



UNFPA

Ensuring rights and choices for all since 1969

Cameroon

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UNFPA Cameroon Achievements in 2019

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WHO WE ARE WHAT WE DO



UNFPA, the United Nations sexual and reproductive health and rights agency delivers a world where every pregnancy is wanted, every childbirth is safe and every young person's potential is fulfilled. Created in 1969, the Fund opened its Cameroon's Country Office the same year to support government's efforts to integrate population issues in the development policy. By 2030, within the contexts of the Sustainable Development Goals (SDGs), and the implementation of the International Conference on Population and Development (ICPD), UNFPA aims to :

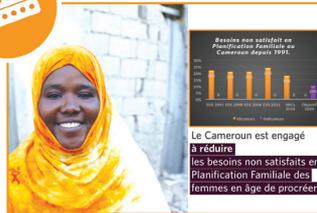
Reach increased availability and use of integrated sexual and reproductive health services, including family planning, maternal health and HIV that are gender responsive and meet human rights standards for quality of care and equity in access.

Our three transformative results are :



End

preventable maternal death



End

the unmet need for family planning



End

violence against women and girls and harmful practices



UNFPA Strategic Framework



Reproductive and maternal Health



Issues



A population of **23.6 million** with **2.4%** growth rate per year (2011) ¹



43.6% youth and adolescent (10-24 years) and **33%** children under 15 years ²



A high maternal mortality ratio **782** maternal deaths per **100,000** live births (2011) ³



Contraceptive prevalence rate: **14%** in 2011 to **16%** in 2016 ⁴

2018
↑
2011
40%
decrease in maternal mortality ratio

Actual ratio
467
maternal deaths per 100 000 live births ⁵

How we do it



Health personnel training and capacity building



Provision of medical and non-medical soft and hardware equipment to health facilities

Provision of patients' emergency logistic and transport solutions to health facilities



Provision of sexual and reproductive health kits in case of emergency

Setting up sexual reproductive health monitoring system



Campaign for free surgical threatment of women affected by obstetric fistula.



Enhanced advocacy, sensitization and resource mobilization

Achievements



180 health personnel trained in Emergency Obstetric and Neonatal Care

838 midwives trained

180 health personnel trained in Comprehensive Emergency Obstetric and Neonatal Care



50 health personnel trained in adolescent sexual and reproductive health service delivery

110 health facilities equipped to offer an integrated sexual and reproductive health service package



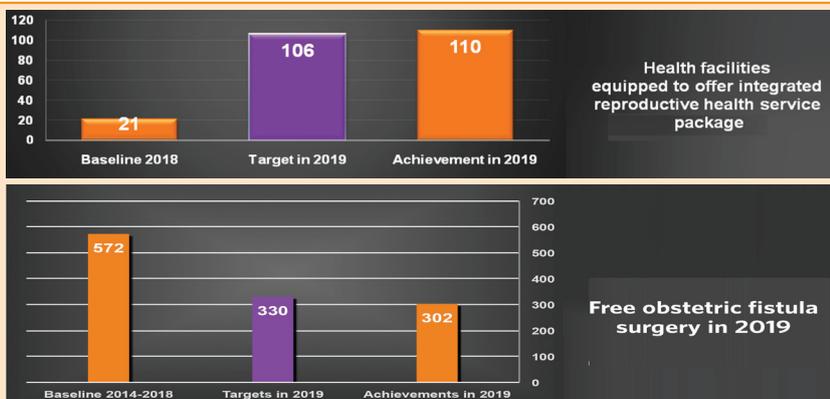
200 health personnel trained in Maternal Death Surveillance and Response

364,807 women had a safe delivery with the help of trained personnel



79 health personnel trained in obstetric fistula treatment

302 women offered free obstetric fistula surgery



SOURCES

- 1- Demographic and Health Survey (DHS) 2011
- 2- Demographic and Health Survey (DHS) 2011
- 3- Demographic and Health Survey (DHS) 2011
- 4- Multiple Indicator cluster Survey (MICS) 2017
- 5- Demographic and Health Survey (DHS) 2018



Family Planning



Issues



High total fertility rate: **5.1%** in 2011 to **4.9%** in 2014 ¹



Low contraceptive prevalence rate: **14%** in 2011 to **16%** in 2014 ²

High unmet need for modern contraceptive: **18%** in 2014 ³

How we do it

Enhanced training and capacity building in public health facilities and communities

Enhanced advocacy, information campaign through Medias, community, religious and youth leaders



Integrated family planning promotion and community-based distribution in the standard package of community health agents



Strengthening the national supply chain system in sexual and reproductive health including family planning commodities

