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Situation Report #11

Humanitarian Crisis in CAR

Country:	Central African Republic
Emergency type:	Conflict
Start Date of Crisis:	March 24, 2013
Date Issued:	December 19, 2024
Covering Period:	November 1 to November 31, 2024
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Key Figures



Highlights

- Ongoing attacks between conflicting parties in Sudan continue to create risks of further displacement, potentially prompting additional groups of Sudanese refugees to cross the Am Dafock border into CAR.
- Currently, four active Mpox outbreaks are ongoing across the health districts of Mbaïki and Gamboula (southwest), as well as Batangafo-Kabo and Paoua (northwest). Mpox has shown significant impacts

on women, particularly in endemic regions like Central due to many factors, including limited access to health care and exposure to infected children and family members as primary caregivers.

- UNFPA reached 4,061 people with sexual and reproductive health (SRH) and 12,807 people with gender-based violence (GBV) services during November.

Situation Overview

Security situation

The refugee-hosting areas of Vakaga, Bamingui-Bangoran, Haute Kotto, Ouaka, Mbomou, and Haute Mbomou remain highly volatile due to the presence of non-state armed groups (NSAG), with continued reports of human rights concerns and risks to civilian safety.

New arrivals of Sudanese refugees

Between 10 to 16 November, 98 Sudanese refugees from 36 households arrived in Korsi, Birao, Vakaga prefecture, reflecting an increase of 56 individuals compared to the previous week. With the end of the rainy season, increased refugee arrivals in CAR, including in Korsi, are anticipated as road accessibility improves. Women and girls among the displaced people face heightened risks, including GBV, exploitation, and limited access to essential services such as health care, including SRH, sanitation, and education.

Mpox in CAR

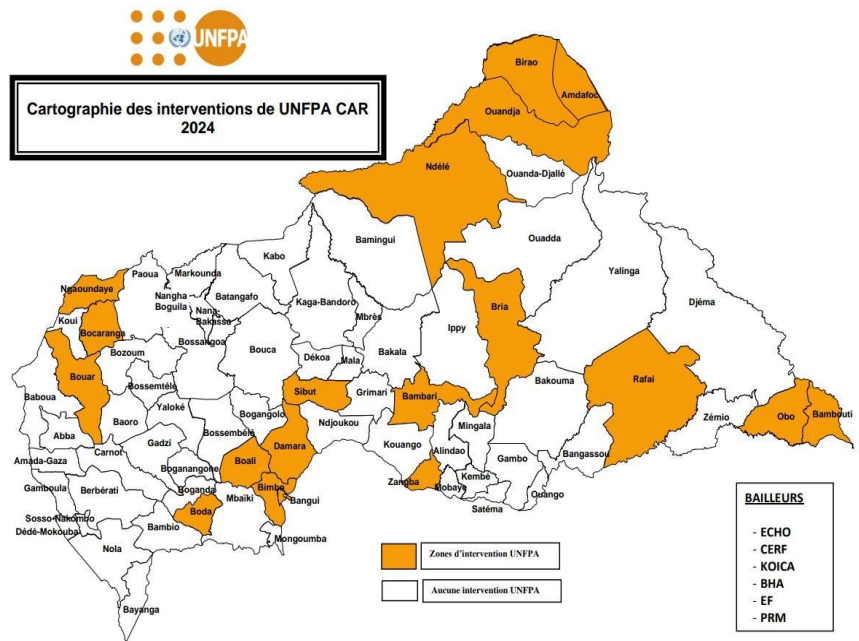
Between 20 July, when Mpox was declared an epidemic, and 10 November, the country recorded 403 suspected cases of Mpox, of which 71 were confirmed positive, with two deaths. As of November 15, 21 Mpox patients were hospitalized in Mbaïki's overburdened treatment center, highlighting critical health care gaps. The epidemic's implications for SRH are significant, particularly for pregnant women who are at greater risk of severe outcomes. Challenges include difficulty tracing nomadic contacts, shortages of diagnostic supplies, limited support for nutrition and psychological needs, and inadequate infection control measures. To address these issues, recommendations emphasize deploying additional health care staff, improving infrastructure with temporary isolation and accommodation facilities, strengthening diagnostic and logistical capacities, and integrating SRH services to ensure women's health needs are prioritized in outbreak response.

