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for every child

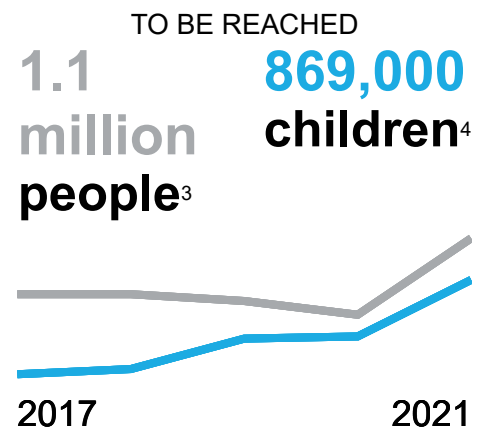
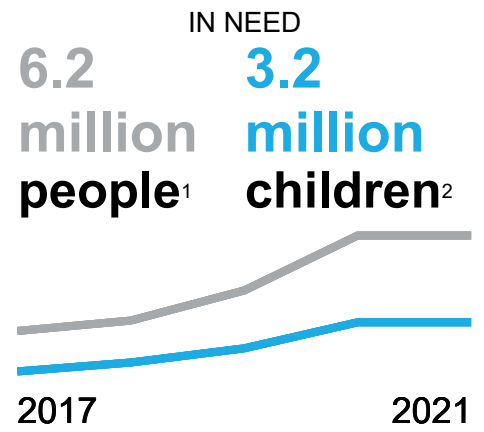
Humanitarian Action for Children

Children walk home from a UNICEF-supported primary school in Kaele, Far North Region.

Cameroon

HIGHLIGHTS

- In Cameroon, urgent support is needed to save lives, ensure protection and access to quality learning opportunities and alleviate the suffering of displaced, refugee, returnee and host community children, including those vulnerable to measles and cholera outbreaks and the coronavirus disease 2019 (COVID-19) pandemic.
- UNICEF will support its partners through capacity building, training and enhanced monitoring; invest in data improvements for better evidence, targeting and advocacy; and undertake complementary, multi-sector responses in hard-to-reach areas, especially the North-West and South-West regions.
- Given the attacks on civilians in the Far North, UNICEF will scale up its operations to improve delivery, monitoring and reporting. Child protection and education activities in the Far North, North-West and South-West will strengthen the protective environment.
- UNICEF requires US\$83.1 million to provide life-saving measles vaccination, safe water, sanitation, protection and education interventions for children affected by multiple crises. Implementing partners will deliver these services with UNICEF support, including for coordination and monitoring.



KEY PLANNED TARGETS



130,000

children vaccinated against measles



400,000

people reached with critical water, sanitation and hygiene supplies and services



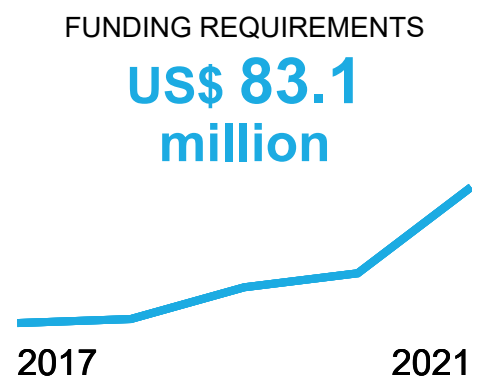
340,118

children/caregivers accessing mental health and psychosocial support



516,000

children accessing educational services



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

HUMANITARIAN SITUATION AND NEEDS

Intensifying attacks on civilians in the Far North, the continuing North-West/South-West crisis and the uncertainty complicating refugee returns to the Central African Republic have worsened the humanitarian situation in Cameroon. There are over 1 million internally displaced persons, 360,000 returnees and 418,000 refugees from the Central African Republic and Nigeria, mostly in the Far North, North-West, South-West and East regions.⁵ Children and women are facing shocking human rights violations,⁶ including sexual and gender-based violence.

Over 3 million children are affected by multiple protracted crises in areas where the nutrition situation is fragile; and more than 500,000 of these children need nutrition interventions.⁷ Only 20 per cent of children in the North-West, South-West and Far North are fully vaccinated against measles.⁸ In the North-West and South-West, 19 per cent of health facilities are not functioning due to insecurity. The number of assisted deliveries has fallen significantly,⁹ and undernourished children urgently require nutritional supplementation.¹⁰

In the Far North, isolated communities are exposed to daily killings, abductions and looting by armed groups and 150,000 children are displaced, increasing the risk of abduction and recruitment.¹¹ In 2020, increased attacks on internally displaced camps were observed, and 50,000 people fled their villages in seek of greater protection.¹² Attacks on civilians, including aid workers, have also increased.¹³ In the North-West and South-West regions, the protection of civilians, particularly children and women, is a major concern. Children, particularly boys, are being killed and abducted, and both boys and girls are experiencing family separation, gender-based violence and lack of civil documentation. Displacement is ongoing in forest areas and urban centres and to neighbouring regions (Littoral and West).¹⁴ Education is increasingly politicized, and even non-formal education has been blocked. Insecurity is threatening communities, children and humanitarian workers and aid delivery has been delayed due to restrictions on movement.

The COVID-19 crisis has exacerbated humanitarian needs and complicated the response given the overburdened health services, schools and water systems. Some 49 health districts, particularly those affected by conflict, are at risk of measles¹⁵ and nearly 1,300 cholera cases have been reported as of August 2020.¹⁶ The needs of 280,000 Central African refugees add to this strain,¹⁷ and insecurity has forced over 2,700 persons into eastern Cameroon. Insufficient consideration of gender and accountability is hindering transformative programming.¹⁸ Cash-based approaches remain peripheral. And while 25,000 people are annually displaced by natural disasters, local early warning/early action capacities are almost non-existent.¹⁹

SECTOR NEEDS



Nutrition

95,000 children have severe acute malnutrition²⁰



Water, sanitation and hygiene

1.3 million people lack access to safe water²¹



Child protection, GBViE and PSEA

1 million children need core protection services^{22,23}



Education

856,000 children need education support²⁴

STORY FROM THE FIELD



Tanya, 11, is from the Fako division. She was separated from her parents due to the ongoing violence in the North-West and South-West regions and has seen her learning path interrupted for three years. UNICEF is helping Tanya with an innovative radio learning programme that provides an alternative learning platform for children and youth affected by crises.

In the Fako and Meme divisions of the South-West region, radio learning has allowed more than 3,500 crisis-affected children to continue their learning.

Tanya, 11, studies at home in a safe environment through the UNICEF-supported radio learning programme.

HUMANITARIAN STRATEGY

UNICEF will respond to the complex and increasing humanitarian needs of children and women in Cameroon by applying lessons from the 2019–2020 emergency response, including the COVID-19 response. This includes supporting predictable partnerships with national and international non-governmental organizations; and building capacities for compliance, technical training and quality monitoring, including third-party monitoring.

UNICEF will emphasize needs-based assessment and needs-based resource mobilization—leaving no child behind. This will be informed and supported by data investments for evidence, targeting and advocacy, including by documenting the impact of conflict on children.²⁵

Children and communities will be accessed through complementary, multi-sector responses in hard-to-reach areas and sites for internally displaced persons, refugees and returnees/host communities. This will include the Comprehensive Child Response Programme in the North-West/South-West regions, which emphasizes rapid response targeting for diarrhoea, measles, malnutrition, malaria, pneumonia and neonatal care.

Given the unrelenting attacks and displacements, UNICEF will enhance its operations in the Far North by strengthening risk analysis, capacities for early action, monitoring, quality and timely reporting and advocacy. UNICEF will strengthen its staff presence for assessment, partner engagement and monitoring, drawing on its operational capacities in outposts in the Far North and North-West.

UNICEF will invest in the prevention of infectious diseases in high poverty/high displacement/refugee settings given the continuing impacts of COVID-19 and the expanding threats of measles and cholera. UNICEF will also build resilience and reduce inequities through education and by using technology to accelerate quality learning.

