



A teacher of the Mbouroum public primary school in the border with Chad, teaching his class 3 pupils in the Far North region, Cameroon © UNICEF/ Eric Guglielmi 2014

# CAMEROON

## Humanitarian Situation Report



### SITUATION IN NUMBERS

December 5, 2014

**241,096**

TOTAL CAR REFUGEES  
(UNHCR, 28 November 2014)

**134,611**

NEW CAR REFUGEES SINCE DEC 2013  
(UNHCR, 28 November 2014)

**24,182**

NIGERIAN REFUGEES  
(UNICEF, 5 December 2014)

**55,198**

CHILDREN UNDER 5 WITH SEVERE ACUTE  
MALNUTRITION

**9**

CASES OF POLIO

**3,188 / 178**

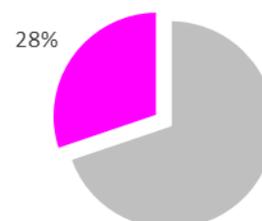
CASES / DEATHS FROM CHOLERA

UNICEF Funding Requirements 2014

**US\$ 23 million**

Funding Received in 2014

**US\$ 7.2 million**



■ Funding Gap ■ Funding Received

## Highlights

UNICEF continues to be engaged in providing humanitarian response in four regions of Cameroon – in the Far North, North, Adamawa and East.

**NIGERIAN REFUGEES** – The number of targeted kidnappings and armed attacks by Boko Haram has reduced since October. Among the 24,182 Nigerian refugees who arrived in Northern Cameroon this year, an estimated 18,667 are in Minawao refugee camp.

**CAR REFUGEES:** Among the 241,096 refugees officially registered 134,611 new refugees have come in since December 2013. 62,284 people are currently in 8 refugee sites in East and Adamawa regions. 41,666 children under 17 years of age residing in camps are being supported through nutrition, health (polio, HIV, measles, malaria), WASH, education and protection interventions.

**SAHEL NUTRITION RESPONSE:** 43,424 children with SAM have been admitted for therapeutic care to date through UNICEF and partners. Preliminary results of the 2014 nationwide survey using SMART methods indicate that Far North, North and Adamawa have a global acute malnutrition prevalence (GAM) of 9.0%, 6.7% and 5.2% respectively. The Far North region has a prevalence of severe acute malnutrition (SAM) at the emergency threshold of 2.0%.

**POLIO RESURGENCE:** 10 rounds of mass polio immunization have been implemented in 2014. The latest data from the last round (October 30th to November 2<sup>nd</sup>) show a total coverage of 1,127,918 children under 10 years in East and Adamawa including 239,132 refugees.

**CHOLERA AND EBOLA RESPONSE:** C4D pools of 3 social mobilizers each have been established in East and Adamawa region in and outside of the refugee camps, which has helped prevent cholera spreading in camps. Support to the Government in planning and responding to these health emergencies continues.

## UNICEF's Response to CAR crisis with partners

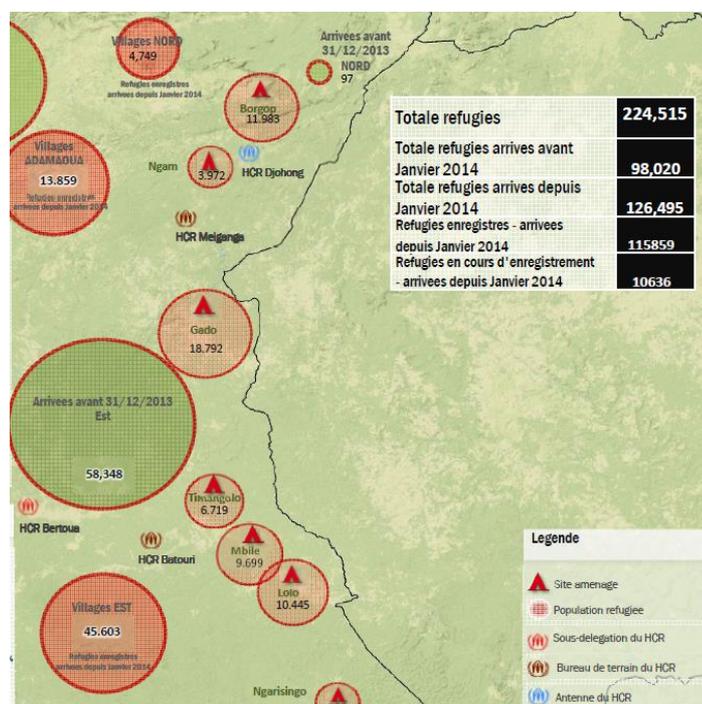
	UNICEF		Sector/Cluster	
	UNICEF Target	Cumulative results (#)	Cluster Target	Cumulative results (#)
Number of CAR refugees in sites who have access to potable water	30,000	10,000	80,000	40,000
Number of children 9 months -15 years immunized against measles in Adamawa and East regions	84,000	113,054	84,000	113,054
Number of CAR refugee children <5 with SAM admitted to care	7,855	6,327	7,855	6,327
Number of children accessing psycho-social support	16,000	9,364	30,000	9,364

## Situation Overview & Humanitarian Needs

**CAR Refugee Crisis:** As of the 28<sup>th</sup> of November, 2014 241,096 CAR refugees have been registered by UNHCR from CAR in Cameroon. Among them, 134,611 new refugees have come in since the outbreak of violence in CAR in December 2013, of which 62,284 are currently in 8 refugee sites in East and Adamawa regions while others are living outside of sites. 67% of these i.e. 41,666 are children under 17 years of. The refugee sites established are Ngari-Singo, Lolo, Gado, Gado II, Mbile and Timangolo in the East Region, and Borgop and Ngam in the Adamawa Region. UNHCR reports now show a decrease in refugee influx (< 1,000 per month).

**Sahel Nutrition Crisis:** In 2014, out of an estimated 55,198 SAM burden and 132,434 MAM burden in children, the targeted caseload supported in the Far North, North, Adamawa and East regions is 48,778 children under-five for SAM and 92,794 children under-five for MAM.

**Nigerian Refugee Crisis:** Since April 2014 violence between Boko Haram and government forces in Nigeria bordering Northern Cameroon continues to affect communities in Cameroon. UN agencies have ensured access to health, nutrition, and water to avoid a deterioration of the humanitarian situation. Nearly 25,000 Nigerian refugees are in northern Cameroon, with 18,667 Nigerian refugees in Minawao refugee camp, which is located 130 km east of the Nigeria-Cameroon border. Many Nigerian refugees continue to refuse to be transferred to the camp, preferring to stay near the border in order to better monitor the situation in the northeast with the hopes of returning. In fact, some refugees keep on trickling in to the camps after residing in host communities.



Estimated Affected Population	
(Estimates calculated based on initial figures from UNICEF Humanitarian Action Update February 2014, Cameroon General Census revisions 2013)	
Start of humanitarian response:	
	Total
Total Affected Population	5,891,785
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)	55,198
Children Under Five with SAM and medical complications	4,878

## Humanitarian leadership and coordination

UN agencies in Cameroon (UNICEF, WHO, UNHCR, UNFPA, IOM, WFP) continue to coordinate activities to support the CAR refugees in East and Adamawa Regions. UNHCR is undertaking the role of coordinator on behalf of the UN system along with the Government of Cameroon and is responsible for compiling a weekly status report every Tuesday.

Coordination meetings continue at the operational level on a bi-weekly basis in Bertoua and Meiganga. UNICEF has activated Nutrition, Education and WASH working groups as a lead. UNICEF has also activated the Child Protection sub-group.

## Humanitarian Strategy

UNHCR has taken the lead role in responding to the CAR refugee crisis with UNICEF and other UN agencies supporting specific interventions. Throughout the Sahel nutrition crisis, UNICEF has taken a lead role in mobilizing and involving key stakeholders in the response, specifically in Nutrition, WASH and Education. The technical lead role that UNICEF plays has helped to define critical interventions to be carried out, and to set up practical monitoring mechanisms for follow up and impact measurement. The humanitarian operation is now more adapted to the

urgency of the needs after several months of scale up. Partners are expanding their presence, mortality rates due to severe acute malnutrition are being managed, and WASH facilities in sites are increasingly available.

