

Chad

Update on the context and situation of children

In 2021, Chad's political stability was tested following the military attack of April and the ensuing demise of the 30-year-long presidency of Idriss Deby Itno. The country embarked on an 18-month-long transition, supported by the AU while recovering from the COVID-19 effects and struggling with weakening capacity to provide public services due to the economic downturn (real GDP contracted by 1.1 per cent[1]). Protecting social investments, in the face of debt burden of 14 per cent of domestic resources,[2] was more difficult. Allocations to health and education (7.2 and 11.7 per cent, respectively) stagnated in 2021, already well below the international targets.[3]

The complex humanitarian crisis worsened. More people fled non-state armed groups in the Lake Chad Basin and from neighbouring countries, with 1,073,980 people in forced displacement, a 17 per cent increase from 2020;[4] 555,787 refugees residing in Chad and 406,573 Chadians internally displaced, a 21 per cent increase from 2020.[5]

Chad faced two COVID-19 waves in 2021.[6] However, mainly due to institutional constraints, only 1.1 per cent of the target population was fully vaccinated (95,267 people), despite 1,346,950 doses of COVID-19 vaccines received in 2021.[7]

Progress towards achieving the Sustainable Development Goals (SDGs) was stalled. An additional 850,000 people (including 569,000 children) [8] fell below the national poverty line, halting progress to eliminate extreme poverty (**SGD 1**). New evidence on child poverty reveals that 4.3 million children live in poor households.[9]

In five years, under-five mortality reduced from 133 to 122 per 1,000 live births, and skilled birth attendance increased from 24.3 per cent to 34.5 per cent.[10] This progress is partly explained by improvements in routine immunization coverage over the 2017–2020 period (**SDG 3/KRC1**) with an 11 and a 10 percentage points increase for Pentavalent 3 and measles vaccination, respectively.[11] Further, 67 per cent of health districts reached a Pentavalent 3 coverage of at least 80 per cent (52 per cent over the same period in 2020). However, routine vaccination coverage remains low, leading to a high number of unvaccinated children exposed to epidemics.

Measles cases decreased threefold since 2018,[12] due to the vaccination campaigns organized in previous years. No case of vaccine-derived poliovirus was detected in 2021 following the resumption of polio campaigns in 2020. A relative improvement in 2021 compared to 2020 was achieved in the rate of access to antiretroviral (ARVs) for HIV-positive pregnant women and for children by 8 and 4 percentage points, respectively.[13] In 2021, Chad fulfilled the 20 criteria for the introduction of the novel oral polio vaccine (nOPV2), which will enhance children's immunity. The Community Health Strategy was revised in 2021.

Chronic malnutrition and global and severe acute malnutrition (SAM) (**SDG 2/KRC2**) remained stagnant, at 30.5 per cent, 10.9 per cent and 2 per cent,[14] respectively, due to sub-optimal feeding practices. Exclusive breastfeeding of six-month-old children showed no progress in 2021 despite having doubled in five years. The consumption of adequate iodized salt increased in 2021 by 9 percentage points from 2020, largely due to the intensified promotion of iodine salt consumption. The multisectoral nutrition policy action plan was revised, and the application decrees for the Code on Marketing Breastmilk substitutes were issued in 2021.

Despite a 5 per cent increase in enrollment for primary school since 2020, 57 per cent of children of

primary school age are still out of school[15] (OOS) (**SDG 4/KRC3**). Foundational skills development (**SDG 4/KRC4**) is low, with only 22.2 per cent and 11.5 per cent of end-of-primary students meeting proficiency levels in reading and mathematics, respectively.[16] Shortage of classrooms and teachers, coupled with pressure to accommodate conflict-affected displaced children, severely affect progress in education. A new sector analysis conducted in 2021, prioritizing equitable access to education, including for children with disabilities, will inform the revision of the education sector strategy.

Low domestic investment into the national Roadmap on ending Open Defecation (OD) has resulted in low progress in access to sanitation and hygiene services (**SDG 6/KRC8**), with 64 per cent of the population still practising OD, a modest decrease, from 68 per cent in 2017. Access to basic water services is at 46 per cent (from 43 per cent in 2017), twice as high in urban areas.[17] Despite the high level of knowledge on handwashing with soap, only 23 per cent of households have handwashing facilities with soap.[18]

Chad is severely affected by climate change and ranks second worldwide in terms of children and families being affected the most.[19] The National Adaptation Plan (NAP) and the Nationally Determined Contribution (NDC) were breakthrough policies adopted in 2021.

