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Struggling against all odds: Psycho-social implications of the Anglophone Crisis on Internally Displaced Youths in Cameroon

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Abstract

For over three years, Cameroon has been facing a socio-political crisis which has affected mainly the anglophone regions of the country. The crisis which started as peaceful protest from lawyers and teachers who were demanding equal treatment in their respective vocations escalated when, rather than invite them to the dialogue table, the government chose a military response which led to the loss of innocent lives and total outrage amongst the peoples in these regions. As a result of this, thousands have lost their lives, hundreds of thousands are displaced both internally and externally in neighboring Nigeria, and hundreds of villages have been razed to the ground in different parts of the affected regions. Based on survey conducted amongst internally displaced persons (IDPs) and their hosts in different regions of Cameroon, this paper focuses on the psycho-social impact on young persons. It begins by zooming in on this dire reality through stories of affected populations before proceeding to discuss the immediate and long-term

implications of the crisis on this very important part of the population. It shall conclude with practical recommendations for sustainable assistance to internally displaced persons and action points for key stakeholders in Cameroon.

Keywords: Internally Displaced Persons; Anglophone Crisis; Youth; psycho-social support; Cameroon

1   The Stories

Danny is a 34-year old father of three displaced to Bamenda, the capital city of the North West region of Cameroon from Wum (a small town about 90Km away from Bamenda). Before being forced to move to Bamenda, Danny was a business owner and employer of about four other youths. He knew it was time to leave his beloved Wum when his shop was set ablaze by a group of unidentified armed men for allegedly opening for business on the wrong day. At the time of our encounter, Danny was particularly troubled by the plight of his 14-year old daughter whom he had relocated to Yaoundé to continue her education. She returned pregnant and mute leaving the entire family in confusion. He had received physical aid from a number of humanitarian organizations since his move but remained incapable of fully bouncing back from the losses his family had suffered.

Angela was a 27-year old teacher who had fled her base in Kumbo as a result of the crisis. She was lucky enough to belong to a big network of teachers that had branches across the national territory. It didn't take long before she got recruited to teach in one of the private schools recommended by her network. One fateful day in February, Angela and a friend were in town shopping for furniture when a loud explosion went off in the building next to the one they were in. Angela collapsed at the sound of the explosion and medical efforts were insufficient to save her. She died on the spot.

Susan is a 35-year old single mother who lives in a single bedroom apartment with two kids of her own. She is a petty trader who hawks bananas and avocados. Without sufficient resources to situate her business anywhere, Susan carries her supplies on her head and moves from one neighborhood to another to sell. During our last encounter, she couldn't stop the tears from rolling down her cheeks as she described her current reality. Due to the crisis, she had been obliged to open her home to relatives from the troubled regions of the country who were fleeing to safety. Suddenly, she had gone from trying to make ends meet for her immediate family of three to now hosting fourteen internally displaced persons (IDPs) with no place to turn. With no capital to increase the size of her

business, she recounted with great anguish the numerous days she had been unable to put food on the table but hopes that things get better soon so her relatives can return to their respective homes. In that same breath, however, she wonders if she would live to see that day.

Angelo walked into the Pastor's office on a Wednesday morning with nothing but the clothes he was wearing begging him for help. He used to fight with the Amba boys (the local militia that rallied to defend the regions from insurgences by government forces) for the protection and liberation of the anglophone regions until recently when he became sick of the gruesome evil he had gotten entangled in and escaped to Yaoundé. He arrived the city without any identification and now lived on the streets besides the church building. Having summoned the courage to walk in on this particular day, he was hoping that the Pastor would get him help somehow without getting the government authorities involved. Asked why he decided to walk into the church and not another structure, he confessed that he thinks that only God can forgive him and make a way for him to continue with his life. *We have taken too many lives and the memories of those atrocities rob me of sleep night after night. Can you help me?* He asked in desperation, eyes locked with those of the Pastor as if trying to read the intentions of his heart.

