

Monthly Humanitarian Situation Report CAMEROON

Date: 25 JUNE 2013

Highlights

- With the serious deterioration of the security situation in Borno State (Nigeria), a significant influx of refugees has entered Cameroon's Far North Region since June 10th. As the pre-registration process is on-going, approximately 2,000 people so far, mainly women and children, have been registered by UNHCR as of June 24th in the Cameroonian border village of Zelevet. More refugees are expected to be registered over the next coming days and probably weeks. Recent arrivals are also reported in nearby villages.
- A joint UN assessment mission was conducted on June 20th (UNHCR, UNICEF, WHO, WFP) in the village of Zelevet, which concluded that an immediate humanitarian intervention is needed in WASH, Health and Nutrition sectors. UN Agencies have started to provide support (UNICEF is supplying 500 WASH kits and 500 hygiene kits). A site for a refugee camp has been identified and infrastructure building is to be planned.
- A high level site visit was conducted by the secretary of state in charge of epidemics at the Ministry of Public Health in Adamawa, North and Far North Regions (June 10th-12th), regarding trans-border epidemiological surveillance.



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A view of the Refugees in Zelevet village

Situation Overview & Humanitarian Needs

- Narrative description of Current Situation

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 of age. The percentage of the population suffering from food insecurity is above 15% in the two regions¹. The nutrition situation for 2013 seems to be similar as that in 2012 as there is a structural vulnerability of populations in the northern regions that increases with each crisis. As per the survey of July 2011,² 14.6% (North) and

¹ Analyse globale de la sécurité alimentaire et de la vulnérabilité de mai 2011.

² SMART nutrition survey July 2011 carried out in North and Extreme North regions

17.9% (Extreme North) of households do not have sufficient food availability during the lean season and 30.3% of the rural population is vulnerable to food insecurity. Coping strategies of the poorest households is to reduce consumption of food which could lead to poor nutrition for the most vulnerable such as women and children.

A post-harvest nutrition survey with SMART methods, 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 (SAM). Some aggravating factors are still present, such as low access to sanitation and clean water, as well as the incidence of diarrhea and other childhood diseases.

With the serious deterioration of the security situation in Borno State, Nigeria, since June 10th an influx of refugees from Nigeria has been observed in bordering villages in Mayo Moskota subdivision, Mayo Tsanaga Department, Far North Region.

On June 16th, local authorities were informed of the presence of 3,085 refugees in Zelevet and Krewa Maffa villages. Families were accommodated in the school and in a church (Zelevet village) as well as hosted by local communities (Krewa Maffa). Another estimated number of 320 persons arrived from Nigeria in neighbouring villages as well as 600 others in Assigashia village; they were accommodated by local communities. So far, as of June 24th, UNHCR has pre-registered 2,000 persons in Zelevet village. The influx continues.

A joint UN assessment mission was conducted on June 20th (UNHCR, UNICEF, WHO, WFP). The report will be made available on June 25th. Main recommendations include i) continuous monitoring of influx and registration, ii) support to refugees in villages on arrival, iii) establishing a refugee camp, and iv) strengthening coordination among actors.

UN agencies' interventions in Zelevet are on-going in order to ensure access to health, nutrition, water, and to avoid a deterioration of the humanitarian situation. An immunization campaign will be carried out. Some NFIs are being distributed, and drugs have been provided to the local health facility.

A site to serve as a camp for refugees was identified on June 22nd and 23rd in Mokolo subdivision; an immediate action now needs to be taken to build adequate infrastructure before refugees are transferred to the camp..

- **Highlight specific humanitarian needs**

The **targeted caseload for 2013 for the two regions is 57,616 cases of SAMⁱ** and 93,456 cases of Moderate Acute Malnutrition (MAM). UNICEF is planning to conduct a SMART survey in June/July 2013 during the lean season.

