### Highlights

**Humanitarian context**

- Thousands of new displaced persons have been reported close to the Nigerian and Chadian borders in the Far North Region. In collaboration with Cameroonian authorities, UNICEF and other humanitarian agencies have launched rapid needs assessment.
- Following the attacks in the Far North region carried out by the group known commonly as Boko Haram, Cameroonian authorities have banned “public gatherings”. UNICEF is working with authorities to continue to procure humanitarian assistance at the community level.
- Humanitarian access to people in need remains highly difficult due to the security situation in the Far North Region and in some areas close to the border with Central Africa Republic.
- New cases of cholera and deaths have been registered in the Far North region.

**In figures**

- 182 volunteers of the North and Far-North regions received refresher training on the activities carried out to prevent and respond to the cholera outbreak.
- 3,104 children newly joined child friendly spaces in September. A of total 14,378 children (6,908 girls and 7,470 boys) benefit from recreational activities and psychosocial support in 17 child friendly spaces in Minawao camp.
- 157 teachers (46 women and 111 men) from 41 host schools with refugee children in East and Adamawa regions were trained in education in emergencies, psychosocial support, protection of refugees and children, peace education and life skills.
- 1,717 unaccompanied and separated children (165 unaccompanied and 1,552 separated children) have been identified by social workers of UNICEF partner ALDEPA in IDP communities in the Far North region. Tracing activities are underway to fast track family reunification.
- 3,215 children with Severe Acute Malnutrition (SAM) in four operational inpatient facilities and ten outpatient therapeutic programs (OPT). In addition, 4,918 children were admitted for treatment (2,811 in Adamawa and 2,107 in East)

### SITUATION IN NUMBERS

**30 September 2015**

- **253,042** CAR REFUGEES
- **123,223** arrived since January 2014
- **8,014** arrived since January 2015
  (Source: UNHCR, July 2015)

- **SAHEL NUTRITION CRISIS**
  - **69,865** SAM
  - **120,441** MAM
  (Source: UNICEF-MOH, SMART 2014)

- **61,749** NIGERIAN REFUGEES
  - **20,553** arrived since January 2015
  - **46,082** in the Minawao refugee camp
  - **12,487** Nigerian out of Minawao refugee camp
  (Source: UNHCR, August 2015 – UNHCR-IOM, May 2015)

- **81,693** INTERNAL DISPLACED PERSONS
  (Source: IOM-UNHCR, May 2015)

- **46** cholera cases and **4** deaths
  (Source: MOH)

**UNICEF Funding Requirements 2015**

- **US$ 40.2 million**
- **Funding Levels 2015**
  - **30%**
Situation Overview & Humanitarian Needs

**Nigerian emergency response**: Cameroon continues to host nearly 62,000 refugees from Nigeria. Around 46,000 of them are located in the Minawao refugee camp where they benefit from an integrated assistance, and more than 12,000 remain outside the camp along the Nigerian border. According to the assessments conducted by IOM & UNHCR, about 86,000 IDPs are reported in four departments of the Far North region. Despite the security deterioration in the past months, the Government of Cameroon, UNICEF, UNHCR and other partners continue to provide life-saving assistance to refugees and IDPs.

**CAR emergency response**: Cameroon hosts more than 253,000 Central African refugees with the majority located in the East and Adamawa regions who are still in need of life-saving and protection assistance. The needs are multiple and require an integrated approach. UNICEF, in collaboration with the Government of Cameroon and UNHCR, provides lifesaving assistance including safe access to water, sanitation and hygiene (WASH), child protection, education and health, nutrition and HIV. Since January 2015, the influx of refugees has been stabilized (approximately 10,000), however UNICEF and its partners continue to provide life-saving service to refugees and to improve the access to basic services to the host community to favour peaceful coexistence.

