

## Village: Beltebei

The village is located about 10 km east of Um Dukhun town. It is a central hub for seven surrounding villages (Dar Elsalam, Jawkhin, Mediseta, Abu khashim, Hejirata, El Araga). The village's total population before the conflict was app. 8000 households while the current returnee population is an estimated 1490 HHs, and app. 7000 households surrounding Beltebei as a cluster. 500 have not yet returned to Dar Elsalam and remain in Um Dafog, Kabong and Chad. The displacement was during 2013 while return took place in January 2016.

	Situation and on-going response	Gaps and challenges	Needed activities		
			Short-term	Mid-term	Longer term
<b>Output 1: Conducive environment (peacebuilding, protection, RoL)</b>	<p>Security situation in the area is calm with GoS police presence.</p> <p>Existence of community development committees (CDCs) and farm protection committees.</p>	<p>Tribal tensions remain and population as well as livestock movements can lead to further tensions or conflict.</p> <p>Proliferation of arms is one of the key concern for permanent return</p> <p>Youth are poorly represented in those committees.</p> <p>According to key informant interviews, cases of child marriage, FGM/C, and children affected by conflict an issue.</p> <p>Lack of birth registration and loss of certificates flagged.</p>	<p>UNAMID and GoS police patrols.</p> <p>Demarcation of existing animal migratory routes will help in reducing tension between animal herders and farmers.</p> <p>Establishment of community development associations and strengthening and training of community and women/youth.</p> <p>Provide integrated PSS services and deploy emergency social workers to establish referral pathways to social services.</p> <p>Awareness and training to youth on preventing violence (against children) and promoting peaceful social coexistence and life skills.</p>	<p>Capacity-building and awareness raising of GoS police</p> <p>Peaceful coexistence, protection and reconciliation training and support to community leaders, returnees, youth and local authorities to promote positive social change.</p> <p>Demarcation of existing animal migratory routes will help in reducing tension between animal herders and farmers.</p>	<p>Strengthening social, security and justice institutions.</p> <p>In collaboration with authorities and GoS strengthen protection and provision of security to returnees.</p>
<b>Output 2: Housing and land</b>	<p>Shelter built by local material. In 2016, TGH conducted NFI distribution and shelter construction to most vulnerable groups (under RRF and ECHO)</p>	<p>Houses and dwellings mostly built by local material.</p>	<p>Distribution of some NFIs to PSNs and EVIs (after further assessment) and provision of transitional shelter</p>	<p>Provision of semi-permanent construction as well as local material for PSNs and EVIs</p>	<p>Provision of permanent shelters to PSNs and most EVIs.</p>

### Output 3: Access to and availability of basic services

<p><b>Health and Nutrition</b></p>	<p>No PHC or nutrition services (OTP/SFP) on the ground</p> <p>There used to be a nutrition outreach program in 2015 (closed because low patient (SAM &amp; MAM) uptake).</p> <p>Nearest feeding center is UMD town 3 hours walk to reach</p> <p>No mothers support group active to strengthen IYCF counselling</p> <p>The area had been reached by VitA supplementation services in the last campaign</p>	<p>The main diseases reported among the returnees are Malaria, Acute respiratory infection, diarrhea and eyes infection</p> <p>Given population size &amp; settlement of the community in close proximity, health &amp; nutrition services urgently needed.</p> <p>Considering current condition health &amp; Nutrition (OTP &amp; SFP) program may be a priority in the area.</p>	<p>Establish a health center and/or extend mobile services from other clinics.</p> <p>Establishment of mother support groups and CHWs</p> <p>SMoH to deploy key technical staff to provide effective health care services.</p> <p>Improve community awareness on nutrition</p>	<p>Staff need to be trained on PHC packages BEMOC, IMCI, surveillance and diagnostic skills.</p> <p>Provide training to MSGs and CHWs on how to measures MUAC to strengthening the referral system</p> <p>Provision of regular drugs supply and establish medical referral</p> <p>Establishment of Nutrition Volunteers network for screening and referral to nearest nutrition services</p>	<p>Reopen Beltebai OTP center to enable the communities in surrounding areas access service</p>
<p><b>WASH</b></p>	<p>There are two emergency mini – water yards. The community’s main sources of water are traditional hand dug wells and the functioning mini water yard. The distance from residential areas to the mini yard is 2 km. A third well is under construction by TGH.</p> <p>Average 2-3 households share 1 latrine. Common practice of open defecation. Only small percentage use pit latrine. Poor personal hygiene among both children and adults. 100 latrines will be distributed in the coming weeks.</p> <p>Water and sanitation committee training implemented by NEF with OFDA funding for selected community members.</p>	<p>1 water yard dysfunctional and depletion in mini water yard. Water from hand dug wells far from settlements and water contaminated.</p> <p>Lack of cost recovery system (tariff) and water management committees.</p> <p>Lack of containers for HH storage.</p> <p>Chlorination not regular and lack of awareness in water treatment methods.</p>	<p>Drilling of borehole urgently needed.</p> <p>Rehabilitation of the existing hand pumps.</p> <p>Separation of animal water sources from humans.</p> <p>Implementation of CLTS in main central villages</p> <p>Provision of hygiene kits to most vulnerable groups.</p> <p>Further strengthening of Hygiene and Sanitation Committee and Village Health Committees.</p>	<p>Installation of water yards</p> <p>Establish, train and equip water management committees.</p> <p>Provision of training in water management, treatment, and safety planning.</p> <p>Training of community hygiene promoters.</p> <p>Establishment of solid waste management system</p>	<p>Upgrading existing water yards with solar system.</p> <p>Installation of cost recovery systems.</p>

	<b>EDUCATION</b>	<p>1 basic functional school with four permanent classrooms a capacity of up to 146 student attending on a daily basis.</p> <p>4 permanent classrooms and 2 offices.</p> <p>3 volunteer teachers are available.</p>	<p>Number of school aged children out of school are estimated to be 3000 children (50% female).</p> <p>Volunteer teachers not trained.</p> <p>Shortage of teaching and learning materials, no seating and chairs</p> <p>Need for additional classrooms to improve access</p> <p>No water or feeding at school</p>	<p>Expansion of learning spaces, and provision of WASH facilities</p> <p>Provide training for teachers on core subjects and on the job training</p> <p>Provision of teaching and learning materials Establishment of PTAs</p> <p>Provision of school feeding.</p>	<p>Training for teachers and PTAs</p> <p>Provision of education supplies</p>	<p>Training for teachers and PTAs</p>
<b>Output 4: Livelihood and IGA/Employment opportunities</b>	<p>Limited availability and access to food and return communities, livelihoods mainly depend on agro-pastoral practices, farming and rearing animals and food borrowing / begging from Nomads.</p> <p>Access to winter and off-season farming.</p> <p>Market only operates 1 day / week</p>	<p>Poor crop production last year due to shortage in rainfall (especially cereals like millet and sorghum).</p> <p>Lack of animal health services. There is high need in IGA linked with water transportation + rainy season production + livestock + improvement</p>	<p>Provide emergency food distribution and blanket supplementary feeding programming for children under five, pregnant and lactating women.</p> <p>Agriculture inputs and provision of seeds and tools, animal traction and extension services.</p> <p>Animal vaccination campaigns and re-stocking.</p>	<p>Establishment and stocking of veterinary centre</p> <p>Training of community animal health workers.</p> <p>Provision of agro-enterprise training.</p> <p>Vocational training for women and youth.</p>	<p>Market construction in central village areas.</p> <p>Conflict management training for farm protection committees. Strengthen the role of women in committees.</p>	

## Village: Garaaya

24 km South of Um Dukhun town with one of the bigger return populations. The village counted 2500 HHs before the displacement and numbers post-return stand at around 2955 HHs. People displaced to Chad (Abukadam refugee camp) in April 2013 and returned throughout 2015, 2016 and 2017, and more displaced are willing to return to the area. The number of returnees increased due to the influx of people from other villages to Garaaya, mainly from Boram, Kabon, Markondi and Amlabasa.

