

Humanitarian Crisis Analysis 2025

Central African Republic

31 March 2025

1. Crisis overview

4.1 / 5	2.4 million	1.8 million	\$326 million	13%
Inform severity index	People in need of humanitarian aid (HNO 2025)	People targeted in the response plan (HRP 2025)	Required to reach the target (HRP 2025)	Of the required funding secured (HRP 2025)
72 MSEK Initial allocation	– Additional allocation	– Flexible funding	72 M \$ Total Sida fu	

Conflict mainly drives the protracted humanitarian crisis in the Central African Republic (CAR), together with the consequences of the increasing effects of climate change. The context remains unpredictable, with pockets of instability shifting quickly across the country, characterized by clashes between the armed forces, supported by foreign private military, and non-state armed groups. Although the security and humanitarian situation has relatively improved in certain areas in 2024, a large part of the population remains exposed to shocks and their consequences. In 2024 there has been a continued decline in the number of internally displaced people (IDPs) and refugees, and overall fewer people affected by sudden shocks compared to previous years. The Humanitarian Needs Overview (HNO) for 2025 identifies that 2.4 million people (almost half of the total population) need humanitarian assistance, of whom a majority are children (approximately 1.1 million). Major and persistent challenges for humanitarian operations include high operational costs, low state institutional capacity, low development investments and limited presence of development actors, volatile security situation, impeded and constrained humanitarian access, and a decrease in donor funding with a subsequent increase in the funding gap.

2. Humanitarian needs & affected population

The population in CAR is facing insecurity due to ongoing violence. Attacks, thefts, looting and illegal taxation limit the ability of the population to move around, feed their families and earn a living, which has a negative impact on their health, nutrition and protection. Availability of

and access to basic services are structurally weak or non-existent in CAR and chronic dependency on humanitarian aid, delivered in replacement mode for the lack of basic services, which undermines the state's responsibility for economic security and the delivery of basic social services. A lack of access to basic socio-economic infrastructure and economic opportunities forces both the displaced and host communities to adapt negative coping mechanisms to meet needs, making them more vulnerable to exploitation and gender-based violence.

In total, 1.8 million out of the 2.4 million people in need of humanitarian assistance will be targeted in the Humanitarian Response Plan (HRP) for 2025. There are continued improvements in the security situation in parts of the country and communities are increasingly expressing needs to receive more support in resilience-building and livelihoods, as well as in support to returning IDPs. Therefore the HRP for 2025 articulates more clearly the difference between needs resulting from humanitarian shocks and those resulting from a lack of access to basic socio-economic infrastructure and services. The latter will need to be addressed by development actors, which is the main reason for the reduced financial requirements of the HRP in 2025.

Regarding protection, the population faces a high degree of risk across the whole protection spectra. Attacks and threats, forced recruitment, gender-based violence (GBV), presence of explosive remnants of war (ERW) and psychological abuse, are some of the most critical risks. There are several barriers to effective protection, such as ongoing insecurity and hostilities affecting freedom of movement, environmental and logistics constraints, impeded humanitarian access and unavailability of protection services. It is estimated that every hour in CAR, more than two people are victims of GBV, mostly women and girls. In the first half of 2024 alone, over 11,000 cases of GBV were reported. The prolonged humanitarian crisis, which causes increasing stress within households, leads to the adoption of negative coping mechanisms such as survival sex and early marriage of girls, exacerbating GBV and predominantly affecting thousands of women and girls. Women and girls are considerably more exposed to GBV risks due to their role in foraging food, collecting water, firewood and underlying socio-cultural norms. CAR ranks at the very bottom of global rankings on gender equality, with issues such as excision, early and forced marriages, early pregnancies and domestic violence. Women and girls also lack access to healthcare. Access to sexual and reproductive health services remains a major challenge.

Violence is the key driving factor for people to flee and a substantial portion of the population is either internally displaced, refugees or returnees. Approximately 455,000 IDPs are recorded in CAR as of August 2024, a figure which has plateaued since December 2018. There are 656,000 refugees from CAR in the surrounding countries, predominately Cameroon, Chad and the Democratic Republic of the Congo. The number of refugees has also declined in recent years, with around 221,000 refugees having returned to CAR in recent year. Loss of birth certificates and other legal documents during displacement is common. Access to water, sanitation and hygiene remains a major challenge and many do not have access to adequate housing solution. Since 2023, two new refugee situations have emerged, with some currently 43,000 people from Chad and Sudan hosted in CAR.

CAR has one of the highest proportions of critically food insecure people in the world. Approximately 2.5 million people will be experiencing high levels of acute food insecurity, classified in Crisis and Emergency (Integrated Food Security Phase Classification (IPC). This includes 508,000 people who are in IPC Phase 4 (Emergency) and two million people who are in IPC Phase 3 (Crisis) as of August 2024. The situation has deteriorated during 2024, according to IPC. Particular vulnerable groups are IDPs, returnees and host families, with particular attention to children under five and pregnant and lactating women.

