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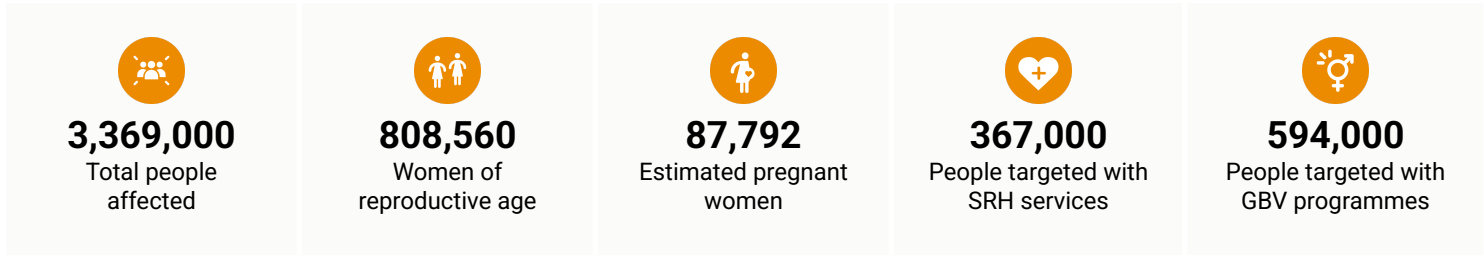


Situation Report #29

Violence and displacement in Cameroon continue to place lives at risk

Country:	Cameroon
Emergency type:	Conflict, Crisis Displacement, Inter-Community Violence
Date Issued:	March 11, 2025
Covering Period:	Feb 1, 2025 to Feb 28, 2025
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Key Figures



Highlights

In February, crisis-affected areas in Cameroon experienced multiple violent incidents, including attacks by Non-State Armed Groups (NSAGs) in the Far North and Anglophone regions, as well as violent farmland protests. These events led to casualties, human rights violations, and population displacements.

During this period, UNFPA and its partners provided lifesaving sexual and reproductive health (SRH) services to 7,262 people, 76% of whom were women and girls. Additionally, 21,181 people received gender-based violence (GBV) services and information, with women and girls accounting for 74% of beneficiaries.

On 27 February, UNFPA was notified of the termination of funding from the United States of America (US) to its programme in Cameroon. This will result in a 50 per cent reduction in the agency's humanitarian response as of March 2024. The estimated shortfall of US\$2 million will leave more than 25,000 direct and 116,000 indirect beneficiaries across 12 crisis-affected localities without access to essential SRH and GBV services. As a result of these funding cuts, only 29 per cent of the required funds for UNFPA's 2025 humanitarian response are currently secured.

Situation Overview

In the Far North, NSAG attacks and civilian abductions fueled growing public anger over the government's crisis management, compounded by land disputes that sparked violent local riots. These caused various displacements, for instance more than 300 additional households were registered in Blangoua, as assessed by the Rapid Response Mechanism (RRM). Simultaneously, the North West and South West regions experienced intensified military operations against separatist groups, resulting in casualties and displacement.

The initial suspension of US-funded humanitarian aid to Cameroon in January prompted many actors to scale back their activities. By late February, several partners received official notification of the complete termination of US funding. Over the past two years, the US has been the largest donor to UNFPA's humanitarian programmes in Cameroon—and to the broader humanitarian response. UNFPA remains hopeful that the US Government will reconsider its decision and continue its leadership role, working in partnership with UNFPA and other key humanitarian actors to save the lives of women and girls worldwide.

UNFPA Response

Sexual and Reproductive Health

In February 2025, 2,675 women received antenatal care (ANC) services. Six births were registered at the community level, while 264 deliveries took place in health facilities, including 117 caesarean sections—representing 44 per cent of all facility-based deliveries. A total of 248 obstetric complications were recorded, of which 194 were treated. Among these, 16 per cent were cases of pre-eclampsia/eclampsia, 42 per cent were perineal or vaginal tears, and 19 per cent were postpartum haemorrhage. Sadly, seven maternal deaths—two occurring in the community—and 18 neonatal deaths were reported. While maternal and neonatal death notifications were 100 per cent complete and timely, challenges persist in effectively organizing maternal death reviews.

