

UNICEF Central African Republic (CAR) Situation Report

Date: 20 May 2013

Reporting Period: 9 May-20 May 2013

Headlines

- Access to those in need improves as humanitarians continue to increase emergency response in zones around the country.
- On 15 May, UN envoy urges Security Council to bolster security and consider sanctions against perpetrators of human rights violations.
- Law and order has yet to be restored in the capital and throughout the country.
- Attacks on civilians continue, as does intimidation, crime, kidnapping, arbitrary arrests and theft.
- The UNICEF warehouse was broken into again on the night of 10 May.
- On 10 May, a UNICEF-OCHA mission took place to conduct RRM assessments and distribute supplies on the Bangui-Damara-Sibut axis.
- In preparation for the measles campaign in Bangui, 246,500 vaccines arrived in Bangui on 15 May, among which 100,000 purchased will be used to improve routine measles vaccination in high-risk regions.
- UNICEF continues to distribute life-saving supplies and is providing emergency health, nutrition, protection, and water/sanitation support to the affected population in partnership with INGOs present on the ground as access permits.

OVERALL ESTIMATED
AFFECTED POPULATION

4.6 million

CHILDREN AFFECTED BY
THE CRISIS

> 2.3 million

INTERNALLY DISPLACED
POPULATION

> 206,000

NEW REFUGEES*

> 49,000

UNICEF IMMEDIATE
FUNDING GAP

>US \$23 million

*Before the 24 March coup, there were already nearly 190,000 CAR refugees in Cameroon, Chad, DRC and South Sudan, according to UNHCR.



On 15 May, 246,500 measles vaccines arrived in Bangui, 146,500 of which are for the emergency measles campaign next week and 100,000 to be used for routine vaccination.



Restocking the fridge at Sibut Hospital on 10 May after 8 weeks of vaccine stock outs. Sibut Hospital is one of the few facilities in the interior that still has a functioning refrigerator.

Situation Overview & Humanitarian Needs

Timeline of events

In **December 2012**, the Seleka (meaning Coalition in the local language) began its advance across the Central African Republic. A ceasefire agreement in Libreville was brokered on **11 January** and a new transitional national unity government was formed on **3 February 2013**. On **22 March**, the Seleka advanced towards Bangui while also taking key cities in the western part of the country. On **24**

March, the Seleka advanced on Bangui, taking control of the capital and the entire country. Shortly after seizing power, the self-proclaimed President Michel Djotodia dissolved the transitional government, parliament, and constitution. However, following international pressure, on **3 April**, Michel Djotodia issued a presidential order setting up a council to lead a transitional government until elections were held within 18 months (October 2014).

On 21 April, the Under-Secretary-General for Political Affairs, Jeffrey Feltman, met with CAR Prime Minister Nicolas Tiangaye reassuring support for the implementation of the Libreville Accord and expressed deep concern on the grave security situation and violation of human rights in CAR.

The International Contact Group (ICG) on CAR held its inaugural meeting in Brazzaville, Republic of Congo **on 3 May** 2013. The participants expressed their concern about the deterioration of the political, security and humanitarian situation in the Central African Republic and strongly stressed the need for coordinated regional, continental and international engagement.

On 10 May, following a 10-day investigation, Human Rights Watch accused members of the Seleka coalition in the Central African Republic of committing serious rights violations before and after this year's coup in the turmoil-torn nation. Summary executions, rape, torture and pillaging: Human Rights Watch says it has found compelling evidence of horrific rights violations committed by the Seleka rebel coalition in Bangui and elsewhere in the Central African Republic in recent months.

Current Situation

UNICEF estimates that the entire population of CAR's 4.6 million people is either directly or indirectly affected, but children who comprise 50 per cent of the population are bearing the brunt of the humanitarian crisis.

