

UNICEF Chad Monthly Humanitarian Situation Report, March 2014

Highlights

- More than 91,000 people have taken refuge in Chad following the escalating violence in the Central African Republic (CAR) (OCHA, March 28- 2014).
- Urgent needs of returnees from CAR remain: shelter, food, health, protection and water, sanitation and hygiene (WASH).
- The nutrition situation in some returnees' sites is alarming. Prevalence of acute malnutrition exceeds the emergency threshold of 15% in the sites of Doba and Doyaba.
- In the Sahel belt of Chad, 20,684 Severe Acute Malnutrition new admissions have been registered as of February, representing 21.6% of the 135,533 admissions expected in 2014.
- A CAR Situation Inter-Agency Sub-regional Appeal is being prepared, led by UNHCR. This appeal will complement humanitarian needs outlined in the SRP.
- 15 of the 28 health districts (out of 72 in the country) affected in 2014 by a measles outbreak have been already covered by immunization campaign.
- 780,709 children (6 to 59 month) have been vaccinated during the measles immunization campaign in the 15 first-affected health districts.
- 13 additional districts are currently experiencing measles outbreaks and are awaiting a mop-up campaign. The preparation process of the measles campaign is underway to ensure 100% coverage of at risk population (602,682 children 6-59 months).
- The Country Office is seeking funding for reimbursement of US \$700,000 borrowed from other funding sources to support measles immunization campaign in the 15 districts.

CHILDREN AFFECTED

2,200,000

CHILDREN WITH SEVERE ACUTE MALNUTRITION

135,533

2014 APPEAL

US\$ 62.5 million^(*)

TOTAL FUNDING GAP

US\$ 46.2 million

GAP PER SECTOR (In US\$ million)

23.4 **14.6** **3.5**
Nutrition Health/HIV WASH

2.9 **1.6**
Education Child Protection

(*) 2014 UNICEF appeal is being revised in light of the UNHCR-led sub-regional appeal for CAR refugees.



Health post set up by UNICEF in the site of Doyaba in southern Chad. As of end of March, more than 27,000 curative consultations were conducted and 33,000 children vaccinated in the sites.

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Situation overview and Humanitarian Needs

Estimated Affected Population <i>(Estimates calculated based on initial figures from the General Population Census RGPH- INSEED 2009, SMART Survey August 2013,)</i>			
Categories	Total	Male	Female
Total Affected Population	5,500,000	2,788,700	2,711,500
Children Affected (Under 18)	2,200,000	1,115,400	1,084,600
Children Under Five	1,001,000	507,507	493,493
Children 6 to 23 months	299,750	151,973	147,777
Pregnant women with Moderate Acute Malnutrition (MAM)	88,000	-	88,000
Children Under Five with Severe Acute Malnutrition (SAM)	135,533	67,767	67,766
Children Under Five with SAM and medical complications	20,000	10,000	10,000
Children Under Five with Moderate Acute Malnutrition (MAM)	300,547	152,377	148,170
Returnees and Internal Displaced Persons (IDPs)	92,000	46,644	45,356
Returnees from CAR	91,000	44,590	46,410
Refugees	407,834	227,511	180,633

Chad is currently facing simultaneous acute emergencies, which are stretching response capacity and current funding levels.

Influx of Refugees and Returnees from CAR

More than 91,000 people have taken refuge in Chad following the escalating violence in Central African Republic (CAR) since December 2013. This population is mainly made up of Chadian migrants, most of whom have lost all ties with their country of origin, and includes 12,000 new refugees from CAR.

Since March 2013, 30,000 refugees and 22,000 returnees have been registered in and around the eastern remote border town of Tissi (more than 18 sites). The region has been characterized by chronic instability since 2004. Thus, basic social services are non-existent, with most of them destroyed or damaged during the 2004-2006 civil war and ethnic tension in the Sila region.

Among the priority needs are: access to potable water, hygiene promotion, education, child protection, health and nutritional care for children and women. One of the major concerns is the overall protection of right holders as the continued conflict in the neighboring, troubled Sudanese region of Darfur could further spill-over into Chad.

The influx of refugees from CAR continues as a result of political and security instability. Currently, a total of 8,944 new refugees are settled in the existing Dosseye refugee camp (from March 2013 to February 2014) near the southern city of Gore.

