On 8th November 2018, the number of registered Cameroonian refugees fleeing violence and seeking refuge in Nigeria crossed the 30,000 mark.

Cameroonian refugees continued to arrive in Nigeria with a decrease in numbers compared to the previous two months. During the reporting period, 35 new arrivals were verified by UNHCR in the border locality of Utanga (Obanliku Local Government Area, Cross River state).

On 2nd November 2018, activities resumed in Anyake settlement, after negotiations conducted by UNHCR, SEMA, administrative and traditional authorities.

48 refugee children were registered by the National Population Commission and issued with birth certificates in Adagom settlement (Cross River state). UNHCR facilitated a training on refugee protection and registration for 60 university students in Calabar (Cross River state), to support in the verification and registration of Cameroonian refugees.

285 refugee children were vaccinated in Anyake settlement (Benue state), and 1,119 refugees and host community members received medical care in Adagom settlement (Cross River state).

**KEY INDICATORS**

- 30,993 Cameroonian refugees registered with Level 1 and Level 2 registration [As of 15th November 2018]
- 2,790 Cameroonian refugees registered in Anyake settlement, Benue State [as of 15th November 2018]
- 5,011 Cameroonian refugees registered in Adagom settlement, Cross River State [as of 15th November 2018]

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Update On Achievements

Child Protection
During the reporting period, 48 refugee children in Adagom settlement (Ogoja Local Government Area, Cross River state) were registered by the National Population Commission and issued with birth certificates.

Registration
UNHCR and National Commission for Refugees (NCFRMI) continued verification and registration of refugees with biometrics (including new arrivals) in Anyake settlement (Kwande Local Government, Benue state), and Utanga (Obanliku Local Government Areas, Cross River state).

As of 15th November 2018, 12,923 refugees were verified, including 7,974 newly registered (including new-born babies, new arrivals and people living in remote locations not attended during Level 1 registration) and 10,738 enrolled in BIMS.

From 5th to 8th November 2018, UNHCR conducted a training on protection and registration in Calabar (Cross River state), for 60 university students with the aim to support NCFRMI in the verification and biometric registration exercise of Cameroonian refugees in the states of Cross River, Akwa Ibom, Taraba and Benue.

Relocation
Some 271 spontaneous arrivals were recorded in Adagom settlement (Ogoja Local Government Area, Cross River state), bringing the population of the settlement up to 5,011 registered individuals as of 15th November 2018. Moreover, 52 individuals arrived spontaneously to Anyake settlement (Kwande Local Government Area, Benue state). As of 15th November 2018, after physical verification exercise, the population of the settlement accounted to 2,790.

New settlement
The land survey of the new refugee site in Okende (Ogoja LGA, Cross River state) started during the reporting period and blocks demarcation was ongoing in the site. So far, demarcation of 12 communities (site districts) comprising 72 blocks that can accommodate 216 households was completed. Nearby facilities (a school under construction comprising of nursery, primary and secondary school and a health center) were identified and will be evaluated.

Food
A multifunctional team including UNHCR and its partners carried out sensitization on Cash Based Interventions (CBI) for food to refugees in Adagom and Anyake settlements (Cross River and Benue states), as this modality will soon replace food ration distribution.

Shelter
Construction of permanent shelters for Cameroonian refugees continued in Adagom settlement (Cross River state). During the reporting period, 31 shelters were being completed (roofing phase) and construction of 117 shelters was ongoing. So far, 173 permanent shelters have been completed in the site with support from UNHCR and its partner Rhema Care. The project, funded by EU Humanitarian Aid, will support the construction of permanent shelters for 4,000 Cameroonian refugees.

Healthcare
During the reporting period, 285 refugee children between 9 months and 5 years of age were vaccinated in Anyake settlement (Benue state). Moreover, 218 refugees in the site were referred to appropriate health care structures for medical consultation. Most recurrent diseases recorded include malaria, Sexually Transmitted Infections (STI), ulcer and appendicitis.
287 individuals from refugee and host community received free health care services in Adagom Health Post (Ogoja Local Government Area, Cross River state) with support from the Nigerian Red Cross Society in collaboration with United Nations Population Fund (UNFPA).

Water, Sanitation and Hygiene (WASH) – During the reporting period, a borehole was drilled by UNHCR partner Norwegian Church Aid (NCA) in Adagom settlement (Cross River state), to serve refugees and members of the host community with clean water. Moreover, on 15th November, hygiene kits (including bucket, jerry can, soap and towel) were distributed to 54 refugee households in the site to promote their personal hygiene.

Working in partnership

Together with the Nigerian Government, through the National Commission for Refugees (NCFRMI), and State Emergency Management Agency (SEMA), UNHCR ensures international protection and delivery of multi-sectoral assistance to the Cameroonian refugees and has established a monthly coordination meeting in Calabar to foster closer collaboration with other UN agencies and humanitarian actors. The following partners implement specific sector activities in this situation: Catholic Caritas Foundation Nigeria (CCFN); Catholic Diocese of Makurdi – Foundation for Justice Development and Peace (FJDP); MEDATRIX Development Foundation; Norwegian Church Aid (NCA) and Rhema Care Integrated Development Centre. Other partners also deliver services to the Cameroonian refugees with their own resources such as ADRA, ICRC, MSF, Save the Children and WHO.

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LINKS
