Rwanda: 2019 Mid Year Report **BURUNDI REGIONAL RRP**

January - June 2019

72,117

BURUNDIAN REFUGEES HOSTED IN RWANDA (JUNE 2019)

SITUATION OVERVIEW

Of the total of 148,746 refugees and asylumseekers in Rwanda, as of end of June 2019, 72,117 are Burundian refugees (26,735 HH) who fled insecurity and unrest due to the political situation. The vast majority (60,331) are living in the country's largest refugee camp, Mahama, opened in April 2015. Four transit/reception sites are currently operating. The remaining 10,719 are living in Kigali and 837 in Huye, and 230 others spread between other camps and reception centres. Of the 72,117 Burundian refugees registered in Rwanda, 71.5 per cent are women and children. RRP partners cover urgent, life-saving needs. However, now that the Burundian refugee population has been in Rwanda for three years and continues to grow, emergency facilities established in 2015 are deteriorating and need rehabilitation.

Since January 2019, 1,382 Burundian who fled into

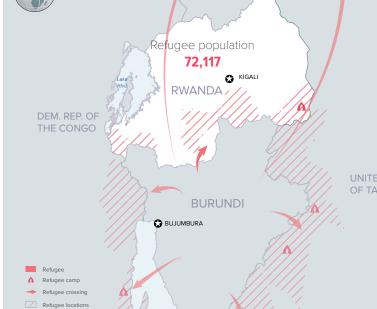
Rwanda were registered by UNHCR, with an average of 53 new arrivals weekly. While this represents a smaller influx as compared to 2018 (106 per week in 2018), these new arrivals nevertheless require immediate support to ensure adequate levels of protection and basic humanitarian assistance are provided.

Currently, RRP partners do not foresee a possibility for a safe and dignified repatriation of the majority of refugees in Rwanda to Burundi in the near future. Information from the Burundian community on intentions of return indicates that they do not feel that it is safe to go back to Burundi in light of the prevailing political and security situation. However, according to the information shared by the immigration services, a reported 942 Burundian refugees spontaneously returned to Burundi in the first half of 2019. More information on intentions of returns will be collected during the upcoming verification exercise which will be conducted in Mahama camp from beginning of September 2019.

Following the verification exercise conducted in urban settings in the first half of the year, UNHCR registered a 62 per cent decrease of the urban refugee population. Given that this population includes 90 per cent of Burundians, the number of urban Burundian refugees dropped significantly and stand at 10,061 at mid-year. The operation will continue the verification exercise in Mahama camp from early September, ensuring accurate population figures and information on intentions to return, and paving the way for refugees to obtain identity documents issued by the Government.

RRP partners work closely with the Government of Rwanda (GoR) and in particular with its primary counterpart, the Ministry of Emergency Management (MINEMA), to ensure protection and basic assistance for all refugees in the country and to identify appropriate durable solutions. A total of nine agencies are involved in the inter-agency refugee response plan and are working with other partners in Rwanda, providing services in the refugee camp and transit / reception sites and ensuring that protection and assistance is provided in urban settings.

IN 2019





US\$ 73.5 M

REQUIRED IN RWANDA IN 2019

13 **RRP PARTNERS IN RWANDA** RRP partners continue to ensure that refugees fleeing from Burundi have access to the territory, can exercise the right to seek asylum and ensure protection from refoulement, access to registration, documentation, protection and life-saving support in multi sectoral areas.



284 SGBV incidents were identified by partners during the first half of the year



All refugees and asylum-seekers are individually registered and proof of registration (a protection document) is provided to them. In addition, Machine Readable Convention Travel Documents (MRCTD) are provided to facilitate travel, and to give them access to business, health care, studies or family reunification. However, the financial cost of these services is very high for refugees. Another challenge is the obligation for all registered refugees in camp setting to request exit authorization as they may face arrest and detention if they do not have this authorization. The provision of refugee identity card, one of the commitments of Rwanda in line with CRRF, is expected to give more freedom of movement to refugees and reduce arbitrary detention.

