

Reporting Period: July and August 2020

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Highlights

Since the first case of COVID-19 was detected in the Central African Republic (CAR) in mid-March, the Ministry of Health and Population confirmed 4,711 positive cases including 62 deaths (as of 30 August). All the seven health regions of the countries have reported cases, with the capital Bangui being the most affected by the pandemic, where an estimated 17% of the population live. Since July the government's new diagnostic strategy limits testing to suspected cases and to those considered as "people at risk".

In July and August, CAR continued to experience clashes armed conflicts.

UNICEF and its partners supported continuing learning through radio education programmes and 23,076 children benefitted from lessons broadcasting.

12,159 people including 10,288 children under 5 received free essential care in conflict-affected areas and 2,094 children aged from 6 to 59 months suffering from severe acute malnutrition (SAM) were treated.

5,610 people gained access to safe water for drinking, cooking and personal hygiene in conflict-affected areas (including IDP sites)

Central African Republic Humanitarian Situation


unicef 
for every child

Situation in Numbers

 **1,200,000**
children in need of humanitarian assistance

 **2,600,000**
people in need (OCHA, August 2020)

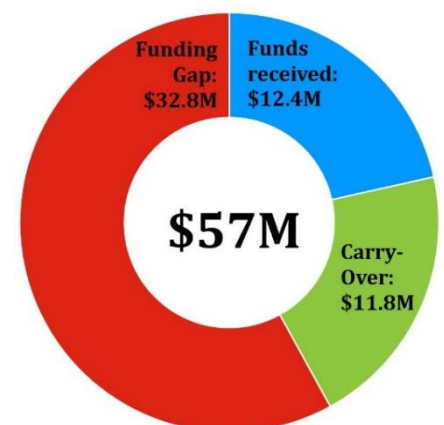
 **641,292** Internally displaced people (IDPs) (CMP, August 2020)

 **622,150**
of pending and registered refugees (UNHCR, August 2020)

UNICEF Appeal 2020






US\$ 57 million

Funding status* (\$US)



*Available funds include those received for the current year of appeal as well as the carry-forward

UNICEF's Response

	Nutrition	SAM admissions	35%
	Health	Polio vaccination	97%
	WASH	Safe water access	42%
	Child Protection	Children released from armed groups	35%
	Education	Education access	53%

Funding Overview and Partnerships

During the reporting period, a contribution was received from the Central African Republic Humanitarian Fund (CAR HF) to support nutrition interventions so to be able to respond to the increased caseload of severe and acute malnutrition. In addition, thanks to a new contribution from the Spanish Committee for UNICEF, more children released from armed groups will benefit from a comprehensive reintegration programme. To date, UNICEF has received \$12.4 million against the \$57 million required in the 2020 HAC with critical funding gaps in Health, Education, Communication for Development and Cluster coordination sectors. In the face of resurgence of conflict-related violence leading to more displaced children and families, and as the world's attention has turned to fighting COVID-19, continued donor support for the ongoing humanitarian crisis in CAR remains critical.

Situation Overview & Humanitarian Needs

Since the first case of COVID-19 was detected in the Central African Republic (CAR) in mid-March, the Ministry of Health and Population confirmed 4,711 positive cases including 62 deaths (as of 30 August). All the seven health regions of the countries have reported cases, with the capital Bangui being the most affected by the pandemic, where an estimated 17% of the population live.

Since July the government's new diagnostic strategy limits testing to suspected cases and to those considered as "people at risk". Thus, the observed drop in new cases should be interpreted with caution.

The more than 641,000 internally displaced persons (IDPs) are among the most at risk (Commission Mouvement de Populations-CMP). Indeed, in overcrowded sites, limited access to water, scarcity of adequate sanitary facilities and infrastructures and limited possibilities to apply social distancing measures increase the risks of COVID-19 transmission.