Nutrition Crisis

Global acute malnutrition in the Chadian Sahel is chronically hovering around emergency thresholds. The latest post-harvest SMART survey (April 2014) indicates a Severe Acute Malnutrition prevalence that exceeds the emergency threshold in the region of Batha (3.9%) and the BEG (2.4%). The prevalence of GAM varies from 6.8% in Hadjer Lamis to 13.3% in the region of Batha. It is anticipated that the situation will worsen during the upcoming lean season. Chronic malnutrition rates are incredibly high in all the regions varying between 21% in Ndjamenana and 46% in the Kanem.

Potential Impact of Nigeria Crackdown on Boko-Haram.

Between 18th and 21st of April 2013, an influx estimated at 1,200 Chadian nationals fleeing attacks of the Nigerian armed forces in Bagakawa returned to landing villages of Ngouboua, Bagasola and

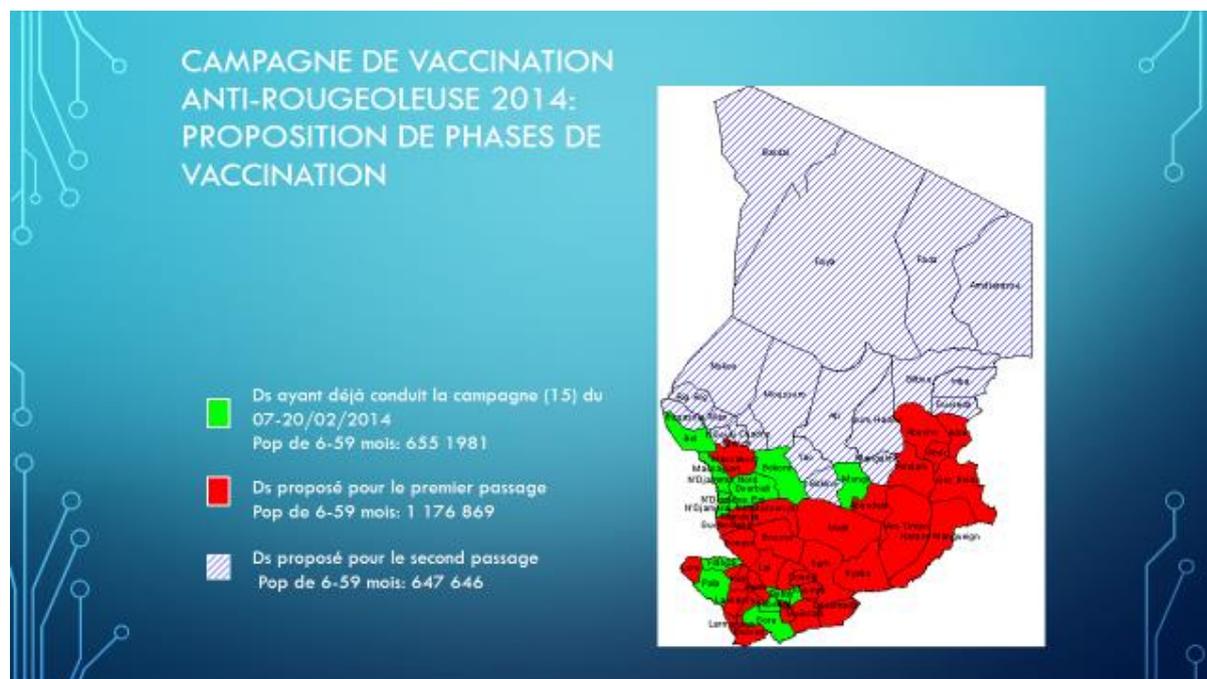
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Thoukoutalia in the Lac Region of Chad. The majority (93%) of the returnees are minors (all boys) aged between 6 and 18 years. These boys are alleged to have been sent to Bagakawa by their Chadian parents to attend Koranic schools (Madrassas).

Mao Zonal Office has responded to immediate needs in support of local authorities mainly to prevent and respond to malaria outbreak, floods and cholera epidemic.