	Situation and on-going response	Gaps and challenges	Needed activities		
			Short-term	Mid-term	Longer term
<b>Output 1: Conducive environment (peacebuilding, protection, RoL)</b>	<p>Security situation in the area is calm with GoS police presence.</p> <p>Proliferation of arms is one of the key concern for conducive and permanent return</p> <p>Existence of community development committees (CDCs) and farm protection committees.</p>	<p>Tribal tensions remain and population as well as livestock movements can lead to further tensions or conflict.</p> <p>Youth are poorly represented in those committees.</p> <p>According to key informant interviews, cases of child marriage, FGM/C, and children affected by conflict an issue.</p> <p>Lack of birth registration and loss of certificates flagged.</p>	<p>UNAMID and GoS police patrols.</p> <p>Demarcation of existing animal migratory routes will help in reducing tension between animal herders and farmers.</p> <p>Establishment of community development associations and strengthening and training of community and women/youth.</p> <p>Provide integrated PSS services and deploy emergency social workers to establish referral pathways to social services.</p> <p>Awareness and training to youth on preventing violence (against children) and promoting peaceful social coexistence and life skills.</p>	<p>Capacity-building and awareness raising of GoS police</p> <p>Peaceful coexistence and reconciliation training and support to community leaders, returnees, youth and local authorities to promote positive social change.</p> <p>Demarcation of existing animal migratory routes will help in reducing tension between animal herders and farmers.</p>	<p>Strengthening social, security and justice institutions.</p> <p>In collaboration with authorities and GoS strengthen protection and provision of security to returnees.</p>
<b>Output 2: Housing and land</b>	<p>Shelter built by local material. In 2016, TGH conducted NFIs/shelter distribution to most vulnerable groups (under RRF and ECHO)</p>		<p>Distribution of some NFIs to PSNs and EVIs (after further assessment) and provision of transitional shelter</p>	<p>Provision of semi-permanent construction as well as local material for PSNs and EVIs</p>	<p>Provision of permanent shelters with focus on PSNs and most EVIs.</p>

**Output 3: Access to and availability of basic services**

**Health and Nutrition**

One mobile clinic has been established by IMC for Garaaya and Mudaraf. Services include health care & nutrition program since May 2016 as an outreach activity, incl. vaccination and reproductive health care.

Because of the high health demand & population size the clinic will have static program in the 2nd quarter of 2017.

An estimated 590 aged under 5 children living in the area. SAM children access services from existing OTP in the area.

10 Mother support group (MGS) for infant and young child counselling and BCC massages. UNICEF support SMOH storage enough RUTF at the feeding center.

Sustainability of health services not guaranteed as no government ownership.

The main diseases reported among the returnees are Malaria, Acute respiratory infection, diarrhea and eye infections.

Provision of essential drugs and additional supplies (RUTF and routine medications) to OTP

Link mothers support group with existing feeding centers in order to improve the referral and screening

Establish medical referral.

Training of health workers on PHC packages BEMOC, IMCI, surveillance and diagnostic skills

Provide training to MSGs and CHWs on how to measures MUAC to strengthening the referral system

Liaise and support SMOH to deploy health staff

**WASH**

3 emergency water points for more than 3,000 HH producing about 81 cubic meters / day.

Community depends on traditional hand dug wells and surrounding communities share resources with Garaaya returnees.

More than 655 shared improved pit latrines constructed.

Poor personal hygiene among both children and adults. Broken and dirty water containers. Zero solid waste management - Garbage, trash and animal dung are scattered randomly.

Need for improved water source has been ranked as community number one priority.

2 water sources face big dropdown, particularly during dry season.

Broken and dirty water containers.

No solid waste management - garbage, trash and animal dung scattered randomly.

Lack of materials, resources and awareness for personal hygiene.

Upgrading of the existing hand pumps

Implementation of CLTS and provision of hygiene kits to Extremely Vulnerable Groups

Upgrading existing water hand pumps to water yards

Formation and training of Hygiene and Sanitation Committee and Village Health Committees

Training in water management, treatment, and safety planning

Installation of water yards supported with solar system

	<b>EDUCATION</b>	<p>1 basic school with two temporary classrooms and one volunteer teacher. Number of children enrolled is 65.</p> <p>3 religious Quaran schools in the village.</p>	<p>No pre-schools and around 600 boys and 800 girls at school age without access to education.</p>	<p>Accelerated learning programmes (ALP)</p> <p>Construction of 8 classrooms, school offices and provision of WASH facilities</p> <p>Provision of education supplies</p> <p>Establishment of PTAs</p> <p>Provision of school feeding.</p>	<p>Training for teachers and PTAs</p>	<p>Staffing through state government and support to teachers.</p>
<b>Output 4: Livelihood and IGA/Employment opportunities</b>		<p>Limited availability and access to food and return communities' livelihoods mainly depend on agro-pastoral practices, farming and rearing animals and food borrowing / begging from Nomads.</p> <p>Mainly depend on pastoral practices, farming and rearing animals.</p> <p>Village has access to winter and off-season farming.</p> <p>WFP has distributed food rations to 582 return families.</p>	<p>No animal health services in the area and livestock requires vaccination services</p> <p>Poor farming production last year was due to shortage in rainfall in the middle of the year</p> <p>Markets open only one day per week</p>	<p>Restocking of livestock (goat and donkey) highly needed.</p> <p>Food for work and agro-enterprise training</p> <p>Agriculture inputs and provision of seeds and tools</p>	<p>Provide emergency food distribution and blanket supplementary feeding programming for children under five, pregnant and lactating women. Vocational training for women and youth</p> <p>Conflict management training for farm protection committees. Strengthen role of women in committees.</p>	<p>Support to market extension and value chains</p>

## Village: Magan

Located 53 km East of Um Dukhun town. This is the remotest village visited during the mission, with a total of 3500 returnee HHs. Before displacement Magan had up to 8000 HHs, who were mainly displaced to Chad in 2003 and to Um Dukhun town, Mukjar, Kabar, Kabong, Rihid El Bardi and Abunono in 2013. People started returning in 2015, throughout 2016, and now continuing in 2017. 13 tribes are living in Magan villages, who said they returned due to improved security situation. During the DTM mission, 870 returnees were registered in Magan village itself. Total population as a cluster is reported to be app. 8,000 HH

