



KEY MESSAGES

1. Only 31 percent of Chadian remain satisfied with the policy measure to support the health sector in March-April 2021 against 60 percent in May-June 2020;
2. Chadian people are less adopting preventive measures against covid-19 (86 percent adopt at least one measure against 99 percent in May-June 2020);
3. The country has recently launched its vaccination process but there is a need to intensify the awareness campaign on the vaccine since almost a quarter of Chadian are hesitating to get the vaccine;
4. While the country is reopened and is recovering, households are getting more and more access to public service with a 3 percentage point increase in access to health care when needed between May-June 2020 and March-April 2021. And, both poor and non-poor households are getting better access to public service;
5. Unfortunately, many households continue to experience a decline in their income due to loss of remittance, family's enterprise income and employment income. This is a concern for almost 76 percent of households;
6. As the pandemic and its impact are lasting, households are continuing to worry about their well-being with about 85 percent of households reported that their well-being has much deteriorated;
7. Severe food insecurity remains a strong concern for more than half of Chadian households since the beginning of the pandemic.



Source: <https://www.worldometers.info/coronavirus/country/Chad> as of June 22, 2021



BACKGROUND AND KNOWLEDGE OF COVID-19

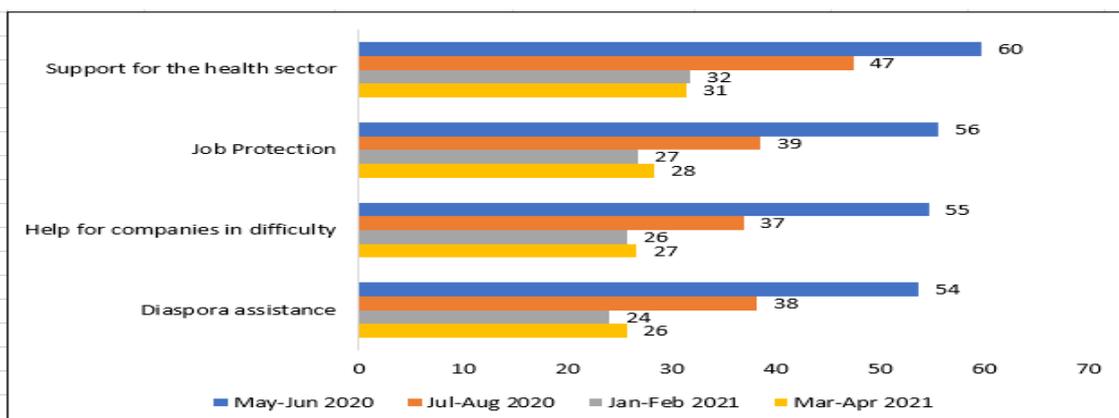
This brief presents findings from the fourth round of a nationally representative household High-Frequency Phone Survey (HFPS) in Chad. The HFPS sample is based on the “*Enquête sur les Conditions de vie des menages et le Secteur Informel (ECOSIT 4)*” implemented in 2018/2019 by the *Institut National de la Statistique, des études économiques et démographiques*, with technical and financial support from the World Bank. During this round, the questionnaires have been administered to a sample of 1,902 households and successfully completed for 1,482 households with a response rate of 77.9 percent. Sampling weights were adjusted to make sure that the surveyed sample remains nationally representative. The survey questionnaire covers several topics, including knowledge of Covid-19, behavior, access to basic services, safety nets, employment, assistance, etc. The data have been collected by 20 enumerators selected among those who participated in the previous survey (ECOSIT 4).

The brief compares the results of four rounds of High-frequency Surveys implemented in May-June 2020 (first round), July–August 2020 (second round), January-February 2021 (third round), and March-April 2021 (fourth round).

SATISFACTION WITH POLICY MEASURES

While the country is progressively recovering from the pandemic and its impacts, Chadian households are becoming less and less satisfied with the policy measures taken by the government to reduce the spread of the pandemic. Household's satisfaction with the economic and social measures to mitigate the impact of the pandemic is also declining over time with only a third of households satisfied with the government's support to the health sector in March-April 2021 against 60 percent of households in May-June 2020 (Figure 1).

