

**FAIR MED**

Health for the Poorest

# ANNUAL REPORT *2022* CAMEROON



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**ALES** : Aide aux Lépreux Emmaüs Suisse  
**ANC** : Antenatal Consultation  
**ASBADJA** : Association des Baka du Dja  
**BU** : Buruli ulcer  
**IGA** : Income Generating Activities  
**DDAS** : Departmental Delegate of Social Affairs  
**DPP** : Dual path platform  
**HD** : Health District  
**HC** : Health centre  
**GIC** : Common initiative group  
**LF** : Lymphatic Filariasis  
**MDA** : Mass Drug Administration  
**MDT** : Multi drug therapy  
**MINAS** : Ministry of social affairs  
**MINSANTE** : Ministry of health  
**NTD** : Neglected Tropical Diseases  
**SDGs**: Sustainable Development goals  
**WHO** : World Health Organization  
**OPVH**: Organisation of persons living with disability  
**TDR** : Test de dépistage rapide





**MOU Ferdinand**  
 Country Coordinator

### Dear Partners,

*The Annual Report 2022 is here, and I am pleased to introduce it to you. We are proud to use our limited resources and expertise to prevent diseases and improve the health conditions of the poorest, vulnerable, and marginalized population affected by Neglected Tropical Diseases and other health problems in different regions of Cameroon. It is our mandate and purpose to reach the most left behind. This report highlights the projects' efforts, interventions, and achievements made so far to address the health challenges of our target populations in the health districts where we work in Cameroon.*

*As a development partner, FAIRMED supports the government at national and local levels to facilitate access to healthcare services for the vulnerable, especially those affected by NTDs, and to contribute to empowering communities and local stakeholders to take ownership and control of their health problems. In 2022, FAIRMED stood by the Ministry of Social Affairs (MINAS) in enhancing the inclusion of persons living with disabilities. More so, FAIRMED has been at the forefront to support the ministry in the elaboration of a national strategy for community-based rehabilitation. We are committed in supporting the ministry to finalize this important document in 2023. The challenges were enormous but regardless, FAIRMED made great efforts to reach out to her targeted population.*

*Regarding our projects, 2022 was marked by an inception phase for a new project in the health districts of Malentouen and Yoko. The inception phase was materialized by an integrated skin NTD survey that was also extended to the Poli and Guider health districts in the North region.*

*More than 400 potential cases of skin NTDs including yaws, leprosy, Buruli ulcer, leishmaniasis, and scabies were identified during the survey. These surveys not only confirm the endemicity of the health districts which is a key component of the national strategy for skin NTDs, but also exposed the limited capacities of the health districts in the management of the diseases. On the other hand, the Baka project whose main objective is to improve the health status of vulnerable populations in the Abong-Mbang health district with the active participation of all stakeholders achieved good results as far as skin NTDs are concerned where 800 cases of skin NTDs were treated. Besides, more than 160 community health workers received training in the suspicion and referral of suspected cases. In collaboration with the decentralized services of MINAS, and councils, birth certificates were produced and distributed to the Baka indigenous people.*

*It is important to acknowledge the partnership agreement signed with the MINAS in 2022 with a focus to improve the well-being of people living with disabilities and vulnerable indigenous peoples in Cameroon. The areas of cooperation include the promotion and protection of the rights of people with disability, capacity building, inclusive community-based development, and access to citizenship.*

*These achievements are a result of powerful teamwork from the staff, our government partners and local partners as well as stakeholders who share in the values of FAIRMED and work with commitment, and resilience to respond to the health challenges of the poorest.*

*Lastly, but certainly, not least, I express gratitude to colleagues in Cameroon and beyond for their unwavering dedication and passion for promoting FAIRMED values, contributing to universal health coverage by reaching the most left behind, and attaining organizational goals.*

*Again, on behalf of FAIRMED's team, I want to express my deepest and sincere appreciation and thanks for your interest, support, and collaboration. We recognize that reaching the most left behind populations is not a destination, but a journey. While we're pleased with our progress, we know we have more work to do. We look forward to embracing opportunities, with all our national, local, internal, and external stakeholders, that enable us to gain momentum and continue the journey to reach the most vulnerable populations in 2023.*



## WHO WE ARE ?

FAIRMED is a Swiss health development organisation with a long history in Neglected Tropical Diseases (NTDs). Since 1959, the organisation "*Aide aux Lépreux d'Emäus Suisse*" (ALES), which became FAIRMED in 2008, has been combating NTDs affecting poor, vulnerable and marginalised populations in endemic countries. It works in the Congo Basin, Central Africa and South-East Asia. It relies on local capacity, and its offices in Africa and Asia are managed by local experts. It works in partnership with local and international stakeholders. It also works on both the supply and demand sides. Through its programmes, it is changing the lives of the most vulnerable people locally, and contributing to universal health coverage and the Sustainable Development Goals (SDGs) with their motto "**Leave no one behind**".



