

**Emergency Response for
the Central African Republic Situation**

Revised Supplementary Appeal



Donor Relations and Resource Mobilization Service
May 2014

Cover photograph:

Dieudonné, a father of six, lives with his family in Batanga village, in the DRC. They are sheltering Cecile, who has fled the conflict in the Central African Republic with her children.

Information at a glance

Targeted beneficiaries January– December 2014	<ul style="list-style-type: none"> ⇒ Up to 600,000¹ internally displaced people (IDPs) in the Central African Republic (CAR) ⇒ Up to 234,000 refugees in Cameroon, Chad, Congo and the Democratic Republic of the Congo (DRC).
Total requirements January – December 2014	<ul style="list-style-type: none"> ⇒ USD 239 million (including 7% support costs) <ul style="list-style-type: none"> ○ USD 72.9 million* for the Central African Republic ○ USD 38.2 million* for Cameroon ○ USD 36.1 million* Chad ○ USD 5.2 million* for the Congo ○ USD 75.5 million* for the Democratic Republic of the Congo ○ USD 1.1 million* for Headquarters <p>* excluding support costs (see also page 8)</p>
Main activities	<ul style="list-style-type: none"> ⇒ Leadership and coordination of the protection cluster, co-leadership 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 ⇒ Leadership and coordination of the refugee response in surrounding countries of asylum for refugees arriving from 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 ⇒ Provision of access to education as an essential protection strategy ⇒ Site management, coordination and monitoring in displacement sites in CAR and the four countries, Cameroon, Chad, Congo and the DRC ⇒ Provision of shelter and basic non-food items (NFIs) to IDPs and refugees in the CAR, and to refugees in surrounding countries ⇒ 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 in Cameroon ⇒ Registration and documentation of refugees in countries of asylum ⇒ Provision of basic services such as education, water and sanitation and health in refugee sites

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.

CONTEXT

Since the upsurge of violence in December 2013 in CAR, as of 15 May 2014, over 560,050 Central Africans have been displaced internally, and 120,000 people have fled into Cameroon, Chad, Congo and the DRC. At the peak of the crisis, in January 2014, the total number of IDPs reached 922,000, close to a quarter of the total population in the country.

In response to this emergency, UNHCR initially published a three-month emergency appeal (covering requirements from January to March 2014) to appeal for the funds necessary to support IDPs in the CAR, and refugees in the neighbouring countries.

An inter-agency Regional Response Plan for the Central African Republic was released on 16 April 2014, to cater for the needs of the population affected by the crisis inside the CAR, covering the period from January to December 2014.

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 inter-agency appeal (RRP). In addition, it includes the budgetary requirements for activities targeting IDPs within CAR.

Population data as of 15 May

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

CAR	
▪ DPs (source OCHA)	560,050
▪ Refugees	10,667
CAR refugees and TCN	
▪ Cameroon	84,004
▪ Chad	14,900
▪ DRC	13,788
▪ Congo	9,680
Total CAR refugees and TCN displaced since 5 December 2013	122,372

The number of third country nationals is estimated at 900 people in Chad and 1,000 in Congo.

