Central African Republic: Situation Report No.1 (as of 17 December 2013)

This report is produced by OCHA CAR in collaboration with humanitarian partners. It covers the period from 5 to 17 December. The next report will be issued on or around 24 December.

Highlights

- More than 700,000 Central African have been displaced by the conflict, including some 214,000 since 5 December, in Bangui alone.
- With a UN Security Council mandate, French military operations to support (MISCA) –the AU-led peacekeeping operation- began on 9 December.
- An OCHA Civil-Military Coordinator is acting as an interface between the humanitarian community and military forces.
- Following an agreement with the national water authority, affected people in Bangui have free access to potable water. Humanitarian partners are producing and distributing about 320,000 litres of water per day in Bossangoa.
- Since 5 December, 80,153 IDPs located in various IDP sites in Bangui have received food assistance from WFP.
- A telephone hotline is available for information on protection issues. The number to call is 4040.

Situation Overview

Following weeks of tension and violence in different parts of the country, armed groups attacked several areas of Bangui on 5 December. Heavy gunfire continued for hours, and door-to-door searches, looting and arbitrary killings prompted local people to flee their homes, including vulnerable groups. Sectarian violence and human rights violations continued and have also been reported in Bossangoa (Ouham Province), Bozoum, Bohong and Paoua (Ouham Pendé Province). Armed groups engaged in a wave of violence and retaliations against communities. In Bangui, violence mostly targeted men although reports have also emerged of women and children killed and some neighbourhoods are entirely empty due to displacement.

Displacement – especially the number of internally displaced persons (IDPs) – continues to rise. An estimated 639,000 IDPs are currently displaced across the country – over three times as many as in March 2013. This includes some 214,000 IDPs in Bangui who have gathered at over 50 sites – mainly religious sites and the airport – or are staying with friends or family (32,500 IDPs). Rapid Response Mechanism (RRM) assessments are under way at Bangui displacement sites. Priority needs in most sites include: food and non-food items, access to healthcare services, WASH and protection assistance.

Despite prevailing insecurity, humanitarian assistance efforts are expanding, and more staff are deploying. The humanitarian community is staying in-country and delivering aid as the security situation permits.
On 5 December, the UN Security Council created the African-led International Support Mission to the Central African Republic (MISCA), with a mandate to protect civilians and restore security. The Security Council also authorized the French military to support MISCA temporarily, and French forces launched Operation Sangaris on 9 December. French troops are now present in Bangui, Paoua, Bozoum and Bossangoa, and have confiscated from armed groups and civilians large quantities of cutting weapons, including knives, in Bangui and Bossangoa. French forces and Multinational Force of Central Africa (FOMAC) troops continue to patrol Bangui and the interior.

Funding

According to the Financial Tracking Service (FTS), donors have provided US$92 million to the 2013 consolidated appeal in the Central African Republic, or 47 per cent of total requirements for the year. In addition, approximately $59 million has been provided to humanitarian activities in CAR outside the consolidated appeal.

On 19 November, a special allocation of $3 million was authorized by the Humanitarian Coordinator for the Common Humanitarian Fund (CHF). The Central Emergency Response Fund (CERF) has already provided $7.1 million to the humanitarian response in CAR in 2013 and it is expected that more will be released in the near future.

On 16 December, the European Commission announced that it is increasing its humanitarian aid by €18.5 million.

Central African Republic 2013 appeal

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<th>Funding by cluster (in million US$)</th>
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<td>Funded</td>
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<td>Water, Sanitation and Hygiene</td>
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All humanitarian partners, including donors and recipient agencies, are encouraged to inform OCHA’s Financial Tracking Service (FTS - http://fts.unocha.org) of cash and in-kind contributions by e-mailing: fts@un.org

Humanitarian Response

Food Security

**Needs:**
- According to the October 2013 Emergency Food Security Assessment (EFSA), 30 per cent of people outside Bangui (around 1.1 million people) are estimated to be moderately or severely food insecure. IDPs are the most affected; half of them suffer from moderate or severe food insecurity.
- The recent crisis has further increased the need for food assistance. Precise figures are not yet available.

**Response:**
- Cluster partners have assisted IDPs in over 20 sites in Bangui. Since 5 December, WFP has distributed food to 80,153 IDPs located in various sites in Bangui.
- On 14 December, IRC, CRS and Caritas started to provide 10-day food rations to IDPs in several smaller sites, reaching 790 IDPs at religious sites in Bangui.
On 13 and 14 December, WFP provided food assistance to more than 3,500 IDPs in Bossangoa, including 961 women and children with moderate acute malnutrition. 106 caretakers of people suffering from severe acute malnutrition and 150 hospital patients also received food.

Gaps & Constraints:
- The Cluster requires implementing partners for food distribution on the Eglise Elim and Lycee ABC sites in Bangui.

Health

Needs:
- People affected by armed conflict are in dire need of health care, including IDPs living in displacement sites and with communities.

Response:
- Medical assistance has also been provided to over 30 IDP sites. Health partners are providing medical supplies to hospitals, health centres and dispensaries. Supplies include medication, surgical kits, malaria kits, individual delivery kits, delivery beds, condoms and dignity kits.
- Partners are providing medical care and assistance in hospitals and dispensaries in Bangui. As of 9 December, MSF had treated 292 injured people at the Community Hospital, and UNICEF had provided medical supplies and medicine to cover the needs of around 10,000 people. UNICEF also provided 7,000 consultation kits to the Paediatric Hospital, and the St Jean de Galabadja and St Paul dispensaries.

