

Situation Overview and Humanitarian Needs

Since Chad declared its first case of COVID-19 on 19 March 2020, there has been a steady increase in confirmed cases. As of 12 May 2020, a total of 372 confirmed COVID-19 cases have been registered in nine provinces: N'Djamena, Ouaddai, Lac, Logone Occidental, Logone Oriental, Moyen-Chari, Wadi Fira, Batha and Kanem. Of these, 252 are hospitalized and under treatment (244 in N'Djamena, 2 in Logone Oriental and one case in each of the following provinces : Batha, Kanem, Lac, Logone Occidental, Moyen-Chari and Wadi Fira), 78 patients have recovered, and 42 deaths (of which 5% are community-registered deaths) are attributable to COVID19. The majority of cases have been male, with most between 25-59 years of age. As of 12 May 2020, a total of 619 out of 773 (80%) contacts have been traced and are followed¹.

The United Nations and Development Partners have secured partial funding in support to 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 with the support of its development partners for the Plan. UN agencies are positioning their assistance in the critical areas of communication, disease surveillance and testing including at critical border entry points, distribution of health consumables/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.

Key challenges include: Great difficulties in procurement on the global market of adequate quantities of health supplies especially personal protection equipment (PPE) and equipment for clinical care to equip among others Farcha Provincial Hospital and render the unit entirely functional; strengthening capacity in surveillance, tracing, case management and isolation of contacts ; limited laboratory testing capacity in N'Djamena and in the provinces; poor sanitation facilities in quarantine sites and public spaces.

UNICEF's COVID-19 response

Health, Nutrition & HIV

UNICEF is supporting the Government and partners to implement the National Contingency Plan for Preparedness and Response to the Epidemic of Coronavirus COVID-19. This includes participation to various management committees particularly on disease surveillance and case management as well as on logistics. In partnership with WHO, to date 15 healthcare providers in N'Djamena have been trained in detection, referral and appropriate management of COVID-19 cases including among children, pregnant and breastfeeding women. Such trainings are planned to be cascaded at provincial level in the coming weeks.

As part of the COVID-19 response, 216 healthcare facility staff and community health workers (of which 204 community health workers) have been trained jointly with WHO in Infection Prevention and Control (IPC) and another 295 health workers and community health workers have been trained in IPC WASH with UNICEF support.

UNICEF is conducting a laboratory biosafety training for laboratory technicians engaged in the COVID-19 response.

The process of provision of personal protection equipment (PPE) and other health commodities and supplies to Farcha Provincial Hospital, designated for COVID-19 case management in N'Djamena, is ongoing. An international PPE order was placed to help cover the needs of health staff operating in referral hospitals in charge of case management and is expected to be delivered in June 2020.

UNICEF has been supporting the MoH's Directorate of Food and Nutrition Technology in developing guidelines and communication tools for frontline health workers for integration of COVID-19 in nutrition programmes. Further to the release of mitigation measures from the MoH, UNICEF has also worked closely with provincial health delegates to ensure provision of treatment for

Situation in Numbers



372 COVID-19 confirmed cases

0% children among the confirmed cases

42 deaths

78 recovered



3,023,602 children aged 3 to 17 years of age affected by COVID-19 related school closures



US\$ 8.9 million funding required

¹ WHO/MoH Chad, COVID-19 Situation Report No. 50, 12 May 2020.

children suffering from severe acute malnutrition (SAM), while minimizing the risk of contamination. To date, 66,009 SAM cases have been admitted and treated. Additionally, the Nutrition Cluster has set up a task force to provide updated guidelines on Nutrition Programming in light of the COVID-19 pandemic.

Moreover, to ensure service continuity and access to Anti-retroviral Therapy (ART) supplies for people living with HIV (PLHIV), the Ministry of Health (MoH) signed a decree instructing health staff to provide a 3-month supply of ART to PLHIV and AIDS in order to reduce their displacements. Psychosocial support personnel were also authorized to provide ART to PLHIV who are unable to access health facilities. To this end, UNICEF provided logistical support to the MoH in order to supply provincial pharmacies with the necessary provisions of ART and other commodities.

