



IMPACT OF LOCKDOWN SITUATIONS ON PROTECTION RESPONSE IN NORTHWEST AND SOUTHWEST REGIONS OF CAMEROON

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The recurrent lockdowns imposed by Non-State Armed Groups (NSAGs) in the North-West and South-West (NWSW) regions impacted protection partners' activities in the field, slowing down the implementation process and reducing affected communities' access to protection assistance. The capacity to reach those in need of assistance, to gather and collect data in affected areas, is drastically lowered by the lockdowns. Thus the Lockdowns have slowed down field activities and worsened the condition of some beneficiaries facing serious protection threats. Routine checks or consultations to affected persons in urgent need for psychological and psychosocial support have for example been halted. Those facing mental and physical violence are experiencing more trauma, as a result. **(CES)**

Fear of movement by both community members and protection workers has reduced or in cases disallowed sensitization activities on various key themes including Gender-Based Violence (GBV), civil documentation and legal assistance. Partners have resorted to conduct these activities via telephone which proves to be costly. **(QFF)**

With regard legal assistance and civil documentation, since workers are forced to work remotely and affected communities and People of Concern (PoCs) fear gathering in public spaces, partner organizations have slowed down or paused their activities. Insecurity during periods of lockdown has limited the mobility of protection workers. Financial transactions to beneficiaries, service providers and staff have also been limited due to the closure of banks, offices, and other institutions during lockdowns. Resorting to assisting remotely via telephone has been helpful on certain cases but this is insufficient to address urgent needs and provide assistance which requires physical presence. **(RAGJ, REWAC)**

While remote monitoring of cases in hard-to-reach communities has increased, services for documentation and birth registration, legal assistance provision and capacity-building have been



stopped by several actors due to smaller partner organization having shut down their operations altogether during this period. This has however pushed the development of online service provider units to assisting protection victims. Some specific activities including monitoring of places of Deprivation of Liberty and Judicial Processes in NWSW have been discontinued due to the lockdown. Proper follow up of legal complaints is also hindered during this period, particularly cases from Mamfe Central and Eyumojock, Kumba 1, 2 and 3 and Muyuka inter alia. Other protection response target areas that are inaccessible due to the lockdown situation include in Mamfe, Kumba and the peripheries of Buea like Muea Mile 16 and Ekona and Muyuka. **(FGI)**

On-site supervision and missions in health facilities by Community Health Workers (CHW), alongside case management activities (excluding Sexual Gender Based Violence and rape related case management) have paused for some organizations. CHWs complain of the high risks associated to carrying household visits and community dialogue session, and limited means of transportation to areas that remain accessible. As a result, partners have had to re-strategize using community relay focal points to meet their monthly targets for service delivery and community dialogue sessions. Monitoring and Evaluation (M&E) processes have also slowed down in Mbengwi, Njikwa and Ngoketunjia in the North-West (NW) and completely ceased in other hard to reach areas, where alternative methods through telephone communication are planned. In Ngoketunjia division, populations of Babessi, Bambalang and Bemessing are facing increasing protection risks, and due to security concerns projects are unable to be implemented. The follow-up of cases of Persons Living with HIV/AIDS and referrals to health facilities is also challenged by the security risks during lockdown periods as CHWs find themselves unable to access communities to provide Anti-Retroviral (ARV), and conduct community directed interventions for Tuberculosis, Malaria and HIV. Livelihood projects in these areas have also either slowed down, and or completely shut down. **(IVFCam)**

Child Protection activities including baseline assessments for CP/EiE (Integrated Child Protection and Education in Emergencies) were stopped in Tiko, due to project staff inability to travel to target areas in order to engage with students and school authorities. This also led to the cancelation of project inception workshop, although online options (less effective) are being considered. Due to the lockdown situation,



Mental Health and Psychosocial Support (MHPSS) components of protection projects have also had to be discontinued in Tiko (Missellele, Likumba) and Buea. **(StreetChild UK)**

During this period, other Child Protection activities (Child Protection Case Management, Non-Formal Education) slowed down in Buea, but have continued in Limbe and Idenau. In hard to reach and inaccessible areas, GBV and Child Protection case management is conducted remotely. **(CAMHELP)**

