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### United Nations Children's Fund

Executive Board

#### Second regular session 2016

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Item 5 (a) of the provisional agenda\*

### Country programme document

#### Chad

##### *Summary*

The country programme document (CPD) for Chad is presented to the Executive Board for discussion and approval at the present session, on a no-objection basis. The CPD includes a proposed aggregate indicative budget of \$73,430,000 from regular resources, subject to the availability of funds, and \$230,000,000 in other resources, subject to the availability of specific-purpose contributions, for the period 2017 to 2021.

In accordance with Executive Board decision 2014/1, the present document reflects comments made by Executive Board members on the draft CPD that was shared 12 weeks before the second regular session of 2016.

\* [E/ICEF/2016/13](#).



## Programme rationale

1. Chad had a population of approximately 13.8 million in 2015,<sup>1</sup> 50.7 per cent of whom were women and 57 per cent children under the age of 18 years. With an annual growth rate of approximately 3.5 per cent, the population will reach 17 million in 2021. This raises challenges in terms of access to basic social services and employment for young people in a country where, according to 2011 household living measurement surveys conducted by the National Institute of Statistical, Economic and Demographic Studies (*Institut National de la Statistique des Études Économiques et Démographiques* (INSEED)), 46.7 per cent of the population lives below the monetary poverty line, with significant regional disparities. A vulnerability survey conducted in 2012 by INSEED and the Oxford Poverty and Human Development Initiative established that 20 of Chad's 23 regions have a multidimensional poverty index over 0.5, indicating almost universal poverty.

2. Although the infant and under-five mortality rates fell between 2010 and 2014 (from 106 to 72 per 1,000 live births and from 175 to 133 per 1,000 live births respectively), according to the preliminary report of the 2014/2015 Demographic and Health Survey (DHS)/Multiple Indicator Cluster Survey (MICS), the rates remain high. This is due to high rates of neonatal and maternal mortality; high morbidity due to the prevalence of HIV, vaccine-preventable diseases, diarrhoeal diseases, malaria and pneumonia; and the critical nutritional status of children under the age of five years. The report also revealed that 40 per cent of children living with their mothers suffer from moderate chronic malnutrition and one in five children (22 per cent) suffer from severe chronic malnutrition. Around one in eight children (13 per cent) have moderate acute malnutrition. Almost one in five children are underweight at birth.

3. This endemic morbidity and mortality situation is due to several key factors: high-risk behaviours; and inadequate practices and social norms in nutrition, hygiene, sanitation and health, including postnatal support (only 3 per cent of women practise exclusive breastfeeding for the first six months), all exacerbated by the low literacy rate among women. Health care and nutritional services are insufficient and of poor quality due to the lack of essential supplies and skilled personnel, the high cost of services and problems of geographical access. Other key challenges needing to be addressed are undernourishment and malnutrition linked to the prevalence of diarrhoeal diseases due to open defecation.

4. Primary school gross enrolment has increased over the past decade (from an average annual rate of 8 per cent to 12 per cent), with the exception of vulnerable groups (herder, nomadic and islandic children). However, preschool education is almost non-existent (1.1 per cent),<sup>2</sup> apart from private schools in N'Djamena. Only 40 per cent of children are able to read, write and do arithmetic by the end of primary school.<sup>3</sup> The repetition rate is estimated at 25 per cent and the dropout rate at 35 per cent, especially among girls.<sup>4</sup> Only one third of children who enter primary school continue to secondary levels and 55 per cent of school-age children (6-11 years) are not in school. Only 1 in 10 girls complete basic

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<sup>1</sup> INSEED population projections from data of 2009 general population census.

<sup>2</sup> Ministry of Education Statistics yearbook, 2013.

<sup>3</sup> *Conférence des Ministres de l'Éducation des États et gouvernements de la Francophonie (CONFEMEN)*.

<sup>4</sup> *Rapport d'État du Système Éducatif National*, 2014

education and the Gender Parity Index is below 0.8. Nearly 80 per cent of girls aged 15 years and above are illiterate.

5. There are significant shortfalls in the education sector, including lack of infrastructure (two thirds of buildings are made of non-durable materials), furniture and learning materials. Over two thirds of primary school teachers are community teachers. Half of these, who were paid through a government grant, have not been paid for the past two years, leading to absenteeism and departure. School management capacities suffer from a lack of supplies and human resources. Early marriage, the distance from educational institutions and the cost of education are additional barriers to schooling, especially for girls. There are recurrent problems with data collection, which is limited to formal educational facilities and fails to include other types of education such as Koranic schools.

