



CENTRAL AFRICAN REPUBLIC



2025 IFRC network mid-year report, January – June

14 October 2025

IN SUPPORT OF THE CENTRAL AFRICAN RED CROSS SOCIETY



20

National Society
branches



85

National Society
local units



18,285

National Society
volunteers



114

National Society
staff

PEOPLE REACHED

Emergency
Operations



200,000

Climate and
environment



191,000

Disasters
and crises



78,000

Health and
wellbeing



2.4M

Migration and
displacement



159,000

Values, power
and inclusion



22,000

No information at time of publication. Figures reflect targeted reach in 2025 plan

FINANCIAL OVERVIEW

in Swiss francs (CHF)

Central African Red Cross Society			
Overview		Funding Sources	
Funding	Not reported	IFRC Secretariat	Not reported
Expenditure	Not reported	Participating National Societies	Not reported
		HNS other funding sources	Not reported

IFRC network			
Country	Funding Requirement		19.8M
IFRC Secretariat	Longer-term Funding Requirement		16.3M
	Funding		22.6M
	Expenditure		6.5M
	Emergency Operations		
	Funding		581,000
	Expenditure		479,000
Participating National Societies	Funding Requirement		1.2M
	Funding		653,000
	Expenditure		168,000
HNS other funding sources	Funding Requirement		2.3M
	Funding		Not reported

Appeal number **MAACF002**

*Information on data scope and limitations is available on the back page

IFRC NETWORK BILATERAL-SUPPORTED ACTIVITIES

National Society	Funding Reported	Climate and environment	Disasters and crises	Health and wellbeing	Migration and displacement	Values, power and inclusion	Enabling Functions
French Red Cross	108,000						
Netherlands Red Cross	546,000						

Total Funding Reported **CHF 653,000**

Q1. OVERALL PERFORMANCE

Context

In the Central African Republic, political tensions remain high, with strained relations with the international community due to shifting geopolitics. Local elections, initially planned for 2023 and then October 2024, have been postponed indefinitely.

Humanitarian crises continue to impoverish communities and strain social cohesion, forcing many to relocate within the country or flee to neighboring states. In 2024, 2.8 million people—46 per cent of the population—require urgent humanitarian and protection assistance (OCHA), particularly in water, hygiene and sanitation, food security, health, and protection. Between 2.7 and 3 million people are affected, including 484,000 internally displaced—339,000 in host families and 145,000 in displacement sites.

Key aggravating factors include ongoing armed violence, inflation, flooding, COVID-19, measles outbreaks, and transhumance-related conflicts. Major shocks in 2022–2023 included conflict-related violence (57 per cent), natural disasters (20 per cent), return movements (16 per cent), and other incidents like fires (7 per cent). Refugee influxes included 13,000 Sudanese in Haute Kotto and Vakaga, and 10,241 Chadians in Lim-Pende.

Violence linked to transhumance—such as clashes between herders and farmers—adds to instability. Gender-based violence (GBV) cases rose sharply, with 17,831 reported from January to September 2022, a 53 per cent increase from 2021, driven by expanded GBV interventions, persistent conflict, weak state authority, and food insecurity.

Key achievements

Climate and environment

Under the Climate and environment priority, the Central African Red Cross advanced training for rural populations in sustainable agricultural practices, carried out awareness campaigns on responsible water and soil management, and promoted climate change adaptation through schools, media, and communities. The National Society also launched mobilization efforts around tree planting and care initiatives, though progress towards the full objectives remains limited.

Disasters and crises

Progress in Disasters and crises was marked by the distribution of 375 NFI kits in Nanga Boguila, completion of a feasibility study on first aid product marketing, and the development of micro-projects to support community resilience. The National Society also drafted emergency response standard operating procedures, trained 76 volunteers in life-saving gestures, equipped seven local committees with first aid kits, and advanced the implementation of the RP3 and CRNL projects in priority areas.

