

HUMANITARIAN NEEDS OVERVIEW 2023

English Summary

January 2023

Central African Republic



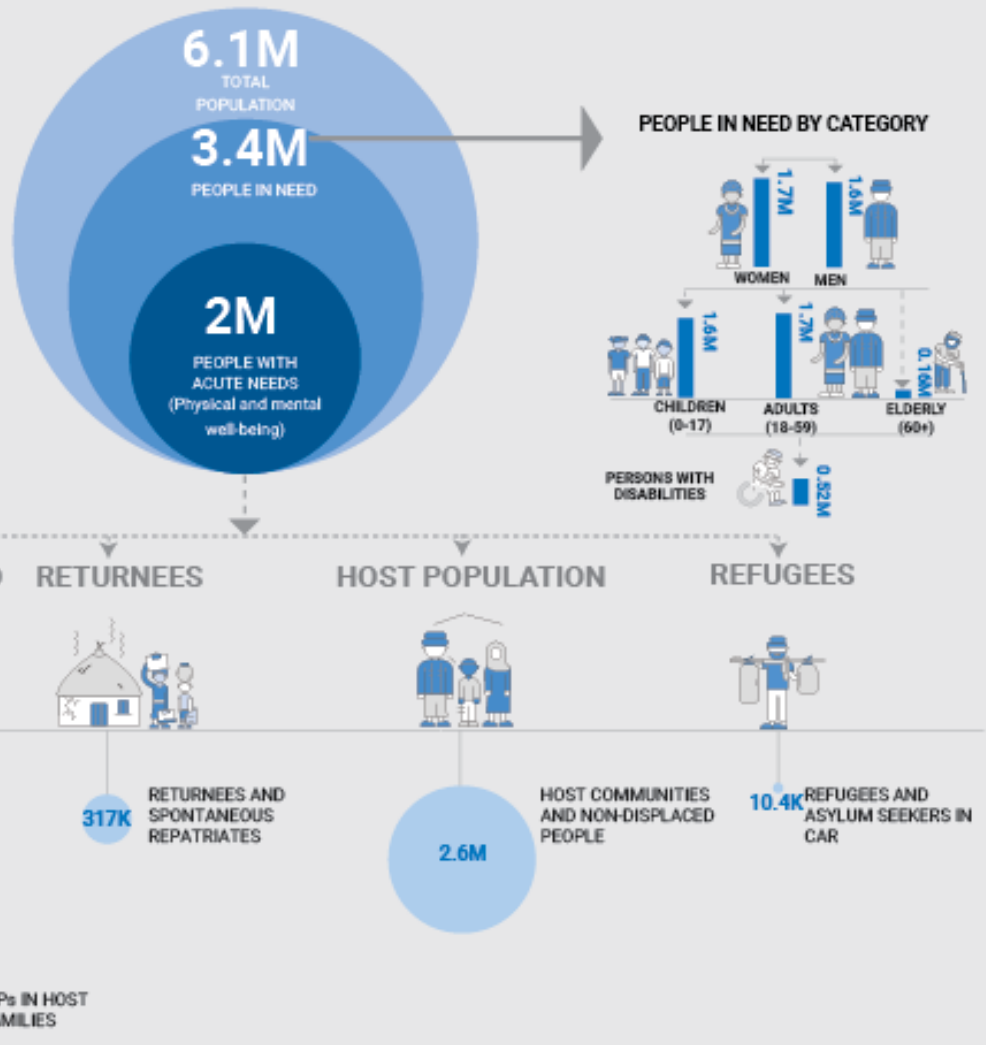
A mother and her child are waiting for relief items to be distributed in Bangassou, Mbomou Prefecture. ©OCHA/V.Edgar Ngarbaroum, 2022.

