Central African Republic
Humanitarian Situation Report

SITUATION IN NUMBERS

7 November 2014

2.3 million
CHILDREN AFFECTED
(OCHA 13 May 2014)

4.6 million
PEOPLE AFFECTED
(OCHA 22 October 2014)

2.5 million
PEOPLE WHO NEED ASSISTANCE (OCHA 20 August 2014)

489,000
INTERNALLY DISPLACED PERSONS
(OCHA 22 October 2014)

419,000
REFUGEES IN NEIGHBOURING COUNTRIES (CHAD, CAMEROON, DRC, CONGO), UNHCR 30 October 2014

UNICEF Appeal 2014
US$ 81 million
Funds received as of 31 October 2014
US$ 37 million

Highlights October 2014

- In Bangui, renewed violence began 7 October, targeting the civilian population, aid agency staff, and MINUSCA peacekeepers. As a result, two UN peacekeeping troops lost their lives and 13 others were injured. Eleven civilians including 6 children were reportedly killed and 229 people including 22 children were injured.
- On 29 October, MINUSCA announced that UN peacekeepers freed 67 people who had been taken hostage by militia groups. Four women were taken hostage in Bangui while the rest were kidnapped in the interior of the country. All were released after military operations by the UN peacekeeping forces.
- UNICEF new Representative, Mohamed Malick Fall, arrived in Bangui on 28 October.
- UNICEF established a new field office in Zemio that will enable more sustained support to service delivery for highly vulnerable children and women in the south east, including victims of LRA violence.
- Suspected cases of whooping cough have been reported in Ketele, Kaga Bandoro region, affecting over 40 people particularly in Grevai, Nana Grebizi prefecture.
- Current fund utilisation rate stands at 85%. Without additional resources, UNICEF will not be in a position to meet its annual targets and provide the needed assistance to affected children and women.

UNICEF’s Key Results with partners

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<th>UNICEF</th>
<th>Cluster</th>
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<tr>
<td></td>
<td>UNICEF Target</td>
<td>Cumulative results (#)</td>
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<tr>
<td>Number of children with SAM admitted for treatment</td>
<td>28,000</td>
<td>19,283</td>
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<tr>
<td>Number of affected people who have access to improved sources of water</td>
<td>700,000</td>
<td>393,467</td>
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<tr>
<td>Number of children under 5 vaccinated against measles</td>
<td>268,231</td>
<td>234,956</td>
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<tr>
<td>Number of children released from armed groups</td>
<td>3,000</td>
<td>2,143</td>
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<tr>
<td>Number of children participating in temporary learning spaces</td>
<td>100,000</td>
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UNICEF remains gravely concerned about the continuing acute humanitarian crisis in Central African Republic (CAR). An estimated 489,000 people are internally displaced, with 63,000 in Bangui including 3,000 newly displaced due to recent clashes. According to the UNHCR Regional update on 30 October, the total number of refugees in the neighbouring countries (Cameroon, Chad, Republic of Congo and DRC) is 418,962 people.

Bangui has been the scene of renewed confrontations between and among different armed groups and MINUSCA peacekeepers since the 7 October. The situation remains volatile. The immediate cause of these clashes - that took place mainly in the PK5 area, third, fourth and seventh districts - seemed to be the throwing of a grenade and the killing of a taxi driver. These may also have been pretexts to destabilize the government, while anti-Balaka issued on 9 October, a 48-hour deadline - later repeated by ex-Seleka - for the resignation of President of transition, Catherine Samba Panza, following unconfirmed reports of large scale embezzlement of funds. After few days, an agreement between Transitional Government and anti-Balaka was reached to avert further violence.

Unlike earlier events, this time the international community was targeted with several attacks on UN (MINUSCA, UNICEF and UHCR) and INGO and NGOs vehicles. Since the beginning of the clashes, two UN peacekeeping troops lost their lives and 13 others were injured in the attacks. These events seem to be an indication of a different and more complex political environment than during the crises earlier this year, and the targeting of UN and Red Cross vehicles highlights much greater risks impacting humanitarian delivery.

In the meantime, a multiplication of armed groups has been observed in Bangui where eight different groups have been listed.

The unrest and fighting resulted in the arrival of approximately 3,000 new IDPs on sites in Bangui area (mainly in Bimbo). UNICEF has provided additional water trucking to the IDPs sites.

Although the identified needs of the new 3,000 IDPs mainly include the access to the safe drinking water, sanitation and NFIs, the crisis has also exacerbated the lack of access to health services on the IDPs sites. Due to security conditions, a number of NGOs had to curtail service delivery. The Press release issued by the Senior Humanitarian Coordinator clearly stated that due to several barricades, some children were unable to reach health centers. The situation since has stabilized to some extent and most basic services previously functioning have been restored.

With regard to GBV, the hotline (“ligne verte”) has observed a significant increase in the number of rape cases since the beginning of these clashes, mostly in areas that have been most affected by the recent violence. The presence of children in spontaneous roadblocks and use of children by militias has been observed and this was strongly condemned in the Senior Humanitarian Coordinator’s press release. In at least three schools, anti-Balaka groups declared themselves to be against the reopening of schools (initially planned for 3 November). Violent actions and threats in a number of IDP sites and temporary learning spaces in addition to some child-friendly spaces which have been looted of their school and recreational kits.

As security conditions allowed, UNICEF began visiting IDP sites in Bangui and Bimbo to take stock of the current situation and provide additional response.