Gender-transformative programming will be reinforced through quarterly benchmark reviews, as well as standards and accountability for the prevention of sexual exploitation and abuse. Systems strengthening interventions embedded in humanitarian response will be tracked to articulate humanitarian and development linkages. Technical support will strengthen community-level flood early warning in the Far North and national disaster risk reduction will be supported through an emerging child-centred national platform. UNICEF will accelerate multi-sector cash-based programming.

Inter-agency coordination and partnership will be key, including the Blueprint Initiative with the United Nations High Commissioner for Refugees (UNHCR), food security, nutrition and school health interventions with the World Food Programme (WFP) and health systems strengthening and rapid response to disease outbreaks with the World Health Organization (WHO). With the Office for the Coordination of Humanitarian Affairs (OCHA), UNICEF will support cluster coordination for nutrition, education, child protection and water, sanitation and hygiene (WASH) for the North-West/South-West response.

Progress against the 2020 programme targets is available in the humanitarian situation reports:

<https://www.unicef.org/appeals/cameroon/situation-reports>

2021 PROGRAMME TARGETS



Nutrition

- **78,527** children aged 6 to 59 months with severe acute malnutrition admitted for treatment
- **345,000** children aged 6 to 59 months receiving multiple micronutrient powders



Health

- **130,000** children aged 6 to 59 months vaccinated against measles
- **200,000** children and women accessing primary health care in UNICEF-supported facilities
- **85,000** households assisted with long-lasting treated bed nets



Water, sanitation and hygiene

- **160,000** people accessing a sufficient quantity of safe water for drinking, cooking and personal hygiene
- **156,000** people accessing appropriately designed and managed latrines
- **400,000** people reached with critical water, sanitation and hygiene supplies (including hygiene items) and services



Child protection, GBViE and PSEA

- **340,118** children and caregivers accessing mental health and psychosocial support
- **175,413** women, girls and boys accessing gender-based violence risk mitigation, prevention or response interventions
- **340,118** people with access to safe channels to report sexual exploitation and abuse



Education

- **516,000** children accessing formal or non-formal education, including early learning
- **524,000** children receiving individual learning materials



Social protection and cash transfers

- **4,000** households reached with humanitarian cash transfers across sectors

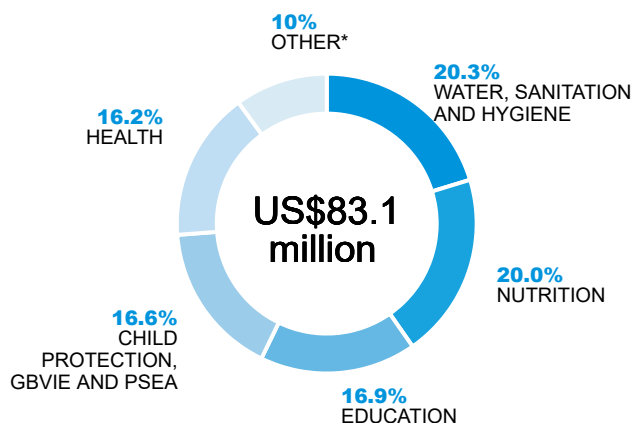


C4D, community engagement and AAP

- **399,000** people participating in engagement actions for social and behavioural change

FUNDING REQUIREMENTS IN 2021

UNICEF requires US\$83.1 million to meet the humanitarian needs of over 869,000 children and their families at risk of or affected by conflict, violence and disease. Since 2020, the situation of children in Cameroon has worsened, with continuing displacements, little hope for voluntary refugee returns to the Central African Republic and Nigeria and continuing disease outbreaks, including the COVID-19 pandemic. Due to the continuing violence in the North-West, South-West and Far North regions, additional funding is needed to assist children and women, in line with the Humanitarian Response Plan and the UNICEF-UNHCR Blueprint Initiative. This funding will enable the provision of critical vaccination, safe water supply, emergency education and child protection interventions. While UNICEF is grateful for the generosity of donors, Cameroon was among the least funded humanitarian appeals globally in 2020. Without sufficient and timely funding, UNICEF will be unable to support the national response to the country's continuing crises. Noting the increase in the number of people in need and related resource requirements in Cameroon since 2016, UNICEF will significantly scale up its targets, planned results and required resources. In all sectors, COVID-19 interventions have been integrated as appropriate.



