### Highlights

- During the reporting period, 57,526 malnourished children were admitted and treated in the supported health centres with a cure rate of 94.6 per cent.

- 3,245 children had access to psychosocial support sessions, in child-friendly spaces in the provinces of Lac, Borkou Ouaddai and Guera.

- 9,740 people (5,064 women and 4,676 men) in need had access to appropriately designed and managed latrines in the province of Lac, Salamat, Logone Occidental and Mandoul.

- 253,214 people were reached with COVID-19 prevention measures through a partnership with 12 community radios and community relays in the provinces of Mayo Kebbi Est, Mayo Kebbi Ouest, Tandjile, Logone Occidental, Logone Oriental, Mandoul and Lac.

- 7,290 crisis-affected children have been provided with access to education through distance learning in the provinces of Lac, Mandoul and Moyen Chari.

### UNICEF’s Response (as of March 2021)

<table>
<thead>
<tr>
<th>Category</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>SAM admissions</td>
<td>20%</td>
</tr>
<tr>
<td>Measles vaccination</td>
<td>14%</td>
</tr>
<tr>
<td>Safe water access</td>
<td>0%</td>
</tr>
<tr>
<td>MHPSS access</td>
<td>11%</td>
</tr>
<tr>
<td>3-17 years boys and girls affected by the crisis receive school materials</td>
<td>30%</td>
</tr>
<tr>
<td>PLWHIV on ART</td>
<td>0%</td>
</tr>
<tr>
<td>Non-Food Items</td>
<td>0%</td>
</tr>
</tbody>
</table>

### UNICEF Appeal 2021

**US$ 59.5 million**

**Funding Status** (in US$)

- **Funds received, $4M**
- **Carry-forward, $9.8M**
- **Funding gap, $45.7M**

#### Situation in Numbers

- **3,100,000** children in need of humanitarian assistance
- **6,400,000** people in need (revised OCHA HRP 2020)
- **401,090** under 5 children with SAM (OCHA HNO 2021)
- **236,426** internally displaced people (revised OCHA HRP 2020)
Humanitarian Action for Children: Funding Overview and Partnerships

UNICEF is requesting US$ 59.5 million to meet the emergency needs of nearly 1.1 million vulnerable children and women in Chad in 2021. In line with the inter-agency Humanitarian Response Plan, this funding will enable UNICEF to support a multi-sector response to the nutrition crisis, reach children and communities that have been most affected, and support sustainable prevention and control of disease outbreaks, including COVID-19. Since the beginning of the year, UNICEF Chad has received US$ 3,529,510 (6 per cent of the needs) from Japan and Sweden. Global thematic humanitarian funds of US$500,000 from the UNICEF National Committees is also supporting flexible allocation of funds. Carried over funds from the previous year is providing an additional US$ 9.8 million, from the European Commission/ECHO, the United Kingdom, Japan, the World Bank, the Central Emergency Response Fund (CERF), GAVI the Vaccine Alliance and global thematic humanitarian funds.

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 partners for their continued support and collaboration and appeals for further assistance to children.

Situation Overview & Humanitarian Needs

Chad continues to face conflict-induced displacements, destructive rains, floods, loss of crops and the COVID-19 outbreak. Almost 1.8 million children under 5 years are suffering from global acute malnutrition, including 401,090 who are severely malnourished¹.

Population displacements continue, with people fleeing non-state armed groups in the Lake Chad Basin and seeking refuge from neighbouring countries. Nearly 494,500² refugees reside in Chad, and some 458,000³ Chadians are internally displaced, including 46,000 people who are newly displaced and 15,900 ⁴ newly arrived registered refugees. Insecurity in the Lake Chad Basin continues to limit humanitarian capacity to respond. In addition, early 2021 saw moderate influxes of refugees from the Central African Republic (CAR) and Sudan. As a consequence of electoral related violence in CAR, some 10,291⁵ individuals crossed into the south of Chad. In the east of the country, due to renewed conflict in Western Darfur, 4,784⁶ Sudanese have crossed the border into Chad since early January 2021. Populations arrived in Chad with very little in terms of living support and remain highly vulnerable and in need of humanitarian assistance.

