

Report No. 103560-TD

Republic of Chad

Shaping Adaptive Safety Nets to Address Vulnerability

April 5, 2016

Social Protection & Labor
Africa Region



Document of the World Bank

CURRENCY EQUIVALENT
Currency unit = CFA Franc (CFAF)

Exchange rate as of June 2015
1,000 CFAF = € 1.52 and US\$1.71

FISCAL YEAR
January 1 – December 31

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Abbreviations and Acronyms

AAH	Action Against Hunger
ACTED	Agency for Technical Cooperation and Development
AfDB	African Development Bank
ASP	Adaptive Social Protection
BEG	Bahr el Gazal
BELACD	Diocesan Bureau for Development (<i>Bureau de Liaison d'Actions Caritatives et de Développement</i>)
CARE	Cooperative for Assistance and Relief Everywhere
CELIAF	Women's Associations Liaison Unit (<i>Cellule de liaison et d'information des associations féminines du Tchad</i>)
CFAF	Franc of the African Financial Community
CRS	Catholic Relief Services
CSAI	<i>Conseil supérieur pour les affaires musulmanes</i> (High Council on Islamic Affairs)
DFID	United Kingdom Department for International Development
DP	Development Partners
ECOSIT	Household Consumption and Informal Sector Survey (<i>Enquête sur la consommation et le secteur informel au Tchad</i>)
ENASS	National School for Health and Social Workers (<i>Ecole National des Agents Sanitaires et Sociaux</i>)
ENSA	National Survey for Food Security (<i>Enquête nationale de sécurité alimentaire</i>)
EU	European Union
FAO	United Nations Food and Agriculture Organization
FEWSNET	Famine Early Warning System Network
GAM	Global Acute Malnutrition
GDP	Gross Domestic Product
GRN	Natural Resources Management (<i>Gestion des ressources naturelles</i>)
HEA	Household Economic Assessment
HHH	Head of Household
HIV	Human Immunodeficiency Virus
ICT	Information and Communication Technologies
ID	Identification
IFAD	International Fund for Agriculture Development
INSEED	National Statistics Institute for Economic and Demographic Studies (<i>Institut National de la Statistique des Etudes Economiques et Démographiques</i>)
LIPW	Labor Intensive Public Works
MICS	Multiple Indicator Cluster Survey
MINAS	Ministry of Social Action and National Solidarity (<i>Ministère de l'action social et de la solidarité nationale</i>)
NGO	Non-Governmental Organization
NSPS	National Social Protection Strategy
OCHA	Office for the Coordination of Humanitarian Affairs
ONASA	National Food Security Office (<i>Office national de sécurité alimentaire</i>)
ONDR	National Rural Development Office (<i>Office national de développement rural</i>)
OVC	Orphans and Vulnerable Children
OXFAM	Oxford Committee for Famine Relief
PADL	Local Development Support Program (<i>Programme d'appui au développement local</i>)

PARSAT	Chad Agricultural Systems Enhancement Project (<i>Projet d'amélioration de la résilience des systèmes agricoles au Tchad</i>)
PLHA	Persons Living with HIV Aids
PMT	Proxy Means Test
PRESIBALT	Rehabilitation and Reinforcement of Resilience of Lake Chad Basin (<i>Programme de réhabilitation et renforcement de la résilience du bassin du Lac Tchad</i>)
PROADEL	Local Development Support Project (<i>Projet d'appui au développement local</i>)
PTSA	Thematic Food Security Plan (<i>Plan thématique de sécurité alimentaire</i>)
RECEC	Savings and Loans Institutions Network (<i>Réseau des caisses d'épargne et de crédit</i>)
RGPH	Population and Housing General Census (<i>Recensement général de la population et de l'habitat</i>)
SISAAP	National Food Security Information and Early Warning System (<i>Système d'information sur la sécurité alimentaire et l'alerte précoce</i>)
SMART	Standardized Monitoring and Assessment of Relief and Transitions
SPL	Social Protection and Labor
SRP	Strategic Response Plan
UAE	United Arab Emirates
UNAD	National Union of Diocesan Relief and Development Associations (<i>Union nationale des associations diocésaines de secours et de développement</i>)
UNDP	United Nations Development Program
UNICEF	United Nations Children's Fund
USAID	United States Agency for International Development
WFP	World Food Program
WVI	World Vision International

Acknowledgements

This report is the result of extensive collaborative work achieved under the overall leadership of Paul Nomba (Country Director, AFCW3) and the supervision of Stefano Paternostro (Practice Manager, GSPDR). The multidisciplinary team was led by Giuseppe Zampaglione (Lead Social Protection Specialist, GSPDR and TTL) and included Elena Celada (Social Protection Specialist, GSPDR), Rony Mba Djekombe (Social Protection Focal Point, GSPDR), Abdoulaye Younous (Social Protection Specialist, GSPDR), Blandine Koulke Nann Guer (Gender Specialist, GSPDR), Laura Ralston (Economist, GSPDR), and Carol Watson (Anthropologist, GSPDR).

Peer reviewers included Pablo Acosta (Senior Economist, GSPDR), Benedicte Leroy De La Brière (Senior Economist, GCGDR), Kinnon Scott (Senior Economist, GPVDR), and Maurizia Tovo (Lead Social Protection Specialist, GSPDR). The team also benefitted from comments and suggestions by various colleagues including Olivier Beguy (Economist, GMFDR), Sebastien Dessus (Program Leader, AFCW3), Aline Coudouel (Lead Social Protection Specialist), Emanuela Di Gropello (Program Leader, AFCW3), Carlo del Ninno (Senior Economist, GSPDR), Paola Ridolfi (Country Program Coordinator, AFCML), Pascale Schnitzer (Economist, GSPDR), Hjalte Sederlof (Economist, GSPDR), John Van Dyck (Senior Social Protection Specialist, GSPDR), and Asha Williams (Consultant, GSPDR).

Denise Brain (Assistant, GSPDR), Inas Ellaham (Operations Analyst, GSPDR), Josiane Luchmun (Assistant, GSPDR), Berthe Tayelim (Program Assistant, AFMTD), Paulette C. E. Aida Thioune Zoua (Program Assistant, AFMTD) provided administrative, processing and logistic support. Anne Marie Blouin (Consultant, GSPDR), Darcy Gallucio (Consultant, GSPDR), and Louise Vidricaire (Consultant, GSPDR) provided translation and editing support. Fieldwork for the preparation of the report and support in the organization of the Forum on Social Protection held in N'Djamena, Chad on June 2-4, 2015, were possible thanks to the support of the Chad World Bank Country Office. Overall institutional guidance and field coordination were provided by Adama Coulibaly (Resident Representative, AFMTD).

This report was made possible thanks to the important support of the Adaptive Social Protection Trust Fund, financed by the United Kingdom Department for International Development (DFID).

Report at a Glance: Key Findings

Poverty is widespread, varies significantly, and is likely to increase in absolute terms.

Poverty in Chad is widespread, especially rural, and largely related to food scarcity. There are significant regional variations in the incidence of poverty and to the exposure to shock such as price changes, droughts and excessive rainfall, conflict and inflow of refugees. Food insecurity is mostly in rural areas, where chronic children malnutrition is higher than in urban areas¹. In the Sahel, chronic food insecurity reaches cyclic peaks during the lean season. Despite being much more fertile than the rest of the country, also the Southern regions of Chad have high concentrations of chronic poor. Income inequality remains high especially in urban areas. While in percentage terms poverty has decreased between 2003 and 2011, in absolute number poverty has increased and is likely to increase in the next decades. (Chapter 2)

Determinants of poverty include size of households and access to agriculture inputs.

Large size of households and their involvement in agriculture are correlates of poverty. Lack of primary education does not appear to correspond to higher poverty (but secondary education does). According to recent surveys (ECOSIT), what makes a difference in available income between households is not so much their ownership of land, rather their access to capital, productive technologies, and markets. (Chapter 2)

Perceptions of poverty vary from region to region yet revolve around a lack of means.

In rural areas, poverty is perceived as multidimensional and dynamic, and related to the life cycle and to the agricultural phases as well as external shocks. For most, poverty can essentially be defined by the lack of resources, opportunities, relationships. Vulnerability is about lack, in particular of physical strength and means to confront the vicissitudes of life. In urban areas (N'Djamena) poverty is about lack of income opportunities, of housing and of basic services. In rural areas in the Sahel (Bahr el Gazal), poverty is about exposure to climate change and lack of food, which is widespread and cyclical, and leads to emigration. In rural areas in the South (Logone Occidental) poverty is determined by high population pressure, economic distress, the weakening of the cotton sector and national industries. (Chapter 3)

Safety nets are now expensive and limited (emergency).

Currently, Chad implements a relatively expensive safety nets portfolio (0.8% of gross domestic product, US\$109 million in 2014), but with significant overlapping, inclusion errors and system inefficiencies, such that resources are not fully optimized. For example, based on 2011 ECOSIT data, US\$106 million per year would be sufficient to cover the cost of making transfers to eliminate food poverty. Yet food security assessments continue to show significant assistance needs each year. Most safety nets in Chad serve an emergency response function, particularly to food crises and in the Sahel.

¹ According to the demographic and health survey of the National Statistics Institute (EDS-MICS, 2014-2015), chronic malnutrition affects children more in rural areas (42%) than in urban areas (32%).

CHAPTER 1 – EXECUTIVE SUMMARY

Cash transfers, vouchers and subsidies account for 60% of the total budget, while in-kind support is at 40% and decreasing. Informal safety nets play a large role in the lives of the poor, but they are challenged by social change. (Chapters 2, 3, and 4)

External financing, weak national capacity, mixed coverage, and limited coordination characterize existing safety nets in Chad.

Development partners are the primary source of financing for on-going safety nets (74% of the total), but financing amounts are unpredictable and volatile. Government capacity to design, finance and implement safety nets coordination mechanisms is limited and programs directly managed by Government authorities are very few. Safety net coverage is high for food insecurity, medium for access to basic services, and low for assistance to specific categories. Aside from geographical/Household Economic Assessment (HEA) targeting and some common approaches to payments, there is limited coordination in the identification, registration and monitoring of beneficiary households. Design and management of accompanying measures to safety nets, are also scantily coordinated. (Chapter 4)

Targeting approaches vary.

Targeting mechanisms, under current safety net activities, vary according to the objective of the program, though geographical targeting combined with HEA is widely used. Safety nets mostly target populations in rural areas, while urban areas are covered only by free universal access to health services and some social assistance. (Chapter 4)

Report at a Glance: Analysis Takeaways and Main Messages

Emergency interventions need to be linked to long-term strategies.

In Chad, both short- and long-term constraints are making poverty reduction a challenging goal. Extreme weather conditions and exposure to conflicts and regional instability are combined with structural factors such as the chronic nature of food poverty and high fertility rates. This suggests a new approach to reduce poverty and vulnerability, bridging emergency policy with long-term structured and systemic approaches in support of incomes, livelihoods, and resilience. This approach also applies to the long-standing refugee crisis with camps established for more than a decade and recent refugee inflows from Nigeria and the Central African Republic.

Adaptive safety nets can mitigate the impact of climate change.

Climate change induces variability in weather conditions. A renewed agenda of community-based interventions, including labor intensive public works, can protect the environment, avoid further soil erosion, improve water uses, and protect against floods.

Safety nets are the new partnership and support youth at risk, refugee integration, and urbanization challenges.

A new system approach to safety nets, if supported by strong accompanying measures and a new partnership between the State and its citizens, can strengthen social and community dynamics, and mitigate the risk of youth joining terrorist groups, criminal organizations, or anti-social behaviors. The long-term agenda of refugees and returnees from neighboring countries can be addressed anew within a system approach to national safety nets, while massive urbanization and overpopulation of the capital city can be approached proactively.

Address common misperceptions of poverty.

Safety nets are only for the poorest and most vulnerable, and are not designed to complement existing contributory social protection schemes, which are largely for public and private employees. Indeed, international experience shows that cash transfers and labor intensive public works programs are efficient redistributive mechanisms that can improve livelihoods of the chronically poor and vulnerable in periods of crisis. Awareness-raising campaigns, a vital component of safety net systems, can help reset the misperceptions of poverty, such as links to small-size farms and small households.

Building safety net systems is a priority.

Chad critically needs toward a government-led, transparent, well-designed, consistent, and professionally implemented social safety nets system, including well-sorted targeting, registration, payment, and monitoring and evaluation tools. Coordination among programs, bridging short-term and long-term responses, and ensuring the use of commonly agreed tools and approaches, is critical to gaining fiscal space and moving away from predominant donor financing – and for the success of a new safety net system.

Report at a Glance: Six Recommendations

Continue the policy dialogue and foster ownership.

A key priority is to continue the policy dialogue between the authorities, key national stakeholders, and development partners on the importance of establishing safety net systems, introducing cash transfers and other efficient tools for income distribution, and promoting changes in social behaviors. As part of this policy dialogue, workshops, South-South dialogue events, training, and technical assistance will continue to be provided.

Launch a pilot.

In partnership with The World Bank Group and other partners, and with support from the Adaptive Social Protection Multi Donor Trust Fund, the Government should pilot the establishment of a safety nets system that would test labor intensive public works and cash transfer interventions. The pilot would be implemented through new institutional arrangements and a state of the art management information system.

Strengthen Government/DP coordination.

A key policy priority is to strengthen existing Government–development partners coordination mechanisms around humanitarian relief and the agenda of poverty reduction. Stronger coordination should take place within existing structures and under greater national leadership. Renewed coordination should also be established on data and information sharing.

Invest in knowledge and data.

It is a priority to continue improving the knowledge base on poverty dynamics, vulnerability and safety nets. In particular, the knowledge base in Chad requires better data on regional variations, sources of vulnerability including conflict, extreme weather events, price shocks, and refugee inflows.

Launch information campaigns.

As part of the follow-up activities to the National Social Protection Strategy, it is critical to launch a well-organized communication campaign on the safety nets strategy, system, and its interventions and expected outcomes. Messages would include:

- Safety nets are for the poorest.
- Cash transfers can be provided to people safely, efficiently, and accountably.
- Labor intensive public works support income and build resilience.

Expand safety nets outreach and aim at a national social registry.

For the longer term, aim at attracting additional financial resources and sufficient commitment and institutional traction to expand and adapt the safety nets pilot to other areas of the country. Additional commitment and experience with the pilot also will help design, introduce, and develop a national social registry, which is the ultimate and most efficient tool to reach the poor and vulnerable.

Chapter 1 Executive Summary

1. Introduction

1.1 **This report is the result of extensive analytical work on social protection in Chad.** During 2014 and 2015, the World Bank’s Social Protection and Labor (SPL) Global Practice undertook extensive analytical work in Chad to assess the country’s poverty and vulnerability profile, and the characteristics of its social safety nets system. This report, *Republic of Chad – Shaping Adaptive Safety Nets to Address Vulnerability*, is the result of such work and was prepared in the context of the renewed relationship between the Government of Chad and the World Bank. Such partnership includes the re-engagement of the World Bank on the SPL agenda, and programming of World Bank support to Chad as part of the Systematic Country Diagnostic and the Country Partnership Framework. This report and the separate executive summary were made possible thanks to the important support of the Adaptive Social Protection Trust Fund, financed by the United Kingdom Department for International Development (DFID).

1.2 **Chad has a mixed record in terms of poverty reduction achievements.** Chad has experienced sustained growth, and progress in poverty reduction has been significant over the past ten years, with a drop in the national poverty rate of more than eight percentage points. However, a combination of factors has reduced the effects of growth on poverty reduction. These include high population growth, limited gains in key sectors where the poor tend to be overrepresented, such as agriculture, a difficult fiscal cycle compounded with a fall in oil revenues, and continued exposure to climate change and regional instability. Chad’s national poverty rate remains high at 47% of the entire population (4.7 million people in 2011, which compared to 2003, is equivalent to an increase in absolute terms of more than half a million people). Vulnerability rates² are at 68% (down from 76% in 2003, but up by more than a million in absolute terms), and almost 3 million people (29%) still live in food poverty.³

1.3 **The Government has taken important institutional decisions on social protection.** The Government has made significant progress and demonstrated commitments to support a structured poverty reduction agenda, including the preparation of a comprehensive National Social Protection Strategy, and the hosting of a forum that endorsed the Strategy and committed to a preliminary set of actions to strengthen Government leadership in the area of safety nets (June 2-4, 2015). The United Nations International Children’s Fund (UNICEF) and the Bank have partnered to support the Government of Chad in such efforts. The Government then approved the Strategy at a Cabinet meeting on July 2, 2015.

1.4 **This report is a preliminary contribution to the broader agenda of safety nets, poverty reduction, and building resilience.** At a time when in many countries and institutions, the thinking

² For the purposes of this, analysis a vulnerable person is defined as someone living below the US\$2 per person per day consumption threshold. This threshold has the benefit of being an internationally comparable metric of poverty and corresponds to approximately 1.5 times the Chad poverty line (see the Glossary).

³ Defined by the Chad National Statistical Office as the expenditure on food required for consumption of 2,400 Kcal per day per person (see the Glossary).

around social protection is fast evolving, and the concept of adaptive social protection⁴ is being introduced into the debate on resilience and poverty reduction, the SPL Global Practice is presenting this report as a preliminary contribution to a substantive in-country dialogue on safety nets. Such dialogue also touches on targeting approaches, identification and registration issues, coordination among donors, and convergence between a long-term development plan for Chad and the extensive emergency food/drought priorities that remain very significant in Chad and in other Sub-Saharan countries.

1.5 The objective is to move from the analysis to a series of specific recommendations for action. Hence, this report is a work in progress and it is to be understood as an attempt to shed light on recent evolutions in the debate over poverty reduction and enhancing resilience in Chad. As such, its aim is help define specific action-oriented recommendations on how to build a safety net system that can support a path of sustained poverty reduction.

1.6 The report is organized into five chapters. After this introductory chapter, which serves also as the executive summary, the report has a chapter (2) presenting the results of extensive quantitative work on the determinants of poverty and vulnerability in Chad. To a large extent, this work is based on the results of two surveys on household consumption and the informal sector (ECOSIT 2003 and 2011) conducted by the National Institute of Statistics, Economic and Demographic Studies (INSEED). Chapter 3 presents the results of extensive qualitative work conducted in Chad by a multidisciplinary team in early 2015, focusing on the perception and social dynamics of poverty and vulnerability. Chapter 4 examines existing social safety nets in Chad, in particular their amplitude, objectives, and coverage, as well as their targeting, implementation, and monitoring and evaluation procedures. Finally, Chapter 5 offers some of the main messages emerging form the analysis and provides suggestions on how to move forward on both the policy agenda and the operational work in the area of safety nets.

2. Country Context

1.7 A country's so safe that "a lone woman clad in gold might walk with none to fear but God." Between 1564 and 1596, under mai (king) Idris Alwma (Alooma), a vast part of Chad experienced significant growth, enlightened statesmanship, and important social, economic, and military innovations. Under Alooma, Government revenue came from tribute and duties on and participation in trade. Alooma took a keen interest in trade and other economic matters. He is credited with having cleared the roads, designed better boats for Lake Chad, introduced standard units of measure for grain, and moving farmers into new lands. In addition, he improved the ease and security

⁴ Adaptive Social Protection (ASP) is a new integrated approach that can help address the challenges of climate adaptation and climate and disaster risk management. Through its flexible programs, ASP can reduce vulnerability to shocks before they occur (with predictable transfers, by building community assets) and protect the poor when affected by shocks. It can also promote equity and shared prosperity by fostering access to income-earning opportunities, helping to diversify livelihoods and productive assets, increasing access to basic services and developing human capital, all of which build long-term resilience to shocks. ASP programs can be scaled up to respond to extreme events. (see glossary in annex to the report)

of transit through the empire with the goal of making it so safe that "a lone woman clad in gold might walk with none to fear but God."⁵

1.8 Chad's positive performance during that era has been followed by overwhelming economic, security, and social challenges. Indeed, there have been good periods in Chad's history when, according to historians and for the standards of those times, good governance, openness to trade and commerce, social and economic innovations, and improvements in transportation infrastructure spurred an epoch of growth and wealth. Since then, however, Chad has experienced a recurrence of significant economic and social setbacks, with civil wars, invasions, recurrent droughts, natural disasters, regional instability, and weak governance.

1.9 Chad is a large, sparsely populated, low income country with among the worst Human Development Indicators in the world. Chad is a large landlocked Central African country with a land area of 1.3 million km² and a current population of 13 million. The country is low income, with a gross domestic product per capita of about US\$1,054 in 2013. Chad's demography is quite diverse with several ethnic groups comprising the population. In 2014, Chad was ranked 184 out of 187 countries on the UN Development Program (UNDP) Human Development Index. In 2013, the primary school completion rate stood at 38% (of the relevant age group) in comparison to the regional average for Sub-Saharan Africa of 70% and 56% of youngsters aged 6 to 24 years old were out of school. Between 2010 and 2014, child and infant mortality ratios were respectively estimated at 65 and 72 per thousand living births (EDS-MICS, 2014-2015), mainly the result of malaria, respiratory infections, diarrhea, and malnutrition, which are among the highest in the world. For example, the corresponding rates for Sub-Saharan Africa are 92 and 61 per thousand live births. Maternal mortality, among the highest in the world, was estimated the same year at a ratio of 1,084 per 100,000 live births (1.1%), compared to the equivalent regional average of 510.

1.10 Chad's economy is exposed to climatic variations, oil price volatility, and security instability. Chad's economy relies principally on rain-fed agriculture (including livestock) and services, the demand for the latter being mostly driven by oil revenues and rapid urbanization. As such, the economy remains highly exposed to climatic variations, as well as to developments in the oil sector (e.g., new fields, international prices). Between 2012 and 2014, the overall gross domestic product (GDP) growth was high (7.2%) but concealed ample variations in oil growth (from -7 to +6%) and non-oil GDP growth (from 7 to 12%). Security is a third important source of volatility, since military spending responds to the changing security situation in the region and security threats can dampen the level of economic activities.

3. Vulnerability in Chad (Chapter 2)

1.11 Poverty and vulnerability dynamics in Chad over the past ten years have been at times paradoxical. As shown in Chapter 2, apparently contradictory signals between high growth and limited poverty reduction are the results of the poverty and vulnerability specificities of Chad. It is a country that over the last ten years has started but not completed a transition and that to a large extent has not addressed certain structural weakness in its social and economic fabric. These include the low

⁵ Cfr. H.J. Fisher in J. D. Fage and Roland Olivier (Editors), *Cambridge History of Africa*, Vol. 4, 1600-1798, p. 85. Cambridge University Press, Cambridge UK, 1975.

productivity of key sectors such as agriculture, the mostly unchanged demographic trends with persistently high fertility ratios, a fragile governance and capacity context, a less than optimal use of public resources including oil revenues, and the complex and cyclical nature of poverty given its intimate connection with food availability.

1.12 Poverty and vulnerability remain pervasive in Chad. According to the ECOSIT 2011, 29% of the population lives below the food poverty line, 47% below the overall national poverty line, and 68% on less than US\$2 per day. In comparison, the ECOSIT 2003 recorded 36% food poor, 55% poor, and 76% below US\$1.25 per day. Despite this reduction in the poverty rates, the absolute number living in various degrees of poverty has increased due to population growth. The number of food poor has increased from 2.7 to 2.9 million; the number of poor from 4.1 to 4.7 million; and the number of people living within 1.5 times the overall poverty line (the vulnerable) from 5.7 to 6.8 million.

1.13 Poverty and vulnerability are predominantly a rural area phenomenon, while income inequality is more pronounced in urban areas. In 2011, 74.3% of the rural population was poor or vulnerable (i.e. living on less than US\$2 per day), while only 40.5% of those in urban areas were affected by poverty and vulnerability at this level. Food and overall poverty recorded at the national poverty lines are also much greater in absolute terms in rural locations, with 2.7 and 4.3 million affected, respectively, compared to 170,000 and 385,000 in urban areas. Given that 81% of the population lives in rural areas, this means that over 6 million people live on less than US\$2 per day, while only about 750,000 in urban areas are affected. Income inequality is concentrated at the top end of the income distribution and is more pronounced in urban areas. Given that the rate of urbanization has been increasing, this trend likely will be accentuated in the coming years.

1.14 There is significant regional variation in the incidence of poverty and food insecurity across Chad. The Southern regions of Chad,⁶ despite the fact that they are densely populated and much more fertile than the rest of the country, have high concentration of chronic and food poverty. More intuitively, the arid and drought-prone Sahelian zone is less fertile, remains exposed to cyclical food insecurity, and is scarcely populated. While poverty depth and income inequality have not changed at a national level, comparisons between ECOSIT 2003 and 2011 indicate variation across time in the geographic distribution of poverty. According to this data, the food poverty rate fell in four Saharan regions on average from 32.8% to 21.7% (Borkou, Ennedi, Tibesti, and Biltine); increased substantially in three Southern regions (Guera and Salamat from 35.3% to 42.8% and in Logone Occidental from 38.6% to 46.4%); and changed very little in another three Southern regions and one Sahelian region (Ouaddai, Chari Baguiri, Tandjile, and Moyen Chari). Data on food insecurity from other sources, however, show that, from 2011 to 2014, food insecurity is becoming a growing problem in the Sahelian zone, a diminishing problem in some Southern regions, and a recurrent problem in other Southern zones. Taken together, this suggests there were poverty reductions in the Saharan zone, poverty fluctuations both up and down in different parts of the Southern and Sahelian zones between 2003 and 2011, while food insecurity has become an increasing problem in the Sahelian zone since 2011.

1.15 The survey on household consumption and the informal sector (*Enquête sur la Consommation et le Secteur Informel au Tchad* /ECOSIT) suggests that large households and those involved in agriculture are more likely to be poor. Over 5.4 million live in households with

⁶ These regions are identifiable with the so-called *bande Soudanienne* (Soudanian band).

more than six persons, with the poverty incidence averaging over 55% and the average share of those living on under US\$2 per day at 75%. By comparison, households with four to six members have an average rate of poverty of just over 40% and US\$2 per day vulnerability is less than 65%.⁷ Households involved in agriculture have an incidence of poverty below US\$2 per day of over 70%, compared to non-agriculture households, where the average incidence is about 40%. Land ownership and participation in agricultural committees or village associations do not seem to mitigate exposure to poverty. Pastoralism is also linked to poverty but to a lesser degree than agriculture (greater livestock ownership corresponds to a lower incidence of poverty, suggesting livestock can provide resilience to poverty).

1.16 Lack of primary education does not appear to correspond to higher poverty, but there is a clear correlation between poverty and access to health care. Primary education does not correspond with any difference in poverty or vulnerability, suggesting that the return to primary education is very limited in Chad, likely because of its very low quality. The minority of households in which the household head has completed secondary education or more, on average, fares much better. In terms of health capital, poor and rural households report having significantly lower access to health care. Measures of both poverty and vulnerability increase among households that are located farther from their nearest health facilities.

1.17 An examination of possible sources of vulnerability indicates a regional variation in exposure to different shocks, whether related to price changes, rainfall variability, or conflict and refugees; however, further analysis is needed. Regression analysis and visualizations demonstrate a relationship between lower rainfall or greater inter-annual variability and food poverty and insecurity. Moreover, an analysis of conflict and refugees situations shows that such episodes are concentrated in the eastern regions of the country, which also recorded greater food insecurity between 2011 and 2014. Despite these findings, further analysis is needed on the relationship between food insecurity and recent significant inflows of refugees in the south of Chad as well as with other categories of shocks. For instance, on prices, the results of the analysis illustrate a possible lack of correlation between changes in food poverty rates between 2003 and 2011 and trends in food prices. In fact, the use of regional data likely masks local-level relationships that may exist and points to the importance of more geographically resolute information and analysis.

⁷ These findings appear to contradict the qualitative analysis on poverty and vulnerability based on Household Economic Assessment (HEA). Chapter 3 suggests that higher levels of income and access to more assets are associated with larger households. One possible explanation of this discrepancy may include the different definitions of household size and composition used by the two analyses.

4. *Qualitative Dynamics of Poverty and Vulnerability (Chapter 3)*

1.18 **There is significant awareness of the multidimensional and dynamic aspects of poverty and vulnerability.** Analysis shows that large proportions of the population in Chad face multiple threats to food and income security. This is confirmed by Chapter 3, which discusses the findings of community-level qualitative analysis carried out with the intent of giving voice to individuals living in poverty and vulnerability to better understand their own perceptions of vulnerability, their risk-coping strategies and social solidarity mechanisms, as well as the concrete benefits they derive from some of the social transfer and community development programs underway in different areas of the country.

1.19 **The people met during this study have a clear view of the multidimensional and dynamic aspects of poverty and vulnerability.** They consider poverty and vulnerability to be inextricably linked to the different risks associated with the successive stages of life, the external environment, livelihood issues, and their gender and social status. They also make a distinction between categories of poor and non-poor, and ask quite judicious questions on the types and conditions of social mobility from one category to the other.

1.20 **For most, poverty can essentially be defined by the lack of resources, means, opportunity, and relationships.** The truly poor possess *nothing*. His/her condition is characterized by hunger, lack of adequate shelter, lack of clothing, or even by dirtiness, which relates to the difficulty of buying soap. Survival strategies, including access to basic social services, vary according to the level of poverty on account of lack of financial resources and, particularly in rural areas, distance to health centers and schools. In general, the poor arouse pity and compassion, but sometimes indifference and even contempt.

1.21 **As with poverty, there is a relational aspect in the conceptualization of vulnerability.** The vulnerable essentially depend on others, on the necessary support and assistance that they very often lack for themselves. This is why vulnerability is perceived in relation to the lack of any form of formal or informal social assistance. Among those categories considered most vulnerable, the most frequently mentioned are people with disabilities, women (especially widows or adolescent mothers), children (particularly orphans and other vulnerable children), and older people.

1.22 **In the urban areas (N'Djamena), poverty is about lack of income opportunities, poor housing, and limited basic services.** In the capital, poverty is related to living conditions and urban livelihoods but also to rural poverty, since the rural exodus greatly increases the number of urban job seekers in an already fragile labor market and places an additional burden on limited service structures. The major challenges facing the poor living in N'Djamena are work/employment, housing and housing conditions, water and sanitation, access to education, and health and safety conditions. The impression is that of increasing widespread poverty and uncertain access to basic services in the context of steadily rising costs of living.

1.23 **In rural areas in the Sahel (Bahr el Gazal), poverty is about lack of food, is widespread and cyclical, and leads to emigration.** Each year, chronic food insecurity reaches cyclic peaks during the lean season and leads child malnutrition rates to exceed the emergency thresholds. The three main Sahelian livelihoods (camel pastoralism in the north; livestock transhumance in the center; and a combination of agro-pastoralism with counter-season gardening in the south) are weakened by the

effects of climate change and the lean season; trade is hampered by inadequate road infrastructure; the welfare of the most vulnerable households is heavily threatened by the departure of active members looking for employment in urban centers; and the human development of the next generation is at risk because of inadequate basic social infrastructure (i.e., schools, health centers, maternity). This zone also includes other forms of vulnerability related to ethnic marginalization of individuals belonging to an “inferior caste” (i.e., blacksmiths and butchers).

1.24 In rural areas in the Southern zone (Logone Occidental), poverty is determined by high population pressure, economic distress, and poor access to basic services. High population growth (including through immigration and refugee inflows) is predominant in this part of Chad and characterizes perceptions of poverty and vulnerability. This misperception is exacerbated by the effects of climate change, leading to environmental degradation and impoverished soils, the collapse of the cotton sector, and lack of investment in basic social services (health centers, schools).

1.25 Various forms of informal social protection in Chad continue to play a large role in the lives of the poor in both urban and rural areas, but they are increasingly challenged by social changes. As in the rest of Africa, informal social protection mechanisms are very common in Chad and, in the absence of a formal system, act as a genuine social safety net for a large part of the population, both urban and rural. At the same time, the case studies reveal that these systems, which often rely on traditional and exclusive practices, are often stretched when faced with sociocultural transformations. Furthermore, and while they are fairly effective in response to “idiosyncratic” shocks, their effects is limited in the presence of covariate shocks that place the whole community in a crisis situation. In Chad, informal social protection mechanisms include: the *tontine* (a form of rotary savings and credit association), which is important particularly among women; *Zakat* (almsgiving), which is one of the five central pillars of Islam and includes an in-kind or cash transfer to the poor and needy; social assistance offered by the Protestant and Catholic church in favor of the poorest and most vulnerable; and a number of specific forms of social solidarity in rural areas, such as community meals (*dabalaye*), animal loans among pastoralists and agro-pastoralists, collective community work, and different types of producer associations. But in Chad, as in most African countries, the extended household mainly serves as the first point of support and primary social safety net, in both urban and rural areas.

1.26 Local experiences of a variety of formal social safety nets, assistance structures, and development projects offer insights and lessons learned for the design and implementation of social protection initiatives. The field study examined two types of cash transfers, one targeting widows for schooling support for orphans led by an Islamic organization in N’Djamena and another run by an international non-governmental organization (NGO) in the Sahel in response to emergency food security priorities during the cyclical lean season. In the South, it also assessed experiences with an in-kind transfer of piglets aimed at enhancing the revenue of households caring for vulnerable children; a micro-credit program for different groups of rural producers; and a local community development project involving members of rural producers’ associations. In N’Djamena, social assistance activities of the Government’s social centers were also examined, along with a selection of existing support structures for women and people living with disabilities. While all of these structures and activities offer needed support, a general finding was the need for increased investment for more sustainable efforts to address key sources of vulnerability while enhancing resilience. Key

recommendations also highlight the importance of context-specific approaches that take into account local values, perceptions, and experiences.

5. Safety Nets Assessment (Chapter 4)

1.27 Chad implements an expensive safety nets portfolio, although with significant overlap, inclusion errors, and system inefficiencies. Chapter 4 estimates the overall financing of safety nets in 2014, their coverage and modalities, targeting mechanisms, level of transfers, and overall efficiency. According to those estimates, about US\$109 million was spent to finance different types of safety nets in Chad in 2014. This amount corresponds to 0.8% of national GDP, which, according to ECOSIT 2011 data, would be sufficient to address the food poverty gap. Although the amount is slightly below the average for low income African countries (1.1%), it is higher than in many West African countries. Several factors also point to considerable inefficiencies and challenges that limit cost-effectiveness and impact. These include: (i) the reported number of beneficiaries is likely overestimated (almost 3 million people or over 20% of Chad's population); (ii) a sense of significant overlap among programs (very difficult to check given registries are not used by safety nets, at least not in a systematic way); and (iii) certain projects use targeting methods that have a high risk of inclusion of non-poor households. So while the resource envelope and targeted level of coverage (US\$109 million and US\$3 million, respectively) should be sufficient to address food poverty within Chad, the current systems and approaches have not been harmonized to maximize their impact.

1.28 Most safety nets in Chad serve an emergency response function, particularly to food crises. Social safety nets implemented in Chad are intended to: (i) provide an emergency response to a (food) crisis situation (78% of total budget); (ii) facilitate the access of poor households to basic social services (17% of total budget); and (iii) provide assistance to specific vulnerable groups such as orphans, widows, and the disabled (5% of the total budget). No social safety net was identified as having the objective of being predictable support to household consumption. Some parallel initiatives such as community development projects are intended as longer-term instruments for poverty reduction, including the Local Development Support Project (PROADEL) and the Thematic Food Security Plan (PTSA). While some of these programs are discussed in Chapter 4, they are not considered in this analysis as social safety nets in their narrow sense.

1.29 Given their current design, most safety nets in Chad target households experiencing high vulnerability rather than chronic poverty. In Chad, safety nets are widely used as a short-term response to external covariate shocks rather than as mechanisms to tackle chronic poverty and build long-term resilience. In fact, their main targets are vulnerable households who experience a transient shock, typically of a seasonal nature. Safety nets for the chronic poor represent only about 20% of the total budget and facilitate household access to basic social services (education and health) or provide assistance to specific vulnerable groups (orphans, handicapped, other vulnerable).

1.30 Cash transfers and subsidies account for 60% of the total budget, while in-kind support rests at 40% and is decreasing. Most in-kind support (65%) consists of food supplements distributed by nutritional support programs to fight malnutrition. In the context of seasonal support to food-insecure households, food distribution has largely been replaced by transfers in cash or vouchers, which reached more than half a million people in 2014. Social safety nets implemented by the Government

are mainly indirect transfers in the form of exemptions from costs or price subsidies (US\$23 million per year or 80% of the budget invested by the Government in safety nets), rather than direct transfers in-kind or cash. As discussed in Chapter 4, exemptions from cost or price subsidies are particularly prone to inclusion errors and largely benefit the non-poor.

1.31 When considering their unit cost, cash transfers seem the most efficient form of social protection. The ratio between the total budget allocated to each type of program and the number of beneficiaries provides a generic estimate of the unit cost. It is not surprising that food distribution (in-kind) has a cost per beneficiary well above the cash transfer schemes, in cash or coupons. Unsurprisingly, the unit cost of the exemption and subsidy programs is very low, but the number of beneficiaries of these programs is likely overestimated and therefore unit costs remain underestimated. Given the untargeted nature of these subsidies, they likely are of greater benefit to the non-poor who can consume these goods and services, rather than the poor who will fail to benefit unless they can afford to purchase the subsidized items.

1.32 Development partners are the primary source of financing for safety nets, but commitments are unpredictable and volatile. Much of the social safety net system is funded by development partners (DPs) (74%), while only 26% of total safety net spending in 2014 was funded by the Government, though on a relatively stable basis. While the amount of Government spending can vary from year to year depending on available funding, the main support programs for vulnerable groups (e.g., waivers for health care costs, food price subsidies, assistance to vulnerable people, and the National Solidarity Fund) are renewed each year. In contrast, financing from DPs are by nature unstable and are mobilized annually in response to humanitarian needs. These amounts can vary significantly over the years, and since they are unpredictable, they can neither be integrated in long-term programming nor help stabilize household incomes in the medium to long term. This also contributes to the inefficiencies in the current portfolio of safety nets, since the lack of consistent resources diminishes the ability to coordinate a unified systematic response.

1.33 Safety net coverage is high for food insecurity, medium for access to basic services, and low for some specific categories. The coverage of social safety nets varies depending on the program type. Based on information provided by implementing agencies, Chapter 4 concludes that emergency responses to food insecurity and nutritional shocks have relatively high coverage (59% for the nutrition rehabilitation program and up to 100% of the target population for food insecurity). However, these results are likely to be overestimated, considering possible overlap among programs and the difficulty to verify the real number of beneficiaries in the absence of reliable administrative records and program registries. Coverage rates of subsidy and fee-waiver programs that promote access to basic social services are around 20% of the target group, but there could be some significant distortions given the untargeted nature of these benefits and the likely over-representation of the urban population among users of basic services. Programs addressing chronic child malnutrition have very limited coverage, equivalent to 5% of the target population. This was similar for other categorically targeted programs intended to support vulnerable groups such as the disabled and widows, where data was either unavailable or very limited.

1.34 Targeting mechanisms vary according to the objective of the program. The overall efficiency of any safety net program depends heavily on its ability to identify and target the neediest households. Weak targeting mechanisms can result in high inclusion errors (non-poor or non-vulnerable

households enrolled in the program) and conversely in exclusion errors (poor and vulnerable households who are not enrolled in the program). Efficient targeting mechanisms succeed in reaching their objective and reducing both errors. Given the nature of safety nets in Chad (humanitarian emergency related to food insecurity, drought, and other crises), the targeting mechanisms more commonly used are a combination of geographical targeting and HEA methodologies, with at times some community-based vetting. Fee waivers and food price subsidies on the other hand tend to be untargeted.

1.35 The Sahel zone of Chad is the area most targeted by safety nets. The Sahel is the area most widely covered by social safety nets. Indeed, about 80% of the budget of social safety nets finances food and nutrition crisis responses, which are almost exclusively provided in the Sahel, with some exceptions for therapeutic feeding programs in Salamat and Logone regions. In the context of access to basic social services, the school feeding program also targets the Sahel. In terms of social safety nets, the Southern zone is only covered by the free health care program and some assistance initiatives for vulnerable groups.

1.36 Safety nets are mostly targeted to populations in rural areas, while urban areas are covered only by free universal access to health services and some social assistance. Those in urban areas do not generally have access to social safety net programs, apart from free health care and small assistance programs for vulnerable groups. This is largely explained by the fact that vulnerability and poverty are more acute in rural areas, which has eight times as many poor as urban areas. However, there is a trend towards increased urbanization in Chad, with the urban population expected to triple by 2030. As such, the social safety net system should be prepared to meet the growing urban needs. More broadly, safety nets systems should be designed keeping in mind the prospective and most probable scenarios in terms of future economic growth. Such scenarios continue to be challenging.

6. The Way Forward (Chapter 5)

1.37 Recent modeling on future growth in Chad and its impact on poverty reduction show little potential for improvements. As a background analysis for Chad's Systematic Country Diagnostic, a Computable General Equilibrium model was built in order to develop prospective scenarios. The model provides a consistent framework to explore possible medium-term developments, based on the main structural features of Chad's economy. In the baseline scenario, the sustainability of Chad's economic development stance would be endangered, with little overall labor demand and limited expansion of the manufacturing sector between 2012 and 2030. Thus the opportunities for pro-poor growth appear limited.

1.38 Other structural factors compound this difficult situation. Population growth remains sustained and Chad is far from moving into a full transition mode as fertility rates remain high. Moreover, the downward trend of commodity prices, oil in particular, has been severe and is unlikely to be reversed in the foreseeable future. Finally, there is the persistent political and civil instability and insecurity, which is fueled by broader regional and global forces and likely to continue for the years to come.

1.39 A multipronged strategy including strengthening fiscal management, improving agricultural productivity, and increasing human capital and resilience is needed. The Bank is

supporting Chad with a multipronged strategy to address the significant economic, fiscal, and social challenges that the country is facing, which are compounded by the high regional security costs incurred by the Government along with the low level of oil revenues. The pillars of such strategy include: (i) improving the management of public resources, by addressing some of the root causes of weak macro-fiscal management; (ii) enhancing productivity, market access, and resilience of farmers and pastoralists; and (iii) building human capital and reducing vulnerability. Pillar one will address macro-fiscal issues of overall economic growth, balance of external and internal accounts, overall governance and transparency, and monetary and fiscal policies. The second pillar addresses a number of external constraints that reduce returns in agriculture, including the lack of effective extension and animal health services, limited access to improved seeds, the need for investments aimed at improving water and land management, poor storage, processing, marketing, and connectivity facilities. The third pillar will seek to build resilience through improving the access of poor households to good quality health care, improving the quality and relevance of education and training, and strengthening social protection, which can help the most vulnerable households cope with the consequences of risks, while stimulating risk-taking and entrepreneurship.

1.40 The National Social Protection Strategy (NSPS) is an important window of opportunity. With the adoption of the National Social Protection Strategy on July 27th, 2015, the Government is looking to introduce a more permanent safety net targeted at the poorest segments of the population. Key decisions in doing so will need to focus on setting priorities among beneficiary groups, and selecting appropriate targeting mechanisms; making decisions about inter-agency coordination; and combining Government and donor action to support new mechanisms. As part of the third pillar of its partnership strategy with Chad, the Bank would help the Government make a first and very important step towards this development goal by piloting a set of interventions and operational platform(s), that when scaled up, would help consolidate on-going emergency efforts and offer economies of scale in implementation. In particular, as discussed in the last chapter of this report, the objective of a sustainable and well-structured social safety net system should be to address issues of chronic poverty and food and non-food vulnerability in a coordinated context, with compatible tools, and ideally, using a common platform to identify, register, and monitor potential and actual beneficiaries.

1.41 A new approach to safety nets, with a focus on regularity and predictability of support to beneficiaries. Short-term humanitarian support from donors to address food insecurity through cash and in-kind support, as well as subsidies, has been in place for years both with some strengths and weaknesses (partially overlapping programs based on uncertain financing). The emphasis on humanitarian aid and *ad hoc* interventions, while significant in terms of volumes and mobilization, has often suffered from weak administrative and coordinating capacity in public agencies, high volatility in availability of resources, and a limited focus on building long-term resilience. Extensive analytical work indicates that a lack of assets and high exposure to shocks leave poor households with little choice but to take on low return activities and strategies, which do not offer significant opportunities to escape poverty. A consistent program of regular and predictable cash transfers can increase and sustain higher savings and investment rates of beneficiaries, and simple transfer mechanisms can constitute an effective channel of fiscal redistribution.

1.42 New systems and mechanisms to target assistance efficiently and sustainably are needed. The overlap of interventions, lack of a common registry, and near absence of mechanisms to follow-up on interventions, gauge their impact, and address errors and inefficiencies, necessitate new approaches

to social safety nets encompassing elements of adaptation and flexibility. In Chad, these approaches will leverage on the existing experience in emergency safety nets, consolidated approaches to food insecurity targeting, and a renewed interest from Government and DPs alike to transition from *ad-hoc* emergency interventions to more permanent and system-based interventions. The extraordinary expansion of information and communication technologies (ICTs), including new registration, biometric, and payment technologies, is providing a unique opportunity to move into a new generation of safety net interventions that are provided in a systematic, identifiable, and transparent way. A recent social protection forum in N'Djamena, including experiences of neighboring countries (Burkina Faso, Benin, and Niger), has served as an impetus for seeking more permanent solutions.

1.43 Responsive safety nets should consider local complexities and perceptions on poverty and include strengthening of livelihoods, access to basic services, accompanying measures and local involvement. The study also mentions the lessons learned from social protection projects in the three environments (e.g., cash transfers in urban areas and in the Sahelian zone by an Oxfam Committee for Famine Relief (OXFAM) project), activities conducted by trade, women's and producers' associations (e.g., disabled association in N'Djamena or producers' groups in Western Logone), and microcredit activities (Logone Occidental). Chapter 3 makes recommendations when defining and implementing safety nets programs, including: (i) understand the complexity and specificity of local socioeconomic situations; (ii) consider the communities definitions of poverty, vulnerability, and social protection; (iii) aim at strengthening the livelihoods of the vulnerable groups and their access to basic services; (iv) complement safety nets programs with accompanying measures including information and training of the beneficiaries; and (v) involve key local stakeholders, in project preparation, implementation, monitoring and evaluation.

1.44 A concrete way forward. Chapter 5 identifies a way forward to improve the knowledge basis on safety nets in Chad, deepen the on-going policy dialogue with Government and DPs, and transition towards a coordinated and systemic approach to safety nets programming and operations. On the latter, it is proposed to design and launch a pilot which will test the feasibility and efficiency of a new safety net system and the use of a relatively simple and accepted targeting system, provide regular cash transfers to poor and vulnerable households, support labor intensive public works activities, and implement some community-based accompanying measures aimed at improving living conditions, productive livelihoods, and overall resilience. The pilot would also support institutional building, technical assistance, and knowledge activities and would include information and communication campaigns.

Chapter 2 Vulnerability in Chad: A Preliminary Note⁸

1. Introduction and Brief Assessment

2.1 **Poverty and vulnerability remain pervasive in Chad.** According to the 2011 national household survey, 29% of the Chadian population lives below the food poverty line (food poor), 47% below the overall poverty line (total poor), and 68% on less than US\$2 per day (total vulnerable). In comparison, the 2003 national household survey recorded 36% food poor, 55% poor, and 76% below US\$1.25 per day. Despite this small reduction in the poverty rates, the absolute number living in various degrees of poverty has increased due to population growth. The number of food poor has increased from 2.7 to 2.9 million, the number of poor from 4.1 to 4.7 million, and the number within 1.5 times the overall poverty line from 5.7 to 6.8 million.

2.2 **In 2011, a US\$0.10 transfer to each of the food poor per day and a US\$0.27 transfer to each of the poor per day would be sufficient to eliminate both food and overall poverty in Chad.** Given the population size and poverty rates, this implies US\$106 million per year would be needed to counter food poverty and US\$286 million per year to counter total poverty. As a comparison, military expenditure in 2009, the last year data is available, was US\$406 million.⁹

2.3 **Poverty is predominantly a rural issue.** In 2011, 74.3% of the rural population was poor and living on under US\$2 per day, while only 40.5% was affected by that level of poverty in the urban areas. Given that most of the population lives in rural areas (81%), this means that over 6 million persons in rural areas live on less than US\$2 per day, while only about 750,000 in urban areas are affected. Food and overall poverty recorded at the national poverty lines are also much greater in absolute terms in rural locations with 2.7 million and 4.3 million affected, respectively, compared to 170,000 and 385,000 in urban areas.

2.4 **Income inequality is concentrated at the top end of the income distribution and is more pronounced in urban areas.** The cumulative expenditure distribution shows that the difference in per capita daily expenditures between the 10th and 50th percentile (P50-P10) is less than US\$1, while the difference between the 50th and 90th percentile (P90-P50) is US\$2.22 with a difference of over US\$1 occurring from the 80th to 90th percentiles. The difference in per capita daily expenditures between the 10th and 90th percentile (P90-P10) is US\$4.44 in urban areas, while the equivalent difference is US\$2.78 in rural areas.

2.5 **Poverty depth and income inequality have not substantially changed since 2003.** In both 2003 and 2011, the mean distance below the national poverty line was approximately 10% to the food poverty threshold and 20% to the total poverty threshold. A comparison of the cumulative expenditure distribution for 2003 and 2011 also shows the bottom 10th percentile of the distribution has become

⁸ This chapter was written by Laura Ralston and Giuseppe Zampaglione and also featured in the recent “*Republic of Chad: Selected Poverty Reduction Issues*,” Macroeconomics and Fiscal Management, Country Department ACFW3, Africa Region, The World Bank, June 3, 2015.

⁹ Military expenditures in 2011 prices. Stockholm International Peace Research Institute (2013), Military Expenditure Database, Stockholm.

worse off. Furthermore, where consumption growth has occurred, it has been more substantial for households at the top than at the bottom of the distribution, suggesting that growth has not been inclusive.

2.6 There is regional variation in the incidence of poverty across Chad. In 2011, the incidence of food poverty varied from 3.7% in N'Djamena to 58.3% in Mandoul. Mandoul falls in the Southern zone, as does Logone Occidental, Moyen Chari, Guera, and Tandjile. All five regions recorded food poverty rates above 40% in 2011. This is somewhat unexpected given that the Southern band is known to be the most fertile part of Chad. It is also the most populous part of the country so, together, these regions hold the majority of the country's food poor. The Sahelian zone includes regions such as Chari Baguirmi, Lac, and Ouaddai and northern parts of Guera and Salamat. These have lower poverty rates and populations according to the national household survey, but information from various international partners and Government ministries indicates that food insecurity often affects these regions. Humanitarian food distribution efforts indicate that food insecurity has been most persistent of large scale in Ouaddai and Wadi Fira. The regions bordering Sudan have been conflict-prone and are most affected by refugees from Darfur.

2.7 Food poverty and insecurity across the country fluctuated between 2003 and 2011. While poverty depth and income inequality have not changed at a national level, comparisons between the 2003 and 2011 household surveys indicate variation across time in the geographic distribution of poverty. According to this data, the food poverty rate fell in four Saharan regions (Borkou, Ennedi, Tibesti, and Biltine on average from 32.8% to 21.7%), increased substantially in three Southern regions (Guera and Salamat from 35.3% to 42.8% and in Logone Occidental from 38.6% to 46.4%) and changed very little in three Southern regions and one Sahelian band (Ouaddai +1.5 pp, Chari Baguiri +2.6 pp, Tandjile +2.3 pp and Moyen Chari -0.4 pp). Data on food insecurity from other sources, however, show that food insecurity from 2011 to 2014 is becoming a growing problem in areas such as Wadi Fira, Kanem, and Batha (Sahelian zone), a diminishing problem in Guera and Logone Occidental (Southern zone), and a fluctuating problem in Mandoul and Moyen Chari (also Southern zone). Taken together, this suggests there were poverty reductions in the Saharan zone with poverty either increasing or remaining constant in the Southern and Sahelian zones between 2003 and 2011, while food insecurity has become an increasing problem in the Sahelian zone since 2011.

2.8 A cross-sectional analysis of poverty with livelihoods indicates that households involved in agriculture are more likely to be poor. Households involved in agriculture have an average incidence of poverty below US\$2 per day of over 70%, compared to non-agriculture households where the average incidence is about 40%. This is salient given that 85% of the population is involved in agriculture. Land ownership and participation in agricultural committees or village associations do not seem to mitigate exposure to poverty, indicating scope for strengthening resilience mechanisms. For example, through improving agricultural extension services, increasing community assets to foster higher agricultural productivity, and introducing risk mitigation or weather insurance to lower exposure to income-shocks for agricultural households.

2.9 Pastoralism is also linked to poverty but to a lesser degree than agriculture. Using the tropical livestock unit of analysis specific to Sub-Saharan Africa, the majority of pastoral households

have one to five head of livestock.¹⁰ The average national rate of poverty for this group is about 55%, while 75% still live below US\$2 per day and could be considered vulnerable. Greater livestock ownership corresponds to a lower incidence of poverty suggesting livestock can provide resilience to poverty. Increasing livestock holdings to 21-50 corresponds to an average national rate of poverty of about 35% and US\$2 per day vulnerability of 65%, while increasing livestock holdings to 51-100 corresponds to an average rate of poverty of about 25% and vulnerability of close to 40%.

2.10 Poverty corresponds to household size and demographics. Larger households and households where the household head is older are more vulnerable. Most of the population (5.4 million) live in households headed by a female or male between the age of 25 and 44 years old. However, 4.1 million live in households where the head is above the age of 45 years old and these households have, on average, higher levels of poverty. Over 5.4 million live in households with more than six persons, where the incidence of poverty averages over 55% and living on under US\$2 per day averages 75%. By comparison households with between four and six members have an average rate of poverty of just over 40% and a US\$2 per day vulnerability rate of less than 65%.

2.11 Most household heads have no education or only primary education, yet primary education does not correspond with any difference in poverty or vulnerability. Six million live in households headed by males and females with no education, while 2.4 million live in households where the head has primary education. However, a comparison of the average poverty rates between the two types of households shows little difference suggesting that the rate of return of primary education is very limited in Chad.

2.12 There is a lack of correspondence between poor health and poverty in the cross-sectional data, most likely indicating that ill-health is a frequent occurrence for most of the population. About a quarter of the population, or 2.8 million, were estimated to be sick within a 30-day period during the 2011 national household survey. Given the lack of correspondence between vulnerability and poverty with ill health within the survey period, one could assume that ill health periodically impacts most of the Chadian population.

2.13 An examination of possible sources of vulnerability indicates a regional variation in exposure to different shocks. Kanem and Lac have unexpected exposure to high food prices and inflation given their relative proximity to N'Djamena, while other regions also suffer from increased prices in specific staples (Ouaddai for imported rice) or incurred above average annual increases in food prices (Hadjer Lamis, Logone Occidental, Ouaddai, and Moyen Chari). These trends, however, are not obviously linked to distance from markets, local production volumes, or regional rainfall variation, suggesting these results should be interpreted with caution. Relatedly, there is a lack of correlation between changes to food poverty rates between 2003 and 2011 and trends in food prices. However, the use of regional data, the only scale available for this analysis, likely masks local-level relationships that may exist and points to the importance of more geographically resolute information on food prices and panel-household or community-level data to uncover this relationship and monitor vulnerability.

2.14 Lower rainfall and greater rainfall variability are correlated with smaller improvements in food poverty or even deteriorating food insecurity at a regional level. Annual rainfall varies

¹⁰ Cattle=0.6, camel=0.7, sheep/goat=0.1, donkey=0.2, horses=0.8.

substantially across the country. The Southern regions such as Logone Occidental and Oriental, Mayo Kebbi Est and Ouest, Mandoul, Moyen Chari, and Tandjile have greater rainfall ranging between 900 and 1,100 mm per year. At the other extreme, regions in the Sahara zone average less than 100 mm per year. Regions in the Sahelian zone show the greatest inter-zonal variation with rainfall varying from 200 to 800 mm per year. Both regression analysis and visualizations demonstrate a relationship between lower rainfall or greater inter-annual variability and food poverty and insecurity.

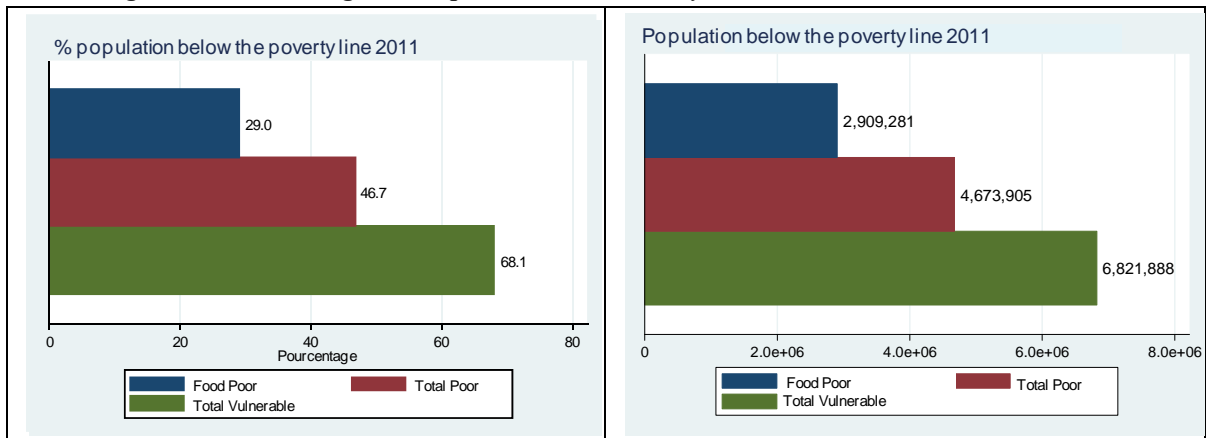
2.15 Conflict and refugees are concentrated in the eastern regions of the country, which recorded greater food insecurity between 2011 and 2014. Wadi Fira, Sila, Ouaddai, Logone Oriental, and Moyen Chari have United Nations Refugee Agency (UNHCR) refugee settlements. Ouaddai, Sila, and Wadi Fira all border with Sudan and have a history of tense relations and conflict. Among these regions, Logone Oriental and Moyen Chari have the highest food poverty rates, while food insecurity data collected between 2011 and 2014 indicate that Wadi Fira, Sila, and Ouaddai have a particularly high incidence of food insecurity.

2.16 Given regional variation in sources of vulnerability, such as climatic conditions, weather, access to markets and food prices, refugee populations, and risk of conflict and fragility, there is reason to anticipate that large proportions of the population in Chad will face multiple threats to poverty deterioration and food insecurity. The analysis presented in this report demonstrates the presence of these sources of vulnerability and their relative salience across the country. It has also uncovered some initial correlations between sources of vulnerability and poverty at a regional level. However, this analysis is limited by the lack of local-level information on sources of vulnerability and panel data on household incomes and consumption, which would enable a more direct examination of how exposure to these shocks translates into changes in consumption and poverty. This analysis thus indicates both the need for local-level information to guide an interpretation of this relationship and the importance of higher-resolution data for targeting purposes. For example, given the data available, it is hard to justify where social assistance should be prioritized within regions. As a follow up activity to complement this analysis, it would be beneficial to conduct community-level qualitative analysis to develop a more detailed understanding of the prevalence and severity of each source of vulnerability at a local level and identify the existing coping and resilience mechanisms.