The following table shows the estimated affected population in Central African Republic:

| <i>Source: Population figures based on 2012 population projections based on the RGPH 2003, Census Central African Republic</i> | | | |
|--|---------------|---------------|---------------|
| | Total* | Male* | Female |
| Total Affected Population = Total Population | 4,663,725 | 2,331,866 | 2,331,866 |
| Children Affected (Under 18) | 2,303,880 | 1,151,940 | 1,151,940 |
| Population cut off from basic services since December | 1,200,000 | 600,000 | 600,000 |
| Children cut off from basic services since December | 600,000 | 300,000 | 300,000 |
| Children Under Five (17.3% of total population) | 806,824 | 403,412 | 403,412 |
| Children 0-12 months (3.5% of total population) | 163,230 | 81,615 | 81,615 |
| Children 12-59 months (13.8% of total population) | 643,594 | 321,797 | 321,797 |
| Pregnant women (4.40% of total population) | 205,204 | N/A | 205,204 |
| Children Under Five with Severe Acute Malnutrition (SAM) | 13,500** | Not available | Not available |
| Children Under Five with Moderate Acute Malnutrition(MAM) | 44,000** | Not available | Not available |
| Total Displaced Population | 206,000** | 103,000 | 103,000 |
| Children Displaced (Assuming 50% of the total displaced population) | 103,000** | 51,500 | 51,500 |
| Affected Families (5 persons each family) ¹ | 932,745 | N/A | N/A |
| Estimated number of primary school aged children (6-11 years old) | 746,196 | 373,098 | 373,098 |
| Estimated number of pre-school aged children (3-5 years old) (9.9% of total population) | 461,709 | 230,854 | 230,854 |
| Note: *Estimated 50% of male and female population. ** these figures are expected to increase once data is available | | | |

¹ African development Bank (AFDB), 2011 - Average of household size in Central African Republic.

Displacement continues throughout the country as families seek to find safe spaces away from attacks and violence. The number of internally displaced people is now estimated at 206,000. UNHCR is currently estimating close to 49,000 refugees, of which the large majority are in the Democratic Republic of Congo.

Although humanitarian access to those in need remains extremely challenging in CAR due to on-going insecurity and heavy presence of armed groups, NGOs and the UN are making progress in pushing for humanitarian access to those most in need. The security situation remains tenuous as law and order has yet to be restored in the capital and throughout the country. The cantonment process was launched on 13 May; and a disarmament and removal of uniforms is ongoing in Bangui by the authorities with reportedly 200 troops already disarmed and another 400 planned in coming days. However, the process has been ad hoc without sustainable options proposed to those who have been disarmed.

UNICEF continues to work with partners on the ground to respond to the emergency wherever access permits. Despite challenges of access and security, UNICEF and partners are continuing rapid assessments and bringing emergency support to affected areas.

NGO partners are currently present in the following areas (those in bold denotes current partnership agreement with UNICEF):

| NGO | Current Location/Axe | Planned Missions over next two weeks | Sectors (includes all sectors the NGO is engaged in in the country-not necessarily in partnership with UNICEF) |
|----------------------------|--|--------------------------------------|--|
| ACF | Bangui-Damara-Sibut-Dekoa, Nola, Bossangoa | Bobila | RRM, Nutrition, Food Security, WASH |
| ACTED | Bossangoa, Bozoum, Paoua, Zemio, Bangui | Bangassou, Ouham Pende | RRM, Food Security, NFIs, Education, Emergency Shelter |
| COOPI | Obo, Mboki, Zemio, Paoua, Berberati | Grimari-Bambari-Ippy-Bria | Child Protection, Education, WASH, Food Security |
| Save the Children | Kaga Bandoro, Mbres | Kaga Bandoro, Mbres | Child Protection, Nutrition, Health |
| Mercy Corps | Bangui, Bouar | Bambari, Bangassou, Rafai | Child Protection, GBV, Food Security, Education, |
| Merlin | Bouar, Obo, Bangassou | Obo, Bangassou | |
| IMC | Bria, Bambari, Tiringulu, Sikkekede, Birao | | Health, Nutrition, Protection, GBV |
| PU-AMI | Ndele, Paoua | | Health |
| MSF France | Carnot (hospital +2 health centers), Paoua (hospital +10 Health centers) | | Health, Nutrition |
| MSF Holland | Bobila, Zemio, Bossangoa | | Health, Nutrition |
| MSF Spain | Kabo, Batangafo, Ndele | | Health, Nutrition |
| Solidarites | Ouham | | WASH, Food Security, Nutrition, Education. |
| COHEB | Lobaye | Lobaye | Nutrition |
| EMERGENCY Pediatric | Bangui | | Health |
| DRC | Paoua, Bangui | | WASH, shelter, education, protection, early recovery |

