

Update on the context and situation of children

Following two years of severe recession, Chad now appears to be on the path to economic recovery, with a projected 3 per cent rise in real GDP in 2019[1]. However, given a population growth rate of 3.6 per cent, the increase in GDP is not expected to improve living standards in the short term, especially for the country's 8,986,859 children under 18 years of age (57 per cent of the total population). The 2019 Public Finance Bill saw modest increases in budget allocations to the social sectors, following severe cuts during the recession years, but spending in key social sectors was just 4.3 per cent of GDP compared with an average of 7.2 per cent for other Low Income Developing Countries[2]. Fiscal space analysis conducted by UNICEF in partnership with the Ministry of Budget and Finance revealed that the social sectors require an additional investment of 4.6 per cent of GDP to meet national development targets.

Whilst social sector reforms are underway, they have not yet significantly improved the lives of children in Chad, and the postponement of legislative elections to 2020 could further delay these reforms.

In 2019, insecurity in the Lac area and in some eastern and northern provinces, resulted in significant population movements and cases of children becoming separated from their families. Approximately 169,000 people remain internally displaced due to conflict, of whom 74 per cent are living in displaced person sites and 26 per cent in host communities[3].

Over 2.4 million children (1.23 million girls and 1.17 million boys) were estimated to be in need of humanitarian assistance in 2019 due to food insecurity and malnutrition, the refugee crisis, floods and epidemics[4]. The number of children affected by severe acute malnutrition rose from 268,837 in 2018 to 304,600.[5] According to 2019 SMART survey results, Chad has an overall acute malnutrition rate of 12.9 per cent, including 2.9 per cent severe and 32.0 per cent chronic malnutrition.

In 2019, Chad faced outbreaks of measles (26,623 cases of measles reported in 123 districts epidemiological week ending 29 December) and cholera (98 cases and 12 deaths in two provinces, of which four in health centres and eight at community level), as well as six cases (three clinical) of vaccine-derived polio virus type 2 in two districts.

Child mortality in Chad is currently 119 deaths per 1,000 live births and maternal mortality is 856 deaths per 100,000 live births[6]. In order to reach **SDG 3.1 and 3.2 targets**, maternal and child mortality must be reduced by 12.1 per cent and 14.2 per cent per year respectively, as opposed to the current rates of 2.4 and 3.1 per cent. The majority of child deaths is linked to common childhood diseases, including pneumonia, diarrhea, and malaria, as well as neonatal conditions. Malnutrition is an important underlying factor. Only 34 per cent of deliveries are attended by qualified personnel.

The economic and security crisis that affected Chad from 2014 to 2017 was marked by a drop in primary school enrolment from almost 2.5 million children to less than 2.1 million, and a decline in the gross enrolment ratio of almost 25 per cent, compromising efforts to reach **SDG 4.1 target** on universal primary enrolment. Data on the numbers of out-of-school children are not available, but it is estimated that during 2014-2017 the number of children aged 6 to 15 years out of school increased by 25 per cent to around 2.5 million, or more than 50 per cent of this age group. During this period, state subsidies for community teachers were not paid and the salaries of civil servant teachers were reduced, leading to strikes and closure of 2,350 primary schools (25 per cent of schools). Education sector indicators are only now returning to pre-crisis levels.

2019 was a significant year for birth registration as the government launched institutional and legal reform of the civil registration and vital statistics (CRVS) system, which includes birth registration. The associated Bill of law is before Parliament, but the institutional reform component has been implemented with the creation of a National Agency (Agence Nationale des Titres Securises-ANATS) that will manage and operationalize CRVS. Birth registration in Chad remains dismally low at 12 per cent[7], and reaching the **SDG 16.9 target** will be challenging.

