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SENEGAL COUNTRY DEVELOPMENT COOPERATION STRATEGY

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# ACRONYMS

Abbreviations and acronyms have been kept to a minimum in the text of this document. Where abbreviations or acronyms have been used, they are accompanied by their full expression the first time they appear, unless they are commonly used and generally understood abbreviations such as NGO, kg., etc. However, in order to facilitate understanding of the acronyms used, a complete list is included here.

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Full Expression</th>
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<tbody>
<tr>
<td>AIDS</td>
<td>Acquired Immuno-Deficiency Syndrome</td>
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<tr>
<td>ANSD</td>
<td>National Agency for Statistics and Demography</td>
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<td>CAADP</td>
<td>Comprehensive Africa Agriculture Development Programme</td>
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<td>CDC</td>
<td>Centers for Disease Control and Prevention</td>
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<td>CDCS</td>
<td>Country Development Cooperation Strategy</td>
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<td>CIP</td>
<td>Country Investment Plan for Agriculture</td>
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<td>DCA</td>
<td>Development Credit Authority</td>
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<td>DHAPP</td>
<td>Department of Defense HIV/AIDS Prevention Program</td>
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<td>DHS</td>
<td>Demographic and Health Survey</td>
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<td>DLI</td>
<td>Development Leadership Initiative</td>
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<td>DO</td>
<td>Development Objective</td>
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<td>DRG</td>
<td>Democracy, Human Rights, and Governance</td>
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<td>ECOWAS</td>
<td>Economic Community of West African States</td>
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<td>FSN</td>
<td>Foreign Service National</td>
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<td>FTF</td>
<td>Feed the Future</td>
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<td>GCC</td>
<td>Global Climate Change</td>
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<td>GDP</td>
<td>Gross Domestic Product</td>
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<td>GHI</td>
<td>Global Health Initiative</td>
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<td>GOS</td>
<td>Government of Senegal</td>
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<td>HDI</td>
<td>Human Development Index</td>
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<td>HIV</td>
<td>Human Immuno-deficiency Virus</td>
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<td>HMIS</td>
<td>Health Management Information System</td>
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<td>HSS</td>
<td>Health System Strengthening</td>
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<td>ICASS</td>
<td>International Cooperative Administrative Support Services</td>
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<td>IMF</td>
<td>International Monetary Fund</td>
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<td>IR</td>
<td>Intermediate Result</td>
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<td>JICA</td>
<td>Japan International Cooperation Agency</td>
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<td>LCD</td>
<td>Local Capacity Development</td>
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<td>M&amp;E</td>
<td>Monitoring and Evaluation</td>
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<td>MDG</td>
<td>Millennium Development Goal</td>
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<td>MCC</td>
<td>Millennium Challenge Corporation</td>
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<td>MOH</td>
<td>Ministry of Health</td>
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<td>MW</td>
<td>Megawatt</td>
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<td>NEC</td>
<td>New Embassy Compound</td>
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<td>NGO</td>
<td>Non-Governmental Organization</td>
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<td>OE</td>
<td>Operating Expense</td>
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<td>OFNAC</td>
<td>Office national de la lutte contre la fraude et la corruption</td>
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<td>PEPFAR</td>
<td>President’s Emergency Plan for AIDS Relief</td>
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<td>President’s Malaria Initiative</td>
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<td>PMP</td>
<td>Performance Management Plans</td>
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<td>Senegal Health Development Plan</td>
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<td>PPR</td>
<td>Performance Plan and Report</td>
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PRACAS: Accelerated Program for Senegalese Agriculture
PSE: Plan Sénégal Emergent
QDDR: Quadrennial Diplomacy and Development Review
UN: United Nations
USAID: United States Agency for International Development
USDA: United States Department of Agriculture
USDH: U.S. Direct Hire
USG: United States Government
USGS: United States Geological Survey
1. DEVELOPMENT CONTEXT, CHALLENGES AND OPPORTUNITIES

This Update to the USAID/Senegal CDCS documents changes in the Senegalese administration following 2012 presidential elections and aligns with Mission project design efforts. While fundamental development conditions and priorities in Senegal have not changed, Senegal has seen an improved enabling environment, evidenced by broader commitment to private sector-led growth, improved transparency and accountability, and quality Senegalese leadership in key sectors of USAID intervention. In addition, this Update incorporates new Agency initiatives and strategies, such as YALI, Global Health Security, Education, and Global Climate Change. The CDCS Update describes how USAID/Senegal programs focus on the poorest, highest need regions of Senegal, such as the marginalized southern Casamance region and the remote eastern corridor of the country. USAID/Senegal has increased its efforts to promote synergy across its sectors of intervention in targeted regions, in addition to integrated good governance principles across the entire foreign assistance portfolio. Finally, this Update reflects lessons learned by USAID/Senegal in recent years in strengthening and using local systems, including the use of government-to-government assistance and direct funding to local organizations.

Since independence from France in 1960, Senegal has evolved both politically and socially. Although the nation began as a highly centralized one-party state, the country is now firmly anchored in multi-party rule that counts more than 200 political parties. A diverse and vocal civil society, coupled with a culture of political engagement, promotes Government of Senegal (GOS) accountability. The press is considered to be free and there is a national Press Code that outlines the rights of journalists. In 2012, Senegalese citizens exerted their political might and ushered in a new era in the country’s political history. Macky Sall’s ascendance to the presidency has been marked by a commitment to economic development via a package of projects and reforms known as the Plan Sénégal Emergent (PSE). Presented in February 2014 to development partners, the PSE received widespread acclaim from technical and financial partners including the United States Agency for International Development (USAID), the International Monetary Fund (IMF) and European Union (EU) member states for its emphasis on reforms, including deficit reduction, public works, and investments in health and education.

Even with significant gains, social services access and quality within Senegal remains challenging. Despite near universal primary school enrollment, the quality of education remains low; illiteracy remains high and a low percentage of children complete basic education. Similarly, quality health care services are inaccessible for many Senegalese in rural and periurban areas. The degradation of the natural resources base, aggravated by human impact and the effects of climate change, is also among the country’s key challenges. The energy sector, burdened by aging equipment, has been unable to keep up with the increased demand. In addition, the 35 year-old Casamance conflict in southern Senegal continues to fester. Furthermore, Senegal’s regional context is not without challenges. Since 2010, the West African region has seen the evolution of Islamist extremism in Mali and the rise of the Boko Haram in Northern Nigeria. These problems are further complicated by the outbreak of Ebola in Sierra Leone, Liberia and neighboring Guinea in 2014.

However, Senegal, and specifically Dakar, is increasingly viewed among international businesses, international NGOs and to some extent foreign governments, as the political and commercial hub of West Africa. For its part, the government of President Sall has taken steps to reinforce this idea via several large-scale public works projects. In particular, the Autonomous Port of Dakar is undergoing
major renovations to make it more suitable for ever-increasing trade with Europe, and completion of the Blaise Diagne Airport, currently under construction, is set for the latter half of 2015.

Economic situation

Over the past 25 years the Senegalese have benefitted from positive economic growth. According to the World Bank, the poverty rate—the number of individuals earning $1.25 a day or less—stood at 66 percent in 1990 and 30 percent in 2010. Despite being tempered by slow GDP growth in 2009, estimates of Senegal’s 2014 GDP project growth surpass 4.5 percent for the year (see Figure 1). Likewise, Senegal’s overall productivity has increased within the same time frame.

Reasons for Senegal’s robust growth rate in 2014 include low energy prices due to an international drop in the price of oil. This, in fact, led the GOS to cut subsidies for gasoline and butane by up to 50 percent in early 2015. The adoption of this cut to subsidies may resolve some market inefficiencies in the long-term. Furthermore, a strong 2013 performance in the tertiary sector, and in particular telecommunications, laid the foundation for 2014 growth by contributing the largest share to the country’s GDP at a little over 51 percent. The secondary sector, comprising of industrial and manufacturing production, followed at 33 percent of GDP, due mainly to the production and sale of cement, chemicals and extractive products. Although it is the country’s largest employer, the primary sector - mainly livestock and agriculture – contributed less than 10 percent of the country's 2013 GDP. Notably, Senegal’s GDP growth rate might have been stronger, but a late start of the rainy season and the effect of the Ebola epidemic on tourism and business may have negatively impacted 2014.

Constraints to GDP growth include Senegal’s persistent trade deficit, which totaled approximately $2.44 billion in 2014, and is expected to remain at a level that is approximately 50 percent of total imports for the foreseeable future. Total estimated exports for 2014 are $2.4 billion. Senegal’s export sector is led by petroleum products, for which estimated exports for 2014 totaled $372 million. Seafood products are also a major export with an estimated export value totaling $292 million in 2014. Other major exports include peanuts and peanut oil, cement and horticulture products. Estimated import values for 2014 totaled $4.84 billion. Leading imports include finished petroleum products, including gasoline and butane, which totaled an estimated $1.64 billion. Other major imports include food products, at a total of $1 billion, of which rice and wheat represented the greatest share.
Regardless of existing trade imbalances, outbreaks of disease, and unpredictable rains, prospects for Senegal are quite positive. International investors and foreign governments have shown an increased sense of confidence in the political and business environment within the country, and have rallied around President Sall’s commitment to improving the country’s prospects for the medium and long term. At the time of its unveiling in February 2014, the PSE received $8 billion in pledges of support from donor governments; nearly twice the amount President Sall requested. The appeal of the PSE lies in its three objectives: (1) higher sustainable growth and structural transformation, (2) enhanced human development, and (3) improved governance, peace and security. Macky Sall’s government targeted increasing average GDP growth by 7 percent per year over the 2017-2027 period in an attempt to reach “emerging country” status by 2035. In addition, the government embarked on 27 major public works projects which correlate with the goals of the PSE, as well as 17 major policy reforms to further enhance Senegal’s political and economic performance and image as an important regional entity.

The GOS is open to private sector approaches to delivery of social services and is actively seeking private investment and has instituted reforms in an effort to attract more businesses to Senegal. These include an ambitious program of infrastructure construction and rehabilitation and public financial sector reforms which serve as a pillar of the GOS’ commitment to public administration and transparency. As such, the GOS launched an electronic tax filing and payment system in January 2014 for all users in the Dakar region, while in mid-June, a similar system designed for the payment of national customs duties and taxes was also implemented. Efforts to improve accounting and financial transparency are also highlighted via the implementation of the Single Treasury Account in the early part of 2014, which is designed to mainstream government accounting and banking records to a central directorate at the Ministry of Economy and Finance. The national budget deficit remained below 5.1 percent for 2014 and is expected to fall below 5 percent for 2015, according to the IMF. However, the GOS still faces budget constraints and has little scope for increased investment in service delivery.

Governance situation

Since the election of Macky Sall in 2012, the GOS has undertaken a program of reforms aimed at improving governance and fighting corruption. The Office national de la lutte contre la fraude et la corruption (OFNAC) was created in December 2012 and launched in March 2014 with extended powers to root out fraud and corruption in public procurement and services. The creation of OFNAC is part of a greater strategy by the GOS to raise awareness among the general population of the losses inflicted on the national economy by corruption. In addition, in 2014 Macky Sall’s government passed the first Asset Disclosure Law, to highlight potential conflicts of interest among public officials and administrators. These laws were further fortified by the establishment of the Cour de repression de l’enrichissement illicite, which prosecutes public servants charged with embezzlement and has tried numerous high level public officials – most notably the son of former President Abdoulaye Wade who was recently convicted and sentenced to 6 years of imprisonment.

Senegal has seen steady improvement in its position on the various indexes related to corruption and transparency over the past several years. Since 2011, Senegal’s position on the Transparency International Corruption Perceptions Index has improved consistently, reaching its current 2014 rank of 69 out of 175 countries surveyed. This was a significant improvement from its 2011 rank of 112 out of 182. Likewise, Senegal has seen significantly increased scores on the Mo Ibrahim Index of African Governance; placing it among those of the top 10 African nations. In addition, Senegal’s ranking on the World Bank’s Doing Business 2015 annual survey has improved ten places over that of the previous year.

The GOS has also made strides in regaining the trust of its own constituents. In addition to its ongoing fight against corruption, the GOS is working towards greater efficiency in the bureaucratic process, in
particular that related to the annual budget. The Government is implementing a new Public Financial Management (PFM) regulatory framework that reflects the 2009 West African Economic and Monetary Union (WAEMU) directives which seek to modernize and harmonize member countries’ PFM systems. These directives bring innovations related to shifting from resources-based to result-based budget programming, as well as improved transparency of the budget process. In 2014, the GOS updated its Procurement Code, and with the help of Forum Civil (a national chapter of Transparency International) launched an internet-based corruption surveillance system to keep citizens informed of how local governments work. As well, it offers constituents the opportunity to provide input about their local representatives. Many challenges remain, however, in fully engaging the Senegalese population in political life and in ensuring that elected officials have the required skills and commitment to accountability to their constituents. In particular, the country’s growing youth population has led to a youth “bulge” with high levels of unemployment and a need for the GOS to engage youth to become active and productive members of the economy and society.

The 42 Departments, 5 cities (‘villes’) and 555 Communes created under the first Phase of Act III of decentralization held their first elections in 2014. Local governments have limited capacity to manage and mobilize resources, engage citizens, deliver services, and guide development. Most of the local elected officials and staff are unclear about their roles and responsibilities as well as the relationship between the various tiers of government. Local government, particularly at the Commune level, lacks capacity in all aspects of local governance, including strategic planning, human and financial resource management, participatory budget planning and execution, resource mobilization, and citizen participation. Phase II of Acte III intends to add several additional services to the current commune responsibilities for which Communes are currently responsible. The new services include agriculture, fisheries, animal husbandry, water, sanitation and hygiene (WASH), and tourism. The GOS, USAID, other development partners, CSOs, the private sector, and local government share a sense of urgency about the need to strengthen the capacity of these new local government entities to foster economic growth and deliver essential services to their constituents and increase their ability to coordinate with CSO advocacy and service delivery organizations operating in their community.

