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CAMEROON

Humanitarian Situation Report



SITUATION IN NUMBERS

Highlights

UNICEF continues to be engaged in providing humanitarian assistance in four regions of Cameroon – the Far North, North, Adamawa and the East – which have been facing recurring emergencies.

Increase in Security attacks from Boko Haram in Far North region across the Nigerian border: Targeted kidnappings and armed attacks by Boko Haram since December 2013 are on the rise, especially since May 2014. Bold attacks in July included the kidnapping of the wife and family of the Deputy Prime Minister and 10 Chinese workers. The number of security incidents has already reached 36 in 2013-2014, up from 20 in 2011-2012 and 23 in 2012-2013. 24,182 new Nigerian refugees have arrived in Northern Cameroon, with about 3,000 Nigerian refugees in Minawao refugee camp located 130 km east of the Nigeria-Cameroon border. Due to the insecure environment, most NGOs have issued advisories to their nationals to leave Far North region.

CAR REFUGEES: As of 27 July 2014, 119,029 people have been officially registered as refugees since January 2014, and about 84% of these are women or children.

NUTRITION RESPONSE: Over 27,000 children with SAM have been admitted for therapeutic care to date through UNICEF and partners.

POLIO RESURGENCE: Cameroon has been declared as country with active transmission of wild Polio virus and 9 cases having been confirmed to date since October 2013. 2 new cases have recently come to light in CAR refugee camps.

CHOLERA RESURGENCE: In 2014, 1,498 cases of cholera have been reported at the national level with 75 deaths (all deaths in Northern Cameroon).

August 5, 2014

119,029

CAR REFUGEES (as of July 27, 2014)

48,778 SAM

92,794 MAM

SAHEL NUTRITION CRISIS
(Targeted caseloads of children in 2014)

24,182

NIGERIAN REFUGEES
(1 July 2014, UNHCR and UNCT NE Nigeria Sit Analysis)

9 cases

POLIO

1498 cases, 75 deaths

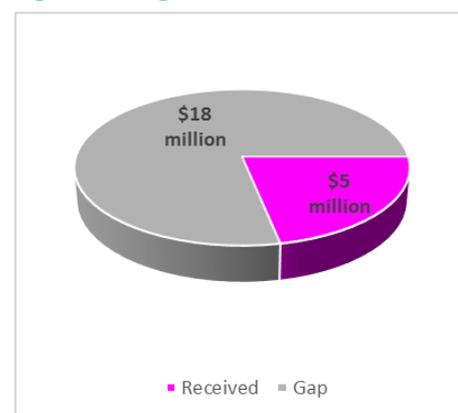
CHOLERA

UNICEF Funding Requirements 2014*

US\$ 23 million

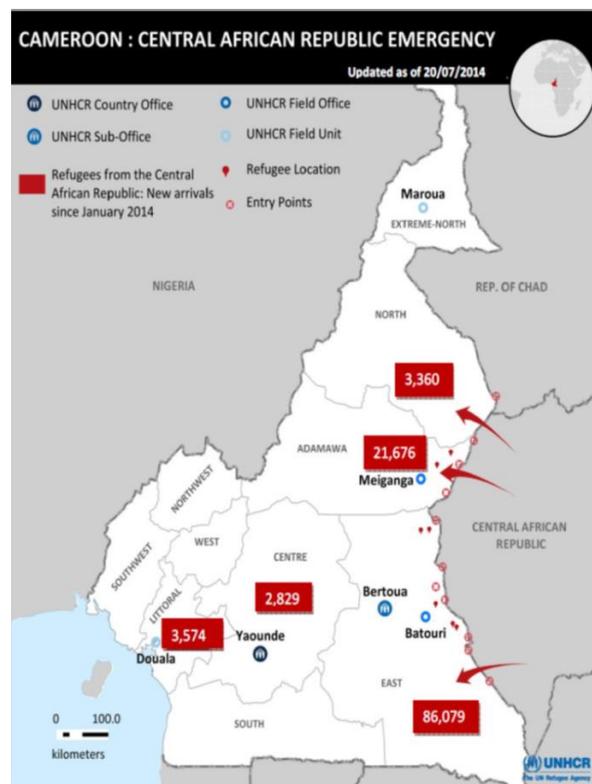
UNICEF's Response to CAR crisis with partners