## Summary Analysis of Programme Response

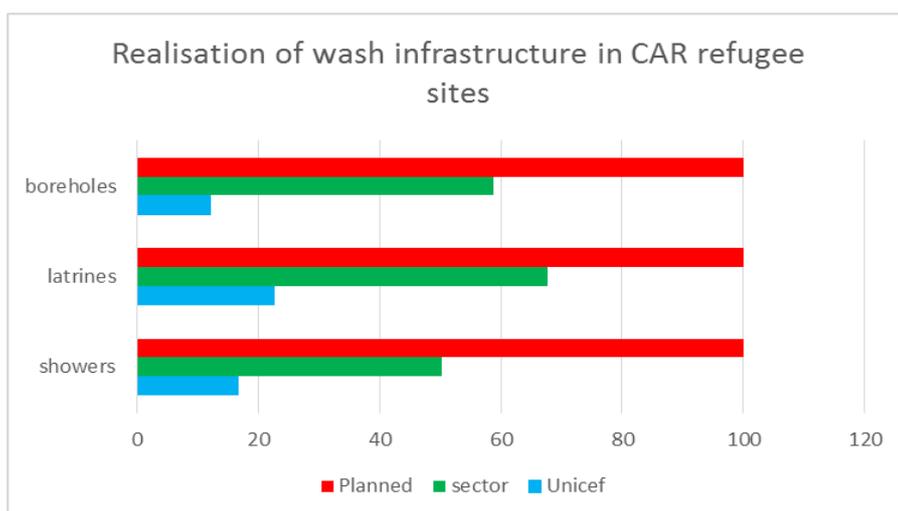
### RESPONSE FOR CAR REFUGEES

#### NUTRITION

- Admission data received from nutrition centres to date indicates that **6,327 children with SAM have received treatment in 4 operational inpatient facilities and 10 outpatient therapeutic programmes**. This represents 80% of the 7,855 estimated caseload for refugees in 2014. Performance of the nutrition program to CAR refugees still of concern, especially regarding defaulter rate, nutrition partners are working on alternative strategies at the community level and better operational coordination
- The results of the multi-sector survey conducted from August 30 to Sep 5, 2014 at Timangolo site showed a prevalence of 41.1% GAM and 15.7% of SAM.<sup>1</sup>
- UNICEF and the regional delegation of public health are now conducting a joint supervision of all the health facilities in 9 priority districts (Djohong, Garoua Boulai, Kette, Batouri, Ndelele, Yokadouma, Mouloundou, Betare Oya and Bertoua) to improve the quality of the management of acute malnutrition on the sites and out of the sites continues its daily technical supervision in Outpatient centres (OTPs) and Inpatient facilities (InFP) in sites, but also outside the sites where the main objective is to reinvigorate the functioning of OTPs in all the health centres located in the 9 priority health Districts. This strategy will help to target both the large number of refugees outside of sites and in the host communities.
- Since January RUTF, therapeutic milk, systematic treatments as well as InFP specific treatment are delivered by UNICEF through the regional delegation stock. A supply of therapeutic milk and therapeutic ready to use food (RUTF) was made to InFPs in Batouri, Kette, Betare Oya and Garoua Boulai in the East region, to the InFPs of Djohong for the Adamawa region, and the OTPs in Kette, Gado and Kentzou. Field delivery remains a constraint.
- Since March 2014 UNICEF has strengthened the capacity of 172 health personnel to partner OTPs and ITPs. 230 health personnel of the government have also been trained for the management of acute malnutrition.
- During the health and nutrition week an active screening of GAM with MUAC was integrated in six affected districts. 20,426 children have been screened and 202 SAM cases and 667 MAM cases referred to the nearest health centre.

#### WASH

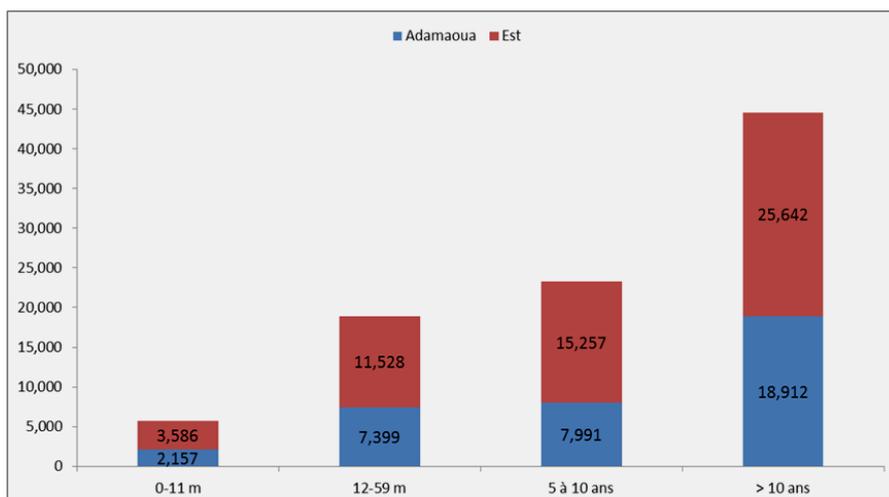
- The regions affected by the CAR refugee crisis has long been affected by low access to potable water (East: 54.4%, Adamawa: 69.8%) and basic sanitation (East: 21.9% and Adamawa: 64.2%).
- The current need to provide sufficient access to safe water and sanitation to the current population, estimated by UNHCR, is 131 boreholes, 3,524 latrines and 2,990 showers in refugee sites. A total of 800 out of 1,000 planned latrines, and 536 out of 650 planned showers have been constructed in 04 refugee sites (Mbile, Gado, Ngam and Borgop). UNICEF is providing water to an estimated 10,000 refugees through water trucking, water pumping and 16 boreholes already achieved.
- In addition, 10,699 families received a wash kit. This has benefited about 53,000 refugees.
- UNICEF provides WASH response in all refugee camps in the East (Gado, Mbile, Lolo, Garisingo, Timangolo) and Adamawa (Ngam and Borgop) refugee sites. UNICEF also provides the WASH response to the transit site and third country national sites on the border in Garoua Boulai (East region).



