

# CENTRAL AFRICAN REPUBLIC (CAR)

## Situation Report No. 36 (as of 30 July 2014)



This report is produced by OCHA CAR in collaboration with humanitarian partners. It covers the period between 22 and 30 July 2014. The next report will be issued on or around 6 August 2014.

## Highlights

- A three-day peace talk was held in Brazzaville, Republic of Congo, from 21 July, attended by delegates of various political groups and resulting in the signing of a cessation of hostilities, but clashes between the armed groups continued.
- Since 1 January, 13,698 children with severe acute malnutrition (SAM) have been admitted for treatment across the country. This represents 82 per cent of the SRP target of 16,800 children suffering from SAM.
- The Government suspended the set-up of the Boganda 1 and Patassé alternative sites as it has proposed a new alternative site.

## POPULATION MOVEMENT



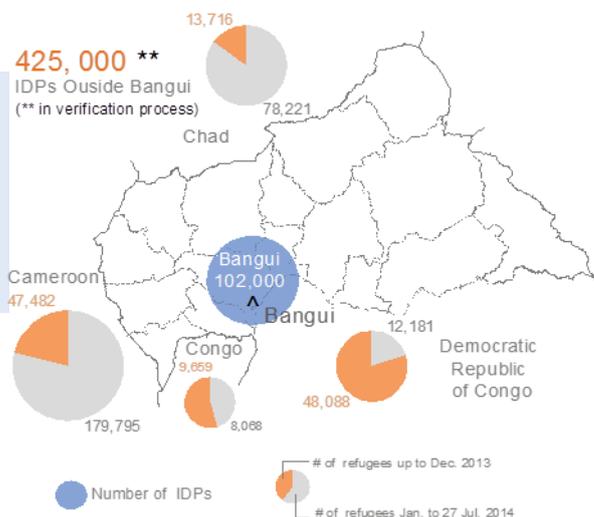
**527,000**  
IDPs in CAR, including

**102,000**  
IDPs in Bangui (a decrease of 1,400 from 103,400 two weeks ago)

**39%**  
Funding available (about US\$218 million) against the revised SRP requirements of \$565 million

**4.6 million**  
Population of CAR

**2.5 million**  
People in need of assistance



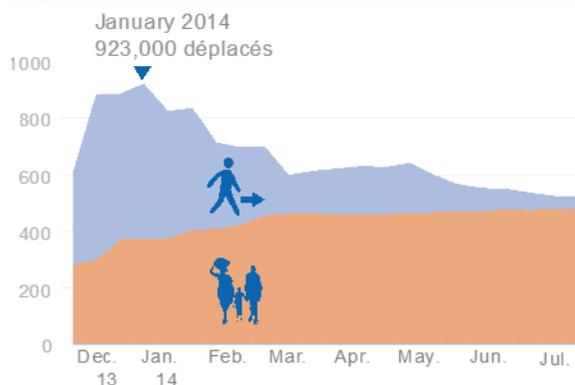
Sources: OCHA, CMP, Protection Cluster and FTS

## Situation Overview

According to information received from the Commission on Population Movement (CMP), an estimated 102,000 people are still displaced in Bangui, with the M'Poko airport site holding the largest number of IDPs in the city (37,400), with the number of IDPs peaked in January and has been decreasing progressively, albeit with occasional spikes due to outbreaks of armed violence and insecurity.

ACF carried out a multisectoral rapid response mechanism assessment in Bozakon and Boya 1 in the Bouca sub-province (Ouham Province) from 24 to 25 July. It identified 5,152 IDPs and 832 residents across both localities. About 65 per cent of surveyed displaced households had a level of food security judged "poor", with only 5 per cent in the "acceptable" range. None had access to cultivable land (as owner or tenant). Food rations and emergency latrines are recommended for these villages.

## Population movement trend



IOM began a 10-day cash-for-work pilot project in Boda, involving 50 people from multiple communities. Workers will clean some of the homes along the red line separating the two communities to allow IDPs to re-establish contact. The proposed areas to be cleaned are mixed neighbourhoods. All homes will be cleaned regardless of the owners' ethnic or religious orientation. Sangaris forces will provide security for the project.