On 10 May, a UNICEF-OCHA mission took place to conduct RRM assessments and distribute supplies on the Bangui-Damara-Sibut Axis. The main hospital in Sibut was functioning, with an average of 50 consultations per day, with a full staff, but no doctors. MSF had been supporting the hospital from January until 31 April and had left a stock of supplies (partially provided by UNICEF) of drugs (including ARVs and ACTs), Plumpy Nut and therapeutic milk. They were completely out of vaccines and CDV tests as well as anti-TB. A nurse in Sibut noted there had been 3 suspected cases of measles which were sent to the lab in Bangui for analysis. Malaria was the most frequent illness for children under five followed by diarrhoea. The Galafondo Health Center was also functioning with an existing one month stock of drugs from MSF/UNICEF but there were no vaccines and no functioning fridge. No other health centers on the axis were seen to be open or functioning including Damara Health Center which has been closed since the coup. The population in Damara said they are treating illnesses traditionally at home. Three cases of severe and eight cases of moderate malnutrition were being treated at the UNT/A in Sibut, the only one currently functioning along that axis.

Not one of the 78 schools along the Bangui-Damara-Sibut axis is open; private schools also remain closed. Children were visibly present among the ranks of Seleka on the Bangui-Damara-Sibut road and in the town of Sibut.

For WASH, along the Bangui-Damara-Sibut axis a number of water points (wells) with broken hand pumps are in need of repair. In Sibut, 10 out of the 14 water points were not functioning.

In response to a measles outbreak in Bangui, UNICEF and WHO working with the Ministry of Health and partners Merlin, IMC, ACF, and PU-AMI are conducting an emergency measles campaign in Bangui from 22-26 May. The campaign is in response to eight positive test results discovered in Bangui in the month of April. An estimated 125,000 children aged 6 to 59 months will be vaccinated in Bangui next week, and will receive Vitamin A and Abendazole.

Security

- Since the Seleka seized Bangui, it is unable to restore law and order across the country. Attacks on civilians continue, as does intimidation, burning of houses, crime, arbitrary arrests, and theft.
- Fractures have deepened within the coalition, hampering the Seleka leadership's control over its own elements. An attempted coup was reported to have been made on 14 May as tensions rise between the two of the main groups struggling for control.
- Fighting in Gobongo and 36 Villas on 10 May resulted in 1 woman, 3 children, and 2 men killed in Gobongo and a few others reported killed in 36 Villas. Security in Bangui remains highly volatile with heavy presence of armed men and boys and tension in the quarters is high.
- The UNICEF warehouse was broken into on the night of 10 May. The official report is that 5 people came to the warehouse in a taxi with a grinder machine, unsealed the warehouse, took approximately 280 cartons of tarpaulins (5 tarpaulins per carton), some soap, a box of Plumpy Nut and a few miscellaneous items, and then re-sealed the warehouse at which point they were intercepted by the authorities. All stolen stock was recovered on the spot.
- Some Seleka elements continue to demand the immediate payment of allowances that were promised to them prior to the capture of Bangui adding to growing dissent.

RRM Assessment Results and UNICEF Key Actions to date

UNICEF is coordinating with UN agencies and INGO partners on the ground to deliver immediate support for vulnerable populations that are accessible.

The UNICEF-led rapid response mechanism (RRM), a system supported with ECHO funding, has now been conducted on the following 4 prefectures: Bangui, Kemo, Ouham, and Hautte Kotto, revealing dire humanitarian needs in the following sectors: WASH, Health, Nutrition, Education and Food

Security. As of 14 May, additional assessments have been conducted by Save the Children in Ouaka and Nana-Gribizi and in Lobaye by ACF, for which the reports will be forthcoming.

