Cameroon: reception areas for displaced people, between socio-demographic reconfiguration and managing Persons with Specific Needs

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This article builds on the results of two studies: one carried out in the Far North region on the demographics of the people displaced by the Boko Haram crisis, and the other carried out in the East region on care for Persons with Specific Needs (PWSN) displaced by the crisis in the Central African Republic. It explains how a sound grasp of demographic data can help to improve our understanding of humanitarian challenges and provide guidance for informed decision making.

Cameroon is experiencing new humanitarian challenges, polarised by security crises that have come on top of natural crises (drought, floods, locust invasions). Minor, contained seasonal displacements have given way to massive, diffuse cross-border and internal mobility, exacerbated by the resurgence of socio-political conflict in the Central African Republic and cross-border terrorism from Nigeria. These conflicts have been spilling over into Cameroon since 2013. In 2018, the United Nations High Commissioner for Refugees (UNHCR) identified 358,438 refugees, including 258,779 from the Central African Republic present since 2013 in the administrative regions of East and Amadawa and 96,367 Nigerians present in the Extreme North region since 2014. Over 200,000 Cameroonians who have abandoned their villages along the Cameroon–Nigeria border live in the Extreme North as internally displaced persons.

Several towns and villages in the six departments that constitute the Far North administrative region (Mayo-Tsanaga, Logone-et-Chari, Mayo-Sava, Diamaré, Mayo-Kani and Mayo-Danay) have received huge numbers of Nigerian and internally displaced persons. In the East and Amadawa regions, the crisis in the Central African Republic (CAR) has led to a major influx of refugees from that country. The presence of externally and internally displaced persons in these two regions has proved to be a socio-demographic phenomenon that has generated a multitude of effects, which in turn have determined the type of humanitarian intervention deployed, and which will be a vector for long-term socio-demographic change.

This article analyses the regional and the district levels in an attempt to understand the spatial distribution of these displaced persons and its consequences. Analysis at the regional level

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attempts to assess the impact that the establishment of camps is having on this distribution, camps such as Minawao (an area of interest for humanitarian action in Cameroon) and several camps for internally displaced persons and former Boko Haram hostages. Analysis on this scale helps to understand the changes in the demographic structure on the regional level. Analysis at the district level is focused on the local management of displaced persons; the village of Gado-Badzéré in the Garoua-Boulaï district (East region), 35 km from the CAR (Figure 1) will be cited as an example. According to the UNHCR, in April 2018 this small village had 24,678 refugees from the CAR (58% of whom were under 18 years of age) compared to the 2,498 residents counted during the third census in 2005. Gado-Badzéré has a refugee camp that is a veritable oasis for externally displaced persons. Its demographic structure means that the socio-economic and healthcare structures, which were already inadequate for the local population, have reached saturation point, casting doubt on the efficiency of the way displaced persons have been treated.

The context described above calls for reflections as to the analysis of the socio-demographic changes at the levels identified, and a discussion of how a firm grasp and evaluation of demographic dynamics can help understand the humanitarian challenges so as to be able to usefully foresee humanitarian actions for the future. In other words, how will the lessons learnt from this demographic tool allow humanitarian actors to complete their tasks successfully? Various data sources have been used in this study: observations from the field, the databases of the UHNCR’s Cameroon office and the International Organization for Migration (IOM Cameroon), administrative reports from humanitarian organisations (Lutheran World Federation [LWF], Solidarités International, Public Concern, etc.), field surveys (twenty or so focus groups with internally and externally displaced persons, 398 refugee households in Gado-Badzéré surveyed by questionnaire), and testimony from various actors.

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3 UN Migration Cameroon, https://www.iom.int/fr/countries/cameroun
Security crises: a vector for demographic dynamics

In July 2019, Cameroon was host to 398,671 refugees from some ten countries: 287,467 from the Central African Republic, 107,840 from Nigeria, and 1,518 from Chad. 347,372 internally and externally displaced persons had returned to their place of origin, and 262,831 Cameroonians currently live as internally displaced persons in the Far North administrative region. Data published on 13 September 2019 for the same region gave a total of 479,101 individuals (89,062 households) identified by the UNHCR.

Major intra-regional disparities in the distribution of displaced persons

According to the Displacement Tracking Matrix (DTM) published by the IOM in April 2019, there are major disparities between the six departments that make up the Far North region (Figure 2). These disparities are linked to each department’s proximity to the Nigerian border incursion points of the terrorist group Boko Haram. Logone-et-Chari, Mayo-Sava and Mayo-Tsanaga, which share most of their borders with Nigeria, have taken in 94% of the internally and externally displaced persons.

The migration dynamic is particularly strong in the departments of Logone-et-Chari and Mayo-Sava, where displaced persons (internally and externally displaced) account for 33% and 24% of the total population, respectively. The figure for Mayo-Tsanaga is 8%, despite its proximity to one of Boko Haram’s main incursion points into Cameroon. This paradox can be explained by two factors:

- The landscape is dominated by the Mandara Mountains, a range on the border between Cameroon and Nigeria whose highest elevation is nearly 1,500 m.
- This is Cameroon’s third most populated department (after the two departments that are home to the cities of Douala and Yaoundé) with over 700,000 inhabitants.

The influx of refugees has had a detrimental effect on the poverty level in this region, which has the highest levels of poverty in Cameroon. It accounts for 35% of the country’s poorest people.

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vs 20% for the North region and 13.2% for the Northwest. According to the Strategic Review of Food Security and Nutrition, published regularly by the World Food Programme (WFP), the Far North region has the highest instance of food insecurity, with 35% of the population affected. Having an insight into the demographic structure of the displaced persons would be a major asset in determining the strategic choices to be made by humanitarian actors.

**Migratory dynamics polarised on vulnerable populations**

It has long been understood that natural disasters lead to vulnerability, but this vulnerability should now be analysed from the point of view of socio-political and ethnic crises, which are more damaging than isolated, spatially contained natural disasters. The ongoing crisis in the Central African Republic and, since 2013, attacks by Boko Haram, for example, are giving rise to a constant stream of migrants requiring the deployment of complex systems to deal with them in the short, medium and long terms. A vulnerable population consisting of individuals whose ability to live and act is affected in the short, medium and long terms by environmental, political, economic, social and healthcare factors.

With regard to the reception areas for persons displaced by crises, an analytical/synthetic approach to vulnerability has identified four types of vulnerability:

- Corporal (or physical): access to shelter, food, healthcare and miscellaneous needs;
- Social (or psycho-social): precarious living conditions for displaced persons, overcrowding in refugee camps vs life outside the camps;
- Institutional: the capacity of national institutions to respond to the crisis;
- Functional: destructuring of the regional/local agricultural economy.

Demographic data on displaced persons provide useful information for humanitarian actors. The statistics on refugees and internally displaced persons in the Far North region published by the UNHCR in September 2019 show that 29,829 refugee households live in or just outside camps, and that 42,755 internally displaced households live outside camps alongside the local population. These statistics are even more revealing when broken down by sex and age (Table 1).

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**Tableau 1: Structure des réfugiés dans la région de l’Extrême-Nord par sexe et par catégorie (septembre 2019)**

<table>
<thead>
<tr>
<th>Sexe</th>
<th>Adultes</th>
<th>Mineurs</th>
<th>Total par sexe</th>
</tr>
</thead>
<tbody>
<tr>
<td>Femmes</td>
<td>24 423</td>
<td>32 272</td>
<td>56 695</td>
</tr>
<tr>
<td>Hommes</td>
<td>17 605</td>
<td>32 147</td>
<td>49 552</td>
</tr>
<tr>
<td>Total par groupe d’âge</td>
<td>41 828</td>
<td>64 419</td>
<td>106 247</td>
</tr>
</tbody>
</table>

**Table 1: Refugee structure in the Far North region by sex and category (September 2019)**

<table>
<thead>
<tr>
<th>Sex</th>
<th>Adults</th>
<th>Minors</th>
<th>Total by sex</th>
</tr>
</thead>
<tbody>
<tr>
<td>Women</td>
<td>24 423</td>
<td>32 272</td>
<td>56 695</td>
</tr>
<tr>
<td>Men</td>
<td>17 605</td>
<td>32 147</td>
<td>49 552</td>
</tr>
<tr>
<td>Total by age group</td>
<td>41 828</td>
<td>64 419</td>
<td>106 247</td>
</tr>
</tbody>
</table>

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This table shows the predisposition to vulnerability for women (53.36% of the refugees) and minors (60.36% of the refugees). The statistics for the refugee camp in Minawao (Mokolo district), which has 15,734 households (59,456 individuals), show the same trend (53.34% women and 62% minors). This population has increased by almost 10% since December 2018 due to migration and natural growth. Even though existing statistics now enable us to understand the migratory flows on the regional level and, to a lesser extent, on the refugee camp level, understanding the socio-demographic composition on the local level is a challenge. The emergence of expressive and pejorative terminology to refer to the small local community of Zamay in the Mokolo district demonstrates a certain institutional difficulty in coming to grips with the changes observed. Zamay now exemplifies what is referred to as a “dumping ground”, a term that is gradually taking root in the vocabulary of humanitarian actors and national and international administrations. In addition to the largely minority local population, the district is home to the refugee camp and a camp for internally displaced people and former Boko Haram hostages.

On the whole, the current state of knowledge about this situation and its consequences allows two major points to be made: the first highlights the polarisation of this dynamic on the vulnerable populations; and the second shows that security crises can be a powerful vector for socio-demographic reconfiguration when they persist. This situation poses real challenges for humanitarian actors in the way they care for people with specific needs (PWSN).

The challenges of caring for PWSN: the example of elderly refugees from the Central African Republic in Gado-Badzéré (Garoua-Boulaï)

Elderly people with specific needs – an overview

The analysis of elderly people is important from a research point of view as they are a demographic category whose growth rate demonstrates a major demographic trend observed in sub-Saharan Africa in recent decades. Caring for them is an emerging social concern for communities and politicians given their increased vulnerability as displaced people.

Senior citizens account for 3% of all refugees at the Gado-Badzéré site, of which two thirds are women and one third men. They are referred to as People with Specific Needs (PWSN) or people with particular needs and are considered to be vulnerable. The concept of PWSN is closely linked to migration in crisis situations. It is discussed in many scientific disciplines and polarises the work of humanitarian actors in refugee reception areas. Laurence de Bauche states that, in legal terms, there is a link between the concepts of vulnerable people and people with particular needs. She states that asylum seekers targeted by these concepts “... are, generally, people who have particular needs owing to a state of vulnerability. The following groups of people are specifically mentioned: minors, unaccompanied minors, people with disabilities, elderly people, pregnant women, and victims of torture, rape or other serious forms of psychological, physical or sexual violence”.

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8 Jasmine Laurelle Kahou Nzouyem, Analyse de la vulnérabilité des personnes âgées à Bangang ouest, mémoire de master de géographie, université de Dschang, 2017.
9 Laurence De Bauche, La prise en compte de la vulnérabilité des personnes dans le cadre du régime d’asile européen commun, Les notes d’analyse de l’Observatoire, n° 1, janvier 2011.
10 Ibid., p. 8.
With regard to the Gado-Badzéré site in eastern Cameroon, a UNHCR report on refugees from the Central African Republic in Cameroon shows that the PWSN are: unaccompanied children or children separated from their parents, children at risk, women at risk, elderly people at risk, single parents, people with disabilities, and people with serious medical conditions (Figure 3).

Elderly people are the second-largest PWSN group of forced migrants from the Central African Republic in Gado-Badzéré, after unaccompanied or separated children. 16% of the sample taken for the field study in March 2019 were aged 57-81, heads (or simply members) of refugee households at this site. Most of this category of refugees are incapacitated by their physical and mental fragility and must be cared for by third parties as a matter of urgency.

Senior citizens: a specific PWSN category

PWSN have specific concerns and needs associated with their status of migrant/displaced persons in reception areas and with their demographic category. These concerns and needs relate, inter alia, to lack of income, nutritional difficulties, healthcare vulnerability, and loneliness. Elderly refugees have major socio-economic and specific healthcare needs that are difficult to meet because of their extreme vulnerability associated with their economic inactivity.

Refugees over 59 years of age are particularly affected by financial insecurity (more so than those with jobs). This situation is exacerbated by their inability to work or benefit from training courses under the Livelihoods programme run by the UNHCR (with its NGO partners Lutheran World Federation – LWF – and Solidarités International). Under this programme, these humanitarian actors have been supporting refugees to exercise an income-generating activity (IGA) and gain empowerment since 2017. Elderly refugees therefore find it difficult to meet their basic needs through their own efforts.

11 The great disparity between the proportion revealed by the UNHCR (2018) and that of the field study can be explained by the fact that children of all ages were not taken into account in the sample which only considered heads of household.

12 L. Mamgno Kamga, Activité génératrice de revenu et autonomisation des réfugiés centrafricains de Mandjou, mémoire de master de géographie, université de Dschang, 2019.
Senior citizens also have the poorest health indicators after children aged 0-5. The results of surveys carried out at the Gado-Badzéré refugee site confirm their extreme physical frailty. This demographic group accounted for 24 of the 77 cases of illness registered over the month (i.e. 31% of total monthly morbidity), with children aged 0-5 accounting for 30 cases (38% of monthly morbidity).

Elderly refugees suffer from infectious diseases and, specifically, chronic diseases such as diabetes, back pain, rheumatism and tuberculosis. In August 2016, the UNHCR and the Cameroon Ministry of Health (MINSANTE) signed a framework agreement on the provision of effective care for Central African Republic refugees in the Adamawa, East, Far North and North regions. The UNHCR has committed to paying 70% of the cost of providing refugees with healthcare services, while the MINSANTE ensures that the services provided for refugees in appropriate health centres are supervised regularly and fees are cut by 30% for the patients concerned. The actual implementation of this agreement, however, will be affected by the irregular supply of medicines in health centre pharmacies at refugee sites. These sites have to turn to unlicensed dispensaries to source care for PWSN where they are forced to buy their medicines at full price, despite their PWSN refugee status.

The disabilities of many elderly people in Gado-Badzéré make them dependent on the generosity of certain family members and the community, or even on donations and care provided by NGOs and the host country. We talk of chronic dependency when lone elderly people, who receive no support from the host country’s administration or their family, become dependent on certain institutions in the long term, in this case the UNHCR, for example. The elderly people in our example bear witness to such dependency. Incidentally, 60% of the elderly PWSN had not received full care since 2017, both in terms of healthcare and nutrition. The assistance provided by the UNHCR and its humanitarian partners is now based on targeting the neediest refugees, meaning that combating chronic vulnerability in a security crisis is still a major challenge for humanitarian actors.

Against such a backdrop, humanitarian aid must meet new challenges, notable brought about by the emergency/development dichotomy. These challenges require actors to have a good grasp of reliable data so as to improve the way beneficiaries are targeted. Gathering, processing, storing and disseminating demographic data in a crisis situation is a major challenge that development aid agencies and international institutions have been trying to address for several years. Two systems for generating demographic statistics are currently hosted by the UNHCR and the IOM:

- the UNHCR’s Population Statistics database contains data on refugees, asylum seekers, returned refugees, internally displaced persons and stateless persons, with their countries of origin, places of origin, gender, age etc.;
- the IOM’s Displacement Tracking Matrix (DTM) is a system for tracking and monitoring displacements and population mobility; it is designed to obtain, process and disseminate information, regularly and systematically, on the movements and needs of displaced populations, regardless of their location.

These two systems are ideal targeting instruments that allow a distinction to be made between the

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short-, medium- and long-term needs of a humanitarian response and the need for a more global and sustainable institutional response\(^\text{15}\), although questions could be asked as to their functional disparity which raises issues about the coordination of data generation. This disparity concerns the frequency with which the data are gathered and disseminated, variables and targets. It also concerns their consistency with national databases that are more disparate and inconsistent. This issue of data comparability is key to harnessing demographic tools as real instruments of humanitarian action.

_translated from the French by Derek Scoins_

Biographies

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