Situation Overview and Humanitarian Needs

As of 23 September 2020, out of the total of 1,171 confirmed COVID-19 cases registered in Chad (the majority being male aged 25-59 years), seven are children. Of these seven children, two cases have been confirmed in children under five (two girls), and five cases are children aged between 5 and 14 years (four girls and one boy).

During this reporting period, COVID-19 reported cases witnessed a slight increase; however, at a slower pace than at the beginning of the pandemic. Cases have now been reported in a total of 17 provinces (representing over three quarters of the country): N’Djaména, Batha, Chari-Baguirmi, Ennedi Est, Guéra, Kanem, Lac, Logone Occidental, Logone Oriental, Mandoul, Mayo Kebbi-Est, Mayo Kebbi-Ouest, Moyen-Chari, Ouaddai, Sila, Tandjilé and Wadi-Fira. As of 23 September 2020, 86 cases are hospitalized and under treatment, 1,003 patients have recovered, and 82 deaths are attributable to COVID-19; a total of 549 out of 553 (99 per cent) contacts have been traced and are followed.

Despite the reopening of the N’Djaména international airport on 1 August and the easing of travel restrictions in-country, the number of reported COVID-19 cases has remained relatively stable. The Government has continued to monitor the implementation of the revised protocol which includes the presentation of a negative COVID-19 test for passengers departing and arriving at the airport, a seven-day quarantine followed by a COVID-19 RT-PCR laboratory test.

The United Nations agencies continue positioning their assistance in the critical areas of communication, disease surveillance and testing, supply of essential drugs and equipment and capacity building of health personnel and frontline workers for case management and surveillance, water, sanitation and hygiene, nutrition, child protection and continuity of learning. This assistance contributes to the implementation of the National Contingency Plan for Preparedness and Response to the Epidemic of Coronavirus COVID-19 (Plan National de contingence pour la préparation et la riposte à l’épidémie de la maladie coronavirus COVID-19) prepared by the Ministry of Health (MoH), with support from the UN and Development Partners.

Key challenges remain: delayed availability of diagnostics such as laboratory tests (GeneXpert); limited capacity at decentralised level for surveillance, tracing and case management, management of contacts and laboratory testing capacity in the provinces (only nine provincial laboratories have been set up so far in Abéché, Sarh, Moundou, Mongo, Bol, Mao, Doba, Borgor and Pala); and limited enforcement of land border control.

UNICEF’s COVID-19 response

Health, Nutrition & HIV

To date, UNICEF has supported the establishment of laboratory testing in nine provinces (Logone Occidental, Moyen-Chari, Ouaddai, Guéra, Lac, Kanem, Logone Oriental, Mayo Kebbi-Est and Mayo Kebbi-Ouest) using the GeneXpert system previously set up for HIV testing in newborns of HIV positive mothers. In addition, 418 kits of 10 SARS-COV-2 tests supplied by UNICEF are expected to be received by end of September.

The process of provision of Personal Protective Equipment (PPE) and other health commodities and supplies is ongoing in order to ensure safe testing and treatment. To date, a total of 4,317 healthcare facility staff and community health workers have been provided with PPE. A total of 720 thermoflash, 30,175 protective face shields, 30,175 FFP2 masks, 2,400 protective goggles, 500 examination gloves and 700 lab coats have been distributed in ten provincial hospitals, five district hospitals and 246 health facilities in nine districts. Gavi Alliance supported procurement through UNICEF of 2,000 protective goggles, 8,505 packages of 20 FFP2/N95 masks, 2,450 boxes of 100 gloves and 1,021 thermoflash for immunization staff in order to ensure safety of both vaccinators and children and enhance continuity of services.

UNICEF also supported the Government with provision of 35 oxygen cylinders, 80 hospital beds to strengthen case management capacity in Guéra, Ouaddai, Logone Occidental and Kanem provinces, 10 rental vehicles for

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the surveillance teams, and 30 internet connection kits and 10 laptops to facilitate data collection and analysis, as well as virtual meetings.

As part of the COVID-19 response, to date a total of 3,634 health staff and community health workers have been trained in Infection Prevention and Control (IPC), including 1,485 trained in IPC/WASH. In addition, 34 laboratory technicians from seven provinces of N’Djaména, Borkou, Guéra, Lac, Logone Occidental, Moyen-Chari and Ouaddai trained in laboratory biosafety. Moreover, to date a total of 272 healthcare providers have been trained in detecting, referral and appropriate management of COVID-19 cases among children, pregnant and breastfeeding women.

