







WEEKLY REPORT ON THE HUMANITARIAN AND HEALTH CRISIS IN EASTERN CHAD LINKED TO THE INFLUX OF REFUGEES AND RETURNEES FOLLOWING THE SUDANESE CONFLICT

Period from 05 to 11/02/2024

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Figure 1: Health situation in the provinces of Eastern Chad affected by the humanitarian and health crisis

HIGHLIGHTS

- Chad is the African country most affected by the armed conflict in Sudan, with 46.7% of Sudanese refugees hosted to date.
- As of 11 February 2024, 6,380 new refugees had been registered in the 4 eastern provinces in crisis, making a total of 553,150 Sudanese refugees registered (54.1% of whom are located in Adré, the epicentre of the crisis) and 144,105 Chadian returnees since the start of the conflict in Sudan.
- The refugees and returnees are spread across the provinces of Ouaddaï, Sila, Wadi-Fira and Ennedi East. A total of 5,616 injuries were recorded, including 167 new cases during this period, treated with the support of MSF-F, PUI, ICRC and the international emergency team deployed by the WHO.
- A total of 263 deaths were recorded, including 157 (59.7%) malnourished children, 34 maternal deaths, 22 casualties and 50 other deaths.
- For the period from April to November 2023, Penta3: 71.4% and Var1: 48.7% vaccination coverage in the crisis provinces.
- During SE06, no confirmed cases of AFP, measles, dengue fever, meningitis, yellow fever or cholera were recorded in the crisis-hit eastern provinces.

HUMANITARIAN PROFILE IN EASTERN CHAD ON 11 FEBRUARY 2024













> 2 million population affected Including the host population

1,130,655 people in need of humanitarian assistance Refugees, returnees and host populations

- 157 malnourished children (0)
- 34 maternal deaths (0)
- 22 injured (0)
- 50 other deaths (0)
 - No new

5 616 Injured

167 new

144 015 Chadian returnees

4.083 new

553 150 Sudanese refugees

• 6.380 new

HUMANITARIAN SITUATION

Since the outbreak of armed clashes in Sudan on 15 April 2023, Sudanese refugees and Chadian returnees from Darfur have been converging on more than 37 border entry points in eastern Chad in search of shelter. Conflict has displaced more than a million people in neighbouring countries, of whom more than 697,225 have sought refuge in Chad, with thousands of new arrivals every week. Some 5,531,50 Chadians living in Sudan have returned to their country without any means of subsistence. These refugees are living in numerous formal and informal camps in four provinces in eastern Chad (Ennedi East, Ouaddaï, Sila and Wadi-Fira). This devastating conflict is also accompanied by extreme hunger, affecting more than 6.2 million children and pregnant and breast-feeding women who have lost their means of subsistence. In the camps, access to essential health services is disrupted due to limited human resources and medicines. This complex humanitarian situation is exacerbated by epidemics of dengue fever and measles in the affected provinces, as well as acute gastroenteritis and suspicions of yellow fever and cholera.

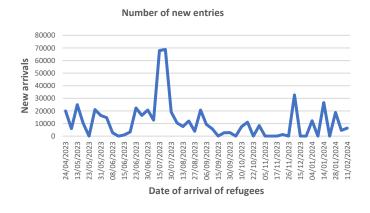


Figure 2: Weekly influx of Sudanese refugees into Chad

As of 11 February 2024, a total of 553,150 <u>Sudanese</u> refugees (**54.1% of whom were located in the**

<u>District d'Adré)</u> and 144,015 <u>Chadian returnees</u> were counted in Eastern Chad. They are spread across 11 health districts in 4 provinces (Ouaddai, Sila, Wadi-Fira and Ennedi East):

- Ouaddai (health districts of Adré, Abéché, Amleyouna and Hadjar Hadid) - the worst affected province with 68.8% of the displaced;
- Sila (health districts of Koukou Angarana, Goz-Beida, Abdi)
- -16.7% of refugees and returnees;
- <u>Wadi-Fira</u> (Guereda, Iriba and Tiné health districts)
 - 13.2% of refugees and returnees;
- o Ennedi East (Bahaï health district)
 - 1.3% of refugees and returnees;

At the start of the crisis, the Chadian government estimated that 910,000 refugees and returnees could arrive in eastern Chad by the end of the year, requiring humanitarian assistance.

