



This report is produced by OCHA CARin collaboration with humanitarian partners. It covers the period from 19 February to 25 February. The next report will be issued on or around 5 March.

Highlights

- Insufficient funding and lack of access are hampering delivery of an adequate assistance to affected populations in need of protection, nutrition, food, WASH and education
- As of 15 February, it is estimated that some 15,703 CAR people are in the Democratic Republic of Congo and 1,500 sought refuge in Chad.
- 13,500 children under 5, in the Seleka area and Bangui, will suffer from Severe Acute Malnutrition.
- ECHO humanitarian plan for CAR updated with an additional 4 million Euros that will be used to mainly respond to the ongoing crisis
- No contributions received to date for the 2013 CAP amounting US\$129 million.



1,100,000

Affected people in the Seleka area (including recent attacks in Mobaye, Alindao)

173,247

Estimated number of IDPs

US\$129 Million

Requested through the 2103 CAP

Situation Overview

The situation in Central African Republic (CAR) remains uncertain especially in the Seleka area where 1,100,000 people are estimated to be affected by the current crisis. The security situation is still worrying and several attacks on civilians have been reported during the reporting period in the Mboki, Zemio and Obo regions. Weekend attacks on humanitarian organizations in Kabo and Kaga-Bandoro continue to undermine aid efforts.

Access to people in need remains critical for humanitarian actors. While it is still difficult to reach some regions, especially in the Seleka area, due to restrictions applied to humanitarian convoys and the conditions of road, insecurity is hindering humanitarian activities. As of today, IDPs caseload is estimated at 65,000 from the RRM evaluations, however with ten per cent of the population reached a working estimate of the number of IDPs is about 173,247. Most of the affected populations have sought refuge in the bush. Evaluations of IDPs continue to be conducted access permitting. The Minister of National Defense announced on 15 February the restoration of movement freedom throughout the country. Despite all these efforts including the ceasefire agreement signed in Libreville, movement of personnel, goods and assistance is still limited.

Preliminary results of different assessment missions show that protection, nutrition, food, education and Water, Sanitation and Hygiene (WASH) are the major needs. While the cropping season is approaching, agricultural assistance is needed now. Schools are still not functioning in the Seleka area and 166,000 children have no access

to education. It is estimated that 15,703 Central African refugees have crossed the river to the Democratic Republic of Congo (DRC). Most of them are spontaneously self-settled in Mobayi-Mbongo, Pandu and Ngele areas.

Funding

\$129 Million

Requested

No funding

Received so far

No contribution has been registered so far in FTS for the 2013 Consolidated Appeal Process (CAP). In 2013, humanitarian actors are requesting US\$129 million to assist 646,000 people, especially in the south-east, north-east and in the north-central part of the country.

Due to the deterioration of the humanitarian situation in the country since the recent assault, humanitarian needs have significantly increased. Additional funding is needed immediately to respond to the most pressing needs of vulnerable population.

ECHO has updated its Humanitarian Implementation Plan (HIP) to increase funding by 4 million Euros for a total contribution of 12 million Euros for 2013. This additional funding will be used to respond to the supplementary needs caused by the current crisis and to implement emergency interventions in affected areas not taken into account in the first version of the HIP.

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

Humanitarian Response

Preliminary results of assessments carried out in the framework of the Rapid Response Mechanism (RRM) indicate that the pressing needs are protection, food, health, nutrition and education.

It is critical for aid actors to scale up their activities especially in affected areas to avoid a further deterioration of the humanitarian situation as the rainy season is likely to start next month in several regions. Food and agriculture assistance is needed now.

In DRC, three missions have been conducted since January 2013. Assessments show a large number of unaccompanied children and malnourished children, a lack of essential items, limited support capacity from host communities and a poor access to health care services. A response strategy has been developed to respond to essential needs of 20,000 CAR refugees (including 13,321 new refugees and 2,382 old refugees arrived in 2012). All refugees will be relocated in a camp established in Mobayi-Mobongo and assistance will be provided in terms of protection, Health, nutrition, shelter and education.



Education

Needs:

- The educational system in areas controlled by the Seleka is still not functioning. 616 schools are closed and over 166,000 children don't have access to education.

166,000

children don't have access to education

Response:

- UNICEF has an existing emergency education stock to support 11,400 children with an order in the pipeline (from Douala) for 32,000 children.

Planned Response:

- UNICEF plans to enroll 168,000 children in temporary spaces and existing schools, to provide 1,678 temporary learning spaces and schools with supplies and trained teachers in affected areas. UNICEF will also train 1,678 teachers integrating psychosocial, health and nutrition components.
- WFP plans to distribute 81 mt of food to assist 20,679 children in Bangui (schools meals for three months) and 224 mt of food to assist 73,055 children in Bambari, Kago-Bandoro, Paoua and Bouar (school meals for two months). School feeding programmes are on stand-by for the reopening in Seleka areas.



