

# CHAD



⊕ ICRC delegation + ICRC office ▽ ICRC-supported physical rehabilitation project

## KEY RESULTS/CONSTRAINTS IN 2016

- ▶ People affected by the conflict in the Lake Chad region coped with their situation with ICRC-supplied essential items and shelter materials. Some restarted their food production activities with seed, tools and other ICRC material support.
- ▶ Detainees had better access to food, water and health services as the ICRC provided support to detaining authorities. Dialogue with some authorities enabled the ICRC to gain full access to people in three places of detention.
- ▶ Members of families separated by armed conflict and other situations of violence reconnected via the Movement's family-links services. Unaccompanied minors and vulnerable adults rejoined their relatives, in Chad and elsewhere.
- ▶ The authorities and weapon bearers and the ICRC continued to engage in dialogue. They discussed, *inter alia*, the protection of people not or no longer taking part in hostilities and compliance with IHL and other applicable norms.
- ▶ Local physical rehabilitation professionals strengthened their ability to assist disabled people, with the help of ICRC training and supplies. As planned, the ICRC withdrew its support for the sector at the end of the year.
- ▶ Despite various internal problems, the Red Cross of Chad continued to assist people in need. It strengthened its emergency-response, family-links and communication capacities with ICRC support.

## EXPENDITURE IN KCHF

Protection	1,701
Assistance	4,879
Prevention	1,058
Cooperation with National Societies	764
General	42
<b>Total</b>	<b>8,444</b>
<i>Of which: Overheads</i>	<i>515</i>

## IMPLEMENTATION RATE

Expenditure/yearly budget	94%
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## PERSONNEL

Mobile staff	14
Resident staff (daily workers not included)	66

The ICRC has worked in Chad since 1978. It seeks to protect and assist people affected by armed conflict in the region, monitors the treatment and living conditions of detainees, restores links between separated family members, including refugees from neighbouring countries, and supports physical rehabilitation services for amputees countrywide. It also pursues longstanding programmes to promote IHL among the authorities, armed forces and members of civil society. The ICRC supports the Red Cross of Chad.

## YEARLY RESULT

Level of achievement of ICRC yearly objectives/plans of action

**HIGH**

PROTECTION	Total
<b>CIVILIANS (residents, IDPs, returnees, etc.)</b>	
<b>Restoring family links</b>	
RCMs collected	404
RCMs distributed	592
Phone calls facilitated between family members	9,851
Tracing cases closed positively (subject located or fate established)	170
People reunited with their families	57
<i>of whom unaccompanied minors/separated children</i>	53
<b>PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)</b>	
<b>ICRC visits</b>	
Detainees visited	5,695
Detainees visited and monitored individually	523
Number of visits carried out	72
Number of places of detention visited	13
<b>Restoring family links</b>	
RCMs collected	632
RCMs distributed	314
Phone calls made to families to inform them of the whereabouts of a detained relative	391

ASSISTANCE	2016 Targets (up to)	Achieved
<b>CIVILIANS (residents, IDPs, returnees, etc.)</b>		
<b>Economic security (in some cases provided within a protection or cooperation programme)</b>		
Food commodities	Beneficiaries	31,800
Essential household items	Beneficiaries	8,426
Productive inputs	Beneficiaries	40,746
<b>Water and habitat (in some cases provided within a protection or cooperation programme)</b>		
Water and habitat activities	Beneficiaries	20,000
<b>WOUNDED AND SICK</b>		
<b>Physical rehabilitation</b>		
Projects supported	Projects	2
Patients receiving services	Patients	400
		2
		4,661

## CONTEXT

As the conflict in the Lake Chad region intensified, Chad and its neighbours – Cameroon, Niger and Nigeria – continued to send troops to combat the armed group that calls itself Islamic State’s West Africa Province (also known as Jama’atu Ahlis Sunna Lidda’awati wal-Jihad or Boko Haram). The spillover of insecurity and incursions of this armed group into Chadian territory displaced people and affected their access to basic services. Some 250,000 people were, reportedly, dependent on humanitarian assistance. Poor security conditions and logistical constraints hindered the delivery of aid.

