Humanitarian Action for Children

In Cameroon, 3.9 million people (including 2.1 million children, 969,000 women and 587,000 people with disabilities) urgently require humanitarian assistance. Their needs are created by armed conflict, intercommunal violence, the influx of refugees from neighbouring countries, disease outbreaks including cholera and measles and seasonal flooding. Increased security incidents and violence hamper humanitarian access and the ability to reach affected populations with life-saving interventions.

UNICEF will tackle new and protracted humanitarian needs by investing in emergency preparedness, scaling up its field presence and strengthening localization and accountability to affected populations. UNICEF’s programme will strengthen the integration of gender equality, the prevention of sexual exploitation and abuse and prevention and response to gender-based violence in emergencies. UNICEF and partners will apply a targeted, multisectoral approach across interventions.

UNICEF requires US$64 million to provide life-saving humanitarian assistance within a context characterized by significant access challenges and a volatile security situation. Child protection, water, sanitation and hygiene (WASH) and nutrition sectors have the greatest funding needs.

KEY PLANNED TARGETS

64,400 children with severe wasting admitted for treatment

190,400 children vaccinated against measles

341,000 children/caregivers accessing community-based mental health and psychosocial support

478,800 children accessing formal or non-formal education, including early learning

IN NEED

3.9 million people

2.1 million children

TO BE REACHED

870,300 people

669,200 children

FUNDING REQUIREMENTS

US$ 64 million
HUMANITARIAN SITUATION AND NEEDS

Cameroon is facing concurrent, complex and protracted crises, 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 measles and cholera. As of 29 September 2022, eight regions had been affected by cholera, with a total of 12,373 cases and 249 deaths. In 2022, 3.9 million people need humanitarian assistance, of whom 2.1 million are children and 53 per cent are women/girls. More than 2 million people are in extreme need. A total of 975,786 people are internally displaced and more than 1 million people are either refugees or returnees. Cameroon is currently ranked 141 out of 162 countries on gender equality. 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 multidimensional poverty that challenges the long-term recovery of affected people.

In the first three quarters of 2022, 1,294 security incidents were recorded in North-West and South-West Regions, including but not limited to protection and grave violations against children. These security incidents include confrontations between parties to the conflict or either party targeting civilians or such civilian facilities as schools and hospitals. Some of these incidents amounted to grave violations against children, which are reported by the United Nations in accordance with the established mechanisms.

Nearly 40 attacks on education occurred from January to September 2022. These included the abduction of 65 teachers/students, the burning of eight schools and the killing of five teachers.

The Lake Chad Basin conflict continues to create considerable humanitarian needs in Cameroon’s Far North Region. Humanitarian access is hampered by the use and presence of improvised explosive devices and unexploded ordnance, combined with physical constraints such as poor road infrastructure and seasonal flooding. As of September 2022, 37,000 people were affected by floods in Far North Region and 2,400 houses were destroyed. This flooding has also led to the destruction of 88 schools, disrupting the education of more than 26,615 children.

High levels of malnutrition endure among refugee populations. The global acute malnutrition rate as of February 2021 was 12.5 per cent in some refugee sites. Adamawa, East and North Regions host more than 329,500 refugees from the Central African Republic. Littoral, West and Centre Regions host increasing numbers of internally displaced people affected by armed conflict in North-West and South-West Regions, with the displaced population in Littoral and West Regions growing from 166,225 people in 2021 to 194,065 in 2022.

STORY FROM THE FIELD

The resurgence of cholera has killed 241 people since October 2021 in Cameroon. A report made by the Ministry of Public Health says that 12,129 cases have been identified. Littoral Region is one of the most affected by this epidemic, with 5,180 cases and 128 deaths. Health authorities and workers are mobilizing to stop the spread.

UNICEF has been working with the Ministry and other partners to fight this cholera outbreak, while promoting better access to water and sanitation for communities. Support including the supply of chlorine, soap, handwashing kits, image boxes is provided to social workers for awareness raising.

Read more about this story here
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 North-West, South-West 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 chronic humanitarian needs. It is designed to be agile, risk-informed, and responsive. Through recovery and development assistance, where possible, systems are being strengthened and protracted humanitarian needs met.

UNICEF is now the lead of the Localization Working Group in Cameroon and is committed to pursuing a strong localization24 strategy, in partnership with Government, United Nations agencies, non-governmental organizations and people in need of humanitarian assistance. This is critical to navigating complex community dynamics and delivering humanitarian assistance.

To ensure a gender-sensitive response, UNICEF is working to strengthen partners’ capacities in gender-sensitive analysis, the prevention of gender-based violence and the prevention of sexual exploitation and abuse. UNICEF is a member of the Accountability to Affected Populations Working Group, led by the United Nations Office for the Coordination of Humanitarian Affairs. Accountability to affected populations will be assured through improved reporting mechanisms and systematic third-party monitoring in hard-to-reach areas.

UNICEF will provide access to quality treatment for children suffering from severe wasting. To reduce malnutrition in the long-term, UNICEF’s response aims to increase the proportion of infants aged 0-5 months who are exclusively breastfed to 46 per cent and the proportion of children aged 6-23 months who are receiving the minimum dietary diversity to 25 per cent (by 2025). To achieve this and to reduce the need for emergency treatment in the long term, UNICEF will apply a multisectoral approach using the health, food and social protection platforms.