	Situation and on-going response	Gaps and challenges	Needed activities		
			Short-term	Mid-term	Longer term
<b>Output 1: Conducive environment (peacebuilding, protection, RoL)</b>	<p>Security situation in the area is calm with GoS police presence.</p> <p>Proliferation of arms is one of the key concern for conducive and permanent return</p> <p>Lack of any kind of community committee.</p>	<p>Tribal tensions remain and population as well as livestock movements can lead to further tensions or conflict.</p> <p>According to key informant interviews, cases of child marriage, FGM/C, and children affected by conflict an issue.</p> <p>Lack of birth registration and loss of certificates flagged.</p>	<p>UNAMID and GoS police patrols.</p> <p>Demarcation of existing animal migratory routes will help in reducing tension between animal herders and farmers.</p> <p>Establishment of community development associations and strengthening and training of community and women/youth.</p> <p>Provide integrated PSS services and deploy emergency social workers to establish referral pathways to social services.</p> <p>Awareness and training to youth on preventing violence (against children) and promoting peaceful social coexistence and life skills.</p>	<p>Peaceful coexistence and reconciliation training and support to community leaders, returnees, youth and local authorities to promote positive social change.</p> <p>Demarcation of existing animal migratory routes will help in reducing tension between animal herders and farmers.</p> <p>Establishment of farm protection committees and other village committees.</p>	<p>Strengthening social, security and justice institutions.</p> <p>In collaboration with authorities and GoS strengthen protection and provision of security to returnees</p>
<b>Output 2: Housing and land</b>	<p>Poor housing situation, available shelter built from local material. More detailed assessment by TGH on-going.</p>	<p>Not been targeted yet, and the general state of housing conditions is dire and in need of rehabilitation</p>	<p>Provision of NFIs and improved shelter</p>	<p>Upgrading of shelter to more permanent structures</p>	<p>Improve housing situation through permanent shelters to PSNs and most EVIs.</p> <p>Train community on use of SSB.</p>

**Output 3: Access to and availability of basic services**

<p><b>Health and Nutrition</b></p>	<p>Malaria and Diarrhea are common diseases. Eye infections observed.</p> <p>Health center collapsed</p> <p>Estimated 700 U5 children living in the area. Nearest nutrition services in Um Duhkhun town.</p> <p>Vitamin A supplementation services provided during last campaign and children screened by MUAC during their arrival. UNICEF support SMOH plan to open integrated health and nutrition services in the area.</p>	<p>Health centre needs rehabilitation, equipment and staffing</p> <p>Repeated request by the population of these sites even before the mission.</p> <p>Some factors need consideration for establishment of PHC &amp; Nutrition services: distance &amp; problem of access especially during the rainy season and lack of trained personnel</p>	<p>Rehabilitate existing health centre and establish integrated Nutrition feeding center to treat MAM and SAM cases.</p> <p>Train technical staff to resume delivering health services</p> <p>Extend mobile medical services to the village.</p> <p>Establishment of mother support groups and CHWs and link with CMAM services</p>	<p>Formation and training of Hygiene and Sanitation Committee and Village Health Committees</p> <p>Training on health facility management to ensure sustainability of health services</p> <p>Provide training to MSGs and CHWs on how to measures MUAC to strengthening the referral system</p>	<p>SMoH to deploy key technical health staff</p>
<p><b>WASH</b></p>	<p>Community depends on traditional hand dug wells for drinking water, domestic purposes and for their cattle as well.</p> <p>Widespread open defecation practice and poor personal hygiene.</p> <p>No solid waste management - garbage, trash and animal dung scattered randomly.</p> <p>Water and sanitation committee training implemented by NEF with OFDA funding for selected community members.</p>	<p>Lack of protected water sources.</p> <p>Need for improved water source has been ranked as community number one priority.</p> <p>Lack water containers and utensils for storage.</p> <p>Lack of awareness in water treatment methods.</p> <p>Hand dug wells too far from residential areas.</p>	<p>Upgrading of existing hand dug wells.</p> <p>Separation of human and animal water sources</p> <p>Provision of hygiene kits Extremely Vulnerable Groups.</p> <p>Implementation of CLTS projects clusters and training of community hygiene promotors</p>	<p>Upgrading existing water hand pumps to water yards</p> <p>Provision of training in water management, treatment, and safety planning</p>	

	<b>EDUCATION</b>	<p>One basic school functional with 4 classrooms and 130 students.</p> <p>2 female volunteer teachers.</p> <p>5 Temporary Learning Spaces (TLS) available in school</p> <p>Construction of permanent school in progress through Arab League Foundation.</p>	<p>Lack of education supplies and professional teachers</p>	<p>Provision of education supplies</p> <p>Training for teachers and PTAs</p>	<p>Support MoE and communities to set up education facilities</p>	<p>Provision and training of staff</p>
<b>Output 4: Livelihood and IGA/Employment opportunities</b>	<p>Livelihoods mainly depend on agro-pastoral practices, farming and rearing animals.</p> <p>Access to winter farming, but poor farming production last year was due to shortage in rainfall</p> <p>Markets open 1 day/ week for meat and small crop sell</p>	<p>No animal health services in the area and absence of animal health workers (CAHWs)</p>	<p>Re-stocking and vaccination of livestock</p> <p>Support for agricultural production</p>	<p>Expansion and improvement of local market</p>	<p>Connection of market to bigger town markets and value chains.</p>	

## Village: Elsinan

28 km east of Um Dukhun town. Before displacement, population was estimated at app. 3000 HHs. People displaced to Um Dukhun town, and Dombastat in Chad during 2013. Return took place in May 2016. The majority of people there belong to Maseria tribe.

	Situation and on-going response	Gaps and challenges	Needed activities		
			Short-term	Mid-term	Longer term
<b>Output 1: Conducive environment (peacebuilding, protection, RoL)</b>	<p>Security situation in the area is calm.</p> <p>Lack of community development committees (CDCs) and farm protection committees.</p>	<p>No police presence.</p> <p>Tribal tensions remain and population as well as livestock movements can lead to further tensions or conflict.</p> <p>According to key informant interviews, cases of child marriage, FGM/C, and children affected by conflict an issue.</p> <p>Lack of birth registration and loss of certificates flagged.</p>	<p>UNAMID and GoS police patrols.</p> <p>Demarcation of existing animal migratory routes will help in reducing tension between animal herders and farmers.</p> <p>Establishment of community development associations and strengthening and training of community and women/youth.</p> <p>Provide integrated PSS services and deploy emergency social workers to establish referral pathways to social services.</p> <p>Awareness and training to youth on preventing violence (against children) and promoting peaceful social coexistence and life skills.</p>	<p>Peaceful coexistence and reconciliation training and support to community leaders, returnees, youth and local authorities to promote positive social change.</p> <p>Demarcation of existing animal migratory routes will help in reducing tension between animal herders and farmers.</p> <p>Establishment of community development and farm protection committees.</p>	<p>Strengthening social, security and justice institutions.</p>
<b>Output 2: Housing and land</b>	<p>General state of housing conditions is dire and in need of rehabilitation</p>		<p>Distribution of some NFIs to PSNs and EVIs (after further assessment) and provision of transitional shelter</p>	<p>Provision of semi-permanent construction as well as local material for PSNs and EVIs</p>	<p>Provision of permanent shelters with focus on PSNs and most EVIs.</p>

