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Emergency appeal operation update

Cameroon: Population Movement

 International Federation
of Red Cross and Red Crescent Societies

Emergency appeal n° MDRCM015
GLIDE n° OT-2013-000102-CMR
12-months summary update
5 December, 2014

Period covered by this Ops Update: September 2013 to August 2014. This update represents a 12-month summary of the operation (cumulative narrative and financial).

Appeal target (current): CHF 642,579

Appeal coverage: 66%; [click here to go directly to the donor response report](#), [here to view the interim financial report](#) or [here to link to contact details](#) >

Appeal history:

- The [Emergency Appeal](#) was initially launched on 3 September 2013 to assist some 6,500 beneficiaries (1,500 families) for six months: some 5,000 Nigerian refugees (1,000 families) in the Far North Region of Cameroon, and 1,500 refugees (500 families) from the Central African Republic (CAR) in the East Region of Cameroon.
- Disaster Relief Emergency Fund (DREF): CHF 65,479 was allocated as a start-up loan for initial activities.
- [Operations update 1](#) was published on 30 September 2013 while the [Operations update 2](#) was published on 31 October 2013 and revising the objectives of the operation to focus solely on CAR refugees in the East Region of Cameroon.
- A [Revised Emergency Appeal](#) issued on 17 December 2013 reflected discussions with partners and the resulting activities to be implemented. It intended to provide assistance to 3,200 CAR refugees (anticipating new arrivals) and some 1,000 Cameroonian host families. It focused on providing semi-permanent shelter, resulting in an increase in the budget from CHF 456,541 to CHF 642,579. The timeframe was extended for three months and the operation was expected to end on 31 May 2014.
- A [six-month operation update](#) report was issued on 2 June 2014 to report on progress of the operation and was issued based on massive CAR refugee arrivals in the eastern part of Cameroon, since the beginning of February 2014. Coordination meetings with UNHCR led to a revision of the Emergency Appeal Plan of Action in order to assist up to 26,600 refugees on 4 refugee sites (Guiwa-Yangamo, Mbilé, Lolo and Gado) by providing semi-permanent shelters, emergency shelters, solar lamps, hygiene kits, latrines, hygiene promotion, Community-based health and first-aid (CBHFA) program, psychological support, restoration of family links (RFL) and support to unaccompanied children. The timeframe was further extended by 6 months until 30 November 2014.
- This 12-month update captures ground covered during the first 12 months of the operation and highlights an increase in the number of refugees: 812 in Guiwa Yangamo, 10,471 in Lolo, 9,491 in Mbilé, 18,783 in Gado making a total of 39, 557, according to UNHCR figures. Consequently the operation timeframe is extended by 1 month to 31 December, 2014 to allow for the finalisation of the pending activities as well as closure of the operation.



Semi-permanent shelter constructed by the Cameroon Red Cross, at the Guiwa refugee site (East Region of Cameroon). PHOTO/ IFRC

Summary: A monitoring mission of the response operation was led by the IFRC Central Africa Regional Programmes Coordinator to assess the situation in the East Region of Cameroon between 28 and 31 July in order to better understand the changing and ever-increasing needs of the refugees.

Through the operation the following activities have been done; reception, registration and guidance of new arrivals from entry points to temporary hosting sites, improved hygiene through provision of hygiene kits to 300 refugee families at Guiwa, and strengthened coordination of the intervention in 4 camps in the Lom , Djerem and Kadéï Divisions. A total of 102 semi-temporary shelters for refugees in Guiwa-Yangamo have been constructed.

In recent months, the situation has evolved and as of 7 November, 2014, the number of newcomers verified and pre-registered by UNHCR stood at 113,830, while those checked and verified by local authorities stood at 104,766. A total of 36,347 people have been transferred to installation sites including 15,850 people in the Adamawa Region and 39,541 in the East Region.

Table 1: Sites chosen by UNHCR, in collaboration with the authorities

Sites	Carrying capacity	Already transferred	Areas of intervention of IFRC/CRC
BORGOP (Adamawa Region)	6,000	11,890	Relief and distribution Communication and education services
NGAM (Adamawa Region)	3,500	3,960	Relief and distribution Communication and education services
LOLO (East Region)	10,000	10,471	Camp management Shelter construction Relief and distribution Health and care Communication and education services
MBILE(East Region)	10,000	9,491	Camp management Shelter construction Relief and distribution Health and care Communication and education services
MBORGUENE (East Region)	2,500	2,111	Camp management Shelter construction Relief and distribution Health and care Communication and education services
GADO (East Region)	8,000	18,783	Camp management Shelter construction Relief and distribution Health and care Communication and education services
TOTAL	40,000	54,595	

