



In Milézi, a site welcoming families affected by the floods in N'Djaména, UNICEF has set up a child-friendly space to allow children to play and find comfort.

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for every child

Humanitarian Situation Report No. 2

Reporting Period
1 January to 31 December 2024

Chad

HIGHLIGHTS

- The Eastern Chad crisis, which began in April 2023, has escalated in 2024 with significant developments, including intensified fighting around El Fasher, Sudan, and an ongoing famine in Sudan. UNICEF strengthened its response with a shift towards the triple nexus approach.
- Between July and December 2024, heavy rains caused flooding in all 23 provinces of Chad and affected 1,941,869 people, causing 576 fatalities.
- UNICEF reached 274,099 children with measles vaccination (135,334 children in Eastern Chad); provided 329,529 people with safe drinking water (76,208 people in Eastern Chad); supported 116,672 children and caregivers (61,889 children in Eastern Chad) with mental health and psychosocial services and distributed individual education materials to 103,439 children (9,372 in Eastern Chad).
- As a response to the state of food and nutrition emergency that the government declared nationwide, UNICEF treated 459,022 children suffering from severe acute malnutrition (SAM), including 63,863 children in Eastern Chad.

SITUATION IN NUMBERS



3,545,731
Children in need of humanitarian assistance¹

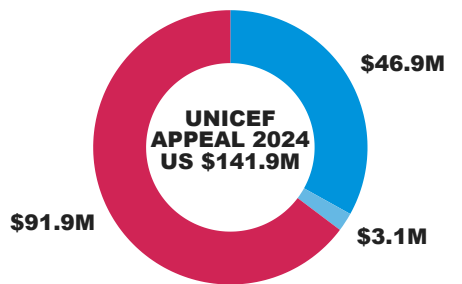


6,009,715
People in need of humanitarian assistance²



220,610
Internally displaced persons (IDPs)³

FUNDING STATUS (IN US\$)**



● Humanitarian Resources ● 2023 carry over
● Funding gap

** Funding available includes: funds received in the current year; carry-over from the previous year; and repurposed funds with agreement from donors

UNICEF RESPONSE AND FUNDING STATUS*

| Icon | Category | Indicator | Response % | Funding Status % |
|------|------------------|---------------------|------------|------------------|
| | Health | Measles vaccination | 73% | |
| | | Funding status | | 6% |
| | Nutrition | SAM treatment | 88% | |
| | | Funding status | | 45% |
| | Child protection | MHPSS | 137% | |
| | | Funding status | | 48% |
| | Education | Access to education | 12% | |
| | | Funding status | | 10% |
| | WASH | Safe water | 97% | |
| | | Funding status | | 39% |
| | Cross-sectoral | AAP | 78% | |
| | | Funding status | | 17% |

* UNICEF response % is only for the indicator, the funding status is for the entire sector.

FUNDING OVERVIEW AND PARTNERSHIPS

In 2024, UNICEF appealed for US\$ 141.9 million to respond to the humanitarian needs of 2.8 million people in Chad, including 2.1 million vulnerable children. These figures include US\$ 47.1 million to sustain the provision of lifesaving interventions for 452,596 refugees, returnees, and host populations in Eastern Chad (Ouaddaï, Sila, Wadi Fira and Ennedi Est provinces).

During the year, UNICEF Chad received US\$ 46.3 million from donors and allocated US\$ 550,000 of its Global Humanitarian Thematic Funds to the response. Carry-over funds from the previous year provided an additional US\$ 3.1 million. In total, US\$ 50 million, representing 35 per cent of the budget needs was available during the year, leaving a gap of US\$ 91.9 million or 65 per cent of the appeal.

UNICEF is grateful for the support received from the Catalan Agency for Development Cooperation (ACCD), the Central Emergency Response Fund (CERF), The Church of Jesus Christ of Latter-day Saints, the European Civil Protection and Humanitarian Aid Operations (ECHO), the French, German and Spanish National Committees for UNICEF, the German Federal Foreign Office, the Gobierno de Navarra (Spain), the Governments of Japan, Norway, Sweden and the United States of America, the Swiss Agency for Development and Cooperation (SDC), the United States Funds for UNICEF as well as the Global Humanitarian Thematic Fund.

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.

SITUATION OVERVIEW AND HUMANITARIAN NEEDS

In 2024, more than 6 million people, including 3.5 million children, required humanitarian assistance and protection in Chad. The people of Chad faced the continued arrivals of refugees from Sudan in the East, measles, dengue, and hepatitis E disease outbreaks, food insecurity, malnutrition, and floods across the country as well as internal displacements of population due to intercommunity conflicts in the South and the East and armed conflicts in the West (Lake Chad Basin).

As of December 2024, UNHCR reported 1,844,925 forcibly displaced persons with 1,254,659 refugees and 220,610 internally displaced persons (IDPs) in the country. As per data from the Commission Nationale d'Accueil et de Réinsertion des Réfugiés (CNARR), UNHCR, and the International Organization for Migration (IOM) there are 716,457 Sudanese refugees and 146,871 Chadian returnees from Sudan who arrived since April 2023. This is in addition to approximately 410,000 Sudanese refugees from the previous Darfur crisis that Chad is already hosting in the same provinces. 64 per cent of the refugees and 67 per cent of the returnees are children under 18.

This massive arrival of refugees and returnees has an impact on social cohesion as well as on the environment. The situation is very tense between the host population, returnees, newly arrived refugees, and old refugees from the 2003 Darfur war. Natural resources such as water and wood are scarce and there are only few interventions that target returnees and the host population. The risk of intercommunity conflicts is very high.