<b>Output 3: Access to and availability of basic services</b>	<b>Health and Nutrition</b>	<p>There is no clinic.</p> <p>Routine vaccination are going on during market days.</p> <p>Estimated 600 U5 children living returned in May 2016. Nearest Nutrition services are in Um Dukhun town.</p> <p>Children were reached with Vitamin A supplementation services during the last campaign and screened by MUAC during in September 2016.</p>	<p>Village does not have own health clinic, and common diseases include Malaria and Diarrhea as well as untreated infections.</p>	<p>Establishment of integrated Nutrition feeding center to treat MAM and SAM.</p> <p>Select and train community health worker.</p> <p>Establishment of mother support groups and CHWs and link with CMAM services, WASH and Health community network.</p>	<p>Regularly monitor health situation</p> <p>Provide and train technical staff to resume delivering health services (BEMOC, IMCI, surveillance and diagnostic skills)</p> <p>Establish medical referral and provide regular drugs supply</p> <p>Provide training to MSGs and CHWs on how to measures MUAC to strengthening the referral system</p>	<p>Support SMOH in monitoring of health situation and the provision of regular drugs supply</p>
	<b>WASH</b>	<p>Community fetches water from unprotected sources, at shallow open dug wells.</p> <p>In the past three boreholes were constructed by WES and OXFAM, however all have been damaged, except one on the southern side.</p> <p>Small number of latrines constructed (TGH) but low demand on sanitation (a couple of latrines fabricated but not used).</p>	<p>Insufficient / inappropriate water containers.</p> <p>No solid waste management.</p> <p>Lack of awareness, material and resources for personal hygiene.</p>	<p>Repair borehole for water yards</p> <p>Reparation and upgrading of the existing hand pumps</p> <p>Implementation of CLTS and provision of hygiene kits to Extremely Vulnerable Groups</p>	<p>Upgrading existing water hand pumps to water yards</p> <p>Formation and training of Hygiene and Sanitation Committee and Village Health Committees</p> <p>Training in water management, treatment, and safety planning</p> <p>Establish community cost recovery system for maintenance of HP.</p>	<p>Installation of water yards supported with solar system</p>
	<b>EDUCATION</b>	<p>There are no education facilities in Elsinan.</p>		<p>Focus on either supporting MoE and communities to set up education facilities or improving access of children to surrounding education facilities.</p>	<p>Training for teachers and PTAs</p>	<p>Staffing through state government and support to teachers.</p>
<b>Output 4: Livelihood and IGA/Employment opportunities</b>	<p>Mainly depend on agro-pastoral practices, farming and rearing animals.</p> <p>Villagers rely on rain-fed farming only and there is a general lack of food.</p>	<p>No animal health services in the area and livestock requires vaccination campaigns</p> <p>Poor agricultural production last year due to shortage in rainfall in the middle of the year</p> <p>No market in the area.</p>	<p>Restocking of livestock (goat and donkey) highly needed.</p> <p>Food for work and agro-enterprise training</p> <p>Agriculture inputs and provision of seeds and tools</p>	<p>Vocational training for women and youth</p> <p>Conflict management training for farm protection committees. Strengthen role of women in committees.</p>	<p>Support to market extension and value chains</p>	

## Village: Moraya

Located 37 km east of Um Dukhun town, total population before the conflicts was 300 households, all of them displaced. The DTM mission in December 2016 registered 358 IDP returnees and 398 refugee returnees. There are several villages making up the cluster.

The people displaced in 2003 and 2013 and return in June 2015 from Chad, Bendisi, Mukjar, Um Dukhun, Nyala, Markondi and Forobanga. In the second displacement 2013 they mainly went to Um Dukhun, Chad and Dambar. People still have desire to return but fear of security situation in the original village and difficulties of transportation are behind their delay. There is no community infrastructures neither basic services available in the village.

	Situation and on-going response	Gaps and challenges	Needed activities		
			Short-term	Mid-term	Longer term
<b>Output 1: Conducive environment (peacebuilding, protection, RoL)</b>	<p>Security situation in the area is calm.</p> <p>Proliferation of arms is one of the key concern for permanent return</p> <p>Lack of any community committee.</p>	<p>No police presence.</p> <p>Tribal tensions remain and population as well as livestock movements can lead to further tensions or conflict.</p> <p>According to key informant interviews, cases of child marriage, FGM/C, and children affected by conflict an issue.</p> <p>Lack of birth registration and loss of certificates flagged.</p>	<p>UNAMID and GoS police patrols.</p> <p>Demarcation of existing animal migratory routes will help in reducing tension between animal herders and farmers.</p> <p>Establishment of community development associations and strengthening and training of community and women/youth.</p> <p>Provide integrated PSS services and deploy emergency social workers to establish referral pathways to social services.</p> <p>Awareness and training to youth on preventing violence (against children) and promoting peaceful social coexistence and life skills.</p>	<p>Peaceful coexistence and reconciliation training and support to community leaders, returnees, youth and local authorities</p> <p>Demarcation of existing animal migratory routes will help in reducing tension between animal herders and farmers.</p>	<p>Strengthening social, security and justice institutions.</p> <p>In collaboration with authorities and GoS strengthen protection and provision of security to returnees</p>
<b>Output 2: Housing and land</b>	<p>General state of housing conditions is dire and in need of rehabilitation</p>	<p>No shelter assistance has happened yet.</p>	<p>Distribution of some NFIs to PSNs and EVIs (after further assessment) and provision of transitional shelter</p>	<p>Provision of semi-permanent construction as well as local material for PSNs and EVIs</p>	<p>Provision of permanent shelters with focus on PSNs and most EVIs.</p>