The situation in the Central African Republic (hereafter CAR) sent refugees into the country, while violence in Sudan’s Darfur region kept other refugees in Chad. Already-scarce resources and services were strained. Chad closed its borders with the CAR and Nigeria to prevent incursions by armed groups; the closure of the Chad-Nigeria border exacerbated the economic difficulties in the Lake Chad region.

The headquarters of the multinational force responding to the conflict in the Lake Chad region, and that of Barkhane, a French military operation against armed groups in the Sahel region, were both still based in the capital, N’Djamena. Chadian troops remained in Mali; joint Chadian-Sudanese forces continued to be stationed along their common border.

Occasional communal violence, banditry and social unrest over economic frustrations persisted. Political tensions increased after the president was re-elected for the fifth time. Mines and explosive remnants of war (ERW) from past conflicts endangered people in the sparsely populated north and, to a lesser extent, the east.

## ICRC ACTION AND RESULTS

In 2016, the ICRC undertook activities to help protect and assist people not or no longer taking part in hostilities, but these were sometimes hampered by poor security conditions. The situation in the Lake Chad region called for a budget extension<sup>1</sup> (see also *Niger, Nigeria* and *Yaoundé*), which – along with the opening of an office in Baga Sola and sustained cooperation with the Red Cross of Chad – enabled the ICRC to aid conflict-affected people. IDPs coped with their situation using ICRC-supplied shelter materials and household essentials. Farming households restarted their food production activities with the help of seed and tools, and food, to get them through the lean season; and pastoralist households had healthier livestock after the ICRC vaccinated and treated their animals. National Society projects carried out with ICRC support broadened people’s access to water and sanitation facilities.

The ICRC continued to lend support for prison and national authorities to help them address systemic challenges in prisons. Sustained dialogue with such actors helped the ICRC gain full access to people in three places of detention. Detainees availed themselves of health services from ICRC-trained prison health staff; those who were malnourished were given ICRC-supplied therapeutic food and supplementary rations. Some prison infirmaries remained functional thanks to ICRC material support. Hygiene kits and infrastructural upgrades mitigated detainees’ health risks. The ICRC also monitored the situation of 300 alleged

former combatants, and their relatives, who had surrendered to the Chadian authorities between July and December.

IDPs, refugees and returnees contacted their relatives through the Movement’s family-links services. Despite persisting needs, such services for Sudanese refugees from Darfur were limited, owing to the slow pace of restoring ICRC activities in Sudan after the suspension of these activities in 2014 (see *Sudan*). People filed tracing requests for missing relatives; the fate and whereabouts of some people were relayed to their families. Some separated and unaccompanied children, and vulnerable adults, were reunited with their families, in Chad or elsewhere.

The ICRC continued to work with local actors and to help them build their capacity to deliver physical rehabilitation services to disabled people. It also continued to encourage the health and social affairs ministries to increase investment in these services. The ICRC supplied two physical rehabilitation centres with prosthetic and orthotic components to benefit, primarily, people affected by the consequences of past conflicts. As planned, it withdrew its support for the sector at the end of the year.

The ICRC strove to foster understanding of and respect for humanitarian principles, and to facilitate the Movement’s activities. Discussions with the authorities and the armed and security forces – including the multinational and French military forces – focused on protecting people not or no longer taking part in hostilities and on compliance with IHL and other applicable norms. Troops stationed in the Lake Chad region, along the border with the CAR, and those bound for peacekeeping missions in Mali, attended IHL sessions conducted by the ICRC.

Despite internal managerial and structural challenges, the National Society provided assistance to people in need. With Movement support, it bolstered its emergency-response, first-aid, family-links and communication capacities. Movement partners met regularly to coordinate activities and avoid duplication of effort.

