

Higher prices, less aid: how communities experience COVID-19

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GROUND TRUTH
SOLUTIONS



CHS Alliance

Introduction

Since the onset of the pandemic, Chad has recorded relatively low case numbers. In the provinces surveyed by [Ground Truth Solutions](#), there were 299 cases in Moyen Chari, 184 in Logone Oriental, 89 in Wadi Fira, 53 in Lac, and 22 in Ouaddaï.¹ In March 2020, the Chadian government implemented a National Contingency Plan for Coronavirus Preparedness and Response, along with various restrictions. These gradually eased over the year.²

Humanitarian operations had to adapt to new health needs and rising numbers of displaced people, all while adhering to government restrictions. The revised July 2020 Humanitarian Response Plan noted 76,543 more displaced people in need since its initial publication in January.³ Yet government measures severely affected the delivery of humanitarian assistance, particularly in health; food; education; and water, sanitation and hygiene (WASH).⁴ Given that communities in Chad already endure food insecurity, the risk of terrorist attacks by Boko Haram, and climate shocks, reduced assistance has left many people unable to [meet basic needs](#) or [access information](#).

Amid these complex crises, elevating affected communities' voices is essential. [Ground Truth Solutions](#) – in partnership with the [Core Humanitarian Standard Alliance \(CHS\)](#) and with funding from the [Swedish Agency for International Development Cooperation \(SIDA\)](#) – supports humanitarian actors to centre their decision-making on the views of these communities, believing this will lead to more effective implementation.

This report analyses feedback from crisis-affected people (in Lac, Logone Oriental, Ouaddaï, Moyen Chari, and Wadi Fira) on the impact COVID-19 has had on their lives, and from humanitarian staff on how they view the response to the pandemic.

Project funded by:



¹ ["The COVID-19 epidemiological situation in Chad"](#) (in French), World Health Organisation, accessed on 15 March 2021.

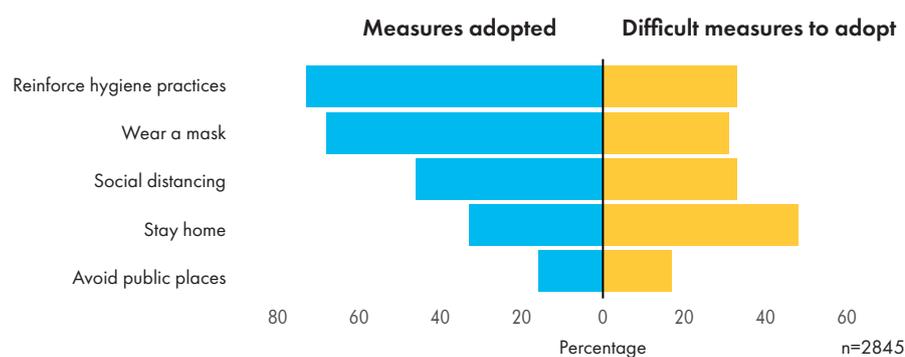
² ["Covid-19 National Contingency Plan"](#) (in French), Ministry of Public Health, accessed on 15 March 2021.

³ ["Chad Humanitarian Response Plan, Annex: Revision 2020"](#) (in French), OCHA, accessed on 3 March 2021.

⁴ ["COVID-19: having a significant impact on social life and the national economy,"](#) OCHA, accessed on 3 March 2021.

Precautionary measures

Government measures imposed and later eased during 2020 included face masks; curfews; isolation and quarantine; restrictions on movement out of refugee and internally displaced person (IDP) camps; health checkpoints; closures of schools, restaurants, bars, shops, and places of worship; and restrictions on numbers allowed at funeral gatherings and on public transport.⁵ Humanitarian agencies set up handwashing stations and distributed masks. Our survey of crisis-affected communities months after the start of the pandemic found that most people readily follow hygiene guidelines and wear masks, but consider staying home very challenging. Around one third (32%) report limited access to water or hygiene products.



Why are these precautionary measures difficult to adhere to? (n=2845)

- 32%** Lack of access to water or hygiene products
- 31%** Fear of losing out on humanitarian aid
- 27%** My work does not allow me to apply the measures

Note: These are the top three most frequently mentioned answers to the question.

People say it is difficult to comply with precautionary measures because if they stay at home or keep their distance from others, they might miss opportunities to receive humanitarian assistance, even though many humanitarian staff report that their organisations have changed or adapted their distribution system so that communities can safely distance themselves. Around a quarter of people interviewed said they find it difficult to take precautionary measures because of their work, likely because their jobs require them to work in close proximity with other people.