Violence and exploitation against children in a context of continuing negative practices (*psychological aggression*: 77.4 per cent of 1-14-year-old children; *female genital mutilation/cutting*: 7 per cent of 0-14-year-old girls; *early marriage*: 18.9 per cent of 15–49-year-old women married before age 15) risk increasing in the ongoing transition context, which prompted a visit by the Special Representative of the Secretary-General on Violence against Children in 2021. The President of the Military Transition Council's commitment took the form of a helpline set up to report cases of violence against women and children.

While the birth registration (BR) rate for children under 1 (**SDG 16/KRC7**) remains low at 21.5 per cent[20] (despite having doubled since 2015), two ground-breaking decrees issued in 2021 are expected to enable the country to scale up the Health-BR interoperability services in coming years.

[1]International Monetary Fund, Staff Statement on Chad, January 2022.

[2]World Bank, Chad Economic Update, March 2021.

[3]Government of Chad, Public Finance Law 2021.

[4]UNHCR, Update, December 2021.

[5]Ibid.

[6]Ministry of Health (MoH), COVID-19 update, December 2021.

[7]MoH, COVID-19 vaccination, December 2021.

[8]World Bank, Chad Economic Update, March 2021.

[9]INSEED/UNICEF. Child poverty study, 2021.

[10]Demographic and Health Surveys (DHS) and UNICEF's Multiple Indicator Cluster Survey (MICS) 2015; MICS 2019.

[11]MoH, administrative data, 2021.

[12]MoH, Update, December 2021.

[13]MoH, HIV/AIDS Database, December 2021.

[14]SMART 2021.

[16]CONFEMEN, PASEC, 2019.

[17]JMP 2021.

[18]MICS 2019.

[19]The climate crisis is a child rights crisis: Introducing the Children's Climate Risk Index, August 2021. <https://data.unicef.org/resources/childrens-climate-risk-index-report/>

Major contributions and drivers of results

For every child in Chad, vaccination for maximum protection against preventable diseases (KRCl)

Joint Gavi-UNICEF-World Health Organization (WHO) advocacy resulted in the Government fully meeting its obligation and disbursing US\$1,094,606 to secure vaccine procurement through the vaccine independence initiative (VII), avoiding vaccine stock-outs. Secured funding and tailored technical assistance to the national immunization programme helped increase administrative coverage of Pentavalent 3 from 82 to 88 per cent [1] and of measles vaccines from 74 to 81 per cent between 2020 and 2021 for the January to November period. Coverage, however, remains slightly below the national 90 per cent target, largely due to a lack of comprehensive analysis of vaccination-related challenges, which resulted in, *inter alia*, postponing the introduction of second doses of measles and inactivated polio vaccines, despite investment in preparations, supported by UNICEF.

Cold chain strengthening plays a strategic role in the effectiveness of immunization. UNICEF installed 40 solar fridges supplied through various funding sources and supported the Expanded Programme on Immunization (EPI) team to finalize implementation of Gavi's Cold Chain Equipment Optimization Platform (CCEOP). Their installation, to continue in 2022, will allow to cover almost 100 per cent of districts and health facilities, enabling a scale-up in routine vaccination and vaccination campaigns, including for COVID-19. Due to continued low coverage rates registered in the northern and eastern provinces of the country, installation and operationalization of solar equipment in the Abeche subnational warehouse (serving 3 million people, 17 per cent of total population) were supported to reduce operational costs and save funds for vaccination programme activities to boost coverage.

The upgrading of the ultra-cold vaccine chain following its assessment by an international firm supported by UNICEF allowed Chad to receive 1,346,950 doses of COVID-19 vaccine in 2021 and launch COVID-19 vaccination. UNICEF's advocacy and technical support in logistics, planning, coordination and communication addressing resistance (especially of women) were pivotal in ensuring the timely use of expiring Pfizer vaccines.