6. In terms of child protection, child marriage is still a major concern, affecting in 2015 68 per cent of girls under 18 years of age and 29 per cent of those under 15 years of age (DHS/MICS preliminary report). However, a law has recently been passed prohibiting child marriage and another has been adopted to combat the practice, giving hope for its decline. There are still unacceptable levels of abuse and violence: 77 per cent of children reported having experienced physical violence at home. The birth registration rate was only 12 per cent in 2015 (DHS/MICS preliminary report), compared with 15 per cent in 2010. The weaknesses in child protection are linked to poverty of the parents, insufficient quality and quantity of services, traditional beliefs and family instability.

7. Another cross-cutting challenge to social planning, monitoring and budgeting for children is the limited availability of up-to-date, disaggregated data showing vulnerability profiles. In addition, budgetary constraints linked to low tax revenue mobilization, falling oil prices and an increase in military expenditure to combat violent extremism in the subregion have resulted in a drastic reduction in social sector budgets.

8. Participation by young people in the promotion of their rights and in the country's decision-making processes is still at an early stage. There is no institutional framework for young people's participation and the Government has limited capacity to promote participation, demonstrated by a shortage of human resources dedicated to supporting young people.

9. The country faces humanitarian emergencies caused by repeated floods, measles and cholera outbreaks and the cyclical influx of refugees, returnees and displaced people (linked to terrorism and other conflicts in neighbouring countries). This situation regularly puts pressure on the health and education systems, which have to adapt to respond to the growing needs of around 559,000 refugees, returnees and displaced people.

10. In this context, there is a need to support both institutional and community interventions relating to the offer and demand for services and to creating a favourable environment for the equitable use of services, with a focus on: (a) generating disaggregated data by nature of vulnerability and risks incurred, age, gender and population category; (b) developing social protection systems to improve access to social services for the poorest people; (c) advocating for greater public expenditure on children; (d) involving children and young people in developing and implementing national policies; (e) empowering communities and improving accountability towards populations; (f) preparing for and responding to humanitarian emergencies; and (g) systematically taking risks into account in planning.

## **Programme priorities and partnerships**

11. The Government and the United Nations system have adopted the 'Delivering as One' modality which underpins the new United Nations Development Assistance Framework (UNDAF) 2017-2021, in line with the Sustainable Development Goals, the African Union's Agenda 2063 and the first phase of its implementation 2014-2023, and the national priorities in Chad's Vision 2030 and in its Development Plan 2016-2020. The UNDAF is the cornerstone of the new country programme, which aims to further the realization of children's rights in Chad, while reducing disparities and inequalities. To achieve this goal and in the light of lessons learned from past programmes and the comparative advantages of UNICEF such as its presence on the ground, its efficient resource management and its experience in working with communities and using decentralized monitoring, the programme will maintain a strong operational link with the United Nations system, bilateral and multilateral partners and civil society, while fulfilling its commitments to sectoral reforms.

12. The proposed country programme is articulated around five programme components: (a) child survival and development; (b) inclusive quality education; (c) child protection; (d) social inclusion; and (e) programme effectiveness. These will improve conditions for children and women in 15 priority intervention regions out of the country's 23 regions (Salamat, Kanem, Ouaddaï, Batha, Wadi Fira, Barh el Gazal, Hadjer Lamis, Guera, Sila, Lac, Chari Baguirmi, Mayo Kebbi Est, Tandjilé, Mandoul and Logone Oriental). All programmes will converge in two regions (Kanem and Salamat). The other 13 regions will be covered by at least two to three programmes. The regions have been selected based on multidimensional poverty, complementarity to other partners and opportunities for resource mobilization. The strategies used by these components will be capacity-building, policy dialogue, advocacy, partnership, promotion of innovation, knowledge generation, South-South and triangular cooperation, intersectoral working, service provision and community empowerment.

### **Child survival and development**

13. The child survival and development component will help to reduce infant morbidity and mortality by increasing uptake by women and children of quality health care, HIV, nutrition, water, hygiene and sanitation services. In collaboration with other partners, it will encourage the Government to develop child survival policies and strategies, while improving early stimulation for young children through health care and nutritional services and through psychosocial support for vulnerable parents.

