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COI QUERY

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	1. Background information on mental health in Cameroon 2. Availability and accessibility of mental health care 3. Treatment by state 4. Treatment by non-state actors and by society 5. Availability of state protection from harm by non-state actors
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All sources used are referenced and cited in the bibliography section. A quality review has been performed in line with the above mentioned COI methodology. This document does not claim to be exhaustive or conclusive as to the merit of any particular claim to international protection. If a certain event, person or organisation is not mentioned in the report, this does not mean that the event has not taken place or that the person or organisation does not exist. Terminology used should not be regarded as indicative of a particular legal position.

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COI QUERY RESPONSE - Cameroon

Situation of individuals with mental health issues in Northwest and Southwest (Anglophone) regions; treatment by state and non-state actors, by society; availability of state protection.

1. Background information on mental health in Cameroon

According to an article by Voice of America (VOA) News from May 2021, multiple reasons such as crises in the Northwest and Southwest regions (NWSW, or the Anglophone region), as well as a consumption of drugs, have contributed to an increase of a number of people with mental health issues in Cameroon.¹ For example, a report by Human Rights Watch (HRW) published in December 2021 found that separatist attacks in the Anglophone region have caused 'depression, anxiety, fear, trouble sleeping, nightmares, and other emotional difficulties' among educational staff in the region.² According to a United Nations Office for the Coordination of Humanitarian Affairs (UNOCHA) report published in September 2022, '[t]he effects of violence and of natural disasters, as well as the socioeconomic and health impact of the COVID-19 pandemic, led to a deterioration of the physical and mental wellbeing' of the population of Cameroon.³

A paper on the impact of the COVID-19 pandemic on the mental health care in Cameroon published in October 2020 found various challenges in the mental health care in the country, including 'a weak health-care system, an inadequate mental health workforce, insufficient financing to pay for health care, lack of access to mental health medications, and the added complexity posed by ongoing humanitarian crises'.⁴

According to a research paper about a situation of mental health workers in the NWSW regions of Cameroon published in November 2023 in the PLOS Global Public Health journal, 'health care attacks are common' and according to its survey, 33 % of the mental health care workers experienced an attack in the previous 6 months.⁵

1.1 Prevalence of mental health issues

Regarding the prevalence of mental health issues in Cameroon, a paper published following an international conference on mental health, held in December 2022, suggested that there

¹ VOA News, Cameroon Clears Abandoned Mental Health Patients from Streets, 27 May 2021, [url](#)

² HRW, "They Are Destroying Our Future" - Armed Separatist Attacks on Students, Teachers, and Schools in Cameroon's Anglophone, December 2021, [url](#), p. 105

³ UNOCHA, Cameroon Humanitarian Bulletin Issue N°35 | August 2022, 16 September 2022, [url](#), p. 3

⁴ Mviena, J. L. M. et al., How mental health care is changing in Cameroon because of the COVID-19 pandemic, 20 October 2020, [url](#), p. 62

⁵ Chandini, M.A. et al., "It is because of the love for the job that we are still here": Mental health and psychosocial support among health care workers affected by attacks in the Northwest and Southwest regions of Cameroon, 2 November 2023, [url](#)

was no statistical data on people with mental health issues in Cameroon available.⁶ In its article from July 2023, Borgen Magazine, a magazine of the Borgen Project, a non-profit organization fighting poverty, reported that ‘many cases of mental health conditions go undiagnosed and untreated’ due to prevailing societal norms relating to mental health issues.⁷

Nevertheless, in 2022, sources reported on an increased occurrence of psychological issues faced by young men in Cameroon, including increased levels of substance abuse⁸, depression and suicidal behaviour.⁹