2. Overview of Poverty and Vulnerability in 2011

2.17 This section provides an overview of poverty and vulnerability showing the incidence of poverty at three different levels: national food poverty line (food poor), national poverty line (total poor), and 1.5 times the national poverty line (total vulnerable). It also provides measures of the poverty depth and severity, and analysis on the overall consumption distribution. Broadly, it shows that poverty is widespread in Chad and, other than the top two deciles, most of the population lives at low levels of consumption.

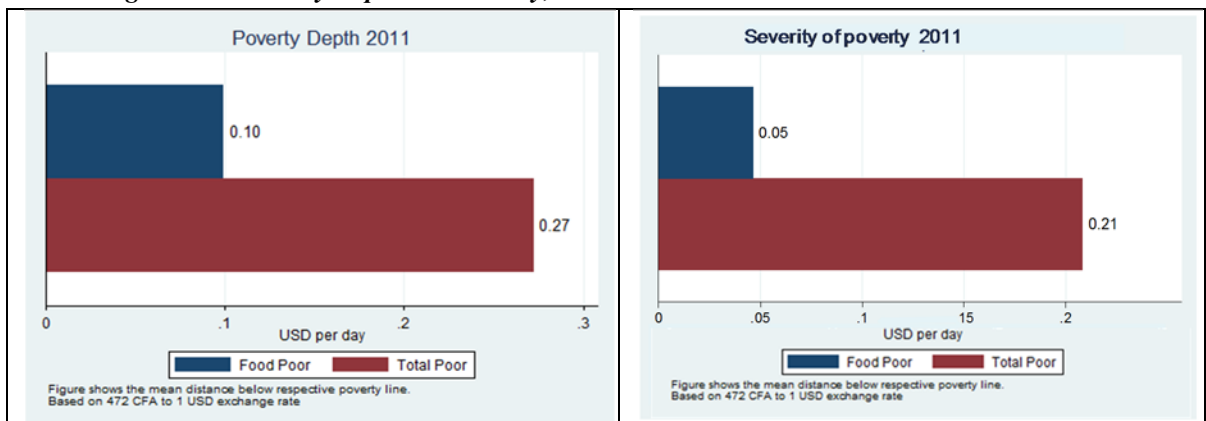
Figure 1 - Percentage and Population below Poverty Line, 2011



Source: Authors' calculations based on ECOSIT 2003 and 2011.

2.18 **Poverty and vulnerability are pervasive in Chad.** According to the most recent national household survey, 29% live below the food poverty line, 47% below the total poverty line, and 68% can be considered vulnerable. Using the exchange rate of 472 CFAF per US\$ for 2011, food poverty is equivalent to living on less than US\$0.93 per day, total poverty to less than US\$1.38 per day and vulnerability to less than US\$2 per day.

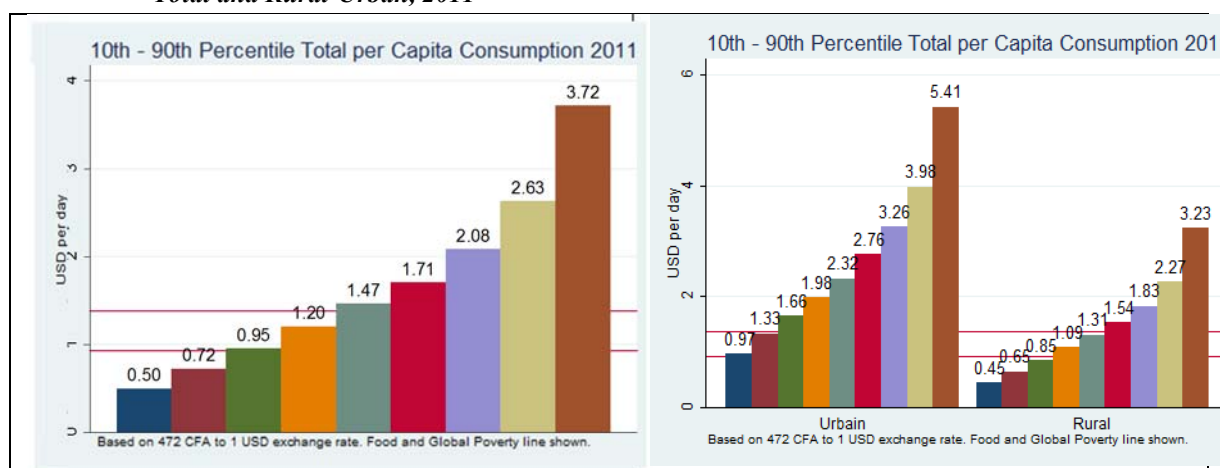
Figure 2 - Poverty Depth and Severity, 2011



Source: Authors' calculations based on ECOSIT 2003 and 2011.

2.19 **The metrics for poverty severity show the mean squared distance below the food and total poverty lines to be, respectively, US\$0.05 and US\$0.21, indicating the degree of inequality below the poverty lines is not significant.** Given the respective populations of approximately 2.9 million and 4.7 million that fall under the categories of food poverty and total poverty, a transfer of US\$0.10 and US\$0.27 implies US\$106 million per year would be the cost of making transfers to eliminate food poverty and US\$286 million per year to eliminate total poverty.

Figure 3 - 10th -90th Percentile Total Per Capita Consumption vs Poverty and Food Poverty Lines, Total and Rural-Urban, 2011



Source: Authors' calculations (2015).

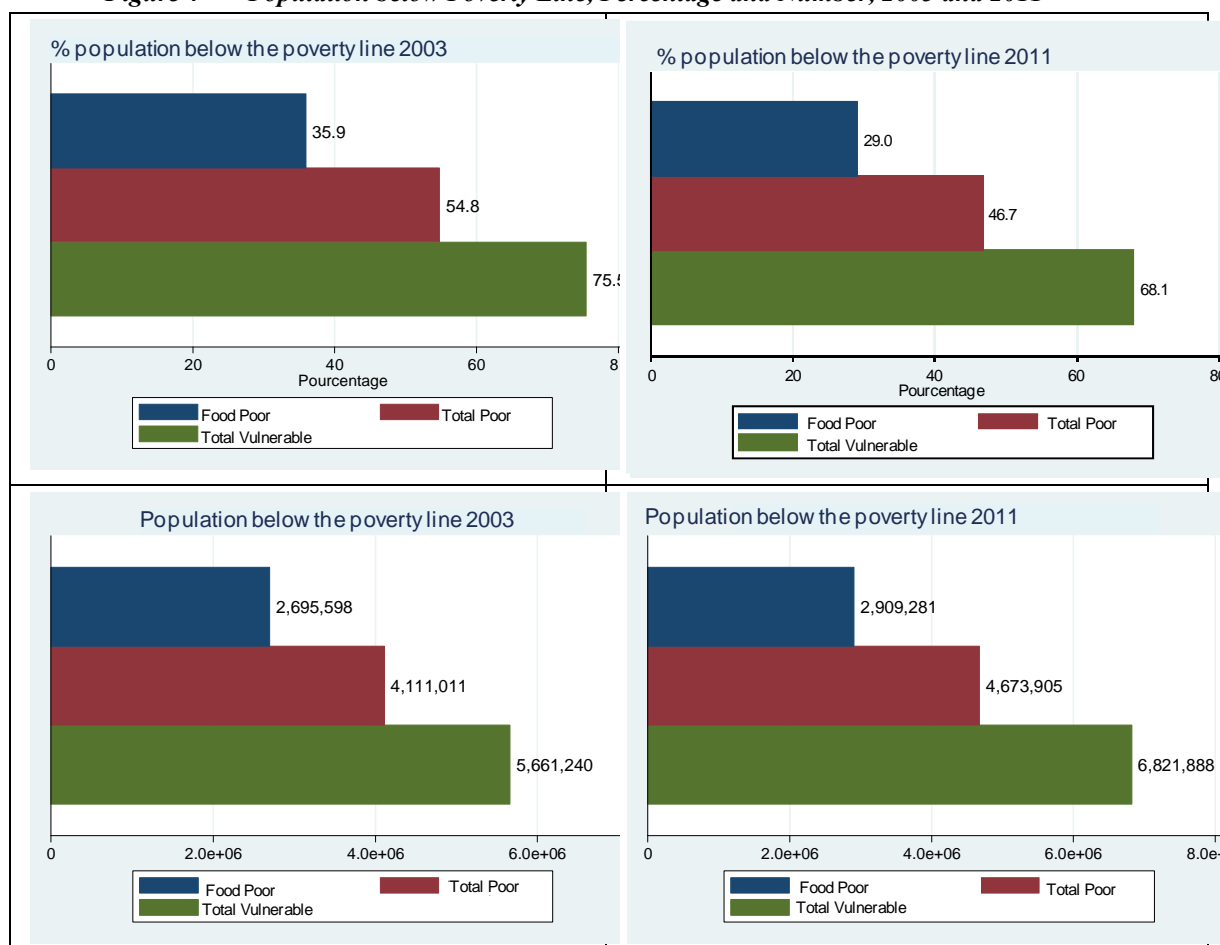
2.20 The cumulative expenditure distribution indicates income inequality is concentrated at the top end of the income distribution. The difference in per capita daily expenditures between the 10th and 50th percentile (P50-P10) is less than US\$1, while the difference between the 50th to 90th percentile (P90-P50) is US\$2.22 with a difference of over US\$1 occurring between the 80th and 90th percentiles.

2.21 The cumulative expenditure distribution indicates greater income inequality in urban areas than in rural areas. The difference in per capita daily expenditures between the 10th percentile and the 90th percentile (P90-P10) is US\$4.44 in urban areas, while the equivalent difference is US\$2.78 in rural areas. The incidence of poverty is much higher in rural areas. Over 50% of the population in rural areas falls below the national poverty line and over 30% below the food poverty line compared to about 20% and 10% in urban areas. Another comparison can be made between the relative wealth in urban and rural areas. The top 10% of consumers from rural areas consume less than those in the top 30% of urban areas.

3. Changes in Poverty and Vulnerability between 2003 and 2011

2.22 This section provides a review of how the incidence of poverty and the consumption distribution has evolved between 2003 and 2011, both at the national level and within regions. Nationally, while the poverty rates have decreased, the absolute number of people living in poverty has increased due to population growth and those in the lowest deciles of the distribution may have seen some deterioration in their consumption. Regionally, there have been both declines and improvements in the poverty rates suggesting that poverty is dynamic in both directions and that large population are at risk of poverty.

Figure 4 - Population below Poverty Line, Percentage and Number, 2003 and 2011

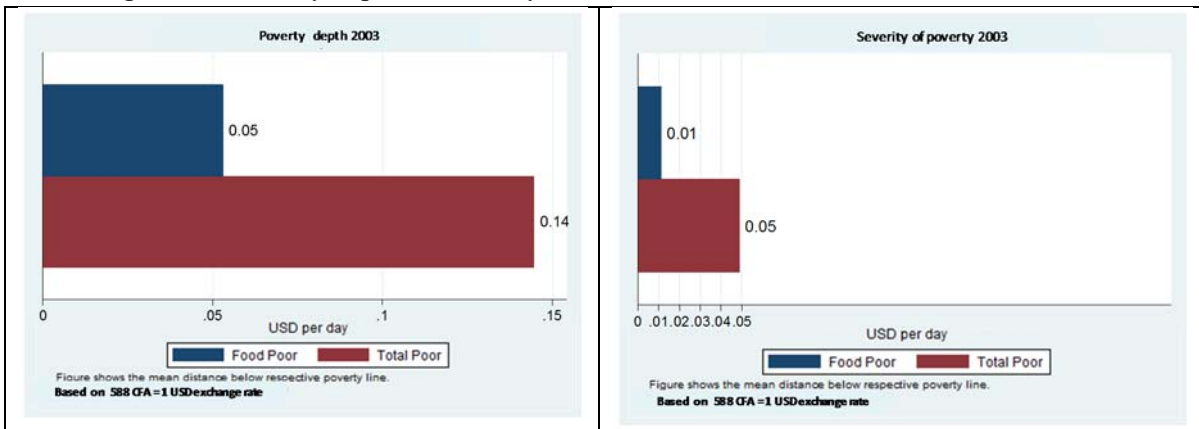


Source: Authors' calculations (2015).

2.23 The rates of poverty and vulnerability in Chad have decreased since 2003, but due to population growth the absolute numbers have increased. Based on an assessment of data collected from national household surveys in 2003 and 2011, poverty and vulnerability have experienced modest improvements. In 2003, 36% of the population was food poor, 55% was poor, and 76% was vulnerable.¹¹ In 2011, these rates had decreased to 29%, 47%, and 68%, respectively. However, due to population growth, the absolute number of poor and vulnerable has increased. In 2011, approximately 6.8 million people in Chad were vulnerable, compared to 5.7 million in 2003.

¹¹ Vulnerability in 2003 has been defined as living under US\$1 per day, while the national poverty and food poverty lines are equivalent to living on US\$0.67 and US\$0.48 per day, respectively, using the exchange rate of 588 CFAF per US\$ for 2003.

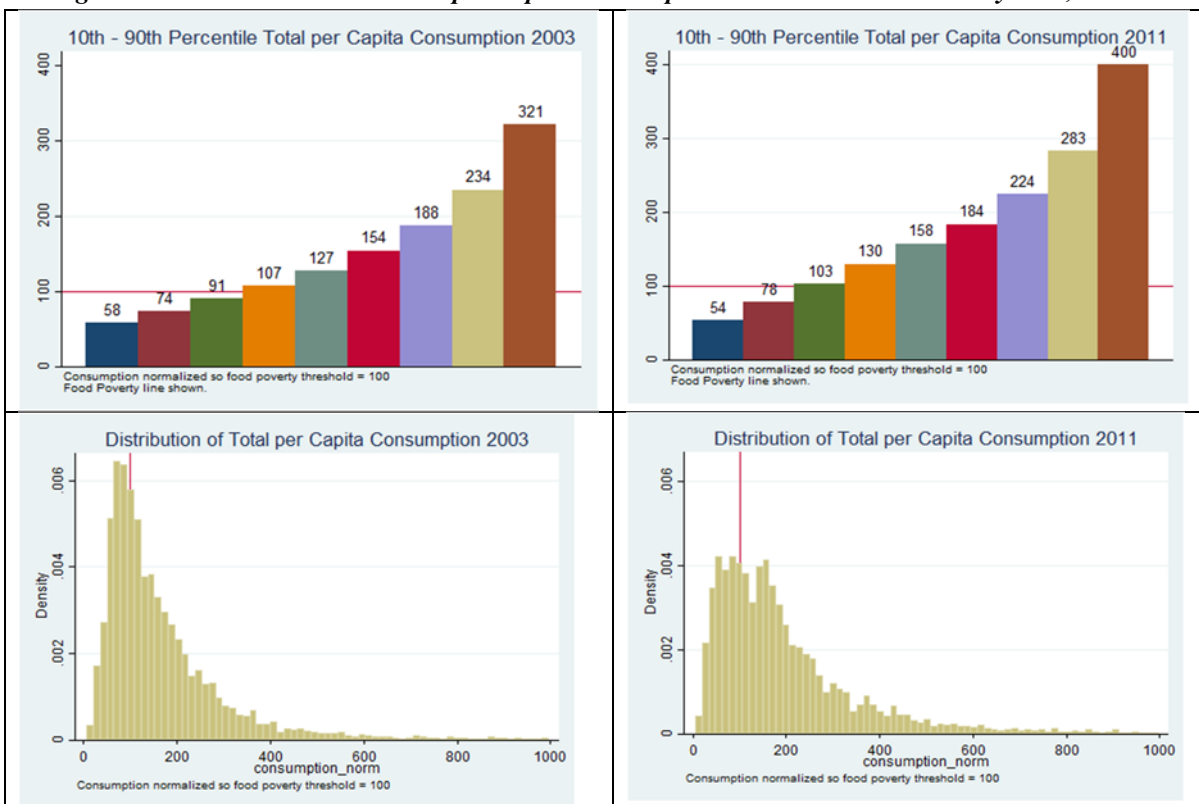
Figure 5 - Poverty Depth and Severity, 2003



Source: Authors' calculations (2015).

2.24 Poverty depth and severity have not changed in relative terms since 2003. In 2011, food poverty depth was US\$0.10 relative to a US\$0.93 poverty line, while in 2003 it was US\$0.05 relative to a US\$0.48 poverty line; both represent approximately 10% of the food poverty line. For total poverty, the equivalent measures were US\$0.27 relative to a US\$1.38 poverty line for 2011 and US\$0.14 relative to a US\$0.67 poverty line; both are approximately 20% of the respective poverty line. Similarly to 2011, the metrics for poverty severity, which show the mean squared distance below each poverty line, were not high indicating little dispersion below the poverty line.

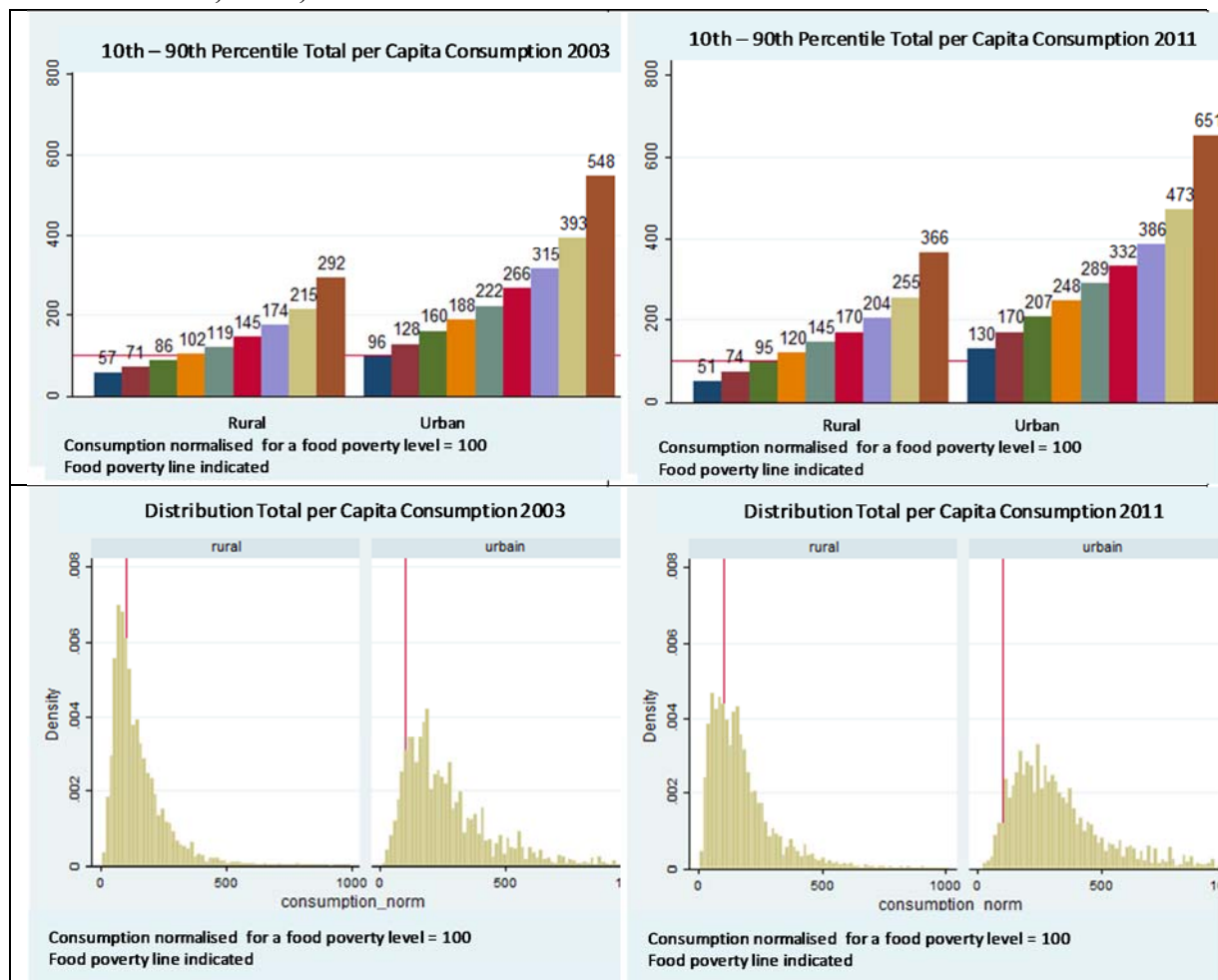
Figure 6 - 10- 90 Percentile Total per Capita Consumption & Distribution vs Poverty Line, 2003-2011



Source: Authors' calculations (2015).

2.25 **The cumulative expenditure distribution shows the bottom 10th percentile became worse off between 2003 and 2011.** Relative to the food poverty line, which is normalized to 100, households in the bottom 10th percentile consumed 58 in 2003 and this decreased to 54 in 2011. Moreover, a comparison of consumption levels between 2003 and 2011 shows increases in consumption follow ranking in the distribution. That is, consumption growth was more substantial for households at the top than at the bottom of the distribution. The histograms of per capita consumption also demonstrate that growth has been concentrated in the upper tail of the distribution.

Figure 7 - 10th -90th Percentile Per Capita Consumption and Distribution vs Food Poverty Line, Rural, Urban, 2003 and 2011



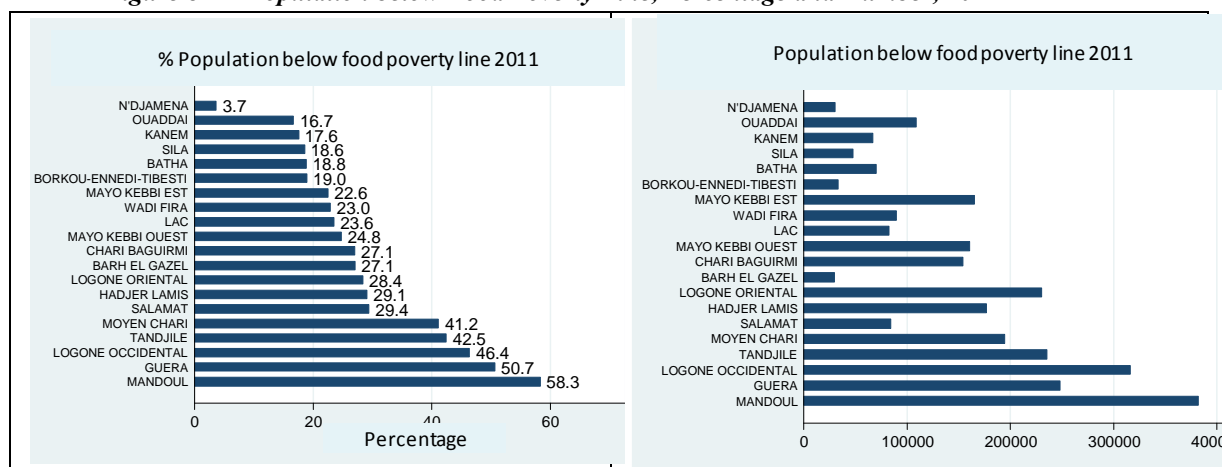
Source: Authors' calculations (2015).

2.26 **The magnitude of poverty and vulnerability is much more significant in rural than urban areas.** While poverty and vulnerability affect many people living in urban areas (40% in 2011), it remains more of a rural phenomenon both in absolute and relative terms. In 2011, about 75% of the rural population was poor or vulnerable, equivalent to approximately 6 million people, while almost no one in urban areas fell below the food poverty line.

2.27 **Consumption growth has been greater in urban areas.** To make a comparison between 2003 and 2011, this analysis has adopted the ECOSIT 2003 classification, which includes the urban areas of

N’Djamena, Sarh in Moyen Chari, Abeche in Ouaddai, and Moundou in Logone Occidental. Using this classification demonstrates more substantial consumption growth in urban areas than rural areas. In addition, growth has been greater at the lower end of the distribution in urban areas than at the lower end of the distribution in rural areas.

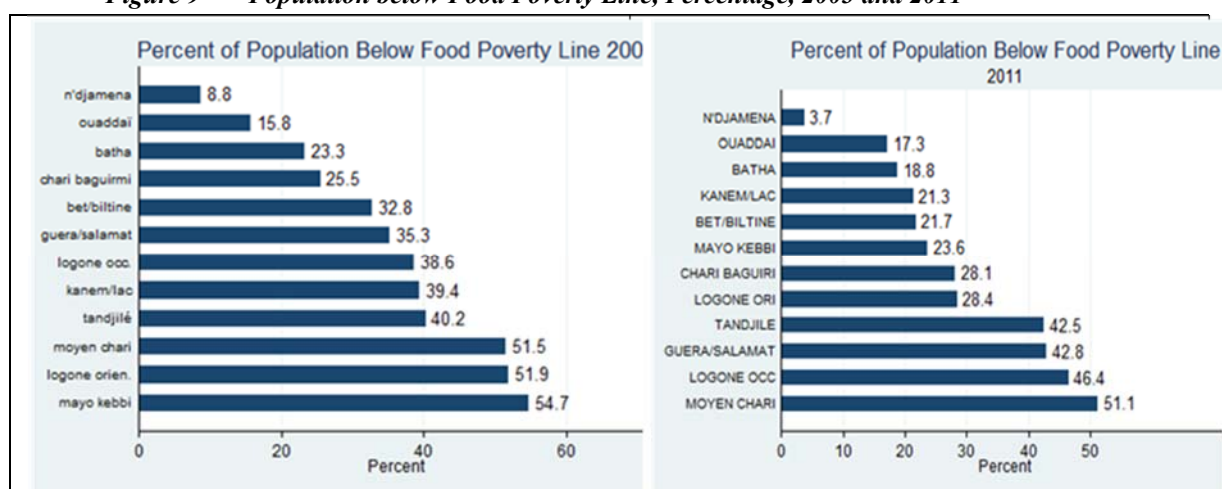
Figure 8 - Population below Food Poverty Line, Percentage and Number, 2011



Source: Authors’ calculations (2015).

2.28 Food poverty varies across the country. According to ECOSIT 2011 data, the highest poverty rates are located in regions that fall in the Southern zone, an area known to be the most fertile part of Chad. For example, Mandoul, Logone Occidental, Moyen Chari, Guera, and Tandjile all fall in the Southern band but had food poverty rates above 40% in 2011. This is also the most populous part of the country, so together these regions represent the majority of the country’s food poor. The Sahelian zone includes regions such as Chari Baguirmi, Lac, Ouaddai and northern parts of Guera and Salamat. These regions have lower poverty rates and populations. N’Djamena has the lowest regional food poverty rate at just 3.7% and correspondingly a lower number of the food poor are located in the capital.

Figure 9 - Population below Food Poverty Line, Percentage, 2003 and 2011



Source: Authors’ calculations (2015).

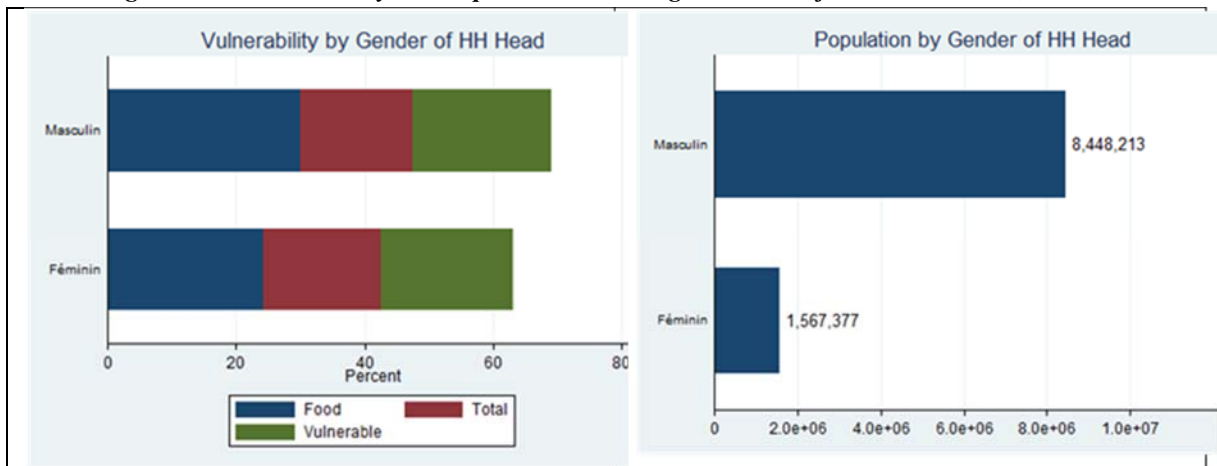
2.29 Food poverty across the country fluctuated between 2003 and 2011. In 2003, 12 regions, including N’Djamena, were classified in the national household survey, while 20 regions, including

N’Djamena, were classified in the 2011 national household survey. However, given information about the stratum used in each survey, it is possible to combine regions represented in the 2011 survey to allow for regional comparisons between the two years. This shows that while some regions experienced little change to their food poverty rates (e.g., Ouaddai +1.5 pp, Chari Baguiri +2.6 pp, Tandjile +2.3 pp, and Moyen Chari -0.4 pp), other regions experienced large changes. The most noticeable includes BET/Biltine -11.1 pp, Guera/Salamat +7.5 pp, Logone Occidental +7.8 pp, Kanem/Lac -18.1 pp, Logone Oriental -23.5 pp, and Mayo Kebbi -31.1 pp. Of the 12 regions, five experienced increases in their food poverty rates.

4. *Covariates of Vulnerability and Poverty*

2.30 **This section considers the correlation between various household characteristics with poverty and vulnerability.** While many characteristics, such as larger household sizes and rudimentary living conditions, could be expected among households living in poverty, the analysis also sheds light on areas of policy interest. For example, attainment of even primary education is very low and among households with this level of education, the incidence of poverty is not particularly lower. Land ownership also does not have a strong mitigating impact on poverty, even among rural and agriculture-dependent households.

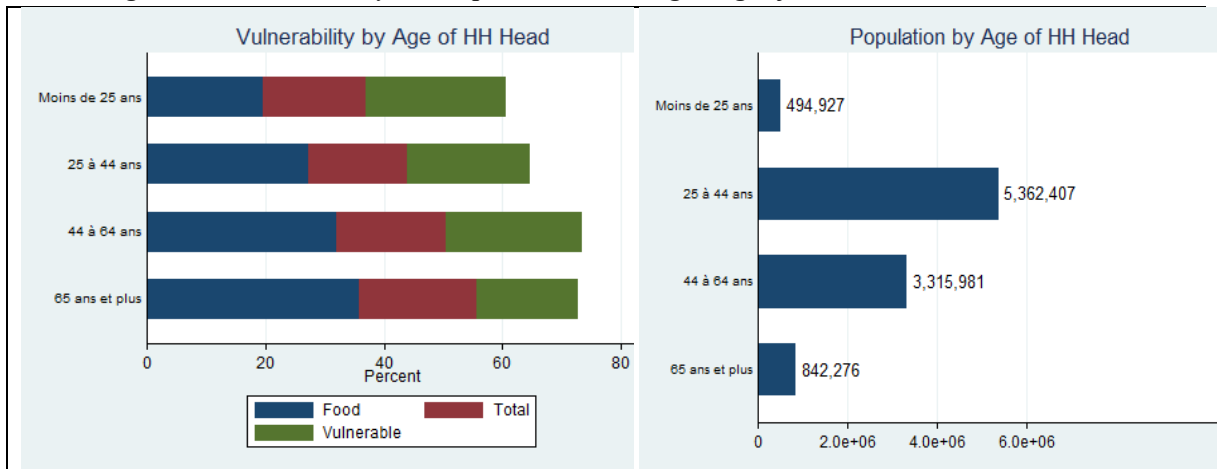
Figure 10 - Vulnerability and Population according to Gender of Household Head, 2011



Source: Authors’ calculations (2015).

2.31 **Female-headed households have lower poverty and vulnerability but represent less than 15% of the population.** In households headed by females, the respective food poverty, total poverty and vulnerability rates are around 25%, 43%, and 63%, compared to 30%, 47%, and 68% in male-headed households.

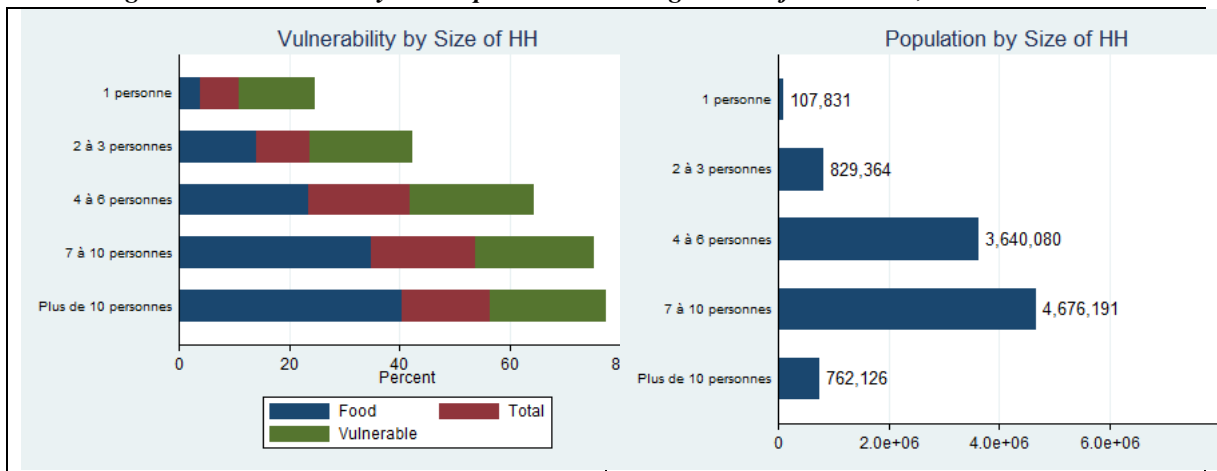
Figure 11 - Vulnerability and Population according to Age of Household Head, 2011



Source: Authors' calculations (2015).

2.32 Households with older heads have higher poverty and vulnerability. Most of the population (5.4 million) lives in households headed by a female or male between the age of 25 and 44 years old. However, 4.1 million live in households where the head is over the age of 45 years old and these household have, on average, higher levels of poverty and vulnerability.

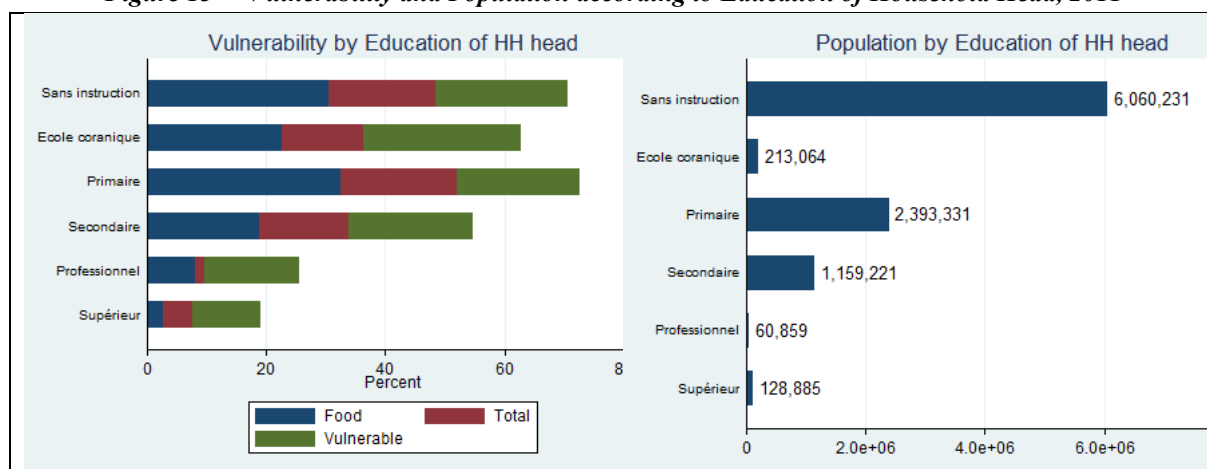
Figure 12 - Vulnerability and Population according to Size of Household, 2011



Source: Authors' calculations (2015).

2.33 Larger households have higher incidences of poverty and vulnerability. Over 5.4 million live in households with more than six persons, where the total incidence of poverty averages over 55% and vulnerability averages approximately 75%. By comparison, households with four to six members have an average rate of poverty of just over 40% and vulnerability of less than 65%.

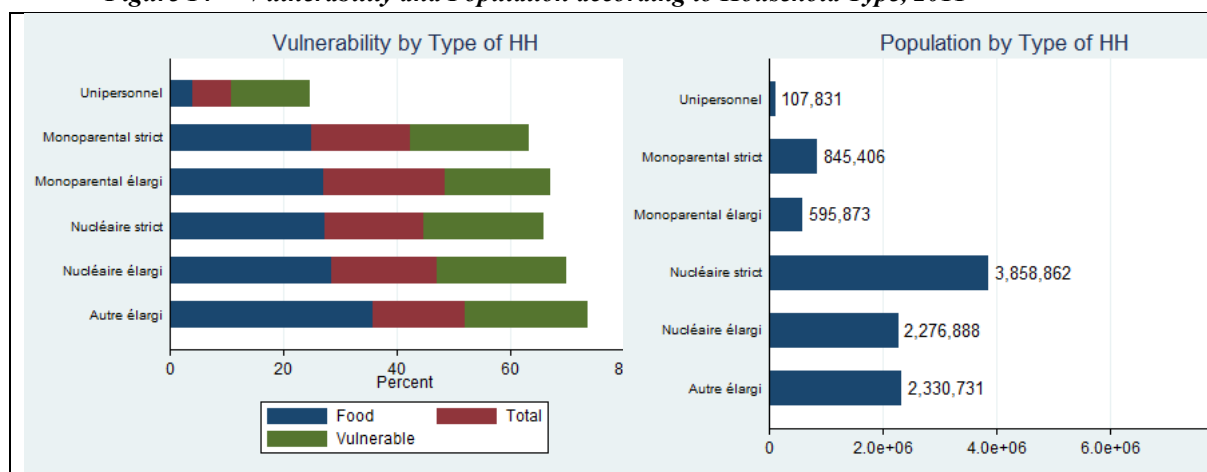
Figure 13 - Vulnerability and Population according to Education of Household Head, 2011



Source: Authors' calculations (2015).

2.34 Most household heads have no education or only primary education, yet primary education does not correspond with any difference in poverty or vulnerability. Six million live in households headed by males and females with no education, while 2.4 million live in households where the head has primary education. However, a comparison of the average poverty and vulnerability rates between the two types of households shows little difference suggesting the return to primary education is very limited in Chad. The minority of households where the head obtains secondary education or higher on average fares much better. With secondary education, the vulnerability rate drops from over 70% to about 55% and the poverty rate drops from over 50% to about 35%. Those with vocational and tertiary education have the lowest rates of vulnerability and poverty (approximately 20% and 10% respectively).

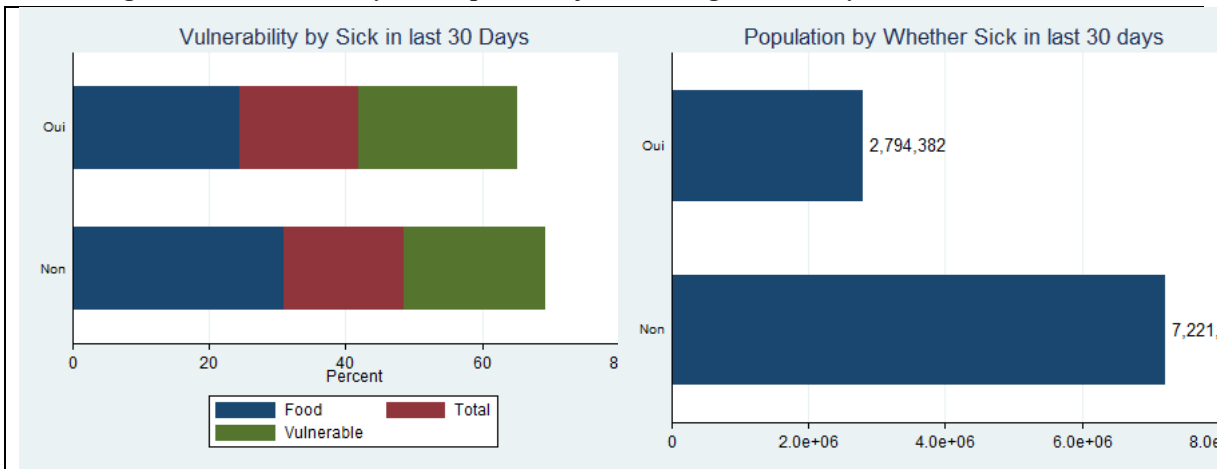
Figure 14 - Vulnerability and Population according to Household Type, 2011



Source: Authors' calculations (2015).

2.35 Household type does not influence poverty and vulnerability. Strictly nuclear households represent 3.8 million, while 2.3 million live in each of extended nuclear or other extended households. About 1.4 million live in single parent households. However, between these household types, the average incidence of poverty and vulnerability varies little.

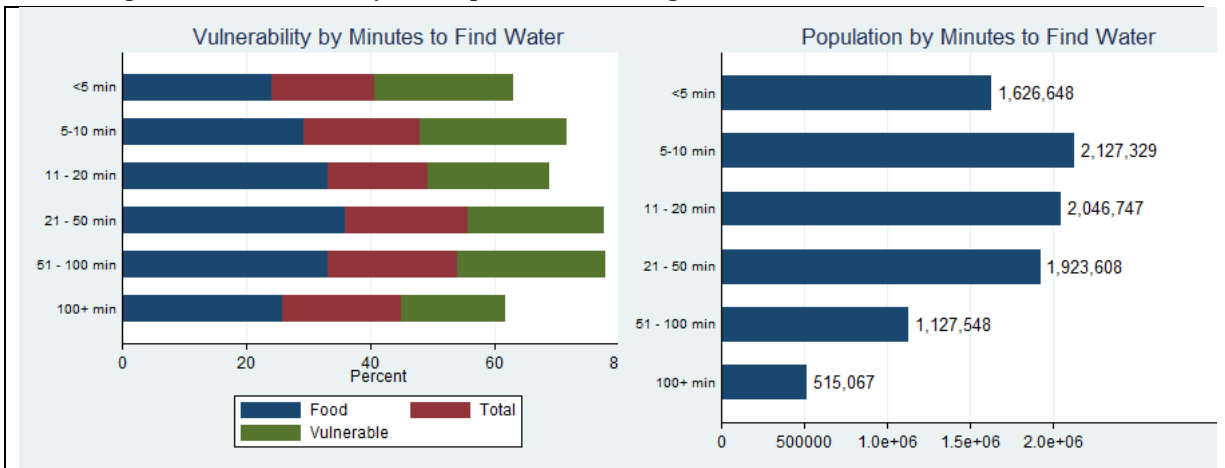
Figure 15 - Vulnerability and Population if Sick during Last 30 Days, 2011



Source: Authors' calculations (2015).

2.36 Ill health within the household does not correspond with changes to the distribution of vulnerability or poverty. About a quarter of the population, or 2.8 million, were estimated to be sick within a 30-day period during the 2011 national household survey. Given the lack of correspondence between vulnerability and poverty with ill health, one could assume that ill health periodically impacts most of the Chadian population.

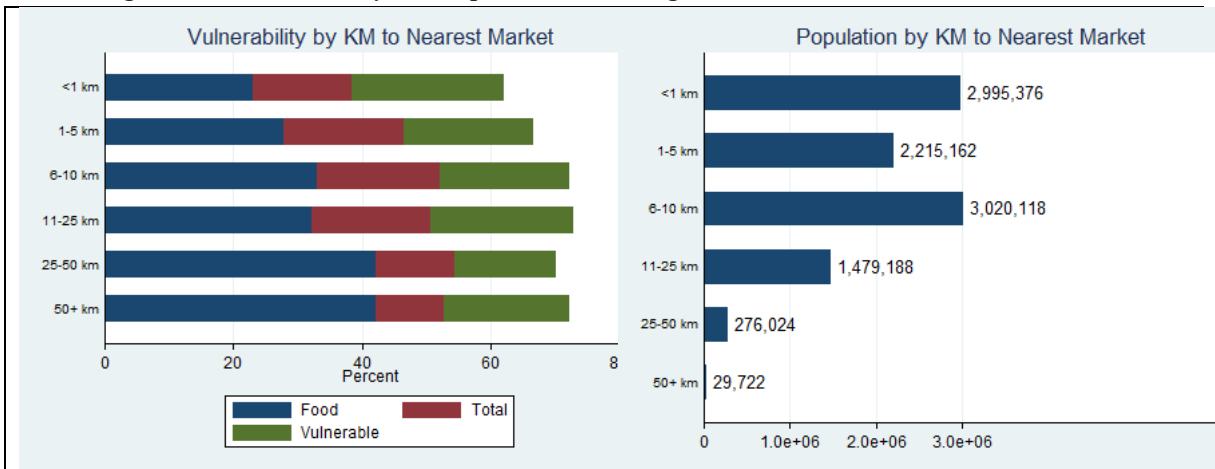
Figure 16 - Vulnerability and Population according to Minutes to Find Water, 2011



Source: Authors' calculations (2015).

2.37 Over 3.5 million people live in households where more than 20 minutes is spent looking for water during the dry season. Poverty and vulnerability is more prevalent among households who have lower access to water, although this correlation is relatively weak.

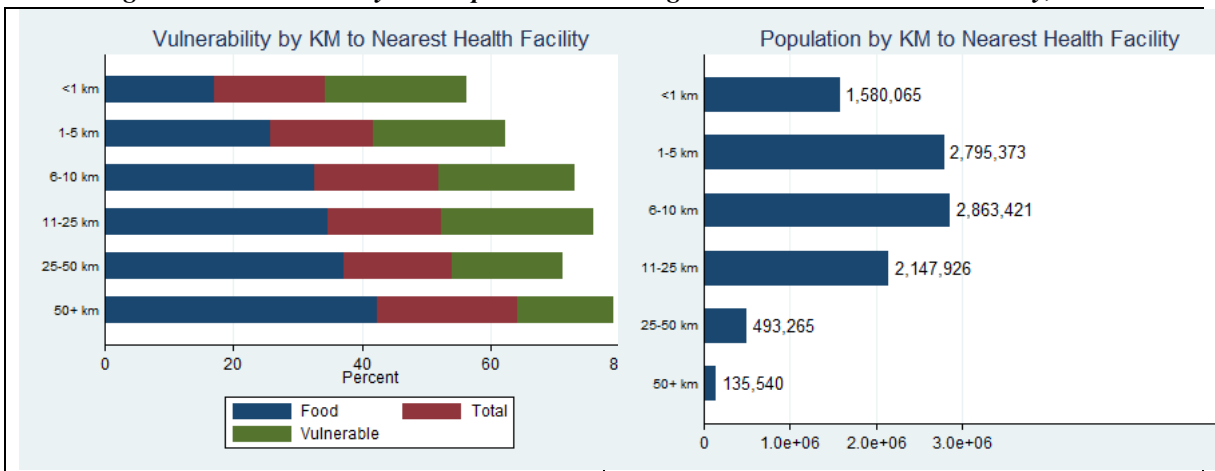
Figure 17 - Vulnerability and Population according to Km to Nearest Market, 2011



Source: Authors' calculations (2015).

2.38 About half the population lives within 5 km of a market. Food poverty, however, increases as households are located farther from markets. For example, among the households more than 25 km from their nearest market, food poverty averages about 40%; while among households within 5 km of their nearest market, food poverty averages less than 30%.

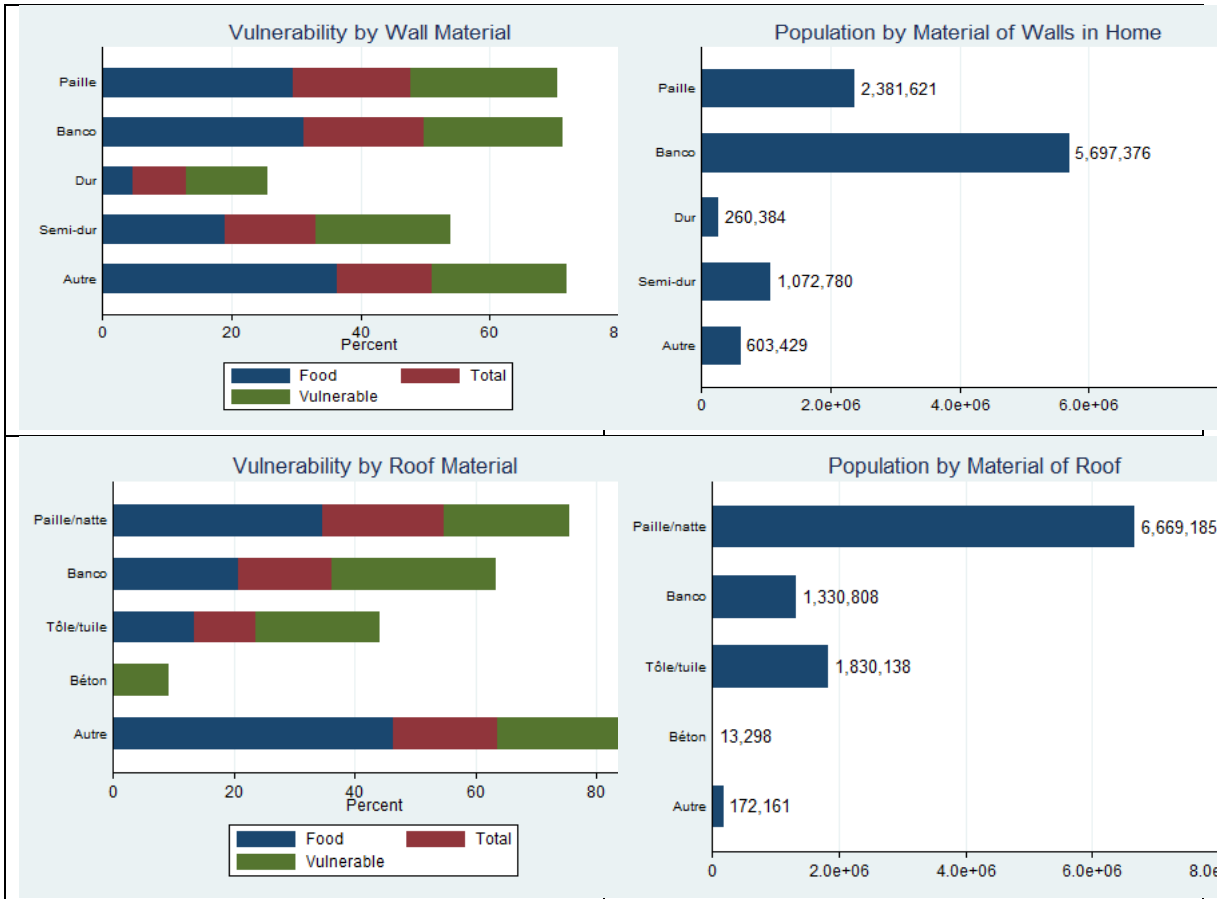
Figure 18 - Vulnerability and Population according to Km to Nearest Health Facility, 2011



Source: Authors' calculations (2015).

2.39 The majority of the population lives farther than 5 km from their nearest health care facility. Both measures of poverty and vulnerability increase among households that are located farther from their nearest health facilities.

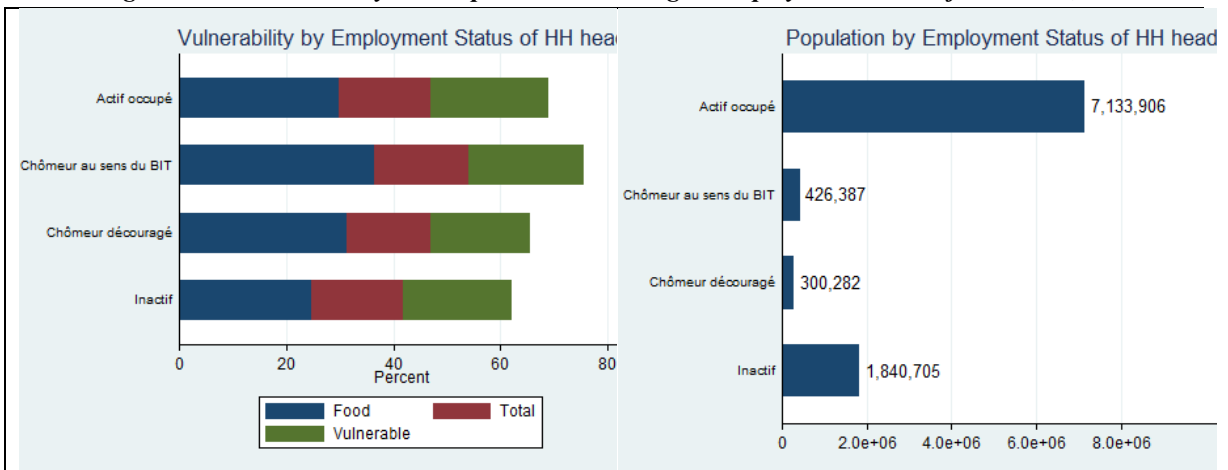
Figure 19 - Vulnerability and Population according to Homestead Roof and Wall Materials, 2011



Source: Authors' calculations (2015).

2.40 Homestead characteristics such as the materials of the roof can correspond to differences in poverty and vulnerability. Most homes have walls made of mud daub or straw, while roofs are made mainly of straw or matting. Where the home has no solid walls or the roof is made of straw or matting generally, households have high rates of poverty and vulnerability.

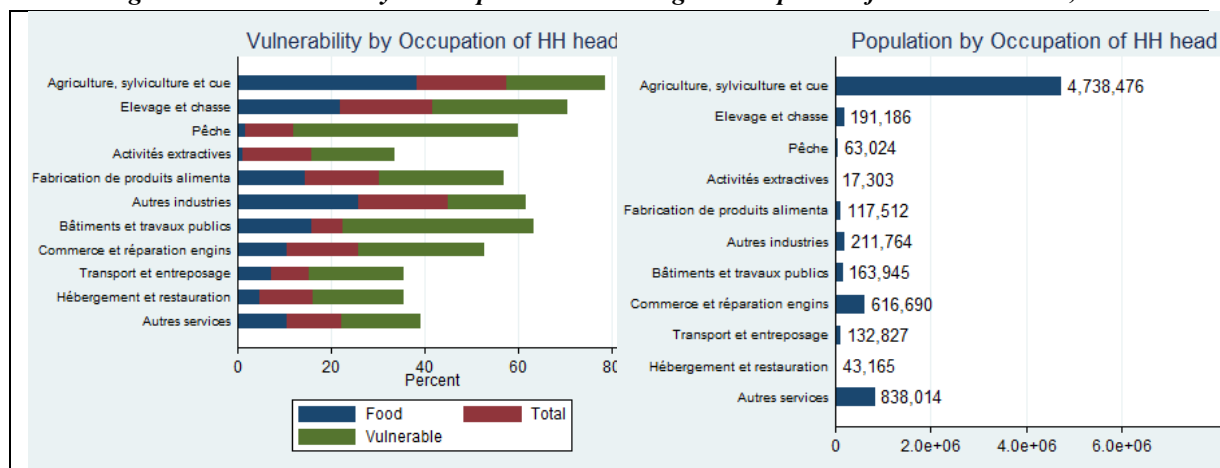
Figure 20 - Vulnerability and Population according to Employment Status of HH Head, 2011



Source: Authors' calculations (2015).

2.41 **Employment of the household head does not correspond to lower poverty or vulnerability.** In ECOSIT 2011, most of the households reported an actively working household head. These households did not, on average, appear to be less vulnerable or poor than households where the head was inactive or unemployed.

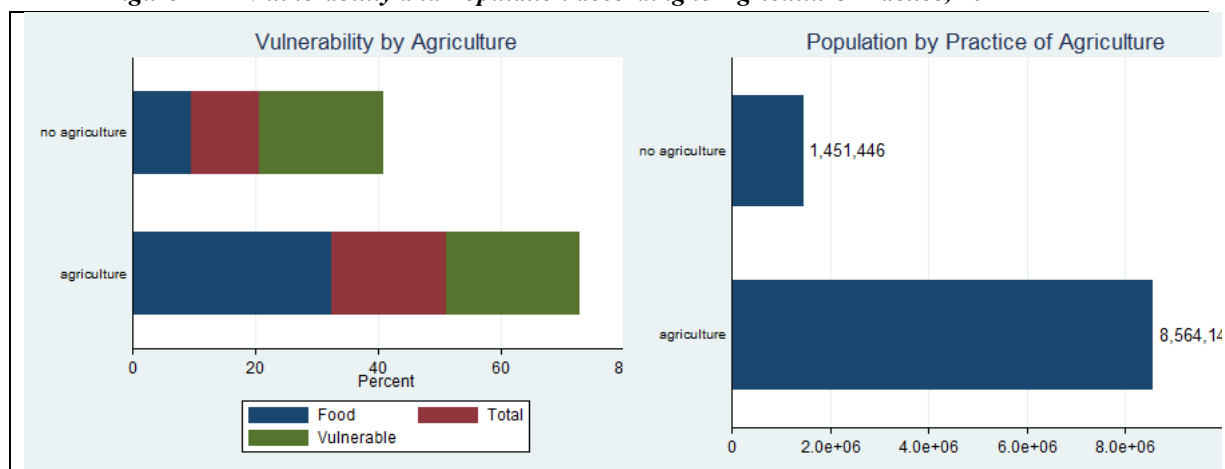
Figure 21 - Vulnerability and Population according to Occupation of Household Head, 2011



Source: Authors' calculations (2015).

2.42 Vulnerability and poverty are most prevalent among households involved in agriculture, which is the most common occupation for household heads. Agricultural households where the average rate of food poverty is close to 40% and overall vulnerability 80% represent 4.7 million. Households involved in industry and services have lower rates of poverty and vulnerability but cover a much lower proportion of the population.

Figure 22 - Vulnerability and Population according to Agriculture Practice, 2011

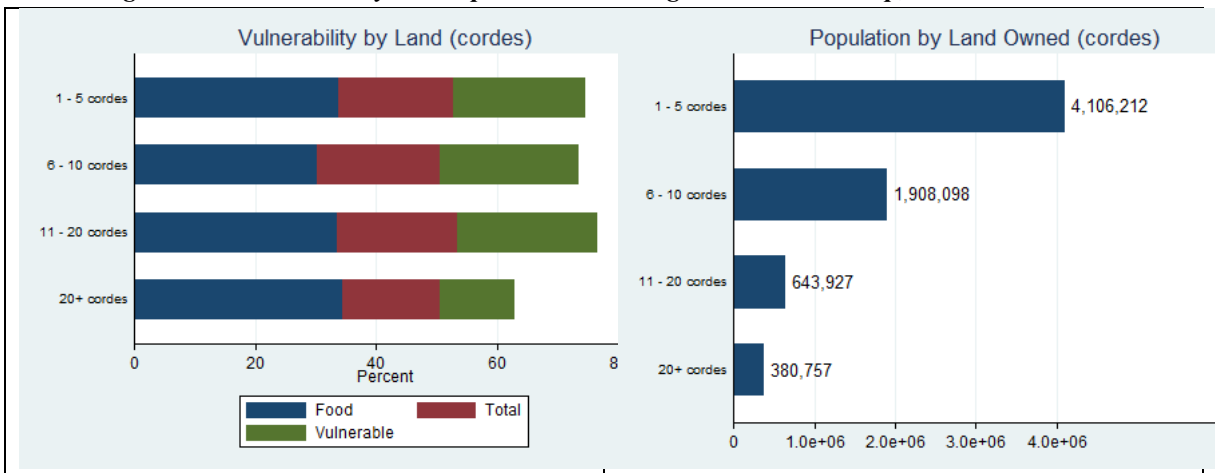


Source: Authors' calculations (2015).