As the emergency has become protracted, UNICEF's Deputy

Executive Director, Humanitarian Action and Supply Operations, deactivated the level 2 corporate emergency procedure (CEAP) for Chad on 30 June 2024.

From April to July 2024, UNICEF undertook an After-Action Review (AAR) through focus group discussions with beneficiaries and interviews with key informants to evaluate its response in the three provinces of Ouaddaï, Sila and Wadi Fira. The results of this AAR were presented to the Government and the humanitarian community in N'Djaména in October and later at decentralized level in Eastern Chad. One of the key outcomes of this review is the need to activate the humanitarian – development - peace nexus (triple nexus) approach in all sectors.

The Adré border crossing re-opened on 15 August 2024 after a 5-month closure, allowing the delivery of humanitarian aid from Chad to Darfur. According to the Sudanese authorities, the border crossing will remain open until 15 February 2025.

In 2024, WHO registered 2,723 suspected cases of hepatitis E, including 11 deaths across seven camps and refugee sites in Ouaddaï province. These figures include 40 pregnant women with three deaths among them. No new cases have been reported since September 2024.

In February 2024, the Chadian Government declared a state of food and nutritional emergency throughout the country. Several provinces receiving IDPs, refugees, and returnees are among the most affected by food insecurity.

According to the Harmonized Framework of March 2024, 1,927,426 children under the age of five were at risk of suffering from acute malnutrition in 2024, including 523,381 children who were affected by severe acute malnutrition (SAM). In 2024, 41 administrative divisions out of 95 in the country faced a nutritional crisis compared to 29 in November 2023.

In May 2024, a measles outbreak was reported in Adré. The cases were reported among the host population of Adré, with no deaths. In July 2024, the Ministry of Health (MoH) increased routine immunization targeting the affected neighborhoods. By the end of the year no new cases had been reported.

The second semester of 2024 was marked by torrential rains which caused flooding in all provinces of Chad. The most severely affected provinces were Mayo Kebbi Est, Tandjile, Mandoul, Salamat, N'Djaména, and Sila. According to Government data 1,941,869 people were affected causing 576 fatalities. Roads were flooded, wadis were full, and several bridges were destroyed restricting humanitarian access for weeks.

The rainy season has put hundreds of thousands of people at risk of waterborne diseases' outbreaks such as cholera. Southern and Eastern Chad have the highest risk of a cholera outbreak.

In October 2024, spikes in violence in El Fasher, Sudan (320 km from the Chadian border) pushed more than 50,000 people to cross into Chad. They arrived through the villages of Birak, Koulbous and Tiné in Wadi Fira province, while humanitarian support has mainly been focused on Ouaddaï province. The Humanitarian Country Team has mobilized the Central Emergency Response Fund (CERF) to support their relocation to refugee camps.

During 2024, outbreaks of violence continued to cause displacements in Chad. The presence of non-state armed groups remains a security risk for the population of the Lac province. In the first semester of 2024, the Displacement Tracking Matrix showed 219,393 displaced people, including 22,402 Nigerian refugees living in Dar Es Salam camp and in host villages in the Lac province. UNICEF is coordinating the Rapid Response Mechanism (RRM) in partnership with the United Nations Office for the Coordination of Humanitarian Affairs (OCHA), World Food Program (WFP), ACTED,

Action Against Hunger, INTERSOS, and the Permanent Secretariat for NGOs and Humanitarian Assistance (SPONGAH) but humanitarian funding remains a challenge.

In 2024, several intercommunity conflicts broke out in Southern Chad causing deaths, injuries, looting, and forced displacement of populations. In 2024, CNARR and UNHCR reported 143,054 Central African refugees living in six camps, sites, and host villages in the South.

SUMMARY ANALYSIS OF PROGRAMME RESPONSE

Health and HIV/AIDS

In response to the hepatitis E epidemic in Eastern Chad, UNICEF supported the training of ten staff from the national NGO SAHKAL and 60 community health workers in the prevention of and response to hepatitis E and other waterborne diseases.

When a measles outbreak was declared in Eastern Chad in May 2024, UNICEF supported the MoH with the intensification of routine vaccination activities in the neighborhoods affected by the outbreak. UNICEF dispatched an additional 90,000 doses of measles vaccines bringing the total to 120,000.

From January to December 2024, UNICEF enabled the measles vaccination in emergency of 274,099 children (141,109 girls and 132,990 boys) aged 6 to 59 months (of the 372,953 planned). This performance includes 135,334 children (68,863 girls and 66,471 boys) vaccinated in the Eastern provinces (Ouaddaï, Sila, Wadi Fira and Ennedi Est).

An Mpox response plan was drafted since cases were reported in neighboring Sudan and Central African Republic.

In 2024, despite limited funding, UNICEF pursued its activities to prevent mother-to-child transmission of HIV/AIDS in provinces affected by humanitarian crisis. During the year, UNICEF provided 35,000 HIV rapid tests, and 1,800 GeneXpert cartridges to support screening activities in refugee/returnee camps and among host populations around the camps. UNICEF supported the HIV screening of 352,520 pregnant women in humanitarian situations. 581 women including 45 in Eastern Chad, were tested positive and were put on treatment.

The Health and HIV/AIDS sector was UNICEF Chad's least funded sector (only 6 per cent of the required funding was raised).