Child Protection - Mechanisms are in place to support children, including those who are at heightened risk. Best Interests Procedures are in place and operational. During the period under review, 228 Best Interests Assessments (BIA) and 21 Best Interests Determinations (BID) were conducted for Burundian children in camps and 15 BIA and four BID for those in urban areas. A total of 1,307 birth certificates were issued of which 1,226 under regular registration (30 days after birth) by competent authorities with support of a legal partner.

In Mahama camp, 14 Child and Youth Friendly Spaces hosted children on a daily basis with learning and recreation activities as well as psychological support. Some 7,487 adolescents participated in targeted programs such as vocational training, sport association group activities, games and language learning activities. A total of 148 community based Child Protection committees/groups were operating. Protection mobile clinics were held throughout the reporting period in different villages and at school level to sensitize communities on Child Protection response and prevention mechanisms in place, as well as the reporting channels and the referral pathways.

Despite the sensitization conducted on a weekly basis in different villages, parents still leave their children unattended while they attempt to find livelihood opportunities, which leads to protection risk including neglect, child defilement and abuse. Negative coping mechanisms, alcohol abuse and negative behavioural practice also lead to child neglect and misuse of resources, in particular cash received through cash based interventions. Child defilement/teenage pregnancies and child marriages are still a challenge in the camp. The current number of case workers (10) in camp is inadequate to cover the child protection activities, particularly case management. Material support provided to children at risk is inadequate to cover the needs. Vocational training opportunities for youths and teenage mothers are also limited, leading to youths being idle and resorting to negative coping mechanisms.

In urban areas child protection risks including child neglect, abuse, child labour, defilement, teenage pregnancies and child marriages are still significant and coupled with the demographical distribution of the refugee population in urban areas which is by nature scattered and as such difficult to be reached. The program currently relies on one community centre in Gikondo, Kicukiro District, however, in order to improve the catchment area there is need to decentralize the outreach system.

Two Child Protection sub-cluster meetings were organized and chaired by the government (the National Commission for Children, NCC) in the first half of 2019. Through this forum, RRP partners advocated for full

inclusion of refugee children in national Child Protection systems.

SGBV - A total of 284 SGBV incidents (67 girls, 2 boys, 195 women and 20 men) were identified by partners during the first half of the year. These cases included psychological and emotional abuse incidents (94), rape (84), denial of resources, opportunities and services (76), physical assault (26), and sexual assault (4). Multi-sectoral support was provided for all identified cases of SGBV by partners following the principle of confidentiality and survivors' consent to receive services. Specialized services were provided by National Isange One Stop Centres (IOSCs) including providing forensic evidence for the survivor to access legal justice. Some 42 women at risk (sex workers) were identified by protection and health partners in 2018, who have continued to be assisted this year. This year, a total of 164 pregnant teenage girls (including 104 girls that were identified in 2018) are receiving appropriate services by relevant partners.

There are currently 19 community based SGBV prevention and response groups in Mahama camp. In line with the SASA! Approach, Community Activists reached out to 15,292 refugees at the household level and discussed topics related to SGBV prevention, including the relation between HIV and SGBV. Similarly, Drama Troupe members performed sketches related to SGBV prevention at the community level and reached out to 6,190 refugees. A further 526 refugees were trained on SGBV prevention. Refugees continued to benefit from the pre-existing women and girls' opportunity centre. Also, joint training programmes were organized for partners including to government institutions on SGBV Case Management, SGBV Mainstreaming as well as Clinical Management of Rape.

However, refugees faced continued risks of engaging in negative coping mechanisms in order to meet their basic needs. There is a lack of vocational training programmes and informal education in the camp, in particular for the child mothers and other children who never attended or dropped out of school. Limited support is available for survivors in need of specialized psychological support. GBVIMS roll-out was expected to begin in 2018. However, due to issues around confidentiality and data sharing among the stakeholders, no decision has been made so far. More staff are required to provide appropriate Prevention, Identification and Response services to refugees in the camp.