Due to these events, road and air access in to and out of Bangui was disrupted for several days (such as Boali-Bangui), highlighting the precariousness of the city in terms of volatility, difficulties for most of staff to work from home with limited capacities. This included the interruption of all movements between the city and the rest of the country, as well as the closing of fuel stations. The situation in the interior was also dire as field offices were forced to start rationing fuel consumption in face of uncertainty concerning the next fuel delivery. Bossangoa was at risk of an interruption of water supply for the urban population of 45,000 people as supplied by SODECA. In response to this UNICEF succeeded in organizing with the assistance of MINUSCA the secure road delivery of fuel to keep the SODECA water supply functioning.
The security conditions on the Kaga Bandoro-Dekoa-Sibut axis are very volatile. On same axis and between Dekoa and Sibut, some population displacements have been reported, but this could not confirmed since the axe is still not accessible. On the axis of Kaga-Oundago-Kabo, there is a lot of ex-Seleka movements but the security situation seems to be little better than that of Kaga-Dekoa-Sibut and there were no population movements reported on this axe.

Violence also flared up in and around Bambari on 1 October between MINUSCA and Muslim populations in relation to perceptions over previous attacks on Muslims on the Ndassima-Bambari axis by unidentified armed groups. These attacks resulted in at least 14 deaths and several persons taken hostage. The Prefet and Imam continue mediating to avoid degeneration of the situation.

Humanitarian actors report the arrival of around 10,000 newly displaced in Bria from the Bambari-Ippy axis. However, further details were not available to substantiate this.

Over the last month, an increase in violence in the border area between Nana Mambere, Mambere Kadei and the Cameroon border was also reported. Serious clashes took place in the Garoua-Boulai border area on 1 October between Cameroonian troops and anti-Balaka. The incidents reportedly began following the kidnapping of a number of Cameroon nationals by the Democratic Front of the Central African People (FDPC) who were demanding the release of their leader, Abdoulaye Miskine. As a result of these clashes, the border crossing was closed from 6 to 9 October, thereby severely hampering provision of supplies to Bangui and the rest of the country, and the displacement of some 3,000 persons on the axis between Garoua-Boulai and Bouar. This was subsequently followed by the violence in Bangui. Due to security constraints, a planned humanitarian assessment had to be postponed.

UNICEF continues its support to enclaved populations in particular in Boda and Yaloké, through missions focusing to improve nutritional and health care, the promotion of hygiene and sanitation and the distribution of NFIs. Support to partners with regard to education and child protection activities in the enclaves is also provided.

In view of the Ebola epidemics in West-Africa and the occurrence of a separate Ebola epidemic in DRC, the government of CAR has updated its Ebola contingency plan and is intensifying Ebola surveillance at main entry points including Mpoko airport with the temperature checking for all passengers with the blood collection for those from countries with few confirmed cases. It has also issued a Ministerial decree, prohibiting entrance into the country for persons traveling from the most Ebola affected countries (Guinea, Liberia, Nigeria and Sierra Leone). UNICEF has updated its contingency plan and a UN contingency plan has been developed.

Suspected cases of whooping cough have been reported in Ketele, Kaga Bandoro region, affecting over 40 people particularly in Grevai, Nana Grebizi prefecture. An investigation was conducted by a joint team comprised of UNICEF and WHO staff in Kaga Bandoro. A case of yellow fever have been confirmed among a 16 year hold girl in the third subdivision of Bangui. An investigation was conducted and the response activities planned by the Ministry of Health.

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.

UNICEF, acting as lead organization for “Access to basic Social Services” (Pillar 3) in view of support to durable solutions to encourage the returns of IDPs in Bangui, Bimbo, Begoua, has presented an action plan comprising WASH, Health and Education interventions.

The Strategic Response Plan workshop was organized from 12 -13 October in Bangui and explored the most likely scenario in 2015: The Humanitarian situation continues to be complex due to political instability, escalation of violence and population movements, and weak administration and services delivery.

On 13 October, the Senior Humanitarian Coordinator issued a statement expressing very deep concerns with regard to the use of child soldiers in recent inter-communities attacks in Bangui; and she therefore urged all leaders and fighters to respect children’s rights in CAR.
The extended L3 status of Central African Republic requires the definition of results that remain to be achieved, ensuring that the protection of civilians remains a top priority, and efforts to be undertaken to avoid Central African Republic returning to being a “forgotten crisis”.

In view of increased humanitarian coordination and improved response for affected populations in the area, UNICEF is now ensuring a permanent presence in Zemio, in the Prefecture of Haut-Mbomou, where apart from general issues as access to basic social services, attacks from Lord’s Resistance Army (LRA) elements with subsequent looting, destruction and kidnapping are the main issues.

UNICEF permanent presence in Zemio will enable to scale up and strengthen presence, program delivery and monitoring for highly vulnerable children and women in south east CAR. Staffed by a small international program team and supported by two vehicles, the Zemio presence will also enable more substantial advocacy and engagement with NGO and government partners for improved population access to basic social services in particular health and HIV/AIDS, education and child protection. The office is located within the existing UNHCR base on a shared premise basis.

Summary Analysis of Programme Response

**Nutrition**

Renewed violence in Bangui prevented access to nutrition facilities for some 628 children suffering from severe acute malnutrition (SAM) under treatment in Out Patient Therapeutic (OPT) and mobiles units which temporarily suspended activities during this period. These children represents around 40.3% of the total of 1,671 malnourished who were under treatment in Bangui units during the period of 6-11 October 2014. UNICEF and implementing partners in Bangui have re-established a rapid mechanism to locate children who dropped out for referral and continuation of therapeutic treatment.

