The mission of the United Nations Office for the Coordination of Humanitarian Affairs (OCHA) is to coordinate the global emergency response to save lives and protect people in humanitarian crises. We advocate for effective and principled humanitarian action by all, for all.

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This report is produced by OCHA Cameroon in collaboration with humanitarian partners. It covers the period from 1 to 31 December 2021. The next report will be issued in February 2022.

HIGHLIGHTS

- Seven attacks on healthcare were reported, two in the North-West (NW) and five in the South-West (SW).
- Two ambulance staff of an international medical NGO have been detained by State security forces following patient’s transfer duties.
- NSAGs perpetrated 11 improvised explosive devices (IEDs) incidents in the NWSW, including two in Buea town in the SW, targeting communities.
- The cholera outbreak in the South-West region continues to spread. As of 31 December, four health districts have confirmed cases, with 521 cases and 18 deaths.

2.2M
People in need of assistance

1.6M
Targeted for assistance

573.9K
Internally Displaced People (IDP)

383.6K
Returnees (former IDPs and refugees)

72.9K
Cameroonian refugees in Nigeria

Sources:
- Humanitarian Needs Overview - 2021
- Humanitarian Response Plan - 2021
- Multi-sector needs assessment (MSNA) NWSW, OCHA - August 2021
- MSNA in West and Littoral regions, OCHA - August 2021
- MSNA in Centre region, CHOI and OCHA - September 2021
- Nigeria: Registration of Cameroonian refugees, UNHCR - 31 December 2021

Notes:
1 Figures include North-West, South-West, Littoral, West, Adamawa and Centre regions (rounded up to the first decimal place).
2 Figure includes North-West and South-West regions.
Fighting continues between State security forces (SSFs) and non-State armed groups (NSAGs). The population in the NWSW continues to suffer the impact of armed clashes and insecurity, ranging from exposure to crossfire and abductions to explosions from improvised explosive devices (IEDs). The UN Department of Safety and Security (UNDSS) reported 11 IEDs incidents in December; four in the NW and seven in the SW. While most incidents had SSFs as target, three incidents reported in the Fako division directly targeted populations. On 6 December, allegedly NSAG fighters detonated an IED at Soppo market. A second IED was discovered at the market and deactivated by SSFs. On 13 December, an IED explosion was reported at a trade fair at Bongo Square in Clerks Quarter neighbourhood. An unspecified number of people were injured. These attacks and others reported in Buea in the past months targeting civilians are instilling fear among the population. Imposed Monday ghost town rule declared by NSAG are still in place.

The cholera outbreak in Ndian division, South-West, is aggravating. As of 31 December, 521 cases, including 18 deaths, were reported. This is an important increase in comparison to 105 reported cases at the end of November. Humanitarian actors continue to support Ekondo Titi and Bakassi health districts in Ndian division. Access is worsened by poor roads while maritime access is challenging with the presence of pirates and limited resources to reach affected areas. The sea route was considered the safest means of access to the Ekondo-Titi subdivision, used by humanitarian organizations operating in Bamusso as an alternative to roads where there is a high number of NSAG attacks. The presence of pirates on this route has increased security risks for partners and will most likely hinder rapid and safe humanitarian access and the ability to implement activities, especially cholera outbreak related ones.

Attacks on healthcare continued in the NWSW. On 5 December, SSFs reportedly made an incursion into St Mary Soledad hospital in Alakuma- Mankon, NW. During this incident, wards were searched, Patients were harassed and...
two suspected NSAG fighters who were receiving treatment were arrested. On 26 December, SSFs stopped an international medical NGO ambulance at Nguti checkpoint, Kupe-Muanenguba, transporting an injured man from Ashum village in Tinto subdivision, Manyu division to a hospital in Mutengene, in Tiko subdivision. Security forces retrieved the patient and ordered the NGO team to go back to Mamfe, Manyu division. The ambulance driver and the nurse were arrested and detained for investigation. Seven attacks on healthcare were reported in the NWSW. These incidents remain a serious threat to the availability of timely and equitable healthcare in the restive regions.