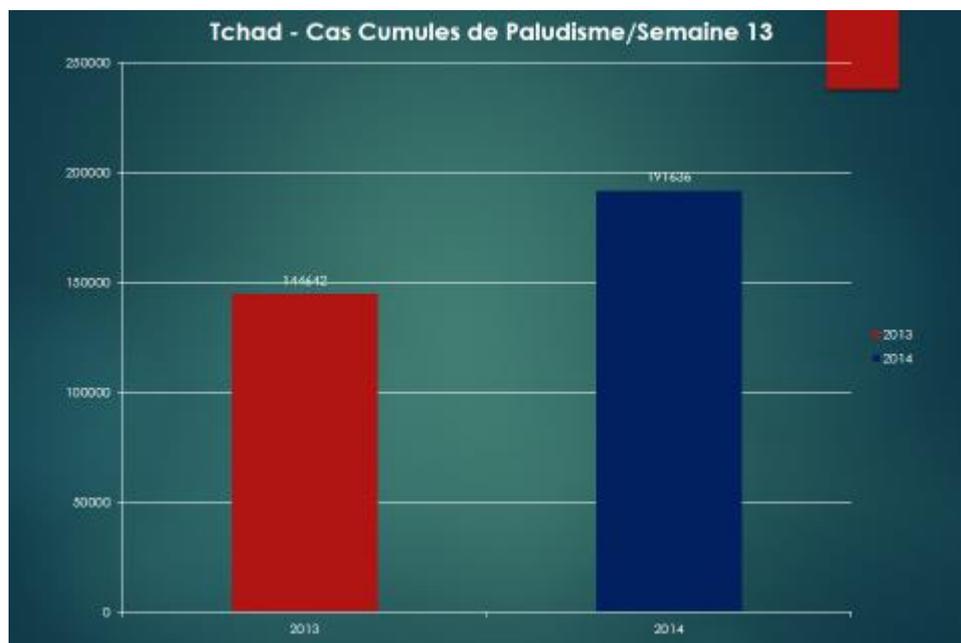
Outbreaks & Epidemics

Chad is known to experience recurrent outbreaks of diseases such as measles, meningitis, and cholera. Due to the combined efforts of Communication for Development (C4D) and prevention measures, Chad has not faced an outbreak of cholera since 2011. However, in January 2014, 15 health districts declared a measles outbreak. A mass vaccination campaign against measles was successfully undertaken in these 15 health districts, resulting in 780,709 children (including 15,000 in returnees' sites) immunized against measles. 13 additional districts reported new cases of measles. The country is seeking additional funding for another campaign to cover the 13 districts.



As of week 13, the cumulative number of malaria cases reported is 191,636 compared to 144,642 in 2013. The national diseases surveillance system indicates an increase of malaria cases in six districts, mainly in N'Djamena, the capital city.

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Interagency collaboration and partnerships

Inter-Agency

- Humanitarian Country Team (HCT) meetings are held on a monthly basis and are chaired by the United Nations Resident Coordinator and Humanitarian Coordinator.
- In the regions, monthly coordination crisis committee meetings are held in Kanem, Batha, Salamat and Guerra regions as well as in the humanitarian site of Tissi.
- UNHCR is leading a sub-regional inter-agency appeal for the CAR situation. This inter agency appeal, involving all relevant stakeholders through the different clusters, focuses on the CAR response situation in neighboring countries. For Chad, this interagency appeal includes all populations fleeing CAR. It is a complementary appeal to the Strategic Response Plan (SRP), reinforcing fundraising efforts for all sectors involved in the response. Donors on various levels have requested a coordinated appeal.

Clusters

- UNICEF, as the lead agency for WASH, Education and Nutrition clusters as well as the Child Protection sub clusters, continues to play an active role in coordinating humanitarian response in Chad. Clusters' meetings are held on a monthly basis to discuss all issues of interest for all stakeholders.
- The inter-cluster meeting is regularly held for data sharing, epidemic surveillance, implementation of coordination mechanism and security issues.

Partnership for emergency intervention in Tissi, Sila Region

- Since May 2013, UNICEF is supporting emergency activities with partners in Tissi Sub-district, addressing the needs of refugees, returnees and host communities in the area. For a second phase of the emergency interventions (January-June 2014), UNICEF intends to build a consortium of partners (national NGOs) in order to enhance coordination and programme integration, and for an efficient use of available resources.

