# **CAMEROON BAPTIST CONVENTION HEALTH SERVICES**



**ACIVITY REPORT, 2013** 

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# **ANNUAL REPORT, 2013**

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#### LIST OF ABBREVIATIONS

CBCHS Cameroon Baptist Convention Health Services

ACP AIDS Care and Prevention Program

BBH Banso Baptist Hospital
BHB Baptist Hospital Banyo

BHM Baptist Hospital Mutengene

CP Central Pharmacy

DBH Dunger Baptist Hospital

DHSC Director of Health Services Central
EBHC Etoug-Ebe Baptist Health Center

HSC Health Services Complex

LAP Life Abundant Primary Health Care

MBH Mbingo Baptist Hospital

MBHD Mboppi Baptist Hospital Douala

PHC Primary Health Care

CIACP community Initiative AIDS Care and Prevention

CDC Centers of Disease Control and Prevention

EGPAF Elizabeth Glaser Pediatric AIDS Foundation

MOH Ministry of Health

PEPFAR President's Emergency Plan for AIDS Relief
HIMS Health Information Management Systems

ANC Antenatal Clinic

ART Anti-Retroviral Therapy

ARV Anti-Retroviral

BTMAT Beryl Thyer Memorial Africa Trust in the UK

CCP Chosen Children Program

COC Chief of Center

CoMCHAs Community Mother Child Health Aides

EFC Extended Forum of Care

FP Family Planning
NLC New Life Club

NTP National Tuberculosis Program

PMTCT Prevention of Mother-to-Child Transmission

PWD people With Disabilities

SEEPD Socio-Economic Empowerment of persons with Disabilities

SG Support Group

PCR polymerase Chain Reaction
YONEFOH Youth Network for Health

BL Burkitt Lymphoma

CHF Congestive Heart Failure

LRTI Lower Respiratory Tract Infection
URTI Upper Respiratory Tract Infection

UTI Urinary Tract Infection

#### **Mission Statement**

The Cameroon Baptist Convention Health Department seeks to assist in the provision of care to all who need it as an expression of Christian love and as a means of witness in order that they might be brought to God through Jesus Christ. Thus, the Health Board seeks to provide exemplary health care with genuine compassion and with overriding purpose of evangelical witness.

#### Vision

# Quality care to all

# Acknowledgement

The accomplishments presented in this report are God's mighty blessings to the CBC health care system through our collaborative efforts with our patients, partners and friends who have supported us in prayers, material and financial resources. Special appreciations go to the HMIS team, Heads of service, and all CBCHS staff who worked together to accomplish these results.

#### A. NARRATIVE REPORT

#### 1. Introduction

The Cameroon Baptist Convention Health Services (CBCHS), a non-profit, faith-based healthcare organization has continued to strive in the provision of quality, affordable and accessible services to everyone who need them. The 6 hospitals, 27 Integrated Health Centers and 50 functional Primary Health Centers of CBCHS are in six of the ten regions of Cameroon. The CBCHS provides holistic health services including preventive, curative and rehabilitative care. Other services and programs include the AIDS Care and Prevention Program, Central Pharmacy, Private Training School for Health Personnel, Life Abundant Primary Health Care, Technical service department, Health Care technology unit, Chaplaincy services, Social Services, Residency programs and Services for People with Disabilities

# 2. Private Training School for Health Personnel (PTSHP), Banso

The Private Training School for Health Personnel (PTSHP), Banso was created in 1955 and it has been steadily expanding in courses offered and in enrolment. In 2013, 18 courses were offered with an enrolment of 334 students. Some of the courses ended while others are ongoing. In effect, ten courses are going on with an enrolment of 132 students. The Biomedical Assistant Technician course was started this year. The school scored 97.8% in the end of certificate examination. This high performance is enhanced by the discipline and cordial relationship that reigns



between the staff and the students.

One of the main challenges faced by the school is limited space for classes and for offices for staff. As a step towards overcoming this, the first floor of the new building was completed, dedicated and put to use. Fifty tables and 36 table chairs were produced and other equipment were acquired for the Laboratory and the Demonstration Room.

challenges experienced by the school included staff and the inability of some students to pay school fee.

The school is very appreciative to all the that accepted their students for placement and mentorship they provided.



Other limited their

institution for the

#### 3. Life Abundant Primary Health Care (LAP)

The LAP Administration and staff worked hard to ensure proper supervision of the activities of the 50 Primary Health Centers. The total number of outpatients served by these centers was 41,822 while 1,245 antenatal clients were attended to and 817 low risk deliveries conducted.

LAP organized several trainings and refresher courses for the field staff and Community Owned Resource Persons (CORPs). A total of 9 participants from seven communities participated in the promoter basic training. They will function at the level of Health Promoters. A total of 22 Promoters were trained on how to effectively do malaria test using the Rapid malaria test kit. Over 54 promoters participated in a refresher course as part of continuous education.

The CDC/PEPFAR project organized two coordination meetings for 35 Community Mother Child Health Aides (CoMCHAs). The LAP Administrator carried out some visits to encourage and preside over the installation of PHC Nurses in seven LAP Villages and also facilitated the smooth transition of 3 PHCs that were upgraded to Integrated Health Centers. These include the Nwat in Northwest Region, Koussam in West Region and Voundou in the Centre Region. LAP carried out a Demographic Health surveys and Community Determined Health Care (CDHC) exercises at Makoumbi in the West and Bambalang PHC in the Northwest Regions. Three new PHCs were started at Bambalang, Champfung in Djottin and Nseh in Kumbo.

The PMTCT Supervisor carried out regular facilitative visits to the 38 Primary Health Centres that provide PMTCT services. A total number of 34,306 people were sensitized on HIV in the LAP communities. A total of 1,153 pregnant women were tested for HIV during prenatal clinic and 22 women were HIV-positive. Eleven PCR specimens of HIV exposed infants were collected and all tested HIV-negative. The LAP staff together with the rest of CBCHS staff joined the rest of the national and international communities to celebrate the World AIDS Day on December 1, 2013. Their activities included sensitization, VCT and sporting activities.

LAP was blessed with the visit of Drs. Alision/John Edwards and Sister Lorene Killickson who taught the CoMCHA class. Also, Sr. Joanne, a nurse from Netherlands visited and worked with the LAP staff.



Through the LAP spiritual activities, 1310 people were ministered to 83 of the people re-dedicating their lives to God while 15 surrendered their lives to Christ and 13 went through clinical counselling on various spiritual issues.

Working in collaboration with the communities, the Kam Vekovi and Njinijou PHCs' projects were completed and equipped for use. The first phase of the multipurpose building at LAP was completed. This includes the construction and decking of the basement. The process of fundraising to complete the building is

ongoing.

# 4. Technical Services Department (TSD)

The Technical Services department successfully implemented 6 of 19 goals in 2013. Four of the projects involving Strategy 9 projects(S9PP) have not been started because the signature of the financial agreement with AFD is yet to be made. The major undertakings of the department for this year included;

- Conducting an evaluation of CBC Fixed assets for the most part and supervising some evaluation interventions by external experts.
- Working on the technical files of the S9PP bringing them to about 70 % completion.
- The elaboration of a TSD progress ladder.
- The organization of a two days planning and evaluation workshop for Department leaders
- The elaboration of a casual workers policy.
- The apprenticeship program graduated 25 students and enrolled 28 new students. The current total enrolment of the school is 82
- A Biomedical Equipment and Assistant Technicians training course was started under the PTSFHP Banso.

The projects that were handled this year include;

- 1. The completion of the Banyo mini-maternity which was dedicated on October 26.
- 2. The decking of the second floor of the BBH eye Department.
- 3. The completion of a low cost duplex in BBH on December 16, 2013
- 4. The completion of work on the BBH senior staff duplex is over 80 %
- 5. The LAP multipurpose and residence block was started. The floor over the basement was decked
- 6. Work started on BHM X-Ray block and the section for X-ray machine is ready for use.
- 7. Work is in progress on the third floor of BHM maternity block
- 8. The observation ward of MBH was completed and put to use
- 9. Work on the MBH Intensive Care Unit is over 80% done
- 10. Part of the MBH new OPD was roofed.
- 11. The dormitory of the school of the deaf at MBH was renovated
- 12. The third floor of Mboppi building was completed and pending furnishing
- 13. The first floor of PTSHP was completed and put to use
- 14. Work on the first floor of boys dormitory of Baptist School Awae completed and put into use

One of the leaders of the department in the person of Mr. Tawah Wilfred died after a protracted illness. Please, continue to pray for his family.

#### 5. Chaplaincy Services

In 2013, the Social Services was separated from the Chaplaincy services to form an independent department. The Chaplaincy however continued with its goal of offering quality spiritual care to patients, their caregivers and the staff in the institutions. The major accomplishments of the department included;

*Spiritual Emphasis:* The theme of the spiritual Emphasis of this year was "He knows my thoughts" This activity was observed in all CBCHS institutions on August 26<sup>th</sup> to 31<sup>st</sup> 2013. It ended up with the prayer day on the 1<sup>st</sup> September 2013. Staff from the various institutions visited churches within their localities and shared information about services offered, current health issues affecting the population and prayer concerns from the Health department. Funds raised in the various churches were used to support the needy persons of the community.

**Spiritual life Committee:** Most of the spiritual life committees of the various institutions functioned very well while some are just fairly doing well. Those that were not doing very well were encouraged during supervision visits.

**Spiritual Chaplaincy Committee:** The CBCHS Spiritual chaplaincy improvement committee met according to schedule. The committee deliberated and made recommendations on many salient spiritual /chaplaincy issues.

**Staff and patients Daily Devotion:** The Staff and patients' daily devotions went on smoothly in all CBCHS institutions. Through this, many people have been led to Christ while some rededicated their lives to God.

Gospel Team/Choir: Only a few institutions had functional Gospel Teams while the number of our institutions that have choirs is increasing. In the Institutions where any of these exist, they are involved in outreach programs. They also visit inpatient of the institutions. Many people both in and out of CBCHS institutions have been won to Christ and many others restored to faith as a result of the activities of these two groups.

**Counseling Services:** Many of our clients, caregivers and Staff continue to benefit from short term counseling services. A lot of issues have been handled during counseling services for which many of the clients remain grateful.

**Prayer Ministry:** Many institutions have organized prayer retreats that have been very helpful. Also some institutions have prayer team members who organize all night prayers in their various institutions depending on their spiritual challenges. We have had two Prayer- Chain- Days organized in January and December that was observed by all institutions. During this time, staff signed in for an hour in which to pray for some

constituted prayer concerns. Reports from the various institutions indicate that this exercise was very successful and we can attest to the fact that our God has answered many of our prayer concerns.

**Bible Studies:** The study of the word of God in our institutions through the TEE and Bible Studies has continued to improve the spiritual nourishment and growth of our staff. In some institutions Bible studies are organized in small groups while in others it is for the general staff. Some Administrators facilitated the running of TEE by paying for TEE books for staff and the cost recovered from the staff in installments.

**Seminars:** The community counseling clinic (CCC) working together with the chaplains in many of our institutions has organized seminars for both couples and singles. These seminars have helped staff so much especially in the areas of parenting and marriage enrichment.

**Lord's Supper Services:** Staff in Stations where there are ordained chaplains receives lord supper services on a monthly basis. This has proven to be very helpful especially for those who due to their work schedule, miss these services in their local churches. Also these services have been beneficial to patients and their caregivers.

Ordination of Chaplains: This continues to be a challenge as the local churches have to acknowledge the work of the chaplains in their local churches and recommend them for ordination. The challenge is that many local churches feel reluctant to recommend the chaplains for this exercise. They do not see the wider mission of the chaplains especially in exercising the services authorized by ordination within the Baptist system. However we are thankful to those churches who have recommended some of our chaplains who are now engaged in the process of ordination. One has already undertaken the ordination examination (Counsel) and only the ordination service is pending.

#### 6. Social Services

Social work in the CBC Health Services is dedicated to enhancing human capacity to solve complex social problems in order to create a more humane and just society. One of the cornerstones of social work practice is the focus on the strengths, as opposed to the shortcomings, of individuals, families and communities so that these can be deployed to find creative solutions for complex social problems. The profession is characterized by a steadfast commitment to social justice in the service of empowering individuals, families and communities to meet their needs.

The Social Services department has gone functional as an independent department. It pursued social justice for sexually abused children in the Belo Municipality. It has linked two amputees with a missionary body which provided prosthesis for them. It has also successfully connected many abandoned patients back to their families. It has been noticed that it increased the average number of patients seen in a month

by social workers to 200 in each pool. Many more staff are gaining awareness on the services of the social workers and thus the increase in the number of referrals and cases handled. It has created links with the divisional delegates of Boyo, Bui and Wouri for possible benefits from the government.

# 7. Center for Clinical Pastoral Education And Social Services (CECPES)

The Center for Clinical Pastoral Education and Social Services (CECPES) was launched in 2008 as an educational arm of the chaplaincy and social services. It aims at equipping institutional chaplains and professional counselors with skills for ministry. It organizes continuing Education for chaplains and social workers. Recently, the staff of the CBC Health Services and CBC Pastors have benefited from the program as most staff have taken units of this training for either therapeutic reasons or to enable them know how to integrate spirituality into their functioning. From the statistical report of CECPES, one would see a big number of staff wishing to take a unit of Clinical Pastoral Education. Because of this, a modified version of this training was adopted called the Night Extended Unit. This modified version requires that students come in for classes once a month for five days beginning from 2pm – 7pm. In 2013, the clinic trained 7 night extended unit students and 5 summer units. The unit has three students at the Supervisory Level in training

Community Counseling Clinic (CCC): Beside offering counseling to clients, in 2013, the CCC also conducted seminars in churches. The clinic conducted three couple seminars, three single seminar and three widows/widower seminars in churches. Marriage, couple, single was conducted in CBCHS institutions. The clinic extended its services to the CBC Education Board by training its chaplains and Discipline Masters for five days. They were drilled on relevant topics like diagnosing various personality disorders (especially the antisocial personality disorder), Client centered counseling with students, counseling skills, counseling theories, redemptive approach in disciplinary issues, anger management, Theology of spiritual care, the impact of family discords on students, ministry from an ecumenical approach, psychosocial issues affecting students and lots more. Other departments of the Cameroon Baptist Convention are making use of the Counseling services. Recently these services have benefited the Evangelism and Missions Department in the area of Redemptive counseling for Pastors.

# 8. AIDS CARE AND PREVENTION SERVICES

In 2013, the various prongs of the ACP continued to response to the HIV pandemic by intensifying the activities of Prevention, Care and Treatment and Psychosocial Support to the infected and affected people. This report summarizes the accomplishments and challenges of 2013 of the ACP components;

# **Community AIDS Education Program**

The Community AIDS Education Program is ongoing, raising awareness on HIV and AIDS issues in the communities and generating demand for various facility based services. The Community Initiative AIDS Care and Prevention (CIACP) program in the Southwest Region and the ViiV Project in the Northwest Region are training HIV and AIDS community resource persons to sensitize their communities on the importance of early antenatal care (ANC) attendance and the importance of Men participating in ANC with their spouses. These programs also conduct Community Voluntary HIV Counseling and Testing and linking persons who test HIV positive to care and treatment and follow up to retain HIV positive clients in care. The interventions of these projects have helped to impact on uptake of ANC and other services. All the CBCHS institutions joined the rest of the international community on December 1, 2013 to commemorate the World AIDS Day on the theme "Getting to zero: new HIV infections, AIDS



significant impact on the efforts to curb the fuel of HIV in Cameroon.

# Prevention of Mother-to-Child HIV Transmission Program



related deaths and discrimination". The institutions carried out various activities including а debate on shared responsibilities by men and women in child bearing and upbringing, sensitization campaigns in communities using various approaches, HIV counseling and testing, guiz in schools, churches and workplaces, march past, etc. The activities of CBCHS institutions on that day, although we cannot tangibly measure, have a

financial support from sources, the CBCHS supported the Prevention of Mother-To-Child HIV Transmission (PMTCT) in six regions The in Cameroon. President's Emergency Plan for AIDS Relief (PEPFAR) through the Centers for Disease Control and Prevention (CDC) continued to support the scale up and improvement of quality **PMTCT** 

services in the Northwest and Southwest regions of Cameroon while the Elizabeth Glaser Pediatric

AIDS Foundation supported the implementation of this service in the West, Adamawa, Littoral and Center regions. In 2013, a total of 778 PMTCT sites counselled and tested 116,480 pregnant women; 4,865(4.2%) of whom were HIV positive and are being followed up to ensure that they and their infants receive treatment.

# Care and Treatment and Tuberculosis Control Programs

The HIV care and treatment and Tuberculosis Control Program staff continued to work hard, counseling the clients enrolled on ART and TB medications in the clinics to ensure that they adhere to treatment. There are 19,318 clients ever enrolled on ART in the five CBCHS care and treatment sites and 14,445 are current on ART. Others transferred out, died, were lost to follow up or stopped treatment. The TB Program screened a total of 4,514 persons and identified 669 cases. The Mbingo Baptist Hospital TB ward that has been under construction was completed, inaugurated and put to use this year. It has a section for TB suspects and even Multi Drug Resistant TB suspects can be admitted to the single rooms. It has greatly improved the care given to TB patient in Mbingo. This project was jointly funded by CHEF, Pott's Foundation and the Health Board.