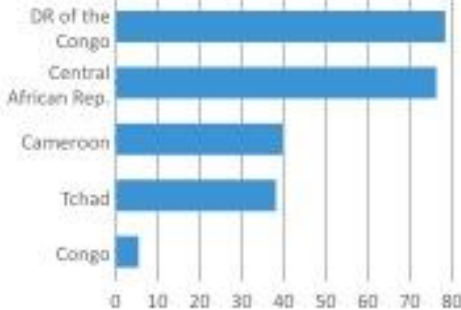
REGIONAL RESPONSE DASHBOARD

as of 15 May 2014

Requirements

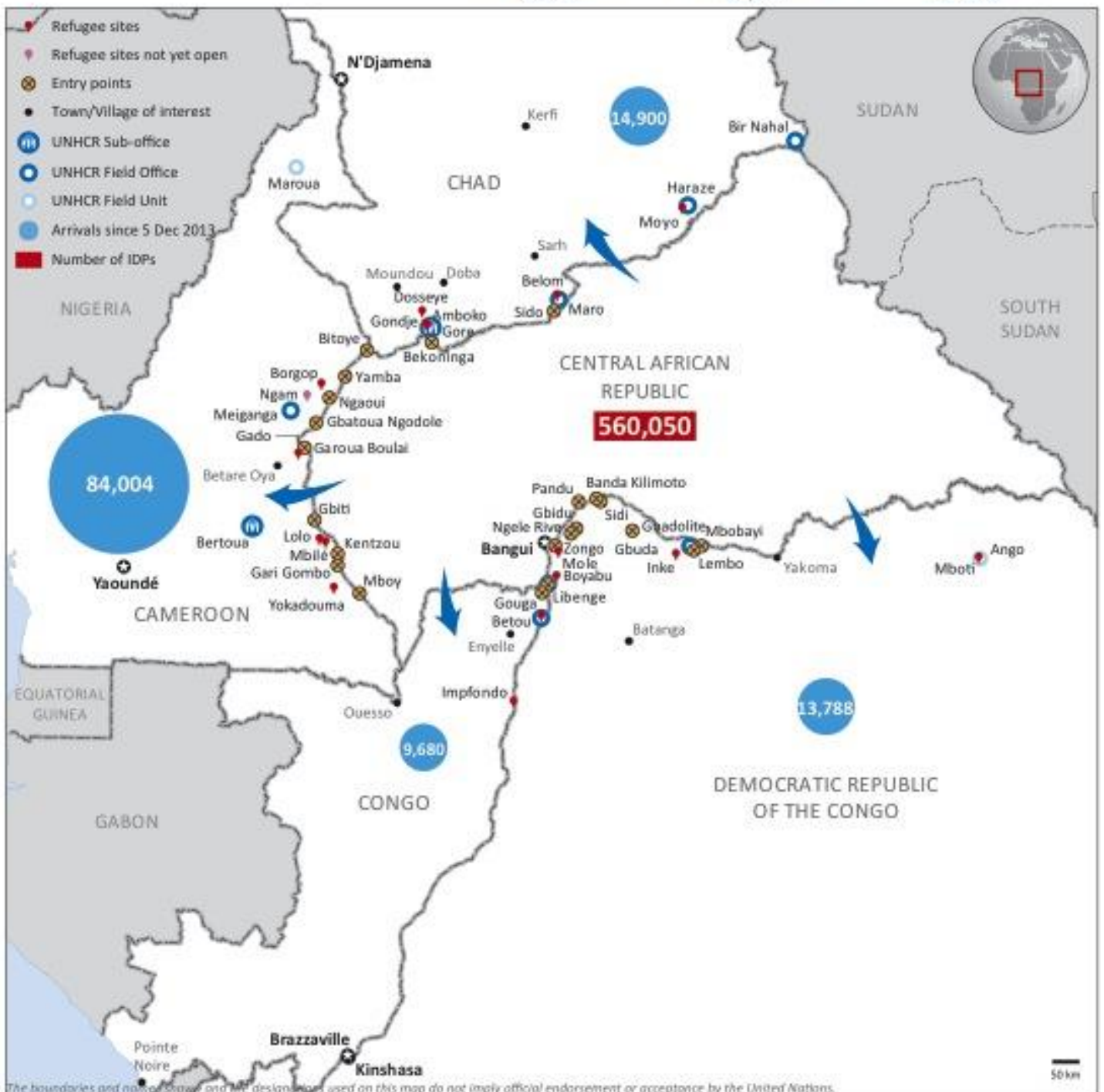
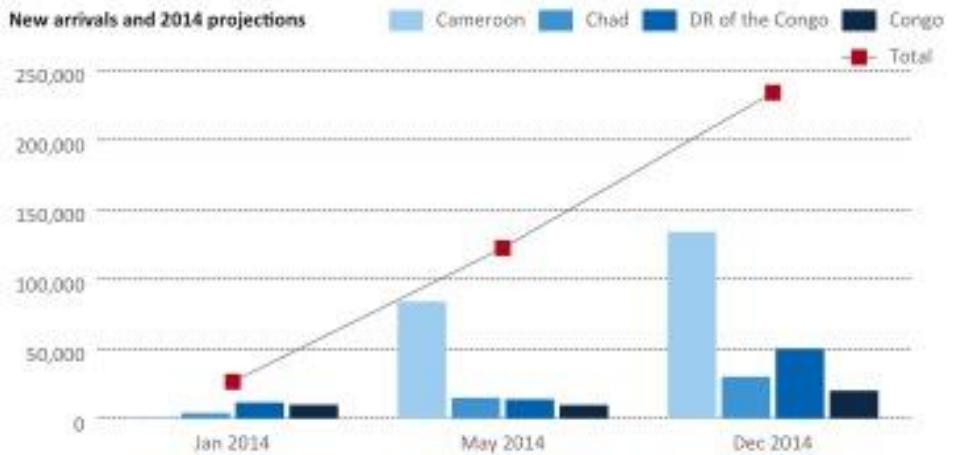
239 million requested in total

