

Photo: © UNFPA/Cameroon



# Situation Report #26

The humanitarian crisis remains a critical concern

Country:	Cameroon
Emergency type:	Climate disaster <b>Conflict, Crisis Displacement, Inter-Community Violence</b>
Date Issued:	Dec 23, 2024
Covering Period:	Nov 1, 2024 to Nov 30, 2024
Contact Persons:	Justin Koffi, Resident Representative, <a href="mailto:jukoffi@unfpa.org">jukoffi@unfpa.org</a> Noemi Dalmonte, Deputy Resident Representative, <a href="mailto:dalmonte@unfpa.org">dalmonte@unfpa.org</a> Aymar Narodar Some, Humanitarian Programme Coordinator, <a href="mailto:asome@unfpa.org">asome@unfpa.org</a> Liliane Munezero, GBV AoR Coordinator, <a href="mailto:lmunezero@unfpa.org">lmunezero@unfpa.org</a> Juliette Raina Fouamno, Adolescent and youth assistant, <a href="mailto:fouamno@unfpa.org">fouamno@unfpa.org</a>

## Key Figures



## Highlights

- Conflicts, activities of non-state armed groups, recurrent climate shocks, and the resulting displacement continue to generate humanitarian needs, particularly in the Far North, North West, and South West regions.
- Flooding in the Far North region has impacted over 448,000 people during the previous months, compounding existing challenges.
- UNFPA provided sexual and reproductive health (SRH) and gender-based violence (GBV) services to 21,155 people, including distribution of dignity kits to vulnerable women, maternal and child health care, nutrition support and adolescent and youth SRH care, across the Far North, North West and South West.
- Dr Sennen Hountoun, regional director of UNFPA West and Central Africa, paid a high level advocacy visit from 9 to 15 November, advocating for increased investment in humanitarian preparedness to address climate fragility.

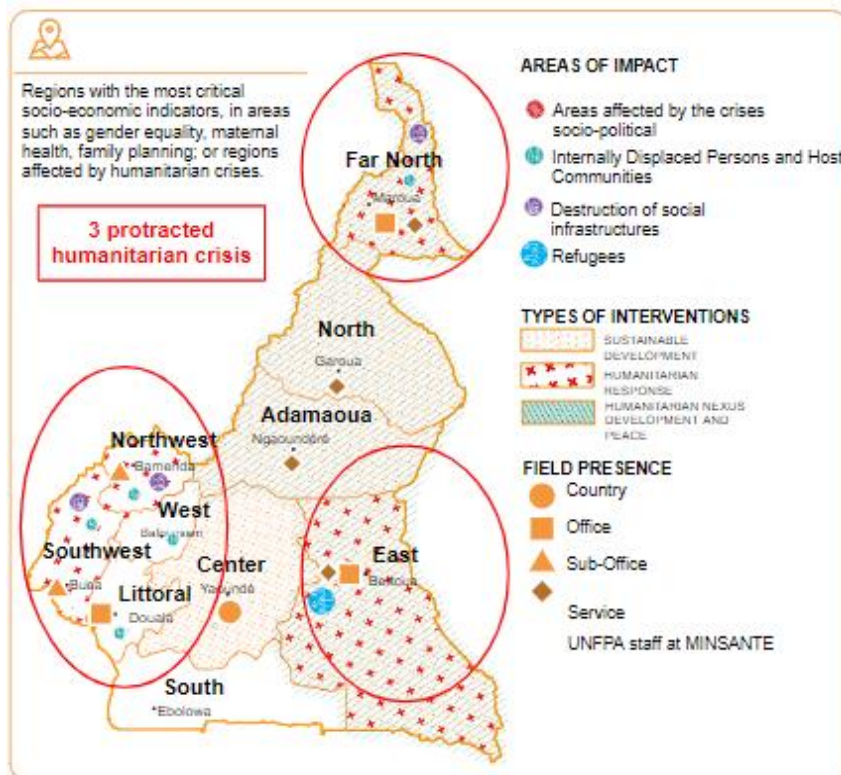
## Situation Overview

In November 2024, the Far North region of Cameroon faced a devastating combination of severe flooding and persistent insecurity. Attacks against civilians, including killings and stealing, were reported around Mokolo and in Mayo-Tsanaga department. Meanwhile, despite heavy rainfall having stopped across the region, widespread flooding continues due to rivers overflowing, impacting over 448,000 people and causing significant damage to homes, infrastructure, and agricultural land. This has led to displacement, food insecurity, and increased health risks for vulnerable populations already struggling with insecurity. The floods have further complicated the humanitarian response, hindering access to those in need, exacerbating existing vulnerabilities, and causing a cholera outbreak in Maroua. Despite these challenges, the government, local authorities, and humanitarian actors are providing essential assistance, including shelter, food, water, and health care. However, ongoing response to address the immediate impacts of the floods is limited and strategies to build long-term resilience in the face of recurring climate shocks and insecurity are much needed. In the North West and South West regions, separatists and government forces clashed repeatedly, resulting in casualties among security entities.

