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United Nations Children's Fund Executive Board

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Country programme document

Senegal

Summary

The country programme document (CPD) for Senegal 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 \$33,900,000 from regular resources, subject to the availability of funds, and \$41,000,000 in other resources, subject to the availability of specific-purpose contributions, for the period 2019 to 2023.

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 2018.

* E/ICEF/2018/19. *Note*: The present document was processed in its entirety by UNICEF.





Programme rationale

1. The situation of children in Senegal has improved over the last decade, especially child survival. With an ambitious new national development plan, the Plan for an Emerging Senegal, in place since 2014, economic growth has surpassed 6 per cent, but the country still faces high unemployment, especially among youth, and persistent high poverty rates, estimated at 46.7 per cent in 2011. Every second household with children lives in poverty, with one third of children experiencing both monetary and multidimensional deprivations in basic social services. These challenges are compounded by population growth, estimated at 2.5 per cent annually. Children represent 48 per cent of the total population and one third of all children are under five years of age.

2. Senegal has made significant progress in child survival and development (CSD); between 2000 and 2016, the under-five mortality rate declined from 134 to 47 per 1,000 live births, thanks to better access to health services. Seventy per cent of children aged 12 to 23 months are fully immunized (Demographic and Health Survey (DHS), 2016), and malaria prevalence has been reduced from 17 to 4 per cent. The prevalence of stunting among children under-five decreased from 27 to 17 per cent between 2010 and 2016, although six of the country's 14 regions have rates above 25 per cent. The rate of mother-to-child transmission (MTCT) of HIV declined from 30 per cent in 2006 to an estimated 17 per cent in 2016. Access to safe water has improved significantly, with 80 per cent of households having access to an improved water source in 2016, and the rate of open defecation decreased from 38 per cent to 29 per cent between 2012 and 2016.

3. Nonetheless, challenges remain. Sixty-six per cent of children aged 6 to 59 months are anaemic and management of acute respiratory infections, diarrhoea and paediatric HIV are suboptimal. The maternal mortality ratio remains high at 315 per 100,000 live births (2015), as does the neonatal mortality rate, at 21 per 1,000 live births (2016). Causes include multiple pregnancies (fertility rate of 4.7), early pregnancies (affecting 15.6 per cent of girls 15 to 19 years old) and low rates of deliveries assisted by a skilled birth attendant (59 per cent) and post-natal care, with 41 per cent of newborns not receiving any post-natal care in 2016 (DHS). Access to improved sanitation remains low at only 51 per cent, with an almost two-fold difference between urban and rural areas.

4. Government budget allocations for health hover between 8 and 9 per cent of the total budget, far from the 2001 Abuja Declaration target of 15 per cent. Out-of-pocket costs represented 44 per cent of health expenditures in 2015. Although the Government introduced universal health-care coverage and provision of free health care for children under five in 2013, less than half the population was covered by health insurance in 2017.

5. Significant gaps persist in the quality of health care. Staff are inadequately trained and distributed unequally throughout the country, and despite recent improvements in the supply chain, stock-outs of essential medicines and commodities still occur. Families have difficulty accessing and utilizing services because of cost, distance and lack of knowledge and care-seeking behaviour in critical areas, such as treatment of common childhood infections, maternal health and child nutrition. Persistent gender inequalities and adverse sociocultural beliefs and practices, including late initiation of antenatal care and women's limited decision-making power, are also contributing factors.

6. Over 1.5 million school-age children were out of formal education in 2016, including a significant proportion of children enrolled in Qur'anic institutions, which operate largely outside the formal education system. Girls have better access to education at preschool and primary levels compared to young boys, who are often sent to the Qur'anic schools or to work. However, girls have a lower rate of transition to secondary education due to gender- and school-based violence and discrimination, including early marriage and pregnancy. Pre-primary enrolment is low at 17 per cent, with significant income and regional disparities. Only about 62 per cent of children complete the primary education cycle, with an increase of merely three percentage points over the last decade; however, only 37 per cent complete a full cycle of basic education.