N.B: the 2,111 refugees at the Mborguené site have been moved to the Gado site. This figure is included in that of Gado

The situation

The last emergency appeal revision anticipated the new arrival of CAR refugees because of the deteriorating situation in the country. Unfortunately, since 5 December 2013, extreme violence has been occurring in Bangui and in the rest of the country, forcing thousands of CAR citizens to continue leaving their homes. In Bangui, more than 400,000 people have been displaced to approximately 50 sites across the city. In the countryside, villages have been destroyed and houses burnt, forcing families to hide in the bush or to flee. The continued violence and unstable situation is expected to lead to an even larger population movement to neighbouring countries, including Cameroon.

A mission led by IFRC Central Africa Regional Programmes Coordinator assessed the situation in the East Region of Cameroon, from 28 to 31 July, together with the two RDRT members deployed as part of this operation

in order to revise planned activities and meet the ever-increasing needs of the refugees.

Through the operation the following activities have been done; reception, registration and guidance of new arrivals from entry points to temporary hosting sites, improved hygiene through provision of hygiene kits to 300 refugee families at Guiwa, and strengthened coordination of the intervention in 4 camps in the Lom , Djerem and Kadéï Divisions. A total of 102 semi-temporary shelters for refugees in Guiwa-Yangamo have been constructed.

As of 7 November 2014, the number of newcomers verified and pre-registered by UNHCR stood at 113, 830, while that checked and verified by local authorities stood at 104,766. A total of 36,347 people have been transferred to installation sites including 15,850 people in the Adamawa Region and 39,541 in the East Region.

Table 2: Number of refugees in each targeted region

Site	Old refugees since 2004	New arrivals between March and November 2013	New arrivals in December 2013	New arrivals since January 2014	Total
East	58'071	1,254	0	82,355	141,680
Adamawa	38'967		463	27,546	66,976
Total	97'038	1,254	463	109,901	208,656

Source: UNHCR Cameroon, 7 November 2014

*note: urban refugees (Yaoundé and Douala) totalling to about 15,320 people are not included here.

Coordination and partnerships

The IFRC is working very closely with UNHCR and the IFRC Regional Program Coordinator held meetings with UNHCR Head of Office while in Bertoua between 15 and 23 January 2014. In September and October 2014, IFRC Regional Operations Coordinator visited Bertoua to assess progress of the operation and once again held a meeting with UNHCR Head of Office and Head of Programs in order to revise planned activities to respond to the needs of new refugees targeted to be relocated to Lolo and Gado /Mborguene sites and to continue assisting older ones living on Guiwa-Yangamo and Betare-Oya sites.

Two Coordination meetings took place between ECHO and IFRC Regional Operations Coordinator in Yaoundé and in Bertoua on 9 and 12 February, in order to discuss upcoming IFRC strategy to respond to new refugee urgent needs in the East Region of Cameroon.

So far, UNHCR has provided essential drugs, medical equipment and material to Guiwa-Yangamo site infirmary. This has improved working conditions in the first-aid posts and the health conditions of refugees in the camp. A health centre financed by UNHCR is being constructed by IRD (International Relief and Development), near the Guiwa-Yangamo site and medical equipment is provided by African Humanitarian Association (AHA). Medical transportation by ambulance is done with two Cameroon Red Cross (CRC) ambulances (financed by UNHCR).

IRD has distributed farm tools and UNHCR distributed basic non-food items to beneficiaries in Guiwa-Yagamo and Betare-Oya in the form of sleeping mats, blankets, jerry cans, buckets, soap, under wears, and hygiene kits to women of childbearing age, clothes, and kitchen sets. Following the new arrival of refugees, IRD is rehabilitating wells and building latrines on Lolo relocation sites. In Mborguene/Gado, MSF (*Médecins sans frontières*) will be in charge of WASH activities for 1 month after which, IRD will take over.

UNHCR provided funds to IRD for the construction of 125 family latrines. IRD and *Première Urgence* also dug three wells and installed manual water pumps on Guiwa site.

The CRC have constructed 102 semi-permanent shelters, fabricated 78 slabs for family latrines and dug 54 pits for these latrines, constructed 2 boreholes in Guiwa, including 1 in the community, and distributed and helped to hang up 250 insecticidal nets in each household. Training n distribution techniques and in the correct use of mosquito nets has been conducted, while 12 volunteers have been trained in CBHFA. Awareness is also being raised in hygiene, sanitation, and access to primary health care is also ensured.

