

CENTRAL AFRICAN REPUBLIC

People in need
3.1 million

People targeted
2 million

Requirements
US\$ 11.50 million

Context

The 5.5 million inhabitants of the Central African Republic have confronted a sociopolitical and military crisis for eight years. This has generated a chronic humanitarian crisis, with acute episodes linked to armed conflicts and floods. Many health consequences have resulted linked to the displacement of people, a reduction in the resilience capacity of the health system, and an increase in health risks with numerous epidemic outbreaks of diseases.

As of 30 September 2021, 722 101 Central Africans were displaced in the country, including 179 767 in sites and 542 334 in host families. In 2022, the Health Cluster estimates that 2 million people will need emergency health assistance.

The country also remains under the threat of several disease epidemics, including measles, monkeypox, rabies, malaria, acute bloody or watery diarrhea, bacterial meningitis, Ebola virus disease, and COVID-19. Several risk factors explain this situation such as low vaccination coverage poor living conditions, hygiene, sanitation, and poor access to potable drinking water.

Response strategy

WHO will align its objectives and strategies with those of the Health Cluster while respecting the Organization's emergency response framework. Interventions will support humanitarian partners and/or the Ministry of Health in the priority areas defined by the Health Cluster for the provision of emergency health services to populations. These interventions will focus on the following pillars of the response to crises and epidemics:

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- Leadership and coordination of the Health Cluster.
- Risk communication, community engagement and infodemic management.
- Surveillance, epidemiological investigation, contact tracing, and adjustment of public health and social measures.
- Points of entry, international travel and transport, and mass gatherings.
- Laboratories and diagnostics.
- Infection prevention and control, and protection of the health workforce.
- Case management, clinical operations, and therapeutics.
- Operational support and logistics, and supply chains.
- Maintaining essential health services and systems.
- Vaccination.

Country priorities

- Strengthen the supply of emergency health care to populations affected by a humanitarian shock.
- Improve access to primary and secondary health care for populations affected by a chronic humanitarian crisis.
- Strengthen the response to disease outbreaks.

COVID-19 response

The COVID-19 response priorities will include coordination and planning with the conduct of an intra-action review and strengthening surveillance and laboratory capacities. In addition, it will include prevention and control of infections in care settings, immunization, and risk communication and community engagement. It will also include strengthening severe or critical case management, operational and logistical support, strengthening essential services and the health system, and research.



Overall country funding requirements for emergency response, including COVID-19, by pillar (US\$ million)

Pillars	Emergency response	COVID-19/ACT-A	Total
P1. Leadership, coordination, planning, and monitoring	1.27	0.44	1.71
P2. Risk communication and community engagement	0.24	0.19	0.43
P3. Surveillance, case investigation, and contact tracing	0.50	0.78	1.28
P4. Travel, trade, points of entry and mass gatherings	0.16	0.02	0.18
P5. Diagnostics and testing	0.16	1.07	1.23
P6. Infection prevention and control	0.11	2.17	2.28
P7. Case management and therapeutics	0.45	1.41	1.86
P8. Operational support and logistics	0.45	-	0.45
P9. Essential health systems and services	1.14	-	1.14
P10. Vaccination	0.23	0.71	0.94
Total	4.70	6.80	11.50

For more information

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