Highlights

- Conflict has increased across the countryside. Attacks by ex-Seleka forces, in an effort to consolidate control of central and northern prefectures in advance of the rainy season, as well as predatory violence and the absence of law and order, have rendered large areas anarchic with increasing concerns for the plight of vulnerable populations, children and women.

- Following a decision taken by the UN Humanitarian Country Team (UN HCT) as a last resort to save lives, UNICEF provided support to facilitate the voluntary relocation of highly vulnerable Muslim populations in Bangui and Bossangoa to new locations within CAR and at the Chad border, and continues to provide ongoing support to sustain protection and humanitarian delivery for populations in ‘enclaves’ and other sites.

- Supplies to zonal warehouses continue to be pre-positioned in anticipation of the rainy season, including Rapid Response Mechanism (RRM) relief items for 20,000 people, drug kits and anti-malarial medication and nutritional commodities.

- CAR is facing a serious fuel shortage, which impacts all logistics and movement for the response. UNHAS flights were cancelled from 23-27 April.

UNICEF’s Key Results with partners

- Over 6,800 children under 5 with severe acute malnutrition have been admitted for therapeutic care
- 201,700 people have access to improved water
- 429 children separated from their families as a result of the crisis have been reunited with their families
- 62,000 households have received 2 insecticide-treated bed-nets in 34 sites in Bangui.
- 23,600 children aged 3 to 17 access safe temporary learning spaces

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- 2.3 million CHILDREN AFFECTED
- 4.6 million PEOPLE AFFECTED
- 603,000 INTERNALLY DISPLACED PEOPLE IN CAR
- 211,000 REFUGEES AND EVACUEES OUTSIDE OF CAR IN NEIGHBORING COUNTRIES SINCE DECEMBER 2013
- UNICEF Appeal 2014 US$ 62 million
- Funds received 2014 US$ 20 million

PHOTO CAPTION: UNICEF Goodwill Ambassador Agnes Chan visits with children in an ETAPE.
UNICEF and the UN system remain gravely concerned about the growing humanitarian crisis in CAR. Over 603,000 people are internally displaced in the country, with over 178,900 IDPs located in 45 sites in Bangui (OCHA, 23 April 2014). An estimated 425,000 people are internally displaced outside of Bangui, in the interior of CAR. Additional and sustained survival assistance is required in IDP sites in Bangui with priority needs for protection, sanitation, water and food. Violence, attacks and the absence of law and order leave the entire population at high risk and especially rural populations in villages off the main roads. Although the surge in response capacity has continued since the declaration of the Level 3 emergency on 9 December, humanitarian organizations continue to face serious challenges reaching communities in the interior of CAR due to insecurity and limited capacity. In the southeast, LRA attacks continue to limit movement out of towns and villages. Since December 2013, an estimated 210,687 refugees and evacuees (third-country nationals and returning migrants) have fled to neighbouring Cameroon, Chad, Congo, and DRC (OCHA, 14 April 2014). From the Cameroon border in the west to the South Sudan border in the east, populations live under daily fear and a great uncertainty for the future.

In the capital, humanitarian agencies are working to strengthen the quality of services and site management to meet the needs of what remains a very high numbers of IDPs. Day-to-day violence, while reducing in scale, remains a persistent threat and the prime reason people give for not returning to their homes. UNICEF is working in close collaboration with Camp Coordination and Camp Management (CCCM) actors to identify alternative sites to shelter for at least half of the approximately 60,000 residents of M’Poko airport site, where hygiene conditions are deemed untenable for the rainy season and constitute a serious health risk if drainage and human waste management systems are not significantly improved. Clashes between international forces and criminal elements in the capital are still frequent.