Since 1 January, 19,283 children have been admitted for SAM treatment across the country. This represents 69% of the revised annual target of an estimated 28,000 children suffering from SAM. Overall performance indicators of case management remain within global standards with an average recovery rate of 81 per cent (≥75 per cent) and death rate of 4 per cent (<10 per cent). However, the default rate remains slightly high 15 per cent (standard < 15 per cent), especially for areas still affected by insecurity and population displacements (Bangui, Boda, Bambari and Kaga Bandoro).

With regard to the nation-wide SMART survey, data collection have been completed this in 15 out of 17 prefectures (except Ouaka and Vakaga prefectures). The validation of preliminary results for the covered prefectures is on-going and will be endorsed by the SMART Survey Steering Committee.

In October, UNICEF CAR received the second batch of Food for Peace donation in kind of 7,000 cartons of RUTF which is being dispatched to different prefectures through UNICEF field offices and implementing partners for treatment of beneficiaries admitted (OPTs and IPTs). About 2,734 cartons of Ready to Use Therapeutic food have been distributed to beneficiaries.

**Health**

Despite the challenging security situation in CAR, the UNICEF team, assisted by the UN peacekeepers forces present in Bangui, managed to save five tons of vaccines which had been blocked at the Bangui Airport. These vaccines included 200,000 doses of vaccine against pneumonia, 200,000 doses of pentavalent vaccine (vaccines against diphtheria, pertussis, tetanus, hepatitis B and meningitis) and 50,000 doses of yellow fever vaccine.
Regarding the cold rooms and their warehouse rehabilitation, all the eight old cooling boxes were replaced by new ones recently provided by UNICEF and the EPI cold room’s warehouse were rehabilitated to meet the standards of vaccines storage and management.

On service delivery side, the third round of the polio campaign was conducted in the health regions 1, 2, 3 and Bangui and the preliminary report shows that 1,011,863 (84%) out of the targeted 1,220,629 children under 10 years of age were immunized. A following round of the polio campaign conducted in health regions 1 and 7 targeting 270,066 children under five years old reached 284,583 children. The recent crisis impaired the already weak monitoring and evaluation health system.

Regarding insecurity during the last two months in Batangafo that pushed MSF to leave the town, UNICEF has been supporting Batangafo Hospital to improve population access to health care. UNICEF supported the MoH to reopen the recently closed services in this hospital including EPI services, outpatient consultation for children and adults, maternal and child health and family planning, and Prevention of mother to child transmission of HIV services.

This support is provided via Ouham Regional MoH, and is based on supply of drugs, materials, and other consumables, supervision, training, and staff incentives payment for 20 health workers.

A total of 1,732 consultations were performed in Batangafo hospital, of which 64% (1,109 consultations) of them were for children under 5 years of age, and 36% for adults (647 consultations). Malaria is the main morbidity cause of illness with 64% of patients in general, and 76% among child under 5 years of age.

Concerning the surveillance of potential epidemic outbreaks, over 100 suspected cases of whooping cough were reported in the Kaga Bandoro sub-division (Grevai). Case management and mitigation activities are ongoing and micro-planning for a reactive immunization campaign is on-going to target under five children in the affected area. In addition, a case of yellow fever was diagnosed in Gobongo neighbourhood, fourth sub-division in Bangui city, last week. Investigations by a health cluster multi-disciplinary team have been completed and final report awaited. A partner meeting is planned to prepare for a reactive campaign.

Finally, UNICEF continues to provide technical and financial support to Ebola Viral Disease (EVD) prevention and mitigation activities through the health cluster. Active participation in the Ebola prevention and mitigation sub-commissions meetings (epidemic surveillance/ laboratory and Ebola case management), permitted to provide 200 tarpaulins and 7 million FCFA for the construction of 23 surveillance sites in Bangui and along the Ubangi river shores, bordering the DRC. An amount of 11 million FCFA has been provided for the capacity building of 500 members of the crisis management committees’ in Bangui and the other prefectures. Orders have been made for the procurement of PPE, essential drugs and other commodities for EVD prevention. UNICEF is also supporting the capacity building of service providers on Ebola surveillance and case management.

The Health unit is annually reporting on four key Humanitarian indicators and the proportions of achieved UNICEF targets show the following as of 31 October:

- 88% of children under five are vaccinated against measles. The initial annual target was recently revised from 249,725 to 268,231 children;
- 69% of people have access to basic health services and medicines in the affected areas;
- 31% of children 1-5 years received de-worming medication;
- 25% of children under-five provided with Vitamin A.

For the last two indicators above, the low achievements reported are only from the first phase of campaign. The second phase is planned in November/December.

HIV/AIDS

In October, UNICEF, in close collaboration with the Ministry of Health, led one joint mission in Ouham-Pende prefecture to assess the PMTCT/paediatric care needs and support the Health district to develop micro plan aimed to re-establish PMTCT services, improve the quality of the services and open new PMTCT sites. Eighty-four health centres
offering antenatal services have been assessed and 12 among them have met criteria to implement PMTCT interventions. Training plan has been developed to launch training and opening of 12 PMTCT sites in the prefecture with high prevalence (CS Tatalé, CS Kokole, CS Bata, CS Man public, CS Nzoro, CS Kourone, CSU de Paoua, CS Bédaya1, CS Bégoladjé, CS Kouï, CS Bohong, Jean Paul hospital).

