

Rapid Response Mechanism: Central African Republic

Annual factsheet

01 January - 31 December 2024



The Rapid Response Mechanism (RRM) is designed to monitor humanitarian action, conduct multisector assessments (MSAs) of needs and to implement several types of emergency responses, including distributions of essential non-food items (NFIs), emergency water, sanitation and hygiene (WASH) interventions, as well as cash transfer programming (CTP). In 2024, the RRM was made possible through the support of USAID's Bureau for Humanitarian Assistance (BHA), the Directorate-General for European Civil Protection and Humanitarian Aid Operations (ECHO), the Swiss Agency for Development and Cooperation (SDC) and the Swedish International Development Cooperation Agency (SIDA). All RRM products are available on the [portal](#).

Mandate

The RRM is designed to provide rapid humanitarian assistance following both conflict-related shocks and natural hazards which resulted in population displacement, as well as following shocks after the return of formerly displaced people. The RRM intervenes in coordination with the humanitarian community and provides NFI, WASH, and/or CTP assistance, prioritising vulnerable populations and areas with limited response capacity. The RRM aims to start the intervention within 20 days following the confirmation of the alert. Three key pillars are defined in its mandate :



Maintain a humanitarian monitoring and needs assessment system in order to inform the RRM's partners and the humanitarian community while ensuring close coordination between the different actors;

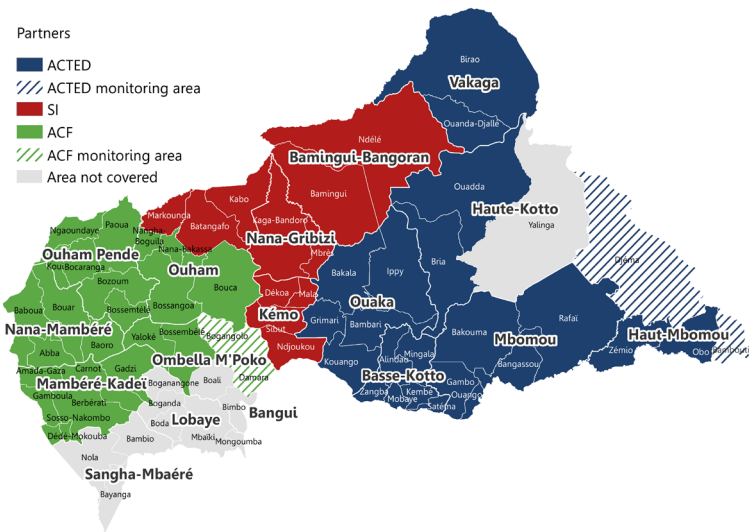


Provide NFIs and ensure access to basic WASH services to the most vulnerable populations affected by a sudden shock (violence, displacements, returns, natural disasters);



Develop synergies with other actors to provide support in domains not covered by the RRM (health, protection, etc). In 2024, the RRM additional activities represented 54%, all sectors combined: 38% in food security, 8% in WASH, 31% in protection, 4% in health, 8% in CCCM/Shelter/NFI, 8% in logistics, and 2% in education.

2024 Coverage

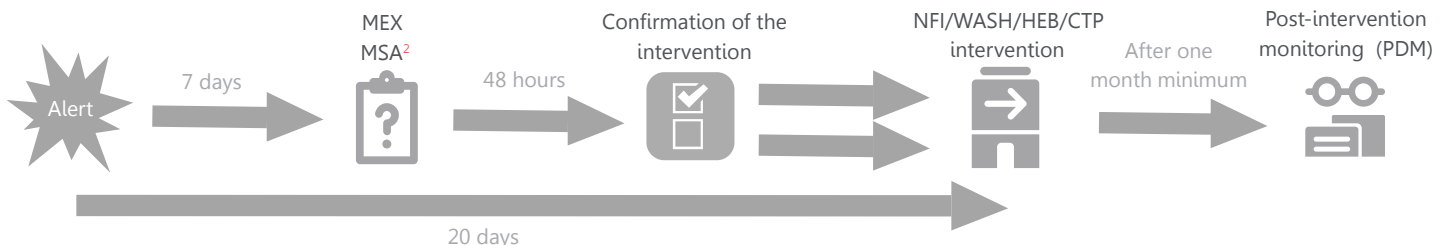


In 2024, three International non-governmental organizations (INGOs) - Action against Hunger (ACF), Agency for Technical Cooperation and Development (ACTED) and Solidarités International (SI) - served as implementing partners of the RRM, under the coordination of the United Nations Children's Fund (UNICEF).

