1. EXECUTIVE SUMMARY

The socio-economic gains achieved over the last decade continue being adversely affected by the financial and economic crises, natural disasters, governance issues and rising social demands. A large part of the population lives below the poverty line (65% rural, 35% urban); disparities are significant; child poverty is higher than for the rest of the population, with an estimated 1.5 million children considered highly vulnerable. It is estimated that the country’s economic growth will not exceed 4% which remains insufficient to reduce disparities, mitigate poverty and achieve the Millennium Development Goals (MDGs) and targets.

During 2010 considerable progress was made in gathering evidence on chronic poverty, state budgetary expenditures and existing social norms hampering progress in child health and child protection. The significant information acquired enabled a qualitative leap in evidence-based advocacy efforts with partners and Government, leading to the strengthening of partnerships and giving UNICEF and stakeholders the opportunity to influence the substance of policies such as the newly devised “Economic and Social Strategy for 2011-2015”. Relevant data were also more systematically analysed to enable better understanding of equity issues in relation to budgetary challenges and socio-economic disparities.

Evidence-based advocacy, social mobilization efforts and the results of demonstrative models of referrals at local level, enabled informed dialogue and helped place the development of a protection system for the most vulnerable children on the political agenda of Government and partners.

More substantial progress was expected on social protection. However, in spite of efforts and strong commitment of the international community, consensus has yet to be achieved on the approach and modalities to be put in place. and limited political engagement.

Significant progress was foreseen on child survival with the expansion of the integrated minimum package at community level. The polio and measles outbreaks and the limited capacity within the health system coupled with overall coordination challenges have limited the expansion of activities on the ground.

Progress was made in strengthening strategic partnerships especially with the World Bank, the EU, the German, Spanish, Canadian and Italian Development Cooperation and USAID around a wide range of critical issues. Donor coordination consequently has also improved enabling more opportunities for leveraging results for children. UN coordination and coherence remain a challenge.

2. COUNTRY SITUATION AS AFFECTING CHILDREN AND WOMEN

In 2010, Senegal maintained a stable macro economy and increased growth rate (4% compared to 2% in 2009), as well as a low inflation rate. The gains on the economic front were not equally shared due to the combined effect of high population growth and income disparity with attendant effects on children’s situation and child rights. The progress in respect of children was varied as seen below.

1. According to the 2010 UNDP report, the multidimensional poverty incidence is estimated at 66.9 %, while 34% of the population lives in extreme poverty.

Another recent study shows that poverty declined in Dakar, remained stable in other urban areas but increased in rural areas from 61.9% in 2005 to 63.2% in 2009. An overwhelming majority of poor children (66.85%) live in rural households while 19 %
live in Dakar suburbs and 13% in urban areas. More than 75% of rural households are chronically poor. Underweight prevalence has deteriorated reaching 30% of children in some regions such as Matam and Tambacunda.

2. Education remains a national priority with the elimination of some barriers including enrolment fees. In primary education, this helped maintain high gross enrolment rates for boys and girls (92.5% and 95.9%) benefiting children living in poor areas. Progress is less for net enrolment and completion, pointing to the urgency to make the overall system more ineffective. A review showed that budgetary allocations are inequitably distributed to the disadvantage of the poorest rural areas.

3. Political commitment to promoting women's rights continued to be strong with the adoption of a law that requires parity within the country’s elected offices. Gender parity has been achieved for the gross enrolment rate at primary level education, but not at the secondary level.

4. The year was marked by measles and polio outbreaks, highlighting the need to strengthen the health system through capacity building in fiscal management and governance. The public health expenditure, estimated at 3.21% of GDP, is not sufficient to achieve MDG targets. The 2010 Situation Analysis showed that access to primary health care remains limited in poor regions, where services are less and not fully functioning. Disparities persist with Under-five mortality rate (USMR) three times higher in the poorest quintile (142‰) than the richest (52‰); infant mortality 5 times higher in the poorest quintile (71‰) than the richest (13‰); and USMR 2.2 times higher in rural areas than in urban settings.

5. Progress in Maternal Mortality is modest, with an MMR officially estimated at 401 deaths per 100,000 live births. This remains the country’s major health challenge. Rural women (52%), those residing in Kolda and Tambacounda regions (65%), those belonging to poor households (70%), give birth at home frequently.

6. The prevalence of HIV/AIDS remains at less than 1%. The situation, however, is fragile, as in 2010, access to antiviral drugs declined. About 40% of PLWHA do not receive ARVs. For Malaria, progress seems stalled since the cases reported in 2010 are higher than in 2009 due to abundant rainfall and low increase in children sleeping under mosquito nets.

7. Access to drinking water is at 98% in urban areas and 73.8% in rural areas. The disparities are greater in sanitation, with an access rate estimated at 63.6% in urban areas and 29% in rural areas. Main challenges are sustainability of rural services and dependence on external aid.

8. Following the Human Rights Watch report on the situation of children attending Koranic schools and other aspects, children’s rights and vulnerabilities were publicly debated leading to greater attention to their exploitation, abuse and neglect. A media and awareness campaign was developed to generate awareness and support for progress on children’s rights.

3. CP ANALYSIS & RESULT

3.1 CP Analysis

3.1.1 CP Overview:

Overall the programme in support of the country’s efforts to achieve the MDG targets was successfully implemented. Evidence was gathered to better understand the challenges in relation to the excluded segments of the population and for fine tuning the
next year’s programme. Overall challenges hampering a more effective programme implementation are related to the increasing unstable political environment, high turn over of Government officials and very limited presence of services on the ground in support to the most vulnerable families.

UNICEF Senegal did well to position itself this year as a knowledge resource and evidence based advocate for the development of adequate social policies and social protection mechanisms.

The preparation process of the new Country Programme offered an opportunity to focus on social exclusion and strengthen a more integrated approach at the local level for achieving the goals for children.

3.1.2 Programme Strategy

3.1.2.1 Capacity Development:

UNICEF’s country office (CO), jointly with the World Bank, WHO and UNFPA, supported studies and reviews that strengthened the capacity of staff in UNICEF and its national partners. The two reviews on Public Expenditures in the areas of education and health demonstrated insufficient budgetary allocations and inefficiencies in management of resources. The CO also supported a study on chronic poverty and its intergenerational transmission in collaboration with the Laboratory of Social Transformations of Dakar and the Maastricht University. Through a multidisciplinary and participatory approach, the above studies helped in the strengthening of technical and analytical capacities of national partners from Government and civil society sectors. The improved capacity on these issues and other capacity and knowledge building measures will lead eventually to the development of appropriate poverty reduction policies.

