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Chad Country Office

2022 Humanitarian Situation Report No. 2

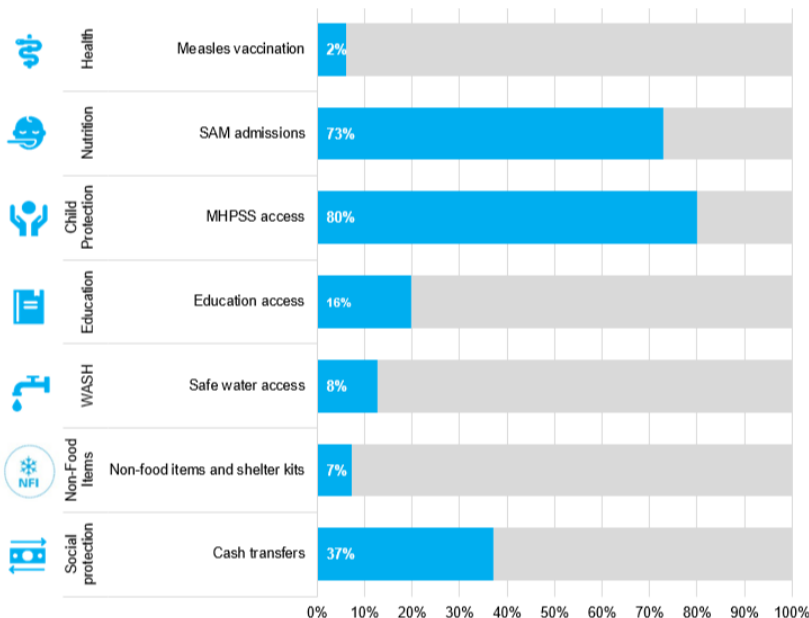
Situation in Numbers

- 3.0 Million** children in need of humanitarian assistance (OCHA, HRP 2022)
- 6.1 Million** people in need (OCHA, HRP 2022)
- 381,289** Internally displaced people (IDPs) (UNHCR, June 2022)
- 580,298** Refugees (UNHCR, June 2022)

Highlights

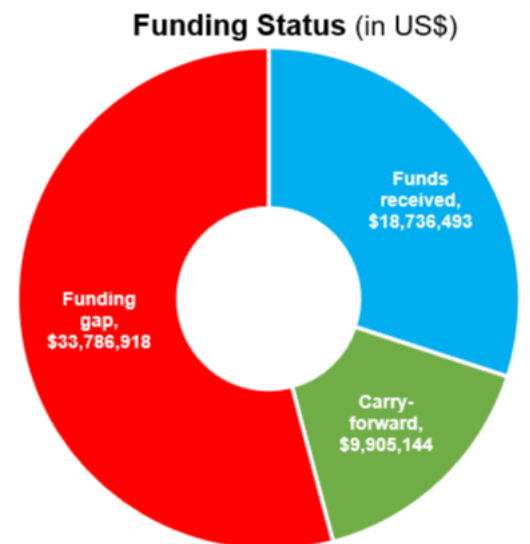
- During the reporting period, 121,373 malnourished children under five years of age (66,755 girls and 54,618 boys) were admitted and treated countrywide, with a cure rate of 92.8 per cent.
- As of June 2022, 103,382 children (47,785 girls and 55,597 boys) received individual learning materials in N'Djamena (Kalambari and Guilmei camps), Ouaddai (Farchana, Gaga, Bredjing and Treguine), Batha, Salamat and Lac (Mamdi, Kaya and Fouli).
- 25,612 children and caregivers (12,432 girls and 13,180 boys) benefited from psychosocial support in child-friendly spaces in Borkou, Ouaddai, Lac and Chari Baguirmi provinces.
- 3,667 households in the Cameroonian refugee camps of Guilmei and Kalambari were reached with humanitarian cash transfers in N'Djamena.

UNICEF's Response and Funding Status



UNICEF Appeal 2022

US\$ 62.4 million



Funding Overview and Partnerships

UNICEF is requesting US\$ 62.4 million to meet the emergency needs of nearly 800,000 vulnerable children in Chad for 2022. In line with the inter-agency Humanitarian Response Plan, this funding will enable UNICEF to support a multisectoral response to the multiple crises facing Chad, such as the nutrition crisis, displaced persons and host communities particularly women and children who have been most affected, and to support sustainable prevention and control of outbreaks. Since the beginning of the year, UNICEF Chad has received US\$ 18.7 million (30 per cent of the needs) from the Central Emergency Response Fund (CERF), the European Commission Humanitarian Aid Office (ECHO), UNOCHA, the United States of America, Japan and Sweden. Carried over funds from the previous year are providing an additional US\$ 9.9 million from the United States of America, the United Kingdom, global thematic humanitarian funds, Norway, Canada, ECHO, Switzerland, GAVI, UNOCHA and Japan.

