

Chad

Update on the context and situation of children

Chad was marked by two major developments in 2022: (i) an 18-month transitional period governed by a Transitional Military Government and negotiations with the politico-military groups, resulting in a fragile peace agreement signed in Doha; and (ii) the Inclusive and Sovereign National Dialogue held in N'Djamena, leading to the establishment of a new two-year transition by the National Union Government, whose policy gives priority to, among others, increasing access to drinking water, energy, healthcare, quality education, employment, food security and road infrastructure.

Repression of social protests on 20 October led to around 50 people killed and over 300 people injured, according to official reports. Among those arrested, 80 children were subsequently provisionally released through high-level advocacy by UNICEF.

The prevailing fragile situation prevented the Government from finalizing the new National Development Plan (2022–2026), prompting the United Nations team to request the endorsement of a Transitional Programming Framework 2024–2026 to which the UNICEF Country Programme Document (CPD) 2024–2026 will be aligned. This was preceded by an update of the Common Country Analysis, informed by agency analyses, including the UNICEF situation analysis of children highlighting the need to tackle governance constraints affecting service provision.

With increased oil revenue, health and education public expenditure rose from 2021 to 2022 from 7.2 per cent to 8.5 per cent and from 12.5 to 13.8 per cent respectively.[1] However, out-of-pocket expenditures represent 45 per cent of the current education expenditure, the main source of funding for public/community schools, and more than 61 per cent of the current health expenditure,[2] which exacerbated poverty (42.3 per cent)[3] (**SDG1**).

Humanitarian crises amplified in a challenging operating environment for UNICEF due to growing insecurity, limited humanitarian access (Lake Chad and border areas with Nigeria and Niger), and multiple, rapid onset and protracted humanitarian situations, exacerbated by climate change (CC) leading to food insecurity and malnutrition (affecting 1.8 million children) and unprecedented flooding (affecting 1.5 million people in 19/23 provinces, agricultural land, water, sanitation and school infrastructure - 1,225 schools and 4,274 classrooms)[4], prompting the Government to declare two states of emergency in 2022, calling for urgent international support.

Around 6.1 million people needed humanitarian assistance in 2022, a 17 per cent increase compared to 2021, of which 1 million displaced people: 381,298 internally displaced people, 592,769 refugees, 4,959 asylum seekers and 101,551 Chadian returnees.

The supply- and demand-side driven improvements (through the Gavi-WHO-UNICEF partnership) in routine immunization coverage over the 2017–2021 period (**SDG3/ key results for children [KRC] 1**), resulting in a 17 percentage points increase for Pentavalent 3, and a 18 percentage points increase for measles vaccination[5], largely explain the continued positive trend in under-5 mortality reduction, from 122 to 107 per 1,000 live births from 2021.[6]

A national World Bank-WHO-UNICEF-financed COVID-19 vaccination campaign increased coverage from 2 to 20 per cent (i.e. 42 per cent of the target)[7] and prevented a major outbreak.

The progress achieved in vaccination, including for COVID-19, prompted Gavi to recognize Chad among the top 10 countries in WCARO with the fastest immunization progress.

However, routine vaccination does not reach all children, which poses risks of epidemics.

With UNICEF support, 610,607 children aged 6–59 months in humanitarian situations were vaccinated against measles[8] and 5,375,490 (109%) and 5,442,953 (110%) children aged 0–59 months were vaccinated with the novel oral polio vaccine type 2 (nOPV2) through two campaign rounds respectively (the second combined with Vitamin A and deworming), supported by WHO and UNICEF. [9]

Global acute malnutrition and stunting (**SDG2/KRC2**) decreased from 10.9 in 2021 to 8.6 percent in 2022 and from 30.4 per cent in 2021 to 28.0 per cent in 2022, respectively[10], with stunting remaining above the WHO threshold. Dietary diversity tripled from 14.5 to 42.5 per cent, due to social and behaviour change- (SBC) driven strategies implemented by UNICEF and partners. SBC support to breastfeeding did not translate into improvements. Through the partnership with the World Bank and the United States Agency for International Development’s (USAID) Bureau for Humanitarian Assistance (BHA), nutritional supplies for severe acute malnutrition (SAM) treatment were secured until the end of 2023 for 638,954 under-5 children (under the current crisis scenarios) for 87 per cent of needs, with the rest covered by Nutrition cluster partners.

