



This report is produced by OCHA CAR in collaboration with humanitarian partners. The next report will be issued on or around 31 March.

Highlights

- The Seleka coalition seizes power in Bangui on 24 March amid violence and widespread looting
- Limited electricity and running water in Bangui is hampering ability of first-aid responders to provide medical care to wounded.
- Health and Nutritional services supported by INGOs and UNICEF.
- 23 million USD or 18% of the CAP 2013 funded to date.
- Seleka move to the northwest and southwest with a new presence in Paoua, Bouar and Nola.



Situation Overview

On 17 March five Seleka ministers joined their military troops in Sibut and issued an ultimatum to President Bozize to respect the terms of the Libreville Agreement. Five days were given for implementing several conditions including the release of political prisoners and repatriation of foreign troops, notably the South Africans. Despite last minute efforts to find a political solution, Seleka, from Sibut, advanced towards the northwest and took control of Batangafo, Bouca and Bossangoa. The Seleka further advanced on Bossembele and moved south from Sibut to Damara on 21 March. Met with minimal resistance, Seleka arrived in the outskirts of Bangui on 23 March and took control of Bangui the following morning.

President Djotodia re-appointed Prime Minister Tiangaye, but has not formed a new government. He has suspended the constitution and the parliament.

Electricity has not been fully re-established since it was cut at the hydroelectric power station Saturday. Water is being restored on a limited basis. Commercial enterprises remain closed and civil servants remain absent from their posts and schools are closed. Some neighborhood markets are open but large shops and restaurants remain closed. The border with all neighboring countries is closed, which directly affects movement of commercial and fuel from Douala, which is Bangui's main commercial and supply line from Cameroon.

The looting of offices, private residences and businesses continued throughout the weekend but has subsided, however the looting of humanitarian offices and warehouses, including the United Nations, continues. Sporadic gun fire is heard throughout the town during the day calming down at night. There is a curfew in place from 19:00 to 06:00.

Hospitals with minimal staff are providing urgent care to patients with support from medical INGOs (MSF, PU-AMI, IMC) and UNICEF. Critical supplies such as fuel for generators, medicines and surgical kits are available. Three therapeutic nutrition centres and 12 ambulatory therapeutic nutritional units are operational with support from ACF and UNICEF.

Humanitarian Response

MSF France is currently working with the main hospital in Bangui to provide emergency surgical and medical treatment with support from UNICEF. UNICEF is working closely with the PEV (Programme elargi de vaccination) team to ensure cold chain is stable and vaccines are maintained under present conditions. ACF is supporting three therapeutic nutritional centres and 12 ambulatory therapeutic nutritional units for Bangui. MSF Holland and IMC are currently evaluating the situation of health centers and health posts in Bangui. Medical and surgical kits as well as nutritional supplies are being provided to NGO partners to ensure continuity of services in Bangui by UNICEF and WHO.

UNICEF stood up the Rapid Response Mechanism (RRM) on 27 March for Bangui and in the interior of the country. RRM teams, ACTED, ACF and IRC, and partners PU-AMI, IMC and IRC, have already begun assessments. In Bangui RRM teams and partners will have initial findings should be available within two days for Bangui. In addition, RRM partners will begin assessments in eight areas outside of Bangui including Grimari-Bria, Bangassou, Alindao, Mobaye, Boassangoa, Paoua, Kabo-Batanagafo, Damara-Sibut- Dekoa, and N'dele starting Monday, if security is assured by the Seleka.

In addition, COOPI and ACF with support from UNICEF has begun to provide support for 80 Unaccompanied Minors (UAM) using an existing network of child protection and health and protection partners are in the process of identifying and providing treatment for survivors of gender based violence.

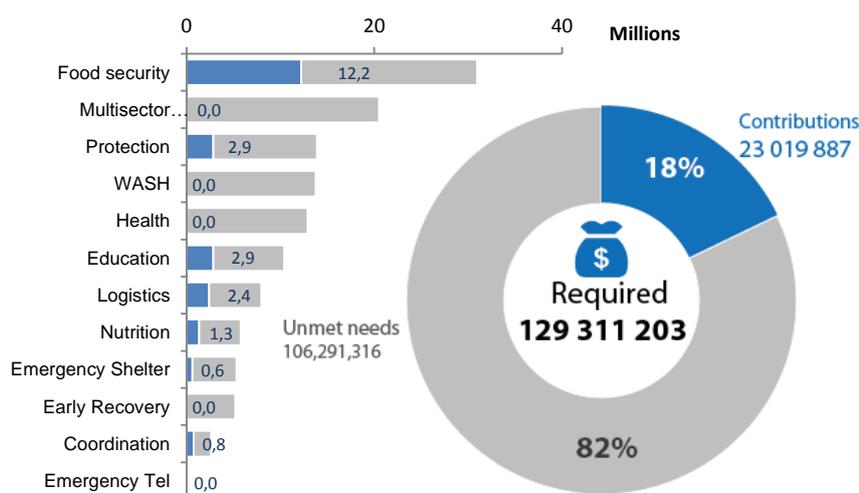
The water supply in Bangui is reliant upon stable electricity supply from ENERCA, national electrical company, which is not fully restored. In addition, SODECA, the national water company, has two trucks of water treatment products blocked at the Cameroon border which are desperately needed to purify water that is not potable that is being distributed in Bangui. UNICEF is working with SODECA and FOMAC to find a possible solution to ensure the transport of these products to Bangui.

UNOCHA is currently supporting coordination efforts in both Bangui and Yaoundé, Cameroon, the support office for many relocated United Nations and INGO staff evacuated from CAR. The remaining clusters are currently reviewing their in-country capacity and will begin assessments in the coming weeks.

Funding

18% of contribution received has been registered so far in FTS for the 2013 Consolidated Appeal Process (CAP). 23 million USD has been allocated to WFP, UNHCR, UNICEF, ACTED, ACF, UNHAS, and OCHA.

The 2013 CAP requires US\$129 million to assist 646,000 people and does not take into account the needs of



thousands more people affected by the current crisis. Humanitarians estimated an additional amount of \$42 million required prior to the latest event in Bangui. It is anticipated that with the most recent developments this amount will increase given the loss of operational capacity by NGO and UN.

All humanitarian partners, including donors and recipient agencies, are encouraged to inform OCHA's Financial Tracking Service (FTS - <http://fts.unocha.org>) of cash and in-kind contributions by e-mailing: fts@un.org

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