

# HUMANITARIAN NEEDS OVERVIEW 2022

## Central African Republic

English Summary

November 2021



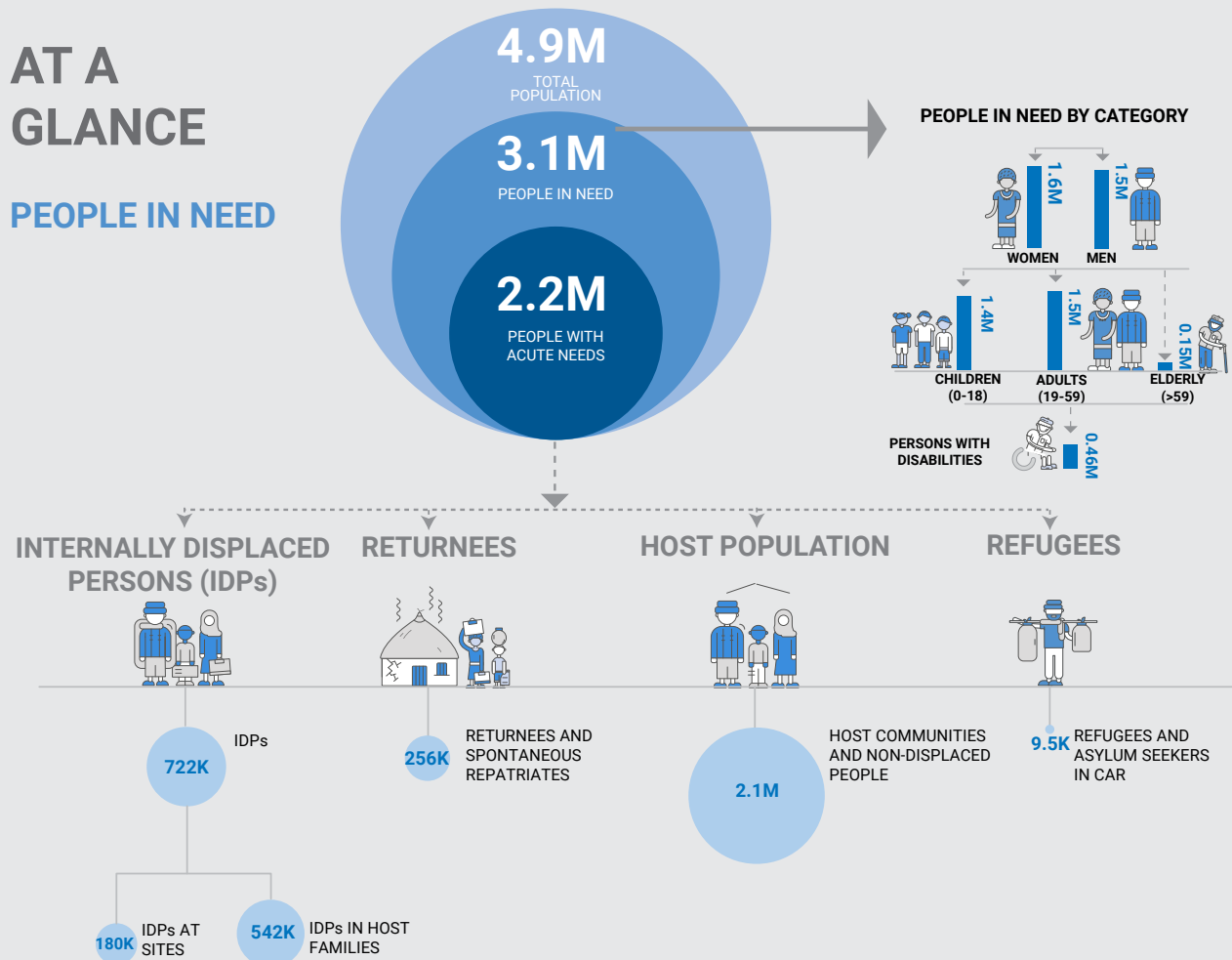
Internally displaced girls walk through the « Elevage » IDP site in Bambari, Ouaka Prefecture. ©OCHA / S. Modola

