UNFPA Cameroon Achievements in 2019
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WHO WE ARE WHAT WE DO

UNFPA, the United Nations sexual and reproductive health and rights agency delivers a world where every pregnancy is wanted, every childbirth is safe and every young person’s potential is fulfilled. Created in 1969, the Fund opened its Cameroon’s Country Office the same year to support government’s efforts to integrate population issues in the development policy. By 2030, within the contexts of the Sustainable Development Goals (SDGs), and the implementation of the International Conference on Population and Development (ICPD), UNFPA aims to:

Reach increased availability and use of integrated sexual and reproductive health services, including family planning, maternal health and HIV that are gender responsive and meet human rights standards for quality of care and equity in access.

Our three transformative results are:

- **End** preventable maternal death
- **End** the unmet need for family planning
- **End** violence against women and girls and harmful practices

UNFPA Strategic Framework
## Reproductive and Maternal Health

### Issues

<table>
<thead>
<tr>
<th>Description</th>
<th>Details</th>
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<tbody>
<tr>
<td>Population</td>
<td>A population of 23.6 million with a 2.4% growth rate per year (2011)¹</td>
</tr>
<tr>
<td>Youth</td>
<td>43.6% youth and adolescent (10-24 years) and 33% children under 15 years ²</td>
</tr>
<tr>
<td>Mortality</td>
<td>A high maternal mortality ratio 782 maternal deaths per 100,000 live births (2011)³</td>
</tr>
<tr>
<td>Contraceptives</td>
<td>Contraceptive prevalence rate: 14% in 2011 to 16% in 2016 ⁴</td>
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### How we do it

<table>
<thead>
<tr>
<th>Description</th>
<th>Details</th>
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</thead>
<tbody>
<tr>
<td>Personnel Training</td>
<td>Health personnel training and capacity building</td>
</tr>
<tr>
<td>Equipment Provision</td>
<td>Provision of medical and non-medical soft and hardware equipment to health facilities</td>
</tr>
<tr>
<td>Emergency Solutions</td>
<td>Provision of emergency transport solutions for pregnant and birthing women to health facilities</td>
</tr>
<tr>
<td>RH Kits</td>
<td>Provision of RH kits in cases of Emergency Obstetrical and Neonatal Care</td>
</tr>
<tr>
<td>Monitoring System</td>
<td>Setting up sexual reproductive health monitoring system</td>
</tr>
<tr>
<td>Campaign</td>
<td>Campaign for free surgical treatment of women affected by obstetric fistula.</td>
</tr>
<tr>
<td>Advocacy</td>
<td>Enhanced advocacy, sensitization and resource mobilization</td>
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### Achievements

<table>
<thead>
<tr>
<th>Description</th>
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</tr>
</thead>
<tbody>
<tr>
<td>Personnel Training</td>
<td>180 health personnel trained in Emergency Obstetric and Neonatal Care</td>
</tr>
<tr>
<td>Midwives</td>
<td>838 midwives trained</td>
</tr>
<tr>
<td>Personnel Training</td>
<td>180 health personnel trained in Comprehensive Emergency Obstetric and Neonatal Care</td>
</tr>
<tr>
<td>Personnel Training</td>
<td>50 health personnel trained in adolescent sexual and reproductive health service delivery</td>
</tr>
<tr>
<td>Facilities</td>
<td>110 health facilities equipped to offer an integrated sexual and reproductive health service package</td>
</tr>
<tr>
<td>Personnel Training</td>
<td>200 health personnel trained in Maternal Death Surveillance and Response</td>
</tr>
<tr>
<td>Fistula Treatment</td>
<td>364,807 women had a safe delivery with the help of trained personnel</td>
</tr>
<tr>
<td>Personnel Training</td>
<td>79 health personnel trained in obstetric fistula treatment</td>
</tr>
<tr>
<td>Fistula Treatment</td>
<td>302 women offered free obstetric fistula treatment</td>
</tr>
</tbody>
</table>

### Sources

1. Demographic and Health Survey (DHS) 2011
2. Demographic and Health Survey (DHS) 2011
3. Demographic and Health Survey (DHS) 2011
4. Multiple Indicator cluster Survey (MICS) 2017
5. Demographic and Health Survey (DHS) 2018
Family Planning

Issues
- High total fertility rate: 5.1% in 2011 to 4.9% in 2014
- Low contraceptive prevalence rate: 14% in 2011 to 16% in 2014
- High unmet need for modern contraceptive: 18% in 2014

How we do it
- Enhanced training and capacity building in public health facilities and communities
- Enhanced advocacy, information campaign through Medias, community, religious and youth leaders
- Integrated family planning promotion and community-based distribution in the standard package of community health agents
- Strengthening the national supply chain system in including family planning commodities

Achievements
- 976,199 women are new users of modern contraceptive methods
- 3,250 health facilities strengthened to offer subcutaneous injectable contraceptives at community level through community health workers
- 748 health personnel trained to administer family planning methods
- 2,206 community health agents trained to administer modern contraceptive methods
- 6,420 health facilities supplied with reproductive health and contraceptive commodities

An electronic logistic management system ensuring greater health commodity security and availability both at national and regional levels established.

