

ANNUAL REPORT ON THE USE OF CERF GRANTS CHAD

Country	Chad
Resident/Humanitarian Coordinator a.i.	Marzio Babille
Reporting Period	1 January 2010 – 31 December 2010

I. Summary of Funding and Beneficiaries

	Total amount required_for the humanitarian response:		US\$ 544,088,494						
	Total amount received for the humanitarian response:		US\$ 325,000,000						
		CERF:	US\$ 22,839,556						
	Breakdown of total country funding received by source:	CHF/HRF COUNTRY LEVEL FUND	DS: US\$						
		OTHER: (Bilateral/Multilateral)	US\$						
	Total amount of CERF funding received from the Rapid Response window:		US\$ 6,974,525						
ing	Total amount of CERF funding received from the Underfunded window:		US\$ 15,865,031						
Funding		a. Direct UN agencies/IOM	US\$						
_		implementation:	334						
		b. Funds forwarded to NGOs for							
		implementation (in Annex,	1100						
	Please provide the breakdown of CERF	please provide a list of each NGO and amount of CERF	US\$						
	funds by type of partner:	funding forwarded):							
		c. Funds for Government	US\$						
		implementation:	035						
		d. TOTAL:	US\$ 22,839,556						
s	Total number of individuals affected by the crisis:	311,000 refugees, 168,000 IDF host popula	Ps, 43,000 returnees, 150,000 tion, 1.6 million food insecure						
Seneficiaries		311,000 refugees, 168,000 IDPs, 43,000 returnees, 150,000 host population, 1.6 million food insecure							
Bene	Total number of individuals reached with CERF funding:		200,000 children under five						
		400,000 females							
Geog	raphical areas of implementation:	Southern Chad, Eastern Chad and	Sahel belt						

II. Analysis

Overview of the humanitarian situation

Droughts in areas of Chad including Kanem, Bahr El Ghazal (BEG), Batha, and Guera have contributed to an increase in global acute malnutrition levels. The 2009 Crop and Food Security assessment (CFSAM) conducted jointly by WFP/FAO/FEWS NET and the Government of Chad indicated a 35 per cent cereal deficit. According to the WFP VAM Comprehensive Food Security and Vulnerability Assessment (CFSVA) carried out in 2009, 1.7 million Chadians are food insecure and another 2.5 million are at risk of food insecurity. The food insecure population includes 16 per cent of the total population and those vulnerable to food insecurity includes a further 25 per cent. Food insecure households are concentrated in the Sahel regions of Kanem, BEG, Batha, and Guera.

During 2010 Chad has also faced outbreaks of meningitis, measles and meningococcal epidemics. According to WHO and the MoH (Ministry of Health), the Meningitis outbreak in February 2010 had an infection rate of 11.7/100,000, with case fatality rates (CFR) of over 10 per cent. Worst-affected areas included southern districts such as Doba and Bebidja in Logone Oriental region, Dono-Manga in Tandjile region and Danamadji in Moyen Chari region. The measles epidemic had a 23/100,000 infection rate and 1.3 per cent case fatality rate and primarily affected Mao in Kanem, Eastern Chad (where refugees and IDPs are located) and N'djamena.

The humanitarian situation in Chad is still characterized by high numbers of Internally Displaced Persons (IDPs) and refugees from Sudan and the Central African Republic (CAR), including some 325,000 refugees, 131,000 IDPs and 50,000 returnees. The implementation of relief activities is hampered by the uncertain security situation. The decision of the government of Chad not to renew the mandate of the United Nations Mission in Central African Republic and Chad (MINURCAT) after December 2010 has further complicated the situation in Chad. MINURCAT played a major role in training, equipping and advising the Détachement Integré de Sécurité (DIS), which is tasked with maintaining law and order around refugee camps and IDP sites, and providing armed escorts for humanitarian supplies. Protection of civilians and humanitarian access are issues of concern in the absence of a properly resourced DIS.

In 2010 the Humanitarian Country Team in for Chad received US\$22.8 million from the CERF, which accounts for 6 per cent of all funding provided for the Consolidated Appeal (CAP) in Chad¹.

The CERF's added value: Rapid Response grants

- **Food:** CERF funds enabled UN agencies to respond to the urgent food needs of 4,600 households affected by drought in the Sahel and survive during the lean season.
- Nutrition: CERF funding enabled the implementation of a pilot nutrition project Kanem and Bahr el Ghazal regions (Sahel), which has now been extended to other regions. Rapid allocation of CERF funds allowed treatment to be provided to children under five with severe acute malnutrition in Kanem and Bahr-El-Ghazel. Although GAM rates are still high, they have decreased in the Batha, Guera and Hadjar Lamis regions since the start of WFP assistance in March 2010. At least 874,319 beneficiaries were assisted, including 199,984 children under five and 300,749 pregnant and lactating women.
- WASH: CERF funds allowed UNICEF to respond to a cholera outbreak, which included a sensitisation campaign and distribution of more than 500,000 hygiene kits.
- Health: CERF funds enabled a rapid and efficient response cholera, meningitis and measles outbreaks in Chad. An immunization campaign against meningitis and measles was carried out by UNICEF, reaching 192,068 males, 202,456 females and 90,385 children. WHO also immunized 1,057,368 people against meningitis, 973,359 people against measles, and treated 6,000 cholera cases.

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¹ Of 34 CERF projects for 2010, 24 were completed during the reporting year and 10 are ongoing in 2011.

