

HUMANITARIAN IMPLEMENTATION PLAN (HIP)

CENTRAL AFRICA¹

The full implementation of this version of the HIP is conditional upon the necessary appropriations being made available from the 2018 general budget of the European Union

AMOUNT: EUR 105 300 000

The present Humanitarian Implementation Plan (HIP) was prepared on the basis of the financing decision ECHO/WWD/BUD/2018/01000 (Worldwide Decision) and the related General Guidelines for Operational Priorities on Humanitarian Aid (Operational Priorities). The purpose of the HIP and its annex is to serve as a communication tool for DG ECHO²'s partners and to assist them in the preparation of their proposals. The provisions of the Worldwide Decision and the General Conditions of the Agreement with the European Commission shall take precedence over the provisions in this document. This HIP covers mainly Cameroon, the Central African Republic (CAR) and Chad. It may also respond to sudden or slow-onset new emergencies in Gabon, Equatorial Guinea, Sao Tomé and Príncipe, if significant unmet humanitarian needs emerge, given the exposure to risk and vulnerabilities of populations in these countries.

0. MAJOR CHANGES SINCE PREVIOUS VERSION OF THE HIP

Seventh modification as of 27/11/2018

The repartition of the October additional allocation of EUR 12 000 000 for Chad has to be further adapted to reflect the final selection of projects. The breakdown between Specific Objectives 1 and 2 of the Worldwide Decision (respectively covering man-made crises and natural disasters) has to be adapted as follows, as reflected in the Technical Annex: man-made crises EUR 25 950 000 (previously EUR 24 500 000) and natural disasters EUR 38 550 000 (previously EUR 40 000 000).

Sixth modification as of 08/10/2018

CAR

The crisis inside CAR is constantly deteriorating and subsequently, humanitarian needs are clearly on the rise. Half of the population - some 2.5 million people – is in need of humanitarian aid, which is one of the highest figures in relative terms worldwide. Up to 43% of the population are suffering from acute food insecurity. Access to basic social services is very limited. However, the gap between humanitarian needs and the international response is widening, with the Humanitarian Response Plans funded at only 36% as of October 2018. An additional allocation of EUR 8 000 000 is therefore considered necessary to increase the humanitarian response, addressing acute needs in food assistance, health and multi-sector emergency needs for IDPs and host communities.

Chad and Cameroon

¹ For the purpose of this Humanitarian Implementation Plan, the Central African countries concerned are Cameroon, Central African Republic, Chad, Equatorial Guinea, Gabon, Sao Tomé and Príncipe

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Since February 2018, the situation in the Sahel region has been deteriorating steadily regarding the food and nutrition situation of the population; combining as well effects with other needs resulting from conflicts and forced displacement of populations in Burkina Faso, Mali, Mauritania, Niger, Nigeria, Cameroon and Chad.

In Chad, the food security situation has drastically deteriorated, with a lean season beginning two months earlier than usual. Severe Acute Malnutrition (SAM) remains a public health problem in virtually all regions in the country. In addition, needs remain high in the three displacement crises that the country is facing: there are still over 440 000 refugees, mainly from Sudan, the Central African Republic and Nigeria. Refugees from the Lake Chad crisis are adding up to over 108 000 internally displaced people with no significant improvement in sight. In the Eastern provinces, the protracted presence of refugees from Darfur requires further support to enhance their self-reliance. In the Southern provinces, old and new CAR refugees put a high pressure on local resources. Further support is needed to increase emergency response.

In Cameroon, the three displacement crises the country is facing lead to important humanitarian needs. Support is required for old and new refugees from CAR, to strengthen their livelihood in order to contribute to their self-reliance. The crisis in the English-speaking Southwest and Northwest regions is also of concern, with some 246 000 reportedly displaced. The humanitarian response to this crisis is slowly being put in place, but basic needs of thousands of displaced people have yet to be addressed. The situation in the Far North Region, affected by the Lake Chad crisis, is far from being stabilized, with more than 8 000 new refugees from Nigeria along 2018, bringing the figure of total refugees to 96 000. There are still 224 000 IDPs only in this region. The response to the basic needs of refugees, IDPs and host communities need to be urgently enhanced.

To this effect, an additional envelope of EUR 12 million for Chad and EUR 3 million from Cameroon is being allocated from the Emergency Aid Reserve, in the framework of a humanitarian support package of EUR 50 million for Sahel countries.

Fifth modification as of 21/09/2018

The repartition of the June additional allocation of EUR 14 500 000 for Chad has to be further adapted to reflect the final selection of projects. The breakdown between Specific Objectives 1 and 2 of the Worldwide Decision (respectively covering man-made crises and natural disasters) has to be adapted as follows, as reflected in the Technical Annex: man-made crises EUR 19 500 000 (previously EUR 19 250 000) and natural disasters EUR 33 000 000 (previously EUR 33 250 000).

Fourth modification as of 23/08/2018

Further to the previous modification of June 2018 for Chad, the initial repartition of the additional EUR 14 500 000 between Specific Objectives 1 and 2 of the Worldwide Decision (respectively covering man-made crises and natural disasters) has to be adapted. The selection process for project proposals or modification requests received in the framework of this previous modification of the HIP has led to the allocation of a higher amount under Specific Objective 1 than initially foreseen. The amounts are adapted as follows, as reflected in the Technical Annex: man-made crises EUR 19 250 000 (previously EUR 17 050 000) and natural disasters EUR 33 250 000 (previously EUR 35 450 000).

Third modification as of 26/06/2018

Chad

Several new crises have emerged in Chad over the past few months, adding to the existing many-layered crises in one of the poorest countries in the world. Since December 2017 some 28 500 refugees fleeing violence in CAR have arrived in Southern Chad, adding to the 71 000 refugees already present in an area that has an already very vulnerable host population and an extremely low level of basic services.

Moreover, as a consequence of insufficient and erratic rainfall over the last rainy season, which reduced dramatically the access to pasture and the food production, the lean season has started earlier this year with some 990 000 people in need of urgent food assistance. There are also alarming levels of acute undernutrition: Global Acute Malnutrition (GAM) rate at 13.9% compared to 11.9% and Severe Acute Malnutrition (SAM) rate at 3.9% compared to 2.6% in 2017. Between January and March 2018, the number of SAM children admitted in health centres has increased by 18.7% compared to the same period last year.

It is therefore necessary to allocate an additional EUR 14 500 000 to Chad to increase the emergency response capacity to the new influx of CAR refugees, provide an extended response to the lean season an additional nutrition support.

Cameroon

The spill-over of the Lake Chad conflict in the Far North Region continues. Between December 2017 and March 2018, the UNHCR has registered 7 000 new arrivals from Nigeria in Minawao camp. Furthermore, some 70 000 people were newly displaced between December 2017 and March 2018. Local communities are also heavily affected by this crisis, sharing their scarce resources with displaced populations for over two years now.