In 2021, UNICEF reinforced interoperable initiatives to bring results to scale by supporting Vitamin A supplementation through the national measles vaccination campaign. It reached a total of 3,696,305 children aged 9–59 months against a target of 3,416,348 (108 per cent coverage), of which 3,477,203 children received vitamin A supplementation (102 per cent coverage). A polio prevention campaign synchronized with Cameroon and a subnational campaign in 93 districts were organized in October and November 2021.

In 2021, integration of maternal and child health services, including HIV and immunization, through the systematic monitoring of the HIV status of mothers and children, made it possible to increase the number of children tested and put on antiretroviral therapy (4 percentage points increase since 2020 in the 13 out of 23 UNICEF-supported provinces).

UNICEF spearheaded the revision of the community health strategy and boosted the operationalization of the integrated community case management (iCCM), with 185 community health workers trained on prevention of diarrhoea, pneumonia and malaria, and also boosting community demand for routine vaccination in 70 villages in the experimental district of Mongo.

Strong advocacy during the prematurity month resulted in expanded adoption of the Kangaroo care method, with two hospitals introducing it in 2021. Together with actions under the Memorandum of Understanding (MoU) signed in February 2021 between UNICEF and UNFPA, they will support the reproductive health component and reinforce vaccination of newborns.

For every child in Chad, high-impact nutrition services to prevent stunting, detect and treat malnutrition (KRC2)

The year 2021 marked the beginning of a shift in approach to nutrition support in Chad, with continued assistance to the national Integrated Management of Acute Malnutrition (IMAM) programme while scaling up nutrition prevention interventions through joint partnerships with World Food Programme [WFP], Food and Agriculture Organization [FAO], WHO, non-governmental organizations and the private sector. The implementation of the regional Stronger with Breastmilk Only initiative allowed for the first time to reach the population nationwide (over 5.7 million subscribers reached through Airtel and Moov Africa combined) through behaviour change SMS. The expansion in 2021 of the Baby-Friendly Hospital Initiative to 15 health facilities to support early initiation of breastfeeding, and the development and distribution of 7,500 visual communication tools on Infant and Young Child Feeding (IYCF) further supported the increase in breastfeeding.

UNICEF maintained national coverage above Sphere standards, with 283,694 children admitted and treated for SAM (249,513, or 85 per cent of the target in humanitarian situations), or 94.3 per cent of the adjusted caseload (a 37 per cent increase in admissions compared to 2017), despite ready-to-use therapeutic food (RUTF) stock-outs in March and April 2021. To mitigate the risk of stock-outs in the remainder of the year, UNICEF had to be particularly agile in deploying several strategies: fundraising for 280,835 cartons of RUTF (i.e. 86 per cent of the annual requirement); pre-ordering with regular UNICEF resources; borrowing RUTF from neighbouring countries; and implementing the supply chain risk management strategy (with forecasting, monitoring of implementation and strengthened controls) developed with support from UNICEF West and Central Africa Regional Office (WCARO).

To ensure a long-term solution to the timely availability of RUTF, UNICEF strengthened its dialogue with the Government as well as advocacy for a contribution to the RUTF financing plan from domestic resources. Based on lessons learned from programmatic visits and evaluations of the implementation of COVID-19-adjusted IMAM protocol, UNICEF began to bring the wasting treatment programme to a manageable scale (it currently supports 46.5 per cent of all treatment centres). In addition, UNICEF strengthened the quality of treatment with focus on integrated programming (resulting in 52,234 mothers with children with SAM admitted to health facilities receiving hygiene kits) and scaled up nutrition interventions through the community-based, mother-led mid-upper arm circumference (MUAC) approach while continuing to improve the nutrition supply chain management.

For every child in Chad, improved access to equitable, sustainable and quality education and learning (KRC3&4)

UNICEF stepped up its advocacy in 2021 for the Government and partners to jointly tackle the key supply-side bottlenecks driving the large number of out-of-school children (OOSC) (SDG 4/KRC3). This resulted in donors delaying their decision to suspend support for the payment of teachers' salaries while a long-term solution is sought by the Government with support from the Education Donor Group.

