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# Emergency Plan of Action Final Report

## Chad: Food Security Crisis

 International Federation  
of Red Cross and Red Crescent Societies

<b>DREF operation n°:</b> MDRTD015	<b>Glide number:</b> n° OT-2017-000114-TCD
<b>Date of Issue:</b> 22 June 2018	<b>Date of disaster:</b> July 2017
<b>Operation start date:</b> 11 August 2017	<b>Operation end date:</b> 11 January 2018
<b>Host National Society:</b> Red Cross of Chad (CRC)	<b>Operation budget:</b> CHF 233,017
<b>Number of people affected:</b> 89,700	<b>Number of people assisted:</b> 12,350
<b>N° of National Societies involved in the operation:</b> Belgian Red Cross and French Red Cross	
<b>N° of other partner organizations involved in the operation:</b> The permanent Inter-State Committee for Drought Control in the Sahel (CILSS), The Global Alliance for Resilience Initiative (AGIR)	

## A. SITUATION ANALYSIS

### Description of the disaster

In early 2017, Chad was found to have pockets of severe food insecurity with population facing serious nutritional issues. According to the [Cadre Harmonisé](#), of March 2017, about 13,102 people were then in *Emergency* (phase 4) while an estimated 367,218 people in four districts were in *Crisis* (phase 3). These vulnerable people needed food, affordable basic commodities, rehabilitation and nutrition, health and other livelihood assistance and capacity-building for resilience. An estimated 1,886,800 people in 18 districts were in *Stress* (phase 2). These people needed support to build resilience, develop their livelihoods and keep severe malnutrition at acceptably low levels. Projected figures were showing a worsening situation with more than 897,408 people in Crisis or Emergency situation (Phase 3 to 5) from June to August 2017.

Humanitarian efforts of the government and its partners were not able to curb the progression of the difficulty of accessing food. Besides, the low coverage of humanitarian assistance in country, the depletion of the food stock, the limited coping strategies and the increasing number of food insecure people darkened the food security and malnutrition picture in Chad.

In view of this, food aid, accompanied by strong actions for better nutritional and livelihood protection, was required. Considering that the food and nutritional situation is periodic (lean season), the Red Cross of Chad (CRC) with the support from the IFRC Sahel Country Cluster Support Team (Sahel Cluster) and the IFRC Niger Country Office, made a commitment to work upstream (preparation) and downstream (post-response) to better understand the food insecurity problem and provide adequate short and long-term interventions.

As such, on 11 August 2017, the Disaster Relief Emergency Fund (DREF) of the IFRC launched a [DREF operation](#) for CHF 233,017 to support the Red Cross of Chad to respond to the emergency in the vulnerable groups identified and to conduct a detailed assessments which would feed in the preparation of a strong four-year program, based on a preparedness and resilience approach. This operation equally aimed at providing food and preventive nutrition activities for 1,900 households and enable the affected population to survive and meet its immediate needs during the lean season (July to October 2017). Overall, the operation targeted 12,350 people. In November 2017, a [DREF Operation Update](#) was approved, extending the operation timeframe for a further two months until 11 January 2018. This was to allow proper completion of planned activities which had been delayed for security reasons and to enable the National Society

to take part in the regional lessons-learned workshop set for December 2017 in Dakar. To note, the lessons-learned workshop was to encompass all the five Food security DREF operations launched in August 2017.

The major donors and partners of this DREF included the Red Cross Societies and governments of Australia, Austria, Belgium, Britain, Canada, Denmark, Finland, Ireland, Italy, Japan, Luxembourg, Monaco, the Netherlands, Norway, Spain, Sweden and the USA, as well as DG ECHO, the UK Department for International Development (DFID), AECID, the Medtronic and Zurich Foundations and other corporate and private donors. On behalf of the Red Cross of Chad (CRC), the IFRC would like to extend its gratitude to all partners for their generous contributions.

## **Summary of response**

### Overview of Host National Society

Since the food crisis of 2004/2005, the Red Cross of Chad has been building up its operational capacity in managing operations and has successfully managed food security and nutritional operations in the last few years (2005, 2008, 2011-2012, 2015 and 2017). As such, the National Society has built extensive experience in managing Food and Nutrition crisis. In addition to this operational experience, the CRC has diversified its response strategies and tools, for example with the use of the cash transfer modality to respond to crises when feasible. The systematic involvement of communities in operations was also ensured. The section "[Detailed Operational Plan](#)" gives a more specific overview of the actions undertaken by the National Society under this DREF operation.

### Overview of Red Cross Red Crescent Movement in country

For the implementation of this DREF operation, **IFRC**, through the Sahel Cluster, provided technical support and deployed a Regional Disaster Response Team (RDRT) member to support the National Society. Indeed, through the deployed RDRT, IFRC also focused on providing adequate capacity building support to the Red Cross of Chad's team. At the regional level, a monitoring and coordination plan was established to support the National Society. **ICRC** has operational presence in some specific areas of Chad, particularly in conflict zones and there is a cooperation agreement between the ICRC and the National Society. The **French Red Cross** is well established in the country and supports the CRC in the implementation of projects and programs as well as in strengthening food security, nutrition and the livelihoods sector. Coordination meetings of the Red Cross Movement were held regularly, bringing together partner National Societies (PNS), the ICRC, the CRC and the deployed RDRT to support the implementation of the operation.

### Overview of non-RCRC actors in country

Between January and June 2017, the Red Cross of Chad's partners worked together with the Food Security Cluster to reach around 1,027,763 people through relief activities.

## **Needs analysis and scenario planning**

### **Needs analysis**

Considering the analysis of the harmonized framework, which was globally worrying in regard to food security and nutrition, food distribution actions were carried out for 861,300 vulnerable people, among whom 12,350 were directly targeted within this DREF operation.

### **Capacity building**

Capacity building was part of the objectives to be achieved both at local and national levels. At local level, the operation set up community management structures which were fully involved in the beneficiaries' selection. At the national level, refresher training sessions for volunteers and National Disaster Response Teams (NDRT) members on Food Security, Nutrition and Livelihoods were conducted.

### **Beneficiary Selection**

Beneficiaries were identified and selected upon the agreed criteria based on the Household Economy Assessment (HEA). The selection was done through a participatory approach with the collaboration of local Red Cross branches, local administrative authorities, community members, the heads of agriculture and livestock national departments, health services, the food security and livelihood agents and other partners.

### **Operation Risk Assessment**

Chad is regularly experiencing attacks from armed groups and the country remains permanently on alert. This situation caused delays in the implementation of activities. Although the operational areas were not at-risk, preventive actions were taken to mitigate insecurity. Attention was paid on the reinforcement of security rules and measures to ensure a smooth implementation of activities.

## B. OPERATIONAL STRATEGY

### Proposed strategy

The overall objective of this operation was to provide food and preventive nutrition activities for 1,900 households and enable the affected population to survive and meet its immediate needs during the lean season (July to October 2017).

The strategy that was proposed included the following:

- Continuous needs assessments and analysis which were geared towards helping to better define the food security program as well as to consider the short and longer-term aspects to addressing this problem;
- Response to the immediate food and non-food needs of 12,350 people (1,900 households), in the Wave District in *Gouri Rural*, *Doum* and *Kouloudia* sub-prefectures. Nutrition and health / wash activities were also planned to accompany the food assistance.
- Protection of the livelihoods of households which were planned to be fully integrated in the four-year Community-based Resilience Program.

## C. DETAILED OPERATIONAL PLAN

<b>Early warning and preparedness for Emergency Response</b>
<b>Outcome 1: Evaluations and coordination are ensured in the implementation of the operation</b>
<b>Output 1.1: The food and nutritional situation is determined, and recommendations are made</b>
<b>Planned activities</b>
1.1.1. Rapid evaluation in the vulnerable pockets 1.1.2. In-depth evaluation of the food and nutritional situation 1.1.3. Final evaluation of the Operation
<b>Output 1.2: Strengthening internal and external coordination</b>
<b>Planned activities</b>
1.2.1. Communication and visibility on the Operation 1.2.2. Internal coordination meetings 1.2.3. Participation in Food Security and Nutrition Cluster meetings 1.2.4. Participation in Country and regional meetings
<b>Narrative description of achievements</b>
<p><b>1.1.1. Rapid needs assessments in the vulnerable pockets</b> Rapid assessments in areas classified at risk were carried out, to inform the development of the Plan of Action for this DREF operation.</p> <p><b>1.1.2. In-depth assessment of the food and nutritional situation</b> The in-depth assessment enabled the Red Cross of Chad to assess 541 households. Additionally, six focus group discussions were organized, nine key informants were interviewed, 12 village committees were met as well as the heads of technical services and the administrative and traditional authorities of the targeted areas. The results of the assessment reveal that that hunger remains a challenge for many households. Almost three quarters (72.10 percent) of households suffer from poor food consumption with a higher prevalence in the Lake region of Chad (90.96 percent).</p> <p><b>1.1.3. Final evaluation of the Operation</b> A joint lessons-learned workshop, aiming at analysing successes, challenges, best practices and recommendations, to better inform future programs, was conducted in December 2017. In a similar vein, a DREF Review was conducted in February 2018 in Chad by IFRC together with the Canadian Red Cross and the British Red Cross. It analysed and provided an overview of potential options for programming activities and managing food and nutritional crises in the Sahel Region.</p>

### **1.2.1. Communication and visibility on the Operation**

Communication, advocacy and community awareness materials were developed to make visible the relief actions of both the Red Cross of Chad and IFRC through the production and realization of articles, press releases, testimonies, leaflets, photos and videos.