The CERF's added value: Underfunded Emergency grants

- **Education:** Access to schools outside major centres remains limited and the quality of education is poor because schools lack equipment and qualified teachers. The CERF provided emergency education support to approximately 30,600 IDPs, host communities and returnee children in eastern Chad. Teachers and staff were trained, and equipment was procured and distributed.
- **Food:** more than two million people (18 per cent of the population) in the Sahel belt were affected by the 2009 drought. CERF funds assisted 100,345 vulnerable households affected by drought and conflict in Eastern and Western Chad. CERF funding allowed acute malnutrition rates to be stabilised among CAR refugees and improved food consumption among food-insecure households in Southern Chad. The average GAM rate in the camps dropped from 6.5 per cent in August 2008 to 4.8 in December 2010.
- Nutrition: The CERF allocation allowed nutritional support to be provided for 10,420 severely malnourished children in three regions of the Sahel strip (Ouaddai, Sila, and Wadi-Fira). The malnutrition rate was maintained under the emergency rate of 15 per cent. 449 MT of food was distributed to improve the nutritional status of children under three among Sudanese refugees, IDPs, host communities and the local population in urban Abeche. 3,000 households including 2,900 children under three received supplementary feeding rations.
- WASH: Open air defecation is a major cause of water-borne diseases and contamination of water points. Limited knowledge of hygiene practices in handling food and hand washing is also a problem. CERF funds were used to provide access to safe water and sanitation facilities for 40,000 people in the east and north of Am-Timan. 24 hygiene promotion sessions were provided, including 12 in schools.
- Health: Cholera has affected N'Djamena, Hadjer Lamis, Chari Baguirmi and Mayo-Kebbi-Est. Southern Chad faces a meningitis epidemic every year. CERF funds have reinforced disease surveillance and emergency health response in Chad, while health workers have been trained in laboratory techniques. CERF funds have improved access to primary health care services for 50,000 severe malnourished children under five in regions affected by food insecurity. Two mobile health clinics were established to treat severely malnourished children in remote areas. The programme of immunization campaigns to respond to meningitis and measles outbreaks in favour of Sudanese and Central refugees was successfully expanded. As a result, 126,000 children were vaccinated against polio, meningitis and measles. IDPs in Dar Sila, Salamat and Assoungha were provided with reproductive health services, which led to a reduction in maternal, and neonatal mortality and morbidity, as well as IST and HIV transmission.
- Transportation: Access is a major challenge for humanitarian agencies in Chad. The CERF has been vital in ensuring regular UNHAS flights to remote areas in Chad. Key locations in the East, the Western Sahel belt and the South were covered by UNHAS on a regular basis. UNHAS moved 253 MT of cargo and undertook 46 medical evacuations.
- HIV/AIDS: An HIV programme was established in eastern and southern regions of Chad. Religious leaders were involved and advocated within communities to address damaging taboos and cultural practices. 95,000 women and 55,000 men were informed about AIDS. CERF funds reinforced the capacities of the National Network of People Living with HIV/AIDS to launch anti-stigma and anti-discrimination activities in areas covered by humanitarian agencies.
- Multi-sectoral: Under this sector, 38,628 IDPs were registered in the Assoungha region in Eastern Chad in April 2010. SGBV committees were established at seven IDP sites, with trainings carried out for GBV data collection. A total of 100 cases of GBV were recorded. 1,024 people (570 females and 454 males) were sensitized on women's rights. 250 people (200 females and 50 males) were supported with establishing small businesses. 6,480 blankets, 4,950 pieces of plastic sheeting, 546 hoes, 50 construction kits, and 666 MT of food was distributed to 11,011 beneficiaries at three IDP sites. Sudanese refugees in eastern Chad were provided with a basic minimum service package consisting of primary health care, reproductive health, mental health, EPI and HIV support services. The CERF allocation allowed nutritional support to be provided to more than 34,307 refugees and

- 30,000 members of the host population. In 2010 availability of water per day per person within refugee camps reached an average of 15 litres and hygiene awareness was improved significantly.
- Coordination: Under the leadership of the Humanitarian Coordinator, several meetings were held in N'djamena by cluster leads with the involvement of the UNCT, Red Cross movement and NGOs as implementing partners to discuss the allocation process of CERF funds. Technical working sessions chaired by cluster leads took place with the participation of UN agencies and NGOs. The objective of such meetings was to study the prevailing situation in their respective field of activities and geographical areas in order to identify the most urgent unmet needs. To facilitate the understanding of when projects have to be implemented and the performance of partners, UN agencies decided to work with established implementing partners. This approach was appropriate because these partners had experience in the geographical area and knew the prevailing humanitarian situation in Chad. At the end of the whole process, an IASC meeting unanimously endorsed the process and proposals.

III. Results

Sector/ Cluster	CERF project number and title (If applicable, please provide CAP/Flash Project Code)	Amount disbursed from CERF (US\$)	Total Project Budget (US\$)	Number of Beneficiaries targeted with CERF funding	Expected Results/ Outcomes	Results and improvements for the target beneficiaries	CERF's added value to the project	Monitoring and Evaluation Mechanisms	Gender Equity
Health and Nutrition	10-WHO-010 Improving nutrition surveillance and case management of medical complications of severe under-nutrition in health facilities	282,470	411,150	5,453 acutely malnourished children under five	Reduced mortality rates from under-nourishment among children in health facilities Strengthened capacity to analyse nutritional status of children Strengthened capacity for early detection and treatment of severe malnutrition	 National protocol for severe malnutrition management reviewed according to new WHO guidelines Nutrition training conducted for 65 health workers Paediatric medicines provided to 46 health facilities Weekly data collection and analysis of nutritional indicators 	CERF funds allowed the implementation of a nutrition pilot which has now been extended to other regions CERF funds enabled case management of severe malnutrition	 Supervision mission to monitor activities Nutrition surveillance data collected regularly 	Beneficiaries of this project were both girls and boys under five suffering from severe malnutrition
Health	CHD-10/H/28911/122 Reinforcing disease surveillance and emergency health response in Chad	150,000	745,983	1.7 million people in Salamat, Logone Oriental and Mandoul regions (including 313,200 children and 822,600 woman)	Disease Early Warning System established in southern Chad	Disease outbreaks detected in four regions Epidemiological bulletin issued on a weekly basis for monitoring of outbreaks Timely response to epidemics due to availability of essential drugs	CERF funds enabled case management of disease outbreaks.	 WHO sub-office in Abeche carried out monitoring of activities. Epidemiological surveillance bulletins issued regularly to monitor outbreaks. 	Beneficiaries include both men and women, as well as boys and girls.
Health	10-WHO-024 Emergency rapid response to meningitis and Measles outbreaks in Chad	1,896,992	3,820,172	627,677 people aged 2-30 years for meningitis vaccination campaign 966,289 individuals aged 6 months to 15 years for measles vaccination campaigns	 100 per cent of people aged 2 to 29 years immunized against meningitis 100 per cent of children aged 6 months to 15 years immunized against measles Crude Fatality Rate <10 per cent for meningitis 	 1,057,368 people immunized against meningitis (103 per cent) 973,359 people immunized against measles (88 per cent) 2,000 people with meningitis treated (9 per cent CFR) 	CERF funding facilitated a rapid response to disease outbreaks CERF funding enabled case management during disease outbreaks	 WHO staff monitored the immunisation campaigns WHO conducted a final evaluation of the vaccination campaigns in targeted health districts 	Men and woman were equally immunized

Health	10-WHO-058 Improving delivery and access to primary health care services in health facilities for under five children in regions affected by food insecurity in Chad CHD-(10/H/33091/R/122)	594,650	1,141,690	50,000 severely malnourished children under five	•	Case fatality rates for severe malnutrition <10 per cent Improved case management of severe acute malnutrition in remote areas using two mobile health clinics	Two mobile health clinics set up for outreach treatment of severe malnutrition in remote areas 102 health workers trained in Integrated Management of Childhood Illnesses Paediatric drugs provided to therapeutic centres for treatment of medical complications	CERF funding enabled improved accessibility of nutrition services	Two nutritionists recruited to monitor activities Nutrition surveillance data collected regularly	•	Beneficiaries of this project included both girls and boys suffering from severe malnutrition
Health	10-WHO-072 Emergency rapid response to cholera outbreak in Chad	632,250	3,147,076	8,000 potential cholera cases	•	Cholera case fatality rate (CFR) <1 per cent	6,000 cholera cases treated with a CFR of 2.9 per cent Essential drugs procured for case management and laboratory case detection	CERF funds reinforced the government and NGO response to the cholera outbreak, leading to a decrease in the crude fatality rate to 2.8 per cent	Missions conducted to monitor response Data on new cases collected daily to monitor incidence and fatality rates		Beneficiaries of this project included all cholera victims.

Water Sanitation and Hygiene (WASH)	10-CEF-062 Emergency rapid response to cholera outbreak in Chad	606,361	1,237,567	400,560 children under five Female: 1,692,366 Male: 1,645,634	 Cholera Case Fatality Rate (CFR) at one per cent Reduction in number of new cases and new health districts affected by cholera outbreak Sources of contamination decreased, with reduced mortality and morbidity rates Risk of transmission reduced, with improved individual and collective behaviour Population at risk better informed and sensitized on cholera Households have access to safe water 	CFR rates reduced to 0 per cent. WASH services delivered at community level, reducing cholera cases at the household levels conducted at CTC centres. Cholera waste incinerated and cholera affected areas sanitized. Cholera waste incinerated and cholera affected areas sanitized. Assessments carried out at the onset of the outbreak and then routinely Weekly implementing partners meeting held by the Ministry of Public Health and Epidemic Control Committee Procured materials for distribution to implementing partners (Oxfam GB, ACF, Oxfam Intermon, as well as National NGOs CODEWAN and Ecole Saine Ménage Sains). Transmission of cholera preventive messages through radio spots, leaflets, community leaders and door to door campaigns in all afforded dictricts. Reinforced behaviour change by sensitizing communities. Procured materials for distribution to implementing partners (Oxfam GB, ACF, Oxfam Intermon, as well as National NGOs CODEWAN and Ecole Saine Ménage Sains). Follow-up of other indicators such as availability of preventive materials.
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Water, Sanitation and Hygiene (WASH)	10-CEF-049-B Access to Water, Sanitation facilities and Hygiene Education for population affected by Eastern Chad crisis and people affected by food insecurity in the Sahel band (Still going on 2011 project)	900,000	841,144	Males: 78,000 Females: 85,000 Children under five: 46,000	Reduction in prevalence of water-related diseases among 202,000 IDPs in targeted areas. Increased access to safe water (15 litres per person per day) and sanitation for IDPs Improved hygiene behaviour among 100,000 IDPs Host communities have access to improved water and sanitation, and practice improved hygiene behaviour.	 3,500 hygiene kits provided. Provision of potable water and construction of latrines in Dogdore will be accomplished during 2011. 12 boreholes will be drilled in Guerra in February 2011. Rehabilitation work will be carried out in Assungha. Cooperation agreements have been established with implementing partners Oxfam Intermon, Concern Worldwide, ACF and IAS. 	CERF funding enabled UNICEF and WASH cluster partners to improve access to water and sanitation, complementing programme funding in areas where there were shortfalls. Increased monitoring of projects has also been enabled.	Project monitoring and evaluation mechanism are conducted by UNICEF, the regional DH, implementing partners, WASH cluster meetings and financial and programme reports.	All community members benefited from the project.
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Nutrition	10-CEF-049-A Nutritional support and medical care to vulnerable children in the Sahel regions of Chad	749,354	6,458,520	153,000 people Children under five: 110,000 Pregnant and lactating women: 43,000	 8,000 acutely malnourished children admitted and treated at nutrition centres >75 per cent of children treated for severe acute malnutrition recover >80 per cent coverage for vitamin A supplementation and de-worming All partners (NGOs and MoH) using improved standardised practices for management of acute malnutrition and nutrition surveillance 	 Therapeutic care provided to 10,420 children with severe acute malnutrition (6,702 in Ouaddai, 2,788 in Sila and 930 in Wadi-Fira) Therapeutic care cure rates >75 per cent in the three regions 90 per cent coverage for vitamin A supplementation and de-worming Strengthened capacity of MoH and all partners working in the project area for community and facility-based management of acute malnutrition 	Rapid allocation of CERF funds allowed the project to begin immediately after needs were identified.	 UNICEF provided technical back-up and support for the interventions. Monitoring and evaluation done jointly with regional health delegates and the CNNTA. Data and indicators collected daily according to national protocols, and disseminated during national and regional cluster meetings. 	The project targeted the most vulnerable groups such as children under five with SAM, pregnant and lactating women Special attention was paid to equal access to therapeutic care for both girls and boys
Education	10-CEF-049-C Primary Education in support of IDP children affected by armed conflict in Eastern Chad	115,617	373,768	30,600 children (27,540 IDPs children, 3,060 children from host communities, 54 per cent boys, 46 per cent girls)	50,000 IDP host community children and returnees at primary school age have access to improved quality education 500 teachers and all Parent Teacher Associations (PTAs) benefit from improved school environment, adequate teaching and learning materials, teacher training for quality teaching delivery as well as establishment and capacity building of PTAs.	 Education needs assessments conducted in 42 villages in two departments (Abdi and Assongha). 42 PTAs and Mothers' Associations received Income Generating Activities (IGA) kits (agricultural tools i.e. hoes, rakes, axes, digging tools and seeds) in order to pay teachers. Provision of school materials and supplies for over 30,600 pupils. Purchase and distribution of 600 school benches (each seating three pupils) 	The CERF contribution enabled the provision of quality education for more than 30,600 children through the purchase of school materials, supplies, equipment and furniture.	UNICEF worked with local education authorities and NGOs to monitor activities and collect data on a regular basis.	The project promoted the education of girls and boys.

Health	10-CEF-023 Emergency rapid response to meningitis and measles outbreaks in Chad	792,447	1,352,993	Meningitis vaccination campaign: 627,677 people aged 2-30 Females: 313,840 Children 2-5 years: 100,428 Measles vaccination campaign: 966,289 people aged 6 months to 15 years (50 per cent females: 483,150, Children under five: 347,864).	 Reduce attack rates, morbidity and mortality related to meningitis and measles outbreaks Immunize target populations aged 2 to 30 years (in Bébédjia, Abéché and Biltine districts) for meningitis, and aged six months to 14 years (Mao, Noukou and Moussoro districts) for Measles. Immunization coverage >90 per cent among target population Monthly number of measles cases: < 3 confirmed cases, <5 suspected cases Weekly attack rate for meningitis < 5 in 100,000 CFR for meningitis < 10 per cent 	 MoH supported by UNICEF and WHO developed a surveillance system to monitor measles, cholera, meningitis, yellow fever, polio, and malaria. Information was collected from 22 regions and shared with MoH. 	CERF funds used to procure vaccines and renewable supplies, as well as meeting operational costs of the campaign. Resulted in control of the epidemic by the 24th epidemiological week.	Development of a surveillance system.	• Activities implemented regardless of age or gender.
Nutrition	10-CEF-011-D Nutrition care and support for IDP and host communities in eastern Chad	700,000	2,221,320	Children under five: 10,684 pregnant and lactating women: 21,915	 Therapeutic Nutrition Services for Refugees and IDPs. 13 functioning treatment centres Six functional stabilisation units Increased response capacity 	 Procurement and delivery of Ready to Use Therapeutic Food Global Acute Malnutrition (GAM) rate reduced to 10.2 per cent 60 health workers trained on malnutrition management 	CERF helped maintain malnutrition rate under emergency level of 15 per cent 12,000 children provided with care in Therapeutic Feeding Centres	 Monitoring missions Monthly reporting and nutrition surveillance/screening SMART survey 	The project addressed the nutritional need of children under 5 and more 30,000 women; in addition 312 Chadian women participated in the services delivery in terms of capacity building and social mobilization

Water, Sanitation and Hygiene	10-CEF-011-E Improved access to water, sanitation and hygiene promotion in the East and North Am-Timan	500,000	500,000	60,000 IDPs and host community residents (including 30,600 women, 17,400 men, and 12,000 children)	 60,000 IDPs and host community residents have access to improved water and sanitation services, and practice improved hygiene behaviour. Increased Government capacity to support communities and conduct monitoring and evaluation for WASH cluster. Functioning water point committees, with ability to finance repairs. Increased local access to spare parts. 	 40,000 persons (including school children) have access to safe water and sanitation facilities. 23 water points operational, 24 school latrines with hand washing facilities constructed, and 24 hygiene promotion sessions provided (including 12 in schools). Government provided support with monitoring and evaluation. 13 water committees operational, with training in pump maintenance provided. Committees linked with four local repairers, who were also trained. 	CERF enabled rapid intervention, covering gap that would have been left uncovered due to reductions in funding.	 UNICEF and Government counterparts conducted monthly monitoring visits. Cluster meetings. Monthly progress reports. 	Girls encouraged to participate during school- based activities Separate latrines for girls and boys constructed. Women encouraged to participate in water committees.
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Education	10-CEF-011-B Education in support of IDPs, host communities and returnees in Eastern Chad	238,345	300,028	30,600 children (27,540 IDPs and 3,060 children from host communities, 54 per cent boys, 46 per cent girls) 350 teachers (95 per cent men, 5 per cent women), 516 PTA members (51 per cent men, 49 per cent women), 25 school directors and 25 assistants	50,000 children at primary school age have access to improved education 500 teachers and all Parent Teacher Associations (PTAs) benefit from improved school environment, adequate teaching and learning materials, teacher training for quality teaching delivery as well as the establishment and capacity building of PTAs.	 Four three-day workshops on minimum standards for education in emergencies conducted, with 139 participants. 275 teachers trained. 20 staff from Ouaddai Regional Education Service received three weeks training in computer and data collection/management. 30,600 children received school materials. 177 chairs and 177 tables provided to schools. Office equipments and motorbikes for Regional Education Service.	The CERF contribution enabled the provision of quality education for more than 30,600 children through the purchase of school materials, supplies, equipment and furniture.	•	UNICEF worked with local education authorities and NGOs to monitor activities and collect data on a regular basis.	The project promoted the education of girls and boys.
Health	10-CEF-011-C Maternal and Child Health care for Sudanese and Central African Refugees in Chad	101,650	2,289,800	136,987 children	85 per cent of children under five immunised	 95 per cent polio coverage 92 per cent meningitis coverage 90 per cent measles coverage	CERF funding enabled expanded immunization campaigns.		Coordination with Ministry of Health to conduct post immunization surveys Early Warning and reporting	 Immunization campaigns targeted children and women. Tetanus campaign vaccinated 18,000 women

Health -Nutrition	10-WFP-003 EMOP 200112 Improvement in the health and nutrition status of vulnerable groups and drought-affected population	2,120,477	82.4 million	874,319 beneficiaries were assisted Children under five: 199,984 Pregnant and lactating women: 300,749	Save lives of drought-affected populations and reduce levels of acute malnutrition among children under five, and pregnant and lactating women in the Sahelian Band of Chad	 WFP reached 100 per cent of planned beneficiaries with 25,927 MT of food. Recovery rate in Supplementary Feeding Programme averaged 91.1 per cent in the regions of Kanem, BEG, Lac, Guera and Batha. GAM rates are still high in these regions, above 15 per cent. However, the GAM rates have improved in the Batha, Guera and Hadjar Lamis regions since the start of the assistance in March 2010. 	Rapid allocation of CERF funds allowed the project to begin immediately after the project was approved.	WFP opened new offices in Moussoro, Bol and Ati, and reinforced existing offices in Ndjamena, Mao and Mongo in order to strengthen the implementation and monitoring of field activities. WFP and partners selected beneficiaries based on their levels of food insecurity. Commodity entitlements were distributed directly to selected beneficiaries of General Food Distribution and to mothers or caretakers in Supplementary and Blanket Feeding programme for children. WFP conducted on site and post distribution monitoring during and after the food distributions. Coordination meetings were held regularly to improve the activities' implementation based on lessons learnt	In line with WFP's gender policy, 50 per cent of food ration entitlements were established in women's name. 63 per cent of people receiving food on the behalf of their households at distribution points were women.
Health - Nutrition	10-WFP-066 EMOP 200112 Coverage of the global acute malnutrition and dispensation of primary health care in Chad	189,714	82.4 million	16,239 beneficiaries Children under five: 9,047 children Pregnant and lactating women: 7,192	Save lives of drought-affected populations and reduce levels of acute malnutrition among children under five, and pregnant and lactating women in the Sahelian Band of Chad	French Red Cross (Croix Rouge Francaise) was WFP's implementing partner for this project in which 16,239 beneficiaries were reached. 26 health centres were equipped to address malnutrition 48 health agents and 82 volunteers were trained. Recovery rate at 92 per cent (target: >70 per cent), mortality rate at 0,01 (target: <3 per cent) and abandon rate at 8,12 per cent (target: <15 per cent)	CERF came at a time when a gap in funding would increase the risk of a rapid deterioration of the health and nutritional status of targeted groups.	Screening, treatment, distributions and results in the nutritional status were closely monitored by the implementing partner's team at 26 health centres.	This project targets pregnant and lactating women (7,192 beneficiaries and more than half of the children under five were girls)

Food	10-WFP-014 PRRO 200059 Assistance to Central African Refugees CHD-10/F/30358	1,283,458	20.7million	56,027 Central African Republic (CAR) refugees (including 13,168 children under five, and 22,362 women and adolescent girls)	 Stabilize acute malnutrition among CAR refugees and improve food consumption of food- insecure households in Southern Chad 	 WFP distributed full ration of 2,100 Kcal to newly arrived refugees in Moula, Haraze, Daha, and to vulnerable persons in Yaroungou A ration of 1200 Kcal was distributed to old caseload refugees at Dosseye, Amboko and Gondje. Recovery rate in Supplementary Feeding Programme: 87.3 per cent. Average GAM rate in the camp dropped from 6.5 per cent in August 2008 to 4.8 per cent in December 2010. 	Ouick allocation of CERF funds allowed the project to begin immediately.	 WFP has three suboffices in the south with sufficient staff to support efficient implementation and monitoring of project activities in CAR refugee camps. Food distributions were implemented in collaboration with UNHCR and NGO partners. WFP conducted onsite and post-distribution monitoring during and after food distributions. Coordination meetings were regularly held in Gore and Ndjamena to improve the activities based on lessons learnt. 	 48 per cent of food distribution management committee members within refugee camps were women. 56 per cent of food ration cards were issued in women's names. 77 per cent of people receiving food on the behalf of households were women.
Health Nutrition	10-WFP-013 EMOP 105591 Assistance to Sudanese Refugees, Internally Displaced (IDPs), Host communities and affected local Population in Eastern Chad CHD -10/F/30538/561	200,000	248.8 million	3,000 households (including 2,900 children under three)	Contribute to the prevention of malnutrition among children under three in Abeche.	449 MT of food distributed.	Without the CERF contribution, the project would not have been possible.	A post distribution monitoring study gave indication of the use of the food rations as well as the impact on the food security of the targeted households.	Although project did not specifically target women, gender policy principles were respected.
Health - Nutrition	10-CEF-049-A EMOP 200060 Assistance to Sudanese Refugees, Internally Displaced (IDPs), Host communities and affected local Population in Eastern Chad	459,929	77 million	The initial cooperating partner has not been able to implement the planned project, which has therefore been resubmitted for direct implementation by WFP (approval by CERF secretariat 23 December 2010)	■ N/A	■ N/A	N/A	■ N/A	■ N/A