When Anita first walked into the Kids4real center in Bamenda, she had the sweetest smile on her face but no concept of respect for her elders or her environment. Fascinated by the facilities, she ran off from room to room not minding that both her mom and the center staff were trying to get her attention. Having been born a year before the crisis escalated, she had been robbed of her opportunity to go to school when she was ready. With her parents having to work even on weekends to make ends meet, she was practically raised by a neighbor who after attending to five kids of her own had practically no time to devote to her. Her parents were hoping that the center would be a better alternative for her and equally help her learn the basics about character and literacy. Anita is part of a generation of kids being raised with no privilege to go to school and whose only sense of *normal* is gunshots, kidnappings, beheadings, and all else that characterizes the ongoing crisis in these two regions of Cameroon.

Based on first-hand experience serving IDPs in different parts of the country, this paper begins by shedding light on the realities of the youths in Cameroon in the face of the crisis and then proceeds to highlight the gaps in mental health services to victims. It concludes by attempting proposals for the way forward.

2   The Reality

According to the World Population Review (WPR, 2019), as of September 2019, Anglophone Cameroon (also referred to as West Cameroon or Southern Cameroon) is approximately 20% of the population of Cameroon. Out of this number, over 65% are below the age of 25 (CIA World Factbook, 2018). Since the onset of the socio-political instability in October 2016, there has been massive bloodshed, kidnappings, arrests and torture as well as loss of lives and property within the Anglophone regions of the country. The International Crisis Group (ICG) estimates that since September 2017, the crisis has left at least 1,850 dead, 530,000 internally displaced and another 35,000 refugees in neighboring Nigeria. It is equally estimated that over 200 villages have been either partially or completely burned to ashes in the affected regions (CHRDA-RWCHR, 2019). This constitutes a staggering 25% of the population of this region. Families have been split in the process of escaping the violence of war and the danger of heavy gun firing to other regions with some being obliged to run into the bushes in their search for safety. In fact, the OCHA estimates that about 80% of those who have been forced to flee the crisis have taken refuge in the forest completely deprived of the most basic human rights.

What began as peaceful protests by anglophone teachers and lawyers demanding equal rights and treatment from the government as well as some structural adjustments in the latter part of 2016 quickly deteriorated into an armed conflict when the government responded to protesters with arrests, floggings, detention under horrific circumstances, and outright killings (Amnesty International, 2017; International Crisis Group, 2018). Hard measures by the government, notably the deployment of the Rapid Intervention Battalion, commonly known by its French acronym BIR, nullified the few soft measures it took to address the demands like the approval of a bilingualism and multiculturalism commission as well as the recruitment of about 1000 teachers with competencies in technical and scientific subjects for the schools in the English-speaking regions of the country (Okereke, 2018). In response to this military approach by the government, members of diverse separatist groups took to arms to protect themselves and their relatives thus leading to a conflict that continues to this very day. As it to be expected, the current crisis has resulted in untold pain and suffering on the locals the magnitude of which cannot be fully estimated. Corroborating testimony from locals, the Human Rights

Watch (2018) reports that both government security forces and these armed separatist groups have committed extrajudicial executions, burned property, carried out arbitrary arrests, tortured and maimed detainees. Their reports have consistently documented a range of abuses by both sides in the Anglophone regions, including arson attacks on homes and schools.

In addition to the full-blown conflict between these two parties, moderates and federalists occupy middle grown persistently canvassing support from international bodies for their own causes. The historical roots of this crisis situate itself in the colonial past of the people who now constitute the Republic of Cameroon about which Konings and Nyamnyoh (1997), and Pomerolle and De Marie Heungoup (2017), amongst others, have written articulately. Despite the plight of the populations in these two regions, a clear path to the restoration of the reign of peace in Cameroon is yet to be found due to the fact that government and separatist groups continue to maintain irreconcilable positions while moderates and federalists are unable to organize. And while the stalemate persists, the nation's most vulnerable populations – women, children and the elderly – continue to suffer the brunt of the force. Most schools have been closed for the fourth academic year in a row and both teachers who have tried to fulfill their vocation and students who have dared to access their right to education have been tortured, some maimed and others killed.