Only 1% of those surveyed by Ground Truth Solutions say they do not take any precautionary measures, but this doesn't mean there is compliance at all times. Our respondents were surveyed near to their homes, but people on the move tell a different story. Almost half of respondents in the International Organization for Migration's (IOM) Displacement Tracking Matrix (DTM) surveys between July and December said they had not taken any precautionary measures when travelling.⁶

Of humanitarian workers surveyed, 87% believe the measures implemented are sufficient. They highlight the importance of increasing the cars available for field missions and making water, sanitation and hygiene (WASH) kits available to communities. These measures appear to be keeping people safe from the virus but cannot address communities' wider concerns about economic deterioration.



Respondents who report following hygiene guidelines (n=2845):

- 88%** of IDPs
- 76%** of returnees
- 72%** of host community members
- 68%** of refugees



Respondents who report wearing masks (n=2845):

- 75%** of returnees
- 77%** of host community members
- 62%** of refugees
- 57%** of IDPs

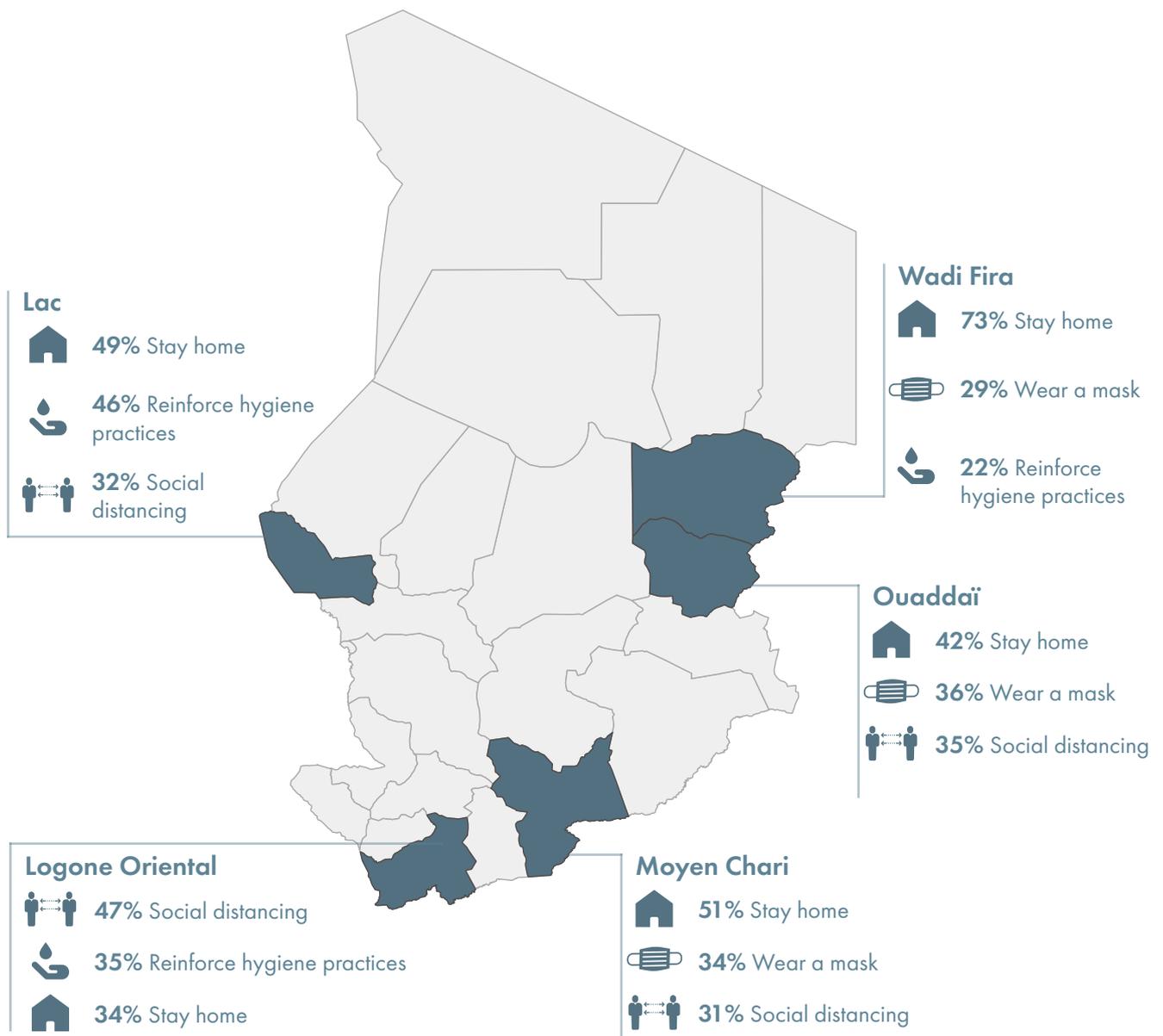


Fewer people in Wadi Fira (55%) and Lac (56%) wear masks compared to respondents in Logone Oriental (80%), Moyen Chari (74%), and Ouaddaï (68%).

⁵ "COVID-19 Government Measures Dataset," ACAPS, accessed on 3 March 2021.

⁶ "Examining the impact of COVID-19 on travellers across Chad," IOM, accessed on 3 March 2021.

The most difficult precautionary measures to adopt by province (n=2845)