The cash-for-work programme in Bangui continues in the 3rd and 5th districts this week. A mobile cash-for-work team is focusing on garbage collection and street cleaning for one month.

Following advocacy by child-protection actors in CAR, the Transitional President has signed a presidential decree to ensure access to birth registration free of charge to children born during the crisis (1 December 2012 to 31 December 2014). The decree had been pre-empted by a 10-day birth-registration campaign (16-26 June 2014) in Bangui, Begoa and Bimbo. The Government led the campaign in cooperation with key child-protection actors.

A three-day peace talk was held in Brazzaville, Republic of Congo, from 21 July, attended by delegates of various political groups in CAR. The goal was to reach an agreement to end hostilities between the anti-Balaka and ex-Seleka groups, and to establish a disarmament road map.

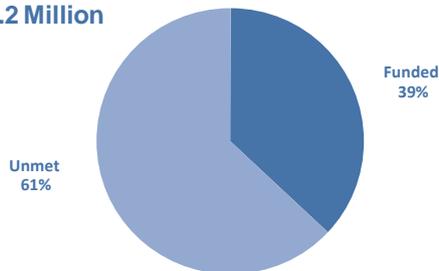
On 24 July, the UN Security Council welcomed the signing of a cessation of hostilities and a violence agreement between both armed groups. It called on all parties to immediately and fully implement the agreement. The agreement's impact will be determined in the coming months, but the security situation remains volatile and unpredictable and clashes continued in the reporting period.

## Funding

The CAR Strategic Response Plan (SRP) is 39 per cent funded. Early recovery, education, nutrition and emergency shelter are the least-funded sectors.

### CAR - FUNDING: STRATEGIC RESPONSE PLAN 2014

**\$565.2 Million**



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](mailto:fts@un.org)

Funding by Sectors (in million \$US)		% Funded	Requirements	Funded	Unmet
Food Security		47%	180.00	85.06	94.94
Protection		8%	74.00	6.26	67.74
Health		31%	64.32	19.78	44.54
Early Recovery		3%	60.00	1.65	58.35
Emergency Shelter		15%	33.54	4.88	28.66
Education		9%	33.00	3.03	29.97
WASH		36%	27.50	9.88	17.62
MS Refugees		2%	22.68	0.54	22.15
Nutrition		34%	22.55	7.62	14.93
CCCM		0%	20.00	-	20.00
Coordination		30%	15.50	4.66	10.84
Logistics		79%	10.20	8.07	2.14
Emergency Telecommunications		19%	1.91	0.36	1.55
Cluster Not Yet Specified		0%	-	66.67	-

On 22 July, the Senior Humanitarian Coordinator in CAR launched the third Common Humanitarian Fund (CHF) special allocation for US\$7 million. Humanitarian organizations were requested to submit projects for consideration no later than 29 July. This allocation will contribute towards funding humanitarian activities in the SRP, particularly focusing on projects outside of Bangui.

On 22 July, UNHCR and its partners launched a funding appeal to help deal with the continual influx and deteriorating conditions of CAR refugees. UNHCR and 16 humanitarian agencies launched a revised regional plan to raise \$210 million covering the rest of 2014 to help refugees arriving in the four neighbouring host countries: Cameroon, Chad, the Democratic Republic of Congo and the Republic of Congo.

On 25 July, OCHA trained national NGOs on the CHF funding-allocation procedure and policy.

## Humanitarian Response



### Camp Coordination and Camp Management (CCCM)

#### Needs:

- The rainy season requires CCCM actors and partners to quickly find solutions for IDPs living in the most at-risk sites and who are unable to return home before the rainy season.

**501,980**

People targeted in 2014.

- Coordinate provision of assistance and protection in IDP sites in Bangui and support site authorities.
- Facilitate the voluntary return of IDPs leaving sites.
- Assess sites, support CCCM activities and strengthen the capacity of CCCM actors and partners outside Bangui.