Progress in access to basic water, sanitation and hygiene (WASH) services is challenged by CC risks, with basic water access at 46 percent (37.6 per cent in rural vs. 74 per cent in urban areas) and open defecation at 64 percent, the same level as in 2021.[11] Over 78 per cent of primary schools do not have sanitation services.[12]

In addition to stagnant education progress – gross enrolment ratio at 91.5 percent (82.1/100.9 girls/boys), and primary completion rate at 46.9 percent (40/54.1 girls/boys) (**SDG4/KRC3**) – foundational skills development (**SDG4/KRC4**) remained low due to a shortage of classrooms, teachers and pedagogic resources. The Government renewed its commitments to transform education (translated in the Compact with the Global Partnership for Education) and increase the share of public education spending to 20 per cent of the national budget.

Social workers reported 53,753 cases of violence against children, double from 2021. The Government launched the development of a national child protection policy, set to define major reforms in the child protection sector.

UNICEF advocacy efforts resulted in a new regulatory framework to mandate hospitals to issue birth certificates and set up one-stop birth registration (BR) centres, which combined, resulted in a 4-percentage point increase in BR from 2021 (**SDG16/KRC7**).

UNICEF’s advocacy resulted in the Government of Chad resuming its work on the Convention on the Rights of the Child reporting, with preparations ongoing for compliance with the simplified procedure.

[1] Chad Budget and Finance Ministry, Public Finance Laws (2021-2022).

[2] World Bank, Systematic country diagnosis, April 2022.

[3] INSEED, ECOSIT-4 2018.

[4] OCHA, December 2022.

[5] UN-IGME, Mortality estimates, 2022.

[6] WUENIC, 2021.

[7] MoH, COVID-19 vaccination, 2022.

[8] 3,134 cases and 12 deaths from measles reported.

[9] 28 cases of vaccine-derived poliovirus (cVDPV2) reported.

[10] MoH, SMART 2022, non-overlapping data collection.

[11] JMP, 2021.

Major contributions and drivers of results

In the delivery of the CPD 2017–2021/ext. 2023, broadly aligned to the Strategic Plan 2022–2025, the Office pursued seven priorities in 2022, four of which focused on KRCs and the key drivers of success: advocacy, partnerships, nexus-/risk-informed programming, scale-up, SBC-integrated programming, system-building through decentralization and digitalization, and targeted actions to advance the leadership of adolescent girls as contribution to the implementation of the Gender Action Plan. All priorities were met due to improved planning, monitoring, strengthened risk management and joint accountability, streamlined internal collaboration, and targeted fundraising in response to complex emergencies. Interventions were prioritized that supported the achievement of the United Nations Development Assistance Framework (UNDAF) Human Development Outcome focused on ensuring greater use of quality and integrated basic social services by vulnerable women, adolescents and under-5 children.

Goal area 1. Every child survives and thrives

CPD Child Survival and Development Outcome - greater use of quality health services by adolescents, pregnant and breastfeeding women, mothers and under-5 children.

Priority result 1 (KRC1): By the end of 2022, Expanded Programme on Immunization (EPI) has strengthened capacity in Logistics and SBC to increase national immunization coverage. Results achieved.

The joint Gavi-WHO-UNICEF partnership and technical assistance resulted in significant upscaling of cold chain, communication and programmatic capacities, with a boost in national vaccination coverage from the previous year. Pentavalent 3 coverage increased from 87 to 90 per cent in 2022 (100 per cent of the annual target) and measles coverage from 80 to 84 per cent.[13] Public funds were mobilized for the procurement of vaccines for routine immunization (US\$2,831,838 disbursed by the Government for the procurement of vaccines through the Vaccine Independence Initiative).

A key driver for vaccination increase, especially for COVID-19, was the national-scale roll-out of SBC strategies through support provided by UNICEF to the EPI in 21/23 provinces. This engaged 62,681 local actors (female and young volunteers, and health personnel) at the community level to promote vaccination, resulting in awareness-raising of over 6 million people on COVID-19.