In collaboration with the WFP and with the technical assistance of the University of Maastricht, representatives of the Ministry of Economy and Finance, Ministry of Family and Child Protection were trained on social protection issues, opportunities and challenges. This resulted in the establishment of a core group of experts that will support the implementation of the National Strategy on Social Protection.

Representatives of the Ministry of Economy and Finance, and Ministry of Health were trained on MBB aimed at improving budgetary planning and monitoring for the health sector. As a result a technical committee is established to revise the budgetary allocation system and propose more adequate and equitable criteria for regions and districts based on a set of clear indicators.

The Co supported efforts to strengthen the capacity of the Ministry of Education staff on preparedness and rapid response to humanitarian emergencies. This improved the quality of national responses to the consequences of floods which affected more than 300,000 people in 2010. As a result the risk of contamination of water sources was contained and school children have not suffered interruptions to their schooling.

Technical assistance was provided to the Ministry of Family and Child Protection to strengthen their technical capacity in order to enable the Ministry to embark in the development and implementation of a Medium Term Expenditure Framework.

3.1.2.2 Effective Advocacy:

The production of studies in collaboration with partners provided the evidence for effective advocacy on behalf of children, especially the most vulnerable and disadvantaged. The findings of the OPM study on children’s interests within the Poverty Reduction Strategy, the analysis of inter-generational transmission of chronic poverty
conducted by the Maastricht University and the University of Dakar, as well as the public expenditure reviews of the health and education sectors, all provided key policy makers from the Ministry of Family, Ministry of Economy and the donor community valuable insights into the bottlenecks that have prevented existing government mechanisms from being more efficient while targeting social disparities. A number of events were organized to discuss the findings with partners from all sectors and reach consensus on the main messages to put forward.

The results gained were instrumental in substantiating advocacy efforts with Government officials and influencing the refining of strategies to reduce poverty within the recently developed “National Social and Economic Policy 2011-2015”. The evidence based advocacy also led the Ministry of Family to begin the medium-term expenditure framework preparation process to better optimize the resources available in favour of disadvantaged children.

Following the Human Rights Watch report on children attending Koranic schools and studies on the practices of charity, as well as studies on street children conducted jointly with the ILO and the World Bank, the office used the findings to develop a social mobilization and awareness campaign which helped repositioning the sensitive issue out of the religious field. The wide advocacy effort involved civil society organizations, development agencies and Government officials in order to create a broad social movement aimed at promoting understanding and adequate responses to address child separation, trafficking and abuse.

The study on `Violence against girls in school settings’ conducted in Casamance with the University of Ziguinchor enabled advocacy with local authorities and civil society. The study is expected to result in the development of specific plans for each district to fight violence against girls. The issue of gender violence will be tackled at a national scale next year.

3.1.2.3 Strategic Partnerships:

During 2010 strategic partnerships were strengthened to accelerate progress and leverage results for children. In particular, partnerships have been strengthened with key players in the area of child survival such as the World Bank, WHO, USAID and UNFPA. Under the leadership of the Ministry of Health the coordination group aims at harmonizing and improving complementarities of all health interventions in the country. This approach (HHA) will support the Ministry also in improving health expenditures planning and monitoring to the benefit of the poorest areas.

A significant progress in partnering with NGOs and civil society was made during 2010. Following the approval of the national strategy for the scaling up of high impact child survival interventions at community level, a wide alliance with health related NGOs was built and supported to implement actions aimed at improving access and quality of services, strengthening capacities and promoting an integrated approach to child survival at community level. The alliance gathered around Child Fund has led to a consensus for a more equitable approach to child and mother health.

A solid partnership with Save the Children and Plan International enabled UNICEF to increasingly focus its support on establishing the foundations of a child protection system. The three agencies jointly supported a mapping of protection systems throughout the country whose results helped to achieve a common understanding on the child protection reform priorities. Alliance with NGOs at national and local level enabled the establishment of a broad coalition to reject negative practices.
UNICEF supported a network of youth organizations to promote youth and children participation in policy development processes. A number of participatory meetings were organized that helped children, adolescents and youth to express their ideas and promote their inclusion in the new Economic and Social Policy Strategy for 2011-2015. This exercise highlighted the marginalization of vulnerable children (street children, children of Koranic schools, disabled) in the country's social policies and processes.

UNICEF is chairing the inter-agency social protection group which adopted a common position to support the Government to implement the Social Protection Floor Initiative.

3.1.2.4 Knowledge Management:
In 2010 a new Situation Analysis on children and several relevant studies and assessments on poverty and the place of children in social policies in Senegal were carried out. The evidence gained was used to strengthen the capacity of the UNICEF staff and its national counterparts not only in relation to vulnerability and poverty analysis, but also on results-based programming and human rights. This knowledge also informed the development of the Economic and Social Development Strategy Document for 2011-2015.

The preparation of the Situation Analysis applied a participatory process with partners from Government and civil society sectors and this led to a diagnosis focused on vulnerability and children's participation. The process itself resulted in the strengthening of capacity of more than 20 partners from line Ministries on human rights based approach, casual analysis and capacity gaps analysis.

Studies on chronic poverty, intergenerational transmission of poverty and changes in social norms vis-à-vis health, education and protection of children and girls were conducted by teams involving national experts and international institutions (Oxford Policy Management, Maastricht School of Governance). The findings were widely shared through high-level workshops and have been the subject of intense evidence-based advocacy with decision makers in Senegal. As a result, all documents have been included as relevant references to inform the development of the new social policy document by national partners.

The office supported the implementation of the DHS-MICS 2010 on a cost sharing basis with development agencies. The results expected in early 2011 will provide an updated baseline data for the Country Programme 2012-2016. More detailed analysis on districts identified as very poor will serve as baseline for targeted assistance to the most vulnerable population and regions.

Overall the office has improved its capacity not only to produce but more systematically manage and use the knowledge gained to influence the development of policies and poverty reduction strategies and improve evidence based programming with partners.

3.1.2.5 C4D Communication for Development:
A qualitative analysis on resurgence of polio and measles cases highlighted the causes for resurgence including the limited provision of services as well as parental attitude to immunization and lack of awareness of its benefits. Jointly conducted with the Ministry of Health, the analysis allowed a better understanding of the constraints related to knowledge and people’s perceptions, and identified appropriate communication activities to reach this target group. The C4D plans for this specific issue are being developed.
A study carried out to assess the feasibility of changing social norms, harmful practices and behaviors in relation to female genital circumcision, health, education and child protection indicated that the approach adopted is working well for the abandonment of excision but less for other issues mainly on account of weak capacity of outreach workers. Accordingly, the training course content and the profile of staff engaged in these activities were revised.

An opinion poll was taken to assess public perception and knowledge of issues related to child abuse and to identify the most appropriate channels of communication to convey messages. The findings were used to identify the indicators and set a reliable baseline against which to measure the impact of the communication campaign on child abuse prevention.

UNICEF facilitated the training of officers of the Ministry of Health, Family and Education on communication for behavioral impact (COMBI) and communication for development (C4D). The training of this core group will lead to an improved integration of C4D components within each sector and programme. The systematic implementation of C4D activities, however, remains difficult due to lack of skilled human resources both within line Ministries and in UNICEF. Further training will be necessary to equip UNICEF staff and counterparts with the skills required to undertake effective C4D.

### 3.1.3 Normative Principles

#### 3.1.3.1 Human Rights Based Approach to Cooperation:

Introduced in 2009, the training of all UNICEF staff in the Human Rights based approach (HRBA) has been gradually used in the programming process and at the work place. In 2010 the Situation Analysis (SitAn) of Children and Women was prepared using the HRBA. This provided an opportunity also to strengthen the capacity of UNICEF staff and national partners. However, further training and capacity building are required for this approach to be systematized and sustained. Greater effort is needed also to internalise HRBA within the UN system.

#### 3.1.3.2 Gender Equality and Mainstreaming:

In 2009 the CO had conducted a rapid assessment of the overall country programme and taken steps to upgrade staff skills and knowledge. In 2010 the new competencies on gender equality and mainstreaming have been gradually applied to UNICEF work, starting with the SitAn, and through the preparation of the work plans and the new cooperation programme with partners. A general guidance on the introduction of the index in ProMS was made. The CO is aware that gender mainstreaming remains weak and needs further, more systematised, effort.

#### 3.1.3.3 Environmental Sustainability:

### 3.2 Programme Components:

**Title:** Survival and development of the young child

**Purpose:**

The key purpose of this component of the country programme (CP) is to contribute to: (i) reduce by one third the mortality rate of children under 5 years, and help achieve reduced maternal mortality, (ii) reduce by 20% the rate of malnourishment of children under 5 years, (iii) significantly improve hygiene practices, and families’ access to adequate sanitation and drinking water by 50%.

*Results for 2010-2011:*

1. Target populations of 47 districts have access to health care and are covered by the minimum package of interventions
2. More than 60% of pregnant women receive quality prenatal and postnatal monitoring
3. By end 2011, children under 5 years of age in 80% of health districts in Senegal have access and use services that provide effective prevention and management of quality care for treating severe acute malnutrition cases
4. 80% of rural households use drinking water from boreholes and modern controlled wells
5. 40% of families in 300 villages in the targeted regions have adequate hygiene practices through the community led total sanitation (CLTS) approach.
6. Teams from the Ministry of Health and nine health regions have an updated preparedness plan to respond appropriately to emergencies and natural epidemics.

**Resources Used:**

Total approved for 2010 as per CPD: 2,650,500 USD  
Total available for 2010: RR: 2,050,000 USD; OR: 4,260,000 USD;  
Total: 6,280,000 USD

Donors: UNICEF HQ, GAVI, UNDP/USA, USAID, Luxembourg, Bill Melinda Gates, CIDA, UK National Committee, German Nat Committee, United Nations Foundation, CDC Center, UN OCHA, US OFDA and Italian National Committee for UNICEF

**Result Achieved:**

The public expenditure review highlighted challenges faced by the country in terms of equitable access to health care – poor regions (poverty exceeding 60%) representing 23% of total population account for less than 10% of total expenditures. Joint advocacy resulted in the Government’s decision to accelerate the implementation of the MBB and the COMPACT and to revise the criteria for budget allocations.

At community level, through a coalition of NGOs led by Child Fund, the minimum package for high impact child survival interventions is implemented in 57 districts through 13 regions. It is estimated that 4.0 million people are covered by this package of services with emphasis on neonatal care.

The Expanded Programme of Immunization (EPI) developed a recovery plan based on the RED strategy supported jointly with WHO in 40 districts, and held 6 additional immunization campaigns each reaching around 2,450,000 children. The routine immunization reached 86% for Penta3, 79% for measles, and 78% for TT2 + in pregnant women. An overall EPI review, about to be finalized, will provide the recommendations for the strengthening of competencies.

The scaling-up of mother-child transmission prevention and care of pediatric HIV improved service availability. Currently 100% of health centres and 47% of health posts provide services for HIV screening (51% of pregnant women have been screened) and ARV prophylaxis. The proportion of health centres providing pediatric care reached 80%. However, the number of children living with HIV put on ARV treatment remains low (29%).

Through the support provided by UNICEF, WFP, WHO, FAO and the World Bank, the percentage of districts providing quality services for prevention and management of severe acute malnutrition increased by 25% in 2009 to 47% in 2010. These services, used quarterly by 600,000 children, have provided quality care to 51,000 moderately malnourished children and to 5,000 children suffering from severe acute
Malnutrition. The Early Warning System supported jointly with FAO and WFP is operational in 14 regions.

UNICEF supported the provision of vitamin A and mebendazole to more than 90% of children U5 and helped launch the industrial production of oil fortified with vitamin A and flour fortified with Iron/folic acid. Support to salt iodization helped to reduce iodine deficiencies as evidenced by the decrease in goiter to 0.4% among children 6 to 12 years. The Rapid SMS nutritional surveillance pilot demonstrated its feasibility allowing its extension to disadvantaged areas.

A total of 14 regional health teams were supported to control and treat the water of about 60% of drilling wells and modern wells (1983 out of 3288 wells) thereby reducing the risk of waterborne diseases. This activity mobilized around 750,000 people on water treatment.

Access to sanitation in rural areas continues to be problematic. UNICEF support benefited 77 villages located in disadvantaged areas. This support resulted in the construction, with community participation, of 1,150 latrines benefiting 35,000 people.

The updated contingency plan enabled the Ministry of Public Health to contain the impact of floods that affected around 400,000 people and to reduce the risk of cholera, diarrhoeal diseases and malaria outbreaks.

**Constraints:**
Global crises impacted the performance of the health system wherein lower investments and lower performance resulted in the resurgence of polio and measles. This forced health services to organize additional immunization campaigns, which in turn hampered the implementation of important activities such as accelerated plans to scale up high-impact interventions. In addition, there were health staff strikes undermining retention of data and causing disruption of supervision.

**Monitoring and Evaluation:**
The review of public health expenditures yielded evidence of insufficient provision for efficiency and equity. This report has been used for advocacy and development of the Economic and Social plan.