Since October 2017, rising tensions have been reported in the two English-speaking regions of Cameroon, the Northwest and the Southwest. Intensification of the tensions over the last few months has caused the displacement of some 160 000 people (Multisector Interagency Rapid Assessment, April 2018) in these regions and led to a disruption of social services (such as health and education), and economic activities of the affected population.

It therefore appears necessary to increase the allocation for Cameroon by EUR 2.5 million to respond to the increased needs related to the Lake Chad crisis in the Far North, enhancing rapid response, multi-sectorial assistance to new refugees, protection and education. The provision of basic assistance, in line with the humanitarian principles, is also necessary for IDPs in the Northwest and Southwest regions.

Second modification as of 8/03/2018

A budgetary realignment within the available envelope is necessary to reflect the allocation of funds to the different crises addressed in the present HIP.

An adjustment is required between Chad and Central African Republic to allow a multi-annual strategy in line with the Humanitarian-Development Nexus in response to the needs of refugees. To this effect, an amount of EUR 1 000 000 indicatively earmarked for Chad in the sixth amendment of the 2017 HIP to respond to the regional CAR crisis is transferred to CAR. Hence, the 2018 initial budget for CAR is reduced and 2018 initial budget for Chad is increased by the corresponding amount.

An indicative envelope had been allocated to the region for Education in Emergencies, with EUR 1 million for Chad and EUR 500 000 each for Cameroon and Central African

Republic. The selection of the proposals for this envelope requires the transfer of EUR 200 000 from Chad to Central African Republic.

In Chad, an adjustment between Specific Objectives 1 and 2 is necessary to be in adequacy with the projects selected for funding under the 2018 HIP. To this effect, Specific Objective 1 of the HIP stands now at EUR 14 550 000 (vs EUR 17 200 000 initially) while Specific Objective 2 amounts to EUR 23 450 000.

First modification as of 22/12/2017

An additional amount of EUR 10 800 000 has been made available from a contribution in External Assigned Revenues from the UK's Department for International Development (DFID) for several Sahel countries. These funds will benefit notably refugees, internally displaced people and host populations in the Far North of Cameroon and in Chad and severely food insecure populations in the Sahelian belt in Chad. This amount will be used in line with the overall objectives agreed with DFID for the joint PHASE (Providing Humanitarian Aid for Sahel Emergencies) programme in the Sahel: (1) decreasing at least 550 000 people's vulnerability to chronic food insecurity and malnutrition, (2) alleviating the needs of at least 300 000 people affected by conflicts and (3) increasing the capacity of target communities to cope with natural disaster.

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1. CONTEXT

Overview of the main humanitarian challenges in the region

CAR, Chad and Cameroon have in common structural weaknesses linked to chronic underdevelopment and political fragility, although to varying degrees. The three countries are at the juncture of major crises (CAR, Nigeria, Libya, Sudan, South Sudan, Democratic Republic of Congo - DRC), with cumulative displacement effects over time. They also have a significant exposure to natural disasters and epidemics. This results in continuing humanitarian emergencies. The situation is further exacerbated by the ongoing conflict in CAR – including its significant spill-over to neighbouring Cameroon and Chad - and the spill-over of the Lake Chad crisis from Northeast Nigeria to Cameroon and Chad. The results are large population displacements and severe affectation of local economies. In CAR, where a severe protection crisis is ongoing, resurgence of violence, including incidents of armed actors targeting civilians based on religious and ethnic affiliation and other human rights violations have adverse effect on populations. Consequently, the insecurity and its negative impact on livelihoods continue to constrain access to food for vulnerable households, compounding high chronic undernutrition. The Sahelian regions of Chad are highly food insecure areas with rates of acute malnutrition exceeding the emergency thresholds. Sahel food and nutrition insecurity is considered a forgotten crisis by DG ECHO.

Main vulnerability indicators per country

CAR ranks 188 on UNDP Human Development Index (HDI), i.e. the last position of assessed countries. Its overall INFORM Vulnerability Index is 8.5/10, Hazard and Exposure 5.7/10, Lack of Coping Capacity 8.7/10. The country has an INFORM Crisis Index of 3/3, resulting from a Conflict Intensity score 3/3, Uprooted People 3/3 and People affected by Natural Disasters 0/3. CAR has a total population of 4 900 274³. 2 400 000 of them, i.e.

³ Source: World Bank

about half of the population, are directly crisis-affected; the remaining population is considered indirectly affected. The country's humanitarian outlook indicates that the situation is fast changing, within a rather volatile political environment. Military presence linked to the conflict consists of a UN integrated mission (MINUSCA) with about 12 000 staff.

Chad ranks 186 on the HDI. Its overall INFORM Vulnerability Index is 7.3/10, Hazard and Exposure 7.2/10, Lack of Coping Capacity 8.9/10. The country has an INFORM Crisis Index of 3/3, resulting from a Conflict Intensity score 3/3, Uprooted People 3/3 and People affected by Natural Disasters 0/3. The protracted Sudanese refugee situation in the East, the situation of Central African Republic refugees and returnees in the South are classified as forgotten humanitarian crises, with a potential for deterioration. Chad has a total population of 14 037 000. 4 734 000 people, i.e. 34% of the total population, are directly crisis-affected, and the remaining population is considered indirectly affected. The country's humanitarian outlook indicates that the situation is of a protracted nature, within a relatively stable political environment. Chad is pivotal to regional security efforts. Thus, proper civil-military coordination is essential.

Cameroon ranks 153 on the HDI. Its overall INFORM Risk Index in 2017 has risen to 6.2/10 (Hazard and Exposure index 6.8/10; Vulnerability Index is 5.9/10; Lack of Coping Capacity index is 6/10). The INFORM Crisis Index for Cameroon remains at 3/3 in 2017; resulting from a Conflict Intensity score of 3/3, an Uprooted People index of 2/3 and a Natural Disaster index of 1/3. Cameroon has a total population of 23,344,180. 1,051 900 people are directly affected by crises, i.e. 4.5% of the total population. Some 1,900,000 people, i.e. 7.9 % of the total population, are estimated to be indirectly affected. The situation of the CAR refugees (about 235 600 CAR refugees in Cameroon) is considered a forgotten crisis. The country's humanitarian outlook indicates that the situation is deteriorating, particularly in the areas affected by the Boko Haram violence.

Acute complex emergency in the Central African Republic

The situation in CAR took a dramatic turn following the coup d'état in March 2013, with the conflict escalating into unprecedented levels of violence. The peak in the conflict in December 2013 ignited a cycle of reprisals with violent clashes between armed groups opposing self-defence (largely Christian and animists called anti-Balaka or AB) militias to a (mainly Muslim) coalition of rebels called Seleka and the French military intervention ("Operation Sangaris"). In February 2014, a transition government took office, which marked the start of a still fragile process of appeasement. Exactions and widespread banditry have continued to affect the population, compromising humanitarian access and threatening humanitarian workers' lives.

