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for every child

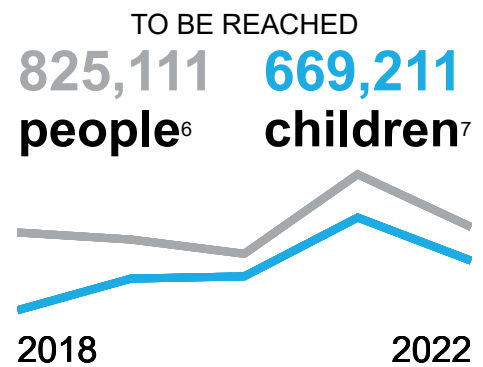
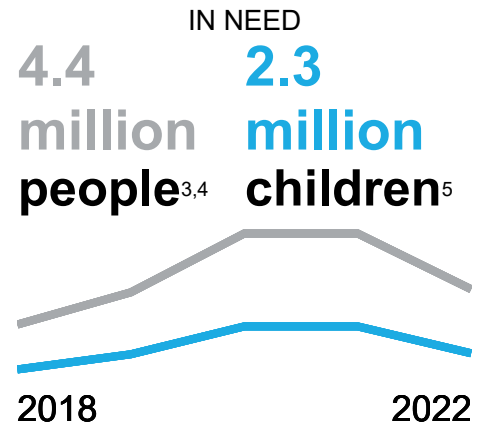
## Humanitarian Action for Children

A baby is vaccinated in Buea, South-West Region. In Cameroon, children born in conflict-affected areas are vaccinated with the support of UNICEF, local NGOs and Regional Health Delegations.

# Cameroon

### HIGHLIGHTS<sup>1</sup>

- In Cameroon, 4.4 million people, including 2.3 million children, 1.1 million women and 660,000 persons with disabilities,<sup>2</sup> urgently need humanitarian assistance. Needs are driven by armed conflict, inter-communal violence, an influx of refugees from neighbouring countries, disease outbreaks, including cholera and measles, and seasonal flooding. The ongoing COVID-19 pandemic compounds these challenges and COVID-19 vaccination coverage remains low.
- UNICEF will tackle new and protracted humanitarian needs by investing in emergency preparedness, scaling up field presence, and strengthening localization and accountability to affected populations. UNICEF programmes will integrate gender equality, the prevention of sexual exploitation and abuse, and gender-based violence (GBV) in emergencies. UNICEF and partners will apply a targeted, multi-sectoral approach across interventions.
- UNICEF requires US\$76 million to provide life-saving humanitarian assistance. Water, sanitation and hygiene (WASH), child protection and nutrition sectors constitute the greatest funding needs.



### KEY PLANNED TARGETS



**78,196**

children admitted for treatment for severe acute malnutrition



**190,411**

children vaccinated against measles



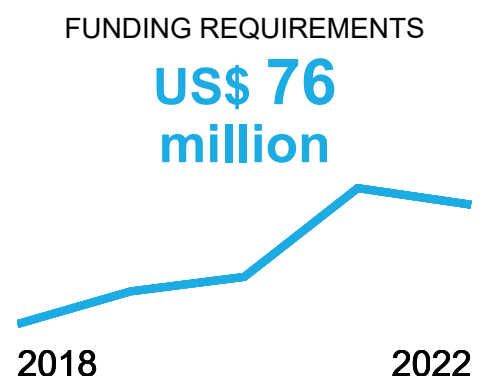
**390,000**

people reached with critical WASH supplies



**341,000**

children/caregivers accessing mental health and psychosocial support



Figures are provisional and subject to change upon finalization of the inter-agency planning documents for 2022.

## HUMANITARIAN SITUATION AND NEEDS

Cameroon is facing three concurrent, complex, protracted crises,<sup>8</sup> driven by armed conflict and a refugee influx that now impacts 9 of the country's 10 regions. Cameroon remains vulnerable to disease outbreaks, especially cholera and measles, and has been impacted by the COVID-19 pandemic, while COVID-19 vaccination coverage remains low.

