CAMEROON Refugee influx from Nigeria

At least 35,000 people from Nigeria – the majority of whom are women, children, and the elderly – have sought refuge in Cameroon from repeated Boko Haram attacks after security forces left Rann town (Kala Balge Local Government Area, Borno state) on 27 January (ACF 31/01/2019; UN News 01/02/2019). Most of the population left with them, heading towards nearby Goura town, Far North region, Cameroon where they have settled in makeshift camps and are in need of shelter (EU 02/02/2019; CNBC Africa 04/02/2019). Rann was also home to a camp housing up to 80,000 IDPs displaced by Boko Haram's Islamist insurgency (UNHCR 22/01/2019; OCHA 23/01/2019; AI Jazeera 29/01/2019; The Star 05/02/2019). The refugees urgently need food, NFIs, water, shelter and medical assistance. There are protection concerns over refugees attempting to return to Rann to collect personal possessions (UN News 01/02/2019).

NEED FOR INTERNATIONAL ASSISTANCE



Anticipated scope and scale

Far North region covers an area of 34,263km². Most of the 35,000 refugees have fled to Goura town and **more refugees are expected to arrive** in the coming days. These new arrivals will add pressure to a region that already faces **food insecurity and disease outbreaks**, such as cholera.

Key priorities



35,000+ in need of food

35,000+ in need of shelter and NFIs

vulnerable groups in need of protection



Satellite imagery of Rann after Boko Haram attack (Amnesty International 01/02/2019)



Humanitarian constraints



Security in Far North region is extremely volatile due to Boko Haram attacks. Humanitarian access, particularly along the Nigerian border, remains difficult.

Limitations: information on the needs of Nigerian refugees in Cameroon as well as the situation concerning the 80,000 IDPs that were present in Rann before the Boko Haram attack is lacking.

Crisis impact

According to latest estimates, repeated Boko Haram attacks have led to at least 35,000 people from Nigeria seeking refuge in Cameroon after the Multinational Joint Task Force (MNJTF) withdrew from Rann town (Kala Balge LGA, Borno state), on 27 January (UN News 01/02/2019). Most of the population left with them, heading towards nearby Goura town, Far North region, Cameroon where they have settled in makeshift camps and are in need of shelter (EU 02/02/2019; CNBC Africa 04/02/2019). The 35,000 new refugees – the majority of whom are women, children, and the elderly – in Goura add to the 102,000 Nigerian refugees already in Cameroon (ACF 31/01/2019; ACF 04/02/2019). Rann was also home to a camp housing up to 80,000 IDPs displaced by Boko Haram's Islamist insurgency (UNHCR 22/01/2019; OCHA 23/01/2019; AI Jazeera 29/01/2019; The Star 05/02/2019). More refugees are therefore expected to arrive over the coming days.

This recent wave of displacement of people from Rann into Cameroon comes after at least 9,000 fled a Boko Haram attack on the town on 14 January (NRC 30/01/2019). However, two days after their arrival in Goura, the refugees were deported back to Nigeria by Cameroonian authorities (OCHA 21/01/2019; UNHCR 22/01/2019; NRC 30/01/2019). In order to facilitate the full return of all refugees to Nigeria, the MNJTF secured Rann then fled a few days later, without any official notice. At least 60 people were killed by Boko Haram a day after Rann was abandoned by the military (Amnesty International 01/02/2019). Afraid of another attack, the population of Rann massively fled back to Cameroon on 25th January and 2 days later on 27th January to Goura town, giving rise to the current crisis (The Guardian 02/02/2019). Rann, which has been attacked four times by Boko Haram since September 2018, has now been burned and deserted (EU 02/02/2019; ECHO 30/06/2019).

The newly arrived refugees in Goura urgently need food, NFIs, water, shelter and medical assistance. There are concerns over refugees who are attempting to return to Rann to collect any personal possessions not looted or burnt (UN News 01/02/2019).

Humanitarian organisations are already providing food, water, tents and hygiene kit and advocating with the local authorities to uphold refugees' right to asylum (OCHA 21/01/2019). Some humanitarian partners have enhanced and scaled-up their response to respond to the sudden influx of refugees, mostly in terms of pre-registration and access to water. However, the capacity of these organisations to respond is limited.

Displacement caused by the Boko Haram conflict continues to disturb access to basic services and livelihoods in Cameroon (ECHO 30/01/2019; ECHO 30/06/2019). However, by denying assistance and protection to those fleeing, needs are exacerbated and affected communities will continue to rely on humanitarian assistance (NRC 30/01/2019).