### About

The Humanitarian Needs Overview 2022 for the Central African Republic was consolidated by the United Nations Office for the Coordination of Humanitarian Affairs (OCHA) on behalf of the Humanitarian Country Team and other humanitarian partners. It presents a common understanding of the crisis in the Central African Republic, including the most pressing humanitarian needs and the estimated number of people in need of assistance and protection. The report provides an important basis to help guide joint strategic planning of the humanitarian response in 2022. This document presents a summary version of the Humanitarian Needs Overview 2022 in English. The original report in French can be downloaded at: [bit.ly/HNO2022](https://bit.ly/HNO2022)

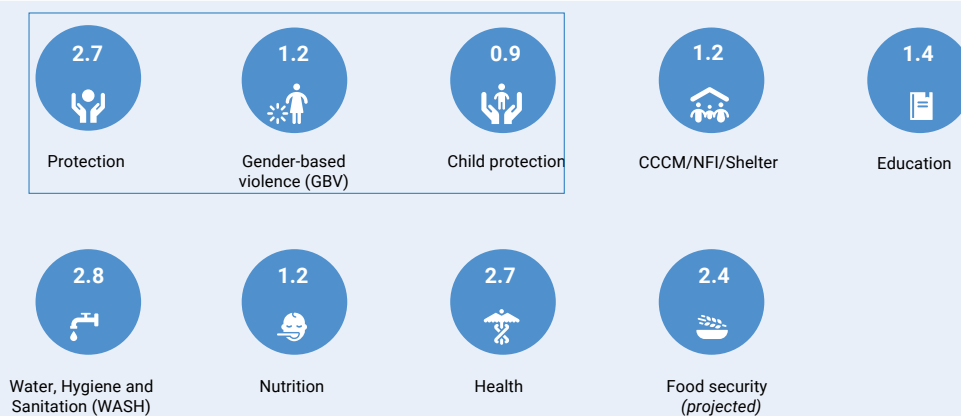
# AT A GLANCE

## PEOPLE IN NEED



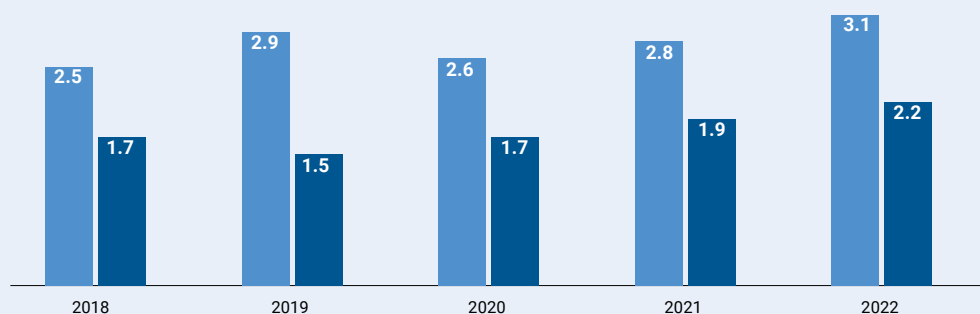
## PEOPLE IN NEED BY SECTOR

(million)