In 2021, 4.4 million people need humanitarian assistance,<sup>9</sup> of which 55 per cent are children and 25 per cent are women. Two million people are in extreme need.<sup>10</sup> One million people are internally displaced and an additional 1 million people are either refugees or returnees. Cameroon is currently ranked 141 out of 189 on gender equality.<sup>11</sup> Gender-based discrimination against women and girls is further aggravated in regions affected by crises. Humanitarian needs play out against a backdrop of structural deficits, chronic vulnerabilities and multi-dimensional poverty that challenge the long-term recovery of affected people.<sup>12</sup>

In 2021, there were 2,283 security incidents reported in the North-west/South-west (NW/SW) regions,<sup>13</sup> including 71 "ghost-town"/lockdown days, during which non-state armed groups prohibit freedom of movement and economic/humanitarian activities. As a result, children's lives and access to services and assistance were severely disrupted during approximately 14.2 working weeks. Attacks on civilians, including abductions and killings of school children and teachers are on the rise. From October 2020 through June 2021, 39 schools<sup>14</sup> were directly attacked in the NW/SW regions. Threats against aid workers are similarly increasing, in part due to increased politicization of the humanitarian response. Dozens of staff working for local non-government organizations (NGOs) have been attacked, abducted or killed. Both non-state armed groups and state security forces have been identified as perpetrators of grave violations against children.<sup>15</sup>

In the Lake Chad Basin (LCB), conflict continues to create considerable humanitarian needs in Cameroon's Far North Region. Humanitarian access is hampered by an increased use and presence of improvised explosive devices and unexploded ordnance, combined with physical constraints such as poor road infrastructure and seasonal flooding.

Internal population movement ranges from pre-emptive to protracted displacement, with many internally displaced persons (IDPs) displacing multiple times. Generally, IDPs live in host communities, putting pressure on community resources that are already exhausted. Acute malnutrition, exceeding emergency thresholds, endures among refugee populations both in and out of camp.<sup>16</sup> The Adamawa, East and North regions host more than 300,000 refugees from the Central African Republic.<sup>17</sup> The Littoral, West and Centre regions<sup>18</sup> are increasingly hosting IDPs affected by armed conflict in the NW/SW regions.

## SECTOR NEEDS<sup>19</sup>



**500,000**  
people in need of  
nutrition assistance<sup>20</sup>



**1.8 million**  
people in need of  
health assistance



**1.8 million**  
people lack access to  
safe water<sup>21</sup>



**1 million**  
children in need of  
protection services<sup>22</sup>



**1.9 million**  
children in need of  
education support

## STORY FROM THE FIELD



Habiba and her friends are making protective masks for COVID-19 prevention in a Child Friendly Space at the Gado refugee camp in East Region, Cameroon.

She is one of the 10,000 refugees who have sought asylum in Cameroon since an upsurge of violence in the Central African Republic in 2020.

UNICEF is working to create a safe environment for children that allows them to take part in fun activities, socialize, learn and express themselves, while providing psychosocial support. These activities contribute to helping refugees like Habiba integrate into their new environments and start rebuilding their lives.

Habiba and her friends make protective masks for the prevention of COVID-19 in a Child Friendly Space at Gado refugee site in East Region, Cameroon.

## HUMANITARIAN STRATEGY

UNICEF is focused on scaling up its field presence to identify and respond to the needs of affected populations, including those in hard-to-reach, insecure areas. This is particularly important in the NW/SW and Far North regions where locally tailored negotiations are key to increasing humanitarian access and the delivery of assistance.

UNICEF's humanitarian strategy is concurrently tackling new as well as protracted humanitarian needs. It is designed to be agile, risk-informed,<sup>24</sup> and responsive. Through recovery and development assistance, where possible, systems are being strengthened and protracted humanitarian needs met. A contingency budget of 0.5 per cent has been added to UNICEF's overall budget to ensure that COVID-19 preventative measures are incorporated in the delivery of humanitarian assistance.

UNICEF is committed to pursuing a strong localization strategy, in partnership with government, United Nations agencies, NGOs, and people in need of humanitarian assistance. This is critical to navigate complex community dynamics and the delivery of humanitarian assistance. To ensure a gender-sensitive response, UNICEF is working to strengthen partners' capacity in gender-sensitive analysis, the prevention of gender-based violence in humanitarian action and the prevention of sexual exploitation and abuse. UNICEF is a member of the newly formed working group on Accountability to Affected Populations (AAP), led by UN OCHA. AAP will be assured through improved reporting mechanisms and systematic third-party monitoring in hard-to-reach areas.

UNICEF will continue to meet needs in acute crises with the Comprehensive Child Response Model, which supports a multi-sectoral rapid response mechanism, and concurrently invests in building capacity, systems, and community resilience within the context of a protracted crisis. The model offers a comprehensive package of services that includes WASH, nutrition, health and child protection and caters to the specific needs related to gender, age, disability and displacement status.

UNICEF will continue to meet sector and Cluster lead responsibilities in education, WASH, nutrition and the Child Protection Area of Responsibility. In Cameroon, UNICEF is currently piloting the Blueprint for Joint Action with UNHCR in East Region. UNICEF is also a member of the task force on Humanitarian-Development-Peace Nexus established by the United Nations Country Team to support the implementation of inter-agency humanitarian and development initiatives.

Progress against the latest programme targets is available in the humanitarian situation reports: <https://www.unicef.org/appeals/cameroon/situation-reports>

## 2022 PROGRAMME TARGETS<sup>25</sup>



### Nutrition

- **78,196** children aged 6 to 59 months with severe acute malnutrition admitted for treatment<sup>26</sup>
- **452,000** primary caregivers of children aged 0 to 23 months receiving infant and young child feeding counselling<sup>27</sup>
- **147,000** children aged 6 to 59 months receiving multiple micronutrient powders<sup>28</sup>



### Health and HIV and AIDS

- **190,411** children aged 6 to 59 months vaccinated against measles<sup>29</sup>
- **130,000** children and women accessing primary health care in UNICEF-supported facilities<sup>30</sup>
- **91,257** adolescent girls and boys tested for HIV and received the result of last test
- **89,619** households assisted with long lasting treated bed nets in humanitarian context



### Water, sanitation and hygiene

- **140,000** children use safe and appropriate WASH facilities and hygiene services in learning facilities and safe spaces<sup>31</sup>
- **390,000** people reached with critical WASH supplies<sup>32</sup>
- **190,000** people accessing a sufficient quantity of safe water for drinking and domestic needs<sup>33</sup>
- **162,000** people use safe and appropriate sanitation facilities<sup>34</sup>



### Child protection, GBViE and PSEA

- **341,000** children and parents/caregivers accessing mental health and psychosocial support<sup>35</sup>
- **307,280** women, girls and boys accessing gender-based violence risk mitigation, prevention and/or response interventions<sup>36</sup>
- **825,111** people who have access to a safe and accessible channel to report sexual exploitation and abuse by aid workers
- **8,500** unaccompanied and separated children accessing family-based care or a suitable alternative



### Education

- **478,800** children accessing formal or non-formal education, including early learning<sup>37</sup>
- **321,300** children receiving individual learning materials<sup>38</sup>
- **315,000** children accessing mental health and psychosocial support in schools<sup>39</sup>



### Social protection

- **1,900** households reached with cash transfers through an existing government system where UNICEF provided technical assistance and/or funding<sup>40</sup>
- **2,000** households reached with UNICEF funded multi-purpose humanitarian cash transfers



