

HUMANITARIAN NEEDS OVERVIEW CAMEROON

HUMANITARIAN
PROGRAMME CYCLE
2022
ISSUED APRIL 2022



About

This document is consolidated by OCHA on behalf of the Humanitarian Country Team and partners. It provides a shared understanding of the crisis, including the most pressing humanitarian need and the estimated number of people who need assistance. It represents a consolidated evidence base and helps inform joint strategic response planning.

PHOTO ON COVER

Domayo IDP site.

Photo: OCHA/Ariane Maixandeau

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Caveat on displacement figures used for Littoral, Centre and West regions

The Humanitarian Needs Overview (HNO) and the Humanitarian Response Plan (HRP) 2022 have been developed in a collective and collaborative manner with relevant stakeholders. The figures of internally displaced persons (IDPs) in the Littoral, West and Centre regions have been collected by humanitarian partners through a multi-sectoral needs assessments tool (MSNAs) in consultation with local authorities in August and September 2021. They are as follows: 81,298 IDPs in the Littoral, 84,927 in the West, 60,084 IDPs in the Centre. Movements of populations linked to the crisis in the North-West and South-West continue to be dynamic, wherefore the IDP figures used refer to a certain moment in time. The Cameroonian Ministry of Territorial Administration (MINAT) estimates that there are between 8,000 and 10,000 IDPs in each of these three regions. In 2022, the humanitarian community will continue to work with MINAT to follow up on the evolution of the humanitarian situation and related issues in service of the most vulnerable people.

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OCHA coordinates humanitarian action to ensure crisis-affected people receive the assistance and protection they need. It works to overcome obstacles that impede humanitarian assistance from reaching people affected by crises, and provides leadership in mobilizing assistance and resources on behalf of the humanitarian system

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The Financial Tracking Service (FTS) is the primary provider of continuously updated data on global humanitarian funding, and is a major contributor to strategic decision making by highlighting gaps and priorities, thus contributing to effective, efficient and principled humanitarian assistance.

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Summary of Humanitarian Needs and Key Findings

Current figures

PEOPLE IN NEED	WOMEN	CHILDREN (<18 YEARS)	ADULTS (18-59 YEARS)	ELDERLY (>59 YEARS)
3.9M	53%	57%	38%	5%



FAR NORTH REGION, CAMEROON
Bogo IDP site
Photo : OCHA/Ariane Maixandeau

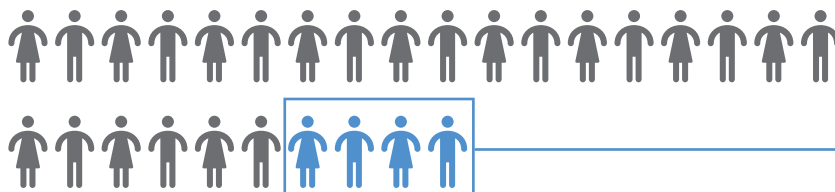
TOTAL POPULATION

27.6M

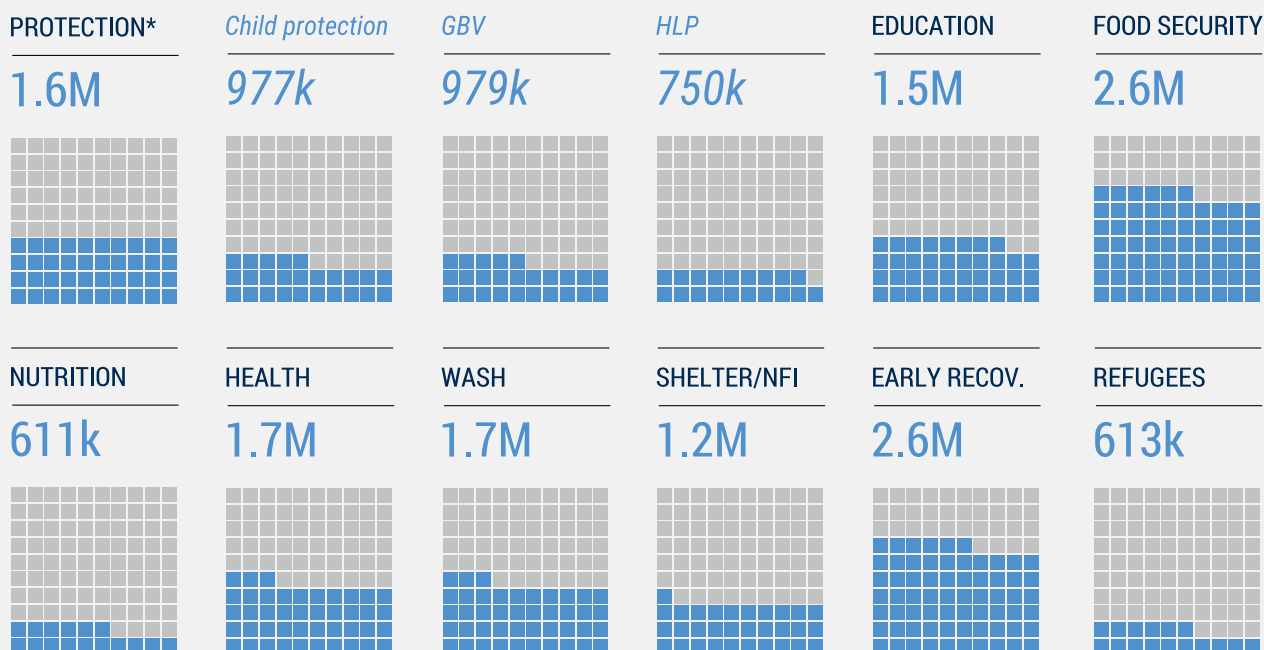


PEOPLE IN NEED

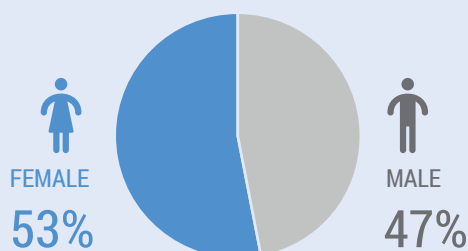
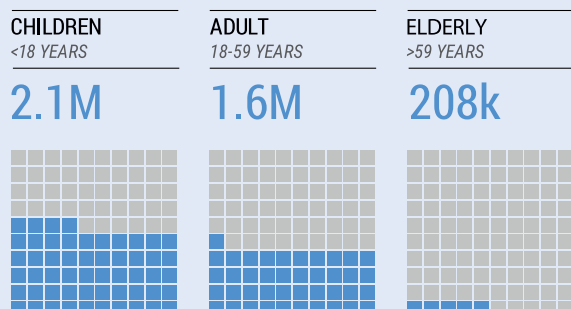
3.9M



BY SECTOR



BY AGE & SEX



Severity of Humanitarian Conditions and number of people in need

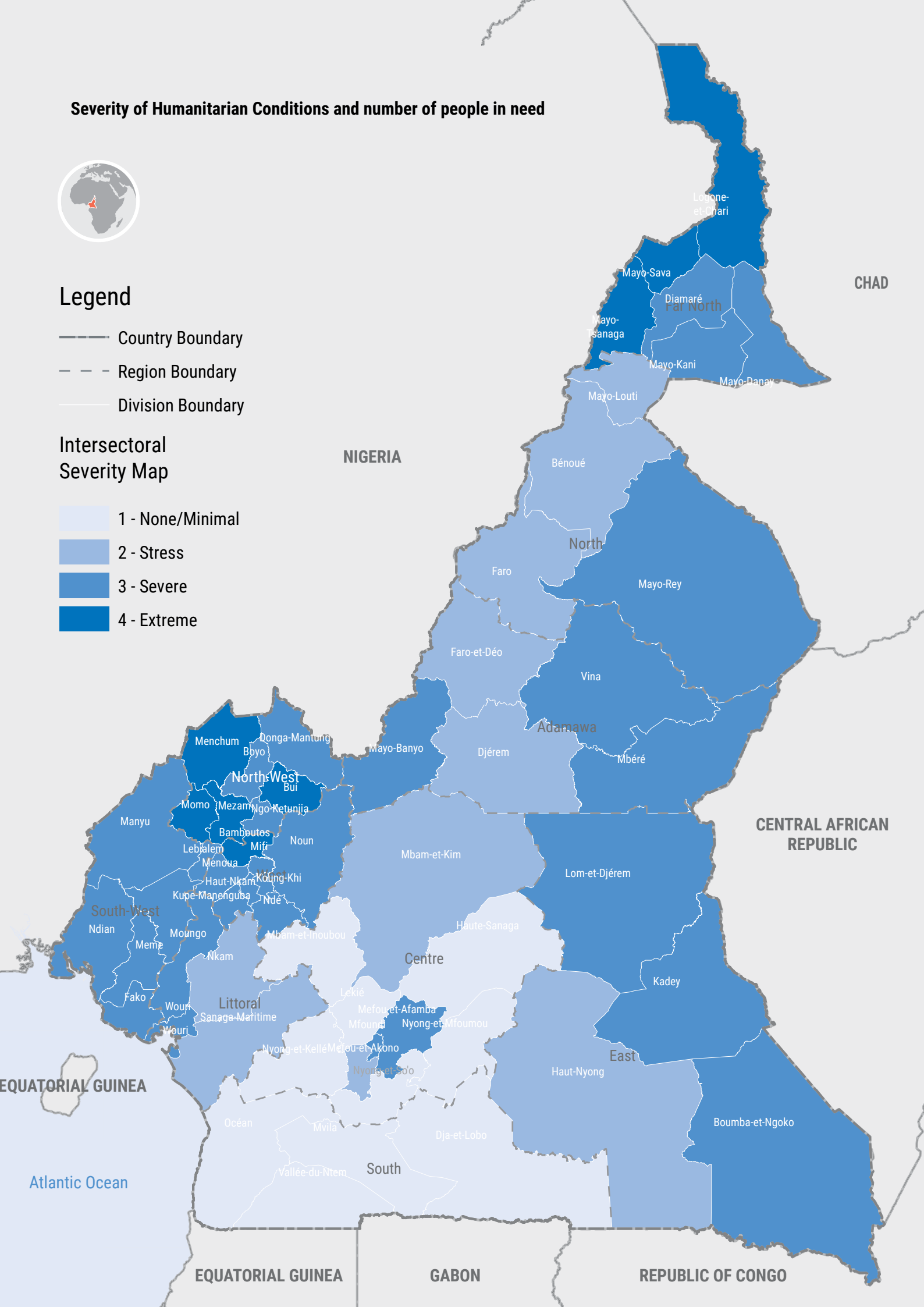


Legend

- Country Boundary
- Region Boundary
- Division Boundary

Intersectoral Severity Map

- 1 - None/Minimal
- 2 - Stress
- 3 - Severe
- 4 - Extreme



WEST REGION, CAMEROON
An IDP family in host community
Photo : OCHA/Ariane Maixandeu



Part 1:

Impact of the Crisis and Humanitarian Conditions

EAST REGION, CAMEROON

Photo: UNICEF/Salomon Beguel



1.1

Context of the Crisis

Nine out of ten regions of Cameroon continue to be impacted by three complex, protracted, humanitarian crises caused by continuous violence in the Lake Chad basin and in the North-West and South-West regions and the presence of over 325,000 refugees from the Central African Republic (CAR) in the eastern regions (East, Adamawa and North).¹ Humanitarian needs are compounded by structural development deficits and chronic vulnerabilities that further challenge the long-term recovery of affected people. Also, the COVID-19 pandemic affected the population with over 109,666 confirmed cases and 1,853 deaths as of 29 December 2021 and has significantly reduced public and private revenues in Cameroon. The COVID-19 prevention and response measures continue to contribute to increased costs for humanitarian operations.

Political, socio-cultural, demographic, and economic profiles

The Republic of Cameroon ranks 153 out of 189 countries on the 2020 Human Development Index.² The Inequality Index reveals significant disparities in reproductive health, education, and labour market. An estimated 37.5 per cent of the country's population lives below the poverty line.³ The country ranks 150 out of 189 as per its level of gender inequality.⁴ The inequality index reveals significant disparities in the three key dimensions of human development: (1) reproductive health, (2) education, and (3) access to employment. Gender relations and the perception that women and men have of their role and that of the opposite sex anchor, justify and maintain unequal practices within the households and in society. Humanitarian crises exacerbate inequalities, increasing the vulnerability of girls and women, especially adolescents. In the context of armed conflict situations, boys and men are also affected, facing specific protection threats, including gender-based violence committed by other

men, which remains an extremely sensitive and underreported matter.

The agriculture sector dominates the economy of Cameroon, employing over 60 per cent of the labour force and accounting for 15 per cent of the gross domestic product (GDP). However, increasing insecurity, including inter-communal violence, and frequent exposure to climate shocks including floods and droughts impact production, affecting the food systems, disrupting planting, and harvesting schedules and worsening food insecurity. The use of traditional agricultural practices, high post-harvest losses, fragmented markets, and recently the impact of COVID-19 pandemic also affect productivity, especially among the smallholder farmers.⁵

Despite proving resilient to shocks, including the acute crises in the Lake Chad basin and the North-West and South-West regions, Cameroon's economic growth is hampered by structural factors including the over-reliance on oil, high debt levels, and limited investment in job creating sectors, especially agriculture. As a result, Cameroon failed to reach its objective of achieving an average 5.5 annual per cent growth during the 2010-2020 timeframe of its growth and employment strategy paper (GESP). The GESPs implementation ended in 2020 with a controversial growth rate of 0.5 per cent, according to the National Institute of Statistics (INS). However, the new National Development Strategy of Cameroon (SND30), which is based on the structural transformation of the economy of Cameroon, is starting on a good footing with a growth rate of 4.2 per cent in the second quarter of 2021, according to the INS.

Government forecasts indicate that Cameroon's economy is likely to grow by just under four per cent in 2022 as global demand for exports increases. Inflation



WEST REGION, CAMEROON

Nkourap IDP site

Photo : OCHA/Bibiane Mouangue

is expected to remain around the two per cent mark in 2022, close to the regional average.

In the Far North region, particularly in the Lake Chad basin area, the economic context is marked by poverty, the lack of access to and sustainable management of natural resources, limited income-generating, and market opportunities, as well as a drastic reduction in agriculture, livestock production and touristic activities due to prevalent insecurity. Agricultural

activity has come to a standstill in areas prone to repeated incursions by non-State armed groups (NSAGs) and because of environmental constraints, exacerbated by climate change and attacks by granivorous birds. Meanwhile, the agropastoral economy is negatively impacted by the disruption of seasonal transhumance as main border transit points with Nigeria and Chad are closed and as herders transit livestock to avoid areas affected by insecurity.

In the North-West and South-West regions, ongoing violence and regular lockdowns continue to have a major impact on the local economies. In 2021, 72 lockdown days were recorded; significantly hampering socio-economic activities and the delivery of humanitarian aid. Violence and insecurity have resulted in major displacement, affecting agricultural yields in the North-West and the abandonment of large parts of fruit, palm, and rubber plantations in the South-West. Ethnic and political tensions between farmers and herders persist. However, unlike the North-West, the South-West has maintained a certain level of economic activity.

Economic activities in the East, Adamawa, and North regions focus on trade, livestock, mining, agriculture, handicrafts, and forestry. Companies active in the areas of forestry, mining, and agriculture support the local economy. The three regions have intense trade with neighbouring countries (CAR, the Republic of the Congo, and Chad). CAR refugees and the populations that host them share cultural, religious, and linguistic affinities, strengthening their integration.

Security environment

Widespread insecurity in the Lake Chad basin area continued to affect the Far North region in 2021. Attacks against civilians, State security forces (SSF), including army, gendarmerie, police, and their basis continued and NSAGs and armed criminals continued to carry out lootings in Cameroon. Attacks against SSF in July and August 2021 caused the highest number of military fatalities in a single month in the region since July 2019. This led to the suspension of UN road movements in several parts of the region from August to October 2021.

NSAGs continue to use improvised explosive devices (IEDs) in the Far North, North-West, and South-West regions, primarily targeting military convoys. However, devices planted on roads pose a threat to non-military road users, including civilians and humanitarians.

In the North-West and South-West regions, high levels of insecurity continued. The presence of SSF (i.e., police, gendarmerie, army) is concentrated along

the main roads and cities, leaving most rural areas under the influence of NSAGs, and civilians exposed to regular clashes between SSF and NSAGs. High levels of criminality and impunity lead to a climate of insecurity whereby civilians and humanitarian workers face risks of abduction, assault, and threats of violence. The line between targeted, politically motivated acts of violence and criminal activities is increasingly blurred.

Other parts of Cameroon remain stable and offer relative security, therefore welcoming many refugees and internally displaced persons (IDPs) from other regions and neighbouring countries. However, security incidents, including urban crime, kidnappings for ransom, and night-time hijackings continue to be reported in the East, Adamawa, and North regions.

Existing legal and policy frameworks

Cameroon has adopted several international and regional conventions on human rights, international refugee law, and international humanitarian law.

Although there is an elaborate national legislative and regulatory framework, its effectiveness is sometimes undermined by structural and administrative weaknesses.

The judicial system in Cameroon provides for courts of appeal at regional level and courts at divisional level. However, many existing laws and policy frameworks are not applied and access to the judiciary system is challenging in remote areas affected by insecurity. The population often resorts to other justice mechanisms, namely traditional chieftdoms, religious leaders, and other community mechanisms (conflict management committees, etc.) to settle their disputes.

Despite the existence of legislation that includes laws favorable to gender equality, there is a wide gap between laws and their application, in particular due to the coexistence of positive and customary law and the inaccessibility of courts in rural areas. This led to the preservation of sexist attitudes and practices and contributes to keeping women in a subordinate position.⁶

The role of the administration and of traditional authorities has been significantly affected by insecurity, especially in the North-West and South-West regions where NSAGs target State symbols and representatives. Furthermore, in these two regions, the implication of some customary leaders in national politics has likewise undermined their authority and acceptance by communities.

Infrastructure and technology

Cameroon has nearly 78,000 km of main roads, including 5,133 km of asphalted roads. However, in the Far North, North-West, East, and Adamawa regions the road network is severely degraded and impractical, especially during the rainy season. The electricity network covers only a few localities and remains poor with an overall rate of household electrification at less than 15 per cent. Mobile telephone network excludes certain rural areas. In general, men have more telephone access than women.⁷ According to the Ministry of Posts and Telecommunication, the internet penetration rate in Cameroon stands at 35 per cent as of 2016.⁸ As per the World Bank, the penetration rate is stagnating since 2016.⁹

Environmental profile

Cameroon is exposed to climatic hazards (low or high rainfall depending on the season and the regions), leading to drought, floods, and landslides.

Cameroon is regularly affected by floods causing loss of life, damage to houses, crops, livestock, and road infrastructure, affecting hundreds of thousands of people at each occurrence. All regions of the country are exposed to it but those that have suffered the most serious damage to date are the Littoral, the Far North, and the North regions.

Bush fires, which are often used to clear plots of land during the dry season, are a major risk of environmental destruction, especially in the savannah areas. Houses and facilities can quickly fall into ruin and be overgrown by brush growth when abandoned due to insecurity or displacement.

Pollution resulting from the exploitation of minerals and forests is increasing, while industrial pollution is increasing in cities, such as Douala and Yaoundé.



FAR NORTH REGION, CAMEROON

Bogo IDP site

Photo: UNHCR/Xavier Bourgeois

1.2 Shocks and Impact of the Crises

Shocks and ongoing events

The main shocks of the different crises in Cameroon relate to violence, natural disasters, and health outbreaks. These shocks lead to forced displacement, human rights violations, family separations, stigmatisation, and exploitation of those displaced and the disruption of the social cohesion and support structures of vulnerable people. Furthermore, they negatively impact access to basic services, to land and economic opportunities.

Shocks related to violence continue to affect the Far North, North-West, and South-West regions

In the **Far North** region, the civilian population continues to be subject to armed attacks, IEDs, kidnappings, including of children, looting, and destruction of property and infrastructure.

In 2021, almost 90 per cent of security incidents in the Far North occurred in the Logone et Chari, Mayo-Sava, and Mayo-Tsanaga divisions, with most attacks taking place in areas close to the Nigerian border.¹⁰ While security threats are usually exacerbated during the rainy season when movements of SSF and road access are limited in many areas of the three divisions, a lull in attacks was observed during the rainy season in 2021 which was attributed to infighting between NSAGs.

Overall, there was a slight decrease in attacks by NSAGs in 2021 in comparison to 2020, leading to significantly fewer civilians killed. The decrease in attacks and casualties can be attributed to a change in dynamics between and strategies of NSAGs in the Lake Chad basin. Meanwhile, civilians continue to carry the brunt of the violence: 80 per cent of victims

of NSAGs attacks were civilians between January and October 2021.

Since September 2021, the Mayo-Sava and Mayo-Tsanaga divisions saw an uptick in predatory attacks on civilians in comparison to the rest of the year, including violent lootings of villages to seize food, livestock, motorbikes, and other items. Frequent kidnappings of civilians have also been reported. Protection monitors have reported the killing of 379 civilians in 2021, mainly during attacks by NSAGs and in crossfire with SSF. In addition, some 560 civilians were injured and 224 abductions, kidnappings, and attempts of abduction were recorded. From January to October 2021, the Protection Sector recorded 12 dead and 12 injured children because of IED explosions, mostly planted around schools. Inter-communal violence in August and December 2021 triggered significant displacements and led to important humanitarian needs in the affected divisions.

In 2021, close to 1,100 incidents of extortion of goods and properties were recorded by protection actors in the Far North; perpetrators include all parties to the conflicts but also criminal gangs taking advantage of the redeployment of SSF.

The **North-West and South-West** regions continued to be marked by high levels of insecurity in 2021. There was an increase in the use of IEDs in the first half of 2021 mostly targeting SSF but putting civilians and humanitarians at risk. In the last quarter of 2021, more frequent explosive attacks against civilian targets were observed in the South-West region. Since October 2021, at least seven explosive incidents occurred in downtown Buea (South-West). One person was killed and at least 14 others were injured. Targets included taxis, the University of Buea, markets and a trade fair. All but two of the incidents took place on a Monday - the day when separatist NSAGs enforce a weekly ghost town day in the North-West and South-West regions.

In 2021 an overall increase of the number of kidnappings for ransom of civilians by NSAGs was observed, including humanitarians, health care workers, and education personnel. The line between

deliberate attacks against humanitarian actors or their assets, and criminal acts is increasingly blurred. Criminal acts mostly affect civilians, but humanitarian workers can also be affected, such as being in the wrong place at the wrong time, being targeted in a private capacity, or falling victim to cases of mistaken identity.

Education continued to be targeted in 2021. Attacks against education facilities and personnel, as well as kidnapping for ransom of children and teachers by NSAGs are reported on a regular basis.

In the **eastern regions**, sporadic cross-border movements of armed persons from CAR continue to be reported, as are abductions for ransom along the CAR-Cameroon border. The armed conflict in western CAR continues to trigger movements of populations across the border.

Natural disasters

Floods are one of Cameroon's biggest natural disaster risks and the phenomenon is recurrent, especially in coastal areas and in the Far North and North regions.

Exceptional floods affected over 162,000 people in the Far North alone in 2020. Flooding in the Mayo-Sava division at the end of July 2021 damaged 1,500 hectares of farmland and led to the temporary displacement of 647 persons. However, in 2021 the onset of the rainy season was late, and the cumulative rainfall was generally below average, affecting thousands of farmers in Cameroon. In the Logone et Chari and Mayo-Sava divisions the prolonged drought led to low agricultural yields, 30 per cent below the regional average, leading to 23 per cent of households consuming cheaper and less preferred foods in smaller portions.¹¹

The COVID-19 pandemic, a shock with multiple effects

Health impact

The COVID-19 pandemic continues to affect Cameroon in 2021, with 109,666 cases and 1,853 deaths as of 31 December 2021, with a case fatality rate of 1.7 per cent. Men above 19 years old continue

being more affected than women (sex-ratio men/women: 1,1).¹² Cameroon launched its vaccination campaign against COVID-19 on 12 April 2021, but as of 22 December 2021, only 649,989 people (i.e., 4.7 per cent of the target population) were fully vaccinated. The authorities explain low vaccination rates due to the low number of health personnel in the Ministry of Public Health to administer the vaccinations and the reluctance of the population to get vaccinated due to misinformation spreading on social media and some news outlets. This rejection of the COVID-19 vaccine impacted the acceptance of other vaccines. WHO and UNICEF warned of an alarming drop in child immunisation rates.

Considering the limited implementation of prevention measures by the population, the low vaccination rate, and the fast spread of the Omicron COVID-19 variant, the probability of continued transmission in Cameroon remains high.

The socio-economic impact of COVID-19 has led to a deterioration of the well-being of the people living in Cameroon. The pandemic has also unsettled the national health system. The mitigation measures implemented by the Government, coupled with the already limited access to basic healthcare, have significantly increased the vulnerability of populations in general, but especially that of mothers and children. In addition, in the North-West and South-West regions, the Multi-Sectoral Needs Assessment (MSNA) found that in 19 per cent of assessed villages the population avoided health facilities because of COVID-19 and that in 23 per cent of villages, COVID-19 has negatively affected the uptake of other vaccinations.

Non-health impact

Cameroon's economy continues to cope with the impacts of COVID-19. The pandemic interrupted a 25-year period of continuous economic growth, disrupted value chains, and led to an unprecedented increase in inequality and poverty, particularly affecting the Food Security Sector.

In March 2021, 63 per cent of households surveyed indicated that the COVID-19 pandemic has had a negative impact on their income. Among these

households, 44 per cent have poor or borderline food consumption. Most households that were negatively affected by the pandemic are in the North-West (80 per cent) and in the South-West (78 per cent) regions.¹³

WFP conducts continuous food security monitoring, including COVID-19 impact on food security. As of September 2021, food inflation continued to increase and was at 4.5 per cent. Over 1.7 million people reported challenges to access health services mainly due to a lack of money, travel restrictions, and long distances. Over 2.6 million also faced market access challenges citing travel restrictions and security concerns. As a result of food insecurity, 2.8 million people reported increased livelihoods coping strategies, including spending savings, reducing non-food expenses, and borrowing money to cover food expenses. The COVID-19 pandemic has had a negative impact on the level of nutrition of CAR refugees and on income-generating activities, particularly on their capacity to access food.¹⁴

IOM's Displacement Tracking Matrix (DTM) carried out in the Far North in July 2021, has shown that the COVID-19 pandemic has had an important impact on the prices and availability of basic commodities, including food, water, medicine, and hygiene items. An increase in the prices of these products was observed in 75 per cent of assessed localities, and shortages in 58 per cent of the localities.

The pandemic complicated trade as Cameroon borders were closed with all its neighbouring countries from April 2020 until June 2021. Trade significantly slowed down with Gabon and Equatorial Guinea especially for food items, and with Chad and Nigeria for both food and non-food items.

Impact on humanitarian access

In view of the Do No Harm principle, humanitarian operations were adjusted to avoid contributing to the transmission of COVID-19. While substantial disruptions of humanitarian operations impacted negatively on the provision of humanitarian aid in March and April 2020, humanitarian partners were able to successfully adapt operations and to

stabilize the number of people reached as of May 2020. COVID-19 prevention and response activities were mainstreamed into all activities. However, mitigation measures, such as the respect of social distancing during distributions, rendered humanitarian operations more costly.

Impact on people

The number of displaced people in Cameroon continued to increase in 2021. Violence in the **Far North** has led to a steady rise of displacement since 2014. As of November 2021, violence has uprooted a total of 608,000 people (358,000 IDPs, 115,000 Nigerian refugees, and 135,000 returnees),¹⁵ an increase of 48,000 people since November 2020.¹⁶ 54 per cent of the Nigerian refugees in Cameroon are female, 60 per cent are children, 4.6 per cent are over the age of 60 years, 21 per cent are people with special needs.

In the Logone et Chari and Mayo-Sava divisions, the internally displaced population represents 45 and 48 per cent of the total population respectively. 90 per cent of the internal displacement in the Far North since 2015, and as of July 2021, is related to armed conflict, 10 per cent to natural disasters and flooding and 1 per cent to intercommunal violence.¹⁷

Return movements have been registered since the beginning of the conflict, with an important portion of the returns linked to the deterioration of living conditions in displacement or a lack of assistance. Reasons mentioned for return between April and July 2021 mostly relate to access to cultivable land (in 51 per cent of assessed localities) and to improved security in return (mentioned in 35 per cent of localities). However, conditions are not globally conducive to return. 76 per cent of IDPs and out-of-camp refugees do not intend to leave their locality of displacement, while the majority of those who have the intention to return to their villages of origin don't know when they will do so. Out of the people who do not currently have the intention to return to their areas of origin, the majority intends to settle in displacement for the long term. Reasons for not intending to return momentarily are the lack of security followed by the

absence of civil authorities, basic services, and work opportunities, and destroyed homes in origin.¹⁸

Displacements in the Far North are characterized by their short distances: 97 per cent of the IDPs find refuge in a locality within their division of origin, often even in the same district. Pendular displacement is frequent in the Far North, with 40 per cent of the 3,370 households consulted in November 2021, indicating to move back and forth between their village of origin and their location of displacement regularly, between several times a week (21 per cent), once a week (10 per cent) and once a month (7 per cent). The main reasons for these pendular movements are family visits and agricultural activities.¹⁹

IDPs usually settle in makeshift shelters, always near a base of the Cameroonian armed forces. When military bases are relocated due to frequent NSAG attacks, the population moves as well. Most NSAG attacks are predatory, however, civilians are also sometimes targeted for their perceived collaboration with SSF and local vigilante committees.

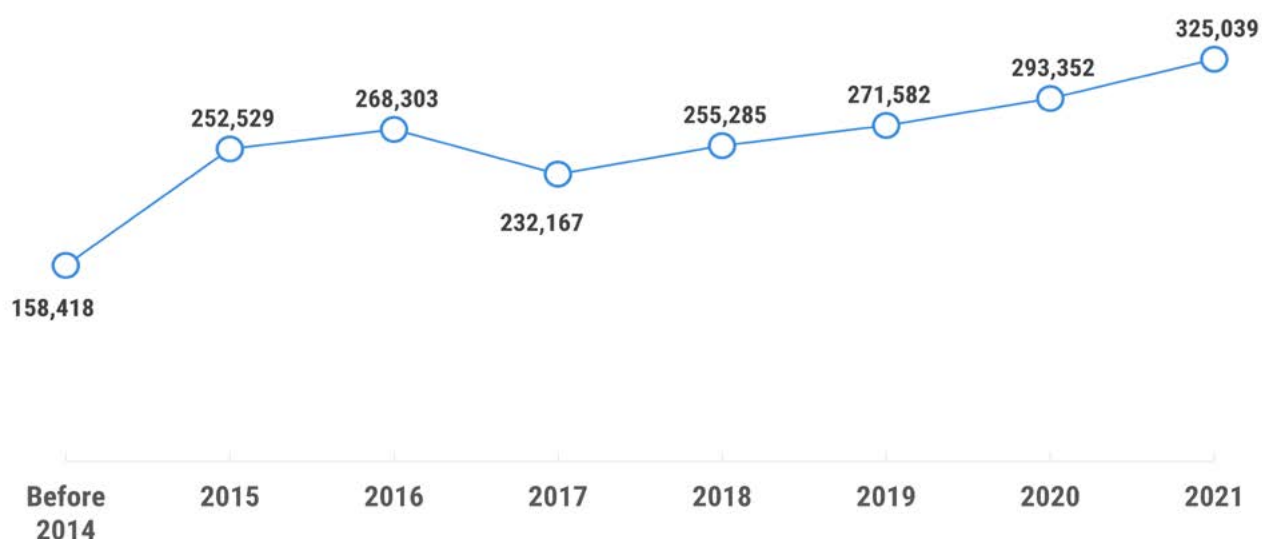
In the **North-West and South-West**, the socio-political crisis, entering its sixth year, has led to massive population displacements. As of August 2021, the North-West and South-West crisis has displaced over one million people, including to other regions of Cameroon and to Nigeria.²⁰ Short-term, pendular movement continues within the two regions. Often people move back and forth between their home and their place of refuge. As they hide in the bush, people build huts and cultivate plots of land. In 44 per cent of cases, it is the entire household that undergoes such displacement. In the rest of the cases, men hide in the bushes alone, while their families remain in the village or move to safer urban areas. Pendular displacement is observed in 61 per cent of surveyed villages of the North-West and in 44 per cent of localities in the South-West. 33 per cent of these displacements are a result of military operations while 30 per cent result from a fear of attacks. Displaced families regularly go back to their village to check on their houses or to see if the area has become safe enough to move back. Women often visit their homes first to check if the area is safe before assessing if male family members

can return. Return to the North-West and South-West were observed in 2021, inter alia because of a lack of service and assistance in areas of displacement.²¹

In the eastern regions of Cameroon, an increase in the number of refugees from CAR has been observed. 325,000 refugees were reported as of 31 December 2021 in the East, Adamawa, and North regions,²² in comparison to 293,000 refugees reported in November 2020;²³ an increase of almost 32,000 refugees. While there is a certain increase in the refugee number due to birth rates, a significant increase of new

In most localities in the North-West and South-West regions, local council authorities, which were available at district capital levels, were closed because of the violence. With the retreat of effective Government presence from most villages and other, sometimes more pressing, humanitarian needs, people no longer perceive the registration of civil documents, including birth certificates or identity cards, as a priority, resulting in many children not having birth certificates. Some documents may also have been lost during violence or displacement. In addition, in the North-West and South-West regions, the mistrust towards

EVOLUTION OF CAR REFUGEE POPULATION IN THE EASTERN REGIONS OF CAMEROON SINCE 2013/2014



refugees arriving from CAR has been observed after the December 2020 presidential elections, as well after clashes in western CAR in July, August, and September 2021.