Chad remains susceptible to extreme floods and droughts, which has the potential to severely impact livelihoods and stretch limited coping capacity of an already vulnerable population. The rainy season yielded unprecedented floods across 20 out of 23 provinces in Chad in 2020, consequently the risk for extreme flooding remains relevant for the year 2021. An estimated 2.7 million people in Chad are food insecure⁷. Data available shows that 401,090 children under 5 years of age will be in need of treatment for severe acute malnutrition (SAM) in 2021 (SAM rate at 2.1 per cent)⁸.

The COVID-19 outbreak entered its second wave in January – February in Chad, with a total of 4,533 cases, resulting in 164 deaths as of 31 March 2021⁹. The curfew measures which were put in place to curb the spread of COVID-19 were lifted in mid-March, allowing increased population movement. The Chadian authorities lifted the international travel ban which had been temporarily imposed in January 2021. Given the country’s limited health structures and capacity, the increase of localised outbreaks in rural areas recorded in the first quarter of 2021, remains very much of concern. The procurement and provision of protective equipment and essential supplies has improved but remains limited. Other challenges include limited capacity for surveillance, tracing, case management, isolation of contacts, laboratory testing capacity especially at land borders, inadequate sanitation facilities in quarantine sites and public spaces, and limitations in provincial-level preparedness. The ongoing COVID-19 outbreak is expected to further strain the resources already insufficient to deliver essential health programmes.

A measles outbreak has been persisting since April 2018, despite the various response campaigns conducted in epidemic affected districts. As of 28 March 2021 (epidemiological week 12), 811 cases with 5 deaths were notified in 67 districts out of 129 (5,510 cases during the same period in 2020) and seven districts were confirmed in epidemic by the

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¹ Office for the Coordination of Humanitarian Affairs, ‘Chad: Humanitarian Response Plan 2020 Revision’, OCHA, 21 July 2020
³ https://reports.unocha.org/fr/country/chad
⁴ https://data2.unhcr.org/en/country/tcd
⁷ Chad: Humanitarian Response Plan 2020 Revision'
⁸ Office for the Coordination of Humanitarian Affairs, ‘Chad: Humanitarian Needs Overview 2021’, OCHA, February 2021
⁹ COVID-19 Epidemiological situation report, 31 March 2021
laboratory. During the 12th epidemiological week, 24 districts notified at least 1 suspected case. No outbreak response vaccination campaign related to 2021 cases has been conducted during the reporting period. A total of 52,532 children have been vaccinated against measles in humanitarian settings.

With the resumption of mass vaccination campaigns, a national measles follow-up campaign initially planned in 2020 was carried out in 2 blocks from 12 to 18 January in 66 districts of ten provinces and from 22 to 28 March in 60 districts of 13 provinces. According to the consolidated results, a total of 3,696,305 children aged 9 to 59 months were vaccinated against a target of 3,416,348.

The period covered by this Sitrep was marked by national teachers’ strikes lasting one week in January and three weeks between February and March, which had a negative impact on the implementation of education programmes.

UN agencies and NGOs assist the Government to response to the identified needs, in accordance with the Humanitarian Needs Overview 2021, the revised 2020 Humanitarian Response Plan (HRP) (pending the finalisation of the HRP 2021) and the National Contingency Plan for Preparedness and Response to the COVID-19 outbreak.

Summary Analysis of Programme Response

Nutrition
According to the nutrition SMART survey conducted in 2020 with UNICEF support, there was a slight improvement in the nutritional status of children in 2020 with a 10 per cent Global Acute Malnutrition (GAM) rate and a Severe Acute Malnutrition (SAM) rate of 2.1 per cent among children under 5 years of age compared to the 2019 data (12.9 per cent GAM and 2.9 per cent SAM rate), even though the two surveys were conducted at different periods. Based on the Nutrition SMART 2020 survey, the Nutrition cluster estimated that 401,090 children suffering from SAM will need treatment. UNICEF is targeting 326,134 children for treatment nationwide, of which 292,279 are part of the humanitarian response.