COVID-19 also has an impact on food security and nutrition in CAR. According to the latest alert from the Integrated Food Security and Humanitarian Phase Classification (IPC), more than half of the Central African population is acutely food insecure. Some families lost their income when the cost of living increased due to the pandemic. In addition, barrier measures have indirect negative effects in limiting access to places where poor families generally carry out daily paid work or on the cost of transporting goods. Food and non-food prices rose again in July, reaching their highest level since the beginning of the year. (REACH, August 2020)

UNICEF is actively involved in COVID-19's prevention and response in CAR and has designed a response plan aligned with the Government's one. UNICEF's plan comes in addition to the CAR HAC and is reported against separately. UNICEF CAR's COVID-19 sitreps can be found [here](#).

As the COVID-19 pandemic progressed in the country, CAR continued to experience clashes and conflicts, as well as inter-community tensions. The situation in the west of the country, particularly in the prefectures of Ouham Pendé, Nana-Mambéré and Mambéré-Kadéi, has been characterised by continuous instability. In July and August, the situation deteriorated further, marked by the expansion of armed groups, the increase in robberies and abuses against civilians and the hostilities shown against the government that forced many inhabitants of the affected areas to flee.

Schools began to gradually reopen in mid-July after being closed since 27 March, but the resumption of classes remains a major challenge. Lessons for the final classes continued in July and August in some parts of the country where available data were indicating a low COVID19 case low. In other parts of the country classes will keep gradually resuming in the next few months. Insecurity prevents some teachers and students from returning to their schools and in some locations, such as in Markounda (Ouham), some schools remain occupied by armed groups.

Finally, CAR continues to be one of the most dangerous countries in the world for humanitarian workers. Attacks against humanitarians continue to hamper the protection and work of humanitarian organizations.

According to the Office for the Coordination of Humanitarian Affairs (OCHA), since January to August 267 security incidents have affected humanitarian personnel.

The security situation remains tense in several areas, especially in the town of Ndélé in northeastern CAR, Grimari and Bambari (Ouaka) and in some further west localities in the prefectures of Nana Mambere, Ouham and Ouham Pendé.

Summary Analysis of Programme Response

Nutrition

Since January 2020, 13,720 children under 5 (2,094 for the reporting period), suffering from severe acute malnutrition (SAM) have been admitted and treated. With a SAM cure rate of 93.62 percent, a death rate of 1.15 percent, a defaulter rate of 4.10 percent and a non-response rate of 1.13 percent, the quality of the response is above the SPHERE minimum standards.

In addition, 543,334 children aged 6-59 months were supplemented with vitamin A, and 468,341 dewormed with albendazole.

Moreover, 70,189 pregnant and lactating women were reached with key education and promotion messages on infant and young child feeding (IYCF) practices by UNICEF and nutrition cluster partners.

According to the Nutrition Cluster mapping, there are currently 47 Inpatient Therapeutic Program (ITP) and 520 Outpatient Therapeutic Program (OTP) service points functioning in the country, accounting for 56% of national coverage.

Thanks to UNICEF support, 33 health districts out of 35 (94.2%) implemented the nutrition surveillance and early warning system.

Health

In July and August, 12,159 people including 10,288 children under 5 and 1,871 pregnant women received free essential care in conflict-affected areas. The most common conditions treated were malaria (41%), acute respiratory infections (28%) and diarrheal diseases (20%).

Out of the 1,871 pregnant women who received at least one prenatal consultation, 1,590 accepted to be tested for HIV, 43 tested positive and were put on antiretroviral treatment.

WASH

During the reporting period, UNICEF supported the Agence Nationale de l'Eau de et l'Assainissement (ANEA) in Kaga Bandoro (Nana-Grébizi) for the rehabilitation of six boreholes giving access to drinking water to 3,000 IDPs in Lazaret, Kaba and Ouandago sites. In Lazaret and MINUSCA sites, the Direction Générale des Ressources Hydrauliques (DGRH) with UNICEF support assures garbage collection activities for over 21,000 IDPs. In the same sub-prefecture, 26 emergency latrines and 18 showers have been built, giving access to sanitation facilities to 1,300 people.

In addition, 40 people including staff of partners' NGOs, community mobilizers, IDP delegates, youth leaders and the administrative authorities of Kaga Bandoro were trained on the use and maintenance of latrines in IDP sites and solid waste management.

In Bangassou (Mbomou), UNICEF ensured continuous supply of drinking water in the Eveche site for the benefit of 2,350 people.

In Katangombe (Nana-Grebizi) UNICEF distributed 55 WASH and dignity kits to 206 IDPs. In addition, a water point has been repaired to allow these people to have access to drinking water.

The WASH cluster maintained operational meetings with partners to support effective coordination and response to the needs of affected people. To date, UNICEF and Cluster WASH partners ensured provision of safe water to 425,565 people and sanitation facilities to other 137,651 people. It should be noted that the results of the hand washing behaviour change programmes have been adjusted to the COVID-19 response and are reported in the UNICEF CAR COVID-19 [sitreps](#).

Education

On 10 July, CAR announced the partial reopening of schools from 15 July, with priority for the classes that must take the end-of-year exams and in areas where available data showed low caseload of COVID19. UNICEF and partners from the education and WASH clusters put in place measures to facilitate the opening of schools in compliance with the COVID-19 guidelines. These activities are reported in the UNICEF CAR COVID-19 [sitreps](#). In the meantime, UNICEF supports continuing learning through radio education programmes and 23,076 children benefitted from broadcasted

lessons. 84 teachers were trained on COVID-19 barrier measures to help students resume classes in a safe and healthy school environment.

In Nana Mambere, Mabere Kadei, Sangha Mbaere, Haute Kotto and Nana Gribizi prefectures, UNICEF and partners distributed learning materials to 11,311 students including 4,637 girls.

Finally, a total of 24 school buildings, including 12 pre-school tents and 12 separate latrine blocks, were handed over to the Pedagogical Authorities of the Mambere-Kadei School District of Berberati.

At cluster level, education partners have mainly implemented activities to ensure a protective educational environment for children resuming classes and to strengthen the capacity of community teachers to improve the quality of teaching and to provide psychosocial assistance to children in an emergency context. In Haute Kotto and Bamingui Bangoran prefectures, 91 community teachers, including 16 women, received incentive bonuses and have been sensitized to children's right to education.

Child Protection

UNICEF continues to support NGO partners in gradually re-opening the Child Friendly Spaces (CFS) following the endorsement of the national minimum standards on implementing CFS in the context of COVID-19 by the Ministry for the Promotion of Families, Women and Protection of children. Between July and August 2020, 14,005 conflict affected children (including 6,076 girls) benefited from daily organized play and recreational activities through UNICEF supported CFS place in Ouham, Ouham Pendé, Kaga Bandoro and Ouaka prefectures. This included 3,266 (1554 girls) children newly enrolled in CFS during the reporting period and other 10,739 (4,522 girls) children enrolled in CFS activities in the previous period and who continued to attend the CFS activities.

As part of UNICEF efforts to promote community reintegration of children formerly associated with armed groups 249 children, including 54 girls, in Ouham, Ouham Pendé, Haute Kotto and Mbomou prefectures were identified, verified and registered in UNICEF supported reintegration programmes. They have been provided with social follow-up and their individual needs identified through case management. Out of a total of 108 children (including 55 girls) separated from their families, 69 children were either reunified or provided with alternative care through placement in foster families. Family tracing for the remaining caseload is ongoing.

229 new cases of gender-based violence (GBV) against children (including 197 girls) were registered and supported. This included 107 cases of rape, 34 cases of child marriage and 88 other cases GVB. The support provided included mainly social follow-up, individual counselling, psychosocial support and referral for medical care.

Rapid Response Mechanism (RRM)

In July and August a total of 14 alerts, including 13 related to violence, were published and shared with the whole humanitarian community, four Exploratory Mission (MEX) and six Multisector Assessments (MSA) were conducted and nine interventions carried out: a total of 43,782 individuals (including 7,478 children under five) have been assisted through NFI and 23,001 persons have benefited from Wash assistance.

The period was mainly characterized by the continuation of the military activities of armed group in the west of the country, apparently with the aim of disrupting the electoral process. Therefore, six interventions among the nine, were conducted in this area to respond to the needs of the growing displaced populations who were forced to flee.

