



Community Humanitarian Emergency Board

Synopsis of Activities and Projects 2021

Health, Education, Protection and Community Development



Synopsis of Activities and Projects 2021

CAR COUNTRY PROGRAM



Community Humanitarian Emergency Board
CAR Country Program
Avenue de France, alley 2188
Bangui - CAR
Tel (+236) 75 28 74 28

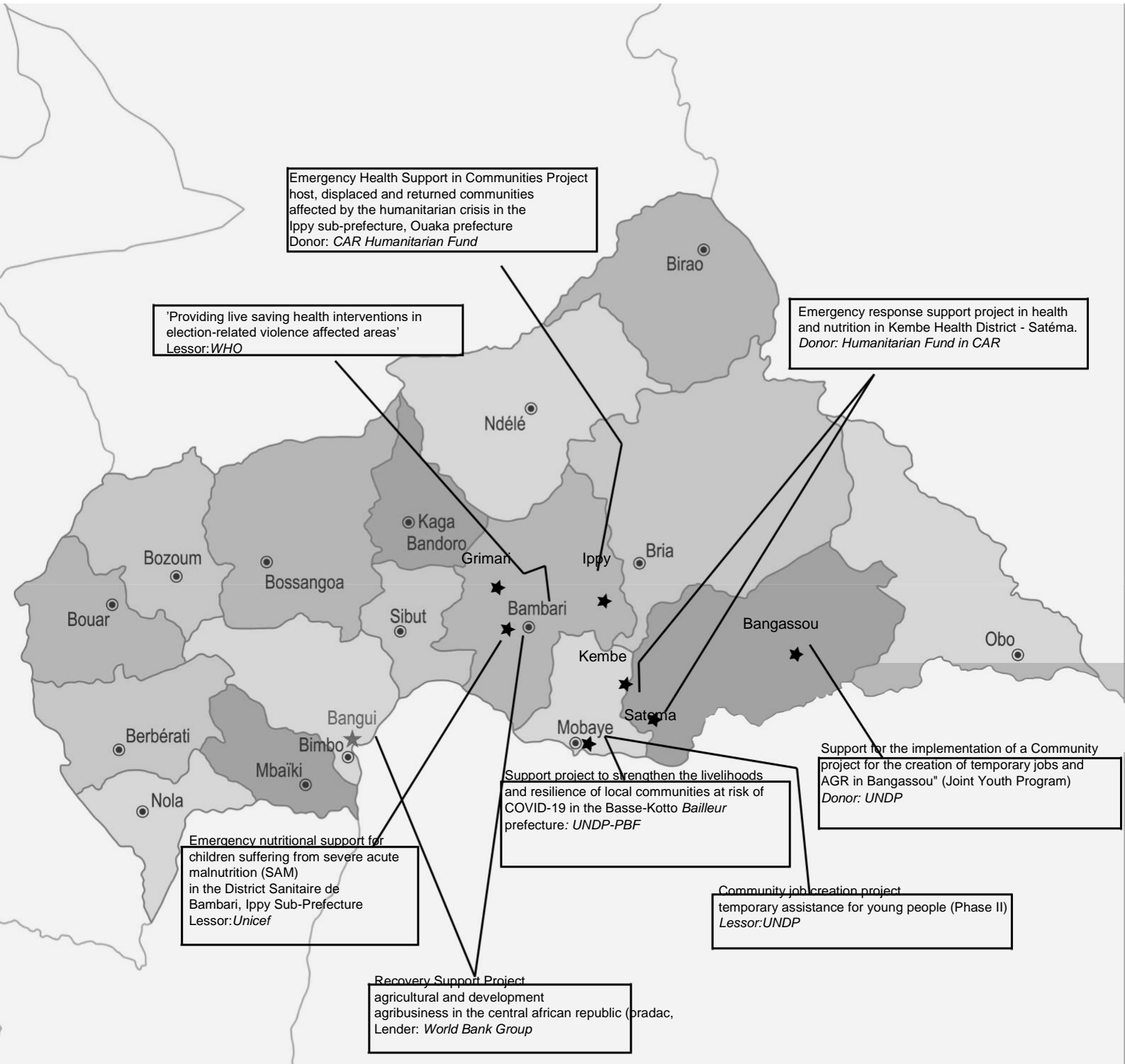
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**Livehoods,
Health & Nutrition
Service and Longlasting solutions to
Humanity**

Community Humanitarian Emergency
Board CAR Country Program
Avenue de France, Sony Cole
lane, residence 665 Bangui - RCA





Dr. MEMNIH NDOLA Francis Founding Director

There are peoples to be delivered, communities to be developed, nations to be rebuilt, Nature to be restored. I am inspired and filled with solutions. I assure you that we are up to the task. Join us to provide sustainable solutions



The implementation of the... despite the humanitarian... and, by the efforts of the... with concrete actions... people who have been... by the fighting between... rebels on almost all the... the objective has been to

In this challenging environment, COHEB, with the support of its financial and technical partners, continued to work to:

- (1) increasing access to basic social services for the most vulnerable populations in order to support public structures,
- (2) Support for the socio-economic recovery of the communities affected by these various clashes and,
- (3) Support for Government action and effort and the joint effort for recovery and the achievement of the Sustainable Development Goals (SDGs), in particular SDG 2 “End hunger, ensure food security, improve nutrition and promote sustainable agriculture”, MDG 5 “Achieve gender equality and empower all women and girls” and MDG 8 “Promote sustained, inclusive and sustainable economic growth, full and productive employment and decent work for all”.

