Inclusive Education: Pioneer Resource Center goes Operational in the West Region of Cameroon

Visually impaired students and pupils in the West Region of Cameroon can now study alongside their sighted peers, thanks to the presence of a Resource Center for Inclusive Education now operational at Lyceé Classique de Bafoussam (Government Bilingual High School). The Pioneer Center is financed to the tune of FCFA 13.8 million by the Liliane Foundation in the Netherlands via the Cameroon Baptist Convention (CBC) Health Services.

The inauguration and handing over ceremony took place on May 2, 2019 at the college premises in the presence of the representatives of the Ministers of Secondary Education and Social Affairs, authorities from the CBCHS, the CBC Education Secretary, Regional Delegates of related services, excited students, Principals from some Government Colleges in the West Region and NGOs working with persons with disabilities among other dignitaries.

The new resource center will facilitate learning for students with visual impairment in Cameroon.
Chairing the inaugural, Mr. Douglas Achingale, Deputy Director for the Rehabilitation of Persons with Disabilities in the Ministry of Social Affairs and Personal representative of Cameroon’s Minister of Social Affairs, commended the CBC Health Services and partners for strengthening public-private partnership with the government in meeting the 'Education for All Agenda', and in particular, fostering the education of students with visual impairment in Cameroon.

Drawing inspiration from the United Nations Convention on the Rights of Persons with Disabilities, Mr. Achingale, himself a physically challenged person, said the CBC Health Services and partners are real actors in the implementation of Article 24 (2a) of the said Convention; ‘Persons with disabilities are not excluded from the general education system on the basis of disability, and that children with disabilities are not excluded from free and compulsory primary education or secondary education on the basis of disability.”

Elvis Wamba Teku, a student with visual impairment at Lyceé Classique de Bafoussam, who has studied along in Braille said, “It was with joy that I [he] received the news of the establishment of a resource center for braille learning in their [our] school. The center will ease studies for me and my peers and will equip us with Information and Communication Technology (ICT) skills, which is what makes one a literate person in this age”.

The Resource Center has computers with speech-to-text software and assistive devices that enable students with visual impairment to use the computer with ease. The computers are constantly connected to the internet to allow for surfing and academic research.

Cutting the symbolic ribbon thereby inaugurating and receiving the center; Dr. Francoise Nganya, West Regional Delegate for Secondary Education and Personal Representative of the Minister of Secondary Education, noted that the center is of capital importance to Cameroon government in general and to students with visual impairment in particular, towards advancing education for all Cameroonians.

He charged the Principal of Lyceé Classique de Bafoussam to make the doors of the center open to all students with visual impairments in the West Region and beyond.

For the center to have seen the light of day, the CBC Health Services and her funding partner Liliane Foundation based in the Netherlands work tirelessly. After realizing such academic jewel, Mr. Wango Barnabas, Assistant Administrator at the CBCHS Central Administration and Personal Representative of the Director of CBC Health Services at the inaugural observed that “An equipped resource center with trained staff is not sufficient to guarantee effectiveness, efficiency, sustainability, and the respect of rights, hence the administration of Lyceé Classique de Bafoussam and education authorities in the region must demonstrate a strong sense of ownership and commitment for the attainment of the above mention values.”

In like manner, Mr. Awa Jacques Chirac, Coordinator of CBC Services for Persons with Disabilities (SPS) and Program Manager for the Socio-Economic Empowerment of Persons with Disabilities (SEEPD) called on all education stakeholders in the West Region to deinstitutionalize and widen the scope of the center to meet the needs of all and sundry.

On the sidelines of the inauguration, a new van was handed to Centre d’intégration Scolaire Professionnel pour les Aveugles et Malvoyants (CISPAM). The new van will facilitate the transportation of students to and from the Resource Center.

The computers have assistive programs such as JAWS that helps the visually impaired students to work with little or no challenge.

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**CBC Health Services' Planning, Monitoring, Evaluation and Learning (PMEL) System on Pilot Phase**

Some top Management team at the CBC Health Services’ Central Administration in an Inception Meeting on April 27, 2019, at the DHS-Hall Nkwen, Bamenda were presented with a Planning, Monitoring, Evaluation and Learning (PMEL) System. The system, when harmonized and adopted, would render data collection within the entire CBCHS easy and fluid.

Mr. Vincent Mujune, PMEL and Management Consultant from Uganda, explained that the PMEL Initiative is aimed at developing and piloting an integrated system for Planning, Monitoring, Evaluation and Learning for the CBC Health Services.

According to Mr. Mujune, the CBC Health Services provides variety of quality healthcare services to the community through hospitals and programs such as the Malaria Control, HIV Free, Non Communicable Diseases Prevention and Control, and the SEEPD among others, there is need to have a holistic system put in place to coordinate this great and extensive work.

