Increased levels of violence combined with the impact of the COVID-19 pandemic have led to a rise in the number of people in need of humanitarian assistance in the Central African Republic (CAR). In 2022, 3.1 million people (63 per cent of the population) will be in need, including 1.4 million children.2

The Rapid Response Mechanism, which will target 272,500 people (60 per cent of whom are children) will further expand its role as an entry point for UNICEF’s overall response. Among other key interventions, UNICEF will ensure severe acute malnutrition (SAM) prevention and response for more than 55,000 children, support safe return to school for 300,000 children in crisis-affected areas, and ensure access to safe water for 300,000 people. Protection needs will remain at the heart of the response, with 140,000 children accessing mental health and psychosocial support, and a systematic gender lens will inform all analysis and programme design.

UNICEF requires US$73 million to meet the needs of children affected by the humanitarian crisis in CAR in 2022.

Figures are provisional and subject to change upon finalization of the inter-agency planning documents.

Sadrack, Mezac, Adenego and Warren, young boys from Doloko in Bangui, joyfully filling their UNICEF-provided cans at a water point.

Central African Republic

HIGHLIGHTS1

- Increased levels of violence combined with the impact of the COVID-19 pandemic have led to a rise in the number of people in need of humanitarian assistance in the Central African Republic (CAR). In 2022, 3.1 million people (63 per cent of the population) will be in need, including 1.4 million children.2

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- UNICEF requires US$73 million to meet the needs of children affected by the humanitarian crisis in CAR in 2022.

KEY PLANNED TARGETS

55,038 children admitted for treatment for severe acute malnutrition

300,000 people accessing a sufficient quantity of safe water

140,000 children/caregivers accessing mental health and psychosocial support

300,000 children accessing educational services

FUNDING REQUIREMENTS

US$ 73 million
The Central African Republic (CAR) is experiencing a new wave of acute humanitarian crises. Election-related violence that broke out in mid-December 2020 has had a devastating effect on civilians, particularly children, while hundreds of thousands of people have been forced to flee their homes. The national army, supported by bilateral forces, has regained control of the majority of the country’s cities, but armed groups are now scattered in rural areas and military operations continue, causing further displacement. The UNICEF-led Rapid Response Mechanism (RRM) recorded 112 alerts, mostly conflict related, between January and September 2021, a 70 per cent increase over the same period in 2020. Over 722,000 people were displaced as of 30 September 2021, a level not seen since the peak of the crisis in 2013. Including the 709,000 CAR refugees abroad, one in four Central African people is now displaced by conflict.

During the election-period crisis in 2021, human rights violations, including sexual and gender-based violence, have surged, dozens of schools and hospitals have been occupied or forcibly closed, and food prices have increased by up to 60 per cent, in a context where children and their families had already been heavily affected by the COVID-19 pandemic and its socioeconomic impacts. In 2021, 20 per cent of the country’s health districts reached measles epidemic status. Due to the combined effects of violence, the COVID-19 pandemic and structural fragility, an estimated 3.1 million people in CAR (63 per cent of the population) will need humanitarian assistance in 2022. This is the highest amount of people in such need in five years both in terms of total and percentage of the population. This includes 1.4 million children and 460,000 people with disabilities. The number of people who will experience acute vulnerabilities that threaten their survival will also increase to 2.2 million, representing 43 per cent of the population.

The number of children under 5 years of age in need of severe acute malnutrition (SAM) treatment is expected to again rise by about 10 per cent, to 69,000. Two thirds of the country’s children did not regularly attend or attend school at all in 2021, and 1.4 million will need help to do so in 2022. In total, 944,000 children will also need protection, especially from the psychosocial impact of conflict and from the risk of sexual violence. Fifty-eight per cent of the population will lack access to water and sanitation, a sharp increase due to conflict as well as the increase in displaced persons (IDPs). In turn, epidemics, including measles, are expected to remain prevalent in 2022.

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**SECTOR NEEDS**

- **68,797** children under 5 years are acutely malnourished
- **2.8 million** people lack access to safe water
- **944,000** children in need of protection services
- **1.4 million** children in need of access to school

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**STORY FROM THE FIELD**

Martine, her husband and their four children have been displaced following an armed attack on their village north of Bozoum, in the West of CAR.

Thanks to the UNICEF-led Rapid Response Mechanism (RRM), her family was identified, by RRM partner Action Contre la Faim, among the 619 most vulnerable households having sought refuge in Bozoum. Martine received the equivalent of US$88 to help her family meet their most pressing needs. She plans to buy essential household items and enroll her children in school, and has regained some hope for their future.

