CHAD

Capital

N'Djamena

Ethnic Groups

Sara (Ngambaye/Sara/Madjingaye/Mbaye) 30.5%, Kanembu/Bornu/Buduma 9.8%, Arab 9.7%, Wadai/Maba/Masalit/Mimi 7%, Gorane 5.8%, Masa/Musseye/Musgum 4.9%, other 30.6%, unspecified 1.7%

Languages

French (official), Arabic (official), Sara (in south), more than 120 different languages and dialects

Religions

Muslim 52.1%, Protestant 23.9%, Roman Catholic 20%, animist 0.3%, other Christian 0.2%, none 2.8%, unspecified 0.7%
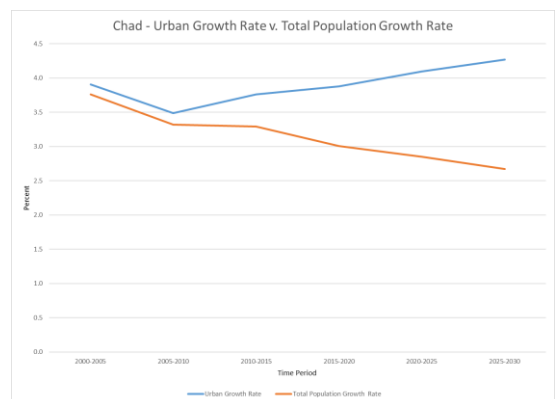
Population

Total: 18.5 million
Median age: 16.1 years
Population growth rate: 3.05%
Urban: 24.4%
Rural 75.6%

Fertility

Birth rate: 39.85 births/1,000 population
Total fertility rate: 5.35 children born/woman
Sex ratio of population: 0.98 male(s)/female

Mortality

Death rate: 9.21 deaths/1,000 population
Life expectancy at birth: 59.57 years
Maternal mortality rate: 1,140 deaths/100,000 live births
Infant mortality rate: 63.99 deaths/1,000 live births

Chad - Urban Growth Rate v. Total Population Growth Rate

CHAD

Migration

Net migration rate: -0.12 migrants/1,000 population

Health

Current health expenditure: 5.4% of GDP
Physician density: 0.06 physicians/1,000 population
Adult obesity: 6.1%
Alcohol consumption per capita: 0.55 liters of pure alcohol

Education

Education expenditures: 2.9% of GDP
Literacy: 22.3%
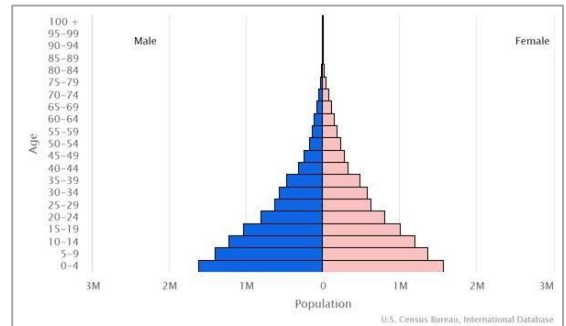
Population Distribution

the population is unevenly distributed due to contrasts in climate and physical geography; the highest density is found in the southwest, particularly around Lake Chad and points south; the dry Saharan zone to the north is the least densely populated

Age Structure

U.S. Census Bureau, International Database

Population Distribution

Population per square kilometer

Demographic Profile

Despite the start of oil production in 2003, around 40% of Chad's population lived below the poverty line as of 2018. The population will continue to grow rapidly because of the country's very high fertility rate and large youth cohort – more than 65% of the populace is under the age of 25 as of 2022 – although the mortality rate is high and life expectancy is low. Chad has the world's second highest maternal mortality rate as of 2017. Among the primary risk factors are poverty, anemia, rural habitation, high fertility, poor education, and a lack of access to family planning and obstetric care. Impoverished, uneducated adolescents living in rural areas are most affected. To improve women's reproductive health and reduce fertility, Chad will need to increase women's educational attainment, job participation, and knowledge of and access to family planning. Less than a quarter of women are literate, less than 10% use contraceptives, and more than 40% undergo genital cutting.

As of December 2022, more than 403,000 refugees from Sudan and more than 120,000 from the Central African Republic strain Chad's limited resources and create tensions in host communities. Thousands of new refugees fled to Chad in 2013 to escape worsening violence in the Darfur region of Sudan. The large refugee populations are hesitant to return to their home countries because of continued instability. Chad was relatively stable in 2012 in comparison to other states in the region, but past fighting between government forces and opposition groups and inter-communal violence have left more than 380,000 of its citizens displaced in the eastern part of the country as of 2022.