Central African Republic

Revised

19 January 2014

Prepared by OCHA on behalf of the Humanitarian Country Team

PERIOD:
1 January 2014 – 31 December 2014

4.6 million

total population

54.3% of total population

2.5 million
estimated number of people in need of humanitarian aid

40% of total population

1.8 million
people targeted for humanitarian aid in this plan

Key categories of people in need:

922,000

displaced

902,000
IDPs

20,336
refugees

Source: Commission de Mouvements de Populations, 15 jan. 2014

USD 551 million
requested

STRAIGHTEN FRAMEWORK

Overarching Purpose


Strategic Objectives

1. Provide life-saving humanitarian, multi-sectoral packages to internally displaced persons (IDPs) and host communities, migrants, and returning persons;
2. Conflict-affected people are protected from harm, specifically vulnerable groups (e.g. unaccompanied minors, women, single-headed households, migrants, unaccompanied children and the elderly);
3. Returnees and other affected people access basic services;

Financial needs per cluster/ sector

<table>
<thead>
<tr>
<th>Cluster</th>
<th>People in need</th>
<th>people targeted</th>
<th>Budget request (US$ in millions)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Food Security</td>
<td>1,600,000</td>
<td>1,250,000</td>
<td>180</td>
</tr>
<tr>
<td>Protection</td>
<td>2,600,000</td>
<td>2,000,000</td>
<td>74</td>
</tr>
<tr>
<td>Early Recovery</td>
<td>3,000,000</td>
<td>2,400,000</td>
<td>60</td>
</tr>
<tr>
<td>Health</td>
<td>3,400,000</td>
<td>878,000</td>
<td>56.4</td>
</tr>
<tr>
<td>Shelter/ NFI</td>
<td>703,975</td>
<td>703,975</td>
<td>31.7</td>
</tr>
<tr>
<td>Education</td>
<td>800,000</td>
<td>885,000</td>
<td>33</td>
</tr>
<tr>
<td>WASH</td>
<td>2,600,000</td>
<td>900,000</td>
<td>27.5</td>
</tr>
<tr>
<td>Nutrition</td>
<td>628,000</td>
<td>361,011</td>
<td>22</td>
</tr>
<tr>
<td>CCCM</td>
<td>501,980</td>
<td>501,980</td>
<td>20</td>
</tr>
<tr>
<td>Multi-Sector</td>
<td>20,336</td>
<td>20,336</td>
<td>19.3</td>
</tr>
<tr>
<td>Coordination</td>
<td>N/A</td>
<td>N/A</td>
<td>15.5</td>
</tr>
<tr>
<td>Logistics</td>
<td>N/A</td>
<td>N/A</td>
<td>10</td>
</tr>
<tr>
<td>ETC</td>
<td>N/A</td>
<td>N/A</td>
<td>1.9</td>
</tr>
</tbody>
</table>

TOTAL US$551.3 million

Photo credit: Top – Dec 2013, Bossangoa, a town 300km north of the capital of Bangui, tens of thousands of people have been displaced, including an estimated 35,000 people who have sought refuge in the grounds surrounding the Cathedral. Credit: OCHA/D. Schreiber. The boundaries and names shown and the designations used on this document do not imply official endorsement or acceptance by the Humanitarian Country Team.
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Rationale for the Revision of the Strategic Response Plan

The Central African Republic (CAR) has been sliding towards total collapse for over a year. Events in December 2013, which featured an unprecedented surge in violence and chaos, accelerated this downfall, eventually resulting in the resignation of President Djotodia and Prime Minister Tiangaye on 10 January 2014. Even before then, life in CAR was daunting. The world had ignored the 4.6 million people caught up in an intensifying conflict far too long. Today, the country is on the brink of total collapse.

The 5 December 2013 attack by anti-Balaka militia on Bangui and Bossangoa left a total of 902,000 Central Africans displaced. Gross human rights violations were committed, including killing and maiming, sexual-based violence and lootings. The attack provoked the displacement of nearly 500,000 IDPs across the country within one month – the vast majority of them in Bangui. These events triggered the declaration of an inter-agency Level 3 emergency for CAR on 11 December, followed by the deployment of a Senior Humanitarian Coordinator and an upgrading of operational capacity by most humanitarian organizations to ensure a robust response. Subsequently, Multi-Cluster Initial Rapid Assessment (MIRA) was conducted in the five most affected prefectures in Bangui and the northwest. The 10 January resignation of the President Michel Djotodia, and his Prime Minister, Nicolas Tiangaye left the country with a power vacuum.

The revised Strategic Response Plan (SRP) 2014 builds on the initial Strategic Response Plan, published on 14 December 2013, and the programmatic aspects of the 100-day Plan, issued on 24 December 2013. The revised Plan asks for US$ 551.3 million to provide assistance to 1.8 million people in all sectors, with special focus on health; protection; water and hygiene; and food. This represents an over 120% increase in requirements from the original 2014 SRP. The revised SRP outlines the humanitarian strategy for CAR over the period of one year, while a substantial scale-up of operations must be achieved in the short term to ensure the provision of protection and life-saving assistance to people in need in Bangui and north-western CAR.

The scale of the humanitarian crisis

These findings are based on the Humanitarian Needs Overview (HNO, October 2013), the Multisectorial Initial Rapid Assessment (MIRA, January 2014) and subsequent observations.

- **Extent of displacement:** Since the beginning of the latest crisis in early December 2013, nearly 500,000 people have been displaced across the country. The total number of people displaced currently amounts to 902,000 across the country, out of which 478,000 in Bangui alone.

- **Lack of health services and medication:** Two thirds of CAR's population has no access to health care, mostly due to lack of medication. 80% of the country's health workers are estimated to be displaced; 50% of 117 assessed health facilities have been looted.

- **Protection concerns hamper the restoration of people's livelihoods:** 9 of 10 communities throughout the affected areas in Bangui and north-western CAR reported security incidents during the last 3 months; 32% of respondents participating in a Protection Cluster survey reported a risk of rape while fetching wood or water.

- **Extremely poor water, hygiene and sanitation conditions:** In Bangui displacement sites, there is an average of one latrine for 1,200 persons, compared to the SPHERE standard of 50 persons per latrine.

- **Targeted violence:** The humanitarian community is particularly concerned about the growing faith-based polarisation and the apparent rise in targeted violence against minority populations.

Critical political events

1. Dec. 2012: multiple armed groups regrouped as the Seleka alliance.
4. 5 Dec. 2013: Anti-Balaka militia reached the capital.
5. 10 Jan. 2014: President Djotodia resigns.
Table 1: Increase in IDPs in CAR

Table 2: Breakdown of people in need of immediate assistance by Prefecture

*Although the CMP has not issued new figures for most of the non-Bangui affected areas due to the lack of reliable data (except for Bossangoa, Bouca and Bozoum), the results from the MIRA suggest that there is an information gap, as 84% of the community key informants that were interviewed reported recent displacement.
Scope and Boundaries of the Strategy

Temporal boundaries: The revised Strategic Response Plan (SRP) covers the response until the end of 2014. A detailed needs assessment for the entire country is expected to be conducted after six months prior to the mid-year review of the revised SRP to update the assessed needs across the country.

