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for every child

Central African Republic

Coronavirus (COVID-19)
Situation Report n°10

HIGHLIGHTS

Since the first case of COVID-19 in CAR in mid-March, 4,971 positive cases including 63 deaths (as of 31 December) have been confirmed. Although confirmed cases have decreased significantly in recent months, relatively few tests are carried out in CAR, leaving the real extent of the pandemic in the country only partially known. The outbreak of election-related violence aggravated the effects of the COVID-19 pandemic. Schools were closed again in mid-December.

In this reporting period results achieved by UNICEF and partners include:

- **175,135** people were reached with critical WASH supplies and services
- **448** schools equipped with handwashing stations to ensure safe back to school;
- **29,519** additional children following lessons on the radio;
- **11,490** children aged 6-59 months admitted for treatment of severe acute malnutrition (SAM) across the country;
- **1,120** families received humanitarian multi-sector cash transfers
- **13,929** children and community members received psychosocial support.

Situation Overview & Humanitarian Needs

Since the first case of COVID-19 in CAR in mid-March, 4,971 positive cases including 63 deaths (as of 31 December) have been confirmed. Although confirmed cases have decreased significantly in recent months, relatively few tests are carried out in CAR, leaving the real extent of the pandemic in the country only partially known.

The outbreak of election-related violence aggravated the effects of the COVID-19 pandemic. In the run-up to the 27 December presidential and general elections and following the invalidation of former president Francois Bozizé's candidacy by the Constitutional Court, a new coalition of a number of armed groups - Coalition des Patriotes pour le Changement (CPC) – was formed, asking for the elections to be postponed.

The CPC launched an offensive from the West towards Bangui on the 18th of December, and others from the East and North in the following days. The

Situation in Numbers



4,971 COVID-19 confirmed cases*

63 COVID-19 deaths*

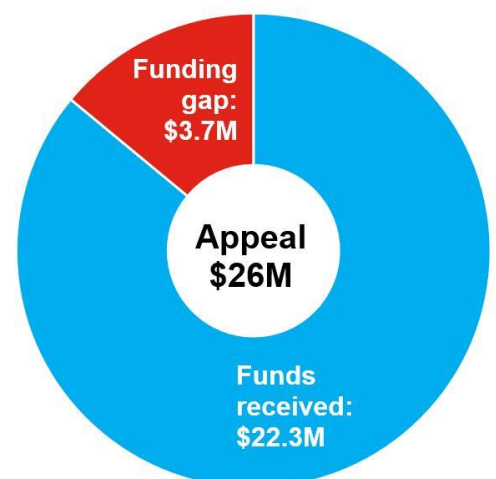
*WHO/MoHP, 31 December 2020



1.37 million

estimate number of children affected by school closures

**UNICEF CAR's
COVID-19 Appeal
US\$ 26 million**



national army, the MINUSCA's peacekeepers and bilateral allies have resisted the CPC progression. Still the coalition has managed to attack and/or occupy a number of cities and towns. These include Bossangoa, Bossembele, Yaloke, Boali, Mbaiki, Boda, Beloko, Dekoa and Bouar in the West, and Bambari, Grimari, Bakouma and Bangassou in the East.

Socio-economic activities have been negatively impacted: major businesses remain closed and transport prices high. Prices of local food products such as cereals and tubers have declined seasonally in November and December, but reduced household income and higher prices of imported products due to the disruption of the main supply route continue to negatively affect household purchasing power.

Schools, which had been closed from 27 March to mid-July due to the pandemic and which had been gradually reopened for the new school year, were closed again in mid-December.

UNICEF is actively involved in COVID-19's prevention and response in CAR and has designed a response plan aligned with the Government's. 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](#).

Humanitarian Leadership, Coordination and Strategy

UNICEF, alongside WHO and other actors, has been supporting the CAR government since the outset of the crisis. Since early March, UNICEF technical staff, have participated in the different technical commissions working on the implementation of the national response plan. UNICEF management continues to be actively involved in the design of the overall strategy, participating in high-level mechanisms chaired by the President (Crisis Committee), the Prime Minister (Technical Committee), and the Health Minister (Strategy and Method Committee).

UNICEF CAR's COVID-19 response plan focuses on risk communication and community engagement (RCCE) and infection prevention and control (IPC), in particular water, sanitation and hygiene (WASH) aspects, but also on ensuring continuous access to healthcare, nutrition services, education, child protection and gender-based violence (GBV) services. It also aims to mitigate COVID-19's socio-economic impact on the most vulnerable households through unconditional cash transfers. It is fully aligned with both the CAR Government's plan and UNICEF's global COVID-19 response plan.

UNICEF continues to lead the WASH, Nutrition, Education Clusters and the Child Protection Sub-Cluster thus ensuring that the needs of children and their mothers are fully considered in the broader CAR humanitarian community's COVID-19 strategy and response.

