

Emergency Response for the Central African Republic Situation

Revised Supplementary Appeal



Donor Relations and Resource Mobilization Service August 2014





	Information at a glance
Targeted beneficiaries January – December 2014	 ⇒ Up to 600,000¹ internally displaced people (IDPs) in the Central African Republic (CAR) ⇒ Up to 306,500 people of concern - mainly refugees - in Cameroon, Chad, the Congo and the Democratic Republic of the Congo (DRC), including a small number of Third Country Nationals in Cameroon, Chad and the Congo.
Total requirements January – December 2014	 ⇒ USD 254.8 million² ○ USD 76.4 million for the Central African Republic ○ USD 72.1 million for Cameroon ○ USD 38.1 million Chad ○ USD 8.4 million for the Congo ○ USD 58.0 million for the Democratic Republic of the Congo ○ USD 1.8 million for the Regional Office in Dakar and Headquarters
Main activities	 ⇒ Leadership and coordination of the protection cluster, coleadership of the camp coordination and camp management (CCCM) cluster, and provision of technical, material and operational support to the shelter/NFI cluster in the CAR ⇒ Protection intervention and monitoring in IDP and refugee areas with a particular emphasis on child protection, prevention of and response to sexual and gender-based violence (SGBV) against women, men, boys and girls, and community-based protection mechanisms for the most vulnerable ⇒ Site management, coordination and monitoring in displacement sites in the CAR and the four asylum countries. ⇒ Provision of shelter and basic non-food items (NFIs) to IDPs and refugees in the CAR ⇒ Leadership and coordination of the refugee response in surrounding countries of asylum for refugees arriving from the CAR ⇒ Provision of access to education as an essential protection strategy ⇒ Relocation of refugees from the border to reception centres and onward to refugee camps/settlements in Cameroon, Chad, Congo and the DRC, as access permits ⇒ Establishment of new transit/reception facilities and refugee camps and sites in Cameroon, Congo, Chad and DRC ⇒ Registration and documentation of refugees in all countries of asylum ⇒ Provision of basic emergency services such as protection, shelter, nutrition and emergency food, water and sanitation, health and education to all new refugees.

¹ It should be noted that while the protection needs of the overall population of IDPs in the CAR are being targeted by the protection and CCCM clusters, the supplementary budget requirements for the CAR presented in this revised appeal are based on planning for increased non-food items (NFI) and emergency shelter support for some 512,500 IDPs.

² Includes 7% support costs

CONTEXT

In response to the emergency situation in the Central African Republic (CAR), UNHCR published in January a three-month emergency appeal - covering the requirements from January to March 2014 - to support the protection and assistance of IDPs in the CAR and of refugees in the neighbouring countries. Subsequently, a regional inter-agency Refugee Response Plan (RRP) for the CAR was released on 16 April, to cater for the needs of the CAR refugees in the four asylum countries – Chad, Cameroon, the Congo and the Democratic Republic of the Congo (DRC), and covering the period from January to December 2014. The RRP was revised and re-issued on 22 July, to take into account recent developments, programme adjustments, and evolving assumptions. This revised UNHCR Supplementary Appeal reflects these adjustments.

Funding requirements in the initial RRP stood at USD 274 million. However, the revised Plan puts the required needs at USD 210 million for a targeted beneficiary population of 306,500 by December 2014. The reduction in the financial requirements is mainly due to a decrease in the projected number of refugee arrivals in the DRC, and the fact that it no longer includes USD 85 million required to assist some 100,000 returnees in Chad, who were included in the initial RRP but are now covered under the Chad Strategic Response Plan.

However, the humanitarian situation in CAR is worsening and the refugee outflows to neighbouring countries (mainly Chad and Cameroon) are growing; therefore the Revised Plan includes enhanced measures to assist newly arrived refugees. Resources are required for the reception, registration and relocation of new arrivals from the border to refugee sites and for the delivery of emergency services in life-saving sectors such as food, health, shelter, site planning, and water and sanitation. Additionally, assistance is needed for refugees living outside formal sites as well as for the communities hosting them.

More than 403,000 CAR refugees are present in Cameroon, Chad, the Congo and the DRC. Of these, some 160,000 had arrived since the beginning of the crisis in December 2013, having fled clashes between the Seleka alliance and the anti-Balaka militia, as well as inter-communal violence. The recently arrived refugees carry with them the physical, mental and emotional scars of the brutal violence they have escaped in the CAR. Many have walked for weeks through the forests, with little to eat or drink, and are severely malnourished. UNHCR has seen particularly serious malnutrition rates in Cameroon amongst the more than 130,000 arrivals in the last six months. Over 60 per cent of the refugees are women and children, with a high number of unaccompanied children. More refugee sites need to be established to ensure the safety of refugees; serious gaps in assistance remain in shelter, water, sanitation and hygiene. Efforts must be redoubled to relocate people away from insecure and remote locations that are often hard to reach.

Inside CAR, the number of IDPs has gone down, partly because of some limited returns of IDPs to their areas of origin, but for the most part, due to the mass exodus of populations into neighbouring countries, in particular to Cameroon. The protection environment in CAR is still fragile, with Muslim communities remaining the target of attacks and expulsion from their areas of habitual residence. Several groups of displaced people at risk who found refuge in churches and mosques, then found themselves in enclave-like situations, surrounded by armed rival militias. Protection monitoring and advocacy continue to be carried out by the Humanitarian Country Team (HCT), under the leadership of the Humanitarian Coordinator. In CAR, UNHCR is lead agency for the protection, camp coordination and camp management, and Shelter/NFI clusters.

This revised UNHCR Supplementary Appeal describes UNHCR's planned response to the current emergency for the period from January to December 2014, as presented in the revised Regional Response Plan. In addition, it includes UNHCR's budgetary requirements for activities targeting IDPs inside the CAR.

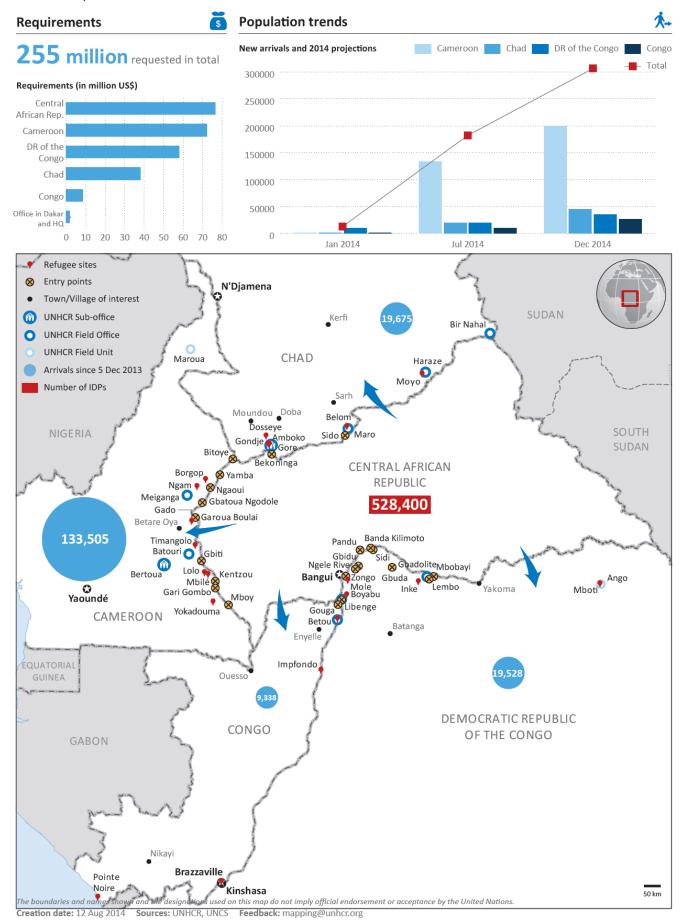
Population data as of 31 July

The following table provides statistics on the estimated numbers of IDPs inside the CAR, as well as on the number of refugees and third country nationals (TCNs) who have fled to neighbouring countries since 5 December 2013.

CAR	
■ IDPs (source OCHA)	528,400
 Refugees 	7,932
CAR refugees and TCNs	
 Cameroon 	133,505
Chad	19,675
• DRC	19,528
Congo	9,338
Total CAR refugees and TCNs displaced since 5 December 2013	182,046

REGIONAL RESPONSE DASHBOARD

as of 31 July 2014



Central African Republic

The current humanitarian displacement situation arose as a result of almost two years of political disputes which developed into instability and waves of violence against both Christian and Muslim communities involving two opposing groups: the Seleka and the Anti-Balaka. Since December 2013, some 20 per cent of the entire population of the CAR have been internally displaced. At the peak of the unrest, there were more than 935,000 IDPs counted in the country. Intercommunal conflict and serious human rights violations have led to multiple waves of internal displacement, which have further divided the country along ethno-religious lines with a number of Muslim communities seeking refuge in precariously protected enclaves.

UNHCR's planning figure (January-December 2014) for IDPs in the CAR is almost 600,000. Currently, there are in CAR some 528,400 IDPs, of which 103,400 are in the capital, Bangui. Displacement figures are expected to continue to fluctuate, possibly rising again until lasting peace is found. In the context of the overall humanitarian response, UNHCR has been providing direct assistance in the form of non-food items (NFIs) and shelter for over half a million people.

The Office is playing a key role in the inter-agency collaborative approach, under the leadership of the Humanitarian Coordinator. UNHCR co-leads: a) the protection cluster, with the Danish Refugee Council; b) the camp coordination and camp management (CCCM) cluster, together with the International Organization for Migration (IOM); and c) the shelter/non-food items (NFI) cluster, with Agency for Technical Development and Cooperation (ACTED).

The Office also continues to support over 10,000 refugees inside the CAR, mainly from the DRC and Sudan. The refugee figure has dropped from initially 16,000 to 10,000 following the voluntary repatriation of more than 6,000 Congolese refugees who returned to the DRC in April/May 2014. Operational continuity plans have been developed in close consultation with partners to ensure that the delivery of protection and life-saving assistance for the remaining refugees is sustained.

Cameroon

In Cameroon, the emergency has been particularly acute. The country was already hosting more than 92,000 CAR refugees before the recent hostilities. By end-July 2014, UNHCR had registered more than 130,000 new arrivals from the CAR in Cameroon. The rate of influx during February-March was about 4,000 per week. Although the rate of arrivals has now reduced, allowing the organization to stabilize the refugee emergency response, the situation is still fluid in the CAR and the health and nutrition status of the refugees remains alarming. It is expected that by December 2014, some 180,000 new refugees (since December 2013), as well as 20,000 TCNs, will have sought refuge in Cameroon.

Close to 60 per cent of the newly arrived refugees are children, of whom 20 per cent are below five years of age. Almost 96 per cent of the refugees are Muslims. To address this emergency, the Government of Cameroon, in collaboration with UNHCR, has made seven refugee sites available. The sites are located in forest areas, making their preparation difficult and requiring the use of heavy machinery. While some 50,000 refugees are now relocated to the sites, there are still over 20,000 present at 30 border entry points, and 46,000 living in host villages. The influx puts additional strain on the local population, who share their meagre resources with refugees. Existing community facilities and services (health, water points, sanitary facilities, community buildings, etc.) are overstretched. There is concern among humanitarian actors that this situation may worsen in the upcoming rainy season, calling for swift action to address this.

UNHCR and its partners, who were already operational in the affected regions, have been providing multisectoral emergency assistance since the onset of the emergency. As foreseen under the UN Transformative Agenda, UNHCR is working closely with other agencies and NGOs to provide additional support to fill the gaps and coordinate the emergency response in Cameroon.

Chad

Since the outbreak of violence in the CAR, Chad has experienced an influx of refugees, Chadian returnees and third-country nationals (TCNs).

Returnees

The returnees represent the majority of the displaced population. As of 30 April, IOM reported the registration of some 97,000 Chadian returnees. Some 90,000 of them were evacuated by the Government of Chad at the end of 2013 and the beginning of 2014. Of the total figure of returnees, some 62,000 individuals do not have family links in Chad, and are staying in transit centres in the south of the country and in N'Djamena. Almost all arrived with few belongings, and no means to continue their journey to their communities of origin.

Third country nationals (TCNs)

The influx from the CAR also includes TCNs. Since late December 2013, IOM has registered some 900 TCNs from various countries including from Cameroon, Mali, Niger, Senegal, Sudan and Togo. Transport assistance has been provided for 400 TCNs to their countries of origin, and 500 remain in transit sites. Many TCNs are waiting to be evacuated or to receive onward transport assistance to their home countries.

Refugees

To date, an estimated 17,600 CAR refugees have arrived in Chad since January 2014, which brings the total number of CAR refugees in Chad to an estimated 93,600. The majority of newly arriving refugees are women and children. It is expected that by the end of the year, Chad will have received a total of 45,000 new refugees from the CAR.

Congo

The influx of refugees from the CAR began in March 2013. Immigration officials are conducting a registration at the border, and the refugees have been recognized on a prima facie basis since July 2013.

About 10,000 CAR refugees were registered with UNHCR in 2013, and an additional 7,800 have been registered since December 2013. It is estimated that in total some 25,000 refugees, as well as some 1,500 TCNs will have arrived in the Congo by the end of the year. Most of the refugees are young people at risk of being recruited or killed in the CAR. Currently, 77 per cent of the refugee population is located in Bétou, while Brazzaville and Impfondo host smaller groups of refugees. By year-end, about 60 per cent will be living with host communities while the other 40 per cent will settle in two sites in Bétou district. Bétou is a remote locality in Likouala district, where camps were set up in 2009 to accommodate refugees from the DRC who have been repatriating.

It is estimated that some 1,500 TCNs, the majority Chadian, have fled the violence in CAR. They are stranded in the north of the country in difficult conditions. Many have been in border towns for up to two months, having to rely on the support of the host community. Considering that TCNs, in many cases, cannot access basic assistance provided to refugees, a comprehensive response addressing transport, shelter, water and sanitation, non-food item provision, food, health and psychosocial needs must be developed, targeting this group.

Democratic Republic of the Congo

To date, some 19,500 refugees have arrived in the DRC since December 2013. The country may, by the end of the year 2014, receive a total of 35,000 new CAR refugees.

In total, there are more than 57,000 CAR refugees in the DRC with a continuous arrival of several hundred per week. Some 54 per cent of the refugees have settled in four established camps (Boyabu, Mole, Inke in Equateur Province and Mboti in Oriental Province) while the remaining 46 per cent remain within the host communities.

CAR refugees have been accessing the DRC provinces of Equateur and Orientale through 26 entry points along the 1,200 km CAR-DRC border. Identifying refugees in this vast territory is extremely difficult since the Ubangi River marks the border and is therefore a restricted zone. The dense forest and the fear of attacks by the Lord's Resistance Army are the major reasons, forcing refugees to move longer distances to Equateur Province, while others have arrived in Orientale Province.

Moreover, the presence of anti-Balaka elements has been confirmed both in Worobe and surrounding areas, and on the axis between Ubangi and Bakundu in the northern part of the province.

The DRC Government recognizes refugees from the CAR on a prima facie basis, but has also decreed that assistance should be afforded only to refugees in settlements. Accordingly, UNHCR, UNICEF, WFP and WHO have been assisting refugees individually in the new settlements and have also provided some community-based assistance in host communities to strengthen their absorption capacity.

While almost 6,300 Congolese refugees returned from Batalimo camp in the CAR in April/May 2014, another 3,300, mostly from Orientale Province, still reside in Zemio camp in the east of the CAR, although the spontaneous return of some 1,000 refugees has been reported.

Protection needs include support for survivors of SGBV, assistance for people with specific needs and protection monitoring for those who live along the Ubangi River. Furthermore, basic infrastructure and services are lacking in several sectors, requiring significant resources to provide food, facilitate access to potable water, establish and strengthen national health centers, and improve roads to enable safe relocation from the Central African border. Four camp sites as well as the host community in the settlement region have been identified for interventions in all sectors.

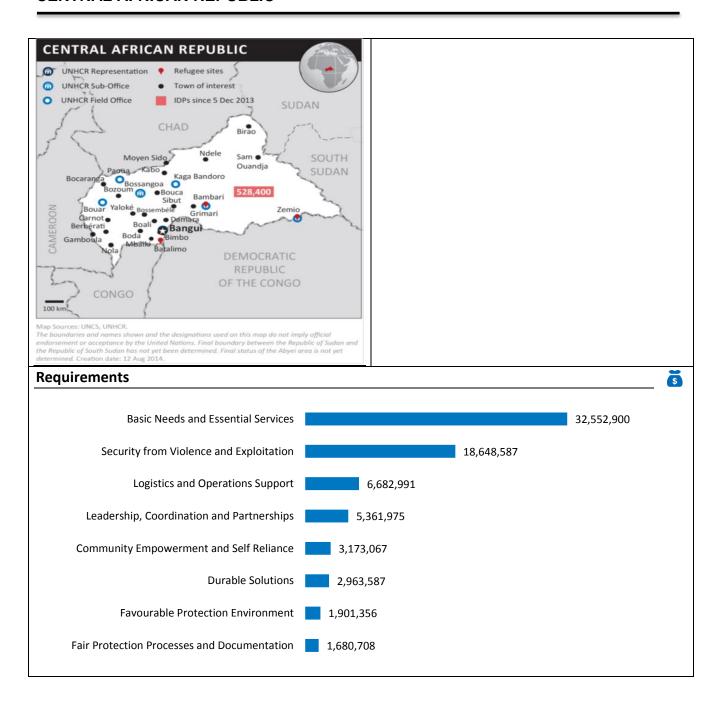
Summary financial requirements (in USD)