Demographic boundaries: The revised SRP 2014 focuses on conflict-affected people, including the currently 902,000 people displaced, migrants, host communities, returnees and the 17,000 Sudanese and Congolese refugees living in CAR.

Geographic boundaries: The revised SRP 2014 covers needs across the country, with priority given to the following regions:

- **Bangui, the northwest, and northeast:** The focus of activities will be on Bangui and north-western CAR, in light of the recent displacement of 902,000 people due to inter-religious tensions. In view of HNO vulnerability mapping and given that the current conflict emerged from the northeast, particular attention will be afforded to that region.

- **The remainder of the country:** Emphasis on needs in other parts of the Central African Republic will depend on the evolution of the situation and to what extent people return to their homes. If returns are high, activities may focus on longer-term interventions, such as ensuring basic services and promoting resilience.

Sectoral boundaries: The revised SRP 2014 includes eleven sectors/clusters, and will focus on health, protection, water and sanitation, food, and non-food-items, as per the MIRA findings. For areas not covered by the MIRA, the HNO and more recent evaluation serve as a reference. The needs of refugees will fall under the multi-sector assistance to refugees. Camp Coordination and Camp Management (CCCM), logistics, emergency telecommunications, and early recovery clusters will support other clusters’ implementation of activities. Coordination, security and gender is mainstreamed mainstream across clusters.

### Table 3: Humanitarian profile

<p>| 4.6 million | 4.6 million |</p>
<table>
<thead>
<tr>
<th>Total Population</th>
<th>People living in affected areas</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.5 million</td>
<td>Estimated nr. of people in need of immediate assistance (multiple source)</td>
</tr>
<tr>
<td><strong>922,336</strong></td>
<td><strong>1.6 million</strong></td>
</tr>
<tr>
<td>Displaced (homeless) (IDPs + Refugees)</td>
<td>Non-Displaced (affected minus displaced)</td>
</tr>
<tr>
<td><strong>902,000</strong></td>
<td><strong>860,000</strong></td>
</tr>
<tr>
<td>IDPs (CMP 16/01/2014)</td>
<td>Host (multiple source)</td>
</tr>
<tr>
<td><strong>20,336</strong></td>
<td><strong>758,500</strong></td>
</tr>
<tr>
<td>Refugees (UNHCR /CNR 31/12/2013)</td>
<td>Non-Host (multiple source)</td>
</tr>
<tr>
<td><strong>2,000</strong></td>
<td>Deaths (OCHA)</td>
</tr>
</tbody>
</table>
Planning assumptions and associated risks

This Plan is based on a number of assumptions:

- **Continued fragile political situation:** Following the resignation of the President, Michel Djotodia, and his Prime Minister, Nicolas Tiangaye on 10 January, CAR is to be governed by a transitional leadership, to be elected by the National Transitional Council for the period of one year, after which general elections are to be held. Although the deployment of an African Union-led peacekeeping mission (MISCA) with support from French troops (SANGARIS) provides security in Bangui, the country risks descending into a cycle of violence, if political stability is not restored.

- **Continued reliance on international aid due to insufficient economic growth:** Livelihoods are at risk, if people miss the planting season as of April due to violence or the lack of seeds. Over 60% of civilians’ livelihoods are based on agriculture, and civil servants’ salaries will depend on international bilateral aid.

- **Improved security in Bangui and nationwide with the restoration of a political leadership:** With the re-establishment of a political leadership, justice is expected to be reinforced, including police and gendarmerie, and armed groups disarmed. In the absence of a political solution, armed groups may resist the UN’s efforts at disarmament, demobilization and reintegration (DDR), and the proliferation of small arms may inhibit humanitarian access to affected people.

- **Inter-communal and religious tensions will subside due to reconciliation efforts by religious and political leaders:** Reconciliation efforts by religious and political leaders may restore trust across religious communities. Such efforts will be jeopardized if persistent insecurity leads to continued violence among religious communities.

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Table 4: Timeline of critical events

<table>
<thead>
<tr>
<th>2013</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jan</td>
<td>Feb</td>
</tr>
<tr>
<td>![Seleka coup c'élat](Seleka coup c'élat)</td>
<td>![Deployment of MISCA / French forces](Deployment of MISCA / French forces)</td>
</tr>
<tr>
<td>![Land preparation](Land preparation)</td>
<td>![Harvest for cassava*](Harvest for cassava*)</td>
</tr>
</tbody>
</table>
Scenarios and humanitarian impact

**Probable scenario:** The initial months will be impacted by political instability, inter-changing displacements and returns of people. The restoration of public services will take time, and so will the process of disarmament, demobilization and reintegration. For humanitarians, initial emphasis will be placed on the delivery of relief and protection efforts, before focusing on longer-term interventions, such as ensuring sustainable livelihoods through agricultural interventions.

**Optimistic scenario:** Peace and security will promptly be restored; reconciliation of host and returning communities will be sustainable; and public services, such as government, policy and schools reopened. Armed groups will be demobilized promptly. In this case, humanitarians can promptly shift their efforts from life-saving assistance to more durable initiatives, such as the restoration of basic services.

**Pessimistic scenario:** The country will see continued violence due to the failure to disarm armed groups or to reconcile communities, leaving the people in displacement. This would, in turn, prevent them from returning to their homes before the planting season in April, thereby jeopardizing their livelihoods. Humanitarian efforts will then concentrate on the provision of life-saving assistance, such as food assistance, water and hygiene, and health.
Capabilities and Response Gaps

The 100-day Plan has identified a range of response gaps:

**Establish subnational coordination in operational hubs:** The establishment of subnational coordination mechanisms in Paoua, Bouar and Zemio (by March 2014), as well as mobile teams in Kaga Bandoro, Bambari, and Bossangoa) are required to enable a more robust response and comprehensive humanitarian understanding of dynamics and needs. The UN Department of Safety and Security (DSS) has cleared the operational hubs of Zemio, Paoua and Bouar for setting up offices.

**Logistics and pipelines:** Improved logistics capacity in terms of air and land transport, as well as storage, is planned to support the delivery of assistance (by the end of January); three-month stocks will be prepositioned (by February).

**Security management:** Immediate mobilization of UNDSS and agencies’ security capacities is required across the country and security coordination among all partners needs to be reinforced. The installation of telecommunications services is expected to be accelerated in all UN common bases (by March). An NGO security officer was recruited in January.

**Information management needs assessments and analysis:** Information gaps on needs dynamics analysis in the southeast and northeast need to be addressed via detailed needs or coordinated assessments (by June). The Information Working Group and a common information platform will inform respective efforts.