| RRM Assessments and other data | Key Actions 9-17 May | | | | | | | | | | | | | | | | |
|---|---|---------|-------|-----|--------------------|-------|--------------------|-------|--------------------|---------|--------------------|---------|------------------|-------|--------------------|----------------------------|--|
| <div data-bbox="204 383 280 461"> </div> <div data-bbox="300 405 402 434"> <p>HEALTH</p> </div> <ul style="list-style-type: none"> ➤ 27% of the questionnaires received state that there are no health facilities available. ➤ 12% of the questionnaires have registered that there are no health personnel available. ➤ 34% of the questionnaires report that there are no medicines available. ➤ 24% of the questionnaires reveal that there is risk of pandemic. ➤ 41% of the questionnaires received report an interruption of the health services previously provided. ➤ 34% of the questionnaires report an increased level of patients accessing health services. | <p>In preparation for the measles campaign in Bangui, 246,500 vaccines arrived in Bangui on 15 May, among which 100,000 purchased will be used to improve routine measles vaccination in high-risk regions. UNICEF is working with the MOH and the health cluster (WHO, Merlin, IMC, ACF, PU-AMI) to vaccinate 125,000 children aged 6-59 months. The measles campaign, which runs from 22-26 May in Bangui, is in response to eight positive test results discovered in Bangui for the month of April.</p> <p>UNICEF provided 28,000 insecticide treated nets to MSF Spain for routine distribution in Kabo, Bantangafo and Ndele to children under five and pregnant women.</p> <p>UNICEF provided additional health supplies to the EMERGENCY pediatric clinic and the Pediatric Hospital in Bangui.</p> <p>UNICEF distributed the following vaccines to the hospital in Sibut:</p> <table border="1" data-bbox="722 1122 1394 1429"> <thead> <tr> <th>Vaccine</th> <th>Doses</th> </tr> </thead> <tbody> <tr> <td>BCG</td> <td>1,000 doses</td> </tr> <tr> <td>Polio</td> <td>2,000 doses</td> </tr> <tr> <td>PCV13</td> <td>1,000 doses</td> </tr> <tr> <td>Measles</td> <td>1,000 doses</td> </tr> <tr> <td>Tetanus</td> <td>600 doses</td> </tr> <tr> <td>Penta</td> <td>1,000 doses</td> </tr> <tr> <td colspan="2">Plus accompanying syringes</td> </tr> </tbody> </table> | Vaccine | Doses | BCG | 1,000 doses | Polio | 2,000 doses | PCV13 | 1,000 doses | Measles | 1,000 doses | Tetanus | 600 doses | Penta | 1,000 doses | Plus accompanying syringes | |
| Vaccine | Doses | | | | | | | | | | | | | | | | |
| BCG | 1,000 doses | | | | | | | | | | | | | | | | |
| Polio | 2,000 doses | | | | | | | | | | | | | | | | |
| PCV13 | 1,000 doses | | | | | | | | | | | | | | | | |
| Measles | 1,000 doses | | | | | | | | | | | | | | | | |
| Tetanus | 600 doses | | | | | | | | | | | | | | | | |
| Penta | 1,000 doses | | | | | | | | | | | | | | | | |
| Plus accompanying syringes | | | | | | | | | | | | | | | | | |
| <div data-bbox="204 1507 280 1585"> </div> <div data-bbox="300 1541 443 1570"> <p>NUTRITION</p> </div> <ul style="list-style-type: none"> ➤ 83% of the questionnaires report that food sources have changed as a result of the conflict. ➤ 83% of the questionnaires report a bad status of food stock. ➤ 41% of the questionnaires report a negative impact on food in the market (i.e., increased price, less food available, etc..) ➤ 51% of the questionnaires reported that there are heavy crop losses. ➤ 37% of the questionnaires received have reported a negative impact on livestock, 39% on agricultural | <p>In Sibut, UNT, 3 cases of severe and 8 cases of moderate malnutrition are being treated. The UNT was the only nutritional center on the axis noted to be open. UNICEF distributed 3 cartons of Plumpy Nut and two cartons of therapeutic milk for 3 week supply with current caseload to the UNT in Sibut.</p> <p>The Nutritional needs in Bangui are being covered under the on-going ACF supported fixed and ambulatory therapeutic feeding program in Bangui and nearby areas. 3 therapeutic nutrition centres and 12 ambulatory nutritional centres are being supported to be able to cover the treatment of almost 4,000 severe acutely malnourished children in Bangui. A new agreement between UNICEF and ACF is being finalised for another 12 months to ensure treatment of moderate and severely malnourished children in Bangui, while supplies have been provided to ACF for the UNT in Bossangoa.</p> | | | | | | | | | | | | | | | | |