“My role in this initiative is to support the CBC Health Services develop a PMEL System and help the team that I will be working with to start piloting the system in Mboppi Baptist Hospital and its two catchment health centers.
CBC Health Services’ Planning, Monitoring, Evaluation and Learning (PMEL) System on Pilot Phase

In doing this, we hope that there will be more opportunities for all different units through which the CBC Health Services works collectively and have a system that can enable us to see the whole CBC and its performance as a whole and not just small units with their individual performances. Ultimately, we should see that all these efforts contribute to the overall mission of the CBC Health Services,” explained the consultant.

The PMEL is currently on the pilot phase at Mboppi Baptist Hospital Douala and her satellite health centers in Bonaberi and Kribi testing and assessing the program indicators. “What we are doing now with the team is to first set up the indicators that will be used to measure the performances for each of the departments within CBC Health Services. Indicators will be assigned to measure their performances and these will all be collectively gathered together within the organization so that there will be a single way we can look at the health and performance of this organization as a whole and not just one unit at a time,” elaborated Mr. Mujune.

Members of the PMEL team at the meeting took turns to do PowerPoint presentations on the stages that PMEL will go through to be validated, and the different performance domains that will be tested during the pilot phase. The team provided clarifications on the reactions and questions from those present at the meeting.

As moderator at the Inception Meeting, the CBC Health Services’ Chief of Administration and Finance (CAF), Mr. Warri Denis assured the PMEL team that the Administration is fully in support of the program and is looking forward to the success of this pilot phase and the eventual implementation of the PMEL for a resilient CBC Health Services.

Speaking to CBCHS Press at the close of the meeting, Mr. Munjune expressed his contentment with the CBC Health Services administration for opening up to change and for embracing this innovative idea. “I particularly want to thank the Director of Health Services and the Chief of Administration who are particularly supportive of this idea. We are optimistic that when this is done, it will not only make decision making easier within the CBC Health Services but it will also make us more efficient as an organization, responding quickly to problems that happen rather than when we are operating very much in a scattered way and this will make us stronger as an organisation is supposed to,” concluded Munjune.

The successful pilot of the PMEL system, will guarantee a more resilient CBC Health Services in terms of efficiency, and render a more reliable way of monitoring and evaluating the activities of staff, departments, facilities and programs of the entire system. The PMEL can usher in reliability in the manner which data is collected and analyzed and eventually, can win the CBC Health Services the status of an International Research Centre where reliable data can be collected to make informed decisions. The program will also guide the synergy of the other programs that have been in existence in the CBC Health Services.

The Technical Services Department (TSD) of the Cameroon Baptist Convention (CBC) Health Services has a new Administration in place. Mr. Kangong Joce officially assumed duty as the new Administrator last April 26, 2019, following a handover ceremony at the TSD Head Office in Bamenda. He took over from Mr. Ngam Joseph Ful who has served as Administrator of the Technical Services Department for 5 years.

Speaking to the CBC Health Services’ Press, Mr. Ngam Joseph Ful fondly called, ‘Pa Ngam’ likened work within the Health Services as a relay race in which team spirit has to be inculcated for service provision, given that no one can succeed alone.

“I was a leader at TSD because the team there made me one. Their constant and unwavering collaboration made us to achieve set objectives. The results are visible,” recounts Pa Ngam.

The erstwhile Administrator observed that teamwork is the way out for any management that is gunning for success. That’s why; “I have and will ensure that other leaders taking over from me will pursue team spirit and compliance to the mission statement of the Cameroon Baptist Convention (CBC) Health Services. I must state here that this is the only way that we can continue work and hand the baton to another, as I have just handed to Mr. Kangong.”
The Technical Services Department is a very strategic unit in Health Services. The unit is charged with the responsibility of developing architectural designs of all infrastructures, constructing and erecting buildings and above all present throughout for maintenance and supervision of all development projects. TSD is the techno pole for the organization and the external public who solicit their services.

Quizzed on how ready he is to steer the affairs of this too important department, Mr. Kangong said, “As a soldier of the Lord I am ever ready to serve at all times. It is a privilege for me to be called to serve in this new capacity. I equally look forward to putting in my best in agreement with the vision of the entire organization”.

As the visionary leader he is, Mr. Kangong is envisaging a TSD that will be useful to the entire Cameroon Baptist Convention, other sister organizations and individuals in terms of infrastructural development services.

It is worth noting that the handover ceremony was presided at by the CBC Health Services’ Chief of Administration and Finance Mr. Warri Denis, who in a toast in honor of the outgoing TSD Administrator called on the department’s staff to work hand in glove with the incoming.

It should be noted that the in-coming TSD Administrator holds an MBA in Hospital Administration. Prior to his new appointment, he was the Administrator of Banso Baptist Hospital.