Overall response progress for the four key humanitarian indicators stands as follows: 63% of pregnant women receiving HIV/AIDS counselling; 40% of children previously on ARV prophylaxis continue to receive ARV treatment; 35% of HIV positive pregnant women benefiting from PMCTC/ARV prophylaxis; and 21% of children born from HIV positive women are benefiting from ARV prophylaxis. Three main reasons explain this low performance (below 50%). Despite all efforts made, the current crisis and persisting insecurity in most areas, all health services are not functioning and thus the access is still limited to affected children and women and as well for the health workers to monitor the implementation of services and to collect data.

**WASH**

Following the outbreak of violence in October in Bangui, which triggered new population movements UNICEF increased the amount of water on the high risk sites through the water trucking; and the supply of fuel for sites using boreholes with submersible pumps. This led to the increase of daily quantity of safe drinking from 4.7 liters per person before the outbreak of recent violence to 9.2 liters per person during the period of crisis, for an estimated number of 18,879 IDPs.

As part of the exit strategy for water trucking on the IDP sites in Bangui, UNICEF has supported l’Agence Nationale de l’Eau et de l’Assainissement (ANEa) in the construction of four out of six planned boreholes. However the installation of pumps was delayed due to insecurity.

In partnership with IRC and Mercy Corps, 12,750 people have access to an improved sanitation following the construction and rehabilitation of latrines and showers. Some 22,414 people were reached during the awareness campaign on the basic hygiene rules such as hand washing, personal hygiene, and environmental hygiene. Also in partnership with SODECA, 44 out of 88 planned kiosks fountains were rehabilitated.

In Bossangoa, UNICEF has provided 3,600 liters of fuel to SODECA that led to the production and distribution of 540 m$^3$ of safe drinking water an estimated number of 35,000 people. In addition, the following activities were carried out in IDP sites:

- In collaboration with SODECA and ANEa, 20 m$^3$ of safe drinking water was produced and distributed each day to the 510 IDPs on the Site of Petit Séminaire (ex-Evêché) in Bossangoa;
- Construction of four boreholes in Batangafo by ANEa for IDPs living on the alternative site of Gbaga;
- Repair of 11 manual pumps in the sub-prefecture of Batanga by Danish Refugee Council (DRC).

In Bouar, UNICEF provided to SODECA 6,000 liters of fuel for the production and distribution of safe drinking water to 10,000 people.

In Kaga-Bandoro, UNICEF uses its own generator and that of MINUSCA to produce 46 m$^3$ of safe drinking water per day for 7,000 people. Through the water trucking conducted by CICR, the quantity of safe drinking water has reached 73 m$^3$ per day, meaning an allocation of 10 liters of safe drinking water per day per person. The chlorination of stocked safe drinking water and the measurement of the residual chlorine are performed regularly.

On the axis Kaga-Bandoro, about 3,000 people have benefited from the rehabilitation of 6 manual pumps by ANEa. In order to maintain the safe drinking water supply 24 hours a day, UNICEF provided Caritas with a submersible pump that produces 5 m$^3$ of safe drinking water per hour.

In Bambari, Triangle Génération Humanitaire, a partner of UNICEF is carrying on with the implementation of WASH activities for the component of safe water supply. The following activities have been carried out:

- Rehabilitation of 7 out of 15 wells planned for 2,800 people in the neighbourhoods of Bambari;
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- Distribution of 120 m³ of safe drinking water per day by water trucking on the MINUSCA, Notre Dame de Victoire (NDV) and Sangaris IDPs sites.

With respect to the sanitation response, the below described activities were carried out at the following sites:

1. “Sangaris” site (7,849 IDP):
   - Construction of 24 blocks of five latrines for adults, five showers, and 22 blocks of three latrines for children (a ratio of about 43 people per latrine and 67 people per shower);
   - Rehabilitation of 18 waste pits and three others are under construction.

2. “MINUSCA” site (2,164 IDPs):
   - Construction of seven blocks of five latrines for adults and five showers (a ratio of 1 per 62 peoples for the latrines and showers);
   - Installation of seven hands washer;
   - Digging of four waste pits.

3. Notre Dame de Victoire site (about 4,500 IDPs):
   - Construction of 14 blocks of five latrines for adults and five showers (a ratio of 1 per 64 people for the latrines and showers);
   - Digging of six waste pits.

4. Ngakobo site (6,195 IDPs):
   - Construction of 10 blocks of five latrines for adults (a ratio of 1 for 124 people for the latrines and shower) and three latrines for children;
   - Construction of 11 blocks of five showers (a ratio of 1 for 113 people);
   - Rehabilitation of five waste pits.

At the Grimari site, which is almost empty at the moment (about 50 IDPs), the water trucking continues with a daily distribution of 12 m³ of safe drinking water.

As of 31 October, the proportions of UNICEF achievement against its three annual targets are as follows in WASH:

- 56% of affected people have access to improved sources of water;
- 70% of affected people have access to basic sanitation services. The initial annual target was recently revised from 225,000 people to 300,000 people;
- 82% of affected people who received wash items (jerrycan and soap) and knowledge to put in place hand washing practices. The initial annual target was recently revised from 225,000 people to 350,000 people.