## CIVILIANS

The ICRC continued to monitor the situation of IDPs, returnees, refugees and residents of host communities affected by the conflict in the Lake Chad region. The opening of its office in Baga Sola enhanced its ability to do so. It also monitored, to some extent, the situation of people who had fled other situations of violence in neighbouring countries such as the CAR and Sudan.

Certain incidents – related to the conduct of hostilities or to arrests and detention – were documented and brought up during confidential representations to authorities and weapon bearers. These representations served as formal reminders to respect IHL and other applicable norms, particularly those concerning the protection due to people not or no longer taking part in hostilities.

### Members of separated families stay in touch through the Movement’s family-links services

The National Society expanded its family-links and emergency-response capacities with ICRC material, financial and technical support and training.

Refugees, including unaccompanied or separated minors, from northern Cameroon, southern Niger, and Nigeria restored and maintained contact with relatives through phone calls or RCMs. These services were offered at a family-links site established by

1. For more information on the budget extension appeal, please see: [https://xnet.ext.icrc.org/applic/extranet/rexdonors.nsf/0/C22344A334FA4D99C12580270022ADD7/\\$File/BEA\\_2016\\_LakeChad\\_347\\_Final.pdf](https://xnet.ext.icrc.org/applic/extranet/rexdonors.nsf/0/C22344A334FA4D99C12580270022ADD7/$File/BEA_2016_LakeChad_347_Final.pdf)

the National Society and the ICRC at the main refugee camp on the Chadian shores of Lake Chad. Refugees from the CAR and returnees availed themselves of similar services at eight sites, in the south and in N'Djamena. Owing to the ICRC's limited activities in Sudan (see *ICRC action and results*), family-links services for Sudanese refugees from Darfur continued at a slow pace.

In all, 57 unaccompanied children and vulnerable adults were reunited with their families in Cameroon, the CAR, Chad, the Democratic Republic of the Congo, Mali and Nigeria. The ICRC conducted follow-up visits to ensure the children's well-being. Some people filed tracing requests for missing relatives; the fate and whereabouts of 170 people, most of whom were registered by another ICRC delegation, were ascertained and relayed to their families.

### **Farming households restart their food production activities**

The ICRC, in cooperation with the National Society and in coordination with other humanitarian agencies, carried out activities geared toward helping IDPs and residents of host communities affected by the conflict in the Lake Chad region.

Over 5,000 farming households (around 30,300 people total) – including some headed by women – were able to restart their food production activities with the help of ICRC-supplied seed, vegetables and/or agricultural tools. Assessments showed that households that received such support were able to meet their nutritional needs for three to five months by consuming what they had cultivated. They also received food to get them through the lean season, and fortified cereal to help prevent malnutrition among children and pregnant or lactating women. Some 8,400 people (1,400 households) coped with their situation with the help of ICRC-supplied shelter material and household essentials.

Over 2,400 pastoralist households (around 14,400 people) had healthier and more productive livestock after their animals were vaccinated and/or treated by the ICRC. In addition, 20 animal health workers – with support from the livestock ministry and the ICRC – were trained in animal disease prevention and treatment techniques to help improve the health of their communities' livestock. They also received veterinary kits containing drugs and tools from the ICRC.

IDPs in two camps near Bol, in the Lac region, benefited from ICRC-supported National Society projects, namely, the construction of two boreholes and ten latrines. These helped improve their access to potable water and reduce their risk of contracting diseases. Similar ICRC projects – the construction of water points and latrines – were delayed owing to logistical and other constraints, and remained ongoing at the end of the reporting period.

### **PEOPLE DEPRIVED OF THEIR FREEDOM**

More people were arrested as the conflict in the Lake Chad region intensified, putting additional pressure on the detention system and adversely affecting the living conditions of inmates. The ICRC continued to seek access to all detainees within its purview; its efforts enabled it to gain full access to detainees in three security and military facilities.

