Highlights

- Since 23 June, retaliatory violence between Anti-Balaka and ex-Seleka fighters in the Bambari area of Ouaka prefecture has led to the death of over 60 people and the subsequent relocation of non-essential UN staff to Bangui on 27 June. Five UNICEF staff remain in place.
- 42 boys and 1 girl were released to UNICEF from ex-Seleka armed groups in Bambari and Ippy and placed in interim care.
- Field missions were undertaken to Yaloke and Boda to monitor UNICEF partners’ implementation of activities for enclave populations, to identify key gaps and bottlenecks and to obtain an updated understanding of the situation of vulnerable children and women.
- Following the 28 May killings of 16 people including children and women attending a church service at the Fatima church in Bangui and the subsequent displacement, UNICEF and partners assisted in Rapid Response Mechanism (RRM), WASH and health/nutrition interventions for the affected community.
- A joint UNICEF, UNHCR and OCHA mission from Bouar visited enclave populations in Carnot and Berberati from 24-26 June as well as the wider impacted population in the area. The mission will inform more specific interventions for highly vulnerable populations in the areas up to the Cameroon border.

UNICEF’s Key Results with partners as percentage of achieved annual targets

- 62% children under five with SAM have been admitted for therapeutic care with a recovery rate of 80%.
- 72% of people targeted for assistance have access to a basic sanitation services.
- 64% of children released from armed forces and groups and 47% of children are benefiting from recreational activities and psychosocial support and 46% of GBV survivors received holistic assistance.
- 88% of displaced households in 36 sites in Bangui and Bimbo have received 2 insecticide-treated bed-nets; 78% of children under five are vaccinated against measles.
- 24% of displaced children aged 3-17 years have access to safe temporary learning spaces.
Situation Overview & Humanitarian Needs

UNICEF remains gravely concerned about the acute humanitarian crisis in Central African Republic (CAR). About 535,000 people are internally displaced, with 110,000 IDPs located in 43 sites in Bangui. An estimated 425,000 people remain internally displaced outside of Bangui in the interior. According to UNHCR Situation Report covering the period of 28 June – 4 July, the total number of refugees and evacuees in the neighbouring countries (Cameroon, Chad, Congo and DRC) since December 2013 is currently estimated at 145,885 people. However, the total number of CAR refugees in these countries is 388,592 people.

Major humanitarian flash points during the month included the north central and north western band of the country from Batangafo to Markounda and Nana Bakassa and further west to locations south-east of Bocaranga. This violence was largely attributed to ex-Seleka and bandit elements preying on local communities. In central regions, around Kaga Bandaro and Bambari, violence was attributed to clashes between ex-Seleka and Anti-Balaka elements. Tragically, such violence is normally vented on communities being seen as partial. Women and children are first victims.

The general situation in Bangui was mostly calm despite periodic incidents. The overall IDP population in Bangui has further reduced to the current estimate of 110,000. As per IOM surveys conducted from 19-23 May, 60% of the IDPs intend to return to their homes while almost 70% said they lack financial means to return home and also do not feel safe in their neighbourhoods.

In Bangui, efforts by Anti-Balaka elements to blockade the besieged population in PK5 were contained through MISCA and Sangaris actions including the further deployment of the EU Force of 800 soldiers and gendarmes, now fully operational. The EU Force is assuming responsibility for the security of the two most affected arrondissements, the 3rd and 5th. Though still limited, some indications of renewed market activities in PK5 were observed. Meanwhile, UNICEF and partners assisted in the resumption of humanitarian response for IDPs in the Fatima church (south of M’poko airport) following attacks on civilians by armed men on 28 May. This included RRM, WASH and health/nutrition interventions.

Also in Bangui, alternate sites have now been identified for IDPs at the Mpoko airport who are unable to return to their homes due to looting and destruction. The situation at Mpoko IDP site remains tense. For now it is unlikely that general relief distributions will be mounted due to the lack of assessed needs (food, shelter/NFIs, etc.) along with the continued presence and threats emanating from armed elements including Anti-Balaka. There is no plan to formally close the airport camp. Alternate assistance strategies remain under discussion.

In Ombella Mpoko, UNICEF strengthened its support to enclaved populations in Yaloke, deploying a mobile team (education, protection, WASH and CSD) for three separate missions during the second half of June. This followed observations that interventions undertaken since May were not demonstrating the required results especially for the enclaved population of some 500 Peuhls of whom 113 are children under five years. The situation of the Peuhl remains complex; they want to leave to Cameroon but are not being assisted to do so. They remain vulnerable to attack by the Anti-Balaka.

A technical mission was undertaken to Boda to monitor partner implementation and the wider situation of children and women. In Boda, although the situation of the enclaved Muslim population of 6,000 people remains a great concern, community mediation efforts suggest some progress towards reducing tensions. Yet the situation remains volatile. The arrest of an Anti-Balaka member by the international forces in late June led to a spike in tensions.

A joint UNICEF, UNHCR and OCHA mission from Bouar was conducted to Carnot and Berberati to monitor the humanitarian response including the situation of enclaved populations in these locations. The mission also obtained information on population movement patterns towards the Cameroon border and visited Nassole, 30km from the border.

Humanitarian response in Kaga Bandaro was complicated by increased insecurity including attacks on NGO premises leading to staff reductions and some NGO relocations. Aid delivery to Kaga Bandaro was also complicated by persistent threats and periodic attacks on trucks delivering humanitarian supplies passing between Bangui, Sibut and Dekoa. An
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RRM response targeting over 15,000 IDPs in Kaga Bandaro had to be suspended due to unclear registration figures as well as threats posed by a number of armed elements and individuals to aid actors. Some improvements in the security situation later in the month (including reinforcement of MISCA forces and Sangaris patrols extending from Dekoa) allowed UNICEF to undertake a technical monitoring mission to Kabo and Moyen Sido on the status of assistance for vulnerable populations including those relocated from Bangui (PK12) in early May. UNICEF continue to work with OCHA and other local actors on determining acceptable conditions to resume the Kaga Bandaro IDP distributions.

