

Burundi

Update on the context and situation of children

With a young, rapidly growing population of 12.8 million, 47 per cent of which are children, Burundi is among the most densely populated countries in Africa.[1] It exhibits a low level of human development, and the economic situation is challenging.[2] The needs of the population remain unmet. Gross domestic product per capita is US\$245.80, and budgetary allocations for key social sectors are insufficient.[3] The multidimensional poverty rate is 53.1 per cent.[4] Children are disproportionately affected; 64 per cent of children experience at least three deprivations related to food, health, water, sanitation, housing, education, or child protection.[5] Children are highly vulnerable to disease outbreaks (cholera and poliovirus), climate change and extreme weather events, which impact social services and food security. There are 111,000 Burundian refugees in Tanzania and 143,822 more across the region[6], repeated calls for their return to Burundi is expected to strain already limited resources. The number of children in street situations appears to be increasing in Bujumbura, the economic capital, and other urban areas. Persistent challenges in child rights, highlighted by recommendations of the 2023 Universal Periodic Review of Burundi, disproportionately affect marginalized children, particularly children with disabilities, who encounter difficulties accessing social services and specialized care and face stigma and discrimination. Early childhood

The population of Burundi is among the youngest in the region. Children aged under 5 (2 million children) represent 16 per cent of the population. The under-5 mortality rate is high, 52.6 deaths per 1,000 live births.[7] Acute respiratory infections, malaria, diarrhœa, and malnutrition are main causes of death. Progress has been limited in neonatal mortality; the rate is 20.9 deaths per 1,000 live births. [8] Stunting prevalence among children ages under 5 is 56 per cent, which is exacerbated by illness, lack of nutritious food and inadequate feeding. Three children in 10 do not have birth certificates because of delays in registration, cost, distance to registration centres, or loss during displacement.[9] Only 58 per cent of the population has drinking water available within a 30-minute walk.[10] Hygiene practices are inadequate; only 6 per cent of the population has access to basic hygiene services, and only 46 per cent use improved sanitation facilities.[11] Among children, 85 per cent do not have access to early learning, crucial to future learning and skills.[12]

Children aged 6–13

Children aged 6–13 (2.7 million children) represent 21 per cent of the population. Despite progress in ensuring universal access to basic education, half of these children do not complete primary education. Disparities persist among children in rural areas (accounting for 90 per cent of children who have never attended school), children in the lowest welfare quintiles, and children with disabilities, who are underrepresented in basic education (only 0.4 per cent of the total school population).[13] Learning outcomes are a big issue. Children who are in school are not acquiring knowledge effectively. Only 15 per cent of grade 2 students reach proficiency; only 55 per cent achieve proficiency in grade 2 mathematics, and only 2 per cent reach proficiency in grade 4 French. Overall, 55 per cent of schools lack latrines, and 54 per cent lack water points.[14] Violence against children is common; 90 per cent of children ages 1–14 have experienced violence.[15] The human and financial resources supporting child protection services are inadequate.

Adolescents

Adolescents aged 14–19 (1.7 million adolescents) constitute 14 per cent of the population. Significant effort is needed to ensure post-basic learning and skills among adolescents. The gross post-basic enrolment rate among adolescents aged 16–18 is 29.2 per cent. Geographical disparities in the rate are significant: only 26.0 per cent in rural areas, against 53.0 per cent in urban areas.[16] Boys (21 per cent) are more likely than girls (15 per cent) to complete post-basic education.[17] Because of mismatches between vocational training and the needs of the labour market, few young people contribute to the economy.[18]

Adolescents face exposure to sexually transmitted diseases, psychosocial problems and early and unintended pregnancies. During the 2021/2022 school year, more than 1,000 pregnancies were recorded among schoolgirls. Adolescent pregnancies are often the consequence of sexual violence and exploitation or lack of knowledge about sexual and reproductive health and services. More than one girl in 10 ages 15–19 experiences sexual violence.[19] HIV prevalence is higher among women (1.2 per cent) than men (0.7 per cent).[20] Adolescents aged 15–19 represented 29 per cent of the 2,043 new infections in 2021. A 2017 menstruation hygiene management study revealed that 60 per cent of girls missed class because of menstruation.