	REVISED BUDGET CENTRAL AFRICAN REFUGEES SITUATION				
OPERATIONS	budget without the Central African Refugees situation component	Portion of the ExCom approved budget dedicated to the Central African Refugees Situation	Additional Requirements	TOTAL IN USD	TOTAL revised requirements
Central African Republic	-	24,495,673	48,499,498	72,995,171	72,995,171
Democratic Republic of Congo	140,858,717	36,172,915	20,412,153	56,585,068	197,443,785
Congo	29,950,467	-	7,871,616	7,871,616	37,822,083
Cameroon	9,921,168	17,078,515	51,451,157	68,529,673	78,450,841
Chad	188,821,172	8,498,504	27,640,433	36,138,937	224,960,109
SEN RO	50,566,022		372,472	372,472	50,938,494
DER HQ (cc 95704)	6,084,433		500,000	500,000	6,584,433
AFRHQ	11,658,228	-	769,340	769,340	12,427,568
TOTAL	437,860,208	86,245,608	157,516,669	243,762,277	681,622,486
Support Costs, 7%	35,301	-	11,026,167	11,026,167	11,061,468
GRAND TOTAL	437,895,510	86,245,608	168,542,836	254,788,444	692,683,954

Note: Revised budgets for Cameroon, the Regional Office in Dakar and Headquarters are inclusive of financial requirements expressed in the Nigeria Situation and the Supplementary Appeals for the South Sudan Situation.

STRATEGY AND PLANNED ACTIVITIES

CENTRAL AFRICAN REPUBLIC



Leadership and coordination

UNHCR is coordinating the responses for the needs of some 550,000 IDPs in the CAR. The Office has assumed leadership of the camp coordination and camp management (CCCM) cluster, together with IOM as co-facilitator, and also leads the shelter/NFI cluster, with ACTED as co-facilitator, and the protection cluster, co-facilitated by the Danish Refugee Council The structure of the protection cluster includes the child protection sub-cluster led by UNICEF, and the GBV sub-cluster, co-led by UNFPA and Mercy Corps. UNHCR has deployed additional staff to provide necessary support to inter-agency efforts in these three areas.

Protection

UNHCR's role as lead agency for the protection cluster includes ensuring that protection is central to the overall humanitarian response at national level (Bangui), as well as at sub-national level (Bossangoa). Regular analysis of the dynamics of population movement, the causes of displacement and the protection situation in different regions and at the national level will continue, as well as mapping and regular updates on the situation of communities risk in the CAR. In the implementation of protection and durable solutions for refugees and asylum-seekers, UNHCR works closely with the National Commission for Refugees (CNR), other relevant government institutions and all partners to provide protection and multi-sectoral assistance to rural and urban refugees.

In cooperation with the authorities, UNHCR and other members of the cluster have evacuated populations whose lives were in immediate danger. Other protection measures include:

- Advocate and enhance protection by presence or byescorts and the deployment of international forces -MISCA and/or Sangaris - to protect populations at risk;
- Register IDP populations in Bangui, Bossangoa in collaboration with the Commission pour le Mouvement des Populations;
- Seek relocation options for Muslim populations in different parts of the country;
- Maintain mobile teams to gain greater outreach to populations in urgent need of support; identify
 children with special needs including those unaccompanied and separated in all CAR préfectures, and
 strengthen community structures for child protection, particularly in the north and west of the country.
- Raise awareness, prevention and reduction of SGBV, as well as support for survivors and their families in IDP sites and places of return together with other cluster members.

In addition, UNHCR is working to assure the protection of refugees in the CAR who have repatriated voluntarily. A total of 558 refugees (Sudanese, Chadian and Congolese) have already returned, and the movement of an additional 200 refugees is being organized. The entire Congolese refugee population in Batalimo (6,300) is currently being repatriated.

Camp management and camp coordination

In Bangui, the IDPs live in 42 displacement sites; the 10 most populated ones accommodate some 70 per cent of the IDP community. The largest site located next to the M'Poko international airport hosts more than 50,000 IDPs.

The CCCM cluster, under the leadership of UNHCR, presently covers the Bangui, Kaga-Bandoro, Bossangoa, Paoua, Kabo, Moyen-Sido, Batangafo, Boda, Grimari and Bouca *préfectures* and *sous-préfectures*, and is in the process of extending its regional scope, insofar as security and access allow.

The CCCM strategy for CAR was elaborated in February 2014 to address the needs of the IDPs living in sites. In line with the overarching Strategic Response Plan (SRP) objectives, the CCCM priority interventions are:

- In close collaboration with State and humanitarian actors, facilitate returns through information dissemination and ensure the effective participation of all population groups living in displacement sites;
- Ensure that populations unable to return to their place of origin before the rainy season live in secure and dignified conditions in their current sites;
- As a last resort, in M'Poko and other highly vulnerable sites, ensure that populations unable to return to their places of origin before the rainy season live in secure and dignified conditions in alternative sites;
- Support in the identification of locations (transit centres and/or stable locations) inside the CAR where communities at risk would be willing to relocate and where security, safety and dignity can be guaranteed.

Shelter/NFI

UNHCR will increase NFI and emergency shelter support to some 512,500 IDPs as an indicative beneficiary target for 2014. This assistance will target IDPs primarily during the displacement, but also upon return, in cooperation with other humanitarian actors. Many currently displaced persons have lost their belongings and their homes and will require assistance upon return.

The provision of NFIs by UNHCR helps to maintain humanitarian access in areas of displacement, and provides tangible and visible support to IDPs, host communities, national and local authorities, in areas with or without government presence.

UNHCR will also make shelter experts available to assist with site planning and other shelter needs. A special focus will be placed on community participation with IDP involvement in the process.

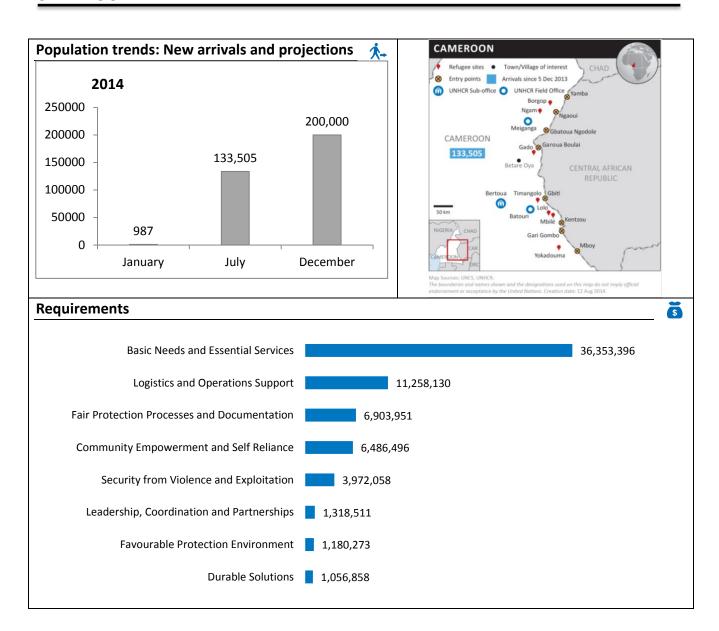
Main challenges and identified needs

The extremely volatile security situation poses the main challenge to protection and assistance efforts inside the CAR, limiting access to the affected populations, staff security and logistics.

Planned Response	Activities
Protection	 Regular dialogue and information sharing on (physical) protection of civilians with MINUSCA, MISCA, Sangaris, state/non-state actors and other stakeholders. Protection by presence in all conflict-affected areas to ensure that appropriate referrals for support and/or conflict mitigation activities are provided for affected communities. Identification and referral of people with specific needs, including psychosocial counselling for groups and individuals such as people with disabilities affected by armed conflict. There is a particular need for specialized mental health care and psychosocial support services. Development of standard operating procedures (SOPs) for referral mechanisms.
Response to sexual and gender-based violence (SGBV)	 Strengthening of existing and establishing new monitoring networks. Creation of referral pathways to ensure services are accessible for women, men, boys and girls survivors of SGBV, women's empowerment groups. Targeted material assistance for people facing specific SGBV risks, such as people with disabilities, children, LGBTI people of concern, and individuals engaged in survival sex (particularly in displacement areas). Development of SOPs for referral mechanisms in displacement areas.
Protection of children	 Prevention of forced recruitment. Identification, family tracing and reunification of separated and unaccompanied children and adolescents. Provision of alternative care and support and efforts to prevent family separation. Identification and support to other children identified to be at specific risk. Psychosocial activities and support for children. Establishment of child friendly spaces. Identification of teachers and provision of access to education services and learning materials. Establishment of and support to community-based child protection networks.
Law and policy development	 Ongoing advocacy and support to facilitate accession to the Kampala Convention. Convening of one inter-ministerial workshop as well as bilateral workshops with specific ministries on benefits of accession.
Shelter and infrastructure	Emergency shelter for 512,500 people.Adequate provision for temporary learning spaces.