2.43 Households involved in crop production experience greater poverty and vulnerability than those not involved in arable agriculture. Even if the main occupation of the household head is not

agriculture, over 85% of households are involved in crop production of some sort. On average, these households are substantially poorer and more vulnerable.

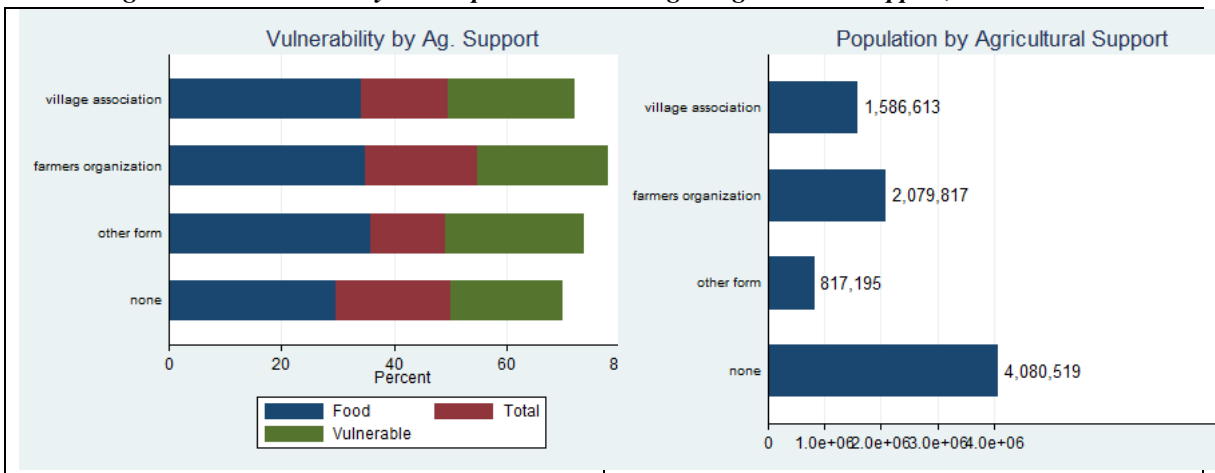
Figure 23 - Vulnerability and Population according to Land Ownership, 2011



Source: Authors' calculations (2015).

2.44 Greater land ownership does not correspond with reductions to poverty and vulnerability in the aggregate population. Most households report having less than 20 *cordes* of land, and it is only when households have more than 20 *cordes* of land any discernible changes to poverty and vulnerability rates can be detected. Regression analysis focusing on just rural and agricultural households indicates the returns to land ownership are positive but very small.

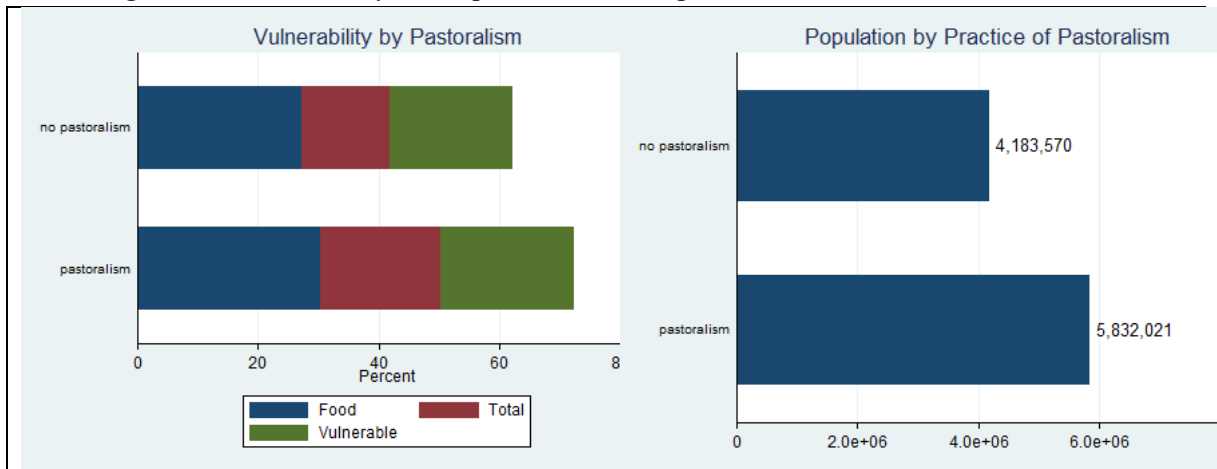
Figure 24 - Vulnerability and Population according to Agricultural Support, 2011



Source: Authors' calculations (2015).

2.45 Agricultural support through the form of a village association or farmers organization does not reduce poverty and vulnerability. About half of the agricultural households report belonging to an organization that could potentially provide agricultural support. This did not, however, correspond to any differences in the average incidence of vulnerability or poverty.

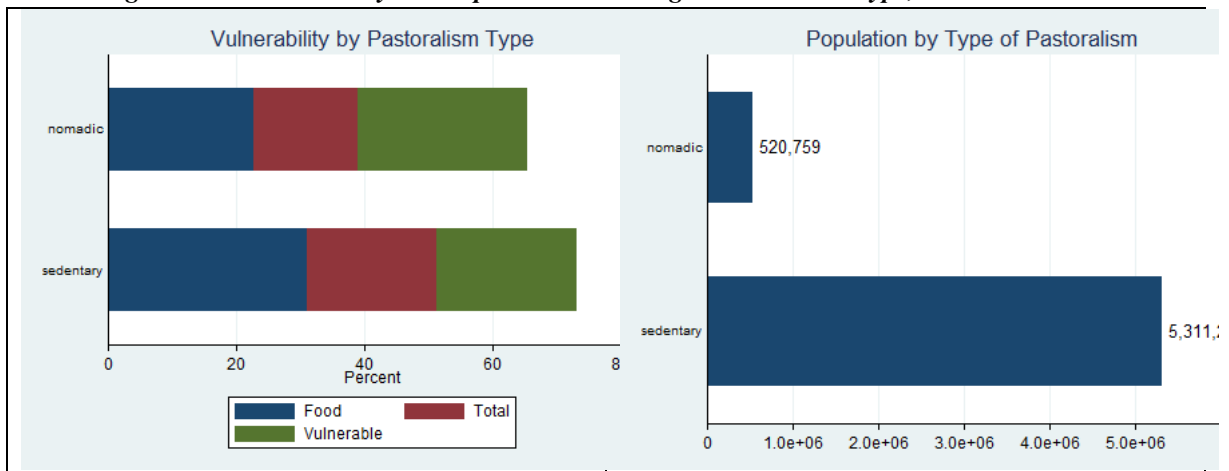
Figure 25 - Vulnerability and Population, according to Pastoralism Involvement, 2011



Source: Authors' calculations (2015).

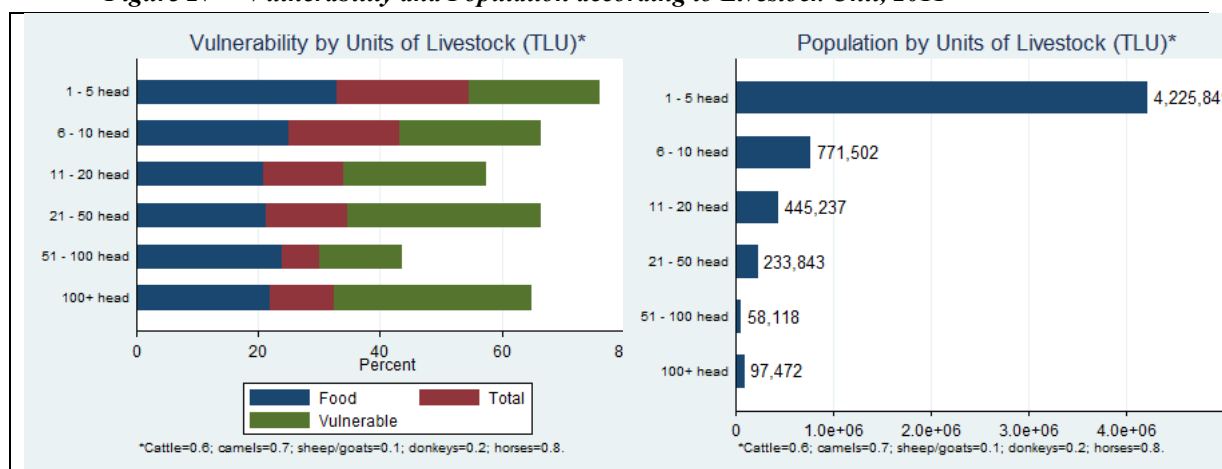
2.46 Households involved in pastoralism experience greater poverty and vulnerability than those not involved in pastoralism. Close to 60% of the population is involved in pastoralism, and these households, on average, experience higher rates of poverty and vulnerability.

Figure 26 - Vulnerability and Population according to Pastoralism Type, 2011



Source: Authors' calculations (2015).

2.47 Both nomadic and sedentary pastoralists experience poverty and vulnerability. Most of the pastoral population is involved in sedentary raising of livestock.

Figure 27 - Vulnerability and Population according to Livestock Unit, 2011

Source: Authors' calculations (2015).

2.48 Increased livestock holdings corresponds to marginally lower levels of poverty and vulnerability. The majority of pastoral households has only one to five units of livestock. The average rate of poverty for this group is about 55% and vulnerability affects about 75%. Increasing livestock holdings to 11-20 units corresponds to an average rate of poverty of about 35% and food poverty close to 20%. However, vulnerability can remain high among pastoral households that own higher numbers of livestock indicating asset stocks of livestock do not insulate households from low income vulnerability. Thus, increased livestock holdings corresponds to reduced vulnerability and poverty, but vulnerability and poverty are still surprisingly prevalent among households with large numbers of livestock.

5. Regional Correlates of Food Insecurity

2.49 This section compares food insecurity at a regional level with measures of poverty from the ECOSIT 2011. It also considers the correlates of food insecurity by examining the correlation of food insecurity with measures of household livelihoods from the ECOSIT 2011. It finds a reasonable correlation between food poverty and food insecurity in 2011, but food insecurity is highly variable from year to year. As with food poverty, there is also a correlation between dependence on agricultural and pastoral livelihoods with food insecurity.

Table 1 - *Population in Food Insecurity by Region, 2011*

Region	Population in Moderate to Severe Food Insecurity						ECOSIT 2011	
	Dec-11		Nov-13		Mar-14		% food poor	% total poor
Batha	252,000	51%	151,629	30%	131,229	23%	19%	46%
BeG	124,100	50%	98,509	37%	149,605	49%	27%	43%
Chari Baguirmi	140,900	23%	27,903	4%	68,787	10%	27%	41%
Guéra	302,100	58%	226,429	43%	171,468	30%	51%	67%
Hadjer Lamis	102,000	19%	25,419	4%	114,237	17%	29%	46%
Kanem	156,000	45%	132,407	39%	201,318	50%	18%	35%
Lac	116,700	24%	104,098	23%	124,573	24%	24%	46%
Logone Occidental	281,100	50%	140,630	23%	124,856	15%	46%	66%
Logone Oriental	365,400	49%	173,215	23%	216,185	23%	28%	49%
Mandoul	161,400	25%	73,942	11%	181,375	24%	58%	71%
Mayo K. E	215,300	29%	54,883	7%	92,691	10%	23%	38%
Mayo K.O	186,500	35%	41,043	7%	67,921	10%	25%	47%
Moyen Chari	215,400	44%	23,761	4%	149,026	21%	41%	61%
Ouaddai	347,700	61%	220,759	36%	251,473	29%	17%	35%
Salamat	100,300	38%	75,787	28%	76,484	21%	29%	48%
Sila	150,600	65%	64,755	25%	87,491	19%	19%	37%
Tandjilé	230,400	35%	114,574	17%	120,146	15%	43%	65%
Wadi Fira	174,300	45%	269,080	61%	298,635	49%	23%	38%
Total	3,622,200	40%	2,018,823	21%	2,627,499	23%	29%	47%

Mar-14 data from the National Food Security Information and Early Warning System (*Système d'Information sur la Sécurité Alimentaire et l'Alerte Précoce/SISAAP*).¹²

Nov-13 data from FAO, WFP, Agriculture and Irrigation Ministry (*Ministère de l'Agriculture et de l'Irrigation*).¹³

Dec-11 data from UNDP.¹⁴

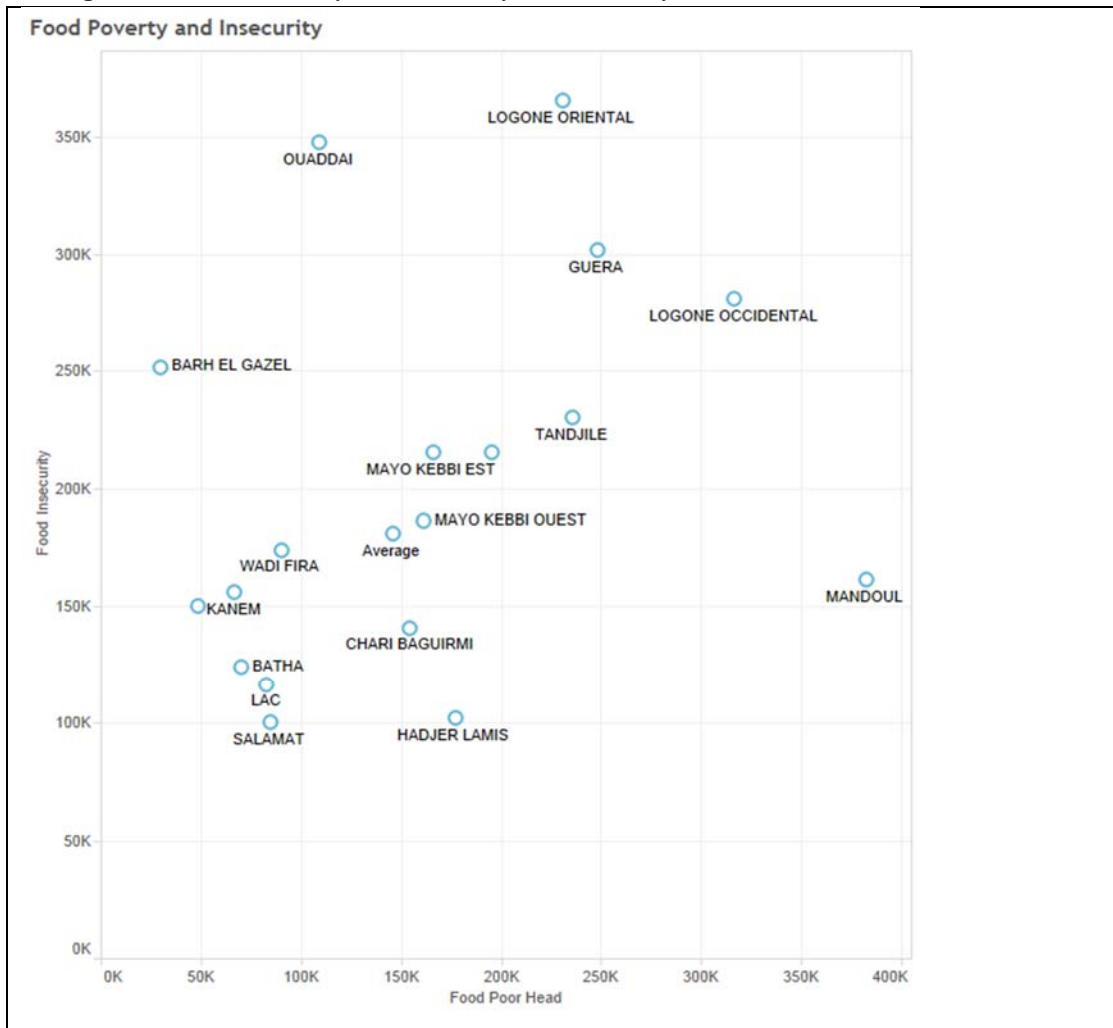
2.50 According to information from various international partners and Government ministries, food insecurity is prevalent in the Sahelian belt despite lower poverty and vulnerability statistics recorded in ECOSIT 2011. The ECOSIT 2011 data show the highest incidence of poverty occurs in regions that mainly fall in the Southern zone (e.g., Mandoul, Logone Occidental, Logone Oriental, Moyen Chari, Guera, and Tandjile). Food insecurity, however, is prominent in regions that fall in the Sahelian zone (e.g., Ouaddai and Wadi Fira), which do not have such high poverty rates (see Figure 28).

¹² Data provided by Marianne Tinlot, FAO.

¹³ PAM (2013).

¹⁴ Republic of Chad and UNDP (2012).

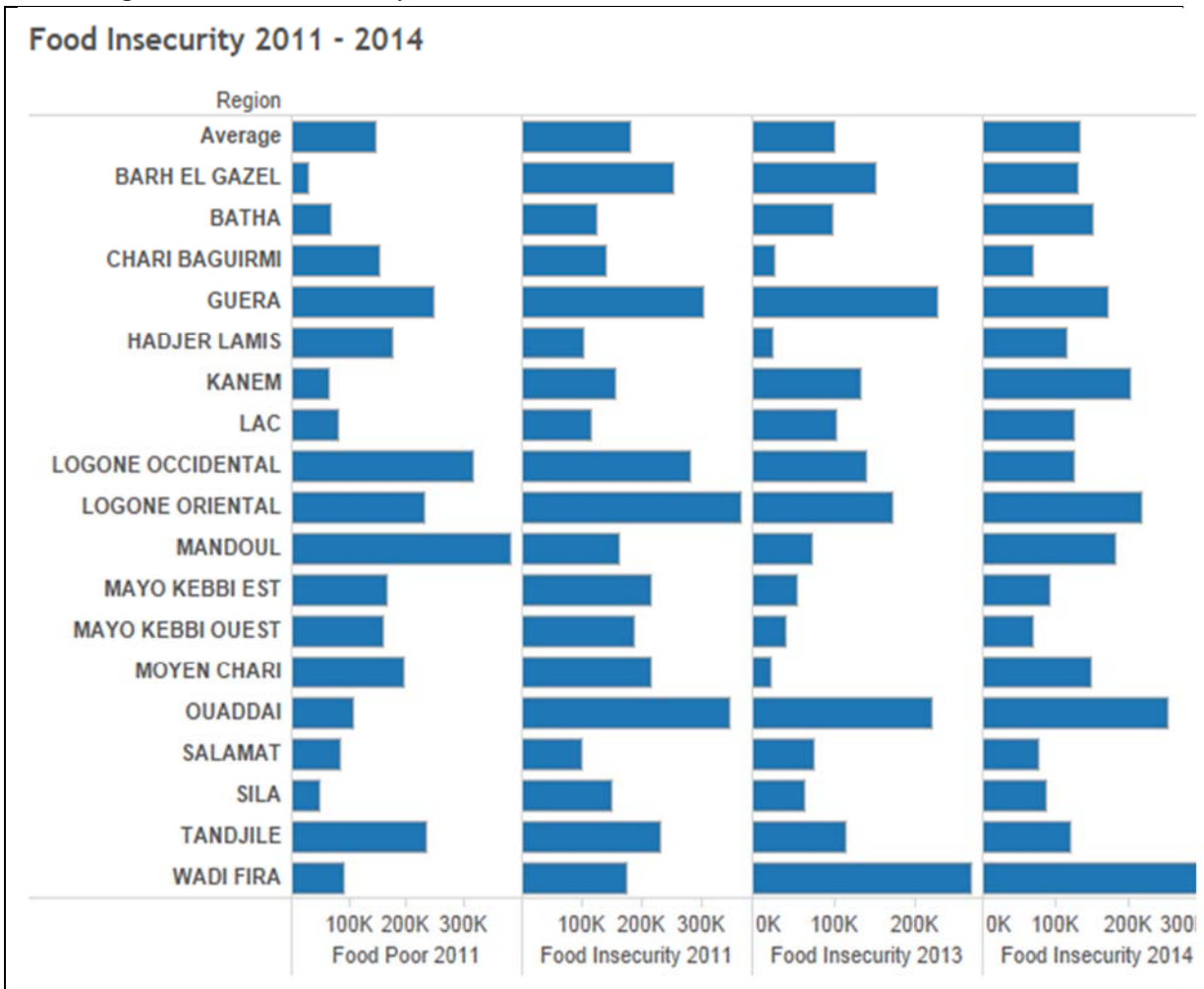
Figure 28 - Food Poverty and Insecurity Prevalence by Zone, 2011



Source: Authors' calculations (2015).

2.51 **Overall, food insecurity and food poverty were closely correlated in 2011.** Other than the discrepancies noted above, there is a close correspondence between food poverty and insecurity.

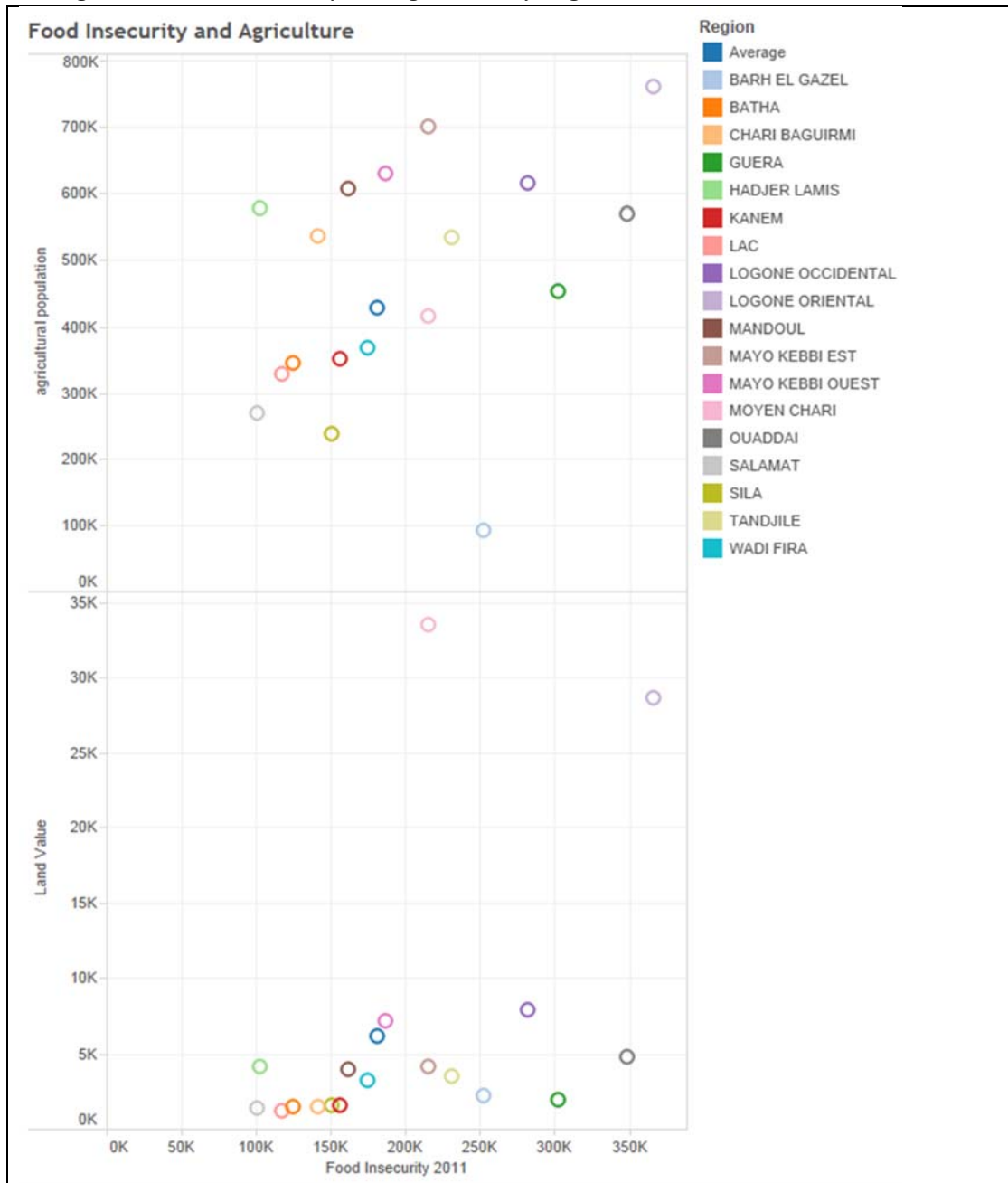
Figure 29 - Food Insecurity, 2011-2014



Source: Authors' calculations (2015).

2.52 **Food insecurity is persistent in some areas while varying in others.** Food insecurity has persistently been most widespread in Ouaddai and Logone Oriental since 2011. However, it is becoming a growing problem in areas such as Wadi Fira, Kanem, and Batha, a diminishing problem in Guera and Logone Occidental, and a fluctuating problem in Mandoul and Moyen Chari.

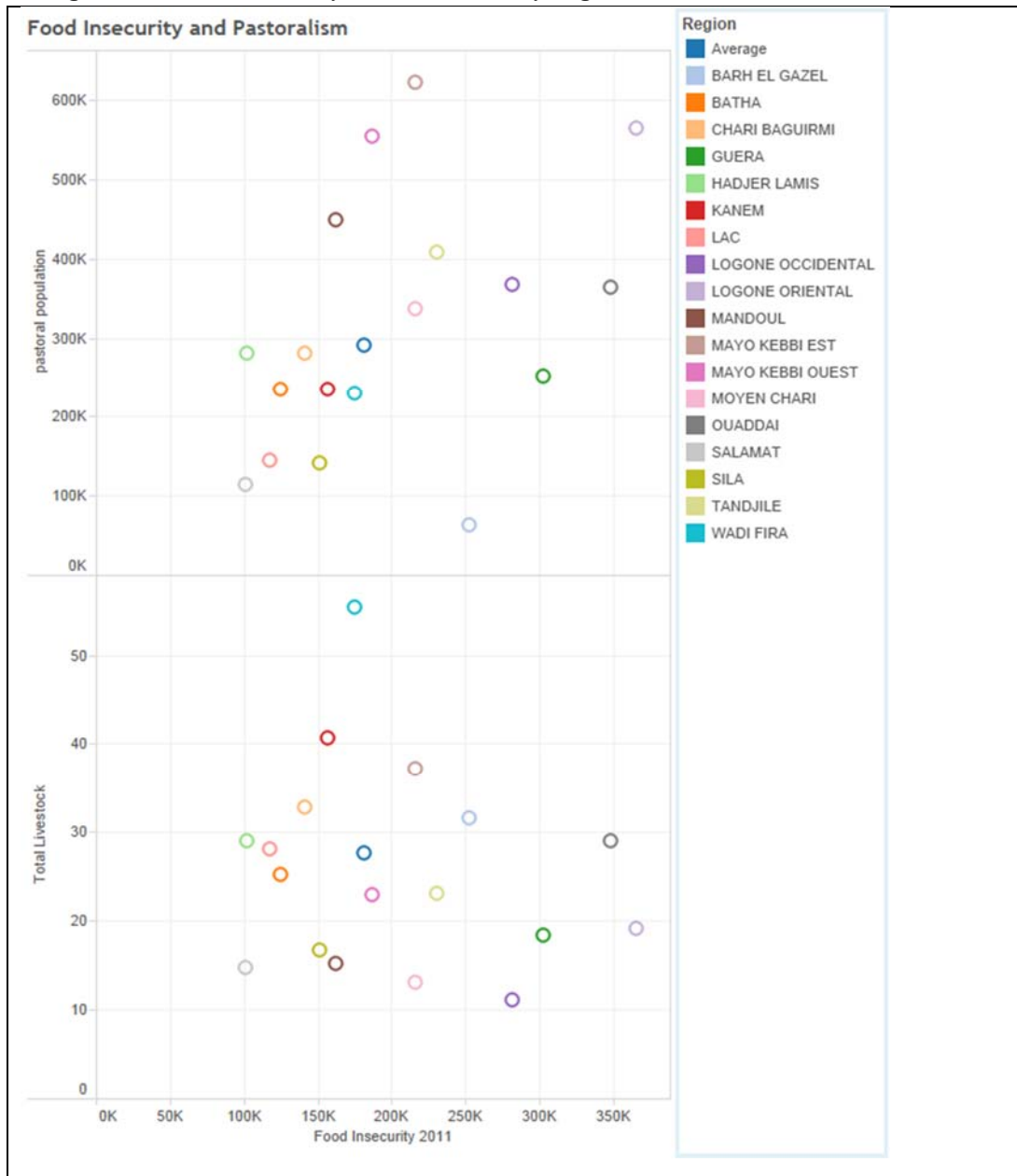
Figure 30 - Food Insecurity and Agriculture by Region, 2011



Source: Authors' calculations (2015).

2.53 Food insecurity and agriculture are closely correlated at a regional level. The top panel of the above figure demonstrates that regions with larger populations dependent on agriculture are also more food insecure. The lower panel compares the average value of land owned per household in each region with the number of food insecure. This shows little correlation implying greater land ownership does not, on average, reduce risks of food insecurity.

Figure 31 - Food Insecurity and Pastoralism by Region, 2011



Source: Authors' calculations (2015).

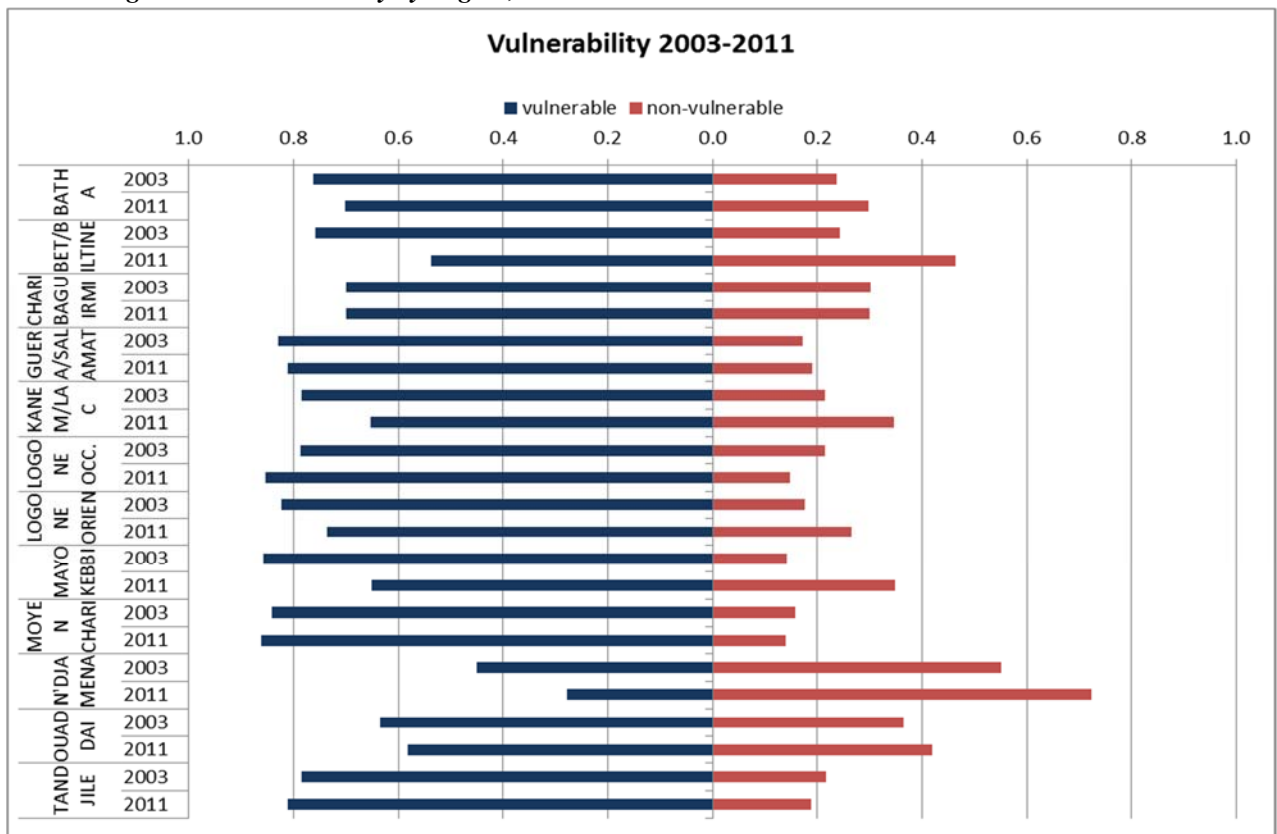
2.54 **Food insecurity and pastoralism are closely correlated at a regional level.** The top panel of the above figure demonstrates that regions with larger populations dependent on pastoralism are also more food insecure. The lower panel compares the average number of livestock owned per household in each region with the number of food insecure. This shows some correlation implying livestock ownership has some effect on reducing risks of food insecurity.

6. Sources of Vulnerability

2.55 This section analyzes the regional dynamics of poverty and vulnerability between 2003 and 2011 using the respective ECOSIT household surveys and complementing these with food insecurity data compiled by SISAAP between 2011 and 2014. It also considers four possible sources of vulnerability: weather shocks, price shocks, conflict events, and refugee pressure. The prevalence of these sources of vulnerability across regions is visualized and the relationship between these shocks and changes to food poverty and overall low income vulnerability is examined. This analysis shows that food poverty has fluctuated regionally between 2003 and 2011 and that food insecurity also has varied regionally in the past four years. In addition, variability in exposure to different sources of vulnerability exists both across regions and within regions but across time. Scarcity of detailed household information on exposure to each source of vulnerability, nevertheless, limits the analysis on the relationship with poverty and calls for the collection of household-panel data and qualitative studies to complement this research.

2.56 The World Food Program Vulnerability and Mapping database is used for food price data, and rainfall information comes from the Famine Early Warning System Network (FEWSNET) remotely sensed rainfall estimate 2.0 product. The Armed Conflict Location & Event Data is used for conflict and fatality data, and the refugee numbers come from UNHCR.

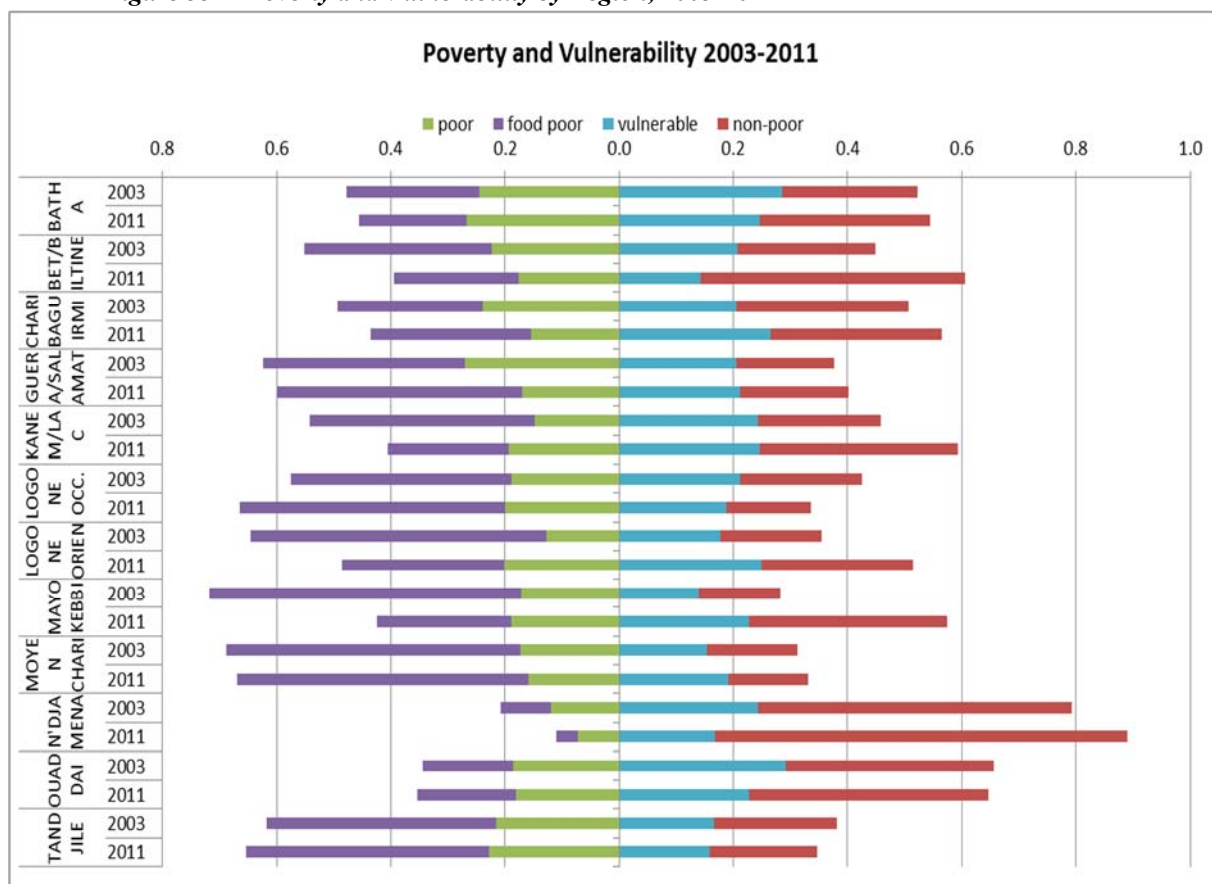
Figure 32 - Vulnerability by Region, 2003-2011



Source: Authors' calculations (2015).

2.57 **Vulnerability, defined as being within 1.5 times of the national poverty line, has decreased in eight regions, increased in three regions, and remained constant in one region.** Vulnerability has worsened in Logone Occidental, Moyen Chari, and Tandjile while remaining constant in Chari Baguirmi. In all other regions, vulnerability has improved.

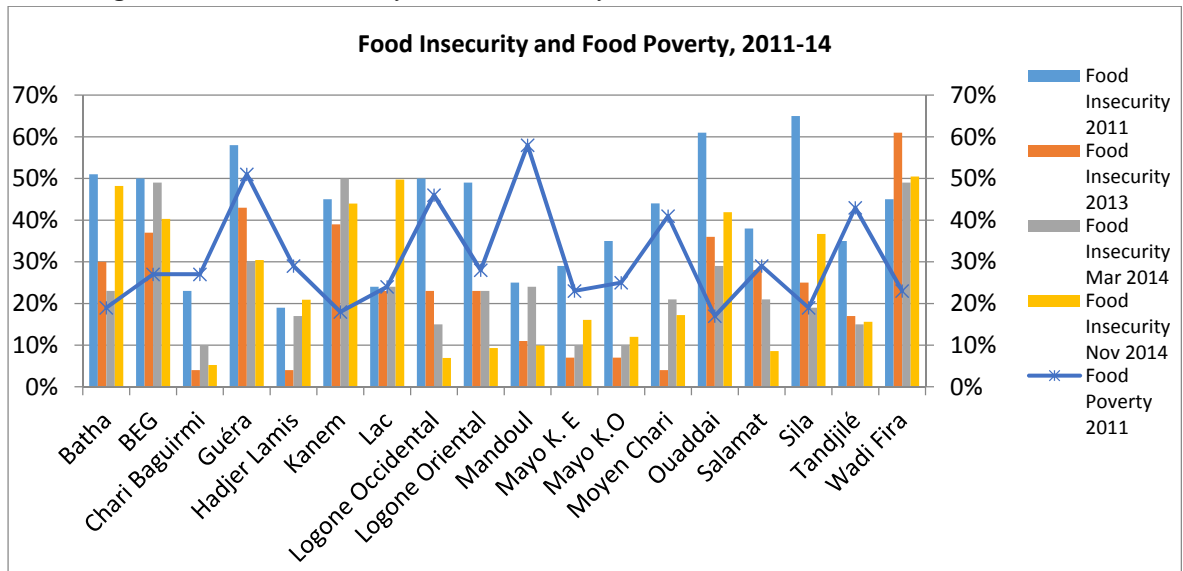
Figure 33 - Poverty and Vulnerability by Region, 2003-2011



Source: Authors' calculations (2015).

2.58 **When vulnerability is broken down into the categories of food poor and overall poor as well as being within 1.5 times of the poverty line (net vulnerable), there is little change to food poverty in many regions, with five regions seeing increases in food poverty rates.** The regions experiencing increases in food poverty rates are Ouaddai (+1.5 pp), Chari Baguirmi (+2.6 pp), Tandjile (+2.3 pp), Guera/Salamat (+7.5 pp), Logone Occidental (+7.8 pp), and Kanem/Lac -17.7 pp. These regions are located in both the Sahelian zone and the Southern zone.

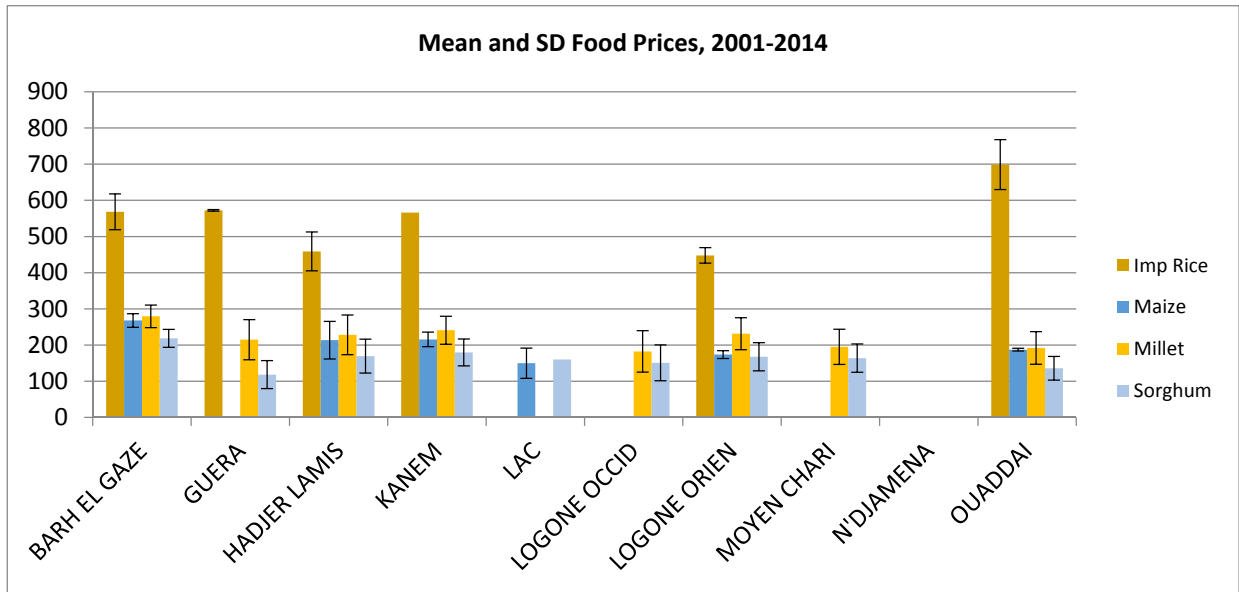
Figure 34 - Food Insecurity and Food Poverty, 2011-2014



Source: Authors' calculations (2015).

2.59 **Food insecurity shows significant variation from year to year.** Data compiled by the Government agency SISAAP in coordination with UN Food and Agriculture Organization (FAO) and World Food Program (WFP) show that food insecurity fluctuates substantially within regions from year to year. Food insecurity is measured to be most prevalent in the regions bordering Sudan and the Central African Republic: Ouaddai, Salamat, Wadi Fira, Sila, and Guera; as well as around the western parts of Sahelian zone in Chad: Kanem, Lac, Bahr el Gazal (BeG), and Batha. This contrasts with the ECOSIT 2011 data, which finds a concentration of food poverty in the Southern zone, towards the south of the country. Thus, it appears that ECOSIT 2011 picks up different characteristics of poverty than those measured through the food security analysis.

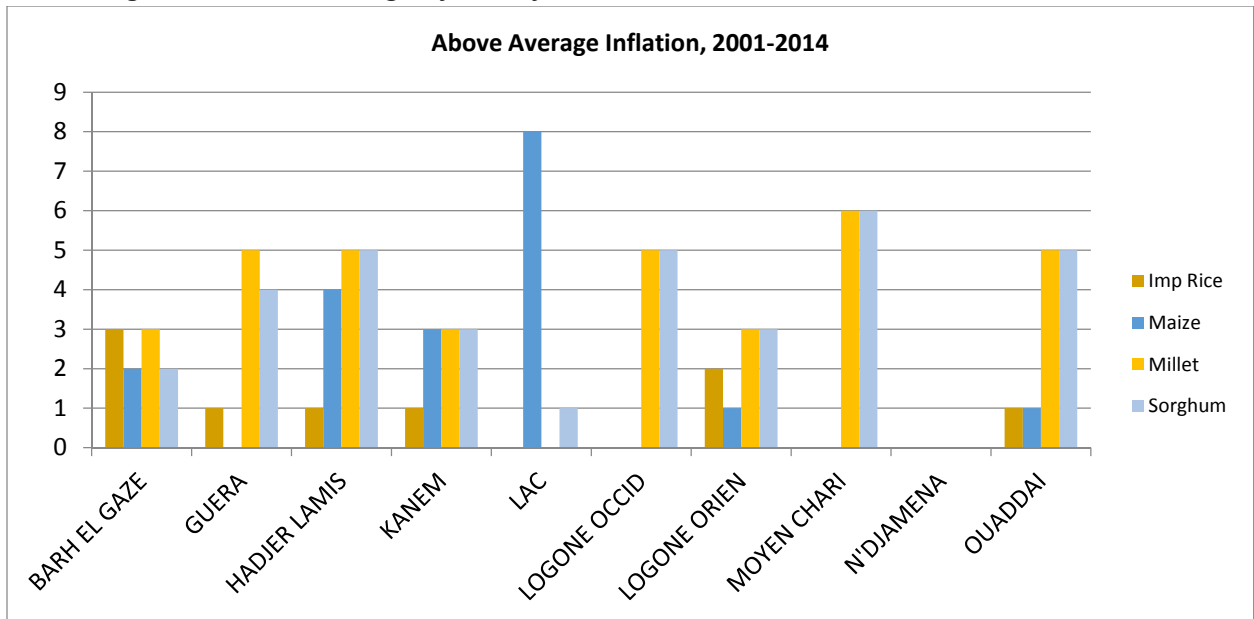
Figure 35 - Mean and SD Food Prices, 2001-2014



Source: Authors' calculations (2015).

2.60 **Based on available food price data, BeG and Kanem are exposed to higher prices of maize, millet, and sorghum, while Ouaddai has seen higher prices of imported rice.** Although data on the market prices across Chad are largely absent, where available, they indicate food prices tend to be higher in regions vulnerable to food insecurity. For example, BeG, Kanem, and Ouaddai are all recorded to have a greater prevalence of food insecurity. However, across the region, variation in the price of each staple is not substantial suggesting other factors are needed to explain the large regional variation in food insecurity.

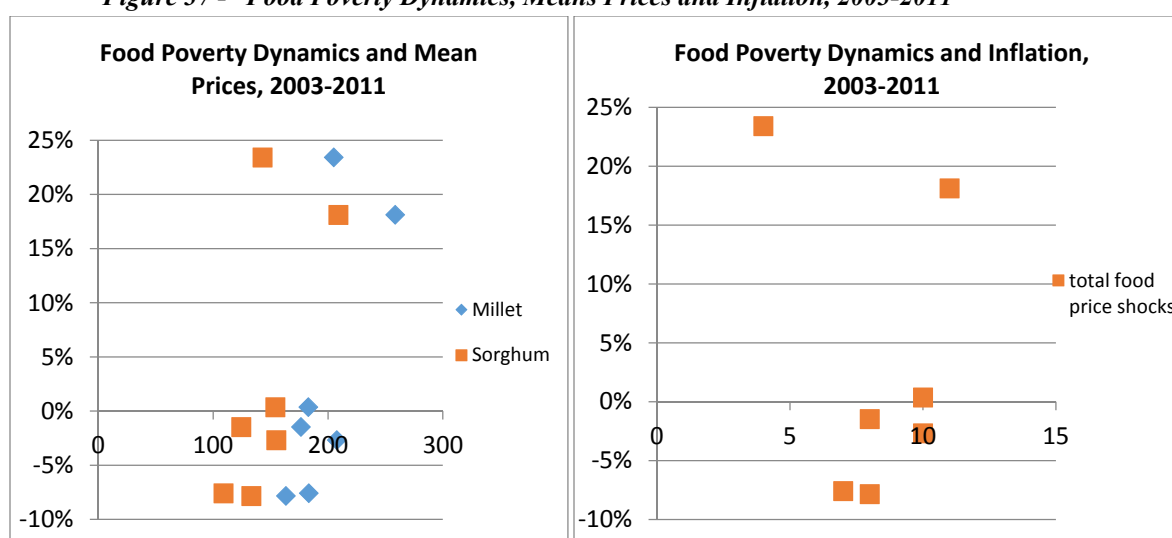
Figure 36 - Above Average Inflation of Cereal Prices, 2001-2014



Source: Authors' calculations (2015).

2.61 **Lac has experienced eight years of above average annual inflation in maize prices, while Hadjer Lamis, Logone Occidental, Ouaddai, and Moyen Chari have experienced above annual inflation in millet and sorghum (four and five years, respectively).** Another approach to measuring exposure to variation in food prices is to calculate the average annual price change in each staple and assess whether one region is more exposed to above average annual increases in prices. This analysis indicates Lac is particularly exposed to higher price increases in maize, despite having a lower base price; while Hadjer Lamis, Logone Occidental, Ouaddai, and Moyen Chari have all seen higher rises in their prices of millet and sorghum. Although there is some overlap between regions experiencing higher food price increases/food insecurity (e.g., Ouaddai and Lac) and regions experiencing food poverty (e.g., Logone Occidental and Moyen Chari), it is hard to demonstrate a robust relationship with irregularly recorded food price data.

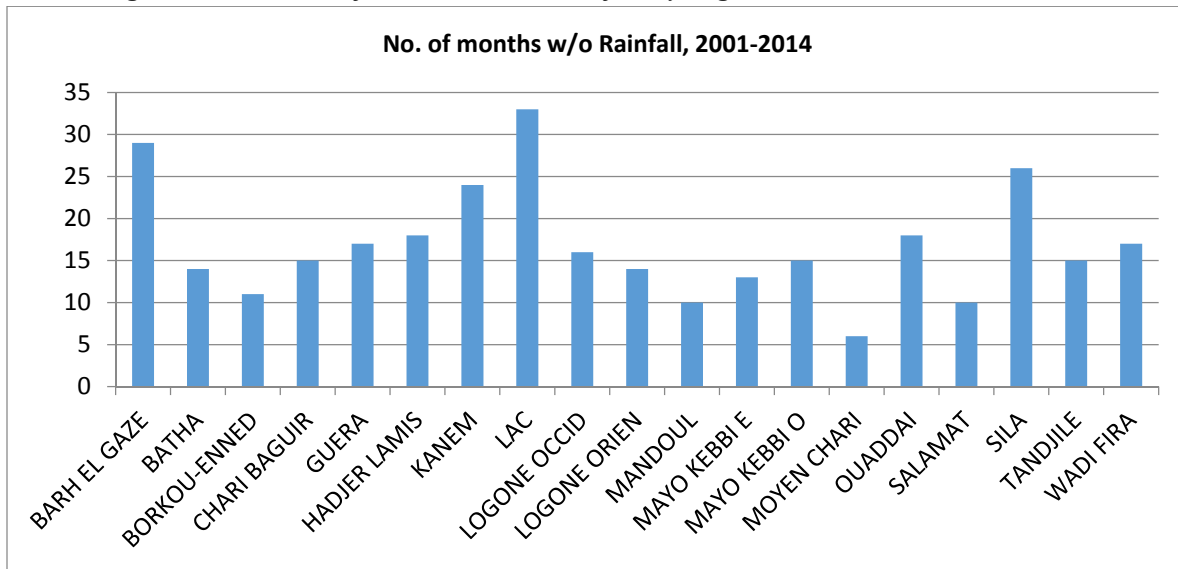
Figure 37 - Food Poverty Dynamics, Means Prices and Inflation, 2003-2011



Source: Authors' calculations (2015).

2.62 **Food poverty rates between 2003 and 2011 are neither closely correlated with exposure to high food prices nor the total number of above annual food price increases.** However, this aggregate result may well mask significant relationships at a more local level. For example, if local-level food price data were available rather than irregularly recorded regional-level data and if it were possible to measure consumption and income changes at a household or even community level rather than at a region-wide level over an eight-year time horizon, it is likely that a more robust relationship would be uncovered. This analysis indicates both the need for local-level data to guide an interpretation of this relationship and the importance of high-resolution information for targeting purposes. For example, given the data available, it is hard to justify where social assistance should be prioritized.

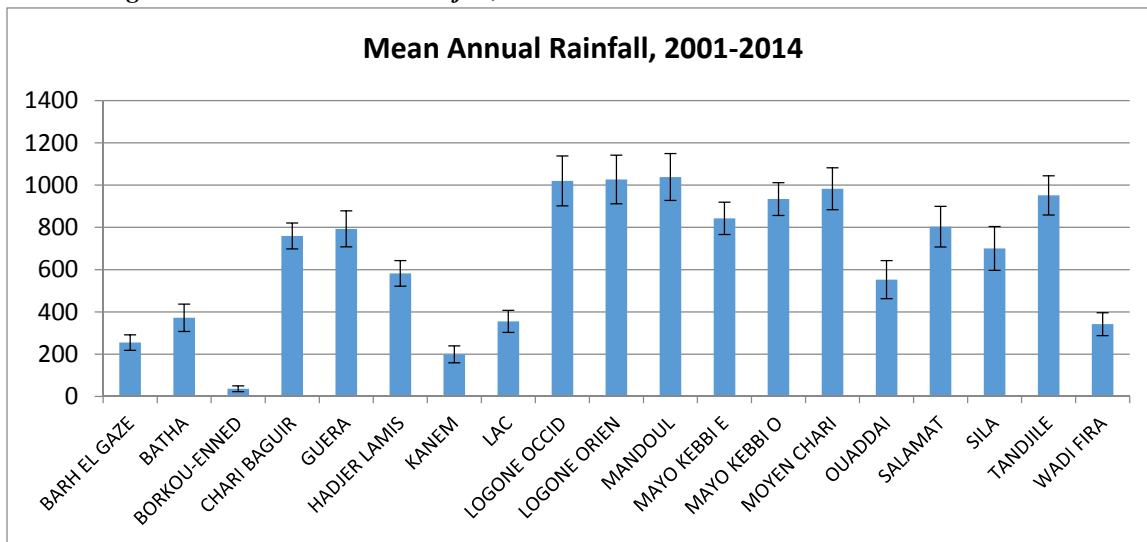
Figure 38 - Number of Months without Rainfall, by Region, 2001-2014



Source: Authors' calculations (2015).

2.63 Kanem, Lac, BeG, and Sila have the largest cumulative periods without rainfall in the country according to remotely sensed rainfall measures from FEWSNET. All four regions have also experienced a greater prevalence of food insecurity, indicating a positive relationship between rainfall and food security.

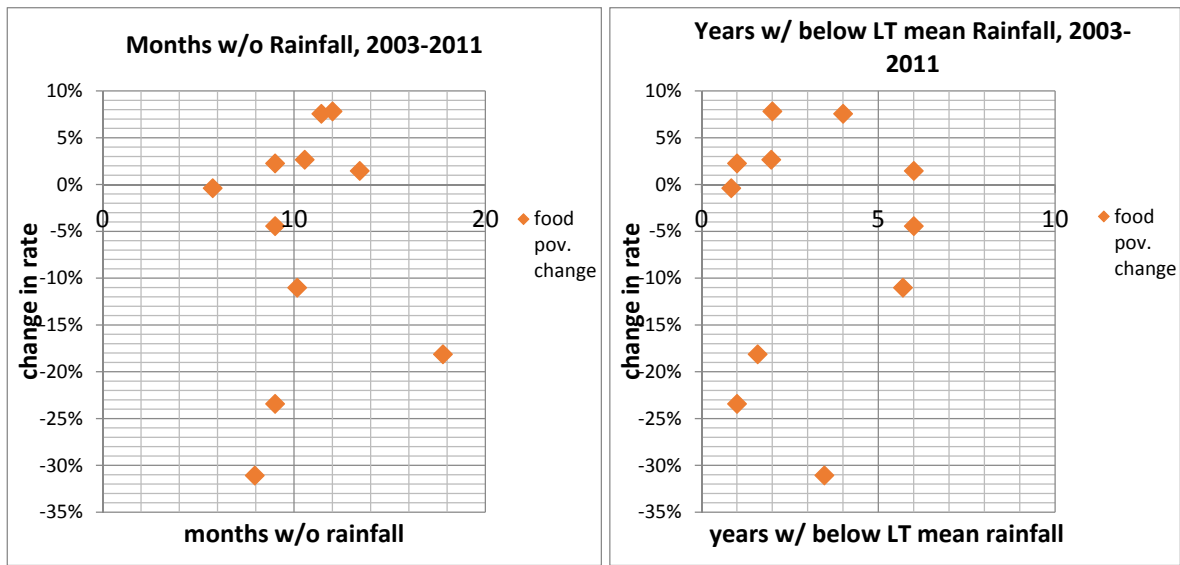
Figure 39 - Mean annual Rainfall, 2001-2014



Source: Authors' calculations (2015).

2.64 Across the country, average annual rainfall varies substantially. In the Southern regions, such as Logone Occidental and Oriental, Mayo Kebbi Est and Ouest, Mandoul, Moyen Chari, and Tandjile, rainfall is much greater and ranges between 900 and 1,100 mm per year. At the other extreme, regions in the Saharan zone average less than 100 mm per year. Regions in the Sahelian zone show the greatest inter-zonal variation with rainfall varying from 200 to 800 mm per year.

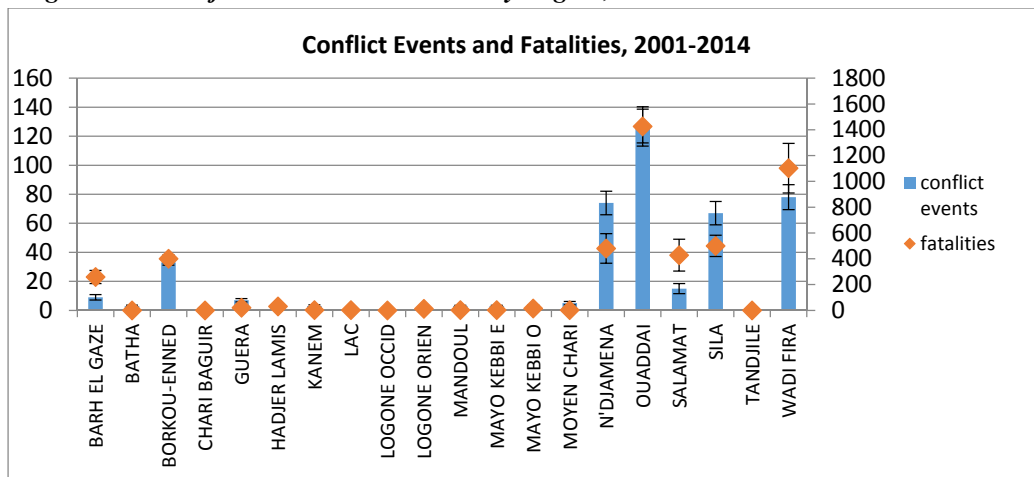
Figure 40 - Relationship between Exposure to Negative Rainfall vs Food Poverty, 2003-2011



Source: Authors' calculations (2015).

