

UNICEF Cameroon Situation Report

January 2013

Highlights

- No funding received during the reporting period. USD 11,1 million needed to respond to emergency in 2013.
- SMART Nutritional post-harvest season, survey has been conducted in November and December in five regions of Cameroon; preliminary results show the prevalence of global acute malnutrition of 6.3% in Far North region 5.5% in North.
- Widespread flooding which took place during August – November in the North and Far North districts of Cameroon continues to cause extreme hardship for the local populations. Crops have been destroyed, which may lead to serious food shortages. Though the water has receded most of the internally displaced people - IDPs in Far North sites are not willing to go back, waiting for local authorities to launch a resettlement program. Most of the IDPs in North region have returned home. In Logone & Chari Prefecture (Far North), local administration has dismantled the 2 urban IDPs sites in Kousseri, leaving hundreds of families returning to their neighbourhoods in precarious conditions.
- 15 638 WASH kits distributed to families with severely malnourished children in 435 Nutritional centres for the period May to December 2012. 4 662 IDPs benefited from family WASH kits.
- 80 latrines equipped with hand-washing facilities build and 30 boreholes constructed/rehabilitated for IDP and vulnerable population. Preparations of the sensitization campaign against cholera and the vaccination campaign against measles in the health district affected by floods is underway.
- More than 11000 children have been reached through Child Protection interventions in partnership with 2 NGOs. 62 child protection and community based workers have been trained on psychosocial support.



Women in IDP camp of Badoudi (Garoua3) filling water in a hand washing kit for latrine. Photo UNICEF© December 2012./Ekah Ekwele

1. Situation Overview and Humanitarian Needs

The North and Far North regions were affected by the **Sahel crisis in 2012**. About 5.9 million people live in those regions; up to 1,18 million are children under five years. The percentage of the population suffering food insecurity is above 15% in the two regions.

Estimated Affected Population From the Nutritional Crisis	
<i>Sources: UNICEF Humanitarian Action Update February 2012, Cameroon General Census 2010, Cameroon PEV 2012, Ministry of Health March 2012</i>	
	Total
Total Population	5,891,785
Children (Under 5)	1,178,357
Children (6 to 23 months)	350,089
Pregnant women	368,186
Number of Internally Displaced Persons- IDPs due to flooding	90,203
Number of primary schools affected (11 in North and 159)	170
Number of school children affected	61,646

The **nutrition situation for 2013** seems to be similar as there is a structural vulnerability of populations of northern regions that increases with each crisis. As per the survey of July 2011 14.6% (North) and 17.9% (Extreme North) of households do not have sufficient food availability during lean season and 30.3% of the rural population is vulnerable to food insecurity. Coping strategies of poorest households is to reduce consumption of food. A crops and food security assessment mission is ongoing by MINADER, WFP and FAO. Population living in north and far north regions is even in post-harvest season the most affected by acute malnutrition.

A nutrition SMART survey conducted by Ministry of Public Health with UNICEF in December 2012, shows that 1.1% of 6-59 months old children in the Far North region and 0.7% in the north region suffer from severe acute malnutrition. Some aggravating factor are still present, like low access to sanitation and clean water or the incidence of diarrhea and other childhood disease.

The estimated burden for 2013 for the two regions is 57,616 cases of severe acute malnutrition (i) and 93,456 cases of moderate acute malnutrition. UNICEF is planning to conduct a SMART survey in May 2013, during the lean season. For ensuring an appropriate response some constraints will be taken into consideration (i) weak capacities of government in the management of acute malnutrition, (iii) lack of some infrastructures- roads, (iii) unreachable population during rainy season and (iv) weak capacities of resilience amongst population.

Burden Estimated caseload acute malnutrition 2013	Total
<i>Sources: UNICEF Humanitarian Action Update February 2012, Cameroon General Census 2013</i>	
Children Under Five with Severe Acute Malnutrition (SAM)	57,616
Children Under Five with Moderate Acute Malnutrition (MAM)	93,456

With the arrival of the mid-year rainy season in August 2012 there were **significant floods and population displacements in localised areas**. This has also lead to an increased risk of a cholera epidemic, increase in incidences of diseases such as malaria, as well as losses in agricultural production and harvest, resulting in food shortages, further aggravating nutritional status and increasing the vulnerability of children.