**Sahel Nutrition Crisis**: Results of the 2014 SMART survey indicate that Far North, North and Adamawa have a global acute malnutrition prevalence (GAM) of 9.0 per cent, 6.7 per cent and 5.2 per cent respectively. The Far North region has a prevalence of severe acute malnutrition (SAM) at the emergency threshold of 2.0 per cent. Out of an estimated 69,865 SAM, the targeted caseload supported Far North, North, East and Adamawa regions is of 58,113 children under-five for SAM. Since beginning of 2015, the humanitarian situation in Far North, especially at the Nigerian border has deteriorated related to the influx of refugees and displacement of population. Results of a massive acute malnutrition screening conducted in July indicate a precarious situation in most of the health districts. These districts, according to the food security survey (EFSA) done by WFP in June 2015, are in a state of severe or moderate food insecurity. In addition 47 per cent of the refugees are in food insecurity and 44 per cent of the IDPs, with 18 per cent in severe food insecurity. Measles and cholera outbreaks confirmed the precarious health situation in the region.

**Epidemics preparedness and response**: 46 cholera cases and 4 deaths have been reported so far. In collaboration with the International Federation of the Red Cross / Crescent, UNICEF continues to support the Government and the population of Cameroon through preparedness and prevention activities, mainly in the field of WASH (Water, Sanitation and Hygiene) and Communication for Development.

Humanitarian leadership and coordination

- The country emergency coordination is led by the Humanitarian / Resident coordinator and supported by OCHA. In response to the complex crisis in the Far North region, the Humanitarian Country Team (HCT) has elaborated a specific coordination mechanism led by UNHCR in Maroua.
- Emergency responses related to Nigerian and CAR refugees are coordinated by the Government of Cameroon and UNHCR. UNICEF actively participates at the central and field levels in sectorial and multi-sectorial coordination fora, especially in the fields of Child Protection, Education, Nutrition and WASH.
- With regards to the Sahel, IDP and epidemic crises, UNICEF is co-leading with the Government the Nutrition, WASH and Education sectors as well as the sub child protection sectoral group. The sectorial groups meet on a regular basis both at the central and field levels.
- Humanitarian needs and humanitarian strategic response plans are coordinated through the inclusive HNO-HRP process; under the leadership of OCHA, UNICEF is participating – both as UN agency and as co-lead of several sectoral groups – to the new 2016 HNO-HRP which is in process of finalization.

Humanitarian Strategy

UNICEF is mobilizing key stakeholders in the humanitarian crisis response, specifically in nutrition, WASH and education. UNICEF supports malnourished children through integrated management of acute malnutrition and the delivery of therapeutic products and drugs for treating complications among children with SAM and other childhood illnesses that are directly linked to the incidence of malnutrition. WASH activities are developed for nutritional centres and at the household level to contribute to malnutrition prevention and to halt the vicious cycle of malnutrition and diarrhoea.
UNICEF supports the prevention and treatment of cholera through behaviour change activities, including activities related to water, sanitation and hygiene services. This also includes cholera case management by making essential supplies available and by training partners in case management. In response to the CAR and Nigerian crises, UNICEF has established a permanent presence in Bertoua and Maroua, and is implementing an Integrated Emergency Response package for refugees, IDPs and for host communities including nutrition, health, HIV, WASH, education and child protection related interventions.

Summary Analysis of Programme Response

**CAR emergency crisis**

**Nutrition**
- UNICEF supported the treatment of 3,217 children refugees with Severe Acute Malnutrition (SAM) in four operational inpatient facilities and ten outpatient therapeutic programs (OPT) in Adamawa and in the East regions since the beginning of 2015. In addition, 4,918 children among host communities have been admitted for treatment (2,811 in Adamawa and 2,107 in East).
- Cameroon’s Ministry of Public Health (MoH), with the support of UNICEF, conducted three sessions of training on Infant and Young Child Feeding (IYCF) for health workers and members of local associations in seven districts of Adamawa and East regions.
- A supervision of the Integrated Management of Acute Malnutrition (IMAM) was held in 16 OTP centres and three inpatient facilities in seven districts of Adamawa and East regions. The result of this supervision shows that health facilities identified with weak competencies in IMAM need technical and supply support.
- Main priorities remains to ensure supply of therapeutic product as well as support to Infant and Young child feeding practices activities.