The RRM covered thirteen of the twenty prefectures of Central African Republic and performed a continuous monitoring in the so-called "RRM-uncovered areas", thanks to the use of the key informants approach. Thus, the RRM managed to keep a global overview of shocks happening throughout the country, while giving itself the capacity to potentially intervene in all regions for the alerts falling under its mandate.

110 alerts¹ were launched and shared with the humanitarian community by the partner NGOs, compared to the 124 recorded in 2023. These shocks, 67% of which were linked to violence, affected more than 219,973 individuals.

Methodology



The RRM intervenes to support in case of a shock:



Displaced populations (at least 100 households) whose movement occurred within the last 3 months and/or who have only been reachable by humanitarian actors for less than 3 months.



Returnees³ or spontaneously repatriated⁴ populations (at least 100 households) whose return occurred within the last 3 months and/or who have only been reachable by humanitarian actors for less than 3 months.



Host communities⁵ (at least 100 households).

¹An alert is a document that informs the humanitarian community on a shock caused either by violence or a natural disaster for example, leading to a displacement of population. ²MEX and MSA are both pre-intervention evaluations of the needs after an alert is shared with the humanitarian community. A MEX is an exploratory mission, while an MSA is a complete needs assessment. ³The term 'returnees' refers to people who have come back to their pre-crisis location following a period of internal displacement. ⁴The term 'repatriated' refers to former refugees who have returned from neighbouring countries. ⁵The term 'host community' refers to individuals that have not been displaced as the result of a humanitarian-related event.

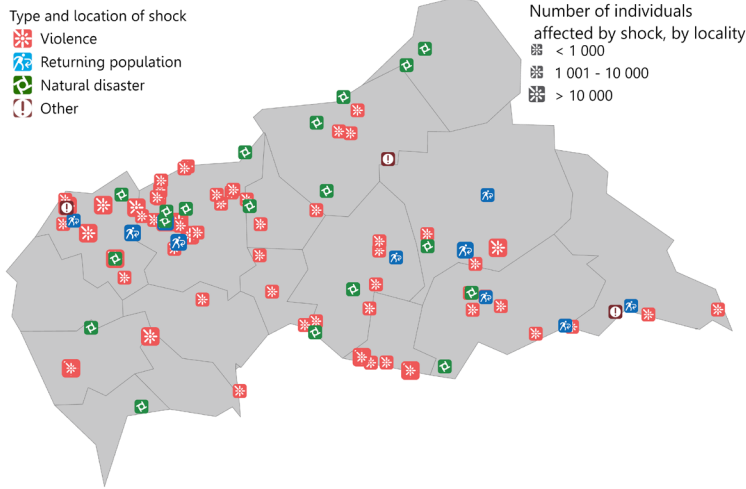
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Alerts received or sent by the RRM in 2024

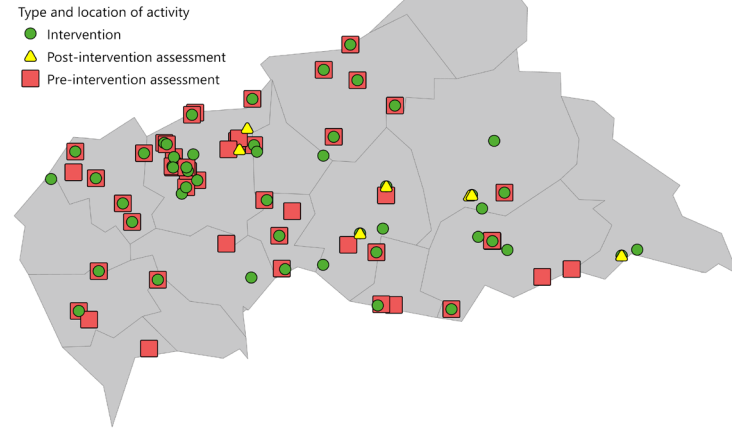
Alert distribution in 2024:



Overview of RRM activities in 2024

Activity distribution in 2024:

(MEX, MSAs, SMART⁶, NFI distributions, WASH interventions, CTP, PDM)



