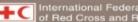
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Emergency Plan of Action (EPoA) Chad : Population Movement from Cameroon



International Federation of Red Cross and Red Crescent Societies

DREF Operation No. :	MDRTD020	Glide No.:	CE-2021-000201-TCD
Date of issue:	16 December 2021	Duration of the operation :	04 months
		Operation end date:	30 April 2022
Category allocated to the	disaster or crisis: Ye	llow	
DREF allocated : CHF 263	3,377		
Total number of people affected:	82,637	Total number of people to be assisted:	 10,000 people (2,000 households) 5,000 displaced persons (1,000 households) 5,000 from the host community (1,000 households)
Provinces affected / at risk :	Provinces of N'djamena and Chari-Baguirmi	Provinces/Regions targeted:	Urban commune of N'djamena and sub-prefecture of Koundoul (Chari- Baguirmi)

rolunteers, staff, and branches): Red Cross of (e (number) e: largest voluntary relief network in Chad, with more than 20,000 members, over 54,000 volunteers and over 100 paid technical staff at national level. For this operation, 100 volunteers will be deployed from the provincial branches of Chari Baguirmi and N'djamena central.

International Red Cross and Red Crescent Movement partners actively involved in the operation: International Federation of Red Cross and Red Crescent Societies (IFRC), International Committee of the Red Cross (ICRC) and Luxembourg Red Cross.

Other partner organizations actively involved in the operation: Government of Chad, OCHA, WFP, UNHCR, UNICEF, ADES, MSF Holland, the Alima/Alerte Santé Consortium.

A. Situation Analysis

Description of the disaster

Since 5 December 2021, intercommunity clashes broke out in the Far North region of Cameroon, displacing thousands of people internally and forcing thousands to flee to neighbouring Chad. On 8 December, fighting broke out in the Cameroonian town of Kousseri, a commercial centre with some 200,000 inhabitants. According to the National Commission for the Reception and Reintegration of Refugees and Returnees (CNARR) and the UNHCR, 82,637 Cameroonians had found refuge in Chadian territory by 12 December 2021. Of these, 45,637 are reported in the urban areas of N'Djamena while 37,000 in rural areas. Most of these people fled the town of Kousseri to N'djamena, the capital city of Chad, located a few kilometres across the Chari and Logone rivers, the natural boundaries between Chad and Cameroon. At least 22 people were killed and 30 seriously wounded in several days of continuous fighting in Cameroon with at



Partial view of women from the displaced Cameroonian communities

least 15,000 people internally displaced in other localities in the departments of Logone and Chari, Diamaré and Mayo-Danay in Cameroon.

Clashes broke out in the border village of Ouloumsa following a dispute between cattle rearers, fishermen and farmers over dwindling water resources. Violence spread to neighbouring villages. In total, 10 villages were burnt down. Eighty percent (80%) of the new arrivals are women – many of whom are pregnant – and children (ongoing registration of displaced persons under the aegis of UNHCR and CNARR). They found refuge in N'djamena and in villages along the Chadian side of the Logone River.

Security forces were dispatched to the Far-North region of Cameroon, and for the Chadian side, to the crisis zone, but the situation remains volatile. UNHCR was forced to suspend its operations in the affected areas.

Chadian authorities reaffirmed their hospitality towards the new arrivals. UNHCR and other UN agencies and humanitarian partners, including the Red Cross of Chad (RCC) and its Movement partners, hurriedly provided emergency assistance to the refugees. The wounded were admitted to two hospitals in N'Djamena.

The first outbreak of inter-communal violence occurred in August 2021. At that time, 45 people were killed and 23,000 forcibly displaced, of whom 8,500 have remained in Chad since then. These sporadic inter-community violence episodes are recurrent and the displaced generally return to their countries/villages once calm is restored. The difficulty this time is due to the high number of displaced (almost 100,000 in less than a week).

Climate crisis is exacerbating tensions in the Far-North region of Cameroon. According to UNHCR, the surface area of Lake Chad – of which the Logone River is the main tributary – shrunk by 95 % in recent decades. Fishermen and farmers dug vast trenches to hold back the remaining water in the river so that they can fish and farm, but these muddy trenches trap and sometimes kill the livestock of pastoralists, leading to tension and fighting

To urgently respond to this dramatic situation, RCC requested DREF funds – to the tune of CHF 263,377– from the International Federation to provide the affected populations with assistance that respects humanitarian standards and complements the response of other actors working in the region.

Summary of previous and current CRC interventions

Overview of the Host National Society's action

RCC has been active for several decades throughout the southern region of the country and specifically in the two provinces of Logone (Western and Eastern). From the late 1990s until 2005, the National Society (NS) was the main humanitarian partner of the Government of Chad in conducting one of the largest assistance operations for Central African refugees in the region. In February 2021, RCC received CHF 246,675 from IFRC through DREF allocation to assist 10,938 Sudanese refugees including 2,490 new arrivals and 8,448 old through shelter, health and WASH activities with the support of 73 volunteers. In June 2018, still through a DREF operation (MDRTD017), RCC supported 18,970 people, including 13,970 Central African refugees and 5,000 members of the host population. At the time, RCC deployed 11,000 trained volunteers, 8 Regional Disaster Response Team members (RDRTs) and 59



Chad Red Cross' President in consultation with the Minister of Health on the Farcha Milézi site

National Disaster Response Team members (NDRTs) specialised in WASH, and 275 volunteers mobilized in the departmental committee of Nya-Pendé and in the other premises of the two regional committees of Western and Eastern Logone.

With regard to the current crisis, RCC took several initiatives, including:

- The deployment of 12 trainers and 77 first-aid volunteers with rapid assessment tools, information collection and sensitization sheets on COVID-19 to conduct an evaluation mission in the affected localities of the Chari Baguirmi Province, under the joint supervision of the Chari Baguirmi provincial committee and the N'Djamena urban committee.
- The identification of spontaneous settlement sites and the collection of data by UNHCR and its partners, in close collaboration with village/cantons chiefs. RCC volunteers took advantage of this information-collection mission to start sensitisation activities on hygiene and sanitation among refugee communities and the people who host them, to limit the risks of water-borne disease epidemics and Corona virus contamination. These sensitization activities also aim to facilitate acceptance and peaceful cohabitation between refugees and local

populations. Since Saturday 11 December 2021, building on their rich experience and technical know-how, RCC volunteers carried out the first round of distribution to asylum seekers of the biscuits that were offered by the World Food Programme (WFP). In parallel to this distribution of biscuits, RCC volunteers also lend a helping hand to the preparation and distribution of hot meals in all identified sites. These meals are pre-financed by RCC, pending the allocation of financial resources from UNHCR.

RCC is continuing its activities in the Chari Baguirmi province, and more specifically in the areas affected by this new crisis, to:

- Further mobilise all its decentralised structures, keep them on high alert and encourage them to effectively attend the various crisis meetings held with local authorities, UNHCR and operational partners;
- o Carry out other first-aid, hygiene promotion and COVID-19 prevention activities;
- Continue monitoring the situation on the ground in all affected localities in the Chari Baguirmi Province and along the river border with Cameroon.