Impact on systems and services

Limited access to basic social services

In the Far North, the North-West and South-West regions, access to basic social services is largely disrupted by ongoing insecurity. The disruption of services also concerns the delivery of civil and legal documentation, including birth certificates, to which apply the principle of territoriality whereby only authorities from the place of origin have the power to deliver birth certificates to the requesting parents.

authorities and the fear of NSAGs potentially targeting people with a Cameroonian identity card contribute to the lack of civil and legal documentation which puts particularly boys and men at risk of arbitrary arrest by law enforcement forces, and makes access to basic social services, such as health care and education, challenging, especially for women and girls.

In the Littoral and West regions, in addition to significant pressure on already limited services, IDP access to basic services is hindered by inadequate financial resources to access them and fear of stigmatization.

Most CAR refugees in the eastern regions have insufficient access to basic services, including food, shelter, water, sanitation, health, and education,

mostly due to long distances and financial barriers. Simultaneously, the basic services in host communities are not capable of accommodating the large number of refugees.

There are approximately 16 primary and 96 secondary civil registration centres in the eastern refugee hosting regions. Despite the presence of these services, one of the main risks for refugee children born in Cameroon is to remain without a birth certificate, therefore being exposed to statelessness and unable to benefit from the protection services they are entitled to as minors. Structural problems in the civil registration system, cultural social constraints that give little credence to the birth certificate, and the expensive costs of supplementary judgments are part of the causes for CAR refugee children to remain without a birth certificate.

Impact on Protection

The loss and lack of civil and legal documentation put the affected population, particularly boys and men, at risk of harassment and arbitrary arrest by law enforcement. The lack of civil and legal documentation, which was already a problem prior to the crisis, generates fear of crossing checkpoints and discourages many people, particularly men and boys, from moving around freely. Males lacking government-issued documentation are often suspected of belonging to NSAG by security forces. This, combined with the fact that men and boys are perceived by both parties as threats and face specific protection threats,²⁴ leads them to hide in the bush, relocate to urban areas, or engage in pendular displacement where they move back and forth between their home and place of refuge. Still others go into exile. Lack of documentation not only affects people in the North-West and South-West regions, but also limits the movement of those who fled to other regions. Lack of documents also prevents returnees to prove legal possession of their properties, leading to property related conflicts including eviction.

Forced displacement has contributed to the weakening of family and community safety nets, the overuse of limited basic resources and services, and an increase in social tension. People with specific

needs, mainly older people, people living with disabilities, with chronic illness, and pregnant and lactating women, are often left behind when families flee violence, increasing their vulnerabilities and depriving them of the social safety net on which their survival and wellbeing depend. Those left behind often remain in areas with no access to basic social services and are unsafe for humanitarian workers to reach.

Family separation due to displacement also destroys the community support systems that are essential for the prevention of protection risks in the absence of pre-existing social protection services. The continuous population movement adds to the pre-existing difficulties of accessing basic services and leads to a shortage of educational and economic opportunities. Decreasing economic means and destruction of the social safety net also has left many women and girls to opt for negative coping mechanisms, including prostitution and survival sex in urban centres in the North-West, South-West, West, Littoral, and Centre regions.

Disruption of social services in many localities in the North-West, South-West, and Far North regions forces people to walk long distances to access them, creating additional risks related to arbitrary arrest, physical and sexual violence.

Displacement also forces families to live in greater promiscuity with relatives or within the host community, creating risks of sexual exploitation, sexual violence, and assault, particularly against young girls.

Impact on Food Security and Livelihoods

Conflict remains one of the main drivers of food insecurity. The disruption of markets and food and nutrition services due to violence and the COVID-19 epidemic negatively impacted the quality of diets and nutrition practices. According to the analysis of the Cadre Harmonisé of October 2021, almost 2.4 million people are projected to be in food insecurity phase 3 and 4 from June to August 2022, resorting to crisis or emergency coping strategies to secure household level food security. The most affected

regions remain North-West (30 per cent of the population is acute food insecure) and South-West (20 per cent is food insecure). In the Far North region 16 per cent of the population are food insecure, as a combined consequence of the Lake Chad basin crisis, intercommunal conflicts as well as the impacts of climate change, especially floods and droughts. Displacement has meant a loss of resources for food self-reliance. It primarily affects the access to land to cultivate, the loss of livestock, and of the families' productive assets.

In addition, repeated climatic shocks in the northern regions also undermine the resilience of communities and place a strain on their livelihoods. In the Far North, Adamawa, and North regions, climate shocks (floods and prolonged dry periods) and market disruptions are the main factors for food insecurity.

On average, 15.1 per cent of households have a poor or borderline food consumption scores as of July 2021 across the country, signalling significant food insecurity concerns. Acute food insecurity appears to be deteriorating since 2018, with regional disparities observed. This deterioration is more pronounced in the East region where 1 per cent of households were acutely food insecure in 2018 compared to around 5 per cent in subsequent years.

In the Adamawa, East, and North regions, food and nutrition insecurity are mainly driven by the influx of CAR refugees. While there have been improvements in the nutrition situation of children aged below 5 years, malnutrition rates remain alarmingly high in the three regions, with stunting and wasting above national averages.²⁵ In the North region, 40.2 per cent of children under 5 are suffering from stunting, compared to 34.6 per cent in Adamawa and 32.8 per cent in the East. Similarly, 4.8 per cent of children are wasting in the North, compared to 4.5 per cent in East and 3.8 per cent in Adamawa. Among refugees in the camps, acute malnutrition is at 12.5 per cent, while stunting is at 49.8 per cent.²⁶

Evidence shows a gender dimension to food insecurity in the eastern regions, with female-headed households slightly more food insecure and more

likely to adopt negative coping strategies than those headed by men. The most widespread strategies adopted include consuming less preferred and expensive foods and reducing the quantity of meals.²⁷

The nutrition situation of CAR refugees, both in sites and in host communities, have been identified as severe, with a global acute malnutrition (GAM) rate of 12.5 per cent and severe acute malnutrition (SAM) rate of 2.6 and 3.4 per cent respectively, indicating a significant degradation since the last survey in 2016 (8 per cent and 7.6 per cent GAM rate).²⁸ Although CAR refugees have spent several years in Cameroon, their livelihood options remain limited and fragile depending on food assistance. In the Far North, the proportion of children aged 6 to 59 months with minimum dietary diversity is 46 per cent, while the Minawao camp records the lowest rate at 14 per cent.

Limited access to education

Almost 1.5 million school aged children need some form of education assistance in Cameroon due to violence, attacks and threats against education, population displacement, and limited capacity of the school system and of communities to absorb extra students.

The crisis in the North-West and South-West has had a major impact on the Education Sector. NSAGs are banning Government administered education since September 2017. In 2021, two schools in three have been non-operational, affecting over 700,000 students. Meanwhile, the Government opposes non-formal education initiatives. As many children enter their sixth year without access to education, NSAGs and diaspora continue to oppose a return to school, which they would perceive as a return to normalcy.

Going to school remains dangerous for children, as well as for teachers, as evidenced by the continuous chain of violent attacks on education since 2017. Certain areas have also become more prone to kidnapping for ransom, with school children particularly at risk of being abducted. Most of the reported kidnapping incidents of teachers or students were targeted, while some of the incidents may be

unrelated to the provision of education, taking place in an overall environment of kidnapping of civilians for ransom in certain areas of the North-West and South-West regions.

There have been over 20 attacks of different kinds against school facilities, teachers, or students during the first half of 2021. In 10 reported cases of kidnapping, 28 children, teachers and school principals were abducted; three schools were burnt down by unidentified gunmen; two persons were killed and three injured during attacks against schools. Towards the end of the 2020-2021 school year, students and examiners taking part in the General Certificate of Education (GCE) were attacked by NSAGs in several localities in the North-West and South-West regions. On 9 January, NSAG fighters allegedly assassinated the principal of Government High School in Ossing village, South-West region. The principal was taken by NSAG fighters in the evening and shot in front of his house for promoting school activities in the locality. Attacks against education increased during the second half of 2021. Between 28 October and 15 December, 25 attacks on schools were reported. On 24 November 2021, unidentified gunmen attacked a Government Bilingual High School in Ekondo Titi, South-West region. Four students aged 12 to 17 and a teacher were killed, and an unconfirmed number of students and teachers were injured. This comes 13 months after a group of armed men killed eight children and wounded 12 others in an attack of a school in Kumba, South-West.

However, an improvement can be reported with regards to the number of student and teacher attendance in the South-West region. In the South-West, as of November 2021, 70 per cent of the primary schools are functional with 53 per cent of primary school students and 85 per cent of primary school teachers attending. Meanwhile, the situation remains of high concern in the North-West, whereas of November 2021 only 26 per cent of primary schools and 33 per cent of secondary schools were functional. Overcrowding is observed regarding the primary school student attendance with 111 per cent but only 55 per cent of primary school teachers attending. The secondary school enrolment is at 27 per cent,

with only 17 per cent of secondary school teachers attending.²⁹ In 59 per cent of the villages assessed during the August 2021 MSNA, school closure was the primary reason indicated to why displaced children did not go to school. The safety conditions and distances to go to school are also important barriers to education in both regions.³⁰

The ban on Government administered education by NSAGs and attacks on education has forced many families to send their children to the Littoral, West, and Centre regions where they can pursue their education. However, despite the Government's decree to provide free education to IDP children, thousands of displaced children struggle to access education due to poverty, social exclusion, and financial constraints. In 52 per cent of assessed villages in the Littoral and West regions where displaced children are not going to school, a main reason is that the schools are too expensive. Other reasons include inability to get school supplies (46 per cent) and far locations (35 per cent).³¹ Key informants in Yaoundé mentioned high school fees and overcrowded classrooms as the main problems for IDP children to access education. Overcrowding is especially an issue for anglophone students who want to access English speaking curricula. Some schools have no latrines, others have one for thousands of students and no water source.

In the Far North, because of protracted displacement, education services are suffering from the additional burden that students from displaced families represent for the host communities.

In the Logone et Chari, Mayo-Sava, and Mayo-Tsanaga divisions, latest data from 2021 shows that 67 schools are closed and 50 others have been destroyed for years having never been rebuilt, affecting about 35,000 students. In addition, in 17 schools, armed forces are installed on the compound and in 10 of them armed men in uniform provide education services.

The prolonged displacement and refugee influx have further weakened schools in the Mayo-Tsanaga, Logone et Chari, and Mayo-Sava divisions. According to the Education Sector the student per teacher ratio

in the three crisis-affected divisions in the Far North region is 178 students per teacher. Also, 43.6 per cent of school-age children lack birth certificates and are therefore not allowed to sit for the primary school exams to access the secondary school. Moreover, the high incidence of poverty aggravated by insecurity and displacement affects the availability of teaching and learning materials for the most vulnerable students. However, the lack of identification documents necessary for school enrolment is cited only by 6 per cent of key informants consulted during the most recent MSNA as a reason for children not to attend school in the Far North and the insecurity or fear from NSAGs by 5 per cent of those consulted.³²

There seems to be no apparent discrimination regarding the school enrolment of girls and boys: In 14 per cent of the assessed locations none of the school aged boys attended school against 15 per cent for girls. Only 2 per cent of key informants indicated that parents prioritize the education of their sons over their daughters. However, the necessity for girls to get married is cited by 9 per cent of the key informants as a reason for them not to attend school.³³

At the national level, the gender parity rate between girls and boys in primary education and secondary education is 0.99 and 0.98, respectively, which reflects almost equal access to education by gender. However, some disparities are observed according to region, particularly in Adamawa (0.92) and the North (0.93), where there is an imbalance in favour of boys at the primary education level. There are also disparities among the regions for secondary education: the greatest discrimination against girls in access to secondary education is observed in the North (0.61) and Adamawa (0.69) regions. In the Littoral (1.16), with the exception of Douala, and the West (1.12), there are relatively more girls in secondary education than boys. In addition, the overall attendance of secondary schools is 58.27 per cent: 63.11 per cent of which are boys against 53 per cent of girls.³⁴

As in the other regions, the costs are the primary reasons hindering children from the host and the displaced population to attend school, followed by the far distance, and a lack of teachers and/or school

material.³⁵ Other reasons for which children do not attend school are that they must work, that the enrolment is difficult or even prohibited for displaced children, or that access is challenging for children living with disabilities.³⁶

While the average transition rate to secondary school is 65 per cent nationwide, less than 10 per cent of refugee students transition to secondary school: a refugee student in Cameroon is six times less likely than a Cameroonian student to access secondary education. Entrance to primary school is free, but financial fees and a birth certificate are required to transition to secondary school, which is a challenge for refugee families. In general, the access and retention of IDP and refugee students at secondary level are compromised by the precarious economic situation of parents, factors specific to the culture and religion of the parents and insufficient provision of education for out-of-school students. Furthermore, secondary schools do not have sufficient capacity to receive IDP and refugee children.

In the East and Adamawa regions, which are, as of December 2021, home to almost 282,000 refugees, the school coverage is relatively poor in comparison with other regions. Divisions in which refugee sites are located have on average half the number of school establishments than the administrative centres, making some areas inhabited by refugees' educational deserts. Thus, the major challenge to access secondary education in these areas is the long distance between refugee sites and secondary schools. Measures taken by parents to still make school attendance possible often only apply for boys; rarely refugee parents send their daughters to study tens of kilometres away from where they live. In 2020, 85 per cent of out of school refugee children in the eastern regions were girls.

Limited access to water, sanitation, and hygiene services

The need for safe drinking water remains critical in the whole country, even though the severity of needs varies by region. In the Far North, access to safe drinking water and health services are priority needs

for the host and the displaced population after food and shelter, respectively.³⁷ In the majority of villages the drinking water is collected from unprotected water sources and is not treated before consumption.³⁸ Main reasons mentioned for the difficulties to access water are a general water scarcity, long waiting times or long distances to access the water points, or the non-functionality of the water points. Insecurity is only mentioned by 5 per cent of the key informants as a challenge to access drinking water.³⁹

Access to drinking water is identified as a priority need by 26 per cent of the displaced population in the North-West and South-West, just after food with 27 per cent.⁴⁰ In these two regions, a shortage of safe drinking water in rural areas leads people to rely on water from streams, rivers, and unprotected wells for drinking and domestic use. 51 per cent of the displaced population collect water from an unimproved water source. The primary challenges faced by the displaced population to access drinking water include that there are only few water points, a lack of water containers and the long distance to the next water point.⁴¹ Waste is not being collected in rural areas and is mostly burnt or thrown into bushes or streams, which is reducing water quality. In more than 72 per cent of the villages assessed during the August 2021 MSNA, key informants reported that displaced persons had problems in accessing latrines because they were unhygienic.

Access to water is the top priority need of the population displaced in the Littoral and West regions.⁴² The primary challenges faced by displaced populations in accessing drinking water include only a few water points, that the water points are far away, that the waiting time is too long, or the lack of water containers. With regards to basic sanitation, latrines are often unhygienic and insufficient in number, resulting in poor personal and community hygiene practices.⁴³

In the Far North, North-West, South-West, Littoral, and West regions, it is observed that displaced populations often share shelters, water points, latrines, and showers with the host population. The

increased proximity increases the risks of COVID-19 transmission and does not give girls and women privacy, exposing them to the risk of gender-based violence (GBV). Regardless of the region, fetching water remains a specific activity for girls, boys, and women, exposing them to various protection risks and limiting their time to engage in schooling and income-generating activities.

Limited access to health services

Insecurity in the Far North, South-West, and North-West regions continues to exacerbate already limited access to health services. The widespread insecurity and attacks led to destruction of basic health infrastructure and the fleeing of health personnel are causing a lack of availability of health services to deal with war injuries and psychosocial trauma related to violence, including sexual violence and rape. In the Far North, most of the displaced populations face challenges accessing health services mostly because the health centres are too far away and services are too costly, but also because of a lack of health personnel and insecurity.⁴⁴ Only 50 per cent of women give birth in a health centre or hospital. Across the country, despite the efforts recorded in the fight against maternal mortality, Cameroon's rate remains quite high (467 deaths per 100,000 live births in 2018).⁴⁵

The lack of health facilities also contributes to the spread of epidemics such as cholera, polio, and measles, which are recurrent, and of COVID-19, particularly affecting children, and older people. A cholera outbreak was declared by the regional delegation of public health for the South-West on 29 October 2021. As of 31 December, 512 cases, including 18 deaths, were reported, making the South-West the most affected region, where the total cholera cases in the country (Centre, Littoral, South-West, and South) is 617 and 21 deaths. Access to the affected area is challenging and restricted to maritime access.

Lack of access to contraceptives, combined with poor coverage of sexual and reproductive health services, lead to early pregnancy, unsafe abortion, and sexually

transmitted infections. In the country, women and girls are the most exposed to the HIV/AIDS pandemic (two women are infected compared to one man and three girls are infected compared to one boy).⁴⁶ People living with HIV who were on antiretroviral (ARV) drugs can no longer access it when they take refuge in the bush, increasing the risk of secondary infections and compromised immune systems.

In the North-West and South-West regions, health care facilities and workers continue to be targeted, while civilians in need of medical services continue to be affected by attacks and movement restrictions. Reports of ambulances caught in crossfire, hospitals and health posts occupied by security forces, armed incursions by security forces into hospitals, abductions of health workers by NSAGs, and threats and attacks on health personnel continue to be registered on a regular basis.

The suspension of the operations of Doctors Without Borders (MSF) in the North-West by the Government remains in effect since December 2020, resulting in a major gap in health care response capacity in this region.

In the Littoral and West regions, sexually transmitted diseases are on the rise due to the increase of survival sex. Access to healthcare is limited due to inadequate financial resources. There is little awareness about sexual and reproductive health services. Early and/or unwanted pregnancies, complications during pregnancies due to inadequate prenatal care were also cited as a major concern by key informants.⁴⁷

In the eastern regions, basic social services do not have the capacity to meet the demand of the entire population, including that of CAR refugees. Since the beginning of the crisis the limited existing health centres have been overcrowded and have faced insufficient human and material resources. Extreme poverty prevents vulnerable people from paying the costs necessary for health care. 70 per cent of health facilities do not have the necessary medical equipment and enough staff to ensure quality health care. Especially children under 5, pregnant and lactating women, people living with disabilities,

older people, and those with chronic diseases face difficulties in accessing health care.

Impact on access⁴⁸

The main constraints to the access of affected people to services and assistance and of humanitarians to affected populations, are insecurity, poor road conditions, natural hazards, such as floods, and restrictions by the authorities or the NSAGs on the freedom of movement of people, goods, and services.

The suspension of certain UNHAS flights and the limitations of passenger numbers on other flights seriously affect the efficient movement of humanitarian personnel.

New government procedures established in the second half of 2021 to receive visas for expatriate staff have led to considerable delays of the deployment of experienced international staff, putting at risk the regular humanitarian operations and the capacities to address new emergencies.

Meanwhile, customs remain complicated, lengthy, and expensive for international non-governmental organizations (NGOs) considering tax and customs exemptions are rarely granted.

In the **Far North**, the prevailing insecurity, and attacks by NSAGs restrict the freedom of movement of goods and people, including humanitarian actors. Insecurity and physical and bureaucratic constraints continue to be the main limitations for humanitarian access. While there were no attacks against humanitarians in 2021 in the Far North, risks for humanitarian workers remain high as NSAGs continue to incite violence against humanitarian organizations. Furthermore, an anticipated increase of NSAG raids on military targets along the Cameroon-Nigeria border will compound access challenges for humanitarians.

In addition, the poor conditions of the road network worsen during the rainy season. For example, coupled with insecurity and climatic conditions, the road between Kousséri and Maroua becomes impassable from July to December. In addition, there are recurrent

bureaucratic access constraints, such as the request of local authorities for humanitarian actors to obtain written authorizations for the implementation of activities, which has delayed the delivery of assistance. The border between Chad and Cameroon, which was closed since March 2020, reopened in June 2021, greatly facilitating the provision of humanitarian assistance for partners operating in the Far North, close to the Lake Chad basin area.

In the **North-West and South-West** regions, access constraints include insecurity, lockdown days, roadblocks and checkpoints, bad road conditions, and bureaucratic constraints. Restricted movements and security challenges are equal impediments for the population to access basic social services and for the humanitarian actors to provide services. Access to humanitarian aid continues to be severely hampered by violence. Humanitarian workers have been victims of harassment, extortion, kidnappings and killings, and their supplies and property have been seized or looted.

Authorities require humanitarian actors to obtain written authorizations from the Governor's office for the implementation of their activities. Government Humanitarian Coordination Centres (HCC) were established in Buea and Bamenda in June 2019 to facilitate this process, however these centres have not been operational in 2021 in the North-West, making it challenging to receive the required authorizations and leading to significant delays for humanitarian operations.

The weekly lockdown "ghost town" Mondays set up by NSAGs particularly affect displaced persons and host communities, limiting their movements and therefore their economic and agricultural activities. Lockdown days, with associated movement restrictions by UN agencies and NGOs, have also caused substantial interruptions in humanitarian operations. Meanwhile, lockdowns were not limited to only Monday ghost towns. For example, NSAGs had enforced a general lockdown from 15 September to 1 October 2021. Despite engagement with NSAG members at different levels, no humanitarian exemption was granted. UN agencies and humanitarian partners had thus to fully suspend humanitarian activities during this period. All

schools and community learning spaces were closed, except for some schools in a few urban areas which are operating at less than 60 per cent of their capacity. The closure of banks and markets operating at a limited capacity aggravated food insecurity, increased commodity prices and had an adverse impact on the socio-economic activities. Meanwhile, about 200,000 people missed food assistance due to the interruption of humanitarian activities and food distributions.

Roadblocks and demands for payment by both NSAGs and SSF, despite having all required authorizations, cause needless delays and insecurity for the transport of aid goods. Occasionally, these roadblocks result in kidnapping attempts or kidnapping of aid workers in demand for ransom.

In addition, the use of IEDs by NSAGs mostly targeting SFF has also caused civilian victims and remains an important risk factor for humanitarian actors. The use of IEDs targeting non-military targets has increased in the North-West and South-West since October 2021, mostly used to violently enforce adherence of lockdown days.

The **East, Adamawa, and North** regions are relatively secure. However, security incidents, including urban crime, kidnapping, roadblocks by bandits, and inter-communal conflicts continue to affect these regions. Certain incidents, such as kidnappings, are mainly reported in the border area with CAR. Humanitarian actors are not deliberately targeted. Security incidents are not likely to have a significant impact on humanitarian access, as most incidents take place at night, therefore outside of the period authorized for humanitarian activities.

Notwithstanding certain COVID-19 governmental restrictions, Cameroon's borders continued to remain open to CAR asylum seekers in 2021. However, the persistence of insecurity in border areas and the sporadic incursions of armed elements into Cameroon raise the risk of restricting access to the territory for asylum seekers. NSAGs checkpoints may also restrict access to Cameroon for people fleeing violence in CAR.

1.3

Scope of Analysis

The methodological framework for the humanitarian needs analysis is the same as the approach used in 2021, with some modifications to consider the changing context and the strengthening of the intersectoral needs analysis.

The sectoral needs analysis covers the country's ten regions down to the divisional level. Since the causes and consequences of the humanitarian crisis have not changed significantly, the analysis is based on the same major humanitarian risks as for 2021: (1) population movements related to conflict and natural disasters, (2) acute food insecurity, (3) acute malnutrition, (4) epidemics that integrate the consequences of COVID-19 on populations, and (5) natural disaster.

The intersectoral severity analysis was strengthened and carried out for each indicator which relates to one of the humanitarian consequences (i.e., physical and mental wellbeing, living standards, and resilience). This has made it possible to identify geographical areas where at least two of the three humanitarian consequences overlap. This methodology allowed to identify the populations with the most acute needs by division.

Needs monitoring indicators have been defined to update the humanitarian needs analysis during the year 2022.

The vulnerability of those affected by these humanitarian consequences was analysed with particular attention to gender, age, disability, and the specific needs, perceptions, and coping mechanisms of the most vulnerable groups. Five groups of vulnerable populations were identified:

- **IDPs** from the North-West, South-West and Far North regions.
- **Returnees** to the North-West, South-West and Far North regions, including former IDPs from these regions and from other parts of the country, as well as former Cameroonian refugees in Nigeria who had fled the country due to the crisis in the North-West and South-West.
- **Refugees** from Nigeria, CAR, and from other nationalities.
- **Host communities**, which are usually communities or villages hosting IDP and/or refugees.
- **Other people in need**, including a majority of acutely malnourished children in crisis regions and people who are vulnerable due to food insecurity excluding refugee, IDP and returnee and the communities hosting IDP and/or refugees

Other categories of particularly vulnerable people include women and girls, young people, people living with physical or mental disabilities, and older people.



FAR NORTH REGION, CAMEROON

Ibrahim Hamaoua Lamido of Zamai a locality hosting thousands of IDPs

Photo: OCHA/Bibiane Mouangue

1.4

Humanitarian Conditions and Severity of Needs

The effects of natural disasters and violence in the Lake Chad basin, CAR, and the North-West and South-West regions, and the socio-economic and health impact of the COVID-19 pandemic, led to a deterioration of the physical and mental well-being, living standards, and coping mechanisms of the people living in Cameroon. The insecurity

diminished coping capacities and a lack of access to basic services leave 3.9 million people in need of humanitarian assistance in Cameroon in 2022. Humanitarian challenges are exacerbated by structural factors and chronic vulnerabilities that hinder the long-term recovery of affected people.

Displaced people



FAR NORTH REGION, CAMEROON

Maga IDP site

Photo: FAO

Almost 2 million people are displaced within Cameroon.⁴⁹ Population movements are the most visible demonstration of the insecurity and tend to increase in the absence of lasting solutions. Civilians are fleeing to protect themselves from serious threats to their lives and their physical integrity, as well as their property.

Displacement implies a loss of resources for food self-reliance. It primarily jeopardizes access to land to cultivate and implies loss of livestock and families' productive assets. IDPs have on average a lower food consumption score than the rest of the population, with 56.1 per cent of displaced households having a poor or borderline score in comparison to 15.1 per

cent of households with a poor or borderline food consumption score across the country. 86 per cent of displaced households used crisis or emergency strategies in August 2020 in comparison to around 50 per cent of regular population nationwide.⁵⁰

Attacks on property and housing continued to be reported in the North-West and South-West regions and the Far North. Many homes have been burnt down since the start of the crisis leaving many displaced families in inadequate or unsafe shelter arrangements, exposing them to further harm. Many of those who managed to flee violence end up facing exploitation and abuse within the host community, including sexual violence and exploitation, and resort to

negative coping mechanisms. Discrimination against IDPs when they attempt to benefit from limited basic services within the host community has been reported. In the Far North, stigmatisation or discrimination are reported by the displaced populations as the main protection problem.⁵¹

In the Far North, access to land, followed by the improved security situation, are the main reasons for displaced people to return to their area of origin.⁵² However, return to the village of origin is not a synonym for an improvement of the security situation. There are certain negative factors leading people to return, including the lack of livelihood opportunities and assistance in the location of displacement. In the North-West and South-West, the safety in the village of origin and the lack of livelihood in the village of displacement are the main reasons for return.⁵³ Furthermore, returnees are not necessarily going back to most stable locations. Meanwhile the destruction of their accommodation in their location of origin, keeps many of those who would like to return from doing so.⁵⁴

Cases of arrests and convictions of CAR asylum seekers on the grounds of irregular immigration continue. The issuance of documents for refugees by the Cameroonian authorities is not yet effective. After several years of asylum and despite the refugee data transfer agreement signed in March 2019 between UNHCR and Cameroon's Ministry of Foreign Affairs, UNHCR continues to issue refugees protection documents. In 2021, biometric verification was conducted only for refugees and asylum seekers in Yaoundé, Douala, Mbile, and Kousséri leaving more than 400,000 refugees unverified (around 88 per cent of all refugees and asylum seekers).

As of 31 December 2021, most refugee documents have expired. Furthermore, some law enforcement

agents and some private sector actors are reluctant to consider UNHCR-issued documents as an identity document, limiting the refugees' freedom of movement and access to services.

The freedom of movement for refugees in the East, Adamawa, and North regions has thus been limited, in contradiction with the requirements of the 1951 Convention and the 2005 Refugee law in Cameroon. This restriction on the free movement of refugees is a source of harassment and abuse applied by SSF on one hand and hampers refugees' self-reliance on the other.

Host communities



EAST REGION, CAMEROON

Adamo Sadjó, secretary of civil states, registers two-month-old twins, in Mbonga village

Photo: UNICEF/ Samomon Beguel

Host communities often share limited resources with the displaced population, further increasing their own vulnerability. In the North-West and South-West regions, 49 per cent of the IDPs live with host families,⁵⁵ and 40 per cent in the Far North.⁵⁶ Only a small proportion of the displaced households in the Far North (2 per cent) reported tensions with host communities, mainly because the host communities also suffer from a lack of livelihood without necessarily receiving assistance.

Meanwhile, the capacity of the host population to support the displaced population seems to have decreased in the Far North. The displaced households consulted in November 2021 indicate that 61 per cent of the host community would like to assist them but do not have the necessary means to do so, in comparison with 48 per cent in August 2020.⁵⁷

People living with disabilities



FAR NORTH REGION, CAMEROON

*Moustapha Modou is enrolled in an Inclusive Education Programme in Mora
Photo: UNICEF/ Salomon Beguel*

People living with disabilities are often left behind when families flee violence. Restricted access to livelihoods has impacted social support systems to the most vulnerable individuals including older people and persons living with disabilities. In 16 per cent of the villages assessed during the July MSNA in the Far North, access to school was not possible for children living with disabilities and in 7 per cent of the villages assessed, water points are inaccessible to people living with disabilities.

People with disabilities are more likely to be exposed to danger from attacks, including because of barriers to escaping and staying out of harm's way, and because of the degradation of the support systems which existed before the crisis.