In Bambari, increasing concentrations of ex-Seleka and Anti-Balaka led to attacks that often targeted civilians. The situation severely escalated following atrocities attributed to Anti-Balaka against civilians including children and women in the village of Liwa, just outside Bambari, on 22 June. This in turn triggered revenge attacks and violence in Bambari despite the combined efforts of Sangaris and MISCA forces. As of 26 June some 10,000 newly displaced people were taking sanctuary in the UNICEF compound (with little fuel and water) along with over 60 UN and NGO staff. Violence in the area risks prolonging the disruption of aid delivery along the major axes to Bria, Alindao, Kouango, Bakala and Grimari. Just prior to the fighting, UNICEF was able to safely relocate 43 children associated with armed forces to Bria who had been released by ex-Seleka authorities. There the children were entrusted to the Bria Centre de transit et d’orientation (CTO) run by UNICEF partner COOPI.

Elsewhere, raiding and attacks on villages occurred in northern and northeast Ouham where NGOs IRC and DRC undertook emergency response along with local actors.

A planned UNICEF scoping mission to Ndele to determine the basis for opening an office was postponed due to flight cancellation. Discussions are taking place with UNHCR around a possible shared premises arrangement to enable establishment of an office in Zemio.

Humanitarian leadership and coordination

The humanitarian response in CAR is led by the senior Humanitarian Coordinator and the Humanitarian Country Team that includes UN agencies, NGO and Red Cross movement representatives. The Ministry of Health, Gender and Humanitarian Affairs is the principal government counterpart for humanitarian coordination. While the level of consultation at the central level is increasing, the Government has not yet established a regular coordination platform with international humanitarian actors. At field levels, UNICEF and other agencies coordinate with prefecture authorities as present.

In June, a UN Protection of Civilians mission visited the country to ascertain critical needs for the establishment of the MINUSCA peacekeeping mission. The mission met with humanitarian actors and made short visits to field locations.

At the HCT level, a surfeit of actions plans developed through the inter-cluster mechanism, while valid, also requires a strategic direction. The position of the Transitional Government, the need to balance response in the context of “Do No Harm” principles, the extent of physical threat and the role of international forces are some examples of the prisms through which response is planned and implemented. Ultimately, the best interest of the child is UNICEF’s measurement for response.

Summary Analysis of Programme Response

Nutrition

While CAR is entering the lean season (July-August) coupled with the annual peaks in diarrheal and malaria prevalence, actions, including the prepositioning of supplies, family water kits and hygiene/nutrition sensitisation modules distribution to health and nutrition structures, have been taken by the country office to prepare for the potential scenario as defined in the CAR nutrition contingency preparedness plan.
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Of the 10,417 cases of severe acute malnutrition (SAM) admitted in nutrition programmes since January (62% of the annual target), 16 % have medical complications and are admitted in In-patient therapeutic programmes (ITPs) and 84% are admitted in Out-patient Therapeutic programmes (OTPs).

The scaling up of nutrition activities continues with increasing of national coverage of Community-based Management of Acute Malnutrition (CMAM) activities implemented by NGOs and government partners. As June 28 ITPs and 169 OTPs are functioning nation-wide and supported by all members of the clusters.

UNICEF has increased its nutrition response for highly vulnerable enclaved populations in Boda and Yaloke by reinforcing its presence on site and extending its agreements with implementing partners African Humanitarian Agency and CARITAS. UNICEF continues assistance to the Yaloke hospital team in providing supplies and technical support to reinforce the functioning ITP and OTP capacities to treat cases screened and referrals from the Peuhl IDPs site as well as within the area population.

Overall performance indicators of case management remain within global standards with an average recovery rate of 80% (>=75%) and death rate of 3 % (<5%). However, the default rate remains high at 17% (< 15%) especially for areas still affected by insecurity and population displacements.

WFP has increased school-feeding in closed coordination with nutrition cluster partners.

Health

The preliminary results of the vaccination campaign carried out during the first phase (Bangui, health regions 1, 2 and part of health region 3) of “African Immunisation Week (AIW)” show that 143,849 children under five years were immunized against poliovirus; 139,320 children aged 6 to 59 months were supplemented with Vitamin A; and 144,365 children aged 1 to 5 years were de-wormed with albendazol tablet.

The second phase of African Immunisation Week’s (AIW) planned for June to cover the remaining health regions (3, 4, 5 and 6) is still pending due to prevailing insecurity conditions along the main axes leading to the Central and Eastern regions. Although Vakaga is part of region 5, the security conditions and difficult access in rainy season do not allow its coverage at this time.

Meanwhile preparations are ongoing for a mass distribution of Long Lasting insecticide treated nets (LLIN) in Bangui in order to achieve universal coverage in 2014. An estimate of 175,000 households will receive approximately 480,000 LLIN based on the distribution criterion of 1 net for 2 people. The distribution is scheduled to start shortly and will continue till 12 July 2014, and it will be implemented by the Central African Republic Red Cross in partnership with UNICEF.

In line with the preparedness policy for the much anticipated cholera outbreak in different IDPs sites and high risk zones during the rainy season, UNICEF is in process of ordering the appropriate beds. As international suppliers are no longer available the CO is exploring the possibility of having the beds produced locally (Bangui).