Pooled Funding Mechanism – Common Humanitarian Fund (CHF)

By pooling resources, the Common Humanitarian Fund (CHF) magnifies the impact of individual contributions and enables a timely response to the large-scale crisis in CAR. The CHF is an in-country based fund overseen by the Humanitarian Coordinator (HC), managed by OCHA and closely aligned with clusters’ activities outlined in the Strategic Response Plan. The HC is the ultimate decision-maker on CHF allocations, based on recommendations from the humanitarian community. Projects are prioritized based on needs as identified by clusters, thus avoiding duplication or overlapping and reinforcing complementarity with other funding sources, such as the CERF. The CHF in CAR can act as a funding channel for donors with no presence on the ground. Since its inception in 2008, the CHF in CAR has disbursed US$54 million to international NGOs (74%), UN agencies (19%) and national NGOs (7%). The CHF is designed to adapt to changing priorities, as illustrated by the 2013 end-of-year special allocation that focused on protection and the life-saving interventions of health and nutrition, given the massive increase in displacement in December.

In 2013, the CHF received contributions amounting to US $9.6 million from Ireland, the Netherlands and Sweden. More donor investment is required to improve affected people’s lives.

Gender

Two key gender gaps are to be addressed in the ongoing humanitarian situation to adequately integrate gender dynamics into the overall response: data collection, and analysis. Data collection needs to be disaggregated by sex and age. Understanding is sought how men, women, girls and boys cope with the crisis and access basic services. Women’s, men’s, girls’ and boys’ access to humanitarian assistance is to be analysed.

The MIRA highlighted concerns regarding the needs of women, girls, boys and men. These include the inability of households headed by women, girls and boys to provide a single meal per day to their family. Rape represented 44% of all attacks targeted against women. A range of responses are required, including specialised examination and care services (24-72 hours of rape); referral services; emergency maintenance and care to survivors of...
gender-based violence (GBV). Humanitarian actors’ capacity needs to be increased, also at the inter-cluster level to ensure that gender is taken into account in the planning and response.

**Humanitarian Access**

The most impeding humanitarian access constraints are general insecurity and physical access to remote locations due to weather and logistical challenges.

**Attacks against humanitarian workers and assets:** Seven aid workers were killed from September 2013 to January 2014. Hundreds of humanitarian staff are displaced and cannot report to work due to the security situation in their neighbourhoods, particularly in Bangui. Several humanitarian offices were looted after the coup d’état in March 2013, and vehicles hijacked towards the end of the year. Crossfire between armed groups poses additional security risks. However, humanitarian access is negotiated in spite of the presence and unpredictable emergence of multiple armed groups to ensure the delivery of relief by 76 humanitarian organizations in CAR.

**Physical access:** Around 97% of the road network is not paved and subject to degradation during the rainy season from May to November. The UN Humanitarian Air Service (UNHAS) and the joint ICRC/MSF-France aircrafts are the most efficient way to transport aid workers and their cargo across the country. Currently, UNHAS flies to 27 national air fields.

**Migrant population**

After the events of 5 December 2013, over 60,000 migrants residing in CAR solicited assistance to return to their countries of origin. Of these, 28,200 migrants have been repatriated to 15 African countries. Many of them organized the evacuation of their nationals by air, land and water.

The situation of migrants in transit centers, as well as of stranded migrants across the country is of humanitarian concern, particularly in terms of protection. Facilitating the evacuation of migrants will remain a priority during the initial months of 2014.

**Peacebuilding and Stabilization Context of Humanitarian Operations**

Humanitarian operations take place in an environment focused on building peace in CAR. In particular, UN peacebuilding efforts are led by the UN Integrated Peacebuilding Office in the Central African Republic, BINUCA, and a field office of the Department of Political Affairs. It operates under a mandate to help consolidate peace and facilitate the delivery of humanitarian assistance, foster national reconciliation, strengthen democratic institutions, as well as the protection of human rights.

To stabilize the country upon the complete breakdown of security in December 2013, the UN Security Council Resolution 2127 of 5 December 2013 authorized the establishment of the African Union-led International Support Mission (also known as MISCA), and the reinforcement of the French forces (known as SANGARIS). Their mandate is to ensure the physical protection of civilians, their safety and security, as well as public order in Bangui; restore state authority across the country; and the disarmament, demobilization, and reintegration of armed groups.

Humanitarian actors closely liaise with MISCA and SANGARIS to share information about physical access to people in need, and ensure respect for the humanitarian principles of humanity, neutrality, impartiality and operational independence through civil-military coordination conducted by humanitarian actors.
## OVERALL PURPOSE:

**ALLEVIATE AND PREVENT SUFFERING OF CONFLICT-AFFECTED PEOPLE IN THE CENTRAL AFRICAN REPUBLIC IN 2014**

<table>
<thead>
<tr>
<th>Strategic Objectives</th>
<th>IDPs and host communities, migrants, and returning persons receive multi-sectoral life-saving packages</th>
<th>Conflict-affected people are protected from harm, specifically vulnerable groups (e.g. unaccompanied minors, women, single-headed households, unaccompanied children and the elderly)</th>
<th>Returnees and other affected people access basic services</th>
<th>Affected communities’ resilience is restored</th>
</tr>
</thead>
</table>

### Geographical coverage

- Priority 1: Northwest, Bangui and Northeast
- Priority 2: Remainder of the country*

* Priorities as defined by HCT

### Outcomes

- Affected communities’ livelihoods are restored.
- Affected people are in a safe environment.
- Vulnerable people have access to basic services.
- Communities and individuals withstand shocks

### Timeline

- More investment in the beginning
- More investment towards the end of the year

### Outputs

- Life-saving assistance provided to affected people in terms of food, health, nutrition, water and sanitation, shelter, livelihoods, and non-food items
- Protection initiatives are delivered to people at risk.
- Access to basic social services are improved and made sustainable.
- Durable agriculture interventions, and inter-community dialogue are implemented.

### Cluster

- Food security, Health, WaSH, Shelter, Nutrition, CCCM, Protection, Education, Multi-cluster assistance to refugees
- Protection, Health, Education, Nutrition, CCCM
- Health, Education, WaSH, Shelter, Nutrition, Protection
- Food security / livelihood, Early recovery, Shelter, Protection, Education

### Cross-cluster

- Emergency Telecommunications, Logistics, Early Recovery, Coordination and Security

### Resources

- US$ 551.3 million
### CLUSTER PLANS

#### PEOPLE IN NEED
2.5 million

#### PEOPLE TARGETED
1.8 million

#### REQUIREMENTS (US$)
551 million

<table>
<thead>
<tr>
<th>Cluster</th>
<th>People in Need</th>
<th>People Targeted</th>
<th>Requirements</th>
</tr>
</thead>
<tbody>
<tr>
<td>Food Security</td>
<td>1,600,000</td>
<td>2,400,000</td>
<td>180 million</td>
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<td>Protection</td>
<td>703,975</td>
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<td>74 million</td>
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<td>Early Recovery</td>
<td>1,250,000</td>
<td>1,800,000</td>
<td>60 million</td>
</tr>
<tr>
<td>Health</td>
<td>876,000</td>
<td>3,400,000</td>
<td>56 million</td>
</tr>
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<td>703,975</td>
<td>900,000</td>
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<td>22 million</td>
</tr>
<tr>
<td>Logistics</td>
<td>361,011</td>
<td>361,011</td>
<td>19 million</td>
</tr>
<tr>
<td>Coordination</td>
<td>20,336</td>
<td>20,336</td>
<td>16 million</td>
</tr>
<tr>
<td>Multi-sector Assistance to refugees</td>
<td>20,336</td>
<td>20,336</td>
<td>10 million</td>
</tr>
<tr>
<td>ETC</td>
<td></td>
<td></td>
<td>2 million</td>
</tr>
</tbody>
</table>