### **1.2.2. Internal coordination meetings**

- On 5 September 2017, the Red Cross Movement Coordination Meeting was held. It brought together four Red Cross of Chad representatives (Secretary General, programme coordinator, food security focal point, PMER Officer), three ICRC representatives including the Deputy Head of Delegation, two French Red Cross members including the Country Representative and the RDRT deployed by IFRC. This meeting focused on security aspects and the review of activities (common priorities and priorities for each Red Cross Red Crescent family member).
- Joint actions implemented within the framework of this internal coordination should also be mentioned. For example, ICRC together with the Red Cross of Chad provided assistance to 500 vulnerable households in Ngouboua, Fouli department (Lake region) through the distribution of market gardening seeds and materials (hoes, rakes, beaks).

### **1.2.3. Participation in Food Security and Nutrition Cluster meetings**

- The group named Crisis Group held a meeting on Thursday 14 September 2017 at OCHA headquarters on the food insecurity and malnutrition situation. This meeting enabled participants to share and update information on food insecurity and malnutrition, taking into account the pastoral situation. Some challenges were noted during the meeting amongst which was the unavailability of SMART indicators. Recommendations were made to address them.
- Another food security cluster meeting held on Wednesday 11 October 2017 and was geared towards assessing the responses to food insecurity. The opportunity was seized to recommend humanitarian partners to complete their interventions as the lean season was almost over, considering that harvests were not effective everywhere. This meeting also announced the presence of legionary caterpillars in some areas such as, Ndjama.

### **1.2.4. Participation in Country and regional meetings**

- The November 2017 harmonized framework exercise on food insecurity vulnerability analysis took place and showed that during the period (October to December 2017) the two Lake region departments were in crisis phase and that if nothing was done 17 departments would fall into crisis phase during the projected period (June to August 2018) including Waye department.
- For the sake of a better coordination of relief activities, the Red Cross of Chad, met with ACTED Country Representative on 08 September 2017. The exchanges focused on the areas of intervention of each actor. Indeed, ACTED also intervened within the framework of food security through cash transfer. These exchanges enabled Red Cross operational team to better define the DREFs intervention villages with support from local authorities and technical services. Thanks to this meeting, the National Society could expand its geographical coverage of interventions.
- Within the coordination framework with external actors the Red Cross of Chad also met with ALIMA and CARE present in Wayi Department. ALIMA, in partnership with Alerte Santé, was involved in the management of malnourished people at Ngouri health centres and hospital. Red Cross teams thought that the collaboration with Alima would be relevant as the Red Cross intervention included screening and referrals of malnourished children to health centres managed by ALIMA and Alerte Santé.

### **Challenges**

None reported

### **Lessons Learned**

The recommendations for both the Lessons-learned workshop as well as the DREF Review are available on request.

## Capacity building of the National Society

**Outcome 2: The technical capacities of Chad Red Cross to meet emergencies and implement Food Security, Nutrition and Livelihoods are strengthened**

**Output 2.1: The Capacity building of the National Society to meet emergencies and implement Nutrition and Livelihoods program is realized**

### Planned activities

- 2.1.1. Training of 20 volunteers on CTP/CBA and targeting/screening techniques
- 2.1.2. Re-training of 20 volunteers and 10 staff members on Food security / Nutrition and Livelihood (NDRT)
- 2.1.3. Participation of two CRC participants in the Food Security RDRT training

### Narrative description of achievements

#### 2.1.1. Training of volunteers on screening techniques on targeting/screening techniques

A total of 60 community volunteers and National Society staff were trained on screening techniques

- With the view of promoting early detection of malnutrition in children aged from 6 to 59 months old at community level, the capacity of volunteers on child screening techniques was strengthened. The training was organized on 13 November 2017 and brought together 60 volunteers, including 14 women and 46 men.
- Additionally, another training related to ODK tool took place from 26 to 27 November 2017 and brought together 25 Red Cross volunteers, including three women. This training was geared towards strengthening the capacity of volunteers in data collection.

#### 2.1.2. Retraining of 30 NDRT (20 volunteers and 10 National Society staff) in Food security/Nutrition and livelihood and on CTP/CBA modalities in N'djamena

The capacity building of the National Society was enhanced through the training of 30 NDRTs. Indeed, to strengthen the capacities of volunteers in the field of disaster response in general and precisely in food security and nutrition interventions, a training of the National Disaster Response Team (NDRT) was organized from 14 to 18 September 2017. It brought together a total of 30 persons (20 volunteers and 10 NS staff) of whom 18 men and 12 women. This training enabled the 30 selected volunteers to strengthen their capacities in food security and nutrition thereby improving their understanding of the Sahel food security strategy. The topics related to the Red Cross Movement, accountability, safer access, disaster management, etc. were part of the training curriculum.