2.65 **There is a weak relationship between exposure to negative rainfall shocks and deteriorating food poverty at a regional level.** A comparison between the number of months without rainfall or with below average rainfall and the change in food poverty rates between 2003 and 2011 shows regions with greater exposure to negative rainfall shocks experienced smaller reduction in food poverty or vulnerability rates. This suggests weather variability may be a reasonable proxy for vulnerability, although it would be preferable to validate this relationship using panel data on households. However, given the concentration of the food poor in rural areas and involved in basic rain-fed agriculture and pastoralism, this relationship seems plausible. Further regression analysis (see Annex 2) demonstrates that inter-annual rainfall variability is also correlated with food poverty incidence.

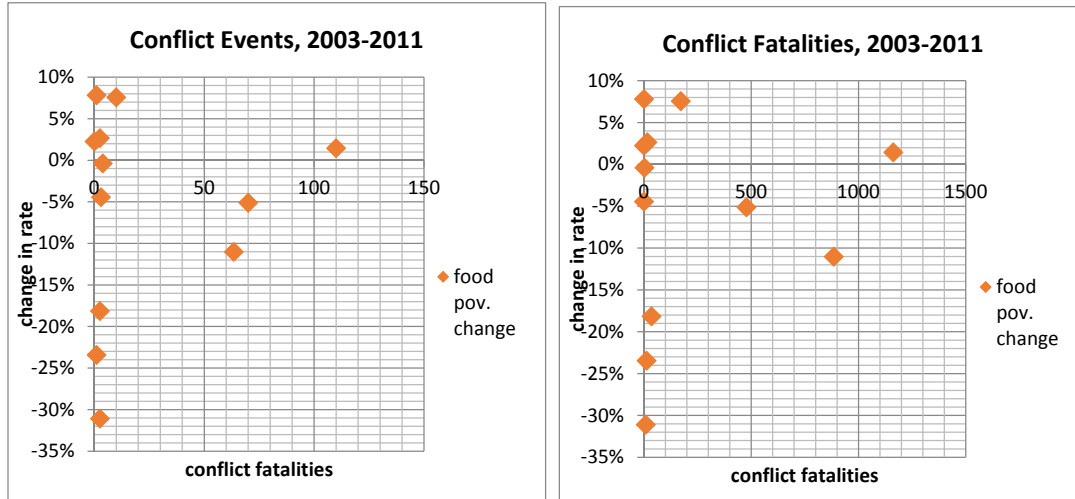
Figure 41 - Conflict Events and Fatalities by Region, 2001-2014



Source: Authors' calculations (2015).

2.66 **Conflict is concentrated around the border with Sudan and in N’Djamena.** Ouaddai, Sila, and Wadi Fira all a border Sudan, have a history of tense relations, and house several refugee camps. The nation’s capital, N’Djamena, is exposed to armed conflict, as well.

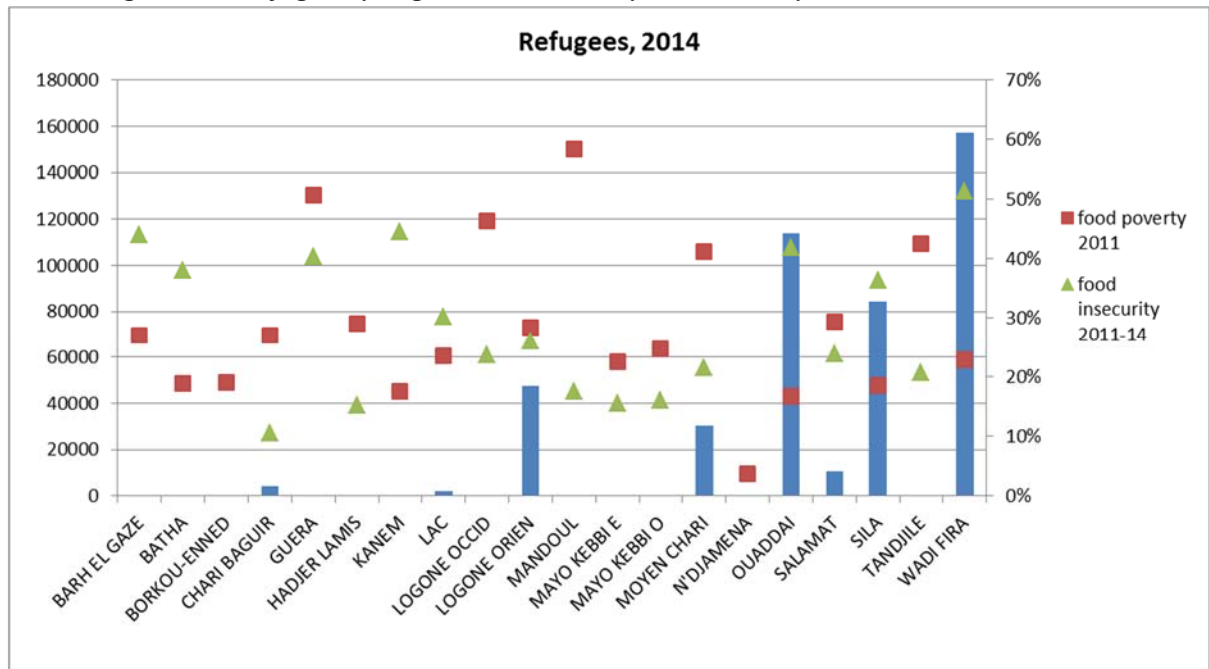
Figure 42 - Conflict Events and Fatalities vs Food Poverty, 2003-2011



Source: Authors’ calculations (2015).

2.67 **Armed conflict and changes in food security or vulnerability have no observed relationship at a regional level.** This is likely due to the concentration of conflict in regions that did not have particularly high food poverty rates in 2011 and experienced reasonable reductions in food poverty rates according to the ECOSIT 2003 data. However, this again may mask local-level relationships, for example, with refugee camps and local communities in the eastern regions most exposed to conflict actually seeing deteriorations in land security, agricultural output, and market access leading to higher food insecurity. The food security data from SISAAP indicates food insecurity is a regular problem in these regions.

Figure 43 - Refugees by Region vs Food Poverty and Insecurity, 2014



Source: Authors' calculations (2015).

2.68 The regions of Wadi Fira, Sila, Ouaddai, Logone Oriental, and Moyen Chari have UNHCR refugee settlements. Among these regions, Logone Oriental and Moyen Chari have the highest food poverty rates. However, the food insecurity data collected between 2011 and 2014 indicate Wadi Fira, Sila, and Ouaddai have a particularly high incidence of food insecurity. These regions, as noted above, have also been exposed to a higher incidence of conflict between 2003 and 2011.

Chapter 3 Social Dynamics of Poverty and Vulnerability: A Qualitative Analysis¹⁵

1. Introduction and Context

3.1 **A qualitative study based on fieldwork complements the information of a statistical analysis.** This study aims to contribute to a better understanding of the causes and social dynamics of poverty and vulnerability in different areas of Chad, as well as the main social protection measures that have been implemented, as per the following objectives:

- Identify constraints and opportunities linked to different livelihoods, survival and coping strategies, traumas and crises confronting groups and individuals, perceptions of and experiences with different forms of aid and risk mitigation
- Understand how poverty and vulnerability are characterized, conceptualized, explained, and experienced by different individuals or groups across a broad spectrum of socioeconomic and cultural situations (place of residence, type of livelihood, ethno-linguistic group, religion, gender, life cycle, social status)
- Identify and understand the diverse forms of local social capital and the key characteristics of various community mechanisms and informal social protection and social solidarity systems
- Formulate realistic, sustainable recommendations by better-understanding attitudes toward and experiences and effects of various forms of social safety nets and assistance.

3.2 **The study responds to one of the research priorities outlined in the National Strategy for Social Protection (NSPS).** The Strategy proposes to reinforce its data and knowledge base, strengthen monitoring and evaluation of current programs, and “*encourage the use of qualitative and participatory methods so as to enrich analyses.*” The goal is to “*anchor social protection measures within a reliable database and an understanding of best practices.*”

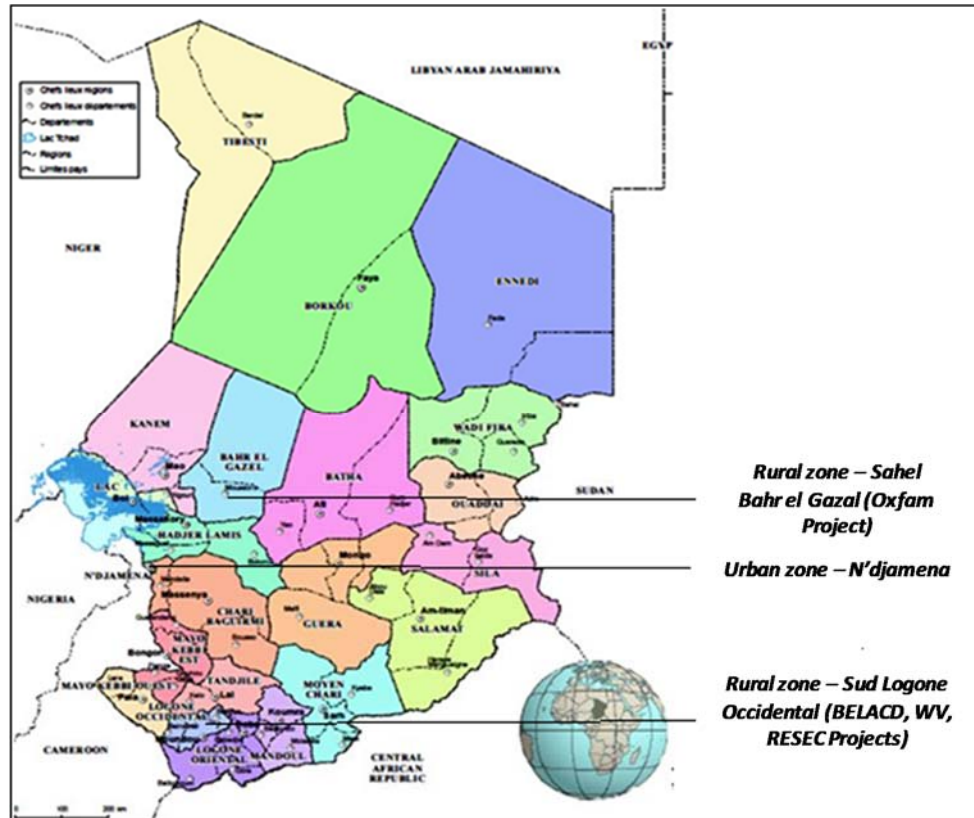
3.3 **The study was guided by a comprehensive, dynamic, multidimensional vision of poverty, vulnerability, and social protection.** Based on key concepts derived from international literature and local definitions and conceptualizations, the approach is informed by a life cycle analysis of vulnerability (within the framework of the *Social Protection and Labor Strategy* of the World Bank) and gender-based analysis. Issues to do with social status within a local community or wider society are equally taken into consideration. The notions and definitions of social protection that are the focus of this study are broad and multidimensional, taking into account local social, economic, and environmental vulnerabilities and analyzing both formal measures implemented by the State and its development partners as well as informal community-based mechanisms.

3.4 **The fieldwork involved communities residing in different geographical areas, each with distinctive forms of livelihoods and sociocultural values.** In rural areas, communities in the Bahr el Ghazal region (Sahelian zone) and the Logone Occidental region (the South) were involved; for the urban milieu, the study covered several neighborhoods in the capital city of N’Djamena. The primary

¹⁵ This chapter outlines the main results of a global report on *L’étude qualitative sur les dynamiques sociales de la pauvreté et de la vulnérabilité en lien avec la protection sociale au Tchad* by Carol Watson, Younous Abdoulaye, and Blandine Nan-Guer, June 2015.

research groups for fieldwork were selected from among vulnerable populations, men and women, in communities where different types of social protection and other assistance projects are being implemented (see Figure 44).

Figure 44 - Map of Research Sites



3.5 **Interviews were conducted with key actors.** At the community or administrative department level, local authorities, village or township chiefs, religious leaders, service providers, and project personnel (primarily from NGOs) were interviewed. Key respondents at the national level included program and policy personnel from key ministries (Planning, Social Welfare, Agriculture (Livestock), Finance, and Health) along with development partners and various key contacts. About 500 individuals in all took part in the study, of which more than half were women.

3.6 **The methodology was based on widely used qualitative research tools,** consisting of open or semi-structured individual and group interviews, case studies, and participatory activities. A complementary review and analysis of available literature on the three research zones was conducted, along with a review of selected program and project documentation.

3.7 **The qualitative approach seeks to allow the voices of the poor and vulnerable to emerge and to validate their real-life experiences.** Such an approach helps create a deeper understanding of local perceptions of vulnerability, the adaptation and coping strategies adopted, and the community-based mechanisms for social solidarity practiced. It also highlights perspectives on the concrete benefits derived from existing social safety nets, community development, and other assistance programs currently underway in different parts of the country. The study’s ultimate goal is therefore to present

insights derived from concrete case studies to feed into reflections on the best social protection policies and practices to adopt in favor of poor and vulnerable populations.

3.8 Key findings from this study cover a number of domains. The first includes local concepts and experiences of poverty and vulnerability experienced in the three research areas (Sections 2, 3, and 4); the second covers informal social protection systems identified in urban and rural areas (Section 5); the third identifies lessons learned from the selected social safety net and assistance programs and structures that were assessed in the field (Section 6). The conclusion (Section 7) offers a summary of key findings, and identifies a number of policy implications regarding social protection programs in Chad.

2. Poverty and Vulnerability in Urban Areas

3.9 Urban poverty is experienced in multiple dimensions. While poverty in Chad is predominantly rural, existing analysis and fieldwork in N'Djamena clearly identify a diversity of dimensions and situations of extreme poverty and vulnerability in the urban center. Such poverty is both widespread (linked in fact to rural poverty) and specific (linked to urban living conditions and livelihoods) insofar as rural–urban migration contributes significantly to the number of job-hunters in an already fragile labor market and adds additional pressure on social services.

Basic Data and Statistics

3.10 N'Djamena has the most diversified economy. The urban economy is a diversified one despite the fact that among listed professions, over half of workers are classified as providers of direct services to individuals, merchants and sales representatives (38.1%), or industrial and artisanal tradespeople (17.7%). Of the total adult population: 28.7% are employed; 16.0% homemakers; 41.2% students; 1.5% are looking for work; 0.9% unemployed; 0.7 % of independent means/retirees; and 9.5% other. Over half (57%) the city's working population is self-employed whereas a little over a third (38%) are wage earners (RGPH 2009).

3.11 Rapid urban population growth has had a negative effect on living conditions. N'Djamena has over one million inhabitants, representing nearly one-tenth of Chad's total population and over one-third of its urban population. Its 5.1% growth rate comprises a natural growth rate of 2.9% and a migratory growth rate of 2.2%. For every 100 residents in N'Djamena, 40 were born in another region (RGPH 2009). This contributes to a strain on public infrastructure and social services in the older core neighborhoods and a total absence of amenities in the newer neighborhoods on the periphery.

3.12 The majority of N'Djamena's population does not have access to essential services (drinking water, sanitation, electricity). As a result of massive investment in urban development in recent years, the downtown core has benefited from asphalt roadways, permanent housing, and water and electricity, even if blackouts remain frequent. But surrounding neighborhoods (and a portion of the city's old quarters) generally constitute dwellings built of mud and thatch and more occasionally fired brick with sheet-metal roofing, unpaved streets, an inadequate drainage system that leads to frequent flooding (FAO, 2012). Only half of the city's residents (53.7%) use piped tap water and only 28.5% have access to tap water in their own homes. Overall, one household in five (21.4%) does not have access to drinking water on their premises, with a quarter (23.1%) drawing their drinking water from

wells (MICS, 2010). While over 80% of Chad’s power is consumed by N’Djamena, 79% of the population depends primarily on firewood as fuel for cooking (Besse and Alari, 2012).

Figure 45 - Map of Capital City N’Djamena



Source: Ministry of Land Management, Urbanism and Habitat, in FAO 2012.

3.13 Multidimensional poverty affects an important portion of N’Djamena’s population. According to available statistics, the incidence of income poverty in N’Djamena is 11% (ECOSIT 2011). However, an analysis of multidimensional poverty (according to deprivation indicators) reveals that 20% of households are poor with job insecurity as the primary cause. The 2003–2011 period saw an increase in the level of deprivation on four indicators (literacy, primary school attendance, sanitation, and drinking water) and in 2011 the vast majority of the population was considered deprived in terms of household energy (84.8%), electricity (75.1%), sanitation (66.2%), and quality housing (67.4%).

3.14 Multidimensional poverty manifests in indicators of precarious human development. The Multiple Indicator Cluster Survey data (EDS-MICS, 2014-2015) indicates that over one-quarter (32%) of children aged 5 and under experience delayed growth in urban area and 33% of births in the capital are not assisted by qualified personnel. While the net primary education enrolment rate (6-11 years) stands at 74.9%, it drops to 38.8% at the secondary level, and nearly half (45%) the women aged 15-24 years are illiterate. A quarter of women aged 15-49 in N’Djamena are married before the age of 15, and over one-third (38.3%) of the city’s children aged 5-14 work (MICS 2010).

Fieldwork Findings

3.15 Poverty is essentially defined as a lack and is accompanied by certain typical characteristics. According to a number of study respondents, a poor person is ‘*someone who has nothing*,’ no means and no belongings. Poverty includes physical aspects, living conditions, and an overall lack of financial means. ‘*Being poor in N’Djamena means many things: you do not have work to provide a living; you have your diploma but cannot find a job. In short, it is a lack of means by which to take charge of your life,*’ says one person. A poor city dweller is unemployed, has no resources and

does not take part in business transactions – a poor person cannot take him/herself in hand, find food, or see to his/her children’s health care or education.

3.16 Urban poverty has very specific characteristics. Above all, it is linked to the ‘high cost’ of living, which itself is perceived as a growing problem, ‘*The situation has become worse over the past 10 years, because the price of essential goods and housing has increased, and there’s no more money – small businesses are no longer viable*’ some say. According to our respondents, the biggest challenges facing N’Djamena’s poor are work/employment, housing and living conditions, water and sanitation, access to education and health care, the cost of living and security conditions.

3.17 Underlying poverty factors are numerous and dynamic, according to our respondents. These are linked to “*God’s will,*” poor governance (wars, poor distribution of wealth, housing demolition, devaluation of the CFAF), the environment (floods, droughts), employment (lack of jobs, underemployment and poorly remunerated work), limited education (ignorance, illiteracy, non-enrolment of girls in school, lack of technical training or trade apprenticeships). Poverty is also linked to individual crises and life cycle events (illness, loss of a productive family member). Figure 46 outlines community mapping results on poverty dynamics from residents of Diguel, one of the city’s poorer neighborhoods.

Figure 46 - Historical Community Mapping of a City Neighborhood

Type of Shock	1980	1990	2000	2010	2015
Environmental (1)	Flood, drought		Flood, Rainfall deficit		
	Agricultural deficit				
Food crisis (2)					
Economic shock (3)	Half salary	FCFA devaluation	Evictions	Boko Haram in Nigeria	
Sociopolitical insecurity (4)	Civil war of 9 months			War of February 2 nd	
Epidemics (5)	Meningitis cholera, measles, polio, pertussis		Meningitis cholera, measles, polio, pertussis		
AIDS (6)	AIDS				
Coping Strategies	Flight to neighboring countries, PDI, prayer (1), (3) rural exodus, meal frequency reduction (1), (2), and (3) meal reduction, cut in expenses (4) Intensification of poverty, loss of assets		(1), (2) and (3) counter season crop IGR, dam construction, house repair (5)traditional treatment Health center frequentation	(4)Change of trade because of Boko Haram (6) HIV acknowledgment, change in sexual behavior (5) Human lives loss, Child mortality	
Effects on poverty /vulnerability/ population well-being	(1), (2), (3) famine, loss of livestock Malnutrition, under-nutrition, marital conflicts		(1), (2), (3) malnutrition, shocks, illness, epidemics (6)Contamination, health expense too high, too many orphans, stigma impoverishment invalidity		
			(4) livestock overpopulation, pastoral		

3.18 **The general impression is one of steadily increasing and more widespread poverty.** The city dwellers we spoke to describe life as increasingly more expensive and precarious, where access to basic services is more and more difficult.

3.19 **Clear distinctions exist locally in categorizations of the non-poor, poor, and very poor.** Some make a distinction between poverty (workers who cannot make a living) and destitution (among the unemployed). Some characterize the poorest by lack of access to housing: *‘The very poor are those who cannot afford to rent a house, and therefore are required to live with their children, their parents or someone else.’* Others outline the differences in terms of access to basic social services, financial assets, or survival and development strategies (see Table 2).

Table 2 - *N’Djamena Household Categorizations – Diguel Neighborhood*

	Well-off Households	Middle Income Households	Very Poor Households
Housing characteristics, food, social services, other	<p>Housing: Owner of own home/villa equipped with electricity/power generator; water tap within the home or borehole/well within household compound</p> <p>Food: Access to good quantities of quality food</p> <p>Social Services: Easy access, even to privatized services</p>	<p>Quite good lodgings but usually rented, and often in ‘<i>poto poto</i>’ houses (dried mud)</p> <p>Occasionally power generators or battery-operated lighting</p> <p>Purchased water (2 10-litre jugs = 20 liters for 75 CFAF)</p> <p>2 meals/day; fresh meat or fish purchased approx. 2 x / month</p>	<p><i>Have nowhere to lay their head down to sleep’</i> –remain dependent on others</p> <p>Obtain water from neighbors who are equipped with boreholes/wells</p> <p>Never sate their hunger</p> <p>Lack adequate clothing</p> <p>Do not have access to services (health care/education)</p> <p>Many widows and orphans</p>
Profession and assets, survival strategies:	<p>Professions: Large retailers; upper management</p> <p>Assets: Own houses they rent out to others; have gardens, with fruit trees, on the peripheries of town.</p> <p>Strategies: Win Ministry-related contracts / purchase orders on major work projects</p>	<p>Professions: Civil servants (positioned between the affluent and the vulnerable); mid-sized business owners; masons; teachers....</p> <p>Survival strategies: Dependent on salary – occasionally obliged to buy items on credit at shops (on end-of-month payment plan, <i>‘to make ends meet’</i>)</p>	<p>Survival strategies: Small business (for example, vegetables bought at the market for 1,500 CFAF, later resold for 200-300 CFAF profit per day); services (i.e.: cleaning beans for traders at 250 CFAF/sack); domestic work; begging and aid from Ministry of Social Action</p>

3.20 **Certain categories are generally known to be among the poorest,** including: heads of household with no resources, brick-breakers, the unemployed hired as day laborers, persons who no longer have the strength to look for work, single women with children, remarried women with children from an earlier marriage whose current husbands do not provide for them. Others include in this category retirees, students, and women suffering from fistula.

Box 1: At the End of the Road of Rural Exodus: Life as an Urban Migrant

‘Dhoula sabirine’ (literally meaning ‘the shadow of those who are patient’) refers to the men who can be found from morning until night time at specific places around N’Djamena, waiting for a chance to find work as day laborers. Their personal tool boxes sit before them, showcasing their respective trades (i.e.: a plumber is represented by a strategically placed faucet, a mason by his water level; a laborer by his crowbar; a carpenter by his saw; a painter by his paint roller). The journeys of two such individuals who set themselves up in front of the central mosque illustrate the dynamics of a rural exodus where the beckoning opportunities of the city do not deliver on their promises.

Mahmoud the mason, age 42, and Abakar the plumber, age 38 (fictional names) are both from the Batha region in central Chad. They left their hometowns after the great drought of 1984. It is poverty that has driven them on their quest – at times desperate – for work, but poverty also that sometimes strips them of potential opportunity: ... ‘Potential clients prefer workers with a motorcycle to travel to worksites, or those with good work shoes,’ one of them explains. ‘Others look at us and when they notice our pitiful condition, they think we cannot do the work efficiently. They therefore reject us in favor of others... Being poor is also about people saying you don’t know anything. And in fact, those selected for the bigger worksites all have connections.’

They have almost lost all hope of finding work on major worksites or on construction projects that, until recently, abounded here in town: ‘So long as middlemen stand between us and these larger projects, doors will remain closed to us.’ Says Mahmoud: ‘I cannot get ahead. There is less work than in the past – especially since last year...in this oil-rich country. I’m young and competent, yet I still can’t find a job and I can’t even buy myself a bicycle.’ Adds Abakar: ‘It’s been three days since I last worked.’

From time to time their relatives help them, and the mosque provides free food at certain times – but they do not receive any form of assistance from the government.

A pair of rock-breakers, Halima and Aicha (fictional names), are cousins from a small village in Batha. Halima, 35, has lived in N’Djamena for six years with her husband, who is unemployed, and their five children. Aicha, 28, is separated from her husband and has left her three children with her mother back in her village where she plans to return when the rains start to helping the planting season. Every morning, the two women come to work on a vacant band of land next to a hotel construction site where they have set up a small hangar that offers a little shade during this hot season, when temperatures climb to 45 degrees. They break bits of brick and concrete until twelve thirty, then fill bags with the broken bits until three or four o’clock in the afternoon. They have benefited from no social assistance, except in the form of ‘sadaka’ or small donations from ‘persons of goodwill’ who pass by along the street.

They admit that their work is difficult, but they have no other options. Aicha had first tried to work as a maid, but left because of the paltry salary. Halima once tried selling firewood and charcoal, but found no buyers. Both believe fieldwork back home would be preferable to breaking stones and bricks as they do, but ‘...When crops fail and we have children, we are forced to do this type of work.’ Neither Halima nor Aicha have an education (there were no schools back home, in their village) nor do their children go to school either. They acknowledge that without an education, their options are limited: ‘We cannot work for the government without schooling,’ one of the two points out.

3.21 Local definitions of vulnerability are quite close to those of poverty, but with nuances.

For some, vulnerability is linked to a lack of strength. There is also a relational aspect in the conceptualization of vulnerability: the fate of a vulnerable person (by definition, someone needing support) is in the hands of others, but sometimes the necessary support fails to materialize. ‘*Society neglects the vulnerable*’ affirms the person in charge of a network of disabled women. ‘*When you*

scream, no one comes to help you, therefore human beings themselves make others vulnerable... That is why some equate vulnerability with a lack of social assistance.

3.22 There is a very fine line between poverty and vulnerability; often the two concepts are almost inseparable. According to some, *‘The two notions of poverty and vulnerability are one and the same, because when you are poor, you have no means to take yourself in hand, and therefore you are vulnerable.’* For others, the difference is nuanced.

3.23 Attitudes towards the poor and the vulnerable are marked by both pity and contempt. According to our study respondents, many people express pity or compassion towards society’s very poor and vulnerable individuals. In the Sara regional dialect, for example, *Deki koumougne doh gane* means someone who inspires pity. But often, in reality, per some respondents: *‘We treat the poor as savages, with scorn.’* Also, as some poor people point out, *‘People equate a poor person with a beggar.’* Attitudes towards the rich, on the other hand, are divided *‘between admiration and hatred.’*

3.24 Study respondents easily identify categories of individuals deemed most vulnerable. These include people living with disabilities, women, children, and the elderly (see Box 2). Some think women and children overall should be considered as vulnerable groups. Widows are considered by some to be among the most vulnerable of women because they must face life’s difficulties alone: *‘They are left to their sad fate; they must look for food, care and house their children alone.’* For others, unwed mothers count among the most vulnerable since they are often deprived of the support of their family who, in certain communities, reject them. The vulnerable are also those who lost everything after a crisis (after a drought or through displacement caused by conflict). The sources of vulnerability are many and often intertwined.

Box 2: Portraits of the Most Vulnerable Groups

The fragility of the elderly: ‘Poverty is destitution’ explains an elderly man. Indeed, poverty and vulnerability are deeply accentuated among the elderly. The elderly men encountered for this study had practically no resources, lacked the strength to work, and often were abandoned by relatives. The luckier one might rely on a wife or children; otherwise they must beg to eat in the absence of any form of social welfare program. They have all been subjected to a number of crises over the years: ‘*In my lifetime,*’ said one, ‘*I can’t count the number of blows received, there were so many*’. Some lost all their belongings during the succession of wars that ravaged the city. Mobility for them is a veritable ordeal: ‘*I can’t even go about, particularly when it is hot,*’ laments one, and most suffer from chronic disease accompanied by the lack of appropriate care. Many worked at hard, precarious trades in the informal sector that have exhausted them over the years, with no pension for them to rely on now that they are past the working age.

A close connection between disability and poverty: People with disabilities suffer many physical, social and economic disadvantages. A disability is often the cause of rejection by one’s family and society. ‘*In the community, we’re just barely accepted and some of us are totally scorned, as if it was our intention to be in this situation.*’ Of the 21 women and men suffering from blindness who were interviewed, nearly all beg in the streets of N’Djamena to survive, dependent on their children to guide them. These children are, in turn, deprived of an opportunity to go to school. Specialized care is rare, and access to basic services is lacking: ‘*When we try to get in line at the hospital,*’ say women with a physical disability, ‘*Others insult us, saying we are taking up space for nothing.*’

Specific gender-based vulnerabilities: Our respondents consider almost all women to be vulnerable, either because of their inferior social status in most the local societies represented in the capital, the economic discrimination that often deprives them of an independent means of subsistence, or their physical vulnerability in regards to risks of pregnancy and gender-specific violence. Some suffer from exacerbated vulnerability (after a drought or displacements) and particular categories are identified as particularly vulnerable

Widows face enormous legal problems stemming from discriminatory inheritance laws. ‘If the deceased left a concession, his parents have one goal: to sell it and take 10% of the family’s portion of the inheritance,’ explains one widow. When the deceased leaves no bequest, the widow often is forced to sell off all of the family’s meager assets to pay the rent and take care of her family’s needs.

Unwed mothers have specific vulnerabilities linked to their social status, lack of education, and economic difficulties in caring for their children. In Chad, early marriage is still widespread, as well as unwanted pregnancies among adolescents. Most of the young women interviewed in selected centers in N’Djamena had left school because of an early marriage (at times forced upon them by a customary practice of marriage by abduction) or a pregnancy: ‘*Girls begin having sex at an early age, often as a result of the precarious economic situation of their parents which leads them to seek material support elsewhere. They have unwanted pregnancies and after that, they are abandoned by the father of their child. They soon find themselves as their child’s sole provider.*’ They cannot find work for lack of a diploma or an education. One of the girls admitted to being so desperate that she worked as a prostitute for a time; she stopped for fear of disease, ‘*My life was at stake, so I had to stop,*’ she said.

3. Poverty and Vulnerability in a Rural Sahelian Area: Bahr el Ghazal (BeG)

3.25 **Populations in the Sahelian band are vulnerable to chronic food shortages that threaten their very survival as well as their livelihoods.** Located in the heart of the Chadian Sahel, Bahr el Gazal is characterized by widespread poverty and chronic food shortage, with cyclical peaks during the period known as *soudure* (at the end of the dry season and before the rainy season). Every year, child

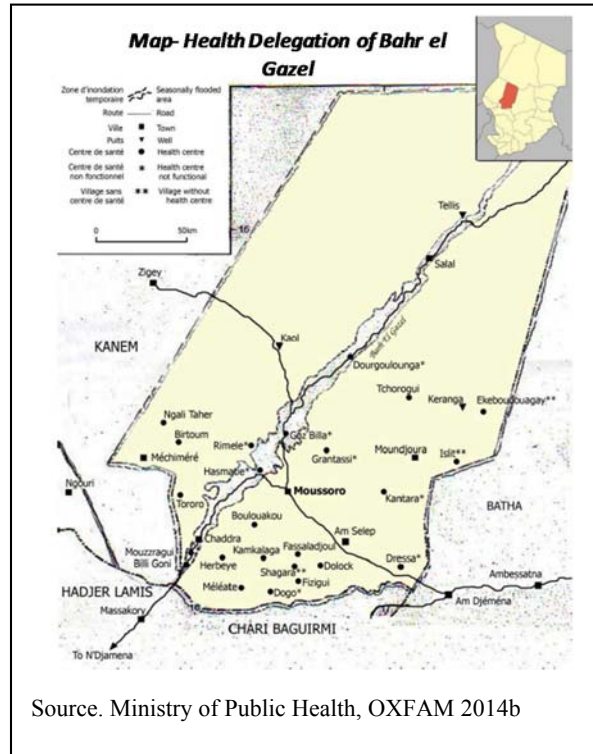
malnutrition rates far exceed emergency levels. A number of factors combine to cause fragility among the pastoral and agro-pastoral production systems of this arid zone.

Figure 47 - Map of Bahr el Gazal Region

3.26 While all communities in the region experience some degree of environmental vulnerability, the zone’s deeply entrenched social hierarchies make certain groups doubly vulnerable. These groups suffer from both social and economic marginalization based on a caste system that perceives them as inferior and relegates them to specified livelihoods such as blacksmiths and butchers.

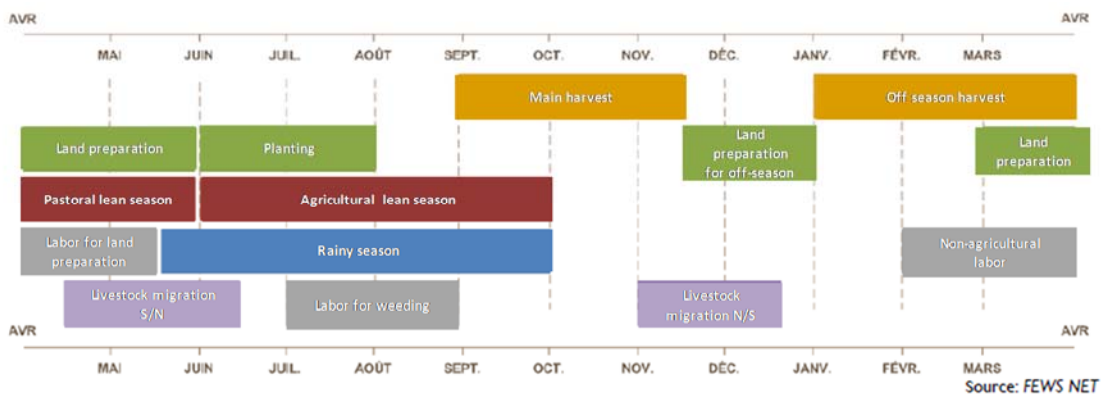
Basic Data and Statistics

3.27 Bahr el Ghazal is a semi-desert region linked historically to the ancient kingdom of Kanem. Erected as an administrative region in 2008 and divided into two subregions, Bahr el Ghazal has about 270,000 inhabitants (OXFAM 2012). The population is made up of several ethnic groups: mostly Goranes (Kreda and Daza) as well as Kanembous, Arabs and Haddads, a caste of blacksmiths (Renaudin and Raillon, 2011). Most of the population is Muslim.



3.28 There are three main regional production systems. Camel herding is practiced in the North, transhumant livestock herding in the Central zone (mixed herds of cattle and small ruminants), and agro-pastoralism combined with off-season market-gardening activities in the southern waddis. According to the latest general census, Bahr el Ghazal registers the highest proportion of nomadic population in the country, 37.2%. It is also has the highest emigration rate, at 23.5% (RGPH 2009). Its rural economy is patterned by the changing seasons (Figure 48).

Figure 48 - Seasonal Calendar in a Typical Year, Sahelian Zone



Source: FEWSNET 2014.

3.29 Bahr el Ghazal is characterized by widespread poverty, with specific poverty profiles depending on the zone. According to ECOSIT 2011 data, poverty affects 42.5% of the BeG population. According to the HEA¹⁶ analysis used by FEWSNET, poverty profiles are largely linked to livelihoods in the region's different zones:

- In the transhumant livestock zone, where 39% of households are classified as poor or very poor, poverty is determined by the small herd size and social status; the poorest rely on salaried employment offered by wealthier households, wild food product harvesting, and mat weaving.
- In the agro-pastoral zone, where poverty is even higher (52%), poorer households are identified by a lack of both livestock and family workforce; in general, the number of wives and children increases with household wealth.
- In the region's southern agro-pastoral zone with market-gardening, poverty engulfs over half (59%) of households. The leading wealth or poverty indicators are household size, cropland area, land, herd, and farm equipment ownership (motor pumps). (OXFAM, 2011).

3.30 A number of factors combine to render the different livelihoods ever more fragile and precarious. Local systems of production suffer from the effects of climate change and experience seasonal shortages during the lean season (hunger gap period); commercial transactions are hindered by lack of roads as well as insecurity and market disruptions caused by Boko Haram; among the most vulnerable, household well-being is jeopardized by the departure of able-bodied household members who regularly migrate to seek employment in urban centers and the next generation's human development is at risk due to the lack of basic social services and infrastructure (schools, health and maternity centers).

3.31 Households are particularly affected by climate shocks. According to the National Food Security Survey (ENSA), 40% of households experienced at least one shock (e.g., drought, crop pests, and flood) in 2014. The late onset and poor distribution of rains were leading factors affecting household resilience. The 2014 lean season forced households to adopt coping strategies that had a negative impact on their livelihoods; early departure on seasonal migration, harvesting of wild food sources, a decrease in the number of daily meals and indebtedness are among the coping mechanisms observed. The departure of men on migration leaves women as both sole heads of household, and in charge of production: such female-headed households are the poorest and the lowest of all food consumption rates (OXFAM, 2015).

3.32 The region is affected by chronic food insecurity, with cyclical peaks during the lean season. In 2014, the northern and southern subregions of Barh El Ghazal had respectively 36% and 32% global food insecurity and 8.6% severe food insecurity (ENSA 2014). According to a rapid survey undertaken by OXFAM, cereal stock levels among very poor households could only cover 20-30 days' worth of foods requirements, placing the population at risk of acute food insecurity (OXFAM, 2014b).

¹⁶ The Household Economy Approach (HEA) is used to develop a deeper working knowledge of the determinants of food insecurity and malnutrition for different socioeconomic groups living in areas with similar livelihoods.

3.33 Malnutrition rates regularly exceed the emergency-level threshold. According to survey data on nutrition, the prevalence of global acute malnutrition (GAM) in the nine Sahelian regions regularly exceeds 15% during the lean season (Belemvire and Ziba, 2015). The Standardized Monitoring and Assessment of Relief and Transitions (SMART) Survey 2014 indicates that GAM rates among children aged 6-59 months exceeded the emergency-level threshold, with rates of 17.2% on a regional level and 21.3% in the Moussoro area (administrative center). Pregnant and lactating women were also affected, with a relatively high malnutrition rate of 7%. Women and children suffer most from malnutrition and the risks associated with the lack of food, because men have priority access to food within their households. A lack of access to drinking water and sanitation and the absence of appropriate infant feeding practices all contribute to a high infant malnutrition rate as well (OXFAM 2014b, 2015).

3.34 Human capital development is further hindered by limited access to education. The literacy rate is very low in this region, reaching only 14.3% of the population 15+ years: it is three times lower among women than men (6.9% vs. 23.3%). Primary school is attended by only 40.9% of children ages 6-11, dropping to 34.5% among the poorest children. On average, children spend 30 minutes to reach a primary school; this more than doubles (to 70 minutes) among the poorest children. Education expenses in relationship to total household expenses are very low (0.7%) and less than half the national average (1.6%) (ECOSIT 2011).

3.35 Access to health care centers is also limited. The majority of the population (78%) uses public health centers for consultations; however, it takes 1¾ hours to reach the closest the center. Financial barriers add to the difficulties of access: Among those who do not consult when ill, 60.9% attribute it to a lack of money. Health and medical expenditures as a proportion of total annual household expenses are low for the regional population as a whole (2.4%), but are higher among the poor (3%) than the non-poor (2.2%) (ECOSIT 2011).

3.36 There are also specific gender-based vulnerabilities. In comparison to men, women are not only deprived of education and instruction, they are also burdened with a lack of financial autonomy. This is particularly problematic in a region with a strong out-migration rate among men, where women must cope with caring for children and the elderly for long periods of time. ECOSIT 2011 data show that only about one woman in four has a bank account (26%), and only one in five has had access to credit (22.6%) or is involved in decision-making for an income-generating activity (22.3%). Women are also exposed to physical violence: Over half say they have been struck by their husband for leaving their home, neglecting their children, or for poor meal preparation (ECOSIT 2011).

Fieldwork Findings

3.37 Fieldwork was carried out in several rural communities with notably different profiles. Around Moussoro (the agro-pastoral zone) it included three villages: Kagai inhabited by the Ilynass (former slave caste of the Kreda Gorane); Tchiwourou inhabited by Haddad (lower blacksmith caste); and Chabaka (focusing on a group of Ilynass women gardeners). Around Mandjoura (the transhumant pastoral zone), fieldwork took place in the village of Turki'i inhabited by the Daza of Gorane. The field research team also met with the region's various community leaders in Moussoro as well as with government officials and NGO representatives working in the region.

3.38 **Poverty is defined locally in a number of different ways.** The regional social action representative viewed a poor person as lacking food and financial means, more particularly, with limited means of livelihood. Among Moussoro's Arab community, being poor means being destitute, having no livestock or agricultural production. Among the Iyalnass, a poor person is destitute and must earn a living any way possible, owns neither livestock nor land, and must use physical strength to earn his/her keep. A poor person does not engage in commerce and is not a civil public servant. As with the Haddad, poverty is linked to social status: *'The Haddad and Iyalnass groups are lower than the Kreda; we are at their service and if they have needs, they call upon us and we cannot refuse. Even the land belongs to them – we are not equals, we are the dominated ones,'* explains one. Among Chabaka's group of Iyalnass women gardeners, poverty translates as destitution and hunger. Characteristics of a poor person include dirty clothing, lack of food and lack of employment. Among the Gorane Daza in the village of Turki'i, a poor person has no livestock and is only able to live with the help of others.

3.39 **Definitions of vulnerability resemble those of poverty, but with a few nuances.** The regional social action representative defines vulnerability as being in a daily state of neediness (lack of food, unmet basic needs). Among Moussoro's Arab community, a person who has no strength is considered vulnerable. Among the Iyalnass, the vulnerable are those with nothing to eat, no work and nothing to do and who are characterized by hunger and poverty. In the Haddad village of Tchiwourou, the vulnerable person is characterized as someone *'who does not move'* (i.e., with no social mobility); this is closely linked to their inferior caste as marginalized individuals who are both economically and socially dominated by others. *'You might practice an activity that generates revenue but once completed, your master reaps the profits,'* one points out. *'Just in asking for the hand of a nobleman's daughter, we are bound to pay a huge fine,'* adds another. In the village of Turki'i, among the Gorane Daza, a typically vulnerable person is represented as a herder who owns only a few heads of livestock, has no milk or consumer foods, no access to school or hospital care, and no job.

3.40 **The poor and the vulnerable share a number of distinguishing characteristics.** Through a participatory exercise, the regional social action team estimated the scope of local poverty, outlined key characteristics of households according to different wealth rankings, and described the social attitudes towards each group (see Table 3).

Table 3 - *Categorizations and Characteristics of Groups According to Wealth Rankings*

Characteristics	Well-off Households	Middle Income Households	The Poorest/Most Vulnerable
Economic	Employed (mostly important traders); large tracts of arable land; big herds of livestock (camel and cattle)	Modest jobs; small areas of arable land to exploit; with small herd of livestock	Day laborer job; inherited access to land, few animals
Housing	Well-fenced, permanent and semi-permanent dwellings	Mud and thatch dwellings (<i>poto-poto</i>), sometimes fenced	Unfenced, woven straw or mud and thatch dwellings (<i>seko</i> or <i>banco</i>)
Food	Meat, poultry, rice, good quality pasta in large quantities; 3 meals/day.	Meat, chicken, rice, bread of modest quality; 2 meals/day	Dehydrated meat, mediocre quality soap; 1 meal/day
Education	Acceptable levels of education among adults. Some traders with no schooling, but others graduates (up to master's degree); access to good and well-built schools for children.	Bachelor's degree, high school diploma; access to good schools for children, but with poor quality instruction.	Mostly no education (some with primary education only)
Health care	Access to health care and good health care coverage.	Access to health care but no full health care coverage	No access to health care, no health care coverage
<i>Coping Strategies of Each Group When Facing Shock</i>			
Economic	Sell land, home and/or herd. Rent out houses.	Do odd jobs. Live in rental dwelling.	Sell inherited assets. Beg. Wait for outside assistance.
Social	Send children away to study. Create schools & health centers.	Send children to nearby cities.	No existing social strategy.
<i>Attitudes towards Various Groups</i>			
	Scorn	Compassion	Compassion, pity

Source: Participatory exercise on community mapping, Moussoro Social Action Delegation.

3.41 Fieldwork confirms the impacts of livelihood insecurity on poverty and vulnerability, with our respondents highlighting climate change. Because of environmental degradation and recurring shocks, '*Many families have left the region to settle in Batha and Kanem,*' explain some of the study participants. This situation strips the region of its active labor force, with negative repercussions on productive activities at the household level. Key regional respondents note: '*Young people are obliged to leave and try their luck elsewhere. Here, there's nothing.*' Local officials affirm the population cannot survive without interventions by NGOs and the State. According to the region's NGOs, '*We are not only speaking of poverty, here, but of total misery.*'

3.42 Pastoralists note a gradual degradation of the environment, punctuated by recurring shocks. Issues surrounding water and grazing lands have become critical, according to testimonials obtained from Daza pastoralists in Turki'i: '*In the past, there were grazing grounds and our herd provided us with enough money – even our children's skin was smooth.*' But the rainy season is now shorter and the dry season longer. With such little rain, there is no more grass and the livestock suffer, as do the households who depend on the herds: '*The cows no longer produce enough milk: it is no*

longer possible to feed ourselves on our animals' milk. A constant search for grazing grounds forces families to split up for a larger part of the year; the men leave the villages at the end of the rainy season and only return in late February, which leaves households vulnerable during the gap and creates other problems. *'We are forced to leave our region and travel very far to let our herds graze, and this exposes us to conflicts with farmers'* explain some herders. The lean season extends from April to August, creating many challenges linked to food insecurity. *'So pastoralists incur debt or sell their animals to survive – both man and beast suffer,'* advances an officer from the National Rural Development Office (ONDR). But selling emaciated animals in the market does not bring in many returns. *'Our purchasing power has sharply declined,'* exclaims Turki'i's village chief, and coping and survival strategies are subsequently becoming quite limited (see Table 4). The absence of markets in the immediate vicinity represents a significant constraint, particularly in the northern zone.

Table 4 - *Recurring Shocks, Coping and Survival Strategies in Bahr el Ghazal*

	1970-1973	1984-1985	1990	Depuis 2009
Types of shock	Drought and famine.	2 nd drought and famine.	An epidemic they called 'cholera'.	Animal diseases caused by poor grazing conditions.
Strategies	Sale of livestock at a loss, transhumance, nomadism.	Many families left the region to settle in Batha and Kanem, and practice harvesting.	God saved the people; interventions in Moussoro by humanitarian organizations also important.	Veterinary medicine, transhumance, nomadism.
Effects	Livestock decimated, abysmally low livestock prices; misery.	Countless fatalities (persons and livestock), hyena attacks, even inside dwellings.	Many fatalities, namely around the Bourka well (70 persons) with ensuing burial issues. (<i>'Survivors hadn't the strength to bury the dead.'</i>)	Great deal of livestock is decimated, no milk, low livestock prices.

Source: Community Chronology, Turki'i Village.

3.43 Agricultural constraints have also intensified over the years. Decreased rainfall has caused a significant drop in production. *'When they farm'*, declared a representative from the regional delegation of agriculture and environment, *'People know for a fact that 90% of their planting will not produce anything, even if it germinates. People say they continue farming only to maintain their land titles.'* According to the Kagai village chief, *'We meet with enormous difficulties since the rains have become so rare, and the rainy seasons so short. These difficulties are amplified by crop diseases and conflicts between farmers and herders. The situation is becoming very difficult because it's sandy here and when you plant, you produce nothing'*. Production methods are rudimentary and populations experience terrible hardship with both rainy season and off-season crops. Crop pests such as crickets and millet-eating birds represent a permanent threat. After the rainy season, the *waddis* (depressions between dunes, or inland-valley areas), mostly exploited for market gardening purposes by women, face specific challenges (see Box 3).

Box 3: Challenges Facing Women Market Gardeners

Iyalnass women living in southern Bahr el Gazal plant garden crops around the *waddis*. Around Moussoro, there are 88 groups of female gardeners, each with an average of 15 women. Their activities are regulated by the seasons: during the rainy season, they grow millet; in the dry season, they grow onions, gumbo, garlic, carrots, peppers, beets, eggplants, cabbage, potatoes, celery and lettuce. Wells equipped with motor pumps ensure irrigation.

At harvest time, the women in each group send representatives to sell their products at various markets. A portion of the profits is reinvested to defray the groups' operating costs, particular motor pump fuel. The rest is distributed among group members in the form of dividends.

The women's main problem is the exorbitant price of motor pump fuel (1,500 CFAF for 1.5 liters), which also fluctuates constantly: '*We fall into debt over fuel, and at harvest time our suppliers take everything – sometimes we are left with nothing,*' remark the members of a women's market garden group called *Nagdoro* ('We Can' in Chadian Arabic). Their tight cash flow does not permit them to fence in the garden areas properly. The women also complain about the electric generators which are very old, small and of low capacity.

3.44 **Other income-generating activities remain quite limited.** Alternative or supplemental income-generating activities in the region are limited to small businesses and to the provision of assorted services (by blacksmiths, weavers, manual laborers, potters and the like). The Ilynass of Kagai village chop wood and straw, transport goods on wheelbarrows, and work as butchers. They face a number of difficulties including lack of access to land and diminishing supplies of wood around their villages; when they travel farther away seeking new supplies, other communities prohibit them from cutting brushwood or straw on their lands. Water and forestry officers as well as municipal guards, they say, also cheat them as they carry out their activities.

3.45 **Key causal factors linked to vulnerability vary according to the life cycle of an individual.** According to our respondents, a crucial problem within every age group is access to proper quantities of quality food; other more specific challenges occur within each age group as follows:

- **Young children** are exposed to acute malnutrition, in part because their mothers do not consume adequate quality nutrients, but also because of poor infant nutrition practices and the high incidence of waterborne disease. Turki'i, for example, has no health or nutrition center for children. As discussed, families suffer the secondary effects of men's urban migration.
- **School-age children** are deprived of an education for lack of household means, lack of schools, or distance to school. Children may also work, making an important contribution to household income. Girls are withdrawn from school to work as maids, while children from families where livestock is the main livelihood can often not attend school because of their family's high degree of mobility.
- **Youth** run the risk of drug addiction due to a lack of schools, civic spirit or because they have dropped out while others become '*thieves*' according to the social action representative, while girls are married off at a young age.
- **Women of child-bearing age** suffer because of the absence of a health center nearby. Most give birth at home; some have to travel as much as 80 km to find a health center equipped for

child birth. ‘*Many are the women who die during childbirth*’, state the women interviewed. According to the Moussoro’s *khalifa* (head of the Arab Women in the community), Arab women often feel excluded from social services in the region.

- **People of working-age** face precarious livelihoods like loss of animals due to heat, lack of water and livestock fodder; uncertain agricultural returns to adverse environmental conditions and crop pests; and, lack of work, education, and unemployment. The on-going rural exodus has accentuated the vulnerability of those who remain.
- **The elderly** are totally dependent on others, their children in particular.

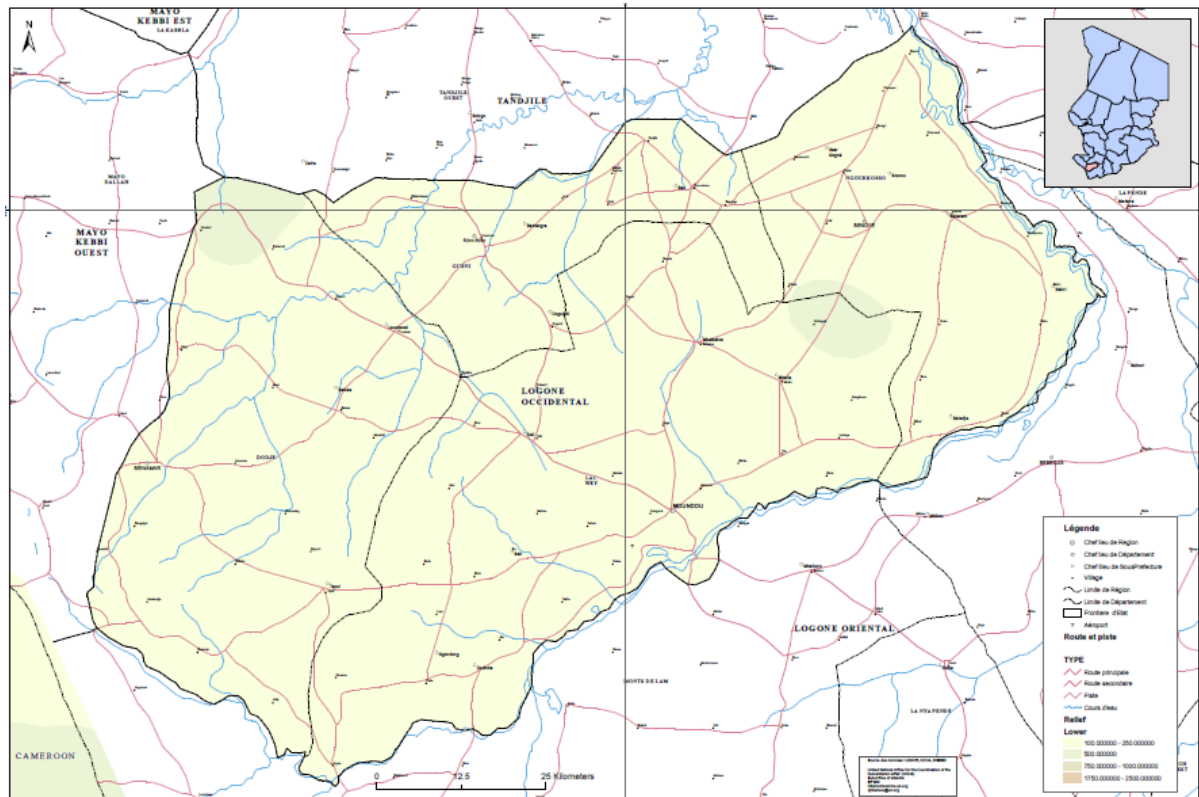
3.46 **There are several types of gender-based vulnerability.** Beyond the problems associated with the lack of access to basic social services (health and education), women face enormous challenges in regard to livelihood issues. Often left alone for long periods of time by their men folk, who set out looking for work in the big urban centers, women are left in charge of the household (food, childcare, and housing). Some Iyalnass women weave traditional mats for sale in the markets, using the proceeds to feed their households. Others (especially in the southern part of the region) garden around the *waddis* (see Box above). Daza women essentially live off their own farm products while in Haddad villages, the majority of women work as potters. In the face of different kinds of shock, coping strategies include selling off belongings or falling into debt.

4. *Poverty and Vulnerability in Rural Area in the South: Logone Occidental*

3.47 **Located in the southern part of the country, Logone Occidental is one of the three regions in Chad where poverty levels rose steadily between 2003 and 2011.** Logone Occidental was selected as the southern research site in part to better assess the factors that have contributed to this rise in poverty levels. A deeper analysis of basic data and statistics on the region, combined with respondent interviews, provides us with a number of insights into this phenomenon.

Basic Data and Statistics

3.48 **Known as ‘useful Chad’ in the colonial era, Logone Occidental is one of six regions in the country’s southern zone.** It is located in the southwestern portion of the country and divided into four departments, with its capital in Moundou. The region has been one of the economic motors of Chad and a center for industry. The corporate headquarters of both *Coton Tchad* (the parastatal agency in charge of the cotton industry) and *Brasseries du Logone* (the beer brewing agency), Moundou also has a high concentration of NGOs and on-going development projects (Magrin 2001). In 2009, the region’s population was 683,293. The Ngambay sociolinguistic group represents over 90% of the population (RGPH 2009).

Figure 49 - Map of Logone Occidental

Source: OCHA 2013.

3.49 Until recently, the southern regions of Chad were mainly known for their cotton production. A cash crop introduced back in the colonial era, cotton earned more than 40% of the country's export revenues from its revival, during the mid-1990s, to the early years of the past decade. But more recently, a rise in production costs (rather than weak cotton share prices) combined with inefficient business practices within *Coton Tchad* so decimated the sector that today cotton is but one cash crop among many, including groundnuts, sesame, and cowpeas. The regions of the South are also an important area of cereal production, producing enough to achieve self-sufficiency and even surpluses in good years; this despite a relatively high population density that limits the size of land holdings (FEWSNET 2011).

3.50 Logone Occidental has the sad distinction of being one of only three regions in Chad where monetary poverty increased between 2003 and 2011.¹⁷ The incidence of poverty in Logone Occidental rose from 57.6% in 2003 to 66.4% in 2011, meaning 464,637 currently live in poverty in the region. The poverty depth (difference between the average consumption of the poor and the poverty threshold) also grew, rising from 22.7% in 2003 to 27.7% in 2011; while acute poverty (standard deviation or average gap between consumer expenditures of the poor in relation to the average expenditure ratio) rose from 10.9% to 15.2% (ECOSIT 2011).

3.51 This same deterioration is mirrored on the multidimensional poverty index. While the national multidimensional poverty index fell slightly from 0.569 to 0.562 between 2003 and 2011, it

¹⁷ The two other regions are neighboring Tandjilé, and Ouaddai/Sila.

rose over the same period in Logone Occidental from 0.547 to 0.623 (World Bank, 2013). The multidimensional poverty index is a measure of deprivation applied to different sectors such as health, education, housing, basic services, and social infrastructure. Table 5 shows the progression of deprivation across different sectors in Logone Occidental between 2003 and 2011, as compared to national statistics. All indicators, except primary school attendance and ownership of assets, show increased deprivation levels in Logone Occidental between 2003 and 2011.