| Food Security     | 1,600,000 | 2,400,000 | 180 million |
| Protection        | 703,975   | 900,000   | 74 million  |
| Early Recovery    | 1,250,000 | 1,800,000 | 60 million  |
| Health            | 876,000   | 3,400,000 | 56 million  |
| WASH              | 703,975   | 900,000   | 33 million  |
| Shelter/NFI      | 703,975   | 1,600,000 | 32 million  |
| Nutrition         | 628,000   | 800,000   | 28 million  |
| CCCM              | 501,980   | 501,980   | 22 million  |
| Logistics         | 361,011   | 361,011   | 19 million  |
| Coordination      | 20,336    | 20,336    | 16 million  |
| Multi-sector Assistance to refugees | 20,336 | 20,336 | 10 million |
| ETC               |           |           | 2 million   |
CAMP COORDINATION AND CAMP MANAGEMENT

Lead agency: United Nations High Commissioner for Refugees (UNHCR)
Contact information: Yvan Sturm (sturm@unhcr.org)

PEOPLE IN NEED
501,980

PEOPLE TARGETED
501,980

REQUIREMENTS (US$)
20 million

PRIORITY INTERVENTIONS

1. The humanitarian assistance of affected populations seeking a safe haven in displacement sites and transit centers is well-managed and coordinated, responding to life-saving needs and aiming towards international standards.

2. Representative and functioning communication and leadership structures are in place and supported in displacement and transit sites; all affected, especially vulnerable populations, are involved (in accordance with the accountability to affected populations framework and based on a selection in accordance with AGDM approach).

3. Facilitating returns through effective information dissemination and in close collaboration with other humanitarian actors to ensure that peace and reconciliation, livelihood, shelter and other required social infrastructure measures are in place, in addition to ensuring measures are in place for site closure.

CONTRIBUTION TO THE STRATEGIC PRIORITIES

<table>
<thead>
<tr>
<th>STRATEGIC OBJECTIVE</th>
<th>CLUSTER SPECIFIC OBJECTIVE</th>
</tr>
</thead>
<tbody>
<tr>
<td>STRATEGIC OBJECTIVE 1</td>
<td>The humanitarian assistance of affected populations seeking a safe haven in displacement sites and transit centers is well-managed and coordinated, responding to life-saving needs and aiming towards international standards.</td>
</tr>
<tr>
<td>STRATEGIC OBJECTIVES 1 AND 2</td>
<td>Representative and functioning communication and leadership structures are in place and supported in displacement sites and transit centers; all affected, especially vulnerable populations are involved (in accordance with the accountability to affected populations framework and based on a selection in accordance with the AGDM approach).</td>
</tr>
<tr>
<td>STRATEGIC OBJECTIVES 1,2 AND 3</td>
<td>Facilitating returns through effective information dissemination and in close collaboration with other humanitarian actors to ensure that peace and reconciliation, livelihood, shelter and other required social infrastructure measures are in place, in addition to ensuring measures are in place for site closure.</td>
</tr>
</tbody>
</table>

CLUSTER STRATEGY

- To ensure equitable access to services and protection for displaced persons living in displacement and transit sites, improve their quality of life and dignity during displacement, while supporting the attainment of durable solutions. The CCCM Cluster will focus on harnessing partnerships with (I)NGOs, local government officials and displaced populations to ensure that solid coordination mechanisms are established and that open dialogue, ‘do-no-harm’ principles, and humanitarian principles and standards are promoted and applied.

- Understanding that populations move between displacement sites in function of their needs, a close collaboration between those working inside and outside of the sites is needed if a comprehensive effective protection approach is to be delivered. The CCCM cluster will establish and maintain clear links with the Protection Cluster on population profiling and data collection issues, and coordinate on addressing the dynamics between populations within sites and the surrounding communities and environments.

TARGET CASELOAD

501,980 IDPs in Bangui and the affected areas in the provinces.
COORDINATION

Lead agency: United Nations Office for the Coordination of Humanitarian Affairs (OCHA), United Nations Department of Safety and Security (UNDSS)

Contact information: Barbara Shenstone (shenstone@un.org) - OCHA
Cheick Diouf (cheikh.diouf@undss.org) - UNDSS

PRIORITY INTERVENTIONS

Coordination
1. Strengthen coordination mechanisms at national level (Field Coordination/Inter-cluster coordination, civil-military coordination, advocacy/communication, including access and outreach strategy)
2. Strengthen and expand operational coordination mechanisms at sub-national level
3. Support the HC and the HCT to facilitate common strategies and policies to strengthen humanitarian and early recovery action (including advocacy and communication)

Security
Ensure that safety and security measures and procedures are in place.

REQUIREMENTS (US$)

15.5 million

CONTRIBUTION TO THE STRATEGIC OBJECTIVES

STRATEGIC OBJECTIVES

SPECIFIC OBJECTIVES

Coordination mechanisms are adapted to the operational requirements for the delivery of humanitarian aid.

Data collection and analysis are enhanced for evidence-based advocacy.

Security management is enhanced to facilitate humanitarian response across the country

STRATEGY

Humanitarian Coordination

- Over the year 2014 and in line with the Transformative Agenda, the humanitarian community seeks to strengthen leadership, accountability and coordination mechanisms to facilitate a robust response and avoid a humanitarian catastrophe in CAR. This will include expanding coordination and operational capacity across the country and evidence based response.

Security

- The scale up of operations in an environment that is unpredictable and insecure will require enhanced security management capacity within the humanitarian country team. In particular, it is critical to strengthen the capacity of UNDSS in Bangui and in the interior of the country so as to ensure adequate security management and facilitate the delivery of humanitarian aid. The NGO coordination committee includes a security officer who serves as a security focal point for the NGO community.
EARLY RECOVERY

Lead agency: United Nations Development Programme (UNDP)
Contact information: Jean Claude Cigwerhe (jean-claude.cigwerhe@undp.org)

PEOPLE IN NEED: 3 million
PEOPLE TARGETED: 2.4 million
REQUIREMENTS (US$): 60 million

PRIORITY INTERVENTIONS
1. Rebuild livelihoods to meet the immediate basic needs of affected people
2. Reinforce local capacities to enhance social cohesion
3. Facilitate diversification of livelihoods opportunities and capacity building of affected communities
4. Support the rehabilitation of local social economic infrastructures

CONTRIBUTION TO THE STRATEGIC OBJECTIVES

<table>
<thead>
<tr>
<th>STRATEGIC OBJECTIVE</th>
<th>CLUSTER SPECIFIC OBJECTIVES</th>
</tr>
</thead>
<tbody>
<tr>
<td>STRATEGIC OBJECTIVE 1</td>
<td>Through an integrated approach, assist individuals and communities through the provision of immediate emergency livelihood activities.</td>
</tr>
<tr>
<td>STRATEGIC OBJECTIVE 2</td>
<td>Facilitate social cohesion, conflict resolution and conflict prevention initiatives.</td>
</tr>
<tr>
<td>STRATEGIC OBJECTIVE 3</td>
<td>Provide community stabilisation through peace dividends in support of basic social, economic, local administrative and legal services.</td>
</tr>
<tr>
<td>STRATEGIC OBJECTIVE 4</td>
<td>Strengthen resilience of local economies and markets.</td>
</tr>
</tbody>
</table>

CLUSTER STRATEGY

In the initial response period, the Early Recovery/livelihoods and community stabilisation cluster strategy focuses on meeting the immediate basic needs of affected people through the quick injection of cash. To ensure a robust and effective humanitarian response, the Early Recovery/livelihoods and community stabilisation intends to work in synergies with all the other clusters and with local stakeholders to secure the sustainability of its intervention. Livelihoods and economic recovery are sustainable only if individuals’ respective access is protected by law and enabled by a secure environment.