Children



SOUTH-WEST, CAMEROON

Keren, a 12 years old girl, is listening to a radio education programme, in Idinau locality

Photo: UNICEF/Salomon Beguel

Cameroon's population is predominantly young, with half of the population under 19.⁵⁸ Children are at high risk of violence, abuse and exploitation, family separation, and have significant psychosocial needs.

Girls and boys represent approximately 62 per cent of the displaced population in the Far North region.⁵⁹ Due to insecurity and population movements, many children have been forced to flee their villages, sometimes being witnesses or victims of violence leading to high levels of stress and trauma and significant negative consequences for their cognitive and emotional development. In 2020, the United

Nations verified 285 grave violations against 232 children (118 boys, 92 girls, 22 sex unknown), in the Far North (161), North-West (83), and South-West (41) regions.⁶⁰ First trend analyses indicate a decrease in the number of violations verified in 2021, especially in the Far North, probably in connection to above mentioned NSAG infighting. Meanwhile, there are indications that the situation worsened in the North-West regions with regards to abductions of girls, killing and maiming of boys, and denial of humanitarian access.⁶¹

In the Far North, North-West, and South-West regions, children are regularly exposed to violence, to the risk of kidnapping, abduction, maiming, exploitation, and killing,⁶² in addition to consequences of negative coping mechanisms adopted by their family, such as child marriage. The mental health of children and caregivers is at stake with children suffering from post-traumatic disorders, emotional distress, and are affected by the fear and tensions among members of communities impacting on social cohesion. Furthermore, the exploitation of children in small businesses exposes them to other risks of abuse and violence that make them even more vulnerable. Displaced children are forced to work in 78 per cent of the assessed locations in the Far North.⁶³

Of the almost 350,000 people displaced within the North-West and South-West, 62 per cent are children. 264 unaccompanied children, and 1,203 separated children were reported in 2021 with little alternative care solutions in place. It is assumed that the number of unaccompanied and separated children is much higher than this, as family separation is a major threat in this crisis, as a direct consequence of attacks on villages forcing family members to scatter, but also as families seek economic opportunities in other areas/ regions, or because of children being sent to urban centres to continue their education. Some of these children are involved in some of the worst forms of child labour or survival sex to have access to food and shelter.

In the Littoral, about 95 per cent of IDP households host at least one orphan, unaccompanied, or separated child. In the West region, more than 90 per cent of IDP children (be they unaccompanied or not) are involved in some form of child labour.⁶⁴

Children represent 54 per cent of the CAR refugee population. 15,052 children (8,714 girls and 6,338 boys) are at risk. Because of culture, religion, and poverty, refugee children assume parental responsibilities (children heads of households), are involved in early marriage, and engaged in labour in mining areas. Children are victims of abuse, neglect, and exploitation, sometimes within the family. It is important to recall that many refugee children born in Cameroon, in the eastern regions, as well as in the Far North, do not have birth certificates, putting them at risk of statelessness.

Children and pregnant and lactating women are most affected by malnutrition. Chronic malnutrition remains a public health problem in Cameroon. CAR refugee children are particularly malnourished with GAM rates of around 12.5 per cent. Furthermore, around 50 per cent of refugee children in the Minawao camp in the Far North and in refugee sites in the Adamawa and East regions are stunted.⁶⁵

Women and girls



FAR NORTH REGION, CAMEROON

IDP family relocated after flood in Kousséri

Photo: OCHA/Bibiane Mouangue

Gender inequality is an important factor influencing coping strategies and affecting the recovery capacities of women and girls. By denying equal rights and opportunities, vulnerabilities are created which are exacerbated in times of crises. Women rarely use, possess and control economic household resources. About 11 per cent of women aged 15 to 49 have a title to a house they own in their own name and 21 per cent own land without having a title against 15 per cent of men owning a house in their own name and 51 per cent owning land without having a title.⁶⁶ The unpaid workload that reproductive work implies, combined with the fact that women have extremely

limited access and control over resources, partly explains why the female population is more affected by poverty.⁶⁷ While 39 per cent of the population lives below the poverty line, this rate rises to 51.5 per cent for women. The female unemployment rate is 4.5 per cent compared to 3.1 per cent for men. Additionally, 79.2 per cent of women are underemployed, being primarily employed in informal, low-wage activities.⁶⁸ The fact that they are socially and economically disadvantaged and, also, that they are largely excluded from public decision spheres, including conflict resolution processes, greatly hampers their resilience and their recovery capacity.

Women are also heavily affected by the disruption or loss of livelihoods caused by violence. Being the backbones of rural economies (they represent 71.6 per cent in the informal agricultural sector), they are called to play an ever-greater role in the fragile economies of the crisis affected regions. Due to the demographic imbalance the crisis in the North-West and South-West created,⁶⁹ with many men dead, hiding or forced to exile, women are now playing the role of heads of households and providers for the family. They have engaged in a range of economic and social activities, formally played by men, generating a heavy workload. While this has had positive effects, opening space for women to play higher public roles, mobilising in favour of peace and having more say in community decisions, these heightened economic and social roles are not always synonymous with a genuine empowerment. They mean more burden and responsibilities for women and girls, with more frontline activities that place their own safety at risk.⁷⁰

Low living standards and lack of access to essential services, particularly for those displaced, has led to a rise in morbidity. Heightened care giving responsibilities, combined with the fact that children, in some affected regions, are out of school, have significantly increased women's workload. Also, collecting water or firewood, are time consuming and expose women to dangers. As a result, and because these tasks require significant daily investment, women are particularly affected by a lack of access to income-generating activities, with less resting time and a lower access to decision-making forums.

A greater proportion of households having a poor or borderline food consumption score is noted for female headed households: 40.5 per cent, compared to only 13.0 per cent of male-headed households.⁷¹ Female headed households have a higher reduced Coping Strategy Index (rCSI) and a higher livelihood Coping Strategies Index (ICSI) than those headed by men. In crisis situations where food is in short supply, women and girls are more likely to reduce their food intake as a coping strategy in favour of other household members, which can contribute to under-nutrition among women and girls.⁷²

GBV in Cameroon has been an existing reality prior to the crises and occurs in areas where guns are silent. This said, risks have been heightened due to the security situation and to displacements: sexual exploitation, child marriage, rape and physical and emotional violence continue to be perpetrated against women and girls particularly, but also against men and boys, in all regions affected by crises. Women and girls are the main victims of gender-based violence, in particular domestic violence, rape, child marriage, and sexual exploitation, due to the combined effect of pre-existing cultural and traditional discriminatory norms and practices, gender discrimination and socio-economic vulnerability caused by the crisis. As men and boys limit their movement to avoid arbitrary arrest and unlawful detention, women and girls are often the ones collecting assistance or undertaking other tasks, such as collecting firewood, which exposes them to heightened risks of violence, including GBV. Additionally, the lack of legal criminalization of domestic violence and marital rape is a major gap in the protection of women's rights.

Although the Penal Code adopted in 2016 has strengthened national legislation through certain provisions that specifically address the issue of GBV and sexual violence, violence against women and girls remains a preoccupying reality in Cameroon.⁷³ The key drivers of GBV are linked to insufficient literacy among women, particularly in rural areas, poverty and customs⁷⁴.

Conflict and displacement have aggravated GBV trends in the Far North region. In a context where girls' and women's social and economic status is low, the hardship created by the crisis generates a heightened risk of violence within the home. Men's frustration at being unemployed or underemployed, unable to fulfil their socially expected role of providers and protectors of the family, combined with the fact that violence is considered as socially acceptable in some communities, leads to a recourse to domestic violence as a means of asserting authority and dominance. In 2021, 1,823 cases of GBV were reported in the Far North. The majority of GBV cases reported are denial of resources or opportunities (42 per cent), followed by physical assault (26 per cent), emotional abuse

(18 per cent), forced marriage (5 per cent), rape (5 per cent), and sexual assault (3 per cent).⁷⁵ Close to 70 to 75 per cent of incidents of physical violence were committed by intimate partners.

On-going violence in the North-West and South-West regions has had a major impact on the economy and led to negative coping mechanisms by the affected population. These include survival sex and exploitation, child marriage, and child labour, which are phenomena less culturally rooted in these regions and much more clearly a consequence of the crisis than in the Far North and the eastern regions.

Sexual violence is rampant in the North-West and South-West regions. In 2021, 12,634 GBV incidents were reported to GBV specialised services providers. 86 per cent of GBV incident survivors are female, 14 are male, 66 per cent are adults and 34 per cent are children. 63 per cent of the survivors are IDPs, 32 per cent are from the host community, and 5 per cent are returnees.

The majority of GBV cases reported are denial of resources or opportunities (33 per cent), followed by physical assault (26 per cent), emotional abuse (19 per cent), sexual assault (11 per cent), rape (7 per cent), and forced marriage (3 per cent).⁷⁶

There has been an escalation in the abuse and violations of women and girls in the Littoral and West regions. Settlement patterns and overcrowded homes do not allow women and girls to carry out their intimate activities away from the eyes of other community members.⁷⁷

GBV remains a major issue for CAR refugees. Cultural systems perpetuate harmful traditional practices that promote violence and exploitation of women.

FAR NORTH REGION, CAMEROON

Bogo IDP site

Photo: UNHCR/Xavier Bourgeois



Men and boys

Adolescent boys and men face specific threats and circumstances that leave them vulnerable. They are most at risk of arbitrary arrest and unlawful detention, forced recruitment, and physical violence. This is true for the Far North, North-West, and South-West regions. However, there is little analysis on the risks and vulnerabilities of men and boys in the Far North, wherefore the following focuses on the situation in the North-West and South-West regions, where information is available thanks to an analysis conducted in 2021 by the inter-agency advisor for Cameroon.

In the North-West and South-West regions, men and young men remain the primary victims of recorded protection incidents, representing between 85 per cent and 95 per cent of those exposed to torture or inhuman treatment, theft, extortion, and arbitrary or unlawful arrest and/or detention.⁷⁸ This high percentage can partially be explained because protection incidents recorded through protection monitoring activities do not cover GBV, as such data is being recorded through the GBV Information Management Service. Also, as men are the traditional owners of goods and properties, this also explains why they are more affected by theft and extortion.

Being a man or a boy also means being more exposed to targeted armed attacks, with greater risks of injury or death directly related to the conflict. This peculiar exposure to threats is explained by the specific forms of discrimination, harassment, and violence they face, from the military authorities and from the NSAGs. As it is men who are expected to fight, it is also them who are perceived as threats by both parties. In an environment of increasing insecurity, curfews, lockdowns, and roadblocks, men and boys are far more likely to be stopped by law enforcement or by NSAGs at checkpoints, especially when lacking identity documents. Neutrality is often impossible. Instead, men often mitigate their exposure to risk by

reducing their economic and social activities to the minimum, limiting their movements particularly after it gets dark and avoiding gatherings. Some families limit their sons' movements to prevent them from being forcibly recruited or killed. Young men who still reside in areas where raids are frequent must ensure they are not seen by armed actors. They must stay home as much as possible, hide in the bushes or relocate to other areas. This affects their ability to access essential services and humanitarian assistance.⁷⁹ This also results in a greater economic and domestic burden on women and girls and their greater exposure to GBV: because women can move where men used to go, wives and children are often the ones to seek humanitarian assistance, work in the fields, and go to the market.

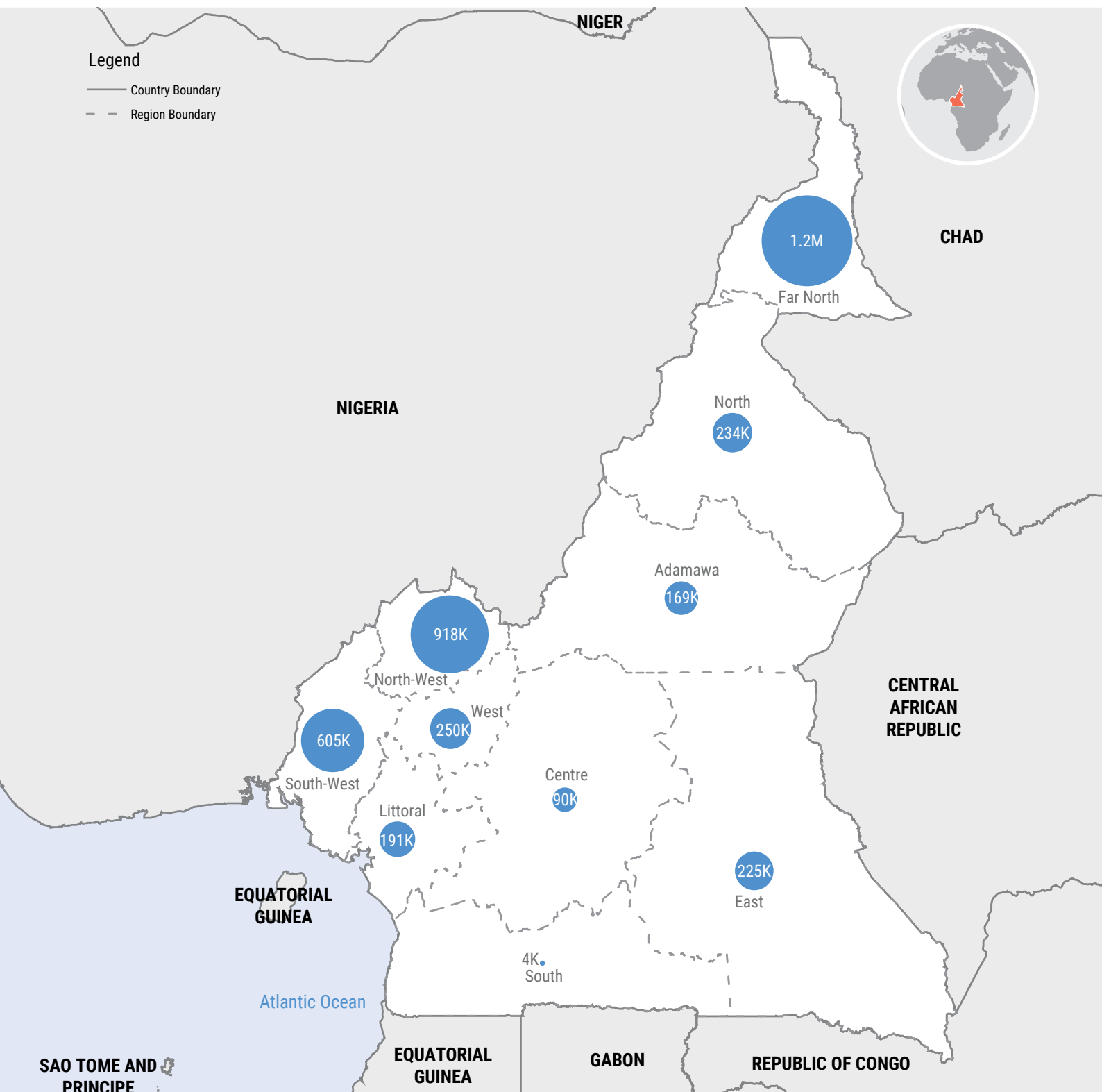
With no immediate solution foreseen to the ongoing crisis, adolescent boys and men feel dispossessed of control over their life and their future and suffer deep psychological impact. Often unable to play the expected role of breadwinner and protector of the family, they feel helpless, causing depression and suicide attempts to rise. It has also contributed, particularly in the case of adolescent males, to a growing use of alcohol and drugs. Some organizations have anecdotal evidence that males, particularly displaced ones, are being sexually exploited, sexually assaulted, and raped by armed or civilian men. These violations remain largely unspoken and hidden.⁸⁰ The GBV Area of Responsibility's (AoR) July 2021 report reveals that 13 per cent of GBV survivors in the North-West and South-West are males.

1.5

Number of People in Need

Current figures

PEOPLE IN NEED	WOMEN	CHILDREN
3.9M	53%	57%





FAR NORTH REGION, CAMEROON

Bogo IDP site

Photo: OCHA/ Ariane Maixandau

In 2022, 3.9 million people will need humanitarian assistance in Cameroon. The PIN is slightly lower in comparison to 2021, where 4.4 million people were estimated to need humanitarian assistance. This is mostly due to a decrease in the number of people facing acute food insecurity from 2.7 million in 2021 to 2.4 million in 2022 based on the Cadre Harmonisé analysis,⁸¹ as well as a considerable decrease of people estimated to need humanitarian assistance related to the CAR crisis: while 749,000 people were estimated to need assistance in 2021, this number decreased to 477,000 in 2022 following a change in UNHCR's calculation methodology of the PIN, focusing purely on humanitarian needs.

Of the total PIN, 1.9 million (48 per cent) are displaced people, including IDPs, returnees, and refugees, and 1.6 million (41 per cent) are host community members, thus demonstrating the impact that sharing already limited resources with the displaced population has on host community members. The remaining 444,000 (11 per cent) "others" are people neither displaced, nor hosting displaced people, including 258,000 not affected by any of the three crises, but who are in food insecurity level 3 according to the analysis of Cadre Harmonisé.

Of the 3.9 million people in need, 2 million people (52 per cent) will need humanitarian assistance due to the North-West and South-West crisis. While the number of people in need because of this crisis remained

almost the same in comparison to the two previous years, there is a shift in the number of people in need per region. In the North-West and South-West regions, the number of people in need decreased from 1.7 million people in 2020 to 1.5 million people in 2021, where it remains for 2022: 1.5 million people need humanitarian assistance in 2022 in the two regions. The number of people in need decreased significantly for the Littoral region from 2020 to 2022⁸² while the number of IDPs in this region remained stable since 2020 at around 81,000. The West region saw an important increase in comparison to 2021, with 250,000 people in need in 2022. In 2022, 77,000 people need assistance in the Centre region, considerably less than in 2021.⁸³

led to a 10 per cent increase in projected food insecurity from 2021 to 2022. Over 900,000 people are estimated to be food insecure from June to August 2022, compared to 820,000 people for the same period in 2021.

Furthermore, 435,000 people (11 per cent) will need assistance in the Adamawa, East, and North regions in 2022, due to the CAR refugee crisis. This is a considerable decrease from the 673,000 people who needed assistance in these three regions in 2021. Out of the 435,000 people in need in the eastern regions, 321,000 (73 per cent) are refugees, 43,000 (10 per cent), are from the host community, and 70,000 (16 per cent) are “others”. These numbers indicate an increase over 40,000 in the number of refugees in

IDP FIGURES LITTORAL, WEST AND CENTRE REGIONS SINCE 2018



Also, 1.2 million people (31 per cent) will need assistance in 2022 in the Far North region, as was the case in 2021. The Far North region experienced exceptional flooding in 2020 and drought in 2021, severely reducing the crop yields triggering acute food shortages. This heavily affected women, who represent 71 per cent of workers in the informal agricultural sector in Cameroon. Together with the armed conflict and the socioeconomic impact of COVID-19, the effects of natural disasters have

need (from 281,000 in 2021), but a decrease of 97,000 (from 140,000 in 2021) host community members in need, and a decrease of 182,000 “others” in need (from 252,000 in 2021). This decrease of people in need due to the CAR refugee crisis is thus due to a focus on purely humanitarian needs among the host community members and others. As “others” are in need of food and nutrition assistance, the reduction in numbers is also explained by the decreased impact

of the COVID-19 pandemic, thanks to which food security improved.

In addition, 26,000 urban refugees in Yaounde and Douala, including 18,000 from CAR, are estimated to need humanitarian assistance in 2022. This is a considerable decrease from the 85,000 people in need due to the refugee crises and can be partially explained by the fact that contrary to 2021, the PIN no longer includes host community members.

While the number of people in need of humanitarian assistance because of the CAR refugee crisis decreased significantly, the severity of needs remained the same and even increased from stress levels to severe in the Vina division in the Adamawa region and the Boumba-et-Ngoko division in the East region. This increase in severity is due to the very limited partner presence in these two divisions, which means refugees receive very limited assistance.

Meanwhile, the severity of the needs remained at the same severe and extreme levels for most divisions in the North-West, South-West and Far North regions.⁸⁴ The Boyo and Ngo-Ketunjia divisions in the North-West were much less affected by violence and subsequent displacement in 2021, leading to a decrease in the severity of needs from extreme to severe. While the severity remained at severe levels in all divisions in the South-West, some improvement

of the humanitarian situation has been observed in certain areas in the Manyu and Meme divisions.

The same is true for the situation in the Far North, where the overall severity of needs remains extreme in the Mayo-Sava, Mayo-Tsanaga, and Logone et Chari divisions, although pockets of positive developments are observed. The UNDP stabilization's programme implemented in Amchide and Limani in the Mayo-Sava division and the implementation of recovery and resilience programmes in Mokolo and Zamai in the Mayo-Tsanaga division have led to an improvement of the situation in these locations and was followed by return movements. Meanwhile, the humanitarian situation in the areas bordering Nigeria remains difficult. Development programmes implemented in the Mayo-Danay division also led to the improvement of the humanitarian situation in certain localities, but overall, the situation remains severe.

The diminished pressure of the COVID-19 pandemic is greatly felt in the regions not affected by one of the three humanitarian crises. While all divisions were at minimum showing stress severity levels in 2021, all divisions of the South and Centre regions which are not hosting any displaced people are back to none or minimal severity levels.

FAR NORTH REGION, CAMEROON

Meme IDP site

Photo : FAO



Part 2:

Risk Analysis and Monitoring of Situation and Needs

FAR NORTH REGION, CAMEROON

Photo: IRC



2.1

Risk Analysis

The main shocks considered in the risk analysis are armed violence, natural disasters, and health outbreaks. The time horizon of the following risk analysis spans until the end of 2022. The geographical scope of the analysis remains the same as the scope of this HNO: nine out of ten regions, affected by the three humanitarian crises.

The INFORM Risk Index continues to class Cameroon at high risk of humanitarian crisis in 2022.⁸⁵ INFORM assessed Cameroon at high risk on rank 20, out of the 191 countries assessed, in comparison with rank 12 given by the Index in 2021. Indicators related to hazard and exposure, including the projected conflict risk, the conflict intensity and human induced hazard, decreased in severity, while the assessment for vulnerabilities and lack of coping capacity remained the same as in 2021.

For 2022, the index indicates a risk of 6.1 on a scale of 10, in comparison to 6.6 for 2021. INFORM Sahel assesses risks between the different regions of Cameroon.⁸⁶ Risks are particularly high in the Far North (7.4), the North-West (7), in the East (6.6), the South-West (6.4), and the North (6). The highest risk levels are linked to violent conflict (currently at 7 and projected at 7.9), floods (6), and epidemics (8.1).

For 2022 it is expected that human hazard (political violence and conflict probability) remains high in the Far North and the North-West and South-West regions, with a risk index of 10 (out of 10) for the Far North, North-West, and of 9 for the South-West.

A significant de-escalation of the violence in the **North-West and South-West** regions, such as through a negotiated ceasefire or renewed political mediation, is unlikely in 2022. Military operations are expected to continue in the North-West and South-West in 2022,

as are asymmetric retaliation attacks by NSAGs. They are likely to continue enforcing weekly and ad-hoc lockdowns, linked to dates or events with specific political significance. During lockdowns, NSAGs are unlikely to grant clear exemptions for humanitarians. This is set to have detrimental effects on the freedom of movement of humanitarians and programme delivery. Opposition by NSAGs to Africa Cup of Nations (AFCON) matches held in the South-West region will likely also act as a trigger for continued IEDs attacks against state targets, as well as more indiscriminate attacks against AFCON-associated facilities or public venues. AFCON convoys, stadiums, training grounds, official hotels, including UNDSS approved hotels, and other AFCON-associated are considered likely targets for NSAGs-perpetrated IEDs attacks and ambushes in the South-West. Increased deployment of SSF in the South-West region in the build-up to the AFCON is anticipated. This is likely to include periods of intensified counter-NSAG military operations, large-scale arrests of alleged NSAGs combatants and associates and more frequent checks of vehicles.

Meanwhile, divisions between NSAGs will persist, including among diaspora-based leaders. These will trigger continued inter-NSAGs fighting in both regions in 2022. The weakening of links (including financial) between diaspora-based leaders and combatants on the ground is likely to see NSAGs fighters resorting to ever more frequent criminal actions, including kidnappings and illegal taxation. Human rights violations committed by parties to the conflict will also remain a conflict driver.

Despite continued engagement of NSAGs and diaspora leaders by different stakeholders to agree on the right to education and call for an end of attacks on education, armed attacks on teachers, pupils and

education facilities have continued in the North-West and South-West regions in 2021 and are likely to persist in 2022.

Overt criticism of the UN and Western powers continues to be aired on social media by the diaspora leaders and supporters of the separatist cause.

In general, ongoing insecurity, the impact of military operations by SSF, and increasing fragmentation of NSAGs, will most probably continue to render humanitarian access challenging.

In the **Far North** region, NSAGs are likely to continue to target both civilians and SSF on Cameroonian territory. Attacks on military posts and predatory attacks against civilians along the border with Nigeria will continue in 2022. Armed clashes between rival NSAGs can be anticipated in the wider Lake Chad basin.

Significant internal and cross-border population movements are expected to continue following attacks, or as a preventive measure, with the continued likelihood of large-scale protection incidents and humanitarian needs in the affected areas, both for displaced populations and host communities.

It is estimated that recurrent attacks by NSAGs in the Lake Chad basin will continue to trigger the arrival of refugees from Nigeria in Cameroon and exacerbates internal displacement in the Far North region. UNHCR and partners estimate that the number of new arrivals from Nigeria in 2022 could reach approximately 6,000 individuals. Since voluntary repatriation planning figures are around 6,000 individuals, the total number of Nigerian refugees is not expected to increase in 2022. Statements by NSAGs operating in the Lake Chad basin pointing at international humanitarian and development organizations as legitimate targets continue to render access in the Far North challenging.

A resurgence in armed conflict in several regions of CAR is moderately likely from late 2021 on. This means that CAR refugees in eastern Cameroon are unlikely to return home in large numbers, while new outbreaks of conflict may trigger new arrivals into the

country. UNHCR and partners anticipate that around 17,000 CAR refugees will cross the Cameroonian border in search of safety in 2022. The displacement into Cameroon led in the past to tensions with host communities over the use of firewood, water, land, and other resources. Increased movements of vulnerable populations into Cameroon from CAR could increase pressure on humanitarian operations already challenged by under-funding.

The INFORM risk index for violence is elevated at 8 for the East. Hosting 207,000 CAR refugees as of December 2021, the East has the highest risk index for displacement at 9.4.

The risk of flooding remains high in 2022. According to INFORM Sahel, the North is at highest risk (8.4), followed by the Far North (7.7), and the Littoral (6.1). Meanwhile, flood levels were below average in 2021. However, the Far North region experienced exceptional flooding in 2020 and drought in 2021, severely reducing the crop yields triggering acute food shortages. Together with the armed conflict and the socioeconomic impact of COVID-19, the effects of the natural disasters have led to a more than 70 per cent increase in projected food insecurity from 2021 to 2022 in the Far North.⁸⁷

Structural weaknesses and insecurity will continue to limit people's access to essential services. Furthermore, basic social services and access to drinking water and food are under pressure due to the influx of displaced persons to certain localities. Conflict over limited natural resources has intensified in the second half of 2021 in the Far North. In August and December 2021, inter-communal clashes in Logone-Birni in the Logone et Chari division over access to water spread to the Mayo-Danay and Diamare divisions and led to the displacement of almost 69,000 people as of 4 January, including almost 36,000 who sought refuge in Chad.⁸⁸ Conflicts over the use of land and water in the Far North are likely to continue in 2022.

Outbreaks of intercommunal violence in the Far North region in 2021 have spread increasingly rapidly and impacted larger numbers of communities than in



FAR NORTH REGION, CAMEROON

Kolofata IDP site

Photo: OCHA/Joelle Kwembi

previous years. ‘Self-defence’ dynamics, insufficient institutional responses to addressing the underlying causes of conflict, coupled with more anticipated ‘trigger’ disputes over scarce natural resources, mean that further outbreaks of violence are likely in the short term. Cycles of violence in 2021 have been triggered by local disputes over water, land, and other resources; ongoing environmental pressures suggest further outbreaks are highly likely.

Civil society sources have reported at least five outbreaks of fatal intercommunal violence in 2021 (including the most recent episode) between herder and sedentary communities in the Far North. Other sources report higher numbers. Although conflicts between communities have existed for decades,

anecdotal evidence suggests that violent outbreaks are becoming more frequent in recent years.

Desertification, changing weather patterns, rising temperatures, and water scarcity continue to disproportionately impact the Far North compared to other regions of the country. In 2018, the UN reported that 40 percent of Cameroon’s border areas with Chad and Nigeria had been affected by desertification. These environmental conflict drivers, in addition to political and socio-economic factors outlined above, are unlikely to diminish in the short-term. Therefore, trigger events are likely to occur again by early 2022. To recall, December, January, and February mark the dry season months where competition over scarce

water supplies, whether for agriculture, fishing, livestock, or household use, are likely to occur.

Further outbreaks of violence are likely to spur new waves of displacement inside the Far North and into Chad, as well as discouraging IDPs and refugees from returning.

Limited availability of and access to basic health, water and sanitation services and poor vaccination coverage, floods, and population movements favour the outbreak and spread of highly transmissible water-borne and infectious diseases. INFORM assesses the risks of epidemics at 8.1 country wide. Consequently, poverty, population behavioural patterns, low level of performance of the health system, and inequalities of access to health services will continue to influence the incidence of epidemics.

The general trend of cholera analysis shows a persistent high number of cases with a case-fatality rate that far exceeds the WHO recommended norm of less than 1 per cent. Cholera outbreaks can be observed the whole year in Cameroon. There was an increase in the number of cholera cases recorded during the rainy season between June and October 2021. For 2022, the cholera outbreak which started in October 2021 in the South-West and Centre regions (521 cases and 18 deaths as of 31 December) may continue and expand in more regions with humanitarian consequences like previous outbreaks.

The vulnerable populations will have great difficulties to face and recover from these shocks due to limited positive coping mechanisms available to them. The socio-economic vulnerability (6.7 out of the Sahel INFORM index scale of 10) and the lack of coping capacity (6) are due to governance challenges and inadequate resilience infrastructure capacity, such access to child protection services, health, schools, and water and sanitation services. The most impacted regions are the Far North (7.0), the North-West (6.3), the East (6.1), and the South-West (6.0). These dynamics will coincide with amplifying factors including: (i) the very high incidence of poverty in rural areas⁵³ and particularly in the Far North,⁵⁴ (ii) the high rate of urbanisation,⁵⁵ (iii) the high inequalities in access to basic services, and (iv) the high percentage of young people who are out of school.⁵⁶

In conclusion, it is expected that humanitarian needs will remain severe in 2022, considering the continued high levels of insecurity and possible clashes over scarce resources triggering population displacement, the lack of disaster risk reduction and preparedness efforts, as well as the limited provision of development and humanitarian assistance due to underfunding.

2.2

Monitoring of situation and needs

Humanitarian partners in Cameroon have a coherent and systematic method for data collection on population movement and humanitarian needs and will continue to use internationally recommended data collection tools to monitor the changing situation.

Indicators and data that will be monitored in 2022 at the inter-sectoral level include the following:

- The monitoring of IDPs and returnees' movements in the Far North will continue through IOM's Displacement Tracking Matrix (DTM).
- UNHCR will continue to update refugee figures through its ProGres tool.
- Multi-Cluster/Sector Initial Rapid Assessments (MIRA) will continue to be carried out to gain a rapid understanding of the overall needs of populations recently affected by crisis or disaster.
- Multi-Sector Needs Assessments (MSNA) will also continue to be carried out in 2022 to facilitate an understanding of the changing humanitarian situation and the evolution of needs. The MSNAs carried out in 2021 were based on key informant interviews and focus group discussions with a limited number of persons at a time, respecting COVID-19 prevention measures. In 2022, if resources allow, MSNA's will partially also carried out at household levels.
- Among the dynamic tools, IOM-DTM's emergency tracking tools and rapid needs assessments, will continue to be used to gain immediate insight on needs of recently displaced populations. Complementing these tools in the Far North, the Rapid Response Mechanism (RRM), led by Premiere Urgence Internationale (PUI) and Action Contre la Faim (ACF), will continue to carry out rapid

multisectoral needs assessments following the displacement of at least 20 households.