In the 2021 first quarter, UNICEF supported the treatment of 57,526 children suffering from SAM in 16 priority provinces as defined by the Nutrition cluster with a cure rate of 94.6 per cent. Six provinces account for more than 70 per cent of the total admissions: N’Djamena 25 per cent, Lac 9.2 per cent, Guera 11 per cent, Ouaddai 9 per cent, Wadi Fira 9 per cent and Batha 9 per cent. To ensure the treatment of these children, 63,496 Ready-To-Use Therapeutic Food (RUTF) boxes were distributed in the first quarter countrywide. As part of the actions to strengthen the quality access to SAM treatment, 188 health workers were skilled to apply the adjusted SAM protocol in the COVID-19 context. The RUTF stockout risk identified for April and mitigating measures have been discussed with the Nutrition Cluster Coordination platform members in partnership with the Ministry of Public Health and National Solidarity. This resulted in a convergence of views on the priority areas to target for RUTF delivery (Lac province including the refugee camps, N’Djamena and Mongo provinces).

To prevent malnutrition, the Integrated Management of Acute Malnutrition (IMAM) platform was used to sensitize 13,969 caregivers (Sila 834, Wadi Fira 1,931, Lac 11,204) on Infant and Young Child Feeding (IYCF) practices. In addition, in the Lac province, 387 community health workers and mothers were trained on interpersonal communication for sensitization activities on SAM screening. Through this community platform, 29,645 children under five were screened in their communities using Mid-Upper Arm Circumference (MUAC) tape, identifying 1,729 severely malnourished children.

Health
Chad experienced a second wave of COVID-19 cases from the month of January through March 2021. Of the 4,533 total confirmed cases by 31 March, 2,951 cases were identified in N’Djamena. The country continued to experience localised outbreaks, impacting local population, as lockdown measures, such as the closure of markets for two weeks, were imposed to try and curtail the spread of COVID-19 in the community.

During the second wave, significant outbreaks were noted in Guera (76 cases), Ennedi Est (75), Batha (91 cases) Lac (44 cases) Wadi Fira (53 cases) and Tandjile (27 cases), with UNICEF supporting the Ministry of Public Health and National Solidarity in the response through the provision of Personal Protective Equipment (PPE), oximeters, soap and bottles of oxygen (16 distributed to the province of Guera). Given the increasing numbers of COVID-19 cases in rural areas, UNICEF has placed orders for an additional 45 oxygen concentrates, 180 oximeters, PPE and 5 generators to support local health centres to cope with the increasing caseload. In response to the latest outbreak in Borkou (three confirmed cases, 78 identified contacts), UNICEF supported the Ministry of Public Health and National
Solidarity through the provision of a GeneXpert, capacity building in the laboratory, distribution of three oxygen concentrators, 90 masks and other PPE. In Ennedi Est, UNICEF trained 30 community health officers and 26 health workers, and 3,150 individuals were sensitised on COVID-19 barrier measures.

180 individuals were trained on COVID-19 surveillance and case management in Hadjer Lamis and Bol, increasing local capacity to be able to respond to the outbreak.

WASH

The improvement of the sanitary living conditions of 9,740 individuals (5,064 women and 4,676 men) affected by floods in 2020 was improved through the construction of 487 latrines: 45 in the province of the Lac, 307 in Salamat, 10 in Logone Occidental and 125 in Mandoul. These infrastructures contributed to the reduction of diarrhoea-associated diseases, which were reoccurring due to open defecation in the reception sites of the displaced population. To ensure the sustainability of these structures, 50 management committees were set up to monitor and maintain hygiene around the latrines.

UNICEF continued its partnership with the NGO World Vision, ALIMA, CAIDEL and Action Contre la Faim, working to break the COVID-19 chain of transmission. From January to February 2021, interventions focused on health risk communication related to COVID-19. A partnership with 12 community radios and community relays in the provinces of Mayo Kebbi Est, Mayo Kebbi Ouest, Tandjilé, Logone Occidental, Logone Oriental, Mandoul and Lac made it possible to sensitize 253,214 people (52,669 women, 79,003 girls, 48,616 men and 72,926 boys) on good hygiene practices and barrier measures against COVID-19. To encourage the practice of protection measures against COVID-19, 7,427 households (44,562 people: 9,269 women, 13,903 girls, 8,556 men, 12,834 boys) living in localities affected by COVID-19 benefited from WASH kits composed of one jerrycan 20L, 10 bars of soap, one bottle of 250ml bleach and one sakhané.