CBC Health Services, Partners Commit to fighting Gender-Based Violence in Cameroon

Women with disability have in recent times faced varying abuses from the community, which has attracted the attention of organizations working on gender-based violence (GBV) and related issues.

One of such organizations has been the CBC Health Services which has remained passionate in fighting against gender based violence through advocacy, interventions, and partnerships with other NGOs, Civil Society Organizations, and government ministries.

Against this backdrop, a two day capacity building workshop on the use of the SOP (Standard Operating Procedure) for management of sexual violence against women with disability in the NWR held for stakeholders working on gender based violence related issues from April 3-4, 2019 at the Baptist Center Nkwen, Bamenda.

The workshop was a platform to build capacities of stakeholders in gender and disability mainstreaming, advocate the use of the SOP and also to create two GRID Gender DID Groups in Bamenda 1 and 3 Sub-divisions. This initiative was to be realized by all stakeholders in the referral chain in case management of GBV in the two sub-divisions in particular and the Northwest Region in general in a bid to improve access to comprehensive GBV services for survivors with disabilities.

At the start of the workshop, the Chief of Administration and Finance (CAF) of the CBC Health Services, Mr. Warri Denis applauded the efforts of the stakeholders for their commitment to fighting GBV in the Region. He regretted the high rate of abuse amongst women and girls with disability which has augmented the commitment of CBC Health Services in sourcing for funding to put in place networks that can provide collective efforts to fight GBV. The CAF appreciated HI for funding the project, Making IT Working (MIW), which he hopes will create an impact in the lives of women and girls with disability.

On his part, the Coordinator for Services of Persons with Disability (SPD), Awa Jacques Chirac schooled participants on the overview of the CBC Health Services and its work in the area of disabilities which has given a lot of attention to women and girls with disabilities by improving on their quality of life through its empowerment programs as well as microloans. The Program Manager, who has put in place a committee to manage the MIW Project under his supervision, underlined the importance of having a robust network to combat GBV. “We are building a community of practice in which sacrifice of time and resources is needed,” Chirac concluded.

The chairperson of the MIW committee a woman with disability, Armelle Nonying, treated participants to her testimony on how she was abandoned because of her disability. “Even though my parents were wealthy and vibrant enough to send me to school, they still did not because of my disability. To them, investing in my siblings without disability was worthwhile.

Stakeholders are drilled on a Standard Operating Procedure to manage issues of sexual violence against women with disabilities.

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CBC Health Services, Partners Commit to fighting Gender-Based Violence in Cameroon

I am happy because of the capacity workshops organized by the SEEPD Program in recent years, I was able to advocate for myself and finally, I gained education which has made me an independent woman today”.

The Gender and Child Protection Officer of the SEEPD Program, Nsono Josephine, the Senior State Counsel for Mezam, Justice Fon Ignatius and one of the convevers of the SOP Dr. Louis Mbebih all equipped participants with skills on abuse management cases following the SOP. In four different groups, participants identified their related areas of services provision like legal, health, empowerment, psychosocial support, etc and discussed ways in which they can better network and refer cases of abuse to the appropriate services in order to have better and cost effective results. Not only did he drill participants on the role of law in GBV, but also, Justice Fon Ignatius Mbafor pledged the support of his office to ensure survivors with disabilities get justice.

At the end of the group work, participants pledged their commitment to work in line with the SOP given that it is the best way to go. They created WhatsApp groups and other platforms which will help them work in synergy.

The workshop brought together 39 participants drawn from Non-Governmental and Civil Society organizations, government delegations amongst who were the NW delegates of Women Empowerment and the Family and Social Affairs as well as representative from the Regional Delegation of Health. All the officials promised to put in place measures at the level of their delegations to strengthen the network.

CBC Inclusive School and Sign Language Center Multipurpose Hall Underway

The multipurpose Hall for the CBC Inclusive School and Sign Language Center (ISSLC) in Mbingo that has been in projection few years back will soon see the light of day. In the coming months this project will be realized, thanks to funding from Wild Gansen Foundation in collaboration with the CBC Health Services.

During a planning meeting on March 22, 2019 at the Baptist Center Nkwen in Bamenda, the Coordinator of Services for Persons with Disability (SPD), Mr. Awa Jacques Chirac took the stakeholders on a retrospect to 2017 when reflections began on the change of orientation for the school to make it donor friendly. These reflections resulted to the transformation of the school from Integrated School for the Deaf to CBC Inclusive School and Sign Language Center (ISSLC).

Mr. Awa explained that “With this shift of orientation, the school will serve as a training center, thus, the need to acquire an infrastructure like a hall to be able to accommodate the services to be offered”. He said it was against this backdrop that a project was put up to Wild Gansen Foundation some years back explaining the need for the hall, which later materialized with the approval of funding for the construction of the hall.

