

Cameroonian Refugees in Nigeria

May 2021

66,899 Cameroonian refugee men, women and children are registered in Akwa-Ibom, Benue, Cross River and Taraba States in Nigeria. **Some 700 refugees** and host community members received the first dose of **COVID-19 vaccination** in Benue and Cross River States.

About 23,000 refugees received cash to purchase food of their choice in Benue and Cross River States this month.



New refugees hosted by Nigerian local Juliana, on white blouse, cannot afford a decent meal. They eat together boiled cassava with plain palm oil in Ityukase border community, Benue State. ©UNHCR/Lucy Agiende.



Operational Highlights

- In Cross River State (CRS), UNHCR donated 25,000 pieces of surgical masks, 800 isolation gowns, 100 packets of latex disposable gloves, 480 pieces of disinfectants and 10 vaccine cooler boxes to the CRS Commissioner of Health, to support the ongoing COVID-19 vaccination campaign of refugees and the host communities.
- COVID-19 vaccination commenced for Cameroonian refugees in CRS and Benue by the State Primary Health Care Development Agency in Adagom, Ukende and Ikyogen settlements, following UNHCR's advocacy to the Ministry of Health, to include refugees in their vaccination plan. Over 700 refugees and host community members received the first dose of COVID- 19 vaccination. UNHCR through its partner the Nigerian Red Cross Society (NRCS) sensitized refugees and locals to receive the COVID vaccine and provided logistics support to the vaccination team.



Protection Monitoring

- UNHCR collaborated with 12 government agencies and national and international partners to systematically identify protection incidents, analyse the protection risk and refer cases to partners providing protection and multisectoral assistance, including legal assistance, advocacy, capacity building, awareness sessions, services related to gender-based violence (GBV) and material assistance.
- In Benue, Cross River and Taraba (BCT) States, UNHCR and partners undertook at least 20 Joint border monitoring visits, to assess the presence and needs of new arrivals, advocate for the protection of refugees and ensure that refugees have access to territory. No case of refoulement was recorded during the reporting period.
- Over 700 new refugees, mostly women and children, were profiled by UNHCR and partners Jesuit Refugee Service (JRS), Foundation for Justice Development and Peace (FJDP) and Caritas in BCT States. They arrived from Fura-Awa Subdivision and Mavas community of Cameroon to Mbakwerkyaa, Imande Agbatse, Ituukase, Obanliku, Boki, Etung and Takum local government areas, following renewed attacks by the security forces in their villages. Urgent needs include food, blankets, mats, cooking utensils, registration and health care.
- More than 60 detention monitoring visits were undertaken by UNHCR and partners conducted to various police stations, correctional centres, and the Nigerian Security and Civil Defence Corps, to advocate against arbitrary arrest/detention of refugees and provide legal support to refugees in detention in BCT States.
- UNHCR and partner FJDP secured the release of one refugee detained by the Nigeria Immigration Service due to lack of documentation, in Benue State. Documentation was provided to the refugee.

Protection Response

 In BCT States, protection desks have been established to provide information on legal issues, rights, and obligations of refugees and facilitate registration and delivery of cash for food processes. Over 400 refugees with various specific needs including, critically sick



individuals, persons with disabilities, unaccompanied/separated children, pregnant women, older persons were identified and referred to specialized services.