	UNICEF		Sector/Cluster	
	UNICEF Target	Cumulative results (#)	Cluster Target	Cumulative results (#)
Number of people who have access to potable water	30,000	6,500	80,000	29,000
Number of children 9 months -15 years immunized against measles in Adamawa and East regions (January - April 2014)	84,000	95,823	84,000	95,823
Number of CAR refugee children <5 with SAM admitted to care	7,855	3,786	7,855	3,786
Child Protection - # of children accessing psycho-social support	16,000	7,745	30,000	7,745

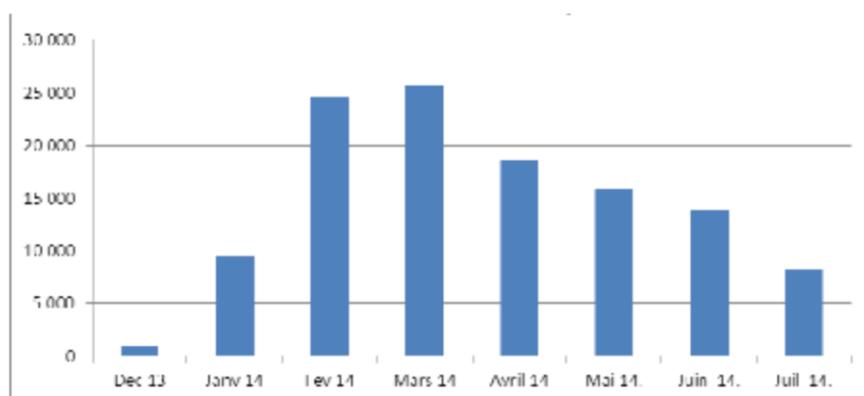


Situation Overview & Humanitarian Needs

CAR Refugee Crisis: The current political and humanitarian crisis in CAR started in December 2012 when armed attacks against the central government intensified, leading to the president being deposed and replaced in March 2013. Widespread violence intensified between armed groups in December 2013, resulting in the removal of the president and the internal displacement of around 20 per cent of the country's population. Cameroon has been hosting over 92,000 CAR refugees before the recent hostilities. As of 27th of July, 119,029 CAR refugees have been registered by UNHCR (180,000 expected by year-end) of which 57% are children (0 to 17 years old). 51,933 (44%) are accommodated in 7 sites in East and Adamawa Region, while 67,096 (56%) are living out of sites, including 56,258 living in villages and 10,838 at entry points. 9,858 (less than 1%) are in the North region, Yaounde, and in Douala. Since April 2014 UNHCR reports show a decrease in refugee influx (< 5,000 per month): *For more details visit an online map accessible at: <http://carcrisis.unicef-gis.org>.*



CAR refugees monthly Arrival (July 2014)



Sahel Nutrition Crisis: About 5.9 million people live in the North and Far North regions; up to 1.18 million are children under five years of age. In 2014, out of an estimated 55,198 SAM cases and 132,434 MAM cases in children, the targeted caseload that will be supported in Far North, North, Adamawa and East regions is 48,778 children under-five for SAM and 92,794 children under-five for MAM.

government forces in Nigeria bordering Northern Cameroon has spilled over into Cameroon. UN agencies have ensured access to health, nutrition and water for the population to avoid a deterioration of the humanitarian situation. 24,182 Nigerian refugees are currently located in Northern Cameroon, with about 6,068 Nigerian refugees in Minawao refugee camp located 130 km east of the Nigeria-Cameroon border. Many Nigerian refugees refuse to be transferred to the camp, preferring to stay near the border in order to better monitor the situation in the Northeast, with the hopes of returning (1 July 2014, UNHCR and UNCT NE Nigeria Situation Analysis).

Estimated Affected Population
(Estimates calculated based on initial figures from UNICEF Humanitarian Action Update February 2014, Cameroon General Census revisions 2013)

Start of humanitarian response:

	Total
Total Affected Population	5,891,785
Children Under Five	1,178,357
Children 6 to 23 months	350,089
Pregnant women	368,186
Children Under Five with Severe Acute Malnutrition (SAM)	54,198
Children Under Five with SAM and medical complications	4,878

Humanitarian leadership and coordination

UN agencies in Cameroon (UNICEF, WHO, UNHCR, UNFPA, IOM, WFP) continue to coordinate activities to support the CAR refugees in East and Adamawa Regions. UNHCR is undertaking the role of coordinator on behalf of the UN system along with the Government of Cameroon and will be responsible for compiling a weekly status report every Tuesday. Coordination meetings continue at the operational level on a weekly basis in the field at Bertoua and Meiganga. UNICEF has activated Nutrition and WASH working groups as a lead and the Education working group as a co-lead. UNICEF has also activated the Child Protection sub-group. Sector meetings (Health, Nutrition, WASH, Protection, Education, Shelter, etc.) continue at the field level as per the established schedule. Coordination meetings at the national level are held twice a month in Yaounde with all humanitarian actors responding to the emergency.

Humanitarian Strategy

UNHCR has taken the lead role in responding to the CAR refugee crisis with UNICEF and other UN agencies supporting specific interventions. Throughout the Sahel nutrition crisis, UNICEF has taken a lead role in mobilizing and involving key stakeholders in the response, specifically in Nutrition, WASH and Education. The technical lead role that UNICEF plays has helped to define critical interventions to be carried out, and to set up practical monitoring mechanisms for follow up and impact measurement.

The humanitarian operation is now more adapted to the urgency of the needs after several months of scale up: Partners are expanding their presence, mortality rates due to severe acute malnutrition are being managed and WASH facilities in sites are increasingly available. UNHCR revising the planning figure from to 180,000 projected new arrivals for 2014 meaning that humanitarian actors should plan for an additional 60,000 arrivals between now and December.