Fighting between ex-Seleka and Anti-Balaka elements has left over 6,000 newly displaced people in Dekoa and Grimari. Fighting in the north and northwest has increased as well, with violence in the surrounding areas of Kaqa Bandoro displacing an estimated 2,000 persons into the already tense town. On 22 April, Bouca, a strategic town along one of the main transport axis from Bangui towards the northern areas of the country, was captured from the Anti Balakas by Ex-Seleka elements. At the time of the writing of the report, Bocaranga, another major town directly north of Bouca was also under threat. Armed groups appear to be in more explicit confrontation possibly to seize ground ahead of the deployment of additional international forces, possibly ahead of the major long rains.

Humanitarian leadership and coordination

A new senior humanitarian coordinator (HC), Claire Bourgeois, arrived on 26 April, following the completed mission of Abdou Dieng, here since December. The HC has actively coordinated a special task force on the protection of highly vulnerable populations including the participation of UNICEF, UNHCR, WFP, OCHA, the protection cluster coordinator and the CIMIC Coordinator.

The Inter-Cluster group continues to meet weekly and continues to impress the vital need for strong coordinated approaches especially around humanitarian response for highly vulnerable sites. In recent meetings UNICEF has reinforced the role and function of the RRM in the context of the cluster coordination framework and also contributed to a recent review meeting on measures to improved inter-cluster coordination. The HCT continues to meet weekly as do the clusters. A special CIMIC-based strategic planning and coordination meeting involving key UN agencies (including UNICEF) along with MINUSCA, Sangaris and MISCA is also held each Saturday.

The country office has set up, in an addition to the standing Emergency Task Force, a fortnightly consultative meeting between the Representative and Cluster coordinators including concerned Program Chiefs and Information Management Officers. The purpose is to ensure a regular platform for monitoring and exchange on the quality of cluster coordination for the benefit of the Representative in his capacity as the Cluster Lead for WASH, Nutrition, Education and Child Protection (sub-cluster). Key issues to be addressed include ensuring the relative ‘neutrality’ of the clusters and measures to strengthen sub-national cluster coordination and information sharing for strategy priority setting.
UNICEF-led WASH, Nutrition, and Education clusters and the child protection sub-cluster are an active part of the ICC. An inter-cluster/donor mission travelled to Boda on 25 April to enhance the protection by presence strategy adopted by the HCT with regards to high risk areas. The team will then brief the donor community on the effectiveness of this strategy and other humanitarian interventions.

Summary Analysis of Program Response

Nutrition

Since January, 6,809 children under 5 with severe acute malnutrition (SAM), including 1,108 children with SAM with medical complications, have been admitted into In-Patient Therapeutic programmes (IPT); 5,701 children have been admitted for care through outpatient therapeutic (OPT) units. Currently, 27 IPTs and 127 OPTs are open following closures as a result of the crisis.

Nutrition interventions have scaled up with an improvement of quality of services. The cured rate improved to 84.7%, and the death rate is 2.2%. Although the default rate remains below the standard of 15% in most prefectures that are less affected by the crisis, the default rate ranges up to 18% in Bangui and in Ombella M’poko sites, sites which continue to be affected by both insecurity and a reluctance of being referred from the community to public health and nutrition services for minorities among Muslim, Peuhls and Mborors pastoralist people. The process to carry out a national survey using SMART methods began the week of 14 April; data collection will start mid-May 2014.

In the past month, 2,602 cartons of ready-to-use therapeutic food (RUTF) and therapeutic milks were dispatched to UNICEF partners and zonal offices in order to increase UNICEF capacity during the upcoming rainy season. In addition, up to 400 family water kits have been distributed to care-givers for children admitted in IPTs from IDPs sites, allowing for inter-sectoral sensitization for improving hygiene conditions in families of displaced people.

Health

In April, as part of the national campaign, 70,000 children under 2 were immunized through Periodic Intensification of Routine Immunisation activities across CAR; 9,363 pregnant women, and 3,200 women in immediate post-partum (30 days after delivery) received tetanus vaccines. UNICEF has also pre-positioned medical kits, including cholera kits, in each of the zonal offices to cover between 30,000 and 40,000 people in each area.

