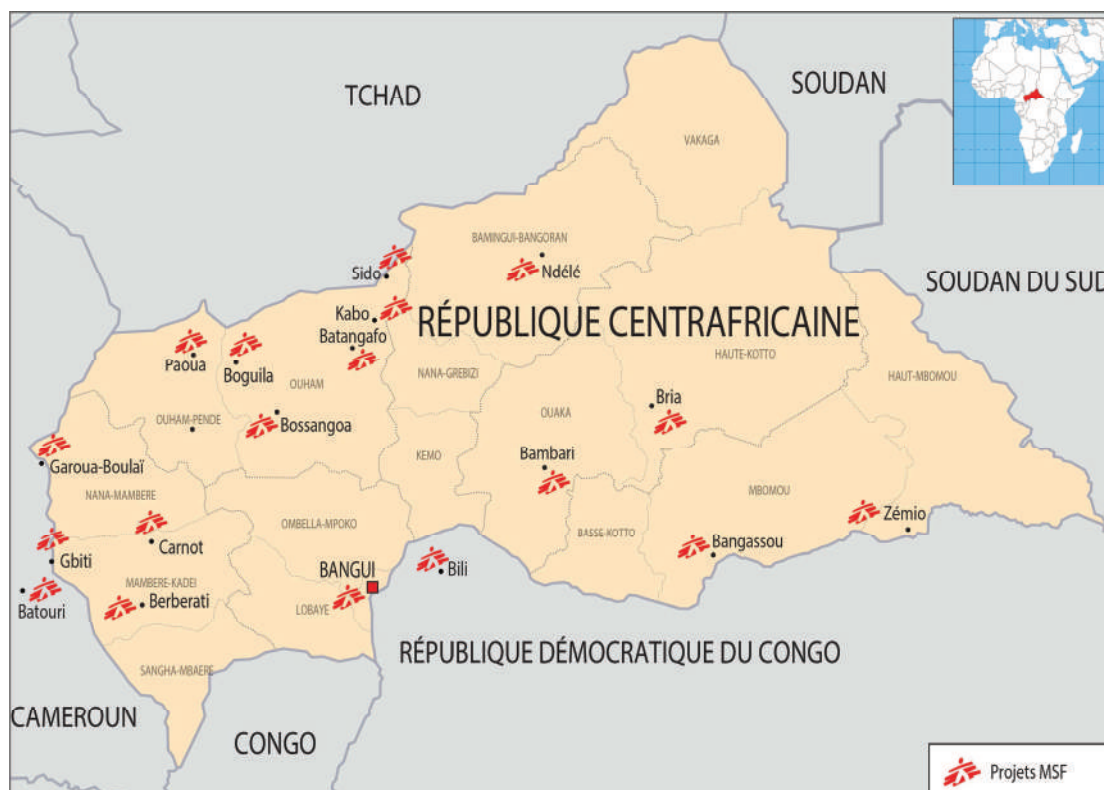


Médecins Sans Frontières in Central African Republic (CAR)



ACTIVITY UPDATE

August 2015



ACTIVITIES OF MSF TEAMS IN CENTRAL AFRICAN REPUBLIC BETWEEN JANUARY AND JULY 2015



Malnutrition
(hospitalisation):
2,207



Number of
patients admitted
to MSF facilities:
29,445



Outpatient
consultations:
470,596
Including approx.
60% of malaria



Antenatal
consultations:
23,032
Deliveries
assisted:
10,145



Surgical
procedures
performed:
4,773



Victims of sexual
violence treated
and supported:
538

2015 HIGHLIGHTS

- The Central African Republic (CAR) faces a situation of chronic and prolonged health emergency. The political crisis and violence that shook the country since 2013 have exacerbated the shortage of health services as a whole and 72 percent of health facilities have been damaged or destroyed. At present, the vast majority of public health structures depend on the support of humanitarian and religious organizations.
- In July 2015, 426,000 people are still displaced in CAR, including 36,900 in Bangui. In addition, 460,000 Central African refugees fled to neighboring countries, mainly to Cameroon, Chad and the Democratic Republic of the Congo (DRC). **In total, 20 percent of the Central African population is displaced internally or has fled to neighboring countries.**
- While in 2015 violence has declined in Bangui and in certain regions of CAR, the ongoing activities of some armed groups and the prevalence of organized crime make the security situation very volatile. Continuing insecurity in many areas of the country continues to obstruct MSF's ability to reach people in need of assistance. MSF mobile clinics have been stopped many times by armed elements in the vicinity of cities such as Batangafo, Kobo, Bambari and Boguila. Since May, a sharp increase in incidents against NGOs was observed in some areas.
- **The situation of isolated populations remains extremely worrying.** In Carnot, Muslim populations have been living trapped in an enclave for over a year. MSF continues to support them, using mobile clinics and a referral system is in place for the hospitalization of patients. As for displaced people seeking refuge in the Bishopric of Berberati, all were able to return to their homes between late July and early August 2015.
- **While vaccination coverage rates in CAR were already well below national targets before 2013, the crisis has led to a decrease of vaccination activities in the country.** For MSF, vaccination remains a priority to protect the health of young children. Earlier this year, MSF organized mass vaccination campaigns against measles in the IDP camp and the city of Batangafo and in the towns of Bria, Nzako and Bakouma in the eastern part of the country. Another vaccination campaign took place in the towns of Berberati and Mbako in May. In total, more than 60,000 children have been vaccinated against measles.
- **Malaria is the leading cause of death among children under five.** To protect children during the peak malaria season, in early July MSF launched a preventive treatment strategy for malaria in the regions of Batangafo, Kobo and Ndele. In total, more than 15,000 children have received treatment during the first round of this preventive approach.
- Alerted by the displacement of thousands of people fleeing the fighting in Kouango area, in the south of the country, MSF launched an emergency project in April 2015. Mobile clinics were set up and MSF provided support to the Kouango hospital for secondary care. In three months, emergency teams provided more than 1,100 consultations and admitted 362 patients. The operation ended on 30 June and the MSF emergency team is ready to respond to other emergencies in the country.

As at July 2015, MSF runs sixteen projects spread across the country. In addition, projects assist Central African refugees in Cameroon, Chad and the Democratic Republic of the Congo. Our projects focus particularly on malaria, vaccination and maternal and child health. More than 2,400 national and 230 international staff members are working together.

BANGUI

General Hospital – emergency surgery

MSF's project in Bangui General Hospital (103 beds) opened in February 2014 and serves as a trauma centre for adults. Whereas in 2014 the main reason for admission was violence, in 2015 our teams have mainly been providing care for victims of road accidents. However, an average of 10 to 15 percent of all cases are still caused by violence. The patients operated at the General Hospital also benefit from physiotherapy sessions. From January to June 2015, more than 6,200 sessions have been organized.

So far in 2015 MSF's team in the hospital has admitted 858 inpatients for hospital care and performed 1,902 surgeries. Our teams also run a dressing service and provide post-operative care. MSF has performed more than 1,400 dressings since the beginning of the year.



Providing treatment to survivors of sexual violence

A support program for survivors of sexual violence started in July 2014. Our teams provide both medical and psychosocial support for survivors, including a consultation with a midwife and voluntary HIV test. Since January 2015, 261 survivors of sexual violence have been received and followed-up by MSF's team.

PK5 Muslim area - primary healthcare and mobile clinics

The MSF project in the Mamadou Mbaiki health centre in the heart of the Muslim district of PK5 provides free healthcare for children below the age of 15. Free medicine is also available at the centre. For urgent referrals, MSF operates an ambulance in the district. Since the beginning of 2015, our teams have provided 16,905 consultations for children coming from all areas of Bangui. Moreover, 1,341 consultations for both adults and children were provided by the mobile clinic visiting the Grand Mosque of Bangui once a week.