Therefore US\$ 28.6 million representing 45.8 per cent of the appeal (US\$ 62.4 million) are available as of June 2022, leaving a gap of US\$ 33.8 million (54.2 per cent of the appeal). UNICEF will continue to adapt and respond to critical humanitarian needs as they evolve and will advocate for flexible thematic and multi-year funding to reach the most vulnerable children and families with life-saving support. UNICEF is grateful to all its partners for their continued support and collaboration and appeals for further assistance to the most vulnerable children in Chad affected by humanitarian situations.

Situation Overview & Humanitarian Needs

The INFORM 2022 index ranks Chad as the fifth country most exposed to humanitarian crises and natural disasters, with a score of 7.9 out of 10¹. The country ranks 187 out of 189 countries on the Human Development Index² with a high level of poverty (42.3%)³. New evidence on child poverty reveals that 4.3 million children live in poor households, representing an income poverty rate of 46.9%⁴.

The humanitarian needs overview reveals that 6.1 million people will be in need of humanitarian assistance in 2022, a 17% increase compared to 2021⁵. Chad continues to face a combination of rapid-onset and protracted humanitarian crises that have been exacerbated by the impacts of the COVID-19 pandemic. This persistent humanitarian situation is related to the growing insecurity in some parts of the country and in neighbouring countries, natural disasters, growing food insecurity, high rates of malnutrition, economic crisis, and political instability in a context of climate challenges. Humanitarian access remain limited in the north provinces and in Lake Chad basin, particularly in the island areas and the border area between Nigeria, Niger and Chad.

According to the most recently published data, as of May 2022, 1,067,908 people are displaced in the country⁶. Among them, 580,298 are refugees, 4,770 asylum seekers and 101,551 Chadian returnees (23,901 from Lac Province and 77,650 from the Central African Republic). Some 381,289 people are internally displaced in Lac Province⁷.

In the north of the country, the discovery of gold has led to a massive influx of thousands of people, both Chadian and from neighboring countries. The gold mines also attract a large number of children, especially boys, from across Chad. The town of Faya, headquarters of Borkou Province, has become the transit hub of these population movements. This situation has generated inter-community conflicts for the control of resources, the most recent of which took place in May 2022, resulting in hundreds of deaths and population displacements. The security situation in the north continues to lead to population movements towards Zouarke, Faya and Abeche. The situation is particularly challenging, as affected people do not have access to social services, including shelter, water, health, transport and are exposed to all forms of violence. According to the IOM evaluation conducted over the period 1-14 June 2022, the most vulnerable displaced people are trapped in the northern cities due to lack of resources.

The nutritional situation continues to be of particular concern in most of the provinces of the Sahelian and Saharan band. The SMART 2021 national nutrition survey reveals a prevalence of Global Acute Malnutrition (GAM) of 10.9%

¹ [Disaster Risk Management Knowledge Centre, European Union, 2022](#)

² [United Nations Development Programme, 'Human Development Report 2020: The next frontier – Human development and the anthropocene', UNDP, New York, 2020](#)

³ Estimate based on the Consumption and the Informal Sector in Chad survey, 2018.

⁴ INSEED/UNICEF. Child poverty study, 2021

⁵ [Humanitarian Needs Overview, March 2022](#)

⁶ [UNHCR June 2022](#)

⁷ [UNHCR June 2022](#)

and Severe Acute Malnutrition (SAM) of 2% at the national level. Children aged 6 to 23 months are the most affected, with a prevalence of GAM of 15.1%, and 3.6% of children suffering from SAM.

The Government of Chad declared a state of food and nutrition emergency on June 1, 2022, triggering the use of emergency humanitarian assistance in accordance with the National Emergency Response Plan. The Government is seeking the urgent support of partners for the response, with a preliminary budget estimate exceeding US\$ 167 million.

From the start of the COVID-19 pandemic in March 2020 to 12 June 2022, a total of 7,425 cases have been recorded with 193 deaths⁸. Over the past three months, a sharp drop has been observed in new cases of COVID-19 across the country with less than 5 cases observed per week, leading the Government to lift the mask requirement. However, UNICEF encourages the Government to maintain awareness-raising activities for the vulnerable population.

An outbreak of measles cases was observed during the month of March 2022 in several health districts of the country, including the 5 health districts of N'Djamena and the health district of Bongor in Mayo Kebbi Est Province. The total of suspected measles cases from January to week 23 (13 June) is 2,420 with 6 deaths⁹ (compared to 1,284 cases and 9 deaths over the same period in 2021).

Since January 2022, 163 suspected cases of yellow fever with 3 deaths have been notified, without any confirmed case so far. In January 2022, a response vaccination campaign was organized by UNICEF and its partners in 8 districts in epidemic and a second response vaccination campaign is being prepared for 8 districts in epidemic and 1 contiguous to those in epidemic.