## VISION

FAIRMED works for a world where no one suffers or dies from a curable disease, where all people have equal access to prevention and affordable healthcare of appropriate quality, and where everyone can live in a healthy environment characterised by equity.



## MISSION

- Breaking the vicious circle of poverty and disease by ensuring that the poorest people in Central Africa (Cameroon, CAR, Congo) and South East Asia (Nepal Sri Lanka, India) have access to quality healthcare;
- Offer equitable healthcare opportunities to the poorest so that they can reach their full health potential.
- To help reduce the burden of poverty-related diseases, particularly neglected tropical diseases (NTDs).
- To raise awareness of preventable and remediable health inequalities and inequities.



## PROGRAMMATIC OBJECTIVES

The program's objectives focus on

- 1- Neglected Tropical Diseases,**
- 2- Access to healthcare,**
- 3- Inclusive Development**



## DOMAINS OF INTERVENTION

- Skin Neglected Tropical Diseases
- Maternal and child health
- Health system Strengthening
- Inclusive development of people living with disabilities
- Gender

The FAIRMED Cameroon office is a decentralized unit that manages the operational component of projects across the country.

FAIRMED has been working in Cameroon for over 60 years in the ten regions of Cameroon considered endemic for leprosy. In 2022, FAIRMED was active through her projects in 36 health districts in five regions: North, Adamaoua, Centre, South and East.

It puts its expertise at the service of the national health system, and supports the Cameroon government in specific areas:

- **Fight against Neglected Tropical Diseases** (Leprosy, Buruli ulcer, yaws, leishmaniasis,...)
- **Access to quality health care** for vulnerable, marginalised and poor populations.
- **Inclusive community-based development**

The Cameroon office is firmly focused on the SMART approach, with projects that are promising, measurable, sustainable and adapted to each intervention context. FAIRMED's intervention approach is based on

- **Health system strengthening,**
- **Partnership and networking,**
- **Operational research and learning, local ownership and the determinants of health.**

FAIRMED works in remote, hard-to-reach areas where a large proportion of the population has no access to healthcare. FAIRMED's work ensures active involvement and local ownership. Access to quality healthcare for marginalised, vulnerable and deprived populations remains its leitmotiv.



Cameroon is endemic for 15 of the 20 Neglected Tropical Diseases listed by the World Health Organisation (WHO). These diseases are indicators of poverty and inequality. People affected by NTDs and those who are marginalised, vulnerable and poor are at the centre of our intervention. In Cameroon, FAIRMED focuses on skin NTDs, including leprosy, Yaws, Buruli ulcer and cutaneous leishmaniasis. FAIRMED supports the Ministry of Health in the eradication, elimination and control of these diseases by deploying to the areas most affected. It also supports the Ministry of Social Affairs in the inclusive development of people living with disabilities. All its activities are carried out through projects such as:

- **Project to improve the health status of vulnerable populations in the Abong-Mbang health district (BAKA Project)**
- **Fight against Neglected Tropical Diseases in the Bankim, Malantouen and Yoko health districts (Mape project)**
- **Support for integrated activities to combat Neglected Tropical Diseases in the North region (Guider and Poli health districts)**
- **Yaws eradication in 10 health districts bordering Congo basin countries : East Region**
- **Integrated community-based case detection and surveillance of skin neglected tropical diseases in the Centre, East and South regions of Cameroon: 20 health districts**



Brief explanations of the main Neglected Tropical Skin Diseases in FAIRMED's portfolio below:



## **Yaws**

Yaws is a chronic infection that mainly affects the skin, bones and cartilage. The organism responsible is a bacterium called *Treponema pertenue*, a subspecies of *Treponema pallidum* responsible for syphilis, a venereal disease. However, yaws is a non-venereal treponematosi. It affects children aged 2-15 to a much greater extent. Transmission is by direct non-venereal human-to-human contact via exudate or serum from infectious infectious lesions.