[1] INSBU (National Institute of Statistics of Burundi), 2020, "Demographic Projections at Municipal Level". In French. <u>https://www.insbu.bi/wp-content/uploads/2023/04/PROJECTIONS-</u>COMMUNALES-020620-rapport-VF.pdf.

[2] Burundi is 187 among 191 countries on the 2021 human development index.

[3] IMF (International Monetary Fund), "Burundi Country Profile".

https://www.imf.org/external/datamapper/profile/BDI, October 2023.

[4] INSBU (National Institute of Statistics of Burundi), 2021, *Report on the Integrated Household Living Conditions Survey in Burundi 2019–2020*. In French. <u>http://www.isteebu.bi/wp-content/uploads/2023/01/EICVMB_Rapport-final_Profil-et-d%EF%BF%BDterminants-de-la-pauvrete_2021-1.pdf</u>.

[5] INSBU (National Institute of Statistics of Burundi), Social Policy Research Institute, and UNICEF, 2022, *Multidimensional and Monetary Poverty among Children in Burundi: Final Report* (December). www.unicef.org/burundi/media/3791/file/Multidimensional%20and%20%20monetary%20poverty%20%20among%20children%20in%20Burundi.pdf.

[6] Operational Data Portal UNHCR Burundi <u>https://data.unhcr.org/en/situations/burundi</u> accessed 11 January 2024.

[7] United Nations Inter-Agency Group for Child Mortality Estimation, 2023, "Child Mortality and Stillbirth Estimates". (January). <u>https://childmortality.org</u>.

[8] United Nations Inter-Agency Group for Child Mortality Estimation, ibid.

[9] Third Demographic and Health Survey in Burundi, 2017.

[10] Third Demographic and Health Survey in Burundi, 2017.

[11] WHO (World Health Organization) and UNICEF (United Nations Children's Fund), Joint Monitoring Programme, 2022.

[12] Ministry of National Education and Scientific Research, "School Statistic Yearbook 2020–2021". In French. <u>http://www.isteebu.bi/wp-</u>

content/uploads/2023/01/MENRS_Annuaire_Stat_TOME1_2020_2021preface.pdf.

[13] UNESCO (United Nations Educational, Scientific and Cultural Organization), 2021, "Burundi: Education Sector Analysis 2021". Africa International Institute for Educational Planning, UNESCO. In French. <u>https://dakar.iiep.unesco.org/en/resources/burundi-education-sector-analysis-2021</u>.

[14] UNICEF-WHO, Joint Monitoring Programme in schools 2022.

[15]Third Demographic and Health Survey in Burundi, 2017.

[16] UNESCO, 2021, ibid.

[17] UNESCO, 2021, ibid.

[18] INSBU, 2021, ibid.

[19] Third Demographic and Health Survey in Burundi, 2017.

[20] Third Demographic and Health Survey in Burundi, 2017.

Major contributions and drivers of results

In the country programme 2019–2023, UNICEF–Burundi emphasized cross-sectoral themes and humanitarian and development outcomes, including early childhood development (ECD), adolescent programming, inclusion, and climate change and resilience.

Early childhood development

Following a ECD cost-benefit analysis conducted in 2021 and in line with its commitment to ECD, UNICEF–Burundi adopted a geographic convergence approach to optimize an ECD multisectoral package focused on the first 1,000 days of life. Convergence provinces were identified based on a multiple overlapping deprivation analysis. A pilot programme will start in one district (Kayanza) in 2024.

UNICEF–Burundi undertook advocacy to strengthen ECD policies and legislation, operationalize a national strategy and develop relevant financing. It engaged in advocating for a national committee under the leadership of the Office of the First Lady. Objectives involved the formulation of a multisectoral operational plan aligned with the ECD strategy. UNICEF–Burundi also supported discussions on the institutional anchoring and national coordination of ECD interventions. A feasibility study was initiated on locating a pre-primary class in each basic school. UNICEF–Burundi collaborated with the Ministry of Finance, Budget and Economic Planning and line ministries on developing budget briefs and other data to enhance advocacy for investment in children. In 2023, the national essential family practices package was revised based on the findings of a knowledge, attitude, and practice survey (KAP) conducted in 2022. It emphasized the first 1,000 days of life. Elements of the package had been developed by UNICEF–Burundi under the national cash transfer programme and will be piloted with the ECD package. A multisectoral committee led by the Ministry of Communication, Information Technology and Media was formed to oversee the review, approval and coordination of the revised family practices package.