During the meeting that brought together key stakeholders who are experts in the field and who will directly be involved in the implementation of the project, the implementation strategic plan of the project was reviewed with inputs and timeline from the stakeholders. Looking at the design of the hall which is described as an inclusive hall, the SPD Coordinator emphasized that quality must be maintained at all levels of construction. To ensure quality, stakeholders noted that inspection by the supervising team be carried out on regular basis.

According to the Administrator of Mbingo Baptist Hospital, Mr. Nji Richard, the project is a dream comes true given that it will be useful to the entire CBC Health Services and beyond. For his part, the Head Teacher of the school, Mr. Che Manaseh noted that the hall will help to foster inclusion in the school as learners with and without impairments will freely have space to carry out their inclusive activities together.

The CBC Health Services’ Administrator of the Technical Services Department (TSD), Mr. Ngam Joseph likened the CBC Health Services to a hunting dog that never gets tired of hunting. He added his voice to the previous speakers to commend the funders of the project, assuring the stakeholders that with his leadership at the TSD, work will commence immediately and effectively with good results recorded at the end.

Upon completion of the hall, it will be used for conferences, retreat, meetings, workshops, and school activities just to name a few. The project is expected to be completed and handed over in 2019.

It should be noted that Netherlands’ Truus Treep’s passion for children with hearing impairments has been the brain behind the mobilization of funds for the project.
NCD Prevention and Control Program Trains Peer Educators to stem the Tides for Diabetes and Hypertension

The Cameroon Baptist Convention Health Services’ NCD Prevention and Control Program has trained some 14 community Peer Educators to support Diabetes and Hypertension patient care. The training took place in Yaounde from April 16-17, 2019.

According to an Abstract released by the Journal of Global Health reports on Pilot Peers Health Education for Non-Communicable Diseases Prevention by Lemlem W. Gebremariam et al, peer education is one of the commonest approaches to Primary Health Care interventions. Education by peers is effective to changing attitudes and behaviour, some of which root deeply in social and cultural norms. Peers can be role models who help increase self-efficacy for self-management of chronic conditions such as diabetes and hypertension. Peer Educators themselves retain the learned knowledge and improve their own behaviour as they participate in this exercise and promote the health of their peers.

The Fourteen community trained educators came from some ten CBC Health Services facilities receiving support from the World Diabetes Foundation to strengthen the functioning of Diabetes Clinics in CBC Health Services facilities including Ndu, Bamenda, Banso, Douala, Bafoussam, Yaoundé, Banyo, Kumba, Mutengene and Mbingo.

Participants were made to understand more about Diabetes and Hypertension, their effects and follow up parameters like how to measure and record Fasting blood sugar and blood pressure, their normal values, how to self-measure, medication and storage, feet care and foot wear choices. They were also drilled on the roles and qualities of a good Peer Educator, including how to conduct home visits, calls, measure parameters, and provide reports to the facilities as well as being available, committed, good listeners, tolerant, and ready to learn.

Upon return, their primary assignment is to help in improving quality of patient care in the community and to reach out to the whole population indirectly. “We want the people living in the community to live well, if they can preach this, the patients will have quality care not necessarily coming to the hospital but reaching out to diabetes and hypertension patients in the community,” explained Dr. Akumbom Caroline, one of the key facilitators of the training and Head of the Out Patient Department and Diabetes Services at Mboppi Baptist Hospital Douala.

The CBC Health Services’ Programme Manager for the Non-Communicable Disease Prevention and Control Program (NCD PCP), Mr. Mbidzenyuy Ferdinant explained that “As part of our NCD prevention and Control program’s community based interventions, peer educators are meant to bridge the gap between the facility and the community. In case the client doesn’t make it to any health facility for one reason or the other, the peer educator is a key member of the follow up team and can be assigned to follow up and encourage the client to adhere to management.”

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NCD Prevention and Control Program Trains Peer Educators to stem the Tides on Diabetes and Hypertension

“We don’t want our Diabetes Educators to go out into the community to follow up patients when the possibility of an effective task shifting is possible. The Peer Educators will serve as their extended hand. Basically, they will be involved in follow up at a distance (calls), home visit, visit reports and weekly assignment with the Diabetes and Hypertension unit and other capacity building activities,” added Mr. Mbidzenyuy.

One of the newly trained expressed satisfaction for being empowered as a Peer Educator. “I am very glad about this opportunity, I have been empowered to become a peer educator, I have been living with hypertension for more than 20 years and diabetes for more than 7 years now. Opportunities like what the CBC Health Services has given us today is really a boost to our morals that we can make it in life with these conditions if we make proper lifestyle choices,” testified the happy new Peer Educator.

Another corroborated saying, “Today, diabetes has promoted us to be leaders in the field,” thanks to the CBC Health Services team.

CBC Health Services’ 'Know Your Numbers' Campaign taking Central Stage in Fighting NCDs

KYN is an awareness and screening mechanism for NCDs. It is intended to build the capacity and resilience of the population to prevent and control NCDs.

