



Situation Report

Growing humanitarian needs and underfunded humanitarian response



Photo: © UNFPA/Chad

Country:	Chad
Emergency type:	Conflict, Climate
Start Date of Crisis:	May 1, 2025
Date Issued:	July 14, 2025
Covering Period:	June 1, 2025 to June 30, 2025
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Key Figures



7,000,000

Total people affected¹



1,265,000

Women of reproductive age²



219,170

Estimated pregnant women²



1,196,800

People targeted with SRH services



388,300

People targeted with GBV programmes

Highlights

- Eastern Chad now hosts 867,999 Sudanese refugees and 306,865 Chadian returnees,³ which is placing heavy pressure on local resources. The competition over food, grazing land, water, fuel and jobs has resulted in

¹ [OCHA, Chad: Overview of the 2025 Humanitarian Needs and Response Plan, February 2025.](#)

² Estimated figures are based on the Minimum Initial Services Package (MISP) for Sexual and Reproductive Health in Humanitarian Settings calculator.

³ [IOM, Chad — Sudan Crisis Response: Situation of Returnees, May 2025.](#)

increasing instability and escalating inter-community conflicts, such as the one on 11 June 2025 at Oure Cassoni Refugee Camp's Kari Yari village (Ennedi East), which was caused by widespread food insecurity and increased demand for firewood. The insecurity is hindering humanitarian efforts, and a new dynamic partnership has been established between the Government of Chad and aid organizations to improve humanitarian access.

- Wadi Fira and Ennedi East provinces are grappling with a critical influx of over 80,543 new Sudanese refugees since mid-April 2025, driven by escalating violence in Sudan's Zamzam and Abou Shouk internally displaced persons (IDP) camps.⁴ This surge of refugees, arriving via Tine, Birak (Wadi Fira), and Oure Cassoni (Ennedi East), has exacerbated the already dire humanitarian situation.

Situation Overview

- Due to ongoing conflicts, Chad now hosts over 2,216,179 forcibly displaced people, representing nearly 10% of its total population.⁵ This includes an estimated 475,221 women of reproductive age and 64,693 pregnant women. This influx severely strains the healthcare system, leading to shortages of essential reproductive health supplies.
- Camps in the Lake, Eastern, and Southern provinces, where women and children comprise about 88% of the population, face significantly higher risks of gender-based violence (GBV) – including sexual violence, exploitation, and domestic abuse. Between April and June 2025, 75% of recorded cases of GBV survivors were forcibly displaced persons.
- Existing food shortages (IPC Phase 3/4), combined with limited access to resources, have disrupted agriculture and markets, causing price rises and income declines for both refugees and local residents.
- A meeting to review the humanitarian structure was hosted by the United Nations country humanitarian team as part of the final consultation phase on the humanitarian reform in Chad. The positioning and commitment to humanitarian policy, aligned with the Humanitarian Needs and Response Plan⁶ (formerly HNO/HRP) and the national development plan, are being established in Chad. UNFPA is strategically positioning itself as a lead agency under the protection sector within the NEXUS alongside development partners.
- Annual floods frequently affect the same communities in Chad, causing serious damage to livelihoods and impacting access to vital services. To ensure preparedness, Humanitarian Country Team members have started contingency planning to manage the expected 2025 flood crisis. OCHA shared an emergency response plan targeting roughly 800,000 people, including 184,000 women of reproductive age and 25,048 pregnant women.
- In mid-June 2025, World Health Organization (WHO) and other UN officials warned that Sudan's cholera epidemic—responsible for approximately 1,854 deaths—could spread into eastern Chad's refugee camps, especially near Adré and Tinè, which host around 300,000 people living in overcrowded, unsanitary conditions. Health authorities also confirmed cholera cases in El Geneina, West Darfur, raising fears of cross-border transmission. As of the end of June, Chad had not experienced any major outbreaks but UNFPA has pre-positioned dignity kits with essential hygiene supplies for pregnant and postpartum women in case the situation evolves. Although overall susceptibility is not higher, pregnant women face serious health risks from cholera, including miscarriage and premature birth due to dehydration.

⁴ UNHCR, June 17, 2025.

⁵ [UNHCR Chad. Forcibly Displaced Persons. June 2025.](#)

⁶ [OCHA. Chad: Overview of the 2025 Humanitarian Needs and Response Plan \(abridged version\). February 13, 2025.](#)

UNFPA Response

In Chad, UNFPA's priority is to meet the immediate needs of communities affected by various crises, including the Sudanese refugee crisis and its spillover effects, as well as other emergencies in Lake and South Provinces. UNFPA is committed to focusing on the most vulnerable populations, particularly women, girls, and adolescents.

