UNICEF Central African Republic (CAR) Situation Report
Date: 16 April 2013
Reporting Period: 9-16 April 2013

**OVERALL ESTIMATED AFFECTED POPULATION***
4.6 million
CHILDREN AFFECTED BY THE CRISIS
> 2.3 million
INTERNALLY DISPLACED POPULATION**
> 173,000
NEW REFUGEES***
> 38,000
UNICEF IMMEDIATE FUNDING GAP****
>US$ 11 million

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**Headlines**

- The humanitarian crisis in the Central African Republic (CAR) worsens as widespread violence continues and access for humanitarian actors remains precarious.
- Security in Bangui remains precarious with significant fighting over the weekend amongst Seleka elements unwilling to demobilise, the core Seleka faction, and armed youth groups.
- UNICEF condemns rocket attacks in which 3 babies were killed and 25 children injured.
- Distribution of newly arrived emergency health kits, medicines, and supplies successfully completed to 4 hospitals, 1 maternity hospital, and 15 health centres in Bangui and its periphery.
- UNICEF provides emergency health, nutrition, protection, and water/sanitation support to the affected population in partnership with INGOs present on the ground.

* It is estimated that the entire population of CAR is either directly or indirectly affected by the crisis. The humanitarian needs are being assessed through the Rapid Response Mechanism (RRM).
**IDP numbers from March 2013 – will need to be revised following new assessments.
***Before the March 24 coup, there were already nearly 190,000 CAR refugees in Cameroon, Chad, DRC and South Sudan, according to UNHCR.
****Funding gap to be revised following new round of rapid assessments. Overall cluster and UNICEF population targets under revision.

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*Photo 1: UNICEF Supply and Logistics Specialist, and UNICEF Driver, lead the convoy for emergency distribution of medical supplies in Bangui, 12 April 2013 (photo credit: Dede Nambeanre)*
**Situation Overview & Humanitarian Needs**

**Timeline of events**

In **December 2012**, the Seleka (meaning Coalition in the local language) began its advance across the Central African Republic (CAR). A ceasefire agreement in Libreville was brokered on **9 January** and a new transitional national unity government was formed on **3 February 2013**. On **22 March**, the Seleka advanced towards Bangui while also taking key cities in the western part of the country. On **24 March**, the Seleka advanced on Bangui, taking control of the capital and the entire country. Shortly after seizing power, the self-proclaimed President Michel Djotodia dissolved the transitional government, parliament, and constitution. However, following international pressure, on **3 April**, Michel Djotodia issued a presidential order setting up a council to lead a transitional government until elections were held within 18 months (October 2014). On **April 13**, Michel Djotodia was elected by acclamation the interim President of CAR during the first session of the Board of the National Transition Council (CNT). Alexandre-FerdinandNguendet was chosen as president of the CNT to oversee its work. As the political situation in CAR remains uncertain, UNICEF advocates with all actors to halt the ongoing violence so that the humanitarian situation does not deteriorate further.

**Current Situation**

Three weeks after the Seleka rebel alliance seized power in a military coup in the capital Bangui, widespread insecurity, looting, and violence continues to destroy the already fragile country, and puts CAR’s children at greater risk than ever.

UNICEF estimates that the entire population of CAR (4.6 million people, half of whom are children) is either directly or indirectly affected by the crisis, with lack of access to basic services and exposure to lawlessness throughout the country. Information on humanitarian needs is forthcoming as results of Rapid Response Mechanism (RRM) assessments are made available. In the northeast, 1.2 million people (an estimated 600,000 of whom are children) have been without basic essential services for four months now. The table below summarizes the estimated affected population in CAR.

<table>
<thead>
<tr>
<th>Estimated Affected Population in Central African Republic by Prefecture</th>
<th>Total*</th>
<th>Male*</th>
<th>Female*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Affected Population = Total Population</td>
<td>4,663,725</td>
<td>2,331,866</td>
<td>2,331,866</td>
</tr>
<tr>
<td>Children Affected (Under 18)</td>
<td>2,303,880</td>
<td>1,151,940</td>
<td>1,151,940</td>
</tr>
<tr>
<td>Population cut off from basic services since December</td>
<td>1,200,000</td>
<td>600,000</td>
<td>600,000</td>
</tr>
<tr>
<td>Children cut off from basic services since December</td>
<td>600,000</td>
<td>300,000</td>
<td>300,000</td>
</tr>
<tr>
<td>Children Under Five (17.3% of total population)</td>
<td>806,824</td>
<td>403,412</td>
<td>403,412</td>
</tr>
<tr>
<td>Children 0-12 months (3.5% of total population)</td>
<td>163,230</td>
<td>81,615</td>
<td>81,615</td>
</tr>
<tr>
<td>Children 12-59 months (13.8% of total population)</td>
<td>643,594</td>
<td>321,797</td>
<td>321,797</td>
</tr>
<tr>
<td>Pregnant women (4.4% of total population)</td>
<td>205,204</td>
<td>N/A</td>
<td>205,204</td>
</tr>
<tr>
<td>Children Under Five with Severe Acute Malnutrition (SAM)</td>
<td>13,500**</td>
<td>Not available</td>
<td>Not available</td>
</tr>
<tr>
<td>Children Under Five with Moderate Acute Malnutrition(MAM)</td>
<td>44,000**</td>
<td>Not available</td>
<td>Not available</td>
</tr>
<tr>
<td>Total Displaced Population</td>
<td>173,000**</td>
<td>86,500</td>
<td>86,500</td>
</tr>
<tr>
<td>Children Displaced (Assuming 50% of the total displaced population)</td>
<td>85,462**</td>
<td>42,731</td>
<td>42,731</td>
</tr>
<tr>
<td>Affected Families (5 persons each family)</td>
<td>932,745</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Estimated number of primary school aged children (6-11 years old)</td>
<td>746,196</td>
<td>373,098</td>
<td>373,098</td>
</tr>
<tr>
<td>Estimated number of pre-school aged children (3-5 years old) (9.9% of total population)</td>
<td>461,709</td>
<td>230,854</td>
<td>230,854</td>
</tr>
</tbody>
</table>

**Note:** *Estimated 50% of male and female population.** these figures are expected to increase once data is available.

On Friday 12 April, in an effort to find some normalcy amongst ongoing fighting and fear, a group of more than 20 children between the ages of five and twelve were at a playing field in Bangui’s 5th arrondissement when a rocket propelled grenade landed in the midst of their game. The 14 injured were immediately taken to Bangui’s over-stretched Pediatric Hospital for treatment; two young children required emergency surgery.

On Sunday 14 April, during the morning service, a rocket exploded among the congregation of a church in Bangui’s 4th arrondissement. Seven people were killed on the spot, including three babies; while 11 children between 5-8 years were transferred to the Pediatric hospital. 7 of these children received emergency surgery and three had their legs amputated.

Many other children have been victims of stray bullets, while others have been recruited into youth mobs and armed groups. There has also been documented increase in cases of Gender Based Violence (GBV).

UNICEF has called on all parties to the conflict to take immediate measures to stop the violence against children and women and to immediately ensure access and security for humanitarian actors; reminding them that killing and maiming of children is a grave violation and constitutes war crimes punishable by the International Criminal Court. UNICEF has called for an immediate investigation into the attacks on children that have taken place in Bangui during these last days and others that are occurring across the country.

Renewed displacement continued in and around Bangui over the weekend with increased skirmishes amongst Seleka members not willing to demobilise, the core Seleka faction, and armed youth groups. The previous working estimate of 173,247 IDPs is being reassessed. The latest refugee figures from UNHCR have topped 38,000 in DRC and Chad, adding to the 190,000 CAR refugees in Cameroon, Chad, DRC and South Sudan before the March 24 coup. Reports indicate that there were 1,200 new arrivals in DRC over the weekend and fleeing continues.

Currently, the following humanitarian organizations have maintained an international presence in CAR: ACF, ACTED, COHEB, COOPI, EMERGENCY Paediatric, IMC, IRC, MSF-France, MSF-Holland, MSF-Spain, PU-AMI, Mercy Corps, and the ICRC. Save the Children has also arrived in Bangui last week, a much needed addition to the protection cluster, and is engaged in an evaluation mission with some logistics support from UNICEF.

Security/Access

- Looting, pillaging, and attacks on civilians and humanitarian organisations continue.
- However, a number of NGOs have undertaken successful needs assessments into the regions outside of Bangui during the last week, for which UNICEF is releasing additional supplies, especially for resumption of nutrition services. These assessments have been mostly limited to towns and populations along main roads. Use of secondary roads is inadvisable in many areas.
- Security in Bangui deteriorated further over the weekend with increased fighting amongst the core Seleka faction, Seleka elements who are refusing to demobilise, and groups of youth.
- Access to zones affected by the crisis outside of the capital remains severely limited with no guarantee of security of humanitarians and humanitarian supplies.

RRM Assessment Results and UNICEF Key Actions to date -BANGUI

While significant insecurity continues to exacerbate the lack of access, UNICEF is coordinating with UN agencies and INGO partners on the ground to plan and deliver immediate support for vulnerable populations that are accessible.
RRM Rapid Assessments (RRAs) have now been conducted in all the eight districts of Bangui covering the sectors of health, food security, nutrition, protection, shelter and WASH. The analysis of the 41 questionnaires has revealed the highlights in the table below.