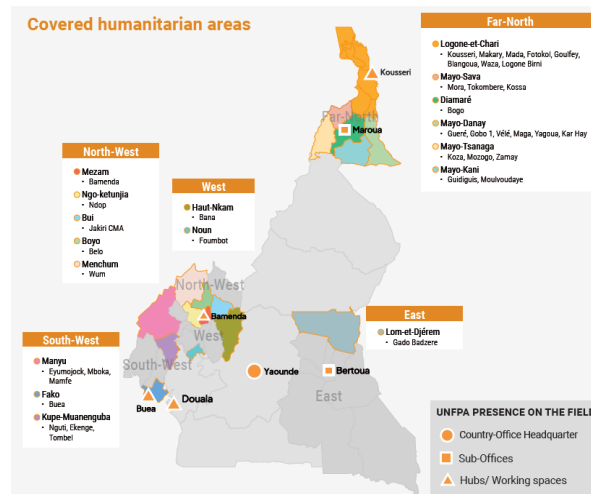
In total, 628 women and girls accessed family planning services. Among the 497 adult women, 172 were new clients, and 377 received modern contraceptive methods. Combined oral contraceptives were the most preferred method (60 per cent), followed by implants (20 per cent), injections (16 per cent), and intrauterine devices (4 per cent).

Fifty-seven per cent of GBV incidents reported at service provision points offering medical care were cases of sexual violence. All survivors of rape (100 per cent) received clinical management of rape, including integrated psychological support, and 43 per cent were referred to appropriate MHPSS services. Notably, over 75 per cent of reported GBV cases involved adolescent girls and young women.

Internally Displaced Persons (IDPs) accounted for 34 per cent of safe deliveries and 80 per cent of family planning consultations in February. Migrants received 28 per cent of ANC consultations, highlighting increased access to specialized care among displaced populations. However, critical gaps remain, as 44 per cent of reported neonatal deaths occurred among IDPs, and 89 per cent of GBV incidents were perpetrated against IDPs and refugees. UNFPA continues to prioritize reaching these vulnerable groups with lifesaving services.

GBV and Mental Health and Psychosocial Support Services

In the Far North region, UNFPA reached 21,181 people with GBV-related information, 74 per cent of whom were women. A total of 262 sensitization sessions were conducted to raise awareness on gender equality, sexual and reproductive health rights, the consequences of child marriage, STI prevention, menstrual health, and available SRH services. In total, 1,674 women and girls received GBV case management and MHPSS support and/or participated in various activities—including knitting, sewing, embroidery, agriculture, crafts, as well as individual and group therapy sessions—across



Map Disclaimer: The boundaries and names shown and the designations used on this map do not imply official endorsement by the United Nations.

multiple locations (Fotokol, Mada, Vélé, Guéré, Moulvoudaye, Guidiguis, Mozogo, Kousseri, Kosaa, Koza, and Moskota).

Despite these efforts, only 25 per cent of GBV survivors requested and were referred to medical, security, and psychosocial services. To address service continuity, two GBV case management meetings were held to update referral pathways following activity disruptions among field partners involved in the referral system.

Results Snapshots



7,262

People reached with **SRH services**
76 per cent women and girls



32

Health facilities supported



39,409

People reached with **GBV & SRH information**
71 per cent women and girls



15

Women and girls' safe spaces supported



1,674

People reached with **GBV prevention, mitigation, and response** activities

Coordination Mechanisms

Gender-Based Violence

During the monthly GBV Area of Responsibility (AoR) coordination meeting, members adopted the action plan for 2025, with 34 members in attendance. Furthermore, the GBV AoR members participated in a capacity building session, led by UNHCR on ActivityInfo and 5W data collection tools.

Sexual and Reproductive Health

During the reporting period, the SRH Technical Working Groups (SRH TWGs) convened regularly to coordinate and enhance SRH services, particularly in the Far North and North-West and South-West regions of Cameroon. Activities focused on the annual SRH work plan, coordination around gaps and strengthening emergency responses, data, aligning priority indicators with the Minimum Initial Service Package (MISP). This meeting was crucial for effective stakeholder coordination to address service gaps and improve access to quality SRH care in these regions.

Funding Status

In February, Cameroon CO mobilised USD 2,626,424 out of the USD 9 million required for 2025 humanitarian interventions. Part of these funds will be discontinued as of the 28th of February as result of the termination of US funds. UNFPA thanks the US for the support given so far, grateful to other donors: DG-ECHO, Canada, UN-CERF and the various contributors to the UNFPA Humanitarian Trust Funds.

UNFPA is grateful to humanitarian donors supporting our response in Cameroon in February 2025