- For increased situational awareness and context analysis, a wide range of information, including sectoral and inter-sectoral situation reports, 3W, 4W, and 5W, will continue to be monitored and shared through the existing coordination mechanisms.
- At operational level, field monitoring of needs and gaps, including through local partners will continue to be conducted.
- Data from key assessments and surveys such as the Food Standards Agency survey, the Cadre Harmonisé, the Standardized Monitoring and Assessment of Relief and Transitions (SMART), the Health Data Monitoring System, etc., will be used to monitor humanitarian needs for certain sectors that may have a major impact on the overall humanitarian situation.

Part 3:

Sectoral Analysis

FAR NORTH REGION, CAMEROON

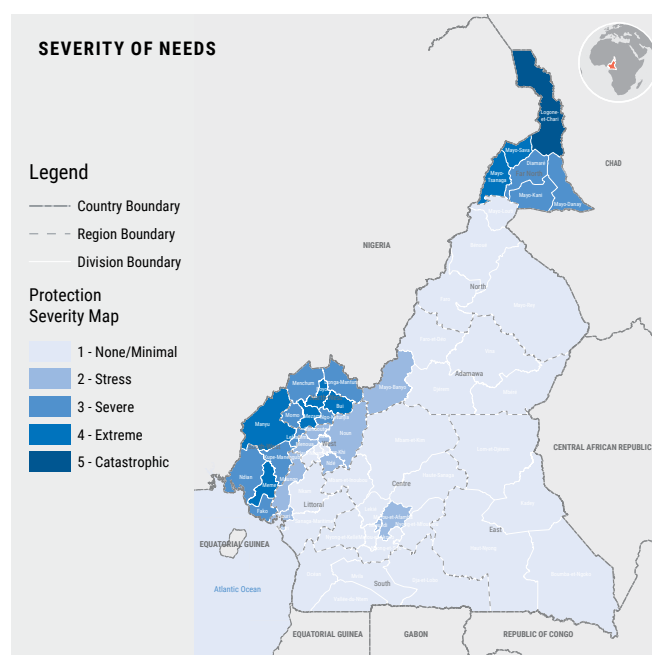
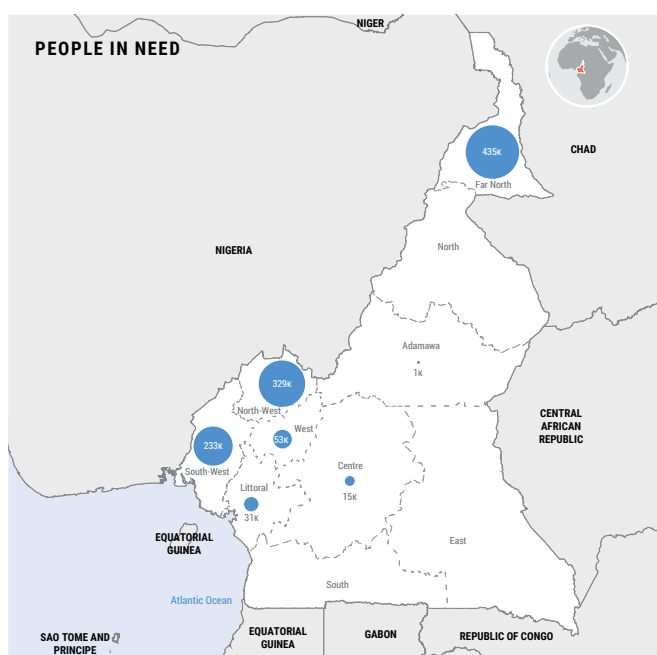
Photo: OCHA/Ariane Maixandeau





3.1 Protection

PEOPLE IN NEED	WOMAN	CHILDREN (<18 YEARS)	ADULTS (18-59 YEARS)	ELDERLY (>60 YEARS)
1.1M	59%	60%	35%	5%



Lake Chad basin crisis (Far North)

The Protection environment in the Far North region is characterized by weekly armed incursions from NSAGs, including attacks on villages and criminality. In 2021, the three divisions of Mayo-Sava, Mayo-Tsanaga, and Logone et Chari remain the most affected by the crisis due to their proximity to the border with Nigeria and Chad. 87 per cent of the IDP population in these three divisions had moved due to the ongoing hostilities. Protection monitoring and displacement tracking also indicate the presence of IDPs in other divisions such as the Mayo-Danay, Mayo-Kani, and Diamare.

The nature of protection incidents demonstrates that criminality in the three most affected divisions

is rampant with high percentages of extorsions and destructions of goods. The ongoing crisis takes place in the context of under-development where public infrastructure and delivery of social services were already weak in some localities while they have been destroyed by the conflict in others. The economic context is marked by poverty, the lack of natural resources, employment opportunities or services accentuated by the crisis in the Lake Chad basin. Agricultural, livestock, fishing, and tourist activities have experienced a drastic regression in the region due to the prevailing insecurity.

Pressure around access to natural resources (land and water) led to inter-communal clashes throughout 2021. Such clashes occurred in May 2021 in the

sub-division of Waza, and in August and December 2021 in the sub-division of Logone Birni, both located in the Logone et Chari division, leading to the internal displacement of tens of thousands of individuals. As of July 2021, two per cent of the displaced population moved because of those inter-communal clashes, a number which already increased significantly due to the clashes in December, which will most likely increase in 2022. Whereas the conflicts between the tribes and the breeders have historical roots, the competition around natural resources and the internal displacement of some 357,000 individuals across the three divisions have aggravated them. In addition, the region is also affected on an annual basis by floods and concomitant landslides provoking internal displacement and creating protection risks.

In 2021, the protection threats remained to a large extent the same as in 2020 and can be divided into five large categories of rights violations: (1) family separation; (2) arbitrary arrests and illegal detentions; (3) killing of civilians and physical injuries during incursions of NSAGs in the villages; (4) extortion and destruction of goods and personal property by all parties to the conflict and criminal gangs; and (5) abduction of adults and children mainly to forcibly join NSAGs. In 2022, protection partners estimate that a total of 435,000 individuals need protection services.

In 2021, close to 1,100 incidents of extortion of goods and properties were recorded; authors include all parties to the conflict but also criminal gangs taking advantage of the redeployment of SSF. Men are the most affected by extortion and destruction of properties (including livestock and real estate) as the traditional owners of goods and properties. Close to 800 instances of destruction of properties were recorded, mainly during attacks on villages.

Protection monitors have reported the killing of 379 civilians during 2021, mainly during attacks by NSAGs and in crossfires with SSF. In addition, monitors recorded some 560 civilians injured and 224 abductions, kidnappings, and attempts of abduction.

Host and displaced communities are equally affected by the security and protection environment. Among

the most vulnerable, the protection actors included women heads of household, persons living with chronic diseases, persons living with disabilities, unaccompanied/separated children, and GBV survivors. However, incidents relating to property affect men and boys primarily.

The protection environment is also affected by weaknesses in the delivery of basic social services in some areas. Many localities do not have the necessary infrastructure for local authorities to provide social services, such as civil registration, medical management of GBV survivors or psychosocial support to children victims of abuse and violence.

Forced displacement affected traditional leadership and traditional community safety nets leaving the most vulnerable individuals at higher risks. Weakened traditional community support also increases the potential for community disputes, including around allocation and access to lands.

Women and girls continue to be the victims of discriminatory social and cultural practices despite sensitisation by protection actors. Such practices have encouraged negative coping mechanisms, such as early and forced marriage or women turning to survival sex.

Communities organized vigilance committees in numerous localities, encouraged by local authorities, and adopted some practices of metayage as positive coping mechanisms. Criminal behaviours and all forms of exploitation including child exploitation, forced labour and sexual exploitation, unfortunately remain prevalent among the population.

North-West South-West crisis

The population in the North-West and South-West regions continue to face daily violations of their human rights from all parties to the ongoing crisis. In both regions, protection partners estimate that close to 600,000 individuals need legal and physical protection, 88 per cent of which are female. Like in 2021, protection partners do not expect considerable

changes in 2022 in the protection environment, risks, and threats.

The civilian population continues to face regular restrictions of their freedom of movement by all parties; they are caught in regular armed clashes between SSF and NSAGs; and at times directly targeted based on suspicions to either support the Government or separatists. Both regions continued to experience prolonged lockdowns and massive presence of check points that are often associated with intimidation and extortion by armed groups. In 2021, both military forces and separatist groups conducted raids in villages, schools and other public spaces resulting in civilian casualties, physical and sexual violence, as well as extortion and destructions of personal property.

Forced population movements due to the overall insecurity and punctual attacks on villages continued to be reported monthly. Some locations which are highly impacted by violence, are also often areas with no or limited humanitarian access, including for international protection actors. Family separation is a major concern due to the risks it creates, especially for women headed households with no support, children separated from their parents, older people, and people living with disabilities left behind with no care and assistance. Family separation is even more aggravated as people have sought safety and livelihood in neighbouring divisions of the Littoral and West regions.

The protection environment in the North-West is also characterized by recurrent conflicts between local farmers and breeders over natural resources along the Nigerian border, floods, and landslides in the Mezam and Bui divisions in North-West and Ndian in South-West. Forced movements created by these two phenomena increase vulnerabilities of the affected population and put additional pressure on the already insufficient humanitarian protection response.

The monitoring of protection incidents in 2021 showed that one of the main threats to the civilian population continue to be individual killings, with close to 600 civilians killed. These include killings

of youth suspected to support the separatists, of civilians caught in crossfire during attacks on villages, of family members of (suspected) separatist fighters, of members of the public administration including teachers, and of those accused of not respecting the curfew and lockdowns imposed by the separatists. In addition, criminality is on the rise including kidnappings for ransom, leading to killing of those refusing to pay.

Lack of civil documentation was another main cause of protection incidents in 2021, especially of arrest, detention and extortion, and continues to prevent access to basic social services. In the multi-sectorial assessment conducted in September 2021, 37 per cent of the population indicated the lack of civil documentation as a key protection concern.⁸⁹ Civil registration centres have limited capacity and coverage, especially in areas where security is volatile, and the current procedures to obtain lost civil documentation are inadequate to the situation of forced displacement in addition to their cost.

Arbitrary arrests and illegal detentions of civilians take place most often based on suspicions to support NSAGs or their presence within communities. In 2021, 1,435 cases of arbitrary arrests and illegal detentions were reported through protection monitors. The capacity of protection actors to conduct regular detention monitoring and provide legal assistance is limited and the phenomenon is largely under-reported.

Abduction is used by NSAGs for demands for ransom, sexual exploitation of women and girls and as a form of punishment for those found in violation of the lockdowns or the prohibition to attend school. In 2021, 179 abductions and abduction attempts were reported, including of children on their way to school.

Physical and psychological violence occurs every day at check points, during raids on the villages, to extract information from individuals suspected to support the separatists, during daily movements. The increasing presence of explosive devices planted by the separatists has caused civilian injuries and deaths. While men and young men are the primary targets of physical violence, the entire civilian population suffers

from psychological violence and mental health risks as the crisis protracts. Protection monitors reported 450 incidents of physical assault, maiming, injuries, and torture in 2021.

Protection partners identified four main perpetrators responsible for the above-described protection threats. These include SSF, NSAGs, State officials, and civilians in specific instances (i.e., exploitation). As per the cases of arbitrary arrest and/or detention, these can be carried out also by community-based vigilante groups.

Entering its sixth year, this protracted crisis durably affects the resilience and livelihood of the population, including IDPs, returnees, and host communities, as well as the deliverance of basic services by Government authorities. The destruction of farms and businesses, the lack of employment opportunities in the place of refuge, and the lack of education opportunities created additional vulnerabilities and aggravate the already described protection environment. It pushes populations to adopt negative coping mechanisms such as child labour, forced labour, survival sex, and early marriages. While protection actors try to build their response on the existing capacities of the community, the long-going conflict affects the community structures and community safety network leaving the most vulnerable people without support.

As the crisis endures, many State structures have limited public services to specific locations at regional and/or divisional level, further restricting affected populations' access to civil, legal, judicial, livelihood, and other basic services. People living with disabilities face greater challenges accessing available services, such as disability cards.

While protection incidents are found to affect equally all displaced populations, some profiles seem to be at heightened risk to be negatively impacted. People living with disabilities and older people have lost their community support due to the crisis and benefit from limited and inadequate basic services. Students and teachers are frequent targets of NSAGs, with attacks on education facilities, abduction, and killings. Youth

are deprived from education opportunities and have developed negative coping mechanisms including joining NSAGs. Traditional leaders have started to be targeted regularly, weakening the resilience and capacity of communities. IDPs in urban settings are exposed to higher costs of living, while those settled in rural areas have limited access to basic services.

The national legal framework on protection of displaced persons is inadequate and the domestication of the Kampala Convention is critical to equip the competent authorities in their role as first responder for the protection of affected populations.

Littoral

The insecurity and human rights violations in the North-West and South-West regions resulted in people seeking safety in the bordering West and Littoral regions. In 2021, 81,298 individuals moved to the Littoral region,⁹⁰ where protection actors estimate 31,365 people will need protection assistance in 2022. The assistance provided so far by the Government and humanitarian actors has been occasional, limited, and unable to cover all protection needs.

Although cohabitation between hosts and displaced persons is generally perceived as peaceful, and the security, socio-political, and economic environment is stable in the region, cultural differences between displaced and host communities are now used to stigmatise and marginalise IDPs settling in the region (language barrier, urban versus rural habits, etc.). Competition over limited resources led to social tensions and conflicts between IDPs and host communities. Indeed, the concentrated presence of IDPs in the Moungo and Wouri divisions puts increased pressure on already limited resources and public services weakening the social cohesion. The spread of stereotype or hostile statements on social media where regulation is low, contribute to the stigmatisation of IDPs. Consequently, IDPs tend to withdraw themselves from the host community's social life.

Furthermore, forced displacement to the region significantly exacerbated the pre-existing issue of

lack of civil documentation among the population due to disruption of public services and inadequate procedures in place. Lack of legal documentation is identified as the main protection concern in the Littoral region and 38 per cent of IDPs lack documentation, either because they lost them in circumstance related to the crisis or never applied for it.⁹¹ As a result, IDPs are further exposed to police harassment and extortion. Legal procedures to recover or obtain documentation has proven inadequate in situations of forced displacement, affecting access to basic services and formal employment. In addition, due to the high cost of living in urban settings, IDPs in the economical capital of Douala are living in precarious conditions (house rental in risky places and/or areas prone to flooding, illegal occupation of public and unfinished buildings, children not enrolled in school, high level of unemployment) exposing them to higher risks of exploitation and abuses.

The situation of displacement coupled with difficulties to access identity documents increase the risk of arbitrary arrest and illegal detention of IDPs in the Littoral region, which do not comply with national criminal procedure. Internally displaced men and boys are most at risk of arbitrary arrest and unlawful detention, experiencing excessive use of force during arrest or held in custody beyond the legal time limits.

Due to the financial constraints and the lack of documentation, IDPs may find themselves obliged to undertake informal and dangerous income-generating activities, which exposes them to exploitation. In 21 per cent of villages assessed, economic exploitation was cited as the top three protection issue.⁹² IDPs are frequently paid lower wages than their counterparts in the host community and are hired for low-skilled, precarious, or micro-employment jobs, preventing them from covering their basic needs.

FAR NORTH REGION, CAMEROON

IDP family relocated after flood in Logone et Chari

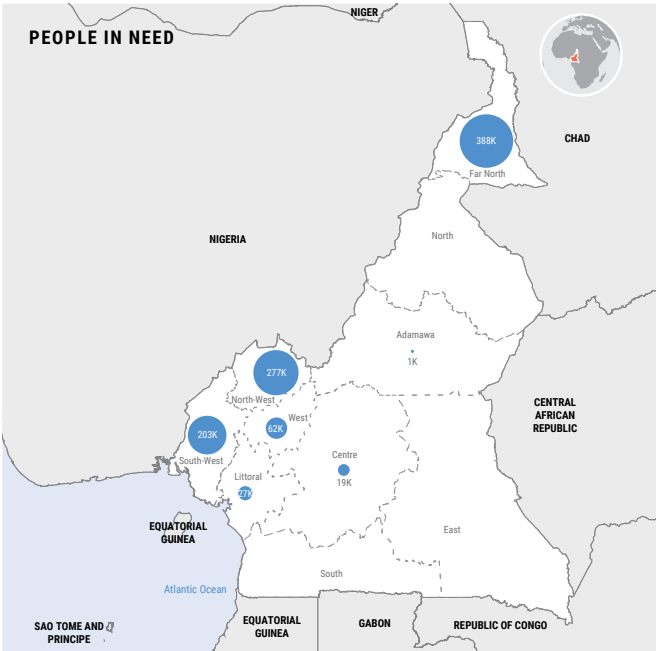
Photo: OCHA/Bibiane Mouangue



3.1.1

Child Protection

PEOPLE IN NEED	WOMAN	CHILDREN (<18 YEARS)	ADULTS (18-59 YEARS)	ELDERLY (>60 YEARS)
977k	52%	91%	9%	0%



Due to frequent attacks by NSAGs, children are regularly exposed to violence, the risk of kidnapping, abduction, maiming, exploitation, and killing, in addition to consequences of negative coping mechanisms adopted by their family, such as child marriage. The mental health of children and caregivers is at stake with children suffering from post-traumatic disorders, emotional distress, and are affected by the fear and tensions among members of communities impacting on social cohesion.

Children suspected of having been associated with NSAGs continue to suffer from stigmatisation and the presence of returnee children further strains limited community resources.

Many schools remain closed, some destroyed by NSAGs, and others occupied by SSF, with some military personnel acting as teachers to fill in the gap. Long distances to the next school and the fear of being kidnapped or violated on the way to school, contributes to the number of children not attending school. The absence of school infrastructure also affects the capacity of child protection actors to identify child victims of violence and abuse, as school is expected to provide a protective and safe environment. Due to limited financial means, many children cannot go to school, with girls prone to marriage before tuning 18 based on traditional practices and financial necessity. Several other children are sent to koranic schools by their parents unable to afford Government schools.

Lake Chad basin crisis (Far North)

The child protection environment in the Far North region continues to be affected by limited access to basic social services in most zones of intervention. Social centres are rare, social workers are unevenly positioned in social services or absent in intervention zones, with some centres even closed because of insecurity and armed attacks. Existing community-based child protection mechanisms in areas with IDPs and out-of-camp refugees are inadequately resourced and affected by forced displacements and insecurity. In 2022, child protection actors estimate that 388,000 children and youth, girls, and boys, will need child protection services, including 90 per cent of boys and girls below 18.

Access to civil status services and birth registration is difficult due to long distances to primary level civil status centres, uneven repartition of secondary civil registration centres within the communities, absence, or lack of civil status services in health facilities, insufficient mandated staff, and lack of access to transcribers. Also, high numbers of undeclared births, high costs of birth certificates, and long judicial procedures all weaken the birth registration process.

Clay houses in marshy areas expose families and children to the consequences of floods. Also, the proximity of tents and promiscuity in certain sites occupied by IDPs expose children to GBV.

In addition, intertribal conflicts and fighting over the control of land and cattle drive displacement and increase insecurity in the Logone et Chari division, exposing children to potential risk of displacement, family separation, abuse, and exploitation.

Adolescents and adults face arbitrary arrest and suffer long stay in detention centres due to the absence of birth certificates and lack of age determination by a certified medical doctor. Also, some adolescent boys indulge in substance abuse as negative coping mechanism, in part due to the absence of education, learning opportunities, and income generating opportunities.

North-West South-West crisis

The crisis in the North-West and South-West regions continues to have devastating effects on the population, especially boys, girls, and their caregivers. According to the latest displacement figures, some 358,000 individuals are displaced in both regions due to insecurity and violence; among those, 215,000 are children below 18 years, or 60 per cent of the total displaced population.⁹³ In 2022, child protection actors estimate that 480,000 children and caregivers will need assistance, similarly to 2021 (432,000 children and 48,000 caregivers). Adolescent and children with specific needs remain the main category at risk among all affected displaced and host community groups, especially in rural areas and hard-to-reach areas.

In the North-West region, all seven divisions are facing child protection risks, while in the South-West region, child protection issues are most prominent in the Manyu, Meme, Fako, and Ndian divisions.

The root causes of child protection issues lay in the education and the judicial systems. Education suffered most as many schools are closed and/or occupied by parties to the crisis, denying children their right to education and removing a key component of their protective environment. During confrontations, some of these schools have been destroyed or education personnel fled. Access to justice amid armed violence is precarious and the necessary reforms required to put in place a child-friendly justice system cannot take place in such an instable environment. Older children and youths regularly encounter the judicial system as minor offenders or after arbitrary arrest on suspicion of belonging to a NSAG.

Most localities have had their councils moved from the villages to central towns or were abolished. People remaining in those villages cannot access services, such as the registration of civil documents such as birth certificates for children or identity cards for youths. Some birth certificates may have been lost during fires following attacks on their or lost during flight to safety. As a result, many children do not have birth certificates.

Children are particularly exposed to different types and forms of protection risks. Most importantly, trauma and the psychological impact of violence is directly affecting their emotional and cognitive development. Specific data pertaining to children living with disabilities is not available, but they remain one of the most vulnerable categories at risk due to the disruption of basic social services.

Family separation is a major threat in this crisis. Given the fact that education is one of the contested issues, resulting in the closure of many schools, many families have opted to send their children to urban areas to access education while they remain behind. As they become unaccompanied or separated, they are exposed to several child protection risks. In a constrained economic environment, households who

hosts such children, may focus more on their own children while neglecting those that came to live with them. Unaccompanied and separated children face the additional threat of trafficking. Children are also separated from their families during flight following attacks on their homes.

Among displaced children, 264 unaccompanied children and 1,203 separated children were reported in 2021 with little alternative care solutions in place.

Most children who are denied the right to education resort to negative coping mechanisms. They engage in child labour, such as underwater sand harvesting, street hawking, and working as farm hands in agricultural plantations for economic purposes. Some engage in survival sex, others are coerced into early marriage, while some decide to join NSAGs.

NSAG members often take adolescent girls as wives, followed by early pregnancies. Young boys face the threat of recruitment into armed groups, while those exiting face the risks of reprisals by these groups and detention by SSF. Youths, especially boys, also are arbitrarily arrested on suspicion of association with NSAGs.

Identified protection threats also takes the form of precocious proximity to sexuality brought about by overcrowded shelters and lack of privacy, leading to sexual harassment, incest, and rape. Some older children, especially girls, also engage in survival sex. Children face threats of physical violence within households, on the streets, and in host families.

Littoral

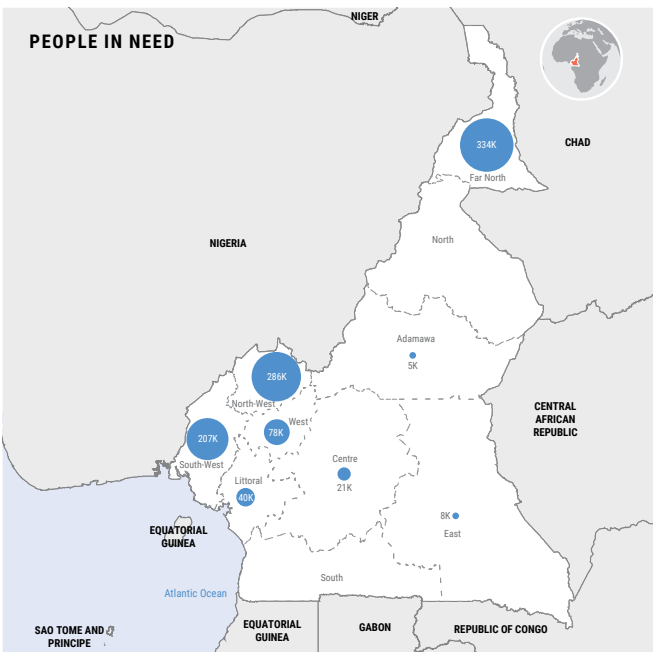
In the Littoral, among the 81,000 displaced persons in the region, 59 per cent are children below 18.⁹⁴ In 2022, child protection actors estimate that 27,000 children and caregivers will need protection assistance and care, especially in the Wouri and Mounjo divisions.

The main protection threats faced by displaced girls and boys are sexual violence, including sexual abuse, exploitation, survival sex, early and forced marriages, especially for girls, child labour and economic exploitation of children, child recruitment by NSAGs, especially for boys; and the lack of civil documentation.

3.1.2

Gender-based violence

PEOPLE IN NEED	WOMAN	CHILDREN (<18 YEARS)	ADULTS (18-59 YEARS)	ELDERLY (>60 YEARS)
979k	94%	55%	39%	6%



Lake Chad basin crisis (Far North)

The layering of crisis in the Lake Chad basin particularly exposes women and girls to the risk of sexual violence, physical violence, forced marriages, sexual exploitation and abuse, and denial of resources, opportunities, or services. These different threats are accentuated by discriminatory socio-cultural norms towards women and young girls and insufficient gender-based programming in humanitarian interventions. The crisis has also affected the delivery of social services in most of the localities, including services promoting protection and empowerment of women and girls. The information management system for GBV incidents showed that incidents of denial of resources and opportunities, as well as physical violence, were the most prominent threat

to women and girls' protection and safety. Close to 75 per cent of incidents of physical violence were committed by intimate partners.

In 2022, GBV actors estimate that 335,000 individuals will need GBV intervention in the Far North, including for sensitisation, prevention, and response. Among them, 35 per cent are women and 59 per cent are children below 18.

During forced displacements, men, community leaders, and sometimes family members deny women access to resources, economic assets, learning or livelihood opportunities, or health or other social services. In 2021, over 95 per cent of reported GBV incidents concerned women and girls, highlighting the vulnerability and risks faced by this category of the population. Women living with disabilities, single mothers, older women, widows, and female heads of households are the population groups most exposed to risks of gender-based violence. Incidents against men and boys are traditionally under-reported.

In addition to the armed clashes and intercommunal violence, GBV is also a direct consequence of the forced displacement of populations. Indeed, families are often forced to live in proximity within the host community, creating a risk for sexual exploitation, sexual violence, and assault, especially against young girls. Consequences of such incidents might include assault and battery, death, obstetric fistula, transmission of sexually transmitted diseases, and unwanted pregnancies.

The permanent insecurity in the Lake Chad basin, and its effects on public infrastructures, has considerably impacted access to basic social services, in particular civil documentation for women and girls, which prompted the discrimination of girls in access to livelihoods and education, and promotes early marriages.

To strengthen resilience and empower women, group activities, in particular community fields, learning small trades, the development of income-generating activities, recreational activities and social cohesion have gained ground in communities. On the other hand, the decrease in economic means and the destruction of social support infrastructure have led many women and girls to opt for negative coping mechanisms, in particular prostitution and survival sex in the centres of Maroua, Kousséri, Mokolo, and Mora.

North-West South-West crisis

In 2022, protection partners estimate close to 500,000 people in need of GBV interventions, including prevention and response.

Key gender-based violence threats include first, and foremost women and girls being denied resources and opportunities, including seizure of lands and properties after their husbands or fathers have been killed or disappeared. There are no precise figures as to the number of incidents of denial of resources related to housing, land, and properties, but GBV actors estimate that it might be close to 60 or 70 per cent.

Sexual violence is perpetrated against women and girls by armed groups, that use their power to harass, exploit, and rape women and girls. In 2021, the GBV actors reported some 12,634 incidents in both North-West and South-West, including 34 per cent against children and 23 per cent against women living with disabilities. Sexual violence against men and boys is a major concern, however statistics remain very low, and the phenomenon is largely under-reported; 2021 data showed that at least 14 per cent men and boys have survived sexual violence.

Negative coping mechanism such as child marriage is being practiced by some IDP parents to compensate for the loss of livelihood; parents give their girls away for marriage to benefit from shelter, food, to pay for hospital bills, or settle their debts. In 2021, GBV actors reported 33 per cent of instances of early marriages in both regions. On the other hand, survival sex is practiced by IDP girls and women to meet their basic needs including shelter in host communities.

In 2021, intimate partner violence against women and girls has been a major concern with an average of 70 per cent of cases of physical and emotional violence being perpetrated by partners and/or family members, mostly men. Within the affected communities, men who lost their jobs and can no longer provide for their family, perceive they have also lost their attributed social role and may transfer their frustration on female family members through beatings and harassment.

Physical assault is often committed by both parties to the crisis, during raids on villages or because they accuse women of being mothers to or partners of boys and men engaged in hostilities. Wives of separatist fighters have been arrested and tortured, while separatist groups have tortured girls for dating men from the Government forces. Emotional violence also takes the form of harassing women for allowing their sons to join NSAGs. A phenomenon that was not reported in 2020 is that some girls who get pregnant from members of the fighting parties are being forced by their family members to abort, often in conditions that jeopardize their health and mental health.

Some of the worst physical impacts of gender-based and sexual violence on the affected people include injuries, mutilation, unwanted pregnancies, and sexually transmitted disease. Protection actors also report social and psycho-social impacts such as isolation, rejection, suicidal thoughts, stigmatization, shame, mental disorder, and stress. While women and girls try to cope positively by receiving support from churches and engaging in income-generating activities, negative coping mechanisms remain devastating, including substance abuse and survival sex.

Many women have lost their sources of income as they fled their villages and farmlands, exposing them even further to the risk of exploitation and sexual exploitation within and by the host community, as well as to the risk of trafficking even though the phenomenon is not well documented in relation to the ongoing crisis.

Littoral

GBV in the Littoral region is often linked to the housing situation and to the lack of livelihood and economical means among the displaced population in the Wouri and Moungo divisions. In areas with a high concentration of IDPs, especially in Douala, most landlords have increased rents in the past two years. Consequently, most IDPs stay in overcrowded homes or find hosting arrangements that turn into (sexual) exploitation schemes or forced labour. In such housing conditions, lack of privacy exposes women and girls to sexual violence including assault, rapes, and incest. Recent protection assessments show an increase in the abuse and violence against women and girls, and especially women living with disabilities, due to different vulnerabilities factors.

Medical authorities reported to have received an average of three cases of rape per month in 2021, with victims as young as 5 years old. Most cases occur within the same community and are often concealed due to the fear of stigma and protection of the perpetrator's identity. Stigmatisation by members of the host community causes additional stress and trauma on victims. When abuse is perpetrated by a member of the host community, for fear of repercussions, victims prefer to remain silent. Due to limited access to resources and livelihood, some women and girls succumb to survival sex. This has led to high rate of pregnancies, unsafe abortions, and sexually transmittable diseases among IDP women and girls. They have little information about family planning and are scared to go to the hospital due to stigma, language barriers or lack of identity documents. Financial constraints also prevent them from seeking medical attention.

LITTORAL REGION, CAMEROON

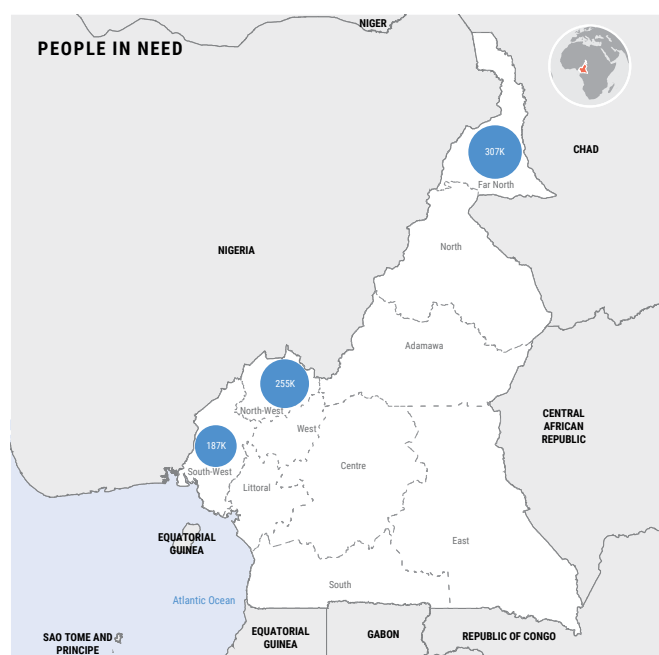
Photo: OCHA/Bibiane Mouanguer



3.1.3

Housing, Land and Property

PEOPLE IN NEED	WOMAN	CHILDREN (<18 YEARS)	ADULTS (18-59 YEARS)	ELDERLY (>60 YEARS)
750k	53%	57%	37%	6%



Pressure on natural resources is the underlying cause to tensions and hostilities related to access to land. There is poor availability of farming and breeding land, especially in areas with high numbers of IDPs. Instances of encroachment and secondary occupation are multiplied due to internal displacement and pendular movements between areas of origin and of refuge.