#### HEALTH

<sup>1</sup> Carried out with the joint support of the Central African Field Epidemiology and Laboratory Training Program (CAFELTP), the Regional Centre for the Prevention and Fight against the epidemics in the region of Eastern Cameroon (CERPLE E) and UNICEF

- **Immunization at entry points:** In the entry points of Garoua Boulai, Gbiti, Kentzou, Tocktoyo, 81 children under-five years are immunized against polio, and 174 children aged 6 months to 15 years were immunized against measles in the last month.
- **Polio Response:** Activities have intensified in the context of renewed efforts to stop the circulation of the wild Polio virus (WPV) following the discovery of two cases of WPV in a spontaneous refugee site in the health district of Kette in the Eastern Region. The number of children vaccinated in refugees' sites in September are as per the graph attached.
- The number of priority districts has reduced from 30 to 27 since June. 10 rounds of mass polio immunisation have been implemented in 2014, including 2 MCNHAW and 2 Local Immunisation days in East and Adamawa region. The latest data from October 30th to November 2nd round show that in both regions a total of 1,127,918 children under 10 received the Oral Polio Vaccine. Simultaneously, children aged 6-59 months received vitamin A and children aged 12 – 59 months old received deworming treatment.
- 1,841 social mobilizers in East region visited 190,730 households, sensitizing 414,747 persons about the importance of RI and Polio vaccine. 59 of the 78 refusal cases were successfully managed by ensuring their accepting the vaccine. 12 community radio stations aired messages on immunization.
- **Type A Meningitis prevention:** A mass preventive campaign against meningitis from Meningococcus type A was implemented by the Ministry of Health with the support of UNICEF from October 13 to 16 in the five districts with refugees in East region presenting higher risks with refugees. This led to the vaccination of 39,537 people (1-29 years), including 33,404 refugees.
- **Malaria:** The rapid monitoring in households shows that 90% of bed nets were hanging. In partnership with International Red Cross Federation and French Red cross, a follow up was done in terms of sensitization of the families on the use as well as the hanging of LLINs to 1526 households, leading to the delivery of 2500 LLINs for 2,029 under-five and 248 pregnant women in Gado and Timangolo camps in the East region.



## EDUCATION

- To date, for the 2014-2015 academic school year, 50% (9,269) out of 18,500 targeted refugee children hosted in refugee sites have been able to participate in education activities in *Espaces temporaires d'Apprentissage et de Protection de l'Enfance (ETAPes – Temporary Learning and Child Protection Spaces)* established in 5 refugee sites (Gado, Lolo, Mbile, Timangolo and Borgop) and in neighbouring host schools, including 572 new refugees who have been enrolled in Cameroonian public primary schools. These children and their teachers have benefited from learning and teaching materials (textbooks, slates, chalks, pens, pencils, etc.) provided by UNICEF and distributed by Plan Cameroon.
- 2,504 learning kits (textbooks, slates, chalks, pens, pencils, etc.) have also been provided to host community schools children in neighbouring host schools in the East and Adamawa regions.
- Forty-one inspectors from the Ministry of Basic Education received training in Education in Emergencies (Ngaoundere 18-21 November 2014).
- To date, 68 qualified volunteer teachers and assistant teachers are teaching refugee children in the 68 functioning ETAPes. 47% (32) of these teachers have been trained (Bertoua, July 7 to 12) by MINEDUB, UNICEF (education and Child Protection), Plan Cameroon, UNESCO on accelerated programming, remedial classes, psychosocial support, promotion of peace through education, large group management and participatory child-centred methods. The 36 (53%) non-trained teachers will benefit from similar training by the end of 2014.
- **100% of 87 planned ETAPes** are now complete in 5 sites (Gado, Timangolo, Mbile, Lolo and Borgop). 68 (78%) of them are dedicated to education activities while the other 22% (19) host Child protection and ECD activities.
- 36 animators (16 for East Region and, 20 for the Adamawa Region) have been recruited and have received training on Education Awareness Raising, who have in total worked with an audience of 8,620 sensitized individuals.
- Additional funding is urgently needed in order to ensure the sustainability of the education sector response for the entire 2014-2015 academic school year, both in refugee sites as well as in host schools where the enrolment

of new refugees in some instances has doubled typical enrolment figures. Priority activities include the rehabilitation and construction of classroom and school facilities, construction of additional temporary learning spaces, as well as the provision of training to volunteer teachers and local authorities.

## PROTECTION

- 9,364 children are benefitting from structured play, child protection and mental health and Psycho-social support in 12 Child Friendly Spaces (that are run in the ETAPes established for Child Protection activities) in the Borgop, Lolo and Gado sites. 40 Central African animators, trained by UNICEF and partners on Child Protection, including identification of children at risk, referral, how to manage CFS activities and on sensitisation activities; are working in the child friendly spaces.
- 106 unaccompanied and separated children are being monitored and followed up with by social workers on a regular basis in the three sites. This work is supporting the reunification and registration process led by ICRC.
- 30 participants from governmental counterparts from East, Adamoua, Nord and Far North have been trained in Child Protection in Emergencies to build their capacities and to strengthen the collaboration on a regional level.
- More than 100 sensitization sessions and awareness meetings have been held for community members, leaders and parents on the implementation of Child Friendly Spaces and on violence against children.
- In Lolo and Gado, 5,221 families have received sensitization on risk of sexual violence, exploitation and prevention of violence by child protection committees and social workers. In addition, 51 sessions have been provided by the animators for more than 5,400 families to explain and promote participation in the Child Friendly Spaces (that are run in the ETAPes established for Child Protection activities). In Borgop, 631 people (471 women and 160 men) have received sensitization on themes such as early marriage and prevention of violence.
- IMC has started with psychosocial and sensitisation activities to families with children diagnosed with Severe Acute Malnutrition (SAM). A training took place for identified animators with specific focus on psychosocial support and children's development.
- 349 girls (between 13-20 years of age) are participating in activities in Girls clubs in Lolo and Gado. Activities include awareness raising and discussion on life skills, and activities such as cooking, sewing and other vocational skills. At the same time, 585 adolescent boys are participating in sports clubs in Gado and Lolo. The aim for these clubs are to form boys' teams and to work with the teams on other activities than sports including life skills discussions and life skills activities.
- In Borgop, girls clubs have been established in all four sectors of the camp, and in total 70 adolescent girls are participating. Activities include discussion on different protection concerns, such as early marriage and sexual harassment. Borgop Football (soccer) Cup is ongoing every Sunday with more than 50 boys participating and more than 100 people attending every week. During the weekly practice, about 100 boys are participating. The teams include both children from the site and from the host community
- Child Protection committees have been established in each camp and they have been conducting sensitization activities in the camps on violence prevention and informing communities on referral mechanisms.