### Cross-sectoral (HCT, C4D, RCCE and AAP)

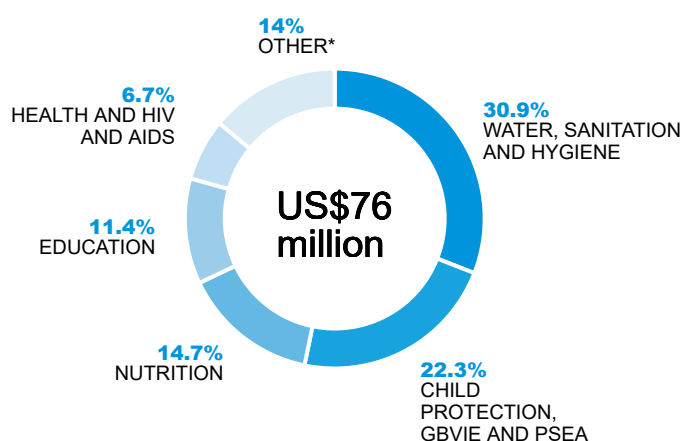
- **123,767** people with access to established accountability mechanisms<sup>41</sup>
- **640,000** people participating in engagement actions for social and behavioural change<sup>42</sup>

## FUNDING REQUIREMENTS IN 2022

For 2022, UNICEF is requesting US\$76 million to provide life-saving interventions for children and women in hard-to-reach, insecure environments. This funding is critical to mitigate and respond to the impact of new and protracted conflicts, disease outbreaks and flooding. The funding requirement for 2022 is reduced when compared to 2021 due to the fact that most activities responding to the COVID-19 pandemic have now been integrated in development programmes.

Child protection, WASH and nutrition will remain priorities in 2022. WASH and nutrition were significantly underfunded in 2021, while humanitarian needs in Cameroon are protection driven. WASH interventions must be scaled to meet the needs of IDPs and host communities to reduce the risk of conflict. Severe acute malnutrition (SAM) must be reduced below emergency threshold levels. The integration of COVID-19 preventative measures has been incorporated into the costing of activities.

Without adequate and timely funding in 2022, UNICEF and its partners will be unable to address the critical humanitarian needs of children and families in Cameroon. If funding levels remain similar to 2021, UNICEF and its partners will be unable to effectively address the needs of 174,800 children and families with safe water and 255,000 conflict-affected children will be left without access to mental health and psychosocial support services.<sup>43</sup>



\*This includes costs from other sectors/interventions : Social protection and cash transfers (5.7%), Cross-sectoral (HCT, C4D, RCCE and AAP) (4.5%), Emergency preparedness (2.3%), Cluster Coordination (1.5%).

Sector	2022 requirements (US\$) <sup>44</sup>
Nutrition	11,174,622 <sup>45,46</sup>
Health and HIV and AIDS	5,064,772 <sup>47,48</sup>
Water, sanitation and hygiene	23,519,497
Child protection, GBVIE and PSEA	16,968,184 <sup>49</sup>
Education	8,661,283 <sup>50</sup>
Social protection and cash transfers	4,362,291
Emergency preparedness	1,717,200 <sup>51</sup>
Cross-sectoral (HCT, C4D, RCCE and AAP)	3,434,400
Cluster Coordination	1,144,800 <sup>52</sup>
<b>Total</b>	<b>76,047,049</b>

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# ENDNOTES

1. UNICEF's public health and socio-economic COVID-19 response, including programme targets and funding requirements, is integrated into the standalone country, multi-country and regional Humanitarian Action for Children appeals. All interventions related to accelerating equitable access to COVID-19 tests, treatments and vaccines fall under the Access to COVID-19 Tools Accelerator (ACT-A) global appeal.
2. Cameroon HNO/HRP 2021 <https://reliefweb.int/report/cameroon/cameroon-humanitarian-response-plan-march-2021>
3. In the absence of the Cameroon HNO/HRP for 2022, the People in Need (PIN) figure is from HNO/HRP 2021.
4. The PIN of 6.2 million in the 2021 HAC was based on the 2020 HRP, including COVID-19 figures. PIN of 4.4 million for this HAC based on 2021 HRP, with COVID-19 figures revised.
5. In the absence of 2022 Cameroon HNO/HRP, CIN figure from HNO/HRP 2021 (53 per cent of PIN), girls are 50 per cent.
6. Calculated using highest programme targets of 478,800 school aged children to be reached through formal/non-formal education, 190,411 children 6-59 months with measles vaccination; 155,900 adults with critical WASH supplies, including 455,582 women/girls. PWDs 15 per cent (estimate) of total to be reached (2016 Statistical Yearbook). UNICEF is committed to needs-based targeting, which means covering the unmet needs of children; and will serve as the provider of last resort where it has cluster coordination responsibilities.
7. Calculated using highest programme targets of 478,800 school aged children accessing formal/non-formal education and 190,411 children 6-59 months to be reached with measles vaccination. Total includes 344,182 girls (42 per cent of children to be reached). PWDs 15 per cent (estimate) of total to be reached (2016 Statistical Yearbook).
8. Armed conflict in NW/SW regions and in Far North/Lake Chad Basin, and refugee crisis in the East and Adamawa regions.
9. Cameroon HNO/HRP 2021.
10. Severity is determined through the use of a five-point scale of agreed sectoral indicators. HNO/HRP, 2021.
11. Data on Gender Equality in Cameroon, IASC Gender Standby Capacity Project, 2020, [https://reliefweb.int/sites/reliefweb.int/files/resources/data\\_on\\_gender\\_equality\\_in\\_cameroon-hno\\_2020-17\\_oct\\_19.pdf](https://reliefweb.int/sites/reliefweb.int/files/resources/data_on_gender_equality_in_cameroon-hno_2020-17_oct_19.pdf).
12. Multi-dimensional poverty stands at 47.5 per cent nationally (62.2 per cent North Region, 75.1 per cent Far North Region). Women/children with most significant humanitarian needs also poorest and most disenfranchised.
13. 1 January to 11 August, 2021. 1,013 of incidences linked to armed conflict. UNDSS Security Incidence Reports.
14. 15 attacks not verified.
15. Cameroon a country of concern in most recent UNSG report on Children Affected by Armed Conflict. In first half of 2021, through the Monitoring and Reporting Mechanism, 111 grave child rights violations verified, affecting 83 children (41 boys, 34 girls, 8 gender unknown).
16. As per 2021 SMART/SENS survey preliminary results, on-site CAR refugees have 2.6 per cent SAM prevalence. Off-site CAR refugees have 3.4 per cent SAM prevalence in East, North and Adamawa regions.
17. UNHCR August 2021 persons of concerns factsheet: 331,287 refugees from CAR are in Cameroon.
18. Total of 302,000 IDPs. Figure is extracted from the Cameroon HRP for 2021.
19. Figures from Cameroon HNO/HRP 2021.
20. In HAC 2021, sectoral PIN for nutrition only considered number of SAM children. Total number of people in need of nutrition assistance was estimated at 532,000.
21. Projections calculated by the WASH Sector for 2022 humanitarian response.
22. The figure of people in need is only for the Child Protection AoR.
23. UNICEF leads cluster coordination for the WASH, nutrition and education clusters and the child protection area of responsibility.
24. UNICEF currently conducting Child Risk Analysis and Impact Assessment to better understand risks to children/women in Cameroon.
25. Unless otherwise noted, figures extracted from the Cameroon HNO/HRP for 2021.
26. UNICEF covers 96 per cent of sector target (of children, 52 per cent are girls, 6,500 are refugees), including 100 per cent of refugees in need of SAM treatment.
27. UNICEF covers 100 per cent of sector target, equal to total people in need of infant and young child feeding counselling. Among targeted, 70 per cent are women/girls.