The United States Government in Senegal

Senegal has long been considered important to the United States Government (USG) interests due to its strategic location, strong and professional armed forces, and relative political stability. Due to years of joint development, diplomatic, and military ventures, the USG and the GOS benefit from a good relationship. Not only does Senegal serve as a buffer against the spread of extremism from the northern Sahel, it also offers the USG a vantage point from which to engage with the rest of the West Africa region. The USG is currently Senegal’s largest bilateral donor due to several large programs, including the Millennium Challenge Corporation (MCC) compact, Feed the Future (FTF), and the Global Health and Presidential Malaria Initiatives (GHI and PMI, respectively).

USAID, in particular, is highly regarded by the GOS for its track record on implementing transparency and accountability in program planning and decision-making, and the GOS frequently commends USAID for its interventions in the Casamance region, and for its health, education and agricultural programs, in addition to its promotion of good governance. In line with the approved Integrated Country Strategy and the 2017 Mission Resource Request, this update to Senegal’s Country Development Cooperation Strategy (CDCS) emphasizes the importance of good governance as foundational to achieving all other development objectives. Thus, in support of the Quadrennial Diplomacy and Development Review (QDDR), USAID/Senegal will continue to partner with the State Department to attain mutually-beneficial goals, especially in the area of governance.

Donor Coordination and Aid Effectiveness
Due to the USG’s political capital with the GOS, historical presence, technical expertise and large contributions toward the country’s development, USAID/Senegal figures prominently among a core group of donors that coordinate development activities. USAID/Senegal is a member of the G-50 coordination group, the largest donor coordination group that includes all donors present in Senegal. The group is co-chaired on a rotating basis and meets once a month to report on or to raise issues of interest to all donors. USAID/Senegal is also an active member of the G-12, a working group of the 12 largest bilateral and multi-lateral donors that serves as the G-50’s Secretariat. Chiefs of G-12 agencies serve as chairs on a rotating basis; USAID/Senegal chaired the G-12 from July to December 2014 and currently serves as a Vice-President of this group. The G-12 monitors sector working groups, several of which USAID leads, including those of the private sector, water and sanitation, and the Casamance. The G-12 donor group also serves as an interface between the GOS and the donor community, enabling the transmission of joint messages to the Senegalese government on matters relating to reforms, policies, as well as the PSE. USAID/Senegal works closely with the GOS and other donors to complement resources in order to avoid duplication and to address as many resource gaps as possible. For example, under USAID leadership, the donor community has undertaken an effort to harmonize per diem policy.

USAID actively engages development stakeholders who possess first-hand experience of on-the-ground realities such as civil society organizations, private companies, religious leaders, universities, and research organizations. In addition, USAID/Senegal leverages the field presence of its implementing partners that are based outside of Dakar to address critical community-based needs. Moreover, USAID placed Foreign Service Nationals (FSNs) in key government ministries to serve as intermediaries between the USAID Mission and the GOS. A total of eight FSNs were placed in key institutions in and outside of Dakar to support the USAID local solutions objectives of strengthening the capacity of host governments and local organizations.

In support of reforms under USAID Forward, USAID/Senegal’s Local Solutions team advances Mission objectives to strengthen and use partner-country systems. In 2014, contributions to host government institutions, local non-governmental organizations, and private companies represented approximately 10 percent USAID/Senegal’s total budget. USAID/Senegal also partners with institutions of higher learning to promote applied research and to develop technologies that allow Senegal to stand out in the fields of agriculture, nutrition and water and sanitation. All of these efforts are closely aligned with aid effectiveness principles.

**Lessons Learned**

With the renewed focus on evaluation as stated in the USAID Evaluation Policy of 2011, USAID/Senegal created an Evaluation Working Group to review and provide guidance on all internal evaluations, ensuring that findings are taken into account in the design of new activities. Figure 2 below lists the key assessments that informed the update to this CDCS. In addition, best practices highlighted in evaluations of previous programs, a wealth of studies, collaboration with a wide cross-section of donors, the private sector, civil society, other USG agencies and the GOS significantly contributed to the strategy. Critical information from assessments influenced this update to the CDCS as shown in the following examples:

1. In 2014, USAID/Senegal conducted a midterm evaluation of its integrated health portfolio, the findings of which informed the design of the next phase of Mission Health programming. The evaluation recommended consolidating support for service delivery activities in order to more closely link community health services with other levels of care. As a result, support for integrated service delivery under a new Project will include community health, in addition to behavior change communications activities, that are currently implemented under separate implementing mechanisms.
(2) USAID/Senegal employed findings from a February 2014 “deep dive” exercise related to Ending Preventable Maternal and Child Deaths (EPMCD) to inform the design of its new Health program. The new program will emphasize high-impact interventions to reduce maternal, infant, and child mortality.

(3) USAID/Senegal used findings from a 2013 mid-term evaluation of its flagship Economic Growth Project to inform programmatic decisions under Feed the Future. In addition, the mid-term evaluation of the Yaajeende project led the Mission to expand this community-based agricultural development project to additional food-insecure regions of Senegal and request an 18 month extension to consolidate the gains made in this highly successful FTF Project.

**Figure 2: Assessments to inform USAID/Senegal CDCS Update**

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<thead>
<tr>
<th>2013-14 Continuous Demographic and Health Survey</th>
<th>2014 Environmental Threats and Opportunities Analysis</th>
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<tr>
<td>Economic Growth Project mid-term evaluation, 2013</td>
<td>2014 USAID Interventions in the Casamance</td>
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<tr>
<td>USAID/PEPAM mid-term evaluation 2013</td>
<td>Basic Education mid-term evaluation, 2013</td>
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<td>2014 Senegal Climate Change Vulnerability Assessment and Options Analysis</td>
<td>Yaajeende mid-term evaluation, 2014</td>
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<td>EPMCD Deep Dive, 2014</td>
<td>DRG Assessment, 2012</td>
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<td>Gender Assessment of Health Sector</td>
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**2. USAID/SENEGAL DEVELOPMENT OBJECTIVES**

USAID/Senegal’s goal during this strategy period is to improve the well-being of Senegal’s citizens. Senegal’s CDCS is premised on the development hypothesis that a politically-active and healthy citizenry, endowed with the skills to participate in the private sector and government, will lead to an improvement in the well-being of Senegalese citizens. USAID defines improved well-being as an enhanced quality of life, and development efforts can only be judged effective if they lead to improvements in the daily lives of all Senegalese citizens. As it provides a composite measure of these elements, the human development index (HDI) is the most appropriate indicator of well-being. Between 2012 and 2015 Senegal’s HDI changed from .47 to .5. GDP increased from 2.6 percent in 2012 to 6.4 percent in 2015. The goal depends on three complementary Development Objectives (DOs) relating to (1) increased inclusive economic growth, (2) improved health status, and (3) more effective citizen participation.

**Goal Statement: The well-being of Senegal’s citizens improved**

Building on the macro-economic stability and increased investment rates achieved under the previous poverty reduction strategies, the PSE sets a target of 7 percent of GDP growth per year. Major obstacles to achieve this target include a limited role of the private sector in creating wealth and economic opportunities, low productivity and lack of diversification in agriculture, difficulty for small and medium-sized enterprises (SME) to access credit, and low overall investment. Challenges in the social
sectors include high child and specifically maternal mortality, low completion rate in middle school, and poor quality services.

USG and GOS Development Alignment

USAID/Senegal’s Update to the CDCS builds upon the lessons learned from the current, approved CDCS and is in line with GOS priorities described in the 2014-2018 PSE as reflected in the diagram below. The five year (2014-2018) action plan serves as a reference for development cooperation initiatives with bilateral and multilateral donors.

**Figure 2: USG-GOS Cooperation**

With the Economic Growth DO, USAID complements the first pillar of the PSE as it seeks to create wealth and economic opportunities by facilitating access to credit for SMEs, improving agricultural productivity through a private-sector led value chain approach and facilitating access to quality inputs, such as seeds and training, and to market outlets. The Economic Growth DO will support a greater role for the private sector by improving the policy environment for competitiveness.

To complement the second Pillar of the PSE, under the Health DO USAID will seek to increase access to basic health services, with a focus on maternal, infant, and child health. Activities will strengthen the quality of pre- and post-delivery care to pregnant women, increase access to family planning and lifesaving commodities, and promote participation in community-based health insurance organizations. USAID will also work both at district and community levels and support policy reforms for increased health resources and better trained health staff.

The Citizen Participation DO reflects the second and third PSE pillars and will help Senegal increase middle school completion rates for girls and boys by increasing access to safe learning opportunities and retention of students in the conflict affected Casamance region. In addition, USAID will improve early grade reading skills through evidence-based interventions in targeted areas of the country. USAID will also enhance good governance through increased citizen participation in the management of public affairs at national and local levels. Efforts to develop leadership skills in the country’s growing youth population will be supported under YALI. Activities under the Economic Growth DO and the Health
DO fully integrate governance issues and target increased citizen participation at the local level.

USAID/Senegal’s strategy intends to bring about broad-based economic growth, improved health, and a more engaged citizenry. However, interventions will not only bring about systemic changes in targeted sectors. USAID anticipates that the confluence of these interventions will create or strengthen complementary linkages between:

- Governance, health, education, and water/sanitation to strengthen public service delivery at decentralized levels;
- Agriculture and health to foster greater food security and reduced malnutrition; and
- Health and education to promote greater health awareness among students.

Governance interventions will be supported by all three DOs to strengthen service delivery and support the decentralization processes in all targeted sectors which will enable locally elected officials to be more responsive to their constituents. It will also empower Senegalese to be more engaged in their government.

Geographic Coverage

Given the low human development indicators of Senegal’s Southern Forest Zone (SFZ) relative to the rest of the country, a priority focus of the Senegal CDCS will be on the SFZ, an area that includes the conflict-affected Casamance. For example, the zones of interventions for DO 1 were selected based on Senegal’s Country Investment Plan for Agriculture (CIP) and USAID/Senegal’s FTF Strategy. In addition to the SFZ, FTF investments will focus on the Senegal River Valley in the north as this is the main growing area for rice, one of the three focus staples (rice, maize, and millet) that were selected for their ability to improve Senegal’s food security and to spur agriculture-driven economic growth. Activities will address land degradation and support the rehabilitation of small irrigation systems to reduce the effects of global climate change.

The geographic focus and goal for the Health DO is nationwide coverage, with a focus on seven regions of concentration and seven regions of consolidation. The selection of these focus regions is based on a review of current epidemiological data, as well as the presence of other development partner activities and the ability to leverage additional USAID investments. Support to these regions will prioritize increasing availability and access to high impact interventions in reproductive, maternal, newborn, and child health and nutrition, as well as ensuring the quality of these interventions. Regions of consolidation encompass Dakar, Fatick, Kaffrine, Kaolack, Louga, Thies, and Ziguinchor. In lower-performing regions, USAID has an opportunity to concentrate its investments to significantly impact the key drivers of child and maternal mortality. These regions of concentration include Diourbel, Kedougou, Kolda, Matam, St. Louis, Sediou, and Tambacounda.

The national level interventions under the Citizen Participation DO will be implemented through key central-level institutions such as the Autonomous Electoral Commission, the National Commission against Non-transparency, Corruption and the Misappropriation of funds, the National Agency to Re-launch Activities in the Casamance, and the Parliament, which are all located in Dakar. However, the majority of local level interventions will be implemented in coordination with the other two DOs in key regions, focused on the SFZ.

Democracy, Human Rights, and Governance Integration

In many developing countries including Senegal, efforts to foster broad-based economic growth, improve the delivery of critical services (such as health, education, and water and sanitation), and pursue effective development policies continue to be stymied by disparities in power, corruption, a lack of participatory policy making, and ineffective policy implementation and service delivery. Interventions that seek to address development challenges in isolation from the overall politico-economic context within which
these problems have developed are unlikely to yield sustainable results. Improvements in rule of law, policy formulation and implementation, public financial management, public accountability, and citizen participation are needed to make development investments sustainable.

If USAID does not undertake initiatives that ensure equity of opportunity and access to public goods and services for all citizens, especially vulnerable populations and minority groups, USAID/Senegal risks perpetuating the disparities that so often constrain the achievement of Senegal’s socioeconomic development goals. Ensuring the application of core Democracy, Human Rights, and Governance (DRG) precepts such as inclusion, participation, and accountability across the Mission’s development portfolio enables the growth of responsive, effective institutions better able to develop policy, equitably deliver services, and monitor the effectiveness of their interventions. This contributes not only to improved DRG outcomes, but to the sustainable attainment of development objectives writ large.

In June 2013, USAID released a comprehensive Agency level strategy that provides a framework and guidance for integrating DRG principles into its development interventions. The strategy will serve as a critical tool for implementing Presidential Policy Directive 6 (PPD-6), QDDR and USAID Policy Framework mandates to elevate DRG and enables USAID to more effectively achieve its DRG and broader development goals and objectives. The Strategy promotes DRG as a core development objective and human rights as a key USAID strategic objective, and it articulates an approach for integrating DRG principles and practices into other development sectors. In 2014, the Mission’s technical and support offices worked together to develop a Mission-specific DRG integration strategy aligned with that of the Agency. The document serves as framework and guidance for implementing the Agency’s DRG integration strategy, and fostering greater synergies among the Mission’s portfolio of programs.