Waters have now receded around the Benoue River in the North and in Mayo Danay, Kousseri and Blangoua sub divisions in Far North. In the North, the vast majority of IDPs have returned home while in the Far North most of IDPS in sites are not willing to go back, waiting for local authorities to launch a resettlement program. Overall humanitarian situation has stabilised in the Far North IDPs sites, however situation in the areas of origin, where some families are returning, is of concern as crops and houses have been destroyed. In Logone & Chari Prefecture (Far North), local administration has dismantled the 2 urban IDPs sites in Kousseri town early January 2013, leaving hundreds of families returning to their neighbourhoods in precarious conditions as houses have collapsed and some stagnant water remains.

UNICEF is planning a rapid assessment in the remaining IDPs sites as well as in the main areas of return previously flooded. It is expected that IDPs will remain in site for some more months until they are allocated land and definitely resettled, possibly before the arrival of the rainy season in May.

2. Inter-agency cooperation

- Through targeted supplementary feeding (TSF) with RUSF in CNAs, WFP has reached a total of 5,622 MAM children and 2,662 pregnant and lactating women suffering from moderate acute malnutrition from September to November in the Far North and 69,587 MAM children and 30,141 pregnant and lactating woman from January till November in the North region.
- For the prevention of peak of acute malnutrition, a blanket feeding was implemented by WFP in four Health Districts in Logone and Chari division which are particularly vulnerable. Some 14,040 children from 6 to 23 months were assisted and received monthly nutritional ration of 1,38kg of RUSF from August to December 2012
- Through IMCI- Integrated management of childhood illness, WHO supported the Ministry of Public Health in training of 352 health agents from facilities and integrated modules of the management of acute malnutrition and information system.

3. Emergency Response

3.1 Emergency Response Nutrition

The UNICEF nutrition response for **the Sahel Crisis in 2012** was based on the gradual scaling of program management of acute malnutrition and the improvement of the quality of services according to national guidelines, in cooperation with Ministry of Public Health and partners. Up to 435 nutrition centers were strengthened with training for health staff, supplies and equipment and supervision. Main constraints are accessibility of some centers, slowness of data collection, and weak capacities from government partners and not enough quantity of skilled NGOs.

Estimated coverage North & Far North regions Jan –December 2012	UNICEF & operational partners		
	UNICEF Target	Cumulative results (#)	% of Target Achieved
Children <5 with Severe Acute Malnutrition admitted to Therapeutic Feeding programs	55,119	40,300	73
Children <5 in Therapeutic Feeding Programmes of who have recovered	41,250	14,215	34
Recovery rate	70% (*)	14,215	60
Defaulter rate	<15%		32.5
Number of health centres with severe acute malnutrition treatment	435	435	100
<i>Implementing partners: Ministry of Public Health, French Red Cross, OFSAD, Plan Cameroon</i>			

(*) as per national protocol of management of acute malnutrition

468 nutrition centres (427 CNA and 42 CNTI) have been included in the mapping, Out of these 468 centres 178 are functional (have all inputs needed to manage SAM cases) and they cover 70% of estimated population in these regions. Access to water, electricity and sanitation are still major constraints in these centres.

SMART nutrition post-harvest season, survey has been conducted in November and December in five regions of Cameroon; preliminary results show a precarious situation (GAM >5% <10%) in two regions with prevalence of global acute malnutrition of 6.3% in Far North region 5.5% in North regions and acceptable (<5%) situation in other 3 regions: 3.5% in the East, 2.9% in Adamawa 2.4% in South region and 1.5% in North West. No region shows severe acute malnutrition rates above the emergency threshold of 2%.