#### Response:

- The Government has suspended the set-up of the Boganda 1 and Patassé alternative sites as it has identified a possible new (AVICOM site). Discussions are under way between authorities and international forces to assess the possibility of securing the site prior to site planning and set-up.
- The cluster continues to monitor assistance-and-protection concerns in sites in Bangui. It is referring gaps in assistance and protection to the relevant clusters, helping site authorities resolve problems and liaising with the national and local authorities. There are 40 sites hosting IDPs in Bangui. The Ecole islamique, Témoins de Jeovah SICA II and Eglise Saint Pierre de Gobomgo sites have recently closed. A new site, Fédération des Déplacés in Bangui's PK5 neighbourhood, is being established to host IDPs from the Ecole Nasradine site, which has security constraints.
- The cluster is involved in the Return and Other Durable Solutions Task Force, and it is developing a communication mechanism to sensitize IDPs in sites about the return strategy.
- In Bouca, a CCCM assessment is under way and a CCCM workshop was organized to train 44 members, including local authorities, sites managers, service providers and IDP representatives.
- In Bossangoa, a CCCM training was organized to strengthen the capacity of 22 participants including site managers and IDP representatives. The set-up of the Petit Séminaire site is ongoing. The site will host the remaining 320 IDPs from the Eveche site who are unable to return to their communities of origin.
- In Batangafo, the cluster and local partners are assessing IDP sites and population movements after recent incidents.
- Rain has caused flooding in some IDP facilities in Kabo (Ouham Province). IOM arranged for 15 local and IDP youths to rehabilitate canals in order to prevent further flooding and to keep facilities cleaner.
- IOM has registered 3,440 self-relocated IDPs in Moyen Sido (Ouham Province). Most of these people live in difficult conditions or in the overcrowded homes of host families.

#### Gaps and constraints:

- More funding is required to better address site-management needs and improve communication with IDPs.

## Education

#### Needs:

- Temporary safe learning spaces (ETAPes) with age-sensitive educational and recreational activities and child-protection services for 362,000 people are needed.
- Emergency recreational, teaching and learning materials for ETAPes and schools are required for 362,000 people.
- 5,000 teachers need psychosocial training.
- School-feeding activities, particularly in provinces with a low rate of student returns, are required for 400,000 people.

**350,000**

Vulnerable people targeted in 2014 with emergency education out of 400,000.

#### Response:

- Since January, 33,221 children have benefitted from learning and protection activities in 132 ETAPes in Bangui, Bossangoa and Boda. Children aged between 3 and 18 have received access to basic education in displacement sites.
- 327 teachers and instructors were trained in psychosocial support to children.
- School-feeding programmes are ongoing countrywide. So far, 201,399 students have benefitted from these programmes in 12 provinces and Bangui.

#### Gaps and constraints:

- Population movements are challenging the provision of structured education and child-protection activities.
- Psychosocial trainings for teachers are needed to ensure that children have access to adequate trauma care.

## Food Security

**Needs:**

- According to the April multi-agency IPC, the food security situation remains precarious throughout CAR. Some 45 per cent of the rural population (1.7 million people) are food insecure. Increased food assistance, nutrition support and agricultural inputs are needed to assist food-insecure vulnerable people, and to support crisis-hit farmers to plant for the current agricultural campaign to avert a large-scale food and nutrition crisis in the coming months.
- Rainfall data from April to June indicates that the weather has been drier than average. There have been significant rainfall deficits in the north-west, particularly in the main agricultural areas of Ouham and Ouham Pendé and areas north of Bangui. Food needs in these areas are expected to continue throughout the agricultural season.
- According to the markets and food security assessment carried out in April by FAO and WFP, CAR needs a long and expensive humanitarian operation over at least the next 18 months to stem the growing toll and to help rebuild livelihoods.