UNICEF's intensified support, together with WHO, Gavi and donors, led to an upscaling of cold chain coverage to above 90 per cent. Vaccine storage capacity was reinforced with support from Gavi's Cold Chain Equipment Optimization Platform (CCEOP) and health systems strengthening, UNICEF and COVID-19 pooled funding, and Government of Japan funding. UNICEF specifically supported the procurement, distribution and installation of cold chain equipment (comprising walk-in cold rooms, ultra-freeze appliances, electrical freezers and solar refrigerators) through its central vaccine store, four subnational vaccine depots, 23 (100 per cent) provincial vaccines stores, 139 districts (100 per cent) and 1,250 healthcare facilities equipped with cold chain equipment (i.e. an additional 75 per cent of functional health facilities in 2022, bringing the total to over 90 per cent of health facilities with a functional cold chain). 1,283 of the solar refrigerators were installed and made operational in health facilities in remote locations, which allowed to expand routine immunization services to these localities, most of which previously were not able to regularly access vaccination services.

In collaboration with WHO, Gavi and other partners, UNICEF supported the EPI in developing a 'zero-dose' strategy (submitted to Gavi for funding), whose implementation should bring vaccines to

unvaccinated and incompletely vaccinated children, relying, among others, on SBC-driven human-centred design strategies initiated in 2022 in two provinces and yielding strong immunization results.

Presidential decree-supported upscaling of interoperability with BR enabled health workers to facilitate the declaration of all newborns delivered in their health facilities, jointly boosting immunization and BR results in the hospitals.

Goal area 2. Every child learns

CPD Education Outcome - greater use of inclusive, quality educational services, for improved learning outcomes by the most vulnerable preschool and school-age children, adolescents and young people.

Priority result 2 (KRC3 and 4): By the end of 2022, school-age children, especially girls, who are out-of-school or at risk of drop-out in 9/23 priority provinces benefit from quality learning to improve academic and life skills. Results achieved.

Joint action by UNICEF, UNESCO and Education Donor Group partners in the highly participatory national consultations for the Transforming Education Summit helped build advocacy for accountability. The Government committed to increasing the share of education in the national budget to 20 per cent, to fund the recruitment of teachers, including community teachers (previously largely funded by partners), infrastructure and equipment. This is expected to sustainably resolve the issue of over-dependence on partners for a core function of the Government, despite the World Bank's commitment to a medium-term solution to provide 5-year funding for around 10,800 teachers (i.e., 29 per cent of all public and community teachers).

UNICEF fully met the objective for ensuring quality learning for children (KRC4), with 76 per cent of the country's schools supported in 2022 to conduct in-service teacher orientation (against a target of 75 per cent), thus ensuring increased access to education for out-of-school children, especially girls (KRC 3), through a twin demand- and supply-side-driven strategy. A total of 175,282 out-of-school children of primary school age (76,477 girls) benefited from access to education through UNICEF-supported school construction (393 classrooms – a 71.6 per cent increase from 2021) and the provision of teachers (almost five times above the target of 38,000 children reached), and 321,621 children (94,531 girls) benefited from UNICEF-supported learning materials (102 per cent of the target). In addition, cash transfers were provided to vulnerable children (including adolescents girls) in the target provinces through a partnership with WFP and sexual and reproductive health services jointly supported by United Nations Population Fund (UNFPA) (Common Chapter commitments).

UNICEF assisted 6 per cent of out-of-school children of primary school age, i.e. a 10 per cent decrease of all out-of-school children in 2022 alone (against the initial 5-year CPD target of a 10 percentage points decrease). The scale-up of multi-sectoral (i.e., psychosocial services, integrated health-HIV, nutrition and WASH, including menstrual hygiene services, and cash transfers) and nexus-focused interventions (targeting both displaced and host communities), supported by Education Cannot Wait (ECW), among others, played a key role in ensuring this result.

After a successful national roll-out of distance learning in partnership with the Ministry of National Education (MNE) and local non-governmental organization (NGO) Technidev in 2020 and 2021, distance learning was expanded in 2022 to children, including adolescents, affected by humanitarian crises.

Building on the successful experience with renovated Quranic schooling (supported by the French National Committee and the Muslim League), the MNE committed to mapping out Quranic schools to ensure the scale-up of the UNICEF-promoted model and conduct learning assessments as part of the

Global Partnership for Education portfolio funding, with prospects to further decrease the large number of out-of-school children in future years.

