Monthly Humanitarian Situation Report UNICEF CAMEROON
Date: 23rd September 2013

Highlights

- With the on-going crisis in north-eastern Nigeria’s Adamawa, Borno, and Yobe States, since June 10th significant number of refugees have come in through the South eastern part of Far North Region; UN and its partners are supporting the Government in providing early interventions to mitigate the impact of the crisis on refugees constituted mostly of women and children.
- A refugee camp is already established in Minawao (situated in Mayo Tsanaga division (Mokolo), some 30 kms from Mokolo and 130 km from the boarder, and 75 km far from Maroua). The number of refugees living in MINAWAO camp has increased from 833 to 1184 person including 297 under five children.
- All the 60 latrines and 30 showers planned as first WASH emergencies response have been constructed through the partnership between UNICEF and ACEEN.
- For refugee population, the screening and active case finding of acute malnutrition organized on September 16th found that 2.7% of total screened children (n=7/255) suffer from severe acute malnutrition and 10.5% (n=27/255) suffer from moderate acute malnutrition.
- The nutrition situation is mediocre in the Far North and North regions were GAM –Global Acute Malnutrition rates are 8.6% and 5.8% respectively as per results of nutrition survey with SMART methods.
- Results of local Immunization Days organized in Far North and North regions from August 30th to September 1st 2013 are now available. In 43 health districts out of targeted 1,599,369 children aged 0 to 59 months, 1,824,936 children were immunized against polio.

Doualare, Maroua, in the process of drawing water from a well provided by UNICEF, which serves more than 4,000 people.

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Situation Overview & Humanitarian Needs

About 5.9 million people live in the North and Far North regions; up to 1.18 million are children under five years of age.
Up to 12,732 children under five in Far North and 5,420 children under five in the North region suffered from severe acute malnutrition during the nutritional survey using SMART methods conducted during the lean season.

As of September 5th, UNHCR proceeded to the first transfer of 347 refugees, from Amchide to Minawao camp. Actually there are 1184 refugees in the camp, 585 men, 599 women and 297 children under five years.

The analysis of the data collected in July and August in the four regions (Far North, North, East and Adamawa) by Ministry of Public Health and UNICEF shows that the situation is better than in previous years at the same period. The prevalence shows a precarious situation in Far North and North regions (5-10% GAM). The SAM prevalence is high although below emergency threshold.

### Prevalence of acute malnutrition amongst children from 6 to 59 months SMART survey, July-August 2013

<table>
<thead>
<tr>
<th>Region</th>
<th>N</th>
<th>Global Acute Malnutrition</th>
<th>Moderate Acute Malnutrition</th>
<th>Severe Acute Malnutrition</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N</td>
<td>%</td>
<td>N</td>
<td>%</td>
</tr>
<tr>
<td>Far North</td>
<td>710</td>
<td>61 (8.6) (6.5-11.2)</td>
<td>48 (6.8) (4.9-9.2)</td>
<td>13 (1.8) (1.1-3.1)</td>
</tr>
<tr>
<td>North</td>
<td>651</td>
<td>38 (5.8) (4.3-7.8)</td>
<td>30 (4.6) (3.3-6.4)</td>
<td>8 (1.2) (.06-2.5)</td>
</tr>
<tr>
<td>Adamawa</td>
<td>417</td>
<td>18 (4.3) (2.0-8.9)</td>
<td>18 (4.3) (2.0-8.9)</td>
<td>0</td>
</tr>
<tr>
<td>East</td>
<td>492</td>
<td>15 (3.0) (1.7-5.5)</td>
<td>12 (2.4) (1.2-4.8)</td>
<td>3 (0.6) (0.2-1.9)</td>
</tr>
</tbody>
</table>

*The prevalences of GAM, MAM and SAM were calculated using SMART flags, the growth reference of WHO 2006. ** MAM: -3 Z-score ≤ W/H < -2 Z-score; ***SAM: W/H ≤ -3 Z-score and/or bilateral oedemas.

Concerning the crude Death Rate, the Far North region had the highest rate among children under five years old (1.65/10,000 children <5yrs /day) and close to emergency threshold. (2/10,000/day).

Consistent and some heavy rains have been reported in the Far North region till now and consequently reports regarding first few displaced families have also started coming in. There is a high risk of flood and cholera epidemic in case the rains continue the trend, which can aggravate humanitarian situation, especially the malnourished children and the refugees’ population.