**1.25 million**

Vulnerable people targeted in 2014

**Response:**

- WFP assisted an estimated 265,000 people between 1 and 28 July, of whom nearly 50 per cent were located in IPC 4 emergency food insecure areas. Alongside the general food distribution to vulnerable groups, IDPs and food-insecure farmer households, nearly 28,000 children under age 5 received nutritious blanket-feeding packages.
- Between 1 and 28 July, WFP distributed seed-protection rations to 160,000 people, of whom 53 per cent were located in IPC 4 areas and the main agricultural regions.
- Approximately 22,500 primary-school children received hot meals so far this month, and 4,800 malnourished children aged 6 months to 59 months, pregnant and lactating women and people living with HIV/AIDS received nutritious meals.
- The cluster is collecting information on the distribution of seeds, particularly on partners' additional distributions.
- A Global Positioning System mission is being carried out by the cluster to establish a geographic delimitation of communities at risk in Bangui's PK5 neighbourhood.
- The main planting season ended at the end of June, but FAO will continue to support an additional 40,000 families with seeds (sorghum, beans, sesame and millet) and tools for the short-cycle agricultural season. This is expected to last through the end of July or mid-August, depending on the geographical areas.
- On 26 and 27 July, IOM delivered 6,000 food parcels to communities in Boda. The food was donated by Islamic Relief Worldwide, and another delivery is scheduled in two weeks. The donation was intended for Muslims and non-Muslims to celebrate the end of Ramadan.

**Gaps and constraints:**

- Despite increases in deliveries and the number of people assisted, challenges remain due to the rainy season, poor road conditions, and insecurity along the roads and at distribution sites.
- WFP requires \$1 million to strengthen the Food Cluster's support for six months in collaboration with FAO.
- Insecurity and bad road conditions, particularly since the start of the rainy season, disrupt market links and hinder humanitarian access and operations, increasing logistics costs.

**Health****Needs:**

- Strengthen the functioning of the hospital in Bimbo to improve handling of referral cases from IDP sites in this area sheltering about 20,000 displaced people.
- Continue organizing mass vaccination against measles in IDP sites in Kaga Bangoro (Evêché, Nativité and Bissingalé sites) and in Bambari (M, NDV and S sites), despite the volatile security situation.

**878,000**

People targeted in 2014.

**Response:**

- Essential drugs, consumables and equipment, including trauma and malaria kits, were supplied to six health facilities: the Bangui paediatric clinic, and hospitals in Bossembélé, Boali and Yaloké. WHO and MSF Holland will continue to provide free health care for new patients, particularly for children aged 1 to 15 from the M'poko site. These children are being transferred to the paediatric clinic for immediate support.
- WHO has provided extra stocks of medical units to partners to enable distribution to health-care facilities in Ombella Mpoko (Cap Anamur). The supplies include four international emergency health kits (IEHK) basic units and four IEHK malaria kits enabling support for primary health care and for treating malaria cases over three months; three IEHK modules for severe malaria treatment for three months; and three reproductive

health kits for health-care delivery for three months. The medical supplies for the paediatric clinic in Bangui include six IEHK, additional malaria kits to treat severe malaria cases covering three months; one reproductive health kit for childbirth covering three months; and one tent for pre-consultation screenings of patients. AHA will provide the Boda hospital with one IEHK, additional units to support primary health-care needs; two IEHK and additional malaria kits to treat severe malaria cases for three months.

- On 23 July, WHO held the opening ceremony for a workshop on the fight against onchocerciasis and lymphatic filariasis. The response process will include ongoing health interventions countrywide and joint interventions to eliminate both health issues.
- In Bangui, the IOM mobile health clinic provided 434 consultations at four IDP sites, including 164 malaria cases. In Boda, the IOM mobile health clinic provided 545 consultations in four IDP sites, treating 58 malaria cases, 53 respiratory infections and 30 cases of diarrhoea.

#### Gaps and constraints:

- Additional logistical support is required to complete the decentralization of blood banks stored at the National Blood Bank.



## Logistics

#### Response:

- The cluster shared information with partners about the status of entry points, road access and constraints, and the contact details of customs offices and suppliers.
- The cluster supported partners to organize and erect mobile storage units at field level.
- On 28 July, UNHAS resumed its regular schedule following the restoration of the jet fuel supply at Bangui airport. The twice-per-week rotation flight to Douala, Cameroon, has resumed. In addition to passenger flights, two flights per week transporting humanitarian supplies will be provided upon request. The Dash-8 plane will remain operational until October.
- Updated information was shared on the Logistics Cluster website regarding UNHAS flights and Logistics Cluster information: <http://logcluster.org/ops/caf13a>

#### Gaps and constraints:

- Poor infrastructure and insecurity along the main roads remain a logistical challenge, obstructing the humanitarian logistics chain.
- The rainy season will make operations more difficult, as the road conditions will worsen and prolong transportation time.