In 2022, UNICEF initiated work to strengthen foundational language and numeracy, integrating pre-school activities in early primary education, and implementing SBC-focused strategies of positive deviance and analysis of pedagogical practices and behaviours of education actors (i.e. teachers, headmasters, pedagogical supervisors and community members), with a view to future scale-up.

Goal area 3. Every child is protected

CPD Child Protection Outcome - greater use of quality public protection services (civil registration service, juvenile justice and social assistance) by the most vulnerable women, children and adolescents

Priority result 3 (KRC7): By the end of 2022, communities, civil registration and health services have increased capacity to register births of children under one year of age in 15/23 priority provinces. Results achieved.

The highlight of the year was UNICEF's focus on upscaling the interoperability mechanism between the health centres/hospitals and civil registration centres through a twin approach of decentralization and digitalization of BR (KRC7), in partnership with the Ministry of Public Security, the National Agency of Civil Registration and the Ministry of Public Health and Prevention). This resulted in almost a tripling in the number of hospitals reporting births under the interoperability mechanism, from 511 in 2021 to 1,440 in 2022, covering 16/23 provinces, or 75 per cent of Chad's hospitals. Complemented by the routine data collection system put in place in 2022, the global result of the approach was an increase from 21 per cent in 2021 to 25.3 per cent in 2022 in the number of children under one year of age registered at birth (i.e. 180,464 children in 2022 for a cumulative result of 403,159 children for the 2017–2022 period). While remaining below the CPD target of a 7.6 percentage points annual increase, the 2022 target was exceeded, with prospects for fast catch-up in 2023.

This result was possible due to UNICEF's advocacy to issue a presidential decree and to enable the directors of hospitals to act as civil registrars and to issue birth certificates to newborns. Furthermore, the training of 1,636 health workers and 862 civil registrars, which together with the printing and distribution of new BR tools in hospitals, underpinned the scale-up strategy.

Interoperability is key for the roll-out of major initiatives, including the European Union-funded BR initiative implemented in partnership with communities and NGOs, that will continue until 2024.

Further synergy was created through the UNFPA-UNDP-UNICEF Memorandum of Understanding for common integrated services in hospitals (five set up to date) for addressing violence against women and children, giving an additional boost to BR catch-up (Common Chapter commitments).

Goal area 4. Every child has access to safe and equitable water, sanitation and hygiene

CPD WASH Outcome - sustainable use of safe drinking water and sanitation and good hygiene practices by the most vulnerable women and children.

Priority result 4 (KRC8): By the end of 2022, communities in the target provinces have the skills to promote good hygiene practices to end open defecation. Results achieved.

UNICEF's advocacy through high-level sector consultations, including the risk-informed WASH bottleneck analysis conducted in 2022, resulted in the Government recognizing the importance of

mobilizing additional resources for the sector, and preparing the country CC readiness submission.

Guided by the priorities of the Roadmap, the UNICEF supported the scale-up of the cantonal Community-Led Total Sanitation (CLTS) approach, which resulted in an additional 617,271 people living in open defecation-free (ODF) villages, i.e. 129 per cent of the annual target; 2,182,214 people were reached cumulatively over the 2017–2022 period, i.e. 12.5 per cent of the total population of Chad and half of the initial 5-year CPD target. The ownership and commitment of local leaders, together with youth- and women-led associations, was a key driving force in achieving simultaneous outreach to multiple village catchment areas.

The integration of CLTS into community-based approaches was a breakthrough in 2022, with the roll-out of a multisectoral package of community-based services and essential family practices/SBC strategies (e.g. immunization, neonatal consultations, assisted delivery, BR and schooling) in child-friendly communities. This resulted in 74 additional villages with 34,269 people (including 18,648 women and adolescent girls) covered through this CLTS extension.

A step forward in ensuring sustainability of results was the support provided to the Ministry of Water and Sanitation to define the post-ODF certification, ensure greater engagement of the private sector in sanitation marketing and community monitoring of ODF status.

Goal area 5. Every child has access to inclusive social protection

CPD Social Inclusion Outcome - better use of knowledge on the situation of children in decision-making, and inclusive development policies and strategies with the participation of youth/adolescents.

CPD Programme Effectiveness Outcome - achieving quality programming standards.