With the serious deterioration of the security situation in Borno State, Nigeria, since June 10th an influx of refugees from Nigeria has been observed in bordering villages in Mayo Moskota subdivision, Mayo Tsanaga Department in the Far North Region. A refugee camp was settled in Minawao village, Mayo-Tsanaga division (Mokolo). Some immediate actions are now on going to build adequate infrastructure for 833 refugees already living in this camp.

As of August 19th UNHCR has pre-registered 1966 (out of 4225 new arrivals) in the department of Mayo Sava (Amchide). And, on August 19th, local authorities informed of the presence of 294 new refugees in the department of Mayo Tsanaga (Zhelevet). Families are accommodated by local communities. UNHCR is planning to start the transfer of 1966 refugees from Amchide to the camp on 24th August 2013. 500 refugees are part of the first transfer.

UN agencies’ interventions in Zelevet, Assighassia and in Minawao camp are on-going in order to ensure access to health, nutrition, water, and to avoid a deterioration of the humanitarian situation. An EPI immunization campaign together with deworming, Vitamin A to pregnant women has been carried out in Zelevet and Assighassia areas in Kozas health District. Some NFIs are being distributed, and 400 MILDA (LLMN) has been provided to the local health facility and refugees camp

The targeted caseload for 2013 for the two regions is 57,616 cases of SAM¹ and 93,456 cases of Moderate Acute Malnutrition (MAM). The new data from the SMART survey has shown lower

¹ Analyse globale de la sécurité alimentaire et de la vulnérabilité de mai 2011.
prevalence’s. A consensus meeting of the Nutrition Working Group led by Ministry of Health was held and had declared that the caseload will be review for 2014 programmatic purposes.

To ensure an appropriate continuous response during 2013 some concerns are taken into consideration: (i) high death rate, (ii) measles, cholera and malaria possible outbreaks, (iii) localized flooding and (iv) displaced population and security concerns.

As for refugee situation, immediate humanitarian needs include WASH, Health, Nutrition, Education and Protection sectors in order to avoid a deterioration of the humanitarian situation among refugees in the Cameroonian border villages. A refugee camp is already been settled in Minawao. 833 refugees (204 children under 5 years) are currently living in the camp of Minawao. This village is situated in Mayo Tsanaga division (Mokolo), some 30 kms from Mokolo and 130 km from the boarder, and 75 km far from Maroua.

### Estimated Affected Population

*(Estimates calculated based on initial figures from UNICEF Humanitarian Action Update February 2012, Cameroon General Census 2013)*

<table>
<thead>
<tr>
<th>Category</th>
<th>Total</th>
</tr>
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<tbody>
<tr>
<td>Total Affected Population</td>
<td>5,891,785</td>
</tr>
<tr>
<td>Children Affected (Under 18)</td>
<td>-</td>
</tr>
<tr>
<td>Children Under Five</td>
<td>1,178,357</td>
</tr>
<tr>
<td>Children 6 to 23 months</td>
<td>350,089</td>
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<tr>
<td>Pregnant women</td>
<td>368,186</td>
</tr>
<tr>
<td>Children Under Five with Severe Acute Malnutrition (SAM)</td>
<td>57,616</td>
</tr>
<tr>
<td>Children Under Five with SAM and medical complications</td>
<td>5,761</td>
</tr>
<tr>
<td>Total affected Population (Due to floods)</td>
<td>90,203</td>
</tr>
<tr>
<td>Children (Under five) affected</td>
<td>18,040</td>
</tr>
</tbody>
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*Data sources: Cameroon General Census 2010, Cameroon PEV 2012, Ministry of Health March 2012, SMART nutrition survey July 2011 carried out in North and Extreme North regions, BUCREP 2013.*

