

Country strategic plan revision

Chad country strategic plan, revision 2

| | Current | Change | Revised |
|-------------------------|---------------------------------|---------------|---------------------------------|
| Duration | 1 March 2024 – 31 December 2028 | No change | 1 March 2024 – 31 December 2028 |
| Beneficiaries | 4,786,863 | - 434,165 | 4,352,698 |
| Total cost (USD) | 2,647,685,491 | - 560,292,791 | 2,087,392,699 |

DELEGATION OF AUTHORITY FOR APPROVAL: ED

1. RATIONALE

1. Food insecurity in Chad continues to reach high levels, according to the latest Cadre Harmonisé¹, with over 3.3 million people facing food insecurity (phase 3+) during the lean season period (June – August 2025) and persistently elevated malnutrition levels (acute malnutrition at 10.89 percent and chronic malnutrition at 36.7 percent according to the latest SMART²).
2. Since the start of the conflict in Sudan, Chad has been receiving a steady influx of refugees crossing the border in the East. To date, Chad hosts 1.5 million refugees and asylum seekers which includes over 890,500 refugees³ and asylum seekers from Sudan since the start of the crisis in April 2023.
3. Since the approval of the CSP in early 2024, funding prospects have declined, while the response strategy has shifted toward greater emphasis on self-reliance, durable solutions and resilience. This requires an adjustment of caseload and a recalibration of planned assistance.
4. This revision therefore reduces the CSP overall budget by 21 percent and aligns beneficiary planning and activities with current resourcing levels and the updated programmatic approach.
5. This revision applies from 2025 until the end of the CSP in 2028.

2. CHANGES

Strategic orientation

6. Through this revision output 1.2 “Emergency School Feeding”, under CSP outcome 1, activity 1 is deactivated and merged with the regular school feeding under Activity 2 to

¹ <https://fscluster.org/fr/chad/document/tchad-cadre-harmonise-resultats-de-0>

² [Smart survey 2024 report](#)

³ [UNHCR Flash Update-New Sudanese Refugee Influx into Chad of 20 November 2025](#)

facilitate its implementation. Therefore, the related caseload is transferred from Activity 1 to Activity 2. Moreover, throughout this revision, WFP will enhance activities strengthening capacities and enabling the government, along with other stakeholders, to actively support national objectives in food security and nutrition.

CSP outcomes

7. **Under CSP outcome 1**, the number of beneficiaries will be reduced for both the assistance to refugees, returnees and host population as well as populations affected by the lean season, while anticipatory action will gradually increase. Starting from 2026, assistance will be vulnerability and capacity based instead of status based for the crisis in the East. In addition, assistance to new refugees will be provided for a maximum of six months, until their vulnerability and capacity is assessed after which those in need will transition to resilience building activities or government systems. Following this period, refugees assessed as having sufficient capacity will transition to resilience-building activities or, where feasible, government systems, while those identified as highly vulnerable will continue to receive humanitarian assistance from WFP beyond six months, in line with needs, resource availability and national system capacity.
8. **Management of Moderate Acute Malnutrition (MAM) in refugee and returnees' camps** will remain a priority, as malnutrition rates are not expected to improve significantly. Assistance will focus on sites receiving new arrivals or where aggravating factors—such as increased disease prevalence—are observed. Targeting for prevention will be adjusted from 12.5 percent to 9 percent of the general food distribution caseload, based on vulnerability levels and the latest hotspot analysis, which classifies most of the East as priority 2. Complementary GFD, resilience, and continuum-of-care interventions with partners will support improved nutritional outcomes. As part of the durable solutions strategy, MAM management will gradually shift toward prevention and nutrition-sensitive approaches.
9. **Under CSP outcome 2**, Emergency School Feeding (ESF) in camps will be integrated into regular school feeding, which already includes Home-Grown School Feeding (HGSF). For 2025, the caseload is revised from 420,360 to 375,655 children, including 110,000 in camps (with preschoolers) and 110,000 supported through HGSF, with the remainder assisted through the traditional school feeding model. From 2026, a phased transition toward HGSF will begin, progressively increasing reliance on local producers and resilience activities while reducing direct food deliveries. A yearly caseload increase of 10 percent is planned to reflect pupil turnover, reaching 500,000 children by 2028. The number of feeding days per school year is adjusted from 180 to 160.
10. **For activity 3**, nutrition efforts will focus on improving programme quality and operational efficiency. To achieve this, the number of health centres providing MAM supplementation services will be significantly reduced, resulting in a 40 percent decrease in assisted beneficiaries. The reduction in coverage was based on a contextual analysis, complementarity, and the organization's operational capacities. Analysis of data from health centers revealed that a significant number of facilities had low cases of MAM, resulting in inefficient use of resources. Priority areas were selected jointly with the government through the Ministry of Health to ensure continuity of care. The facilities selected for continued support are those where partners are present and referral systems are strong, ensuring comprehensive care for beneficiaries. The intervention will concentrate on malnutrition hotspots, prioritizing health facilities with high caseloads and a co-presence of UNICEF to ensure a strong continuum of care: For example, in high-risk

areas where the WFP is withdrawing, UNICEF will provide care based on the revision of the national care protocol resulting from the latest WHO recommendations of 2023.