Health and well-being

The Central African Red Cross made significant strides by constructing nine maternity wards, distributing more than nine tons of medicines, deploying community health workers, and recruiting qualified staff in Health Region 1. Other achievements included a 336 per cent increase in Couple Years of Protection through family planning efforts, quality of care assessments across 36 facilities, commissioning of an X-ray machine in Mbaiki, and rapid responses to emergencies such as the Mpox outbreak and incidents at Barthélemy Boganda High School.

Migration and displacement

In the area of Migration and displacement, resource constraints limited implementation, but progress was made in securing future interventions. The National Society signed an agreement supported by the Norwegian Red Cross and funded by the Norwegian Ministry of Foreign Affairs, which provided support to improve protection and education for children affected by armed conflict, with activities scheduled to begin following the transfer of funds in April 2025.

Values, power and inclusion

The Central African Red Cross Society made progress in advancing community engagement and protection standards. The Central African Red Cross established complaint committees and suggestion boxes in 36 health facilities, trained 21 ERP focal points, and sensitized 348 staff and volunteers on protection standards including PSEA and SGBV. The National Society also carried out awareness activities with indigenous Aka/Pygmy populations, supported women’s income-generation initiatives, marked International Women’s Day with active female participation, and advanced preparations for the Henry Dunant listening center, alongside capacity building in ERP reporting, LILO approaches, and community disaster response engagement.

Q2. CHANGES AND AMENDMENTS

There have been no changes or amendments made to the 2025 Unified Plan. However, a workshop on the evaluation of the impact of the Unified Plan initiative was organized and provided guidance on the adherence of all members to the Unified Plan Initiative. During this workshop, the unified risk plan was developed with all stakeholders.

Q3. MEASURING RESULTS OF THE IFRC NETWORK ACTION

ONGOING EMERGENCY RESPONSE

For real-time information on emergencies, see [IFRC GO page Central African Republic](#)

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Name	Africa Regional Mpox Epidemic
Appeal number	MDRS1003
People affected	People affected/at risk: 300 million people
People to be assisted	30 million people
Duration	20 August 2024 to 30 June 2025
Funding requirements	Total IFRC funding requirement through the Appeal: CHF 30 million Total Federation-wide funding requirements: CHF 40 million
Emergency Appeal	Africa – Regional Mpox Epidemic
Operational Strategy	Operational Strategy
Latest operation update	Operational Update No.2

In 2024, Mpox cases and deaths surged significantly in Africa, with over 17,000 cases and 500 deaths reported across 12 countries, marking a sharp increase from 2023. The Democratic Republic of the Congo (DRC) remains the epicentre, contributing 92 per cent of cases, with transmission spreading across all its provinces and into neighbouring Burundi, Rwanda, Uganda and Kenya. Non-endemic countries like SouthH Africa have also reported cases, while endemic regions, including Nigeria and Côte d’Ivoire, continue to see expandYing outbreaks. The emergence of Clades 1a, 1b and 2 in disparate areas highlights the heightened risk, prompting organizations such as the Africa CDC, WHO and the IFRC to declare the outbreak a public emergency. Red Cross Red Crescent Societies are working closely with governments to provide [community-based surveillance](#), risk communication and community engagement and vaccination support to mitigate the spread and reduce mortality.

Short description of the emergency operational strategy

The regional Mpox emergency appeal aims to assist National Societies in preparing for and responding to the Mpox epidemic. The strategy includes scaling up [health and water, sanitation and hygiene \(WASH\)](#) services, [community engagement and accountability \(CEA\)](#) and addressing socio-economic impacts. The operation will be guided by a risk-based approach and regional coordination, prioritizing preparedness, readiness and response. The Central African Red Cross Society will receive support to develop country-specific response plan, enhance community-based advocacy and mitigate the spread of the virus, particularly in areas with imported cases or established transmission. The operation will also target vulnerable populations, including marginalized and immunocompromised groups, with a focus on protection, gender and inclusion. The highlights of the assistance are:

Integrated assistance

Affected people and families are provided with a safety net scheme, including multipurpose cash to meet immediate needs and cover basic necessities while recovering from Mpox infections. Affected people who have lost their livelihoods due to Mpox are aided in reintegrating into the labour market through skills enhancement and diversification.