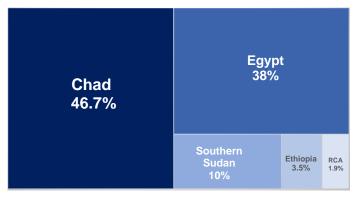


Figure 3: Breakdown of Sudanese refugees by country

Particular features of the crisis in Chad :

- Among the refugees: 58% women, 42% men, 19% children under 5;
- 88% of refugees and 93% of returnees are women and children;
- Malnutrition in children sometimes associated with measles, with a high mortality rate;
- Rape of young girls and women.

Thousands were seriously injured and traumatised, especially at the start of the crisis.

HEALTH SITUATION

As a result of the massive influx of refugees, Chad is facing numerous public health threats. It is therefore important to stress that epidemic threats will be increasingly observed in this context exacerbated by the humanitarian crisis. Forced to abandon their possessions and villages, displaced populations find themselves in hostile areas, which makes them vulnerable and encourages the development of diseases that were once under control, as well as other emerging diseases.

Measles: Since the beginning of 2024, 771 suspected cases of measles, including 129 IgM measles-positive cases, have been reported in 84 out of 158 districts (53.2% of districts). One death was recorded in the N'Djamena Centre health district in N'Djamena province. 12 health districts have reached the epidemic threshold, none of which are in crisis provinces. Between SE01 and SE06, 12 suspected cases were recorded in the eastern provinces in crisis, with no deaths reported. It should be noted that 843 suspected cases have been recorded since the start of the crisis, with 117 confirmed cases, including one death recorded in the health district of Koukou Angarana in the province of Sila. 11 health districts have reached the epidemic threshold in the eastern provinces in crisis since April 2023.

Dengue: From 03/08/2023 to SE06 2024, 12 health districts in four affected provinces recorded 2,482 suspected cases and 63 confirmed cases, with 01 death recorded in the health district of N'Djamena Sud. During SE06 2024, no new cases were confirmed in the crisis provinces. Since the start of the epidemic, 51 confirmed cases have been recorded in the Ouaddaï, Wadi-Fira and East Sila Ennedi provinces. No deaths have been reported in the four provinces affected by the crisis.

Yellow fever: A total of 121 suspected cases of yellow fever were notified nationally from S01 to SE06_2024, of which 28 samples** are awaiting analysis by the National Laboratory for Biosafety and Epidemics (LaBiEp) in N'Djamena. During the same period **40 Districts out of 158 (25.3%) ** reported at least one suspected case of yellow fever. During SE06_2024, 67 suspected cases including no deaths were recorded in the crisis provinces. 05 suspected cases were recorded between SE01 and SE06_2024 in the Eastern provinces. The last case was confirmed on 29/10/2022 in the health district of Guelo in the province of Mayo-Kebbi East.

AFP: At national level from SE01 to SE06_2024, 66 cases of AFP notified, including non-polio AFP, 28 contacts. During the SE06 of the year 2024 in the provinces in crisis, a suspect case was notified in the Health District of Abeche in the province of Ouaddaï. Since the start of the crisis in SE06_2024, 190 suspected cases, including 11 confirmed cases of AFP, have been recorded in the eastern provinces in crisis.