Moreover, in the Northeast, following the clashes that broke out at the end of April between rival armed groups in the town of Ndele (Bamingui Bangoran) a NFI/Wash intervention was carried for 3,287 households. This intervention has followed a first response that took place in May (as reported in the previous sitrep) in Bamingui and on the axis reaching 1,185 families.

Thus, during the reporting period a total of 43,782 people (including 7,478 children under 5) have been assisted through NFI and 23,001 people have benefited from WASH assistance.

The RRM's August 2020 dashboard can be accessed [here](#).

Communications for Development (C4D), Community Engagement & Accountability

In support of the ongoing measles vaccination campaign and in preparation for the tetanus campaign in September, 1,338 community mobilizers, 369 village leaders and 264 women from the Organisation des Femmes Centrafricaines (OFCA) were enrolled to support social mobilization.

In the meantime, 119 sessions community dialogues sessions were conducted to collect social data. As a result, a total of 374,350 families were visited and 1,064,294 people were sensitized.

In support of the first phase of the polio vaccination campaign, UNICEF organized 10 online training sessions on Communication for Development principles for 10 authorities of the Ministry of Health and Population (MoHP).

Humanitarian Leadership, Coordination and Strategy

UNICEF is a member of the Humanitarian Country Team (HCT), UN Country Team (UNCT), Security Management Team (SMT). UNICEF also participates in the MINUSCA coordination mechanisms such as the Senior Management Group for Protection (SMGP) and the Protection from sexual exploitation and abuse Task Force (PSEA TF) to strengthen the delivery of humanitarian assistance. UNICEF leads WASH, Nutrition, Education Clusters and Child Protection Sub-Cluster. The Government is an active member of the WASH, Nutrition, and Education Clusters and Child Protection Sub-Cluster. The national Child Protection Sub-Cluster covers all prefectures directly or indirectly. Nutrition is paired with health and works through three Sub-Clusters at the regional level. The Education and WASH Clusters are also functional at the regional level. At the Cluster level, UNICEF is an active member of the Health Cluster and, via the RRM coordinator, of the Shelter/NFI/Camp Management Cluster. Moreover, UNICEF hosts and coordinates the Rapid Response Mechanism (RRM). The RRM Coordinator is a member of the Inter-Cluster Coordination team (ICC) which enables efficient coordination between the RRM program and the humanitarian community.

Working with partners based in the country's most troubled areas, and using prepositioned essential supplies, UNICEF prioritizes child centered life-saving interventions and risk reduction for crisis-affected, displaced and returning people in CAR. The Rapid Response Mechanism (RRM) led by UNICEF carries out multi-sector assessments on new crises, provides non-food items and water, sanitation and hygiene support to vulnerable people newly affected by shocks, and coordinates internally as well as with external actors to ensure complementary responses in other essential sectors. The mechanism also provides UNICEF and partners with quick and reliable information on the affected populations needs. This allows UNICEF to mobilize partners to address preventable childhood illnesses, malaria, HIV and malnutrition. UNICEF focuses on the protection needs of children, including their release from armed groups and reunification with their families when separated or unaccompanied, and provides the appropriate psychosocial support to children affected by the conflict. UNICEF contributes to providing out of school children with access to safe learning spaces and quality education. UNICEF works with line ministries to reinforce the Government's capacity in humanitarian coordination, leadership and response. In coordination with UNICEF development programs, the emergency response contributes day to day to increase people's access to basic services in line with the commitment to strengthen the humanitarian-development continuum.