Nutrition

In 2024, UNICEF provided lifesaving treatment to 459,022 children (244,759 girls and 214,263 boys) suffering from severe acute malnutrition (SAM) in 918 SAM treatment units throughout the country. As part of the response to the state of food and nutrition emergency that the Government of Chad declared nationwide, UNICEF increased the target of this activity in July 2024 from 416,000 to 523,381 children to align with the interagency figures. The recovery rate of the treatment was 95.8 per cent. Among the children treated, 63,863 (36,317 girls and 27,546 boys) were refugees, returnees, or members of host communities in Eastern Chad.

During the year, UNICEF conducted mass screening campaigns of acute malnutrition that reached 312,833 children (164,202 girls and 148,631 boys) including 75,264 children (39,562 girls and 35,702 boys) in Eastern Chad. This number represents 21 per cent of the 1.5 million children planned in the HAC.

A total of 382,680 primary caregivers of children aged 0-23 months (49 per cent of the 714,333 targeted) benefitted from Infant and Young Child Feeding (IYCF) counselling across the country, including 192,080 who received this service in breastfeeding corners set up in refugee camps and returnee sites in Eastern Chad. The breastfeeding corners provided pregnant and lactating mothers with a safe space for breastfeeding and offered health and nutrition counselling sessions.

Although there were a few weeks of RUTF shortages in 2024, the sector was able to deliver services despite a 55 per cent funding gap.

Education

From January to December 2024 and with only 10 per cent of funding available (US\$ 1 million out of US\$ 10.8 million required for the sector), UNICEF in partnership with the Ministry of National Education and Civic Promotion and the Ministry of Women and Early Childhood, the NGO Jesuit Refugee Service (JRS) and the Institut des Technologies Innovantes pour le Développement (TECHNIDEV) distributed school materials to 103,439 children aged 3 to 17 years (46,640 girls and 56,799 boys) in provinces affected by humanitarian crisis. This figure includes 9,372 students (5,323 girls and 4,049 boys) affected by the Sudanese crisis in Eastern Chad. The sector did not meet the planned target of distribution of learning materials to 288,000 children.

Of the 85,600 children targeted in the HAC, UNICEF provided access to education for 10,002 children (4,806 girls and 5,196 boys) through the construction of Temporary Learning Spaces. This number includes 4,943 students (2,406 girls and 2,537 boys) affected by the Sudanese crisis.

Pedagogical advisors were provided with transport fees and materials to enhance supervision visits in the schools in IDP sites that were opened in N'Djaména following the floods during the last semester of 2024.

UNICEF supported the payment of subsidies for 165 contractual teachers, including 75 women, who taught 15,818 students (8,708 girls and 7,110 boys) in the provinces of Ouaddaï, Sila and N'Djaména. This number includes 100 contractual teachers, including 47 women, who taught 5,081 children (2,674 girls and 2,407 boys) enrolled in schools in Tongori (Ouaddaï province) and Daguesa (Sila province) returnee sites.

To support adolescent girls' school attendance, UNICEF distributed 307 menstrual hygiene kits benefiting 307 girls in Ouaddaï province and Lac province.

Water, sanitation and hygiene

In 2024, UNICEF provided access to safe drinking water to 329,529 people (100,145 girls; 90,089 boys; 74,403 women; and 64,892 men) including 76,208 people (21,135 girls; 17,223 boys; 21,430 women; 16,420 men) in Eastern Chad (refugees, returnees, and host community members). The overall number of people reached represents 97 per cent of the 2024 target. UNICEF provided safe drinking water through emergency systems such as water hosing, jet well construction, and the distribution of water treatment products. In collaboration with private sector companies, UNICEF constructed 116 water points (handpump and solar powered water systems) in camps and sites for returnees, refugees, and within the host communities.

Through emergency cooperation agreements with NGOs (IHDL, SAHKAL, ACTED, CAIDEL, and World Vision) UNICEF enabled 61,520 people (19,159 girls; 16,740 women; 14,400 boys; and 11,221 men) to access basic sanitation services through the construction and/or rehabilitation of emergency or sustainable

latrines and shower units. Around 46 per cent of these people or 28,174 (9,077 girls; 7,700 boys; 6,506 women; and 4,891 men) were refugees, returnees and members of the host communities in Eastern Chad.

In response to the hepatitis E outbreak in Adré, UNICEF provided Médecins Sans Frontières (MSF) and the WFP with 12,560 soap bars and 620 20-liter plastic pails. This donation enabled the two partners to reach 15,600 people (9,048 women and 6,552 men).

UNICEF distributed 325 handwashing devices in refugee, returnee, IDP and host community settings, temporary learning spaces (TLS), Child Friendly Spaces (CFS) and nutrition units in humanitarian settings.

During the reporting period, 127,710 people (39,846 girls; 36,780 boys; 26,564 women; and 24,520 men) of 21,795 households in Eastern Chad received household WASH kits. UNICEF gave priority to households with pregnant or breastfeeding women, to households with children under 5 years of age, and to households with people with disabilities. Each kit contains one plastic bucket, six soap bars, one plastic jerrycan, one plastic cup, one tea kettle, one baby potty, and one bottle of bleach for drinking water treatment.

UNICEF placed speakers in key points of the camps to deliver messages on good hygiene in French and Arabic. In response to the hepatitis E outbreak in Eastern Chad and the flooding in N'Djaména and Southern Chad, UNICEF reached 881,142 people (274,916 girls; 253,769 boys; 183,278 women; and 169,179 men) with sensitization messages on good hygiene practices through awareness-raising campaigns, home visits and focus group discussions.