**WASH**
- Community Led Total Sanitation (CLTS) have been launched in 98 communities of Djohong and Ngoura councils with host refugees by ASOL. As a result, a total of 662 households have constructed their latrines and about 2,700 persons use these new latrines. Also, through partnership with Adventist Development and Relief Agency (ADRA), two supervisors and 11 animators have been trained in CLTS approach and have launched the process targeting 100 communities in Adamawa and East regions.
- In the East region, a total of eight schools and seven health centres hosting refugees have been equipped with 45 new latrines.

**Education**
- 157 teachers (46 women and 111 men) from 41 host schools with refugee children in East and Adamawa regions, were trained in education in emergencies, psychosocial support, protection of refugees and children, peace education and life skills.
- The back to school campaign for the 2015-2016 school year started in September with the distribution of 385 school in box kits, 171 recreation kits and 45 Early Childhood Development (ECD) kits in six refugee sites and six host schools around the sites. This material will support 14,846 children (5,962 girls and 8,884 boys) to resume education activities in Temporary Learning and Protection spaces. During the campaign, 12 community debates on “the importance of sending every child to school” were held in six refugee sites with the participation of neighbouring host communities. The debate targeted key community leaders, and religious and traditional authorities and gathered a total of 278 participants (224 men and 54 women) who took part in the debates.

**Health**
- UNICEF in synergy with other partners supported systematic immunization of new refugees against polio and measles at Kenzou, Garoua Boulai, Tocktoyo & Gbiti entry points.
- UNICEF along with its partners conducted the third round of Local immunization days (JLV3 15) against poliomyelitis using Oral Polio Vaccine (OPV) in Adamawa and East regions; 527,817 under-five children (92 per cent of the targeted 573,001 children) have received vaccine with 7,374 refugee under-five children (93 per cent of the targeted 7,854 children) in Adamawa region.
- 922,435 persons have been sensitized on the benefits of immunization during a door to door visits of 306,850 households by 2,454 social mobilisers in Adamawa region.
• 46,980 supplementary Long Lasting Insecticide Treated Nets (LLINs) has been deployed in 16 health areas in completion of 550,000 needed for the national malaria prevention campaign in the East region, for host and refugees households. This will contribute to enhance the ownership of a minimum of two LLINs to at least 20,000 additional households.

**HIV/AIDS**

• 19,670 pregnant women attended the first antenatal care (ANC1) in East and Adamawa regions. Voluntary counselling and testing was offered to 16,429 pregnant women (482 of them refugees). Among 835 women (5.08 per cent) who tested positive 509 (60.96 per cent) received ARVs to prevent mother to child transmission of HIV.

• 1,177 out of 2,214 children suffering from Severe Acute Malnutrition received at the CNA/CNTI were tested for HIV and 65 of them who tested positive have been referred to the approved treatment centres for treatment, care and support.

**Child Protection**

• Since April 2014, in the three refugees’ sites of Gado, Lolo and Borghop, 15,297 children (6,594 girls and 8,703 boys) received psychosocial support, including recreational activities, sports and early childhood development.

• UNICEF implementing partners (ASSEJA and IMC) identified two unaccompanied children and one separated children. Since January 2015, UNICEF and its partners have identified 25 unaccompanied refugee children and 230 separated refugee children on the three refugees’ sites of Lolo, Gado and Borghop.

• Social workers of UNICEF implementing partners conducted 101 home visits to follow up on children victim of abuses as well as on separated and unaccompanied children. They completed 23 Best Interest Assessments (BIAs) for 16 separated children, two unaccompanied children and five children at risks. Nine cases of separated children have been closed: children are well treated, are going to school and are follow-up in child friendly spaces (ETAPeS). They are no more ‘at risk’.

