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Reporting Period: 1 August to 30 September 2020

Rwanda COVID-19 Situation Report No. 5



Situation in Numbers

4,840 CONFIRMED CASES

3,154 RECOVERED

1,657 ACTIVE CASES

29 DEATHS

Source: Rwanda Ministry of Health
[Daily update on 30 September 2020](#)

Highlights

- The Government of Rwanda decided that schools would remain closed to allow thorough preparedness to resume in-person classes. Travel is also still restricted to Rusizi District.
- UNICEF equipped public transportation vehicles with COVID-19 prevention messages, reaching up to 550 people per day.
- UNICEF distributed 55,000 bottles of hand sanitizer to community health workers.
- UNICEF facilitated the Government to procure 7,872 COVID-19 test kits.
- 1,860,845 students engaged in radio lessons, 575,180 in TV lessons and approximately 50,000 students accessed the e-learning portal daily.
- 7,282 children with disabilities were reached with individual learning support at home.

UNICEF's Response and Funding Status

Pillar 1

No. of people reached on COVID-19 prevention messages	100%	0%
No. of people engaged on COVID-19 through RCCE actions	3%	97%
Funding status	27%	73%

Pillar 2

No. of health workers provided with PPE	0%	100%
No. of health workers trained on IPC	13%	
Funding status	5%	95%

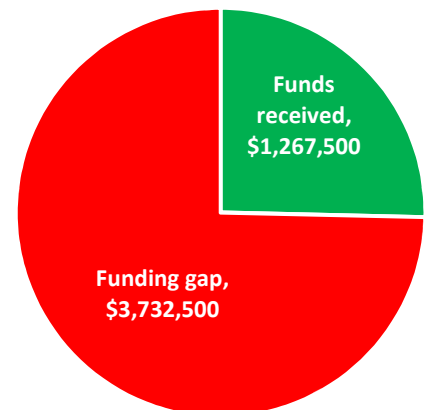
Pillar 3

No. of healthcare providers trained in COVID-19	0%	100%
No. of primary caregivers received IYCF counselling	15%	85%
Funding status	47%	53%

Pillar 4

No. of children supported with home-based learning.	67%	33%
No. of schools implementing safe school protocols	0%	100%
No. of children without parental or family care provided with appropriate alternative care arrangements.	100%	0%
Funding status	25%	75%

UNICEF Appeal 2020 US\$ 5 million



Funding Overview and Partnerships

In 2020, UNICEF Rwanda has appealed for US\$ 5 million to support the Government of Rwanda's National COVID-19 Response Plan. The current funding gap is US\$ 3,732,500 (75 per cent). Without additional funding, UNICEF will not be able to address the most urgent needs of children and families in Rwanda who are affected by the COVID-19 crisis.

Situation Overview and Humanitarian Needs

Rwanda's first case of COVID-19 was confirmed on 14 March 2020. As of 30 September, there were 3,537 confirmed cases of whom 1,806 have recovered. Fifteen deaths have been reported. All confirmed cases of COVID-19 are being monitored and contacts have been traced.

On 1 August, Rwanda Airports Company reopened Kigali International Airport, adhering to strict COVID-19 prevention measures. All incoming and outgoing passengers must display a negative COVID-19 PCR test no more than 72 hours prior to arrival or departure. Incoming passengers are subject to an additional test and must quarantine at designated facilities for 24 hours while they await test results.

During the last cabinet meetings in August and September, the Government of Rwanda decided that schools would remain closed to allow time for further health assessment and preparedness for resumption of in-person classes. Remote learning continues to be encouraged and strengthened. Travel to and from Rusizi District remains prohibited and all movement is prohibited between 9:00 pm and 5:00 am.

UNICEF is supporting the Government of Rwanda to mitigate the secondary effects of COVID-19 on children and families, including in remote learning opportunities for children and providing Personal Protective Equipment (PPE) for community health workers. With schools set to re-open soon, UNICEF is supporting the Government to prepare schools for students' return by constructing handwashing facilities in primary and boarding schools.