Child Protection

From 6 to 15 October, 413 (including 5 women) members of ex-Seleka forces and 25 anti-Balaka fighters were trained in Bambari on how to prevent grave violations against children in their respective groups. In total, 10 training sessions were organised in 15 ex-Seleka military bases in Bambari, Boyo, Grimari, Ngakobo, Mbroutchou, and Ndassima. The ex-Seleka high command and the anti-Balaka field commanders invited separately their respective fighters to attend the training sessions.

As a result of awareness raising campaign towards ex-Seleka forces, General Ali Darassa Mahamat, who was originally reluctant to facilitate the release of children associated with his group signed and sent an order to all his field commanders and fighters on 14 October 2014 prohibiting the recruitment and use of children by ex-Seleka armed group. The same order called on ex-Seleka commanders to cooperate with UNICEF and its partners in order to release and facilitate the reintegration of children associated with their groups. A similar instruction was signed by General Joseph Zoundeko, ex-Seleka Chief of Staff. However, only commanders from his faction have so far cooperated to releasing children from their military bases. The new commitment made by General Ali Darassa Mahamat is an opportunity to secure the release of other children, and prevent child abuse in ex-Seleka controlled areas.
The monitoring mechanism revealed that grave violations against children were committed by armed groups during the fighting which took place in Bangui between 8 to 20 October 2014: nine children, all boys, aged between eight and 17 years old were killed by gunshot or with machetes; 22 others were injured including 16 boys and seven girls aged between 13 and 14 years. In addition, one hospital was visited by armed men in search for injured Muslims; one school was forced to close as they were threatened by armed groups in the outskirt of Bangui. Regarding the recruitment and use of children adolescents and young people aged between 10 and 15 years were managing road blocks and used as human shield by armed adults in various areas of Bangui.

The Child Protection section is annually reporting on four key Humanitarian indicators and the proportions of achieved UNICEF targets show the following as of 31 October:

- 62% of children benefiting from recreational activities and psychosocial support (children centre and counselling areas). The initial annual target was recently revised from 95,000 people to 100,000 people.
- 71% of children released from armed forces and groups. The initial annual target was recently revised from 2,000 to 3,000 children.
- 45% of separated children in emergencies reunited with families. The achievement below 50% is mainly due to the security conditions.
- 53% of GBV survivors who receive holistic assistance. The initial annual target was recently revised from 2,000 to 3,500 GBV survivors.

Education

Despite efforts to restore education activities by UNICEF, Ministry of Education and education stakeholders in the Central African Republic (CAR), recent violence and insecurity which started mid-October and continues has brought considerable changes to the context, which impacts UNICEF education programs and strategy.

In preparation for the official school opening on 3 November 2014, UNICEF in close collaboration with the Ministry of Education (MoE) have been concentrating energy and resources on a comprehensive Back to School campaign, including massive community sensitisation activities, distribution of school materials, and teacher training in order to support the return to school of students and teachers. Considering the importance and significance of the campaign which was expected to help to return normalcy to school activities after major interruption since the beginning of the crisis in late 2012, the Humanitarian Coordinator also added her support by tentatively designating US$ 200,000 to the campaign from the Common Humanitarian Fund (CHF). However, due to the dramatic increase of insecurity in Bangui and other identified “hot spots”, activities planned under the campaign have been downsized. UNICEF and the MoE have shifted the strategy from a massive and comprehensive return to school campaign to a more progressive rollout of opening of schools and associated activities in areas where security is in place. Under this challenging context, UNICEF will support the collective efforts of the MoE, the Association of Students’ Parents and NGO partners in cleaning up of classrooms and distribution of critical school materials such as benches and stationery for teachers and students. With the gradual implementation of these activities, UNICEF will further move forward with the campaign in close consultation with the MoE by taking into full consideration the development of security and logistical conditions in the coming months.

The ongoing and widespread insecurity and instability continues to prevent displaced children from pursuing basic learning activities. In order to ensure these children’s right to education in the time of crisis, UNICEF is preparing for the third phase of Education in Emergencies (EiE) programming by working with international and national NGOs to set up temporary learning spaces (TLS). In fact, an estimated 13,172 school aged children were newly displaced in Bangui, Bambari, Ngoulanga, Ngakobo, Grimari and Batangafo creating more needs for TLS. UNICEF is working with education stakeholders to respond to this most recent crisis by establishing or renewing projects for TLS for approximately 21,000 children. With CHF funding and support from the Italian government, the EiE programme will not only ensure basic learning activities for preschool and primary school aged children but also provide them with much needed psychosocial care. Furthermore, given the continuous needs for EiE programming in the ongoing crisis, it is hoped that funding will be forthcoming under the Central Emergency Response Fund (CERF) in order to reinforce its TLS interventions and further to promote water, hygiene and sanitation activities in schools. Additionally, Nutrition, child Protection and WASH are submitting CERF application.
The increased recent security situation has also had an impact on the implementation of activities under the Global Partnership for Education (GPE) programme. Catch-up classes have begun in most targeted schools in Bangui and seven prefectures (Ouham, Ouham Pende, Ombella M’poko, Mboomou, Kémo, Ouaka and Nana Gribizi) and rehabilitation continues in areas not affected by the current crisis, but in some of the target areas, rehabilitation has slowed and the delivery of school benches and blackboards as well as other school materials has been temporarily blocked.

Despite all, the current crisis context remains volatile, emphasizing the need for additional funding to support the return of basic educational services. Without access to education, there is a high risk that an entire generation of children will be left uneducated and unable to contribute to the rebuilding of society, thus the cycle of violence and instability is prone to recurrence.

