CAMEROON

STRICTIC FOCUS

Optimizing Collaborative Relationships with the Ministry of Health (MOH): The U.S. Centers for Disease Control and Prevention (CDC) and the Government of the Republic of Cameroon began collaborating in 2008 to support the development of sustainable public health capacity and infrastructure. CDC’s role in Cameroon has evolved from a research program to provision of public health leadership, direct clinical support, and technical assistance to Cameroon MOH, National HIV Control Committee, and the National Tuberculosis (TB) Control Program.

Strengthening Public Health Systems: CDC provides public health leadership, subject matter expertise, and direct assistance to the MOH and implementing partners to prevent, detect, and respond to public health challenges. Activities include strengthening epidemiology, surveillance, laboratory, workforce development, research capacity, and HIV prevention and treatment programs along the clinical cascade.

KEY ACTIVITIES AND ACCOMPLISHMENTS

HIV Prevention and Treatment Scale-up: U.S. President’s Emergency Plan for AIDS Relief’s (PEPFAR) CDC program in Cameroon prevents HIV infection and provides HIV treatment services for people living with HIV (PLHIV). As the PEPFAR lead agency, CDC is expanding clinical programs from four regions to all ten regions in 2019 to achieve HIV epidemic control.

CDC and implementing partners prevent mother-to-child transmission (PMTCT) of HIV and utilize high-yield testing strategies to identify newly infected and undiagnosed people living with HIV (PLHIV). The Test and Start approach for rapidly initiating patients on antiretroviral treatment (ART) after an HIV-positive diagnosis has been successful in linking PLHIV to treatment. CDC remains focused on keeping PLHIV on ART and ensuring HIV viral suppression through patient education on medication adherence and differentiated service delivery models – convenient hours, community ART dispensation, and a patient-centered Positive Health Program.

TB/HIV: TB remains a major cause of mortality for PLHIV in Cameroon. CDC supports TB and HIV collaborative activities to reduce morbidity of co-infection through HIV testing among TB patients, initiation of HIV-positive TB patients on ART, and TB screening, prevention, and treatment among PLHIV.

Laboratory System Strengthening: CDC has developed and strengthened the capacity of Cameroon’s laboratories by leading the implementation of activities, such as the first national proficiency-testing program to ensure quality results, and the roll out of the Strengthening Laboratory Improvement Process Towards Accreditation (SLIPTA), a framework for evaluating progress of laboratories toward international accreditation. As of 2019, over 1,100 laboratories are proficient in HIV rapid testing, three laboratories have received international accreditation, and 14 are enrolled in the accreditation process. CDC has provided technical assistance to strengthen the capacity of two laboratories, one of which is now the first internationally accredited laboratory in Cameroon and Central Africa. Both laboratories currently serve as national reference laboratories for Early Infant Diagnosis and HIV viral load testing.

Strategic Information: CDC has supported improvements in Cameroon’s national HIV monitoring and evaluation (M&E) system and the development of M&E data collection tools for health facilities across the country. CDC continues to strengthen Cameroon’s Health Information System through technical and financial support to advance the District Health Information System (DHIS) at national, regional, and district levels. To optimize performance across the HIV clinical cascade, CDC is building capacity of staff at local health facilities by using site-level data to identify gaps and site-level solutions. Results from the Cameroon Population-based HIV Impact Assessment (CAMPHIA), released in 2018, demonstrates progress toward HIV epidemic control, and informs HIV strategic planning decision-making.

Our success is built on the backbone of science and strong partnerships.

Key Country Leadership

President: Paul Biya
Minister of Health: Manaouda Malachie
U.S. Ambassador: Peter Barlerin
CDC/DGHT Director: Emily Kainne Dokubo

Country Quick Facts

(who.int/tb/country/data/profiles/en)

Estimated TB Incidence: 194/100,000 population (2017)
TB patients with known HIV status who are HIV positive: 31% (2017)
TB Treatment Success Rate: 84% (2016)
TB Mortality: 30/100,000 population (2017)

DGHT Country Staff: 27.3
Locally Employed Staff: 22.3
Direct Hires: 5
Fellows & Contactors: 0

Per Capita GNI: $1,440 (2018)
Under 5 Mortality: 84/1,000 live births (2017)
Life Expectancy: 59 years (2017)

Global HIV/AIDS Epidemic

(aidsinfo.unaids.org)

Estimated AIDS Deaths (Age ≥15): 14,000 (2018)
Estimated Orphans due to AIDS: 410,000 (2018)
Reported Number Receiving Antiretroviral Therapy (ART) (Age ≥15): 270,804 (2018)

Global Tuberculosis (TB) Epidemic

(worldbank.org/en/where-we-work)

Estimated TB Incidence: 84/1,000 live births (2017)
TB patients with known HIV status who are HIV positive: 31% (2017)
TB Treatment Success Rate: 84% (2016)
TB Mortality: 30/100,000 population (2017)

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