## HIV/AIDS

UNICEF's response to HIV/AIDS is ensured by the Health services within the Bertoua, Garoua Boulai, Betare Oya, Batouri, Ngaoundere, Meiganga health districts under the coordination of the East Regional Delegation of Public Health for PMTCT and for Primary prevention, by the Ministry of Youth Affaires, Women's Empowerment and a Network of Youth Associations in the Region known as RODIS. Interventions are focused on strengthening the capacities of service providers to offer services to the refugees and host communities, provision of ARVs, Test kits, CD4 machines and community mobilization in favour of PMTCT. Adolescents and Youths carry out peer education, sensitization of their peers in and out of the camp and offer free HIV counselling and testing to their peers.

- Case Management- Out of the 21,626 pregnant women received at the antenatal clinic (ANC) in the refugee zones in the East and Adamawa Regions, 19,801 were tested for HIV. Among these women, 1,395 tested positive for HIV (7%), and among those who tested positive, 965 (70%) are now on ARVs to prevent mother to child transmission of HIV. The 30% of pregnant women tested HIV positive are still not receiving ARVs for PMTCT in part because some of the women who come from distant sites do not return after their first antenatal visit. Some progress was made to extend ARV coverage with the BETARE-OYA health districts which are offering ARVs for positive pregnant women.
- 232 HIV-exposed children born to HIV positive mothers have benefited from early infant diagnosis at six weeks post-partum by the end of September 2014.
- Out of 2,469 children suffering from Acute Severe Malnutrition received at the CNA/CNTI, only 424 were tested for HIV. 37 children who tested positive for HIV were referred to approved treatment centers for treatment, care and support, and as of now only 23 children are effectively receiving ARVs. The testing kits at times are shared between the pregnant women and the children which results in stock-outs and shortages, and fewer children

return for follow up, leading to many children missing their course of ARVs. Integration of HIV and malnutrition has just begun in the East and Adamawa regions with teams currently in the field to strengthen the capacities of services providers to increase the testing of mothers and children with severe acute malnutrition.

- **Training** - 705 service providers have been trained on PMTCT/PC, integration of HIV testing, treatment and care in CAN/CNTI and community health agents in favor of PMTCT/PC.
- 160 supervisor peer educators aged 10-24 and 24 Educative Team members in and out of the camps have been trained on peer education, HIV/STI prevention, risk and vulnerability mapping, behavior analysis and Life skills
- **Sensitization**- **22,500 adolescents and youths in and out of the camps have been sensitized on HIV/STI prevention** by the peer educators trained above. Among those sensitized 2,349 were tested for HIV and know their serological status. The 44 young people who tested positive (75% girls) were referred to the approved treatment centers for treatment, care and support. Until now 10 community radio programmes on HIV prevention are being broadcasted in Gado, Garoua Boulai, Adamawa and Batouri to reach refugees and surrounding communities with a focus on prevention messages and how to access services

## RESPONSE TO THE SAHEL NUTRITION CRISIS

- UNICEF support to the Sahel Nutrition response continues through its Maroua Field office in the North. Among the 48,778 SAM cases targeted, **43,424 children under 5 with severe acute malnutrition have been admitted in outpatient and inpatient centers**. As part of the 'WASH in NUT' response strategy **17,338 WASH Kits** have been distributed this year to families with SAM children.
- After completion of the training on revised national protocol, which targeted 829 health workers and 66 health districts, formative supervisions for follow-up have continued since June 2014. They are done at the regional level to supervise the health district, and at the health district level to supervise health center activities.
- The new database for data collection has been implemented since May 2014 and field training is continuing on an ongoing basis. Looking at performance rates, the main issue is still defaulting for OTPs (up to 30 %), with a common reasons given long distance, other interest for the caretakers, stock out at health centers level, workload of the health staff (immunization campaign, trainings). General supply distribution is ongoing in North and Far North including anthropometric materials replacement.
- Infant and young child feeding activities included the training of 174 community workers from health districts of Kar Hay, Guidiguis, Moulvoudaye, Moutourwa and Kousseri, the supervision of activities during the health and nutrition week for women and children, and the rehabilitation of the warehouse.
- Partial results from the ongoing nationwide nutrition survey using SMART methods indicate that the nutritional status of the surveyed regions vary from "acceptable" (GAM <5%) to "precarious" (5% ≤ GAM <10%) according to the WHO classification.<sup>2</sup> Global acute malnutrition rates in the regions of the Far North, North and Adamawa are 9.0%, 6.7% and 5.2% respectively. The Far North region has a prevalence of severe acute malnutrition (SAM) of 2.0%, which is the emergency threshold. In addition, the North and Adamawa have a high prevalence of severe acute malnutrition of 1.4% and 1.5% respectively.

