Policy Briefing:

Policy Briefing: Health Care in Conflict Zones, Lessons from Bamenda Regional Hospital

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Overview:

This policy briefing synthesizes key insights from the Cameroon Townhall for Healthcare Professionals meeting held on May 20, 2023, focusing on the theme "Health Care in Conflict Zones: Bamenda Regional Hospital," presented by Dr. Denis Nsame Nforniwe, Director of Bamenda Regional Hospital.

Context:

Bamenda Regional Hospital serves more than 2 million people in the North West Region, where the armed conflict since 2016 has displaced people, threatened staff, and brought gunshot injuries, trauma and gender-based violence. COVID-19 added to the strain. The hospital kept operating through performance-based financing, local recruitment and community support, while carrying large unpaid bills.

Key Issues:

1. **Staff shortages and safety:** Only 156 of 519 staff are state employed. Transferred staff often do not report, and staff face kidnapping, threats and lockdown days.
2. **Unpaid bills:** 82 million FCFA in performance-based financing remained unpaid when the World Bank programme ended, and care for poor and vulnerable patients left over 58 million FCFA unpaid in 2022.
3. **Conflict-related burden:** Gunshot wounds were a leading cause of death, with 171 gender-based violence cases and 271 mental health cases in one quarter.
4. **Gaps in services:** There is no peritoneal or paediatric dialysis supply, no strong hepatitis programme, limited oncology, and an unreliable power supply.
5. **UHC implementation:** Dialysis session fees were removed, but patients still pay for workups, blood and vascular access, and payment routes for hospital claims were not yet defined.

Discussion Highlights:

- Neutrality in treating all patients has protected staff and the hospital.
- Transparent reporting of activity and finances built trust with donors and families.

- Diaspora specialists can support case discussions, training and equipment.
- Decentralisation to the Regional Assembly may allow performance-based staffing.
- Sepsis and antibiotic misuse need hospital-level stewardship.

Recommendations:

- **Settle arrears and protect cash flow:** MINSANTE and partners should pay the 82 million FCFA in outstanding PBF subsidies and set up a fund to reimburse care given to poor and vulnerable patients. First step: a reconciliation of unpaid claims for regional hospitals in the North West and South West.
- **Staff hospitals in conflict regions:** MINSANTE and the Regional Assembly should allow regional hospitals to recruit directly for posts in conflict regions, with hardship allowances and safe staff transport, and track whether transferred staff report. First step: publish vacancies for general practitioners and specialised nurses at Bamenda Regional Hospital.
- **Complete kidney care under UHC:** MINSANTE should extend UHC cover to dialysis workups, blood and vascular access, and add paediatric haemodialysis and peritoneal dialysis kits to supply contracts. First step: clarify how dialysis claims from regional hospitals are paid.
- **Strengthen trauma, mental health and GBV services:** Regional delegations, the hospital and partners such as Doctors of the World should build a full mental health clinic, keep GBV hotlines and legal support, and complete the planned emergency centre. First step: confirm FEICOM funding and a timeline for the emergency centre.
- **Start hepatitis B and antibiotic stewardship programmes:** MINSANTE should set up a national hepatitis B programme with subsidised testing and tenofovir, building on registries such as Bamenda's, and support hospital antibiotic stewardship committees. First step: a monthly linkage-to-care register shared with the regional delegation.
- **Channel diaspora support:** Diaspora associations and the Town Hall should adopt costed hospital projects (solar power, laboratory, outpatient department) and set up a roster of specialists for remote case discussion. First step: circulate the hospital's project list to Town Hall members.

Next Steps: Participants offered support on critical care, hepatitis B and diagnostics. The next session was set for two weeks later on dialysis and the role of NGOs.

Conclusion: Bamenda Regional Hospital showed that a public hospital can keep working and improving during conflict through strong leadership, neutrality and

transparency. Paying arrears, staffing, and completing UHC and specialist services would let it serve its population better.

Prepared by the Co-Moderators, Cameroon Townhall for Healthcare Professionals, from the session of May 20, 2023. Recording: https://www.youtube.com/watch?v=VbWHiXQsJx4