

NGOs Interventions in The Care Provided to Internally Displaced Persons (IDPs): The Case of Community Initiative for Sustainable Development (COMINSUD) In the North West Region, Cameroon

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ABSTRACT

This research work examines the activities of COMINSUD; a Non-Governmental organisation responsible for the distribution of food and health aid to the Internally Displaced People (IDP) in Cameroon North West region as a result of socio-economic and political instability in the country's Anglophone regions. A qualitative and quantitative approach was used to collect primary data with the help of interviews, observation, questionnaires and focus group discussions. Field work results indicates that though COMINSUD provides considerable support for IDPs who have access to the organization's services in urban centers, those in remote rural and inaccessible areas with poor topography and dense forest lack access to these vital support services; unless they move to urban areas to meet the service providers. Consequently, vast majority of IDPs living in poor and deplorable conditions are deprived from these services as a result of both natural and man-made conditions that affect movement from these enclave areas. To ensure adequate supplies of food and health aid to the vulnerable masses, there is need for government and its agencies to provide an enabling environment and infrastructure including security to protect service providers from the extremes of war in the region.

Keywords: NGOS (non-governmental organizations); interventions; displaced persons; COMINSUD (community initiative for sustainable development)

INTRODUCTION

The world has witnessed violence for the past decades. Every society faced with the violation of their human rights is most often compelled to flee from their home (Marie-Helene V. & Harriet M, 2006). This is to seek refuge either within their own country or across an international border. It is noticed that the problem of forceful displacement has become larger and a more complex issue for the past decades. In the world today, internal displacement has been termed a "global" crisis as it affects more than 20 million people in more than 55 countries (Inter-Agency Standing Committee Working Group, 1999). In the world, over 40million are internally displaced persons (IDPs) due to conflict, generalized violence, persecution and violations of human rights by May, 2018 (IPI, 2018). The 10 worst affected countries in the world that account for more than 1 million each for new displacements include; China, the Philippines, Syria, the Democratic Republic of Congo (DRC), Cuba, United States, India, Iraq, Somalia and Ethiopia (IDMC, 2017). African countries like Somalia, South-Sudan and Syrian have faced conflicts which have been responsible for the major outflow of refugees and movement of IDPs over the past decades. Generally, IDPs account for the greatest part of displaced populations globally (Euro Stat, 2018). Africa is also seen to contribute 25% of this forceful displacement (Philip V & Jean- Francois M, 2015).

Internally displaced persons often see themselves in vulnerable situations. Despite where they choose to live or settle, their basic needs are often not met or neglected. The prolonged conflict in Nigeria (North-eastern Nigeria) with Boko Haram has resulted to over 1.9 million IDPs in the country (Bukar B, 2012). An increasing number of more than 60% of the IDPs, in deplorable condition are often exposed to as they lack access to portable water, sanitation, hygiene and other basic services with lack of healthcare being a major challenge. Most common illnesses among IDPs include; Malaria, diarrhoea and other malnutrition threatening the lives of over 40,000 children in North-eastern Nigeria (IPI, 2018). Young girls and boys especially are at risk of sexual exploitation in exchange for food, money and other needs or services (Philip O et al., 2016). Violence and conflicts in Cameroon has been a major cause of the displacement of the population. In Cameroon, those mostly affected are school age children, women and elderly persons (OCHA, 2018). Principally, the Boko Haram insurgency in the Far North with about 227,581 people internally displaced (Jimenez-Damary C, 2018) and the armed separatists group and defence-security forces in the North-West and South-West regions according to Office for the Coordination of Humanitarian Affairs (OCHA) recorded 160,000 IDPs in November, 2017 and by October 2018, OCHA estimated over 437,000 IDPs with 60% made up of women and 43% children (UNHCR, 2019).