## PEOPLE IN NEED

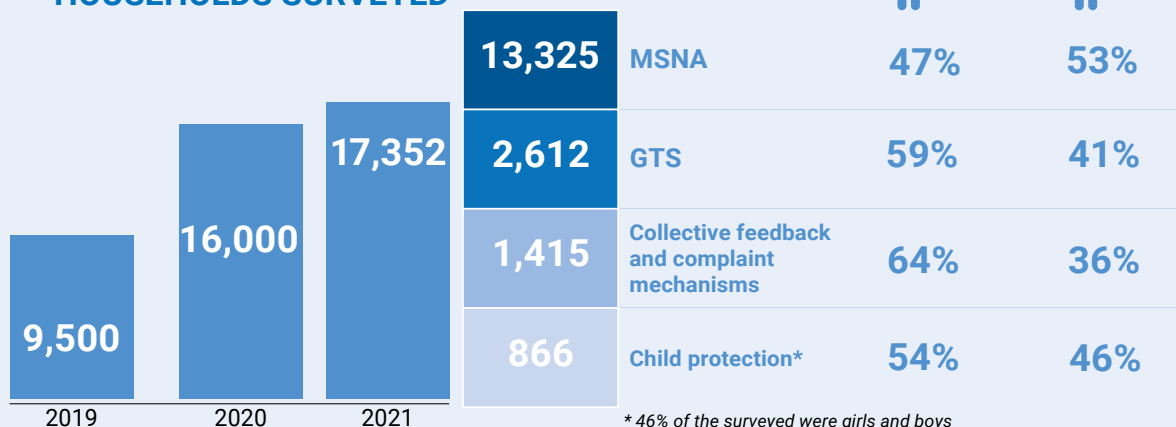
■ People in need  
■ People with acute needs  
(million)



## THE VOICE OF THE PEOPLE IN NEED

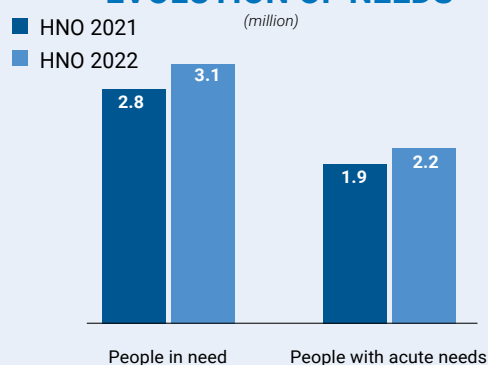
**Despite the complex operational context, humanitarian actors surveyed more than 17,352 households 8% more than the previous year.**

### HOUSEHOLDS SURVEYED

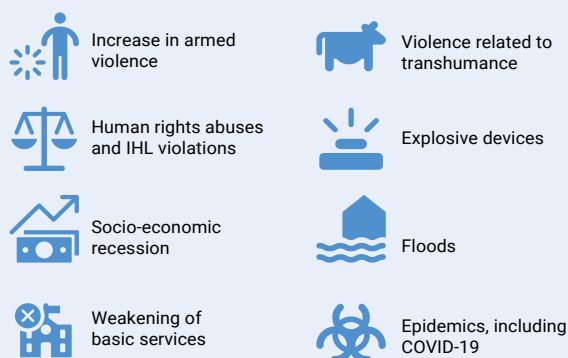


**Due to several aggravating factors, the number of people in need and those with acute needs increased by 10.7% and 15.8% respectively.**