Nearly 5,700 detainees in 13 detention facilities – including places of temporary detention – were visited by ICRC delegates, in accordance with the organization's standard procedures. ICRC delegates monitored detainees' treatment, including respect for judicial guarantees, and their living conditions, paying particular attention to people held for security reasons and detainees with specific

needs, such as women, minors and foreigners. They shared their findings and recommendations confidentially with the relevant authorities (see also *Actors of influence*).

Some families learnt the whereabouts of their detained relatives from notices furnished by detaining authorities to the ICRC. Detainees in some facilities contacted their relatives via the Movement's family-links services. At the request of foreign inmates, the ICRC notified their consulates, embassies and/or the UNHCR of their detention.

The ICRC closely monitored the situation of alleged former combatants and their relatives, including women and children – about 1,000 people in all (see *Action and results*). It also provided them with family-links services.

### **Detainees receive better health services from prison health staff**

The authorities' efforts to improve the management of food supply in places of detention were hampered by a lack of financial resources. The ICRC monitored the health and nutritional status of detainees in six prisons – including the Bol prison and the remote Koro Toro high-security prison – and provided support as necessary. Some 2,100 malnourished detainees improved their health with the help of therapeutic food and/or supplementary rations.

ICRC-provided medicines and equipment helped the dispensaries in all six prisons to continue functioning. Detainees in three prisons benefited from medical screening upon their entry to prison, and from regular inspection of their cells by medical personnel. In some prisons, detainees availed themselves of HIV testing and counselling, organized by the national HIV/AIDS-control programme with ICRC support. District focal points provided, and supervised, treatment for detainees with HIV and TB. In one prison without health staff, the ICRC monitored potential health risks while basic health-care services were provided by detainees. Four detainees requiring urgent medical attention were taken to hospital after the ICRC interceded on their behalf with the justice ministry.

Prison and health authorities participated in ICRC courses and workshops on health and nutrition in places of detention (see also *Abidjan*). With ICRC encouragement, some district health authorities included prison clinics in their list of primary-health-care clinics to supervise. Prison staff strengthened their ability to manage food stocks and provide basic medical assistance for detainees; they did so through ICRC training sessions and courses, including a refresher course on national treatment protocols for such common diseases as malaria, TB and respiratory infections.

### **Detainees in some prisons have better living conditions following infrastructural upgrades**

Detainees in three prisons attended ICRC hygiene-promotion sessions. Around 3,700 of them – and prison staff – received hygiene and cleaning items from the ICRC. Such activities helped them reduce their exposure to health risks. Some detainees' living conditions improved after the ICRC renovated prison infrastructure. About 700 detainees in the Koro Toro prison had access to potable water following repairs to boreholes; roughly 530 in the Kelo prison benefited from improved food preparation thanks to the installation of energy-saving ovens; and approximately 300 in the Abéché prison benefited from upgraded health facilities.

### **WOUNDED AND SICK**

The ICRC, with the help of the National Society and other relevant actors, raised awareness of the need to respect and protect medical

personnel and infrastructure. Twenty-four medical professionals and students, from Chad and other French-speaking African countries, strengthen their ability to treat wounded people through a war surgery course, held in N'Djamena and organized by the ICRC with the help of a Chadian academic institution.

### **Disabled people receive physical rehabilitation services**

Some 4,660 disabled persons, including 36 victims of mines or ERW, were treated, free of charge, at two ICRC-supported physical rehabilitation centres – the Centre d'appareillage et de rééducation de Kabalaye (CARK) in N'Djamena and the Maison Notre-Dame de la Paix in Moundou. Most of these people were disabled as a consequence of past conflicts and had received treatment at these centres before. They improved their mobility with the help of wheelchairs, crutches, canes and prosthetic and orthotic devices made from ICRC-supplied components. Some disabled people participated in sporting activities, organized by the national Paralympic committee and the ICRC, which facilitated their social reintegration.