Coordination and Support Services - UNHAS	10-WFP-066 Provision of Air service to the humanitarian community in Chad SO 200058	300,000	16.6million	Planned number of passengers: 48,000	Air service provided for humanitarian community in Chad at key locations in the East, Western sahelian belt and South.	 253 MT of cargo 46 medical evacuations. Total number of passengers: 56,118 	CERF prevented disruption of flights to remote areas in Chad.	UNHAS team records all the movement of passenger and cargo in accordance with international aviation rules and regulations	■ N/A
Health	CERF: 10-AID-002 CAP: CHD-10/H/30318/R Preventing of HIV/AIDs spread and reducing its impact in the East and southern regions of Chad	99,510	1 million	Women: 95,000 Men: 55,000	 HIV/AIDS prevention activities and social support Target populations better informed about HIV/AIDS Improved access to social services and basic health within regional hospitals Community support to PLWHA and orphans 	PMTCT coverage increased from 1.4 per cent in 2007 to 10 per cent in 2010. Social mobilization forum organized with participation of 45 religious leaders in N'Djamena in November 2010. Social mobilization campaign for PMTCT organized in south and East Chad with participation of women working in prenatal care facilities. 150 peer educators trained and equipped	CERF-funded activities encouraged religious leaders to take responsibility and advocate for PMTCT within communities CERF helped to lift taboos and socio-cultural barriers for an effective HIV/AIDS programme in Eastern Chad The capacities of the National Network of People Living with HIV and Aids have been strengthened	A monitoring and evaluation mechanism was established through the joint UN team on HIV/AIDS and used to monitor the implementation of the project. Field supervisions organized.	Women and men targeted by the project have equal access to prevention services and information on HIV/AIDS

Registration/Profiling	10-HCR-005 Protection and assistance for IDPs in the Assoungha region, Eastern Chad	123,192	37,000	 100 per cent of the IDP population in Assoungha registered 	 One workshop on registration and data organized or 39 IRD staff in April 2010 38,628 individuals registered (including 1,834 with disabilities) 78 newborns and 25 deaths recorded 3,200 returnees registered in Borota 	Narrative and financial reports.Weekly monitoring.	Among 39 IRD staff, six were female
Reduction of GBV	10-HCR-005 Protection and assistance for IDPs in the Assoungha region, Eastern Chad	39,394	37,000	 80 per cent of GBV survivors receive support Community participation in GBV prevention and response 	 One GBV staff (IRD) recruited and trained in SGBV One SGBV committee established at each sites Two SGBV sensitization campaigns organized. Four sensitization and 10 information campaigns on SGBV organized (Arkoum, Goundiang, Allacha, Hillé Deye and Borotot). Weekly sensitization and advocacy for women's rights and gender equality (4,800 participants). Seven SGBV committees trained and involved with GBV data collection (100 cases registered). 1,024 persons (570 females and 454 males) sensitized in women right (12 meetings). 37 females (12 in Allacha,10 in Goungour and 15 in Hiledjide) trained to prevent SGBV incidents 	 Narrative and financial reports. Weekly monitoring. 	SGBV committee consisted of 14 females and 6 males.

Self Reliance	10-HCR-005 Protection and assistance for IDPs in the Assoungha region, Eastern Chad	88,540		37,000	 Small holders' associations promoted and supported (e.g. farmers associations) Small business support provided to 200 households Micro-credit finance provided to some 200 people 	 504 plants distributed in Gozbagar and Arkoum 250 persons (200 females and 50 males) supported with small businesses 130 females supported with farming Eight women supported with construction of stoves (170 stoves constructed in Banco) 		Narrative and financial reports.Weekly monitoring.	
Basic Items- Procurement of returnee kits	10-HCR-005 Protection and assistance for IDPs in the Assoungha region, Eastern Chad	14,700		37,000	 All IDP women between aged 14 -59 provided with sanitary materials. Individual/family support provided to 50 returning families and 5,000 people with special needs. 	 6,480 blankets distributed 4,950 sheets plastic sheeting distributed 546 hoes distributed 50 construction kits distributed Five MT firewood distributed 666 MT food distributed to 11,011 beneficiaries at three IDPs sites 		Narrative and financial reports.Weekly monitoring.	■ 50 persons with specific needs who benefit the construction kits, 30 are females.
Hearth Care	10-HCR-006 A Multi-sectoral assistance to Sudanese refuges in Eastern Chad	786,325	1,839,186	Children under five: 7,501 including 20,173 females	 34,307 refugees have access to primary health care 	 Primary Health Care services provided. Primary Health Care training provided. Health education and awareness messages promoted through Community Health Workers (CHWs). 	Successful provision of basic health services (minimum service package of primary health care)	Monthly follow-up at field level	High proportion of women