#### Women's Health Program

The Women's Health Program worked in collaboration with several partners accomplishing a lot this year. Working together with the Ministry of Health, a mass screening program for cervical cancer was organized at the Yaounde University Teaching Hospital. A mobile clinic screening program was conducted in the Adamawa Region with funds from the MOREMI Initiative Program. Also, the program participated in series of mass screening campaigns in the South West organized by the US based Patcha Foundation. The program has instituted monthly cervigram reviews and it is working well. A team of World Health Organization cancer experts from Lyon in France visited the program at Mboppi. The delegation was led by Prof Doh Anderson, the Executive Secretary for National Committee for the fight against cancer.

#### Chosen Children (Orphan Care) Program

The Chosen Children Program held coordination meetings for staff and community workers. Fundraising and advocacy program were organized during the Easter Festival in Bamenda on April 7, 2013. The Program equally participated actively in the commemoration of the World Orphan Day – May 7<sup>th</sup> by their involvement in the CRTV Monday Show Program. A total of 2035 children were assisted this year, many of whom were successful in end of year or course examination while some in vocations have exceled. Of those assisted, 1230 were females and 805 males. Eight chosen children received Christ and were baptized. In an effort to empower some Caregivers to render better care to the chosen children under their care, 30 caregivers were trained in the cultivation of mushroom. Thirty-five Caregivers who were trained on mobilizing the community on PMTCT services have been very active.



The program was visited on December 18th, 2013 by Mr. Ernie Falk who represented partners from Canada. As a means of advocacy, the program was projected over the National Television media in two separate instances. The donors expressed their satisfaction with the interventions of the program.

# **Partner Notification Services**

The Extended Forum of Care (Contact Tracing) Program extended her services to three sites in the Littoral and Center regions, starting with the training of health advisors. Also, the program is integrating its services in PMTCT in some selected sites in the Northwest and Southwest Regions. A total of 1100 index persons and 1272 contact persons were identified, 611 of the contact persons were notified and 390 tested for HIV. Of those tested 212 (54%) were HIV positive.

## Youth Network for Health Program



The Youth Network for Health sensitized 23,283 young people on HIV and AIDS, STDs, smoking, drug abuse, dating, relationships, rape, abstinence etc. The program trained 1,114 youth to function as Peer Educators. A total of 1342 persons were tested for HIV, 17 of whom were HIV-positive. A total of 120 young people were

counselled on specific issues. The commemoration of the 2013 World AIDS Campaign equally focused on youth in schools and communities.

**New Life Club:** The New Life Club is continuing to identify persons involved in commercial sex work. An assessment of cases is done and they are enrolled in the club. The club activities include lessons on self-awareness, character building, and development. Six club members returned to school while most of the members prefer to do business. In collaboration with the Cameroon Medical Women Association some club members benefited from part payment of CD4 count test fee, treatment of some STIs, provision of preservatives and other preventive materials etc.

**Support Groups:** The Support Group Program of People Living with HIV has a membership of 1402, of whom 242 are males and 1160 females. The association has facilitated the assessment and treatment for many members. The Program engages members in various capacity building activities like mushroom cultivation, telephone booths, mini shops, etc.

**Nutrition Improvement Program:** The Nutrition Improvement Program is running in 28 CBCHS facilities. A total of 12 new staff were trained this year and three more are in training. Over 1577 patients and clients have received or observed different types of nutrition related demonstrations. Proper nutrition counselling was provided to a total of 16,449 patients in 12 health units.

**Palliative Care:** The Palliative Care Program continued to offers in and out patient care, counseling, home base care and education on bereavement. A Program Coordinator, Mrs. Nditeck Joan was appointed. Reporting tools were harmonized.

The main challenges have been the irregular supply of ART drugs to the HIV clinics, limited funding for some of the programs, and staff shortages. The Program staff continues to work hard while trusting God for a way forward in overcoming the challenges.

## 9. CBCHS Burkitt Lymphoma/Childhood Cancer Service

In 2013, the Burkitts Lymphoma Program staff worked hard registering a total of 111 new cancers in children aged 0 to 15 years in the POND database. Initially, the program provided only curative treatment to children with Burkitt lymphoma. Currently, the program treats children who present with Wilms tumour (cancer of the kidney), retinoblastoma (cancer of the eye), Kaposi sarcoma (mostly in HIV positive patients as well as other less common childhood cancers. Table 22 below presents a distribution of the different diagnosis. About 50% of our patients are cured.

To enhance treatment compliance and promote healing, the program supports the parents with treatment cost (laboratory investigations, drugs and hospitalization bills) and children with food. About CFA 2.5 million was used for this support this year. The parent support organizations by parents of children treated for cancer have been established at Mbingo/Bamenda, Babessi and Ntaba. They provide advocacy in the community, refer children with suspected cancer for treatment, visit and support patients in hospital, take part in World Child Cancer Day, and have started fund-raising projects to achieve sustainability of this service in the future. In the past year chicken farming, sale of palm oil and pig farming have been supported and extended to generate income. The business principle is to provide the initial capital outlay to a parent or local farmer, and equally share in the profits. A donation from Prof. Sverre Lie and his wife Kari from Norway has made it possible to extend the "farming" projects.

A formal palliative care motorbike outreach program was started this year to support children and families who have terminal disease. A visiting German paediatric cancer specialist, Dr. Mona Tamannai is working at BBH to assess the impact of the outreach program on the patients and their families.

A survey was done during this year for all children with Burkitt lymphoma who had paraplegia when they were diagnosed during the past 10 years (about 87 patients). Amongst the 30 long term survivors a few were found to have remaining handicaps such as spasticity of the legs, or incontinence of the bladder and bowel. The first of these has been referred to Sajocah rehabilitation Centre at Bafut. He now walks better and is back at school.

Clinical nurse practitioner, Vera Njamnshi, presented a paper at the International Society of childhood Oncology conference in Hong Kong in October. She has been invited to be a member of an International Nurse Study Group on the Management of Children's Cancer. Research nurse Mbah Glenn presented a research survey of the knowledge of childhood cancer amongst nurses in clinics in the Northwest region, and identified an alarming level of ignorance amongst nursing staff. This should encourage a change and addition to their formal training curriculum.

Dr. Kouya Francine will enroll for a two year program in cancer at Tygerberg Hospital and Tygerberg Children's Hospital, Cape Town in 2014. Dr. Francine Kouya is the formal collaborator of a new Pan African Pilot Study for children with Wims tumour, which will be conducted at MBH. A poster about this initiative won the best poster award at the SIOP Hong Kong Conference. The first 5 patients already commenced treatment.

The BL Program has published four scientific papers and three abstracts in peer reviewed journals. A childhood cancer symposium to celebrate the 10<sup>th</sup> anniversary of this service held at the Mutengene Health Complex on 29<sup>th</sup> November. Twenty-five talks were given by CBC staff members, local experts and visitors from UK, Germany and South Africa. The first session was recorded and broadcast on Cameroon national radio and television. Forty five Delegates attended.

The BL Program intends to treat as many children with cancer as possible and to raise awareness of childhood cancer and the availability of effective treatment. Also, the development of dedicated beds for children with cancer, and to improve on the children's wards at MBH and BHM are a priority of the program. Another plan of the program is to formalize treatment protocols for other childhood cancers. The program plans to strengthen the operational links with Stellenbosch University and the Tygerberg Children's Hospital. Fundraising (through farming projects) for the parent support component of the treatment will be expanded if successful.

The above accomplishments were made possible by the financial support and collaboration of the "twinning" partners who are the Cameroon Baptist Convention Health Board (CBCHB), the Beryl Thyer Memorial Africa Trust (BTMAT), Tygerberg Children's Hospital and Stellenbosch University, and World Child Cancer (WCC). Research was sponsored by the Swiss Cancer League, and we also received some personal donations.

#### 10. Socio-Economic Empowerment of Persons with Disabilities (SEEPD) Program

The Socio-Economic Empowerment of Persons with Disabilities Program is in the second year of her this project phase which will end in 2014. The main goal of the second phase of the program is to reduce the closeness between poverty and disabilities by ensuring that persons with disabilities in the Northwest Region of Cameroon exploit their full potentials in an inclusive environment. In 2013, the Program continued to implement activities in four main domains of intervention which are; medical care, inclusive education, livelihood and social domain. Advocacy, gender and child welfare continued as cross cutting issues while research informed the program on best practices to adopt. The summary report below presents the Program's progress towards its overall objective.



Medical and Rehabilitation services: At the end of 2013, 87,863 people accessed medical services at either hospitals or in communities. Of this number, 2,495 benefited from eye, orthopedic and ENT surgeries and 13,030 received communities based services.

The program continued to build the capacity of staff to serve in various aspects. This year one staff completed training in audiology at Kenya

and returned to work at MBH where an audiology unit is being set up in the ENT department. Three nurses are currently in training in the Psychiatric/Mental Health Nursing School in Calabar, Nigeria and graduate in 2014.



Education: The current purpose of the inclusive education component is to increase government's involvement in the education for all (including children with disabilities) in primary, secondary and tertiary education. In line with this, the program continued to provide training to CWD in both special schools and mainstream schools. Also, in order to meet the increase in enrolment of CWDs in mainstream

schools, 78 additional teachers were trained in inclusive education. A total of 384 teachers have been trained in inclusive education. The program equally continued to provide technical support to facilitate the brailing of examination questions by the Cameroon GCE Board. These contributed to improve on the performance of CWDs in end of course exams. The Program is in the process of formalizing the handing over the brailing of the GCE examination to the CGCE Board. As a results of advocacy, support was received for learners with visual and hearing impairments. The Mayors of the Jakiri, Kumbo, Fundong and Ndu councils supported 30 students with impairments at the ISFD and ISFB.

Livelihood: The livelihood component focuses on ensuring that more persons with disabilities earn their own income by building vocational capacities, expanding access to micro credits and intensifying advocacy

for formal employment of persons with disabilities. In 2013, vocational training through apprenticeship program was ongoing for 35 persons with disabilities in communities. Four persons with disabilities who graduated from vocational training are self-employed. Micro-credit disbursements were extended to one new Division making seven. A total of 344 persons with disabilities were trained on group dynamics, loan management, business, personal hygiene, nutrition and HIV/AIDS and of these, 235 received micro-loans.

**Social inclusion:** The social inclusion component seeks to increase access to mainstream development activities by persons with disabilities through increasing their leadership role and bringing on board other actors who are not necessarily disability focused.

In line with this, ten associations of persons with disabilities successfully implemented different activities in 2013. This guarantees sustainability at higher levels where PWDs will take leadership roles in ensuring access to opportunities in inclusive settings and facilitate social inclusion. Over 2,752 PWDs participated in municipal/council elections in the Northwest Region with 3 of them taking leadership role as councilors in the Tubah, Bamenda II and Nkum municipalities. This has been significantly contributed to by the project through capacity development for PWDs on advocacy, assertiveness and political participation.

**Communication/advocacy:** The visit of the Honourable Minister of Social affairs to the Northwest Region on July 19, 2013 during which she granted audience to the SEEPD Program was an opportunity to present challenges to national government authorities. A comprehensive advocacy plan was developed and presented to the minister.

Training on disability and the media has been provided to 33 media men/women selected from 22 media houses in the Northwest Region. It is expected that knowledge obtained will ensure the effective mainstreaming of disability in media program conception and reporting. This will in turn contribute to changing perceptions and breaking barriers in our communities.

**Research:** The purpose of the research component is to Support the Program to develop and implement sustainable inclusive practices. In this light, a study on the incidence of road traffic accidents resulting from the use of motorbikes and their impact on the socio-economic life of families and communities in the Northwest Region has been initiated and data is being analyzed. The results of the study will inform the Program on advocating to public health authorities on adopting a public health approach that minimizes the

incidence of motorbike accidents in the Region. A study on approaches in providing livelihood training to PWDs was completed and the report is being prepared.

# 11. Infection Prevention

The CBC Health Services started the Infection Prevention Program as an integral part of her services in 2002. The main task of the unit is to promote infection prevention in all CBCHS institutions by creating infection prevention consciousness in all staff and the intentional implementation of the activities. In 2013, the Infection Prevention Improvement Team undertook several measures for improvement. These include;





- The initiation and development of a uniform or dress code.
- Organization of seven infection prevention seminars in 29 CBCHS institutions with a total staff participation of 200
- Conducted s supervisory visit to five health facilities to review the extent of implementation of the recommendations made during infection prevention seminar.
- Observed the Infection Prevention Day on May 17, 2013 during which staff were sensitized on injection safety.
- Included infection prevention module in all the courses that are taught in the Private Training School for Health Personnel, Banso

The main challenge of this unit is that many office staff

still have limited knowledge of infection prevention measures.

# 12. CENTRAL PHARMACY (CP)

The goal of the CBC Central Pharmacy is primarily to make available high quality pharmaceuticals, including medical supplies and diagnostics at affordable prices to CBC Health Institutions. This entails importation and local manufacturing of various products. In 2013, all the units of the CBC Central Pharmacy worked hard towards the attainment of the goal.

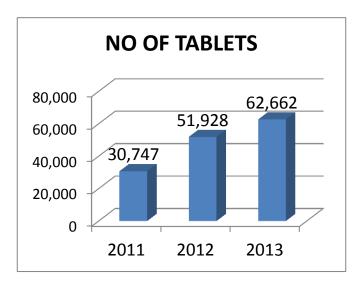
**DRUG SUPPLY SERVICES:** In 2013, the drugs were received worth 659,675,081 FCFA and medical supplies worth 255,058,693 FCFA. Drug availability was over 60% this year. Laboratory supplies and reagents orders amounted to 213,161,624 FCFA. A total of four White Cross consignments from North America, and two consignments of donations from Dowring in Australia and other sources were received.

The CP truck made a total of 21 trips to the Northwest Region with drugs and medical supplies. Small orders were dispatched 61 times by public transport to the Northwest Region (on average 6 times per month). The truck is unreliable and will be replaced with a new one in 2014.

**STERILE PRODUCTION:** This unit produces intravenous (IV) infusion fluids. A total 160,000 bags (80% of the quantity planned for production for the year) of IV infusion fluids were produced this year. The unit has identified cheaper sources of raw material and plan to buy a bigger autoclave. It is hoped that these will enable quality products to be available at affordable with the implementation for these measures.

The production of eye drops has been steady, meeting the needs of CBCHS eye units. The unit has a higher production capacity beyond consumption by only CBCHS eye care units. The unit is working towards attaining ISO certification and to eventually produce for sister organizations. A new line of products was introduced in 2013: Ciprofloxacin, Dexamethasone and Tropicamide eye drops

**COMPOUNDING/Non-STERILE PRODUCTION:** The Non-Sterile Production unit is responsible for the preparation of extemporaneous products for all the hospitals and its health centers. These include ointments, creams, solutions, suspensions, emulsions, lotions, etc. This department prepares 26 different products. The production of creams and ointment has been steady throughout the year due to the availability of raw materials. However, there was a drop in production compared to 2012. This was due to the stocking of other products as substitutes for some of the products produced by the Department. This includes NaCl mouth wash. The unit also received donations of some liquids like Paracetamol syrup that would have been produced. The unit continues to face the major challenges manual production and difficulty of getting proper packaging containers.



CHEMICAL PRODUCTION: The production statistics of this unit steadily increased over the last 3 years as can be seen on the charts. A new product, liquid detergent was introduced in 2013. The unit now produces treatment soap (adult and child strength), antiseptic soap, powder Detergent, Sodium Hypochlorite bleach and CP Bathing soap ('His

Grace'). The bathing soap "His Grace" was not produced in 2013 because the main active pharmaceutical ingredient was not available. The unit intends to introduce washing soaps as one of its products. The main challenge is that all the activities are manual.

**QUALITY ASSURANCE UNIT:** The department provides services to all the CP production departments by participating in production, carrying out of in-process and end-product quality controls, development and validation of production protocols, documentation of all processes in all departments of Central Pharmacy, performance of quality control of medicines that have been procured, control of environmental and waste management control at Health Services Complex.

The challenges faced include inadequate laboratory and office equipment, furniture and work space. Work is still going on to validate and standardize laboratory work and production procedures according to the International Organization for Standardization (ISO).

Research work is in progress leading to establishment of expiration dates for some non-sterile products. The pilot phase on the Microbiological Surveillance of theatres and intensive care units of some selected CBC hospitals will start in 2014.

**HESCO WATER:** Bottling was consistent in 2013 and over three hundred thousand liters of water were bottled. This is a higher quantity compared to previous years. No major breakdown of equipment was experienced this year. The department received a considerable amount of spare parts for the filling and shrink wrap machines and for the treatment unit, the ink jet coder, computers and printers from the "FOR WE CARE TEAM", Canada.

The unit needs more staff and to intensify marketing of the product. The HESCO WATER slogan is "One patient, One HESCO" with the intention of speeding up water rotation and making available quality water. The unit needs a distribution van. HESCO is being given a new-look with new labels and pre-forms.