7. While absorbing one fourth of the national budget, the education sector faces the challenge of meeting high demand for quality education against a background of constrained governance systems, imbalances in allocation of resources between national and decentralized budgets, poor learning outcomes and low achievement rates. In 2014, only 54 and 59 per cent of children met the minimum thresholds for reading and mathematics, respectively, at the end of primary school. Contributing factors are the shortage, inequitable distribution and low retention of qualified teachers, and curricula and programmes that do not always address adequately local values, needs and contexts.

8. The Government adopted the National Child Protection Strategy in 2013; however, the sector faces persistent challenges. The birth registration rate has stagnated at 70 per cent since 2012, and there is no national civil registration plan. Child begging, including its child trafficking dimensions, has become a national issue; in 2014, an estimated 30,000 children, mostly boys, were begging daily in the streets of Dakar. An estimated 14 per cent of girls under 15 have undergone female genital mutilation/cutting (FGM/C) and, in 2016, 31.5 per cent of women 20 to 24 years old were married by age 18.

9. Violence against children is widespread, although not documented consistently. Major bottlenecks to improving the protection of children include persistent harmful social and gender norms. Other factors are insufficient access to protection services, coupled with their low quality and inequitable distribution; lack of resources for the sector; poor law enforcement; and absence of a routine information management system, as noted in the 2016 concluding observations of the Committee on the Rights of the Child on the State party report of Senegal.

10. The 2016 gender assessment of the country programme showed important gender inequalities and interlinkages between school dropout, child marriage, early pregnancy and other harmful practices affecting girls, such as FGM/C. Adolescents, especially girls, have limited access to life-skills education, reproductive health services, proper menstrual hygiene or information about HIV prevention. Harmful social norms and women's lower status contribute to maintaining negative behaviours towards women and children, including violence against women.

11. The Government has made important advances in social protection. A secondgeneration Social Protection Strategy, approved in 2017, is expected to improve coverage for various groups, with the ultimate aim of a minimal social protection floor. Coverage has also increased, with the Government introducing a national common registry to better target social assistance and, since 2013, a national flagship cash transfer scheme, currently reaching 22 per cent (350,000) of all households, which aims to improve education, vaccination and birth registration. While the Plan for an Emerging Senegal, now in its second phase, will continue its strong focus on social protection and human capital development, structural changes in the social sectors are needed, with adequate and sustainable financing, and more inclusive economic growth that enables sustained reduction of poverty and inequality and meets the strong demand for social services.

12. Senegal is prone to chronic and seasonal vulnerabilities, mostly due to climate change. Drought affects the northern, central and eastern regions, causing food and nutritional insecurity, putting young children and pregnant/lactating women at risk of acute malnutrition. Flooding is more prevalent in the urban areas of the western and central regions during the rainy season: at least 150,000 people are at risk of being affected by flooding every year and 20,000 at risk of epidemics.

13. Past cooperation has shown the importance of investing in data and information systems within different sectors. Under the previous country programme, 2014–2018, the health sector benefited from significant investments in data collection through regular household surveys, supported by UNICEF and other partners, which generated data for monitoring of progress and review of strategies and result-oriented programmes at all levels.

14. In recent years, intersectoral approaches have shown promising results. These include water, sanitation and hygiene (WASH) interventions in nutrition programmes, birth registration as part of maternal and child health services, and child protection in schools. If multisectoral or integrated approaches are to be scaled up, sectoral roles have to be clarified and guidance included in national policies and strategic plans.

15. The new country programme will capitalize on lessons learned through more systematic use of data, knowledge and evaluation findings to deliver results for children. It will strengthen integrated approaches, with a focus on early childhood development (ECD), and actively pursue UNICEF regional key results for children in relation to immunization, stunting, open defecation, birth registration, prevention of violence and access to education. These combined interventions will be implemented and closely monitored in the five regions of Kaffrine, Kedougou, Kolda, Sedhiou and Tambacounda, which have the overall lowest child indicators.