Health and care, including water, sanitation and hygiene (WASH)

Affected people are provided with [community-based surveillance](#) to detect and actively find suspected Mpox cases, feeding into existing surveillance systems. Clinical care pathways for screening, triage, isolation, testing and assessment are identified through national plans and guidelines, ensuring awareness among clinical facilities. Communities are engaged on Mpox transmission, symptoms and preventive actions. Health services ensure individuals with Mpox symptoms seek care, with support for isolation and referral. Vaccination efforts are supported through community engagement. [WASH](#) facilities are improved in health centres, with ongoing hygiene promotion to reduce transmission.

Cross-cutting approaches: the operational strategy integrates [community engagement and accountability \(CEA\)](#) and [protection, gender and inclusion \(PGI\)](#) as pivotal elements, in an approach that recognizes and values all community members as equal partners, with their diverse needs shaping the response. Activities includes the provision of dignity kits and establishment of two-way feedback mechanisms. The strategy emphasizes local voice amplification, collaborative engagement and transparent communication, extending into **long-term resilience building** through initiatives such as the [IFRC Pan-Africa Zero Hunger Initiative](#).

For the period [20 August 2024 to 28 October 2024](#), the following assistance was provided by the Central African Red Cross Society:

The Central African Red Cross Society strengthened its response capacity by recruiting a Head of Health Department to develop and implement its health strategy. It launched National Society development activities with a field mission to Sangha-Mbaéré from 26 October to 9 November. In Nola, Bimbo and Bayanga, it oversaw General Assemblies to elect new branch boards, followed by training sessions for 60 elected members and technical managers in legal and operational frameworks, the [Safer Access](#) Framework and action plan development.

STRATEGIC PRIORITIES



Climate and environment

Progress by the National Society against objectives

Within the framework of its Unified Plan 2025, the Central African Red Cross identified two main objectives under the Climate and environment priority: contributing to zero hunger and advancing a tree planting and care initiative. Activities to achieve these goals included training rural populations on sustainable agricultural practices, conducting awareness campaigns on responsible water and soil management, and promoting climate change adaptation in local media, schools, and communities. While mobilization actions were launched, they have not consistently succeeded in meeting the planned objectives.

IFRC network joint support

The IFRC has mainly provided technical support for resource mobilization under this priority. However, progress has been slow and results remain limited to date.



Disasters and crises

Progress by the National Society against objectives

The Central African Red Cross Society selected three objectives under this priority: strengthening disaster management through the Red Ready Initiative, providing multi-sectoral emergency assistance, and building resilience in protracted crises. In the first half of the year, progress included assessments and the distribution of 375 NFI kits in Nanga Boguila, completion of a feasibility study for marketing first aid products, and the development of micro-projects for community resilience. Additional steps included drafting emergency response SoPs, training 76 volunteers in life-saving gestures, equipping seven local committees with first aid kits, submitting a preparedness project to Disaster Preparedness European Commission's Directorate-General for European Civil Protection and Humanitarian Aid Operations (DIPECHO), and advancing implementation of the RP3 and CRNL projects across several areas.

IFRC network joint support

The IFRC network supported the National Society through CRNL's financial and logistical assistance for evaluations and micro-projects, as well as technical inputs for the Mpox appeal and the feasibility study on first aid product marketing. The **Belgian Red Cross (Flanders)** also supported the adaptation of the African first aid manual to the Central African context.