Free health care and nutrition assistance continue to be provided to displaced and returned persons in Bangui, Bimbo, Boda, Bossangoa, Bambari, Bouar and Kaga Bandoro. For Bangui and Bimbo, 11,669 children under five years have benefited from curative care and 711 pregnant women received antenatal care and 72 women were assisted during delivery. In addition, UNICEF provided integrated health and nutrition care to vulnerable populations mainly Peuhl and Muslims IDPs in the enclaves of Boda in Lobaye Prefecture and Yaloke in Ombella Poko prefecture. Recent monitoring missions underscored the critical challenges of ensuring access to basic health care and referral in the context of enclave conditions where external movement is completely blocked. In support of this, UNICEF has renewed a partnership with the INGO African Humanitarian Action (AHA) in order to provide free care.

The Health unit is annually reporting on four key Humanitarian indicators and the proportions of achieved targets show the following as of 30 June:
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- 88% of households received bednets (2 bednets per households) in IDPs sites in Bangui and Bimbo. This activity is now completed and a new distribution of Long Lasting insecticide treated nets (LLIN) in Bangui will start early July;
- 78 % of children U5 are vaccinated against measles;
- 35 % of people have access to basic health services and medicines in the affected areas;
- 20% of children 1-5 years received de-worming medication;
- 17 % of children Under-five provided with Vitamin A.

HIV/AIDS

Since January, about 85% of PMTCT sites have been re-established and are now able to offer a full PMTCT package to beneficiaries in UNICEF supported target areas (80 PMTCT sites out of 94 targeted sites).

The 2014 target for pregnant women to be seen in antenatal services is 56,732. These women should also be counselled for HIV. Since January, 21,485 pregnant women (38%) have been seen in ANC1 and also counselled on HIV, and 8,788 have been tested for HIV. In June, 1,862 pregnant women were seen in ANC1 and counselled on HIV, and 831 of them were tested. Among the 4,392 HIV positive women annually targeted for ARV prophylaxis, only 1,175 of them (27%) were provided with ARV prophylaxis.

Also in June, capacity building of 50 peer educators was undertaken by the Association Nationale des Jeunes Femmes Actives pour la Solidarité (ANJFAS) in collaboration with UNICEF and MoH in order to improve retention for HIV positive cases and to increase the PMTCT service utilization rate in IDPs sites in Bangui, Bimbo and Begoua.

Thus far 4,392 children are expected to be born from HIV positive mothers and therefore they should receive ARVs prophylaxis. Up to now only 652 of them (15%) have received ARVs prophylaxis. The major problems are attributed to high numbers lost to follow for ANC and post-natal low utilization of services including the non-reestablishment of PMTCT services in 14 remaining health facilities. At the same time, the quality of services in functional structures requires further reinforcement. Efforts are underway to address this. In collaboration with Ministry of Health (MoH) and peer educators (Network of people living with HIV/AIDS in CAR), UNICEF is preparing a HIV test campaign for children under five of all women registered in HIV/AIDS programme in Bangui, Bouar, Bangassou, Bossangoa, Berberati, and Kaga Bandoro).

UNICEF is continuing its support to ensure the re-establishment and quality services in of 94 PMTCT sites in UNICEF supported zones and mobilize additional resources to scale up the program with a focus on integrating PMTCT into the reproductive health services.

Overall response progress for the four key humanitarian indicators stands as follows: 38% of pregnant women receiving HIV/AIDS counselling; 31% of children previously on ARV prophylaxis continue to receive ARV treatment; 27% of pregnant women are benefitting from PMCTC- ARV prophylaxis; and 15% of children born from HIV positive women are benefitting from ARV prophylaxis.

WASH

Activities described below (in Bangui, Bambari, Grimari, Bossangoa and Kaga Bandoro) were all carried out during the month of June.

In Bangui, UNICEF continues to support the SODECA in provision of chemical products for water treatment. Returnee households that have connected to SODECA network have been given waivers for paying the first 10m3 of water. IDPs still at the sites are receiving water for free. In partnership with the Rural Water Authority (ANEA) and NGOs, UNICEF provides on daily basis 6.7 liters per day/per person of safe drinking water to IDPs. In emergency situation, the minimum required in SPHERE standards is 7.5 liters per day/per person.

A recent donor – ECHO - monitoring visit to the SODECA water treatment centre in Bangui found major shortages in chlorine stocks and UNICEF was urgently informed. The existing quantity was adequate to last only for two weeks.
SODECA had confirmed that without new supply, the water treatment centre would stop completely as was the case in 2002. In subsequent emergency meetings, UNICEF, through the WASH Cluster Coordination, has mobilized about 2 metric tons (Mts) of chlorine for around 11 days - from OXFAM, ACF and ICRC - to mitigate the gap until UNICEF’s supplies (86.4 Mts of Aluminum Sulphate, 30.8 Mts of HTH (Chlorine), 13.6 Mts of lime and 125 kgs of Purifloc N17) arrive in the country by 20 July.

In Bambari, Triangle Generation Humanitaire (TGH), with funding from CHF and UNICEF, is continuing with the water chlorination for the 45 planned boreholes and 11,000 people have now access to safe drinking water in the city. About 3,000 people were reached during the sessions of sensitisation on hand wash, sanitation and use of chlorinated water. TGH has built 13 latrines, 10 showers, 1 waste pit and 1 water chlorination point to assist over 1,000 recently displaced people arriving from Liwa. During the implementation of these activities a mass sensitisation was conducted on latrines use, hand wash and water hygiene.

In Grimari, the promotion of hygiene (latrines use, hand wash, personal hygiene, environmental hygiene, water hygiene, etc.) was undertaken for 7,000 IDPs along with the distribution of 16,000 soap bars as well as 800 Jerricanes. Construction of 90 emergency latrines out of 130 planned (100 for adults and 30 for children), and 100 showers planned, for the 7,000 IDPs in Grimari. TGH is in charge of the daily production and supply of 26 m3 of water to these 7,000 IDPs, which is 3.7 liters/per day/per person, nearly half of the required 7.5 liters/per day/per person in Sphere standards.