**Future Workplan:**
In 2011 the programme areas and intermediate outcomes will remain unchanged with particular emphasis on the following: (a) Planning/budgeting/equity through evidence gathering to influence the strategy on access to essential care; (b) Scaling up national high impact interventions to accelerate the reduction of child and maternal mortality and communication for development.

**Title:** Basic education and equity of the sexes

**Purpose:**
The goal of the education programme component is to help eliminate disparities between boys and girls in primary school and reduce the completion rate disparities in primary schools, which is 85%.

Results for 2010-2011:
1. The number of schools with a preschool class has increased from 130 to 400.
2. In areas of intervention, the number of child-friendly schools (CFS) with a completion rate of at least 70% has increased from 960 to 1260.

3. The problems of adolescents in the fight against poverty and HIV/AIDS are taken into account in national policies.

**Resources Used:**
Total Approved for 2010 as per CPD: USD 3,068,000.00
Total available for 2010: RR: USD 935,000; OR: USD 3,646,00.00; Total: USD 4,581,000.00

**Donors:** German Committee for UNICEF; French Committee for UNICEF; Spanish Committee for UNICEF, CIDA/IHA International Humanitarian

**Result Achieved:**
Support and advocacy for the introduction of preschool classes to improve quality in primary education has resulted in the development of a national plan for scaling up. This decision was facilitated by the results obtained so far with the total number of preschool classes raised from 153 to 300 in 2010, benefiting 5,000 boys and girls.

In the poor rural areas of Tambacounda, Kolda and Matam, where poverty is an obstacle to schooling, departmental inspections with the support of UNICEF were able to extend the package of integrated services to 232 new schools benefiting 36,324 students including 18,147 girls (49.9%). Due to their isolation, 20 schools received solar kits for catch up courses in the evening. In these areas, all students were given vitamin A and iron by UNICEF and additional food provided by WFP. The number of schools with integrated services went from 1,019 in 2009 to 1,253 in 2010 (against a target of 2,708 schools). In addition, standardized assessments developed to improve completion rate were extended to all schools (2,708) to the benefit of 347,688 students. These actions helped to increase the completion rate in Ziguinchor (88.2% including 88.1% for girls), Kedougou (86.3% including 86.6% for girls) and to a lesser extent in Sédhiou (65.8% including 54.8% for girls).

Some 25 Ministry of Education and Interior staff members along with civil society actors were trained to constitute an Education Task Force in Emergencies. This team has successfully avoided disruption for 200 schools affected by floods.

A network of youth organizations and youth centres were supported to promote participation of children and young people in policy making processes. Through a participatory process young people were encouraged to express their ideas which were included in the new Economic and Social Policy 2011-2015 Document. This exercise offered solid evidence on the marginalization of vulnerable children such as street children, students of Koranic schools, disabled children in policy development processes.

**Constraints**
The rural areas are characterized by inadequate schooling due to the large number of schools (68% of total) unable to complete the full academic year-long cycle, and limited skills and availability of teachers. The above factors slow the pace of progress in the field of primary school completion, particularly for poor children who lack resources and cannot educate their children away from home. Informal religious schooling remains the only choice for many families with limited access to formal education especially in some areas of the country.

**Monitoring and Evaluation**
The study on violence against girls in schools in the region of Casamance highlighted the magnitude of violence as well as the bottlenecks that perpetuate the practice of female genital mutilation (FGM) causing girls’ dropout. The results were used by local stakeholders to develop action plans.

Mapping the exclusion of children with disabilities in 7 departments has identified that 42% of disabled children are excluded from schools. The findings will guide the 2011 planning.

The Public Expenditure Review of the education sector highlighted the late transfer of funds to local governments, lack of criteria for their distribution and the weak capacity of local communities.

The study on Governance and Transparency of Education by Transparency International revealed some malpractices on student admission which discourage schooling. These findings will guide a study on addressing the barriers to education for disadvantaged children.

**Partnerships**
UNICEF worked in close partnership with:
(i) FAWE, the Association of Elected Women in promotion of girls' schooling; (ii) CORIPH, One World, and Action Aid on vulnerable and socially excluded children; (iii) Action AID, World Vision, and CREPA GADEC around the scaling up of basic services package; (iv) WFP to implement the package of services in disadvantaged areas; and (v) World Bank on a coordinated approach to scale up pre-school classes.

**Future Workplan:**
The results set for the action plan 2010-2011 will remain unchanged. However, the programme will increase efforts to reduce disparities and improve the completion rate by conducting a performance evaluation of the education system and by facilitating the testing of the CFS on a larger scale. In partnership with USAID and Plan International a comprehensive plan to fight violence in schools will be supported. A cost analysis of school fees incurred by families will be conducted. The programme will contribute to the expansion of preschool classes in selected zones, and to the development of a strategy paper to take the approach to a national scale.

**Title:** Legal protection and fight against violence, trafficking and the worst forms of child labour **Purpose:**

**Purpose Of the Programme Component & the main results Planned for 2010**
The programme aims to achieve the following: (i) the protective environment for children in national policies, laws and institutions is enhanced, (ii) local responses to combat violence, trafficking and the worst forms of child labour are reinforced (iii) abandonment of early marriage and female genital mutilation is widespread.

**Results planned and achieved for 2010-2011:**
1. The institutional and technical capacity of partners (Ministry of Justice, Ministry of Family) was strengthened by the implementation of protective measures consistent with the instruments to protect children's rights

2. Identified vulnerable children have access to quality services for prevention, support and withdrawal/reinsertion in 15 out of 45 municipal departments in the country
3. The FGM practising communities of 5,000 including 879 new villages have decided to abandon female circumcision and early marriage

4. Communities and children in the Casamance region are undertaking initiatives to protect against the risks of mines and to strengthen emergency response.

**Resources Used:**
Total available for 2010: RR: 935,000 USD; OR: 2,581,000 USD, Total: 3,516,000 USD

**Donors:** UNFPA/UNICEF UNTFHS, French Committee, Italy, Belgium, German Committee, Spain and the European Commission.

**Result Achieved:**
A mapping carried out through a joint partnership including UNICEF, Government, Save the Children and Plan Senegal resulted in the first assessment of existing child protection systems. The report provided the opportunity to strengthen coordination among all partners from Government and civil society sectors and to identify entry points to build a comprehensive National Strategy on child protection.

With the support of UNICEF and under the leadership of the Committee for Child Protection under the Presidency, the Ministry of Family, Ministry of Justice, civil society organisations, the Senegalese Committee for Human Rights, the National Assembly and the Senate, a draft law was elaborated and proposed for the establishment of an Ombudsperson dedicated to children’s rights.

UNICEF and Plan International jointly supported the Ministry of Justice in starting a process of evaluation to identify the procedural gaps in relation to justice for children. A number of actors where trained on key principles on justice for children including presidents of children’s courts, juvenile judges and social workers from 24 departments.