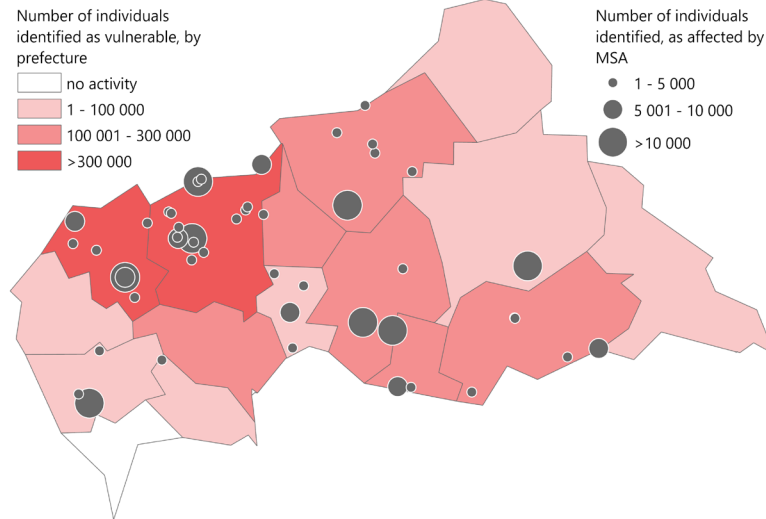
Alerts received or sent monthly in 2023:



110
alerts in 2024

Results of MSAs in 2024

Affected individuals identified in 2024:



MEX:



MSA:



NFI distributions:



WASH interventions:



CTP interventions:

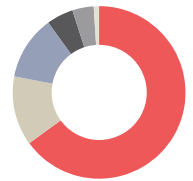


Affected individuals identified in 2024, by status:

219,273⁷
affected individuals

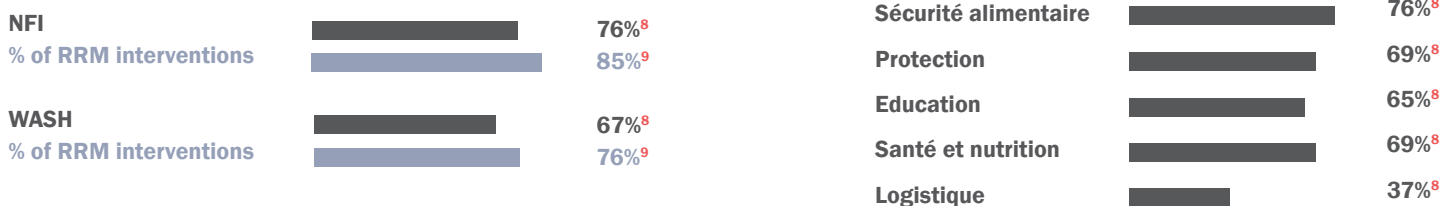
(43,249 households)

Displaced persons	65%
Host community	13%
Returnees	12%
Rapatriates	5%
Refugees	4%
Other ¹⁰	1%



Recommended interventions, by sector:

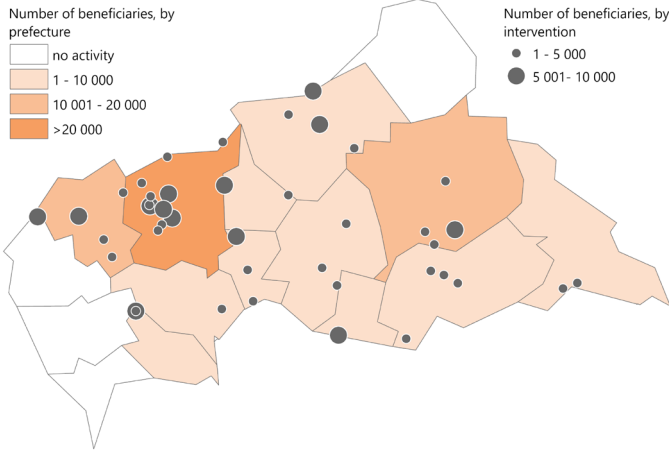
Following MSAs, recommendations for each sector are provided by the RRM based on the key indicators collected.