About

The Humanitarian Needs Overview (HNO) 2023 for the Central African Republic was consolidated by the United Nations Office for the Coordination of Humanitarian Affairs (OCHA) on behalf of the Humanitarian Country Team and other humanitarian partners. It presents a common understanding of the crisis in the Central African Republic, including the most pressing humanitarian needs and the estimated number of people who need humanitarian assistance and protection. The HNO provides an important basis to help guide joint strategic planning of the humanitarian response in 2023. This document presents a summary of the HNO 2023 for the Central African Republic in English. The original report in French can be downloaded at: <https://bit.ly/HNO2023>

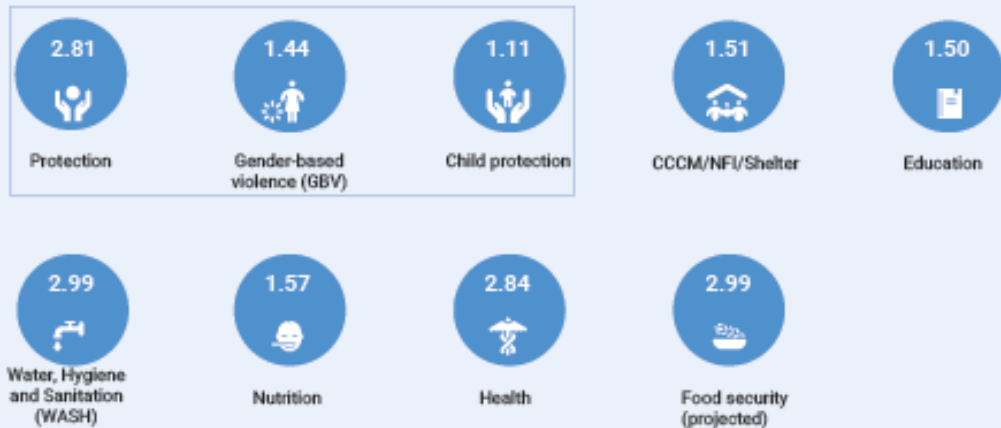
AT A GLANCE

PEOPLE IN NEED



PEOPLE IN NEED BY SECTOR

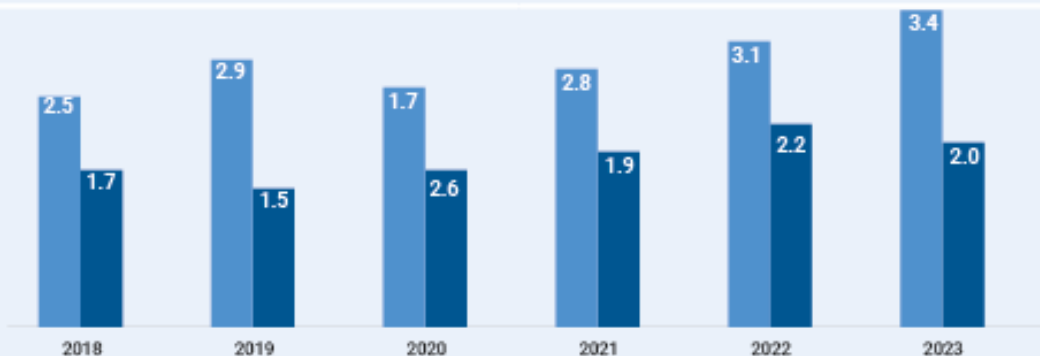
(million)