14. The priorities for health care will be: the scaling up of community-based health; ongoing improvements to equitable immunization through the 'Reach Every District' approach, the introduction of new vaccines and the uninterrupted supply of quality vaccines; and the control of malaria, diarrhoeal diseases, acute respiratory infections and neonatal diseases. The programme will help to create favourable conditions for the effective implementation of health interventions (sufficient human resources, substantial budget, equipment, etc.) and will show strong commitment to the universal health coverage strategy.

15. For nutrition, particular emphasis will be placed on the prevention and reduction of chronic malnutrition and on continuing to scale up the management of acute malnutrition. The regulatory framework for nutrition will be strengthened by the finalization, validation

and scaling up of the strategic guidelines for infant and young child feeding. Interventions will be better coordinated through the 'Renewed Efforts against Child Hunger' (REACH), the Global Alliance for Resilience Initiative (AGIR) and the Scaling Up Nutrition (SUN) movement.

16. The HIV/AIDS programme will support the Government in its commitment to achieve the 90-90-90 targets<sup>5</sup> to eliminate HIV and AIDS by 2030, and to educate adolescents on a responsible sex life and getting tested. Decentralized prevention of mother-to-child transmission interventions will continue to be supported in priority health districts, promoting integration with maternal, newborn and child health services and paediatric care.

17. The use of safe drinking water and of sanitation facilities will continue to be expanded, especially in schools and health centres. Promotion of Community-Led Total Sanitation will continue to be supported, adapted to the regional context, including introduction of systems for community management of water and sanitation installations. Low-cost technologies such as manual drilling will be promoted to accelerate coverage in regions with shortfalls. Advocacy will mobilize partners and financial resources and strengthen coordination within the water and sanitation sector.

### **Inclusive, quality education**

18. This programme component will support the most vulnerable children to gain the skills needed for their personal development and for socioeconomic integration. It will aim to improve the quality of and access to primary education and lower secondary education, reduce repetition and dropout rates and gender disparities, and develop alternative education opportunities, including vocational training for out-of-school children.

19. The programme will help to strengthen the institutional framework for preschool education through the development of a national strategy that takes into account the various forms of vulnerability, including disability. Communities that are committed to developing quality, inclusive preschool facilities will be supported. Social mobilization on the importance of early childhood and inclusive education will be promoted. The programme will also support training of community teachers.

20. Innovations will continue to be prioritized to eliminate barriers, including through information technologies as part of strengthening the Education Management Information System; the professionalization of teaching staff and management; and improvements in the quality of education and learning through implementation of the 'child-friendly/girl-friendly schools' initiative. It will strengthen community involvement in the management of schools by encouraging social cohesion, conflict prevention and 'sport for development' at school.

21. The dialogue on the quality of education will be stepped up, with an emphasis on improving learning achievement and on reducing the equity gaps from preschool to secondary school. Implementation will focus on areas with low rates of access and achievement. Education in emergencies will continue to be supported.

### **Child protection**

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<sup>5</sup> HIV/AIDS Fast-Track Initiative

22. This component will help to protect children from violence, abuse and exploitation by ensuring they have a birth certificate, benefit from an adequate justice system and are not married before the age of 18 years (especially girls) or victims of female genital mutilation/cutting (FGM/C).

23. The programme will support the implementation of the national 'Justice for Children' strategy and the relevant legal provisions, to promote access to a legal system sensitive to child rights. It will strengthen the capacity of organizations working in the area of justice for children. The programme will continue to address harmful social practices and norms by further empowering communities to promote an environment conducive to ending child marriage and FGM/C.

24. The civil registration system will be strengthened to establish the necessary framework for universal birth registration for all children. It will continue to support the Government and civil society in African and global mechanisms for reporting on children's rights, while contributing to child protection in emergency situations through psychosocial support.

### **Social inclusion**

25. This component will help to combat child poverty through three drivers: the information system; social policy; and children's participation in the decision-making process.

26. The programme will continue to strengthen the national statistical information system to provide regular disaggregated quantitative and qualitative data and generate knowledge on children, in particular the most excluded. This information will feed into the production and regular updating of the situation analysis for children and women, which will guide advocacy and inform decision-making.

27. Under social policy, the focus will be on social protection, decentralization, public finance and monitoring child poverty. The programme will support the development of a social transfer system to reduce chronic poverty through a combination of social assistance and strengthened resilience, while also removing financial barriers to accessing social services for the poorest. There will be increased technical and policy dialogue with actors in the public expenditure chain, to improve the use of public resources for social sectors. This will be achieved through capacity-building for the preparation, implementation and monitoring and evaluation of programme budgets and local development plans.