Summary Analysis of Programme Response

RESPONSE FOR CAR REFUGEES

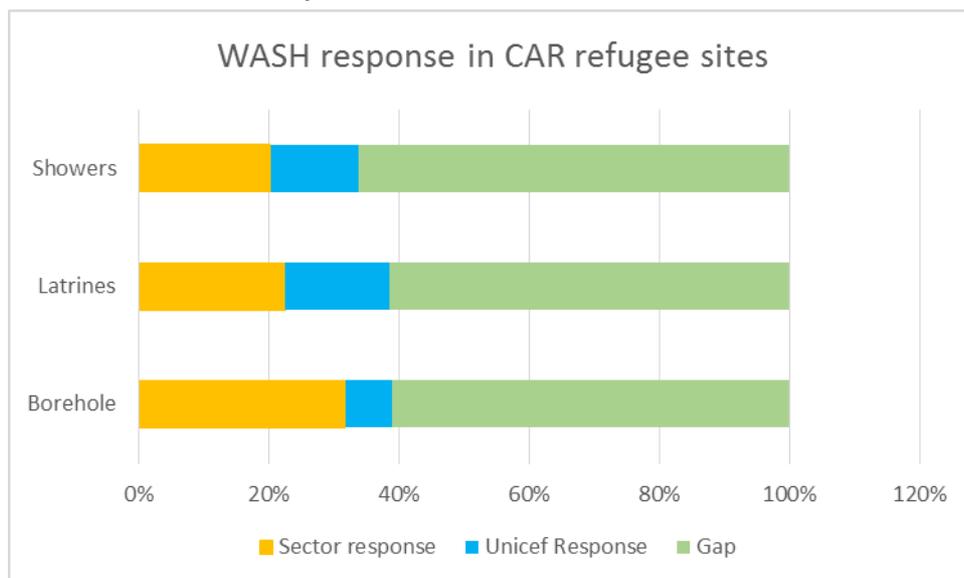
NUTRITION

- **Treatment:** Active case finding is ongoing in refugee sites, and all implementing partners have dedicated community workers for the activity. Data received to date indicate that **3,786 children with SAM have received treatment in 4 operational inpatient treatment facilities and 10 outpatient treatment programs**. This represents 48% of the 7,855 estimated caseload for CAR refugees in 2014. Inpatient treatment facility results remain within the SPHERE standards, with significant achievements on reduction of mortality. In outpatient treatment programs, defaulter rates remain alarming, reaching 50%, particularly in the Gado and Gbiti sites. The main difficulty is to localize the household of the child to do home visits and bring back children into the program. Families are moving from transit to camps and inside the camps. Reinforcement of community workers is ongoing and solutions for localisations under evaluation. Capacity building of a community relay, both inside and outside of sites, is being prepared with the regional delegation.
- The current level of admissions is now stable and the number of cases transferred to InPF started to decrease, which is encouraging as an indicator of less severity in the cases identified. UNICEF continues its daily technical supervision in OTPs and InPF in sites, but also outside the sites where main objective is to reinvigorate the functioning of OTPs in all the health centres located in the 9 priority health Districts (Djohong, Garoua Boulai, Kette, Batouri, Ndelele, Yokadouma, Mouloundou, Betare Oya and Bertoua). This strategy will help to target both refugees outside sites (still the majority) and host communities.
- **Supplies:** Since January, ready to use therapeutic food (RUTF), therapeutic milk, systematic treatments as well as InPF specific treatment are delivered by UNICEF through the regional delegation stock. Field delivery remains a constraint and comprises a huge part of the focus of monitoring activities for the nutrition team.
- **Training:** A training of trainers for nutrition relay was held 9 July 2014 in Bertoua under the coordination of the PRSP, WFP and UNICEF. In July, 23 staff from French Red Cross benefitted from 1 week of training on InPF case management. Since January, more than 100 NGO staff have been trained by the UNICEF nutrition team.
- **Coordination:** UNICEF continues daily support to the regional nutrition focal point and its team. Results in terms of data collection and analysis are significant. The arrival of new technical partners is encouraging and will help the scale up of the intervention and to reach better quality.

WASH

- Regions affected by the CAR refugee crisis have low access to potable water (East: 54.4%, Adamawa: 69.8%) and basic sanitation (East: 21.9% and Adamawa: 64.2%).

- UNICEF is currently present in Mbile, Gado and Borgop refugee camps, and will start implementing activities in Ngam, and in Ndokayo refugee site and Yokadouma. 10,500 basic family water kits have been prepositioned, and to date **7,902 refugee families have received basic family water kits.**
- The current need estimated by UNHCR is 126 boreholes, 3,045 latrines and 2,315 showers in refugee's sites. A total of **488 latrines out of 700 planned and 311 showers out of 350 planned have been constructed, benefiting a total 15,000 refugees.** UNICEF is providing water to about 6,500 refugee through water trucking and the construction of 9 boreholes.
- 152 refugee's volunteers with UNICEF and UNHCR have been trained on water treatment by UNICEF staff and are now in charge of training and monitor water treatment at household in refugee sites.



HEALTH

- **Measles Response:** A joint response plan to control measles among CAR refugees was developed under the leadership of UNICEF. The second phase of the measles campaign, held from 11 to 16 July, resulted in the immunization of 108,000 children aged 6 months to 15 years, among which 41,000 were refugee children in Kette, Ndelele, Yokadouma and Garoua-Boulai health districts.
- **Polio Response** The objective of stopping the circulation of Wild Polio Virus by 30 July, 2014 has been hampered with the detection of two new cases the WPV Kette Health district of the East region in June and July within the refugee population. The evaluation of the 7th vaccination campaign against polio in 14 health districts and different input point refugees (JNVr / SASNIM June 2014) was completed.
Overall Results: 97% children 0-11 months and 125% of targeted children aged 0-59 months were vaccinated. Among refugee children, 83% of children 0-11 months and 105% of targeted children aged 0-59 months were vaccinated.
- **Supplies:** 2,000 LLINs will be distributed in the Gado site and 500 will be distributed in the Timangolo site. UNICEF has supplied the region of Adamawa with 51,000 doses of measles vaccine for the upcoming measles campaign, with an additional 150,000 doses stored in the East region.

