LCI Champions Actions for the Reopening of Abandoned CMA Wabane

Background

CMA Wabane is a well-constructed health facility furnished with equipment as compared to other health facilities in the Wabane Health District. The health facility had two nurses with a medical doctor who was unstable and later transferred thereby creating a vacuum. To make things worse, the District Medical Officer (DMO) for Wabane was hardly on seat to supervise the affairs of health district. This laissez-faire culminated to the inappropriate consultation and admission of patients in the district office. Gradually this attitude led to the abandonment of CMA Wabane nicknamed 'Akwaya'. For four years, inhabitants of this locality seeking medical care were squeezed in the district office meanwhile they had a well-equipped health edifice to meet their needs.

Local Capacity Initiative (LCI) Intervention

The Cameroon Baptist Convention Health Board (CBCHB) in its quest to provide quality health care to all through the 5 LCI districts sought to ensure effective service delivery in various health facilities. CMA Wabane is one of those health facilities where the impact of LCI project was felt after gaining grounds in the district through a series of workshops and advocacy.

The LCI Advocacy Technical Working Group team created a forum for a tête-à-tête meeting with some key stakeholders drawn from Wabane health district as well as delegates from the SW Regional delegation of public health. During this meeting, advocated and demonstrated why the health facility

Deliberations on the Reopening of CMA Wabane
needed to be reopened. After successful deliberations, each stakeholder was put to task with deadlines stipulated to ensure the smooth reopening of the health facility.

- The assignments geared towards the reopening of this health facility consisted of; cleaning, painting, lighting of the health centre, provision of startup medications, community sensitization, staffing towards the reopening of the health facility. The committee went further to set a commission to oversee the official launching of the health centre.
- A Memorandum of Understanding (MOU) was signed between the Wabane Council and the CBCHB - LCI to recruit and support five health personnel. According to the MOU, the CBCHB agreed to financially support the newly recruited staff for a period of four months while the council continues thereafter.

Through the LCI, enlightened community members have dedicated themselves in keeping the surroundings of the health facility clean.
- The CBCHB through LCI donated, beds, tables, mattresses, chairs and other minor hospital equipment to facilitate delivery and other services at the CMA Wabane.
- The LCI Project has supported the facility on income generating activities which will be used to run the facility and other activities like outreach.

**CMA Wabane Experiences Facelift**

CMA Wabane was reopened on January 13, 2017 and the facility had its first ANC services with
15 pregnant women in attendance. Three deliveries conducted in the first two days, followed by other health services like consultation, maternity and inpatient services.

“At the health district, we double patients; adults and children alike on the same bed. I am amazed with the uptake of ANC and general consultations in this health facility now. The maternity is gradually getting small and we are advocating for more space” Dr. Kendu David, Medical Doctor of CMA Wabane.

Just like the CMA Wabane, the Integrated Health Center Mpkot which remained on paper since 2006 went operational in October 2016. This was thanks to the advocacy of the Eyumojock Dialogue Structure and the village traditional council.

**Conclusion**

Successful collaboration with stakeholders can result to better services delivery in health facilities at community level. Meanwhile, advocacy is a powerful tool in proper health system strengthening, given that it is through advocacy that CMA Wabane was reopened for the service of the community.