UNHCR intended to implement income-generating activities for beneficiaries by the end of 2013. Unfortunately, the poor security situation delayed this project. However, before the deterioration of the situation, IRD had already started small-scale cultivation aimed at providing vegetables for beneficiaries. These vegetables improve the diet of beneficiaries and revenue could also accrue from their sales.

So far, the World Food Program (WFP), through the Cameroon Red Cross, has been providing food items (rice, oil, yellow peas, salt and corn) to 1,600 beneficiaries on a monthly basis. A distribution session took place in December, providing food for 2 months. Another distribution took place in mid-February. Distributions are held on a monthly basis by CRC volunteers through a bilateral agreement between UNHCR and IFRC for the new refugees. However, it should be noted that food distribution that was suspended in June 2014, resumed in November 2014. This took into account the 812 beneficiaries resident in Guiwa, whom UNHCR had abandoned because they held some of their staff hostage, and in collaboration with WFP, food supply to the site was suspended in June 2014. In addition, UNHCR gave the Guiwa refugees only ration and not ACF cards in order to restrict their movement.

The following NFIs were distributed: sleeping mats, blankets, kitchen sets, jerry cans, soaps and buckets). UNFPA will also provide hygiene kits for women of childbearing age. In complement to these NFIs, and as already planned in the emergency appeal, hygiene kits were distributed to beneficiaries

In terms of health, AHA (Africa Humanitarian Action) was designated by UNHCR to cover needs on Lolo site. Regarding Mborguene, MSF will be running a health centre on site for a maximum of 6 months. Therefore, no additional needs are requested by UNHCR in terms of health. IFRC/CRC continues to transfer patients with 2 ambulances included in the UNHCR/IFRC agreement.

Besides the emergency operation, CRC continues to implement the following regular activities for “old” refugees: distribution of food and non-food items, hygiene promotion, health education and care, education and community services.

A project financed by UNHCR and implemented by IFRC/CRC will also respond to new refugee needs. Planned activities are to screen new arrivals and refer beneficiaries if needed to appropriate health structures in ambulances. The 2100 refugees on the Mborguene site will be transferred to Gado Badzere once shelters are built. Food and NFIs will be provided to them upon arrival in relocation sites. Also, most vulnerable people will receive specific help.

While implementing activities, synergies will be found between UNHCR project and this emergency appeal, both implemented by IFRC/CRC.

The Federation and the national society took part in various meetings organized within the context of this operation by the Government and the United Nations system. Such was also the case with the meeting organized by the Ministry of External Relations, in which the IFRC and ICRC were involved, and two others respectively organized by the Department of Civil Protection and the Ministry of Territorial Administration following a decree of the President of the Republic to set up an inter-ministerial ad hoc committee for the management of these refugees. The meeting organized by the Coordinator of the United Nations system in Cameroon saw the participation of other members of the movement such as the ICRC and the French Red Cross.

National Society Capacity Building:

The Cameroon Red Cross is present throughout the territory with its 58 divisional committees, and a volunteer base estimated at 40,000, of which up to 10,000 are trained first-aiders.

At the national headquarters there is an operational management structure with five technical departments. The CRC has a competent National Disaster Response Team (NDRT). It is important for this team to be strengthened through the training of new members who will be able to provide support on the ground. Also, since new entry points have been detected in border areas that are not really covered by the CRC, it is imperative not only to support the national society in the creation of local committees in these different localities, but also to train newly recruited volunteers. This is particularly the case with committees in the town of Yokadouma and its surroundings. This will also help put in place community disaster management teams and provide them with tools for an effective response to these recurrent situations.

The Cameroon Red Cross has been involved from the beginning in the support of refugees in Betare-Oya and in Guiwa-Yangamo. To date, Cameroon Red Cross volunteers are working at all entry points; about 20, throughout the operation area. Seven volunteers trained in November are involved in psychosocial support (PSP)/ restoration of family links (RFL)/unaccompanied children activity. With the arrival of new refugees, it is imperative to train

more volunteers. This activity is taking place in the camps (Gado-Badzere/Mborguene, Guiwa, Borgop, Timangolo, Lolo and Mbilé).