Child protection, GBViE and PSEA

During the reporting period, UNICEF and its partners (the Government and civil society organizations) provided mental health and psychosocial services (MHPSS) to 116,672 people including 97,061 children (47,499 girls and 49,562 boys) and 19,611 caregivers (11,467 women and 8,144 men) in provinces affected by humanitarian crisis in Chad. Among these people, 61,889 (27,782 girls; 22,807 boys; 6,425 women; and 4,875 men) are refugees, returnees or from the host communities in Eastern Chad. UNICEF carried out MHPSS activities through fixed and mobile child-friendly spaces (CFS), peer support/community groups, psychosocial education sessions, and life skills activities for adolescents. UNICEF surpassed the 85,000 people targeted for this activity in the HAC.

UNICEF reached 163,535 people (60,304 girls, 53,215 boys, and 50,016 women) with GBV risk mitigation, prevention, and GBV response interventions. This considers 566 survivors (178 girls and 388 women) who have benefited from integrated care or referral services. UNICEF supported the setting up of an integrated multi-sectoral service centre in the Adré Hospital, in collaboration with the government and other UN agencies (UNFPA, UNDP and WHO) to improve the quality of care for GBV survivors in Eastern Chad affected by the Sudanese crisis. The centre is fully operational since 11 September 2024 with four available services: medical, psychosocial, legal, and social reintegration services.

In addition, 1,395 children (709 girls and 686 boys) at risk or victims of violence of the 3,200 targeted in the HAC received individual case management services from UNICEF and its implementing partners. This included alternative care to 635 unaccompanied and separated children (287 girls and 348 boys). Of these children, 92 (22 girls and 70 boys) were reunited with their parents and caregivers. UNICEF has also contributed to reinforcing the technical and operational capacities of four government social services in the Eastern region with the provision of equipment, training and coaching for staff.

UNICEF and its partner carried out trainings and awareness-raising

sessions to prevent Sexual Exploitation and Abuse (SEA) that enabled 766,157 people (183,695 girls; 133,709 boys; 261,622 women; and 187,131 men) to access safe mechanisms to report cases of sexual exploitation and abuse. This also included the dissemination of communication materials in French and Arabic.

Cross-sectoral (HCT, C4D, RCCE and AAP)

In 2024, UNICEF strengthened its internal capacities to implement humanitarian cash transfers (HCT) through staff training, the deployment of the platform HOPE for the safe collection and processing of beneficiary and payment data and by contractualizing financial service providers.

In December 2024, UNICEF and its implementing partner World Vision, launched a multisectoral HCT response for 2,600 flood-affected households in Mandoul province with a one-off unconditional non-restricted cash transfer. Each household received US\$ 100.

In 2024, SBC played a crucial role in improving vaccination efforts in the refugee camps. The SBC communication initiatives reached 1,623,052 people (557,622 girls; 266,861 boys; 540,256 women; and 258,313 men) of the 2.2 million targeted through messaging on prevention and access to services in humanitarian settings. Among these people, 1,580,416 refugees and returnees were reached with lifesaving information, including on vaccination. UNICEF and its partners used a variety of channels (community radio, theatre plays, and community meetings) to reach vulnerable refugees, IDPs and host communities.

A network of 108 community actors were engaged in home visits and community dialogues in which 1,519,970 people (532,260 girls; 244,959 boys; 510,447 women; and 232,304 men) participated. This method proved essential in fostering trust. The community engagement intervention was critical in facilitating the identification of 1,302 pregnant women in Adré and Djoroko, areas affected by hepatitis E. Mapping these women allowed for focused intervention strategies to protect this vulnerable group. UNICEF exceeded the target for this intervention by 642,350 people.

The installation of 23 information and feedback centers across various provinces affected by humanitarian crisis enabled 468,341 individuals (95,726 girls; 68,730 boys; 167,754 women; and 136,131 men) of the 596,650 targeted to voice their concerns. This includes 460,567 (94,784 girls; 68,107 boys; 162,622 women; and 135,054 men) refugees and returnees in Eastern Chad.

The AAP mechanisms, along with risk communication and community engagement efforts, played a significant role in UNICEF's flooding response by ensuring that affected communities were informed, engaged, and able to participate in the response efforts.

Non-Food Items

Between January and December 2024, UNICEF reached an overall number of 38,238 people (11,628 girls; 9,192 boys; 10,432 women; and 6,986 men) with non-food item (NFI) kits. This number includes 6,949 refugees and returnees (2,836 girls; 1,960 boys; 1,535 women; and 618 men) in Eastern Chad. The overall number of people reached represents 20 per cent of the 146,000 people targeted.

A NFI kit is comprised of a tarpaulin, blanket, plastic mat, underwear for women and girls, hygienic pads, cooking pots, kettle, ladle, cups, plates, soap, and long-lasting insecticidal nets with the purpose of fulfilling some of the immediate needs of refugees and restoring their dignity.

The NFI kits distribution targeted people from households among the refugees and the host communities in Eastern Chad as well as IDPs

due to intercommunity conflicts in Ouaddaï, Lac provinces and people affected by flooding across the country.

HUMANITARIAN LEADERSHIP, COORDINATION AND STRATEGY

In 2024, as the lead agency for the Education, Nutrition, and WASH clusters, and the Child Protection Area of Responsibility (CP AoR), UNICEF ensured that the interests of children were central to the humanitarian response in Chad.