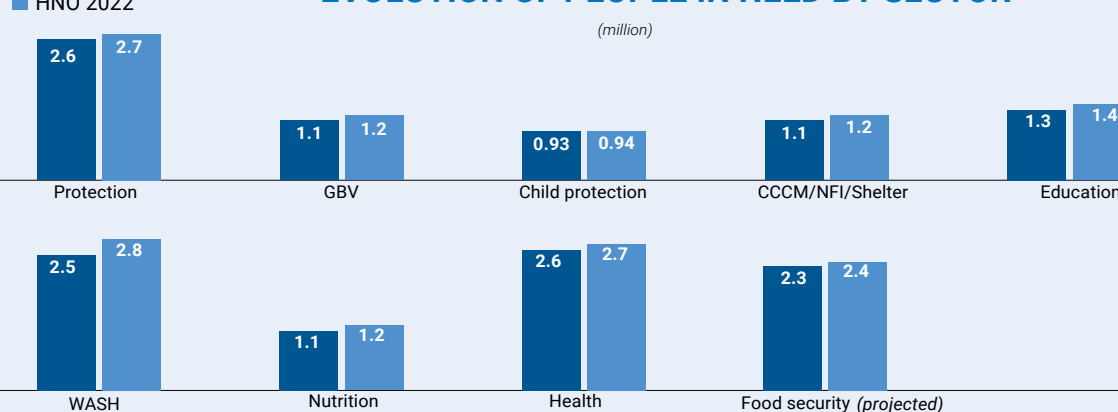
### EVOLUTION OF NEEDS



### AGGRAVATING FACTORS



### EVOLUTION OF PEOPLE IN NEED BY SECTOR



The humanitarian emergency in the Central African Republic has reached levels not seen since 2015 due to the new conflict dynamics observed since December 2020. In 2022, 3.1 million people need humanitarian assistance and protection, 63 per cent of the population. Of these, 2.2 million people have needs that are so complex and severe, that their physical and mental well-being is at risk. This is an increase of 16 per cent, or 300,000 more people in severe humanitarian needs compared to 2021.

Recurring violence, persistent shocks and the degradation of basic services have significantly worsened the living conditions of Central Africans in 2021. At the same time, people's resilience continues eroding under the weight of successive crises and economic recession, forcing nearly the entire population to adopt negative coping mechanisms.

These are the findings of a joint multisectoral analysis<sup>1</sup> and an unprecedented consultation effort undertaken by the humanitarian community with the people in need, published in the Humanitarian Needs Overview (HNO) 2022 for the Central African Republic. The affected people were at the heart of the analysis, with 17,300 households interviewed, including in the most remote corners of the country. The interviews shed light on how the current crisis affects people's living conditions, services and access, and inform about people's priority needs.

### Exacerbation of needs

The number of human rights abuses and violations of international humanitarian law has increased as their nature has changed, with new risks to civilians such as explosive devices or the stigmatisation of entire communities, significantly increasing protection needs. The constant sense of insecurity is startling: three quarters of people are concerned about the safety of their family members. Sexual and gender-based violence (SGBV) has increased by 30 per cent compared to 2020 and sexual violence is considered the main security risk for women and girls.

The sectors with the largest number of people in need in 2022 are water, hygiene and sanitation (WASH); health care; protection; and food security, with between 2.4 and 2.8 million people needing assistance to access basic services and goods essential for survival. Of all sectors, the need for WASH has increased the most since 2021, with 12 per cent or 300,000 more people needing assistance to access clean water and sanitation facilities. The risk of diseases and malnutrition has risen as fast as access to water decreased. In the context of the conflict, food insecurity has worsened due to reduced access to fields, market disruptions and the decline in agricultural production, the main source of livelihoods.

### Solid basis for the humanitarian response

To meet people's needs in 2022, humanitarian actors in collaboration with the Central African government elaborate a common strategy to guide their interventions, based on the insights of the HNO 2022. This strategy is detailed in the Humanitarian Response Plan 2022 for the Central African Republic.

Thanks to generous donor contributions, as of 13 December 2021, the Humanitarian Response Plan 2021 was funded at 86 per cent of the US\$ 444.8 million required. From January to September 2021, humanitarian partners provided lifesaving, multisectoral assistance to 1.7 million people – 94 per cent of the people targeted in the response plan despite the increasingly volatile security context. Humanitarian partners are counting on donors to remain committed and enable humanitarian workers to meet ever-growing needs in the Central African Republic in 2022.

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<sup>1</sup> Multisectoral Needs Assessment in the Central African Republic, September 2021; [bit.ly/MSNA2021](https://bit.ly/MSNA2021) (French)



## Part 2: The humanitarian situation and severity of needs

### People's physical and mental well-being

The deterioration of the protective environment, the decline in the availability of basic services and new humanitarian access constraints are all indicators that people's physical and mental well-being has deteriorated in 2021. As a result, 2.2 million people are in severe humanitarian need in 2022 – 16 per cent more than in 2021.