In health facilities, UNICEF provided 31 health centres with 4,000 hygiene kits (composed of jerry cans, soap and sakhané) for pregnant women due to give birth or having just given birth in the provinces of N’Djamena, Kanem, Ouaddai and Logone Oriental. This intervention aims to strengthen the quality of care for safe motherhood with WASH services. The hospital of Bagasola and Liwa in the Lac province received four kegs of sodium chloride hypochlorite and 16 boxes of individual protective masks to strengthen Infection Prevention and Control (IPC) measures.

UNICEF in partnership with the NGO ALIMA provided WASH in Nutrition kits (soap, bleach and sakhané) to 5,929 children (2,846 boys and 3,083 girls) suffering from SAM across 22 health facilities in the provinces of N’Djamena and Lac. In these two provinces, the sensitization campaign amongst mothers with children at the household level made it possible to improve the hygiene practices of 131,523 people (63,131 men, 68,392 women) of which 11,521 in the Lac province and 120,002 in N’Djamena. Collaboration with the communication team increased sensitization by providing community relays and facilitators with 1,200 posters reproduced in the local language with messaging focused on hygiene practices linked to malnutrition. In Logone Occidental and Tandjilé provinces, 20 Outpatient Therapeutic Programme (OTP)/In-Patient Therapeutic Programme (ITP) benefited from WASH in Nutrition kits, including 542 boxes of bleach, 357 boxes of soap and 21 hand washing station to support children suffering from SAM.

To address the needs of CAR and Sudanese refugees newly arrived between January and February 2021, UNICEF mobilized funds to provide emergency WASH services to 30,000 people in the Ouaddai and Logone Oriental provinces. UNICEF provided UNHCR with WASH Kits consisting of hygiene items for 1,000 people and 4,000 menstrual hygiene kits, treatment of water and disinfection products for the Doholo reception site to meet the needs of the CAR refugees newly registered in Logone Oriental province.

Education

As part of the education response to the Lake Chad Basin humanitarian crisis, UNICEF supported the Ministry of National Education and Civic Promotion in training 285 teachers including 44 women from 78 schools on vulnerability mapping and risk reduction. The training, which took place in February 2021, included prevention measures against COVID-19 transmission. Consequently, 25,023 students (10,503 girls) will benefit from these trained teachers.

In March, 23 Education Officials at national and provincial levels from three Ministries (Ministry of National Education and Civic Promotion, Ministry of Urban and Rural Hydraulics and Ministry of Women and Early Childhood Protection) were trained in the minimum standards of Education in Emergencies (preparation, response and recovery) as well as in conducting needs assessments and data analysis in emergency situations.
To ensure access and continuity of education, 7,290 crisis-affected boys and girls have been provided with access to education through distance learning in the three provinces of Lac, Mandoul and Moyen Chari.

**Child Protection**

During the reporting period, 3,245 children had access to psychosocial support sessions, in child-friendly spaces in Lac, Borkou Ouaddai and Guera provinces.

In the Lac province, the recommendations from the Rapid Response Mechanism (RRM) enabled UNICEF’s partner INTERSOS to establish four new mobile child friendly spaces in relocation camps to provide psychosocial support to boys and girls who were affected by the latest attacks from non-state actors in December 2020 and January 2021.

In the east of the country in Ouaddai Moura camp, partner World Vision provided psychosocial support to 2,040 refugee children affected by the renewed conflict in neighboring West Darfur, Sudan. In Guera, the Provincial Delegation of Social Action (DPAS) provided medical and psychosocial support to five boys in conflict with the law, eight mouhajirnes children and 39 girl survivors of gender-based violence (GBV).

In Faya, the continuous inter-agency efforts allowed the family reunification of 32 boys working in mines. In Borkou, 462 people including 158 children were sensitized on child protection and GBV topics by the four newly established child protection committees.

As part of the prevention and response to the COVID-19 outbreak, UNICEF in partnership with the DPAS (DPAS Lac, DPAS Guera, DPAS Borkou), local and international NGOs (Chad Red Cross, World Vision and INTERSOS) continued to sensitize populations across Chad, in local communities including vulnerable children on the preventive measures against COVID-19 and key child protection messages. Since the beginning of the year, 8,259 beneficiaries including 3,152 vulnerable children were sensitized on COVID-19 prevention measures and key child protection messages.

**HIV/AIDS**

During the reporting period, HIV (Human Immunodeficiency Virus) testing and counselling was offered to 1,139 pregnant women in antenatal care (ANC) consultations. Nineteen pregnant women in emergency situations were diagnosed with HIV.

In the sites of Liwa, Bagasola and Bol, 839 women, both refugees and IDPs were sensitized through the peer education strategy for preventing the transmission of HIV.

Challenges remain regarding the management of the HIV supply chain for the prevention and care among refugees, especially in the Lac province.

**Non-Food Item**

In the Lac province, assistance to IDPs is ongoing and to date 2,234 NFI kits have been distributed to 2,234 households in Kousseri, Fourkoulom and Diaramer IDP sites. A total of 11,170 people has benefited from this distribution (5,808 women and 5,362 men) during the first quarter of 2021.

UNICEF Chad is preparing contingency and response plans for the rainy season and for the possible degradation of the humanitarian situation across Chad. As part of the emergency preparedness and response efforts, and to avoid delivery delays, UNICEF has anticipated an order for NFIs to meet the needs of 4,300 households (32% of the HAC 2021 target).

**Humanitarian Leadership, Coordination, and Strategy**

UNICEF continued to lead the Nutrition, Education and Water, Sanitation and Hygiene Clusters, as well as the Child Protection Sub-Cluster, at national and subnational levels, in line with the inter-agency humanitarian strategy to save lives and protect affected populations. UNICEF and its partners persevere to respond to the urgent needs of the most vulnerable populations and strengthen the links between humanitarian action and development efforts. UNICEF supported the prioritisation of community-based approaches while continuing to build the capacity of line ministries and the National Directorate of Civil Protection to better plan, coordinate and implement preparedness and response activities.

In accordance with the UNICEF commitment, as a Cluster Coordinator Agency, to place the coordination as a key element of the newly revised Core Commitments for Children in Humanitarian Action (CCCs) the performance
evaluation of the clusters has been completed. As of the start of the year, all clusters finalized the two surveys (coordination leadership and cluster members), with recommendations for improving performance already being undertaken.

Cluster coordination teams have initiated a sub cluster capacity assessment at the Field Offices level and are currently preparing a roadmap to identify sub-regional weaknesses and support needs in terms of coordination and reporting.

In February, the Child Protection sub-cluster and the Education cluster conducted a joint mission to assess the priority needs of CAR refugees in the Nya Pende Department in the Logone Oriental Province, and the host community. A response plan was developed and shared with partners at the national level.

As for the Lac province, 23 executives from ministries of Women and Early Childhood Protection, of National Education and Civic Promotion and of Urban and Rural Hydraulics, have had their capacities strengthened through a workshop facilitated by the Education coordinator, the Child Protection sub-cluster and WASH cluster in Bol in February 2021.

UNICEF continues to implement a multi-sectoral humanitarian response consistent with the National Development Plan (NDP) 2017-2021, the revised Humanitarian Response Plan (HRP) 2020 and the COVID-19 response plan, while further harmonizing humanitarian responses and development interventions.

UNICEF will continue to support epidemic and disease outbreak prevention and control, including for COVID-19. In addition to supporting improved coverage of routine immunization and scheduled vaccination campaigns against measles, UNICEF will ensure that children affected by displacement remain protected against measles.

Support for distance and school-based learning and the provision of school materials to displaced, returnee and refugee children will continue, incorporating lessons learned from previous years including the 2020 COVID-19 response.

UNICEF will also provide IPC support to health centres, schools and communities. This support will focus on access to clean water, adequate sanitation, and hygiene promotion, including preventive and protective practices, and the effective participation of communities in preparedness, response and resilience building.

UNICEF will continue to identify solutions that address the needs of women and girls, including through GBV mitigation, prevention, and response; and engage women and girls as active community members. The response will also focus on building the capacities of specialized services and community-based structures to identify vulnerable children and provide adequate care, referrals, and psychosocial support.

UNICEF’s humanitarian action will be carried out in coordination with national authorities, United Nations agencies and humanitarian partners, and will reinforce national emergency preparedness and response mechanisms, such as inter-cluster coordination.