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 the Office of the United Nations High Commissioner for Refugees 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](https://www.unicef.org/appeals/cameroon/situation-reports)

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**2023 PROGRAMME TARGETS**

**Nutrition**
- 64,400 children 6-59 months with severe wasting admitted for treatment26
- 50,000 children 6-59 months screened for wasting27
- 90,000 primary caregivers of children 0-23 months receiving infant and young child feeding counselling
- 165,400 children 6-59 months receiving micronutrient powder28
- 157,000 pregnant women receiving preventative iron supplementation29

**Health and HIV/AIDS**
- 190,400 children vaccinated against measles31
- 130,000 children and women accessing primary healthcare in UNICEF-supported facilities32,33
- 91,300 adolescent girls and boys tested for HIV and received the result of the last test
- 89,600 households assisted with long lasting treated bed nets in humanitarian context
- 8,700 pregnant women tested for HIV and AIDS

**Child protection, GBVIE and PSEA**
- 341,000 children, adolescents and caregivers accessing community-based mental health and psychosocial support34
- 307,300 women, girls and boys accessing gender-based violence risk mitigation, prevention and/or response interventions35
- 731,000 people with safe and accessible channels to report sexual exploitation and abuse by personnel who provide assistance to affected populations
- 8,500 unaccompanied and separated children provided with alternative care and/or reunified36

**Education**
- 478,800 children accessing formal or non-formal education, including early learning37
- 321,300 children receiving individual learning materials38
- 315,000 children accessing mental health and psychosocial support in schools39

**Water, sanitation and hygiene**
- 110,000 people accessing a sufficient quantity and quality of water for drinking and domestic needs41
- 125,000 people accessing appropriate sanitation services
- 600,000 people reached with hand-washing behaviour-change programmes
- 245,000 people reached with critical WASH supplies

**Social protection**
- 1,100 households benefiting from new or additional social assistance (cash/in kind) measures from governments with UNICEF-technical assistance support43
- 2,000 households reached with UNICEF-funded humanitarian cash transfers through an existing government system
- 800 households reached with cash transfers through an existing government system where UNICEF provided technical assistance and humanitarian cash transfers

**Cross-sectoral (HCT, SBC, RCCE and AAP)**
- 696,000 people sharing their concerns and asking questions through established feedback mechanisms
- 640,000 people who participate in engagement actions for social and behavior change44
In 2023, UNICEF is requesting US$64 million to provide life-saving interventions for children and women affected by crises. This funding is critical to mitigate and respond to the impact of new and protracted conflicts, disease outbreaks and flooding exacerbated by climate change.

Child protection, WASH and nutrition will remain UNICEF’s priorities in 2023. In 2022, severe underfunding of these sectors has been a significant challenge for the protection-driven emergency response in Cameroon. Funding received through this appeal will help UNICEF carry out WASH activities, meeting the needs of internally displaced people and host communities, including through partnerships with local non-governmental organizations. Programming will reduce the risk of conflict over natural resources and promote social cohesion. Through nutrition interventions, UNICEF aims to reach children at risk of severe wasting with screening and treatment, keeping the number of malnourished children below emergency threshold levels. Social protection, through humanitarian cash transfers, will support sector-specific needs.

Without sufficient and timely funding, UNICEF will be unable to support the national response to continuing crises. This could result in 699,200 children being denied access to essential services (including 64,400 children with severe wasting, 95,205 children in need of vaccination against measles and 478,800 children in need of education).

### FUNDING REQUIREMENTS IN 2023

<table>
<thead>
<tr>
<th>Sector</th>
<th>2023 requirements (US$)</th>
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<tbody>
<tr>
<td>Nutrition</td>
<td>11,159,200</td>
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<tr>
<td>Health and HIV/AIDS</td>
<td>5,024,800</td>
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<tr>
<td>Child protection, GBViE and PSEA</td>
<td>16,951,500</td>
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<tr>
<td>Education</td>
<td>8,581,600</td>
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<tr>
<td>Water, sanitation and hygiene</td>
<td>11,606,000</td>
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<tr>
<td>Social protection</td>
<td>4,361,700</td>
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<tr>
<td>Cross-sectoral (HCT, SBC, RCCE and AAP)</td>
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<tr>
<td>Cluster coordination</td>
<td>1,144,800</td>
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<tr>
<td>Emergency Preparedness</td>
<td>1,717,200</td>
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<tr>
<td>Total</td>
<td>63,981,200</td>
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</tbody>
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*This includes costs from other sectors/interventions: Social protection (6.8%), Cross-sectoral (HCT, SBC, RCCE and AAP) (5.4%), Emergency Preparedness (2.7%), Cluster coordination (1.9%).
UNICEF, with the Government and the World Bank, will support the Government's social safety net project. Of 83,000 households assisted in that project, UNICEF will support 1,100 households in a programme designed and implemented with partners who have existing cash transfer activities, where UNICEF will provide multipurpose child grant top-ups for a period of 3-6 months.

Building on the Government's social safety net project, providing a top-up child grant to be planned for a period of 3-6 months for 800 households. Additionally, humanitarian cash transfer will assist 2,000 separated children who have lost their parents/caregivers as a result of the conflict, and for whom alternative/foster care arrangements are needed.

Social protection will be used to support reaching sector-specific targets.


The people in need figure is from the 2022 Humanitarian Needs Overview and the 2022 Humanitarian Response Plan.

The children in need figure the 2022 Humanitarian Needs Overview and the 2022 Humanitarian Response Plan (57 per cent of people in need). Fifty-two per cent of children in need are girls.

ENDNOTES.


The funding for child protection includes funding for programming on gender-based violence and prevention of sexual exploitation and abuse.

This indicator represents targets for nutrition, WASH, education and child protection.

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ENDNOTES.