To aid prevention of malaria, 1,468 additional households received at 2 long lasting insecticide-treated bed nets (LLINs) in 4 additional IDP sites in Bangui and Bimbo in April. In total, 62,000 households in 34 IDP sites have received 2 bed nets. Also in Bangui, UNICEF distributed medical supplies for antenatal care, delivery and caesarean section in 18 health facilities, including 4 referral facilities to cover about 16,000 pregnant women and their newborns (49% of pregnant women).

In Bossangoa, UNICEF continues to support the provision of health care to the 1 remaining IDP site, and to provide essential medicines, equipment and vaccines. At the same time, coverage has been expanded on the axes of Bossangoa where a new health center was reopened. Free health care and nutrition assistance continued to be provided for displaced people in the town of Kaga Bandoro; 826 new curative consultations took place, 43% of which were with children under 5. In addition, 321,045 inhabitants (including 55,541 children under 5 and 12,842 women)

1 There is a month lag in reporting on nutrition data, allowing for figures only up until the end of March 2014.
living in Nana-Gribizi, Bamingui-Bangoran, Batangafo, Kabo and Moyen Sido have benefited from emergency care. In Bambari, 1,955 malaria kits and 6,804 emergency health kits were distributed.

HIV/AIDS

This past month, a 5-day campaign was conducted in Bossangoa to promote voluntary HIV testing in collaboration with Youth Networks and Women’s organizations. 60 members of these organizations were trained on social mobilization, and nearly 10,000 people were sensitized on HIV. As a result, 2,065 people (1,154 women and 889 men) were tested for HIV. To date, over 12,000 pregnant women have received key information about HIV and counseling through UNICEF support, representing 22% of the annual target. Throughout CAR, UNICEF has provided antiretroviral drugs (ARV) to 894 pregnant women and for 510 children born from HIV positive women. 350 children in Bangui (21% of the annual target) have continued to receive the necessary continuity of care and ARV treatment through UNICEF-supported partner activities.

WASH

With UNICEF support, SODECA continues to provide water in Bossangoa for an estimated 35,000 people, allowing 20 liters per person per day, and about 26 liters per day for the 1,500 IDPs in the Eveche site. In Kaga Bandoro, one pump and four water tanks for the installation of water points to prepare for the relocation of approximately 1,300 IDPs from PK12 to Kabo and Moyen Sido were provided through Solidarités. The package contains also 100 Kg Aluminium Sulphate and 4 Chlorine / pH Test Kit. In Bouar, UNICEF continues to support SODECA to pump and distribute drinking water for 10,000 people. The 93 IDPs relocated from PK12 to Bambari have been provided a daily supply of 30 liters/day per person, through ANEA and support of TGH. 9,744 people (1,746 boys and 3,236 girls) were trained in good hygiene practices by TGH. In Bria, 48 community latrines have been installed through IMC to benefit 2,400 people. The rehabilitation of 4 pumps in 2 schools on the Baboua axis, 1 school in Niem and 1 school in Baoro, through Mercy Corps, resulted in the provision of drinking water for 1,200 students. In addition, fuel provided through MSF-France to SODECA in Carnot and Mambere Kadei ensured the production and distribution of clean drinking water in the city for an estimated 15,000 people, including 3,350 displaced aboriginal people, and 900 displaced Muslims.

Awareness sessions were conducted on the transmission of diarrheal diseases and the promotion of good hygiene practices in 5 districts of Bambari through Caritas, directly affecting 4,855 people including 1,254 children. 30 people were trained in the chlorination of water. Materials were also transported for the rehabilitation of 15 community wells.

