



Situation Report #22

Deepening crisis in Far North, North West and South West regions of Cameroon



Country:	Cameroon
Emergency type:	Conflict, Instability, Climate Change, Crisis Displacement, Inter-community Violence
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Key Figures



3,400,000
Total people affected



816,000
Women of reproductive age



88,600
Estimated pregnant women



367,000
People targeted with SRH services



594,000
People targeted with GBV programmes

Highlights

- The humanitarian crisis in Cameroon is deepening; livelihoods are being destroyed and lives are at risk. The situation demands a stronger and united response with adequate funding.
- In July 2024, UNFPA provided life-saving sexual and reproductive health (SRH) services to 13,300 individuals, and gender-based violence (GBV) prevention and response services to 4,934 people across crisis-affected regions. This included supporting 2,350 women to give birth safely.

- UNFPA's ability to deliver life-saving SRH and GBV services is being restricted by a funding gap of US\$8,416,004. Only 24 per cent of funds needed in 2024 have been secured to date.

Situation Overview

- Severe flooding affected multiple areas during July, with Mayo-Tsanaga division bearing the brunt of the floods. The situation was also dire in Fotokol as well as in Logone-and-Chari division, where access to health facilities, including UNFPA-supported facilities, was cut off, resulting in two maternal deaths.
- Clashes between government forces and non-state armed groups (NSAGs) in the North-West and South-West regions of Cameroon continued in July 2024, resulting in deaths and injuries of both soldiers and civilians, and increasing tensions between Francophone and Anglophone communities.
- In the Far-North, despite counter-insurgency operations by the Multinational Joint Task Force (MJTF), NSAGs continued to launch attacks, resulting in death, destruction and looting.

UNFPA Response

Sexual and Reproductive Health and Primary Health Care

- As part of ongoing efforts, UNFPA and USAID-BHA have extended the "*Prevention and Response to GBV and SRH in Underserved Areas*" project to the North-West and South-West Regions as well as to new displacement sites in the Far-North Region. The expanded initiative will reach 51,520 individuals directly and benefit an additional 232,510 persons indirectly.
- 45 UNFPA-deployed midwives provided SRH services in the Far-North, East, North-West and South-West regions.
- 1,611 people (91% women) were reached through 133 awareness-raising sessions on SRH and available services.
- 986 women attended at least 2 antenatal consultations at UNFPA-supported health facilities.
- 274 women and girls received individual clean delivery kits for safe childbirths; 47 mothers received baby boxes containing supplies for newborns.
- 2,350 deliveries took place at UNFPA-supported health facilities, including 249 cesarean sections.
- Midwives recorded 185 obstetric complications (165 were managed and 20 women were referred).
- No maternal deaths were recorded at health facilities in July but two maternal deaths were reported in the Mada Health District.
- There were 25 neonatal deaths at health facilities in July and two deaths in the community; 3 cases were audited.
- 185 people were diagnosed with and treated for sexually transmitted infections (STIs).
- 42 women were treated for obstetric injuries, including obstetric fistula, at Mokolo Regional Hospital Annex. Women also received a dignity kit.

GBV and Mental Health and Psychosocial Support Services

- Of people who received GBV services, 32% received medical treatment, including 63% who received post-rape treatment within 72 hours. 23% were referred to psychosocial, mental health and protection services.

- 59 outreach sessions took place in Belo and Jakiri sub divisions in the Northwest Region, reaching 600 people (367 women, 94 girls, 29 older persons, 12 persons with disabilities, 63 men and 35 boys).
- 3,887 people (69% female) were reached through 60 sensitization sessions in the Far-North. Sessions covered GBV and its impacts, the importance of education for girls, the empowerment of women and girls, personal hygiene for girls, and family planning.
- 285 women and girls attended psychosocial activities at Women and Girls' Safe Spaces (WGSS) in Mada, Fotokol, Guere and Vele in the Far-North region.
- 102 women received cash assistance for transportation to essential GBV services (health, security, legal, economic) in the Far-North.

Results Snapshots



13,301
People reached with **SRH services**
66% women and girls





21
Health facilities supported



4,934
People reached with **GBV prevention, mitigation and response activities**
98% women and girls



17
Women and Girls Safe Spaces supported

	321	Dignity kits and newborn baby boxes distributed to women
	20	Reproductive health kits provided to 8 health facilities

Coordination Mechanisms

Gender-Based Violence:

UNFPA leads the Gender-Based Violence Area of Responsibility (GBV AoR) in Cameroon at both the national (Yaoundé) and sub-national levels (FN and NW/SW regions). In July, the GBV Information Manager visited Cameroon from WCARO to strengthen information management systems. Several dashboards were developed to enhance the presentation of GBV data – accessible [here](#). In the FN region, the GBV AoR participated in an

inter-agency field mission organized by OCHA in Yagoua, Mayo-Danay division. The mission assessed the needs of people affected by flooding; highlighting the critical need for specialized protection services and support for women and girls. The GBV AoR is working to mobilize actors to address GBV needs during the flooding. In July, the GBV AoR, in collaboration with the NGO Médecins du Monde, provided support for capacity building in protection from sexual exploitation and abuse (PSEA) and GBV principles to 18 health personnel (including 15 women) in Fouban in the West region, which is hosting an increasing number of internally-displaced persons from the NW and SW regions.

Sexual and Reproductive Health:

The SRH in Emergencies Technical Working Group (SRHiE TWG) is actively coordinating efforts to effectively implement the Minimum Initial Service Package (MISP)-SRH components in crisis-affected areas. To enhance service delivery, the TWG is engaging health and community organizations representing vulnerable populations, raising awareness of their critical role.

Mental Health and Psychosocial Support:

The Mental Health and Psychosocial Support (MHPSS) Thematic Working Group (TWG) for the North West and South West Regions validated the mapping questionnaires for MHPSS services, as well as the mapping of MHPSS practitioners in both regions. The mapping exercise will take place in August.

Funding Status

To date, only 24% – US \$2,654,660 – of the required funding of US \$11,070,664 has been secured, leaving a funding gap of US \$8,416,004.

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We thank our implementation partners:

