

CAMEROON

People in need
4 million

People targeted
2.89 million

Requirements
US\$ 12.31 million



Context

Cameroon continues to suffer from and manage humanitarian and health consequences resulting from ongoing security crises. These crises have lasted for more than seven years and affect seven of the country's ten regions. As of October 2021, it was estimated that there were more than 466 000 Central African and Nigerian refugees, 1 050 000 internally displaced persons, and 467 000 returnees or former internally displaced persons who returned to the main regions affected by armed conflicts and terrorist attacks.

- Far North Region: Attacks by Boko Haram and Islamic State groups are causing injuries and the displacement of populations. This region hosts more than 114 600 Nigerian refugees, 314 500 internally displaced persons, and 124 300 returnees (former internally displaced persons).
- North-West and South-West regions: Frequent confrontations take place between non-state armed groups and the regular arm. These two regions host more than 409 000 internally displaced persons. Approximately 244 700 internally displaced persons from the North-West and South-West regions are in the Littoral and West regions.
- The Eastern region hosts more than 207 000 Central African refugees.
- Adamaoua shelters refugees from the Central African Republic (71 000 people), from Nigeria (1260 people), and internally displaced Cameroonians (5300 people).

Cameroon also faces many epidemics, such as COVID-19, cholera, yellow fever, and measles.

© UNICEF / Frank Dejongh

Response strategy

Equitable access to quality health services is a major element of the response strategy. Mobile clinics will continue to be deployed to provide essential health care, including reproductive health care, to populations with limited access. Post-rape kits are also available in response to the high numbers of rapes. WHO will support dignified and safe deliveries by an estimated 322 500 vulnerable women. There are an estimated 235 838 women in the North-West and South-West regions and 86 665 women in the Far North region. WHO will work to ensure the referral of gender-based violence cases to the protection sector and equitable access to essential health care for 1 308 858 affected people. WHO will continue to support the establishment of an early warning and rapid response mechanism to epidemics in regions in crisis and strengthen preparation and response to epidemics. The Organization will work to improve the management of physical and psychological trauma for people affected by crises in the Far North, North West, and South West regions, and will prepare populations for resilience through community education and awareness raising aimed at empowerment. It will likewise pursue the innovative search for effective solutions to problems related to health and/or access to essential health services. Improving the quality of care in emergency situations to further preserve the dignity of beneficiary populations are critical.

Country priorities

- Improve accessibility to essential health care for populations affected by crises, primarily for mothers, newborns, and children, including access to sexual and reproductive health services.
- Guarantee dignified and safe childbirth and the prevention of unintended pregnancies, sexually transmitted infections, and HIV for all vulnerable women of childbearing age.
- Provide holistic care for survivors of gender-based violence; provide mental health care and psychosocial support.
- Support epidemics preparation and response in all areas affected by the humanitarian crisis.
- Ensure accurate COVID-19 information shared in social networks.
- Address vaccine resistance and hesitancy.
- Strengthen case management, especially severe cases in the intensive care unit.
- Strengthen the application of infection prevention and control measures at health facilities at all levels.
- Support the supply of necessary medicines against COVID-19, polymerase chain reaction tests, and antigen rapid diagnostic tests.
- Clearly communicate public health interventions.
- Support logistic operations.
- Strengthen epidemiological surveillance and laboratory surveillance.

COVID-19 response

COVID-19 continues to cause devastation. WHO is working to coordinate partners, investigate cases, conduct contact tracing and follow-up, provide treatment, ensure infection prevention and control, strengthen risk communication and community engagement, facilitate vaccination, and strengthen data management.

Overall country funding requirements for emergency response, including COVID-19, by pillar (US\$ million)

Pillars	Emergency response	COVID-19/ACT-A	Total
P1. Leadership, coordination, planning, and monitoring	0.09	0.58	0.67
P2. Risk communication and community engagement	0.13	0.07	0.19
P3. Surveillance, case investigation, and contact tracing	1.19	1.21	2.40
P4. Travel, trade, points of entry and mass gatherings	0.03	0.14	0.16
P5. Diagnostics and testing	0.14	2.16	2.30
P6. Infection prevention and control	0.23	0.42	0.66
P7. Case management and therapeutics	0.67	1.60	2.27
P8. Operational support and logistics	0.53	0.23	0.77
P9. Essential health systems and services	1.25	0.76	2.01
P10. Vaccination	0.36	0.51	0.88
Total	4.63	7.68	12.31

Health inequities remain a serious challenge in Cameroon. WHO works to improve accessibility to essential health care, address vaccine resistance and hesitancy, as well as many more interventions. © WHO / Anna Kari



For more information

Dieng Alle Baba

Incident Manager COVID-19
WHO Cameroon
adieng@who.int

Emmanuel Douba Epee

Emergency Preparedness and Response
WHO Cameroon
doubaem@who.int

Phanuel Habimana

WHO Representative
WHO Cameroon
habimanap@who.int