To address the Sustainable Development Goal on universal birth registration, interoperability between civil registration services and health facilities was piloted through an innovative approach. Civil registration agents were available in health facilities each week in line with the vaccination calendar. The first results were promising, suggesting an increase by 25 per cent in registrations in the pilot province within the legal time limit (15 days). Overall, the births of 100,902 children were registered in 2023 through the support of UNICEF–Burundi, including campaigns on late registration. Community-based child protection committees, solidarity groups and implementing partners provided parenting support to 35,264 parents and caregivers (31 per cent women), which involved reducing the risk of domestic violence.

UNICEF–Burundi expanded the minimum nutrition package to prevent stunting in 27 districts, supported acute malnutrition screening among 1.6 million children and helped train 7,158 community volunteers in infant and young child feeding counselling, reaching 666,630 caregivers, a 60 per cent rise over 2022.

The pilot intervention of the feeding bowl and slotted spoon approach benefited 3,000 children. For micronutrient deficiencies, 1.5 million children aged 6–59 months (90 per cent of the total) received the first dose of vitamin A, and 2.4 million aged 1–7 years were dewormed in 15 provinces. UNICEF–Burundi supported home fortification, reaching 171,260 children aged 6–23 months with multiple micronutrient powder, and 250,000 pregnant women received counselling services and iron–folic acid supplementation for anæmia prevention.

For the treatment of severe acute malnutrition, 2,425 health care providers were trained. Surpassing SPHERE standards, 57,296 children ages under 5 were treated, and a 90 per cent cure rate was achieved. However, 30 per cent of children suffering from severe acute malnutrition remained untreated, highlighting the necessity for enhanced community-based screening and referral. Ready-to-use therapeutic food (RUTF) availability increased to 94 per cent in health district pharmacies and to 90 per cent in health facilities. Caregiver satisfaction rose from 66 per cent to 75 per cent. Early stimulation and positive parenting expanded in 137 health centres and district hospitals, benefiting 11,722 children aged under 5 with severe acute malnutrition.

UNICEF–Burundi worked with partners on the delivery of high-impact, life-saving interventions in health facilities and communities. A three-round door-to-door polio vaccination campaign was undertaken as part of the response to a poliovirus epidemic. More than 3.4 million children aged 0–7 (125 per cent of the target) had been vaccinated at the third round. Among health facilities, 55 were equipped to improve maternal and neonatal care. In 2023, 77.8 per cent of pregnant women received skilled birth delivery, and 65.7 per cent of pregnant women with HIV received antiretroviral therapy.

Through routine vaccination, 85 per cent of children aged under 1 month (343,341 children) received three doses of pentavalent vaccine, and 651,378 children aged 9–23 months received measles and rubella vaccine. Among community health workers, 646 were equipped, supplied and supervised in integrated community case management (iCCM). Of 1.9 million children (54 per cent girls) participating in iCCM care, 98 per cent were seen within 24 hours of illness. Medical oxygen plants were installed in four regional hospitals for intensive care and maternal and newborn services. As part of cholera prevention and response, UNICEF–Burundi helped improve access to water services through the expansion of water networks and water trucking for 169,044 people in six districts. The construction of 40 semidurable latrines and the implementation of maintenance services for emergency latrines benefited 5,000 internally displaced persons (IDPs). To enhance hygiene practices and ensure safe household water treatment and storage, 1,705 hygiene kits were distributed to 8,525 individuals (51 per cent women and girls). This was accompanied by messaging on hygiene and disease prevention (cholera) that reached 464,193 persons (51 per cent women and girls). Essential medicines and kits aided cholera treatment centres in treating 1,350 cases.