*This includes costs from other sectors/interventions : C4D, community engagement and AAP (4.6%), Social protection and cash transfers (3.6%), Preparedness and disaster reduction (1.2%), Cluster coordination (<1%).

Sector	2021 requirements (US\$)
Nutrition	16,620,000
Health	13,435,000
Water, sanitation and hygiene	16,848,000
Child protection, GBVIE and PSEA	13,807,000 ²⁶
Education	14,035,000
Social protection and cash transfers	3,000,000
C4D, community engagement and AAP	3,829,000
Preparedness and disaster reduction	1,000,000
Cluster coordination	500,000
Total	83,074,000

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ENDNOTES

1. Office for the Coordination of Humanitarian Affairs, 'Cameroon: Humanitarian Response Plan' (revised), OCHA, June 2020.
2. Ibid.
3. This was calculated using the highest coverage programme targets of school-aged children to be reached with education materials (524,000); children aged 6 to 59 months to be reached with multiple micronutrient powders (345,000); and adults to be reached with critical WASH supplies (200,000 or 50 per cent). The total figure includes 537,707 women/girls (50 per cent) and 531,283 men/boys (49.1 per cent). An estimated 15 per cent of the total are people with disabilities, based on the 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.
4. This was calculated using the highest coverage programme targets of school-aged children to be reached with education materials (524,000); and children aged 6 to 59 months to be reached with multiple micronutrient powders (345,000). The total figure includes 437,102 girls (50 per cent) and 431,893 boys (49.7 per cent). An estimated 15 per cent of the total are people with disabilities, based on the 2016 statistical yearbook. It is expected that the Government and non-sector actors will implement additional response measures for accessible children not otherwise reached by UNICEF.
5. UNHCR, August 2020.
6. Office of the High Commission for Human Rights, April 2020; and the United Nations Department for Safety and Security, August 2020.
7. Office for the Coordination of Humanitarian Affairs, 'Cameroon: 2020 Humanitarian Needs Overview' (revised), OCHA, June 2020.
8. Cameroon Ministry of Public Health, 2020.
9. Cameroon Health Cluster, 2020.
10. Cameroon Nutrition Cluster, September 2020.
11. UNHCR, August 2020.
12. OCHA, August 2020.
13. United Nations Children's Fund, 'Cameroon Humanitarian Situation Report No. 6 - Mid-year report', UNICEF, August 2020.
14. Office for the Coordination of Humanitarian Affairs, 'Cameroon: 2020 Humanitarian Needs Overview' (revised), OCHA, June 2020.
15. UNICEF and the Cameroon Ministry of Public Health, September 2020.
16. Cameroon Ministry of Public Health, August 2020.
17. OCHA, September 2019.
18. Humanitarian Country Team, GenCAP Evaluation, September 2020.
19. Internal Displacement Monitoring Centre, Global Report on Internal Displacement, IDMC, April 2020.
20. Nutrition Sector estimates for 2021
21. UNICEF and WASH sector analysis, June 2020.
22. Due to space constraints, the following acronyms appear in the appeal: GBViE (gender-based violence in emergencies); PSEA (prevention of sexual exploitation and abuse); C4D (communication for development); and AAP (accountability to affected populations).
23. UNICEF and protection sector analysis, June 2020.
24. UNICEF and education sector analysis, June 2020.
25. UNICEF leads cluster coordination for the WASH, nutrition and education clusters and the child protection area of responsibility.
26. This includes US\$234,000 for prevention of sexual exploitation and abuse interventions and US\$1.7 million for gender-based violence interventions.