28. To accelerate social and policy change, the programme will promote public dialogue and the involvement of young people, while reinforcing partnerships and networks with key actors. The programme will reinforce the institutional framework for children and young people's participation by supporting the development of a national youth policy. Their participation will be increased through the use of media and information and communication technologies. There will also be an emphasis on capacity-building and the development of platforms for debate and discussion. This will be achieved through initiating a mass movement to encourage civic engagement, behavioural change and change in social norms and through influencing decision makers to implement inclusive actions for children and young people.

### **Programme effectiveness**

29. This component will help to develop synergies in programme implementation. It will address cross-cutting issues such as coordination, planning and monitoring with emphasis on the use of results-based management and human rights in programming, communication, advocacy, partnerships, humanitarian action, gender and operational support. Improvements will be made to gender-responsive planning, with an emphasis on priorities in line with UNICEF's Gender Action Plan, 2014-2017.

### Summary budget table

<i>Programme component</i>	<i>(In thousands of United States dollars)</i>		
	<i>Regular resources</i>	<i>Other resources</i>	<i>Total</i>
Child survival and development	22 525	120 790	143 345
Inclusive, quality education	8 000	78 000	86 000
Child protection	8 400	9 500	17 900
Social inclusion	11 140	4 500	15 640
Programme effectiveness	23 365	17 210	40 575
<b>Total</b>	<b>73 430</b>	<b>230 000</b>	<b>303 430</b>

### Programme and risk management

30. This country programme document outlines the UNICEF contributions to national results and serves as the primary unit of accountability to the Executive Board for results alignment and resources assigned to the programme at country level. Accountabilities of managers at the country, regional and headquarter levels with respect to the country programmes are described in the organization's programme and operations policies and procedures.

31. The programme will be implemented through the UNDAF results groups and coordinated by a steering committee, chaired by the Ministry for Planning and Prospective and bringing together the ministries involved in implementing the programme components. The components are the responsibility of particular ministries and the UNICEF office. Operational monitoring of the interventions in the regions will be provided by zonal offices, whose structure and operating arrangements will be specified in the office management plan in relation to other partners in the field. To achieve inclusive management that increases the stakeholders' accountability, partnerships will be strengthened with civil society, media, the private sector, communities and populations, in particular women and young people.

32. The main risks to programme implementation relate to: drought; floods; major epidemics; regional instability and insecurity linked to conflicts and extremism; underfunding of basic social infrastructure linked to reduced state revenues; a weak results-based culture, including accounts reporting; challenges in implementing Delivering as One; and inadequate management of commodities and other material goods.

33. To mitigate these risks, UNICEF and its partners will conduct regular evaluations of the level of risk and take appropriate measures in the context of programme

implementation, in particular of the UNDAF. There will be an emphasis on capacity-building and political dialogue. An enterprise risk management plan will be developed, implemented and regularly updated. It will incorporate actions to identify needs in emergency planning and response, along with a resilience strategy and disaster risk reduction activities.

34. The programme will further its work in resource mobilization by strengthening strategic partnerships and seizing opportunities arising in this area or in the leverage of resources for the most vulnerable children.

## **Monitoring and evaluation**

35. To ensure that the interventions are implemented effectively, a monitoring and evaluation system will be developed in partnership with key partners, including duty-bearers. This will be integrated with existing systems and aligned with the five-year national development plan. A regularly updated integrated monitoring and evaluation plan will be key to this system, which will strengthen the national framework for monitoring and evaluation, including monitoring humanitarian achievements. Emphasis will be on the identification and elimination of major bottlenecks to the achievement of results. The system will be based on a participatory operating procedure, with real-time monitoring making it possible to readjust the interventions based on progress achieved and constraints faced. It will also involve using data-collection and dissemination tools such as U-Report and text messaging as well as traditional methods at sentinel sites and with households. Media engagement strategies, use of social networks and public advocacy work will be supported by monitoring and evaluation systems appropriate to the communication methods used.

36. To improve data collection, the programme will build on the national system. The programme will support the alignment of the indicators and methodology for national surveys with international norms and standards. The biannual and annual reviews will be key milestones for monitoring the programme.

37. To strengthen knowledge and improve programme implementation, the programme plans to evaluate the education programme, the child marriage programme response, country programme interventions in emergency situations and the situation of the evaluation system in Chad. These evaluations will be carried out as part of national capacity-building efforts.