With support from the Swiss Red Cross, a workshop was also held with 20 volunteers to train them in shelter construction in the North and Far North Regions, in response to floods. A national disaster response team member trained during this workshop has been deployed in the operation zone to support the team in the East Region in emergency shelter construction

Red Cross and Red Crescent action

Overview

Despite the reduction in the rate of entry of refugees, CRC volunteers continue to register new refugees who arrived in Cameroon since the beginning of February 2014. They also screen beneficiaries in order to refer the sick or injured to appropriate health structures. The IFRC and CRC ambulances have also brought in a health team to provide first-aid to refugees and refer the critically sick to hospitals.

Discussions took place with the ICRC Regional Office in Cameroon as these refugees come from a country where ICRC is implementing, together with the CAR Red Cross, activities for populations affected by the conflict. With the arrival of new refugees from CAR, these activities will continue on Lolo and Gado/Mborguene sites. It will be important to continue to work closely with ICRC in order to create a synergy by using the same volunteers to conduct psychological support and the restoration of family links. In collaboration with the UNHCR, support will also be provided to unaccompanied children. The merging of these activities will strengthen collaboration and be a logical link between IFRC, ICRC Regional Representation, and ICRC Country Office in CAR, UNHCR and National Societies in both countries. Finally, this approach will be cost effective.

An RDRT member was deployed in Bertoua for 3 months in order to implement activities. An experienced staff member from the CRC (NDRT member) was identified early February and has been deployed to Bertoua to continue the implementation of activities in two sites: Lolo and Gado, especially in the area of shelter and camp management. This person will work together with a disaster management staff of the CRC. Additionally, a national Operation Manager has been deployed on the field to manage the two operations (regular and emergency projects). Furthermore, once the appeal is sufficiently funded, the IFRC would deploy an operation manager to handle the emergency component only

A project financed by UNHCR and implemented by IFRC/CRC will also respond to new refugee needs. Planned activities are to screen new arrivals and refer them, if needed, to appropriate health structures with ambulances. The 2100 refugees have been transferred from the Mborguene site to Gado Badzere, following the construction of shelter.

Progress towards outcomes

Emergency shelter and non-food items	
Outcome 1: Meet emergency shelter needs of initial 145 refugee families in Betare-Oya and Guiwa-Yangamo villages.	
Outputs (expected results)	Activities planned
Provide emergency shelter materials and support to 145 families.	<ul style="list-style-type: none"> • Train 40 CRC volunteers in distribution and construction of emergency shelters. • Distribute materials for construction of 145 emergency shelters according to camp standards. • Monitor distribution and progress on construction of emergency shelters.
Outcome 2: Improved living conditions of 3,200 CAR refugees in Bétaré-Oya and Guiwa-Yangamo villages through the provision of semi-temporary shelters.	
Outputs (expected results)	Activities planned
Living, hygiene and security conditions are improved through the distribution of	<ul style="list-style-type: none"> • Train 40 CRC volunteers in the construction of semi-temporary shelter to ensure knowledge transfer to beneficiaries. • Train/retrain 15 volunteers in NFI distribution techniques.

NFIs to 1,000 families.	<ul style="list-style-type: none"> • Train refugees in the construction of temporary-shelter. • Prepare a list of beneficiaries. • Recruit builders. • Recruit supervisors (1 supervisor for 4 teams). • Set up construction teams made of 5 persons (2 refugees, 2CRC volunteers, 1 Mason). • Provide 10 first aid kits to construction teams. • Progressively increase the construction speed by increasing the number of construction teams to a maximum of 20. • Procurement and transport of material for semi-temporary shelters • Build 400 20m² and 300 32m² semi-temporary shelters. • Procure and distribute 1,000 solar lamps (1 per 20m² shelter and 2 per 32m² shelters). • Monitor and supervise the construction of semi-temporary shelters. • Report on progress of activities, problems encountered and lesson learnt.
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Progress: A total of 102 semi-permanent shelters have been constructed: at Guiwa 2 (48) and 3 (54) refugee hosting site. All of these shelters are already occupied by the most vulnerable refugees identified at the sites. The CRC has already constructed 102 shelters, 78 slabs for family latrines and dug 54 pits, constructed 2 boreholes in Guiwa, including one for the host community. The 100 solar lamps provided to refugees at Guiwa are no longer in good shape because they were of poor quality and during their transfer from Nandoungue to Guiwa, it was planned that 2 lamps will be provided for 32 metres square shelters and 1 lamp for 20 metres square shelters. Thus, the need lighting, as it was planned that after the construction of shelters, solar lamps will be provided.

Challenges: The plan to build shelters at the Guiwa site has been halted due to insecurity, harsh climatic conditions that do not allow mud bricks to dry on time, the unavailability of building materials in the localities, and the brick fabrication site allotted by the local authority is far off from the construction site. However, mud brick fabrication sites have to be increased in order to accelerate shelter construction. The unfortunate insecurity situation at the Guiwa sites delayed construction works, whereas, this was the most appropriate period for shelter construction.