Concretely, COHEB supported 37 health facilities in 3 health districts (Grimari-Kouango, Kembé-Satéma and Bambari), strengthened the capacities of 123 local health providers, identified and trained 413 community relays, rehabilitated and equipped 03 health facilities, built a therapeutic nutrition unit meeting the standards in Ippy.

Through the Cash-for-work activities, 820 young people in 2 prefectures (Mbomou and Basse-Kotto) benefited from temporary jobs, 140 other young people were trained in promising trades, received start-up kits and are operational. 73 groups, mostly women, benefited from the support in various kits (agricultural and AGR). COHEB has also supported activities aimed at social cohesion by organizing football matches both in the hinterland and in Bangui with women’s and youth networks.

In terms of locating humanitarian aid, COHEB worked with 4 local organizations to enable them to strengthen their operational and managerial capacities

It is the place for me to express our gratitude to our donors, in particular the FH-CAR, Unicef, UNDP, PBF and WHO for their trust and to our technical partners (Ministry of Public Health and Population, Ministry of Agriculture, Ministry of Planning and Economy and Ministry of Territorial Administration) for their different support and support during 2021. They have saved lives and reduced the suffering of many families and improved the living conditions of many. We hope that this collaboration will continue in 2022 to enable COHEB to carry out its 2022-2024 strategic plan, the main lines of intervention of which are focused on emergency response and development by extending its operations over a wider geographical coverage. With all my best wishes for 2022!!!

**ANIBED SETA Charles
Country Director**

Emergency nutritional support for children suffering from severe acute malnutrition (SAM) in the Bambari Health District (Bambari Sub-Prefectures and Ippy).

Duration: September 2020 - October 2021

Funding: UNICEF

Background and rationale

The main objective of the project was to maintain an emergency response in nutrition in 11 health centers (FOSA) in the Health District (CS Seko, PS Tagbara, PS Zoubingui, PS Badjelockoto, CS CMEBI, HS Ippy, PS Ndakara, PS Apka, PS Ngoloemanda, PS Lambla, PS Lafollo) where nutritional surveys based on the SMART methodology carried out in 2020 had revealed a worrying nutritional situation in the Ouaka Prefecture, with an acute malnutrition rate (Global) MAG) estimated at 13.2%. People in these areas also have limited access to basic social services, and economic activity has slowed almost since fighting between the GANCs and FACAs in the pre- and post-election periods of 2020

The implementation of this project should certainly make it possible to maintain a response to the nutritional care needs of children and pregnant and breastfeeding women in order to enable them to have adequate access to basic health services. COHEB has intervened in the strategy of mobile clinics to bring care closer to the communities in difficult-to-reach, landlocked and/or remote areas. With this funding, COHEB intended to improve and guarantee, both at central level and at FOSA level, the quality of the inputs for better care of children? This was also a recommendation of the “Semi-Quantitative Evaluation of Access and Coverage (SQUEAC)” survey conducted in December 2019 to meet the standards.

Some achievements

# of health workers trained in PCIMA	43
# of children 6-59 months of age screened in the community	13029
# of MAS children supported in UNT/UNTA	816
# community relays and model mothers trained in PCIMA, ANJE and COVID-19	135
# health workers trained for psychosocial support, ANJE, other EFPs (Essential Family Practices) and COVID-19	12
# of children supplemented with Vitamin A (6-59 months)	1600
# of children deparasitized with Albendazole (12-59 months)	3450
% of accompanying persons, FEFA sensitized on ANJE and PFE	85%
# of cooking demonstrations organized by month with the local community food	31
# of VADs performed by RECOs	2931
# of Oversight by NGO	4
# of Joint Supervision with EDC	2
# of monthly meeting organized with RECOs	4

Main challenges and constraints:

The Ouaka prefecture is still heavily influenced by armed groups. With a reinforced presence of government armed forces since March 2021 in some localities, armed elements suspected of belonging to rebel groups regularly carry out sporadic attacks simply to provide supplies. For example, a COHEB team traveling to Bambari was attacked and robbed, impacting the movements. Some images of:



Figure 1 Mobile clinics in Badjelokoto



Figure 2 mobile clinic scene in Badjelokoto, March 2021



Figure 3 nutritional screening in Lafollo in June 2021



Figure 4 Population Awareness of Breastfeeding in Longondé, Ndassima Axis



Figure 5 day of care in Zoubingui



Figure 6 Day of care in Zoubingui



Figure 7 Cooking demonstration at Ippy Hospital



Figure 8 Cooking demonstration at Ippy Hospital



Figure 9 Ippy UNT building constructed as part of the project



Figure 10 UNT building in Ippy built under the project



Figure 11 UNT building in Ippy built under the project



Figure 12 Ippy UNT building constructed as part of the project



Figure 13 Building Dedication Ceremony



Figure 14 Inauguration of the UNT building in Ippy

“Providing live saving health interventions in election-related violence affected areas”

Bambari and grimari sub-prefectures August-November 2021

Funding: WHO - CERF



Period covered	October - 05 December 2021
Main activities carried out	<ul style="list-style-type: none"> - Intense activities of mobile clinics <p>Activities focused on curative consultations and the provision of care to pregnant women breastfeeding women, children under 5 years of age and referencing of urgent cases. Routine screening of children with 6 to 59 months, IEC and management of PF.</p> <ul style="list-style-type: none"> - Referrals and counter referrals

Children with serious medical complications and adults with other serious medical conditions were referred to and cared for in the nearest setting.

- Community Awareness of FP, STI Prevention and Covid-19 Awareness Sessions were conducted in advance of each activity on FP, STI Prevention and Covid-19 Awareness to engage the community in behavior change.

Sequence of activities

As a reminder, the main objective of this project is to carry out activities in the field of primary health mobile clinics strategy to save lives in displaced and host communities affected by the post-election conflicts in the Bambari and Grimari-Kouango Health Districts. In order to ensure better implementation and better ownership of all planned activities, and to better respond to needs of affected communities and, finally, for better coordination with other partners in the area, the management team has held regular consultations with other partners in the area and has regularly participated in coordination meetings of humanitarian actors in Bambari to share information:

1) Mobile clinics:

To date, 28 mobile clinic sessions have been conducted by the 02 project teams based at Bambari and Grimari. 17 localities were affected and the majority of the axes identified under this project have

also covered include:

DS Sanitaire Bambari: Bambari-Grimari axis, Bambari-Bakala axis and Bambari-Kouango axis

DS Sanitaire Grimari: Grimari-Bakala axis, Grimari-Kouango axis, Grimari-Sibut axis and Grimari-Bakala axis

- Targeted Fosas

The patients referred are referred to the targeted FOSAs, namely:

The Siou CS, the Gbakomalepa CS, the Wabe CS, the Togo CS, the Pladama CS, the Yaketché CS and the Grimari, Bambari referral hospital

- Localities covered by axis .

	LOCALITIES /SITES	Distance	AXIS	DISPLACED POPULATION	FOSA + NEAR
DS Bambari	Lebada	5km	Grimari-Bambari	About 1600 from Bakala	Siou CS
	Gbakomalekpa	PK 30	Grimari-Bambari	About 850 and are located in 5 villages. From Bakala, Boyo and Alindao Axis	Gbakomalekpa
	Madomalous	PK 37	Grimari-Bambari	Around 900 located in Yakota, PK 10	CS Madomale
	Wabe	PK 20	Kijigra	About 678 coming mostly the Alindao axis,	CS de Wabé
	Togo	Pk 20	Bambari-Axis Bakala	About 392 from boyo, Koutchou, Tagbara and Atongo-Bakari	CS of Togo
	Pladama	PK 10	Kouango	ND	CS Pladama
	GRIMARI KOUANGO	Yaketche	PK 27	Grimari-Bambari	About 760 from the axis Kouango
Ndjangala		PK 15	Grimari-Bakal	About 200 from Bakala	HD by Grimari
Yabitha		PK 22	Grimari-Bakala	About 710 from Bakala	HD by Grimari
Ngoulinga		PK 5	Grimari-Kouango	about 430 from Lihoto and Kouango	HD by Grimari
Mindi Kotta		PK 3	Grimari-sibut	Around 100 from Bakala and Kouango	HD by Grimari
Lakandja		20	Drimari-Kouango	About 150 from Kouango, Bangao and Lihoto	Lankandja CS

