

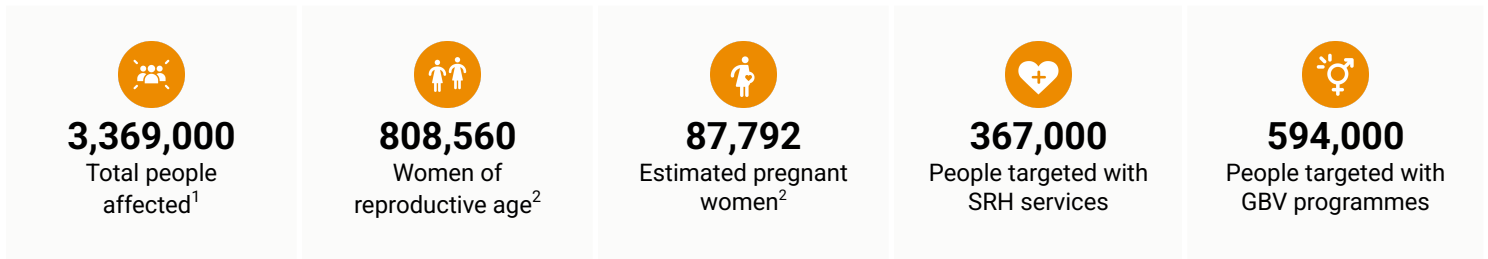
Situation Report

The humanitarian crisis in Cameroon remains a critical concern

Photo: UNFPA/Cameroon

Country:	Cameroon
Emergency type:	Climate Disaster, Conflict and Inter-Community Violence, Displacement,
Date Issued:	July 1, 2025
Covering Period:	May 1, 2025 to May 31, 2025
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Key Figures



Highlights

- In May 2025, UNFPA provided substantial sexual and reproductive health (SRH) services, including antenatal consultations, assisted deliveries, and management of obstetric complications across multiple regions of Cameroon.

¹ [2025 Cameroon Humanitarian Needs and Response Plan](#).

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

- Significant advancements were made in humanitarian efforts, particularly in gender-based violence (GBV) awareness and case management, focusing on host communities and internally displaced persons (IDPs) in the Far North, North-West, and South-West regions.
- Anticipatory measures are being evaluated to enhance future preparedness and resilience, aligning with the targets and priorities of the ECHO funded project entitled, "Reducing humanitarian needs in the Far North of Cameroon by strengthening the preparedness of multi-level actors to climate shocks," being undertaken with the United Nations Food and Agriculture Organization and Action Against Hunger.

Situation Overview

- The SRH situation in Cameroon, particularly within the Far North, North-West, and South-West regions, remains a significant humanitarian concern. In May 2025, data from 25 health facilities demonstrated considerable SRH needs among women, specifically in relation to antenatal care, supervised deliveries, and family planning.
- Incidents of GBV, including sexual violence, continue to be a major concern, highlighting the urgent need for increased support to ensure prevention and mitigation, as well as the provision of medical and psychological care for survivors.

UNFPA Response

Sexual and Reproductive Health

- **A total of 1,236 women received antenatal consultations**, including 175 internally displaced women, 91 refugees, 332 returnees, and 638 women from the host community. Postnatal consultations were provided to 955 women, including 361 internally displaced, 52 refugee, 481 host, and 61 returnee women. Access to contraceptive methods was provided to 597 women, consisting of 82 internally displaced, 12 refugee, 153 host, and 350 returnee women.
- **Assistance was provided for 827 safe deliveries**, including cesarean sections for 167 women and 171 obstetric complications.
- **Outpatient consultations were administered to 3,457 individuals**, comprising of 1,856 women and 1,601 men. Management of sexually transmitted infections was provided to 1,388 individuals. SRH-related hospitalizations occurred for 1,412 individuals, including 570 men and 842 women.
- **GBV cases were reported and managed in health facilities**. Survivors received emergency contraception and post-exposure prophylaxis (PEP) treatment within the critical 72-hour window. Mental health and psychological support was also provided for survivors of GBV.