## Multi-sector assistance to refugees

#### Needs:

- Protection activities required by refugees include prevention and response of sexual and gender-based violence, verification/registration to find suitable durable solutions and child protection.
- Provide multi-sectorial assistance to urban refugees and refugees living in camps, including primary and secondary health care, reproductive health, HIV/AIDS, nutrition and capacity-building.
- Sensitization on reproductive health and school enrolment.
- Prepare for a smooth reintegration of CAR refugees in countries of asylum through education.

**501,980**

Vulnerable people targeted in 2014.

#### Response:

- UNHCR's protection section resumed the verification of refugees and asylum seekers in Bangui's PK5 neighbourhood on 25 July, following an improvement in the security situation in the 3<sup>rd</sup> and 5<sup>th</sup> districts. It verified 115 refugees in 74 households, mainly from Chad, Sudan and South Sudan.
- In Bangui, UNHCR and its partner DRC, in collaboration with the refugees' committee, are collecting information on people with specific needs, identified during the verification exercise. This will enable the provision of effective, specific assistance. So far, some 75 people with specific needs have been targeted.
- The International Medical Corps (IMC), UNHCR's partner, provided medical and psychosocial assistance to five gender-based violence victims in the Zemio camp (Haut Mbomou Province). This included four cases of physical abuse of minors and one case of rape involving a 10-year-old girl.

- In Zemio, IMC performed medical screenings on 435 patients, of whom 149 were children under age 5. The main disease diagnosed remains malaria: it has affected 40 per cent of screened patients and 54 per cent of children under age 5.
- In Zemio, the camp's health centre registered three newborns during the reporting period. The average number of newborns in the camp is 10 births per month. The birth rate is approximately 35/1,000.
- IMC continues to organize awareness-raising sessions on the principles of non-discrimination, school enrolment and reproductive health, targeting 482 refugees (167 households).
- Through advocacy carried out by UNHCR's community services to the CAR Ministry of National Education, final-grade primary-school refugee students in three refugee camps in the Democratic Republic of Congo (Mole, Boyabu and Inke) successfully took their exams. These students followed the CAR curriculum.

#### Gaps and constraints:

- Absence of a permanent international force to secure the Pladama Ouaka refugee camp in Bambari (Ouaka Province).



#### Nutrition

#### Needs:

- Some 28,000 children will suffer from severe acute malnutrition (SAM) in 2014, and 75,500 children will suffer from moderate acute malnutrition (MAM). These numbers could rise given ongoing aggravating factors (displacement, poor food security, deteriorated access to clean water and sanitation, increased morbidity and lack of health-care services) and the start of the rainy season/hunger gap.
- About 16,800 children suffering from SAM are targeted for treatment in 2014.
- An estimated 159,000 children under age 5 need highly nutritious foods. A consistent and adequately funded pipeline is needed to prevent a deterioration of nutritional status during the rainy season.

**361,011**

Vulnerable people targeted with nutrition services in 2014.