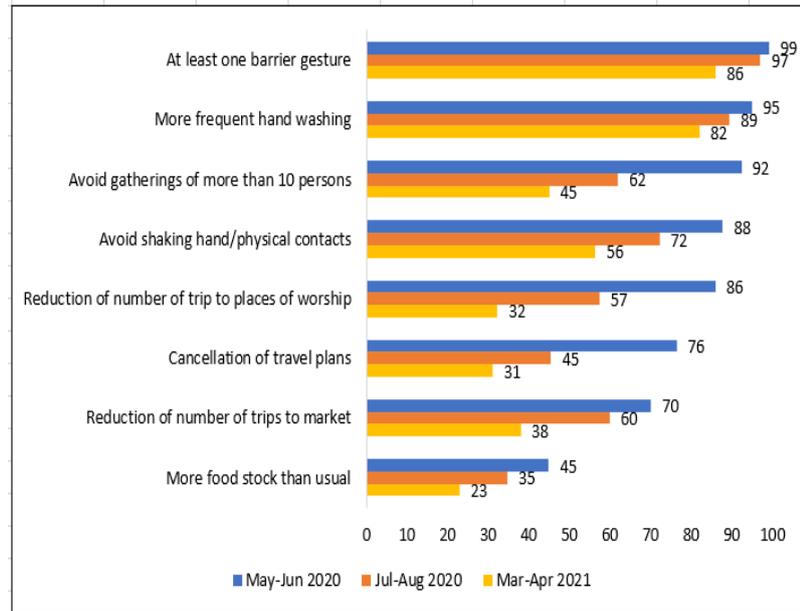
Figure 1 : Satisfaction with policy measures : Economic and social response measures



BEHAVIOR TO REDUCE THE RISK OF BEING INFECTED BY THE PANDEMIC

At the early stage of the pandemic (May-June 2020), almost all Chadian households adopted several measures to reduce their risk of being infected. But several months later, about 15 percent of households did not adopt any measures to reduce their risk of being infected. Behavior that involves direct contact such as avoiding gathering and handshaking are less and less adopted with only 45 percent and 56 percent of households avoiding gathering and handshaking in March-April 2021 against more than 80 percent in May-June 2020 (Figure 2). This is particularly worrisome given that the pandemic is lasting and the risk of new wave of the pandemic is still high. In particular, the occurrence of new variants of the virus in many countries and the lateness and slow start of the vaccination process in Chad increase the risk of massive contamination. This highlights the need to reinforce awareness campaigns to avoid potential a new wave of the pandemic.

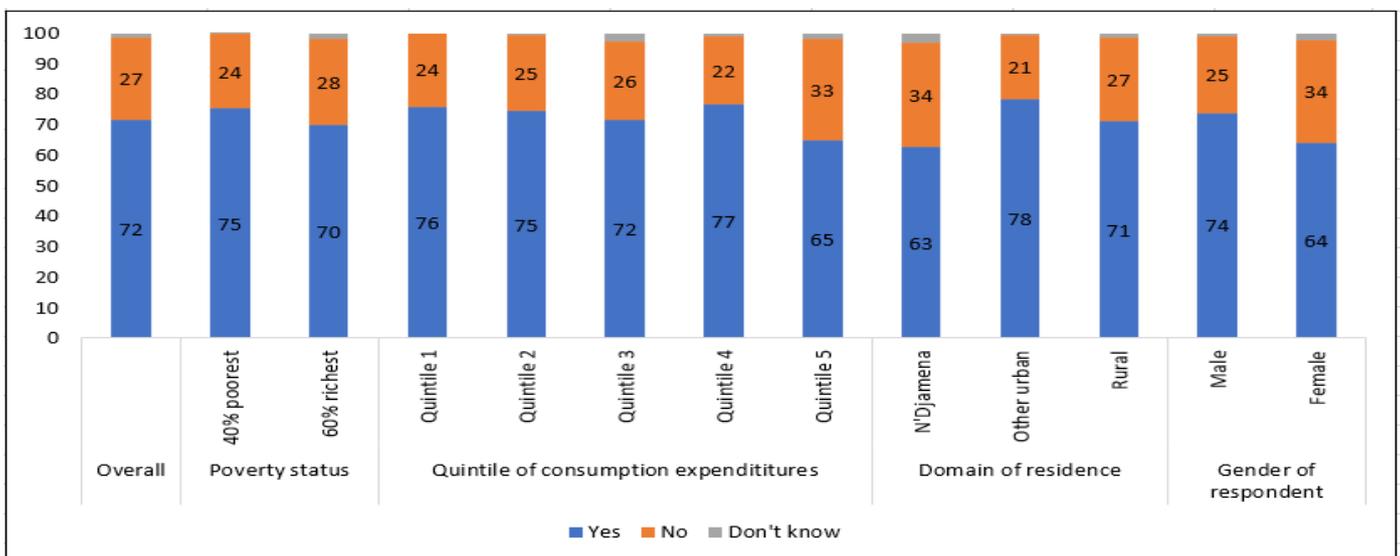
Figure 2 : Behavior to reduce the risk of contracting covid-19 since march 2020