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- During the month of January 2014, two child protection sub-cluster meetings were organized by UNICEF. The meetings resulted in the setting-up of child protection priority needs and an emergency response plan. Members of the sub-cluster agreed on resources required to respond to the emergency and also developed Standard Operating Procedures (SOPs) for family tracing and reunification. UNICEF, working with CARE International, supported the Ministry of Social Affairs to finalize funding proposals aiming at the response to child protection needs. These needs are especially focused on family tracing and reunification and also address the psychosocial needs of returnee children currently in 6 sites in Ndjamena and Southern Chad. Advocacy and fundraising activities were conducted with support from the regional office through the visit of the child protection regional advisor.

UNICEF Programme Response

RESULTS STATUS		UNICEF 2014 Target	UNICEF total results	%	Cluster 2014 Target	Cluster Total Results	
SAHEL NUTRITION CRISIS	NUTRITION						
	Children under 5 with severe acute malnutrition admitted into therapeutic feeding programme	135,333	20,684	15.28%	135,333	20,684	15.28%
	Number of Health Centres with integrated nutrition program	516	503	97.5%	516	503	97.5%
	HEALTH						
	Children <1 receiving measles vaccination in Eastern Chad refugees camps.	15,858	1,809	11.48%			
	WASH						
	Number of Health Centres delivering the WASH in NUT packages	247	56	23%	300	84	28%
	# of SAM affected carer/mothers and children who receive hygiene kits with key hygiene messages	135,333	20,684	15.28%	135,333	45,871	33.89%
	CHILD PROTECTION						
	# of children with SAM who received psychosocial care	3,290	0	%	3,290	0	%
EDUCATION							
Emergency-affected children (including adolescents) access quality education including through temporary learning structures	340,000	Result unknown at time of report	%	340,000		%	
CAR CRISIS	NUTRITION						
	# Children under 5 with severe acute malnutrition admitted into therapeutic feeding programme	13,533	863	6.4%	15,533	863	6.4%
HEALTH							

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RESULTS STATUS	UNICEF 2014 Target	UNICEF total results	%	Cluster 2014 Target	Cluster Total Results	
# Children 6 month-15 years receiving measles vaccination in returnees' sites	27,000	22,204	81.5%			
WASH						
# returnees accessing water facilities at minimum SPHERE standards	50,000	35,427	71%	75,000		
# returnees accessing sanitation facilities at minimum SPHERE standards	50,000	23,222	46%	75,000		
CHILD PROTECTION						
# Receiving psychosocial support in child friendly spaces	7,000	4,000	57%	7,000	4,000	57%
# UASC identified, registered and documented	2,000	976	48.8%	1,400	976	48.8%
# UASC reunified with their families	2,000	402	20.1%	1,400	402	20.1%
EDUCATION						
# school age children reintegrated in school	42,280	5,368	12%			
# children benefiting from child friend space activities	42,280	0	0%			

UNICEF Operational Partners: MOH, ACF, MSF-CH, Merlin, ALIMA, IRC DHRU, SECADEV, MSF-CH, DRAS, FRC, IMC, MSF-H, BASE, IAS, ADRA, MOUSTAGBAL, Nagdaro, ACORD, IRW, CRF, CRT, CELIAF, CSSI, IHPD, UFEP.

N.B: 45 871 children who received hygiene kit and hygiene key message are combined by children with severe and moderate acute malnutrition