Community mobilization	 (Re)-establishment of community support networks and community watch groups. Promotion and integration of a community-based approach in programming and delivery of assistance projects.
Coordination and partnerships	 Cluster leadership at national and sub-national levels. Leadership of refugee response, coordination of partners and interventions in support of refugee response. Information management support for refugee response, including coordinated assessments and population data management. Mainstreaming protection-based approaches into all assistance projects. Regular inter-cluster and bilateral dialogues on protection mainstreaming with individual clusters. Training for the protection cluster on protection mainstreaming for further dissemination at an inter-cluster level. Inter-agency assessment missions.
Camp management and coordination	 CCCM cluster leadership at national and sub-national levels. Camp coordination mechanism among humanitarian actors concerned (local authorities, UN agencies, NGOs) to achieve efficient delivery of life-saving assistance and service. Information management capacity building and delivery. Capacity building of interlocutors (partners, MINUSCA, MISCA, Sangaris, local authorities, IDP leaders) to support community participation and mobilization.
Logistics and supply	 Supply of goods, transport, handling, distributions for 512,500 people.
Operation management, coordination and support	 Operational support to partner agencies, mainly protection partners in the form of assets, field bases, air movement of staff etc.

CAMEROON



Refugees are arriving in Cameroon in a very vulnerable condition: malnourished, dehydrated and traumatized. They are vulnerable to measles, malaria and diarrhoea. Lack of sufficient high-quality food, water and sanitation services, and preventive health care, are the main causes.

UNHCR is working together with partners already involved in the programme for previous CAR refugee groups. These include: Africa Humanitarian Action (AHA), the International Federation of Red Cross (IFRC), the International Medical Corps (IMC), the International Relief and Development (IRD-US), Première Urgence-Aide Médicale Internationale (PU-AMI) and Médecins Sans Frontières (MSF Switzerland).

To support government efforts and respond efficiently to the emergency, a rapid response joint mission was organized by the UN Country Team in mid-February 2014 to assess the needs of the newly arrived CAR refugees in the east and Adamaoua regions. Needs and priorities were identified through interviews with refugees, host families, government officials, registrars, partners and medical staff.

UNHCR together with the Government's Inter-ministerial Emergency Committee coordinates the emergency refugee response for CAR refugees. Coordination efforts are mainstreamed through the existing multi-sectoral approaches to ensure an efficient utilization of resources while all actors take crosscutting issues such as protection, gender, and environment into consideration.

Protection

Timely registration of new arrivals and provision of identity documents, protection and security are equally important. Profiling will identify those with specific needs and vulnerabilities, such as survivors of sexual and gender-based violence (SGBV), unaccompanied minors and separated children, older persons, women requiring specific attention, persons with disabilities and those who need immediate psychological support. Campaigns and awareness-raising will be aimed at preventing and breaking the cultural stigma surrounding gender-based-violence, child abuse and exploitation. Centres will be established where survivors of SGBV can discuss the experiences they have gone through and access appropriate response services.

It is envisioned that the number of refugees under 18 years of age could number up to 60,000 by year-end. Child protection systems in particular require strengthening to respond to the needs of SGBV survivors and unaccompanied and separated children (UASC)

Shelter and Infrastructure

It is estimated that eight to ten sites will be needed to accommodate the 134,000 new arrivals expected by year-end. The needs assessment mission recommended a gender-sensitive approach to the construction of shelters and water, sanitation and hygiene facilities in existing refugee sites. Host community infrastructures should be upgraded to include water and sanitation facilities in schools and health centres.

Non-Food Items (NFIs)

Most new refugees require urgent assistance to replace basic household items and to establish themselves in refugee sites. UNHCR will distribute standard non-food items packages to refugees and pay particular attention to persons with specific vulnerabilities or needs.

Water, Sanitation and Hygiene (WASH)

Poor hygiene practices and facilities were observed both in host communities and at refugee sites. This situation could lead to epidemics in light of the upcoming rainy season. Hygiene and sanitation campaigns are needed in refugee sites and host communities to prevent and reduce hygiene-related illness and the spread of disease. In addition, sensitization and social mobilization will be conducted for the prevention and risk mitigation of diseases, including cholera.

Health and Nutrition

Three out of six sites do not have nearby health centres and the three existing health centres are facing crucial shortages in infrastructure, basic health equipment and materials, medical supplies and personnel. this is a serious gap, as refugees suffer from a wide range of infectious diseases as well as chronic conditions. Infectious diseases are common among children under five years and malnourished children are more susceptible. Pre-natal care and safe hygienic delivery including other reproductive health care interventions are also required. Refugee children from 0 to 15 years will require vaccinations against polio and measles.

Food

The majority of the refugees are cattle breeders from the Fulbé and Mbororo ethnic groups whose productive assets have been depleted as they fled into exile. The livelihoods of the east, Adamaoua and north regions that are hosting the newly arrived refugees are based on natural resources and agricultural production that have declined owing to adverse climatic conditions and diminishing foreign demand. Thus, immediate food assistance is urgently needed to mitigate the deterioration of the food security situation.

Education

It is estimated that only a small number of CAR refugee children attend public schools in hosting communities. Children hosted in transit or refugee sites cannot carry out learning or recreational activities.

Social Cohesion

It will be important to establish and maintain harmonious relationships between refugee and host communities to enable continuous access to humanitarian assistance, durable health and educational facilities are currently insufficient. Additional infrastructures and medical staff and teachers have been recruited and trained so as not to adversely affect the local population and reduce tensions.

Environment

There are concerns that the arrival of large numbers of refugees within a short period will lead to environmental degradation and negatively affect the availability of already limited natural resources.

Main challenges and identified needs

In Cameroon, the main challenge for the reception of refugees is the extensive border with the CAR, the multitude (more than 24) of entry points and the scope of the operational area spread over 50,000 square kilometres, coupled with the bad conditions of roads in the areas where the refugees are settling. The security environment is also a concern with the possible presence of armed elements and risks of robbery or kidnapping.

Refugees are arriving with no belongings or only very basic means, and are often in a very precarious state of health. Emergency supplies, including food assistance, non-food items, as well as hygienic kits for women of reproductive age are being distributed, but will need to be replenished to sustain the emergency response.

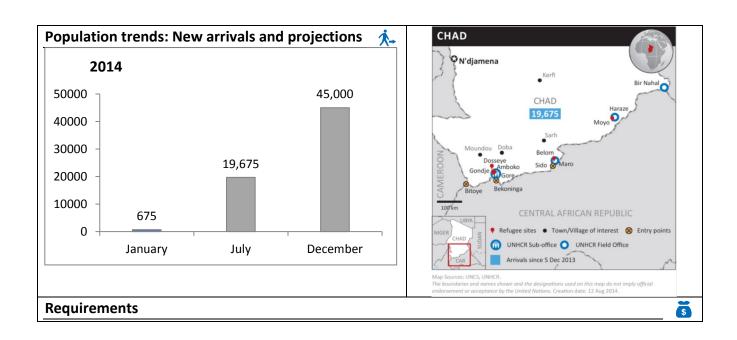
The relocation from host communities is, and will continue to be, voluntary, and takes into account not only the willingness of refugees to relocate, but also the capacity of host populations to sustain their presence. It is estimated that around 60 per cent of the refugees will live in sites, while another 40 per cent will remain in host communities. Both groups require assistance, based on their levels of vulnerability.

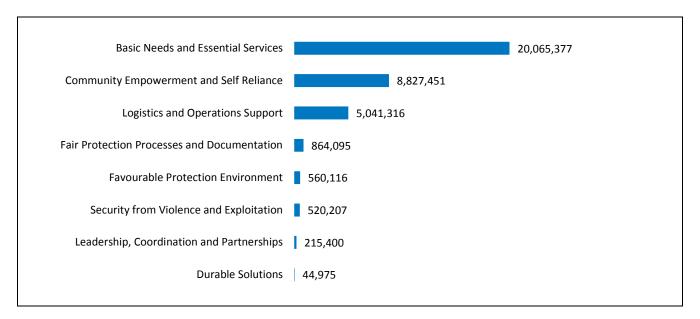
Planned Response	Activities
Protection	 Provide protection and security to refugees from Central African Republic, together with the Government.
	 Monitor border crossings and continue advocacy with the Cameroonian authorities for access to asylum and to prevent refoulement.
	 Register 134,000 CAR refugees in a timely manner with data disaggregated by gender and age and provide legal assistance where necessary.
	 Identify persons with specific needs.
	 Set up an early warning system on SGBV incidents at police and gendarmerie stations and at border entry points.
	 Provide emergency assistance to women, girls and adolescent-survivors of SGBV.
	 Provide integrated assistance (medical, psychosocial, legal and judiciary) to survivors of SGBV in Women Empowerment Centres (WEC) and health centres.
	 Conduct sensitization and awareness raising campaigns against SGBV, child abuse and exploitation.
	 Strengthen women's participation in social cohesion initiatives and community dialogue on peaceful co-existence.
	 Identify and support children associated with armed groups.
Shelter/Infrastructure/site management	 Develop 8-10 sites/settlements and ensure efficient site management.
	 Construct gender sensitive emergency (community and family) shelters to host new CAR refugees.