28. UNICEF covers 74 per cent of the sector target, which covers 64 per cent of the total people in need of multiple micronutrient powders. Among children targeted by UNICEF, 51 per cent are girls and 15,000 are refugees.
29. Among the children targeted by UNICEF, 50 per cent are girls.
30. Global aggregate of provision of integrated health package in facilities and in community package for routine vaccination (Penta 3) for children 0-12 months; infectious respiratory diseases and acute diarrhea treatments for children under five years and newborn kits for mothers/caregivers.
31. Those to be targeted through WASH facilities and hygiene services in 350 schools; estimated population of 400 children per school.
32. UNICEF covers 25 per cent of the sector target, which covers 75 per cent of all people in need of critical WASH supplies. Among those targeted by UNICEF, 55 per cent are women/girls, 44 per cent are IDPs, 44 per cent are host community members, 7 per cent are refugees and 5 per cent are returnees.
33. UNICEF covers 15 per cent of the sector target, which covers 72 per cent of all people in need of access to safe water. Among those targeted by UNICEF, 55 per cent are women/girls, 35 per cent are IDPs, 51 per cent are host community members, 9 per cent are refugees and 5 per cent are returnees.
34. UNICEF covers 15 per cent of the sector target, which covers 58 per cent of the total people in need of safe and appropriate sanitation facilities. Among those targeted by UNICEF, 57 per cent are women/girls, 45 per cent are IDPs, 47 per cent are host community members, 4 per cent are refugees and 4 per cent are returnees.
35. UNICEF covers 60 per cent of the sector target. The sector target covers 55 per cent of total people in need of access to mental health/psychosocial support. Among those targeted, 55 per cent are women/girls.
36. Includes 176,000 women/girls/boys accessing GBV services through UNICEF's Child Protection programme and 131,280 women/girls/boys reached with GBV risk mitigation. UNICEF covers 44 per cent of sector target, which covers 55 per cent of total people in need of access to GBV services. Among those targeted by UNICEF, 88 per cent are women/girls.
37. UNICEF covers 52 per cent of the sector target. The sector target is equal to the children in need.
38. Among children targeted, 52 per cent are girls.
39. Among children targeted, 52 per cent are girls.
40. UNICEF to support financial assistance mechanisms for education and social protection for 800 vulnerable households in six municipalities of the Far North, West and Littoral regions (2,400 children indirect beneficiaries). UNICEF, with government and World Bank to support Social Safety Net Project. Of 83,000 households targeted, UNICEF will support 1,100 households (each to receive 90,000 FCFA). Target households are in Yaounde and Douala (3,300 children indirect beneficiaries).
41. 15 per cent of people targeted by UNICEF will have access to feedback mechanisms. Among those targeted, 55 per cent are women/girls.
42. Indicator represents targets for Nutrition, WASH, Education and Child Protection.
43. Calculated based on per cent of funds received in 2021 per sector, divided by beneficiary unit costs and subtracted from the total target numbers.
44. For each sector, 0.5 per cent added for COVID-19 PPE and prevention strategies; 6 per cent programme effectiveness cost in sector budget lines and not as separate item; same for 8 per cent HQ recovery cost.
45. In 2022 UNICEF, partners and Health District services will scale up joint community-based prevention of malnutrition through IYCF.
46. 2022 Nutrition budget reduction due to decrease of micronutrient distribution target and associated COVID costs, and separation between nutrition operational cost and cluster coordination costs.
47. Decreased health sector funding requirement due to removal of associated COVID-19 costs for children/women accessing primary health care in UNICEF-supported facilities.
48. In 2022, HIV/AIDS interventions are included in health sector, in line with new programme strategy.
49. US\$206,278 included in overall budget for PSEA activities targeting 825,111 people, including children, and supported across all sectors.
50. Beneficiary unit costs, per child: US\$12 for education access, US\$2 for learning materials, US\$4 for mental health / psychosocial support access.
51. Increase in emergency preparedness due to inclusion of six per cent programme effectiveness cost and eight per cent HQ recovery cost.
52. Compared to previous HAC, cluster coordination costs not included under each programme section. Include six per cent programme effectiveness cost and eight per cent HQ recovery cost.