Six circulating vaccine-derived poliovirus 2 (cVDPV2) cases have been registered from January 2022 to epidemiological week 23 (6 – 12 June).

The district of Goundi in Mandoul Province crossed the alert threshold with an attack rate of 3.7 cases of cerebrospinal meningitis per 100,000 inhabitants. The district recorded 12 cases of cerebrospinal meningitis with 2 deaths (case fatality rate 16.7%)¹⁰.

Summary Analysis of Programme Response

Health

During the reporting period, 25,309 children (12,888 girls and 12,421 boys) aged 6-59 months in humanitarian situations were vaccinated against measles in Ennedi Est, Ouaddai, Sila, Wadi Fira, Lac, Guera, Logone Oriental, Moyen Chari and Mandoul provinces.

UNICEF continues to provide technical and financial support for the fight against COVID-19 and other health emergencies in the country. This includes the implementation of vaccination against COVID-19 in routine mode and in mass campaigns. The first phase of the campaign (Block 1) conducted from 24 March to 2 April, allowed to reach a total of 2,356,138 people (27.3 % of the national target) including 1,181,848 men and 1,174,290 women. Among these, 31,536 are health personnel, 61,045 people with comorbidities and 195,935 people aged 65 years and older. The Block 2 of the vaccination campaign will be launched on 14 July to cover the remaining 13 provinces.

UNICEF supported two national polio immunization days which targeted 5,015,529 children aged from 0 to 59 months. The first round took place from 13 to 15 May and the 2nd round, coupled with Vitamin A administration and deworming, from 10 to 13 June. UNICEF specifically supported logistics and awareness raising activities. During the first round, 94% of parents were informed prior to the campaign and a total of 5,375,490 children 0 to 59 months were vaccinated (107% of the target) while 5,442,953 were vaccinated during the second round (109% of the target).

⁸ WHO, June 2022

⁹ WHO, Sitrep-Chad, Measle week 23 of 2022

¹⁰ [WHO, epidemiological situation, week 11 of 2022](#)

During the second quarter, health teams at all levels were mobilized in coordination meetings, workshops and for supervision during major activities. Specifically, UNICEF participated in:

- Central level coordination meetings chaired by the Minister of Health for the planning and monitoring of the vaccination campaigns (COVID-19, measles, nOPV2, Vitamin A and deworming).
- National Committee for the Fight against COVID-19 meetings during which the strategy for the management of COVID-19 as well as surveillance at the country level are discussed.
- Epidemiological surveillance meetings to monitor the dynamics in the epidemiological situation for appropriate decision.
- Preparatory meetings for the response to the outbreak of yellow fever in 9 health districts of the country.

Nutrition

During the reporting period, 121,373 children under five (66,755 girls and 54,618 boys) suffering from SAM were admitted for quality treatment, with 92.8% of cure rate. This included 882 children among the Cameroonian refugees. In June 2022, 16,026 Cameroonian refugee children aged 6-59 months received vitamin A supplementation.

As part of the extension of preventive nutrition interventions, 12 community health workers (CHW) were trained on Essential Nutrition Actions (ENA) including Infant and Young Child Feeding (IYCF) and malnutrition screening. CHW were equipped with the necessary materials to conduct mothers and caregivers' training on active screening, using Mid-Upper Arm Circumference (MUAC), and on ENA sensitization including IYCF at the community level. This resulted in 16,042 people trained on active screening (15,563 women and 479 men) and 30,421 people (5,179 men and 25,242 women) reached with awareness raising activities, using the promotion of optimal IYCF practices as an entry point. A total number of 35,797 children were screened for acute malnutrition at the community level, of which 15,847 were referred to health centers for quality SAM treatment.

In order to strengthen the nutritional surveillance system with a view to ensure anticipatory actions, the MSPSN is developing a system of rapid collection of weekly nutritional data (sentinel sites) following the example of the one already implemented by the Ministry of National Education and Civic Promotion (MENPC) in collaboration with the Education section called Edutrac, through the Directorate of Nutrition and Food Technology (DNTA), and with the support of UNICEF. The process of implementing a pilot phase has started in the health districts of Abeche and Adre (Ouaddai Province). Thus, health workers from 28 health centers hosting 28 sentinel sites have been trained and equipped with an Android phone (per health center) to ensure weekly data collection through the Open Data Kit (ODK) application. The data collected will be analyzed and will allow to alert health authorities to identify and implement appropriate actions before the situation turns into a crisis.

Child Protection

During the reporting period, the package of services to children (refugees, IDPs and indigenous people) provided included psychosocial and medical support, as well as alternative care in host families. A total of 25,612 children (12,432 girls and 13,180 boys) received psychosocial support through child-friendly spaces and other safe spaces as well as in host families in Chari Baguirmi, Lac, Ouaddai, and Borkou provinces. Some 27,114 people (15,255 women, 6,049 girls, and 5,810 boys) were reached in Chari Baguirmi, Lac, Ouaddai and Borkou provinces by gender-based violence risk mitigation, prevention and response interventions.