#### 2.1.3. Participation of two CRC participants in the Food Security RDRT training / Retraining of RDRT in Food Security and Nutrition

The Food Security and Nutrition focal point as well his colleague in charge of disaster management took part in the RDRT Food Security/Nutrition training organized by IFRC from 14 to 23 August 2017 in Bamako. This training aimed at strengthening National Societies' staff in addressing food insecurity, malnutrition considering gender and accountability in the implementation of programmes and projects.

### Challenges

None reported

### Lessons Learned

None reported

## Food security, nutrition and Livelihoods

**Outcome 3: Food and nutritional assistance to the most vulnerable people of Waye department is provided during the lean period (August - September 2017)**

**Output 3.1: Food assistance for 12,350 vulnerable people is provided through conditional cash transfer (vouchers)**

### Planned activities

- 3.1.1. Community Information (authorities, stakeholders)
- 3.1.2. Process community management structures
- 3.1.3. Feasibility analysis on support tools
- 3.1.4. Targeting beneficiaries
- 3.1.5. Obtaining distribution materials
- 3.1.6. Identification and contracting with the financial institutions and shops
- 3.1.7. Preparation of distribution tools
- 3.1.8. Distribution of foodstuffs (cash transfer, vouchers) for one month
- 3.1.9. Post Distribution Monitoring
- 3.1.10. Mid-term evaluation of the intervention

**Output 3.2: Community-based prevention and care-taking of acute/severe malnutrition are assured**

### Planned activities

- 3.2.1. Routine screening
- 3.2.2. Referencing and counter- referencing of severely malnourished children
- 3.2.3. Monitoring of malnourished children cases
- 3.2.4. Sensitization of caretakers on key health/nutrition practice
- 3.2.5. Promotion of exclusive breastfeeding and adequate supplementary feeding
- 3.2.6. Management of early screening by mothers (PBM approach)
- 3.2.7. Community discussions and awareness

### Achievements

#### 3.1.1. Community Information (authorities, stakeholders)

The meeting with authorities (*Préfet*, his Secretary General, the Deputy *Préfet* and the heads of neighbourhoods) aimed mainly at:

- Sharing the action plan with administrative authorities;
- Obtaining their guidance and support regarding the choice of villages where implementation will be carried out;
- Requesting their opinions on the food security situation.

The exchanges were fruitful as the authorities adhered entirely and welcomed the Red Cross initiative. They reiterated their availability and commitment to support the Red Cross. The Deputy *Préfet* and Heads of neighbourhoods/cantons shared the list of villages. A total of 27 villages in five neighbourhoods/cantons were selected based on vulnerability criteria.



Red Cross team meeting with Landeye village's community . Source: CRC

### **3.1.2. Process of community management structures**

After the meeting with authorities, the Red Cross operational team visited the 27 selected villages for a large information campaign regarding Red Cross actions in their communities. A general assembly was organised in each village, during which management committees were set up. A total of 54 committees were therefore set up, 27 men's committees and 27 women's committees comprising of 135 men and 135 women for a total of 270 committee members. Their role consisted in following the whole process set up, participating and facilitating all activities and accompanying volunteers in the targeted households.

### **3.1.4. Targeting beneficiaries**

Before each field visit to target beneficiaries, Chad Red Cross operational team informed beneficiaries and traditional leaders on the targeting criterion as well as the dates on which Red Cross teams would visit their communities. They also seized the opportunity of these meetings with communities to share information about the free malnutrition screening and food distribution through food vouchers.

Beforehand, volunteers and supervisors were mobilized to carry out the targeting activities. A total of 60 volunteers including three women, two supervisors (among whom one woman) and three team leaders (among whom one woman) led the targeting activities. Prior to this, they benefited from an orientation on the methodology provided with exhaustive census sheets, and the targeting sheets for beneficiaries. All these efforts resulted in the identification of 12,573 vulnerable people, including 1,843 pregnant and lactating women (FEFA) and 4,171 children under 2 years old.

### **3.1.5. Obtaining distribution materials**

Distribution tools or materials such as targeting, verification, and attendance sheets were developed in accordance with IFRC recommendations and procedures. The food vouchers for successful distribution activities were provided by IFRC Dakar cluster in support to National Societies.

### **3.1.6. Identification and contracting with the financial institutions and shops**

A first meeting enabled Red Cross operational team to identify 17 shopkeepers in the intervention areas. A survey was organised among these shopkeepers based on sheets filled by volunteers. A committee was set to supervise the process. It was comprised of the President of the local Red Cross branch, the food security focal point and the RDRT. Based on the analysis of sheets which considered the quality, the availability of stock, a total of 12 shopkeepers were selected and contracts signed.

### **3.1.7. Preparation of distribution tools**

The preparation of distribution tools was related to the development of data sheets, office equipment and photocopies of field tools. Besides, before the distribution of food vouchers, an information session was organized in each village. During those meetings, the Red Cross operational team, together with the community committees, heads of villages, traditional leaders as well as the community members proceeded to a joint planning of the distribution of food vouchers in each village. The opportunity was seized to share the information on the quantity of food to be distributed per child or adult. Everybody was also well informed about the participation of the community in the process.

