

Country: Cameroon

Emergency type: Climate Disaster Conflict, Crisis Displacement, Inter-Community Violence

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Key Figures



3,369,000Total people affected



808,560 Women of reproductive age



87,792 Estimated pregnant women



367,000People targeted with SRH services



594,000People targeted with GBV programmes

Highlights

- The situation of crisis zones in Cameroon was marked by several episodes of violence in January, including Non-State Armed Groups (NSAGs) attacks in the Far North region, in the anglophone areas of the country as well as violent farmland protests. This resulted in deaths, human rights violations and displacements.
- In January, UNFPA and its partners assisted 24,306 people with lifesaving sexual and reproductive health (SRH) services, 69 per cent of whom were women and girls. In addition,



18,887 people received gender-based violence (GBV) services and information, 78 per cent of whom were women and girls.

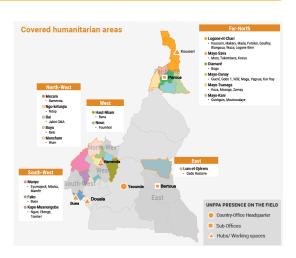
Situation Overview

In January, the situation in Cameroon's Far North was marked by attacks by NSAGs and raids by state forces against kidnappers. In addition, some farmland expropriation protests turned violent. In the Anglophone regions clashes between NSAGs and army and cross-border attacks were reported.

UNFPA Response

Sexual and Reproductive Health

Mobile clinics were deployed across several localities in the Far North Region, including Gore, Madagascar 2, Masil al Kanam, Compagnie, Kawadji, Comissariat, Hile Houssa, and Ndou IDP camps near Kousseri. These clinics provided essential Minimum Initial Service Package (MISP) services for SRH, benefiting 5,532 patients, including 4,646 women and 886 men. The mobile teams conducted 511 general health consultations, 210 pre- or post-natal care consultations, and 22 family planning consultations. They also provided psychosocial first aid to 131 individuals, including GBV survivors and those showing signs of mental health needs.



Map Disclaimer: The boundaries and names shown and the designations used on this map do not imply official endorsement by the United Nations.

In addition to direct medical services, 4,658 people — women, men, and adolescents — were sensitized on SRH and the consequences of gender-based violence, with services and referrals provided as needed. Beyond mobile clinics, in January 2025, UNFPA supported 32 health facilities across the Far North, East, West, North West, and South West regions. With the assistance of 45 humanitarian midwives, these facilities continued to deliver critical SRH services, addressing the urgent needs of affected communities. In these service provision points, UNFPA supported:

- 4,487 health consultations, with 40 per cent of patients being women and girls.
- 766 pregnant women attended at least two antenatal consultations, and 230 births were assisted by skilled personnel. Among these, 110 deliveries experienced complications, including 27 cases of postpartum hemorrhage, with 10 women requiring blood transfusions, and 54 caesarean sections performed.
- 69 baby boxes containing essential supplies for new mothers and their newborns were distributed to the most vulnerable families.
- 336 mother-child pairs received post-natal consultation services, and 48 clean delivery kits were provided to women nearing term.



Clinical management of rape services was made available to survivors in need.

GBV and Mental Health and Psychosocial Support Services

UNFPA, in partnership with women-led organizations, provided GBV protection services in 15 Women and Girls' Safe Spaces and surrounding communities across the Far North, North West, and South West regions. These services were delivered by a dedicated team of 30 social workers.

- 18,887 individuals 78 per cent of whom were women and girls were sensitized on GBV prevention and risk mitigation measures. Sessions covered gender equality, the consequences of early and forced marriage, SRH, sexually transmitted infections (STIs), and menstrual health management.
- 444 women and girls participated in knitting, sewing, embroidery, agricultural, and craft
 activities, as well as individual and group therapy. Additionally, 86 survivors accessed mental
 health and psychosocial support (MHPSS) services.
- 72 flood-affected women and girls in Logone and Chari division (Far North Region) received dignity kits to support their basic hygiene needs.
- GBV survivors received case management services, and among those who completed the
 process, 82 per cent reported an improvement in their well-being. To strengthen coordination
 and response efforts, two GBV case management meetings were held with social workers and
 psychologists.

Results Snapshots



24,306

People reached with **SRH services** 69 per cent women and girls



32

Health facilities supported



18,887

People reached with **GBV & SRH information** 78 per cent women and girls



117

48 dignity kits distributed and 69 baby boxes



1,091

People reached with **GBV prevention**, **mitigation**, **and response** activities



15

Women and girls' safe spaces supported



Coordination Mechanisms



Gender-Based Violence:

The referral pathway for the North West and South West regions was updated and disseminated. The GBV Area of Responsibility (GBV AoR) capacity-building action plan was adopted, and members were briefed on available online GBV courses. Additionally, the operational presence in the Logone and Chari division (Far North Region) was mapped.

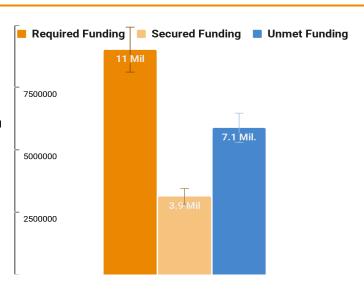


Sexual and Reproductive Health:

The Sexual and Reproductive Health in Emergencies Technical Team (SRHiE TT) validated the 2025 annual work plan, and a new consignment of post-rape kits was distributed to service provision points in need, with support primarily from UNFPA, ACF, and CBCHS.

Funding Status

UNFPA Cameroon has secured 35 per cent of its 2025 humanitarian funding, amounting to 3,134,946 USD, with contributions from the Bureau for Humanitarian Assistance of the United States Agency for International Development (BHA-USAID), the Directorate-General for European Civil Protection and Humanitarian Aid Operations (DG-ECHO), the Government of Canada, and the United Nations Central Emergency Response Fund (UN-CERF).



UNFPA is grateful to humanitarian implementing partners supporting our response in Cameroon