EDUCATION

- The education response has begun in and around 5 refugee sites of Mbile, Lolo, Gado, Timangolo in the East region, and Borgop in the Adamawa region.
- UNICEF has established 30 Espaces temporaires d'Apprentissage et de Protection de l'Enfance (ETAPES) in partnership with PLAN Cameroon. By mid-august 22,500 refugee children (50% girls) aged 3 to 17 years will attend education in 87 ETAPES. 55 teachers are already active in the sites and 4,317 refugee children (2,150 in the site of Borgop and 2,167 in the site of Gado) have been screened. The establishment of ETAPES will reinforce the ongoing Child Protection response. The Back-to-School campaign being launched in August is an important opportunity to ensure that all children are in schools. Management committees of the ETAPES have been established in each of the 5 sites. Orientation on roles and responsibilities in terms of the control and monitoring of teacher attendance was conducted in Mbile, Lolo and Borgop sites. 36 animators (16 for East Region and 20 for the Adamawa Region) have been recruited to work with pre-school children and have received training on Education Awareness Raising.
- More than 20 stakeholders from Cameroon took part in the CAR + workshop on the situation of education for children affected by CAR Crisis, co-hosted by UNICEF WCARO and UNHCR HQ in Yaoundé 16 to 18 July. Partners have agreed on common strategic objectives for improved access and quality of education for CAR refugees and hosting communities. Recommendations from the workshop include the improvement of coordination on refugee education, improved information sharing on gaps and urgent areas of intervention, and improved advocacy for deployment of teachers to refugee affected areas.
- **Training of 66 volunteer teachers** from the East and Adamawa, organized by MINEDUB, UNICEF and PLAN Cameroon took place in Bertoua from July 7 to 12, with technical support from UNESCO and UNHCR. Teachers

were trained in education in emergencies and peace education, accelerated curriculum and taking psychosocial care and protection of children.

CHILD PROTECTION

Child Friendly Spaces –

- Child protection field activities are ongoing in Gado and Lolo sites with the NGO ASSEJA to support the resilience and well-being of affected children and their families, and to prevent violence. **40 Central African refugees are currently working in 8 child friendly spaces (4 in Gado and 4 in Lolo) through 12 social workers who have been trained** on child friendly space animation and basic psychosocial support for children. UNICEF is finalizing another partner agreement in order to lead the same activities in Borgop site.
- 2 Child protection committees are in place in the refugee sites, where they play an active role in violence prevention; religious and communities leaders are also involved in these activities.
- **To date, 134 unaccompanied children and 181 separated children have been identified and placed in foster families.** The reunification process is ongoing, but no immediate mechanism is in place to identify children outside the camp sites. Although children formerly associated with armed groups/forces (CAFAAG) are not yet identified amongst CAR children refugees, some CAFAAG coming from Chad are in the process of reunification in Cameroon through the ICRC. Development of standards operational procedures for family tracing and reunification are ongoing with UNHCR.
- Since **April 2014 7,728 refugee children are benefiting from a safe access to Child Friendly Spaces** in East region. This number will increase in coming weeks to 20 000 refugees' children with new cooperation agreement in process and joint effort of PLAN Cameroon. These Child friendly spaces which will gradually evolve to become ETAPes.
- **Approximately 1,249 community members, leaders and parents have been involved in sensitization and awareness** meeting on the prevention of violence and abuse of children
- 23 Child Protection stakeholders from HCR (3), IMC (2), Plan (3), Minas (1), Asseja (9), Croix rouge camerounaise (4), Minproff (1) have been trained on basic Child Protection in Emergencies and psychosocial responses to improve quality of services delivery for children in East and Adamawa region. Mapping of actors involved in CPIE responses and activities for refugees has been done.
- 118 vulnerable children identified received appropriate care or have been referred (69 cases of diseases, 10 malnourished children, 13 children with disabilities, 10 cases of physical violence, 9 children with psychological support needs, 1 child in process to be trafficked, 3 children victims of exploitation, 5 cases of early marriage.