<table>
<thead>
<tr>
<th>RRM Assessments</th>
<th>Key Actions to date (24 March-16 April)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>HEALTH</strong></td>
<td>Since the March 24 coup, UNICEF has provided over 8 MT of health, nutrition and WASH related supplies to MSF France, MSF Spain, IMC, ACF, and Emergency Paediatric Clinic to support emergency health and nutrition activities at the 4 main hospitals and health centres in Bangui.</td>
</tr>
<tr>
<td></td>
<td>On April 7, a UNICEF-chartered flight carrying over 23 tons of essential drugs, obstetric supplies, and water tanks arrived in Bangui. The emergency medical kits carried on this flight will be used to treat about 200,000 people affected by the conflict for the next three months. Also on the flights were twelve water tanks with distribution kits to secure water provision at the main hospitals and health centres in the capital Bangui and other areas (as they become accessible).</td>
</tr>
<tr>
<td></td>
<td>Between April 10-13, UNICEF distributed the newly arrived basic health kits, drugs, and basic malaria kits to four hospitals and 15 health centres in and around Bangui, and also distributed obstetric surgical kits to a maternity clinic. This will meet essential medical needs in Bangui for two months.</td>
</tr>
<tr>
<td><strong>NUTRITION</strong></td>
<td>Nutritional needs in Bangui are being covered under the on-going ACF supported fixed and ambulatory therapeutic feeding program in Bangui and nearby areas. 3 therapeutic nutrition centres and 12 ambulatory nutritional centres have supported the treatment of almost 4,000 severe acutely malnourished children in Bangui.</td>
</tr>
<tr>
<td></td>
<td>UNICEF conducted additional distributions of nutrition supplies to ACF of 16 April to ensure a 2 month stock for Bangui and to facilitate re-opening of a nutrition centre in Bossangoa.</td>
</tr>
<tr>
<td><strong>EDUCATION</strong></td>
<td>The security situation is impeding children and teachers from accessing schools and is also preventing</td>
</tr>
</tbody>
</table>

- 27% of the questionnaires received state that there are no health facilities available.
- 12% of the questionnaires have registered that there are no health personnel available.
- 32% of the questionnaires report that there are no medicines available.
- 22% of the questionnaires reveal that there is risk of pandemic.
- 39% of the questionnaires received report an interruption of the health services previously provided.
- 32% of the questionnaires report an increased level of patients accessing health services.

- 83% of the questionnaires report that food sources have changed as a result of the conflict.
- 83% of the questionnaires report a bad status of food stock.
- 41% of the questionnaires report a negative impact on food in the market (i.e., increased price, less food available, etc.)
- 51% of the questionnaires reported that there are heavy crop losses.
- 37% of the questionnaires received have reported a negative impact on livestock, 39% on agricultural products stocked and 61% on the availability of seeds.

- 54% of questionnaires report that no schools have been affected with 12%
only partially or lightly affected.

- 39% of the questionnaires report no schools damaged and 10% have reported some level of damage.
- 44% of the questionnaires report that children were not attending school.
- 24% of the questionnaires report that the schools are used to shelter people.

emergency distribution to schools for fear of further pillaging.

UNICEF is exploring options to provide safe spaces for children to learn and play in areas as they become accessible.

Water supply and water quality needs in Bangui were not found to be critical as the SODECA operations were reinforced through provision of treatment supplies by UNICEF and ICRC, among others. The provision of safe water supply for the city (Bangui) has been largely restored to pre-crisis levels.

Public sanitation is a serious concern due to collapse of garbage collection and loss of many hand tools. UNICEF and ACTED have finalised an agreement to implement and coordinate this response for the next three months.

UNICEF is working in close collaboration with COOPI, IRC, Triangle, and a local network of child protection organizations to address the protection needs of orphans and unaccompanied children in Bangui.

UNICEF continues to support reintegration and protection of children formerly associated with armed groups in Bangui and advocates for immediate release of children who are still among the ranks of armed groups.

UNICEF Key Actions - outside of Bangui

The security on roads and in towns outside of Bangui remains extremely volatile with continued attacks on humanitarians.

However, a number of NGOs have undertaken successful needs assessments in some of the regions outside of Bangui during the last week, for which UNICEF is releasing additional supplies, especially for resumption of nutrition services. These assessments have been mostly limited to towns and populations along main roads. Use of secondary roads is inadvisable in many areas.

Interagency Collaboration

The UN system in CAR conducted a program criticality exercise (11-15 April) in order to prioritise programming within a high risk environment and to determine ways to manage risks. This will also enable a prioritisation of critical staffing for implementation of this level of programming.