## **Buruli ulcer**

Buruli ulcer is a condition caused by the bacterium *Mycobacterium ulcerans* bacterium, which belongs to the same family as the pathogens of leprosy and tuberculosis. This bacterium produces a toxin that attacks the subcutaneous tissue without causing pain or fever, causing large ulcers mainly on the lower and upper limbs. If not treated in time, the patient is likely to become disable. Most Buruli ulcer patients are under the age of 15. Its mode of transmission remains unknown to this day.



## **Leprosy**

Leprosy is a chronic infectious disease caused by the bacillus *Mycobacterium leprae*. It mainly affects the skin and peripheral nerves. It manifests itself through lesions of the skin, peripheral nerves, the mucous membrane of the upper respiratory tract and the eyes. The bacillus is transmitted by droplets from the nose and mouth when there is frequent close contact with untreated cases. Leprosy is curable, and treatment at an early stage can prevent disability.

The results achieved are the fruit of collaboration between FAIRMED and the Ministry of Health as well as the Ministry of Social Affairs and its decentralised services.

## SKIN NEGLECTED TROPICAL DISEASES



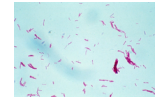
**46251**

People had access to essential health care services in the Bankim, Poli, Guider and Abong-Mbang health districts



**1966**

People screened during active and integrated case-finding campaigns for NTDs as part of the surveillance project implemented by the PNLP2LUB (Ministry of Health) in the Abong-Mbang Health District.



**865**

People with neglected tropical skin diseases were treated.



**359**

New cases of yaws detected in the Abong-Mbang, Bankim, Malentouen and Yoko health district.



**6**

New cases of leprosy detected in the Abong-Mbang, Bankim, Malentouen and Yoko health district.



**27**

New cases of Buruli ulcer detected in the Abong-Mbang, Bankim, Malentouen and Yoko health district.



Inclusive Community-based Development has been an important area of intervention for FAIRMED for a long time.

Leprosy, like other Neglected Tropical Diseases such as yaws and Buruli ulcer, causes physical disability when intervention is delayed. At the same time, people with disabilities are among the most neglected and left behind. Their rights to access health services are particularly at risk.

Hence FAIRMED's support to MINAS for the social inclusion of people living with a disability with particular attention to disabilities arising from Neglected Tropical Diseases. Through projects, FAIRMED supports Organizations of Persons with Disabilities (OPVH), strengthens their capacities to encourage their social inclusion and empowerment. In addition, it has financially and technically supported the development of the Community-Based Rehabilitation Strategy in Cameroon, which will serve as an instrument that will govern the action of development actors for the inclusive development of the poor, vulnerable and marginalized populations.

**INCLUSIVE DEVELOPMENT OF COMMUNITY REHABILITATION**



**612**

*People had access to basic services (education, birth certificates, income-generating activities) in the Bankim and Abong-Mbang HDs in support to the DDAS.*



**59**

*People covered by social protection systems (national disability card, assistive devices, etc.)*



**1704**

*Marginalised people considered to be "left behind" have benefited from projects aimed at reducing exclusion, discrimination and inequality.*




**7**

*Common initiatives groups of persons living with disability and health committees who received financial support from FAIRMED are operational in the Bankim health district.*



**4**

*Legalised common initiatives groups of the BAKA people with the support of FAIRMED have benefited from collection and consignment notes to exploit non-timber forest products for sale in order to finance health problems in the Abong-Mbang HD.*



Access to healthcare is at the heart of FAIRMED's strategic and operational policies. It takes the form of disease prevention, health promotion, health system strengthening and Neglected Tropical Diseases case management. As part of its deployment, FAIRMED is working with health districts by strengthening the capacity of health personnel to detect and manage NTDs cases, by making bandage kits available for patients with BU cases.