The Mission has taken a number of measures to operationalize the Agency and Mission DRG integration strategies. For example, technical teams are required to systematically integrate DRG principles into all new project designs, and concept papers, project appraisal documents, bi-annual portfolio reviews, as well as performance and impact evaluations, are vetted for DRG integration aspects during Mission reviews. Additionally, the Mission established a multi-disciplinary team formed of representatives of all technical and relevant support offices to spearhead the implementation of the Mission’s DRG integration and synergy initiatives. And finally, the Mission is developing an integrated cross-sectoral project co-funded by all technical teams to address governance challenges that negatively affect all sector interventions. The Mission will continue to implement these measures while exploring new approaches to further enhance DRG integration efforts.
**Figure 3: Overall results framework**

**GOAL:** The well-being of Senegal’s citizens improved

**DO1: Increased inclusive economic growth**
- **IR1:** Inclusive agriculture sector growth
- **IR2:** Increased private sector trade and investment
- **IR3:** Increased resilience of targeted communities and systems
- **IR4:** Improved nutritional status, especially among women and children

**DO2: Improved health status of Senegalese population**
- **IR1:** Increased access to priority services and products
- **IR2:** Increased commitment of individuals and communities in the management of their own health and health services
- **IR3:** Improved performance of the health system

**DO3: More effective citizen participation in the management of public affairs at the national and local levels**
- **IR1:** Better educated children and youth
- **IR2:** Strengthened democratic governance
CDCS Development Objective 1: Increased inclusive economic growth

Overview
Development Objective 1, the Economic Growth (EG) (DO) supports the GOS, the Accelerated Growth Strategy, the CIP, the Accelerated Program for Senegalese Agriculture (PRACAS), and the two U.S. Presidential Initiatives – FTF and Global Climate Change – as well as two Congressional Directives – Biodiversity and Water, Sanitation and Hygiene (WASH). In addition, Power Africa funding will be used for activities to support Senegal’s energy infrastructure. Activities planned under the EG DO are in line with the GOS’ plan to reduce poverty through private sector-led, inclusive economic growth. “Inclusive economic growth” means rapid and sustainable growth that will create and expand economic opportunities broadly, including the most vulnerable, women, and youth. It focuses on ensuring all members of society can contribute to and benefit from such growth. Through 2020, the EG DO will direct investments primarily toward the agricultural sector, resilience, increased private sector trade and investments, and (in concert with the Health DO) improved nutritional status, especially of women and children (inclusive of WASH).

The overall hypothesis of the EG DO is that if agricultural productivity is improved, if private sector trade and investments are increased, if the resilience of targeted populations is increased and if the nutritional status of women and children is improved, then local populations will be more food secure and play a larger role in an expanding economy.

The cause and effect relationship for the EG DO is discussed in great detail in Senegal’s approved FTF Strategy, which served as the foundation for this Development Objective. Senegal’s approved FTF strategy can be accessed via www.feedthefuture.gov. In identifying THE EG DO and related intermediate results, USAID/Senegal relied heavily on lessons learned from development projects over the past 30 years. Findings from numerous analyses informed the process including: the 2010 Gender Assessment, the 2010 Women in Agriculture Assessment, an extensive Competitiveness study, in-depth value chains studies (on maize, millet, rice and other crops), the July 2014 mid-term evaluation of USAID/Projet de Croissance Économique, and a 2010 Environmental Threats, Opportunities and Analysis Assessment.

Barring any unexpected barriers, USAID/Senegal expects to achieve its DO by 2020. In addition to improving agricultural outcomes, USAID/Senegal anticipates cutting the current rate of under-five prevalence to 10 percent in line with the GOS’ target of halving the proportion of people who suffer from hunger, assisting the GOS to reach its Millennium Development Goal for potable water and sanitation, and reducing poverty for 1.4 million people. The EG DO will contribute toward the long-term sustainability of coastal marine fisheries and maximize agricultural production (including livestock) by improving natural resource management and adapting to the potential negative effects of climate change. Improved governance, transparency, accountability, gender, youth, and human and institutional capacity development are cross-cutting themes among all investments, applied to ensure that USAID meets the goal of inclusive economic growth. For example, all interventions will include targeted capacity building activities to strengthen institutions, enhance policy implementation, and increase local government capacity to provide better services in their communities.

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1 Resilience will increase through increasing Senegal’s ability to adapt to climate change, improving the management of natural resources and agricultural, potable, and environmental water systems; and improving the conservation of bio-diverse areas.

2 In 2000, 20 percent of children under 5 in Senegal were underweight. As part of its Millennium Development Goals, the GOS pledged to decrease that percentage by half (i.e. to 10 percent) by 2015. Preliminary data from the 2010 DHS indicate that the percent of underweight children <5 has since decreased to 14.45 percent.

3 Estimation: Baseline scenario is 5 percent growth in accordance with the GOS Poverty Reduction Paper (2.5 percent annual population growth; GDP per capita growth will thus be 2.5 percent) and if the Gini coefficient remains stable, between 2011 and 2015 poverty will be reduced by 12.5 percent or 1.4 million people.
Details of the EG DO
The EG DO has four integrated intermediate results (IR) to reach its objective of inclusive economic growth:

**IR 1:** Inclusive agriculture sector growth;
**IR 2:** Increased private sector trade and investment;
**IR 3:** Increased resilience of targeted communities and systems; and
**IR 4:** Improved nutritional status, especially among women and children (with the Health DO).

Because of the inherent linkages between agriculture/food security, nutrition, WASH, natural resource management, climate change adaption, and energy, focus area investments simultaneously address multiple intermediate results (IRs) which are linked with dotted arrows (see Figure 4). Sustained economic growth in Senegal depends on the sustainable use of its resource base.

The two focus agro-ecological zones of the EG DO, the SFZ and the Senegal River Valley (SRV), touch on parts of ten administrative regions (St. Louis, Matam, Tambacounda*, Kédougou*, Kolda*, Fatick*, Kaolack, Kaffrine, Sédhiou* and Ziguinchor*) representing 32% percent of Senegal’s population and include the six poorest* regions in Senegal5. However, since value chain development is used to satisfy urban market demand, the impact will be much broader than these targeted areas and beneficiaries.

**Figure 5: FTF areas of intervention**
In addition to the agro-ecological zones, USAID/Senegal will conduct activities in critical bio-diverse areas, such as coastal areas in the “Grande Côte” (Saint-Louis/Louga), the Cape Verde (Rufisque), the Petite Cote (Mbour, Joal, Cayar), the Sine-Saloum Delta and the Casamance region of the SFZ. All activities will be coordinated closely through local governments and will strengthen local government capacity to take on responsibilities under the decentralization law. In line with USAID guidance, Senegal's FTF strategy is fully integrated into the EG DO which addresses the five components of FTF, namely: improvements along four targeted value chains, policy reforms, capacity building for science and technology, rural infrastructure development, and nutrition.

Intermediate results (IR) for the EG DO are briefly described below.

**Intermediate Result 1: Inclusive agriculture sector growth**

Sixty-eight percent of the labor force is involved in the agriculture sector, but it only accounts for a small percentage of GDP. Senegal’s CIP predicts that GDP value added in agriculture will grow by 7.2 percent annually. The CIP also projects that poverty in rural areas will be reduced from 27.3 percent in 2015 to 17.7 percent by 2020. USAID/Senegal will focus on agriculture sector growth throughout the value chain for four different commodities: rice, maize, millet, and fisheries. To maximize the number of people raised out of poverty, USAID/Senegal is using market-consolidation approaches to link the small-scale farming population with larger market players for large-scale results. USAID/Senegal will devote significant resources to enhance productivity through, among other things, investments in improved seed technology and more efficient processing techniques.

Through these investments, USAID/Senegal will continue to capitalize on the investments of the MCC in new irrigated areas in the SRV.

The PSE strategy recognizes that the agricultural sector can be the engine for growth, and provides opportunities for investments to increase food security, increase competitiveness and reduce barriers to stimulate private investment in agriculture, increasing incomes for smallholders/firms and generating employment. In this effort, Senegal proposes to rebuild capacity and has ambitious plans to improve the business environment needed for sustainable economic growth. USAID/Senegal will work closely with local and national partners to support these policy reforms and will actively engage local stakeholders in this process. For example, a key problem in Senegal is the high rate of attrition of senior public and private experts in the agriculture sector due to retirement. In this context, USAID/Senegal will invest heavily in higher education for agriculture science and technology in an effort to usher in a new generation of people who are adequately trained in the sector. Increased institutional and human resource capacities will ensure access to and development of next-generation technologies in Senegal.

Women are heavily involved in the agriculture sector at all levels from work in the field to post-harvest processing and marketing. However, women’s opportunities to participate in economic life are limited, and according to the most recent USAID/Senegal Women in Agriculture Assessment (2010), women only control 21 percent of agricultural land in Senegal. As per the Law of 1964, neither men nor women are allowed to own land as all lands belong to the State. Findings from the USAID/Senegal gender assessment showed that, despite an encouraging legislative environment as reflected in the 2004 Agriculture-Forest-Livestock Policy Law which grants equal rights to land to men and women, gaps between policy and practice limit women’s access to property, particularly in rural areas. Overall, cultural values continue to favor men. The 2004 law is not fully implemented and the GOS struggles to enforce the law in rural areas. Customary laws, including questions related to inheritance, do not allow women to directly access land or inherit property among most ethnic groups. In addition, the most common Islamic inheritance law allows women to inherit only a fraction of what men inherit. As a result, women are marginalized vis-à-vis access to land and are often overlooked during the distribution of new agricultural technologies. The USAID/Senegal Women in Agriculture Assessment found that women farmers in Senegal use four times less fertilizer and six times less improved seed varieties than male farmers. Because of this inequity, women obtain lower yields and lower incomes from their
agricultural efforts. Since land is typically considered as belonging to male heads of household, women are often not given a voice in family business decisions⁹ or in community agricultural programs.

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⁷ 2010 USAID/Senegal Women in Agriculture Assessment
⁸ 2010 USAID/Senegal Women in Agriculture Assessment
⁹ 2010 USAID/Senegal Gender Assessment
Figure 4: EG DO results framework

DO 1: Increased inclusive economic growth

IR 1: Inclusive agriculture sector growth
- Sub-IR 1.1: Improved agriculture productivity
- Sub-IR 1.2: Improved rural infrastructure
- Sub-IR 1.3: Improved access to finance

IR 2: Increased private sector trade and investment
- Sub-IR 2.1: Enhanced policy environment
- Sub-IR 2.2: Improved markets

IR 3: Increased resilience of targeted communities and systems
- Sub-IR 3.1: Improved institutional and HR capacity
- Sub-IR 3.2: Increased ability to adapt to climate change

IR 4: Improved nutritional status, especially among women and children
- Sub-IR 4.1: Essential nutrition actions brought to scale
- Sub-IR 4.2: Increased capacity of emerging private sector to provide nutrition goods and services
- Sub-IR 4.3: Improved water management
However, there is growing recognition of women’s key role in agriculture and the rural economy by the State, donors and local leadership. Government leaders have begun granting access to land to women particularly in rural areas where the out migration of men is significant. By increasing access to credit, USAID/Senegal supported interventions will lend women greater resources with which to participate in the growth of agricultural productivity. Although USAID activities support institutions and organizations serving the target populations as a whole, there are certain activities that are led by and/or primarily benefit women. USAID/Senegal’s Development Loan Credit guarantees will help build a climate more favorable to lending to the agricultural sub-sectors where female entrepreneurs invest heavily. This will enhance women’s capacity to process and commercialize goods, the link from which the lion’s share of value-added is gained. Increasing wealth among woman household members will have the positive domino effect of improving the nutritional status and educational achievement of children.

**Intermediate Result 2: Increased private sector trade and investment:**

Senegal’s New Alliance for Food Security and Nutrition Cooperation Framework explicitly recognizes that an increased level of private sector investments is critical in order to accelerate poverty-reduction and economic growth. Policy and regulatory constraints, such as opaque procedures to obtain permits and approvals, lack of agricultural financing and banking products, and a high cost and unreliability of electricity, limits productivity as well as the development of private sector investments in the agriculture sector.

Low agricultural productivity is also due to the weak input sector structure and uncertainty in Senegal’s institutional framework to remove barriers to the competitiveness of Senegal’s agriculture sector. The combined result is long-term underinvestment in the agriculture sector and an ongoing vulnerability to food system-related shocks. The finite nature of land and water resources will push the need for productivity to new limits during the next decade. These underlying issues of secure access to land and competition for water resources drives the urgency of USG/Senegal’s continued interventions in roads, irrigation infrastructure, productivity/value chains, and key support for improved agriculture policy environment.

While a large informal domestic trade sector exists in Senegal, a stronger, more organized and efficient agribusiness sector can lead to improvements in agricultural production, increased domestic and regional trade, increased incomes, reduced imports, and could contribute to significant economic growth. As Senegal’s productivity is established through a functional value chain, internally-produced goods become more affordable. Importantly, as the system works toward products suitable for export markets, they also capture the attention and business of Senegal’s urban-based wholesalers and processors. Performing to specific international product quality standards, consolidation capabilities, and timeliness of supply require improved efficiencies. These are productivity benefits passed to Senegal’s consumers in the form of increased availability of grains and other products in both rural and urban markets. These well-financed private sector intermediaries can become an engine to pull products out of rural areas and into mainstream markets.

USAID/Senegal’s private sector trade and investment activities will therefore focus on strengthening policy analysis, policy formulation, information and knowledge management at both the central and decentralized levels, implementation and monitoring. Technical assistance and capacity building activities will strengthen the role of civil society organizations to participate in policy research and advocacy. Dialogue between various stakeholders, including private sector and government entities, will be promoted and institutionalized and organizations that facilitate private sector investments will be strengthened. Opportunities for Public Private Partnerships, in the WASH and energy sector as well, will be explored. Additional opportunities will be sought through the regional markets, linking to regulatory reforms (seeds and other inputs) of ECOWAS and improving the movement of goods along key transport corridors. USAID/Senegal will coordinate activities with the USAID/West Africa Trade Hub Program whenever possible to promote greater regional trade, making West Africa competitive in world markets. Feeder roads are critically important but require major investments. USAID/Senegal
through the food security and rural development donor group will promote increased investments in feeder roads, building on the MCC’s rehabilitation of two major arteries in the SFZ and SRV.

**Intermediate Result 3: Increased resilience of targeted communities and systems:**

Sustained economic growth in Senegal depends on the sustainable use of its resource base. USAID’s strong emphasis on agriculture and natural resource management intends to increase Senegal’s ability to respond to climatic or economic/food system shocks. In order to maximize reach and effect, USAID climate change activities will be fully integrated into the FTF initiative and other appropriate economic growth activities. To this end, USAID/Senegal will increase Senegal’s ability to adapt to climate change; improve the management of potable, agricultural and environmental water systems; and improve the conservation of bio-diverse areas. Past efforts demonstrate that local communities have more incentive to manage natural resources sustainably if they are able to effectively use these natural resources and generate income from them. As poverty, food insecurity, and the environment are inextricably linked, USAID/Senegal will build on past investments to continue to improve the management of Senegal’s natural resources. USAID/Senegal will also incorporate lessons learned and best practices from the Sahel resilience program, targeting populations most vulnerable to climate change.

