Policy Briefing:

Strengthening Cameroon's Health System: Lessons from the WHO Building Blocks

---

Overview:

This policy briefing synthesizes key insights from the Cameroon Townhall for Healthcare Professionals meeting held on May 18, 2024 (101st edition), focusing on the theme "Cameroon's Health Ecosystem through the WHO Framework for Health System Strengthening," presented by Dr. Bryan Tegomoh.

Context:

Cameroon holds unspent funds from the COVID-19 period earmarked for health system strengthening. The session reviewed the system against the WHO's six building blocks and gathered the views of diaspora and in-country professionals on where effort should go first.

Key Issues:

1. **Financing and dependency:** Health spending was put at under 4%, far from the 15% Abuja commitment. Care is largely paid out of pocket, only about 2% of people have private insurance, and key commodities depend on the Global Fund.
2. **Supply chain:** Weak demand forecasting, procurement, warehousing and distribution, unpaid suppliers at the national procurement agency, and donated medicines held at port awaiting duty waivers.
3. **Workforce:** Shortages and urban concentration of staff, brain drain, poor incentives, and training of doctors without the auxiliary staff they need. Community health workers lack legal status.
4. **Health information:** Fragmented, largely paper based data, limited analytic capacity, and slow delivery of the 2020 to 2024 National Digital Health Strategic Plan.
5. **Governance, trust and politics:** Low public trust in how taxes are used, health treated as the business of the Ministry alone, and limited political will.

Discussion Highlights:

- Participants agreed governance and financing are linked: new taxes will not be accepted without transparency.
- Proposals included a diaspora health fund drawing on remittances and taxes on alcohol and luxury goods.
- Speakers called for community health workers to be given legal status and a stronger preventive and primary care focus.
- Barriers to diaspora engagement were raised: dual nationality, visas and money transfer rules.
- Communities are already funding facilities and paying staff through village health committees.

Recommendations:

- **Raise and protect health financing:** MINSANTE and the Ministry of Finance should publish a costed path towards the Abuja 15% target and report health spending openly. First step: publish how the remaining COVID-era health system strengthening funds are allocated across the six building blocks.
- **Give community health workers legal status:** MINSANTE should define the status, scope of practice and protection of community health workers, including the right to carry and give approved medicines, so that people living far from facilities are reached. First step: a ministerial text recognising them, shared with regional delegations and security services.
- **Fix procurement and distribution:** MINSANTE, the national procurement agency and partners should clear supplier arrears, improve demand forecasting and set fast-track customs clearance for donated medicines. First step: an audit of arrears and a joint MINSANTE and Ministry of Finance protocol for duty waivers.
- **Deliver the digital health plan:** MINSANTE should report on the 2020 to 2024 National Digital Health Strategic Plan and move district and hospital records from registers to electronic systems, drawing on diaspora data and surveillance specialists. First step: a status review of the plan and a pilot in one region.
- **Make diaspora engagement easier:** The ministerial committee for diaspora engagement and the Ministry of External Relations should complete the interim identification for diaspora health professionals and simplify transfers for registered health projects. First step: share the town hall survey results with the committee.
- **Work across sectors:** MINSANTE should involve the ministries of finance, women's affairs and external relations in health priorities, with a high-level coordinating body for malaria as a test case.

Next Steps: The town hall will deploy its participant survey and share results; future sessions will take each building block in turn, starting with health financing with a specialist speaker. The next session, on liver cancer, was set for two weeks later.

Conclusion: Participants agreed that Cameroon has much of the structure a strong system needs, but financing, supply chain, workforce and data gaps hold it back, and that trust and governance shape all of them. Small, concrete steps within reach, backed by sustained advocacy, are the town hall's chosen route.

Prepared by the Co-Moderators, Cameroon Townhall for Healthcare Professionals, from the session of May 18, 2024. Recording: https://www.youtube.com/watch?v=ylQM8cWNPp8