### **3.1.8. Food distribution of food stuffs (cash transfer, vouchers) for one month**

- Food vouchers distribution began on 20 October 2017 and ended on 05 November 2017. During the process, a total of 12,394 food vouchers were distributed to the 12,573 targeted people. This distribution took place in the 27 selected villages and went on smoothly thanks to support from the community management committees. A team of 16 people was mobilized and was comprised of 12 volunteers, 2 supervisors and 2 team leaders (the Food security focal point and the RDRT). Prior to the distribution of vouchers, the volunteers and supervisors were oriented on how to fill vouchers
- Beneficiaries who received food vouchers started to receive food stuffs during the official launching ceremony which took place on 28 October 2017 and which was chaired by the deputy *préfet* of Ngouri area in presence of representatives of cantons or neighbourhoods' leaders. During the ceremony, the deputy *préfet* expressed his gratitude to Chad Red Cross and the IFRC for their assistance to the vulnerable people. The distribution activities ended on 15 November 2017 in the 17 selected sites. A total of 12,393 beneficiaries received foodstuffs comprised of maize, oil, sugar and salt, the quantity of which varied from one beneficiary to another. The type of food was chosen in common agreement with beneficiaries. It is worth adding that 86.46 tons of maize, 18.57 tons of sugar, 12 tons of oil and 6.19 tons of salt were distributed. In other words, a total of 123.22 tons of food were mobilized to cover the food needs of 12,393 people for 30 days. The following table gives more details on the distribution activities

Canton	Village	N° of distributed vouchers	Children under 2 years old	Pregnant and lactating women	Adults	Total, beneficiaries reached
Djigdada	Tada	200	54	21	125	200
	Bili	247	86	42	119	247
	Doula	110	48	25	37	110
	Kerey	199	75	5	119	199
<b>Sub-total Djigdada</b>		<b>756</b>	<b>263</b>	<b>93</b>	<b>400</b>	<b>756</b>
Dibinintchi	Ndjitoua	615	210	100	305	615
	Lo-Shouta	204	53	22	129	204
	Karoua	809	237	53	519	809
<b>Sub-total Dibinintchi</b>		<b>1628</b>	<b>500</b>	<b>175</b>	<b>953</b>	<b>1,628</b>
Yalita	Kiwa	432	63	74	295	432
	Bouroudo	1142	492	178	472	1142
	Bralngodou	900	401	96	403	900
<b>Sub-total Yalita</b>		<b>2,474</b>	<b>956</b>	<b>348</b>	<b>1,170</b>	<b>2,474</b>
Ngouri	Mana	478	176	47	255	478
	Landé yée	489	131	35	323	489
	Aougadiri 1	328	153	41	134	328
	Kollaye	220	70	41	109	220
	Roudo Mara					
	Boursari	799	236	80	483	799
	Blango 1	240	30	90	120	240
	Blango 2	170	67	42	61	170
	Blango 3 (Manchouri)	360	70	110	180	360
	Roudo Ndjara 1	131	44	31	56	131
	Aougaderi 2	114	39	17	58	114
	Roudo Ndjara 2	941	356	98	487	941
<b>Sub-total Ngouri</b>		<b>4,270</b>	<b>1,372</b>	<b>632</b>	<b>2,266</b>	<b>4,270</b>
Baderi	Deyla 1	581	66	96	419	581
	Deyla 2	191	36	47	108	191
	Kermaron 1, 2, 3, 4, 5	617	260	58	299	617
	Houni	552	176	90	286	552
	Ngourtou 1	772	231	200	340	771
	Ngourtou 2	553	188	70	295	553
	<b>Sub-total Baderi</b>		<b>3266</b>	<b>957</b>	<b>561</b>	<b>1,747</b>
<b>Grand Total</b>		<b>12,394</b>	<b>4,048</b>	<b>1,809</b>	<b>6,536</b>	<b>12,393</b>

### 3.1.9. Post Distribution Monitoring (PDM)

The PDM was geared towards collecting data to assess the organization of distribution activities; the use of food vouchers by beneficiaries; the use of food by the beneficiaries; relevant intervention modalities regarding food and nutrition security in the community as well as the impact of cash on beneficiary households and shopkeepers.

The survey was carried out through a quantitative household questionnaire and was conducted through household visits. The questionnaire was therefore submitted to a sample of 386 households among the 12,393 beneficiaries of cash transfer. Household data collection was carried out by a team of 12 interviewers in 14 villages from 23 to 29 November 2017. These interviewers were trained on the questionnaire by the food security focal point and DREF supervisors. The PDM survey revealed the following achievements and recommendations:

- The cash transfer went smoothly without a rush or any major incident.