Technical service providers working at central and local levels were trained to improve the availability and quality of protection services. A national team, assisted by the International Social Service (ISS), developed minimum quality standards for the care of vulnerable children at local level. A web-based data system using SMS technology was developed to facilitate the case management process which was tested in one department. This will lead to the development of national case management procedures including the development of standards for services.

The Department of Family was assisted to expand the number of technical monitoring committees to 22 departments (out of 45) and to strengthen the response capacity of local NGOs. As a result, the improved services provided quality care to approximately 5,000 extremely vulnerable children of whom 224 were reintegrated into their families or placed in foster institutions; 1429 children were provided with birth registration while 3198 received school counselling.

In the department of Kolda, a cash transfer pilot initiative was launched targeting 35 severely disadvantaged villages to strengthen families’ capacity to improve access to education and prevent child labour.

The number of villages that have joined the abandonment of FGC increased from 4125 to 4625, out of a total 5000 communities. Activities supported led to an improved commitment of various stakeholders around the 2010-2015 action plan. A national Technical Committee and related regional branches were established to ensure monitoring and sustainability.

More than 3,000 displaced children in the departments of Ziguinchor and Bignona
received psychosocial assistance and education through the intervention of NGOs in the areas of stress management, conflict resolution, education for peace and mine risk prevention.

**Constraints:**
The fragmentation of responsibilities among different institutions, lack of coherence, and insufficient technical capacity in partners, especially at the local level are the major obstacles to the development of an adequate protection system.

**Monitoring and Evaluation:**
A study on child labour in Senegal titled `Understanding Children’s Work’, jointly supported by UNICEF/ILO/World Bank, highlighted the critical dimensions of the problem including: some 450,000 children are exposed to the worst forms of labour; the relationship between child labour and low school attendance; and the highest prevalence of the phenomenon among boys in rural areas and from very poor families. The study’s results will be used for advocacy to improve inter-sectoral coordination and prevention campaigns.

A poll survey on child beggars in the Dakar region identified key determinants such as the perception of the phenomenon by the general public, the underlying reasons for the practice of giving alms to children and the people’s views on the measures needed to reduce child begging. Its results were used to develop and implement a comprehensive communication plan for behaviour change.

**Partnership:**
Partners for implementation are the Ministry of Family, Women's Organisations and Child Welfare, the Ministry of Justice, the Ministry of Interior, the Ministry of Decentralization, and some CSOs.

**Future Workplan:**
The current work plan was developed to cover the period 2010-2011. Priority will be given to the development of a national strategy on child protection, the establishment of a functional MTEF, the establishment of independent institutions for children and strengthening of child protection service delivery and referral systems. Behavioural change communication plans will be expanded to address harmful practices.

**Title: Social Policy and Advocacy Programme**

*Industrial relations policies*

**Purpose:**
The purpose of the Social Policy & Advocacy Programme is to assist in: "strengthening national capacity for effective implementation of human rights principles and capacities of elected representatives and local stakeholders to better participate in the decentralization and local development management processes.”

**Results for 2010-2011:**
By end 2011,
1. Appropriate evidence is produced on vulnerable children and used by national partners and development agencies for the PRSP and cooperation programmes.
2. The vulnerable children enjoy new social protection mechanisms through cash transfer pilot projects
3. The social budget allocations for children are increased and better utilized.
4. Data on the situation of children for monitoring MDGs and PRSP goals are collected, processed and disseminated.

**Resources Used:**

Total Approved for 2010 as per CPD: USD 1,265,000
Total available for 2010: RR: USD 1,525,000; OR: Nil; Total: USD 1,525,000

**Result Achieved:**

The technical support provided to partners during the process of preparation of the 2011-2015 Economic and Social Policy played a lead role in highlighting the key determinants of poverty and equity vis-à-vis children. All studies and analyses of the impact of household poverty and vulnerability in the education of children, chronic poverty and the intergenerational transmission factors, perceptions about the impact of the crisis on household living conditions, and the importance of taking into account the needs of children in PRSPs and budgets were used by policy decision makers and donors to generate discussions and make recommendations to influence the development of social policies.

The advocacy efforts and technical assistance provided on social protection issues strengthened Government commitment and improved coordination of interventions. Training and technical assistance provided to counterparts helped to establish a national team on social protection. This core group played a key role during the development of the new Economic and Social Policy 2011-2015. The partnership established with the World Bank and the ILO took the form of an agreement for a joint review of social safety nets in Senegal and a joint exercise of estimating costs for a more equitable social protection system.

The programme supported national counterparts to conduct several assessments and studies on public expenditure 2003-2008 in health, education and on the vital stakes of children in the PRSP. The recommendations were used by development agencies and policy makers to conduct advocacy and develop the new national policy document. The most significant concerns highlighted through the above efforts related to the urgency of transforming social spending to make it more equitable and the need to scale up the social protection mechanisms.

The partnership with the Ministry of Decentralization, the National Programme for Local Development and the Association of Local Elected Representatives enabled the introduction in the national agenda of the concepts of Child Friendly City (CFC) and the participation of children in the local budgeting process. The support provided allowed the Ministry of Family to start the implementation of the Medium Term Expenditures Framework. This should result in an increase of resources allocated to this sector in the fiscal year 2012.

The joint assistance provided by United Nations agencies enabled the Government to develop a national MDG Report +10 and to develop advocacy tools for accelerating progress. A key support enabled the national statistics agency to leverage donors’ assistance and launch a new DHS-MICS that will serve as baseline for all national documents/reports. The mapping of child poverty and vulnerability helped to inform the Senegal Equity Tracker and to guide the selection of the most disadvantaged geographic
areas for the new Country Programme 2012-2016. The assistance provided to the National Coalition of NGOs for Children enabled this institution and its decentralized structures to effectively engage children in the process of formulating the SED to take into better consideration the recommendations of the Committee on the Rights of the Child.

**Constraints and Challenges:**

The chronic constraints faced by the programme include the fragmentation of responsibilities between various Ministries involved in tackling issues related to poverty reduction and social protection; lack of experienced institutions that can ably conduct evaluations and quality studies on poverty and vulnerability within a reasonable timeframe; and competing demand for their services among development agencies.

**Monitoring and Evaluation:**

Studies supported by UNICEF indicated that chronic poverty is dominant in Senegal and transmitted from vulnerable parents to children. While migrant remittances and other forms of family solidarity help to enhance resilience, they remain insufficient to overcome poverty. To be more equitable, social protection policies must be more inclusive and more focused on targeting children. The study on the stakes of the child in the PRSP highlighted the need to introduce flexibility in the implementation of the PRSP to better reflect the impact of shocks on vulnerability.

