

HUMANITARIAN IMPLEMENTATION PLAN (HIP)

CHAD

0. MAJOR CHANGES SINCE LAST VERSION OF HIP

As of 6 May

This year, despite unusually good harvest in autumn 2012 (124% increase at national level compared to 2011, and 226% for the Sahel) and reassuring projections of the Government in terms of agricultural production in 2013, a significant proportion of the Sahelian population continues to suffer the effects of the crisis of 2011/2012, and remains in a situation of severe food insecurity. The poorest households, whose only income comes from their daily work, depend mainly on the markets to meet their food needs. With food prices below the five-year average, access to adequate and balanced diet remains illusory. For the poorest segments of the population, the lean season will start soon or has already begun. Field observations indicate that many people who have been affected by the food crisis in 2011/2012 will require assistance in 2013. Therefore, projections of 500,000 beneficiaries in 2013 by WFP appear underestimated. Given these needs and the opportunity to accelerate the delivery of grain stocks in the country before the rainy season and to support other complementary interventions in food and nutrition security, it was decided to strengthen immediately HIP Chad in 2013 with an amount of EUR 6 million, thus increasing the total envelope in 2013 to EUR 29 million. The implementation of this additional funding will be made by changing current actions or, if necessary, through new actions.

As of 18 June

More than 50,000 refugees and returnees have fled from Darfur into Chad (Tissi district, at the South-Eastern border with Sudan and CAR) over the past few months, due to intensified inter-communal conflicts in Sudan. The needs of newly displaced populations are significant, given the very limited access to basic services and minimal assistance available in host areas. In order to address this new humanitarian situation, and to reinforce ECHO response to the increasing food and nutrition needs in the Sahel belt of Chad linked to an overall deteriorating food security situation in the Sahel region, an additional EUR 8 million have been made available for humanitarian actions in Chad, bringing the total envelope to EUR 37 million.

The additional funding will help address food, protection, WASH, shelter, health and nutrition needs of both local and displaced populations, allowing partners who are present in the affected areas to provide basic services to those in need.

Access will be a major constraint due to the rainy season that has just started.

The implementation of this additional funding will be made by changing current actions or, if relevant and appropriate, through new actions taking into account the resources available.

1. CONTEXT

Chad is a large but sparsely populated land-locked country, with a population of 11,506,000, bordered by Sudan, Libya, Niger, Nigeria, Cameroun and the Central African Republic (CAR). Roughly 60% of the national territory is desert, 25% falls in the semi-arid Sahel belt, while the remaining 15% approaches sub-tropical conditions but is subject to flooding.

The United Nations Development Programme's (UNDP) 2011 Human Development Index places Chad 183rd out of 187 countries. The Gross national income (GNI) per capita is USD 1,105 per person. Life expectancy at birth is 49.6 years, while the 2010 maternal mortality rate per 100,000 births is 1,200, the second highest worldwide. One in every five children is born with low birth weight and exclusive breastfeeding is practiced by only 3.3% of Chadian women. The European Commission Directorate-General for Humanitarian Aid and Civil Protection (DG ECHO) has assigned a Vulnerability and Crisis Index score of 3/3, its most severe ranking.

Chad suffers from chronically poor governance and is emerging from a long period of civil conflict. Following the normalization of relations with Sudan in 2010, ending several years of proxy war during which each country supported each other's rebel groups, parliamentary, presidential and local elections were held in 2011 and 2012.

Chad relies on oil revenues (20% of GDP), foreign assistance and foreign capital for most public and private sector investment projects. Oil exports started in 2004, and the peak production capacity of known oil fields has already been reached. Cotton, cattle, and gum arabic provide the bulk of Chad's non-oil export earnings.

Officially, at least 80% of Chad's population relies on subsistence farming and raising livestock for its livelihood. Although difficult to quantify, remittances are also an important source of income. Inflows of remittances to Chad's impoverished Sahel regions from Libya have dried up since the conflict there in 2011, and this continues to affect an already fragile livelihood base.

In 2012, 3.6 million people nationwide were affected by a food and nutrition crisis linked to poor harvests and high market prices for basic commodities. This situation was compounded by trade restrictions due to regional instability in Libya, Nigeria and to a lesser extent, Sudan. A massive food-aid, cash and voucher response has stabilized the situation by maintaining the food security status of vulnerable segments of the population, but this has done little to improve overall conditions.

Eight of the nine regions of Chad's Sahel belt present Global Acute Malnutrition (GAM) and Severe Acute Malnutrition (SAM) rates above emergency thresholds, with five hovering around 20% (Batha, Kanem, Hadjer Lamis, Bahr El Ghazal, Wadi Fira). The capital city N'djamena and the region of Guera are considered critical, while Salamat, known as the bread-basket of Chad, records a GAM rate of 16%. This not only points to a difficult food security situation, but to the complex nature of malnutrition in Chad, where land access and access to basic health care, clean water, hygiene and appropriate infant feeding practices are a major challenge.

Coverage of SAM and Moderate Acute Malnutrition (MAM) treatment by DG ECHO partners increased significantly in 2012, both in terms of children treated (up to 150,000 expected) and the number of health districts supported (roughly 45% of functional health centers provide nutritional services, although the degree of outreach is dependent on the presence of an NGO partner). This scale-up is encouraging, although less than 50% of children have access to appropriate treatment, while effective prevention strategies are lacking and the involvement of government and development partners remains extremely weak.

Recurrent drought (2009/2010, 2011/2012), floods (2010) and epidemics (measles, meningitis, cholera) pose additional risks for a population with limited coping strategies. State services are largely ineffective with only partial coverage and insufficient human resources, particularly in the health sector.

Chad's recent history is characterized by widespread internal conflict resulting in displacement (98,000 Internally Displaced Persons (IDPs) and 83,000 returnees) and compounded by competition for limited resources, as well as the spill-over from conflicts in neighbouring Darfur (288,000 refugees), Central African Republic (56,000 refugees) and Libya (over 90,000 registered returns), the sum total of which contributes to the ongoing complex emergency in Chad affecting half a million conflict-related displaced persons, refugees and returnees.

2. HUMANITARIAN NEEDS

1) Affected people / potential beneficiaries

It is estimated that over 2.1 million people will need emergency and early recovery assistance in Chad in 2013:

- 1.2 million severely malnourished people affected by the 2011/2012 drought in the Sahel belt are still struggling to recover;
- Up to 460,000 children under 5 years of age suffering from malnutrition (160,000 MAM and 300,000 SAM expected);
- 443,000 conflict related refugees and returnees.

2) Description of most acute humanitarian needs

Affected population of the Sahel Belt

In 2012, 3.6 million people were considered food insecure across Chad following the results of the United Nations World Food Programme (WFP)/Ministry of Agriculture survey in December 2011. 2.2 million of these are in the Sahel regions, with 1.2 million of them severely food insecure and targeted for emergency assistance through a massive food-aid, cash and voucher response. The operation has stabilized the situation by maintaining the food security status of vulnerable segments of the population, but has done little to improve overall conditions and structural causes.

High GAM and SAM rates are expected to persist, particularly in the Sahel regions, given the multi-causal nature of malnutrition for which emergency interventions will

continue to be relevant. An estimated 460,000 children and 110,000 pregnant and lactating women will require treatment for acute malnutrition in Chad. Efforts to consolidate recent gains and raise the profile of malnutrition in Chad will be important to capitalize on the significant investments made in 2012.

The priority in humanitarian aid therefore needs to be given to improving coverage for the prevention and treatment of malnutrition, as well as giving access to adequate food, basic health care and water, sanitation, and hygiene promotion (WASH). In tandem, efforts to better understand the causes of cyclical and chronic food security and nutrition crises, including household livelihood and coping mechanisms, is required to improve still nascent food security and nutrition information and early warning systems.

Current forecasts for Chad predict above-average rainfall and a successful 2012/2013 harvest. This would go some way to relieving pressure on market prices, to which very poor and poor households are highly susceptible. Heavy rains and flooding could however disrupt agricultural production. The likely incursion of adult locust populations from Niger/Libya as well as local breeding, coupled with the government's incapacity to assess and prevent a possible infestation is also of growing concern; large-scale crop destruction remains possible.

