



# CAMEROON



## 56<sup>th</sup> SESSION OF THE COMMISSION ON THE STATUS OF WOMEN

NEW YORK, 27<sup>th</sup> FEBRUARY – 9<sup>TH</sup> MARS 2012

### STATEMENT OF

**MRS. ABENA ONDOA Née OBAMA MARIE THERESE**  
MINISTER OF WOMEN'S EMPOWERMENT OF AND THE FAMILY

### GENERAL DEBATE UNDER THE ITEM :

**THE EMPOWERMENT OF RURAL WOMEN AND THEIR ROLE IN POVERTY  
AND HUNGER ERADICATION AND IN DEVELOPMENT**

**Wednesday, 29<sup>th</sup> February 2012**

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**Madam. Chairperson,**

I wish, on behalf of the Cameroon Delegation, to extend to you and your team our hearty congratulations for the conduct of the 56<sup>th</sup> Session of the Commission on the Status of Women.

We are confident that your skills and the various contributions of stakeholders taking part in the deliberations will be combined to guarantee a comprehensive and fruitful Session.

**Madam. Chairperson,**

The theme of the 56<sup>th</sup> Session of the Commission on the Status of Women, "**The empowerment of rural women and their role in poverty and hunger eradication and in development** ", reflects one of Cameroon Government's major concerns, with a pride of place given to rural women in the country's Development Vision by 2035.

According to results of the 3<sup>rd</sup> General Population and Housing Census (GPHC) published in 2010, Cameroon's overall population is estimated at 19,406,100 inhabitants, with a rural population of 9,314,928 inhabitants, 4,745,697 of whom are women.

Most of these women living in rural areas work in the primary sector and their ratio, as compared to men, is quite significant (100 women as against 92 men). They are the main agricultural labor force, 50 to 70% depending on various regions, and are found in the sectors of food and cash crops, livestock, fishery, exploitation of non timber forest products where they have a key role in food self-sufficiency and security.

Although the overall incidence of poverty among women has dropped from 40.5% in 2001 to 33.4% in 2007, there is great variability between Regions. In some, it has increased while in others, it has dropped. It is worth noting that ¼ of households and 1/3 of promoters/heads of Enterprises are women.

Rural women however are the subject of a constant concern in Cameroon's various economic policies as they remain overwhelmingly, dependent on subsistence economy because of numerous economic, social, cultural, and infrastructural obstacles. Thus, in addition to farming, they have the burden of domestic responsibilities.

Despite this situation, which tends to make them more vulnerable than their urban counterparts, they contribute to the development of the rural world. Hence the need to empower them and build their capacities on coping with challenges such as eradicating poverty, hunger and contributing to the economic development of Cameroon.

To this end specific actions have been defined, in their favor, by the government in the areas of education, health, decision making, agriculture and rural development.

**As concerns education and training,** measures have been taken to facilitate the access of rural women and girls to education and training. These include, among others:

- The massive creation of primary schools and general and technical secondary education establishments. In addition, the Government has developed a non-formal system of education where it can be noted that:
  - 408 community schools have been established and are managed by communities;
  - 89 Women's Empowerment Centers have been established in urban and rural areas. These Centers have, from 2007 to 2010, trained 86,000 women, more than 70% of whom are found in rural areas;
  - 189 proximity vocational training facilities. These institutions recorded 24,269 trainees between 2009 and 2010, including 8,984 girls as against 15,285 boys;
- Free primary education which, generally, is of prime advantage to the rural population, because of their numbers and low income level;
- The establishment of incentive programs for girls to go to school and to retain them there, with special assistance for school-age girls;



- In addition, mothers have been sensitized to send the girl child to school and to equally share the household chores between boys and girls to give the latter the same chance for success in school;

**As concerns healthcare,** numerous actions have been undertaken in order to improve the health situation in rural areas and consequently improve on the health of women living in these areas. As illustration,

- A program for the construction of health centers in rural areas was launched in 2005. To date, 3,067 Integrated Health Centers and Sub-Divisional Medical Centers have been constructed in view of bringing health facilities closer to women;
- Free management of HIV-infected pregnant women and the reduction of treatment and laboratory cost are effective, with the actual cost standing at 6 US Dollars, down from 54 US Dollars ;
- The promotion of mother and child's health, reproductive health, and family planning is also effective. To this effect, the reopening of training schools for registered birth attendants and nurses in 2010 and 2011 and the re-launching of midwifery training, suspended for the past 20 years now are worth noting;
- There has been an increase in the number of midwives and registered birth attendant in health centers of the rural areas in order to reduce the rate of maternal and infant mortality;
- Health care workers in rural areas are provided with incentives to stabilize them in those areas: financial, housing facilities;
- Malaria prevention has been ongoing through the free distribution of treated mosquito bed nets to pregnant women and the launching of the campaign to distribute close to 9 million treated mosquito bed nets to families;
- Awareness campaigns are being carried out on the importance of prenatal consultations and the repair of obstetric fistulae, the majority of which victims come from rural areas. As part of the 2012 International Women's Day activities, free repair of fistulae has been underway at the University Teaching Hospital Center in Yaounde since last week.

- Since 2010, 25% of women operated upon in the Far-North and North Regions have received psychological, financial and material assistance for their socio-economic reintegration.
- Significant actions for the fight against harmful traditional practices to rural women's health, notably Female Genital Mutilation and early marriages are being carried out by the government, with the support of technical and financial partners and civil society.

**As concerns decision making**, numerous measures have been taken to increase and enhance women's participation in the preparation and implementation of local development plans. They include:

- The involvement of rural women in the preparation and implementation of local development plans;
- The presence of women in management structures, including executive boards and management committees. For some specific programs on food security, such as the National Roots and Tubers Development Program (PNDRT) and the Program for the Improvement of Rural Household Income in the Northern Regions (PAR FAR); they are over 70% in these programs;
- Although traditional chieftaincies are dominated by men, some women have been able to access this sphere of decision making. Among other duties, they ensure that women are involved in community activities.

**Within the framework of reducing rural women's agricultural and domestic work load**, the government, civil society organizations, notably elected representatives and the elites are carrying out specific actions such as:

- The popularization of appropriate technologies (improved techniques of production, conservation, processing and marketing of agro pastoral products);
- The provision of agro-pastoral equipment

As concerns **access to Information and Communication Technologies**,

- Multipurpose community telecenters have been established in rural areas to help bridge the digital divide between urban and rural areas. To date, there are 102 of such centers across the country.

Added to all these government efforts are the actions of the First Lady, whose activities contribute to the fight against poverty, disease and improving the living quality of life for rural women.

Given their greater number in rural areas, women play a key role in the fight against poverty and hunger through:

- **The practice of farming**

They have full responsibility for agro-pastoral production, processing and marketing as well as home consumption. FAO estimates at 90% their contribution in the production of foodstuffs necessary for the livelihood of people in Cameroon.

- **The management of their own expenses and those of the household**

According to the Survey of Household Consumption, among women aged 15-49 years, 62% of them partially or totally manage their own expenses and 54% contribute to household expenses.

- **Women's participation in community and political life** is enhanced in rural areas by the existence and action of civil society organizations and political parties.

- **Participation in Development**

In Cameroon, the vitality of rural women sustainably improves on the livelihoods of people through:

- The improvement of income; income generated from rural women's various activities helps to increase the purchasing power of households, thereby enabling them to devote more resources to the healthcare, feeding and education of children and access to decent housing;
- Access to credit and agricultural loans; this is facilitated by the existence of 224 micro finance institutions established in networks. Rural women, in all



categories of customers, constitute the majority of members of these micro finance institutions. They play important roles as member sponsors or users of established credit;

- Education and training; an empowered woman in a rural area is more likely to finance the education of her children without discrimination and to build her capacities in other domains. The direct consequence of this change is the reduction of illiteracy.

- Healthcare improvement

Rural women's financial autonomy enables them to access health facilities and quality healthcare services, particularly reproductive healthcare services.

In conclusion, the empowerment of rural women and their role in poverty and hunger eradication and in development needs to be improved. Although Cameroon has made significant efforts and has the required potentials, to capacitate a greater number of rural women, we count on the varied assistance of United Nations system organizations and other development partners to meet up with the challenges we are still facing in this domain.

**Thank You.**