Food Security

Needs:

The World Food Program (WFP) conducted a Rapid Food Security Assessment from 4 to 12 February 2013. The results of the mission indicated the following:

- Since December 2012, there is a block in trade between Bangui and the Seleka area, part of the country that usually produces surplus crops;
- Significant damage to agricultural stocks, seeds and livestock took place in the Seleka area;
- The increase in food prices and falling income has drastically reduced the purchasing power in the affected areas. Affected households depend on precarious food sources, such as purchase or gathering, while food consumption is impoverished.
- Given the insecurity that limits households' access to their fields, and the effects of looting on their production capacity, the outlook for the 2013 crop production is uncertain. The already precarious food situation will damage until the next harvest. Food shortages will be most significant in May to September 2013, especially in the north of Nana-Grebizi and in Ouham. These areas are facing a fragile food situation. Most urgent needs are concentrated in these areas as well as in Vakaga.
- Following this assessment, WFP estimates that almost 80,538 people are at risk of severe food insecurity in the Seleka area during the 2013 lean season.

80,538

people are at risk of severe food insecurity in the Seleka area during the 2013 lean season

Response:

- WFP is dispatching food for its emergency and development operations for February 2013. The organization plans to distribute 590 metric tons (mt) of food to 96,000 people in Bambari, Kaga-Bandoro, Paoua, Bouar and Bangui under the protracted relief and recovery programme. This includes food assistance for 1,300 IDPs in Bambari and 10,000 IDPs in Kaga-Bandoro. The distribution will cover the beneficiaries' needs for 2 months.

Gaps & Constraints:

- The insecurity is hindering main activities on which households depend on to access to food. WFP activities which target 118,000 beneficiaries in the Seleka area are currently suspended.



Nutrition

Needs:

- It is estimated that from March to December 2013, 13,500 children under 5, in the Seleka area and Bangui, will suffer from Severe Acute Malnutrition (SAM) while over 44,000 will suffer from Moderate Acute Malnutrition (MAM).

13,500

children under 5, in the Seleka area and Bangui, to suffer from SAM

Response:

- UNICEF has provided emergency nutritional supplies, including therapeutic foodstuffs, to MSF-Holland, IMC and ACF to support activities in Seleka-controlled areas. More distributions are planned in the next few weeks.

Planned response:

- UNICEF plans to train 100 health workers and 150 Child Health Workers on Infant and Young Child Feeding (IYCF) appropriate practices. It will screen and treat at least 2,000 children for acute malnutrition in the 7 affected prefectures.
- WFP plans to distribute 3.6 mt of mixed commodities to 718 beneficiaries in Kaga-Bandoro and Paoua through its Nutrition activities in February 2013.
- WFP plans to distribute 2.8 mt of Supplementary Plumpy to 551 beneficiaries in Bambari and Paoua through Mother and Child Health activities. Food deliveries are ongoing. The distribution will cover the beneficiaries' needs for 3 months.

**Needs:**

- Three field missions were conducted in February to perform HIV rapid assessment in Kaga Bandoro, Bossangoa and Bambari. The mission observed that raped women from Kaga Bandoro had to travel to the Bossangoa HIV center to receive psycho-social support and HIV testing. UNICEF identified shortages in life-saving medicine in all three towns. No doctors were present, only nurses and volunteers remain.
- UNFPA, International Medical Corps and the National NGO REMOD undertook on 22 February an assessment in the Bangui – Damara area. The assessment reveals 43 cases of Sexual Gender Based Violence (SGBV) reported from December to February; populations use health facilities despite the distance during obstetric emergencies, but there is a lack of qualified personnel; 15 deliveries in bush before using hospital services; 150 cases of sexually transmitted infections treated including 48 cases among women; lack of essential generic drugs as well as of male and female condoms. There is a need of emergency kits including PEP Kits and access to basic services especially in terms of reproductive health for IDPs.

Response:

- UNICEF has provided medicines and supplies to MSF France and MSF Spain to respond to the immediate needs of patients for up to 30,000 people in affected areas.
- UNFPA provided a minimum emergency device in reproductive health at the hospital of DAMARA including 150 delivery kits, 50 dignity kits, surgical instruments for cesarean, 36,000 male condoms and 2,000 female condoms.

Planned response:

- Vaccinate against measles, provide vitamin A and deworm 95% or 50,000 children in the appropriate age group. Provide families with mosquito nets.
- Follow up and support for the management of meningitis cases in Sikikedé.
- IMC to deploy 2400 doses of Ceftriaxone, to organize training of health personnel and sensitization campaign.
- WHO to prepare for meningitis outbreak with a stockpile of 10,000 doses of Ceftriaxone.
- UNICEF plans a second donation of emergency health kit for 10,000 people for three months to MSF-Holland in Sibut.
- Promote key health and education practices to at least 240,000 people living in affected areas.

Gaps & Constraints:

- Serious issues remain on transportation of drugs to affected areas, given the security and logistical challenges.

**Needs:**

- According to the Protection cluster members, recent assessment missions revealed that civilian populations live in fear. It is necessary to regain a normal situation where people can have the freedom of movement with no more security threats and attacks.