## Annex

### Results and resources framework<sup>1</sup>

#### Chad-UNICEF country programme of cooperation, 2017–2021<sup>2</sup>

**Convention on the Rights of the Child: Article 24.1**

**National priorities: VISION 2030 - Aim 4:** Ensure a better quality of life for the population of Chad; **Pillars III.2** Human Capital; **III.5** Demography; **Cross-cutting issues IV.3** Youth;

**Sustainable Development Goals: 2.** End hunger, achieve food security and improved nutrition and promote sustainable agriculture; **6.** Ensure availability and sustainable management of water and sanitation for all.

**UNDAF outcomes involving UNICEF: Outcome 2:** By the end of 2021, the most vulnerable women, adolescents and children under 5 years of age, including refugees, in the target areas make greater use of quality, integrated services for health, nutrition, good feeding practices, and prevention and treatment of priority diseases including HIV and malaria.

**Outcome indicators measuring change that includes UNICEF contribution. Key indicators:** (i) percentage of children under 1 year of age who are fully vaccinated; (ii) proportion of births with skilled attendance; (iii) antenatal consultation rates; (iv) postnatal consultation rates; (v) proportion of pregnant women on antiretroviral therapy (ART); (vi) proportion of pregnant women on intermittent preventive treatment for malaria; (vii) proportion of households covered by long-lasting insecticidal nets; (viii) contraception prevalence rate; (ix) unmet family planning needs; (x) percentage of adolescents using adapted services for sexual and reproductive health and for HIV; (xi) rate of global acute malnutrition in children under 5 years of age.

**UNICEF Strategic Plan 2014-2017: Outcome 1:** Improved and equitable use of high-impact maternal and child health interventions from pregnancy to adolescence and promotion of health behaviours; **Outcome 2:** Improved and equitable use of proven HIV prevention and treatment interventions by children, pregnant women and adolescents; **Outcome 3:** Improved and equitable use of safe drinking water, sanitation, healthy environments and improved hygiene practices; **Outcome 4:** Improved and equitable access to and use of nutritional support and improved nutrition and care practices.

<sup>1</sup> Data in this matrix represent the average in regions where the programme will intervene.

<sup>2</sup> Unless stated otherwise the baseline value for all indicators is for 2015.

UNICEF outcomes	Key progress indicators, baselines and targets	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)		
					RR	OR	Total
<p><b>Child survival and development) Outcome 1:</b> By the end of 2021, adolescents, pregnant and breastfeeding women, mothers and children aged 0-5 years make greater use of quality health services in the 10 targeted regions.</p>	<p><i>In the target regions:</i> Percentage of live births attended by a skilled health personnel (doctor, nurse, midwife, or auxiliary midwife) B: 34%, T: &gt;50%</p> <p>Percentage of women attended at least four times during their pregnancy by any provider (skilled or unskilled) for reasons related to the pregnancy B: 31%, T: 45%</p> <p>Percentage of children less than one year of age fully vaccinated with BCG; DTP3; polio3; measles and yellow fever vaccines B: 17.2%, T: 45%</p>	DHS / MICS	<p>Parents, pregnant women, women of childbearing age, mothers and adolescent girls have good knowledge and increased social and financial empowerment to access quality health services.</p> <p>Health and social service institutions have increased capacity in material and human resources, enabling them to offer high-impact, comprehensive, integrated, quality health care to women, children and adolescents.</p>	<ul style="list-style-type: none"> <li>• Ministry of Health</li> <li>• United Nations system</li> <li>• Civil society</li> <li>• NGOs</li> </ul>	9 350	50 000	59 350
<p><b>Outcome 2:</b> By the end of 2021, adolescents, pregnant and breastfeeding women, mothers and children aged 0-5 years make greater use of quality nutritional services and adopt adequate nutritional and feeding practices in 15 regions.</p>	<p>Percentage of children 0-5 months old who are exclusively breastfed B: 5%, T: 20%</p> <p>Children 6-59 months affected by severe acute malnutrition who are admitted into treatment B:TBD, T:TBD</p> <p>Percentage of households consuming iodized salt B: 69%, T: 80%</p>	National Directorate of Food and Nutrition Technology ( <i>Direction Nationale de Nutrition et de Technologie Alimentaire</i> ) annual report; SMART surveys; DHS / MICS	<p>Health care facilities in the intervention regions have increased capacity in material and human resources, enabling them to offer quality preventive and curative nutritional services to women, adolescents and children under 5 years of age.</p> <p>The National Directorate of Food and Nutrition Technology, all other divisions of the Ministry of Public Health and NGOs in the target areas have increased capacity for nutritional preparation and response in emergency situations for women, adolescent girls and children under 5 years of age.</p>	<ul style="list-style-type: none"> <li>• Ministries of Health and of Agriculture</li> <li>• United Nations system</li> <li>• European Union</li> <li>• Civil society</li> <li>• NGOs</li> <li>• Universities</li> <li>• SUN movement</li> </ul>	2 700	45 000	47 700