In 2019, 67 per cent of the national population defecate in the open and Chad is far from achieving the **SDG 6.2 target**. Due to rapid population growth, the number of people, including children, living in communities practicing open defecation actually increased. Access to basic sanitation has been declining over the last two decades, from 12 per cent in 2000, to 8 per cent in 2017[8]. Only 6 per cent of people have access to a handwashing facility with soap and water. Basic water access declined from 43 per cent[9] to 39 per cent[10] at the national level, challenging achievement of the **SDG 6.1 target**.

The situation in schools remains alarming despite efforts by the Ministry of Education to promote the water, sanitation and hygiene (WASH) in Schools strategy. Only 2 in 10 students have access to safe drinking water and separate boy and girl sanitation facilities[11]. The 2018 Ministry of Education school survey indicates that 8 out of 10 adolescent girls do not have adequate facilities and knowledge to manage their menstruation. Only half of health centres have access to safe

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drinking water and 75 per cent are equipped with sanitation facilities.

[1] IMF, Chad: Fifth Review under the Extended Credit Facility Arrangement and Financing Assurances Review, December 2019

[2] IMF, Issues Paper, July 2019

[3] IOM, Displacement Tracking Matrix, October 2019

[4] OCHA, HNO, 2019

[5] OCHA, HNO, 2018, 2019

[6] UN IGME, The United Nations Inter-Agency Group for Child Mortality Estimation, 2019

[7] Chad National Institute of Statistics, Economic and Demographic Studies/Ministry of Public Health/ICF International/UNICEF, MICS 2014/15

[8] WHO/UNICEF, JMP, 2019

[9] WHO/UNICEF, JMP, 2017

[10] WHO/UNICEF, JMP, 2019

[11] Chad Ministry of National Education and Civic Promotion, 2019

Major contributions and drivers of results

UNICEF Country Office in Chad identified four out of the eight Key Results for Children (KRC) selected at the regional level as priority focus for support till the end of the country programme. They also appear as priorities in the 2019 Annual Management Plan.

Every child protected through vaccination

Little progress was achieved in 2019 against Key Results for Children 1 (KRC1) targets. By end October 2019, 80 per cent of children aged 0-11 months had received their third dose of Pentavalent vaccine (76 per cent in 2017 and 72 per cent in 2018) and 69 per cent had been immunized against measles (66 per cent in both 2017 and 2018), against a target of 90 per cent. Sixty-six of 126 districts reported Pentavalent 3 coverage above 80 per cent among the target age group. These results are not confirmed neither by evaluation nor by the WHO/UNICEF estimates, which stand at 41 per cent for Penta3 in 2017 and 2018. It is believed that the administrative data include children immunized above target age (under one year of age). Drivers of change for KRC1 included close monitoring of the vaccine stock at all levels, which facilitated timely advocacy and support to the ministry of health to secure funds for vaccine procurement. Unfortunately, competing priorities for limited government social sector funding resulted in vaccine stock-outs (BCG, measles, TT and IPV), including at the peripheral level. Joint advocacy with immunization partners, including Bill & Melinda Gates Foundation and GAVI Alliance was successful in securing government commitments on vaccine procurement, which will hopefully continue into 2020.

The 2018 roadmap for revitalization of immunization services identified the very limited coverage of functional cold chain equipment as an important constraint. UNICEF provided cold chain support in 11 provinces and installed 88 solar refrigerators increasing coverage (defined as health facilities having an approved functional refrigerator) to 49 per cent nationwide. In partnership with GAVI, UNICEF started preparatory work for implementation of the 'Cold Chain Optimization platform': data have been collected from 75 per cent of the over 900 health facilities targeted for installation of solar-powered cold chain equipment. Partners, including UNICEF, supported the development of an updated health map which will be used among others to prioritize health centres in terms of cold chain equipment, based on population density, but also remoteness, to ensure equity in access.