UNFPA Response

A total of 12,807 individuals were reached with GBV prevention, mitigation, and response activities during the month of November 2024. Of these, 83% were female (4,952 women and 5,399 girls) and 17% male (1,517 men and 939 boys). Among the beneficiaries, 16% were refugees (from Chad and Sudan), and 6% were internally displaced persons (IDPs). These achievements were made possible through cooperation with national NGOs, including OHDGS, AID, ASA, and INTERSOS, operating in the sub-prefectures of Birao, Ndélé, Ngaoundaye, Zangba, Rafaï, Obo, Bambouti, and Mbokolandja.

With support from four implementing partners (IPs), 771 dignity kits were distributed to women and girls in nine localities. Beneficiaries included female heads of households, single parents, orphaned schoolgirls, women and girls with disabilities, and survivors of GBV.

1,940 women and girls at risk of GBV received psychosocial support, including GBV survivors. 18% of survivors assisted through GBV case management received medical assistance. Additionally, 54% of survivors requiring clinical management of rape (CMR) services accessed them within the critical 72-hour timeframe.



Official launch of 16 Days of Activism 2024

On 25 November, under the distinguished patronage of the Presidential couple, the 16 Days of Activism against Gender-Based Violence (GBV) campaign was officially launched at the Damara Multipurpose Center for Women and Girls. During the event, it was emphasized that GBV was linked to other risks to which women and girls are exposed. Key issues highlighted included the prevalence of unwanted and unplanned pregnancies, low education rates among women and girls, high levels of poverty among women, and insufficient social services tailored to their needs. The support provided by UNFPA, in partnership with GROUFEPA, a local women's organization, has been a source of hope and empowerment for the affected communities.

Results Snapshots



4,061

People reached with **SRH services**
95% female, 5% male



8

Health facilities supported



12,807

People reached with **GBV prevention, mitigation and response activities**
83% female, 17% male



12

Safe Spaces for women and girls supported



129

Reproductive health kits provided to service delivery points to meet the needs of 6,480 people.

Coordination Mechanisms

Gender-Based Violence:

In November, the Gender-Based Violence (GBV) Area of Responsibility (AoR) convened a coordination meeting with 57 members and conducted inter-agency initiatives to strengthen GBV coordination. In 2024, the GBV AoR has targeted 632,729 out of 910,131 people in need with GBV response, risk mitigation and prevention activities, with a budget of US\$ 985,994.

Development of the Humanitarian Needs and Response Plan (HNRP) 2025

The GBV AoR actively participated in all stages of the Humanitarian Program Cycle (HPC), particularly in the drafting of the **Humanitarian Needs and Response Plan (HNRP) 2025**. Contributions included conducting a needs analysis, defining indicators, creating a severity map, and designing the sectoral framework. The AoR ensured that issues related to GBV prevention and response in emergency contexts in CAR were comprehensively integrated into the 2025 Humanitarian Response Plan.

Planned GBV AoR interventions target 622,458 individuals, including 172,146 women, 164,584 men, 145,308 girls, and 140,420 boys in 2025. These individuals represent populations with extreme protection needs due to identified GBV severity levels 3 and 4 across 43 sub-prefectures. The focus will be on areas hosting internally displaced persons (IDPs) and regions that experienced significant shocks in 2024.

The overall budget for GBV prevention, mitigation, and response in 2025 is \$9,855,994. This cost estimate was based on actual expenses reported by partners for key activities including set up or rehabilitate safe spaces for women and girls, set up or revitalize grassroots community structures, train community members and non-GBV actors on GBV. The GBV AoR's narrative and sectoral framework were fully developed and included in the HNRP 2025.

Collaboration Framework between GBV and Child Protection AoRs

Recognizing the needs of child and adolescent survivors of sexual violence and the intersecting responsibilities of the GBV and Child Protection AoRs, a joint action plan was developed to facilitate coordinated efforts between these sectors.

This work plan was based on the Terms of Reference for cooperation in the field between GBV and child protection actors. Several activities were highlighted in the joint action plan for these two areas of responsibility, including training in the care of child and adolescent survivors of sexual violence, which needs to be carried out as a matter of urgency.

Other strategic documents

In November, a guidance note for the Prevention and Response to Sexual Violence against Boys in CAR was developed by the GBV and Child Protection Sub-clusters under the lead of the NGO All Survivors Project (ASP). The guide aims to help humanitarian actors promote reintegration programs that meet the needs of boys associated with armed forces and groups who have been victims of conflict-related sexual violence.

Funding Status

UNFPA is appealing for US\$19,251,816 in 2024 to provide SRH and GBV services to women and girls in need. As of November 2024, US\$10,217,060 from ECHO, CANADA, KOICA, BHA, PRM, EF and CERF have been received, leaving a funding gap of US\$9,034,756.