Read more about this story here.

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On 25 September 2021, Martine, who fled attacks on her village with her four children, received US$88 in cash as part of the UNICEF-supported Rapid Response Mechanism in Bozoum.
HUMANITARIAN STRATEGY

UNICEF’s humanitarian response will rely on close collaboration with partners and community networks in the country's most troubled areas, the use of pre-positioned supplies and UNICEF's network of five offices. UNICEF’s response will prioritize child-centred, life-saving interventions supporting IDPs, returnees and host communities impacted by the enduring crisis, recurring epidemics and natural disasters.

The UNICEF-led RRM will collect alerts, assess new crisis situations, share results with the humanitarian community and provide essential household items and critical WASH services to vulnerable children and families. While maintaining strong coordination with external actors, the RRM will also further expand its role as the entry point for complementary UNICEF responses, including child protection quick response teams, health and nutrition mobile clinics, and inter-sectoral mobile units. This will enable the delivery of a more integrated, higher-impact first response, while ensuring that needs continue to be met after the RRM response ends.

UNICEF will further support the government in its response to COVID-19, including scaling up vaccination while maintaining a focus on prevention in schools and at the community level. UNICEF will work to address the combined effects of the political-military and COVID-19 crises on children by scaling up SAM response and prevention, while ensuring closer nutrition and health complementarity, supporting the safe return to school and distance learning when schools are not accessible, developing sustainable WASH infrastructure in underserved areas, and maintaining WASH services on IDP sites.

The protection needs of children will remain central. UNICEF will support efforts to release children from armed groups, reunify separated or unaccompanied children with their families, and provide appropriate psychosocial support to children affected by conflict. Gender-based violence risk mitigation, prevention and survivor assistance interventions will also be prioritized alongside mainstreaming the prevention of sexual exploitation and abuse (PSEA).

UNICEF will mobilize partners to address preventable childhood illnesses, malaria, HIV and malnutrition. UNICEF will contribute to providing out-of-school children with access to safe learning spaces and quality education, including through radio programmes. UNICEF will also support the above with a strong focus on community engagement, and wherever possible, will further develop cash programming, either multi-purpose or in support of sectoral interventions in line with the Grand Bargain commitments.

Finally, UNICEF will work with line ministries to reinforce Government capacities for humanitarian coordination and response and will continue to lead the Child Protection Area of Responsibility, the nutrition, WASH and education clusters as well as inter-agency efforts on accountability to affected populations (AAP).

This appeal is aligned with the revised Core Commitments for Children in Humanitarian Action, which are based on global standards and norms for humanitarian action.

Progress against the latest programme targets is available in the humanitarian situation reports: https://www.unicef.org/sg/policy/en/situation-reports

2022 PROGRAMME TARGETS

**Nutrition**
- 55,038 children aged 6 to 59 months with severe acute malnutrition admitted for treatment
- 145,729 primary caregivers of children aged 0 to 23 months receiving infant and young child feeding counselling
- 627,485 children aged 6 to 59 months receiving vitamin A supplementation

**Health**
- 395,127 children aged 6 to 59 months vaccinated against polio
- 111,283 children and women accessing primary health care in UNICEF-supported facilities
- 266,368 children under 10 years old vaccinated against measles

**Water, sanitation and hygiene**
- 300,000 people accessing a sufficient quantity of safe water for drinking and domestic needs
- 150,000 people use safe and appropriate sanitation facilities
- 30,000 girls and women accessing menstrual hygiene management services
- 300,000 people reached with hand-washing behaviour-change programmes

**Child protection, GBVie and PSEA**
- 140,000 children and parents/caregivers accessing mental health and psychosocial support
- 12,000 women, girls and boys accessing gender-based violence risk mitigation, prevention and/or response interventions
- 350,000 people who have access to a safe and accessible channel to report sexual exploitation and abuse by aid workers
- 1,750 children who have exited armed forces and groups provided with protection or reintegration support

**Education**
- 300,000 children accessing formal or non-formal education, including early learning
- 400,000 children receiving individual learning materials
- 800 schools implementing safe school protocols (infection prevention and control)
- 2,600 teachers trained in psychosocial support and basic teaching methods

**HIV and AIDS**
- 867 pregnant and lactating women living with HIV receiving antiretroviral therapy
- 21,985 adolescent girls and boys tested for HIV and received the result of last test

**Rapid Response Mechanism**
- 272,500 vulnerable people newly affected by the crisis rapidly provided with essential household items
- 147,000 vulnerable people affected by the crisis benefiting from water, hygiene and sanitation interventions