UNICEF has continued to work closely with provincial health delegates to ensure treatment of children suffering from severe acute malnutrition (SAM), while minimizing the risk of transmission of COVID-19 by reducing overcrowding through ensuring more frequent provision of services (twice a week instead of weekly) as well as hand-washing and physical distancing at nutrition units. To date, UNICEF has provided supplies and technical assistance for the treatment of 183,242 children suffering from SAM within the targeted health centres, which represents 67.2% of the expected SAM cases for this period, with a 92% cured rate.

In addition, to improve access to quality nutrition care services, to date 625 health workers have been trained on SAM management in the context of the COVID-19 pandemic including 48 in N’Djaména, 45 in Chari-Baguirmi, 145 in Batha, 60 in Salamat, 21 in Borkou, 152 in Sila, 49 in Ennedi Est, 33 in Barh El Gazal and 72 in Mayo Kebbi-Ouest. Moreover, a total of 22,072 primary caregivers of children aged 0-23 months have received IYCF counselling in the context of the COVID-19 pandemic.

To ensure better implementation of sensitization activities, communication materials on nutrition practices in the COVID-19 context were developed and distributed to 1,088 health facilities and 52 health centres received protective equipment (8 in Ouaddai and 44 in N’Djaména). The new procedures are well known and implemented in health centres, including the use of MUAC test strips and bilateral pitting edemas as admission and discharge criteria as well as of the therapeutic protocol (provision of two sachets of RUTF per day for a period of 2 weeks). However, some difficulties continue to be noted, including insufficiency of PPE for healthcare providers at health centre level, inadequate space in health centres to apply physical distancing measures particularly during the rainy season and RUTF stock-outs due to delayed transit time impairing the performance of the nutrition services.

For continuity of HIV/AIDS services, UNICEF has trained and engaged several actors at community and facility levels in COVID-19 sensitization. To date, a total of 1,978 community relays have been trained, with risk communication activities for COVID-19 in the context of provision of HIV/AIDS services conducted, reaching a total of 242,760 people in 23 provinces.

As COVID-19 prevention activities are combined with antenatal care and prevention of mother-to-child transmission (PMTCT) interventions, to date a total of 215,020 pregnant women and children and have received essential HIV prevention and treatment services in UNICEF-supported facilities, representing 29% coverage for pregnant women and 32% coverage for children.

Furthermore, a decree signed by the MoH instructing health staff to provide a 3-month supply of ART has been implemented to ensure service continuity and access to Anti-retroviral Therapy (ART) supplies for people living with HIV (PLHIV). However, the COVID-19 pandemic could severely disrupt HIV services in Chad and HIV deaths may increase substantially during the COVID-19 pandemic due to challenges of international procurement of ART. UNICEF therefore continues to provide logistic and financial support to the MoH and closely monitor the procurement process from planning, purchase and transport to ensure the necessary provisions of ART and other commodities.

**WASH**

UNICEF continues to strengthen the capacities of health workers in IPC/WASH in collaboration with WHO and in support of the MoH. During this reporting period, an additional 208 health workers and community health workers (hygienists, nurses, doctors, midwives) have been trained in IPC/WASH. To date, a total of 1,485
health workers and community health workers have been trained in IPC/WASH.

UNICEF partner organisation “Ecole saine, ménage sain” gives a hand washing demonstration to the teachers of La Leproserie school in N’Djamêna during a pedagogical day in preparation for the new school year. UNICEF / 2020 / Palazzo

Additionally, to date a total of 100,029 people have received essential WASH supplies to ensure implementation of COVID-19 prevention measures. As part of WASH interventions, public places in Abéché province have been disinfected on a monthly basis by cleaning premises with chlorine as well as putting in place handwashing stations and providing soap and hydroalcoholic gel. To date a total of 71 public sites have been disinfected with chlorine in Abéché and 152,925 people (58,170 men and 90,905 women, 2,203 pregnant women and 1,647 adolescents) were sensitized on COVID-19 prevention by 165 volunteers of the Chadian Red Cross in the Ouaddaï province and 80 community agents of the NGO partner ALIMA in N’Djamêna.