In the Eastern refugee camps (Ouaddai, Wadi Fira and Ennedi-Est), 92 youth workers have been trained on COVID-19 sensitisation and 595 pregnant women were sensitized on COVID-19. In Lac province, 12 health workers (6 doctors and 5 HIV focal points) were briefed on COVID-19.

WASH

UNICEF and the MOH organized a Training of Trainers on IPC WASH for 79 staff and technicians in charge of Hygiene and Sanitation from the MOH, 10 districts of N'Djamena as well as national and international NGOs that are partners of the WASH Cluster. Additionally, 216 community organizers were trained in IPC WASH and communication messages as part of a training organized by UNICEF and WHO. Discussions are well advanced to extend training on IPC WASH in the COVID-19 in Ndjamen.

Discussions are also under way with the N'Djamena Mayor's office, MOH and NGO implementing partners to address prevention and awareness measures in the disadvantaged suburbs of N'Djamena. To date, UNICEF has provided a total of 16 Calcium Hypochlorite (HTH) containers (45 kg each) to the MoH and to the Municipality of N'Djamena to support hand washing (more than 360m³ produced for hand washing) and disinfection of four public places (four markets in N'Djamena).

UNICEF has continued to provide technical assistance to the IPC WASH sub-group, whose lead is ensured by the MoH. On a weekly basis, the sub-group defines the priority actions to be implemented.

UNICEF in collaboration with UNHCR and local NGO HELP Tchad has launched a WASH Emergency Response project for Sudanese students/refugees living in Kouchaguine camp. The project includes the

construction of 201 toilets, installation of handwashing stations with soap and dissemination of messages on good hygiene practices to prevent the spread of COVID-19.

RCCE/C4D

To ensure effective information, awareness-raising and community engagement around the COVID-19 outbreak in Chad, UNICEF strategy currently includes the following:

- Visuals (flyers, posters) on prevention /protection against COVID-19 were developed in French and Arabic. 140,000 copies were printed to be distributed country wide. Translation into local languages is ongoing.
- A child-friendly version of the posters has been produced and 133,000 copies have been printed and are under distribution.
- A strip comic book for children has been produced, in French and English and will be printed. A cartoon is in its final stages.
- 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 17 local radio stations to start broadcasting spots in local languages on COVID-19 protection.
- A child-friendly radio soap opera is being developed in collaboration with a local theatre group, to be broadcast on radio stations country-wide.
- On a daily basis, several messages are posted, ranging from tips, visuals, videos and content specially created for Facebook. 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. 25-minute programmes will be produced with specialists from the Government, UN and local partners to inform the population on COVID-19 and to answer questions from listeners.
- UNICEF, through its sub-national offices, is supporting the finalization of provincial communication plans developed by local authorities. In total, some 8,000 community relays, traditional and religious leaders and health workers will be trained in COVID-19 preventive measures and warning systems.
- In a joint effort of all UN agencies, 100 journalists and 216 community relays in N'Djamena were trained on COVID-19 communication.
- Specific messages on nutrition (continuity of exclusive breastfeeding even in case of COVID19) and child protection have been developed and will be integrated in the overall COVID-19 messaging.

- UNICEF has also ordered the printing of communication materials covering COVID-19 awareness that will be distributed to children and teachers nationwide.

Education

Technical and financial partners (among which UNICEF) have supported the Ministry of National Education (MNE) in developing a response plan and mobilizing resources, including from the Global Partnership for Education (GPE) and Education Cannot Wait (ECW). The response plan which includes the provision of educational programmes through radio, TV, mobile phone and an online e-platform was validated and approved by the Local Group of Education Partners (GLPE) on 27 April 2020.

UNICEF is currently assisting the MNE to organize several field missions in the provinces in May. The purpose of the missions is to inform the provincial authorities about the planned approach of the MNE and collect their feedback and additional information for the implementation of the COVID-19 response plan.

Child Protection

UNICEF has supported the Ministry of Social Affairs to coordinate interventions for the protection of vulnerable children living and working in the streets, as well as separated and unaccompanied children placed in temporary centers through a Task Force set up to this effect. A mapping of all existing social services supporting street children in N'Djamena was carried out, and a strategic plan was developed to reach 2,500 of the most vulnerable children with a package of services including access to temporary shelter, meals, hand wash facilities, psychosocial counselling, key information on how and where to access child protection services and dignity kits for adolescent girls and information on how to protect themselves from COVID-19.