In addition, a total of 1,069 children (483 girls and 586 boys) benefited from alternative care in foster families, including 923 unaccompanied and separated children (UASC) (483 girls and 440 boys) and 146 children on the move who fled inter-community conflicts in the Kouri Bougoudi goldmines sites in Tibesti Province. All the 146 children on the move have been reunified with their families, in Salamat and Batha provinces. Among the 923 UASC, 4 unaccompanied children (2 boys and 2 girls) from Dar Es Salam refugees' camp in Bagasola (Lac Province), whose age range from 11 to 17, have been reunified with their families by the provincial delegation of social action of Lac Province with the support of UNICEF and 509 new UASC (220 boys and 289 girls) have been identified in Lac Province by "Association pour la Promotion des Libertés Fondamentales au Tchad" (APLFT) and are being temporarily cared for in foster families. The family tracing process is ongoing.

As a result of the joint UNHCR- UNICEF and Child Protection (CP) Area of Responsibility (AoR) evaluation, a training on psychosocial care and management of child-friendly spaces was organized for 30 Chad Red cross agents including nine women.

Education

During the reporting period, 103,382 refugee and returnee students from Cameroon, Niger and Sudan (47,785 girls and 55,597 boys), received individual school supplies provided by UNICEF, including notebooks, pens, pencils, and erasers. These students attend schools in N'Djamena (Kalambari and Guilmeys camps), Ouaddai (Farchana, Gaga, Bredjing and Treguine), Batha, Salamat and Lac (Mamdi, Kaya and Fouli) provinces.

Throughout the first half of 2022, UNICEF and its partners provided access to education to 17,030 children (7,133 girls and 9,897 boys) affected by humanitarian crises in Lac and Logone Occidental provinces. To this end, the Ministry of National Education and Civic Promotion (MENPC) contracted 52 teachers (9 women, 43 men) in March for a period of two months.

From April to June 2022, 35,812 students (16,115 girls and 19,697 boys) benefited from school canteens in the provinces of Lac and Logone Oriental. To keep girls in school, 45,000 menstrual hygiene kits were distributed to 4,500 girls in the same provinces in June 2022. In order to make schools inclusive, 1,084 children with disabilities (500 girls and 584 boys) received support, including cash transfers and psychosocial support in May 2022. Similarly, 223 women who are responsible for school nutrition received cash transfer support.

To prevent the spread of COVID-19 in and around schools, prevention materials (soap, hydroalcoholic gel, and masks) were delivered to 255 schools in N'Djamena for 139,207 students (71,428 girls and 67,779 boys) and 2,796 teachers (1,611 women and 1,185 men).

In May, with technical support from UNICEF, local educational authorities in Lac Province conducted a needs assessment in five sites in Fouli hosting newly displaced persons. The findings indicate that around 2,000 children are in need of education.

At the end of May, the MENPC, the Higher Council for Islamic Affairs, and UNICEF organized a joint mission in Lac Province as part of the support for renovated Koranic schools. The mission raised awareness among education personnel, religious and community leaders, and administrative authorities about the management and operation of the renovated Koranic centers and schools that opened in 2020. As a result, 84 people (10 women and 74 men) in Mamdi, Kaya, and Fouli were successfully reached during the awareness-raising sessions.

WASH

In the first half of 2022, UNICEF contributed to the improvement of health conditions of displaced people in Lac Province and those displaced by community conflicts in Cameroon, 12,360 people, including women (3,165), girls (3,342), men (2,848) and boys (3,005), had access to emergency latrines, which helped prevent diarrheal diseases, particularly cholera. A monitoring and support framework has been put in place through the 100 sanitation and hygiene committees that promote good health practices, including for COVID-19, in the sites where the displaced are staying. In these same IDP sites, 11,066 WASH kits were distributed to 66,396 people (34,526 women and 31,870 men) and 1,500 young girls aged 15 to 21 benefited from menstrual hygiene kits. These health promotion actions were coupled with awareness-raising on hygiene measures, hand washing with soap, the use of latrines and drinking water. Communication on barrier measures against COVID-19 was widely disseminated, through the contribution of 120 trained and equipped community support networks, but also through the contribution of the community radio station of Kadaye in Bol, in Lac Province.

In the areas where displaced people are staying, 18,000 people have gained access to new sources of drinking water thanks to the construction of manual boreholes equipped with human-powered pumps. These water infrastructures have made it possible to save lives by preventing the transmission of diarrheal diseases with the financial support of the CERF. Hygiene practices have improved in the displaced sites, and cases of transmission of COVID-19 have fallen sharply in the areas hosting the displaced populations.

