safe drinking water in Rugombo commune, UNICEF and its partner COPED began the construction of the drinking water supply network in the commune of Rugombo (Munyika- Rukana), which will permanently serve a population of about 12,000 people.

C4D

Strengthening community resilience to cholera in Cibitoke is critical to preventing another cholera outbreak this year. The Ministry of Communication, Information and Education and UNICEF organized a media workshop for 47 journalists who pledged to broadcast programmes related to the prevention of cholera.

As a direct result of the workshop, the national TV station (RTB) and five radio stations featured interviews made during the workshop. An additional ten (10) radio broadcasts and three (3) spots were produced highlighting different aspects of cholera prevention (water, sanitation, handwashing).

A local partner, PEAB (Province of the Anglican Church in Burundi) provided cholera prevention training to



religious leaders, members of child protection committees and local community and government officials. These 549 women and 468 men are working to raise awareness about good hygiene practices. They demonstrated how to build handwashing stations by installing 131 “tippy taps” in community areas, including some of the 98 households visited. To compliment the messages given by local community leaders, 20 interactive theater performances were performed by NGO partner Tubiyage, in the communes of Rugombo and Buganda, which were areas of cholera outbreak earlier this year.

Education

As part of the action plan to strengthen the prevention of cholera in schools, 642 teachers (353 males and 289 females) in 52 schools, including 44 schools in the affected area of Rugombo commune (Province of Cibitoke) and 8 surrounding communes (3 schools in the commune of Mugina and 5 schools in the commune of Buganda) were trained in March 2017. This training aimed to strengthen teachers’ skills and knowledge on the prevention of diseases, in particular sustaining the commitment and capacities to work within school and communities to mitigating potential cholera outbreaks. In addition, 38,752 children (19,763 boys and 18,989 girls) had their knowledge improved, on the prevention of potential cholera outbreaks and other waterborne diseases, through awareness activities conducted together with the WASH Section and the Ministries of Education and Health, in Cibitoke Province.

In March 2017, in collaboration with the Tanzania Country Office, UNICEF Burundi jointly supported the end of cycle exams of Burundian children in Tanzanian camps. The exams are implemented by the National Examination Council in Tanzania (NECTA), and have benefitted 1,323 (children (441 girls and 882 boys) in all education grades. The exam results will be available in April.

Notably, over the past several months, as part of the regular education programme, UNICEF supported the construction of 162 classrooms, in an effort to increase general school capacity, but also to reintegrate internally displaced and returnee school age children along with dropouts. This construction work will continue throughout 2017 until mid-2018.

Social Policy

The results of the MODA (*Multiple Overlapping Deprivation Analysis*) exercise revealed that monetary poverty is more widespread amongst children compared to the total population: 7 out of 10 children live in households that do not have enough financial means to cater for their basic needs (69%, ECVMB 2013-14). If international thresholds are considered, child poverty rates are even higher: 74% of Burundi's children live on less than US\$ 1.25/day.

Furthermore, taking into account the limits of monetary poverty measurement, the MODA report analyzed multidimensional deprivation amongst children: only 2.5% of children in Burundi suffer of no deprivation across the sectors of health, nutrition, education, protection, water, sanitation, information and housing; and a majority of Burundi's children are deprived in at least three (78.2 per cent) or four (53.6% per cent) of these categories.

Funding as of January 2017 in line with HAC 2017

In 2017, UNICEF Burundi is appealing for US\$ 18.5 million. The funding available to date stands at US\$ 8.75 million (47% funded) which includes the funding received in this current appeal year as well as the carry-over from the previous year. Despite funding shortfalls, UNICEF continues to scale up its humanitarian response to address the increasing needs of women and children in a context of heightened vulnerability, epidemics, food insecurity and children malnutrition, recurrent floods and displacement; all of which require timely and adequate funds.

Funding Requirements (as defined in Humanitarian Appeal for 2017)				
Appeal Sector	Requirements	Funds Available*	Funding Gap	
			US\$	%
Nutrition	5,000,000	4,283,828	716,172	14%
Health	3,000,000	3,000,000	0	0%
WASH	5,000,000	962,723	4,037,277	81%
Child Protection	3,000,000	502,006	2,497,994	83%
Education	2,000,000	0	2,000,000	100%
Communication & Participation	250,000	0	250,000	100%
Sector Coordination	250,000	0	250,000	100%
Total	18,500,000	8,748,557	9,751,443	53%

*Funds available includes funding received for the current appeal year as well as the carry-forward from the previous year.

Next SitRep: 31 May 2017

Who to contact for further information:

Bo Viktor Nylund
Representative
Burundi
Tel: +257 22202010
Email: bvnylund@unicef.org

Sophie Leonard
Deputy Representative
Burundi
Tel: +257 2220 2029
Email: sleonard@unicef.org

Nathalie F. Hamoudi
Chief Emergency
Burundi
Tel: +257 2220 2024
Email: nhamoudi@unicef.org

SUMMARY OF PROGRAMME RESULTS 2017

2017 UNICEF Burundi	Sector Response		UNICEF and IPs	
	2017 Target	Total Results	2017 Target	Total Results
WATER, SANITATION & HYGIENE				
Number of affected people accessing a minimum of 7.5 liters of clean and safe water per person per day	393,155	5,300	170,000	5,300
Number of affected people provided with hygiene supplies and information on good hygiene practices	393,155	39,887	300,000	39,887
EDUCATION				
Number of children benefitting from Education in Emergencies support	225,000	42,412	100,000	42,412
Number of teachers trained in Education in Emergencies	3,000	642	2,500	642
HEALTH				
Number and % of people treated for cholera	400: 100%	169: 100%	400: 100%	169: 100%
Number of children under 15, and pregnant women reached with essential drugs	175,000	0	442,000	0
NUTRITION				
Number of children aged 6 to 59 months assessed for acute malnutrition through mass-screening	700,000	0	600,000	0
Number of children under 5 with SAM admitted to therapeutic feeding programmes	62,825	5,305	50,000	5,305
CHILD PROTECTION				
Number of children and adolescents benefitting from critical Child Protection services*	50,000	1,908	30,000	1,908
Number of vulnerable children having daily access to care and psychosocial support through the establishment of 50 child-friendly spaces/centres	25,000	1,341	20,000	1,341
C4D				
Number of children and adolescents benefitting from peace, social mobilization and life skills education			125,000	21,113
Number of households benefiting from key messaging in healthy practices, hygiene promotion and children rights			100,000	98