Requirements (In million US\$)



Population trends

New arrivals and 2014 projections



The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations.
 Creation date: 22 May 2014 Sources: UNHCR, UNCS Feedback: mapping@unhcr.org

Overview

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 CAR's the entire population have been internally displaced. At the peak of the unrest, there were more than 935,000 IDPs counted in the CAR. Intercommunal conflict and serious human rights violations have led to multiple pockets 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. Displacement figures are expected to continue to fluctuate, possibly rising again until lasting peace is found. UNHCR is preparing to provide 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 CAR, mainly from the DRC and Sudan. The refugee figure has dropped, due to the voluntary repatriation of more than 6,000 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 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 mid-May 2014, UNHCR had registered more than 84,000 CAR refugees in Cameroon. The rate of influx during February-March was about 4,000 per week and the health and nutrition status of the refugees remains alarming.

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 Muslim. To address this emergency, the Government of Cameroon, in collaboration with UNHCR, has made six refugee sites available - four in the east of the country and two in Adamaoua region. These sites are located in forest areas, making their preparation difficult and requiring the use of heavy machinery. New arrivals have access to existing community services with most settled in temporary communal shelters, while some are hosted by families. 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 multi-sectoral 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 CAR, Chad has experienced an influx of refugees, Chadian returnees and third-country nationals (TNC).

Returnees

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 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 14,000 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.

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 8,700 have been registered since December 2013. It is estimated that in total some 20,000 refugees will have arrived in 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 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 about 1,000 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 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

By mid-May 2014, almost 13,800 refugees had arrived in the DRC, and it is estimated that a total of 50,000 refugees will have arrived by year-end. The response is based on a planning figure of half of this number settling in camps and the other half in host communities.

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 via 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 Oriental 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 Oriental 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)

OPERATION	EXCOM budget without the CAR refugee situation component	CENTRAL AFRICAN REPUBLIC SITUATION			TOTAL revised requirements
		EXCOM budget related to CAR refugee situation	Additional requirements	TOTAL	
Central African Republic	-	24,355,141	48,499,498	72,854,639	72,854,639
Cameroon	7,932,021	17,078,515	21,133,197	38,211,712	46,143,733
Chad	188,571,004	8,498,504	27,640,433	36,138,937	224,709,941
Congo	29,948,467	-	5,194,500	5,194,500	35,142,967
Democratic Republic of the Congo	140,797,065	36,172,915	39,329,601	75,502,516	216,299,581
Headquarters and Coordination	11,153,923	-	1,141,812	1,141,812	12,295,735
TOTAL	378,402,479	86,105,075	142,939,041	229,044,116	607,446,596
Support costs (7%)			10,005,733	10,005,733	10,005,733
GRAND TOTAL	378,402,479	86,105,075	152,944,774	239,049,849	617,452,329

CENTRAL AFRICAN REPUBLIC

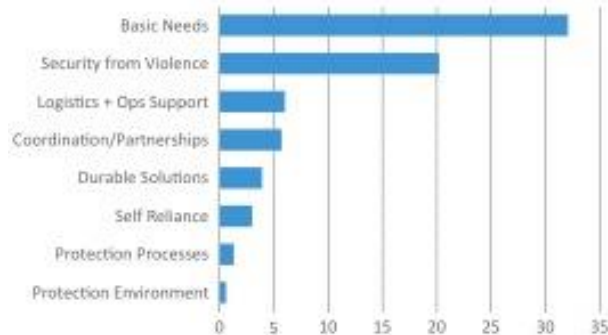
CENTRAL AFRICAN REPUBLIC RESPONSE DASHBOARD

as of 15 May 2014

Requirements

76.2 million requested in total

Requirements (in million US\$)



Population trends

New IDPs and 2014 projections



Leadership and coordination

UNHCR is coordinating the responses to the needs of some 600,000 IDPs in 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 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.

Through protection monitoring, populations in life-threatening situations. In cooperation with the authorities, UNHCR and other members of the cluster evacuated populations whose lives were in immediate danger. Other protection measures include:

- Advocate and enhance protection by presence / escorts 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 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 prefectures of CAR, 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 to support 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 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

By 15 May, the total number of IDPs was estimated at more than 560,000 people, 135,000 of whom are in Bangui. In Bangui, the IDPs live in 42 displacement sites; the 10 most populated ones accommodate about 70 per cent of the IDP community. The largest site located next to the M'Poko international airport hosts more than 57,000 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, as far 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 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 a further 45,000 households in addition to the 60,000 households identified in the first appeal released in early 2014) as an indicative beneficiary target for 2014 (subject to further consultations within the humanitarian community as well as the evolving emergency). 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 CAR, limiting access to the affected populations, staff security and logistics.