Today, there are a multitude of food aid programmes for food-vulnerable people in Sub-Saharan Africa. Indeed, the problem of climate change that causes a decline in agricultural productivity, security crises are the main causes of global food insecurity (IDMC, 2017). However, the cause of food insecurity requires states and international agencies to develop strategies to help vulnerable victims. Thus, it is in this context that the World Food Program (WFP) and Community Initiative for Sustainable Development (COMINSUD) seek to address the problem of food insecurity to the vulnerable displaced population. This project is located in the north-west region of Cameroon, which has been facing a major security crisis for the past four years. The World Food Program (WFP) has identified COMINSUD as one of the organizations it could work with in the provision of emergency food assistances to the crisis in the North West Region of Cameroon. This was the essence of a visit by Hans Vlkoler, Emergency Coordinator WFP, Cameroon office, to the COMINSUD Bamenda headquarters on Friday April 12, 2019.

Hans Vlkoler said for the short-term WFP activities in the Region would focus on setting up emergency response systems with potential partners. This done, targeted food assistance shall be made available to include school feeding, supplementary food and livelihood assistance. He disclosed that a central warehouse shall be set up in the North West Regional capital of Bamenda from where the items shall be dispatched to the various beneficiary groups concerned.

COMINSUD's coordinator Fon Nsoh assured that working on its twenty-two years of local community activities, the organization was ready for the challenge. COMINSUD has already been collaborating with other UN structures such as the UNFPA in providing assistance to Internally Displaced Persons of the Anglophone crisis. COMINSUD also worked with SNV to promote the rights to food movement in Cameroon.

Cameroon's accession to the status of an independent state on 1st January 1960 (for Francophone Cameroon) and 1st October 1961 (for English Cameroon), the constitutional reform of 1972 completely changed the situation, making Cameroon a Unitary state. This constitutional amendment, although the result of a referendum, still deprived the English-speaking region of the autonomy and recognition it had obtained in 1954. Southern Cameroon then became a region of the Republic of Cameroon. In 1984, this region was divided into two provinces known today as the North-West and South-West regions. However, in November 2016, demonstrations were observed in these two regions to demand the reform of the school and judicial system that was until then dominated by the French-speaking system. Despite all the government's attempts to bring about meaningful solutions to these demonstrations, some separatist groups continue to put up resistant to the government. This has first led to the interruption of income-generating activities and the movement of people. This displacement of people has also pushed COMINSUD NGO and its international partners to set up a food and health assistance programme for these persons. Our research questions therefore are:

- 1) What is the relevance of the health/food services provided by COMINSUD to IDPs during the crisis in the North-West region?
- 2) How accessible and effective are the health/food services provided by COMINSUD to IDPs during the crisis in the North-West region?

METHODOLOGY

The study site was in the North West Region of Cameroon which is made up of 7 divisions. The study was carried out in two divisions namely: Mezam and Momo divisions. The villages for the study include: Bafut, Mankon, Mbengwei, Batibo and Widikum as the crises is at its peak in these villages.

Data Collection

This study employed both secondary and primary data collection methods.

Secondary data

Secondary data were collected from reports, books and journal articles from the libraries of the Bamenda University, University of Yaounde I, University of Buea and the COMINSUD library. All these were done to obtain information on the situation of food provided to IDPs vis-à-vis the COMINSUD organisation.

Secondary data obtained from these sources included general information on the history of Cameroon and the challenges faced during this crisis which was used to define the context and scope of the research. This constituted the literature and was also used to compare findings of our research.

Primary data

Our research methods that guided the analyses of data collection was mixed method; qualitative and quantitative. Qualitative methods used to collect primary data was direct observation, in-depth interviews and discussion (FGD) while quantitative methods are questionnaire. In depth interviews were done with IDPs and some members of the COMINSUD in the various towns. This gave us an in depth understanding on what is going on as a result of the crisis. The service provided to the IDPs and the challenge faced by the IDPs and the COMINSUD organisation.

Focus group discussions also complimented data that could not be gotten through interviews. It helped bring out the challenges that the different genders face in a situation like this. We carried out 3 focus group discussions. One was done with women only; the second FGD was done exclusively by men and the third with both men and women. Thus, women were able to express themselves in their different groupings as well in order to get diverse ideas. This was done between workers of COMINSUD and also with some IDP persons. Data collected was analysed using content analyses. Viewpoints from interviews were condensed and coded into themes. Results and the trend analyses was done to show food and health aid granted to IDPs.