Gaps & Constraints:
- Merlin and Save the Children are evaluating the Amity Hospital in efforts to re-open it. It remained un-operational since 5 December when ex-Seleka elements took 10 patients out of the hospital and executed them at the entrance. The security of patients also needs to be assured.
- Most sites require malaria kits.

Nutrition

Needs:
- The number of children in need of malnutrition treatment has increased in some areas affected by conflict and displacement. Precise figures are not currently available.
- An assessment at the Lycée Ama site in Bangui reveals some signs of malnutrition.

Response:
- On 11 December, UNICEF provided supplies to treat 13 cases of severe acute malnutrition at St Joseph clinic.
- A daily system to monitor new malnutrition cases at the Bangui Paediatric Centre has been established.

Gaps & Constraints:
- Information management capacity needs to be strengthened, including a mechanism to collect, centralize and manage nutritional data, disaggregated by category of severity and gender.

Protection

Needs:
- IDPs require protection assistance, particularly psychosocial support and prevention of gender-based violence (GBV).
- Reconciliation and social cohesion are crucial for communities affected by conflict.

Response:
- Cluster partners are ensuring protection through their presence in various IDP sites. Partners are encouraging IDPs to organize themselves to enable aid delivery; identifying victims of physical violence and other abuses; referring victims for medical and psychosocial support; and identifying and assisting unaccompanied and separated children.
- A telephone hotline is available for information on protection issues. The number to call is 4040. Most calls to date have reported killings, looting, gunshot wounds, inter-community conflict and a lack of HIV medication.
- UNFPA distributed four cartons of PEP kits to cover the needs of 400 survivors on four IDP sites on 13 December. A brief refresher training on how to use PEP kits was also provided to medical staff at these sites.
- Some 4,000 children are benefitting from a child-friendly space at an IDP site in Bangui. Some 2,000 girls and boys have registered to participate in activities at a child-friendly space established at a different site.
- A Social Cohesion Committee and a Youth Committee was established in the neighbourhood of Dedengue 2 in Bangui, and key messages on reconciliation and social cohesion have been developed. Outreach activities will take place starting next week and will target several affected neighbourhoods.

**Gaps & Constraints:**
- The Cluster needs more site facilitators.
- Security constraints on some sites, including the airport, undermine activities.
- Armed people among civilians at IDP sites pose a potential threat.

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**Emergency shelter; Non-food items (NFIs); and Water, sanitation and hygiene (WASH)**

**Needs:**
- Displaced people in Bangui and Bossangoa require sanitation services.
- According to recent assessment findings, most IDPs require essential NFIs.

**Response:**
- In Bangui, national water authorities and humanitarian partners are ensuring IDP access to water and sanitation. An agreement with the national water agency provides water free of charge to affected people. Cluster partners are present at 30 IDP sites.
- Partners in Bossangoa are producing and distributing some 320,000 litres of water per day.
- Partners are also constructing latrines and showers, and began a hygiene promotion campaign. Partners are also cleaning the Liberté School site hosting 10,000 IDPs.
- 18,000 people have received NFIs and more than 1,000 patients in more than 8 health facilities have received soap and blankets through the Rapid Response Mechanism. The RRM has also distributed over 10,000 jerry cans and 600 bars of soap to IDPs in Bangui, and provided sanitation to the St Bernard Site.
- In Bossangoa, 120 peer educators have been trained on hygiene and sanitation (hand washing with soap, the distribution of kits, use of latrines, garbage collection).
- In Bangui, partners have constructed two field defecation sites in St Paul, one field defecation site in SOS Village d’Enfants. In addition, 10 latrines in Notre Dame de Fatima have reopened and handed over to a management committee.

**Gaps & Constraints:**
- Additional space at the Catholic Mission in Bossangoa is required to decongest the site.
- In Bangui, sufficient quantities of soap, blankets, mosquito nets and plastic sheeting are unavailable.
- Space constraints and the limited number of actors make it difficult to reach sanitation SPHERE standards.

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**Logistics**

**Needs:**
- Over 65 organizations depend on the United Nations Humanitarian Air Service (UNHAS) for flights to over 27 destinations in CAR.

**Response:**
- UNHAS operates in-country flights, medical evacuations, passenger flights between Douala and Bangui and freight services.
- As a result of rising humanitarian needs and the interruption of commercial flights, the European Commission has deployed its humanitarian air service to facilitate travel between Douala and Bangui. ECHO flights began on 9 December, with capacity for 50 passengers or five tons of cargo.
- A humanitarian cargo flight arrived in Bangui on 13 December with carrying 77 MT of emergency supplies, including blankets, soap, jerry cans, medicine, water purification supplies, plastic sheeting, health and midwifery kits. These goods will be distributed to up to 37,500 people.

**Gaps & Constraints:**
- UNHAS requires $9 million to maintain critical air services through 2014.
General Coordination

For more information (including meeting schedules and cluster contact information), please visit: https://car.humanitarianresponse.info

An OCHA Civil-Military Coordinator is acting as an interface between the humanitarian community and military forces. This enables coordination of requests for military assistance. OCHA continues to facilitate interaction with military forces (French, FOMAC and upcoming MISCA) in support of humanitarian organizations.

On 5 December, an Information Management Working Group was created, consisting of OCHA, IOM, UNICEF, WFP, FAO, and UNHCR. Through IOM’s Displacement Tracking Matrix (DTM), the group has facilitated information gathering on displacement.

A Health Crisis Cell has been established, including national health authorities, UN and NGO members. The Cell will improve the quality of referrals, support health workers, provide medicines and supplies to health facilities, and collect and analyse health information.

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