3. The humanitarian response

Approximately 1.5 million people benefited from humanitarian assistance in at least one sector, representing 77 per cent of the overall Humanitarian Response Plan (HRP) target, as of the third quarter of 2024. The implementation of a multisectoral response is at times hampered by limited resources, which reduces the response to single-sector assistance for people with multiple and overlapping needs, keeping them in a precarious situation.

It is acknowledged that there have been continued significant gaps in the humanitarian response, primarily due to several sectors receiving little or no funding. The funding situation remains critical, with a sharp decrease in funding levels compared to previous years, which has created a 44 per cent funding gap as of November 2024. The least funded sectors are Nutrition, Child Protection, Food Security and Camp Coordination Camp Management (CCCM).

The humanitarian community for 2025 is aiming to deliver multisectoral assistance focused on people affected by exacerbated vulnerabilities caused by recent shocks. The humanitarian response in the CAR is adapting to the improvement of the security context. In order to optimize available resources, the priority in 2025 is to provide vital and quality assistance to the most vulnerable people in areas affected by recent shocks, where the needs are the most urgent.

The humanitarian response plan has identified a few programmatic priorities 1) Centrality of protection 2) Increasing protection against abuse and Sexual exploitation (PSEA) 3) Gender mainstreaming in humanitarian response 4) Accountability to affected population 5) An increasingly localized response 6) Nexus and durable solutions 7) Access and civil military coordination.

The priority is responding to new shocks and emergencies, with a shift away from addressing needs resulting from insufficient basic social services. Presently humanitarian partners are often the only actors providing access to basic services and facilitating the return of IDPs. To prevent deprivation of conditions where humanitarians phase out, increasing investments by development actors in collaboration with the government will be required. However, a key dilemma for this approach is the limited presence of development actors and funding in the most affected regions.

The global freeze and scale-back of US humanitarian funding announced in January 2025 is having major consequences on aid operations, and the Humanitarian Country Team is adapting the response in light of the new funding landscape.

The total requirement is estimated to \$326.1 million for 2025, which is lower than the \$393.5 million for 2024 and \$533.3 million required in 2023. The main donors are US, ECHO, Germany, Norway, Sweden, France, and Canada.

4. Sida's humanitarian allocation

In accordance with the Strategy for Sweden's humanitarian aid provided through Sida (2021-2025), Sida's priorities in CAR will focus on the overall objective regarding provision of life-saving assistance and protection of the most vulnerable groups. Particular focus will be put on assistance and protection reaching the affected population in a timely manner, reaching the affected population in hard-to-reach areas and that assistance reduces the risk and vulnerability of violence.

Sida's 2025 humanitarian partnership portfolio in CAR is proposed to remain in principle the same as 2023 and 2024. The portfolio is oriented towards addressing acute and severe needs of the most vulnerable in sudden and protracted displacement situations and natural hazard events, in the most affected prefectures. Hard-to-reach areas, multi-sector response, flexibility and multi-year funding, integration of protection and localisation are essential pillars of Sida's priorities.

First, regarding rapid response in hard-to-reach the UNICEF-coordinated Rapid Response Mechanism (RRM) is an important response tool that coordinates a multi-sector response of immediate life-saving activities to newly emerging shocks, often in hard-to-reach areas. Second, on long-term funding, three strategic partners (AAH, IRC and Oxfam) that already benefit from the flexibility of the programme-based funding approach (PBA) will be continuously supported with multi-year funding (MYF) in 2023-2025. Third, with regard to multi-sector assistance and centrality of protection, more or less all of Sida's partners in the CAR portfolio provide a multi-sector humanitarian response in hard-to-reach areas. They include protection services and mainstreaming of protection in their respective humanitarian programme activities. Fourth, partners are encouraged to support localisation approaches, involving local authorities and partners where possible, even to integrate more sustainable approaches in their respective emergency interventions, where these help address immediate needs and are cost-effective.

INITIAL ALLOCATION (SEK)				
PARTNER	SECTOR	INITIAL ALLOCATION		
ААН	Food Security and Livelihoods, WASH, Health, Nutrition, Protection	9,000,0001		
ICRC	Protection, Water-Habitat, Economic Security, Health, IHL, Tracing	12,000,000		
IRC	Health, Nutrition, Protection, Food Security and Livelihoods	9,000,0001		
NRC	WASH, NFI, Protection, Education, FSL	10,000,000		
Oxfam	Livelihoods and food security, WASH, NFI, Protection	9,000,0001		
PU-I	Health, WASH, Nutrition	9,000,000		
UNICEF	Rapid Response Mechanism: WASH, NFI	14,000,000		
TOTAL		72,000,000		

ⁱ The 2025 initial allocation of humanitarian funding is based on Sida's humanitarian allocation analysis methodology. The analysis reflects the current humanitarian situation across crises and is being updated continuously with the latest available data. The information in the HCA is based on reports, data, and information from partner organisations and other entities, as well as observations from field visits and dialogue with partners.

 $^{^{1}}$ Of which SEK 8 million already committed in 2023