United Nations E/ICEF/2000/P/L.1

Distr.: Limited 5 November 1999

Original: English

For information

United Nations Children's Fund

Executive Board

First regular session 2000

31 January-4 February 2000

Item 8 of the provisional agenda*

Country note**

Rwanda

Summary

The Executive director presents the country note for Rwanda for a programme of cooperation for the period 2001 to 2006.

The situation of children and women

- 1. Rwanda has made social and economic progress since the 1994 genocide which claimed the lives of many children and women. Social, administrative, judicial and economic infrastructures have been rehabilitated. The economy has stabilized and continues to grow rapidly due to sound macroeconomic policies and substantial support from donors. Recurrent expenditure in the social sectors has increased from 3 per cent of gross domestic product in 1997 to 3.6 per cent in 1998. A "Government of National Unity" has been in place since July 1994. The legislature has been playing a widening role as suggested by the
 - * E/ICEF/2000/2.
 - ** An addendum to the present report containing the final country programme recommendation will be submitted to the Executive Board for approval at its second regular session of 2000.

- actions taken by Parliament against corruption. The mandate of the Transitional Assembly, in accordance with the Arusha Agreement which expired in July 1999, has been extended for a period of four years. In order to promote popular participation, local elections were held on a non-party basis in March 1999. The Government has announced the organization of further elections at communal, prefectural and parliamentary levels.
- 2. Although Rwanda has ratified the Convention on the Rights of the Child and the Convention on the Elimination of All Forms of Discrimination against Women, the rights of children and women which were grossly violated during the events of 1994 are far from being fully respected. As a result of the genocide, an estimated 20 per cent of the child population is severely traumatized. Some 4,454 children are among the 130,000 persons who remain in detention for alleged participation in the genocide. The process of bringing to justice the 130,000 people in detention for participating in the genocide remains slow.

The Government recently released about 15,000 prisoners, mostly for lack of evidence. Children and women were once again caught in the violence in north-western Rwanda in 1998. There, fighting between armed insurgents and the army led to the displacement and, at times, coerced relocation of over 600,000 people, forcing humanitarian agencies to provide emergency assistance on a large scale. Since mid-1999, there has been a substantial improvement in security in this region. The Government is now engaged in a controversial nationwide villagization policy, known locally as *imidugudu*. Although justified by the Government on the basis of socio-economic reasons, it has generally been marked by a top-down approach that runs the risk of jeopardizing its long-term sustainability.

Social indicators have declined over the last 15 years and are worse than the average for sub-Saharan Africa. The population living below the poverty line is estimated to have risen from 40 per cent in 1985 to 53 per cent in 1992, and to 70 per cent in 1998. The impact of the AIDS epidemic is growing. In 1998, HIV seroprevalence was 10 per cent in rural areas and 11 per cent in urban areas. One out of four pregnant women in Kigali is HIV positive, while more and more children are orphaned by HIV/AIDS. An estimated 300,000 children are living in extreme poverty in child- or youth-headed households. The infant mortality rate is estimated at 105 per 1,000 live births and under-five mortality is 170 per 1,000 live births. Some 27 per cent of children are under weight, 43 per cent are stunted, 25 per cent of children below one year of age are vitamin A deficient and 43 per cent of children under five years old suffer from anaemia. Malaria, acute respiratory infections and diarrhoeal diseases are the main direct causes of child mortality. Maternal mortality is estimated at 810 per 100,000 live births. Life expectancy at birth declined from 49.5 years in 1991 to 47.2 in 1996, and could decline further. Less than 50 per cent of the population have access to potable water. Water availability to rural dwellers limits consumption to levels severely below recommended standards, and less than 1 per cent of rural households have hygienic latrines.

Lessons learned from past cooperation

4. The current Government of Rwanda-UNICEF programme of cooperation covering the period 1998-2000 (E/ICEF/1997/P/L.20) was designed to bridge emergency and development activities according to Government developmental goals.

- 5. The overall capacity of the Government for programme planning, management and monitoring has improved over the last two years. Institutional capacity has been built within sectoral ministries centrally, but also to some degree at the peripheral levels. As a result, progress has been made to improve implementation and monitoring, including the liquidation of cash assistance to Government by partners. The Ministry of Finance and Economic Planning has been formally entrusted by the Cabinet with the coordination of external assistance, and a supervisory unit (CEPEX) has been established. An informal mid-term review of the programme took place under the leadership of the above-mentioned Ministry in June 1999. This, combined with annual sectoral reviews and yearly joint planning of activities, has led to greater Government ownership of the programme compared to the emergency period.
- 6. Government and non-governmental organization (NGO) partners need further training in project management, especially at regional and communal levels. The gaps in post-genocide baseline data and social information systems make monitoring and planning difficult. Human resources and monitoring and evaluation systems need to be further strengthened. The social upheaval caused by the genocide has resulted in a generally low participation of communities in development-related decision-making, except within isolated projects. Participatory community capacity-building will require greater emphasis as a sustainable strategy for the new programme.
- 7. The emergency situation in the north-west of Rwanda in 1998 and early 1999 required a diversion of resources and staff from regular programme activities to face emergency needs with increased costs. To take into consideration the possible recurrence of emergencies in the future, the programme will integrate into its various components an adequate capacity for contingency planning and emergency response. The large-scale violations of basic human rights in the recent past also necessitate increased efforts by all partners to promote implementation of the Convention on the Rights of the Child as a legal and moral foundation in order to nurture a culture of human rights and respect for the rule of law.
- 8. In response to the transition and the more sustainable developmental approach of the bridging programme, programmes were streamlined and staff numbers reduced from 150 in 1997 to 82 in 1998, and to 75 in 1999. A more assertive approach to donors by the Government and UNICEF will be implemented so as to use UNICEF

resources more efficiently in promoting children's and women's rights.

Proposed country programme strategy

- 9. The strategy for the proposed country programme has been developed on the basis of a common approach between the Government and UNICEF. A strategy meeting was held in September 1999 under the leadership of the Ministry of Finance and Economic Planning, with highlevel participation from the mainline ministries as well as NGOs, and United Nations and donor agencies. Government officials and other partners embraced the rights-based approach of the UNICEF mandate. An interministerial working group was formed to further advance the planning of the country programme exercise.
- 10. The overall programme goal is to support the fulfilment of children's and women's rights in Rwanda. Two overarching priorities will guide the new programme. Firstly, the poor survival rates of children will necessitate the intensification of programme interventions, with a strong focus on reducing the incidence and mitigating the impact of malaria and HIV/AIDS. Secondly, the programme will support access to basic social services as specific vulnerable groups now form an exceptionally large part of Rwanda's population.
- 11. Within this framework, the major objectives of the programme are: (a) to reduce morbidity and mortality of children under five years old and to reduce maternal mortality by 25 per cent; (b) to ensure universal access to quality primary education and improve young people's quality of life; (c) to reduce exploitation, abuse and harm of children, and enhance protection measures for children with special needs; and (d) to promote the involvement of children in the decision-making process at the community level on issues which affect them.
- 12. The major strategy components are: (a) participatory capacity-building, especially at local and community levels; (b) service delivery for critical needs and as part of emergency response; (c) advocacy to promote awareness of and action for children's and women's rights; and (d) the empowerment of communities to strengthen their ability to act for their own welfare.
- 13. The *survival*, *growth* and *development* programme for children, youth and women will address the major impediments to their right to survival. Maternal and child health will be supported through the expansion of the HIV/AIDS mother-to-child transmission pilot project, the continuation of malaria control activities, the Integrated Management of Childhood Illnesses, safe motherhood and health reform. Child growth and development will be

- promoted through early child care, nutrition, hygiene and environmental awareness, and education interventions. Community-based nutrition activities and the prevention and control of micronutrient malnutrition will contribute to the reduction of protein-energy malnutrition and micronutrient deficiencies in children under five years old and in pregnant and lactating women. The water and sanitation component will support water quality management, hygiene, sanitation and community environmental care through schools and policy development.
- 14. The *education, development and protection* programme will aim at better fulfilling the rights of children through: (a) achieving universal quality primary education through in-service training, curriculum development, certification of teachers, support to policy development, girls' education, pre-school education, the reintegration of out-of-school youth and the elimination of exploitative forms of child labour; (b) strengthening juvenile justice and vocational training for youth; and (c) continued support for children in need of special protection, including orphans and children in detention.
- 15. The cross-cutting HIV/AIDS prevention and child participation programme will aim at: (a) promoting the involvement and empowerment of youth on issues that affect them; and (b) reducing by 50 per cent the seroprevalence of HIV among youth. Participatory problem analysis at the community level will support the greater empowerment of young people in decision-making. An HIV/AIDS voluntary confidential counselling and testing component for youth will be supported. The Sara Communication Initiative will be expanded with materials on HIV/AIDS particularly relevant to Rwanda.
- 16. The intersectoral *social planning and rights advocacy* programme will: (a) support child-focused and rights-based policy formulation through the broadening of strategic alliances and support to legal reform; and (b) strengthen monitoring and evaluation systems, with an emphasis on the development of participatory methods at local levels.
- 17. The Ministry of Finance and Economic Planning will be responsible for programme coordination and review. The programme of cooperation will be developed within the framework of increasing programme collaboration of United Nations agencies in Rwanda, mainly through the ongoing Common Country Assessment (CCA) and United Nations Development Assistance Framework exercises. The CCA is to be completed by the end of 1999. It will be supported by periodic updates of the situation of children and women. The next country programme cycles of the

various United Nations agencies will start in 2001. Partnerships will be maintained with NGOs and strengthened with civil society organizations.

Estimated programme budget

Estimated programme cooperation, 2001-2006^a

(In thousands of United States dollars)

	Regular resources	Other resources	Total
Child survival, growth and development	5 200	12 000	17 200
Education, development and protection	4 000	11 000	15 000
HIV/AIDS prevention and child participation	1 600	2 800	4 400
Social planning and rights advocacy	1 900	1 200	3 100
Cross-sectoral costs	1 400	3 000	4 400
Total	14 100	30 000	44 100

^a These are indicative figures only which are subject to change once aggregate data are finalized.

4