As part of the response to nutritional crises, UNICEF in partnership with the National Directorate of Food Technology has supported the training of 302 health workers, including 53 women, on WASH in Nutrition in Lac, Kanem, Mandoul, Moyen Chari, Logone Oriental and Barh El Gazal provinces. This support for health facilities has helped to strengthen the knowledge of health workers and social workers on how to consider the promotion of hygiene, sanitation and water treatment in the fight against malnutrition in community health care facilities.

To improve the WASH response to COVID-19, UNICEF in collaboration with the Ministry of Public Health and National Solidarity and WHO organized a national capitalization workshop on the Infection Prevention and Control (IPC/WASH)

response to COVID-19. The workshop highlighted the need to strengthen the coordination of interventions in health facilities and to develop a WASH in Health strategy that considers IPC for Chad.

Social and Behavior Change

During the first half of 2022, Social and Behaviour Change emergency strategies focused on the response to COVID-19 and polio, as well as accountability to affected populations, peace building and social cohesion in the context of the Lake Chad Basin, Eastern and Southern refugees and IDP crises. As a result, 42,248 people (16,052 women and 26,196 men) were engaged in Risk Communication and Community Engagement (RCCE).

To support COVID-19 vaccination campaigns in 10 provinces (Chari Baguirmi, Mandoul, Mayo Kebbi Est, Mayo Kebbi Ouest, Moyen Chari, Logone Occidental, Logone Oriental, Salamat, Sila and Tandjilé) as well as a nation-wide Polio Campaign, 41,559 community actors (including 15,792 women) were trained and engaged through RCCE strategies. These include 19 governors, 11,791 religious leaders, 12,448 traditional leaders (canton chiefs, village chiefs, representatives of refugees and returnees) and 17,301 community support networks. Through interpersonal communication and advocacy, engaged community actors contributed to the promotion and management of vaccination and related rumours as well as hesitancy and refusal in households.

In response to the low level of population adhesion to COVID-19 vaccination, consultations involving community leaders and health workers have been organized in partnership with 38 community radio stations to encourage the population to respect the prevention measures and to accept to be vaccinated. Messages have been delivered in French, Arabic, and local languages in the 10 priority provinces. The same strategy was used for the national polio vaccination campaign.

To consolidate peace in Lac Province and Mani district in Hadjer Lamis Province, 689 community leaders (260 women and 429 men) from refugees' and host communities were involved in organizing 12 inter-generational dialogues, promoting cohabitation and the peaceful resolution of inter-community conflicts. In addition, six community platforms for the empowerment of women and young people were involved in the promotion of women's and young people's leadership, as well as the prevention of peaceful conflict resolution in Lac Province and Mani district in Hadjer Lamis Province with the technical support of NGO partner Public Interest Law Center.

All these activities allowed 3,395,670 people (1,883,074 women and 1,512,596 men), to receive key messages on protection measures, the importance of vaccination against COVID-19 and polio, peaceful resolution of inter-communal conflicts and peaceful cohabitation.

Accountability to Affected Population

As part of the humanitarian assistance through cash transfers to the Cameroonian refugees' (Guilmey and Kalambari camps) by NGO partner Lutheran World Federation (LWF), a hotline and suggestion boxes were made available to 3,667 households for a total of 22,002 people. Through these suggestion boxes, the beneficiaries expressed 17 complaints. Of these, 12 have been addressed and feedback has been provided to the populations. Five complaints are currently being processed. Overall, the complaints were mainly related to the targeting modalities. The complaints reported by beneficiaries have been confirmed by the post distribution monitoring (PDM) surveys. Through PDM, an opportunity has been given to affected people to express their point of view about the quality of the humanitarian action, responding to questions on whether: they were confident in the beneficiaries selection process; the cash transfers responded to their needs; humanitarian actors put the affected people's need at the heart of the planification process and response. The PDM results revealed that all beneficiaries are confident in the distribution process and say it is free from corruption. Overall, beneficiaries say that they appreciate the cash transfers modality, which they perceive as a safety net tool in response to their needs.

PSEA

During the reporting period, UNICEF validated its Prevention of Sexual Exploitation and Abuse (PSEA) action plan. The development of the PSEA Action Plan has been cross-sectoral and aligned with the commitments of the Interagency PSEA action plan. Thus, the first steps of the action plan were implemented with the designation of UNICEF PSEA focal points and the organization of a PSEA training for UNICEF staff. The setting-up of reporting channels for beneficiaries is underway, with the establishment of a green line and SMS platform via U-report, as well as the integration of the PSEA aspect into programmatic visits. UNICEF also paid particular attention to making these channels known. To this end, all activities (communication tools, posters, radio messages, partnerships, etc.) will be information vectors for these channels.

Humanitarian Cash Transfers

Inter-community conflicts that erupted in Cameroon's Far North region in late 2021 caused the movement of about 44,173 people from their households and communities to Chad. Since they have been supported by the host communities and by the Chadian government with the contribution of the humanitarian community and the United Nations agencies in partnership with international and national NGOs. Assistance has been given in two large official camps (Guilmey and Kalambari).