16. UNICEF will increase attention towards the second decade of life, focused on preventive health-care services, menstrual hygiene management, treatment of anaemia and malnutrition in girls, girls' transition to secondary schooling, girls' skills development and management of risks, such as early marriage, violence, early pregnancies or HIV, as well as youth engagement and participation. UNICEF will implement this package of interventions in the regions of Kolda and Tambacounda, and in a peri-urban department of Dakar, to ensure adequate quality implementation.

17. The programme will use the comparative advantage of the UNICEF integrated approach to child development, strategic sectoral partnerships and convening power, experience of interventions at subnational levels and policy dialogue to develop innovative models and leverage support for scaling up through four components: CSD; early learning and quality basic education; child protection; and equity, governance and social policies.

Programme priorities and partnerships

18. The UNICEF country programme is anchored in two of the three axes of the Plan for an Emerging Senegal: (a) human capital, social protection and sustainable development; and (b) governance, institutions, peace and security. The programme is aligned with the UNICEF Strategic Plan, 2018–2021 and will contribute to four of

the seven outcomes of the United Nations Development Assistance Framework (UNDAF), 2018–2021. It will give special consideration to strengthening United Nations coherence, in particular through operationalization of the common chapter of the UNICEF Strategic Plan as relevant to national priorities.

19. The country programme will support the Government in providing all children, especially the most vulnerable, access to quality basic social services and social protection in order to develop their full potential to participate actively in society.

20. The underlying assumptions are that institutions will adhere to and implement a more integrated, equitable approach to the delivery of quality services, and that the Government will ensure the enforcement of the laws regarding children's rights. Another important assumption is that economic growth will continue for the next five years, but will be more inclusive and thereby propel the sustained reduction of poverty and inequality.

Child survival and development

21. This component will support interventions in health, HIV/AIDS, nutrition, WASH and ECD, and reinforce integration and multisectoral collaboration that contribute to women's health and the survival and development of newborns, children, adolescents, girls and boys, in particular the most disadvantaged, with integrated intervention packages defined by age group.

22. UNICEF will contribute to evidence generation and provide policy support to the development of the next national Health Development Plan, 2019–2028 and its implementation. This will include strengthening the District Health Information System (DHIS) and child-sensitive programme budgeting to increase universal health coverage in line with the Health Financing Strategy. The programme will advocate for progressive increases of national budget lines to cover procurement of essential commodities and will support strengthened supply-chain management. The programme will build on the Reproductive Maternal, Newborn, Child and Adolescent Health Plan, 2016–2020 to support national and regional-level planning and capacity enhancement to improve the quality of high-impact interventions, utilization of services and adoption of healthy behaviours, focused on neonatal health and standards-setting.

23. The programme will further increase the high rate of immunization coverage, focused on equity and sustainability, using immunization as an entry point for other interventions such as birth registration. In line with the National HIV Strategic Plan, UNICEF will support integration of the prevention of MTCT and paediatric HIV care programmes at subdistrict level and the introduction of innovative point-of-care for early infant HIV diagnosis towards elimination of paediatric HIV and AIDS.

24. In the context of regional efforts to reduce stunting and the National Multisectoral Nutrition Strategy, 2018–2022, the programme will support improved access to and utilization of high-impact nutrition interventions by children under five, adolescents, and pregnant and lactating women, and promote optimal nutrition behaviours, focused on the first 1,000 days of life. It will support management of severe acute malnutrition. Health and nutrition structures will be strengthened to expand the coverage and quality of integrated ECD interventions.

25. The WASH subcomponent will strengthen institutional capacity to create a favourable environment for innovative financing and the strengthening of coordination and monitoring mechanisms for sanitation and water quality, in order to

support the use of equitable, gender-responsive, sustainable WASH services by children, adolescents and women. The Community-Led Total Sanitation strategy will be implemented in selected regions, with a particular focus on hand-washing with soap and ending open defecation, and will integrate menstrual hygiene management for women and girls in communities and schools.

26. Communication for development (C4D) will promote the adoption of positive family practices and social norms in favour of ECD and adolescent and women's health at the community level. Efforts will emphasize dialogue and participatory methods to increase the engagement and ownership of individuals, families and communities seeking and using services so they can find sustainable local solutions.