	 Construct community structures at the reception centres and / or install tents to enable smooth relocation process.
	 Provide technical support and distribute shelter construction kits to refugees.
	 Distribute construction materials to convert temporary shelters into semi-permanent shelters.
Non-Food Items (NFIs)	 Procure, transport and distribute NFIs to refugees in the sites and for the most vulnerable at the entry points.
Water, Sanitation and Hygiene (WASH)	 Construct boreholes and wells for safe access to potable water in refugee sites and host communities.
	 Repair and maintain existing boreholes and wells near the sites or entry points.
	 Construct gender sensitive emergency sanitation facilities (latrines and showers).
	 Conduct hygiene sensitization campaigns in refugee sites and host communities.
Health and Nutrition	 Provide primary health and nutrition care services in all sites.
	 Increase capacity through construction and rehabilitation of health centres in the areas hosting refugees.
	 Establish mobile health units in the refugee sites and other areas hosting refugees.
	 Provide free health care and referral services to refugees.
	 Ensure patients referrals from entry points to district hospitals.
	 Carry out Joint Nutrition Surveys (UNICEF, WFP and UNHCR) on malnutrition among new refugees.
	 Conduct active health/nutrition screening at entry points and in refugee sites.
	 Support mass vaccination campaigns against measles and polio targeting 16,000 children below 5 years.
	 Strengthen emergency early warning and response systems for the detection of and response to outbreaks of communicable diseases (measles, poliomyelitis, cholera, malaria, meningitis, etc.) in the refugee sites.
	 Provide 30,000 insecticide-treated nets (LLIN) to refugee families
Food	 Provide hot meals upon arrival at the entry points and in refugee sites.
	 Distribute 15-days' food rations to all registered refugees at entry points.
	 Distribute monthly food rations (2,100 kcal per person per day) to refugees in the sites.
	 Distribute peanut and bean seeds in order to increase access to high quality food maize seeds and fertilizers. Set up ten processing mills in the refugee sites with the highest numbers of refugees in order to improve storage of cereal and tubers.
Education	 Ensure all children have access to education (pre-school, primary and secondary).
	 Participate in back-to-school campaigns.

	 Construct additional classroom blocks with latrines and water points.
Livelihoods	 Implement income-generating activities (agriculture, livestock, and micro-finance).
	 Support mixed groups/cooperatives (including technical support by agricultural expert) to build capacity in the areas of business management and team working.
	 Provide training on the management of income generating activities, agro-pastoral techniques, crop production, management and marketing specifically for women.
	 Provide seeds, basic equipment and hand tools (machetes, hoes, wheelbarrows).
	 Provide revolving funds to support 5,000 refugee women's economic activities.
Social cohesion	 Provide community services (health, nutrition, education) for host communities and refugees.
	 Implement joint projects (livelihoods activities, income generating activities, sensitization campaigns, etc.) maintain the peaceful cohabitation between host community and refugees.
Transport and Telecom	 Provide transport to support relocation of refugees and ensure distribution of items.
	 Install communication equipment (UHF and VHF) in vehicles for security reasons and for better coordination and tracking of conveys/missions.

CHAD





In Chad, UNHCR is facilitating the voluntary transfer of refugees to existing refugee camps where they are registered and have access to shelter and basic facilities such as water, sanitation, health, and education. UNHCR is also facilitating the transfer of refugees to local hosting villages located at a safe distance from the border. By the end of July, some 6,000 refugees had been relocated to Dosseye camp and 3,800 refugees to Belom camp, both in the south of the country, since January 2014.

The shelter and CCCM cluster

The Shelter/CCCM was activated in Chad at the beginning of May upon the agreement of the HCT. The Cluster is being led by UNHCR and co-led by IOM for a period of 6 months. This allows for better coordination in these two important interrelated areas, helping to ensure the necessary increase in delivery and to maximize limited resources.

Camp management

UNHCR continues to support the Government of Chad with the planning and management of two sites, Danamadja (near Gore) and Maigama (near Maro), dedicated to accommodating Chadian returnees with no family links to their country pending a longer-term solution. At Danamadja, 60 hectares of land have been cleared and is already accommodating over 11,200 returnees. The second site in Maingama currently hosts some 4,000 returnees.

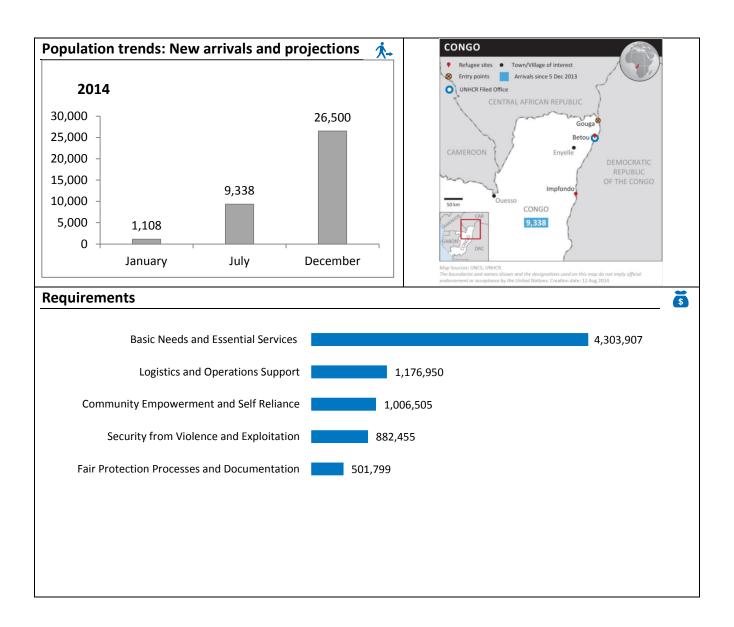
Protection

UNHCR and partners are working to prevent statelessness. UNHCR continues to advocate with the Government to ensure that 2nd and 3rd generation Chadians with no links or family ties to the country are quickly identified and issued with documentation in order to avoid the risk of statelessness. Registration will help to provide appropriate protection and assistance. New arrivals are exposed to various protection risks, including arbitrary arrest, illegal detention and child labour. These risks could increase with the upcoming rainy season. In April, UNHCR identified over 1,100 individuals (522 families) in Gaoui, near Ndjamena, of whom only 123 people hold some form of documentation.

Peaceful coexistence

Since December 2013, the majority of the refugees arriving are Muslims while the population of southern Chad is predominantly Christian. Local authorities are vigilant and conscious that religious tensions in the CAR could spill over and become a threat to national security in Chad. Measures need to be put in place to assure the civilian nature of the camps/sites and stability for all communities in the area. Competition between communities for land and natural resources could also cause tensions.

Planned Response	Activities
Registration/Documentation	 Registration of refugees and returnees on arrival. Provision of proper documentation to assure access social services and to prevent statelessness.
Site planning	 Establishment of new camp sites in Danamadja and Maigama.
Protection of children	 Establishment of SOP to identify unaccompanied and separated children. Establishment of protection mechanisms/networks for protection and care of unaccompanied and separated children.
Social cohesion	 Strengthening of peace building initiatives to enhance peaceful co-existence between various population groups.
Health	 Provision of emergency health care. Establish health centres at border entry points and in host communities. Strengthen technical expertise in health and nutrition in the Ministry of Health. Strengthening of existing referral systems and medical supply chains. Provision of enhanced coverage for measles vaccination targeting 6 to 59 months-old children is a priority at entry points and in host communities.
Education	 Setting up of tented schools for primary school children. Establishment of child-friendly spaces for children. Provision of learning and teaching material. Support for access to secondary and tertiary education.
Water, Sanitation and Hygiene (WASH)	 Construction and strengthen water supply and sanitation infrastructure.
SGBV	 Provision of legal, medical and psychological assistance to SGBV survivors. Conduct awareness-raising sessions on SGBV, prevention and response mechanisms.



The first influx of refugees from the CAR into the Congo began in March 2013. Since December 2013 more than 7,800 Central African refugees have been registered and recognized on a prima facia basis. The main population is located in Betou, on the north-eastern border, while smaller groups are settled in Brazzaville and Impfondo.

In the Congo, UNHCR coordinates the response to the influx of CAR refugees and is working on strengthening inter-agency cooperation and complementarity, including with NGOs and the Government.

Protection

Training of immigration officials and local authorities on international protection will continue during the year. Border monitoring missions will be conducted to relocate refugees who are living in localities close to the border and are willing to receive assistance in Bétou. The individual registration of CAR refugees will be pursued with the aim of conducting biometric registration during the verification exercise planned in August 2014. The identification of people with specific needs will be enhanced to provide specific support to these refugees.

UNHCR will support the Government in issuing refugee identity cards for refugees. Special focus will be placed on raising awareness of the importance of civil registration and especially birth registration for the refugee population. Attention will also be given to facilitating peaceful co-existence between refugees and the host community and between refugees of different religions.