Following the recommendations made by the Peer-2-Peer mission in June 2024, the Humanitarian Coordinator (HC) proposed a new coordination structure for the Eastern Chad response. While the general refugee crisis' response remains under the lead of UNHCR, the sectoral coordination in the department of Assounga falls under the agencies as laid out in the Inter-Agency Standing Committee (IASC). During the last quarter of 2024, the new coordination mechanism was formalized, and UNICEF is coordinating the Child Protection, Education, Nutrition, and WASH sectorial groups.

While the Humanitarian Country Team alongside the Government is finalizing the 2025 Chad Humanitarian Needs and Response Plan (HNRP), UNHCR along with the CNARR and partners published the 2025 Sudan Regional Refugee Response Plan (RRRP). The 2025 RRRP integrates lifesaving activities, relocation, resilience, livelihoods, and economic inclusion.

Nutrition Cluster

During the reporting period, the Nutrition cluster held ten meetings at national level. The Nutrition cluster Coordinator informed, alerted, and oriented the humanitarian actors on RUTF shortages and the nutritional situation. This led to the activation of a contingency plan consisting in the reduction of the number of RUTF sachets per child as a mitigation measure to face the risk of RUTF stock out.

The Lac province Nutrition sub-cluster and the Nutrition working group of Ouaddaï, Logone Oriental, Wadi Fira and Sila received on-site technical support to strengthen their coordination interventions. Two provinces, Lac and Ouaddaï, benefited from a training on coordination.

The Nutrition cluster regularly collected data from cluster members, analyzed them and shared them with the Global Nutrition cluster and OCHA for inclusion in the Response Planning and Monitoring (RPM) tool. In March 2024, the cluster actively took part in the multi-sector initial rapid assessment (MIRA) for the host population in Eastern Chad.

The Nutrition cluster issued a weekly newsletter to highlight priorities and needs and to update on decisions taken by humanitarian actors in view of the escalating number of SAM cases in N'Djaména Inpatient Management Units. These decisions were informed by the cluster's early warning system that is based on weekly monitoring of SAM case admissions through an electronic data collection system.

The members of the cluster benefitted from an Accountability to Affected Populations (AAP) training of trainers focused on AAP surveys. After the training, a survey was conducted in the Bol Health District (Lac province) to evaluate the satisfaction of the beneficiaries with nutrition services offered in the region. The results show that for each of the five pillars of the AAP strategy, the level of satisfaction reaches 80 per cent.

In September and November, the Nutrition cluster participated in various provincial and national HNRP workshops. During these workshops, a detailed analysis of the nutritional situation was done which fed into the draft of the Global Humanitarian Overview (GHO)

and the 2025 HNRP.

In 2024, under the lead of the Nutrition cluster, the Community-based Management of Acute Malnutrition (CMAM) Technical Working Group revised the National Protocol for the Management of Acute Malnutrition.

WASH Cluster

In 2024, the WASH cluster held ten monthly coordination meetings and actively engaged in coordination activities including inter-cluster coordination (ICC) meetings and an ICC retreat, MIRA assessments in Lac province, Hadjer Lamis and Eastern Chad and in OCHA-led resource mobilization activities, such as advocacy for the CERF.

The WASH cluster was actively involved in updating the National Flood Contingency and Response Plan and in coordinating the response with the Ministry of Social Action, Solidarity and Humanitarian Affairs.

With the appointment of new "Délégués Provinciaux de l'Eau" in all provinces in March 2024, sector group coordination meetings were held at the provincial level under Government leadership. Ouaddaï province is leading this effort and serves as model and provides support to other provinces.

The WASH cluster attended the Global WASH cluster workshop on "Leadership and Operational WASH Coordination" in Dakar in June 2024. The Chad WASH cluster was represented by the Government, World Vision International, and a UNICEF WASH Officer.

The WASH cluster provided technical support to several members and partner organizations to organize and facilitate trainings and workshops, such as the Health Cluster's 2024 Strategic Workshop and Oxfam's "Sani Tweaks" training.

The cluster participated in the Global WASH cluster Annual Meeting, the Information Management Diagnosis Meeting, and in working sessions with the Financial Tracking Service (FTS), in experience-sharing clinics on the 2024 planning cycle, and in global working groups.

Child Protection Area of Responsibility (CP AoR)

In March and September 2024, the Child Protection Area of Responsibility (CP AoR) hosted two support missions from the Global CP AoR. The first mission assessed the capacities of the CP AoR Chad and provided recommendations for improving CP AoR coordination in Chad. The mission supported the finalization of the annual work plan of the CP AoR and the launch of the process of developing the 2024-2027 strategy. This mission enabled Chad to mobilize resources and to advocate at the global level children issues in Chad through the production of a case study on the collaboration with the Government to strengthen the child protection system.

The second mission, that took place in September, helped to strengthen the capacities of the members of the Food Security and Nutrition clusters on the integration of child protection issues in their sectors. At the end of this training, a joint implementation action plan was drafted to ensure the monitoring of child protection interventions in the two sectors.

The CP AoR engaged in the 2025 HNRP process through the priority needs assessments, the participation in provincial workshops, the development of the sectoral plan, the sectoral framework, and by supporting partners in project development.

The CP AoR organized ten coordination meetings and regularly participated in ICC, protection and GBV meetings. The CP AoR

provided technical support to define minimum preparatory actions for child protection interventions in emergencies and strengthened the capacities of the emergency focal points of UNICEF sub-national offices and their partners in defining minimum actions for emergency preparedness.