- Registration: UNHCR and the Government of Nigeria registered 181 additional refugees in Cross River State (CRS) during the month of May, while adhering to WHO's COVID-19 prevention protocols.
- Some 500 refugees received identity cards issued by the National Commission for Refugee, Migrants, and Internally Displaced Persons (NCFRMI) in collaboration with UNHCR in Akwa Ibom and CRS. The ID card is key to freedom of movement and access to basic social services including health care and banking.
- At least 2,680 refugee women and girls of reproductive age received dignity kits to promote their wellbeing and personal hygiene in Adagom, Ukende and Ikyogen settlements in Benue and CRS.
- On 26 May, UNHCR and partner FJDP trained 34 individuals on SEA/GBV prevention and response in Adikpo, Benue State. Participants included staff of Kwande local government, NKST primary School Ahondo and Gbaazov, Primary Health Centre Abande and Ikyogen, St. Monica Hospital, General Hospital Adikpo, Government Science and Technical College Ikyogen and St. Francis Xavier's Secondary School Ikyogen, NCFRMI and SEMA.
- In Ogoja, CRS, sensitization on Mental Health and Psychosocial Support reached over 2,600 refugee and host community students in Government Technical College and Ntol Comprehensive Secondary School to build their resilience, enhance coping skills and improve their psychosocial well-being. Individual counselling sessions were also conducted by UNHCR partner Caritas.
- UNHCR and partners FJDP, SEMA, Mediatrix, NCFRMI and NRCS conducted GBV safety audit assessment for 63 refugees and 35 locals (men, women, girls, boys, and individuals with disability), through focus group discussions and key informant interview in Ikyogen settlement and community, Benue State. Sensitization on PSEA and GBV prevention/response also reached 12 local security watchmen in Ikyogen settlement.
- UNHCR conducted a two-week training on Child Protection, GBV and PSEA, employing theoretical and practical sessions for 23 UNHCR partners from Jesuit Refugee Service (JRS), SEMA, NCFRMI, Nigerian Red Cross Society and CUSO International, to improve protection response and services for refugees and locals in Taraba State.
- UNHCR and partners the National Commission for Refugees, Migrants, and Internally Displaced Persons (NCFRMI), State Emergency Management Agency (SEMA) and FJDP, undertook an assessment mission to Ityukase border community, hosting most of the new arrivals in Benue State. Findings showed that refugees and locals have limited food, no access to health care and education, while they live in overcrowded shelters with no sleeping mats and blankets. The community can only be accessed using a motorcycle with extreme caution and expertise, given the mountainous terrain.
- 46 GBV survivors received multisectoral assistance including medical, psychosocial, legal, and material assistance through established referral pathways, to enhance their coping skills, build their resilience and strengthen their social support network in BCT States.
- Some 121 refugee children born in Nigeria received birth certificates issued by the National Population Commission in BCT States. Best interest assessments were initiated for 54 children at risk in Benue and CRS.
- Awareness sessions on birth registrations, child rights and GBV prevention, response and reporting channels reached over 2,500 refugees and locals in BCT States.



- UNHCR conducted an International protection training for 56 personnel from government security agencies, line ministries and partners in Calabar, CRS, to improve delivery of protection services to refugees. Participants included the Nigeria Immigration Service, Nigerian Police, Department of State Security, Ministries of Justice, Women Affairs, Health, Ministry for International Development and UNHCR partners (Caritas, CUSO, NRCS, Mediatrix Development Foundation) and youth leaders from three host communities.
- UNHCR in collaboration with NCFRMI conducted a three-day protection training for 28 government security agencies in Taraba State. The training highlighted key responsibilities of the government in providing protection and security to refugees as well as promotion of human rights.
- UNHCR and partner FJDP conducted a one-day training on community-led SEA/GBV prevention and response for 118 refugees who are members of Community Based Structures and partners in Ikyogen settlement, Benue State.

Challenges

In all refugee hosting locations, negative coping mechanisms including alcohol abuse and survival sex have been reported among youths and women-headed households, due to limited food and livelihood support.



WATER, SANITATION AND HYGIENE (WASH)

- Over 1,500 refugees were reached with sensitization on COVID-19 prevention, personal/environmental hygiene in Adagom, Ukende and Ikyogen settlements.
- UNHCR supplied some **4,000** refugee households with **portable water** albeit **insufficient**, for personal and domestic use following routine treatment and analysis in Adagom, Ukende and Ikyogen refugee settlements, through motorized/solarized borehole systems and water treatment plants.
- In CRS, a sanitation baseline data collection survey was undertaken in Adagom and Ukende settlements, to improve sanitation and environmental hygiene in the settlements. Also, focus group discussions were held with more than 700 individuals including women leaders, youth groups, women, and girls on menstrual pad design to promote their personal hygiene.