Committees established to address SGBV will work to strengthen prevention and response within communities with the aim of improving the protection of SGBV survivors. Medical and psychological care and socio-economic support will be provided to survivors. Advocacy with authorities to arrange court hearings and provide legal assistance will continue to be provided to survivors.

Unaccompanied and separated children will be identified and temporary care arrangements implemented. Where possible, children will live with foster families and their stay closely monitored. Family tracing will be initiated for identified children.

Shelter and Infrastructure

Temporary community shelters will be constructed to accommodate refugees while awaiting allocation and transfer to separate family shelters in the two refugee camps.

Non-Food Items (NFI)

Household NFI kits such as kitchen sets, blankets, mosquito nets and sanitary kits for women and girls of reproductive age will be procured and distributed.

Water, Sanitation and Hygiene (WASH)

The Office will undertake the rehabilitation and maintenance of existing water systems in refugee sites. In parallel, UNHCR will mobilize and sensitize refugees to maintain latrines and showers. Procurement and provision of community sanitation kits for communal latrines and for family latrines will be initiated. Additional latrines will be constructed for some of the 20,000 refugees in Bétou District.

Health and Nutrition

Provision of medical supplies will enable access to primary health care facilities for refugees, while complicated medical cases will be referred to appropriate hospitals. Partners will strengthen activities for refugees in rural and urban areas towards prevention and response to SGBV. Legal services will also be increased and medical and social support will be enhanced to reduce the vulnerability of SGBV survivors.

A community health worker system will be established to improve access to basic health care and nutrition support and to pass health, hygiene and nutrition messages to refugees living in sites and with host families. Partners will ensure that the nutritional status of refugee children under five years old is in line with international standards. The Office will ensure nutrition surveillance to detect and treat cases of moderate and severe malnutrition in a timely manner.

Food

Refugees will receive a full ration of nutritional foods, including super-cereal, to prevent further malnutrition from developing and to assist with the physical recovery of the refugees.

Education

In rural areas, access to education will be facilitated through the integration of refugee children into Congolese public schools. Specific actions will be undertaken to strengthen those schools and enable the successful integration of children. For urban refugees, the needs of the most vulnerable children attending primary school will be addressed, with a specific focus on girls' access to education. Early childhood education for children aged between two and five years will be ensured. At least 600 students will receive psychological support to prevent long-term disorders. In addition, information campaigns on violence against children will be conducted.

The high proportion of young men requires special focus on implementing appropriate vocational activities and supporting their inclusion in secondary and tertiary education in order to address idleness amongst youth, which could lead to conflict or other social problems.

Livelihoods

Seeds, agriculture and fishery materials will be distributed to refugees. Technical support will be given to households to implement self-reliance activities efficiently. UNHCR will advocate with local authorities to

release agricultural land to refugees. To facilitate the integration of CAR refugees in the community, agricultural assistance will also benefit host communities.

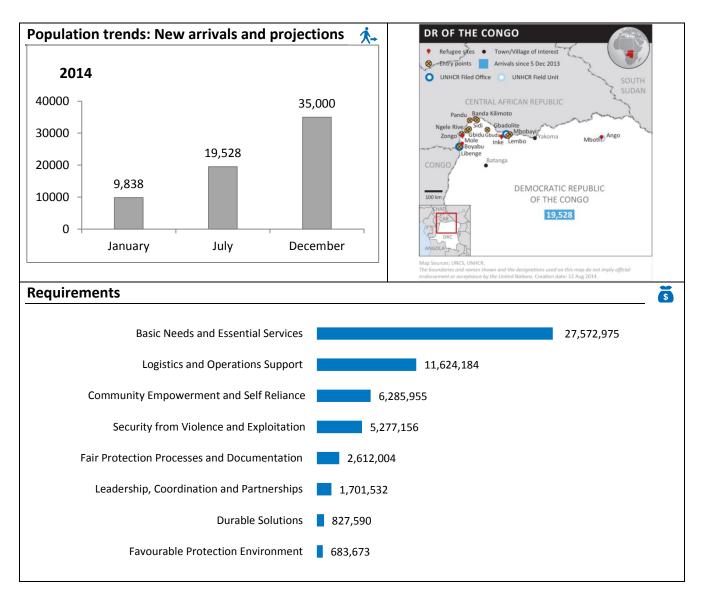
Support to third country nationals

Newly arrived TCNs will be registered, their specific needs identified and emergency assistance will be provided. Protection monitoring and referral to specialized agencies and institutions will be carried out in coordination with protection partners, focussing on assistance to unaccompanied and separated children, SGBV cases, female-headed households, the elderly, disabled and pregnant women (particularly advanced pregnancies).

Transit sites will be established to allow TCNs and returnees to live in dignified conditions before onward transportation. Alternatively, support will be provided to host communities to continue to support the TCNs. Basic community shelters and WASH facilities will be set up at sites. Health triage facilities will be established to enable access to urgent health care and referral services with transport assistance to and from hospitals. Basic non-food items packages, similar to those provided to refugees, will be distributed to TCNs, including prior to onward transportation.

Planned Response	Activities
Protection	 Register 20,000 CAR refugees and provide legal documentation. Provide medical care, psychosocial counselling and legal assistance to SGBV survivors. Train local authorities to recognize refugee and reduce cases of harassment and detention. Establish recreational areas and areas for children's development for at least 1,500 children between 2-5 years. Provide psychological support for children, adolescents and youth in schools. Prevent sexual and SGBV through sensitization and awareness rising campaigns targeting 4,000 children and 3,000 women and men.
Shelter/Infrastructure	 Construct 10 temporary community shelters for 1,000 new arrivals. Construct 1,400 shelters for 5,200 refugees living in the sites. Rehabilitate100 shelters for the more vulnerable refugees households.
Non-Food Items (NFIs)	 Distribute household goods composed of kitchen sets, blankets and mosquito nets to 10,000 people. Distribute sanitary kits to 3,000 women and girls.
Water, Sanitation and Hygiene (WASH)	 Provide 15 litres of water /person/day to decrease risk of disease. Upgrade water supply system and construct of two new wells. Construct and rehabilitate 85 water points. Construct 450 emergency latrines and rehabilitate 3,209 communal latrines. Construct 50 semi-durable latrines in schools and health centres. Conduct awareness campaigns for the promotion of hygiene.
Health/Nutrition	 Conduct nutritional education sessions (three sessions per weekly per site). Provide primary health care to 20,000 refugees and procure drugs for 20,000 refugees. Set up a referral mechanism to secondary level hospital for 1,000 refugees. Conduct five training and capacity building sessions for the health care staff.

	 Provide and monitor complementary food supplements. Promote appropriate infant and young child feeding practices. Provide refrigerators, delivery beds, delivery kits and essential medicines for reproductive health. Provide 92 grams daily ration of Plumpy Supp to 1,000 malnourished children for three months. Conduct measles and polio vaccination.
Food	 Conduct measies and polio vaccination. Distribute of a full ration of nutritional foods to refugees.
Education	 Enrol 1,308 children in primary education. Promote specific measures for girls' education. Distribute school kit to 1,308 children. Support extension of capacity at secondary school (CEG Bétou). Construct classroom block (3 classrooms) in Bétou. Provide vocational training, secondary and tertiary education to refugee youth. Establish one cyber café in Bétou.
Logistics/Transport	Maintain vehicle fleet in adequate condition.Purchase and procure fuel and supplies.
Self-reliance/livelihood	 Negotiate of lands with local authorities. Distribute seeds, agriculture and fishery materials. Ensure technical expertise to households to implement self-reliance activities.
Multi-sectoral assistance to TCNs	 Register and identify particular protection cases, including unaccompanied and separated children, female-headed households, older persons, persons with disabilities and pregnant women. Establish transit sites for TCNs with WASH facilities and health and psycho-social care, access to basic NFI's and food. Repatriate most vulnerable TCNs by air transport and provide medical escorts when needed. Provide travel documents for TCNs in collaboration with diplomatic representations.



The DRC, which hosts over 63,000 refugees from the CAR, of whom 19,528 have arrived since December 2013, may receive some 50,000 additional refugees by the end of 2014. At present, the Office's strategy is to settle half of the refugees in camps, and the other half in host communities. Refugees living in camps will receive full assistance, while those living in host communities will receive community-based assistance.

UNHCR will assume the overall coordination of the interventions of this appeal. It will strengthen the interagency cooperation and complementarity, including with the NGOs and the Government. Coordination meetings led by UNHCR will be conducted regularly. Follow-up missions will take place every month in each site sheltering refugees to guarantee the continuation of the implementation of various activities.

The composition of multi-functional teams assigned for the follow-op and evaluation of the implementation will be reviewed taking into account the UN agencies and the NGOs intervening in this operation.