Narrative and analysis of results



NUTRITION

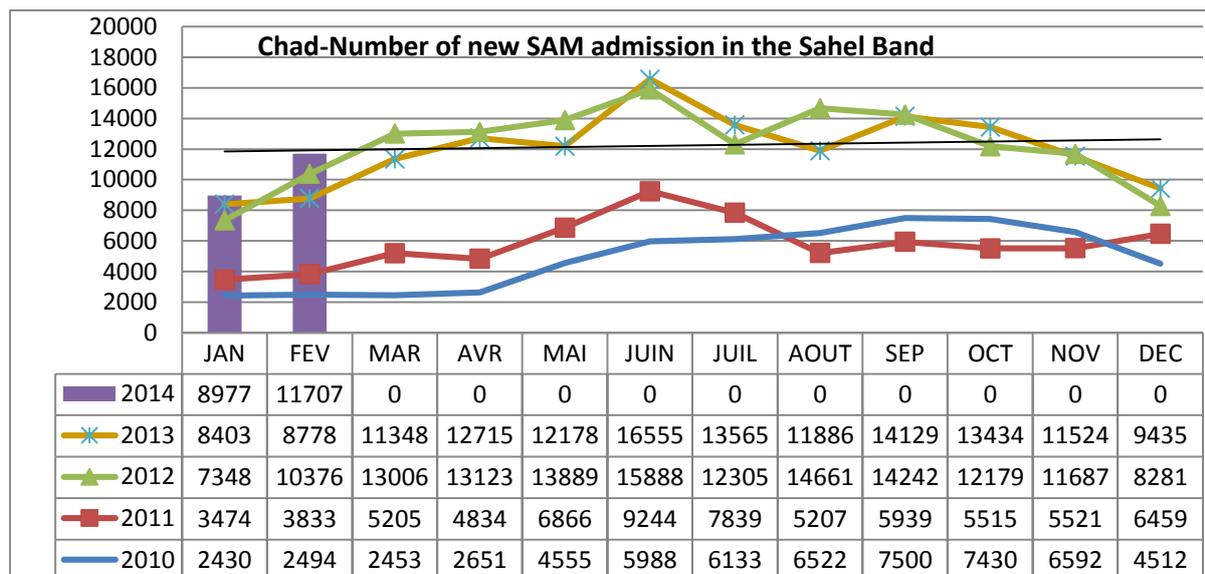
The Nutrition situation on returnee sites is alarming. Prevalence of acute malnutrition exceeds the emergency threshold of 15% in most of the sites.

Site and Date of screening	Screened	MUAC < 115 mm	MUAC ≥ 115 mm < 125 mm	% SAM	% GAM
Doyaba (21/03/14)	1777	84	173	5%	15%
Doba (29/03/14)	739	59	91	8%	20%
Bitoye	323	17	39	5%	17%
Mbaibokum	118	12	28	10%	24%
Gore (31/03/14)	1349	14	39	1%	4%

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Global acute malnutrition in the Chadian Sahel is chronically hovering around emergency thresholds. Severe Acute Malnutrition rates in under-five children remains above emergency levels in the Sahel belt regions (SMART Survey, January 2014).

The number of admissions in Nutrition rehabilitation Units in the Sahel Belt has increased since the beginning of 2014. Between January and February, 20,684 children with SAM were treated, representing an increase of 26% compared to the same period in 2013.



HEALTH

Additional health needs are resulting from the crisis in CAR. As the national health system in Chad is weak, UNICEF CO and other partners have supported the country undertake a systematic immunization of children against measles and polio with Vitamin A supplementation and deworming. People aged 1-29 years are immunized against meningitis and pregnant women are immunized against tetanus. UNICEF has signed programme cooperation agreements with several national NGOs, such as CSSI (Centre de Support en Santé International) and International Rescue Committee (IRC) for health and nutrition activities in the sites of returnees from CAR. 27,810 curative consultations were conducted and 33,675 children vaccinated in CAR returnees' sites.

HIV AIDS needs assessment in returnees' sites

With UNICEF support, the National Council for AIDS Response conducted an assessment in all the returnees' sites in the southern Chad. Based on the identified needs, a response plan is under development with the participation of relevant stakeholders.

HIV AIDS response

9,700 HIV tests have been distributed to health districts to cover testing needs including the refugees and returnees camps in the east and the south (700 tests in the East districts including Tissi, 3,000 in Moyen Chari including Doyaba camps, 3,000 in Logone oriental including Gore sites and Camps and 3,000 in Logone Occidental including Moundou sites).

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235 pregnant women have been tested in refugee camps and returnees sites: one out the 90 pregnant women tested in the East regions including Tissi was HIV positive. She received antiretroviral (ARV) prophylaxis for Prevention of Mother-To-Child Transmission (PMTCT). In the south returnees' sites, 145 pregnant women have been tested (47 in Doba, 71 in Goré and 27 in Moundou). Five women who tested HIV positive received ARV prophylaxis for PMTCT (4 in Doba and 1 in Goré).

The network of health community workers identified 32 people previously on HIV care and treatment in CAR. They were referred to health centers where they continue to receive antiretroviral drug treatment (15 in Doyaba, 3 in Goré, 11 in Bitoye and 3 in Moundou). In addition, 687 young people and 382 pregnant women participated in HIV and AIDS awareness and sensitization sessions organized by the Chadian Red Cross in Moundou and Goré sites.