- The food received was used primarily for consumption (99.5 percent), which meets not only the initial needs analysis conducted by CRC team but also the community's loyalty through messages transmitted during various awareness sessions on the use of the food received.
- When possible, increase the value food voucher in future cash transfer interventions considering food prices and the average household size (about seven persons).
- In areas where conditions allow it, develop continuous production alternatives such as market gardening to strengthen the food autonomy of people during hard times.

### 3.2.1. Routine screening

The prevention and community management of acute malnutrition was ensured through screening and referral of malnourished children, awareness raising and training of mothers of children on Mother Brachial perimeter approach. The Red Cross operational team was committed to conduct systematic screening of malnutrition among children from 06 to 59 months and contribute to the referral of severely or moderately malnourished children to the nearest care centres in order to prevent or treat malnutrition among vulnerable groups. With this view, a systematic screening of all children from 6 to 59 months old was organized in the 27 targeted villages. To achieve this goal, the Red Cross of Chad deployed 60 community volunteers and two supervisors involved in screening, referrals and awareness raising activities. These volunteers were previously trained on screening techniques which consist in taking the measurement of the circumference of the left arm (brachial perimeter) using the *Middle-upper arm circumference* (MUAC) ribbons for a systematic screening of children from 6 to 59 months old to detect moderately or severely malnourished children. A reference card was given to children whose PBs were red or yellow or who had oedema. Additionally, volunteers explained to mothers the importance of going to the nearest nutrition centre (CNA and CNS) with their reference card to treat children. The volunteers also trained mothers on MUAC taking techniques (Mother Brachial Perimeter approach) to enable them to regularly proceed to the screening of their children. With this approach, it was possible to know the nutritional status of a child and take early actions in case of any nutritional issue.

Canton	Children 6-59 months old			Children With bilateral Oedemas	Total children from 6-59 months old		
	BP>=125mm (Green)	115≤BP<125mm (Yellow)	BP<115mm (Red)		Boys	Girls	Total children screened
Ngouri	978	95	23	0	639	457	<b>1,096</b>
Baderi	1,016	122	19	0	534	623	<b>1,157</b>
Dibinintchi	463	26	1	0	276	214	<b>490</b>
Yalita	634	60	6	0	346	354	<b>700</b>
Djigdada	226	14	0	0	115	125	<b>240</b>
<b>Total</b>	<b>3,317</b>	<b>317</b>	<b>43</b>	<b>0</b>	<b>1,910</b>	<b>1,773</b>	<b>3,683</b>

### 3.2.2. Referencing and counter- referencing of severely malnourished children

The screening activities enabled to reach 3,683 children out of the 4,401 targeted ones, (please see the table above). Some 43 severely malnourished children were conveyed to the therapeutic nutrition centres for treatment at Ngouri hospital and 317 children were referred to the various outpatient treatment centres. The treatment was ensured by the Ministry of Public Health with support from *Alerte Santé* NGO. It is worth mentioning that malnutrition remains a major concern in the Lake region in general with an overall acute malnutrition rate of 18.1 percent (according to the August 2017 SMART survey) and Waye Department in particular, despite the Government and its partners efforts. Indeed, the results of the screening activities revealed global acute malnutrition rates that remain above the WHO emergency threshold of 15 percent

This nutritional situation in the Ngouri sub-prefecture is mainly due to recurrent food crises affecting the Lake region, as well as poor access to health services, inadequate infant and young child feeding practices and sub-optimal hygiene and sanitation conditions

### 3.2.3. Monitoring of malnourished children cases/Sensitization of caretakers on key health/nutrition practices/ Community discussions and awareness

A total of 27 awareness sessions on key health and nutrition practices were conducted for mothers and particularly for caretakers of malnourished children to ensure a proper care of the latter. During this awareness campaign, several topics were discussed by volunteers including: Food and personal hygiene – Sanitation - Exclusive breastfeeding - Infant and young child feeding - Good complementary feeding - Vaccination of children and prenatal consultations, among others.

### 3.2.4. Sensitization of caretakers on key health/nutrition practices

This activity was conducted as part of the awareness campaign. Please see 3.2.3.



*Cooking demonstration in a Nutrition Learning and Rehabilitation Centre (FARN)*

### 3.2.5. Promotion of exclusive breastfeeding and adequate supplementary feeding

A total of 27 group discussions were held in the Nutrition Learning and Rehabilitation Centres (FARN) in the 27 targeted villages from 20 to 28 December 2017, during which FARN groups were set and were only comprised of about twenty women with malnourished children or at risk of malnutrition. During these group discussions, the volunteers addressed topics related to the prevention of malnutrition followed by cooking demonstrations and preparation of enriched porridge based on local products (millet, maize, flour, groundnuts, wheat, curdled milk and sugar). A total of 540 mothers took part to these discussions.

### 3.2.6. Management of early screening by mothers (PBM approach)

As part of community capacity building, prevention and early detection of malnutrition among children, this practical training on early screening techniques for Mother Brachial Perimeter was organized at community level to enable mothers to measure themselves the arm circumferences of their children to check their nutritional status. A total of 1,658 mothers learned this screening technique and each of them received a MUAC. Additionally, 54 community members (on a basis of two persons per village), received an orientation on how to refer malnourished or sick children to health centres in their respective areas and to look for abandonment cases.