Table 5 - *Comparative Deprivation Indicators – Multidimensional Poverty Index: Logone Occidental*

Indicator	National		Logone Occidental	
	2003	2011	2003	2011
Literacy	32.5	45.1	22.5	39.4
Primary School Attendance	49.8	45.1	41.6	54.4
Nutrition	55.2	55.8	65.0	77.1
Electricity	96.3	96.6	96.6	97.5
Appropriate Sanitation	87.5	92.7	82.1	93.3
Appropriate Drinking Water	71.4	60.8	58.1	78.6
Household Energy (cooking fuel)	89.1	98.3	85.9	98.8
Housing Quality (market gardening plot)	93.9	92.8	87.7	89.8
Acquisitions (telephone, radio, bicycle or motorcycle)	65.7	34.8	49.0	42.0

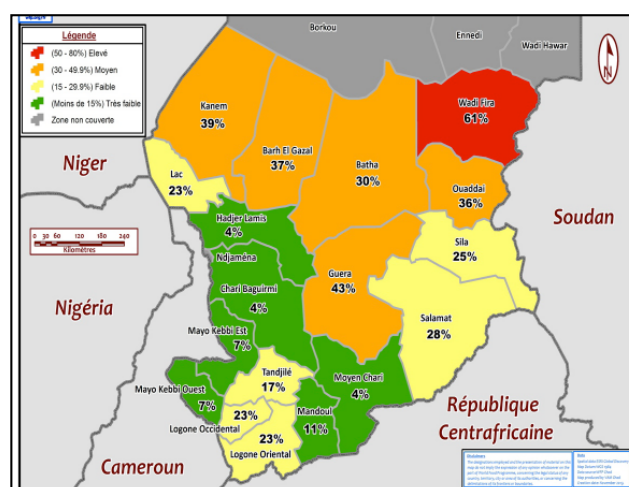
Source: World Bank (2013), based on ECOSIT 2003 and 2011 data.

3.52 Low school enrolment rates jeopardize human capital development and contribute to the intergenerational transmission of poverty. According to ECOSIT 2011 data, about 39.4% of the population 15+ years in Logone Occidental is literate. Among the poor, the figure stands at just over a quarter (28.4%), and among women it is nearly one in five (18.4%). The net school attendance rate among children 6-11 years stands at 54.4% overall, but only 49.5% for girls. The average time spent getting to a primary school in this area is just over one hour (62 minutes); poor children spend twice as much time getting to school (104 minutes), compared to non-poor children (53 minutes). In comparison to total annual household spending, education expenses amount to just 1.8%.

3.53 Equitable access to quality health care services is equally problematic. According to ECOSIT 2011, the average time spent to reach the closest health center is over an hour and a half (99 minutes) overall, but nearly two hours (115 minutes) for the poor. This could explain the very low consultation rates at public health centers (26.5% of patients), as compared to home-based medical care (40.7%). Among the sick who do not consult, over two-thirds (67.5%) attribute it to lack of money, while 17.3% say they are following other treatments. Compared to total annual household spending, overall health expenditures amount to 4.3%. This figure is higher among the poor (4.7%) than the non-poor (3.7%), indicating the poor use a greater portion of their income on health care.

3.54 **For an agricultural zone, the level of food insecurity in Logone Occidental is staggering.** According to a food security survey conducted in rural households in the Sahelian and Southern zones (World Food Program, 2013), in 2013 the level of food insecurity in the two Logones, though classified as low on the food insecurity map, rose to 23%, a figure that is much higher than in the rest of the Southern zone and higher than the national average (21%) (see Figure 50). One year later, the situation had greatly improved, with food insecurity levels in the region’s different departments ranging between 4% and 10% (NSFS, WFP, 2014). Nevertheless, such volatility indicates that, contrary to most expectations, southern populations do face significant risks of food insecurity.

Figure 50 - Food Insecurity, Nov. 2013



Source: Performance Accelerator Module (PAM) 2013.

3.55 **Chronic malnutrition affects a large percentage of the region’s children.** While acute global malnutrition is not considered to be a serious public health issue in the South, chronic malnutrition ranks far above the 20% warning threshold in seven southern regions, including Logone Occidental, where the malnutrition rate is 37.7% among children ages 6–59 months (Figure 51). As elsewhere, the causes of child malnutrition are diverse, linked, among other things, to the mother’s nutritional condition, child feeding practices, and hygiene conditions that depend on the availability of water and sanitation. In Logone Occidental, nearly half the population (47.2%) spends an hour or more fetching water for their household (SMART survey, 2013).

Figure 51 - Malnutrition in Southern Chad

Régions	Prévalence de Malnutrition Globale - % (IC 95)		
	Malnutrition Aigüe Globale (6-59 mois)		Malnutrition Chronique Globale (0-59 mois)
	P/T	PB	
Moyen-Chari	5,3 % (3,7-7,5)	4,4% (3,0 - 6,5)	20,4 % (17,4 - 23,9)
Mandoul	2,0 % (1,2 - 3,0)	2,8 % (1,8 - 4,3)	22,5 % (19,7 - 25,6)
Logone Occidental	6,4 % (4,8 - 8,4)	6,5 % (4,9 - 8,5)	37,7 % (34,4 - 41,2)
Logone Oriental	3,8 % (2,6 - 5,5)	6,7 % (5,1 - 8,8)	34,8 % (31,4 - 38,2)
Mayo Kébbi Est	3,9 % (2,6 - 5,6)	8,7 % (6,8 - 11,1)	43,9 % (40,2 - 47,6)
Mayo Kébbi Ouest	4,1 % (3,0 - 5,7)	4,9 % (3,7 - 6,3)	39,9 % (36,9 - 43,1)
Tandjilé	2,8 % (1,7-4,5)	3,5 % (2,4 - 5,0)	27,8 % (22,8 - 33,3)
7 régions	4,6 % (4,0-5,3)	5,3 % (4,6-6,2)	35,8 % (33,2-38,4)

Sources: OCHA 2013, SMART survey results, UNICEF, and Center National de Nutrition et de Technologie Alimentaire.

3.56 **There are a number of gender-specific vulnerabilities.** According to ECOSIT 2011, the women of Logone Occidental suffer from a lack of financial autonomy. Only 13.6% have bank accounts and just over a quarter (26.5%) is involved in decision-making regarding income-generating activities. Overall, a very low percentage of loans is taken out by women (5.5%); among poor women, this percentage is ten times lower than among non-poor women (1.6% vs. 11.6%). Women also suffer from physical violence: over 80% say they have been struck by their husband for leaving their home or neglecting their children; over 70% have been struck for a poorly prepared meal; and close to half are struck if they argue with their husband or refuse to have sexual relations.

3.57 Several factors contribute to rising levels of poverty and vulnerability in the region:

- ***A deterioration of conditions in the cotton sector*** is largely responsible for rising poverty levels in the two regions of Logone Occidental and Tandjilé (World Bank 2013). According to one recent analysis, *‘The commercial cotton crops that have provided structure to the region since the 1930s seem doomed in 2011’* (Magrin et al., 2011). The sector faces challenges both internally (poor management at Coton Tchad and low-capacity production among local growers and village associations) as well as externally (low export prices). According to the same analysis: *‘This umpteenth crisis – more serious than any of the previous ones – is calling the very existence of this crop into question. In depriving hundreds of thousands of cotton growers of a great portion of their annual income and access to loans, the crisis deeply affects the Southern zone’s formal urban economy’* (Magrin et al., 2011).
- ***High demographic pressure combined with the effects of climate change*** contributes to the degradation of ecosystems, rendering fragile the rural livelihoods that depend on agriculture, fishing and livestock. These factors also accentuate conflicts between farmers and pastoralists regarding the usage of, and access to, natural resources. In this region where demographic densities are the highest in the country, extensive farming systems seem to have reached an impasse because demographic growth has not been supported by radical improvements in agricultural practices. Based on itinerant forms of slash-and-burn agriculture where land management involves long fallow periods, farmers find themselves confronted with little available space for farming, which entails shorter fallow periods that cause soil impoverishment (Magrin et al 2011; Magrin 2001). In addition, the migratory patterns of groups of Sahelian pastoralists who - forced out by environmental degradation in the north - have progressively settled in the south, have provoked conflicts with local farmers, particularly in the twice yearly transhumance of herds across their tracts farmland (USAID FEWSNET 2011).

3.58 **HEA analysis confirms high poverty levels across the zone and provides details on household profiles according to different wealth categories.** FEWSNET’s HEA analysis covers the totality of the cereal and cash crop livelihood area (considered Zone 1) encompassing four separate regions (and thus only indicative for Logone Occidental). The analysis ranks households into four categories based on their distinguishing characteristics and provides estimates for each group. Grouping the poor and very poor together, it is clear that in spite of zone 1’s relative productivity, poverty is widespread (at 42%). In terms of household characteristics, what is most noticeable is the difference in household size, which raises from three to four among the very poor to 20-25 among the wealthy. Richer households have both a greater ability to provide for a large family and a greater opportunity to profit from the resulting increase in household productive capacity. The area of land that is farmed spans from 0.5-1 ha among the poorest to 10-15 ha among the wealthy, who can also obtain agricultural inputs. The biggest gap between the rich and poor is in livestock ownership (0 for the very poor and poor versus 15-20 for the wealthier, including 6-8 oxen that also ensure optimal land exploitation for cereal cash crops) (USAID FEWSNET 2011, see Table 6).

Table 6 - *Wealth Distribution in Zone 1, Southern Chad*

	Very Poor	Poor	Median	Wealthy
Percent of Pop. (Year Ref.)	6%	36%	39%	19%
Household Size (No.)	3-4	5-8	10-12	20-25
Cultivated Land (ha)	0.5-1	1.5-2	4-5	10-15
Productive Assets				
Chicken	0	4-5	15-20	30-40
Small Ruminant	0	2-3	18-20	25-30
Pig	0	4-6	8-10	0
Total Livestock	0	0	3-4	15-20
Draft Oxen	0	0	1-2	6-8
Other	0	0	2-3 donkeys 1 ox cart	3-4 donkeys 2-3 ox carts 2-3 plows

Source: USAID FEWSNET 2011.

3.59 Coping and survival strategies in poor households are limited. The poorest farmers who normally have barely enough food and money to eke out a living in normal years on the basis of rain-fed agriculture, are critically exposed to risks that might lower agricultural yields. A minority of farmers with access to wet lowland areas or to flood recession land are, to a certain extent, able to compensate for a poor main crop by producing a second crop of fast-growing pearl millet or sorghum thanks and by increasing vegetable crops when there is a demand from a nearby market. Otherwise, the poorest farmers with only a few or no heads of livestock to sell have few alternatives other than trying to boost the activities they already practice.

- Most take on additional paid work: collecting more firewood to sell, and transforming more of it into charcoal for its added value; harvesting more wild foods to consume and sell; and selling more hand-crafted products; and in certain areas, intensifying hunting and fishing.
- If there is not enough available work on site, the most active household members (generally the men) temporarily migrate towards urban centers to look for work.
- During food shortages (or times of serious personal hardship), households also turn to loans but often at extremely high interest rates (50-75%) that can lead to chronic over-indebtedness.
- Poorer households also turn towards wealthier parents for help; part of this assistance may be offered free of charge, while the rest is in loans (USAID FEWSNET 2011).

Fieldwork Findings

3.60 Fieldwork was carried out in several rural communities and one peri-urban community. The rural communities were in Benoye, Laokassy and Toul, as well as a fishing community in an outlying area around Moundou. The fieldwork team also met with the mayor of Moundou, regional government representatives, NGOs and key partners operating in the region, as well as representatives from various churches.

3.61 Local definitions of poverty point to the multiple dimensions of deprivation experienced by the region's poor. Poverty ('*dôh*' in the Ngambay language) is defined as a lack of food, means of subsistence or of minimum financial means. Someone is also described as poor because of a lack of decent living conditions (water, housing, school, health). For our respondents in Toul, '*Being poor*

refers to someone who has nothing at all – he or she is thin and has no place to live'; the predominant characteristics are hunger and dirtiness. In the village of Benoye, according to a member of the community, poverty means having nothing at all – *'Neither cereal, goat nor chicken'*. There are different degrees of poverty – ranging from someone who has practically nothing and lives in a straw hut, to someone who has a little but in insufficient quantities (a bit of food and barely 2 or 3 chickens). Local officials say poverty is further aggravated by a lack of basic social services (one doctor for every 65,000 inhabitants; one nurse per rural center; a 2-hour walk of 25 km to the nearest health center).

3.62 **There are nuances in the definitions of poverty and vulnerability.** According to the regional social action representative, a vulnerable person is one who is exposed to disease, is unable to work, and lacks money. According to him, everyone can be vulnerable but the most vulnerable groups include women who have no means of livelihood, widows, the elderly and disabled, and orphans and vulnerable children (OVCs), because these people are affected, infected, afflicted and marginalized. A person is considered vulnerable when weak, non-productive or without strength. In the Ngambay language, in the Toul community, this translates as *'Doye gue togué assal.'* The majority of our respondents think that people feel either compassion or pity towards the vulnerable. For most, vulnerability and poverty are close but for some, the nuance is that vulnerability is linked to increased exposure to risk or shock, while poverty is linked more to a lack of some critical resource.

3.63 Community mapping according to wealth captures these distinct characteristics well, along with the coping strategies of each group. Based on a participatory exercise conducted in Benoye community, the most vulnerable are those who are the poorest, have the least food, are poorly educated and not well cared for, whereas the wealthier have a chance to access essential consumer goods and quality basic social services that predispose them to a better life. These perceptions reinforce the concepts of multidimensional poverty as well as the intergenerational transmission of poverty and vulnerability. Our respondents estimate that the vast majority of their community members (75%) are 'vulnerable' or 'very vulnerable'. The most vulnerable are reduced to begging or to a state of dependence on their extended household. In their opinion, the poor inspire compassion or pity, while wealthiest households or individuals inspire 'hatred' (see Table 7).

Table 7 - *Categorizations and Characteristics of Groups Based on Wealth*

Characteristics	Wealthy	Middle Income	Poorest / Most Vulnerable
Economic	Farming and livestock raising (beef, sheep); fertile land (access to fertilizers, manure and seeds); quite large crop area	Farming and small ruminant livestock, with a few oxen; small farm small areas around buildings	Beggars, 'lazy' persons and those who depend on their relatives
Housing	Permanent housing with sheet-metal roofing, and 2 or 3 rooms	Straw huts or round dwellings made of mud and thatch	Woven straw huts (seko)
Food	Good quantities of quality meat, fresh fish, chicken, rice; 2 meals/day	Meat, some fresh and smoked fish, fair quality staples; 1 meal/day	Smoked fish, vegetables, millet, mediocre quality staples; 1 meal/day
Education	Except for some traders with no schooling, acceptable levels of education among adults. And some graduates (master's degree); access to good and well-built schools for children.	Primary education for parents; access to school for their children but poor quality instruction.	No education, or primary level for adults;; limited schooling for children
Health	Access to health care and good hospital coverage in Moundou; access to veterinary services.	Access to district health center in Benoye, with full coverage. Occasional use of roots and 'Choukou' (bush) doctors	No access or coverage; recourse to 'Choukou' (bush) doctor or plant roots.
<i>Coping Strategies in Times of Shock</i>			
Economic	Sell livestock and crops.	Sell already meager production and small ruminants	Beg; wait for family assistance
Social	Send children to study elsewhere	Send children to cities	No existing social strategy
<i>Attitudes towards Different Groups</i>			
	Scorn/hatred	Compassion	Compassion, pity

3.64 Over the past few years, the populations of Logone Occidental have experienced a number of shocks that have profoundly tested livelihoods and coping strategies. These include various sociopolitical troubles, floods and famines, the collapse of the cotton sector, epidemics, field devastation by crop pests and the increasing impacts of conflicts between farmers and herders. All these factors were recounted in a participatory community-mapping exercise conducted in Laokassy with the cantonal chief and community members (see Table 8).

Table 8 - *Community Mapping, Laokassy*

Type of Shock/Crisis	1980	1990	2000	2010	2015
Environmental			Floods (1995 & 2002)		Destruction of Fields/trees by elephants
Food Shortages		Famine (1984)			
Economic Crisis		Delayed cotton purchases due to devaluation of CFAF in 1994 & 2000/2; falling prices; total abandonment of cotton sector (2005)			
Sociopolitical Insecurity		War (1984) and rebel movements from Laoukein Bardé (1994-95)			
Epidemics			Chicken pox (1990)		Meningitis (2012)
Other				Farmer/herder conflicts (2013)	
Local Coping Strategies	Livestock sales/loans Distribution of goods or edible wild tubers Refuge found in brush land Vaccination campaign, or recourse to traditional practices Creation of a committee to assess destroyed crop values (ending in 2014 with the Laokassy Accord) Reconstruction of dwellings destroyed by floods				
Effects on Poverty/Vulnerability/Wellness	These shocks have had very negative impacts on well-being, accentuating poverty/vulnerability in Laokassy. People are growing poorer and more vulnerable.				

3.65 Farmers are facing a crisis due to climate change, environmental degradation and outdated production methods. The mayor of Moundou speaks of the stresses of high population densities on natural resources: *‘There are more farmers, not enough land; people are forced to move inland looking for land; there is deforestation and desertification’*. Progressive soil depletion combined with a lack of access to fertilizers contributes to decreased crop yields: *‘At best, we harvest 2 or 3 bags of sorghum a year’* exclaim peasant women from Benoye. They also mention a decrease in and poor distribution of rains: *‘Everything depends on the rain,’* they explain, *‘and we never know when it is going to arrive.’* Sometimes they suffer crop loss due to flooding caused by heavy rains. Crop pests are also destructive: in Toul, this means mud wasps and face flies, for which there are no appropriate phytosanitary products. Many households plant up small tracts of land with rudimentary tools which yield little: *‘Most of us only use a hoe to plan,’* says a woman farmer in Laokassy. The few who have access to oxen are confronted with a variety of problems: *‘You have no cart, and you must wait until the owners are finished their work before you are able to begin looking for one; afterwards, because you were late starting, your yield is always inferior,’* explain peasants from Benoye. The lack of technical outreach and support is felt among groundnut growers who need advice choosing suitable seeds with relatively short growth cycles. The lean season coincides with a peak in agricultural labor requirements along with higher market prices that cause food insecurity to surge. *‘In August, food insecurity is at its highest. Production is low, food prices become exorbitant,’* say community leaders in Benoye.

3.66 Demographic pressure and rural transformation intensify conflicts between farmers and pastoralists. The problem is one of the management of shared land use, exacerbated by the absence of clearly delimited livestock corridors. One of the consequences is that fields are often destroyed by

passing herds (yet farmers have no recourse in cases where the livestock often belongs to senior officials). *‘Why must I suffer so in the field when I know that it is the Commandant’s oxen that will come to graze here?’* exclaims one of the region’s peasant women.

3.67 External shocks impact agricultural production. The crumbling of *Coton Tchad’s* activities has been an important cause of declining productivity decreases and growing poverty in Logone Occidental. *Coton Tchad* once provided technical support and inputs - including fertilizers; moreover, the creation of rural roadways in the cotton zone enabled peasants to sell their crops at markets. Now, however, *‘Since Coton Tchad’s activities have decreased, nothing is happening anymore!’* exclaims one of our respondents. Peasants are therefore left alone and therefore very exposed to all of the risks involved in the cultivation of cash crops (cotton, sesame and groundnuts). This in turn increases their vulnerability since they cannot anticipate or react to these shocks or control for the volatility of prices on international markets. In the case of sesame production, for example, sociopolitical troubles associated with the Nigeria crisis and Boko Haram have threatened the current year’s profits, with some crops left to rot in the ground. Farmers all face a hard choice between a focus on food production (for household consumption needs) and commercial production for the market.

3.68 Peasants also face a number of challenges in managing crop harvests. Even when harvests are good, local farmers encounter challenges with household resource management, mostly regarding crop sales before or after harvest. Under extremely disadvantageous conditions, farmers often pre-sell their crops to secure a loan that enables them to get through the lean season (sack of millet: 10,000 CFAF before harvest vs. 22,500 CFAF after harvest). *‘We have peasants who watch while their entire harvest is taken away and return home with empty hands,’* attests one farmer from Toul. This exploitative practice forfeits the livelihoods of entire populations. Human distress is amplified by social ills, particularly alcohol addiction: scarce money is spent on alcohol and a fair portion of cereal harvests serves to brew local beer. According to one of our respondents: *‘Today people consume too much and work too little whereas in the past, it was the opposite.’* This has had a negative impact on production and food security.

3.69 Livelihoods based on herding and fishing also face a number of problems. For livestock raisers, in addition to conflicts with farmers around land use, study respondents highlight problems associated with animal welfare. A number of animal diseases menace the region, such as anthrax and contagious bovine pleuropneumonia that are difficult to control in the absence of adequate veterinary services. According to community leaders in Benoye, *‘The veterinarian comes from Moundou once every six months to vaccinate the animals but in the meantime, if they get sick, they are not attended to and they end up dying.’* Options are limited in the face of such threats. Among fishermen who once earned most of their resources from fishing, activities are currently undergoing important changes due primarily to overfishing, but also to water pollution caused by industrial activities. *‘Catches are increasingly meager; fishing barely feeds the fisherman,’* declares the chief of a fishing community on Lake Wey, after explaining the factors that drove his community to seek other more lucrative activities (see Box 4).

Box 4: Fishermen Reinventing Themselves as Brick-Makers

Fishing activities have met with many problems. There are the issues with water and forestry agents, the high cost of fishing permits (12,500F), the menace of hippopotamuses, rudimentary navigation methods (dugout canoes or pirogues), the high number of competing clandestine fishermen, use of trap nets and small nets, a lack of restrictions governing juvenile fish harvests, and extensive year-round fishing (as opposed to seasonal fishing as in earlier days).

Back in 2002, lake fish started becoming rare. Certain species were disappearing – especially the ‘Gog Nda’ and the ‘Nir’. These are fair-sized fish. To discourage negative fishing practices, protected zones were set up where anyone caught fishing is fined 180,000 CFAF (a local initiative reinforced by the Ministry of Environment). In earlier times, there was a large number of different fish species in Lake Wey, but currently there are only two or three: Toum (type of puffer fish), Pê (carp) and Ngono (Nile perch).

This slow decline has obliged many of us to take up new initiatives elsewhere, because fishing is no longer a viable livelihood. So in 2003-04, many of us took to other trades, like manufacturing kilned brick. I am now president of the Kilned Brick makers Group. Today, the entire village makes kilned brick. We form them and fire them off in a coal-burning kiln. Since this is the preferred building material of Moundou, the whole city now comes to buy brick from us.

3.70 **Apart from the serious food shortages that affect every age group, different life phases also magnify certain vulnerabilities.** Local respondents easily identify the specific risks and challenges of each life phase.

- **Small children and infants** mostly run the risk of malnutrition. The often poor nutritional intake of mothers can translate into poor nutrition for breastfeeding babies; moreover, infant feeding practices are not always optimal. Lack of quality drinking heightens the risk of chronic waterborne diseases. According to Benoye’s cantonal chief, *‘Water has become very rare and expensive. A metric cube fluctuates between 750 CFAF and 1,500 CFAF, and long distances must be travelled to find it.’* Small children are therefore exposed to diarrheal diseases that, in the absence of appropriate health care, quickly affect well-being and nutrition.
- **School-age children** see their education threatened by their parents’ slack of financial means to support them in school; they themselves may be uninterested in school, or too busy in their roles as contributors to the household economy, working in the fields, grazing animals, fishing or making bricks, and doing household chores. The lack of food at school (absence of school meal programs), poor quality instruction, and poor physical infrastructure also drive these children to abandon their studies. According to Benoye community leaders, *‘Permanent schools can be counted on the fingers of one hand; the rest are built of stalks of straw so at the first winds announcing the start of the rainy season, the structures fly away and the children are sent home.... School doesn’t begin until January and ends early May. About 95% of these schools rely on community schoolmasters. The quality of schooling leaves much to be desired, particularly since they have no educational materials or books at their disposal.’*
- **Some youth** abandon school due to alcohol addiction – a widespread problem in the region. Girls are married off young, or marry of their own accord. *‘You wake up one morning and find your daughter gone. After searching about, you are told she has left to live with such and such’*

a boy from a given village,’ explain Benoye community leaders. *‘There are low education rates and high drop-out rates, particularly among girls who are sent to school later because of household chores and are then withdrawn because of an impending marriage or pregnancy,’* says an NGO representative who works with women. According to the regional social action representative, young boys and girls are equally exploited by the wealthy as ‘maids’ or ‘boys’ and are often very poorly remunerated.

- **Women of child-bearing age** are subject to unwanted pregnancies and early marriages. According to the regional social action representative, *‘People from Logone Occidental may strangle the children of unwed mothers who have been abandoned and who would otherwise become an additional charge for their parents.’* Births often take place at home due to a lack of sufficient health care infrastructures.
- **Persons of working age** live in a state of constant stress. Rural producers experience environmental degradation and all of the livelihood constraints described above. Graduates cannot find employment as before with leading business entities (*Coton Tchad*, the breweries, Chad cigarette manufacturers, *Cyclo Tchad*) as these have all closed down. To survive, they turn to other small income-generating activities, or they leave the area.
- **The elderly**, particularly those who have worked in the informal sector or the rural economy, have no pensions and therefore depend solely on their families for economic and social support. *‘The elderly are not able to work the land, so their destiny lies in the hands of God. They have no food, no housing and access to health care is practically nonexistent,’* say Benoye community members. In Toul, according to our respondents, some elderly are totally isolated.

3.71 **At every age level, insufficient basic social services accentuate vulnerabilities.** Key stakeholders and regional officials are categorical on this point. According to the regional social action representative, *‘Basic service coverage is extremely limited and of mediocre quality. In addition, there are no specialized centers that are capable of admitting groups or individuals from the most vulnerable categories, like street children, orphans, the disabled or the elderly.’* According to the regional education official, *‘The education sector is Chad’s poorest parent, particularly in Logone Occidental.’* In his opinion, although schools seem to be performing well in big urban centers, the situation is *‘Catastrophic in villages where the teacher is none other than the traditional chief’s educated offspring and classrooms are under the trees. In rural areas, school starts after the harvest and ends with the first rain, because schools are built of straw’.* Says the regional health official, there is limited quality health care and qualified staff is lacking. *‘The rural world is faced with a problem of access – 25 km must be travelled to reach a health center, after a walk that exceeds two hours. Out of ignorance and especially in rural areas, the population has no information regarding State services. Illiterate, people self-medicate, consult ‘tchoukou/djim’ (bush) doctors or resort to using plant roots.’*

3.72 **Women suffer keenly from specific gender-based vulnerabilities.** In addition to the problems associated with childbearing, early marriage and early pregnancy outlined above, *‘Women from rural areas are very vulnerable – they work more than men but do not participate in decision-making, especially regarding crop management,’* states one NGO representative who works with women. *‘A woman can work in the fields throughout the rainy season but her husband can very well decide to take the entire crop, sell it and spend the revenue as he wishes (often on alcohol). Women are*

therefore very dependent on their husbands.’ Added to that, she continues, is the lack of independent access to the means of production. *‘In a household, after the father dies the sons inherit all his land. The woman is crushed under the weight of tradition.’* According to the regional social action representative, women are exploited by their husbands and are malnourished; they are also exposed to sexually transmitted diseases owing to the frequency of multiple partners or polygamy among most men.

- In Laokassy, most women (aged 30–40) who sat in on our discussions had never attended school. Their main activities consist of domestic and fieldwork. They say, *‘We have become enslaved to our husbands: we have no voice in decision-making, nor any control over what we own. We are used for fieldwork yet the entire crop sits in our husbands’ hands. They alone determine whether to sell or not...and they alone reap the fruit of our hard work.’*
- In Toul, women also say there is no health center nearby and it is difficult for them to get to the hospital when ill, or to give birth.
- In Benoye, our women respondents say they are burdened with the weight of fieldwork and have no means to practice any other income-generating activity. Unmarried, they depend totally on their parents; married, they depend on their husbands. They are thus never in a position to control their own assets. Despite their vulnerability, however, women continue their struggle for livelihoods, by practicing an income-generating activity (Toul), pig farming (Laokassy), or agriculture (Benoye).

5. Informal Social Protection

3.73 In Africa’s rural and urban areas, various types of informal social protection continue to play a leading role in the lives of the poor. In the absence or inadequacy of formal social protection provided by the State, the majority of rural populations as well those involved in the informal sector in urban areas continue to rely on different forms of solidarity mechanisms within their extended families, among neighbors and friends, or in the community at large in order to make their lives more secure, to help address different types of risk and to ease the impacts of various shocks.

3.74 At the same time, various studies show that such systems, which at times are rooted in traditional practices, are often put to the test when confronted with sociocultural transformations that erode communal values and solidarity mechanisms and economic trends towards commercialization that generate new dynamics of poverty and vulnerability. Moreover, while quite effective in cases of idiosyncratic shock (i.e.: the death of a family member or other personal loss), informal social protection can be quite limited in situations where a covariant shock (i.e.: drought) triggers a crisis within an entire community.

3.75 In Chad, where the formal social protection system is weak, several types of informal mechanisms play the role of veritable safety nets for many of its citizens. These mechanisms are rooted in solidarities based on family ties, ethnic or religious affiliation, friendships and shared neighborhoods. Such mechanisms help individuals cope with assorted shocks (death of a family member, illness, loss property or employment); mark life’s key moments (birth, baptism, circumcision, marriage, bereavement); and support more vulnerable members (the elderly, the disabled, children of

destitute households, widows). There are also risk-sharing mechanisms that tend to pool money, goods and assets in order to provide particular advantages and profitable outcomes for those involved.

3.76 Tontines – a widespread type of rotating savings and credit association, found mostly in urban areas. Tontines are made up of individuals who, joined in friendship or by family, professional, clan or regional ties, meet at varying intervals to pool their savings for the purpose of individual or group problem-solving. Tontines are found in a number of countries around the world, and are particularly common in Africa and Asia. Playing both an economic and a social role, they allow members to strengthen their social capital while moving forward with personal financial projects. Box 5 illustrates how a tontine operates in the city of N'Djamena.

Box 5: Case Study of a Tontine in N'Djamena: 'Dianmadjih'

Dianmadjih (lit.: 'virtuous' or 'precious woman') is a tontine with 48 women members. It aims, among other things, to improve the socioeconomic living conditions of its members by creating income-generating activities, while offering solidarity to its membership. A heterogeneous group, most women in this tontine belong to southern sociocultural groups and work as public civil servants; one subgroup is made up of petty traders. Most women are married, with many children and other household dependents; some are also heads of household.

Membership fees are 5,000 CFAF, with 500 CFAF towards food at monthly meetings at each other's homes, where the host prepares a meal for all. The group also has a monthly petty cash contribution of 1,000 CFAF. The amount each member pays into the tontine is relative to their means, with one share equal to 10,000 CFAF. Every woman invests as many shares as possible and in turn, she is entitled to the sum of her contributions. The price per share for a 'general tontine' is 10,000 CFAF and for a more basic 'mat tontine' 5,000 CFAF, while an 'entrepreneurs' tontine has a 50,000 CFAF price per share. Tontine assets and administration are managed by individuals who function as the secretariat and treasury.

Tontine members are entitled to credit not exceeding 100,000 CFAF; the loan is reimbursable within 4 months at a 10% interest rate. The system is considered far more practical and efficient than what is offered at banks where loans are restrictive and expensive, require a mortgage as collateral, have too many forms to be filled out and higher interest rates.

Thanks to the tontine, the women have managed to complete a number of personal projects: acquisition of land and real estate; purchase of building materials; support for their children's education – including studies abroad; purchase of valuables (jewelry); out-of-pocket health care expenses; coverage of funeral costs; and the meeting of daily household expenses when a husband is unemployed.

Tontine members also create hand-made products like local soap, peanut-based cakes and food products or body care oils which are sold both among members and at local markets. In earlier days, they also stocked grains to be sold off during hunger gap periods. Thanks to a UNDP project, they received training in women's rights and pastry preparation.

Economically, tontines favor savings and capital growth. But belonging to a tontine also reinforces friendships among women and fosters social solidarity beyond the immediate family around social events (such as deaths, weddings). Tontines are said to reinforce a woman's status vis-a-vis her own husband, inasmuch as she is generating an income (some husbands, on the other hand, are said to become 'jealous' of the money their wife accumulates). There are mixed tontines of men and women, but women say they generally prefer staying together: *'When there are men present, they tend to handle everything and take all the money – for example, to acquire a second wife!'* said one tontine member.

Thanks to tontines, many women have gained a degree of independence. Problems are rare within the group, they say – sometimes members arrive late to meetings, and there have been a few rare cases of unjustified absenteeism which in the long run, can become a hindrance to the group's future development. But otherwise, tontines function well as a form of both social solidarity and savings and loans for women.

3.77 Zakat (legal alms-giving) is one of the five pillars of Islam; it represents a transfer to the poor and the destitute, either monetary or in-kind. *Zakât ul-Fitr* is paid at the feast (*Eid El-Fitr*) marking the end of the month of fasting, Ramadan, and consists of a meal or meat offered to a needy person. *Zakât El-Mâl* is a mandatory annual form of alms based on a Muslim's possessions and inheritance (*Fleurs d'Islam*, nd). In Chad, while *Zakat* is not standardized, it often involves distributing

meat to the poor during the month of Ramadan or during another Muslim feast; paired with the notion of *sadaqua* (voluntarily contribution), it is well rooted in the mentalities and behavior of the Muslim community (see Box 6 for examples from the Sahel region). However, according to the High Council on Islamic Affairs (CSAI), in N'Djamena, the principle of *Zakat* (mandatory) is not always observed and therefore has difficulty in reaching its primary objectives, which are to combat poverty, vulnerability, and social inequality. Additional CSAI interventions are directed towards basic social services (education and health) and social infrastructure development (water towers, goods), often with the support of funding from the Gulf countries. They also work with *mouhadjirines* children (attending *talibé* schools) - opening new learning centers that provide food and lodging in some parts of the country.

Box 6: The Practice of Zakat in the Bahr el Ghazal Region

According to the HEA profile of Mandjoura, a predominantly Muslim agro-pastoral zone in the region of Bahr el Gazal, very poor and “poor” households very often receive food baskets (private assistance from parents and friends, alms, *Zakat*), particularly during the lean season. However, this assistance represents less than 1% of the needs of these households, thereby clearly illustrating its limits as a local social safety net (OXFAM 2012).

The testimonials of some of our Bahr el Gazal respondents seem to corroborate this analysis. Among a group of ten Iyalnass men in Kagai (from poor and very poor categories), only two say they have never received *Zakat*; others indicate having received just a few distributions during the period of Ramadan or Tabaski, but not on a more regular basis.

Zakat seems to be more widely practiced among Gorane Daza groups in the village of Turki'i, in Mandjoura, who say: ‘For every five camels, we offer a goat to either one person or shared between two.’ *Zakat* allows those who are destitute to receive a few goats, and to eventually form a small herd.

3.78 **The Protestant and Catholic Churches each provide social assistance to the poor and the vulnerable.** Actions are based on principles of Christian charity and are made possible due to fundraising activities within their respective communities of followers. Among other things, churches distribute food, clothing, and soap; provide timely support on the occasion of births and deaths; and effect home visits during times of illness (see Box 7).

- **Within the Protestant Church:** According to officials from Moundou’s evangelical churches in Logone Occidental, there is a ministry within their denominations called “Ministry for the Poor and Social Action” (*Ministère des pauvres et actions sociales*) which draws up a list of needy parishioners such as widows and distributes in-kind or cash donations every trimester. The Christian Assemblies (Assemblées Chrétiennes) have a ministry called “Ministry of Social Assistance” (*Ministère de l’assistance sociale*) that cares for the destitute, widows, widowers and orphans; provides assistance to the sick; and contributes towards baptism, wedding and funeral ceremonies of its parishioners. The Christian Assemblies also stock cereal to distribute to members during lean seasons. Both denominations rely on donations (in-kind or cash) raised by collecting monies (1/10 of income) among parishioners. Because this is not possible for many, however, the Church often finds it difficult to properly carry out its role.
- **Within the Catholic Church:** According to the official in charge of social work at the Sacred Heart Parish (Paroisse Sacré Cœur) of Moundou, there are various forms of Catholic charity. Parishioners sometimes opt for individual actions to aid the poor, but there are also drives organized by movements within the Church that collect supplies (food, soap, etc.) and distribute

these to the needy (in hospitals, for example, or prisons). Another movement, called “Caritas Solidarité”, acquires its resources through alms collected among the faithful, using the money to purchase cereals when prices are affordable. Stocks are later distributed among the needy during lean seasons, with a portion sold and the money returned to the till to be reinvested in more stock reserves. Sunday alms mostly go towards parish administration costs, but less than 5% of the faithful manage to make an offering usually during the Lenten season. Occasional fundraising events are also held to assist others who have been struck by disasters, such as fires or floods; and special offerings are collected for catechists and seminarians. Church officials also submit various projects for external funding.

Box 7: Examples of the Breadth and Limitations of Christian Charity Work

A number of individual testimonials from Logone Occidental and N’Djamena outline both the importance and limitations of Church-sponsored assistance:

- ‘The Church attends to those in distress (particularly the elderly). Apart from that, we have never received any other form of assistance.’ (Women’s group, Benoye)
- ‘In the name of Christian charity, and thanks to tithes (1/10 of harvest), churches can attend to the destitute when needed. This reinforces social ties and is ever more important today, but as crop yields have decreased, the churches [which rely on tithes] have trouble meeting all the needs of the poor. We pray for a renewal of supplies in our churches.’ (Officials, Benoye)
- ‘People mostly depend on their families, but churches nevertheless hand out supplies to the vulnerable during the lean season. This is made possible thanks to tithes collected from church parishioners. The aid that is delivered is good, but coverage is not complete; it all hinges on crop yields.’ (Mixed group, Toul)
- ‘In 2010, after the rainy season’s floods destroyed our house, my mother received financial support from the Catholic Church that allowed us to build a new one.’ (Unwed mother, N’Djamena).

3.79 **A number of specific forms of social solidarity and economic assistance mechanisms exist in the rural areas of Chad.** These include community meals, loans of animals among pastoralists; collective work efforts; and various types of producers’ groups and associations.

- **The community meal** (commonly known as ‘*dabalaye*’) is widespread across Chad, particularly in the Sahelian regions. It serves as an occasion to gather together for a common meal organized by households that have the means to do so. It also allows the more vulnerable to partake in the meal, thus reinforcing their sense of belonging and overall social cohesion. In Bahr el Ghazal, we are told, ‘*When you have something to eat and your neighbor has nothing, you call him over to share yours*’.
- **The loan or exchange of animals** is a very common practice among pastoralists. A gesture that expresses and reinforces solidarity and bolsters social contacts, it is a sign of alliance, marks gratitude for services rendered, and serves as a wedding dowry or inheritance (Dia and Duponnois, 2012). The loan of an animal (namely lactating females) to needy families is called ‘*lana*’ among the Goranes of Bahr el Ghazal. It allows those who have substantial herds to come to the aid of the vulnerable, by entrusting to them a cow or a female camel so the poorer household can benefit from its milk (Belemvire and Ziba 2015). Among the region’s Gorane Daza, the loan of an animal or money following the sale of livestock is a common custom: ‘*When you sell your animal, often someone asks you for a small loan; you grant it to them and they pay you back later.*’ Among the Peul, the tradition of the ‘*habbanae*’ cow (lit. ‘granted to someone as a favor’) consists of the loan of a female animal to a needy member of one’s

- extended household or of the wider clan. For the duration of the loan (several years), the borrower not only benefits from the loaned animal's dairy production, but he/she also retains ownership of its first two or three calves before it is returned to its initial owner.
- ***An invitation to join a collective work project*** addressed by an individual to other villagers, parents and friends, is commonly known by the term *nafiir* in Arabic (*juwaada* or *sargaya* in other local languages). *Nafiir* is a form of mutual assistance among members of a socioeconomic group; it essentially consists of assembling a common workforce for the planting of each other's parcels of land. The system exists in most Sahelian agro-pastoral groups (among the Peul for instance, it is called a *surga*, lit. "the smoke" or *gayya*, word of Hawsa origin). *Nafiirs* require mediation by the head of the village youth (called *sheykh* or *ruwaa as-subiyaan*): he coordinates the different invitations, decides on appropriate days for work, and mobilizes the young people of the village. A *nafiir* usually lasts only one day, and the owner of the field can easily finish the remaining work on his own, no matter the size of his field. He is obliged (*wajib*) to kill a sheep and prepare food and tea for his workers (*annaas an-nafiir*), before and after the fieldwork. Often musicians or griots join the *nafiir* with their drums, adding rhythm and an air of celebration to the work at hand (Bonfiglioli 1993).
 - ***Community-based groups and associations*** are semi-formal types of mutual aid organizations that are found in both urban and rural areas. The aim is to facilitate, promote and mutualize production or income-generating activities, as well as to create pooled community resources to help members in difficulty. In the Sahelian zone, we encountered examples of fee-based village associations that also provide assistance to the needy, as well as an increasing number of women's groups that focus on income-generating activities (women gardeners, merchants, tanners). In the South, peasant groups and farmers' associations contribute to the structure of rural life. According to the mayor of Moundou: '*Solidarity can often be felt within associations, as well as in ethnic or religious groups.*' A community mechanism also exists to aid those who are undergoing a crisis, with donations collected in cash or in-kind and remitted to the village chief for redistribution among the needy.

3.80 **Other forms of reciprocal assistance are quite well structured around ethnic- or gender-based solidarity, neighborhood affinities or friendship.** *Oudour* is one of the most popular social practices among Chadian women. It is a form of invitation that occurs during family celebrations (weddings, circumcisions, baptisms, funerals) at which participation – both physical and financial – is mandatory. During the invitation phase organized around these celebrations, the women offer reciprocal aid to each other through donations (generally cash but sometimes in-kind); values are adjusted according to what each one has received from the other. Another form of invitation – the *azouma* – may be organized in other circumstances and involves an invitation to an evening or a dinner to which guests must contribute; among N'Djamena's Kanembou community, it serves to welcome and offer support to a new migrant who has arrived to try his luck in the city. The '*pari-vente*' is another form of resource-pooling that takes place among one's entourage (friends, neighbors, colleagues), and is mostly practiced by women from the south; it consists of organizing an evening where proceeds from the sale of drinks are remitted to the organizer, who thereafter can then complete a project that otherwise would have been beyond her means.

3.81 In Chad, as in most African countries, it is the extended family that serves as the principal support structure and purveyor of social safety nets. Communal spirit kindles solidarity among the members of an extended family, creating strong bonds of mutual responsibility, reciprocity (direct and indirect) and support in both urban and rural areas. The family intercedes frequently to support its members on special occasions such as weddings, baptisms or funerals; it also provides timely aid during periods of illness or job loss. It absorbs members who need a place to stay; helps with the school fees of a deceased brother's or sister's children; takes on the charges for an elderly or disabled parent, a sick aunt or an uncle who needs hospital care. Sometimes, it is simply a cousin, niece or nephew whose parents do not have the means to pay for their keep or their studies. When an extended family extends beyond the geographic boundaries of a given location, it also represents a transfer of funds back to a person's native village. Typically, the weight of dependents (beyond one's own children or members of the nuclear household) is quite heavy for people with steady incomes. According to some respondents, while reinforcing social solidarity, this practice also contributes to the increased dependency of widespread family members on those who earn a salary, or have another steady source of income (Box 8).

Box 8: The Power and Weight of the Extended Family in Chad: Some Examples

Urban Setting

As the eldest in my family, I have many responsibilities. At home we have orphans from both sides – my own and my husband's. If we give nothing to extended family members when they are in need, they will say we are 'mean'. I also send money back to Sarh [capital of Moyen Chari] when needed, and pay for the schooling of one of my relatives. To increase my income, I've joined a tontine and I have a housing concession that I rent out; other than that I have my salary. (Public civil servant, N'Djamena, originally from Moyen Chari)

Rural Setting

'No matter what your situation is, your extended family comes to your help in Bahr el Ghazal.' (Government representatives, BeG)

'We stand together socially in the face of vulnerabilities or shocks suffered by one of our members. We turn towards our extended families and help each other through assistance in-kind or in goods (food supplies), with no expectation of returns.' (Men, Laokassy, Logone Occidental)

3.82 **In reality, all these mechanisms are currently facing significant limitations.** They are subject to the extensive socioeconomic changes affecting Chad's different communities; moreover, most these mechanisms function in the near total absence of a formal government social protection system. As a consequence, they are - in a certain sense - victims of their own success and the high expectations they have created (see Box 9).

Box 9: Limitations of Informal Social Protection

Urban Area: N'Djamena

'The extended family offers needed assistance but it has become very vulnerable too, so there are now limits to what it is able to do.' (Key actor, N'Djamena)

'As a rule, in Chad the rich are not inclined to help the poor, especially in the city of Ndjamen. They would rather add a few additional floors to their villas than provide assistance to the poorer segments of the population.' (Key responder, N'Djamena)

'Community mechanisms that help the poor or vulnerable exist...But aid is of an occasional nature. The destitute cannot count on it.' (Elderly women, N'Djamena)

'The eldest, who is in charge of his little brothers, soon also becomes impoverished. (Key informant, N'Djamena)

Rural Sahel: Bahr el Ghazal

'Informal social protection initiatives exist but on a very small scale, so their role is only marginal. (OXFAM program officer, Moussoro)

'People were united in solidarity before, but now solidarity only exists among those who have left the region; in the villages, everyone just manages on their own as best they can because there are so few resources available.' (Notables, Moussoro)

'With the loss of livestock due to the droughts, Zakat and the loan of animals have become less and less common as mechanisms to help the most vulnerable in our communities.' (Gorane Daza men, Turki'i)

Rural South: Logone Occidental

'Mutual aid is an ancestral community custom. But things have changed lately. Mutual help is vanishing because of poverty. It is receding because people do not have enough to eat. There is no surplus left to help one's neighbor.' (BELACD representative, Charitable Actions and Development Liaison Office, Moundou)

'Traditional social protection mechanisms were once very strong but they are now disappearing because of alcohol, money, a loss of the sense of obligations and the dissolution of chiefdoms caused by politics.' (UNAD representative, N'Djamena)

'Individualism is growing more and more widespread. Before, when someone wanted to get some fieldwork done, he called on his neighbors, bought a sack of salt and when the work was finished, he shared it with everyone. But this doesn't occur anymore... the social dynamic is frittering away.' (NGO representative, Moundou)

'Even associative movements – particularly those fostered by NGOs that defend community interests – are disappearing from the region. In 1995, there were 20 or so of them. Today there are but 2 or 3.' (Engineer Agronomist, Moundou)

'The level of mutual aid within communities is quite insignificant. People are poor. The little help there is occurs during ceremonies (funerals) or in illness, among immediate families and in-laws.' (World Vision representative, Moundou)

'Your brother is destitute, and has nothing to eat. How can he help you? Everyone is busy looking for charcoal to fuel their stoves and have something to eat. Mutual aid only exists on specific occasions, during family ceremonies and funerals.' (Fishing Community Chief, Moundou)

6. *Lessons Learned from Aid Projects and Social Assistance Structures*

3.83 **In Chad, a diversity of projects and support structures exist to assist vulnerable groups and individuals.**¹⁸ This section details findings from fieldwork on the experiences and perceptions (of beneficiaries, non-beneficiaries, and officials) of selected support structures and aid programs. In N’Djamena, the study focused on the services offered in government social centers; cash transfers provided to widows and orphans at an Islamic center; and three different types of support for women’s groups – two promoting income-generating activities, and a third aimed at addressing the needs of women with disabilities. In Bahr el Ghazal, in the Sahelian zone, the analysis focused on an NGO – implemented cash transfer project accompanied by support to women’s groups. In Logone Occidental, in the South, the study included a community development project conducted by a Catholic Church agency; an in-kind transfer project led by an NGO; and a microfinance development project.

Urban Area - N’Djamena

3.84 **The study conducted in the capital’s urban neighborhoods clearly demonstrates the limited formal (State-provided) social assistance to vulnerable groups.** Social centers are long-established government agencies managed by the Social Action Department of the Ministry for Social Action and National Solidarity. Mandated to provide different forms of social protection, they seem to have lost a sense of direction and efficiency, serving primarily as a meeting place that offers a few socio-educational and health-related activities (see Box 10). Although they have trained social assistants on their staff, activities have been limited by institutional instability, overlapping mandates, and most importantly, a lack of funding. The centers, as a result, do not meet the needs of the target group, the vulnerable.

Box 10: What Benefits Are Brought to Those Who Gather at Social Centers?

A group of destitute women is learning to sew, embroider and knit. They provide their own material (cloth, thread) and work on the center’s sewing machines; later they sell their products. A baby blanket earns a profit of 250 CFAF for three days of work; knitted baby wear earns a profit of 1,000 CFAF for 2 weeks of work; and an embroidered mat a profit of 1,500 CFAF for a week’s work. Cloth dyeing was not profitable, so it was discontinued.

They say the program would be better if the social center could provide the sewing sundries, but they also want more training: *‘I am old, says a woman. ‘I am uneducated. I don’t know how to take measurements when I sew, so I have to call someone from the center to help me. I would like to be able to do it myself.’* Explains another: *‘I want to go back and finish my studies. I was forced to abandon my education when I got married.’*

3.85 **Social centers have six different services, with one focusing specifically on social action and community development.** Social action adopts a categorical approach to identify target populations. Table 9 defines the priority categories and their specific needs, obtained from a participatory exercise conducted with selected ministry and social center representatives.

¹⁸ For a global review of Chad’s social safety nets, see Chapter 2.

Table 9 - *Categories and Priority Needs among Vulnerable Groups*

Categories	Priority Needs
People with disabilities	Food; housing (many do not have decent dwellings); mobility (tricycles); health care (no planned mechanisms to alleviate health care costs among the needy), and for youth, education/literacy.
Older persons	Food (most people live alone and beg in the streets); housing (they live in precarious shacks in concessions, or by the roadside)
The ‘destitute’ (working age group)	Income-generating activities, women’s groups/associations; microfinance; medical fees and exemptions
Widows/Orphans	Income-generating activities for widows; care and support for orphans (particularly assistance in meeting schooling costs); mediation services with husbands’ families; legal assistance

3.86 **Some of the social centers’ have staff who trained in social work at the National School for Health and Social Work (*Ecole Nationale des Agents Sanitaires et Sociales, ENASS*).** For the moment however, their actions are very limited and in their own words, ‘ad hoc.’ Box 11 highlights their frustration and underlines the real anxieties of social workers who are trained to help the most vulnerable but do not have the means to do so.

Box 11 - Social Centers: Poles of Hope or Despair?

According to one social center official who has worked in the field for 23 years, ‘a social worker is someone who is called to come in aid of the population, to educate, train, reconcile and intervene just about everywhere: in hospitals, school, households, and courts of law , the scope of action is very broad... It is a line of work I embraced by vocation. In earlier days [1980s post-drought years], there were many activities in connection with World Food Program interventions in food distribution. We were always inundated with work, and I gave of myself to serve. We distributed food to vulnerable people.

Now that there are no more food supplies, our interventions have become more difficult; our staff is even becoming resistant [to performing outreach] because of sensitivities that arise when they are confronted with problems for which they have no solutions. Advice alone is not sufficient. A social worker who has nothing to give – can you imagine? A widow and her children arrive; an unwed mother kicked out by the father of her unborn child; a refugee who has returned without his family; a destitute man with a medical prescription he cannot afford ...It’s heartbreaking...In the past there were interventions, but now there is nothing. Today instead of going to the social center, the destitute prefer figuring things out on their own.

If there is a social protection program, I would hope it has a budget. We have basic structures but they are operating without a budget – we don’t even have a means of transportation.

3.87 **In a small program organized under the auspices of the Islamic Council, a cash transfer is provided to widows to support the education of orphans.** Operated by the Seif Center, with financing from the Red Crescent Society of the United Arab Emirates (UAE) and an independent donor, the transfer ranges from US\$25 to US\$36 per month per orphan and is paid out three times a year. Transfers are conditional on regular school attendance, which is verified through periodic reports. Boys who stay in school receive assistance until the age of 18 and girls until the age of 20 or marriage. Currently 1,300 orphans receive assistance through this system, and 1,700 mentoring applications are

on a wait list. For Seif Center officials, the biggest challenge is that demand far surpasses the available offer.

3.88 **In the view of the beneficiaries, the system is working well; payments are made regularly; and the money received allows them to buy essential goods and items for their children and even to save towards a future land purchase.** *The Seif Center program has helped support us and allowed my children to be children,* affirms a widowed beneficiary. The program's largely positive impacts are clear (see Table 10).

Table 10 - *Impact of Cash Transfers on Orphans, According to Widowed Beneficiaries*

Changes	Before Program	After Program	Effects
Individual Level	Numerous economic problems Debts Housing problems Inability to pay for children's schooling	Decreased problems. Debt reduction. <i>We are solvent.</i> <i>We feel good.</i>	Very positive effect and good experience. <i>Our widowhood has changed into opportunity.</i>
Household Level	Some assistance from relatives, but for the majority, no aid. <i>Life is filled with hardship.</i>	Decreased problems within household. Provision surplus. <i>We are happy.</i> <i>We now manage to sleep well.</i>	Very positive effect on all family members.
Community Level	<i>The community sees us as a burden.</i>	<i>The community is relieved of our problems.</i> <i>We are well perceived by the community.</i>	Largely positive effects, even if on occasion some are jealous.

3.89 **The waiting list is long for a couple of reasons: demand far surpasses the offer and government-issued documents are required for the application.** Some have been waiting years; others cannot complete the application because it is sometimes difficult gathering all the documents together. According to one woman: *The hardest part was the birth certificate. Before you were simply handed the document, but now you have to wait months, even years. That's because you are poor; the rich have no trouble getting what they want. I think I'll be a beneficiary by the end of the year*. While they wait, the women try to make do on their own, making ends meet mostly through petty trade. Their children go to public schools because it is cheaper. According to these widows, life would be different if they were beneficiaries at the social center; they would not worry every day about how to feed their children or keep them in school.

3.90 **Income-generating activities are highly sought after by women's groups and associations in the N'Djamena.** The Women's Associations Liaison Unit (CELIAF) is a national NGO in charge of women's awareness and training and offers support to several of the associations. Although CELIAF plays a vital role, financial and technical assistance are a constant problem for the individual groups. External partners support the vulnerable women on an ad hoc basis.

3.91 **Created in 2013, the Women’s Association of Fish Retailers now numbers 280 women.** These women are the beneficiaries of a project supported by OXFAM and CELIAF that aims to improve sanitary conditions in the market where they sell fish. OXFAM provided hangars and pay latrines (to generate a cash flow), as well as a borehole. The women received training in rights and obligations, management, entrepreneurship, and literacy. According to the women, beyond the program’s material benefits, OXFAM’s support helped them ‘open their eyes’ about their rights, even if the future holds challenges (see Table 11). The association’s president would like greater government support, noting with humor: *‘In Chad, the boss likes fish, but he does not support women fish retailers!’*

Table 11 - *Impact of Support Project on Women Fish Retailers, According to Its Beneficiaries*

Before Program	After Program
No working agreement between the women, each worked for herself, without partners.	They get along well, meet regularly, and exchange ideas often; they receive support from CELIAF and OXFAM.
Unhealthy site conditions by extrapolation, the women were considered dirty as well, and as a result, sales were hindered.	They succeed in attracting clients; trust has been regained.
Suppliers decided on prices and made the women pay in advance (up front, before day’s end).	They discuss prices with suppliers and pay them at the end of the day.
Working day to day with no opportunity to set money aside; trouble making ends meet.	With the money earned from the pay latrines, they have created a cash flow and hope their venture will turn into a tontine. They limit certain expenses (social occasions) to put a little money aside and invest: <i>‘We make sacrifices to move ahead.’</i> They earn more and their households also benefit, especially their children.
Their households were often because of unsanitary living conditions.	Hygiene and sanitation training has helped them prevent diseases and brought about educational and behavioral changes.
The women were scorned because they were illiterate.	The women appreciate the literacy classes.

3.92 **The Women’s Hand-Weaving Cooperative has 70 members who practice traditional weaving, embroidery, sewing, and dyeing activities.** The Cooperative was created through a joint International Labor Organization/UNDP/Government initiative that ran from 1990 to 1993, involving construction of a workshop with weaving looms, organization of training sessions, and provision of basic materials. At closure, however, the project left over one million CFAF in unpaid electricity fees, forcing the Coop into bankruptcy. Activities later resumed, albeit to a lesser degree; the Coop, which is affiliated with CELIAF, is now based on member fees and product sales. As such, it currently faced with a number of constraints. According to the head of the cooperative, there is *‘no money to buy raw materials, the building has decayed, the machines are old’*. The women nevertheless continue working according to their means, and their earnings are vital to them (see Box 12). Some say their products sell well, earning from 60,000 to 150,000 CFAF per month, with a client base particularly strong among expatriates (French army base, U.S. embassy). Others note that a few products have trouble selling but say, *‘It’s better than staying inactive. The money we earn weaving helps buy soap, creams and clothing.’*

Box 12 - A Coop Member Takes Charge of Her Family's Needs

This 21 year-old woman lives with her husband and children in a rented house. She dropped out of Grade 12/Secondary 5 after her father's death in 2006, because her mother could no longer afford to pay for her studies. Her husband also abandoned his studies, taking on odd jobs to care for his young family; but at the moment, he is without work and they have two young children.

Thanks to her weaving, this woman manages to cope with her family's needs. After starting a small business that did not work out, she discovered the Coop. She received training as a weaver, a trade normally reserved for the younger members because of the strength it demands.

Her work brings in from 500 CFAF to 1,000 CFAF per day and varies from day to day. Now, her whole family depends on her, and she is doing her best to keep everyone fed. Her parents have asked her to resume her studies, but because her husband is out of work, she must weave, she says, or her children will die.

3.93 **Various associations offer frameworks of support for the disabled.** These include:

- **Network of Associations for Women with Disabilities.** Created in 2006 by a woman who felt marginalized by the Mutual Aid Society for People with Physical Disabilities in Chad, the Network has 560 members, including 150 in N'Djamena (70 with motor disabilities, 50 who are hearing impaired, 30 who are visually impaired or blind). In the past, the Network received support to help build capacity. Their current action plan aims to make women with disabilities more autonomous but new financial partners are needed to support its implementation.
- **Chadian National Association for the Visually Impaired** is part of the National Union of Associations for People with Disabilities and has 650 members in N'Djamena. Its objective is to integrate activities supporting people suffering from vision impairments in the fight against poverty by promoting income-generating activities and school fee waivers for their children. Beyond an annual food distribution program, the Government offers no support, and since the close in 2010 of their project with the NGO Bread for the World, the group has been without external support. Its members are required to contribute 250 CFAF per month in membership fees but according to officials, *'Most are too poor to donate – and furthermore, why donate if there are no services being delivered?'*
- **National Association for the Hearing Impaired**, created in 1986, places a priority on education and training for the deaf and hearing impaired, promoting their professional reinsertion into society and the economy. Of its various education facilities, one facility is currently training over 100 students. A number of foundations and international NGOs provide support and the State provides teachers; however, there is no long-term social protection program to support the Association's poorer groups.

3.94 **The members of these associations receive training as well as moral support to help overcome social isolation and rejection.** State support remains minimal and services adapted to the needs of people with disabilities are generally not available.

Rural Sahel - Bahr el Ghazal

3.95 **Research in Bahr el Ghazal focused on an OXFAM safety net project.** The project aimed overall to reinforce food and nutrition security, and help households avoid the use of negative coping strategies like decapitalization or indebtedness that deepen vulnerability. Female beneficiaries also participated in an awareness program on good food practices and nutrition. As part of its resilience

program, in some areas OXFAM also offered support to income-generating activities among women's gardening groups (OXFAM 2014a, 2015).