### Funding Update

<table>
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<tr>
<th>Appeal Sector</th>
<th>Requirements as per HAC</th>
<th>Funds received**</th>
<th>Funding gap</th>
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</thead>
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<tr>
<td></td>
<td>$</td>
<td>%</td>
<td></td>
</tr>
<tr>
<td>Nutrition</td>
<td>10,323,676</td>
<td>10,323,676.18</td>
<td>0.00</td>
</tr>
<tr>
<td>Health</td>
<td>600,000</td>
<td>395,412</td>
<td>204,588</td>
</tr>
<tr>
<td>WASH</td>
<td>3,243,154</td>
<td>3,243,154</td>
<td>0</td>
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<tr>
<td>Education</td>
<td>2,336,830</td>
<td>2,006,106.00</td>
<td>330,724.00</td>
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<tr>
<td>Child Protection</td>
<td>200,000</td>
<td>83,661</td>
<td>116,339</td>
</tr>
<tr>
<td>Other (HIV)</td>
<td>100,000</td>
<td>0</td>
<td>100,000</td>
</tr>
<tr>
<td>Total*</td>
<td>16,803,660</td>
<td>16,052,009.18</td>
<td>751,651</td>
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</table>

*The total does not include a maximum recovery rate of 7%. The actual recovery rate on contributions is calculated in accordance with UNICEF Executive Board Decision 2006/7 dated 9 June 2006.*
Inter-Agency Collaboration and Partnerships

As influx of refugees from Nigeria is ongoing, UN Agencies and partners in Far North Region are strengthening the coordination for a more efficient response:

- In Far North region, Inter Agency coordination meeting is held once a week, every Monday followed by the field visits by Inter agency coordination team WHO, UNFPA and UNICEF.
- In collaboration with the Ministry of health and the Regional Delegation of public health, UNICEF along with WHO held an external assessment of routine EPI from 12th to 16th of August 2013 with the support of international and national consultants. Preliminary results show that routine EPI faces many difficulties such as insufficient and poor management of cold chain, lack of supervision and, difficulties in vaccine delivery especially from health district to health areas level. The final report is awaited.
- The nutrition survey using SMART methods was led by MoH/UNICEF with collaboration of WFP, UNHCR and International Federation of Red Cross in July-August 2013.

Programme response

SAHEL NUTRITION CRISIS AND FLOODS 2013

<table>
<thead>
<tr>
<th>Sector</th>
<th>Estimated # / % coverage</th>
<th>UNICEF &amp; operational partners</th>
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<tr>
<td></td>
<td></td>
<td>UNICEF Target</td>
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<tr>
<td>Nutrition</td>
<td># of children &lt;5 with Severe Acute Malnutrition admitted to Therapeutic care</td>
<td>57,616</td>
</tr>
<tr>
<td>WASH</td>
<td># of malnutrition (MAM+SAM) affected children who receive hygiene kits with key hygiene messages</td>
<td>32 818</td>
</tr>
<tr>
<td></td>
<td># of SAM affected children who receive hygiene kits with key hygiene message</td>
<td></td>
</tr>
<tr>
<td></td>
<td># of nutritional centres delivering the WASH minimum package</td>
<td>470</td>
</tr>
<tr>
<td>Health</td>
<td># of children under one immunized against measles in the emergency affected Regions (Month target) July 2013***</td>
<td>140,912</td>
</tr>
<tr>
<td>Protection</td>
<td># of children with SAM who received psychosocial care through Child Friendly Spaces</td>
<td>3,000</td>
</tr>
</tbody>
</table>

UNICEF Operational Partners:
- Nutrition: MoH, Plan Cameroon
- WASH: MoH, Ministry of Water resources and Energy, Plan Cameroon
- Health: OMS, International Medical Corps
- Protection: MINAS
UNICEF and partners’ programming
Key results

Nutrition

- Joint supervision and technical support was ensured in 6 CNA of Maroua health district (Far North Region). The visits were organized in collaboration with the head of health service of the district and French Red Cross the 5th, the 6th and the 11th September 2013;

- Supervision and technical support was ensured in 2 CNA and 1 CNTI of Mora health district (Far North Region) from the 10th to the 11th September 2013 in collaboration with the head of health service of the district.

During these two joints supervisions, formative recommendations were done in order to respect the admissions and discharge criteria and to improve anthropometric measurement;

- A training course was organized in the CNTI of Mora for 9 nurses (3 from the CNTI) where the medical and nutritional treatment in the CNTI was reinforced especially for the treatment of the most frequent medical complications.

- An acceptability study (30 days trial) for the home fortification coupled with Infant and Young Children practices for children under two years old is ongoing in Garoua 1 health district. The elements of the study are key for (i) understanding of the feeding practices in North region and (ii) consider potential introduction of home fortification intervention for reducing anemia.

- A steering committee restitution meeting for the SMART survey was held on 19 September. The aim was to present/validate the results of the survey and to propose conclusive recommendations to nutrition sector.