Planned Response	Activities
Protection	<ul style="list-style-type: none"> ◦ 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 great need for the provision of services such as specialized mental health care and psychosocial support. ◦ Development of standard operating procedures (SOPs) for referral mechanisms.
Response to sexual and gender-based violence (SGBV)	<ul style="list-style-type: none"> ◦ 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	<ul style="list-style-type: none"> ◦ 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	<ul style="list-style-type: none"> ◦ 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	<ul style="list-style-type: none"> ◦ Emergency shelter for 512,500 people. ◦ Adequate provision for temporary learning spaces.
Community mobilization	<ul style="list-style-type: none"> ◦ (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	<ul style="list-style-type: none"> ◦ 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	<ul style="list-style-type: none"> ◦ 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	<ul style="list-style-type: none"> ◦ Supply of goods, transport, handling, distributions for 512,500 people.
Operation management, coordination and support	<ul style="list-style-type: none"> ◦ Operational support to partner agencies, mainly protection partners in the form of assets, field bases, air movement of staff etc.

CAMEROON

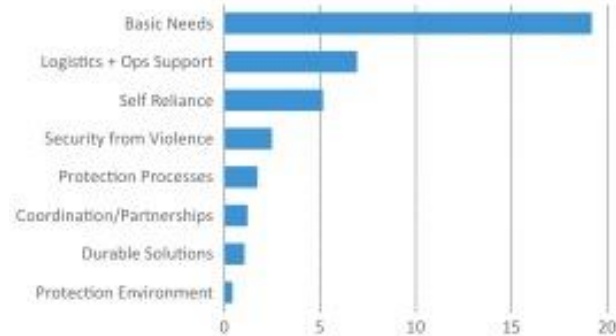
CAMEROON RESPONSE DASHBOARD

as of 15 May 2014

Requirements

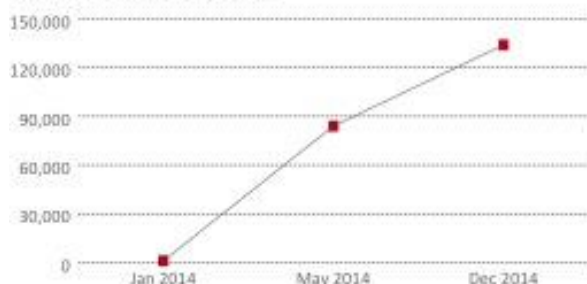
39.7 million requested in total

Requirements (In million US\$)



Population trends

New arrivals and 2014 projections



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

UNHCR works together with partners already involved in the programme for previous CAR caseloads, having the required expertise and capacity. 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 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 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. There is specific need to strengthen child protection systems 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 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 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 due 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 were 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 arrive with no belongings and basic means, and 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	<ul style="list-style-type: none"> ◦ Provide protection and security to refugees from Central African Republic, together with the Government. ◦ Monitor border crossings and continue advocacy for access to asylum and to prevent <i>refoulement</i> with the Cameroonian authorities. ◦ 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	<ul style="list-style-type: none"> ◦ 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)	<ul style="list-style-type: none"> ◦ Procure, transport and distribute NFIs to refugees in the sites and for the most vulnerable at the entry points.

Water, Sanitation and Hygiene (WASH)	<ul style="list-style-type: none"> ◦ 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	<ul style="list-style-type: none"> ◦ 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	<ul style="list-style-type: none"> ◦ 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	<ul style="list-style-type: none"> ◦ 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	<ul style="list-style-type: none"> ◦ 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,

	<p>management and marketing specifically for women.</p> <ul style="list-style-type: none"> Provide seeds, basic equipment and hand tools (machetes, hoes, wheelbarrows). Provide revolving funds to support 5,000 refugee women's economic activities.
Social cohesion	<ul style="list-style-type: none"> 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	<ul style="list-style-type: none"> 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 convoys/missions.