# 13. Health Services Complex (HSC), Mutengene



In 2013, there was a major breakthrough in situation of CBC Health Services Complex property. The Supreme Court delivered the final judgment for the Complex property in favor of CBC on June 12, 2013. The process of working to close the case is in progress. The

Administration of Health Services is working hard to consolidate the entire complex land, equally trusting God for another breakthrough in all challenges involved. The HSC is currently renovating the warehouses and CP offices as well as developing a fish pond.

The Complex started a day care center for children aged 3 months to 4 years. The current enrollment is six. The center has alleviated the frustrations of many staff that have not had house help when needed.

The Regional Training Center was launched hosted several courses in 2013. The training programs include the Advanced Life Support in Obstetrics (ALSO) and HIV and AIDS trainings in modern diagnostics technology such as CD4 testing with PIMA machine, and the use SMS Printer to send out EID test results. The centre also hosted Childhood Cancer Symposium. Other courses programmed to be organized in this centre include Palliative Care, Healthcare Administration and Hospital Management, Nursing Administration and qualitative and quantitative data analysis methods and Partner Notification.

The US Centers for Disease Control (CDC), an arm of the US Embassy transferred their offices from the CBC Health Services Complex, Mutengene to Yaoundé in October 2013. However, complex is still host to the Early Infant Diagnosis (EID) Laboratory.

The Complex received routine visits of government officials of the Southwest region from the Delegations of Mines, Industry and Technological Development, Labour and Social Security, Employment and Vocational Training, Public Health, Environmental and Nature Protection and Taxation and others from Yaounde.

#### 14. Banso Baptist Hospital (BBH)

The staff of BBH worked hard in 2013 serving a total of 93,147 outpatients and 8,116 inpatients. BBH made major advancement in the development of infrastructure and acquisition of equipment. Two staff duplex were constructed,



and the former radio house renovation to serve as a staff house. The second floor of the eye department block was decked and a second incinerator constructed. A new ultra sound machine was acquired

The Spiritual Emphasis week was observed on 26/08/2013 to 01/09/2013 and the program was very successful. Rev. George Vimensi – the

speaker read from Psalm 139: 1-7 and dwelled on the topic, "God is all knowing". Nineteen staff visited 19 congregations around Banso Baptist Hospital and brought back words of appreciation from the Christians for the good services the Cameroon Baptist Convention Health Services is rendering.

BBH organized a retirement program for three of their staff including Mrs. Kongla Rose Mary Wirsiy – Nurse, Mr. Asanji Mbam Emmanuel – Carpenter and Mr. Yufenyuy Peter – Driver. The retirement program went well. This year, a total of ten visitors came and assisted us with services.

One of the staff of Ndu Baptist Health Center in the person of Bensa Winifred died at Banso Baptist Hospital on 26/11/2013. Burial took place in her home town at Mesaje on December 6, 2013.

Lassin Baptist Health Centre Building: Work resumed on the project of the health center last October 2013 and is at lintel level. The Landlord placed an injunction on the project November 28, 2013 and the work halted. His grievance pertained to the health center land. The DHS delegated the Administrator of BBH who handled the matter.

**Ngounso Baptist Health Centre:** A land rover was acquired for the Health Centre on August 9, 2013. The vehicle will enhance quick referrals to hospital. A Bursary has been created at Ngounso Baptist Health Centre and Ms. Kidio Charity was appointed as the Bursar.

#### 15. Mbingo Baptist Hospital (MBH)

The year 2013 has been very busy and the staff worked very hard serving a total of 82,290 outpatients and 10,024 inpatients. Major activities of the hospital for the year are as follow:

**Smile Train Program**: The ENT team from MBH was made outreach visits to BBH and BHB: A Smile Train week was observed in Banso Baptist Hospital from 21<sup>st</sup> to 26<sup>th</sup> January, 2013. During the period, cleft lips and cleft palates surgeries were conducted. The Smile Train week was also organized at Baptist Hospital Banyo from the 9<sup>th</sup> to 16<sup>th</sup> November, 2013 and 16 surgeries were done.

**World Leprosy Day**: The celebration of the World Leprosy Day on January 27th, 2013 witnessed the discharge of 12 leprosy patients who were healed of the disease and 2 persons living with disabilities who graduated from the Community Rehabilitation Services in craft work. A leprosy survey was conducted at Ndop, Ngoketunjia Division from 19th to 30th August, 2013. A total of 1304 persons were examined and 5 cases were identified.

**CBR Leadership Change**: The leadership of Community Based Rehabilitation program, changed from Mr. Yuh Simon to Mr. Kenchi Joseph on February 15<sup>th</sup>, 2013. Mr. Yuh now functions as the Assistant Eye Care Manager.

*Inauguration of the MBH Diabetes Association*: The Mbingo Baptist Hospital Diabetic Clinic was inaugurated as a Diabetes Association on April 4th, 2013 by the President of the Cameroon Diabetes Association, Dr. Nkwenti Davidson.

**PAACS and CIMS Training Programs**: On July 20<sup>th</sup>, 2013, five doctors graduated from these programs. This includes three surgeons and two internists. The graduation ceremony was covered by CRTV Yaounde and broadcasted several times. The broadcast by CRTV resulted in an increase number of surgical patients. The PAACS and CIMS programs each enrolled three residents this year. The PAACS new residents include; Dr. Ebogo – Cameroon, Dr. Kabba – Sierra Leone and Dr. Nogel – DRC and the CIMS interns are Dr. Demgne Kamdem Christelle Stephanie, Dr. Nyanga Albert and Dr. Achu Helmine

A total of 117 visitors visited Mbingo Baptist Hospital this year. Of this number 30 served and taught with PAACS while 45 taught with CIMS. Fourty two of the visitors were medical students, nurses and their spouses.

**Audiology Services**: With the return of Miss Chia Repha from Kenya after the completion of a one year diploma course in audiology, the Mbingo Baptist Hospital audiology services went operational on October 3<sup>rd</sup>, 2013. It was set up by the Sound Seekers Ear Institute of the United Kingdom with whom an MOU was signed with Mbingo Baptist Hospital on October 4<sup>th</sup>, 2013. One of the advantages of this new service is that after ears screening, hearing aids are provided at no cost to the patients. Second, this service is very useful for the hearing impaired pupils of the ISFD Mbingo. Their ears are being tested and hearing aids provided to those who need them. A total of 100 clients have been screened and 94 hearing aids provided to 51 clients.

**Performance Based Financing (PBF):** The PBF started in Mbingo Baptist Hospital and Finkwi Baptist Health Centre in May 2012. Through this scheme, incentives were provided to the staff. Part of the money was used for projects like waste disposal pit, construction of an incinerator, purchase of mosquito nets and Macintosh material for covering of mattresses, replacement of the latrine and bathrooms doors and a galaxy tri- motorcycle. PBF has influenced improvement in the quality of care provided to patients.

**Service Improvement Seminars**: Two service improvement seminars were conducted. The first was the Infection Prevention training from 4<sup>th</sup> to 6<sup>th</sup> April for Head nurses and Department Heads and the COPE exercise from 29<sup>th</sup> to 31<sup>st</sup> May for the general staff.

Peritoneal dialyses: This service started on 27/5/2013 and has successfully dialyzed 12 patients.

Labour medals and National Order decoration: During the Labour Day celebration on 1<sup>st</sup> May, 2013, 14 workers were decorated with labour medals. Meanwhile on May 20<sup>th</sup>, Mr. Yuh Samuel, the Chief of Centre of Belo Baptist Health Centre was decorated with National Order of Merit medal.

CAMPOST services and money transfer. Cameroon postal services and money transfer services started in MBH



on September 27th, 2013. This has greatly facilitated the transfer of medical bills to patients. In the past, patients used to go to Belo Express Union, a distance of about 10 km, to receive money.

#### **Building Projects/Equipment**

One of the major challenges that MBH experiences is in the area of housing for staff and

visitors. The institution was blessed with external funding through Dr. Palmer's sources which will enable the construction of a hostel that will accommodate more than twenty visitors. The ground breaking of the building was done. Other infrastructure projects accomplished include the plywood ceilings of the Women and HD/Ulcer wards which were replaced with plastic ceiling (lambrin) and the walls repainted. The construction of the TB Observation Ward was completed and it was dedicated on April 24th, 2013. Work is in progress on the intensive Care Unit (ICU). Work on the surgical clinic at the new OPD is in progress and will be completed in 2014. A new 200 KVA generator and an automatic switch were purchased and installed. The 100kva AES-SONEL transformer which was frequently producing low voltage has been replaced with a 160kva. A digital x-ray machine was purchased and will be installed in 2014. It will greatly improve and facilitate diagnoses. The purchase of x-ray films will not be necessary. *Contract with VIETTEL Cameroon*: Mbingo Baptist Hospital is in the process of signing a contract with a telephone company, VIETTEL to plant an antenna at the hill behind the Mbingo station.

**Mamfe Baptist Health Centre**: This health center was started on September 16<sup>th</sup>, 2013. It offers only the outpatient services. The maternity services will go operational in 2014.

**Akeh Baptist Health Centre**: A government health centre was created in Akeh within a short distance from our centre. Initially, it may decrease the attendance of Akeh Baptist Centre.

**Nkwen Baptist Health Centre:** The entrance and the parking lot area were paved.

Kwighe Baptist Health Centre: It acquired a Suzuki vehicle to facilitate movement of emergency cases to the hospital.

**Bafoussam Baptist Health Centre**: The centre constructed a room with timbers for an ultrasound machine.

**Spiritual activities**: The Gospel Team participated in a three day crusade organized by the CBC Church Djichami. During the 2013 Bible Conference that held at Anyajua, taking of blood pressure and screening of men for prostate cancer were done by the staff of Mbingo Baptist Hospital.

Miraculous healing of Chitu Mildred who was involved in a ghastly motor accident: Mildred, a nursing assistant was involved in a ghastly accident on February 7<sup>th</sup>, 2013 while coming to work on a bike. A tipper knocked down the bike. She was unconscious in the hospital for several weeks. After discharge on April 2<sup>nd</sup>, 2013 she was on sick leave, fully recovered and resumed work on November 27<sup>th</sup>, 2013. The staff were overwhelmed with joy to see and hear Mildred speak in the Chapel after a period of eight months.

#### Obituaries:

A nurse practitioner student, Mr. Menyah Gideon from the Mambilla Baptist Hospital died on November 5<sup>th</sup>, 2013 and was flown to the Nigeria-Cameroon borders by helicopter on November 6<sup>th</sup>.

Rev. Mbieng Elias who served in Mbingo Baptist Hospital for 26 years, retired in December 2012, died on November 10<sup>th</sup> and was buried on November 14<sup>th</sup>, 2013.

**Appreciation of services by users:** A couple from Douala and their mother have cleaned the Hospital Chapel as a way of appreciating the services being offered and also to service God. When they indicated their interest to clean, they were informed that there are housekeepers who do the cleaning but they insisted. Another couple from the

Southwest Region came and gave thanksgiving at Mbingo I CBC Church during a Sunday worship service. They testified that they would have lost their first baby were it not for the intervention of Mbingo Baptist Hospital. They were particularly thankful that upon arrival, an operation was immediately done before requesting payment of the bill which is a rare practice in other hospitals.

## 16. Baptist Hospital Mutengene (BHM)

The Workload of BHM has continued to increase and the staff worked hard serving a total of 106,894 outpatients and 4,532 inpatients. The hospital accomplished alot this year. The hospital received a donation of an Ethylene Oxide Autoclave from Specialist friends in Canada. A refurbished ultra sonographic machine was purchased to replace the broken one. A pioneer Assistant Administrator for Personnel in the person of Mr. Loke Samuel was appointed and he started work.

**Projects:** Work in progress in the second floor of the maternity block and the eye operation services will function from there at the beginning of 2014. The construction of the imaging department block is going on according to schedule. The annual Spiritual Emphasis and Medical Day of prayer activities took place in August. Participation in it was good. The Director of CBC Health Services purchased a brand new 4x4 WD Hilux vehicle for the hospital. The hospital TB nurse was recognized as the best TB nurse for the South West Region

The hospital was visited by Prof. Peter Hesseling, Dr. Paul Wharin and Mr. Morrison who attended the CBC childhood cancer symposium at the Health Services Complex Mutengene on the 29<sup>th</sup> November 2013. Sporting activities had the BHM and the HSC teams locking horns on World Aids Day.

Kumba Baptist Health Centre: This centre has registered one of the most dramatic advancements in most of their activities. Their Out Patients attendance has witnessed a steady increase since July 2013. Their antenatal clinics have continued to be busy such that as at September 30, 2013 they had registered 306 clients compared to 96 in the same period of last year. They received the award of excellence in the Meme Health District. Kumba now has maternity services and registers on the average twenty deliveries in the month. They have re-modeled their former laundry to provide beds for OPD infusions and short period admissions.

**Ekondo Titi Baptist Health Centre:** This center was started on March 4, 2013 in a renovated wooden structure given by Chief Esoh Itoh. A five room structure has been constructed and is used for ANC and maternity services. A small standby generator was bought to ensure service continuity when AES Sonel fails. The centre as at September 30, 2013 attended to 2,145 clients at the level of OPD, admitted 177.

**Bafia Baptist Health Centre:** The main building construction was completed and ready for use. A six room wooden apartment was built to accommodate staff.

#### 17. Baptist Hospital Banyo (BHB)

The staff worked hard in 2013 serving a total of 9,588 outpatients and 1,389 inpatients. The staff willingly contributed five percent of their one month salary to the support the construction of a new maternity. Some external friends supported this same project through Dr. James Smith. The new Mini-Maternity of nine beds was completed and this has improved service provision. This has increased the bed capacity of the hospital from 33 to 42 beds.

The electrification structure of the hospital has been under revision and major changes have been done by a volunteer missionary (IT/Electrician), Mr. Shiner Joshua. We are working with AES SONEL to get the hospital meter situated one kilometer away to the campus. One of our partners, Mr. Chad Nothington drilled two wells on campus, one will be foot pumped and another will use electric pump. He will install an electrical pump in one and the hospital/community has been given the responsibility to install a foot pump in the other.

The collaboration between Boston University in US and CBC Health Services caused some MPH students from this University to visit Banyo. Their activities on maternal health especially in the community have far reaching positive impacts on our services. We pray for the sustainability of this relationship. In a similar line, Nyamboya Health Center collaborates with MPH/FAIRMED in the management of BURULI Ulcer.

Allat Health Center's activities have slowed down due to consistent withdrawal of LAP activities. Allat can do better if LAP resumes their activities in Adamawa. They now have a Peace Corps working with them. This will enhance their link with the community.

#### 18. Mboppi Baptist Hospital Douala

The patient attendance keeps increasing. The Hospital attends to an average of 750 patients per day and busy days such as Mondays have registered up to 880 patients. This high workload is handled because many staff have been sent to the hospital. At moment there are 14 Doctors of whom 6 are specialist in OB/GYN, Ophthalmology, Internal Medicines, Surgery and Pediatrics. The hospital was blessed with many donations:

Mr. Marnie Richards from Australia donated Ultrasound, Vital sign patient monitor, SPO2 Pulse Oximeters and Foetal dopplers. Dr. Keith Streatfield Anesthetist trainer at Mbingo Baptist Hospital greatly facilitated this donation. The Societe Geochim, a medical business company based in Douala donated a new automated Hematology machine and reagents. Dr. Palmer donated assorted medical text books to Mboppi library. The Presbyterian Craft Centre constructed an incinerator for the hospital at half its cost.

Construction work is completed on the main block and the theatre for general surgery was set up on the 2<sup>nd</sup> floor of the building. The physiotherapy services were relocated at the former dental department to the 3<sup>rd</sup> floor of the Hospital Building.

One of our auxiliary staff by name Mrs. Asiatu Samou Musa from Nso rested in the Lord on June 10, 2013.

#### 19. Etoug-Ebe Baptist Health Center

The center continues to be very busy. This year a total of 107,075 outpatients were served while supervising Ekounou and Voundou Baptist Health Centers. To accommodate this increasing workload, the staff strength was increased from 98 to 117.

The center was visited by the Global AIDS Coordinator from the United States Government and the MCH Global Chair International Committee on MCH. A team from the Regional Delegation of health for supervision on notifiable diseases and inspection for the care and treatment centre also visited. Another team sponsored by USAID collaborating with the CBC Health Services in Family Planning and HIV visited the centre to have an overview of the Family Planning Services. The Christian Women's Fellowship (CWF) of the Presbyterian Church visited the centre to pray and share the word of God with our clients. The visit of the Yaounde Field Pastor was also very encouraging to the staff.

The center was able to install intercom, acquire a complete dental chair, a trial lens, air conditioner and computer for the drugs store and secretariat.

The activities of the chaplaincy department were very enriching. These included a family enrichment seminar, young women seminar, retiring happily and also tips on hospital counseling. The chaplain also organized an Easter retreat and a staff retreat. The chaplain and the spiritual life committee visited the sick, the bereaved, the newly married couples and staff families who were blessed with new babies.