Synopsis of the 2021 Activities

The results of the activities	As a reminder, the dominant pathologies recorded are: malaria, IRA, acute watery diarrhea (AAD), intestinal parasites, staphylococci, scabies, conjunctivitis and STI.		
	Activities	Total realized	Comments
	Adult curative consultations and pediatric (disaggregate by sex)	4022 children under the age of 5 pediatric consultation receipts of the 5500 709 pregnant women registered to the NPC	For children, the dominant disorders remain malaria (approximately 1367 cases screened), IRAs (811), AADs (474), dermatosis (93)
	Referencing and against referencing	A total of 51 children were referred, including 26 Grimari District Hospital and 15 at Bambari Regional Hospital	These are all cases of children referred. severe cases with different pathologies have been referred to Grimari Secondary Hospital and Bambari Regional Hospital for care.
	Awareness of FP and STI prevention	Around 1500 people sensitized on the prevention of IST and on PF	These sensitizations are taking place during mobile clinics
	Training of care workers and RECO	115 RECO (49 F and 66 H) 42 local staff (27 H and 15 F)	It had been in effect since project launch
	<p>Community awareness on FP, STI prevention and COVID-19 awareness</p> <p>Awareness sessions were conducted in advance of each activity on FP, STI prevention to bring about behavioral change in the community.</p> <ul style="list-style-type: none"> - Various topics were discussed: <ul style="list-style-type: none"> - The importance of breastfeeding - Birth spacing by the pill method and the fertile period - Use of condoms as a means of STI prevention - COVID-19 Symptoms and Barrier Measures <p>These activities have affected children under 5 years of age, pregnant women and breastfeeding women.</p>		
Some Challenges and Opportunities	<ul style="list-style-type: none"> - Access: the poor state of the roads makes it difficult to access certain localities, particularly on the road Grimari-Bakala and Grimari-Kouango 		
	<ul style="list-style-type: none"> - Coverage: Mapping with the participation of FOSA officials has made it possible to reach almost all locations hosting IDPs - Security: The project area is relatively quiet and no security incidents have been recorded to date - Affected communities have a strong interest in this project, which enables them to access health care 		



Referrals to Grimari after consultations on the Bakala axis



Scenes of consultations

1. PROJECT INFORMATION		
Organization:	Community Humanitarian Emergency Board	
Allocation Type:	2020 First Standard Allocation	
Project Title:	Health and Nutrition Emergency Response Support Project in the District Sanitaire de Kembe - Satema.	
Fund Code	CAR-20/HCF10/SA1/NUT-HLT/INGO/17693	
Cluster:		
Primary Cluster	Sub Cluster	Percentage
Nutrition		50,00
Health		50,00
		100

Background and rationale for the project:

Maintaining the scaling up of the emergency humanitarian response in Health and Nutrition in the Kembe - Satema Health District in the context of the COVID-19 pandemic was the main objective of this project which aimed to improve access to basic and emergency health care for the most vulnerable people in priority areas, as well as to strengthen the supply of mental health, psychosocial and reproductive health support, and nutrition to screen and manage malnutrition in FOSAs and mobile clinics in remote villages for children under 5 years of age, actively search for cases of malnutrition, referencing and promotion of Infant and young child feeding practices (ANJE) in Kembe and Satema sub-prefectures, Lower Kotto prefecture. It covered urgent humanitarian health and nutrition needs in 14 FOSAs in the Kembe Health District - including Satema CS Satema, CS Libanga, PS Guilo, PS Bangourou, PS Limassa, PS AtaKoua-Koua, PS Mossombo, CS Yangbassi, Kembe Hospital, PS Ndikassi, PS Dimbi, PS Doungoare, PS Voula, and PS Gboulovou - and responded in an integrated and multisectoral manner with other sector interventions and directly supported life-saving humanitarian actions online with the Humanitarian Needs Overview - CAR (HNO) for 2020.

Key Achievements and Lessons Learned

COHEB through this project was able to

- strengthen screening, referencing and care activities for children 0-5 years old and FEFA,
- ensure the prevention of malnutrition including ANJE activities, deworming and vitamin A supplementation.
- stepping up preventive measures through awareness raising messages on basic hygiene rules in households, health centers, mobile clinic sites and providing preventive food supplements to children and FAFEs,
- Train and reinvigorate the RECO network with key prevention messages in the context of COVID19, ensure regular availability of essential nutritional inputs and medicines in nutritional units and
- train moms to detect and monitor the nutritional status of children using the brachial perimeter.

Thus, in fixed and mobile strategy:

1310 children with AMS were affected in the UNTA and UNTA 2120

children with AMS

2517 FEFA screened

617 FEFA suffering from malnutrition to be supported by WFP

50 PB-mothers (model mothers) to be trained for the training of mothers with PB

35,000 people were received for curative consultations for malaria, diarrhea and acute respiratory infections.

1034 FEFA in CPN/CPoN,
 45,000 people were affected by the awareness
 9,300 children under 5 years of age were screened for malnutrition
 3430 children aged 6-59 months supplemented with Vitamin A and deparasited
 80% of pregnant women seen and followed for antenatal visits 1 to 3 and at least 60% assisted by qualified personnel during delivery,
 60% of cases of GBV received psychosocial counseling,
 12273 people sensitized on the psychopathological manifestations of mental disorders and associated specific pathologies and mhGAP diseases



mobile clinic in Batta Indou village



mobile clinic in the village Batta Indou



‘ Emergency health support project in host, displaced communities and returned affected by the humanitarian crisis in the sub-prefecture

De pippy, prefecture of la ouaka’

Car-21/hcf10/sa1/hlt/ingo/19034

Main activities carried out

From 1 to 15 August 2021, a team made up of members of the central coordination of COHEB and the Bambari District carried out a mission in DS Bam-bari, more specifically in Seko and Ippy and some flagship localities in order to strengthen the activities of the emergency health and nutrition project in the said DS, activities launched since mid-December 2020 in a security context too tense marked by the pre and post-election deadlines.