<b>Output 3: Access to and availability of basic services</b>	<b>Health and Nutrition</b>	<p>No health clinic or health staff.</p> <p>Prevalence of disease (malaria and diarrhea) as well as eye infections.</p> <p>Estimated 26 U5 children in the area.</p>	<p>No community infrastructures in the area and difficult transportation to surrounding areas.</p> <p>Nearest OTP services is Salaley which is need more than four hours of walk.</p>	<p>Construction of medical centre or training of community health worker</p> <p>Provision of essential drugs</p> <p>Establishment of Nutrition Volunteers network for screening and referral to the nearest Nutrition services and improve community awareness</p>	<p>Establish medical referral.</p> <p>Training on PHC packages BEMOC, IMCI, surveillance and diagnostic skills for community health workers</p> <p>Provide training to MSGs and CHWs on how to measure MUAC to strengthening the referral system</p>	<p>Liaise and support SMOH to deploy health staff</p> <p>Establishment of mother support groups and CHWs</p>
	<b>WASH</b>	<p>Community fetches water from unprotected shallow open dug wells.</p> <p>In the past three boreholes were built by WES and OXFAM, however all have been damaged and buried, except one in the south side.</p> <p>Small number of latrines constructed.</p> <p>Poor personal hygiene.</p>	<p>Settlements scattered which poses major challenge during provision of services.</p> <p>Lack of adequate water containers and awareness in hygiene and water treatment methods.</p> <p>Zero solid waste management - Garbage, trash and animal dung are scattered randomly.</p>	<p>Upgrading of the existing hand pumps</p> <p>Implementation of CLTS and provision of hygiene kits to Extremely Vulnerable Groups</p>	<p>Upgrading existing water hand pumps to water yards</p> <p>Formation and training of Hygiene and Sanitation Committee and Village Health Committees</p> <p>Training in water management, treatment, and safety planning</p>	<p>Installation of water yards supported with solar system</p>
	<b>EDUCATION</b>	<p>1 basic school with 3 temporary classrooms, number of children enrolled are 130 with 2 volunteer teachers.</p>	<p>No pre-schools and number of school aged children app. 300.</p>	<p>Accelerated learning programmes (ALP)</p> <p>Construction of 4 classrooms, offices and provision of WASH facilities</p> <p>Provision of education supplies</p> <p>Establishment of PTAs</p> <p>Provision of school feeding.</p>	<p>Training for teachers and PTAs</p>	<p>Staffing through state government and support to teachers.</p>
<b>Output 4: Livelihood and IGA/Employment opportunities</b>	<p>Mainly depend on pastoral practices, farming and rearing animals.</p> <p>No access to winter and off-season farming.</p> <p>No market in the cluster.</p>	<p>No animal health services in the area and livestock requires vaccination campaigns</p> <p>Poor agricultural production last year was due to shortage in rainfall in the middle of the year</p> <p>Access to markets either through Um Dukhun or Muradaf which are far away.</p>	<p>Restocking of livestock (goat and donkey) highly needed.</p> <p>Food for work and agro-enterprise training</p> <p>Agriculture inputs and provision of seeds and tools</p>	<p>Vocational training for women and youth</p> <p>Setting up and training of community committees. Ensure role of women in committees.</p>	<p>Improve market linkages and value chains</p>	

## Village: Salale

The village is located 31.5km from Um Dukhun town, currently hosting returnees as well as IDPs from Boram, Markondi and RehidElbrdi. There were three waves of displacement: 2003, 2010 and 2013. In 2010, 2500 people from Boram, Markundin and Rehid villages were displaced to Salale. In 2013 people from the village were displaced to Chad Baja, Serif Benhussan and Um Dukhun.

	Situation and on-going response	Gaps and challenges	Needed activities		
			Short-term	Mid-term	Longer term
<b>Output 1: Conducive environment (peacebuilding, protection, RoL)</b>	<p>Security situation in the area is calm.</p> <p>Existence of community development committees (CDCs) and farm protection committees.</p> <p>Proliferation of arms one of the key concern for permanent return</p>	<p>No police presence.</p> <p>Tribal tensions remain and population as well as livestock movements can lead to further tensions or conflict.</p> <p>According to key informant interviews, cases of child marriage, FGM/C, and children affected by conflict an issue.</p> <p>Lack of birth registration and loss of certificates flagged.</p>	<p>UNAMID and GoS police patrols.</p> <p>Demarcation of existing animal migratory routes will help in reducing tension between animal herders and farmers.</p> <p>Strengthening and training of community development associations and women/youth.</p> <p>Provide integrated PSS services and deploy emergency social workers to establish referral pathways to social services.</p> <p>Awareness and training to youth on preventing violence (against children) and promoting peaceful social coexistence and life skills.</p>	<p>Peaceful coexistence and reconciliation training and support to community leaders, returnees, youth and local authorities to promote positive social change.</p> <p>Demarcation of existing animal migratory routes will help in reducing tension between animal herders and farmers.</p>	<p>Strengthening social, security and justice institutions.</p> <p>In collaboration with authorities and GoS strengthen protection and provision of security to returnees</p>
<b>Output 2: Housing and land</b>	<p>General state of housing conditions is dire and in need of rehabilitation</p>	<p>An average of 7 to 9 people per shelter.</p> <p>Main NFIs needs: Blanket and Jerrycan</p>	<p>Distribution of some NFIs to PSNs and EVIs (after further assessment) and improvement of existing shelter</p>	<p>Provision of semi-permanent construction as well as local material for PSNs and EVIs</p>	<p>Provision of permanent shelters with focus on PSNs and most EVIs.</p>

<b>Output 3: Access to and availability of basic services</b>	<b>Health and Nutrition</b>	<p>With UNICEF support, IMC established one OTP as well as CHWs in the area.</p> <p>There are sufficient nutrition supplies for three months.</p> <p>Prevalence of disease (Malaria and diarrhea) as well as eye infections.</p>	<p>Health centre not functional and no services in the area.</p> <p>Need for MAM services intervention to treat moderate acute malnourished children.</p>	<p>Rehabilitate the existing health centre.</p> <p>Provision of essential drugs</p> <p>Establishment of mother support groups and CHWs link to existing feeding centers in order to improve the referral and screening</p>	<p>Provide and train technical staff to resume delivering health services</p> <p>Establish medical referral. Training on PHC packages BEMOC, IMCI, surveillance and diagnostic skills</p> <p>Provision of regular drugs supply</p> <p>Provide training to MSGs and CHWs on how to measure MUAC to strengthening the referral system</p>	<p>Liaise and support SMOH to deploy health staff</p> <p>Support SMOH in the provision of regular drugs supply</p>
	<b>WASH</b>	<p>Community fetches water mainly from 5 hand pumps, but cost recovery system (tariff) not clear.</p> <p>Population collects water for cattle from traditional hand dug wells. 1 upgrade ongoing in Selele center by TGH. No latrines in the entire community, the whole population practice open defecation. Soap &amp; mosquito net distribution is planned (TGH)</p>	<p>1 broken hand pump in the area. High need of functioning hand pump (including borehole given population catchment)</p> <p>Distance from residential areas to water sources is 4-5km, putting extra pressure on women and children.</p> <p>Insufficient / inappropriate water containers.</p> <p>No solid waste management.</p> <p>Lack of awareness, material and resources for personal hygiene.</p>	<p>Reparation and upgrading of the existing hand pumps</p> <p>Implementation of CLTS and provision of hygiene kits to Extremely Vulnerable Groups</p> <p>Strengthen water management committees and streamline cost recovery.</p>	<p>Upgrading existing water hand pumps to water yards</p> <p>Formation and training of Hygiene and Sanitation Committee and Village Health Committees</p> <p>Training in water management, treatment, and safety planning</p>	<p>Installation of water yards supported with solar system</p>
	<b>EDUCATION</b>	<p>1 basic school with 8 permanent classrooms, managed by 2 teachers.</p> <p>Number of children enrolled 195.</p>	<p>Number of out of school children is reported to be 1200.</p> <p>School needs rehabilitation (+ latrines) and expansion.</p>	<p>Expansion of school premises for out-of-school children and Accelerated learning programmes (ALP)</p> <p>Provision of education supplies</p> <p>Establishment of PTAs</p>	<p>Training for teachers and PTAs</p>	<p>Staffing through state government and support to teachers.</p>
<b>Output 4: Livelihood and IGA/Employment opportunities</b>	<p>Mainly depend on agro-pastoral practices, farming and rearing animals.</p> <p>Villagers rely on rain-fed farming only and there is a general food insecurity</p>	<p>No animal health services in the area and livestock requires vaccination campaigns</p> <p>Poor agricultural production last year was due to shortage in rainfall in the middle of the year</p> <p>No market in the area.</p>	<p>Restocking of livestock (goat and donkey) highly needed.</p> <p>Food for work and agro-enterprise training</p> <p>Agriculture inputs and provision of seeds and tools</p>	<p>Establishment of a market</p> <p>Promotion and support for off-farm IGAs</p> <p>Vocational training for women and youth</p> <p>Conflict management training for farm protection committees. Strengthen role of women in committees</p>	<p>Support to market extension and value chains</p> <p>Establishment of a livelihoods centre</p>	