In Bossangoa, SODECA is producing and distributing on daily basis 500 m3 to population estimated at 35,000 people. This is 14.3 liters/per day/per person, nearly equal to 15 liters/per day/per person required in normal situation. With MSF logistical support, two pumps were rehabilitated in Bowayi and Kaboro by the artisans repairers from Direction regionale de l’hydraulique 3 (DRH3). In addition, UNICEF provided to the latter 3,200 liters of fuel.

In Kaga Bangoro, 30 pumps out 50 planned until December have so far been rehabilitated by ANEA. The renovation of the immediate perimeter of the pumps (Platform fence, drainage system, sump, etc.) is already completed for 10 of 30 pumps and continues for the remaining 20. About 15,000 people are benefiting from these 30 rehabilitated pumps.

As part of efforts to reach out the rural areas, UNICEF is currently working with partners in Ombella Mpoko, Lobaye, Mambere Kadei, Nana Mambere, Ouham Pende, Ouham, Nana Gribizi and Ouaka in conducting rapid technical assessments of non-functioning pumps. Once the exercise is completed in this first group, UNICEF will engage the same partners in conducting quick rehabilitations campaigns. These rehabilitations will be accompanied by promotion of construction and utilization of family pit latrines (to be triggered by CLTS approach), and promotion of good hygiene practices that will also focus on utilization of soaps for hand washing during critical times. The second phase will consist of Sangha Mbaere, Kemo, Bamingui-Bangoran, Haute Kotto, Basse Kotto, Mbomou and Haut Mbomou. Vakaga prefecture, due to its poor access during rainy season, will be in the third phase.

UNICEF’s key partners in this exercise include, but not are not limited to, ACF, ACTED, World Vision, Mercy Corps, Lutheran World Federation, Tear Fund, OXFAM, TGH, PU-AMI, ANEA, DGH, ICDI, Solidarites and IMC.

As of 30 June, the proportions of achievement against the three UNICEF annual targets are as follows in WASH:

- 48% of people have access to improved water;
- 72% of people have access to a basic sanitation services;
- 100% of people who received wash items (jerrycan and soap) and knowledge to put in place hand washing practices. However, this percentage above 100% (108%) reflects a low target set during the planning phase for this indicators.
On 17 and 18 June, a total of 43 children (42 boys and 1 girl) were released to UNICEF custody from ex-Seleka forces in Bambari and Ippy and placed in interim care through UNICEF COOPI as the family tracing and reunification is underway. Key actors involved in the release of children include the representatives of Ex-Seleka, local representatives of the ministry of health and social affairs, and NDA, a national NGO working with UNICEF on preventing child recruitment in ex-Seleka controlled zones. This brings to 280 (including 63 girls and 217 boys) the number of children released from ex-Seleka since January 2014.

In addition, the programmatic response for children associated with anti-Balaka has started following negotiations with Anti-Balaka authorities: 74 children including 2 girls and 72 boys were handed over by Anti-Balaka area commanders in PK11 to UNICEF and the Ministry of Defence/DDR on 17 June 2014. These children have access to psychological assistance, interim care and medical assistance before reunification with their respective families. At least 47 host families have been identified and prepared by the Ministry of Health and Social Affairs to provide family-based care to children who came to Bangui from other areas. These children are part of 992 boys and girls who were registered and certified within Anti-Balaka in Bangui (Boyrabe and PK11 neighbourhoods), Boali and Pissa. UNICEF is working with DON Bosco, COOPI, the Ministries of Health and Social Affairs, and Defence and DDR to address the immediate need of these children.

The needs remain significant. The dialogue with armed groups has made it possible to register and provide interim care to 1,272 children (64% of achieved annual target) including 271 girls and 1,001 boys who were associated with ex-Seleka and anti-Balaka. Based on field work, the number of children associated with these groups are far beyond the November estimates of 6,000 children, and could be as high as 10,000 as indicated by the Ministry of Defence and DDR. There is there needs to mobilized resources and partners to scale up interventions aiming at preventing further recruitment and responding to the urgent need of released children.

In south-east, on 22 June, 6 children associated with LRA managed to escape during a Ugandan Peoples’ Defence Forces (UPDF) attack in Mbago (Mbomou prefecture). Arrangements are underway for the care of these children handed over to COOPI by the UPDF.

UNICEF is also working on the issue of separated children. To date, 448 separated children (37% of annual target) in emergencies have been reunified with their families.

From 1 to 20 June, 6,893 children have had gained to psychosocial support through child friendly space and youth clubs in Bangui, Bossangoa, Bouar, Kaga Bandoro, Sibut and Zere. In total, 44,628 children have benefited from UNICEF supported psychosocial interventions since January. This represents 47% of the 2014 target of 95,000 children.

A technical working group on unaccompanied and separated children adopted Standard Operating Procedures (SOP) on unaccompanied and separated children. Focal points were established in Bangui, Boda, Bossangoa and Mbaiki to ensure a speedy identification, registration family tracing and reunification of unaccompanied children.

A 10-day birth registration campaign was launched on 16 June and so far, the Ministry of Decentralization and Local Government reported that 22,870 (76% of target) children aged 1 year (those born during the conflict in CAR) have been registered in Bangui, Begoua and Bimbo. The aim of this campaign is to help 30,000 children non-registered to obtain their birth certificates. Local authorities including mayors and chefs de quartiers are all involved in the campaign.