Even if the price of local cereals temporarily stabilizes or decreases, prices still remain very high and rising food prices at the global level are expected to have an impact on poor households. In addition to pressure on international cereal prices, border closures and trade restrictions with neighbouring countries are likely to persist in 2013.

With the effective end of remittances and significant reduction of trade with Libya, the food security situation in the Northern regions of the Sahel is likely to remain tense given only marginal food production in this area (Kanem, Barh el Ghazal, Batha and Wadi Fira) and limited alternative income generation opportunities for poor households.

Sudanese & CAR refugees

Eastern Chad hosts 288,000 Sudanese refugees from Darfur (since 2004). Although tripartite discussions are on-going and UNHCR¹ is planning for 30,000 returnees for next year, this looks optimistic and the majority of these refugees are expected to remain in camps in 2013. Local integration is strongly opposed by the Chadian authorities. Basic services are provided by UNHCR and its partners across 12 refugee camps, with varying degrees of success. GAM rates continue to hover around 10%. The environmental impact of this population is significant in this delicate arid ecosystem. In 2010, 2011 and 2012 successive drought and floods added further stress to an already fragile environment.

Southern Chad hosts 56,000 Central African refugees. With continued instability in

¹ United Nations High Commissioner for Refugees (UNHCR)

Central African Republic, the majority of these refugees are likely to remain in Chad in 2013, although some localized, spontaneous and facilitated returns through a newly established tripartite commission are probable. Of late, DG ECHO's intervention has been limited to providing support to new arrivals since EU Delegation is funding an LRRD programme through FSTP (Food Security Thematic Programme).

With continued insecurity in Northern CAR and the Darfur regions of Sudan, refugees in the East and the South of the country will require continuous humanitarian attention.

IDPs / Returnees

Since 2005, 181,000 persons have been internally displaced in Eastern Chad. IDP returns were reported as early as 2008, but were largely seasonal. The normalization of relations with Sudan in 2010 and improved security conditions triggered a growing number of return movements. By 2012, up to 83,000 IDPs returned to their areas of origin, with many choosing to relocate from their villages of origin to denser population zones for safety reasons. Access to basic services remains a major constraint, leaving returnee communities vulnerable to external shocks. The sustainability of returns is also largely dependent on the security environment and positive relations with Sudan. Return movements are expected to continue in 2013, while a significant number of IDPs are likely to opt for integration in urbanized former IDP sites. Local authorities have begun the process of allocating land for this group.

At the national level, as in previous years, needs related to natural disasters and epidemic outbreaks are likely to emerge, including targeted prevention / preparedness activities.

3. HUMANITARIAN RESPONSE

1) National / local response and involvement

The government's response to humanitarian needs remains inadequate due to limited motivation, capacity and resources and alternative priorities. Statements of good intentions are insufficiently translated into concrete actions on the ground.

2) International Humanitarian Response

The consolidated appeal for funds (CAP) was revised in a Mid-Year Review process from USD 456,000,000 to USD 572,912,000 to meet the multi-sectorial humanitarian needs in Chad in 2012. Much of this increase can be attributed to WFP's response to the food and nutrition crisis. As of mid-year 2012, close to 60% of the CAP was financed, although unevenly. Needs for early recovery (mostly in support of IDP returns in Eastern Chad), health, education and protection remain mostly uncovered.

The main humanitarian donors in 2012 are the US with a total assistance programme in Chad of USD 177 million, the European Union (EUR 59,2 million), Canada (USD 14 million), CERF (USD 14 million), Japan (USD 13 million), Sweden (USD 11

million), Germany (USD 5 million), Australia (USD 5 million), France (USD 4 million), UK (USD 3.3 million). Enhanced financial support by OFDA and DFID in 2012 is expected to continue in 2013.