Staff and volunteers of the Central African Red Cross Society participating in a meeting on preparedness and response to the Mpox epidemic (Photo: IFRC)



Health and wellbeing

Progress by the National Society against objectives

Health and wellbeing form a cornerstone of the Central African Red Cross strategy. Of the four objectives set for 2025, progress has been uneven. Limited advancement was made in positioning within national advocacy and policy spaces, though the National Society remains engaged in health, education, and gender-based violence (GBV) clusters, as well as Risk Communication and Community Engagement (RCCE) coordination. Notable achievements include construction of nine maternity wards, distribution of over nine tons of medicines, deployment of community health workers, and recruitment of qualified staff in Health Region 1. Significant progress was also made in family planning, with Couple Years of Protection increasing by 336 percent. Additional results included quality of care assessments in 36 facilities, commissioning of an X-ray machine in Mbaiki, provision of dental and rehabilitation support, and rapid health responses during emergencies such as the Mpox outbreak and the Barthelemy Boganda High School incidents.

IFRC network joint support

The IFRC provided technical support through its health, construction, logistics, and finance teams. Resource mobilization is ongoing within the IFRC network to expand health-related projects in support of the National Society.



Migration and displacement

Progress by the National Society against objectives

As part of its Unified Plan 2025, the Central African Red Cross Society set two main objectives under this priority: to facilitate access to humanitarian assistance for refugees and internally displaced persons, and to strengthen its auxiliary role in delivering multifaceted assistance to displaced populations. However, due to lack of resources, no concrete progress has been made during the reporting period. The National Society continues to pursue resource mobilization efforts to enable implementation.

IFRC network joint support

The IFRC network mobilized support from the Norwegian Ministry of Foreign Affairs through the **Norwegian Red Cross** for a project focused on improving protection and education of children affected by armed conflict.



Values, power and inclusion

Progress by the National Society against objectives

The Central African Red Cross Society defined three objectives for this priority: promoting fundamental principles and humanitarian values with a focus on youth, ensuring a safe and inclusive protection framework for staff, volunteers, and beneficiaries, and strengthening community involvement in decision-making. Progress in the first half of 2025 was notable in advancing community engagement through the establishment of complaint committees and suggestion boxes in 36 health facilities. Other achievements included training ERP focal points, sensitizing staff and volunteers in protection standards including Prevention and Response to Sexual Exploitation and Abuse (PSEA) and sexual and gender-based violence, and reaching indigenous Aka/Pygmy populations with awareness activities. The National Society also organized International Women's Day with strong female participation, supported income-generation initiatives for women, and advanced preparations for the Henry Dunant listening center. Additional capacity building took place through training in the LILO approach, ERP focal point reporting tools, and community disaster response team engagement.

IFRC network joint support

The IFRC network supported the National Society through technical guidance and resource mobilization. This included facilitating the participation of the ERP Manager in regional capacity-building sessions, both online and in person, such as the Nairobi forum on the ERP roadmap in February 2025.

ENABLING LOCAL ACTORS



Strategic and operational coordination

Progress by the National Society against objectives

IFRC membership coordination involves working with member National Societies to assess the humanitarian context, humanitarian situations and needs; agreeing on common priorities; jointly developing common strategies to address issues such as obtaining greater humanitarian access, acceptance and space; mobilizing funding and other resources; clarifying consistent public messaging; and monitoring progress. This also means ensuring that strategies and programmes in support of people in need, incorporate clarity of humanitarian action, links with development assistance and efforts to reinforce National Societies in their respective countries, including through their auxiliary role.

The Central African Red Cross Society works with several participating National Societies in longer-term technical and financial partnerships:

The **French Red Cross** is supporting the National Society in strengthening its human resource management capacities and the implementation of a volunteer information and management system. It also provides assistance with a project focused on controlling diseases such as malaria, tuberculosis and HIV. The French Red Cross supports the Central African Red Cross Society in implementing interventions for prevention of gender-based violence.