**Ekounou Baptist Health Centre:** The doctors continue to take turns in consultation at Ekounou on weekly bases while waiting for a permanent doctor. The center bought a cash machine, a Generator, trial lens, and completed payment for the land.

**Voundou Baptist Health Centre:** The patients' attendance increase with the institution of shifts i.e: 7- 2pm and 2-9pm daily with 24/24 hours call to help meet the needs of the clients. The center now has a functional generator.

# B. HEALTH INFORMATION MANAGEMENT SYSTEMS (HMIS)

In 2013, all the six hospitals and twenty seven health centers of CBCHS reported although not all reports were submitted on time. Compared to 2012, both in and outpatients' service uptake increased in 2013. The tables, figures and charts below summarize the key performances of 2013 compared to 2012.

Table 1: Summary of performance of CBCHB institutions in 2013

INDICATOR/DEPARTMENT	ВВН	МВН	ВНМ	MBHD	ВНВ	DBH	SUPERVISED IHCs	Total
Bed Capacity	239	292	87	81	33	40	549	1,321
Staff Strength	477	570	249	252	45	16	1,055	2,664
OPD attendance	93,147	82,290	106,894	240,029	9,588	4,367	409,185	945,500
Inpatient Attendance	8,116	10,024	4,532	4,729	1,389	865	17,617	47,272
Deliveries	2,018	929	913	2,870	175	122	3,849	10,876
Major Surgeries	1,626	4,059	1,143	800	214	33	-	7,875
Minor Surgeries	5,101	2,038	1,690	2,601	431	189	19,734	31,784
Deaths	543	584	139	7	32	5	150	1,460
Patients served by Pharmacy	50,243	88,840	63,492	159,208	9,230	3,886	305,127	680,026
Patients served by Laboratory	46,121	55,267	42,682	62,747	7,368	2,194	179,597	395,976
Patients served by Doctors	23,641	37,755	26,985	44,148	2,637	706	20,010	155,882
Patients served by Screeners	24,969	43,727	77,217	182,267	7,392	16,311	233,809	585,692
Eye Department	11,242	14,440	11,579	24,559	502	47	38,938	101,307
Chaplaincy	5,744	3,598	2,730	1,474	536	556	10,426	25,064
Social Worker	3,448	1,843	3,166	3,393	-	-	1,757	13,607
Dental Department	4,782	2,163	4,182	5,671	-	-	23,388	40,186
Ultrasound Department	6,986	11,303	5,210	8,841	1,383	-	3,091	36,814
Physiotherapy Department	5,755	9,925	2,340	9,426	-	-	9,579	37,025
X - Ray Department	4,888	11,437	2,771	-	1,190	-	-	20,286

Table 2.1 – Bed Distribution by Hospitals and Health Centers

Hospital	Medical	Maternity	Pediatric	Surgical	Total	%
BBH	105	39	51	44	239	18.1
MBH	181	22	26	61	290	22
BHM	46	21	10	10	87	6.6
MBHD	14	59	4	4	81	6.1
BHB	16	3	7	7	33	2.5
DBH	23	17	0	0	40	3
Other Institutions	269	205	77	0	551	41.7
Total	654	366	175	126	1321	100

There were a total of 1,321 beds in CBCHS institutions at the end of 2013.

Table 2.2 Number of Beds distributed by ward, comparing 2012 and 2013

S/N	WARD	2012	2013	% CHANGE
1	Medical	650	654	0.6
2	Maternity	336	366	8.9
3	Pediatric	163	175	7.4
4	Surgical	124	126	1.6
	TOTAL	1273	1321	3.8

The number of beds in CBCHS institutions increased by 3.8% in 2013. Most of this increase came through BHM and MBHD. This increase is due to expansion following completion of infrastructure construction that has more wards. Also, Mbingo Baptist Hospital started using a twenty bed isolation ward whose construction was completed this year.

Table 3.1 Staff strength by institution and cadre

SN	GRADE	DHS CENTRAL	HSC	LAP	PTSHP	BBH	MBH	ВНМ	MBHD	внв	DBH	OTHERS	TOTAL
1	Doctors	0	0	0	0	12	32	8	8	0	0	8	68
2	Nurses	1	0	12	5	142	160	79	71	11	6	188	675
3	Auxillary	1	2	0	0	84	62	35	32	5	2	140	363
4	Paramedical	4	4	1	1	50	64	36	41	9	2	120	332
5	Administrators	3	1	1	0	3	3	2	2	1	0	3	19
6	Admin Staff	35	9	3	1	8	9	4	3	1	0	11	84
7	Chaplains	5	1	1	0	11	7	7	4	1	1	12	50
8	Others	72	54	21	2	167	255	78	91	17	5	333	1095
,	TOTAL	121	71	39	9	477	592	249	252	45	16	815	2,686

Table 3.2 staff strength by cadre comparing 2012 and 2013

S/N	CADRE	2012	2013	% CHANGE
1	Doctors	63	68	7.9
2	Nurses	524	675	28.8
3	Auxiliary	487	363	-25.5
4	Paramedical	420	332	-21
5	Administrators	19	19	0
6	Administrative staff	286	84	-70.6
7	Chaplains	42	50	19
8	Others	625	1095	75.2
	TOTAL	2,466	2,686	8.9

Overall staff strength increased by 8.9% in 2012. The changes in staff of various categories resulted from staff returning from or going to school, recruitment, etc. The decrease in administrative staff and increase in others is as a result of a change in the approach of reporting.

Table 3.3 Distribution of Nurses by Institution and Level of training

INSTITUTION	ВВН	МВН	ВНМ	MBEM	MBHD	внв	Supervised IHCs	TOTAL
NP/BSN/RSN	29	25	17	1	21	3	1	97
Brevete/APNA	46	42	18	2	15	2	39	164
Nurse Assistant/ Nursing Auxiliary	52	53	37	3	22	7	168	342
Nurse Midwife/ Midwife	9	13	13	1	12	4	20	72
TOTAL	136	133	85	7	70	16	228	675

**Table 4.1: Outpatient Attendance** 

SN	INSTITUTION	2012	2013	% CHANGE
1	BBH	92,448	93,147	8.0
2	MBH	80,172	82,290	2.6
3	ВНМ	95,270	106,894	12.2
4	MBHD	213,876	240,029	12.2
5	ВНВ	10,038	9,588	-4.5
6	DBH	4,052	4,367	7.8
7	Other Institutions (IHCs)	385,235	409,185	6.2
	TOTAL	881,091	945,500	7.3

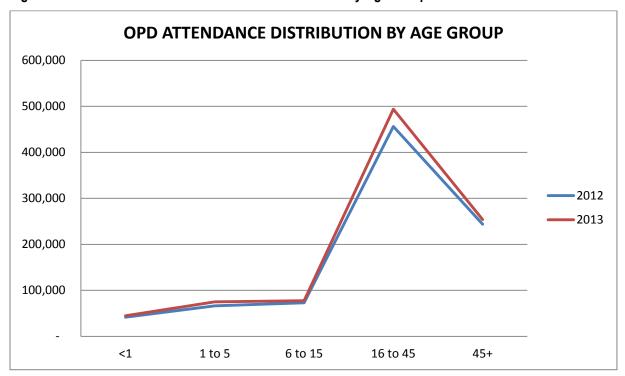
There was a general increase of 7.3% in the outpatient consultations in 2013. But for BHB, the outpatient consultations of all CBHS institutions increased in 2013.

Table 4.2 – Outpatient distribution by gender

SN	GENDER	2012	2013	% CHANGE
1	Male	338,974	368,715	8.8
2	Female	542,117	576,785	6.4
	TOTAL	881,091	945,500	7.3

Compared to 2012, although there outpatient consultations by men increased more than those by females in 2013, more females received outpatient services in 2013.

Figure 1: Distribution of OPD Attendance of 2012 and 2013 by Age Group



The proportion of patients younger than 15 that were served in 2012 was similar to that of 2013 while slightly more patients in the older age group were served in 2013.

Table 5.1: Five Health centers with Highest OPD Attendance in 2012 and 2013

SN	2012		201	3
	Health Center	Attendance	Health Center	Attendance
1	ETOUG-EBE	110,572	ETOUG-EBE	107,075
2	NKWEN	76,301	NKWEN	83,665
3	KUMBA	32,436	KUMBA	39,399
4	EKOUNOU	28,694	BAFOUSSAM	33,164
5	BAFOUSSAM	28,233	EKOUNOU	28,762

The same health centers continue to be in the list of centers with highest OPD attendance. But for Bafoussam Baptist Health Center that displaced Ekounou Baptist Health Center from its fourth position in 2012 to the fifth position in 2013, the rest of the centers maintained their position of 2012 in 2013.

Table 5.2 Five Health Centers with lowest OPD attendance in 2012 and 2013

SN	2012		201	3
	Health Center	Attendance	Health Center	Attendance
1	LASSIN	1,918	NDEBAYA	1,856
2	NDEBAYA	2,089	KOUSSAM	1,983
3	ROMKONG	2,281	ROMKONG	1,927
4	BAYANGAM	2,362	NWAT	2,092
5	NGEPTANG	2,647	AKEH	2,237

Lassin, Bayangam and Ngeptang Baptist Health Centers dropped out of the list of five health centers with lowest OPD attendance to give way for Koussam, Nwat and Akeh Baptist Health Centers. The OPD attendance figures of centers in the list of centers with lowest OPD attendance of 2013 were generally lower than those of 2012.

Table 6.1 – Admissions by institutions and by wards

HOSPITAL	MATERNITY	PEDIATRIC	SURGICAL	MEDICAL	TOTAL	%
ВВН	1499	1512	1524	3581	8116	17.2
MBH	988	919	3293	4824	10024	21.2
ВНМ	1070	975	1051	1436	4532	9.6
MBHD	2870	735	532	592	4729	10.0
ВНВ	174	336	138	741	1389	2.9
DBH	143	261	0	461	865	1.8
Other Institutions (IHCs)	4131	4172	108	9206	17617	37.3
TOTAL	10875	8910	6646	20841	47,272	100.0

Table 6.2 Admissions of 2013 compared to 2012

SN	UNIT	2012	2013	% CHANGE
1	Maternity	10,265	10,875	5.9
2	Pediatric	7,326	8,910	21.6
3	Surgical	5,212	6,646	27.5
4	Medical	18,364	20,841	13.5
	Total	41,167	47,272	14.8

There was a 14.8% increase in the number of inpatients served in 2013. This increase is consistent with the 8.9% increase in outpatient attendance.

Table 6.3 Bed occupancy rate of 2013 compared to 2012

SN	INDICATOR	2012	2013	% CHANGE
1	Number of beds	1,268	1,321	4.2
2	Number of hospital days	187,193	204,892	9.5
3	Average length of stay	4.5	4.3	(0.17)
4	Bed occupancy rate	40.4	42.5	2.10
5	Mortality rate	3.5	3.1	(0.41)

In 2013, the overall bed occupancy rate of CBCHS institutions increased by 2.1%.

Table 6.3 Bed occupancy rate by Institution

SN	INDICATOR	ВВН	MBH	ВНМ	MBHD	ВНВ	DBH	Supervised IHCs	Total
1	Number of beds	239	292	87	81	33	40	549	1,321
2	Number of admissions	8,116	10,024	4,532	4,729	1,389	865	17,617	47,272
3	Number of hospital days	58831	67284	23768	23768	6335	3455	21,451	204,892
4	Average length of stay	7.2	6.7	5.2	5.0	4.6	4.0	1	4.3
5	Bed occupancy rate	67.4	63.1	74.8	80.4	52.6	23.7	10.7	42.5
6	Deaths	543	584	139	7	32	5	150	1460
7	Mortality rate	6.7	5.8	3.1	0.1	2.3	0.6	0.9	3.1

Table 7 – Patients flow per department for 2013 compared to 2012

SN	DEPARTMENTS	2012	2013	% CHANGE
1	Eye	94,221	101,307	7.5
2	X-Ray	17,770	20,286	14.2
3	Physiotherapy	28,875	37,025	28.2
4	Ultra-Sound	32,722	36,814	12.5
5	Dental	39,639	40,186	1.4
6	Laboratory	336,985	395,976	17.5
7	Pharmacy	636,114	680,026	6.9
8	Chaplaincy	35,829	25,064	-30
9	Social workers	7,100	13,607	91.6
10	Patients served by doctors	133,156	155,882	17.1
11	Patients served by screeners	571,666	585,692	2.5

Other than the chaplaincy, the work load of all departments increased in 2013. The decrease in the work load of the chaplaincy is due to the separation of the social services work load from it.

Table 8: Departmental Patient Flow distributed by Hospitals and IHCs

	1							
DEPARTMENT	ввн	MBH	ВНМ	MBHD	DBH	ВНВ	IHCs	TOTAL
Eye	11,242	14,440	11,579	24,559	47	502	38,938	101,307
X-ray	4,888	11,437	2,771	-	-	1,190	-	20,286
Physiotherapy	5,755	9,925	2,340	9,426	-	-	9,579	37,025
Ultra-sound	6,986	11,303	5,210	8,841	-	1,383	3,091	36,814
Dental	4,782	2,163	4,182	5,671	-	-	23,388	40,186
Laboratory	46,121	55,267	42,682	62,747	2,194	7,368	179,597	395,976
Pharmacy	50,243	88,840	63,492	159,208	3,886	9,230	305,127	680,026
Chaplaincy	5,744	3,598	2,730	1,474	556	536	10,426	25,064
social workers	3,448	1,843	3,166	3,393	-	1	1,757	13,607
Patients seen by doctors	23,641	37,755	26,985	44,148	706	2,637	20,010	155,882
Patients seen by screeners	24,969	43,727	77,217	182,267	16,311	7,392	233,809	585,692

Table 9.1: Mother and Child Health (MCH) FOR 2013 COMPARED TO 2012

ACTIVITY	2012	2013	% CHANGE
Antenatal Clinic	73,463	79,214	7.8
Family Planning	6,785	9,989	47.2
Infant Welfare Clinic	50,560	53,581	6
Preschool Clinic	9,102	5,506	-39.5
Total	139,910	148,290	6

Table 9.2: Deliveries for 2013 compared to 2012

DELIVERIES	2012	2013	% CHANGE
Total delivery	9,633	10,876	12.9
Live birth	9,382	10,156	8.2
Pre-term	198	403	103.5
NEOD	39	45	15.4
BBA	83	67	-19.3
SB	213	235	10.3
AB	145	148	2.1

Deliveries increased by 12.9 in 2013. But for births before arrival, the other undesired events increased in 2013.

Table 10: Immunization for 2013 compared with 2012

SN	VACCINE	2012	2013	% CHANGE
1	MENINGITIS	3,679	931	-74.7
2	BCG	10,230	10,535	3
3	DPT	25,759	26,267	2
4	POLIO	36,500	36,627	0.3
5	TITANUS	19,654	22,019	12
6	MEASLES	6,821	7,327	7.4
7	OTHERS	14,374	13,639	-5.1

Fig 2: Immunization of 2013 compared to 2012

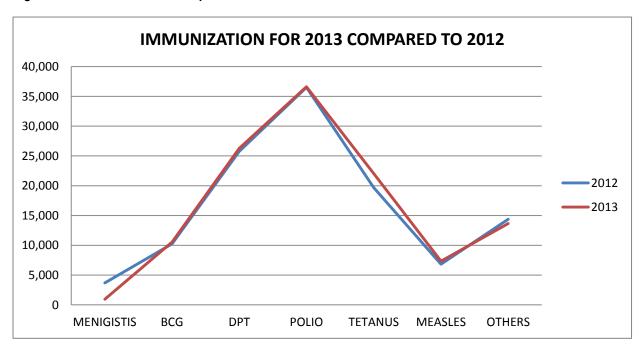


Table 11: Surgeries by Institution

	Surger	Total	
Institution	Minor	Major	Total
BBH	5,101	1,626	6727
MBH	2,038	4,059	6097
ВНМ	1,690	1,143	2833
MBHD	2,601	800	3401
ВНВ	431	214	645
DBH	189	33	222
Other Institutions	19,734	-	19734
TOTAL	31,784	7,875	39,659

More than half of the major surgeries conducted at CBCHS institutions are done are MBH due to the presences of the PAACS program.

**Table 12: Notifiable Diseases** 

DISEASES	2012	2013	% CHANGE
Neonatal tetanus	7	4	-42.9
Leprosy	17	5	-70.6
Yellow fever	11	5	-54.5
Cerebrospinal meningitis	184	310	68.5
Human rabies	8	16	100
tuberculosis	1136	1374	21
Cholera	1	0	-100
Typhoid fever	767	725	-5.5
Poliomyelitis	0	0	-
Measles	457	46	-89.9

**Table 13: HIV Prevalence** 

	2012		201	% Change	
Type of Clients	# Screened	% HIV+	# Screened	%HIV+	% Change
Blood donors	3907	2.4	5059	2.3	-0.1
PMTCT Clients	131,640	5.2	121826	4.1	-1.1
Patients	41511	15.2	45672	13.2	-2.0

More blood donors and hospital patients were tested in 2013 while the number of PMTCT clients dropped. This is due to the fact that CBCHS stopped supporting PMTCT services in the Littoral region in the last quarter of 2013. The HIV prevalence decreased in all categories of clients tested.

Table 14: Deaths

Wards	2012	2013	% Change
Pediatric	229	240	4.8
Surgical	102	124	21.6
Maternal	21	16	-23.8
Medical	1076	1080	0.4
TOTAL	1428	1460	2.2

Although there was an increase in the number of deaths in 2013, the number of maternal deaths decreased.

Table 15 – 10 Leading Diseases for 2012 and 2013

	2012		2013	
SN	DISEASE	CASES	DISEASE	CASES
1	Malaria	57,010	Malaria	47,491
2	Hypertension	32,249	Hypertension	29,563
3	Gastritis/PUD	13,832	Gastritis/PUD	18,707
4	URTI/LRTI	11,466	URTI/LRTI	15,809
5	GE/Diarrhea	11,053	MSKP	11,761
6	Ulcers/wounds	9,578	Cystitis/UTI	10,767
7	Conjuctivities	8,771	Diabetes Mellitus	10,527
8	Tuberculosis	8,275	GE/Diarrhea	8,234
9	Diabetes Mellitus	7,207	Epilepsy	7,610
10	Cystitis/UTI	6,873	HIV and AIDS	6,678

Malaria, hypertension, gastritis, upper and lower respiratory track infections continue to top the list of the leading diseases. Ulcers/wounds, conjunctivitis and tuberculosis were displaced from the list of leading diseases in 2013 by MSKP, Epilepsy and HIV and AIDS

Table 16 - 10 leading causes of death

	2012		2013	
SN	DISEASE	CASES	DISEASE	CASES
1	AIDS	211	AIDS	263
2	Pneumonia	83	Congestive Heart Failure (CHF)	108
3	Congestive Heart Failure (CHF)	62	Meningitis	102
4	Meningitis	57	Cancers/ Tumors	82
5	Septicaemia	50	Septicaemia sepsis	75
6	Malaria	48	Pneumonia	69
7	Splenomegaly	43	Tuberculosis	55
8	Tuberculosis	35	Malaria	40
9	Anaemias	30	Hepatitis/Cirrhosis	40
10	Cancers/ Tumors	29	Hypertension	35

AIDS maintained the top position as the leading cause of death. Splenomegaly and anaemia dropped out of the 2012 list of ten leading killer diseases in favour of hypertension and hepatitis/cirrhosis.

Table 17 – HIV Care and Treatment Program Work load

SN	SITE	2013 GENERAL ENROLMENT	2013 ART INITIATION	CUMULATIVE ON ART	CURRENT ON ART
1	BBH	709	603	5,310	3,622
2	MBH	321	243	1,801	1094
3	ВНМ	755	532	3,617	3,023
4	NKWEN	435	395	5,329	4,308
5	MBOPPI	913	563	4,633	3,436
	TOTAL	3,133	2,336	20,690	15,483

There were 15,483 clients on ART at the end of 2013. Of the 20,690 clients ever initiated on ART in the five CBCHS care and treatment centres, others transferred out, some died while others were stopped.

Table 19: Evolution of CBCHB PMTCT Activities

Indicator / Year	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	TOTAL
Number of sites	5	9	58	89	115	180	250	374	391	427	403	453	742	772	772
Total # of women counseled	1,469	4,049	12,624	22,043	30,822	47,571	62,154	79,388	94,505	100,055	103,388	101,960	132,070	125,363	792,098
Total # of women tested	1,391	3,849	11,536	20,537	27,641	42,125	58,031	76,132	91,270	97,643	100,555	101,960	131,640	125,406	764,310
Total # of women who return for results	1,343	3,841	11,422	20,229	27,063	40,344	57,312	75,015	89,531	97,137	99,970	99,651	129,956	124,389	752,814
Total # of women Positive	146	384	1,100	1,613	2,530	3,594	4,962	5,838	6,118	5,755	5,578	5,563	6,871	5,900	50,052
Total # of women treated	55	143	456	531	1,004	2,577	3,903	5,356	4,969	5,349	8,530	8,172	6,656	4,837	47,701
Total # of infants treated	55	145	434	548	913	1,411	2,203	2,551	3,124	3,554	3,912	3,728	5,297	4,898	27,875
% return for results	96.5	99.8	99	98.5	97.9	95.8	98.8	98.5	99	99.5	99.4	97.7	98.7	99.2	98.5
% HIV positive	10.5	10	9.5	7.9	9.2	8.5	8.6	7.7	6.3	5.9	5.5	5.5	5.2	4.7	6.5
% of women treated	37.7	37.2	41.5	32.9	39.7	71.7	78.7	77.4	88	92.9	73.9	70.2	96.9	82.0	95.3
% of infants treated	37.7	37.8	39.5	34	36.1	39.3	44.4	43.7	54	61.8	70.1	67	77.1	83.0	55.7
% MTCT-PCR	-	-	-	-	17.8	-	-	-	-	-	13.3	14.6	11.6	6.7	14.325
% MTCT-Rapid Test	-	-	-	7	11.3	26.5	38.9	20.5	20.9	19.4	17.7	34.9	NA	NA	NA
% of partners HIV+	-	-	-	25	-	-	-	-	23.5	11.7	9.3	14	13.1	5.7	16.1

Cumulatively, the CBCHS supported PMTCT program counseled and tested 972,098 pregnant women through the active 772 sites in six regions. Most of these sites are in the Northwest and Southwest Region that is receiving significant support from CDC/PEPFAR for PMTCT implementation in these regions. The Littoral and Central Regions started receiving CDC/PEPFAR funding in 2013 under a different provider of services and CBCHS discontinued supporting services there in the last quarter of 2013. All EGPAF funding is directed to the West and Adamawa regions.

**Table 20: CBCHS Tuberculosis Control Program activities** 

Indicators	2012	2013	% CHANGE
Total # of TB patients	1,189	1,282	7.8
Number screened for AFB	6,593	6,858	4
Number of pulmonary TB	975	1,001	2.7
Number of Smear Positive	847	868	2.5
Number of Smear Negative	125	134	7.2
Number of Extra Pulmonary TB	215	281	30.7
Number tested For HIV	1,183	1,267	7.1
Acceptance rate	100	99	-0.7
Number tested HIV+	563	589	4.6
% of Co-infection	48	47	-2.3

There was an increase in number of clients screened for TB in 2013. Ninety-nine percent of TB cases identified consented to test for HIV. There was a 2.3% decrease in TB/HIV co-infection.

**Table 21: Evolution of Activities of Extended Forum of Care** 

Indicator/Year	2007	2008	2009	2010	2011	2012	2013	Total	%
Index Persons	227	1610	2174	2587	2061	2409	2439	13507	
Contact Persons	278	1701	2384	2812	2476	3041	2710	15402	
Contact Persons Notified	167	1309	1742	2184	1416	1627	1336	9781	64
Contact Persons Tested	110	1004	1477	1681	808	1139	863	7082	72
Contact Persons With HIV positive Results	55	557	688	969	446	588	470	3773	53
C Ps Linked to Care and Treatment	0	37	90	633	302	587	473	2122	56

Table 22: Statistics of Burkitt Lymphoma/Childhood Cancer Service (POND Registry Statistics November 2012 – October 2013)

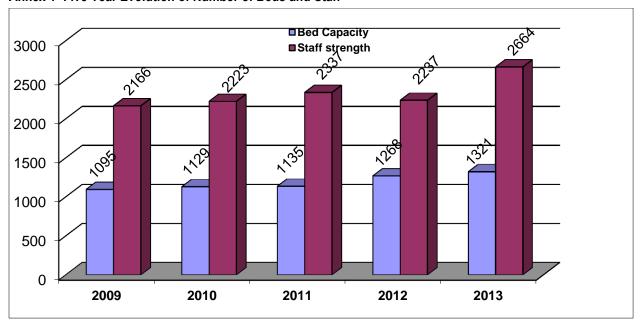
Diagnosis	BBH	MBH	ВНМ	TOTAL
Burkitt lymphoma	21	36	17	74
Wilms tumour		9	2	11
Retinoblastoma		12	2	14
Kaposi sarcoma	1		1	2
Non Hodgkin lymphoma (other)		3		3
Acute lymphoblastic leukaemia		3		3
Leukaemia (unspecified)		1		1
Rhabdomyosarcoma		3		3
Total	22	67	22	111

The numbers in table 22 do not accurately reflect the work load of each hospital, because patients are often sent back to closest CBC hospital after POND registration, for chemotherapy and follow-up.

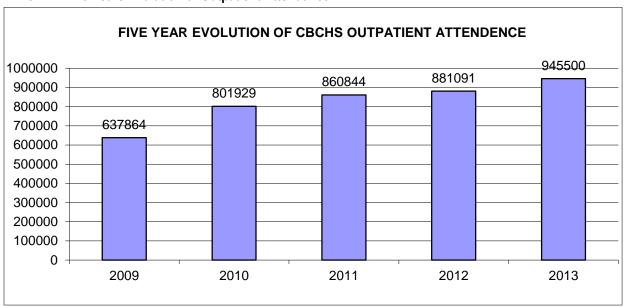
All surgical and orthopaedic children with cancer have not been yet registered in POND. Brain tumour which requires a CT or MRI scan to enable the diagnosis to be made is not included.

### ANNEX – FIVE YEARS EVOLUTION OF CBCHS KEY ACTIVITIES

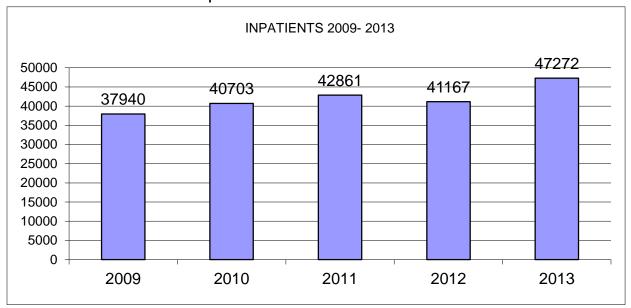
Annex 1- Five Year Evolution of Number of Beds and Staff



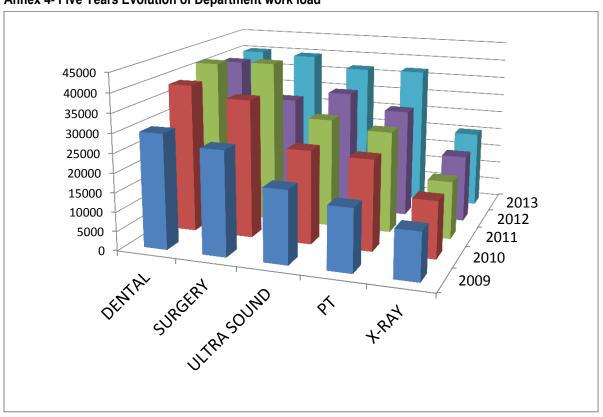
Annex 2 – Five Years Evolution of Outpatient Attendance



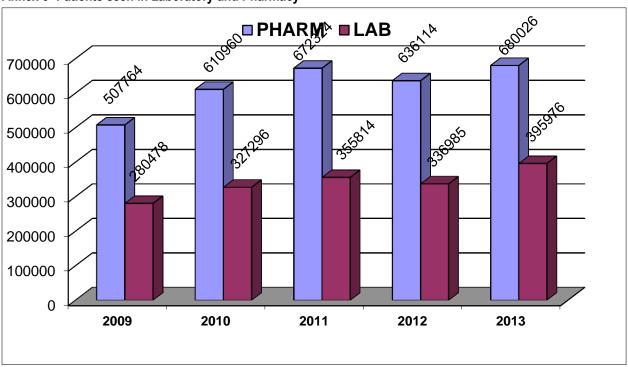
Annex 3- Five Years Evolution of Inpatients Attendance



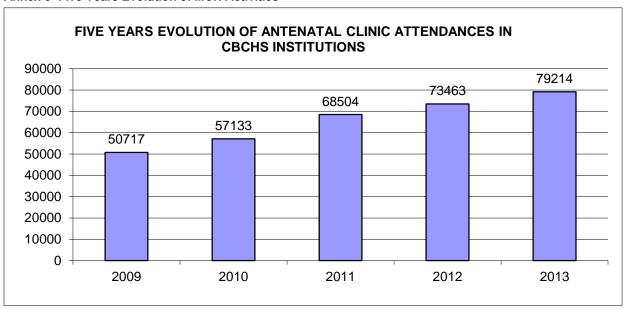
Annex 4- Five Years Evolution of Department work load



Annex 5- Patients seen in Laboratory and Pharmacy



**Annex 6- Five Years Evolution of MCH Activities** 



#### Conclusion

We are thankful to God for the successes we recorded. The doors of all health facilities remained open to all patients throughout the year. All our staff worked happily delivering quality care to all with compassion. We enjoy the support of many national and international partners without which we could not have achieved all these results. We are very grateful. The Board is thankful to all the staff of CBCHS for their commitment to its mission statement as evident in the successes recorded.

Appendix 1- Bed Capacity and Personnel

IDENT	IFICAT	ION			В	ED C	APAC	ITY											PE	RSO	NNEL								
SERIAL # INSTITUTION / MONTH		REGION	# OF MONTHS	GENERAL	MATERNITY	PEDIATRIC	SURGICAL	TOTAL	v ac	2	TD AINED NIID SES		> avi iixiiv		TRAINED PARA MED		OGCTACTOINIMO		ADM STAFE		CHAPI AINS		OTHER SUPPORT	STAFF		10000	TOTAL MALES	TOTAL FEMALES	GRAND TOTAL
1 ALLAT	AD	)	12	9	3	3	-	16	-	-	3	2	2	-	-	-	-	-	1	1	-	-	4	1	-	-	13	29	29
2 BANYO	AD	)	12	16	3	7	7	33	1	-	7	8	4	7	4	1	1	-	3	4	1	-	11	3	4	2	33	22	55
3 BANGOLA	N NV	N	12	44	47	-	-	82	-	-	5	13	6	6	-	-	-	-	4	2	2	-	9	3	1	1	26	21	47
4 BBH	NV	N	12	105	39	51	44	239	8	5	41	95	35	85	38	32	3	1	5	6	4	8	118	57	-	-	252	288	539
5 JIKIJEM	NV	N	12	14	18	6	-	38	-	-	3	5	2	3	3	2	-	-	1	-	1	-	7	1	-	-	15	9	22
6 KOUHOUA	AT WE	E	12	15	4	8	-	27	-	-	2	2	4	5	-	1	-	-	1	-	-	1	5	-	1	1	11	8	19
7 LASSIN	NV	N	12	11	8	-	-	19	-	-	2	2	3	4	2	1	-	-	2	2	-	-	3	1	2	1	11	7	15
8 MBEM	NV	N	12	23	17	-	-	40	-	-	2	3	2	23	3	-	-	-	1	-	1	-	8	6	4	-	18	26	43
9 NDU	NV	N	12	22	14	7	-	43	-	-	5	9	2	8	-	-	-	-	-	3	-	1	8	5	-	13	15	23	36
10 NGEPTAN	G NV	N	12	12	8	-	-	20	-	-	2	5	1	2	1	1	-	-	-	1	-	-	4	4	-	-	7	10	17
11 NGOUNSO	) WE	E	12	25	17	8	-	50	-	-	8	5	7	6	-	-	-	-	1	1	1	-	11	9	3	3	27	22	49
12 NYAMBOY	/A AD	)	12	17	6	6	-	29	-	1	2	3	4	6	3	1	-	-	-	1	-	-	3	1	1	1	11	9	18
13 ROMKONO	G NV	N	12	4	4	4	-	12	-	-	1	-	-	5	-	-	-	-	-	1	-	-	3	3	-	-	4	7	11
14 SARKI BAK	(A AD	)	12	12	6	7	-	18	-	-	3	1	1	3	-	-	-	-	1	-	-	-	3	2	3	3	8	8	16
15 NWAT	NV	N	5	15	12	-	-	27	12	8	3	2	4	3	2	2	-	-	2	1	-	-	3	-	3	2	25	15	40
16 KOUSSAM	1 WE	E	12	6	4	3	-	12	-	-	3	-	2	1	2	2	-	-	1	-	-	-	3	-	3	-	9	2	10
17 AKEH	NV	N	12	4	5	4	-	14	-	-	1	-	4	2	-	-	-	-	-	1	-	-	2	2	-	-	7	5	12
18 BAFOUSSA	AM WE	E	12	4	4	-	-	5	-	-	2	1	2	4	1	3	-	-	1	-	-	-	1	4	4	-	11	12	23
19 BELO	NV	N	12	12	29	14	-	56	-	-	3	6	-	2	5	1	-	-	-	1	-	-	-	-	-	-	8	10	18
20 FINKWI	NV	N	12	7	8	4	-	20	-	-	-	2	2	1	1	2	-	-	1	1	-	-	4	1	1	3	9	10	19
21 KWIGHE	NV	N	12	17	7	-	-	25	-	-	1	1	-	4	-	-	-	-	-	1	-	-	2	2	1	-	4	8	12
22 ASHONG	NV	N	12	12	6	-	-	19	-	-	2	3	3	4	-	-	-	-	1	1	-	1	-	-	3	1	8	10	18
23 MBH	NV	N	12	181	22	26	61	292	25	7	32	101	31	67	38	22	2	1	7	32	6	8	125	77	27	68	293	383	676
24 NKWEN	NV	N	12	-	-	-	-	1	1	1	-	7	-	7	55	5	-	-	1	9	1	1	-	66	1	-	59	96	155
25 SABGA	NV	N	12	10	4	5	-	22	-	-	1	1	-	-	1	1	-	2	-	1	-	-	2	-	-	2	4	7	11
26 BAYANGA	M WE	E	12	7	3	-	-	11	-	-	1	-	-	2	2	-	-	-	1	-	-	-	2	3	-	-	6	5	11
27 NDEBAYA	SW	V	12	8	7	-	-	16	-	-	1	1	-	-	1	1	-	-	-	1	-	-	-	-	-	2	2	5	7
28 EKOUNOU	J CE		12	-	-	-	-	-	-	-	3	6	2	2	5	3	-	-	-	4	1	-	11	3	3	7	22	25	46
29 ETOUG-EB			12	-	-	-	-	-	-	5	4	16	7	7	6	13	1	-	2	7	-	2	17	10	1	2	37	60	97
30 KUMBA	SW	V	12	7	12	-	-	19	-	-	3	9	4	8	2	8	-	-	2	4	1	-	13	4	-	3	23	33	55
31 MBOPPI	LIT		12	14	59	4	4	81	6	3	35	36	8	11	20	18	1	1	11	12	1	4	18	17	79	-	179	101	280
32 VOUDOU	CE		12	3	3	-	-	6	-	-	1	1	2	-	2	-	-	-	1	1	-	-	3	3	-	-	7	5	11
33 MUTENGE			12	46	21	10	10	87	8	4	26	48	11	19	10	19	2	1	4	1	2	3	17	15	22	12	96	116	212
TOTAL			389	682	400	177	126	1,379	61	34	208	394	155	307	207	139	10	6	55	100	22	29	420	303	167	127	1,260	1,397	2,629

Appendix 2- Personnel

	IDENTIFIC	ATION							NURSES						
SERIAL#	INSTITUTION / MONTH	REGION	NP/BSN//RSN		Brevete/APNA		Nirco Accietant/Nircing Auviliary		Nirse Midwife/Midwife		Ward Auxiliary		TOTAL MALES	TOTAL FEMALES	GRAND TOTAL
	LLAT	AD	-	-	1	1	-	1	1	-	2	1	5	2	5
	ANYO	AD	3	-	1	1	2	5	2	2	2	5	8	12	20
	ANGOLAN	NW	-	-	4	4	4	8	-	2	6	6	14	20	34
4 B		NW	16	13	14	32	9	43	2	7	23	48	64	143	207
	KIJEM	NW	-	-	1	1	-	2	1	1	2	3	3	7	9
	OUHOUAT	WE	-	-	2	2	1	-	-	1	4	5	5	6	11
	ASSIN	NW	-	-	2	-	1	2	-	-	2	2	5	4	6
	1BEM	NW	1	-	1	1	1	2	1	-	5	2	7	5	10
9 N		NW	-	-	1	5	2	6	1	-	1	2	5	13	18
	GEPTANG	NW	-	-	1	-	-	3	-	-	1	3	2	5	7
	GOUNSO	WE	-	-	3	5	3	5	1	5	6	5	13	13	26
	YAMBOYA	AD	-	-	1	-	1	2	1	1	3	6	4	8	12
	OMKONG	NW	-	-	-	1	1	-	-	1	-	5	1	7	7
14 S	ARKI BAKA	AD	-	-	1	-	2	1	1	-	-	3	3	3	6
15 N	WAT	NW	-	-	1	1	2	1	-	1	4	3	7	6	13
16 K	OUSSAM	WE	1	-	1	-	1	-	-	-	1	-	3	-	3
17 A	KEH	NW	-	-	1	-	-	-	-	-	4	2	5	2	7
18 B	AFOUSSAM	WE	-	-	2	1	-	-	1	-	2	4	5	5	10
19 B	ELO	NW	-	-	1	-	-	-	-	1	2	5	3	6	9
20 F	INKWI	NW	-	-	1	-	-	1	-	1	1	1	2	3	5
21 K	WIGHE	NW	-	-	1	-	-	1	-	-	-	2	1	3	4
22 A	SHONG	NW	-	-	1	1	3	4	-	-	-	-	4	5	9
23 N	1BH	NW	6	19	12	30	11	42	3	10	31	67	63	168	231
24 N	KWEN	NW	1	1	-	5	-	3	-	4	-	7	1	20	21
25 S	ABGA	NW	-	-	1	-	-	-	-	1	-	-	1	1	2
26 B	AYANGAM	WE	-	-	1	-	-	-	-	-	-	2	1	2	3
27 N	DEBAYA	SW	-	-	1	-	-	1	-	-	-	-	1	1	2
28 E	KOUNOU	CE	-	-	1	1	-	5	-	1	2	1	3	8	11
29 E	TOUG-EBE	CE	3	7	-	2	-	5	1	2	-	4	4	20	24
30 K	UMBA	SW	-	-	2	3	1	5	-	2	1	3	4	10	14
31 N	1ВОРРІ	LIT	6	15	6	9	4	18	6	6	-	-	22	48	70
32 V	OUDOU	CE	-	-	1	-	-	1	-	-	-	-	1	1	2
33 N	IUTENGENE	SW	5	12	10	8	9	28	2	11	9	19	33	71	99
T	OTAL		42	67	77	114	58	195	24	60	114	216	303	628	917

Appendix 3 – Outpatients Attendance

IDENTIFICA	TION								ΔΤΤΙ	ENDANCE							
MOM			<1			1 to 5			6 to 15	LINDANCE		16 to 45			45+		
SERIAL# INSTITUTION/MONTH	REGION	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	G.Tot (M&F)
1 ALLAT	AD	76	62	138	162	189	351	110	144	254	465	1,061	1,526	172	158	330	2,599
2 BANYO	AD	162	119	281	359	257	616	328	362	690	1,895	3,803	5,698	1,334	969	2,303	9,588
3 BANGOLAN	NW	176	169	345	302	254	556	250	202	452	1,431	5,890	7,321	941	1,509	2,450	11,124
4 BBH	NW	1,084	1,007	2,091	2,121	1,624	3,745	3,074	2,931	6,005	17,360	33,899	51,259	14,167	15,880	30,047	93,147
5 JIKIJEM	NW	228	220	448	203	213	416	338	355	693	1,332	4,386	5,718	737	876	1,613	8,888
6 KOUHOUAT	WE	133	84	217	222	233	455	216	219	435	846	1,288	2,134	858	816	1,674	4,915
7 LASSIN	NW	152	101	253	165	171	336	244	146	390	371	1,008	1,379	255	384	639	3,057
8 MBEM	NW	118	126	244	208	196	404	199	165	364	513	1,016	1,529	857	1,271	2,128	4,367
9 NDU	NW	466	456	588	942	746	1,056	755	666	895	3,015	8,267	7,442	3,890	5,338	6,138	16,119
10 NGEPTANG	NW	76	70	146	113	108	221	132	140	272	340	1,306	1,646	371	524	895	3,180
11 NGOUNSO	WE	338	260	598	827	686	1,513	492	447	939	2,120	4,313	6,433	1,175	1,143	2,318	11,801
12 NYAMBOYA	AD	125	107	232	206	205	411	225	242	467	977	1,955	2,932	310	230	540	4,582
13 ROMKONG	NW	52	57	109	92	93	185	76	56	132	232	514	746	230	525	755	1,927
14 SARKI BAKA	AD	97	59	156	197	165	362	174	136	310	521	1,233	1,754	248	180	428	3,010
15 NWAT	NW	65	59	124	137	91	228	113	85	198	445	689	1,134	187	221	408	2,092
16 KOUSSAM	WE	50	33	83	96	86	182	70	85	155	239	689	928	286	349	635	1,983
17 AKEH	NW	47	59	106	124	140	264	110	135	245	273	714	987	254	381	635	2,237
18 BAFOUSSAM	1 WE	497	477	974	1,425	1,186	2,611	1,381	1,763	3,513	4,390	9,863	14,253	4,768	7,045	11,813	33,164
19 BELO	NW	201	215	416	368	257	703	360	527	887	946	1,354	2,241	1,476	1,832	3,308	7,555
20 FINKWI	NW	137	134	271	253	232	485	245	375	926	1,236	3,481	4,717	1,794	1,652	3,446	9,845
21 KWIGHE	NW	72	68	140	90	123	213	105	125	230	408	1,677	2,085	227	584	811	3,479
22 ASHONG	NW	107	125	232	240	248	488	321	341	662	1,054	1,800	2,854	712	1,175	1,887	6,123
23 MBH	NW	860	768	1,628	1,766	1,417	3,183	2,869	2,643	5,512	15,759	17,981	33,740	18,017	20,210	38,227	82,290
24 NKWEN	NW	2,437	2,835	5,272	4,531	5,634	10,165	7,673	6,097	13,770	14,471	20,710	35,181	8,825	10,452	19,277	83,665
25 SABGA	NW	81	80	161	139	133	272	119	212	331	576	1,268	1,844	354	1,075	1,429	4,037
26 BAYANGAM	WE	28	32	60	104	67	171	75	80	155	305	565	870	432	772	1,204	2,460
27 NDEBAYA	SW	66	38	101	174	132	306	58	80	138	382	635	997	175	206	381	1,856
28 EKOUNOU	CE	942	789	1,731	2,004	1,793	3,797	1,402	1,633	3,035	5,560	8,314	13,874	2,357	3,968	6,325	28,762
29 ETOUG-EBE	CE	2,952	2,611	5,610	4,985	4,602	9,587	3,918	5,044	8,962	21,055	43,403	64,458	7,767	10,691	18,458	107,075
30 KUMBA	SW	1,747	1,841	3,588	3,627	4,279	7,906	2,589	2,562	5,151	5,574	9,734	15,308	3,059	4,387	7,446	39,399
31 MBOPPI	LIT	6,766	7,521	14,287	8,426	8,394	16,820	5,807	7,346	13,153	37,240	100,698	137,938	21,907	35,924	57,831	240,029
32 VOUDOU	CE	238	218	456	458	409	867	147	160	307	875	1,841	2,716	119	117	236	4,582
33 MUTENGENE	SW	1,954	1,908	3,862	3,286	3,068	6,354	3,807	4,706	8,513	21,706	38,596	60,302	11,050	16,813	27,863	106,894
TOTAL		22,530	22,708	44,948	38,352	37,431	75,229	37,782	40,210	78,141	163,912	333,951	493,944	109,311	147,657	253,878	945,831

Appendix 4- Inpatients (Maternity and Pediatric Ward)

<b>골</b>											INI	PATIENT	Γ								
N						MATE	RNITY								PEDIA	TRIC					
<b>∑</b>														<1			1 to 5		6 to 15		
SERIAL # INSTITUTION / MONTH	REGION	7	7	6 to 15	16 to 45	45 +	Total maternity Admissions	HOSP. DAYS	AV. STAY	ADMISSIONS	HOSP. DAYS	AV. STAY	Male	Female	Total	Male	Female	Total	Male	Female	Total
1 ALLAT	AD	-	-	1	62	-	71	187	3	179	503	3	13	11	24	52	64	116	16	21	37
2 BANYO	AD	1	2	-	171	-	174	746	4	336	1,382	4	42	29	71	105	78	183	43	32	77
3 BANGOLAN	NW	-	-	2	380	92	521	1,062	2	93	-	-	-	-	-	-	-	-	-	-	-
4 BBH	NW	19	6	7	1,465	2	1,499	6,148	4	1,512	9,213	6	205	157	362	346	254	600	334	202	536
5 JIKIJEM	NW	1	-	-	423	-	424	1,642	4	210	733	4	31	47	78	55	44	97	17	16	33
6 KOUHOUAT	WE	-	-	10	112	-	125	386	3	429	1,643	4	50	40	90	134	105	239	38	60	98
7 LASSIN	NW	-	-	-	69	22	91	215	2	4	. 8	2	-	-	-	3	1	4	8	17	25
8 MBEM	NW	4	-	-	136	3	143	684	5	261	1,054	4	28	36	64	55	57	112	40	45	85
9 NDU	NW	-	-	-	474	-	296	1,192	4	324	708	2	35	40	75	131	113	160	50	62	84
10 NGEPTANG	NW	45	48	3	139	9	235	627	3	34	120	4	-	-	-	-	-	-	-	-	-
11 NGOUNSO	WE	-	-	13	623	-	636	1,509	2	1,569	3,819	2	155	130	285	525	410	935	165	180	345
12 NYAMBOYA	AD	1	1	5	162	27	196	294	2	484	1,306	3	50	36	86	147	140	287	53	57	110
13 ROMKONG	NW	-	-	6	88	-	94	213	2	61	114	2	7	7	14	17	18	36	7	4	10
14 SARKI BAKA	AD	-	-	-	171	-	171	345	2	199	497	3	16	9	25	72	39	111	40	23	63
15 NWAT	NW	-	-	2	59	-	61	251	4	-	-	-	-	-	-	-	-	-	-	-	-
16 KOUSSAM	WE	-	-	1	49	-	50	-	#	39	-	-	13	7	20	46	34	80	12	11	23
17 AKEH	NW	-	-	-	93	-	93	228	3	94	222	2	17	17	34	21	28	49	3	3	6
18 BAFOUSSAM	WE	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
19 BELO	NW	-	-	-	541	-	541	1,617	3	-	-	-	-	-	-	-	-	-	-	-	-
20 FINKWI	NW	-	-	-	104	-	104	271	3	129	320	3	17	7	24	31	32	63	23	19	42
21 KWIGHE	NW	-	-	-	89	-	89	246	3	-	-	-	-	-	-	-	-	-	-	-	-
22 ASHONG	NW	-	-	-	61	-	61	161	3	-	-	-	-	-	-	-	-	-	-	-	-
23 MBH	NW	-	-	-	988	-	988	4,718	5	919	4,595	5	115	115	230	207	151	358	198	133	331
24 NKWEN	NW	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
25 SABGA	NW	-	-	-	73	-	73	186	3	97	247	3	11	10	21	31	19	50	6	20	26
26 BAYANGAM	WE	-	-	-	14	-	17	55	3	-	-	-	-	-	-	-	-	-	-	-	-
27 NDEBAYA	SW	-	-	-	50	-	53	153	3	-	-	-	-	-	-	-	-	-	-	-	-
28 EKOUNOU	CE	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
29 ETOUG-EBE	CE	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
30 KUMBA	SW	-	-	-	162	-	162	312	2	182	352	2	31	16	47	46	42	88	19	11	30
31 MBOPPI	LIT	-	-	-	2,870	-	2,870	8,686	3	735	2,122	3	138	147	285	136	127	263	104	83	187
32 VOUDOU	CE	-	-	-	-	-	-	-	-	45	138	3	19	10	29	18	10	28	2	10	12
33 MUTENGENE	SW	-	-	-	1,092	-	1,070	5,026	5	975	3,766	4	145	129	274	228	191	419	146	132	278
TOTAL		71	57	50	10,720	155	10,908	37,160	83	8,910	32,862	66	1,138	1,000	2,138	2,406	1,957	4,278	1,324	1,141	2,438

# Appendix 5- Inpatients (Surgical and Medical Wards)

1 ALLAT A 2 BANYO A 3 BANGOLAN N 4 BBH N 5 JIKIJEM N	DA DA WW	SNOOISSIMOV - 138 - 1,524 26	90 H - 1,213 - 13,743	AV. STAY	<b>Majo</b> -	1> Lemale	Total	Male	Lemale Female	5		CALS 6 to 15 emale Leman		1	6 to 45			45+		z				<1			1 to 5	MEDI		; 6 to 15	5		16 to 45	;		45+		ATIENT
0	AD AD AD NW NW :	- 138 - L,524	- 1,213	AV. STA	-	٥			Female		0			1				45+		Z				-1			1 to 5	5	6	to 15	5		16 to 45	i		45+		쁜
1 ALLAT A 2 BANYO A 3 BANGOLAN N 4 BBH N 5 JIKIJEM N	AD AD AD NW NW :	- 138 - L,524	- 1,213	AV. STA	-			Male		Total	Male	amale	<u>-</u>		•					_				< I					-									
2 BANYO A 3 BANGOLAN N 4 BBH N 5 JIKIJEM N	AD NW NW :	138 - 1,524	1,213					-			_ =	ъ	Total	Male	Female	Total	Male	Female	Total	ADMISSION S	HOSP. DAYS	AV. STAY	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	TOTAL INPA
3 BANGOLAN N 4 BBH N 5 JIKIJEM N	NW NW :	- 1,524	-	9	1	-			-	-	-	-	-	-	-	-	-	-	-	172	483	3	-	-	-	-	-	-	1	3	3	37	84	121	19	39	58	398
4 BBH N 5 JIKIJEM N	NW :		13,743	-			1	9	5	14	14	12	26	45	26	71	21	6	27	741	3,630	5	-	-	-	-	-	-	-	-	-	164	314	490	117	98	212	1,389
5 JIKIJEM N	NW		13,743		-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1,005	1,962	2	67	48	113	103	102	205	56	64	120	108	276	384	60	115	175	1,527
		26		9	-	-	-	-	-	-	8	-	8	538	333	871	369	467	836	3,581	29,727	8	-	-	-	-	-	-	-	-	-	1,063	1,208	2,279	664	646	1,310	8,116
CKOULIOUAT	WE		75	3	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	295	1,077	4	-	-	-	-	-	-	-	-	-	115	147	262	36	39	75	955
		-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	439	1,701	4	-	-	-	-	-	-	-	2	2	90	194	284	69	74	143	993
	NW	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	277	623	2	11	9	20	39	33	72	20	30	50	27	74	101	17	34	51	372
	NW	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	461	1,717	4	-	-	-	-	-	-	-	-	-	96	106	203	125	135	260	865
	NW	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	661	2,119	3	-	-	-	-	-	-	-	-	-	139	204	336	100	184	284	1,218
	NW	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	463	1,083	2	34	12	46	54	49	103	44	36	80	40	103	143	35	50	85	732
	WE	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1,322	3,494	3	-	-	-	-	-	-	-	-	-	354	599	953	166	176	342	3,527
	AD	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	658	1,673	3	4	4	8	15	10	25	21	19	40	144	333	477	56	53	109	1,338
	NW	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	139	267	2	-	-	-	-	-	-	-	-	-	37	33	70	13	21	34	294
	AD	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	594	1,672	3	34	23	57	85	71	156	37	19	56	72	176	248	34	37	71	964
	NW	82	196	2	4	3	7	17	11	28	3	7	10	5	24	29	4	4	8	274	695	3	14	6	20	50	41	91	32	20	52	21	70	91	7	13	20	325
	WE	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	58	-	-	-	2	2	6	5	11	6	3	9	24	79	94	36	44	80	147
	NW	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	203	477	2	-	-	-	-	-	-	9	4	13	116	72	188	18	31	49	390
	WE	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	NW	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	824	4,120	5	35	28	63	109	86	195	49	62	111	150	210	360	47	84	131	1,365
	NW	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	323	841	3	-	- 44	-	-	-	- 40	- 42	-	-	41	177	229	25	63	91	556
	NW	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	316	1 057	3	12	11	20	20	21	40	13	20	33	58	108	166	9	47 62	56 86	405
	NW NW 3	3,293	19,827	- 6	62	- 58	120	170	109	279	185	191	376	613	652	1,265	740	547	1,287	380 4,824	1,057 38,144	8	12	13	25 12	46 23	49 34	95 57	30 96	21 93	51 189	1,128	96 1,184	164 2,312	1,213	1,041	2,254	10.024
	NW :	5,293	19,827	Ü	02	- 58	120	1/0	109	- 2/9	100	191	3/0	013	- 052	1,205	- 140	- 547	1,287	4,024	38,144	- 8	0	0	12	23	34	5/	90	33	109	1,128	1,104	2,312	1,213	1,041	2,254	10,024
	NW	-	-	-	-	-	-	1	-	-	i -	-	-	-	-	-	-		-	284	702	3	1		-	1	1	2	- 8	- 4	12	85	96	181	23	43	- 66	454
	WE		-	-	_	-	-		-	1		_		-		-	-		-	148	479	3	-	1	1	9	8	17	7	10	17	21	32	53	21	39	60	165
	SW	-		_		-			-					-		-				86	295	3	7	5	12	17	9	26	1	6	7	15	17	32	6	3	9	139
	CE		-	-		-	-		-		-	-		-		-	-			- 00	- 253	-	- '	-	- 12	-	-	-	- 1	-	- '	- 13	- 1/	-	-	-	-	- 133
29 ETOUG-EBE C	-		-	-		-	-	-	-		-	-	-	-		-	-		-	_	_	-		-	-	-	-	-	-	-	-	-		-				_
	SW		-	_	_	-	-	-	-	-	-	-	_		_	-	_	_	-	250	426	2		12	30	26	30	56	10	13	23	29	96	125	6	10	16	594
	LIT	532	2,120	4	-	-	-	-	-	-	10	7	17	89	252	341	80	127	218	592	1,511	3	-	-	-	-	-	-	4	2	6	130	259	389	84	127	172	4,729
32 VOUDOU C		-	-,	-	-	-	-	-	-	-	-	- 1	-	-	-	-	-	-	-	35	70	2	-	-	-	-	-	-	- '		-	10	22	32	1	2	3	80
33 MUTENGENE ST		L,051	5,734	6	4	2	6	21	18	39	51	38	89	254	269	523	226	175	401	1,436	9,242	6	-	-	-	-	-	-	-	-	-	403	618	1,021	245	209	454	4,532
TOTAL		5,646	42,908	39	71			217				255	_	1,544		3,100	1,440	1,326	2,777	20,841	110,095	94	251	180	429	603	549	1,151	444	431	874	4,785		,.		3,519	-	47,034

Appendix 6 – Departments and Referral

II	DENTIFICAT	TION				DEPART	TMENTS												REFER	RALS				
															REFERA	LS					COUNTE	R REFER	RALS	
SERIAL#	INSTITUTION / MONTH	REGION	EYE	X - RAY	F G	UTRA - SOUND	DENTAL	LABORATORY	PHARMACY	CHAPLAINCY	PATIENT SEEN BY DRS	PATIENT SEEN BY SCREENER	SOCIAL WORKER	CERVICAL CANCER SCREENING	ANTENATALS	LABOUR	NEONATES	INPTS	OUTPTS	ANTENATALS	LABOUR	NEONATES	INPTS	OUTPTS
1	ALLAT	AD	-	-	-	-	-	1,613	1,970	-	-	1,820	-	-	1	-	1	16	9	-	-	-	-	-
2	BANYO	AD	502	1,190	-	1,383	-	7,368	9,230	536	2,637	7,392	-	-	-	2	-	28	24	-	-	-	4	-
3	BANGOLAN	NW	68	-	-	-	-	7,483	9,053	1,692	478	11,544	-	-	80	13	-	42	69	-	-	-	-	-
4 1	ВВН	NW	11,242	4,888	5,755	6,986	4,782	46,121	50,243	5,744	23,641	24,969	3,448	1,419	-	-	-	-	-	-	-	-	-	-
5.	JIKIJEM	NW	801	-	-	-	-	3,559	5,825	619	458	7,820	-	185	30	43	6	32	53	-	-	-	-	-
6 1	KOUHOUAT	WE	35	-	-	-	-	3,298	5,008	196	142	3,067	-	-	6	6	-	23	50	2	-	-	5	4
7 1	LASSIN	NW	86	-	-	-	-	1,536	2,251	83	276	2,531	-	-	1	8	1	17	18	1	-	-	1	1
8 1	MBEM	NW	47	-	-	-	-	2,194	3,886	556	706	16,311	-	206	1	3	-	9	2	-	-	-	-	-
9 1	NDU	NW	1,291	-	-	-	-	5,722	10,968	573	347	9,822	-	-	15	10	-	74	196	-	-	-	-	-
10	NGEPTANG	NW	-	-	-	-	-	1,834	2,852	-	83	1,716	-	17	3	7	-	24	14	-	1	-	3	-
11	NGOUNSO	WE	-	-	-	-	-	9,999	10,875	870	-	12,144	-	-	5	16	3	65	3	-	2	-	1	1
12	NYAMBOYA	AD	-	-	-	-	-	2,356	3,997	-	-	3,718	-	-	3	3	-	23	8	-	-	-	-	-
13	ROMKONG	NW	-	-	-	-	-	919	1,989	-	-	1,768	-	-	-	-	-	3	15	-	4	-	9	-
14 5	SARKI BAKA	AD	-	-	-	-	-	1,897	3,217	-	-	3,578	-	-	-	6	1	6	5	-	1	1	2	1
15	NWAT	NW	-	-	-	-	-	1,347	1,849	-	79	1,401	-	-	2	2	-	11	14	-	-	-	-	-
16	KOUSSAM	WE	18	-	-	-	-	983	1,420	-	81	1,542	-	-	1	4	-	10	16	-	-	-	1	2
17	AKEH	NW	72	-	-	-	-	660	2,356	12	421	1,943	-	-	-	1	-	8	11	-	-	-	-	-
18	BAFOUSSAM	WE	7,843	-	2,366	-	1,582	15,110	28,089	296	280	17,481	-	141	-	-	-	-	-	-	-	-	-	-
19	BELO	NW	-	-	-	-	-	6,778	8,332	-	-	7,623	-	-	7	9	1	26	91	-	-	-	-	-
20 1	FINKWI	NW	24	-	-	-	-	3,330	5,149	-	70	7,136	-	135	3	3	-	33	174	-	1	-	8	15
21	KWIGHE	NW	-	-	-	-	-	1,942	2,593	-	-	3,490	-	-	2	11	-	13	12	3	-	-	-	-
22	ASHONG	NW	-	-	-	-	-	2,613	5,256	474	252	5,482	-	-	-	4	-	2	-	-	3	-	-	-
23	MBH	NW	14,440	11,437	9,925	11,303	2,163	55,267	88,840	3,598	37,755	43,727	1,843	1,568	-	-	-	-	-	-	-	-	-	-
24	NKWEN	NW	7,971	-	3,152	-	8,766	23,679	56,784	2,692	-	32,096	1,278	780	-	-	-	-	-	-	-	-	-	-
25	SABGA	NW	55	-	-	-	-	1,991	3,165	8	101	3,502	-	-	3	5	-	9	8	1	-	-	4	1
26	BAYANGAM	WE	-	-	-	-	-	1,122	1,988	-	-	2,462	-	-	-	1	-	12	70	-	-	-	-	2
27	NDEBAYA	SW	-	-	-	-	-	1,234	1,690	-	-	1,946	-	-	1	-	1	5	5	-	-	-	-	1
28	EKOUNOU	CE	3,208	-	1,146	-	2,534	11,849	19,461	927	994	13,092	-	-	62	-	-	-	84	34	-	-	-	26
29	ETOUG-EBE	CE	14,237	-	2,915	3,091	9,439	38,750	71,042	824	15,606	42,603	479	842	114	-	-	-	285	-	-	-	-	-
30 I	KUMBA	SW	2,870	-	-	-	959	23,655	31,241	1,044	310	28,814	-	127	-	-	-	5	412	-	-	-	-	18
31	MBOPPI	LIT	24,559	-	9,426	8,841	5,671	62,747	159,208	1,474	44,148	182,267	3,393	1,187	-	-	-	-	-	-	-	-	-	-
32	VOUDOU	CE	359	-	-	-	108	4,338	6,707	116	32	3,668	-	10	3	4	-	-	98	-	-	-	-	9
33	MUTENGENE	SW	11,579	2,771	2,340	5,210	4,182	42,682	63,492	2,730	26,985	77,217	3,166	1,000	-	-	-	14	2	-	-	-	-	-
	TOTAL		101,307	20,286	37,025	36,814	40,186	395,976	680,026	25,064	155,882	585,692	13,607	7,617	343	161	14	510	1,748	41	12	1	38	81

## Appendix 7 – MCH

IDENTIFICAT	TION	MOTHER AND CHILD HEALTHCARE ANC INFANT WELFARE PRESCHOOL CLINIC FAMILY PLANNING DELIVERIES																					IMMU	JNIZATI	ON												
			ANC		INFA	NT WEL	FARE	PRESC	HOOL	CLINIC	FAMIL	/ PLAN	NING				DELI	/ERIES						DPT			PO	LIO			TE	TANUS	;				7
SERIAL # INSTITUTION / MONTH	REGION	NEW	OLD	TOTAL	NEW	ОГР	TOTAL	NEW	ОГР	TOTAL	NEW	ОГР	TOTAL	TOTAL DELIVERY	LIVE BIRTH	PRE-TERM	NEOD	ВВА	SB	AB	Meningitis	BCG	DPT 1	DPT 2	DPT 3	POLIO 0	POLIO 1	POLIO 2	POLIO 3	TETANUS 1	TETANUS 2	TETANUS 2	TETANUS 4	TETANUS 5	MEASLES	OTHERS	TOTAL IMMUNIZATION
1 ALLAT	AD	135	101	236	419	1,357	1,776	348	365	713	63	16	79	54	53	1	-	-	1	. 3	-	526	577	487	419	511	546	487	419	259	189	108	49	26	426	409	5,438
2 BANYO	AD	173	699	872	101	189	290	26	73	99	38	30	68	175	155	3	5	6	17	3	-	115	64	68	51	106	64	68	49	109	96	11	4	3	23	3	834
3 BANGOLAN	NW	634	1,992	2,626	534	1,732	2,266	15	181	196	165	11	176	537	520	18	-		4	27		494	484	386	345	534	484	386	345	366	136	151	114	82	223	223	4,753
4 BBH	NW	943	4,228	5,171	510	828	1,338	425	1,005	1,430	387	399	786	2,018	1,495	153	9	12	57	11	133	3 1,243	560	523	501	1,243	560	523	501	529	281	116	110	40	491	1,215	8,569
5 JIKIJEM	NW	435	2,210	2,645	350	2,563	2,913	-	-	-	85	135	220	409	401	8	-	9	4		-	447	382	369	389	446	388	374	391	181	84	42	25	22	274	310	4,124
6 KOUHOUAT	WE	239	945	1,184	128	296	424	36	102	138	44	65	109	147	134	-	-	1	-		10	0 83	111	. 98	66	78	104	98	100	107	94	19	3	4	5	9	989
7 LASSIN	NW	85	205	290	101	566	667	3	25	28	21	37	58	89	87	4	-		2	-		137	142	117	125	137	134	117	125	89	45	10	9	7	99	54	1,347
8 MBEM	NW	411	636	1,047	309	492	801	-		-	31	62	93	122	122		-	-	-			237	149	150	137	253	148	150	137	249	224	-		-	147	339	2,320
9 NDU	NW	372		2,158	420	1,486	1,906	-		-	56	89	145	323	317		-	9	6	2	49	9 267	303	299	283	267	290	299	283	378	192	63	23	8	361	680	4,045
10 NGEPTANG	NW	147	534	681	127	320	447	91	79	170	28	30	58	136	132	5	-	3	3	2		172	178	193	176	162	163	184	165	70	50	32	7	14	130	20	1,716
11 NGOUNSO	WE	662	1,558	2,220	203	562	765	-		-	64	59	123	364	357	29	2	6	3	10		199	165	139	128	199	167	135	137	88	87	45	33	17	73	117	1,729
12 NYAMBOYA	AD	382	622	1,004	280	939	1,219	-	-	-	2	9	11	187	175	1	-	5	10	20		548	590	519	442	453	552	494	436	231	86	27	21	16	228	1,779	6,422
13 ROMKONG	NW	77	199	276	67	3,525	3,592	14	190	204	29	49	78	94	89		1	. 2	5	-		98	60	59	52	98	60	59	57	37	34	10	9	8	63	73	777
14 SARKI BAKA	AD	175	404	579	56	90	146	-	-	-	22	32	54	150	147	1	-	-	2	6		72	43	32	23	62	38	30	21	56	48	8	-	-	11	7	451
15 NWAT	NW	61	162	223	58	93	151	13	28	41	-	-	-	67	38	2	2	-	1		-	46	42	22	23	41	40	22	21	40	24	-	-	-	19	18	358
16 KOUSSAM	WE	11	13	24	39	38	77	12	18	30	3	8	11	53	52	1	-	1	1		56	6 77	41	. 66	36	69	37	58	32	58	43	28	21	15	43	12	692
17 AKEH	NW	94	191	285	111	889	1,000	-	-	-	23	32	55	92	92	-	-	-	1	. 1		111	117	117	131	118	117	117	128	83	77	18	8	-	135	350	1,627
18 BAFOUSSAM	WE	455	1,775	2,230	124	541	712	126	450	564	62	117	179	-	-	-	-	-	-	-	9:	1 -	86	95	105	-	79	86	97	194	150	66	30	14	59	-	1,152
19 BELO	NW	566	2,413	2,979	406	2,366	2,772	67	52	119	86	48	134	492	491	9	2	-	-	3		465	458	415	380	561	453	409	375	293	256	109	63	24	578	787	5,626
20 FINKWI	NW	128	560	688	53	304	357	38	32	-	244	328	572	104	93	-	-	3	-	2		91	82	85	67	91	82	86	67	160	153	104	27	10	74	116	1,295
21 KWIGHE	NW	86	447	533	92	385	477	21	416	440	41	104	146	89	87	1	-	4	2	17	-	134	114	137	125	110	114	131	125	79	60	29	5	1	107	409	1,680
22 ASHONG	NW	82	111	193	77	345	422	-	-	-	28	7	35	54	54	-	-	-	-	-		86	83	93	90	61	87	92	87	60	74	74	18	50	60	83	1,098
23 MBH	NW	379	1,579	1,958	310	689	999	-	-	-	566	262	828	929	884	60	6	-	39	4		515	165	120	107	739	165	120	107	155	82	56	50	50	20	20	2,471
24 NKWEN	NW	641	3,939	4,580	480	3,235	3,715	-	-	-	379	239	618	-	-	-	-	-	-	-		-	335	363	373	-	335	363	373	319	213	186	60	47	366	366	3,699
25 SABGA	NW	58	260	318	37	200	237	-	30	30	79	32	111	65	65	-	-	-	-	2	75	5 68	73	71	91	63	76	73	77	30	15	17	7	8	58	33	835
26 BAYANGAM	WE	26	64	81	17	86	110	-	-	-	4	13	17	16	14	-	-	-	2	-	-	9	17	9	16	15	23	19	18	11	7	1	-	-	-	12	157
27 NDEBAYA	SW	49	93	142	5	35	40	-	-	-	8	15	23	39	38	2	1	1	-	1	-	43	54	42	41	35	57	42	37	19	27	4	2	3	17	5	428
28 EKOUNOU	CE	487	1,693	2,180	1,161	2,641	3,802	-	-	-	90	144	234	-	-	-	-	-	-	-	150	246	430	418	452	234	428	418	452	334	174	82	63	37	436	1,375	5,729
29 ETOUG-EBE	CE	1,906	7,166	9,072	1,117	2,415	3,532	-	-	-	216	289	505	-	-	-	-	-	-	-	336	5 738	844	780	660	738	844	780	660	1,410	942	309	176	204	941	761	11,123
30 KUMBA	SW	371	931	1,302	309	501	810	46	46	92	95	72	167	169	168	-	-	-	1		-	152	132	126	118	152	132	126	118	351	190	70	25	9	101	91	1,893
31 MBOPPI	LIT	3,281	21,170	24,451	5,313	6,951	12,264		-	-	1,663	2,030	3,693	2,870	2,785	59	12	3	56	22	-	2,177	1,840	1,621	1,565	2,177	1,840	1,621	1,565	2,698	2,316	611	245	117	1,306	3,535	25,234
32 VOUDOU	CE	233	436	669	117	341	458	2	3	5	62	57	119	119	118	1	1		-	2	3:	1 107	102	106	72	79	53	52	55	112	61	8	1	2	50	25	916
33 MUTENGENE	SW	1,276	5,009	6,285	941	2,170	3,111	284	844	1,128	281	204	485	913	993	45	4	. 2	18	10	-	832	606	561	563	821	611	561	563	900	674	202	83	35	403	403	7,818
TOTAL		15,060	64,131	79,182	14,372	39,170	53,596	1,567	3,939	5,427	4,965	5,024	9,990	10,876	10,156	403	45	67	235	148	93:	1 10,535	9,429	8,686	8,152	10,653	9,271	8,580	8,123	10,055	7,184	2,616	1,291	873	7,327	13,639	117,345

Appendix 8- Surgeries, Notifiable Diseases and HIV Prevalence

IDENTIFICAT	TION	SU	RGERII	ES				NOTI	FIABLI	E DISE	ASES							HIV PREVALENCE BLOOD DON PATIENTS SCREENE Distribution per Province													
							œ	⋖	S	S		œ	'n			BLOOI	D DON	PATIE	NTS SC	REENE				Di	stribu	tion per	Provin	ce			
SERIAL # INSTITUTION / MONTH	REGION	MINOR	MAJOR	TOTAL	NEONATAL TETANUS	LEPROSY	YELLOW FEVER	CEREBROSPINA L MENINGITIS	HUMAN RABIE	TUBERCULOSI	CHOLERA	TYPHOID FEVER	POLIOMYELITIS	MEASLES	TOTAL	POSITIVE	NEGATIVE	POSITIVE	NEGATIVE	G. TOTAL POSITIVE	North west	South west	WEST	Center	South	Littoral	Adamawa	North	Far North	East	Total
1 ALLAT	AD	44	-	44	-	-	-	-	-	-	-	-	-	-	-	-	44	5	225	5	-	-	-	-	-	-	-	-	-	-	-
2 BANYO	AD	431	214	1,167	-	-	-	3	1	26	-	7	-	1	38	-	230	60	399	60	-	-	-	-	-	-	60	-	-	-	60
3 BANGOLAN	NW	1,276	-	1,276	-	-	1	-	-	10	-	45	-	1	57	-	29	41	1,379	41	22	-	14	-	-	-	-	-	-	-	36
4 BBH	NW	5,101	1,626	6,727	-	-	1	106	2	177	-	12	-	-	298	9	837	802	3,708	811	626	9	46	25	2	16	15	1	-	2	742
5 JIKIJEM	NW	176	-	176	-	-	-	-	-	-	-	-	-	-	-	2	50	14	270	19	16	-	-	-	-	-	-	-	-	-	16
6 KOUHOUAT	WE	130	-	130	-	-	-	-	-	-	-	-	-	1	1	-	55	35	487	35	-	-	30	-	-	-	-	-	-	-	30
7 LASSIN	NW	57	-	41	-	-	-	-	-	-	-	-	-	-	-	-	7	22	201	40	42	-	-	-	-	-	-	-	-	-	42
8 MBEM	NW	189	33	222	-	-	-	1	-	5	-	-	-	-	6	1	21	13	439	12	14	-	-	-	-	-	-	-	-	-	11
9 NDU	NW	260	-	260	-	-	-	-	-	1	-	-	-	-	1	-	5	106	866	101	107	-	-	-	-	-	-	-	-	-	107
10 NGEPTANG	NW	103	-	103	-	-	-	-	-	-	-	-	-	-	-	-	29	19	80	19	17	-	1	-	-	-	-	-	-	-	18
11 NGOUNSO	WE	251	-	251	-	-	-	4	-	1	-	20	-	21	46	2	350	118	510	120	-	-	109	1	-	-	-	-	-	-	110
12 NYAMBOYA	AD	53	-	53	-	-	-	1	-	1	-	61	-	-	63	1	68	45	625	46	-	-	-	-	-	-	45	-	-	-	45
13 ROMKONG	NW	100	-	80	-	-	-	-	-	-	-	-	-	-	-	-	-	9	48	8	8	-	-	-	-	-	-	-	-	-	7
14 SARKI BAKA	AD	83	-	83	1	-	-	-	1	2	-	44	-	2	50	1	42	7	93	29	1	-	-	-	-	-	11	-	-	-	12
15 NWAT	NW	33	-	33	-	-	-	9	-	-	-	2	-	-	11	1	63	28	166	29	13	-	-	-	-	-	-	-	-	-	13
16 KOUSSAM	WE	46	-	46	-	-	10	2	-	1	-	10	-	2	25	-	21	8	72	8	-	-	5	-	-	-	-	-	-	-	5
17 AKEH	NW	123	-	123	-	-	-	-	-	-	-	-	-	-	-	-	1	19	243	31	-	-	-	-	-	-	-	-	-	-	-
18 BAFOUSSAM	WE	111	-	111	-	-	-	-	-	2	-	3	-	-	5	-	-	104	711	104	-	-	-	-	-	-	-	-	-	-	-
19 BELO	NW	320	-	320	-	-	-	-	-	-	-	-	-	-	-	-	-	14	138	14	-	-	-	-	-	-	-	-	-	-	-
20 FINKWI	NW	242	-	242	-	-	1	-	-	2	-	-	-	-	3	-	-	83	1,571	83	-	-	-	-	-	-	-	-	-	-	-
21 KWIGHE	NW	47	-	47	-	-	-	1	-	-	-	-	-	-	1	-	4	33	219	33	-	-	-	-	-	-	-	-	-	-	-
22 ASHONG	NW	-	-	-	-	-	-	-	-	-	-	18	-	1	19	-	-	3	13	3	-	-	-	-	-	-	-	-	-	-	-
23 MBH	NW	2,038	4,059	6,097	3	5	-	165	12	385	-	165	-	-	735	90	1,850	721	3,744	1,333	-	-	-	-	-	-	-	-	-	-	-
24 NKWEN	NW	14,287	-	14,287	-	-	-	-	-	-	-	-	-	-	-	-	-	590	2,448	590	-	-	-	-	-	-	-	-	-	-	-
25 SABGA	NW	90	-	90	-	-	-	-	-	-	-	-	-	-	-	-	11	22	229	22	-	-	-	-	-	-	-	-	-	-	-
26 BAYANGAM	WE	9	-	9	-	-	-	-	-	-	-	-	-	-	-	-	-	10	172	10	-	-	2	-	-	-	-	-	-	-	2
27 NDEBAYA	SW	48	-	48	-	-	-	-	-	-	-	7	-	-	7	-	4	12	126	12	-	-	-	-	-	-	-	-	-	-	-
28 EKOUNOU	CE	152	-	152	-	-	-	-	-	4	-	9	-	3	16	-	-	92	746	92	-	-	-	63	-	-	-	-	-	-	63
29 ETOUG-EBE	CE	1,176	-	1,176	-	-	5	1	-	121	-	29	-	6	162	-	-	482	3,586	482	-	-	-	482	-	-	-	-	-	-	482
30 KUMBA	SW	418	-	418	-	-	-	-	-	26	-	2	-	-	28	-	-	243	1,280	243	-	230	-	-	-	-	-	-	-	-	230
31 MBOPPI	LIT	2,601	800	3,401	-	-	1	-	-	373	-	-	-	2	376	4	465	1,141	7,024	1,145	-	-	-	-	-	1,145	-	-	-	-	1,059
32 VOUDOU	CE	99	-	99	-	-	-	-	-	-	-	2	-	-	2	-	-	43	362	43	-	-	- 1	1	-	-	-	-	-	- 1	1
33 MUTENGENE	SW	1,690	1,143	2,833	-	-	9	17	-	237	-	289	-	6	558	5	757	1,073	7,472	1,078	4	902	9	6	-	127	-	-	-	1	1,049
TOTAL		31,784	7,875	40,145	4	5	28	310	16	1,374	-	725	-	46	2,508	116	4,943	6,017	39,652	6,701	870	1,141	216	578	2	1,288	131	1	-	3	4,140

### Appendix – 9 Deaths and Diabetes

IDENTIFICAT	ION			DEATHS	3															D	IABETE:	S													
								NEW			OLD			TYPE			DRI	UG																	
<b>&gt;</b>																									A	GE GRO	UP/SEX	DISTR	IBUTION	١					
, <u>ō</u>			AL	٩L	<u>0</u>												z				<1			1 to 5			6 to 15		16 to 45				45+		
# H L NOW NOW NEW NEW NEW NEW NEW NEW NEW NEW NEW NE	REGION	MEDICAL	MATERNA	SURGIC/	PEDIATRIC	Total	Male	Female	Total	Male	Female	Total	ONE	ОМТ	Total	ORAL	INJECTION	DIET	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	G.Tot (M&F)
1 ALLAT	AD	1	-	-	4	5	-	-	1	33	19	52	-	43	42	41	-	-	40	-	-	-	-	-	-	-	-	-	2	3	4	28	11	41	45
2 BANYO	AD	21	1	1	9	32	10	9	19	94	95	189	2	27	29	-	-	-	-	-	-	-	-	-	-	1	1	2	22	31	53	32	35	67	122
3 BANGOLAN	NW	7	-	-	1	8	56	81	137	11	28	39	37	139	176	139	37	-	176	2	5	7	2	3	5	1	1	2	12	32	44	56	74	130	5,062
4 BBH	NW	415	7	46	75	543	20	37	57	142	286	428	36	257	293	650	203	14	867	-	-	-	-	-	-	2	2	4	45	96	141	112	230	342	487
5 JIKIJEM	NW	5	-	-	2	8	35	40	75	68	54	122	56	1	57	6	6	6	18	-	-	-	-	-	-	13	8	21	47	42	89	61	49	110	220
6 KOUHOUAT	WE	3	-	-	10	13	14	8	31	138	109	247	-	2	2	46	27	-	73	-	-	-	-	6	6	-	-	-	57	60	117	111	67	178	301
7 LASSIN	NW	9	2	-	-	11	8	3	7	18	17	35	6	7	11	11	2	2	15	2	2	4	2	2	4	2	2	4	10	6	16	16	14	30	58
8 MBEM	NW	4	-	-	1	5	9	6	15	51	36	87	2	-	2	2	-	-	2	-	-	-	-	-	-	-	-	-	-	-	-	5	1	6	6
9 NDU	NW	15	-	-	6	21	20	37	57	115	236	351	36	358	394	368	36	74	442	-	-	-	-	-	-	-	-	-	17	29	51	124	228	352	403
10 NGEPTANG	NW	7	1	-	-	8	5	9	14	20	37	57	31	26	57	61	6	-	62	-	-	-	-	-	-	2	-	2	3	15	18	19	51	70	90
11 NGOUNSO	WE	10	1	-	21	32	28	23	51	81	54	136	77	105	182	28	104	17	149	1	-	1	1	-	1	-	1	1	26	21	47	65	48	113	163
12 NYAMBOYA	AD	3	-	-	8	11	1	1	2	21	21	42	17	21	38	2	35	-	34	-	-	-	-	-	-	-	-	-	8	9	17	11	19	30	47
13 ROMKONG	NW	1	-	-	-	1	1	2	3	24	44	68	60	-	60	37	8	-	37	-	-	-	-	-	-	-	-	-	1	-	1	23	46	69	70
14 SARKI BAKA	AD	8	-	-	1	9	7	8	15	29	28	57	7	1	8	8	8	1	17	-	-	-	-	-	-	-	-	-	10	5	15	28	31	59	74
15 NWAT	NW	3	-	-	-	3	2	-	2	19	26	45	2	42	41	30	5	-	35	-	-	-	-	-	-	-	-	-	5	2	7	17	23	40	47
16 KOUSSAM	WE	6	-	-	1	7	3	10	13	15	16	31	9	-	9	-	-	-	-	-	-	-	-	-	-	1	6	7	18	14	32	38	42	80	119
17 AKEH	NW	-	-	-	1	1	6	4	10	13	13	26	3	2	5	5	-	-	5	-	-	-	-	-	-	-	-	-	-	-	-	20	17	37	37
18 BAFOUSSAM	WE	-	-	-	-	-	91	107	198	467	596	1,063	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	25	104	129	571	613	1,184	1,313
19 BELO	NW	-	-	-	-	-	4	10	14	52	53	105	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1	64	58	122	123
20 FINKWI	NW	-	-	-	1	1	-	-	-	4	9	13	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3	1	4	1	8	9	13
21 KWIGHE	NW	-	-	-	-	-	-	-	-	11	27	38	-	4	4	-	-	-	-	-	-	-	-	-	-	-	-	-	1	6	7	6	12	18	25
22 ASHONG	NW	1	-	-	-	1	3	3	6	21	28	49	-	10	10	9	4	-	13	-	-	-	-	-	-	1	4	5	13	18	31	9	22	31	67
23 MBH	NW	452	-	71	61	584	10	12	22	91	132	223	53	197	250	222	26	236	484	-	-	-	-	-	-	-	-	-	4	20	24	97	125	226	250
24 NKWEN	NW	-	-	-	-	-	13	15	28	186	97	283	5	339	344	184	158	-	342	-	-	-	-	-	-	-	1	1	42	56	98	157	177	290	389
25 SABGA	NW	2	-	-	-	2	1	7	8	11	13	24	1	11	12	11	1	-	12	-	-	-	-	-	-	-	-	-	10	15	25	7	10	17	42
26 BAYANGAM	WE	4	-	-	-	4	5	15	20	42	52	94	18	88	106	55	11	-	66	-	-	-	-	-	-	-	-	-	3	9	12	46	57	103	115
27 NDEBAYA	SW	-	-	-	1	1	5	-	5	11	4	15	-	3	3	5	-	-	5	-	-	-	-	-	-	-	-	-	6	-	4	10	4	14	18
28 EKOUNOU	CE	-	-	-	-	-	2	29	31	410	465	875	-	904	894	761	49	-	810	-	-	-	-	-	-	-	-	-	41	41	82	375	476	851	933
29 ETOUG-EBE	CE	-	-	-	-	-	326	443	769	566	844	1,410	51	844	895	816	82	-	898	-	-	-	-	-	-	24	36	60	185	372	557	638	900	1,538	2,156
30 KUMBA	SW	2	-	-	1	3	25	31	56	759	942	1,701	386	1,371	1,757	1,218	394	-	1,612	-	-	-	-	-	-	2	2	4	218	273	491	566	696	1,262	1,757
31 MBOPPI	LIT	4	1	-	2	7	39	64	103	999	1,352	2,351	815	1,642	2,457	1,827	630	2,457	4,914	-	-	-	-	-	-	-	-	-	316	440	756	604	845	1,615	2,371
32 VOUDOU	CE	-	-	-	-	-	4	3	7	70	113	183	37	153	190	153	37	-	190	-	-	-	-	-	-	-	-	-	37	61	98	45	82	127	225
33 MUTENGENE	SW	97	3	6	33	139	11	17	28	508	662	1,170	293	936	1,188	936	284	-	1,220	-	-	-	-	-	-	-	2	2	138	220	358	475	452	927	1,287
TOTAL		1,080	16	124	239	1,460	764	1,034	1,804	5,100		11,609	2,040	7,533	9,516	7,631	2,153	2,807	12,538	5	7	12	5	11	16	49	66	115	1,325		3,329	4,437	5,523	10,088	