**Tableau 1 : Prévalence de la malnutrition aiguë (Globale, Modérée et sévère) selon l'indice poids-pour-taille exprimé en z-score, chez les enfants de 6 à 59 mois par région.**

Enfant 6-59 mois		Malnutrition aiguë* (Poids/Taille) % [IC95%]						Œdèmes bilatéraux N(%)	
Region	N=	N=	MAG**	N=	MAM***	N=	MAS****		
Extrême Nord	445	40	9,0% (6,3-12,7)	31	7,0% (4,9-9,8)	9	2,0% (1,0-4,0)	3	0,7%
Nord	356	24	6,7% (4,3-10,5)	19	5,3% (3,3-8,5)	5	1,4% (0,6-3,2)	1	0,3%
Adamawa	329	17	5,2% (2,8-9,4)	12	3,6% (1,9-6,9)	5	1,5% (0,6-3,6)	4	1,2%
Est	329	10	3,0% (1,5-6,2)	10	3,0% (1,5-6,2)	0	0,0% (0,0-0,0)	0	0,0%

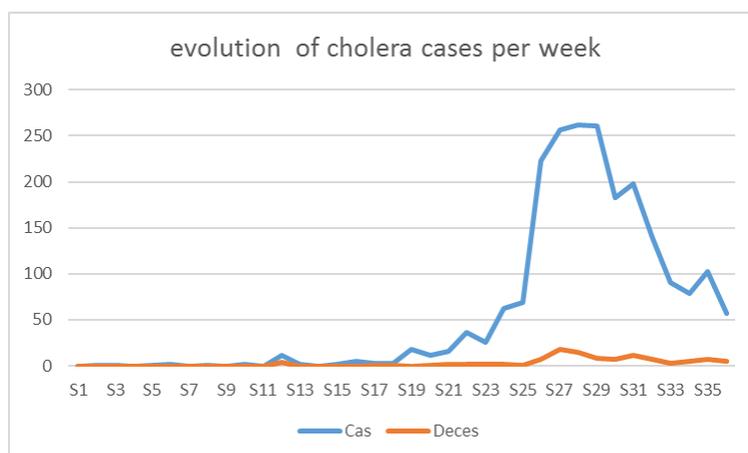
\*Prévalence de malnutrition ont été calculées en appliquant les flags SMART et avec la référence de croissance OMS, 2006

\*\*MA Globale (P/T<-2Zsc et/ou œdème) \*\*\*MA Modérée (-2Zsc<P/T≤-3Zsc) \*\*\*\*MA Sévère (P/T<-3Zsc et/ou œdème)

### Vitamin A and deworming campaign:

Weekly Health and Nutrition was organized in the ten regions from October 30 to November 2, 2014. In the northern region and the Far North 1,524,045 children aged 6-59 months received vitamin A 1,349,937 children aged 12-59 months were dewormed.

<sup>2</sup> Two exclusion zones have not been considered in this study: 9 districts with a large presence of refugees in the East Region, and districts along the border area between the Far East and Nigeria due to security constraints. This survey was conducted by the Ministry of Health with technical support from UNICEF and funded by ECHO.



## **CHOLERA RESPONSE**

- In 2014, 3,188 cases of cholera have been reported at the national level with 178 deaths. 98% of all cases and deaths have been reported in the North and Far North region.
- A total of 204 health staff and community animators in the health district affected by the CAR refugee crisis have been trained on cholera response and prevention.
- The “Sword and Shield” implementation strategy has been operationalized in 5 of the affected health districts of the Far North region (Mogode, Bourha, Hina, Mokolo and Mindif) and 3 of the affected districts in the North region (Touboro, Mayo Oulo and Guider). About 303 community (202 in far North and 101 in the North) relays are mobilized for cholera response. This includes community sensitization and affected household disinfection. This has significantly contributed to the reduction of number of case of cholera reported.
- In refugee camps, a total of 68 cholera cases and 6 deaths (54 cases with 5 deaths in Minawao, 1 case and 1 death in Timangolo and 13 cases in Gado) were registered. However, the combined efforts of UNICEF, WHO, UNHCR, Government and NGO partners were successful in stopping the epidemic in the refugee sites. No cases have been recorded since October 2 in the Minawao camp, nor since 4 November in the refugee sites in the East and Adamawa regions.