To do screening on (Non-Communicable Diseases) NCDs, one needs to measure a number of vital health signs such as blood pressure, body mass index, waist circumference, and blood sugar and sometimes lipids etc. These numbers reflect one’s status with respect to biological or metabolic risk factors that can indicate the development of an NCD in one’s system. We are exposed daily to lifestyles and environments that require us to keep check of ourselves.

Currently, NCDs account for over 70% of global deaths with (2/3rd) of these deaths occurring in low- and middle-income countries. In Cameroon, 35% of annual deaths are due to NCDs and prevailing beliefs and cultural practices around risk factors, in addition to challenges in access to healthcare continue to compound the negative impact especially on low-income persons, and households.
CBC Health Services’ 'Know Your Numbers' Campaign taking Central Stage in NCDs Fight

For instance, in some societies, obese or overweight people are still viewed as being more affluent or healthy. In some contexts, there is a preference towards some unhealthy canned and oily foods as also being indicative of affluence of good living.

So far, the Program has screened about 30,000 people since 2017 with support from Novartis Access.

In the past, NCDs have not been given as much attention as they should in health care including awareness and screening. Sometimes, it is the cost of screening for these conditions that is responsible for this and in other times, its ignorance. Recently, through a novel approach designed by the CBC Health Services, sensitization and screening for NCDs has gained steam in the public health sector in Cameroon. This is known as the “Know Your Numbers (KYN)” Campaign.

The Know Your Numbers Campaign saw the light of day following the voluntary screening of 370 staff in Banso Baptist Hospital (BBH) in 2012, for basic health vitals such as blood pressure and weight. The results of staff and community members walking with undiscovered hypertension revealed that many cases remain undiagnosed in the community with some morbidity and mortality cases resulting from ignorance and others from negligence.

This overwhelming response in addition to an increasing number of patients that were being attended to in CBC Health Services facilities sick of the different NCDs, the need for an intervention was imminent. In time, the need for comprehensive services led to the establishment of the Non-Communicable Diseases Prevention and Control Program (NCD PCP) which modified and cemented the KYN Campaign into an NCD prevention strategy that is promising for brewing healthy populations.

“Routine screening for NCDs is not helpful unless you want to know your numbers,” said Prof. Mbanya in expressing how important it is for one to keep track once in a while on their vital health numbers and overtime, understand its trends while keeping themselves healthy.

We continue to encourage people to get to a KYN facility, and know their numbers at least once or twice a year.

CBR, Determined to Fish out, Treat Children with Clubfoot in Noun Division

For the first time in the history of Noun Division, some 13 children are undergoing treatment at the Baptist Health Center, Ngounso thanks to the extension of the CBC Health Services Community Based Rehabilitation (CBR) Services to the Division in the West Region. CBR as a strategy in community development aims at enabling persons with disabilities and those at risk of acquiring disabilities have access to equal opportunities in order to improve on their quality of life.

Less than 5 months of establishing the CBR services in the West and Adamawa Regions, 13 children with neglected clubfoot have been identified in the Noun Division with the collaboration from other community stakeholders.

CBr Field worker, Jab Moses who covers five Sub Divisions of the Noun Division, says he started penetrating into the community through the Divisional Delegate of Social Affairs who guided him on how he could initiate awareness campaigns. “I moved from one place to another including other Divisional Delegations as well as churches to educate the public on the clubfoot deformity and other disability issues,” explained the Field Worker.

His awareness raising exposed him to one child with clubfoot that he immediately referred to Ngounso Baptist Health Center for treatment. When the child started treatment, it became an eye-opener to other stakeholders and some community members who became vigilant in identifying other children in the community with similar cases. “This kept my phone busy as I kept receiving calls from the Delegation of Social Affairs and other people in the community on the children they had identified for treatment,” Mr. Jab noted with a smile.

To the Physiotherapy Assistant in Ngounso Baptist Health Center, Madam Wum Comfort Ndum, it has been a busy time for her in the clubfoot clinic as they have had continuous increase in the number of children with clubfoot referred to the health center. This has caused them to add the clubfoot clinic day from one to two days. Madam Comfort explained that she has been involved in the treatment of clubfoot cases but the ones she has been receiving in the clinic in Ngounso have been unique because almost all of them are neglected cases.

She attributed it to ignorance given that the community never saw clubfoot as a deformity which can be treated until recently. Even though it is challenging working with the parents due to language barrier, Wam Comfort enjoys her experience in working with them given that they adhere to treatment by respecting all their appointments, which is facilitating the treatment of the children.

The Cameroon Clubfoot Care project has left no stone unturned, ensuring close follow up of treatment for the children by constantly supplying the clinic with treatment materials like POP and facilitating the availability of support staff who are more skillful in handling the neglected cases to support Madam Comfort to ensure a better outcome.