A displaced woman who was injured while collecting fruit near the « Lazare » IDP site in Kaga-Bandoro, Nana-Gribizi Prefecture. ©NRC / T. Peyre-Cosa

#### The mapping of the conflict overlaps with protection priorities and the most severe humanitarian needs.

From Ngaoundaye to Bambouti and Kabo, needs have skyrocketed in the areas affected by the violence. The conflict has forced people to consume unsafe water and has prevented them from producing food. Three quarters of people identified the crisis as the main cause of food insecurity in an Emergency Food Security Assessment undertaken in August 2021. Conflict-induced inflation has made it difficult for people to access markets; attacks on and lootings of health facilities have denied people access to basic health care. The Nana-Gribizi, Ouaka and Ouham-Pendé Prefectures are most affected by the crisis. More than a quarter of the violent shocks in 2021 were recorded in these three prefectures. As a result, a third of all people with needs related to their physical and mental well being, or 680,000 people, live in Nana-Gribizi, Ouaka and Ouham-Pendé Prefectures.

The survival of new populations is threatened, such as people fleeing armed conflict and hiding for weeks in the bush, forests and fields. Their living conditions and survival mechanisms are often hardly known to humanitarian organizations. But the non-displaced population has also not been spared the agony of the conflict. The reception of a growing number of internally displaced people (IDP) has increased the pressure on resources, such as water, food supplies, health care and education.

The conflict has paralyzed entire communities, mainly in the west (Abba, Ngaoundaye, Kouï, Niem, Yelewa) but also in the centre (Grévaï) and east (Bakouma). Unable to move because of armed groups, military operations or explosive devices, people's freedom of movement and access to services have collapsed. In Ouham and Nana-Gribizi, host communities are the most affected by restrictions on movement; three quarters of people have had their movements restricted. Increasing numbers of people are also being targeted and discriminated against because of their presumed affiliation to a party to the conflict, including on ethnic or religious grounds. Fulani and Muslims have been the main victims of these dangerous associations and subsequent human rights abuses.

The living conditions of those most in need of assistance, such as SGBV survivors, people with disabilities, returnees or people living in hard-to-reach areas, have not improved significantly. In hard-to-reach areas such as the Kouï Sub-prefecture, informants reported security incidents in all 32 localities, as in 2020. In these remote and unstable areas, the number of places where undeveloped springs or surface water are people's main source of water has increased tenfold in one year, from 4 to 59 per cent. Sub-prefectures like Bria are the exception, where conflict intensity has decreased and humanitarian aid has been able to make a difference and alleviate people's suffering.



Women and children take refuge in a church compound following the outbreak of violence in early 2021. ©OCHA / S. Modola

## Growing gap between the physical and mental well-being of urban and rural populations

The gap between the struggle to survive in towns and rural areas has further been exacerbated by the post-electoral crisis. Infant mortality is almost twice as high in rural than in urban areas (73 and 48 deaths per 1,000 births respectively). And women and girls are twice as likely to have undergone female genital mutilation in rural than in urban areas (28 and 12 per cent respectively).

In most localities in Bambouti, Ouanda-Djallé and Yalinga Sub-prefectures, the least populated in the country and hard-to-reach, no child immunisation campaign has been organised in 2021, jeopardising the health of more than 5,000 children. In the four

rural sub-prefectures of Obo, Markounda, Bocaranga and Baboua, people's need for health care are least met, with more than 80 per cent of the population in need. While its geographical location in the far south-east isolates Obo, Markounda, Bocaranga and Baboua have been de facto cut off due to the conflict, explosive devices and related insecurity. In rural areas affected by violence, mortality rates are often higher because access to services and humanitarian aid is limited. People in Grimari, Kouango and Ippy were, for example, the most likely to report having lost a family member in the last six months, whether due to illness or conflict (52, 48 and 41 per cent respectively).

## Well-being undermined by the collapse of essential services and reduced access to food

The need for WASH has increased the most of all sectors with 12 per cent, becoming people's top priority. Conflict and displacement are the direct cause of this deterioration. Water facilities are no longer functional due to vandalism or the lack of maintenance, containers for collecting and storing water have been lost during people's flight, wells have been contaminated and insecurity has limited access to water points that are still functioning.