The UN integrated mission (MINUSCA) deployment came in support to the political transition process, whilst promoting accessibility of long-secluded areas.

Despite the successful completion of the electoral cycle which led to a new government in March 2016, and a relative calm in the first months of 2016, the overall security situation deteriorated in the last trimester of 2016. The Government does not control the entire territory but only 2 prefectures out of 14. Humanitarian needs are on the rise due to recurrent localised outbreaks of violence in the provinces. New population movements are adding pressure to an already precarious humanitarian situation: continuing protection threats, protracted displacements, widespread destruction of homes, disruption of services and livelihoods, high level of food insecurity, persisting weakness of State institutions and generalized feeling of impunity. Almost half of the population is considered vulnerable without access to basic services. As of August 2017, approximately 600 000 individuals are still internally displaced (IDPs), compared to 384 000 in July 2016, which emphasises the aggravation of the situation. Even though some spontaneous repatriation of CAR refugees

from neighbouring countries (Cameroon, Chad, DRC) had started at the beginning of 2016, movements have so far been limited to small numbers of people. Instead, the number of refugees has increased by 6%. The returnees, both repatriated refugees and IDPs, are facing difficulties to access their legal rights, notably to secure their housing, land and property, and are confronted to the challenge of intercommunal peaceful co-existence against the background of increasing inter-community tensions.

Complex protracted crises in Chad

Significant levels of acute food insecurity and undernutrition characterise the Sahelian belt of Chad, which has undergone repeated food crises in recent years as a result of the lack of structural development, erratic climate conditions, failed harvests and increase in food prices. The country is vulnerable to natural hazards such as floods and droughts as well as to epidemics. Poor households depend on local markets to access to food and are facing a decline in their purchasing power due to economic and financial crisis. Pastoralists are also facing a sharp drop in terms of trade as the livestock market is idle and prices have halved. Additionally, transhumance very often creates tensions with the local population. According to the Cadre Harmonisé (Harmonized Framework) food security analysis⁴, the number of people in need of food assistance during the 2017 lean season (usually June to September) has slightly reduced compared to 2016. It is worth mentioning, however, that in 2016 there was a 60% increase in the number of food insecure people compared to 2015. In 2017, about 900 000 people countrywide are expected to be in crisis or worse during the lean season, and in need of urgent assistance. The nutritional situation is also a point of concern. Severe acute malnutrition remains a health problem in virtually all regions in the country.

The latest "Cost of Hunger in Africa" study (COHA) finds that the economic burden associated with undernutrition costs Chad more than 575 billion FCFA (USD 933 million) each year - accounting for about 9.5 percent of the country's GDP. In the last decade, chronic undernutrition has been reduced but remains high and affects nearly 40 per cent of Chadian children under 5. Individuals who have experienced growth retardation in childhood have reduced physical and cognitive abilities in adulthood and are likely to be less educated, less productive and less able to contribute to the economic and social development of the country. These results reinforce the need to make nutrition a priority in national budgets in order to avoid a heavy loss of human capital.

Chad furthermore experiences three simultaneous displacement crises, the most recent of which is affecting the Boko Haram-stricken Lake region. This occurs in a context of extreme fragility and limited international aid⁵, characterised in particular by a sharply decreasing donor interest in the protracted Sudanese and CAR refugee and returnee situations. This puts also high pressure on host communities, resources and environment, already severely stricken by food insecurity and global warming consequences. This particular situation – considered a forgotten crisis by DG ECHO - calls for a quick and large implementation of the humanitarian-development nexus. In addition, there is a spill-over of the conflict in Libya.

Acute and protracted humanitarian crises in Cameroon

⁴ CH – National frame to identify the vulnerability of food and nutrition insecurity. The last exercise was carried out in March 2017 under the lead of the SISAAP (*Système d'Information sur la Sécurité Alimentaire et d'Alerte Précoce au Tchad*). The classification is compatible with IPC (Integrated Food Security Phase Classification).

⁵ In Chad Development assistance is only 33% of the total whilst humanitarian aid is 56% and debt write off 11%. In Cameroon Development assistance is 85% of total and 72% in Niger.

The influx of refugees from CAR started at the outbreak of the crisis in 2013 and has continued on a smaller scale. An estimated 193 600 CAR refugees⁶ have arrived in Cameroon since December 2013, mainly in the East and Adamawa regions. Their dependence on humanitarian aid persists due to limited self-reliance opportunities and uncertain return prospects to CAR. Their situation is therefore considered a forgotten crisis. In the Far North region, the IOM Displacement Tracking Matrix (DTM) of May 2017 identified 228 443 IDPs, amongst whom 96% are fleeing Boko Haram violence, and the others are displaced by floods. Some 30 000 unregistered refugees and 48 720⁷ returnees were also identified. As of August 2017, 58 335 Nigerian refugees are registered by UNHCR in Minawao camp. The registration process out of the camp is under process and has yet to be finalized. Insecurity has provoked disruptions in economic activities, notably cross-border trade and agriculture and the increased need for protection of the population. The health and nutrition status of the affected population, already exposed to structural food insecurity, poverty and limited access to basic services, has seriously and rapidly deteriorated in most affected areas such as Mayo-Sava and Logone-Et-Chari divisions.

2. HUMANITARIAN NEEDS

1. People in need of humanitarian assistance:

Populations in Central Africa are affected by man-made and natural disasters as well as epidemics. In light of their vulnerabilities, affected people and potential beneficiaries can be categorised as follows:

Conflict-affected people

- Local and Internally Displaced Populations (IDPs): In CAR, the entire population of 4.9 million people is considered directly or indirectly affected by the ongoing humanitarian crisis, with 2.4 million estimated as extremely vulnerable and requiring assistance. CAR hosts at present the largest number of IDPs, with some 600 000 individuals⁸ of whom 197 909 in 73 IDP sites. By mid-2017, all the IDP sites in the capital Bangui had been closed. Allegations of sexual exploitation and abuse by the MINUSCA have been reported in CAR. In Chad, according to the UNHCR⁹ more than 119 000 IDPs (gender-disaggregated data not available) were registered following the crisis in the Lake region. Domestic and gender-based violence (GBV) is high amongst displaced populations. Due to the Boko Haram crisis, Cameroon hosts more than 214 500 IDPs¹⁰ due to the conflict in the Far North region. Amongst them, 49% are female, and 67% of the overall are under 18 years of age. The structural lack of civil documentation of the majority of the population in the region increases protection-related risks including, but not only, refoulement and forced trans-border movement of population.