The **Netherlands Red Cross** supports the National Society in youth empowerment and peacebuilding and the institutionalization of community engagement and accountability (CEA).

Movement coordination

The Central African Red Cross Society ensures regular exchanges with the IFRC, the International Committee of the Red Cross (ICRC) and participating National Societies, for the alignment of support and action between Movement partners. In times of emergencies, closer coordination is organized. . This is carried out in line with the Strengthening Movement Coordination and Cooperation (SMCC) principles and the newly adopted Seville Agreement 2.0.

In the Central African Republic, **the ICRC** helps people affected by conflict and violence. It provides aid, runs livelihood-support projects and repairs water and sanitation systems. It visits detainees, restores contact between relatives separated by conflict and promotes international humanitarian law.

External coordination

As an auxiliary to the public authorities, the Central African Red Cross Society is placed under the purview of the Ministry of Humanitarian Affairs, Solidarity and National Reconciliation. Its work is carried out in partnership with the Prime Minister's Office and key ministries such as the Ministry of Health and Population and the Ministry of Territorial Administration and Decentralization.

The National Society interacts with several official ministries and agencies to enhance its programme implementation and strategic objectives. It collaborates with the Ministry of Health and Population through a memorandum of understanding and has established a three-year partnership dedicated to executing health programmes. As part of this collaboration, it actively participates in the health and nutrition sector committee which convenes quarterly to discuss and strategize on sectoral issues. Additionally, the National Society is involved with the Communication and Social Mobilization Commission of the inter-agency committee, supporting the expanded programme on immunization to improve public health outcomes.

The Central African Red Cross Society also works closely with the Ministry of Humanitarian Action. This collaboration is facilitated through the Reflection Committee on Disaster Risk Management and Climate Change Adaptation, which operates under the Prime Minister's Office. By engaging with this committee, it contributes to and helps shape policies and strategies aimed at mitigating disaster risks and adapting to the impacts of climate change. Through these partnerships, the National Society ensures a coordinated and comprehensive approach towards health and humanitarian action, leveraging collective expertise and resources.



National Society development

Progress by the National Society against objectives

Following the validation of its National Society Development Plan 2025–2027, the Central African Red Cross Society has begun implementing activities across several priority areas. The plan itself has been developed and validated, alongside a resource mobilization plan now in the final stages of preparation. On the legal front, a bill recognizing and defining the legal status of the Central African Red Cross Society is under review by the National Assembly. Progress has also been made in revitalizing branch committees, renewing governance structures, and providing the first round of capacity-building training, with additional sessions planned on leadership and good governance. Sub-prefectural focal points have been trained in branch development and volunteer management, and more than 1,250 volunteers are now registered in the Gogoro database. To strengthen accountability, accounting software has been acquired and awaits operationalization. The National Society has also updated its NSD Working Group on diplomacy, humanitarianism, and communication. Ten local branches have been equipped with motorcycles, protective gear, tools, and visibility items, while infrastructure improvements include a new warehouse at headquarters, the construction of a straw hut at national level, and the administrative building of the Boali branch. Solar kits were installed in Bangassou and Mbaiki branches, further supporting operational capacity.

IFRC network joint support

The IFRC network has provided extensive support to the National Society in this area. This included the deployment of a National Society Development consultant and surge personnel, technical support for drafting the resource mobilization plan, and assistance with emergency health response activities during the Mpox epidemic. The IFRC has also backed projects financed through the IFRC Capacity Building Fund and the IFRC/ICRC National Society Investment Alliance, including branch revitalization and the upgrading of first aid training curricula. In addition, the ICRC has contributed by financing equipment for volunteer badge production, supporting supervision missions in Birao, Zemio, and Bossangoa, and training volunteers in Benzambé on Movement principles. Over 360 volunteers have been engaged in activities across EcoSec, Wathab, Health, and Logistics departments, and the Central African Red Cross headquarters received a dental kit to strengthen awareness campaigns.