Achievements



976,199 women are new users of modern contraceptive methods

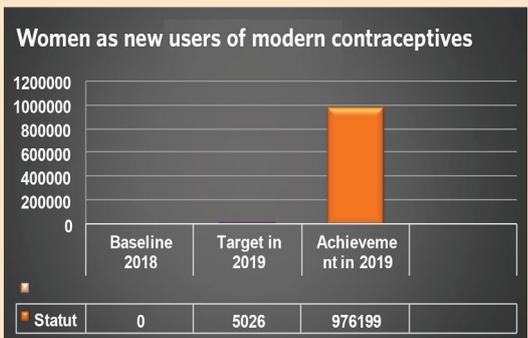
3,250 health facilities strengthened to offer subcutaneous injectable contraceptives at community level through community health workers

748 health personnel trained to administer family planning methods

2,206 community health agents trained to administer modern contraceptive methods



6,420 health facilities supplied with reproductive health and contraceptive commodities



SOURCES

- 1- Multiple Indicator cluster Survey (MICS) 2014
- 2- Demographic and Health Survey (DHS) 2011
- 3- Multiple Indicator cluster Survey (MICS) 2014



Gender Based Violence and harmful practice



Issues



Child marriage, stigma around Gender Based Violence (GBV) and rape are still prevalent.

36% of women married before 18 years (2011)



30 % of married women have reported physical or sexual violence (2011)



Low level of services delivery on GBV

How we do it



Establishment of Gender Based Violence (GBV) platforms and safe spaces for GBV survivors

Establishment of gender based violence information management system (GBV/IMS)



Provision of training and technical assistance in dispatching essential services kits in case of emergency to community based partner organizations

Provision of essential services kits for women and girls in case of emergency to community based partner organizations



Enhanced GBV advocacy, information campaign through Medias, community, religious and youth leaders

Achievements



7,406 GBV survivors benefited from psychosocial support and reference to GBV's specialized services providers

14 safe spaces established to provide GBV services

04 GBV coordination sub-clusters functional and chaired by UNFPA, in the South West (SW), North West (NW), and Far North Regions as well as at the national level.

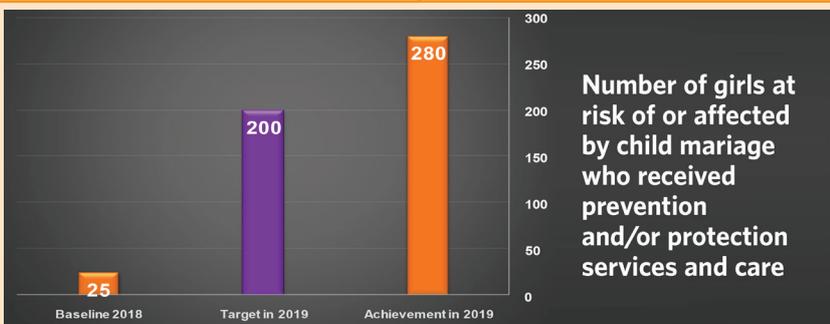
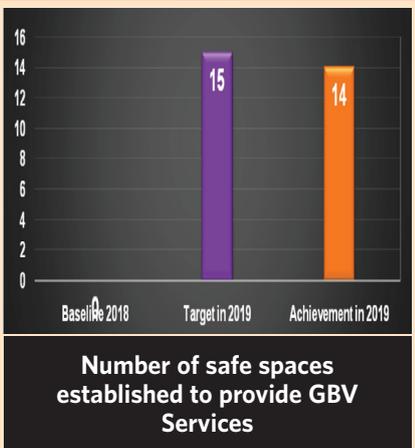
373 service providers and community agents capacitated in different areas of SRH and GBV

20,000 copies of referral pathways disseminated to communities in the NW/SW

166,166 persons (50,845 women, 23,022 girls, 81,185 men and 11,114 boys) sensitized on GBV and SRH in the NWSW and Far North regions

821 persons (280 women, 275 girls, 163 men and 103 boys) received Psychological First Aid

972 persons with disabilities supported with various GBV/SRH services.



SOURCES

1- Demographic and Health Survey (DHS) 2011



Youth potential



Issues



A population of **23.6** million with **2.4%** growth rate per year (2011)



43.6% youth and adolescent (10-24 years) and **33%** children under 15 years

How we do it



Enhanced advocacy and capacity-building for integration of youth issues including comprehensive sexual education and demographic dividend into national policies



Establishment and promotion of youth friendly spaces and youth sexual and reproductive health facilities



Empowerment of youth and youth organizations as drivers of development

Capacity-building of youth organizations for dialogue, conflict resolution and resilience

Achievements



67,594 adolescents and youth benefited from sensitized on thematics related to comprehensive sexuality education

13 new institutions strengthened to deliver and monitor comprehensive sexuality education

164 community leaders sensitized on comprehensive sexuality education.