The persisting violence from both military forces and varied vigilante-turned-rebel groups in towns and villages continue to render life in these regions unbearable. Many children have been orphaned by the crisis while families have had to make very difficult decisions to ensure that both parents and children have access to basic human rights. Given that schools remain closed in most of West Cameroon, some families have been split for multiple years in a row as parents continue to juggle the very difficult decision of either sending their kids to relatives and friends in other regions to go to school or sacrifice the education of their children on the altar of family unity. The phenomenon of child soldiers is another sad reality as a significant percentage of those who are joining the armed militias are below 15. Teenage pregnancies are at an all-time high in these regions with huge social implications for the nation as a whole, says sociologist, Emmanuel Yenshu (Cameroon Tribune, 2019). As youths continue to idle around at home, unable to go to school, some have taken to trying out different things on the streets including drugs with most of them getting addicted to the over the counter pain reliever, tramadol. The same are at a greater risk of contracting other diseases which could very

well be avoided if their right and access to education had not been tampered with (Perception Global Media, [PGM] 2017). Whether it be those who are struggling to stay alive in the different towns and regions in West Cameroon or those who have escaped to other regions, the prevalence of emotional and psychological ailments such as anxiety, depression, and other symptoms of psychological trauma is on the increase.

The facts in this paper are drawn from a combination of in-depth interviews with IDPs in the two regions, surveys on the situation of IDPs conducted between October 2018 and July 2019 by Me4real International within the context of her outreach to the same, as well as the consultation of other secondary sources. Overall, a sample size of 1498 was used for the research that informs the perspectives shared in the following pages.

3   The ongoing response efforts

As the situation in these regions continue to worsen, it is encouraging to see different actors on the ground responding to the needs of the persons affected by the crisis. As expected, both local and international humanitarian actors are present on the scene meeting the basic physical needs of the people through the distribution of packages containing food, toiletries, shelter, etc. Amongst these actors are the UN OCHA and the UNCHR having activated both their food security and shelter clusters in response to the deteriorating condition of IDPs. Other international actors include the Norwegian Refugee Commission (NRC), UNAID, etc. Churches and other local associations/organizations are equally contributing towards meeting the physical needs of those displaced from the most interior parts of the regions. Encouraging their members to open their homes to those in need for shelter is one way that the churches are responding. There are ongoing food drives in respective congregations across the country to meet the needs of those affected the most as well as calls for prayer and encouragement to them.

Besides the physical needs of those affected by the crisis, other actors can equally be seen tackling different areas of need as per their esteemed priorities. Political actors focus on macro political issues and mediation attempts; security actors raise their voices against the heavily militarized response by the government; human rights activists insist on the need to ensure the provision of basic human rights to those affected as well as the return of the rule of law; other civil society groups canvas for the civic rights of the citizens in these regions while criminal jurisdictions are rallying attention on issues of possible war crimes committed by all the parties involved in the ongoing conflict.

In both troubled regions, there are other individuals who are actively involved in seeking ways to reach out with relief efforts to those who are currently hiding in the bushes with little or no means of livelihood. Conversations with some of the actors who prefer to remain anonymous for security reasons confirm that while there are a few success stories of relief actually getting to those who need it the most in these isolated parts of the forests in both regions, the risks involved have scared away all but very few individuals (Personal communication, August 12, 2019). Some victims, after spending countless nights in the bushes eventually risk return to the places of habitation while others manage to find a way to neighboring countries. Some of the actors with a passion to reach IDPs in these deplorable conditions end up abducted by armed separatist groups for violating territorial protocols in seeking to bring aid. One victim of these kidnappings who spent about three weeks in the custody of unnamed armed militias in the South West region continues to battle significant health challenges incurred during that season.