PEOPLE IN NEED

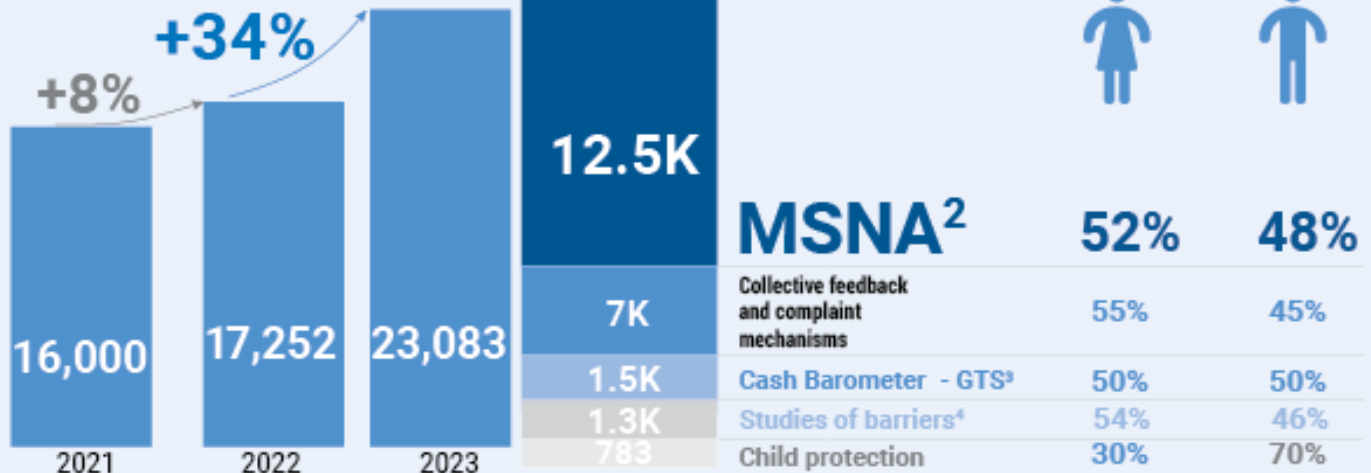
(million)

■ People in need
■ People with acute needs (million)



Despite the complex operational environment, humanitarian actors surveyed more than 23,000 households, informants and key observers and more than 3,470 locations were covered by the DTM¹.

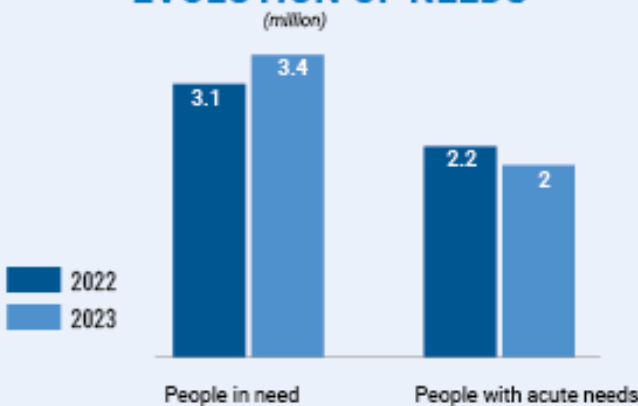
HOUSEHOLDS SURVEYED



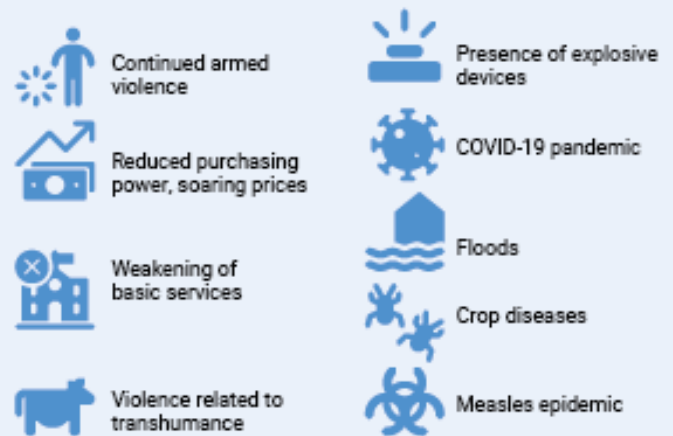
1- Displacement Tracking Matrix, 2- Multi-Sectoral Needs Assessment, 3- Ground Truth Solutions, 4- Studies of barriers to access humanitarian aid for people with disabilities

The proportion of people in need is estimated at 56% of the total population, compared to 62% in 2022.

EVOLUTION OF NEEDS

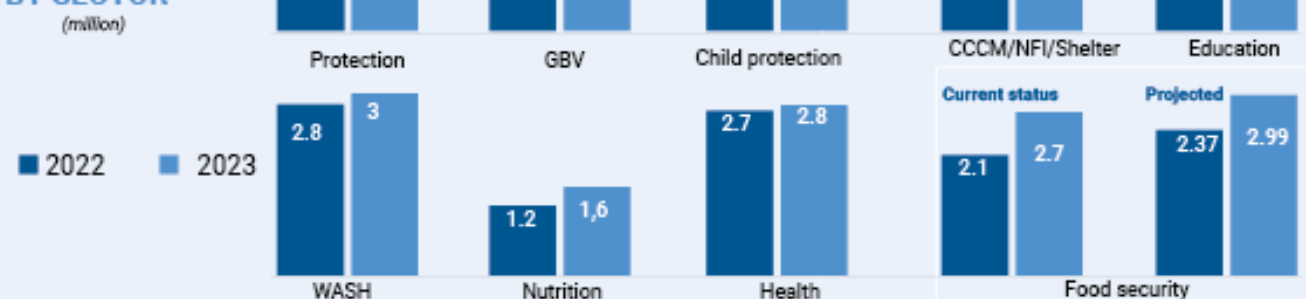


AGGRAVATING FACTORS



Compared to 2022, the number of people in need has increased in all sectors.

EVOLUTION OF PEOPLE IN NEED BY SECTOR



Part 1: Summary – Soaring humanitarian needs in 2023

The humanitarian crisis in the Central African Republic (CAR) continues to deteriorate. As a result of violence against civilians and insecurity in areas outside urban centres, several million people are increasingly vulnerable and their livelihoods are eroding. Their access to food and basic services, such as health care and water supply, is drastically limited.

In 2023, 3.4 million people – 56 per cent of the population – need humanitarian assistance and protection, an increase of 10 per cent compared to 2022. This includes 2 million people who have such severe needs that their physical and mental well-being is at risk.

These are the findings of a joint multi-sectoral assessment and analysis conducted by the humanitarian community among vulnerable people, published in the Humanitarian Needs Overview 2023 for CAR. People affected by the crisis were at the heart of the analysis, with 23,300 households and key informants interviewed in all 72 sub-prefectures of the country. The results shed light on how the current crisis is affecting the living conditions of the population, available services and access to these services, and inform about people's priority needs.

Increasing needs

The sectors with the largest number of people in need of humanitarian assistance in 2023 are water, sanitation and hygiene (WASH), food security, health and protection, comprising between 2.7 and 3 million people per sector. Food security and WASH are the sectors with the greatest increase of needs, with 600,000 (+25 per cent) and 200,000 (+7 per cent) more people in need compared to 2022.

While clashes between parties to the conflict have decreased in intensity to some extent, violence against civilians has not kept pace and livelihoods continue to deteriorate, including as a result of forced displacement. In addition, the stress within households due to food insecurity, as well as the adoption of negative coping mechanisms have led to an increase in gender-based violence (GBV), affecting thousands of women and girls. Of the 10 sub-prefectures that recorded an increase in GBV cases, five sub-prefectures are classified in phase 4 of 5 on an international food insecurity classification scale, just one step away from a catastrophic situation.

A solid foundation for the humanitarian response in 2023

To meet people's needs in 2023, humanitarian actors, in collaboration with the Central African Government, developed a common strategy to guide their response, based on the Humanitarian Needs Overview 2023. This strategy is detailed in the Humanitarian Response Plan 2023 for CAR.

Thanks to generous donor contributions, humanitarian partners in CAR have provided life-saving multi-sectoral assistance to 1.5 million people¹ during the first nine months of 2022, despite a volatile security context. Although the level of funding for the Humanitarian Response Plan 2022 remains among the highest in the region, sectors such as WASH, education and protection, in particular GBV, remained underfunded. Humanitarian partners are counting on the continued commitment of donors to stand by Central Africans and enable humanitarian organizations to respond to the ever-growing needs of the population in 2023.

