In Cameroon, 4.7 million people (including 2.5 million children, 2.4 million women and 587,000 people with disabilities) urgently require humanitarian assistance. Their needs are created by armed conflict, inter-communal violence, the influx of refugees from neighboring 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$66.7 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, and nutrition sectors have the greatest funding needs.

**HIGHLIGHTS**

- **KEY PLANNED TARGETS**
  - **111,817** 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
  - **556,304** children accessing formal or non-formal education, including early learning

**FUNDING REQUIREMENTS**

- **US$66.7 million**
- **2019**
- **2023**
HUMANITARIAN SITUATION AND NEEDS

Cameroon faces multi-faceted humanitarian challenges including Lake Chad Basin conflict, ongoing strife in the North-West and South-West regions, the Central African Republic refugee crisis, and natural hazards notably floods, cholera and Mpox outbreaks. These crises affect about 4.7 million people and 2.5 million children in 2023, with 51 per cent being women/girls. Over two million people are on the move with an alarming 3.2 million people expected to face acute food insecurity, a situation exacerbated by the impacts of global economic downturns, floods, and the Russian-Ukrainian conflict. Gender-based discrimination against girls/women is aggravated in regions with crises.

In the North-West and South-West regions, over 630,000 individuals are displaced and 86,000 have been forced to seek refuge in Nigeria. In June 2023, Mezam division witnessed clashes between SSFs and Non-State Armed Groups (NSAGs), resulting in over 26 deaths and 1,000 people displaced. Despite the efforts of humanitarian workers, needs frequently outstrip available resources and access.

In the Far North region, the LCB conflict coupled with flood, food insecurity, armed conflict and episodic violence continue to result in an uptick in humanitarian needs, a 33 per cent increase compared to 2022 with the Mayo-Sava, Mayo-Tsanaga, and Logone et Chari divisions being most affected. Over 10,000 people were displaced by May 2023.

Cholera and Mpox epidemics have emerged as significant health threats, especially in the Far North, North-West and South-West, West, and Littoral regions. Lack of access to clean water, sanitation and health services is the leading cause of cholera and other diseases in Cameroon. As of 30 June 2023, there have been 19,251 notified cases of cholera resulting in 457 deaths. Also, there were 33 suspected cases of Mpox in the health districts of Mbonge and Kumba with an average national fatality rate of 3.2. Measles is present in all 10 regions. As of June 2023, 99 health districts are in active epidemic with 337 positive cases by Immuno-globin plus (IgM+), 3,497 cases with an epidemiological link, 18 deaths and a fatality rate of 0.46 per cent. These outbreaks underscore the need for increased medical assistance and preventive measures. Approximately 18 per cent of health facilities closed; mobile clinics have attempted to bridge the gap, offering essential health services to remote areas and hard-to-reach communities, yet they remain under-resourced with challenges including attacks on personnel and infrastructure.

Humanitarian actors strive to meet the diverse and growing needs of affected populations despite challenges in accessing certain regions due to security concerns, poor infrastructure, and bureaucratic hurdles.

STORY FROM THE FIELD

“That day, it was raining heavily. I was in the kitchen. Suddenly, I heard screams and voices calling me from outside. It was because of my child. I thought he was in his bedroom; he had gone out without my knowledge. He surely wanted to retrieve his toy that was being carried by the waters of the rain and the torrent. Only his lifeless body was found further in the mud,” the sadness that flashes across the face of happiness is indescribable.

Read more about this story here

UNICEF and its partners are working to respond and preserve the lives of the flood-affected population of the South-West region by covering their basic needs through emergency humanitarian 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 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 is now the lead of the Localization Working Group in Cameroon and is committed to pursuing a strong localization strategy, in partnership with the 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

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**HUMANITARIAN STRATEGY**

**2023 PROGRAMME TARGETS**

### Nutrition
- 111,817 children 6-59 months with severe wasting admitted for treatment
- 75,000 children 6-59 months screened for wasting
- 140,000 primary caregivers of children 0-23 months receiving infant and young child feeding counselling
- 165,400 children 6-59 months receiving micronutrient powder
- 157,000 pregnant women receiving preventative iron supplementation

### Health and HIV/AIDS
- 190,400 children vaccinated against measles
- 130,000 children and women accessing primary healthcare in UNICEF-supported facilities
- 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 support
- 307,300 women, girls and boys accessing gender-based violence risk mitigation, prevention and/or response interventions
- 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 reunified

### Education
- 556,304 children accessing formal or non-formal education, including early learning
- 321,300 children receiving individual learning materials
- 165,821 children accessing mental health and psychosocial support in schools

### Water, sanitation and hygiene
- 140,000 people accessing a sufficient quantity and quality of water for drinking and domestic needs
- 112,000 people accessing appropriate sanitation services
- 350,000 people reached with hand-washing behaviour-change programmes
- 195,000 people reached with critical WASH supplies

### Social protection
- 1,100 households benefitting from new or additional social assistance (cash/in kind) measures from governments with UNICEF-technical assistance support
- 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)
- 160,000 people sharing their concerns and asking questions through established feedback mechanisms
- 640,000 people who participate in engagement actions for social and behavior change

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This appeal is aligned with the revised Core Commitments for Children in Humanitarian Action, which are based on global standards and norms for humanitarian action.