Through the President’s Global Climate Change (GCC) Initiative, USAID/Senegal will invest in science and analysis for decision-making; promote governance systems that are inclusive, transparent, and responsive to the needs of their constituents; and implement climate solutions as integrated components of other development activities. In Senegal, consequences of climate variability and climate change are significant as the majority of jobs are in agriculture and are therefore dependent on local weather and climate conditions. Changes in climatic conditions could impact productivity levels and diminish livelihoods. Toward this end, USAID will coordinate with the GOS to achieve the following objectives: 1) increase use of effective climate information by vulnerable populations from both sexes; 2) increase inclusion of climate change considerations in governance systems; and 3) increase uptake of locally-adapted solutions to climate variability and change in targeted areas.

Improving management of natural resources and agricultural, potable, and environmental water systems is a critical element in achieving this IR. Many of the traditional food products harvested from forests are collected, processed, and sold by women. Women and girls hold the primary responsibility for collecting water for household use. This enormous cost of time and labor has significant negative impact on a woman’s ability to engage in other economic activities and for girls to attend school. Women and girls also pay a price for lack of sufficient water and sanitation services, as they are also the primary caretakers of the young, the elderly and the infirm. A focus on the potable water sector will empower women to partake in Senegal’s growing economy. Toward this end, programs will establish long-term links among female natural resources management professionals, rural women and resource user groups to strengthen the overall capacity of women entrepreneurs.

USAID/Senegal is a leader in biodiversity conservation and will continue to support the GOS in reducing the environmental impact of natural resource exploitation and increasing sustainable financing of the management of natural resources and biodiversity. If biodiversity funding is made available to the Mission, activities will focus on the Kedougou region and the Niokolo-Koba National Park, a 913,000 hectare UNESCO World Heritage Site, both of which are located in the SFZ. Programs will allow more communities greater opportunities to profit directly from natural resources, thereby contributing to Senegal’s attainment of the first Millennium Development Goal. These activities have the potential to be an important parallel effort to the FTF Strategy, ensuring sustainable use of Senegal’s natural resource base.
Intermediate Result 4: Improved nutritional status, especially of women and children:

Under-nutrition costs developing countries up to three percent of their annual gross domestic products and places individuals at risk of losing more than 10 percent of their lifetime earning potential. USAID/Senegal will therefore create an enabling food system environment for the practice of proper nutrition. The results of Senegal’s Comprehensive Food Security and Vulnerability Analysis (CFSVA) informed interventions by providing up-to-date baseline information on food security and nutrition in Senegal.

USAID/Senegal will strengthen the private sector to become a key driver of food security by helping to establish dynamic and lucrative markets for inexpensive, nutritious, local foods. This will be accomplished by reinforcing key food security cereal crops, horticulture/arboriculture, livestock, and wild foods. USAID/Senegal will address several key nutritional deficiencies within targeted zones, in particular deficiencies related to Vitamin A, Zinc, Protein, Iodine, and Iron. Resolving these priority problems will maximize the health of local people, particularly improving the mental and physical development of young children and the health of mothers. USAID/Senegal will also employ both behavior change strategies and social marketing campaigns to raise awareness of local consumers about nutrition and hygiene issues as well as to catalyze and promote demand for quality products and services that can resolve the under-nutrition of vulnerable populations. USAID/Senegal will strengthen local governments’ ability to engage with the citizenry and different stakeholders to craft food security policy/procedure and manage sustainably related resources.

The 2015 Millennium Development Goal (MDG) for water and sanitation is to decrease the number of people lacking sustainable access to safe drinking water and basic sanitation infrastructure by 50 percent. While Senegal has already achieved the MDG targets for potable water and basic sanitation in urban areas, the situation in rural areas is mixed. Investments in the rural water, sanitation and hygiene (WASH) sector have helped Senegal inch closer to achieving the MDG target in rural areas for safe drinking water (71.5\% of the rural population has sustainable access), but only 37.7 percent of households have access to improved sanitation\(^1\). Improving access to potable water and sanitation is a priority of the GOS. In Senegal, poor water quality contributes to the high prevalence of diarrheal disease which causes mortality in 7 percent of under-five children and accounts for approximately 186,399 preventable deaths\(^2\). Alongside other donors’ support, USG assistance will back Senegal’s “blue revolution” by dramatically increasing the number of people with access to water and sanitation services, raising Senegal as an example to other West African countries.

This IR will be addressed under both the EG DO and the Health DO. Under the EG DO, given the high prevalence of diarrheal disease in Senegal, programs will support improvements in water supply, sanitation and hygiene, which have the potential to markedly reduce under-nutrition as well as decrease morbidity and mortality. Under the Health DO, USAID/Senegal will employ a system-wide approach targeting key, high-impact nutrition interventions at the policy, health facility and community levels. In addition to enforcing food fortification policy and strengthening health care providers’ ability to diagnose and treat under-nutrition, the approach emphasizes reinforcing the existing foundation of government and donor programming at the community level, leveraging years (in some cases, decades) of investment to scale up preventive interventions for greater impact. While the focus in the Health DO is on more traditional health-related nutrition interventions, promoting Essential Nutrition Actions (a mix of health and feeding practices, proven to improve both health and nutritional status), the Mission will support the integration of nutrition activities into the value chain approach, thereby strengthening the link between increased food production, increased incomes, and increased consumption of quality and nutritious foods, particularly by women and children in the poorest regions of Senegal in an effort to counter the high levels of chronic hunger.

Twenty-two percent of women in reproductive age (25.8 percent in rural area) are undernourished\(^3\). Under-nutrition at any stage in a woman’s life, including childhood, can jeopardize
Millennium Water and Sanitation Program, 2014 Annual Joint Sectoral Review
2014 Senegal Demographic and Health Survey
World Health Organization 2014 Statistics Report
2011 Senegal Demographic and Health Survey
her ability to carry, deliver, and/or care for a child. USAID/Senegal's strategy will address this challenge by specifically targeting maternal nutrition in addition to infant and young child nutrition. Nutrition activities will employ a gendered approach by involving men in community nutrition activities since men often control how income is spent, but are rarely involved in child care. Therefore, outreach will target not only women, but also male heads of households.

**EG DO Approach**

The EG DO looks to the private sector as an engine for sustainable, country-led economic growth. For this reason, key interventions are designed with this private sector lens. The EG DO will also capitalize on opportunities that resulted from the previous strategy period (2012-2016): successful project interventions, technology scaling up, use of public-private partnerships, and gender integration (including youth). Interventions will make use of known best practices and technological packages in order to accelerate and scale-up specific, measurable results essential to attaining USAID/Senegal's EG DO. Activities will also build on the Community Based Service Provider model, linking communities and markets for the supply of goods and services. The EG DO will emphasize capacity building efforts across all sectors, ensuring that all beneficiaries understand the obstacles that inhibit their development goals while enhancing their abilities that allow them to achieve measureable and sustainable results.

Learning is an important aspect of USAID/Senegal's work and in order to effectively link key interventions across the portfolio, we are bringing more structure and renewing our focus on a learning process. The EG DO will seek synergies across all activities and interventions to answer these questions and more. Information acquired from these questions will help guide the revision and formulation of interventions over the strategy period.

**Aid effectiveness**

USAID/Senegal will work in close collaboration with the GOS, the private sector, and other donors to attain its economic growth objective, and leverage the investments of other offices within USAID to stretch resources. For example, USAID's Yaajeende project, under the FTF strategy is jointly managed by USAID’s Economic Growth and Health offices.

The EG DO supports several country-led strategies, notably the PSE, the Accelerated Growth Strategy, the CIP and the PRACAS, which provide the vision for Senegal’s agriculture development (including forestry, livestock, fisheries, etc.). USAID/Senegal will continue to support the Ministry of Environment to implement its National Action Plan for Adaptation to Climate Change. In line with the USAID Forward reform agenda, USAID/Senegal plans to partner more directly with government institutions and local entities during the life of the strategy and is already working with the Ministry of Agriculture in improving seed systems and reducing post-harvest loss, and with the Office Rural Boreholes (OFOR) (a new parastatal under the Ministry of Hydraulics and Sanitation) to provide technical assistance in planning, contract management, and monitoring and evaluation of the private water operators. In addition to supporting the OFOR program at the central level, USAID/Senegal will continue to provide technical and managerial assistance to the regional technical services in the South to ensure that there is maintenance of the existing water infrastructure until the OFOR program is implemented. The intention of the EG DO is to ensure that projects are not just attributed to these country-led plans, but are in fact led by them. Additionally, joint sector reviews with both multilateral and bilateral donors, government, and other stakeholders will be supported.

The USAID/Senegal Economic Growth Office currently chairs two key donor groups, including the Private Sector Donor Coordination Group and the Rural Water and Sanitation Donor Coordination Group, and participates in other donor groups for the environment, rural development and food security, and fisheries. USAID/Senegal works closely with the World Bank, the International Monetary Fund, the International Fund for Agricultural Development, the European Union and other multilateral organizations. Bilateral partners include Canada, Japan, Spain, France, Italy, Belgium, and
Luxembourg. The majority of collaboration takes place through regular donor coordination meetings, although Senegal’s donors have, in the past, devoted greater attention toward increasing synergy between donor activities through some joint activity planning and monitoring agreements. This approach will be encouraged as the opportunities arise.

USAID/Senegal and other donors will continue to help the GOS coordinate all donor activities in line with the Paris Declaration. In support of that effort, all donors have agreed to align their support to the CIP and are committed to its implementation with GOS buy-in and leadership. In this context, USAID’s natural resource management, climate change, policy, agriculture and fisheries activities will be coordinated through the relevant CIP component and the government’s sectoral policies. USAID will help the CIP process streamline these different sectoral plans.

Moving forward, USAID/Senegal will increase its use of host-country implementing mechanisms. While most implementing mechanisms are already in place, two projects will be ending in 2016 creating the opportunity for follow-on activities using local NGOs or direct assistance to national and local governments. Therefore, current capacity building investments will reinforce the financial management and M&E capacity of potential USAID Forward implementing agents.

USAID/Senegal also intends to work with several quasi-government organizations including the Investment Promotion Agency, the Export Promotion Agency, the Agricultural Research Institute, the Food Technology Institute, the Senegal River Development Agency, the PSE Operational Monitoring Unit and the OFOR to implement activities under this DO. To coordinate activities with this large group of partners, USAID/Senegal established a steering committee which is chaired by the Ministry of Finance. The Committee is comprised of representatives from all relevant government, civil society, and private sector partners. In addition, USAID/Senegal holds a yearly Joint Portfolio Review with the government to discuss the entire bilateral development program.

USAID/Senegal has leveraged over $31.3 million, at a cost of $1.4 million (since 2007) through the Development Credit Authority (DCA) in an effort to spur greater lending in the agriculture sector. Currently DCA agreements exist with four microfinance institutions and a women’s association. Opportunities for additional DCAs in the WASH and energy sector will also be explored.

Collaboration with other USAID Operating Units and USG agencies is crucial to the achievement of IR 1. USAID/Senegal coordinates closely with USAID/West Africa to ensure that regional activities are aligned with bilateral activities. The Mission also collaborates intensively with Bureau for Food Security to ensure that activities supported by central mechanisms are aligned with the IRs under this DO. The State Department will assist in addressing sensitive policy issues through exchanges and advocacy with policy makers and stakeholders as well as through its exchange programs and other in-country activities. As improved rural infrastructure is a critical component to the success of the agriculture and trade IRs, USAID depends on current investments from MCC in building and improving roads. Finally, to ensure that this strategy is inclusive of the hardest-to-reach sectors of the population, Peace Corps will be engaged to implement small-scale agriculture and nutrition education activities at the rural level. Successful implementation of the FTF initiative is complemented by the U.S. Department of Agriculture (USDA), which works on improvements in the millet value chain. USAID/Senegal has also benefited from the USDA-funded Cochran program for building high-level specialized capacity.

Critical assumptions and risks
Development Objective 1 is based on some critical assumptions and risks, which are beyond USAID/Senegal’s control but crucial to success. First and foremost, the strategy relies on strong political will and commitment, as well as political stability. It is assumed that the GOS will continue to contribute at least 10 percent of annual GDP to the agriculture sector in line with the Comprehensive Africa Agriculture Development Programme (CAADP). Policy reforms will also be necessary to achieve
the long-term goals of the EG DO, specifically relating to: 1) an enhanced business environment; 2) full implementation of the agricultural law of 2004 including continued discussions on land tenure; and 3) development and testing of new policies and management structures for the fisheries sector. The DO also assumes continued, or enhanced, government support to the decentralization process which is essential for locally managed growth. USAID will mitigate these risks as best possible by maintaining close programming coordination with the GOS and by continuing to build capacity within the government.

Unplanned agricultural growth can sometimes threaten environmental resources and services, therefore local management capacity and growth planning are essential for mitigation. Activities to strengthen environmental sustainability and food system productivity potentially ease risks associated with climatic and economic/food system shocks. Using USAID-funded programs such as the Famine Early Warning System Network and vulnerability assessments will allow USAID/Senegal to periodically assess these types of risks. USAID/Senegal will continue to analyze the potential negative consequences of climate change on the DO as variability in climatic conditions may be a stressor on activities relating to this and other DOs. USAID will also invest in scientific innovation and analysis for decision-making, support vulnerability assessments, and implement climate solutions as integrated components of other development activities.