To ensure an appropriate response, some constraints will be taken into consideration: (i) weak capacities of government in the management of acute malnutrition, (ii) lack of infrastructure (roads, for example), (iii) unreachable population during rainy season and (iv) weak capacities of resilience amongst population.

Estimated Affected Population <i>(Estimates calculated based on initial figures from UNICEF Humanitarian Action Update February 2012, Cameroon General Census 2013)</i>	
	Total
Total Affected Population	5,891,785
Children Affected (Under 18)	-
Children Under Five	1,178,357

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

As for the **refugee situation**, immediate humanitarian needs include WASH, Health and Nutrition sectors in order to avoid a deterioration of the humanitarian situation among refugees in the Cameroonian border villages.

Setting up a refugee camp will also imply mobilising resources in all sectors, especially at a first stage, shelter, NFIs (UNHCR), WASH infrastructures, and support to the local health structure (UNICEF). Education and Child Protection interventions will be planned once refugees are installed in the camp.

Inter-Agency Collaboration and Partnerships

- UNICEF and WFP have organized jointly with UNHCR a training for trainers in the East and Adamawa regions (27th May to 8th June) on the integrated management of acute malnutrition (moderate and severe) as per revised national protocols.
- The agreement with Plan International in the Health Districts of Poli (North region) and Yagoua (Far North) has contributed to 150 children suffering from SAM treated in CNA and CNTI in May in the affected districts.
- The French Red Cross has conducted a SQUEAC- Semi Quantitative Evaluation of Access and Coverage survey in the Urban Maroua Health District during the post-harvest season. The estimated coverage of the services of the management of acute malnutrition (CNA and CNTI) in the district is 34,9% (22,4% - 47,6%). Main barriers found are:
 - Weak knowledge of under nutrition/acute malnutrition and causes.
 - Women workload (field work, diseases, ceremonies, marriages, passing away)
 - Going to health centers – late resort (preference of traditional healers or self-medication)
 - Lack of knowledge of the existence of a programme for the management of acute malnutrition.
- The SMART survey is on the planning phase in collaboration with Ministry of Public Health, UNICEF, UNHCR, WFP and NGOs.
- As influx of refugees from Nigeria is ongoing, UN Agencies and partners in far North Region are strengthening the coordinating for a more efficient response.

Programme response

SAHEL NUTRITION CRISIS AND FLOODS 2013

Sector	Estimated # / % coverage	UNICEF & operational partners		
		UNICEF Target	Cumulative results (#)	% of Target Achieved
Nutrition	# of children <5 with Severe Acute Malnutrition admitted to Therapeutic care	57,616	20751*	38%
UNICEF Operational Partners: MoH. Plan Cameroon , OFSAD				

WASH	# of malnutrition (MAM+SAM) affected children who receive hygiene kits with key hygiene messages	53 580**	13 713	26%
	# of nutritional centres delivering the WASH minimum package	470	334	71%
UNICEF Operational Partners: MoH, Ministry of Water resources and Energy, Plan Cameroon				
Health	# of children under one immunized against measles in the emergency affected Regions (Month target) April 2013***	80521	73694	92%
	UNICEF Operational Partners: OMS, International Medical Corps			
Protection	# of children with SAM who received psychosocial care through Child Friendly Spaces	3,000	300	10%
	UNICEF Operational Partners: MINAS			

*Information available is for health districts. 95% of reports from districts are available