#### Response:

- Since 1 January, 13,698 children have been admitted for SAM treatment across the country, of whom 6,506 have recovered. The performance rates are as follows: recovery: 81 per cent ( $\geq 75$  per cent); death: 3 per cent ( $< 5$  per cent); default: 16 per cent ( $< 15$  per cent). This represents 82 per cent of the SRP target of 16,800 children suffering from SAM.
- Since the beginning of the year, 14,156 children were treated from MAM with the following performance rates: recovery rate: 80.5 per cent ( $> 75$  per cent); death: 0.03 per cent ( $< 3$  per cent); default: 11.5 per cent ( $< 15$  per cent). This represents 19 per cent of the SRP target of 75,000 children suffering from MAM. Nutrition supplements were also provided to 5,000 malnourished pregnant and lactating women. A total of 5,400 people living with HIV/AIDS and on ART enrolled in the food-by-prescription activity. WFP provided food rations to more than 4,500 caretakers of children with SAM.
- WFP is providing a large-scale integrated general food distribution and blanket-feeding intervention. WFP distributes nutritious Plumpy'Sup to each child under age 5 per household. In June, 46,000 children were assisted under this programme, which represents an increase of 68 per cent compared with earlier in the year. Access to people in need remains a challenge, so every opportunity is seized to reach different groups of children countrywide each month. From January to July, 315 mt of Plumpy'Sup was distributed to 169,000 children.
- Since 1 January, 111,972 children have been screened for malnutrition. This represents 31 per cent of the SRP target of 360,000 children. Children received treatment through on-site mobile out-patient therapeutic programmes (OPT). Some were also referred for treatment to existing health structures with OPT and supplementary feeding programme (SFP) components.
- According to Nutrition Cluster mapping, there are 152 OTPs, 29 in-patient therapeutic programmes and 91 targeted SFPs functional in CAR.
- INTERSOS in Bangui screened 172 children in the Don Bosco, Guitangola, St Charles Lwanga and St Jaques Keptene sites. Findings revealed 17 MAM cases and four SAM cases. Thirty health workers (15 female; 15 male) were trained in Bozoum (Ouham Pende Province).

#### Gaps and constraints:

- Coverage of community-based management of acute malnutrition services outside of Bangui remains low due to security constraints.
- There is a gap in the provision of activities to support appropriate infant and young child feeding.

- Limited progress was made in treating MAM due to the lack of nutrition partners' engagement. The only organizations involved in MAM treatment are MSF, AHA, INTERSOS, Ami d'Afrique and Caritas. In June, WFP expanded its programme to reach 96 health facilities in 12 provinces.



## Protection

### Needs

- Increase protection for people affected in hotspots, particularly IDPs in Batangafo, Markounda and Bambari.
- Identify solutions for two IDP sites in Bambari where IDPs (mainly women, girls and children) are living in difficult conditions in the immediate vicinity of international military forces.
- Mobilize additional resources to increase child disarmament, demobilization and reintegration (DDR) programmes, as well as quality psychosocial support to children affected by conflict and armed violence.
- Advocacy with armed groups needs to be strengthened to ensure respect for basic human rights, including UN frameworks governing children in armed conflict.
- Promote the recently signed birth-registration decree through additional support of child-protection actors, including awareness-raising and capacity-building to ensure its full implementation.

**2 million**

Vulnerable people targeted in 2014

### Response:

- From 24 to 28 July, a team of the Commission on Population Movement of the Protection Cluster organized a mission to Bria. It revealed that humanitarian access issues on axes and the surrounding localities of Bria are leading to a limited humanitarian response to affected people, mainly IDPs.
- From 24 to 25 July, UNHCR led a protection mission to Boda (Lobaye Province) to monitor the protection situation, and to provide support and guidance to the coordination mechanism in place. The mission's findings revealed a progressive return movement of IDPs from the non-Muslim community to their neighbourhoods. The mission's key recommendations are to strengthen the social cohesion programme; accelerate the implementation of UNHCR/CRS shelter project to support housing rehabilitation efforts for communities and IDP returnees; and continue the verification process of IDP communities at risk and the distribution of food to both communities.
- From 24 to 27 July, the regional Protection Cluster in Bossangoa organized a joint mission comprising UNHCR, OCHA, UNICEF, WFP and FAO to Bouca (Ouham Province) to assess the humanitarian situation. The mission revealed that the security situation in Bouca remains calm but volatile, with several cases of human rights violations including physical violence, abductions and property destruction. It also highlighted that in Boya 1 and Bozacon, IDPs are living in difficult conditions. Several malnutrition cases were also reported. Recommendations and priority actions will be discussed during the regional inter-cluster meeting in Bossangoa on 29 July.
- From 23 to 29 July, Catholic Relief Services organized several training sessions in Paoua on community protection and social cohesion. A total of 168 community leaders were trained on the identification of social cohesion needs in their communities. DRC organized a capacity-building training for humanitarian staff involved in social-cohesion activities in Paoua.
- Some 22 unaccompanied or separated children were registered by UNICEF and its partners. Family-tracing and reunification procedures for 17 cases of unaccompanied children have been initiated by NGOs and ICRC. Sixteen children were reunified with their families. Identification, registration and family tracing of unaccompanied and separated children began in Bambari. Two new child-friendly spaces have been established in Bria.
- With regards to child DDR interventions, psychosocial support and transitional care activities are ongoing for 1,272 children extracted from armed groups. In Bria (Haute-Kotto Province), 40 children (39 boys and 1 girl) have access to medical and psychosocial support, and 47 children in Bangui and 184 in Damara/Sibut have access to reintegration programmes.
- Some 3,116 people including 1,627 children had access to mine/unexploded ordnance risk education. Awareness-raising activities were conducted in and around Bangui, particularly in the Fatima, Notre Dame des Chartres, Saint Sauveur, Centres Jean XXIII IDP sites, and the 5th district, through radio messages, theatre groups and information leaflets.
- A total of 2,473 people were sensitized on issues related to prevention and response to violence against children in Bouar, Bangui and Bossangoa. Some 418 adults and 856 children were sensitized on gender-based violence and gender equality in Bossangoa and Bangui.
- Six child-protection sub-cluster members received briefings on the Child Protection Minimum Standard. Eighteen UN and NGO representatives were trained on monitoring and reporting mechanism concepts and tools.