**HEALTH SYSTEM STRENGTHENING**



**168**

*Health workers from health districts endemic to neglected tropical diseases were trained in the management of Buruli ulcer and chronic wounds.*



**157**

*Wound dressing materials and kits for the management of cases of NTDs made available to the health districts in which FAIRMED operates.*

**MATERNAL AND NEO NATAL HEALTH**

 **7528**

*(Baka Pygmies and poor Bantus) visited the health facilities for antenatal consultations.*

 **2239**

*Births were assisted by qualified health personnel in the Abong-Mbang health district*

 **892**

*Baka children who had gone missing were found by the district's community health workers thanks to financial support from FAIRMED.*



### Implementing Partners

- *MINAT (SDO) of Abong-Mbang*
- *Regional Delegation of public health*
- *DDAS*
- *Heath committee*
- *ASBADJA*
- *Health District of Abong-Mbang*
- *Municipality*



## PROJECT TO IMPROVE THE HEALTH OF VULNERABLE POPULATIONS IN THE ABONG-MBANG HEALTH DISTRICT

The Project to Improve the Health Status of Vulnerable Populations in the Abong-Mbang Health District, also known as the "**BAKA Project**", which is in its third phase (2019 to 2023), is taking place in the East region of Cameroon, in the Haut-Nyong department. The Abong-Mbang health district comprises four Councils (Abong-Mbang, Angossas, Atok and Mindourou) where the Baka project is being implemented.

Since 2008, FAIRMED has been supporting the development of the Abong-Mbang Health District, in particular the development of the

indigenous Baka population, whose social and health problems still need to be addressed. These include low community participation, poor access to healthcare for the most vulnerable, and insufficient coordination between communal health executives. The main objective of this phase is to improve the health of vulnerable population in the Abong-Mbang health district, with the active participation of all stakeholders, through a transfer of skills to the beneficiary populations and to the councils, the main partners and guarantee of the continuity and sustainability of the project's achievements.



## 2022 KEY RESULTS

### NTDS CASE MANAGEMENT

Active and integrated case-finding campaigns for skin NTDs were carried out in **58 villages** in the Abong-Mbang health district during 2022. These campaigns revealed:

- **2 cases of yaws confirmed with the DPP,**
- **2 cases of leprosy,**
- **12 confirmed cases of Buruli ulcer,**
- **9 cases of lymphoedema,**
- **1 suspected case of mycetoma,**
- *779 other cases of skin diseases (scabies, mycoses, scabies, chiggers).*



*Clinically diagnosed case of leprosy have been put on treatment and are being closely monitored in the Abong-Mbang HD.*



*The 12 Buruli ulcer cases have been treated and have a regular follow up quarterly by the NTDs focal point of the health District.*

### HEALTH PROMOTION

As part of community action to promote health,

- The Communities contributed 324,205 francs for the financing of dialogue structures,
- 25% of the members of health facility management committees are from BAKA in 8 health areas.

Following mass awareness-raising campaigns on NTDs in the Abong-Mbang health district, approximately

- **150 community members**, including **89 Baka and 61 poor Bantu** in the locality of Kwoamb, were trained on the detection of NTDs cases that fall within the FAIRMED's guidelines.
- **302 people, including 195 Baka** in the localities of Oboul, Akok-Maka and Mbomba, were sensitized on the identification and referral of NTDs cases to the health facility.
- **More than 200 community health workers** in the Abong-Mbang HD participated in the mass distribution of azithromycin as part of yaws eradication.

## MATERNAL AND NEONATAL HEALTH

Support for advanced strategies made it possible to achieve a rate use of **14.71% (14.29% for Baka)** at antenatal consultations (CPN). In addition, **6,320 new consultations** were registered during 2022.

- **75.72% or 892 Baka children out of 1178** lost of sight were found thanks to the deployment of community health workers in the field led by the Departmental Delegate of Social Affairs (DDAS) with the financial support of FAIRMED.
- **63 awareness meetings** on Antenatal consultation (ANC) were organised with Baka women.



### Implementing Partners

- *Regional Delegation of public health*
- *Social Affairs Centre*
- *Health committee*
- *Bankim Health District*
- *Municipality*
- *Organisation of persons living with disability (OPVH)*



## FIGHT AGAINST NTDS IN THE BANKIM, MALANTOUEN AND YOKO HEALTH DISTRICTS PROJECT

The project to combat Neglected Tropical Diseases in the Bankim, Malantouen and Yoko health district, abbreviated "Mape", is an extension of the Bankim project to other neighbouring districts, including Malantouen health district in the West region and the Yoko health district in the Centre region. The year 2022 served as an inception phase during which baseline surveys (epidemiology of skin NTDs and disability) were carried out in the above-

mentioned districts. The aim was to collect baseline data to ensure the implementation of a new evidence-based project. The health districts concerned are endemic for skin NTDs and chemotherapy-preventable NTDs (CPT). FAIRMED's intervention focuses on NTDs with intensive case management, namely Buruli ulcer, yaws and leprosy. Although this is an inception year, FAIRMED's support has achieved significant results for NTDs in the three health districts.

## 2022 KEY RESULTS

### ACTIVE AND INTEGRATED CASE-FINDING FOR SKIN NTDS

A survey of the clinical and epidemiological situation of Neglected Tropical Diseases in the Malantouen and Yoko health districts detected cases of Buruli ulcer and leprosy. In addition, in the Bankim Health District, the community continues to actively search for NTD cases and refer them to health facilities. In the health districts of Bankim, Malantouen and Yoko the number of cases detected respectively are:

- **357 cases of yaws, 25 cases of BU and 04 cases of leprosy in Bankim.**
- **5 cases of BU and 2 cases of leprosy in Malantouen.**
- **3 cases of BU and 1 case of leprosy in Yoko.**
- Many other cases of skin NTDS, including mycosis, scabies, LF, etc.



*Samples taken from suspected cases of yaws during the epidemiological and clinical survey on NTDS in the Malantouen and Yoko Health Districts*

### HEALTH SYSTEM STRENGTHENING

**03 capacity building sessions** for health personnel in the health districts of Bankim, Malantouen and Yoko on the detection and management of neglected tropical skin diseases were conducted.

### NTDs CASE MANAGEMENT

Treatment was provided in the form of wound dressing materials and kits for the treatment of NTDs cases during and after the survey in health facilities. Ongoing support in the form of specific medicines from the National Programme for the management of these NTDS should be noted.



## HEALTH PROMOTION

In order to empower people living with disabilities, the Bankim project has supported

- **04 Organizations of People Living with Disabilities (OPVH)** in creating income-generating activities to address their health-related problems. In the same light, FAIRMED has supported
- **3 Health Committee** organised in Common Initiatives group (GICs), in collaboration with the Bankim council, the health district and the health facility, to make the dialogue structures sustainable. The subsidies generated help to strengthen the operations of the dialogue structures and motivate community health workers to carry out health promotion activities.



*Supervision of income-generating activity of the GIC-OPVH of Monkoing, Bankim HD*



*Watermelon field of the GIC-OPVH of Bandam - Bankim HD*



*Sale of watermelon from the Bandam GIC-OPVH*



*Cornfield of the GIC -OPVH of Moinkoing*



### Implementing Partners

- Regional Delegation of public health -North
- Health committee
- Leprosaria



## SUPPORT FOR INTEGRATED ACTIVITIES TO COMBAT NTDS IN THE NORTH REGION (HEALTH DISTRICTS OF GUIDER AND POLI)

Activities in the fight against Neglected Tropical Diseases have been dominated by an integrated survey on skin NTDs, diagnosis and management of detected cases, the training of health personnel in the diagnosis and management of cases; training of community health workers in the suspicion, referral and community follow-up of NTD cases in the Guider and Poli health districts. For more than three decades, FAIRMED has supported former leprosy patients living with disability in leproserium, notably in Dibamba (Littoral), Ngallan (South), Fourbaka (Adamaoua), Ribao (North) and Gogoria (Far North). In 2022, 3 leproseria received support from FAIRMED in the form of finance, food, ophthalmological equipment and dressing kits for leprosy ulcers. The integrated survey strengthened the mapping of cutaneous MTNs, which is an objective of the national strategy to control skin NTDs.



## 2022 KEY RESULTS

### HEALTH PROMOTION

In the Guider and Poli health district

- **2049 people were consulted**
- **403 cases of skin NTDS** were suspected and samples taken for biological diagnosis
- **More than 1,103 people** received treatment for intestinal worms (albendazole) during the survey.
- **1,391 people** received antibacterial soap to treat minor skin problems
- Ophthalmological monitoring of 06 former leprosy patients with ocular complications, enabling them to undergo consultations and in-depth examinations at the Fourbaka leprosarium.
- Support in basic necessities for 10 former leprosy patients in the Fourbaka leprosarium.
- Distribution of 59 dressing kits containing betadine, compresses, curved scissors, soap, crepe tape, etc. to MTN patients identified in the Guider and Poli health districts and at the Fourbaka leprosarium.
- 06 pairs of glasses were purchased and given to former leprosy patients with ocular complications.
- Financial support was given to the Ngalan and Dibamba leprosy centres.