HIV/AIDS

- Case Management- 310 out of 562 HIV+ Pregnant women received at ANC among 1,245 expected are on ARVs
- 178 children suffering from Acute Severe Malnutrition were tested for HIV with the 15 who tested HIV+ referred to the approved treatment centre for treatment, care and support
- Training - 160 supervisor peer educators and 24 Educative Team members have been trained on peer education, HIV/STI prevention, risk and vulnerability mapping, behaviour analysis and Life skills
- Sensitization- **22,500 adolescents and youths in and out of the camps sensitized on HIV/STI prevention** by the peer educators and amongst those sensitized 2,349 did their HIV test and know their serological status. The 44 HIV positive young people tested positive (75% girls) were referred to the approved treatment centre for treatment, care and support. Until now 10 community radio programmes on HIV prevention are being broadcasted in Gado, Garoua Boulai, Adamawa and Batouri to reach refugees and surrounding communities with focus on prevention messages and how to access services.

INNOVATION LAB

UNICEF has initiated the use of an innovative data collection method for need assessment and monitoring of emergency response through mobile phones, which had been pilot-tested and pre-positioned for such an emergency. Data collection includes GPS locations, and major points of interest are automatically referenced on an online map accessible at: <http://carcrisis.unicef-gis.org>

RESPONSE TO THE SAHEL NUTRITION CRISIS

UNICEF support to the Sahel Nutrition response continues through its Maroua Field office. Among SAM cases targeted, **27,436 have been admitted in outpatient and inpatient centers.** As part of the 'WASH in NUT' response strategy **7,719 WASH Kits have been distributed** this year to families with SAM children.

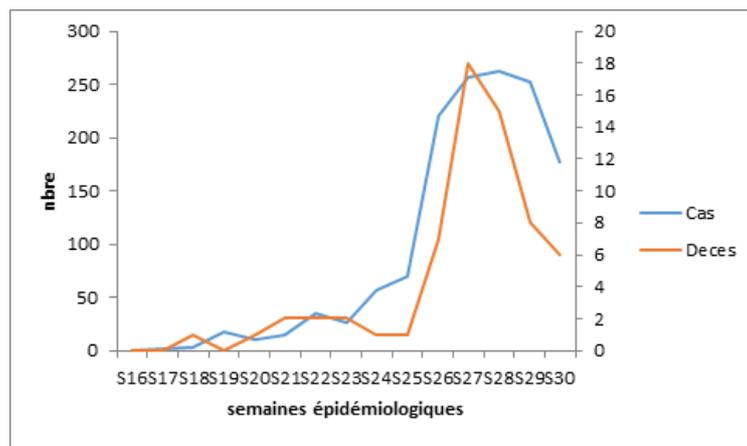
After completion of the training on revised national protocol which has targeted 829 health workers and 66 health district, the formative supervisions for follow-up have started up since June 2014. They are done at regional level to supervise the health district and at health district level to supervise health centers activities.

The new database for data collection has been implemented and additional field training is needed to improve its use. Looking at performance rates, the main issue is still defaulting for OTPs (up to 30 %), with a common reasons given long distance, other interest for the caretakers, stock out at health centers level, workload of the health staff (immunization campaign, trainings...). General supply distribution is ongoing in North and Far North including anthropometric materials replacement.

A joint formative supervision was organized in the Health Districts of Kar Hay and Moutourwa with the head of Health district.

