



Reporting Period: May & June 2020

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Highlights

The first case of COVID-19 in the Central African Republic (CAR) was recorded on 14 March and by the end of June, the country had registered 3,788 cases and 47 deaths. On 12 June, President Touadera announced the easing of some restrictions, including the reopening of places of worships, restaurants and bars. To mitigate this move, he imposed the compulsory wearing of masks in public places.

UNICEF's COVID-19 response plan comes in addition to the CAR HAC and is reported against [separately](#).

In May and June, CAR continued to experience clashes between armed groups, as well as other forms of violence.

UNICEF and its partners ensured the release of 427 children from armed groups, including 71 girls. They were all enrolled in UNICEF supported reintegration programmes.

19,364 people including 9,036 were children under 5 and 3,373 pregnant women received free essential care in conflict-affected areas and 5,779 children aged from 6 to 59 months suffering from severe acute malnutrition (SAM) were treated.


3,784 people gained access to safe water for drinking, cooking and personal hygiene in conflict-affected areas (including IDP sites).

Central African Republic Humanitarian Situation Report


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for every child

Situation in Numbers

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

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

 **658,998** Internally displaced people (IDPs) (CMP, June 2020)

 **617,639**
of pending and registered refugees (UNHCR, June 2020)

UNICEF Appeal 2020

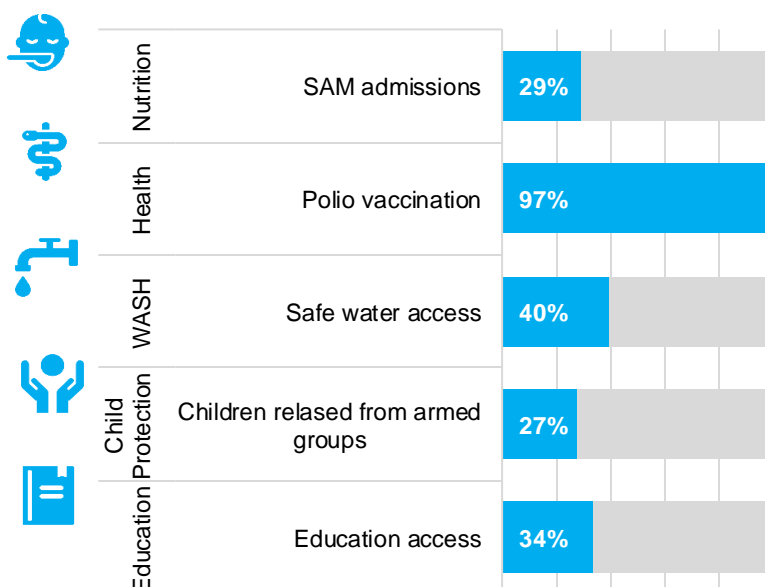
US\$ 57 million

Funding status* (\$US)



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

UNICEF's Response



Funding Overview and Partnerships

During the reporting period, contributions were received from the Office of US Foreign Disaster Assistance (OFDA) and the European Civil Protection and Humanitarian Aid Operations (ECHO) to support the Rapid Response Mechanism (RRM). UNICEF has received \$11 million against the \$57 million required in the 2020 HAC with critical funding gaps in Nutrition, 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

The first case of COVID-19 in the Central African Republic (CAR) was recorded on 14 March and by the end of June, the country had registered 3,788 cases and 47 deaths.

On 12 June, President Touadera announced the easing of some restrictions, including the reopening of places of worships, restaurants and bars. To mitigate this move, he imposed the compulsory wearing of masks in public places.

UNICEF is actively involved in COVID-19 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 between armed groups, as well as inter-community tensions. Violence particularly affected the north east (Bamingui prefecture) and the west of the country (Ouham Pende and Nana Mambere prefectures) forcing many inhabitants from the affected areas to flee. Still overall, the number of IDPs decreased slightly in the reporting period to 658, 998 at the end of June, as partial return is mainly observed in the city of Bangui and the Ombella M'poko Prefecture, where more than 20,000 flood victims have returned to their places of residence.