*Screening of patients in the Poli health district during the epidemiological and clinical survey*



*A former leprosy patient receives a pair of glasses*



*Distribution of basic food kits to the Fourbaka leprosarium - North of Cameroon*



## YAWS ERADICATION IN DISTRICTS BORDERING CONGO BASIN COUNTRIES PROJECT

The project to eradicate yaws in districts bordering countries in the Congo Basin is being implemented by the Ministry of Health through the National Programme to Combat Yaws, Leprosy, Leishmaniasis and Buruli Ulcer (PNLP2LUB), with support from FAIRMED and funding from KFW through OCEAC. The aim of the project is to interrupt the transmission of yaws in the Cameroon part of the Congo Basin. This will contribute to the achievement of the global goal of eradicating yaws by 2030, as set out in the WHO Roadmap 2021 – 2030 for Neglected Tropical Diseases.

## 2022 KEY RESULTS

### HEALTH SYSTEM STRENGTHENING

- **130 community mobilizers** were trained prior to mass distribution on techniques for information transmission, particularly on neglected tropical diseases, and in identifying and managing rumours in order to detect community signals and notify supervisors.

## NTDs CASE MANAGEMENT

**201,229 Azithromycin tablets** were distributed during the 2nd round of the campaign in two health districts, namely Djoum and Nguelmedouka in February 2022.

**8,1759 people out of 8,55501** were treated with azithromycin during the 2nd round of the treatment campaign in the Djoum and Nguelmedouka health districts, representing **therapeutic coverage of 95.62%**.



*Azithro drug handed by the medical chief officer of the Djoum health district to a community member*



*Indigenous people receiving azithro to eradicate yaws in the Djoum HD*

## ACTIVE AND INTEGRATED CASE-FINDING FOR SKIN NTDs

The integrated monitoring of yaws and skin NTDs post azithromycin mass treatment, was one of the major activities during this third year of project implementation.

- More than **1,700 people** were examined, including 140 suspected cases reported. Of these, 17 cases with yaws lesions were tested by RDT. At least 3 cases of leprosy were confirmed and put on multidrug therapy (MDT). Suspected cases of Buruli ulcer were collected.
- A total of **18,419 people** were examined during the integrated post-mass distribution azithromycin surveillance between January and September 2022.
- **887 (4.82%) clinical cases** of yaws among 18,419 people examined in four health districts of which 98 (0.53%) were tested positive for serologic screening test (TDR). Of the 98 TDR positive cases, 48 were positive for the DPP confirmatory serologic test.



*Some suspected cases of skin Neglected Tropical Diseases.*



## **Integrated detection and surveillance of community-based cases of neglected tropical diseases in 20 health districts in the Centre, East and South regions of Cameroon.**

The "Community-based Integrated Detection and Surveillance of Neglected Tropical Skin Diseases" project, implemented by the National Programme for the Control of Yaws, Leishmaniasis, Leprosy and Buruli Ulcer (CNLP2LUB) of the Ministry of Health, with the support of FAIRMED and the WHO in the Central, East and South regions of Cameroon, began in 2020. The aim of the project is to accelerate progress towards the control, elimination and eradication of the following skin NTDs: yaws, leprosy, Buruli ulcer, and LF-related morbidity and mortality and scabies

in the Centre, East and South regions of Cameroon. The main activities planned for implementation of the project in the third year are as follows:

- Continuous case detection, treatment and notification of targeted skin NTDs in the 21 project districts,
- Strengthening the monitoring and supervision of activities in the project's health districts.
- Strengthening surveillance activities through integrated active case-finding campaigns in the project districts.

## 2022 KEY RESULTS

### ACTIVE AND INTEGRATED CASE-FINDING FOR SKIN NTDs

Integrated active investigation of skin NTD cases in the health districts of the project is one of the main activities planned for the third year.

The objective of this activity is to increase community awareness of targeted skin NTDs, and to strengthen the capacity and skills of local staff to detect, confirm and report NTDs as well as improve case detection.

- **17 health districts** in the Centre, East and South regions have benefited from active case-finding.
- **36,428 people were screened** in 17 health districts between January and September 2022. Of these, 4125 (11%) were clinically diagnosed with skin NTDs and 5982 (17%) with other types of skin disease that were not NTDs. The total prevalence of skin diseases is therefore 28%.
- **A new NTD, scabies**, emerged from the data collected in the districts and represents a considerable burden for isolated communities.
- Leprosy, with its current detection rate of 0.05%, or 54.9 cases per 100,000 inhabitants, indicates that Cameroon is well on the way to interrupting leprosy transmission.
- In addition to skin NTDs, 5,982 (17%) other skin diseases were also detected during the integrated active case-finding programme. Fungal infections proved to be a major problem in isolated communities, with a prevalence of 10.4% for fungal skin infections and 2.2% for fungal infections of the scalp (Tinea capitis), making a total of 12.6%.