3.96 The project consisted of cash transfers or, depending on market conditions, food coupons distributed to targeted households. The aim was to cover survival and livelihood production deficits of targeted households in two intervention zones during the lean season (June-September 2014), using HEA methodology to identify beneficiaries. There were 14,503 such households in Moussouro (each receiving 12,000 CFAF per month, in two monthly payments, for a total of 24,000 CFAF/household) and 1,669 households in Mandjoura (10,000 cash and 30,000 CFAF in food supplies/month, in four monthly increments, for a total of 160,000 CFAF per household).

3.97 An external assessment of OXFAM's cash transfer programs in three regions of Chad raised a number of questions pertaining to the Barh el Ghazal project.¹⁹ Key points from this assessment reinforce and complement the fieldwork study results (see Box 13).

¹⁹ Belmevire and Ziba (2015).

Box 13: Key Results from the External Assessment of OXFAM's Programs**Project Model & Targeting Process**

Choice of cash transfers as a social safety net. Money is widely accepted by vulnerable beneficiaries as the appropriate form of assistance; others prefer when it is paired with a food distribution. There is some concern that repeated distributions over several years in the same villages will generate a 'handout' mentality.

Targeting process. At the community level, there is a positive view towards categorizing households by wealth levels, although certain misgivings persist about (i) the exclusion from project benefits of 'middle-income households' as well as the 'wealthier households' who are the villagers' primary pillars of support; (ii) the exclusion of a number of poor and very poor households due to project quotas being lower than those identified by the community; and (iii) the problems associated with polygamous households that are counted as one entity, and must therefore handle internal issues regarding the redistribution of benefits.

Impacts of the Different Activities

Emergency activities to meet survival deficits. Generally speaking (except when the aid arrives late), the communities say transfers have provided significant help and relief during the hunger gap period; they could cover their basic food needs and were not obligated to decapitalize (sell off livestock). But the emergency aid did not allow households to diversify their livelihood activities, and the transfers therefore either did not allow, or only rarely allowed, them to move into a higher wealth category. As poor production seasons recur annually, even households that have benefitted from repeated aid distributions affirm that they are not able to move out of their initial situation of vulnerability.

Complementary awareness-raising activities on good health and nutrition practices. There has been no noticeable impact on women's habits regarding child feeding. Some have acquired knowledge but do not appreciate the importance of it, while others confront problems of finding appropriate ingredients to make the recommended gruel. Other factors, such as lack of follow-up assessments, also limit the impacts of these complementary activities.

Emergency activities combined with activities over the medium term. When these two types of activities were combined, the project allowed beneficiaries to develop better resilience tactics. For instance, the revenues generated for women gardeners from the sale of vegetables in local markets allowed them to purchase supplies and vary their food intake. Thanks to cash or income derived from vegetable production for local marketing, the women have also reinforced their other income-generating activities. But the potential of these positive impacts seems to be hindered by a lack of follow-up (insufficient veterinary care after the distribution of small ruminants; lack of management documents among vegetable producers groups; and too few interventions).

Belmevire and Ziba (2015)

3.98 **Fieldwork confirms that beneficiaries appreciate the aid received.** The transfers serve as a veritable safety net, helping people get through the hard times and ensuring their household's subsistence. Most cash transfer beneficiaries said they were happy with the money; others however, mostly women, would have preferred a food distribution: '*Food does not arouse social jealousy*' they explain, '*and if it were food, we could also share with those who did not receive any.*' Those receiving a combination of food and money/coupons appreciated this combination because markets can be rare in their zone. Most spend the money on food purchases; some also buy children's clothing or use some to pay off debt. As the amount was calculated based on food requirement estimates, very few people say they are in a position to put a portion into income-generating activities. The beneficiaries do not mention household conflict when it comes to expenses. '*Anyway, says one, 'It's the husband who decides everything*' (!) All note the program has had a positive effect on their life, though some point out a weakening community spirit and less mutual help in its wake (see Table 12).

Table 12 - *Effects of Cash Transfers according to Beneficiaries in Kagai (Moussouro)*

Level	Program Effects as Viewed by Men		Program Effects as viewed by Women	
	<i>Before</i>	<i>After</i>	<i>Before</i>	<i>After</i>
Individual	Everyone is scrambling to make ends meet. Life is always hard. Food is hard to find.	Food can be purchased.	No means to do business.	People can start a small business with their savings.
Household	Habitual livelihood problems. Life is hard. Food is hard to find.	Slightly lessened food insecurity Food supply purchases (millet, rice, condiments, sugar, tea).	Barely eating 1 time/day.	The household eats plentifully, 2 times/day; less sickness associated with hunger among children.
Community	Livelihood problems and general troubles.	Slightly improved situation.	Help comes from all parts; community solidarity.	Cannot count on community support.

3.99 **Beneficiaries and non-beneficiaries alike seem to understand and accept the targeting process, with a few exceptions.** Most agree the process, involving village committees presided over by the village chief, is fair and transparent. *‘We are selected because our living conditions are deplorable,’* explain selected women beneficiaries. However, they note, targeting can create jealousy within the community; according to some observations, this is managed by an internal process of ‘redistribution’ of the benefits received within the community. If a poor household is not selected, *‘It’s God’s will’*, explain some beneficiaries, *‘Therefore, they will try their luck again the next time.’* Some non-beneficiaries from middle-income or wealthy households totally agree with the targeting criteria; OXFAM *‘relieves us from providing assistance to the most destitute among us.’*

3.100 **The positive effects on household survival are not matched by similar effects on resilience.** Our fieldwork confirms the results of the external assessment indicating that the emergency-type assistance which is provided does not in fact allow households to truly rise above their vulnerability or offer the potential to reinforce or diversify the livelihood activities that would make them more resilient to cyclical shocks. A few steps in this direction have been made, however, for example through support women’s gardening groups who plant their gardens in the off-season in the low-lying areas of the *waddis*. The produce both enriches the nutrient value of family meals and serves as an important source of income. According to the members of one of the groups visited, OXFAM support includes construction of wells and distribution of equipment and tools such as shovels and pickaxes, as well as pesticides. But several challenges remain (lack of funds for motor pump maintenance and fuel, lack of fencing, difficulties in transporting products to market; limited transformation techniques for unsold products...), therefore demonstrating the importance of adequate long-term support.

3.101 **The recommendations from both the external assessment and fieldwork highlight the importance of strengthening synergies between emergency and development activities.** According to the external assessment, it is important to strengthen contacts and ties with administrative authorities, technical agents, religious leaders, and traditional chiefs; more fully combine emergency assistance with activities aimed at reinforcing resilience; concentrate activities within the same communities and multiply follow-up activities; develop transfers for income-generating activities through cash-for-work programs; and strengthen communication around key messages on good health

and nutrition practices as along with follow-up with women and households. Recommendations of key actors in the region include better field coordination and continuing vigilance to ensure that communities do not become dependent on cash and food distributions, which they believe would just add to the other problems facing sustainable development in the region.

Rural South – Logone Occidental

3.102 Fieldwork carried out in Logone Occidental investigated three different types of projects.

One was a community development project spearheaded the Catholic Church; the second an in-kind transfer led by an international NGO; and the third a microfinance program set up by one of the region's three microfinance operators. The fieldwork shed light on local perceptions and experiences of these different forms of assistance.

3.103 BELACD, a non-profit association of the Catholic Church (Caritas) in Chad, focuses on rural development, with support for productive activities and environmental protection.

From 2011 to 2014, BELACD registered 2,780 direct beneficiaries. The Logone Occidental project provides assistance to a network of 1,500 producers who make and use manure compost; in response to environmental degradation and decreased field productivity, the project has introduced improved seed varieties, various soil conservation techniques and crop management guidelines to enhance food security in rural/peasant communities. According to their 2011-2013 three-year report, such interventions have led to a 15% increase in crop yields, which in turn are better utilized thanks to crop management support, updated agricultural techniques, and better post-harvest and household finance management (BELACD, Caritas, Moundou, 2013).

3.104 Community members appear to appreciate the activities and identify positive impacts.

Officials and dignitaries from Benoye (project site) highlight the reinforcement of the means of livelihood, investments in income-generating activities or income-producing assets, and strengthening of community ties. Beneficiaries, members of a producers' network selected on performance-based criteria and their willingness to *'move forward,'* state that their agricultural yields have significantly increased. On a comparative basis, one says: *'A hectare without manure barely yields a sack but with manure/compost and good rainfalls, it yields five sacks and otherwise up to three sacks. Thanks to increased crop yields, we can now buy draft oxen that are critically important from a labor point of view, as well as for their manure which is used to make compost.'* The positive impacts identified touch upon the reinforcement of the means of livelihood, improvements in household hygiene standards and nutritional intakes, improved living conditions, reinforcement of social ties within the network, and the snowball effect of productive improvements on the local economy (now, for example, they rent out their oxen to others for work on more fields). In their view, the most positive factor is the snowball effect on the local economy. Non-beneficiaries also recognize that better yields result from having participated in the project. Says one: *'My neighbor was a beneficiary and at harvest time, his crop was transported by oxen because it was so abundant, whereas I carried mine on my head.'*

3.105 Community members also see a number of challenges.

Some of the beneficiaries met during the study say they must manage on-going conflict and outbursts of jealousy by non-beneficiaries (even if the latter say they know they were not selected for the project because they were not members of the BELACD network). Beneficiaries point out the need for broader support and technical assistance that alone could allow them to rise above poverty.

3.106 **The Piglet Project led by World Vision International is an in-kind transfer project.** World Vision supports 15 integrated community development programs in five departments in the southern part of the country. They target three principal domains: education and literacy; health and water; and food security (comprising agriculture, the environment, and microenterprise) (WVI, 2011 and 2013). The Piglet Project is one component of an integrated program; it targets 500 households and 3,500 direct beneficiaries in the county of Laokassy. The project distributes piglets to participating households who have orphans or other vulnerable children under their care, with the aim to boost household incomes. The program starts from the rationale that *‘Pig farming is economically profitable if conducted within a prescribed set norms. Pigs are very fast-growing animals with prolific reproduction rates: 5 to 12 piglets per litter, with 2 liters per year. Their gestation period only lasts three months and four weeks’* (WVI, 2014). According to a WVI representative in Moundou, *‘This project has a very promising future; there is a great need for pork in the population’s diet.’*

3.107 **The project has had positive effects, yet coverage remains very low.** With lessons learned from an earlier project that failed due to a lack of technical follow-up, WVI now accompanies the distribution of animals to households with animal husbandry training, support to build shelters, and veterinary check-ups. Of the 120 heads distributed among 20 households in 2013, plus an additional 12 heads in 2014 (for a total of 132 animals), 400 animals were distributed in 2014. An internal assessment indicated that proceeds from the sales of live pigs and butchered pork were used by beneficiary households to cover school registration fees and school supplies for children, field labor for agricultural work and weeding; medical expenses and consumption goods (for the household, hospitality, and ceremonial functions such as festivities, funerals and rituals) (WVI, 2013 and 2014) (see Box 14). Nevertheless, the project reaches just 20 households. According to a project manager beneficiaries were to give some of their livestock to others after the first year, thereby widening coverage; this phase is still under development.

Box 14: - World Vision Piglet Project Testimonials from Women Beneficiaries

Mrs. R. I began raising pigs with the World Vision project. It provided support to build pig pens, supplied the pigs (4 sows and 2 males), and provided fodder (1 sack of corn, rice bran and meal) five times between April and September. Of the 6 pigs received, one sow died. The other 2 sows each had 7 piglets and the third had 5. Gestation lasts three months and three days. At one time, I had 19 heads; 2 died and 1 went missing. Of the 16 remaining, I successively sold 10 at market (prices range from 15,000 to 22,500 CFAF): 1 was used to buy a bicycle, 1 to register my 4 children in school, 1 to buy a room from my neighbor to house my son, 2 to clear my field, 2 to buy a television. My husband sold 1 to buy motorcycle parts; 1 was slaughtered for Christmas and finally, we sold 1 to purchase food supplies. Currently we have 4, all males. I am very pleased with the World Vision project because it helped me achieve many things. To me, World Vision is like a parent, and I am extremely grateful. May World Vision continue to help others, and increase support for building materials and veterinary products.

Mrs. L. I am a widow who has remarried and three of my children are mentored by World Vision. I was a two-time beneficiary of the World Vision Piglet Project. From the first project, in 2002, I received a single sow. It was killed by my neighbor, so I went before the courts and she reimbursed me with the purchase of another. The latter had 7 piglets (5 females and 2 males), and they gradually reproduced. At one point I had 60 heads. World Vision came to buy some pigs from me to be distributed in Logone Oriental, 11 heads for 215,000 CFAF. I loaned some of the money to peasants in exchange for sacks of groundnuts (10,000 CFAF per sack); at harvest time, the crop yielded 20 sacks that I sold for 25,000 CFAF per sack. This gave me 500,000 CFAF with which to buy 2 cows, for 240,000. The cows each had 3 calves. I could now buy a cart worth 300,000F and 2 plows for 100,000 CFAF. The following year, I sold 6 pigs in order to provide loans for cultivation again and at harvest time, I resold the groundnuts and bought a motorcycle for 500,000 F. The following year, I saved 1,000,000 CFAF at Krim Krim Savings Bank (*Caisse d'Épargne de Krim Krim*); that sum remains untouched.

3.108 Microfinancing is offered by the Savings and Loans Institutions Network (*Réseau des Caisse d'Épargne et de Crédit/RECEC*) based in Moundou. Microfinance is considered to be a tool in the fight against poverty according to the National Policy and Strategy on Microfinancing, in Decree 283 (2014). It supports the creation of income-generating activities among groups and individuals from impoverished neighborhoods, especially women and youth. RECEC is one of Chad's 170 chartered microfinance institutions, and one of three main institutions operating in the South. It covers the two Logone regions as well as Tandjilé and functions along the lines of a coop, offering different types of loans, including loans to micro entrepreneurs and group loans to women (*crédit solidaire aux femmes*). Loan amounts range from 10,000 CFAF and 3 million CFAF, with terms of repayment set between 3 and 24 months. Interest rates are 2% on short-term loans and 1.75% on medium-term loans, and paid off according to a monthly repayment plan, with the exception of inventory credits (*warrantage*) that are reimbursed in one installment at term. In 2014, a total of 12 producer groups and 23 women's groups were granted microloans by RECEC (CIDRE 2014).

3.109 Microfinance projects enable beneficiaries to make important investments, although some complain of high interest rates. The beneficiaries met during fieldwork mostly highlighted the benefits of having participated in such projects. It enabled them to pay their children's school fees; buy grains to stock and resell later; buy goats and cows; and build dwellings or make housing improvements (see Table 13). At the same time, they noted the interest rate was high (2%) and the loans were, in

addition, taxable. Under these conditions, it is not always clear if microfinance is the appropriate tool for the poorest households or individuals.

Table 13 - *Individual Testimonials on the Effects of Microfinance*

	Before Program	After Program	Effects
Individual	<i>I can't manage to plant a big field, and I have to call on my family for help. I barely harvest 5 or 6 sacks of ground nuts. I suffer much hardship.</i>	<i>I managed to pay field labor costs and my peanut crop yielded 17 sacks. I paid my children's school fees.</i>	<i>I saw my income increase so it's very positive.</i>
Household	<i>My family works a lot and I am in the field, but the crop yields little. I paid my children's school registration fees, which were in arrears. I barely managed to cover my household health care costs.</i>	<i>I managed to buy a plot of land for my children and my wives were happy, they have new clothing. I managed to create a family pharmacy.</i>	<i>My family is better off.</i>
Community	<i>There is a significant amount of economic hardship in the community.</i>	<i>Everyone's life is better with the loans; people manage to get more done, and for this they are grateful.</i>	<i>Very positive effect on the community and people wish the loan amounts were increased.</i>

3.110 The three projects in Logone Occidental are not necessarily defined as social protection measures or social safety net mechanisms by on-site actors. In fact, as opposed to the situation in the Sahel band where food distribution and cash transfers are widespread, the very concept of social safety net is not well known in this region. While different types of transfers or inputs in-kind seem to be well accepted within the different community development programs (as, for example, WVI's Piglet Project), opinions are muted about the relevance of direct cash transfers as a potential social protection mechanism. The paradigm of social and economic development in the region is mainly focused on an integrated community development model, offering production-boosting assistance to individuals or groups or assistance for basic infrastructures and social services. Attitudes on cash transfers as a broad-based mechanism for social protection are rather mixed.

3.111 Nevertheless, the concept of specific support, including cash or in-kind transfers, for particularly vulnerable groups or in specific situations is accepted at a local level. Some of our interlocutors specify that direct social transfers are admissible in emergency situations: *'If it is an emergency measure, there is no problem but in the long term, they are not helpful.'* Others suggest that transfers could perhaps be accepted as a complementary measure to larger actions: *'Cash transfers will never work if the accent isn't placed on human capital; the person has to be trained first. The basic components of these projects must be streamlined so as to transform mentalities, and cash could then be used as a complement.'* Still others insist on the importance of accompanying measures and technical support: *'Some projects could very well distribute money, but first the organizational aspects must be structured; otherwise it will all fall to ruins. So long as there is no efficient organization structure and accompanying support measures, with proper follow-up, the peasants will dilapidate the funds ... Giving free money helps, but a binding mechanism must be set up through credible NGOs.'* A

number of respondents are in favor of cash transfers only if they target the most vulnerable: *‘They must principally focus on the following categories: orphans and vulnerable children, women, disabled persons and the elderly....’* The poor, those with few livelihood options, widows, and the marginalized are other categories that are identified locally as meriting this form as assistance. Respondents also insist on the importance of correct and transparent targeting that involves the community.

Chapter 4 Safety Nets Mapping²⁰

1. Introduction

Scope and Framework of Study

4.1 **This analysis examines existing social safety nets (non-contributive social protection mechanisms)²¹ in Chad, namely their amplitude, objectives, and coverage as well as the targeting, implementation, and monitoring and evaluation procedures.** A brief overview of the different humanitarian interventions targeting displaced populations (i.e., Sudanese, Central African and Nigerian refugees and Chadian returnees) is presented, but the focus of the analysis is local populations. The specific objective is, in fact, to understand the mechanisms that promote poverty reduction and risk management within Chadian populations.

4.2 **Social safety nets are analyzed and presented according to their main objective or sectoral approach:** (i) food security (National Social Protection Strategy Pillar 3); (ii) nutrition (NSPS Pillar 3); (iii) access to basic social services, education, and health care (NSPS Pillar 4); and (iv) Social assistance (NSPS Pillar 1).

4.3 **Certain projects simultaneously contribute to a number of objectives;** for example, school feeding supports education but also helps improve food security in beneficiary households. Two types of projects that are not social safety nets per se but that present certain social safety net aspects are also analyzed in the last section of this chapter, namely: (i) community-based development projects often complementing social safety nets in disadvantaged communities; and (ii) sectorial projects (e.g., rural development, infrastructure, sanitation) which, without being directly under the social safety net umbrella, apply a labor intensive public works approach.

4.4 **The different aspects of safety net mapping covered by this analysis are:**

- Budgets and beneficiaries: 2014 data
- Coverage according to needs
- Types of projects: cash transfers, in-kind transfers, fee waivers, and subsidies
- Geographic scope: the regions targeted for interventions
- Targeting mechanisms: geographic, categorical, household economy analysis (HEA), community-based, self-targeting, multidimensional livelihood test (Proxy Means Test, PMT)
- Transfer amounts: both monthly and annual amounts
- Implementation & monitoring and evaluation procedures.

²⁰ This chapter has been summarized and translated from *Cartographie des Filets Sociaux au Tchad*, a Note written by Elena Celada and prepared with the support of Rony Djekombe.

²¹ Non-contributive: beneficiaries do not contribute to admissible advantages or benefits (by paying a fee).

4.5 **The chapter is structured as follows:** Section 2 discusses methodology used in this analysis; Sections 3 to 7 present social safety nets and groups them by category: food security and nutrition, education, health, as well as other social assistance and community development initiatives. Section 8 offers an overview of all existing safety nets. Section 9 addresses recommendations regarding the framework of a social safety net system.

2. Methodology

4.6 **The projects presented in this study refer to 2014.** This analysis gives indications of budget allocations and the annual number of program beneficiaries, allowing for comparisons to actual needs.²² It is important to recall that in Chad, where social safety net expenditures remain heavily dependent on humanitarian aid and can vary significantly from one year to the next, funding availability from the international community also fluctuates. Section 6 presents an overview of the variability of humanitarian funds and their impacts on safety net expenditures (see Box 15).

4.7 **The methodology used to collect information about safety nets is based on existing data analysis and primary data collection, namely:**

- (i) Recourse to existing databases, including:
 - (a) *Database on humanitarian projects managed and coordinated by the UN Office for the Coordination of Humanitarian Affairs (OCHA)*. This database includes all interventions implemented by the different actors in the field (UN agencies and NGOs) in response to humanitarian crises affecting local populations as well as the displaced, refugees, or returnees (Strategic Response Plan, SRP). Financing for humanitarian projects that do not fit into the SRP are also identified by the OCHA (National Strategic Response projects). However, data are only limited to crises responses (humanitarian projects) and do not encompass safety nets financed as part of a development intervention. In addition, funds made available by the Government (e.g., National Solidarity Funds) that also provide relief during crises situations were not included in this database.
 - (b) *Food security database for projects administered by the Food and Agriculture Organization (FAO) as part of the Food Security Cluster*. It includes all projects financed in 2013 and 2014 in response to food insecurity where assistance was provided to both local and displaced populations. It involves both humanitarian funds and development funds.
- (ii) A direct collection of data was carried out to complete this information.
 - (a) In particular, a data collection sheet was prepared and shared among key national stakeholders (i.e., sectorial ministries, UN agencies, NGOs). The data collection sheet allowed information to be gathered on projects that were directly financed by the

²² Certain projects that were introduced in 2015 are also presented and studied because they feature innovations as compared to those from earlier years.

Government as well as ones that did not fall under the food security response and were not entered into the above two databases.

This analysis, however, does not aim to be exhaustive; it targets large-scale interventions and ones receiving major financing. It is possible that certain small projects are not mentioned herein.

3. Food Security Safety Nets

Identification

4.8 In 2014, over US\$50 million was spent by the international community and the Government to finance safety nets in response to food insecurity in the Sahel region. The interventions analyzed here only address initiatives that act as social safety nets; other projects that contribute to reducing food insecurity (i.e., rural development or agricultural projects) are not covered. As shown in Table 14 below, these programs provided assistance to approximately 1 million individuals (this number does not include school feeding beneficiaries who are accounted for separately, in the section on Education).

Table 14 - 2014 Food Insecurity Response Programs

Food Security	Budget (US\$)	Beneficiaries	Source of Financing
Cash transfers (Cash/Vouchers) NGOs: Action Against Hunger (AAH), Catholic Relief Services (CRS), World Vision International (WVI), OXFAM, Cooperative for Assistance and Relief Everywhere (CARE), Agency for Technical Cooperation and Development (ACTED), Solidarité ²³	20,750,743	566,824	DPs (Humanitarian Funds)
Sales Price Subsidies (National Food Security Office, ONASA)	13,000,000	ONASA estimate : 230,000 persons if 159 kg/person	Government
Food Aid – Food/Vouchers WFP through NGOs	10,479,104	138,957	DPs (Humanitarian Funds)
Cash-/Vouchers-for-Work WFP via NGOs	3,468,446	99,680	DPs (Humanitarian Funds)
In-kind (agricultural inputs/support) FAO (only agricultural support included in humanitarian response; there are others)	5,582,898	87,525	DPs (Humanitarian Funds)
DPs Social Safety Nets CARE, SOS Sahel, Solidarité ²⁴	(5,000,000/total amount DPs)	N/A	DPs (EU Development Fund)

²³ To avoid compiling WFP financing sources twice, projects launched by NGOs with WFP financing were not included here. WFP projects operating through partner NGOs are accounted for separately.

²⁴ The total amount of the TFSP can be estimated at about US\$5 million per year; however, an estimate is not available for the amounts allocated to the three safety net interventions (CARE, SOS Sahel, and Solidarité). Because the social safety net components are part of larger resilience programs organized by the three NGOs over two or three years, it makes it difficult

	N/A - amount for SSNs		
Total	55,281,191	1,122,986	

Source: Author's calculations based on data collected from different partners.

4.9 **WFP's Seasonal General Food Distribution Program.** Set up through partner NGOs, in 2014, the program reached a little under 140,000 individuals and posted a global budget of US\$10.5 million. About 25% of those assisted received a direct food transfer, while 75% received support in the form of vouchers to be exchanged for food with participating merchants.

4.10 **Food-for-Work/Vouchers-for-Work Program.** Established by the World Food Program through partner NGOs, under this program about 19,000 individuals participated in building community assets in exchange for household food supplies (66% of beneficiaries) or vouchers (44%). In 2014, the total number of beneficiaries (workers and household members) was estimated at close to 100,000 individuals, primarily from the Wadi Fira and Guera regions. The work completed required a vast and predetermined labor force ranging from 90% of total costs for hydro-agricultural facilities to 65% for roadway rehabilitation. Work was scheduled from November to May, around the growing season. The program is progressing well compared to 2012 and 2013, when the number of beneficiaries was estimated at close to 33,000 and 57,000²⁵ respectively. However, the amount of work completed falls short of projections. The program is in fact more turned towards population resilience than emergency support (i.e., it was not activated during the lean season). For this reason, its budget is often reallocated to other emergency assistance initiatives, namely towards seasonal food distributions.

4.11 **Price Subsidy Program.** Set up by the Government through the National Food Security Office (ONASA), investments have ranged between 6 and 7 billion CFAF per year in food insecurity response mechanisms based on sales price subsidies. Food security analysis conducted post-harvest by the National Food Security Information and Early Warning System (SISAAP) allows authorities to identify cereal surplus and shortage zones. ONASA buys food products from surplus zones and resells it at subsidized prices (sales prices range between 30% and 50% of market price) in zones with the highest food insecurity percentiles. In the absence of records, it is difficult to estimate the program's number of direct beneficiaries. ONASA has estimated that, if every person were to buy 159 kg of food per year, the number of beneficiaries would be 230,000²⁶ (a total of 37,000 tons were distributed in 2014).

4.12 **In-Kind Assistance Programs** via the distribution of agricultural inputs or production tools. These are often paired with training set up by the FAO and NGOs (e.g., Action Against Hunger) as a response mechanism to emergency food insecurity. These interventions offer in-kind transfers in the form of productive assets; they primarily aim to support household agricultural productivity and are not usually tracked among social safety nets due to their contribution towards development. The programs were taken into account as part of this analysis to provide an overview of emergency food insecurity

to obtain disaggregated data on social transfers. These programs can be viewed separately under "Cash Transfers Financed by Humanitarian Funds" because they are in fact safety nets that were integrated into longer-term development programs.

²⁵ WFP (2014).

²⁶ 159 kg per year corresponds to cereal-based food requirements for one person for 12 months, at an average daily intake rate of about 425-450 grams (based on WFP ration of 2,100 kcal). If the objective is to facilitate household access to food and to meet food security needs only during the hunger gap period or 4 months per year, it could be estimated that the number of potential beneficiaries is approximately 690,000 per annum. Here however the estimated 230,000 beneficiaries is a figure provided by the National Food Security Office (ONASA); it was retained.

responses that are financed by humanitarian funds, even if they do not quite fall under the definition of a *social safety net*. Other such types of interventions also exist that are financed by agricultural development or aid programs but they are not included in this analysis.

4.13 Structuring Initiatives. Launched as part of Thematic Food Security Plan (*Plan Thématique de Sécurité Alimentaire*) and financed by the European Union (EU) Delegation, this program represents 19 million Euros per year (accounted for here, for reference purposes, at US\$5 million in 2014) over five years. It finances a cluster of interventions with the common objective of improving household crop yields and reinforcing household resilience to future shocks. The interventions put forth by the 11 partner NGOs not only include production reinforcement measures (i.e., training, support to groups, microfinance) and risk management at a community level (i.e., cereal banks, financing for risk management and disaster plans), but also social safety nets that help the most vulnerable find relief from the impacts of shocks (i.e., cash transfers, food-for-work, or food-for-training). Social safety net components were identified in the interventions put forth by three of the program’s 11 partner NGOs: Solidarité, CARE and SOS Sahel. The Solidarité project in Batha West offers activities that increase community resilience (e.g., financing for its risk management plan, increase local production capacities); it is also comprised of support to extremely poor households in the form of cash transfers during the lean season.²⁷ The objective of the CARE project entitled Women Coping with Climate Change, Water and Resilience in the Wadi Fira region is to specifically offer support to vulnerable agro-pastoral and pastoral communities suffering from chronic food insecurity and malnutrition, so they may become more resilient to short- and mid-term shocks and improve food security and nutrition in a sustainable manner. The project includes cash-for-food and cash-for-training work programs²⁸ in aid of poorer households and to help reinforce their capacities. The SOS Sahel project finances agricultural production development activities around oases located in the Kanem region. A 2015 cash-for-work program for women from very poor and poor households is in the planning phase; its objective is to protect the sand dunes surrounding the oases.

Coverage According to Needs

4.14 Program coverage seems relatively high. Overall, 2014 food insecurity response programs covered about half the individuals National Food Insecurity Survey (ENSA) 2013²⁹ considered to be suffering from generalized food insecurity (moderate and severe) and all those requiring food assistance during the lean season (estimated to be 900,000).

Table 15 - *Coverage of Food Insecurity Response, According to Needs*

Category of Needs	Individuals (million)
Number of persons suffering from food insecurity (ENSA 2013)	2
Number of persons suffering from severe food insecurity (ENSA 2013)	0.24
Number of persons requiring food assistance during 2014 lean season (ENSA 2013) ³⁰	0.9

²⁷ Solidarité is considering obtaining financing for this portion of the project through the WFP, and reallocating EU Thematic Food Security Plan (TFSP) funding to other resilience activities.

²⁸ In 2014, this project was not operational; its launch is scheduled for 2015.

²⁹ The ENSA report (2013) makes reference to the food security situation during the 2014 hunger gap that is connected to the 2013 agricultural campaign; it also facilitates activity planning for the following year.

³⁰ This projection is based on data integration combining individuals currently in a food insecurity situation, the prevalence of poverty, and the implemented survival strategies. This integration indicates that some of the individuals suffering from

Number of food assistance beneficiaries (all projects)	1.1
Number of food assistance beneficiaries (only projects with reliable data, operating during the lean season)	0.7
Percent of coverage versus identified needs (persons requiring food assistance)	>100% all projects 78% key projects

Source: ENSA 2013 and author's calculations.

4.15 **These results should be nuanced:** (i) some of the projects listed only have fragmented and incomplete information about their beneficiaries or the number of beneficiaries is not precisely known (price subsidy projects); (ii) some projects, although they contribute to household food security, do not offer immediate lean season assistance (food-for-work projects and agricultural input transfers); and (iii) projects may overlap, as some NGOs declared having “completed” the vouchers or money transfers with WFP food supplies. It is therefore possible that some beneficiary households may have taken part in two projects and are accounted for twice, a fact that is difficult to verify in the absence of a joint record-sharing system between all the different programs.

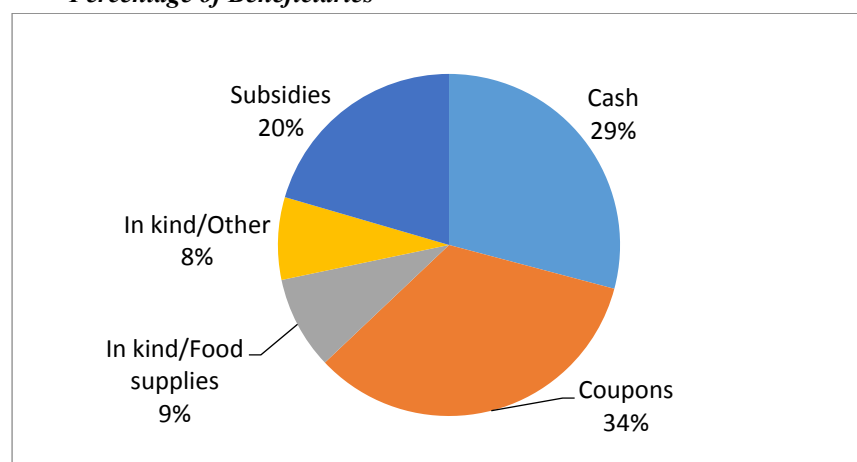
4.16 **Despite these caveats, it can be estimated that coverage for food insecurity response projects remains quite high or, at about 80% when compared to the highly urgent needs identified by ENSA** (this figure only includes projects that are supported by reliable data where in-kind or monetary assistance was directly provided to households during the lean season). Overall, the coverage rate remains relatively low (35%), as compared to the number of persons suffering from generalized food insecurity (moderate and severe).

Typology of Transfers

4.17 **The majority of food insecurity response programs are based on cash transfers (cash or vouchers); transfers in-kind are relatively limited (see Figure 52).** Close to 380,000 individuals from over 60,000 households benefitted from assistance in the form of voucher transfers that could be exchanged for food at pre-selected local merchants. The number of individuals who received cash transfers is also high, at about 330,000 in 2014. Food distributions only cover 9% of beneficiaries, or less than 100,000 individuals, a figure that includes both the food program beneficiaries and those in the WFP food-for-work program. The in-kind/other category refers to beneficiaries of agricultural input distribution programs. Price subsidy programs are solely organized by ONASA and, as mentioned earlier, an exact number of beneficiaries is difficult to determine in this type of intervention (only approximations are provided here).

moderate food insecurity could very well tilt into severe insecurity between now and the hunger gap and would need assistance, or approximately 900,000 individuals.

Figure 52 - Typology of Food Insecurity Response Assistance Received and Percentage of Beneficiaries



Source: Author's calculations based on data collected from different partners.

4.18 Cash transfers (cash or vouchers) exchangeable for local purchases therefore seem to be the preferred mechanism among the different actors, in part due to cost efficiency. Program implementation costs are lower than those associated with food distribution interventions. According to estimates based on the 2015/2016 WFP program, during food distribution interventions, for every dollar spent on food purchases, another dollar is spent on transportation and logistics (therefore 50% of a transfer-in-kind intervention is allocated towards organization and logistics costs). Whereas on a cash-transfer intervention (vouchers), the percentage attributed to organization and logistics costs is estimated at around 19%.³¹

4.19 A group of factors influences the choice between cash transfers or vouchers. According to information shared during interviews with actors, the choice between cash transfers or vouchers is based on the following considerations:

- (i) **Compromise between giving consumers a choice and ensuring food security.** A cash transfer offers more spending options to consumers (and eventually the opportunity to save or invest). It is more difficult however to ensure whether or not the consumers spend the money on food supplies, a fact that food vouchers do ensure.
- (ii) **Security considerations.** Voucher transfers minimize security risks for both the beneficiaries, and the agents during the distribution of cash transfers, particularly in some zones where banditry is widespread;
- (iii) **Market analysis.** In areas where markets are operating smoothly, cash transfers can be introduced without any major risk of causing inflation or stock shortages. In other areas, however, vouchers minimize these risks. Indeed (i) sales prices are set in advance between pre-selected merchants and the NGO, thereby ensuring more control over the risks of inflation; (ii) merchants are forewarned about the number of beneficiaries and the quantities of supplies they will be required to sell. The demand increase is known in

³¹ This percentage only reflects direct operation costs; WFP supervision and administrative costs are not included. This data is drawn from Appendix I-A / PRRO-200713, 2015/2016.

advance by the merchants, who in turn can make arrangements and stock up prior to the rainy season. With vouchers, market exchanges are more predictable, and demand increases are easier to manage. When security risks and market risks identified by the NGOs are limited, cash transfers become the preferred choice, as they often have indirect impacts that carry over across a longer period of time as compared to vouchers; they also offer consumers more choice.

Box 15: Large-Scale Introduction of Cash Transfers and Their Potential Effects on Markets

The large-scale introduction of cash transfers (both cash and vouchers), which are progressively replacing food rations, raises mid- and long-term questions about their eventual impact on inflation and on the capacity of markets (that are weakly integrated in Chad) to absorb this supply increase which, until very recently, was covered by imported food rations. In 2014, over 700,000 individuals benefited from cash transfers (cash and/or coupon programs combined). This represents about 6% of the Chad population or 15% of populations living in the Sahelian band, for a total of about US\$20 million injected into the local economy. The WFP carries out periodic market surveys to assess the ability of local markets to absorb demand increases (ability may vary from one year to the next, depending on crop yields) to plan food or coupon interventions accordingly. However, follow-up assessments clarifying to what extent these interventions affect local prices or market dynamics are not currently available.

Geographic Coverage

4.20 **All identified projects were located in regions of the Sahelian band which, according to ENSA, was the most deeply affected by food insecurity in 2014.** Of the approximate 2 million persons affected by food insecurity (moderate and severe) in 2014, about 1.3 million (65%) were from Sahelian band and only 0.7 million (35%) from the Southern zone. The prevalence of severe food insecurity was four times higher in the Sahel regions (4%) as compared to the Southern regions (1%). These figures indeed support the geographic radius of all identified intervention projects. As stated earlier, the primary objectives of these projects were to provide responses to food insecurity (mostly severe), ensure household survival, and prevent the implementation of negative response strategies. The projects did not seek to address chronic household poverty, which could have justified the inclusion of areas in the Southern regions.³²

³² A gap is reported in the ENSA data on food insecurity (more pronounced in Sahel region) and ECOSIT 2011 data on food poverty (more pronounced in the South). This could be explained by the fact that ENSA records seasonal household deficits more accurately, while ECOSIT records more structural forms of poverty.

Table 16 - *Geographic Coverage of Food Insecurity Response Projects*

Level	Region	Institution/NGO
National		ONASA
Sahelian band	Kanem	AAH, WFP, SOS Sahel
	Lac	ACTED , WFP
	BeG	AAH, OXFAM, WFP
	Batha	Solidarité, ACTED , WFP
	Guera	OXFAM, WVI, WFP
	Sila	WFP
	Hadjer Lamis	WFP
	Ouaddai	CRS, WFP
	Wadi Fira	CRS, CARE, WFP
Southern zone	No regions targeted	(Only southern refugee camps are targeted; 1 OXFAM/WFP project in Mondoul/Logone Oriental targets mostly refugees but few from host population)

Source: Data collected from different partners.

Targeting Mechanisms

4.21 Among the safety nets identified for the purpose of this report, most that provide food insecurity responses rely on at least two types of targeting mechanisms to select beneficiaries, geographic and community targeting; other methods are not widely used:

Table 17 - *Targeting Mechanisms Used For Food Insecurity Safety Net Responses*

	Geographic	HEA	Community	Self-Targeting	Categorial	PMT
Cash Transfers (Vouchers or Cash) - NGO	x	x	x			
Food Assistance -WFP	x	x	x			
Food-/Vouchers-for-Work - WFP	x	x	x			
Subsidy - ONASA	x			x		
In-Kind/Other	x					

Source: Data collected from different partners.

4.22 **Geographic Targeting.** Geographic targeting is a method used by all partners, and the tools used to identify geographic intervention zones are: (i) analysis of agriculture data collected every year by the SISAAP, which identifies zones where cereal production falls into deficit; (ii) ENSA, which is conducted annually immediately after harvest and identifies zones more at risk of food insecurity during an upcoming lean season; and (iii) the HEA survey, which is used by some partners to identify the presence of household survival deficits and livelihood deficits. Together, these three tools produce clear priority intervention zones, quantify needs in terms of the number of persons requiring coverage, and provide preliminary budgets to cover these needs. To complete the geographic targeting process and identify townships and villages where interventions are necessary, most NGOs use other indicators, namely ones associated with pluviometry. This variable can fluctuate considerably within a region and from one township to the next, and is one of the leading factors affecting the outcome of agriculture and, consequently, household incomes.

4.23 **Community Targeting of Households.** The identification of potential beneficiary households is generally based on poverty and vulnerability indicators, which are usually determined within and by the respective community. This type of targeting is used in projects that distribute cash transfers and food supplies, as well as food-for-work projects. The two main types of community targeting conducted in Chad are:

- **Household Economy Approach (HEA)** identification of very poor and poor households. Close to an estimated 70% of food insecurity response interventions rely on this method to identify beneficiary households (see Box 16).

Box 16: Using the Household Economy Approach in Chad

The Household Economy Approach (HEA) is based on an analysis of the means of existence of households. It helps determine the food needs and other non-food needs of the population, understand the repercussions to economic or environmental changes on livelihoods, and establish which are the most appropriate ways to deliver assistance be it short-term emergency assistance or development programs or policy changes for the long term. Efforts are organized around two main steps:

- A reference base updated every five to six years that analyzes household livelihoods over an “average/normal” year’s time (no major crises). This first phase allows to: (i) identify the geographic coverage of a “livelihood zone” or zone where populations share overall livelihood characteristics; (ii) classify households by socioeconomic category (VP, P, M, A): determinant characteristics of a given socioeconomic group are established during discussions with key local actors; this exercise is conducted randomly across several villages (10-12) in the livelihood; and (iii) identify each socioeconomic category’s household subsistence strategies or create an overview of typical household economies.
- *Result analysis that is updated every six months (according to need and/or available funds).* This analysis leads to a better understanding of how external factors (i.e., negative shocks or positive factors) affect households’ economy and their capacity to: (i) meet their basic survival needs (survival threshold); and (ii) protect their basic livelihoods (i.e., livelihood protection threshold). The analysis takes into consideration the coping strategies mentioned in the reference survey. Households facing survival and/or livelihood deficits are counted; their depth of deficit is established; and the appropriate responses are then planned. The analysis is based on secondary data usually collected by actors who are in the field as part of the follow-up measures on the agriculture campaign (e.g. production, local market prices, etc.).

Currently 13 profiles in seven livelihood zones have been conducted in Chad. For the most part, the zones are in the Sahelian band, with 10 profiles conducted in pastoral, agro-pastoral, or fishing zones in proximity to lakes. The Southern zone has been covered by three profiles that include livelihoods based on rainy-season cereal crops, market gardens crops, subsistence crops, and income-generating crops (Southern Guera, Ouaddai, and Mandoul/Logon Occidental). Two profiles are also being conducted in refugee camps: one in Maro (South) and another in Goz Amir (East).

- **Other Community Indicators of Vulnerability.** In zones not covered by HEA analysis, poorer households might be identified through community consultations. Some NGOs, for instance Catholic Relief Services, analyze a household’s ability to meet food needs using a simplified household questionnaire; within a given household, the questionnaire collects data about the frequency and size of meals in the previous four weeks (Hunger Household Scale method).

4.24 **Self-Targeting** is only used in the price subsidy program organized by ONASA; it does not rely on any poverty-based household selection methods. For the most part, the ability to buy subsidized food products largely depends on the purchasing power within each household. It is quite possible that a reverse selection process occurs, favoring households where a stronger purchasing power buys a greater quantity of subsidized food products, to the detriment of more destitute households. It is

interesting to note that in its own food security interventions, the Ministry of Agriculture does not use this approach to identify needier households, although it promotes the HEA analysis across the country via its SISAAP.

4.25 **Categorical Targeting** is not used in food insecurity response programs but as discussed in the next Section, its mechanisms are widely used in nutrition assistance programs.

4.26 **Proxy Means Test (PMT)** is neither used in the food security programs identified for the purpose of this review nor elsewhere as part of any other social safety net program in Chad. Food insecurity response projects rely on targeting techniques to identify households that are most deeply affected by shocks; often environmental, these shocks also include agricultural production and household incomes among producers as well as about market prices and household consumer expenditures. Preliminary results of a study conducted by the World Bank tend to conclude that an HEA-based targeting approach might better-capture the problems associated with food insecurity than other targeting strategies such as PMT. The latter seems more appropriate when identifying chronically poor households.

Amount and Duration of Transfers

4.27 **The amount and duration of transfers vary considerably from one program and one region to the next.** Generally, the amount of a monthly transfer ranges from US\$24 to US\$80 per month per household whereas during the lean season, the number of transfers can vary between two and six. Annually, the amount ranges between US\$70 and close to US\$300. Variations occur due to the different calculation methods, household needs, and the budget of each NGO in relation to an intervention zone's actual needs.

Table 18 - *Monthly /Annual Transfer for Main Social Safety Net Food Security Response Program*

	Monthly Transfer	Duration	Estimated Annual Transfer	Transfer Calculation Method
Cash transfers (NGOs)	Between US\$24 & US\$80/household (HH)	2-6 mo. Average: 3.5 mo./year	From US\$70- US\$288/year/HH Average: US\$169/year/HH Per head : Approx. US\$30/year (HHsize: 5.6)	Most NGOs often base it on survival deficits and livelihood deficits as per HEA. Some NGOs use the cost of a WFP food basket.
Food Basket (WFP)	US\$32 /HH/mo. US\$5.6 /head/mo. (or US\$0.19 /day)	3 months	US\$96/HH/year, US\$17/head/year. Equivalent to: 26 kg/head/year or 148 kg/HH/year	50% of daily kcal intake; no difference between regions.
Price Subsidies	N/A	During lean season	Resale price between 30% and 50% of market price (or 50% to 70% household savings)	No amount allocated per household; buyers can go to the ONASA sales point to purchase desired quantities.
Food-Vouchers-for-Work	WFP: about US\$40/household (basis : 20 days* US\$ /day)	As per duration of work	Annual amount according to duration of work	Equivalent to cost of food basket 2,060 kcal / head / 5-person household
	CARE: US\$60 (20 days* 3 US\$/day)	20 days	US\$60/year to a maximum employment of 1 month	N/A
	CRS : US\$48 (US\$4 /day*12 days)	12days/mo .*2 mo.	96US\$/year, 2 mo. of work (+ non-contributory ML during growing season)	48US\$ or 50% of household food requirements; based on food consumption score.
	SOS Sahel: US\$100 (5US\$/d*20 d)	2-3 months (20 d/mo.)	200-300 US\$/year	Identified from within the community, on basis of salaried day work; considered adequate in.

Source: Data collected from different partners.

4.28 A transfer amount is generally calculated along two approaches:

- Survival deficit and livelihood deficit. Based on HEA analysis, it is possible to identify the needs of poor and very poor households and define the amount of the transfer to cover their survival deficit (i.e., food expenses and purchases of priority goods like water, soap, salt) and their livelihood deficit (i.e., maintenance of access to basic social services and to long-term sources of livelihoods like seed, fertilizer). NGOs, due to their budgets, often favor covering the survival deficit among a larger number of people rather than covering the two deficits among a limited number of beneficiaries. According to some NGOs, the survival and livelihood deficit approach has limitations due to its reliance on secondary data (e.g., agriculture output data, prices at local markets), which is often inaccurate and based on falsified analysis results or underestimations of actual household needs.

- Food basket to meet a household's food requirements. It is the standard approach used by WFP in their food or vouchers distribution program. The food basket totals 1,050 kcal³³ per day, or half a person's daily food requirements. The value of the food basket is established under the daily caloric intake since the objective of this seasonal intervention is to preserve household coping capacities and responses, rather than meet the entirety of their needs.

4.29 **Average annual transfers are relatively generous but of very short duration.** The average cash transfer (vouchers or cash) to individuals is about US\$30 per person, an amount that does not differ significantly from the transfer necessary to eliminate food poverty (US\$36 per year, per head, in 2011), as stated in Chapter 2 of this report. The amount of the transfer is therefore relatively generous (although it varies considerably from one program to the next) on an annual basis, but its distribution (three to five payments per year) strictly aims to support household food consumption in critical times. The amounts of the transfers are quite high, but they are short-lived. No projects were identified that issue regular, predictable transfers, ones where amounts are more conservative yet span a longer period of time. The partners consulted acknowledged that assistance projects should spread transfers over a longer period of time, starting before the lean season (to stabilize household consumption and reinforce resilience without adopting negative strategies) and resuming after the lean season to help consolidate results. Due to budget restrictions however, most projects take place between June and September, although there are some exceptions. For instance, the CRS project offers cash-for-work transfers conditional to being employed before the lean season and non-contributory transfers during the lean season; both generate productive assets within the community.

Implementation Mechanisms and Monitoring and Evaluation

4.30 **Institutional Anchoring.** Nearly all the interventions reviewed (except the program by ONASA) were financed by development partners and implemented by local and international NGOs not associated with the Government. Certain government agencies are nevertheless involved in the different start-up arrangements, as for example:

- Planning and geographic targeting. The Ministry of Agriculture acts as the focal point for the HEA method across the country, coordinating plans and updates for the different HEA profiles. The Ministry is therefore involved in the need-identification phase as well as in the planning and geographic targeting of all major interventions.
- Liasing with the Regional Action Committee and the Departmental Action Committee. Some projects have pre-established coordination and exchange processes set up with the Government's decentralized agencies. These generally consist of meetings to discuss information and updates regarding a project's evolution. The involvement of these agencies remains rather limited and is not systematic.
- Involvement of local agencies in the start-up phase of certain projects. Some projects collaborate with local agencies, like the National Office for Rural Development (ONDR) during the start-up phase of specific aspects of an intervention. Such is the case with the CRS, which, together with ONDR, hosts training sessions on better farming practices for the beneficiaries of its social safety net program.

³³ The full 2,100 kcal ration was intended only for the 2014 refugees; it was later reviewed and decreased for budgetary reasons.

4.31 **Beyond these examples, the involvement of Government agencies, which mostly occurs on the ground, remains minimal.** Consequently, the government agencies have very little knowledge about the operational aspects of setting up and implementing cash transfer projects.³⁴

4.32 **Beneficiary Identification and Registration.** Because most projects are short term and issue a limited number of transfers per year, NGOs do not systematically provide beneficiaries with a numbered photo ID card. In projects where ID cards are used, the card must be presented to receive the cash. In cases where vouchers are used, data is exchanged (i.e., first and last name, code) and inscribed on the vouchers that are distributed to the beneficiaries, who, in turn, exchange them for money or goods (see description of payment mechanism, below). It was also noted that most partners do not keep detailed computerized beneficiary records; a hard copy that relies on a Name/ID Code system is used instead. It is therefore difficult to know if households have been the beneficiaries of one or several programs or if assistance was received several years in a row.

4.33 **Terms & Conditions of Transfers/Payments.** In rural areas, in the absence of banks or microfinancing, cash transfers (or about one-third of food insecurity response projects) often rely on partnerships with the two leading telephone companies, Airtel, and Tigo. These two companies provide go-to addresses (local retailers/merchants representing Airtel Money or Tigo Cash³⁵) just about everywhere across the country. A cash transfer process usually consists of a voucher drawn up by the NGO (or the operator) and handed out in advance to beneficiary households; on the voucher is the name of the beneficiary, the sum to be transferred, and eventually a re-load code; to complete the transaction, the focal point enters the code and hands over the money, which will subsequently be e-credited to his/her own account by the operator.

4.34 **Very practical, this arrangement is able to distribute cash quickly, at low cost (the average handling fee is 5% or 6% of transaction).** It rests on extremely decentralized structures. However, even if transactions carried out via telephone service providers are practical, payments made through banking or microfinance institutions could have more important long-term impacts. If conditions were met, these agencies could encourage beneficiaries to put money aside in savings, acquaint themselves with financial products, and learn to handle their finances, eventually getting access to loans and therefore boosting their household resilience capacities.³⁶

4.35 **When an NGO opts for voucher-based transfers instead of cash, merchants are pre-selected locally based on certain characteristics, like their ability to supply and stock in conditions that meet hygiene standards.** Prices for the different products are set in advance between the merchant

³⁴ In 2014, the Ministry of Social Action granted a budget to the National Solidarity Fund amounting to about US\$5 million to assist populations returning from Central Africa (returnee food baskets). Although vouchers are more efficient and cheaper, food distributions were provided because the Ministry did not have the capacity required to draft and implement a coupon transfer program. This assistance is not accounted for among the projects that are analyzed in this report because in 2014, it only targeted returning refugees.

³⁵ Electronic money transfer service is largely used by individuals to exchange or transfer money.

³⁶ New partnerships are being created between microfinance companies and telephone companies, similar to the one between Tigo and *l'Union des Caisses d'Epargne et de Crédit du Guéra*, in Sila. With these new partnerships, microfinance structures can rely on telephone service providers, thereby widening their savings and credit products in more remote locations where they do not have a physical presence (<http://www.pader-g.org/index.php/a-la-une/167-l-uccc-g-a-lance-des-services-financiers-decentralises-a-goz-beida>).

and the NGO, and beneficiaries can exchange their vouchers for food (in food security programs) with these merchants.

4.36 Conditions. Nearly all of the cash or in-kind monetary projects reviewed (except food-/vouchers-for-work projects) do not apply conditions to obtain a transfer. However, according to good practices in social transfers, the monthly remittance is often³⁷ associated with a training and awareness session for beneficiary households, covering themes like nutrition and hygiene. In food-/vouchers-for-work programs, obtaining a transfer is conditional to a member of the household participating in a pre-determined community work group. There are also a few initiatives where the beneficiary participates in a training program in exchange for transfers, such as CARE's 2015 project, *Women Coping with Climate Change, Water and Resilience (Femmes, Adaptation au Changement Climatique, Eau et Résilience)*. Here, transfers are conditional on women participating in training sessions and functional literacy classes where they are taught to read and write, eventually learning book-keeping for future income-generating activities and managing community activities.

4.37 Impact and Monitoring and Evaluation. The majority of social transfer programs (cash or in-kind) are regularly assessed through beneficiary surveys that are conducted after each transfer (post-transfer follow-up). On the one hand, these surveys evaluate whether the process is working (*Did the beneficiary receive her/his transfer? Were there issuance delays or problems with the payment?*); and on the other hand, if the program is relevant (*Was the transfer adequate in relation to needs? Did the household obtain a satisfactory quantity of food during the lean season? How did the household use the transfer?*). To assess the impact, surveys are often conducted before distribution, and a final survey is conducted among a random group of beneficiary and non-beneficiary households. For example, CARE conducted a survey after its 2014 cash transfer program. Post-transfer follow-ups indicate: (i) an improvement in qualitative and quantitative household consumption after the transfer: a majority of households (86%) met their daily caloric intake; (ii) the cash transfer met the survival deficits of all households in the project intervention zone, though the livelihood deficit persisted in about 27% of households; and (iii) the cash transfer was used to buy food (79%), but it was also transformed into a productive investment or income-generating activity (18%) or used to cover health and education expenses (2%).

4.38 Beyond these post-transfer follow-up surveys, Action Against Hunger proceeded with a large-scale study on the socio-anthropological impact of cash transfer interventions in the Kanem region.³⁸ The analysis concluded that even if 50% of food needs were met in the households targeted by the project, it was probably not the most appropriate approach for the Kanem region. The main study results reveal:

- The project had no impact, or a negative impact, on community resilience. The regular payment of transfers generated a wait-and-see attitude among beneficiaries, while no support was offered toward the cultural and structural changes necessary to strengthen resilience.

³⁷ All of the NGOs that provided information for the purpose of this analysis declare linking distribution to an awareness program on better hygiene and better nutrition practices. We did not meet with all of the NGOs, but nearly all the partners are estimated to pair distribution with an awareness campaign.

³⁸ Action Against Hunger (2015).

- Mid-term or long term, a non-contributory cash transfer – an emergency tool suited for zones where the economy is active – is not appropriate in chronic crisis situations, for instance in zones where the economy is non-productive.
- The impact on the local economy was extremely weak; the majority of the funds injected left the area to be spent elsewhere, in supply hubs like N'Djamena and Libya.
- Community solidarity seems to have been stimulated by a partial redistribution within filial clans.

4. Review of Social Safety Nets on Nutrition

Identification

4.39 **This section analyzes transfer projects that direct dietary supplements to at-risk individuals or to those who already suffer from malnutrition.** Another response to food insecurity, the analysis offers an overview of the amounts invested every year in emergency response projects to the food and nutrition crisis, in the form of transfers to vulnerable households and individuals.

4.40 **In 2014, approximately US\$30 million was spent supporting close to 500,000 children, women, and expectant mothers who were either at risk of malnutrition or malnourished.** This figure only concerns interventions that provided households with nutrition supplements. About US\$12 million additional served to finance parallel projects that provided medical care for those suffering from acute malnutrition. This additional amount, of a strictly medical nature, was not posted with social safety nets.³⁹

Table 19 - *Malnutrition Prevention and Response Projects*

Nutrition	Budget (US\$)	Beneficiaries	Source of Financing ⁴⁰
Moderate acute malnutrition prevention and health care - WFP	14,385,835	305,272	DP (WFP)
Chronic malnutrition prevention - WFP (2015)	137,706	(40,000) (prévisions)	DP (WFP)
Severe acute malnutrition - UNICEF	15,000,000	145,873	DP (UNICEF)
Total	29,523,541	451,145	

Source: Data collected from different partners.

4.41 **Moderate Acute Malnutrition Prevention and Recovery Project.** In 2014, approximately 305,000 children and pregnant women took part in a prevention program in the fight against moderate

³⁹ These projects were identified in the OCHA database and carried out by several NGOs. They are essentially initiatives that strengthen the receiving capacities, survival capacities, and follow-up services in health centers, the creation of mobile teams in remote villages, diagnostics, medical treatment for complications associated with malnutrition, awareness programs, etc. These initiatives are complementary to UNICEF and WFP food supplement distribution projects, but because they consist of medical/health interventions, they were not included in this analysis. Also, it should be noted that cases of severe acute malnutrition with complications fall under the responsibility of WHO.

⁴⁰ The Government's financial contribution to these projects occurs at both health district and health center levels where health staff is made available. This number is difficult to quantify. An assessment conducted by UNICEF in 2012 estimated Government financial participation at about 5% as compared to the budget invested by UNICEF (UNICEF 2012).

acute malnutrition, financed by WFP. Coupled with awareness sessions, it consisted of a targeted distribution of food supplements (SuperCereal, Plumpy’Sup, or Plumpy’Doz) to pregnant and lactating women and children 6–59 months by Supplementary Feeding Centers. There are two facets to the program, the first being the provision of health care treatments to eligible malnourished children and women in zones where the malnutrition rate tops 10%, and a prevention facet (blanket distributions) in zones where the malnutrition rate exceeds 15%. The treatment and prevention facet should have each accounted for 50% of the program’s global budget, but due to budget restrictions and to a high number of malnourished children, the treatment facet was extended to cover nearly 80% of beneficiaries, while the prevention facet was reduced proportionally.

4.42 **Health care for severe acute malnutrition.** Financed by UNICEF, this project complements WFP’s own project for severe acute malnutrition. In 2014, via the distribution of food supplements (Plumpy’Nut), the project covered health care for about 145,000 severely malnourished children in 10 regions. Nutrition and medical care were associated with deworming campaigns and vitamin A food supplement distributions, as well as awareness sessions on better basic health and sanitary practices. Children suffering from severe malnutrition with medical complications were cared for through complementary interventions (WHO, NGOs) not listed here.

4.43 **Chronic Malnutrition Prevention Project.** More limited in scope, this project attacks chronic malnutrition. In its 2015 pilot phase, the program aims to provide nutritional supplements (Plumpy’Doz and Nutributter) to about 40,000 children ages 6–23 months and to pregnant or lactating women. The food supplement distribution is paired with complementary preventive interventions that cover, among other topics, nutrition, better hygiene and sanitary conditions as well as initiatives that improve access to quality health care services.