- The monthly nutrition working group meetings were held in Maroua (Far North) on current September and in Yaoundé (National) on 6th September. Key issues discussed were: (i) results of SMART survey (ii) caseload for 2014 (iii) advocacy plan for nutrition and (iv) re-assessment of 2013 systems for procurement and distribution of nutritional inputs.

- Concerning the refugees, 12 severe acute malnourished children were receiving an adequate treatment with therapeutic foods and drugs in the outpatient center of Gadala this month. Four of them recovered while unfortunately one severe acute malnourished child with medical complication died in the CNTI of Mokolo.

- On September 16th, the screening and active case finding of acute malnutrition done on September 16 found that 2.7% of screened children (n=7/255) suffer from severe acute malnutrition and 10.5% (n=27/255) suffer from moderate acute malnutrition.

WASH

WASH response in Nutritional crisis

- Since the beginning of the year, 22,746 WASH kits have been distributed to families with malnourished children in Nutritional centres in the North (10,100) and the Far North (12,646); .
- 16,165 SAM and 6,581 MAM.

- Through agreement signed with Plan Cameroon, construction 22 blocks of latrines out of 26 planned in nutritional center has started.

WASH response for Nigerian Refugees in the Far North region

The implementation of the partnership signed between UNICEF and ACEEN (a local NGO) is ongoing. 27 new latrines were constructed in the extension areas of Minawao camp. Thus far a total
60 latrines, 30 showers, 20 garbage bins, 5 holes constructed for the 1184 refugees. Also 20 community volunteers were trained for hygiene promotion in the camp

**WASH response in schools affected by flood in 2012**

- The implementation of the PCA signed with SNV has been improved with the construction of 56 out of 60 planned boreholes which are in progress, as well as the construction of gender latrines in 10 of the 30 targeted schools.

**Health**

- Routine immunization data available as of July ending shows coverage of 90%, (126, 489 children < 1 years), 87% (122,232) and 84% (118,822) immunized with penta 3, polio 3 and measles respectively out the 140,912 children under one. 129,055 (45%) pregnant women received TT2+.
  (There is information lack of 2 months as the data needs 2 months to be confirmed and reported).

- Local Immunization Days were organized in Far North and North regions from August 30th to September 1st 2013 in all the 43 health districts and 409 health areas were involved. Out of the 1,599,369 targeted children aged 0 to 59 months 1824 936 (114.08%) received OPV with 111.3% in the north and in 119.3% far north regions.

- Results of local Immunization Days organized in Far North and North regions from August 30th 22nd to September 1st 2013. In 43 health districts targeted 1,599,369 children aged 0 to 59 months with 1 824 936 immunized against polio.

- With the rainy season malaria still remains the most common illness, followed by acute respiratory Tract infections and Gastro enteritis. No epidemic has been declared so far.

**Education**

An education coordination meeting held on August 19, 2013 at UNICEF with government and key partners to discuss the current status of the flood response (North and Extreme North), the new refugee influx from Nigeria, and pre-positioning for emergencies (cholera, floods, etc). Out of the 833 refugees registered in Minawao refugee camp, 142 (60 girls 82 boys) of them are of pre-school age and 173 (75 girls 95 boys) of primary school age. The commencement of the new school year on September 2nd poses a challenge for all of these vulnerable children.

- A construction engineer was deployed to Maroua for close field-based follow up of construction of classrooms.
- Environmental impact assessment was done by the “Institut du Sahel” in 15 schools in 6 subdivisions of Maga, Vele, Kaikai, Lagdo, Garoua II and Garoua III. Community mobilization and sensitization campaigns have started at Napanlan (Lagdo), Poumpoumre (Garoua II), Badoudji & Pitoayel (Garoua III). 424 parents were sensitized during the exercise which has already served to mobilise 329 children. This will be completed with additional advocacy and training targeting children, teachers and administrators on the use and upkeep of classrooms and supplies. Hygiene activities and training will also be provided in all of the schools that will benefit from WASH infrastructure investments.
- A two days’ workshop with project stakeholders was held in Maroua to adopt and validate modules for School Improvement Plan (SIP). The SIPs are aimed at helping enhance the capacity of the school administration and get their commitment to improve the recruitment, attendance and performance of the school; to develop and support specific school plans towards better accountability and efficiency and ; to promote the participation of parents and children in the development, implementation and monitoring of school improvement plans.
- Back to school packages to support 315 children in the Minawao (North) and 589 children in Nandoungue (East) refugee camps and supplies for children in 60 of the worst flood affected schools are being put together for distribution during the new school year.