In an article published on 10 October 2022, VOA News reported that ‘the number of mental health patients in the country has more than doubled in the past year’, according to the government figures.¹⁰ According to the same source, the Vine Mental Health Center in Bamenda, in the Northwest region, saw ‘the number of psychiatric patients at the center increased from less than 20 in 2021 to over 100 in October 2022’.¹¹ According to a government representative, ‘the number of psychiatric patients seeking help in the [Northwest] region has increased from less than 2,500 to over 6,000 within the past year. [...] Overall, Cameroon says the number of mental patients in the central African state has more than doubled from about 10,000 to 23,000 in the past 12 months’.¹² In October 2022, The Hilltop Mail, an online newspaper covering news from the Northwest region of Cameroon, reported on an increase in the number of people with mental health issues in Bamenda, regional capital of the Northwest region. According to the locals, this was related to a drug use and ‘cultism’.¹³

1.2 Informal mental health sector

Sources reported that stigma, prejudice and traditional beliefs associated with mental health issues prevented people from seeking professional mental health treatment.¹⁴ Consequently, according to a report on mental illness in Cameroon published by the Aalborg University in August 2021, ‘many people resort to other sources of medicines and traditional healers’.¹⁵ In its article from July 2023, Borgen Magazine reported that ‘[t]raditional beliefs often attribute mental health issues to supernatural causes, leading individuals to seek spiritual remedies

⁶ Justine, L. M., , State of play of Mental Health in Cameroon: Achievements and Weaknesses of the System, n.d., [url](#), p. 10

⁷ Borgen Magazine, A Silent Crisis: Mental Health in Cameroon, 8 July 2023, [url](#). For information about Borgen Project, see: Borgen Project, About us, n.d., [url](#)

⁸ GenCap, A more generous embrace: Why addressing the needs of adolescent boys and men is essential to an effective humanitarian response in Cameroon’s North West and South West, July 2022, [url](#), p. 18; UNOCHA, Cameroon Humanitarian Needs Overview 2022, 14 April 2022, [url](#), p. 36

⁹ UNOCHA, Cameroon Humanitarian Needs Overview 2022, 14 April 2022, [url](#), p. 36

¹⁰ VOA News, Cameroon Sees 100% Increase in Mental Health Care Seekers, 10 October 2022, [url](#)

¹¹ VOA News, Cameroon Sees 100% Increase in Mental Health Care Seekers, 10 October 2022, [url](#)

¹² VOA News, Cameroon Sees 100% Increase in Mental Health Care Seekers, 10 October 2022, [url](#)

¹³ The Hilltop Mail, Mental Health disorders: sufferers on the rise in Bamenda’s streets, 17 October 2022, [url](#)

¹⁴ Borgen Magazine, A Silent Crisis: Mental Health in Cameroon, 8 July 2023, [url](#); Justine, L. M., State of play of Mental Health in Cameroon: Achievements and Weaknesses of the System, n.d., [url](#), p. 11; Mviena, J. L. M. et al., How mental health care is changing in Cameroon because of the COVID-19 pandemic, 20 October 2020, [url](#), p. 62

¹⁵ Tchinda, L., Mental Illness Stigma In Denmark And Cameroon: Exploring The Social Workers’ Perspectives And Approaches To Stigma Reduction, Aalborg University, August 2021, [url](#), p. 16

rather than professional assistance'.¹⁶ According to the Director of Mental Health at The Ministry of Public Health of Cameroon, '[p]atients first go to traditional healers or even so-called "revival" churches and exorcist priests to ward off bad luck. This creates a considerable delay in support [...]'.¹⁷

According to the report on mental illness in Cameroon published by the Aalborg University in August 2021, the informal mental health sector in Cameroon consisted of 'traditional (indigenous) healers and the clergy (churches)'.¹⁸ The same report found that '[i]ndigenous healers are believed to possess supernatural powers, undertake diagnoses and propose treatment. They can connect the past and present by mapping out the circumstances through which the "evil spirits" that caused sickness gained access to the mentally sick individuals'.¹⁹ Regarding the involvement of churches, the same source noted that '[t]he clergy regularly provides mental health support to patients. However, no church has received any training that would enable them to diagnose or support mentally ill patients. Faith healers with "curative powers" are on the rise in Cameroon. [...] Pastors or Preachers explain that (mental) illnesses are the product of sin and that healing (recovery) is conditioned by repentance from sin and following the footsteps of God'.²⁰