In addition, farmers have no property deeds as most transactions take place orally through the traditional leadership authority. The traditional leadership itself plays a role in the lack of available farming land as they occupy land. Also, many areas including near the border, are no longer accessible for farming due to the insecurity. Lands are becoming less fertile as farmers can no longer implement alternate agriculture.

Lake Chad basin crisis (Far North)

In addition to an already fragile protection environment in the Far North region, the ongoing crisis is exacerbated by limited access to water and farmable lands, causing regular inter-communal clashes and displacement in 2021. The crisis is characterised by weak public infrastructure and delivery of social services in some localities while they have been destroyed by the conflict in others.

In 2022, actors estimate that 307,000 individuals need HLP assistance, including awareness on rights and obligations, counselling, and individual legal assistance. This includes 53,000 adult women facing discriminatory norms and practices on their access to property.

The Far North region is also defined by a series of discriminatory social and cultural norms against women and girls, including their inability to inherit or enjoy ownership of a land. Regular forced displacements and family separations leave women vulnerable to exploitation and with few choices other than to resort to negative coping mechanisms.

In 2021, one of the key protection threats recorded by protection monitors was the extortion and destruction of goods and personal property (including livestock and real estate) by all parties to the crisis and criminal gangs. Close to 1,100 incidents of extortion of goods and properties were recorded; interviewees highlight impunity caused by the redeployment of SSF from localities to border areas. Traditional owners of goods

and properties (i.e., men) are the most affected by extortion and destruction of properties. Close to 800 instances of destruction of properties were recorded, mainly during attacks on villages.

Military operations to combat NSAGs expelled hundreds of families from their lands to build trenches and the latter are still await compensation.

Forced eviction of IDPs, inadequate housing conditions for IDPs and affected host communities, secondary occupation mainly for those returning to their village of origin and overall lack of security of tenure are reported as key threats faced by affected populations in 2021.

Overall, the protection environment is also affected by weak delivery of basic social services in some areas. Many localities do not have the necessary infrastructure to provide effective access to justice or property documentation. Forced internal displacement affected traditional leadership and traditional community safety nets leaving the most vulnerable individuals at higher risks. Weakened traditional leadership increases risks for community disputes, including around allocation and access to lands, affecting traditional dispute resolution mechanisms.

North-West South-West crisis

In 2021, the populations in the North-West and South-West regions continued to face daily violations of their human rights, including their right to housing, land, and property (HLP), by all parties to the crisis. Both SSF and NSAGs conducted raids in the villages resulting in extortion and destructions of personal property including livestock and real estate.

Insecurity and violence have forced 348,000 individuals to flee their homes within both regions and 384,000 are considered as returnees since the start of the crisis.⁹⁵ Following extortion and destruction of properties, forced displacement exacerbates inadequate housing, insecurity of tenure, and risks of eviction, while returnees struggle at times to recover their home or land.

In both regions, protection partners estimate that 443,000 individuals are currently in need of HLP assistance, including sensitisation on rights and obligations, advocacy with authorities, counselling, and case-management.

The HLP AoR was formalised for the first time in Cameroon at the end of 2021. Monitoring and data collection systems are not yet in place and analysis relies heavily on protection monitoring and expert judgement.

Land grabbing is common and consists of forceful taking of land by SSF, traditional leaders, local authorities, and NSAGs. Households deprived of their land have no other choice than to relocate, especially since the vast majority do not hold any property deed or title, especially as oral transfers of property acts are common practice.

The absence of documentation also leads to illegal evictions from houses and lands, encroachment, and secondary occupation. In many localities where administrative infrastructures have collapsed due to the crisis and traditional leadership is weakened, land disputes are either left to no resolution or solved by NSAGs, regardless of the law.

Returnees struggle to recover their land and housing upon return as secondary occupation is a major preoccupation, with no property document and weakened dispute resolution mechanisms.

In 2021, protection monitors reported close to 2,000 incidents of extortion of property, total or partial destruction of personal property, including livestock and real estate. Destruction and extortion of property are reported each month by protection monitor and despite advocacy with all parts to the crisis, do not find legal remedies. In total, HLP actors assisted 742 cases in 2021.

Furthermore, issues around inheritance lead to gender discrimination in both regions. As their husbands die or disappear due to the crisis, widows struggle to have their rights acknowledged by family members and traditional leaders. Beyond gender considerations, it is

also the failure of the dispute resolution mechanisms that prevent those women from recovering their land. In most instances, widows have no other choice than to relocate to another place.

In addition, IDPs are sometime exploited, with members of the host community, or IDPs themselves, renting out rooms at higher prices, doubling the rent or (sexually) exploiting individuals and families in return for a place to live. The lack of affordable and adequate housing has pushed many families to adopt negative coping mechanisms such as child labour, survival sex, prostitution, etc.

In addition to the weakening of the traditional mechanisms to solve land disputes, judicial authorities in many sub-divisions have left due to insecurity and lack of infrastructure, limiting access to justice. The crisis also exacerbated some form of tribalism that supports land grabbing.

The protracted crisis affects durably the resilience and livelihood of displaced and host populations, as well as the delivery of basic services by Government authorities. Destruction of farms and business, lack of employment opportunities in the place of refuge and lack of education opportunities aggravated existing vulnerabilities and created new ones.

Land grabbing, deprivation of inheritance and forced displacement leave many families without access to their farmland and income. Tensions arise between host and displaced communities, especially regarding land encroachment where farming land is contested.

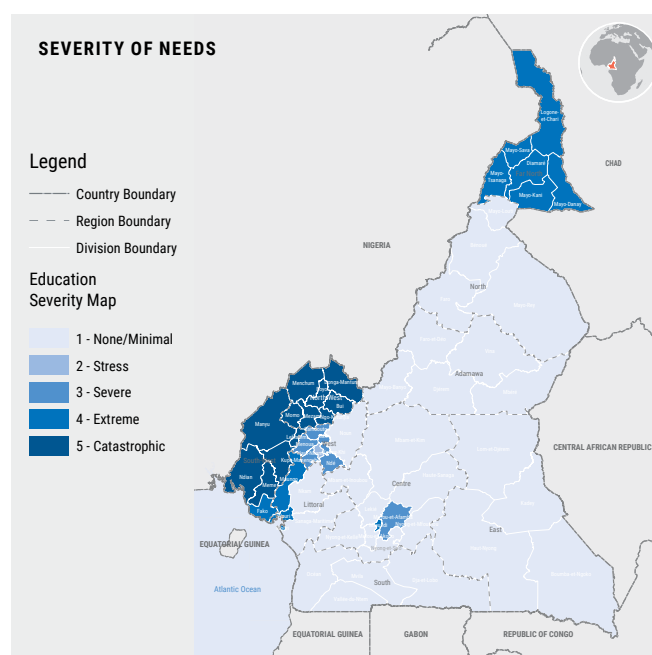
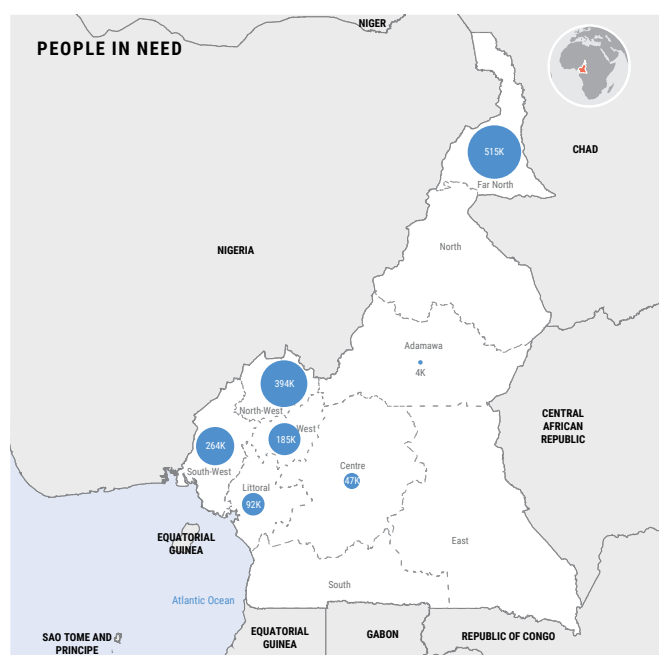
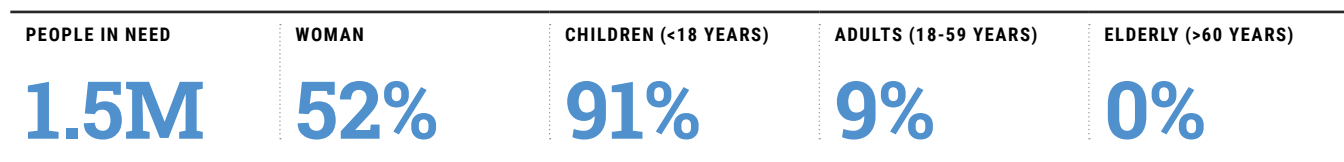
Overall, the national legal framework on protection of displaced persons is inadequate and the domestication of the Kampala Convention is critical to equip the competent authorities in their role as first responder for the protection of the affected population. The national Land Ordinance is dated to 1974 and does not integrate internal displacement nor any safeguarding measures to protect their right to property.

FAR NORTH REGION, CAMEROON

*A house burned during intercommunity clashes in Logone Birni
Photo: UNHCR*



3.2 Education



Cameroon is affected by three simultaneous crises resulting in the need for humanitarian education assistance for over 1.5 million school-aged children in 2022. These needs are caused and exacerbated primarily by violence, threats and attacks on education, population displacement, and the low capacity of school systems and communities to absorb additional populations. These multiple crises share a common denominator: children are in distress and teachers lack the knowledge and skills to deal with the crises affected students. This humanitarian situation has put a strain on local communities and infrastructure. It has increased pressure on resources and basic social services, especially in already poor and underserved areas. The effects of these shocks are affecting the physical and mental well-being, standard

of living, resilience and recovery capacity of people living in Cameroon.

In addition, compliance with COVID-19 preventive measures enacted by the Government (wearing masks, social distancing, daily hand washing, etc.), has exacerbated an already saturated system.

Families lack the capacity to support children's education due to extreme poverty and food insecurity compounded by insecurity and displacement conditions. The introduction of school feeding in selected localities in the Far North, North-West and South-West regions has enabled many children to continue to access educational services.

In areas of high insecurity thousands of schools and community learning spaces have been closed, while schools in a few urban areas operate at less than 60 per cent capacity. This exposes children to idleness and other protection risks such as child marriage, juvenile delinquency, and drug use. Faced with their parents' lack of income, children can no longer attend school and are put to work doing household chores or earning a living. Young and adolescent girls become domestic servants or domestic workers or forced to turn to prostitution. Humanitarian needs are compounded by structural development deficits and chronic vulnerabilities that further challenge the long-term recovery of those affected. Resources used to address insecurity in the Far North, East, North-West, and South-West regions lead to even less Government funding for the development of basic social services. Spending on education has been relatively low compared to other African countries.

Children with disabilities are at higher risk of not having access to educational services and continue to exhibit low enrolment rates at both primary and secondary levels.

Lake Chad basin crisis (Far North)

More than 515,000 crisis-affected school-aged children require assistance in the Education Sector in the three divisions affected by the Lake Chad basin crisis.

According to the statistics of the Ministry of Basic Education (MINEDUB), the average teacher/pupil ratio is 1/149 in the Far North and North. The prolonged displacement and refugee influx have further weakened schools in the Mayo-Tsanaga, Logone et Chari, and Mayo-Sava divisions, and increased the damaging of infrastructure, the situation of overcrowdings, with an average teacher/pupil ratio of 1/178. In these insecure zones, teachers, especially female teachers, were reluctant to be deployed to remote/rural schools. Schools rely on parent-teachers, who often lack the pedagogical skills and motivation. In addition, the payment of parent-teachers adds an additional burden to families that are facing already difficult economic conditions due to displacement.

In these three departments, the closure and destruction of schools and training facilities due to attacks on schools has a direct impact on access to education for approximately 40,000 children.

Due to displacement and the socio-cultural norms, beliefs, and values toward education of some parents, combined with the absence of civil registration offices in crisis zones, most parents do not register their children at birth. As a result, approximately 44 per cent of school-aged children do not have birth certificates and are therefore not allowed to take the final elementary school exams to enter junior high school. In addition, families lack the capacity to support children's education due to the high incidence of poverty compounded by insecurity and displacement.

In some schools in the Far North region, men in uniform, often armed, support children's teaching/learning activities, making the school vulnerable to attacks by armed groups, endangering the girls and boys who attend these schools.

The inter-communal conflict which broke out in the Logone Birni sub-division in December 2021, resulted in dozens of people killed and over hundred injured, and the internal displacement of almost 33,000 people,⁹⁶ putting additional pressure to host community schools.

In addition, the Far North region faces repeated flooding, the impact of which is increasing due to climate change. This recurring annual phenomenon exacerbates the vulnerability of communities and reduces children's chances of participating in learning.

North-West South-West crisis

In the North-West and South-West regions, the entire formal education system is under attack, making it difficult for children and teachers to access educational services.

The North-West and South-West crisis continues to highly impact access to formal and non-formal learning for children who live in the two anglophone regions. Alarming attacks against school staff,

students, and educational premises (gun shooting, killing, arson, and abductions) continued in 2021. Confessional and private schools cater for the IDP students. Children whose families did not have the possibility to displace to safer areas, attend operational schools outside of their communities, and face enormous risks daily on the way to school. Due to 'ghost towns' imposition, children cannot attend school on Mondays.

In the North-West, South-West, as well as in communities in the Littoral, West, Centre, and Adamawa regions, which welcome IDPs from the North-West and South-West, an estimated 462,000 school aged students need humanitarian education assistance.

The displaced school aged population within the North-West and South-West regions amounts to at least 210,000 out whom only 19,650⁹⁷, equivalent to 9 per cent of the IDP school aged population of the North-West and South-West, are reported to be attending formal schools. Through the Education Cluster partners, only 67,200 children are recorded to be receiving non-formal education in emergencies services. This leaves an estimated 123,000 IDPs in the North-West and South-West need access to

education, which adds to the out of school children from the host community.

Out of the total 143,160 school aged population that has been displaced to the Adamawa, Center, Littoral, and West regions, 107,152 (75 per cent) are attending formal education services.

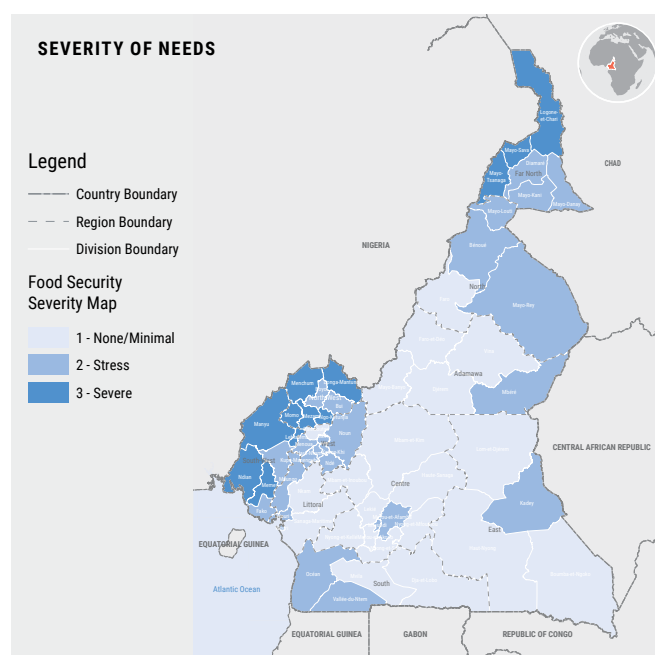
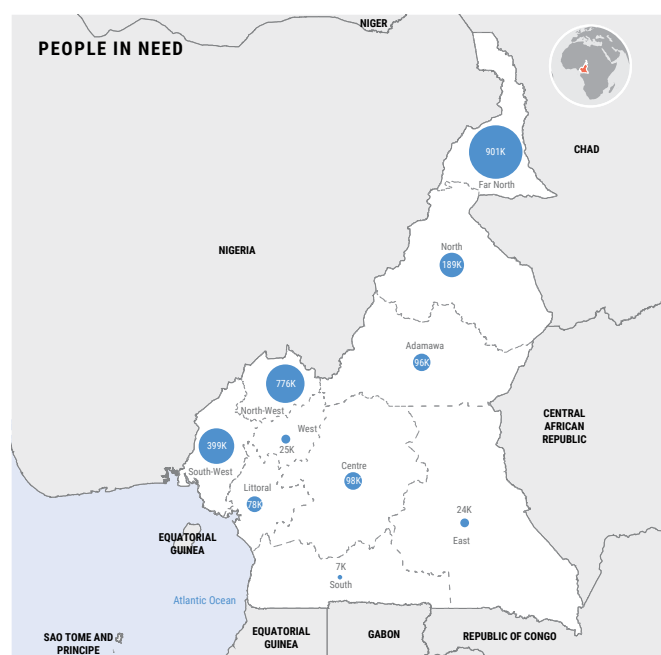
Displaced children struggle to access school due to poverty and social exclusion. Girls, including primary school students, reportedly resorted to prostitution to pay for their education. On the one hand, educational institutions reportedly charge higher fees to IDPs; on the other hand, educational structures in these areas have difficulty including IDPs with an average student/classroom ratio of up to 200 children. In addition, because the host towns are French speaking, the situation of displaced persons and the social cohesion are often difficult. IDP hosting schools in Littoral, West and the urban areas of North-West and South-West have stretched capacity, poor sanitation, and increased risks of COVID-19 transmission due to overcrowded situations.

3.3

Food Security



PEOPLE IN NEED	WOMAN	CHILDREN (<18 YEARS)	ADULTS (18-59 YEARS)	ELDERLY (>60 YEARS)
2.6M	52%	54%	41%	5%



In Cameroon, according to the result of the October 2021 Cadre Harmonisé analysis, 9 per cent (2,430,110 people) of the total population are in food insecurity phase 3 and 4, resorting to crisis or emergency coping strategies to secure household level food security. Large disparities are observed between the regions. Food insecurity is highest in the regions that are affected by violence and climate hazards: 29 per cent of the population of the North-West, 20 per cent of the population of the South-West and 16 per cent of in the population of the Far North are food insecure.

Although agricultural and pastoral production for the 2021 season remained globally relatively satisfactory in Cameroon, the persistence of civil insecurity in the North-West and South-West regions, the continuation

of attacks by NSAGs and inter-community conflicts in the Far-North region and the presence of refugees in the eastern regions continued to disrupt the agricultural season throughout the country. Given the impact of all these elements in these crisis-affected regions, agricultural production will not cover food needs and it is highly likely that the upcoming lean season will be more severe than usual in these regions, particularly the Far North.

Rapid Response Mechanism (RRM), as well as WFP and FAO Food Security Sector assessments, reported an increase in food insecurity and deterioration of livelihoods because of multiple population displacements, but also the continued deterioration

of livelihoods that the economic sector in the crisis regions suffers year after year.

Available data shows that the number of new COVID-19 cases, hospitalisations, and deaths is increasing. Restrictions and fear of infection continue to slow the business environment, disrupting daily income opportunities (petty trade and casual labor) for poor urban households and limiting income-earning capacity. On the food intake, 14.8 per cent of households in Cameroon have poor or limited food consumption and are beginning to implement negative survival strategies, such as a reduction in the number of meals per day and the increased consumption of non-preferred foods. The situation is precarious in the North-West and South-West, which is plagued by a socio-political crisis, and in the Far-North, Littoral, and West regions, where IDPs are putting pressure on household stocks. In the North-West and South-West regions, 40 per cent and 47 per cent of female-headed households are respectively food insecure, compared to 23 per cent and 39 per cent of male-headed households.

Lake Chad basin crisis (Far North)

In the Far North, in addition to the impact of the Lake Chad basin conflict, inter-communal conflicts caused by competition over scarce resources, such as water and agricultural land livelihoods activities, has been exacerbated by the impact of climate change.

Agricultural production has dropped in the Logone et Chari division due to reduced rainfall. Furthermore, the limited production was looted in some areas during the intercommunal clashes in December 2021, rendering the livestock situation more precarious in these locations.

In the Far North, high staple grain prices are further aggravating food access for poor households, particularly for those affected by the conflict in the Logone et Chari, Mayo-Sava, and Mayo-Tsanaga divisions, who are switching to sorghum and maize because of poor harvests. Wholesale sorghum prices in the reference markets are expected to average 20 to 25 per cent above the five-year average from March

to May despite recent Government restrictions on grain exports.

More poor households than usual are expected to be in “crisis” (phase 3) from March and through the lean season until August 2022 due to rising commodity prices in a context of high market dependency and low purchasing power. Furthermore, reduced rainfall has led to drought and a reduction of agricultural production while granivorous birds have destroyed a considerable amount of off-season crop in December 2021.

According to the analysis of Cadre Harmonisé, food insecurity will affect 901,042 persons (20 per cent of the total population) with certain disparities between the divisions, with the divisions affected by the Lake Chad basin conflict the ones with the highest percentage of people estimated to be food insecure from June to August 2022: 351,058 persons in Mayo-Tsanaga (34 per cent of the population), 229,884 persons in Logone et Chari (32 per cent), and 154,398 persons in Mayo-Sava (30 per cent).

North-West South-West crisis

Violence continues in the North-West and South-West regions, leading to protests and social unrest. In the crisis-affected regions, which have experienced six consecutive years of reduced agricultural production compared to the five-year average, household food stocks are below pre-crisis levels. Most poor households that still have stocks of staple foods have enough to support only minimally adequate food consumption for up to one month. The stocks will last three to five months less than in pre-conflict years. In the Momo, Lebiallem, Meme, and Menchum divisions, which are most affected by food insecurity and where production was lower than in other divisions and compared to the five-year average, poor households exhausted their stocks shortly after harvest in October, four to five months earlier than usual, and are therefore entirely dependent on food from the market.

In most reference markets in the North-West and South-West regions, staple food prices remain above seasonal averages, and are rising as households

deplete their stocks of produce and become increasingly dependent on the market. Cassava tuber prices in most reference markets in the South-West have been generally stable since the harvest began in September, declining slightly by about 4 per cent between October and December. The supply of local parboiled rice in most markets increased after the November and December harvest, although production remained below pre-conflict levels, increasing demand for imported rice above average. Due to continued high global transaction costs, imported staple food prices generally remain above the five-year average, but like levels of 2020.

According to the analysis of Cadre Harmonisé, most of the divisions of the North-West and South-West regions, 8 out of 13 divisions, remain in the food insecurity phase crisis. 755,959 persons, corresponding to 29 per cent of the population of the North-West and 398,702 persons, corresponding to 20 per cent of the population of the South-West are considered food insecure.

FAR NORTH REGION, CAMEROON

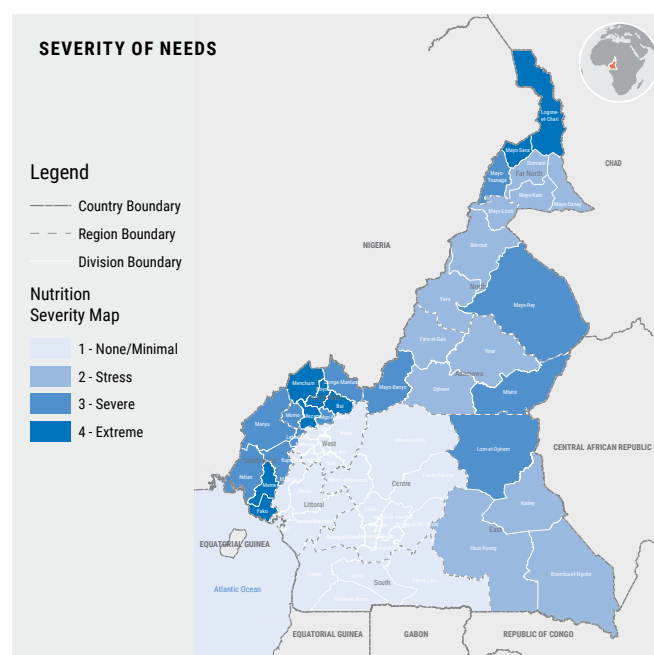
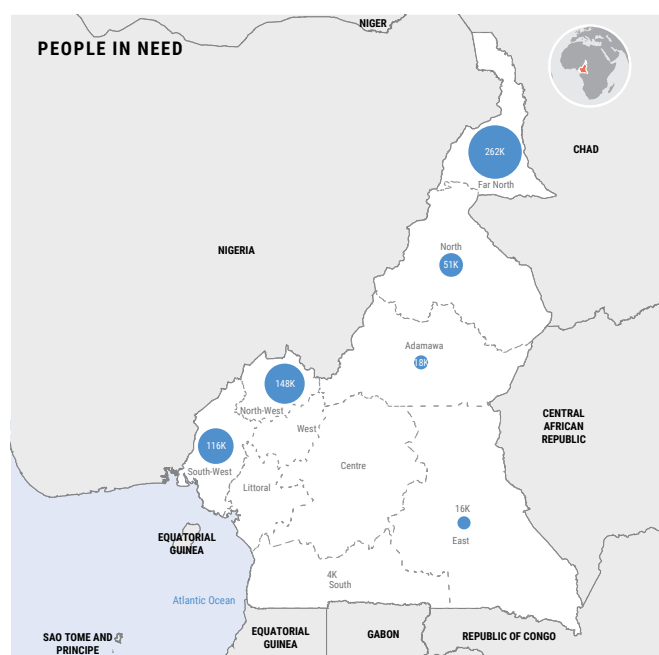
Photo: OCHA/Bibiane Mouangue



3.4 Nutrition



PEOPLE IN NEED	WOMAN	CHILDREN (<18 YEARS)	ADULTS (18-59 YEARS)	ELDERLY (>60 YEARS)
611k	64%	75%	25%	0%



Regions affected by the humanitarian crises in Cameroon are characterised by the stagnating prevalence of acute malnutrition (5.9 per cent in the Far North, 4.5 per cent in the East, and 4.8 per cent in the North) and high rates of stunting (over 35 per cent in the Far North and North and over 30 per cent in the East and Adamawa).⁹⁸ Available studies do not show significant differences of the nutritional status of boys and girls. The micronutrient deficiencies (57 per cent of children and 40 per cent of women of child-bearing age with anemia), also lead to an increased risk of death among the affected population and among vulnerable groups. In protracted crises, like in Cameroon, the factors responsible for malnutrition are exacerbated and highlight fundamental structural problems that trap people in a state of constant

precariousness. It helps explain why emergency situations resulting in alarming increases in acute malnutrition, regularly arises, and why chronic malnutrition rates remain unacceptable despite aid assistance.

Protracted displacement crises have a negative impact on individual nutritional status, particularly among vulnerable population groups, including children under 5, pregnant and lactating women and girls, adolescent girls, older people, and people with disabilities. Peoples' lives and livelihoods are affected by limited access to food and health care in many ways:

- Families lose members, are forced to migrate, and are separated from their relatives and supportive networks, adults are traumatized or too busy trying to cope with the crisis to provide support to spouses or children.
- Food security is undermined by conflict: productive activities are disrupted, food stores are destroyed or looted, livestock is stolen, access to markets is reduced and prices increase.
- Reduced access to food results in changes in feeding practices (in particular, reduced consumption of vegetables, fruits, and animal-source foods), food preparation and food allocation within households. Nearly one-third (32.4 per cent) of households in Cameroon have a poorly diversified diet, more so in Far North (39.1 per cent) and North-West (36.7 per cent) regions.⁹⁹
- Health services as in Logone et Chari and the South-West and North-West are no longer available or used. The adverse impact of the crises in the Far North, North-West, and South-West on access to health care remains high. In the South-West, it is estimated that 35 per cent of health facilities remain non or partially functional.
- In crisis situations where food is in short supply, women and girls are more likely to reduce their food intake as a coping strategy in favor of other household members. This can contribute to under-nutrition among women and girls.
- Women often face constraints in accessing humanitarian services, including food, because of insecurity, cultural discrimination, and limited mobility.
- Women, especially those who are pregnant or lactating, could be disproportionately affected by under-nutrition due to their increased physiological requirements. Teenage pregnancy can lead to poor health and nutritional status for both the baby and the mother. In crisis affected regions, more than 15 per cent of the women of reproductive age are at risk of malnutrition or malnourished.¹⁰²
- While remaining the main caretakers of children and other dependents within a household, women take on additional activities to support household food security, especially in situations where male, formal heads of households are absent. This often leads to disruption in infant and young child feeding practices and reduced caring capacities. In the North and South-West regions, 40 per cent and 47 per cent of female-headed households, respectively, are food insecure, compared to 23 per cent and 39 per cent of male-headed households, respectively.¹⁰³
- Single men and boys separated from their families can be at risk of under-nutrition if they do not know how to cook or access food distributions.

Population groups affected by the crises

Girls, boys, women, and men face different risks related to the deterioration of their nutritional status in emergency contexts. These different vulnerabilities are related both to their differing nutritional requirements and socio-cultural factors related to gender.

The needs of infants and young children from birth to two years differ from those of other age groups, as the nutritional needs of infants and young children are different, while the texture of foods and the frequency of feeding must be adapted to their capacity to chew and the size and maturity of their digestive system. Optimal nutrition and health care of both the mother and infant during the first 1,000 days (the window of opportunity) of an infant's life are closely linked to growth, learning potential, and neurodevelopment, in turn affecting long-term outcomes.¹⁰⁰

How do gender issues affect nutritional status?¹⁰¹

The above-mentioned elements, together with the fact that women have less access to assets and resources, and receive lower salaries, while their domestic work burden stays the same or increases, often result in their increased vulnerability. In the worst scenarios, limited opportunities leave many women and girls with untenable options for their own and their families' survival, including transactional sex in exchange for food and basic commodities, and early or forced marriages. GBV is the most extreme manifestation of gender inequality and a fundamental human rights violation.

Impact of disabilities on nutritional status

- Children with disabilities are more likely to be malnourished as malnutrition can cause disabilities and disabilities can also lead to malnutrition, creating a cycle.¹⁰⁴
- Children with disabilities may become malnourished due to difficulties swallowing and feeding, frequent illness, difficulties absorbing nutrients, caregiver's lack of knowledge on feeding and neglect.¹⁰⁵
- Malnourishment can also result from stigma and discrimination. Mothers may be encouraged to not breastfeed their infants with disabilities, and children and adolescents with disabilities may be fed less, denied food, or provided less nutritious food than siblings without disabilities.¹⁰⁶

Older people who suffer from chronic diseases are mostly impacted by limited availability and disruptions of access to essential medicines.

