

This report is produced by OCHA Cameroon in collaboration with humanitarian partners. It covers 1 – 31 July 2020. The next report will be issued in September 2020.

### JULY 2020 HIGHLIGHTS

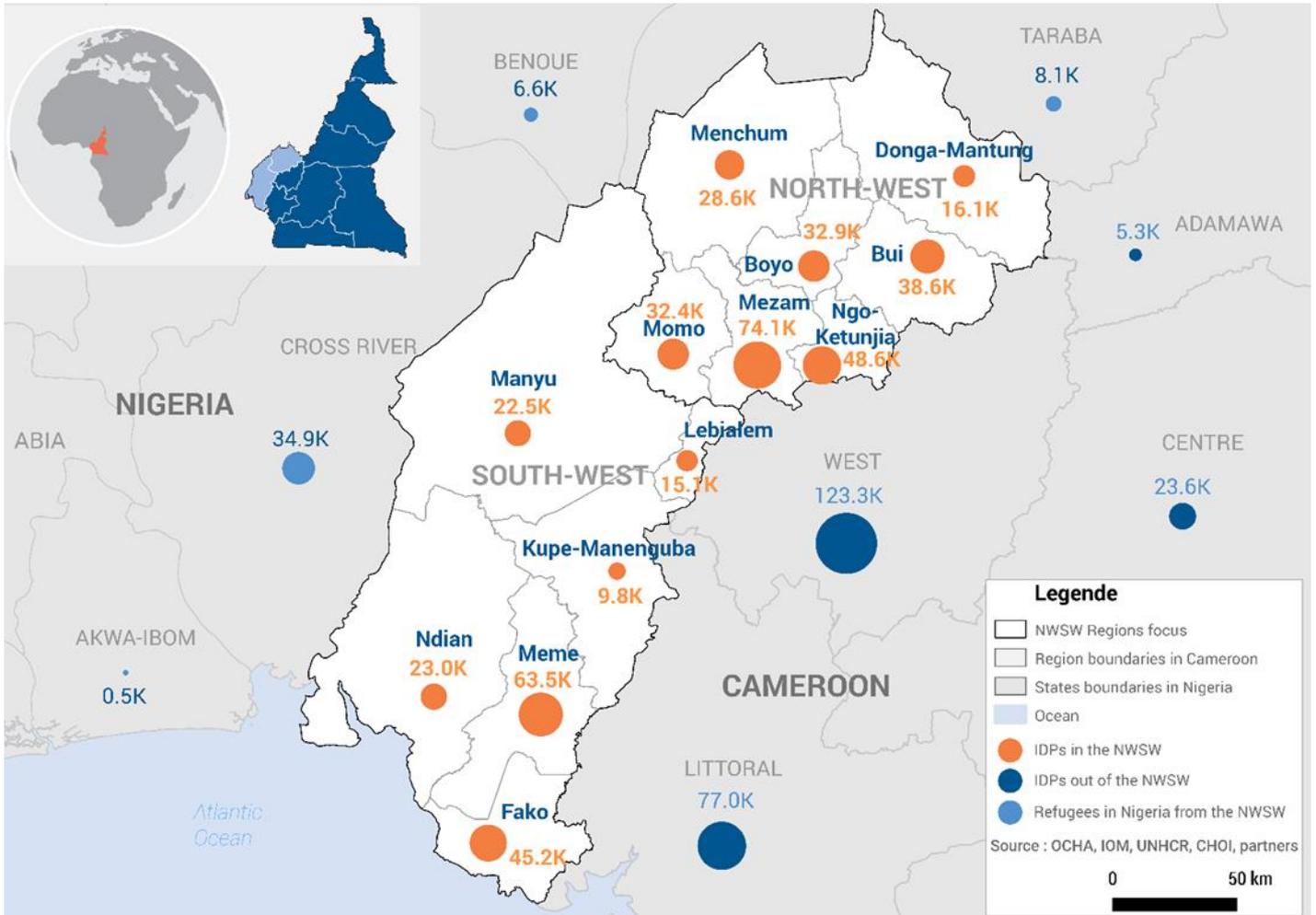
- Temporary suspension of humanitarian assistance for ten days due to threats against aid organizations by some NSAGs.
- 269,169 people received food security assistance in July.
- 3,821 persons received medical attention through mobile clinics. Mobile clinics are the only sources of health care in most rural communities.
- Child Protection Area of Responsibility has launched a series of trainings on Child Protection Case Management with the objective to standardize the response according to IASC guidelines.
- 42 percent of the reported GBV cases are sexual violence incidents (rape and sexual assault) and 73 percent of the victims are female.
- If the funding situation does not improve 64 percent of the 1.1 million people in need of lifesaving GBV services will receive no assistance in 2020.