Through UNICEF–Burundi support for community-led total sanitation (CLTS), 77,359 households built improved latrines with handwashing facilities, allowing 386,769 additional persons, including 72,326 children under 5 (51 per cent girls), to gain access to basic sanitation services. Likewise, 89,079 people, including 16,658 children (51 per cent girls) gained access to basic water services. UNICEF–Burundi promoted hygiene based on essential family practices through CLTS. This included collaboration with solidarity groups and other organizations on diarrhœal disease transmission and diseases related to water, sanitation and hygiene (WASH). Data on municipalities implementing CLTS showed an average reduction in diarrhœa with dehydration from 336 cases before CLTS (April–July 2023) to 176 cases after CLTS (August–November 2023).

In 2023, 19 community early childhood centres for children aged 3–5 were set up, and 12 preschool classes were built or rehabilitated with UNICEF–Burundi support. UNICEF–Burundi strengthened the capacities of 574 educators and supervisors in early childhood skills development at 220 early childhood education centres, reaching 30,000 children. Early childhood centres were equipped with adapted educational materials. As the major actor in this education subsector, UNICEF was instrumental in supporting the Ministry of Education and Scientific Research in reaching the target of 15 per cent gross enrolment rate originally set in the strategy in 2018.

UNICEF–Burundi supported social protection through the national social protection policy and strategy, which were designed to be shock-responsive, while promoting household resilience and addressing humanitarian and development needs. UNICEF–Burundi contributed to the establishment of the single social registry and enhanced leadership and coordination in social protection through support for the permanent executive secretary of the National Social Protection Commission. It also strengthened community resilience through solidarity groups, which benefited 47,400 young children. Children aged 6–13

UNICEF–Burundi enhanced access to basic education by constructing or renovating 283 classrooms and providing 8,782 benches, benefiting 20,659 students (51 per cent girls). The quality of learning and teaching was improved through teacher training, textbook provision, and remedial courses for students who had interrupted their learning. This enabled 66,394 children (50 per cent girls) to resume education. UNICEF–Burundi supported the country's eligibility for Global Partnership for Education funding to address learning barriers.

Additionally, 19,229 children in 34 schools gained access to basic WASH services, and 112 rainwater harvesting systems were built in 56 schools, allowing 39,200 children (51 per cent girls) to access handwashing facilities in five provinces. Accompanied by a widespread hygiene awareness-raising campaign, including menstrual hygiene, efforts helped protect children against WASH-related diseases.

Child protection case management tools and standard operating procedures (SOPs) were adopted, and community-based child protection committees were mapped across the country to inform capacitybuilding in 2024. Across all provinces, 5,626 children victims of violence, abuse and exploitation (47 per cent girls) received health care, legal aid, or psychosocial support services. Adolescents The UNICEF–Burundi skills-building programme is a contribution to national youth policy. In 2023, 43,410 out-of-school adolescents became community agents of change by participating in and leading civic engagement initiatives, bringing the total to 349,939 (50 per cent girls) since 2019. Among the participants, 135,070 (50 per cent girls) gained skills and opportunities that enhance social cohesion and self-reliance through solidarity groups. Through this resilience mechanism, members contribute to a savings fund, accessible through small credit allotments. The credits help cover unexpected costs, such as medical care or small business upgrades.

Since 2020, programmes have integrated the UNICEF Upshift methodology and skills in science, technology, engineering, and mathematics, particularly in the Skills4Girls component for the empowerment of girls. The collaborative framework, involving government entities, non-governmental organizations (NGOs) and the private sector, aims to foster competitiveness, facilitating a transition from skills-building to earning opportunities. Training in electrical power and business development benefited 919 adolescents (75 per cent girls).

With the University of Burundi, research was undertaken on twenty-first century skills for better employment and entrepreneurship. Recommendations included updating curricula for inclusivity, recognizing transferable skills in non-formal education, and advocating for official recognition and widespread implementation.

UNICEF–Burundi conducted 16 U-Report Global polls, engaging an average of 20,351 respondents and covering crucial topics, such as violence against children, climate change, handwashing, back-to-school initiatives, and care-seeking behaviour. UNICEF–Burundi engaged with a total of 1.1 million adolescents. The information helped empower adolescents to participate in their communities.

Thanks to UNICEF–Burundi advocacy with NGOs and the Ministry of Justice and Keeper of the Government Seals, 303 adolescents in conflict with the law (6 per cent girls) were released from pre-trial detention, and 167 boys received support for post-detention reintegration.

UNICEF–Burundi supported adolescent health interventions in eight districts, providing youth-friendly health and life skills services to 23,526 adolescents. Peer support groups formed adolescent networks, offering support for general and sexual and reproductive health; 13,507 parents were sensitized on open dialogue about sexual health and HIV. Peer educators in 913 solidarity groups conducted community mobilization sessions, using media, such as drama and songs, to highlight the significance of reducing risky sexual behaviour.

Climate change and resilience

UNICEF–Burundi raised awareness about climate change and its implications for children through a partnership with the national NGO Ishaka. It provided capacity-building and coaching in advocacy through the participation of youth groups in workshops on climate change at the Africa Climate Summit in Nairobi and the United Nations Water Conference in New York. Among out-of-school children and adolescents in vulnerable areas, 150 rural pupils and 150 pupils from Bujumbura and suburban schools were sensitized on the consequences of climate change among children and adolescents. The children's expectations and concerns for the 2023 United Nations Climate Change Conference (COP28) were probed. UNICEF–Burundi supported two young people in leading the advocacy of Burundian children and adolescents at COP28. An action plan post-COP28 will become the basis for advocacy and action in 2024.

UNICEF–Burundi supported the installation of two bio-digesters in hospitals in the provinces of Gitega and Kayanza that will enable organic waste to be recycled for the production of gas for hospital canteens and the sterilization of medical equipment and for conversion into fertilizer for agricultural production.

UNICEF–Burundi and the Ministry of Communication, Information Technology and Media carried out a KAP survey among 1,320 households to determine the population's views on climate change and its impact on their lives and on children. Results showed that 88 per cent of respondents had heard about

climate change; 82 per cent believed that cutting down trees was the major cause, and 97 per cent were aware of the impact of climate change on agriculture.

Children with disabilities, gender and accountability towards affected populations

UNICEF–Burundi drafted a situation analysis on the deprivations faced by children with disabilities. Throughout 2023, it strengthened the mainstreaming of the inclusion of children with disabilities. Among staff at partner organizations, 45 underwent relevant training on programming and data disaggregation (Washington six, child functioning module). UNICEF–Burundi recognized the importance of data on inclusion within the education system and enhanced data collection at pilot schools, satellite schools and specialized centres. Among other activities, UNICEF supported the development of an inclusive education strategy and enhanced the application of accessibility standards in building infrastructure.

UNICEF–Burundi undertook a gender programme review that helped identify strategic entry points to address the deprivations and violence faced by adolescent girls. In partnership with government entities, including the Ministry of Communication, Information Technology and Media, the Ministry of Education and Scientific Research and the Ministry of Public Health and the Fight against AIDS, it launched Oky, an app co-created with and for adolescent girls, including girls with disabilities. Oky provides relevant information about menstruation. Its nationwide promotion reached an estimated 139,331 adolescent girls and women.

UNICEF–Burundi co-led the risk communication and community engagement working group, thereby playing a key role in standardizing accountability to affected populations (AAP). It developed a guiding framework and technical documents for AAP practices and helped train 62 AAP focal points at 17 NGOs involved in epidemic response. UNICEF-Burundi implemented an internal AAP plan, requiring partners to conduct community consultations and explain preference considerations before developing a programme document: 31 implementing partners were trained in AAP procedures, and 16 signed protocols confirming feedback mechanisms.

Completing the current programme and crafting the new vision for 2024–2027

The country programme 2019–2023 was designed to uphold quality standards, thereby ensuring the realization of meaningful results for children and their families. Quality programming standards were met, and 97 per cent of the management and programme indicators fulfilled scorecard requirements. The country programme 2024–2027 was approved and recognized as essential in the effort to enhance the situation of children. In the review of the rolling work plan, UNICEF–Burundi collaborated with the Ministry of Foreign Affairs and Development Cooperation and sectoral ministries on field missions and in facilitating an annual review. This ensured a more robust, comprehensive evaluation of the work plan's progress, fostering ties between UNICEF–Burundi and the Government. Aligned with the work plan, a list of key priority indicators was monitored and presented quarterly at the meetings of the country management team to facilitate adaptive management practices.