UNICEF outcomes	Key progress indicators, baselines and targets	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)		
					RR	OR	Total
<p><b>Outcome 3:</b> Pregnant women, children and adolescents in 10 regions access equitable and friendly quality services for prevention, management and treatment of HIV/AIDS and sexually transmitted infections, reproductive health and gender-based violence.</p>	<p>Percentage of HIV-positive pregnant women having received ART to reduce the risk of mother-to-child transmission B: 31.9%, T: 80%</p> <p>Percentage of pregnant women who know their HIV status B: 32.6%, T: 85%</p> <p>Percentage of HIV positive children in humanitarian situations who receive ART B: TBD, T: 100%</p>	<p>Sentinel surveillance DHS 2020 UNAIDS estimates</p>	<p>Pregnant and breastfeeding women, women of childbearing age and adolescents are correctly informed and have increased capacity to access HIV prevention, testing and treatment services.</p> <p>Health and social service institutions have increased capacity in material and human resources, enabling them to offer high-impact, friendly HIV prevention, testing, management and treatment services to women, children and adolescents.</p>	<ul style="list-style-type: none"> <li>Executive Secretariat of the National AIDS Council</li> <li>Office of the First Lady</li> <li>Regional AIDS Council</li> <li>Ministries of Health, of Education, of Youth, of Family and of Communication)</li> </ul>	5 230	10 900	16 130
<p><b>Outcome 4:</b> By the end of 2021, women and children in the 11 target regions, especially the most vulnerable, make greater and sustainable use of safe drinking water and sanitation services and adopt good hygiene practices to prevent diseases.</p>	<p>Percentage of households that have improved source of drinking water B: 56%, T: 66 %</p> <p>Proportion of the population practising open defecation B: 76%, T: 50 %</p> <p>Percentage of households with handwashing with soap and water B: 34.2%, T: 50 %</p>	<p>SMART surveys DHS / MICS</p>	<p>The population, in particular women and children in schools and health care facilities in the target areas, and especially the most vulnerable, are better informed and motivated to practice good hygiene and sanitation.</p> <p>Statutory technical services, civil society organizations, small and medium enterprises and the target communities have improved knowledge and resources to coordinate, plan, budget and legislate for expansion of interventions to improve the quality and sustainability of safe drinking water, hygiene and sanitation services.</p>	<ul style="list-style-type: none"> <li>Ministries of Health and of Water</li> <li>United Nations system</li> <li>European Union</li> <li>Civil society</li> <li>NGOs</li> </ul>	5 245	14 890	20 135
<p><b>Convention on the Rights of the Child: Article 28. 1</b>  <b>National priorities: VISION 2030 - Aim 4: Pillars III.2 Human Capital; Cross-cutting issues IV.3 Youth;</b>  <b>Sustainable Development Goals: 4. Ensure inclusive and equitable quality education and promote lifelong learning opportunities for all; 5. Achieve gender equality and empower all women and girls.</b></p>							
<p><b>UNDAF outcomes involving UNICEF: Outcome 1:</b> By the end of 2021, the most vulnerable preschool and school-age children, young people and</p>							