In June, 268 people were trained and sensitized on child protection issues during the month of June. They include: 20 child protection actors trained in Bossangoa on standards and tools related to separated and unaccompanied children; 40 community leaders trained in Bossangoa on the prevention and response to child protection issues; 19 social workers in Bambari on MRM, 24 Ex-Seleka officers sensitized on the prevention of grave violations against children include child recruitment in Bambari, 165 people trained on birth registration law and procedures in Bangui, Begoua and Bimbo. Altogether, since January the total number of people trained or sensitized is 636. This comprises the 268 people trained in June, 240 child rights monitors trained on MRM, 74 Anti-Balaka units and sections commanders sensitised on grave violations and 54 government and NGOs health workers trained on GBV.
UNICEF signed a partnership with a local NGO, Observatoire Centrafricain de droits de l’Homme (OCDH), in May 2014 for the monitoring and reporting on child rights violations in 10 locations including Baoro, Berberati, Birao, Bouar, Bossangoa, Bozoum, Carnot, Grimari, Kaga Bandoro and Mbaiki.

During this period (1-20 June) 231 survivors of gender-based violence received holistic care (mainly psychological support and medical care) in 15 ‘listening centres’ in collaboration with UNICEF Partners (IRC, Mercy Corps, and AFJC). In addition, COOPI provided the figures for March to May: 97 survivors of Gender-Based violence who received a holistic care. This brings to 926 (41% of annual target) the total number of survivors who received holistic care and Hygiene Kits from January to June 2014. UNICEF annual target of 1,200 GBV survivors still very low compared to the huge needs in CAR. Also, it is worth noting that for the month June only, The Centrafrican Women Lawyers Association (AFJC) documented 166 cases of GBV in ten locations, 59% of them being cases of rape against women and girls. This highlights the urgent need for a quick scale up of GBV prevention and response throughout the country.

Education

UNICEF has supported the Ministry of Education (MoE) to integrate Education in Emergencies (EIE) in drafting the Sector Transitional Plan 2015-17. Elements of preparedness, conflict analysis, education for peacebuilding and capacity building at all levels are now included in the plan for implementation with GPE and other funding.

While the fragile security situation constitutes the biggest challenge to the implementation of the EIE response, UNICEF is in process of identifying additional partners for the establishment of safe temporary learning spaces for thousands of children displaced in Bangui, Kaga Bandoro, Boda, Kabo and Moyen Sido, Grimari and Yaloké.

UNICEF took measures to provide education opportunities for more than 600 children displaced in the Muslim Enclave PK5, Bangui: one ETAPE is already built and currently benefits 200 students. Two more are in the pipeline: construction materials have been prepositioned in the enclave. UNICEF has conducted a sensitization training on the benefits of EIE, Child Protection, Health and Sanitation in school, for 15 teachers (13% female) and 14 parents (79% female) who will manage 3 ETAPEs in the Muslim Enclave PK5.

According to the Ministry of Education, 45% of primary schools in CAR are still closed. However, in some zones such as Ouham province, only 12% are open, leaving thousands school aged children out of school. UNICEF is concerned that a full school year will be missed by conflict affected children, which adds to severe protection concerns.

UNICEF is supporting the Ministry of Education in the process of reopening primary schools in safe areas where formal education can resume. Thanks to GPE funds, partnership agreements were signed with two partner NGOs (Finn Church Aid, and Enfants sans Frontières) to support the return to school for more than 42,000 students in Ombella Mpoko and Ouham Pende, M’Bomou and in Bangui respectively. In Bangui and in the province of Ouaka, UNICEF has provided teaching and learning materials for 15,640 primary school children in 41 schools, and technical assistance is provided by UNICEF to improve the quality integrated education and child protection services in ETAPEs.

The Education Cluster has finalized an emergency curriculum for 4 months catch up classes, which will be validated by the MoE and utilized in temporary learning spaces (ETAPEs) as well as in re-opened government schools, during the summer, before the beginning of the 2014/15 school year in November only.

Education section progress on the two main indicators against the annual targets are as follows as of 30 June:

- 20% of children aged 3 to 18 years benefited from education supplies;
- 24% of children are participating in ETAPE activities (temporary learning spaces).
Communication for Development

In line with the plan for cholera prevention, UNICEF supported a training of 1,000 community mobilisers in two phases, conducted under the patronage of the Directorate of Health Communication (DCS) within Ministry of Health and Social Affairs. The first phase took place in May and dealt only with 300 mobilisers; while the training of the remaining 700 mobilisers took place in June.

During each phase, three training sessions were organised on cholera prevention, including hygiene promotion. All these trained 1,000 community mobilisers were then involved in distribution of the 20,000 posters and 30,000 fact sheets produced in Sango and French. Also, a film on the history of cholera was translated into Sango and then distributed in all health districts. In total, 1,197,433 men and 1,207,389 women are expected to be exposed to the key messages regarding the cholera prevention in the 31 sous-prefectures and 8 arrondissements of Bangui.

Fifty women from the Coalition des Femmes Pour la Paix et la Reconstruction in the Central African Republic were trained on communication techniques for the promotion of peace and essential family practices. These trained women leaders are expected to play a major role in the areas of peace reconstruction and promotion of child and mother survival.

The C4D section provided technical support to the Education section in the training of around 20 Muslim teachers and 10 parents in the PK5 neighbourhood on cholera, malaria and diarrhoea prevention measures. This was also an opportunity to mobilise the local community on promotion of vaccination of under five children as well as the exclusively breastfeeding for infants (0 – 6 months).

As of 30 June, progress towards the annual targets (mostly in Bangui and Bossangoa) are as follows:
- 65% of targeted households in Bangui were exposed to messages related to vaccination campaign;
- 60% of targeted young people sensitised on violence, HIV, peace, hygiene and sanitation;
- 30% of targeted people affected (children, young, women, men) have been exposed to the health, peace, hygiene and sanitation messages.