Overall technical capacity was addressed through training 339 health personnel in charge of vaccination and 40 trainers in child health at facility and community level in 17 UNICEF-supported districts. Fourteen medical doctors were trained in district management and public health, 92 health workers were trained in Integrated Management of Neonatal and Childhood Illness and 104 in focused antenatal care. All three training packages directly impacted immunization through: enhanced capacity for district planning of health services, adoption of a comprehensive approach to the young child's health and enhanced focus on tetanus toxoid vaccination as part of antenatal care. Chad was certified as having eliminated

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neonatal tetanus in February 2019.

Close support supervision (including by UNICEF staff members) alongside the personal involvement of the Minister of Health in setting chief district medical officers' responsibilities during the April 2019 measles response, proved successful. The response, which was supported by UNICEF in ten districts, vaccinated 653,535 children (evaluation verified coverage of 90 per cent) and halted the epidemic in these districts. The same methodology was applied in another 14 outbreak districts in December 2019, with 467,455 children immunized out of a planned target of 424,734.

Two cases of circulating vaccine-derived poliovirus type 2 were confirmed on 10 December 2019 in Mongo district, Guera. This follows one positive and three healthy contact cases confirmed on 16 October 2019 in Mandelia district, Chari Baguirmi, for a total of six confirmed cases. 87 acute flaccid paralysis (AFP) cases await laboratory results. Nine polio vaccination campaigns were conducted; three bOPV eradication campaigns and six mOPV2 outbreak response campaigns. The national bOPV campaign reached 4,693,712 children (more than 100 per cent coverage). The requirement for multiple, recurrent polio vaccination campaigns is a significant burden on health districts.

In the area of nutrition, the number of malnourished children treated increased from 263,456 in 2018 to 368,545 (of which 317,241 in high prevalence provinces) as of end December 2019, with an average cure rate of 93%. The increase in cases treated is linked to increased access, rather than a deterioration in the nutrition situation, as 60 outpatient services within existing health centres and two nutrition therapeutic units within hospitals were opened for case management of children with SAM and medical complications. Treatment was integrated with infant and young child feeding (IYCF) promotion and HIV testing, with 2019 of 2204 admitted children screened, and 11 children put on antiretrovirals. 1,747 health workers were trained on IYCF and integrated management of acute malnutrition; nutrition commodities and essential drugs were provided to 786 health centres with trained personnel (out of 1,551 nationwide); and a network of 13 consultants deployed in the provinces supported supervision and coordination. Enhanced cooperation with other United Nations agencies, especially those targeting food security at the household level, should demonstrate results in 2020.

Access to prevention of mother-to-child transmission activities expanded from 766 facilities to 944 in the 10 priority provinces and from 321 to 608 facilities in the 13 provinces with lower HIV prevalence; no stock outs of commodities were reported in 2019, contributing to a 10 percentage point improvement in pregnant women accessing HIV testing during antenatal visits (45 to 55 per cent). Decentralization of early detection in infants (Point of Care) resulted in an increase in early detection in children aged 6 weeks to 18 months from 5 per cent to 17 per cent as of mid-2019.

Every child has the opportunity to learn

Under Key Result for Children 3 (KRC3) - equitable and sustainable access to education - UNICEF's primary focus in 2019 was out-of-school children.

Civil servant teachers returned to work in 2019 following earlier strike action. UNICEF, using Global Partnership for Education (GPE) funds, worked with the World Bank to support the Ministry of national education and civic promotion to provide grants to around 50 per cent of community teachers and to cover the salaries of new contract teachers in order to get community teachers, who represent two thirds of teachers in the country, back to work. Salaries and grants are paid by mobile money transfer.

