

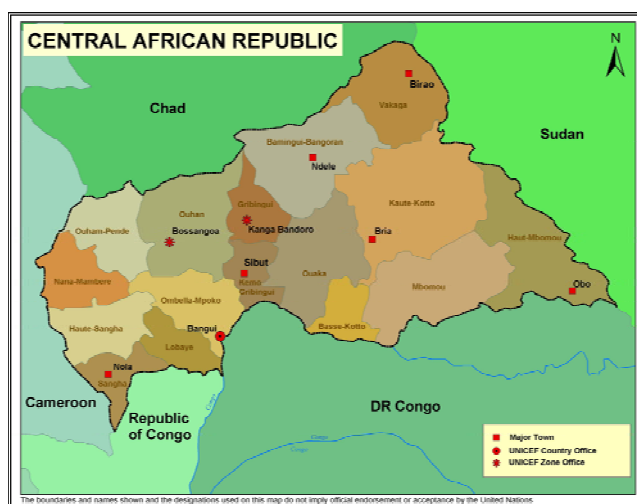
UNICEF HUMANITARIAN ACTION UPDATE

CENTRAL AFRICAN REPUBLIC

25 March 2009

UNICEF URGENTLY NEEDS US\$ 1.1 MILLION TO ADDRESS THE IMMEDIATE HUMANITARIAN NEEDS OF CHILDREN AND WOMEN IN THE CENTRAL AFRICAN REPUBLIC

- 1 million people affected by violence continue to be in need of emergency food, NFIs, medical assistance, WASH and shelter interventions, and thousands of children require immediate treatment against malnutrition and protection care
- In most of the country children remain vulnerable to threats of infectious diseases
- Despite political goodwill and the formation of an interim government, the beginning of 2009 has seen an upsurge in violent clashes leading to displacement and urgent need for humanitarian intervention
- Displaced communities require urgent support including water, sanitation, shelter and education



1. Issues for Children

The Central African Republic is a politically and economically unstable country where poverty is ravaging and social infrastructures providing basic services are almost nonexistent. Ongoing armed conflict should be considered among major factors contributing to the deterioration of the humanitarian situation in the country. Since 2005, fighting between the national army and rebel groups, as well as increased banditry, has led to the displacement of more than 300,000 people. According to OCHA, 108,000 people have been internally displaced and more than 105,000 now live as refugees in neighbouring countries, mainly Chad and Cameroon. It is estimated that around one million people have been affected by the ongoing violence. Moreover, north-eastern CAR is host to some 3,100 Sudanese refugees from Darfur.

There are health and safety fears related to the internally displaced populations. Large numbers live in makeshift shelters throughout northern CAR without protection or access to healthcare facilities. Malnutrition and epidemic diseases (Measles, Meningitis, Hepatitis, Yellow Fever, Poliomyelitis, etc.) are common in most of the conflict affected areas. In response to this, humanitarian actors operating in the region are currently providing emergency healthcare, including immunizations, NFIs, as well as support to education services.

Prior to 2002-2003 when a spiral of violence enveloped much of northern CAR, around 50% of elementary school-aged children were at school. Due to conflict, the elementary school population was reduced to 1/3. During 2008, more than 140,000 children in northern CAR returned to school due to efforts by the humanitarian community in collaboration with GoCAR. Despite recent political goodwill and the formation of an interim government including various armed groups, it is estimated that over 700 children remain associated with rebel groups. This concerns mainly the northern regions of CAR however, in the south-eastern region of Haut-Mbomou, the Ugandan guerrilla force LRA abducted 111 persons in February and March 2008; about half were children, some have since been released or have escaped.

On the political front, the recent all-inclusive political dialogue held in Bangui 8 to 22 December 2008, in which all politico-military parties participated, was aimed at restoring calm. Government, opposition, civil society groups and rebel movements called for a consensus government, a truth and reconciliation commission and a process of disarmament. Presidential and parliamentary polls were scheduled for 2010. However, despite political goodwill and the formation of an interim government the beginning of 2009 has seen an upsurge in violent clashes. Conversely, the security situation deteriorated in parts of central and north-western CAR. In January and February 2009, several clashes took place mainly in northern CAR (involving rebel groups, Chadian herders, national army). Furthermore, in January, the formation of a new rebel group became known, the Patriotic Convention for Justice and Peace (CPJP), a split faction of the Union of Democratic Forces for Unity (UFDR), the main rebel group operating in north-eastern CAR.