Next SitRep: 30 June 2021

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## Annex A

### Summary of Programme Result

<table>
<thead>
<tr>
<th>Cluster/Sector Response</th>
<th>UNICEF and IPs</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Change since the last report</td>
</tr>
<tr>
<td></td>
<td>2021 target</td>
</tr>
<tr>
<td><strong>Nutrition</strong></td>
<td></td>
</tr>
<tr>
<td>Number and percent of children 6-59 months with Severe Acute Malnutrition (SAM) admitted for therapeutic care</td>
<td>401,090</td>
</tr>
<tr>
<td>Number of children aged 6-59 months who received vitamin A supplements</td>
<td>813,403</td>
</tr>
<tr>
<td><strong>Health</strong></td>
<td></td>
</tr>
<tr>
<td>Number of children in humanitarian situations aged 6 months to 14 years vaccinated against measles</td>
<td></td>
</tr>
<tr>
<td><strong>WASH</strong></td>
<td></td>
</tr>
<tr>
<td>Number of people accessing a sufficient quantity of safe water for drinking, cooking and personal hygiene</td>
<td></td>
</tr>
<tr>
<td>Number of people accessing appropriately designed and managed latrines</td>
<td>184,947</td>
</tr>
<tr>
<td><strong>Child Protection</strong></td>
<td></td>
</tr>
<tr>
<td>Number of children with access to psychosocial support, including in child-friendly spaces</td>
<td>256,489</td>
</tr>
<tr>
<td>Number of women, girls and boys accessing gender-based violence risk mitigation, prevention or response interventions.</td>
<td></td>
</tr>
<tr>
<td>Number of unaccompanied and separated children reunified with their primary caregiver or provided with family-based care/alternative care services.</td>
<td>3,000</td>
</tr>
<tr>
<td><strong>Education</strong></td>
<td></td>
</tr>
<tr>
<td>Children accessing formal or non-formal education including early learning</td>
<td>62,495</td>
</tr>
<tr>
<td>Children receiving individual learning materials</td>
<td>254,726</td>
</tr>
<tr>
<td><strong>HIV/AIDS</strong></td>
<td></td>
</tr>
<tr>
<td>Number of pregnant women that have access to HIV and AIDS screening services and prevention of mother-to-child transmission services</td>
<td>42,385</td>
</tr>
<tr>
<td><strong>Non-Food Items</strong></td>
<td></td>
</tr>
<tr>
<td>Number of displaced people who received non-food items and emergency shelter.</td>
<td></td>
</tr>
</tbody>
</table>
## Annex B

### Funding Status

<table>
<thead>
<tr>
<th>Sector</th>
<th>Requirements</th>
<th>Funds available</th>
<th></th>
<th>Funding gap</th>
</tr>
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<tbody>
<tr>
<td></td>
<td></td>
<td>Received Current Year</td>
<td>Carry-Over</td>
<td>$</td>
</tr>
<tr>
<td>Nutrition</td>
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<td>197,792</td>
<td>6,134,273</td>
<td>27,946,686</td>
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<td>Health</td>
<td>1,513,942</td>
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<td>248,209</td>
<td>1,265,733</td>
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<tr>
<td>HIV/AIDS</td>
<td>400,000</td>
<td>0</td>
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<tr>
<td>WASH</td>
<td>7,388,500</td>
<td>1,584,475</td>
<td>1,559,827</td>
<td>4,244,199</td>
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<tr>
<td>Child Protection</td>
<td>3,017,886</td>
<td>1,070,279</td>
<td>297,711</td>
<td>1,649,896</td>
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<tr>
<td>Education</td>
<td>6,641,811</td>
<td>0</td>
<td>622,753</td>
<td>6,019,058</td>
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<tr>
<td>Emergency Preparedness</td>
<td>2,660,000</td>
<td>979,771</td>
<td>874,528</td>
<td>805,701</td>
</tr>
<tr>
<td>Social Protection and Cash transfers</td>
<td>3,600,000</td>
<td>0</td>
<td>0</td>
<td>3,600,000</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>59,500,890</strong></td>
<td><strong>3,832,316</strong></td>
<td><strong>9,737,301</strong></td>
<td><strong>45,931,273</strong></td>
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</tbody>
</table>