Over the past two months, UNICEF strengthened its WASH response both in health and nutrition centers as well as in response to Central African returnees. 50 blocks of latrines and 58 water points fitted with pumps have been constructed in health centers as well as distribution of Non-Food Items (NFI) and water treatment products to 30,891 mother/child affected by malnutrition. Among cluster members beyond the government, only ACF is active in "WASH in Nut" in regions of Bahr El Gazel and Kanem where they are able to provide WASH in Nut package for 14,871 mother/malnourished children in villages and 28 health centers.

With regards to CAR returnees, 30 boreholes with 2 motorized pumping systems have been installed in returnees' sites among which major sites are Doyaba, Sido and Zafaye. In Tissi, the construction of 30 new water points is underway, in addition to the previous water points. However, despite the progress made, the overall context of the intervention remains challenging as the situation evolves quickly. In fact, most of the facilities installed by UNICEF are designed for emergencies and for settlements considered as transit sites. But the sites become sites of longer stays of returnees, and population in each site has been growing considerably since then, thereby creating strong pressure on the facilities.

The sanitation and hygiene component coverage is as low as 31% on average, even though the present condition of some sites (fenced and initially designed for other purpose such as schools, hospitals and military camps) has not allowed for further construction of sanitation facilities, as they are small and over-crowded. On the other hand, despite the need to extend the water and sanitation coverage in all sites, no WASH actor is present in the sites except those working in partnership with UNICEF, such as CARE International and Chadian Red Cross, further highlighting the gap in terms of presence of actors.

The modest level of funding has been, for most of WASH cluster members, the major cause of non-effective action on the field. It is expected that the creation on new sites will make it possible to shelter the majority of returnees in these sites (Danemadja and Doyaba 2) and to enable better planning and coverage in terms of water, sanitation and hygiene activities.

The pre-positioning of stocks in the high risk region for cholera and flood was started in March and continuing in April.

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Table: WASH coverage levels in CAR returnees sites

SITE	POPULATION	ACCES A L'EAU		LATRINES		PARTENAIRES
		Réalisation	Couverture	Réalisation	Couverture	
GORE	6.875	03 Forages manuels	22%	66 Latrines (ancien site)	48%	UNICEF, CARE, CRT, DH
SIDO	11.199	06 Forages manuels + 01 AEP de 100m3	100%	85 Latrines	38%	UNICEF, CARE, DH
DOYABA	17.000	09 Forages manuels + 02 AEP de 90m3	79%	177 Latrines 52 Douches	52%	UNICEF, CRT, DH
SALAMAT	5.000	1	10%	05	04%	UNICEF, DH
DOBA	6.185	05 Forages manuels	40%	25 Latrines	20%	UNICEF, CARE, CRT, DH
MBITOYE	2000	02 Forage Manuel	50%	10 Latrines et 10 Douches	25%	UNICEF, CARE
MOUNDOU	872	01 Forage manuel + 1 Mini-AEP de 16m3	100%	25 Latrines et 25 Douches	100%	UNICEF, CRT, DH
NDJAMENA	4.356	09 Forages Manuel + 02 AEP 20m3	100%	100 Latrines et 80 Douches	92%	UNICEF, SID, CRT, DH
	53 487		M: 66%		M: 43%	

NB: The number of returnees varies day to day, this calculation was based on the last registration in the sites there has two weeks with total returnees were 53 487 persons.

EDUCATION

UNICEF has liaised with the Ministry of Education for the establishment of a primary school in the site of Doyaba where, according to the latest IMO census, some 10,540 school aged children are settled. Likewise, 705 temporary learning spaces will be gradually established on the sites and in the existing schools, as it suits, to cater for some 42,000 children including host, returnee and refugee children. These learning centers include 200 early childhood development spaces serving at least 6,000 children aged 3 to 5 years.

UNICEF has dispatched school materials including 610 DRC kits to benefit 24,400 students and 100 sets of didactic materials for primary school teachers.

In order to help students who discontinued their schooling owing to the crisis, some catch-up courses will be jointly organized with local Ministry of Education following refresher training of some 100 potential teachers identified among the returnees and refugees on the site of Doyaba.