UNICEF CAR: www.unicef.org/infobycountry/CAR.html

UNICEF CAR Facebook: www.facebook.com/UNICEFCAR

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UNICEF CAR Humanitarian Action for Children Appeal: <http://www.unicef.org/appeals/car.htm>

Who to contact for further information :
Fran Equiza
Representative
Central African Republic
Tel: +236 7055 0205
Email: fequiza@unicef.org

Paolo Marchi
Deputy Representative
Central African Republic
Tel: +236 7055 0206
Email: pmarchi@unicef.org

Olivier Corbet
Chief Emergency & Field Operations
Central African Republic
Tel: +236 7007 5710
Email: ocorbet@unicef.org

Annex A Summary of Programme Results

	UNICEF and IPs				Cluster Response		
	2020 Overall needs	2020 Target	Total Results	Change since last report ▲▼	2020 Target	Total Results	Change since last report ▲▼
NUTRITION							
children aged 6-59 months affected by Severe Acute Malnutrition (SAM) admitted for treatment	49,273	39,418	13,720	2,094	39,418	13,720	2,094
Recovery rate (%)	>75%	>75%	93.62	0.14	≥75%	93.62	0.20
Caregivers of children reached with infant and young child feeding counselling	389,261	165,659	70,189	1,955	194,631	70,189	1,955
HEALTH							
Children under 10 vaccinated against measles	740,339	328,922	824,738	0			
Children under 5 vaccinated against polio	945,443	472,722	459,577	0			
Children and women receiving primary healthcare in UNICEF supported facilities	379,969	85,335	44,953	12,159			
WATER, SANITATION & HYGIENE							
Crisis-affected people accessing a sufficient quantity of safe water for drinking, cooking and personal hygiene	964,606	306,000	127,607	5,610	543,000	425,565	129,568
Crisis-affected people accessing appropriate sanitation facilities	428,900	103,500	30,901	1,300	362,000	137,651	10,100
Crisis-affected girls and women accessing menstrual hygiene management services	210,000	45,000	1,828	55	210,000	17,482	1,825
People reached with hand-washing behaviour-change programmes	302,000	160,000	110,734	0	302,000	111,384	0
CHILD PROTECTION							
Children and caregivers accessing mental health and psychosocial support	356,180	100,000	74,831	3,266	138,800	77,676	3423
Children separated from armed groups accessing reintegration support	5,550	3,200	1,125	249	5,300	1,180	249
Children and women accessing GBV response interventions	21,500	3,000	1,033	229	9,200	Not available	Not available
Unaccompanied and separated children accessing family-based care or appropriate alternative services	7,100	1,500	559	69	4,200	598	69
EDUCATION							
Crisis-affected children accessing formal or non-formal education	510,000	120,000	63529	23,076	183,000	73740	23076
Children receiving individual learning materials	678,000	360,000	117445	11311	678,000	163591	11311
Children (boys and girls 3-17yrs) attending school in a class led by a teacher trained in psychosocial support	678,000	360,000	21674	9600	591,000	47368	9600
RAPID RESPONSE MECHANISM / CASH TRANSFERS							
Vulnerable people newly affected by the crisis rapidly provided with essential household items	968,960	225,000	121,371*	43,782			
People benefiting from water, hygiene and sanitation interventions	328,932	100,000	88,485*	23,001			
Households receiving cash transfers	N/A	5,000	1,474**	0			
COMMUNICATION FOR DEVELOPMENT (C4D)							
People reached with key life-saving/behaviour change messages on epidemic-prone diseases	N/A	850,000	2,518,536	1,064,294			
People accessing mechanisms to voice their needs/concerns/feedback	N/A	125,000	3,000	0			

*Adjustments have been made since the last Situation Report following corrections on the RRM data base

**Correction because in the previous Sitrep the number of people instead of the number of households was indicated by mistake

Annex B – Funding Status

Sector	Requirements	Funds available		Funding gap	
		Received Current Year	Carry-Over	\$	%
Nutrition	11,700,000	250,000	5,588,990	5,861,010	50%
Health and HIV/AIDS	4,200,000	0	0	4,200,000	100%
WASH	6,800,000	311,100	1,792,526	4,696,374	69%
Child Protection	8,500,000	913,336	1,602,767	5,983,897	70%
Education	10,000,000	0	2,614	9,997,386	100%
RRM	13,100,000	10,924,641	2,829,443	-	0%
C4D	1,200,000	0	0	1,200,000	100%
Cluster Coordination	1,500,000	0	0	1,500,000	100%
Total	57,000,000	12,399,077	11,816,340	33,438,667	59%