Needs Coverage

4.44 **Needs coverage remains average.**⁴¹ The program against moderate acute malnutrition covers over half the estimated actual needs (59%). If the program targeting moderate malnutrition also acted as a preventive measure among all children under the age of 5 in regions where prevalence is above 15%, it is understood that the actual number of malnourished persons who have access to nutritional supplements risks being below the number in Table 20 (where needs only correspond to the already malnourished). However, the severe acute malnutrition response program seems to have a relatively high coverage rate: in 2014, the number of beneficiaries reached 94% of the number of children identified with moderate acute malnutrition. The total number of children covered by the program is cumulated over 12 months and as a result, it is possible that certain children (who experienced relapses) were counted twice. As expected, the chronic malnutrition program, which is not considered an emergency program, offers extremely limited coverage (below 5% of needs).

⁴¹ It should be specified that in the absence of a recent national survey, data regarding malnutrition rates refer to the last national survey in 2010, when the malnutrition rate was particularly high.

Table 20 - *Nutrition Program Coverage in Relationship to Actual Needs*

	Malnutrition Rate ⁴²	Number of Malnourished ⁴³	Number of Beneficiaries	Coverage Rate
Moderate acute malnutrition – children 0-5 yrs	15.7%	412,246		
Moderate acute malnutrition – pregnant and lactating women	19.9%	104,370		
Total: moderate acute malnutrition		516,616	305,272	59%
Severe acute malnutrition – children 0-5 yrs	5.9%	154,920	145,873	94%
Chronic malnutrition – childrens 0-5 yrs	38.7%	1,016,174	40,000	4%

Source: MICS 2010, 2009 Census, data collected from program start-up agencies.

Geographic Coverage

4.45 The intervention zones for projects against acute malnutrition, concentrated in the Sahelian region, largely correspond to regions where there are concurrent intervention projects addressing food security. Geographic coverage for projects that tackle acute malnutrition is based on acute malnutrition rates in the different zones, and targets zones where rates are either critical (>10%) or alarming (>15%) according to WHO criteria. Acute malnutrition is often associated with times of food crises, to a reduction or a punctual lack of food, and is aggravated during the lean season⁴⁴. For example, the number of children referred to health centers as part of the UNICEF project increased by 45% at the end of the lean season (September 2014), as opposed to the post-harvest period (January 2014).

4.46 Pilot interventions to address chronic malnutrition will be covering the Sahelian and Southern regions. Chronic malnutrition is not strictly associated with the lean season or punctual food crises; it develops following nutritional deficiencies or the adoption of negative food or hygiene practices, and is rather linked to situations where structural poverty is a factor. The WFP plans to target three regions that are particularly affected by this phenomenon: two are in the Sahelian band (Kanem, Wadi Fira), and one is in the Southern band (Logone Occidental).

⁴² Multiple Indicator Cluster Survey (MICS) 2010, the data for pregnant women in fact refers to (low) birth rates.

⁴³ 2009 Census*Malnutrition Rates (MICS 2010). Total number of children ages 0–5 years in 2014: 2,625,771 (or 2,210,829 in 2009 + yearly 3.5 growth rate each year over 5 years); total number of pregnant and lactating women: 524,476 (or 4% of total population, according to Ministry of Public Health estimates); the population growth rate was also applied over 5 years to obtain this figure.

⁴⁴ Behavioral factors are equally critical and aggravate the situation further. For example, according to MICS 2010, only 3% of infants under 6 months benefited from exclusive breastfeeding, while 73% of newborns received water and other nutrients (World Bank, 2015a), both behaviors that often cause malnutrition in infants.

4.47

Table 21 - *Geographic Coverage – Nutrition Recovery Program*

Level	Region	Institution / NGO
Sahelian band	Kanem	WFP / MAM, WFP / MC, UNICEF
	Lac	WFP / MAM, UNICEF
	BeG	WFP / MAM, UNICEF
	Batha	WFP / MAM, UNICEF
	Guera	WFP / MAM, UNICEF
	Sila	WFP / MAM, UNICEF
	Hadjer Lamis	WFP / MAM, UNICEF
	Ouaddai	WFP / MAM, UNICEF
	Wadi Fira	WFP / MAM, WFP / MC, UNICEF
	Ennedi	UNICEF
Southern zone	Salamat	WFP / MAM, UNICEF
	Logone Occidental	WFP / MC
	N'Djamena	UNICEF

Source: Data collected from different partners

Targeting Mechanisms

4.48 **The targeting criteria in Acute Malnutrition Management programs are essentially based on geographic location and by category.** That is, the zones with a higher incidence of malnutrition and the most at-risk groups (i.e., pregnant and lactating women and children 6-59 months). Other targeting criteria are not used in this type of intervention, and the majority of projects target children and women who are already malnourished. The World Food Program is an exception; in its prevention measures against moderate malnutrition, WFP targets all children under the age of 2 in regions where the incidence of malnutrition is high.

Typology, Amount, and Duration of Transfer

4.49 **Acute Malnutrition Management programs consist of transfers in-kind, and generally, nutritional supplements** (Plumpy'Nut, Supercereal, Plumpy'Doz) purchased by international agencies and delivered to health centers. Nutritional supplement quantities and typology are determined by the international agencies according to health care norms and standards on malnutrition.

Table 22 - *Amount and Duration of Nutrition Program Transfers*

	Daily Transfer	Type of Transfer	Duration
Prevention & care for moderate acute malnutrition	1,100 kcal/day for women + 500 kcal/day for children	Supercereal, sugar, oil + household protection ration (cereal + legumes)	3 months
Chronic malnutrition prevention	1,100 kcal/day for women + 247 kcal/day for children	Nutributter or Plumpy'Doz	240 days
Care for acute severe malnutrition	1.5 packets/day, equivalent to 750 kcal	Plumpy'Nut	40-day average max. 8 weeks

Source: Data collected from different partners.

Implementation and Monitoring and Evaluation

4.50 Nutrition recovery projects are set up by different actors, but they generally share a common mechanism connecting them to the national health care system; this includes:

- Malnutrition diagnosis from a community shelter (often an NGO focal point or local association⁴⁵) in regions targeted by programs or from a health center nurse.
- Health care in cases of malnutrition and distribution of food supplements in health centers, namely: (i) WFP ambulatory nutritional supplement centers for the moderately malnourished; (ii) UNICEF ambulatory nutritional recovery centers for severe malnutrition; and (iii) WHO Nutrition Recovery Centers for Severe Acute Malnutrition with Medical Complications.

4.51 All of these activities take place at health centers where assistants provided by project organizers (volunteers paid by WFP) support the health care personnel. Other than medical care, the centers host information sessions on good household, nutrition, and hygiene practices take place during the distribution of food supplements.

4.52 Nutrition recovery projects are often linked to food/voucher distribution projects. When possible, these same communities are targeted by the two interventions for maximum impact and to avoid a dispersion of resources.

4.53 Like food insecurity response programs, nutrition recovery projects do not keep beneficiary records. Follow-up cards are handed to beneficiaries and the centers are vigilant about detecting relapses over a six-month period. Past six months, if a child relapses into malnutrition, he/she is issued a new follow-up card and is accounted for as a new case. Under these conditions, it is difficult to determine if the same children relapse from one year to the next.

4.54 These interventions are not always very efficient. Despite major financial and technical efforts by the international community in coordination with local authorities, malnutrition remains a chronic problem with an incidence rate that varies according to the severity of seasonal food crises, particularly in Sahelian region. Stronger preventive measures and better coordination with other food security programs, or existing social safety nets, could enable households to set up risk-reduction strategies (i.e., behavioral changes regarding child nutrition practices; greater access to health care and other basic health-related services; income stabilization).

5. Review of Social Safety Nets in Education System

Identification

4.55 In Chad, two types of social safety nets support children’s education, and both are covered by in-kind transfer programs.

- ***WFP School Feeding Program.*** This meal program operates in close to 800 primary schools across the Sahelian band, touching about 290,000 children at an annual cost of US\$8.9 million

⁴⁵ Community Health Policy Guidelines are currently being finalized on the roles and responsibilities of community support networks.

in 2014. School meals are distributed to all children attending the targeted schools but girls, who are often underrepresented in schools,⁴⁶ receive a take-home ration in addition to a meal.

- **School Fee Waiver Program.** A number of initiatives finance school fees via the distribution of children’s school supplies, kits, uniforms and books. The programs make access to education easier by alleviating the household costs associated with sending a child to school. Obtaining an overview of all the existing programs is difficult. The school fee waiver program for primary schoolgirls, coordinated by the Ministry of Education’s Department for the Promotion of Girls’ Education (*Direction de la Promotion de la Scolarité des Filles*), is a good example. In 2014, it distributed school supplies to girls in 35 schools. Similar programs exist to help other vulnerable groups (i.e.: the Nomads).

Table 23 - *Primary Education Support Programs*

Education	Budget (US\$)	Beneficiaries
School Feeding Program	8,911,000	292,692
School Fee Waiver Program for Girls	N/A	35 schools

Source: Data collected from different partners.

Coverage versus Needs

4.56 The Education Support Program is broad sweeping but rather asymmetric to needs. The 2009 census (to which a population growth rate of 3.5% was applied) estimated the number of school-age children to be approximately 2.5 million; those living in a poor household⁴⁷ numbered about 1.2 million and, according to ENSA (2013) in 2014, 530,000 children were in a situation of food insecurity. The number of child beneficiaries in the school feeding program (290,000 in 2014) corresponds to about 11% of school-age children (primary), about 60% of school-age children (primary) suffering from food insecurity, and nearly 100% of children in the Sahelian band where the project was implemented. At first glance, the project appears wide-scale with relatively high coverage; however, all schoolchildren in a given school are beneficiaries regardless of whether or not they suffer from food insecurity/poverty meaning, the number of children with food insecurity who are not covered by the program is high despite a significant number of beneficiaries. Due to the scant information available, it is difficult to estimate the coverage rate of school fee waiver programs in relation to the needs of poor households.

⁴⁶ In 2012, Chad primary school registration rates for girls/boys was 0.76, or 10 boys registered in a primary school for less than 8 girls (World Bank, <http://data.worldbank.org/indicator/SE.ENR.PRIM.FM.ZS/countries/TD-ZF-XM?display=graph> / 2012 data).

⁴⁷ Because on average poor households have more children than wealthier households (ECOSIT 2011), this number might be underestimated.

Table 24 - *School-Age Children with Food Insecurity or Living in Poverty*

School-age Children (Primary 6-11 years)	Number
National	2,527,329
Sahelian band ⁴⁸	1,028,739
Suffering from food insecurity – National	530,868
Suffering from food insecurity – Sahelian band	308,621
Living in poverty (global poverty) – National	1,187,844

Source: 2009 Census, National Survey on Food Security 2013, World Bank 2015.

Geographic Coverage

The school feeding program is only operating in the Sahelian band (Kanem, BeG, Batha, Guera, Wadi Fira, Ennedi, Ouaddai, Sila, and North Salamat) for two reasons:

- The Sahelian band has a much lower school attendance rate (varies between 20% and 40% depending on the region)⁴⁹ than southern regions (95% approx. gross registration rate). Projects that promote schooling therefore have a tendency to target areas where school attendance is lower.
- Food-insecurity rates in the Sahelian band are higher. Program objectives are twofold: provide one meal a day and a take-home ration as primary school attendance incentives; and, complete and reinforce the on-going WFP food insecurity response program in the Sahelian region, by distributing food and food supplements.

4.57 Other school attendance support programs alleviate registration fees nationwide. Beneficiaries are selected every year via priority targeting in zones where girls' school attendance rates are lower.

Targeting Methods

4.58 The targeting method of school feeding programs is essentially geographical. It selects schools with:

- Lower school attendance rates, particularly among girls.
- Higher food insecurity rates). The WFP program targets zones that are structurally more vulnerable to food insecurity. It is not a seasonal response to food insecurity for two reasons: (i) the lean season does not usually occur during the school year; and (ii) the selection of beneficiaries occurs early in the school year, before the onset of food insecurity.

4.59 In terms of targeting, the risk of exclusion could occur in poorer households or in ones that do not send their children to school because they cannot afford to pay the school fees. The program is nevertheless incentive-based (as discussed below), and the meal is viewed as a motivational factor in some households.

⁴⁸ Batha, Guera, Hadjer Lamis, Kanem, Lac, Ouaddai, Wadi Fira, BeG, Sila, and Ennedi.

⁴⁹ ECOSIT 2011.³

4.60 **The two programs target girls by category.** With the school feeding program, girls receive additional benefits; whereas in the second program, targeting is category-based. In each of the schools selected, only girls receive support in the form of school supplies and learning materials.

Amount and Duration of Transfer

4.61 **Both types of project provide in-kind assistance, in food or non-food.** If, as for the school feeding program, support is provided throughout the school year, the school fee waiver project often injects punctual support at the start of the school year.

Table 25 - *Amount and Duration of Transfers – Primary School Attendance Support Projects*

Category	Amount of Transfer	Type of Transfer	Duration
School Feeding Program	773 kcal/day (1/3 full ration) + take-home ration (2 L/oil per month) for girls	Food (200 g per day)	160 days/year (duration of school year)
School Fee Waiver Program for Girls	N/A	School kits	Punctual, at start of school year

Source: Data collected from different partners.

4.62 **The school feeding program serves a hot meal to children 160 days per year. Meals are provided in the morning to relieve hunger and maximize concentration.** As an indicator, the monetary value of a child's ration is about US\$0.135 per day,⁵⁰ or nearly US\$22 per year per child. Girls also receive a take-home ration equivalent to about 2 liters of vegetable oil per month, with an approximate monetary value of US\$2 per month or about US\$16 per year (from October to May). As an example, a household with a girl and a boy who are registered in primary school receive an in-kind transfer that can be estimated at roughly US\$60 per year.

4.63 **It is difficult to estimate the monetary worth of the school supplies transfer program,** because the school supplies are distributed to households in the form of a kit. To do so, itemized kit composition and market prices would be required.

Implementation and Monitoring and Evaluation Procedures

4.64 **The school feeding project is solidly backed by institutional support on the Government's behalf.** The National School Feeding Program manages the program, which falls under the Ministry of Education umbrella, and WFP currently provides technical support. Direct involvement of a State agency ensures Government handling of implementation arrangements; WFP is planning to gradually withdraw from all aspects of project management to engender greater Government involvement. At a regional level, start-up arrangements are ensured by regional education offices where personnel are assigned to specific programs. At a local level, a management committee paired with a parents' association supervises operations. Food is currently purchased by WFP from a regional market, then transported and stocked near schools. A feasibility study on the local purchase of these products is currently underway.

⁵⁰ According to the monetary value of WFP vouchers, this is estimated at US\$0.375 per day for a full ration (2,100 kcal), as defined in project document PRRO8200713.

4.65 **As with other previously reviewed projects, the national school feeding program does not keep records of its beneficiaries**, nor do participating households or children have a unique identifier code. However, participants can easily be tracked through the project’s list of beneficiaries.

4.66 **Assessments show the program’s positive impacts on school registration indicators and school performance.** Conclusions from the WFP assessment of its Chad school feeding program indicate that by favoring school attendance, this type of program promotes the development of human capital within each household. In fact, a 2011 assessment in schools where the WFP provided support shows that school attendance increased by 16%. Exam results indicate that 55% of girls and 61% of boys completed their primary education, as compared to national averages of 28% for girls and 47% for boys.⁵¹

4.67 **Further, WFP is trying to promote synergies between the different activities set up in the Sahelian band.** In fact, the food-for-work/vouchers-for-work component could complete the school feeding program by building stock warehouses, kitchens and even school latrines; it could also ensure that certain agricultural practices are promoted (vegetable production for local market) that could eventually increase local crop yields, which in turn could ensure a local supply chain for school feeding.

4.68 **Like the school fee waiver program (distribution of school kits), information regarding start-up arrangements and follow-up assessments for this program appear to be quite fragmented.** Generally, the school kits are purchased directly from donors (UNICEF) then delivered to schools where they are distributed among beneficiaries by partner NGOs.

6. Review of Social Safety nets in the Health System

Identification

4.69 **The Government has set a group of measures facilitating access to health services for the most vulnerable segments of the population, in both urban and rural areas alike.** The main types of interventions are the free program along with others that target either certain groups, or certain precise pathologies:

Table 26 - *Free Health Care Programs*

Health ⁵²	Budget (US\$)	Beneficiaries (Medical Consultations)
Free Health Care	Emergencies: 7,500,000	478,288 (in-hospital medical emergencies)
	Women and Children: 2,500,000	530,000 (health centers) ⁵³

Source: Data collected from different partners.

⁵¹WFP (2015).

⁵² Among response programs for crises listed in the OCHA database, health care projects amount to a total of approx. US\$8 million. Not included in the analysis of social safety nets on food security, these projects favor access to health care services among vulnerable populations affected by crises (often linked to nutrition programs) through the provision of mobile teams, medical kits, and/or medication. These projects essentially support the health care offer rather than the demand and for this reason, they are not included in this analysis on social safety nets.

⁵³ Data on individuals who received treatment in health centers is available in three regions only. At the national level, the total number is estimated based on the average number of consultations in centers from the three regions (average of 457 free

4.70 **Free Health Care Program.** Created in 2007, the free health care program ensures basic health care coverage to any citizen with a medical emergency. The program was later broadened, and now offers free treatment in the following situations:

- Any person requiring emergency health care in a national hospital. Free health care is 100% financed by the State, and coverage includes about 45 common pathologies. In 2014, free care was dispensed in 90 hospitals across the nation (regional, district, and military hospitals). According to the Ministry’s annual report, in 2014, approximately 480,000 free consultations were financed by this program, absorbing about 70% of the global budget allocated to the free health care plan.
- All children ages 0–5 and pregnant women who present themselves at a health center. Introduced in 2012, by 2014 it was financed to a sum of US\$2.5 million. According to preliminary estimates, about 530,000 consultations were offered free of charge to children and pregnant women in 1,160 health centers.

4.71 **Free health care translates into approximately 1 million free consultations.** It is nevertheless impossible to determine the exact number of beneficiaries, because data is collected in terms of consultations and not individuals.

Coverage of Needs

4.72 **Program coverage meets a fraction of the needs.** In terms of needs, these are estimated to be over 6 million individuals, with approximately 1.4 million impoverished children under the age of 5 and expectant mothers unable to pay the consultation fee, who were cared for at a health center or hospitals. In 2014, the program counted 1 million consultations (both program components combined). With only one consultation per individual (which is likely not the case), the program would have reached under 20% of those in need (below the poverty threshold) and, with its sister program for children and pregnant women, currently it only reaches approximately 37% of its targeted beneficiaries.

Table 27 - *Health Sector Needs*

Category	Number
Total Population	13,111,906
Total population beneath poverty threshold (global poverty)	6,162,596
Persons who received free treatments (or consultations, in the absence of a number of beneficiaries)	1,008,288
Coverage rate in relation to population, entire program	8%
Coverage rate in relation to poor individuals, entire program	16%
Pregnant or lactating women + children ages 0–5	3,064,712
Pregnant or lactating women + children ages 0–5 beneath poverty threshold	1,440,414
Women of child-bearing age (15–49 yrs) + children ages 0–5 who benefited from free health care treatments (or consultations, in the absence of a number of beneficiaries)	530,000

consultations per year) multiplied by the number of health centers offering the free treatment plan across the country (1.60). This however is the number of ‘consultations’ and not the number of beneficiaries (i.e., if a person goes to a health center twice, it counts as two consultations).

Coverage rate among all targeted children and pregnant women	17%
Coverage rate among all impoverished children and pregnant women, only	37%

Source: Census (2009) plus population growth rate + World Bank (2015), the percentage of pregnant and lactating women is calculated at 4% of total population (Ministry of Health estimate).

4.73 Parallel to this free national health care program covering medical costs, certain free programs do address pathologies that are specific to vulnerable groups. Also included under this umbrella are: Free Antiretroviral Therapy for Persons Living with HIV/AIDS (PLHA); the Reproductive Health Program that, among other types of coverage, provides free cesarean sections to all women who require one; the Anti-Malaria Program provides free anti-malaria medication to children and pregnant women.

Geographic Coverage

4.74 These free programs are offered nationwide. In 2014, this translated to 90 hospitals (all regional, district, and military hospitals in operation) and 1,160 health centers.⁵⁴

Targeting Mechanisms

4.75 Targeting mechanisms strictly function on a per category basis, with no socioeconomic distinctions; they cover:

- Persons with a medical emergency who present themselves to the nearest hospital. Patients are registered according to their pathology. A list of emergency care is determined by the Ministry and may be readjusted by each center so that regional specificities are taken into consideration (leading emergency pathologies include: acute malaria, trauma, childbirth complications, anemia, and gastroenteritis). A list of medication that can be prescribed to treat these emergencies has also been drawn up.
- Children ages 0–5 and pregnant women at health centers.
- Specific groups (PLHA, pregnant women, etc.) from other specific programs.

4.76 This program’s coverage risks becoming regressive. Because hospital visits are more frequent among wealthier groups, the program (with three-fourths of its budget allocated to hospitals) can become regressive owing to the absence of more advanced targeting mechanisms. In fact, ECOSIT 2011 estimates that beneficiaries from poorer quintiles use secondary and tertiary hospital services five times less and 22 times less respectively than persons from wealthier quintiles.⁵⁵

4.77 Due to budget restrictions, a long-term free health care program should adopt selection criteria that focus on the needier. The budget available to care for children age 5 and under and pregnant women (approx. US\$2.5 million per year) allows less than US\$1 dollar per year per person if it reaches all children age 5 and under and pregnant women. This amount does not cover consultation and medication costs of each beneficiary over a 12-month period. According to Ministry of Health

⁵⁴ On average, a health center treats between 5,000 and 10,000 individuals on a 10 km radius.

⁵⁵ National Strategy on Universal Coverage in Chad (*Stratégie Nationale de la Couverture Universelle du Tchad*), draft, September 2014.

estimates, a budget based on US\$2 per year per person⁵⁶ would be sufficient to cover individual needs. Two options should be considered:

- Maintain targeting by category with no socioeconomic distinctions but considerably increase financing for the free health care treatment program. Feasibility is low because other priority actions require Ministry of Health investments (improvements on health care services).
- Introduce targeting mechanisms that include household income and offer free health care only to poor households.

4.78 The Government is seeking to improve targeting methods though new mechanisms have yet to be defined. A draft of the National Strategy for Universal Coverage acknowledges the need to gradually take into consideration household socioeconomic status in its free programs. Mechanisms that would help targeting move forward have not yet been accurately defined. According to the draft, targeting in poorer populations is a complicated task and the State administration simply does not have the required capacity. Added to this is the fact that targeting methods based on socioeconomic status are often deemed discriminatory by the State administration and/or of little help in Chad, where medical expenses are often handled by the wealthier members of the extended household/acquaintances, rather than by the household itself. Further consideration will be required to better understand which targeting strategy should be adopted for the free health care program, and how to implement it. Also of note is that in the long term, according to the National Strategy, these assistance methods will need to be replaced by insurance mechanisms.⁵⁷ Long term, the Strategy suggests the State should assume all or part of the health care insurance costs for its poor populations, rather than subsidize their medical care through a free program. Regardless of the plan, the problem of identifying the poor will nevertheless persist.

Amount and Duration of Transfer

4.79 Household assistance provided through free health care. This includes waivers for consultations as well as on medication costs. ECOSIT 2011 estimates that on average, a poor household spends nearly 3.2% of its annual expenditures on health care costs, or an average of 2,900 CFAF per person (about US\$6 per individual, per year); a non-poor household spends four times more (11,000 CFAF per individual, per year). In a poor household with one woman and two child beneficiaries, these exemptions translate into savings representing approximately US\$18 per year, based on the current number of visits to health facilities which might very well increase, owing to the free health care program.

4.80 Hospitals and health centers receive an annual subsidy to purchase medication which is distributed by the free health care program:

- In hospitals, the amount ranges from 13 to 60 million CFAF per year (or from US\$26,000 to US\$120,000 per year) depending on the size of the population which is served by the hospital in question;

⁵⁶ This estimate diverges from ECOSIT data, which estimates that each poor individual spends an average of US\$6 per year on health care.

⁵⁷ Pilot health mutuals have now been implanted in southern Chad; these mechanisms may be standardized and set up nationwide. At this time, the Government is proceeding with a feasibility study.

- In health centers, the grant is equivalent to about 1 million CFAF bi-annually (US\$2, 000 bi-annually/US\$4,000 annually). This amount covers the target population’s global needs. In relation to actual needs, this figure seems low. When medication stocks purchased by health centers with the monies received from the free health care program run out, beneficiaries must pay for their medication regardless of whether or not they are entitled to free health care and/or free medication.

Implementation and Monitoring and Evaluation Procedures

4.81 **The program is entirely dispensed by the Ministry of Health and administered by the Free Health Care Unit.** If a beneficiary’s status meets eligibility criteria, this person can go to a hospital or health center and, according to medication availability, receive her/his prescription free of charge. There is no beneficiary card, but users are identified when they present their health booklet, which can be purchased at any health center for 100 CFAF.

4.82 **The current system of monitoring and evaluation is inefficient,** as the Ministry of Health concedes. Only 80% of monthly hospital reports are drawn up and returned to the program’s management unit. Until 2104, health centers were not required to submit periodic reports. It was only 2015 that these reports became mandatory. An emergency care assessment conducted in 2012 (Coulibaly 2012⁵⁸) concluded that the program probably contributed to increase emergency service usage; for example, emergency obstetrics consultations increased tenfold between 2007 and 2010. The assessment also concludes that the program caused an increase in hospital deficits, since the subsidies received were not sufficient to compensate for the demand increase, and loss of revenue. An assessment of the free health care program for children and pregnant women has not yet been conducted.

4.83 **The program has several weak points that reduce its effectiveness.** (i) The Ministry acknowledges certain cases of free treatment do not meet its eligibility criteria and exclusion occurs among those who are eligible (especially when medication shortages occur in hospitals and health centers); no mechanism is in place to assess if targeting is efficient. (ii) There is little information being distributed, and the population does not properly understand the scope of free health care or its beneficiary eligibility criteria; neither awareness campaign to inform populations of their rights nor a formal complaint mechanism to report system abuse or exclusions has been instituted; (iii) health centers are often not able to meet demand, only 51% of health centers have the capacity to provide basic service packets, while others are short of supplies or personnel; (iv) it is difficult for households to access health centers, over 30% live over two hours away from the nearest facility (ECOSIT 2011). Significant investments to improve health care services are therefore a precondition to an exemption program becoming cost-efficient.

7. Review of social assistance projects and others development programs promoting social protection for vulnerable groups

Social Assistance

4.84 **Given the difficulties associated with obtaining an overview of the different social assistance mechanisms targeting vulnerable groups nationwide, this analysis focuses on a limited**

⁵⁸ World Bank (2015a).

number of projects. A multitude of projects favoring vulnerable groups have been undertaken by NGOs as well as by local associative agencies. This analysis, not exhaustive, identified three initiatives representing three different social assistance approaches. At that, the available information is quite fragmented.

Table 28 - *Social Assistance Projects for Vulnerable Groups*

Social Assistance	Budget (US\$)	Beneficiaries	Source of Financing
Social assistance projects for vulnerable groups (MINAS)	US\$5,000,000	Widows: approx. 3,000 Other vulnerable groups: N/A	Government
Support Project for Orphans and Vulnerable Children (OVC) (MINAS/UNICEF)	US\$500,000 (Education + HIV programs not included)	9,000	DP (UNICEF)
Support Project for Paternal Orphans	N/A	1,300 paternal orphans	Islamic assistance (Red Crescent Society of the UAE + private donor)

Source: Data collected from different partners.

4.85 **Assistance to vulnerable groups.** The Ministry of Social Action and National Solidarity (MINAS) finances a series of support initiatives for vulnerable groups on an annual basis. Although the Ministry's budget for these programs rose to about US\$5 million in 2014,⁵⁹ the program's budget was reduced in 2015 to about US\$3.5 million. The different projects also have support partners (e.g., Handicap International, UNICEF, NGOs, etc.), but they often provide assistance in-kind, making it difficult to keep records. The interventions offer direct assistance to vulnerable groups and facilitate their socioeconomic reintegration. These programs are very often directed towards persons with physical disabilities, vulnerable women, widows, and the injured. The number of beneficiaries is not available, but the MINAS is currently working on consolidating this data (budgets, number of beneficiaries, etc.).

4.86 **Assistance program for OVC.** Financed by UNICEF (in turn financed by the Global Fund) and administered by MINAS, the OVC project reaches approximately 10,000 children annually across 23 regions. Its budget is approximately US\$1 million over two years (June 2013–15). Acting through its regional agencies and in collaboration with NGOs in certain regions (e.g., CRS in Tandjile region), MINAS is the principal actor in this project. Identification of child beneficiaries and list management tasks are handled by MINAS according to eligibility criteria elaborated with UNICEF (i.e., orphans, children living with AIDS, physically disabled, or child heads of household). Currently, the project is financing school fees for children identified as vulnerable (orphans, and particularly AIDS orphans) by providing school supplies, uniforms, and registration fees. This assistance should be included with other items in the packet offering basic social assistance services to orphans and vulnerable children, which MINAS is now putting together with the support of UNICEF. The support packet should also include

⁵⁹ To this is added National Solidarity Fund representing nearly US\$5 million; this amount is not posted here because in 2014, it was redirected in its entirety towards emergency assistance for returnees from Central Africa.

food, health, and legal assistance. Given that a minimum packet has yet to be defined or approved and funding shortfalls, only the school program is being offered.

4.87 **Support project for paternal orphans.** This project is financed with donations from the international Islamic community (Red Crescent of the UAE and private donors). About 1,300 children benefit from this support, and 1,700 others are on a waiting list. Households receive approximately US\$25 per month to support a child who is regularly attending school. As well, households receive timely food supplies (and occasionally clothing), more notably on the occasion of Islamic feasts.

4.88 **An overview of these three projects and their main elements are compiled in Table 29.**

Table 29 - *Characteristics of Main Assistance Projects That Were Identified*

Social Assistance	Type of Transfer	Amount	Target	Coverage
Assistance Projects for Vulnerable Groups (MINAS)	In-kind (mostly production tools)	N/A	By category: widows, the disabled or injured...	National
Support Project for Orphans and Vulnerable Children (MINAS / UNICEF)	Education assistance, payment of school fees. Food and health care should be included in the project, but funding is lacking.	N/A	By category: orphans (particularly ones from HIV/AIDS)	National
Support Project for Paternal Orphans	Money		By category: paternal orphans	N'Djamena

Source: Data collected from different partners.

Community Development

4.89 **This subsection presents projects that are not social safety nets in the strict sense, but due to their implementation approach, they appear relevant to this social safety net analysis.** Community development and/or basic development projects involve communities in the identification, planning, and implementation phases. They are part of the social safety nets tools that are apt to favor the more vulnerable layers of society. This also includes interventions that may complete or reinforce some aspects of existing social safety nets. The differences with social safety nets are: (i) these projects do not target individuals but rather all the members of a community and/or local association; (ii) they do not necessarily provide social assistance to vulnerable groups, but often offer support to local economic development, productivity, and improved access to basic services; and (iii) they do not act in response to a specific demand like social safety nets (with direct assistance to households) but rather by supporting the offer; for instance, by building schools or health centers that complement the safety net response (e.g., school fee waivers and feeding).

4.90 **Two major community-driven development projects were reviewed, the Local Development Support Program (PADL) and the Local Development Support Project (PROADEL).** These two projects support community planning and needs prioritization at a local level. The difference between the two projects is that while the former (PADL) addresses community assistance initiatives to boost productivity and economic development, the latter (PROADEL) proposes to improve access to infrastructures and basic social services in the different departments.

Table 30 - *Leading Community Driven Development Programs*

Project	Budget (US\$ million)	Duration of Implementation	Financing	Geographic Coverage
PADL	US\$48	2012–2018	European Union	PADL Natural Resources Management (GRN): Southern zone LDSP East: eastern regions of Sahelian Band
PROADEL	US\$25	2011–2015	World Bank	National Coverage

Source: Data collected from different partners.

4.91 **Local Development Support Program (Le Programme d'Appui au Développement Local, PADL)** is financed by the EU, with a total budget of US\$48 million over five years. As well, Natural Resource Management covers both the Southern band (US\$32 million) and the Sahelian band's eastern sector (US\$16 million). The main objective is to finance structuring initiatives that have been identified by the community, in collaboration with civil society organizations, to improve food security, better-manage natural resources, and reinforce the basic capacities of local actors. The project helps communities create a local development plan concept and provides support for certain of its pre-determined priority actions. The project intends to finance 80 large multi-sector subprojects (to a maximum of US\$600,000) and 175 micro-projects. Activities that receive financing are generally local production capacity reinforcement projects, ones that improve group agricultural yields via the addition of equipment or inputs, training, advisory consultants, as well as activities to build cereal and livestock banks. Infrastructures can also be financed as part of a project if they contribute to improve food security in the communities they serve (e.g., fertilizer thresholds, hydro agricultural facilities).

4.92 **Local Development Support Project (Le Project d'Appui au Développement Local, PROADEL)**, financed by the World Bank, is currently in its closing phase. The Bank allocated a US\$25 million dollar budget to this project, while the Government had agreed to cofinance US\$50 million. The Government's share was difficult to mobilize and delivered late; weak internal management paired with governance issues forced the project into early closure. The PROADEL project was different because it did not finance income-generating activities. The 120 subprojects that were financed mainly concerned community infrastructures such as schools, wells, and health centers. The objective was to strengthen basic infrastructures and facilitate access to essential social services, particularly education and health care.

Implementation Mechanisms

4.93 **The implementation mechanisms of the two projects were similar although tied to different Ministries.** PADL is tied to the Ministry of Planning, Economy and International Cooperation while PROADEL was placed under the stewardship of the Ministry of Land Development. Both are run by management units that liaise with their respective ministries and work in partnership with local and regional service providers (e.g., NGOs, associations) to identify priority needs within the communities and implement projects at a local level. With the support of local service providers, the communities draw up a local development plan and identify priority actions, which are then submitted for financing. The Regional Action Committee and the Departmental Action Committee, which are agencies comprised of decentralized State offices, validate all subprojects submitted by communities, depending on whether or not they fit in with regional or departmental development priorities.

Labor Intensive Public Works Approach to Various Sectorial Projects

4.94 **This section examines a variety of projects (hydroagricultural facilities, opening up access to remote areas, urban sanitation, rural development) that were not devised to be social safety nets but that depend on labor intensive public works (LIPW).** These are sectoral interventions associated with agriculture, transportation, and sanitation, and financed both by development partners and with national funding. LIPW projects, well-structured with well-defined parameters regarding duration of work, adequate amounts attributed to transfers/salary, targeting policies, etc., can act as an important pillar to the National Social Protection Strategy. At a national level, analyzing this approach seems in fact quite relevant for implementing sectoral interventions, while high-intensity labor works projects could eventually be tied in with other social safety net programs. Information about these projects is relatively incomplete, given that job creation remains a secondary objective, and no data is currently available on the number of persons working on LIPW projects, wage rates, or duration of employment.

Table 31 - *Programs Using High-Intensity Labor Works Approach*

Project	Budget	Beneficiaries	Geographic Coverage	Financing
N'Djamena Nadif	5,000,000 including 1,100,000/salaries	600	N'Djamena	Commune & mayors' budget
<i>PRESIBALT</i> (Rehabilitation and Reinforcement of Resilience of Lake Chad Basin)	<i>N/A</i>	<i>N/A</i>	<i>Lac</i>	<i>DP (BAD)</i>
PARSAT (Chad Agricultural Systems Enhancement Project)	<i>N/A</i>	<i>N/A</i>	Guera, Batha South	DPS (IFAD)

Source: Data collected from different partners.

4.95 **City of N'Djamena Urban Sanitation Project** (N'Djamena Nadif). In 2010, the City of N'Djamena embarked on a sanitation project based on a well-structured LIPW approach. Close to 600 persons (80% women) with no qualifications were recruited from 10 communes by the N'Djamena Town Hall Administrative Offices to work on the city project. Hiring targeted the needier, according to an applicant's household and personal status. The schedule is based on a six-day work week, with 6-12 hours of work per day; the salary is 60,000 CFAF per month (approx. US\$120 or US\$5 per day) or

equivalent to minimum wage in Chad. The project runs year-round, over 12 consecutive months, and agreements are renewable every year. Beneficiaries are also entitled to paid maternity leave. Payments are monthly in cash, at the City Administrative Offices.

4.96 Rehabilitation and Reinforcement of the Resilience of Lake Chad Basin (*Programme de Réhabilitation et Renforcement de la Résilience du Bassin du Lac Tchad, PRESIBALT*). Financed by the African Development Bank (AfDB), this regional project's general objective is to restore the ecosystem's reproductive capacities and reinforce the resilience of the populations living around the lake. Component 3 (or Phase 3) aims to improve population resiliency as well as human and social dimensions; the project also finances LIPW sites around the growing season.

4.97 Chad Agricultural Systems Resiliency Enhancement Project (PARSAT). Financed by the International Fund for Agricultural Development (IFAD), the objective of this project is to improve the resilience of agricultural systems in times of climatic change. Improvements hinge on the following: (i) securing crops from the effects of climate change by improving mobilization and farmland water management; (ii) boosting crop yields by improving growing techniques and using more suitable seed varieties; (iii) improving stock capacity and creating overstock to cover the lean season; and (iv) diversifying profitable economic activities during the off-season and improving access to markets. Both Component 1 and Component 2 of the project plan to adopt a LIPW approach to implement hydro-agricultural facilities and connect production zones together; these activities will mostly take place during the off-season, generating incomes in more vulnerable households.

8. Summary of Social Safety Net Budgets and Beneficiaries

Overview

4.98 In 2014, approximately US\$109 million were invested in different types of social safety nets in Chad, but the number of beneficiaries is difficult to estimate with accuracy. If the number of beneficiaries from the different social safety nets under review here were added up, results could produce overestimations (nearly 3 million people, or over 20% of Chad's population); most likely, some programs overlap and in a given year, certain households are covered by a number of initiatives. In several cases, information regarding the number of beneficiaries is approximate and unverifiable (especially fee waivers programs where the number of consultations dispensed is a known factor but not the number of beneficiaries; and price subsidy programs that alone count over 1 million beneficiaries). At first glance, the amount allocated might seem relatively high since it corresponds to 0.8% of the national GDP, which is slightly lower than the West African low-income country average (1.1%) but higher than many West African countries.⁶⁰ For comparative purposes, the World Bank (2015) estimates that in 2011, a daily transfer representing US\$0.10 to each poor household for food and US\$0.27 to every poor person in Chad would have eradicated both general poverty and food poverty alike. Therefore, given the population size and the incidence of poverty, it would take US\$106 million per year to eliminate food poverty and US\$286 million per year in the fight against global poverty. The US\$109 million invested in social safety nets would in fact appear to be in line with Bank estimates regarding the eradication of food poverty. Several factors must nevertheless be taken into

⁶⁰ In fact, Benin, Mali, Togo, Cameroon, and Burkina Faso have expenditures representing 0.2%-0.6% of GDP, according to the World Bank (2015).

consideration that somewhat add nuance these findings: (i) the estimated US\$106 million to eradicate food poverty does not include logistics and administrative costs associated with program implementations (in a country as vast as Chad, such costs tend to be high); (ii) the number of beneficiaries in certain initiatives is difficult to verify and probably overestimated; (iii) it is impossible to validate if programs overlap or arrive at a real number of beneficiaries; and (iv) certain targeting mechanisms present a high risk of inclusion of non-poor households (as discussed at length, later), meaning that an important share of these resources is invested in projects that could benefit the less needy.

4.99 **Emergency response in crisis situations is the primary objective of social safety nets.** As shown in Table 32 and Figure 53 below, the objectives of Chad’s social safety nets are: (i) provide emergency response in a crisis situations (78% of total budget); (ii) facilitate access to basic social services for poor households (17% of total budget); and (iii) provide assistance to specific vulnerable groups (OVC, the disabled, other vulnerable groups, etc.: 5% of total budget). Not one social safety net has, as a specific objective, to act as a predictable assistance mechanism for household consumption, or the long-term reduction of household poverty. Some parallel initiatives, accounted for separately in the table that follows (i.e., basic development projects like PADL, PROADEL, and PTSA), make long-term commitments and try to serve as poverty-reduction tools. These are not in fact social safety nets in the proper sense of the term, but rather community-based development mechanisms that on the one hand, facilitate access to basic social services by building socioeconomic infrastructures (supporting the offer instead of the demand), and on the other hand, increasing community resilience by financing income-generating activities or the implementation of community-based risk management tools (e.g., cereal banks).

Table 32 - *Social Safety Nets and Other Social Protection Mechanisms by Main Objective, 2014*

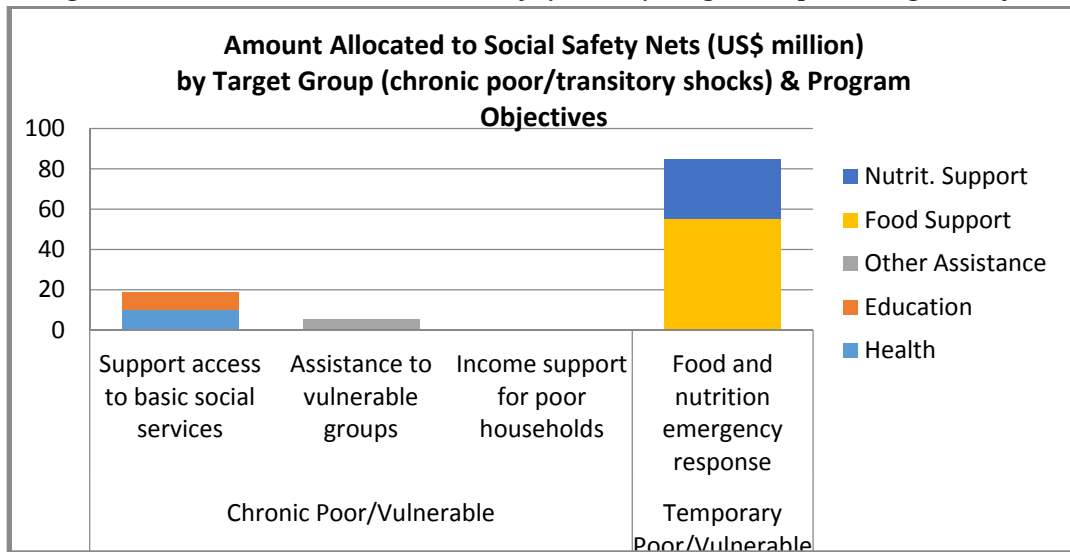
	Budget	Source of Financing		Beneficiaries
		Provider	Government	
<i>Crisis Response</i>				
Food Security	55,281,191	42,281,191	13,000,000	1,122,986
Nutrition	29,523,541	29,523,541		468,211
<i>Facilitate Access to Basic Social Services among the Poor</i>				
Education	8,911,000	8,911,000		292,692
Health care	10,000,000		10,000,000	1,008,288
<i>Assistance to Specific Vulnerable Groups (orphans, widows, the disabled, etc...)</i>				
Social Assistance	5,500,000	500,000	5,000,000	N/A
Total Social Safety Nets	109,215,732	81,215,732	28,000,000	N/A
<i>Local / Community Development Programs</i>				
PADL, PROADEL ⁶¹	13,000,000	13,000,000		
Total Social Assistance (Safety Nets + Social Safety at Community Level)	122,215,732	94,215,732	28,000,000	

Source: Author's calculations based on data collected from different partners.

4.100 **In Chad, safety nets are largely used for a short-term response to shocks rather than as a redistribution mechanisms or mechanisms in the fight against poverty.** Priority targets include vulnerable households that are suffering from a transitory shock (seasonal, in this case) rather than households facing chronic poverty. Assistance mechanisms for households facing chronic poverty only constitute approximately 20% of the total budget; they provide these households with better access to basic social services (education and health care) or come to the assistance of specific vulnerable groups (e.g., orphans, the disabled, other vulnerable groups).

⁶¹ Budget estimates for one year (total budget /duration of implementation).

Figure 53 - Amount Allocated to Social Safety Nets, by Target Group and Program Objective



Source: Author’s calculations based on data collected from different partners.

Typology of Social Safety Nets

4.101 **Cash transfers are increasingly more widely used, but in-kind assistance is still largely relied on as well.** In-kind assistance is widely used (about 40% of total budget), but this number includes the distribution of food supplements (65%) by nutrition assistance programs and those that fight against malnutrition. When seasonal support is provided to households suffering from food insecurity, food distribution has almost always been replaced by cash transfers (voucher/cash), which reached more than a half-million individuals in 2014. Government social safety nets essentially consist of indirect transfers in the form of fee waivers or price subsidies (US\$23 million per year, or 80% of the Government budget), rather than direct transfers in cash or in-kind.

4.102 **The cost base for cash transfer programs remains lower than the one for in-kind transfers.** The ratio between the total budget allocated to each type of program and the number of beneficiaries can provide an estimated price per unit. This is only a generic form of estimate, given that each category of subproject includes extremely varied initiatives with different costs. It is not surprising to note that in-kind assistance has a much higher cost per beneficiary than cash transfer programs in cash or voucher (see Table 33). The cost-base on fee waiver and subsidy programs is very low but: (i) the number of beneficiaries is probably overestimated, and therefore the cost base has been underestimated; (ii) the amount of benefits allocated is lower than other programs (see discussion that follows); and (iii) the two programs presented here have very different price-per-unit base costs (US\$8.5 for fee waivers, and US\$56 for price subsidies).

Table 33 - *Main Safety Nets and Other Social Security Mechanisms, by Project Type*

Project Typology	Budget (US\$)	Number of Beneficiaries	Cost per Unit (budget/beneficiary) (US\$)
Social Safety Nets			
Cash transfers (cash or vouchers)	20,750,743	566,824	36.6
In-kind Distribution (food, nutritional supplements, inputs, school kits)	45,585,543	694,693	65.6
Food-for-Work or Vouchers-for-Work ⁶²	3,468,446	99,680 (indirect jobs + 19,000 direct jobs)	35 ⁶³
School feeding	8,911,000	292,692 (children)	30.5
Fee waivers & Price Subsidies	23,000,000	1,410,000	16.3
Other Assistance	5,500,000	N/A	
Local Development/ Basic Development Projects	18,000,000	N/A	

Source: Author's calculations based on data collected from different partners.

Financing

4.103 **Most safety nets are financed by development partners (74%), and only 26% of the 2014 total safety net budget was Government-financed, which is a common occurrence among other low-income countries in Africa.**⁶⁴ Government funding remains relatively stable; amounts may vary from year to year according to budget availability but on the whole, the main assistance programs for vulnerable groups (health care fee waivers, food price subsidies, assistance to the vulnerable, *Fonds de solidarité nationale*) are redirected to the next year. Funding from DPs is, by nature, unstable.

4.104 **DPs mostly mobilize emergency funding to finance social safety nets.** In Chad, 90% of DPs funding destined to finance social safety nets is humanitarian-based, and collected annually to meet actual crises response needs, as determined by the Government and the international community. Development funds (funds allocated to set up long-term projects, normally over several years) destined to cover social safety nets are limited, whereas this type of financing is directed towards other types of protection and promotion mechanisms for vulnerable communities (PROADEL, PADL, PTSA).

4.105 **Chad's current social safety net system is therefore almost 70% financed by humanitarian funds, which evidently creates several major issues:**

- Humanitarian funds can fluctuate, and the amount allocated to each country is not known in advance.

⁶² Only WFP projects are posted here. Projects with a non-contributory cash transfer program (e.g., CRS) are posted in the Cash transfer Section because it is difficult to obtain separate budget estimates from these subcategories.

⁶³ US\$35 per person if counting indirect beneficiaries (workers and members of their household). When only direct beneficiaries are counted, the base cost (unit) is US\$182.

⁶⁴ On average, 27.5% of social safety net expenditures are financed by TFPs, and 72.5% are Government funded in low income countries across Africa (World Bank, 2015).

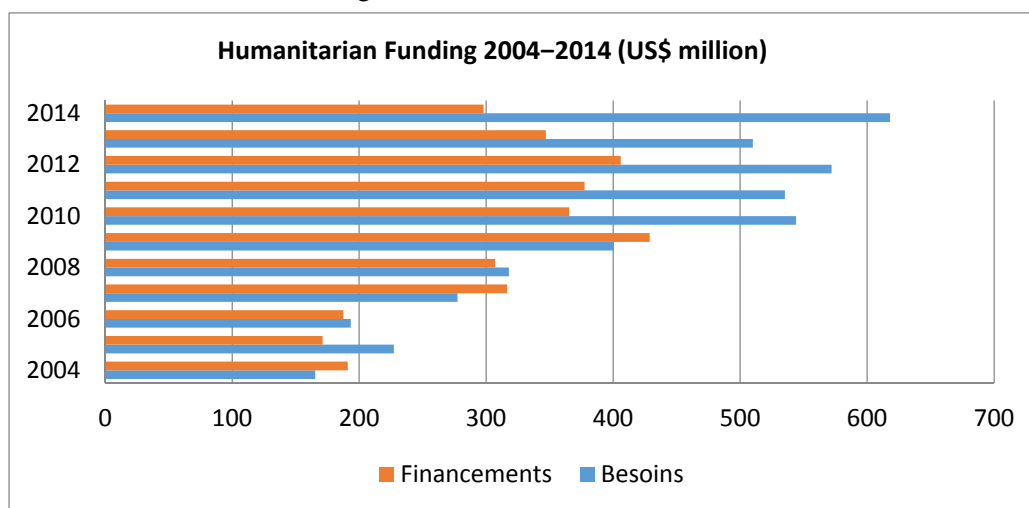
- It is difficult to establish stable and reliable social safety nets when a program depends on a fickle funding source (if, in 2013, the funds allocated covered about 70% of known needs, in 2014 this percentage plummeted to 40% (see Box 17).

Box 17: Overview of Humanitarian Expenditures in Chad

A country in the Sahelian band, Chad is subject to food insecurity and yet is a land of welcome to a significant numbers of refugees from neighboring countries. To meet certain recurring crises, it relies heavily on a humanitarian funding. In the past 10 years, Chad has received an average of US\$310 million per year to meet different humanitarian emergencies.

In 2014, the Strategic Response Plan (SRP) estimated financing needs to be about of US\$618 million, or less than half the estimated needs (US\$298 million) for: (i) a high number of returnees and refugees (close to 500,000) from Sudan, Central African Republic, and Nigeria; and (ii) a high incidence of food insecurity that affects local populations in the Sahelian band.

In recent years, a downward trend has been noted in humanitarian aid. The following graph shows that if humanitarian needs have increased in recent years, financing has steadily dropped, particularly in the last three years. In 2012, 2013, and 2014, it covered 71%, 68%, and 48% of needs. This downward trend is primarily due to: (i) the presence of prolonged humanitarian crises (i.e., the Darfour crisis) which, secures emergency humanitarian aid with increasing difficulty; and (ii) needs in other countries and regions of the world where a considerable portion of available humanitarian aid is being redirected.



Note: This reduction in humanitarian funds has direct implications on social safety net financing serving local populations (in-kind or cash transfers) who depend on them. When humanitarian funding ranges below the needs that are expressed, the strategy among certain humanitarian organizations is to favor aid to displaced populations who are considered particularly vulnerable, by reducing the humanitarian response to shocks among local populations.

Source: <http://fts.unocha.org>.

In 2014, about 63% of humanitarian aid targeted displaced populations and about 37% served to finance shock response projects among local populations. Of the US\$298 million, about US\$187 million therefore provided assistance to the displaced and about US\$111 million went to assist Chadian populations. This figure includes direct assistance to populations and logistics costs (e.g., aviation costs associated with delivering humanitarian aid). The largest portion of humanitarian aid was directed to food security and/or nutritional supplement projects among local populations (US\$74 million to nutrition and food security projects), while the vast portion was used for emergency social safety nets.

- By nature, these funds, which are usually available before the lean season, can serve to finance emergency responses; yet, they have trouble financing social safety nets in the fight against poverty, which help stabilize household incomes year-round.

4.106 **The challenge will be in adopting this form of financing, which is unpredictable and short-term, to maximize synergies with other more long-term programs and arrive at a better-structured response.** In fact, and in spite of all these drawbacks, humanitarian funds are currently the main source of financing for reducing household vulnerability and shock impacts. To implement adequate, predictable, and prevention-oriented short- and mid-term responses to household vulnerability, resources allocated by the Government and DPs will likely be incapable of matching the amount derived from humanitarian funds. A social safety net system that manages the negative impacts of shocks will therefore be primarily financed by external funds.

4.107 **Furthermore, Government and development funds (stable sources of long-term financing) put forward by development partners will contribute towards the implementation of a predictable and sustainable social safety net system that stabilizes household incomes, reduces their vulnerability, and reinforces their resilience.** This type of system cannot be implemented with humanitarian funds.

Coverage versus Needs

4.108 **If emergency program coverage seems relatively high, other programs generally have lower coverage rates.** To obtain an accurate coverage rate, factors like program overlap would need to be taken into account, which is not possible due to a lack of information. Social safety net coverage varies between programs but generally speaking:

- Emergency response programs addressing food insecurity and nutrition shock have a relatively high coverage rate (between 59% for the nutrition recovery program and 100% of food insecurity target population). Given how some programs may overlap and the number of beneficiaries is difficult to determine in the absence of records, a nuanced view should be taken.
- The chronic malnutrition program (addressing a long-term structural phenomenon, contrary to emergency response programs) has very limited coverage, equivalent to 4% of its target population.
- The coverage rates of programs that promote access to basic social services for impoverished populations (according to the general poverty threshold) are middling, reaching 30% to 40% of their target group.⁶⁵
- No social safety nets have been identified that offer sustainable, long-term support to impoverished households, or ones that address chronic poverty.

⁶⁵ The school feeding program covers 25% of impoverished school-age children (primary) and 11% of all school-age children (primary). Numbers are within other African country averages, where coverage rates are sometimes low, such as Togo, Tanzania, and Cameroon which post 5% to 7% rates; Malawi, Sierra Leone, and Zambia all post 20% coverage rates (World Bank, 2015).

Table 34 - *Coverage Rates of Different Social Safety Nets in Relation to Actual Needs, 2014*

Social Safety Net Objective	Target Population	Needs (2014)	Coverage (2014)	Programs
Stabilize/support needs of poorer households	Number of poor (general poverty)	6,162,596	N/A	No existing safety nets specifically address poverty reduction PADL/PROADEL/PTSA
	Number of poor (extreme poverty)	3,802,452	N/A	
Promote access to basic social services among the destitute and vulnerable	Pregnant/lactating women and children <5 years suffering from general poverty	1,440,414	530,000 (37%)	Free health care program (children & pregnant women)
	School-age children (primary 6-11) suffering from poverty (general)	1,187,844	292,000 (25%)	School feeding & school fee waiver programs
Ensure food security & survival in households affected by food crisis (food security & nutrition)	Number of persons suffering from food insecurity (moderate & severe)	2,000,000	1,122,986 (56%)	Food distribution, cash transfer, and price subsidy programs
	Number of person requiring food assistance during lean season	900,000	1,122,986 (124%)	Food distribution, cash transfer, and price subsidy programs
	Malnourished children (acute malnutrition)	516,616	305,272 (59 %)	Food supplement distribution programs in the fight against acute & chronic malnutrition
	Malnourished children (chronic malnutrition)	1,016,174	40,000 (4 %)	
Assistance to vulnerable groups	Orphans	699,444 (or 9.6% of children 0-17 years)	11,000 (1.5%)	UNICEF and Islamic assistance programs
	Persons living with a disability	1,300,000 (est.10% of population)	N/A	Social assistance financed by ASAHSN Ministry
	The elderly (>65 years)	582,611	N/A	

Source: Author's calculations based on data collected from different partners. (Data from 2009 census used to calculate needs and updated based on a 3.5% population growth rate).

Targeting Mechanisms

4.109 **Some programs have relatively accurate selection criteria to determine target groups, whereas others use targeting tools that do not always reach the poorest or most vulnerable households; consequently, the latter risk including relatively wealthy households** (see Table 35). Although targeting assessments do indicate how many poor and non-poor households have been covered by different programs, these assessments are not available; items appearing in the table are solely based on an assessment of the relevance of the proposed method, and not on targeting results.

Table 35 - *Accuracy of Targeting Mechanisms in Identifying Key Groups*

Social Safety Net Objective	Programs	Target	Accuracy at Targeting the Neediest	Most Appropriate Targeting Tool
Promote Access to Basic Social Services among Destitute and Vulnerable Groups	Free health care program (children + pregnant women)	By category; no criteria based on socioeconomic status.	Low-Average Program coverage risks being regressive because wealthiest households often visit hospitals and health centers more often. The number of persons assisted is already well below the number of poor (16%); the inclusion of non-poor risks excluding priority target group.	By category (by making a priority of vulnerable groups like women & children), as well as targeting based on unbiased poverty criteria, when budget does not permit full-scale coverage.
	School feeding program + school fee waiver program	Geographic & by category	Average Geographic targeting that reaches needier zones; targeting girls is also relevant because of discrimination against women. Within one given school, these programs make no distinction between the children's socioeconomic status. Such targeting could in fact incite discrimination between students, which should be avoided. Inevitably, some children from non-poor households will be included.	No changes to current mechanism. If in-school targeting could lead to a more homogeneous target group, it could also give rise to potential discrimination among children; this would be difficult to accept, particularly in villages where inequality is practically non-existent.
Ensure Food Security and Survival of Households Affected by Food Shock	Food distribution and cash transfer programs	Geographic, associated with targeting more vulnerable households via HEA (or selection by community)	Average- High Both types of targeting (geographic + individual) identify neediest households. The HEA method minimizes the risk of inclusion of less needy households, and enables households suffering from seasonal deficits to be identified.	Because these are food insecurity response projects, the current mechanisms are still very relevant: Geographic + HEA (or other method based on objective food insecurity criteria).
	Price subsidy program	Geographic + self-targeting	Low-Average This program risks having a regressive effect. As households gain purchasing power, they also gain greater access to subsidized sales prices.	As a mechanism to seasonal crises, it could align itself with other food insecurity programs: Geographic + HEA (or other method based on unbiased food insecurity criteria).

	Food supplement distribution programs in fight against acute malnutrition	Geographic + by category	Average-High Zones with highest malnutrition rates and number of malnourished children receive assistance. This method correctly identifies target group.	Because this is a malnutrition response project, no changes to report on current mechanisms: Geographic + by category.
Assistance to Vulnerable Groups	Assistance programs for orphans and other programs supported by the Ministry of Social Affairs	By category	Average-High These assistance projects target easy-to-identify groups who require a specific type of support. Targeting by category is the most relevant method for this type of intervention.	By category, if resources were to become limited for these specific groups, an eventual prioritization policy based on socioeconomic factors could become necessary.

Geographic Coverage

4.110 **The Sahelian band is more largely covered by social safety nets.** In fact, approximately 80% of Chad's social safety net budget finances response mechanisms to food and nutrition crises in the Sahelian band, by far the most affected by these two types of shock. Crises response projects are numerous, with a few exceptions for nutrition recovery programs (Salamat and Logone). Holding true to the objective of increasing access to basic social services, the school feeding program also only targets the Sahelian band which is heavily penalized in terms of school attendance among children. In regards to social safety nets, the Southern band is only covered by the free health care program and some assistance initiatives focused on vulnerable groups.