In Ndjama, 34 children who were removed from a high-level security prison, of whom 18 children formerly associated with an armed group, and 16 children in conflict with the law, benefited from temporary care arrangements. They were provided with a package of services including family tracing, psychosocial support, medical care, access to WASH services and information on COVID-19. UNICEF supported the family reunification of 17 amongst them: 5 were children formerly associated with an armed group and 12 were children in conflict with the law. An additional 65 street

children, amongst whom one girl, also benefited from a package of services including accommodation and access to food/meals, psychosocial support and information on COVID-19.

In Lac province, 150 *muhadjirines* (children separated from their parents) in order to study the Quran and placed under the care of a Muslim religious teacher known as a *marabout*, benefitted from family reunification.

In addition, UNICEF advocated for the enforcement of the Government decision to release the most vulnerable populations from all detention facilities in order to prevent the spread of COVID-19. A total of 72 children who were still detained in six main prisons across the country were released and reunified with their families.

UNICEF also placed emphasis on reaching the most vulnerable community members with key information on COVID-19 preventive measures. In Moundou province, 12 professionals from the Provincial Delegation of Social Affairs received orientation sessions on COVID-19 by telephone, who in their turn provided face-to-face orientation to 30 children (of whom 10 girls). In addition, 78 returnees and refugees from Central African Republic, of whom 58 children (24 girls and 34 boys) were sensitized on COVID-19 preventive measures. In Lac province, 120 IDPs (of whom 30 women, 65 men and 25 children) and 886 members of host communities (of whom 397 women) benefited from information messages on COVID-19. This includes 165 members of child protection community-based networks and 87 *marabouts* (religious leaders). In Guera, Ouaddai and Wadi Fira provinces, 450 community members were also reached with information messages on COVID-19 preventive measures.

Access to continuous social protection services

Discussions are ongoing with the Government, the International Financial Institutions, and United Nations agencies regarding the joint response to the COVID-19 pandemic in the context of a medium-term multi-sector approach to addressing the broader economic and social impact of the COVID-19 pandemic. Cash transfer programmes are envisaged as part of the response. UNICEF is among the UN agencies currently contributing to the socio-economic impact assessment of COVID-19, in support of the Ministry of Economy and Development Planning.

Adaptations to ongoing UNICEF programmes

UNICEF maintains its current support to the Government for the regular programme. 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

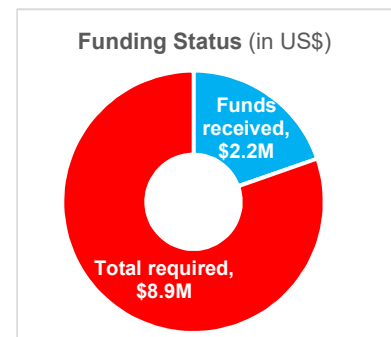
equipment. The MoH has taken the decision that non-critical activities and mass supplementary activities such as vaccination campaigns against measles and polio, vitamin A supplementation and deworming will be postponed (but routine immunization should be actively pursued and supported), and the focus will be on the continuity of essential activities while ensuring that health centres are better equipped to avoid on-site transmission (hygiene, handwashing, etc.) in more secure settings. Some management protocols have and continue to be adjusted to include COVID-19 issues (immunization, infant and young child feeding (IYCF), prevention of mother-to-child transmission of HIV (PMTCT), maternal, newborn and child health (MNCH), community-based disease surveillance).

UNICEF is supporting the MNE and NGO partners to ensure the transition to distance learning, with TV and radio sessions in languages and mathematics planned to run for two months until the end of June. Additionally, discussions are ongoing with the MNE to prioritize WASH in Schools activities planned under the regular programme in order to support the COVID-19 response and prevent the spread of COVID-19 amongst school-going children.