56 additional primary classrooms and teachers are needed 18 new Early Childhood Development classes contructed, which will facilitate the enrolment of additional 1,800 children

The focus of the inter-agency education response includes the provision of school feeding programme to keep the children at school and learning, and the construction of more classrooms in order to enrol more refugee students. During the reporting period, 5,386 refugees enrolled in Early Child Development (ECD) classes, 14,544 in primary and 4,765 in secondary. RRP partners, in collaboration with the government, ensured that refugee children are integrated into the national school system and have access to quality education. As a result, 19,309 primary and secondary level students are now enrolled in national schools. In addition, the Government of Rwanda recruited 39 teachers and included them in the government payroll to support the refugee integration process into the national system. The main gaps and the challenges faced by the refugees are overcrowded classrooms, estimated at 105 students per classroom while the national standard ratio is of 46 students per classroom. As such, 150 additional classrooms are needed to ensure that primary and secondary students pursue their studies in a better learning environment. Pending integration of teaching staff into the government pay-roll, partners provide funding to cover incentives and salary for 176 teaching staff. Due to funding shortfalls, partners have not been able to provide sufficient scholastic materials and uniforms for students. As a result, available school materials and uniform is targeted only to those who are critically in need; including children graduating from ECD to primary, and new enrolments. Despite the construction of 18 ECD classrooms in Mahama camp, 40 additional ECD classrooms are required to replace the existing ones that are constructed using plastic sheeting. In total, 92 ECD caregivers are needed, however due to funding shortfall, only 36 caregivers have been recruited during the first half of the year.



60,561 Burundian refugees received assistance

children aged 6-23 months monthly in-kind food received Blanket Supplementary Feeding



All individual refugees registered benefited from general food distribution, either in cash and or in kind. The food provided covers the 2,100 kilo calorie to meet daily energy requirements. Vulnerable groups (e.g. pregnant and lactating women (PLW), people living with HIV (PLHIV), those with chronic medical conditions) and others with special needs received food assistance.

While a complaint response mechanism is in place, it needs to be harmonized in order to better support the beneficiaries to avoid delays in the provision of response. The primary challenge faced by refugees in regards to food assistance is the occasional delay of cash transfers. The Equity Bank has no presence in Kirehe district where Mahama refugee camp is located; the nearest branch is almost 160 km away from the camp. The bank provides cash to agents to deliver to refugees. However, the long distances to travel often leads to distribution delays.



From January to June 2019, Primary Health Care services were 100 per cent accessible and free to both the Burundian refugees in Mahama camp and local host communities through two health centres. A total of 73,288 outpatient consultation services were rendered to refugees including to 1,370 (2 per cent) persons among the host communities. Crude and under 5 mortality rates stood at 0.13 and 0.37 per 100 population per month, respectively, which are below the threshold levels. 1154 children were fully immunized (726 males; 428 females) while 99 per cent measles vaccination coverage was achieved based on the 2019 Standardized Expanded Nutrition Survey (SENS).

Some 990 out of 1,016 child deliveries (97 per cent) were performed in the health facilities and assisted by trained health workers. Some 722 persons living with HIV (100 per cent) are under antiretroviral therapy. The 2019 SENS report showed significant improvement of key nutrition indicators in Mahama camp. Stunting has decreased from 42.1 per cent (in 2018) to 25.5 per cent (in 2019). Similarly, Anaemia has dropped from 44.6 per cent (in 2018) to 30.8 per cent (in 2019). Moreover, the Global Acute Malnutrition (GAM) decreased from 3.3 per cent (in 2018) to 2.3 per cent (in 2019). This progress in health indicators are associated with the continuous effort to improving health and nutrition services, including effective linkages and coordination with other sectors and community empowerment.