**RCCE/C4D**

To date, a total of 6,653,725 people have been reached with COVID-19 messaging on prevention and access to services, including 200,685 people who have shared their concerns and asked questions/clarifications through social media platforms and U-report. To ensure effective information, awareness-raising and community engagement around the COVID-19 outbreak in Chad, UNICEF strategy currently includes:

- A comic strip book for children has been produced in French, English and Arabic, and will be printed. The comic book "Lafya, the Girl and the Evil Coronavirus" informs and sensitizes children about the current COVID-19 pandemic, especially regarding ways to protect themselves and others, including hygiene and social distancing measures. Additionally, the development of a mobile application is also in the final stages of production.
- Visuals (flyers, posters) on prevention/protetion against COVID-19 were developed in French and Arabic as well as translated into four local languages. 150,000 copies were printed, with the majority distributed among community relays, traditional and religious leaders and health workers for use during public outreach and COVID-19 sensitzation sessions as well as for display in key public places countrywide. 10,000 posters have been displayed all over N’Djamêna, in collaboration with the Scouts and Guides. 12 square meter posters are currently being printed to be displayed on 24 billboards all over the capital.
- A child-friendly version of the posters has been produced, and 133,000 copies have been printed and distributed in schools throughout the country, prior to the start of the new school year. A child-friendly radio programme inspired by the comic strip ‘Lafya’ has been developed in French, Arabic and Ngambaye in collaboration with a local theatre company “Hadre Dounia”. The programme will be broadcasted on radio stations nationwide.
- Specific messages on nutrition (continuity of exclusive breastfeeding even in the case of COVID-19 infection) and child protection have been developed and integrated in the overall COVID-19 messaging. 5,000 posters were printed and distributed in health centres nationwide.
- A second wave of communication messages is currently being discussed with the Ministries of Health, Education and Communication, and will be rolled out in the next weeks.
- Together with local artists, seven one-minute clips about hand washing, physical distancing, and the negative impact of rumors have been recorded in different languages and broadcast on national and local radios and TV stations. An agreement has been signed with 23 local radio stations to start broadcasting spots in local languages on COVID-19 protection. 25-minute informative programmes are being produced with specialists from the Government, UN and local partners to inform the population on COVID-19 and to answer questions from listeners. To date, 5,103 spots and microprogrammes have been aired.
- Since the start of the COVID-19 pandemic, 142 COVID-19 specific social media posts have been published on the UNICEF Chad Facebook, Twitter and other platforms. The messages range from tips, visuals, videos and content specially created for Facebook, Twitter and Instagram. The reach of the social media platforms has increased by more than 10 per cent since the start of the outbreak, bringing the number of social media followers to 113,635. The number of Facebook followers has risen from 74,177 to 88,498, Twitter from 9,963 to 10,842 and LinkedIn from 1,269 to 5,420.
- U-Report (an SMS-based interactive information platform for youth, free of charge) is currently entirely devoted to COVID-19 and is a platform for lively exchanges and questions. To date, 139,384
consultations have been conducted using U-Report, through its dedicated Info-centre "CORONA" using the U-Report national number ‘1301’. An additional 20,690 social media users have also raised questions and sought clarification on available COVID-19 support services.

- Of the 139,384 consultations conducted through U-Report, 58,699 were questions regarding the "Latest information on coronavirus in Chad", 11,752 on "What is coronavirus?" and 5,986 on the "Treatment of COVID-19". Apart from the consultations, four surveys in relation to COVID-19 were posted. The four topics were "Day of the African Child 2020: COVID-19 and Rights of the Child", "Social Stigma Associated with COVID-19", "Evaluation of distance learning courses during the COVID-19 period" and "World Breastfeeding Week in times of COVID-19".

- A video clip promoting the use of U-Report in the fight against COVID-19 is currently being broadcast on national TV and social media.

- UNICEF, through its Zonal Offices and in collaboration with the Provincial Health Delegations supported advocacy, capacity building of community relays and sensitization on behavior change through adoption of COVID-19 prevention measures. Some 13,000 community relays, traditional and religious leaders and health workers will be trained in COVID-19 preventive measures and warning systems in N'Djaména and in all provinces nationwide. This warning system is based on community relays who notify local health authorities of people showing symptoms of COVID-19. To date, 8,933 leaders, community relays, community health workers, and youth association leaders have been trained on sensitization on COVID-19 prevention measures. As a result, 811,340 people (380,646 men and 430,694 women) were sensitized, including 37,525 men and 49,346 women in the refugee camps.