Rapid Response Mechanism

In June, RRM partners ACF, ACTED, IRC, Solidarités international and PU-AMI have conducted assessments and within the RRM ‘provider of last resort’ concept, undertaken rapid emergency response as follows:
- Multi-sectoral assessments conducted in Bambari, on the axes Grimari-Bakala and Bouar-Mann-Bozoum-Bocaranga, in Kabo (site C), Kouki, Sibut, and Yankai;
- NFIs distribution in Bambari for 208 households, Sibut for 294 households, Darengo and Bozele for 705 people, Ngoutere for 13 households and Kabo (site C) and Moyen Sido for 98 households;
- WASH interventions in the three displaced sites of Bimbo.

The RRM is now providing regular briefs to the weekly OCHA-coordinated inter-cluster committee on key rapid multi-sector assessment outcomes towards emphasizing cluster accountability for more sustained interventions where needed. Lack of funding impede scaling up the RRM in CAR. Should additional funding be available, capacities could increase to intervene in other sectors. The RRM is also meeting weekly through its Steering Committee as well as doing rapid consultation and decision making via the internet.

Supply and Logistics

- Three Lorries of 15 Mts each arrived in Bangui in June and they have already delivered supplies in Bambari, Bocaranga, Bossangoa and Kaga Bandoro.
- The Douala corridor has been congested during the month of June with around 19,000 containers to be handled to various locations. This situation did not impact much shipments to CAR as trucks continued to move under regular MISCA escorted convoys from the border to the Bangui haulier terminal. Presently convoys are moving
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from Cameroonian border to Bangui on Mondays, Wednesdays and Fridays, and from Bangui on Thursdays and Sundays;

- From January to 21 June 2014, a total value of US$ 4 million of supplies, composed of essential medical supplies, health kits, nutrition products, NFIs, WASH items, and education kits were distributed to UNICEF implementing partners;
- Most UNICEF CAR procurement is offshore, due to the complete disruption of the local market; hence so far 92 % of Purchase Orders are placed outside of CAR via Supply Division.
- The revised 2014 UNICEF CAR Supply Plan is presently executed at 65 %, below the minimum required in Level three emergencies (85%) due to the lack of funding for the CAR crisis.

External Communications

In June, External Communication focused on the protection of children. In addition to the links below, considerable outreach was done with German Media in order to raise the visibility of UNICEF’s work in CAR. A TV3 (French TV channel) feature on UNICEF child protection programme was aired as well.

InfoCom is preparing for two major visits in July with the visit of GWA Mia Farrow (1-5 July) and a joint Director’s visit involving the French, and Spanish Natcoms (9-12 July).

Press releases, stories and blogs published in June are the following:

Six months after fighting reaches capital, no end to horror for children in Central African Republic violence: UNICEF
http://www.unicef.org/media/media_73835.html

Central African Republic: rain turns children’s hopes to mud

L’UNICEF soutient la distribution de kits préscolaire aux écoles maternelles en République centrafricaine
http://www.unicef.org/wcaro/french/4501_8245.html

Media hits:

“Krieg der Religionen, Katastrophe für die Massen”
http://spon.de/vgsIS

“La cosa que más odio de la lluvia es que las serpientes salen”
http://www.elmundo.es/solidaridad/2014/06/05/538fee6d22601d6a348b456b.html

Crisis in Central African Republic
http://static.apps.welt.de/2014/bangui/index.html

Crisis in CAR – and impact on children

Unaccompanied children in CAR
http://m.thetandd.com/features/online_exclusives/girl-left-in-forest-in-central-african-republic-war/article_3b0a0466-e9f4-11e3-b3e3-001a4bdf887a.html?mobile_touch=true

CAR Children Killed & Maimed Every Day in Violent Clashes – UNICEF
http://www.gbcghana.com/1.1759104

Central African Republic: UN appeals for safe haven for civilians fleeing violence
Security

Since the tragic events of the end of May at Fatima church in Bangui, the security situation in the capital has remained somewhat stable. However, isolated incidents continue to highlight the fragility of the situation. Notably, on 22 June, a member of the FACA (Forces armées Centrafricaine) was killed in the vicinity of Quartier Sara in the 3e Arrondissement. This event triggered a spontaneous march to the centre of Bangui towards the Presidential Palace. The MISCA Police Unit (UPC) had to break up the protest with tear gas and warning shots.

Armed clashes continue to shake the situation in the northwest of the country and also in the vicinity of the city of Bambari. The violence in the northwest has been concentrated in the vicinity of Boguila where majority of the population has fled to Bossangoa for safety. On 23 June, the Anti-Balaka attacked the Peulh settlement in Ardo Ndjobdi (9 km southeast of Bambari) and killed 18 people including 3 children and a woman, and 22 houses were also burnt down. In retaliation, ex-Seleka fighters carried out attacks in Christian neighbourhoods in Bambari.

As of 26 June, continued tensions were reported in Bambari (central Ouaka prefecture). Hundreds of anti-Balaka combatants and accompanying supporters encamped around the Bambari bridge, with MISCA and Sangaris representatives engaging this group in dialogue (and French forces preventing an attempt by some anti-Balaka to break through a security cordon). There are also reports of attacks by both anti-Balaka and ex-Séléka on civilians suspected of collaborating with members of a rival community, whether Christian or Muslim. To the north-west, in Ouham prefecture, residents of Batangafo have fled in fear of a possible attack by anti-Balaka elements positioned some 15 km beyond the city.

In south-east, LRA continues to carry attacks on civilian population. On 17 June 17, LRA elements attacked the gold site Kono Nzacko where they abducted 5 people and the neighboring villages were looted. On June 16, three people including two men and a woman were killed and 25 others (including children) were removed in Wagou village located at 10km from Zabé (sub-prefecture of Bakouma) by the LRA fighters.