Programme targets are revised in alignment to inter-agency planning documents for 2023 and sector needs assessments for 2023.
FUNDING REQUIREMENTS IN 2023

In 2023, UNICEF increased its appeal to US$66.7 million to be fully aligned with the Humanitarian Response Plan to provide life-saving interventions. 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 remain UNICEF’s priorities in 2023. In 2022, severe underfunding of these sectors was a significant challenge for the protection-driven emergency response. Funding received through this appeal will help UNICEF carry out WASH activities, meeting the needs of internally displaced people and host communities, 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 resulting in 746,715 children being denied access to essential services (that is 190,400 children in need of vaccination against measles, 111,817 children with severe wasting and 556,304 children in need of education).

<table>
<thead>
<tr>
<th>Appeal sector</th>
<th>Revised 2023 HAC requirement (US$)</th>
<th>Original 2023 HAC requirement (US$)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nutrition</td>
<td>13,618,523</td>
<td>11,159,200</td>
</tr>
<tr>
<td>Health and HIV/AIDS</td>
<td>5,024,800</td>
<td>5,024,800</td>
</tr>
<tr>
<td>Child protection</td>
<td>16,870,142</td>
<td>16,951,500</td>
</tr>
<tr>
<td>Education</td>
<td>8,153,829</td>
<td>8,581,600</td>
</tr>
<tr>
<td>WASH</td>
<td>12,402,189</td>
<td>11,606,000</td>
</tr>
<tr>
<td>Social protection</td>
<td>4,361,700</td>
<td>4,361,700</td>
</tr>
<tr>
<td>Cross-sectoral</td>
<td>3,434,400</td>
<td>3,434,400</td>
</tr>
<tr>
<td>Cluster coordination</td>
<td>1,144,800</td>
<td>1,144,800</td>
</tr>
<tr>
<td>Emergency Preparedness</td>
<td>1,717,200</td>
<td>1,717,200</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>66,727,583</strong></td>
<td><strong>63,981,200</strong></td>
</tr>
</tbody>
</table>

*This includes costs from other sectors/interventions: Social protection (6.5%), Cross-sectoral (5.1%), Emergency Preparedness (2.5%), Cluster coordination (1.7%).

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jkunugi@unicef.org
1. There is an increase of about four per cent in the funding requirement due to the nine per cent increase in children to be reached with humanitarian assistance and 12 per cent increase in the number of people to be reached.

2. The people in need figure is from the 2023 Humanitarian Needs Overview and the 2023 Humanitarian Response Plan. The increase is mostly due to an important increase in the number of people facing acute food insecurity, as well as to the availability of data on the vulnerabilities of the non-displaced people who are not hosting any displaced people. The war in Ukraine, unprecedented flooding, considerable erosion and a 35 per cent increase in food insecurity (HNO/HRP 2023) drive these needs.

3. The Cadre Harmonisé analysis of October 2022 estimates that 3.2 million persons will be food insecure (phase 3 to 5) from June to August 2023.


5. This figure is calculated based on the following programme targets: children to be reached (746,715) plus pregnant women reached with folic acid (157,000) plus 23 per cent of adult men (percentage of men targeted in the 2023 Humanitarian Response Plan) reached with critical WASH supplies (44,850). The total includes 51 per cent per women/girls and 15 per cent per people with disabilities (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.

6. This figure is calculated based on the following programme targets: the number of school-aged children to be reached through formal/informal education (556,304), and children aged 6-59 months reached with measles vaccination (190,411). This total includes 51 per cent girls and 15 per cent children with disabilities.


8. Ibid


11. Ibid

12. CAMEROUN RAPPORT DE SITUATION DE LA GESTION DU CHOLERA; Période du 13/06/2023 au 30/06/2023


14. Cameroun: Rapport de la situation Rougeole; N°du 12 au 18 Juin 2023

15. Ibid.


18. SMART/SENS survey December 2022.

19. Aligned to the 2023 Humanitarian Response Plan for Cameroon. There is an increase in the number of people in need in 2023 as a result of the low vaccination coverage for cholera, measles, and yellow fever due to the reluctance to vaccinate against COVID-19 in 2022. The outbreak of the cholera epidemic in the North-West, South-West, Littoral, and West regions contributed to the increase, and a significant reduction of services provided by qualified health personnel, difficult access to essential healthcare

20. Aligned to the 2023 Humanitarian Response Plan for Cameroon. The figure for people in need is only for the Child Protection Area of Responsibility. The increase in the number of children in need is due to unprecedented flooding witnessed between August and November 2022.