**HIV and AIDS**
A visit was also made to the Gawar Refugee camp. The population in the camp consisted basically of a huge number of children, adolescents, youths, women and a few men who need to mobilized for HIV counseling and testing and for other HIV prevention, care and treatment services as necessary.

There is a Health post at the Gawar refugee camp which sorts out medical cases for referral to the nearest Community and Public Health facility at Gadala Situated at about 3 km from the Camp and to the Mokolo District Hospital situated around 20 km from the Camp where for appropriate health services

The Gadala Integrated health center has received reagents and commodities for PMTCT and for the Integration of HIV/counseling and testing for acute and severe malnutrition among children under five.

Protection

The preparation of the child protection emergency response plan related to Nigerian refugees is still ongoing together with key partners namely HCR, PLAN CAMEROUN and local NGOs in the Far North. The PCA with ALDEPA to prevent child abuses in the refugee camp and promote children resilience is about to be signed with a focus on capacities building of stakeholders on child protection response in emergencies. PLAN CAMEROUN has just completed a mission in the Far North to assess birth registration needs of refugee children and newborn within the camp. They will submit their results and proposal to UNICEF by the end of the month.

In collaboration with MINATD, terms of reference are being drafted to recruit a consultant to strengthen capacities of civil registrar on birth registration in the Far North and North regions. This includes needs assessment on the field, training plans and development of tools.

The preparation of the communication campaign on birth registration in the Far North with MINATD (Maroua; Meri and Minawao) is ongoing. This includes the development of tools and media plan, and community mobilization and sensitization.

70 social workers were trained in Meiganga during two five day training on psychosocial care for vulnerable children including those affected by emergency by DRAS Adamaoua and UNICEF.

Significant trends and analysis

Nutrition

Data trends from surveys reflect seasonal variations of acute malnutrition in the northern regions of Cameroon. During the lean season (May-August) the prevalence is higher that during post-harvest periods. This variation is not only due to food availability, as they are other main determinants linked to context: rainy season, environmental conditions, limited access to health and water, inappropriate feeding and hygiene practices.

The chart below shows that the situation is worst during the lean season (May-August) in the both regions but rates have decreased over years.
The 2013 prevalence estimates for the lean season are 30% and 40% lower than in 2011 for the Far North and North regions, respectively.

The increase of GAM prevalence from post-harvest season in 2012 to lean season in 2013 is 36.5% and 5.2% respectively for Far North and North region. The GAM prevalence in Adamawa although “acceptable” has increased by 54% from December 2012 to July 2013. Variations in the East are not shown and there is no lean season in the forest region but a period of less availability of some food products.

**WASH**

- Since the review of WASH tools used in nutrition program and the training of implementing partners in July 13, WASH kits are mainly distributed to MAS children. The percentage of families with malnourished children, beneficiaries of wash kits increased from 49% in July 2013 to 71% in September 2013.
• As the rainy season is ending in the Northern region, this drives away the risk of floods this year in those regions.

**Health**

• Measles surveillance in the North and Far North regions shows 146 suspected cases identified from 32th to 36th epidemic week, but no epidemic declared in both region.

**HIV and AIDS**

• An assessment of the situation will take place in the coming days in view of the integration of HIV screening and management with malnutrition in the health district of Mokolo and Yagoua in Far North Region, along with the health districts of Bertoua and Garoua-Bouli, in East region and the health districts of Meiganga and Nagaoundere Urbain in Adamaua Region.

• The incoming displaced populations from Nigeria constitute a major vulnerability factor for HIV infection for thousands of adolescents and women with a high risk of unprotected sex and even rapes and sexual violence.

• HIV commodities shortage is to be addressed and orders have been already made to that respect

• Coordination with other stakeholders for an efficient response needs to be done under the leadership of local authorities

• Capacity building of health care providers working in CAN and CNTI on HIV counseling and testing has been planned for 6 health districts (Bertoua, Garoua-Bouli, Meiganga, N’Gaoundere, Mokolo and Yagoua). The capacities of the Community and NGOs leaders as well as RCA will be strengthened on HIV counseling and testing among acute and severe malnutrition children under in five in 6 health districts.