Humanitarian diplomacy

Progress by the National Society against objectives

In line with the Unified Plan, the Central African Red Cross set objectives for strengthening humanitarian diplomacy, strategic communication, and partnerships. During the first half of 2025, the National Society validated its Humanitarian Diplomacy Action Plan and initiated the development of a comprehensive strategy. Diplomatic engagement was reinforced through two official dinners with OCHA and CRNL representatives. The “Way of Working” initiative was advanced through workshops in Boali and Bangui, an assessment of its impact, and the development of a resource mobilization plan with new coordination frameworks.

The auxiliary role of the National Society was strengthened through advocacy for a draft law recognizing its legal status, submitted to the National Assembly by the Ministry of Humanitarian Action. Advocacy efforts also included model laws, guidance notes, and dialogues with authorities. The National Society organized the World Red Cross and Red Crescent Day in Kaga-Bandoro with more than 350 participants from across the Movement, national institutions, and international partners. Additional activities included voluntary blood donation campaigns involving 380 volunteers, a humanitarian dialogue with 150 stakeholders, media initiatives, and a large sports march in Bangui, Bimbo, and Bégoua that mobilized around 300 volunteers.

Partnership development advanced with the MPC evaluation workshop held in Bangui in January 2025, finalizing a process that began in August 2024 to strengthen collaboration with CRNL and other Movement partners. The National Society also validated its communication strategy and plan, organized training for 25 journalists and 35 dissemination focal points, and led awareness activities with local authorities, youth, and women’s organizations. Dissemination efforts extended to pharmacists and medicine sellers on Movement principles and emblem protection.

Communication was further enhanced through NDRT training on Movement awareness and [Safer Access](#), online platforms such as the National Society's website and social media, and the publication of a newsletter.

IFRC network joint support

The IFRC network has supported the development of humanitarian diplomacy and communication in several ways. This included coordination of humanitarian diplomacy initiatives, financing of departmental activities, and covering the salary of the Head of the Humanitarian Diplomacy Department. The IFRC also facilitated procurement of IT and office equipment and established a dedicated focal point for humanitarian diplomacy and communication. Through these measures, the IFRC has enabled the National Society to strengthen its strategic and operational communication mechanisms and to progress in developing its humanitarian diplomacy policy.



Accountability and agility (cross-cutting)

Progress by the National Society against objectives

In order to maintain its reputation and remain a reliable partner, the Central African Red Cross Society set several objectives aligned with accountability, flexibility, and consistency in its procedures. During the first half of the year, progress was achieved through the development of an anti-fraud and anti-corruption policy, a policy to prevent sexual abuse and exploitation, and a whistleblower protection policy. The National Society also advanced its digital presence by operationalizing a website that hosts achievements and evidence of activities, while strengthening its accountability through the timely transmission of activity reports to the PGI Francophone Africa Regional Office.

IFRC network joint support

The IFRC network provided both technical and resource mobilization support to the Central African Red Cross Society. This included assistance in the preparation of interim reports for ongoing projects and guidance on reporting standards. In addition, the IFRC supported the operationalization of the National Society's digital strategy through the provision of internet connectivity, thereby ensuring that communication and visibility efforts could be sustained and further strengthened.

Q4. AFFECTED PERSONS (PEOPLE REACHED)

See cover pages

Q5. PARTICIPATION AND ACCOUNTABILITY FOR AFFECTED PEOPLE – COMMUNITY ENGAGEMENT AND ACCOUNTABILITY

See Strategic Priority on 'Values, power and inclusion' under Q3: MEASURING RESULTS OF THE IFRC NETWORK ACTION

Q6. RISK MANAGEMENT

This information is not available in Mid-Year Reports

Q7. EXIT STRATEGY AND SUSTAINABILITY

See Strategic Priorities or Enabling Local Actors, where relevant under Q3: MEASURING RESULTS OF THE IFRC NETWORK ACTION

Q8. LESSONS LEARNED

In the first half of 2025, the Central African Red Cross Society learned that the implementation of the Way of Working Initiative requires the active participation of all Movement members and that a single, unified country plan leads to more effective and relevant interventions. The National Society recognized the need for a change in mindset and co-creation, ensuring that the Way of Working approach, the Seville Agreement 2.0, and the National Society Development Plan are integrated and coordinated. It also identified the importance of incorporating exit strategies into all projects to ensure sustainability, noting that the feedback mechanism established during the Mpox response was suspended after the emergency phase.