Challenges

The main gap in the WASH sector remains **inadequate water supply** in the refugee settlements, despite the construction and rehabilitation of over **15** boreholes and hand dug wells by UNHCR. The yield remains insufficient and merely meets about **20**% of refugees' water need. UNHCR is currently operating a water treatment plant at a very high cost to supplement the water needs of refugees.



More than 2,000 refugees and locals in Benue State received COVID-19 prevention items including buckets, hand wash, sanitizers, and face masks in Benue State, by UNHCR.



- In Ogoja, CRS, UNHCR handed-over the rehabilitated health centre and manual borehole in Ukende PHC to the Ogoja local government chairman and host community leaders. The host community leaders and chairman committed to maintaining the facilities.
- UNHCR partner NRCS supplied laboratory consumables including cotton wools, syringes/needles, methylated spirit, and disinfectants to five Primary Health Centres in Etung and Obanliku local government, CRS.
- Over 5,000 refugees and locals received medical care, including prenatal/postnatal care, family planning and mental health at the UNHCR supported facilities in BCT States. Malaria, gastric/peptic ulcer, watery diarrhoea, malnutrition, upper respiratory tract infection, hypertension were the most common illnesses recorded.

Challenges

- Malaria cases are on the increase and remain the commonest cause of morbidity. As such, mosquito nets are urgently needed by refugees.
- Most refugees declined receiving the COVID-19 vaccine due to misconceptions about the vaccine.
- There is no COVID-19 compliant **ambulance** for emergency evacuations in Adikpo, Ogoja and Takum (BCT States). Lack of transportation to facilitate emergency cases and other referrals in these locations remains a major challenge for refugees and locals.

EDUCATION

- In Taraba State, at least 15 refugee children received educational materials including school bags, books, and pencils after being enrolled in Rogo Primary School, Takum by UNHCR through its partner JRS.
- UNHCR and partner FJDP trained 20 education officials on Global Framework for Refugee/Internally Displaced Person's Education and PSEA in Benue State. Participants were drawn from the Teaching service Board, State Universal Basic Education Board, State Scholarship Board, State Agency for Adult and non-formal Education, Benue State University, Kwande Education Authority and Nigerian Union of Teachers, to promote the inclusion of refugees and IDPs in the education plans of the State.

Challenges

- In Adagom, Ukende and Ikyogen settlements, refugee children with specific needs have limited access to education, given the long distance from the refugee settlements to the schools.
- Shortage of teachers across public schools where refugees are enrolled, significantly affects the quality of education provided to refugees and locals. The teacher/student ratio is over 1:100. UNHCR continues to advocate to the national education authorities for deployment of teachers.

LIVELIHOODS

In Benue State, UNHCR provided farm inputs to at least 184 refugee and host community families in Ikyogen, to improve their food security and self-reliance. Women at risk and the most vulnerable were prioritized. Items included cassava stems, sprayer,



cutlass, digging hoe, weeding hoe, rain boot, herbicide, insecticide, and seedlings (pepper, green spinach, maize, and okra seeds).

- Some 137 individuals (89 refugees and 48 locals) received business development training in Takum, Taraba State. The training provided beneficiaries with knowledge to update their business plans, improve time management and negotiation skills.
- Additionally, 53 individuals (refugees and host community members) commenced vocational training in electrical works, tailoring/fashion designing, catering/pastries, hair styling/cosmetology, barbing and leather works in Ikyogen settlement.



FOOD SECURITY

- 22, 637 refugees from 5,411 families received cash to purchase food of their choice in Adagom, Ukende and Ikyogen settlements in Benue and CRS, by UNHCR, while adhering to COVID-19 preventive protocols.
- Collection of ATM cards by refugee household representatives continued in Ogoja, CRS.
 So far, over 700 families have received their cards.