UNICEF's emergency and humanitarian response to the ongoing CAR crisis fully continues despite the COVID-19 pandemic.

Funding Overview & Partnerships

In 2020, UNICEF appealed for US 26 million to immediately meet growing needs of children and their families impacted by COVID-19 pandemic. UNICEF would like to express its gratitude to the Governments of Canada, Germany, Japan, the United States of America, Education Cannot Wait (ECW), the European Union, Gavi, the Global Partnership for Education (GPE), the UN's Central Emergency Response Fund (CERF), UNICEF's global humanitarian thematic funds, and the World Bank. Thanks to their generous support, UNICEF COVID-19 Response Plan was 86 per cent funded at year-end.

Nevertheless, as we enter 2021, combined effects of the pandemic and a surge in violence and displacements, additional funds are urgently needed to support the ongoing response. Without more funding, an estimated 1.4 million of conflict-affected children (HAC 2021 for CAR) won't have access to water, sanitation, nutrition, education, health and protection services.

SUMMARY ANALYSIS PREPAREDNESS AND RESPONSE ACTIONS

Risk Communication and Community Engagement (RCCE)

Since the beginning of the epidemic, UNICEF has launched a survey to assess knowledge, attitudes and behavior related to COVID-19 through the country's three main mobile phone networks. The survey is contributing to the collection of social and anthropological data related to the COVID-19 epidemic and data is used by UNICEF to refine its RCCE strategy.

During the reporting period, 1,071 new people responded in Bangui, Ouham Pende, Haute Kotto, Ouaka, Nana Mambere, Mambere Kadei prefectures. The most relevant results show that 90% of respondents said they have received information about COVID-19 prevention measures and that social distancing (53%), wearing a mask (48%) and hand washing (44%) are the most important measures to prevent the spread COVID-19. However, 34% think that these three measures are difficult to put into practice in their daily lives.

UNICEF continues to support coordination between partners through weekly RCCE meetings on how to collect feedbacks, how to process them and make them available through a database.

Infection Prevention & Control (IPC)

During this reporting period, a total of 175,135 people was reached with critical WASH supplies and services.

To promote handwashing as a prevention measure, UNICEF, ANEA, the Direction Générale des Ressources Hydrauliques (DGRH) and NGO partners installed 739 additional handwashing facilities in governmental offices and public places, in Nana Mambere, Mambere Kadei, Sangha Mbaere, Kemo, Nana-Grébizi, Ouaham, Ouham Pende and Ouaka prefectures, for an estimated 168,800 users per day. Users have been sensitized on the correct use of these devices.

In addition, 106 health centers were provided with handwashing devices and soap to prevent COVID-19 transmission and propagation.

In partnership with ANEA, UNICEF carried out COVID-19 sensitizations reaching 43,850 people in Kemo, Nana-Grébizi and Ouham prefectures.

Continued access to essential Health care

During the reporting period, UNICEF and partners provided free essential care and prenatal consultations to 4,876 people. A total of 73,449 children and women have benefited from basic essential care as part of the continuity of services since the identification of the first case of COVID-19 in CAR. The highest peak in the use of services was observed in August and September 2020 (10,581 patients) and the lowest in November and December.

In addition, to date UNICEF trained 207 health workers on the detection and referral of suspected cases and 813 health care facility staff on Infection Prevention and Control. 12,044 health workers and community health workers were provided with personal protective equipment (PEP), including 11,794 during the organization of vaccination campaigns against measles and Tetanus.

Furthermore, 11,490 children aged 6 to 59 months suffering from Severe Acute Malnutrition (SAM) were admitted in 520 Outpatient Therapeutic Program (OTP) service points and in 47 Stabilization Canters. The quality of SAM treatment programmes remains above the SPHERE minimum standards, with a cure rate of 93.6 percent, a mortality rate of 1.06 percent, a defaulter rate of 4.00 percent and a non-response rate of 1.4 percent.

In addition, UNICEF and partners sensitized over 13,095 mothers and caregivers on infant and young child feeding practices.

Access to continuous education, child protection and GBV services

To facilitate the continuity of education in the most vulnerable areas, UNICEF keeps on supporting learning through radio education programs, reaching 29,519 additional children. In total, 183,189 children benefitted from radio education programs and 24,000 solar radio have been distributed.

In order to ensure that the resumption of schooling complies with national COVID-19 guidelines, UNICEF supported 433 schools in the implementation of safe school protocols providing hand-washing devices and thermometers and a 12-page guide on COVID-19 prevention and control has been distributed to 15,700 school teachers.

UNICEF and partners also sensitized 10,088 children in Bambari (Ouaka) and Kaga Bandoro (Nana-Grébizi) on COVID-19 barrier measures.

Despite the challenges linked to the pre and post electoral tensions, UNICEF and partners were able to maintain the provision of protection services to children affected by the ongoing humanitarian situations, including those affected by the COVID-9 pandemic particularly in Bangui, Kaga Bandoro and Ouaka prefectures.