CHAD

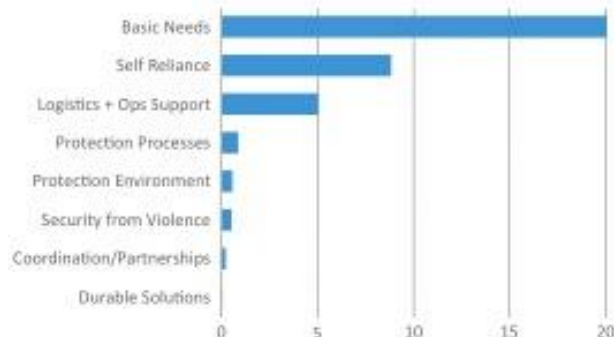
CHAD RESPONSE DASHBOARD

as of 15 May 2014

Requirements

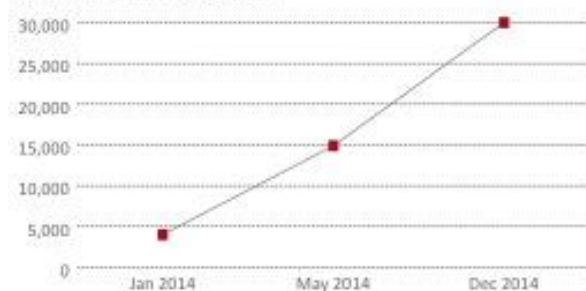
38.1 million requested in total

Requirements (in million US\$)



Population trends

New arrivals and 2014 projections



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 April, some 4,000 refugees had been relocated to Dosseye camp in the south of the country since January 2014.

The shelter and CCCM cluster

The Shelter/CCCM was been activated in Chad at the beginning of May upon the agreement of the HCT. The Cluster will be led by UNHCR and co-led by IOM for a period of 6 months. It will allow for a better coordination in these two important inter-related areas and is seen as essential in ensuring the necessary increase in delivery and maximizing 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, 570 shelters (150 tents, 400 shelters made of plastic sheeting and 20 brick-made shelters) are already accommodating 2,387 returnees (544 households). The second site in Maingama is currently being cleared.

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, 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, among 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 CAR could spill over and become a threat to national security in Chad. In camps, it will be important to prevent the perpetuation of perceived religious divided. It is possible that ex-combatants are among the arriving Chadian returnees and CAR refugees. 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.

Main challenges and identified needs

Planned Response	Activities
Registration/Documentation	<ul style="list-style-type: none"> ◦ Registration of refugees and returnees on arrival. ◦ Provision of proper documentation to assure access social services and to prevent statelessness.
Site planning	<ul style="list-style-type: none"> ◦ Establishment of new camp sites in Danamadja and Maigama.
Protection of children	<ul style="list-style-type: none"> ◦ 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	<ul style="list-style-type: none"> ◦ Strengthening of peace building initiatives to enhance peaceful co-existence between various population groups.
Health	<ul style="list-style-type: none"> ◦ 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.

	<ul style="list-style-type: none"> Provision of enhanced coverage for measles vaccination targeting 6-59 months old children is a priority at entry points and in host communities.
Education	<ul style="list-style-type: none"> 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)	<ul style="list-style-type: none"> Construction and strengthen water supply and sanitation infrastructure.
SGBV	<ul style="list-style-type: none"> Provision of legal, medical and psychological assistance to SGBV survivors. Conduct awareness-raising sessions on SGBV, prevention and response mechanisms.

CONGO

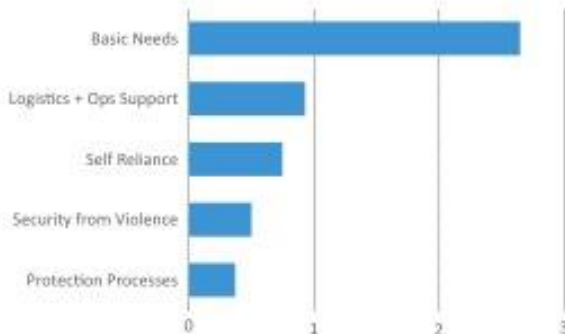
CONGO RESPONSE DASHBOARD

as of 15 May 2014

Requirements

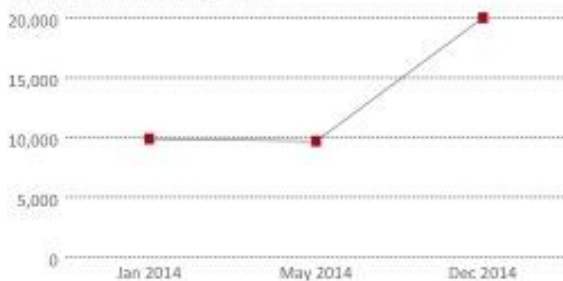
5.5 million requested in total

Requirements (in million US\$)



Population trends

New arrivals and 2014 projections



The first influx of refugees from the CAR into Congo began in March 2013. Since December 2013 some 8,680 Central African refugees have been registered and recognized on a prima facie basis. The main population is located in Betou, in the East-Northern border, while smaller groups are settled in Brazzaville and Impfondo. In Congo, UNHCR coordinates the response to the influx of CAR refugees and actively work on strengthening the inter-agency cooperation and complementarity, including with the 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 living in localities close to the border and 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. A special focus will be made on raising awareness of the requirements of refugee population on civil registration and especially birth registration. Peaceful co-existence between refugees and the host community and between refugees of different religions will also be the focus of the operation.