Lake Chad basin crisis (Far North)

The results of the latest nutrition survey (with the SMART method) conducted in February 2021 by UNICEF and the Government of Cameroon showed a GAM rate of 5.9 per cent, with 0.2 percent with SAM, at regional level. The Far North had one of the highest prevalence of chronic malnutrition with 36.4 per cent. In addition, a small-scale SMART survey¹⁰⁷ conducted in December 2020 in four health areas highly impacted by population displacement (Bodo, Afadé, Kalafarka et Maltam)¹⁰⁸, showed a GAM rate of 11.1 per cent and SAM rate of 1.8 per cent, tending to support the hypothesis of Sector partners that areas with increased vulnerability factors (such as IDP concentration, low access to health centers and WASH facilities) present higher acute malnutrition rates.

In the Far North, more than 70 per cent of the total IDPs are living in host communities. Over 37 per cent of them are children under 5 and the average number of children per household is 5.8. They are, with the host populations, among the most exposed to the lack of access to drinking water, poor access to health care, hygiene problems, epidemics, and the

consequences of poor harvests which can lead to rapid deterioration of their nutritional status.

In December 2021, a new inter-community conflict broke out in the Logone Birni sub-division and spread to the rest of the Logone et Chari and Mayo-Danay divisions, with implications in Mayo-Sava and Diamaré divisions. As of 4 January 2022, 32,901 people were internally displaced according to RRM, among whom 10,000 children under 5 years and 5,500 women of child-bearing age. First screenings performed in the Domayo-Djarma IDP location has identified 10 children with wasting.

The partners estimate that in 2022, more than 261,000 people, mainly girls and boys under the age of 5 and pregnant or lactating women and girls (PLWG), will be vulnerable in the Far North.

The situation related to the main underlying causes of malnutrition remains fragile with limited access to drinking water, especially for IDPs, refugees, and their host communities. The availability of drinking water is slightly below the minimum emergency water standard: the average amount of drinking water available per person, per day, in the region is 13.5 liters. Only the Mayo-Danay division shows a satisfactory quantity of 20 liters per person, per day.¹⁰⁹ Regarding the health situation, across the region, 22.8 per cent of children aged 6 to 59 months suffered mainly fever (high body temperature), diarrhea, cough, with 29.5 per cent, 28.6 per cent, and 23.3 per cent, respectively.¹¹⁰

The indicators related to infant and young child feeding practices are among the poorest in the country, with an exclusive breastfeeding rate of 50 per cent, a timely introduction rate for complementary foods of 33.3 per cent. The proportion of children aged 6 to 59 months with minimum dietary diversity is 46 per cent, the Minawao camp records the lowest rate, at 14 per cent. It is estimated that a minimum of 118,000 people will suffer from GAM in 2022, including 18,000 pregnant and lactating women and 100,000 girls and boys under 5.

North-West South-West crisis

It is estimated that in 2022, more than 263,000 people will need nutrition services in the North-West and South-West regions. Populations living in remote areas, IDPs in urban/peri-urban areas, and households/communities hosting IDPs are vulnerable to malnutrition since they are exposed to aggravating factors (food insecurity, limited access to water, poor sanitary conditions, sanitation and hygiene services, and morbidity due to overstretching of basic social services).

The nutrition situation in the North-West and South-West regions remains unclear due to the absence of a comprehensive nutrition anthropometric survey using SMART methodology. Proxy data from rapid emergency food security assessments (EFSA) conducted in October 2019 revealed a precarious situation with a proxy GAM of 5.1 per cent and 7.1 per cent in the North-West and South-West regions respectively. Analysis from Mid-Upper Arm Circumference (MUAC) screening data conducted by nutrition partners from July to December 2021, showed a proxy GAM prevalence of 1.5 and SAM prevalence of 0.4 per cent in the North-West and the South-West regions. However, these findings are not conclusive of the nutrition status in the two regions as there could be pockets of high nutrition vulnerability that are not yet identified. Prior to the crisis, the North-West and South-West regions presented vulnerabilities to malnutrition with high rates of stunting of 36 per cent and 28 per cent in the North-West and the South-West respectively. Furthermore, poor indicators on infant and young child feeding practices were reported with 42.5 per cent for the North-West and 58.3 per cent for South-West, of exclusive breast-feeding rates. Proportions of children 6 to 23 months who met Minimum Dietary Diversity (MDD) was reported to be low at 31.8 per cent in the North-West and 20.7 per cent in the South-West. Approximately 40 per cent (44.3 per cent in the North-West and 41.9 per cent in the South-West) of children aged 6 to 59 months were reported to have anemia and with the ongoing humanitarian crisis, it is very likely that the poor situation of MDD has worsened.

Food insecurity, morbidity (malaria, cough, and morbidity), poor sanitary conditions and repeated internal displacement remained accelerated in 2021. The insecurity levels, temporary closure of point of entries, and limited food supply through imported sources are the main drivers for price increases in the North-West region. Poor host households and displaced populations will continue to face acute food insecurity in the crisis (food insecurity phase 3). According to the results of the Cadre Harmonisé analysis of October 2021, 756,000 people in the North-West (29.1 per cent of the population) and 398,700 people in the South-West (20.1 per cent of the population) are in acute food insecurity (phases 3 to 5) from October to December 2021, and 618,700 people in the North-West (23.8 per cent) and 323,400 people in the South-West (16.3 per cent) are projected to be food insecure from June to August 2022.

Access to health care remains a challenge due to insecurity and persistent attacks on healthcare as this constituted a threat to the availability of essential health care to the populations. 81 per cent of the facilities are functional, with the main reasons for limited access to health care for IDPs being the long distance and financial constraints. Furthermore, the weak disease surveillance system has put the population at risk of epidemics with late detection and limited response capacity with repeated pockets of cholera outbreaks reported in the South-West.

With the major drivers of malnutrition (food insecurity, morbidity, poor sanitary conditions, and repeated internal displacement) likely to remain in the same trend in 2022, the nutrition situation is likely to deteriorate. Acute malnutrition of children aged 6 to 59 months is a direct outcome indicator of recent changes in the nutritional status which could be attributed to changes in food security, health, and WASH situations. Up to 18,800 boys and girls under 5 are likely to develop acute malnutrition in the two regions including 3,800 with wasting.

Central African Refugee crisis

The results of the latest nutrition survey (with the SMART method) conducted in February 2021 by UNICEF and the Government of Cameroon showed GAM rates of 4.8 per cent in the North, 3.8 per cent in the Adamawa and 4.5 per cent in the East with 1 per cent, 0.6 per cent and 0.1 per cent of severe acute malnutrition (SAM) for the same regions respectively. For chronic malnutrition, the regions were in an alert situation with rates of 32.8 per cent in the East, 34.6 per cent in Adamawa, and 40.2 per cent in the North.

The nutrition situation of CAR refugees, both in sites and in host communities, have been identified as severe, with a GAM rate of 12.5 per cent and SAM rate of 2.6 and 3.4 per cent respectively, indicating a significant degradation since the last survey in 2016 (8 per cent and 7.6 per cent GAM rate).

In the East, Adamawa, and North regions affected by the CAR crisis, more than 85,000 people,¹¹¹ mainly girls and boys under 5 and PLWG, will be vulnerable in terms of nutrition status. It is estimated that 76,000 children (excluding 10,000 CAR refugees) would need treatment for acute malnutrition in 2022 amongst whom 26,000 boys and girls (excluding 3,600 CAR refugees) will suffer from SAM.

COVID-19 impact

Given the high reliance of low-income households on public services and their limited capacity to lessen consumption, it is likely that despite substantial cross-country heterogeneity, the pandemic's long-term effects will be particularly damaging to the poor and vulnerable.

Income losses can quickly translate into the loss of productive assets, which will be hard to rebuild even in the medium term. The effects of long school closures, disruptions to early childhood development (ECD) services or school nutrition programs, are much higher on poor families and their children.

The impact of COVID-19 exacerbates the vulnerability of populations, especially in urban areas. Indeed, 63 per cent of the households surveyed by WFP and its partners in July 2021 affirm that the COVID-19 pandemic had a negative impact on their income. Among households whose income has been affected by the pandemic, 44 per cent have a food consumption poor or borderline.¹¹²

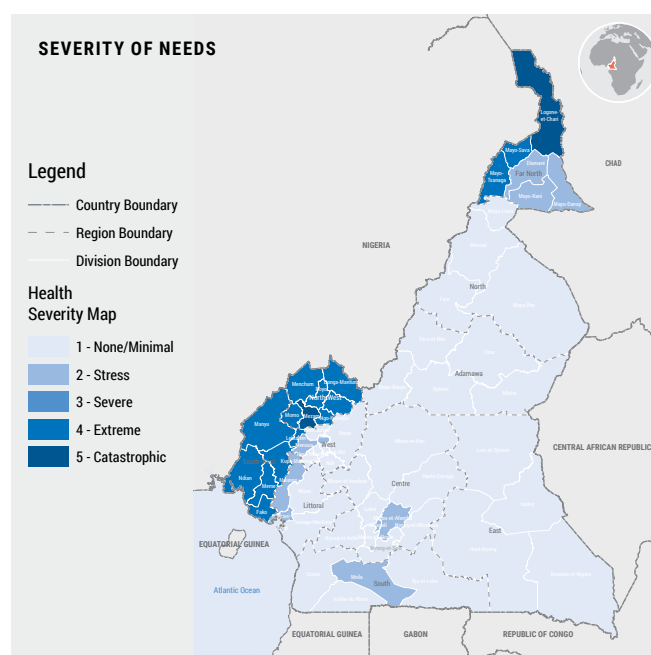
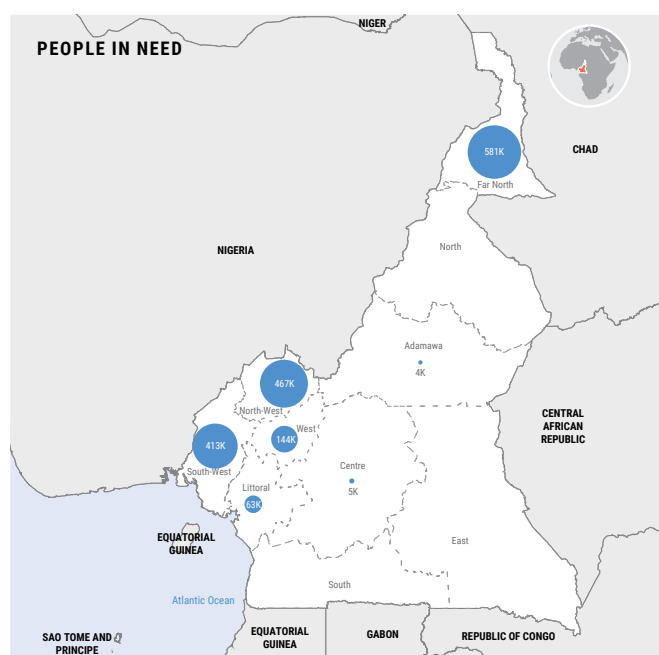
Job and income losses due to the pandemic, which were skewed towards lesser-educated and more vulnerable workers, were associated with increased food insecurity at the household level. To the extent that worsening food security persists through lower incomes and rising food prices and affects diets of children, the pandemic could have long-term effects through the causal impact of early childhood malnutrition on educational and socioeconomic outcomes later in life.¹¹³

The current economic and health crisis has impacted diet quality and food security. This raises concerns about long-term impacts on access to and affordability of nutrient-rich, healthy diets and their health implications. Women and individuals with a low socio-economic status are likely to be the most at risk of food insecurity. One of the major direct effects of COVID-19 on food and nutrition outcomes has been through its impact on employment, income-generating activities, and associated purchasing power.¹¹⁴

3.5 Health



PEOPLE IN NEED	WOMAN	CHILDREN (<18 YEARS)	ADULTS (18-59 YEARS)	ELDERLY (>60 YEARS)
1.7M	53%	57%	36%	6%



Considering the humanitarian crises which continue to affect Cameroon with increasing intensity, Health Sector partners estimate that 1.7 million people will need emergency humanitarian assistance in 2022. The health situation in insecure areas is characterised by a significant reduction of services provided by qualified health personnel, difficult access to essential health care and low vaccination coverage of the affected populations. This context contributes to the resurgence of epidemics such as measles, cholera, and monkey pox.

In addition, the COVID-19 pandemic declared in March 2020 has completely disrupted the health system throughout the country, not only because of the high number of health workers infected or succumbing to

the disease, but also because of the reluctance to use routine vaccines, which, coupled with limited access to essential health care, has considerably increased the vulnerability of the populations in all regions. The response to some of the various epidemics has been delayed. As of 26 December 2021, 109,666 COVID-19 cases including 1,873 deaths have been recorded, with the most affected regions being the Centre, Littoral, West, and North-West.

Measles epidemics have been declared in 30 health districts of the country. The South, Littoral, South-West, and Centre regions are affected by cholera outbreaks. As of 27 December 2021, the Ministry of Public Health reported 499 cases of cholera (40.4 per cent of these cases are women, 17.7 per cent are children under five

children under five years old, 52.5 per cent are women of childbearing age and 6.8 per cent are people over 60 years old) and 18 deaths (40 per cent of these deaths are women, 14.3 per cent are children under five years old, 33.3 per cent are women of childbearing age). The case-fatality rate is 3.6 per cent. More than 80 per cent of all cholera cases were recorded in November and December 2021.

In the Far North, North-West, and South-West regions, insecurity has reduced access to basic health services. Nearly 300 health facilities are no longer functional (destruction or abandonment of health structures by health personnel) in the North-West and South-West regions, while 11 health facilities are no longer functional in the Far North.

Health Sector partners identified four priority needs: care for the physically and mentally injured and traumatized because of the crisis, the challenge of safe deliveries for vulnerable women of childbearing age, equitable access to essential health care considering the specificities of different age and gender groups, and better preparedness and response to epidemics.

Lake Chad basin crisis (Far North)

The repeated attacks by NSAGs have a significant impact on the vulnerability of the affected population, particularly on their physical and mental well-being. Lack of access to clean water, sanitation and health services are the leading causes of cholera and other diseases in the Far North region. In 64 per cent of the villages assessed during the July 2021 MSNA, the displaced population faces problems accessing health services, mainly in the Mayo-Danay, Logone et Chari, and Mayo-Sava divisions, because the health centers are too far away (43 per cent) or too costly (42 per cent), but also because of the lack of health personnel (8 per cent), lack of equipment (8 per cent), and insecurity (5 per cent).

Access to healthcare is even more challenging for women and children due to the traditional patriarchal organization of communities, as the adult male having

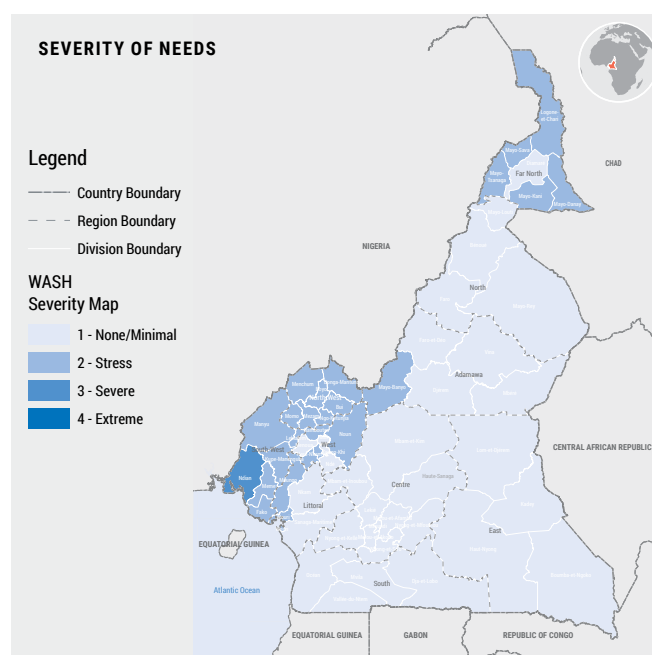
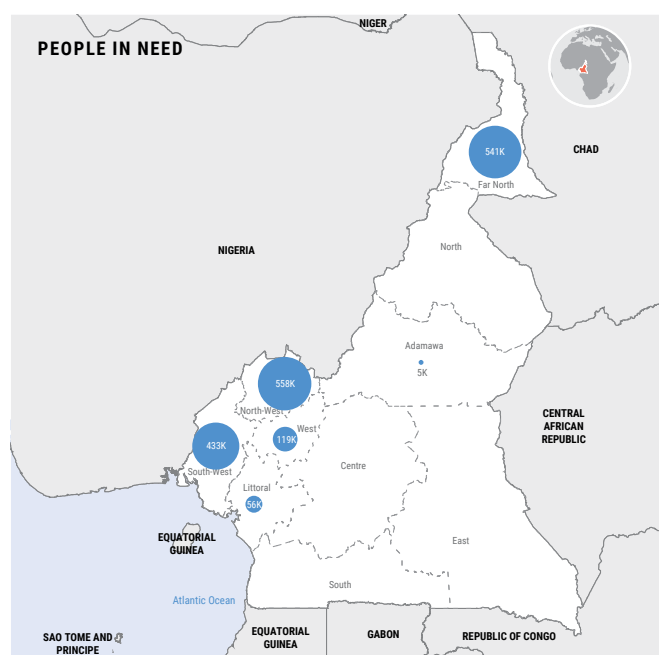
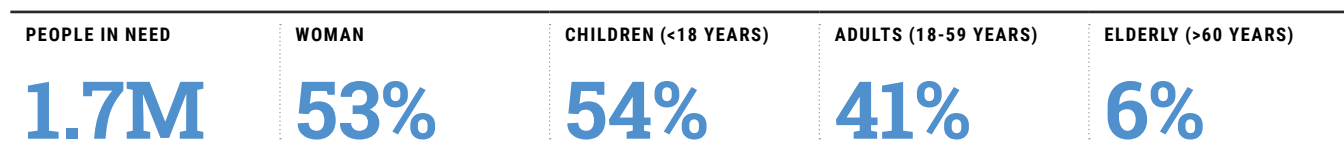
the dominant role in families restricts their access to healthcare.

North-West South-West crisis

The population affected by the crisis in the North-West and South-West regions, has similar needs as the one affected by the armed conflict in the Far-North region, namely reducing the risk and impact of epidemics, caring for the physically and mentally injured and traumatised, ensuring safe deliveries for vulnerable women, and reducing the difficulties of access to essential health care. The main difficulty in the North-West and South-West crisis is the high number of non-functioning health structures. Only 810 out of the 997 health facilities which existed before the crisis broke out are operational as of August 2021. In addition, attacks on health personnel have considerably limited the availability of human resources and technical material in these two regions. In 2021, the South-West region recorded, in addition to the COVID-19 pandemic, cholera, yellow fever, measles, and monkey-pox epidemics. Moreover, emergency vaccination activities should be put in place for pregnant women and target children who did not benefit from routine vaccination activities.

Three key figures

- Number of epidemics declared in 2021 and of high potential threat: Lake Chad Basin conflict (Far North): 3 (Measles, Polio, COVID-19). CAR refugee crisis: 3 (Measles, Polio, COVID-19). North-West and South-West crisis: 5 (Measles, Yellow Fever, Cholera, Monkey pox, COVID-19).
- Cholera case fatality rate in 2021 (Centre 2 per cent, Littoral: 8.3 per cent; South-West: 7.1 per cent. WHO standard (< 1%).
- Percentage of births attended by skilled personnel (Lake Chad Basin conflict (Far North): 26.7 per cent; CAR refugee crisis: 30.8 per cent; North-West and South-West crisis: 32.8 per cent.



Based on the findings of water, sanitation, and hygiene (WASH) monitoring and multisectoral needs assessments carried out in the Far North, the North-West, South-West, Littoral, and West regions in 2021, it is estimated that 1.7 million people need humanitarian WASH assistance in these regions. These assessments also highlighted that access to safe drinking water is among the top priorities of affected populations in the different regions.

Overall, WASH needs in 2022 will remain high regarding access to safe drinking water, rehabilitation of sanitation infrastructures, and awareness campaigns on hygiene promotion.

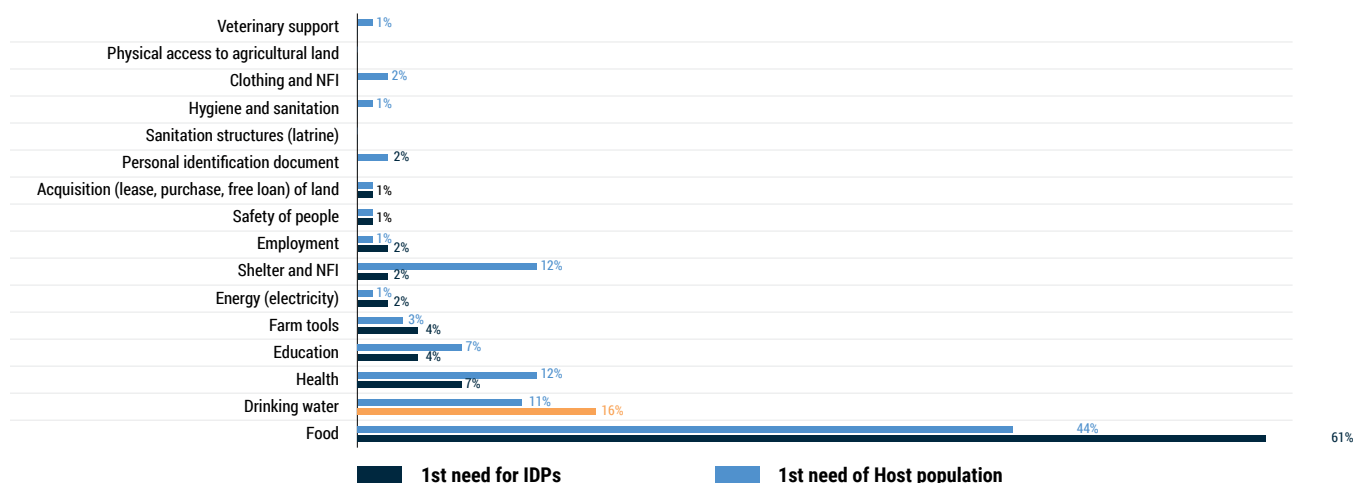
Lake Chad basin crisis (Far North)

In the Far North, of the surveyed population, 16 per cent of the host community and 12 per cent of IDPs reported that their main priority is to access safe drinking water and 61 per cent of the assessed communities reported issues with water quality in their villages. Meanwhile, open wells and rivers or streams are used by 31 per cent and 25 per cent, respectively, of the displaced population as their main source of drinking water. For those who have access to safe drinking water points, some constraints remain, including insufficient quantity of water, long waiting time, non-functional water points, and water points which are inaccessible for people with disabilities.¹¹⁵

With regards to sanitation, in 55 per cent of villages the population practices open defecation. This is of particular concern as there is a high epidemiologic risk and yearly recurrence of cholera in the region. Another concern constitutes to the dignified and safe use of sanitation services, particularly for adolescent girls and women, as 95 per cent of latrines are not separated for men and women.

a main priority. Open holes are the main sanitation facilities used by displaced population. Access to hygiene services by affected households during in the context of COVID-19 remains a challenge: In 44 per cent of the assessed villages, key informants reported that only a few people have access to hand washing facilities.

Figure 1: First top need: percentage by assessed villages in Far North Region, IOM, MNSA 2021



North-West South-West crisis

The North-West and South-West crisis continues to exacerbate the water and sanitation needs of the affected people, including in the neighbouring Littoral and West regions. People are displaced with low or no access to safe drinking water and basic sanitation services. Access to safe drinking water remains the second top need expressed by the affected population in assessed villages in the North-West and South-West, while hygiene and sanitation ranked sixth. The assessment also shows that in 71 per cent of villages, pit latrines without slab are most common and are reported to be unhygienic and insufficient. Also, in 31 per cent of villages, almost all households lacked handwashing facilities at home. In over half of the villages assessed, lack of privacy was a main challenge in accessing hygiene and sanitation infrastructures, affecting mostly women and girls, and increasing the risk of GBV.

The situation in the Littoral and West regions is similar, where in 32 per cent of the assessed villages an urgent need for drinking water was reported, while 6 per cent listed sanitation and hygiene services as

Figure 2: First top need: percentage by assessed villages in Littoral and West regions, OCHA, MSNA September 2021

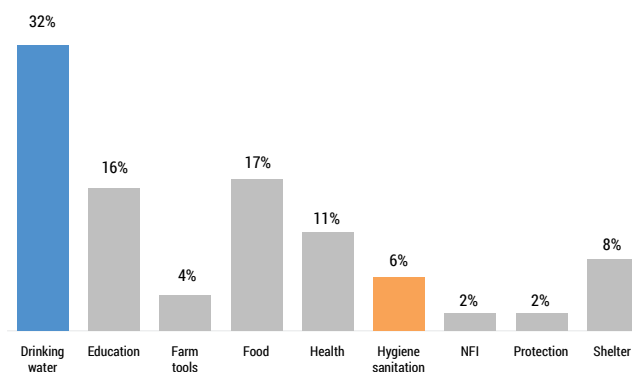
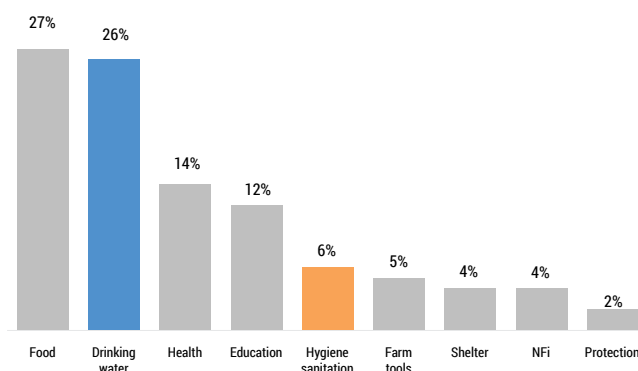


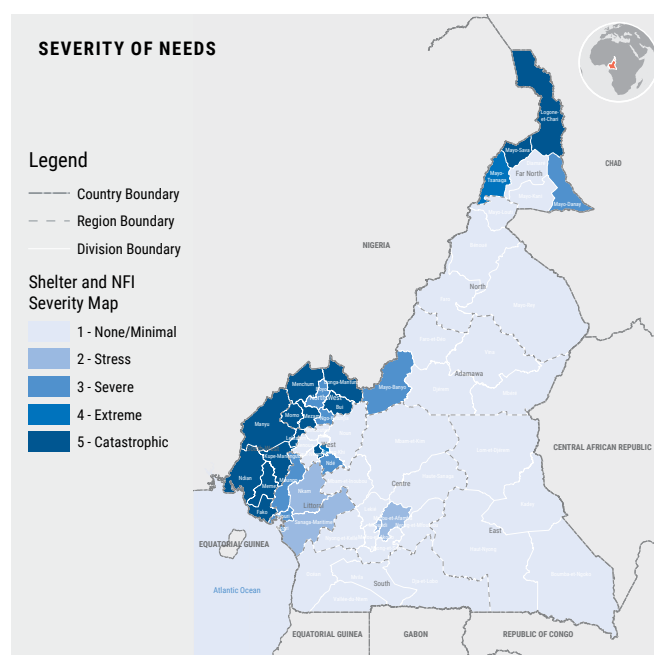
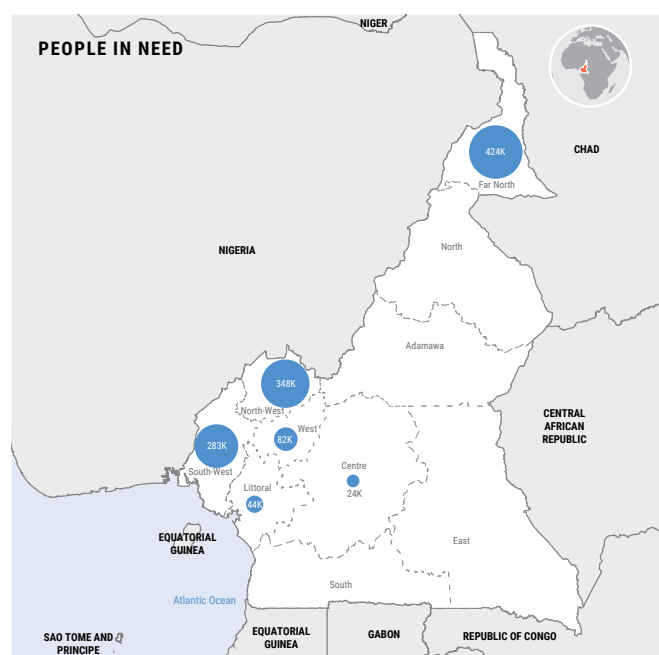
Figure 3: First top need: percentage by assessed villages in North-West and South-West regions, OCHA, MSNA August 2021



3.7 Shelter & Non-food items



PEOPLE IN NEED	WOMAN	CHILDREN (<18 YEARS)	ADULTS (18-59 YEARS)	ELDERLY (>60 YEARS)
1.2M	53%	57%	38%	6%



Insecurity and property destruction are reported by partners' assessments as the most common reasons for displacement.

In 2022, in the North-West, South-West, West, Littoral, Centre, and Far North regions of Cameroon a total of 1,2 million people are considered in need of adequate shelter and essential household items, encompassing menstrual hygiene management (MHM) items.

This figure includes people directly or indirectly affected by the crises: vulnerable people living in areas of hostilities, IDPs, returnees, and host families or communities.

Growing violence forces people to flee and most of them are subject to multiple displacements over the year remaining not only uprooted from their homes but also without any decent alternative shelter to protect themselves and their family over the short term.

During 2021 in the Far North an increased number of people had to leave their homes, while in the North-West and South-West regions displacement figures remain about the same. Displacement, including pendular displacement, continued to lead to disrupted access to markets, loss of household's items and deterioration of shelter materials.

Since 2019, an increasing number of returns were observed to the North-West and South-West. However,

40 per cent returned due to unfavorable conditions, such as problems of integration in the place of displacement, mainly due to lack of infrastructures, access to qualitative basic services, land, livelihood, markets, housing, and social tensions.

High levels of insecurity continue to negatively affect the limited humanitarian space in the North-West and South-West regions, impeding the shelter/non-food items (NFI) response.

The lack of dignified space, the continued loss or difficult access to household and personal items contribute to the deterioration of the already precarious living conditions by increasing situation of GBV, discrimination, inequity, injustice, isolation, segregation, and family separation.

Soap and menstrual hygiene products are reported as the main needed NFIs among displaced populations in the North-West and South-West, because they are too expensive or because markets are not accessible due to insecurity.¹¹⁶

People with specific needs are particularly affected by inadequate shelter conditions and unavailability of household items wherefore their needs are prioritized.

Lack of secure, safe, adequate shelter and essential household items also fosters the use of negative coping mechanisms, such as early marriage, economic exploitation, and other human rights violations.

Lake Chad basin crisis (Far North)

Cameroonians are attacked in their homes and villages, with children and youth kidnapped and forcibly recruited for fighting and slavery.

People are losing their homes and land, with no documents or prospects for solutions.

According to the various rapid and multisectoral needs assessments carried out by sector partners in the Far North region, approximately 4,000 people (2 per cent of the displaced population) face a catastrophic

situation. They are unsheltered and exposed to harsh weather conditions during rainy and dry season.

In the Far North region, 40 per cent of the displaced population is reported finding shelter in host families for free, exhausting the already scarce resources of the host, sharing the same room, with less than 3.5m² covered living space per person. Such overcrowded situations lead to heightened risks of GBV and are often linked to improper sanitation; drastically contributing to an increased risk of the transmission of diseases, such as COVID-19, cholera, and measles.

The situation of self-settled population in rural, non-village settings and informal settlements is also critical as affected people lack basic infrastructure and access to basic services and markets. 22 per cent of the displaced population are reported to live in makeshift shelters constructed with poor quality material, degradable and flammable. This factor, together with the proximity of shelters, contribute to recurrent fire outbreaks, loss of life, and depleting resources of displaced communities.

Moreover, most IDP sites, around 70, did not receive any assistance in shelter material or essential household items during 2021.