The UN OCHA estimates that despite the relief efforts by all these actors combined, there remains a wide gap between those in desperate need and those actually getting any help. As per their May 2019 report, relief efforts currently reach less than 40% of those in need. It is worth noting that the needs as described by this and other reports focus mainly on physical elements like food, water, health care, shelter, etc. However, based on a survey conducted amongst internally displaced persons in the Northwest, southwest and center regions of the country in July 2019 (Me4real International, July 2019), over 73.5% of victims suffer from trauma related mental health related issues like depression, anxiety, insomnia, irritability, poor concentration, extreme lethargy and general fatigue, amongst others. So even if current relief efforts reach up to 100% of the population in need, they would still be grossly insufficient to address the areas that need to be addressed for the affected persons to be able to get back on their feet. So, in addition to the existing gap in getting relief efforts to those in desperate need, an even wider gap exists in mental health care which is likely to create another crisis down the road if nothing is done about it.

4   The implications

According to the American Psychological Association (APA), trauma is the emotional response that someone has to an extremely negative event. Although trauma is a normal reaction to horrible events, its effects can be so severe that they interfere with the person's ability to live a normal life. Psychological trauma results when the amount of stress that people are exposed to exceeds their ability to cope, or adequately process and integrate the emotions involved with the different experiences. According to the Diagnostic

Statistical Manual of Mental Disorders, psychological distress resulting from exposure to traumatic or stressful events is quite varied. Research and clinical experience indicate that individual victims may exhibit acute or delayed symptoms of posttraumatic stress disorder (PTSD), a complex post-traumatic syndrome, any of a spectrum of trauma-related psychiatric disorders, and a wide variety of post-traumatic response and recovery patterns (Harvey, 1996). While the extent and impact of the trauma depends on the general health of the person prior to the trauma-producing events, for a while now, psychological research has confirmed that the extent and duration of traumatic exposure, characteristics of traumatizing events as well as the interpretation of the same by victims, and even the qualities of the larger environment (Koss & Harvey, 1991) are equally important in determining the extent of the impact on victims.

Furthermore, human vulnerability to psychological trauma and its dangers is rendered complex by the reality that it can either be primary or secondary. Primary trauma results from events experienced by the victims themselves while secondary trauma results from exposure to the suffering of others. The victim does not necessarily have to be present at the time of the suffering to be traumatized but the same effect can result from hearing stories or watching videos of the suffering of others which have been in no short supply since the start of the crisis. In addition to the bloodshed that has been witnessed by the populations of these two regions, other trauma producing realities abound. For instance UN OCHA (September 2019) reports that almost 9 out of 10 children in the region remain out of school for the fourth year in a row with 80% of schools closed; about 462,000 people in both regions now fall within the crisis and emergency phases of food insecurity; an outbreak of measles has been confirmed in some parts of the South west region; up to 7000 children between 6-59 months suffer from severe acute malnutrition in the regions; over 36% of protection incidents in July alone were related to the destruction of houses and villages; less than 20% of rape victims are unable to access healthcare services; gender-based violence is on a steady rise; and over 630 households are reported to be displaced in both regions as they flee confrontations between the warring parties. Survey results (Me4real International, July 2019) put the prevalence of primary trauma at over 75% amongst IDPs and a surprising 45% prevalence of secondary trauma amongst the hosts of IDPs in the non-affected regions of the country.

While meeting basic needs of the victims is a necessary first step towards ensuring their reinsertion into society, Angela (referenced in the introduction to the paper), died not for

want of basic necessities but due to the impact of untreated trauma that haunted her despite having successfully removed herself from the region that produced her trauma. The following testimonies from victims confirm that help in processing the trauma they have experienced might actually be more important in the long run than meeting basic needs.