27. UNICEF will work with the Ministry of Health and Social Action, the Ministry of Hydraulics and Sanitation, the Ministry of National Education, the National Committee for the Fight against Malnutrition, the Joint United Nations Programme on HIV/AIDS (UNAIDS), the United Nations Population Fund, the World Food Programme (WFP), the World Health Organization (WHO), the World Bank, bilateral partners, particularly the French Development Agency (AFD), the Government of Italy and the United States Agency for International Development (USAID), and civil society and communities.

Early learning and quality basic education

28. This component will support national efforts to implement the Education Sector Plan, which envisions significant reforms, including ensuring that all children participate in at least one year of pre-primary education, and introduces a 10-year basic education cycle that is more inclusive and fosters improved learning outcomes for all children.

29. In collaboration with the Ministry of National Education, line ministries, authorities at subnational level and local communities, including Qur'anic institutions, the programme will support the development of innovative models to facilitate the reinsertion of out-of-school children in education programmes in underserved and poor-performing regions. The programme will support girls' transition to lower secondary education and help address the bottlenecks impeding effective participation and learning of girls and boys, focused on violence prevention, reducing opportunity costs and promoting positive social norms and gender-sensitive school environments in collaboration with the Government of Canada. To enhance learning outcomes, the programme will support the review and implementation of teaching and learning standards, strengthen teachers' management strategies and facilitate learners' acquisition of foundational skills, particularly in early grades, in collaboration with USAID.

30. The programme will strengthen management, planning and monitoring capacities, from national and decentralized authorities to school management bodies, particularly through enhanced information systems and standard-setting interventions, to improve school performance and mainstream accountability throughout the education sector. Partnerships will be critical to improve sector governance, including with AFD and the United Nations Educational, Scientific and Cultural Organization (UNESCO), in order to strengthen the Education Management Information System and introduce innovative tools. UNICEF will continue to support sector coordination and education sector planning processes, and emphasize partnerships, including with civil society, for evidence generation and advocacy, and to generate demand where participation is low.

Child protection

31. The programme will focus on building a protective environment for children, in particular girls, against violence, abuse and harmful practices, and on promoting birth registration. In its efforts to address key determinants, UNICEF will support strategic interventions, including: (a) evidence generation; (b) strengthening routine information systems; (c) communication for behavioural and social change, including community mobilization to promote positive social norms and help break the silence on harmful practices; (d) advocacy for child protection mainstreaming in policy development and implementation; (e) building capacities for delivery of quality protection services to child victims of violence and abuse in selected areas of intervention; and (f) building partnerships between the civil registry and the health and education sectors. UNICEF will focus on strengthening national coordination, planning, budgeting and monitoring capacities, and consolidating sectoral commitments and policies for child protection, along with multisectoral coordination mechanisms. Innovations such as the Rapid Pro open-source platform for information sharing will strengthen monitoring, reporting and advocacy.

32. The programme will work with the Ministry of Good Governance and Child Protection, sectoral ministries in charge of key services that contribute to protection (justice, health and social welfare, education, civil registration, juvenile justice), and local authorities, including district-level child protection committees and civil society organizations. It will engage with UNFPA and the United Nations Entity for Gender Equality and the Empowerment of Women (UN-Women) on harmful practices against girls, UNESCO on violence in schools, the United Nations Office on Drugs and Crime (UNODC) and Office of the United Nations High Commissioner for Human Rights (OHCHR) on child begging, the Spanish Agency for International Development Cooperation, the African Union and the European Union on civil registry and vital statistics, and bilateral and multilateral partners and international non-governmental organizations (NGOs).

Equity, governance and social policies

33. This component aims to contribute to reducing poverty, vulnerability and inequity in access to basic social services for children and adolescents. It will focus on improving coverage and quality of social protection for children, in support of the national safety net system and cash transfer programme for the extremely poor; bolstering monitoring and evaluation of the impact and performance of public policies and resources for children in order to advocate for better efficiency and effectiveness of public spending and to promote innovative financing mechanisms for the social sectors; and ensuring that the decentralization reform initiated in 2014 meets the needs of children through local plans and budgets. Key to success will be partnerships with the International Monetary Fund, the World Bank and the European Union.