VACCINE

In order to assess the willingness of individuals to get vaccinated or not, the fourth round of the survey included questions on vaccine acceptance. The survey results show that, overall, nearly a quarter (27 percent) of respondents are not willing to get vaccinated despite the fact that the vaccine is free (Figure 3). Those who are less likely to get vaccine are people from the highest quintile of consumption distribution. Women also seem to be more reluctant to vaccine compared to men. The reluctance to get vaccinated is particularly high in the capital city where people have more access to information on the vaccine through social media. The debate on the effectiveness of some vaccines of covid-19 in developed countries may have probably negatively impacted their behavior. In general, the two main reasons people are reluctant to get vaccinated are their worry about the vaccine's safety (53 percent in Chad) and the lack of trust in the effectiveness of the vaccine in general (19 percent). Encouraging, the country has recently 100,620 doses of the Pfizer-Biotech thanks to the Covax mechanism and has started its vaccination process. But many people remain reluctant to get vaccinated, there is a need to intensify awareness campaign on the benefit of the vaccine, particularly given that the preventive measures against covid-19 are less and less adopted by the population over time as shown above.

Figure 3 : Vaccine acceptance against Covid-19 without fees

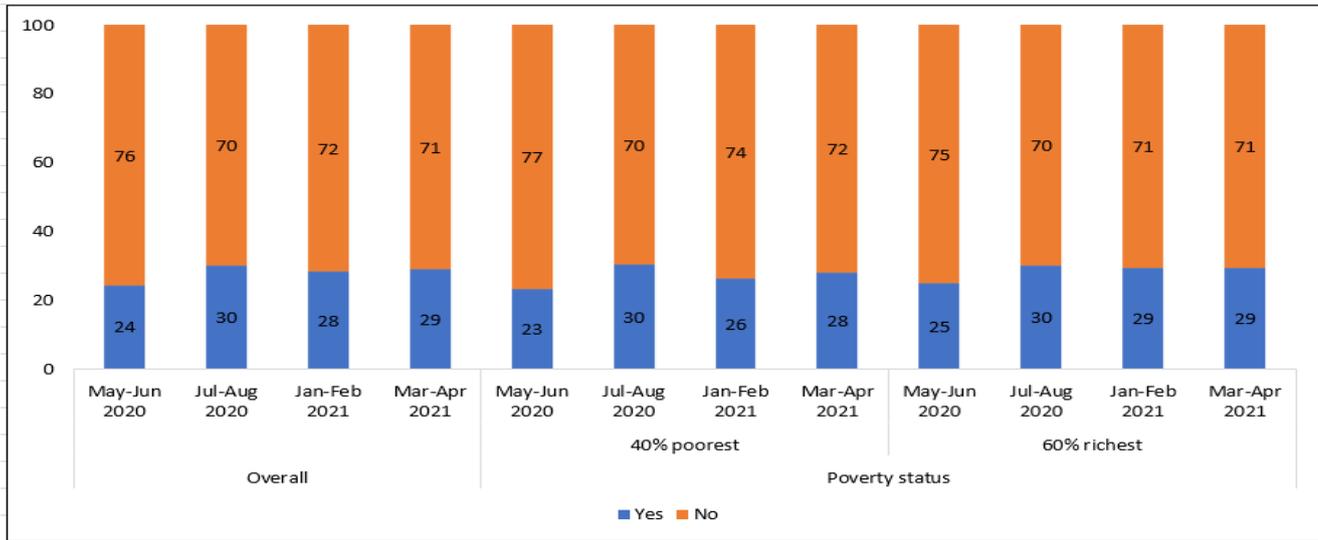




ACCESS TO BASIC SERVICES

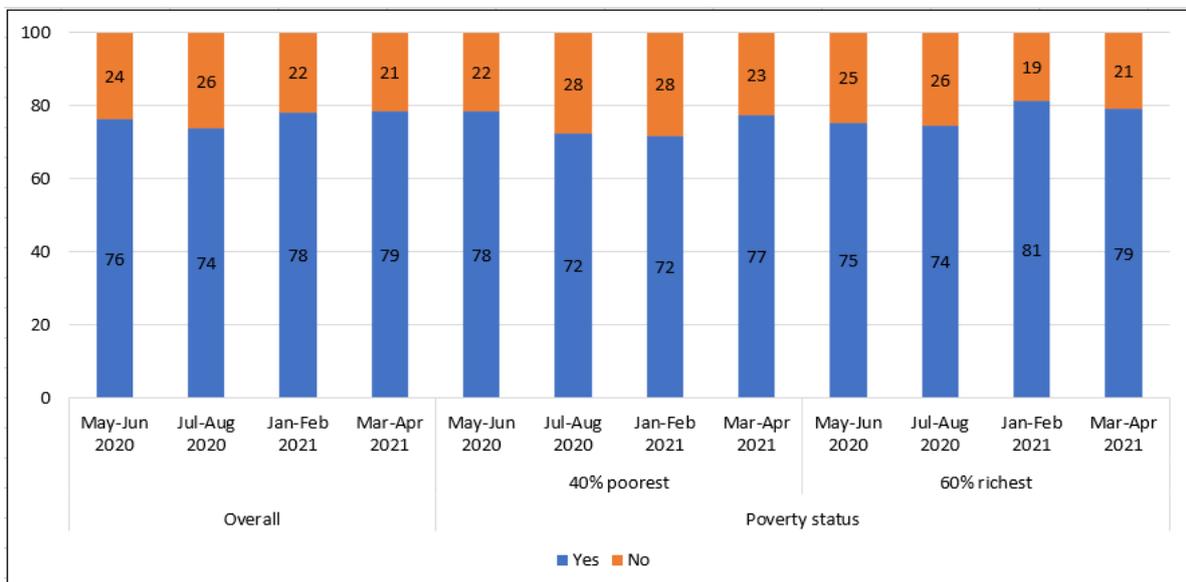