Sources
1. Multiple Indicator cluster Survey (MICS) 2014
2. Demographic and Health Survey (DHS) 2011
3. Multiple Indicator cluster Survey (MICS) 2014
### Issues

- Child marriage, stigma around Gender Based Violence (GBV) and rape are still prevalent.
- 36% of women married before 18 years (2011)
- 30% of married women have reported physical or sexual violence (2011)
- Low level of services delivery on GBV

### How we do it

- Establishment of Gender Based Violence (GBV) platforms and safe spaces for GBV survivors
- Establishment of gender based violence information management system (GBV/IMS)
- Provision of training and technical assistance to community based organisations in dispatching dignity, individual delivery and RH kits in humanitarian settings
- Provision of essential services kits for women and girls in case of emergency to community based partner organizations

### Achievements

- 7,406 women and girls benefited from both psychosocial support and reference to GBV’s specialized services providers
- 821 persons (280 women, 275 girls, 163 men and 103 boys) received Psychological First Aid
- 14 safe spaces established to provide GBV services
- 04 Inter-agency GBV coordination sub-clusters functional and chaired by UNFPA, in the South West (SW), North West (NW), and Far North Regions as well as at the national level
- 373 service providers and community agents capacitated in different areas of SRH and GBV
- 20,000 copies of referral pathways disseminated to communities in the NW/SW
- 166,166 persons (50,845 women, 23,022 girls, 81,185 men and 11,114 boys) sensitized on GBV and SRH in the NWSW and Far North regions
- 972 persons with disabilities supported with various GBV/SRH services

### Sources

1- Demographic and Health Survey (DHS) 2011
**Youth potential**

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<thead>
<tr>
<th>Issues</th>
<th>How we do it</th>
<th>Achievements</th>
</tr>
</thead>
<tbody>
<tr>
<td>A population of 23.6 million with 2.4% growth rate per year (2011)</td>
<td>Enhanced advocacy and capacity-building for integration of youth issues including comprehensive sexual education and demographic dividend into national policies</td>
<td>67,594 adolescents and youth benefited from sensitized on thematics related to comprehensive sexuality education</td>
</tr>
<tr>
<td>43.6% youth and adolescent (10-24 years) and 33% children under 15 years</td>
<td>Capacity-building and promotion of Multipurpose Youth Promotion Centers and Adolescents and Youth SRH Units</td>
<td>13 new institutions strengthened to deliver and monitor comprehensive sexuality education</td>
</tr>
<tr>
<td>19.5% illiteracy rate among adolescents (15-19 years)</td>
<td>Capacity-building to youth and their organizations as drivers of development</td>
<td>164 community leaders sensitized on comprehensive sexuality education.</td>
</tr>
<tr>
<td>24.5% of girls (15-19 years) engaged in sexual relationships</td>
<td>Capacity-building in peace dialogue and conflict resolution to youth organizations.</td>
<td>33,997 adolescents and youth (15,921 girls and 18,076 boys) sensitized on the comprehensive sexuality education through U-Report</td>
</tr>
<tr>
<td>30.2% of boys (15-19 years) engaged in sexual relationships</td>
<td></td>
<td>2,035 households sensitized to fight child marriage.</td>
</tr>
<tr>
<td>28% in maternal mortality ratio originates from the youth</td>
<td></td>
<td>382 young volunteers trained on campaigning to end child marriage.</td>
</tr>
</tbody>
</table>

**Sources**

1. Demographic and Health Survey (DHS) 2011

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**Number of new institutions strengthened to deliver and monitor comprehensive sexual education**

- **Baseline 2019**: 29
- **Target in 2019**: 49
- **Achievement in 2019**: 43

**Number of youth trained on conflict resolution, community dialogue and mediation**

- **Baseline 2018**: 120
- **Target in 2019**: 240
- **Achievement in 2019**: 263

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**2011**

- **43.6% youth and adolescent (10-24 years)**
- **33% children under 15 years**

**2019**

- **13 new institutions strengthened to deliver and monitor comprehensive sexuality education**
- **164 community leaders sensitized on comprehensive sexuality education**
- **33,997 adolescents and youth (15,921 girls and 18,076 boys) sensitized on the comprehensive sexuality education through U-Report**
- **2,035 households sensitized to fight child marriage**
- **382 young volunteers trained on campaigning to end child marriage**
- **263 youth trained in conflict resolution, peace dialogue and mediation within communities**