Source: OCHA  
The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations.

<p><b>2.3M</b> affected people</p> <p><b>Sources:</b> <i>Humanitarian Need Overview 2020</i></p>	<p><b>1.4M</b> targeted for assistance</p> <p><b>Sources:</b> <i>Humanitarian Response Plan 2020</i></p>	<p><b>679K</b> internally displaced (IDP)</p> <p><b>Sources:</b> <i>MSNA in North-West and South-West Region in August 2019, OCHA</i> <i>MIRA in Mayo-Banyo (Adamaoua) in July 2019, OCHA, MINAT and partners</i> <i>MIRA in West and Littoral Regions in October 2019, OCHA, MINAT and partners</i> <i>MIRA in Mfoundi and Mefou-et-Afamba Division (Centre) in October 2019, OCHA, CHOI and MINAT</i></p>	<p><b>204K</b> Returnees (former IDP)</p> <p><b>Sources:</b> <i>MSNA in North-West and South-West Region in August 2019, OCHA</i></p>	<p><b>59K</b> Cameroonian Refugees in Nigeria</p> <p><b>Sources:</b> <i>Nigeria: Registration of Cameroonian Refugees as of 30 June 2020, UNHCR</i></p>
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### Map of IDP, Returnees and Refugees from the North-West and South-West Regions of Cameroon



Source : OCHA, UNHCR, IOM

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## SITUATION OVERVIEW

### Humanitarian

In July, a temporary suspension of humanitarian assistance for ten days was called for as a result of increased threats to UN humanitarian personnel and property from some NSAGs. The suspension of activities had a serious impact on the delivery of humanitarian assistance in the two regions. The situation highlights the growing challenge for humanitarian organizations to ensure that humanitarian principles are understood by all parties in the crisis.

On 6 July, five nurses of the Cameroon Baptist Convention (CBC) Health Board, working at CBC hospital in Mamfe (Manyu division) were reportedly arrested by government security forces and charged with alleged secessionist activities. Four days after, on 9 July, a community health worker, working for Doctors without Borders was reportedly killed by NSAGs. He was accused by the fighters of spying for the military. Attacks on healthcare continue to result in closure of facilities and decreased access to life-saving services for affected communities.

Confrontations between the belligerents continue to lead to waves of displacements in both the NWSW. An estimated 2,131 persons from 356 households (91 percent in the North West) were displaced to neighbouring communities and bushes as a result of active conflict in their communities of origin. Civilians continue to be caught in crossfire and others are targeted for allegedly aligning with one side or the other. An increase in mass arrest of civilians in Buea and Muyuka subdivisions in the South West was observed, with some people released allegedly only after payment of money.

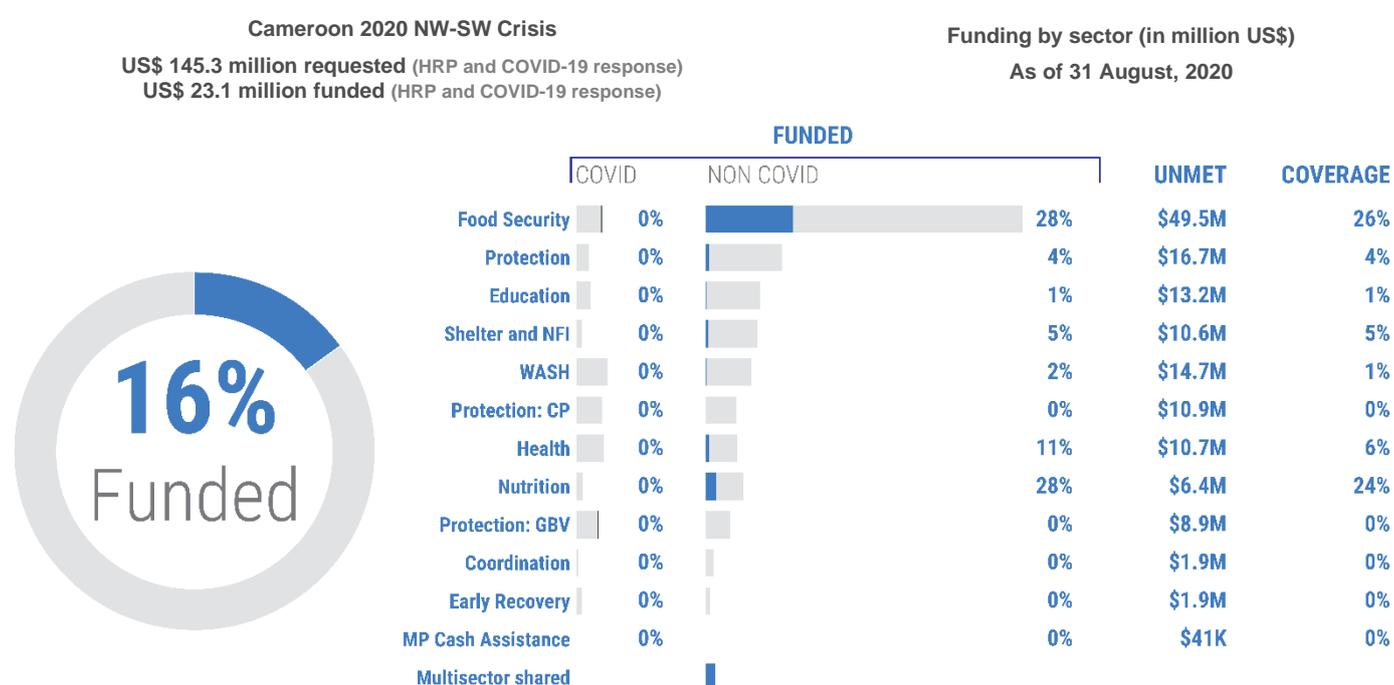
COVID-19 continues to spread in communities with more cases being diagnosed in hard to reach areas. WHO continues to support the regional response against COVID-19, while aid organizations continue to integrate components of COVID-19 in all their interventions. A major challenge is the difficulty convincing some communities that COVID-19 exists. Efforts

are being made by the communication task force in the NWSW with the support of UNICEF and other partners to tackle misinformation about COVID-19 in these regions.

## Humanitarian Coordination

OCHA continued to ensure humanitarian coordination in the NWSW. OCHA developed a FAQ (frequently asked questions) to guide sensitization of communities and aid actors on the distinction between the humanitarian mandate followed by humanitarian organizations according to humanitarian principles and recovery activities which are carried out under a development mandate by UNDP. A Risk Mitigation Working Group has been put in place to identify risks associated to the UNDP Recovery Programme and propose mitigating measures. OCHA continued to provide leadership in the response in the NWSW through regular inter-cluster coordination meetings, Humanitarian Coordination Forum (HCF) meetings, Access Working Group meetings and Information Management Working Group meetings. HCF meetings were also held in Bafoussam and Douala in the West and Littoral Regions respectively.

## FUNDING



All humanitarian partners, including donors and recipient agencies, are encouraged to inform OCHA's Financial Tracking Service (FTS - <http://fts.unocha.org>) of cash and in-kind contributions by e-mailing: [fts@un.org](mailto:fts@un.org)

## HUMANITARIAN RESPONSE

### Education

Schools in the NWSW continue preparing children who are sitting for general certificate examinations (GCE) amidst increased risk and threats from NSAGs to students and teachers. Education partners were compelled to suspend their activities for more than two weeks in the early part of the reporting month. The scheduled general exams were conducted in July 2020 and the rest of the exams will take place before the full re-opening of schools scheduled for 5 October 2020. Schools in the country have been closed since 18 March 2020 to contain the spread of the COVID-19 pandemic. The education cluster, with the support of OCHA, is scaling up efforts in advance of the school year commencement to depoliticize education and ensure that all sides in the crisis refrain from using learning as a political tool in the crisis.

# 25K

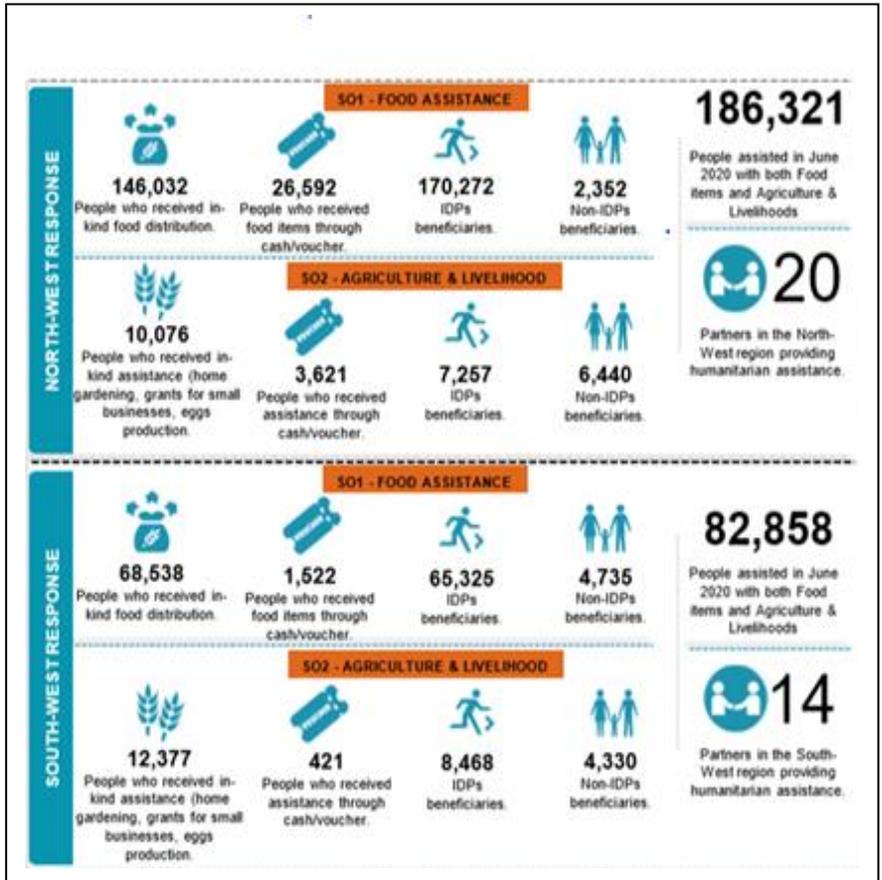
Conflict and COVID-19  
affected learners assisted

Education cluster partners supported 25,271 (11,973 boys and 13,928 girls) conflict and COVID-19 affected children with distance learning activities. Partners provided materials to prevent the spread of virus, capitation grants to learners, and continued community awareness raising and preventive messages related to the pandemic. The partners continue supporting children and teachers in preparation of school reopening including through providing psychosocial support, continuous disinfection of schools and community learning centers, provision of essential learning materials as well as play based learning and recreational materials.

## Food Security

In July 2020, 29 partners collectively assisted 269,179 people out of which about 90 percent of the total beneficiaries received food assistance either through in-kind or cash/voucher modalities. In addition to the standard food items being distributed some partners (ASWEDO, CAFEDO, HOA etc.) have also included hygiene kits and face masks as part of their relief items. Most of the beneficiaries in July were in the NW (about 69 percent) while 10 percent of the total beneficiaries received agriculture and livelihoods related support activities like training, grants/loans for small businesses, and farming and home gardening assistance. So far, about 860 persons have received different types of trainings ranging from business skills acquisition, farming practices, livestock production.

The cluster continues to hold its coordination meetings regularly and technical working groups to discuss specific issues around harmonization of relief packages and ensure coordination to avoid duplication. The cluster is also holding online technical working group meetings for food assistance and agriculture/livelihoods. These meeting provide a good platform to harmonize approaches, develop standardized tools, assistance packages and to identify critical technical capacity gaps.



## Health

COVID-19 continues to spread in the NWSW and more cases are being diagnosed out of the main cities in hard to reach areas. A total of 24 out of the 37 health districts in the NWSW have recorded at least one positive case of COVID-19. However, the overall number of new cases and tested individuals in both regions is in decline. Efforts are being made by the communication task force in the NWSW with the support of UNICEF and other partners to tackle misinformation about COVID-19 in these regions. New communication material is under development for this purpose. The oxygen concentrators donated by WHO to the NWSW regions to support case management of COVID-19 are being distributed to the health districts to support the decentralization of the response to COVID-19 to health districts.

**3.8K**  
 Consulted through mobile clinic teams

In the month of July, despite the security challenges and incidents recorded in the two regions, health cluster partners continued to provide life-saving essential health services in Fako, Meme, Ndian, Kupe-Manenguba, Manyu, Mezam, Boyo, Ngoketunja, Bui, and Momo divisions. WHO through its implementing partners CARITAS, Reach Out and DEMTOU humanitarian through the mobile clinics in the NWSW regions consulted a total of 3,821 persons. More than 4 percent of the people assisted by mobile teams were people living with disabilities. The mobile clinics placed 80 beneficiaries on ARVs in hard to reach areas and assisted the delivery of 40 women. The clinical psychologist deployed by WHO provided psychosocial support to 113 beneficiaries. The mobile clinics and trauma surgeons performed 133 surgical procedures. The

partners were able to sensitize 6,858 people on epidemic prone diseases and screened 2,117 for high blood pressure/diabetes and 74 for HIV.

UNICEF continued to support the NW to conduct the third round of routine immunization through Periodic Intensification of Routine Immunization (PIRI) activity in four Health Districts (Bamenda, Fundong, Kumbo East and Ndop) from 24 - 26 July 2020. Special measures were taken to limit the spread of COVID-19. A total of 2,375 infants under 11 months of age received a catch-up vaccine against vaccine preventable diseases. Also, 683 pregnant women received missed routine vaccines against tetanus and 106 pregnant women received catchup for intermittent preventive treatment against malaria. The implementing partner of UNICEF in the NW, Cameroon Baptist Convention Health Services through fixed and mobile outreach strategies supported the vaccination of another 1,404 children aged between 6-59 months with routine immunization vaccines. A total of 593 households received mosquito nets and 9,437 families were reached through sensitization on immunization and COVID-19 prevention.

## Nutrition

In July, 22,970 children under 5 years were screened for acute malnutrition with 79 (0.3 percent) identified with severe acute malnutrition (SAM) and 291 (1.3 percent) children with moderate acute malnutrition (MAM). The SAM cases were referred for treatment, with 67 percent from NW and 33 percent from SW. Screening was conducted by ReachOut, DEMTOU, SUDAHASER, SHUMAS, INTERSOS, Action Against Hunger (AAH) with resource support from UNICEF, WHO and WFP. A total of 11,758 persons were sensitized on key messages on IYCF (infant and young child feeding) practices and these messages integrated COVID-19 preventive messages.

**22.9K**

Children under 5  
screened for acute  
malnutrition

**5K**

PLW received nutritional  
assistance

56 children under the age of 5 were treated for SAM as per the national protocol. Under the preventive programme for malnutrition in food insecure areas 7,375 children (6-23 months) and 5,126 pregnant and lactating women (PLW) were reached under the Blanket Supplementary Feeding Program (BSFP) implemented by WFP partners in NW and SW.

Measures with regards to COVID-19 (including programmatic adaptations) were undertaken by partners in order to mitigate the spread of the disease. They include the provision of a two-month ration of specialized nutritious food to target beneficiaries to limit movement, no crowding during interventions, provision of PPEs and hand sanitizers to community health workers involved in screening, provision of additional MUAC tapes to be used by caregivers and community members to screen children and repositioning of three months therapeutic nutrition commodities at the regional headquarters.

## Protection

The security environment continues to degrade with a steady increase in the intensity of clashes between armed elements putting the lives of civilians at risk in the NWSW. This is reflected by an increase in human rights violations including killings, arbitrary arrests, threats and internal displacement. Also, the presence of humanitarian organizations was threatened in the NWSW as a reaction by NSAGs to UNDP's role in the Presidential Programme for Reconstruction & Development (PPRD). With these new dynamics UNHCR and its partner INTERSOS engaged in widespread negotiations to maintain a safe corridor which allows humanitarian assistance to reach affected communities in the NWSW regions. Focus Group Discussions (FGDs) were remotely conducted through an operational local NGO, CUAPWD (Coordinating Unit of Associations of Persons Living with Disability) and 130 community-based focal points.