In addition, UNICEF took over the payment of government subsidies for 1,269 community and contract teachers (11 per cent women) in the provinces of Logone Oriental, Lac, Kanem, Sila, Hadjer Lamis, Moyen Chari and Mandoul. These teachers supervised enrolment of around 72,000 primary school pupils (30,900 girls), including 15,285 out-of-school children (6,405 girls), reaching 153 per cent of the 2019 target. This resulted in reduced costs for more than 720 parents' associations in rural areas, including in communities made highly vulnerable by insecurity and displacement (Lac Province); the return to work of community teachers; an increase in school enrolment capacity, and reduced classroom overcrowding. Some schools are now able to offer a full primary cycle. In Lac province, for example, where 60 per cent of community teachers have been receiving their subsidies since 2015 (paid electronically since 2016), student enrolment has increased by 135 per cent (172 per cent for girls) against 9 per cent (10 per cent for girls) at the national level.

UNICEF worked with partners and the ministry to re-integrate community teachers without pedagogical training (MC0) into its sectoral strategy. UNICEF's engagement contributed to the government's decision to allow MC0s to teach, thereby improving enrolment in the most remote areas. UNICEF also contributed to the development of a training strategy for MC0.

2019 saw the launch of initial work to develop a national early childhood education strategy, which will be finalized in 2020.

UNICEF also supports Key Result for Children 4 (KRC4) - quality of education. UNICEF initiated the production of 1.8 million textbooks and teaching guides for the elementary and middle cycles of primary education, with funding from GPE.

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Every child has a name and a birth certificate

UNICEF supported government efforts to reinforce civil registration services with a focus on birth registration (KRC7). A two-pronged approach to capacity building in seven provinces included: on-the-job training to 225 professionals from the health, judiciary, local administration, education and civil registration sectors; and provision of birth registers and birth declaration journals. In the UNICEF-supported child-friendly communities of Krim Krim and Benoye urban (Logone Oriental Province), interoperability of health and civil registration services supported the registration of 31.1 per cent of children aged 0-11 years, compared to 26.1 per cent in non-intervention localities.

UNICEF continued to support the implementation of the juvenile justice strategy and strengthen child-friendly treatment of children in contact with the law. UNICEF contributed to building the capacity of 120 justice system professionals from 19 provinces on child sensitive judicial procedures, alternatives to deprivation of liberty for child offenders, and other mechanisms to limit the contact of child offenders with the penal system.

A total of 244 children in contact with the justice system benefited from UNICEF interventions. This includes 22 children in conflict with the law and 25 children associated with armed groups, who were all being held in a high-security detention facility; 144 children held in provincial detention facilities; 30 child victims of female genital mutilation; and 23 victims of sexual violence.

UNICEF continued to work with communities and families to protect children from violence, with a focus on the abandonment of child marriage and female genital mutilation. Working with traditional Chiefs and religious leaders in Ouaddaï, Mandoul, Tandjile and Guera Provinces contributed to 34 communities publicly declaring their commitment to abandon child marriage and female genital mutilation. Community-based monitoring mechanisms will be pursued to ensure sustainability and adherence to commitments.

UNICEF supported the development of a Child Protection Sub-Cluster Strategy 2019-2021. The capacity of community-based child protection structures to identify and refer vulnerable children to protection services was reinforced. As a result, 8,085 children (3,707 girls) were reached with psychosocial support; 396 separated / unaccompanied children (75 girls) benefited from family tracing and reunification; 45 children associated with armed groups benefitted from a package of services including psychosocial support, family tracing, and reunification.

UNICEF supported the training of 988 Chadian soldiers deployed to the Lake Basin Multinational Joint Task Force and United Nations Multidimensional Integrated Stabilization Mission in Mali, on children's rights and protection.

Every child lives, plays and learns in a clean and hygienic environment

Key Result for Children 8 (KRC8) - end open defecation targets 1.5 million people to end open defecation and 400 schools to be equipped with separate girls and boys' toilets by 2021. In 2019, a sanitation coordination mechanism was established at national and sub-national levels following adoption of the open defecation free (ODF) roadmap in 2018. UNICEF leads the sanitation subgroup of the donor working group on Water, Environment, Sanitation and Infrastructures.