In 2024, the CPAoR revitalized the Child Protection Working Group of Lac province through the provision of refresher trainings for its members, the updating of the terms of reference of the Working Group and the development of their work.

The CP AoR participated in the joint needs assessment of the host community in Eastern Chad, shared the report with members of the group, and identified follow-up actions related to child protection.

Education Cluster

In 2024, the Education Cluster and the Ministry of Education led the process of developing the second phase of the multi-year programme to support education resilience in Chad for the period 2025-2027. Education Cannot Wait (ECW) granted the country US\$ 20 million and the technical evaluation committee selected UNICEF as the grantee.

The Education cluster, in collaboration with UNICEF, organized a workshop to strengthen the capacity of partners in GBV risk mitigation. The objective of the workshop was to provide the partners with a comprehensive understanding of how to design a response plan with mitigation measures for GBV.

During the reporting period, the Education cluster supported the update of the National Flood Contingency and Response Plan under the leadership of the Government and OCHA. The cluster contributed to the organization and participated in the rapid multisectoral assessment for host communities in Eastern Chad.

In 2024, the Local Education Partners Group (LGPE) requested the Education cluster's support to prepare Chad's participation in the UNESCO Conference of Ministers of Education on Education in Emergencies held in Paris. UNICEF actively contributed to the development of a document with an analysis of the humanitarian situation in Chad and its impact on education.

In collaboration with the Interagency Gender Network, the Chad Education cluster organized the Inter-agency Network for Education in Emergency (INEE) World Day.

The Education cluster actively took part in the elaboration of the 2025 HNRP.

HUMAN INTEREST STORIES AND EXTERNAL MEDIA



UNICEF/2024/Amadji Remadane

"It was a sad and very difficult day for us, because we had to leave our country without any guarantee and leave everything behind," recalls Afrah with bitterness in her voice

On a hot April morning, women and their children enter the outpatient nutritional unit in Adré in Eastern Chad, on the border with Sudan. In the shade of a large shed, women sit with their children in their arms. The screams and cries of the babies mingle with the bursts of laughter and warm greetings between the adults. Amid the crowd, Afrah, the community relay, guides the parents and responds to their requests. Just over a year ago, 29-year-old Afrah Ibrahim was living peacefully with her parents and six brothers and sisters in the nearby town of El Geneina in Sudan. With a degree in Information Technology, she worked as a secretary. She never imagined she would have to flee her country. Until that day in June 2023, when the fighting reached her town.

"It was a sad and very difficult day for us, because we had to leave our country without any guarantee and leave everything behind.

There was murder, looting and rape. On the way to Adré, we were looted. They nearly killed my family", recalls Afrah with bitterness in her voice.

When they arrived, the young woman and her family were relocated to the Aboutagui refugee camp a few kilometers from Adré. The situation there was difficult for them and they decided to return to Adré a few months later to look for work. Afrah applied for a job and became a community relay at the outpatient nutritional set up by Action against Hunger unit in Adré's refugee settlement with UNICEF support. Afrah works daily, both at the nutritional unit and in Adré's refugee settlement. "In the refugee camp, I'm in charge of screening children for malnutrition and raising parents' awareness. When I find out that a child is suffering from malnutrition, I ask the parents to take him or her to the nutrition unit. When I work in the nutrition unit, I give malnourished children water with sugar to keep them hydrated, I refer parents and I help with other tasks. When I work in the nutrition unit, I give malnourished children water with sugar to keep them hydrated, I refer parents and I help with other tasks." Afrah Ibrahim.

Afrah is currently the only member of her family that has found a job. Despite her daily difficulties and her nostalgia for her life in Sudan, she loves what she does and remains hopeful of returning home one day. "I like this job because I'm close to the children and I help look after them. I hope the war will stop, there will be no more human rights violations, so we can return home in peace".

- [Improving water, hygiene, and sanitation for refugees and host communities in Eastern Chad.](#)

- [“We had no choice”: Sudanese refugees in Adré speak out about sexual violence.](#)
- [Chadian and Sudanese refugee girls committed to menstrual hygiene in Eastern Chad.](#)
- [Afrāh, Sudanese refugee and community relay in Eastern Chad.](#)
- [Nearly two million severely malnourished children at risk of death.](#)
- [In Liwa, Lac province, Mariam has overcome malnutrition.](#)
- [Lac, a province plagued by child malnutrition in Chad.](#)
- [For every child in Lake Chad Province, a birth certificate.](#)
- [Finding her long-lost mother and brother: Mariam’s story.](#)
- [How a young Sudanese refugee decided to help her Chadian peers access literacy.](#)
- [In Kaya, Lac province, hygiene and sanitation are now everyone’s concern.](#)
- [Social media \(outside UNICEF Chad publications\)](#)
- [Social Media | UNICEF Chad](#)

HAC APPEALS AND SITREPS

- Chad Appeals
<https://www.unicef.org/appeals/chad>
- Chad Situation Reports
<https://www.unicef.org/appeals/chad/situation-reports>
- All Humanitarian Action for Children Appeals
<https://www.unicef.org/appeals>
- All Situation Reports
<https://www.unicef.org/appeals/situation-reports>

