# Cameroon Townhall for Healthcare Professionals

## Meeting Minutes, January 27, 2024

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**Host:** Cameroon Townhall for Healthcare Professionals

**Date:** January 27, 2024

**Chair:** Dr. Munoh Kenne Foma

**Co-Moderators:** Dr. Bryan Tegomoh, Elvis Ndansi

**Guest Speakers:** Elvis Ndansi, MSN, MPH, Co-moderator, Cameroon Town Hall for Healthcare Professionals; lead for the Giveback Project; Dr. Bryan Tegomoh, MD, MPH, Co-moderator, Cameroon Town Hall; presented the draft reporting platform

**Distinguished Guests:** Dr. Samuel Ndinjiakat, US-based clinician who runs a hospital in Cameroon and sits on the Ministry of Public Health's diaspora committee, A young scientist supporting a master's student's research in Cameroon, A professor who sent his message by chat while boarding a flight

**Title: The Giveback Project: Presentation of the Concept Note and Discussion**

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**Agenda Items:**

1. Welcome and week's highlights in public health
2. Update on the disrupted previous session
3. Presentation of the Giveback Project concept note by Elvis Ndansi
4. Demonstration of the draft project reporting platform by Dr. Bryan Tegomoh
5. Comments by the Chair, Dr. Munoh Kenne Foma
6. Discussion and Q&A
7. Closing remarks

**Opening Remarks:**

- Dr. Tegomoh welcomed participants and noted low attendance because Cameroon was playing Nigeria in the Africa Cup of Nations that afternoon (23 participants against about 160 before the previous session was disrupted).
- Elvis Ndansi said the week's main news was Cameroon becoming one of the first countries to add the malaria vaccine to routine immunization, while anti-vaccine messages were spreading and health experts needed to communicate on the

same channels. The Chair said Dr. Boghuma Titanji would speak on the vaccine at the town hall on February 24 and had already shared a short message in English and Pidgin.

- Dr. Samuel Ndinjiakat, back after his mother's death in Cameroon, said he had stopped everything to read about the malaria vaccine; the moderators offered condolences.
- Dr. Tegomoh announced that from 2024 every session would have minutes and a policy briefing, posted with the YouTube link on the town hall website then under development.

**Presentation Points:**

Presentation by Elvis Ndansi: "The Giveback Project: Concept Note"

**1. Why a Giveback Project:**

Elvis Ndansi apologised for the previous session, which hackers had disrupted by taking over the slides, and said security gaps had been found and closed. He said that after almost three years of sessions, the town hall (about 2,350 members) wanted each member to do something significant for health in their village, meaning where they were born, grew up or identify with, between now and 2029. The project belongs to all members, at home and in the diaspora.

**2. Needs assessment and proposal:**

Members will receive a simple needs assessment template to use with the village nurse, doctor or health committee, or they may assess needs informally. A short project proposal template will help them describe the project and approach friends, colleagues, employers, councils or associations for support. Members are encouraged to contribute first themselves, and the project team will provide fundraising materials and support.

**3. Project categories:**

Projects can be infrastructure (building or renovating a health centre), capacity building (for example a midwife training village midwives in person or online, with time and costs counted), equipment donation, medical missions such as glaucoma or cataract screening, improving access for vulnerable groups, health education such as promoting vaccine uptake, and partnerships between diaspora and local stakeholders. Professionals working in Cameroon can take part by supporting their own village, and the village is a starting point, not a limit.

**4. Implementation and monitoring:**

Projects should be planned and carried out with the local health centre and community leaders, who also monitor them. A local person should be named to follow progress and give feedback, and each report should state projected or immediate impact so the town hall can add up lives reached and money spent each year and over five years. Projects already under way can be reported.

**5. Recognition and vetting:**

After a report is submitted, members can share an automatic summary on social media. A vetting committee of one or two people per region will call the local contact named in the report to confirm the work. Only then will the member receive a recognition certificate signed by the Minister of Public Health and the Chair of the town hall. Members may choose to keep their project private.

**6. Timeline and coordination:**

The project launches in January 2024 and runs five years to 2029, with yearly impact reviews and a final analysis. It will be coordinated with the Ministry of Public Health's committee on cooperation with the diaspora, and volunteers are needed to run it. He said this could become a model for other countries' diasporas.

**7. Draft reporting platform:**

Dr. Tegomoh demonstrated a draft form, then hosted on GitHub and to move to the town hall website, using the example of donating bed nets to Bali district. It records project name and category, village, a description of up to 250 words, number of beneficiaries, estimated cost, up to 10 photos, beneficiary institution and a local contact phone number, and the submitter's details, then shows a summary before submission. A downloadable PDF summary was planned. The website would also hold minutes, policy briefings, slides and recordings.

**Discussions and Q&A Session:**

- **Chair's comments** Dr. Foma said members choose what to do and where (a village, a city, or a disease such as sickle cell, breast cancer or heart disease), while the town hall and the Ministry's diaspora committee help them get things done in Cameroon. He praised the speed with which the idea had been turned into a working tool.
- **Dr. Ndinjiakat: comment and question on existing projects** He said he had argued around 2010 on a diaspora email group that everyone should do something in their home area, which led to a foundation working with the Prime Minister's office and a hospital that now sees about 400 patients a month. He said having proposal guidance and ministry backing will save others the struggle he faced, and that

coordination avoids duplication between nearby projects. His question on existing projects had been answered: they can be reported, including new contributions to them.

- **A young scientist: how can he get reagents to a master's student in Cameroon who needs them for DNA extraction and sequencing before a September defence?** Elvis Ndansi said supporting students counts as giving back and asked anyone able to help ship reagents to contact him. Dr. Ndinjiakat said his group had shipped a container three months earlier and could include items if told in advance, and reported that Cameroon had removed taxes on imported medical equipment (an exemption that had been due to expire on December 31, 2023). Dr. Tegomoh offered to connect him with the person in charge of research grants at the Ministry of Public Health.
- **A professor, by chat** He said the diaspora already gives back in many small, scattered ways and the platform is a chance to bring those efforts together for greater impact.
- **A participant in the chat: must the project be in my own village?** Elvis Ndansi said no: the village was used to give the project an emotional anchor, but a project anywhere in Cameroon counts. Non-health professionals who want to support health in their village can also take part.

**Call to Action and Closing:**

- The Chair said it is time to ask what we have done for our country rather than only complain, citing gaps such as no training of infectious disease specialists or hematologists in Cameroon, limited blood products, and the lack of a situational analysis on sickle cell disease. He said the town hall does not ask for or manage anyone's money but helps projects go through and be verified, and had already helped diaspora members obtain permission to open health centres. He joined from an oncology meeting in Washington, DC.
- Dr. Tegomoh said there is power in unity.
- Elvis Ndansi closed the session early for the match. No parking lot discussion was held.

**Next Meeting**

In two weeks; a session on the malaria vaccine with Dr. Boghuma Titanji was planned for February 24, 2024.

**Recording:** https://www.youtube.com/watch?v=KN61clqFGxI

**Submitted by:** Co-Moderators, Cameroon Townhall for Healthcare Professionals