Although the percentage of households with access to the market continues to stagnate around 30 percent, in general, there is an improvement of almost 5 percentage points between the first and fourth rounds of the survey, the highest rate being reached in the second round where almost 30 percent was recorded (Figure 4). This trend is almost similar among the bottom 40 percent and the top 60 percent of the consumption distribution. However, rural households are less likely to have market access compared to their counterpart in urban areas. The lack of money remains the main reason that prevents households from getting access to market with 90 percent and 98 percent of households that do not have access to market pointing this reason during the first round and the fourth round, respectively.

Figure 4 : Households 'accessibility to market



In general, households' accessibility to health care when needed did not change over time since the beginning of the pandemic. Indeed, from May-June 2020 (first round) to March-April (2021), the share of households which had access to health when needed increased by 4 percentage points from 76 percent to 78 percent (Figure 5). Not surprising, households from the top 60 percent of the consumption distribution have better access to health care when needed compared to those in the bottom 40 percent of the consumption distribution. The gap between those two categories is about 2 percentage points in March-April 2021 that is a significant decline compared to 9 percentage points in January-February 2021. Rural households experience more difficulties in getting access to health care when needed compared to those living in other areas and, over the time, the main reason why households do not get access to health care when needed remain the lack of money (85 percent in the round 1, 80 percent in the round 2, 81 percent in round 3 and 90 percent in the round 4).