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CHILD PROTECTION

Unaccompanied and Separated Children

The emergency resulting from the displacement of Chadians from Bangui into Chad has caused family separation of 976 (401 female; 575 male) children. Unaccompanied and separated children (UASC) have been systematically registered and documented by UNICEF and its partners. A total of 402 spontaneous reunifications have been recorded without either parents or the extended families of the children. UNICEF and its partners have provided shelter, with daily meals, clothing, games to 262 unaccompanied children and 315 vulnerable children in 3 transit camps. Photo tracing has been launched between the sites.

Psychosocial support through child friendly spaces:

Over 4,000 children living in the 4 major sites in the southern region of Chad benefitted from psychosocial support activities provided in the different child friendly spaces supported by UNICEF and its partners. Activities are allowing children to establish a sense of normalcy following the atrocities and displacement in CAR. In addition, 150 children recovering from severe malnutrition in Tissi, Hadjer Lamis and Abeche continued to attend therapeutic play activities in child friendly spaces run by UNICEF and the Ministry of Social Action.

Capacity Building

Child protection training targeting key partners involved in IDTR process (Identification, Documentation, Tracing and Reunification) such as the Ministry of Social Action, CARE, IOM, Chadian Red Cross and IHDL has been completed in Sarh from 25 to 28 March. 25 “animateurs” (5 women, 20 Men) benefitted from a 4-day training that included a day of simulation and field work in Doyaba to run *recherche active* and photo tracing activities. The training focused mainly on the IDTR process, and UASC issues, as well as the legal framework of child protection in emergency work.

Children Associated with Armed Forces and Groups

The Government of Chad detained 46 children in Koro-Toro prison located in the north of the country. All 46 children are allegedly Central African citizens who were associated with Séléka forces and detained in Chad in early February along with 200 adults. UNICEF drafted a *Protocole d'Accord* for the handover of children detained during military operations (on security-related charges) or any other children associated with armed forces or groups detained by Chadian authorities, regardless of their countries of origin, to be signed by the Chadian Government and the UN. The draft was reviewed by the Office of the UN Resident Coordinator and the Chadian Ministry of Foreign Affairs, and is expected to be signed soon. The Chadian Government has agreed to handover the children to UNICEF, and a joint verification mission will be deployed to Koro-Toro in April. UNICEF is in the process of supporting the establishment of an interim care centre to assist the children once they are released. The centre will be managed by the Chadian Ministry of Social Welfare during the 1st month, before implementing partners will be identified.

Monitoring and Reporting Mechanism (MRM)

Central African children who are victims of the six grave violations have fled to neighbouring countries such as Chad and Cameroon, either with their families or on their own. This includes children associated with Séléka forces who have crossed borders along with their commanders after leaving cantonment sites in CAR, following the mass exodus of Muslim communities. Given the cross-border dimension of the CAR crisis, there is a need to link up the MRM in CAR and in Chad, not only to properly monitor and report on the six grave violations, but also to inform the child protection response in both countries. This will entail collecting information in transit sites in southern Chad and relaying the information to the CAR MRM. UNICEF is planning to train monitors from within NGOs already working in the transit sites

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in southern Chad, to collect MRM-related information. Challenges will include issues of confidentiality, safe and secure information management, and linking the collection of information to response.

COMMUNICATION FOR DEVELOPMENT

Communication for Development (C4D) support in response to humanitarian interventions in the Chadian returnees and refugees camps in southern Chad focused on the promotion of key life-saving practices such as proper hand washing, proper hygiene and sanitation, the use of latrines and exclusive breastfeeding. These interventions aimed at preventing diseases that could further worsen the conditions of returnees and refugees in transit camps.

A partnership agreement was signed with a local women's group, "Union des Femmes pour la Paix" (UFEP) for the promotion of essential family practices in the transit camps in Moundou, Gore, Doba and Bitoye. Fifty-two community relays have been recruited and trained to carry out behavior change activities which focused mainly on exclusive breastfeeding and proper hygiene and sanitation including proper hand washing and the use of latrines. In terms of the number of people sensitized, UFEP community relays have so far reached out to over 10,000 people in the Moundou, Bitoye, Gore and Doba camps.