Committees established to address SGBV will be strengthened in prevention and response within communities aimed to improve 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 the 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 attention to implement appropriate vocational activities, support attendance to secondary and tertiary education 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	<ul style="list-style-type: none"> ◦ 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 raising campaigns targeting 4,000 children and 3,000 women and men.
Shelter/Infrastructure	<ul style="list-style-type: none"> ◦ Construct 10 temporary community shelters for 1,000 new arrivals. ◦ Construct 1,400 shelters for 5,200 refugees living in the sites. ◦ Rehabilitate 100 shelters for the more vulnerable refugees households.
Non-Food Items (NFIs)	<ul style="list-style-type: none"> ◦ 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)	<ul style="list-style-type: none"> ◦ Provide 15 litres/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.

	<ul style="list-style-type: none"> Conduct awareness campaigns for the promotion of hygiene.
Health/Nutrition	<ul style="list-style-type: none"> 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	<ul style="list-style-type: none"> Distribute of a full ration of nutritional foods to refugees.
Education	<ul style="list-style-type: none"> 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	<ul style="list-style-type: none"> Maintain vehicle fleet in adequate condition. Purchase and procure fuel and supplies.
Self-reliance/livelihood	<ul style="list-style-type: none"> 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	<ul style="list-style-type: none"> 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.

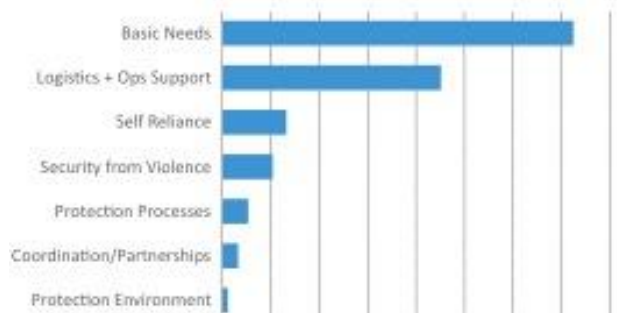
DEMOCRATIC REPUBLIC OF THE CONGO RESPONSE DASHBOARD

as of 15 May 2014

Requirements

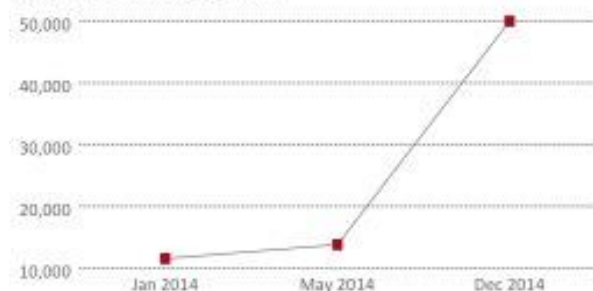
78.3 million requested in total

Requirements (in million US\$)



Population trends

New arrivals and 2014 projections



The DRC, which hosts over 57,600 refugees from the CAR, of whom 13,800 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 inter-agency cooperation and complementarity, including with the NGOs and the Government. Coordination meetings led by the 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-up 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 support the National Commission of Refugees to 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 Commission CNR, will continue to implement sensitization campaigns focusing on peaceful coexistence, led by heads of local communities and traditional chiefs.

Planned Response	Activities
Protection	<ul style="list-style-type: none"> ◦ 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	<ul style="list-style-type: none"> ◦ Launch four sensitization campaigns for peaceful co-existence. ◦ Conduct four participatory assessments. ◦ Support sectoral community groups.
Shelter/Infrastructure	<ul style="list-style-type: none"> ◦ Construct and maintain 10 kilometres of access roads. ◦ Construct 1,250 transitional shelters for persons with specific needs. ◦ Provide 5,000 shelter construction kits in camps.
Non-Food Items	<ul style="list-style-type: none"> ◦ 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)	<ul style="list-style-type: none"> ◦ Distribute Aquatab/Pur tablets to 25,000 refugees in the host community. ◦ Construct and rehabilitate water points for 25,000 refugees.