In 2021, out of 135,000 returnees, 49 per cent returned to their own property, 21 per cent are staying in a new residence and 24 per cent with a host family in their village.¹¹⁷ A majority had their house destroyed and have lost their main assets, live stocks, household essential items as kitchen utensils, storage containers, water tanks, sleeping arrangements. The loss of these vital items influences the physical and mental well-being of people.

Seasonal flooding is, after violence, the main driver of displacement in the Far North, which is exacerbating the precarious conditions of displaced and host communities.

North-West South-West crisis

The high intensity of violence continues to affect the daily security of local population and the ability

of humanitarian organizations to safely deliver aid since 2017. In hard-to-reach areas, the situation is catastrophic. Approximately 32,000 people are self-settled in the bushes and in immediate and acute need of shelter and household items. The rest of displaced population is reported to have self-settled (52 per cent) in shelter or to stay with host families (48 per cent). Most accommodations across all displaced population (including the ones hosted) are reported to be critically below standards also lacking basic sanitary services.

In the North-West since 2019, almost 251,647 people are reported to have returned from other divisions in Cameroon or from Nigeria to their village of origin. Shelter and NFI needs vary from moderate to severe according to the context they return to and their access to livelihood opportunities.

West, Littoral and Centre

In the Littoral and West regions, about 91,199 people are displaced, with 25 per cent living with host families, while 75 per cent have self-settled or are renting. Compared to the North-West and South-West regions, higher percentages of displaced populations are reported to be unsheltered (14 per cent) and living in public buildings (6 per cent). 50 per cent of accommodations are described as acceptable in the Littoral and West regions.

In the Centre region, shelter is one of the main issues faced by displaced populations. They are living in highly congested spaces and are often at risk of eviction. In addition, markets are accessible but very expensive limiting access to NFI.

FAR NORTH REGION, CAMEROON

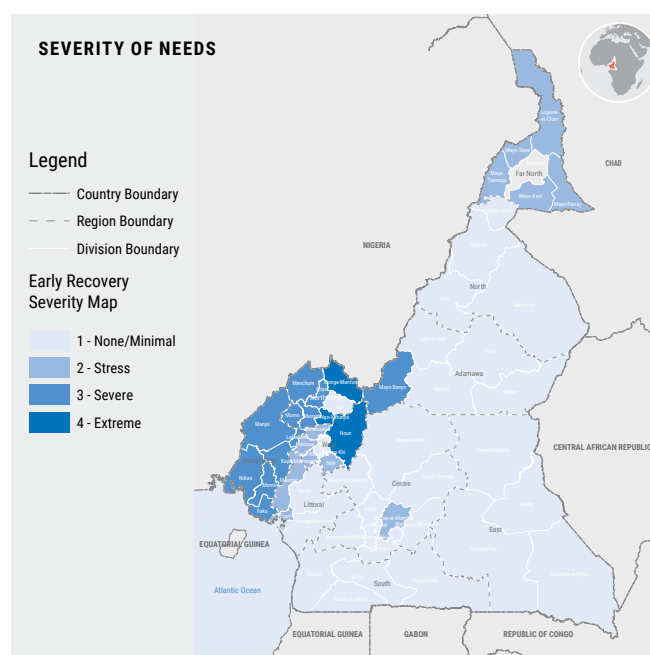
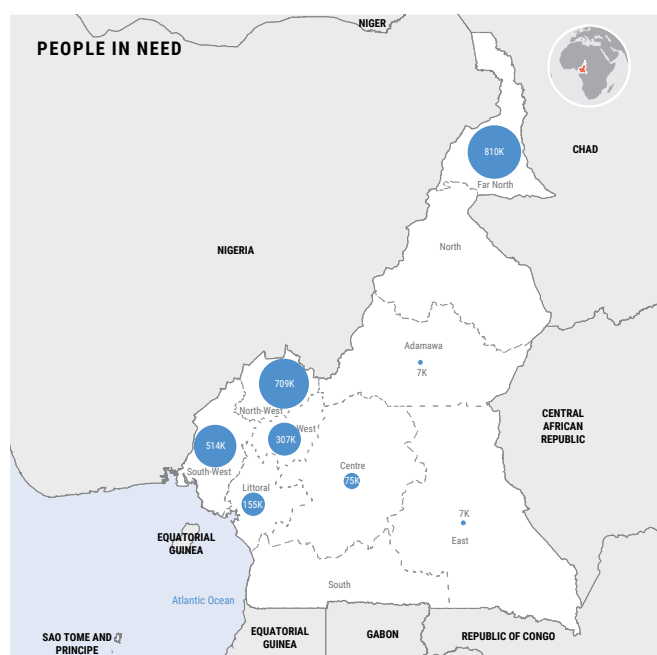
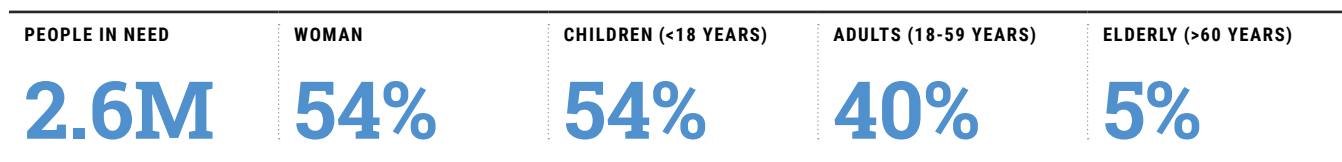
Bogo IDP site

Photo: UNHCR/Xavier Bourgeois





3.8 Early Recovery



2.6 million people affected by the crises in the Far North, North-West, and the South-West need Early Recovery support. IDPs and host communities in these locations are considered the most vulnerable, as well as other crisis-affected populations, due to loss of livelihoods, depletion of resources and lack of access to basic and social services. Persons living with disabilities, older people, female headed households, and youth are among the most vulnerable groups in terms of challenges to access livelihoods.

Early recovery needs will continue to increase in 2022 due to several aggravating factors, including NSAG attacks, human rights violations, and displacements, which have resulted in considerable loss of sustainable livelihoods.

The first and most severe gap faced by people in need is the rehabilitation of socio-economic infrastructure and services, such as quick repairs of electricity and water infrastructure, creation of jobs and employment opportunities, and restoration of financial transaction services. Secondly, people need agricultural and livestock production inputs, business restoration, basic and social infrastructure repair, and refurbishment. Thirdly, people need better access to markets, natural resources, housing, and enhanced services and living conditions for people with disabilities.

Lake Chad basin crisis (Far North)

In 2021, violence in the Far North region, more precisely in the Mayo-Sava, Mayo-Tsanaga, and Logone et Chari divisions, continued. Since its onset,

the conflict has displaced 608,000 people, including 358,000 IDPs, 135,000 returnees and 115,000 refugees, and continues to push people to flee their villages. The affected population is regularly subjected to armed attacks, kidnappings, including of children, looting and destruction of property and infrastructure. While girls and women are particularly vulnerable due to the combined effect of gender discrimination and socio-economic vulnerability caused by the crisis, leading to specific threats against them (in particular GBV), boys and men are more exposed to arbitrary arrests, forced recruitment and physical violence, such threats sometimes jeopardizing their ability to maintain their economic activity. In such instances, men have lost their status and sense of identity as decision-makers, protectors, and breadwinners in a society in which they are expected to protect and financially provide.

In the Far North region, only 22 per cent have access to electricity, lower compared to the national average, and 92 per cent of households in this part of Cameroon use wood as their main source of fuel for cooking. This energy access deficit further weakens the populations in the region and exposes them to several critical issues, such as poverty, low socio-economic development, years of political marginalization, etc.

The highest concentration of people in need of Early Recovery interventions are in the Logone et Chari division (277,500), followed by Mayo-Sava (245,200 people), and Mayo-Tsanaga (196,500 people). Initial analysis of the collected data shows that the need for jobs and emergency employment is most severe in Far the North region, where almost nine out of ten people need jobs, followed by the North region, East region, and Adamawa. In the Far North, population movements have resulted in an increased demand for basic social services and sustainable livelihoods. Returning populations require economic assistance to facilitate their reintegration. More than 800 former NSAGs members interviewed in 2020 express a considerable need for psychosocial care, socio-professional capacity building and support for economic recovery. Affected households, including people displaced by NSAGs attacks, are also in need of

assistance in restoring their purchasing power to have access to quality goods and services.

North-West South-West crisis

The activities of both SSF and NSAGs challenge the aid space throughout these regions by imposing roadblocks, demanding exchanges for relief, and confiscating aid. Continued violence, poor roads, and lockdowns restrict the movement of people in the anglophone regions. IDPs across the North-West and South-West struggle to access basic services.

As in the Far North region, the energy supply has decreased drastically in contrast to other regions. The highest concentration of people in need of Early Recovery interventions is in the Meme (174,600 people) and Fako (166,500 people) divisions in the South-West region and in the Mezam division (165,500 people) in the North-West region. The Early Recovery needs of people affected by the crisis are threefold: access to employment opportunities for youth and women, access to vocational training for youth, and access to basic services. The destruction of health centres and other public infrastructure increased the vulnerability of the target population. Governance issues and more specifically rule of law remain a major concern.

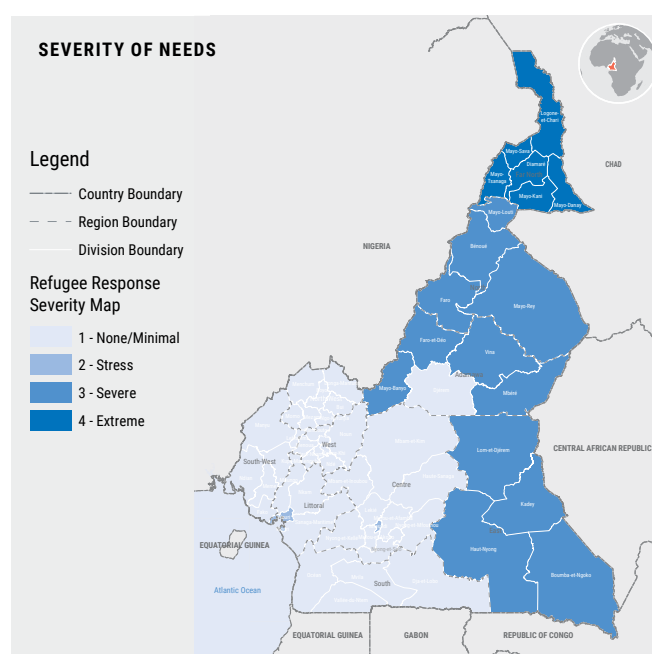
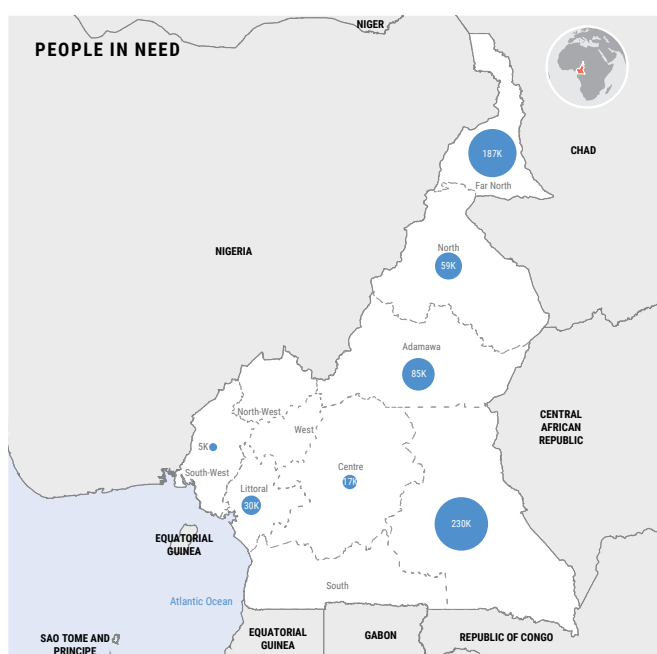
The crisis has contributed to the abusive exploitation of natural resources, accelerating the negative impact on wood, soil, and water resources, and supporting the increase in solid waste, as well as the decrease in the availability of arable land. Crops are burned, wells polluted, and soil poisoned.

3.9

Humanitarian Needs Overview for refugees and asylum seekers



PEOPLE IN NEED	WOMAN	CHILDREN (<18 YEARS)	ADULTS (18-59 YEARS)	ELDERLY (>60 YEARS)
613k	52%	54%	42%	4%



According to UNHCR, as of 31 December 2021, Cameroon hosts 474,294 refugees and asylum-seekers. 73 per cent are from CAR, 27 per cent are from Nigeria and 1 per cent are from other nationalities. 52 per cent of refugees in Cameroon are women and 55 per cent are children. Refugees and asylum seekers are living closely with host communities in the Adamawa, North, East, Far North, Littoral and Centre regions.

The break-down of the affected population is as below:

- **CAR refugees:** The total number of CAR refugees in the East, Adamawa, and North regions as of

31 December 2021 is 325,039, including 79,583 (24 per cent) living in sites, with the others living in villages.

- **Nigerian refugees:** The number of Nigerian refugees reached 116,564 in December 2021, out of whom 68,516 (59 per cent) live in the Minawao camp in the Far North.
- **Urban refugees:** Most urban refugees arrived in 2014 and live in Douala, Yaounde, and Langui. Urban refugees arrived from 29 countries, with the highest numbers arriving from CAR, Chad, the Democratic Republic of Congo, Niger, Rwanda, and Mali, respectively. 46 per cent of urban refugees and asylum seekers are women and 54

per cent are men. The number of urban refugees and asylum-seekers in urban areas (Yaounde and Douala) which stood at 36,962 in November 2020, dropped to 26,257 in 2021 following the verification exercise conducted in these two locations from December 2020 to April 2021.

The participatory needs assessment conducted by UNHCR and partners with refugees and asylum seekers of different age, gender, and diversities, revealed needs, related to their physical and mental well-being, their living conditions, their coping mechanisms, and their prospects for sustainable and durable solutions.

Central African and Nigerian refugees

The main needs per Sector can be presented as followed:

Protection

Registration: Biometric verification that began in 2021 with urban refugees was unable to reach CAR refugee sites in the East and Nigerian refugees in the Minawao camp and host villages. The lack of up-to-date data does not allow to carry out actions based on reported figures.

Documentation: Due to lack of recognition of the UNHCR issued identification cards, refugees have reported facing harassment by law enforcement agents when they move in search of livelihood opportunities. Refugees in the Far North who are without documents or who have expired documents are often perceived as affiliated with NSAGs. This in turn undermines their prospects for self-reliance opportunities and access to basic and financial services that address their assistance needs.

Gender-based violence: GBV remains a consistent protection concern for CAR and Nigerian refugees in Cameroon. The stigma associated with GBV fuels a culture of silence and denial. The pervasive belief that GBV is inevitable contributes to a culture of acceptance, violence, and exploitation of women. Protection assessments show the prevalence of

different forms of GBV including sexual violence, early/ forced marriage, and domestic violence because of new social roles associated with forced displacement.

The needs of GBV survivors range from access to specialised services and sustainable solutions, physical protection (safe houses), medical and psychological support, and access to livelihood opportunities.

Child Protection: Assessments by UNHCR and partners show the prevalence of child labor among refugee children. Data also shows that children work in hazardous conditions with dangerous machinery, long hours, and unhealthy living conditions. 31 per cent of refugee children are at risk of not attending school due to poor socio-economic conditions forcing their parents to engage them in work and other forms of negative coping mechanisms such as begging and early marriage.

Persons with specific needs: Over 66,000 CAR refugees and over 25,000 Nigerian refugees are at heightened risk due to their vulnerabilities, including persons living with disabilities for whom no suitable solution can be found in the remote areas where they live due to limited capacity of the state structures. Other persons with specific needs include older persons with no family support and single female headed households.

Durable solutions

CAR refugees: In November 2021, more than 10,000 CAR refugees expressed their desire to return to their country of origin. If the situation in CAR does not deteriorate, UNHCR and partners plan to facilitate the return of 5,000 CAR refugees in 2022.

Nigerian refugees: In September and October 2021, 11,300 Nigerian refugees expressed their desire to return to their country of origin. UNHCR and partners plan to facilitate the return of 6,000 Nigerian refugees in 2022.

Education: Primary and secondary education is run by the Cameroonian education authorities. Classrooms

are overcrowded and there is a need for additional equipment. Due to extreme poverty of parents, most households cannot afford the cost of school material for their children.

In addition, several students who completed their primary education are obliged to pursue their secondary education elsewhere. The enrolment rate of refugee children in primary school is 54 per cent, the enrolment rate in secondary school is 4 to 5 per cent, exacerbating and fueling negative coping mechanisms such as early marriage and child labor.

Early Recovery: Generally, economic activities are limited to subsistence agriculture, forestry, and mining. Access to land remains challenging, as well as access to social services and economic activities.

Part of the Far North region is in the Sahel, hence subject to consequences of the climate change and desertification. Economic activities are reduced to subsistence agriculture, forestry, and trade. As a result of the effects of climate change and on-going insecurity, conflicts between farmers and pastoralists who migrate to the region negatively impacts the already fragile peaceful coexistence in the Far North.

Health: Public health care services in the East, Adamawa and North regions offer poor services with most of them lacking adequate medical equipment and staff and generally inaccessible due to medical related costs. The situation for refugees is even more complex and renders them at heightened risk. Life in the sites and in other settlements increases the risks of epidemic diseases such as hemorrhagic fever, meningitis, cholera, and COVID-19. Reinforcement of epidemiologic surveillance along the CAR-Cameroon border is assessed as a need for early detection of suspicious cases, as well as the provision of adequate and timely response.

There are two health posts in the Minawao camp that provide medical services to both refugees and Cameroonians living in the camp's vicinity. For those living far from the camp, medical services are provided by the public health care system, which have very limited capacity, with most of them lacking adequate

equipment, medicine, supply, and staff, in addition to being difficult to access as the population is unable to afford the costs due to their low income.

Water, Sanitation and Hygiene: The three regions affected by the CAR crisis are characterised by low level on the provision of potable water and sanitation services to the minimum international standards. Due to this, a significant number of refugees and host communities fetch water from streams and other non-potable water sources.

The Far North region has limited access to potable water. The minimum standards regarding access to potable water, provision of sanitation and waste management services are not met in some areas of the Minawao camp. The situation in the communities is even worse with some WASH infrastructures not functioning and some locations not having one. Due to this situation, a significant number of refugees and their hosts fetch water from streams and other non-potable water sources.

In the eastern regions and in the Far North, the insufficient access to potable water particularly affects women, girls and boys who must walk long distances to fetch water, exposing them to protection risks.

Food security: The reduction in food assistance has not only put the nutritional wellbeing of refugees at stake, but also amplifies protection risks (low school attendance, resorting to negative coping mechanisms such as child labor, survival sex, etc.) and increases vulnerabilities since livelihood support measures are insufficient due to a lack of substantial financial resources.

Shelter/NFI: Around 64 per cent of CAR refugees in the seven sites live in transitional shelters (made of local material) and 34 per cent live in poor emergency shelters made of wood poles and plastic sheeting. The prevalence of transitional shelters and poor/damaged emergency shelters do not safeguard refugees right to adequate housing. In addition, the fragility of the ecosystem (desertification) and the low level of

economic activities of refugees limit their access to construction materials (wood, straw, raffia, lianas).

Refugees and Asylum seekers in urban settings

Refugees and asylum seekers for whom there is a need to provide protection and assistance reside in Yaounde and Douala.

Protection

- Contrary to CAR and Nigerian refugees who are recognized on a prima facie basis in the eastern part of Cameroon and the Far North region respectively, refugees in urban settings must undergo a refugee status determination procedure. There are many asylum seekers who still need to go through this procedure to receive a decision regarding their claim to be recognized as refugees.
- The protocol agreement signed between UNHCR, and the Ministry of External Relations transfers the refugee status determination procedure and other activities from UNHCR to the Government. However, its capacity to adjudicate asylum claims needs to be strengthened as some of these asylum seekers have been waiting for years and hence do not have proper documentation besides the asylum seeker certificate issued by UNHCR. Refugees also face difficulties in moving freely undermining their access to basic services and livelihood opportunities.
- Some refugees reported experiencing harassment from law enforcement agents, limited access to social and financial services, citing lack of recognition of their UNHCR refugee identification cards by the authorities as reason. As far as documentation is concerned, the General Delegation for National Security, which is entrusted with the responsibility to issue identification documents in Cameroon has indicated that the cost for issuing biometric identity cards to all eligible refugees stands at approximately US\$ 3,000,000.
- As far as children's protection is concerned, there are approximately 630 children at risk of whom 330 do not live with their parents. There are also a few cases of child-spouses, children in need of specialized education, and more than 200 children are at risk of not attending school. All these children need psychosocial, material, and other forms of support, that are tailored to their vulnerabilities.
- More than 1,000 refugee women and girls have been identified as being at risk in Yaounde and Douala. These risks range from protection incidents and risks experienced by single women and female headed households, and other GBV related incidents. Whilst a response in terms of psychosocial support and assistance for legal support is available, there is a need to strengthen the response in terms of material support that will enable survivors to overcome their vulnerable economic situation.
- There are other protection vulnerabilities among the urban refugee population that need suitable response, particularly for refugees living with disabilities (more than 300 individuals), older refugees and single parents.
- Concerning durable solutions for urban refugees and asylum seekers, some of them expressed their desire to return to their respective countries of origin. Meanwhile, UNHCR must continue to implement activities aiming at identifying refugees who have resettlement needs.

Health

The support provided so far in this sector has prioritised children under 5, older people, PLWG, and chronically ill people. However, access to health continues to be a challenge for most urban refugees.

Education

Education is the second most important sector for refugees. Refugee children attend public schools and families who can afford the cost, enroll their children in private schools. However, most of the refugees are economically vulnerable and need education support. 8,000 refugee children of primary and secondary school age need support to attend school and evolve in their education.

FAR NORTH REGION, CAMEROON

Domayo IDP site

Photo : OCHA/Ariane Maixandeau



Part 4

Annexes

SOUTH-WEST REGION, CAMEROON

UNHCR transit site for IDPs in Limbe TOWN

Photo: OCHA/Bibiane Mouangue



4.1

Data Sources

The data used to define people in need originate from different databases, surveys and needs assessments. The methodology used for the collection of the data is reliable and uncontested by the humanitarian community in Cameroon, overseen by the Humanitarian Country Team (HCT).

The data sources used for the HNO and HRP are as follows:

- Data projected from the 2005 census as carried out by the National Institute of Statistics in 2011.
- The number of refugees is provided by the UNHCR ProGres database.
- The number of IDPs and returnees was collected by IOM in DTM round 23 in the Far North; through the MSNA carried out under the lead of OCHA in August 2021 in the North-West and South-West regions; the MSNA carried out under the lead of OCHA in the Littoral and West regions in September 2021, and the MSNA carried out by CHOI, in coordination with OCHA in Yaounde in September 2021. The number of IDPs in the Adamawa region is based on the MIRA carried out under the lead of OCHA in collaboration with the Ministry of Territorial Administration (Department of Civil Protection) in August 2019.
- Some 2,795 key informants were consulted during the MSNA in the Far North in July 2021, to express the key needs of displaced and host population. IOM's stability index aims to obtain data on the reasons for conditions for displacement and to collect information from the affected population. In 2021, IOM carried out the stability index in March, collecting information from key informants in 884 villages, and in November at household level, collecting information from 3,370 households (26,700 individuals) in 630 locations.
- For the North-West and South-West MSNAs, 1,522 locations were assessed in February 2021 through interviews with 5,792 key informants. In August, 1,582 locations were assessed through interviews with 7,206 key informants, to give an updated overview of the displacement situation as well as the priority sectoral needs of affected populations. In September 2021, 1,411 locations were assessed through interviews with 5,076 key informants during the Littoral and West MSNAs.¹¹⁸
- Host population figures are calculated using a method previously adopted by UNHCR to identify host populations hosting refugees.
- Data on people in food insecurity is based on the analysis of the Cadre Harmonisé from October 2021, the Food Security Monitoring Systems and the national survey on food and nutrition security, validated by the Ministry of Agriculture and Rural Development of Cameroon.
- Data on people in need of health and nutrition assistance are extracted from the Health Information Management System managed and maintained by the Ministry of Health of Cameroon.
- Additional data on nutrition were collected through the following surveys: SMART, Multiple Indicator Cluster Survey (MICS), and Demographic and Health Surveys (DHS). The last SMART survey was conducted in February 2021, the latest MICS was conducted in 2014 and the latest DHS was conducted in 2018.
- Data on people in need of protection is collected through protection monitoring tools managed by UNHCR and its partners.
- Data used to define children in need of child protection was extracted from the UNHCR ProGres database and is also based on expert analysis.
- Data on people in need of protection from GBV is collected and gathered by the Ministry of Health

(and the GBV Information Management System (GBVIMS) database maintained by UNFPA.

- Data used to assess the need for shelter and household items was collected through sectoral assessments carried out by UNHCR and its partners, as well as the 2021 MSNAs.
- Data used to define the number of people in need of WASH assistance was collected through the MSNAs conducted in 2021, as well as through the sectoral assessment conducted by WASH Sector actors led by UNICEF.
- Data used to estimate the people in need of Early Recovery assistance is based on data collected by DTM and the Minimum Expenditure Basket (MEB).

It should be noted that the average frequency of updating these sectoral data is six months. It is therefore possible to update the overview of humanitarian needs in Cameroon every six months.

Number of assessments

NO. OF ASSESSMENTS

44

SECTORS	EARLY RECOVERY	EDUCATION	FOOD SECURITY	HEALTH	NUTRITION	PROTECTION	SHELTER & NFI	WASH	GRAND TOTAL
Adamawa			6						6
Centre	1	2	7	1	1	1	1	1	8
Est			6						6
Far North	3	9	13	5	5	15	5	10	29
Littoral	3	5	9	2	1	3	3	2	11
North			6					1	7
North-West	3	5	9	3	2	2	4	5	15
South			6						6
South-West	3	6	9	3	2	2	3	5	15
West	2	2	8	1	1	1	2	3	9
Grand Total	9	19	19	11	9	21	12	18	44



FAR NORTH REGION, CAMEROON

Kolofata IDP site

OCHA/Joelle Kwembi

4.2 Methodology

In 2021, the HCT endorsed the Inter-Sector Working Group's proposal to conduct a light review of the Humanitarian Needs Overview (HNO) and Humanitarian Response Plan (HRP), considering the protracted nature of the three humanitarian crises.

The humanitarian community in Cameroon estimated the people in need (PIN) for 2022 based on a set of sectorial indicators selected at the Inter-Sector level. The HNO for 2022 identifies people with acute needs by looking at the severity of needs (i.e., estimation of severity of the humanitarian conditions through a

five-point scale). The methodology was validated by the Inter-Sector Group and the HCT.

Joint discussions in 2021 at the Inter-Sector in the Far North and Inter-Cluster in the North-West and South-West, following the logic of the joint intersectoral analysis framework,¹¹⁹ formed the basis for the discussion and agreement at the Inter-Sector at national level on the way the crises impact on people's lives and livelihoods.

When analysing the humanitarian consequences attention was paid to how the crises impact on people's lives and survival, on people's livelihoods and on their ability withstand future shocks and stresses. The main purpose of centering the analysis of the severity of needs is to better inform prioritization of the HRP by establishing the time criticality associated with different humanitarian needs.

Given the methodological shift in the calculation of the PIN in 2019 and 2020, a degree of caution should be exercised when comparing trends across years. However, the methodology to calculate the PIN for 2021 was also used to calculate the PIN for 2022.

Inter-sectoral and sectoral severity and PIN estimations

The Inter-Sector at Yaounde level, in consultation with the Inter-Sector and Inter-Cluster groups at regional levels, supported by the Information Management Working Group (IMWG), completed the following steps:

- Defined and agreed on the scope of the analysis (population groups, geographic areas).
- Assigned needs indicators for PIN estimation by severity.

The process included:

1. Each Sector chose several indicators to measure the sectoral PIN. Out of all indicators considered at sectorial level, the Inter-Sector jointly selected in 2020 a set of 16 needs indicators for the intersectoral PIN, considering the different dimensions and aspects of the humanitarian conditions, and the availability and reliability of the data for the indicator. The set of indicators was reviewed by the Inter-Sector in 2021 and it was agreed to keep the same 16 indicators.
2. Severity was determined at the divisional level. The combination of the severity of the indicators selected for the intersectoral PIN, together with expert judgment, was considered for the global severity map. Each Sector determined the sectoral severity based on the severity of the sectoral indicators.

Severity thresholds varied from 1 to 5 depending on the severity in the division. The threshold per division was determined according to the below rules:

- For Food Security the severity thresholds of the Cadre Harmonisé were used.
 - For the other indicators the sectors identified the different severity thresholds.
 - Aggregation Methodology was used for the intersectoral severity map.
 - Sectors provided severity data based on expert judgement used to produce sectoral severity maps.
3. Data was collected at division level to ensure coherence at the analysis level. Certain sectors such as nutrition and health which collect data at the level of health districts submitted data at division level.

OCHA estimated people in need by selecting the highest percentage categorised to be in severity 3, 4 and 5 by population group (IDPs, returnees, refugees, host community, others) and by division. The resulting percentages were applied to the baseline population for that location.

The HCT was briefed on a regular basis and endorsed the scope and methodology of the analysis.

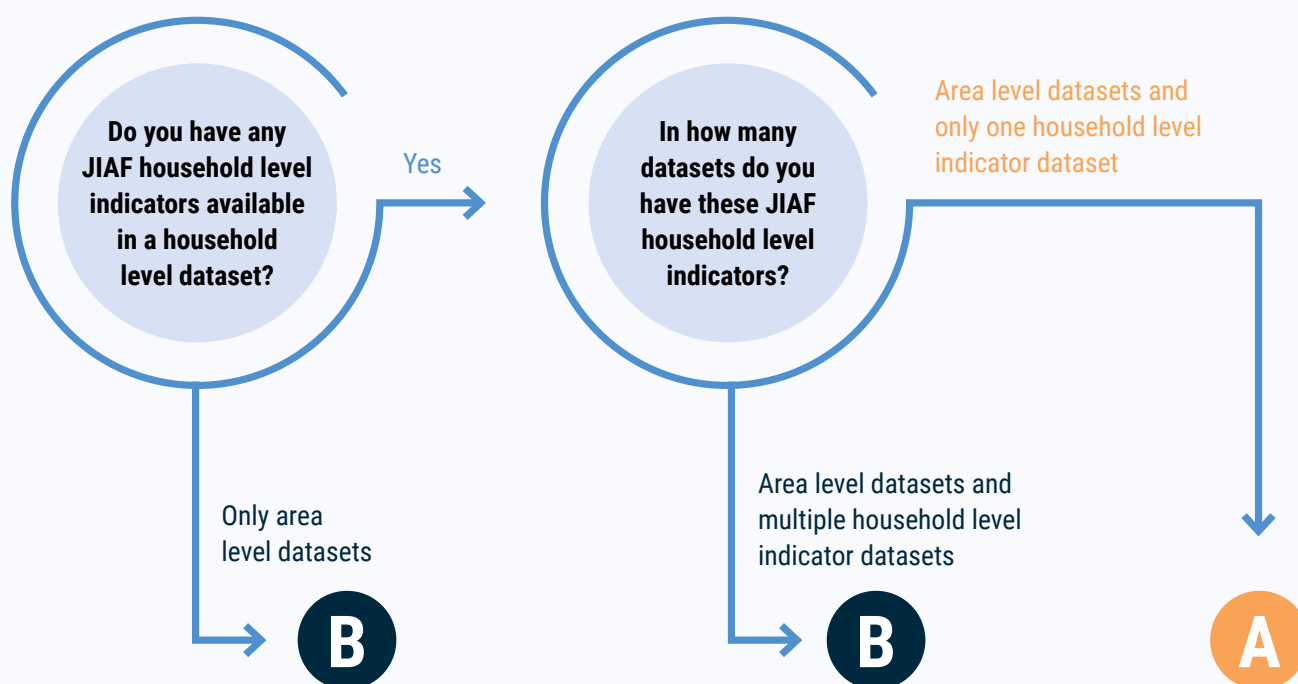
The indicators used to calculate sectoral and intersectoral PIN and severity are listed. The HNO dataset will be available on HDX.