UNICEF partners continued to raise awareness of preventive measures for vulnerable children, including street children, the identification of children in need of protection and the provision of community-based psychosocial support to affected children and their families through a door-to-door approach and the implementation of child-friendly spaces (CFS). 13,928 children, including 6,554 girls, benefited from daily organized play and recreational activities through UNICEF supported CFS in Bossangoa, Paoua and Bozoum (Ouham), Boguila and Marcounda (Ouham Pende), Bouar, Baboua et Baoro (Nana Mambere), Bakala, Kouango et Bambari (Ouaka).

46 children without parental care were provided with appropriate family-based care through placement in foster families or reunification with their parents and relatives. Follow-up is provided through UNICEF NGO partners to monitor their social integration, identify their individuals needs and support referral to services for support.

Given the increase of gender-based violence (GBV) incidents and the limited capacity of actors to address GBV in the context of COVID-19, UNICEF trained 122 staffs of NGOs on GBV prevention and response.

Social protection

As part of the UNICEF COVID-19 response, UNICEF partner Norwegian Refugees Council distributed 50,000 Central African CFA franc to 1,120 families in the prefecture of the Ombella Mpoko. This distribution aimed to reinforce the socio-economic situation of the most vulnerable households financially impacted by the pandemic. Depending on the security situation, two other distributions of the same amount will be following in the coming months.

This unconditional cash transfer response is directly supporting 771 women, 349 men, including 31 people with disability, 2593 girls and 2483 boys.

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

UNICEF CAR Facebook: www.facebook.com/UNICEFCAR

UNICEF CAR Twitter: <https://twitter.com/UNICEFCAR>

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

Annex A: Summary of Response Result Results

	UNICEF and IPs		
	2020 Target (March – Dec20)	Total Results	Change since last report ▲ ▼
RISK COMMUNICATION AND COMMUNITY ENGAGEMENT (RCCE)			
Number of people reached on COVID-19 through messaging on prevention and access to services	2,000,000	2,000,000	
Number of people sharing their concerns and asking questions/clarifications for available support services to address their needs through established feedback mechanisms.	9,000	5,166	1,071
Number of people who participate in COVID-19 engagement actions	40,000	109,931	0
INFECTION PREVENTION AND CONTROL (IPC)			
Number of people reached with critical WASH supplies (including hygiene items) and services	1,055,000	779,547	70,935
Number of healthcare facilities reached with (one or more) WASH services and IPC equipment	70	186	106
Number of healthcare facilities staff and community health workers provided with Personal Protective Equipment (PPE)	9,000	12,044	9,064
Number of healthcare facility staff and community health workers trained in Infection Prevention and Control (IPC)	1,000	813	433
CONTINUITY OF HEALTHCARE			
Number of children & women receiving essential healthcare services, including immunization, prenatal, postnatal, HIV & GBV care in UNICEF supported facilities	71,000	73,449	4,876
Number of primary caregivers of children aged 0-23 months who received IYCF counselling through facilities and community platforms*	138,000	145,649	13,095
ACCESS TO CONTINUOUS EDUCATION, CHILD PROTECTION & GBV SERVICES			
Number of children supported with distance/home-based learning	200,000	183,189	29,519
Number of schools implementing safe school protocols (COVID-19 prevention and control)	1,500	937	127
Number of children without parental or family care provided with appropriate alternative care arrangements	300	399	46
Number of children, parents and primary caregivers provided with community based mental health and psychosocial support	20,000	45,777	13,928
Number of UNICEF personnel & partners that have completed training on GBV risk mitigation & referrals for survivors, including for PSEA	300	365	122
SOCIAL PROTECTION			
Number of households (affected by COVID-19) receiving humanitarian multi-sector cash grant for basic needs	5,000	1,120	1,120

* These activities are funded under the pre-existing CAR Humanitarian Action for Children (HAC), and not included in UNICEF CAR's COVID-19 response plan.

Annex B: Funding Status

Sector	Requirements	Funds received/ reallocated/ Confirmed	Funding gap	
			\$	%
Risk Communication and Community Engagement (RCCE)	1,000,000	560,000	440,000	44%
Infection Prevention & Control (IPC)	11,550,000	8,067,000	3,483,000	34%
Health & Nutrition	3,600,000	2,320,806	1,279,194	35%
Education	5,800,000	8,270,000	-	-
Child Protection	1,550,000	765,651	784,349	50%
Humanitarian Cash Transfer	2,500,000	900,000	1,600,000	64%
Multisector	-	752,349	-	-
Total	26,000,000	22,335,806	8,586,543*	14%

*The funding gap of 8.58m USD does not consider the funding received for the education sector beyond the required funding. Instead, these funds are considered in the graph on page 1 (Funding gap 5.7M).