3) Constraints and DG ECHO response capacity

i) Insecurity and access: Chad is a landlocked country with bad road conditions limiting access during the rainy season. In 2012, security conditions remained acceptable in Chad but lawlessness and banditry still hampered humanitarian operations mainly in the East of the country. In the Western Sahel belt, security was not considered a major threat to access. Regional dynamics (Darfur, CAR, Libya, Nigeria, Niger) could have a destabilizing effect. This has the potential to limit humanitarian relief efforts, restricting access to beneficiaries and reducing the number of partners on the ground.

ii) Partners: In the East, the fact that the humanitarian community is overstretched and faces a dearth of experienced staff and rapid turnover has limited capacity to carry out context analysis, security management and networking. In the Sahel belt new partners arrived progressively in 2011 and 2012 resulting in minimum coverage to respond to humanitarian emergencies. This coverage remains insufficient for large-scale targeted humanitarian interventions, the implementation of initiatives linking relief and development (LRRD), Disaster Risk Reduction (DRR), and early recovery interventions.

4) Envisaged DG ECHO response and expected results of humanitarian aid interventions

DG ECHO intends to focus its response on providing multi-sectorial assistance to 2.1 million beneficiaries affected by different humanitarian crises in Chad. Given the situation on the ground, the main emphasis will be on targeting vulnerable population affected by successive droughts and which still struggle to recover and on assisting refugees. DG ECHO assistance to IDPs will limit itself to addressing the needs of the most vulnerable communities as part of the regular needs-based programming. This is part of an LRRD approach with the EU FSTP 2012/2013 which will support returnee communities. The main guiding principles for intervention are the following:

Affected people of the Sahel belt

Due to uncertainty in relation to the expected harvest and market prices in 2013, DG ECHO will need to adjust its programming according to how the situation develops.

If new external shocks lead to a knock-on crisis, support for emergency nutrition and food security operations (including General Food distributions and Blanket Feeding operations) will remain a priority.

If the situation stabilizes, and in the case of a strong harvest and the absence of locusts, DG ECHO should focus on high-impact early recovery operations that aim to recapitalize affected households and strengthen coping mechanisms.

High GAM and SAM rates will persist, given the multiple causes of malnutrition, and emergency interventions will continue to be relevant in 2013 while DG ECHO will progressively build capacities and awareness to ensure acute malnutrition does not remain the task of humanitarians only.

The strategic approach developed by DG ECHO for the Sahel countries of West Africa also applies to the Sahel belt of Chad:

Pillar 1: Pilot, innovative and replicable multi-sectorial actions to prevent, to mitigate and to treat malnutrition and under-malnutrition especially for children under 5 years and pregnant and lactating women. Operations to be funded under Pillar 1 will include:

- The identification and treatment of severely and moderately malnourished children and pilot actions to integrate the treatment of malnutrition within the minimum health package ;
- Measures to improve access to basic health care and WASH services (including behaviour changes);
- Measures to support/improve pipelines of essential food, health and nutrition products along with support to the development of better targeting methodologies;
- Measures to strengthen family resilience mechanisms through livelihood support, food and cash assistance and the promotion of seasonal social safety nets.

Pillar 2: Research and Advocacy

- Measures to improve the knowledge base and document the causes of chronic food insecurity and malnutrition as well as successful ways in which to address them. Studies aimed at improving opportunities for LRRD initiatives with the EU Delegation and other donors to provide medium and long-term funding. This will include activities in the framework of the AGIR² initiative.
- Greater advocacy toward the Chadian government and development actors to adequately prevent and treat malnutrition will remain necessary in 2013. Chadian authorities and development actors still link under-nutrition to food insecurity and drought when effective integration of nutritional services in the health care system, access to primary health care, mass screening, prevention schemes, clean water supply and education are other important prerequisites to improving malnutrition rates which need to be tackled at the same time.

Sudanese & CAR refugees

² AGIR Sahel (Alliance Globale pour l'Initiative Resilience) is a partnership on building resilience to food crises in the Sahel between a multitude of governments, humanitarian organisations, UN agencies and other organisations.

The priority will continue to be the provision of essential life-saving services to vulnerable populations with an emphasis on malnutrition, protection, WASH, self-reliance in the medium-term whenever possible along with support to facilitated returns as situation allows.

IDPs / Returnees

Development funds through the EU FSTP 2012/2013 are available to support returnee communities with a focus on LRRD. Monitoring of residual assistance and protection needs should continue, while integrating returnee communities into regular needs-based programming and building an information base to attract rather than substitute development actors. The extension of the Sahel Plan to the Eastern regions of the Sahel belt, a process already underway, should continue, so as to incorporate former IDPs.

