Central African Republic
Humanitarian Situation Report

Highlights

- November was marked by the attack and burning of two IDP sites by armed groups, Batangafo (Ouham, Northwest) on 31 October – 1 November, and Alindao (Basse Kotto) on 15 November, causing several deaths, over 40,000 re-displaced people, widespread material damage and heightened tensions.

- With acute needs, and in the absence of available partners in Education and Child Protection, UNICEF used its newly tested blended approach (partners & direct intervention) to directly responded in these sectors in Batangafo. Within three weeks, despite a highly volatile context, the town’s four schools were reopened and 4,127 children could return to school. Two child-friendly spaces were operational for more than 1,500 traumatized children. At the same time, the Rapid Response Mechanism (RRM), in coordination with other NFI cluster actors, distributed 3,108 NFI kits to IDPs who lost shelter in Batangafo.


UNICEF's Response with Partners

<table>
<thead>
<tr>
<th>Key Programme Indicators</th>
<th>Sector/Cluster</th>
<th>UNICEF</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Cluster Target</td>
<td>UNICEF Target</td>
</tr>
<tr>
<td><strong>WASH:</strong> Number of affected people provided with access to improved sources of water as per agreed standards</td>
<td>900,000</td>
<td>699,000</td>
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<tr>
<td><strong>Education:</strong> Number of Children (boys and girls 3-17yrs) in areas affected by crisis accessing education</td>
<td>94,400</td>
<td>81,868</td>
</tr>
<tr>
<td><strong>Health:</strong> Number of children under 5 in IDP sites and enclaves with access to essential health services and medicines</td>
<td>N/A</td>
<td>500,000</td>
</tr>
<tr>
<td><strong>Nutrition:</strong> Number of children aged 6-59 months with SAM admitted for therapeutic care</td>
<td>27,961</td>
<td>29,222</td>
</tr>
<tr>
<td><strong>Child Protection:</strong> Children (boys and girls) released from armed forces and armed groups who participate in a community reintegration programme</td>
<td>4,874</td>
<td>880</td>
</tr>
</tbody>
</table>

1.5 million
# of children in need of humanitarian assistance

2.9 million
# of people in need
(OCHA, October 2018)

643,000
# of Internally displaced persons
(OCHA, October 2018)

Outside CAR

575,000
# of registered CAR refugees
(OCHA, October 2018)

2018 UNICEF Appeal
US$ 56.5 million

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# of registered CAR refugees
(OCHA, October 2018)

2018 UNICEF Appeal
US$ 56.5 million

Funding status* ($US)

Funding Gap
$30,225,507

Funds received:
27,018,463

2018 funding requirement:
$56.5M

Carry-forward:
$4,913,082

*Funds available include funding received for the current appeal year as well as the carry-forward from the previous year.
Situation Overview & Humanitarian Needs

In November, the humanitarian crisis in the Central African Republic (CAR) continued deteriorating, and was marked by the attack of two IDP sites by armed groups, resulting in casualties, widespread material damage and heightened tensions.

On 31 October and 1 November, two armed groups attacked and set on fire the Batangafo IDP site (Ouham, Northwest) killing four IDPs and provoking the displacement of 27,000 IDPs sheltered in the site. The site’s WASH infrastructures, market and temporary learning spaces (TLS) and child friendly spaces (CFS) for IDP children were also destroyed.

UNICEF CAR used the information gathered through the assessments conducted by the Rapid Response Mechanism (RRM) to identify Education, Child Protection, CDS, SAM and WASH needs and quickly prepare a response. In the case of Batangafo, this response was conducted directly by UNICEF in Child Protection, Education, Nutrition screening and immunization. As a result, only three weeks after the alert, despite the highly volatile context, the town’s four schools were reopened and 4,127 children could return to school. Two child-friendly spaces were operational and benefitted more than 1,500 traumatized children. At the same time, the Rapid Response Mechanism (RRM), in coordination with other NFI cluster actors, distributed 3,108 NFI kits to IDPs who lost shelter in Batangafo.

Just two weeks after the Batangafo events, on 15 November, another armed group attacked the Catholic Mission IDP site in Alindao (Basse Kotto, Center). According to UN sources, several dozen people (exact number unclear) were killed, and most of the camp’s infrastructure destroyed. Nearly 20,000 people were affected and thousands were forced to flee. UNICEF participated in a joint humanitarian assessment mission. At the end of November, the situation was still too unclear to allow humanitarian actors to intervene.