Returns were also registered in Bamingui-Bangoran and Vakaga Prefectures with more than 6,000 returnees (Commission Mouvement de Populations-CMP)

The measles epidemic declared on 24 January has affected 25,276 children by the end of June. In March 2020, the country reached the peak of the epidemic and response campaigns, including with UNICEF support, were organized, which resulted in 824,738 children 6 months - 10 years vaccinated. During the period of May and June 2020, 3,214 suspected measles cases were notified, 12.36% of the total cases recorded in the first half of 2020.

Finally, CAR continues to be one of the most dangerous contexts in the world for humanitarian workers.

According to the Office for the Coordination of Humanitarian Affairs (OCHA), in the first half of 2020, 192 security incidents have affected humanitarian personnel that is an increase of almost 48% compared to the same period in 2019. The security situation remains tension in several areas in especially in the town of Ndélé in northeastern CAR, Grimari and Bambari areas in Ouaka (centre) and further West localities in the prefectures of Nana Mambere, Ouham and Ouham Pende,

Summary Analysis of Programme Response

Nutrition

Since January, 11,626 children suffering from Severe Acute Malnutrition (SAM) were admitted in 520 Outpatient Therapeutic Program (OTP) service points and 47 Stabilization Centers (SC), including 5,779 treated during the reporting period.

In addition, 68,234 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.

With a SAM cure rate of 93.76 percent, a death rate of 1.05 percent, a defaulter rate of 4.18 percent and a non-response rate of 1.01 percent, the quality of the response is above the SPHERE minimum standards.

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

Health

During the first half of 2020, 22 of the 35 health districts in seven health regions recorded 25,276 measles cases, 146 yellow fever cases and 90 maternal-neonatal tetanus cases.

During the period of May and June, 3,214 suspected measles cases were notified. The next round of vaccinations will be from 7 to 10 August in the 22 health districts that did not benefit from the first wave.

Of the 146 suspected cases of polio, no case has been confirmed by the Pasteur Institute in Bangui. It should be noted that, following field visits over the past year and a thorough critical review of the documentation on polio surveillance, immunization and laboratory capacity submitted by the Government of the CAR, the country has received the status of a polio-free country. Vaccination in the 14 at-risk health districts will be carried out from the 25 to the 27 September.

In May and June, 19,364 people including 9,036 were children under 5 and 3,373 pregnant women received free essential care in conflict-affected areas. The most common conditions treated were malaria (43%), diarrhoeal diseases (22%) and acute respiratory infections (25%). Out of the 3,373 pregnant women who received at least one prenatal consultation, 1,804 accepted to be tested for HIV, 90 tested positive and were put on antiretroviral treatment.

WASH

As of 30 June, a total of 121,997 people, including 37,848 people during May and June, gained access to safe water for drinking, cooking and personal hygiene thanks to the rehabilitation and construction of 44 water points and several water treatments kits distribution.

During the reporting period, UNICEF supported the rehabilitation of four boreholes in Alindao (Basse Kotto) and the construction of 116 latrines and 58 operational showers serving 2,437 people. In Ippy (Ouaka) five boreholes have been set up, giving access to drinking water to 4,500 people in host communities. In Nana Gribizi prefecture, in all the five IDP sites, thanks to the partnership with and the Agence Nationale de l'Eau de et l'Assainissement (ANEA) and the Direction Générale des Ressources Hydrauliques (DGRH) 23,848 people gained access to drinking water.

In addition, in Kaga-Bandoro (Nana-Grébizi) 19 water points have been rehabilitated serving 9,500 returnees and eight water point committees have been set up and revitalized. A total of 20 committee members were trained, including eight women. UNICEF partners DGRH and ANEA have resumed garbage collection activities in the sites.

All activities have been supported by awareness-raising campaigns on good hygiene practices and COVID-19 prevention measures reaching 40,285 people.