M'Poko airport camp - primary and secondary healthcare

Mpoko camp's hospital has reduced some activities in 2015. This is because of the growing number of functional health centers in Bangui's neighboring districts and the return of displaced persons to their places of origin. However, the hospital still runs an outpatient consultation service, with 68,433 consultations provided since the beginning of the year. MSF also operates a 24-bed stabilization unit which received 1,669 patients between January and June. A total of 6,395 wound dressings were also performed during that period.

In response to a growing number of malaria cases, MSF started distributing mosquito nets to vulnerable patients. According to official figures, there are still 13,515 people living inside the camp in July. MSF will remain present in the camp as long as the needs of the displaced persons persist.

Castors – maternal health

Castors maternity project (80 beds of which 30 for neonatology) was opened in June 2014. Since then, the MSF team has been providing high quality free healthcare, focusing on deliveries, obstetric complications and neonatology. In addition, a team of medical and psychosocial counselors provides care to survivors of sexual violence.

Since January 2015, the activities of the project have grown considerably. Castors maternity remains the only health structure in Bangui with free maternal care available 24 hours, seven days a week. In the first semester of 2015, the Castors team assisted 4,094 women to give birth and 11 percent of the deliveries were by Caesarean Section. 142 survivors of sexual violence received medical and psychosocial support. In March, mother-to-child

HIV transmission prevention activities started. In order to respond to the increasing number of admissions and improve the quality of care, MSF has rented the adjacent house to relocate the postpartum care unit.

MAMBERE KADEÏ PREFECTURE

Carnot – primary and secondary healthcare

MSF has been supporting Carnot hospital (96 beds) since 2009 with pediatrics and nutrition, neonatology, internal medicine and HIV/TB care services. During the first semester of 2015, 1,419 children were admitted to the pediatric ward and 307 patients to internal medicine. In addition, 640 children were treated for malnutrition, of which 396 were admitted to the Intensive Therapeutic Feeding Center. In total, 60 percent of the admissions are due to malaria. MSF also provides antiretroviral treatment to 2,026 HIV positive-patients.

In addition, MSF supports two health centers (Charpente and Mboula) with outpatient consultations. Since January 2015, our teams have delivered more than 25,000 consultations to children and adults. In order to reduce the number of cases related to malaria, the main cause for consultation, MSF has trained malaria outreach workers at community level who treat simple cases and refer severe cases to the hospital. Between January and June, more than 18,900 patients were treated against malaria.

Mobile clinic in the Muslim enclave

MSF remains present in the enclave of the Carnot Catholic church, where approximately 500 Muslims have been trapped for more than one year. A community health worker and malaria outreach worker living in the enclave refer severe cases to the hospital on a daily basis. Once a week, a mobile clinic provides free consultations for children and adults.

Berbérati – primary and secondary healthcare

MSF has been working at Berbérati Regional University Hospital since January 2014, responding to the needs of displaced people, victims of violence, pregnant women and children. Today, MSF works in the pediatric and nutrition emergency units. 2,349 children have been admitted to the pediatric unit so far in 2015, 72 percent of the admissions being due to malaria. 787 children have been treated for malnutrition this year.

In addition, MSF has been providing primary healthcare and women's healthcare to 320 people who sought refuge inside the compound of Berbérati's bishopric following violence last year. At the start of August the last of the remaining people seeking refuge there were able to leave the bishopric and go back home.

MSF also runs outreach activities to support four health centers, providing primary healthcare to surrounding villages. Malnutrition, malaria, diarrhea, respiratory tract infections and measles are the main health concerns.

From June 2015, MSF started reinforcing the medical activities in order to provide mother and child care at these health centers. From January to June 2015, MSF provided 7,580 outpatient consultations, 93 percent of which were related to malaria.

In May 2015 MSF launched a preventive vaccination campaign against measles for children from 6 months to 10 years old in Berbérati and Mbako. The aim of the campaign was to improve the low vaccination coverage in the Sous-Prefecture. A total of 27,844 children have been vaccinated.