In 2023, UNICEF–Burundi directed its endeavours towards executing management responses and creating child-friendly materials based on a previous evaluation. A costed evaluation plan was developed for the new country programme 2024–2027. Towards the end of 2023, preparations were undertaken for the establishment of a baseline for the impact evaluation of the multisectoral ECD package, which will be a primary focus in 2024.

UN Collaboration and Other Partnerships

UNICEF–Burundi was a go-to partner on child rights because of its strong evidence generation and programming, including on government priorities. It collaborated with the Government, the United Nations Country Team, the Office of the Resident Coordinator, development partners, and civil society organizations. It strengthened its engagement through involvement in joint United Nations programmes. UNICEF–Burundi was thus active in the human rights programme of the Multi-Partner Trust Fund set for launch in 2024 in anticipation of funding support.

For the country programme 2019–2023, UNICEF–Burundi mobilized US\$132 million though the ORR ceiling was US\$126 million. Its delivery of quality programmes throughout 2023 bolstered its reputation and garnered donor support. Contributors included the Global Alliance for Vaccines and Immunization, the Global Partnership for Education, KfW, the Government of the Netherlands, the Food for Peace Programme of the United States Agency for International Development (USAID), and the World Bank. A partnership was also forged with the African Development Bank (AfDB) on the Water Sector and Climate Resilience Building Support Programme in Burundi.

Donor visits were coordinated with the UNICEF national committees of Australia, Spain and Switzerland, along with high-level visits by the Government of France, KfW, the Swiss Agency for Development and Cooperation, and USAID. The visits showcased UNICEF–Burundi's impact. UNICEF–Burundi also led the United Nations interagency Group for Partnership in Burundi, which included United Nations agencies and the office of the United Nations Resident Coordinator. After contributing to the establishment of the United Nations Sustainable Development Cooperation Framework 2023–2027, UNICEF–Burundi worked with United Nations agencies on the first year of framework implementation. It became the lead of the results group on social services and coordinated the work plan and results framework.

During the review of the 2022–2024 rolling work plan, UNICEF–Burundi enhanced its collaboration with the Ministry of Foreign Affairs and Development Cooperation. It organized two joint ECD field missions to review progress. An annual review was organized with partners on work plan adjustments. The collaboration between UNICEF–Burundi and the Government in the review led to a new work plan. During the process, UNICEF–Burundi successfully transitioned to a digital work plan. To support partnerships with civil society organizations and government partners, training on protection against sexual exploitation and abuse and on the harmonized approach to cash transfers was organized for 100 participants, including training among an expert pool on conducting investigations on sexual exploitation and abuse. On this topic, 19 implementing partners were involved in preliminary assessments through the new United Nations common tool. Regular training was organized among staff and partners on digital programme document development, reporting, the use of the United Nations partner portal and other topics. As a result, all partners were able to submit online reports, and 35 programme documents were signed to provide basic child social services. Capacity-building ensured quality reporting. UNICEF partnered with three civil society organizations led by youth and two by women.

Lessons Learned and Innovations

Lessons learned

Amid a decline in emergency funds and core resources for results (funding without restrictions), UNICEF–Burundi mobilized 106 per cent of planned other resources (funding for specific purposes) in 2023. The pressure to secure resources was heightened by global crises, such as the war in Ukraine, the situation in Gaza, the impacts of COVID and climate shocks. These factors prompted innovative strategies to mobilize donors and determine how to negotiate funding allocations. (Emergency COVID funds were channelled to system strengthening.) Dialogue was also sought with new partners, such as AfDB and the International Monetary Fund, to explore opportunities to collaborate and to secure financing.

UNICEF–Burundi rolled out the field monitoring module to improve the quality and accessibility of programme findings and bottleneck analysis. There is still reluctance to report difficulties and failures. Fostering dialogue on challenges is crucial for adaptation. Staff capacity in monitoring and adaptive programming will continue to be strengthened.