### 3.2.7. Community discussions and awareness

Please refer to point 3.2.3 above as this was conducted as part of awareness activities.

## Challenges

- There were no shops and therefore no shop keeper in the targeted villages. Besides, villages were 5 to 40 km far from Ngouri, the capital of the department. The negotiations with shopkeepers included that they transport foodstuffs to be distributed in the selected distribution sites.
- Feasibility analysis on support tools/ Mid-term evaluation of the intervention: No activity reported

## Lessons Learned

It was relevant to involve community management committees in the implementation of activities such as targeting, of beneficiaries, coordination. It did encourage community empowerment and prepared them for the recovery phase.

## Water, sanitation and hygiene

**Outcome 4: Reduction in risk of water-borne and water-related diseases in the targeted communities**

**Output 4.1: Continuous assessment and provision of WASH services to affected communities**

### Planned activities

- 4.1.1. Setting up a community surveillance system
- 4.1.2. Treatment of water in households
- 4.1.3. Hygiene promotion
- 4.1.4. Training of CBS, ECV and WASH volunteers

### Achievements

#### 4.1.1. Setting up a community surveillance system

It was important to strengthen community surveillance for early detection, investigation and management to mitigate the negative impact of diseases and outbreaks at community level. Thus, a community-based surveillance system was set up in the 27 villages and volunteers trained in CBS and ECV for epidemic prevention and response. They have the key role for sharing timely information for a quick response action. A good referral system was set up with communication to the appropriate health structure.

#### 4.1.2. Treatment of water in households

Water, Sanitation and Hygiene (WASH) was a key priority, knowing the close link between nutrition and WASH. To this end, WASH activities were implemented to ensure access to potable water to vulnerable people through the practice of water chlorination and environmental sanitation. Attention was stressed on hand washing with demonstrations of hand washing with soap and water. To encourage better hygiene practises, a total of 1,770 households received each a piece of 250g soap just to encourage hand washing promotion and personal hygiene. Another total of 700 households received each half a litre of bleach to enable them to bleach the water before use.

These actions were carried out alongside hygiene and health promotion activities with effective social mobilization and education at community level. A total of 7,927 including 898 men took part in the social mobilization activities. Regarding sanitation, it is worth deploring the lack of latrines in all targeted villages. During mass mobilization campaigns, the importance of latrine to reduce risks of diseases was discussed.

#### 4.1.3. Hygiene promotion

A total of 27 community discussion sessions were facilitated by volunteers on various topics such as prevention and management of malnutrition, exclusive breastfeeding, infant and young child feeding, food, body and clothing hygiene and child immunization. A total of 6,727 people, from the 27 villages including 5,839 women took part to these community discussions.

#### 4.1.4. Training of CBS, ECV and WASH volunteers

As part of building community capacity to respond to emergencies and reduce water-borne diseases, community volunteers received 5 days of training on Epidemic Control for Volunteers (ECV), Community-Based Surveillance (CBS) and WASH. This training, which took place from 14 to 18 November 2017, brought together 54 volunteers from the 27 targeted villages on a basis of two volunteers per village. This training was facilitated by the Food Security focal point, the WASH manager and the two supervisors.

### Challenges

None reported.

### Lessons Learned

None reported.

## D. THE BUDGET

The overall budget for this operation was CHF 233,017 of which CHF 231,225 were utilized. The balance of CHF 1,792 will be returned to the DREF Fund. The over expenditure related to “*Transport & Vehicles Costs*” (CHF 15,999) and “*Volunteers*” (CHF 3,130) budget lines is due to faulty planning as these were under budgeted. More details [here](#).

## Contact information

Reference documents



Click here for:

- [Emergency Plan of Action \(EPoA\)](#)
- [Operation Update no 1](#)

**For further information, specifically related to this operation please contact:**

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## How we work

All IFRC assistance seeks to adhere to the **Code of Conduct** for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGO's) in Disaster Relief and the **Humanitarian Charter and Minimum Standards in Humanitarian Response (Sphere)** in delivering assistance to the most vulnerable. The IFRC's vision is to inspire, **encourage, facilitate and promote at all times all forms of humanitarian activities** by National Societies, with a view to **preventing and alleviating human suffering**, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.

[www.ifrc.org](http://www.ifrc.org)  
Saving lives, changing minds.



