

# HIV Free Lit/Ce Project

## The Voucher Initiative: A Post-Service Payment Mechanism to Increase the Uptake of Critical HIV Services



*HIV Free Littoral Project Manager at the Introduction of the Voucher Initiative to Stakeholders at the Regional Delegation of Public Health*

### Background

The impacts of the economic crisis that hit Cameroon in the 1980s have continued to have ripple effect on its population till date. Several years since the country regained economic stability several sectors have continued to pay the heavy price resulting from the economic shocks. Despite making some noticeable progress in in fractures, the government of Cameroon has however not meaningfully addressed the problem of generalized poverty. In the health domain, access to quality healthcare has remained relatively elitist due to cost of services, long distances to facilities, limited trained personnel

and over the counter payments. Especially in recent years, several sad incidences have been reported in hospitals across the country in which patients have died or subjected to inhuman treatment because unable to pay before/for services. This has led to rising calls for government to increase Universal Health Coverage (UHC) by putting in place a favorable health insurance to potentially eliminate overcharging and over the counter payments. Government's resolve to pivot towards the Universal Health Coverage was further emphasized during the President's New Year message on December 31, 2017. Cameroon's

Minister for Public Health then began implementing in 2018, the President's call for greater health access for Cameroonians reducing/off lifting the cost of some essential including HIV related services for certain categories of people in a bit to increase health access. Among these include free HIV tests for; children aged 0 - 15 years, pregnant women, TB patients, prisoners, and students in University milieus. This adds to the free ART for PLHIV in force since 2007. Notwithstanding, access to some other critical HIV related services by PLHIV is still challenging due to the high cost of services involved. During an enlarged Global HIV Management meeting of PEPFAR supported countries that held in the US in April 2018, Ivory Coast and Cameroon were singled out as two African countries where PLHIV continue to face serious financial barriers in accessing services. While waiting for government to roll out the universal health coverage to improve health access for all in Cameroon, CDC/ PEPFAR together with Government charged the

CBC Health Board to develop a short-to-midterm health financing strategy targeting PLHIV in two PEPFAR supported regions (Center and Littoral) in Cameroon.

### **Voucher Initiative: What It Is**

The Voucher Initiative introduced in the Littoral and Center regions in October 2018 is a consumer led demand site financing aimed at alleviating HIV positive clients from their financial constraints to increase their access to some critical HIV services. Through this Initiative, CBCHB will subsidize critical HIV services as per official fees. The Voucher initiative will subsidize HIV/ TB testing, ANC booking, Viral Load, consultations and advance disease management for a period of five months.

To effectively implement this initiative at all facilities (government and non-government), CBCHB together with MoH staff in the regions has held advocacy talks with facility heads to



*Stakeholders Carefully Taking Notes of Criteria to Benefit from the Voucher Initiative*



Voucher Initiative Services	Actual Cost in FCFA
Viral Load Test	5000
Antenatal Clinic Booking	12,500
HIV Test	500
Tuberculosis Test	1000
Consultations	2000
Advanced HIV Disease	80,000

explain its functioning and to emphasize on the need for them to respect official fees for all HIV services. Starting November 1, 2018, the initiative was officially launched in Douala. Since then CBCHB has assigned mentors to facilities who are now assessing clients using a screening tool to ensure that needy clients receive their services free of charge or at reduced cost. Indigent clients are issued a “cheque” (voucher) with the amount they are supposed to pay for their requested service which they then use to pay for their services at the counter. At the end of each month or after the

period as agreed with the facility, all vouchers received at the facility are summed up and the facility issues an invoice to CBCHB to reimbursement. Voucher Clerks have also been stationed at all facilities covered with this initiative to follow up and cross check to ensure smooth implementation of the initiative.

### Voucher Initiative: What Expectations?

The coming of the Voucher Initiative is a morale booster to most of the clients who were afraid of taking up some services due to financial constraints. Psychosocial workers of each facility assess clients’ financial needs to access services and recommend the indigent clients to be assisted through the voucher initiative. For instance, viral load testing which used to be 5000 and too expensive for most clients is now done for free for those who meet the criteria of support from the assessment. With a larger number of HIV clients now accessing viral load, it will now be possible to assess clients’ responsiveness to treatment and enable CBCHB measure the project’s progress towards the third 90 of the UNAIDS 2020 goal – 90% of those on treatment are virally suppressed.

## Voucher Initiative: What do Some Providers in Douala Think?

“ We were initially doing a Viral load for 60.000 after we were approached with this program, we dropped it to FCFA 5,000. Getting to know that there is a program to bring subvention to clients who are on treatment is a wonderful thing. This is because most of the clients are virtually not well to do. And coming up with a program like this one which will reduce the amount of money they get out of their pocket is going to be highly welcomed. My wish and hope is for this program to be scaled up and made either as an annual program or a permanent program so that many can benefit. I don't have any fears in the aspect of my clinic. For instance, just my presence for this meeting shows the extent to



**Dr. DICKMU Lawrence**  
**Ass. General Manager of Polyclinic Bonanjo**  
**Coordinator - HIV and AIDS Program**

which the management of our hospital holds this initiative in high esteem.”

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free things; when they will come to know that the program is free but will just run for a short time, they will not really be happy and so we may run into problems again. We will need to take time and educate the clients, on how long the program is and what it entails for any of the beneficiaries”.

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**REV Dr. Sister Shang Cynthia**

**St Padre PIO Catholic Hospital Akwa North**  
**Shisong Sisters Annex**

“ I am very happy with this new voucher system because it will go a long way to help patients whom we find in the hospitals and are not able to pay for their hospital bills. Many of them know that our hospital is referred to as “L'Hopital des Soeur” and so many patients come with little or no money to pay for their bills because they know the hospital is run by sisters of the Catholic Church. My main worry is that the program is so short, and our patients like



**Dr. YEMI Racine Marcel**  
**Coordonnateur UPEC, CEBEC Bonaberi**

“ C'est une manne qui tombe du ciel. Ceci aidera les personnes défavorisées dans nos établissements de santé. Le seul souci que j'ai est de savoir si le projet à la capacité de détecter correctement qui est le plus dans le besoin, donc indigent. Si cela est fait, cela

*aidera beaucoup de personnes vulnérables dans nos communautés ».*  
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*je rencontre quotidiennement des clients qui ont vraiment besoin de soins de santé mais ne peuvent pas se permettre de payer leurs factures. Donc, je vois ce programme comme un plan de sauvetage pour eux. Malgré tout, j'ai un souci. j'aurai souhaité que le système de Voucher soit géré de manière à ce que les bons ne se limitent pas à une cascade offerte dans une formation sanitaire, mais qu'ils s'étendent également aux clients qui sont contraint de faire le suivi dans d'autres établissements pour des services non mis en œuvre dans leur établissement initial »*



**Dr, Dombou Reine**

**Coordonnateur UPEC HD, Logbaba**

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« Le système Voucher est particulièrement la bienvenue dans mon établissement. Je le dis parce que

## **CBC HEALTH BOARD**

“HIV is just like any other disease; get tested and get treated”

Prof. Tih Pius Muffih, Project Principal Investigator.

### **Our Contacts**

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