UNICEF Education section is reporting its education in emergencies response on two main indicators. Achievements against the annual targets are as follows:

- 31% of children targeted aged 3 to 18 years benefited from education supplies;
- 36% of children targeted are participating in temporary learning spaces activities.

The perceived low level of achievement towards the HRP education targets is due in large part to an overestimation of annual targets during the planning phase for the above-mentioned indicators, which would have necessitated a revision of targets during the midyear review. Regrettably this review did not take place. Also, prevailing conditions (45% to 65% of schools closed at some point in the past school year and continuing areas of insecurity) did not allow the distribution of the planned education supplies and full participation of children in temporary learning spaces activities.

Communication for Development

The C4D section participated in the Polio campaign in the health regions 1 and 7 that comprise Bangui, Lobaye and Ombella M’poko prefectures. These two health regions are subdivided into the following seven health districts: Bimbo, Boda, Mbaiki, Begoua, Bossembele and four from Bangui city.

Three teams made of up of staff from C4D and CSD sections were deployed in the above-mentioned seven health districts and then trained: six supervisors at national level; nine supervisors for districts; nine supervisors for the sub-districts, 31 communication supervisors at commune level; 96 community supervisors; 960 mobilisers; and 500 community public speakers.

The C4D section provided technical support to the Health Communication Directorate in developing a communication strategy for Ebola prevention campaign. Also in line with social mobilisation policy, the C4D section worked closely with the faith-based platform; the national youth council; the Castors’ camp information and listening youth centre; the information and education communication centre for youth reproductive health; and the youth organisations network for human rights to train 432 facilitators for listening clubs des clubs and set up 216 listening committees made up of 10 people each.

These 2,610 committee members will be in charge of monitoring the shows of partners’ radios from the CAR community radios association. The monitored shows will be produced at the request of the listening clubs and are meant to bring about the behaviour and social changes.

As of 31 October, 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;
- 78% of targeted young people sensitised on violence, HIV, peace, hygiene and sanitation;
- 99% of targeted people affected (children, young, women, men) have been exposed to the health, peace, hygiene and sanitation messages.
Rapid Response Mechanism

Following the RRM partners’ strategic review meeting in September, a call to the humanitarian community for expressions of interest was sent in early October for the next phase of the RRM (January-June 2015).

New partners will be selected during the month of November 2014 and another strategic meeting will take place in order to clarify the principles and standards of the RRM and also maintain the highest quality of response by the partners of the mechanism.

Discussion are still ongoing with other UN agencies, at their request, in order to assess their interest and capacity to join the RRM mechanism.

RRM coordination continued to participate in the Inter-Cluster Coordination and other coordination meetings in order to share with the humanitarian community the findings of the RRM multisectoral assessments, to advocate for the most urgent needs in the field and to share information on the activities implemented by the RRM partners (ACF, ACTED, IRC, PU-AMI and Solidarités International) and RRM associate, DRC.

Two exploratory missions were conducted in Simandele by ACF/RRM and in Pougol by IRC/RRM. One multisectoral assessment was carried out by IRC/RRM in Nana Bakassa.

RRM and its partners also provided WASH and NFIs assistance to the affected populations in different areas:
- ACTED/RRM: WASH and NFI interventions in Pombolo for 320 households, WASH and NFI interventions in Digui and Ngakobo for 1,390 households;
- SI/RRM: Wash intervention in Farazala for more than 100 households.

The achievements against the annual UNICEF targets are as follows as of 31 October:
- 118% of households that received NFI items;
- 78% of Multi-Sectoral Assessments (MSA) conducted;
- 39% of boreholes rehabilitated/built. Low level of achievement mainly due to the presence of WASH actors in the field and therefore no need to implement this kind of activities by our partners as RRM is last resort mechanism.

Supply and Logistics

Despite the closure of the Cameroon border for four days (6-9 October) due to security incidents, there was major impact on UNICEF shipments in-transit to CAR during the period as the movement of trucks otherwise continued under regular MINUSCA escorted convoys from the border to the Bangui haulier terminal. Presently convoys are moving to Bangui on Mondays, Wednesdays and Fridays, and from Bangui on Thursdays and Sundays.

From 1 January 2014 to 19 October, a total value of US$ 8,446,285 of supplies, composed of essential medical supplies, health kits, nutrition products, NFI, 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 90 % of Purchase Orders are placed outside of CAR via Supply Division. UNICEF CAR Supply Plan is executed at 89.54 %.

External Communications

In October, External Communication increased local media engagement as part of a renewed focus on Communicating with Communities. The team also supported donor visibility and outreach, ensuring the successful conclusion of the ‘Fill up a Plane’ campaign, in partnership with Norwegian Air and UNICEF Norway. Ongoing international media outreach continues to form a large part of the team’s work, with media hits detailed in the table below.

The External Communications team helped set up a Humanitarian Communications Cell in October. The aim of the cell is to increase communications with local communities around the need to protect humanitarian space in response to
the recent increase in violence in Bangui, and unprecedented attacks against humanitarians. The Communications Cell has broadcast targeted media messages on community radio, with UNICEF taking a lead in engaging local media about child protection. This included organising a round table in the local language Sango, broadcast on local station Ndeke Luka, and a public statement condemning the manipulation of children in the violence, released by Humanitarian Coordinator Claire Bourgeois in partnership with UNICEF. The Cell is now working to distribute text messages on the importance of respecting humanitarian space.