A further intensification could lead to massive displacements. The recent two-day civil unrest in Bangui, involving protests at the killing of a police commissioner by Presidential Guards in March, is a good example of the speedy deterioration of the security situation which might contribute to immediate breakdown of an already fragile situation. Should insecurity further deteriorate, an emergency should be expected for which UNICEF and other humanitarian actors need to be prepared.

The above illustrates the fragility of the peace process. Furthermore, it is feared that the ICC international arrest order of Sudanese President Bashir might cause an impact on north-eastern CAR. If Darfur populations are forced to move toward the border with CAR, major interventions will be necessary. Nyala situated 200km from the border with CAR has more than 500,000 IDPs residing in the area. Should the IDPs need to move, a logical destination would be north-eastern CAR.

2. UNICEF Response: Activities, Achievements and Constraints

Since 2008, in close collaboration with local (NGOs/CBOs), national (GoCAR) and international (IMC, IRC, NRC, DRC, CAM, JRS, MSF, COOPI, ACF, Solidarités, Triangle GH and UN organisations) partners, UNICEF has responded to the humanitarian needs of the population affected by disasters such as conflict and epidemic diseases (Measles, Meningitis, Hepatitis, Yellow Fever, Poliomyelitis, etc). This support has mainly focused on the priority areas of health, nutrition, water, sanitation and hygiene, education and child protection as well as shelter and provision of NFIs. UNICEF has paid increased attention to emergency preparedness, planning and pre-positioning of strategic supplies to enhance response in case a crisis occurs.

UNICEF and its partners will continue to effectively respond to emergencies. Among the major constraints are the low government capacity and the poor road network including inaccessibility to several regions during the rainy season (6 months out of the year).

Health and Nutrition

In response to two Wild Polio Virus outbreaks, three rounds of National Immunization Days (NIDs) were organized, reaching more than 740,000 children under the age of five. Three rounds Maternal and Neonatal Tetanus (MNT) immunization campaigns were conducted throughout the country and at each time, more than 1,000,000 childbearing women were vaccinated. The first round of the MNT campaign provided Vitamin A supplementation and de-worming with Mebendazole targeting children under the age of five. During this first campaign, 68% of children aged between 6-59 months were supplemented with Vitamin A. Such campaigns seek to eliminate MNT in CAR. In the region of Nana Gribizi (north-central CAR) some 65,000 persons were vaccinated against meningitis in response to an outbreak occurring during the first quarter of 2008. UNICEF supported all operational costs. In regards to capacity building, more than 200 health personnel were trained on different health professions at district and regional level. For the immunization coverage, more than 80% of coverage rate obtained with two rounds of polio NIDs; targeting about 700,000 children aged 0–59 months. About the same rate was obtained from two rounds of MNT elimination campaigns targeting more than 100,000 women aged 15–49 years.

In nutrition, in northern CAR, access to food is often limited. Inadequate food habits and feeding/nutrition practices as well as the high food prices exacerbate the situation for thousands of families. In 2008, UNICEF has ensured the provision of therapeutic foods, micronutrients and essential drugs in 5 Therapeutic Feeding Centres and 18 Out-Patient Treatment centres. An average of 100 children per month, suffering from severe acute malnutrition was managed in each Centre; this is an estimated coverage of 45%. In terms of nutritional surveillance, a nutrition survey in Vakaga in January 2008 showed 4.7% of GAM (Z-score) and 2.0% of SAM. In September 2008, two nutrition surveys were conducted: In Bangui, 6.2% GAM and 0.6 % SAM whilst in Ouham, 9.1% GAM and 2.4% SAM. The situation worsened in Ouham, compared to April 2008. However, due to bad harvesting and lack of food stocks in most of northern CAR, the nutrition situation could worsen if nothing is done in the coming months.

Planned Actions:

Health:

- Procure and distribute essential emergency drugs and equipment to 55 health centres;
- Distribute impregnated mosquito nets to 4,000 households;
- Train community volunteers in 100 villages on home-based management of malaria, pneumonia and diarrhoea;
- Support the organization of immunization riposte campaigns in case of measles/yellow fever outbreaks.

Nutrition:

- Support 5 therapeutic feeding centres and 25 Out-Patient Treatment Centres;
- Conduct nutrition surveys/assessments in inaccessible zones and set up a nutrition surveillance mechanism.