¹ Central African Republic: Humanitarian Dashboard, January - September 2022: <https://bit.ly/3HN2vSX>

Part 2: Humanitarian conditions and severity of needs

Physical and mental well-being

Military clashes have decreased in intensity, but violence against civilians and insecurity outside urban centres continue to limit access to food, water and health care, including reproductive health, for several million people. This has serious consequences for the nutritional status of women and children, as well as for the physical and mental well-being of Central Africans affected by the crisis.



Half of the residents of the IDP site 'PK3' in Bria, Haute-Kotto Prefecture, are children. ©OCHA/A.Cadonau, 2022.

The Batangafo Sub-prefecture, which was particularly affected by armed violence and flooding, and which registered the highest number of shocks in 2022, illustrates the close link between conflict, disasters and food insecurity. The presence of armed groups in villages along the Bouca – Batangafo axis has drastically reduced access to fields, with 93 per cent of residents reporting that a family member had gone to sleep hungry in the previous month because there was not enough to eat.² The same applies to the Ndélé Sub-prefecture, where this percentage rises to 96 in the face of conflicts related to seasonal cattle migration (transhumance), military operations and rising food prices at the markets throughout the year. The inaccessibility of fields and markets for buying and selling agricultural produce is also a major factor in the situation. For example, 50 per cent of the population of Satéma in the Basse-Kotto Prefecture have to travel more than two hours to reach the

nearest market, and 92 per cent say that it has happened in the last four weeks that they did not have anything to eat because they lacked the means.³

The impact of food insecurity on health indicators was noted in the assessments of Health Cluster partners. Households are using fewer health services in favour of buying food. The number of curative consultations in health facilities in the Bocaranga Sub-prefecture dropped from 2,224 in the first quarter of 2021 to 600 in the first quarter of 2022, according to the activity reports of the NGO Mentor Initiative. The situation is similar in the Ippy Sub-prefecture where, the number of curative consultations at the Ippy Hospital declined from 9,255 in the first quarter of 2021 to 3,303 in the first quarter of 2022, according to the activity reports of the NGO COHEB. At the national level, 40 per cent of the population report that they are unable to meet the costs of health care.⁴ These financial difficulties are particularly pronounced for internally displaced persons (IDPs) living with host families, returnees and the non-displaced population. The fact that fewer IDPs living at IDP sites report financial difficulties in accessing basic services may be explained by the fact that they are closer to the free services offered by humanitarian organizations.

Malnutrition among children under 5 and pregnant and breastfeeding women is one of the visible consequences of food

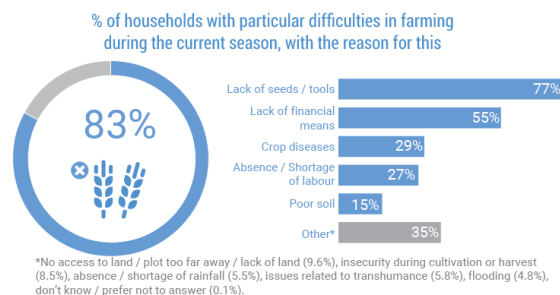
² REACH, Multisectoral needs assessment (MSNA), 2022

³ REACH, MSNA, 2022

⁴ REACH, MSNA, 2022

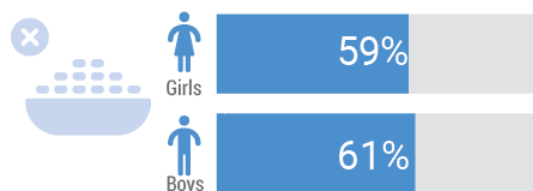
insecurity. Other factors contributing to malnutrition include poor access to water for 68 per cent of Central African households, as well as to sanitation. In the Sub-prefectures of Amada-Gaza, Abba and Alindao, where the nutritional status of children under 5 has reached critical levels, between 75 and 91 per cent of households report problems accessing water. At the national level, only one-fifth of households have access to improved sanitation facilities. Equally worrying is access to hygiene in health services: 79 per cent of health facilities do not have the minimum WASH package⁵.