The assistance to Cameroonian refugees led by NGO partner LWF and funded by UNICEF started on 12 January 2022 for a total implementation period of seven months. This project responds to the call for protection of Cameroonian refugees by targeting households with pregnant and lactating women, children under five years of age, as well as adolescent girls living in the refugee camps of Guilmey and Kalambari. A total of 3,667 households received cash transfers. A rapid survey of the protection risks associated with cash distribution was carried out before the distribution of cash to households. A total of 299 adolescent girls received dignity kits. Several educational talks were organized on prevention measures and vaccination against COVID-19, prevention of intercommunity conflicts and peaceful cohabitation, essential family practices, including Health and Nutrition, overall health behavior and the management of menstrual hygiene.

Non-food items

As part of emergency preparedness, including floods, 2,000 NFI kits were stock piled in Moundou 1,500 in Bol and 2,250 placed in N'Djamena.

In response to the Sudanese refugee crisis, 6,993 people in Ouaddai and Wadi Fira provinces received NFI kits.

Humanitarian Leadership, Coordination and Strategy

During the reporting period, the Humanitarian Country Team conducted a major advocacy visit in Europe to mobilize funds for emergency response in Chad. UNICEF Representative to Chad took part in this mission and the priority needs of children and women were highlighted in all advocacy fora.

The clusters under the responsibility of UNICEF (Nutrition, WASH and Education) and the Child Protection Area of Responsibility (AoR) have actively participated in resource mobilisation for the Chadian humanitarian community by contributing to the development of the Central Emergency Response Fund (CERF) 2022 strategy and the definition of priority humanitarian needs for the first half of the year carried by OCHA.

During the reporting period, Nutrition, WASH and Education clusters participated in the update of the roadmap for gender mainstreaming in humanitarian programmes as well as the Child Protection AoR by adapting it to current priorities to create the conditions for its effective implementation.

All the clusters under UNICEF's responsibility contributed to the development of the quarterly report on the implementation of Chad's humanitarian response plan (HRP 2022) according to their key indicators posted on the response plan monitoring (RPM) platform under the lead of Inter Cluster Coordination (ICC) OCHA. To effectively carry out this assessment, UNICEF provided these clusters with an information management unit that supported all coordinators in updating data collection tools (5W, contact lists, etc.).

The Education Cluster worked with IOM to improve the education data of the displacement tracking matrix (DTM) survey. Thus, the questionnaire has been revised to include information on school-age children aged from 3 to 17 and the number of children by education level. This will allow the cluster to have more accurate data to assess the number of people in need of education.

With the support of the Global Education Cluster, the national cluster has updated the 5W file (Who does What Where and When). This file will allow the cluster to know the level of progress in the achievements and to monitor the risks of duplication.

A working session between the national cluster, UNICEF and the Global Cluster identified challenges and priorities that need to be addressed in the new cluster strategy. In addition, the cluster coordinator benefited from the basic coordination training organized by the Global Education Cluster in June in Dakar to undertake the revision of the intervention strategy. The Education Cluster received \$700,000 from the CERF-Underfunded 2022 grant to strengthen

educational interventions (temporary learning spaces, contracting and training of teachers, acquisition of educational materials and supplies, pedagogical monitoring and data collection) in Lac Province. A field mission was conducted by the cluster in Logone Oriental and Moyen-Chari provinces. This mission revealed the non-payment of subsidies to community teachers. This situation has resulted to the cessation of classes and the closure of some schools. In order to address the salary teachers' issue in the short term, the government committed to pay the subsidies for the period from October 2021 to June 2022 (9 months). To date, only two months of payments have been made.

During the reporting period, **the Child Protection Area of Responsibility (AoR)** has contributed to update the Humanitarian Country Team's 2022-2025 protection strategy which focuses on the protective environment, community-based approach, accountability, GBV prevention, mitigation and response. In addition, the child protection strategy and action plan have been updated.

Child Protection AoR actively contributed to the drafting of child protection and women abduction Humanitarian Country Team (HCT) advocacy note in Lac Province. This note led to advocacy, which prompted the launch of the operation called "Lac Integrity," which involved a massive deployment of defence and security forces (FDS) to address protection issues in Lac Province.

The Child Protection AoR participated in a joint mission with the Protection Cluster and GBV sub-cluster to assess the protection stakeholders' needs in Lac Province and to identify gaps and concerns to strengthen advocacy. The mission discussed with the decentralized services of the Ministry of Women, Family and Child Protection regarding the best ways to strengthen interventions' synergies and to revitalise the child protection Sub-AoR and the GBV working group.

Four monthly meetings were held with focus on sharing information on results and achievements of different partners and challenges faced by cluster members. The 5W stakeholder mapping has been updated.

The Child Protection AoR trained 84 partners from UNHCR and NGO INTERSOS on child protection in emergencies, child protection incidents identification, Child Friendly Spaces (CFS) implementation, as well as on the process of identification, documentation, tracing and reunification of UASC.