**Education**

During the month of September 2020, UNICEF continued its support to the Ministry of Education (MoE) in order to raise awareness about COVID-19 and ensure a safe reopening of schools for the start of the 2020-2021 academic year in November. To this end, 294 hand washing kits were distributed in 204 schools in the provinces of Ouaddaï, Lac and Guéra for the benefit of 56,640 primary, secondary and high school students, including 22,962 girls. Additionally, 320 posters were handed over to nine schools in the refugee camps of Wadi Fira and Ennedi Est provinces to support COVID-19 awareness-raising activities benefitting 4,192 students, including 1,844 girls.

To date, an estimated 239,455 children nationwide have been supported with distance/home-based learning. In partnership with the NGO TECHNIDEV through financial support from Education Cannot Wait, the production and recording of audio and video courses began in September and will complement the reopening of classes. 10,000 booklets will also be printed and provided to students in rural areas who do not have access to TV or radio in order to provide individualized academic support.

**Child Protection**

During the reporting period, 1,726 children benefited from psychosocial support in Child Friendly Spaces (CFS) or in other safe spaces, bringing the total to 4,387 children reached since January 2020. The children supported during this reporting period include 1,336 (584 boys and 752 girls) in Lac province, 265 (120 boys and 145 girls) in Mongo province and 103 (92 boys and 11 girls) in N'Djaména province who benefited from psychosocial support in CFS. In Mongo province, 22 primary caregivers (women) were additionally provided with psychosocial support in health centres.

In addition, during this report period, three separated and unaccompanied children including two (one girl and one boy) associated with armed groups and forces in Lac province benefited from alternative care. The two children associated with armed forces and groups were referred to the Transit and Orientation Centre of Bol for transitional care, while the third is being provided with alternative care by NGO partner INTERSOS. Additionally, 103 children including 92 boys and 11 girls were reunified with their families in N'Djaména. To date, a total of 650 unaccompanied and separated children (UASC) were reunified or provided with appropriate alternative care arrangements with UNICEF support.
As part of the fight against COVID-19, UNICEF in partnership with NGO INTERSOS, as well as the Provincial Delegations of Social Action (DPAS) of Guéra, Abéché and Borkou continued to engage in prevention and awareness campaigns along with key child protection messages to sensitize local communities including vulnerable children. During the reporting period, 5,666 persons were reached with awareness messages including 1,307 in Lac; 1,818 in Mongo; 1,250 in Abéché; and 1,291 in Borkou.

**Access to continuous social protection services**

UNICEF is among the UN agencies which contributed to the socio-economic impact assessment of COVID-19, in support of the Ministry of Economy, Development Planning and International Cooperation, which noted the potential impact of COVID-19 in undermining progress made on the SDGs and on children’s well-being. Additional primary data collection on the impact of COVID-19 on micro, small and medium-sized enterprises has been completed to complement the socio-economic impact assessment. Moreover, UNICEF has supported the finalization of a multi-sectoral strategy developed by UN agencies in support of the Government's response to the COVID-19 crisis.

A cash transfer programme including risk communication, water, hygiene, and sanitation and IPC/WASH interventions has been designed jointly with an NGO partner and aims to assist poor households in urban and peri-urban areas of N'Djaména affected by COVID-19 (expected to cover 8,538 households) as part of the UNICEF response. Its implementation is conditional on availability of much-needed donor support. Additionally, a partnership is under development with a national NGO to assist 200 displaced households with multi-purpose cash transfers in the capital of Bol in the Lac province.

**Adaptations to ongoing UNICEF programmes**

UNICEF maintains its current support to the Government for the regular programme. UNICEF supports the continuity of all routine health and nutrition services for the most vulnerable children and women, including routine preventive services such as immunization, antenatal and postnatal care and PMTCT; UNICEF supports the MoH with the training of health care providers and community health workers in IPC, ensuring communication for the promotion of good practices in health facilities and communities to prevent the spread of COVID-19, and supplying basic hygiene equipment.