Priority result 5: By the end of 2022, the Country Office, Field Offices, UNICEF-led Clusters and partners are prepared and equipped to respond effectively to emergencies and develop strategies for humanitarian-development nexus programming. Results achieved.

In 2022, UNICEF's focus on strengthening clusters (Nutrition, Education, WASH and Child Protection Area of Responsibility [AoR]), sub-clusters and working group coordination, and on building the capacity of UNICEF staff (including Field Offices) and partners in line with the revised CCCs resulted in the positive evaluation of the Cluster Coordination Performance Monitoring (CCPM) (above 80 per cent) for all three clusters and AoR. Moreover, UNICEF strengthened internal capacity for emergency preparedness and risk-informed programming, with support from WCARO, to achieve 100 per cent compliance score.

UNICEF mobilized US\$63.9 million emergency funding (in addition to US\$9.9 million of carry-over), securing 88 per cent of HAC funding, the highest level over the current 2017-2023 CPD period, enabling the scale-up of multi-sectoral emergency response in collaboration with Cluster partners to address the needs of 3 million children in 2022 (UNICEF covering the needs of 1 million children) with SAM treatment, access to health, HIV, WASH and education, protection services including from GBV, and cash support.

Youth engagement in emergency response exceeded expectations, with U-Reporters volunteering to assist flood-affected victims in N'Djamena, making the headlines of the local and international press and showcasing the change-maker role that they can play in their communities.

The highlight of emergency response in 2022 was the expansion of humanitarian cash transfers (HCTs) to assist over 7,867 affected households, within a nexus-focused approach, including the

participation of women and youth in design and roll-out.

All partners were trained and informed on accountability to affected populations (AAP) and reporting by affected communities, and 474,864 people were provided with access to APP to report their concerns. The same reporting mechanisms served as a channel for reporting on sexual exploitation and abuse cases.

Priority result 6: By the end of 2022, measures to improve staff's well-being and development are identified and duty of care was exercised. Results achieved.

Duty of care, an inclusive internal culture of communication, and staff development were key enablers and priorities in 2022. Opportunities were expanded to staff, with 14 per cent of staff participating in stretch assignments (i.e. 9 per cent of all WCAR stretch assignments), staff exchanges and 'surge' support, ranking third in WCAR in terms of volume of investment in staff development.

The relocation of the central office to the new premises resulted in better compliance with duty of care standards, including quality office space for each staff member, a canteen, a gym, a breastfeeding room, disability-friendly access to the premises (on the ground floor), more recreational areas to encourage team-building, and increased use of solar panel technology, improving the use of green energy in the office and increasing energy savings.

Priority result 7: By the end of 2022, the supply chain management of goods and services is strengthened to efficiently and effectively meet the needs of the regular and emergency programme. Results achieved.

In 2022, the volume of purchases for the programmes including procurement services, reached \$86.3 million, a 136 per cent increase from 2021, due to accelerated resource mobilization efforts and more agile and responsive supply operations.

The annual performance of the construction projects completed on time improved from 77 to 93 per cent, due to the strengthened processes that excluded non-performant suppliers while engaging new ones.

A Government-led assessment of the Ready-to-Use Therapeutic Food supply chain management was conducted. All key donors, including the Directorate-General for European Civil Protection and Humanitarian Aid Operations (ECHO), BHA/USAID, and the UK's Foreign Commonwealth and Development Office, were invited to join the steering committee and contribute to strengthening joint accountability for findings and recommendations aimed at addressing key bottlenecks in reaching rights-holders.

[13] MoH, November 2022.

UN Collaboration and Other Partnerships

Strengthening United Nations collaboration. Inter-agency work continued to prioritize support for the political transition process through six joint programmes in 2022, with UNICEF leading on strengthening the prevention of malnutrition, education and peace building, and the role of women and youth in peaceful coexistence. The joint UNFPA-UNICEF submission to the Peacebuilding Fund Youth Promotion Initiative was a winner among 28 projects approved globally. The WFP-UNICEF strategic partnership scaled up the continuum of care through coordinated fundraising. UNICEF pursued collaboration with UNFPA, WHO and UN Women on the Fonds Français Muskoka-funded initiative for maternal and child health.