Water, Sanitation and Hygiene Promotion

Outcome: Improved access to safe water, adequate sanitation and improved hygiene for 3,200 refugees and some 1,000 host families in Bétaré-Oya and in Guiwa-Yangamo.	
Outputs (expected results)	Activities planned
Community managed water sources giving access to safe water is provided refugees and host in Guiwa-Yangamo health centre.	<ul style="list-style-type: none"> • Dig one well in Guiwa-Yangamo Health Centre. • Install manual water pumps and taps and provide necessary user training. • Provide required material for repair of manual pumps in the future. • Monitor, evaluate and report on progress of this activity.
100 refugee families (500 beneficiaries) and 30 host community families (150 persons) have access to family latrines and the risk of hygiene-related illnesses is reduced.	<ul style="list-style-type: none"> • Train 15 volunteers in construction of family latrines and sensitize beneficiaries on their use. • Dig 100 family latrines in Guiwa-Yangamo and Bétaré-Oya. • Dig 30 family latrines for host communities • Sensitize beneficiaries and host communities on the use of latrines. • Monitor, evaluate and report on progress of activities.
Access to basic hygiene items for 3,200 refugees.	<ul style="list-style-type: none"> • Design hygiene kit based on needs assessment and discussions with beneficiaries. • Procure and distribute 3,200 hygiene kits consisting of soap, toothbrush, towels, razors and other items (accompanied by the hygiene promotion activities delivered by CRC outside this appeal). • Monitor, evaluate and report on distribution activities and usage of relief items.
Improved hygiene practices of 3,200 refugees and 5,000 host community beneficiaries.	<ul style="list-style-type: none"> • Train 20 volunteers and 20 community members in hygiene promotion. • Arrange visits to the camp and host community twice a week.

	<ul style="list-style-type: none"> • Establish camp hygiene promotion committee / focal points. • Monitor and report on activities.
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Progress: A borehole has been built at the Guiwa-Yangomo health centre by IRD. The borehole at Guiwa 3 camp is not functional and therefore, the borehole planned for the health centre by the Cameroon Red Cross will be built at the Guiwa 3 camp to serve the community. Volunteer training in hygiene promotion will be carried out in December. No latrine has been constructed so far, whereas the need is still urgent. However, they will be progressively built as the semi-permanent shelters are constructed. Hygiene kits have been distributed at the Guiwa and Betare-Oya.

Challenges: There are inadequate sanitation facilities as up to 50 community latrines are needed in Ndokayo, while a borehole at the Ndokayo Integrated Health Centre and 2 in the community will be of great help to the host community.

Emergency health and care	
Outcome: Ensure that immediate health risks on the refugee population are reduced for 3,200 refugees and 5,000 host community beneficiaries in Zembe Borongo, Bétaré-Oya, Guiwa Yangamo and Mandjou.	
Outputs (expected results)	Activities planned
Ensure that beneficiary population is reached with health promotion activities, community disease prevention activities.	<ul style="list-style-type: none"> • Train/Refresh 12 RC volunteers on CBHFA and ECV (3 per camp). • Undertake new refugees screening and orientation if needed in Garoua-Boulai. • Undertake health promotion and disease prevention activities among refugee population in Bétaré-Oya and GuiwaYangamo. • Participate in the exchange of health data and surveillance information with other stakeholders in the field. • Work in close collaboration with other health technicians in the field.

Progress: The training of volunteers in CBHFA and VCA has not yet taken place, but will be done as soon as possible, considering the urgent need on the ground. New refugees continue to be received and guided at various entry points. Health promotion and disease prevention activities will be conducted immediately after CBHFA and VCA training. Health data and surveillance information is regularly exchanged between various stakeholders. However, data collectors have to be trained in the proper use and harmonization of data collection tools and data consolidation.

Challenges: There is need for support for the health department in the management of patients at the Mandjou, Guiwa and Ndokayo integrated health centres (IHC) with drugs and laboratory consumables as well as in monitoring of flow charts. Support is also needed in the upgrading of the technical platform and renovation and equipment of the health centre. Furthermore there is need to support community monitoring of patients by auxiliary staff. Ndokayo (Betare-Oya district): Construction of health unit and the need for two nursing aides. Renovation and equipment of Ndokayo IHC, recruitment of nursing aides because a state registered nurse has already been recruited for the centre. Community health is provided by auxiliary staff.