UNICEF Chad employs three main approaches to sanitation: area-wide Community-Led Total Sanitation (CLTS); integrated WASH, Gender and Communication for Development; and School-Led Total Sanitation. The market-based sanitation approach is an additional sustainability strategy.

Since the 2016 launch of CLTS, 519,152 people live in localities which achieved ODF status, and 126 schools have separate girls and boys' latrines, or 35 and 32 per cent of the 2021 targets.

Area-wide CLTS was implemented in 574 villages in 2019 and institutional triggering in CLTS became systematic, as did School Led Total Sanitation (SLTS); an additional 151 villages were certified open defecation free, equivalent to 104,790 additional people (54,491 women), or 47 per cent of the annual target of 225,000. More villages have been declared ODF but are not yet certified due to administrative constraints. Also in 2019, 33,241 children, including 16,141 girls and 11 children with disability, gained access to separate girls and boys sanitation facilities in 61 schools.

In 2019, UNICEF Chad piloted integrated WASH, Gender and Communication for Development approaches to include women and youth in strengthening social and behaviour change for ODF communities. This resulted in the creation of 10 active women's groups, comprising 228 members, and youth groups boosting sanitation results.

The WASH strategy for schools, with its component on menstrual hygiene management, supports the ministry of education's commitment to more inclusive education. UNICEF supported the development of WASH in schools' educational materials and empowered children to create new social norms for latrine use, handwashing with soap, and menstruation hygiene.

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Water supply coverage decreased from 43 per cent in 2017 to 39 per cent in 2019, albeit with a reduced gap between urban and rural coverage (46 to 41 percentage points). WASH system sustainability remains a major problem; only 58 per cent of water supply facilities constructed in Chad over the last five years with UNICEF support are still working. A UNICEF-supported assessment of operational and maintenance bottlenecks in rural drinking water supply led to an agreement to introduce sector regulation on public-private partnerships to operate and maintain the system. In 2019, 39,726 additional people gained access to safe drinking water, including 20,658 women as a direct result of UNICEF's support.

UNICEF supplied water to 140,361 people (72,284 women) in response to a cholera outbreak. As part of joint programming to combat undernutrition, UNICEF Chad provided 73,884 children under-five with severe acute malnutrition with hygiene kits, reaching over 100 per cent of the planned target, and supported access to safe drinking water, sanitation and basic hygiene in 10 health centres providing treatment for children with severe acute malnutrition.

2019 recorded the biggest gap in terms of humanitarian funding for the WASH sector, with 84 per cent of activities not funded. As of December 2019, only 4,627 people had gained access to hygiene and sanitation facilities, representing 12 per cent of the UNICEF planned target.

Better data to address the rights of every child

MICS6 data collection was delayed in parts of the country due to floods. UNICEF made progress in consolidating disaggregated data on the situation of children in Chad and supported the transition of the national SDG database (TchadInfo) to a new platform Data for All. Data from a fiscal space analysis of the social sectors are being used in advocacy with donors and government. The Public Finance Bill 2020 allocates 34 per cent to the priority social sectors, an increase of 6.4 per cent from 2019. Health and education allocations increased by 35.6 and 2.5 per cent respectively.

Children and Young people in action

Visibility of UNICEF action and results increased in 2019. About 16 partner organizations, 130 journalists, and key ambassadors (Roukika, the network "Star Amis des Enfants") worked together to advocate, sensitize, and mobilize key actors and the public on child rights. UNICEF boosted its actions for and with young people. A new partnership was signed with the Union of Private Radio stations of Chad to coordinate the implementation of the Youth Reporter Radio programme, which coached 110 young reporters. Over 32,000 people were reached through U-report activities, a decrease from 2018, primarily due to late signing of contracts with telecoms providers.