According to an article on an increase of mental health patients in Cameroon by VOA News published in October 2022, Cameroon's Ministry of Health 'urges civilians to seek medical help instead of taking psychiatric patients to traditional healers or pastors who claim they have miracle solutions to mental health problems'.²¹

2. Availability and accessibility of mental health care

According to the Cameroon Mental Health Atlas 2020, published by the World Health Organization (WHO) in April 2022, the total number of psychiatrists in Cameroon was 12 while the total number of psychologists was 300.²² A paper published following an international conference on mental health in various African countries, including in Cameroon, held in December 2022 in Trieste, Italy, the Director of Mental Health at The Ministry of Public Health of Cameroon noted that there were 15 psychiatrists, some 200 specialised nurses, and 30 clinical psychologists in the country.²³

¹⁶ Borgen Magazine, A Silent Crisis: Mental Health in Cameroon, 8 July 2023, [url](#)

¹⁷ Justine, L. M., State of play of Mental Health in Cameroon: Achievements and Weaknesses of the System, n.d., [url](#), p. 11

¹⁸ Tchinda, L., Mental Illness Stigma In Denmark And Cameroon: Exploring The Social Workers' Perspectives And Approaches To Stigma Reduction, Aalborg University, August 2021, [url](#), p. 17

¹⁹ Tchinda, L., Mental Illness Stigma In Denmark And Cameroon: Exploring The Social Workers' Perspectives And Approaches To Stigma Reduction, Aalborg University, August 2021, [url](#), p. 17

²⁰ Tchinda, L., Mental Illness Stigma In Denmark And Cameroon: Exploring The Social Workers' Perspectives And Approaches To Stigma Reduction, Aalborg University, August 2021, [url](#), p. 17

²¹ VOA News, Cameroon Sees 100% Increase in Mental Health Care Seekers, 10 October 2022, [url](#)

²² WHO, Mental Health Atlas 2020; Member State Profile; [Cameroon], 15 April 2022, [url](#), p. 2

²³ Justine, L. M., , State of play of Mental Health in Cameroon: Achievements and Weaknesses of the System, n.d., [url](#), p. 11

According to sources from 2021, there were two public hospitals in Cameroon handling mental health issues, namely Hospital Jamot in Yaoundé and Hospital Laquintinie in Douala.²⁴

According to an article on people with mental issues in Cameroon dated 17 October 2022, published by The Hilltop Mail, '[i]n Bamenda, very little medical care is available for them. A faith based institution in Nkwen Bamenda known as the Emaus Center has been taking care of those with mental illnesses for many years. No one could comment on the situation of the institution at the time of this report'.²⁵

According to sources²⁶ interviewed by Swiss Refugee Council for their query response on the mental health in Cameroon published in July 2019²⁷, a chronic complex post-traumatic stress disorder and a combined anxiety and depressive disorder could be treated in the Baptist Convention Hospital in Mutengene in the Southwest region.²⁸ Regarding the treatment in the Northwest region, according to the same sources, it was available in Kumbo (Bansoa), as well as in the Integrated Mental Health Care Centre in the village of Babungo. Furthermore, the treatment was available in the Community Counseling Clinic in Bamenda, in the Family Care Centre (FCC) of the Banso Baptist Hospital, in the Bamenda Regional Hospital, and in the Community Counseling Clinic of the Mbingo Baptist Hospital.²⁹

Regarding the treatment of persons with severe depression and acute suicidality in the Southwest region, according to the same sources cited by the Swiss Refugee Council query response, they could be stationary treated in the Baptist Convention Hospital in Mutengene and in the Presbyterian General Hospital in Kumba. In the Northwest Region, they could be treated in Kumbo (Bansoa), as well as in the Family Care Centre of the Banso Baptist Hospital, in the Bamenda Regional Hospital, and in the Mbingo Baptist Hospital.³⁰

According to the same source, costs for a treatment would be around 15 EUR, but this can depend on a place, and costs for the medicine needed for a treatment were estimated at between 50 bis 60 EUR for one month.³¹ According to the WHO's Cameroon Mental Health Atlas 2020, the government's total expenditure on mental health was 1 % of total government

²⁴ GGA, The cracks in Cameroon's health system, 15 March 2021, [url](#); Tchinda, L., Mental Illness Stigma In Denmark And Cameroon: Exploring The Social Workers' Perspectives And Approaches To Stigma Reduction, Aalborg University, August 2021, [url](#), p. 16

²⁵ The Hilltop Mail, Mental Health disorders: sufferers on the rise in Bamenda's streets, 17 October 2022, [url](#)

²⁶ The sources interviewed for the Swiss Refugee Council query response include a former employee of the Cameroonian health ministry, a nurse specialising in mental health, a doctor, a medical worker, and an NGO worker, all based in Cameroon. Swiss Refugee Council, Kamerun: Behandlung psychischer Erkrankungen in den anglophonen Regionen [Cameroon: treatment of mental illness in the Anglophone regions], 1 July 2019, [url](#), pp. 6, 9-10

²⁷ The source has been included due to its relevance for the query even though it has been published before its reference period.

²⁸ Swiss Refugee Council, Kamerun: Behandlung psychischer Erkrankungen in den anglophonen Regionen [Cameroon: treatment of mental illness in the Anglophone regions], 1 July 2019, [url](#), p. 9

²⁹ Swiss Refugee Council, Kamerun: Behandlung psychischer Erkrankungen in den anglophonen Regionen [Cameroon: treatment of mental illness in the Anglophone regions], 1 July 2019, [url](#), pp. 9-10

³⁰ Swiss Refugee Council, Kamerun: Behandlung psychischer Erkrankungen in den anglophonen Regionen [Cameroon: treatment of mental illness in the Anglophone regions], 1 July 2019, [url](#), pp. 10-11

³¹ Swiss Refugee Council, Kamerun: Behandlung psychischer Erkrankungen in den anglophonen Regionen [Cameroon: treatment of mental illness in the Anglophone regions], 1 July 2019, [url](#)

health expenditure, and the majority of persons with mental health issues paid for the services and medicines 'mostly or entirely out of pocket'.³²

Additional information on impact of the conflict on healthcare facilities in the Southwest region can be found in the EUAA Query [Impact of the conflict on availability and accessibility of healthcare facilities in the Southwest region](#), published on 14 November 2023.

Additional information on treatment of healthcare workers by the state in the Anglophone regions can be found in the EUAA Query [Treatment of healthcare workers by the state in Northwest and Southwest \(Anglophone\) regions, including whether healthcare workers are perceived as part of separatist groups by the state](#), published on 17 November 2023.

Additional information on security situation can be found in the EUAA Query [Security situation in the Far North, Northwest and Southwest regions](#), published on 11 October 2023.

3. Treatment by state

According to the annual human rights report on Cameroon by USDOS covering 2022: 'A 2010 law provides additional protection to persons with physical, sensory, intellectual, or mental disabilities. The protections under the law cover access to education and vocational training, employment, health services, information and cultural activities, communications, buildings, sports and leisure, transportation, housing, and other state services'.³³ According to the same report, the authorities did not enforce the law 'effectively'.³⁴ Corroborating information could not be found among the sources consulted by EUAA within the time constraints.

An article by Good Governance Africa (GGA), an advocacy non-profit organisation aiming at improving governance in Africa, published on 15 March 2021, stated that Cameroon does not have a mental health policy and 'a simplified guide on the handling of mental cases was only introduced in 2017. Mental health is only mentioned in the general health policy'.³⁵

According to a paper on the impact of the COVID-19 pandemic on the mental health care in Cameroon published in October 2020, 'Cameroon's Ministry of Public Health has taken pragmatic steps towards ensuring that mental health is part of a core health systems approach'.³⁶ According to the same source, the approach to the mental health issues in Cameroon was 'transformed' during the pandemic.³⁷

As reported by VOA News in an article from May 2021, 'local councils in Cameroon have social affairs services that will assist in the treatment of all abandoned mental health patients in the

³² WHO, Mental Health Atlas 2020; Member State Profile; [Cameroon], 15 April 2022, [url](#), pp. 1-2

³³ USDOS, 2022 Country Report on Human Rights Practices: Cameroon, 20 March 2023, [url](#), p. 47

³⁴ USDOS, 2022 Country Report on Human Rights Practices: Cameroon, 20 March 2023, [url](#), p. 47

³⁵ GGA, The cracks in Cameroon's health system, 15 March 2021, [url](#)

³⁶ Mviena, J. L. M. et al., How mental health care is changing in Cameroon because of the COVID-19 pandemic, 20 October 2020, [url](#), p. 62

³⁷ Mviena, J. L. M. et al., How mental health care is changing in Cameroon because of the COVID-19 pandemic, 20 October 2020, [url](#), p. 62

company of family members,’ and the government has asked ‘family members to take relatives with mental health problems to hospitals for treatment’.³⁸

A paper published after an international conference on mental health in various African countries held in December 2022, noted in relation to Cameroon that ‘the absence of a mental health legislation is depriving people living with a lived experience of mental illness of their right to mental health in most regards [...]. Stronger political will for mental health development is growing steadily [...], but concrete actions to prioritize mental health remain largely insufficient. Especially universal coverage for mental health which will enable greater access and availability of mental health care services for all’.³⁹ According to the same source, ‘there is a political will to promote Mental Health in Cameroon, but there is a deficiency in the promotional, preventive, and curative components, at the organizational level, in terms of human resources, infrastructure, training, and the supply of drugs’.⁴⁰

According to an article by Borgen Magazine, published on 8 July 2023, ‘[e]fforts are underway in Cameroon to address mental health challenges [...]. [...] Currently, the Ministry of Public Health has initiated collaborations with international partners, such as the World Health Organization and Médecins Sans Frontières, to provide training workshops and capacity-building programs for health care providers across the country’.⁴¹ The same source reported that ‘[t]hrough lobbying efforts and partnerships with governmental bodies, CMHF [Cameroon Mental Health Foundation] has successfully influenced legislation to secure funding and prioritize mental health services. These policy changes have resulted in the allocation of substantial resources to expand mental health facilities and train health care professionals, thus amplifying the reach and impact of CMHF’s work’.⁴² Corroborating information could not be found among the sources consulted by EUAA within the time constraints.

4. Treatment by non-state actors and by society

4.1 Treatment by non-state actors

Information on treatment of individuals with mental health issues by non-state actors in Northwest and Southwest (Anglophone) regions could not be found among the sources consulted by EUAA within time constraints.

4.2 Treatment by society

³⁸ VOA News, Cameroon Clears Abandoned Mental Health Patients from Streets, 27 May 2021, [url](#)

³⁹ Demassosso, D., Leveraging Lived Experience: The Case of the Cameroonian Association of People Living with a Mental Health Problem, n.d., [url](#), p. 41

⁴⁰ Justine, L. M., State of play of Mental Health in Cameroon: Achievements and Weaknesses of the System, n.d., [url](#), p. 12

⁴¹ Borgen Magazine, A Silent Crisis: Mental Health in Cameroon, 8 July 2023, [url](#)

⁴² Borgen Magazine, A Silent Crisis: Mental Health in Cameroon, 8 July 2023, [url](#)

According to sources dated 2021-2022, mental health issues in Cameroon were seen as connected to witchcraft⁴³ and people affected by them faced stigmatisation⁴⁴ and were rejected by society⁴⁵.

In an article published in May 2021, VOA News reported that '[t]raditionally, many Cameroonians believe that mental health crises are divine punishment for wrongdoing. Some say witchcraft or spiritual possession are responsible for mental illness'.⁴⁶ An article on the issue published by Good Governance Africa in March 2021 explained that '[p]eople who suffer from mental health problems in Cameroon are usually looked at with scorn. Mental health problems are not culturally acknowledged, and people are sceptical of scientific explanations. So, many do not regard it as an illness but some sort of curse, witchcraft, or sign of ill omen and that the patient should be avoided'.⁴⁷

According to the Director of Mental Health at the Ministry of Public Health of Cameroon, as quoted in a paper published following a mental health conference held in December 2022, people with mental illnesses in Cameroon were sometimes 'accused of being responsible for their situation because they broke the pact signed with the devil'.⁴⁸

Sources reported on cases when families abandoned their family members with mental health issues and left them on the streets.⁴⁹ Specifically, according to an article about mental health in Cameroon by VOA News published in October 2022, citing the director of the Vine Mental Health Center in Bamenda, 'many families lack the resources to care for psychiatric patients at home and either abandon the patients at the center or put them on the streets'.⁵⁰ An article published on 17 October 2022 by the The Hilltop Mail reported that '[f]amilies here easily give up on members with mental health issues as soon as it becomes severe forcing them to spend the rest of their lives on the streets. Reports talk of persons with mental health disorders who appear on the streets of Bamenda. Some are said to have been transferred by their families from other towns or cities', including from Bafoussam and Mbouda.⁵¹

As reported by VOA News in an article from May 2021, over 300 'psychiatric patients' were abandoned by their families in the streets of Yaounde, and according to the government

⁴³ Sunkel, Ch. and Sartor, C., Perspectives: involving persons with lived experience of mental health conditions in service delivery, development and leadership, June 2022, [url](#); GGA, The cracks in Cameroon's health system, 15 March 2021, [url](#); Justine, L. M., State of play of Mental Health in Cameroon: Achievements and Weaknesses of the System, n.d., [url](#), p. 10; VOA News, Cameroon Clears Abandoned Mental Health Patients from Streets, 27 May 2021, [url](#)

⁴⁴ Africa News, In Cameroon does being mentally ill mean being abandoned?, updated 31 March 2021, [url](#); Justine, L. M., State of play of Mental Health in Cameroon: Achievements and Weaknesses of the System, n.d., [url](#), p. 10

⁴⁵ Africa News, In Cameroon does being mentally ill mean being abandoned?, updated 31 March 2021, [url](#); Justine, L. M., State of play of Mental Health in Cameroon: Achievements and Weaknesses of the System, n.d., [url](#), p. 10

⁴⁶ VOA News, Cameroon Clears Abandoned Mental Health Patients from Streets, 27 May 2021, [url](#)

⁴⁷ GGA, The cracks in Cameroon's health system, 15 March 2021, [url](#)

⁴⁸ Justine, L. M., State of play of Mental Health in Cameroon: Achievements and Weaknesses of the System, n.d., [url](#), p. 10

⁴⁹ Africa News, In Cameroon does being mentally ill mean being abandoned?, updated 31 March 2021, [url](#); The Hilltop Mail, Mental Health disorders: sufferers on the rise in Bamenda's streets, 17 October 2022, [url](#); VOA News, Cameroon Sees 100% Increase in Mental Health Care Seekers, 10 October 2022, [url](#)

⁵⁰ VOA News, Cameroon Sees 100% Increase in Mental Health Care Seekers, 10 October 2022, [url](#)

⁵¹ The Hilltop Mail, Mental Health disorders: sufferers on the rise in Bamenda's streets, 17 October 2022, [url](#)

figures, ‘the number of abandoned psychiatric patients increased from 50 to more than 300 in Yaounde within two years. At least 2,700 patients are on the streets all over Cameroon with more than 400 in the commercial capital city Douala. Cameroon counted 1,300 such patients in its territory in 2019’.⁵²

In its article from July 2023, Borgen Magazine reported that ‘[m]any Cameroonians with mental health conditions suffer in silence, as they often fear judgment, discrimination and potential repercussions. Tragically, instances of inhumane treatment have come to light, where individuals with mental illnesses are confined to “prayer camps” under degrading conditions’, where they were subjected to ‘physical abuse’ and ‘mistreatment’.⁵³

4.3 Treatment by non-governmental and civil society organisations

In an article published on 8 July 2023, Borgen Magazine mentioned a role that non-governmental organizations play in tackling mental health issues in Cameroon, with one such organisation being the Cameroon Mental Health Foundation (CMHF), active since 2019⁵⁴. The CMHF worked towards destigmatization of mental health in the population and ‘has collaborated with health care providers to establish specialized clinics across the country’, providing treatment to over 10 000 patients.⁵⁵ According to the same article, other organisation active in the field were the Hope for Mental Health Initiative and the Mental Health Support Network.⁵⁶ According to the article, they ‘offer peer support, counseling services and community-based interventions, enhancing the overall support system for those grappling with mental health challenges’.⁵⁷ The source did not explicitly specify whether these organisation were active in the NSW regions.

In a paper published following a mental health conference held in December 2022, a mental health advocate and clinical psychologist in Cameroon described changes in the mental health care in the country as a ‘mental health revolution’, noting that ‘private-public collaboration has been instrumental in enabling major milestones in building the elements of a mental health system in Cameroon (e.g., mental health policy, advocacy, and promotion). INGOs and local associations are having growing space to provide for mental health needs of users - e.g., HIFA, MHIN Africa, ACPAP-SM, UNIPSY et Bien-etre, Soins Psy Sans Frontier, RAPHA-PSY, CBHS...’.⁵⁸ The source did not explicitly specify whether these organisations were active in the NSW regions.

In an article from May 2021, VOA News reported that Living Vine Mental Health Center ran a campaign to remove people with mental health issues from the streets, some of them who have escaped traditional healers and Christian pastors who claimed to treat them by ‘chasing

⁵² VOA News, Cameroon Clears Abandoned Mental Health Patients from Streets, 27 May 2021, [url](#)

⁵³ Borgen Magazine, A Silent Crisis: Mental Health in Cameroon, 8 July 2023, [url](#)

⁵⁴ Borgen Magazine, A Silent Crisis: Mental Health in Cameroon, 8 July 2023, [url](#)

⁵⁵ Borgen Magazine, A Silent Crisis: Mental Health in Cameroon, 8 July 2023, [url](#)

⁵⁶ Borgen Magazine, A Silent Crisis: Mental Health in Cameroon, 8 July 2023, [url](#)

⁵⁷ Borgen Magazine, A Silent Crisis: Mental Health in Cameroon, 8 July 2023, [url](#)

⁵⁸ Demassosso, D., Leveraging Lived Experience: The Case of the Cameroonian Association of People Living with a Mental Health Problem, n.d., [url](#), p. 41

evil spirits'.⁵⁹ At the same time, the organisation encouraged families against sending their family members to traditional healers and pastors to receive a mental health treatment.⁶⁰

In 2020, Médecins Sans Frontières (MSF) as one of the few medical organisations present in the NWSW, provided 1 725 mental health consultations in the Northwest region but their services have been stopped by the authorities, after accusing them of connections to the non-state armed groups.⁶¹ According to an article updated on 2 May 2023, 'in December 2020, MSF medical services were suspended by Cameroon's authorities in the North-West Region; this suspension has not been lifted'.⁶²

According to an August 2021 report, MSF were providing 'Mental Health and Psychosocial Support for Covid-19 patients in Buea', in the Southwest region.⁶³

In a situational report on NWSW regions covering July 2022, UNOCHA reported on mental health and psychosocial services provided by 'Child Protection partners' to 16 487 children and caregivers.⁶⁴

5. Availability of state protection from harm by non-state actors

Information on availability of state protection from harm by non-state actors could not be found among the sources consulted by EUAA within time constraints.

⁵⁹ VOA News, Cameroon Clears Abandoned Mental Health Patients from Streets, 27 May 2021, [url](#)

⁶⁰ VOA News, Cameroon Clears Abandoned Mental Health Patients from Streets, 27 May 2021, [url](#)

⁶¹ MSF, People in northwest seek healthcare as MSF denied providing medical services, 22 June 2021, [url](#)

⁶² MSF, MSF ambulance service in South-West Cameroon: essential in a region beset by violence, updated 2 May 2023, [url](#)

⁶³ WHO, Health Cluster, Cameroon: North-West and South-West Health Cluster COVID-19 Epidemiological Bulletin (July, 2021), 4 August 2021, [url](#), p. 3

⁶⁴ UNOCHA, Cameroon: North-West and South-West - Situation Report No. 45 (July 2022), 5 September 2022, [url](#), p. 4

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