Restoring Family Links (RFL)	
Outcome: Ensure provision of psychological support, RFL, and support to unaccompanied children for 1,000 CAR refugee families (3,200 persons) in Bétaré-Oya and Guiwa-Yangamo villages.	
Outputs (expected results)	Activities planned
1,000 refugee families receive psychological support for 6 months.	<ul style="list-style-type: none"> • Train/retrain seven volunteers on psychological support, RFL and on unaccompanied children. • A psychologist supervises the work of seven volunteers. • Ensure that psychosocial support is provided to CAR refugees in Bétaré-Oya and Guiwa-Yangamo villages. • Refer refugees to health centres when required. • Restore family links in collaboration with ICRC • In collaboration with ICRC, support unaccompanied children identified in both sites.

	<ul style="list-style-type: none"> • Monitor, evaluate and report on progress of the activities. • Make recommendations and establish a strategy in order to provide psychological support to beneficiaries in need in the long term.
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Progress: Seven volunteers were trained for two days on 20-21 November in the following topics: psychosocial support, RFL and unaccompanied children. This activity is jointly implemented with ICRC. After the training, volunteers worked two days per week in Guiwa-Yangamo.Lolo and Gado refugee sites have been added to this activity in order to support new refugees. Thus, 4 volunteers were added to the existing seven. Overall, 5 unaccompanied children were identified and 5 RFL messages sent by CRC volunteers.

Challenges: Due to security issues, this activity was suspended on 3 December and resumed on 9 December 2013. Unfortunately, the activity was stopped again because of serious security concerns and threats against volunteers.

Disaster Preparedness and Risk Reduction	
Outcome: Communities at risk will benefit from an improved early warning early action mechanism managed by CRC at all levels.	
Outputs (expected results)	Activities planned
Enhanced preparedness for population movement through increased awareness and analysis of hazard risks and increased volunteer engagement.	<ul style="list-style-type: none"> • Development of population movement contingency plan for border-area CRC branches. • Raise awareness of staff and volunteers on mainstreaming of DRR in emergency relief activities. • Strengthen early warning communication mechanisms from field to headquarter level.

Progress: The Central Africa population movement contingency plan has already been developed. This took place at the regional office of the Federation in Yaounde, from 17 to 20 June 2014, and brought together disaster management coordinators from various national societies of the region that share borders with the CAR.

Challenges: It is very necessary to strengthen the capacity of volunteers in all sectors (health, nutrition, social and community interventions and relief distribution) covered by the operation in order to make them multi-skilled. Newly recruited staff also has to be briefed on the values of the Movement and other areas in order to make them more efficient and effective. Volunteer and staff loyalty has to be enhanced. Vacant positions such as human resource administrator and warehouse manager should be filled.

Logistics

Logistics has been supporting operations, sourcing and delivering relief items in line with operational priorities. Regional stocks are being used (most items required are already in stock in Yaoundé according to the latest stock report) and the items will be replaced from Dubai. Other items (particularly construction material) will be purchased locally in line with IFRC procurement procedures.

In close coordination with GLS Dubai Office, the Zone Logistics Unit (ZLU) in Nairobi will provide logistical support and coordinate procurement and mobilization of items and material for the operation. All logistics activities follow IFRC procedures and are conducted in a transparent and cost-efficient manner.

Communications – Advocacy and Public information

A regular flow of reliable information is being maintained between the field and other stakeholders. This is vital for fundraising, awareness of the work of the Red Cross and to maintain a strong profile of emergency operations. During an operation, communication between affected population and structures of the Red Cross, media and donors has been an essential mechanism to ensure a quality operation, feedback, accountability and transparency. Communications activities described here are intended to support the National Society to improve their communication skills and develop appropriate communication tools.

A media expert was mandated by IFRC Regional Office to visit the field on 26-29 January in order to publish an article on IFRC website on CAR refugee needs in surrounding countries and RC response. Also, video material was produced and shared with British Red Cross, the Wall Street Journal, the Canadian Broadcasting Corporation,

Reuters, European Broadcast Union (EBU) and Cameroon Radio and Television (CRTV).

The following additional activities were to be coordinated by the IFRC's Regional Communication Unit based in Cameroon, but have not yet been conducted due to lack of funds:

- Design of a two-minute radio spot in local languages.
- Broadcast of radio spots on a weekly basis.
- Visits to Bétaré-Oya and Guiwa-Yangamo with journalists.
- Publish, twice a month, a one-page press release in a national newspaper.
- Regular photographs to illustrate the continuing work of the Red Cross – sent to the IFRC communications team.
- Written updates to the IFRC communications team, for further dissemination to media and through IFRC channels such as the website.
- Regular liaison with local and national media in Cameroon to maintain communications about the work of the Red Cross.

Capacity of the National Society

The Cameroon Red Cross is present throughout the territory with its 58 divisional committees, and a volunteer base estimated at 40,000, of which up to 10,000 are trained first aiders.

At national headquarters, there is an operational management structure with five technical departments. The CRC has formed a competent National Disaster Response Team (NDRT) that will be strengthened during the training of community disaster response teams (CDRT).

Currently, CRC has a pool of trained shelter volunteers that can be deployed in any region of the country. With support from the Swiss Red Cross, a workshop was also held with 20 volunteers to train them in shelter construction.

A specialist of the NS was deployed in the middle of February to support the implementation of emergency activities. A DM staff member is working since November 2013 in Bertoua in support of the current operation and in close collaboration with the RDRT specialist who was in Bertoua between November 2013 and February 2014.

Capacity of the IFRC

IFRC's regional representation for Central Africa (CARREP), in coordination with the Africa Zone office provides technical and material support to the National Society with the supply of relief materials, development of action plans, logistics and human resources as needed. The regional representation staffing includes a regional programme coordinator, a regional health coordinator and regional disaster management coordinator, a regional officer for HIV, and a team providing support services. Additional technical support is available from the Africa zone office in disaster management, health and care, organizational development, planning, monitoring, evaluation and reporting (PMER), finance and administration, and mobilization of human resources as needed.

Security

The general security situation in Cameroon is stable. However, serious security issues took place in December and January in Guiwa refugee camps, delaying activity implementation. The situation improved since the beginning of February, but remains fragile, especially between refugees and local communities. A UNHCR & CRC joint mission was in the field a week ago to discuss with Guiwa refugees and the situation is pretty calm now. Activities can resume. Since the beginning of February, more than 21,721 CAR refugees have arrived Cameroon, thus impacting negatively on the locality of Kentzou and Garoua-Boulai and their populations. Therefore, new refugees need to be relocated without delay in order to avoid possible tensions.

Contact information

For further information specifically related to this operation please contact:

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For Resource Mobilization and Pledges:

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How we work

All IFRC assistance seeks to adhere to the Code of Conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGOs) in Disaster Relief and the Humanitarian Charter and Minimum Standards in Disaster Response (Sphere) in delivering assistance to the most vulnerable.

The IFRC's vision is to inspire, encourage, facilitate and promote at all times all forms of humanitarian activities by National Societies, with a view to preventing and alleviating human suffering, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.

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Saving lives, changing minds.



The IFRC's work is guided by Strategy 2020 which puts forward three strategic aims:

1. Save lives, protect livelihoods, and strengthen recovery from disaster and crises.
2. Enable healthy and safe living.
3. Promote social inclusion and a culture of non-violence and peace.

Disaster Response Financial Report**MDRCM015 - Cameroon - Population Movement**

Timeframe: 03 Sep 13 to 30 Nov 14

Appeal Launch Date: 03 Sep 13

Interim Report

Selected Parameters

Reporting Timeframe	2013/9-2014/10	Programme	MDRCM015
Budget Timeframe	2013/9-2014/11	Budget	APPROVED
Split by funding source	Y	Project	*
Subsector:	*		

All figures are in Swiss Francs (CHF)

I. Funding

	Raise humanitarian standards	Grow RC/RC services for vulnerable people	Strengthen RC/RC contribution to development	Heighten influence and support for RC/RC work	Joint working and accountability	TOTAL	Deferred Income
A. Budget		642,579				642,579	
B. Opening Balance							
Income							
Cash contributions							
<i>French Government</i>		278,856				278,856	24,698
<i>Japanese Red Cross Society</i>		15,100				15,100	
<i>Red Cross of Monaco</i>		6,109				6,109	
<i>Swedish Red Cross</i>		69,465				69,465	
<i>The Canadian Red Cross Society (from Canadian Government*)</i>		28,120				28,120	
C1. Cash contributions		397,650				397,650	24,698
Other Income							
<i>DREF Allocations</i>		65,479				65,479	
C4. Other Income		65,479				65,479	
C. Total Income = SUM(C1..C4)		463,129				463,129	24,698
D. Total Funding = B + C		463,129				463,129	24,698