33,997 adolescents and youth (15,921 girls and 18,076 boys) sensitized on the comprehensive sexuality education through U-Report



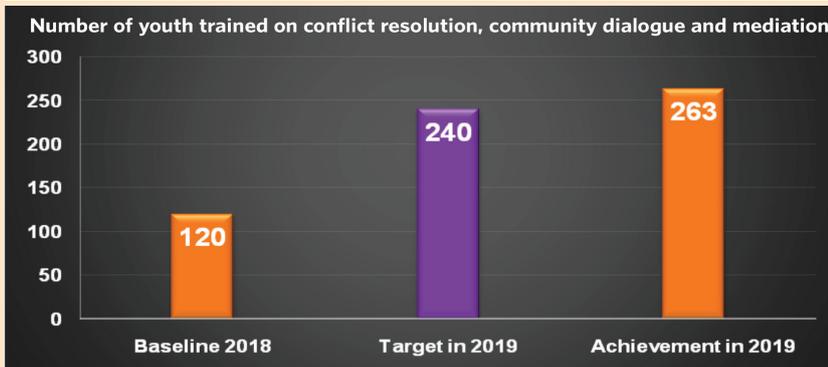
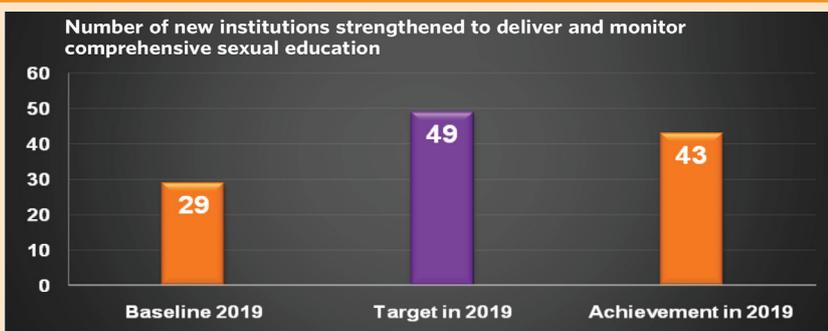
2,035 households sensitized on child marriage.

382 volunteering adolescents and youth trained on strengthening the fight against child marriage.



143 youth trained in conflict resolution, community dialogue and mediation.

300 adolescents and youth (160 girls and 140 boys) exposed to violent extremism in the Far North Region benefitted from psychosocial and economic reintegration assistance.



SOURCES

1- Demographic and Health Survey (DHS) 2011



Humanitarian Response



Issues



4.3 million Persons, in estimate, needed urgent humanitarian assistance in Cameroon in 2019.



82% increase in displacement in 2019 compared to 2018.



Renewed armed attacks have driven tens of thousands more Nigerians into Cameroon's Far-North region, which already hosts **138,000** refugees.

In North-West and South-West regions, worsening violence has uprooted **437,000** people and forced over **32,000** to seek refuge in Nigeria.



US\$**299** million were needed for the 2019 UN Humanitarian Response Plan to provide support to **2.3** million people.

How we do it



Ensure the specific needs of women in sexual and reproductive health are factored into Humanitarian response including border areas and communities of displacement

Delivery of sexual and reproductive health emergency services and kits



Provision of technical assistance, capacity building and training to services providers and other community based organizations offering direct assistance to survivors

Coordination of GBV information management system (GBV/IMS)



Provision of psychosocial and mental health assistance to survivors

Achievements



30 reproductive health kits (Block 1 and 2) positioned in health facilities to meet RH needs of **260,000** persons **3,000** mama kits distributed to visibly pregnant women

01 video tutorial on the use SRH kits in humanitarian settings produced and dispatched

16,445 community members reached with lifesaving messages and referral pathways for SRH and GBV services.

Coordination of GBV/IMS in the Far North, North- West and South West regions

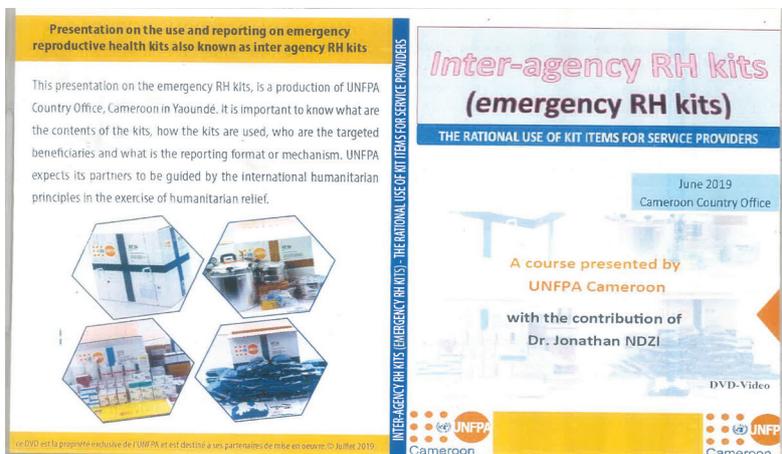
10,000 girls and women reached with cultural friendly dignity kits