The Child Protection AoR coordinator participated in the technical forum organized by the Global Protection Cluster in Dakar, after which operational commitments were made. These include the production of three protection situation analyses in May, August and November 2022. To this end, the Child Protection AoR contributed to the updating of the protection situation analysis of May.

The Nutrition Cluster held six coordination meetings at the national level. At the provincial level, joint technical support from the Nutrition Cluster and the Health Cluster was provided to the Logone Occidental working group and to the Lac Province sub-cluster. In Logone Oriental Province, the mission aimed to discuss with health authorities and stakeholders to identify coordination reinforcement needs and to prepare together the first coordination meetings. In Lac Province, technical support focused on following up the Nutrition Cluster recommendations such as strengthen the capacities of Lac Province nutrition coordination team, create an information sharing platform, update coordination tools (4W, Terms of Reference, mailing list) and identify new capacity building needs. This mission enabled the Logone Oriental coordination team, which had suspended its coordination meetings, to hold its first health-nutrition meeting in May and the second in June. The Lac sub-cluster and the working group of Ouaddai held coordination meetings on a monthly basis as planned.

In addition, the cluster coordination addressed the provincial need of harmonization for severe and moderate case management to ensure continuity of care. An update was made to the data collection matrix to identify possible duplicates as well as gaps to guide member actions. The cluster continued its coordination work on the contingency stocks with partners.

After the workshop on RUTF (Ready to Use Therapeutic Food) management, that was organized with all the Nutrition Cluster's partners in the first quarter, a draft of the accountability framework was drawn up and shared with all the partners and feedback integrated. Discussions are underway with partners to ensure the document's validation workshop in the coming months.

For advocacy actions, in collaboration with the Food Security Cluster, the Nutrition Cluster has updated the analysis of the food and nutrition situation, which was presented to the HCT and informed advocacy towards donors and the government for better management and funding of the nutritional crisis. This allowed to highlight the critical situation regarding the nutritional situation and the gaps in funding and led to the acquisition of a CERF Rapid Response fund.

Furthermore, following discussions within the cluster, the caseload has been revised to take into account the effects of the looming nutritional crisis, for which the Government declared a state of emergency. Thus, the number of expected cases of children under five who are malnourished increased from 1.9 to 2.1 million. According to these projections, the number of children suffering from SAM will increase from 343,307 to 381,003 children, representing a rise of 11%. This involves an update for the nutrition sector in the HNO and HRP as well as strong advocacy for greater resource mobilization to save lives.

Regarding crisis management, in particular the unusual increase in complicated cases of malnutrition in N'Djamena, the coordination team, in collaboration with the DNTA, set up a nutritional crisis management group in N'Djamena. An assessment of the situation was conducted, urgent actions were initiated, and an action plan was developed with the involvement of all the cluster partners present in N'Djamena. Also, a monitoring system has been set up with weekly SAM data collection to monitor and alert about serious cases with complications.

As a part of the SMART national nutrition survey coordination, a meeting was organized within the thematic groups of the Nutrition Cluster to better involve all the partners. Given insufficient resources for its implementation, the survey is expected to be conducted in priority provinces in 2022.

In addition, the Nutrition Cluster has updated various tools, in particular the mailing list, the Terms of References, the 4W, the partners' contingency stock. A quarterly newsletter on the nutritional situation, HRP implementation status, main challenges, Nutrition Cluster activities and upcoming events, has been drafted and published.

As of June 2022, **the WASH Cluster** members have reached 135,000 of the people targeted by the humanitarian response plan, nearly 11% of the annual caseload (1,278,906 people in need). The response to the population displacement crisis received the upmost attention while the multisectoral WASH in NUT response, WASH in School, WASH in Health continue to suffer from low funding.

The WASH Cluster held a strategic workshop to develop the operational plan, renew the cluster architecture and the information management system.

To further enhance cluster members' awareness on the HRP 2022 WASH sector objectives, the cluster has developed a detailed operational plan that will serve as a handy tool to remind members of the sector's goals and targets.

The WASH Cluster has actively participated in various resource mobilization activities led by OCHA (April 2022 working breakfast and advocacy for CERF rapid response allocation for the food and nutrition crisis declared in May 2022) and coordination forums, in particular ICC meetings.

The WASH Cluster, UNICEF and UNHCR, provided effective co-leadership for the WASH response to the emergencies of Cameroonian refugees in Chad. In the East and South of the country, in response to the arrival of Sudanese and Central African refugees in coordination with the cluster's members, UNICEF and UNHCR established a joint WASH response plan to conduct interventions in the refugee camps of Dosseye, Moussoumba, Belom and Moissala in Logone Oriental, Mandoul and Moyen Chari provinces.

