

Country:	Cameroon
Emergency type:	Climate Disaster, Conflict, Crisis Displacement, Inter-Community Violence
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Covering Period:	June 1 to June 30, 2025
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Key Figures



3,369,000Total people affected¹



808,560Women of reproductive age²



87,792Estimated pregnant women²



367,000People targeted with SRH services



594,000People targeted with GBV programmes

Highlights

- In June 2025, data from 25 health facilities showed continued high demand for essential sexual and reproductive health (SRH) services, with over 6,300 individuals – 98 per cent of whom were women and girls – accessing antenatal care, assisted deliveries, and postnatal consultations.
- Gender-based violence (GBV) prevention and response interventions reached 7,094 individuals, primarily women and girls, through mass sensitization sessions on family planning, early marriage, psychological violence, and women's empowerment.

¹ 2025 Cameroon Humanitarian Needs and Response Plan

² Estimated figures are based on the Minimum Initial Services Package (MISP) for Sexual and Reproductive Health in Humanitarian Settings calculator.



• In the Far North, anticipatory actions reinforced community preparedness through training and awareness sessions, while coordination efforts addressed persistent gaps. These interventions contribute to the ECHO-funded project strengthening local resilience to climate shocks and humanitarian risks.

Situation Overview

- The SRH situation in Cameroon, particularly within the Far North, North-West, and South-West regions, remains a significant humanitarian concern. In the Anglophone regions, non-state armed group (NSAG) attacks reportedly decreased in June, though a significant ambush in the francophone West region and in the North West. Meanwhile, the Far North continues to suffer from NSAGs violence.
- Incidents of GBV, including sexual violence, continue to pose serious challenges, emphasizing the need for sustained prevention and response efforts.

UNFPA Response

Sexual and Reproductive Health

- A total of 1,194 pregnant women benefited from at least two antenatal consultations, while 1,318 safe deliveries were conducted by qualified personnel, including 225 obstetric complications managed, of which 145 were cesarean sections. Additionally, 573 mothers and babies received a minimum of two postnatal consultations.
- Essential supplies, including baby kits, were distributed to new mothers to support maternal and newborn care.
- UNFPA-supported health facilities provided diagnosis and treatment for 1,378 individuals with sexually transmitted infections (STIs).
- Community and facility-based awareness activities reached 10,388 people with information on SRH, HIV, and STIs.

Gender-Based Violence:

- GBV prevention and response interventions reached 7,094 individuals, primarily women and girls, through
 mass sensitization sessions on family planning, early marriage, psychological violence, and women's
 empowerment.
- All reported cases of sexual violence received clinical management within the critical 72-hour window, including emergency contraception and post-exposure prophylaxis. Among survivors, the most commonly reported forms of violence were physical assault (45 per cent), denial of resources (30 per cent), and early marriage (15 per cent). All survivors received individual counselling; 70 per cent were referred for medical care, while 30 per cent benefited from community mediation.



- To support recovery and resilience, 20 survivors received training in income-generating activities. Nearly all reported improvements in their livelihoods as a result.
- Men's engagement also progressed, with ten male advocates trained and two community platforms activated.
- Mobile clinics operating in Yagoua, Makary, and Mokolo expanded access to integrated GBV and SRH services. Despite progress, persistent challenges such as underreporting of rape cases and limited resources for comprehensive care highlight the need to strengthen early warning systems and community-based responses.

UNFPA Anticipatory Actions

- UNFPA carried out 146 awareness sessions across the Far North, reaching 4,670 individuals, mainly women and girls, with messages on GBV prevention, social cohesion, early marriage, and menstrual hygiene.
- A total of 246 community actors were trained on anticipatory action, psychological first aid, protection, and SRH to enhance local preparedness and resilience. Additionally, UNFPA conducted a capacity-building session for implementing partners and consortium members, focusing on the links between GBV, climate change, and SRH, including key crisis modifier indicators. The monthly coordination meeting in the Far North provided a platform to review activities, address challenges, and plan next steps.

Results Snapshots



6,328People reached with SRH services 98% women and girls



25 Health facilities supported



22,418People reached with GBV & SRH information 74% women and girls



Women and girls' safe spaces supported



Coordination Mechanisms



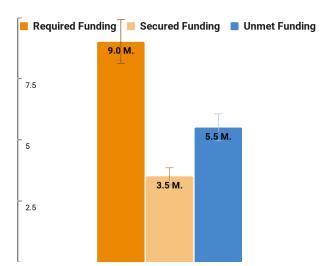
Gender-Based Violence:

As part of the ECHO-funded initiative, several capacity-building and local governance workshops were held in the Far North Region, bringing together over 65 key stakeholders. These efforts reflect a multi-level strategy aimed at reducing vulnerabilities through community engagement, institutional strengthening, and informed priority setting based on recent participatory assessment of vulnerabilities and capacities (PAVC) findings. The monthly GBV coordination meeting also gathered actors in the Far North to review progress, share data, and address challenges in service delivery, reinforcing collaboration for improved GBV response.

Sexual and Reproductive Health:

In June 2025, the SRH in Emergencies Technical Working Group (SRHiE TWG) held its regular coordination meetings across the North-West, South-West, and Central regions, with a focus on ensuring continued availability of post-rape kits. Special attention was given to revitalizing the Far North Working Group, which reconvened and updated the mapping of humanitarian actors. This was an urgent need following the withdrawal of US funding that led to the suspension of several partner activities. These meetings aimed to clarify roles and address key operational challenges, including SRH kit stock-outs and the lack of ambulance services reported across all regions.

Funding Status



As of late June 2025, UNFPA Cameroon faces a 61 per cent funding gap for its humanitarian operations, having raised just USD 3.5 million of the USD 9 million required for 2025. This shortfall jeopardizes essential SRH and GBV services, putting women and girls in Cameroon at severe risk.

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UNFPA is grateful to humanitarian implementing partners supporting our response in Cameroon