I am so happy today that someone is finally listening to me. I feel heard for the first time since my family and I escaped here to safety from Wum[1]. I have always known that I can overcome all challenges that life throws at me and have many stories of how that has happened in the past. My determination was strong when I was just a single young man trying to get my feet on the ground and became all the more so after I started my own family. We have two small children and I had promised myself that my wife and kids would never lack as long as I am alive. At first when this crisis started, everyone said I should leave Wum but I was determined to protect my business and my family in the middle of it all. And it worked, for a while until I woke up one day and my shop had been burned to the ground. I knew that it was time to leave and I am glad I did. I got to Bamenda determined to use the savings we have and start a fresh life for us but since I got here, it is as if something or someone has tied my hands behind my back. I am completely unable to function. After repeated encouragement from my wife and our host here, I decided to try something small but it too was taken from me when 'the boys' accused me of opening the shop on a 'contri Sunday.[2]' We still have some little money left and other organizations have helped us significantly in providing for our physical needs but as a man, that only leaves me depressed about how incapable of sustaining my own family I have become. I should be able to bounce back and create a new life for my family but I just couldn't and I had no idea why until today. Thank you for the trauma survival kit. For the first time, it feels as if I now have a map to lead me back home from this distant place in which I have been imprisoned in my mind. (Danny[3], Personal Communication, 23 July 2019).

When I first got here, I still had 2 boys running my farm in Nkambe so they would send me money regularly. However, for the past 8 months, I have not received any money from them and none of their numbers have been going through. Not long ago I ran into one of my neighbors from the village and he told me that the boys attacked the farm and made away with all the animals. My boys escaped to Nigeria through Akwaya when they tried to kill them. This new came when I had already enrolled in a nursing program here to try to jumpstart my life again. The things that worries me the most now is that I feel as if I am wasting the money I paid as tuition. I try very hard to make it to class but I cannot say that I am able to understand anything that is being thought. It is as if something takes over my mind whenever I either sit in class or wake up to study. My fiancée no longer calls me because I have not been able to send her any money for about three months now. The last time we talked, she said that she does not think that I am able to marry her. The friend who opened his home to me now seems to think that I don't want to talk to him despite the fact that I try to explain my lack of energy. I went to the school to ask for a

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[1] A small town in the NW region which has been hit pretty hard by the crisis.
[2] A pidgin English term used to refer to weekly ghost town days in both regions
[3] Not his real name

These two testimonies capture the crippling effects of untreated psychological trauma. Both men used strong words – imprisoned and trapped – to describe what they felt. Trauma incapacitates its victims leaving them unable to bounce back from the setbacks that they have suffered. Some of the effects we have observed in our work include inability to focus in class for teenagers in our school clubs, depression and alienation between spouses, lack of motivation and overall low energy, suicidal thoughts in some cases, anxiety, trauma-induced insomnia, emotional outbursts and vengeful thoughts, isolation accompanied by feelings of inferiority, etc. Physical symptoms like high blood pressure, racing heartbeat and palpitations, general health breakdown, amongst others. Overall, trauma shows up in different ways in the lives of different people based on some of the factors identified above as well as the unique ways in which individuals experience circumstances associated with the losses and pain they have suffered. And because most of those affected by this crisis were already dealing with some other forms of trauma from their childhood and other periods in their lives, these additional blows related to the crisis only end up complicating their struggle even further.

Despite these sobering psycho-social implications on the internally displaced youths in Cameroon, their resilience is worthy of note. In the midst of these challenging circumstances, some youths have defied and are defying the odds to blaze new trails through a rugged will to live and triumph regardless. Some of them have, despite pressures related to their forced migration, developed innovative income-generating businesses which offer employment to other Cameroonian youths in similar circumstances. Others have migrated their businesses from the troubled regions to safer parts of the country against near crippling odds. Still a handful have somehow managed to transform their pain and hurt into community development and advocacy causes and demonstrate rugged determination to fight for the good of other members in their communities. There are an equally significant number who despite having lost their diplomas to fires or other unfortunate circumstances related to the struggle wake up each day, brush themselves and engage in active job seeking with a willingness and humility to accept whatever positions present themselves. However, without psycho-social assistance, even this admirable resilience is bound to meet its end sooner than later. There

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[4] Not his real name

is no doubting, therefore that were this population to receive the mental health care that some of them desperately need, they could very well rise to become the generation that transform Cameroon for the better.

5   Conclusion and Recommendations

The socio-political crisis in the anglophone regions of Cameroon has left hundreds of thousands of internally displaced persons majority of whom are under 40 years of age. While the impact of the prevailing crisis is mostly being measured in terms of loss of lives and property, its effects run much deeper on social, emotional and psychological levels as a result of the trauma that most of them have suffered. Over 86% of IDPs identify mental health related issues as their most desperate need but unfortunately, current intervention and appraisal efforts miss this important component. Pre-existing issues have resulted in complex forms of trauma which require a lot more to be adequately treated. Untreated trauma degenerates into more complex forms which can result in even more dire consequences including suicide. Trauma is real even amongst persons who have themselves not suffered direct pain from their crisis. The stories of others – friends, relatives or complete strangers – have left them just as traumatized as those who have themselves lived through the sad realities.   The reach of psychological trauma is expansive as trauma has been proven to leave devastating emotional, physical, cognitive, behavioral, social and developmental effects on its victims. Everyone is equally vulnerable to trauma and whether sooner or later, trauma that goes untreated eventually overwhelms other areas of the individual's life making it impossible for them to bounce back from life's setbacks. As such, trauma-informed care is vital for sustainable assistance to IDPs. Any efforts at intervention and/or assistance that preclude mental health are like a band-aid used to cover an infected wound. One doesn't need a medical professional to know that such wounds only end up getting worse and affecting other areas of the individual's life. In order to avoid an even greater mental health epidemic down the road, three solutions are discussed.

- **Elaboration of a national rehabilitation plan:** Rather than continue to announce the unilateral efforts or good intentions of the government in reaching out to those affected the most by this crisis, it is time for all key stakeholders to be invited to the table to develop a comprehensive rehabilitation strategy for all those who have been displaced by this crisis elaborated. This cannot wait because the situation requires that efforts be coalesced in order to leverage all resources and existing expertise to help all the

factions – the displaced, the armed militia fighters, the state military, victims of social and emotional torture, etc. – reintegrate themselves back to society. Along with this concerted effort should come the establishment of necessary structures by the States to ease the intervention efforts furnished by all stakeholders. The Federal Emergency Management Agency (FEMA)[5] of the US Department of Homeland Security provides a good example for what such a structure could look like.

- **Holistic intervention approach:** When the government creates an agency that would coordinate relief efforts to those affected by this and other crisis in the nation, it would be easier for a more holistic intervention approach to be adopted in which all actors can unite around a common goal which embraces mental health in order to ensure efficient and effective help to those who need it the most and avoid duplication of efforts. As it is right now, different actors end up mimicking each other in the provision of services to those who need it the most. What this does, besides wasting the relief efforts is introducing a narrow view of the situation thereby relegating key elements required for a sustained intervention strategy, like mental health services, to the background. This would include measures aimed at promoting physical and psychological recovery and social reintegration of young victims of armed conflict and war by providing access to education and skills development to resume social and economic life (AU Youth Charter, Article 17 (g), 2006).

- **Ongoing conflict resolution, peace building and reconciliation strategy:** In tandem with Article 17, sub-section (b) of the AU Youth Charter, efforts to address the ongoing unrest in the nation must go beyond ending the conflict to seeking and putting practical measures in place to promote a culture of peace and tolerance amongst young people that discourages their participation in acts of violence, terrorism, xenophobia, racial discrimination, and gender-based discrimination, foreign occupation and trafficking in arms and drugs etc. The current conflict escalated as quickly as it did due to the existence of a rather volatile peace situation in the nation prior to the 2016 protests (Konings & Nyamnjoh, 1997; Mbouben, 2018). The need for implementation of a strategy which encompasses the peace building process as defined by the UN Peacekeeping Capstone Doctrine of 2008 – a range of measures targeted to reduce the risk of lapsing or relapsing into conflict by strengthening national capacities at all

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[5] Visit www.fema.gov to learn more.

levels of conflict management, and to lay the foundation for sustainable peace and development – cannot be overemphasized. The current anglophone crisis in the nation is the first, and will likely not be the last, hence measures to resolve this one must necessarily go beyond fixing whatever is currently broken now to laying down frameworks which will ensure that nothing gets broken in the future.

References

African Union Commission, (2006). African Youth Charter.

Amnesty International. (2017). A turn for the worse: violence and human rights violations in Anglophone Cameroon. Retrieved from https://www.amnesty.org/en/documents/afr17/8481/2018/en/

Central Intelligence Agency. (n.d.). Africa: Cameroon. Retrieved from https://www.cia.gov/library/publications/the-world-factbook/geos/cm.html

Center for Human Rights and Democracy in Africa. (2019). Cameroon's unfolding catastrophe. Retrieved from https://www.chrda.org/news/reports2019/cameroons-unfolding-   catastrophe-2019/

Harvey, M. R. (2006). An ecological view of psychological trauma and trauma recovery. *Journal   of Traumatic Stress*, 9(1), 3-23.

Human Rights Watch. (2019). The Anglophone crisis: Abuses on both sides. Retrieved from https://www.hrw.org/world-report/2019/country-chapters/cameroon

Index Mundi. (2018). Cameroon demographics profile 2018. Retrieved from https://www.indexmundi.com/cameroon/demographics_profile.html

International Crisis Group. (2019). Cameroon's Anglophone crisis: How to get to talks? Retrieved   from https://www.crisisgroup.org/africa/central-africa/cameroon/272-crise-anglophone-   au-cameroun-comment-arriver-aux-pourparlers

Konings, P., & Nyamnjoh, F. (1997). The Anglophone Problem in Cameroon. The Journal of   Modern African Studies, 35(2), 207-229.

Koss, M. P., & Harvey, M. R. (1991). *The rape victim: Clinical and community interventions*. Newbury Park, CA: Sage.

Mbouben, B. C. B.A. (2018). Women and peace building in Cameroon: Issues and perspectives. *The International Journal of Trend in Scientific Research and Development*, 4(2), 1864-1883.

Okereke, C. (2018). Analyzing Cameroon's Anglophone crisis. *Counter Terrorist Trends and Analyses, 10*(3), 8-12. Retrieved from http://www.jstor.org/stable/26380430

Perception Global Media. (2017). Cameroon: Social, economic consequences of the "Anglophone Crisis" in the NW and SW regions. Retrieved from http://www.perceptionglobalmedia.com/cameroon-social-economic-consequences-of- the- anglophone-crisis-in-the-nw-and-sw-regions/

Pommerolle, M. E., & De Marie Heungoup, H. (2017). The "Anglophone crisis": A tale of the Cameroonian Postcolony. *African Affairs*, 116(464), 526-538.

Psych Guides. (n.d.). Trauma Symptoms, Causes and Effects. Retrieved from https://www.psychguides.com/trauma/

UN OCHA. (2019). Cameroon: North-West and South-West Crisis, Situation Report N°9 as of 31 July 2019. Retrieved from https://www.humanitarianresponse.info/en/operations/cameroon/document/cameroon- north-west-and-south-west-crisis-situation-report-n°9-31-july

World Population Review. (2019). Cameroon population 2019. Retrieved from http://worldpopulationreview.com/countries/cameroon-population/

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