11. Community-based nutrition programmes using the FARNE approach⁴ will be reinforced, in line with WHO guidelines. This concentration of activities based on an integrated approach can improve the quality of programmes, monitoring, and integration with other services (e.g., FARNE and local nutritional products). WFP will continue MAM supplementation in areas where it is already operational, with a gradual shift from imported products to locally produced fortified nutrition commodities. In areas where WFP is not present, UNICEF will ensure continuity of support in coordination with the Ministry of Health, as part of a broader transition plan.
12. **Resilience building (CSP outcome 3)** will see a progressive increase of beneficiaries as they are transitioned from crisis response activity (SO1) to resilience building activities with a more consistent increase from January 2026 onwards. These are principally refugees no longer categorized as eligible for humanitarian assistance following the results of the vulnerability-based targeting and includes IDPs from the Lake region. The progressive increase will start in 2026 with a 38 percent increase, 30 percent in 2027 and 25 percent in 2028. Current targeted zones and activities will remain the same to ensure sustained impact.
13. **Under CSP Outcome 4**, as beneficiaries transition from emergency response, activity five will drastically change, with caseloads scaling up nearly fivefold starting from 2026, followed by a gradual increase averaging 15 percent per year. Beneficiaries assisted through the social protection programme will either receive a top-up during to the lean season response and/or general distributions based on their vulnerability status after the phase out from emergency assistance.
14. Transfer modalities: Through this revision adjustments will be made to rations to ensure nutritional adequacy and transfer modalities adapted with changed needs. These are detailed in table 2 below. WFP will also increase the use of cash transfers versus in-kind assistance for its GFD activity.
15. M&E: Through this revision WFP will ensure that the Minimum Monitoring Requirements (MMRs) are respected. WFP in Chad will increasingly use Third Party Monitoring (TPM) to ensure adequate monitoring of activities in hard – to – access zones.
16. Protection and accountability to affected people: WFP will continue mainstreaming protection and will explore integrated protection approaches through its community engagement strategy. This strategy includes mobilizing community members as focal points for two-way communication. WFP will also reinforce the Community Feedback Mechanism (CFM) in alignment with the corporate assurance measures. Particular attention will be given to conflict sensitivity to ensure that interventions do not exacerbate existing tensions and instead contribute to social cohesion in all intervention areas.
17. Risk Management: WFP will scale up SCOPE registration and reinforce Beneficiary Identity Management (IDM) systems to reduce errors and fraud. An expansion of biometric registration through SCOPE to ensure accurate beneficiary targeting and reduce

⁴ Foyer d'Apprentissage et de Réhabilitation Nutritionnelle et d'Eveil

duplication is also envisaged. WFP is also working to adjust its Cooperating Partners strategy to programme shift.