**CDCS Development Objective 2: Improved health status of the Senegalese population**

**Overview**
USAID plays a leadership role in the development community in Senegal and bears a significant responsibility in supporting the provision of basic health services to Senegalese communities nationwide. As the primary USG donor and implementer of health programs in Senegal, USAID benefits from a strong partnership with the GOS and supports a country-led approach, in line with the national health plan and strategy. USAID/Senegal has been instrumental in helping the GOS extend services to the community through the nationwide expansion of health huts, which bring basic health services into remote communities and provide healthcare to the poorest of the poor.

Senegal has achieved significant progress in improving the health of its population. Through support from USAID and other development partners, Senegal has made strides in scaling up high impact practices to address the key drivers of child and maternal mortality. Nevertheless, there remain many challenges to ending preventable child and maternal deaths and realizing the goals of an AIDS-free generation. Most notably, Senegal has achieved substantial gains in reducing child mortality. The most recent estimate of mortality in children under five years of age is 54 per 1,000 live births. This demonstrates continued improvement from the 2010-2011 Demographic and Health Survey (DHS), which estimated under-five child mortality at 72 per 1,000 live births. However, less progress has been realized in reducing maternal mortality, estimated at 392 per 100,000 live births. Despite the recent increase in Senegal’s modern contraceptive prevalence rate to 20 percent, the total fertility rate remains high, 5.0 children per woman, and 25 percent of women express an unmet need for family planning. Malnutrition, a significant contributor to child mortality, remains a challenge, with approximately 19 percent of children classified as stunted (height-for-age) and nearly six percent classified as wasted (weight-for-height).

Senegal has made significant progress in reducing deaths attributed to malaria, which decreased from 30 percent of all deaths in 2001 to 5.4 percent of all deaths in 2013, and GOS has set an ambitious target of reaching pre-elimination by 2018. The prevalence of HIV in Senegal remains low, estimated at below one percent in the adult population. Despite the low prevalence, there are high rates of HIV infection among key populations, including commercial sex workers (CSW) and men who have sex with men (MSM), estimated at 18 percent and 22 percent, respectively.

The coming phase of USAID health programming will be a transformative period for USAID assistance. The health program will place greater emphasis on health system strengthening at all levels, mitigate the
potential effects of climate change, and promote the use of public-private partnerships when possible. The use of partner country systems will be a major implementation approach, building on the Mission’s previous experience with government-to-government programming. USAID has historically focused efforts in health on women and children, and they will continue to be a major target of the program. In addition, USAID will make a concerted effort to address the needs of youth, the largest segment of the population, by changing the way the health sector provides services and engages with this population. Likewise, USAID will continue its strong emphasis on gender and has developed a portfolio-wide technical approach around gender.

The Senegalese population continues to suffer from high rates of infectious disease and preventable child and maternal deaths due to limited access to quality health services, suboptimal engagement by individuals and communities in the management of their health and health services, and an underperforming health system. The USAID/Senegal Development Objective 2 (the Health DO) seeks to improve the health status of the Senegalese population. In order to achieve this objective, health services must be sustainably improved and effectively utilized in order to reduce child and maternal mortality and contribute to an AIDS-free generation. The vision of the USAID Health Program is to make strategic investments to build country capacity that will have a sustainable impact on maternal and child mortality and key public health priorities.

The overall hypothesis of the Health DO is that if strategic investments are made to strengthen the management and performance of the health system, if access to high quality priority health services increases, and if engagement of individuals and communities in the management of their own health and health services increases, then the health status of women, children, and other vulnerable populations will be improved.

A healthy population is imperative in order to form a strong human resource foundation for Senegal’s economic development and therefore necessary to bring about long-term inclusive economic growth.

Details of the Health DO
The Results Framework shown in Figure 6 is designed to address the principal components of the development hypothesis through three Intermediate Results (IRs):

**IR 1:** Increased access to quality priority services and products;
**IR 2:** Increased commitment of individuals and communities in the management of their own health and services; and
**IR 3:** Improved performance of the health system.

Taken together, these three IRs will improve quality and expand access to services and products at the community and clinical/facility levels. USAID/Senegal will also create demand for those services and products to change behavior related to (among other things) antenatal care, insecticide-treated bed net ownership and use, complementary feeding practices, and family planning contraceptive use. The IRs further underscore the critical role of investments in health system strengthening to develop human resources, improve information and drugs/commodities management, raise local financing for the health sector, and enhance the capacities of service providers at the clinical/facility and community level. The Health DO will integrate programming of PMI, GHI, FTF, as well as the President’s Emergency Plan for AIDS Relief (PEPFAR).

These investments in health by USAID in Senegal are expected to result in the following major achievements:

- This investment will continue to drive significant improvements in child and maternal mortality, as well as having a substantial impact on reducing the total fertility rate.
USAID will transform the way in which assistance is provided in Senegal, by using and strengthening government systems to deliver improvements in health service delivery.

USAID investments will have a transformative impact on gender by changing social norms that negatively affect women and their ability to make decisions about their health and the health of their children.

What follows is a more detailed description of each IR and its causal relationship to the Health DO. The choice of activities contributing to the achievement of each IR is based on both recognized best practices as well as specific recommendations from program assessments and stakeholder meetings.

IR 1 places a new focus on strengthening the quality and availability of private sector health care services. IR 1 activities will consolidate interventions that support service delivery at the community and facility level, as well as access to health products—reinforcing an integrated, holistic approach to programming, as recommended in the 2014 performance evaluation of the health portfolio. The new IR 2 maintains the focus on increasing demand for health services through encouraging the adoption of healthy behaviors but adds a critical component to increase the commitment of individuals’ and communities’ to manage centralized health services. This addition reflects USAID’s emphasis on sustainability and governance in the health sector. The additional Sub-IR focuses on increasing community involvement in health systems management. Specific changes under IR 3 include a more robust focus on improving overall health system performance through targeted interventions to reinforce/strengthen information and data use, human resources, commodities management, and health care financing.
Figure 6: THE HEALTH DO results framework

USAID Senegal Health Office Results Framework 2016-2021

Goal (DO2): Improved Health Status of the Senegalese Population

Purpose: Health services are sustainably improved and effectively utilized to reduce child and maternal mortality and contribute to an AIDS free generation

IR1: Increased access to quality priority services and products
   - Sub IR1.1: Increased access to quality health services and products in the public sector
   - Sub IR1.2: Increased availability of quality private sector service delivery points and products

IR2: Increased commitment of individuals and communities in the management of their own health and health services
   - Sub IR2.1: Increased adoption of healthy behaviors
   - Sub IR2.2: Increased community involvement in health systems management

IR3: Improved performance of the health system
   - Sub IR3.1: Improved health system governance and finance
   - Sub IR3.2: Improved management and availability of qualified human resources
   - Sub IR3.3: Improved management of public health commodities
   - Sub IR3.4: Improved information and data use for decision-making
**Intermediate Result 1: Increased access to quality priority services and products**

Senegal has made significant progress in improving the health of its population, yet many challenges remain in the provision of high quality, priority services. Populations and subpopulations are confronted with numerous barriers to accessing quality services. Where services are available, the quality of care may not be in accordance with standards, which may result in both suboptimal health outcomes and create additional obstacles for people seeking care. In order to achieve IR 1, USAID will support high impact interventions in the regions identified for concentrated investment. These efforts will address key challenges in the health system, including but not limited to the following technical areas: maternal, newborn and child health; family planning and reproductive health; HIV; nutrition; malaria; neglected tropical diseases; and emerging illnesses. Activities will be targeted to appropriate populations, with a specific emphasis on adolescents, women, including pregnant women, and children under-five years of age. In regions where support is being consolidated, USAID will continue to support high impact interventions, but the modality of assistance will shift to other mechanisms, especially through Government to Government (G2G) programming.

**Intermediate Result 2: Increased commitment of individuals and communities in the management of their own health and health services**

In recognition of communities’ critical role to demand, engage, govern and benefit from improved quality health services, USAID is renewing emphasis on support to communities and districts within the seven regions of concentration. IR 2 will address sociocultural norms and practices that inhibit individual and family adoption of health seeking practices and behaviors by increasing demand for and adoption of healthy behaviors, and improving the participatory processes that safeguard those practices and behaviors. Evidence-based Social and Behavior Change Communications programs will be used to positively influence social dimensions of health and well-being, focusing on behaviors that reduce maternal and neonatal mortality through the support of community-level activities, mass media and new media, interpersonal communication, and information and communication technologies (ICT). At the local level, USAID will seek to build capacity across local civil society and government. Additionally, through strengthening the financial and organizational capacity of local government structures and communities, the local health system will be better managed, resulting in improved access and quality of health care. USAID will focus its investments in three areas, community engagement, support to UHC and mutuelles, and local governance strengthening, to address key challenges including insufficient human resources, poor management, insufficient resources at the local level, and lack of community participation.

**Intermediate Result 3: Improved performance of the health system**

Within the GOS’ PSE[1], the health sector plays a key role of contributing to social protection for tomorrow’s workforce by ensuring that all Senegalese have access to health services they need regardless of their ability to pay. Weaknesses in the performance of core functions in Senegal’s health system impede the rapid attainment of the shared national goals of ending preventable maternal, child and infectious disease mortality. Weak health system performance also threatens Senegal’s ability to sustain health impact. In order to achieve IR 3, USAID will work at the central and local levels to strengthen the health system’s capacity to perform core functions effectively, partnering with local governments and communities to improve health seeking behaviors and community engagement in health. USAID will work with regions of concentrated investment and regions where support is being consolidated primarily through G2G funding and complementary on-demand technical assistance focused on tackling a narrow set of persistent problems in health status. Policy and health systems strengthening work at the central level will benefit from the participation of concentration and consolidation regions to ensure that national decisions are aligned with local realities.

**The Health DO Approach**

Using a systems-wide approach, USAID interventions in the health sector will strengthen regional and national capacity to provide sustainable, quality health services. Key areas of intervention include the
delivery of a basic package of high-impact Reproductive, Maternal, Neonatal, and Child Health (RMNCH) services, the planning and management of human resources (HR) and pharmaceutical and equipment supply chain and logistics, and the management of data and health management information systems (HMIS). These interventions will advance the GOS and Agency goals to end preventable child and maternal mortality. USAID/Senegal will advance Senegal’s goal of universal health coverage (UHC), expand health services access, and reduce future disease burden. Increasing support to improve community level health services and strengthening local community and governance structures will build, finance, and sustain improved services. USAID will leverage its investments to increase GOS health sector contributions, currently estimated at four percent of total expenditures. Key results by the end of the 2021 include:

- Reduced Maternal Mortality Ratio (per 100,000) from 392 to 231;
- Reduced Under Five Mortality rate (per 1000 live births) from 54 to 33;
- Reduced Newborn mortality rate (per 1,000) from 19 to 12;
- Reduced Prevalence of Under Five Stunting (from 18%; targets TBD);
- Reduced Total fertility Rate (from 5.0, targets TBD);
- Increased enrollment and retention in mutuelles for UHC (Targets TBD).

The Health DO builds on USAID/Senegal’s comparative advantage in strengthening health service delivery as well as the successes achieved and lessons learned from the current CDCS. The intent of the Health DO is to reinforce Senegal’s successes in reducing infant and under-five mortality, reducing the rates of under-nutrition, and reducing the number of hospital visits due to malaria. These past achievements can be attributed to the scale up of child health interventions, especially but not exclusively the dramatic nationwide scale up of malaria control interventions. The National Malaria Control Program (PNLP) has set a target of pre-elimination by 2018, and reaching this goal will require targeted approaches to specific geographic areas and new interventions aimed at eliminating local transmission. As malaria decreases, surveillance will become increasingly important. This strategy will also address the persistent challenges of maternal mortality, the increasing stigma related to certain most-at-risk populations for HIV/AIDS, and health system bottlenecks that hinder access to quality health care and prevention services.

Historically, USAID has provided technical assistance, training, and commodities and equipment in every region of the country. As the capacity of local health providers, the rates of maternal mortality, and the indicators for under-five child health have improved in specific higher-performing regions, USAID has the opportunity to provide targeted investments in these parts of the country, referred to as regions of consolidation, to ensure continued gains. Regions of consolidation encompass Dakar, Fatick, Kaffrine, Kaolack, Louga, Thies, and Ziguinchor. In lower-performing regions, USAID has an opportunity to concentrate its investments to significantly impact the key drivers of child and maternal mortality. These regions of concentration include Diourbel, Kedougou, Kolda, Matam, St. Louis, Sidiou, and Tambacounda.

To achieve this DO, USAID Senegal will continue to support Senegal’s progressive health reform program based on UHC, decentralization of the health system, and greater inclusion of the private sector in providing health services and generating new revenue streams. This CDCS Update reinforces USAID’s commitment to strengthening the private sector, supporting decentralized structures and local communities, and providing more focused health systems strengthening and governance support. All activities will contribute to broad improvements in RMNCH as Senegal has been named one of 24 USAID priority countries for ending preventable child and maternal deaths (EPCMD).

In addition, as USAID/Senegal seeks to strengthen local systems across all development sectors, this next phase of Health programming will focus more robustly on deepening the engagement of individuals and local communities in the governance and financing of health services and community management of
health. Interventions will directly support civil society to ensure accountability of service providers and raise community awareness about the importance of taking ownership of and responsibility for their own health. An emphasis on health systems strengthening will continue but will pursue a more targeted approach to sustain improvements in the management of human resources for health, data for decision-making, commodities management, and health care financing.

The Health DO 2 will be implemented through five primary components, representative of an integrated approach to programming. The program’s five components and geographic scope are described below:

1. **Integrated Service Delivery and Healthy Behavior (ISD-HB):** The flagship service delivery component will ensure high impact interventions are implemented at scale in seven regions of concentrated investment. ISD-HB will directly support the achievement of IR 1 (increased access to health services), and sub-IR 2.1 through social and behavior change communications (SBCC) to change norms and behaviors essential to sustainable improvements in health. This component will also contribute to key outputs in IRs 2 and 3, and will collaborate with programs in other sectors, including education, agriculture, WASH, and democracy and governance. ISD-HB will also provide targeted assistance such as HIV prevention, care and treatment activities to the seven regions in which USAID support is being consolidated.