TARGET CASELOAD

The Early Recovery/livelihoods and community stabilisation cluster aims to assist affected communities, host families, IDPs, returnees and vulnerable groups.
EDUCATION

Contact information: Yoshiko Shimokawa (yshimokawa@unicef.org)

PEOPLE IN NEED 800,000
PEOPLE TARGETED 685,000
REQUIREMENTS (US$) 33 million

PRIORITY INTERVENTIONS
1. Provision of life-saving relief and protective activities in temporary learning spaces in IDP sites (ETAPEs – Espaces Temporaires d’Apprentissage et de Protection de l’Enfant);
2. Distribution of emergency recreational, teaching and learning materials;
3. Identification, training and support to teachers and facilitators;
4. Development of relevant education and life skills content.

CONTRIBUTION TO THE STRATEGIC OBJECTIVES

STRATEGIC OBJECTIVE | CLUSTER SPECIFIC OBJECTIVES
--- | ---
STRATEGIC OBJECTIVE 1 | Contribute to the survival of IDPs, host communities, returning persons and refugees through training of children, youth and adults in good practices on safety, hygiene and basic principles of health.
STRATEGIC OBJECTIVE 2 | Contribute to the protection of children and youth affected by the conflict through psychosocial support, prevention of SGBV, training on human rights, and education activities in schools and temporary learning spaces.
STRATEGIC OBJECTIVE 3 | Support access to education activities for children in return and affected communities
STRATEGIC OBJECTIVE 4 | Support the restoration of the education system in a way that promotes reconciliation and peacebuilding

CLUSTER STRATEGY

- After the 5 December crisis, more than 362,000 displaced children; aged 3-18 have been without access to education and the protection that safe learning environments can offer in emergencies. The Education Cluster is working to establish ETAPEs in large concentration IDP sites in Bangui. ETAPEs provide age-sensitive educational activities for children and adolescents, aged 3-18, including pre-school and primary education, recreational activities, WASH, Nutrition and Child Protection services, such as the identification of separated child and psychosocial support activities.

- In addition, the majority of schools in the country remain closed or with extremely reduced attendance rates. Damaged schools need to be rehabilitated and provided with school furniture and teaching and learning materials. Government and community teachers will also be supported to return to their teaching posts, and trained on psychosocial support. The Education Cluster will develop and coordinate the implementation of a relevant education program in schools that are able to reopen in collaboration with the Ministry of Education. A national Back to School initiative focused on the restoration of the education system and a massive return of children to school is planned for the fall 2014.

TARGET CASELOAD
182,500 IDPs, 250,000 Returnees

EMERGENCY TELECOMMUNICATIONS
Central African Republic

STRATEGIC RESPONSE PLAN - Revised

Lead agency: World Food Programme (WFP)
Contact information: Ivan Thomas (ivan.thomas@wfp.org)

HUMANITARIAN ORGANISATIONS NEEDING ICT SUPPORT 35
HUMANITARIAN ORGANISATIONS NEEDING ICT TARGETED 35
REQUIREMENTS (US$) 1.9 million

PRIORITY INTERVENTIONS
1. Bangui
2. Bambari, Kaga Bandoro, Bossangoa,
3. Zemio, Ndele, Paoua, Bouar

CONTRIBUTION TO THE STRATEGIC OBJECTIVES
The Emergency Telecommunications Cluster (ETC) is supporting all strategic objectives in enabling operating environment for the humanitarian actors to respond to the crisis in Central African Republic (CAR) by implementing data connectivity, basic security telecommunications in seven common operational areas and enhancing security telecommunications in Bangui.

STRATEGIC OBJECTIVE
1, 2, 3 AND 4

CLUSTER SPECIFIC OBJECTIVES
The Emergency Telecommunications Cluster (ETC) is supporting all strategic objectives to enable operating environments, so humanitarian actors can respond to the crisis in the Central African Republic (CAR) by implementing data connectivity, basic security telecommunications in seven common operational areas, and enhancing security telecommunications in Bangui.

CLUSTER STRATEGY
- The main objective of the ETC is to provide common security communications and data connectivity services to the humanitarian community operating in CAR.
- The events in December 2013 increased the needs of the humanitarian organizations in Bangui. In addition, the security situation has hampered ETC’s ability to deploy common ICT services in the field locations where 24/7 operational COMCENS is required. Recent evaluations have shown the demand to re-establish security telecommunications and provide data connectivity access in these locations in order to allow humanitarian staff to go back and return to those sub-offices.
- The ETC is strengthening security communications systems for UN agencies and NGOs operating in Bangui and plans to deploy common ICT services including C-MOSS compliant COMCENS, security permitting, in the seven common operational areas identified by the Humanitarian Country Team (HCT): Bambari, Zemio, Ndele, Kaga-Bandoro, Paoua, Bossangoa and Bouar.
FOOD SECURITY

Lead agency: World Food Programme (WFP), Food and Agriculture Organisation (FAO)
Contact information: Eric Michel-Sellier (Eric.MichelSellier@fao.org)

<table>
<thead>
<tr>
<th>PEOPLE IN NEED</th>
<th>PEOPLE TARGETED</th>
<th>REQUIREMENTS (US$)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.6 million</td>
<td>1.25 million</td>
<td>180 million</td>
</tr>
</tbody>
</table>

PRIORITY INTERVENTIONS
1. Immediate life-saving food assistance and distribution of seeds and agricultural tools.