Some management protocols have been and continue to be adjusted to include COVID-19 issues (immunization, infant and young child feeding (IYCF), PMTCT, maternal, newborn and child health (MNCH), community-based disease surveillance, malaria seasonal Chemoprophylaxis). The protocol for the management of SAM in children has been revised and reorganized to avoid further spread of the COVID-19 virus within health facilities. To this end, front-line health staff were instructed to use only MUAC test strips and bilateral pitting edemas as admission and discharge criteria and children are asked to attend therapeutic nutrition units fortnightly, while health staff are being equipped with protective materials to ensure the safe continuity of services. The country is moving towards the provision of MUAC tapes to mothers instead of the mass screening previously carried out by community health workers.

In order to meet the growing demand for training on IPC/WASH COVID-19 prevention and control, UNICEF and the MoH are offering partners the opportunity to invite more staff to participate in the COVID-19 training sessions. Additionally, all UNICEF partnerships with NGOs implementing WASH interventions under the regular and emergency programme systematically ensure the sensitization of beneficiary populations on COVID-19 prevention measures as well as the provision of WASH kits.

In the context of the COVID-19 pandemic, UNICEF has provided support to the Child Protection sub-cluster to review and adapt tools, guidelines and implementation process for the provision of psychosocial support within the COVID-19 response as well as vulnerability mapping. Additionally, psychosocial activities provided to children within CFS have been remodeled to mobile settings. This mobile approach brings psychosocial support services closer to children, while ensuring that facilitators conduct individualized activities with children respecting physical distancing.

UNICEF is currently supporting the MoE to prepare schools and classrooms for the start of the 2020-2021 academic year in November, with a focus on provision of handwashing kits and implementation of physical distance measures. Discussions are also ongoing with the MoE to prioritize WASH in Schools activities planned for the school year. Moreover, to adapt its interventions in response to school closure since March 2020, UNICEF has partnered with the national NGO TECHNIDEV, in support of the MoE, to provide students with distance education in order to help students at intermediate and secondary levels maintain contact with the school and complete educational programmes in basic scientific and literary subjects.
The planned C4D and youth engagement training workshops on community engagement and participation have been postponed and replaced by specific trainings, workshops and advocacy activities on COVID-19 prevention. The partnerships with media, local radio stations and other public services have also been temporarily reoriented towards COVID-19 messaging, including information on combating fake news, rumours, traditional beliefs and stigmatization. A second wave of COVID-19 communication messages is currently being discussed with the Ministries of Health, Education and Communication, and will be rolled out in October.

Policy work on the revision of the National Social Protection Strategy is ongoing, integrating a stronger focus on shock-responsive social protection, including shock due to the COVID-19 pandemic and expansion of social protection coverage for children. In order to reinforce the social protection system and capacities, a training in shock responsive social protection is planned for early October for key partners in the Ouaddaï, Sila and Wadi Fira provinces. Some funding for planned activities is reoriented to provide technical support to an evaluation of the socio-economic impacts of COVID-19 and to finance cash transfer programmes to vulnerable families with children.

Funding Overview and Partnerships

- UNICEF requires US$ 13.1 million to meet the growing demand for critical needs and scale-up the response to the COVID-19 virus outbreak.
- As of 23 September, UNICEF has received US$ 6.07 million thanks to generous contributions by Germany, USA, European Union (ECHO), UN Central Emergency Response Fund (CERF), the World Bank, and the Global Partnership for Education (GPE). Additional support is received through the global thematic humanitarian funds from various donors provided to the COVID-19 Humanitarian Action Thematic Pool. In addition, UNICEF strategically integrates COVID-19 crosscutting activities in its existing programme and emergency interventions such as the 2020 floods response.
- UNICEF is in discussion with partners to secure additional funding through new allocations or reprogramming. UNICEF is grateful to its partners for flexible and timely funding to support an effective, efficient and integrated COVID-19 response in Chad.

Funding Status (in US$)

| Total required: US$ 13.1M | Funds received: US$ 6.07M | Funding gap: US$ 7.07M |

External Communication

UNICEF has aligned with global campaigns on COVID-19 and has been disseminating information through its social networks (Twitter, Facebook, Instagram and LinkedIn).