Lessons learned from the implementation of the last assistance operation for displaced persons

During the implementation of the last operation, the following difficulties were identified, and RCC is to build on these to develop mitigation measures to avoid the same shortcomings:

- Increased delays in the supply of construction materials due to the security context. Moreover, the qualified
 construction staff were not enough skilled in the east of the country, requiring training in shelter construction
 techniques before work could begin. To avoid the same problem, especially given the proximity of the
 Cameroonian border to the populations who are likely to return home as soon as the security situation calms
 down, RCC chose to implement mainly cash-based intervention.
- Water, sanitation and hygiene services were not easy to provide in a context marked by the COVID-19 epidemic. Much effort and resources were needed to enforce and maintain COVID measures at all times with standard regulations. With this lesson learned, RCC is making provisions for handwashing kits, strengthening hygiene promotion and barrier measures against COVID-19 from the very beginning of this response.

Overview of the Red Cross and Red Crescent Movement's action in the country

• The International Federation of Red Cross and Red Crescent Societies (IFRC) provides technical support from its office in Bangui, Central African Republic (CAR). An IFRC delegate – specialised in disaster management and with extensive IFRC expertise in managing population movements – is currently in Chad to help with the fight against the COVID-19 disease and the management of the 2020 floods that affected the city of N'Djamena. The IFRC delegate is currently involved in supporting the strategic and programmatic thinking of the NS on the response to population movements. The IFRC delegate assisted RCC in the preparation of information collection tools that enabled the drafting of the preliminary assessment report. He also provided technical support to post the report on the GO information system.

IFRC is providing technical expertise in developing, among others, a Mobile Money-type money transfer programme. IFRC will be able to support the NS by deploying a surge staff with experience in disaster management and cash. A crisis committee is set up within the NS and Movement coordination meetings are held by the NS to monitor the situation and coordinate the response activities of the Movement.

- ICRC, Luxembourg Red Cross (LRC) and French Red Cross (FRC) have representations in Chad. Present in the country since the end of the 1970s, ICRC brings to the NS all its expertise and can in the case in point contribute to the emergency response to deal with the management of population movements. ICRC is willing to support part of the deployment of volunteers and to provide technical expertise with regard to Protection and Communication. It is also able to support RCC, following needs assessment, with essential household items kits to improve the living conditions of vulnerable population. It can also provide technical expertise in the area of Economic Security and Restoration of Family Links (RFL) to these vulnerable people who would have difficulties in contacting their relatives, especially in Cameroon. Given that UN agencies reported that at least 70 unaccompanied children have family tracing and potentially reunification needs.
- Officially established in Chad in 2019, LRC is contributing its shelter expertise to guide the NS in strategic and operational thinking on the response to floods and population movements. LRC's technical expertise in the shelter sector will help develop indicator monitoring tools. It supports the NS with participation in the national shelter cluster to ensure sectoral coordination and collaboration. Also, this group will be able to work together to develop key messages for temporary shelter construction and considerations for ensuring the protection/security of displaced families.

The Movement pooled its efforts, resources and expertise to significantly contribute to the response plan put in place by the NS. From the outset of the current crisis, information was shared with Partner National Societies (PNSs) present in the country. The purpose of the information sharing was to seek their technical support. These PNSs expressed their interest and willingness to provide technical support to the RCC for an adequate response to the new influx of Central African refugees. During the implementation phase of this DREF, RCC is committed to seeking technical expertise from PNSs, particularly in the shelter sector and other sectors such as Water, Hygiene, Sanitation and Health.

Overview of other actors' actions in the country

For the time being, the following humanitarian agencies are supporting the government of Chad in providing assistance to displaced people both in N'Djamena and in affected rural areas:

Agency	Actions
Government of Chad	 Through the National Commission for the Reception and Reintegration of Refugees and Returnees (CNARR), the government ensures the coordination of all humanitarian actors Ensures the security of all actors' activities Conducted a joint rapid assessment with UNHCR at the beginning of the crisis The Ministry of Public Health and National Solidarity (MSPSN) provided non-food items to be distributed by RCC volunteers to 2,905 people or 581 households.
ОСНА	Coordination of humanitarian actions and advocacy for assistance to these new refugees that Chad is hosting
WFP	Facilitation by RCC volunteers of the distribution of energy biscuits provided by WFP, to 15,101 people (2,279 households).
UNHCR	UNHCR continues to provide funding and technical/advisory support to the team coordinating operational activities to assist refugees and displaced persons.
Agency for Economic and Social Development (ADES)	Support in the health and hot meals sector in affected rural and urban areas.
MSF Holland	Support in the Health sector in affected rural areas
Alima/Alerte Santé Consortium	Support in the Health sector in affected urban areas

Coordination

In terms of coordination with external partners, UNHCR is actively working to put in place a consolidated response strategy at the inter-agency coordination level with all its partners involved in the operation. This includes Chad Red Cross and other Red Cross Movement partners. This strategy will enable the planning of appropriate targeted actions in vital sectors. In fact, a multidisciplinary team composed of UNHCR, WFP, WHO, CNARR, CRC, HIAS, Alerte Santé/Alima consortium, MSF, and many other humanitarian actors, carried out several missions to the affected areas in the Chari Baguirmi province, along the border with Cameroon to ensure respect for humanitarian principles, protection, and to respond to the most urgent needs of refugees and displaced persons in terms of protection and access to basic life-saving humanitarian services.

The proposed coordination mechanism for the response management is supposed to focus on three levels:

- **Cross-border coordination**: a communication mechanism between RCC and Cameroon Red Cross Society (CRCS) which already existed informally, but which needed to be strengthened to improve information sharing;
- Field coordination on Chadian territory: Organisation of daily briefings and weekly meetings by UNHCR in which RCC actively takes part in Ndjamena.
- **Coordination at central level:** Provisions are also made to organize monthly coordination meetings under the leadership of the Chadian government authorities, with the participation of UN agencies and all humanitarian partners.

The Ministry of Public Health and National Solidarity, the Ministry of Economy, Planning and International Cooperation, and the Ministry of Women and Early Childhood, with the support of ONASA (National Office of Food Security), UN agencies, and other actors of the international community will fully participate in the implementation of this operation.

Needs analysis, selection of beneficiaries, scenario planning and risk assessment

From the very beginning of the crisis, RCC's national headquarters activated its protection monitoring mechanism, in close collaboration with national and local authorities. As an auxiliary to public authorities and a member of the national crisis management committee, RCC is an integral part of the government's disaster response mechanism. As such, it organized a field assessment mission on 10 and 11 December 2021. The mission reported that no formal registration has yet been made of the new influx of Cameroonian refugees. However, it reported estimated data from the UN

Refugee Agency, which shows 82,637 displaced Cameroonians, including 45,637 in the urban areas of N'Djamena and 37,000 in rural areas.

The table below summarises the information from the reports of two other multi-agency missions, one led by the Governor of Chari-Baguirmi, with the participation of the Prefect of Mandalia, the Sub-Prefect, the Cameroon Embassy, CNARR, UNHCR, WFP, OHCHR, UNFPA, the Red Cross, ADES, IRC, and the Medical District. The other led by representatives of MSF, UNHCR, the municipal authorities of the city of N'Djamena and IOM visited several reception sites within the city, including the Farcha Milezi riverbank.