The risk of diseases and malnutrition is increasing as fast as access to food and water is decreasing. Yet civilians have seen their access to basic health services and food decrease as access to water has declined, creating a dangerous juxtaposition of vulnerabilities. Food insecurity has worsened due to reduced access to fields, market disruptions and the decline in agricultural production – the main source of livelihoods. In Kabo, Mingala and Mbrès Sub-prefectures, more than half of the population have a limited or poor food consumption score and more than one in ten households is at stage 4 or 5 on the hunger scale. In these sub-prefectures, mobile clinics had to be suspended due to insecurity and health facilities were occupied by weapon bearers while people relied on humanitarian aid to survive. The example of the Ouham-Pendé Prefecture shows a direct correlation between the reduction of access to humanitarian assistance, basic services and fields on the one hand, and the deterioration of people's well-being on the other. In 2021, people in Ouham-Pendé suffered the highest number of violent shocks in the country and the number of people without access to water has tripled. Four of its six sub-prefectures face a food emergency (Phase 4) in 2022, according to the Integrated Food Security Phase Classification (IPC). As military operations, violence and the presence of

explosive devices have severely limited the ability of humanitarian partners to respond to these new needs, 58,000 additional people have developed critical problems related to their well-being.

Food security has decreased under the weight of armed violence, deteriorating livelihoods and the impoverishment of households. In 2022, 2.4 million people will be acutely food insecure, according to the IPC. The mapping of the conflict overlaps with access restrictions and food insecurity. From Ngaoundaye to Obo, Batangafo and Ippy, all sub-prefectures in the IPC emergency Phase 4 have been severely affected by conflict.

The nutritional status of girls and boys has significantly worsened. In 2022, 221,000 children require nutritional therapy, including 69,000 with severe acute malnutrition and 152,000 suffering from its more moderate form. Of particular concern is the deterioration of the nutritional situation in Basse-Kotto and Haut-Mbomou Prefectures in the south-east, where six sub-prefectures (Mobaye, Zangba, Satema, Mingala, Djema and Zémio) are expected to enter a critical nutritional phase (IPC Phase 4) during the lean season (April to August 2022), which is also the peak of the malaria season. In these sub-prefectures, access to water has such a significant impact on health and nutrition that WASH is considered the primary need of households. The Nutrition IPC in September 2021 classified two-thirds of the country (46 sub-prefectures) in Phase 3 (serious situation). The number of children and pregnant and breastfeeding women in need of emergency nutritional therapy has increased by 31 per cent in 2021.

## Mental health disorders are the invisible wounds of the crisis

Although at times more difficult to understand and treat than physical injuries, the effects of the crisis on people's mental health is striking. In most households, at least one person shows symptoms of mental disorder such as insomnia, unexplained fatigue and chronic headaches. In half of the households, at least one girl or boy over the age of 5 is affected (44 per cent).

Exposed to violence and often with poorer prospects for the future, IDPs living at sites (67 per cent) and returnees and repatriates (59 per cent) are most affected by psychological distress. The increasing threat of forced eviction does not bode well for their mental health. A survey of IDPs expelled from the « Elevage » site in Bambari conducted in June 2021 highlighted the extent of their stress and sense of powerlessness. Half of the interviewees were at risk of developing post-traumatic stress disorder and 83 per cent showed symptoms of moderate to severe anxiety.

The correlation between psychological distress and the severity of the crisis is evident. In the two prefectures where the proportion of people with acute needs is highest, Nana-Gribizi and Haut-Mbomou, the psychological burden is also greatest; more than 8 out of 10 people are affected by both. People in Haut-Mbomou are caught between the geographical isolation, cross-border tensions, the lack of basic services and abuses by armed groups. Nana-Gribizi in the centre of the country is not only the playground of several armed groups but also the crossroad of the seasonal cattle migration. In this context, displacement, human rights violations and SGBV have been a daily reality for years. With more than 200 in 2021, Nana-Gribizi and Haut-Mbomou, along with Nana-Mambéré, are also the prefectures with the highest number of protection incidents.