Upscaling KRCs through partnerships. With the financial support from the US Government, UNICEF contributed to the recovery from COVID-19-induced learning losses through distance learning, assessments and remedial activities for secondary-school students (**KRC4**). The Global Partnership for Education, Swiss Cooperation, and Education Cannot Wait Fund enabled UNICEF to build and equip 393 classrooms (including latrines and water points) to provide education to out-of-school children (**KRC3**).

With World Bank support through the MoH, two agreements totalling over US\$ 23 million were signed for the procurement of COVID-19 vaccines (**KRC1**). With the Global Fund to Fight AIDS, Tuberculosis and Malaria, a 3-year agreement for 2022–2024 was signed with the MoH for over EUR7.7 million to support HIV prevention and treatment for children, adolescents and pregnant women. The partnership with the European Union is producing significant results in the scale-up of interoperability between the health system and civil registration centres (**KRC7**) to ensure that children are registered at birth. The response to unprecedented floods in 2022 enabled UNICEF to raise additional resources from the Central Emergency Response Fund (CERF) and BHA for WASH services and to further consolidate efforts for ending open defecation (**KRC8**).

Diversifying partnerships to close large SDG gaps. UNICEF expanded partnerships with non-traditional and emerging donors. The diversification of funding sources (World Bank, USAID/BHA at the global level) enabled UNICEF to secure 638,954 cartons of RUTF for SAM treatment up to December 2023 (**SDG2.2**).

UNICEF negotiated an unprecedented US\$44.1 million from the Islamic Development Bank to strengthen primary healthcare in three underserved provinces (**SDG3.2**).

Partnerships with telecommunication operators (AIRTEL and MOOV) enabled to reach 5 million subscribers nationwide on exclusive breastfeeding during the celebration of the 2022 World Breastfeeding Week (contributing results across **SDGs 1, 2, 3, 4, 5, 8, 10 and 12**[14]). The strategic partnership with Nutrition International ensured high coverage of integrated vitamin A supplementation and deworming.

Nurturing engagement. UNICEF maintained its engagement with in-country partners and locally-based donors (European Union, Germany, United States of America, Swiss Cooperation and World Bank) while strengthening interaction with Canada, Republic of Korea and Japan representations based in Cameroon, and global partnerships (Gavi, Global Fund, CERF, Global Partnership for Education, and ECW). Several donor missions (Sida, Global Affairs Canada, USAID/BHA and ECHO) enabled UNICEF to demonstrate how humanitarian, development and nexus-building interventions impacted beneficiaries with a view to sustaining the partnership framework in 2023.

[14] Breastfeed and Sustainable Development Goals. Factsheet. Breastfeeding and SDGs Messaging WBW2016 Shared.pdf (worldbreastfeedingweek.org)

Lessons Learned and Innovations

The lessons learned generated in 2022 from the current UNDAF, UNICEF CPD 2017–2021/ext.2023, KRC and other programmatic evaluations highlighted a number of key strategic shifts that the Office will be pursuing in 2023 as it prepares the transition to the new CPD 2024–2026 and revises its theory of change.

Lessons learned 1:

Synergy between the programme components is favoured when it is thought out from the design of the programme (CPD Evaluation).

To illustrate: KRC1: Integration of SBC strategies into the COVID-19 vaccination campaign allowed to raise awareness of over 6 million people, contributing to a ten-fold increase in vaccination coverage.

Strategic shift 1: Design and scale up integrated programming across a maximum of KRC to achieve synergy, cost-effectiveness and sustainability.

Lessons learned 2:

The implementation of the community-based approach promotes the engagement of communities in the uptake of basic social services/maintenance of infrastructure and the removal of access bottlenecks, especially for women and girls (CPD Evaluation) and the involvement and commitment of traditional leaders is a success factor for achieving rapid, at-scale results (KRC7 Evaluation and KRC8 Evaluation).

To illustrate:

KRC3&4: The training of 6,160 members of local school management committees (including women) on the importance of education (especially girls' education) and the management of school infrastructures (including latrines) to foster community engagement and accountability, enabled a local increase in education demand and quality.

KRC8: The involvement of community leaders as well as associations led by youth (including adolescent girls) and women in the cantonal-based scale-up of CLTS accelerated results in ending open defecation almost three-fold in 2021 and 2022 while promoting community dialogue and preventing conflict.