As agriculture is the main source of income in most prefectures, households that are unable to farm are forced to adopt severe negative coping strategies. In the Prefectures of Kémo and Basse-Kotto, households reduce the number of meals eaten per day for an average of 4.5 consecutive days. Food insecurity and financial stress lead to children dropping out of school, working or being sexually exploited. In the Sub-prefectures of Kouï, Kambo, Kembé, Kouango and Kaga-Bandoro, all classified in Phase 4 of the Integrated Food Security Phase Classification (IPC), between 37 and 62 per cent of children aged 5 to 17 work more than four hours a day.⁶ In the same sub-prefectures, between 30 and 40 per cent of children are not enrolled in a formal school.⁷



Food insecurity and lack of food is also the main cause of psychosocial distress among boys (61 per cent) and the second most common among girls (59 per cent). The risks of GBV have also been aggravated by food insecurity. A trend analysis of the Gender-based Violence Information Management System (GBVIMS) for the second quarter of 2022 revealed that among the 10 sub-prefectures that recorded an increase in GBV cases, five are classified in the food emergency phase 4.⁸ At the national level, 46 per cent of GBV cases were motivated by food shortages.⁹

Lack of food, the main cause of psychosocial problems for boys and the second most important for girls



⁵ HeRAMS, 2019

⁶ REACH, MSNA, 2022

⁷ REACH, MSNA, 2022

⁸ <https://bit.ly/3X4Vhy4>

⁹ Protection monitoring, January to April 2022

Living conditions

Fragile shelters, poor hygiene and sanitation facilities and difficulties in accessing education have contributed to the erosion of living conditions for people affected by the crisis, whether they are living at displacement sites or in host families, or have returned to home villages.

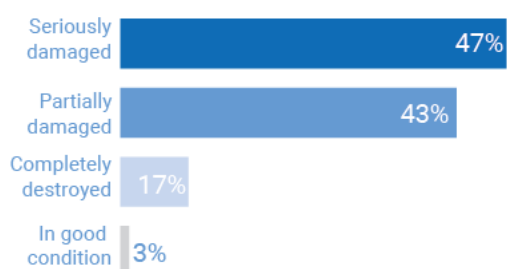


7-year-old Saphira prepares cassava flour in her village Mourouba, Ouaka Prefecture. ©OCHA/A.Cadonau, 2022.

Prolonged displacement is a reality for more than half of all IDPs.

Of the nearly half a million IDPs in the country, 60 per cent have been displaced for more than two years and a third for more than four years.¹⁰ Living conditions at IDP sites and in host families are harsh. The majority of IDPs at sites live in emergency shelters and almost 70 per cent of IDPs in host families live in semi-permanent straw structures.¹¹

Status of shelter at IDP sites

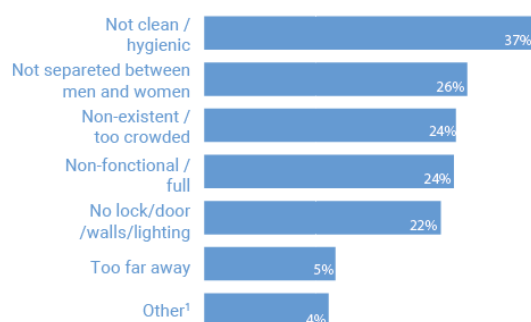


This precarious situation also affects the living conditions of host families, that house the majority of the IDP population in CAR. It limits their living space and they

have to share their already meagre resources. Severe overcrowding in host families and the fragility of emergency shelters result in significant protection risks, particularly GBV risks for women and girls. 38 per cent of IDP households in host families and 41 per cent of IDP households living at sites report that sexual violence is a major risk for girls.¹²

In poor condition or unusable, unsegregated latrines and the path to them are considered unsafe for women and children. A considerable proportion of households of IDPs living at sites (46 per cent) and IDPs living with host families (33 per cent) report that women and girls avoid certain areas of the community, particularly latrines, for fear for their safety. In 93 per cent of locations where IDPs are hosted, communal latrines are not segregated between women and men. The path to the latrines was cited by 35 per cent of respondents as dangerous for children.¹³

of households by type of difficulty in accessing sanitation facilities



1: Visiting sanitation facilities is dangerous (1.4%), people with physical and/or sensory disabilities do not have access (1.7%), certain groups (children, women, elderly, ethnic minorities, etc.) do not have access (1.2%).