22. Aligned to the 2023 Humanitarian Response Plan for Cameroon. Needs continue to increase following displacement of populations due to floods, the socio-political crisis, inter-community conflicts, poverty, and cholera outbreaks.

23. This appeal is aligned with the revised Core Commitments for Children in Humanitarian Action, which are based on global standards and norms for humanitarian action.

24. UNICEF is committed to supporting the leadership and coordination of humanitarian response through its leadership or co-leadership of cluster coordination for the WASH, Nutrition and Education Clusters and the Child Protection Area of Responsibility. All cluster coordinators cost are included in sectoral programme budgets.


26. The caseload of children with severe wasting admitted for treatment was revised after results from 2022 SMART/SENS survey. Calculation of the caseload takes into account the prevalence of malnutrition and the prevalence in 2022 survey was higher than that observed in 2021. UNICEF covers 100 per cent of the sector target, noting that UNICEF’s target include refugees.

27. Target was revised in line with the increase in caseload from SMART survey 2022. This figure is for North-West and South-West Regions only.

28. Target was revised in line with the increase in caseload from SMART survey 2022.

29. Among children assisted by UNICEF, 51 per cent are girls and 15,000 are refugees.

30. The regions concerned include Far North, North, Adamawa and East Regions.

31. Figures revised according to 2023 Humanitarian response Plan figures.

32. Among the children assisted by UNICEF, 51 per cent are girls.

33. There is a drop in the target based on the current level of implementation (based on the experience in 2022 and at the end of 2021). Due to a huge drop in financial resources mobilized for the three crises, key targets were not met.

34. This is the global aggregate for the provision of integrated health package in facilities and the community package for routine vaccination (Penta 3) for children aged 0-12 months; infectious respiratory diseases and acute diarrhoea treatments for children under the age of 5 years; and newborn kits for mothers/caregivers.

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 and psychosocial support. Among those assisted, 51 per cent are women/girls.

36. This target includes 176,000 women/boys accessing gender-based violence services through UNICEF’s child protection programme and 131,280 women/girls/boys reached with gender-based violence risk mitigation. UNICEF covers 44 per cent of the sector target, which covers 55 per cent of total people in need of access to gender-based violence services. Among those assisted by UNICEF, 88 per cent are women/girls.

37. For North-West and South-West Regions, there are many voluntary separations where parents/caregivers have sent children to major cities and towns in the two regions as well as to the neighbouring regions of West and Littoral. Since these are voluntary separations in search of education opportunities, the typical family tracing and reunification response does not apply. However, there are also unaccompanied and separated children who have lost their parents/caregivers as a result of the conflict, and for whom alternative/foster care arrangements are needed.

38. UNICEF covers 80 per cent of the sector target. Increase in target from 478,800 to 556,304 due to the consideration of the growth rate of the country and schools that were non-functional in 2022. Among children assisted, 51 per cent are girls. UNICEF as lead sector is accountable for the targets that are not covered by other partners. An increase therefore from 321,300 to 556,304 as lead after partners have covered their targets.

39. Among children assisted, 51 per cent are girls. UNICEF as lead sector is accountable for the targets that are not covered by other partners. An increase therefore from 321,300 to 556,304 as lead after partners have covered their targets.

40. There is a drop in the target based on the current level of implementation (based on the experience in 2022 and at the end of 2021). Due to a huge drop in financial resources mobilized for the three crises, key targets were not met.

41. There is a drop in the target based on the current level of implementation (based on the experience in 2022 and at the end of 2021). Due to a huge drop in financial resources mobilized for the three crises, key targets were not met.

42. About 50 per cent are children, and 51 per cent of the children are girls. An increase in targets after MSNA 2022.

43. Figured reviewed after MSNA of September 2022.

44. The drop from 600,000 to 360,000 is based on the MSNA of September 2022.

45. The decrease from 245,000 to 195,000 is based on the MSNA September 2022.

46. UNICEF will support social and cash transfer interventions by providing technical support for a total of 1,100 households in crisis-affected areas such as Far North, West and Littoral Regions. UNICEF will also build 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 households in a project to be 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.

47. UNICEF will support financial assistance mechanisms for education and social protection for 800 vulnerable households in six municipalities of Far North, West and Littoral Regions (2,400 children will be indirect beneficiaries). 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 (each to receive CFAF90,000). Target households are in Yaounde and Douala (3,300 children will be indirect beneficiaries).

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

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

50. Six per cent of this child protection amount is for gender-based violence programming and another six per cent for programming on prevention of sexual exploitation and abuse.