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## Annex A

### Summary of Programme Results

<table>
<thead>
<tr>
<th>Sector</th>
<th>2020 target</th>
<th>Total results</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Risk Communication and Community Engagement</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of people reached on COVID-19 through messaging on prevention and access to services</td>
<td>6,770,206</td>
<td>6,653,725</td>
</tr>
<tr>
<td>Number of people engaged on COVID-19 through RCCE actions</td>
<td>15,080</td>
<td>10,911</td>
</tr>
<tr>
<td>Number of people sharing their concerns and asking questions/clarifications for available support services to address their needs through established feedback mechanisms</td>
<td>138,723</td>
<td>200,685</td>
</tr>
<tr>
<td><strong>WASH and IPC</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of people reached with critical WASH supplies (including hygiene items) and services</td>
<td>735,275</td>
<td>100,029</td>
</tr>
<tr>
<td>Number of healthcare facility staff and community health workers provided with Personal Protective Equipment (PPE)</td>
<td>3,800</td>
<td>4,317</td>
</tr>
<tr>
<td>Number of healthcare facility staff and community health workers trained in Infection Prevention and Control (IPC)</td>
<td>2,603</td>
<td>3,634</td>
</tr>
<tr>
<td><strong>Health</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of healthcare providers trained in detecting, referral and appropriate management of COVID-19 cases among children, pregnant and breastfeeding women</td>
<td>384</td>
<td>272</td>
</tr>
<tr>
<td><strong>Nutrition</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of primary caregivers of children aged 0-23 months who received IYCF counselling through facilities and community platforms</td>
<td>235,752</td>
<td>22,072</td>
</tr>
<tr>
<td>Number of children 6-59 months admitted for treatment of severe acute malnutrition</td>
<td>414,301</td>
<td>183,242</td>
</tr>
<tr>
<td><strong>Education</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of children supported with distance/home-based learning</td>
<td>805,594</td>
<td>239,455</td>
</tr>
<tr>
<td>Number of schools implementing safe school protocols (COVID-19 prevention and control)</td>
<td>1,500</td>
<td>869</td>
</tr>
<tr>
<td><strong>Child Protection and GBV</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of children without parental or family care provided with appropriate alternative care arrangements</td>
<td>1,600</td>
<td>650</td>
</tr>
<tr>
<td>Number of children, parents and primary caregivers provided with community based mental health and psychosocial support</td>
<td>4,000</td>
<td>4,387</td>
</tr>
<tr>
<td>Number of UNICEF personnel &amp; partners that have completed training on GBV risk mitigation &amp; referrals for survivors, including for PSEA</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Number of children and adults that have access to a safe and accessible channel to report sexual exploitation and abuse</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td><strong>Social Protection</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of households (affected by COVID-19) receiving humanitarian multi-sector cash grant for basic needs</td>
<td>7,494</td>
<td>0</td>
</tr>
</tbody>
</table>
### Annex B

#### Funding Status

<table>
<thead>
<tr>
<th>Sector</th>
<th>Funding requirements</th>
<th>Funds available</th>
<th>Funding gap $</th>
<th>Gap %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Communication &amp; Hygiene</td>
<td>1,652,185</td>
<td>1,347,427</td>
<td>304,758</td>
<td>18%</td>
</tr>
<tr>
<td>WASH</td>
<td>3,450,907</td>
<td>2,350,598</td>
<td>1,100,309</td>
<td>32%</td>
</tr>
<tr>
<td>Nutrition</td>
<td>2,376,444</td>
<td>929,405</td>
<td>1,447,039</td>
<td>61%</td>
</tr>
<tr>
<td>Health &amp; HIV/AIDS</td>
<td>2,388,831</td>
<td>1,118,631</td>
<td>1,270,200</td>
<td>53%</td>
</tr>
<tr>
<td>Child Protection</td>
<td>998,250</td>
<td>249,425</td>
<td>748,825</td>
<td>75%</td>
</tr>
<tr>
<td>Education</td>
<td>1,579,416</td>
<td>74,900</td>
<td>1,504,516</td>
<td>95%</td>
</tr>
<tr>
<td>Cash-based Transfers</td>
<td>702,179</td>
<td>-</td>
<td>702,179</td>
<td>100%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>13,148,212</strong></td>
<td><strong>6,070,386</strong></td>
<td><strong>7,077,826</strong></td>
<td><strong>54%</strong></td>
</tr>
</tbody>
</table>

*Gap is calculated as a percentage of the required funding for each sector.*