PALLIATIVE CARE SITUATION IN CAMEROON

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INTRODUCTION

- Cameroon, about **18 million** inhabitants, situated in the **Central Africa**.
- Palliative care does **not yet constitute a public health priority** to the government.
- **No diagnosis of the situation** has been officially done and there is **no national policy**.
- Private palliative care initiatives can be found, mostly by churches and non govermental organisations - and very few Government Hospital as can be seen on the next slide.
Cameroon Baptist Convention Health Board Services spearheaded palliative care services in Cameroon in 2003. This was begun by a Cameroon Clinical officer Ndikintum Georges with a follow up visit by professor Anne Merriman and Dr Jagwe to Banso. This was followed up some years later by placement of a volunteer Dr Catherine D’Souza and her husband Chris (International Volunteer for Voluntary Services Overseas(VSO)) who guided and closely mentored the new project of hospital and home-based care palliative care unit.

- Growing number of patients, need for powder morphine.
- Lobbying and advocacy supported by Prof Anne Merriman founder of African Palliative Care Uganda. Ministry of Public Health gave a permit to order a small quantity of morphine in 2004. This was made up in Mutengene part of the Baptist Mission.
EVOLUTION OF PALLIATIVE CARE

- In 2009 the umbrella non governmental organisation Cameroon Hospice and Palliative Care Association (HPCAC) was formed.
- In 2012 the first Initiators programme in French was held in Mutengene by Hospice Africa Uganda.
- From 2006 to 2014: 15 palliative care units put in place mostly by churches, very few by civil society organizations and Government hospitals through individual initiative.
- Need to order a larger quantity of morphine powder to be used by all.
- HPCAC lobbied, advocated and was granted the permit to use Government Drug Procurement System to order and ensure proper compounding and management of the use of the product.
NEED IN PALLIATIVE CARE IN CAMEROON

- The needs are very important due to the prevalence rate of HIV/AIDS, 5.5%.
- Epidemiology Cameroon REDES 2013: 5,508,204 infected persons (62,546 children) and 41,000 new infections in 2012 (6000 children).
- According to the Ministry of Public health, the incidence of cancer is in increase with 12,000 new cases registered every year which represent about 110 cases for 100,000 inhabitants, with a mortality rate of 8%. They are not counting those without hospital care.
NEED IN PALLIATIVE CARE IN CAMEROON

- With the presence of HIV/AIDS, the number of cancer cases will double, and especially the virus-induced cancers (Kaposi sarcoma, non-Hodgkin lymphoma, cervical cancer etc...).
- Today it is estimated the need for palliative care in Cameroon to 103,000 habitants (according to the formula of Professor Anne Merriman specialist palliative care).
- Yes, those 103,000 people living with AIDS or cancer, most of them are suffering right now and need assistance and have never seen a health worker.
Many doctors and nurses prefer to treat people who will get well - not people who will die, and most of them have not been trained on PC.

Cultural barriers also have very negative impact. Many old people generally believe they are old and nothing else to do, no need to go to the hospital and most of them believe only on traditional healers. Large % never see a health worker
CHALLENGES OF PALLIATIVE CARE IN CAMEROON

- To reach clients who are always very distant and on bad roads is a very big problem - since a four wheel drive is needed and is very costly.
- Also the idea of volunteering is not very welcome, people are poor and young people are looking for job. It needs a lot of effort to convince them to do volunteering.
WAYS FORWARD

- Lobbying and advocacy work to convince Cameroon Government to consider Palliative Care as a priority public health problem and to include it in the national strategic plan.
- A national conference on Palliative Care will take place in October 2015 to bring together all stakeholders including the Ministry of Public Health, to reflect together on how to develop a co-ordinated palliative care system in Cameroon.
WAYS FORWARD

During the conference, the following aspects shall be looked into:

- A diagnosis of the situation of Palliative Care.
- National policy on Palliative Care, with norms and standards
- Strategic plan integrating Palliative care in the health system
- Capacity building plan of stakeholders
- Other complementary palliative care activities to be discussed
CONCLUSION

I have learn a lot during the multi-professional course at St Christopher’s, and the Palliative Care Works conference in Birmingham. During the conference in Yaoundé I will present this topic:

‘The role and importance of social worker in the multidisciplinary team’.

I will use evidence and experiences acquired at St Christopher’s Hospice, UK, to educate and advocate for the updating of school curricula of the training of Social Workers in Cameroon.

I will also use material I got from field placement with volunteers, to update our volunteer regulations and recruitment procedures.
THANK YOU
FOR YOUR KIND LISTENING