In Bangui, the space has been completed for the Cholera Treatment Center (CTC) at the Mpoko airport site for 120 cholera patients. 30 staff from the Health sector were trained this past month, and 94 teachers working in temporary learning spaces for C4D cholera prevention was launched. Facing confirmed cases in March in Touboro in North Cameroon, a cholera risk assessment was conducted on 15-22 April in Bouar, Bocaranga and Ngaoundaye, resulting in WASH supplies prepositioned in Bocaranga for 10,000 people in potentially affected communities. A stock of 7.5 million aquatabs is ready in the UNICEF warehouse in Bangui. WASH supplies—including soap, pumps, parts for pumps, water bladders, jerry cans and boots—have been pre-positioned in preparation of the rainy season in Bambari, Bossangoa, Bouar and Kaga Bandoro. In addition, stock was delivered for cholera preparation in Bocaranga and in preparation for the relocation of IDPs from PK12 to Kabo.

Child Protection

Since the latest Situation Report, a joint UNICEF/UNHCR protection team undertook a monitoring mission along the corridor with the largest number of enclaved Muslim populations, Mbaiki, Boda, Carnot and Baoro. At the same time, the UNICEF Bouar mobile team conducted protection-based outreach to Carnot and other outlying areas including locations along the road west of Bouar to the Cameroon border. The prevailing situation is one in which there are virtually no law enforcement agencies in place save for a handful of gendarmes, inevitably unarmed.

In preparation for the relocation of the residents of PK12, UNICEF was on site nearly each day before the relocation took place to actively identify and resolve vulnerable cases of women and children. To prevent separation of children
CAR HUMANITARIAN SITUATION REPORT – 28 April 2014

from their families during the trip, sensitization on unaccompanied and separated children (UASC) for IDPs living in PK12 was carried out to ensure that all children aged 0-5 years who were moved with their families to Bambari and to Kabo/Moyen Sido had identification bracelets. To date, 429 children who were separated from their families as a result of the crisis have been reunified with their families. Also this past month, an emergency birth registration campaign was launched in Bimbo, near Bangui, in collaboration with the Mayor and the First Instance Court.

From 19-29 April, UNICEF and its partners (COOPI, ACPED and the District Authorities in Boy-Rabe) confirmed the presence of 745 children (158 girls and 587 boys) among Anti-Balaka militias. Verification activities were conducted in Boy-Rabe, Birlo, Gbamia, Boali, Lambi Bogouala and Kabo in Ombella Mpoko Prefecture. As a result, a total of 981 children have been separated from armed groups and local militias between January and end of April 2014, 236 of whom have entered a reintegration programme. The remaining children are awaiting access to the community based reintegration programme.

21 ‘listening centers’ are now functional in CAR and able to provide survivors with psychosocial support (8 IRC, 2 Mercy Corps, and 11 Association des femmes juristes de la RCA). 43 survivors of gender-based violence received care in the southeast through MercyCorps in April. To support the improvement of quality of care, 30 psychosocial support workers were trained on GBV by IRC, with technical and financial support from UNICEF. To date, 443 survivors of gender-based violence (GBV) have received comprehensive care through UNICEF support.

On 25 April, the Mental Health and Psychosocial Support (MHPSS) Working Group was launched jointly under the leadership of WHO and UNICEF. UNICEF presented draft Inter-Agency Guidelines for Psychosocial Support to be adopted as the approach for CAR, to thereby harmonize the PSS approach across the country. Over 40 participants, largely from local NGOs, and some INGOs, attended and are eager for further training in psychosocial support.

Education

UNICEF continues to lead the distribution of educational supplies, establish temporary learning spaces (ETAPEs) in IDP camps, and support the reopening of schools in CAR. In support of the reopening of schools, the MEN officially created a ‘Return to School’ committee that meets weekly, made up of MEN authorities, UNICEF, WFP, AFD, French Embassy, and other major education stakeholders, to develop concrete actions and seek funding for activities that will support the return to school. Schools are being re-opened across the country, though at a slow pace. According to the latest information from the Ministry of Education (MEN), 705 primary schools, of which 42 in Bangui, are open in the country.