Humanitarian staff feedback (n=102)



The main precautionary measures implemented by their organisations for **crisis-affected communities** include:

- 86% Setting up handwashing stations
- 77% Organising training on precautionary measures
- 65% Changing or adapting distribution systems so that affected people can safely distance themselves
- 65% Distributing masks
- 55% Providing WASH kits



The main precautionary measures implemented by their organisations for their **staff** include:

- 90% Setting up hand-washing stations with soap and water in offices
- 82% Requiring humanitarian staff to comply with government restrictions
- 81% Respecting distancing guidelines
- 77% Distributing masks
- 76% Organising training on precautionary measures
- 66% Transitioning to part-time home work
- 58% Restricting in-country missions

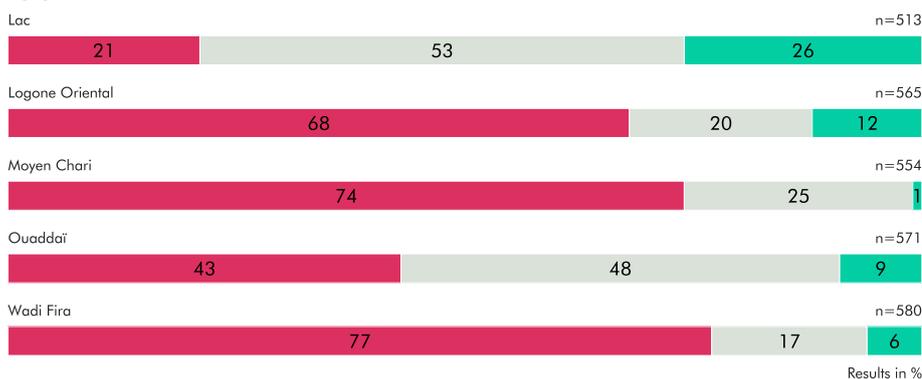
Socioeconomic impact

Given the government’s restrictions on mobility, limitations on public gatherings, and store closures, it is not surprising that communities report a deterioration in their ability to meet basic needs.

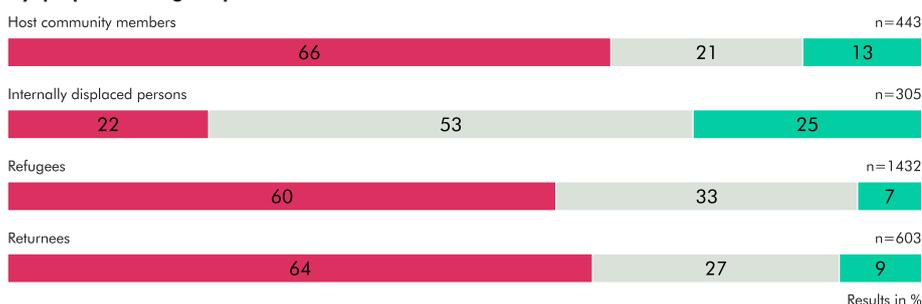
How has your ability to meet your basic needs changed since COVID-19 began to spread in Chad?



By province



By population group



Many have lost incomes, especially in Logone Oriental (35%) and Wadi Fira (32%). The DTM survey also found that keeping a job was the main challenge faced.⁷

In Moyen Chari, crisis-affected people report that the reduction or loss of humanitarian aid (27%) is the primary reason they are unable to meet their needs.

