

Country: Central African Republic

Emergency Type: Conflict

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Key Figures



2,800,000 Total people affected



672,000Women of reproductive age



72,983Estimated pregnant women



134,400 People targeted with SRH services



268,800People targeted with GBV programmes

Highlights

- Gender-based violence (GBV) rates remain persistently high in the Central African Republic. According to data from the Gender-Based Violence Information Management System (GBVIMS), rapes constituted just over a third of reported cases (34%) in the first half of 2024. While there has been an 8% decrease in the total number of cases compared to the same period in 2023, the overall situation remains critical.
- In July 2024, Central African Republic (CAR) declared an outbreak of Mpox, due to new infections reported in several towns and the capital, Bangui. This action follows the identification of the disease across multiple regions, with efforts intensifying to curb its spread through cooperation with neighbouring countries. The declaration aims to mobilize resources and coordinate



responses to manage and contain the disease effectively. Contacting Mpox during pregnancy is particularly dangerous as it can lead to the loss of the pregnancy or stillbirth, death of the newborn infant, or complications for the mother.

- A high number of children are out of school in the Sub-Prefectures of <u>Zangba</u>, <u>Bocaranga</u> and <u>Koui</u>. In Zangba, severe flooding and military operations left 9,463 children out of school, while in Bocaranga and Koui the insecurity resulted in the closure of 19 schools, affecting 5,079 children. Urgent action is needed to provide education and psychosocial support to mitigate adolescent girls' increased risks to violence, sexual exploitation and abuse, including recruitment by armed groups and forced and early marriage.
- As of 30 June, there were 453,301 internally displaced persons (IDPs), with 80,032 (18%) living in IDP sites and 373,269 (82%) in host families. There were a total of 3,263 new displacements in July, mainly in Haute-Kotto, Mbomou, Ouham, and Haute-Kotto, Mbomou, Mbomou, Ouham, and Haute-Kotto, Mbomou, Mbomou

Situation Overview

- The security situation in the <u>Vakaga</u> prefecture is marked by the heavy presence and movement of armed groups on various axes towards <u>Birao</u>. Unidentified armed groups continue to attack, hold up, and commit human rights violations against civilians in and around <u>Birao</u>, <u>AmDafok</u>, and along the <u>Boromata-Sikikedé</u> axis, approximately 125 km west of <u>Birao</u>. These incidents, coupled with heavy rains, seriously hampered access to the <u>Korsi refugee camp</u> for much of July. The volatile environment and continuous armed activities have exacerbated the humanitarian crisis in the region, resulting in heightened risks of GBV and difficulties accessing basic services, particularly for pregnant and breastfeeding women.
- Around 2.5 million people are experiencing severe food insecurity (IPC Phase 3-4); the majority of people impacted are
 displaced or affected by armed conflict. Pregnant and breastfeeding women and their children are vulnerable to malnutrition.
 Hunger may also increase women and girls' risks to violence, sexual exploitation and abuse, and force them to resort to
 negative coping mechanisms.
- Recent torrential rains and strong winds in CAR have affected approximately 8,000 people, displacing around 3,300 and destroying 1,700 houses. The hardest-hit areas are the districts of <u>Bangui</u>, <u>Bimbo</u> and <u>Kembé</u>, where over 110 temporary shelters were destroyed, impacting 500 refugees and local residents.
- 28,871 Sudanese refugees have settled in CAR, including 14,275 living in the Korsi refugee camp. Borders remain open, but new arrivals have decreased by 50% due to the rainy season. Women make up 53% of the refugee population, and 55% are children. Recent perception surveys among newly arrived refugees emphasize the urgent need for improved living conditions, streamlined asylum procedures, and enhanced food assistance.

UNFPA Response

Gender Based Violence

 UNFPA, the GBV Area of Responsibility (AoR), in collaboration with OCHA, and the prevention of sexual exploitation and abuse (PSEA) Task Force, conducted a sensitization session for 73 professionals, including health workers, social workers, public administration officials, and community leaders from the sub-prefectures of <u>Bambouti</u>, <u>Ndelé</u>, <u>Ngaoundaye</u>, <u>Rafaï</u> and <u>Zangba</u>.



The training aimed to equip participants with the skills to identify and report instances of GBV and PSEA and to encourage openness to consultation and feedback from the populations they serve.