Table I: Cumulative epidemiological surveillance data from SE16_2023 to SE06_2024 for the four eastern provinces affected by the crisis

Provinces		Dengue fever	Measles	PFA	Yellow fever	Cholera	Meningitis
Ennedi	Confirmed cases	0	14	0	0	0	0
East	Deaths	0	0	0	0	0	0
Ouaddaï	Confirmed cases	33	41	9	0	0	0
	Deaths	0	0	0	0	0	0
Sila	Confirmed cases	6	22	2	0	0	0
	Deaths	0	1	0	0	0	0
Wadi-Fira	Confirmed cases	12	40	0	0	0	0
	Deaths	0	0	0	0	0	0
Total	Confirmed cases	51	117	11	0	0	0
	Deaths	0	1	0	0	0	0

^{**}SE05 data

ACTIVITIES OF THE HEALTH RESPONSE TO THE CRISIS SITUATION IN EASTERN CHAD

COORDINATION



The team, led by the Minister for Public Health and Prevention, Dr Abdelmadjid Abderahim, in the company of the Secretary of State, went to present to the Prime Minister, Head of the Transitional Government, Dr Succès Masra, the activities carried out in 2023 and the challenges and prospects for 2024. The discussion focused on a snapshot of the supply and demand for healthcare services, the mapping of technical and financial partners, the assessment of 2023 activities, the humanitarian and health crisis in eastern Chad, the main challenges facing the healthcare system, the main prospects for 2024 and the support expected from the Prime Minister, Head of Government.

Preparations for the mass campaign against measles and yellow fever in the 4 eastern provincial health delegations from 13 to 19 February 2024

Validation of sitrep N°28 by the SGI national team

SURVEILLANCE

Site visits by the Heads of Epidemiological Surveillance Units in the Eastern provinces, with support from the WHO



Reproductive health activities At the lycée2 site, 06/02/2024 credit photo: ALIMA