SUCCESS STORIES



1

"The water that gave life to the Bekadili health centre"

When the borehole at the Bekadili health centre was commissioned, Marceline, a 29-year-old mother of two, was among the first to feel the effects. Before, each consultation became an ordeal: "We were asked to bring water in canisters to clean up after treatment. When there were none, the nurses postponed certain simple procedures. The lack of running water slowed down care, complicated the hygiene of the premises and discouraged families from using services.

Since the construction and operation of the borehole as part of the health system reconstruction project, daily life has changed. The centre can now provide systematic hand washing, regular cleaning of rooms and equipment, and water supply for deliveries and small procedures. "Today, we arrive and we are received more quickly. Midwives no longer interrupt care to fetch water. We feel safe, especially with the children," says Marceline.

This improvement in access to water has also restored confidence in the community. Pregnant women in her neighbourhood are more likely to go to antenatal consultations, and families come earlier for fevers and diarrhoea. Community health workers rely on boreholes as a concrete argument

during awareness-raising: "the centre is clean, water is available, sell yourself for treatment". Staff report more consistent hygiene procedures and perceived better quality of services.

Beyond comfort, access to water makes possible what was previously difficult: asepsis during dressings, oral rehydration immediately available, hand washing between two patients, maintenance of latrines. For Amina, the change is tangible: "I don't waste the whole day anymore. I come, they take care of my child, and I leave. Since the water flows here, I'm no longer afraid of catching something else in the center."

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ANNEX 1. IFRC APPLICATION OF THE 8+3 REPORTING TEMPLATE

The IFRC network structures its result-based management along five Strategic priorities and four Enabling functions, developed based on the IFRC network's [Strategy 2030](#):

IFRC network Strategic Priorities	IFRC network Enabling Functions
SP 1 - Climate and environment	EF 1- Strategic and operational coordination
SP 2 - Disasters and crises	EF 2 - National Society development
SP 3 - Health and wellbeing	EF 3 - Humanitarian diplomacy
SP 4 - Migration and displacement	EF 4 - Accountability and agility
SP 5 - Values, power and inclusion	

The Federation-wide results matrix provides a standard way for the IFRC network to measure its progress towards Strategy 2030 implementation and supports consistent quality of the IFRC network planning, monitoring and reporting. To further advance coherence in monitoring across the IFRC network, a [Federation-wide Indicator Bank](#) has been developed and integrated into the Federation-wide monitoring systems for emergencies and longer-term work, structured along the Federation-wide results matrix as well. Signatory of the Grand Bargain Agreement, the IFRC has committed to its monitoring and reporting standards through integration of the [8+3 reporting template](#) contents into its results-based management approach. The following mapping demonstrate the way in which this report aligns with 8+3 reporting:

8+3 template	IFRC network Mid-Year Report (with variance in structure in red)
Core Questions	
1. Overall Performance	Overall Performance
2. Changes and Amendments	Changes and amendments
3. Measuring Results	Measuring Results
4. Affected Persons	Cover pages with indicators values
5. Participation & AAP	Under Q3 Strategic Priority 5: Values, power and inclusion – Community Engagement and Accountability
6. Risk management	Risk management
7. Exit Strategy and Sustainability	Under Q3 sub-sections by Strategic Priority/Enabling Function where relevant
8. Lessons Learned	Lessons learned
Additional Questions	
1. Value for Money/ Cost Effectiveness	Not included in mid-year reports
2. Visibility	Not included in mid-year reports
3. Coordination	Under Q3 Enabling Function 1: Strategic and operational coordination
4. Implementing Partners	Cross-cutting, with a focus on support to localization through the Q3 Enabling Functions 1 to 4
5. Activities or Steps Towards implementation	Cross-cutting in Q3 Strategic Priorities and Enabling Functions
6. Environment	Under Q3 Strategic Priority 1: Climate and environment