SUMMARY TABLE ON THE NUMBER OF DISPLACED PERSONS AS OF 12 DECEMBER (double click on image to see pdf

file)

		Statisti	AFFLUX DE REFU			TCHAD Date: 12/12/202 Mise à jour (1)
	S/N	Nom de Site	No. Estimatif de la Pop	Source de donnees	Groupe Ethniques	Date d'Indetificat
	1	Farcha Malezi	10,701	CRT	Arabe et Sara	12/8/202
	2	Orphelinat	619	Chef de village	Arabe	12/8/202
	3	Siaba	495	Chef de village	Mousgoum, Kotoko	12/10/202
Farcha	4	Fardje	721	Chef de village	Mousgoum et Kotoko	12/10/202
1 2	5	Ort Karkandieri	604	Chef de village	Arabe	12/11/202
		Cog Ville	525	Chef de village	Arabe	12/11/202
		Bourmaneye	410	Chef de village	Arabe	12/11/202
	-	Sub-Total	14,075	cher de thiuge		12/11/202
		546-1664	14,075			
	S/N	Nom de Site	No. Estimatif de la Pop	Source de donnees	Groupe Ethniques	Date d'Indetificat
	_	Mbayam	1,872	Chef de village	Mousgoum, Massa	12/8/202
		Karwaye	5,400	Chef de village	Mousgoum, Massa	12/8/202
		Amnabak	3,354	Chef de village	Mousgoum, Massa	12/8/202
		Domantala	2,038	Chef de village	Mousgoum, Massa	12/8/202
		Guelmbag	3,177	Chef de village	Mousgoum, Massa Mousgoum, Massa	12/8/202
	13	Kaliwa	1,004	Chef de village	Mousgoum, Massa	12/8/202
l ž	14	Carré 7	828	Chef de Carre	Mousgoum, Massa	12/10/202
		Carré 8	4,305	Chef de Carre	Mousgoum, Massa	12/10/202
		Carré 9	1,495	Chef de village	Mousgoum, Massa	12/10/202
		Nguel (Pont)	6,763	Délégué du quartie		12/11/202
	18	Ndouh	1,326	Chef de village	Mousgoum, Massa	12/11/202
		Sub-Total	31,562			
	Test	al Urbain	45,637			
2		Nom de Site	No. Estimatif de la Pop	Source de donnees	Groupe Ethniques	Date d'Indetificat
		Oundouma	10,000	Chef de village	Mousgoum, Massa	12/8/202
	20	Ngama Kotoko	5,000	Chef de village	Mousgoum, Massa	12/8/202
		Bourgouma 1	11,000	Chef de village	Mousgoum, Massa	12/8/202
		Bourgouma 2		Chef de village	Mousgoum, Massa	12/8/202
		Ngama Sara	-	Chef de village	Mousgoum, Massa	12/8/202
		Sama Cale		Chef de village	Mousgoum, Massa	12/8/202
		Thidam Borno		Chef de village	Mousgoum, Massa	12/8/202
		Thidam Gangang	-	Chef de village	Mousgoum, Massa	12/8/202
		Liberia	2,000	Chef de village	Mousgoum, Massa	12/8/202
		Malafana		Délégué du quartie		12/8/202
		Djazira	4,000	Chef de village		12/8/202
	29	Sub-Total	37,000	cher de village	Mousgoum, Massa	12/8/202
			51,000			

As detailed in the above table, these populations fleeing violence in Cameroon are mostly made up of vulnerable children and women living under trees in the villages along the Chad-Cameroon border. If nothing is done in this volatile context, the humanitarian situation is likely to become even more complex in this region of Chad. The movement of Cameroonian populations fleeing into Chad could take on alarming proportions, with serious consequences for the vulnerability of the displaced persons and the host local Chadian communities. The greatest risk for these populations is access to basic services such as water and sanitation, food, non-food items, shelter, health care and education for children, etc.

Shelter: The need for emergency shelter is important and urgent as the majority of people identified in the spontaneous settlement sites are living without shelter and have only the foliage of the trees under which they have settled as cover.

Those who are with their wife, children and elderly people are the most vulnerable. They are left to the vagaries of the weather, in dehumanising conditions and total destitution. To this end, RCC volunteers will be deployed to sensitize beneficiaries who wish to be trained on shelter construction techniques (unconditional assistance).

Food and non-food relief: When fleeing the violence in their home localities, they left everything behind and are currently in urgent need of food and non-food relief (hygiene kits and kitchen sets): cooking utensils, water storage containers, mats, blankets, mosquito nets, clothes, soap, tarpaulins, etc. For now, appropriate information is not available on malnutrition cases. However, WFP anticipated for some days by distributing fortified biscuits to the affected populations.

Protection: As mentioned above, the only survival mechanism for these people who have been pouring in from Cameroon for several weeks is to settle spontaneously in the Chadian villages along the riverbank. The luckiest ones take refuge in local population households. They are exposed to all risks of protection and their most basic human rights are violated. The groups most at risk are people with disabilities, the elderly, children, female heads of households and large households. Some of them have suffered multiple assaults, including gender-based violence (GBV), which call for urgent attention in accordance with the standard operational protocol required in such circumstances.



A CRC assessment team hard at work on the Karkandjéri site

Water, hygiene and sanitation: Given the difficulties in accessing clean water and adequate hygiene, the populations concerned are exposed to various water-borne diseases. The assessment report of the RCC monitoring teams mentions settlement sites without sources of drinking water and without hygiene and sanitation infrastructures; in other words, a generally unhealthy environment that is highly conducive to the spread of water-borne diseases with epidemic potential, such as diarrhoea and cholera, talk less of the Corona virus disease. It is therefore necessary to act as quickly as possible through sensitization, dissemination of prevention messages, but also and above all, improvement of the living conditions of these populations by installing sources of drinking water, building latrines, digging garbage dumping pits, etc.

Health: The affected populations are living without shelter and are exposed to mosquitoes, the vectors of malaria and Dengue fever, and are at risk of onchocerciasis and other pathogens responsible for respiratory diseases. Some of the affected populations live in spontaneous settlements or with local community members, sometimes in overcrowded houses. This exposes them to several types of protection risks, including viral diseases such as cholera and COVID-19. The dissemination of sensitization messages on public health and on the prevention of COVID-19 are needed in all neighbourhoods where these displaced people are hosted. Moreover, families need basic items such as masks, disinfectants and cleaning products to enable them to protect themselves and to help them fight against the Corona virus disease. For now, several health actors, including MSF France, MSF Holland, the Alertes Santé/Alima Consortium are active on the ground providing emergency care, with the possibility of setting up clinics in the coming days.

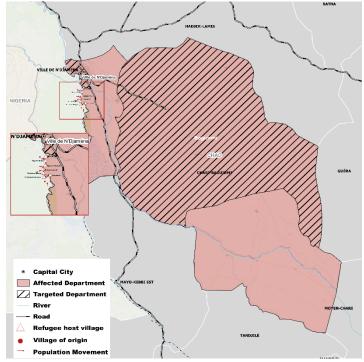
Functionality and accessibility of markets: As is evident, markets in the city are functional and most basic necessities are available in sufficient quantity and acceptable quality. Suppliers can provide additional supplies according to market needs. All the targeted beneficiaries will be able to access them easily.

Targeting

The DREF aims to assist 10,000 people (2,000 households):

- 5,000 people to Cameroonian populations (1,000 households) who are living without shelter and without any protection in spontaneous settlement sites.
- 5,000 people (1,000 households) from the host communities are fleeing into the urban commune of N'Djamena and the sub-prefecture of Koundoul (Chari-Baguirmi province) in Chad.