CHOLERA RESPONSE

- In 2014, **1498 cases of cholera have been reported at the national level with 75 deaths**. 94% of all cases and 100% of deaths have been reported in the North and Far North region.
- UNICEF is supporting the MoH communication for cholera cross-border alert in high risk districts with Chad still without reported cases to date.
- As response, UNICEF supported 14 training session (525 health staffs targeted) in the far North region on cholera management and prevention. The same training is currently ongoing in for health staff for health district hosting refugees in the East region (167 health staff already trained).
- WASH items have been pre-positioned in affected health areas and the "Sword and Shield" implementation strategy has been operationalized in the affected health district of the Far North region (Mogode, Bourha, Hina, Mokolo et Roua) and North region (Touboro, Mayo Oulo and Guider). About 303 community (202 in far North and 101 in the North) relay are mobilized for cholera response. This include community sensitization and affected household disinfection.



RESPONSE TO NIGERIAN REFUGEES

NUTRITION

- For the new arrived refugees, a screening and active case finding of severe acute malnutrition was done in Minawao Camp on 11th and 17th , which reported that 6.3% of screened children (n=36/569) suffer from severe acute malnutrition and 16.2% (n=92/569) suffer from moderate acute malnutrition. All these 36 SAM and 92 MAM children were referred to the Outpatient centre (OPC) of Gadala and are receiving treatment with therapeutic foods and drugs. Five SAM children have recovered this month.
- Nutritional situation of Nigerian refugee population in Far North remains alarming, thus it is critical to continue with screening and case management. Close coordination of activities is ensured through the coordination between UNICEF, French Red Cross and International Medical Corps
- Door to door screening has resumed and as well as massive screening campaign (the last one on the 30th July). Case management is effective with technical monitoring at Gadala OTP.

WASH

- Whereas 04 cholera cases 01 death were reported within the settlement camp of Manawao, UNICEF continues to work closely with the Government in central and regional level in response through essential supplies on case management, water and sanitation and in community awareness creation.
- The infrastructures put in place in the camp of refugees Minawao (119 latrines and distribution of 77,500 litres per day) allows for 51 people to have access to one latrine and one people to have access to 12 litres of drinking water by day. These figures are under those recommended by SPHERE standards.
- Continuation of the activities of sensitization on cholera prevention and adoption of WASH best practices in the affected districts.

HEALTH

- The routine immunization is made in the camp. Among the newly arrived refugees, children (6 months-15 years) were not vaccinated against measles due to lack of vaccine.
- UNICEF has provided the health post for refugee at Minawao camp including medicines, medical consumables for the management of current cases of childhood illnesses and 50 family baby kit
- All children under 5 years in the refugee camp of Minawao were vaccinated against polio during the 6 rounds of NIDs

CHILD PROTECTION

- A monitoring mission was undertaken in July 2014 to assess the implementation of child protection activities in Minawao camp. Base on key findings a new project agreement is developed with ALDEPA our local partner to continuous support child protection intervention in this camp.
- Till date, 880 children actively participated in recreational activities. They also involves in talking clubs put in place by age groups ; 2110 women and men sensitized on violence prevention and peace. 4 child protection committees are in place inside the Minawao camp and inside two bordering villages (Gadala and Gawar). They are acting in community awareness on harmful practices as well as violence prevention ;
- Several cases of violence identified or reported received appropriate care. They are related to 2 early marriage, 14 cases of physical and psychological violence, 5 sexual abuses, 10 cases of neglect and 15 sexual harassment.
- 17 Unaccompanied asylum seeking children - UASC are identified in Minawao camp within the new arrival refugees groups.
- More attention need to be paid to peaceful coexistence between Muslim and Christian communities living in the camps.

Communications for Development (C4D)

To support the Polio National Immunization Days (NIDs), briefing sessions to C4D focal points were organized at the National and Regional levels. The trainers in interpersonal communication for polio eradication trained in June have trained Health District Communication focal points of 4 regions. The training continued in cascade in the health areas of the 4 regions. Key messages have been designed and sent to field supervisors of the NID to focus on link between polio spread and hygiene and the vulnerability of adults to polio.

Supply and Logistics

This month, 244,890 USD of supplies were sent to implementing partners, and distribution to beneficiaries is ongoing.