Another local media highlight was UN Day on 24 October. As part of the day’s celebrations, an interview with outgoing Country Representative Souleymane Diabate was broadcast on GUJIRA 93.3 FM.

As a major contribution to emergency response in CAR, UNICEF Norway and Norwegian Air donated a flight to Bangui in October, filled with life-saving supplies. The plane, which was part of a “Fill up A Plane” campaign run by our Norwegian partners, arrived at M’poko Airport on 29 October with over 11 metric tons of humanitarian supplies. The External Communications team was responsible for the day’s programme and organised a visit to the adjacent displacement camp for the CEO of Norwegian Air, the UNICEF Norway Executive Director and a group of Norwegian newspaper and magazine journalists.

Press releases, stories and blogs published in October include:


Bangui violence threatens, but cannot stop our work – UNICEF Connect blog, October 14 http://blogs.unicef.org/2014/10/14/bangui-violence-threatens-but-cannot-stop-our-work/


The partnership with Norwegian Air http://www.unicef.org/media/media_76656.html

<table>
<thead>
<tr>
<th>Outlet</th>
<th>Headline/Topic</th>
<th>Link</th>
</tr>
</thead>
<tbody>
<tr>
<td>CCTV</td>
<td>Visit to Paediatric Complex in Bangui and interview of Nutrition and Child Protection teams</td>
<td></td>
</tr>
<tr>
<td>Politikken</td>
<td>Children staying with host families, after release for armed groups</td>
<td></td>
</tr>
<tr>
<td>RFI</td>
<td>RCA, remettre l'Etat sur pied</td>
<td><a href="http://www.rfi.fr/emission/grand-reportage/">http://www.rfi.fr/emission/grand-reportage/</a></td>
</tr>
</tbody>
</table>
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 and come together under the inter-cluster platform facilitated by OCHA also meeting on a weekly basis. A planned internal review exercise to update the progress of UNICEF standards for cluster coordination to be held with the support of the Geneva Cluster Support Unit had to be cancelled due to interruptions associated with the outbreak of fighting in Bangui. This will be rescheduled to take place if possible before the end of the year.

Funding

As of 31 October, UNICEF has received $37 million against the $81 million in the 2014 HAC requirements and details are provided in below sectoral table. The current utilisation rate stands at 85%. Without additional resources, UNICEF will not be in a position to meet its annual targets and provided the needed assistance to affected children and women.

<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>11,000,000</td>
<td>4,449,762</td>
<td>6,550,238</td>
</tr>
<tr>
<td>Health and HIV/AIDS</td>
<td>20,600,000</td>
<td>12,476,446</td>
<td>8,123,554</td>
</tr>
<tr>
<td>Water, Sanitation &amp; Hygiene</td>
<td>17,400,000</td>
<td>7,031,841</td>
<td>10,368,159</td>
</tr>
<tr>
<td>Child Protection</td>
<td>12,000,000</td>
<td>5,319,490</td>
<td>6,680,510</td>
</tr>
<tr>
<td>Education</td>
<td>10,000,000</td>
<td>1,833,806</td>
<td>8,166,194</td>
</tr>
<tr>
<td>Non Food Items (NFI)</td>
<td>10,000,000</td>
<td>6,179,448</td>
<td>3,820,552</td>
</tr>
<tr>
<td>Total</td>
<td>81,000,000</td>
<td>37,290,792</td>
<td>43,709,208</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 31 October 2014

<table>
<thead>
<tr>
<th>Sector</th>
<th>Indicator</th>
<th>UNICEF &amp; operational partners</th>
<th>Sector / Cluster</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2014 (Full year)</td>
<td>Unicef Target</td>
<td>Cumulative results (#)</td>
</tr>
<tr>
<td></td>
<td>UNICEF Operational Partners: ACF, SAVE THE CHILDREN, FRENCH RED CROSS, COLLABORATION WITH MSF, CARITAS (**)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Health</td>
<td>Number and % of children U5 vaccinated against measles</td>
<td>268,231</td>
<td>234,956</td>
</tr>
<tr>
<td></td>
<td>Number and % of children Under-five provided with Vitamin A</td>
<td>740,000</td>
<td>186,760</td>
</tr>
<tr>
<td></td>
<td>Number and % of children 1-5 years who received de-worming medication</td>
<td>657,000</td>
<td>202,780</td>
</tr>
<tr>
<td></td>
<td>Number and % of people that access basic health services and medicines in the affected areas (**)</td>
<td>2,000,000</td>
<td>1,382,788</td>
</tr>
<tr>
<td>Nutrition</td>
<td>Number and % of children 6-59 months with Severe Acute Malnourishment (SAM) admitted for therapeutic care and benefiting from promotion of nutrition practices</td>
<td>28,000</td>
<td>19,283</td>
</tr>
<tr>
<td></td>
<td>Recovery Rate</td>
<td>&gt;=75%</td>
<td>81%</td>
</tr>
<tr>
<td></td>
<td>Death Rate</td>
<td>&lt;5%</td>
<td>4%</td>
</tr>
<tr>
<td></td>
<td>Default Rate</td>
<td>&lt;15%</td>
<td>15%</td>
</tr>
<tr>
<td>WASH</td>
<td>Number and % of affected people that have access to improved sources of water (*)</td>
<td>700,000</td>
<td>393,467</td>
</tr>
<tr>
<td></td>
<td>Number and % of affected people with access to a basic sanitation services (**)</td>
<td>300,000</td>
<td>208,531</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>350,000</td>
<td>287,280</td>
</tr>
<tr>
<td>Protection</td>
<td>Number and % of children benefiting from recreational activities and psychosocial support (children centre and counselling areas)*</td>
<td>100,000</td>
<td>62,487</td>
</tr>
<tr>
<td></td>
<td>Number and % of children released from armed forces and groups*</td>
<td>3,000</td>
<td>2,143</td>
</tr>
<tr>
<td></td>
<td>Number and % of separated children in emergencies reunified with families</td>
<td>1,200</td>
<td>539</td>
</tr>
</tbody>
</table>

**Notes:**
- (*) 1 Bednet for two people across the country in line with the Universal coverage programme. The figures reported are only for Bangui.
- (**) 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.