Cluster Coordination

UNICEF is leading the WASH, Education and Nutrition clusters and the Child Protection sub-cluster for the CAR emergency response. WASH, education and Nutrition clusters and the Child Protection sub-cluster have a dedicated cluster coordinator. All clusters meet on a weekly basis, facilitated by OCHA, and come together under the inter-cluster platform also meeting on a weekly basis.

Fortnightly meetings are taking place between the Representative and Cluster Coordinators (Education, Nutrition and WASH along with the Child Protection sub-cluster lead).
As of 30 June, UNICEF has received $29.4 million against the $81 million in the 2014 HAC requirements and details are provided in below sectoral table.

<table>
<thead>
<tr>
<th>Sector</th>
<th>Initial HAC 2014 requirements</th>
<th>Income through UNICEF and donors*</th>
<th>Funding gap</th>
<th>$</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nutrition</td>
<td>11,000,000</td>
<td>3,679,413.40</td>
<td>7,320,586.60</td>
<td>67%</td>
<td></td>
</tr>
<tr>
<td>Health and HIV/AIDS</td>
<td>20,600,000</td>
<td>10,314,945.23</td>
<td>10,285,054.77</td>
<td>50%</td>
<td></td>
</tr>
<tr>
<td>Water, Sanitation &amp; Hygiene</td>
<td>17,400,000</td>
<td>6,621,275.72</td>
<td>10,778,724.28</td>
<td>62%</td>
<td></td>
</tr>
<tr>
<td>Child Protection</td>
<td>12,000,000</td>
<td>4,521,025.00</td>
<td>7,478,975.00</td>
<td>62%</td>
<td></td>
</tr>
<tr>
<td>Education</td>
<td>10,000,000</td>
<td>597,864.58*</td>
<td>9,402,135.42</td>
<td>94%</td>
<td></td>
</tr>
<tr>
<td>Non Food Items (NFI)</td>
<td>10,000,000</td>
<td>3,632,795.77</td>
<td>6,367,204.23</td>
<td>64%</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>81,000,000</td>
<td>29,367,319.70</td>
<td>51,732,276.65</td>
<td>64%</td>
<td></td>
</tr>
</tbody>
</table>

UNICEF wishes to express gratitude to all public and private sector donors for the contributions and pledges received, which have made the current response possible. UNICEF would especially like to thank National Committees and donors who have contributed ‘non-earmarked’ funding. “Non-earmarked” funding gives UNICEF essential flexibility to direct resources and ensure the delivery of life-saving supplies and interventions to where they are needed most – especially in the form of longer-term and predictable funding and in strengthening preparedness and resilience. Continued donor support is critical to continue scaling up the response.

SUMMARY OF PROGRAMME RESULTS – as of 30 June 2014

<table>
<thead>
<tr>
<th>Sector</th>
<th>Indicator</th>
<th>2014 (Full year)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>UNICEF &amp; operational partners</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Cluster / Cluster</td>
</tr>
<tr>
<td></td>
<td></td>
<td>UNICEF Target</td>
</tr>
<tr>
<td>Health</td>
<td>Number and % of households that received bednets (2 bednets per households) (*)</td>
<td>75,791</td>
</tr>
<tr>
<td></td>
<td>Number and % of children U5 vaccinated against measles</td>
<td>249,725</td>
</tr>
<tr>
<td></td>
<td>Number and % of children Under five provided with Vitamin A</td>
<td>740,000</td>
</tr>
<tr>
<td></td>
<td>Number and % of children 1-5 years who received de-worming medication</td>
<td>657,000</td>
</tr>
</tbody>
</table>
### CAR HUMANITARIAN SITUATION REPORT - 9 July 2014

<table>
<thead>
<tr>
<th>Nutrition</th>
<th>Number and % of children aged 6-59 months with Severe Acute Malnutrition (SAM) admitted for therapeutic care and benefitting from promotion of nutrition practices</th>
<th>16,800</th>
<th>10,417</th>
<th>62%</th>
<th>16,800</th>
<th>10,417</th>
<th>62%</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Recovery Rate</td>
<td>&gt;=75%</td>
<td>80%</td>
<td>NA</td>
<td>&gt;=75%</td>
<td>80%</td>
<td>NA</td>
</tr>
<tr>
<td></td>
<td>Death Rate</td>
<td>&lt;5%</td>
<td>3%</td>
<td>NA</td>
<td>&lt;5%</td>
<td>3%</td>
<td>NA</td>
</tr>
<tr>
<td></td>
<td>Default Rate</td>
<td>&lt;15%</td>
<td>17%</td>
<td>NA</td>
<td>&lt;15%</td>
<td>17%</td>
<td>NA</td>
</tr>
</tbody>
</table>

**UNICEF Operational Partners:** ACF, COHEB, IMC, MSF-F, MSF-E, MSFH, CARITAS, MERLIN, SAVE THE CHILDREN. Data as of 31 May 2014.

<table>
<thead>
<tr>
<th>WASH</th>
<th>Number and % of affected people that have access to improved water (*)</th>
<th>700,000</th>
<th>334,547</th>
<th>48%</th>
<th>900,000</th>
<th>529278</th>
<th>59%</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Number and % of affected people with access to a basic sanitation services (**)</td>
<td>225,000</td>
<td>161,582</td>
<td>72%</td>
<td>900,000</td>
<td>377,282</td>
<td>42%</td>
</tr>
<tr>
<td></td>
<td>Number and % of affected people who received wash items (jerrycan and soap) and knowledge to put in place hand washing practices (****)</td>
<td>225,000</td>
<td>242,899</td>
<td>108% (****)</td>
<td>900,000</td>
<td>521411</td>
<td>58%</td>
</tr>
</tbody>
</table>

**UNICEF Operational Partners:** IRC, ACF, Anea, LIFA, EEA, Caritas-Bambari, ICDI, IMC, Oxfam, Sodeca, ICDI, League Islamique Africaine

(*) Standard sphere not yet reached for Bangui sites. Bossangoa standard Sphere almost reached with the provision of 12 liters of water per person per day.