CONTRIBUTION TO THE STRATEGIC OBJECTIVES

<table>
<thead>
<tr>
<th>STRATEGIC OBJECTIVE</th>
<th>CLUSTER SPECIFIC OBJECTIVE</th>
</tr>
</thead>
<tbody>
<tr>
<td>STRATEGIC OBJECTIVE 1</td>
<td>Provide life-saving assistance to IDPs and other severely food insecure people by ensuring access to food</td>
</tr>
<tr>
<td>STRATEGIC OBJECTIVE 3</td>
<td>Enhance social safety nets and ensure access to productive assets for returnees and other food insecure people affected by the conflict</td>
</tr>
<tr>
<td>STRATEGIC OBJECTIVE 4 AND 2</td>
<td>Assist affected communities in rebuilding their livelihoods and reinforce their resilience to further shocks, by strengthening their social and economic infrastructure and their agro-ecological capital. Support activities fostering social cohesion and local governance with the ultimate aim of contributing to building peace.</td>
</tr>
</tbody>
</table>

CLUSTER STRATEGY

- Food cluster members will provide immediate life-saving assistance targeting the most vulnerable populations suffering from the consequences of armed conflict. Food assistance to severely food insecure populations (including refugees and IDPs) will be provided as long as required, with a particular emphasis during the lean season.
- ‘Save the 2014 agricultural campaign’ to start in April: Recognizing that agriculture is the main source of food and income, cluster members will work to improve access to essential agricultural inputs (seeds and tools) to maintain production and access, protect market and food access.
- Linking relief rehabilitation and development: Cluster members will work to quickly increase purchasing power in rural and sub-urban areas through cash transfers and cash for work activities and at the same time rebuild destroyed infrastructures (storage capacities, transformation equipment, etc.). Cash transfers will boost/revitalize community saving and loans schemes to increase resilience with a particular attention on women groups.
- The cluster will promote approaches to foster social cohesion with the ultimate aim to contribute to peace building (inter-confessional initiatives).
- All cluster activities will be carried out in support of the multi-sectorial approach to prevent children malnutrition (health, food security and nutrition sectors).
- The FSC will coordinate partners (in collaboration with authorities where applicable) regarding the identification of needs and response efforts to avoid duplication and identify gaps. A cluster monitoring system will provide a common operating picture of the food insecurity situation and the response. A participatory analysis and monitoring of the situation through IPC (integrated food security phase classification) will determine priority areas.
HEALTH

Lead agency: World Health Organisation (WHO)
Contact information: Dr. Tarande C. Manzila (manzilat@who.int)

PEOPLE IN NEED
3.4 million

PEOPLE TARGETED
878,000

REQUIREMENTS (US$)
56.4 million

PRIORITY INTERVENTIONS
1. Scaling up the provision of basic health services interventions through free health care delivery in priority areas for affected populations with supplies of essential medicines, laboratory capacity, including safe blood supply.
2. Prevent outbreaks and communicable diseases through an efficient early-warning system and response.
3. Ensure efficient and coordinated health response through health situation and gap analysis for strategies development and expand capacity of local health partners.
4. Support early recovery of health system through rehabilitation of destroyed or damaged health facilities/infrastructures and support minimum activities package for primary and secondary health care.

CONTRIBUTION TO THE STRATEGIC OBJECTIVES

<table>
<thead>
<tr>
<th>STRATEGIC OBJECTIVE</th>
<th>CLUSTER SPECIFIC OBJECTIVES</th>
</tr>
</thead>
<tbody>
<tr>
<td>STRATEGIC OBJECTIVE 1 AND 2</td>
<td>Provision of emergency health services (preventive and curative), including support for chronic diseases, reproductive health, trauma care, infant newborns, child health and nutrition services to affected community</td>
</tr>
<tr>
<td>STRATEGIC OBJECTIVE 3 AND 4</td>
<td>Increase the capacity of functioning of primary and secondary health facilities affected by conflicts through rehabilitation and setting up of the package of minimum of activities</td>
</tr>
</tbody>
</table>

CLUSTER STRATEGY

- In light of the health services coverage and gaps analysis recently conducted and based on the MIRA results, the health cluster strategy will focus on the rapid need to increase accessibility to basic, primary and secondary health services to the affected populations, prevention and diseases control as well as a coordinated response. Giving that an estimated 3.5 million people are in immediate need of health care and recognizing the lack of income in the affected population, the health cluster will pursue universal provision of free health care services in 42 health centres and 7 hospitals, in most affected areas. In addition, rehabilitation of destroyed/damaged health facilities will be essential if provision of sustainable health care is to be considered.

- Therefore, the health cluster strategy will include restoring health facilities, providing immediate life-saving services, medical supplies and preventive interventions as well as Minimum Initial Service Package (MISP) and Emergency Obstetrical and Neonatal Care (EMONC). Collaboration with other clusters such as Nutrition, WASH and Protection will be sought for sustainability and synergy of interventions.
**LOGISTICS**

**Lead agency: World Food Programme (WFP)**
Contact information: Jean-Emile Canu (jeanemile.canu@wfp.org)

**PRIORITY INTERVENTIONS**

<table>
<thead>
<tr>
<th>REQUIREMENTS (US$)</th>
</tr>
</thead>
<tbody>
<tr>
<td>10 million</td>
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</table>

1. The Logistics Cluster seeks to enhance the humanitarian response by providing support through logistics information management and coordination, as well as provision of transport services and temporary warehousing solutions.

**CONTRIBUTION TO THE STRATEGIC OBJECTIVES**

<table>
<thead>
<tr>
<th>STRATEGIC OBJECTIVE</th>
<th>CLUSTER SPECIFIC OBJECTIVES</th>
</tr>
</thead>
<tbody>
<tr>
<td>STRATEGIC OBJECTIVE 1, 2, 3 AND 4</td>
<td>The Logistics Cluster will implement activities to ensure the humanitarian community has the ability to save lives through timely and reliable logistics service support and information.</td>
</tr>
</tbody>
</table>

**CLUSTER STRATEGY**

The Logistics Cluster aims to support the Humanitarian Community in its ability to circulate its field staff and its supplies. In term of transportation, the main constraint into CAR is the extremely poor road infrastructure. The quality of the private truck fleet servicing the regions is also at stake. As a result, delays, unpredictable expenses, high exposure to road accidents are common patterns. Interventions for maintaining or repairing such infrastructures require not only funds, materials and skilled staff but primarily a safe environment to achieve appropriate results. At this stage, such conditions are not met and will likely be not in the next few months. Some regions (particularly North-East) are prone to heavy rains and floods during the rainy season. A significant number of bridges and barges are out of service and the extent of their damages needs proper and detailed assessment for repair. Fuel is deemed not available in all regions and requires pre-positioned stocks and resupplying by road.

Therefore, cargo or personnel transportation in emergency situation is possible only by air. UNHAS is the only reliable airline in CAR, operating 2 aircrafts LET with capacity 15 seats, and an additional aircraft DASH8 with augmented cargo capacity up to 1,5MT is operational since 29-12 (Bangui-Douala-Bangui and Bangui-CAR regions). UNHAS can land in more than 20 airfields.

In addition to UNHAS fleet of 3 aircrafts, MSF-F and ICRC are jointly operating a LET aircraft (identical to UNHAS) for their own activities.

In Bangui city storage facilities are not sufficient in term of surface/volume available and safety, meant as structures available or accessible for humanitarian purposes. The existing facilities are mainly being used for commercial activities still running despite the current situation. The possibility of erecting mobile storage units (MSU) is yet to be confirmed.
MULTI-SECTOR ASSISTANCE TO REFUGEES

Cluster lead Agency: United Nations High Commissioner for Refugees (UNHCR)
Contact information: Lazare Kouassi ETIEN (etien@unhcr.org)

PEOPLE IN NEED: 20,336
PEOPLE TARGETED: 20,336
REQUIREMENTS ($ US): 19.3 million

PRIORITY INTERVENTIONS
1. Provision of protection and multi-sector assistance to refugees, asylum seekers and stranded migrants in rural and urban areas.

