

Meeting the food needs of refugee children in the northern and eastern regions of Cameroon: current challenges faced and strategies to overcome them

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Introduction

Conflicts in North Eastern Nigeria and the Central African Republic (CAR) have led to spillover effects in the Northern (Adamawa, North and Far North) and Eastern Regions of Cameroon.^{1–3} In 2016, an estimated 2.7 million people needed humanitarian assistance in Cameroon, majority of which were children, with the conflict-hit regions of Cameroon having the highest number of affected children.³ Refugee children in the Northern regions of Cameroon are food insecure due to the persistent Boko Haram terror in the Far North Region and the crisis in the Central African Republic (CAR). As of 2016, there were an estimated 332 000 refugees and asylum seekers in Cameroon and the figure keeps rising.³

Meeting the food needs of refugee children in these regions of Cameroon is a serious health issue, needing urgent attention. Several cases of malnourished children have been reported in the refugee camps of these regions.² The situation is made worse by the persistent terror activities of the Boko Haram sect in the Northern regions of Cameroon.^{1–3} According to the European Commission report,¹ 1.9 million people in the Sahelian region (with Cameroon being part), are food insecure; 618 000 children suffer from severe acute malnutrition (SAM) and more than 550 000 children in this region die from SAM. Last year 2017, between the months of June and August, it was estimated that about 53 million people would be food insecure if urgent actions were not taken to prevent this. Several factors have been identified to influence the persistent food insecurity among refugee children in these parts of Cameroon.^{1–3}

The growing conflicts in the North Eastern part of Nigeria, the persistent terrorism in the Far North region of Cameroon and conflicts in the CAR, causing an increase in refugees to Cameroon, their growing food needs and cases of malnourishment among refugee children are factors that motivate the writing of this editorial whose main aims are to document the food crisis affecting refugee children in the affected regions of Cameroon and also to recommend strategies to address the problem.

Current prevalence of food insecurity among refugee children, responsible factors and interventions by the Cameroon government and its partners

As initially mentioned,^{1–3} the situation of food insecurity among refugee children in Cameroon is precarious and needs urgent attention. Over 259 000 refugees from CAR are hosted by Cameroon in the East, Adamawa and the North regions; meanwhile over 20 000 refugees reside in urban areas. The Far North

region hosts over 87 000 refugees from neighbouring Nigeria and Chad with about 60 157 registered in the Minawao refugee camp as of 2016.⁴

The situation is further exacerbated by persistent conflicts, low socioeconomic status and lack of agricultural activities besides drought in the Far North region and also the East Region.² About 61 262 children in the Far North are suffering from severe acute malnutrition (SAM), and over 2 669 have been admitted for treatment. Food shortage is increasing despite laudable efforts by the Cameroon government and its partners to address it.^{1–3}

Many factors have been identified to cause food insecurity among refugee children, among which are poverty, drought, persistent conflicts, lack of improved agricultural techniques leading to inadequate yields, and hindrances to aid delivery due to persistent terrorism.¹ Limited funding is also a major challenge.⁵ This leaves an estimated 2.5 million people or one in every five households facing emergency levels of food insecurity in the four priority regions of Cameroon (Far North, North, Adamawa and East Regions).

Humanitarian relief agencies such as the World Food Programme (WFP), and the United Nations High Commissioner for Refugees (UNHCR) have made several successful attempts to address the chronic food needs such as the signing of partnership agreements with the Cameroon government (a case in point is United Nations Development Assistance—Cameroon), the transfer of authority to the Cameroon government with regard to the registration of refugees, and the supply of agricultural kits to 6 676 refugee farmers in Logone and Chari area of the far North Regions³, to say the least, though much is still left undone. The European Commission, United States Agency for International Development (USAID), United Nations Central Emergency Response Fund through United Nations Development Assistance (UNDAF) and in Cameroon the Orange Foundation and MTN Foundation have been funding several projects to increase food supply to affected refugee children in these regions. Several identified affected children have been received for treatment, and many in sound health, though cases of malnutrition are still being witnessed. Due to efforts made by the World Food Programme (WFP),⁶ in 2017 nearly 500 000 people received food aid in the Far North region of Cameroon, including refugee children.⁶ In the framework of malnutrition reduction among refugee children, 138 000 children in the Far North and Eastern regions of Cameroon received nutrition and health packages to boost their health

status.⁶ As a result of efforts made by the WFP, global acute malnutrition rates dropped from 4% in January 2017 to 2.7% in March 2017, thereby showing the impact on malnutrition prevalence reduction among refugee children as a result of humanitarian relief efforts.⁶ The facilitation of delivery of food aid to affected families through the air flight system in the Northern regions has greatly bridged the limited access to affected families faced by most non-governmental organisations (NGOs) in the field.^{1–5}

The Cameroon government, through the signing of several legal instruments intended to protect refugees, has shown its determination to address the food needs of affected children. Moreover, the government of Cameroon through UNDAF has been facilitating food supply and medical aid delivery to affected children; besides this, several efforts have also been made to supply agricultural tools to refugees in the Northern and Eastern regions. The signing of several military cooperation agreements to combat the Boko Haram sect in order to facilitate aid delivery to affected refugees is also a commendable effort by the government, though much remains undone as the terror activities have been persistent.⁷

Despite such commendable efforts to reduce the chronic problem of food shortage among refugee children, the prevalence remains high. More refugees keep arriving in Cameroon, and limited donations and funds have also been hampering the relief efforts of aid agencies, thereby beckoning a change of tactics and strategies besides intensified efforts to address the problem.

Addressing the food needs of refugee children in the priority regions of Cameroon

Most refugee parents are farmers, therefore supplying them with improved seeds, farm tools, money and allocated farmlands in host areas could reduce government spending, and increase agricultural activities and hence food production, thereby increasing food availability to refugee children. A successful practical case in point was the supply of farm tools to 6 676 individuals in the Logone and Chari division of the Far North region via the UN system. The same strategy of promoting agriculture among refugees could be extended to affected families in these regions to boost food production.³ As applied in the East region and the three Northern regions of Cameroon,^{3,7} cash transfer to refugee families via mobile telephone networks such as Orange and MTN mobile money services could boost agri-business activities among refugees, which will lead to the generation of income and reduce poverty, besides enabling them to purchase foodstuffs and afford basic healthcare services.

Damaged healthcare centres, especially in the Far North region, require urgent reconstruction and rehabilitation. Besides this, training and deployment of field healthcare workers will facilitate the early diagnosis, registration and adequate management of complicated cases of food insecurity among refugee children such as malnutrition. In refugee camps, quasi health facilities should be established; refugee parents with nursing skills

could also be recruited to educate and train other mothers on essentials of food hygiene and complementary feeding.

The identification of malnourished refugee children is crucial to saving the lives of such children. Relief agencies on the ground, through the use of community healthcare workers, should educate refugee women on the basics of identifying malnourished children. This will lead to timely registration and commencement of essential healthcare intervention.

Goodwill gestures, especially through financial donations to the Cameroon government and also aid agencies, will foster the implementation of targeted plans by these agencies. Money will enable the assistance of refugees, help in developmental projects, increase access to children, increase human resources available for food supply and also help in the supply of essential fortified foods and medications to affected children. Financial aid will also enable the purchase, supply and distribution of farm tools to refugee farmers, besides funding refugee projects, especially in urban areas, to address poverty.

Tackling the root causes of all forms of conflicts in the Sahel region is pivotal to ending both the refugee crisis in Cameroon and food insecurity. Terror activities are motivated by frustrations, unemployment, political reasons and also selfish ambitions. Dialoguing with those perpetrating such acts and boosting employment for youths in such areas will greatly address the refugee crisis and also reduce the number of internally displaced persons in Cameroon. This requires mediation from international organisations such as the African Union (AU), United Nations Organization (UNO) and also friendly countries. The effective resolution of conflicts in the affected countries will bring peace and development, boost the economy and end forced migration. The overall well-being of everyone would thereby be achieved.

Conclusion

Meeting the food needs of refugee children is a right of children and requires urgent actions. Resolution of conflicts in affected parts of the Sahel region and Northern region of Cameroon is pivotal to ending the refugee crisis, thereby promoting the overall well-being of children.

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