

CAMEROON NW & SW CRISIS – EXPLORATORY MISSION REPORT

September 2018

Sectors: Shelter, NFI, Food security, WASH, Health, Protection, Education

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Contact person:

- ✓ Anne Perrot-Bihina, Cameroon Country Director, perrot@carecameroun.org



Executive Summary

Regarding the current crisis, CARE Cameroun conducted an exploratory mission from September 3 to 9, 2018 in order to consolidate the knowledge of the South and North West, identify the main humanitarian needs and gaps. Due to access restrictions and security threats, the mission prioritized the assessment in the administrative divisions of Bamenda and Buea. The key findings from this assessment include:

- ✓ Both host and displaced persons are dramatically affected. Specifically, men and boys are extremely exposed with high risk of being caught, recruited or killed by either of the armed groups. Women and girls are also particularly vulnerable to sexual harassment and violence.
- ✓ Needs are enormous, so it is difficult to focus on one specific sector. But according to the FGD findings, shelter, food and protection stand out as most pressing needs. Many people have fled their homes and lost all their belongings. Also, 2 planting seasons have been missed. Increased market prices and lack of income have been reported. People are highly exposed to protection threats during displacement or hidden in the bush.
- ✓ The number of IDPs should be updated by IOM soon as the current figures are mostly related to the SW.
- ✓ Humanitarian coordination is just starting with a few actors already on site. Therefore, the affected population have received little assistance. Immediate response is highly expected to address the growing needs of the affected populations.
- ✓ Access is the main constraint for humanitarian assistance. Security challenges will also imply that activities will be implemented not far from the main cities/villages.

1. INTRODUCTION AND JUSTIFICATION

The current crisis in the North-West (NW) and South-West (SW) regions in Cameroon erupted in October 2016 with social instability. In November 2017, it degenerated into armed violence and insecurity. Clashes between non-state armed groups and country's defense and security forces have affected the civilian population, contributing to a massive displacement. Latest figures state that there are at least 246,000 displaced people in SW alone (estimates range from 110,000 to 449,000¹). More precise data will soon be available for the displacement in the NW, and the bordering regions (West and Littoral) and other parts of the country including the capital Yaounde after a planned DTM (IOM) exercise.

It was in this context that a CARE Cameroon mission was deployed to the NW and SW regions in September 2018. This mission was explorative in nature, with the intention to better understand the context, especially the security environment and other barriers for rapid response, to identify the top needs of the affected population, the most feasible and appropriate services to address these needs and to confirm the Due Diligence process with two local partners (previous partners of CARE for development initiatives).

¹ International Organization for Migration, UN Office for the Coordination of Humanitarian Affairs. August 16, 2018.

2. METHODOLOGY

The assessment was performed over 7 days by a multidisciplinary team to address the objectives. They went to 2 areas, Buea in the SW and Bamenda in the NW. Regarding the security constraints, not all the villages of the targeted districts were visited. During the assessment, population or household information about the number of displaced people in each quarter and village was not available.

Data has been collected and triangulated as much as possible. Secondary data were completed with direct observation, interviews of key informants², Focus Group Discussions (FGD) with host and displaced people in Buea (4 males and 9 females) and Bamenda (4 males and 4 females).

3. KEY FINDINGS

WHO are the most vulnerable groups in need of assistance?

There are some groups within the displaced population, which are particularly vulnerable in this crisis. When we asked this question during a Focus Group Discussion (FGD) in Buea, both men and women unanimously expressed their concern about *people that stayed behind in the bush* and could not leave (the majority of them are elderly people). Displaced people in the bush and non-urban areas are particularly exposed to the heavy rains, disease and insecurity.

In terms of gender vulnerabilities, many key informants considered *men and boys* extremely vulnerable due to the risk of them being caught, recruited or killed by one of the armed groups. *Women and girls* are particularly vulnerable to sexual harassment and violence. Females are estimated to make up the vast majority of the displaced population (68% according to OCHA).

University Students (in Bamenda), is another specific group heavily affected by this crisis. Many students lost contact with their families in the rural areas and as a result do not receive any money anymore from them. Hence, they are unable to pay their rent and risk becoming homeless. In general, children separated from their families is an issue.

Another group in need of specific attention is the *Bororo*. They are a *minority group* (previously nomads) in the NW. A representative from this group told us his heartbreaking story. His houses were burned, all his cows were taken or shot and armed men harassed his wife and children. Now he is in the city and staying with six persons in one very small room.

Host communities suffer immensely from this crisis. The influx of displaced populations is putting a strain on existing infrastructures. Some tensions are reported in terms of increased competition in the market space. Having said that, in general there is a very strong sense of solidarity for displaced people and host communities open their houses for them.

WHERE are the most affected areas?

The situation is constantly changing. People are moving depending on the security situation. Identifying exact locations where people stay is difficult and may vary on a week-to-week basis. Moreover, some

² UN, NGOs, local partners, local representatives, health facility staff

people fear being identified and registered, or lack proper documentation (most IDPs lost identification when they were fleeing their homes). Identifying and accessing IDPs is a major challenge for humanitarian actors during this response.

The majority of displaced people are staying with relatives or acquaintances in urban areas. Few people rent their own space and some are spending the night out in the open in parks (Bamenda). A considerable group of people was not able to leave in time and may be staying in the bush and forest areas.

Most displaced people are reported to be in the SW region. People seems to be scattered over many small and bigger towns. Large populations of displaced families can be found in and around Mbonge (73.000), Kumba I (20,800), Konye (17,391) and Muyuka (16,175) areas (source: OCHA). But also in the NW (in particular around Bamenda, Ndop and Mbengwi), smaller populations can be found (exact numbers still not confirmed).