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 support ensured provision of safe water to 295,997 people, and sanitation facilities to other 127,551 people.

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. UNICEF and partners immediately started putting 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](#).

Meanwhile, in Ouham-Ouham Pende, Nana Mambere, Mabere Kadei, Ouaka, Basse-Kotto, Mbomou and Haut Mbomou prefectures, UNICEF and partners rehabilitated 17 schools to increase the classrooms' capacity.

At cluster level, the educational partners have mainly implemented activities to ensure a protective educational environment for children affected by crisis 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. Furthermore, to ensure a protective, healthy and safe educational environment for children, a total of 21 classrooms have been built or rehabilitated and 102 community teachers, including 33 women, have been supported in Ouham Pendé, Basse Kotto and Mambere- Kadei prefectures.

Child Protection

Between May and June, 12,720 children (7041 boys and 5679 girls) directly affected by the conflicts and displacements participated in UNICEF supported mental health and psychosocial activities. The psychosocial support provided included counselling, individual social follow-up and participation in play and recreation activities while respecting the COVID-19 social distancing measures.

During the reporting period a lower number of children compared to the previous reporting period have been reached because of the closure of most of the Child Friendly Spaces (CFS) and UNICEF programme shifted towards door to door outreach and community-based activities with smaller groups of children. Activities mostly took place in Ouham, Ouham Pendé, Ombella Mpoko and Lobaye prefectures.

On 23 July, the Minister for the Promotion of Women, Families and child protection authorized the reopening of CFS. UNICEF is currently supporting NGO partners in operationalizing the CFS based on the national minimum standards on implementing CFS in the context of COVID-19 recently endorsed by the Ministry for the Promotion of Women, Families and child protection and developed with UNICEF technical and financial support.

As part of UNICEF efforts to promote community reintegration of children formerly associated with armed groups 427 children, including 71 girls, released from armed groups in Ouham, Ouham Pendé, Basse Kotto and Nana Gribizi prefectures were identified, verified and registered for socio-economic reintegration support. They are being provided with appropriate life skills and trainings to strengthen their self-reliance. Furthermore, 94 children, including 47 girls, who have been separated from their families due the ongoing conflict were registered and provided with appropriate family-based care through reunification with their families or placement in foster family.

305 new cases of gender-based violence (GBV) against children (including 227 girls) were registered supported provided to victims. This included 167 cases of rape, one other form of sexual assault and abuse (such as rape attempt or harassment), 57 cases of child marriage, 13 cases of genital mutilation and 67 other cases GBV.

Rapid Response Mechanism (RRM)

In May and June, a total of 11 alerts were recorded, two Exploratory Mission (MEX) and six Multisector Assessments (MSA) conducted and six interventions carried out for 15,244 people assisted in NFI, 1,458 in cash and 33,563 provided with WASH assistance.

Two cash interventions, in response to natural disaster shocks, conducted by UNICEF partner Action Contre la Faim (ACF) in Carnot (Mambere Kadei) and in Bossembele (Ombella M'Poko) reached 265 households, including 445 children under 5 and 188 households, including 210 children under 5, respectively.

During the reporting period, the situation in and around the town of Ndélé (Bamingui) has deteriorated: violent clashes between rival armed groups started on 29 April and continued until 9 May, leaving at least 27 civilians dead, 56 people injured and over 2,000 displaced. And, in early May, ten attacks against humanitarian organisations took place in Ndélé. While some humanitarian actor decided to interrupt their activities, a first response was initiated by UNICEF RRM partner Solidarités International (SI), which conducted two joint NFI and WASH interventions in Bamingui and on the axis to Ndele reaching 1,185 families, including 1,804 children under 5.

In addition, UNICEF partner ACTED conducted a joint NFI and WASH intervention in Satema (Basse Kotto prefecture) to assist 5,450 newly returnees including 1,559 children under five.