An opinion poll helped to understand the existing trends in income and purchasing power and identify household coping strategies, and the consequences related to the effects of the economic crises on children in terms of changing food practices, barriers to education, etc.

**Partnerships:**

The strategic partnership developed with USAID, Global Fund and World Bank allowed the pooling of resources for conducting the EDS-MICS and several surveys. Partnership with the WB, EU, and ILO on social protection was considerably strengthened.

**Future Workplan:**

The current work plan was developed to cover the period 2010-2011. In this context, the intermediate results have already been identified with partners and will continue to shape further actions. Local budgeting and strengthening of local governance will be a priority; the finalization of DHS-MICS will provide the opportunity for an overall equity-based update of the Situation analysis.

4. OPERATIONS & MANAGEMENT

4.1 Governance & Systems

4.1.1 Governance Structure:

The Senegal country office (SCO) objectives and priorities were developed at section level by each team, thereafter discussed and validated by the full team at the Annual Management Review, and subsequently were integrated into the Annual Management Plan. With regard to Emergency Response, training for the full office was held in May 2010, during which the EPRP was reviewed in light of an emergency simulation. This exercise highlighted to staff the importance of emergency preparedness and the role each plays therein.
The Annual Management Plan (AMP) details the function of each statutory committee as well as its membership. The various committees meet regularly and follow procedures as per the relevant circulars and guidelines. A new Table of Authorities in the DFAM recommended format was validated at the Annual Management Review in January 2010 and updated in June 2010.

A number of important processes were reviewed and guidelines and checklists created to ensure compliance, improve performance and facilitate various processes including travel claims/certification; SSAs; NGO protocols; supply/purchasing; and CRC. Work has been ongoing to close outstanding external audit recommendations; feedback from HQ and external auditors is awaited.

The SCO holds monthly CMTs, programme meetings, and operations meetings. These enable the various teams to address important management issues at the appropriate level, strengthen inter-section collaboration and coordination, and improve performance. Indicators are reviewed including those for which data is generated internally as well as the Business Information Reports compiled by HQ. Weekly coordination meetings (Heads of sections) are also held to address priorities and exchange views on main strategic issues.

The CO received a satisfactory audit rating for governance in the last external audit; an internal audit is scheduled for 2011.

4.1.2 Strategic Risk Management:

The SCO has reviewed risks that threaten its ability to continue operations and has a business continuity plan in place that is updated, as DSS/SMT updates the security risk assessment and the security phases, or as new information emerges that could impact the office’s continued functioning in the event of such changes. The office purchased as many items to reinforce business continuity as possible, and took actions including scanning all essential documents in HR files, replacing desktops with laptops and providing essential staff with mobile internet connection accessible throughout the country, distributed additional radios and held radio training.

In addition, the management team carried out an abbreviated exercise of the Risk Control Self-Assessment in December, with a full version of this work planned for first quarter of 2011.

The Emergency Preparedness and Response Plan was updated in 2010, and a two-day exercise in Emergency Response was held for the whole team to ensure that staff are aware of the most likely risks, and aware of the role they would play in response to probable emergency events.

4.1.3 Evaluation:

The SCO developed an IMEP for the period 2010-2011. This document was reviewed and cleared by the regional office before its implementation. It included all evaluations, assessments, surveys and studies planned to support programme implementation and guide the preparation of the 2012-2016 new country programme. The IMEP’s implementation was regularly monitored during CMT and programme meetings.

High quality of UNICEF knowledge creating products remains a priority with the SCO which pays particular attention to ensure that all evaluations conducted by the office are consistent with the quality standards set by the organisation. The Monitoring and Evaluation (M&E) Project Officer, in close coordination with the country programme clusters ensures that the M&E documents comply with UNICEF’s quality standards. The services of consulting firms with proven expertise in conducting assessments and control
of qualitative and quantitative data collection and data analysis are used to carry out the evaluations planned in the IMEP.

As a follow up to the UNICEF meta-evaluation, discussions took place within the office aiming at better understanding the meta evaluation report’s findings and recommendations and develop a response plan to improve the use of evaluation and monitoring findings. The main conclusions, recommendations and lessons learned from evaluations have been synthesized and effectively used for preparing the annual report, and to guide the implementation of the current programme and design strategies for the next country programme.

The M&E and programme staff were involved in a number of webinars conducted by HQ, attended training on the OECD/DAC criteria and standards for evaluation. These efforts helped the SCO staff to better implement the recommendations of the meta-evaluation.

All evaluations performed by the office in 2010 have been summarized and posted in the overall evaluation database. A management response plan is systematically developed and made available for each evaluation and assessment, and the senior staff members monitor the plan’s implementation.

4.1.4 Information Technology and Communication:

The SCO’s ICT plan is up to date, and the systems are highly functional. IT equipment status is reviewed regularly to ensure that machines meet current ITD standards, and that the equipment will be able to respond to the organisational system changes foreseen in the upcoming time period, including the transition to Windows 7 and to Vision/SAP. The procurement of IT equipment is based on the LTAs developed by Supply Division. Many desktops were replaced with laptops and docking stations to give staff more flexibility and to enable functionality during field missions, telecommuting, or for remote access to systems for business continuity purposes. USB WiFi is available to essential staff. A number of staff members have office cell phones in accordance with their role, and radios are available to all IP staff and to essential staff. Radios are also available in all vehicles.

This year CITRIX became available to staff, which allows the team to remotely access all systems from email to ProMS and the Briefing Book. VOIP was also installed this year, and facilitates easy communications access to other UNICEF offices at significant cost reductions. While use of this system will increase over time, some cost savings were already observed this year on telephone bills. Cell phone and landline bills are regularly circulated and personal charges recovered.

E-learning is actively promoted, not only for required trainings but also for those that staff members may wish to pursue, through ECornell and Skillsoft.

The office has a Green Committee and shared with the team a set of recommendations to conserve resources (ICT related as well as otherwise); measures were taken to improve efficiency including double-sided printing default, limiting colour printing, sharing of printers, using the digisender to share documents electronically rather than in hard copy.

Programmatically, ICT has become an active component of various sector activities. SMS is being used to connect classrooms in the education sector, to transmit and track health statistics, and is also being used as an advocacy tool.
4.2 Fin Res & Stewardship

4.2.1 Fund-raising & Donor Relations:

a- The country office (CO) pays utmost attention to keeping its fundraising strategy updated and donors abreast on the priority funding needs to support the country programme’s implementation. The fundraising strategy is updated twice per year to reflect the gaps, required adjustments and emerging priorities.

b- To maintain a close relationship with its donors the CO monitors through the programme and the CMT meetings the donor reports schedule and the country programme allocations. Each month a ProMS-based situation report is produced, shared and discussed.