We observed directly and participated on how COMINSUD visited places like Bali, Batibo, Widikum, Mbengwi and gave food to IDPs. This gave us the opportunity to gather information from those IDPs in those areas and correct our data. These methods enable us to classify our work under particular themes which gave us explanations on the works of the NGO whether it is appreciated or not by the IDPs. We also took photos of some persons that benefited from the food supply, but this was only done after they gave their consent.

Forty-five questionnaires were also administered to the IDPs, (5) questionnaires to member of the COMINSUD organisation, (3) worker of World Food Program (WFP) and (2) World Health organisation (WHO) making a total of 55 questionnaires.

RESULTS AND DISCUSSIONS

Internally displaced persons and food principles

Principle 18 (2) (a) of the Guiding Principles aims to ensure that IDPs have access at all times to adequate food or the means to obtain it, in particular through the direct distribution of basic food aid when necessary (Orach & De Brouwere, 2004). The right to adequate food applies throughout displacement, although food security must be guaranteed in the medium term. This is through a transition from the direct distribution of food or the means to obtain it to the provision of assistance to IDPs in achieving or regaining self-sufficiency. The realization of the right to adequate food is also a precondition for achieving durable solutions.

It is therefore understood that food aid should be given priority to the most vulnerable populations, including IDPs in general and special sub-groups with special dietary needs, such as children, pregnant and lactating women, people living with HIV/AIDS and the elderly. Food aid should be safe, culturally acceptable, provided in a way that does not adversely affect local producers and markets, and organized in a way that facilitates the achievement or restoration of food self-sufficiency for beneficiaries.

At the internal level, the right to adequate food is rarely explicitly protected in the constitution. This is because food production and distribution take place simultaneously at the household, community, regional and national levels. They are most often regulated by a large and diverse body of laws that address issues such as agricultural production, food and safety standards, food management and processing, and import and export rules. Laws and policies enacted specifically to address the needs of IDPs should include general provisions confirming the right of IDPs to adequate food as well as more specific measures. Such as standards, indicators and the inclusion of food-related criteria in coordination, information-gathering, consultation and monitoring mechanisms. The laws should also clarify the powers and responsibilities of relevant government agencies and assign powers and responsibilities accordingly. guaranteed in the medium term. This is through a transition from the direct distribution of food or the means to obtain it to the provision of assistance to IDPs in achieving or regaining self-sufficiency. The realization of the right to adequate food is also a precondition for achieving durable solutions.

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Challenges in food availability to IDPs in the Communities.

About 80% of IDPs in the study area had difficulties to have access to food. As a result of the instability cause by the uprising in these villages they were unable to cultivate food crops for both home consumptions and the markets. As a result of the instability, displacements disrupt access to food by separating producers from their means of production (e.g. farmers) and consumers from their sources of income and markets. As a result, all IDPs, regardless of the causes of their displacement, tend not to enjoy access to their traditional food and are therefore inherently vulnerable to deprivation of this essential resource. Inadequate nutrition exposes the most vulnerable members of IDP communities, children, pregnant and lactating women, the sick and elderly to specific health risks and culturally inappropriate food may be rejected, particularly by indigenous peoples.

Sixty-five percent of informants are of the view that because of inadequate food they face high level of sexual exploitation from their neighbourhood. The obstacles to economic self-sufficiency that IDPs generally face often make them dependent on humanitarian aid for their daily food needs. Such dependency creates an immediate risk of sexual exploitation by those responsible for distributing food. This also confirmed the findings of (Lawrence G. and Mc Michael P., 2012). Some IDPs were chronically food insecure prior to displacement, increasing their vulnerability to undernourishment and complicating their chances of finding durable solutions to food security.

Another challenge faced by IDPs in response to food shortages because the food aid they receive is inadequate, often raise new types of protection risks. For example, attempts to supplement food aid by leaving camps or safe areas in search of food or other incomes may put IDPs at risk of attack and sexual violence. This finding is line to the (World Bank report; 2009). Even when food is available in adequate quantities, distribution systems that force IDPs to transport food over long distances and do not provide food directly is a major concern.

The area most affected by the crisis was the Mezam division, where 40 % of those IDPs resided followed by Momo division with 30 %. The IDPs were spread in these various division in the North West Region. In addition, it should be noted that in most cases, women and children were the most vulnerable. Some of the IDPs were lucky to have benefited from the COMINSUD organization. This was in terms of food distribution and medical attention provided to some of these IDPs as illustrated from the table below;

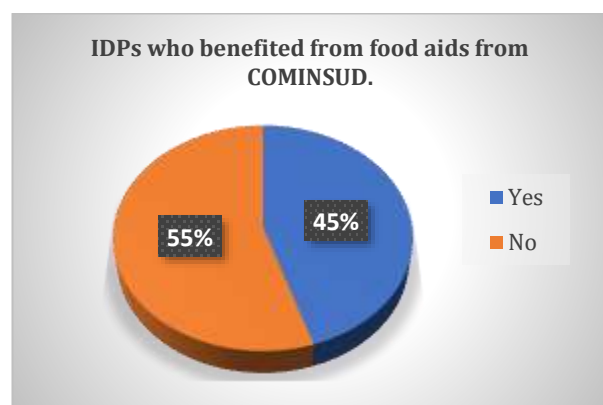


FIGURE 1: Food aid granted to IDPs

According to respondents, 55percent of the IDPs were unable to benefit from COMINSUD through their food aid whereas 45 percent were beneficiaries from the aid as seen on the figure.

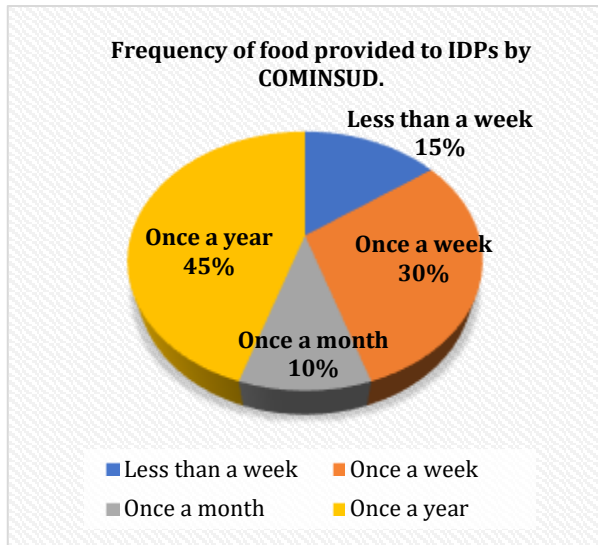


FIGURE 2: IDPs and food frequency provision

As seen on figure 2 above, respondents revealed that 15 percent of IDPs benefited from food aid less than a week, while once a week 30 percent of them benefited and once a month only 10 percent of the IDPs were beneficiaries of the food aid from COMINSUD.

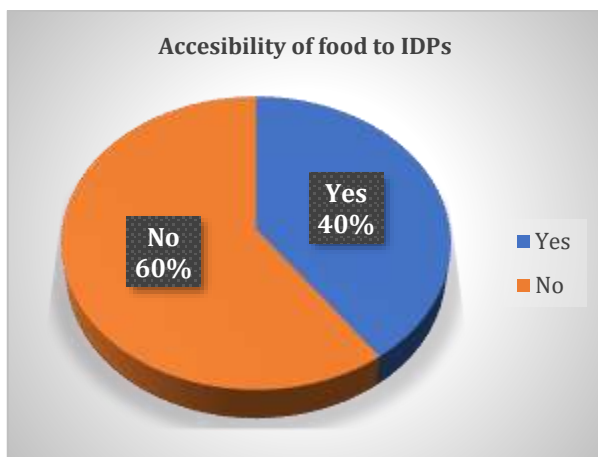


FIGURE 3: IDPs and access to food

As seen on the figure above, informants revealed that food accessibility to IDPs by the NGO is 40 percent while 60 percent of them do not have access to food.

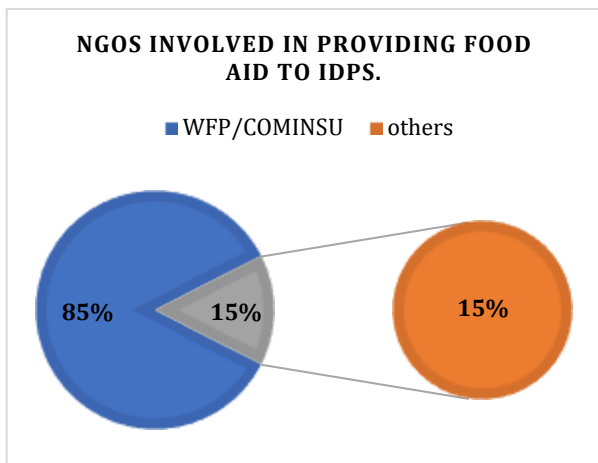


FIGURE 4: Food provision to IDPs by NGOs

The Non-Governmental Organisations (NGOs) that were involved in the provision of food aid to internally displaced persons were mostly COMINSUD, World Food Program (WFP) together with others. From our findings we realized that 85percent of the aid was being given by the WFP and COMINSUD organisations while 15percent food aid to IDPs came from other NGOs.

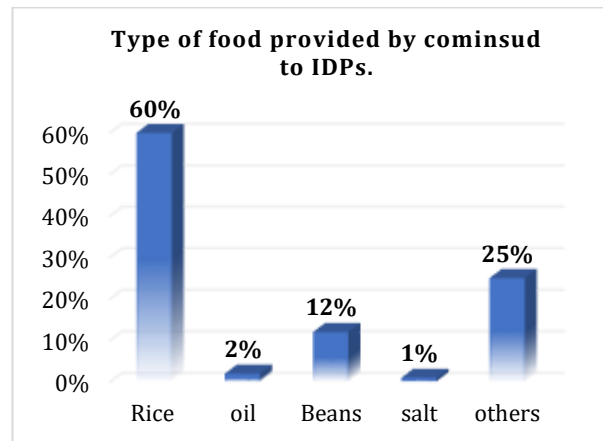


FIGURE 5: Food type given to IDPs.

This figure presents three aspects of food aid given to IDPs namely the receipt of food aid, the frequency of receipt, and the type of food received. The results show 45 % of the people interviewed from the field benefit from food aid granted to IDPs from COMINSUD as opposed to 55%. However, 15% of the IDPs received food less than a week, 30% receive food aid once a week and 10% once a month given their location. It has also been observed that the main types of food provided to the IDPs were; rice, oil, beans and salt. However, the problem that generally arises in distribution is the problem of unequal distribution of the food stuff. Some individual had more food stuff than others depending on their relationship with those sharing the food. In addition, we observe that, only 40% of those interviewed think that food aid is easily accessible while 60% of the IDPs think food aid is inaccessible. However, 30% of people are satisfied with the quality of the aid while 70% are not satisfied. In the study area 45% of people say that the WFP / COMINSUD project is their main support.

Number of females who benefited from COMINSUD

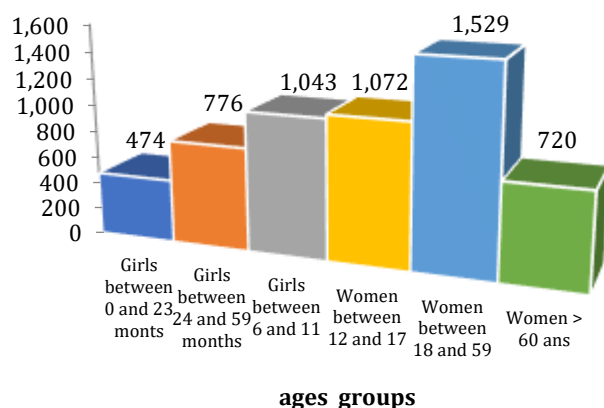
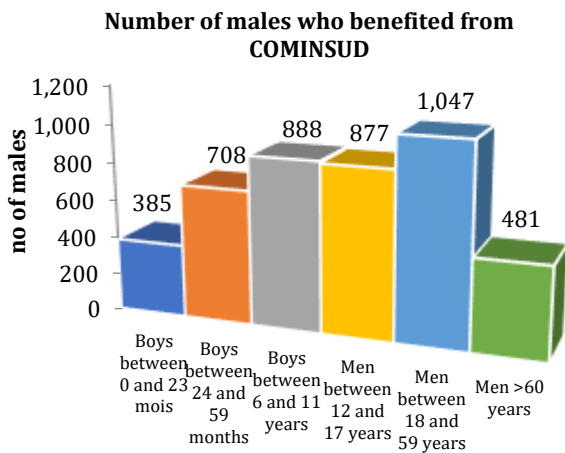


FIGURE 6: Food aid granted to IDPs (women)
Source: Authors based on COMINSU 2020 reports

From the chart above, we see that women whose age group is between 18 and 59 years old are the biggest beneficiaries of this food aid. That is 25%. We also noted that a total of 6,000 women have benefited from food aid from COMINSUD from 2016 to 2020.



Ages groups

FIGURE 7: Food aid granted to IDPs (men)

Source: Authors based on COMINSU 2020 reports

Unlike the previous graph, this one shows us that 5,000 men have benefited from food assistance by COMINSUD since the start of the crisis in the North West region. We noticed that more women benefited for the food aid than men.



FIGURE 8: Food delivery to an internally displaced person
Source: COMINSUD Office, Bamenda, 2020

Figure 8 shows the delivery of a monthly aid in food items given to an internally displaced woman which consist of 25 kilogram of rice, 10 kg of beans and 2kg of salt in Momo division in Mbengwei village found in the North West region of Cameroon.

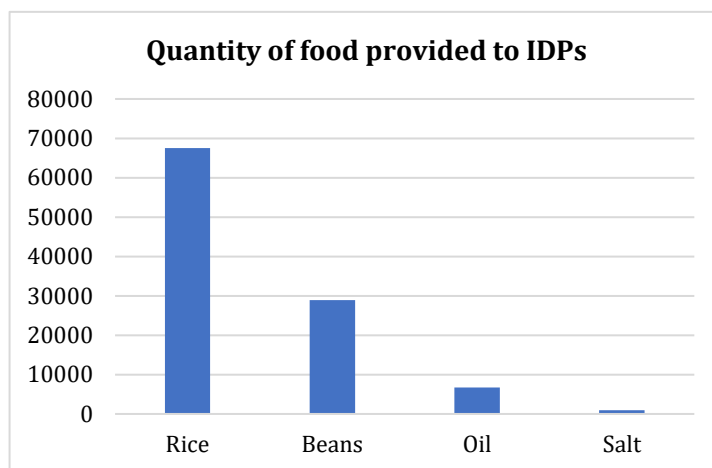


FIGURE 9: The evolution in kg of the quantity of food provided to the IDPs

Source: Authors based on COMINSUD 2020 reports

COMINSUD in partnership with WFP provided about 70,000 kg of rice, 30,000 tons of beans, which was distributed to IDPs in the study site. However, there is absence of tubers, vegetables this has cause poor nutrition of the IDPs.

TABLE 1: Health assistance granted to IDPs

Have you benefited from health support from COMINSUD since the start of the crisis?		
Yes	No	Total
15%	85%	100%
If so, how often do you receive this assistance?		
	Number of persons	Percentage
More than once a week	0	0%
Once a week	7	7%
Once a month	6	6%
Once a year	2	5%
Less than once a year	85	85%
Total	100	100%
What type of health problem do you have?		
Malnutrition	8	53%
Chronic disease	2	13%
Injuries	3	20 %%
Water-borne illness linked to the host environment	2	13%
Total	15	100%

Source: Authors

This table presents the statistics on aspects of health assistance granted to IDPs, namely reception of health assistance, frequency of reception, and type of treatment or care provided. The results show only 15% of the informants benefit from the health assistance granted to the IDPs by COMINSUD. However, 7% receive weekly health monitoring, 6% receive monthly while 2% receive annually.

We also note that the main health services provided by the latter are: treatment related to malnutrition, chronic diseases, injuries and diseases related to the environment of residence of displaced people. However, it is important to mention that, 88% of IDPs who received health care assistance from NGO COMINSUD were children and women.



11-month-old child, as suffering from food insufficiency before he was taken into care by COMINSUD. Thus, these photos show his sanitary evolution after his treatment he has regained his normal weight and is doing well.

FIGURE 10: Health monitoring of a child by COMINSUD workers

Source: Authors, based on COMINSUD reports

Figure 10 shows pictures of an 11-month-old child, who suffered from food insufficiency before he was taken care of by COMINSUD workers and his sanitary evolution and after his treatment he regained his normal weight and is doing well.

Challenges faced by the NGO (COMINSUD) with the IDPs.

The health and food aid given to IDPs by NGOs is often mostly misunderstood and less appreciated by persons. It is clear that COMINSUD provides considerable health and food support to IDPs from the crisis in the North-West region, there is a problem of accessibility and effectiveness of this aid. Most vulnerable and needy people do not really benefit from this aid. This is because they live in enclaved villages with poor roads that makes movement difficult. The members of NGOs (COMINSUD, WFP, WHO) are scared of the separatist and turn to shy always from villages that are far off for fear of being kidnaped or killed by the separatist. The Cameroon Government must ensure maximum security in crisis regions. In fact, Movement within North-west region is very unsafe especially in rural and bush areas with the presence of the separatist groups. However, COMINSUD NGO have to: make provision for the unforeseen, guarantee quantity and quality of food for IDPs, change each time, type of food distributed, fight against poor attitude/corrupt nature of fieldwork.

Again, with the variations in quantity of food, some beneficiaries think they are being cheated upon and as such bear so much grudges against the team. Also, they wish to have variations of food types. The continues eating of rice and the split peas is insufficient to provide a balance diet to the IDPs. They are the need for the World Food Program (WFP), COMINSUD to provide alternative good types to the beneficiaries. This is because taking a balance diet enhances the immune system of the IDPs in vulnerable state. Some IDPs also complaint that the split beans are difficult to cook and isn't tasteful like the beans they are familiar with. The most vulnerable group.

Discrimination in food sharing.

During crisis, there are people who are more vulnerable than others. IDPs are the most vulnerable groups but are not given preference. Most of them complain they have never benefited from the COMINSUD project. They keep writing their names but are never considered. This dissatisfaction has led to community conflicts and hatred as some IDP who are not beneficiaries sometimes threaten to disrupt distribution activities because they are being neglected. Most beneficiaries and non-beneficiaries complain of the poor attitude and corrupt nature of the field workers. Some field workers are very rude to the beneficiaries. Some Field workers will demand for a share of what the beneficiaries are to collect before giving what rightly belongs to them. For example, Mbengwei cash-based transfer beneficiaries do complain that some field workers ask for money from beneficiaries before their names can be included on the list. This is a very corrupt practice that must be addressed.

Also, during the screening of malnourished children, some caretakers/parents do give false information of their child's age because they want their child to benefit from the super cereal. When this false information is given and the child is considered as a beneficiary, it greatly goes a long way to create shortage of super cereal food distribution to the right persons.

Health support

In addition, WFP/COMINSUD health project funds are sometimes insufficient. This is due to the fact that majority of the population want to benefit from health services offered COMINSUD than the state hospitals who provide very little or inadequate services.

Some misconception ideas in Mbengwei is as a result of constant disappearance of beneficiaries' names on the list of those who need health assistance.

Poor follow-up as COMINSUD carries out follow-up and monitoring only once a month. Sometimes they can stay for more than one month without going to the field for checks. This equally makes the field workers not to take their task seriously. Field workers turn to be lazy in carrying out their task because there's no one to constantly pressurize them.

CONCLUSION

COMINSUD, has faced a lot of challenges during this crisis in the management of health and food aid. Despite the efforts put in place by COMINSUD and their partner organizations, they still face difficulties in accessibility in most of these areas, as a result of the presence of the separatist groups found in the study areas. Also, the irregularities in the provision and distribution of food aid and health services to IDPs is also a call for concern. There is the need to create a more systematic way for food and health provision to the displaced persons. So as to ensure continuous and regular access to adequate and nutritious food assistance and health status to the vulnerable displaced persons. The Cameroon Government must ensure maximum security in crisis regions. In fact, Movement within North- west region is very unsafe especially in rural areas with the presence of the separatist groups. However, the government should help complement the works of COMINSUD by providing more security on the field.

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