• 640 adolescents in three sites (boys and girls) have participated to the life skill activities on: cooking, gardening, hair dressing and Sewing.

• Under the leadership of UNHCR, the 14 social workers of UNICEF implementing partners (ASSEJA and IMC) attended a four day training programme to strengthen their capacities in conducting Best Interest Assessment (BIA) and Best Interest Determination (BID) process.

**Sahel nutrition crisis**

**Nutrition**

• Nutrition Working Group meeting took place on 10th September. The main recommendation was to reinforce the joint field supervision in order to improve the quality of nutrition data. Support is procured to health workers to do the monthly report as well as to the data manager at the district level to improve data analysis.

• Since January 2015, UNICEF supported the treatment of 21,633 children Cameroonian with SAM in the outpatient therapeutic programmes in Far North (including children in IDP host communities) and 10,947 children in North (65 per cent of the targeted 48,967 children in both regions).

• The MoH, with the support of UNICEF, started a nutrition survey based on SMART methodology in Adamawa East, Far North and North regions (preliminary results expected by end of October).

**WASH**

• Since January 2015, 10,818 severe acute malnourished children have received a WASH kit with key hygiene messages in North and Far North regions.

**Child Protection**

• 200 malnourished children under-five admitted in care centre benefited from psychosocial support through early child development activities co-organized by two animators and community based workers in Borghop refugees’ site. One ECD kits and six mats have been distributed to the care centre to support this month activities.

**Nigerian emergency crisis**

**Nutrition**

• In September, 11,461 children under five were screened for acute malnutrition in the Minawao refugee camp: 176 children were found to have moderate acute malnutrition (MAM) (1.5 per cent) and 22 children were found to have
severe acute malnutrition (SAM) (0.2 per cent). Those children with SAM were referred to outpatient therapeutic care.

- Since January, UNICEF supported the treatment of 603 children with SAM in the outpatient therapeutic programs run by MSF-CH in the camp. That represents 72 per cent of the 842 children targeted for 2015. Ongoing new arrivals since January 2015 and improvement of case finding activities leads to increase in new admissions rates over the last three months.
- Due to lack of access to the Logone and Chari region, it is still difficult to estimate the precise situation and needs of the population in terms of nutrition. Few partners (2) are present on the field and most of the activities are done in remote control.

**HIV/AIDS**

- 14,414 pregnant women attended the first antenatal care (ANC1) in four health districts of Far North region. Voluntary counselling and testing was offered to 7,761 pregnant women (53.84 per cent of targeted women). Among 215 women (2.77 per cent) who tested positive 129 (including those whose knew their status before) received ARVs to prevent mother to child transmission of HIV.
- 499 out of 2,961 children suffering from acute severe malnutrition received at the CNA/CNTI were tested for HIV. 14 out of 20 children who tested positive have been referred to the approved treatment centres for treatment, care and support.

**Education**

- The school of Minawao refugee camp has resumed its activities and 10,178 children (4,682 girls) have already enrolled for the new school year. It is estimated that 7,213 children (3 to 17 years old) are still not accessing education. Following the training of 90 teachers working in Minawao (in August 2015), UNICEF supports the Ministry of Basic Education for the pedagogic supervision of education activities organized within the camp. District Inspectors will carry out a minimum of one mission per month, using tools developed in collaboration with all involved actors.
- UNICEF in collaboration with the Regional Delegate of Ministry of Basic Education organized distributed learning and teaching material (80 School in a Box, 138 recreation kits, and 17,249 Learning kits made of local materials - pencils, pen, slates, chalks, etc.) to 14,002 refugee children (6,441 girls) and 17,249 children from host and displaced communities (7,935 girls).