- GBV services, including psychosocial support, were provided to 271 women and girls at three safe spaces and one health facility in the prefectures of <u>Bambouti</u>, <u>Bimbo</u>, <u>Bria</u>, <u>Ndelé</u> and <u>Rafaï</u>. Fifty-two women attended incomegenerating activity training and received kits for pastry and soap-making, while another 60 women received dignity kits. Additionally, 1,213 individuals (531 women, 250 girls, 181 men, and 148 boys) attended sensitization sessions about GBV prevention and risk mitigation.
- In <u>Ngaoundaye</u>, 263 women and girls received psychosocial support services from the listening centre. Sensitization programmes reached 4,954 people, including 1,526 women, 1,229 girls, 1,855 men, and 344 boys, educating them on factors that expose women and girls to GBV.
- In Zangba, 148 women and girls participated in life skills activities at the women's safe space. Additionally, 297 individuals, including 121 men and boys, were educated on the consequences of GBV and the importance of seeking care within 72 hours. The project also referred 10 women to deliver safely at a health facility with qualified personnel.





Dignity kits were distributed to refugee women and girls to support menstrual hygiene. © UNFPA CAR.

Sexual and Reproductive Health

- 2 midwives were deployed to the UNFPA-supported <u>Boeing Health Center</u>, Bimbo prefecture, and conducted 33 prenatal consultations, 16 safe deliveries, and 20 postnatal consultations.
- UNFPA continues to support the district hospital in <u>Birao</u>, <u>Vakaga prefecture</u> where in the reporting period there were 192 prenatal consultations (including 32 for refugees), 62 postnatal consultations (including 12 for refugees), and 88 safe deliveries (including 15 for refugees).
- UNFPA provided 59 Inter-Agency Emergency Health (IARH) kits to health facilities to support clean deliveries, the clinical management of rape (CMR), obstetric care, and the treatment of sexually transmitted infections (STIs) to meet the needs of 4,375 people.

Youth

- An 8-day awareness campaign was launched on 24 July which focused on adolescent and youth reproductive health (AYRH), family planning, combating sexual violence, and HIV. The campaign, which includes the distribution of dignity kits and condoms, aims to educate young people with disabilities through door-to-door strategies, educational discussions, and a radio-televised roundtable. 660 young people with disabilities (380 girls and 280 boys) were reached. This initiative addresses the unique challenges faced by these individuals in accessing socio-health services tailored to their needs.
- UNFPA provided the National Committee for the Fight against AIDS with 6,480,000 male condoms, 750 dignity kits, and 10 post-rape kits for STI/HIV, and GBV prevention activities in Bangui and other localities across the country.



Results Snapshots



7,103
People reached with SRH services
73% Female 27% Male



17 Health facilities supported



14,230
People reached with GBV prevention, mitigation and response activities
75% Female 25% Male



12Safe Spaces for women and girls supported

NFI	176	Dignity kits distributed to individuals
•	59	Reproductive health kits provided to service delivery points to meet the needs of 4,375 people
(ii)	2	Youth spaces supported by UNFPA

Coordination Mechanisms

Gender-Based Violence:

- The GBV Area of Responsibility (AoR) coordination in CAR has undertaken a comprehensive mapping of potential GBV risks within each sector. The risk analysis is being used to develop targeted mitigation strategies aimed at reducing vulnerabilities and enhancing protective measures.
- A training session was conducted for the Food Security cluster, focusing on the use of the <u>GBV Pocket Guide</u> and the principles of psychological first aid. 53 participants learned how to provide survivor-centred support to GBV survivors and how to safely refer them to available services.
- Two sessions on minimum standards for Transforming Systems and Social Norms and Collecting and Using Survivor Data (Standards 13 and 14) were organized for 57 GBV AoR members.



Sexual and Reproductive Health:

• The Thematic Group on SRH met on July 25, 2024. Partners presented their field activities, the challenges encountered, and their outlook for the upcoming weeks and months.

Funding Status

UNFPA CAR is grateful for the continued support of its donors. As of the end of July 2024, thanks to the generous contributions of Global Affairs Canada, ECHO, French Red Cross, the UN Peacebuilding Fund, USAID-BHA and UN-CERF, UNFPA has secured 20% (US\$ 3,835,432) of the US\$ 19,251,816 required to deliver critical SRH and GBV services in CAR in 2024, leaving a funding gap of US\$ 15,416,384.