Strategic shift 2. Prioritize decentralized and community-based approaches, localization and community and youth engagement and accountability to rights-holders and communities, through the gender-transformative approach at the centre as a lever of sustainable change.

Lessons learned 3:

Inter-agency collaboration and collaboration with key actors allows for combined efforts and investments in advocacy to strengthen the capacities of national authorities for scale-up and avoidance of duplication of interventions (KRC7 Evaluation).

To illustrate: KRC7: Inter-agency UNICEF-UNHCR-UNDP collaboration resulted in the validation of the roadmap for accelerating universal BR in Chad. Furthermore, UNICEF-UNHCR collaboration enabled to provide birth certificates to 131,717 refugees and internally displaced people.

Strategic shift 3. Strengthen investment in priority KRCs by focusing on creating synergy with other agencies and partners for scale-up and innovative approaches for locally-owned solutions.

Lessons learned 4:

When interventions target both host communities and refugees/displaced populations, they are more conducive to peace and improve social cohesion and resilience-building (UNDAF Evaluation, CPD Evaluation).

To illustrate: The set-up of AAP in the internally displaced sites and refugee camps enabled 474,864 people to provide feedback on the humanitarian assistance required for both displaced and host households, reducing tensions between the two groups.

Strategic shift 4: Strengthen the triple nexus (humanitarian action-development-peace) programming

approach as the main entry point to ensuring sustainable and inclusive development.

Lessons learned 5:

Routine data collection enables the monitoring of indicators and the regular tracking of results (UNDAF Evaluation).

To illustrate: KRC7: As a result of routine data collection set up in 2021 by the Ministry of Territorial Administration with support from UNICEF, civil registration centres regularly collected and reported monthly data, which together with BR through the one-stop centres, led to a 4-percentage point increase in BR between 2021 and 2022.

Strategic shift 5: Reinforce UNICEF's technical assistance to strengthen statistical data systems and its advocacy role vis-à-vis the Government in monitoring the situation of children and fulfilling reporting obligations.

Lessons learned 6:

A good analysis of the environment (e.g. difference in the situation of rural and urban youth) in which interventions are implemented allows to address development challenges in a context-appropriate and transformative manner (PBF Evaluation).

To illustrate: The surveys conducted by UNICEF among 9,204 young people (24 per cent girls) in 2022 through U-Report to gather information on their differentiated needs and challenges enabled the Office to have critical information to continue adapting the CPD to the specific risks and vulnerabilities facing children.

Strategic shift 6. Strengthen the context-specific analysis and programming for adapted engagement of young people and adolescents, especially adolescent girls, as agents of change, including for the achievement of the KRC.

Lessons learned 7:

The root causes of the persistent humanitarian situation cannot be sustainably addressed in the context of limited access to basic services, environmental degradation and climate change, which exacerbate vulnerabilities, add pressure on services and resources, creating tensions and conflicts (Emergency Response Evaluation).

To illustrate: In 2022, UNICEF ensured nexus-focused programming to broaden access to basic social services while relying on CC-proofing and technology-driven and resilient infrastructure such as solar-panel-powered water systems.

Strategic shift 7. Strengthen systems by ensuring more sustainable and climate-resilient design and provision of basic social services.

As we move forward into the new CPD 2024–2026, the Office will be intensifying and scaling up its **innovations**, including: **distance learning** launched during COVID-19 in partnership with the Government and national NGO, which allowed to reach over 1 million school-age children (33 per cent) and is set to become a key strategy for the next Education Plan to fill the gaps in **KRC3 and KRC4**; **the human-centred design and interoperability** between health and BR with the integrated immunization and BR approach "Kulina Sawa", which has resulted in the vaccination of 13,729 zero-dose and dropout children, and the registration of 3,318 children despite the service delivery barriers initially identified in two pilot provinces, paving the way for greater synergy in the delivery of **KRC1 and KRC7**; **the one-stop digital BR platform** "Tasdjil", which has enabled the registration of 2,050 one-year-old children in a few months and is set to take BR results to national scale in no time; and the scaling up of **youth platforms**, including the **Super Banat group** for girls on reproductive health issues, the **young voices of the Sahel** on climate action, and the **U-Reporters**, the latter of which have crossed the 1 million milestone and positioned Chad among the top seven countries worldwide.