In the current context, all psychosocial activities provided to children within Child Friendly Spaces (CFS) have been suspended. This approach does not allow physical distancing, as it implies access of a large number of children at the same time in the CFS, for games and interaction with the social workers. UNICEF has therefore supported the revision of the guidelines for psychosocial support to vulnerable children, with focus on ensuring physical distancing and organizing smaller support groups, as well as ensuring that CFS avail of WASH kits and of protective equipment for social workers. The guidelines and training modules on IPC WASH for health providers, community health workers and community leaders have also been revised. Agreement documents signed with NGO partners are adapted to include sensitization activities on COVID-19 and the provision of WASH kits to reinforce prevention among the beneficiary population. Policy work on the revision of the National Social Protection Strategy is ongoing, integrating a stronger focus on shock-responsive social protection and expansion of social protection coverage for children.

Funding Overview and Partnerships

- UNICEF requires US\$ 8.9 million to meet the growing demand for critical needs and scale up the response to the COVID-19 virus outbreak.
- As of 14 May, UNICEF has received US\$ 2.2 million thanks to generous contributions from ECHO, CERF and Global Partnership for Education (GPE).
- UNICEF is in discussion with partners to secure additional funding through new allocations or reprogramming. UNICEF thanks partners for flexible and timely funding to support an effective and efficient COVID-19 response.



External Communication

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

For more information contact:

Vivian van Steirteghem

Representative

UNICEF Chad

Tel: +235 22 51 71 50

Email: vvansteirteghem@unicef.org

Celestin Traoré

Deputy Representative, a.i.

UNICEF Chad

Tel: +235 22 51 71 50

Email: ctraore@unicef.org

Benny Krasniqi

Chief Field Operations

UNICEF Chad

Tel: +235 66 39 10 14

Email: bkrasniqi@unicef.org

Summary of Programme Results

Sector	UNICEF and IPs Response	
	2020 target	Total results
Risk Communication and Community Engagement		
Number of people reached on COVID-19 through messaging on prevention and access to services	2,803,460	2,930
Number of people engaged on COVID-19 through RCCE actions	117	2
Number of people sharing their concerns and asking questions/clarifications for available support services to address their needs through established feedback mechanisms	0	0
WASH and IPC		
Number of people reached with critical WASH supplies (including hygiene items) and services	418,775	99
Number of healthcare facilities staff and community health workers provided with Personal Protective Equipment (PPE)	1,405	12
Number of healthcare facility staff and community health workers trained in Infection Prevention and Control (IPC)	1,895	511
Health		
Number of healthcare providers trained in detecting, referral and appropriate management of COVID-19 cases among children, pregnant and breastfeeding women	200	15
Nutrition		
Number of primary caregivers of children aged 0-23 months who received IYCF counselling through facilities and community platforms	235,751	0
Number of children 6-59 months admitted for treatment of severe acute malnutrition	417,901	66,009
Education		
Number of children supported with distance/home-based learning	742,030	0
Number of schools implementing safe school protocols (COVID-19 prevention and control)	500	0
Child Protection and GBV		
Number of children without parental or family care provided with appropriate alternative care arrangements	2,895	256
Number of children, parents and primary caregivers provided with community based mental health and psychosocial support	5,375	249
Number of UNICEF personnel & partners that have completed training on GBV risk mitigation & referrals for survivors, including for PSEA	0	0
Number of children and adults that have access to a safe and accessible channel to report sexual exploitation and abuse	0	0
Social Protection		
Number of households (affected by COVID-19) receiving humanitarian multi-sector cash grant for basic needs	7,494 ² (preliminary)	0

² This target is preliminary and subject to change.



Annex B

Funding Status

Sector	Funding requirements	Funds available	Funding gap \$	Gap %
Communication & Hygiene	1,098,800	280,000	818,800	75%
WASH	1,938,283	674,631	1,263,652	65%
Nutrition	1,955,381	546,530	1,443,976	74%
Health & HIV/AIDS	1,600,336	450,000	1,150,336	72%
Child Protection	1,208,400	189,825	1,018,575	84%
Education	1,098,800	70,000	479,400	87%
Cash-based Transfers	- (*)	- (*)	- (*)	- (*)
Total	8,900,000	2,175,861	6,724,139	76%

**Amount to be confirmed (based on the ongoing socio-economic impact assessment and vulnerable household targeting strategy for emergency assistance)*