NEXT SITREP: 30 JULY 2025

ANNEX A - PROGRAMME RESULTS

Consolidated Programme Results

| Sector | | | UNICEF and IPs response | | | Cluster/Sector response | | |
|---|----------------|-------------|-------------------------|---------------|-----------|-------------------------|---------------|-----------|
| Indicator | Disaggregation | Total needs | 2024 targets | Total results | Progress* | 2024 targets | Total results | Progress* |
| Health | | | | | | | | |
| Number of children aged 6-59 months vaccinated against measles | Total | - | 372,953 | 274,099 | ▲ 73% | - | - | - |
| | Girls | - | 187,931 | 141,109 | ▲ 75% | - | - | - |
| | Boys | - | 185,022 | 132,990 | ▲ 72% | - | - | - |
| HIV/AIDS | | | | | | | | |
| Pregnant and lactating women living with HIV receiving antiretroviral therapy | Total | - | 1,378 | 581 | ▲ 42% | - | - | - |
| Nutrition | | | | | | | | |
| Children 6-59 months with severe wasting admitted for treatment | Total | - | 523,381 | 459,022 | ▲ 88% | 523,381 | 426,959 | ▲ 82% |
| | Girls | - | 263,732 | 244,759 | ▲ 93% | 225,054 | 227,080 | ▲ 101% |
| | Boys | - | 259,649 | 214,263 | ▲ 83% | 298,327 | 199,879 | ▲ 67% |
| Children 6-59 months screened for wasting | Total | - | 1.5 million | 312,833 | ▲ 21% | 1.5 million | 643,673 | ▲ 44% |
| | Girls | - | 737,727 | 164,202 | ▲ 22% | 746,657 | 335,608 | ▲ 45% |
| | Boys | - | 726,307 | 148,631 | ▲ 20% | 717,377 | 308,065 | ▲ 43% |
| Primary caregivers of children 0-23 months receiving infant and young child feeding counselling | Total | - | 714,333 | 382,680 | ▲ 54% | 714,333 | 546,245 | ▲ 76% |
| Child protection, GBVIE and PSEA | | | | | | | | |
| Children who have received individual case management | Total | - | 3,200 | 1,395 | ▲ 44% | - | 1,395 | - |
| | Girls | - | 1,612 | 709 | ▲ 44% | - | 709 | - |
| | Boys | - | 1,588 | 686 | ▲ 43% | - | 686 | - |
| Number of children, adolescents and caregivers accessing community-based mental health and psychosocial support | Total | - | 85,000 | 116,672 | ▲ 137% | - | 124,299 | - |
| | Girls | - | 35,525 | 47,499 | ▲ 134% | - | 51,471 | - |
| | Boys | - | 34,975 | 49,562 | ▲ 142% | - | 53,217 | - |
| | Women | - | 7,307 | 11,467 | ▲ 157% | - | 11,467 | - |
| | Men | - | 7,193 | 8,144 | ▲ 113% | - | 8,144 | - |

| Sector | | UNICEF and IPs response | | | | Cluster/Sector response | | |
|--|----------------|-------------------------|--------------|---------------|-----------|-------------------------|---------------|-----------|
| Indicator | Disaggregation | Total needs | 2024 targets | Total results | Progress* | 2024 targets | Total results | Progress* |
| Number of women, girls and boys accessing GBV risk mitigation, prevention and/or response interventions | Total | - | 90,000 | 163,535 | ▲ 182% | - | 172,195 | - |
| | Girls | - | 35,525 | 60,304 | ▲ 170% | - | 62,603 | - |
| | Boys | - | 34,974 | 53,215 | ▲ 152% | - | 54,671 | - |
| | Women | - | 19,501 | 50,016 | ▲ 256% | - | 54,921 | - |
| Number of people with safe and accessible channels to report sexual exploitation and abuse by personnel who provide assistance to affected populations | Total | - | 987,000 | 766,157 | ▲ 78% | - | 774,855 | - |
| | Girls | - | 286,230 | 183,695 | ▲ 64% | - | 188,549 | - |
| | Boys | - | 276,360 | 133,709 | ▲ 48% | - | 137,553 | - |
| | Women | - | 217,140 | 261,622 | ▲ 120% | - | 261,622 | - |
| | Men | - | 207,270 | 187,131 | ▲ 90% | - | 187,131 | - |
| Education | | | | | | | | |
| Number of children accessing formal or non-formal education, including early learning | Total | - | 85,600 | 10,002 | ▲ 12% | 441,316 | 170,434 | ▲ 39% |
| | Girls | - | 43,134 | 4,806 | ▲ 11% | 218,489 | 84,007 | ▲ 38% |
| | Boys | - | 42,466 | 5,196 | ▲ 12% | 222,827 | 86,427 | ▲ 39% |
| Number of children receiving individual learning materials | Total | - | 288,000 | 103,439 | ▲ 36% | 441,316 | 253,577 | ▲ 57% |
| | Girls | - | 145,123 | 46,640 | ▲ 32% | 218,489 | 120,959 | ▲ 55% |
| | Boys | - | 142,877 | 56,799 | ▲ 40% | 222,827 | 132,618 | ▲ 60% |
| Water, sanitation and hygiene | | | | | | | | |
| Number of people accessing a sufficient quantity and quality of water for drinking and domestic needs | Total | - | 340,000 | 329,529 | ▲ 97% | 1.1 million | 632,603 | ▲ 59% |
| | Girls | - | 98,600 | 100,145 | ▲ 102% | 311,489 | 188,037 | ▲ 60% |
| | Boys | - | 95,200 | 90,089 | ▲ 95% | 300,748 | 174,950 | ▲ 58% |
| | Women | - | 74,800 | 74,403 | ▲ 99% | 236,302 | 138,048 | ▲ 58% |
| | Men | - | 71,400 | 64,892 | ▲ 91% | 225,561 | 131,568 | ▲ 58% |
| Number of people accessing appropriate sanitation services | Total | - | 280,000 | 61,520 | ▲ 22% | 805,575 | 112,740 | ▲ 14% |