## Village: Sereif

The village is 10km north of Um Dukhun town and close to Um Jakaw village. Mainly inhabited by Salamat Tribe. They displaced in 2013 and returned in April 2016 to their original village. During their displacement they went to Chad (Abugadam, Haraza and Kalma). Returnees scattered around Serif East, Serif West and Serif north. There are still an estimated 700 households in Chad willing to return. Before displacement the total number of Serif population was 1800 households. Those displaced to refugee camp in Chad (especially in Abugadam) have received and shown refugee cards. TGH has supported the village with hand pumps rehabilitation.

	Situation and on-going response	Gaps and challenges	Needed activities		
			Short-term	Mid-term	Longer term
<b>Output 1: Conducive environment (peacebuilding, protection, RoL)</b>	<p>Security situation in the area is calm.</p> <p>Proliferation of arms one of the key concern for permanent return</p> <p>Existence of community development committees (CDCs) and farm protection committees.</p>	<p>No police presence.</p> <p>Tribal tensions remain and population as well as livestock movements can lead to further tensions or conflict.</p> <p>Youth are poorly represented in those committees.</p> <p>According to key informant interviews, cases of child marriage, FGM/C, and children affected by conflict an issue.</p> <p>Lack of birth registration and loss of certificates flagged.</p>	<p>UNAMID and GoS police patrols.</p> <p>Demarcation of existing animal migratory routes will help in reducing tension between animal herders and farmers.</p> <p>Strengthening and training of community development associations and women/youth.</p> <p>Provide integrated PSS services and deploy emergency social workers to establish referral pathways to social services.</p> <p>Awareness and training to youth on preventing violence (against children) and promoting peaceful social coexistence and life skills.</p>	<p>Peaceful coexistence and reconciliation training and support to community leaders, returnees, youth and local authorities to promote positive social change.</p> <p>Demarcation of existing animal migratory routes will help in reducing tension between animal herders and farmers.</p>	<p>Strengthening social, security and justice institutions.</p> <p>In collaboration with authorities and GoS strengthen protection and provision of security to returnees</p>
<b>Output 2: Housing and land</b>	<p>General state of housing conditions is dire and in need of rehabilitation.</p> <p>According to assessment in Oct 2016, 80HH are hosted families but nobody is sleeping outside.</p>	<p>20% of the population need shelter to be independent from the host community.</p> <p>Overcrowded shelter an issue with an average number of 10 people per shelter.</p>	<p>Distribution of some NFIs to PSNs and EVIs (after further assessment) and provision of transitional shelter for population suffering from overcrowded shelter</p>	<p>Provision of semi-permanent construction as well as local material for PSNs and EVIs</p>	<p>Provision of permanent shelters to PSNs and most EVIs.</p>

**Output 3: Access to and availability of basic services**

**Health and Nutrition**

Cluster close to UMD town, so people are accessing health and nutrition services from UMD town and Muradaf.

The area had been reached by VitA supplementation services in the last campaign

Most U5 children screened in last MUAC screening in September 2016

High demand for health services , but due to small population size and short distance from Um Dukhun town and dispersed settlement of the community dedicated provision of primary health care & nutrition services *not* recommended

No Mothers support group active to strengthen IYCF counselling

Select and train community health worker.

Need for food support to cover the need for moderate acute malnourished children  
Establishment of mother support groups and CHWs and connect with CMAM services in order to improve the screening referral of SAM cases to feeding centers

Regularly monitor health situation

Provide and train technical staff to resume delivering health services

Establish medical referral.

Training on PHC packages BEMOC, IMCI, surveillance and diagnostic skills

Provision of regular drugs supply

Provide training to MSGs and CHWs on how to measures MUAC to strengthening the referral system

Support SMOH in monitoring of health situation and the provision of regular drugs supply

**WASH**

Population fetches drinking water and water for their cattle from traditional hand dug wells and 2 hand pumps.

The pump installation depth is (66M). There are two trained hand pump mechanics and provided tool kits by WES/TGH.

TGH will conduct pumping test to know if one of them can be upgraded into mini water yard

No latrines in the entire community, the whole population practice open defecation.

1 hand pump presently malfunctioning.

Other one heavy to operate and breaks frequently due to the depth of the ground water.

Insufficient / inappropriate water containers.

No solid waste management.

Lack of awareness, material and resources for personal hygiene.

Reparation and upgrading of the existing hand pumps

Implementation of CLTS and provision of hygiene kits to Extremely Vulnerable Groups

Upgrading existing water hand pumps to water yards

Formation and training of Hygiene and Sanitation Committee and Village Health Committees

Training in water management, treatment, and safety planning

Installation of water yards supported with solar system

	<b>EDUCATION</b>	There are no function education facilities in Serieif.	1 school to rehabilitate (assessment done in October by TGH).  School could be shared by Sereif with Um Jakaw.	Focus on either supporting MoE and communities to set up education facilities or improving access of children to surrounding education facilities.	Training for teachers and PTAs	Staffing through state government and support to teachers.
<b>Output 4: Livelihood and IGA/Employment opportunities</b>	<p>Mainly depend on pastoral practices, farming and rearing animals.</p> <p>Villagers rely on rain-fed farming only and there is a general lack of food.</p> <p>No winter season farming and no market in the area.</p>	<p>No animal health services in the area and livestock requires vaccination services</p> <p>Poor agricultural production last year was due to shortage in rainfall in the middle of the year</p> <p>High need in IGA linked with water transportation + rainy season means improvement</p>	<p>Restocking of livestock (goat and donkey) highly needed.</p> <p>Food for work and agro-enterprise training</p> <p>Agriculture inputs and provision of seeds and tools</p>	<p>Vocational training for women and youth</p> <p>Conflict management training for farm protection committees. Strengthen role of women in committees.</p>	<p>Support to market extension and value chains</p>	

## Village: Soreah

The village is 27 km north east of Um Dukhun town. Total population of the village before displacement was around 2200 households, with currently reported 1,019HH who have returned. People were displaced to Chad and Um Dukhun in 2003 as first displacement and second displacement in 2013 and returned back in June 2016. The rest of the village are still in camps in Um Dukhun and Chad.