Figure 5 : Households' accessibility to health care when needed

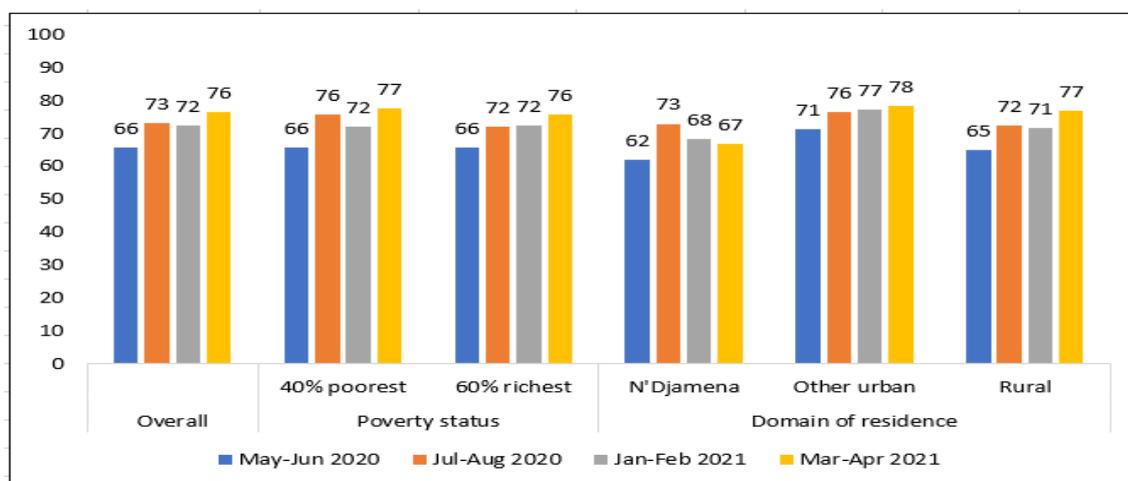




EMPLOYMENT AND INCOME

The covid-19 pandemic has impacted households' living condition through the decline in remittances and employment income. While the country is recovering from the negative impact of the pandemic, households are continuing to experience decline in their income. At the national level, the share of households which experiencing a decline in their total income rose from 66 percent May-June 2020 to 76 percent in March-April 2021. Poor and non poor households seem to be impacted at the same way. Indeed, 77 percent of households in the bottom 40 percent of the consumption distribution and 76 percent of those in the top 60 percent have reported having experiencing a decline in their income in March-April 2021. However, households in Ndjamena which have better opportunities for if employment and income are less impacted by income loss (67 percent) compared to their counterpart in other urban (78 percent) and rural areas (77 percent). From the second round to the fourth round of the survey, households that experienced a decline in income declined in Ndjamena while it increased in other urban and rural areas (Figure 6). The actions taken by the government to mitigate the impact of the pandemic together with the better resilience of urban population can in part explained the improvement in Ndjamena while in rural, households have less opportunities of income and the impact of the pandemic in urban areas has also impacted the domestic transfers from urban to rural areas.

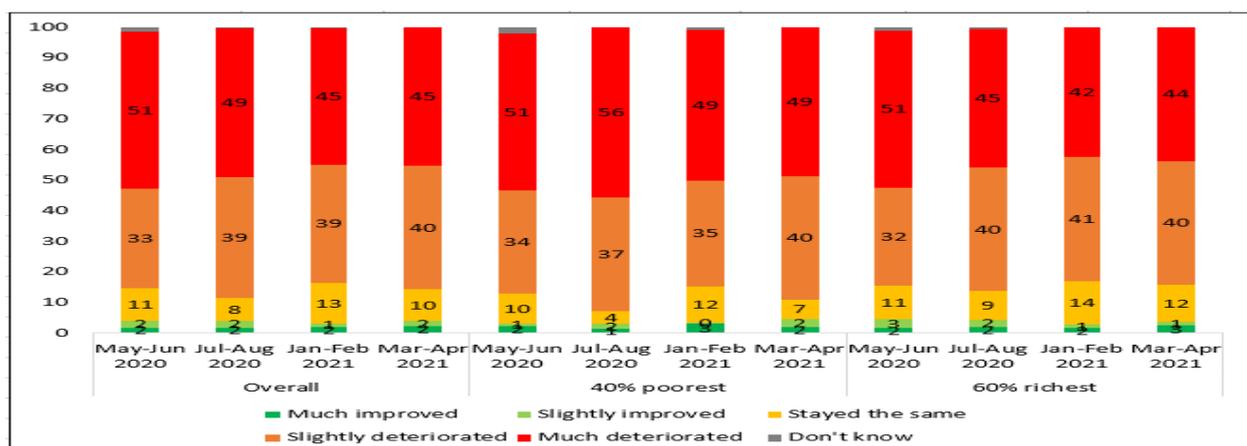
Figure 6 : Share of households experiencing decline in total Income



PERCEPTION ON WELL-BEING

As the pandemic and its impact are lasting, households are continuing to worry about their well-being. Indeed, about 85 percent of households reported that their well-being has deteriorated since the beginning of the pandemic. This share has remained the same over time. But encouraging, the share of households who reported that their well-being is much deteriorated declined by 6 percentage points from 51 percent in May-June 2020 to 45 percent (Figure 7). The figure also indicates that the poorest households are most pessimistic on their well-being compared to their counterparts non poor. In March-April 2021, 49 percent of households in the bottom 40 thought that their well-being has very much deteriorated against 44 percent of households in the to 60 percent of the consumption distribution.