- Refugees: Chad is hosting the largest number of refugees (400 000, according to UNHCR). Refugees originate from Sudan (317 219), CAR (72 955) and Nigeria (8 653). Overall 57% of these refugees are under 18; women account for 56% of the refugee population, and of which 69% of them are heads of households. A Tripartite Agreement has been signed between the Governments of Chad, Sudan and UNHCR for the voluntary repatriation of Sudanese and Chadian refugees but a massive return remains unlikely. The drastic reduction in food rations, due to a lack of funding, has a direct impact on GBV and

⁶ Source: UNHCR

⁷ Source: IOM

⁸ Source: CMP (*Commission Mouvement de Populations*) – June 2017

⁹ UNHCR – United Nations Refugee Agency.

¹⁰ Source: IOM – International Organization for Migration

causes protection issues such as repudiation of wives, prostitution, begging, temporary or permanent migration etc. The number of CAR refugees has increased as of April and July 2017. Cameroon currently hosts more than 324 000 refugees from CAR and Nigeria. About 193 600 are new CAR refugees who have been arriving since December 2013 and were biometrically registered during 2017. Around half of them live in seven camps in the East, Adamawa and North regions, whilst the other half stays within host communities. 53 % of the new CAR refugees in Cameroon are women and 30 % are children/under 18. In addition, the Biometric exercise implemented in 2017 revealed that there are around 42 000 Central African refugees who were already in Cameroon before 2013, and that there were 20 969 urban refugees. After about 13 000 spontaneous departures between April and June 2017, UNHCR had registered 58 335 Nigerian refugees in Minawao camp, Far North region, 54 % of them are women and 61% of them are under 18 years old. Reports on spontaneous returns show that the affected population lacks information before their departure. In addition, 30 000 refugees are estimated to live outside the camp, where minimal protection and assistance are provided. According to UNHCR, 4 317 forced repatriations have occurred since January 2017. Domestic and gender-based violence is estimated to be high amongst refugee populations. Since June 2016, despite the volatile internal situation, CAR also hosts 8 234 refugees and 511 asylum-seekers, including a protracted figure of 2 970 Chad refugees and 1 982 South Sudanese refugees.

- **Returnees:** In CAR, an estimated 34 000 people returned spontaneously from neighbouring countries where they had sought refuge at the end of 2016. The repatriated people, mainly from the Muslim community, are facing challenges in terms of peaceful co-existence with the communities in the areas of return and are notably confronted with illegal occupation of their land and property. Chad experienced a large-scale return of 130 000 people from CAR in 2013/2014. Approximately 67 586¹¹ individuals continue to live in four sites close to the CAR border and 22 000 with host communities in the South, whilst some 5 000 live in Ndjamena. In the South, both refugees and returnees increase pressure on local resources, for instance in the Nya Pende department where 40% of the total population is either a refugee or returnee. The lack of legal documentation and assets are the main constraints to their socio-economic integration. In Cameroon, only limited information is available about the 48 720 returnees from displacements due to the conflict in the Far North Region. Small-scale returns of CAR refugees are also reported by UNHCR (approximately 9 000 in 2016), but these movements have not been closely followed up.

People affected by food crisis and acute undernutrition

- **Food crisis:** In CAR, where 75% of the population relies on agriculture for food and income, the crisis has severely affected livelihood strategies and coping mechanisms. Despite favourable weather conditions, conflict, renewed violence and population movements continue to have a negative impact on the final outcome of the cropping season¹². Overall, 1.1 million out of 3.6 million people in the areas assessed (22.5% of the total population of CAR) are in need of urgent humanitarian assistance: 315 872 of them are in emergency Phase 4 (IPC), all in rural areas¹³. Widespread insecurity and conflict have impacted transhumance trends and pastoralists' livelihoods, fuelling conflict potential between pastoralists and farmer communities. The recurrent clashes and subsequent displacements of populations are also hampering the access to food.

¹¹ Source: OCHA

¹² GIEWS Country Brief, July 2017 - <http://www.fao.org/giews/countrybrief/country.jsp?code=CAF>

¹³ IPC, Cadre Intégré de classification de la sécurité alimentaire : Analyse de la situation de l'insécurité alimentaire février 2017

In Chad, according to the latest Cadre Harmonisé analysis, 17 out of 61 departments are ranked in food crisis situation (IPC phase 3). It is estimated that in 2017, 900 000 people require emergency food assistance during the lean season.

In Cameroon, the conflict in Nigeria and the subsequent border closure have had heavy consequences on local livelihoods. In 2017, some 290 000 Cameroonians required emergency food assistance in Cameroon¹⁴, amongst whom 62% are located in the Far North Region. The next most affected regions are Adamawa and North.

- Severe Acute Malnutrition: In CAR, the nutrition situation is clearly linked to a lack of access to health care but is exacerbated by the displacement of populations. Rapid assessments conducted in some humanitarian "hot spots" show a degradation of the nutritional situation. Given the renewed crisis, severe acute undernutrition might be on the rise again in 2018. In Chad, the 2016 Smart Survey revealed a Severe Acute Malnutrition (SAM) rate of 2.6 %, with 11 out of 23 regions having SAM rates above the emergency threshold. Based on the nutrition cluster estimates, it is expected in 2017 that over 228 000 children under 5 suffer from SAM in Chad: one child out of eight suffers from Global Acute Malnutrition (GAM). In Cameroon, populations in the Far North region were already suffering from chronic undernutrition prior to the Boko Haram crisis. According to the 2016 SMART survey, the SAM rate is 2 %, The current crisis thus aggravates an already difficult humanitarian situation.

Vulnerable people affected by natural disasters or epidemics

CAR, Chad and Cameroon are highly exposed to epidemics and to natural disasters, notably floods and drought. In CAR, due to the collapsed health system, the entire immunisation programme depends on external aid, with logistics and security constraints hampering prevention activities. As a consequence, immunisation rates are extremely low. The surveillance system is also very weak. The country is often hit by meningitis, monkey-pox, measles and rabies outbreaks. In all countries, concerns have long lingered about a possible Ebola spread due to limited health surveillance and response capacities. In Chad roughly 60% of the national territory is desert, 25% falls in the semi-arid Sahel belt, whilst the remaining 15% approaches sub-tropical conditions but is subject to flooding. Global warming consequences these last years have had a tendency to worsen the situation. Gabon, Equatorial Guinea and Sao Tomé and Príncipe are also regularly affected by slow and sudden-onset disasters, with flood-risk areas covering about 64% of the total area of Gabon. Since 1996 and recently in 2010, 2011, 2014 and 2015, the Northern regions of Cameroon have experienced upsurges of cholera, with high mortality rates and a peak in 2014 (3 350 cases). In Chad, cholera, malaria and measles are endemic diseases with recurrent seasonal outbreaks. In February 2017 an epidemic of Hepatitis E was declared in the Salamat region in South-East Chad. In Cameroon, 250 000 people are estimated to be regularly affected by natural disasters in the northern regions.

In CAR and Chad, synergies between humanitarian and development programmes continue to be systematically sought. In Cameroon, following the 2017 Recovery and Peace Building Assessment, it is expected that more synergies between humanitarian and development programmes can be explored.