Displacement continues due to insecurity and violence. Protection continues to be a major concern as civilians continue to be arbitrarily arrested, assaulted, abducted for ransom, and denied access to basic services. Over 2,490 individuals were reportedly displaced in the NWSW in December, following armed confrontations between SSFs and NSAGs, or as a preventive measure for fear of being attacked. Emergency assessments were conducted to identify priority needs of the affected population. Most of them intended to go back to their locations of origin once the situation allows, due to poor living conditions in the bush settlements and limited access to services in host communities.

**FUNDING**

Cameroon 2021 NW-SW Crisis

USD 153.2 million requested

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<th>Sector</th>
<th>Funded</th>
<th>Unmet</th>
<th>Coverage</th>
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<tr>
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<tr>
<td>Protection</td>
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<tr>
<td>Multi clusters</td>
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<tr>
<td>Nutrition</td>
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<td>Shelter and NFI</td>
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<tr>
<td>Refugee Response</td>
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<td>Coordination and Support Services</td>
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<tr>
<td>Early Recovery</td>
<td>2 M</td>
<td></td>
<td>2.4%</td>
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These figures reflect the contributions reported by humanitarian partners on the OCHA’s Financial Tracking Service (FTS - http://fts.unocha.org). All humanitarian partners, including donors and recipient agencies, are encouraged to inform FTS of any cash and in-kind contributions by e-mailing: fts@un.org

**HUMANITARIAN RESPONSE**

**Education**

In the NWSW, one public school among three remained closed. 120,000 students from the NWSW regions have access to schools in their area of displacement. Schools hosting IDPs in the urban areas of NWSW have over-stretched their capacity resulting in poor sanitation in schools and increased risks of COVID-19 transmission due to overcrowded classrooms.

Over 16,400 children, including 9,388 girls, received learning materials and 501 teachers received didactic materials in both formal and non-formal schools or learning spaces to improve the quality of learning. In addition, partners rehabilitated latrines in four schools in the NW, benefitting 554 students including 328 girls.

In 2021, the Education Cluster facilitated access to formal and non-formal education for 62,212 children, including 24,233 of them through radio education. Also, 127,403 children, including 64,975 girls, received learning materials and benefitted from handwashing points installed in schools. Following the training of 637 teachers on psychosocial support, better care was provided to 224,149 students.

The Director of Education Cannot Wait (ECW) programme and the Secretary General of the Norwegian Refugee Council (NRC) visited Cameroon, including Buea in the SW. During the visit, Education Cannot Wait announced an
increase of the multi-year resilience programme (MYRP) portfolio from US$15 million to US$25 million for the period 2022-2024. The strategy finalized by the Government, taking also into account the Education Cluster strategy, will target 37 municipalities in the NW, SW, Littoral and West regions, and benefit 145,355 children. ECW funded interventions will ensure the continuation of the Education Cluster and Sector non-formal offer for 27,000 IDPs in the NWSW and Far North regions of Cameroon.

Food Security

Food security partners collectively assisted 142,426 people with emergency food, agriculture, and livelihoods assistance, 28 per cent was given through cash and voucher modalities. Over 78 per cent of the beneficiaries received food items, while 22 per cent received agriculture and livelihood assistance. In the SW, the World Food Programme (WFP) assisted 31,238 out of 55,000 beneficiaries planned, in Meme and Manyu divisions. The main reason for the gap is the suspension of activities in Meme division following food diversion in Konye in November. WFP also assisted 4,000 beneficiaries in Kumba 1 in Meme division under the multipurpose cash project.

The Food and Agriculture Organisation (FAO) distributed material for the construction of 450 mini poultry production units in the NWSW, with 225 units per region.

