

Facts – CHAD

- Child Mortality : 103 per 1,000 live births (2004)
- Maternal mortality: 1,099 per 100,000 live births (2004)
- Malaria, Acute Respiratory Infections (ARI) and diarrhoea have been the first cause of under-five child mortality and morbidity for over ten years.
- Malnutrition is the underlying cause for 50% of morbidity and mortality in the under-five age group.
- Prevalence of global acute malnutrition (GAM) is 14.5% nationwide. GAM rates however can jump up to 23% in some regions, including Kanem and Guéra.
- National immunisation coverage has never exceeded 80%. DCT3 coverage in 2007 was 52.7% and only 45.1% of children had completed their entire vaccination course.
- The wild polio virus is still in circulation in Chad, with 21 cases in 2007 rising to 38 in 2008.
- Rates for first prenatal consultation were 51.23% in 2007.
- During the same period, VAT2 coverage among pregnant women was at 58.71%.
- And only 26% of births were assisted by qualified staff.
- Only 4 out of 10 women have benefited from malaria prophylaxis during their pregnancy.

Main achievements in 2008:

Expanded Immunization Program Plus (EPI Plus):

- Adoption of the ACSD – Accelerated Strategy for Child Survival and Development.
- Implementation of the National Plan for Sanitary Development (Plan National de Développement Sanitaire)
- Immunization support has yielded the following results per vaccination type : BCG : 39%, DTC1 : 72% et DTC3 : 52%, VPO3 : 43%, VAR : 58%, VAA : 54% et VAT2+FE : 58%.
- 95% of children vaccinated against polio.

Nutrition:

- 30 social workers and health workers, 20 members of women's networks and 48 women's association's members trained the promotion of breastfeeding.

Integrated Management of Childhood Diseases (IMCD):

- 48 social mobilization liaison workers trained on the promotion of essential family practices for IMCD and equipped with social mobilisation tools.

PNC Plus and Malaria :

- Training of 141 health workers from Health Centres in 7 Health Districts and 41 Hospital Officers on management of malaria according to the new protocol for Intermittent Presumptive Treatment for expecting mothers.

Priority actions to be implemented in 2009:

EPI Plus:

- Support for EPI planning and Supplementary Immunization Activities (SIAs).

- Training of 300 health workers on management of the EPI programme and of a central health officer at the Ministry of Health on management of EPI data and information.
- Equipment of Health Centres with 59 motorbikes, 43 cold chain fridges and equipment of ACSC Districts with freezers, generators and a 4x4 vehicle at central district level.
- Support to social mobilisation in favour of routine EPI and SIAs.
- Support in the creation of educational materials and in advanced vaccination strategy activities.
- Support in evaluating the immunization coverage in ACSD areas.
- Procurement in vaccines, EPI consumables, Insecticide Treated Nets (ITNs), Vitamin A, Medendazol, etc.

PNC Plus and Malaria

- Training of an additional 300 health staff in the 12 remaining health districts and of 120 hospital and health centre administrators in Emergency Neonatal and Obstetric Care, (EMONC) plus 100 administrators in malaria management, combined with IT training for a further 30 administrators.
- Defining an action and implementation plan for 2009 for support of reproductive health and EMONC activities within regional health directorates and health districts.
- Review and adoption of communication tools in reproductive health, and conduct communication and advocacy in favour of reproductive health and roll back of malaria.
- Procurement and distribution of 18 delivery kits, 18 obstetrical equipment kits and 18 consumable kits combined with drugs and diagnostic consumables as well as ITNs for PNC Plus and Malaria activities. Procurement of a 4x4 vehicle and 3 motorbikes to benefit the national programme for malaria eradication.
- Support to national institutions in the supervision of reproductive health and roll-back malaria activities at all levels and support of internal/external coordination among national health structures.

IMCD:

- 24 Trainers inside the different districts supported and trained in the new IMCD protocols to strengthen IMCD at local levels.
- Support in training 120 Community Health Workers in Community IMCD approaches in 9 different IMCD zones as well as in 5 refugee camps and in the districts of Goré and Danamadji.
- Procurement and distribution inside the different health districts of Vitamin A, Mebendazol, Praziquantel, Calcium Hypochlorite as well as medical and administrative consumables.
- National Strategy Document for IMCD adopted and implemented in supported districts.
- Sensitization and promotion of the use of Oral Rehydration Salts and Zinc as key family health practices.