Gender-Based Violence:

- In May 2025, UNFPA and partners provided awareness-raising and education sessions with 4,804 people on GBV and SRH issues, with an almost equal distribution between genders, namely 2,403 men and 2,401 women. The majority of these sessions took place within the host community.

With funding from ECHO UNFPA is implementing a project to strengthen community mechanisms to prevent and respond to GBV risks while enhancing the resilience of vulnerable populations through community awareness, targeted support, and women’s economic empowerment. In May 2025, the project:

- Reached 5,572 people through GBV awareness campaigns.
- Supported 390 vulnerable individuals through targeted advocacy and activities.
- Empowered 62 women through Income-Generating Activities and provided cash transfers to 58 GBV survivors, strengthening their resilience and autonomy.

Results Snapshots



3,462

People reached with SRH services
84% women and girls



25

Health facilities supported



22,145

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



6

Women and girls’ safe spaces supported

Coordination Mechanisms



Gender-Based Violence:

- UNFPA's coordination mechanisms located in Maroua , Buea and Bamenda have been key in implementing GBV prevention and response initiatives in the Far North, North-West, and South-West regions of Cameroon.
- Partner reports from the Sub-Working Groups highlight the importance of community involvement and awareness campaigns in improving GBV case identification and referrals.
- A current mapping and referral pathway for GBV services is maintained in the targeted sites in the Far North, North-West, and South-West regions, enabling effective referrals for specialized support.
- Existing Standard Operating Procedures and GBV referral pathways were distributed, and complaint procedures were promoted.

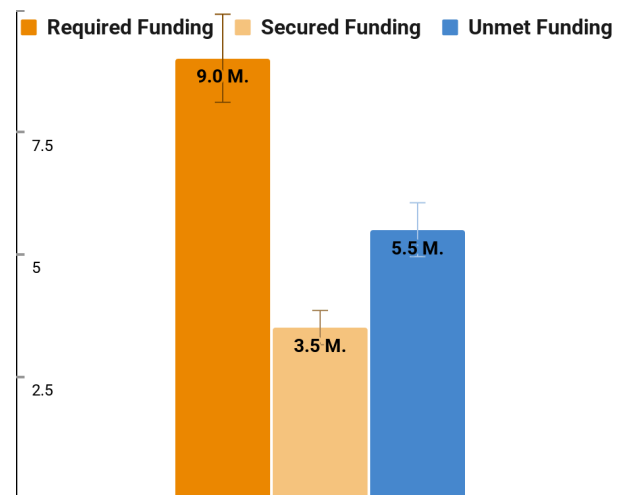
Sexual and Reproductive Health:

- In May, the Technical Working Group (TWG) on SRH in Humanitarian Crises (SRHiE TWG) in the North-West and South-West regions was reactivated.
- A significant milestone was achieved on May 7th with the convening of the first Sexual and Reproductive Health in Emergencies (SRHiE) TWG meeting dedicated to this crisis-affected zone (North-West and South-West regions). This session allowed for a re-examination of the group's terms of reference and a clarification of its interactions with the Health Cluster. The fundamental importance of SRH in humanitarian crisis situations was also reaffirmed.
- The monthly National SRHiE TWG meeting was held on May 27, which focused on operational challenges, including the discontinuation of certain projects by organizations such as DEMTOU Humanitarian (a local NGO), and the withdrawal of partners such as International Medical Corps from intervention sites in the North-West and South-West regions.
- Significant needs for human, material, and financial resources were highlighted. These resources are crucial for enhancing access to SRH services for women and girls, as well as vulnerable men and boys.
- OCHA informed partners of the ongoing evolution of humanitarian coordination, following Inter-Agency Standing Committee (IASC) guidance. A think tank has been established and is currently working on the sector-specific transition plan.

Funding Status

By the end of May, UNFPA had mobilized US\$3.5 million of humanitarian funding needed for Cameroon out of the US\$9 million required for 2025, leaving a funding gap of 61%. Without further financial support, critical SRH and GBV services are at risk, which will have devastating consequences for women and girls in the country.

UNFPA thanks its donors: DG-ECHO, Canada, UN-CERF and the various contributors to the UNFPA Emergency Fund / Humanitarian Thematic Fund.



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