	<ul style="list-style-type: none"> ◦ 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	<ul style="list-style-type: none"> ◦ 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 ◦ Treat severe malnutrition for 4,055 children aged 6-59 months. ◦ Distribute nutritional food to 6,000 pregnant and lactating women in the camps and refugee host communities.
Food	<ul style="list-style-type: none"> ◦ 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

	<p>and good nutritional practices.</p> <ul style="list-style-type: none"> ◦ 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	<ul style="list-style-type: none"> ◦ 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	<ul style="list-style-type: none"> ◦ 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	<ul style="list-style-type: none"> ◦ 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	<ul style="list-style-type: none"> ◦ 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 617.5 million** including additional requirements of **USD 239 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	10,601,207	21,470,830	32,072,037
Food security	655,069	-	655,069
Health	2,315,614	-	2,315,614
Nutrition	851,200	-	851,200
Education	1,528,759	-	1,528,759
Reproductive health and HIV services	1,844,633	-	1,844,633
Access to energy	481,884	-	481,884
Basic and domestic items	-	9,107,964	9,107,964
Sanitation and hygiene	529,963	-	529,963
Services for persons with specific needs	897,511	133,648	1,031,159
Shelter and infrastructure	829,511	12,229,218	13,058,730
Water	667,062	-	667,062
Community Empowerment and Self Reliance	3,000,825	-	3,000,825
Community mobilization strengthened	480,302	-	480,302
Peaceful co-existence	1,152,234	-	1,152,234
Self reliance and livelihoods	1,368,289	-	1,368,289
Durable Solutions	2,712,854	1,206,545	3,919,399
Integration	153,622	-	153,622
Voluntary return	2,559,232	1,206,545	3,765,777
Fair Protection Processes and Documentation	868,381	445,494	1,313,875
Access to and quality of status determination procedures	193,859	-	193,859
Civil status documentation	207,575	124,961	332,536
Level of individual documentation	381,489	-	381,489
Registration and profiling	-	320,533	320,533
Reception conditions	85,458	-	85,458
Favourable Protection Environment	600,321	-	600,321
Access to legal assistance and legal remedies	475,195	-	475,195
Administrative institutions and practice developed	125,126	-	125,126
Leadership, Coordination and Partnerships	605,919	5,105,248	5,711,168
Camp management and coordination	3,844	5,105,248	5,109,093
Coordination and partnerships	602,075	-	602,075
Logistics and Operations Support	4,269,918	1,750,156	6,020,074
Logistics and supply	2,138,591	-	2,138,591

Programme management, coordination and support	2,131,327	1,750,156	3,881,483
Security from Violence and Exploitation	1,695,718	18,521,224	20,216,942
Protection from effects of armed conflict strengthened	-	12,742,365	12,324,648
Protection of children	417,717	-	732,748
Risk of SGBV reduced	732,748	5,778,859	7,159,546
Subtotal	24,355,143	48,499,497	72,854,640
Support Costs (7%)		3,394,965	3,394,965
TOTAL			76,249,605

Financial requirements for Cameroon

Objective	EXCOM budget related to the CAR Refugee Situation	Additional Requirements (USD)	TOTAL
Basic Needs and Services	6,927,257	12,264,183	19,191,440
Food security	211,730	609,311	821,041
Health	1,451,996	1,937,180	3,389,176
Nutrition	637,680	1,055,772	1,693,452
Education	1,677,046	270,703	1,947,749
Reproductive health and HIV services	734,918	249,236	984,154
Access to energy	-	309,417	309,417
Basic and domestic items	423,429	1,507,331	1,930,760
Sanitation and hygiene	465,667	1,077,311	1,542,978
Services for persons with specific needs	249,213	345,927	595,140
Shelter and infrastructure	-	3,297,045	3,297,045
Water	1,075,578	1,604,949	2,680,527
Community Empowerment and Self Reliance	4,006,387	1,148,464	5,154,851
Community mobilization strengthened	377,144	223,438	600,583
Natural resources and shared environment	-	589,774	589,774
Peaceful co-existence	97,798	67,091	164,889
Self reliance and livelihoods	3,531,445	268,161	3,799,605
Durable Solutions	1,056,858	-	1,056,858
Integration	79,595	-	79,595
Voluntary return	977,262	-	977,262
Fair Protection Processes and Documentation	491,428	1,245,179	1,736,607
Access to and quality of status determination procedures	-	72,262	72,262
Civil status documentation	223,684	76,399	300,083
Family re-unification	-	72,262	72,262
Level of individual documentation	74,010	169,208	243,218
Registration and profiling	193,734	520,021	713,756
Reception conditions		335,026	335,026
Favourable Protection Environment	255,241	172,645	427,886
Access to legal assistance and legal remedies	153,192	46,763	199,954
Access to the territory improved and risk of <i>refoulement</i>	-	113,182	113,182
Administrative institutions and practice developed	102,050	-	102,050
Public attitude towards persons of concern		12,700	12,700