This move by the CCCP Office and the CBR identification and referral strategy has been commended by the Chief of Center for Ngounso Baptist Health Center who noted that the treatment of the children in the Health Center has brought a lot of publicity for the health center because most people now talk about the additional services to the health center which is improving the quality of life for children with clubfoot. Mr. Shofola Emmanuel has praised CBM, CCCP Manager, Mr. Awa Jacques Chirac and his team for facilitating the ongoing treatment of the children with clubfoot in Noun Division.
BHC Kribi acclaims for Holistic Care at 'First Anniversary'

The population of the Ocean Division in the South Region of Cameroon and beyond have saluted the exceptional and timely medical care provided by Baptist Health Centre Kribi (BHCK). According to the inhabitants, BHCK is the right place for those in need of holistic care.

During celebrations marking the first anniversary of the health centre last April 9, 2019, the BHCK family took time to count their blessings for the past one year.

According to the Chief of Centre (COC), Mr. Mbeng Frankline, since the start of the facility in April 2018, patient turnout has witnessed geometric increase. "We started timidly with 48 clients on day-one and today we consult an average of 50-60 patients daily." A total of 1,454 patients from April 2018-March 2019 were seen, aver Mr. Mbeng.

The increase in patient turnout warrants that there should be adequate space to host them during care. In this light, the health centre is leaving nothing chance. Departments keep adding every other day to meet the pressing needs. With just eight departments at the beginning, the Dental Unit, Women's Health Program, Ultrasound, Social Services and Secretariat are some of the departments that have been setup bringing the number to 13 today.

Speaking to CBC Health Press during the first anniversary celebrations, Mr. Mbeng highlighted that plans are underway to set up a theatre that will help in the area of cesarean-section. He further noted that space for the chaplaincy, PMTCT, Injection and Treatment, and Observation ward have also been provided.

“Human Resource is cardinal in providing quality, therefore we intend to increase the number of our staff in the Maternity, Laboratory, Finance, and Eye departments, in order to run shift system to ensure better patient care,” he remarked.

By and large, it has not been all roses for the health centre as she has had to grapple with the constant water shortages especially during the dry season and difficulties in the management of medical waste.

CBC HEALTH SERVICES’ NORTHBOUND CENTERS ON GOOD FOOTING!

The CBC Health Services covers seven of the ten regions of Cameroon. The Adamawa region with over five CBCHS institutions is a window for the CBCHS to carry quality healthcare to that northern part of Cameroon. The one hospital and four health centers in the northbound axis of the country began as offshoots of primary health centers initiated by the Life Abundant Primary healthcare (LAP) program.

From time to time, the CBCHS Central Administration and programs carry out supervision and working visits to this part of the country to assess the progress of work and to encourage the staff. One of such visits took place from April 11-17, 2019 by the CBCHS Security Department represented by the General Supervisor, Tufoin George and the Press Division represented by the Editor-In-Chief, Bonkung Handerson and the Web Editor, Mufuh Ramiro.

The trio started work in Ngounso all through to the newest health center in Tibati and culminated in Bafoussam Baptist Health Center in the West region as highlighted in the following center by center presentation.

The most common case of illness seen in the North of Cameroon especially with little children is Malaria
Ngounso Baptist Health Center

Ngounso Baptist Health Center (NBHC) was approved in 1997 by the Minister of Public Health. It is one of the fastest growing rural health centres of the Cameroon Baptist Convention (CBC) Health Services.

According to the Chief of Center Mr. Tata Emmanuel Shofola NBHC has about 70 staff including 2 doctors, 2 screeners, and receives close to 1500 patients a month. “There have been an increase number of patient here because of the crisis in the Northwest and Southwest regions” said Mr. Tata.

The Ngoundou people sees the health center as a hospital, given the quality and extensive services offered by the health center.

NBHC is found in Magba Subdivision, in Noun Division of the Western Region of Cameroon. It is situated 60km north of Foumban town along the National road number 6 to Banyo.

The most common disease seen here is Malaria, followed by Hypertension, and Diabetes. Intestinal problems and Sexually Transmitted Diseases (STDs).

The Health Center operates 24/7 and offers both inpatient and outpatient services in different departments such as; General consultation, Family Planning, Theatre for both minor and major surgical services, Delivery Services, Ultrasound Department, Eye Care services, Physiotherapy, and many other services.

Nyamboya Baptist Health Center

Nyamboya Baptist Health Centre (NBHC) started as a Primary Health Centre (PHC) in the 1990’s supervised by Life Abundant Primary healthcare program (LAP). NBHC is presently an Integrated Health Center with over 21 staff.

Nyamboya Baptist Health Centre is found in Bankim Subdivision, Mayo Banyo Division of the Adamawa Region of Cameroon.