Some of the remaining challenges identified include the increased cost associated with medical referral to secondary and tertiary health care due to chronic diseases (continuous haemodialysis, long hospital stay, costly diagnostic procedures (e.g. MRI, CT Scan)); lack of access to Hepatitis B and C screening, vaccination and treatment as this program is not yet integrated with the national hepatitis control program; high level of Anaemia and stunting, though it is improved, due to low consumption of iron rich food (e.g. meat) and other nutritious foods; a gap of about 16,500 mosquito nets; non-accredited health centres on TB diagnosis and treatment (MoH to accredit-advocacy initiated); lack of an infant and young child feeding centre; lack of a laboratory technician for TB testing; and adolescent Sexual and Reproductive Health staff to support reproductive health services (including, prevention early pregnancies, family planning and HIV and sexually transmitted infection prevention among adolescents and young people).



Burundian refugees received productive assets training and business support in cash

1,486 beneficiaries were self-employed and earned incentives through projects



Some 1,919 beneficiaries received training and business support to open or expand their business in order to become self-reliant in the first half of 2019. RRP partners continued to monitor 1,090 female headed households grouped in 45 Saving and Internal Loans Community (SILC) associations, where each association is comprised of 25 members. An additional, 120 households from host community are grouped in four SILC associations. The activities aimed to assist the beneficiaries to support each other and targeted specific groups like female head households, widow and caregivers of Unaccompanied and Separated Children (UASC). RRP partners provided vocational training on tailoring and basic skills in business to 99 single mothers aged between 18 and 25 years. These groups of beneficiaries were targeted due to their exposure to protection risks. At the end of the training, a tool package was provided to allow them to be self-employed and/or employ other beneficiaries.

Shelter & NFIs





Mahama camp was designed for the total population of 60,000 persons. As of 30 June, the camp hosted 60,504 refugees, with an average of 53 new arrivals per week. As the Burundians are continuing to flee to Rwanda seeking international protection, some 656 additional duplex family shelters and 82 blocks of latrines need to be constructed to accommodate the refugees in a safe and dignified manner in accordance with the international norms. In addition, the camp needs to be expanded by an additional 26 ha. Mahama camp lacks adequately built masonry drainage channels in order to reduce or control heavy surface run off, which has resulted into big ravines or gullies within the camp and also towards host communities.



In Mahama Camp, the Permanent Water Treatment Plant (PWTP) was regularly operated and maintained to serve 20 litres of clean water per person per day for 60,504 refugees and host community. The water quality was monitored and tested on a daily basis. The water system was upgraded to provide protection against seasonal flooding conditions and avoid interruption in water supply. The connection of the national power grid to PWTP to shift from diesel generators is in progress.

A total of 3,532 drop holes for communities and 88 stances dedicated to public spaces were dislodged to serve the camp at 17 persons per drop hole; the latrines are also serving as shower rooms in Mahama. Safe waste management such garbage removal and latrines dislodging including general cleaning was carried out to improve the sanitation and hygiene conditions within the camp. The entire camp population was reached by hygiene promotion activities through daily sensitisation, mobilisation and campaigns on best hygiene practices to prevent waterborne diseases (e.g. diarrheal, typhoid) with the support of 120 community hygiene promoters (CHPs).

However, despite the achievements, there remains high prevalence of vandalism of public infrastructure, insufficient access roads and drainage systems with gullies under construction, high frequency of latrine dislodging due to combination of latrines and showers. There is a need to avoid the irregularity of garbage collection trucks and to deploy a third dislodging truck. The pumping pipeline and storage facilities need to be upgraded to cope with the design capacity of PWTP. All of the 19,809 refugee households in the camp received sufficient soap for hygiene on monthly basis. However, there is a lack of soap available at the reception centres for new arrivals, insufficient funds and challenges with the transition to CBI. 376,257.5 kg of soap is needed for new arrivals.