Figure 7 : Perception of households on their well-being since the outbreak of Covid-19



FOOD INSECURITY

Since the beginning of the pandemic, more than half of Chadian households have been experienced severe food insecurity and the situation did not change over time (Figure 8). But encouraging, many households who were mildly or moderately food insecure have experienced improvement in their conditions. The share of households that are food secure rose from 5 percent in May-June 2020 to 11 percent in March-April 2021. Food insecurity is most impacting household in rural areas and those in the bottom 40 percent of the consumption distribution compared to households living in Ndjama or being in the top 60 percent of the consumption distribution (Figure 9). While there is some increase in the share of household being food secure during the four waves, the progress remains low for households in bottom 40 (3 percentage point increase) compared to those in top 60 (7 percentage increase).

Figure 8 : Food insecurity breakdown by domain of residence

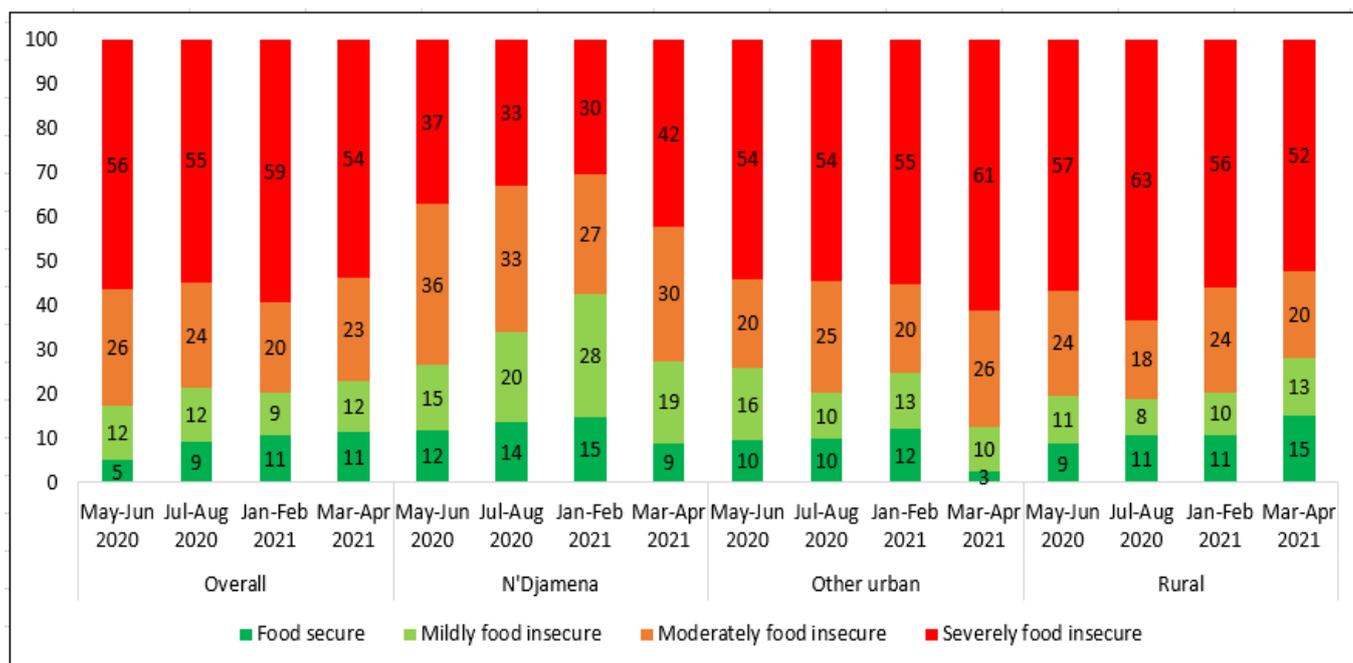


Figure 9 : Food insecurity breakdown by poverty status