* Funding source data based on information provided by the donor

II. Movement of Funds

	Raise humanitarian standards	Grow RC/RC services for vulnerable people	Strengthen RC/RC contribution to development	Heighten influence and support for RC/RC work	Joint working and accountability	TOTAL	Deferred Income
B. Opening Balance							
C. Income		463,129				463,129	24,698
E. Expenditure		-462,464				-462,464	
F. Closing Balance = (B + C + E)		665				665	24,698

Disaster Response Financial Report

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III. Expenditure

Account Groups	Budget	Expenditure					TOTAL	Variance
		Raise humanitarian standards	Grow RC/RC services for vulnerable people	Strengthen RC/RC contribution to development	Heighten influence and support for RC/RC work	Joint working and accountability		
	A					B	A - B	
BUDGET (C)			642,579			642,579		
Relief items, Construction, Supplies								
Shelter - Relief	18,850		11,951			11,951	6,899	
Shelter - Transitional	297,554						297,554	
Construction Materials			49,361			49,361	-49,361	
Clothing & Textiles			16,793			16,793	-16,793	
Food			14,644			14,644	-14,644	
Water, Sanitation & Hygiene	76,587		17,722			17,722	58,866	
Medical & First Aid	385						385	
Teaching Materials	2,692		4,615			4,615	-1,923	
Utensils & Tools	35,294		67			67	35,227	
Other Supplies & Services			7,495			7,495	-7,495	
Total Relief items, Construction, Sup	431,362		122,648			122,648	308,714	
Land, vehicles & equipment								
Computers & Telecom			3,024			3,024	-3,024	
Total Land, vehicles & equipment			3,024			3,024	-3,024	
Logistics, Transport & Storage								
Storage	2,845		7,767			7,767	-4,923	
Distribution & Monitoring			56			56	-56	
Transport & Vehicles Costs	26,870		29,729			29,729	-2,859	
Total Logistics, Transport & Storage	29,715		37,552			37,552	-7,838	
Personnel								
International Staff	54,000		51,531			51,531	2,469	
National Staff	2,100		48,867			48,867	-46,767	
National Society Staff	13,462		19,894			19,894	-6,432	
Volunteers	20,496		23,399			23,399	-2,903	
Total Personnel	90,057		143,690			143,690	-53,633	
Consultants & Professional Fees								
Consultants	10,000						10,000	
Professional Fees			4,868			4,868	-4,868	
Total Consultants & Professional Fees	10,000		4,868			4,868	5,132	
Workshops & Training								
Workshops & Training	8,284		28,879			28,879	-20,595	
Total Workshops & Training	8,284		28,879			28,879	-20,595	
General Expenditure								
Travel	6,000		20,987			20,987	-14,987	
Information & Public Relations			10,604			10,604	-10,604	
Office Costs	8,731		16,458			16,458	-7,727	
Communications	9,392		7,343			7,343	2,049	
Financial Charges	1,000		600			600	401	
Other General Expenses			126			126	-126	
Shared Office and Services Costs	8,820		21,618			21,618	-12,798	
Total General Expenditure	33,943		77,734			77,734	-43,791	
Operational Provisions								
Operational Provisions			10,688			10,688	-10,688	
Total Operational Provisions			10,688			10,688	-10,688	
Indirect Costs								
Programme & Services Support Recover	39,218		27,890			27,890	11,328	

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III. Expenditure

Account Groups	Budget	Expenditure					TOTAL	Variance
		Raise humanitarian standards	Grow RC/RC services for vulnerable people	Strengthen RC/RC contribution to development	Heighten influence and support for RC/RC work	Joint working and accountability		
	A					B	A - B	
BUDGET (C)			642,579			642,579		
Total Indirect Costs	39,218		27,890			27,890	11,328	
Pledge Specific Costs								
Pledge Earmarking Fee			3,190			3,190	-3,190	
Pledge Reporting Fees			2,300			2,300	-2,300	
Total Pledge Specific Costs			5,490			5,490	-5,490	
TOTAL EXPENDITURE (D)	642,579		462,464			462,464	180,116	
VARIANCE (C - D)			180,116			180,116		

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Subsector:	*		

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IV. Breakdown by subsector

Business Line / Sub-sector	Budget	Opening Balance	Income	Funding	Expenditure	Closing Balance	Deferred Income
BL2 - Grow RC/RC services for vulnerable people							
Disaster response	642,579		463,129	463,129	462,464	665	24,698
Subtotal BL2	642,579		463,129	463,129	462,464	665	24,698
GRAND TOTAL	642,579		463,129	463,129	462,464	665	24,698