2. Description of the most acute humanitarian needs

Protection and IHL compliance

¹⁴ Emergency Food Security Assessment, September 2016

Various crisis cycles in CAR have worsened the situation of civilians in almost the entire country, particularly of children who have been subject to violence, displacement and forced recruitment by armed groups. Protection issues are exacerbated by weapon proliferation, widespread insecurity and impunity, regular clashes between armed groups, a protracted political crisis and chronic poverty. Some communities were targeted for economic and social reasons, but the attacks were perceived as linked to religious affiliation, with the disastrous consequence of accentuating the inter-communal divide along religious lines. Tensions continue to arise in parts of the country, generating new waves of displacement, notably outside the capital. Peaks of violence are recurrent between farmers and herders during the transhumance period. The current estimated number of children associated with armed groups is estimated at up to 13 000. Violations of housing, land and property (HLP) rights are an obstacle to the first spontaneous return movements of both IDPs and refugees.

Protection needs are also high in refugee and returnee sites and temporary camps in Chad and Cameroon. In Chad, refugees have limited rights to move freely inside the country. Against a landscape where birth registration is an issue for regular citizens, UNHCR is leading advocacy for basic rights, making some progress regarding Sudanese refugee children. Nevertheless, challenges are significant as around 130 000 refugees born in Chad need birth certificates. Returnees from CAR with no family links in Chad are still highly vulnerable and remain at risk of being stateless. This issue is highly political and the government's returnee reintegration plan remains largely unfunded. With IHL violations becoming more likely in conflict-affected areas of Cameroon and Chad, protection of civilians is paramount. In addition, the progressive and steady militarization of the region is reportedly leading to an increase in protection incidents, particularly related to GBV. Further advocacy is required to ensure effective access to the most vulnerable conflict-affected populations and to guarantee the delivery of coordinated and principled humanitarian assistance. In the area affected by the Lake Chad crisis in Cameroon, compliance with International Refugee Law and the Organisation of African Unity (OAU) Convention Governing the Specific Aspects of Refugee Problems in Africa, and in particular the Nigerian refugees' right to asylum and to non-refoulement, are important. Despite the signature of a Tripartite Agreement between UNHCR and the governments of Cameroon and Nigeria in March 2017, cases of refoulement were reported (4 317 as of June 2017). There is still only one official registration point in the entire Far North. For all displaced persons (refugees and IDPs) the loss of documentation and the high percentage of family separations are a direct consequence of their forced flight. Psychological trauma, violence, including gender-based violence, unsafe or undignified coping mechanisms (such as transactional sex), have also been observed.

Health and Nutrition

In CAR, the crisis has dismantled the already very fragile health preventive activities, primary and secondary health care, all functional referral hospitals, early warning mechanisms, rapid outbreak response capacities, psychosocial support and assistance to victims of violence, including GBV remain essentially reliant on humanitarian actors. Key mortality indicators (under-five and maternal mortality) are still very high in the country. Access to free health care is essential in all humanitarian interventions in the health sector, as well as coherence and complementarity with different EU instruments supporting healthcare. Chad and the Sahel belt of Cameroon continue to suffer from low vaccination coverage and poor availability/access to primary and secondary healthcare. In Chad, according to the last nutrition survey, the mortality rate (1.08/ 10 000/day) amongst children under five remains far below the emergency threshold (2/ 10 000/day): Chad's population is exposed to high incidence of diseases with epidemic potential. Some 228 000 children suffering from Severe Acute Malnutrition required urgent treatment in 2017. Girls face additional health challenges in a country where female genital mutilation and child marriage pervade across

ethnic groups. In the Far North region of Cameroon, UNICEF estimates that about 13 000 children under 5 are affected by undernutrition in 2017, 64 900 of them by a severe form of malnutrition.

Food assistance and livelihoods

In CAR, reduced and limited access to agricultural fields linked to increasing security constraints and potential conflict with local populations, massive population displacement and major logistic hindrances continue to hamper significantly local agricultural production, ultimately resulting in high needs for food assistance and livelihood support. The improvements in agriculture production and livestock restocking observed in 2016 compared to 2015¹⁵ may not continue in 2017. A further deterioration is driven by localized conflict. This entails a deterioration of food diversity since households are often only able to crop cassava. Vulnerable households' food security is further compromised in the Southern prefectures, where many households are likely to miss the main agriculture campaign (February). Displaced people in host communities or in sites and people in enclaves continue to represent the most vulnerable populations.

In Chad, cereal production for 2016/2017 increased by 13.6% compared to a five-year average. The improvement in food availability has not translated in better food security because access to food has deteriorated due to the economic and livestock crisis. The latter was officially declared by the Government of Chad in June 2017.

In Cameroon, a survey conducted in September 2016 showed that 73% of the CAR refugees intend to stay in Cameroon as long as the situation in CAR remains volatile. Most of them have no opportunities or capacities to develop income-generating activities. Strengthening their livelihoods, self-reliance and resilience is thus a priority. Some assessments have demonstrated various levels of vulnerability within this refugee population. About 38% of them are highly vulnerable and depend entirely on humanitarian aid. As 50% of the new CAR refugees are in host villages, pressure on access to local resources is high, and there are risks of tensions with host communities. In the Far North, Boko Haram-related violence has exacerbated the fragility of this region, where nearly 80% of the population is either poor or very poor. Insecurity and border closure have disrupted agricultural and economic activities, so restoring livelihoods is a priority. In this context, 62% of people in severe food insecurity are located in the Far North region and are at risk of food insecurity in 2017.

Water, Sanitation and Hygiene (WASH)

In CAR, basic WASH services need to be re-established, pending a comprehensive and longer-term approach to tackle structural problems. Only 22% of the urban population in the country has access to potable water through a distribution network. Infrastructure is old and poorly maintained (productivity is only 50%). More than 70% of the population in Bangui still uses unsafe water. Only 30% of the rural population has access to protected water points and three out of four people have no access to sanitation facilities, with an average coverage of less than 22% across the country¹⁶. IDPs living in displacement sites are facing acute WASH needs. Chad has only 55% water access coverage rate and 16% sanitation coverage rate at the national level. In displacement settings, access to local water sources and sanitation is still insufficient including for the host communities. In Cameroon, more than 55% of the rural population do not have access to safe water and 80% to basic

¹⁵ CFSAM 2016: la production agricole totale en 2016 est en augmentation de 35% par rapport à 2015 (+45% manioc, +13% céréales, + 19% légumineuses)

¹⁶ HNO - Humanitarian Needs Overview 2017

sanitation on a national level. Those figures are even lower in Far North and Eastern regions where most of the conflict affected population is located.