Map of affected and targeted areas ©IFRC



The geographical areas targeted are those that have received the most important number of displaced populations, i.e., the most vulnerable 1,000 households (5,000 people) living without shelter and without any protection in spontaneous settlement sites in Farcha Malezi (N'Djamena) and Oundouma (Koundoul in Chari-Baguirmi province). As of 12 December, the two sites had already cumulatively received 20,701 people and almost all of the displaced are still sleeping under the stars.

The implementation strategy will be essentially a participatory approach through community engagement and the involvement of administrative authorities in all processes, including assessments, targeting and implementation of activities. The RCC approach will be transparent. Information will be shared widely with the community to ensure good communication on the selection criteria and associated rationale. The NS will see to it that the operation addresses the immediate needs of the most vulnerable people by involving direct and indirect beneficiaries and non-beneficiaries.

Vulnerability criteria will include :

- the most vulnerable affected households which left everything behind (houses, material goods, livelihoods, income-generating activities, etc.) in Cameroon and are now forced to live in precarious conditions on refuge sites;
- People or households with special needs who are homeless and without means of subsistence;
- Women heads of household, widows, elderly, disabled, chronically ill, pregnant or breastfeeding women, children under 5 years old, separated children, etc.;

Scenario planning

For the moment, the proposed operation targets the localities that host displaced households identified in the Chari Baguirmi Province. Depending on the evolution of the situation and taking into account accessibility in the region, the operation could be extended to other localities, or even to neighbouring provinces. A thorough assessment of the situation will be conducted for this purpose.

Scenario	Possible dynamics	Intervention and impacts of CRC's role
Best case scenario:	IDPs who remain in Chad integrate host communities with cash support received WASH situation improves thanks to awareness raising	RCC is carrying out activities as planned and based on the results of the in-depth assessment. It updates the current operation to include the results of the in-depth assessment. It continues to monitor the situation and strengthens its role as pioneer NS in disaster preparedness and response. It acts in accordance with its status as an active member in the various management structures of the new refugee crisis from Cameroon.
Likely scenario:	The number of displaced people is increasing due to conflict, contributing to the deterioration of an already precarious humanitarian situation Shelter needs are increasing, and the WASH situation is deteriorating The health situation is deteriorating with a risk of a cholera epidemic, as the disease is recurrent in Chad and Cameroon.	RCC limits itself to planned activities and conducts the in-depth assessment only in accessible localities. An extension is requested to increase the number of households in accessible areas and to extend the targeting to certain vulnerable households within the host population. However, RCC will take all necessary measures to continue monitoring the situation.
Worst case scenario:	Violence spreads beyond Logone et Chari and ignites border areas in Chad, creating IDPs in Chad. DREF funds are obtained, but the security situation deteriorates due to conflict, armed violence, ethnic violence, increasing the number of Cameroonian IDPs, not facilitating access to the intervention area. Shelter needs are increasing, and the WASH situation is deteriorating The health situation is deteriorating with a risk of a cholera epidemic, as the disease is recurrent in Chad and Cameroon.	In such a situation of insecurity and inaccessibility of the operational area, RCC will not be able to implement the strengthens as initially envisaged. Indeed, activities will be limited to monitoring and coordination in the host regions while the NS continues to carry out complementary monitoring to develop a longer-term response and recovery strategy, including the possible launch of an emergency appeal to support longer-term activities.

Risk Assessment

the most important remaining risks are linked to a possible deterioration of the security situation in the run-up to the political dialogue in Chad in the coming months (date to be confirmed); and to the COVID-19 crisis, which could lead the Chadian authorities to impose new restrictive measures in the country, including in the localities where these asylum seekers are hosted (in the Chari Baguirmi Province). Should the political dialogue in Chad take place in an unstable political and security context, several provinces of the country, including Chari Baguirmi, may be disrupted by major demonstrations by workers, political parties and other sections of Chadian civil society, with the risk of a further deterioration in security and, consequently, an increase in the vulnerability of asylum-seekers, who are already suffering from the effects of the current crisis in Cameroon.

In the current context, it is not impossible that Chadian opposition protests will continue during and after the political dialogue and the transition period at the highest level of the State. From the foregoing and for the sake of efficiency, the humanitarian intervention of RCC will include sensitisation activities on the culture of peace and non-violence through different channels of communication, using the Community engagement and accountability (CEA) approach, and taking into account the principles of gender, diversity and inclusion.

Safer access training/capacity-building sessions supported by IFRC and ICRC will aim to promote the observance of certain safety rules by volunteers during their deployments on the ground.

To address the risks of violence related to the political dialogue, the transition period and the spread of COVID-19, particular emphasis will be placed on the role of the IFRC and the NS to enable them to act fully as reliable and effective humanitarian advocates. Thus, the risks of fraud and corruption associated with the operation of this DREF, will be mitigated by building the capacity of all actively involved volunteers and staff with regard to the code of conduct, governance, management and quality control of goods and services provided to beneficiaries.

B. Operation Strategy

Overall operational objective

The objective of this operation is to conduct an in-depth multi-sectoral needs assessment of people fleeing violence in Cameroon and to provide unconditional cash assistance to support basic needs and emergency health and WASH services to 1,000 households. This includes 5,000 Cameroonian IDPs (1,000 households) who have settled in the sites of Farcha Malezi (N'Djamena) and Oundouma (Koundoul, Chari-Baguirmi province) and 5,000 people (1,000 households) from host communities.

Proposed strategy

This emergency plan of action will be implemented on the asylum-seeker reception sites, which hosted the initial assessment mission by RCC assessment teams. To begin with, the operation will take place over a period of four (04) months and will aim to assist all the 5,000 people identified by this DREF.

To achieve this, the following activities will be carried out:

1. In-depth multi-sectoral needs assessment (Target: N'Djamena and Chari-Baguirmi provinces)

To better inform the data collected during the first two rapid assessments, a new detailed assessment based on the IFRC engagement mechanism and taking into account market accessibility and availability of WASH infrastructure will be conducted over 5 days, on the various relocation sites.

An operational update will be issued in 2-3 weeks to inform the Movement about the results of the evaluation and update the operational strategy.

The DREF operation will take into account an in-depth joint RCC, IFRC and ICRC assessment of needs and operational capacities to better understand the situation on the ground. These complementary assessments will be carried out not only in the same border areas, but also in other areas that could not be covered in the initial assessment and some Chadian localities in the south that are also affected by the movements of populations fleeing the crisis in Cameroon. Those localities in the south, which are deemed safer and are already hosting refugees, will be the main target of the assessment. The main focus will be on the needs and response strategy for emergency shelter and assistance to these vulnerable populations and highlight the possibilities for development through cross-border activities with the CRCS. In the event that the majority of Cameroonian IDPs return to their country, there is a strong possibility that the remaining IDPs will be resettled about 50km from the border. The assessment will also clarify this and update the strategy to address the needs of the remaining households.

The evaluation team at IFRC level will include the Migration Delegate, the PMER Manager who will cumulatively carry out communication and visibility duties on behalf of IFRC.

At RCC level, the team will include the Secretary General, the National Programme Coordinator, the Director of Disaster Management, the Logistics Officer, the Communication Officer and the Cash Officer. A total of 22 volunteers will support this exercise.

At the end of the needs assessment, the data collected will allow for joint and concerted planning of activities, in collaboration with other humanitarian actors. The aim is to better contribute to the authorities' plan of action to improve the living conditions of the affected populations.

2. Livelihoods and basic needs (Target: 5,000 people or 1,000 households)

To provide flexible assistance to the targeted households, RCC intends to support them through unconditional cash transfer programme to help them purchase essential household items, or to meet any other need, depending on the specificities of each family. Since they are Cameroonians, most of them have no official documentation in Chad. However, thanks to the free trade agreements between Cameroon and Chad and the use of the same currency by both countries (CFA Franc - XAF), Cameroonian IDPs will be identified with their national identity cards. During the preliminary registration, the majority indicated that they do have National identification cards (NICs). RCC already has a contract with identified service providers (Airtel and Moov Africa), with whom it will be able to directly support this operation to ensure safe and secure cash transfers to beneficiaries - RCC will activate one of these contracts for the implementation of this intervention.

Under this operation, the transfer value is XAF 72,000 per household, calculated based on the estimated costs of an essential household items kit, kitchen kit and WASH kit, if households have chosen to prioritise them. In any case, targeting will prioritise households whose livelihoods were severely affected or destroyed due to precipitous flight from their places of origin. Particular attention will also be paid to the collateral impact of the COVID-19 pandemic on their livelihoods, namely their ability to meet their basic needs (including shelter). The activities implemented in this section will seek to meet the standards of Cash Working Group - Chad, of which RCC is a member.

Description	Quantity per household	Amount per household
WASH kit (1 per household) (buckets, brooms, jerrycans, family hygiene kits, soap, etc.)	1	25,000
Kitchen Kit	1	15,000
Essential shelter/household equipment kit (blankets, mats, mosquito nets, etc.)	1	30,000
Estimated cost per household		70,000
Transfer charges		2,000
Transfer value per household		72,000

Clear sensitization messages will be delivered by 28 RCC volunteers (14 per target site), to reach the beneficiaries on the need to use the allocated funds to effectively cover shelter and MVA needs. Ten volunteers and one supervisor per site will be tasked to carry out this activity.

The volunteers will monitor the markets and sensitize traders to avoid unwarranted inflation due to the funds that will be injected into the market through the cash allocations.

A post-distribution monitoring (PDM) will be carried out to measure the impact of this support on the targeted families through a permanent contact with the RCC Department committee in Kousseri.

3. Health (Target: 10,000 people or 2,000 households)

RCC will promote good health practices among people fleeing violence in Cameroon and among host populations to reduce the risk of spreading water-related diseases and other vectors such as malaria and diarrhoeal diseases. Emphasis will be laid on the sensitization of essential family practices to support targeted households in improving their health and promoting a healthy environment by adopting appropriate behavioural practices. RCC emergency response team members that were previously trained in community-based surveillance (CBS) techniques will be retrained and further briefed for the operation in this area.

One hundred (100) volunteers will be deployed 02 days/week for 8 weeks, for a total of 16 days of deployment for the duration of the operation while the 10 supervisors will be deployed 03 days/week for 8 weeks, for a total of 24 days of deployment for the duration of the operation. Their roles will be to encourage and sensitize families on topics such as:

- Community health and hygiene;
- Prevention of water-borne and vector-borne diseases;
- Sensitization via the RCC hand washing kit;
- Refresher/briefing of RCC volunteers on CBFA, PFA, MCH, RH (with financial contribution from RCC).

The above activity will be carried out to complement the efforts of the Government health services and will be carried out in conjunction with hygiene promotion. The aim is to make sure that the most vulnerable affected communities are aware of and use these services.

This initiative will be supported by the following activities, which will be implemented according to Sphere standards, and by the Ministry of Health of Chad and WHO with regard to COVID-19 containment measures:

- Orientation of volunteers and provision of first-aid services as required; and
- Procurement of 20 first-aid kits (10 per site) to support assistance to IDPs.

4. Water, Sanitation and Hygiene (WASH) (Target: 10,000 people or 2,000 households)

In the villages/sites hosting the displaced people, RCC aims to provide the 2,000 targeted households with access to quality services and easy access to safe drinking water and sanitation, in line with current standards. Existing water sources (mostly boreholes) will be identified during the detailed needs' assessment and treated with bleach. These boreholes belong to members of the host community and are not intended to supply water to the current population. Also, the excessive use made of them with the arrival of the displaced requires adequate and regular treatment to avoid water-borne diseases. To this end, the following activities are planned:

- Training of 100 volunteers on sensitization and water purification techniques, hygiene and health promotion.
- Training of 60 community leaders (15 leaders of the displaced populations and 15 heads of districts of the host population, 05 religious leaders, 05 traditional leaders, 10 women representatives and 10 youth representatives, etc.) who will act as relays and support the implementation of activities, and use their influence to contribute to positive changes and consolidate peace between the displaced communities and their hosts.
- Distribution of bottles of bleach for water treatment to 1,000 households in the host community receiving IDPs for treatment of their wells and boreholes (one litre per month x 1,000 households x 03 months). The water from boreholes is drinkable. Host and displaced communities will receive demonstrations by volunteers on water treatment and conservation techniques.
- Construction of 10 emergency community latrines in both sites (10 per site), to enable displaced people and host communities to have access to latrines during the emergency management phase of this crisis. In case of relocation of the displaced, these latrines will continue to be used by the host community who, in solidarity, shared their meagre resources with the IDPs.
- Purchase and distribution of 100 handwashing kits and soap to be positioned in the two targeted sites to serve the displaced persons and the various host communities;
- Production of IEC materials (a total of 2,000 leaflets and 1,000 posters will be printed) in French, Arabic and Fulfulde (languages spoken by the majority of IDPs). Some 20 image boxes will also be produced to support the training of volunteers and facilitate sensitization sessions.
- The purchase and distribution of dignity kits is being carried out by RCC to ensure that the kits are purchased effectively and are available in households to serve the needs of 960 women and girls at childbearing age (24% of 4,000 women) for 03 months. The dignity kits include sanitary pads, underwear, a comb, bathing soap, etc. for women's toilet and hygiene.
- Establishment of four sanitation committees in each of the target IDP reception sites. To help them function, the committees will be provided with two sanitation kits (wheelbarrows, shovels, brooms, rakes and gloves, etc.) each to accompany the community during the sensitisation sessions conducted by RCC volunteers. In total, 04 committees will be set up.
- Health and hygiene sensitization sessions, with a focus on the Covid-19 pandemic and containment measures. Thus, 100 volunteers will be deployed 02 days/week for 16 weeks, for a total of 32 days of deployment for the duration of the operation while the 10 supervisors will be deployed 03 days/week for 16 weeks, for a total of 48 days of deployment for the duration of the operation.
- Post distribution monitoring (PDM) of dignity kits, for the implementation of hand washing mechanisms and for all WASH activities will be conducted.

Protection, Gender and Inclusion

The operation will be managed **in accordance with the principles of protection monitoring** so as to protect beneficiary communities from violence (of all sorts) and **in strict respect of human rights and dignity**. This operation will be conducted by integrating the CEA approach. For example, community leaders (from populations fleeing violence in Cameroon) will be trained (as **community relays**) on the principles of "protection monitoring and peaceful cohabitation"; and on water resource management. In this way, they will better assist RCC in relaying sensitization and protection messages within the beneficiary communities. This measure aims to promote the participation / lessons

learned of target communities on the actions implemented. To this end, emphasis will be laid on cultural specificities and community structures, gender and diversity mainstreaming and the promotion of RCC's actions and missions with the beneficiary communities. The complementary in-depth assessment that was suggested at the beginning of this operation will focus on the needs of the communities in terms of information and identification of the various communication channels of the intervention regions and the preferences of the communities, to better involve them throughout the implementation of the operation.

Even if the Gender / Diversity / Inclusion aspect could not be respected during the initial evaluation, particular importance will be given to it during the detailed evaluation and during the assistance activities.

Restoration of family links (RFL)

RFL needs will be covered by RCC/FICR/ICRC to ensure that the persons concerned have access to neutral and impartial information on the situation in Cameroon (in their localities of origin); to facilitate their decision whether or not to return.

Community Engagement and Accountability (CEA)

The proposed strategy for the implementation of the intervention will include a participatory approach through community engagement and the involvement of administrative authorities throughout the process, including assessments, targeting and distribution activities. RCC will see to it that the operation addresses the immediate needs of the most vulnerable populations by involving beneficiary and non-beneficiary committees. These committees will ensure the accountability of the operation by addressing any complaints from beneficiaries and non-beneficiaries. In addition, the results of the needs assessment will help determine other appropriate channels of communication for CEA and for dealing with sensitive community reactions.

Exit strategy

The NS continues to discuss with the Chadian government the possibility of mixed and sustainable solutions for these populations in the host areas (to avoid them becoming eternally assisted); and to be able to offer them possibilities to return to their country/regions of origin as soon as peace and stability are restored. Part of the (short-term) exit strategy will consist in ensuring that these populations have access to the right (neutral, and impartial) information to make the right decisions for possible return; and also, to ensure that people's rights are well respected, including the rights of asylum seekers.

Based on the findings of the in-depth and detailed needs assessment, the plan of action will be revised to include a more comprehensive response to the needs identified for both asylum seekers and host populations. Meanwhile, IFRC and RCC will continue to work hand in hand with the other Movement partners in country to develop an appropriate development plan and to ensure greater support for the RCC's work with people fleeing violence in Cameroon.

Operational support services

Human resources

A total of 100 volunteers and ten (10) supervisors (NDRT) will be involved in this operation. Training/refresher sessions on health issues, hygiene promotion, water treatment will be organized to further build their capacities and thus enable them to effectively carry out activities in the various areas of the operation. RCC will ensure that the visibility of the actions undertaken is improved as well as safety by acquiring visibility equipment (bibs) and personal protective equipment (PPE) for its volunteers.

The 100 volunteers will be deployed 02 days a week for 16 weeks, for a total of 32 days of deployment for the duration of the operation while the 10 supervisors will be deployed 03 days a week for 16 weeks, for a total of 48 days of deployment for the duration of the operation. The additional days allocated to the supervisors will allow them to ensure the monitoring of implemented activities, the compilation of data and the synthesis of activity reports.

IFRC will support the RCC in the implementation through the deployment of a Surge with experience in relief in a population movement situation. IFRC Surge staff will be deployed for three months, which could be extended if necessary. Moreover, to ensure proper financial monitoring throughout the operation, a member of the IFRC/Cluster finance team in Bangui will be designated to support the operation remotely (through teleworking).

The details of the team proposed by RCC for the operation are as follows:

- 100 volunteers to be trained
- 10 supervisors
- The RCC /DM Coordinator
- 1 RCC / PMER Officer
- 1 driver
- 1 LOG Officer
- 1 Cash Focal Point

- 1 FA Officer
- 1 Communication Officer
- 1 WASH Officer

Planning, Monitoring, Evaluation and Reporting (PMER)

In-depth evaluation and monitoring will also form an integral part of the operation and will help ensure that it is consistent with the changing situation on the ground. In collaboration with the International Federation's disaster management department and RCC's programme coordination, the PMER Officer will monitor, evaluate and report on activities.

- A monitoring/evaluation plan will be developed and implemented to ensure the regular monitoring of activities;
- Regular reports will be prepared and shared;
- A training session on the basic principles of monitoring/evaluation and on community engagement will be carried out for the volunteers and coordinated by the PMER Manager;
- The implementation of the DREF will require close collaboration with volunteers and government officials, and other actors in the humanitarian community in the same areas of intervention.

Two joint RCC/FICR monitoring/evaluation missions will be conducted by the WASH, CASH and First-Aid coordinators who will monitor activities in their respective areas.

The operation will be coordinated by the RCC Disaster Management officer, who will be the technical referent for the Surge deployed by the Federation. He will carry out three monitoring missions per month for three months in the Chari-Baguirmi province, while his trips to the N'Djamena province will be occasional, as he is located in the city where RCC has its headquarters.

At the end of the operation, a workshop on the capitalisation of good practices and lessons learned will also be organized.

Communication

The IFRC's PMER/Communication Officer will work in collaboration with the RCC communication units to produce a set of press articles, key messages, newsletters, audio and audio-visual spots to ensure visibility and public information in traditional media organs and on social media.

Logistics and supply chain

The NS will carry out its procurement in accordance with the Administrative and Financial Procedures Manual, while respecting DREF rules and regulations. All local procurement will ideally be carried out in N'Djamena, with the close support and monitoring of the deployed IFRC delegate. Local procurement will be carried out in compliance with standard IFRC procurement procedures. Logistical responsibilities will include procuring the most urgent and appropriate relief items and ensuring their timely, transparent and cost-effective delivery and equitable distribution to those in need. Procurement plans will involve procuring household items.

- **Procurement**: Local procurement will be carried out in accordance with IFRC standard procurement procedures. Current procurement plans will include procurement of health items, NFI, Wash (including COVID-19 kits).
- **Warehousing**: RCC has appropriate warehouses for the storage of equipment and materials purchased in N'Djamena and in some local committees. However, the distribution strategy that will be adopted will not require local warehouses. Needs will be transported and distributed there and then to the beneficiaries to limit losses and storage and guarding costs. As storage needs are limited, no additional warehouse space will be required.
- **Fleet**: Local rental of trucks will be required to transport equipment, kits and other relief materials to the area of operation.
- **IFRC's experience and procedures**: together with those of the logistics cluster, in procuring items/materials, delivering them on the ground, storing them and distributing them will be helpful in the management of all logistics and transport activities.

IFRC and RCC finance services will provide support for the various financial operations (monitoring and compliance with budget lines) and reporting according to the deadlines set in the administrative and financial procedures manuals.

IFRC and RCC's IT/Telecom departments will provide, each in its sphere of competence, material means, equipment and the necessary training/guidance to facilitate the work of the staff involved in the operation.

These support services will cover the operation, which will be organized by the General Secretariat and the National Programme Coordination in collaboration with the IFRC country delegate in charge of disaster management and the PMER/Communication and Visibility Officer.