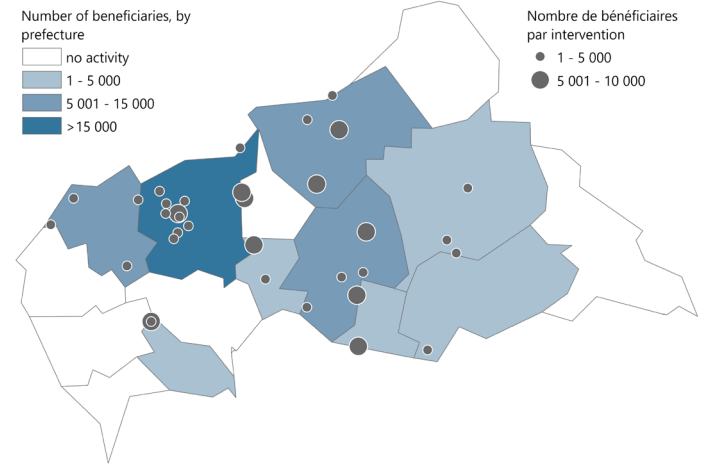
⁶Nutrition Screening. ⁷This number refers to the number of people initially impacted, when the alert was published. ⁸Percentage of MSA advising for an intervention in the sector covered, out of a total of 51 MSA in 2024 and 53 in 2023. ⁹Percentage of interventions conducted by the RRM in relation to the number of MSAs advising for an intervention in the sector covered. ¹⁰Other refers to individuals with mixed or unclear population status.

Distribution of beneficiaries in 2023

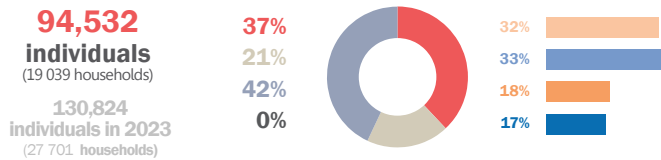
NFI distributions :



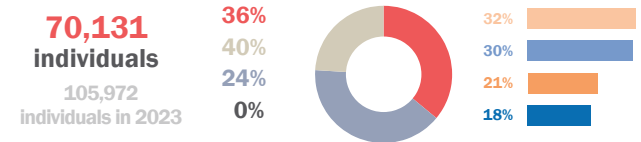
WASH interventions :



NFI beneficiaries, by status and demography :



WASH beneficiaries, by status and demography:

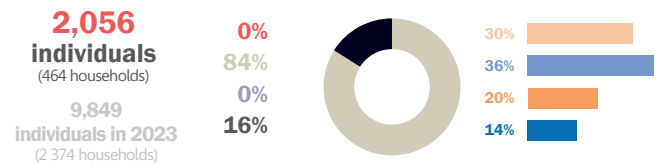


Unique RRM beneficiaries (NFI, WASH, CTP) :

113,401 individuals or **52%** individuals affected by shocks

Legend:
Displaced persons (Girls) Host community (Boys) Returnees (Women) Refugees (Men)

CTP beneficiaries, by status and demography:



Delays

The RRM remains the frontline response program, with a commitment to intervene within a maximum of **20 days after a shock is confirmed**. However, several challenges hinder access to affected populations and the implementation of interventions. The deterioration of humanitarian access, exacerbated by the 2021 post-electoral crisis, the reconfiguration of armed groups, and insecurity (presence of IEDs, violence, and military operations), has caused delays and limited intervention windows. Additionally, logistical constraints, particularly the poor condition of roads and weather conditions during the rainy season, further slow down the deployment of RRM teams.

In response to these challenges, COPIL¹¹ has strengthened the action plan to minimize internal delays by implementing several strategies: pre-positioning of kits, immediate WASH interventions following assessments, MSA/Targeting¹² coupling based on the nature of the shock and the security situation, improved coordination both in the capital and field levels, and more flexible approaches to adapt to the evolving context.

	2023 Response Time	2024 Response Time
Median number of days between the publication of an alert and the beginning of a MSA	07 days	09 days
Median number of days between the publication of an alert and the beginning of an intervention	17 days	23 days

PDM

8 PDM conducted in 2024

Proportion of beneficiaries reporting to be satisfied with the quality and quantity of the NFI kits:

93% Quality
82% Quantity

NFI 97% of beneficiaries considered they received NFI distributions on time

97% of beneficiaries considered all the components of the NFI kits were useful

The activities carried out during WASH interventions were adapted to address the highest priority needs of each community. In 2024, these interventions included **59 hygiene awareness sessions**, the construction of **77 emergency latrines**, the rehabilitation of **98 water points**, and the establishment or revitalization of **88 water or latrine committees**.

¹¹Strategic steering committee gathering every Wednesday to provide guidance and validate RRM activities. ¹²Targeting in RRM is the process of identifying and selecting the most vulnerable populations to provide them with appropriate and priority assistance in emergency situations.