	Situation and on-going response	Gaps and challenges	Needed activities		
			Short-term	Mid-term	Longer term
<b>Output 1: Conducive environment (peacebuilding, protection, RoL)</b>	<p>Security situation in the area is calm.</p> <p>Proliferation of arms one of the key concern for permanent return</p> <p>Existence of community development committees (CDCs) and farm protection committees.</p>	<p>No police presence.</p> <p>Tribal tensions remain and population as well as livestock movements can lead to further tensions or conflict.</p> <p>Land issues remain to be addressed in the area.</p> <p>Youth are poorly represented in those committees.</p> <p>According to key informant interviews, cases of child marriage, FGM/C, and children affected by conflict an issue.</p> <p>Lack of birth registration and loss of certificates flagged.</p>	<p>UNAMID and GoS police patrols.</p> <p>Demarcation of existing animal migratory routes will help in reducing tension between animal herders and farmers.</p> <p>Strengthening of community development association and farm protection committees</p> <p>Provide integrated PSS services and deploy emergency social workers to establish referral pathways to social services.</p> <p>Awareness and training to youth on preventing violence (against children) and promoting peaceful social coexistence and life skills.</p>	<p>Peaceful coexistence and reconciliation training and support to community leaders, returnees, youth and local authorities to promote positive social change.</p> <p>Demarcation of existing animal migratory routes will help in reducing tension between animal herders and farmers.</p> <p>Training of community and women/youth.</p>	<p>Strengthening social, security and justice institutions.</p> <p>In collaboration with authorities and GoS strengthen protection and provision of security to returnees</p>
<b>Output 2: Housing and land</b>	<p>General state of housing conditions is dire and in need of rehabilitation</p>		<p>Distribution of some NFIs to PSNs and EVIs (after further assessment) and provision of transitional shelter</p>	<p>Provision of semi-permanent construction as well as local material for PSNs and EVIs</p>	<p>Provision of permanent shelters to PSNs and most EVIs.</p>

<b>Output 3: Access to and availability of basic services</b>	<b>Health and Nutrition</b>	<p>Health center collapsed and no nutrition service in place.</p> <p>Prevalence of disease (Malaria and diarrhea) as well as eye infections.</p> <p>A reported 200 U5 children returned from Chad since June 2016.</p>	<p>Health centre not functional and no services in the area.</p> <p>Repeated request by the population of these sites even before the mission.</p> <p>Some factors need consideration for establishment of PHC &amp; Nutrition services: distance &amp; problem of access especially during the rainy season and lack of trained personnel</p> <p>No mother support groups</p>	<p>Rehabilitate the existing health centre and train technical staff to resume delivering health services</p> <p>Provision of essential drugs</p> <p>Establishment of mother support groups and CHWs</p> <p>Establishment of Nutrition Volunteers network for screening and referral to nearest Nutrition services and improve community awareness</p>	<p>Establish medical referral.</p> <p>Training on PHC packages BEMOC, IMCI, surveillance and diagnostic skills</p> <p>Provision of regular drugs supply</p> <p>Provide training to MSGs and CHWs on how to measures MUAC to strengthening the referral system</p>	<p>Liase and support SMOH to deploy health staff</p> <p>Support SMOH in the provision of regular drugs supply</p>
	<b>WASH</b>	<p>Community has no access to protected water sources and depends on hand dug wells.</p>	<p>Need for improved water source has been ranked as community number one priority.</p> <p>Insufficient / inappropriate water containers.</p> <p>No solid waste management - garbage, trash and animal dung scattered randomly.</p> <p>Lack of awareness on hygiene and need for further latrines</p> <p>Lack of material / resources for personal hygiene.</p>	<p>Upgrading of the existing hand pumps</p> <p>Implementation of CLTS and provision of hygiene kits to Extremely Vulnerable Groups</p>	<p>Upgrading existing water hand pumps to water yards</p> <p>Formation and training of Hygiene and Sanitation Committee and Village Health Committees</p> <p>Training in water management, treatment, and safety planning</p>	<p>Installation of water yards supported with solar system</p>
	<b>EDUCATION</b>	<p>There are no education facilities in the village.</p>		<p>Improving access of children to surrounding education facilities and/or implement Accelerated learning programmes (ALP)</p> <p>Provision of education supplies</p> <p>Establishment of PTAs</p>	<p>Construction of more permanent school</p> <p>Training for teachers and PTAs</p>	<p>Staffing through state government and support to teachers.</p>
<b>Output 4: Livelihood and IGA/Employment opportunities</b>	<p>Mainly depend on pastoral practices, farming and rearing animals.</p> <p>Villagers rely on rain-fed farming only.</p>	<p>No animal health services in the area and livestock requires vaccination campaigns</p> <p>Poor agricultural production last year was due to shortage in rainfall in the middle of the year</p> <p>No market in the area.</p>	<p>Restocking of livestock (goat and donkey) highly needed.</p> <p>Food for work and agro-enterprise training</p> <p>Agriculture inputs and provision of seeds and tools</p>	<p>Vocational training for women and youth</p> <p>Conflict management training for farm protection committees. Strengthen role of women in committees.</p>	<p>Support to market extension and value chains</p>	

## Village: Um Jakaw

The village lays 9.5 km East of Um Dukhun town and close to Sereif village. People are living in shelter made of plastic sheet and huts. Um Jakaw is divided into three clusters: Um Jakaw North, East and South villages. Total population of the villages before the displacement was around 1670 households and all of them displaced to Chad in 2013, and returned in 2016.

	Situation and on-going response	Gaps and challenges	Needed activities		
			Short-term	Mid-term	Longer term
<b>Output 1: Conducive environment (peacebuilding, protection, RoL)</b>	<p>Security situation in the area is calm.</p> <p>Proliferation of arms one of the key concern for permanent return</p> <p>Lack of community development committees (CDCs) and farm protection committees.</p>	<p>No police presence.</p> <p>Tribal tensions remain and population as well as livestock movements can lead to further tensions or conflict.</p> <p>According to key informant interviews, cases of child marriage, FGM/C, and children affected by conflict an issue.</p> <p>Lack of birth registration and loss of certificates flagged.</p>	<p>UNAMID and GoS police patrols.</p> <p>Establishment of farm protection committees.</p> <p>Peaceful coexistence and reconciliation training and support to community leaders, returnees and local authorities</p> <p>Provide integrated PSS services and deploy emergency social workers to establish referral pathways to social services.</p> <p>Awareness and training to youth on preventing violence (against children) and promoting peaceful social coexistence and life skills.</p>	<p>Establishment of community development associations and strengthening and training of community and women/youth.</p> <p>Demarcation of existing animal migratory routes will help in reducing tension between animal herders and farmers.</p>	<p>Strengthening social, security and justice institutions.</p> <p>In collaboration with authorities and GoS strengthen protection and provision of security to returnees</p>
<b>Output 2: Housing and land</b>	<p>General state of housing conditions is dire and in need of rehabilitation</p> <p>From October 2016 rapid assessment: Average number of people per HH is around 12 persons living in one shelter.</p>	<p>Overcrowded shelters with sometimes two HHs sharing one shelter, so people are sleeping outside.</p>	<p>Distribution of transitional shelter to people suffering from overcrowded housing</p>	<p>Provision of semi-permanent construction as well as local material for PSNs and EVIs</p>	<p>Provision of permanent shelters with focus on PSNs and most EVIs.</p>