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Security

Despite a significant improvement in the security situation over the past decade, Chad continues to experience occasional violence. Petty crime and theft remain the main threats in urban centres. Road banditry still poses a risk to travellers in the rural areas of the country, particularly in the centre and east. Organized criminal networks are also present in the northern border provinces with Niger, Libya and Nigeria, where they engage in trafficking and collaborate with transnational extremist groups. The northern, eastern and southern border provinces, including the lagoon bank bordering Cameroon, remain vulnerable to frequent community violence. Cross-border incursions by rebel and armed opposition groups continue to pose a latent threat in the northern, eastern and southern border provinces. The security situation in the west, particularly in Lake Chad province, is unstable due to the presence of the Islamic

State in West Africa Province (ISWAP), a splinter faction of the Islamist group Boko Haram. Since a series of suicide bombings in Ndjamena in 2015, ISWAP/Boko Haram attacks have been confined to the Lake Chad region. Despite the Operation "Wrath of Boma" and the Chadian government's increased efforts to secure its border with Sudan (to the east), Nigeria, Cameroon, Niger (to the north) and the Central African Republic (CAR) to the south, the persistent instability in Cameroon, which is increasingly spilling over into Chadian territory, may pose indirect risks for Chadian populations living in this part of the country.

Areas at risk of insecurity

Petty crime is the main threat in urban centres, with cases of armed robbery sometimes being reported. Highwaymen operate in rural areas across the country. Rural areas in the Eastern and Southern provinces are also affected by intercommunity clashes (especially between sedentary farmers and transhumant cattle rearers). Extremism remains a persistent threat in the capital city Ndjamena and in the Lake Chad province. The Borkou, Ennedi East, Ennedi West and Tibesti provinces.

Border trafficking with Libya, Niger and Sudan, rebel incursions near the Libyan border, and sporadic army operations in this area present incidental risks. These risks are increased by the presence of landmines in these provinces. Furthermore, inter-communal unrest and clashes between rival illegal miners and security forces occur regularly in these provinces, contributing to a deteriorating security environment.

Areas within 30 km of the borders with Sudan and the Central African Republic (CAR)

all emergencies in real time and in compliance with IFRC/RCC procedures.

While the Joint Border Force between Sudan and Chad has partially stabilised the east since 2010, rebel incursions remain possible. Incursions remain a concern near the CAR border due to the continuing instability in that country, which creates an unstable security environment. Abductions by militia and criminal groups were reported in the rural areas of border provinces. Also, refugee crises in these provinces pose further risks. The borders with Sudan and CAR are likely to be closed at any time due to insecurity.

Areas of the Lake Chad province west of Bol

The security situation remains unstable in the Lake Province and areas within 30 km of the border with Nigeria, due to risks posed by the Nigerian Islamist group called Islamic State in West Africa, a splinter faction of Boko Haram. The topography of the region remains vulnerable to Boko Haram attacks and a state of emergency is in place since 2015. Chad's participation in the regional military fight against Boko Haram and close monitoring of cross-border and domestic Islamist activities further built the capacity of the security forces to deal with the threat. Attacks beyond the shores of Lake Chad are unlikely.

To reduce the risk for RCC staff becoming victims of crime, violence or road hazards, active risk mitigation measures need to be adopted. These measures include monitoring the situation and implementing minimum security standards. Security plans will be developed prior to any deployment of personnel and monitoring arrangements must be in place to make sure that IFRC's plans for dealing with COVID-19 are effectively implemented. Any deployment of IFRC personnel should be coordinated in advance with the regional security unit. IFRC personnel should not enter No Go zones. All IFRC staff actively involved in operations must have completed IFRC online safety courses (i.e., Stay Safe Personal Security, Security Management or Volunteer Security).

Security risks will be addressed by the NS in accordance with the security measures established during field operations. The Secretaries General of the local branches involved in the operation will ensure the correct application of security measures with the relevant services in the areas of intervention. All volunteers participating in this operation will be duly insured by IFRC and RCC, in accordance with the requirements of emergency operations.

C. Detailed Operational Plan



Livelihoods and basic needs People targeted : 5,000

Men : 1,000 Women : 4,000¹ Needs (CHF): 125,884

P&B Output Code	Outcome Livelihoods and basic needs 1: Communities, par affected areas, restore and strengthen their livelihoods Livelihoods and basic needs output 1.5: Households ber multisectoral cash grants to meet their basic needs							-	Farch 1,000 % of I appro least Numl (Targ Numl cash Numl	a Mile house priate 70% of ber of ber of (Targe ber of	zi and holds t and us <u>r 700 h</u> people 00 peo follow- et : 2 vi	Oundo hat reo seful to ouseh reach ple) up vis isits) eers pa	ouma s ceived o meet olds) ed by its to l articipa	the cash their i the cash the cash the cash the cash the cash	arget: do find needs sh app nolds ti	ipport (24% of it (Target roach hat rec transfe	r t: at eived
	Activities planned Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
AP081	Identification and verification of beneficiaries in different target groups – inclusion factors take into account gender, diversity and disability in the intervention																
AP084	Identification of how communities can participate in programme design and implementation																
AP081	Coordination with government, CSOs and other relevant sector stakeholders for integrated programming																
AP081	Conducting a market survey to better assess prices and availability of commodities and other items																
AP084	Putting in place of a conflict management mechanism																
AP084	Sensitisation of target households on the use of the cash received																
AP081	Unconditional/multisectoral cash distributions																
AP081	Market monitoring and continuous sensitisation of traders																

¹ The number of women among the displaced is estimated at 80%.

1.000	Deat distribution monitoring of each transfere	1	1	I				1	I	I	1		
AP081	Post distribution monitoring of cash transfers												

B
X

Health People targeted : 10,000 Men : 3,400 Women : 6,600² Needs (CHF): 6,773

P&B Output Code	Outcome Health 2: medium-term health risks for affected popula Output Health 2.1: the health situation and immediate health risks					asses	ssed	sen	sitisati or 2,0 Numl activi Numl Numl	ion on 000 ho ber of ities (1 ber of ber of	Farch useho volunt Target: sensit	a Mile. Ids) teers p 100 v isation d kits j	zi and articip oluntee sessio provide	ers) ons (Ta	uma s n healt arget :	ites (Ta h pron 8 sess	notion
	Activities planned Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
AP011	Orientation of volunteers on first aid																
AP011	Purchase and distribution of first aid kits to RCC branches responding to the emergency																
AP011	1 Training/retraining in CBS and equipment (CBS kits) for RCC volunteers mobilised for the DREF																
AP011	1 CBFA training on maternal and child health, referral and counter- referral, appropriate care and sensitisation on infant and child nutrition																
AP011	Sensitisation of the population on health and hygiene with a particular focus on COVID-19. (Activity budgeted under WASH)																
AP011																	

² Although 80% of the displaced are women, in the host communities they represent 52% of the population, i.e., 2,600 out of 5,000 people.