Response:

- The protection assessments across the Seleka area have been completed.
- UNICEF and partners continue to support an emergency Transit and Orientation Centre (CTO) for children formerly associated with armed groups.
- UNICEF is working with partners towards family reunification either biological or with foster families.
- UNICEF has a contingency stock to establish two emergency CTOs with the capacity for 50-75 children each as necessary.
- The Monitoring and Reporting Mechanism (MRM) Working Group continues to conduct verification of grave violations of child rights in Bangui and plans to continue across the Seleka controlled zones.

Planned response:

- UNICEF plans to reunify and reintegrate 1,200 orphans and vulnerable children, including children associated with armed forces and groups, children in conflict with the law, with their families and in their

communities. The organization will also provide holistic care to 500 Gender Based Violence (GBV) survivors, with special attention to sexual violence and specific measures for children and adults.

- Report and verify cases of grave violations and register cases into a database.



Water, Sanitation and Hygiene

Response:

- UNICEF currently has in-country emergency water, sanitation and hygiene supplies to support the immediate needs of 50,000 people, including bladders and distribution systems, chlorination materials/equipment, hand pumps, foot pumps, jerry cans and water purification tablets.

Planned response:

UNICEF plans to:

- Distribute WASH-NFI Kits to 100,000 IDPs/host family members
- Rehabilitate 55 boreholes rehabilitated to provide access to safe water for 25,000 affected persons
- Rehabilitate gender segregated latrines for 20,000 school children in affected areas. Rehabilitate latrines in 17 health/nutrition centers.
- Provide 500,000 women and child caregivers with hygiene education and information pertaining to safe and hygienic child-care and feeding practices.



Non-Food Items

Response:

- UNICEF has the capacity to cover 9,000 families in need of basic non-food items, 4,000 through the RRM and 5,000 with existing contingency stock. These NFIs will allow families to re-establish their households following massive looting during and following the latest conflict. These NFI kits include basic items such as blankets, mosquito nets, cooking sets, soap, jerry cans and tarpaulins.

Planned response:

- UNICEF to distribute NFIs to 9,000 IDP families, ensuring principles of do no harm are applied.
- The International Rescue Committee (IRC) plans to collect the number of IDPs in host families in Kaga-Bandora and Ouandago and to distribute NFIs in the coming days.



Emergency Telecommunications

Response:

- Internet connection is now available at the UN clinic. WFP is providing point to point connection to the clinic.



Logistics

Response:

- WFP is shipping food from Douala, Cameroon. 937 mt of mixed commodities have been allowed within the corridor.
- WFP dispatched 185 mt of maize meal, rice, pulses, vegetable oil and super cereal to Batalimo this week.

Gaps & Constraints:

- UNHAS funding situation remains critical. US\$1.7 million has been pledged which is 22 per cent of the required annual funding.

General Coordination

- The Emergency Telecommunication Cluster meeting was held on 15 February. The Emergency Telecommunication Cluster is considering implementing free communication between UN agencies. The next cluster meeting will discuss how to organize free interagency calls.
- Protection cluster validated on 22 February, its emergency response plan for internally displaced people in CAR.
- Health Initial rapid assessment will be undertaken in Seleka affected area by mixed teams (UN, NGO, MoH) as soon as UNDSS provide a go ahead mission by road. The health cluster emergency response plan for the coming three months and six following months is finalized and shared with the Ministry of health.
- Humanitarian actors in CAR are currently working on a response plan to the ongoing crisis that will be added to the 2013 CAP.

Background on the crisis

Following an assault launched on December 2012, the coalition Seleka is now controlling many major towns in the central, northern and eastern CAR. This situation has worsened the humanitarian situation and has furthermore weakened the vulnerability of poor communities. It is estimated that 800,000 people are living in areas under the control of the Seleka coalition. There is continued apprehension about the protection of civilians in affected areas and widespread looting and violence. The security situation in the country, especially in the parts of the country ruled by the coalition is unpredictable despite the ceasefire agreement signed between the Seleka coalition and the Central African Government in Libreville (Gabon) on 11 January.

Humanitarian access is being hindered in regions under the control of Seleka and remains a huge challenge. In addition, the access in these regions is mostly impeded by other factors such as, criminal activities or logistical constraints. The humanitarian community is concerned and is calling for respect for international humanitarian and human rights law, including immediate humanitarian access to people in need, protection of children against recruitment into armed groups and the protection of women and girls against sexual and gender based violence.

In CAR, two third of the population do not have access to clean drinking water or health facilities, and even where facilities do exist; there is only one health worker per 7,000 people. Over 45,000 people faced a major food crisis and needed immediate assistance in 2012. The global acute malnutrition that occurred in the Vakaga six months ago have raised to 21 per cent rates, while severe acute malnutrition was at 7 per cent, which is three times above the emergency threshold. A recent survey on poverty levels showed that 62 per cent of households live below the poverty line (on less than \$1.5 per day). Poverty affects mostly rural areas and the unemployment rate has reached 20.3 per cent.

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