



UNITED NATIONS POPULATION FUND

SITUATION REPORT

Cameroon: Conflict, Climate Disaster, and Displacement

1 - 31 August, 2025

Highlights

- In August, the situation in the North-West and South-West (NWSW) regions of Cameroon remained extremely volatile, with ongoing conflict and violence. Humanitarian access remains challenging in some areas due to the insecurity, lockdowns enforced by non-state armed groups (NSAGs), and poor road conditions.
- In August 2025, sexual and reproductive health (SRH) services remained in high demand across crisis-affected regions. More than 41,000 people were reached with SRH services, including family planning, antenatal care, and the management of obstetric complications.
- Gender-based violence (GBV) prevention and response activities reached more than 21,700 people, primarily women and girls, through community information and awareness sessions, safe spaces, psychosocial support, and income-generating initiatives for survivors. Over 400 youth volunteers were also deployed to promote peace and counter hate speech in their communities.



3,369,000

Total people affected¹



808,560

Women of reproductive age²



87,790

Estimated pregnant women²



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 rise due to ongoing insecurity and violence, flooding, epidemic outbreaks, and widespread displacement.

The upcoming presidential elections have led to increased tensions, with persistent clashes between government forces and NSAGs in the NWSW regions. NSAGs have imposed lockdowns in the area, which has restricted people's access to essential services, including reproductive healthcare and GBV services. Health workers are also facing heightened threats carrying out their work, such as the recent kidnapping of a midwife in the northwest region who was held captive for 13 days by a NSAG.

Floods and landslides in the Western and Far North regions of Cameroon have destroyed homes and crops, leading to displacement and food insecurity of affected populations. Due to the floodwaters in some areas, communities have been cut off from essential services, including healthcare, which increases the risk of maternal mortality for pregnant women who experience complications during labour.

These conflict and climate related crises have led to significant displacement in Cameroon, with approximately 970,000 people internally displaced. In addition, Cameroon is also hosting more than 400,000 refugees from neighbouring countries, particularly from the Central African Republic and Nigeria, of which 53 per cent are women and girls, with 12,365 identified as women at risk.³ Displacement exacerbates the vulnerability of women and girls to GBV, as well as increases the risk of unplanned pregnancies and complications due to reduced access to SRH services.

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 (WGSS), delivering community information and education, and reinforcing multisectoral coordination to ensure an effective response to evolving needs.

During August, UNFPA and its implementing partners held community awareness sessions on SRH and GBV topics, including family planning, maternal health, protection and social cohesion. A total of 19,771 people attended the sessions, which consisted of 13,145 women and 6,626 men, and included more than 100 people with disabilities.

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 August, 1,445 pregnant women received antenatal care (ANC), reflecting improved pregnancy monitoring, and supported 558 safe births, including 72 cases which had obstetric complications.

UNFPA supported SRH services through both fixed health facilities and mobile clinics. Men and women were supported with family planning, with 390 new users benefitting from information and modern contraceptive methods, and 263 people received syndromic management of sexually transmitted infections (STIs) thanks to Inter-Agency Reproductive Health (IARH) kits UNFPA provided to health facilities.

³ [UNHCR Cameroon Monthly Updates - Key Highlights \(August 2025\)](#).

Gender-based violence:

To improve treatment and ensure comprehensive care for survivors of sexual violence in crisis zones, UNFPA provided capacity building for humanitarian midwives in the management of GBV cases. UNFPA also equipped frontline health providers with post-rape kits and maintaining a monthly updated map to monitor their availability and prevent stockouts. Association de Lutte contre les Violences faites aux Femmes (ALVF) also organised an inter-agency training session in Kousseri on emergencies and GBV management, as well as a capacity-building workshop for 12 community workers in Maroua.

Approximately a quarter of the GBV cases in August (26%) involved rape, with almost half receiving medical treatment within 72 hours. All survivors of sexual violence who sought medical care were also referred for psychosocial support thanks to a well-defined referral system which facilitates collaboration between social workers and health facilities, guiding survivors through the care pathway.

Nearly 900 women and girls participated in psychosocial and skills transfer activities through 27 WGSS. The interventions also provided support to survivors through income-generating activities in the Far North region and prepared for the distribution of dignity kits in the NWSW regions.

A safety audit was conducted in the community of Kang Bamrombi, involving 527 people, 343 women and 184 men from the host community and IDPs. The results will be analysed and released in September.

Adolescents and Youth:

400 youth volunteers were trained on community engagement and conducted awareness-raising activities within communities to combat hate speech and prevent conflicts. A life skills training workshop was also delivered for 16 female youth in Bangourain, using innovative and integrated information, education, and communication (IEC) initiatives to promote social cohesion and peaceful coexistence.



Results Snapshot



41,041

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



30

Health facilities supported



21,782

People reached with **GBV prevention, mitigation and response activities**
72% female, 28% male



27

Safe spaces for women and girls supported

Coordination Mechanisms

Gender-Based Violence:

The GBV Area of Responsibility (AoR) supported five women-led organizations with grants for their GBV prevention and response activities. The GBV AoR has been strengthened in the North-West and South-West regions thanks to the recruitment of two dedicated staff members responsible for supporting coordination in the field within the framework of GIZ funding.

Sexual and Reproductive Health:

During August 2025, coordinated efforts significantly reinforced the monitoring of sexual and reproductive health in emergencies (SRHiE). The SRHiE Technical Working Group, supported by the Health Cluster, finalized the harmonization of indicators for the central monitoring matrix. Working sessions were also conducted to standardize data collection methods across Cameroon's three priority crisis zones. A key achievement was the integration of SRHiE issues into the ongoing preparation of the multi-sectoral needs assessment. To support this, enumerators from the North-West and South-West regions were trained from August 28-30.

Mental Health & Psychosocial Support (MHPSS):

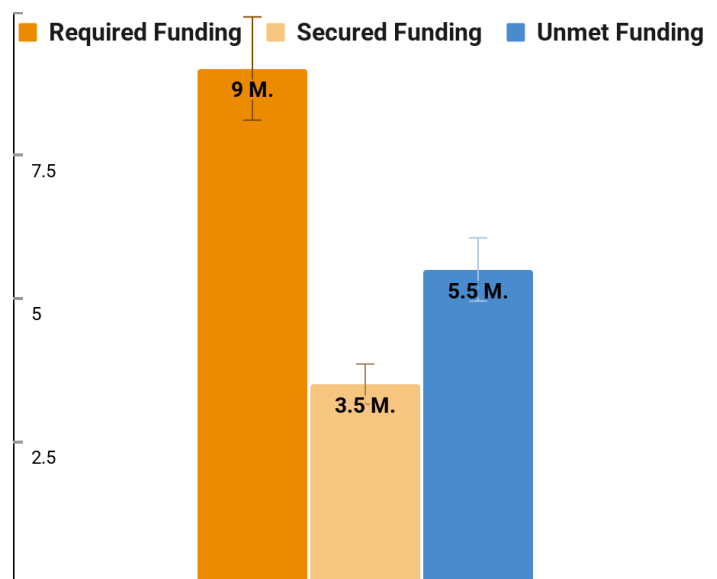
To address the profound psychosocial needs of communities who have experienced ongoing conflict and humanitarian crises, UNFPA, operating under the framework and as lead of the MHPSS Technical Working Group, facilitated and supported a vital capacity-building session on MHPSS, in collaboration with IOM. Health personnel from 25 local NGOs participated, increasing their knowledge and skills to deliver basic MHPSS services and effectively integrate GBV into their response efforts. This collaboration underscores UNFPA's commitment to strengthening local capacities and fostering a more holistic and community-centred approach to humanitarian response in the region.

Funding Status

As of August 2025, UNFPA's humanitarian operations in Cameroon continue to face a significant funding gap of 61%, with only US\$3.5 million raised against the US\$9 million required for the year.

This persistent shortfall severely compromises UNFPA's ability to provide crucial SRH and GBV services, leaving women and girls in Cameroon at heightened risk.

UNFPA extends its gratitude to its generous donors for their vital support, including DG-ECHO, the Government of Canada, UN-CERF, and the various contributors to the UNFPA Emergency Fund/Humanitarian Thematic Fund.



"The floods isolated my village, so a UNFPA team arrived by canoe to provide prenatal care and support. During my consultation, I learned I had only a few days before I'd deliver and was advised to go to the hospital. Accompanied by the caring midwives, I safely gave birth to a baby boy. I am profoundly grateful for their timely help."

- Habiba Hassan, patient supported with maternal healthcare through UNFPA's integrated mobile clinic services

Current Donors

- UNFPA Emergency Fund / Humanitarian Thematic Fund
- Central Emergency Response Fund (CERF)
- European Civil Protection and Humanitarian Aid Operations (ECHO)
- Global Affairs Canada
- Peace Building Funds (PBF)

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