| | |
|--|--|
| <p>products stocked and 61% on the availability of seeds.</p> <p>More than 80,000 people are estimated to be at risk of severe food insecurity during the upcoming lean season from May to September, and 57,000 children under 5 are at risk of moderate or severe malnutrition. If there is no rapid respond to mitigate this situation, the percentage of SAM will be likely to increase.</p> | |
| <p> EDUCATION</p> <ul style="list-style-type: none"> ➤ 54% of questionnaires report that no schools have been affected with 12% only partially or lightly affected. ➤ 39% of the questionnaires report no schools damaged and 10% have reported some level of damage. ➤ 44% of the questionnaires report that children were not attending school. ➤ 24% of the questionnaires report that the schools are used to shelter people. <p>The only schools found to be open since the coup include: 3 private schools in Bangui, 4 catholic schools in Kaga Bandoro and the majority of schools in the prefecture of Haut Mbomou.</p> | <p>The mission to Sibut found not one of the 78 schools along the Bangui-Damara-Sibut axis to be open. Even private schools were closed and the community noted that schools had been badly pillaged of tables and benches. UNICEF provided recreation kits to community animators in Sibut and Galafondo in an effort to encourage play and active engagement among children out of school. The surrounding community members, including children, were also sensitized on the importance of play and sport and the use of the kits.</p> <p>UNICEF and partners are exploring immediate support to engaging children in play and basic education, using existing schools and building the confidence of parents, teachers and community members to begin to re-engage positive activities for children, progressively scaling up to re-opening of schools as security allows. An education planning workshop took place from 15-18 May in Yaounde with government counterparts.</p> |
| <p> WASH</p> <ul style="list-style-type: none"> ➤ 80% of the received questionnaires have reported problems with garbage. ➤ 74% of the questionnaires have reported difficulties in accessing waters. ➤ 49% of the received questionnaires registered scarcity in the availability of drinking water in the households. ➤ 12% of the received questionnaires have also registered problems with the drainage system. <p>In Sibut, 10 out of the 14 water points were not functioning and a number of water points (wells) with broken hand pumps along the Bangui-Damara Sibut axis need immediate repair.</p> | <p>During the mission to Sibut, 1 water point hand pump was repaired. ACF is engaging their teams to conduct water point repair on that axis over the next few weeks.</p> <p>Planned for this week, the national water company (SODECA) and the national water and sanitation unit (ANEA) will conduct an assessment on the installation of 12 water tanks with distribution kits to ensure water supply at the main hospitals and health centers in Bangui.</p> |