**Nutrition:**
Number and % of children 6-59 months with Severe Acute Malnutrition (SAM) admitted for therapeutic care and benefiting from promotion of nutrition practices

**WASH:**
Number and % of affected people that have access to improved sources of water (*)

**Protection:**
Number and % of children benefiting from recreational activities and psychosocial support (children centre and counselling areas)*

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. 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. Please note that target will be revised shortly.)
## CAR HUMANITARIAN SITUATION REPORT – 7 November 2014

### Number and % of GBV survivors who receive holistic assistance*

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<tr>
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<tbody>
<tr>
<td></td>
<td>3,500</td>
<td>1,839</td>
<td>53%</td>
</tr>
<tr>
<td></td>
<td>6,500</td>
<td>1,839</td>
<td>28%</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, Save the Children, IRC, Mercy Corps, NDA, COOPI, OCHD, AFJC, Triangle, Village SOS, and *

### HIV/AIDS

#### Number and % of pregnant women receiving HIV/AIDS counselling

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<tr>
<th></th>
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<tbody>
<tr>
<td></td>
<td>56,732</td>
<td>35,827</td>
<td>63%</td>
</tr>
<tr>
<td></td>
<td>56,732</td>
<td>35,827</td>
<td>63%</td>
</tr>
</tbody>
</table>

#### Number and % of pregnant women benefiting from PMCTC- ARV prophylaxis

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</thead>
<tbody>
<tr>
<td></td>
<td>4,392</td>
<td>1,528</td>
<td>35%</td>
</tr>
<tr>
<td></td>
<td>4,392</td>
<td>1,528</td>
<td>35%</td>
</tr>
</tbody>
</table>

#### Number and % of children born from HIV positive women benefiting from ARV prophylaxis

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<th></th>
<th></th>
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</thead>
<tbody>
<tr>
<td></td>
<td>4,392</td>
<td>926</td>
<td>21%</td>
</tr>
<tr>
<td></td>
<td>4,392</td>
<td>926</td>
<td>21%</td>
</tr>
</tbody>
</table>

#### Number and % of children previously on ARV prophylaxis who continue to receive ARV treatment

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<tbody>
<tr>
<td></td>
<td>1,705</td>
<td>686</td>
<td>40%</td>
</tr>
<tr>
<td></td>
<td>1,705</td>
<td>686</td>
<td>40%</td>
</tr>
</tbody>
</table>

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

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## Education

#### Number and % of children between 3 to 18 years who benefited from education supplies

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<tbody>
<tr>
<td></td>
<td>300,000</td>
<td>91,927</td>
<td>31%</td>
</tr>
<tr>
<td></td>
<td>580,000</td>
<td>106,204</td>
<td>18%</td>
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</table>

#### Number and % of children participating in ETAPE activities (temporary learning spaces) (*)

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<tbody>
<tr>
<td></td>
<td>100,000</td>
<td>36,498</td>
<td>36%</td>
</tr>
<tr>
<td></td>
<td>180,000</td>
<td>42,355</td>
<td>24%</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 10 in Boda

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## CAD

#### Number and % of households exposed to messages related to vaccination campaign

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<tbody>
<tr>
<td></td>
<td>960,000</td>
<td>624,000</td>
<td>65%</td>
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</table>

#### Number and % of people affected (children, young, women, men) who have been exposed to the health, peace, hygiene and sanitation messages

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<tbody>
<tr>
<td></td>
<td>2,500,000</td>
<td>1,960,000</td>
<td>78%</td>
</tr>
</tbody>
</table>

#### Number and % of young people sensentised on violence, HIV, peace, hygiene and sanitation

<p>| | | | |</p>
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<tbody>
<tr>
<td></td>
<td>518,000</td>
<td>510,800</td>
<td>99%</td>
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</table>

---

## RRM

#### Number and % of households that received NFIs items

<p>| | | | |</p>
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<th></th>
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<tbody>
<tr>
<td></td>
<td>17,267</td>
<td>20,424</td>
<td>118%</td>
</tr>
</tbody>
</table>

#### Number and % of Multi-Sectoral Assessments (MSA) conducted

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<tr>
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<th></th>
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<tbody>
<tr>
<td></td>
<td>51</td>
<td>40</td>
<td>78%</td>
</tr>
</tbody>
</table>

#### Number and % of boreholes rehabilitated/built

<p>| | | | |</p>
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<th></th>
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<th></th>
<th></th>
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</thead>
<tbody>
<tr>
<td></td>
<td>109</td>
<td>43</td>
<td>39%</td>
</tr>
</tbody>
</table>

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Twitter handle: @UNICEF_CAR, #CARcrisis


The next CAR Country Office Humanitarian Situation Report will be released on or around 30 November 2014.

Who to contact for further information:

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  ltom@unicef.org