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VAHA 2015 ANNUAL REPORT

CONTACT US @ VALUE HEALTH AFRICA TATSA BUSINESS COMPLEX C16 PO BOX 1055 NWR CAMEROON Website: www.valuehealthafrica.org Email: valuehealthafrica@gmail.com REG No: 52/E.29/1111/VOL.8/ALPAS

Tel: (237) 683402456/ (237) 679702525

PREFACE

This report highly summarizes the activities carried out by Value Health Africa (VAHA) in 2015. This re-port covers the period January 2015 to December 2015. As such the report is divided into five chapters in which Chapter one gives an insight of the organization with the Executive Summary report for 2015; chapter two draws summarily on administrative and management activities of the organization ; the third chapter reports activities within the Non-Communicable Diseases program area; chapter four reports on activities of the Sexual Reproductive Health Department while Challenges faced, recommendations, and projections for the year 2016, are found in the fifth chapter.

ACKNOWLEDGMENTS

VAHA is undoubtedly thankful to the Government of Cameroon for creating opportunities and avenues for increased collaboration and partnership with the various technical departments and stakeholders. We remain particularly thankful to all our collaborators and partners who have guided us and provided us with the necessary assistance and much needed support in the course of project implementation activities. Thanks to you all

The volunteers and staff members, led by the Founder and Chief Executive Officer of VAHA, are specially recognized for their devotion and hard work to the success of project activities.

We are exceptionally thankful to those who committed the organization in prayers. This actually contributed to the numerous successes achieved in the course of the 2015 year.

CHAPTER ONE ABOUT VALUE HEALTH AFRICA (VAHA)

1.1 BACKGROUND

VAHA is an indigenous, non-political, non religious development organization, established in 2015 to sensitize, educate and screen communities on non-communicable diseases thereby improving on early diagnoses while preventing end stage complications resulting from them. With headquarters in Bamenda, North West Region of Cameroon, **Value Health Africa (VAHA)** has been carrying out various community health programs on non-communicable diseases in over 06 subdivisions of the North West Region.

1.2 VISION

To promote health and wellness throughout all of Africa by strengthening healthcare systems, advocating for policy change, building local community capacity and developing international partnerships.

1.3 MISSION

To add quality to life and to promote sustainable community development in Cameroon, thus improving community health.

1.4 GOAL

"To contribute to Social Justice through sustainable interventions, for the alleviation of poverty and misery"

1.5 CORE VALUES

- Solidarity
- Determination
- -Transparency
- -Innovation

-Research

1.6 STRATEGIC OBJECTIVES

VAHA has the following strategic objectives:

Promote awareness on the dangers of non-communicable diseases like cancer, diabetes, chronic kidney diseases via community outreach screening programs, education and sensitization campaigns etc.

Contribute to improving Health Service Delivery and Utilization, especially in the areas of Treatment, Care and Support.

- Help reduce poverty.
- Promote research on health systems and diseases so as to influence policy/decision making.

1.7 KEY PROGRAMS

- VAHA carries out related projects within the following key programs:
- Non-Communicable Diseases
- Sexual Reproductive Health
- ✤ Value Health Institute of Research

VAHA's interventions are beneficiary-focused, and so support to them is holistic with the integration of sub-program activities in every implemented project on the field.

1.8 SUB-PROGRAMS:

For Non-Communicable Diseases

- Education and Sensitization
- Community Screening
- Gender Participation

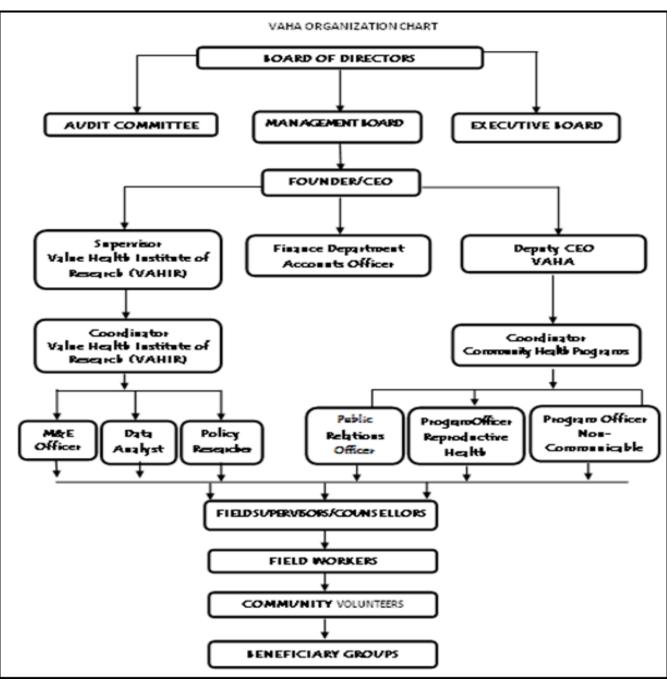
For Sexual Reproductive Health

- Prevention
- -Care and Support
- -Capacity Building
- -Treatment Literacy

For Value Health Institute of Research

Education and Training Field Research

1.9 STRUCTURE OF THE ORGANIZATION.



1.10 EXECUTIVE SUMMARY OF ACTIVITIES

You are welcome to **Value Health Africa** (**VAHA**) and we are pleased with your interest in getting to know about our work in 2015. At the beginning of 2015, **VAHA** given its vision and mission took upon herself in bringing solutions to public health threats within urban and rural communities in the North West Region of Cameroon. The year 2015 was a huge success for **Value Health Africa**, Cameroon as they were able to meet their target as a 'start-up' organization.

Three (3) major community health outreach projects were carried out last year which were; menstrual hygiene education and awareness campaign, Diabetes, hypertension and chronic kidney disease screening campaign and also Breast and Cervical cancer screening campaigns. It is worth mentioning that the success of these interventions is greatly owed to the beneficial collaboration received as VAHA worked concomitantly with Home of Pearls Foundation-Bamenda and Build Our Women- Yaoundé. The awareness, screening and education campaigns began on September 2015 and ended in December 2015 and were carried out in seven (7) communities in the North West Region of Cameroon namely; Mankon, Nkwen, Mendakwe, Alabukam, Mulang, Alamandum and Banso communities with a total of 860 participants who came for the screening. During these screening campaigns, VAHA's main objective was to access, educate and screen inhabitants on these non- communicable diseases. VAHA also received support from the Banso elites in the UK, some members of the organization and other well wishers who greatly valued the work they were doing.

However the implementation of these projects were not void of challenges and constraints as the organization's work was slowed down by inadequate human, financial and material resources which stalled the smooth functioning of the projects. Being a start up, it was unanimously recommended and adopted that philanthropies, well wishers and other elites should engage financially in sponsoring projects of this nature as it's commonly said "health is wealth".

CHAPTER TWO

GENERAL ADMINISTRATIVE AND MANAGEMENT ACTIVITIES

This division contains the documentation, communication, personnel and reception bureau; thereby explaining its outreach to other departments of the organization, the beneficiaries and communities. The year 2015 has been chaotic for general administrative and management activities of the organization giving that **VAHA** is still in the early start up phases as the personnel, apart from their own assigned duty within the division, also worked as support staff within the program areas and or departments. They produced Information, Education and Communication (IEC) materials and were actively involved in trainings and conferences on the field. Several developments occurred in the life of the organization in general, the staff, members, and beneficiaries in particular; resulting to a fabulous growth of the institution. Read more on the pages that follow.

2.1 CAPACITY BUILDING (SEMINARS AND WORKSHOPS)

Members, Staff and Beneficiaries benefited from seminars, workshops and trainings organized within and beyond VAHA's premises in the course of the year funded by partners one of which is the "You Lead Now" three day conference in Kansas leadership center (United States of America).

2.2 NETWORKING & PARTNERSHIPS

Collaborators

-VAHA worked with the following services in project implementation activities:

-Cameroon's Ministry of Public Health

CHAPTER THREE

NON-COMMUNICABLE DISEASES PROGRAM AREA

INTRODUCTION

VAHA's interventions within this program area, just like the other programs of the organization are beneficiary focus. That is to say, all her target groups and beneficiaries are reached through outreach, education and sensitization and awareness building activities. Generally her intervention areas are within the national territory of Cameroon, with particular focus on typical traditional and rural communities with little or no traces of efficient health service delivery systems. The very core activities of this program area are carried out in strict compliance with the mission and vision of VAHA as the objective is to ensure all tar-get beneficiaries and communities are reached with these services, thereby, acknowledging the strategy of a holistic intervention for support.