**Cross-sectoral (HCT, C4D, RCCE and AAP)**
- 7,550 households reached with UNICEF-funded humanitarian cash transfers across sectors
- 3,000,000 people reached through messaging on prevention and access to services
- 700,000 people engaged in risk communication and community engagement actions
- 25,000 people with access to established accountability mechanisms

Programme targets are provisional and subject to change upon finalization of the inter-agency planning documents.
UNICEF is requesting US$73 million to meet the humanitarian needs of children in the Central African Republic (CAR) in 2022. This amount is about 10 per cent higher than in 2021 due to the expected continuing deterioration of the security context and humanitarian situation in CAR. Inter-agency projections estimate that the number of people in need of assistance will increase by 11 per cent to 3.1 million.

Consequently, UNICEF’s targets and budget requirements have increased for several sectors. The RRM has seen a significant increase in its volume of activity in 2021, which is expected to continue. Education is also significantly increasing, as more children will need support to access school due to the lasting socioeconomic consequences of the COVID-19 pandemic and renewed conflict in 2021. For the same reasons, targets and budgets for nutrition and child protection are also increasing. In addition, UNICEF will further reinforce integrated programming, reaching more children by several sectors.

With 63 per cent of its population expected to need assistance in 2022, the majority being children, CAR is among the worst humanitarian crises in the world in terms of the proportion of affected population, making continuing donor support even more critical.

<table>
<thead>
<tr>
<th>Sector</th>
<th>2022 requirements (US$)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nutrition</td>
<td>16,200,000</td>
</tr>
<tr>
<td>Health and HIV and AIDS</td>
<td>4,300,000</td>
</tr>
<tr>
<td>Water, sanitation and hygiene</td>
<td>9,200,000</td>
</tr>
<tr>
<td>Child protection, GBViE and PSEA</td>
<td>9,100,000</td>
</tr>
<tr>
<td>Education</td>
<td>11,800,000</td>
</tr>
<tr>
<td>Rapid Response Mechanism</td>
<td>15,600,000</td>
</tr>
<tr>
<td>Cross-sectoral (HCT, C4D, RCCE and AAP)</td>
<td>5,300,000</td>
</tr>
<tr>
<td>Cluster/sector coordination</td>
<td>1,500,000</td>
</tr>
<tr>
<td>Total</td>
<td>73,000,000</td>
</tr>
</tbody>
</table>

*This includes costs from other sectors/interventions: Cross-sectoral (HCT, C4D, RCCE and AAP) (7.3%), Health and HIV and AIDS (5.9%), Cluster/sector coordination (2.1%).

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UNICEF’s public health and socio-economic COVID-19 response, including programme targets and funding requirements, is integrated into the standalone country, multi-country and regional Humanitarian Action for Children appeals. All interventions related to accelerating equitable access to COVID-19 tests, treatments and vaccines fall under the Access to COVID-19 Tools Accelerator (ACT-A) global appeal.


Office for the Coordination of Humanitarian Affairs (OCHA), Light Humanitarian Needs Overview, March 2021.

Source: OCHA.

UNICEF leads cluster coordination for the WASH, nutrition and education clusters and the child protection area of responsibility.

UNICEF’s work supporting COVID-19 vaccination is covered by the Global ACT-A appeal.

The Grand Bargain is a unique agreement between some of the largest donors and humanitarian organizations, who have committed to getting more means into the hands of people in need and improving the effectiveness and efficiency of humanitarian action.

The increased target is aligned with the sectoral PIN. In addition to school closure in 2020-21 due to the pandemic, more children were out of school due to the deterioration of the security situation and access challenges, including schools occupied by armed forces and armed groups. Consequently, in 2022, an important focus will be put on education in emergency contexts (IDPs and returnees), including new strategic integrated approaches, that will be more adapted to the current volatile context to reach much harder-to-reach children.

To improve HIV testing and treatment coverage, in 2022, UNICEF will procure and supply point-of-care tests for HIV early infant diagnosis and viral load testing, focusing its support on pregnant women, mothers, infants, children and adolescents. This new HIV/AID early detection approach will decrease requirements for infrastructure and training and will significantly increase the number of adolescent girls tested and consequently treated.

The population targeted is higher than the total number of people/children to be reached because the target includes mass media outreach.

Increase in budget requirement compared to 2021 is primarily linked to upward revision of unit cost for the indicator "women and children accessing primary healthcare" to include more mobile clinics in order to reach the most vulnerable in crisis-affected, hard-to-reach areas.