The volatile security situation remains the major obstacle that prevents children and teachers from returning to schools. A limited number of education partners in the interior of CAR is a constraint on scaling up effective interventions, additionally resulting in a lack information outside of Bangui. The beginning of the rainy season is also likely to create additional difficulties on delivering emergency education supplies.

UNICEF continues to support ETAPEs in areas where security remains a constraint and displaced children are left without educational activities. Six additional ETAPEs opened in Bangui in April, while three ETAPEs closed in Bossangoa as the Muslim population left. As a result, a total of 118 temporary learning spaces in Bangui (100) and Bossangoa (18) are currently open, providing an estimated 23,600 children with access to basic learning and recreational activities, such as math, French and sports. Additionally, 40 ETAPE teachers were trained in early April to improve teaching methods and to develop the necessary skills to provide psychosocial support. As part of its efforts to optimize expected outcomes, UNICEF’s education staff members directly monitored the quality of ETAPE management by its partners. Third Party Monitoring was also conducted to complement the monitoring and evaluation process. Such activities will help to improve overall program implementation.

Under the GPE accelerated funding, UNICEF has identified partners after a rigorous selection process, identified potential schools with the Ministry of Education, WFP and UNICEF field staff, met with prospective partners, placed orders for school materials, and prepared template agreements to establish partnerships.
On 26 April, a large ceremony in a 20,000 seat stadium in Bangui launched the “Show your Peace” campaign. The campaign is part of the project *Ensemble pour un Dialogue Intercroisonnel Àpaisé et promotion de la Paix à Bangui*, implemented by Search for Common Ground in partnership with UNICEF. In total, 106 young people took part in a drawing contest, and 5 young people had their works selected. These works are already displayed in strategic locations in the city of Bangui.

The first edition of the Sport for Life program in IDP camps, in which more than 1,340 young people participated in sports activities, theatre, games and artistic activities, culminated in closing ceremonies on 20 April. Preparations for the second edition are underway. In addition, more than 1,000 community volunteers are being trained to implement strategies to prevent cholera in IDP camps and the provinces of CAR, following the launch of the training on 19 April with the Prime Minister, Ministers, and UNICEF.

**Rapid Response Mechanism**

The 2014 Rapid Response Mechanism (RRM) is accelerating in coverage and impact. RRM partners ACF, ACTED and Solidarité CHECK NAME have undertaken assessment and response actions in coordination with the cluster system with focus to Grimari (Ouaka prefecture), Berberati (Mamberi Kadei prefecture), Tolle (Ouham Pende prefecture) and Kaga Bandoro (Nana Greibi prefecture).

Related discussions have taken place at the inter-cluster level to ensure coherence and complementarity between the RRM tool and wider cluster commitments to timely, quality assessments as the basis for rapid emergency response, multi-sector/cluster follow up and accountability. The CAR RRM 2014 will be officially launched in the coming weeks.

**Response in the last month**

- A distribution of a minimal NFI package was made in Tolle ahead of the rainy season in order to bridge the gap between longer term interventions coordinated by the NFI cluster and with CHF funding.
- RRM partners also participated in needs assessments among highly vulnerable populations in Berberati, and along the Damara and Bogangolo axis. Distributions for these 2 sites are ongoing.
- Further responses are planned for areas that have seen high levels of fighting in Grimari, Berberati and north of Kaga Bandoro.
- RRM has been first response partner in support of the relocation from PK12 to Moyen Sido and Kabo, providing first response for latrines and basic shelter to bring the gap between longer term site planning managed by IOM.
- A full time UNICEF RRM coordinator who brings expertise from the RRM in Eastern DRC is now on board.