Vaccination coverage for the main antigens April-November 2023

Provinces	BCG	VPO1	VPO3	Penta1	Penta3	VAR1	VAA	VPI1	MenA	VPI2	VAR2	Td2+	Penta1/Penta3 ab rate	Penta1/VAR1	Categorisation
Dar Sila	226.9	208.2	166.8	207.5	165.7	168.1	176.8	175.2	176.4	70.8	12.3	46.3	20.2	19.0	CAT2
Abdi	164.5	166.7	146.1	166.0	145.2	139.0	141.1	142.2	141.1	4.6	1.3	36.2	12.5	16.3	CAT2
Goz Beida	349.5	311.4	266.4	316.2	267.8	251.5	269.5	271.5	267.9	162.6	19.1	79.7	15.3	20.5	CAT2
Koukou Angarana	106.2	105.8	70.8	99.9	67.3	94.3	98.1	83.4	98.8	4.2	10.6	14.9	32.6	5.6	CAT2
Tissi	175.6	149.5	75.3	142.0	71.1	98.8	98.7	105.4	99.3	21.3	12.2	19.2	49.9	30.4	CAT2
Ennedi East	136.4	125.5	103.2	124.0	103.4	104.3	104.3	103.2	104.3	65.9	3.8	22.7	16.6	15.9	CAT2
Amdjarass	186.7	156.8	100.9	152.4	101.6	103.3	104.5	100.9	103.3	51.5	11.8	20.8	33.4	32.2	CAT2
Bahai	112.4	113.8	111.5	113.8	111.4	105.1	104.1	111.5	105.0	72.2	0.0	22.2	2.1	7.6	CAT1
Kaoura	92.8	91.7	86.5	91.7	86.5	83.6	83.6	86.5	83.6	86.2	0.0	20.7	5.7	8.9	CAT1
Mourdi Djona	189.6	161.1	116.9	158.3	116.9	161.4	161.4	116.7	161.4	32.1	3.5	37.9	26.2	-1.9	CAT2
OUADDAI	132.1	130.6	120.0	131.2	119.0	121.4	119.6	118.9	122.9	68.3	1.4	28.6	9.3	7.5	CAT1
Abeche	138.7	137.6	131.5	137.2	130.8	145.0	131.6	128.5	128.4	95.8	0.6	26.5	4.7	-5.7	CAT1
Abougoudam	116.5	113.8	117.5	116.3	122.8	108.2	116.5	110.4	120.5	44.3	6.0	27.3	-5.6	6.9	Q_Data
Adré	167.1	162.9	137.0	162.0	139.6	135.4	139.4	140.2	139.5	82.2	0.0	36.4	13.8	16.4	CAT2
Amdam	142.8	139.3	122.2	141.2	123.9	116.5	118.9	123.4	117.1	102.4	0.0	31.7	12.2	17.5	CAT2
Hadjer-hadid	104.6	111.5	112.5	111.5	110.7	114.9	114.5	86.9	117.6	30.9	5.8	18.9	0.7	-3.1	CAT1
Chokoyane	233.6	241.8	227.0	239.5	224.6	218.9	218.9	221.3	218.9	57.5	0.0	28.6	6.2	8.6	CAT1
Amleyouna	55.2	53.8	51.2	56.5	51.3	50.1	50.1	53.5	50.0	13.1	1.8	23.4	9.2	11.3	CAT3
Amhitane	317.6	308.8	281.3	311.6	258.5	298.6	281.0	298.4	325.1	60.0	1.3	26.8	17.0	4.2	CAT2
WADI FIRA	102.4	107.6	99.5	108.1	101.2	95.9	96.5	102.3	98.3	44.2	0.5	24.0	6.3	11.2	CAT1
AMZOER	133.9	120.4	119.2	128.7	126.1	115.5	114.9	127.1	114.7	2.9	0.0	33.2	2.0	10.2	CAT1
ARADA	103.4	107.9	94.6	109.7	99.0	91.8	85.4	94.9	93.5	2.9	0.0	24.8	9.8	16.3	CAT1
BILTINE	83.4	99.1	86.3	98.7	87.2	88.6	90.5	88.3	90.2	77.4	0.0	22.9	11.7	10.2	CAT2
GUEREDA	108.4	106.7	99.7	105.7	102.0	99.0	100.4	103.1	100.0	42.6	0.6	28.5	3.6	6.3	CAT1
IRIBA	93.7	118.1	110.3	118.8	110.2	97.2	97.2	111.9	103.0	41.2	0.2	15.4	7.2	18.2	CAT1
Kapka (Matadjana)	97.7	86.7	84.9	86.6	85.1	74.1	74.3	89.7	86.6	40.6	5.6	19.9	1.7	14.4	CAT3
Tine	125.1	107.9	100.4	107.9	98.4	89.8	89.6	99.6	89.8	30.7	0.0	14.5	8.8	16.7	CAT1

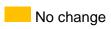
MONITORING RESPONSE PLAN INDICATORS

Indicators	Target	Value EW05_2024	Value EW 06_2024	Variation
Weekly situation reports (Sitrep) produced and distributed	24	28	29	•
Healthcare professionals of all categories identified, recruited or sub-contracted and deployed in the field	616	606	606	
Medical ambulances per refugee site purchased and deployed in the field	2	0	0	
Rate of change in fatalities among injured people	50%	0%	0%	
Percentage of alerts and signals notified and investigated within 24 hours of response activities being initiated	80%	40%	40%	
At least 3 active nutritional screening campaigns organised in the 4 provinces	3		-	-
Percentage of births attended by qualified personnel	80%	57.5%	100%	•

Percentage of health facilities treating refugees, returnees and the host population with an ICP card score of 75% or more	80%	40%	42%	•
Percentage of refugees, returnees and host population with access to at least 15 litres of water per person per day for their daily needs	80%	40%	39%	•
Percentage of refugees, returnees and host population with access to improved latrines.	80%	50%	52%	•
Number of risk communication and community engagement campaigns carried out for refugees, returnees and the host population in the 4 provinces	3%	-	-	
Vaccination coverage for all antigens in children aged 6 months to 14 years, women of childbearing age and pregnant women in refugee/returnee camps and host communities	90%	-	-	