4.111 **The Southern band is largely covered by local development programs like PADL and PROADEL.** In terms of coverage, urban areas are almost deprived of social safety net programs or basic development programs. Beyond free health care and assistance programs for smaller vulnerable groups, no projects target poor households living in urban areas. This is due to poverty being more widespread in rural areas, with eight times more impoverished persons (living on or under US\$2 a day) than in urban areas. However, given Chad's growing trend towards urbanization (its urban population should triple by 2030), the social safety net system should as well be capable of meeting the ever-increasing needs of cities across the country.

Table 36 - *Geographic Coverage of Social Safety Nets and Community Development Programs, 2014*

Rural Area				
<i>Crisis Response</i>				
Food Relief	x			x
Nutritional Assistance	x	x		x
<i>Facilitate Access to Basic Social Services Among the Poor</i>				
Free Health care Program	x	x	x	x
School Feeding	x			x
<i>Assistance to Specific Vulnerable Groups (Orphans, Widows, the Disabled, etc...)</i>				
Social Assistance	x	x	x	x
<i>Local/Community Development Projects & Strengthening Community Resilience</i>				
Community Development Programs PADL and PROADEL	x	x		x
PTSA	x			x

Source: Author's calculations based on data collected from different partners.

Transfers

4.112 **Generosity varies significantly in the different programs reviewed.** For comparative purposes, the benefits provided by the different social safety net programs are analyzed here in relation to: (i) the average consumption of poor households; (ii) the amount necessary to eradicate food poverty; and (iii) the amount necessary to eradicate general poverty. Primarily indicators, these are comparative thresholds that evaluate each program's ability to alleviate costs in poor households and help these households rise closer to the poverty threshold.

Table 37 - *Generosity of Different Social Safety Net Programs*

Category	Average Transfer per Household (HH)	Percent vs Annual Consumption	Percent of Amount to Eradicate	
		Poor Households (US\$1,380/yr)	Extreme Poverty (US\$204/yr)	General Poverty (US\$522/yr)
Access to Basic Social Services	Health care: US\$18/year ^a	1.3%	8.8%	3.4%
	School feeding: S\$60/year ^b	4%	25%	11.5%
Food Security and Nutrition Programs	Average: US\$96 on food distributions	7%	47%	18%
	Average: US\$169 in cash transfers (but varies greatly)	12%	82.8%	32.3%
	Average Food-/Vouchers-for-Work: US\$95/US\$50,000	7%	47%	18%
	Subsidized Sales: Nutrition Recovery Programs	N/A		

Note: a) Estimate based on 1 HH with 1 eligible woman + 2 eligible children: 2,900 CFAF spent pp/yr (ECOSIT 2011); b) Estimate per HH with 2 children (1 girl and 1 boy) attending school.

Source: Author's calculations based on data collected from different partners.

4.113 **Food assistance programs are relatively generous.** Depending on the program, benefits are estimated to vary between 47% and over 80% of the threshold necessary to eradicate food poverty. Generally, the cost of food distribution programs is less than that of cash transfers, although their base cost (per unit) is higher (see Table 37). Amounts are often transferred in relatively high payments over a short period of time (three to five monthly payments during the lean season). School feeding offers fewer benefits (about 25% of amount necessary to eradicate food poverty) but is delivered on a regular basis, throughout the year. Households can therefore rely on a predictable food supply.

4.114 **The amounts pertaining to fee waivers are provided as reference only, and are based on the normal health care costs of poor households.** The low benefit value is also explained by this program's low base cost (per unit).

Common Tools

4.115 **Common tools exist, although only in emergency response programs.** Three types of social safety nets have been identified in Chad: (i) response to shock/food security and nutrition; (ii) access to basic social services for the destitute; and (iii) social assistance for specific vulnerable groups. In the first category of social safety nets, despite the fact that different projects are implemented by a multitude of different actors, certain tools (particularly planning and targeting) are commonly used. Emergency responses to food insecurity are therefore relatively coherent and coordinated. However, from a more operational standpoint (beneficiary identification, registration, information management systems), there appears to be less coordination; furthermore, other than their payment systems which are similar, there are no common tools shared between the different programs.

The study was not able to identify tools that were shared by the different types of social safety nets; while implemented by Government and non-Government actors, these initiatives differ considerably, and show no signs of coordination. While these programs are all part of a social safety net system, sharing certain tools (targeting, identification, registration, MIS) would increase their effectiveness. It is also quite possible that some households benefit from several programs during a given year. For instance, a household living in a food insecurity zone of the Sahelian band could possibly be registered for the seasonal distribution of cash/vouchers transfers, the school feeding program for children attending primary school and to free health care for younger children and pregnant women. A shared toolbox could mean costs associated with these programs would be lower, and follow-up procedures simplified; but mostly, their synergies could be maximized so that impacts are better assessed at a household level. This would lead to more accurate estimates of the real number of households participating in one or several programs, and of the number of individuals excluded from any form of intervention.

Table 38 - *Common Social Safety Net Tools in Response to Food Insecurity*

Tools	
Planning and Coordination	<p>The activities of the different actors are clustered (food security and nutrition), thereby ensuring that all information is shared and that actors are spread out geographically, according to needs, across the country.</p> <p>Activity planning relies on a number of tools that are shared between the different actors of which: ENSA, and the HEA that help define needs and identify priority zones.</p>

CHAPTER 4 – SAFETY NETS MAPPING

Targeting	Common targeting tools include: (i) geographic, shared among all the actors; and (ii) HEA, used by most NGOs.
Identification and Registration	Identification: no common mechanism was identified. No standard identification procedures and no unique identification numbers used by each household (from year to year). Registration: no shared beneficiary registration mechanisms, no databases.
Transfers and Payments	All programs have similar payment terms and conditions; widespread use of Airtel or Tigo systems for cash transfers in cash, or vouchers exchanged at local merchants.
Data Management and Follow-Ups	An online assessment designed by OCHA provides follow-up on food insecurity response programs; it has been operational since 2015 (http://ors.ocharowca.info/). This system allows all in-field actors to insert data pertaining to the number of beneficiaries assisted every month. This follow-up system offers macrocoverage (number of beneficiaries and budgets); no shared micro system exists between actors that could record household registration to different programs.
Impact Assessment	Most projects conduct a systematic post-distribution assessment; however, no systematic data-sharing of results takes place that could serve as a platform for comparisons between different approaches, and upgrade service delivery.

Chapter 5 Conclusions and the Way Forward

5.1 Based on some of the main findings of the analytical work carried out in Chad during last year, this chapter presents the main messages emerging from the analysis and provides suggestions on how to move forward on the overall policy agenda on safety nets and in designing a pilot that can respond to the challenges identified in the report. And, to this end, be the basis for a new approach to reduce poverty and build resilience in Chad.

1. Key Findings

5.2 **Chad has made progress in reducing poverty.** Nevertheless, poverty remains widespread and is likely to increase in absolute numbers. The majority of the population in Chad can be considered vulnerable, given that 68%, or 6.8 million, live below US\$2 per day consumption. In 2011, 47% of the population was living below the overall poverty line and 29% in food poverty. Compared to 2003, these percentages have decreased, but given persistently high demographic growth, the number of poor has increased from 2.7 to 2.9 million and will increase in the coming decades. On a subnational level, poverty is concentrated among rural households and those whose main livelihood is agriculture.

Poverty is widespread, varies significantly, and is likely to increase in absolute terms.

Poverty in Chad is widespread, especially rural, and largely related to food scarcity. There are significant regional variations in the incidence of poverty and the exposure to shock such as price changes, droughts and excessive rainfall, conflict, and inflows of refugees. In the Sahel, chronic food insecurity reaches cyclic peaks during the lean season. Despite being much more fertile than the rest of the country, the Southern regions of Chad have high concentrations of chronic poor. Income inequality remains high, especially in urban areas. While in percentage terms poverty has decreased between 2003 and 2011, in absolute numbers poverty has increased and is likely to increase in the coming decades.

5.3 **Poverty depth and income inequality have not substantially changed since 2003.** In both 2003 and 2011, poverty depth was approximately 10% of the food poverty threshold and 20% to the total poverty threshold. A comparison of the cumulative expenditure distribution for 2003 and 2011 also shows the bottom 10th percentile has become worse off. Furthermore, where consumption growth has occurred, it has been more substantial for households at the top than at the bottom of the distribution, suggesting that growth has not been inclusive.

5.4 **There is significant regional variation in the incidence of poverty across Chad.** In 2011, the incidence of food poverty varied significantly in Chad, while attaining high levels in both the Sahel and the Southern regions. This is somewhat counterintuitive given that the Southern band is known to be the most fertile region. But it is also the most populous and so it holds the majority of the country's food poor. The Sahel zone has lower poverty rates and populations according to the national household survey, but its people are exposed to widespread and substantial food insecurity which is both chronic and cyclical. Livelihoods based on pastoralism and agro-pastoralism are rendered fragile structurally by factors linked to the effects of climate change and annual lean seasons. Humanitarian food distribution efforts indicate that food insecurity has been most persistent in the regions that border Sudan, that have been conflict-prone, and that are most affected by refugee inflows.

5.5 **Transfers could help reduce poverty.** In 2011, a US\$0.10 transfer to each of the food poor per day and a US\$0.27 transfer to each of the poor per day would be sufficient to eliminate both food and overall poverty in Chad. Given the population size and poverty rates, this implies US\$106 million per year would be needed to counter food poverty and US\$286 million per year to counter total poverty.

The determinants of poverty include size of households and access to agriculture inputs.

Large size of households and their involvement in agriculture are correlates of poverty. Lack of primary education does not appear to correspond to higher poverty (but secondary education does). According to recent surveys (ECOSIT 2011), what makes a difference in available income between households is not so much their ownership of land, rather their access to capital, productive technologies, and markets.

5.6 **Analysis on the characteristics of poor households provides new cross-sectional information on the correlates of poverty.** While many characteristics, such as larger household sizes and rudimentary living conditions, could be expected among households living in poverty, the analysis also sheds light on areas of policy interest. For example, land ownership does not have a strong mitigating impact on poverty, even among rural and agriculture-dependent households. This suggests there is cause for strengthening land productivity and the resilience of agricultural households to related income-shocks.

5.7 **Pastoralism is also linked to poverty but to a lesser degree than agriculture.** The majority of pastoral households have one to five head of livestock and their average national rate of poverty is about 55%, while 75% still live below US\$2 per day and could be considered vulnerable. Greater livestock ownership corresponds to a lower incidence of poverty suggesting livestock can provide some resilience to poverty.

5.8 **Poverty corresponds to household size and demographics.** Larger households and households where the household head is older are more vulnerable. Most of the population (5.4 million) lives in households headed by a female or male between the age of 25 and 44 years old. However, 4.1 million live in households where the head is over 45 years old, and these households have, on average, higher levels of poverty. Over 5.4 million live in households with more than six persons, where the incidence of poverty averages over 55% and living on under US\$2 per day averages 75%. By comparison households with four to six members have an average rate of poverty of just over 40% and a US\$2 per day vulnerability rate of less than 65%.

Perceptions on poverty vary from region to region, but they all revolve around the lack of means.

In rural areas, poverty is perceived as multidimensional and dynamic, and related to the life cycle, agricultural phase, and external shocks. For most, poverty can essentially be defined by the lack of resources, opportunities, and relationships. Vulnerability is about lack, in particular of physical strength and means to confront the vicissitudes of life. In urban areas (N'Djamena) poverty is about lack of income opportunities, housing, and basic services. In rural areas in the Sahel (Bahr el Gazal), poverty is about exposure to climate change and lack of food, which is widespread and cyclical, and leads to emigration. In rural areas in the South (Logone Occidental), poverty is determined by high population pressure, economic distress, the weakening of the cotton sector, and national industries.

5.9 **Most household heads have no education or only primary education.** Primary education does not correspond with any difference in poverty or vulnerability, suggesting the rate of return to

primary education is very limited in Chad. On average, the minority of households in which the household head has completed secondary education or more fares much better.

5.10 Local communities have a marked perception of the multidimensional aspects and dynamics of poverty and vulnerability. The qualitative analysis presented in this report shows that poverty and vulnerability are inextricably linked to the overall risks associated with the different phases of life, the external environment, livelihood, and, depending on the case, the gender and social status of the men and women of their community. They also distinguish between the different categories of poor and non-poor, by asking extremely relevant questions about the forms and conditions of social mobility from one category to the next.

5.11 Poverty is essentially defined as a lack of resources, means, options, and contacts. A genuinely poor person is one who *has nothing*. His or her condition is characterized by hunger, the lack of a decent dwelling and clothing, even the ‘filthiness’ of their person and clothing; many emphasize their inability to buy soap. Survival strategies, including access to basic social services, vary according to degree of poverty, both because of their limited means and especially in rural areas because of the distance to health centers and schools. Generally speaking, the poor inspire pity and compassion in others, occasionally indifference and at times even scorn.

5.12 The concept of vulnerability is very close to that of poverty, but with important nuances. The emphasis is more on ties, a lack of strength, and the fragility of those facing life’s vicissitudes. As for poverty, there is a relational aspect in the conceptualization of vulnerability: a vulnerable person depends on others and outside assistance, the necessary help very often lacking. This is why vulnerability is viewed combined with a lack of any form of formal or informal social assistance. Among those targeted as most vulnerable were the disabled, women (mostly widows and unwed mothers), children (mostly orphans and other vulnerable children), and the elderly. Each of these categories of individuals faces different challenges and, in terms of actions, each category corresponds to a specific form of assistance, a framework, and support.

Expensive but limited (emergency) safety nets.

Currently, Chad implements a relatively expensive safety nets portfolio (0.8% of GDP, US\$109 million in 2014), but with significant overlapping, inclusion errors, and system inefficiencies, such that resources are not fully optimized. For example, based on 2011 ECOSIT data, US\$106 million per year would be sufficient to cover the cost of making transfers to eliminate food poverty. Yet food security assessments continue to show significant assistance needs each year. Most safety nets in Chad serve an emergency response function, particularly to food crises and in the Sahel. Cash transfers, vouchers and subsidies account for 60% of the total budget, while in-kind support is at 40% and decreasing. Informal safety nets play a large role in the lives of the poor, but they are challenged by social change.

5.13 There is a strong impression that poverty is more and more widespread, while vulnerabilities have also increased. The picture that is generally painted today is one of a hostile environment that is progressively deteriorating; of an increasingly expensive, hard, and precarious life, where livelihoods are more and more fragile, with more random access to basic services. Communities seem to fold over onto themselves in the absence of adequate support measures.

5.14 The emergency nature of the existing safety net response. Chad’s current social safety net system is predominantly oriented towards emergency response and mainly targets households suffering from food insecurity due to seasonal shocks; it largely depends on humanitarian funding. Distribution

records confirm the emergency nature. In fact the development partner objectives generally are: (i) provide emergency response in a crisis situations (78% of total budget); (ii) facilitate access to basic social services for poor households (17% of total budget); and (iii) provide assistance to specific vulnerable groups (OVC, the disabled, other vulnerable groups, etc.: 5% of total budget). Not one social safety net has as a specific objective to act as a predictable assistance mechanism for household consumption or the long-term reduction of household poverty.

5.15 Informal community solidarity and mutual help mechanisms are widespread across Chad, but they are also fragile.

The different forms of informal social safety nets continue to play an important role in the lives of the poorer populations, both in rural areas and urban settings. In the absence of an adequate, or in the presence of an inadequate State-run formal social safety net system, the majority of rural populations as well as operators from the informal urban sector largely depend on different forms of sharing or transfers within the extended household, among neighbors and friends, or from the community at large to safeguard their survival, face risks of every type, and curtail the effects of different shocks. By the same token, these systems that sometimes rest on traditional practices are often put to the test by sociocultural transformations that erode traditional community values and structures.

External financing, weak national capacity, mixed coverage and limited coordination characterize existing safety nets in Chad.

Development partners are the primary source of financing for on-going safety nets (74% of the total), but financing amounts are unpredictable and volatile. Government capacity to design, finance, and implement safety nets coordination mechanisms is limited and programs directly managed by Government authorities are very few. Safety net coverage is high for food insecurity, medium for access to basic services, and low for assistance to specific categories. Aside from geographical/HEA targeting and some common approaches to payments, there is limited coordination in the identification, registration and monitoring of beneficiary households. Design and management of accompanying measures to safety nets, are also scantily coordinated.

5.16 In 2014, about US\$109 million was spent to finance different types of safety nets in Chad in 2014.

This amount corresponds to 0.8% of national GDP and according to the ECOSIT 2011 data would be sufficient to address the food poverty gap. Although the amount is slightly below the average for low-income African countries (1.1%), it is higher than in many West African countries. Several factors also point to considerable inefficiencies and challenges that limit cost-effectiveness and impact. These include: (i) the reported number of beneficiaries is likely overestimated (almost 3 million people or over 20% of Chad's population); (ii) there is a sense of significant overlap among programs (which impossible to check given that registries are not used by safety nets, at least not in a systematic way); and (iii) certain projects use targeting methods that have a high risk of inclusion of non-poor households. So while the resource envelope and targeted level of coverage (US\$109 million and US\$3 million, respectively) should be sufficient to address food poverty within Chad, the current systems and approaches have not been harmonized to maximize impact.

5.17 The limited nature of existing beneficiary registration and identification system. Most programs do not use registration and identification mechanisms that could act as beneficiary household tracking tools. Often households are registered annually under new identifier codes, with different codes for every program, which makes it impossible to follow their participation to the different programs or pinpoint overlaps between programs. Each program also uses different identification tools

(e.g., participant card, coupons, health booklet, etc.). When they exist, beneficiary records are usually in hard copy format, therefore limiting document sharing and usage.

5.18 International financial and technical partners and the Government have provided significant support in response to economic and life-threatening emergencies. The response to chronic and covariate vulnerabilities and shocks has so far focused mostly on access to food and on its timely and regular distribution. A few programs have focused on addressing child malnutrition, maternal mortality, and lack of income earning opportunities. The vast majority of these programs are supported by UN agencies (WFP, UNICEF, and FAO among others) and international NGOs, with their own resources and with those of large financial and technical partners, including USAID, DFID, EU, AFD, and AfDB.

5.19 Targeting mechanisms vary according to the objective of the program; however, geographical targeting combined with Household Economic Assessment (HEA) is widely used. The overall efficiency of any safety net program depends heavily on its ability to identify and target the neediest households. Weak targeting mechanisms can result in high inclusion errors (non-poor or non-vulnerable households enrolled in the program) and conversely in exclusion errors (poor and vulnerable households who are not enrolled in the program). Efficient targeting mechanisms succeed in reaching their objective and reducing both errors. Given the nature of safety nets in Chad (humanitarian emergency related to food insecurity, drought, and other crises), the targeting mechanisms more commonly used are a combination of geographical targeting and HEA methodologies, with at times some community-based vetting. Fee waivers and food price subsidies, on the other hand, tend to be untargeted.

Targeting approaches vary.
Under current safety net activities, targeting mechanisms vary according to the objective of the program; however, geographical targeting combined with Household Economic Assessment (HEA) is widely used. Safety nets are mostly targeted to populations in rural areas, while urban areas are covered only by free universal access to health services and some social assistance.

2. Main Messages

5.20 Although Chad has a relatively strong performance in delivering on safety nets in emergencies, there is need for more stable, sustainable, and efficient safety nets. The existing system of safety nets appears to be largely driven by emergencies and supported by international partners. An assessment of the safety net system reveals areas where improvements could strengthen performance, including: strengthening identification, improving registration and targeting of beneficiaries, developing a management information system, and conducting impact and process evaluations to better assess performance and effectiveness. The agenda for change in the area of social protection in Chad includes moving toward a more structured system and deploying common platforms that can be used by different Government agencies and partners according to their objectives, needs, and financial capacity. Such common platforms help in reducing exclusion and inclusion errors, reduce duplication of beneficiaries, and improve overall system efficiency.

5.21 Adaptive social protection systems offer significant advantages.

Constraints to poverty reduction are compounded by an extremely difficult macro-fiscal situation, which makes prospects of pro-poor growth very limited. As such, there is a need to put in place social protection mechanisms that are flexible, scalable, and capable of responding to crisis, strengthening resilience, and improving

Emergency interventions need to be linked to long term strategies.

In Chad, both short- and long-term constraints are making poverty reduction a challenging goal. Extreme weather conditions and exposure to conflicts and regional instability are combined with structural factors such the chronic nature of food poverty and high fertility rates. This suggests the need for a new adaptive approach to reducing poverty and vulnerability, bridging emergency policy with long-term structured and systemic approaches in support of incomes, livelihood and resilience. This approach also applies to the long-standing refugee crisis with camps established for more than a decade and recent refugees' inflows from Nigeria and CAR.

redistributive dynamics. Although not part of the findings of this analysis, the impact of climate change and of extreme weather conditions can be counterbalanced or limited by extensive programs of local public works, which increase participants' incomes and resilience while investing in small infrastructure that can help fighting desertification and improve water collection, storage, and use. In this respect, the experiences in other African countries, including Ethiopia and Niger, are illustrative.

5.22 Because of its geographical position, history, and political and military role in the subregion, Chad has long been a land of welcome to significant numbers of refugees from neighboring countries.

In 2014, the number of returnees and refugees was estimated close to 500,000, mostly from Sudan, Central African Republic, and Nigeria. Refugees require food and other forms of assistance, and while the earlier waves of refugees in mid-2000 were accommodated in camps, the recent have tried to integrate into communities. This development has changed the approach of humanitarian assistance, which focuses more on receiving communities than in the past. The pressure

Adaptive safety nets can mitigate the impact of climate change.

Climate change induces variability in weather conditions. A renewed agenda of community-based interventions, including labor intensive public works can protect the environment, avoid further soil erosion, improve water uses, and protect from floods.

on local resources and assets, however, is likely to increase, and this may dwarf the attempts to reduce vulnerability. Precisely because of its position and role in the subregion, Chad has become a key player in the fight against terrorist groups, including the Nigeria-based Boko-Haram group. During the past year, Chad's commitment has grown significantly both in terms of political support and military deployment, and the results include an increased containment of terrorist movements, limiting their control to Northern

Nigeria, and inflicting serious military defeats to Boko-Haram. Some areas of Chad, including Lake Chad and Ndjamenana, have been targeted by suicide attacks that have left dozens of civilians and military deaths.

5.23 Demographic projections show youth 15 to 35 years is the fastest-growing cohort. In the coming decades, the youth bulge will continue to increase pressure on the provision of basic services, urban infrastructure, housing, and more fundamentally job opportunities. Youth unemployment and underemployment are growing and so are other economic and social concerns, generating significant internal and external migrations, strong urbanization dynamics, overall dissatisfaction, exclusion, and lack of participation in the social and political life of the country. These and other dynamics can easily

degenerate in youth joining criminal activities and terrorist groups. While the evidence that cash-for-work and other safety net programs can deter youth in joining terrorist groups is scant, their positive role in activating and supporting community dynamics is proved. Such dynamics can improve local peer control, overall civic participation and can forge new forms of social contract between the State and its citizens.

5.24 In parallel, other imperatives include promoting forms of social investment in basic social services and socioeconomic infrastructures. Analysis on sources of vulnerability in their different contexts reveals the lack, or poor quality, of basic socioeconomic infrastructures and services (i.e., health centers, schools, roadways, markets). These factors stunt the development of human capital, accentuate the vulnerabilities associated with the different life phases, stir up anti-social behavior and discontent against authorities, and contribute to reinforcing different forms of transmission of intergenerational poverty.

Safety nets as a new partnership and in support of youth at risk, refugees' integration, and urbanization challenges.

A new systems approach to safety nets, if supported by strong accompanying measures and a new partnership between the State and its citizens, can strengthen social and community dynamics and mitigate the risk of youth joining terrorist groups, criminal organizations, or anti-social behaviors. The long-term agenda of refugees and returnees from neighboring countries can be addressed anew within a system approach to national safety nets. Massive urbanization and overpopulation of the capital are additional threats.

5.25 Urbanization is on the rise and safety nets systems should be prepared to respond. In Chad, the urban population will triple in the next 15 years; urban poverty is likely to increase as are the social challenges created by a growing urban population exposed to negative social capital dynamics. Moreover, current political, religious, and security dynamics can succeed in attracting a growing number of disfranchised, jobless, and poor people, and in particular the youth. Safety net systems should be designed to respond to these present and future challenges.

5.26 Misperceptions of poverty need to be corrected. In Chad, there are consolidated perceptions linking poverty to small-size farms and small households. These perceptions need to be addressed, since they are not confirmed by households surveys (ECOSIT), which show that determinants of poverty are low agricultural productivity, no access to inputs and markets, and high exposure to shocks.

5.27 Reticence to new approaches. Field research indicates some reticence to adopting cash transfer mechanisms, on the basis of their alleged work-dissuasive and dependency effect. However, vast international evidence attests that well designed and implemented cash transfer schemes increase household incomes, smooth consumption, activate poverty reduction dynamics, and strengthen resilience. Graduation from cash transfers systems is a critical factor for their success and sustainability. Successful graduation is linked to real improvements of households to use part of the additional income provided by safety nets in productive assets and social investments in the younger generations. However, there will always be vulnerable groups (e.g., older persons or people with disabilities) that require permanent social assistance and are not expected to graduate. When accompanied by appropriately designed training and awareness raising modules, cash transfers can make communities aware of basic changes that can improve their own livelihoods, the agricultural productivity of their plots, and the health and education of their younger generations. Policy dialogue and information campaigns are key to improve attitudes towards safety nets and to allow a transition from short-term emergency response to long-term investments in human capital.

5.28 Strengthen the institutional framework responsible for coordinating social safety nets.

An institutional framework addressing social safety nets has been defined in the National Social Protection Strategy. In practice, however, the coordination of social safety nets is weak. Different interventions are coordinated across a number of sectorial clusters (i.e., nutrition, food security, health, protection), yet the different programs do not serve as a tool box enabling households to better-manage the socioeconomic risks that might affect them. Strengthening the coordination framework under Government supervision represents the first step towards an eventual design and establishment of a national social safety net system.

Addressing common misperceptions.

Safety nets are only for the poorest and most vulnerable and are not specifically designed to complement existing contributory social security schemes, which are mostly for public and private employees. Further, international experience shows cash transfers and labor intensive public works programs are efficient redistributive mechanisms that can improve the livelihoods of the chronically poor and vulnerable people in period of crisis. Misperceptions linking poverty to small-size farms and small households need to be corrected. The determinants of poverty are low agricultural productivity, no access to inputs and markets, and high exposure to shocks, including climate-related shocks.

5.29 Increased coordination would reinforce existing shared tools used in response programs and connect them to new social safety net programs.

This should consist of a national coordination mechanism, planning and assessment tools shared between actors, and a consensus regarding the most appropriate types of targeting methods to address the multiplicity of vulnerabilities affecting Chad, the poor in particular. This coordination should nevertheless be tested and refined on a group of pilot programs, and later enlarged to include other social safety net programs. Moving forward towards a national social safety net system entails developing a group of shared management tools, including targeting, registration, payment, and monitoring and evaluation tools.

5.30 A social registration and identification system is critical.

Most programs do not use registration and identification mechanisms that could act as beneficiary household tracking tools. Often households are registered annually under new identifier codes, with different codes for every program,

Building safety net systems is a priority.

Chad's current expenditure on safety nets is relatively high, largely financed by donors, and variable. As in all countries, it is critical to move toward a Government-led, transparent, well-designed, consistent, and professionally implemented social safety nets system. This includes well-sorted targeting, registration, payment, and M&E tools. Coordination among programs, bridging short-term and long-term responses and ensuring the use of commonly agreed tools and approaches, is critical for the success of a new safety net system.

which makes it impossible to follow their participation in the different programs, or pinpoint overlaps between programs. Each program also uses different identification tools (e.g., participant card, coupons, health booklet). When they exist, beneficiary records are usually in hard copy format, therefore limiting document sharing and usage. An efficient registration and identification system could initially be implemented as part of a pilot, then scaled to other safety nets programs, and finally further-scaled to include all partners and programs, with the objective of moving towards a national social registry.

3. *Moving Forward and Follow-Up Recommendations*

5.31 **Moving forward would require a mix of different but convergent tools.** The way forward to reach such objectives includes a mix of activities to test safety net interventions and support the creation of a safety net system, enhanced analytical work leading to a more structured and substantiated policy dialogue with the Government, as well as collaboration and coordination with technical and financial partners (international and national). Furthermore, technical assistance to the Government and to specific units within the Government to prepare the safety net pilot would be essential.

5.32 **The Government of Chad and The World Bank Group have engaged in intense policy dialogue on social protection in the past year and established a strong platform for further policy engagement on the topic.** The Forum on Social Protection held in Ndjamena from June 2 to 4, 2015, completes a period of intense policy dialogue initiated in mid-2014 as part of a renewed partnership between the Government and the Bank. In the case of social protection, the objectives of such partnership were threefold: promote a social protection agenda between the Bank and Chadian authorities and stakeholders; follow up on earlier work done by the Government of Chad supported by UNICEF on the National Social Protection Strategy; and at the request of the Government, lay the foundation for a Bank operation on safety nets in Chad. The Forum was a new starting point for policy dialogue; it has helped to increase the commitment of the Government, major national stakeholders, and technical and financial partners around the National Social Protection Strategy; share country experiences on the design and implementation of safety nets; and identify ways and means for developing sustainable social safety nets systems.

5.33 **The Bank has helped facilitate knowledge-sharing and South-South learning on social protection as part of the dialogue.** During 2015, Chad authorities were invited to join selected events and knowledge information exchanges, including a study tour to Niger (March 17-21) and a series of workshops and videoconferences as part of the on-going activities of the joint World Bank-UNICEF Community of Practice on Social Protection and Labor for French-speaking African countries. Future activities include the participation in South-South knowledge events (Beijing, November 8-14, 2015) and to other learning and policy events. These and other activities will be supported by Bank budget and the Adaptive Social Protection Trust Fund financed by the UK Department for International Development (DFID).

Recommendation 1 – Continue Policy Dialogue and Foster Ownership

A key priority is to continue the policy dialogue between the authorities, key national stakeholders and development partners on the importance of establishing safety net systems, of introducing cash transfers and other efficient tools for income distribution and of promoting changes in social behaviors. As part of this policy dialogue, workshops, south-south dialogue events, training and technical assistance will continue to be provided.

5.34 **The official adoption of the National Strategy for Social Protection is an important milestone for future policy dialogue.** The National Strategy for Social Protection is an important platform to structure the dialogue with the Government and any further discussion around safety nets. The Bank team with other stakeholders has provided comments on the strategy and helped finalize its technical validation and final approval by the Government.

5.35 **Technical assistance to the Government to pilot a safety net.** The Forum on Social Protection clearly established a need to improve social safety nets in Chad through reliable and well-structured systems of identification, registration, and targeting of the poorest and most vulnerable, transfer systems to the beneficiaries, management systems, communication, and monitoring and evaluation. Such an approach would help transition toward a sustainable, predictable, adaptable, and coordinated social safety net system. When supporting project design, some of the basic principles to keep in mind include: understanding the complexity of social situations; adjusting the assistance according to the specific circumstances; considering vulnerability categories also as defined by the communities; helping strengthen livelihoods; accompanying the beneficiaries of safety net benefits with mentoring, training, and awareness-raising programs; designing the programs around local values without affecting existing coping mechanisms; and involving key local stakeholders (i.e., local governments, civil society organizations, and non-governmental organizations) in the preparation, implementation, monitoring and evaluation of projects.

Recommendation 2 – Launch a Pilot

In partnership with the World Bank and other partners, and with support from the Adaptive Social Protection Multi-donor trust fund, the Government should pilot the establishment of a safety nets system that would test labor intensive public works and cash transfer interventions. The pilot would be implemented through new institutional arrangements and a state of the art management information system.

5.36 **Preliminary discussions have identified options for the pilot, including:**

- Hands-on implementing opportunities for the Government to strengthen its capacity to deliver safety net interventions, while simultaneously providing social assistance to benefit vulnerable groups in Chad. Such interventions could focus on (i) a cash-for-work intervention in urban and semi-urban locations in N’Djamena and given the relatively high presence of existing interventions, in the Sahel; and (ii) an adaptive cash transfer scheme to vulnerable households in the Southern regions.
- Support the design and development of a Management Information System that will include five major activities, namely: (i) targeting and identification of beneficiaries, (ii) enrollment of beneficiaries; (iii) payment of beneficiaries; (iv) grievance and redress; and (v) monitoring and evaluation.
- Develop the institutional capacity within the Government to deliver safety nets and prospectively grow into a larger entity with greater capacity to meet the needs of vulnerable constituents. At present, it lacks the respective capacity. However, based on the experience and

best practices in safety nets in the region and world-wide, Chad presents an opportunity to design, establish, and test new institutional and implementation arrangements for safety nets.

5.37 Collaboration and coordination with international and national technical and financial partners are key for any further planning and programming.

The international community, including UN agencies, international NGOs, and bilateral agencies, has invested significant financial and human resources in designing and implementing the current safety nets system, which, as discussed in various parts of this analysis, is focusing mainly on emergency food security response. Recently, efforts have concentrated on developing a set of common tools to identify geographical intervention areas, target beneficiaries (mostly through HEA), transition to cash and voucher transfers in lieu of in-kind benefits, and strengthen coordination and Government ownership through SISSAP (Information System on Sustainable Food Security and Early Warning). The Bank is entering into such a rich and structured context with a view of collaborating with and leveraging on the on-going experiences, filling some of the existing gaps in safety nets programming especially in areas where chronic poverty is the challenge, supporting the transition toward a common and long-term system approach to safety nets, offering its regional and global experience, and investing in technical assistance and pilot project financing. In this effort, it will be critically important to liaise with actors involved in other major policy and coordination mechanisms on issues of particular importance such as the resilience agenda – for instance, through the Global Alliance for Resilience (AGIR) in the Sahel and West Africa and in partnership with the EU, FAO, and other UN and bilateral agencies. On the longer-term development agenda for Chad, all social protection/safety nets activities will be designed and pursued consistent with the Government’s national policy and planning context, respectively, Vision 2030 and the next-generation National Development Plan.

5.38 Future analytical work will include assessments in the areas of identification, targeting, and registration; outlining institutional arrangement options and accompanying resource requirements.

As immediate next steps in the analytical work, additional knowledge and data is required in specific areas of the safety nets architecture, including: (i) an assessment of the existing identification (ID) and registry systems, (ii) an assessment and analysis of the institutional structure governing existing safety nets and related options to strengthen them; and (iii) better understanding the gaps in terms of community-level accompanying measures to enhance human capital, build resilience, and strengthen productive livelihoods. On the first set of activities, existing ID systems, the assessment would be structured along dimensions that can be grouped into four objectives: accessibility; robustness; integration and regulated access to data; and legal framework and data protection. The

Recommendation 3 – Strengthen Government/DP Coordination

A key policy priority is to strengthen existing Government–development partner coordination mechanisms around humanitarian relief and the agenda of poverty reduction. Stronger coordination should take place within existing structures and under greater national leadership. Renewed coordination should also be on data and information sharing.

Recommendation 4 - Invest in Knowledge and Data

It is a priority to continue improving the knowledge base on poverty dynamics, vulnerability and safety nets, and in particular on regional variations, sources of vulnerability, including conflict, extreme weather events, price shocks, and refugee inflows.

information on sources of vulnerability and how households and communities respond to different shocks.

5.40 To build on the qualitative analysis, additional work on coping strategies, livelihoods, and social dynamics may be required. This will help inform the team of the appropriate approaches to develop resilience in the Chadian context. Follow-up work will include research on the current coping mechanisms of households under stress and consider possibilities for risk mitigation, for example, through promotion of adaptive or diversified livelihoods, investments in community assets, and development of human capital. These and other knowledge activities will be carried out in collaboration with national partners, including the National Statistical Office (INSEED) and other partners supporting household surveys or other tools to assess poverty and vulnerability in Chad.

5.41 As discussed, messaging and communication with all stakeholders and parties working on safety nets, whether at the policy or operational levels, needs to be improved. This should be done in conjunction with the communications measures set out in the National Social Protection Strategy, in an effort to align the communications thrusts around safety nets with those that have already been identified nationally around social protection. The objective of such campaigns should be to help correct common perceptions on poverty and vulnerability, as highlighted by the ECOSIT results. They would also help discuss the advantages of new approaches to safety nets, including conditional and unconditional cash transfers, accompanying measures to raise awareness and provide some basic community skills to improve livelihoods and resilience to shocks as well as introduce the concept of

institutional work would look at existing arrangements, plans outlined in the National Social Protection Strategy, and recommendations from the recent Forum on Social Protection.

5.39 Additional analytical work may also include more detailed local-level analysis on the prevalence and severity of each source of vulnerability and the current coping and resilience mechanisms. The analysis has brought to fuller light the presence of these sources of vulnerability and their relative salience across the country, as well as uncovering initial correlations between sources of vulnerability and poverty at a regional level. This analysis, however, is limited by the lack of local-level

Recommendation 5 - Launch Information Campaigns

As part of follow up activities to the National Social Protection Strategy, it is critical to launch well organized communication campaign on the safety nets strategy, system, and its interventions and expected outcomes. Messages would include: Safety nets are for the poorest; Cash transfers can be provided to people safely, efficiently and accountably; labor intensive public works support income and build resilience.

adaptive social protection. Such campaigns could also present the new approaches to safety nets in the ambit of a renewed social contract between the State and its citizens. The pilot, which will be prepared with the support of Adaptive Social Protection Program financing by DFID, could be a source of support for such activities.

5.42 In the longer term, it is critical to expand safety nets and aim at a national registry system. If the pilot is successful, it is critical to strengthen technical and financial partnerships and mobilize additional resources to extend safety nets activities in other areas of the country. This effort should help bridge short-term humanitarian interventions with longer-term poverty reduction strategies under the overall approach of adaptive social protection that is, a scalable, adaptable, and flexible approach to resilience building, poverty reduction, and enhanced livelihoods. In the longer term, if there is continuous traction and ownership by the Government and among major stakeholders, the recommendation is to aim at the creation of a national social registry. Such a registry would become a common management and information tool to identify and target poor households and track the impact of safety nets on livelihoods and the household's overall poverty and vulnerability situation.

Recommendation 6 – Expand Safety Nets Outreach and Aim at a National Social Registry

For the longer term, aim at attracting additional financial resources and sufficient commitment and institutional traction to expand and adapt the safety nets pilot to other areas of the country. Additional commitment and experience with the pilot will also help design, introduce and develop a national social registry, which is the ultimate and most efficient tool to reach the poor and vulnerable.

5.43 Significant challenges ahead. The road toward establishing a new and adaptive social protection system is not without challenges, including weak institutional capacity both at the central and local levels, lack of unified approaches to identification, targeting, registration and monitoring of beneficiaries, fiscal governance concerns, limited domestic and international financial resources, and significant logistic problems such as distances and bad quality of transportation, telecommunications, and banking networks.

5.44 In all, a unique window of opportunity has opened for Chad. The Government of Chad together with its development partners, despite such constraints, agree that there are unique opportunities to approach the poverty and vulnerability agenda on a new foot, by embracing the most progressive and innovative solutions and experiences on social protection, on safety nets in particular. The policy context is also very favorable since there is a National Social Protection Strategy in place, together with a broader national planning process focusing on a long-term 2030 Vision and a National Development Plan.

5.45 Safety nets can respond to challenges on poverty, vulnerability, and security. While recent security challenges appear to be originating from neighboring countries, they do find chronic poverty, exclusion patterns, and significant vulnerability to provide a powerful breeding ground in Chad. A social protection and safety nets strategy complemented by well-designed foundational work and a

CHAPTER 5 – CONCLUSIONS AND THE WAY FORWARD

scalable pilot on safety nets is undoubtedly one of the best ways to respond to some of the broader challenges on poverty, vulnerability, and security. New opportunities also include: i) The extraordinary expansion of information and communication technologies (ICTs) to identify, register, and pay beneficiaries; ii) The political consensus on the need to transition to more structured and sustainable safety nets systems; and iii) The overall partnership framework between The World Bank Group and the Government and people of Chad.

Annexes

1. Glossary

Adaptive social protection (ASP):

Definition: Adaptive Social Protection (ASP) is a new integrated approach that can help address the challenges of climate adaptation and climate and disaster risk management. Through its flexible programs, ASP can reduce vulnerability to shocks before they occur (with predictable transfers, by building community assets) and protect the poor when affected by shocks. It can also promote equity and shared prosperity by fostering access to income-earning opportunities, helping to diversify livelihoods and productive assets, increasing access to basic services and developing human capital, all of which build long-term resilience to shocks. ASP programs can be scaled up to respond to extreme events and begins with and prioritizes the reinforcement of resilience and livelihoods within households and more vulnerable groups; it also takes into account other sources of vulnerability

Coping strategies:

Definition: The means by which individuals or households attempt to deal with shock or crisis (i.e., a crisis due to climate change).

Negative/harmful strategies: Generally encompass decreased food consumption; withdrawal of children from school, etc.

Positive/effective strategies: Include livelihood diversification; reinforced community solidarity, etc.

Food insecurity:

Definition: Food insecurity exists when individuals, households or communities lack the physical, social and economic ability to provide food in sufficient quantity and quality to meet their needs and food preferences, and be able to live an active, healthy life. Distinctions exist between the four dimensions, or ‘pillars,’ of food insecurity: 1) *lack of access* (no capacity to produce one’s own food and therefore have the means to do so, or no capacity to purchase one’s own food and therefore possess sufficient purchasing power to do so); *unavailability* (insufficient quantities of food derived from domestic production, stocks, imports or aid); *poor quality* (improper of food and diet, from a nutritional, health and sociocultural standpoint); and *instability* (of incapacity to access, and therefore to stable prices and purchasing power, and availability of quality food products that affect diet).

Food insecurity measure: According to definitions provided by the WFP, the extent of food insecurity is measured through the combination of three indicators: the food consumption score, the index of survival strategy (takes into account the long-term strategies that affect livelihoods), and the share of food expenditures. The last two indicators, in particular, assess access to food. Using the combination of these indicators, three food security categories are determined: *severe food insecurity*, *moderate food insecurity*, and *food secure*. People affected by severe food insecurity face a severe shortage of food that they cannot cover without assistance. They are thus driven to adopt survival strategies that affect their livelihoods. The categories of both moderate and severe insecurity are included in food insecurity analysis provided in this report.

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National food poverty line: Defined by the Chad National Statistical Office. It represents the expenditure on food required for consumption of 2,400Kcal per day and is derived from a basic-needs food basket, which includes 33 food items commonly consumed in Chad. Once regional disparities in the prices of food are taken into consideration, it represents 159,991 CFAF per person per annum deflated to N'Djamena equivalent prices. This is equivalent to US\$0.93 per person per day using the average 2011 exchange rate of 472 CFAF to US\$1.⁶⁶

Livelihood:

Definition: A set of ways by which households make ends meet from year to year; subsistence and survival strategies that include capacities, resources, and activities.

Poverty and its dynamics:

Monetary poverty: A lack of means to meet fundamental needs that encompasses a degree of deprivation in terms of material assets, which can be measured with the appropriate income or consumption instruments

Multidimensional poverty: A lack of means in terms of hardship, and of limited access to education and health care. According to this concept, the poor include not only low-income individuals but also ones who cannot care for their basic needs – food, housing, clothing, health, education, or communications. These individuals also suffer from marginalization and exclusion.

Transitory poverty: Poverty that appears after the loss of a job or a sudden drought. That is, people who earn sufficient income in good years but fall into poverty, at least temporarily, as a result of idiosyncratic or covariate shocks, ranging from an illness in the household or the loss of a job to drought or a macroeconomic crisis.

Cyclical poverty: Recurrent, for example every year during the lean season.

Chronic poverty: Long-term poor are those who lack the assets to earn sufficient income, even in good years.

Intergenerational transmission of poverty: By which children of poor parents are deprived of healthy food or education, and also risk becoming or remaining poor as adults

Poverty traps: When the poor cannot rise above their state of poverty

National poverty line: Defined by the Chad National Statistical Office. It has been set here as the expenditure on food required for consumption of 2,400 Kcal per day plus the average expenditures on non-food items of the household $\pm 5\%$ around the food poverty line as an approximation of the cost of non-food essential goods. Once regional disparities in prices of food are taken into consideration, it represents 237,942 CFAF per person per annum deflated to N'Djamena equivalent prices. This is equivalent to US\$1.38 per person per day using the average 2011 exchange rate of 472 CFAF to US\$1.

Regions:

Chad is divided into 23 regions, including N'Djamena which forms a separate region. Chad has three main geographical areas: these are the northern regions (Sahara desert), the Sahelian band or belt in the

⁶⁶ Source: <http://data.worldbank.org/> official exchange rate indicator.

center, and the Southern zone, occasionally referred to Sudanian zone, from French *la zone Soudanienne*.

Resilience:

Definition: The capacity of individuals, households, and communities to face a shock or a gradual degradation of their living conditions and of their ability to respond, cope, and even turn these changes to their advantage. In some ways, *resilience* is the antonym of *vulnerability*. More a household becomes resilient to a certain type of shock, the less it is apt to be affected by it.

Risks, hazards, crises, shocks:

Definition: In Chad, drought is an important hazard to agricultural and livestock production. Those who experience these situations often go into deep shock – a crisis situation – and run the risk of losing their livelihood and/or suffering a food shortage.

Idiosyncratic risks/shocks: Affect a particular individual or household (for instance, following a bereavement or serious illness in the household).

Covariant risks/shocks: Affect a vast number of people or entire communities (for instance, after a drought, flood, generalized civil insecurity, an economic crisis).

Social capital:

Definition: This refers to the norms and networks allowing all forms of group action. Social capital not only concerns institutions, relations, and behaviors or attitudes that determine the quality and quantity of social interaction within a community, it also includes a number of additional dimensions (such as solidarity, cohesion, and inclusion).

Social protection:

Definition: In general, social protection is defined as a set of policies and programs that are designed to provide assistance to the poorer and more vulnerable members of society, as well as to help individuals, households and communities manage the risks to which they are exposed. In Chad, the current definition adopted by la *Stratégie Nationale de Protection Sociale* (National Strategy on Social Protection), states that social protection encompasses *a whole group of* formal and informal public investments and initiatives that can directly address risks, vulnerability and chronic poverty. Thus, in Chad, social protection implies *different dimensions* of protection, prevention, promotion and transformation. It is based on the principles of social solidarity that seeks to *guarantee a minimum of security and well-being* to all, as well as *collective risk-sharing*. From an operational standpoint, it can be classified under *assistance measures or social assistance* (social safety nets; social transfers), *social insurance*, *specialized social services*, and *social equality*. Social protection includes a vast array of mechanisms to help households prevent, reduce and confront different risks and shocks

Contributive social protection: Relates to *formal* social insurance/social security. Pension plans and social assistance programs – both contributive programs – lead to better management of risks and vulnerabilities; they also help prevent individuals from falling into poverty at the onset of old age, illness, a workplace accident or occupational illness, unemployment, or the absence of family benefits

Non-contributive social protection: Relates to *informal* aid and mutual help. The mechanisms exist within a household or a community. These might rest on a feeling of social solidarity emanating from

extended household or parental ties, religious groups or values, producers' associations, ethnic associations or women's groups

Social safety nets:

Definition: Social safety nets are a subset of broader social protection policies and programs. The term *safety net* refers to non-contributory transfer programs targeted in some manner to the poor or vulnerable (Grosh *et al.* 2008, in Monchuck Victoria, 2014). Safety nets aim to increase household consumption of basic commodities and essential services, either directly or through substitution effects, rather than to increase household resources per se. Specific program objectives are to (i) facilitate access to basic social services in poor communities, such as social funds or community development projects, an important component of national social protection strategies, because they do not target vulnerable individuals, but rather vulnerable communities; (ii) provide vulnerable groups with temporary assistance during periods of shock or crisis; and (iii) promote employment and productivity among vulnerable individuals; target youth and other groups that are at risk of being excluded from the labor market; promote job creation, improve productivity, and hire ability. When carefully integrated into a national policy, safety nets can be a significant tool that promotes an inclusive, equitable growth model. Social safety nets also complete and strengthen other Government-implemented sectorial policies. While sectorial policies on health and education improve the social services *offer* across the country, social safety nets serve to support the *demand*. Through the creation of intensive labor force projects, social safety nets can also support sectorial policies on infrastructures, urbanization, and rural development

Social transfers/safety nets typology: Social transfers (food baskets, cash transfers or training programs) include: (i) *monetary (cash) or quasi-monetary transfers (vouchers)* with no conditions whatsoever, or entailing behavioral conditions or an activity on the part of the beneficiary; (ii) *in-kind transfers* (food distributions, school canteens, supplies distributions); (iii) labor intensive works; (iv) social services *subsidies or fee waivers*; and (iv) activities involving *social assistance*. Leading safety nets are:

Table 39 - *Typology of Social Safety Nets*

Type	Description
Cash Transfers	✓ In the form of cash or vouchers (conditional or non-contributory), they offer beneficiaries the financial resources to maintain a minimum consumption level.
in Kind Transfers	<ul style="list-style-type: none"> ✓ Distribution of food or dietary supplements. ✓ Distribution of products (school kits, non-edible assets, seeds). ✓ School feeding.
LI Projects/ Cash-for-Work & Cash-for-Training	✓ Cash transfers or in-kind transfers in exchange for work, building community assets or training. These projects include building new infrastructures or rehabilitating older ones; they also create public assets that can help raise the population's standard of living.
Subsidies & waivers	<ul style="list-style-type: none"> ✓ The objective of school and medical fee exemptions for certain categories of individuals is to make basic services easier to access by those who are excluded, due to an inability to pay. ✓ Food subsidy programs (i.e.: sale of subsidized cereal during the lean season)
Social Assistance Projects & Assistance to Vulnerable Groups	✓ Projects that cover a broad range of needs by providing, for instance, support to orphans or individuals living with a disability, and services to women in distress. Social assistance generally goes beyond meeting immediate needs; it can

	include psychosocial support, housing assistance and health care or education services.
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Vulnerability:

Definitions: Various definitions that all stem from fragility and the precarious nature of human existence. An organic link exists between poverty and vulnerability, but the two do not coincide: Often linked to poverty, vulnerability can be aggravated by poverty or even create its conditions. An initial concept of vulnerability in development related to those who were not necessarily poor but could easily become poor, and it is often a function of assets as well as income as these factors will influence resilience. But definitions also encompass those who are threatened in their autonomy, their dignity or their integrity, be it a physical or a psychological menace and the degree of autonomy when faced with social risks, and the ability to anticipate or confront them. One definition of vulnerability that has been adopted for this report is US\$2 per person per day consumption threshold for 2011.

Vulnerability measure: To measure any form of resilience requires panel data or qualitative information at the household level to measure how households respond to various types of shocks based on material and non-material assets, as well as income. One's level of vulnerability is thus derived from the association between the degree of exposure to risks/shocks (economic, social, climate, others) and the capacity to anticipate, confront, and respond to them. For this purpose, the present analysis details the characteristics of poor and close to poor households and examines the geographic distribution of shocks across the country as these may help predict vulnerable populations. It generally uses the US\$2 per person per day consumption threshold that has the benefit of been an internationally comparable metric of poverty and corresponds to approximately 1.5 times the national poverty line. Given that households close to the national poverty line can be considered vulnerable to falling into poverty when exposed to income shocks, the 1.5 times the national poverty line is deemed a reasonable criteria to use with the data available.

2. Data Sources

The main source of data for this analysis is the ECOSIT national household survey that was carried out by the National Statistical Office in 2011 with technical assistance from the World Bank. This survey included all 20 regions of the country. In total 9,259 households were surveyed, which covered 49,985 individuals. The sample was stratified into 20 clusters per region, of which 12 were urban and 8 were rural, apart from the capital, N'Djamena, where 100 clusters were surveyed and all were classified as urban. Using the weighting methodology provided by the National Statistics Office, this survey corresponds to representing a population of 10,015,591. The survey data was collected between June and July 2011.

The stratification and sampling methodology implies that substantially more urban households were surveyed than rural households. Out of 9,259 households, 6,237 were in urban clusters. Staff in the National Statistics Office explained that this sampling methodology was chosen because they assumed there would be more variation in consumption in urban areas than in rural areas. This assumption is not easily testable given the data that is currently available. By construction, the analysis presented using

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the ECOSIT survey shows less consumption variability in rural areas than in urban areas, but given that there are far fewer data points to represent rural areas relative to urban areas this is hardly surprising.

The consequences of this stratification and sampling methodology mean that some caution should be taken when interpreting results that are particularly relevant for rural populations. Since fewer data points were collected to represent rural households, there is effectively a larger degree of extrapolation. Specifically, each individual surveyed in an urban area represents on average 56 individuals in the total population, while each individual surveyed in a rural area represents on average 485 individuals in the total population.

Dynamics of poverty and vulnerability are assessed using the 2003 ECOSIT national household survey. This survey classified the country into 12 regions and 31 subregions. In total 6,695 households were surveyed, which covered 39,356 individuals. Four urban areas were covered in this survey: N'Djamena, Abeche, Moundou, and Sarh. This corresponds to 1,880 households, of which 1,021 were in N'Djamena. Using the weighting methodology provided by the National Statistics Office this survey corresponds to representing a population of 7,501,152.

There is a clear difference in classification of urban households between the 2011 survey, where each region is considered to have urban households, and the 2003 survey, where urban households are only considered as belonging to the cities of N'Djamena, Abeche, Moundou, and Sarh. This means it is not possible to make direct comparisons of poverty and vulnerability in urban areas between the two years. Nor is it possible to make assessments of the scale of rural-urban migration using these data sources.

While there is a difference in the number of regions between the 2011 (20) and 2003 (12) surveys, it has been possible to combine regions in the 2011 survey to aggregate up to a total of 12 regions. This allows for a comparison on the regional incidence of poverty and vulnerability between the two years.

Measures of food insecurity were gathered from various sources. The UNDP report, *Cadre D'Accélération des OMD: Sécurité Alimentaire et Nutritionnelle* published in 2012 included an assessment of food insecurity for December 2011.⁶⁷ A joint FAO, WFP, *Ministère de l'Agriculture et de l'Irrigation* (Agriculture and Irrigation Ministry) report included an assessment of food insecurity for November 2013.⁶⁸ A contact at the FAO involved in coordinating the data on food insecurity for Chad provided an assessment for March 2014.⁶⁹

⁶⁷ UNDP (2012).

⁶⁸ VAM (2013a).

⁶⁹ Data provided by Marianne Tinlot, FAO.

3. Calculations, OLS Regressions (Chapter 2)

OLS Regression: Dep Var = log(total consumption 2011)					
Male Household Head (HHH)	0.03	0.05	0.04	0.02	-0.06
	[0.03]	[0.03]**	[0.04]	[0.01]	[0.01]***
Log (age HHH)	-0.19	-0.13	-0.24	-0.17	-0.17
	[0.05]***	[0.04]***	[0.05]***	[0.01]***	[0.02]***
Log (HH size)	-0.59	-0.47	-0.61	-0.51	-0.53
	[0.04]***	[0.03]***	[0.04]***	[0.01]***	[0.01]***
Prim. Educ. HHH	0.01	0.04	-0.01	0.02	0.04
	[0.03]	[0.03]	[0.04]	[0.01]***	[0.01]***
Sick in last 30 days	0.11	0.10	0.13	0.10	0.11
	[0.02]***	[0.01]***	[0.02]***	[0.01]***	[0.01]***
Dirt or straw walls	-0.02	-0.11	0.01	-0.02	0.01
	[0.05]	[0.03]***	[0.07]	[0.01]	[0.02]
Dirt or straw roof	-0.30	-0.32	0.04	-0.39	-0.41
	[0.05]***	[0.03]***	[0.08]	[0.01]***	[0.02]***
Self Emp Non-Ag	0.42	0.06	0.41		
	[0.06]***	[0.05]	[0.07]***		
Self Emp Ag	0.06	-0.14	0.08		
	[0.04]	[0.05]**	[0.05]*		
Wage Public	0.68	0.20	0.74		
	[0.06]***	[0.05]***	[0.11]***		
Wage Private	0.34	0.00	0.25		
	[0.06]***	[0.05]	[0.11]**		
Working HHH	-0.20	0.00	-0.17		
	[0.05]***	[0.05]	[0.05]***		
Log (cordes of land)	-0.02	-0.04	0.03	0.02	
	[0.01]	[0.01]***	[0.02]*	[0.00]***	
Log (TLU)	0.15	0.06	0.18		0.13
	[0.02]***	[0.02]***	[0.02]***		[0.00]***
Log(km nearest mkt)	0.01	-0.04	0.04	-0.01	-0.00
	[0.02]	[0.03]	[0.02]**	[0.01]**	[0.01]
Log(km nearest hlth)	-0.11	0.01	-0.09	-0.11	-0.11
	[0.02]***	[0.02]	[0.02]***	[0.01]***	[0.01]***
Constant	14.61	14.37	14.22	14.59	14.56
	[0.18]***	[0.14]***	[0.22]***	[0.05]***	[0.07]***
Sample	Full	Urban	Rural	Agri.	Pastoral
R ²	0.23	0.22	0.18	0.15	0.18
N	49,985	33,126	16,859	31,250	19,566

Note: Excluded category for employment type is unemployed or inactive. Cordes is a unit used to measure land and is equivalent to approximately 0.5 hectares.

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OLS Regression: Dep Var = log(total consumption 2003)			
Male HHH	0.15 [0.03]***	0.09 [0.05]*	0.18 [0.03]***
Log (age HHH)	-0.10 [0.04]**	-0.17 [0.09]**	-0.13 [0.05]***
Log (HH size)	-0.62 [0.03]***	-0.48 [0.05]***	-0.62 [0.03]***
Prim. Educ. HHH	-0.08 [0.03]***	-0.01 [0.05]	-0.11 [0.03]***
Sick in last 30 days	0.02 [0.01]	0.06 [0.02]**	0.03 [0.02]*
Dirt or straw walls	-0.24 [0.04]***	-0.22 [0.05]***	-0.18 [0.05]***
Dirt or straw roof	0.14 [0.15]	-0.32 [0.16]*	0.20 [0.16]
Self Emp Non-Ag	0.19 [0.08]**	0.28 [0.12]**	0.15 [0.10]
Self Emp Ag	-0.20 [0.07]***	-0.07 [0.14]	-0.13 [0.09]
Wage Public	0.39 [0.09]***	0.37 [0.13]***	0.34 [0.11]***
Wage Private	0.29 [0.08]***	0.23 [0.12]*	0.20 [0.12]*
Working HHH	0.17 [0.07]**	-0.11 [0.12]	0.15 [0.09]
Constant	13.22 [0.18]***	14.02 [0.25]***	13.12 [0.19]***
Sample	Full	Urban	Rural
R^2	0.22	0.16	0.20
N	39,356	10,939	28,417

Note: Excluded category for employment type is unemployed or inactive. Cordes is a unit used to measure land and is equivalent to approximately 0.5 hectares.

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