**Gaps and constraints:**

- The tense security situation in and around Batangafo, Markounda, Kouki, and in areas such as Abba, Amada Gaza and Gadzi, impeded access to areas where protection activities are required.
- Recent heavy rains have hindered children's access recreational activities and damaged temporary child-protection structures in several areas.

**Emergency Shelter and Non-Food Items (NFI)****Needs:**

- A recent UNICEF/RRM assessment carried out by PU-AMI in Boguera, Boganangone and Zalingo in the Boganangone sub-province (Lobaye Province) reports the need for NFI distributions to IDPs and returnees. Shelter-repair needs have been identified for returnees in the same villages.
- A UNICEF/RRM assessment carried out by ACF in Boya 1 and Bozakan in the Bouca sub-province (Ouham Province) highlights the need for NFI distributions to IDPs.
- A rapid inter-agency assessment carried out in Dekoa and Guiffa (Kemo Province) and Mbiti (Nana Gribizi Province) highlights the need for NFI distributions and shelter-repair assistance.

**703,975**

Vulnerable people targeted in 2014 with emergency shelter and NFIs.

**Response:**

- In response to the needs identified in the recent UNICEF/RRM assessment, PU-AMI is organizing NFI distributions for 174 returnee households in Irma-Baron, Nalembe and Demba-Bateke on the Carnot-Gadzi axis (Mambéré-Kadéï Province). Coordination with NRC is ongoing to organize complementary distributions in the coming weeks.
- In the last week, PU-AMI rehabilitated 32 community shelters in seven sites in Bangui, comprising Eglise Evangélique Luthérienne, FATEB, Complexe scolaire Adventiste, Saint Joseph de Mukassa, Mosquée Centrale, Votongbo 2 and Béthanie. IRC distributed 500 NFI kits in Père Comboni, St. Carmel and Padre Pio.
- In Bambari, ICRC is assessing NFI distribution needs for IDPs within host families.
- Partner agencies providing shelter-repair assistance continue to assess needs in the interior. ICRC has provided shelter-repair support to 478 households along the Kaga-Bandoro-Mbrès axis (Nana-Gribizi Province). In Bocaranga and Paoua sub-provinces (Ouham-Pendé Province) and Nana-Bakassa and Bouca (Ouham Province), DRC is assessing shelter-repair needs. Following findings of its recent needs assessment, CRS is targeting 355 returnee households in Boguera for shelter-repair assistance in the coming weeks.

**Gaps and constraints:**

- Despite efforts to increase response in terms of assessments and the provision of NFI, emergency shelter and shelter-repair assistance, insecurity continues to hinder access to areas including Batangafo (Ouham Province) and the Obo-Zemio areas (Haut-Mbomou Province).