OUHAM PENDE PREFECTURE

Paoua – primary and secondary healthcare

MSF has worked in Paoua hospital (124 beds) since 2006, managing all the hospital services, including; emergency room, surgery, internal medicine department, pediatric ward, maternity, HIV and tuberculosis care,

and routine vaccination. In April 2014, MSF handed over the maternity and the surgery ward to the Ministry of Health and continues to support 95 beds in the hospital, covering the emergency room, internal medicine department and pediatric ward. Between January and April 2015, 457 surgeries were performed.

Furthermore, MSF supports one urban health center in Paoua, which provides outpatient consultations, emergency pediatric care and vaccination for children. During the first semester 1,147 children were hospitalized, 547 women were admitted to the maternity department and 162 newborns were treated in the neonatology unit. In addition, 435 children were treated for severe malnutrition of which 213 were hospitalized.

On the outskirts of Paoua, MSF supports seven health centers (Beboura, Bedamara, Bedaya, Betoko, Gouze, Pende and Pougol) with free medical supplies and nutritional treatment. By the end of August, MSF will implement a mass vaccination campaign for children under 5 years old in nine health districts of the Paoua Sous-Prefecture.

OUHAM PREFECTURE

Bogouila – limited primary healthcare

On 26 April 2014, 19 Central Africans, including three MSF staff members, were killed during an armed robbery in the grounds of MSF's hospital in Bogouila. Since then, there has been no permanent presence of international staff in Bogouila. The team is now based in Paoua and regularly visits and supervises the project, run by local staff who continue to provide healthcare.

One year on, MSF continues to respond to medical needs in an area where insecurity and violence persist and no other healthcare is available. The structure now functions more as a health center than a hospital and MSF is currently supporting it with outpatient consultations, HIV/TB services, an observation room with six beds, a maternity ward, a wound-dressing room, a pharmacy and a laboratory. The Bogouila project also supports five provincial health centers, where malaria is a main focus. In 2015 the MSF team has provided 39,052 consultations, 68 percent of which were relating to malaria; 256 children have been admitted to the malnutrition program; and 1,797 ante-natal consultations have been offered. In addition, 428 complicated cases have been referred to Paoua Prefectural Hospital of which 46 percent were due to severe malaria.

Bossangoa – primary and secondary healthcare

MSF has been working in Bossangoa hospital since May 2013. From January to May 2015, MSF has maintained a 24/7 presence in the outpatient department, with outpatient consultations, reproductive health, ambulatory treatment feeding center (ATFC) and mental health. In May 2015, MSF handed over the outpatient department and the ATFC to a partner in order to focus on reproductive health and surgery. Bossangoa project also runs mobile clinics and supports health posts. Since the beginning of 2015 the MSF team has performed 39,519 consultations, 57 percent of which were due to malaria. 890 children were treated for malnutrition of which 348 were admitted to the Intensive Therapeutic Feeding Centre. Some 3,800 ante-natal consultations were provided and 710 deliveries performed in addition to 350 surgeries. During the malaria peak, MSF is supervising eleven malaria treatment sites where more than 20,800 patients have so far received treatment.

Batangafu- Kabo- Ndele : seasonal malaria chemoprevention for children under 5 years old

In order to protect children during the highest malaria transmission period, between June and December, MSF launched a strategy of intermittent preventive treatment in Batangafu, Kabo and Ndele, in northern CAR. This innovative approach consists in providing preventive treatment for malaria to children under five once per month. During the first round of distribution, which took place at the beginning of July, 15,399 children between 3 months and 5 years old received the first dose under MSF's surveillance. A distribution of mosquito nets was conducted alongside the distribution.

Batangafo – primary and secondary healthcare

MSF manages the 150-bed general referral hospital and supports two provincial health facilities. Between January and June 2015, more than 55,000 outpatient consultations were performed. A significant increase in the number of consultations has been reported from April 2015 due to the malaria seasonal peak.