- Training of 06 COHEB Psychosocial Officers in Bambari;
- Training of 35 local care providers from 13 SD health units on nutritional PEC, epidemiological surveillance, classification of mental disorders and their clinical signs, mental health cards
- Presentation and official launch of the project in Ippy and Seko
- Recycling of 155 NOCs (from 32 SD locations) on mental health, mental illness, identification and referencing of mental illness cases, etc.
- Endowment of all 13 targeted FOSAs with medicines
- Rapid assessment in mental health and psychosocial support.

Results of the activities carried out

1- Training of 06 Psychosocial Agents of COHEB in Bambari:

06 APS have been trained on topics related to Mental Health and Psychosocial Support. The three-day training was supported by WHO's mhGAAP module as well as the module on prevention, Angry Stress Management and Post-Traumatic Stress Disorders, psychological counseling worksheet, psychological first aid, clinical psychology and its role in emergency response, VBG, maintenance worksheet and priority conditions. Practical exercises on applied psychotherapies were also carried out.

2- Presentation and official launch of the project:

Chaired by the 1st citizen of the City of Ippy accompanied by the 1st Deputy to the Mayor, Mr. Ibra-him Moussa, the Chief Medical Officer of the District Intermayor, the health authorities, the Municipal Councilors, the local civil administrative authorities, this ceremony was the opportunity to present the project, the landlord, the targets, the main activities, the duration, ... and an opportunity to understand their proposals for the smooth running of the activities.

3- Training of Health Workers and Community Relays

3.1 Mental Health Officer Training

After the opening ceremony a pre-test (Cfr: annex) was organized to collect the level of knowledge of the participants on the subject matter before getting to the heart of the matter

A brief presentation was then made to give a clear view of national policy mental health in CAR (The National Plan and Policy

ationale in CAR was voted in 2011, given the number

high rates of mental health and dies psychiatric nowadays statics have five times).

This led to the development of the following themes:

Day 1:

- General concept of mental health care and psychosocial care.
- Etiology of mental health problems and psychiatric illnesses
- Symptoms of Mental Health Problems
- Introduction to WHO's mhGAP-GIH Response Guide
- Depression (depressed mood disorder)
- Mania (Manic mood disorder)
- Bipolar disorder (bipolar or manic-depressive disorder)
- Psychoses

Day 2:

- Psychoses
- How to listen
- Epilepsy/seizures
- Developmental Disorder Child and Adolescent
- Behavioral disturbances in children and adolescents
- Drug or alcohol use disorder

Day 3

- Activities for the third day
- Dementia
- Self-Aggressive and Suicidal Conduct
- Other non-medically unexplained emotional complaints
- Post-Traumatic Stress Disorders, Stress Management and Anger
- Burn out management
- Explanation of Data Collection Sheets and Referencing Circuit

Prior to the completion of the training, an explanation of the data collection tools; recommendations; post-test and final evaluation of the workshop were undertaken.

Figure 2: Training of Mental Health Officers

3.2 Training of Community Mental Health Relays

Divided into two groups, held by DPAs assisted by a Psychoclinician, they received two days of training on the identification of cases of mental illness, etiological factors, patient referencing circuit and practical exercises supported by the mhGAA module. They also worked on practical cases mixed with providers and psychosocial workers.

3.3 Recycling of AS and RECO into Health

55 local health workers have been retrained, on surveillance, PECIMA and PEC of common diseases in the area, with the support of MCDI

The RECOs and model mothers were also retrained, focusing on practical exercises on community activities (awareness raising and community mobilization), malnutrition screening and referencing cases, always with the support of SD members.

4- Fosa allocation:

The 13 FOSAs covered were provided with WHO kits (16 Medical Basic Unit Cartons, 8 Malaria Basic Module Cartons, 36 Medical Supplemental Unit Cartons, 8 Pneumo A Kit Cartons, 8 Pneumo B Kit Cartons and 21 Malaria Supplemental Module Cartons), Unicef kits (310 Plumpy Nut Cartons), as well as additional medicines and materials purchased by Coheb.

Results obtained by pathology

Pathologies	Zones	Men	Women	Boys 6 to 12 years	Girls aged 6 to 12 years	Total
Depressed mood disorder	Ippy		1			1
	Seko	1	1			2
	Tagbara	1				1
Psychosis hallucinatory	Ippy		1			1
	Seko		2			2
	Lafolo	2				2
Epilepsy	Ippy		2		3	5
	Seko	2			2	4
	Ippy			1	1	2
Drug or alcohol use disorder	Seko	1				1
	Tagbara	1				1
	Lafolo	1	1			2
Severe Post Traumatic Stress Disorder with Peri-Traumatic Dissociation	Ippy	1	2	1	1	5
	Seko	1	1		2	4
	Tagbara	1	1		1	3
Moderate Post-Traumatic Stress Disorder with Peri-Traumatic Distress	Ippy	2	1	1		4
	Seko	2	1	2		5
	Tagbara		1	2	1	4
Acute stress	Ippy		1			1
	Seko		2			2
Total	Tagbara		1			1
		16	19	7	11	53