Water, Sanitation and Hygiene (WASH)

Through the construction of 49 new water points and the rehabilitation of 345 existing ones, UNICEF and its partners provided access to potable water for more than 197,000 persons (targeting almost all IDPs) at the rate of 500 persons per water point (SPHERE). Some 122 Village Water Management Committees (VWMC) were re-established, trained and equipped; 156,337 persons received hygiene promotion education messages; 15,615 IDPs received WASH Kits (jerry cans, soaps, cups); 75 public latrines (schools and health centres) were constructed; 2004 households received home-based rainwater catchments and water filtration kits (plastic sheeting and PVC pipes), an additional 257,136 persons benefited from WASH interventions from other members of the WASH Cluster. In Vakaga (north-east), 6,000 persons gained access to safe drinking water using 11 rehabilitated wells and 4 boreholes equipped with hand pumps. In Kabo IDP site (north-central), 10,900 IDPs benefited from WASH programmes in receiving water points and sanitation facilities. In

Nana Gribizi and Ouham (north-central/west), 10,500 people regained access to safe water due to rehabilitation of 30 hand-pumps mounted on existing boreholes. In Vakaga, at least 30,000 conflict-affected persons received hygiene kits and WASH related Non-Food Items (NFIs).

Planned Actions:

- Provide WASH related NFIs to conflict-affected populations;
- Promote the construction of improved family latrines;
- Promote safe water treatment/storage on the household level;
- Construct new water points equipped with hand-pumps in the vicinity of schools, hand washing facilities and two blocs of VIP latrines per school and finally;
- Foster coordination of WASH sector and scale up emergency preparedness activities.

Education

As mentioned, during 2008 more than 140,000 children in northern CAR returned to school due to close collaboration between UNICEF, its partners and GoCAR. In the north-west, 74,000 went back to school while central and north-eastern CAR saw 67,076 children return to school. Nevertheless, during 2009 as more families are returning home due to relative security in former conflict areas, more children need to go back to school. In general, access to school is still low and the drop-out rate remains high at 30%. In order to include all students in 2008 final exams, the Minister of Education agreed to exempt exam fees for children in the conflict-affected regions. In order to facilitate the activities of the “Back-to-School” initiative, various school materials have been distributed: 52,500 textbooks; 912 school-in-box kits; 1,640 school benches; and 9 motorcycles for supervision and follow-up of field activities.

Planned Actions:

- Provide basic school materials and recreational kits to a total of 13,000 displaced and war-affected children and 260 teachers;
- Train 260 primary school teachers and 100 members of parents-teachers associations;
- Rehabilitate and equip 8 schools in conflict-affected areas.

Child Protection

UNICEF, in cooperation with OCHA, BONUCA/DPA-DPKO and the office of the SRSG–CAAC as well as other partners, has also achieved and/or initiated activities for the disarmament, demobilization and reintegration of children formerly associated with the rebel groups, UFDR and APRD. This has resulted in the demobilization and reintegration of over 400 children formally linked to UFDR. Identical activities are in the pipeline for children associated or formerly associated with APRD.

Several presentations on IDP movement and concentration were brought before the Humanitarian and Development Partnership (HDPT) as an advocacy tool to prompt humanitarian response. Presentations were conducted by the Protection Cluster/UNHCR. Direct activities include children, throughout northern CAR, gaining access to humanitarian services; 150 military personnel have received basic training on children’s rights and protection of children during armed conflict with a focus on protection of children from recruitment and gender-based violence; two missions were conducted in relation to LRA abductions in 2008 resulting in reinforced response to 5 SGBV cases and 61 abductions. A tracing list has been developed and shared for cross-border tracing with relevant authorities/humanitarian actors.

Planned Actions:

- Promote the demobilization of 500 child soldiers;
- Assist community-based reintegration of around 1,000 CAAFG;
- Rehabilitate 80 community basic social services infrastructures;

- Monitor/report on grave human rights violations; support prevention, identification, documentation, tracing, care and reunification of an estimated 500 separated children.

Shelter and Non-Food Items

In 2008, humanitarian agencies in CAR, in partnership with UNICEF and UNHCR, provided more than 56,000 IDPs and refugees with NFIs in conflict-affected areas in northern CAR. Moreover, ICRC distributed NFI kits to some 48,000 beneficiaries (10,000 families), mostly IDPs, some refugees (Birao) and some returnees (Moyen Sido).