UNICEF outcomes	Key progress indicators, baselines and targets	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)		
					RR	OR	Total
illiterate adults, of both sexes and including refugees, in the target areas make greater use of quality education, vocational training and literacy services.							
<b>Outcome indicators measuring change that includes UNICEF contribution. Key indicators:</b> (i) percentage of children out of school, by gender; (ii) net rate of school enrolment; (iii) completion rate; (iv) percentage of targeted illiterate adults (men/women) attending literacy sessions; (v) percentage of children in school in humanitarian settings.							
<b>Strategic Plan 2014-2017: Outcome 5:</b> Improved and equitable access to and completion of quality, inclusive education with a focus on improving learning outcomes.							
<p><b>Education Outcome 5:</b> By the end of 2021, the most vulnerable preschool and school-age children, adolescents and young people, of both sexes, in the 10 focus regions make greater use of inclusive, quality educational services, for improved learning outcomes and receive certification for this.</p>	<p>Gender Parity Index in education completion in the intervention regions: (i) preschool B:0.95, T:0.98 (ii) primary B:0.76, T:0.80 (iii) lower secondary B:0.46 T: 0.50</p> <p>Primary education net attendance rate B:40.5%, T:50%</p> <p>Lower secondary education net attendance rate B: TBD, T: increase by 5 points</p> <p>Out-of-school rates: (i) Primary school age B:TBD, T: decrease by 10 points (ii) Lower secondary school age B:TBD, T: decrease by 5 points</p> <p>Primary education completion rate B: 42% T: 50% Percentage of children in school</p>	<p>Household surveys</p> <p>Statistical yearbooks</p> <p>Joint evaluations</p>	<p>Public and community educational institutions in the focus regions have increased capacity in material and human resources, enabling them to offer inclusive, quality educational services to children, adolescents and young people.</p> <p>The national, regional and local authorities have increased knowledge and capacity to plan, coordinate, implement, monitor and evaluate implementation of the 10-year plan for the development of education and literacy, while adopting a human rights approach.</p>	<ul style="list-style-type: none"> <li>• UNDAF theme group</li> <li>• Steering Committee for the Ten-Year Development Plan for Education and Literacy (<i>Plan Décennal de Développement de l'Éducation et de l'Alphabétisation</i>)</li> <li>• Global Partnership for Education</li> <li>• Education Cluster</li> </ul>	8 000	78 000	86 000

UNICEF outcomes	Key progress indicators, baselines and targets	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)		
					RR	OR	Total
	in humanitarian settings B: 57% T: 100%						
<p><b>Convention on the Rights of the Child: Article 7.1</b>  <b>National priorities: VISION 2030 - Aim 4: Pillars III.1. Good governance, III.2 Human capital;</b>  <b>Sustainable Development Goal: 16. Promote peaceful and inclusive societies for sustainable development, provide access to justice for all and build effective, accountable and inclusive institutions at all levels.</b></p>							
<p><b>UNDAF outcomes involving UNICEF: Outcome 4:</b> By the end of 2021, the Government adopts and implements an appropriate legal and institutional framework for social protection, child protection, prevention and management of emergencies, and economic revival.  <b>Outcome indicators measuring change that includes UNICEF contribution. Key indicators:</b> (i) percentage of people (by age, gender, economic status, origin, place of residence, disability and marital status) covered by a minimum social protection floor, including education and health; (ii) percentage of the population receiving social protection programmes.  <b>Outcome 6:</b> By the end of 2021, national and local bodies adhere better to good practices and principles for inclusive, transparent and accountable governance, enabling the population and in particular the most vulnerable, including refugees, to access quality public services, improving observance of human rights and conflict resolution mechanisms.  <b>Key indicator:</b> percentage of recommendations from the universal periodic review that are adopted and implemented</p>							
<p><b>Strategic Plan 2014-2017: Outcome 6:</b> Improved and equitable prevention of and response to violence, abuse and exploitation of children</p>							
<p><b>Child protection</b>  <b>Outcome 6:</b> By the end of 2021, women, children and adolescents, especially the most vulnerable, make greater use of quality public protection services (civil registration service, juvenile justice and social assistance).</p>	<p>Percentage of children aged 0-5 years whose birth is registered  B: 12 %  T: 50%</p> <p>Ratio of children in detention per 100,000 child population  B: 200  T: 20</p> <p>Percentage of women aged 20-24 years married before the age of 18 years B: 68 %  T: 30%</p>	<p>INSEED report</p> <p>Administrative reports</p> <p>Programme to Support Justice in Chad report</p> <p>INSEED reports</p>	<p>Communities, families and children in the target regions are better empowered to (1) protect themselves from child marriage and excision; (2) register births within the required timescale; and (3) prevent children from being in conflict with the law.</p> <p>Statutory technical services for child protection are better able to coordinate, plan, budget and legislate to improve the quality of justice for children and of the birth registration system.</p>	<ul style="list-style-type: none"> <li>• Ministries of Territorial Administration, of Woman, of Social Welfare, of Justice</li> <li>• Association for the Promotion of Fundamental Freedoms in Chad</li> <li>• European Union</li> <li>• Catholic Relief Services</li> <li>• African Development</li> </ul>	8 400	9 500	17 900

UNICEF outcomes	Key progress indicators, baselines and targets	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)		
					RR	OR	Total
				Bank			
<p><b>Convention on the Rights of the Child: Article 26.1, and Article 31.2.</b>  <b>National priorities: VISION 2030 - Aim 4:</b> Ensure a better quality of life for the population of Chad; <b>Pillars III.2</b> Human Capital; III. 3. Economic growth and fight against poverty <b>III.5</b> Demography; III.6. Social Cohesion; <b>Cross-cutting issues IV.3</b> Youth;  <b>Sustainable Development Goals: 1.</b> End poverty in all its forms everywhere; <b>10.</b> Reduce inequality within and among countries.</p>							
<p><b>UNDAF outcomes involving UNICEF: Outcomes 4, 6 and 7:</b> By the end of 2021, the Government will implement a national development policy to stimulate inclusive growth, creating jobs and opportunities, especially for young people, adolescents and women, including refugees.  <b>Outcome indicators measuring change that includes UNICEF contribution. Key indicators:</b> Level of funding from the national budget for the Priority Action Plan/Five-year Plan 2016-2020; Existence of the Five-year National Development Plan 2021-2025.</p>							
<p><b>Strategic Plan 2014-2017: Outcome 7:</b> Improved policy environment and systems that effectively respond to increasing knowledge and data on disadvantaged and excluded children.</p>							
<p><b>Social Inclusion Outcome 7:</b> By the end of 2021, the Government makes better use of knowledge about the situation of children, especially the most disadvantaged, in decision-making and implements inclusive development policies and strategies with youth and adolescents participation.</p>	<p>Percentage of most vulnerable children covered by social protection systems  B: NA  T: 10% increase</p> <p>Average state budget implementation rate for social sectors.  B: 60%  T: 90%</p> <p>Percentage of young people and adolescents whose opinions are taken into account in the follow-up measures to the concluding observations of the Committee of the Rights of the Child.  B: TBD  T: 5% increase</p> <p>Number of young people and</p>	<p>INSEED data/  Five-year National Plans 2016-2020 and 2021-2025</p> <p>National Youth Policy</p>	<p>State and civil society actors have descriptive and analytical information, which is up-to-date and disaggregated, on vulnerability and the various forms of disparity.</p> <p>Actors at the central and local levels have increased capacity to lead the planning, programming, budgeting, monitoring and evaluation of policies and programmes incorporating children's rights.</p> <p>Children, young people and adolescents are better informed about their rights and better empowered to influence decision-making on development policies.</p>	<p>United Nations Youth Network, media, community radio stations, World Bank, African Development Bank and European Union</p>	11 140	4 500	15 640

UNICEF outcomes	Key progress indicators, baselines and targets	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)		
					RR	OR	Total
	adolescents participating in the public discourse B: TBD T: 10% increase						
<b>Convention on the Rights of the Child: Article 22.1.</b>							
<b>National priorities: Sustainable Development Goals 5 and 17:</b> “Achieve gender equality and empower all women and girls” – “Strengthen the means of implementation and revitalize the global partnership for sustainable development.”							
<b>UNDAF outcomes involving UNICEF:</b> All outcomes							
<b>Outcome indicators measuring change that includes UNICEF contribution:</b> All indicators							
<b>Strategic Plan 2014-2017:</b> All outcomes							
<b>Programme effectiveness:</b> <b>Outcome 8:</b> By the end of 2021, the country programme is efficiently designed, coordinated, managed and supported to meet quality programming standards, to achieving results for children.	Implementation rate for Integrated Monitoring and Evaluation Plan (IMEP) B: 60% T: 80%  Implementation rate for harmonized approach to Cash transfers quality assurance plan B: 30% T: 90%  Implementation rate for enterprise risk management plan B: NA T: 95%	Annual report	UNICEF staff and partners are provided guidance, tools and resources to effectively design and manage programmes.  UNICEF staff and partners are provided tools, guidance and resources for effective communication on child rights issues with stakeholders.  UNICEF staff and partners have appropriate tools, guidelines and resources to effectively plan, implement, coordinate and monitor operational support, the emergency response and to incorporate gender perspective into programming.		23 365	17 210	40 575
<b>Total resources</b>					<b>73 430</b>	<b>230 000</b>	<b>303 430</b>