UNICEF–Burundi sought to bolster the resilience of systems and communities to achieve transformation. It aligned internal approaches and fostered collaboration with partners. It recognized community groups, called solidarity groups, as a conduit for activities and a catalyst for positive change in community social norms. The impact assessment of the work with solidarity groups indicated that the incomes of 43.9 per cent of households increased, leading to improved consumption and an 11.0 per cent reduction in poor food consumption scores. Among solidarity groups, 51.3 per cent established income-generating activities. In future, solidarity groups will be leveraged for sustained positive impacts.

The systematic integration of activities promoting inclusion needs to be strengthened. UNICEF-Burundi has therefore dedicated resources to training, the enhancement of procedures, and the development of tools to mainstream inclusion across programmes. Efforts will continue by ensuring the integration of disability inclusion into programming, alongside the development of targeted actions and investments.

The school enrolment of children with disabilities remains low. The lack of incentives among teachers and school authorities to facilitate the schooling of these children exacerbates the challenge. Addressing the issue requires awareness-building in schools and communities. In 2024, UNCEF-Burundi will launch relevant initiatives in satellite and pilot schools in one province.

The adoption of SOPs, tools for child protection case management and tools for the collection of routine administrative data on child protection was important in strengthening the identification and referral of children at risk or victims of violence, abuse and exploitation. The process requires the involvement of key stakeholders and investment in procedures and tools. This will be a focus in 2024. In 2021, a UNICEF–Burundi CLTS evaluation identified a weakness in hygiene promotion. A review and update of CLTS tools and training were initiated to strengthen the component. Following rigorous training among partners on the new tools, the focus shifted to aligning hygiene promotion and essential family practices. This included community initiatives addressing water quality, safe excreta disposal through latrine construction and the installation of handwashing facilities.

Innovation

UNICEF–Burundi launched a call on the Unicorn app in 2022 for innovative projects aligned with the annual management plan. A budget of US\$300,000 was set aside for project financing. Of the six projects selected, five were completed in 2023. They provided insights on how to run such a challenge, ensuring the selection of the most relevant and accountable implementing partners, as well as on how to guide post-pilot reflections on potential project scale or on ending projects. These and other lessons will contribute the innovation strategy for the next Country Programme Document (CPD) and strengthen the development of innovative initiatives that are cross-sectoral, realistic and achievable and have a high probability of scale-up.

The innovative Play to Heal Project was one of the pilot schemes. It involved 100 children ages 5–15 in repurposing empty therapeutic food packaging into toys for the cognitive and physical development needs and acceleration of healing among children ages 6–59 months affected by severe acute malnutrition. Collaborating with a graphic designer, 11 approved toy designs underwent an eight-week pilot experiment in three health centres targeting 600 children in supplementary therapeutic feeding centres. Challenges included inadequate play areas and toy damage because of environmental conditions. Health care staff training is essential for effective play sessions and project sustainability. The results will inform advocacy on integrating successful toy models into RUTF cartons. UNICEF–Burundi sought to enhance credit access among adolescent solidarity groups using innovative blockchain solutions and transitioning to digital financial records. This built trust with microfinance institutions, creating economic opportunities for youth. Blockchain is the basis for Yoma

Burundi, which supports marginalized youth through group functionality, facilitating skills-building and job opportunities, coaching, and enhancing youth participation.

UNICEF–Burundi supported the real-time monitoring of pregnant women and mothers of newborns using RapidSMS in five health districts. Among women attending their first antenatal visit, 16 per cent (7,659 of 49,086) were referred by community health workers through RapidSMS reminders, and 20,307 pregnant women were followed up.

UNICEF–Burundi mobilized more than US\$1.1 million to digitalize 100 health centres by 2024, contributing to improved care, time savings among health providers and patients, the implementation of standard therapeutic protocols, digital immunization registry, digital appointments reminders, and access to quality data.

UNICEF–Burundi introduced the soap opera Sindi Igito to foster the building of skills among adolescents and achieve cost-effectiveness in adolescent empowerment initiatives. The intervention addresses challenges faced by adolescents, promotes entrepreneurship, and tackles social and gender norms. Effective in expanding programme access, its success requires interactive features and a robust monitoring mechanism to quantify behavioural changes and skill development.

Challenges persist in mainstreaming innovation sustainably. While efforts have been undertaken to boost the innovative spirit during current CPD development, innovation is not yet perceived as the business of all.