2,000 economic recovery kits distributed to women and girls

257 cholera kits distributed

19,660 pieces of condoms distributed

250 internally displaced elderly persons received assistance in basic necessities



SOURCES

1- OCHA, Cameroon Humanitarian Response Plan 2019



Population and Data



Issues



Low availability of updated data

Low capacity for data generation and use



Low implementation of the demographic dividend roadmap

How we do it



Capacity-building of the national statistics and information system (INS, BUCREP, etc.).

Assistance to government in data generation, dissemination and use.



Enhanced advocacy for full implementation of ICPD Program of Action and the demographic dividend roadmap

Achievements



A survey, a study and a mapping conducted on reproductive health, youth and demographic dividend



02 policy briefs on youth and the demographic dividend produced.



02 studies on resilience conducted

01 facility survey conducted

Monitoring Report on the implementation of the 7th Country Program Document and the Sustainable Development Goals conducted.

The 4th General Census of Population and Housing in progress

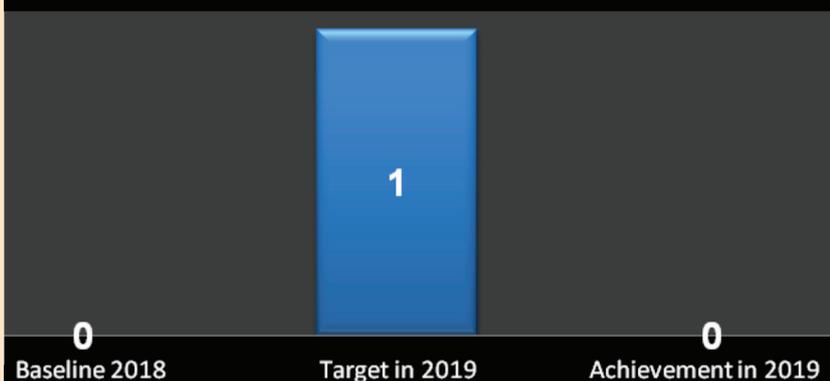
The 5th Demographic and Health Survey (2018) produced

Cameroon's official delegation attended the Nairobi Summit and made commitments on full implementation of the ICPD.

The 5th Demographic and Health Survey achieved



The 4th general population and inhabitant census not achieved



IN THE SPOTLIGHT IN 2020 - END FISTULA CAMPAIGN



FIRST LADY CHANTAL BIYA ENGAGES TO JOIN UNFPA'S CALL TO END OBSTETRIC FISTULA IN CAMEROON

An estimated **20,000 women** and girls suffer from obstetric fistula in Cameroon. **UNFPA** leads the **"End Fistula" campaign in Cameroon since 2003** and supports the Ministry of Public Health, communities, families, women and girls affected by this medical condition. On December 17th, 2018, the United Nations General Assembly adopted the Resolution A/RES/73/147, which calls to intensify actions taken to end obstetric fistula worldwide by 2028.

In compliance to that resolution, the Government of Cameroon and key partners including UNFPA have benefited from the support of the First Lady Chantal Biya to lead a year-long sensitization and resource mobilization campaign in 2020. The aim is to raise awareness and resources as means to accelerate the full implementation in Cameroon of the UN resolution adopted to relieve women and girls from the suffering of obstetric fistula.



SOLIDARITY CAMPAIGN TO END OBSTETRICAL FISTULA IN CAMEROON

3 steps in joining the campaign

- 1 Become a volunteering member of the national coalition against fistula and stay informed and committed
- 2 Participate to the national forum to end fistula
- 3 Donate financial and non-financial resources to help take care of thousands of affected women and girls in:

- o Repair surgery
- o Psychosocial assistance
- o Socio-economic reintegration

CONTACTS



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KEY PARTNERS

Government - NGOs - Civil society - Communities



DONORS



The Government of Cameroon



Bill & Melinda Gates Foundation



Central Emergency Response Fund (CERF)



Chantal Biya Foundation



European Union



French Embassy



Fondation ORANGE



Global Fund for AIDS, Tuberculosis and Malaria



Government of Japan



Islamic Development Bank



MTN Foundation



UN PeaceBuilding Fund



USAID



World Bank



World Food Program



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