Shelter and Non-Food Items (NFIs)

In CAR, shelter and NFI needs are related to displacement dynamics. With the resurgence of massive displacements, needs of emergency assistance are on the rise for newly displaced. In protracted displacement sites, the deteriorating living conditions after almost four years since the beginning of the crisis are the major challenge. Assistance needs to return and/or to rebuild are increasing. In Southern Chad, there is still a need to provide semi-permanent shelters for CAR returnees. Emergency NFI stocks and WASH kits are needed in case of new displacements or influx. In Cameroon, the need to cover gaps in terms of transitional shelters in refugee sites is acute. The demand for the supply and renewal of NFIs for both Nigerian and CAR refugees is constant.

Logistics and access

Road conditions in CAR and Chad are generally very poor and various areas are landlocked for several months a year due to heavy rains. In CAR, an increasing trend of attacks specifically targeting humanitarian actors has been observed in the first half of 2017. Insecurity on the axes remains extremely high and some airstrips are inaccessible. Security is an issue in the Lake region of Chad and in the Far North of Cameroon where attacks have increased and therefore have hampered humanitarian access. This is also true in areas where humanitarian actors have recently deployed to access to vulnerable populations who had been out of reach until 2017. For humanitarian air services to access CAR, the entire Chad and the Far North region of Cameroon will remain crucial in order to deliver humanitarian aid in time for the most in need.

Coordination, advocacy and communication

The complex nature of the conflict in CAR in the context of a United Nation's Peacekeeping Operation requires proper coordination and proper understanding and implementation of civil-military coordination guidelines. After the successful completion of the electoral process in March 2016 and the adoption of the National Plan for Recovery and Peacebuilding in autumn 2016 (based on a Recovery and Peace Building Assessment), the Government and international community are working to put in place structures and mechanisms aiming to articulate assistance from emergency to recovery and development. EU-led Joint Programming is ongoing. The spill-over effect of the CAR and Nigeria crises in neighbouring countries makes humanitarian coordination essential also in Chad and Cameroon. A Recovery and Peace-building Assessment was also launched in Cameroon in the four regions affected by these crises. In both CAR and Cameroon, advocacy will continue to be needed in respect to the LRRD¹⁷ resilience agenda. Advocacy has to be supported by appropriate resources, visibility and communication initiatives at the national and international level. Concerted efforts to advocate for principled actions will be required, including with respect to possible repatriation or (re)integration options for the displaced in the region, as well as forced relocation. In Chad, the advocacy initiatives should put an emphasis on the two forgotten crises in the country – the Sahel food and nutrition crisis and the CAR and Sudan protracted refugees' crisis. Civil-Military Coordination should be urgently improved in the Lake Chad area for the four countries involved, where cross border operations could be reinforced.

Disaster risk reduction and resilience

¹⁷ Linking relief, rehabilitation and development (LRRD)

To save the lives and protect the livelihoods of vulnerable populations exposed to natural hazards, notably floods and epidemics, suitable and viable preparedness measures, rapid response mechanisms and early warning systems are needed. Hence, disaster risk reduction concerns should be mainstreamed in the humanitarian response. Support to resilience building should be a key concern in Central Africa, given the population's vulnerability and exposure to risks. In line with resilience building efforts, support to self-reliance could constitute an opportunity for vulnerable populations that face protracted displacement. Cameroon is prone to natural hazards such as floods and needs to enhance its preparedness capacities. In Chad, given the vulnerability of populations to frequent drought and floods, preparedness capacities need to be strengthened to tackle these two main risks. Early Warning systems do exist but need to be supported at the local and national level. The National Contingency Plan has to be tested and implemented at the regional and local level, in accordance with the new Development Plan 'Vision 2030'.

Education in Emergencies

The situation is particularly severe in CAR, due to the country-wide nature of the conflict: one-third of school-age children are out of school, according to UNICEF, and 20 percent of the country's schools are not operational. The spill-over effects of the CAR conflict in Cameroon and Chad, and the continuous violence perpetrated by Boko Haram on civilians in the Lake Chad area have affected children's school attendance dramatically. These acute crises, an aggravating factor in contexts of structural scarcity of schools and teachers, have caused widespread disruption in education services in all areas affected. Massive displacements of people, particularly women and children, have hindered access to basic social services, including education, and increased protection risks for children.

Displaced children in the region face significant barriers for entering/re-entering education due to gaps in their education, language barriers and the existing weaknesses in education systems in host communities. Children's exposure to violence, instability and harmful coping mechanisms (forced marriage, child labour, and association with armed groups) means that transitioning back to the regular education system is particularly difficult. This holds particularly true in the absence of psycho-social support and child protection services in many host communities.

3. HUMANITARIAN RESPONSE

1. National / local response and involvement

In CAR, the government has showed its interest in having a central role in coordinating international response and is responsible for the National Plan for Recovery and Peacebuilding. Although still largely absent from the provinces, the government is progressively seeking to re-centralise decisions in strategic recovery and development plans. Whilst this willingness is in line with the development cooperation policy, it may differ from humanitarian implementing modalities given the priorities and the volatility of the context.

The Government of Chad was very active in the early stage of the CAR crisis, taking the initiative to evacuate their citizens from CAR. However, the implementation of the Global Plan for Returnee Integration is still lagging behind and many still lack proper documentation. The national Nutrition Policy has been adopted as well as a National Social Protection Policy and country resilience priorities in the framework of AGIR. However, due to the lack in human and financial resources, and with limited political drive at the higher level, food and nutrition issues remain largely dealt with by the international community. A Vision 2030 and its National Development Plan for 2017-2021 were adopted by the Council of Ministers in July 2017 in view of the Donor Round Table in Paris in September 2017. Cameroon has a long-standing tradition of refugee acceptance. The government has played an active role in the negotiation of a Tripartite Agreement with Nigeria and UNHCR for

the repatriation of Nigerian refugees. However, refoulements of unregistered asylum-seekers are reported to continue, Nigerian refugees newly entering Cameroon are no longer accepted by the authorities and the specific needs of IDPs in spontaneous sites or in their host communities are still largely uncovered.

2. International Humanitarian Response

The humanitarian response is managed at country level by a Humanitarian Coordinator (HC) and Humanitarian Coordination Team (HCT) through an annual Humanitarian Response Plan (HRP) based on an annual Humanitarian Needs Overview (HNO), which provides evidence-based analyses of the magnitude of the crisis and identifies the most pressing humanitarian needs. Regional appeals such as the UNHCR Regional Refugee Response Plan present figures on the displaced population fleeing conflicts and include detailed sector plans and respective financial requirements of each partner for the inter-agency response.

In CAR, the level of both financial and human resources allocated by the international community has decreased since the lifting of the L3 status¹⁸ in 2015, thus, affected negatively the quality and quantity of the international response. However, the continued increase in the LRRD funding, notably through the multi donors EU Trust Fund for CAR (“Bêkou” which means “Hope” in Sango), since 2014, in areas where humanitarian needs mainly result from structural problems, has been a step forward, although the needs are enormous and far from being all addressed. The Bêkou Trust Fund continues to link humanitarian and development actions and to support the resilience of the population by focusing on three main areas: basic services, reconciliation, economic recovery and job creation.