Humanitarian Leadership and Coordination

UNICEF is a member of the Humanitarian Country Team (HCT), UN Country Team (UNCT), Security Management Team (SMT). UNICEF also participates in the MINUSCA coordination mechanisms such as the Senior Management Group for Protection (SMGP) and the Protection from sexual exploitation and abuse Task Force (PSEA TF) to facilitate the delivery of humanitarian assistance. UNICEF leads WASH, Nutrition, Education Clusters and Child Protection Sub-Cluster. The Government is an active member of the WASH, Nutrition and Education Clusters and Child Protection Sub-Cluster. The national Child Protection Sub-Cluster covers all prefectures directly or indirectly. Nutrition is paired with health and works through three Sub-Clusters at the regional level. The Education and WASH Clusters are also functional at the regional level. At the Cluster level, UNICEF is an active member of the Health Cluster and, via the Rapid Response Mechanism (RRM) coordinator, of the Shelter/NFI/Camp Management Cluster. Moreover, UNICEF hosts and coordinates the Rapid Response Mechanism (RRM). The RRM Coordinator is a member of the Inter-Cluster Coordination team (ICC) which enables efficient coordination between the RRM program and the humanitarian community. Finally, the Cash Working Group, led by OCHA has recently been reactivated and UNICEF participates actively.

Humanitarian Strategy

Working with partners based in the country’s most troubled areas, and using prepositioned essential supplies, UNICEF prioritizes child centered life-saving interventions and risk reduction for crisis-affected, displaced and returning people in CAR. The Rapid Response Mechanism (RRM) led by UNICEF carries out multi-sector assessments on new crises, provides non-food items and water, sanitation and hygiene support to vulnerable people newly affected by shocks, and coordinates with external actors to ensure complementary responses in other essential sectors. The mechanism also provides UNICEF and partners with quick and reliable information on the affected populations needs. This allows UNICEF to mobilize partners so as to addresses preventable childhood illnesses, malaria, HIV and malnutrition, and provides people with access to safe water and improved sanitation facilities. UNICEF focuses on protection needs of children, including their release from armed groups and their reunification with their families when separated or unaccompanied, and provides the appropriate psychosocial support to children affected by the conflict. UNICEF contributes to providing out of school children with access to safe learning spaces and quality education.

UNICEF works with line ministries to reinforce the Government capacity in the humanitarian coordination, leadership and response. In coordination with UNICEF regular programmes, the emergency responses contribute day to day in increasing people’s access to basic services. Therefore, UNICEF aims at ensuring the best linkage between its
humanitarian and development mandates and capacities to ensure the most effective synergy between its emergency and recovery programmes.

**Summary Analysis of Programme Response**

**Nutrition**
In 2018, UNICEF and partners planned to support 27,921 children affected by severe acute malnutrition (SAM) in CAR. As of the end of November the target is already reached, with 29,222 children admitted into outpatient therapeutic programmes and stabilization centres, reflecting the country’s preoccupying situation in terms of malnutrition. The SAM cure rate is at 89.71 per cent; death rate at 1.91 per cent; defaulter rate at 6.94 per cent and non-responding rate at 1.44 per cent.

Escalating violence in Batangafo and Alindao has steadily increased humanitarian needs and limited health workers access to deliver nutrition services. As a result, 13 service sites suspended operations in Batangafo and Alindao, and 261 children who were admitted for treatment in Alindao have abandoned the programme. Out of them, 177 (68%) have been retreated. In addition, UNICEF and WFP have increased provision of therapeutic foods and essential drugs in Batangafo and Alindao. UNICEF directly ensured malnutrition screening as part of its direct intervention in Batangafo.

Through Community-based Management of Acute Malnutrition (CMAM) activities, 22,987 children aged 6-59 months were screened countrywide for acute malnutrition. Out of them, 343 were treated for SAM. In addition, 1,838 other children aged 6-59 months received micronutrient supplementation and 999 received deworming capsules countrywide. In total, 6,111 pregnant and lactating women benefited from infant and young child feeding counselling (IYCF).

**WASH**
As of the end of November, UNICEF and partners had provided 122,000 crisis affected people with access to clean water (20% of the yearly target), and 64,700 with sanitation facilities (also 20% of target), reflecting the overall challenge in mobilizing funds to sustain humanitarian WASH activities in CAR, in particular on the country’s 80 IDP sites.

In November, new UNICEF-supported activities include the provision of water purification sachets for 1,500 IDPs re-displaced by the 15 November attack conducted by its partner, Action against Hunger. In Bria, the NGO Oxfam provided water for 37,977 IDPs on the PK3 site. UNICEF is also finalizing contractual arrangements to support Oxfam’s efforts to rebuild the destroyed WASH infrastructure on the Batangafo IDP site. Ongoing WASH activities on IDP sites have continued in Bangassou, Bambari and Kaga Bandoro.

UNICEF also contributed to ongoing efforts to prevent the further spreading of the Hepatitis E outbreak in Bocaranga by providing hygiene kits (soap, water purification sachet aquatab and PUR, jerrycans) to 1,000 households in Bouar, and in Bossangoa 1,731 households were sensitized on hand washing and good hygiene practices.

At the cluster level, the month was marked the continuing hepatitis E outbreak in Bocaranga with 59 new cases confirmed. From the beginning of the outbreak, 138 cases have been notified including 99 confirmed and 39 suspected. In coordination with the Health cluster, a task force was set-up to develop a response plan. Drinking water provision through water trucking, hygiene promotion and water points disinfection activities are ongoing in the field but more funds are needed to scale up interventions. In Alindao and Batangafo, cluster members have mobilized to rebuild WASH infrastructure, including water trucking system, hygiene promotion and provide water for 11,500 persons. Activities are ongoing in the field but more funds are needed to scale up interventions. Escalation of violence in Alindao and Batangafo has worsened the already deplorable situation of the population. In IDPs sites WASH infrastructures have been burned. Cluster members have been mobilized to rebuild the damaged infrastructure and address new needs.

**Health**
From January to November 2018, 54,062 children under 5 received preventive and curative care in conflict zones including Bambari, Alindao, Kaga-Bandoro, Bocaranga, Kouï and Ngaoundaye thanks to medical kits provided by UNICEF.
In November, The Ministry of Health with support from UNICEF and WHO organized Intensive Immunization Activities (AVI) for children aged 0-23 months in Bocaranga and Kouï. As a result, 6,984 children were vaccinated as followed: 1,048 against polio, 2,840 with pentavalent, 1,903 against measles and 1,185 against yellow fever. UNICEF also deployed a medical doctor to Batangafo following the IDP site attack in order to support the WHO emergency vaccination campaign and carry out malnutrition screening (as mentioned above).

HIV & AIDS
During the reporting period, 82 new HIV + pregnant women and 80 infants born to mothers living with HIV received antiretroviral treatment (ARV) in emergency zones (sanitary regions 3, 4, 5 and 6) with a data collection completion of 68%. These results were achieved following capacity-building activities conducted in those areas for four doctors and 70 paramedics on the integration of maternal and child health interventions, prevention of mother-to-infant transmission, the management of HIV infection and gender-based sexual violence cases.

Education
In November, following the attack on the Batangafo IDP site, classrooms were occupied by displaced persons and some school infrastructures, school furniture and material were destroyed. UNICEF staff, in collaboration with the emergency unit of the Ministry of Education, directly provided the first response, while mobilizing partners to take over. This resulted in the return to school of 4,127 mostly IDP children (42% girls) after two weeks of school interruption. The response targeted the town’s 4 schools and 4 temporary learning spaces in Lakouanga area and in the MINUSCA IDP site. It involved the provision of 270 School in a box, 30 tents, 30 recreation kits and 30 ECD kits, for about 12,000 children including preschool aged children.

In total, since the start of the year, 73,846 children affected by the crisis could continue their schooling with the set-up of 296 temporary learning spaces in the prefectures of Ouham-Pendé, Ouham, Ouaka, Nana Gribizi, Haute Kotto, Basse-Kotto, Mbomou, Haut-Mbomou and Ombella Mpoko.

Child Protection
The attack on the Batangafo IDP site resulted in acute child protection needs. In the absence of an immediately available partner, UNICEF deployed staff to directly implement the initial response, integrated with the education response mentioned above. Two Child Friendly Spaces (CFS) were set up to provide psychosocial and recreational activities to more than 1,500 traumatized children, and were then taken over by a child protection sub-cluster partner.

In total during the reporting period, 19,633 crisis-affected children, including 9,916 girls, were newly registered in CFS to benefit from psychosocial, recreational and educational activities in 10 prefectures across the country and Bangui. These CFS are operated either by UNICEF partners AFRDB Esperance, Caritas Bangui and War Child (8,252 children including 4,350 girls) or by sub-cluster members Plan International and ESF (11,381 children including 5,566 girls).

In November, 196 unaccompanied and separated children, including 41 girls, were newly registered by UNICEF partners in 6 prefectures and Bangui. These children are assisted through foster families while family tracing to find their biological families is being carried out. In Ouaka and Lobaye prefectures, UNICEF and its partner NGOs, Esperance and AFEB also released 11 children, all boys, from two armed groups.

A total of 334 cases of gender based violence (GBV) against girls and boys, including 22 cases of rape, 12 child marriages and 300 other cases of GBV were registered and documented in the prefectures of Bamingui-Bangoran, Haute-Kotto, Ouaka, Basse-Kotto, Ouham-Pende and Bangui. These children received assistance, including medical assistance, psychosocial support and hygiene kits.

Rapid Response Mechanism (RRM)
In November, UNICEF and its RRM implementation partners (Action Contre la Faim, ACTED and Solidarités International) received 6 new alerts in the North West (Ouham Pende and Ouham, Center (Nana-Gribizi) and South East (Basse-Kotto, Mbomou and Haut-Mbomou). The most significant were the attacks on the Batangafo and Alindao IDP sites, already mentioned in the situation overview.
In Batangafo, in coordination with other NFI cluster partners, the RRM assisted 3,106 IDP households whose shelters had been burned by armed groups, and who had temporarily found refuge in hospitals, schools, churches and aid organizations’ compounds. In Alindao, despite significant needs identified following the systematic attack and burning of the shelters of the displaced persons’ camp of the Catholic Church by the armed group, which pushed thousands of IDPs to other sites, the security situation and do no harm concerns have not permitted an intervention yet.

Following the feasibility study conducted in Kabo (Ouham, Northwest) last October, Solidarités International carried out the RRM’s first humanitarian cash transfer intervention, as a complement to the initial distribution of light NFI kits. On 3 November, 2,234 households affected by flash floods in various districts of Kabo in August 2018 received unconditional cash assistance, for a total amount of 99,000 USD, amounting to an average 44 USD per household. Initial monitoring showed a high level of satisfaction among beneficiaries and an increase in the volume of activity on the Kabo market. In the absence of financial services in Kabo, the RRM resorted to the services of a local trader to distribute the cash. The intervention showed that humanitarian cash transfers can be possible in conflict-affected areas of CAR, under certain circumstances and when carefully planned and implemented.

Media and External Communication

During the reporting period, the External Communication team supported the launch of the CAR Child Alert report, *Crisis in the Central African Republic*, on 30 November. Before the launch, the team organised field visits for French media Liberation and France 24. The launch happened through a briefing in Geneva, where UNICEF CAR Representative and Senior Media Advisor briefed the Palais des Nations’ press corps. The Child Alert was echoed in major global media, including:

- **Centrafrique**: 1,5 million d’enfants ont besoin d’aide humanitaire (AFP Français)
- **La situation des enfants en RCA**: France Culture 7 am News (starting at 10’45) Soundbite
- **Une aide urgente nécessaire pour 2 enfants sur 3 en Centrafrique** (RTL Belgium)
- **UNICEF: More than 1.5 million children in CAR need emergency aid** (Al Jazeera)
- **“My babies need to eat”: children enveloped by crisis in CAR – in pictures** (The Guardian Global Development)
- **Children suffering in Central African Republic 5 years on** (AP)
- **Rising numbers of skeletal children as Central African Republic violence surges** (Reuters)
- **1.5 million children in Central Africa need aid: UN** (AFP English)
- **UNICEF: Children in CAR face lives of desperation, deprivation** (VOA)
- **UNICEF alert of children’s plight in Central African Republic** (DW)
- **Central African Republic Children Need Aid** (Bloomberg, using our b-roll)
- **UNICEF says CAR crisis grossly overlooked** (RFI)
- **Zentralafrikanische republik: 1.5 millionen kinder laut UNICEF auf hilfe angeweisen** (DPA)
- **Los niños de RCA pagan el precio del abandono internacional ante la crisis en el pais** (Europapress)
- **Vernachlässigte Krise: Kinder leiden unter Hunger und Gewalt** (OTS Austria)
- **Unicef slaat alarm over lot kinderen in Centraal-Afrikaanse Republiek** (NOS Netherlands)

UNICEF CAR’s Chief of communication was also interviewed by BBC World radio and TV (Focus on Africa)

**Funding**

UNICEF wishes to express its deep gratitude to donors for the contributions and pledges received, which have made the current response possible. Most recently, generous funding supports was received from OCHA’s Central Emergency Response Fund, OFDA and UNICEF’s Global Thematic Humanitarian Fund. With the spread of conflicts leading to more displaced children and families in new areas, continued donor support is critical.

<table>
<thead>
<tr>
<th>Appeal Sector</th>
<th>Requirements</th>
<th>Funds available*</th>
<th>Funding gap</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Funds Received</td>
<td>Carry-Over</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Current Year</td>
<td></td>
</tr>
<tr>
<td>Nutrition</td>
<td>7,800,000</td>
<td>5,493,556</td>
<td>156,576</td>
</tr>
<tr>
<td>Health &amp; HIV/AIDS</td>
<td>9,000,000</td>
<td>-</td>
<td>59,240</td>
</tr>
<tr>
<td>Water, Sanitation, Hygiene</td>
<td>9,600,000</td>
<td>1,271,736</td>
<td>488,711</td>
</tr>
<tr>
<td>Category</td>
<td>Funding Received</td>
<td>Expenditure</td>
<td>Remaining</td>
</tr>
<tr>
<td>--------------------------------</td>
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<td>-------------</td>
<td>-----------</td>
</tr>
<tr>
<td>Child Protection</td>
<td>8,900,000</td>
<td>3,168,331</td>
<td>377,766</td>
</tr>
<tr>
<td>Education</td>
<td>8,000,000</td>
<td>3,002,526</td>
<td>256,051</td>
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<tr>
<td>Rapid Response Mechanism</td>
<td>11,700,000</td>
<td>13,782,314</td>
<td>3,574,739</td>
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<tr>
<td>Cluster/sector Coordination</td>
<td>1,500,000</td>
<td>300,000</td>
<td>-</td>
</tr>
<tr>
<td>Total</td>
<td>56,500,000</td>
<td>27,018,463</td>
<td>4,913,082</td>
</tr>
</tbody>
</table>

* Funds available includes funding received against current appeal as well as carry-forward from the previous year.

UNICEF CAR: [www.unicef.org/infobycountry/CAR.html](http://www.unicef.org/infobycountry/CAR.html)
UNICEF CAR Facebook: [www.facebook.com/UNICEFCAR](http://www.facebook.com/UNICEFCAR)
UNICEF CAR Twitter: [https://twitter.com/UNICEF_CAR](https://twitter.com/UNICEF_CAR)

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  - Central African Republic
  - Tel: +236 7007 5710
  - Email: ocurbet@unicef.org
## SUMMARY OF PROGRAMME RESULTS

### NUTRITION

<table>
<thead>
<tr>
<th>Cluster and UNICEF results are the same as UNICEF is the sole provider of therapeutic nutritional inputs in CAR for all partners</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall needs</td>
</tr>
<tr>
<td>Children aged 6-59 months with Severe Acute Malnutrition (SAM) admitted for therapeutic care</td>
</tr>
<tr>
<td>Recovery rate (%)</td>
</tr>
<tr>
<td>Caregivers of children reached with infant and young child feeding counselling</td>
</tr>
</tbody>
</table>

### HEALTH

<table>
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<tbody>
<tr>
<td>Children under 5 vaccinated against polio</td>
</tr>
<tr>
<td>People and children under 5 in IDP sites and enclaves with access to essential health services and medicines.</td>
</tr>
</tbody>
</table>

### WATER, SANITATION & HYGIENE

<table>
<thead>
<tr>
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<tbody>
<tr>
<td>Crisis-affected people with access to safe water for drinking, cooking and personal hygiene</td>
</tr>
<tr>
<td>Crisis-affected people accessing appropriate sanitation facilities</td>
</tr>
<tr>
<td>Crisis-affected girls/women accessing menstrual hygiene management services</td>
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</table>

### CHILD PROTECTION

<table>
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<tbody>
<tr>
<td>Children reached with psychosocial support through child friendly spaces</td>
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<tr>
<td>Children released from armed forces/groups reached with reintegration support</td>
</tr>
<tr>
<td>Registered unaccompanied/ separated children supported with reunification services</td>
</tr>
<tr>
<td>Women and children reached with gender-based violence prevention and response interventions</td>
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</tbody>
</table>

### EDUCATION

<table>
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<tbody>
<tr>
<td>Number of Children (boys and girls 3-17yrs) in areas affected by crisis accessing education</td>
</tr>
<tr>
<td>Children received learning materials</td>
</tr>
<tr>
<td>Children (boys and girls 3-17yrs) attending school in a class led by a teacher trained in psychosocial support</td>
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</tbody>
</table>

### RAPID RESPONSE MECHANISM

<table>
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<tbody>
<tr>
<td>Acutely vulnerable people rapidly provided with non-food items after a shock</td>
</tr>
<tr>
<td>Affected people receiving appropriate WASH interventions after a shock</td>
</tr>
</tbody>
</table>

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1. Cluster and UNICEF results are the same as UNICEF is the sole provider of therapeutic nutritional inputs in CAR for all partners.
2. In total in 2018, as of November, 1,571 children including 210 girls were released and reintegrated. These figures include 756 children released in 2017.