In Lac and Ouaddaï, around half of the respondents report that there has been no change in their lives because of COVID-19. Similarly, the DTM survey in northern Chad and at the Cameroonian border found that 58% of travellers said they had not encountered any additional challenges since the beginning of the pandemic.⁸

Yet, for those in Lac who report a deterioration in their ability to meet their needs, 37% attribute this to rising prices. Famine Early Warning Network’s (FEWSNET) February 2021 Price Report found that the nominal retail price of maize in Bol has been higher over the past four months than the five-year average.⁹



Humanitarian staff feedback

How has the way you implement your activities changed since COVID-19 began to spread in Chad? (n = 102)

- 40%** Improved
- 31%** Worsened
- 22%** No change

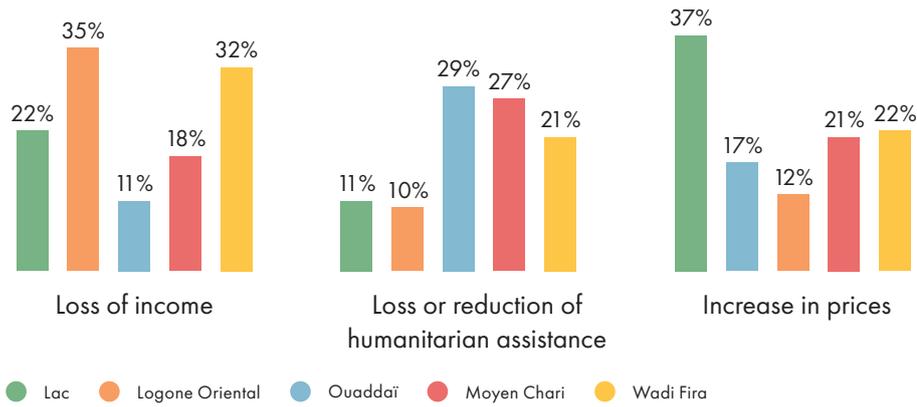
Further research should be conducted to understand why 40% of humanitarian personnel report that their ability to carry out activities has improved since the beginning of the pandemic.

⁷ "Examining the impact of COVID-19 on travellers across Chad," IOM, accessed on 3 March 2021.

⁸ Ibid.

⁹ "Chad Price Bulletin," Famine Early Warning Systems Network, accessed 3 March 2021.

If the ability to meet basic needs has worsened, what factors have contributed?
(n=1598)



Note: These are the top three most frequently mentioned answers to the question. Since respondents sometimes gave more than one answer, the sum of the percentages does not equal 100%.

Almost all respondents report the same three reasons why it is harder to meet their basic needs: less income, less aid, and higher prices. The loss or reduction of humanitarian aid is of greatest concern to refugees and returnees, who are more likely to depend on humanitarian assistance than host communities. Any reduction in the distribution of services is acutely felt by those who depend on it to meet daily needs.

Methodology

Questionnaire

The COVID-19-related questions we asked were incorporated into our broader survey on people's views of the humanitarian assistance they receive (see our report on [needs](#) and [information](#) for more details). These COVID-19 questions were designed by Ground Truth Solutions in consultation with the WHO Global Risk Matrix and the COVID-19 Comprehensive Humanitarian Response Plan. Our questionnaire focused on people's adoption of precautionary measures and the economic impact of the pandemic. Before drafting our questionnaire, we conducted a review of other survey tools focused on COVID-19 to avoid duplicating activities and to ensure that our data would be useful and actionable. Survey questions and response options were also shared with actors working in the field to ensure that the survey was adapted to the specific realities of Chad. The questions include Likert scale answers (where the answers correspond to a score of 1 to 5), as well as binary answers and multiple choice.

The questionnaire for affected communities was written in French and then translated orally into the following languages during the census sessions, based on the linguistic composition of each province: Arabic, Chadian Arabic, Kanembou, Bouduman, Assangori, Massalite, Ngama, Foulbé, Sango, Kaba, Tama, Zaghawa, and other local languages in Chad. The questionnaire for humanitarian personnel was made available in French and English.

The questions we asked humanitarians were designed by Ground Truth Solutions and based on our first two surveys of humanitarian staff in Chad, conducted in [June 2018](#) and [December 2019](#), and were adapted to understand the impact of COVID-19 on their work.