In 2010 the 29 donors reports due were carefully reviewed according to a quality control process set up within the programme; all reports were sent on time. The majority of these reports also include human stories and photos to feed the donors’ fundraising databases and processes.

c- Fundraising efforts in 2010 resulted in impressive OR mobilization amounting to USD 9,65,2,616, well over the annual ceiling of USD 6,177,469. Part of these funds came through Regional multi-country and HQ proposals but the majority came through the CO’s own efforts.

d- Funding monitoring shows that all funds available were utilized optimally. As of 28 December against a total available allocation of USD 16,817,940 more than 96% were obligated. During 2010 less than USD 20,000 from Other Resources were not utilized on time and lost, and only 2 PBA extensions were requested.

d- In addition the CO undertakes regular advocacy efforts with in-country donors. The findings of assessments, surveys and studies conducted are widely shared within the country through meetings and mailing. Special attention was given to efforts for engaging countries such as Brazil, India and China that are playing an increasing role in Senegal. Specific field visits are organised for donors and representatives of the international community to keep them updated with progress made and challenges faced. In 2010 several meetings were held with the Italian, Japanese, Spanish and US cooperation agencies based in Dakar. The CO hosted several visits of UNICEF and donors teams coming from France, UK, and Italy. These efforts were supported by regular human interest stories posted in HQ and regional Web sites.

4.2.2 Management of Financial and Other Assets:

In 2010, the office moved to the two-year results-based work plans. Accordingly, resources were allocated to final and interim results.

The CMT regularly reviews the performance indicators of the Business Information Management Reports. Fundraising, implementation rates, donor reporting and fund utilization rates are discussed in detail. Quarterly reporting for the 3rd quarter showed that the office had submitted all donor reports on time, and that the amount of funds lost was within the acceptable range.

The RR received in 2010 amounted to USD 5,920,984, of which 85% was spent.

DCT is another area closely followed at section level as well as at CMT level. The office updated procedures for NGO protocols. Use of the FACT form and implementation of HACT has significantly reduced the processing burden on the office; however, the issue of insufficient partner capacity remains. The UNCT had not chosen to carry out Micro
assessments prior to this year; a bid process is underway to identify audit firms to do this work, which will take place in 2011 to gain better knowledge of our partner’s capacity.

The office’s follow up with partners for periodic verification of accounting documents takes place rarely or is not documented; this will be improved in 2011. The quarterly balance for DCT of >9mos has been below the 5% threshold throughout the year: 1st quarter 0.25 %; 2nd quarter: 0.17 %; 3rd quarter: 1.74%. Nevertheless efforts are ongoing to ensure further reduction in DCT balances. One case of DCT adjustment was submitted and approved by HQ this year.

Work to improve the status of bank reconciliations and follow up on outstanding items continued this year; normally the oldest items outstanding are of two months or less duration.

Even prior to the institution of the Green Committee, the office had sought ways to reduce costs and more appropriately segregate costs associated with SB functions and staff, from those associated with programme functions and staff. This had led to cost savings and more transparency in financial reporting. Significant savings of up to US$40,000 were achieved per category including travel, electricity, overtime and short term assistance, representing an average reduction of 48% over 2009.

4.2.3 Supply:
The CO has an active supply component as well as limited procurement services. Following a market survey in 2009 and an external audit, additional work on prequalification of suppliers, re-qualification and categorization of existing suppliers, improved TAD/TAFD forecasts, and development of key LTAs took place in 2010. LTAs are in place for transport and distribution of goods, office furniture, printing, emergency hygiene goods, and some office equipment. Accelerating distribution was a key focus (direct delivery by local suppliers was instituted this year), as was improvement of processes and documentation, and strategic use of supply for maximum programme impact. Work on the transfer of the warehousing function to the Government was postponed to 2011.

The supply plan served as a useful basis for the consolidation and effective planning for supply activities; there were a total of 23 bid processes this year, which shows the effective use of categorization of goods.

The 2010 supply activity amounted to US$3.5 million, an increase of 46% over the value of supply in 2008 ($1.89 million). In 2010, slightly more than US$1.0 million was for direct orders, US$1.44 million in offshore, and approximately US$1.0 million in local procurement (29% each for direct order and local procurement, 42% for offshore). Among the programme sections, 74% of the supply activity was related to the Health/Survival Section, 17% to Education, 2% to Protection, and 2% to Social Policy. Administrative purchasing represented 5% of the overall total.

Articles most frequently purchased/of highest value were: Motorcycles (US$625,639); Vaccines (US$433,191), Cold Chain Equipment (US$296,284), IT equipment (US$231,495) and Printing (US$136,898).

The office commissioned a printing survey in 2010 to identify the best printers in Senegal and to classify them in accordance with the products they are able to produce at most competitive pricing. LTAs for printing were a direct result of this survey.
The SCO collaborated with Supply Division and with WCARO to hold the first ever ‘Introduction to Supply’ Workshop in French. In addition to training one Programme Officer and one Programme Assistant from each section, Admin and Supply staff, the workshop included participants from 5 countries in the region and from the WCAR office.

4.3 Human Resource Capacity:

The CO management strives to further develop the capacity of UNICEF staff; the annual training plan for 2010 was formalized earlier in the year, and many training activities (individual and group) are ongoing. Group events included the training on Emergency Response, PPP, and Introduction to Procurement. Staff are also following a wide variety of e-learning activities from those that are required (security, IPSAS, etc) to those that better suit the role or the development plan of the individual, through ECornell and Skillsoft. There has been significant emphasis on developing English language capacity, and staff members are following external courses locally at a variety of levels.

Recruitment activities were limited as the programme is near the end of the cycle. All recruitment has been based on the planned programme results and updated job descriptions and executed in accordance with the new competency-based interview methodology.

It is foreseen that as the CPMP for the new country programme is developed, existing job descriptions will be updated in light of the competencies required, which may cause some re-profiling and create the need for training of existing staff in 2011.

The importance of performance plans and evaluation, as well as coaching was reinforced. The CMT monitored the establishment of PER tasks and progress on mid-year discussions, and timeliness and compliance improved significantly. IP staff began utilizing EPAS this year.

In July 2010 the WCAR Office selected a counsellor to provide post-traumatic psychosocial support to staff and their families, stress management, and conflict resolution and team building. The staff is aware of this resource and has utilized it.

Activities related to HIV in workplace/UN Cares have been in place since 2009. A team consisting of 3 staff members, one each from the staff association, health section and HR is in place. In 2010 a training session was held and information shared regarding the 10 minimum standards which are implemented in the office.