In addition, many people may have fled to the bordering francophone regions of Littoral and West. Towns like Loum, Melong, Mbanga and Mbouda host huge IDP populations, and there seems to be an increasing trend of people leaving the NW and SW areas. In Manjo for instance 1 out of 5 household reportedly is hosting IDPs; in some towns, almost every family hosts IDPs. The reason for displacement to these areas is related to historical and ethnic ties between the regions.

Even in the big cities of Douala and Yaounde many IDPs from the NW and SW can be found. This crisis affects the entire country. Accurate and updated displaced population data is a key priority, but extremely difficult to get.

WHAT are the top needs according to affected populations and key informants?

Needs are enormous across all sectors. There is a need for everything in every sector as hardly any assistance has reached the IDPs to date. It is difficult to prioritise the sectors that require immediate attention. Priority also depends on location and vulnerability profile of IDPs. According to the FGD findings, shelter, food and protection stood out as most pressing needs. The following table provides a brief summary per sector.

| Sector | Main needs and gaps |
|----------------|--|
| Shelter | Shelter space is one of the most critical needs. The majority of displaced people are staying with relatives in urban areas. Some people rent their own space and some are spending the night out in the open in parks (Bamenda) or in the forest. Shelters are overcrowded. One respondent (host) in the FGD told us his household has increased from 4 persons to 22 persons. Some people commented on having to share a small room with both women and men. There is need for safe shelter spaces. Most IDPs lack funds to rent their own place. Some respondents suggested to use schools or other public buildings as temporary shelters. |
| NFI | Many people have fled their homes and lost all their belongings. Many of their houses have been burned down. Basic household items such as cooking utensils, WASH items and clothes are priority needs. |
| Food | Food initially was not a priority. However, it is becoming a priority due to 2 missed planting seasons, increased market prices and lack of income. The local economy is hugely affected by the ghost town days (where businesses shut down), access constraints and overall insecurity. Some IDPs mentioned negative coping mechanisms |

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| | such as reducing number of meals a day. Although it is difficult to confirm the nutritional status of the affected population, it is clear that the situation is rapidly deteriorating and urgent assistance is required. Due to the protracted nature of this crisis, income generation becomes a key priority as well. |
| WASH | Sanitation and hygiene is a concern in the urban areas due to overcrowded shelters and a strain on existing infrastructure. There is a fear for an outbreak of cholera and other water born diseases due to poor hygiene. Access to clean and safe water is limited. Besides, sufficient basic WASH items are lacking (in particular hygiene products for women). |
| Health | It is difficult for many IDPs to access health care facilities, as most of them do not have the right documentation with them, let alone sufficient money. Women were particularly concerned that their health would deteriorate over time. Malaria and the lack of mosquito nets were mentioned as huge concerns, as well as patients on ART lacking access to treatment since they left their treatment centers with no medical records |
| Protection | Protection needs are huge but difficult to be documented as people are afraid to talk. People are very concerned about their own security and often traumatised by violence they have experienced. Random killings and harassment are serious threats for IDPs in the bush. Many therefore stay inside the village, rather than going out. Shocking stories about rape and sexual violence have been reported. Many cases of unwanted pregnancies exist. It was reported for young girls and women the aspect of sex to survive. Lastly, it should be mentioned that many displaced people lost their ID documentation, causing immense problems for them in terms of accessing services. |
| Education | Most parents do not have money to pay school fees. This means most displaced children cannot access school. Besides, some schools have been attacked by armed groups, which has disrupted the educational system as well as created a perceived risk to go to school. |

In general there is assessment fatigue. Additionally, the situation may change overnight. Therefore, planning new assessments at this point is not a good idea. Some form of rapid needs assessment (sector specific) will need to take place once funding is confirmed and activities are about to start.

This crisis is protracted in nature and it does not look like the situation is going to be solved soon. Even in case of some sort of peace deal, long-term assistance and recovery programming will be needed to support these communities to get back on track.

Working through local partners

Working with and through local partner organisations is key. This should be a partner-led response due to the complexity of the crisis and the need to localize the response. There are some strong local organisations with an in-depth knowledge of the context, large community networks and experience managing development projects.

They will need capacity building to develop the skills required for humanitarian response.

Humanitarian Access

The situation in the NW and SW regions of Cameroon is volatile and unpredictable. The operational context is extremely complex with access and security challenges in abundance. The situation is fluid, with people still moving from one place to the other on a daily basis. There are a number of groups and fractions (10-15) present in these areas and it is complicated to understand who is who. Access is a major constraint. Roadblocks, unofficial checkpoints, ‘ville morte’ (ghost town days when businesses are forced to shut down), hostilities, kidnappings and random killings are part of the context. Reaching the affected populations is the key challenge in this response; often, IDPs even don’t want to be found (as they fear for their security). The conflict is intensifying and there is an alarming rate of killings going on. Some are fearing massive displacement, chaos and violence in the next period.

Coordination

OCHA is present with one staff in Buea (SW). Every fortnight on Fridays there is a general coordination meeting for all partners. Some working groups (protection, WASH/NFI, hum. access) will be initiated shortly. A civil-military coordinator as well as UNDSS officer are present in Buea. A similar structure likely will be set-up in Bamenda (according to OCHA).

4. RECOMMENDATIONS

The main recommendations for rapid assistance may be:

- ✓ Targeted locations might depend on security environment and logistic access. Further assessment would be needed to identify the locations prior to implementation
- ✓ Engage the local actors and both host and displaced populations in a rapid response
- ✓ Immediate response and appropriate funding are required as the affected populations have hardly seen any assistance
- ✓ SRH/Protection: focus on GBV and better access to health services and mitigation of risks linked to sexual health in the specific context
- ✓ WASH: urgent needs for safe water provision and support in hygiene kits
- ✓ Shelter: provision of NFI and support housing rental and facilities