Sample framework

A total of 2,845 people were interviewed in this fifth round, across five provinces: Lac (541), Ouaddaï (575), Logone Oriental (573), Moyen Chari (572), and Wadi Fira (584). These provinces and the corresponding sites per province were selected based on the number of people affected by crises, the number of humanitarian actors present, and our enumerator team's ability to access the crisis-affected population based on security risks and logistics. Due to security concerns, the sample framework was modified for Wadi Fira and did not include the department of Kobé (Iriba). The sample in Wadi Fira was also based on the number of food insecure people living in the province to ensure that we calculated a sample representative of the people in need.

The sample is stratified in proportion to the size of the affected populations in each camp, site, or village, by status (refugees, IDPs, returnees, host community). Within each stratum, respondents were randomly selected by interviewing one eligible person every three households to cover each camp, site, or village.

Province	Host community	Refugees	Internally displaced	Returnees	Total
Lac	71	75	317	78	541
Logone Oriental	127	204		242	573
Ouaddaï		575			575
Moyen Chari	78	197	2	295	572
Wadi Fira	173	411			584
Total	449	1462	319	615	2845

Sample of people affected by crises

2845 respondents

Province

584 in Wadi Fira
575 in Ouaddaï
573 in Logone Oriental
572 in Moyen Chari
541 in Lac

Our sampling frame included 550 people per province. The size of the final sample varied by province but was not intentional.

Gender

 1729 women (61%)
 1116 men (39%)

Population group

 1462 refugees (51%)
 615 returnees (22%)
 449 host community members (16%)
 319 internally displaced persons (11%)

Age groups

1332 people ages 18-35 (47%)
1239 people ages 36-60 (44%)
274 people ages 61 and older (9%)

People living with a disability

 515 people living with a disability (18%)

Recipients of cash and voucher assistance

 1525 Recipients of cash and voucher assistance (54%)

We aimed to interview an equal proportion of women and men. Our final distribution is 61% female and 39% male. When conducting the survey, male-headed households regularly referred us to the women in the household to answer our questionnaire. This may be due to the fact that women are more targeted by humanitarian aid in that province and/or because women are generally responsible for the humanitarian aid their households receive.

All respondents were 18 years of age or older and all were recipients of humanitarian assistance.

For the online humanitarian staff survey, we targeted humanitarian personnel working at both national and provincial levels, holding a range of positions, and national or expatriate staff. In total, 102 humanitarian staff responded, which includes local staff as well as national coordination staff based in N'Djamena.

Data collection

Locally recruited enumerators, trained by Ground Truth Solutions, conducted face-to-face interviews (respecting COVID-19 precautionary measures) with affected people between November 2020–March 2021. Within a given site, enumerators surveyed every third household to ensure randomisation of the sample.

For the online humanitarian staff survey, a link to a KoBo Toolbox survey was shared with humanitarian partners across Chad for staff members to complete during February 2021.

Weighting

Data from affected people and overall mean values presented were weighted based on province (administrative level 1) population figures. For multiple choice questions, the maximum margin of error at the 95% confidence interval lies at (+/-) 12 percentage points, and between (+/-) 2 and 6 percentage points for the binary questions. Margins of error for breakdowns by province, status, and gender are larger than for the overall weighted means. Data points that did not contain the respondent's province were not considered for the weighted analysis.

Disaggregation

This report explores the difference in perception between demographic groups when it is relevant to report.

Limitations

A series of logistical challenges and security concerns impeded our team's ability to survey communities in the Iriba region in Wadi Fira, where we had anticipated surveying refugees in Touloum, Amnabak, and Iridimi. Our survey in Wadi Fira consequently only included respondents located in Guereda, thus the results from this province are not representative of people in need throughout Wadi Fira.

You can find more results from this survey in our reports on [needs](#) and [information](#) or check out [all of our reports on Chad](#).

For a French version of this report, [click here](#).

Sample of humanitarian personnel

102 respondents

Gender



80 men (78%)



21 women (21%)

1 do not wish to answer (1%)

Status

73 national staff (72%)

29 expatriate staff (28%)

Type of organisation

62 staff from international NGOs (61%)

35 staff from UN agencies (34%)

5 staff from national NGOs (5%)

Intervention level

65 province (64%)

37 national (36%)

Province

26 in Lac (25%)

18 in Wadi Fira (18%)

15 in Ouaddai (15%)

5 Other (5%)

1 in Logone Oriental (1%)

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