2. **Local Health Governance (LHG):** Complementing the ISD-HB, LHG will strengthen community involvement in the management of health services and improve accountability within the system. This component will directly support the achievement of sub IR 2.2 (increased community commitment in health systems management), and will contribute to key outputs in IRs 1 and 3. This component will collaborate closely with the strategy and any future IMs developed by the DRG team, in particular around a harmonized approach to strengthening local capacity.

3. **Health Systems Strengthening (HSS):** The HSS component will address several key aspects of the health system, focusing on governance, finance and health information. HSS will directly support the achievement of IR 3 (improved performance of the health system), and will play a key role in contributing to the achievement of IRs 1 and 3. It will also work primarily at the central level and will apply broadly to all regions of Senegal. Where appropriate, HSS will seek to apply some of the key policy developments in the seven regions receiving concentrated investment from USAID. The HSS component will collaborate closely with the ISD-HB component, drawing upon the technical expertise and field experience to inform the development of policies and standards.

4. **Private Sector Support:** This component will support the social marketing of key health products and seek to improve the regulatory environment, including access to mutuelles for private sector providers. These efforts will target larger population centers, primarily in regions receiving consolidated support.

5. **G2G Technical Assistance Provider and Data Hub (TAP):** This component will provide three important and mutually reinforcing services. First, it will support the Ministry of Health (MOH) with meeting the contractual and reporting requirements as specified in their G2G agreement with USAID. TAP will also support the MOH in its oversight function by ensuring MOH staff are able to access available data to improve oversight and management of the health sector. Second, it will provide “on-demand” technical assistance, drawn from public health experts affiliated with the ISD-HB component, to address specific technical and programmatic issues affecting the achievement of the G2G objectives. Third, it will serve as a data and information hub for the collection of key data on the progress of all components. The purpose is to house all of the data centrally to facilitate both planning and learning across projects. TAP will also streamline the myriad of reporting needs in Washington and in Senegal.
The USAID/Senegal health portfolio maintains the highly integrated program structure of the previous Health sub-strategy based on the successes identified through stakeholder meetings with Ministry of Health counterparts, health care service providers at the regional and district levels, and implementing partners. The Mission used the results of the 2005 DHS as well as the results of the 2010/2011 DHS and subsequent Continuous DHS to inform much of its new Health program. The data from the DHS focused USAID resources by illustrating the gaps in health service delivery and by demonstrating what behaviors to reinforce. Implementing a system-wide approach, the program will implement high impact interventions in maternal health/child health, and health/nutrition at the policy, clinical and community levels. These interventions will directly benefit women of reproductive age and children under five and will contribute to reductions in the corresponding rates of maternal and under-five child mortality rates.

However, the entire population will benefit indirectly from interventions in family planning, HIV/AIDS, and nutrition. As a PMI country, the entire population will also benefit from universal coverage activities as well as system strengthening activities to ensure the availability of malaria care and treatment services. In terms of specific target populations for interventions, the feminization of the HIV epidemic in Senegal necessitates a focus on women as well as a continued focus on most-at-risk populations and youth to avoid an explosion of the epidemic to the general population. Since youth aged 10-19 make up more than a quarter of the Senegalese population, USAID/Senegal will consciously target youth in its health programming, particularly in the areas of HIV/AIDS and reproductive health. These will include youth specific programs in education, economic growth, democracy and governance. A special focus will be placed on the particular need of youth to have access to “youth friendly” services and information both at the community level and through GOS health facilities. This is particularly relevant in the southern regions of the country where there are high rates of teenage pregnancy. This DO will continue to support work underway with the education sector at regional youth counseling centers to ensure this access.

The USAID program in Senegal is closely aligned with the overall objectives of the Government of Senegal, as outlined in the National Health Development Plan (PNDS) 2009-2018. The objectives of the PNDS include: (1) reduce maternal and child mortality; (2) increase the performance of the health sector in disease prevention and control; (3) sustainably strengthen the health system; and (4) improve the governance of the health sector. While organized somewhat differently, each of these elements is captured in the USAID Results Framework in Figure 6. The PNDS specifically calls attention to the quality of services provided as a central component to improving the health and well-being of the Senegalese population, and highlights the roles of both the health sector and local government in ensuring quality of care. USAID will directly support both improving quality of care and increasing the engagement of communities in the management of health services. USAID/Senegal will also continue to contribute to community health and directly support the objectives of the MOH’s National Community Health Strategy (PNSSC) 2014-2018, including expanding coverage, improving service quality and availability, and strengthening community and local government participation in health.

While interventions under this DO will continue to advance USAID’s long-term goals and objectives for the health sector, it includes “scaling up” evidence-based, high-impact health solutions, innovative approaches, and technologies to address key drivers of focus diseases, as well as a more strategic and targeted focus on youth, climate change, gender issues, the role of the private sector, and the use of direct government financing.

**Aid Effectiveness**

As illustrated above, the programming associated with the Health DO will complement the GOS’ Poverty Reduction Strategy Paper and the Senegal Health Development Plan 2009-2018. This DO’s solid foundation in the compendium of MOH health policy documents and strategic plans (e.g., National Road Map to Reducing Maternal Mortality, National Strategy for Child Survival, National Plan to Accelerate Progress in Family Planning and Reproductive Health) will ensure government ownership. The overall strategy was designed with greater aid effectiveness, especially local capacity building, in
mind. Central-level MOH personnel as well as district and regional-level personnel have been deeply involved in the strategy’s conception and will be involved in its implementation. For this new strategy, stronger emphasis has been placed on providing direct assistance to several MOH divisions and programs. Through such investments, USAID/Senegal intends to improve the capacity of the Ministry’s current human resource base and to improve the accountability and transparency of the specific host country systems to which they are aligned.

As a part of the Health Sector Donors Working Group, USAID/Senegal is committed to the principles of the Paris Declaration and continuing the robust dialogue with other development partners working in the health sector to assure that its efforts are complementary and remain aligned with GOS priorities. USAID/Senegal will play an important role in facilitating joint planning, management and guidance of health sector investments among the development partners. During the course of program implementation, other development partners will be funding and implementing programs that will contribute to the attainment of the Development Objective and Intermediate Results.

In Senegal, multi- and bilateral donors, including USAID, the World Bank, the Belgian Development Agency (CTB), Luxemburg Development Agency (LuxDev), the Japanese International Cooperation Agency (JICA), the World Health Organization (WHO), UNICEF, UNFPA, the Gates Foundation and other non-profit organizations, account for an estimated 19 percent of all financing to the health sector. USAID/Senegal is the largest donor in the health sector, and plays a leadership role on several donor coordination groups in the health sector and included the other leading health donors in many key consultations. USAID has held extensive consultations with these stakeholders as part of the development of the 2016-2021 project appraisal document and sought to incorporate this feedback into the design process. Many development partners will be revising and updating their strategic plans in Senegal over the coming years, and USAID will communicate clearly the objectives and areas of focus for its program in order for these partners to likewise take this into consideration when developing their future plans.

Activities under this DO will build important linkages between the Health DO and the Citizen Participation DO activities. For example, the Mission will continue to provide support nutrition activities in the Mission’s FTF Project. Strengthening RMNCH services and referral mechanisms for a continuum of care between the community and the health facility improves the nutritional status of mothers and children. In coordination with the Citizen Participation DO, this DO will support the Ministry of Education with the development and introduction of a reproductive health curriculum for secondary schools, in addition to supporting an integrated service delivery activity that will strengthen local governance of the health system. Adolescents will also benefit from improved youth-friendly health services at the post and health center levels in three overlapping regions.

Critical Assumptions and risks
Significant changes to the political stability of the country and the GOS’ financial and political support could impact Senegal’s health indicators and health sector performance, along with USAID/Senegal’s ability to achieve the Health DO and its IRs. These factors include the GOS’ continuing effort to undertake and fund policy reforms over the medium term. Key policy reforms for the health sector include the recently passed (2014) Act III of Decentralization, which will increase local level responsibility for the provision and funding of health services. Currently, decentralized health service units do not align with the newly empowered decentralized administrative units, and—in order to comply with the act—important compromises will have to be made among powerful doctors’ unions, ministry representatives, and locally elected officials to bring the two into alignment. If the health sector delays implementing these reforms, major breakdowns could occur in the flow of health financing from the central level to the intended recipient facilities.

Senegal and the entire West African region have been rocked over the past 12 months by an Ebola epidemic of heretofore unseen proportions. This epidemic revealed fundamental health system and
border control weaknesses that allowed the epidemic to spiral out of control and ultimately reach the United States and Europe. Although somewhat checked as of April 2015, Ebola cases continue to propagate in Sierra Leone and in Guinea, which shares Senegal’s southeastern border. Any resurgence in Ebola—or spread of a similar infectious, pandemic disease—could severely derail Senegal’s health progress, as health care workers and central MOH officials are re-deployed to respond to an imminent threat. USAID/Senegal, through the Global Health Security Initiative, will support Senegal in its Ebola prevention efforts and other pandemic preparedness activities.

Although Senegal’s economy has been growing, food costs and food security are a mounting concern. In a similar vein, reduced incomes may divert beneficiary attention away from paying for health services, to more basic needs. Lastly, within the context of a global economic downturn, this program assumes that resources from the USG will remain constant and those complementary resources from other key donors remain strong.

Climate change is certain to impact the fragile ecosystems and health status of the Senegalese population overtime. In response to the threats of climate change, and in keeping with current literature, the USAID/Senegal Health Program takes a system-wide approach to adaptation and views climate change as a stressor placed on the health system as a whole. Through the Health Systems Strengthening Component, USAID/Senegal will raise the awareness of stakeholders in the Ministry of Health on how to mitigate the threat posed by climate change. A reinforced health system, capable of responding to a host of stressors, will be adaptable to climactic variables that have an impact on human health.

**CDCS Development Objective 3: More effective citizen participation in the management of public affairs at the national and local levels**

**Overview**

The development hypothesis for Development Objective 3 (the Citizen Participation DO) assumes that the foundational skills gained through education will empower citizens to better understand and more effectively participate in Senegal’s political processes. The hypothesis also assumes that a robust and inclusive political framework will encourage citizens to contribute to their country’s democratic governance. Neither IR alone is sufficient to achieve the Development Objective; both are needed to produce “more effective citizen participation.” The Citizen Participation DO is a multi-sectoral effort to strengthen Senegal’s human and institutional capacities.

**The overall hypothesis of the Citizen Participation DO is that if democratic governance processes at both local and national levels are strengthened, and if children and youth are equipped with the foundational skills necessary to better access and understand critical information, then citizens will be able to participate more effectively in their society and to contribute more meaningfully to Senegal’s development.**

Toward that aim, greater equitable access and educational attainment will be promoted for children and youth, empowering them with fundamental skills for greater civic engagement throughout their lives. Consistent with the USAID Education Strategy, USAID/Senegal will focus on improving reading skills in primary grades 1-3, increasing equitable access to education in the conflict-prone regions of Southern Senegal, as well as strengthening performance of the system for improved delivery of basic education services. At the same time, democratic structures will be strengthened to afford citizens the opportunity to engage with their government more effectively. A strong emphasis will be placed on supporting national-level democratic reforms and local level governance. Key local level governance activities will be implemented in collaboration with THE EG DO and THE HEALTH DO. Development Objective 3 supports several national strategies, including: the 2013-2025 national Program to Improve Quality, Equity, and Transparency in the Education sector, implementation of the decentralization law, adopting international standards on transparency and accountability, as well as plans to increase institutional and human resource capacity.
Between 2007 and 2011, USAID/Senegal commissioned a number of analyses to inform the development of this new strategy including a 2009 conflict risk assessment, a 2010 gender assessment, a 2010 urban assessment, a 2011 youth assessment, and a 2012 DRG assessment. In developing and updating the Citizen Participation DO, USAID/Senegal reviewed these studies, as well as issues such as Senegal’s demographic, economic, and political dynamics including employment, urbanization, the job market, the potential for conflict, corruption, and the strength of Senegal’s democracy and civil society organizations. Additionally, USAID/Senegal conducted institutional reviews of the Ministry of Education and of the public school system to assess the quality and relevance of education, as well as the financial management capacity of the Ministry. The Mission also determined the capacity of regulatory agencies to determine which institutions were best positioned to increase transparency and accountability.


Details of Development Objective 3

Development Objective 3 has two, integrated IRs to reach its objective of more effective citizen participation:

- **IR 1**: Better educated children and youth; and
- **IR 2**: Strengthened responsive democratic governance.

**Figure 7: Citizen Participation DO results framework**

DO3: More effective citizen participation in the management of public affairs at the national and local levels

- **IR 1**: Better educated children and youth
  - Sub-IR 1.1: Improved early grade reading performance
  - Sub-IR 1.2: Improved education system performance
  - Sub-IR 1.3: Increased equitable access to education in conflict-affected regions

- **IR 2**: Strengthened democratic governance
  - Sub-IR 2.1: Increased citizen engagement in government processes
  - Sub-IR 2.2: Strengthened effective local governance (cross-cutting)
  - Sub-IR 2.3: Improved national government transparency and accountability
Planned interventions support the GOS’ PSE 2014-2018, such as improving the quality of education, transferring resources and competencies to local-level government, undertaking public administration reforms to promote transparency, accountability and better governance, and consolidating peace and security. Interventions will: address the needs of vulnerable groups (youth, residents of the Casamance and Kedougou, and children in non-formal religious schools); support Senegal’s decentralization efforts; strengthen democratic processes and anti-corruption systems; mitigate the risk of conflict at the community level through improving access to education in conflict-affected regions; and improve reading outcomes for primary school learners in the early grades. USAID/Senegal will address these issues by building on existing institutions, strengthening the capacity of civil society, and build political will of the government, private sector, and local communities to education.

Achieving effective citizen participation requires investments in human capital through education and strengthened democratic governance. A functioning democracy requires a literate population and, through its education interventions, USAID/Senegal will empower Senegalese children and youth with some of the foundational skills needed to participate in the country’s political and economic systems. In alignment with the USAID Education Strategy, USAID/Senegal basic education resources will be directed toward improving early grade reading outcomes in primary grades 1-3 in targeted regions and toward increasing equitable access to education in the conflict affected southern regions.

However, even educated citizens will not feel empowered to participate in the civic affairs of their country if they believe that their actions will be stymied by a corrupt government or rendered ineffective by an active, but at times disorganized, civil society. In particular, the country’s growing youth population needs a “voice” in economic and political life, and Mission activities under YALI will seek to engage youth appropriately and build leadership in this age group. USAID/Senegal will therefore complement its education interventions with activities that promote more responsive government by working with the GOS to increase efficacy, transparency and accountability. Efforts to improve decentralization will be fostered in part through sectoral activities, the success of whose programs hinge on the successful implementation of fiscal decentralization and transfer of competencies and responsibilities to the local level.

Intermediate Result 1: Better educated children and youth are key to transforming individuals from constituents to active citizens, allowing them to participate meaningfully in the economic and political life of their country. At the heart of building a more effective citizenry is ensuring that every child has the ability to read. As global statistics show,15 people of voting age with a primary education are more likely to support democracy than people with no education. Educated citizens are better able to articulate and advocate for their development priorities, lead political parties and civil society groups, and are more likely to be tolerant and promote tolerance. Their participation will be more effective and will lead to innovative solutions to assist poor and vulnerable populations, a key focus of USAID’s programming. Educated citizens are also more likely to access information and communication technologies that provide a window to the world at large, allowing them to review their country’s place in the international community and to better understand its political, social and economic strengths and weaknesses.

Despite impressive gains in access to education, particularly at the primary grade level, Senegal still continues to see poor educational outcomes for students in primary and lower secondary levels (middle school). Although the national primary school Gross Enrollment Rate increased from almost 76 percent in 2003 to 93 percent in 2013,16 the percentage drops sharply to 58 percent for middle school level.17 Additionally, the quality of education in primary and middle school has diminished as access has increased, which, if not addressed, could have severe economic and democratic consequences. In practice, this means that only about 6 percent of the children who enter first grade will finish middle school, often because they are ill-prepared at the primary level to advance on to the middle school level. According to a recent independent assessment, boys and girls in 3rd grade are reading below fluency in French, with nearly one in five unable to read a single word of a short text.18 Despite this, students are
often passed into higher grades without having the requisite skills, contributing to the dropout rate at higher levels. Additionally, a large number of students who attend informal religious schools receive little or no instruction in foundational subject areas, making them vulnerable to future economic hardship.

In accordance with Government of Senegal priorities and in alignment with the 2011-2015 USAID Education Strategy, USAID/Senegal will focus on improving the reading skills of learners in grades 1-3 in select local languages and in targeted regions of the country. USAID/Senegal will work closely with the Ministry of Education to develop relevant reading materials and pilot local language instruction, eventually introducing French instruction, in these early grades. Also in line with the USAID Education Strategy, USAID/Senegal will leverage its experiences gained since 2003 increasing access to middle schools throughout Senegal and refocus these activities on equitable access in the conflict-affected Casamance region and conflict-prone Kedougou/Tambacounda areas.

Informed by various analyses of the Education sector\textsuperscript{19}, USAID/Senegal’s education efforts are multi-pronged to provide children and youth with targeted support in areas of noted deficiencies. As such, USAID/Senegal will focus resources on three complementary areas to tackle the barriers to developing better educated children and youth in Senegal.

First, USAID/Senegal will improve the reading performance of primary school students in select regions of the country by working closely with the Ministry to develop and implement a reading curriculum and materials delivered in local languages spoken in target regions. The importance of educating children initially in a native language, where possible, to allow for earlier comprehension and a smoother transition into other languages in subsequent years cannot be understated and has proven to be the most effective way to teach children to read.\textsuperscript{20} Although still politically-sensitive in segments of the population, the GOS understands the need to support local language instruction, having adopted a policy to provide local language reading instruction in the Ministry of Education’s multi-year strategy (PAQUET), thus USAID will work hand-in-hand with the GOS to communicate the benefits of the revised instruction in local languages in order to promote essential buy-in.

Second, any improvement in reading instruction delivery will only be sustained by increasing the performance of Senegal’s education system. While there have been substantial gains in this area and certain capacity does exist, the ability of government offices to support and manage education remains limited by weak planning and management skills, recurrent teacher strikes, a lack of transparency and accountability, and a relatively low supply of experienced teachers, especially female teachers. In order to promote sustainability, USAID/Senegal will focus a portion of its efforts on strengthening the capacity of the Senegalese educational system. Efficient functioning of the education system in Senegal is not reliant solely on the capacity of the GOS, but also on that of local communities and civil society to play their role. Specific activities will therefore build the management, fiduciary responsiveness, and leadership capacity of civil society organizations, which will also contribute to stronger relationships with community and religious leaders. The education program intends to use community capacity building as one of its strategies in which to create community-level behavioral change that will facilitate sustainability. USAID interventions also will improve the capacity of the Senegalese education system at decentralized levels in the southern, conflict-affected zone to develop and deliver quality education services to learners and school communities.

Third, USAID/Senegal will increase equitable access to basic education for marginalized groups and conflict-affected and vulnerable populations in Southern Senegal, including the three regions of the Casamance, and the Kedougou/Tambacounda regions. USAID will focus support on out-of-school youth,
children in non-formal schools, and girls transitioning to middle school. For the past 30 years, the southern Casamance region has suffered from an ongoing conflict between the Government of Senegal and the Movement of Democratic Forces of Casamance (MFDC), an armed separatist group. Insecurity continues to plague this region as it bears the social, political, and economic consequences of decades of unrest. The potential for violent conflict in Kedougou/Tambacounda regions related to the mining sector is high. Riots in previous years have resulted in injuries and one death, and while some attempts on the part of the GOS have been made to mitigate the negative effects of the mining sector on society, tensions remain high and could boil over into a full conflict if not addressed. In this region, USAID will continue to support the GOS’ construction of middle schools to reduce extremely long commutes that present security risks, especially for girls; support activities that improve the delivery of quality education in foundational subjects; increase community participation in school governance, and reduce the number of out-of-school youth potentially drawn to the rebel movement or to alternative employment in or around the mining sector. USAID/Senegal will infuse activities that counter gender-

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19 Analyses that informed this strategy include the 2009 Quality of Education Assessment, 2011 Youth Assessment, and program evaluations.
20 Citation from Reading PAD evidence here.
based violence and improve conflict mitigation into local-level governance of the education sector in order to reduce incidences of violence and build resilience.

**Intermediate Result 2: Strengthened responsive democratic governance** will allow more citizens to participate in democracy process, promote protection of political rights and civil liberties, and increase transparency and accountability of public administration. Since the approval of the current CDCS, Senegal has made many positive steps towards improving and consolidating its democracy and democratic institutions.

Senegalese civil society demonstrated its strength and resolve in ensuring the peaceful transfer of power through elections widely considered as free and fair, and subsequent election of the reform-minded President Macky Sall started Senegal on a path of ambitious democratic reforms aimed at promoting transparency, accountability and decentralization. While important gains have been made, complex issues remain that could compromise or even unravel them.

The 2012 Democracy, Human Rights and Governance Assessment, the 2007 Corruption Assessment, the 2009 Conflict Assessment, the 2010 Civil Society Environment Assessment, the NGO Sustainability Study, as well as previous and on-going democracy, governance, and conflict program evaluations have informed this strategy update. To achieve results, USAID/Senegal will continue to support improving government transparency and accountability at the national level and strengthening effective local governance in collaboration with other sector interventions in the country. USAID will also integrate core DRG principles into education, health, and economic growth projects/programs.

USAID/Senegal will seek out opportunities with the greatest potential to improve democratic governance in the national government, local governments, civil society organizations, media groups, and the private sector.

At the national level, USAID will support civil society to play a more effective oversight role, increase awareness of the impact of mismanagement and their role in good governance including transparent electoral processes. USAID will help strengthen the capacity of regulatory and oversight agencies to promote policy and institutional reforms and to carry out their mandates to prevent corruption and ensure good governance. This includes assistance to the OFNAC, the Ministries in charge of the Promotion of Good Governance, Women's affairs, and Local Governance; and for the implementation of key policy reforms and legislation such as these institutions and efforts are in their nascent stages and will need bolstering to play their intended role.

At the local level, USAID will strengthen the capacity of local governments to effectively carry out their mandate. With the ongoing decentralization process, the success of all DOs hinges partly on the successful transfer of requisite functions, funds, and human resources from the central to the local level. To this end, USAID/Senegal has integrated good governance activities, into all the DOs, and will continue this to support development outcomes in other sectors. Simultaneously, USAID will enhance the capacity of civil society organizations to lobby for reform as well as engage with and monitor local governments. Toward that aim, USAID will enhance the ability of local governments to raise and manage revenues, improve transparency and accountability, and deliver quality services while mobilizing citizens to oversee how funds are spent.

Positive strides have been made toward peace in the Casamance with instances of reported violence the lowest in years.21 Two of the three factions of the rebel movement are ready to enter into a peace dialogue with the GOS, but no formal peace agreement has been signed, continuing the stalemate of “no peace, no war.” Some of the original economic and social grievances remain, and people in the region feel that the focus of power and resources is still at the national level. Despite the positive trend, the pace of the peace and regional development remain slow in the eyes of many observers and residents of the region. The people still see themselves as marginalized and are looking to the government to

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21 Need citation here.
address security and development challenges. Failure to do so could derail the ongoing peace building efforts.

The Mission has been focusing resources on promoting economic growth, health, education, and governance in the region and is increasing collaboration among all USAID programs in the Casamance. By investing in the Casamance, USAID/Senegal reduces the local population’s sense of marginalization, a grievance which led to the conflict, and contribute to improving livelihoods in conflict affected communities. USAID’s programs also increase local community conflict mitigation capacity. USAID conflict resolution support was successful in helping local communities to mitigate conflict that had potential to turn violent. In addition to social sector assistance, the Mission will implement small-scale peace-building activities at the community level if DCHA/CMM central funds are available. Development Objective 3 will reinforce local good governance practices, support decentralization processes (especially fiscal decentralization, and public service delivery), and work with communities affected by the Casamance conflict in reconciliation efforts.

A number of gender-related constraints inhibit women from fully participating in civic life and local governance. Although the implementation of the gender parity law has substantially increased the number of women in elected government bodies, they still face serious constraints in accessing leadership positions within their respective institutions. This is due, among other things, to social prejudice, and lack of capacity or experience. Furthermore, they are often marginalized or discriminated against when attempting to access, control or profit from local resources, technical training, and technology. USAID/Senegal plans to address gender issues by ensuring greater involvement of women’s organizations to advocate for peace, stability, and good governance as well as by including men at every step of the process to ensure the needs of both genders are met. Additionally, USAID/Senegal plans to address gender barriers by:

- developing a mentoring program that links women who are moving into local government positions with women who have already occupied positions;
- providing functional capacity building assistance to women in local and national elected government bodies; and
- establishing new programs to support women’s empowerment and leadership.

USAID/Senegal will continue to promote human rights principles through a participatory, bottom-up approach as part of the Mission’s governance efforts to create an enabling environment in which to raise and ultimately address (among other things) human rights concerns in a manner that is culturally acceptable and sustainable.

**Aid Effectiveness**
USAID/Senegal will uphold the principles of the Paris Declaration by supporting GOS strategies and, where possible, channeling aid through local institutions strengthens and use the private sector. As opportunities arise, activities will support host country systems where possible national and local levels and through local non-governmental organizations. Resources will be devoted to enhancing technical and institutional capabilities. USAID/Senegal will also engage other representatives of civil society, as well as citizens at large, to promote greater grassroots ownership and engagement in development activities.

Under the Civic Participation DO, the Mission will work with a number of ministries including Education, Promotion of Good Governance, Women’s Affairs, and Local Governance. Additional relevant partners include the Autonomous Electoral Commission, the Bureau Organisation et Methodes (part of the Presidency), OFNAC, the National Agency to Re-launch Activities in the Casamance, the

22 Afrique Enjeux annual report 2014, DIRECT program.
23 The entity that replaced the Delegation to Reform the State. It is in charge of leading government reform processes.
A number of donor organizations actively support Senegal’s efforts to improve basic education, including: the World Bank, the JICA, the French Development Agency, the African Development Bank, and the Canadian Department of Foreign Affairs, Trade, and Development. USAID/Senegal ended its three year term as chair of the Education donor working group in February 2015, but will remain an active member of this group as one of the largest bilateral donors in the sector. USAID chairs the donor group for the Casamance and is an active member of the decentralization group. USAID is a lead donor supporting increased national level transparency and accountability. The European Union and Germany work closely with the USG in the area of support for the electoral process, Casamance and decentralization. Decentralization is also supported by Spain, Canada, and France.

In education, USAID/Senegal will continue to leverage private sector resources through public-private partnerships with local and international firms. Democracy and governance efforts will be closely coordinated with the U.S. Embassy and other U.S. Government entities on issues related to policy dialogue which requires support from the highest levels of the Senegalese government.

Critical Assumptions and Risks
Competing political priorities, transition, and continued conflict in the Casamance are constraints to educating Senegal’s children and youth and strengthening governance. To mitigate these issues, the Citizen Participation DO builds demand for improvements through private citizens, government employees, organized civil society, and the media. In this extended strategy period, increased emphasis is put on strengthening public resource management and service delivery to balance demand side interventions. In addition, the Citizen Participation DO will need the GOS and other donors to continue investing in both efforts, as well as to continue working in partnership to implement activities, improve institutional management and monitor capacities at the decentralized level. Necessary reforms to support the Citizen Participation DO include: full implementation of the new decentralization law, local government strengthening, providing OFNAC and the Inspector General with the required support to carry out their mandates, implementation of the new transparency code, support for a policy that introduces adoption of curriculum in early grade reading in local languages, policies that reduce the risk of teacher strikes, enhanced education system policy reforms that promote greater engagement, accountability and transparency by community and civil society, and development and institutionalization of a culture of evaluation and assessment.