Protection

Refugees from the CAR are recognized on a prima facie basis by the Government. UNHCR will register refugees on an individual basis and will identify those with specific needs. The *Commission Nationale pour les Réfugiés* (CNR) will also help protect refugees by conducting protection monitoring missions along the Ubangi River as well as by giving a special support to survivors of sexual and gender-based violence (SGBV).

Shelter

Some 54 per cent of the refugees have settled in four established camps (Boyabu, Mole, Inke in Equateur Province and Mboti in Oriental Province) and the population could increase in the following months.

UNHCR will continue the full construction of shelters for vulnerable refugees and will also provide support and tools-kits to other families to enable them to construct their own shelters.

Health

UNHCR will provide primary medical assistance on site for refugees living in camps and referral hospitals in seven health zones and camps. In parallel, refugees living in host communities will receive medical assistance in governmental medical centres that are supported by MSF and IMC.

Community Empowerment and Self-reliance

Because of the meagre resources available, tensions have already developed between refugees and host communities. To reduce tensions, UNHCR, in collaboration with the CNR, will continue to implement sensitization campaigns focusing on peaceful coexistence, led by heads of local communities and traditional chiefs.

Planned Response	Activities
Protection	 Government will deploy 150 national police officers in camps and out of camps for enhanced security. Identify, document, and register all refugees. Conduct 30 protection monitoring missions along the border. Establish two SGBV focal points in each camp community. Support SGBV survivors and girls at risk of SGBV to attend school. Implement standard operating procedures for SGBV and SAFE projects in three camps. Establish three counselling centres.to provide comprehensive response services to SGBV survivors. Register and identify persons with specific needs and respond as appropriate. Conduct two Age, Gender and Diversity Mainstreaming (AGDM) needs assessments – one each in and outside the camp. Identify unaccompanied and separated children. Follow up on 40 legal cases. Establish seven child-friendly spaces, on and out-of- camps.
Community-empowerment and self-reliance	 Launch four sensitization campaigns for peaceful co-existence. Conduct four participatory assessments. Support sectoral community groups.
Shelter/Infrastructure	 Construct and maintain 10 kilometers of access roads. Construct 1,250 transitional shelters for persons with specific needs. Provide 5,000 shelter construction kits in camps.
Non-Food Items	 Conduct assessments of NFI vulnerabilities among non-camp refugees and host families using the NFI Score-card approach and register beneficiaries. Conduct market survey to determine feasibility of cash-voucher approaches. Deliver NFI assistance to 7,000 families (35,000 people) – (5,000 non-camp refugee families (25,000 people) and 2,000 vulnerable host families).

Water, Sanitation and Hygiene (WASH)	 Distribute Aquatab/Pur tablets to 25,000 refugees in the host community. Construct and rehabilitate water points for 25,000 refugees. Construct and rehabilitate emergency family and collective latrines emergency showers, and hand washing stations for 25,000 refugees. Ensure efficient waste management for 25,000 refugees. Organize hygiene promotion campaign reaching 81,000 persons in camps and host communities. Distribution of hygiene emergency kit to 38,000 refugees. Print, distribute information, education & communication (IEC) material on hand washing, hygiene to 38,000 refugees Establish a contingency stock to support 38,000 refugees in case of extension of emergency.
Health /Nutrition	 Conduct joint rapid needs assessment in eight health zones. Supply essential medicines and supplies including malaria prophylaxis anti-retroviral drugs to health centres and referral hospitals in seven health zones and camps. Respond to measles outbreaks in Bili, Libenge and Zongo. Organize free medical care for refugees and vulnerable populations in line with national norms and standards. Strengthen routine immunization in seven health zones in Equateur and Orientale provinces. Distribute dignity kits to 4,500 women of child-bearing age Ensure 4,900 safe deliveries of babies, including by caesarean section. Provide support to 980 SGBV survivors of SGBV. Treat 4,400 cases of STI/HIV. Equip 8 health facilities with appropriate medical and obstetrical equipment. Distribute emergency reproductive health kits to referral hospitals and health facilities. Train 60 health care providers in Minimum Initial Service Package (MISP) for Reproductive Health (RH). Raise awareness of 30,000 affected persons on how to properly use MISP/RH services. Train health providers and community health workers on Integrated Management of Acute Malnutrition (IMAM) and Infant and Young Child Feeding (IYCF). Provide therapeutic feeding and equipment to local health facilities. Conduct IYCF sensitization and community mobilization. Treat moderate acute malnutrition for 8,000 children aged 6-59 months. Distribute nutritional food to 6,000 pregnant and lactating women in the camps and refugee host communities.
Food	 Identify 10,000 vulnerable households for distribution of agricultural assistance and provide food for seed protection for the vulnerable households. Purchase and distribute agricultural inputs (seeds and tools), to 13,000 households. Conduct post-distribution and post-harvest follow-up to ensure that 400 hectares of plots are sowed with cereal (maize), beans

	 and vegetable crop products; at least 8,300 tons of foods are produced. Train and sensitize government partners and NGOs, local trainers and 13,000 refugee households on agricultural technical and good nutritional practices. Provide food assistance - food, cash and cash vouchers to 57,500 refugees. Conduct school-feeding for 59,114 refugee children. Target 10,000 households for seed protection for Food for Work project. 3,000 vulnerable households).
Education- in camp	 Provide primary education for 10,000 children. Construct two on-camp schools. Deliver of training sessions for 165 refugee teachers on learner-centered methodologies and CAR curriculum, as well as education for peace building and psychosocial support to children. Feeding in schools to 4,725 refugee children.
Education- in host communities	 Support 40 schools through school vouchers Conduct two training sessions for refugee and host community Provide secondary education for 6,000 children Implement one online university programme. Conduct three literacy programmes. Conduct capoeira classes for 1,200 youths. Feeding in schools to 57,341 children in refugee host communities.
Logistics/Transport	 Ensure efficient and timely supply of goods (average of 90 days) Ensure regular maintenance and replacement of motorcycles. Ensure availability of a transport plane based in Mbandaka. Construct and rehabilitate of 10 kilometres of road.
Reintegration of DR Congolese from Batalimo	 Transport 6,200 returnees from border to refugee/reception centres. Distribute cash grants to families.

FINANCIAL INFORMATION

UNHCR's total requirements for the five operations affected by population displacement in and from the Central African Republic amount to **USD 692.7 million**, including additional requirements of **USD 254.8 million** as presented in this revised supplementary appeal.

Financial requirements for the Central African Republic

Objective	EXCOM budget related to the CAR Refugee Situation	Additional Requirements (USD)	TOTAL
Basic Needs and Services	10,474,361	22,078,539	32,552,900
Food security	563,042	-	563,042
Health	2,535,631	-	2,535,631
Nutrition	438,787	-	438,787
Education	1,528,759	196,364	1,725,123
Reproductive health and HIV services	1,481,804	-	1,481,804
Access to energy	73,134	-	73,134
Basic and domestic items	929,157	8,507,324	9,436,481
Sanitation and hygiene	529,963	203,287	733,250
Services for persons with specific needs	897,511	483,578	1,381,089
Shelter and infrastructure	829,511	12,484,699	13,314,210
Water	667,062	203,287	870,349
Community Empowerment and Self Reliance	2,762,936	410,131	3,173,067
Community mobilization strengthened	480,302	199,826	680,128
Peaceful co-existence	1,152,234	210,305	1,362,539
Self reliance and livelihoods	1,130,400	-	1,130,400
Durable Solutions	2,633,617	329,970	2,963,587
Voluntary return	2,559,232	329,970	2,889,202
Local Integration	74,385	-	74,385
Fair Protection Processes and Documentation	852,595	828,113	1,680,708
Access to and quality of status determination procedures	190,397	-	190,397
Civil status documentation	207,575	223,143	430,718
Level of individual documentation	381,489	98,182	479,671
Registration and profiling	-	506,788	506,788
Reception Conditions improved	73,134	-	73,134
Favourable Protection Environment	596,860	1,304,496	1,901,356
Access to legal assistance and legal remedies	475,195	547,927	1,023,122
Access to the territory improved and risk of refoulement reduced	-	756,569	756,569
Administrative institutions and practice developed	121,665	-	121,665
Leadership, Coordination and Partnerships	605,919	4,756,056	5,361,975
Camp management and coordination	3,844	4,638,107	4,641,951
Coordination and partnerships	602,075	117,949	720,024

Logistics and Operations Support	4,269,918	2413,073	6,682,991
Logistics and supply	2,138,591	377,840	2,516,431
Programme management, coordination and support	2,131,327	2,035,233	4,166,560
Security from Violence and Exploitation	2,299,467	16,379,120	18,678,587
Protection from effects of armed conflict strengthened	417,717	11,292,065	11,709,782
Risk of SGBV reduced	1,380,687	5,087,055	6,467,742
Protection of Children	501,063	-	501,063
Subtotal	24,495,673	48,499,498	72,995,171
Support Costs (7%)		3,394,965	3,394,965
TOTAL			76,390,136