Coordination and Partnerships

The COVID-19 response is led by the Rwandan Ministry of Health and Rwanda Biomedical Center. An eight-pillar National COVID-19 Response Plan was developed in March 2020 as follows: i) Leadership and coordination; ii) Epidemiological surveillance; iii) Points of entry; iv) Laboratory; v) Infection Prevention and Control (IPC); vi) Case management; vii) Risk communication and community engagement; and viii) Logistics.

UNICEF, along with other UN agencies and development partners, is working closely with the Ministry of Health and other government entities to implement this plan which has been costed at US\$ 74 million.

Development partners have established COVID-19 technical coordination mechanisms with groups focusing on health, social protection, food security and the socio-economic impact of COVID-19. UNICEF was actively involved in the first three of these groups, co-leading the group on social protection along with DFID. Under the development partner health group, which meets once a week, three sub-working groups have been established in risk communication, case management/IPC, and reproductive and sexual health.

UNICEF leads the sub-group on risk communication and co-leads the case management/IPC group along with WHO. These mechanisms keep development partners informed on COVID-19 response, collect and share feedback for the Government, and coordinate the development partner response to COVID-19.

Summary Analysis of Programme Response

Risk Communication and Community Engagement (RCCE)

During this reporting period, UNICEF reached 6,000,000 people with COVID-19 messages on prevention and access to services.

UNICEF supported capacity building on RCCE for 93 Public Relations Officers, Health Promotion Officers and District Health Directors from all 30 of Rwanda's districts, including topics like accountability to affected populations and minimum quality standards for community engagement.

UNICEF also supported a strategic workshop for the Health Promotion and Social Determinants of Health Technical Working Group (HP/SDH TWG) to ensure review and endorsement of key messages and communication materials in the context of COVID-19. The HP/SDH TWG endorsed the National Strategic Communication Plan 2020-2024 developed by UNICEF and partners where the short-term objectives are fully dedicated to COVID-19 prevention.

During the workshop, UNICEF also facilitated the session on designing a comprehensive national RCCE strategy for COVID-19 based on the emerging situation, analysis of prevailing rumours and misconceptions, and lessons learned from the national RCCE response so far. Development of the updated strategy is a government priority, especially given rising 'message fatigue' and decreasing risk perception of the virus amongst large proportions of communities.

RCCE consultants outposted to Rwanda Health Communication Centre continued supporting the National Command Posts in Kigali City, Kirehe, Ruzizi and Rubavu Districts. Consultants also engaged with communities through regular meetings and live call-in shows through the network of community and private radio stations.

UNICEF and partners ensured that 25 public buses routing on 17 destinations within Kigali City and between districts are equipped with COVID-19 messages on the exterior. These buses, depending on the size, have the capacity to serve between 250 to 550 passengers a day. Bus drivers and their assistants were sensitized on engaging with passengers, regularly reminding them of COVID-19 prevention measures, and ensuring that social distancing, wearing masks and hygiene practices are observed during rides.

UNICEF continued engaging children at home through children's radio and TV programmes. Thirty-two radio stations in local markets and car parks continued supporting the RCCE effort.

In collaboration with the Ministry of ICT and Innovation, UNICEF launched Phase II of the Child Online Protection Campaign, releasing 12 additional messages via social media infographics in both English and Kinyarwanda. This phase of the campaign reached around 150,000 people on social media. Additional people were reached through a popular live TV talk show on RBA, where UNICEF participated as a subject matter expert with Rwanda Investigation Bureau and the Ministry.

[Provision of critical medical and water, sanitation and hygiene \(WASH\) supplies and improving infection prevention and control \(IPC\)](#)

UNICEF continues to support Ministry of Health with one full-time staff member to strengthen WASH/IPC in health centres and around the country. During this reporting period, UNICEF provided WASH/IPC Training of Trainers to 28 Military Medical Staff at Kanombe Military Hospital, for a total of 160 health workers trained by UNICEF so far. Other Command Centre training efforts have focused on high-risk areas, given that the Rwandan economy, and particularly tourism, is reopening. UNICEF has therefore helped train 253 hotel and restaurant managers in Rubavu, Musanze and Kigali on WASH/IPC during this period, for a total of 617 hospitality, airport and factory supervisors trained in 2020.