UNICEF continues to actively engage with the humanitarian community in CAR – NGOs and UN agencies - to effectively plan and engage in the provision of immediate humanitarian response.
Supply

Since the coup d’État on March 24, UNICEF has delivered 81 MT of emergency supplies to partners; and specifically, essential drugs and medical equipment for over 60,000 people to health partners operating at hospitals and health centres.

On March 7, a special UNICEF-chartered flight carrying over 23 MT of essential drugs, obstetric supplies, and water tanks arrived in Bangui, two weeks after the seizure of power by the Seleka.

Between April 10-13, UNICEF distributed the newly arrived basic health kits, drugs, and basic malaria kits to four hospitals and 15 health centres in and around Bangui, and also distributed obstetric surgical kits to a maternity clinic. This will meet essential medical needs in Bangui for the next two months. On 16 April, UNICEF distributed additional nutrition supplies to ACF to ensure a 2 month stock for nutrition centres in Bangui and to facilitate the re-opening of a nutrition centre in Bossangoa. UNICEF is working with the health and nutrition clusters to ensure monitoring and follow up of drugs and nutrition supplies in Bangui and elsewhere.

Funding

The Consolidated Appeal (CAP) for CAR is now 22% funded, with $28 million secured out of the $129 million required. The HCT is currently putting together a request for funding from the Central Emergency Response Fund (CERF)’s Rapid Response envelope. The CERF Secretariat is looking at a possible allocation of around $7 million to support the response.

Due to the deterioration of the humanitarian situation in the country since the military takeover, humanitarian needs have significantly increased. Through the CAP 2013 and the revision done in March just prior to the coup, humanitarian actors were requesting US$172 million to address needs of 1.2 million vulnerable persons in CAR. In addition, the continued looting of humanitarian bases, warehouses, and vehicles has further impeded the delivery of emergency, life-saving interventions in Bangui and the affected prefectures. The CAP will need to be revisited to reflect the current needs in CAR which has increased across the country.

Additional funding is sought to address the most pressing needs of vulnerable population throughout the country. Humanitarian actors are preparing a response plan to cover priority needs generated by the ongoing crisis.

UNICEF’s estimated funding gaps prior to the coup are as follows, these are currently being revised upwards, following the events of the past 3 weeks.

<table>
<thead>
<tr>
<th>Sectors</th>
<th>Activities</th>
<th>HR</th>
<th>Supplies</th>
<th>Cross Sectoral (10%)</th>
<th>Total Funds Required</th>
<th>Unfunded Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>WASH</td>
<td>1,411,865</td>
<td>83,460</td>
<td>1,725,844</td>
<td>322,117</td>
<td>3,543,286</td>
<td>3,391,865</td>
</tr>
<tr>
<td>Health</td>
<td>2,343,300</td>
<td>321,000</td>
<td>792,363</td>
<td>345,667</td>
<td>3,802,329</td>
<td>1,530,719</td>
</tr>
<tr>
<td>Nutrition</td>
<td>1,819,000</td>
<td>160,500</td>
<td>491,063</td>
<td>247,057</td>
<td>2,717,619</td>
<td>1,969,047</td>
</tr>
<tr>
<td>Education</td>
<td>758,481</td>
<td>96,300</td>
<td>298,557</td>
<td>114,812</td>
<td>1,268,150</td>
<td>268,150</td>
</tr>
<tr>
<td>Child Protection</td>
<td>3,783,727</td>
<td>795,545</td>
<td>5,257</td>
<td>321,472</td>
<td>4,906,001</td>
<td>2,502,420</td>
</tr>
<tr>
<td>M&amp;E</td>
<td>120,638</td>
<td>0</td>
<td>7,613</td>
<td>483,263</td>
<td>611,514</td>
<td>93,845</td>
</tr>
<tr>
<td>C4D</td>
<td>535,000</td>
<td>32,100</td>
<td>472,184</td>
<td>103,928</td>
<td>1,143,212</td>
<td>1,143,212</td>
</tr>
<tr>
<td>Operations</td>
<td>151,400</td>
<td>120,000</td>
<td>0</td>
<td>0</td>
<td>271,400</td>
<td>241,400</td>
</tr>
<tr>
<td>TOTAL BUDGET</td>
<td>10,923,412</td>
<td>1,608,905</td>
<td>3,792,879</td>
<td>1,938,315</td>
<td>18,263,511</td>
<td>11,140,658</td>
</tr>
</tbody>
</table>

Please note all amounts expressed in USD

61%
UNICEF wishes to express its deep 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 ‘uneamaged’ funding. ‘Uneamaged’ 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 building. Continued donor support is critical to continue scaling up the response.

Next Sitrep: 24 April

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