At national level, effective coordination will be paramount in implementing quality operations in a principled, timely and cost effective way. DG ECHO will continue to promote effective and inclusive humanitarian coordination. Support to partners in terms of humanitarian access, by means of advocacy, logistics and transport will continue. Emphasis will also be placed on emergency preparedness, prevention and response to new displacement and epidemics.

Mainstreaming of disaster risk reduction, protection, gender remain an overarching guiding principle.

4. LRRD, COORDINATION AND TRANSITION

Close working relations with the EU Delegation have been maintained and further developed over the past two years. Joint missions and assessments have led to joint programming of 24 MEUR FSTP transition funding. Through these funds some current DG ECHO partners will be supported by the Delegation in 2013 both in Eastern Chad and in the Sahel belt. Progress on transition/LRRD issues is therefore encouraging, but the lack of government engagement is a serious limiting factor. Increased leadership by the UN system is necessary to help prioritize urgent humanitarian and transition issues.

Preparatory discussions with the EU delegation for the elaboration of Chad's National Indicative Programme (NIP) for the 11th European Development Fund (EDF) took place in mid-2012. Key considerations such as food security and safety nets, access to primary health care, integration of malnutrition within the minimum health package, etc. were suggested. Programming of the 11th EDF is delayed however given the absence of a national-level strategic development plan currently under elaboration and expected in October/November 2012.

5. OPERATIONAL AND FINANCIAL DETAILS

The provisions of the financing decision ECHO/WWD/BUD/2013/01000 and the general conditions of the Partnership Agreement with the European Commission shall take precedence over the provisions in this document.

5.1. Contacts

Operational Unit in charge: ECHO/B/2 - Central Africa, Sudan and South Sudan

Contact at HQ level

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5.2. Financial Information

Indicative allocation: EUR 37 million

1. Humanitarian crises: Humanitarian aid: 15 million euros - Food Aid: 0 euro
2. Natural Disasters: Humanitarian Aid: 13 million - Food Aid: 9 million

Total: Humanitarian aid: 28 million - Food Aid: 9 million

5.3. Proposal Assessment

Assessment round 1

- a) Description of the humanitarian aid interventions relating to this assessment round: Interested partners are invited to submit single forms for all interventions as described in section 3.4 of this HIP.
- b) Indicative amount to be allocated in this round of proposals: up to EUR 29 million (EUR 20 million from the humanitarian aid budget line and EUR 9 million from the food assistance budget line).
- c) Costs will be eligible from 01/01/2013.³
- d) The expected initial duration for the Action is up to 12 months.

³ The eligibility date of the Action is not linked to the date of receipt of the Single Form. It is either the eligibility date set in the Single form or the eligibility date of the HIP, what ever occurs latest.

- e) Potential partners: All DG ECHO Partners.
- f) Information to be provided: Single form
- g) Indicative date for receipt of the above requested information: by 10/12/2012⁴.
- h) Commonly used principles will be applied for the assessment of proposals, such as quality of needs assessment, relevance of intervention sectors, and knowledge of the country/region, and quality of the intervention logic in relation to the HIP and to the operational recommendations (currently under preparation).

Assessment round 2

- a) Description of the humanitarian aid interventions relating to this assessment round: Response to new emergencies
- b) Indicative amount to be allocated in this round of proposals: up to EUR 8 000 000.
- c) Costs will be eligible from 01/04/2013.
- d) The expected initial duration for the funded actions is up to 12 months.
- e) Potential partners: Partners already operating in the affected areas in order to meet the needs as quickly as possible (preferably and whenever possible by amending ongoing contracts).
- f) Information to be provided: amendment request or complete Single Form
- g) Indicative date for receipt of the above requested information: from 20/6/2013 onwards.
- h) Commonly used principles will be applied for the assessment of proposals, such as quality of needs assessment, knowledge of the country / region relevance of intervention sectors, and quality of the intervention logic in relation to the HIP and to the operational recommendations.

⁴ The Commission reserves the right to consider Single forms transmitted after this date, especially in case certain needs / priorities are not covered by the received Single forms.