

UNICEF HUMANITARIAN ACTION CENTRAL AFRICAN REPUBLIC IN 2007



CORE COUNTRY DATA

Population under 18 (thousands)	2021
U5 mortality rate	220
Infant mortality rate	132
Maternal mortality ratio (1990-2005, reported)	1355
Primary school enrolment ratio, 2000-2005, net (male/female)	44.3/36.9
% U1 fully immunized (DPT)	25.7
% population using improved drinking water sources	47
Estimated no. of people (all ages) living with HIV, 2005 (thousands)	540
% U5 suffering from moderate and severe underweight	37

Source: General Census on Population and Housing 2003

Summary of UNICEF financial needs for 2007

Sector	US\$
Health and nutrition	6,967,485
Water and environmental sanitation	2,167,000
Education	2,641,295
Child protection	711,240
Non-food items/shelter	775,750
Total*	13,262,770

*The total includes a maximum recovery rate of 7 per cent. The actual recovery rate on contributions will be calculated in accordance with UNICEF Executive Board Decision 2006/7 dated 9 June 2006.

1. CRITICAL ISSUES FOR CHILDREN

The Central African Republic (CAR) remains a precarious environment for children. The humanitarian crisis in Africa's most forgotten nation persists after a decade-long armed conflict. With the persistence of armed groups and increasing banditry in the North, the impact of crises in Chad, Democratic Republic of the Congo, Darfur and Southern Sudan, an extremely difficult institutional environment and a very low international presence, the country remains on the edge of a generalized armed conflict and humanitarian crisis. More than 1 million people are considered to be highly vulnerable due to disease, malnutrition and insecurity. Since January 2006, some 150,000 people have been forced to flee their homes, including 30,000 additional refugees into Chad, because of heightened insecurity in the North and North-West. Some 200,000 persons are internally displaced, mainly women and children, of which more than half are children. Likewise, the number of persons fleeing to Chad and Cameroon has also increased.

The State is unable to deploy in, or to effectively police, the territory. The lack of a judicial system severely impacts on the protection of civilians, with the military often relied upon to enforce the law. There is a desperate need of protection, basic health, nutrition, water and sanitation services, education as well as food and non-food aid. The situation continues to worsen: if no additional aid is provided soon, more people risk death or displacement.

Widespread human rights violations continue to be perpetrated on local populations by military forces and armed groups. Looting of entire villages, forced displacement, child kidnapping, child recruitment, abuse and sexual violence have become commonplace. With almost total silence and impunity, massacres of civilian populations have occurred in Paoua, in the road axes villages, and the insecurity is increasing. Banditry and fighting have suddenly resumed, notably in Nana-Grbzi, Bamingui-Bangoran, Vakaga, Ouham and Ouham Pendé. Some areas of the Vakaga region are under rebels' control as from June 2006, including its capital which was seized on 30 October.

Indicators have deteriorated with, for example, under-five mortality increasing from 157 deaths per 1,000 live births in 1995 to 220 in 2003, meaning that more than one child out of five does not live to see his/her fifth birthday, and that every 30 minutes a child dies due to vaccine-preventable diseases, inadequate nutrition, or lack of safe water. Likewise, maternal mortality has increased from 683 deaths per 100,000 live births in 1988 to 1,355 in 2003 (one of the highest in the world), meaning that every six minutes a woman dies from birth-related causes. In the last 10 years, Central Africans' life expectancy has decreased half a year every 12 months, with 38 the average life expectancy in 2007. Acute malnutrition has reached 4.7 per cent (2.9 per cent to 7.2 per cent) and chronic malnutrition stands at 29.5 per cent (25.3 per cent to 33.9 per cent). WFP reports that the food security situation in the North-West and North-East (prefectures of Ouham Ouham-Pende and Vakaga), already very fragile, has worsened during the lean season. The percentage of people living below the poverty threshold has increased from 63 per cent in 1993 to 71 per cent in 2003 (81 per cent of women and 69 per cent of men in rural areas).

Insecurity, weak institutional capacity and corruption constitute an unfavourable policy climate for children. Prior to the conflict, school facilities were already scarce; now, it is estimated that one third of the existing school buildings have been destroyed as a direct result of the ongoing conflict. Furthermore, benches and other school equipment have been stolen or damaged. Most teachers have fled.