The IFRC's work is guided by Strategy 2020 which puts forward three strategic aims:

1. Save lives, protect livelihoods, and strengthen recovery from disaster and crises.
2. Enable healthy and safe living.
3. Promote social inclusion and a culture of non-violence and peace

## Disaster Response Financial Report

## MDRTD015 - Chad - Food Crisis

Timeframe: 11 Aug 17 to 11 Jan 18

Appeal Launch Date: 11 Aug 17

Final Report

## Selected Parameters

Reporting Timeframe	2017/8-2018/2	Programme	MDRTD015
Budget Timeframe	2017/8-2018/1	Budget	APPROVED
Split by funding source	Y	Project	PTD025
Subsector:	*		

All figures are in Swiss Francs (CHF)

## I. Funding

	Raise humanitarian standards	Grow RC/RC services for vulnerable people	Strengthen RC/RC contribution to development	Heighten influence and support for RC/RC work	Joint working and accountability	TOTAL	Deferred Income
<b>A. Budget</b>		233,017				233,017	
<b>B. Opening Balance</b>							
<b>Income</b>							
<u>Other Income</u>							
<i>DREF Allocations</i>		233,017				233,017	
<b>C4. Other Income</b>		233,017				233,017	
<b>C. Total Income = SUM(C1..C4)</b>		233,017				233,017	
<b>D. Total Funding = B + C</b>		233,017				233,017	

\* Funding source data based on information provided by the donor

## II. Movement of Funds

	Raise humanitarian standards	Grow RC/RC services for vulnerable people	Strengthen RC/RC contribution to development	Heighten influence and support for RC/RC work	Joint working and accountability	TOTAL	Deferred Income
<b>B. Opening Balance</b>							
<b>C. Income</b>		233,017				233,017	
<b>E. Expenditure</b>		-231,225				-231,225	
<b>F. Closing Balance = (B + C + E)</b>		1,792				1,792	

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## III. Expenditure

Account Groups	Budget	Expenditure					TOTAL	Variance
		Raise humanitarian standards	Grow RC/RC services for vulnerable people	Strengthen RC/RC contribution to development	Heighten influence and support for RC/RC work	Joint working and accountability		
	A					B	A - B	
<b>BUDGET (C)</b>			<b>233,017</b>			<b>233,017</b>		
<b>Relief items, Construction, Supplies</b>								
Water, Sanitation & Hygiene	870		227			227	643	
Cash Disbursement	130,421		129,693			129,693	728	
<b>Total Relief items, Construction, Sup</b>	<b>131,291</b>		<b>129,921</b>			<b>129,921</b>	<b>1,370</b>	
<b>Logistics, Transport &amp; Storage</b>								
Transport & Vehicles Costs	3,062		19,060			19,060	-15,999	
Logistics Services	3,690						3,690	
<b>Total Logistics, Transport &amp; Storage</b>	<b>6,752</b>		<b>19,060</b>			<b>19,060</b>	<b>-12,309</b>	
<b>Personnel</b>								
International Staff	24,500		20,473			20,473	4,027	
National Staff	90						90	
National Society Staff	16,875		16,874			16,874	1	
Volunteers	75		3,205			3,205	-3,130	
<b>Total Personnel</b>	<b>41,540</b>		<b>40,552</b>			<b>40,552</b>	<b>988</b>	
<b>Workshops &amp; Training</b>								
Workshops & Training	20,840		18,789			18,789	2,051	
<b>Total Workshops &amp; Training</b>	<b>20,840</b>		<b>18,789</b>			<b>18,789</b>	<b>2,051</b>	
<b>General Expenditure</b>								
Travel	11,900		7,528			7,528	4,372	
Information & Public Relations	210		-418			-418	628	
Office Costs	2,940		551			551	2,389	
Communications	2,820		1,459			1,459	1,361	
Financial Charges	502		-364			-364	866	
Other General Expenses			33			33	-33	
<b>Total General Expenditure</b>	<b>18,372</b>		<b>8,790</b>			<b>8,790</b>	<b>9,582</b>	
<b>Indirect Costs</b>								
Programme & Services Support Recove	14,222		14,112			14,112	109	
<b>Total Indirect Costs</b>	<b>14,222</b>		<b>14,112</b>			<b>14,112</b>	<b>109</b>	
<b>TOTAL EXPENDITURE (D)</b>	<b>233,017</b>		<b>231,225</b>			<b>231,225</b>	<b>1,792</b>	
<b>VARIANCE (C - D)</b>			<b>1,792</b>			<b>1,792</b>		

**Disaster Response Financial Report****MDRTD015 - Chad - Food Crisis**

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Split by funding source	Y	Project	PTD025
Subsector:	*		

All figures are in Swiss Francs (CHF)

**IV. Breakdown by subsector**

Business Line / Sub-sector	Budget	Opening Balance	Income	Funding	Expenditure	Closing Balance	Deferred Income
<b>BL2 - Grow RC/RC services for vulnerable people</b>							
Disaster management	233,017		233,017	233,017	231,225	1,792	
Subtotal BL2	233,017		233,017	233,017	231,225	1,792	
<b>GRAND TOTAL</b>	<b>233,017</b>		<b>233,017</b>	<b>233,017</b>	<b>231,225</b>	<b>1,792</b>	