In July 2014, several clashes between rival militias and international forces in Batangafo forced thousands to seek refuge in the hospital and the African Union peace forces' headquarters. By early 2015, most of Batangafo's population had gathered for safety in an IDP camp, along with thousands of others from surrounding areas. The situation remains very tense and approximately 28,000 people still reside there.

To respond to a measles outbreak, MSF teams carried out a mass vaccination campaign in February for more than 12,000 children.

Kabo - primary and secondary healthcare

Since 2006, MSF teams have been providing crucial medical assistance in Kabo to more than 50,000 people. Between January and June 2015 MSF delivered 61,646 consultations to patients in the Kabo hospital (86 beds) and assisted 883 women giving birth.

Following a series of convoys organized by the authorities to evacuate the Muslim population in April 2014, the number of IDPs coming from the Muslim enclave of PK12 in Bangui to Kabo and to a camp in Moyen-Sido (near the Chadian border) increased. After an improvement of the security situation in the second half of 2014, tensions increased again in 2015 and MSF facilities in Kabo were attacked several times by armed men.

Due to insecurity, the strategy for seasonal malaria chemoprevention in areas leading towards Moyenne Sido, Farazala and Gbazara was suspended. However, the first round of the chemoprevention distribution in Kabo in early July covered more than 6,500 children.



BAMINGUI BANGORAN PREFECTURE

Ndélé - primary and secondary healthcare

Following a significant influx of wounded people to the 83-bed Ndélé referral hospital in 2014, tension increased in February 2015 after the intervention of French troops in the town. Activities in this project include obstetrics, outpatient care, HIV care, and support to four provincial health centers. Between January and June 2015, the MSF's team delivered more than 42,000 outpatient consultations and treated 15,000 patients for malaria. Ndélé referral hospital has been supported by MSF since 2010. In 2015, efforts have been made to inform the nomadic community of the medical services provided by MSF and improve their access to health structures through sensitization messages.

HAUTE KOTTO PREFECTURE

Bria – pediatric primary and secondary healthcare



In August 2013 MSF opened a project dedicated to medical care provision for children below the age of fifteen at Bria hospital (51 beds). As is the case elsewhere in CAR, healthcare services in the region are barely functional, so MSF decided to extend its activities.

Since January 2015, MSF has provided 21,760 consultations and hospitalized 1,621 children, 56 percent of whom were suffering from malaria.

Following an epidemic outbreak alert, in March MSF conducted a mass vaccination campaign against measles, with a total of 16,630 children below the age of 15 being vaccinated in the city of Bria.

OUAKA PREFECTURE

Bambari – primary healthcare and war-wounded

Since the beginning of the year, the number of IDPs in the prefecture has risen from around 30,000 in 2014 to a current figure estimated between 45,000 and 60,000. This includes people living in IDP camps but does not include smaller groups living in villages along the major roads, or the displaced population living in the bush. The precise current number of displaced is unknown.

To support the displaced populations, since the beginning of 2015 MSF has run three mobile clinics per week, supporting seven localities to the north and south of Bambari. The mobile clinics provide regular consultations, ante-natal and post-natal care, an ambulatory malnutrition program, and vaccination. In addition, MSF also supports one health center in Bambari town and seven malaria treatment sites (palu points) where 14,000 patients have been treated for malaria so far this year. In the first semester of 2015, the MSF's team provided 19,680 consultations, 70 percent of which were due to malaria. 664 children were admitted to the ambulatory malnutrition program, and 2,202 ante-natal consultations were offered. In addition, 66 severe cases were transferred to hospitals in Bambari and/or Bangui for secondary healthcare.

Kouango - Emergency Response

At the end of 2014, thousands of people living in the Kouango area began to cross the Ubangi River to seek refuge in neighbouring Democratic Republic of the Congo (DRC) after armed clashes between rival militias in the area. The MSF emergency team in CAR (EURECA) set up an emergency intervention in April 2015. With access to healthcare either limited or almost non-existent, MSF launched mobile clinics on the routes to Bianga, Grimari, Ndoro, Pende and Zouhougou as a means of providing basic healthcare services. The MSF team also provided support for the emergency department and patients hospitalised in Kouango hospital.