Since January, a total of 67,639 individuals have been assisted through NFI, 7,630 through Cash and 64,200 have benefited from WASH assistance.

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

Communications for Development (C4D), Community Engagement & Accountability

In support of the measles vaccination campaign, an overall communication plan and budget for measles vaccination campaign were developed together with a set of communication tools and materials.

A first part of the measles vaccination campaign took place in Bossangoa (Ouham) in May: 40,794 households have been visited and 104,777 people sensitized. During the second part in Carnot (Mambéré-Kadéï) 5,274 parents were sensitized on the importance of vaccinating their children against measles.

According to a survey conducted under the supervision of the World Health Organization (WHO), out of a sample of 150 households interviewed per district, 99% of parents said they were properly informed before the campaign and only 3% of children were not vaccinated.

In support of the first round of the polio vaccination campaign, 100 phones were purchased to support the Vaccine Tracking System (VTS). This will enable tracing social mobilizers and vaccinators during the vaccination campaigns.

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>

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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	11,626	5,779	39,418	11,626	5,779
Recovery rate (%)	>75%	>75%	93.76	0.20	≥75%	93.76	0.20
Caregivers of children reached with infant and young child feeding counselling	389,261	165,659	68,234	28,714	194,631	68,234	28,714
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	32,794	19,364			
WATER, SANITATION & HYGIENE							
Crisis-affected people accessing a sufficient quantity of safe water for drinking, cooking and personal hygiene	964,606	306,000	121,997	37,848	543,000	295,997	128,848
Crisis-affected people accessing appropriate sanitation facilities	428,900	103,500	29,601	2,437	362,000	127,551	40,287
Crisis-affected girls and women accessing menstrual hygiene management services	210,000	45,000	1,773	0	210,000	15,657	1,700
People reached with hand-washing behaviour-change programmes	302,000	160,000	110,734	40,285	302,000	111,384	40,285
CHILD PROTECTION							
Children and caregivers accessing mental health and psychosocial support	356,180	100,000	71,565	12,720	138,800	74,253	12,986
Children separated from armed groups accessing reintegration support	5,550	3,200	876	427	5,300	931	427
Children and women accessing GBV response interventions	21,500	3,000	804	305	9,200	NA	NA
Unaccompanied and separated children accessing family-based care or appropriate alternative services	7,100	1,500	490	94	4,200	529	114
EDUCATION							
Crisis-affected children accessing formal or non-formal education	510,000	120,000	40,453	0	183,000	50,664	0
Children receiving individual learning materials	678,000	360,000	106,134	0	678,000	152,280	0
Children (boys and girls 3-17yrs) attending school in a class led by a teacher trained in psychosocial support	678,000	360,000	12074	4800	591,000	37,768	0
RAPID RESPONSE MECHANISM / CASH TRANSFERS							
Vulnerable people newly affected by the crisis rapidly provided with essential household items	968,960	225,000	67,639*	15,244			
People benefiting from water, hygiene and sanitation interventions	328,932	100,000	64,200	33,563			
Households receiving cash transfers	N/A	5,000	7,630*	1,458			
COMMUNICATION FOR DEVELOPMENT (C4D)							
People reached with key life-saving/behaviour change messages on epidemic-prone diseases	N/A	850,000	1,454,269	110,051			
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

Annex B – Funding Status

Sector	Requirements	Funds available		Funding gap	
		Received Current Year	Carry-Over	\$	%
Nutrition	11,700,000	0*	5,588,990	6,111,010	52%
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	553,539	1,602,767	6,343,694	75%
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	11,789,280	11,816,340	34,048,464	60%

* Adjustments have been made since the last Situation Report as funds were double counted in the “Carry-Over” and the “Funds Received in 2020”.

** Funds available includes funding received against current appeal as well as carry-forward from the previous year.

*** Funding received includes contribution dedicated to the Accountability to Affected Population Project (Inter-Agency Collective Service for Community Engagement and Accountability)