3. MONITORING, EVALUATION AND LEARNING
All development efforts should enable individuals to thrive within their communities. USAID activities will increase opportunities for better jobs, healthcare, education, and good governance. UNDP’s Human Development Index (HDI) provides a multi-dimensional measure of well-being by combining indicators of life expectancy, educational attainment, and income into a composite human development index. Therefore, the HDI will serve as the indicator for the CDCS goal and will be monitored yearly through UNDP’s annual Human Development Report. For more information about the HDI, please refer to http://hdr.undp.org/en/statistics/hdi/.

USAID/Senegal concluded that three Development Objectives are necessary and sufficient to the achievement of its CDCS goal: The well-being of Senegal’s citizens improved.
The attainment of the DOs and IRs will be measured against DO-level indicators as well as IR-level indicators. Annex B specifies indicators that will measure progress toward achievement of the DO. USAID/Senegal will add to the listed indicators, as appropriate, specific sex-disaggregated indicators to capture the change in men’s and women’s relative positions in outcomes such as economic participation and opportunity, educational attainment, political empowerment, health, civil liberties, and ownership rights. The data will be collected from qualitative sources, such as interviews and focus groups, and from existing secondary data sources.

Implementing partners are primarily responsible for collecting implementation-related data and submitting them to USAID/Senegal through periodic activity reports. Overall, the approaches to data collection will emphasize (a) local capacity building and institutionalization to promote sustainability; (b) dialogue, consultation, coordination, and alignment with host country institutions and organizations to ensure ownership; and (c) joint funding of data collection efforts. Partnerships with multiple stakeholders, including other USG agencies, donors, implementers, targeted GOS offices, and local nongovernmental organizations is crucial to ensure more vigorous and sustained efforts to data collection. This participatory approach lays the foundation for increased efficiency and ownership by successfully engaging all parties and sharing responsibilities for monitoring and information gathering activities.

It is in the interest of USAID/Senegal to partner, to coordinate, and to align with various stakeholders as most of the data for DO-level indicators originate from secondary sources and cannot be collected on an annual basis due to complexity and cost considerations. In this respect, USAID/Senegal will work closely with the relevant government offices at all levels to institutionalize data collection, processing, analysis and reporting to ensure timely availability of data to track performance and inform decision making processes.

USAID/Senegal is also committed to strengthening capacity within the National Agency for Statistics and Demography (ANSD). USAID/Senegal contributes to data collection budgets and provides the technical assistance to ensure timely availability of data that meet validity, reliability, timeliness, precision, and integrity quality standards. USAID’s M&E Specialist will support ANSD as it implements Senegal’s first continuous DHS and support the agency as it transitions from a system of traditional keying to the use of handheld devices to capture data. USAID will also strengthen Senegal’s Health Management Information System (HMIS) by building capacity of health district/regions in M&E through trainings in data collection, analysis, dissemination, and use for informing decision making at the local level. To enhance the use of data, there will be quarterly reviews and presentations to locally elected officials who are the cornerstones for sustaining the HMIS.

USAID/Senegal is fully committed to meaningful and timely evaluation and research that will inform decision making, taking advantage of the annual Performance Plan and Report (PPR) to list complete and planned evaluations. For all studies, the processes include (a) consultations with a wide range of stakeholders to agree on the terms of reference, research questions, and data collection tools; (b) organization of in/out-briefings by the study teams for USAID, implementers, and the GOS; (c) sharing of draft reports for comments; and (d) wide dissemination of the final reports.

Structure of M&E team

USAID/Senegal has two full-time Foreign Service National M&E specialists. Implementing partners have recruited M&E staff to satisfactorily monitor and evaluate interventions. USAID/Senegal will also put in place a Mission-wide monitoring and evaluation support services contract that will provide ongoing services for performance and impact evaluations, in addition to other evaluative studies and assessments. This standardized approach will improve the efficiency and quality of planning for and conducting evaluations.
Portfolio-wide evaluation questions include, but are not limited to, the following:

- Does USAID achieve the highest development result when all three DOs are present in the same region as compared to places where the DOs operate in isolation?
- What are the obstacles to coordination and achieving the highest ultimate result when the DOs operate in the same region?

**Economic Growth DO** high priority evaluation questions include, but are not limited to, the following:

- How do improvements in WASH contribute to reductions in malnutrition?
- What interventions (policy and regulatory reform; institutional strengthening; market development; public-private partnerships, etc.) contribute most to increased private sector investment in agriculture?
- Is USAID’s impact on the incomes of the rural poor greater with a comprehensive approach to value chain development for only a few commodities as opposed to an approach focused on the smaller segment of the chain for several commodities?

**Health DO** high priority evaluation questions include, but are not limited to, the following:

- What is the effectiveness of key interventions, including SBCC, to promote the adoption of health care seeking and healthy behaviors?
- How can Senegal best prepare for health impacts related to climate change and emerging illnesses, as well as the epidemiological and demographic transition with increasing levels of preventable chronic diseases in the general population?
- Do health centers operating under a Performance-Based Financing scheme have better health outcomes?

**Citizen Participation DO** high priority evaluation questions include, but are not limited to, the following:

- To what extent have early grade reading outcomes improved better or worse when local language is used as the language of instruction?
- What are the lessons learned and effectiveness of various approaches to sustainability and country ownership, including transferring programs and financing local government and communities?

USAID/Senegal has identified the above questions as possible topics for impact evaluations and will determine which questions to address depending on the management needs of the Mission. In addition, the Mission will undertake impact evaluations of the FTF program. As required, USAID/Senegal will partly or entirely fund complementary studies from which information can be drawn to establish and inform baseline data. The 2014 Continuous DHS is now complete and provides baseline impact and outcome level data for health. The World Food Programme-led livelihood survey will provide food vulnerability-related data.

Throughout the Program Cycle, USAID/Senegal will promote a culture of Collaborating, Learning, and Adapting (CLA) and will update this CDCS as new learning occurs so that shifts can be made to ensure maximum development impact. USAID/Senegal will embed continuous assessment and a learning agenda in its project design and implementation and will adapt its approach based on new findings.
Every effort will be made to integrate learning and knowledge sharing throughout the entire Foreign Assistance portfolio in Senegal, across and within technical sectors, to promote optimal use of resources and foster information sharing among partners and donors.
### ANNEX A. M&E TABLE

<table>
<thead>
<tr>
<th>Result level</th>
<th>Indicator statement</th>
<th>Baselines</th>
<th>Targets</th>
<th>Data Collection</th>
<th>Method</th>
<th>Periodicity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Goal: The well-being of Senegal’s citizens improved.</td>
<td>Human Dev’t Index (HDI) value</td>
<td>2012</td>
<td>0.47</td>
<td>0.5</td>
<td>0.51</td>
<td>0.52</td>
</tr>
<tr>
<td></td>
<td>Percent growth in GDP</td>
<td>2011</td>
<td>2.60</td>
<td>6.4</td>
<td>6.9</td>
<td>7.0</td>
</tr>
<tr>
<td>DO I: Increased inclusive economic growth</td>
<td>Percent growth in agricultural GDP</td>
<td>2011</td>
<td>-21.60</td>
<td>8.1%</td>
<td>8.6%</td>
<td>9.8%</td>
</tr>
<tr>
<td></td>
<td>Percent of people living with on less than $1.25/day</td>
<td>2012</td>
<td>33.64</td>
<td>29.6%</td>
<td>28.3%</td>
<td>26.9%</td>
</tr>
<tr>
<td>IR I.1: Inclusive agriculture sector growth</td>
<td>Daily per capita expenditure (as a proxy for income) ($)</td>
<td>2012</td>
<td>2.23</td>
<td>2.62</td>
<td>2.75</td>
<td>2.88</td>
</tr>
<tr>
<td></td>
<td># of farmers and others who have applied improved technologies or management practices as a result of USG assistance</td>
<td>2011</td>
<td>45,633</td>
<td>71,042</td>
<td>72,000</td>
<td>72,000</td>
</tr>
<tr>
<td>Result level</td>
<td>Indicator statement</td>
<td>Baselines</td>
<td></td>
<td>Targets</td>
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<td>Data Collection</td>
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<tr>
<td></td>
<td></td>
<td>Year</td>
<td>Value</td>
<td>2015</td>
<td>2016</td>
<td>2017</td>
</tr>
<tr>
<td>IR 1.1: Inclusive agriculture sector growth</td>
<td>Value of agricultural and rural loans ($)</td>
<td>2011</td>
<td>13,838,809</td>
<td>26,000,000</td>
<td>26,000,000</td>
<td>26,000,000</td>
</tr>
<tr>
<td>IR 1.2: Increased private sector trade</td>
<td>Value of sales attributed to FTF implementation ($)</td>
<td>2011</td>
<td>9,080,395</td>
<td>23,200,000</td>
<td>42,189,000</td>
<td>60,394,000</td>
</tr>
<tr>
<td>IR 1.3: Improved management of natural resources</td>
<td># of stakeholders with increased capacity to adapt to the impacts of climate variability and change as a result of USG assistance</td>
<td>2011</td>
<td>0</td>
<td>53,581</td>
<td>55,000</td>
<td>55,000</td>
</tr>
<tr>
<td>IR 1.4: Improved nutritional status, especially of women and children</td>
<td>Prevalence of stunted children under five years of age</td>
<td>2012</td>
<td>25.05</td>
<td>22.04%</td>
<td>21.04%</td>
<td>20.04%</td>
</tr>
<tr>
<td></td>
<td>Prevalence of wasted children under five years of age</td>
<td>2012</td>
<td>9.16</td>
<td>8.06%</td>
<td>7.69%</td>
<td>7.33%</td>
</tr>
<tr>
<td></td>
<td>Prevalence of underweight women</td>
<td>2012</td>
<td>22.32</td>
<td>19.64%</td>
<td>18.75%</td>
<td>17.86%</td>
</tr>
</tbody>
</table>

* Assumes a conversion rate of $1\rightarrow 500$ CFAF
<table>
<thead>
<tr>
<th>Result level</th>
<th>Indicator statement</th>
<th>Baselines</th>
<th>Targets</th>
<th>Data Collection</th>
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<tbody>
<tr>
<td></td>
<td></td>
<td>Year</td>
<td>Value</td>
<td>2015</td>
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<td></td>
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<tr>
<td>DO 2:</td>
<td>Maternal mortality rate (per 1,000)</td>
<td>2010</td>
<td>392</td>
<td>287</td>
</tr>
<tr>
<td>Improved</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>health status of Senegalese population</td>
<td>Under five mortality rate (per 1,000)</td>
<td>2010</td>
<td>72</td>
<td>44</td>
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<tr>
<td></td>
<td>Neonatal Mortality Rate (per 1,000)</td>
<td>2010</td>
<td>29</td>
<td>16</td>
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<tr>
<td>IR 2.1:</td>
<td>Contraceptive Prevalence Rate (modern methods)</td>
<td>2010</td>
<td>12%</td>
<td>27%</td>
</tr>
<tr>
<td>Increased</td>
<td></td>
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<tr>
<td>access to</td>
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<td>quality</td>
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<td>services and</td>
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<tr>
<td>products</td>
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<tr>
<td></td>
<td>Number of children who fully vaccinated (received DPT3 vaccine) by 12 months of age</td>
<td>2011</td>
<td>242,418</td>
<td>90%</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Percent of providers complying with national guidelines for labor and delivery visits</td>
<td>2013</td>
<td>36</td>
<td>70%</td>
</tr>
<tr>
<td>Result level</td>
<td>Indicator statement</td>
<td>Baselines</td>
<td>Targets</td>
<td>Data Collection</td>
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<tr>
<td></td>
<td><strong>IR 2.2:</strong> Increased commitment of individuals and communities in the management of their own health and health services</td>
<td></td>
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</tr>
<tr>
<td></td>
<td>Percent of the contribution of <em>collectivités locales</em> allocated and spent</td>
<td>2015 TBD</td>
<td>N/A</td>
<td>TBD</td>
</tr>
<tr>
<td></td>
<td>Number of people covered by health financing arrangements</td>
<td>2011 182,842</td>
<td>410,000</td>
<td>510,000</td>
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<td></td>
<td></td>
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<td></td>
<td><strong>IR 2.3:</strong> Improved performance of the health system</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>Incidence of stock out of RMNCH products</td>
<td>2010 75%</td>
<td>30%</td>
<td>25%</td>
</tr>
<tr>
<td></td>
<td>Out of pocket spending as share of total health expenditures</td>
<td>2015 TBD</td>
<td>N/A</td>
<td>TBD</td>
</tr>
<tr>
<td>Result level</td>
<td>Indicator statement</td>
<td>Baselines</td>
<td>Targets</td>
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<tr>
<td><strong>DO 3:</strong> More effective citizen participation in the management of public affairs at the national and local levels</td>
<td>Ibrahim Index of African Governance</td>
<td>2010 56/100</td>
<td>2015 65/100</td>
<td>2016 66/100</td>
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<tr>
<td><strong>IR 3.1:</strong> Better educated youth</td>
<td>Percent of grade 2 students that can read and understand grade level text</td>
<td>2012 Total: 46% N/A</td>
<td>2015 47.0%</td>
<td>2016 49.0%</td>
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<tr>
<td></td>
<td>Number of learners enrolled in USG-supported middle schools and/or equivalent non-formal settings (disaggregated by sex, grade and region)</td>
<td>2012 Total: 132,404 N/A</td>
<td>2015 156,335</td>
<td>2016 175,096</td>
</tr>
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<tr>
<td>Result level</td>
<td>Indicator statement</td>
<td>Baselines</td>
<td>Targets</td>
<td>Data Collection</td>
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<td>Year</td>
<td>Value</td>
<td>2015</td>
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<tr>
<td></td>
<td>Percent of citizen who have never contacted any local government councilor about some important problem or to give them their views</td>
<td>2013</td>
<td>80%</td>
<td>75%</td>
</tr>
<tr>
<td></td>
<td>Corruption Perception Index</td>
<td>2012</td>
<td>36%</td>
<td>44%</td>
</tr>
</tbody>
</table>

Extended through: April 20, 2020