**WASH**

- The construction of 132 boreholes in 13 municipalities is fully completed in Far North region which address the need of about 38,500 inhabitants and 13 maintenance boxes have been given to all the municipalities where those boreholes were built.
- Promotion of good sanitation and hygienic practices through Community Led Total Sanitation (CLTS) activities is ongoing in 463 villages of the targeted municipalities in Far North region. 1,335 members of local follow up committee (393 women) were trained on how to support and help community members in the construction of latrines with available local materials. 8,182 families have constructed newly latrines and equipped with material for hand washing.
- UNICEF through a partnership with the NGO Fondation Bethléem de Mouda (FBM), distributed WASH kits to 8,823 IDPs. 60 community health workers were trained on activities of hygiene promotion and 13,140 persons including IDPs were reached out during sensitization on the good WASH practices.

**Cholera Crisis**

- Following the cholera outbreak in the North region particularly in Guider, UNICEF response activities were conducted through the partnership with International Federation of Red Cross (IFRC). A total of 182 volunteers of the Nord and Far-North regions received refresher training on the activities carried to prevent and response to cholera outbreak. A disinfection campaign conducted by those volunteers is ongoing in the houses and latrines in villages where new cholera case have been reported.
- Ten buckets (45 kg each) of chlorine were made available to DRSP in the northern region and as a result the stocks of chlorine were reinforced in the district health centres.

**Child Protection**

- 88 foster families supported by UNICEF partner ALDEPA hosting unaccompanied and separated children were trained on child protection issues, roles and responsibilities of foster families in providing alternative interim care to vulnerable children. 72 unaccompanied and 232 separated children (UASC) out of a total of 660 UASC identified so far in Minawao refugee camp receive support from ALDEPA.
• 3,104 children have joined child friendly spaces in September. A total number of 14,378 children (6,908 girls) benefit from recreational activities and psychosocial support in 17 child friendly spaces in Minawao camp.

• 10,624 children (5,562 girls) are registered by ALDEPA in IDPs communities. These children benefit from psychosocial and recreational activities in nine child friendly spaces (community spaces made available by traditional leaders and municipalities). Due to security concerns, ‘public meetings’ have been forbidden by the Government and an alternative strategy is being implemented by ALDEPA by setting up family based children groups in order to conduct psychosocial support for IDPs children.

• 1,717 UASC (165 UAC and 1,552 SC) have been identified by social workers of UNICEF partner ALDEPA in IDP communities in Mayo Sava, Mayo Tsanaga, Logone-and-Chari and Diamare departments. Tracing activities are underway to fast track family reunification.

• UNICEF provided support to the implementing partner ALDEPA who conducted 43 sensitisation sessions on child protection and child rights promotion that covered 2,161 households: 2,949 men, 3,957 women, 986 youths (491 girls) eight traditional leaders and five religious leaders in Far North region.

• MINPROFF, with UNICEF support conducted a three day training session on Family Tracing and Reunification for 40 child protection actors including social workers, animators and deputy prosecutor and police officers, operating in humanitarian setting in the Far North region. The last third day focused on child age verification and benefited to 30 participants including seven police officers, 8 gendarmes, two staff from the Judiciary and 13 social workers.

HEALTH

• UNICEF in partnership with other UN agencies and NGOs supported the implementation of Local Immunization Days (LID) with Oral Polio Vaccine (OPV) from 25th to 27th September 2015. 45,779 refugee were vaccinated. Amongst them 11,490 under-five children.

• 309 children aged 6 months to 15 years were vaccinated against measles vaccine bringing the total since the beginning of the year to 4,353 children.

HIV/AIDS

• 4,987 pregnant women attended the first antenatal care (ANC1). Voluntary counselling and testing was offered to 4,024 (80.69 per cent) pregnant women. Among 76 women (1.89 per cent) who tested positive 62 (81.58 per cent) received ARVs to prevent mother to child transmission of HIV.

• 129 out of 1,400 children suffering from Severe Acute Malnutrition received at the CNA/CNTI were tested for HIV. Those who tested positive (four) have been referred to the approved treatment centres for treatment, care and support.