UNICEF jointly leveraged results with the World Bank (WB) and UNESCO by paying 2,269 teachers, allowing 185,060 children (77,796 girls), i.e. 6.8 per cent of all primary-school children, to continue education. While the OOSC rate has not dropped since 2017, UNICEF ensured that a total of 792,735 children (214,222 girls), – 607,675 children (136,426 girls) of whom were reached through distance education – avoided joining OOSC ranks in 2021, i.e. 23.4 per cent (14.8 per cent girls) of all students enrolled in primary and secondary schools at the national level. From 2022, an additional 11,450 students can attend school every year due to the 229 classrooms constructed or rehabilitated that are disability-friendly and equipped with separate girls/boys sanitation facilities.

New research supported by UNICEF in 2021 revealed that by allocating US\$27 monthly to each poor

household over a year, more than 158,000 children can go to or stay in school,[2] highlighting that child-sensitive cash plus Social and Behaviour Change Communication (SBCC) programmes targeting parents of OOSC can be effective and need to be put to scale. Therefore, integrated programming was at the heart of addressing demand-side constraints to reducing the OOSC, especially girls, through the delivery of school nutrition, WASH and hygiene services, as well as cash transfers and community participation in schools jointly targeted by WFP and UNFPA under the Multi-Year Resilience Programme. This synergy allowed to enhance access to school and enable the retention of 29,204 primary school children.

The UNICEF-supported twin-track, nexus-driven approach of targeting both affected and host communities and providing both groups with a multidimensional package of services – focusing on child protection/psychosocial services, economic support to households through cash transfers, in addition to health, nutrition and WASH, including menstrual hygiene, with an innovative, reusable MHM kit produced in Chad – enabled 245,940 children (115,251 girls) affected by humanitarian crises to receive school supplies, and 398,430 students (172,879 girls) to benefit from hand-washing facilities. At the national scale, UNICEF and partners' joint efforts in 2021 led to leveraging an upsurge in demand for education, resulting in increased enrollment in primary (+5 per cent) and secondary education (+11 per cent) between 2019 and 2021.

Bridging the pathways between non-formal and formal education through modernized Quranic schools, UNICEF prioritized curriculum design that ensures the development of foundational skills for children. While this reform and strengthening of the non-formal education system still needs to be scaled up, it is expected to have a long-term impact on reducing the OOSC.

To address the learning crisis, Chad focused on providing children with foundational skills (SDG 4/KRC 4). Through a close partnership with schools, UNICEF supported the distribution of 3.4 million textbooks and teachers' guides to all primary schools, grades 3 to 6, to benefit around 1.3 million students. This reduced the ratio of students per reading and math textbook from 4 to 1, and per science textbook from 16 to 2.

For every child in Chad, a birth certificate and protection from violence, exploitation and abuse (KRC7)

Interoperability was a major focus of UNICEF's technical assistance on birth registration (BR) in 2021, in support of the Government Roadmap to achieve universal BR by 2030. Through a close partnership with the National Agency of Civil Registration and UN agencies, UNICEF laid the foundation for integrating health and education services into civil registration, with two decrees currently pending the Prime Minister's signature. The effective implementation of this reform will begin in 2022.

Upscaling BR through routine data continued, with the Government issuing a mandatory data collection form to all civil registry services, requesting them to regularly collect and report BR data. While national-level BR of under-5s remains low despite doubling since 2015, implementation of this system with UNICEF support is starting to yield results, with 185,343 children registered in 2021, a five-fold increase from 2020, exceeding the target. This is largely due to a scale-up in the SBCC radio-based communication on BR. The latter also included messages targeting adolescent girls to encourage them to obtain birth certificates as a means to protect themselves against violence, particularly child marriage. In 2021, UNICEF's strategic positioning on BR interoperability leveraged financial support from the European Union (EU) for the national reform and scale-up of the interoperability initiative in Chad over the next three years, as well as for testing technological innovations through SMS-based BR.

As part of the preparation of Chad's initial and periodic reports under the two Optional Protocols to the

Convention on the Rights of the Child, with support from UNICEF, the Government has made BR an important element in the prevention of the recruitment of children associated with armed forces and groups (CAAFAGs) and of the sale and trafficking of children.

Delivery of birth certificates through mobile courts was an important part of the package of services provided to refugee and internally displaced children as well as children on the move.