In light of the adoption of the National Recovery Plan, and related increase in recovery and development funding, the 2017 Humanitarian Response Plan had a reduced initial figure of USD 399.5 million (from USD 531.5 million in 2016), that has been increased to USD 497.3 million in June 2017 due to the renewed violence and displacements of population from May 2017. In Chad, the humanitarian donor presence is very limited (mainly the EU, France, United Kingdom, Switzerland and the United States), and thus has limited leverage in the face of huge humanitarian needs. Humanitarian coordination is ensured via OCHA and the cluster system, with varying quality across sectors. In Cameroon the initial difficulties to attract international humanitarian actors and donors have been slowly overcome as the Lake Chad crisis magnitude became evident. The response towards CAR refugees in the past years has enabled to reach some standards in camps but as international funding is decreasing, there is a risk that the situation deteriorates whilst humanitarian assistance is still needed for some fringe of the population. Attraction of development funds for regions affected by the CAR Crisis remains a challenge.

3. Constraints and DG ECHO response capacity

Limited resources available to face high chronic vulnerabilities, in a context of weak national/local capacities, represent a major challenge. The cumulative effects of different crises are a major constraint too. None of the three countries experiences outright denial of access. However, security and logistic constraints (particularly in Chad and CAR due to their secluded geography) result in high programme and structural costs and influence humanitarian access everywhere, although to variable degrees. In CAR, humanitarian space and access are shrinking in particular outside the capital where humanitarian workers and

¹⁸ Level 3 emergencies: global humanitarian system's classification for the response to the most severe, large-scale humanitarian crises (OCHA)

assets are increasingly targeted by armed groups. Partner's presence has increased since 2013 and the number of operational INGOs¹⁹ in the country is now estimated at around 50. Their ability to deliver continues to be hindered by an extremely high staff turnover, by the dire security situation and by limited local capacity, which in some cases has led to reduce the geographical coverage or lately to temporary suspension of humanitarian interventions. An appropriate legal framework for INGOs is still awaited. In this context, administrative constraints are still in place. Access is best in Chad, where there are a number of NGOs and UN agencies with absorption capacity; since 2016 the response capacity in the Lake Chad area has also improved though the situation remains unstable and the risk of quick security deterioration is still present. In Cameroon, response constraints are still linked to difficult access due to the insecurity in the Far North region, and limited funding availability in East, Adamawa and North regions. In all three countries, the rainy season and poor road conditions might complicate the provision of assistance, especially in remote areas. In all countries, limited options for international actors to work through local partners exist and are being utilized where possible. Remote-management is not applied at this stage but community-based approach is encouraged when appropriate.

4. Envisaged DG ECHO response and expected results of humanitarian aid interventions

DG ECHO's intervention strategy will address both the acute and the protracted humanitarian needs of the affected populations, as follows:

Support to conflict-affected populations

The *acute needs* of resident, internally displaced populations and returnees in CAR, Chad and Cameroon will be addressed in the identified priority sectors, developed in the attached Technical Annex. Priority sectors include food assistance, emergency health and nutrition, emergency WASH, shelter and non-food items, protection, education in emergencies, and coordination and logistics. Sudden movements of populations (returns included) may be addressed through multi-sectoral support, including through Rapid Response Mechanisms. Education in emergencies needs to be supported in areas affected by complex crises where the percentage of out-of-school children is high, in particular for girls, there are grave child protection concerns and where longer-term sources of funding are limited or not yet available. In CAR, the response will be adjusted to the evolving needs, in a scenario where regular localised crises may still appear and in full coordination with the activities financed by the Békou Trust Fund as well as with development actors. The humanitarian response to address the urgent needs of recent refugees, including those living outside settled sites, and of their host communities will be continued and scaled up as per identified needs. Longer-term issues will be addressed on a transitional basis, where appropriate, in full coordination and complementarity with planned interventions by other EU instruments. In Chad, the needs of long-standing refugees (from Sudan or CAR) will be addressed by contributing to further identify and scale up efforts towards self-reliance and durable solutions in light of Government of Chad, UNHCR and World Bank interventions. In Cameroon, targeting the most vulnerable refugees, displaced and affected local communities to support them with food assistance will be a priority. In eastern Cameroon, priority will be given to self-reliance initiatives for CAR refugees, where a DG ECHO support has a clear added value and is time-bound because it can link with broader, more structural or developmental approaches. In the Far North region, small-scale livelihood restoration interventions could be supported where a humanitarian intervention has an added-value before an expected upscale by development instruments.

¹⁹ INGO - International Non-Governmental Organisation

Addressing food and nutrition crises

Acute food and nutrition needs in the Sahelian regions will be addressed through timely and time-bound emergency response aimed to contain mortality, morbidity and acute malnutrition rates below emergency thresholds and support appropriate prevention measures. Emergency food and nutrition interventions will target the most vulnerable households and the individuals most at risk of undernutrition - young children, pregnant and lactating mothers. At the same time, support may be provided, where appropriate, to strengthen livelihoods and help build the resilience of the most vulnerable, using the most appropriate transfer modality, where DG ECHO's support is time-bound and has a clear added value. Thereby, disaster risk reduction considerations will be mainstreamed.

In Chad, in addition, DG ECHO will also focus on the implementation of the advocacy points of the Resilience/AGIR (Global Alliance for Resilience Initiative in its French acronym) agenda, i.e. nutrition/health and social safety nets by stepping up LRRD-oriented interventions in a shared strategic framework with EU development aid within the 11th European Development Fund (EDF) National Indicative Programme (NIP). Synergies with other financial instruments (notably PRO-ACT, the EUTF for Africa²⁰) will be sought in order to contribute to this goal.

In CAR, access to diagnosis and treatment of Severe Acute Malnutrition and a minimum package of health services should be ensured by enhancing community services.

Epidemics and natural disasters

Preparedness and response to epidemic outbreaks and natural disasters will be supported where relevant, and epidemiological surveillance will be systematically integrated in all health and nutrition interventions. Disaster risk reduction and rapid response mechanisms will be mainstreamed as far as possible, and *ad hoc* emergency response interventions will be considered in all countries covered under this HIP.

All interventions should systematically take into account aspects of cost-effectiveness, efficiency, quality and innovation. To the largest extent possible, protection and disaster risk reduction concerns will be mainstreamed. To the extent possible, transition from stand-alone humanitarian interventions towards complementary actions with development and national actors and instruments is sought to strengthen the resilience of the most vulnerable populations.

Early Warning Systems and National Contingency Plans will be supported at local, regional and national level in collaboration with the Government agencies and partners.