Funding

<table>
<thead>
<tr>
<th>UNICEF Cameroon 2015 HAC</th>
<th>Sector</th>
<th>Total 2015 Requirements</th>
<th>Funds available</th>
<th>Funding gap</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>$</td>
<td>%</td>
<td>$</td>
</tr>
<tr>
<td>Nutrition</td>
<td>10,500,000</td>
<td>2,901,263</td>
<td>7,598,737</td>
<td>72%</td>
</tr>
<tr>
<td>Health/HIV</td>
<td>7,000,000</td>
<td>1,510,544</td>
<td>5,489,456</td>
<td>78%</td>
</tr>
<tr>
<td>WASH</td>
<td>11,700,000</td>
<td>3,669,540</td>
<td>8,030,460</td>
<td>69%</td>
</tr>
<tr>
<td>Education</td>
<td>9,500,000</td>
<td>2,403,306</td>
<td>7,096,694</td>
<td>75%</td>
</tr>
<tr>
<td>Child Protection</td>
<td>1,500,000</td>
<td>1,477,875</td>
<td>22,125</td>
<td>1%</td>
</tr>
<tr>
<td>Total</td>
<td>40,200,000</td>
<td>11,962,528</td>
<td>28,237,472</td>
<td>70%</td>
</tr>
</tbody>
</table>

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## ANNEX A: SUMMARY OF PROGRAMME RESULTS

<table>
<thead>
<tr>
<th>Sector Response</th>
<th>UNICEF</th>
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</thead>
<tbody>
<tr>
<td><strong>SAHEL NUTRITION CRISIS</strong></td>
<td><strong>SAHEL NUTRITION CRISIS</strong></td>
</tr>
<tr>
<td>Number of children &lt;5 with Severe Acute Malnutrition admitted to Therapeutic care</td>
<td>58,000</td>
</tr>
<tr>
<td>Number of affected children (SAM) who received a wash kits with key hygiene messages</td>
<td>58,000</td>
</tr>
<tr>
<td>Number of people who have access to appropriate basic sanitation facilities (latrines)</td>
<td>150,000</td>
</tr>
<tr>
<td>Number of children under one immunized against measles</td>
<td>259,382</td>
</tr>
<tr>
<td><strong>CAR REFUGEE RESPONSE</strong></td>
<td><strong>CAR REFUGEE RESPONSE</strong></td>
</tr>
<tr>
<td>Number of children &lt;5 (in refugee sites) with Severe Acute Malnutrition admitted to Therapeutic care</td>
<td>11,000</td>
</tr>
<tr>
<td>Number of affected families who received a wash kits with key hygiene messages outside refugee site</td>
<td>40,000</td>
</tr>
<tr>
<td>Number of people who have access to potable water</td>
<td>150,000</td>
</tr>
<tr>
<td>Number of people who have access to appropriate basic sanitation facilities (latrines)</td>
<td>150,000</td>
</tr>
<tr>
<td>Number of children 6 months -15 years immunized against measles in Adamawa and East regions</td>
<td>99,000</td>
</tr>
<tr>
<td>Number of children accessing psycho-social support</td>
<td>18,500</td>
</tr>
<tr>
<td>Number of household who received at least two LLINs in Adamawa and East region</td>
<td>48,400</td>
</tr>
<tr>
<td>Number of children with access to temporary learning spaces</td>
<td>21,846</td>
</tr>
<tr>
<td>Number of children benefitting from teaching and learning supplies</td>
<td>81,911</td>
</tr>
<tr>
<td><strong>NIGERIA REFUGEE AND IDPs RESPONSE</strong></td>
<td><strong>NIGERIA REFUGEE AND IDPs RESPONSE</strong></td>
</tr>
<tr>
<td>Number of children &lt;5 (in refugee sites) with SAM admitted to care</td>
<td>842</td>
</tr>
<tr>
<td>Number of children benefitting from teaching and learning supplies</td>
<td>101,492</td>
</tr>
<tr>
<td>Number of children accessing psycho-social support</td>
<td>20,000</td>
</tr>
</tbody>
</table>