** Number of MAM and SAM under 5 children admitted between January and May 2013 (Dynamic target)

*** Results based on every 2-months data.

UNICEF and partners' programming

Key results

Nutrition

- Joint supervision and technical support has been ensured in the 8 CNA of Gashiga health district (North Region). The visits were organized in collaboration with Regional Nutrition Focal Point or delegate of Ministry of Health. The mission found that the stock was available as well as staff and the storage was appropriate. Formative recommendations were done in order to respect the admissions criteria and to improve anthropometric measurement.
- A steering committee kick-off meeting for the SMART survey was held on 13 June. The aim of the first meeting focused on the key elements of the survey (nutrition and mortality components) for the regions of the North, far North, Adamawa, East and refugees cluster. The survey will be conducted amongst 2,000 households (2,700 children under five) during the months of July and August, and will evaluate the nutrition situation during the lean season.
- UNICEF and WFP, with the collaboration of UNHCR, has assisted the MoPH in two training of trainers for the management of acute malnutrition (region and districts) from 28th May to 8th June for 100 trainees: 46 in the East region and 54 in the Adamawa region (staff from hospitals, regions, health districts health area staff) in Bertoua (East) and in Ngaoundéré (Adamawa). The main goal was to provide quality training for trainers in order to upgrade their clinical knowledge, improve organization of the integrated management of acute malnutrition as per revised protocol, mostly in districts with a refugee population.
- In order to increase prevention measures among young children living in the regions with highest rates of malnutrition and anemia, a new intervention of improving the quality of complementary food through home fortification will be introduced in a health district-Bibemi in the North region. UNICEF, WFP and Helen Keller International with the technical expertise of the University of

British Columbia are conducting a formative research. Up to 20 people received training in nutrition and formative research method from 10th to 15th June. The study will provide key information via focus groups, about feeding practices and main geographical, economical barriers and availability of quality food during lean season. The feasibility of the introduction of a micronutrient powder will be done in a trial.

WASH

- 13,713 WASH kits have been distributed to families with malnourished children in Nutrition centres in the North (4,225) and the Far North (9,488) in 2013.
- From 6 May to 21 June, a total of 192 persons (122 in the North and 70 in Far North region) were trained as facilitators of PHAST (Participatory Hygiene and Sanitation Transformation) by the Ministry of Health jointly with the Ministry of Water Resources and Energy. After training they will start the sensitization of 153 communities (93 in North and 60 in Far North) on water, hygiene and sanitation.
- Concerning agreements signed with partners:
 - The construction / rehabilitation of 5 boreholes by CODAS CARITAS in Yagoua is complete at 100%. A water quality control is to be done before reception of borehole.
 - During the reporting period IMC has constructed 16 additional public's latrines in IDP camps of (Gargaye and Mahaou) thus a total of 30 latrines. The 20 communities' volunteers (14 men and 6 women) trained in May sensitized 337 additional person during this month thus a total of 1559 people sensitized on good hygiene and sanitation practices.
 - Under the new agreement signed with 2SW, one out of 5 borehole to be constructed or rehabilitated is complete thus a total of 35 boreholes realized out of 49 boreholes planned to be constructed /rehabilitated in flooded areas and vulnerable schools and communities.

Health

- Routine immunization coverage is improving in both regions. Results at the end of April 2013 indicate that 79,551 (98.8%) of the 80,521 children under one were immunized against DPT-HepB Hib3 while 81,846 (50, 1%) of the 163,341 pregnant women received TT2+. There is information lag of 2 months as the data needs 2 months to be confirmed and reported.
- The second round of Local Immunization Days was organized in the Far North and the North regions from May 24th – 26th 2013. All the 43 health districts and 409 health areas were involved targeting 1,526,009 children aged 0 to 59 months. In Partnership with WHO, Rotary International, the Lion's Club and traditional authorities, UNICEF country office received a technical support Mission from WCARO by means of a Polio Specialist consultant from May 19-31st 2013. UNICEF purchased 2,228,000 doses of polio vaccines and financed communication activities that focused on border health districts with neighboring countries as well as external monitoring.
- Results showed overall improvement in the performance based on administrative data as well as on external monitoring in both regions as follows:
 - 1,599,369 (112%) children under 5 received OPV out of which 1,047,452 (109 %) were in the north and 551,917 (116%) were in far north regions
 - Proportion of missed children dropped from 6% in April to 5% in May. There was a drop in the proportion of missed children in all regions though Adamawa region remained high (8%).
 - Only 88% of parents said they had information ahead of the campaign as opposed to the expected 95%