• Sensitization campaigns will be organized on STI/HIV prevention including Testing for HIV.

• HIV testing for malnourished children will be integrated for the Mokolo Health district.

**Protection**

• Child protection cases (child neglect, child abuse, child exploitation, harmful practices) continue to be reported in the Far North, North and East to the DRAS and NGOs.

• HCR has pre-registered 64 unaccompanied children from Nigeria requiring proper care and support.

**Education**

• The need for a strong monitoring and evaluation component of the construction works prompted a coordination meeting involving Plan Cameroon, UNICEF’s construction oversight engineer and the BET in charge of infrastructure quality control in Maroua. The outcome of this meeting was the adoption of construction monitoring tools.

• A car destined to support the Ministry of Basic Education field monitoring of the flooded region arrived at UNICEF Yaounde and is being positioned for handover to the government for use in Maroua by the end of the month.

• To date, an environmental impact assessment by the “Institut du Sahel” was completed in 26 out of 30 schools.

• Following a late August field mission by the construction engineer and complemented by reports from the implementing partners engineer the progress of work for construction of classrooms for 30 schools as follows:
  - 8 schools were close to completing classroom foundations work in progress (Gaya, Guirvidig, Palia, Louvong, Poupoure Petit paris, Badoudi, Pitoayel)
  - 13 schools were in the process of beginning construction work and pegging (Barkaya, Mouktang, Gueme, Mogoye Bangola, Dilga Mousgoum, Alvakaye, Doueing, Mandjour, Sara sara, Douguia Molodia, boudoufka, Zokok-Laddeo)
9 school sites have problems due to floods making it impossible to access or commence work (Pakistan, Kinzayakeu, Houmi, Waidouwa, Blamatoko, napanla, gabde, Kongrong-siouto, Manga)

- Despite heavy rainfall in the North and Far North Regions, community sensitization campaigns have continued.
- A meeting with school inspectors in Maroua provided the window to adopt a calendar for the elaboration of the 30 School Improvement plans. Complementing this effort, the terms of reference for a Training of Trainers on Disaster Risk Reduction has been prepared.

Critical supplies in pipeline or distributed

**Nutrition**

10,464 cartons of RUTF, 106 cartons of F100, 141 CAR F75, 4 cartons of ReSoMal are being distributed in outpatient program and inpatient facilities in the North and Far North regions. The next distribution plan is under preparation to start in October.

**WASH**

In order to increase the number of nutritional centres with a minimum WASH package, the process of construction of gender latrine in 30 health centre of the North (10) and Far North (20) regions has been launched with the selection of private companies.

- 12,986 out of 20,000 WASH kits prepositioned at the regional and health district level since June 2013 have not yet reached all the health area (nutritional centre). With the end of the raining season in the North and Far North region, focus will be on their dispatching from the health district to the nutritional centres.

**Education**

In anticipation of the next school year, essentials textbooks for grade 1 to 6 were ordered for 30 schools. In addition, tenders were launched for the equipment of 60 classrooms (benches, teacher’s desk plus chair and cupboard.)

**Health**

2,896,000 oral polio vaccines doses were made available for the LIDS campaign in the north and far north regions.

**Protection**

23 Standard Recreation Kit, 5 motorcycle and 480 civil registrar documents will be ordered for Minawao refugee’s camp.

**SUPPLY & LOGISTICS**

- 187,212 US$ of HIV test kits and diagnostic equipment distributed.
- 25,000 WASH kits distribution started
- 652,470 of RUTF, nutrition & anthropometrics supplies distributed (end of August, beginning of September)

**HUMAN RESOURCES**

- The contract of the TA Health Specialist is extend till beginning of September 2013.
- Two WASH emergency consultants have been recruited and posted in the North and Far North.
- The process has begun for recruiting a National Officer for Child Protection / OVC specialist (NOC) for both emergency and non-emergency activities to be based in Maroua for 6 months.

*Total # of staff under recruitment (temporary and fixed: surge) and total staffing needs unfunded*
Next SitRep October 2013
For further information, please contact

<table>
<thead>
<tr>
<th>Name: Zakari Adam</th>
<th>Name: Vikas Verma</th>
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<tbody>
<tr>
<td>Deputy Representative</td>
<td>Resource Mobilisation Specialist</td>
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