

# Cameroon

## Community, Rights and Gender Country Profile

*Working Document*



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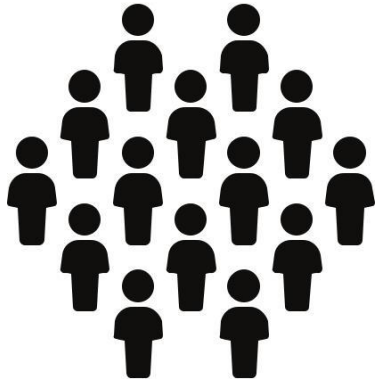


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# Quick Facts



**27.2 million people  
(2021)**

*Working Document*



**High TB/HIV Burden  
Country**



**Central Africa**

# UNHLM Targets



## Resource Needs (2022)

29.6 million (USD)

## Available TB Funding 2020 (USD)

Domestic: 1.8million

International (Excluding Global Fund): 0.0million

Global Fund: 4.5million

Funding Needs: 10.5 million



## Diagnosis and Treatment Targets (2020)

TB Target: 35,000

% Target Achieved: 64



## Prevention Therapy (2022)

Total PT Targets: 133,490

\*Please note that this will be updated in October after 2023 UNHLM on TB  
Source: [Stop TB Partnership Dashboard](#)

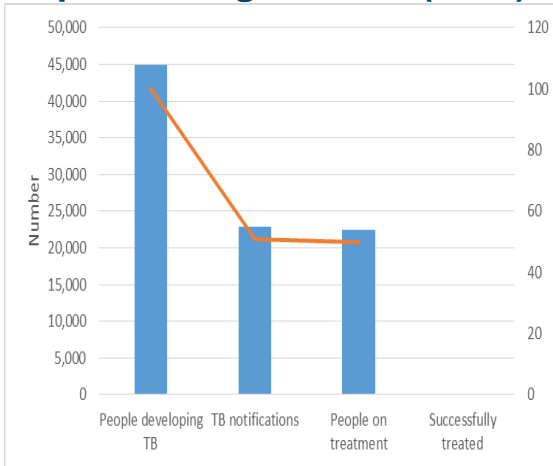
# National Strategic Plans and Funding Opportunities

- Next National Strategic Plan  
Development: **2024/2025**
- Next Global Fund funding request  
(proposal development): **2023**

COUNTRY PROFILE CAMEROON

# TB Situation

## Epidemiological Data (2021)



### Major Gaps in TB Prevention and Care

- 22,591 Missing people with TB (3,599 were children)
- 12,000 people died because of TB
- 137 Laboratory confirmed people with MDR/RR-TB (WHO data, 2021)

integration of HIV/TB services and refugee/IDP camps into TB programs is lacking, leading to availability barriers in these settings.

**Acceptability issues:** Weak enforcement of privacy and confidentiality regulations

**Quality issues:** The study found that only 0.9% of individuals receive appropriate care. Stigmatizing and discriminatory treatment by healthcare workers, particularly towards HIV key populations, significantly affects the quality of services provided.

**Discrimination issues:** At the time of the study, there was no legal prohibition of TB discrimination, and TB stigma and discrimination are widespread. People with TB often experience employment loss due to discrimination based on their health status.

**Freedoms:** While labor law protects the right to privacy and confidentiality of personal data, it does not specifically protect the rights of privacy and confidentiality of people with TB. This lack of protection leads to key populations avoiding healthcare services due to fears of disclosure of their health status.

**Gender:** Men are at high risk of TB due to factors such as occupational exposure, labor migration, and crowded social environments. However, they tend to delay seeking healthcare. Women's health is deprioritized, and they often have limited decision-making power, requiring male consent to seek healthcare.