Health

The regional health delegations reported a significant increase in the number of positive cases of COVID-19 in the NWSW. The positivity rate moved from 7.1 per cent in November to 9.1 per cent in December in the NW and from 2 per cent to 17.1 per cent in the SW. The positivity rate increase was not associated with an increase in the number of hospitalizations and deaths. The NW recorded no deaths and the SW reported two. The case fatality rate is 4 per cent in the NW and 2 per cent in the SW.

The cholera outbreak in the SW region continued to spread to more health districts. A total of four health districts and eight health areas have been affected. As of 31 December, there was 521 cases with 18 deaths, giving a case fatality rate of 3.6 per cent. The World Health Organisation (WHO), the United Nations Children’s Fund (UNICEF), and MSF continued to support the response to the cholera outbreak. WHO facilitated the training of 100 additional community health workers to support water hygiene and sanitation (WASH) activities, risk communication and community engagement, community management, and referral of cases. WHO also supported the deployment of five health personnel to support the case management in the Idabato health area of the Bakassi health district. In addition, WHO facilitated the training of laboratory personnel from the affected health districts and provided cholera investigation material. MSF continued to support case management at the cholera treatment unit of Idabato, support community case management, WASH and referrals through community health workers. MSF also administered cholera vaccines, using the case area targeted intervention (CATI) protocol, in Ekondo-Titi health district.

Attacks on healthcare remain a serious threat to the availability of timely and equitable healthcare in the NWSW. In December only, seven attacks were recorded, two in Bamenda health district in Mezam and Momo divisions in the NW, and five in Mamfe health district in Manyu division and in Ekona health district in Fako division in the SW. The attacks included removal of patients from health facilities, detention of healthcare workers, obstruction of healthcare, theft of medication and harassment of health personnel. Continued advocacy for the protection of healthcare is needed to ensure that health services are provided in a safe manner.

Nutrition

Nutrition Cluster partners screened 44,713 children under the age of five for acute malnutrition. About 79 children, (0.2 per cent of screened children), were identified with severe acute malnutrition (SAM) and were referred for appropriate treatment. Meanwhile, 329 children, (0.8 per cent of screened children), were identified with moderate acute malnutrition (MAM). Their parents received nutrition counselling and are assisted through the blanket supplementary feeding programme (BSFP).

Partners provided specialized nutritious food through BSFP to 4,465 beneficiaries, including 2,866 children aged between 6 to 23 months and 1,599 pregnant and lactating women (PLW) from vulnerable households receiving general food assistance. Over 27,297 caregivers, including 17,371 women and 9,947 men, received key messages...
on optimal infant and young child feeding practices. Additionally, 290 pregnant women received iron folate supplements, geared towards addressing micronutrient deficiencies amongst this group.

### Protection

Protection monitoring partners reported 198 protection incidents. Women were most affected with 67 per cent of these incidents. The main protection cases included threats to life (25 per cent), destruction of personal property (23 per cent), killings and murder (13 per cent), and arbitrary arrest and/or detention (11 per cent).

Partners continue to report incidents due to continued vulnerability of the population related to lack of civil documentation, increase in military presence in the towns of Buea and Limbe in the SW with continued confrontations between NSAGs and SSFs and risks of retaliation. On 5 December, NSAGs displayed Ambazonian flags at the Hospital Roundabout Junction in Mankon, Bamenda II, and Finance Junction, Bamenda III, in the NW, resulting in violent clashes and gunshots. As a result, movements were restricted in town leaving local transport systems shut down for several hours. In addition, partners reported raids in various communities. On 5 December, State security forces raided Banga Bakundu village, Meme division in the SW, resulting in the loss of one life and the alleged arbitrary arrest of six other individuals. On 8 December, in Bachuo-Ntai village, Manyu division in the SW, SSFs allegedly arrested 36 individuals, collecting some money before releasing them. Between 4 and 7 December, NSAGs kidnapped at least 18 persons in Bachuo-Ntai village in Manyu in the SW, allegedly extorting people. On 12 December, NSAGs allegedly tortured 26 individuals in Ndebaye, Nsanakang, Nsanalagati and Akuyaba villages in Manyu in the SW, forcing them into the bush from their vehicles and seizing their personal belongings.