¹⁰ Displacement Tracking Matrix (DTM), "Displacement Monitoring Report", August 2022, Round 16

¹¹ Population Movement Commission, September 2022

¹² REACH, MSNA, 2022

¹³ Area of responsibility (AoR) Child Protection, "Assessment of Child Protection needs in CAR in 2022, preliminary results", October 2022

In addition to protection risks, there are also health hazards. In almost all locations hosting IDPs, latrines are reportedly in poor condition or unusable. Of the IDPs at the sites, almost one third practise open defecation¹⁴, which greatly increases the risk of faecal contamination, which in turn fosters the spread of diarrhoeal diseases, one of the main causes of child mortality and malnutrition.

Insecurity and displacement have greatly affected access to education. In 2022, about 10 per cent of children enrolled in school at the beginning of the year dropped out. In areas that experienced multiple shocks during the year, such as the Sub-prefectures of Batangafo and Ippy, this rises to 15 per cent.¹⁵ By not attending school, children are at increased risk of various forms of exploitation, including the worst forms of child labour, and sexual exploitation. Men and boys are more likely to be forcibly recruited by armed groups, while women and girls are at risk of forced or early marriage, and early pregnancy. One of the main protection risks for boys is forced labour, according to 16 per cent of households surveyed nationwide, with a peak of 46 per cent in the Haute-Kotto Prefecture.¹⁶

For those who attend school, the journey to school is dangerous. Explosive devices, kidnapping and sexual violence are among the greatest risks for children, according to 34 per cent of the population.¹⁷ These risks are compounded by poor hygienic conditions. More than two-thirds of

schools do not have drinking water facilities and the lack of functioning latrines forces children in 59 per cent of schools to defecate in the open. The poor hygienic conditions in schools increase the risk of diarrhoeal diseases and malnutrition.¹⁸

Rebuilding one's life from scratch in areas of return

The precarious living conditions in the host localities and/or the improved security situation in some parts of the country push IDPs to return to their places of origin. Returns are often spontaneous and unsupported, leaving returnees to rebuild their lives with little or nothing, as their initial displacement often resulted in the loss of household items. After returning to their villages, almost 70 per cent of returnees live in thatched huts and report that they have difficulty finding materials to cover their huts.¹⁹ This exposure to adverse weather and protection risks is exacerbated by a lack of sufficient access to water for almost three-quarters of returnee households. They are the population group with the highest percentage of households drinking untreated water.²⁰ The return of large numbers of households also puts increased pressure on the already very limited social infrastructure in communities. For example, the return of more than 3,000 people to the small town of Botto in Nana-Gribizi is significantly impacting access to the seven functioning water points and three schools.²¹

¹⁴ DTM, "Displacement Monitoring Report", August 2022 Round 16

¹⁵ AoR Child Protection, "Assessment of Child Protection needs in CAR in 2022, preliminary results", October 2022

¹⁶ REACH, MSNA, 2022

¹⁷ AoR Child Protection, "Assessment of Child Protection needs in CAR in 2022, preliminary results", October 2022

¹⁸ JMP, 2020

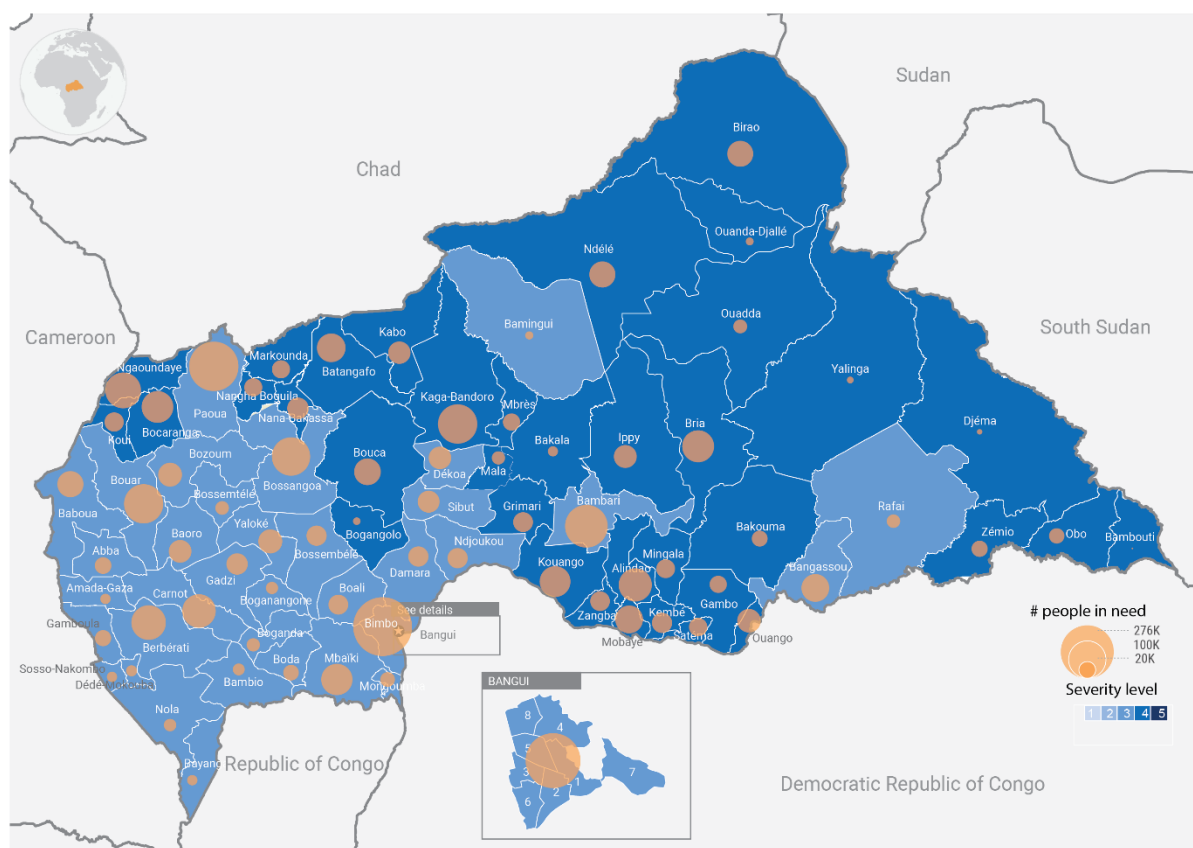
¹⁹ Mission Report: Monitoring the humanitarian situation in the commune of Botto, Nana-Gribizi Prefecture, October 2022

²⁰ REACH, MSNA, 2022

²¹ The town of Botto has a population of about 21,000.

Severity of needs

Intersectoral: Severity and number of people in need



Half of the country's 72 sub-prefectures (36 sub-prefectures) have reached a multi-sectoral needs severity level of 4 on a scale of 5 and the other 36 have reached a severity level of 3, affecting 1.4 million and 2 million people respectively. The greatest deterioration in the severity of needs was recorded in the sectors Education, CCCM/Shelter/NFI, Health, and GBV. In the Education Sector, 46 sub-prefectures are classified at level 4, compared to 27 in the previous year. In the CCCM/Shelter/NFI Sector, 16 sub-prefectures are at level 4, compared to none in 2021, and in the GBV Area of Responsibility, 35 sub-prefectures are at level 4, compared to 20 in 2021. In the Health Sector, 90 per cent of the sub-prefectures have been upgraded to severity level 3 or 4, including 52 sub-prefectures to level 3 and 13 to level 4.