Main achievements at SE06

Indicators	Host population	Refugees	Total
Reproductive health			
Number of CPN1	132	419	551
Number of CPN4	2	20	22
Number of maternal deaths	0	0	0
Cause of maternal death	0	0	0
Number of births attended by health personnel	14	52	66
Number of unassisted births	0	0	0
Number of caesarean sections	5		5
Number of women in family planning	17	37	54
Number of pregnant women referred	1	1	2
Number of cases of GBV identified	0	1	1
Number of cases of GBV treated	0	0	0
People who received psychological support	0	12	12
Children under 5 screened	508	3309	3817
Children under 5 screened (deaths)			0
Cases of uncomplicated SAM	47	48	95
Death from SAM No complication			0
Cases of SAM with complications referred	2	6	8
SAM deaths with complications referred			0
Cases of MAM for children under 5 years of age	102	376	478
Death of MAM children under 5 years of age			0
Malnutrition in pregnant women	30	175	205
Deaths of malnourished pregnant women	0	0	0

	Categ	gorisat	tion of	cases		Case cla	assificati	on	Types of injury			Patients admitte		Patients
	Adι	ılts	Chile	dren	Gree			Black Cases				d to the operati	Referred patients	admitted to hospital at
Date	М	F	н	F	ns	Yellow	Yellow Red	(Death)	Balls	Burns	Fractures	ng theatre		the end of the day
05/02/2024	29	10	2	0	38	3	0	0	2	0	0	22	0	1
06/02/2024	19	7	0	1	26	1	0	0	0	1	0	17	0	3
07/02/2024	14	5	0	1	19	0	1	0	0	1	1	9	0	1
08/02/2024	18	4	4	3	27	2	0	0	1	0	1	18	0	4
09/02/2024	17	9	1	0	22	5	0	0	2	0	2	17	0	4
10/02/2024	4	3	1	0	5	3	0	0	0	1	0	14	0	2
11/02/2024	3	8	3	1	9	6	0	0	0	0	0	2	0	2
Total	104	46	11	6	146	20	1	0	5	3	4	99	0	17

During SE06, a total of 167 new casualties were reported to Adré hospital by MSF-F and ALIMA.

Characteristics of injuries among refugees and returnees in Chad

- 0.0% of those injured were black (serious injury resulting in death);
- 0.6% of those injured were red (serious life-threatening injury);
- 12% of those injured were yellow (moderate severity injury);
- 87.4% of those injured were in the green (less serious injury to an ambulant);
- 3% of injuries were caused by firearms;
- 31.1% of those injured were women;
- 10.2% of those injured were children

Table: completeness of SE05/2024 data

Partners	Partners who submitted	Partners who did not send	Total	Percentage (%)
MSF-France, MSF-Switzerland, Alima, Concern Worldwide, IRC, UNHCR, WHO	YES		07	36.8%
MSF- Holland, HI, ICRC, CRF, CRT, ACF, PUI, ADES, UNFPA, UNICEF, ADESOH, MSF-E,		NO	12	63.2%
Total			19	100%

DIFFICULTIES ENCOUNTERED

- Limited financial resources in view of budgetary constraints;
- Lack of a health and humanitarian data management system for the crisis in the east of France
- Insufficient health human resources deployed in the field (surgeons, anaesthetists, paediatricians, gynaecologists and obstetricians, clinical psychologists, nutritionists, etc.);
- Shortage of essential medicines, medical materials and equipment;
- Lack of hospitals with technical facilities for rapid treatment of the injured, pregnant women and children with SAM;
- Insufficient logistical resources for rapid referral of patients (medical ambulances and helicopters);
- Weak coordination at the level of the health districts and their delegations affected by the crisis in the East.

NEXT STEPS

- Set up a mechanism to manage health and humanitarian data on the crisis in the East at all levels:
- Review and share the national health response plan for the humanitarian crisis in the east of the country;
- Continue to lobby donors to mobilise resources;
- Deploy or relocate the human resources required in the affected eastern provinces;
- Pre-position medicines and inputs in the intervention zones;
- Strengthen monitoring in terms of the completeness and timeliness of partners' activity data.

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