Nutrition	10-HCR-006 B Multi-sectoral assistance to Sudanese refuges in Eastern Chad	111,581	385,990	Children under five: 7,501 including 20,173 females	Incidence of severe malnutrition in two camps reduced to <12 per cent	 Critical supplementary feeding programmes maintained in each camp. Regular screenings through MUAC, and further verification conducted using weight for height measurements. Severely malnourished children admitted into clinics Supplementary food and measles vaccinations provided Regular food commodities made available 	Nutrition support provided to refugees (more than 34,307 refugees, and 30,000 host community members) Incidence of severe malnutrition reduced to 10.6 per cent	High proportion of women
Water	10-HCR-006 C Multi-sectoral assistance to Sudanese refuges in Eastern Chad	253,213	418,924	Children under five: 7,501 including 20,173 females	■ 37,000 refugees have access safe water	 5 manual pumps installed 19 public drinking fountains constructed 64 taps in Milé and 34 in Kounoungou repaired One motorised pump and one generator provided in kounoungou and three generators provided in Milé Maintenance of two water tanks in Kounoungou and four water tanks in Milé Training on water treatment and pump installation provided for 40 persons in Milé and 40 in Kounoungou 	Average 15 litres of safe water per person per day provided at refugee camps	High proportion of women

Sanitation	10-HCR-006 D Multi-sectoral assistance to Sudanese refuges in Eastern Chad	119,148	187,725	7,501 children under five (including 20,173 females)	 150 new latrines built Percentage of people access to latrines increased 	 Hygiene sensitisation carried out in camps 54 sanitation kits distributed in Kounoungou and 54 in Milé 55 latrines constructed in Kounoungou and 50 in Milé 11 communal latrines constructed in Kounoungou and six in Milé Three communal latrines rehabilitated in Kounoungou and three in Milé 	Hygiene awareness improved		High proportion of women
Health	CHD-10/H/28642/1171 Reducing excess morbidity and mortality related to Reproductive Health in the affected populations in Eastern, Southern and Sahel regions	401,070	800,000	854,061 people Females: 512,058 Males: 342,003 males) in Wadifira, Salamat and Kanem	 Maternal and neonatal mortality and morbidity reduced STIs and HIV transmission reduced GBV cases correctly managed within 72 hours of incidents 	 Improved availability of reproductive (RH) supplies and services for 30,693 pregnant women. Equipment for HIV, STI and nosocomial diseases transmission provided to all health centres covered by the project. Estimated 52,749 women benefited. 	CERF funds enabled extension of RH and GBV services Improved capacity of health care staff Trainings of trainers Community focal points trained	■ Field visits ■ Monthly RH report	■ Targeted group are women and girls, but men were also involved

Health	CHD-10/H/28642/1171 Strengthening Reproductive Health (RH) services to the conflict-affected populations in the East and South of Chad and Reducing morbidity and mortality rate for affected populations in Eastern, Southern and Sahel regions	150,000	800,000	522,660 IDPs and host community members from Kobe, Dar-ama, Assoungha, Ouara and Kimiti (339,729 women)	 Maternal and neonatal mortality and morbidity reduced IST and HIV transmission reduced 	RH supplies (contraceptives, neonatal and pregnancy equipments, products and drug) provided for 17 refugee camps and 10 IDP sites Equipment for safe blood transfusions provided for six districts and regional hospitals 1.4 million male contraceptives and 8,400 female contraceptives distributed among refugees, IDPs and host communities 30,693 pregnancies delivered with midwife and in safe conditions	RH services extended among IDPs in Dar Sila, Salamat and Assoungha RH awareness and advocacy activities widely implemented	Field visitsMonthly RH report	 Major part of the target population were women
Protection/Human Rights/Rule of law	CHD-10/P-HR- RL/28648/1171 Prevention of and response to Gender-Based Violence (GBV) among Refugees and IDPs in Eastern Chad	310,685	1,123,500	316,718 Sudanese refugees and IDP in Assoungha and Dar Sila Female: 205,867, Male: 110,851	 GBV support provided Referral system established 	 PEP kits provided to all GBV victims Seven health services reinforced with training activities, materials, drugs and medical equipment Standard Operating Procedures (SOP) drafted to improve GBV prevention/response GBV referral pathways updated at six IDP sites GBV sub-clusters fully functioning at the regional level (Abéché) and in Goz Beida and Farchana (Hajer Hadid) GBVIMS pilot initiated in Sila zone for six IDP sites and host community 	CERF contributed to improved GBV prevention and response CERF funds supported needs of GBV victims with medical supplies and services	 Protection cluster and GBV sub-cluster meetings Field visits and regular reports 	Gender sensitive targeting of men and women Women and girls more likely to be GBV victims

Agriculture	CHD-10/A/31516/R Emergency supply of animal feed to vulnerable pastoralist households affected by drought in Bahr El Gazal region	492,883	1,786,187	2,390 pastoralist households	 4,556 pastoralist households provided with 615 MT of animal feed 	■ Due to high prices, only 412 MT of feed was provided ■ 2,390 households supported	CERF funding provided before the livestock lean season CERF helped to address needs identified by local actors, which were under-funded.	FAO assisted the local public livestock service to monitor and implement the project.	Both men and women equally benefited from this project.
Agriculture	10-FAO-009 Emergency supply of farming inputs to vulnerable agricultural households affected by drought and conflicts in Eastern and Western Chad	976,023	3,500,000	33,000 households	Provision of 360 MT of seeds (millet, rain and subsidence sorghums) in six regions (Batha, Guera, Bahr El Gazal, Ouaddaï, Sila and Salamat) 63,000 hectares of land sown 48,000 MT cereal harvested	 845 MT seeds distributed 100,345 households assisted 84,532 hectares of land sown 47,000 MT cereal harvested Project extended to 10 regions (Kanem, Lac, Hadjer Lamis, Chari Baguirmi, Wadi Fira added and Salamat subtracted), 	CERF funding allowed the project to fulfil household needs	Implementating partners identified beneficiary households in affected regions Seed distribution carried out by implementing partners with FAO supervision Implementing partner field monitoring missions FAO supervision missions conducted during beneficiary identification, seed distribution and harvest assessment	Both men and women benefited from the project activities Female-headed households were prioritised.