General considerations for all interventions

In the implementation of this HIP, special attention will be given to relevant aspects related to forced displacement, advocacy, International Humanitarian Law and humanitarian access. DG ECHO will provide further support to meet the mounting needs of children in conflict affected contexts that are out of school or risk education disruption. Within this HIP projects addressing both education and child protection needs through integrated actions will be funded. DG ECHO will favour education in emergency projects in areas where the percentage of out-of-school children is particularly high, there are serious child protection concerns and where other sources of funding available are limited. Complementarity and synergies with other EU services and funding instruments will be sought, in ad-

²⁰ EUTF for Africa: "European Union Trust Fund for stability and addressing root causes of irregular migration and displaced persons in Africa"

dition to complementarity and synergies with funding provided by the Global Partnership for Education and the Education Cannot Wait.

In addition, all humanitarian interventions funded by DG ECHO must take into consideration, together with other protection concerns, any risk of gender-based violence and develop and implement appropriate strategies to prevent such risks. Moreover, in line with its life-saving mandate, DG ECHO encourages the establishment of quality, comprehensive and safe GBV response services since the onset of emergencies, in line with DG ECHO's 2013 Gender policy²¹.

Effective coordination is essential. DG ECHO supports the **Inter-Agency Standing Committee's Transformative Agenda (ITA)** and expects its partners to demonstrate their engagement in implementing its objectives and to actively take part in coordination mechanisms (e.g. Humanitarian Country Team, clusters and technical working groups).

Partners will be expected to ensure full compliance with visibility requirements and to acknowledge the funding role of the EU/ECHO, as set out in the applicable contractual arrangements.

4. LRRD, COORDINATION AND TRANSITION

1. Other DG ECHO interventions

In 2017, a three-month emergency operation was funded through the Emergency Tool Box HIP to reply to the epidemics of Hepatitis E in the Salamat region, South-East Chad. The intervention with a total budget of EUR 206 000 aimed at limiting the spread of the disease by improving the safe access to water and sanitation in the city of Amtiman.

In 2018, the Emergency Toolbox HIP may be drawn upon for the prevention of, and response to, outbreaks of epidemics in Central Africa. Also, under the mentioned HIP the Small-Scale Response and Disaster Relief Emergency Fund (DREF) instruments may be applied in the region.

2. Other concomitant EU interventions

In CAR since December 2013, EUR 112.5 million has been allocated to the CAR crisis by the EU and an additional EUR 187 million have been engaged through the 10th European Development Fund (EDF). Within the precinct of the 11th EDF, this June 2017, the EU signed the 2014-2020 National Indicative Programme (NIP) of EUR 382 million with the Central African government, out of which EUR 20 million were disbursed one month later. The Instrument contributing to Stability and Peace (IcSP) provided another EUR 20 million for media, dialogue and reconciliation activities. The multi donors Békou Trust Fund committed EUR 222 million for LRRD. Further complementarity and coordination between humanitarian and longer-term interventions financed by EDF/Békou, as well as the RCPCA coordination process, will continue in Central African Republic. These initiatives

²¹ Gender Age Marker Toolkit, 2013 - http://ec.europa.eu/echo/files/policies/sectoral/gender_age_marker_toolkit.pdf ; Gender and Sensitive Aid, September 2019 - http://ec.europa.eu/echo/what/humanitarian-aid/gender-sensitive-aid_en

are very positive, although there is a risk of overstretching the government capacity to coordinate and follow them up.

In Chad, IcSP allocation started in June 2016 for the Lake Chad. EU TF projects around the Lake Chad have also started for a total amount of EUR 88.3 million supporting resilience of vulnerable people, as well as employment and security activities. PRO ACT project in the Eastern regions will also establish a bridge between DG ECHO and the 11th EDF funds becoming available in 2018. The EU also has active Common Security and Defence Policy in the Sahel region and the G5 Sahel, including Chad.

In Cameroon, the Bêkou Trust Fund intervention supporting new refugees in camps and host communities regarding livelihood and resource management has ended in June 2017. EUR 5 million were mobilized under the PRO-ACT Decision to improve the resilience of local communities with income generating opportunities in regions affected by the CAR Crisis. Under the EU TF for Africa, four actions for a total amount of EUR 37 million to promote resilience and youth employment are on-going in the Far North, North and Adamawa Regions.

In 2018, complementarity and coordination between humanitarian and longer-term interventions financed by the EUTF for Africa will be implemented in Chad and Cameroon. Such complementarity and coordination will also happen with the Bêkou Trust Fund in the Central African Republic. DG ECHO contributes to the resilience objective of the EUTF for Africa. Joint identification of relevant resilience actions funded by the EUTF, already undertaken in 2017, will be pursued with a view to achieving a positive impact on joint DG ECHO/DEVCO resilience and LRRD initiatives in the region.

3. Other donors' availability

In CAR as of early September 2017, USD 147.6 million have been allocated to humanitarian programming according to OCHA's FTS (30% of the SRP estimated needs, USD 399.5 million requested revised in August to reach USD 497.3 million). Besides the EU (EUR 20 million in humanitarian aid for the regional crisis), the US (with USD 14.1 million) and the United Kingdom (with USD 12.8 million) are the main bilateral humanitarian donors. The CERF²² and CHF²³ remain important UN-managed instruments for humanitarian financing in 2017.

In Chad, donor coordination remains complex, all the more so as key players (USAID²⁴, SIDA²⁵) are not based in the country. The Humanitarian Response Plan (HRP) 2017 was 30% financed in September (USD 175.4 million out of USD 588 608 263). Over the past five years, humanitarian appeals have been 55% funded, compared to 80% over the previous five years. In 2016, DG ECHO's collaboration with DFID was further strengthened. An LRRD strategy for nutrition and food security is expected to be implemented in 2018 under the 11th EDF National Indicative Programme. DG ECHO and DEVCO nutrition interventions will be complementary through the support to health authorities and the RUTF (Ready-to-use-therapeutic food) pipeline. Humanitarian and development interventions in nutrition sensitive activities (WASH, food security, Behaviour Change Communication) will also be coordinated.

²² OCHA Central Emergency Response Fund

²³ Common Humanitarian Fund

²⁴ USAID - United States Agency for International Development

²⁵ SIDA - Swedish International Development Cooperation Agency

In Cameroon, donor presence was stable in 2017. By early September, the HRP of USD 309.6 million was 32% funded (USD 99 million). BPRM²⁶ global funding to Cameroon has decreased. Canada has provided CAD 7.2 million for Cameroon in 2017. France has maintained its support to WFP and ICRC, and contributes to small-scale interventions with INGOs in Eastern and Far North Cameroon. Italy has decided to open an office in Cameroon to cover both CAR and Lake Chad Crises.

²⁶ BPRM – United States Bureau of Population, Refugees and Migration

4. Exit scenarios

Whilst no exit scenario can be envisaged at this stage, LRRD is sought wherever possible in protracted situations, in particular through the implementation of the Humanitarian-Development nexus, as explained in Section 4.2.