Difficulty encountered

- Difficult movements in view of the operations to install State authority in the areas through which the mission passes,
- Roads blocked by fallen trees,
- Degraded roads and difficult to navigate during the rainy season,



Figure 2: Difficulties with road conditions during the mission



Figure 2.
 Emergency health support project in
 host, displaced and returned
 communities affected by the
 humanitarian crisis in the sub-prefecture
 De ippy, prefecture of ouaka”Car-21/
 hcf10/sa1/hlt/ingo/19034

Project title: 'Support project for agricultural recovery and agribusiness development in Central Africa' (PRADAC)

Duration: April 2021- April 2024

Financing: World Bank Group (IDA: International Association for Development)

Background and rationale

The main objective of this government project, initiated with the support of the World Bank, is to support peace-seeking efforts through the development of productive infrastructure and skills for agricultural and rural entrepreneurship, the improvement or construction of community infrastructure necessary for the promotion and development of agricultural and agribusiness activities in urban and peri-urban areas of Bangui and Bambari and their surroundings within a radius of 45 km.

The aim is to support the Government in meeting these challenges by consolidating existing activities, supporting the agro-pastoral production of micro-farmers, developing agribusiness in the Bangui and Bambari area within a radius of 45 km and providing an immediate and effective response in the event of an emergency or a potential crisis.

It is also an opportunity to strengthen social cohesion and the search for stability and peace within communities.

Some achievements

- of villages identified for the development of community productive infrastructure: 51
- CVDs trained in the management of village self-promotion organizations and community facilities, environmental health and sanitation, basic concept of financial management of productive infrastructure: 51
- COGES trained in the management of village self-promotion organizations and community facilities, environmental health and sanitation, basic concept of financial management of productive infrastructure: 51
- of groups/cooperatives/individuals micro-farmers trained in business plan development: 253
- of groups/cooperatives/individuals micro-farmers trained in the development of micro-pastoral agros projects and having submitted business plans for financing by UNCT/PRADAC: 253

Main challenges and constraints:

Bambari sub-prefecture and its surrounding areas remain under the control of armed groups. With a reinforced presence of government and allied armed forces in the town for some time, armed elements suspected of belonging to rebel groups occasionally carry out sporadic attacks for the simple purpose of refueling, making it difficult for animation activities to reach the roads.

Some images of the realizations



Contact with local authorities Boali



Village identification



Micro-farmers training on agribusiness



CVD members and COGES training on infrastructure management

Support project to strengthen the livelihoods and resilience of local COVID19 at-risk communities in Basse Kotto Prefecture and Mobaye Sub-Prefecture

Duration: December 2020 - December 2021

Funding: UNDP under PBF funding

Background and rationale

In recent decades, the sub-prefecture of Mobaye has experienced serious political and security crises that have severely weakened institutions and hindered the economic and social development of the locality. In addition to the collapse of the administration, with targeted attacks on state structures and looting of the livelihoods of rural communities, the consequences have proved disastrous on the human level (killings, rape, mass displacement of populations...).

Despite efforts since the return to constitutional order in 2016, Mobaye's environment remains very fragile. On top of this, production systems, including subsistence agriculture, on which most of the population depends, have collapsed, making people heavily dependent on humanitarian aid for their livelihoods.

This was the difficult context in which the COVID-19 crisis occurred, with potentially devastating consequences, particularly for the most vulnerable groups or communities. In addition to the toll on lives lost, the pandemic's outbreak would unravel some of the gains made in recent years in terms of rehabilitating basic public services, including health. As of July 16, 2020, the country had 4,362 confirmed COVID-19 cases and 53 deaths and is facing a surge in infections

The COVID-19 crisis is therefore a major challenge for this prefecture of Basse-Kotto, for the health response to the crisis but also for coping with the economic and humanitarian consequences. If left unchecked, the virus infection could be explosive and could result in a precipitous dispersal of populations, without adequate accompanying measures. In general, the COVID-19 crisis will be one too many.

The project is part of the overall effort to respond to the Covid-19 crisis in the Central African Republic. Its main objective is to help reduce the impact of the COVID-19 crisis on the living conditions of the people of Basse-Kotto. More specifically, they are:

- Reduce the risks of spreading the Covid-19 virus through information, awareness raising and promotion of barrier measures;
- Support the development of income-generating activities and the improvement of people's livelihoods, in particular through the reinvigoration of growth sectors;
- Reduce the vulnerability of populations, especially women and youth, to the consequences of the crisis.

In view of the above, the project has contributed to combating the spread of the virus and at the same time supporting the revival of income-generating activities (AGR) and strengthening the resilience of the populations of Mobaye.