## People's living conditions

In 2022, 3.1 million people in the Central African Republic need humanitarian assistance and protection. The impoverishment of households and the degradation of basic services have had a significant impact on people's living conditions. Nearly two-thirds of people struggle every day to get food and water, access health care, have a roof over their head and send their children to school. Humanitarian needs related to living conditions have arisen in sub-prefectures that were considered stable only a year ago, such as Kouï and Bozoum in Ouham-Pendé Prefecture and Bossangoa in Ouham Prefecture.

## Access to health care under pressure from prices and the availability of services



A single, brown water source supplies IDPs and villagers in Siwa, Mbomou Prefecture. ©OCHA / A. Surprenant

Health care is a precious commodity that many families can no longer afford. After the rise in food prices, unforeseen health expenditures are the main shock experienced by the population, particularly returnees, repatriates and IDPs in host families, who have less access to free health care provided by humanitarian organizations at IDP sites. Women and people with disabilities face the highest financial barriers to health care. About 82 per cent of people living with disabilities

do not have access to health care because they lack financial means. In the Markounda Sub-prefecture, none of the surveyed households can afford to buy medication. For women in Markounda, medical care is their most important need, given that no maternity ward can be reached without using the roads where armed groups collect illegal taxes and pose a security risk.

In addition to increasing poverty, access to health care has decreased. One third of the country's 1,008 health facilities have been partially or totally destroyed during the conflict periods. As a result, 22 per cent of health facilities are dysfunctional. By the end of May 2021, 77 nutrition units, or one in five, were closed.

The range of services provided and hygiene conditions do not always preserve patients' health. Some 79 per cent of health facilities do not have a minimum WASH package, exposing patients and health personnel to increased risks of contracting COVID-19 or other diseases. Poor hygiene practices in health facilities expose malnourished children seeking therapy to the risk of medical complications.



## Compromised schooling of hundreds of thousands of children

The percentage of children aged 4 to 6 enrolled in school dropped from 52 per cent in 2020 to 33 per cent in 2021. IDPs in host families experience the greatest difficulties in enrolling their children in school, with 52 per cent of households citing the lack of financial means as a barrier. On average, half of all households face financial barriers and 20 per cent cite dysfunctional schools as a barrier.

A quarter (27 per cent) of all schools are not functional because they are damaged, lack teachers or are located in a conflict zone. In the Ouham and Ouham-Pendé Prefectures, eight out of 10 children from non-displaced, returned or repatriated families no longer go to school.

This significant drop-out rate of non-displaced children is a clear indication that the decline in living conditions no longer only affects those who had to flee, but also those who stayed or returned to unsafe areas.

**Children out of school face considerable protection risks.** In Bocaranga, one third of those in need of education also have acute needs in general. About 44 per cent of households have their children working to support the family. Meanwhile, schooling is considered among the three most important measures to prevent children from joining armed groups, by communities and children themselves.

## A precarious and unhealthy environment for the most vulnerable

The living conditions of IDPs have deteriorated compared to 2021. Only 7 per cent of displaced families at IDP sites live in a permanent shelter and more than half live in inadequate shelters or lack a protective roof – seven times the national average. Overcrowding and fragile habitats particularly affect the displaced people at IDP sites, returnees and repatriates. The only families whose housing situation improved significantly between 2020 and 2021 are those living where the humanitarian presence was strengthened, namely in Birao and Batangafo.