NBHC receives averagely 370 patients in a month coming from close to 10 communities in the Nyamboya Health Area: Nyamboya, Yimbere, Ndoumdjandi, Barage Lundi, Barage Zina, Timidjoun, Ndem-Ndem and others. The health center opens 24/7 with 29 bed capacity. It offers both inpatient and outpatient services, ranging from general consultations, Malaria Screening and Treatment, Respiratory Tract Infections, Gastritis, Hypertension and Diabetes, Sexually Transmitted Diseases (STDs), Minor Surgeries like circumcision, suturing and dressing changes, Maternal Child Health (MCH) services like Antenatal Clinic (ANC), Infant Welfare Clinic, family planning and many others.

Allat Baptist Health Center (ABHC)

The Allat Baptist Health Centre (ABHC) was created in 1986 and was upgraded to an Integrated Health Center by the Cameroon Baptist Convention Health Services on the July 30, 1987. ABHC as of now has 10 nurses, including a screener who sees over 200 patients month. The screener, Mr. Kwaah Alfred M’kong doubles as the chief of center. The Health Center has 17 beds spread in 4 wards.

Allat Baptist Health Center is found in Mayo Banyo Subdivision, Mayo Banyo Division in the Adamawa Region of Cameroon. It falls under Allat Health Area in the Banyo Health District. The Health Center serves close to 25 communities and moves as far as 160KM for outreach and sensitizations among them; Allat, Assawa, Mbenguedji, Bani, and Altine.

ABHC opens 24/7 and offers both inpatient and outpatient services such as: General consultation, Pharmacy services, Laboratory services, Treatment room for minor surgeries, Maternal child health (MCH), Antenatal clinic (ANC), Infant welfare clinic Services, Family Planning Services, Outreach for vaccination and consultation and security services, General Admissions and delivery services and more.
Tibati town is a Muslim dominated community of over 30,000 people with an average climatic condition of 29°C. Malaria is the most common disease that attack the people especially children.

Sakah Peter, pioneer Chief of Center says, TBHC barely a month at the time of this report, had received about 400 patients. "Patients started coming when we had not brought drugs. Many of them used to go to Banso Baptist Hospital (BBH) and Mbingo Baptist Hospital (MBH) in Bamenda for treatment, and so, they thought Mbingo has come to Tibati.

"Most of them visit the health center with lots of trust and expectations, given the quality services they have received from BBH and some of our health facilities elsewhere in Cameroon," Peter told CBCHS Press.

The COC added that there are many other health facilities in Tibati, but many of the people admire the kind of healthcare offered to people by the CBC Health Services. The people still visit the health center even though not yet fully equipped with the necessary equipment and drugs. The health center witnessed the first delivery just within the second week of operation.

According to Sakah Peter, even though the health center is quite new in town, most of the prominent people in the town of Tibati such as the Mayor visits he health center for checkups. Mr. Sakah wondered aloud that "In just two weeks, patients already felt the impact of the health center and some of them came to appreciate us with gifts".

Musai Eveline visited Tibati Baptist Health Center because of her sick twin daughters and confessed the quality of services she received from the health center in spite of how small it is. "I came here with my daughters because here my daughters will receive good treatment. Drugs given here are effective than in other places," she testified.

The TBHC comes at a time when the town of Tibati is witnessing an increase of migrants from the English speaking communities in Cameroon because of the Anglophone Crisis. Many of these people have loved the quality health care provided by the health facilities of CBC Health Services.

The Chairman of the Health Committee at TBHC, Pastor Mbang Emmanuel said the expectation of the people are very high since many people think that TBHC is BBH, which has come to operate as a full-fledged hospital.

"Patients come with issues that cannot be handled in the health center for now just because they have received treatment for similar cases in our health facilities in different regions. But we trust God that the administration will make the health center become a hospital in no distant time from now, the Health Committee chairman observed.

For now the health center has just 10 nurses, two screeners and a midwife to attain to the over 400 patients who visit the health center in a month. Some nurses over worked for up to 12 hours a day just to meet up with the ever increasing number of patient turnout.

Like Oliver Twist, Pastor Mbang Emmanuel remarked that "We are hoping that the Health Board will send us some more staff to meet up with the increasing number of patients that are coming to the Health Center".

Baptist Hospital Banyo

The Baptist Hospital Banyo (BHB) is the first hospital of the CBC Health Services of the Adamawa Region of Cameroon. The hospital started in 1999 as an integrated health center, and in 2006, it was upgraded to a hospital. BHB has 36 bed capacity with over 70 medical personnel including 2 doctors; a seasoned Missionary doctor and a Cameroonian doctor working 24/7 to meet the needs of the people of Adamawa region.

Banyo Baptist Hospital is located at Wouroum quarter, some 4 km from the Centre of Banyo town in the Mayo-Banyo Division of Adamawa Region of Cameroon.