Some achievements

- 25,000 people affected by COVID-19 awareness through radio messages and posters
- Awareness-raising sessions organized: 05
- Number of persons directly sensitized, by sex: 500
- % of local committees involved in disseminating barrier measures: 5%
- Number of infrastructure rehabilitated or built: 3 (1 recreational area, 1 slaughterhouse, 2 crossing structures)
- Number of kilometers of dirt road maintained: 5 km of roads on each of the two selected axes (Langandji and Zangba axes)
- Number of temporary jobs created: 350
- sustainable employment creation by gender: 20 groups from THIMO (200 members)
- of women's groups set up and developing AGRs: 15 groups (150 members)
- of more vulnerable people with access to basic necessities: 50

Some images of the achievements (support for vulnerable people)

Grouping for coupon distribution

Distribution of food coupons

Food coupon dump

Recreation Area



Community use of recreation area space



Community use of slaughterhouse space



Rehabilitation of the "small bridge" crossing from Loumba to Mobaye Center axis Somba





Maintenance of roads on axes



Enlisting young people in the construction and rehabilitation of infrastructure (Temporary job creation)



Training sessions in incubation centers



Synopsis of the 2021 Activities



Awareness meeting sessions with AGR beneficiaries

Community project to create temporary jobs for young people in Mobaye: Joint project for young people

Duration: March - December 2021

Funding: UNDP- PBF

Background and rationale

For several decades, the context of the sub-prefecture of Mobaye has been marked by recurrent political and security crises that have greatly weakened the institutions and hindered the economic and social development of the locality. These crises culminated in the emergence of the Seleka rebellion in 2012 and the clashes with the Anti-Balaka militia and community self-defense groups that followed and led Mobaye into an unprecedented spiral of intercommunal violence. In addition to the disastrous human consequences (killings, rape, mass displacement of populations...), it has resulted in the collapse of the Administration, with targeted attacks on public buildings and equipment and a mass departure of officials and state agents from the sub-prefecture.

Despite the efforts undertaken in recent years for the stabilization and socio-economic recovery of the country, notably through the implementation of the RCPCA and the national strategy for the restoration of State authority, the challenges remain. On the security front, more than 60% of the territory is still occupied by armed groups, with all the consequences in terms of constraints on the redeployment of the administration and the revival of economic and social development.

Thus, with all the economic potential of Mobaye, this sub-prefecture is in the “Low” category, reflecting the low development of basic social services and the extreme precariousness of the living conditions of the population.

In Mobaye, almost all the administrative infrastructure, including the prefecture and the premises of the internal security services (police and gendarmerie), are to be rehabilitated or rebuilt. In this context, in September 2019, with financial support from the PBF, UNDP and FAO launched a joint project to support local governance and equitable access to the peace dividend in the Basse-Kotto and Haut-Mbomou prefectures. The main objectives of the project are:

- (i) support the momentum of redeployment of the administration and capacity building of decentralized and decentralized structures of the administration with a view to better delivery of basic public services;
- (ii) mobilize all local actors around a shared vision of local governance, supported by the development and implementation of coherent and realistic local development plans through a participatory and inclusive approach; and

(iii) as dividends of peace and stability, to improve the conditions of the population in a lasting way by reviving productive activities, particularly in the agriculture and livestock sectors.

In line with the commitments made under the joint UNDP/PBF project, the intervention priorities have been focused on the rehabilitation and equipping of administrative buildings. To this end, after consultations with the local administrative authorities, it was agreed in the context of the implementation of this project, and on the basis of the experience of collaboration in the implementation of the joint project - young people, UNDP decided to conclude a partnership agreement with the NGO COHEB for the construction and equipping of some administrative buildings for the benefit of decentralized services and local authorities.

Some achievements

- o Covid-19 Awareness Caravan Organization,
- o Rehabilitation and equipment of office furniture the building of the Basse-Kotto prefecture,
- o Rehabilitation and equipment of office furniture the building of the Social Affairs Service of Mobaye, which has about ten rooms and can accommodate several prefectural services of the Basse-Kotto,
- o Refreshment of internal painting and office furniture equipment in the building of the marie de Mobaye,
- o Rehabilitation and equipping of the Mbelima City Hall with office furniture,
- o Construction and equipping of incubation centers in sewing, computer, carpentry, welding,
- o Distribution of 150 young beneficiaries of temporary employment (THIMO) into 24 groups.

Main challenges and constraints:

The transport of materials, which is only possible by river during low water periods, has more or less delayed the implementation of activities. In addition, between the end of December 2020 and January 2021, insecurity related to the threat of CPCs during the electoral period led to the temporary suspension of activities.

Some images of the realizations



Building Prefecture Basse-Kotto



Social Affairs Building



Building Mairie de Mobaye Center



Building Mairie de Mbelima



Outline Of The 2021-2022 Action Plan

Continuous improvement!!!