Water, Sanitation and Hygiene

People targeted : Men: 3,400 Women: 6,600 Needs (CHF): 75,483

P&B Output Code	Outcome WASH 1: Immediate reduction of water-borne disease	outcome WASH 1: Immediate reduction of water-borne disease risk in targeted communities												safe wa	ater (Ta	rget 10	10% or
P&B Output Code	Output WASH 1.1: Daily access to safe water in quantity and qu WHO standards is provided to the target population	ıd	- - -	(Targe Numb Numb the m house Numb 100 ve	et: 10,0 er of c er of h aterial sholds) er of v oluntee er of	00 peo ommun ouseho for the roluntee ers)	ople); nity rel olds in purific ers tra	ays tra the ho ation o ined o	ained (1 ost con of their n WAS	cess to Target : nmunity wells (H elem ent foll	: 60 lea / that ri Target. ents (1	ders) eceive : 1,000 arget:					
	Activities planned Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
AP026	Training of 100 volunteers on sensitisation and water purification techniques, hygiene and health promotion																
AP084	Training of 60 community leaders																
AP026	Distribution of bottles of bleach for water treatment to 1,000 households in the host community (one litre per month x 1,000 households x 03 months).																
AP026	Monitor water treatment and storage through household surveys																
P&B Output	Output WASH 1.3 : Adequate sanitation that meets Sphere star quality is provided to the target population.	dards	s in te	erms	of qua	antity	and		ber of t 5,000			ccess	to eme	ergency	y latrino	es (Tar	get: at
Code	Activities planned Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
AP028	Construction of 20 emergency latrines on both sites																
AP028	Sensitisation on the use and maintenance of latrines																
P&B Output Code	Output WASH 1.4 : Hygiene promotion activities that meet Sph and use of hygiene products provided to the target population.	ere st	andaı	rds fo	or idei	ntifica	ation	- 1 (- F	Numbei Target Percent	r of ho : 2000 age oi	ouseho house f hous	lds rea holds) eholds	ached s refer	by ser ring to	target : nsitisati o key housel	ion act sensiti	

								- N	Target:	960) of hyg	giene p	oromot	ion ses				ty kits d held
	Activities planned Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
AP030	Purchase and distribution of 100 handwashing kits and soap to be positioned in the two targeted sites to serve the displaced persons and the various host communities;																
AP030	Design/printing of IEC materials in French, Arabic and Fufulde, organisation of radio broadcasts, sensitisation through town criers, holding community meetings.																
AP030	Purchase and distribution of dignity kits to 960 women and girls at childbearing age (24% of 4,000 women) for 03 months																
AP030	Purchase and distribution of sanitation kits for sanitation committees																
AP030	Health and hygiene sensitisation sessions, with a focus on COVID- 19																
AP030	Post distribution monitoring																
AP030	Assessing progress and outcomes.																

Strategies for Implementation Budget (CHF) : 51,038

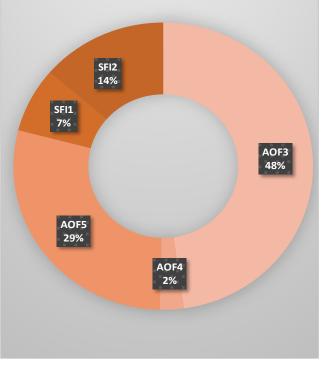
DPP	Outcome S2.1: An effective and coordinated international respo	onse	to dis	aste	rs is e	nsured	d			nouseho rget: 2,0				timel	ly and	adeq	juate				
P&B Output Code	Output S2.1.1: An effective response preparedness mechanism and rapid deploymentNcapacity of the NS is maintained									Number of surge capacity mobilized (Target: 1)											
	Activities planned Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16				
AP046	Ad hoc operational support through IFRC missions (finance, PMER, logistics, communications, etc.) as required																				
AP046	Deployment of surge personnel with multi-sector experience for 3 months																				
P&B	Output S2.1.3: The SN's compliance with the Principles and Ru	les o	f Hum	anita	rian			• ^	lumber	of coord	ination	n meeti	ngs he	eld							
Output	Assistance is improved		• ^	lumber	of lessor	ns leari	ned wo	rksho	os org	anisec	l (Tarç	jet: 1)									
Code	Activities planned Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16				

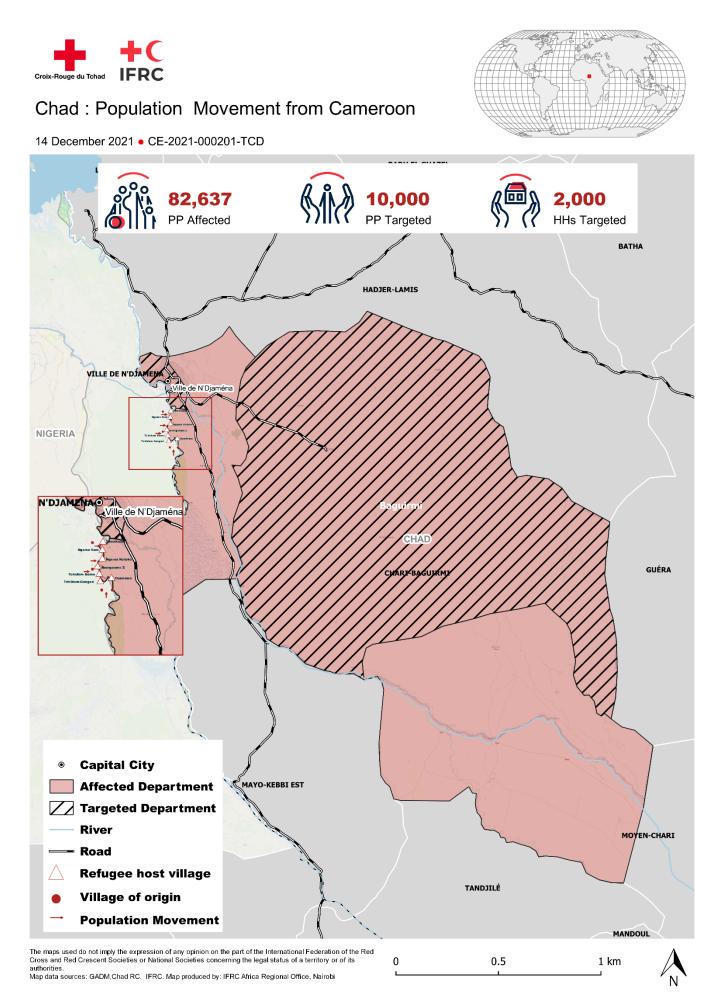
AP084	Development of communication tools								
AP084	Sharing of information on the role of volunteers and the risks they face.								
AP084	Joint monitoring activities are carried out with stakeholders								
AP084	Putting in place of a feedback mechanism								
AP084	Coordination meetings with partners and stakeholders								
AP084	Training/retraining of the 100 volunteers deployed in the operation on the community engagement, accountability and feedback mechanism								
AP042	Lessons learned workshop								

BUDGET

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SFI2 14%		16,075
14%	TOTAL BUDGET	263,377
7%	Seneral Expenditure DIRECT COSTS NDIRECT COSTS TOTAL BUDGET	

Disaster Risk Reduction	
Shelter	
Livelihoods and Basic Needs	125,884
Health	6,773
Water, Sanitation and Hygiene	75,483
Protection, Gender and Inclusion	
Migration	
Strengthen National Societies	19,211
Effective International Disaster Management	36,026
Influence others as leading strategic partners	
Ensure a strong IFRC	
TOTAL	263,377
	Shelter Livelihoods and Basic Needs Health Water, Sanitation and Hygiene Protection, Gender and Inclusion Migration Strengthen National Societies Effective International Disaster Management Influence others as leading strategic partners Ensure a strong IFRC





MDRTD019 - Chad - Population Movement from Sudan - DREF Final Report

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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 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