Food: Poor households in Far North region are expected to remain in IPC Phase 2 (Stressed) food security outcomes in January due to conflicts in neighbouring Nigeria and Central African Republic that have disrupted agricultural activities, as well as lower-than-average incomes. The situation could deteriorate to IPC Phase 3 (Crisis) by February due to declining crop production, reduced income and the lean season that lasts from February to May (FEWS NET 12/2018; FEWS NET 01/2019). This food security situation will impact the ability of the new refugee arrivals from Nigeria to access food (particularly for IDPs and refugees outside camps where humanitarian assistance coverage is low), as well as the local host communities (FEWS NET 12/2018).

Shelter and NFIs: Nigerian refugees are living in makeshift camps on the outskirts of villages and towns. Most refugees were unable to carry many belongings with them when they fled Rann and as much of the town has been destroyed they have no home to return to. The movement of the refugees within Cameroon complicates the provision of shelter and NFIs.

Health: 4% of under-five refugee children assessed in Goura are suffering from severe acute malnutrition (more than double WHO's emergency threshold) and require immediate medical care. Nearly 8% of children assessed are moderately acutely malnourished (ACF 31/01/2019). Children under five years old are being treated for malnutrition, malaria, diarrhoea and acute respiratory infections (ACF 04/02/2019).

Mental health is also a concern as many refugees are in a state of shock and distressed by what they experienced in Rann (MSF 17/01/2019).

Some of the refugees are also injured (MSF 16/01/2019).

Protection: Most of the refugee population arriving in Goura are women, the elderly and children (ACF 04/02/2019). The inadequate living conditions of the makeshift camps means they are at risk of exploitation, sexual harassment and violence.

Many refugees are putting themselves at risk by returning to Rann on foot to collect personal possessions which were not looted or burnt during the Boko Haram attack (CNBC Africa 04/02/2019).

WASH: In Far North region over 85% of the local population have no access to adequate WASH facilities (OCHA 13/03/2018). As existing WASH facilities are limited WASH needs are expected to be high among the Nigerian refugee population living in makeshift camps on the outskirts of villages and towns.

Vulnerable groups affected

The majority of the refugees are women (many of whom are breastfeeding and pregnant), children, and the elderly (MSF 17/01/2019; ACF 04/02/2019).

Many of the refugees have been displaced multiple times and are therefore particularly vulnerable.

Humanitarian and operational constraints

Security in Far North region is extremely volatile due to Boko Haram attacks on civilians and confrontations between the army and insurgents. Humanitarian access, particularly along the Nigerian border remains difficult (UNHCR 26/01/2018). In the recent attacks on Rann town humanitarian organisations' buildings were burned down by Boko Haram (The Guardian 17/01/2019). Furthermore, the continual movement of refugees within Cameroon in response to the threat of attacks complicates meeting their needs.

Aggravating factors

Cholera

915 cholera cases have been reported in the North and Far North regions between July and December 2018 with confirmed cases in Goura (Cameroon Web 16/07/2019; Ministry of Health 02/01/2019). The outbreak likely stems from population movements originating in neighbouring Adamawa, Borno, and Yobe states in Nigeria. Poor living conditions in the refugee camps, such as open defecation in rivers, increase the risk of cholera spreading among refugees and the host population.

Insecurity

The Boko Haram insurgency spilled over into Far North region from neighbouring Borno state in Nigeria in 2014. After Nigeria, Cameroon is the second most-affected country by the violence and insecurity linked to Boko Haram in Lake Chad basin (All Africa 26/02/2018; Amnesty International 13/04/2015). Insecurity and armed attacks persist in Far North region, where some 233,000 people are displaced and around 100,000 Nigerian refugees are hosted (OCHA 28/01/2019). This insecure environment may trigger further displacements from Nigeria and threaten host and non-host populations in Cameroon close to the Nigerian border.

Contextual information

Drivers of the current conflict

Since 2014, the conflict between Boko Haram and the Nigerian Government has spilled over into neighbouring countries, including Cameroon. From November 2018, there has been a steep surge in displacement in northeast Nigeria, triggered by a spike in attacks. More than 100,000 people have been forced to flee, many for the second time. This has created significant humanitarian needs and stretched the capacity of already congested camps and sites (NRC 30/01/2019).