To support the Ministry of Health priority to install handwashing facilities at the entrances of all health centres, UNICEF has played a leadership role to widen the focus to upgrade handwashing facilities to all critical points of care at health centres and to develop a rapid assessment of WASH infrastructure in health centres. Under the Ministry's leadership, UNICEF, WaterAid, SNV, World Vision, and Water for People will conduct the rapid assessment at all health centres (~520) in early September.

To prepare for school reopening in September, the Ministry of Education has adopted a durable, cost-effective, permanent group handwashing facility. UNICEF advocated for and provided technical support for this design. With funds from the Global Partnership for Education, which UNICEF mobilised, the Ministry will install these group handwashing stations in all primary schools and will use its own funding to install handwashing facilities in all boarding schools. UNICEF is now supporting the Ministry to advocate for partner support to cover secondary schools. These handwashing facilities will also enable adequate handwashing

for the nationwide school feeding programme. UNICEF will fund construction of handwashing facilities in 16 schools while it seeks support for a larger number of installations.

[Supporting the provision of continued access to essential health care services for women, children and vulnerable communities, including case management](#)

UNICEF supports Rwanda's community health programme by equipping community health workers (CHWs) with personal protective equipment (PPE). In this reporting period, UNICEF procured 55,000 bottles (500 ml) of hand sanitizer for distribution to CHWs. This PPE will be used to ensure continuity of services and for COVID-19 case management as the Government is now planning to implement home-based case management. UNICEF helped increase capacity to manage severe cases of COVID-19 by supplying 20 oxygen concentrators to 10 hospitals. In addition, through UNICEF procurement services, the Government of Rwanda procured 7,872 COVID-19 test kits.

UNICEF continues to support service continuity for maternal, newborn and child health, including immunisation, through monthly monitoring, development of key health messages for demand generation, and vaccine procurement to ensure there are no stockouts at any level.

Between March and May, UNICEF supported the Ministry of Health to conduct a rapid assessment of reproductive, maternal, newborn, child and adolescent health (RMNCAH) services in communities and in health facilities during COVID-19. The results and analysis of this assessment are currently being used to understand the secondary impact of COVID-19 on service continuity and will help develop measures to mitigate the long-term impact on maternal and child morbidity and mortality.

UNICEF continued supporting district hospitals and health centres to improve supervision and monitoring of regular nutrition activities, such as growth monitoring and malnutrition screenings for referral and treatment.

[Access to continuous education, social protection, child protection and gender-based violence services](#)

UNICEF continues its role as Coordinating Agent of the Global Partnership for Education (GPE) Accelerated Funding for COVID-19 grant, supporting the Government of Rwanda in responding to school closures and preparations for school reopening.

With funding support from GPE, UNICEF continued to coordinate broadcasting of radio and television lessons, as well as providing e-learning opportunities. In August 2020, approximately 55 per cent of students were engaged in radio lessons (1,860,845 students), 17 per cent engaged in television lessons (575,180 students), and approximately 50,000 students accessed the e-learning portal daily.

This school reopening plan also maps development partner support and geographical and financial gaps for comprehensive planning.

For children with disabilities, UNICEF continues to partner with Humanity and Inclusion to ensure remote learning opportunities are available for all students. During August 2020, approximately 112 television lessons were supported with sign language interpretation. In collaboration with the Government of Rwanda and Humanity and Inclusion, 7,282 children with disabilities were individually reached to support their learning at home.

To complement efforts to assess remote learning options, in August 2020, UNICEF supported Rwanda Education Board (REB) to develop a question bank for online assessment for students, specifically in the social studies and in science and technology, which complement the efforts of other partners who have supported development of model questions in other subject areas. As a result, more than 15,000 formative assessment questions were developed and will be uploaded onto the e-learning platform.

UNICEF continues to liaise with Rwanda Education Board to develop Learning Passport for Rwanda. This will allow integration of the Learning Passport onto the REB e-learning platform as well as the development of an app to host both the REB e-learning platform along with the Learning Passport. In August 2020, the app was drafted and is currently being designed.

To provide essential child protection information to families, UNICEF supported the National Commission for Children (NCC) to initiate a toll-free hotline. During this reporting period, 137 child protection cases were

reported through this hotline. UNICEF also provided financial support to NCC to continue services that can respond to child protection violations, such as providing psychosocial, financial and material assistance to foster carers and families taking in children from institutions.