During the reporting period and over the past few years, the ICRC worked with local actors and helped them build their capacity to deliver suitable physical rehabilitation services to disabled people, though this resulted in limited success with the CARK. With the ICRC's help, a physiotherapist continued to upgrade his/her qualifications by attending a three-year course in Benin, while staff at the supported centres enhanced the quality of their services through training sessions. In parallel, the health and social affairs ministries were encouraged to increase their investment in the physical rehabilitation sector. Local stakeholders and international experts drafted a national plan to address the physical rehabilitation needs in the country; the draft was still awaiting the health ministry's approval.

As planned, the ICRC withdrew its support for physical rehabilitation services in Chad at the end of 2016. Handicap International was set to follow up and provide support for the physical rehabilitation authorities who had been receiving ICRC assistance.

### **ACTORS OF INFLUENCE**

Given the situation in the Lake Chad region (see *Context*), and Chad's political and military influence in the region, the ICRC sought to maintain regular and constructive dialogue with the authorities, armed and security forces – including members of the multinational force and Barkhane – and key members of civil society. The aim was twofold: to foster respect for IHL and other applicable norms, and to facilitate the Movement's activities.

### **Armed and security forces learn more about IHL and other applicable norms**

Some 150 members of the Chadian armed forces, under the command of either the Chadian army deployed in the Lac region or the multinational joint task force, learnt more about IHL and other applicable norms at briefings. Other Chadian army officers and troops – based on the border with the CAR, bound for peace-keeping missions in Mali, or attached to the presidential guard – attended similar sessions, some of which were organized jointly with the military's IHL focal points.

During an ICRC training session, 46 officers from the headquarters of the multinational joint task force learnt more about the applicability of IHL to their operations; a high-ranking military officer and legal adviser participated in a round-table on the same subject.

Some 100 members of an elite police force in charge of security in N'Djamena learnt more about internationally recognized standards for law enforcement during dissemination sessions and briefings, including some held before the presidential elections.

Armed and security forces stationed in northern Chad – in Borkou and Tibesti – learnt about the ICRC and the Movement during dissemination sessions.

### **Civil society figures further their understanding of the Movement**

Press releases and reference materials on the ICRC website, and updated information on the ICRC's family-links website ([familylinks.icrc.org](http://familylinks.icrc.org)), helped stimulate public interest in humanitarian affairs. Events organized jointly with the National Society to mark World Red Cross and Red Crescent Day (8 May) also helped promote the Movement.

Members of the media, religious and traditional leaders, and students from areas prone to violent protests increased their understanding of the National Society and the ICRC, and about their activities, during dissemination sessions that were sometimes combined with first-aid training. These events covered other subjects, such as: the proper use of the emblems protected under IHL; points of correspondence between IHL and Islamic law; compliance with IHL; and protection for people not or no longer taking part in hostilities, including detainees, journalists, and medical personnel.

During meetings with the ICRC, the pertinent authorities were encouraged to: ratify and accede to weapon-related IHL treaties, such as the Convention on Certain Conventional Weapons; bring detention conditions in line with internationally recognized standards and adopt a revised penal code; enact legislation on the rights of disabled people (see *Wounded and sick*) and on the emblems protected under IHL; and incorporate provisions of the Arms Trade Treaty in domestic legislation.

### **RED CROSS AND RED CRESCENT MOVEMENT**

Despite internal problems – managerial and structural – the National Society remained an important partner of the ICRC in working with the authorities and other aid agencies to assist people in need (see *Civilians*).

It bolstered its managerial and operational capacities – particularly in emergency response, first aid, family-links services and public communication – with financial, material and technical support and training from the ICRC and other Movement partners. With such help, it opened a branch in Baga Sola and constructed an office in Bol, covering the Lac region, to improve its access to people affected by the conflict in the Lake Chad region; a new branch in Bardai enabled it to respond to humanitarian needs in northern Chad. It worked to ensure the safety of its staff and volunteers, for example, by participating in ICRC-organized training on the Safer Access Framework and by developing contingency plans.