Some community dialogue sessions on United Nations Security Council Resolution 1325 and Human Rights have also been delayed in various areas including Boyo and Njinikom areas, as well as some GBV referrals in Belo, which were not able to be addressed through case management by psychosocial workers due lack of transportation means and insecurity. **(GRAWIDCAM)**

Gender-Based Violence activities have been paused in various areas in NWSW, including Fako, Meme and Manyu. Cases of domestic violence have reportedly increased during lock-down periods by partners. Activities including vocational trainings and Positive Parenting trainings have been suspended until the end of the lockdown period, as well as GBV sensitization and sex education in schools. Although remote psychosocial support is still being provided remotely, it is deemed less efficient that when conducted physically. **(TeenAlive, AGENECS, AMEF, GFDLP)**

Protection Monitoring activities, especially the execution of household surveys and Key Informant Interviews, awareness raising sessions cannot be done on regular basis or as planned in target locations such as Fako, Meme and Manyu during lockdown periods. The provision of emergency personal protection assistance such as material assistance and case management, protection assessments (Kompenda and Bakosi Camp), Community Based Child Protection support in development of mitigation action plans, stakeholder meetings (Small Soppo), psychosocial support (PSS) activities as a response of protection cases (Meme, Fako), PSS and Parenting Training of Trainers for protection volunteers (Meme, Fako, Buea) as well as in-person interviews for staff recruitment have all been either delayed or ceased during the lockdown. Protection Monitoring staff were encouraged to take their leaves during this lockdown period, and all field activities were cancelled for the safety and security of staff and PoCs. This has also impact protection monitoring routine activities in various areas of Fako (Small Soppo, Soppo



Likoko, Bomaka, Mile 16 Bokwai, Bwitingi and Ekona Yard) and Meme (Mambanda, Kosala 3, Barombi Kang). **(IRC)**

The lock-down has significantly affected most Housing, Land & Property (HLP) related interventions on the field (legal assistance, capacity-building, mediation, sensitization, awareness raising and education) and coordination (submission of weekly reports by field collaborators). In the NW, Case Workers & Community Facilitators are forced to cease field activities since they are bound to stay indoors. Registration, documentation, orientation and remote protection monitoring are still carried out through telecommunication (phone calls, WhatsApp). HLP actors are unable to reach target areas and communities although incidents continue to be reported. **(NRC, COHESODEC, AGENECS, ASWEDO)**

CONCLUSION:

Based on the PC lockdown impact analysis, the following recommendations are made:

- Capacity-building and training to be organized online and using virtual platforms when and where possible.
- Emergency call service through a telecom service provider be made available to GBV survivors, victims of grave violations of Child Rights, and human right abuses.
- Empower community focal persons to carry out activities safely within households.
- Focal points and staff should be equipped with mobile phones and communication credit (airtime) to enable remote activities.
- Humanitarian organizations to avoid carrying out onsite “mass” activities.
- Enhance capacity building on Remote Case Management.
- UNOCHA and Clusters to develop contingency measures/guidelines for lockdown periods.



GLOSSARY OF PARTNERS' ABBREVIATIONS AND ACRONYMS:

(AGENECS) ... Association for Gender Equality and Child Safety.

(AMEF) ... Authentique Memorial Empowerment Foundation.

(ASWEDO) ... Aspired Women Empowerment and Development Organization.

(CAMHELP) ... Cameroon Humanitarian Educational Leadership for Peace And Development.

(CES) ... Cornerstone Enrichment Services.

(COHESODEC) ... Community Health and Social Development for Cameroon.

(FGI) ... Finders Group Initiative.

(GFDLP) ... Global Forum for the Defence of the Less Privileged.

(GRAWIDCAM) ... Grass Roots Women in Development Cameroon.

(IRC) ... International Rescue Committee.

(IVFCam) ... InterFaith Vision Foundation Cameroon.

(NRC) ... Norwegian Refugee Council.

(QFF) ... Queen Fogang Foundation.

(RAGJ) ... Research and Advocacy for Gender Justice.

(REWAC) ... Refugee Welfare Association Cameroon.

(StreetChild UK) ... StreetChild United Kingdom.

(TeenAlive) ... TeenAlive Organization.