| Sector | | UNICEF and IPs response | | | | Cluster/Sector response | | |
|--|----------------|-------------------------|--------------|---------------|-----------|-------------------------|---------------|-----------|
| Indicator | Disaggregation | Total needs | 2024 targets | Total results | Progress* | 2024 targets | Total results | Progress* |
| | Girls | - | 81,200 | 19,159 | ▲ 24% | 233,617 | 34,013 | ▲ 15% |
| | Boys | - | 78,400 | 16,740 | ▲ 21% | 225,561 | 31,082 | ▲ 14% |
| | Women | - | 61,600 | 14,400 | ▲ 23% | 177,227 | 25,668 | ▲ 14% |
| | Men | - | 58,800 | 11,221 | ▲ 19% | 169,170 | 21,977 | ▲ 13% |
| Social protection | | | | | | | | |
| Households benefitting from social assistance from government funded programmes with UNICEF technical assistance | Total | - | 4,000 | 2,600 | ▲ 65% | - | - | - |
| Cross-sectoral (HCT, C4D, RCCE and AAP) | | | | | | | | |
| People reached through messaging on prevention and access to services | Total | - | 2.2 million | 1.6 million | ▲ 74% | - | - | - |
| - | Girls | - | 632,200 | 557,622 | ▲ 88% | - | - | - |
| | Boys | - | 610,400 | 266,861 | ▲ 44% | - | - | - |
| | Women | - | 479,600 | 540,256 | ▲ 113% | - | - | - |
| | Men | - | 457,800 | 258,313 | ▲ 56% | - | - | - |
| People sharing their concerns and asking questions through established feedback mechanisms | Total | - | 596,650 | 468,341 | ▲ 78% | - | - | - |
| - | Girls | - | 173,029 | 95,726 | ▲ 55% | - | - | - |
| | Boys | - | 167,062 | 68,730 | ▲ 41% | - | - | - |
| | Women | - | 131,263 | 167,754 | ▲ 128% | - | - | - |
| | Men | - | 125,296 | 136,131 | ▲ 109% | - | - | - |
| People engaged in reflective dialogue through community platforms | Total | - | 857,650 | 1.5 million | ▲ 177% | - | - | - |
| | Girls | - | 248,814 | 532,260 | ▲ 214% | - | - | - |
| | Boys | - | 240,234 | 244,959 | ▲ 102% | - | - | - |
| | Women | - | 188,756 | 510,447 | ▲ 270% | - | - | - |
| | Men | - | 180,176 | 232,304 | ▲ 129% | - | - | - |
| Non-Food Items | | | | | | | | |
| Number of displaced people who received non-food items and emergency shelter | Total | - | 146,000 | 38,238 | ▲ 26% | - | - | - |
| | Girls | - | 42,340 | 11,628 | ▲ 27% | - | - | - |
| | Boys | - | 40,880 | 9,192 | ▲ 22% | - | - | - |

| Sector | | | UNICEF and IPs response | | | Cluster/Sector response | | |
|-----------|----------------|-------------|-------------------------|---------------|-----------|-------------------------|---------------|-----------|
| Indicator | Disaggregation | Total needs | 2024 targets | Total results | Progress* | 2024 targets | Total results | Progress* |
| | Men | - | 30,660 | 6,986 | ▲ 23% | - | - | - |

*Progress in the reporting period 1 January to 31 December 2024

ANNEX B — FUNDING STATUS

Consolidated funding by sector

| Sector | Requirements | Funding available | | Funding gap | |
|--|--------------------|---|--|--------------------|-----------------|
| | | Humanitarian resources received in 2024 | Resources available from 2023 (carry over) | Funding gap (US\$) | Funding gap (%) |
| Health and HIV/AIDS | 14,490,600 | 744,352 | 110,741 | 13,635,507 | 94% |
| Nutrition | 63,136,232 | 26,974,153 | 1,734,030 | 34,428,049 | 55% |
| Child protection, GBViE and PSEA | 7,005,805 | 2,626,168 | 723,934 | 3,655,703 | 52% |
| Education | 10,800,000 | 833,399 | 232,030 | 9,734,571 | 90% |
| Water, sanitation and hygiene | 29,000,000 | 11,407,849 | 32,832 | 17,559,319 | 61% |
| Social Protection | 375,000 | 451,716 | - | - | 0% |
| Cross-sectoral (HCT, SBC, RCCE and AAP) | 10,825,000 | 1,817,589 | 48,960 | 8,958,451 | 83% |
| Non-food items | 6,300,000 | 2,077,106 | 255,738 | 3,967,156 | 63% |
| Total | 141,932,637 | 46,932,332 | 3,138,265 | 91,862,040 | 65% |

Funding available - funding available in the current appeal year to respond in line with the current HAC appeal.

Humanitarian resources - humanitarian funding commitments received from donors in the current appeal year.

Resources available from 2023 (carry over) - funding received in the previous appeal year that is available to respond in line with the current HAC appeal

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ENDNOTES

1. Chad: Humanitarian Response Plan 2024, OCHA, 2024.
2. Chad: Humanitarian Response Plan 2024, OCHA, 2024.
3. Operational Data Portal, Chad, UNHCR, 4 December 2024.
4. Operational Data Portal, Chad, UNHCR, 4 December 2024.