Flagship events supported by UNICEF included the Day of the African Child, which was hosted by Chad, and the CRC30 celebrations. Fifty refugee children participated in a creative training workshop on Children's rights, including messaging through music, theatre and dance and participated in the African Day of the Child ceremony hosted by Chad's Head of State and the African Union. More than 500,000 people witnessed the CRC30 celebrations through the media and children all over the country learned about Child Rights and used that knowledge creatively through graffiti, dancing, slamming and rapping, thereby reaching another 300,000 children and youth. UNICEF Chad has the fourth highest number of followers on Facebook and the sixth highest number on Twitter in the country, but is ranked first if news organizations are excluded.

A UNICEF team fit to deliver results for children

Strengthening partnerships for emergency preparedness and response, enhancing the role of Zone Offices in fostering local partnerships and in programme delivery, duty of care, Prevention of Sexual Exploitation and Abuse, risk management, security and multi-year resource mobilization were key management priorities in 2019.

UNICEF worked with civil society to strengthen government capacities for enhanced coordination, disaster preparedness and response at national and provincial levels. Four Contingency Partnership Agreements were signed with implementing partners, contingency stock for 73,000 people was pre-positioned and long-term agreements were prepared.

Decentralization of technical capacity from the central office to the four Zone Offices will accelerate achievement of the KRC in 2020-2021.

In 2019, 23 Programme Cooperation Agreements with NGOs were re-signed using the new Prevention of Sexual Exploitation and Abuse (PSEA) template of the amended PCA Legal Agreement. PSEA tools for awareness-raising in refugee camps, communities and with NGOs and agencies were validated. The PSEA complaints mechanism was validated by the Humanitarian Coordination Team in August and has a two-year mandate. A protocol to link the PSEA groups and complaint mechanisms to providers of care services, in order to guarantee support for victims of sexual exploitation and abuse is under development.

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UNICEF in Chad has a duty of care action plan among others it aims to provide a staff friendly workplace, that is accessible to people living with a disability, has an adequate breastfeeding space, cafeteria, gym and relaxation spaces and that ensures efficient energy use, including greater reliance on solar energy. A relocation plan has been developed for the four Zone Offices and the N'Djamena main office. The construction of Abéché Zone Office on land donated by the government to the United Nations and already occupied by WFP was finalized and staff moved in December 2019.

The results described in this report were made possible through the financial, logistical, technical and programmatic resources provided by partners. UNICEF did not fully meet its resource mobilisation targets in 2019, but a focus on securing multi-year and multi-sector funding has good prospects for financing the Country Programme in 2020-2021. UNICEF received USD 22.7 million core resources (RR) and USD 35.9 million grants (Country Programme target: USD 43.6 million, 82 per cent) through 53 contributions from 24 partners. Despite continued advocacy, only 51 per cent of humanitarian (HAC) funding needs were met (USD 23.2 million; target: USD 45.8 million), through 15 contributions from 6 partners. UNICEF is grateful to donors for their humanitarian and development assistance to the children and vulnerable people of Chad.

Lessons Learned and Innovations

The lessons learned in 2019 and presented here are framed in the context of the Key Results for Children (KRC) but have broader programmatic applicability. They include the benefits of strong government ownership and leadership from the top, using positive and negative experiences to guide the scaling-up of strategies and approaches and leveraging technology in the pursuit of equitable results. In 2020, MICS6 data collected in 2019 will be available to measure impact.

The Ministry of Economy and Development Planning launched the national Roadmap KRC in Chad in early 2019.

KRC1. The key constraints hindering immunization performance in Chad, especially routine immunization, are: vaccine stock outs at peripheral level (directly linked to insufficient government funding for routine vaccines); the very limited reach of the cold chain (only 49 per cent of health facilities have an approved functional cold chain); and limited implementation of the accountability framework developed following the 2018 Forum on immunization, chaired by the President. All three of these constraints were tackled with some success during 2019.