BHB serves over 10 communities in the Mayo Banyo Health district, namely: Bonhari, Kanyaka, Hore Taram, Boujunkura, Sambolabo, Ndipele, Mbah, Mbamtijumbare, Bamti Alareba, Bamti Katoko, and many other towns and villages around Banyo.

Baptist Hospital Banyo (BHB) offers the following services: Eye Care, General Surgeries, Clinical Imaging (Ultrasound, X-ray, etc), Clinical Imaging, Community Outreach, Pharmacy, Drugstore/White Cross, HIV & AIDS Prevention and Care, Physiotherapy, Clubfoot Care, Community Based Rehabilitation, Diabetes and Hypertension, and many other hospital-based services.
Arkibaka Baptist Health Center (SBHC) started as a Primary Health Center (PHC). It became an Integrated Health Center in the year 2005 and today it is a full-fledged referral health center in the Bankim Health District of Adamawa Region of Cameroon.

Sarkibaka Baptist Health Centre is found in the southwest of Adamawa Region, precisely in Bankim-Subdivision of Mayo Banyo Division.

SBHC serves over 7 communities in the Bankim Sub Division. Patients come from Sarki Baka itself, Songoloung, Atta, Lingam, New Group (all in Bankim Subdivision) and from Hanaire in Nigeria, Kongui, Smie and many others. The Center has bed capacity of 22 and sees averagely 260 patients in a month. SBHC treats common diseases and conditions such as: Malaria, Diarrhea, Respiratory tract infections, Diabetes and Hypertension, Gastritis among others, Deliveries and Infant Welfare Clinic.

Sarkibaki Baptist Health Centre is ranked third in the Mifi Division of the West Region in terms of services provided. He noted increasing patients’ attendance of daily average of over 300 OPD consultations excluding dental, eye and other specialized services manned by 175 staff among who are 8 screeners, 4 doctors and a part time neurologist.

The Administrator attributed the increasing patients’ turnout to quality care to all as enshrined in the CBCHS’ vision, referrals from some outlaying health facilities and massive presence of internally displaced persons (IDPs) running from the socio-political crisis in the Northwest region in terms of services provided. He noted increasing patients’ attendance of daily average of over 300 OPD consultations excluding dental, eye and other specialized services manned by 175 staff among who are 8 screeners, 4 doctors and a part time neurologist.

The Administrator attributed the increasing patients’ turnout to quality care to all as enshrined in the CBCHS’ vision, referrals from some outlaying health facilities and massive presence of internally displaced persons (IDPs) running from the socio-political crisis in the Northwest and Southwest regions. According to Mr. Fambombi, Mbingo as a brand name is an added boost to draw patients given that some patients who had been to Mbingo Baptist Hospital assume that BBHC can provide all the specialized services as in Mbingo. “We educate and refer them as needed,” Mr. Fabombi explained.

Another point of reference is the fact that BBHC was fully integrated into the government initiative of Performance Based Financing (PBF) in February 2019. The Administrator revealed that a staff has specifically been assigned to keep PBF records digitally in order to track the performance of staff and reward them appropriately. Reports say, the PBF initiative is a good motivation from to improve on healthcare provision in the country.

Quizzed on the situation of internally displaced persons (IDPs), BBHC Administrator, Mr. Fabombi Dickson revealed that the Center is using her needy fund to support some of them in dire need. He appreciated the good collaboration of Prospects CBC Church Bafoussam for paying medical bills for some of the IDPs as well as the CBCHS Central Pharmacy for donating some free drugs for those whose prescriptions require the drugs. The Administrator at the time of this report, lamented that BBHC was treating two IDP children whose parents are somewhere in the bushes.

In other news, BBHC has a new bursar. Miss Mbuwe Claudette took over from Ms Monthe Victorine who came to the end of her services with CBCHS through resignation. Elsewhere, the Administrator saluted the steady flow of water in BBHC, thanks to the construction of a borehole, which is also helping the community that has been deprived of portable water because of damage on the water pipes following road works on the streets of Bafoussam.

In terms of challenges, Mr. Fabombi noted the breakdown of a new chemistry analyser in the laboratory provided by the Strategy Nine Projects Package. There is also need for good theatre equipment, need for a station vehicle to use especially for referrals, need for an incinerator and the need for additional graded staff to propel the specialized services.

Prayer Concerns

1. Thank God for His protection over our lives, especially the remnants in the two English speaking regions of Cameroon.
2. LAP PHCs continue to suffer closure or destruction by warring factions. The assistant in-charge of Saah PHC was shot dead by unidentified gunmen recently and the PHC forced to close down. Pray for the bereaved family and others who have either been killed, kidnapped or displaced.
3. Thank God for opening new avenues for the CBCHS to provide healthcare to new areas in Cameroon such as Kribi, Tibati and Bonaberi.

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