**103.2K**

Reached through  
protection activities

In July, UNHCR and INTERSOS registered 90 flash alerts (66 in the NW and 24 in the SW). A total of 568 protection incidents were collected including 272 threats to life and security, 220 house destructions, 60 SGBV cases and 16 violations against freedom from arbitrary arrest and access to justice. This figure represents an increase from three hundred and eighty-six (386) incident reports collected in June and is due to engagement in new communities. Among the victims, 73.8 percent were female, 26.2 percent male while 37 were children, 50 elderly persons and 481 adults. 82 percent of the victims are IDPs (467), 12.3 percent host communities' members and 5.5 percent returnees (including 2 voluntarily repatriated). Meme (173) and Mezam (146) recorded the highest number of incidents in July. 50.2 percent of incidents (285) were from the SW while 49.8 percent of incidents (283) were recorded from the NW.

182,315 persons benefited from protection responses including protection monitoring conducted by DRC, INTERSOS, IRC, Libra Law Office (LLO), CAMHELP, PCC/PCRS Kumba, BIHAPH, RAGJ and UNHCR. Among them, 55 percent were women and girls, while 26 percent were children and 34 percent were 60-year-old and above. Various forms of protection assistance were offered to the vulnerable during the period including 131 cases provided with legal assistance (detention, civil status documents, GBV survivors) and 304 women and girls with specific needs were supported by restoring and

sustaining their dignity including with cash assistance. 94 survivors benefited from psychosocial support while 143 advocacy actions were undertaken on the field. Following protection analyses, 103 cases were addressed by case workers. 20 humanitarian workers were trained on protection issues and mainstreaming COVID-19 in protection response while about 6,719 persons were reached through sensitization and awareness raising on numerous themes including legal issues, social cohesion, GBV key concepts, protection and humanitarian principles, COVID-19; its consequences and prevention measures.

Gender	Children	Adults	Elders	Total	% Gender
Male	21,666	33,094	27,506	82,266	45%
Female	32,456	46,362	21,231	100,049	55%
% Age group	26%	40%	34%	182,315	100%

In July, UNHCR and INTERSOS continued mass awareness raising activities through the regional radio station in Bamenda, with the mass media outlet having an estimated daily audience of 70,000 listeners in all divisions of the NW and parts of the West region. The focus of the awareness messages was on the protection of persons living with disabilities during armed conflicts and COVID-19 prevention and protective measures.

## Child Protection

Child Protection (CP) actors continue to sensitize communities on the preventive and responsive measures to counter COVID-19. CP actors reached more than 14,000 children and caregivers in their efforts to sensitize communities on COVID-19 and ways to prevent its further spread, and the consequent CP risks and concerns. As a result, parents feel safer to send their children to Child Friendly and other Safe Spaces due to the risk mitigation measures implemented by CP actors, and the rise in community awareness. CP actors reported a nearly 30 percent increase in the number of children and caregivers reached by CP partners, compared to last month. More than 10,000 children and caregivers were reached with psychosocial support services during the reporting period.

# 10K

Children and caregivers received psychosocial support

Child Protection Area of Responsibility, in collaboration with Plan International, started a series of training on Child Protection Case Management (CPCM). The training included more than 25 participants from CP partners. The objective is to strengthen the partners' technical capacity on CPCM and strive to reach a more standardized response in terms of case management, in line with the IASC standards on CPCM.

## GBV Area of Responsibility

Despite access constraints and insufficient GBV services, 573 GBV cases were reported in July in the NWSW regions representing an increase of 79 percent compared to June. This can be explained by not only an increase on the number of interventions, but also by an increase in the number of partners sharing their data (15 compared to 6 in June) and therefore an increase on the reported incidents. Divisions with highest reporting of GBV are Fako and Mezam which are the most accessible areas and have benefited with GBV interventions more than other areas in July. Although all six types of GBV were perpetrated, 42 percent of the reported cases are sexual violence incidents (rape and sexual assault). Survivors of GBV incidents are mostly women (88 percent) and children represent 23 percent while 4 percent of survivors are people living with a disability. Among the survivors, 82 percent are IDPs. Survivors received various services including psychosocial support (32 percent), health (11 percent), livelihood services (5 percent) and legal assistance (3 percent). There is a critical need to scale up lifesaving GBV services and advocate accessing affected communities in hard to reach areas.

# 59.5K

People reached with GBV interventions

In July, 59,565 people (72 percent female, 47 percent children) were reached with GBV interventions including: GBV awareness raising (31,317); youth and adolescent programming (12,600); psychosocial support and PFA (4,984), dignity kits distribution (3,854), life skill development for women (3,199), women and girl safe space activities (2,449), capacity building for community members, frontline workers on GBV concepts (1,127).

To support timely access of GBV survivors to multi-sectoral services, the GBV Sub cluster has been actively working in developing and revising the GBV Referral Pathway for the NWSW regions. Education Cluster partners received a presentation on the use of the GBV referral pathways to ensure safe referral of survivors of GBV to specialized services. More than 2,000 hard copies of the GBV referral pathways of the SW was printed by UNFPA, CARE, LUKEMEF and IRC

for dissemination to communities in the next month. The GBV Sub Cluster has started preparations to train 60 GBV frontline workers on GBV case management in the NWSW regions to improve the quality of lifesaving GBV service provision.

The number of people reached in July represent only 3 percent of the people in need of GBV lifesaving interventions and 5 percent of the target (1.1M) set by the GBV sub-cluster Humanitarian Response Plan. If lifesaving GBV interventions are not supported with meaningful funding, 64 percent of this target, representing thousands of IDP women and girls will be left without any life-saving assistance to recover from GBV and rebuild their lives.

## Shelter

In the SW NRC distributed 500 kitchen and household items in the form of kits to vulnerable households in Mpondo and Tiko communities. These items were aimed at improving the living conditions of the IDPs and vulnerable population in Mpondo (Muyuka subdivision) as well as communities in Tiko subdivision. DRC assisted 1,600 households with shelter and NFIs in Meme and Fako divisions. IOM through its partners assisted 125 households in Mbonge subdivision with core relief items and 24 households with emergency shelter.

# 18.7K

People reached with shelter kits and core relief items

Indicators	Region		Total reached	
	North-West	South-West	Individuals	Households
# of vulnerable IDP households assisted with core relief items including prevention of COVID-19	1,789	5,648	7,437	1,357
# of vulnerable self-settled IDP households assisted with shelter kits including prevention of COVID-19	216	10,993	11,209	2,147
<b>Total Reached</b>	<b>2,005</b>	<b>16,641</b>	<b>18,646</b>	<b>3,504</b>

In the NW IOM assisted 57 households (445 individuals) with both core relief items and emergency shelter in communities such as Abuh, Fujua and Fundong within Boyo division. 34 households received core relief items while 23 households were supported with emergency shelter. NRC distributed 100 NFI Kits in Mulang community of Bamenda II sub-division.

## Water, Sanitation and Hygiene

In July, 563,440 individuals received various WASH services including COVID-19 prevention activities, implemented by 9 WASH partners (AFRINET, ASWEDO, GCR, H4BF, IRC, NRC, SUDAHSER, WaCameroon and COMINSUD) in the NWSW regions. The number of WASH partners sharing monthly reports has decreased as only a few organizations have active projects. NRC conducted 24 training sessions on Water Point Management, reaching 2,028 members of water user committees. Such training sessions are very important to ensure water points are managed sustainably and reduces future repair/rehabilitation costs.

# 563K

Reached through WASH services

Other activities implemented during the reporting period, reaching 1,837 individuals, are latrine maintenance and cleaning; distribution of hygiene & dignity kits and training on the use of dignity hygiene kits. Key activities that were carried out and number of people reached include 28,348 people reached with hygiene promotion, 2,000 reached with water supply, 3,558 people reached with WASH kits, 1,669 reached with sanitation.

EPDA, under CERF (COVID-19 and Cholera Response), commenced construction of two emergency latrines at Mabeta Health Facilities and 50 emergency latrines in Bakassi Health district. WASH partners (Afrinet, ASWEDO, H4BF, SUDAHSER, WaCameroon and COMINSUD) carried out sensitization on signs, symptoms, transmission and prevention of COVID-19 reaching a total of 524,000 individuals including 285 people with disabilities. A major challenge is continued resistance by communities to accept that COVID-19 exists. WASH Cluster and C4D will work together to address this challenge.

### For further information, please contact:

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