Leadership, Coordination and Partnerships	234,855	982,206	1,217,061
Camp management and coordination	-	913,150	913,150
Coordination and partnerships	234,855	-	234,855
Emergency management	-	69,056	69,056
Logistics and Operations Support	3,649,831	3,288,839	6,938,670
Logistics and supply	803,914	1,486,856	2,290,769
Programme management, coordination and support	2,845,917	1,801,983	4,647,901
Security from Violence and Exploitation	456,658	2,031,681	2,488,339
Protection from effects of armed conflict strengthened		1,210,018	1,210,018
Protection of children		352,647	352,647
Risk of SGBV reduced	244,970	469,016	713,986
Risks related to detention reduced	211,688	-	211,688
Subtotal	17,078,515	21,133,197	38,211,712
Support Costs (7%)		1,479,324	1,479,324
TOTAL			39,691,036

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
Identification of statelessness	-	47,488	47,488
Level of individual documentation	144,225	-	144,225
Registration and profiling	72,488	-	72,488

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

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	19,053,318	36,230,039
Food security	1,098,885	862,698	1,961,583
Health	3,151,951	4,122,191	7,274,141
Nutrition	977,933	480,480	1,458,412
Education	1,083,293	850,729	1,934,021
Reproductive health and HIV services	1,012,951	358,972	1,371,922
Basic and domestic items	1,133,553	2,142,639	3,276,192
Sanitation and hygiene	1,904,339	1,300,314	3,204,653
Services for persons with specific needs	578,957	596,960	1,175,917
Shelter and infrastructure	3,818,466	5,132,421	8,950,886
Water	2,416,395	3,205,917	5,622,311
Community Empowerment and Self Reliance	3,174,419	3,435,197	6,609,616
Community mobilization strengthened	347,341	331,943	679,284
Natural resources and shared environment	385,789	330,633	716,422
Peaceful co-existence	550,899	565,523	1,116,422
Self reliance and livelihoods	1,890,390	2,207,098	4,097,488
Fair Protection Processes and Documentation	1,768,426	907,661	2,676,087
Civil status documentation	159,770	102,272	262,042
Level of individual documentation	194,770	147,272	342,042
Registration and profiling	1,256,866	534,596	1,791,461
Reception conditions	157,020	123,522	280,542
Favourable Protection Environment	469,311	102,272	571,583
Access to the territory improved and risk of refoulement	469,311	102,272	571,583

Leadership, Coordination and Partnerships	1,021,221	617,403	1,638,625
Camp management and coordination	386,910	365,132	752,042
Donor relations and resource mobilization	634,311	252,272	886,583
Logistics and Operations Support	9,170,676	13,393,845	22,564,521
Logistics and supply	5,903,165	10,526,709	16,429,874
Programme management, coordination and support	3,267,511	2,867,136	6,134,647
Security from Violence and Exploitation	3,392,141	1,819,905	5,212,046
Protection from crime	509,257	347,556	856,812
Protection from effects of armed conflict strengthened	669,365	688,636	1,358,001
Protection of children	587,450	197,272	784,721
Risk of SGBV reduced	1,626,070	586,442	2,212,512
Subtotal	36,172,915	39,329,601	75,502,516
Support Costs (7%)		2,753,072.07	2,753,072
TOTAL			78,255,588

Financial requirements for Congo

Objective	Portion of the EXCOM approved budget dedicated to the Central African Refugees Situation	Additional Requirements (USD)	TOTAL
Basic Needs and Services	-	2,646,649	2,646,649
Food security		147,279	147,279
Health		870,154	870,154
Nutrition		167,585	167,585
Education		515,647	515,647
Sanitation and hygiene		185,311	185,311
Services for persons with specific needs		100,000	100,000
Shelter and infrastructure		580,103	580,103
Water		80,570	80,570
Community Empowerment and Self Reliance	-	747,044	747,044
Community mobilization strengthened		170,808	170,808
Self-reliance and livelihoods		576,236	576,236
Fair Protection Processes and Documentation	-	370,621	370,621
Registration and profiling		370,621	370,621
Logistics and Operations Support	-	929,041	929,041
Logistics and supply		854,041	854,041
Programme management, coordination and support		75,000	75,000
Security from Violence and Exploitation	-	501,145	501,145
Protection of children		193,368	193,368
Risk of SGBV reduced		307,777	307,777
Subtotal	-	5,194,500	5,194,500
Support Costs (7%)		363,615	363,615
TOTAL			5,558,115