Activities carried out during the reporting period

1. Up to 40,300 cases of severe acute malnutrition have being admitted in the CNA and CNTI in the two regions.
2. Supervision, technical support and the implementation of program was ensured in 9 health districts in the Far North.
3. The monthly nutrition working groups meetings, were held in Yaoundé (national) and in Garoua (North) on 6th Dec and in Maroua (Far North) on 13th Dec. January meetings are organised in Yaounde on the 24th and in Maroua on the 21st

3.2 Emergency Response WASH

UNICEF signed partnership agreements with 7 NGOs or private enterprises (CODAS Caritas Garoua, 2SW and Cameroon Red Cross in the North; ADRA, ACEEN, GEOFOR and Foundation Bethlehem in the Far North) to improve the WASH standards (SPHERE) in IDPs sites and communities affected by flooding in North and Far North regions. Moreover, through the regional authorities in both regions, UNICEF has largely contributed to cover WASH needs in IDPs sites during the peak of emergency (WASH Kits, PUR packets, Aquatabs, Soap, Chlorine ...).

Within the framework of the nutritional crisis, the WASH Response continues to target severely malnourished populations (focusing specifically on children less than 5 and pregnant / breast-feeding women) in all the 43 health districts of the Far North and North regions. WASH response in Nutritional crisis aims to prevent and protect malnourished children from diarrheal diseases and cholera that is recurrent in those two regions. The Response includes the promotion of hygiene, the capacity building of the community volunteers, the distribution of the WASH KITS to families, nutritional therapeutic centres (CNTI), ambulatory nutritional centres (CNA), and to the schools equipped with school canteens and finally the promotion or construction of latrines and boreholes.

Despite the fact that Zero cholera deaths had been reported in those regions in 2012 and none cholera cases have been registered since 4 months (1 case in the North Region week 26 according to MAPE 2012 North report), the resurgence of cholera in some cross border health districts in Nigeria led the strengthening of prevention activities (awareness, pre-positioning of Health and WASH supply) in all Health district of the North and far north Region, with focus on cross border health district.

Estimated coverage North and Far North regions (43 districts)	UNICEF & operational partners 2012			
	UNICEF Initial Target	UNICEF New Target*	Cumulative results (#) April – December	% of Target Achieved April – December
For Sahel crisis				
Emergency affected population provided with access to safe water	16,000	55,000	15,638	28.4 %
Emergency affected population provided with key hygienic supplies	16,000	55,000	15,638	28.4 %
Emergency affected population provided with access to appropriately designed toilets	5,000	10,000	6498	65 %
Number of Nutritional centres with the minimum WASH Package	195	435	177	40.7 %
Number of children with SAM benefiting from hygiene kits and key hygiene messages	55,119	55 119	15 638	30.0
For the Floods				
Flood affected population provided with WASH kits		11,195	4,662	41.7 %
Implementing partners: Ministry of Water Resources and Energy, Ministry of Public Health				

**In order to scale up the WASH response in the nutritional crisis there has been between 100% to 243% increase in targeted population.*

*** A WASH Kit contains; 1 bucket with lid, 1 cup 500ml, 1 cup 200ml, 5 pieces soap, 1 plastic kettle, Packet (2) of water purification tabs.*

Activities carried out during the reporting period

1. Two national WASH consultants based in Garoua (North) and in Maroua (Far North) have been recruited for 6 months to continue to carry on WASH response activities for emergencies in those two regions.
2. Field visits were conducted in the IDP sites of Kousseri, Blangoua, Bargaran (20-23 December 2012) and in some communities in the Far North region in order to monitor WASH project (boreholes, latrines, hygiene promotion) implemented by some partners (ACEEN, ADRA, FBM and Geofor company). In the IDPs sites of Badoudi and Bockle in the North region, UNICEF worked with WASH committee to address the management of water and sanitation infrastructure.
3. UNICEF has contributed to increased access to potable water in nutrition centres and vulnerable school and communities: 30 out of the 39 borehole wells that need to be constructed / rehabilitated are now functioning.
4. Sanitation facilities are increasing in IDP camps: In partnership with some NGOs (ACEEN and Cameroon Red Cross), IDPs have started benefitting from 80 latrines equipped with handwashing , 18 showers, 15 bins and rubbish pits, have already been constructed. The construction of other sanitation facilities is on-going.
5. So far, 473 local partners and trainers (eleven people per district) were trained on the following themes to carry WASH responses in Nutritional crisis: the link between lack of hygiene, diarrheal diseases and malnutrition; identifying transmission vectors of diarrheal diseases and barriers to preventing faecal-oral transmission; and simple water purification techniques for the household level.
6. Four teams composed of Ministry of Water Resource and Energy and Ministry of Health staffs with the support of UNICEF conducted a field visit from 3 to 8 December 2012 to evaluate the level of construction of latrines by community members in 53 communities in the North (31 villages) and Far North region (22 villages).
7. Of the 24,000 WASH kits prepositioned at 435 nutritional centres between May and November, 15,638 have already been distributed to families with severely malnourished children: (11,365 in the Far North and 4,273 in the North).
8. In response to the flood emergencies in the Far North and North Regions, Until now UNICEF has provided NFIs (WASH kits, Pur sachets, Aquatabs, Soap) to meet the basic needs of roughly 33,000 IDPs (4,662 families) in the North and Far North Regions (Mayo Danay and Logone Chari Departments)
9. Media training was held in December 2012 on the prevention of cholera in the North and Far North for 13 media persons couple with 40 community relays. They will now help in broadcasting 06 new programmes with messages in local languages on how to prevent waterborne diseases amongst cholera and how to have and keep clean drinkable water.

UNICEF and Partners programming

UNICEF partnership with & NGOs and private enterprises has helped perform following work so far:

In Far North Region:

- ADRA: construction of 50 temporary latrines and the promotion of hygiene best practices among an estimated 3 500 IDPs of **Kai Kai** (construction completed, promotion on-going)
- ACEEN has finished the construction of 60 temporary latrines, waste pits, hand washing material in IDPs sites and continues promoting hygiene best practices in **Kousseri, Blangoua (50 latrines) and Bargaram (10 latrines)**.
- Foundation Bethlehem: construction of 3 borehole wells and the rehabilitation of 2 borehole wells in the sites Wina, Gobo and Guere (on-going)

In North Region:

- Codas Caritas Garoua to rehabilitate 7 boreholes in 7 affected communities in the region (Boule village, Bibemi school, Dolla school, Ouro Bagongon, Thieratche, Babla school, and Burkina).
- Red Cross has finished the construction of 14 latrines and 10 public showers in IDP camp of Badoudi (14 latrines and 8 showers) and Bockle (02 showers) in Garoua 3. All the blocks of latrines have been equipped with a hand washing kit each (Badoudi: 6, Bockle: 1). In Badoudi two waste pits has also

been constructed for waste management. Forty community volunteers have also been trained and hygiene promotion activities conducted.

- 2SW: rehabilitation / construction of boreholes in 12 communities in the region (to date 75% completion).

3.3 Emergency Response Health

The UNICEF health response aims to ensure access to the essential health services for children under five, to pregnant women and nursing mothers in the 43 health district of the North and Far north regions, as part of the Sahel Crisis response.

During this period, health activities relating to the Sahel crisis have been marked by oversight activities of routine EPI, monitoring of the management of health inputs at the disposal of health Districts and the inner therapeutic nutrition centers and outpatient nutrition centers for the systematic treatment and treatment of malnutrition related diseases.

Though the rainy season is coming to an end, the flood emergencies in the North and Far North regions continue to take priority for the Emergency Health team. The floods which have caused the displacement of tens of thousands of people are beginning to recede but the numbers of Internally Displaced People - IDPs is not yet decreasing. Although floods are receding, it is expected that the coming months will be very difficult in terms of management of health problems in communities or health structures, since health supplies, as well as drugs have not been reinforced accordingly.

The interventions related to the floods have been marked by the monitoring of preparations of the sensitization campaign against cholera and the vaccination campaign against measles in the health district affected by floods.

Activities carried out during the reporting period

1. In the North region, 31 health providers from Guider (17) and Mayo-Oulo (14) Health Districts have been trained in clinical integrated management of diseases of the child from 19 to 30 November 2012
2. Formative supervision of routine EPI and monitoring of the management of drugs supply in Health district, inner therapeutic nutrition centers CNTI and CAN outpatient nutrition centers took place in the health Districts of Yagoua, Vele, Guere in the Far North region and in the health district of Lagdo, Pitoa and Guider in the North Region.
3. Meetings were held with EPI Regional unit and WHO team in the Far north Region as part of preparation of the preventive vaccination campaign against measles. Technical notes and budgets related have been transmitted to the central level. On the field, preparations continue by raising awareness of populations and health providers.
4. Arrival and reception of a gift of drugs and materials including Long Lasting Insecticide-Treated Mosquito Nets, drugs, medical and surgical equipment as well as motorcycles (16) and bicycles (67) designed for health units affected by floods for the sensitization campaign against cholera in The Far-North and North Regions, and for communities relays in North Region. The distribution among these two regions is still to be done.
5. A health cluster meeting was held in each of the 2 region during this period. In the North Region, Cluster meeting took place on November 23th. The overall situation generated by floods have been analysed and additional needs were defined. These needs are in terms of promotional, preventive and curatives actions for the populations affected, as many of them are returning back to their villages where basic commodities have been destroyed.
6. In Far Northern region, a health cluster meeting was held November 22th. It is also noted that the though the situation has stabilized in the 4 health Districts affected by floods in Mayo-Danai division where 21,947 people were directly affected and still need a particular attention. However the situation remains difficult and very precarious in the Logone and Chari division where the needs are also in terms of shelter, blankets, hygiene and sanitation, preventive and promotional actions focussed on the prevention of cholera, measles, and meningitis as well as strengthening basic health care.
7. Participation in the evaluation meeting of routine EPI held in Maroua the 4th January for the Far-North Region.

8. A KAP survey for Essential Family Practices was carried out in 10 health districts of the North and 10 health districts of the Far North using quantitative and qualitative methodology. The preliminary report of key results is ready.

UNICEF and Partners programming

In collaboration with the ministry of health, UNICEF provided funding to support activities for the expanded programme of immunization (EPI+) throughout the North and Far North regions. This included supervision of EPI+ activities (and the management of drugs) in the Far North region. In the North region, all the 15 health Districts received the funds, and in the Far North Region 15 health districts (Bogo, Guere, Kaele, Kar-Hay, Kousseri, Maroua-Urbain, Maroua Rural, Meri, Mora, Moulvoudaye, pette, Tokombere, vele and Yagoua) benefited from these funds. Activities continued in the field and the evaluation of these activities will be done after receiving all data.

UNICEF in collaboration with the Ministry of Health and with participation from the various ministries, NGOs and local organisations has created the inter-sectorial C4D working groups for the North and Far North regions. Currently these consist of 2 bi-regional coordinators, 4 regional coordinators, 36 regional members and 200 District members across the 2 regions.

MONITORING OF YOUNG CHILD SURVIVAL ACTIVITIES

Routine immunization (EPI)

Routine immunization (January to November)				
Immunization	North		Far North	
Cumulative estimated routine vaccination Target 0-11	80,254		134 376	
Coverage target by end of 2012 for penta 3	88%(National and Regional)			
	Number Vaccinated	%	Number Vaccinated	%
Penta 3	63,363	79	118,333	88
Poliomyelitis 3	61,137	76	116,545	87
Measles	59,680	74	116,419	87
Yellow Fever	59,680	72	115,522	86%
Completeness		100%		100%

In comparison to the earlier data, there is no particular change in Far North Region, while in the North region, though still not very high, we notice a slight increase in the coverage. This is certainly due to the strengthening of EPI routine activities, which is still to be confirmed as an empirical evidence.

Epidemiological surveillance

The epidemiological surveillance of diseases with epidemic potential shows the following situation at the 52th week (December 31st) in both regions. In the past 8 weeks, no epidemic has been recorded.

Cumulative number of cases of diseases with epidemic potentials

Disease with epidemic potential		FAR NORTH					NORTH				
		W* 45	W 46	W 47	W 48	Cumulative Total ('W1-W48)	W 45	W 46	W 47	W 48	Cumulative Total ('W1-W48)
MEASLES	Case (C)	1	2	0	0	3,937	0	1	0	0	4,052
MENINGITIS	C	0	2	0	4	238	13	11	1	1	240
YELLOW F.	C	1	0	1	1	83	4	2	1	1	87
CHOLERA	C	0	0	0	0	0	0	0	0	0	1

A.F.P.	C	0	0	0	1	43	3	1	3	1	33
NN TETANUS	C	1	0	0	0	20	0	0	1	1	6
	Death (D)	0	0	0	0	0	0	0	0	0	1
No reports		25	24	24	23		15	15	14	14	
Completeness		89 %	86 %	86 %	82 %		100 %	100 %	93 %	93 %	
Disease with epidemic potential		FAR NORTH					NORTH				
		W* 49	W 50	W 51	W 52	Cumulative Total (*W1-W52)	W 49	W 50	W 51	W 52	Cumulative Total (*W1- W52)
MEASLES	Case (C)	0	0	0	1	3,938	4	0	0	2	4,058
MENINGITIS	C	2	0	0	0	246	0	13	2	9	265
YELLOW F.	C	0	0	1	4	109	1	0	1	0	88
CHOLERA	C	0	0	0	0	0	0	0	0	0	1
A.F.P.	C	1	1	1	0	53	1	0	2	0	36
NN TETANUS	C	0	0	0	0	25	0	0	1	0	7
	Death (D)	0	0	0	0	5	0	0	1	0	3
No reports											
Completeness											

3.4 Emergency Response Education

During the reporting period there was a change of supervisory authority as the regional delegate of basic education in the Extreme North was replaced; this coincided with school holidays that lasted from December 14, 2012 to January 2nd, 2013.

The Ministry of Basic Education emergency team finalized their assessment on December 11, 2012 and brought to light the situation of newly affected schools located in Logone and Chari division (Far-North). The data of all affected schools (update of first data collection effort plus new data collection) was finalized by the team which is in the process of analysis for appropriate planning for a medium and long-term response. A reporting tool to provide monthly education data updates of affected schools has been developed. The first monthly data effort will be carried out in the last week of January.

The collection of pre-school data for both North and Extreme North regions was undertaken. This effort provides key data aimed at addressing both school and nutrition needs for 3-5 year old children. Preliminary analysis of data shows significant challenges related to school feeding, nutrition and water and sanitation availability in schools.

5 tents financed by WCARO arrived in December and were immediately deployed to the Extreme North. While flooded education districts are now accessible, the needs for temporary spaces for schools completely destroyed are high. Most material (textbooks, a cholera campaign package, tents, SIB) are positioned at the regional delegation of Far-North and North) for the textbooks distribution campaign and "My schools without cholera campaign" which will be launched by the Minister of Basic Education and the Representative during the week of February 18 in Maroua and Garoua.

Activities carried out during the reporting period

1. Assessment of new and old affected schools by Ministry of Basic Education assessment team in Far-North and North.
2. Establishment at local level of a mechanism for monthly reporting in the schools affected starting in January.
3. In addition to the two tents already installed in Kousseri, 6 large UNICEF tents were installed in Kalao, Bangal, Sokomaye, Nguidouang, Houmi, Dougui schools in Kai-Kai district allowing an additional 600

children to resume school. 13 tents have been prepositioned at the regional delegation of Far-North for immediate distribution.

4. A PCA with a local NGO to build a cost affordable model of temporary learning spaces adapted to the Sahel context has been submitted for review for finalization at the end of January.
5. The following school supplies were prepositioned at regional delegations for immediately deployment (North and Far-North) to service the needs of flood-affected schools: 80 "Schools in a Box", a package of essential text-books. 50 additional SIBs to service the flood affected schools have arrived in Yaounde and will be deployed to the Extreme North this week.

UNICEF and Partners programming

A cost affordable model for temporary learning spaces critically needed in flooded schools of the Extreme North was finalized with the regional delegation and a local NGO (name of the NGO?).

3.6 Emergency Response Child Protection

Some cases of violence and harmful practices against children (rape; forced child marriage etc) were reported to ALDEPA in the Far North following the setting up of the Committee on Violence Prevention in all flood affected sites of Maga (Far North). More than 11,000 children and their families have been reached through activities aiming to prevent violence, psychosocial support, reconstruction of birth registration, and direct support to families in partnership with ALDEPA and DRAS in the North and Far North. 62 child protection and community-based workers have been trained on psychosocial support.

Activities carried out during the reporting period

1. RESAEC : 1,500 parents affected by the floods in the 5 camps (mainly women) have been sensitized on the importance of birth registration; and 950 birth certificates are now being reconstructed for those whose certificates were lost/damaged at a reduced cost as a result of a successful advocacy mission of UNICEF/ RESAEC to the concerned local authorities in December
2. ALDEPA: 5 child friendly spaces have been set up in the 5 sites of Maga and were used to provide 889 children educative and recreational activities. 39 community based workers have been trained on counselling; gender based violence (GBV), non-discrimination, and/or psychosocial issues. They used their acquired knowledge to sensitize all the affected people and children in the 5 camps on violence and harmful practices prevention, and reached 414 children through providing psychosocial support. A coordination and referral mechanism as well as the Committee of Violence Prevention has been set up and since then a few cases of violence and harmful practices against children have been reported. By February 2013, two thousand flood affected children and their families should be reached through prevention and response activities to reduce trauma and violence, as well as support the resilience and wellbeing of affected children and their families by 2013.
3. DRAS: UNICEF and DRAS in the North and Far North deployed the trained social workers who reached 10,000 children affected by the floods in selected sites as well as host families. The parents of 284 children aged between 0-5 years suffering from malnutrition were provided psychosocial support and parental education. More specifically the trained social workers under DRAS provided psychosocial support (groups discussions; individual consultation; counselling etc.); while the animators of the Ministry of Youth and Civil Education (MINJEC) reached 5,000 children through recreational and sensitization activities on the rights of the child. Moreover, direct support was given to the 500 most vulnerable children and their families.
4. UNICEF and MINAS supported a pool of 12 trainers in the North and Far North to prepare and organize two four-day training workshops on psychosocial support for 50 child protection workers under DRAS, with the aim of identifying , conducting needs assessment and delivering services to affected and vulnerable children.
5. In collaboration with Ministry of Territoriality Administration and Decentralization MINATD, the communication plan and strategy for the registration of 80% of non-registered children in selected sites of the Far North have been validated. In collaboration with Colombia University, the draft report of the child protection system mapping and analysis, that includes the perceptions of urban communities from the Far North of the child protection services, have been produced.

6. In addition to the surge capacity partner deployed by Norwegian Refugee Council in Garoua, several field visits were made by the child protection staff based in Yaoundé to provide technical support and closely monitor the implementation of the child protection response to the emergencies in the North and Far North, including training on psychosocial support

UNICEF and Partners programming

Under the leadership of UNICEF and with the collaboration of UNHCR and UNFPA, **the Protection Working Group (PWG)**, held an inter-agency meeting at the national level (Yaoundé, 28 December) where 10 people from UN agencies, government and civil society met. Participants were updated on the emergency situation, and followed-up recommendations for strengthening the advocacy plan towards the waiving and/or reduction of birth registration fees.

In the North, under the leadership of UNICEF, and in collaboration with DRAS and Plan Cameroon, the members of the thematic group on psychosocial impacts met at two occasions. They shared the results of activities on psychosocial support, and established the 2013 plan of action on this issue.

3.7 Emergency response HIV

The nutrition crisis and the recent flooding has lead to many families, women and children being displaced and has increased HIV risks particularly for adolescents and youth especially young girls and women. As a result of several technical support missions conducted by the UNICEF HIV team in the last few months in order to meet and work with local authorities and regional management teams, there is now an increased awareness of the need to ensure that HIV be part of the response. Action has been taken at all levels to incorporate HIV related activities in response to the Sahel crisis during coordination meetings, field visits, supervision and data collection processes. UNICEF is now discussing with the French Red Cross for a potential venture in conducting a study on HIV in Malnourished children.

Activities carried out during the reporting period

1. Following the establishment of the HIV coordination platform in the two regions of North (Garoua) and Far North (Maroua), field supervision was done to monitor HIV related activities in response to the Sahel crisis and the flooding in Guirvidic and Pouss(district Maga).
2. A Joint supervision was also conducted in early December by the Far North HIV coordination team to visit sites in Maroua rural (Salak, Meskine, Gawel , Yoldeo et Dargala) and Maroua Urbain (Domayo, Ouro-Tchede, Dougoï, Djarengol-Kodek , Founangue, Zokok Barmare). The HIV coordination team in Garoua also visited sites in Garoua I, II and Pitoa during the reporting period.
3. HIV tests have been purchased and distributed to both regions and over the reporting period UNICEF HIV/Procurement specialist performed a field visit to provide assistance to the two regions in order to ensure that commodities are dispatched to health facilities. As a result of the support provided HIV test are now confirmed to have been positioned in all health facilities in the district of Maga (Far North region). In the other regions, distribution is in progress and is expected to be completed by the end of January.
4. As part of capacity building of service providers, a total of 129 CNTI and CAN staff of the health Districts of Maroua Urbain, Maroua Rural and Maga, including two laboratory technicians had their capacity strengthened on PMTCT and HIV testing. This is expected to increase the district capacity to provide quality services to malnourished children in the selected districts.
5. During the reporting period, a total of 1200 adolescents and youth were mobilised by trained peer educators and sensitized in Maroua rural for which 365 of them were tested for HIV. In the districts of Garoua I, II and Pitoa 10 youth peer educators were trained and had their skills strengthened on HIV prevention including vulnerability risk mapping, behavioural analysis.
6. In Maroua Rural district, 22 community volunteers from the Cameroonian Red Cross association were trained in the displaced population sites of Gurvidic and Pouss to conduct HIV prevention sensitization activities in their communities. Additionally, the regional delegation organised community based HIV testing events which led to about 400 young people tested for HIV in Meskine (rural Maroua) and Djarengol-Kodek. A local hall was also refurbished to serve as a venue for young people to meet and share knowledge and skills on HIV prevention and testing.

7. In Garoua and Maorua, following the training of women groups by the ministry in charge of women empowerment and family welfare twelve (12) radio media debates were conducted in each region through local community radios to raise community awareness especially among adolescents and youth. The potential reach of those radios is estimated to be around 1 000 000 people. Those debates aim at raising awareness on HIV prevention and also to promote PMTCT service utilisation by pregnant women. Themes covered by radio debates include HIV discrimination, PMTCT, sexual and reproductive health of adolescents, communicating on HIV at community level, antenatal care for pregnant women and service utilisation.

UNICEF and Partners programming

All HIV related activities in the framework of the response to the Sahel crisis and the flooding are jointly planned, implemented and monitored by the members of the regional platform including, the four regional delegations (Public health, Family and women promotion, Social affairs, youth affairs,) and coordination is ensured by the regional HIV technical group.

Additionally field work involves National and international NGOS operating in the two regions such as the French Red Cross, faith based organisation in Pitoa (hope future generation), community radios and women groups.

5 Emergency Response Funding

Country	Total needs for 2013	Funds received	Gaps VS total needs	% funded vs Total Needs
Cameroon	11,100,000	0	11,100,000	0%

UNICEF wishes to express its deep gratitude to all public and private sector donors for the contributions and pledges received for the Sahel response 2012, which have made the current response possible. UNICEF would especially like to thank National Committees and donors who have contributed 'unearmarked' funding. 'Unearmarked' funding gives UNICEF essential flexibility to direct resources and ensure the delivery of life-saving supplies and interventions to where they are needed most – especially in the form of longer-term and predictable funding and in strengthening preparedness and resilience building. Continued donor support is critical to continue scaling up the response.

Across Sahel, UNICEF received financial and material contributions from: Andorra, Australia, Belgium, Brazil, Canada, CERF, Denmark, Estonia, European Commission/EC, Finland, France, Ireland, Japan, Luxemburg, Netherlands, Norway, Republic of Korea, Spain, Sweden, United Kingdom, United States of America; and the Argentina Committee for UNICEF, Australian Committee for UNICEF, Bulgarian Committee for UNICEF, Canadian Committee for UNICEF, Chilean Committee for UNICEF, Chinese Committee for UNICEF, Croatian Committee for UNICEF, Danish Committee for UNICEF, Finnish Committee for UNICEF, French Committee for UNICEF, German Committee for UNICEF, Hellenic National Committee for UNICEF, Hong Kong Committee for UNICEF, Iceland National Committee for UNICEF, Indonesian Committee for UNICEF, Italian Committee for UNICEF, Japan Committee for UNICEF, Netherlands Committee for UNICEF, New Zealand Committee for UNICEF, Norwegian Committee for UNICEF, Portuguese Committee for UNICEF, Spanish Committee for UNICEF, Thai Committee for UNICEF, United Kingdom Committee for UNICEF, United States Fund for UNICEF.

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