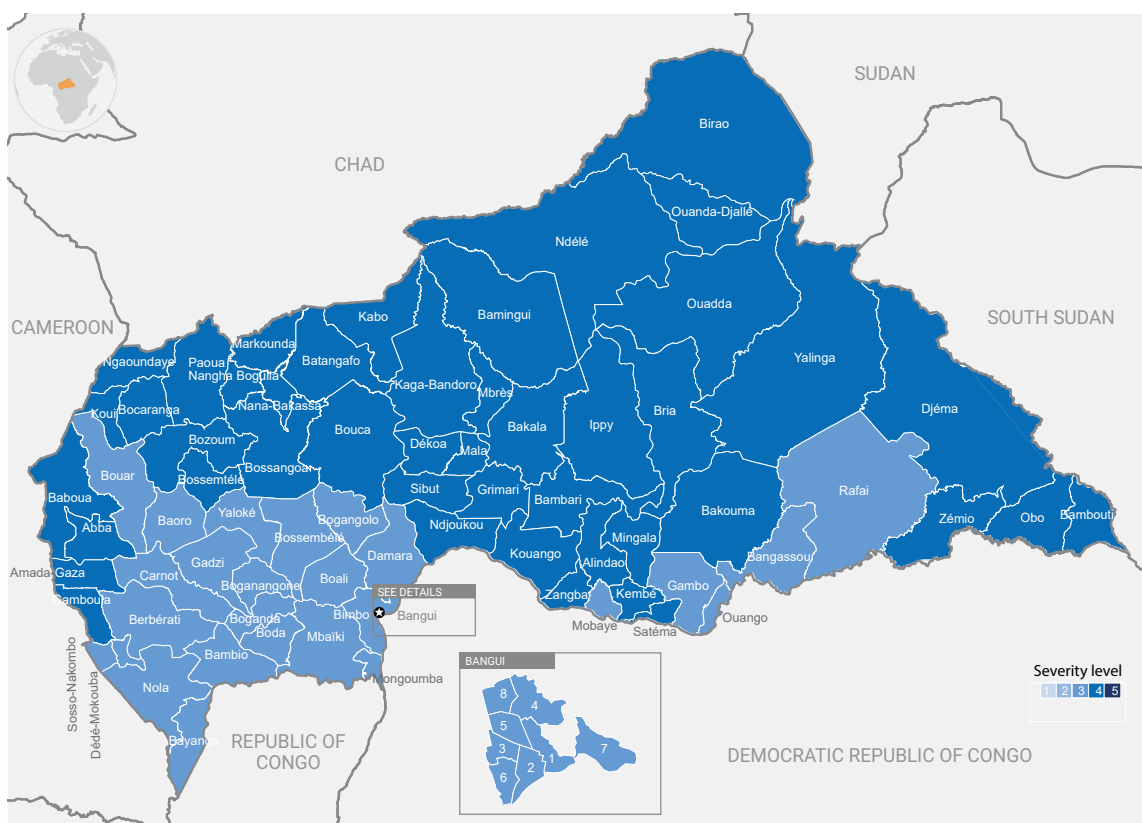
**On average, 61 per cent of people face leaks in their shelters during heavy rains; for IDPs living at sites, this rises to eight out of ten households.** Regardless of whether the displacement is preventive, short-term or long-term, returnees are often unable to return to

their former homes. A quarter of surveyed returnees could not return because their home was destroyed or occupied, or because of the trauma they associate with the memory.

In addition to housing difficulties, all population groups are affected by the increasing lack of drinking water, showers and latrines. About 1.3 million people use an undeveloped source every day and 70 per cent of people are dissatisfied with the available sanitation facilities, compared to 39 per cent in 2020. Under these conditions, 900,000 people are forced to defecate in the open. IDPs living at sites or with host families are most affected by this practice (31 and 33 per cent respectively), as latrines are not available in areas of displacement and insecurity makes access difficult when latrines are available.



## SEVERITY OF INTERSECTORIAL NEEDS, BY SUB-PREFECTURE



Following the latest wave of violence, living conditions in two thirds of the sub-prefectures are classified at severity level 4 of 5 (45 of 72 sub-prefectures).

## SEVERITY OF ACUTE INTERSECTORIAL NEEDS, BY SUB-PREFECTURE

