Policy Briefing:

Preparing Cameroon's Health System for Artificial Intelligence

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Overview:

This policy brief synthesises key insights from the Cameroon Town Hall for Healthcare Professionals meeting held on November 16, 2024 (113th session), a special edition on 'AI and the Future of Health Care' moderated by Dr. Bryan Tegomoh.

Context:

AI tools for documentation, diagnosis, imaging, laboratory work and research are spreading quickly. Cameroon has a National Digital Health Strategic Plan, but participants found no mention of high performance computing or data centres, most clinical records are handwritten, and power and internet remain unreliable in rural areas.

Key Issues:

1. **Data foundations:** Handwritten notes and limited electronic records mean little local data exists to train or validate tools.
2. **Infrastructure:** Unstable electricity, weak connectivity and no national computing capacity limit deployment.
3. **Privacy and security:** There is no clear guidance on entering patient data into AI tools, on consent for AI scribes, or on where health data is hosted.
4. **Safety and bias:** Tools trained on foreign data may perform poorly on local diseases such as malaria, and generative models can produce confident errors.
5. **Dual use and governance:** Open biological design tools could be misused, and global and national regulation is still forming.

Discussion Highlights:

- Generative AI can deliver value in Cameroon before a national EMR exists, for example through WhatsApp based tools.
- Behaviour change and trust among providers are bigger barriers than technology.
- Regional cooperation could share computing and data costs.
- Every deployment should be tested against defined metrics with a control group.

- Clinicians must keep reviewing AI output and retain core skills.

Recommendations:

- **Issue national guidance on AI use in health:** MINSANTE, with the Ministry of Posts and Telecommunications, should issue interim guidance on acceptable clinical AI use, patient consent for AI scribes, de-identification, and accountability for AI assisted decisions. First step: a technical working group including clinicians, data scientists and diaspora experts.
- **Digitise records as the base for AI:** MINSANTE and hospitals should accelerate electronic records and pilot AI assisted digitisation of handwritten notes in selected regional hospitals, with human review of accuracy.
- **Protect health data:** Government should enforce data protection rules for health data and decide, through the digital health plan, on local, regional or foreign hosting, with security standards for any vendor.
- **Require local validation and controlled pilots:** Hospitals and partners should test AI tools on Cameroonian data and conditions (for example malaria) in controlled pilots with clear metrics before wider use, and report results.
- **Build skills and regional partnerships:** Training schools should add AI literacy to medical, nursing and public health curricula, and Cameroon should explore regional data and computing partnerships with neighbouring countries. Diaspora data scientists and clinicians can teach through town hall sessions.
- **Invest in power and connectivity:** Government and private partners should prioritise reliable electricity and internet for health facilities so that DHIS2 and future AI tools work at district level.

Next Steps: A follow up session on AI best practices across professions was proposed by a participant. The session of November 30, 2024 was cancelled for the US Thanksgiving weekend.

Conclusion: Participants agreed that AI offers Cameroon a chance to leapfrog gaps in documentation, diagnosis and training, but only with sound data, security, local validation and human oversight. Starting with small, well measured pilots was seen as the practical first step.

Prepared by the Co-Moderators, Cameroon Townhall for Healthcare Professionals, from the session of November 16, 2024. Recording: https://www.youtube.com/watch?v=QPDh66XS9Y4