The International Federation of Red Cross and Red Crescent Societies (IFRC)

is the world's largest humanitarian network, with 191 National Red Cross and Red Crescent Societies and around 15 million volunteers. Our volunteers are present in communities before, during and after a crisis or disaster. We work in the most hard to reach and complex settings in the world, saving lives and promoting human dignity. We support communities to become stronger and more resilient places where people can live safe and healthy lives, and have opportunities to thrive.

DATA SCOPE AND LIMITATIONS

- **Timeframe and alignment:** The reporting timeframe for this overview is covering the period from 1 January to 30 June 2025. However, due to the diversity of the IFRC and differences in fiscal years, this coverage may not fully align for some National Societies.
- **Financial overview:** This overview consolidates data reported by the National Society and its IFRC network partners, as well as data extracted from IFRC's financial systems. All reported figures should include the administrative and operational costs of the different entities. The financial data with a grey background is solely reported by the National Society, including the funding sources. Financial reporting is often times estimated depending on availability of financial figures, closing of financial periods and may be incomplete. 'Not reported' could sometimes mean 'not applicable'. Also note that funding requirements are already reflected in the published 2025 IFRC network country plan. The total funding requirements show what the IFRC network has sought to raise for the given year through different channels: funding through the IFRC, through participating National Societies as bilateral support and through the host National Society from non-IFRC network sources. All figures should include the administrative and operational costs of the different entities.
 - » Host National Society funding requirements not coming from IFRC network sources can comprise a variety of sources, as demonstrated when reporting on income in the IFRC Federation-wide Databank and Reporting System
 - » Participating National Society funding requirements for bilateral support are those validated by respective headquarters, and often represent mainly secured funding
 - » IFRC funding requirements comprise both what is sourced from the IFRC core budget and what is sought through emergency and thematic funding. This includes participating National Societies' multilateral support through IFRC, and all other IFRC sources of funding
- **Missing data and breakdowns:** National Societies have diverse data collection systems and processes that may not align with the standardized indicators. Data may not be available for some indicators, for some National Societies. This may lead to inconsistencies across different reporting tools as well as potential under or over-estimation of the efforts led by all.
- **Reporting bias:** The data informing this Federation-wide overview is self-reported by each National Society (or its designated support entity) which is the owner and gatekeeper, and responsible for accuracy and updating. IFRC tries to triangulate the data provided by the National Societies with previous data and other data in the public domain.
- **Definitions:**
 - » **Local units:** ALL subdivisions of a National Society that coordinate and deliver services to people. These include ALL levels (provincial, state, city, district branches, sections or chapters, headquarters, and regional and intermediate offices, as well as community-based units)
 - » **Branches:** A Branch has its roles, responsibilities and relationship with the National Headquarters defined through the National Society's Statutes, including the level of autonomy given, especially in the area of its legal status, mobilising local resources and building local partnerships, and the decisions it makes. It has a local-level decision-making mechanism through its Branch members, board and volunteers, equally defined through the National Society's Statutes

ADDITIONAL INFORMATION

- [CF Central African Republic MYR Financials](#)
- [IFRC network country plans](#)
- [Subscribe for updates](#)
- [Live Disaster Response Emergency Fund \(DREF\) data](#)
- Operational information: [IFRC GO platform](#)
- National Society data: [IFRC Federation-wide Databank and Reporting System](#)
- [Evaluations database](#)

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