- Education: 98,577 USD (Classroom supplies)
- Nutrition: 48,313 USD (Shelter & field equipment, therapeutic milk)
- WASH: 98,008 USD (Water & Hygiene kits)

Media and External Communication

In partnership with journalists of the REJAE (the child-friendly journalist's network) 3 journalists from cyber and print media covered the visit of the UNICEF WCARO RD to Cameroon (East region - Gado CAR refugee's site and Garoua Boulai Health centre). More than 10 papers carried the reports of Regional Director's meetings with the Minister of Public Health, the Prime Minister, and the President of the National Assembly and the Secretary General of the presidency.

Security

- Security in the Far North region bordering Nigeria is threatened by the sudden escalation of security incidents, particularly targeted kidnappings by Boko Haram. The number of security incidents has reached 36 in 2013-14 – up from 20 in 2011 and 2012 and 23 in the 2012-1013. Since May 2014 the situation seems to be worsening as the number of attacks are increasing by the day.
- The IASMT in Cameroon decided recently that missions of UN Staff outside Maroua should be limited. Due to the insecure environment, most of NGOs have issued advisories to leave Far North region.

Funding

Based on the country's inter-agency 2014 Strategic Response Plan and increased needs, UNICEF is requesting US\$ 22,978,817 to meet the humanitarian needs of children in Cameroon in 2014. In a context of multiple emergencies with a high level of refugee influx due to violence and insecurity in neighbouring countries and an ongoing nutrition crisis, without sufficient funding, UNICEF will be unable to support the national response to the country's ongoing complex humanitarian and protection crisis. WASH, nutrition and health supplies are urgently needed to uphold children's rights to critical basic services.

UNICEF Cameroon 2014 HAC and CAR Refugee Needs				
Sector	Total 2014 Requirements*	Funds available	Funding gap	
			\$	%
Nutrition	4,108,600	1,137,244	2,971,356	72%
Health/HIV	3,558,600	1,130,604	2,427,996	68%
WASH	8,193,738	1,206,775	6,986,963	85%
Education	3,807,929	1,150,000	2,657,929	70%
Child Protection	3,310,000	390,000	2,920,000	88%
Total**	22,978,867	5,014,623	17,964,244	78%

* Total HAC 2014 and revised SRP requirements, including joint appeal for CAR refugee response as of April 2014; current harmonized ceiling in play. All figures remain provisional to further revisions of CAR Regional Response Plan and SRP/HAC.

** PSC amounts in the SRP are included in the SRP project sheets per sector and are part of the total amounts of sector asks.

Next SitRep: September 2014

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ANNEX A: SUMMARY OF PROGRAMME RESULTS

	Sector Response			UNICEF		
	2014 Target	Total Results	% Achieved July 2014	2014 Target	Total Results	% Achieved July 2014
SAHEL NUTRITION CRISIS						
# of children <5 with Severe Acute Malnutrition admitted to Therapeutic care	48,778	27,436	56%	48,778	27,436	56%
Number of affected families (SAM, IDP) who received a wash kits with key hygiene messages	50,000	7,719	15%	44,000	7,719	18%
Number of people who have access to appropriate basic sanitation facilities (latrines)*	160,000	17,000	11%	145,000	17,000	12%
# of children under one immunized against measles for routine immunization (January -May 2014)	235,222	72,038	31%	206,995	72,038	35%
CAR REFUGEE RESPONSE						
# of children <5 with Severe Acute Malnutrition admitted to Therapeutic care**	7,855	3,786	48%	7,855	3,786	48%
Number of affected families who received a wash kits with key hygiene messages	16,000	7,902	49%	10,000	7,902	79%
Number of people who have access to appropriate basic sanitation facilities (latrines)	80,000	34,011	42%	30,000	18,242	60%
# of children 9 months -15 years immunized against measles in Adamawa and East regions	84,000	55,285	66%	84,000	55,285	66%
# of children accessing psycho-social support	30,000	7,745	26%	16,000	7,745	48%
# of UASC identified and receiving appropriate care	67	67	100%	67	67	100%