The WASH Cluster facilitators (coordinator and co-facilitator) participated in the Global WASH Cluster workshop on "Leadership and Operational WASH Coordination" that took place in Dakar in May 2022. It allowed to equip cluster coordinators with the theoretical and practical knowledge for effective WASH coordination in humanitarian action.

Human Interest Stories and External Media

During the reporting period, the communication team highlighted the topic of malnutrition, [with a photo essay portraying children treated for SAM](#) throughout the country, as well as a photo essay focusing on [the results achieved with ECHO support](#).

The Japan Supplementary budget contribution was acknowledged through a [press release](#), and the French version was picked up in several national media, notably [TchadInfos](#), [Le Tropical](#), Le [ThermometreActu](#) and [l'Opinion](#).

Japanese funding for health activities in humanitarian context (in the Lake Chad region) was also acknowledged through a story focusing [on the use of innovative technologies](#) to collect beneficiaries' feedback.

UNICEF Representative to Chad, Jacques Boyer, [gave an interview](#) to "Le Progrès", one of the main newspapers in Chad, about the Cameroonian refugees crisis and UNICEF education and protection response. The communication team also produced a [story on the education response](#) directed to Cameroonian refugee children.

UNICEF global social media published photos of UNICEF Chad response to the Cameroonian refugees crises, on [Facebook](#) (12K likes, 360 shares) , [Twitter](#) (51 retweets, 212 likes) and [Instagram](#) (19K likes), which also led to good pick up from National Committees.

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UNICEF Chad Facebook: <https://www.facebook.com/UNICEFChad/>

UNICEF Chad Twitter: @UNICEFChad

UNICEF Chad Instagram: @unicef.chad

UNICEF Chad Humanitarian Action for Children Appeal: <http://www.unicef.org/appeals/chad.html>

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Summary of Programme Results

		UNICEF and IPs Response			Cluster/Sector Response		
Sector Indicator	Total needs	2022 target	Total results	Change* ▲ ▼	2022 target	Total results	Change* ▲ ▼
Health							
Number of children aged 6-59 months vaccinated against measles		420,000	25,309	17,620 ▲			
Nutrition							
Number of children aged 6-59 months with SAM admitted for treatment	343,087	166,241	121,373	82,487 ▲	275,848	121,373	82,487 ▲
Number of children 6-59 months receiving Vitamin A supplementation	420,000	420,000	16,026	16,026 ▲	420,000	16,026	16,026 ▲
Child Protection							
Number of children and caregivers accessing mental health and psychosocial support		32,000	25,612	9,509 ▲	40,000	26,495	9,992 ▲
Number of women, girls and boys accessing GBV risk mitigation, prevention and/or response interventions		31,000	27,114	16,124 ▲			
Number of people with safe and accessible channels to report sexual exploitation and abuse by aid workers		840,848	0	0			
Number of unaccompanied and separated children provided with alternative care or reunified		2,800	1,069	659 ▲	3,200	1,835	1,275 ▲
Education							
Number of children accessing formal or non-formal education, including early learning	435,800	85,577	17,030	3,242 ▲	180,136	22,562	3,242 ▲
Number of children receiving individual learning materials	435,800	214,092	103,382	90,367 ▲	254,726	117,079	104,064 ▲
WASH							
Number of people accessing a sufficient quantity of safe water for drinking and domestic needs	1,278,906	140,000	18,000	6,500 ▲	560,000	135,000	121,500 ▲

Number of people using safe and appropriate sanitation facilities		40,000	12,360	5,760 ▲	336,000	106,040	97,140 ▲
Social Protection and Cash Transfer							
Number of households reached with UNICEF-funded humanitarian cash transfers across sectors		9,900	3,667	3,667 ▲			
C4D, community engagement and AAP							
Number of people engaged in RCCE actions		487,980	42,248	42,248 ▲			
Number of people with access to established accountability mechanisms		406,650	22,002	22,002 ▲			
Non-food items							
Number of displaced people who received non-food items and emergency shelter		95,600	6,993	6,993 ▲			
* Change since last report.							

Annex B

Funding Status*

Sector	Requirements	Funds available		Funding gap	
		Humanitarian resources received in 2022	Resources available from 2021 (Carry-over)	\$	%
Health	2,363,899	1,924,597	3,444,494	0	0%
Nutrition	22,398,030	8,648,405	2,623,206	11,126,419	50%
Child protection, GBViE and PSEA	7,250,360	1,280,658	630,653	5,339,049	74%
Education	6,246,432	700,086	54,527	5,491,819	88%
WASH	11,689,164	2,693,153	853,179	8,142,832	70%
Social Protection (HCT)	4,066,087	0	0	4,066,087	100%
C4D (RCCE, AAP)	4,096,436	1,983,787	1,585,816	526,833	13%
Emergency Response (NFI)	4,318,147	1,505,807	713,269	2,099,071	49%
Total	62,428,555	18,736,493	9,905,144	33,786,918	54%