For every child in Chad, access to water, sanitation and hygiene while ensuring maximum protection against COVID-19 (KRC8)

In 2021, UNICEF leveraged the limited government and donor investment into implementing the Roadmap on ending OD through cost-effective downstream operations, ensuring a rapid scale-up of the Community-Led Total Sanitation (CLTS) programme using community engagement (especially women's associations) and effective SBCC strategies. This resulted in an additional 639,641 people living in OD free villages, putting the cumulative result to date at 1,564,943 people, achieving 104 per cent of the KRC8 target. The involvement of local leaders and opinion leaders at the community level proved to be a driving force for accelerating results on ending OD. Furthermore, capacity building of school children, teachers and parents through school hygiene clubs improved hygiene practices in schools, including for menstruating girls through integrated programming of the School-Led Total Sanitation (SLTS) implemented jointly with WFP and UNFPA. With UNICEF's direct support, 8,749 people accessed safe drinking water, and an additional 26,894 children in 57 schools were provided access to WASH services. The joint United Nations action and resource mobilization enabled access of 64,955 internally displaced persons (IDP) to drinking water, or 65 per cent of the Humanitarian Action for Children (HAC) target, and of 30,020 people to emergency latrines, or 150 per cent of the HAC target, as a means to reduce conflicts and ensure peaceful coexistence.

With the response to COVID-19 revealing enormous WASH needs in health facilities, guided by the results of the rapid assessment of health facilities for infection prevention and control (IPC), UNICEF was able to better target, adapt its support and boost promising and cost-effective innovative approaches in IPC, equipping health facilities with material to locally produce chlorine for water treatment.

For every child affected by emergencies, timely provision of lifesaving services, within a KRC-focused and nexus-reinforcing approach

As lead of the Nutrition, Education and WASH clusters and the Child Protection Area of Responsibility, at the national and subnational levels, UNICEF persevered together with government and NGO partners to strengthen Accountability to Affected Populations (AAP) and Prevention of Sexual Exploitation and Abuse (PSEA), resulting in a new AAP action plan for the Humanitarian Coordination Team and a revised inter-agency PSEA action plan. Together they also ensured the provision of timely assistance and services. The focus on nexus and resilience was at the forefront of preparedness and response, enabling to sustain KRC3 and KRC8 in particular.

For every child in Chad benefiting from progress towards KRC, faster delivery of products and services

Two key strategies in supply chain management – increasing long-term agreements (LTA) and using job orders against the LTAs; and decentralizing some of the procurement to the field offices – enabled reducing procurement and delivery delays and contributed to developing local markets.

For every child in Chad benefiting from progress towards KRCs, higher visibility

UNICEF strengthened its presence on social media, with a 6 per cent growth in number of followers

on Facebook and 15 per cent on Twitter. Coverage of UNICEF and children-/KRC-related topics increased through successful partnerships with media organizations, notably Haute Autorité des Médias et de l'Audiovisuel and Maison des Media du Tchad.

For every staff member in UNICEF Chad, adequate duty of care to enable them to contribute to the progress towards KRCs

Staff wellbeing, safety and security were priorities in 2021 in the contest of two waves of COVID-19 and political and security concerns. Flexible working arrangements and digital solutions were emphasized by providing data-loaded modems to staff as a mitigation measure to teleworking connectivity limitations.

The Office strengthened efforts in preventing gender discrimination, sexual harassment and abuse of authority, and laid the ground for promoting an open 'speak-up' culture, in support of strengthening the culture of results, which will continue in 2022. In 2021, due to a tailored plan of action developed under the lead of the Representative, there was an improvement between the staff pulse surveys through measures taken to better address female staff's concerns.

[20]MoH, administrative data

[21]UNICEF Chad, 2021.

UN Collaboration and Other Partnerships

Strengthening United Nations collaboration. Inter-agency work within UNDAF prioritized United Nations support to the transition process and implementation of six joint UN programmes in 2021, with UNICEF providing technical leadership on strengthening nutrition prevention, education and peace building, as well as the role of women in peaceful coexistence.