(**) Latrines/defecation fields with hand washing dispositive in the IDPs sites. For Bangui and Bossangoa, Sphere standard reached in phase 2. For Bangui sites, the average is 45 per latrine at the airport site and UNICEF supported interventions 1 latrine per 50 persons.

(****) Partial data related to the people reached with hygiene communication activities.

(****) The achievement beyond 100% reflects the low target set during the planning phase.

<table>
<thead>
<tr>
<th>Child Protection</th>
<th>Number and % of children benefiting from recreational activities and psychosocial support (children centre and counselling areas)</th>
<th>95,000</th>
<th>44,628</th>
<th>47%</th>
<th>95,000</th>
<th>44,628</th>
<th>47%</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Number and % of children released from armed forces and groups</td>
<td>2,000</td>
<td>1,272</td>
<td>64%</td>
<td>2,000</td>
<td>1,272</td>
<td>64%</td>
</tr>
<tr>
<td></td>
<td>Number and % of separated children in emergencies reunified with families</td>
<td>1,200</td>
<td>448</td>
<td>37%</td>
<td>1,200</td>
<td>448</td>
<td>37%</td>
</tr>
<tr>
<td></td>
<td>Number and % of GBV survivors who receive holistic assistance</td>
<td>2,000</td>
<td>926</td>
<td>46%</td>
<td>5,000</td>
<td>1440</td>
<td>29%</td>
</tr>
</tbody>
</table>

**UNICEF Operational Partners:** CARITAS, COOPI, IMC, Mercy Corps, Save the Children, ACTED, Don Bosco

668 unaccompanied and separated children have been identified in Bangui, 1 south of Yaloke, and 21 in Kaga Bandoro. In Bouar, a total 60 UASC have been identified by child protection partners after verification. Follow up for these children is ongoing.

<table>
<thead>
<tr>
<th>HIV/AIDS</th>
<th>Number and % of pregnant women receiving HIV/AIDS counselling</th>
<th>56,732</th>
<th>21,485</th>
<th>38%</th>
<th>56,732</th>
<th>21,485</th>
<th>38%</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Number and % of pregnant women benefitting from PMCTC- ARV prophylaxis</td>
<td>4,392</td>
<td>1,175</td>
<td>27%</td>
<td>4,392</td>
<td>1,175</td>
<td>27%</td>
</tr>
<tr>
<td></td>
<td>Number and % of children born from HIV positive women benefitting from ARV prophylaxis</td>
<td>4,392</td>
<td>652</td>
<td>15%</td>
<td>4,392</td>
<td>652</td>
<td>15%</td>
</tr>
</tbody>
</table>

**UNICEF Operational Partners:** ACF, SAVE THE CHILDREN, FRENCH RED CROSS, COLLABORATION WITH MSF, CARITAS

(*) 2 Bednets per household with an average of 5 people per household in IDPs sites in Bangui and Bimbo. This activity is completed

(**) Progress based on estimation of population benefiting from health medicines and equipment regularly distributed by UNICEF. This includes drugs, medical supplies, and basic medical equipment, basic steam sterilization equipment to ensure sterilization of facilities in all types of environment. This includes 158 facilities outside Bangui receiving support.
### CAR HUMANITARIAN SITUATION REPORT - 9 July 2014

<table>
<thead>
<tr>
<th>Education</th>
<th>Number and % of children between 3 to 18 years who benefited from education supplies</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>300,000 58,749 20% 580,000 67,968 12%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Number and % of children participating in ETAPE activities (temporary learning spaces) (*)</th>
</tr>
</thead>
<tbody>
<tr>
<td>100,000 23,600 24% 180,000 25,800 14%</td>
</tr>
</tbody>
</table>

UNICEF Operational Partners: CORDAID, VITALITE PLUS, ECAC, JUPEDEC, COHEB, ECAC, IDEALE, JRS, JUPEDEC, ESF, BSF, COHEB, AIDE, REMOD, IDEALE RCA, CARITAS

(*) 100 ETAPEs functional in Bangui, 18 in Bossangoa and 5 in Boda

<table>
<thead>
<tr>
<th>C4D</th>
<th>Number and % of households exposed to messages related to vaccination campaign</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>960,000 624,000 65% NA</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Number and % of people affected (children, young, women, men) who have been exposed to the health, peace, hygiene and sanitation messages</th>
</tr>
</thead>
<tbody>
<tr>
<td>2,500,000 750,000 30% NA</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Number and % of young people sensentised on violence, HIV, peace, hygiene and sanitation</th>
</tr>
</thead>
<tbody>
<tr>
<td>518,000 310,800 60% NA</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>RRM</th>
<th>Number and % of households that received NFIs items</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>17,267 12,000 69% Not Applicable</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Number and % of Multi-Sectoral Assessments (MSA) conducted</th>
</tr>
</thead>
<tbody>
<tr>
<td>51 18 35% Not Applicable</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Number and % of boreholes rehabilitated/built</th>
</tr>
</thead>
<tbody>
<tr>
<td>109 15 14% Not Applicable</td>
</tr>
</tbody>
</table>

UNICEF Operational Partners: MoH. 2014 indicators and targets revised, progress made has been adjusted accordingly.

Twitter handle: @UNICEF_CAR, #CARcrisis

The next CAR Country Office Humanitarian Situation Report will be released on or around 28 June 2014.

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