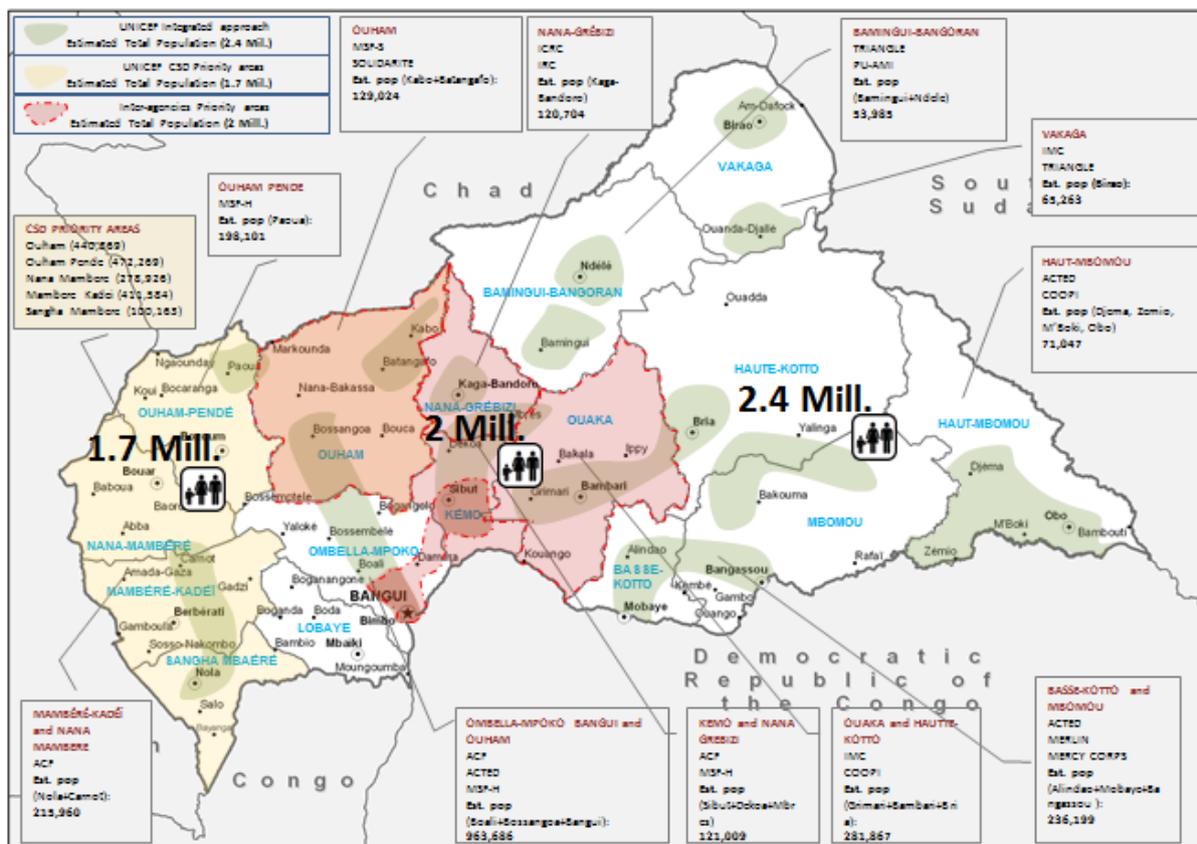
CHILD PROTECTION

RRAs and other sources show protection continues to be a major concern with an increase in documented cases of GBV, unaccompanied children and re-recruitment of child soldiers.

Children were visibly present among the ranks of Seleka on the Bangui-Damara-Sibut axis. In Sibut, a decrease of GBV cases were noted following the reduction of numbers of armed groups along that axis but it remains a major concern of the sub cluster and the humanitarian.

In Bangui, an assessment on 17 May at one of the main centers for street children still operational revealed the number of children almost doubled in March. While figures have dropped in May, there are still significantly more children per day than prior to the crisis with an average of 190 per day. UNICEF and partners continue to work in and around communities and families that have hosted children formerly associated with armed groups, as well as support the reunification and reintegration of these children with their families and original communities.

The map below shows the planning figures that UNICEF is using together with partners for emergency response along the main axes and the most affected zones.



Interagency Collaboration

UNICEF continues to actively engage with the humanitarian community in CAR –NGOs and UN agencies - to effectively plan and engage in the provision of immediate humanitarian response.

Funding

The CAP for CAR is now 30% funded, with \$40 million secured out of the initial \$136 million required. However, due to the deterioration of the humanitarian situation in the country since the military takeover, humanitarian needs have significantly increased since December. In addition, the continued looting of humanitarian bases, warehouses, and vehicles has further impeded the delivery of emergency, life-saving interventions in Bangui and the affected prefectures. The CAR CAP is being revised as per the mid-year review to reflect the current needs in CAR which have significantly increased across the country.

CERF requests have been funded over the last week and UNICEF has received \$1,638,000 for health and nutrition, \$362,000 for child protection and GBV, and \$256,000 for emergency WASH in Bangui.

UNICEF's revised response plan, in line with the latest crisis, demonstrates that the funding needs have more than doubled since before the coup in order to address the most pressing needs of vulnerable population throughout the country.

| Sector | Initial HAC 2013 requirements | Additional requirements – May 2013* | Total 2013 requirements** | Income through UNICEF and donors | Funding gap |
|-----------------------------|-------------------------------|-------------------------------------|---------------------------|----------------------------------|-------------------|
| Nutrition | 1,494,255 | 3,427,745 | 4,922,000 | 1,885,200 | 3,036,800 |
| Health | 1,588,950 | 6,746,550 | 8,335,500 | 3,581,200 | 4,754,300 |
| Water, Sanitation & Hygiene | 995,100 | 3,259,700 | 4,254,800 | 179,300 | 4,075,500 |
| Child Protection | 5,073,806 | 1,462,494 | 6,536,300 | 1,438,900 | 5,097,400 |
| Education | 1,086,986 | 1,842,314 | 2,929,300 | 1,050,500 | 1,878,800 |
| Non Food Items (NFI) | 1,277,848 | 4,163,452 | 5,441,300 | 759,000 | 4,682,300 |
| Total | 11,516,945 | 20,902,255 | 32,419,200 | 8,894,100 | 23,525,100 |

*In April and May 2013, requirements were revised upwards following the coup d'état of 24 March

**\$150,000 in Cluster Coordination costs have been included in the sector budgets above.

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

UNICEF wishes to express gratitude to all public and private sector donors for the contributions and pledges received, which have made the current response possible. UNICEF would especially like to thank National Committees and donors who have contributed 'non-earmarked' funding. 'Non-earmarked' funding gives UNICEF essential flexibility to direct resources and ensure the delivery of life-saving supplies and interventions to where they are needed most – especially in the form of longer-term and predictable funding and in strengthening preparedness and resilience. Continued donor support is critical to continue scaling up the response.

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