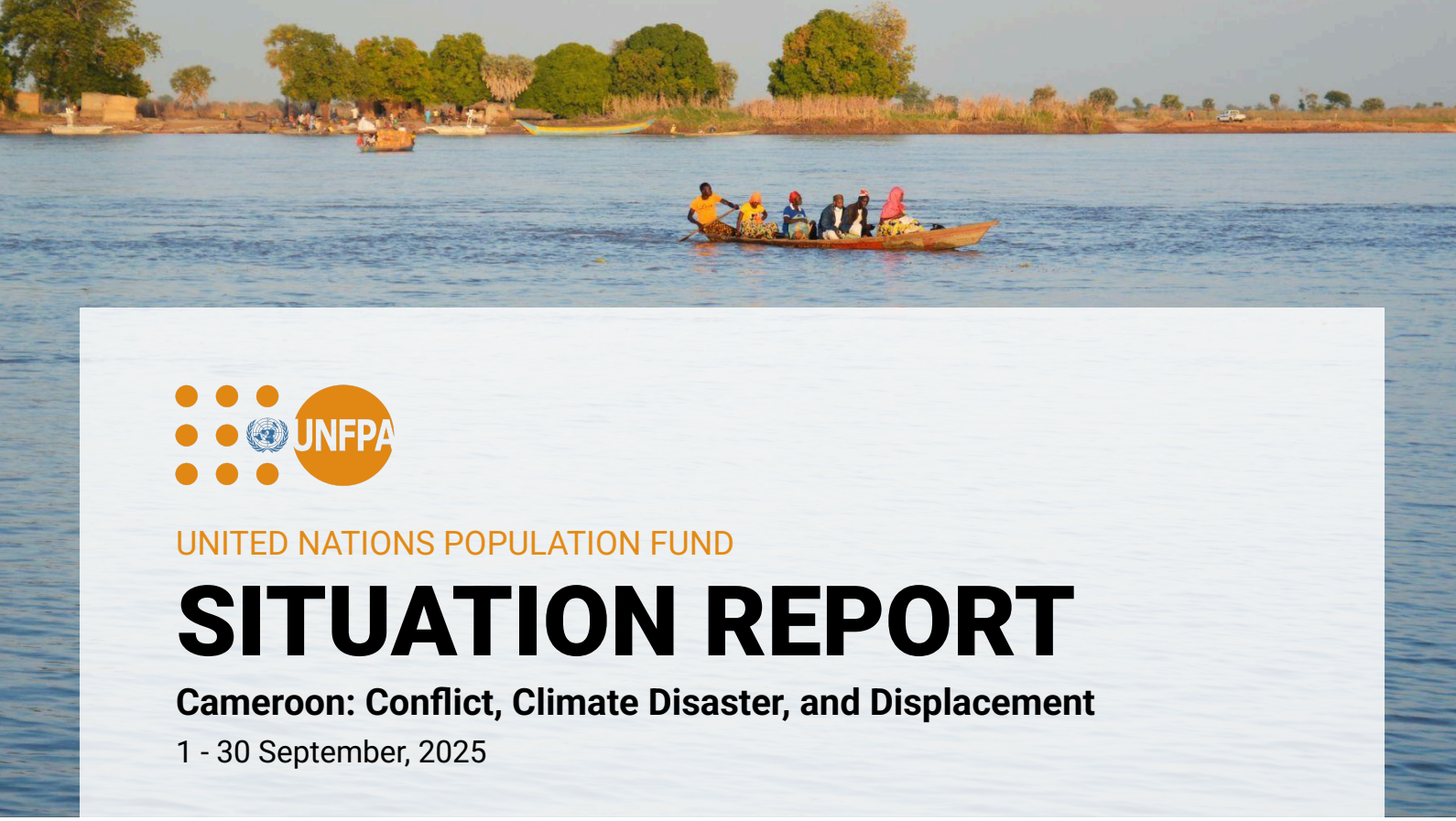


UNITED NATIONS POPULATION FUND

SITUATION REPORT

Cameroon: Conflict, Climate Disaster, and Displacement

1 - 30 September, 2025

Highlights

- The volatile security situation persisted across the Anglophone regions, with continued attacks in the North West and a widespread lockdown imposed by non-state armed groups (NSAGs) starting in September to disrupt the upcoming presidential election.
- During the reporting period, UNFPA and partners supported 1,087 women with their first antenatal care (ANC1) visits and assisted 255 facility-based deliveries across the North West and South West regions.
- UNFPA also provided comprehensive support to all gender-based violence (GBV) survivors who sought care at UNFPA-supported health facilities. Among the reported cases, 33 per cent involved rape, and 22 per cent of survivors received post-exposure prophylaxis (PEP) within 72 hours of the incident.

3,369,000
Total people affected[1]

808,560
Women of reproductive age[2]

87,790
Estimated pregnant women[2]

367,000
People targeted w/ SRH services

594,000
People targeted w/ GBV programmes

[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.

Situation Overview

Humanitarian needs in Cameroon continue to be driven by ongoing insecurity and violence, displacement, flooding, and outbreaks. The context remains challenging, mirroring the situation reported in August.

In the Anglophone North West and South West (NWSW) regions, NSAGs violence continued, critically impacting September operations. A five-week separatist-imposed lockdown in the North-West and South-West — the longest since 2017 — severely restricted mobility and humanitarian access, disrupting SRH and GBV services just as schools reopened.

UNFPA Response

UNFPA remains committed to strengthening SRH services and preventing and responding to GBV by deploying medical personnel and volunteers, maintaining women and girls' safe spaces, delivering community information and education, and reinforcing multisectoral coordination to ensure an effective response to evolving needs.

During September, UNFPA and its implementing partners held community awareness sessions on SRH and GBV topics, including family planning, sexually transmitted infections, maternal health, protection and social cohesion. A total of 3,000 individuals were sensitized in advanced strategy or community settings across reporting facilities, with 2,390 women reached.

Sexual and reproductive health:

UNFPA implementing partners and humanitarian midwives improved access to maternal and prenatal care, helping to reduce the risk of maternal and neonatal morbidity and mortality. During September, 1,602 pregnant women received their first antenatal care visit, reflecting improved pregnancy monitoring, and supported 682 safe facility-based births. A total of 317 obstetric complications and 46 cases of neonatal asphyxia were successfully managed. Additionally, 460 mother-child pairs received postnatal care (PNC) within 72 hours of birth.

UNFPA also supported SRH services through both fixed health facilities and mobile clinics. Men and women were supported with family planning, with 288 new clients benefitting from information and modern contraceptive methods, and 303 existing clients received follow-up services. Furthermore, treated a total of 2,035 cases of sexually transmitted infections (STIs). To further encourage hospital deliveries, two integrated health centres in Zimado and Ouro Tarda received 353 Baby Boxes through the CERF project, assisting vulnerable women and girls with basic clothing and essential items for their newborns.

Gender-based violence:

GBV partners demonstrated strong commitment to prevention and response, including a safety audit in Kang Bamrombi that engaged 527 community members. Nearly 900 women and girls accessed psychosocial support and skills-building activities through 27 women- and girl-friendly spaces, which also offered income-generation opportunities and prepared for upcoming dignity-kit distributions. To strengthen survivor care, UNFPA trained humanitarian midwives on GBV case management and supplied health providers with post-rape kits. In August, approximately 26% of reported GBV cases involved rape; nearly half of these survivors received medical care within the critical 72-hour window, and all were referred for psychosocial support. On 11 September 2025, the Ministry of Women's Empowerment and the Family convened a workshop in Maroua to reinforce multisectoral

coordination for GBV survivors. A rapid needs assessment in Tourou further underscored the urgency of this work, revealing that women and girls face acute risks of rape and assault in the absence of any formal support system.

Results Snapshot

6,086
People reached with **SRH services**
97% female 3% male

30
Health facilities supported

2,966
People reached with **GBV prevention, mitigation and response** activities
72% female 18% male

27
Safe spaces for women and girls supported

Coordination Mechanisms

Gender-Based Violence: The GBV Area of Responsibility (AoR) held two coordination meetings during the reporting period — one at the national level in Yaoundé and another for the Far North in Maroua — while the Logone and Chari GBV working group convened its monthly session. Across these meetings, partners reviewed ongoing activities, emerging challenges, and the persistent shortage of GBV actors in key locations. To address these gaps, the group focused on identifying joint strategies to strengthen holistic service delivery and reinforce prevention efforts. In addition, 30 GBV AoR members in the Far North (including four men) received training in GBV case management. The sub-sector also contributed to two multisectoral assessments in Tourou, Maya Moskota, and Koza to inform the response to population displacement caused by armed conflict.

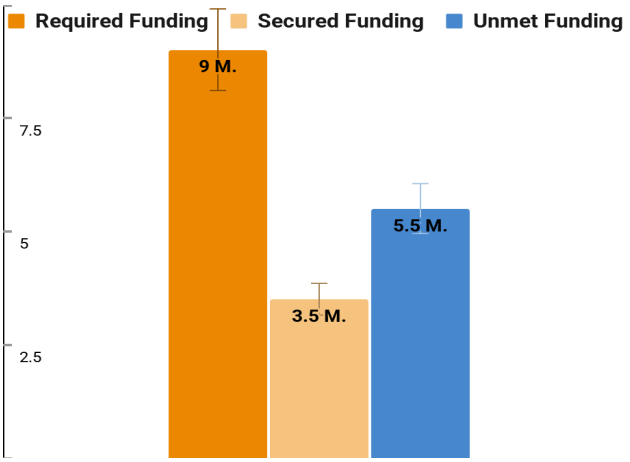
Sexual and Reproductive Health: The Sexual and Reproductive Health in Emergencies technical working groups in the Northwest and Southwest focused on strengthening coordination and improving the quality of SRH data. A standardized reporting template was introduced to harmonize monitoring of Minimum Initial Service Package (MISP) indicators and reinforce data-driven coordination and advocacy. Partners were also encouraged to share qualitative information on barriers to contraceptive use to better understand and address persistently low uptake. To safeguard supply continuity, all partners were instructed to report monthly consumption of post-rape kits, ensuring timely stock management across both regions.

Mental Health & Psychosocial Support (MHPSS): To strengthen the MHPSS response, UNFPA — as Technical Lead of the MHPSS Working Group — facilitated a training on MHPSS and the MISP, supported by WHO funding and organized with the Family Outreach Ministry Cameroon (FOMCAM). The training aimed to equip 40 civil society representatives in the North-West and South-West with the skills to integrate MHPSS and MISP components into humanitarian service delivery. The initiative increased participants' understanding of the MISP, reinforced collaboration among CSOs, and secured their commitment to providing coordinated, high-quality MHPSS services aligned with the MISP framework.

Funding Status

As of September 2025, UNFPA has only secured $3.5 million of the $9 million needed this year, leaving a critical 61% funding gap. This shortfall directly compromises the provision of essential SRH and GBV services, putting thousands of vulnerable women and girls in Cameroon at heightened risk.

We are grateful to our generous donors for their support, including DG-ECHO, the Government of Canada, UN-CERF, and contributors to the UNFPA Emergency Fund / Humanitarian Thematic Fund.



"A huge thank you to UNFPA! Their multi-faceted support has been crucial in restoring the dignity of women, girls, and GBV victims affected by the floods and security crises. This partnership truly makes a difference."

— Aïssa Doumara, Coordinator, ALVF"

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