UNICEF Chad leveraged its partnership with the Bill and Melinda Gates Foundation and GAVI Alliance to support advocacy efforts with the government to secure vaccine stocks. Regular meetings with the Head of State proved crucial in securing commitments to financing immunization. Political commitment at the highest level, as well as the personal engagement of the Minister of health in ensuring follow up of results with provincial delegations and district heads were instrumental in driving measles campaign results during 2019. However, accountability for routine immunization results as per the 2018 roadmap and Immunization Forum report remains an issue. Strengthened supervision and communication for development implemented during the 2019 vaccination campaigns contributed to achieving better and faster results compared to previous years. This was particularly the case with the measles campaigns, which saw a drastic decrease in the number of cases in the target districts compared to the rest of the country. The newly consolidated C4D unit will further strengthen this approach in 2020. In addition, new partnerships with KfW around the integrated community-based approach to healthcare in the Sahel belt, where community health workers deliver promotional and preventive services, including closer monitoring of vaccination at community level, are expected to yield tangible results for KRC1 in 2020. On-going implementation of the GAVI-supported Cold Chain Optimization Platform Initiative, in addition to other efforts by UNICEF, should secure further progress in cold chain coverage in 2020.

A more targeted and participatory approach to sustainable access to education (KRC3) yielded results, despite the enormous challenges presented by the crisis-driven cumulative numbers of out-of-school children at primary level and the low per capita financing in the sector. The importance of a balanced mix of private sector construction and involvement of communities and decentralized levels of the ministry of education in choosing construction sites, monitoring construction and contributing to maintenance was identified during a programmatic evaluation in 2019. With strengthened coordination among partners in the targeted provinces, the out-of-school rate could start declining by the end of 2021. The risk that World Bank funding for the salaries of more than 3,000 contract teachers and around 13,000 community teachers (representing 36 per cent of the total primary cycle teacher workforce) could cease before the 2020-21 school year will necessitate intensive advocacy to ensure that the government fills this gap.

New guidelines on WASH in schools developed jointly by both ministries will ensure that special attention is paid to upgrading sanitation facilities in the 60 per cent of schools constructed by the community using local materials (millet stalks) to ensure that strengthened girls' enrolment continues to expand, specifically in rural schools.

The on-going policy and institutional reforms regarding birth registration (KRC7) have taken a considerable amount of time, with a negative impact on the numbers of births registered during the transition period UNICEF is engaging with the

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national agency for civil registration and vital statistics (ANATS), with a view to supporting the expansion of the agency's remit outside of N'Djamena. Before ANATS and the digitalization of birth declaration are fully functional, Chad will pass through an interim period, possibly spanning several years, where the 'old' system needs to be supported to avoid an interruption in service and an increasing backlog in birth registration. The situation is complex as the 'old system' will no longer operate within a recognized governmental framework. However, numerous children can be reached if we focus on strengthening interoperability in the UNICEF prioritized provinces, relying on guidelines and agreements with the ministries involved, while ensuring availability of birth registration registers in the remaining provinces in support of the 'old' system.

The importance of linking humanitarian response and long-term development was highlighted in 2019, most conspicuously in the water and sanitation and education sectors (KRC8 and KRC3), which targeted populations beyond those directly affected in order to increase access to essential services for host communities, and catalyse social cohesion and peacebuilding. New financing facilities and larger-scale programmes were launched in 2019, especially in the Lake Chad region, including the UNDP-funded Stabilization Facility for Lake Chad, the European Union DIZA programme focusing on inclusive development in the host communities and the World Bank supported PARCA programme with its focus on refugees and host communities. All of these programmes have potential to change the trajectory of the country within the next few years, as they aim to secure stability, bridge service provision gaps within an inclusive and sustainable development approach and build social cohesion and peace. Maintaining strategic partnerships with these donors and partners in 2020, and ensuring coordination of targeting and complementarity of interventions for greater impact will be critical.

The remaining two years of the Country Programme will see a reinforcement of the KRC focus, expansion of the integrated community-based approach, enhanced intersectoral synergy, and geographic convergence, with a strengthened role for Zone Offices in programme planning and delivery for results.