Inter-agency collaboration produced the final UNDAF evaluation and the 2021 Common Country Analysis (CCA), with UNICEF contributing with a fully revised SitAn. Its leadership role in the UNDAF Monitoring and Evaluation Group allowed to operationalize UNINFO, enabling harmonized reporting.

Bringing KRCs to scale through partnerships. An unprecedented 3,149,190 people were reached with COVID-19 messages through partnerships with the WB, European Commission's Humanitarian Aid and Civil Protection (ECHO) and KfW, and collaboration with the Ministries of Public Health and Communication. Through new agreements with local radio stations, NGOs and women's and youth associations, outreach of COVID-19 vaccination-resistant populations was scaled up.

UNICEF signed a promising agreement with the Government of Japan on strengthening cold chain systems and risk communication and community engagement, to reduce the risk of child mortality and morbidity due to vaccine preventable diseases (**KRC1**) in Chad, complementing efforts by Gavi and Bill & Melinda Gates Foundation.

The WFP, FAO and WHO partnership enabled the scale-up of nutrition prevention. UNICEF continued its partnership with ECHO, Foreign, Commonwealth & Development Office (FCDO), Global Affairs Canada, Sida and USAID in treating 283,694 children with SAM (**KRC2**). However, FCDO will discontinue funding for nutrition in Chad starting in 2022.

Global Partnership for Education (GPE), Swiss Cooperation, Korean International Development Agency (KOICA), and Education Cannot Wait (ECW) provided critical support and enabled UNICEF to build and equip 229 classrooms (including latrines and water points) to provide access to education

to children (**KRC3**) and ensure that no child is left behind.

Through a new partnership signed in 2021 with the EU, UNICEF will support the Government to strengthen the civil registration system to improve birth registration (**KRC7**).

Expanded partnerships with NGOs and community leaders enabled an unprecedented scale-up of access to water and sanitation in excess of targets (**KRC8**).

Diversifying partnerships. UNICEF increasingly engages with new and emerging partners, with a promising US\$45 million programme to strengthen primary healthcare in underserved provinces, including in the north, approved by the IsDB Board of Directors in December 2021.

Expanding partnerships with Airtel and Moov Africa allowed to quadruple the number of U-Reporters, enabling 454,930 children, adolescents and young people (network subscribers) to engage in U-Report platforms for behaviour change.

UNICEF capitalized on the in-country presence of partners, continuing its strategy of direct engagement with locally based donors and partners (EU, Germany, United States of America, Agence Française de Développement, Swiss Cooperation, WB) while strengthening direct interaction, through a mission by the Representative to Cameroon, with Canada, Republic of Korea and Japan representations based in Cameroon. Several donor missions took place in 2021 (ECW, Sida, ECHO, KOICA), enabling UNICEF to demonstrate how humanitarian and development interventions impacted on beneficiaries with a view to sustaining the partnership framework in 2022.

Lessons Learned and Innovations

Integrated approaches key to ensuring sustainable and resilient recovery from COVID-19

While UNICEF continued support in 2021 in each sector, results were below expectations, because opportunities were missed to achieve sustainable recovery from COVID-19 through integrated strategies. The COVID-19 real-time evaluation findings also identified a sub-optimal use of cash transfers. Therefore, in 2022, UNICEF will deploy a multi-track strategy: integrated IPC promotion strategies involving health, WASH and education at the community level, including through locally designed IPC solutions, and cash transfers linked to SBCC for vaccination promotion.

Appropriate SBCC+ strategies for boosting immunization results (KRC1)

A twin-track approach of support to opening new vaccination centres and SBCC (with participation of communication staff and consultants, and partnerships with women's associations) accelerated the pace of COVID-19 vaccination and reduced resistance. There were two documented weekly peaks in number of persons vaccinated, of which one saw a surge in women's vaccination (women being one of the most resistant groups). In 2022, UNICEF will support implementation of tailored strategies focused on resistant groups and the COVID-19 national vaccination campaign in 2022 to accelerate COVID-19 vaccine coverage while maintaining routine immunization.

Diversification of RUTF procurement and engagement with the private sector for timely care of malnutrition (KRC2)

To mitigate the impact of RUTF stock-out, the country capitalized on the availability of the Sudan-based supplier's unused stock, ordering 15,000 cartons, which were received within one month (when previously lead times would exceed four months). This highlighted the importance of engagement with the private sector and sub-regional suppliers to facilitate production expansion and to diversify supply sources to supplement regional capacity for fast RUTF delivery to Chad.