Annex 1: CERF Funds Forwarded to Each Implementing NGO Partner

NGO Partner	Sector	Project Number	Amount Forwarded (US\$)	Date Funds Forwarded
Chad Red Cross	WASH	10-CEF-062	31,279	08 October 2010
Ecole Saine Ménages Sains	WASH	10-CEF-062	14,662	06 October 2010
CODEWAN	WASH	10-CEF-062	19,540	04 - 31 October 2010
OXFAM GB	WASH	10-CEF-062	24,291	June, July, August 2010
OXFAM INTERMON	WASH	10-CEF-062	155,494	5 February 2010
ACF	WASH	10-CEF-062	26,629	5 February 2010
Délégation Sanitaire	WASH	10-CEF-062	54,924	June, July, August 2010
Médecins Sans Frontières	WASH	10-CEF-062	1,995	July 2010
Solidarités	WASH	10-CEF-049-B	23,000	October 2010
IRW	WASH	10-CEF-049-B	34,500	October 2010
Direction hydraulique	WASH	10-CEF-049-B	14,577	October 2010
Première Urgence	Education	10-CEF-049-C	99,000	19 November 2010
COOPI	Nutrition	10-CEF-011-D	188,000	July 2010
ACF	Nutrition	10-CEF-011-D	158,000	June 2010
Oxfam GB	WASH	10-CEF-011-E	269,954	25 August 2010
Solidarités	WASH	10-CEF-011-E	302,873	12 August 2010
Direction Hydraulique	WASH	10-CEF-011-E	50,000	20 March 2010
INTERSOS	Child Protection	10-CEF-011-A	17,665	02 June 2010
JRS	Education	10-CEF-011-B	104,936	26 August 2010
COOPI	Health	10-CEF-011-C	5,000	July 2010
МоН	Health	10-CEF-011-C	25,000	July 2010
CNLS	Social mobilization for PCTMT	1	37,500	08 November 2010
RNTAP+	Positive prevention	2	20,500	05 May 2010
Association des PVVIH- Kounou Waine d'Abéché	Positive prevention, Peers education training and Social mobilization for PCTMT	3	17,500	20 November 2010
CONALUS	Advocacy to mobilize religious and community leaders	1	12,500	20 September 2010
IRD	Registration/profiling Reduction Of GBV Basic items Self Reliance	10-HCR-005	123,192 39,394 14,700 88,540	01 January – 31 December 2010
UNHCR	Staff cost	10-HCR-005	117,000	01 April – 31 December 2010
UNHCR	Support Cost	10-HCR-005	26,798	
IMC	Hearth Care Nutrition	10-HCR-006	786,325 111,581	01January – 31 December 2010
SECADEV	Water Sanitation	10-HCR-006	253,213 119,148	01January – 31 December 2010
MDM	Health	10-FPA-034	50,000	
CSSI and Protection (GBV)	Health	10-FPA-034 10-FPA-006	50,000	
CAM	Health	10-FPA-034 10-FPA-006	25,000	

ONDR HADJAR LAMIS	Agriculture	10-FAO-009	86,100	11 May, 28 May and 24 September 2010
ONDR MONGO	Agriculture	10-FAO-009	42,173	14 May and 18 October 2010
ONDR ABECHE	Agriculture	10-FAO-009	37,126	28 May 2010
SODELAC	Agriculture	10-FAO-009	13,136	28 May 2010
FPT	Agriculture	10-FAO-009	8,584	01 May 2010
WCDO	Agriculture	10-FAO-009	4,256	12 July 2010
CWW	Agriculture	10-FAO-009	2,131	02 June 2010
MSF France	Health	10-WHO-024	911,854	23 May 2010
Medecins du Monde	Health	10-WHO-072	91,737	29 January 2011*
International Rescue Committee	Health	10-WHO-072	92,862	29 January 2011*

^{*} N.B: For MDM and IRC, due to the fact that WHO country Office experienced some problems with the introduction of WHO Global Management System, NGOs prefinanced activities pending the funds transfer.

Annex 2: Acronyms and Abbreviations

ACF Action Contre la Faim

CAAG Children Associated with Armed Conflict

CAR Central African Republic

CFR Case Fatality Rate
CFR Cholera Fatality Rate
CFS Child Friendly Spaces
CNLS National AIDS Council

CNNTA Centre National de Nutrition et de Technologie Alimentaire (National Nutrition and

Food Technology Centre)

CONALUS National Network of NGO's engaged in the fight against HIV and aids

CTC Cholera Treatment Center

CWW Concern World Wide

DH Direction Hydraulique (Hydraulics Department)

FPT Future Porte of Chad

GAM Global Acute Malnutrition
GBV Gender Based Violence
IAS International Aid Services
IDP Internally Displaced People
IGA Income Generating Activities

INEE Inter-Agency Network for Education in Emergencies

INGO International Non Governmental Organization

IRW Islamic Relief Worldwide

MoH Ministry of Health

NGO Non Governmental Organization

ONDR ABECHE Office National de Développement Rural of Abeche region

ONDR HADJAR

Office National de Développement Rural of Hadjer Lamis region LAMIS

ONDR MONGO Office National de Développement Rural of Guera region

PLWHA People living with HIV

PMTCT Preventing mother to child transmission of HIV

PTA Parent Teacher Associations

PU Première Urgence

RNTAP+ National Network of PLWHA

SODELAC Société de Développement of Lac region

SOP Standard Operating Procedures
STIS Sexually Transmitted Infections
UNICEF United Nations Children's Fund
VCT Voluntary Counselling and Testing

WCDO World Concern for Development Organization