UNICEF and NCC initiated retroactive discussions to determine and address the needs of 369 children with disabilities from six districts who were sent home from six institutional care facilities without proper assessment. So far, 163 assessments have been completed with 35 families identified who need critical immediate support. In depth assessments will also be undertaken to ascertain if children can stay home and how to develop a care plan for those children.

Many children remain home without adult supervision. While the professional and volunteer social workforce now have increased capability to move and visit families, this remains severely constrained in Rusizi District and some villages in Kigali where lockdown is still enforced.

In Kigali, a coordinated effort to remove children from living and begging on the streets has resulted in large numbers of children identified and placed in transit centres, placing a significant burden on the limited professional workforce to undertake rapid assessments and place children back into families. During this reporting period, UNICEF has supported NCC to place 344 children into family care who were separated from their own families, most of whom were living on the streets.

Human Interest Stories and External Media

During this reporting period, UNICEF published several videos:

- Children's animation "[Uri Intwari Yanjye](#)" in Kinyarwanda, based on the same story in English, "My Hero Is You." The animation was broadcast three times on Rwanda TV during the *Itetero* children's programme. The text story is also available on the website in both [English](#) and [Kinyarwanda](#).
- Inspiration for [home activities with children](#) during school closures, featuring one UNICEF staff member and his children ([written story](#) also available).
- UNICEF support to [remote learning](#) opportunities for students during school closures.
- [Nutrition tips](#) for family health during COVID-19, covering topics like breastfeeding, complementary feeding and handwashing.

UNICEF Rwanda Humanitarian Action for Children Appeal: <https://www.unicef.org/appeals/>

Next SitRep: 30 November 2020

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Annex A: Summary of Programme Results

		UNICEF and Partners Reported Results		
	Indicators	Target 2020	Total Results 30 September	Change since last report ▲ ▼
1. Risk Communication and Community Engagement RCCE)				
1	Number of people reached on COVID-19 through messaging on prevention and access to services.	6,000,000	6,000,000	N/A
2	Number of people engaged on COVID-19 through RCCE actions	500,000	30,000	▲ 15,000
2. Provision of critical medical and water, sanitation and hygiene (WASH) supplies and improving infection prevention and control (IPC)				
1	Number of healthcare facilities staff and community health workers provided with Personal Protective Equipment (PPE).	10,000	55,000	▲ 55,000
2	Number of healthcare facility staff and community health workers trained in Infection Prevention and Control (IPC)	1,000	160	▲ 28
3. Supporting the provision of continued access to essential health care services for women, children and vulnerable communities, including case management				
1	Number of healthcare providers trained in detecting, referral and appropriate management of COVID-19 cases among children, pregnant and breastfeeding women.	10,000	0	0
2	Number of primary caregivers of children aged 0-23 months who received IYCF counselling through facilities and community platforms.	75,000	14,000	▲ 3,000
4. Access to continuous education, social protection, child protection and gender-based violence (GBV) services				
1	Number of children supported with distance/home-based learning.	3,000,000	2,436,025	▲ 427,930
2	Number of schools implementing safe school protocols (COVID-19 prevention and control)	3,000	0	0
3	Number of children without parental or family care provided with appropriate alternative care arrangements.	1500	1,302	▲ 344

Annex B: Funding Status

Pillar	Total Requirements	Funds available 2020		Funding gap	
		Funds Received 2020	Carry-Over from 2019	\$	%
1. Risk Communication and Community Engagement (RCCE)	475,000	130,000	-	345,000	73%
2. Provision of critical medical, water, sanitation and hygiene (WASH) supplies & improving infection prevention and control	2,425,000	130,000	-	2,295,000	95%
3. Supporting the provision of continued access to essential health care services for women, children and vulnerable communities, including case management	1,000,000	475,000	-	525,000	53%
4. Access to continuous education, social protection, child protection and gender-based violence (GBV) services	542,500	370,000	-	172,500	32%
5. Data collection and social science research on the secondary impacts on children and women	50,000	30,000	-	20,000	40%
6. Coordination and Operational costs	507,500	132,500	-	375,000	74%
Total	5,000,000	1,267,500	-	3,732,500	75%