- Drawing on lessons learned
- Strategic Plan 2022 set out an ambitious agenda to make COHEB a more innovative and effective partner in delivering results, and a trusted partner of donors in delivering the SDGs.
- The 2022 Strategic Plan continues on this path and builds on the progress made over the past four years. It is based on assessments as well as lessons learned, including our contribution to the COVID-19 response

1- Health and Nutrition

Strategic objective	Sub-Objectives	Some major activities
OS1: Maintain reinforcement of the humanitarian response Health and Nutrition in SD in a context marked by COVID-19 pandemic	SO1: Ensuring continuity of essential health and safety services supply chain related for direct response from public health to pandemic and others essential services	<ul style="list-style-type: none"> - Organize healing consultations in the affected communities - Deploy to the main FOSAs (hospital, health centers and health posts, a qualified personnel (physician, FDI, midwives and nutrition specialists) to ensuring the provision of quality primary and reproductive health services (prenatal, postnatal, and delivery visits, planning family care, newborn care, etc.). - Train/retrain health workers/care providers on the treatment of most common diseases and on water chlorination. - Establish Mobile Clinics in communities with difficult access is a mobile clinic by main FOSA per week - Ensure regular supply and management of medicines/health kits emergency and reproductive health at FOSAs
		<ul style="list-style-type: none"> - Raise mass awareness, as well as through home visits to PFE, COVID-19 barrier measures, on prevention of LBW and risk of protection - Support the operation of the SD - Support ENP activities (ensure the transport of vaccines and inputs and integrate ENP activities in mobile clinics; - Support the SD's potential emergency response plans
	<p>SO2: Preventing malnutrition in children under 5 and Pregnant Women and Lactating women in the areas vulnerable.</p> <p>SO3: Mobilizing Finance to ensure reinforcement of the health system in the SD</p>	<ul style="list-style-type: none"> - Screening cases of acute malnutrition (MUAC, weight and height measurement) on a passive basis and active, + refer to management structures, UNTA for severe cases without complications, and UNT for severe cases with medical complications, - Recruit, train and equip health workers, Model Mothers and RECO on the PECIMA, PECIME with the support of the accredited staff of the District Framework Team; - Provide regular health facilities with treatment units malnutrition in nutritional inputs, materials and medicines for the systematic treatment - Organize visits of formative supervisors jointly with the District sanitary - Support the operation of COGES in addition to overall motivational costs - Screening for FEFA in FOSAs and communities and admitting to the PEC with therapeutic feeding for those suffering from malnutrition - Advocate with donors and other humanitarian actors for a broad support for the health system and the department's strategy

2- Solutions sustainable and Food Security

Strategic Objective	Sub-Objectives	Some major activities
OS1: Accompany government efforts and partners in the attainment of the objectives of the RCPCA plan	SO1: Helping communities in building resilience facing multiples shocks and crises including conflicts, the climate change, disasters and epidemics.	<ul style="list-style-type: none"> - More actions for infrastructure development social and community - Directly support local groups and associations for a better consideration of priorities for action; - Provide institutional support to women's and youth networks to long-term actions - Conduct strategic partnerships with other entities to meet the needs of affected communities.
	SO2: Strengthening Security community food affected through the supply agricultural tools and inputs for quality	<ul style="list-style-type: none"> - Support agro-pastoral groups to improve the quality of production and quality and quantity - Train women and youth groups and networks in youth entrepreneurship and savings and credit techniques - Advocate for the raising of funding to improve access Communities providing basic social services

recreational activities aimed at strengthening social cohesion



Some Members of Our Team

Simon Pierre Lektua Baah
Programs Coordinator

Boniface MOKAMA
*Head of Security Department
Food and Sustainable Solutions*



Sylvia Enanga Koggerson
Accountant



Robert GUIENTSING
Field Manager, Mobaye



Dr. FOSSI Annie
Medical Coordinator



**BIDA YAKONZI Epse
NGOMENI
TCHIENKOUA**
*Pretty Grace Jeannine
Finance Assistant*



Olivier HYALONDO
*Head Sub-Base,
Bambari*



Théophile LUENGE
*Focal Point Mental
Health and
Psychosocial Support*



Joël-Béni AZOUKA
*Program Assistant,
Bangassou*



Tinyih Sandra KENG
HR and Admin Manager



Fred DJOUBISSI
Tracking and Evaluation Lead



Nicoline LAMBI T.
Logistics Manager



Eddy-Rufiin BANZIMA
Base Chief, Alindao



Leslie WANGUE
Logistics Assistant



Stephanie NANGA
*Finance and
Lessor Compliance*

Our Logistical Capacity

Items	Quantity
Land Cruiser Ambulance	06
Land Cruiser Hard-up	01
Land Cruiser pick-up	01
Motorcycle DT	08
Private vehicles for co-ordination staff	03
Logistics bases and sub-bases	10 (Bangassou, Bambari, Ippy Alindao, Mobaye, Seko, Satéma, Kembé, Dimbi, Kouango, Grimari)



Some images of the difficulties of access by teams in the areas of operation



Our technical and financial partners