CONTRIBUTION TO THE STRATEGIC OBJECTIVES

<table>
<thead>
<tr>
<th>STRATEGIC OBJECTIVE</th>
<th>SPECIFIC CLUSTER OBJECTIVE</th>
</tr>
</thead>
<tbody>
<tr>
<td>STRATEGIC OBJECTIVE 1</td>
<td>Provide protection and multi-sector assistance to refugees, asylum seekers and stranded migrants</td>
</tr>
<tr>
<td></td>
<td>Promote durable solutions for refugees living in refugee camps and in urban areas</td>
</tr>
</tbody>
</table>

CLUSTER STRATEGY

Partners in cooperation with their national counterparts will continue to provide protection and multi-sector assistance to refugees and asylum seekers. In rural areas, emphasis will be given to durable solutions in order to strengthen refugees’ self-reliance. Partners will continue to address basic needs of the most vulnerable. Repatriation will be organized for refugees willing to return home. For those not choosing repatriation, prospects for local integration through the strengthening of refugees’ self-reliance will be assessed. In urban areas, the focus will be put on providing individual documentation as well as birth certificates for children. In Bangui, partners will promote access of refugees and asylum seekers to a fair and transparent refugee status determination procedure, and will continue to focus on building the protection capacities of its two governmental counterparts, namely the Sub-Commission for Eligibility, and the Appeals Commission. With regard to migrants who have been affected by the current crisis in CAR, UNHCR is working closely with IOM and embassies to identify them and organize their voluntary return to their countries of origin.
NUTRITION

Contact information: Angeline Grant (agrant@unicef.org)

PEOPLE IN NEED: 628,522
PEOPLE TARGETED: 361,011
REQUIREMENTS (US$): 22 million

PRIORITY INTERVENTIONS

1. Scale-up life-saving treatment of acute malnutrition for at least 60% of vulnerable populations (girls and boys under five years, pregnant and lactating women) at both health centre and IDP camp level
2. Prevent the deterioration in nutritional status of at least 80% of vulnerable populations (girls and boys under five years, pregnant and lactating women in IDP camps and host communities) through blanket feeding, promotion and support to appropriate infant and young child feeding in emergencies, integration of WASH activities into nutrition programming and micronutrient supplementation
3. Make available complete and timely sex and age disaggregated nutrition data with improved monthly data collection and management, supplemented by nutrition surveys and rapid assessments
4. Ensure a predictable, timely, coordinated and effective nutrition response through optimal cluster coordination, including contingency planning, adequate pipeline of nutrition supplies, sustainable funding, situation and gap analysis and strategy development

CLUSTER STRATEGY

Rapid action is needed to scale-up life-saving malnutrition treatment services, whilst putting in place activities that will prevent a severe deterioration in the nutrition status of vulnerable populations. The nutrition cluster estimates that 28,000 children will be affected by severe acute malnutrition (SAM) in 2014 and this number could rise substantially given the deteriorating humanitarian situation.

The nutrition cluster will focus its immediate efforts on key priority prefectures of Bangui, Ouham, Ombella M’Poko, Ouham Pende, Ouaka and Basse-Kotto and expand into other prefectures to ensure that vulnerable persons and returning populations have access to minimum basic services.

Nutrition cluster partners will also seek enhanced programming with health cluster partners (integration of OTP component into mobile health clinics) and protection cluster partners (integration of IYCF-E activities into CFS, along with enhanced psychosocial and GBV support during IYCF-E activities). In addition, the nutrition cluster is also currently exploring possibilities of inter-sector integration with food security cluster partners through the inclusion of IYCF-E activities into female agricultural production groups and community garden support to ITPs.

The nutrition cluster will advocate for increased integration of accountability mechanisms to affected populations into its nutrition programming. The nutrition cluster plans to develop adapted and harmonised guidance and tools on this theme to monitor and analyse the integration of accountability to affected populations and its impact on programme decision-making.

CONTRIBUTION TO THE STRATEGIC OBJECTIVES

<table>
<thead>
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<th>CLUSTER SPECIFIC OBJECTIVES</th>
</tr>
</thead>
<tbody>
<tr>
<td>STRATEGIC OBJECTIVE 1 AND STRATEGIC OBJECTIVE 3</td>
<td>Ensure access to quality life-saving treatment of acute malnutrition for at least 60% of vulnerable populations (girls and boys under five years, pregnant and lactating women) at both health centre and IDP camp level</td>
</tr>
<tr>
<td></td>
<td>Prevent the deterioration in nutritional status of at least 80% of vulnerable populations (girls and boys and pregnant and lactating women in IDP camps and host communities) through blanket feeding, promotion and support to appropriate infant and young child feeding in emergencies, integration of WASH activities into nutrition programming and micronutrient supplementation</td>
</tr>
</tbody>
</table>
### PEOPLE IN NEED AND TARGETED

<table>
<thead>
<tr>
<th>Category</th>
<th>In need</th>
<th>Targeted</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children &lt; 5 years suffering from severe acute malnutrition (IDPs, returnees and vulnerable populations)</td>
<td>28,000</td>
<td>16,800</td>
</tr>
<tr>
<td>Children &lt; 5 years suffering from moderate acute malnutrition (IDPs, returnees and vulnerable populations)</td>
<td>75,590</td>
<td>50,000</td>
</tr>
<tr>
<td>Malnourished pregnant and lactating women (IDPs, returnees and vulnerable populations)</td>
<td>23,149</td>
<td>15,000</td>
</tr>
<tr>
<td>Children &lt; 5 years at risk of acute malnutrition in priority prefectures (IDPs, returnees and vulnerable populations)</td>
<td>432,019</td>
<td>259,211</td>
</tr>
<tr>
<td>Caretakers of severely malnourished in in-patient nutrition stabilisation centres (IDPs, returnees and vulnerable populations)</td>
<td>5,000</td>
<td>5,000</td>
</tr>
<tr>
<td>Acutely malnourished PLHIV (IDPs, returnees and vulnerable populations)</td>
<td>64,764</td>
<td>15,000</td>
</tr>
</tbody>
</table>

supplementation

Make available complete and timely sex and age disaggregated nutrition data with improved monthly data collection and management, supplemented by nutrition surveys and rapid assessments.