Multi-sector package of interventions of health-in-school (including WASH in school) combined with support for learning quality are enablers of gender-transformative education (KRC3&KRC4)

Multi-sectoral health-in-school interventions contributed to rapid scale-up, with two UNICEF-supported provinces doubling the transition rate of girls from lower to upper secondary school in less than two years. UNICEF will support the scaling up of this type of integrated approach, where supply is matched with learning support while building on community engagement to empower girls and women to ensure sustainable gender transformational results for education access and quality for girls.

Appropriate political anchoring of BR initiatives to achieve rapid scale-up of BR results (KRC7)

Following weak results in BR in early 2021, despite support with supplies (birth registries) and technical assistance, due to competing mandates of two ministries, recognizing the critical role of appropriate institutional anchoring, UNICEF supported the preparation of a Roadmap and a circular note, jointly disseminated by the two ministries to the deconcentrated services to boost the issuance of birth certificates. This resulted in a five-fold increase in registered children compared to 2020. Strengthening ownership by all stakeholders of the interoperability approach will be a key strategy for national scale-up of BR while capitalizing on the UNICEF WCARO-supported programmatic evaluation of KRC7.

Sustainable results for children require combined operational scale-up with continued advocacy (KRC8)

In 2021, despite achieving cumulative results exceeding the country programme target through downstream operations (including greater involvement with traditional and religious leaders), UNICEF missed opportunities to leverage additional investment to implement the Roadmap on ending OD, which may jeopardize sustainability. Therefore, in 2022, UNICEF will support the Government in improving its advocacy plan to mobilize more internal and external resources to implement the Roadmap while focusing on climate change resilience.

The power of youth in supporting an enabling environment for achieving all KRCs

Building on the evidence of youth promoting access to basic social services, raising awareness and conducting community and door-to-door advocacy on BR, immunization, school attendance for girls, and prenatal care in four major cities (Mao, Bokoro, Moussoro and Mongo), in 2022, UNICEF will raise awareness among institutional actors in the field so that they will work more closely with youth and involve them widely in their community outreach activities.

Innovations

Locally produced cost-effective technologies for access to water to accelerate results in KRC8

To address the challenges of water scarcity in arid areas, UNICEF is exploring sand dam technology to collect and store surface water for potential scale-up in Sahel countries. A pilot sand dam was completed in 2021. While the effectiveness of this technology is being documented, it is already known to be climate-resilient and low-cost (US\$0.95 per person/year in investment, with little maintenance costs), and to have a longer lifespan and lower risk of water drying up than conventional boreholes, which are not suitable for this region.

Digital early warning system solutions anchored onto RapidPro/U-report to save lives

The UNICEF-supported digital early warning system, linked to the U-Report platform and SMS

messaging through a partnership with Tigo is operational in the two provinces, and provided early warnings of floods, population movements and epidemics, and strengthened emergency response promptness. While addressing shortcomings in the speed of response to alerts in 2021, the technology already proved its effectiveness in saving lives in response to a measles epidemic.

Humanitarian access and ‘stay and deliver’ in partnership with women-led local NGOs in hard-to-reach and insecurity-affected areas

In response to the withdrawal of on-the-ground presence of humanitarian actors during the April 2021 military operations, leaving populations affected by new urgent humanitarian needs without assistance, UNICEF partnered with area-based NGOs, localizing UNICEF’s emergency response and ‘stay and delivery’ strategy. In under a week, NFIs were distributed to 12,296 people, including women and children in IDP sites through an agreement with the local nursing women’s association, allowing UNICEF to ‘stay and deliver’, showing partners and donors that building new and innovative partnerships with local, women-led NGOs can save lives in complex environments.

Way forward using the power of youth

Supported by UNICEF and its partners, 500 youth participated in the 2nd National Youth Forum, focusing on youth’s role in political transition. A key theme for UNICEF in Chad in 2022 will be harnessing the power of youth, the largest constituency in Chad, as agents of change to reap the social dividends of the political transition for their communities and scale up the KRCs.