Challenges

- Because of COVID-19, prices of basic food commodities in refugee hosting areas have increased significantly, by about 30% on core food commodities, compared to early 2020. The cash assistance for food provided to refugees has been inconsistent due to funding constraint. Food remains one of the critical needs of refugees in settlements and host communities.
- Some Refugees continue crossing back and forth to Cameroon in search of food and livelihood opportunities to sustain their families.



SETTLEMENT COORDINATION AND MANAGEMENT, SHELTER AND NFIS

- UNHCR and its partner the State Emergency Management Agency (SEMA) monitored and managed the four refugee settlements (Adagom, Adagom III, Ukende and Ikyogen), in CRS and Benue, ensuring integration with host communities and providing security for refugees. At least 25 potential crises between refugees and locals were resolved through community engagement or negotiations.
- Over 1,000 refugees received non-food items including sleeping mats, blankets, solar lamps, plastic buckets, jerry cans, kitchen sets, stoves, and footwear basin in Ikyogen and Adagom settlements, Benue, and CRS.

Working in partnership

Together with the Government of Nigeria, UNHCR ensures international protection and delivery of multi-sectoral assistance to Cameroonian refugees. The Agency holds regular coordination meetings at the State and Local Government levels with UN agencies, government, and humanitarian actors. The following partners implement specific sector activities: NCFRMI, SEMA, Save the Children International, CUSO International, Catholic Caritas Foundation Nigeria, Catholic Diocese of Makurdi Foundation for Justice Development and Peace, MEDATRIX Development Foundation, Rhema Care Integrated Development Centre, Jesuit Refugee Service, and the Nigeria Red Cross. Operational partners include ICRC, UNFPA, FAO and WHO.



External/Donors Relations

UNHCR is grateful for the following support:

Direct contributions to UNHCR in Nigeria

Canada | CERF | Country-Based Pooled Funds | France | Holy See | Japan | Nigeria | Other private donors | Spain | The Fountain of Life Church | Unilever (UK) | United Nations Trust Fund for Human Security | United States of America.

Unearmarked contributions

Denmark 34.6 million | France 14 million | Germany 25.9 million | Italy 10.6 million | Japan 23.8 million | Netherlands 36.1 million | Norway 41.4 million | Private donors Italy 17.6 million | Private donors Japan 27.8 million | Private donors Republic of Korea 37.5 million | Private donors Spain 73.5 million | Private donors Sweden 12.8 million | Private donors USA 10.8 million | Sweden 88.2 million | Switzerland 16.4 million | United Kingdom 45.7 million

Australia | Austria | Azerbaijan | Belgium | Bulgaria | Canada | Costa Rica | Estonia | Finland | Holy See | Iceland | Indonesia | Ireland | Kuwait | Liechtenstein | Lithuania | Luxembourg | Malta | Monaco | Montenegro | Morocco | New Zealand | Peru | Philippines | Portugal | Qatar | Republic of Korea | Russian Federation | Saudi Arabia | Serbia | Singapore | Slovakia | South Africa | Sri Lanka | Thailand | Turkey | United Arab Emirates | Uruguay | Other private donors

Softly earmarked contributions

Canada 10.2 million | Denmark 14.6 million | France 4 million | Germany 70.9 million | Ireland 3.3 million | Private donors Australia 11.4 million | Private donors Germany 5.1 million | Private donors Japan 4.5 million | Private donors Lebanon 2.1 million | Private donors Republic of Korea 2.5 million | Private donors United Kingdom 2.6 million | Private donors USA 8.7 million | Spain 3.4 million | Sweden 3 million | United Kingdom 24.8 million | United States of America 46.8 million

Czechia | Holy See | Iceland | Japan | Jersey | Liechtenstein | Luxembourg | Morocco | Norway | Private donor

CONTACT US

Tesfaye Bekele, Head of Sub-office, Ogoja, Cross River State bekelet@unhcr.org; Cell + 234 901 066 0624

Roland Schönbauer, Senior External Relations Officer, Abuja schoenb@unhcr.org; Cell +234 901 066 0695

Data portal - Twitter - Facebook - Instagram