**Preparedness**

The RRM is currently monitoring the situation in Dekoa and Bouca (center and northwest), both of which have seen high levels of violence and armed clashes. Partner teams will provide humanitarian surveillance and first assessment capacity, as soon as the security situation permits.
Supply and Logistics

- The Douala corridor is currently open, and trucks continue to move under regular MISCA escorted convoys from the border at Cantonner to the Bangui haulier terminal. Presently convoys are moving to Bangui on Mondays, Wednesdays and Fridays, and from Bangui on Thursdays and Sundays.
- From January to 14 April, a total value of US$ 2,652,000 of supplies, composed of essential medical supplies, health kits, nutrition products, NFI and WASH items, were distributed to UNICEF implementing partners.
- Most UNICEF CAR procurement is offshore, due to the complete disruption of the local market; hence so far 94% of Purchase Orders are placed outside of CAR via the Supply Division.

External Communications

In April the Japanese national committee visited UNICEF programs in CAR with Good Will Ambassador Dr. Agnes Chan, a top TV celebrity across Asia and long-time UNICEF supporter. The delegation visited different IDP sites in Bossangoa and Bangui, along with enclaved trapped Muslim population in Bangui’s PK5 city ward to understand the impact of the ongoing conflict on the civilian population, in particular on women and children. The Japanese visitors also saw a UNICEF supported vocational training center for children formerly associated with armed groups, the pediatric hospital of Bangui, several health centers and schools that are in the process of being rehabilitated, as well as WASH projects. The Good Will Ambassador was accompanied by a group of journalists representing the most important media outlets in Japan. A front page lead article was published in Yomiuri Shinbun, the biggest newspaper in Japan.

- Getting into CAR, When so Many Want to get out, Inter Presse News Agency, 4 April, http://www.ipsnews.net/2014/04/getting-many-want-get/
- UNICEF Re-establishing basic services in CAR, Voice of America, 8 April, http://www.voanews.com/content/car-unicef-8apr14/1888975.html

Security

In April, the security situation remained dynamic and unpredictable, though UN operations in Bangui operated without major disturbance. In Bangui, targeted violence against the Muslim population may have plateaued, though levels of banditry and criminality continue to increase. Often the bodies of persons murdered are carried in protest by mobs to demonstrate in front of the prefecture building. In some cases it has been reported that the murders may be the work of groups loyal to the ex-president Bozizé attempting to discredit and destabilise the Transition Government.

Up country the security situation remains precarious and at a scale that international forces are largely unable to disrupt. The ex-Seleka have been consolidating their current positions in Dekoa and Bocaranga while attacking and seizing Bouca to the east of Bossangoa. In turn, Anti-Balaka forces have seized control of Grimari. The minority Mbororo (Peuhls) remain both victims and aggressors. Armed Peuhl forces have been active in the Northwest where reportedly they killed the priest from Paoua the third week in April.
Cluster Coordination

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

Funding

UNICEF has received $20.3 million against the 2014 HAC requirements. Requirements by sector are in the process of revision upwards to $81M; requirements shown below will be updated accordingly as soon as the process of HAC revision and Strategic Response Plan (SRP) is concluded.

<table>
<thead>
<tr>
<th>Sector</th>
<th>Initial HAC 2014 requirements</th>
<th>Income through UNICEF and donors*</th>
<th>Funding gap</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$</td>
<td>$</td>
<td>$%</td>
</tr>
<tr>
<td>Nutrition</td>
<td>5,000,000</td>
<td>2,878,176</td>
<td>2,121,824</td>
</tr>
<tr>
<td>Health and HIV/AIDS</td>
<td>14,000,000</td>
<td>3,166,440</td>
<td>10,833,560</td>
</tr>
<tr>
<td>Water, Sanitation &amp; Hygiene</td>
<td>14,000,000</td>
<td>6,339,969</td>
<td>7,660,031</td>
</tr>
<tr>
<td>Child Protection</td>
<td>12,000,000</td>
<td>4,194,717</td>
<td>7,805,283</td>
</tr>
<tr>
<td>Education</td>
<td>7,000,000</td>
<td>338,244</td>
<td>6,661,756</td>
</tr>
<tr>
<td>Non Food Items (NFI)</td>
<td>10,000,000</td>
<td>3,406,084</td>
<td>6,593,916</td>
</tr>
<tr>
<td>Total</td>
<td>62,000,000</td>
<td>20,323,630</td>
<td>41,676,370</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 28 April 2014