ICRC-trained volunteers, equipped with first-aid kits, tended to victims of road accidents and casualties of conflict and other violence. In northern Chad, the National Society continued its fumigation campaign against scorpions, which are a major problem in the region.

Movement partners met regularly to coordinate their activities and avoid duplication of effort.

MAIN FIGURES AND INDICATORS: PROTECTION		Total			
<b>CIVILIANS (residents, IDPs, returnees, etc.)</b>					
<b>RCMs and other means of family contact</b>			UAMs/SC		
RCMs collected		404	67		
RCMs distributed		592	15		
Phone calls facilitated between family members		9,851			
<b>Reunifications, transfers and repatriations</b>					
People reunited with their families		57			
	<i>including people registered by another delegation</i>	4			
People transferred or repatriated		1			
<b>Tracing requests, including cases of missing persons</b>			Women	Girls	Boys
People for whom a tracing request was newly registered		181	31	45	52
	<i>including people for whom tracing requests were registered by another delegation</i>	92			
Tracing cases closed positively (subject located or fate established)		170			
	<i>including people for whom tracing requests were registered by another delegation</i>	139			
Tracing cases still being handled at the end of the reporting period (people)		840	177	178	163
	<i>including people for whom tracing requests were registered by another delegation</i>	546			
<b>Unaccompanied minors (UAMs)/separated children (SC), including demobilized child soldiers</b>			Girls		Demobilized children
UAMs/SC newly registered by the ICRC/National Society		82	39		3
UAMs/SC reunited with their families by the ICRC/National Society		53	23		1
	<i>including UAMs/SC registered by another delegation</i>	3			
UAM/SC cases still being handled by the ICRC/National Society at the end of the reporting period		218	77		5
<b>PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)</b>					
<b>ICRC visits</b>			Women	Minors	
Detainees visited		5,695	91	112	
			Women	Girls	Boys
Detainees visited and monitored individually		523	15	1	18
Detainees newly registered		353	15	1	13
Number of visits carried out		72			
Number of places of detention visited		13			
<b>RCMs and other means of family contact</b>					
RCMs collected		632			
RCMs distributed		314			
Phone calls made to families to inform them of the whereabouts of a detained relative		391			
People to whom a detention attestation was issued		3			

MAIN FIGURES AND INDICATORS: ASSISTANCE		Total	Women	Children
<b>CIVILIANS (residents, IDPs, returnees, etc.)</b>				
<b>Economic security (in some cases provided within a protection or cooperation programme)</b>				
Food commodities	Beneficiaries	30,312	12,121	10,608
	<i>of whom IDPs</i>	29,112	11,641	10,188
Essential household items	Beneficiaries	8,426	3,443	2,861
	<i>of whom IDPs</i>	8,022	3,216	2,797
Productive inputs	Beneficiaries	40,746	15,338	12,598
	<i>of whom IDPs</i>	34,569	13,365	11,315
<b>PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)</b>				
<b>Economic security (in some cases provided within a protection programme)</b>				
Essential household items	Beneficiaries	2,205	18	16
<b>Water and habitat (in some cases provided within a protection or cooperation programme)</b>				
Water and habitat activities	Beneficiaries	3,700	74	37
<b>Health</b>				
Visits carried out by health staff		10		
Places of detention visited by health staff	Structures	6		
Health facilities supported in places of detention visited by health staff	Structures	6		
<b>WOUNDED AND SICK</b>				
<b>Physical rehabilitation</b>				
Projects supported	Projects	2		
Patients receiving services	Patients	4,661	971	1,672
New patients fitted with prostheses	Patients	62	12	2
Prostheses delivered	Units	236	36	12
	<i>of which for victims of mines or explosive remnants of war</i>	36	8	1
New patients fitted with orthoses	Patients	117	18	70
Orthoses delivered	Units	347	53	217
Patients receiving physiotherapy	Patients	3,491	726	1,248
Walking aids delivered	Units	758	109	106
Wheelchairs or tricycles delivered	Units	65	9	5