Planned Actions:

- Conduct needs assessment and monitor the humanitarian situation of conflict-affected populations;
- Standardize the shelter/NFI kit in CAR and provide appropriate kits to needy populations;
- Prepare the NFI distribution plan by taking into consideration the target population's perception of needs;
- Monitor and evaluate project activities as well as their immediate impact on target population; and increase shelter and NFI cluster coordination.

3. Funding Requirements and Gaps

In 2008, UNICEF CAR received US\$ 7,645,661 (56%) against its humanitarian funding needs of US\$ 13,577,140 as outlined in the Mid-Year Review of the 2008 *Humanitarian Action Report*. UNICEF expresses its gratitude to donors whose donations have significantly improved the ability of UNICEF CAR to respond to the needs of some of the country's most vulnerable women and children.

For 2009, UNICEF requires US\$ 12,481,330 to carry out emergency activities in the sectors of health, nutrition, water, sanitation and hygiene, education, child protection as well as shelter/NFIs. No funds have been received so far.

Table 1: Funds Received against 2009 HAR (US\$)*

Sector	Original HAR requirements	Funds received	Funding gap	% Unfunded
Health and Nutrition	6,743,990	0	6,743,990	100%
Water, Sanitation and Hygiene (WASH)	1,990,040	0	1,990,040	100%
Education	1,072,900	0	1,072,900	100%
Child Protection	1,839,400	0	1,839,400	100%
HIV/AIDS	-	0	125,000	100%
Shelter and non-food items	835,000	0	835,000	100%
Total**	12,481,330	0	12,481,330	100%

* Funds received against this appeal will be used to respond to both the immediate and medium-term needs of children and women as outlined above. If UNICEF should receive funds in excess of the medium-term funding requirements for this emergency, UNICEF will use those funds to support other, under-funded emergencies.

** The total includes a maximum recovery rate of 7%. The actual recovery rate on contributions will be calculated in accordance with UNICEF's Executive Board Decision 2006/7 dated 9 June 2006.

UNICEF CAR has prioritized US\$ 1.14 million for the situation in Northern CAR at the border with Chad and Sudan.

Table 2: Funding Priorities as of March 2009

Sector	Target Beneficiaries	Amount Required (US\$)
Health and Nutrition: Organizing measles vaccination campaigns, supporting Mobile Health Teams (MHT) and procurement of Emergency Drug Kits (EDK) preparedness and prevention activities for malaria and AWD outbreaks in the conflict affected regions in the north. For the nutrition, purchasing of Ready-to-Use Therapeutic Food (RUTF) ahead of time, to cover the additional needs in the second half of the year; ensuring vitamin A supplementation and screening of children and women in conflict affected communities for referral to therapeutic feeding programmes and WFP supplementary feeding programmes.	Population (1million) of the affected communities with strong emphasis on children, pregnant/lactating mothers and other vulnerable.	365,000
WASH: Provision of WASH NFIs, repairing and rehabilitation of nonfunctional water supply schemes and sanitation facilities with life-saving hygiene promotion.	Population (1million) of the affected communities	190,000
Education: Support of emergency education for the children of the displaced families through provision of education materials; Social mobilisation and awareness on importance of the education; Training of teachers and head/teachers; Supervision, Monitoring and Evaluation.	200,000 children reaching school age.	300,000
Child Protection: Assessments in regions with ongoing and recurrent emergencies and monitoring of child rights in the violence affected regions.	400,000 children of the affected communities.	81,000
HIV/AIDS: Conduct social mobilisation and awareness campaigns on HIV/AIDS transmission and prevention methods in the affected communities as well as pre-positioning of Pep Kits.	10,000 children and youth.	125,000
Shelter and Non-Food Items: Assess the needs of newly displaced populations; Through distribution, increase access to essential NFIs adapted to the emergency needs of the IDPs; Ensure effective coordination, monitoring and evaluation of sector's activities by involving all stakeholders in the affected region.	10,000 families	79,800
Total		1,140,800

Further information on the CAR emergency programme can be obtained from:

<p>Mahimbo Mdoe Representative UNICEF CAR Tel: +236 236 61 28 50 Fax: + 236 236 61 30 73 E-mail: mmdoe@unicef.org</p>	<p>Dermot Carty Deputy Director EMOPS UNICEF Geneva Tel: + 41 22 909 5601 Fax: + 41 22 909 5902 E-mail: dcarty@unicef.org</p>	<p>Gary Stahl Deputy Director PARMO UNICEF New York Tel: + 1-212 326 7009 Fax: + 1-212 326 7165 Email : gstahl@unicef.org</p>
--	---	---

* * *