Ensure a predictable, timely, coordinated and effective nutrition response through optimal cluster coordination, including contingency planning, adequate pipeline of nutrition supplies, sustainable funding, situation and gap analysis and strategy development.
PROTECTION

Lead agency: United Nations High Commissioner for Refugees (UNHCR)
Contact information: Philippe Leclerc (leclerc@unhcr.org)

PEOPLE IN NEED: 2.6 million
PEOPLE TARGETED: 2 million
REQUIREMENTS (US$): 74 million

PRIORITY INTERVENTIONS

1. Life-saving protection response in particular:
2. Reinforce the comprehensive Protection Analysis Framework allowing for evidence-based decision making and strategic planning and informing humanitarian response at large
3. Enhance community protection mechanisms and strengthen resilience especially of women and children to prevent and respond to protection risks and human rights violations and assist those opting for voluntary return in safety and dignity

PRIORITY INTERVENTIONS

Protection considerations must drive the humanitarian response in CAR and inform the work of all of the clusters. Beyond that, the Protection Cluster’s priority activities seek to prevent or reduce human rights violations, conflict and armed violence and to respond to the needs of the affected population, notably IDPs, host communities, and returnees. Special emphasis is put on preventing and responding to sectarian and gender-based violence and to protect children, the elderly, minorities and persons with disabilities. Given the violence that has broken out in Bangui and other parts of the country, and the expectation that the insecurity is likely to continue outside of Bangui while slowly improving within the capital city, the Protection Cluster has prioritized the following activities:

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</thead>
<tbody>
<tr>
<td>STRATEGIC OBJECTIVE 1</td>
<td>Ensure life-saving protection response</td>
</tr>
<tr>
<td>STRATEGIC OBJECTIVE 2</td>
<td>Prevent and respond to protection risk linked to insecurity, violence and displacement in areas of origin and displacement and mainstream protection principles into humanitarian response</td>
</tr>
<tr>
<td>STRATEGIC OBJECTIVE 3</td>
<td>Strengthen response to victims of violence and human rights violations and improve their access to services</td>
</tr>
<tr>
<td>STRATEGIC OBJECTIVE 4</td>
<td>Enhance resilience of communities in particular women, children and isolated elderly to cope with and respond to protection risks and violations</td>
</tr>
</tbody>
</table>

CLUSTER STRATEGY

In light of the situation, protection considerations must be central to all strategic decisions and drive the humanitarian response in CAR as well as inform the work of all clusters. The Protection Cluster will anchor its response around the following main themes: (i) preventing and responding to human rights violations, sectarian violence and protection incidents, (ii) strengthening the comprehensive Protection Analysis Framework allowing for evidence based decision making and strategic planning, (iii) engage with civil and military actors, BINUCA/Human Rights, MISCA and Sangaris to address immediate protection concerns, (iv) ensuring that through targeted advocacy, human rights violations of all concerned parties are made public and (v) promoting and strengthening community-based protection and accompanying communities who are opting for return.

TARGET CASELOAD

The Protection Cluster will focus its interventions on those affected by conflict and displacement, including, but not limited to IDPs, IDP returnees and families hosting IDPs, with particular emphasis on children, the elderly, disabled, minority groups and women at risk.
SHELTER AND NON-FOOD ITEMS

Lead agency: United Nations High Commissioner for Refugees (UNHCR)
Contact information: Yvan Sturm (sturm@unhcr.org)

PEOPLE IN NEED: 703,975
PEOPLE TARGETED: 703,975
REQUIREMENTS (US$): 31.7 million

PRIORITY INTERVENTIONS

1. Emergency shelter support and NFIs are provided within three months and before the rainy seasons to meet the needs of displaced persons living both in urban and rural areas in various locations including spontaneous and organised sites. Collective shelters are constructed in various transit locations. Collective shelters including public buildings such as non-functional schools, churches, hospitals are repaired and rehabilitated. Stocks of shelter materials as well as domestic household items are available in adequate quantities for distribution in case of extreme weather conditions or contingency measure.
2. Shelter repair kits are distributed to families returning to their area of origin.
3. Basic domestic household items are provided in a timely manner to meet the needs of displaced families living with host families.

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<table>
<thead>
<tr>
<th>STRATEGIC OBJECTIVE</th>
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</tr>
</thead>
<tbody>
<tr>
<td>STRATEGIC OBJECTIVE 1, 2, 3 AND 4</td>
<td>Emergency shelter support and NFIs are provided within three months and before the rainy seasons to meet the needs of displaced persons living both in urban and rural areas in spontaneous and organised sites. Collective shelters are constructed in various transit locations. Public buildings such as non-functional schools, churches, hospitals vacated by IDPs returning to their place of origin are repaired and rehabilitated. Stocks of shelter materials as well as domestic household items are available in adequate quantities for distribution in case of extreme weather conditions or contingency measure.</td>
</tr>
<tr>
<td></td>
<td>Shelter repair kits are distributed to families returning to their area of origin.</td>
</tr>
<tr>
<td>STRATEGIC OBJECTIVE 1</td>
<td>Basic domestic household items are provided in a timely manner to meet the needs of displaced families living with host families.</td>
</tr>
</tbody>
</table>

CLUSTER STRATEGY

- Ensure adequate habitable covered living environment and access to non-food items that provide secure and healthy living conditions ensuring protection and dignity to individuals/families affected by the displacement.
- Aligning with guidance principles, policies and minimum international standards, the Shelter Cluster aims to support the affected IDP, host communities and returning population to meet their protection needs, ensure access to privacy and adequate space to live, as well as restore their habitat taking into account the connection to disaster risk reduction measures, contingency planning and early recovery strategies.
WATER, SANITATION AND HYGIENE

Contact Information: Patrick Laurent (plaurent@unicef.org)

PEOPLE IN NEED 2.6 million  PEOPLE TARGETED 900,000  REQUIREMENTS (US$) 27.5 million

PRIORITY INTERVENTIONS
1. Ensure the optimal functionality and chlorination of the SODECA water systems in locations of displacement
2. Rehabilitation of existing shallow wells/boreholes (including spare parts and fuel where needed)
3. Construction of emergency latrines/defecation trenches systematically coupled with hygiene promotion activities
4. Reinforcement of Acute Watery Diarrhea/Cholera preparedness and response capacity

CONTRIBUTION TO THE STRATEGIC OBJECTIVES

<table>
<thead>
<tr>
<th>STRATEGIC OBJECTIVE</th>
<th>CLUSTER SPECIFIC OBJECTIVE</th>
</tr>
</thead>
<tbody>
<tr>
<td>STRATEGIC OBJECTIVE 1</td>
<td>Provide access to safe water, sanitation and hygiene for people in emergency need</td>
</tr>
<tr>
<td></td>
<td>Emergency preparedness and early response to humanitarian emergencies</td>
</tr>
<tr>
<td>STRATEGIC OBJECTIVE 3 &amp; 4</td>
<td>Provide reliable and sustained access to sufficient safe water through the establishment of sustainable management structures for the most heavily used water sources, and the development of sustained household water treatment strategies</td>
</tr>
<tr>
<td></td>
<td>Provide reliable and sustainable access to environmental sanitation - all sanitation programs must be coupled with sustained hygiene promotion for the target population</td>
</tr>
</tbody>
</table>

CLUSTER STRATEGY
- Wash Cluster strategy is to ensure in a first phase the provision of a comprehensive WASH package (Water, Sanitation, Hygiene Promotion, Hygiene NFIs, Solid Waste) in the most densely populated displacement sites. In a second phase, objective is to expand the response to less densely populated displacement sites, and to reinforce AWD/Cholera preparedness and response capacity. A full-fledged Strategic Operational Framework will be developed based on the 2014 SRP.

TARGET CASELOAD
- 714,750 IDPs and/or Returnees
- 185,250 Vulnerable Population