**Emergency Telecommunications****Response:**

- The ETC carried out a secure telecoms assessment mission in Bambari.
- Internet connectivity was installed in the WFP office in Bambari. A VHF repeater is being installed to increase coverage.
- All ETC information is available at: <http://ictemergency.wfp.org/web/ictopr/emergencies2013/central-african-republic>

**Gaps and constraints:**

- The lack of secure compounds and/or adequate office space in some common operational locations prevents the installation of ETC equipment and deployment of services.
- Outside of Bangui, the lack of radio operators and the security situation are hampering the fulfilment of the C-MOSS requirements for COMCENs. Planned recruitments have been delayed due to funding constraints.
- The funding situation remains critical. The joint ETC/Logistics Cluster operation is only 46 per cent funded. Additional funding is required to maintain operations at their current level.

**900,000**



## Water, Sanitation, Hygiene

People targeted in 2014

### Needs:

- In Bossangoa, 300 IDPs require WASH support.
- Around Bossangoa, IDPs in host communities and returnees (number not yet estimated) need WASH support, particularly access to water.
- Following attacks around Batangafo, 5,137 people are seeking refuge in two villages near Bouca, Boya 1 and Bozacon. WASH support is required due to open defecation and the lack of clean water sources.
- In Kaga Bandoro, 11,554 IDPs in the Eveche site and 2,455 IDPs in the Nativite site require WASH support.
- In Grimari, 8,117 IDPs in the Paroisse site need WASH support.
- In Bambari, about 13,200 IDPs in three sites require WASH support.

### Response:

- In Bossangoa (Ouham Province), through the support of SODECA and UNICEF, 35,000 people are receiving 500 m<sup>3</sup> of potable water/day. In addition, 300 IDPs received 10 m<sup>3</sup> of potable water/day (about 33 litres per person per day).
- After an assessment in Bosakon and Boya 1, the RRM team is planning to rehabilitate two boreholes and construct emergency latrines in both sites.
- In Bambari (Ouaka Province), 13,200 IDPs in over three sites continue receiving 20 m<sup>3</sup> of water/day provided by ICRC. TGH provided chlorination services to about 26 water points used by IDPs in the three sites. ICRC and TGH are increasing the potable water production capacity by bringing water treatment units and rehabilitating part of the SODECA treatment facility. TGH/UNICEF built 30 latrines for men and women and 18 latrines for children in site S (close to the Sangaris base) for 4,800 IDPs (cumulative 60 latrines for adult men and women and 36 for children). CRF carried out hygiene-promotion activities addressing hand washing, environmental and food hygiene issues for 3,900 IDPs in site M (close to the MISCA base).
- In Grimari (Ouaka Province), 8,117 IDPs at the parish received 30 m<sup>3</sup> of drinking water/day and hygiene-promotion services, including advice on hand washing, food hygiene and the use of latrines.

### Gaps and constraints:

- The presence of WASH partners in correlation to Shelter Cluster members is being assessed to identify gaps.
- Some critical areas are without WASH partners.
- No WASH contingency plan exists for the regions outside Bangui.
- The lack of coordinated operational response in key areas with people at risk hampers the synergy between humanitarian actors and the application of the “Do No Harm” approach.
- A clear integrated strategy for humanitarian assistance to returnees in Bangui is lacking.
- Solid-waste and sludge-disposal facilities are inadequate around Bangui. They need to be rehabilitated.

## General Coordination

In Kaga Bandoro (Nana Grebizi Province), OCHA and UNHCR are discussing with armed groups and international forces the need for unhindered humanitarian access to affected people.

OCHA has initiated discussions on the need to establish a working group on transhumance issues in CAR.

The working group on returns and other durable solutions held its third meeting on 28 July. A representative of the Office of the Mayor of Bangui attended in their capacity as co-lead of the group, together with OCHA and UNDP. Discussions focused on the action plans, mainstreaming protection, and the next steps of the seven identified pillars that will support implementation.

The Senior Humanitarian Coordinator, Claire Bourgeois, and the Deputy Special Representative of the UN Secretary-General, Aurélien Agbénonci, led advocacy efforts directed at the Chadian authorities through the Humanitarian Coordinator in Chad. The goal was to request a special waiver for humanitarian actors' unhindered access following the closure of borders between CAR and Chad. Some humanitarian organizations are facing difficulties transporting humanitarian supplies, including kits for IDPs and refugees in CAR.

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