## UNFPA Response

### Sexual and Reproductive Health:

- Mobile clinics:** Mobile services and community awareness sessions to refer to these services were organized in Yagoua, Blangoua, Kousseri and Golfey (Far North) and in Last Bush, Ofrikpabi and Ashum (South-West)
- Medical consultations:** 4,089 individuals (52% women and girls) received medical services, including maternal and child health care, nutrition support and adolescent and youth SRH care.
- Antenatal care:** 2,546 pregnant women received antenatal consultations at UNFPA-supported health facilities.
- Safe births:** 47 UNFPA-deployed midwives assisted with 1,150 safe births, including 120 C-sections.
- Postnatal care:** Postnatal care services were provided to 1,187 mothers and their newborns.
- Newborn support:** 16 baby box kits, containing essential supplies for newborns, were distributed to pregnant women and new mothers.
- Management of obstetric complications:** UNFPA-deployed midwives successfully identified and managed 335 obstetric emergencies.
- STI diagnosis and treatment:** 579 individuals were diagnosed and treated for STIs.
- Clinical management of rape:** 71% of reported sexual violence cases received medical and psychosocial support within the critical 72 hour window.



**GBV and Mental Health and Psychosocial Support Services:**

- **Awareness raising:** 6,525 people (75% females) were reached by sensitization activities through 192 sessions on **women and girl’s empowerment and self-esteem**.
- **550 dignity kits** were distributed to vulnerable women and girls including refugees of Minawao camp (containing hygiene supplies and menstrual health information).
- **16 Days of Activism Against Gender-Based Violence:** UNFPA globally led the 16 Days Campaign under the theme “#Uprooted: Resilience in Crisis” to highlight the gendered risks of displacement, while the Ministry of Family marked this year’s 18th national edition with the theme “Fighting Back and Rebuilding After Violence”. Both initiatives aimed to address needs in crisis settings, support survivors, and enhance services. In the Far North, UNFPA activities included sensitization sessions for women, girls, and community leaders in Minawao refugee camp, with performances by X-Maleya delivering GBV awareness messages. Similar campaigns in Kousseri and nearby areas targeted schools, communities, and IDP camps, with survivors referred for comprehensive care. In the North West and South, information was provided on GBV core concepts, consequences, and available services.
- **Psychosocial support:** 587 women and girls were involved in psychosocial activities, including recreational activities, group discussions, life skills building, psychological first aid and GBV case management, in Women and Girls’ Safe Spaces (WGSS).
- **Case Management:** This month, a total of 18 social workers delivered case management services to survivors of GBV, addressing all reported forms, including rape, sexual assault, physical assault, forced marriage, denial of resources, opportunities, and services, as well as psychological violence. 22% of new intakes in service provision points requested referrals to other services (health, security and socio-economic). 95% of GBV cases that were closed declared satisfaction with services.
- In the West, UNFPA partnered with the Association of Bayam-Sellams (ASBY) to engage women, girls, and students in educational sessions. Universities such as the University of Buea hosted discussions, reaching students and lecturers with GBV prevention and response messages.

**Results Snapshots**



## Coordination Mechanisms

### Gender-Based Violence:

The GBV Area of Responsibility (AoR) has a national presence in Yaoundé, and subnational presences in the Far North, North West and South West regions. The months have been marked by the 2025 Humanitarian Programming Cycle (HPC) process. The GBV AoR has completed the data collection phase of the 2025 assessment “Voices from Cameroon” in the regions of West, Litoral, North West, South West, Far North and East, and findings will be shared in December.

### Sexual and Reproductive Health:

The mapping and sharing of Inter Agency Reproductive Health (IARH) kits reinforced the coordination around needs. Consequently, the majority of health facilities supported by International Medical Corps (IMC), Action Contre la Faim (ACF), and UNFPA, received post rape IARH kits by UNFPA. The mobile clinic timetable has been updated in order to respond to the floods until the end of 2024 in a coordinated manner and to avoid duplications or overlaps.

### Mental Health and Psychosocial Support:

In November, the North West and South West Mental Health and Psychosocial Support Thematic Working Group’s (MHPSS TWG) members discussed evidence-based psychosocial support interventions for GBV survivors. The MHPSS referral pathway for the North West and South West regions is being updated.

## Funding Status

UNFPA has mobilized US\$3,924,689 for its 2024 humanitarian response in Cameroon, representing 35% of the total funding requirement (US\$11,070,664). While UNFPA acknowledges the support from USAID-BHA, Canada, Norway, DG-ECHO, and UN-CERF, additional funding is urgently needed.

### Grateful to UNFPA Cameroon’s humanitarian implementing partners:

