Country Update

Cameroon
(Febuary 14, 2021)

Context and government response:
As of February 14, 2021, Cameroon has registered 32,098 cases of COVID-19, including 479 deaths. On March 18, 2020, the Cameroonian government announced the implementation of COVID-19 prevention measures including school closures, border closures and other public health guidelines to limit the spread of COVID-19 in public spaces; businesses and health care facilities. In May and June 2020, some COVID-19 restrictions were eased as schools reopened and operations for restaurants and public transportation resumed with COVID-19 prevention measures.

The government had scheduled the country’s first regional elections for early December. In the face of opposition to procedural concerns, authorities had banned public gatherings and demonstrations, while restaurants, schools and other nonessential businesses remained open. The country’s communication minister even announced that the government would punish protestors under the country’s counterterrorism law.

The most recent Knowledge, Attitudes, and Practices (KAP) survey conducted by UNICEF and WHO in October 2020 revealed that 72% of the respondents have an acceptable level of knowledge on COVID-19 and 74% adopt adequate practices to prevent the spread of COVID-19. It is also reported that there is a significant level of non-respect of COVID-19 prevention measures in major cities, as residents have not strictly complied with social distancing measures and the wearing of face masks.
Summary of impact:
During consultations held between GNWP and partner local women’s rights organizations in Cameroon, partners shared that the COVID-19 pandemic has contributed to worsening of the tension between the warring parties in Cameroon. Some armed actors feel that the government is using the pandemic as an excuse to consolidate its control in conflict-affected regions. One of the leaders of an armed group operating in the Anglophone region of Cameroon has called for a total lockdown in the two Anglophone regions affected by separatist violence, as a measure of preventing the spread of the disease. Other leaders have not addressed pandemic, leading some of the population to question whether the virus is real. The divergence of approaches to the pandemic, and accusations of using it to further political ends, have negatively affected the conflict dynamics and prospects for a peace process. Additionally, Human Rights Watch reports that Cameroon’s ruling political party has used the pandemic as an excuse and cover to punish, deter and even arrest supporters of the opposition party.

According to the Ceasefires in a Time of COVID-19 Tracker, on March 25, 2020, the Southern Cameroon Defense Forces, an Ambazonian separatist movement, declared a two-week humanitarian ceasefire. On March 27, 2020, the Vice President Julius Nyiawung of the Ambazonia Governing Council, a separatist armed group maintaining governance legitimacy declared there would be no ceasefire. On March 29, the two-week ceasefire of the Southern Cameroons Defense Forces (SOCADEF) with the government of Cameroon began. However, according to GNWP partners, clashes continued despite the ceasefires. As one of the partners shared, “There was no real ceasefire in Cameroon. Fighting, killing, decapitations and other human rights violations are still ongoing. COVID-19 has compounded the vulnerabilities of women who already suffer from the conflict.” BCC News reports that in April 2020, 300 government troops carried out a military operation against separatist armed groups, destroying two of their military camps in the North-West region.

In parallel, the government has continued to push forward with the reconstruction agenda to bring back displaced people to their original settlements. To some officials it is the first step to take within the peace process since it will decongest overcrowded IDP settlements or refugees’ settlements. However, the armed groups have opposed the reconstruction activities in the territories they control. GNWP partners have also reported cases of women
and children being kidnapped for ransom, and the military razing down 26 houses in a village in the South West region. Clashes also continued in the North West region, leading to deaths of men and young men, and leaving women as heads of households, thus increasing the caregiving burden.

Refugees International reports that although it is difficult to isolate the impact of COVID-19 on mass atrocities, conflict dynamics appear to have been exacerbated by the situation as COVID-19 has intensified the ongoing Anglophone crisis. Armed groups and state security forces have both taken advantage of the situation and increased their attacks on civilians.

According to GNWP partner, Cameroon Women's Peace Movement (CAWOPEM), the early closure of markets as a COVID-19 prevention caused many women who trade perishable goods to lose their capital, as their goods rotted. Informal workers - such as domestic workers, cleaners and bartenders, for the most part, have had their employment terminated. CAWOPEM also reports that most low income earners - including many women - saw their wages reduced by over 60%. Moreover, as women do the majority of informal and unpaid care at home, their work and economic opportunities have been further limited during the pandemic by the increased burden of care. A recent Cadre Harmonisé published by the Minister of Agriculture and Rural Development reports that 2.7 million Cameroonians in need of urgent food and nutrition assistance due to the compounded impacts of the pandemic and the ongoing conflict in the North West (NW) and South West (SW) regions, as well as the Far North region. In the NW/SW regions, 960,000, or 70% of people face food insecurity.