- A preventive campaign against Meningitis A was organized in 5 health districts (2 in Far North region and 3 in the North region from May 31st to June 11th 2013. This permitted to reach:
 - 45,844 children between 12-59 months
 - 65,700 children between 6-14 years
 - 110,413 children aged over 15 years

Education

- A Ministry of Basic Education (MINEDUB)-UNICEF technical restitution of the three week cross-sectoral mission to 60 flood-affected school sites was given in Yaoundé by the Emergency focal point of the MINEDUB in presence of key implementing partners.
- Based on information gathered during the field mission and following discussions held with regional education delegates, a final list of schools to benefit from UNICEF-supported package of interventions for 60 flood-affected schools was approved.
- GPS reference collected during the mission was used to create an application on Google Earth for the initial mapping of schools to include photos and basic educational information and data per school.
- A PCA with PLAN International for the construction of 60 classrooms including training of school committees, and support for school improvements was finalized and will be submitted for signature in the next days.
- The recruitment of a construction officer to support the construction component is to be finalized pending discussions with HR)

HIV and AIDS

- From the partial data collected in the three districts of Pitoa, Garoua I & III over the reporting period, a cumulative number of 1191 children were recorded with severe malnutrition in the CNTI/CNA in the North region. A proportion of 64.8% were tested for HIV with 6.7% found to be positive which is far above the regional average (1, 2%).
- With support from the pilot program to integrate HIV management in malnourished children, 25% of HIV positive children were successfully referred and benefited from ARV treatment.
- Over the same period, a cumulative number of 471 pregnant women or breastfeeding mothers were found with symptoms of poor nutrition and 33% of them accepted to be tested with 4.4% found to be HIV positive.
- A field supervision trip was carried out in June by the HIV team to assess progress made in integrating HIV in the management of malnutrition. Results indicate that there is a significant improvement in most of the CNTI/CAN in the north and far north regions despite shortages of tests that occur in some of them.
- A discussion held with the regional delegate of public health concluded on the urgent need to scale up HIV integration in more CNTI and districts in the region and also to explore the possibility for an awareness raising campaign in the Nigerian refugees population

Protection

- The commemoration of the 23rd Day of the African Child was launch on June 3rd 2013 in the resettlement camp of Guirvidig (Fart North). This occasion gave UNICEF's Representative and the Minister of Social Affairs the opportunity to spread the message about the necessity to prevent violence and harmful practices affecting children and to plead for the elimination of such

practices. Children affected by the floods fully participated to this event by presenting drawings, songs, and sketches. The on-site visit that followed highlighted the degradation of the living conditions of affected populations who still have not been resettled in a definitive and secured area.

- MINAS and UNICEF are preparing the launch of this year's edition of the State of the World's Children, which focus on Children with Disabilities. Therefore, thirty Cameroonian journalists, members of UNICEF Cameroon network of child-friendly journalists, will be sensitized on this issue during a training day **to be held in Garoua on July 4th**. After this training, they will be well informed to report on the launch of the SOWC, and use the findings and recommendations to report on the situation of children with disabilities and actions needed to achieve inclusive societies.
- The strengthening of capacities to prevent, monitor and respond to vulnerabilities affecting children is still ongoing. DRAS North and UNICEF protection section are currently developing two training module for the training of 67 community health agents of the Health district of Lagdo. This training will be held by the end of June after the training of trainers. After this training, these agents will be well equipped to promote birth registration and to detect and refer cases of violence against children within their community.

Significant trends and analysis

Nutrition

- The flux of incoming displaced population from Nigeria will be a potential risk, as most of the population come from states with rates below 2% of severe acute malnutrition (as per nutrition survey September 2012). An active screening of acute malnutrition with a MUAC is needed in order to assess the situation. A risk and vulnerability assessment is also needed. Cameroon has a border of more than 1,000 kilometers with Nigeria and imports products from Cameroon. In the northern part, Nigeria imports cereals (maize, sorghum, paddy), pulses (peanuts, cowpeas) and livestock. The volumes would be relatively important. Cameroon buys yams, fruit, poultry and various food products (oils, sweets, etc.). The commercial flux could be potentially affected.