<b>Output 3: Access to and availability of basic services</b>	<b>Health and Nutrition</b>	<p>No Nutrition feeding center (OTP/SFP), but village located close to Um Dukhun town where people can access health services.</p>	<p>Malaria and Diarrhea are common diseases as well as eye infections.</p> <p>No mothers support group and CHWs establish in the area,</p> <p>High demand for health services, but due to small population size and short distance from Um Dukhun town and dispersed settlement of the community dedicated provision of primary health care &amp; nutrition services <i>not</i> recommended.</p>	<p>Select and train community health worker and train in referral.</p> <p>SMoH and partners to conduct regular supervision of health situation</p> <p>Establishment of mother support groups and CHWs</p> <p>Establishment of the Nutrition Volunteers network for screening and referral</p>	<p>Continue regular monitoring of health situation</p> <p>Train technical staff to resume delivering health services (BEMOC, IMCI, surveillance and diagnostic skills)</p> <p>Establish medical referral and provide regular drugs supply</p> <p>Provide training to MSGs and CHWs on how to measures MUAC to strengthening the referral system</p>	<p>Support SMOH in monitoring of health situation and the provision of regular drugs supply</p>
	<b>WASH</b>	<p>1 hand pump working. Otherwise people fetch water from traditional hand dug well.</p> <p>GH will conduct pumping test to know if one HP (either Sereif or Um Jakaw) can be upgraded into mini water yard.</p> <p>No latrines in the community, population practice open defecation and poor personal hygiene prevalent.</p>	<p>Repair and upgrad hand pump (minor issue) in the area.</p> <p>Distance from residential areas to water sources 4-5km, putting additional pressure on women and children fetching the water.</p> <p>Insufficient / inappropriate water containers.</p> <p>No solid waste management</p> <p>Lack of awareness, material and resources for hygiene.</p>	<p>Reparation and upgrading of the existing hand pumps</p> <p>Implementation of CLTS and provision of hygiene kits to Extremely Vulnerable Groups</p>	<p>Upgrading existing water hand pumps to water yards</p> <p>Formation and training of Hygiene and Sanitation Committee and Village Health Committees</p> <p>Training in water management, treatment, and safety planning</p>	<p>Installation of water yards supported with solar system</p>
	<b>EDUCATION</b>	<p>There are some basic education facilities in the area.</p>	<p>1 school to rehabilitate: Not well functioning and insufficient space / availability for out of school children.</p> <p>Lack of education supplies and gender/age sensitive latrines.</p>	<p>Rehabilitation of exiting classrooms.</p> <p>Construction of new latrine</p> <p>Provision of education supplies</p>	<p>Training for teachers and PTAs</p>	<p>Support SMOH to take over school and provide staffing through state government and support to teachers.</p>
<b>Output 4: Livelihood and IGA/Employment opportunities</b>	<p>Mainly depend on pastoral practices, farming and rearing animals.</p> <p>Villagers rely on rain-fed farming only and there is a general food insecurity.</p> <p>No winter season farming and no market in the area.</p>	<p>No animal health services in the area and livestock requires vaccination campaigns</p> <p>Poor agricultural production last year due to shortage in rainfall in the middle of the year</p> <p>High need in IGA linked with water transportation + rainy season means improvement</p>	<p>Restocking of livestock (goat and donkey) highly needed.</p> <p>Food for work and agro-enterprise training</p> <p>Agriculture inputs and provision of seeds and tools</p>	<p>Support off-farm IGAs</p> <p>Vocational training for women and youth</p> <p>Conflict management training for farm protection committees. Strengthen role of women in committees.</p> <p>Establishment of community infrastructure such as livelihoods centres.</p>	<p>Support to market extension and value chains</p>	

## Village: Um Dukhun town

As the mission was based in Um Dukhun town, participants undertook a few targeted interviews and observations. There are a few returnees in the town, as the population is mostly made up of IDPs. Displacement in Um Dukhun took place in 2013 after clashes between Salamat and Maseria tribes. Those who returned are estimated to be 150 HHs, with a reported app. 1700 HHs remaining in Chad.

	Situation and on-going response	Gaps and challenges	Needed activities		
			Short-term	Mid-term	Longer term
<b>Output 1: Conductive environment (peacebuilding, protection, RoL)</b>	<p>Security situation in the area is calm.</p> <p>GoS police and SAF are both present in the town.</p>	<p>Tribal tensions remain and population as well as livestock movements can lead to further tensions or conflict.</p> <p>According to key informant interviews, cases of child marriage, FGM/C, and children affected by conflict are an issue.</p> <p>Lack of birth registration and loss of certificates flagged.</p>	<p>Extend UNAMID patrols to the area and strengthen UNAMID presence on the ground.</p>	<p>Peaceful coexistence and reconciliation training and support to community leaders, returnees, youth and local authorities to promote positive social change.</p> <p>Demarcation of existing animal migratory routes will help in reducing tension between animal herders and farmers.</p>	<p>Strengthening social, security and justice institutions.</p> <p>Establishment of community associations umbrella organisation.</p>
<b>Output 2: Housing and land</b>	N/A from this mission.				

<b>Output 3: Access to and availability of basic services</b>	<b>Health and Nutrition</b>	<p>1 PHC center run by IMC with UNICEF support. Integrated health services and community-based management of acute malnutrition, hence no nutrition gaps.</p> <p>There is one Stabilization center in Um Dukhun town.</p> <p>Strong link of referral of SAM established.</p> <p>60 mother support group to improve counselling,</p> <p>UNICEF secured Nutrition supplies for two months</p>	<p>Case load of the PHC is very high, and not enough government ownership of health services so continued reliance on external funding of PHC.</p> <p>Common diseases such as Malaria and Diarrhea as well as infections prevalent.</p>	<p>Select and train community health worker and train in referral.</p> <p>SMoH and partners to conduct regular supervision of health situation</p> <p>Link mother support group with existing feeding centers in order to improve referral and screening</p>	<p>Continue regular monitoring of health situation</p> <p>Train technical government staff to resume delivering health services (BEMOC, IMCI, surveillance and diagnostic skills)</p> <p>Establish medical referral and provide regular drugs supply</p>	<p>Support SMoH in assuming responsibility of health services, monitoring of health situation and the provision of regular drugs supply</p>
	<b>WASH</b>	N/A from this mission				
	<b>EDUCATION</b>	<p>There are some basic education facilities in the area.</p> <p>1 IDP Secondary School for Boys and Girls (this is the only secondary school in Um-Dukhun town with around 700 students.</p> <p>UNAMID is providing 150 benches and desks to above school through QIPs</p>	<p>Boys and girls combined together in IDP school due to lack of school structures</p> <p>Lack of education supplies and gender/age sensitive latrines.</p>	<p>Rehabilitation of exiting classrooms and expansion of school services for boys and girls.</p> <p>Construction of gender-sensitive latrines</p> <p>Provision of education supplies</p>	<p>Training for teachers and PTAs</p>	<p>Support SMoH to take over school and provide staffing through state government and support to teachers.</p>
<b>Output 4: Livelihood and IGA/Employment</b>	N/A from this mission		<p>Timely provision of seeds and agricultural input.</p> <p>Restocking of livestock (goat and donkey).</p> <p>Food for work and agro-enterprise training</p>	<p>Strengthen role and capacity of MoA to extend services from beyond UMD town.</p> <p>Vocational training for women and youth</p>	<p>Support to market extension and value chains</p>	