COVID-19 has also caused an increase in women’s unpaid care burdens. According to a survey carried out by UN Women, the Ministry of Women Empowerment and the Family and the Central Bureau of Census and Population Studies in May 2020, women respondents recorded that they devote more time to child care, as 27.3% of women indicated versus 18% of men. In addition to this increased effort devoted to household care tasks, including caring for spouses and children that are now mostly at home and also home schooling children, women responded that they continued their professional activities. Furthermore, girls in the households were the most likely ones to provide additional assistance, more than boys, spouses and other households members. In general, women dedicated more time to domestic chores during COVID-19, while men dedicated more time to intellectual activities.
This reflects the gender unequal distribution of labour in the households, with women and girls being most impacted in the household by COVID-19 lockdown measures.

According to Fidèle Djebba, president of women’s right organization, Association Rayons de Soleil, gender-based violence (GBV) has been exacerbated during COVID-19 as even more girls, young women and women, especially those who have been displaced due to the Anglophone Crisis, are now forced into prostitution. The Civil Society Platform for Peacebuilding and Statebuilding (CSPPS) reports that in an Association Rayons de Soleil survey conducted among 200 respondents, 60% indicated that their relationship with their partner has become more difficult due to COVID-19 prevention measures. Respondents cited that their partners have become increasingly frustrated with the situation, and thus, have become more physically and mentally aggressive. In December 2020, 245 incidents of GBV were reported to service providers in the NW/SW regions, however this number is not an accurate representation of the prevalence of GBV in the area, largely due to underreporting.

According to the Cameroon government, there has been a resurgence of female genital mutilation (FGM) during the COVID-19 pandemic as cases of FGM are on the rise. This is in part because the compounded dangers posed by COVID-19, separatist armed groups and the Boko Haram terrorism have hindered the delivery of weekly education campaigns for the prevention of FGM, especially near Cameroon’s northern border with Nigeria and the English-speaking Southwest region. Action Against FGM, a women-led NGO, reports that many FGM practitioners that had previously ceased the practice due to advocacy from the organization, are now again circumcising girls during COVID-19, sometimes due to the fact that they no longer have any other income generating activities because of COVID-19.

Responses led by women peacebuilders:
Women-led peacebuilding organizations in Cameroon continue to play an essential role in supporting local populations to mitigate the health and socioeconomic impacts of COVID-19. The International Civil Society Action Network (ICAN) reports that women civil society leaders in Cameroon have responded to the gendered impacts of COVID-19 by including information about domestic violence in COVID-19 informative materials, distributing sanitary pads in hygiene packages, translating relevant information into Pidgin and reaching out to pregnant women who avoided clinics due to fear of the virus.
The International Peace Institute (IPI) reports that women-led peacebuilding organizations such as the Hope for the Needy Association (HOFNA), are using methods such as traditional storytelling to raise awareness about the gendered impacts of COVID-19. Throughout the pandemic, HOFNA has also distributed face masks, hosted a know your rights campaign in Nkambe, and broadcasted a radio drama series program, ENGAGE, which aimed to raise awareness about GBV prevention and response at the community-level during the ongoing conflict and pandemic. In April 2020, HOFNA also trained internally displaced young women in soap production and COVID-19 prevention measures, providing them an opportunity for income generation during the COVID-19 pandemic.

GNWP Partner, Pathways for Women’s Empowerment and Development (PaWED), has conducted sensitization to COVID-19 prevention measures in local languages, distributed face masks to communities and trained local tailors to sew face masks at affordable prices. The GBV referral group hosted by PaWED has also remained open to those facing GBV, providing them with assistance to access health care and psycho-social support. PaWED has advocated to the government to list GBV services as essential services during the pandemic. PaWED has also called on the government to incorporate the differential needs of women and girls that have lost their livelihoods and are facing violence instigated due to harsh economic conditions into COVID-19 recovery measures. Their advocacy efforts for a ceasefire in the NW/SW regions as a prerequisite to recovery from the COVID-19 crisis have also been ongoing throughout the pandemic.

Additionally, since the onset of the COVID-19 pandemic in Cameroon, women peacebuilders have mobilized to advocate for gender- and conflict-sensitive COVID-19 response. The South West/North West Women Task Force (SNWOT), a coalition of women leaders and peace activists, have released two statements since March 2020. In the first statement, SNWOT noted that the government’s current strategy is lacking in support for internally displaced women, girls, and the elderly due to the ongoing Anglophone crisis. The statement recommended that the government implements COVID-19 response plans that focus on addressing the needs of internally displaced women and girls, who face unique barriers, such as hygiene management in over-crowded IDP camps. In their second
statement, they reiterated that the government must consider the differential health needs of women and men in the context of the COVID-19 emergency, and called for greater coordination of government agencies in the national COVID-19 response.