The country has the highest HIV prevalence rate in Central and West Africa: 15 per cent according to 2002 official figures. This is resulting in an increasing number of orphans and other vulnerable children (OVC) affected by HIV/AIDS, including 140,000 orphans due to AIDS, 24,000 children living with HIV and more than 6,000 OVC living in the streets. The group aged 15-24 years is the most vulnerable and girls are five times more likely to become infected than boys. Only 2 per cent of children who are infected receive care and treatment, and only 2.8 per cent of orphans benefit from external support.

2. KEY ACTIONS AND ACHIEVEMENTS IN 2006

In close collaboration with local, national and international partners including international NGOs, such as Médecins sans Frontières (MSF) - Holland/France/Spain, Cooperazione Internazionale (COOPI) and International Partnership for Human Development, UNICEF has continued to respond to the humanitarian needs of the Central African population. Actions have been focused mainly on the priority areas of health, nutrition, HIV/AIDS, water and sanitation, education and child protection. However, increasing and persisting insecurity in the northern part of the country hampered the achievement of expected results.

In an effort to restore expanded programme on immunization (EPI) activities, UNICEF, in close collaboration with WHO, supported three immunization campaigns, administered de-worming tablets to 322,852 under-five children and vitamin A to 393,908 under-five children and distributed 154,000 mosquito nets. High levels of immunization coverage (85 per cent for DT3 and 95 per cent for measles by end 2006) were achieved during these campaigns.

To revitalize primary health care, UNICEF contributed to the prevention and treatment of malaria through the provision of generic essential drugs. Refrigerators and one generator, as well as logistic support, were provided to the areas of Paoua and Markounda to assist internally displaced populations. In water and sanitation, UNICEF helped improve access to safe drinking water and latrines in the prefecture of Ouham Pende and sub-prefecture of Markounda. UNICEF signed a project cooperation agreement with International Partnership for Human Development for the rehabilitation of 150 handpumps enabling 90,000 persons to access safe drinking water and for the construction of latrines for 2,000 households.

In August 2005, in close collaboration with WHO and the NGO Foyer de Charité, UNICEF supported a nutrition survey in the former conflict zone, Bangui and Lobaye, to assess the nutritional status of under-five children. Data were validated in January 2006 with the support of the NGO Action contre la Faim and a therapeutic feeding centre for severely malnourished children was opened in Bangui. The centre has been able to treat 75 under-five children since the month of August, with the help of UNICEF. Three additional therapeutic feeding centres and ten supplementary feeding centres were operational before the end of 2006 with the assistance of Action contre la Faim.

In the area of education, UNICEF continued to invest in the conflict-affected areas: 5,000 wooden school benches were supplied to carry on with the replacement of the 55,000 benches destroyed or stolen during the conflict; construction materials and technical advice were provided for community school construction projects, along with school kits for 10,000 pupils; 447 teachers were trained; two vehicles and four motorcycles were supplied to the districts to further strengthen the technical and operational capacity of the Ministry of Education. Unfortunately, up to reporting date, the Ministry of Education has not been able to provide updated records on primary education.

In close collaboration with other UN agencies and within the framework of UNAIDS, UNICEF supported government efforts to adequately respond to the AIDS crisis in the country. Three youth-friendly information, education and counselling centre are now operational in Bangui. Young people are being involved in activities aiming to reduce their vulnerability to HIV/AIDS and other sexually transmitted infections.

3. PLANNED HUMANITARIAN ACTION FOR 2007

Coordination and partnership

UNICEF is an active member of the UN Country Team and is represented in all planning and coordination events. UNICEF participates in UN Thematic Group Meetings supporting the Government in the different sectors assisted by UN agencies. UNICEF leads the education, non-food items and water and sanitation sector coordination groups; it co-leads the protection sector with UNHCR, and contributes to the health and nutrition sectors. It participates in the Inter-Agency Coordination Group with other UN agencies, NGOs and bilateral agencies and also attends other national coordination meetings in the areas of health, education and child protection.