**2019-2021**

- **300 adolescents and youth (160 girls and 140 boys) exposed to violent extremism in the Far North Region benefitted from psychosocial and economic reintegration assistance.**
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<th>How we do it</th>
<th>Achievements</th>
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</thead>
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<tr>
<td>4.3 million Persons, in estimate, needed urgent humanitarian assistance in Cameroon in 2019.</td>
<td>Ensure the specific needs of women in sexual and reproductive health (SRH) are factored into Humanitarian response</td>
<td>30 reproductive health kits positioned in health facilities to meet RH needs of 260,000 persons</td>
</tr>
<tr>
<td>82% increase in displacement in 2019 compared to 2018.</td>
<td>Delivery of SRH emergency services and kits</td>
<td>3,000 individual delivery kits distributed to visibly pregnant women</td>
</tr>
<tr>
<td>Renewed armed attacks have driven tens of thousands more Nigerians into Cameroon’s Far-North region, which already hosts 138,000 refugees.</td>
<td>Technical Assistance and capacity building to services providers and community based organizations offering direct assistance to survivors</td>
<td>16,445 community members reached with lifesaving messages and referral pathways for SRH and GBV services.</td>
</tr>
<tr>
<td>In North-West and South-West regions, worsening violence has uprooted 437,000 people and forced over 32,000 to seek refuge in Nigeria.</td>
<td>Coordination of GBV information management system (GBV/IMS)</td>
<td>Coordination of GBV/IMS in the Far North, North-West and South-West regions</td>
</tr>
<tr>
<td>US$299 million were needed for the 2019 UN Humanitarian Response Plan to provide support to 2.3 million people.</td>
<td>Psychosocial assistance to GBV survivors</td>
<td>10,000 girls and women with disabilities reached with cultural friendly dignity kits</td>
</tr>
<tr>
<td></td>
<td>Communication and monitoring</td>
<td>2,000 economic recovery kits distributed to surviving women and girls</td>
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<tr>
<td></td>
<td></td>
<td>257 cholera kits</td>
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<tr>
<td></td>
<td></td>
<td>Distributed</td>
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<tr>
<td></td>
<td></td>
<td>19,660 male condoms</td>
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<tr>
<td></td>
<td></td>
<td>250 internally displaced elderly persons received assistance in basic necessities</td>
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<tr>
<td></td>
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<td>Contribution to inter-agency humanitarian reporting</td>
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<tr>
<td></td>
<td></td>
<td>UNFPA’s Situation Report constantly edited</td>
</tr>
</tbody>
</table>
Population and Data

Issues
- Low availability of updated data
- Low capacity for data generation and use
- Low implementation of the demographic dividend roadmap

How we do it
- Capacity-building of the national statistics and information system (INS, BUCREP, etc.).
- Assistance to government in data generation, dissemination and use.
- Enhanced advocacy for full implementation of ICPD Program of Action and the demographic dividend roadmap

Achievements
- A survey, a study and a mapping conducted on reproductive health, youth and demographic dividend
  - 02 policy briefs on youth and the demographic dividend produced
  - 02 studies on resilience conducted
  - 01 facility survey conducted
- Monitoring Report on the implementation of the 7th Country Program Document and the Sustainable Development Goals conducted.
- Technical assistance to the 4th General Census of Population and Housing’s team provided
- The 5th Demographic and Health Survey (2018) produced
- Cameroon’s official delegation attended the Nairobi Summit and made commitments on full implementation of the ICPD.
LIST OF ICONS USED

- Population trends
- Youth leadership and participation
- Pregnant woman
- Family planning
- Midwifery
- Health care
- Obstetric fistula
- Financial resources
- Migration
- Ageing
- Sexual and reproductive health
- Child marriage
- People affected by conflict or disaster
- Gender violence
- Stop gender violence
- Humanitarian action
- Comprehensive sexuality
- Refugee
- Condom
- Demographic dividend
IN THE SPOTLIGHT IN 2020 - END FISTULA CAMPAIGN

FIRST LADY CHANTAL BIYA ENGAGES TO JOIN UNFPA’S CALL TO END OBSTETRIC FISTULA IN CAMEROON

An estimated 20,000 women and girls suffer from obstetric fistula in Cameroon. UNFPA leads the “End Fistula” campaign in Cameroon since 2003 and supports the Ministry of Public Heath, communities, families, women and girls affected by this medical condition. On December 17th, 2018, the United Nations General Assembly adopted the Resolution A/RES/73/147, which calls to intensify actions taken to end obstetric fistula worldwide by 2028.

In compliance to that resolution, the Government of Cameroon and key partners including UNFPA have benefited from the support of the First Lady Chantal Biya to lead a year-long sensitization and resource mobilization campaign in 2020. The aim is to raise awareness and resources as means to accelerate the full implementation in Cameroon of the UN resolution adopted to relieve women and girls from the suffering of obstetric fistula.

3 steps in joining the campaign

1. Become a volunteering member of the national coalition against fistula and stay informed and committed
2. Participate to the national forum to end fistula
3. Donate financial and non-financial resources to help take care of thousands of affected women and girls in:
   - Prevention of obstetric fistula
   - Identification of women affected
   - Repair surgery
   - Psychosocial assistance
   - Socio-economic reintegration

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KEY PARTNERS
Government – NGOs – Civil society – Communities

DONORS

The Government of Cameroon

Central Emergency Response Fund (CERF)

Chantal Biya Foundation

European Union

French Embassy

Fondation ORANGE

GIZ – Deutsche Gesellschaft für internationale Zusammenarbeit

Global Fund for AIDS, Tuberculosis and Malaria

Government of Japan

Islamic Development Bank

World Bank

World Food Program