## **RESPONSE TO NIGERIAN REFUGEES**

### **NUTRITION**

- A mass screening and active case finding of severe acute malnutrition was carried out in Minawao Camp on 5th, 6th and 7th November which reported that 3.7% of screened children (n=94/2561) suffer from severe acute malnutrition and 7.9% (n=202/2561) suffer from moderate acute malnutrition. All new SAM and MAM screened children were referred to the Outpatient Treatment centre (OTP) of Gadala and are receiving treatment with therapeutic foods and drugs.
- OTP of Gadala: 55 new admissions (223 SAM received since January 2014, 24 children recovered (35%), 42 others were defaulter (61%)
- In-patient facilities (InPF) of Mokolo: 86 new admissions (327 SAM received since January 2014), 65 children recovered, 6 deaths (3 children by severe anaemia, 2 by dehydration and 1 septic shock)
- Two trainings were held: one training on the 4th November for 9 IMC staff on the screening and management of severe acute malnutrition, and a second training of 25 community workers from IEDA Relief on screening.

### **WASH**

- In response to the influx of refugees in Minawao camp since September 2014, 4 boreholes out of the 8 planned have been realized and put into service, bringing the number of boreholes realized by UNICEF for water provision to 6. The actual ratio of water provision is 11.7 litres /person/day.
- In terms of sanitation, 100 toilet blocks (one toilet and shower) of the 340 blocks of latrines and showers are completed and operational. The current ratio is 76 people per latrine, which falls below the SPHERE standard.
- 120 new litter bins have been placed in the camp for the management of solid waste, and a septic discharge on 20 digging waste pits is completed.
- To improve hygiene, 1300 kits (buckets, jerry cans, soap, aqua tabs), 500 child Potties and 7,200 pieces of soap of 250 g were made available to refugees in site in collaboration with UNHCR.

- 54 cases of cholera and 5 deaths were registered in the camp since July 2014. However, the combined efforts of UNICEF, WHO and the DRSP / EN have helped to stop the epidemic. No cases have been recorded since October 2 in Minawao.

## HEALTH

- 14,685 persons including 5,200 children ages 0-59 months were immunized against polio during National Immunization Days (NIDs) and Child Health Days (CHDs) in the camp.
- A measles campaign was undertaken in Minawao Camp, which resulted in the immunization of 5,840 children aged 6 months-15 years; 2,601 children aged 6-59 months received Vit A. Immunization continues as soon as new refugees arrive, and routine immunization is offered in the camp

## PROTECTION

- Implementation and equipment of 6 children friendly spaces among which 4 in Minawao, 1 in Gadala and 1 in Gawar. Psychosocial and recreational activities are being conducted through the two existing temporary child friendly spaces in Minawao while 4 more child friendly spaces are in process to be set up. 1,449 children are covered by the 2 CFS (of an overall target of 3,000) included children from host communities.
- 966 children refugees from the Minawao site are registered as follows: 262 children including 127 girls and 135 boys (children from 4 to 9 years), 231 children including 129 boys and 102 girls (children 10-13 years) 473 children which 197 girls and 276 boys (children from 14 to 18 years).
- 12 community workers and 15 child protection committee members are trained to provide recreational activities in child-friendly spaces and support social workers in the activities of psychosocial support.
- Children with special needs are followed including 8 former Children Associated with Armed Forces and Armed Groups (CAAFAG), 37 unaccompanied children, and 13 girls at risk of early marriage. 7 early marriages were postponed and 4 former child soldiers have now joined the recreational activities.
- 1,008 people (137 men, 220 women and 651 young people) were been reached through educational talk on violence prevention including, child marriage, prevention of sexual abuses.

## EDUCATION

- In Minawao Camp schools, 70 Recreation Kits, 38 School in a box and 18 ECD Kits have been distributed to 600 preschool children, 2,573 (1,122 girls and 1,451 boys) primary school children and 706 (474 girls and 232 boys) secondary children. These offshore learning materials have been complemented by a local order of learning material (slates, chalks, pens, textbooks, pencils, etc.) for the benefit of 7400 school age children.
- UNICEF has supported the Ministry of Basic Education in organizing a rapid needs assessment mission scheduled to begin November 23 to evaluate the needs of students and communities affected by the internal displacement of a large population in the Far North region, many of whose schools are reported to be currently closed, housing IDPs including school-aged children.

## Communications for Development (C4D)

- Community relays called 'C4D pools' have been set up in the five critical health districts of the Far North region. They are collaborating with other health workers, Red Cross agents and NGO animators on the promotion of critical health and WASH family practices. They also organized mini mobile caravans in the 13 health areas communities.
- Meanwhile, rural radios are still broadcasting in local languages special micro-programmes on hand washing, usage of latrines, hygiene and vaccination.
- In the Eastern region, 265 C4D pools of three members each, a group of 12 religious and traditional leaders, a group of women's associations and youth clubs, have been set up in each sector of the refugee camps of Gado 1 and 2, Timangolo, and in the host villages and towns surrounding the refugee camps. These pools have organized social mobilization and home visits in and outside of the camps to explain hand washing techniques and the importance of using latrines as best practices to avoid cholera. They have stuck posters all over the critical spots in the camps. This approach of establishing C4D pools in camps and in host communities has proved to be fruitful, in so far as cholera has not spread in the area to date. The C4D team will continue to establish such pools and to develop tools in all the refugee camps and surrounding areas.

## Supply and Logistics

In 2014, USD 4,870,850 worth of supplies have been distributed to Implementing Partners comprised of following:

- Health: 625,000 USD (Vaccines, Pharmaceuticals, Medical Equipment & Renewables, Testing kits)
- HIV-AIDS: 362,000 USD (ARV's & Testing Kits, PCR Equipment)
- Education: 500,000 USD (Books & students supplies, School kits)

- WASH: 357,000 USD (Water & Hygiene kits, squatting plates, Water purification products, Water tanks)
- Nutrition: 2,900,000 USD (therapeutic food, anthropometric & cooking items, pharmaceuticals)

## Media and External Communication

More than 40 journalists from REJAE (the child-friendly journalists' network) and from international and national, print, audio visual and online media were brought to the field in the Far North region of Cameroon to visit the sites where UNICEF is carrying out activities funded by the Government of Japan to improve the living conditions of children and mothers from the region. As a result of the trip, more than ten human interest stories (HIS), at least 8 radio reports, and 4 radio micro-programmes, 4 TV reports and 1 TV micro-programme were realised, while 6 papers were posted on line. In October, 4 journalists, a cameraman and a photographer were brought to the Minawao refugee site to report on UNICEF's response to the Nigerian crisis in the Far North of Cameroon. Meanwhile, three other journalists covered the commitment of traditional and religious rulers from the North region to fight against poliomyelitis through sensitizing populations within their respective communities to vaccinate their children.

## Security

The security in the Far North region bordering Nigeria is now under control but the Government continues to be watchful. The security level has been increased to Level 3 for East and Adamawa regions, which entails that UN teams now require a security escort. For the Far North Region, UN teams continue to require security escort to travel out of the capital to Maroua.

## Funding

Based on the country's inter-agency 2014 Strategic Response Plan and increased needs, UNICEF requested US\$ 22,978,817 to meet the humanitarian needs of children in Cameroon in 2014. In a context of multiple emergencies with a high level of refugee influx due to violence and insecurity in neighbouring countries and an ongoing nutrition crisis, without sufficient funding, UNICEF has been handicapped in efforts to support the national response to the country's ongoing complex humanitarian and protection crisis. These emergencies are expected to continue into 2015 and as such it remains critical and any break in the funding will prevent in providing seamless support to multiple emergencies faced by the country.

UNICEF Cameroon 2014 HAC and CAR Refugee Needs				
Sector	Total 2014 Requirements*	Funds available	Funding gap	
			\$	%
Nutrition	4,108,600	2,391,960	1,716,640	42%
Health/HIV	3,558,600	1,053,881	2,504,719	70%
WASH	8,193,736	1,361,817	6,831,919	83%
Education	3,807,929	1,275,665	2,532,264	66%
Child Protection	3,310,000	239,746	3,070,254	93%
others		894,641		
<b>Total</b>	<b>22,978,865</b>	<b>7,217,710</b>	<b>16,655,796</b>	<b>72%</b>

\* Total HAC 2014 and revised SRP requirements, including joint appeal for CAR refugee response as of August 2014; current harmonized ceiling in play.

## ANNEX A: SUMMARY OF PROGRAMME RESULTS

	Cluster Response			UNICEF		
	2014 Target	Total Results	% Achieved July 2014	2014 Target	Total Results	% Achieved July 2014
<b>SAHEL NUTRITION CRISIS</b>						
Number of children <5 with Severe Acute Malnutrition admitted to Therapeutic care	48,778	43,424	88%	48,778	43,424	88%
Number of affected families (SAM, IDP) who received a wash kits with key hygiene messages	50,000	17,338	35%	44,000	17,338	39%
Number of people who have access to appropriate basic	160,000	20,000	13%	145,000	20,000	14%

sanitation facilities (latrines)*						
Number of children under one immunized against measles for routine immunization (January – September 2014 )	N/A			235,222	163,379	69%
<b>CAR REFUGEE RESPONSE</b>						
Number of children <5 with Severe Acute Malnutrition admitted to Therapeutic care	7,855	6,327	80%	7,855	6,327	80%
Number of affected families who received a wash kits with key hygiene messages	16,000	7,902	49%	10,000	7,902	79%
Number of people who have access to potable water in refugee site	80 000	40 000	50%	30, 000	10 000	33%
Number of people who have access to appropriate basic sanitation facilities (latrines)	80,000	60 000	75%	30,000	17 700	59%
Number of children 9 months -15 years immunized against measles in Adamawa and East regions	N/A			84,000	113,054	135%
Number of children accessing psycho-social support	N/A			10,800	9,364	87%
Number of UASC identified and receiving appropriate care	N/A			90	106	118%
Number of children with access to temporary learning spaces	21,846	7,976	37%	21,846	7,976	37%

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