Regular programme

UNICEF played a key role in the 2004-2006 United Nations Development Assistance Framework (UNDAF) review process and in 2007-2011 UNDAF initiation and development, ensuring that children's and women's needs and rights are adequately addressed by the entire UN Country Team and others. The new Country Programme Document is aligned with the priorities of the new Medium-Term Strategic Plan and the Millennium Development Goals – girls' education; child survival and development; HIV/AIDS; child protection; and advocacy and social policy.

Health and nutrition (US\$ 6,967,485)

Expanded programme on immunization (EPI) (US\$ 2,011,600)

Some 389,730 under-five children and 550,207 lactating women will benefit from the following activities:

- Support the organization of local measles campaigns;
- Support the organization of local maternal and neonatal tetanus elimination campaigns;
- Organize outreach activities to boost routine EPI coverage;
- Set up an effective EPI monitoring system;
- Support communication activities to increase demand for services.

Integrated Management of Childhood Illness (IMCI) (US\$ 2,975,850)

Some 389,730 under-five children will be targeted through the following activities:

- Provide family- and community-based care: promotion of health/nutrition practices; use of long-lasting insecticidal nets (LLINs); infant and young children feeding practices; community-based management of malaria, pneumonia, diarrhoea;
- Support outreach services: distribution of LLINs to under-five children; vitamin A supplementation for children aged 6-59 months; distribution of de-worming tablets to children aged 12-59 months;
- Strengthen primary health care services: training of health workers and provision of essential drugs for primary health centres to better manage malaria, diarrhoea, pneumonia, measles and neonatal infections; supervision and monitoring.

Maternal mortality reduction (US\$ 430,140)

Some 62,158 pregnant women and 36,259 newborns will be reached through the following key activities:

- Provide family- and community-based intervention package:
 - For newborns: social mobilization activities and training of traditional birth attendants (TBAs) and volunteers for prevention of infections, hypothermia and asphyxia; for detection of newborn danger signs and of breastfeeding problems; for promotion of immediate and exclusive breastfeeding;
 - For pregnant women: social mobilization activities and training of TBAs and volunteers on 'making pregnancy safer' (MPS) strategy and interventions;
- Support outreach interventions: antenatal care, preventive intermittent treatment of malaria; distribution of LLINs;
- Strengthen primary health care services: training of midwives and nurses on MPS strategies and interventions; promotion of baby-friendly hospital initiatives; provision of basic kits;

Cotrimoxazole prophylaxis to infants of HIV-positive mothers; voluntary counselling and testing for HIV; antiretroviral treatment for HIV-positive mothers and their children.

Nutrition (US\$ 695,500)

Some 2,061,846 conflict-affected people, including 318,349 under-five children and 117,228 pregnant and post-partum women from the prefectures of Ouham, Ouham Pendé, Ombella Mpoko, Nana Grebizi and Bangu, will be targeted through the following activities:

- Provide supplies and technical support for the management of five therapeutic feeding centres and thirty supplementary feeding centres in the five most conflict-affected districts;
- Reinforce national capacities on nutritional status assessment and monitoring, through training and supply/equipment programme;
- Support community-based nutrition activities to prevent malnutrition among under-five children, tackling the most important causes of malnutrition (community-based growth monitoring; food security; infant and young feeding practices).

HIV/AIDS (US\$ 854,395)

Some 1,035,962 conflict-affected people, including 62,158 pregnant women, 9,325 new infected mothers and 186,500 young people and children will be reached through the following key activities:

- Undertake HIV/AIDS risk mapping and adopt life skills approach;
- Develop an advocacy and integrated communication plan for behaviour change;
- Strengthen existing health services with STI/HIV/AIDS facilities and resources: voluntary counselling and testing (VCT), youth-friendly services for STDs/STIs;
- Strengthen antenatal care services in all health facilities: tests, necessary materials and VCT equipment;
- Train health workers and volunteers (support groups, community-based organizations, community-based health workers, traditional birth attendants, traditional healers, religious groups) in counselling, testing and providing antiretroviral therapy and drugs for the treatment of opportunistic infections.

Water and environmental sanitation (US\$ 2,167,000)

Some 175,000 displaced persons, focusing particularly on children and women, will be reached through the following key activities:

- Construct at least 50 new water points equipped with handpumps in schools;
- Rehabilitate 600 broken water and sanitation facilities (handpumps) in villages to ensure safe access to water for at least 175,000 displaced persons and returnees (care and maintenance);
- Support water point management at village level and latrinization of at least 6,000 households;
- Intensify hygiene education campaigns in schools and at household level;
- Provide family emergency kits (soap, bucket etc.);
- Strengthen capacities of government and communities in the management of water systems;
- Foster coordination for water and sanitation sector emergency preparedness.

Education (US\$ 2,641,295)

A total of 88,868 displaced and war-affected children, including more than 34,000 girls, and 1,267 teachers, will benefit from the following key activities:

- Map existing school facilities and equipments within the conflict zones;
- Mobilize and sensitize communities for school rehabilitation and re-opening;
- Provide support for the rehabilitation of 74 classrooms;
- Procure and distribute recreation kits and basic school kits to 74 schools, 1,267 primary schoolteachers and 88,868 pupils.
- Train 1,267 teachers on basic pedagogic skills and competencies, with particular emphasis on HIV/AIDS and peace education;
- Support the construction of 30 temporary school/classroom structures to accommodate 88,868 primary schoolchildren.

Child protection (US\$ 711,240)

Monitoring and reporting on child rights violations (US\$ 278,200)

Some 60,000 internally displaced persons and 60,000 especially vulnerable people (30,000 children and 30,000 women) are targeted through the following key activities:

- Assess, analyse and document cases of severe violations of human rights and their trends, particularly against women and children, to enable effective and well-targeted advocacy efforts;
- Establish/strengthen existing mechanisms and systems to monitor and report on violations, including a pilot child protection network as well as a pilot database on child rights violations;
- Train military forces, rebels, law enforcement officials and other relevant actors on children's and women's rights, including special protection accorded to children in conflict situations and protection from sexual abuse and exploitation at all levels.

Protection, care and support of OVC (US\$ 241,700)

Some 115,000 especially vulnerable children from conflict-affected areas, including 3,000 street children, are targeted through the following activities:

- Reinforce operational capacity (equipments, materials, etc.) of 20 NGOs in the conflict-affected areas to improve access of OVC to basic social services;
- Train 100 social workers on home-based care and psychosocial follow-up of OVC and their families;
- Provide technical assistance for the design and implementation of the first national action plan on OVC, ensuring quality planning and effective fundraising strategies;
- Elaborate a service and institutional mapping of beneficiaries and children affected by conflict;
- Create a database on children living in the streets and abandoned children in the conflict-affected areas, including an annual report on research and analysis of data related to OVC and children living in the streets as a direct consequence of the armed conflict.

Birth registration in conflict area (US\$ 191,340)

Some 453,000 children, including 305,000 under-five children and 136,000 especially vulnerable children, will benefit from the following activities:

- Provide technical and financial assistance for a birth registration system needs assessment in the prefectures of Kémo, Ouham and Ouham Pendé;
- Support reconstruction/reconstitution of at least 51 registrars' offices destroyed during conflicts;
- Deliver equipment and materials (birth registration forms, etc.) to reestablish minimum operational capacities of at least 51 destroyed registrars' offices;
- Support judiciary system in order to ensure free and compulsory birth registration;
- Train 300 registration agents, officials and other key actors on applicable legal provisions;
- Support the free registration of OVC (newborn or children not registered at birth).

Non-food items/shelter (US\$ 775,750)

Some 90,000 internally displaced and vulnerable people, including 65,000 children and women, will be reached through the following activities:

- Permanently assess the situation of affected communities (affected towns/permanent rural communities) and of temporary settlements in the bush; upgrade temporary settlements and affected communities;
- Pre-position basic emergency non-food items (NFIs) buffer stock for 25,000 people at UNICEF's Bossangoa sub-office and at UNICEF/WFP Kaga-Bandoro facilities (UN common services);
- Ensure regular delivery of emergency NFI assistance and seasonal input for 60,000 most vulnerable people in rural areas identified by community leaders (hygienic kits, cooking sets, soap, bed linen, plastic sheeting, metal buckets, impregnated mosquito nets, seeds, fishing and agricultural tools, nutritional/non-food complementation, and clothes for children);
- Deliver emergency NFIs and seasonal input for 5,000 affected/vulnerable people in Nana-Grebizi and Bamingui-Bangoran.