Data Scenario B: Aggregation method for the Humanitarian Conditions pillar

The aggregation method used to produce the severity analysis and subsequently the PIN depends on the indicators which were chosen for the inter-sectoral PIN, and the type of data sources of these indicators. Two aggregation methods were developed to calculate the PIN, depending on the type of data available:

- **Data Scenario A:** Household level indicators are available, all contained in a single household level indicator dataset. Household indicators are therefore “linked.”
- **Data Scenario B:** Household level indicators or area-level indicators are available, but only through multiple household or area-level indicator datasets; or only area-level datasets are available. Household indicators are therefore “unlinked.”

Follow the decision tree to identify the data scenario for each geographical area/affected group.



NB: Household data must not be discarded to facilitate use of data scenario A. If different JIAF household level indicators for the same area/group are spread across multiple datasets (e.g., MSNA + WASH assesment, the data scenario B must be used

In Cameroon, the available household indicators are spread across multiple household level datasets, wherefore scenario B was used to calculate the number of people in need.¹²⁰

Scenario B does not allow for a full breakdown of population by severity phase – expert judgement is essential as an additional step to do so.

The JIAF Severity Scale

SEVERITY PHASE	KEY REFERENCE OUTCOME	POTENTIAL RESPONSE OBJECTIVES
1 None/Minimal	<p>Living Standards are acceptable (taking into account the context): possibility of having some signs of deterioration and/or inadequate social basic services, possible needs for strengthening the legal framework.</p> <p>Ability to afford/meet all essential basic needs without adopting unsustainable Coping Mechanisms (such as erosion/depletion of assets).</p> <p>No or minimal/low risk of impact on Physical and Mental Wellbeing.</p>	<p>Building Resilience</p> <p>Supporting Disaster Risk Reduction</p>
2 Stress	<p>Living Standards under stress, leading to adoption of coping strategies (that reduce ability to protect or invest in livelihoods). Inability to afford/meet some basic needs without adopting stressed, unsustainable and/or short-term reversible Coping Mechanisms.</p> <p>Minimal impact on Physical and Mental Wellbeing (stressed Physical and Mental Wellbeing) overall.</p> <p>Possibility of having some localized/targeted incidents of violence (including human rights violations).</p>	<p>Supporting Disaster Risk Reduction</p> <p>Protecting Livelihoods</p>
3 Severe	<p>Degrading Living Standards (from usual/typical), leading to adoption of negative Coping Mechanisms with threat of irreversible harm (such as accelerated erosion/depletion of assets). Reduced access/availability of social/basic goods and services</p> <p>Inability to meet some basic needs without adopting crisis/emergency - short/medium term irreversible - Coping Mechanisms.</p> <p>Degrading Physical and Mental Wellbeing. Physical and mental harm resulting in a loss of dignity.</p>	<p>Protecting Livelihoods</p> <p>Preventing & Mitigating Risk of extreme deterioration of Humanitarian conditions</p>
4 Extreme	<p>Collapse of Living Standards, with survival based on humanitarian assistance and/or long term irreversible extreme coping strategies.</p> <p>Extreme loss/liquidation of livelihood assets that will lead to large gaps/needs in the short term.</p> <p>Widespread grave violations of human rights. Presence of irreversible harm and heightened mortality</p>	<p>Saving Lives and Livelihoods</p>
5 Catastrophic	<p>Total collapse of Living Standards</p> <p>Near/Full exhaustion of coping options.</p> <p>Last resort Coping Mechanisms/exhausted.</p> <p>Widespread mortality (CDR, U5DR) and/or irreversible harm.</p> <p>Widespread physical and mental irreversible harm leading to excess mortality.</p> <p>Widespread grave violations of human rights.</p>	<p>Reverting/Preventing Widespread death and/or Total collapse of livelihoods</p>

Indicators, and their severity levels, selected for the inter-sectoral PIN

Sector	Sub-sector	Indicator Name/label	Source	1	2	3	4	5
Protection	Protection	% of IDPs without valid civil documentation and unable to obtain them	MSNA / Protection Monitoring	All household members have valid documentation including birth certificate, ID card and passport	All household members have valid documentation including birth certificate and ID card	At least one member of the HH don't have valid ID card or passport but can obtain new ones	At least one member of the HH don't have valid ID card or passport and can't obtain new ones	At least one member of the HH don't have birth certificate
Protection	Protection	Civilian population killed or injured by violence, conflict or natural hazards	UNDSS / ACLED / Media Monitoring	0	1 - 3	3 - 5	5 - 10	>10
Protection	GBV	% of girls / boys / women at risk of GBV (sexual violence and forced marriage / reproduction)	Service mapping (5W), existing GBV referral pathways at subdivision level.	Up to 4 services available	Up to 3 services available	Up to 2 services available	Only 1 service available	No GBV service available
Protection	CP	% of girls/boys that have been separated from their parents or other typical adult caregivers	RPM	0	0-0.5%	0.5-1%	1-2%	3%+
Protection	CP	% children and caregiver in need of mental health or psychosocial support	CP AoR/CPWG/CP regional platform/UNICEF	0-14%	15-29%	30-54%	55-79%	80%+
Protection	CP	% of girls/boys not regularly attending school	Education cluster database	<20%	20%-30%	30%-40%	40%-50%	>50%
Education		% of out of school children aged 3-17 years in the community not accessing quality formal or non-formal education		<1%	1 - 5%	5 - 25%	25% - 50%	> 50%
Food Security	Food Availability/Access/Utilization	Cadre Harmonisé	Cadre Harmonisé	Phase 1	Phase 2	Phase 3	Phase 4	Phase 5
Food Security	Food Access	Food Expenditure share	<50%	50-65%	65-75%	75% - 85%	> 85%	
Nutrition	Care and feeding practices	Exclusive breastfeeding for infants 0-5 months	SMART surveys	≥70%	50-70%	30 -50%	11-30%	<11%
Nutrition	GAM	Prevalence of Global Acute Malnutrition (GAM) among children 6-59 months	SMART surveys	MUAC <5%: Phase 1-2; WHZ <5%	MUAC 5-9.9%: Phase 2-3 WHZ 5-9.9%	MUAC 10-14.9: Phase 3-4 WHZ 10-14.9%	MUAC ≥15%: Phase 4-5; WHZ 15-29.9%	
Nutrition	Stunting	Prevalence of stunting based on height-for-age Z-score (HAZ)<-2 among children 0-59 months	SMART surveys	<10%	10-19.9%	20-29.9%	≥30%	
WASH	Water	% of HHs having access to a sufficient quantity of water for drinking, cooking, bathing, washing or other domestic use	WASH Specific assessments / MSNA / DTM	Enough water for drinking cooking, personal hygiene and other domestic purposes OR more than 50 l/d/p	Enough water for drinking AND cooking AND personal hygiene, BUT NOT for other domestic purposes OR 15 or more but less than 50 l/d/p	Enough water for drinking AND EITHER cooking OR personal hygiene OR 9 or more but less than 15 l/d/p	Enough water for drinking BUT NOT for cooking AND personal hygiene OR 3 or more but less than 9 l/d/p	Not enough water for drinking OR Less than 3 l/d/p
WASH	Sanitation	% of HHs having sufficient access to a functional and improved sanitation facility	WASH Specific assessments / MSNA / DTM	Access to improved sanitation facilities, not shared with other households	Access to improved sanitation facilities, shared with less than 20 people	Access to improved sanitation facilities, shared with more than 20 people	Access to unimproved facilities OR access to improved facilities shared with more than 50 people	Disposal of human faeces in open spaces or with solid waste
Shelter	Enclosure	% of HHs currently living in unsustainable shelter situations	Shelter Cluster assessments	Area: Very few (<10%) of HHs is living in unfinished buildings, collective centres, organized camps, informal settlements, open areas.	Area: 10% to 50% of HHs live in unfinished buildings, collective centres, organized camps, informal settlements, open areas	Area: Over 50% to 70% of HHs live in unfinished buildings, collective centres, organized camps, informal settlements, open areas	Area: Over 70% to 90% of HHs live in unfinished buildings, collective centres, organized camps, informal settlements, open areas	Area: Over 90% of HHs live in unfinished buildings, collective centres, organized camps, informal settlements, open areas
Health	Communicable and Non Communicable Diseases	Number of cases or incidence rates for selected diseases relevant to the local context (malaria, COVID, others outbreak prone diseases)	EWARS, IRA, RHA prospective HF based surveillance			The following criteria are met: Threshold of outbreak prone disease reached; 1 new confirmed case of COVID, double of the number of malaria cases from one week to another	All of the following criteria are met: Outbreak prone diseases threshold<10 reached; New confirmed COVID cases in more than one health area; Quadruple of number of malaria cases from one week to another	All of the following criteria are met: Outbreak prone disease threshold<30 reached; New confirmed COVID cases in more than 1 Health district; increase 10 times of the number of malaria cases from one week to another



WEST REGION, CAMEROON

Nkourap IDP site

Photo : OCHA/ Bibiane Mouangue

4.3 Information Gaps and Limitations

To assess the humanitarian needs of the population of Cameroon, data was gathered through assessments conducted in 2018, 2019, 2020, and 2021, such as the MSNA and the MIRA. Many sectoral evaluations are carried out on an annual basis. Differences in the way data is collected geographically presents a challenge. For example, the health and nutrition sectors collect data by health districts rather than by divisions. To harmonise, the data for these two sectors was provided at the regional level and then projected at the divisional level.

Several sectors experienced difficulties collecting primary data due to access constraints and accessing secondary data due to the lack of a complete assessment registry. To address this, the capacity of local actors to conduct evaluations according to humanitarian standards will be further strengthened alongside the systematic exchange of data and evaluation reports among humanitarian actors.

Since October 2021, the WASH, Nutrition, Health, GBV, Child Protection, and Protection Clusters and AoRs in the North-West and South-West were supported by four IM officers from iMMAP. An iMMAP support unit with three IM officers, hosted by OCHA Yaounde, was established to support the entire humanitarian community in Cameroon. Support by iMMAP provided to the sectors and clusters was crucial in developing certain IM products, such as the support of the development of an assessment registry for the Protection Sector, but the sustainability of this support in 2022 is uncertain with no funding yet mobilized for the extension of the support after May 2022.

In 2021, it was agreed at the Inter-Sector level that multi-sectoral as well as sectoral assessments carried out need to pay more attention to gender specific needs and the needs of persons with disabilities.

In 2020, OCHA, with the support of the inter-agency senior gender advisor, reviewed the MSNA questionnaire to ensure that the distinct assistance and protection needs of women, girls, men, and boys, are considered. In 2021, OCHA, together with the Sectors and relevant working groups, carefully reviewed MSNA questionnaires to ensure specific questions on the needs of people living with disabilities, and the accountability to affected people were included.

However, disaggregated statistical data on gender, age, and disabilities remains limited, as MNSAs are carried out at key informant level, and not at household level. Furthermore, there is a continuous lack of capacities to analyze data and turn it into relevant information among key humanitarian stakeholders. In 2021, 40 members of the clusters in the North-West and South-West were trained on gender in emergencies, with a focus on how to collect and use quantitative and qualitative gender and age sensitive information on the distinct effects of the crisis. Training of trainers on gender in humanitarian action will be held in the Far North and the East in 2022. It is expected that this pool of partners with reinforced expertise on gender will substantially contribute to strengthening the collection of data on the different impacts of the crises on girls, boys, women, and men, its analysis, and its use to inform humanitarian programmes.

While interesting information on access of people with disabilities to assistance and services was gained thanks to the Far North MSNA, OCHA will further strengthen the integration and analysis of needs of people with disabilities in the 2022 Centre, North-West, and South-West MNSAs.

The absence of a recent general population census means that calculations for the PIN at times relied on projections.

4.4

Acronyms

ACF	Action against Hunger	GCE	General Certificate of Education
AFCON	Africa Cup of Nations	GDP	Gross Domestic Product
AoR	Area of responsibility	GenCap	Senior inter-agency gender advisor
ARV	Antiretroviral drugs	GESP	Growth and employment strategy paper
BSFP	Blanket supplementary feeding programme	HCT	Humanitarian Country Team
CAR	Central African Republic	HCC	Humanitarian Coordination Centre
CARE	Care International	HDX	Humanitarian Data Exchange
CCCM	Camp coordination and camp management	HIV/AIDS	Human immunodeficiency virus/ Acquired immunodeficiency syndrome
CH	Cadre Harmonisé	HLP	Housing, land and property
CHOI	Cameroon Humanitarian Organizations Initiative	HNO	Humanitarian Needs Overview
CP	Child Protection	HPC	Humanitarian Programme Cycle
COVID-19	Coronavirus disease 19	HRP	Humanitarian Response Plan
CSDS-V	Community services data set	IASC	Inter-Agency Standing Committee
DHS	Demographic and health surveys	IDP	Internally displaced person
DRC	Danish Refugee Council	IED	Improvised explosive device
DTM	Displacement Tracking Matrix	IM	Information Management
ECD	Early childhood development	IMWG	Information Management Working Group
EFSA	Emergency food security assessments	iMMAP	Information management and mine action program
FAO	Food and Agriculture Organization of the United Nations	INFORM	Index for Risk Management
GAM	Global acute malnutrition	INGO	International non-governmental organization
GBV	Gender-based violence	INS	National Institute of Statistics
GBVIMS	Gender-based violence Information Management System		

IOM	International Organization for Migration	SAM	Severe acute malnutrition
IRC	International Rescue Committee	SENS	Standardized expanded nutrition survey
ISWG	Inter-Sector Working Group	SMART	Standardized monitoring and assessment of relief and transitions
JIAF	Joint Intersectoral Analysis Framework	SND30	National Development Strategy of Cameroon
MDD	Minimum dietary diversity	SSF	State security forces
MEB	Minimum expenditure basket	UNDSS	United Nations Department of Safety and Security
MHM	Menstrual hygiene management	UNFPA	United Nations Population Fund
MICS	Multiple indicator cluster survey	UNHAS	United Nations Humanitarian Air Services
MINEDUB	Ministry of Basic Education	UNHCR	Office of the United Nations High Commissioner for Refugees
MINPROFF	Ministry of women empowerment and the family	UNICEF	United Nations Children's Fund
MINESEC	Ministry of secondary education	UN WOMEN	United Nations Entity for Gender Equality and the Empowerment of Women
MIRA	Multi-Sector Initial Rapid Assessment	WASH	Water, sanitation and hygiene
MSNA	Multisectoral Needs Analysis	WB	World Bank Group
MSF	Doctors Without Borders	WFP	World Food Programme
mVAM	mobile Vulnerability Analysis and Mapping	WHO	World Health Organization
MUAC	Mid-Upper Arm Circumference		
NFI	Non-food items		
NGO	Non-governmental organizations		
NSAG	Non-State armed groups		
NWSW	North-West South-West		
PIN	People in need		
PLW	Pregnant and lactating women		
PNVRSA	National watch and food security reinforcement programme		
OCHA	United Nations Office for the Coordination of Humanitarian Affairs		
rCSI	reduced Coping Strategy Index		
RRM	Rapid Response Mechanism		

4.5

End notes

- 1 325,039 refugees from CAR were reported in the East, Adamawa, and North regions of Cameroon in December 2021 (UNHCR).
- 2 Human Development Index, UNDP, 2020.
- 3 Quatrième Enquête Camerounaise Auprès des Ménages, INS, 2014.
- 4 Gender inequality index, UNDP, 2017.
- 5 Food Security Brief, WFP Cameroon, September 2021.
- 6 Cameroon gender profile, MINPROFF and UN WOMEN, November 2020.
- 7 mVAM Bulletin, WFP, September 2020.
- 8 Statistical Yearbook of Telecommunication and Information Technology and Communication in Cameroon, Ministry of Posts and Telecommunication, 2017.
- 9 Program for the Acceleration of the Digital Transformation of Cameroon, Project Information Document, 15 May 2020: <https://ewdata.rightsindevelopment.org/files/documents/40/WB-P173240.pdf>
- 10 Security Incidents reported from January to October 2021, UNDSS Cameroon.
- 11 FewNet, Perspective on the Food Security in Cameroon, October 2021 to May 2022: https://reliefweb.int/sites/reliefweb.int/files/resources/CAMEROON_FSO_Oct_21%20French_Final_Posting_0.pdf
- 12 Cameroon, COVID-19 Situation report, MINSANTE, 23 to 28 December 2021.
- 13 Suivi de la sécurité alimentaire, Bulletin Nr. 5, PNVRSA, WFP, FAO, ACF, Solidarités International, Juillet 2021, données de février-mars 2021.
- 14 Food Security Brief, Central African Refugees in Adamawa, East and North regions, WFP Cameroon, September 2021.
- 15 357,631 IDPs (DTM, IOM, July 2021); 135,257 returnees (DTM, IOM, July 2021); 115,188 Nigerian refugees in the Far North (UNHCR, November 2021).
- 16 As of November 2020, 560,422 people were displaced in the Far North: 321,886 IDPs (IOM, DTM, June 2020); 123,489 returnees (IOM, DTM, June 2020), 115,047 Nigerian refugees in the Far North (UNHCR, November 2020).
- 17 DTM, IOM, July 2021. Numbers are rounded up.
- 18 A Return Intention Survey was conducted in November 2021 which included 3,369 households of 26,693 people, in the six divisions of the Far North region. Retours et Solutions durables Extrême Nord du Cameroun, DTM, IOM, November, 2021.
- 19 Stability Index, IOM, November 2021.
- 20 1,035,648 people have been displaced due to the North-West and South-West crisis since 2017: 347,542 people were displaced within the North-West and South-West regions (MSNA, OCHA, August 2021); 383,596 returnees were registered in the North-West and South-West regions (MSNA, OCHA, August 2021); 222,680 people were displaced to other regions (5,301 to the Adamawa region (MIRA, OCHA, July 2019); 60,084 to Yaoundé, Centre (MSNA, CHOI, OCHA, September 2021); 81,298 to the Littoral (MSNA, OCHA, September 2021); 84,927 to the West (MSNA, OCHA, September 2021); 72,900 fled to Nigeria (UNCHR, December 2021). A decrease of over 100,000 displaced people can be observed since the assessments in August 2020, which can be partially explained due to an increased reluctance of IDPs to identify themselves as such, considering discrimination and the lack of assistance, as well as by the change in assessment methodology.
- 21 An increase of return movements to the North-West and South-West can be observed since 2019: 203,634 returnees were registered in the August 2019 MSNA, 360,547 returnees were registered in the August 2020 MSNA, 333,915 returnees were registered in the February 2021 MSNA, 383,596 returnees were registered in the August 2021 MSNA.
- 22 325,039 refugees from CAR were reported in the East, Adamawa, and North regions of Cameroon in December 2021 (UNHCR).
- 23 293,352 refugees from CAR were reported in the East, Adamawa, and North regions of Cameroon in November 2020 (UNHCR).
- 24 INTERSOS, DRC & IRC, Protection Monitoring Reports for June 2021, as cited in an analysis by the Senior inter-agency gender advisor, Delphine Brun, December 2021.
- 25 Food Security Brief, Central African Refugees in Adamawa, East and North regions, WFP Cameroon, September 2021.
- 26 SMART, Ministry of Public Health of Cameroon, UNICEF, UNHCR, February – March 2021.
- 27 Food Security Brief, Central African Refugees in Adamawa, East and North regions, WFP Cameroon, July 2021.
- 28 SMART, Ministry of Public Health of Cameroon, UNICEF, UNHCR, February – March 2021.

- 29 Ministry of Basic Education (MINEDUB), Regional Delegations for Basic Education for the North-West and for the South-West and Ministry of Secondary Education (MINESEC). In November 2020, in the North-West region only 730 (23 per cent out of 3,127) primary schools and 142 secondary schools (25 per cent out of 416) were operational. 39 per cent of the primary school teachers and 21 per cent of the secondary school teachers were reporting to work in the North-West in November 2020.
- 30 Insecurity was given as primary reason for why displaced children were not going to school in 56 per cent of the villages assessed by the August MSNA. The fact that schools are too far away was given as the primary reason in 34 per cent of the assessed villages. MSNA, North-West and South-West, OCHA, August 2021.
- 31 MSNA, Littoral and West regions, OCHA, September 2021.
- 32 MSNA, Far North, IOM, July 2021.
- 33 MSNA, Far North, IOM, July 2021.
- 34 Cameroon gender profile, MINPROFF and UN WOMEN, November 2020.
- 35 In 32 per cent of the assessed villages, the high tuition fees were given as reason for children not attending school, followed by a lack of a school in the vicinity (25 per cent), a lack of teachers or school material (23 per cent). MSNA, Far North, IOM, July 2021.
- 36 In 19 per cent of the assessed villages, the need for children to work instead of going to school was given as reason, in 19 per cent that the enrolment is difficult or even prohibited for displaced children and in 19 per cent that access is challenging for children living with disabilities. MSNA, Far North, IOM, July 2021.
- 37 Access to drinking water is identified as the priority need by 16 per cent of the host population and 11 per cent of the displaced population. Health is identified as priority need by 7 per cent of the host population and 12 per cent of the displaced population. MSNA, Far North, IOM, July 2021.
- 38 In 86 per cent of the villages assessed, the water collected for drinking comes from a borehole, in 31 per cent from an unprotected well, in 25 per cent from water us collected from a stream or a lake. In 62 per cent of the assessed villages, the water is not treated. MSNA, Far North, IOM, July 2021.
- 39 MSNA, Far North, IOM, July 2021.
- 40 MSNA, North-West and South-West, OCHA, August 2021.
- 41 47 per cent of the displaced population in the North-West and South-West cite "few waterpoints" and lack of water containers as the primary challenges to accessing water, followed by "water points are far away" which is cited by 33 per cent as a primary challenge. MSNA, North-West and South-West, OCHA, August 2021.
- 42 32 per cent of key informants cited drinking water as priority need of the displaced population, followed by food (17 per cent), education (16 per cent), and health (11 per cent).
- 43 In more than 81 per cent of assessed villages, key informants reported that displaced persons had problems in accessing latrines because they were unhygienic while insufficient latrines were reported in 76 per cent of the assessed villages. MSNA, Littoral and West, September 2021.
- 44 64 per cent of the displaced populations in the assessed villages, mostly in the Mayo-Danay, Logone et Chari, and Mayo-Sava divisions encounter problems accessing health care, because the health centre are too far away (43 per cent), services are too costly (42 per cent), but also because of a lack of health personnel (8 per cent) and insecurity (5 per cent). MSNA, Far North, IOM, July 2021.
- 45 Cameroon gender profile, MINPROFF and UN WOMEN, November 2020.
- 46 Cameroon gender profile, MINPROFF and UN WOMEN, November 2020.
- 47 MSNA, Littoral and West, OCHA, September 2020.
- 48 More information on specific access constraints and actions taken to address them can be found in the chapter "Planning Assumptions, Operational Capacity and Access" of the 2022 Cameroon HRP.
- 49 In total, 1,926,285 people are displaced within Cameroon as of December 2021. This includes 342,877 CAR and 120,928 Nigerian refugees, 2,458 refugees of other nationalities and 8,031 asylum seekers (UNHCR, December 2021), 933,138 IDPs in the Adamawa, Centre, Far North, Littoral, North-West, South-West and West regions (UNCHR August 2020; CHOI, OCHA, MSNA, Centre, September 2021; OCHA, MSNA, NSW, August 2021; OCHA, MSNA, Littoral and West regions, September 2021; IOM, DTM, July 2021), 518,853 returnees in the Far North, the North-West and South-West regions (DTM, IOM, July 2021; MSNA NSW, OCHA, August 2021).
- 50 mVAM Bulletin, WFP, September 2020 (data of June-July 2020).
- 51 Displaced populations feel discriminated in in 74 per cent of the villages assessed. MSNA, Far North, IOM, July 2021.
- 52 DTM, Far North, round 23, displacement report, IOM, July 2021.
- 53 MSNA, NSW, OCHA, August 2021.
- 54 Stability Index, IOM, March, and November 2021.
- 55 MSNA, NSW, OCHA, August 2021.
- 56 DTM, Far North, IOM, July 2021.
- 57 Stability Index, IOM, November 2021.
- 58 Situational analysis report, MINPROFF, revised in 2020.
- 59 DTM, round 23, IOM, July 2021.
- 60 Children and Armed Conflict, Report of the Secretary-General, A/75/873-S/2021/437, 6 May 2021.
- 61 The Secretary-General's report on Children and Armed Conflict for the year 2021 is expected to be released in May 2022.
- 62 The United Nations verified the killing (43) and maiming (30) of 73 children (47 boys, 24 girls, 2 sex unknown), in Far North

- region (47) and in South-West (14) and North-West (12) and the abduction of 52 children (11 boys, 33 girls, 8 sex unknown) in the Far North (36), South-West (4) and North-West (12), in 2021. Children and Armed Conflict, Report of the Secretary-General, to be released in May 2022.
- 63 MSNA, Far North, IOM, July 2021.
- 64 MSNA, Littoral and West, OCHA, August 2020.
- 65 SMART-SENS Nutritional Survey 2021.
- 66 Cameroon gender profile, MINPROFF and UN WOMEN, November 2020.
- 67 Data on gender equality in Cameroon, Delphine Brun (GenCap), October 2019.
- 68 Cameroon gender profile, MINPROFF and UN WOMEN, November 2020..
- 69 According to EFSA, 38 per cent of households in the North-West and 31 per cent in the South-West are headed by females:
https://www.humanitarianresponse.info/sites/www.humanitarianresponse.info/files/documents/files/cmr_hno_2020_print2.pdf
- 70 A failure to address the vulnerability of men and boys, article written by Senior inter-agency gender advisor (GenCap), Delphine Brun, published by NRC in March 2021:
<https://www.nrc.no/expert-deployment/2016/2021/a-failure-to-adress-the-vulnerability-of-men-and-boys/>
- 71 mVAM Bulletin, WFP, September 2020.
- 72 A more in-depth analysis on why malnutrition, undernutrition and food insecurity disproportionally affect women and girls can be found in the narrative of the Nutrition Sector.
- 73 As per the Demographic and Health Survey (CSDS-V), 2018, page 50, 39 per cent of women and 42 per cent of men aged 15-49 experienced physical violence since the age of 15. More than four out of 10 women (44 per cent) and one third of men (33 per cent) aged 15-49 in union or in a broken union have experienced domestic violence including emotional, physical and/or sexual violence. CARE and Plan International found that overall, 56.4 per cent of women in union experienced at least one of these forms of violence in the North-West and South-West regions. CARE & Plan International, Rapid Gender Analysis, South-West and North-West Cameroon, May 2019.
- 74 Cameroon gender profile, MINPROFF and UN WOMEN, November 2020.
- 75 Annual statistics for 2021, GBV AoR Far North, January 2022.
- 76 Annual statistics for 2021, GBV AoR North-West and South-West, January 2022.
- 77 MSNA, Littoral and West, OCHA, August 2020.
- 78 INTERSOS, DRC & IRC, Protection Monitoring Reports for June 2021, as cited in an analysis by the Senior inter-agency gender advisor, Delphine Brun, December 2021.
- 79 A failure to address the vulnerability of men and boys, article written by Senior inter-agency gender advisor (GenCap), Delphine Brun, published by NRC in March 2021:
<https://www.nrc.no/expert-deployment/2016/2021/a-failure-to-adress-the-vulnerability-of-men-and-boys/>
- 80 Analysis by the Senior inter-agency gender advisor, Delphine Brun, December 2021.
- 81 The Cadre Harmonisé analysis from October 2020 estimated 2,685,039 people to food insecure (phase 3 to 5) from October to December 2020, while the Cadre Harmonisé analysis from October 2021 estimated 2,430,110 people to be food insecure from October to December 2021.
- 82 286,000 people were in need in 2020 in the Littoral region, 209,000 in 2021, and 177,000 people will need assistance in 2022.
- 83 42,000 people were in need in the Centre region in 2020, a number which rose to 131,000 in 2021.
- 84 Please see the severity scale of the Joint Intersectoral Analysis Framework (JIAF) in the annex for a description of the severity levels.
- 85 <https://drmkc.jrc.ec.europa.eu/inform-index>
- 86 <https://drmkc.jrc.ec.europa.eu/inform-index/INFORM-Subnational-Risk/Sahel/>.
The scores for the different regions of Cameroon were assessed by INFORM Sahel. The Global and the Sahel INFORM models use the same methodology but include different indicators, wherefore scores cannot be compared between the two models.
- 87 In October 2020, Cadre Harmonisé (Government of Cameroon, WFP, FAO, et al) estimated 629,787 people to be food insecure from June to August 2021. In October 2019, Cadre Harmonisé estimated 324,285 people to be food insecure from June to August 2020.
- 88 32,901 people were internally displaced due to the inter-communal clashes as of 4 January 2022 according to the Rapid Response Mechanism (RRM). 35,784 refugees who fled from Cameroon have been preregistered by UNHCR and the Chadian Government as of 31 December.
- 89 MSNA, NWSW, OCHA, September 2021.
- 90 MSNA, Littoral, OCHA, August 2021.
- 91 MSNA, Littoral, OCHA, August 2021.
- 92 MSNA, Littoral, OCHA, August 2021.
- 93 MNSA, NWSW, OCHA, September 2021.
- 94 MSNA, Littoral, OCHA, August 2021.
- 95 MSNA, NWSW, OCHA, August 2021.
- 96 32,901 people were internally displaced due to the inter-communal clashes as of 4 January 2022 according to the Rapid Response Mechanism (RRM).
- 97 Figures on learners come from MINEDUB and MINESEC school statistics.

98. Wasting and stunting figures from 2021 SMART survey, Ministry of Health Cameroon, February 2021
99. National Survey on Food and Nutritional Security in Cameroon, March 2021
100. Maternal and child undernutrition series, The Lancet journals, 2008:
<https://www.thelancet.com/series/maternal-and-child-undernutrition>
101. Gender, food security and nutrition in protracted crises, FAO, 2016.
102. SMART, Ministry of Public Health of Cameroon, UNICEF, UNHCR, 2021.
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104. Groce et al., 2013a.
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108. Health District of Goulfey, Kousseri and Makary respectively
109. Project to Strengthen the National Surveillance and Early Warning System (PRESNAP) -June 2021
110. Project to Strengthen the National Surveillance and Early Warning System (PRESNAP) -June 2021
111. Excluding CAR refugees and host population considering under the multisector chapter (124,000 people in addition)
112. Suivi de la sécurité alimentaire, Bulletin Nr. 5, PNVRSA, WFP, FAO, ACF, Solidarités International, Juillet 2021.
113. The Short-Term Impacts of COVID-19 on households in developing countries, World Bank Group, Tom Bundervoet, Maria Eugenia Davalos, Natalia Garcia, 2021.
114. The impact of COVID-19 on diet quality, food security and nutrition in low- and middle-income countries: A systematic review of the evidence, Clinical Nutrition, Fiorella Picchioni, Luis F. Goulao, Dominique Roberfroid, 2021.
115. MSNA, IOM, July 2021.
116. MSNA, NWSW, OCHA, August 2021.
117. DTM, Far North, round 23, displacement report, IOM, July 2021.
118. For more information on how the affected population has participated in the different phases of the Humanitarian Programme Cycle, please see chapter 1.4 on Accountability to Affected Populations in the 2022 Cameroon HRP.
119. <https://assessments.hpc.tools/km/2021-jiaf-guidance>
120. Step-by-step guidance on how to construct the dataset and implement the aggregation methodology is available on:
<https://reliefweb.int/report/world/04-joint-intersectoral-analysis-framework-11-humanitarian-programme-cycle-2022-may-2021>

HUMANITARIAN NEEDS OVERVIEW

CAMEROON

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