*A few suspected cases of Neglected Tropical Diseases of the skin (scabies, fungal infections)*

## Physiotherapy or surgery needed!

*Junior, a teenager from the poor Bantu living in the Abong-Mbang health district, is no longer able to return to school because of the limited mobility of his right hand from Buruli ulcer.*



*In November 2022, we visited the home of Ndi Junior, aged 12 and living with his grandmother, a widow with eleven grandchildren to look after in a small hut. Ndi Junior is now a school dropout due the limited mobility of his right hand. "A month ago, it all started as a simple abscess on his right hand. We trivialised it, believing that it was normal and that it would go away. After a few days I noticed swelling from his hand down to his wrist. It went so quickly that I didn't understand. His hand was very heavy and the pimple was full of pus", says Junior's grandmother. A community health worker who had been trained by FAIRMED to detect cases of Neglected Tropical Diseases was able to detect the case during his field work and referred it to the Akok-Maka health centre, which then informed FAIRMED for assistance.*

*A visit to the FAIRMED site led to a clinical diagnosis that confirmed a case of Buruli ulcer in its primary state, i.e. still in the form of oedema. Without a doubt, he was put on treatment in order to avoid the worst-case scenario, which was to amputate his hand. In view of the position of the ulcer, the grandmother was recommended to have Junior perform gestures to facilitate motor movement of the hand, as the ulcer was between the hand and wrist, limiting joint movement. Thanks to FAIRMED, Junior was treated with drugs to destroy the bacteria causing the ulcer. In addition, dressings were applied after two days using dressing kits provided by FAIRMED. The wound has healed, but there is one major problem: the hand is stiff and not mobile. Would further assistance be necessary?*



### ***Surgical or physiotherapeutic treatment***

*It's 2023 and we're still worried about Junior. A visit to his grandmother was necessary. As the car approached the hut, Junior ran over to greet us, very happy to see the team who had given him such extraordinary support. Junior exclaimed in a very small voice and with a shallow smile, "I want to go back to school now".*

*Junior's right hand had become stiff around the wrist thus needing further assistance for rehabilitation. As such, surgery or physiotherapy is required! His grandmother exclaims, "This child is stubborn. When FAIRMED gave me the job of helping him with joint movements, I used to fill a bottle with water and give to move back and forth. But as soon as I'm away from him, he stops trying. That explains the state of this hand today.*

*Americanos Ebode, FAIRMED's health and community development officer, frowns and his expression darkens: "The family lives in such precarity that the grandmother cannot afford the physiotherapy or surgery needed to improve the condition of her grandson's hand. "We don't have the expertise or the financial means to follow this case through to full recovery," he adds with a dejected look.*

*We tried a game with Junior to see how far he can exercise his hand in writing. Very enthusiastic and positive, we ask him, "Can you write your name?" He replies cheerfully, "Of course I can," with a pen and a sheet of paper resting on his leg. Junior writes his name letter by letter, very slowly but surely.*

*There is hope for this young child, and it would be great to support him even more with the adequate expertise to restore his hand to full health.*

PROJECTS	ANNUAL BUDGET ALLOCATED IN 2022
HEALTH PROJECT FOR VULNERABLE INDIGENOUS PEOPLES	119 320 153
SURVEILLANCE PROJECT	590 357 499
YAWS ERADICATION PROJECT	685 155 290
BANKIM PROJECT	122 868 620
NTDs PROJECT IN THE NORTH REGION	82 203 347
BRA	295 483 881





*ANESVAD visits FAIRMED Cameroon to see at first hand its actions in the field in the fight against skin NTDs*



*Baka project steering committee held in the Abong-Mbang HD*



*Community-based rehabilitation strategy writing workshop organised by MINAS with support from FAIRMED in Ebolowa*



*Clinical surveys in the Poli health district, northern Cameroon*



*Raising awareness on neglected tropical skin diseases in the Poli health district during the surveys.*



*Capacity building for health staff and CAP investigators on NTDs in the Bankim HD*



## FAIRMED Cameroon

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