4.4 Other Issues

4.4.1 Management Areas Requiring Improvement:

Efficiency Gains and Costs savings in Management and Operations As mentioned above, through the Green Committee as well as through budget monitoring and improved planning, the CO achieved cost reduction in several areas enabling funds to be reprogrammed within the support budget.* Raising awareness of simple cost saving measures enabled us to reduce our electric bill, as well as our paper and printing consumable consumption. Purchasing of furniture and equipment in accordance with a plan and via LTAs has enabled us to update our furniture and equipment that is more cost effective.

The CO and the Regional office continued to collaborate in the bidding of administrative contracts, organization of training events, execution of recruitment, and joint staff association events.
The OMT carried out a new bid process for travel agency services and guard services; it has also developed a new scale for payment of local consultant fees allowing the recruitment of better, more qualified consultants.

*See the table in Management of Financial and Other Resources.

**4.4.2 Changes in AMP:**

The 2011 Annual Management Plan will address some of the challenges related to the new Country Programme 2012-2016, and programme and office structure. Additional efforts will be made to ensure a smooth transition to VISION and IPSAS by ensuring adequate preparedness and training options for staff.

**5. STUDIES, SURVEYS, EVALUATIONS & PUBLICATIONS**

**5.1 Studies, Surveys & Evaluations:**

1. Situation analysis of children and women of Senegal
2. Children and PRSP in Senegal
3. Fiscal space and public expenditures linked to Children in Senegal
4. A Review of public expenditures in health
5. Begging practice and Koranic students in Senegal rural area
6. Impact of social norms changes on community behaviour in rural areas of Senegal: assessment of community capacities strengthening programme (PRCC-TOSTAN)
7. Study on violence against girls in schools and in communities in Casamance

**5.2 List of Other Publications**

1. Guidelines to monitoring primary health care in health posts
2. Understanding children and young people’s labour in Senegal
3. Analysis of rural households in the region of Kolda with the view to implement a cash transfer project to reduce child migration and increase school enrolment
4. Fiscal space and public expenditures for children in Senegal
5. National report of the study on poverty and vulnerabilities among Senegalese children
6. Guidelines to monitoring primary health care in health centres
7. Violence against children
8. 2010-2015 National Action Plan to accelerate abandonment of Female Genital Cutting in Senegal
9. An assessment of the extent to which children’s interests are reflected in PRSP and budgetary perspectives of Senegal.

**6. INNOVATION & LESSONS LEARNED:**

**Title:** How to reduce sanitation risks in very poor areas through cost effective approaches  
**Contact Person:** Racine kane rkane@uicef.org

**Abstract:**

Based on the need to accelerate child survival interventions, the UNICEF Country Office in Senegal provided support to the Department of Sanitation and the National Service of
Health to introduce the Community Led Total Sanitation (CLTS) approach in areas where access to basic sanitation is poor and faecal contamination incidence high. The CLTS approach was introduced in 105 villages reaching 6,000 households. The clear advantages in terms of rapid implementation, high cost effectiveness, community participation and ownership, provided the right arguments to influence the government to adopt CLTS as an appropriate model to rapidly and equitably improve access to sanitation especially in the rural areas. The buy in of partners and donors followed thereafter, along with agreement over the respective responsibilities of partners and the scope of donor support to the Government institutions implementing the initiative.

**Innovation or Lessons Learned:**

To improve access to basic social services in rural areas, in 2005 Senegal decided to move from a traditional approach to the construction of latrines to a more complex system based on the setting up of a technical package including excreta disposal, laundry tub, soap and devices for washing hands. However, the design of this approach overestimated the existing national capacity for its implementation and underestimated the resources required for such a costly approach. As a result the access to sanitation only increased from 26.2% in 2005 to 29% in 2009. The progress was not enough to significantly reduce health risks for children in rural areas.

The launch and adoption of the CLTS model in 2010 allowed the Government to overcome the financial limitation, shorten the time required to ensure improved access to sanitation, and overcome the bottlenecks through improved community participation in mobilizing resources, infrastructure construction, and monitoring of their immediate environment.

The project's evaluation showed that all villages that have adopted the CLTS approach have quickly reached the 'open defecation free' status.

The demonstrated advantages of the said approach convinced the Government and partners to support its rapid scaling up and assume ownership; the coordination and clear division of responsibilities among donors and partners in support of the project and of the Government will enable high coverage and rapid expansion.

**Potential Application:**

The lessons learned in this pilot project can help shape the strategy in terms of scaling up access to sanitation in the disadvantaged rural and suburban areas and thus facilitate achievement of the MDG by 2015.

**Issue/Background:**

Senegal is a Sahelian country with majority of the population living in rural areas where access to water and sanitation is limited. Due to the significant investments made by the international community on hand washing (PEPAM), and with Government leadership, access to drinking water has improved over the years. However, access to sanitation has remained problematic. Access to rural sanitation only increased from 26.2% in 2005 to 29% in 2009 against a target of 63% by 2015. The main causes of this slow improvement relate to the complexity and costs of technology selected for the national strategy.

**Strategy and Implementation:**
UNICEF strongly advocated with local authorities on the benefits of the new (CLTS) approach, and elicited their support for the testing and implementation of the CLTS model. The CO helped to train a team of national experts to enable the implementation of the first pilot project in a disadvantaged area. UNICEF also supported in the assessment of results, and the dissemination of findings and knowledge to policymakers and communities to help create the demand for the new approach. Likewise, advocacy efforts were regularly directed to donors and partners to build the necessary buy in that could lead to a quick scaling up of these interventions.

Progress and Results:
The results of the assessments of the pilot project confirmed the relevance of the CLTS approach and its potential for rapid scale-up at low costs. Within a period of 13 months, the CLTS was introduced in 105 villages for the construction of over 1,000 latrines benefiting about 60,000 people at a cost of approximately US$ 5 per person; this cost was low compared to the former latrine construction projects. The initial reluctance and misgivings of policy makers and heads of departments observed at the beginning of the project were based on the fact that the project was "abstract" without any concrete subsidies and material. However, these reservations were quickly swept away when the technical services saw rapid return on the investment made in terms of significant improvement in the living conditions of people, and the level of involvement and engagement of local Communities that resulted from the project.

Next Steps:
The pilot’s results will give new impetus to the rural sanitation programme with the CLTS approach as a low-cost tested strategy that can significantly contribute to the country’s progress towards achieving MDG 7. The CLTS approach is well suited to the local context marked by past difficulties in raising funds to accelerate the consolidation of high-cost sanitation improvement efforts.