34. UNICEF will support the Ministry of Economy, Finance and Planning and line ministries in building capacity for improved programme-based budgeting in favour of children and adolescents, especially in social protection, health, education and child protection, and in support of public finance reform. UNICEF will work jointly with the United Nations system to help the Government set up the Sustainable Development Goals monitoring system.

35. This component will promote the empowerment of adolescent boys and girls as actors in inclusive socioeconomic development by fostering gender equality and the

environmental sustainability of their communities through increased participation in local-decision-making, skills development for employability and greater civil engagement. UNICEF will reinforce strategic partnerships with USAID, the World Bank and NGOs in support of child and adolescent-centred decentralization reforms.

Programme effectiveness

36. This cross-sectoral component will ensure that the country programme is implemented effectively and coherently to reach the most vulnerable children and adolescents. It will comprise planning, monitoring, risk management, multisectoral and intersectoral coordination (focused on gender, ECD, adolescents and disability programming). Enhanced supply and budget management, resource mobilization and emergency preparedness will support programme effectiveness. The principles of human rights, equity, gender equality, sustainability and resilience will be respected throughout the country programme.

37. External communication, advocacy and C4D will promote building of alliances and strategic partnerships with all duty bearers at community, local, regional and national levels to promote social change, especially on gender norms, and create opportunities for external audiences to support the cause of children. The programme will support the engagement of the most marginalized children and adolescents so they can develop the skills to understand issues affecting their communities, have their voices heard on public platforms and take transformative action to drive positive change.

	(In thousands of United States dollars)				
Programme component	Regular resources	Other resources	Total		
Child survival and development	9 000	15 000	24 000		
Early learning and quality basic education	6 000	12 500	18 500		
Child protection	6 500	10 500	17 000		
Equity, governance and social policies	6 500	2 500	9 000		
Programme effectiveness	5 900	500	6 400		
Total	33 900	41 000	74 900		

Summary budget table

Programme and risk management

38. The country programme workplans and associated indicators will be aligned closely to the joint United Nations workplans and the national priority action plans, and with the national coordinating mechanism for the Plan for an Emerging Senegal, including through general and sectoral joint reviews. Within the UNDAF programme management team, UNICEF will chair the results group on basic social services and social protection. This alignment will reinforce joint planning, implementation and resource mobilization in support of key development priorities.

39. Among the critical risks are the potential inability to respond to continued pressure for the provision of quality social services in a context of constant population

growth, underresourced decentralization reform and the slow pace of institutional and legal reforms. UNICEF will manage these risks through strong partnerships with government bodies, civil society and other United Nations organizations working on the demographic dividend, human rights and governance.

40. Another area of risk is related to inadequate coherence and coordination in the area of child rights, with many actors competing for resources. Key to mitigating this risk are multisectoral approaches and integrated/joint work planning and implementation with major stakeholders and partners, including within regional and subregional initiatives and alliances.

41. A challenging aid coordination environment and insufficient financial resources could hinder programme outcomes. UNICEF will work with other development partners to mobilize resources for children and to support the Government by monitoring official development assistance, identifying fiscal space, improving efficiency of spending and supporting innovative financing.

42. UNICEF will use early warning mechanisms to monitor and adequately prepare services and communities to manage climate change and human-induced risks. It will strengthen the capacities of national institutions to establish surveillance and alert systems, especially on WASH and nutrition, and resilience and risk reduction systems at community level, by repositioning supplies and ensuring access to financing mechanisms to quickly respond to any disruption of services. UNICEF will set up mechanisms to monitor changes and review risks throughout the programme cycle, and will enhance partnerships through the recalibrated United Nations Integrated Strategy for the Sahel and strengthening of the humanitarian/development nexus.

43. In order to enhance programme quality, efficiency and effectiveness, the country office will strengthen its programme implementation monitoring system, including the harmonized approach to cash transfers quality assurance system. The zonal office in Kolda will play a critical role in programme monitoring within regions of UNICEF focus to ensure quality programme implementation.

44. This country programme document outlines 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 the country level. Accountabilities of managers at the country, regional and headquarters levels with respect to country programmes are prescribed in the organization's programme and operations policies and procedures.

Monitoring and evaluation

45. The programme period will see important strengthening of the monitoring and evaluation function within the United Nations country team under the UNDAF through the task force on the Sustainable Development Goals and the monitoring and evaluation group. Joint efforts will support the Government to enhance national statistical capacities for data collection, monitoring, reporting and analysis for decision-making, and strengthen the harmonized framework for monitoring and evaluation of the national development goals.

46. Another major shift will take place in sectoral data collection, analysis and reporting through greater attention to local data platforms and use of technology for real-time integrated data collection, including in emergencies, to allow better monitoring and analysis of the situation of children for decision-making.

47. UNICEF will contribute to strengthening capacity for collection, analysis and reporting of administrative data, from local to national level, and the production of disaggregated statistical data by line ministries, to improve planning and budget programming. It will provide continued support to major national surveys, such as the DHS, through planning and analysis of survey data. Special needs assessments will help inform programming for most-at-risk groups, especially adolescent girls or children with disabilities.

48. UNICEF will conduct major evaluations jointly with other development partners to inform ongoing and future policies and programmes, and it will focus on evaluating the impacts for disadvantaged children and equity outcomes from: (a) the integrated approach to ECD; (b) UNICEF support to the implementation of the National Education Sector Plan; (c) the contribution of the child protection programme to strengthening the national child protection system; and (d) UNICEF interventions in support of adolescent empowerment and employability.

Annex

Results and resources framework

Senegal – UNICEF country programme of cooperation, 2019–2023

Convention on the Rights of the Child: Articles 2, 3, 5–11, 13, 17–32, 34.

National priorities: Sustainable Development Goals 1, 2–6, 10, 11, 13, 17.

Emerging Senegal Plan, 2035: 2. Human capital, social protection and sustainable development; 3. Governance, institutions, peace and security.

Draft UNDAF outcomes involving UNICEF:

4. By 2023, institutions in charge of education and training implement policies in an effective and efficient manner to ensure that the most vulnerable children and populations have access to provisions of quality education and training services.

5. By 2023, the most vulnerable populations have better access to integrated quality services in health, nutrition, water, hygiene and sanitation.

6. By 2023, the most vulnerable populations benefit from improved social protection and protection against violence and harmful and discriminatory practices.

7. By 2023, national and local institutions improve quality and equity in the provision of public services for the promotion of peace, security and the effectiveness of governance.

Outcome indicators measuring change that reflect UNICEF contribution:

4.1. Number of education and training strategies implemented targeting children, adolescents and youths;

4.2. Proportion of education and training institutions implementing education and training programmes and curricula better adapted to the expectations of target audiences, and sustainable development needs;

4.3. Number of innovative initiatives and models, including in health, education and school feeding, integrated into the national education policy and implemented;

4.4. Primary school completion rate.

5.3. Percentage of children receiving first measles-containing vaccine at national level;

5.4. Prevalence rate of chronic malnutrition of children under 5;

5.5. Access rate to sanitation (urban, rural);

5.6. Antiretroviral coverage rate per target group living with HIV (including pregnant women and children).

6.1. Percentage of individuals who received transfers and services through priority social protection programmes/floor;

6.2. Proportion of population covered by health insurance programmes, maternity benefits, old-age pensions and insurance against accidents at work;

6.3. Proportion of men and women who wish to abandon the practice of FGM/C;

6.4. Number of victims of violence and abuse/harmful practices having access to a health service, social service, psychosocial assistance or a judicial service;

6.5. Texts at national level harmonized or adopted in accordance with the international conventions signed and ratified by Senegal.

7.4. Percentage of children under five having their birth registered at the civil registry;

7.5. Percentage of regions with integrated system for collecting, processing and disseminating territorial information.

Related UNICEF Strategic Plan, 2018–2021 Goal Areas: 1. Every child survives and thrives; 2. Every child learns; 3. Every child is protected from violence and exploitation; 4. Every child lives in a safe and clean environment; and 5. Every child has an equitable chance in life.

UNICEF outcomes ¹	Key progress indicators, baselines ² (B) and targets (T)	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	program resources (H		
1. Women and newborns, children under 10 and adolescents make optimal use of quality, adapted health, nutrition, WASH and HIV/AIDS services, and a package of interventions for integrated ECD.Percentage of children under five who are stunted 	five who are stunted (national/intervention regions). B: 17% T: 13% Percentage of children < 1 year receiving measles-containing vaccine (national/rural/urban). B: 80.6% (rural 78.4%, urban 85.5%) T: 90% (rural and urban) Percentage of children receiving early stimulation and responsive care from parents/caregivers (targeted areas). B: (data available in 2019) T: TBD Proportion of the population practicing open defecation in rural areas (national/intervention regions) B: 29% T: 16%	DHS DHS, DHIS2 DHS DHS	 1.1. The national and institutional capacities of the health, nutrition and WASH sectors are strengthened in terms of enabling environment, results-based management, gender and equity. 1.2. Health facilities are strengthened to provide quality integrated services for pregnant and breastfeeding women, newborns, children and adolescents, including in emergencies. 1.3. Mothers, children, families, communities, including the most vulnerable, and social change stakeholders take ownership of the integrated and quality package of community-based interventions for ECD and survival. 1.4. Health services, HIV/AIDS, nutrition and adapted WASH are accessible to adolescents, especially the most vulnerable. 	Ministry of Health and Social Action, Ministry of Hydraulics and Sanitation, National Committee for the Fight against Malnutrition, UNAIDS, UNFPA, WFP, WHO, the World Bank AFD, Government of Italy, USAID NGOs	9 000	15 000	24 000
	living with HIV who receive antiretroviral treatment for prevention of MTCT. B: 55%	DHS					
2. Children of school- going age (3 to 16 years), particularly the most vulnerable, have access to quality education services and complete a full cycle	Gross enrolment ratio in pre- primary education (national/ target areas). B: 17.5% (boys: 16.3%; girls: 18.7%) T: 40% (boys and girls: 40%)	Administrative data	2.1. Public schools provide a learning environment that is conducive to children's holistic development, and implement interventions that support the enrolment, inclusion, retention and	Ministry of National Education, and Ministry of Good Governance and Child Protection.	6 000	12 500	18 500

¹ All outcomes by end 2023.
 ² All values are at national level unless specified.

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	Key progress indicators, baselines ² (B)			Major partners,	Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)		
UNICEF outcomes ¹	and targets (T)	Means of verification	Indicative country programme outputs	partnership frameworks	RR	OR	Total
improved learning outcomes. B: 61. 68.8% T: 744 Rate o of prin schoo areas) B: 39 T: 204 Nation end of (natio B: 56. 54.6%	Primary education completion rate (national/target areas). B: 61.8% (boys: 55.2%; girls: 68.8%): T: 74% (boys: 68%; girls: 79%)	Administrative data	reinsertion of the most vulnerable children. 2.2. The quality of education delivered through public schools is enhanced through improved teaching and learning, the development of more diversified pathways in the formal education system and the implementation of robust learning and competency standards inclusive of life skills. 2.3. Planning and management capacities of national and decentralized entities, including school communities, are strengthened to improve schools' performance and resilience, mainstream accountability across the education sector and transform resources into greater results for schools, learning outcomes and most vulnerable children.	UNESCO, WFP. AFD, USAID, the World Bank, Global Partnership for Education, Government of Canada, NGOs.			
	Rate of out-of-school children of primary and lower secondary school age (national/target areas). B: 39% T: 20%	DHS					
	National exam pass rates at the end of primary education (national / target areas). B: 56.7% (boys: 59.4%; girls: 54.6%) T: 75% (boys and girls)	Administrative data					
youth, particularly girls, in targeted areas at risk are better protected through quality child protection system. Numb have e reache or just servic B: 2,0 T: 12, Propo five w	Percentage of women and men who believe that FGM/C should be eliminated (target areas). B: Women 15–49: 80.1%; men 15–49: 79.7% T: 85% (men and women)	DHS	 3.1. Community, parents, children and youth (girls and boys) have improved competencies to prevent and respond to violence, abuse and harmful practices. 3.2. Social welfare, health, education and justice workers have increased capacities to prevent, detect and respond to risk of violence, abuse and harmful practices. 3.3. Authorities at central and decentralized levels have increased capacities to implement strategies and policies on child protection. 	Ministry of: Good Governance and Child Protection; Justice; Health and Social Welfare; Women's Affairs, Family Affairs and Gender; and National Education. National Centre of Civil Registration, OHCHR, UNESCO, UNFPA, UNODC, UN- Women. European Union, Government of	6 500	10 500	17 000
	Number of girls and boys who have experienced violence reached by health, social work or justice/law enforcement services. B: 2,000 T: 12,000	Administrative data					
	Proportion of children under five whose births are registered with a civil authority.	DHS					