Financial requirements for Cameroon

Objective	EXCOM budget related to the CAR Refugee Situation	Additional Requirements (USD)	TOTAL
Basic Needs and Services	6,927,257	29,426,140	36,353,396
Food security	211,730	970,108	1,181,839
Health	1,451,996	3,331,873	4,783,868
Nutrition	637,680	1,989,878	2,627,557
Education	1,677,046	2,121,365	3,798,411
Reproductive health and HIV services	734,918	898,157	1,633,075
Access to energy	-	604,583	604,583
Basic and domestic items	423,429	5,885,146	6,308,575
Sanitation and hygiene	465,667	2,550,047	3,015,713
Services for persons with specific needs	249,213	819,011	1,068,224
Shelter and infrastructure	-	7,262,143	7,262,143
Water	1,075,578	2,993,829	4,069,408
Community Empowerment and Self Reliance	4,006,387	2,480,109	6,486,496
Community mobilization strengthened	377,144	446,598	823,742
Natural resources and shared environment	-	681,018	681,018
Peaceful co-existence	97,798	242,255	340,053
Self-reliance and livelihoods	3,531,445	1,110,238	4,641,683
Durable Solutions	1,056,858	-	1,056,858
Integration	79,595	-	79,595
Voluntary return	977,263	-	977,263
Fair Protection Processes and Documentation	491,428	6,412,522	6,903,951
Access to and quality of status determination procedures	-	370,820	370,821
Civil status documentation	267,694	199,850	467,544
Family re-unification	-	150,206	150,206
Level of individual documentation	223,734	401,351	625,085
Registration and profiling	-	4,360,209	4,360,209
Reception conditions	-	930,086	930,086
Favourable Protection Environment	255,242	925,031	1,180,273
Access to legal assistance and legal remedies	153,192	325,234	478,426

TOTAL			72,131,254
Support Costs (7%)		3,601,581	3,601,581
Subtotal	17,078,516	51,451,157	68,529,673
Risk of SGBV reduced	211,688	1,303,623	1,515,311
Protection of children	244,970	584,495	829,465
Protection from effects of armed conflict strengthened	-	1,627,282	1,627,282
Security from Violence and Exploitation	456,658	3,515,400	3,972,058
Programme management, coordination and support	2,845,917	5,499,761	8,345,678
Logistics and supply	803,914	2,108,538	2,912,452
Logistics and Operations Support	3,649,831	7,608,299	11,258,130
Emergency management	-	132,038	132,038
Coordination and partnerships	234,855	· -	234,855
Camp management and coordination	-	951,618	951,618
Leadership, Coordination and Partnerships	234,855	1,083,656	1,318,511
Public attitude towards persons of concern	-	146,069	146,069
Administrative institutions and practice developed	102,050	-	102,050
Access to the territory improved and risk of refoulement reduced	-	453,728	453,728

Financial requirements for Chad

Objective	EXCOM budget related to the CAR Refugee Situation	Additional Requirements (USD)	TOTAL
Basic Needs and Services	5,365,435	14,699,942	20,065,377
Food security	136,682	601,580	738,262
Health	1,552,458	1,089,134	2,641,592
Nutrition	340,825	-	340,825
Education	696,633	4,508,374	5,205,007
Reproductive health and HIV services	274,401	488,028	762,429
Access to energy	302,564	119,341	421,905
Basic and domestic items	702,564	3,501,633	4,204,197
Sanitation and hygiene	460,648	1,166,337	1,626,985
Services for persons with specific needs	125,532	1,185,127	1,310,659
Shelter and infrastructure	377,564	1,503,827	1,881,391
Water	395,564	536,560	932,124
Community Empowerment and Self Reliance	1,022,641	7,804,810	8,827,451
Community mobilization strengthened	-	234,225	234,225
Natural resources and shared environment	202,564	1,503,859	1,706,423
Peaceful co-existence	-	995,697	995,697
Self reliance and livelihoods	820,077	5,071,029	5,891,106
Durable Solutions	-	44,975	44,975
Integration		44,975	44,975
Fair Protection Processes and Documentation	387,564	476,531	864,095
Civil status documentation	170,851	376,556	547,407
Reduction of statelessness	-	52,488	52,488

TOTAL			38,073,768
Support Costs (7%)		1,934,830	1,934,830
Subtotal	8,498,507	27,640,431	36,138,938
Risk of SGBV reduced	188,414	-	188,414
Protection of children	179,250	50,962	230,212
Protection from effects of armed conflict strengthened	101,582	-	101,582
Security from Violence and Exploitation	469,246	50,962	520,207
Programme management, coordination and support	234,047	2,214,613	2,448,660
Logistics and supply	903,846	1,688,810	2,592,656
Logistics and Operations Support	1,137,893	3,903,423	5,041,316
Donor relations and resource mobilization		91,175	91,175
Camp management and coordination		124,225	124,225
Leadership, Coordination and Partnerships	-	215,400	215,400
Access to the territory improved and risk of refoulement	-	71,140	71,140
Access to legal assistance and legal remedies	115,728	373,249	488,977
Favourable Protection Environment	115,728	444,388	560,116
Registration and profiling	72,488	-	72,488
Level of individual documentation	144,225	-	144,225
Identification of statelessness	-	47,488	47,488

Financial requirements for the Democratic Republic of the Congo

Objective	EXCOM budget related to the CAR Refugee Situation	Additional Requirements (USD)	TOTAL
Basic Needs and Services	17,176,721	10,396,254	27,572,975
Food security	1,098,885	126,615	1,225,500
Health	3,151,951	1,758,789	4,910,739
Nutrition	977,933	1,100,806	2,078,738
Education	1,083,293	830,002	1,913,295
Reproductive health and HIV services	1,012,951	1,545,528	2,558,479
Basic and domestic items	1,133,553	924,830	2,058,383
Sanitation and hygiene	1,904,339	392,566	2,296,905
Services for persons with specific needs	578,957	307,755	886,713
Shelter and infrastructure	3,818,466	2,419,167	6,237,632
Water	2,416,395	990,196	3,406,591
Community Empowerment and Self Reliance	3,174,419	3,111,536	6,285,955
Community mobilization strengthened	347,341	393,311	740,651
Natural resources and shared environment	385,789	236,177	621,966
Peaceful co-existence	550,899	571,067	1,121,966
Self reliance and livelihoods	1,890,390	1,910,982	3,801,372
Durable solutions	-	827,590	827,590
Voluntary return	-	827,590	827,590
Fair Protection Processes and Documentation	1,768,426	843,577	2,612,004
Civil status documentation	159,770	122,195	281,966

Level of individual documentation	194,770	167,195	361,966
Registration and profiling	1,256,866	399,981	1,656,847
Reception conditions	157,020	154,205	311,226
Favourable Protection Environment	469,311	214,362	683,673
Access to legal assistance and legal remedies	-	82,590	82,590
Access to the territory improved and risk of refoulement	469,311	131,772	601,083
Leadership, Coordination and Partnerships	1,021,221	680,311	1,701,532
Camp management and coordination	386,910	398,695	785,606
Donor relations and resource mobilization	634,311	281,615	915,926
Logistics and Operations Support	9,170,676	2,453,508	11,624,184
Logistics and supply	5,903,165	2,294,673	8,197,838
Programme management, coordination and support	3,267,511	158,834	3,426,345
Security from Violence and Exploitation	3,392,141	1,885,015	5,277,156
Protection from crime	509,257	417,005	926,262
Protection from effects of armed conflict strengthened	669,365	540,101	1,209,466
Protection of children	587,450	151,197	738,646
Risk of SGBV reduced	1,626,070	776,712	2,402,783
Subtotal	36,172,915	20,412,154	56,585,069
Support Costs (7%)		1,428,851	1,428,851
TOTAL			58,013,920

Financial requirements for the Congo

Objective	Portion of the EXCOM approved budget dedicated to the Central African Refugees Situation	Additional Requirements (USD)	TOTAL
Basic Needs and Services	<u>-</u>	4,303,907	4,303,907
Food security		324,679	324,679
Health		1,564,974	1,564,974
Nutrition		64,294	64,294
Education		377,300	377,300
Basic and domestic items		626,615	626,615
Sanitation and hygiene		421,504	421,504
Services for persons with specific needs		163,067	163,067
Shelter and infrastructure		586,622	586,622
Water		174,851	174,851
Community Empowerment and Self Reliance	-	1,006,505	1,006,505
Community mobilization strengthened		204,712	204,712
Self-reliance and livelihoods		801,793	801,793
Fair Protection Processes and Documentation	-	501,799	501,799
Level of individual documentation		57,159	57,159
Registration and profiling		444,639	444,639
Logistics and Operations Support	-	1,176,950	1,176,950
Logistics and supply		715,813	715,813
Programme management, coordination and		461,137	461,137

support			
Security from Violence and Exploitation	-	882,455	882,455
Protection from crime		226,754	226,754
Risk of SGBV reduced		655,700	655,700
Subtotal	-	7,871,615	7,871,615
Support Costs (7%)		551,013	551,013
TOTAL			8,422,628