During June 2025, UNFPA and implementing partners achieved the following results:

- **14 IARH kits were distributed to 13 service delivery points (mobile clinic facilities) in the Eastern, Southern, and Lake provinces, providing supplies and medicine to:**
 - Enable clean deliveries for 1,360 pregnant women without access to health facilities.
 - Manage sexually transmitted infections (STIs) and HIV for 214 individuals.
 - Support deliveries at health facilities for 6,600 women.
 - Enhance and improve the quality of care during childbirth for women in remote areas.
- **A total of 138 UNFPA-deployed humanitarian midwives provided SRH services to 43,602 individuals (95% being women) across the Eastern, Southern, and Lake Provinces. This includes:**
 - 15,830 women attended at least two antenatal consultations at UNFPA-supported health facilities.
 - 8,090 deliveries assisted.
 - 5,830 women attended postnatal consultations.
 - 8,446 women received family planning services, including 5,028 new users.
 - 607 obstetric complications were recorded – 486 were managed, 114 were referred, and 7 died.
 - 583 individuals were diagnosed with and treated for STIs.
- Following the Ennedi-Est crisis, UNFPA plans to provide immediate support for the Oure Cassoni camp health centre, including supplying reproductive health kits and deploying midwives, to ease the burden on the healthcare system due to the influx of refugees.
- 28 psychosocial workers were deployed to provide services through women and girls' safe spaces, reaching 7,468 people with GBV prevention and response services. In Wadi Fira-Iriba, nine safe spaces were established to support service delivery in the Tine transit sites and refugee camps.
- UNFPA also provided tents to UNHCR for protection screening in Oure Cassoni (Ennedi East); Première Urgences Internationales (PUI) and INTERSOS for reproductive health services; and the Danish Refugee Council (DRC), Action Against Hunger (ACF), and Humanity and Inclusion (HI) for operations at Athe dré Transit Centre and Aboutenge camps in Ouaddai Province.
- 42 awareness sessions on GBV, prevention of sexual exploitation and abuse (PSEA), and available services were conducted across seven refugee camps and two hospitals in Ouaddai Province. This was a joint effort where UNFPA and its partners – Handicap International, Red Cross of Chad, DRC, Association Tchadienne pour le Bien-Etre Familial (ASTBEF), Association pour la Promotion des Libertés Fondamentales au Tchad (APLFT), Hebrew Immigrant Aid Society (HIAS), and NIRVANA Organization for the Advancement of African Women and Youth – were able to reach 16,605 people (11,811 women and 4,794 men).
- UNFPA and its partner, Association des Femmes Juristes du Tchad (AFJT), responded to GBV cases in Eastern Chad, which consisted of 55% psychological abuse, 31% physical assaults, 6% rapes, 4% sexual assault, and 4% denial of resources. Additionally, 10 awareness sessions reached 2,349 people (1,469 women, 533 girls, and 272 men).

Results Snapshots



43,602

People reached with **SRH services**
95% female, 5% male



73

Health facilities supported







16,605

People reached with **GBV prevention, mitigation and response** activities
97% female, 3% male



24

Safe spaces for women and girls supported

	600	Non-food items (dignity kits) distributed to individuals
	14	Reproductive health kits provided to service delivery points to meet the needs of 34,987 people
	10	Youth spaces supported by UNFPA
	0	People reached with humanitarian cash and voucher assistance for GBV and SRH

Coordination Mechanisms



Gender-Based Violence:

- Two GBV Sub-Cluster meetings were held in Adré and Farchana (Ouaddai Province), bringing together 17 partners, including WHO, ACF, Jesuit Refugee Service, SOS Villages d'Enfants Tchad, Médecins Sans Frontières, and other organizations. Discussions focused on World Refugee Day celebrations and a community leaders' forum in Assoungba, initiated by UNHCR.
- GBV Sub-Cluster members conducted sensitization sessions reaching 5,119 people—primarily women and girls—to raise awareness about the causes and consequences of GBV.
- Individual support was provided to GBV survivors in Ouaddai Province. The cases included 36% physical assault, 26% rapes, 12% psychological violence, 12% denial of resources, 5% underage pregnancies, 4% sexual violence, and 4% forced or early marriage.

Sexual and Reproductive Health:

- UNFPA held a national SRH Working Group meeting to discuss the response of SRH partners to the influx of Sudanese refugees in Eastern Chad and the response in Lake Province, as well as gaps and locations where follow-up support is required.

Funding Status

UNFPA requires US\$27 million to deliver critical SRH and GBV services in Chad during 2025. The appeal includes \$15.2 million as part of the [2025 Humanitarian Response Plan](#) and \$12.5 million under the [2025 Regional Refugee Response Plan](#). However, as of June, only \$2,500,000 has been received, resulting in a staggering gap of \$25,2 million. Without an urgent and significant increase in support from donors, UNFPA will be unable to deliver the services needed, which is putting the lives and health of women and girls in Chad in jeopardy.