Rann town, in northern Borno state, has been repeatedly attacked by Boko Haram (AFP 30/01/2019). The most recent movement of refugees followed the departure of Cameroonian forces as part of the MNJTF who had moved to secure the city, following an attack by Boko Haram on Rann on Jan. 14 (Japan News, 30/1/2019). Nigerian soldiers had been overrun by the initial attack on Jan. 14, and the Nigerian military had abandoned Rann again after the MNJTF left because they did not have enough men, equipment or weapons to defend it. Refugees reported that Boko Haram had promised to return to the city (Japan News, 30/1/2019). The refugees subsequently left Rann following the recent withdrawal of the MNJTF (UN News 01/02/2019).

Past displacement

The 35,000 new refugees who reached Goura join 102,000 Nigerian refugees (98% of whom are in rural areas) mainly from Borno state who were already present in Cameroon having fled conflict (ACF 31/01/2019; Info Migrants 05/02/2019). Most refugees from Nigeria live in Minawao camp, Far North region and their primary needs are protection, WASH, and livelihood support (UNHCR 31/07/2018; ECHO 12/11/2018; ACAPS 05/02/2019).

Tripartite agreement

In 2017, UNHCR, Nigeria and Cameroon signed a tripartite agreement, committing them to protect and assist Nigerian refugees until conditions improved and they could be assisted to return home in safety and dignity (UNHCR 22/01/2019; NRC 30/01/2019). However, Nigerian refugees have been denied entry and forcibly returned from Cameroon. In mid-January Cameroonian authorities forcibly returned some 9,000 Nigerian refugees who fled across the border earlier in the week in search of safety from militant attacks (VOA 19/01/2019). The NRC have called this development "a breach of international and regional agreements" including the Tripartite Agreement signed on March 2017, which guarantees the protection and human rights of forcibly displaced persons (European Council on Refugees and Exiles 25/01/2019).

Key characteristics

- Demographic profile: 3,111,792 (Far North region population) (World Bank 2018)
- Poverty: 39% of people live in poverty (country) (WFP 01/2019)
- Health statistics: infant mortality rate 52.8/1,000; under-5 mortality rate 79.7/1,000 (country) (UNDP 2018)
- WASH statistics: population using basic sanitation services 46%; population using limited sanitation services 15%; population using unimproved sanitation services 33%; population practicing open defecation 6% (country) (UNICEF 2017)
- Literacy levels: 80% (15-24 years) (country) (UNICEF 2017)

Response capacity

The Cameroonian HRP was one of the least funded HRPs in 2018 (less than 40%) (OCHA 01/02/2018). The "Anglophone crisis" has further stretched the humanitarian response system within the country.

The UN and INGOs have responded to the sudden influx into Goura town by providing basic services in what is now a makeshift refugee settlement. Some 13,000 refugees have received food rations distributed by WFP and each registered refugee is getting six litres of clean water a day, well below the recommended 15 litre minimum (UN News 01/02/2019).

Humanitarian organisations are providing food, water, tents and hygiene kits and advocating with the local authorities to uphold refugees' right to asylum as refugees have previously been pushed back (OCHA 21/01/2019). Some humanitarian organisations have enhanced and scaled-up their response to respond to the sudden refugee influx; however, their capacity of these organisations to respond is limited (ECHO 30/01/2019; ECHO 30/06/2019).

ACF have two mobile clinics to diagnose and treat children who are malnourished and provide basic healthcare assistance (Info Migrants 05/02/2019). MSF is prepared to help 15,000 people with food, water and medicine (The Guardian 17/01/2019).

More widely, the humanitarian community recently launched a plan to assist 2.5 million people displaced across the Lake Chad Basin (NRC 30/01/2019).

Information gaps and needs

Information on the sectoral needs of Nigerian refugees in Cameroon is lacking. An accurate multi-sector assessment of humanitarian needs is required.

The current situation concerning the 80,000 IDPs that were present in Rann before the Boko Haram attacks is also unclear. This group is of concern.

Lessons learned

Local communities have been heavily impacted by the refugee influx as they are hosting part of the refugees. This influx has also put under a lot of pressure the existing infrastructures and limited natural resources. The quick relocation of refugees from vulnerable host communities, entry points and temporary shelters, combined with expanded camp capacity is therefore a priority (ACAPS 01/06/2015).

Given that many of the refugees are children, provision of educational services is critical. Children and young people who have been deprived of education are more vulnerable to Boko Haram recruitment. The interruption of educational services may also increase the risk of sexual violence and forced marriage for girls (Save the Children 01/01/2013).

Satellite imagery of Rann after Boko Haram attack

