

Country: Chad

Emergency type: Conflict, Climate

Start Date of Crisis: May 1, 2025

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Covering Period: May 1, 2025 to May 31, 2025

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## **Key Figures**



**7,000,000**Total people affected<sup>1</sup>



**1,265,000**Women of reproductive age<sup>2</sup>



**219,170**Estimated pregnant women<sup>2</sup>



**1,196,800**People targeted with SRH services



**388,300**People targeted with GBV programmes

#### **Highlights**

• Eastern Chad's humanitarian situation is dire, mainly due to ongoing conflict in Sudan, especially in Wadi Fira province. Since early 2025, over 56,000 Sudanese refugees have sought refuge in Chad, with 8,600 arriving in May

<sup>&</sup>lt;sup>1</sup> OCHA. Chad: Overview of the 2025 Humanitarian Needs and Response Plan, February 2025.

<sup>&</sup>lt;sup>2</sup> Estimated figures are based on the Minimum Initial Services Package (MISP) for Sexual and Reproductive Health in Humanitarian Settings calculator.



2025. This recent surge is attributed to intensified fighting in Sudan and an attack on the Zamzam internally displaced persons (IDP) camp. Women and children constitute the majority of those affected, reporting significant protection concerns, including family separation, trauma, gender-based violence (GBV), and severe food deprivation. The security situation in Darfur, a neighboring region, continues to worsen.

- Chad observed International Midwives' Day 2025 under the theme "Midwives: Critical in Every Crisis," acknowledging
  their vital role in providing sexual and reproductive, maternal, newborn, and adolescent health services amidst
  humanitarian crises. The celebration featured strong advocacy for increased investment in midwifery, and showcased
  success stories from humanitarian midwives and patients.
- US funding cuts are hindering the distribution of vital Inter-Agency Reproductive Health (IARH) kits and maternity supplies to support displaced populations in Lake Province. This impacts lifesaving sexual and reproductive health (SRH) services and threatens efforts to prevent maternal and child mortality among returnees, IDPs, and host communities. Mobile clinics, one-stop centers, obstetric complication management, and medical evacuations are affected. UNFPA's coordination role in the SRH Working Group, technical support, and partner capacity-building are also impacted.

#### Situation Overview

- As of May, Chad hosts 2,020,853 forcibly displaced persons [UNHCR]. Women and girls are disproportionately affected, facing increased barriers to services and a heightened risk of GBV, including sexual violence.
- Beginning in March 2025, the southern region of Chad experienced the onset of the rainy season. These rains, coupled
  with strong winds observed throughout March and early April, led to considerable damage to essential social services,
  notably impacting health infrastructure within the South-Ouest department.
- Rising water levels in Lake Chad have worsened concerns about access to Lake Province, especially in the Fouli Department, where several IDP areas are now inaccessible.
- The termination of US funding has led some INGOs to scale back their SRH and GBV response in Ouaddai and Lake Chad provinces. This reduction impedes their capacity to deliver vital antenatal and postpartum care for women, including critical treatments for acute complications occurring before, during, and after childbirth.

### **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 May 2025, UNFPA and implementing partners achieved the following results:

- 24 IARH kits were distributed to 73 service delivery points (mobile clinic facilities) in the Eastern, Southern, and Lake provinces, providing supplies and medicine to:
  - o Enable clean deliveries for 2,990 pregnant women without access to health facilities.
  - o Manage sexually transmitted infections (STIs) and HIV for 439 individuals.
  - o Support deliveries at health facilities for 24,444 women.
  - o 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 38,458 individuals (95% being women) across the Eastern, Southern, and Lake Provinces. This includes:
  - o 19,222 women attended at least two antenatal consultations at UNFPA-supported health facilities.
  - o 2,990 assisted deliveries.
  - o 4,055 women attended postnatal consultations.
  - o 8,001 women received family planning services, including 4,874 new users.
  - o 560 obstetric complications were recorded 256 were managed, 90 women were referred, and 10 died.
  - o 520 individuals were diagnosed with and treated for STIs.
- In the first quarter, among GBV cases registed at the UNFPA supported one-stop center and a local partner, for 40% were sexual violence, 32% physical violence, 14% denial of resources, 11% psychological violence, and 2% forced marriage. 91% of the survivors of sexual and physical violence supported by UNFPA and its partner received medical services, the remaining 9% did not require medical care.
- UNFPA interventions reached 2,515 people with awareness raising on SRH, GBV and family planning.
- To improve the visitation and community public awareness of the Centres Intégrés de Services Multisectoriels GBV (CISM) safe space in Baga Sola in Lake Chad Province, UNFPA, along with partners and women leaders, embarked on information and awareness campaigns, reaching over 1,810 women and girls.
- With the support of UNFPA, AfriYan, in partnership with Réseau des Jeunes pour le Développement et le Leadership au Tchad (RDJLT), conducted training on basic life skills and SRH for 150 student ambassadors in Bagasola, Nguelea, and Dar Es Salaam. The training aimed to strengthen the capacities of young people in reproductive health, and reduce cultural taboos and other barriers to girls' education. This activity is part of the AGAPE 2 project, implemented jointly by UNICEF, WFP, and UNFPA funded by the Government of Canada.

### **Results Snapshots**



38,458
People reached with SRH services
95% female, 5% male



73 **Health facilities** supported



26,258
People reached with GBV prevention, mitigation and response activities 97% female, 3% male



24
Safe spaces for women and girls supported

| NFI | 400 | Non-food items (dignity kits) distributed to individuals  |
|-----|-----|---|
|     | 42  | Reproductive health kits provided to service delivery points to meet the needs of 34,987 people |



| 10  | Youth spaces supported by UNFPA  |
|-----|--|
| 865 | People reached with humanitarian cash and voucher assistance for GBV and SRH |

#### **Coordination Mechanisms**

# Gender-Based Violence:

- As the lead agency for GBV Area of Responsibility (AoR), on a bi-monthly basis, UNFPA organizes GBV Sub-Working Group meetings in Adre/Farchana East, and on a monthly basis for Guereda East and Ndjamena. The purpose of these meetings is to undertake safety audit data collection and review, GBV service mapping updates, and follow up the action points on GBV case management.
- UNFPA conducted five security audits to identify GBV risks within displacement camps in Goz Beida, Adre, Farchana, Gore and BagaSola. In response to the results, joint awareness-raising sessions are being organized for the Defense and Security Forces with the Ministry of Women, the Civil-Military Coordination, and the GBV AoR partners.
- GBV AoR undertook information and data collection to gather further insights on the impact of the USAID funding termination on the GBV response.

# 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 \$15.9 million as part of the 2025 Humanitarian Response Plan and \$12.5 million under the 2025 Regional Refugee Response Plan. However, as of May, only \$916,705 has been received, resulting in a staggering gap of US\$26 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.