At Doyaba camp, C4D activities have focused on routine immunization, the prevention of open air defecation, proper hand washing and exclusive breastfeeding. Implementing partners in the Doyaba camp include IRC, CRT, CARE and the Regional Health Delegation. Communication for behavior change activities are carried out by community relays who have been selected among the returnees and local populations. They have so far reached out to over 750 households (about 7000 people) in the camp with messages on lifesaving practices including the use of available health services provided by the government with the support of partners such as UNICEF.

In terms of community participation in the promotion of live-saving practices, several meetings have been organized with community leaders and influential people in the returnees' community to ensure their participation in the promotion of hygiene and sanitation and the use of available health services. Over 30 community leaders have been sensitized to that effect and have committed themselves to the promotion of these practices.

The communication for behavior change activities carried out in the various transit camps have contributed significantly in promoting the use of health services by the returnees' populations and in reducing the risks of transmission of diseases. As a result of these combined efforts, no disease outbreak has been reported in any of the camps since the beginning of the humanitarian response late in 2013. In terms of perspectives, efforts to promote proper hygiene and sanitation and the use of health services will be strengthened in the camps and in the surrounding local communities. Communication challenges will be higher in the coming months with the advent of the rainy session which will increase the risks for the transmission of water borne diseases.

VISIBILITY AND COMMUNICATION

In order to increase the visibility of UNICEF interventions in response to the complex emergencies the country is facing, UNICEF Chad, with the support of the UNICEF South Africa Service Unit, has produced a series of video documentation on emergencies (nutrition crisis, immunization, CAR refugees) which were widely disseminated through the UNICEF Global network and published on the UNICEF Global website, in December 2013 and January 2014: [In Chad, vaccine takes a long journey to save a life](#); [A mother flees in search of safety, again – this time in Chad](#). [In Chad, fighting a nutrition crisis is far from simple](#). A [web story](#) has been also produced by UNICEF Chad and disseminated by

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the DG-ECHO through its web blog during the launching of the Nobel Peace Prize in Tissi, eastern Chad, where tens of thousands of refugees are settled.

On the people fleeing the violence from CAR into Chad, a series of media pieces (webstory and press release) have been produced and widely disseminated through the UNICEF Global network with the support of UNICEF RO and UNICEF DOC HQ: [An influx of returnees raises humanitarian needs in Chad](#); [Over 76,000 people displaced from Central African Republic into Chad facing crisis](#). UNICEF Chad has also produced its country office [newsletter focused on the influx of people fleeing the violence in Chad](#), shared with UNICEF national committees and widely disseminated at country level. Series of media products (video and human interest stories) have been also used for social media purpose ([Facebook](#) and [twitter](#)).

In terms of media outreach, UNICEF Chad has facilitated a series of international media visits in Chad covering especially the situation of the population fleeing the violence from CAR: **CCTV Africa** in February 2014 ([Chad Struggles with Refugee influx from Central African Republic](#); [Thousands of CAR muslims flee to Chad](#)) and within the UN Communication Group, UNICEF has contributed to the facilitation of the visit of **Al-Jazeera** (March 2014). UNICEF Chad has also facilitated a series of media field visits with chad-based international correspondents, like **BBC Africa** and **Voice of America** in January and February 2014: [the life in the camp of Gore](#);). Two UNICEF Representative exclusive interviews have been organised and facilitated with BBC Africa [here](#) and **United Nations Radio** (based in Geneva) [here](#). A press conference has been organised by UNICEF during the visit of the Regional Director which was focused on UNICEF's response to the influx of people fleeing the violence from CAR. In April, together with other UN Agencies, UNICEF will arrange the visit of **IRIN News**, which will cover the situation in southern Chad with the population from CAR.

FUNDING UPDATE

Appeal sector	Requirements as per HAC January 2014 (*)	Funds Received to date	Unmet requirements	
			Amount	% gap
Nutrition	30,000,000	6,585,031	23, 414,969	78%
Health (incl. HIV)	16,000,000	1, 411,246	14, 588, 754	91%
WASH	10,000,000	6, 448,000	3, 552,000	36%
Education	3,500,000	585,000	2, 915,000	83%
Child Protection	2,500,000	911,507	1, 588,493	64%
Cluster/Sector coordination	500,000	307,000	192,000	39%
Total	62,500,000	16, 247, 784	46, 252,216	74%

(*) the funding requirement is being revised and will likely increase in light of the UNHCR-led sub-regional appeal for CAR refugees.

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