The challenges faced in the WASH response include high prevalence of vandalism of WASH public infrastructure (i.e. hand washing facilities, water taps, tanks etc.), damaged access roads which hampers the access by the dislodging truck and an insufficient drainage network with big gullies. About 83 per cent of households in Mahama did not have access to handwashing stations (1,500 units are required). With the Mahama latrine model, in which the same block includes both latrines and showers, dislodging of the latrine block is a major challenge in the entire camp. There is a need to improve the filtration system (700 latrine blocks require construction of a soakaway pit) and for an additional large capacity truck (20,000 liters). There is also a need to extend the national power grid to the PWTP to reduce the high rate of fuel consumption (350 litres/day). The water intake, pumping pipeline and storage facilities also need to be upgraded to cope with the design capacity of PWTP.

CRRF

On 25 June 2019, a tripartite MoU was signed between MINEMA, RSSB and UNHCR to allow urban refugees (largely Burundian and Congolese) and students to access the Community Based Health Insurance (CBHI) scheme. Funds have been transferred to the Rwanda Social Security Board. In total, 13,825 refugees (12,045 urban refugees and 1,780 refugee students in boarding schools) will have access to community health insurance effective September 2019. Of these 11,266 are urban based Burundian refugees and 355 camp based Burundian refugee-students who attend boarding schools.

UNHCR supported the GoR towards the submission of the IDA 18 related project for refugees and their hosts

2019 & 2020 BURUNDI REGIONAL RRP PARTNERS IN RWANDA

- American Refugee Committee
- CARE International
- Food and Agriculture Organization
- Global Humanitarian and Development Foundation
- Handicap International
- International Organization for Migration
- Save the Children International

- United Nations Development Programme
- United Nations High Commissioner for Refugees
- United Nations Children's Fund
- United Nations Population Fund
- UNWOMEN
- World Food Programme

through participation in the retreat and subsequent discussion with the World Bank Task Team and GoR/MINEMA for the Strategic Plan for Refugees Inclusion (2019 – 2024), the study on economic activity and opportunity in refugee host districts and drafting of the project. The implementation started in the second half of August 2019. In light of the upcoming Global Refugee Forum, UNHCR continues to advocate to the GoR to expand the existing commitments in order to make them broad and comprehensive enough to allow meaningful inclusion of refugees into the national systems and attract development partners support to realize this through potential technical and financial support.

In May 2019, the operation started a mapping exercise geared towards identifying humanitarian and development partners working in refugee host districts. While activities are still on-going, the mapping has provided insights in terms of who is doing what, where, with whom and for whom. Results will pave a way for potential partnerships, advocacy and possible joint resource mobilization initiatives for meaningful refugee inclusion.

FOR MORE INFORMATION

Burundi Data Portal - http://data2.unhcr.org/en/situations/burundi

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BURUNDI REGIONAL REFUGEE RESPONSE PLAN Rwanda: 2019 Mid Year Report

1 January - 30 June 2019

PROTECTION

Burundian refugees are **individually** registered

EDUCATION

8,829 Burundian refugee children enrolled in primary school

SGBV incidents were identified by partners during the first half of the year

> 56 additional primary classrooms and teachers are needed

of UASC are receivina Individual Case Management support

new Early Childhood Development classes contructed, which will facilitate the enrolment of additional 1,800 children

The food provided

energy requirements

covers the 2,100

kilo calorie to

meet daily

FOOD



60,561 Burundian refugees received monthly in-kind food received Blanket Supplementary assistance

HEALTH AND NUTRITION

children (97%) were delivered in the two Health Centres and assisted by trained health personnel

LIVELIHOODS AND ENVIRONMENT

Burundian refugees received productive assets training and business support in cash

SHELTER AND NEIS

19,809 households live in adequate semi-permanent shelters





1 new maternity ward constructed and equipped in Mahama camp.

self-employed and earned

incentives through projects

19,809

beneficiaries

were

children aged 6-23 months

Feeding

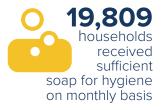
known viral hepatitis B&C cases in Mahama camp cannot access treatment

There is insufficient vocation training for youth

> additional duplex family shelters need

to be constructed

households received adequate non-food items in cash and/or in kind





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