CORE VALUES

1. Work in partnership with community health centers and

2. Empower rural communities to adequately take care of their health.

3. Committed to solidarity and building alliances of grassroots beneficiary groups as community volunteers

4. Building strong community support systems for follow up and counseling on positive cases or people at risk of being diabetic or hypertensive.

5. Credits and acknowledges the participation of marginalized and enclave communities in the elaboration and adoption of holistic health policies for improved livelihoods.

KEY INTERVENTION AREAS

- Education and Sensitization
- Community Screening
- Control clinics
- Research

STATISTICAL SUMMART OF THE LEWIENTATION								
COMMUNITY HEALTH OUTREACH PROGRAM	Location	Farget	Period	BENEFICIARIE DIRECT		INDIRECT		TO TAL
				MALE	FEMALE	MALE		
				MALE	FENIALE	MALE	FEMALE	
DIABETES, HYPERTENSI- ON & CKD SCREENING	07 communities in the North West Region of Came- roon (Mankon, Nkwen, Men- dakwe, Alabu-kam, Mulang, Alachu and Alamandum)	Men and Women age 30+	March 2015- Dec 2015	213	315	/	/	528
MENSTRUAL HY- GIENE AND TEENAGE PREGNANCY PROGRAM	Bambalang subdivision, North West Re- gion-Cameroon	Young women and girls aged 17 and above	March 2016	/	250	/	/	250
BREAST AND CERVICAL CANCER SCREENING	Banso	Women who are sexually active	Dec 2015	/	320	/	/	320
TOTALS				213	885			1098

STATISTICAL SUMMARY OF IMPLEMENTATION

SUMMARY OF PROJECTS IMPLEMENTED

Project No. 1: Diabetes, Hypertension and Chronic Disease Screening

Project Location: Mezam Division of the Northwest Region of Cameroon; targeting 07 communities as follows: Mankon, Nkwen, Mendakwe, Alabukam, Mulang, Alachu and Alamandum.Project Duration: 10 months

Project No. 2: Sensitization, Education and Screening for Cervical Breast Cancer

Project Location: Bui Division of the North West Region of Cameroon, targeting the Kumbo community notably

Project Duration: 01 month

Project No. 3: Education on Menstrual Hygiene and Teenage Pregnancy Project Location: Bambalang subdivision, North West Region Cameroon **Project Duration:** 01 months

HIGHLIGHTS OF MAJOR ACCOMPLISHMENTS

COMMUNITY SCREENING ACTIVITIES

Though this was mainstreamed in all activities, there were particular areas where VAHA carried out massive community screening and sensitization through the designing printing and dissemination of human rights flyers and posters, radio talks, interactive educative sessions in communities, conferences and symposiums. The following activities were carried out within the different projects as follows:

High Blood Pressure Screening

This project is aimed at raising awareness on the causes and consequences of high blood pressure; providing information on how to pre-vent high blood pressure and related complications; encouraging adults to check their blood pressure and to follow the advice of healthcare professionals and making blood pressure measurement affordable to all.



Cervical Cancer Screening

This project has been designed to increase access of low-income women to cervical/breast cancer screening and education campaigns so as to promote early diagnoses amongst this class of people for

better management. Over 350 women benefited from VAHA' S free screening program organized in Banso community in the North Region.



Diabetes and blood pressure Screening

Considering the rise in the prevalence of complications arising from diabetes due to late diagnosis, we run a diabetes screening program to increase the number of people who live well with diabetes and effectively manage their disease thereby preventing or delaying complications and adding quality to life. Over 100new diabetic cases and 200new hypertensive cases have been identified through this initiative and these patients are now receiving care at their community health centers.





AWARENESS RAISING ACTIVTIES

VAHA held interactive radio talks over the Balikumbat Community Radio (BADO) in Balikumbat subdivision on diabetes and high blood pressure and created public awareness on the effects of chronic diseases and associated risk factors. We also carried out awareness raising programs amongst women groups through which women benefited from our free education on nutrition and healthy eating.



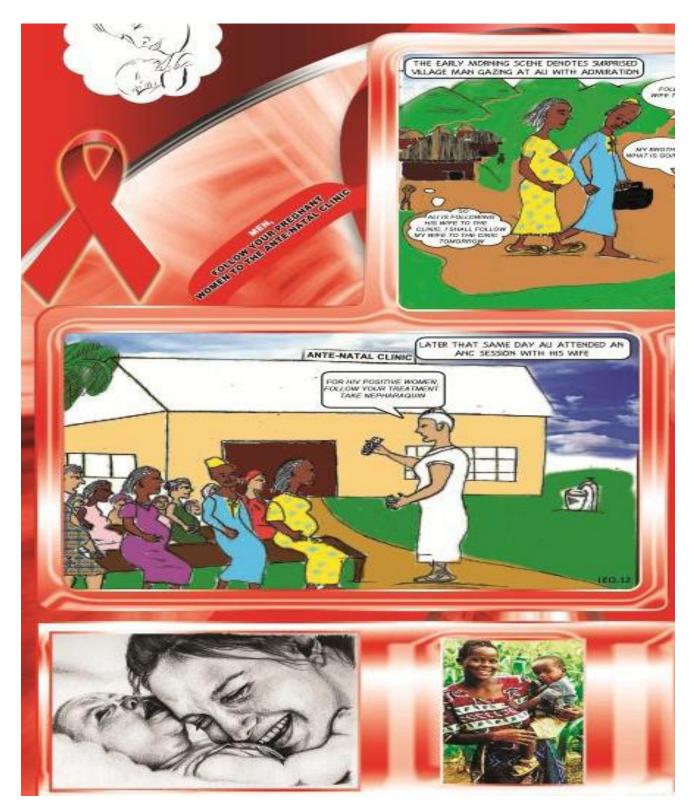
Education on Diabetes, High Blood Pressure and Kidney Disease

Owing to the current rise in the prevalence of Diabetes, high blood pressure, chronic kidney disease and prostate cancer in Cameroon, Value Health Africa has initiated a program aimed at increasing awareness and knowledge of the seriousness of these diseases, and their associated risk factors, one of which is the mass community education campaign.



CHAPTER FOUR:

DEPARTMENT TWO SEXUAL REPRODUCTIVE HEALTH PROGRAM



INTRODUCTION

The Sexual and Reproductive Health Program is one of the three areas that make up the Programs departments of VAHA. Within the framework of VAHA's Vision and Mission, this program is designed to contribute its expertise and resources in conjunction with other Program Areas to enable VAHA provide a holistic support package to the entire target beneficiaries and communities especially in the project areas of cervical cancer and breast screening campaign activities for women in rural communities of the North West Region of Cameroon.

Goal of the Program: Creating awareness in rural communities on proper SRH practices for women and young girls and assisting these Local Communities Overcome their Health Challenges.

In order to meet this goal, the following systematic strategies are duly employed:

- Awareness Raising
- Capacity Building
- Care and Support
- Advocacy and Networking (Cross-cutting)
- -Treatment literacy

Concomitantly, the program has been able to identify and establish partnerships and networks with health centers, local and traditional rulers and carried out a series of awareness building campaigns and projects, while working closely with the Value Health Institute of Research. The program implemented activities within target communities of the North West Region; specifically Bui divisions.

ACTIVITIES CARRIED OUT

AWARENESS RAISING

Activities carried out in this aspect were geared towards raising public awareness on HIV/AIDS, the use of modern contraceptives such as male / female condoms and lubricants, and the proper use of LLINs, home management of uncomplicated malaria and the use of intermittent preventive treatment, etc. the program, employed the use of Community Volunteers, CBOs, Chiefs of Health areas and Field Agents as actors of change to raise public awareness on these thematic issues. Activities carried out here include:

aising awareness on Menstrual Hygiene and Teenage Pregnancy: Following a research conducted by Value Health Institute of Research, it was realized that 90% of rural women do not practice menstrual hygiene management. VAHA in this regard carries out education campaigns in these rural communities, providing intensive awareness on the importance of menstrual hygiene in addition to providing entrepreneurship skills on homemade sanitary pads.

CHAPTER FIVE DIFFICULTIES / CHALLENGES FACED

Few challenges and improvised solutions were eminent this year as follows:

1. Lack of sufficient financial and material resources: This is the most pressing and difficult challenge faced by the organization given that most of our community interventions seemed to stall due to lack of sources of financial as well as human resources. Many people in the Rural Community have developed interest in our interventions but it is difficult to meet up with these demands given the situation mentioned above.

2. Heavy and prolonged rainfall that disturbed activities: This had a serious effect on most of the activities; especially the community trainings and screenings in target communities. Santa sub division and the workshops on revision of laws and documentation with the traditional councils in Nkambe and Misaje; programmed in the heart of the rainy season. Most community trainings were also postponed by CVs, and carried out on unplanned days since mobilization was rendered difficult by the heavy rains. The heavy rainfalls also rendered movement to the communities' difficult since most of the roads were broken.

3. Preference for immediate financial and material benefits to knowledge by most community members: Most community members expected direct support in the form of money or material needs than the knowledge from the trainings and other awareness raising activities; which to most of them was not a pressing need. However, those who attended the trainings and awareness raising meetings gave feedback in their communities which disseminated the need for such trainings to other community members.

4. **Communication Problem:** This was also a barrier that hampered the exercise since most of the participants could not express themselves in any of Cameroon's official languages and as such, firsthand information could not be gotten

5. The absence of a published Annual Activity Plan for community interventions: The nonavailability of a consistent plan of community interventions was very challenging, given that the organization is still in its start up phase, thereby making it difficult for activities to be programmed. To this effect, activities were only disclosed by way of mouth and phone calls to target communities as well as the community health volunteers.

6. **High illiteracy rate:** Majority of the participants especially in Alabukam, Mendakwe and Nkwen rural could not read and write which increases the work load on the team. This is because the team had to spend time trying to fill in the questionnaires for them.

CHAPTER SIX

GENERAL LESSONS LEARNED / BEST PRACTICES/ IMPACTS, RECOMMENDATIONS AND CONCLUSION.

6.1 GENERAL LESSONS LEARNED

Using a community participatory approach was realized to be most effective as most of our project interventions contextualized and involved all our target beneficiaries in the entire process. Working in close collaboration with government technical services and other community based associations' ensured effective coordination and supervision of project activities.

6.2 IMPACT ON BENEFICIARIES, COMMUNITIES & LOCAL GOVERNMENT

1. Early Diagnosis: There was also an increase in the number of cases diagnosed at very early stages who have commenced treatment in urban facilities and this has pushed many more people who couldn't take part in the campaign to self-request for blood pressure and fasting blood glucose at nearby community health centers; thereby increasing participation of community with their available health centers.

2. Policy advocacy: Community research findings compiled by Value health institute of research was presented at the Cameroon Health Research Forum, for the adoption of better health policies around non-communicable diseases.

3. Improvement in community feeding habit: After the community awareness and sensitization programs it was evaluated that there has been a drop in salt intake and an improvement in feeding habits. In addition, there have always an improvement in knowledge with regards to certain risk factors associated to these diseases alongside their preventive measures.

6.3 GENERAL RECOMMENDATIONS

Other commune communities should be targeted and reached with **VAHAs** programs for greater impact to be attained, especially community screening campaigns which cuts across all the other programs. Village Development and Cultural Associations should be targeted as key partners in carrying out activities within the various programs of **VAHA** as this will facilitate community ownership and sustainability of projects and results. There is greater need for the government to be more engaged in the projects as their participation will serve as a strong foundation for the sustainability of these projects to be realized

6.4 CONCLUSION

With regards to the fact that, VAHA is still a start up organization, it could be termed a successful and an out-standing organization this year, following the number of projects implemented and the beneficiaries reached. 94% of activities planned were actually realized even though we never had any international funding. In order for VAHA to continue to be the seed of change in Cameroon and Africa at large, it is imperative for her to make more partnerships at the community, national and international levels. It is for this said reason that VAHA is looking forward to making new partnerships with interested stake holders.