The use of IEDs was linked to several reported incidents in the SW. On 6 December, an IED was placed at Great Soppo Market in Buea. It was neutralized preventing any physical casualties. On 13 December, an IED detonated near Bongo Square at an on-going trade fair, injuring about 13 individuals. These incidents have instilled fear in many local residents. The placement of an IED at a military checkpoint in Nfaitock, Manyu division, SW, forced 367 persons to seek refuge in the bush.

Overall, populations continue to be subjected to killings, kidnappings and threats to life and arbitrary arrests. Actors in the NWSW regions continue to advocate for increased assistance for affected communities.

### Child Protection Area of Responsibility (CP AoR)

With the objective to further addressing the crucial issue of birth registrations, especially for children enrolled in schools, partners identified 252 conflict-affected children in need of birth certificates in December and are planning to provide these children with the certificates.

With the increasing use of IEDs, there is a continuous need to raise awareness on the dangers it poses to children.

CP AoR partners reached 25,329 people with various interventions in all 13 divisions in the NWSW. They assisted 1,932 individuals in mental health and psychosocial support services (MHPSS), identified 32 unaccompanied and separated children (UASC) whom they supported with alternative care and case management services. Partners also referred 2,222 vulnerable children through the community-based child protection mechanism (CBCPM) for appropriate support and reached 18,748 persons with awareness-raising messages on CP, GBV and COVID-19.

### Gender-Based Violence Area of Responsibility (GBV AoR)

GBV AoR partners reported 1,668 GBV incidents to GBV specialized services providers. Among the survivors, 96 per cent are female, 41 per cent are children, 78 per cent are IDPs, 18 per cent are host community members and 4 per cent are returnees. Reported incidents included emotional abuse (31 per cent), forced marriage (28 per cent), physical assault (16 per cent), sexual assault (10 per cent), denial of resources or opportunities (10 per cent), and rape (5 per cent).

Overall, GBV partners reached 126,008 persons, including 117,771 in the NW and 8,237 in the SW, with GBV prevention and response activities through sensitization on GBV, GBV risk mitigation, distribution of mama and dignity kits, legal assistance and livelihoods support.

To support timely access of GBV survivors to multi-sector services, there is a need to strengthen sensitization in communities on the importance and use of the referral pathway. Additionally, GBV interventions need to be supported
with adequate funding so that potential survivors are not left without any life-saving assistance to recover from GBV and rebuild their lives.

Water, Sanitation and Hygiene (WASH)

Eight WASH partners assisted 33,214 individuals through various WASH interventions, including 44 per cent IDPs, 47 per cent host community members and 9 per cent returnees. About 62 per cent of people reached were located in the NW and 38 per cent in the SW. The response mainly focused on hygiene promotion representing 91 per cent of total people reached. The proportion of people reached through safe drinking water provision represent 6 per cent and less than 1 per cent for sanitation. Partners reached 30,363 individuals with hygiene promotion and COVID-19 prevention activities, 2,020 individuals received WASH and dignity kits, 731 individuals benefitted from latrine construction and maintenance, and 100 individuals from water supply.

In response to the cholera outbreak, 40 community leaders and 120 community workers, trained on awareness raising on cholera issues in affected area, continued with household disinfection and suspected cases were referred to health facilities. Limited access to the affected area, the absence of a WASH assessment in affected communities and limited funding are major challenges faced by WASH partners.

Humanitarian coordination

OCHA continued the coordination of the humanitarian response, including through advocacy for humanitarian access and for effective and principled humanitarian action through regular meetings with relevant stakeholders. OCHA and humanitarian partners continue to advocate with all parties to facilitate humanitarian access to provide life-saving assistance to the most vulnerable people.

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