WASH

- As result of deteriorating security situation in Northern Nigeria, a total of 2,000 refugees have so far been pre-registered in Hawa Mafa and Zelevet villages in Mayo Tsanaga division in the Far North region of Cameroon. As the number of refugees increases and goes beyond government local capacity of management and rapid response, UNICEF WASH rapid intervention is required and on-going

Health

- The surveillance of measles in the North and Far North regions shows that 116 suspected cases have been identified. An epidemic has been declared in Badang health area Ngong Health District (3 of 6 cases collected were confirmed cases through lab test in Ngong health district within 22th to 23th weeks). An outbreak response was conducted from June 15th- 17th 2013 targeting 4,137 children aged 9 months to 5 years; 4572 (111%) children were vaccinated. Surveillance of vaccine preventable diseases and preventive measures has been strengthened at health center and community levels.

HIV and AIDS

- The incoming displaced populations from Nigeria constitute a major vulnerability factor for HIV infection for thousands of adolescents and women with a high risk of unprotected sex and even rapes and sexual violence.
- A quick assessment is urgently required to help design an intervention to meet the needs for prevention, protection and HIV treatment
- HIV commodities shortage is to be addressed and orders have been already made to that respect
- Coordination with other stakeholders for an efficient response needs to be done under the leadership of local authorities

Protection

- The reported situation related to displaced and refugee's people and children from Nigeria needs to be well monitored in order to have more information on child protection needs.
- Child protection cases (child neglect, child abuse, child exploitation, harmful practices) continue to be reported in the Far North, North and East to the DRAS and NGOs.

Critical supplies in pipeline or distributed

Nutrition

- The last month distribution is still ongoing in the CNA and CNTI. A new distribution will be organized in July

WASH

- 20,000 WASH kits have been ordered and purchased. The challenge remains to complete the preposition all those kits before the rainy season reaches its peak.
- Regarding Nigerian refugees situation, as of June 24th, 500 WaSH kits, 500 Hygiene kits, 70 cartons of soaps, 500 kettle and 500 child defecation pots are being distributed to refugee families in the village of Zelevet. More WASH supplies will be made available as HCR registration is continuing. WaSH supplies are also needed for building WaSH infrastructure in the identified site for refugee camp.

Education

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

SUPPLY & LOGISTICS

- 20,000 WASH kits ordered
- 557,000 USD of supplies distributed this month (nutrition, anthropometric equip., medicines)

HUMAN RESOURCES

Total # of staff under recruitment (temporary and fixed; surge) and total staffing needs unfunded

- 1 nutrition consultant is to be recruited to provide assistance to north region.

Funding Update

Funding Requirements				
Appeal Sector	Requirements as per HAC January 2013	Funds received	Funding gap	
			\$	%

Nutrition	6,900,000	9,697,147.00	-2,797,147.00	-41%
Health	600,000	0	600,000	100%
WASH	2,800,000	2,000,000	665,067	24%
Education	500,000	2,134,933.00	-1,634,933.00	-327% ³
Child Protection	200,000	0	200,000	100%
Other (tb specified) (HIV)	100,000	0	100,000	100%
Cluster coordination				
Total	11,100,000	13,832,080.00*	-2,867,013	-25.83%

*The total does not include a maximum recovery rate of 7%. (Funding is USD 14.8 million inclusive of the recovery rate). The actual recovery rate on contributions is calculated in accordance with UNICEF Executive Board Decision 2006/7 dated 9 June 2006.

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³ Includes funds received from the Government of Japan for school rehabilitation project, capacity development for school maintenance and management and supplies distribution in these same schools