**Key and Vulnerable Populations** Certain populations are prioritized due to their vulnerability to TB, including prisoners, people living with HIV (PLHIV), TB contacts, refugees/IDPs, and children. However, there is a lack of data on TB contacts, key population risk factors, and barriers to services. Integration of refugee and IDP camps into the health system is inadequate, resulting in high TB risk and service barriers. Children also face high TB risk and barriers due to various factors, such as limited access to diagnostic tools, poor BCG coverage, and lack of quality services.

**Participation:** Communities are involved in TB policy-making, but they often struggle to influence debates and decision-making processes due to insufficient resources.

**Remedies and Accountability:** The law does not provide workers' compensation for TB. Additionally, there was no community-level mechanism to monitor commitments to end TB, which affects accountability in addressing the disease.

**Source:** HHR: Health and Human Rights Journal (2021): Building the Evidence for a Rights-Based, People-Centered, Gender-Transformative Tuberculosis Response: An Analysis of the Stop TB Partnership Community, Rights, and Gender Tuberculosis Assessment

## Community, Rights and Gender Data

The CRG assessment conducted in 2018 highlighted several barriers related to TB services. Here is a summary of the findings:

**Accessibility Barriers:** There are various accessibility barriers to TB services, including out-of-pocket costs for TB services, including tests and hospitalization, as well as costs related to co-morbidities. Catastrophic costs associated with TB diagnosis and treatment pose a significant barrier. Stigmatization and discrimination against HIV key populations also hinder access to TB services. Lack of TB information and knowledge, as well as physical access to clinics, further contribute to the accessibility challenges.

**Availability Barriers:** The availability of TB services is limited, with only 18% of surveyed clinics providing TB services. There is a lack of or non-functioning x-rays and rapid molecular tests, which are crucial for accurate diagnosis and treatment. Additionally, the

# Community Engagement and Representation

Active National Stop TB Partnership

- Yes

National Network of People Affected by TB

- TBpeople Cameroon

TB community represented on CCM

- Yes

National High-Level Engagement with Parliamentarians

- No

Celebrities Engagement in TB response

- No

Challenge Facility for Civil Society Round 10 Regional Level Partners

- African Coalition on TB (ACT)
- Dynamique de la réponse d'Afrique francophone sur la tuberculose (DRAF TB)

CFCS Round 11 Regional Level Partners

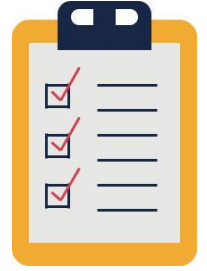
- African Coalition on TB (ACT)
- Dynamique de la réponse d'Afrique francophone sur la tuberculose (DRAF TB)
- Lawyers Alert Association Makurdi

Global Network

- Lean on Me Foundation



# Community, Rights and Gender



• CRG Assessment Complete



• Costed CRG Action Plan

◦ In progress



• TB Stigma Assessment Conducted



• TB Stigma Elimination Plan Available

◦ No



• Community-led Monitoring Mechanism



• Legal and Human Rights Scorecard Assessment

◦ No





COUNTRY PROFILE CAMEROON

# CFCS Round 10 Grantees

## For Impacts in Social Health

**Project Location:** Central and South Regions

**Timeline:** November 2021 - November 2022

**Objectives:**

- To provide clear and actionable guidance to tuberculosis (TB) policymakers, program implementers, and TB survivors on how to activate human rights-based TB response in Cameroon.
- To implement, monitor and evaluate “OneImpact” to activate a Human Right based TB response in two Cameroonians regions (Centre and South).
- To participate and engage in TB advocacy and accountability initiatives at national, regional, and global levels

# CFCS Round 10 Grantees

## Kenko Foundation Association

### Global Fund NFM 3 Principal Recipient

**Project Location:** South West, Littoral, and Centre Regions

**Timeline:** November 2021 - November 2022

### Objectives:

- To establish multi-sectorial response teams led by ex-inmates to advocate for an end to TB in prison settings in the Central Prisons (Buea), New Bell Prisons (Douala), and Kondengui (Yaounde)
- To develop and launch an "End TB in Prisons Campaign", led by ex-inmates in Cameroon.
- To support access to TB services in prison settings, led by ex-inmates in Central Prisons (Buea), New Bell Prisons (Douala), and Kondengui (Yaounde)
- To participate and engage in TB advocacy and accountability initiatives at national, regional, and global levels

# CFCS Round 11 Grantees

## For Impacts in Social Health

**Project Location:** Yaoundé, Douala and Garoua Regions

**Timeline:**

**Overall Aim:**

- To engage TB-affected communities, including survivors to scale and strengthen right-to-health CLM efforts to reduce barriers to access among children, people living with HIV and the elderly in 3 health regions in Cameroon.

**Proposal Objectives:**

- To empower and strengthen TB-affected communities, including networks of TB survivors, to advocate for a human rights-based TB response.
- To conduct a progress evaluation of the CRG action plan including an economic analysis of the value for money.
- To scale up and maximize OneImpact reach to communities, data use and monitoring and evaluation of right-to-health challenges
- To participate and engage in various TB advocacy and accountability initiatives at national and community levels.

# CFCS Round 11

## Grantees

### Join Acting Process for the Success of Sustainable Objectives (JAPSSO)

**Project Location:** Central prisons of Yaoundé, Douala, Bafoussam and Garoua

**Timeline:** April 2023 -April 2024

**Aim:**

- To support equitable access to essential TB services for prison detainees in Cameroon

**Objectives:**

- To put in place a collaborative (MINJUSTICE, MINSANTE, PNLT, CCM, UCS-FM, USAID and STOP TB) framework for coordinating interventions in the fight against Tuberculosis to protect and promote the rights of prison detainees in central prison settings in Yaoundé, Douala, Garoua, Maroua and Bafoussam, Cameroon.
- To promote the right to health and remove human rights barriers that hinder access to HIV and tuberculosis services in the central prisons of Yaoundé, Douala, Garoua, Maroua and Bafoussam.
- To establish key TB priority advocacy asks for detainees in the prisons of Yaoundé, Douala, Garoua, Maroua and Bafoussam, based on experiences of detainees affected by TB.

## COUNTRY PROFILE CAMEROON

# CFCS Round 11

## Grantees

### Kenko Foundation Association

**Project Location:** Buea, Kumba, Mamfe & Bamenda

**Timeline:** March 2023- March 2024

**Aim:**

- To work in collaboration with ex-inmates, MOH and local prison authorities to facilitate increased use of TB services (screening and treatment) in prison settings across the two English-speaking regions of Cameroon.

**Objectives:**

- To establish a multisectoral response team led by ex-inmates (including those with lived TB experiences) to advocate for an end to TB in 4 prisons (Buea, Kumba, Mamfe & Bamenda) in the English-speaking regions of Cameroon
- To develop and launch an "end TB in prison campaign" led by ex-inmates to raise awareness about TB symptoms and need for screening in 4 prisons (Buea, Kumba, Mamfe & Bamenda) in the English-speaking regions of Cameroon
- To advocate for and facilitate access to TB services (screening and treatment) in 4 prisons (Buea, Kumba, Mamfe & Bamenda) in the English-speaking regions of Cameroon led by ex-inmates
- To participate and engage in various TB advocacy and accountability initiatives at national, regional and global levels

# Country-level Platform Partnership

## Stop TB Cameroon

**Project Location:**

**Timeline:** November 2022-May 2024

**Overall Aim:**

- To generate high-level advocacy activities targeting key stakeholders and decision-makers to ensure alignment of national and global advocacy efforts such as UN HLM 2023 and the overall budgetary needs to end TB in Cameroon by 2024.

**Objectives:**

- To strengthen the leadership, visibility governance, and coordination of the national platform with the participation of high-level and relevant stakeholders
- To conduct national dialogs and prepare the country for active participation in the UNHLM 2023
- To increase the level of knowledge of key stakeholders at the country level on the overall budgetary needs to end TB at the country level

# Questions?

# Contact us.

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