UNICEF outcomes ¹	Key progress indicators, baselines ² (B)			Major partners,	Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)		
	and targets (T)	Means of verification	Indicative country programme outputs	partnership frameworks	RR	OR	Total
	B: between 42% and 70% in targeted regions T: Increase of 10 percentage points in each targeted region		3.4. Parents, communities and civil registration, health and education professionals in targeted areas have increased capacities to register births.	Canada, France and Spain. NGOs			
families, children and adolescents (boys and girls) benefit from a gradual increase in social protection coverage and equity of access to basic social services in their communities and opportunities for empowerment and development.social protection systems. B: 1.2 million T: 1.7 millionShare of public spending on health, education and/or social protection. B: 30% T: 35%Share of adolescent girls and Distribution	B: 1.2 million	DHS	 4.1. Institutional and local actors have enhanced capacity to target, plan, and use data in monitoring and evaluation of policies, programmes and resources for the Sustainable Development Goals. 4.2. Institutional and local actors have improved capacity to gradually increase social protection for poor and vulnerable children in a performance, accountability and risk-informed framework, in rural and urban areas. 4.3. Local development actors have strengthened capacity to create a supportive environment for adolescents and youth to build competencies, employability, civic engagement and local environment skills. 	Ministry of Economy, Finance and Planning; Ministry of Territorial	6 500	2 500	9 000
	health, education and/or social protection. B: 30%	Public finance law		Governance, Development and Land Planning. National Agency of Statistics and Demography; National Social Protection Agency. African			
	B: 560	National territorial observatory					
				Development Bank; International Monetary Fund; USAID; World Bank; European Union.			
				NGOs, universities.			
is implemented in a more effective and integrated way, supported by broader participation of all stakeholders for the rights of the child. B: 0.83 (May 20 T: >0.8 Number of users UNICEF Senega social media cha number of video B: 245,000 webs	Office performance index. B: 0.83 (May 2018) T: >0.8	Performance scorecard	5.1. The country programme is designed and implemented efficiently, effectively and sustainably.5.2. Effective communication, advocacy and partnerships for social and behavioural change and community engagement for children support the programme.	United Nations system.	5 900	500	6 400
	Number of users of the UNICEF Senegal website and social media channels, and number of video viewers. B: 245,000 website and social media users; 11,000 video viewers	Social media metrics		Ministry of Youth, Citizen Formation and Promotion of Volunteering Activity; Ministry of Communication.			

UNICEF outcomes ¹	Key progress indicators, baselines ² (B) and targets (T)	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	program resources (K	Indicative resources by country programme outcome: regular resources (RR), other resources (OR) In thousands of United States dollars RR OR Total	
	T: 1,000,000 website and social media users; 200,000 video viewers			Parliament NGOs; Media.			
	Number of evidence-based sectoral strategic communication plans developed and implemented. B: 7 developed T: 15 implemented	Reports, evaluations					
Total resources					33 900	41 000	74 900