In just three months, the MSF team had carried out more than 1,100 medical examinations in its mobile clinics and referred 362 patients to Kouango hospital, mainly to the pediatric department (55%) and the maternity ward (26%). The team helped 47 women to give birth and carried out five emergency Caesarean Sections.

MSF ended its emergency operation at end of July.

MBOMOU PREFECTURE

Bangassou – primary and secondary healthcare

MSF has been working in Bangassou Hospital (100 beds) since February 2014 and supports all major services in the hospital including; internal medicine – 2,700 patients admitted since January; surgery - 675 operations performed; maternity (including neonatal care) - 849 deliveries; and a pediatric ward including malnutrition treatment. The hospital offers primary and secondary healthcare to a population estimated at 120,000 persons. Since April 2015, MSF supports two provincial health centers in Niakari and Yongofongo where a total of 7,319 consultations have been carried out.

At the end of August, MSF will launch a vaccination campaign in response to a measles outbreak in Bangassou and Rafai Sous-Prefectures targeting 42,000 children between 6 months and 15 years old.

HAUTE MBOMOU PREFECTURE

Zemio - primary and secondary healthcare

MSF has been working in Zemio since 2010, following an influx of Congolese refugees and Central Africans displaced by attacks by the Lord's Resistance Army.).

The prevalence of HIV in Zemio is one of the highest in the country and MSF provides care for a cohort of 1,117 HIV positive patients. MSF is currently assessing the feasibility of decentralizing HIV care in order to improve access to antiretroviral treatment for stabilized patients. MSF supports the outpatient and inpatient departments, including reproductive health, Intensive Therapeutic Feeding Centre and post-operative care. Outreach activities cover the town's health center and three remote health posts. So far in 2015 MSF has provided 17,493 consultations, 43 percent of which were due to malaria. Reproductive health represents a significant part of our medical activities with a total of 1,005 ante-natal consultations and 284 deliveries performed. During the malaria peak, MSF is supervising eight malaria treatment sites providing rapid malaria tests and treatment for simple cases.

RESPONSE TO REFUGEE SITUATION IN NEIGHBOURING COUNTRIES

CAMEROON – Garoua-Boulai, Batouri and Gbiti

Since December 2013 more than 130,000 Central African refugees have crossed the border into Cameroon. MSF is present in the east of the country, supporting Cameroon's Ministry of Health by providing medical services focused on primary healthcare and malnutrition treatment for refugees and the local population in Garoua-Boulai, Batouri and Gbiti.

The number of refugees arriving to the east of Cameroon has significantly diminished since late 2014. In Garoua-Boulai, MSF is currently handing over the Intensive Therapeutic Feeding Center (ITFC) at the protestant hospital to our partner the French Red Cross (FRC). The FRC will continue to operate the ITFC at the district hospital, located nearby. MSF will withdraw from Garoua-Boulai at the end of July. MSF remains present in Batouri and Gbiti providing medical support to refugee patients in nutrition and primary health care services. Over the last few months, admissions to MSF supported health structures in Gbiti have stabilised, with 100 cases of moderate malnutrition recorded on average per month. Cases of severe malnutrition have decreased to 30 new admissions on average per month. At the ITFC in Batouri we have observed a decrease in admissions, with 101 new patients recorded in June. In our outpatient department in Gbiti, MSF teams have conducted 3,135 medical consultations during May and June. Malaria remains the most prevalent diagnosis, representing 75 percent of cases recorded, most likely due to the onset of rainy season.

MSF has been working in CAR since 1997 providing free of charge healthcare for those most vulnerable. Around 2,400 Central African employees are working for MSF around the country in collaboration with the Ministry of Public Health and Population.



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