Beneficiary analysis

| | | TABLE 1: BENEFICIARIES BY CSP OUTCOME | | | | | | | | |
|--|---------------|---------------------------------------|--------------------|--------------------|------------------|------------------|------------------|------------------|------------------|------------------|
| | | | | 2024 | 2025 | 2026 | 2027 | 2028 | Total | |
| CSP Outcome 1 | Activity 1 | Output 1 | Current | 2,383,437 | 2,170,418 | 1,837,433 | 1,631,795 | 1,326,467 | 2,383,437 | |
| | | | Increase/ decrease | - | 164,582 | -111,642 | -727,254 | -480,676 | -1,035,896 | |
| | | | Revised | 2,383,437 | 2,335,000 | 1,725,791 | 904,541 | 845,791 | 1,347,541 | |
| | | Output 3 | Current | 78,600 | 65,800 | 47,600 | 40,950 | 33,600 | 78,600 | |
| | | | Increase/ decrease | - | 94,200 | 241,337 | 247,987 | 324,785 | 251,135 | |
| | | | Revised | 78,600, | 160,000 | 288,937 | 288,937 | 358,385 | 329,735 | |
| CSP Outcome 2 | Activity 2 | Output 4 | Current | 420,360 | 420,360 | 498,840 | 498,840 | 554,400 | 554,400 | |
| | | | Increase/ decrease | - | -44,705 | -78,747 | -34,415 | -43,535 | -53,692 | |
| | | | Revised | 420,360, | 375,655 | 420,093 | 464,425 | 510,865 | 500,708 | |
| | Activity 3 | Output 5 | Current | 1,025,500 | 915,850 | 819,750 | 778,950 | 741,850 | 1,015,498 | |
| | | | Increase/ decrease | - | -260,700 | -184,400 | -148,600 | -136,500 | 208,352 | |
| | | | Revised | 1,025,500 | 655,150 | 635,350 | 630,350 | 605,350 | 1,223,850 | |
| | | Output 6 | Current | 30,000 | 30,000 | 30,000 | 30,000 | 40,000 | 40,000 | |
| | | | Increase/ decrease | - | -22,000 | -10,000 | -5,000 | -10,000 | 0 | |
| | | | Revised | 30,000, | 8,000 | 20,000 | 25,000 | 30,000 | 40,000 | |
| | CSP Outcome 3 | Activity 4 | Output 7 | Current | 385,500 | 424,050 | 487,662 | 560,814 | 644,928 | 644,928 |
| | | | | Increase/ decrease | - | 0 | 97,530 | 199,938 | 306,006 | 691,506 |
| | | | | Revised | 385,500 | 424,050 | 585,192 | 760,752 | 950,934 | 1,336,434 |
| CSP Outcome 4 | Activity 5 | Output 11 | Current | 30,000 | 40,000 | 40,000 | 50,000 | 60,000 | 70,000 | |
| | | | Increase/ decrease | - | 0 | 0 | 181,800 | 211,800 | 231,800 | |
| | | | Revised | 30,000 | 40,000 | 40,000 | 231,800 | 271,800 | 301,800 | |
| Total beneficiaries (without overlap) | | | Current | 4,353,397 | 4,066,478 | 3,771,285 | 3,601,349 | 3,411,245 | 4,786,863 | |
| | | | Increase/ decrease | - | -346,573 | -121,872 | -447,294 | 3,630 | -434,165 | |
| | | | Revised | 4,353,397 | 3,719,905 | 3,649,413 | 3,154,055 | 3,414,875 | 4,352,698 | |

3. COST BREAKDOWN

TABLE 2: COST BREAKDOWN OF THE REVISION ONLY (USD)

| CSP outcomes | CSP 1 | CSP 2 | CSP 3 | CSP 4 | CSP 5 | Total |
|------------------------|------------------------|----------------------------|----------------------------|----------------------------|------------------------|----------------------|
| Focus area | Crisis response | Resilience Building | Resilience Building | Resilience Building | Crisis response | |
| Transfer | -412,858,996 | -186,972,542 | 60,603,068 | 36,342,268 | -1,346,979 | -504,233,181 |
| Implementation | - 15,195,635 | - 16,842,989 | 2,586,253 | 1,554,456 | - 185,709 | - 28,083,624 |
| Direct support costs | | | | | | 6,229,143 |
| Subtotal | | | | | | - 526,087,663 |
| Indirect support costs | | | | | | - 34,205,129 |
| TOTAL | | | | | | - 560,292,791 |

TABLE 3: OVERALL CSP COST BREAKDOWN FOLLOWING THE REVISION (USD)

| CSP outcome | 1 | 2 | 3 | 4 | 5 | Total |
|------------------------|--------------------|---------------------|---------------------|---------------------|--------------------|----------------------|
| Focus area | Crisis Response | Resilience Building | Resilience Building | Resilience Building | Crisis Response | |
| Transfer | 772,631,378 | 427,753,608 | 360,744,362 | 71,918,683 | 90,861,099 | 1,723,909,130 |
| Implementation | 78,167,843 | 44,259,468 | 32,631,630 | 7,572,468 | 5,031,831 | 167,663,240 |
| Direct support costs | 28,536,648 | 17,680,435 | 15,930,718 | 3,317,936 | 3,700,146 | 69,165,884 |
| Subtotal | 879,335,869 | 489,693,511 | 409,306,710 | 82,809,087 | 99,593,076 | 1,960,738,254 |
| Indirect support costs | 57,156,831 | 31,830,078 | 26,604,936 | 5,382,591 | 5,680,009 | 126,654,445 |
| TOTAL | 936,492,701 | 521,523,589 | 435,911,647 | 88,191,678 | 105,273,085 | 2,087,392,699 |