<table>
<thead>
<tr>
<th>Sector</th>
<th>Indicator</th>
<th>2014 (Full year)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>UNICEF &amp; operational partners</td>
<td>Sector / Cluster</td>
</tr>
<tr>
<td>Health</td>
<td>Number of households that received bednets (2 bednets per households) (*)</td>
<td>160,000</td>
</tr>
<tr>
<td></td>
<td>Number of children U5 vaccinated against measles</td>
<td>249,725</td>
</tr>
<tr>
<td></td>
<td>Number of children Under - five provided with Vitamin A</td>
<td>740,000</td>
</tr>
<tr>
<td><strong>Nutrition</strong></td>
<td>Number of children 1-5 years who received de-worming medication</td>
<td>657,000</td>
</tr>
<tr>
<td>Number of people that access basic health services and medicines in the affected areas (***)</td>
<td>2,000,000</td>
<td>650,000</td>
</tr>
<tr>
<td><strong>WASH</strong></td>
<td>Number of affected people that have improved access to water (*)</td>
<td>700,000</td>
</tr>
<tr>
<td>Number of affected people with access to a basic sanitation services (**)</td>
<td>225,000</td>
<td>104,150</td>
</tr>
<tr>
<td>Number 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>130,844</td>
</tr>
<tr>
<td>Quantity of potable water liters/day per affected person</td>
<td>15</td>
<td>N/A</td>
</tr>
<tr>
<td><strong>Child Protection</strong></td>
<td>Number of children benefiting from recreational activities and psychosocial support (children centre and counselling areas)</td>
<td>95,000</td>
</tr>
<tr>
<td>Number of children released from armed forces and groups</td>
<td>2,000</td>
<td>236</td>
</tr>
<tr>
<td>Number of separated children in emergencies reunified with families</td>
<td>1,200</td>
<td>429</td>
</tr>
<tr>
<td>Number of GBV survivors who receive holistic assistance</td>
<td>2,000</td>
<td>443</td>
</tr>
<tr>
<td><strong>HIV/AIDS</strong></td>
<td>Number of pregnant women receiving HIV/AIDS counselling</td>
<td>56,732</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. Compared to the previous Sitrep, we propose to measure the number of household rather than the estimation of people receiving bednets.

(**) 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.

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

UNICEF Operational Partners: IRC, ACF, ANEA, LIFA, EEA, Caritas-Bambari, ICDI, IMC, OXFAM, SODECA, ICDI, LEAGUE ISLAMIQUE AFRICAINE

(*) Sphere standard not yet reached for Bangui sites (**) Latrines/defecation fields with hand washing dispositive in the IDPs sites. Bossangoa Sphere standard reached while for Bangui sites the average is 154 per latrines at the airport site and UNICEF supported interventions 1 latrine per 100 persons. (***) Partial data related to the people reached with hygiene communication activities.
<table>
<thead>
<tr>
<th><strong>Education</strong></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of children between 3 to 18 years who benefited from education supplies</td>
<td>300,000</td>
</tr>
<tr>
<td>Number of children participating in ETAPE activities (temporary learning spaces) (*)</td>
<td>100,000</td>
</tr>
</tbody>
</table>

**C4D**

| Number of households exposed to messages related to vaccination campaign | 800,000 | 624,000 | 78% | NA |
| Number of people (children, young, women, men) who have been exposed to the health, peace, hygiene and sanitation messages | 2,500,000 | 750,000 | 30% | NA |
| Number of young people sensitized on violence, HIV, peace, hygiene and sanitation | 518,000 | 310,800 | 60% | NA |

**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 May 2014.

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