Fighting the COVID-19 outbreak in Cameroon: Risk mitigation challenges

By Dr. Cholite Siri

The new coronavirus, COVID-19, was first encountered in November 2019. It has gone on to affect over 1,000,000 people in over 209 countries, areas or territories around the world, causing more than 62,000 deaths as of April 8, 2020 (WHO).

On the same date, Cameroon's active cases had shot up to 630, causing nine deaths within two weeks following the first confirmed case, according to covidvisualizer.com. The pandemic is growing exponentially and more lives are lost daily. Understanding the nature of this deadly infectious disease, its transmission, and working in unity to fight it, are essential if we are to cap the number of infected persons and flatten the spread curve.

The most important things we must do to fight the virus and enhance the public health system are: COVID-19 awareness, stay home, practice strict personal hygiene, disinfect surfaces, and use face masks. These risk-mitigating measures significantly slow the spread of the virus. These measures save lives and free up medical resources for those who need them most. Unfortunately, in a resource-constrained country like Cameroon, even though the number of confirmed cases is soaring daily, citizen compliance with government rules and guidelines can prove problematic—especially if we are confused about the government’s actual COVID-19 policies and the related citizen responsibilities.

Social media chatrooms and discussion within community circles are awash with lies, false narratives, and half-truths about COVID-19 diagnosis and treatment. My, and in this article is to enhance public understanding of this virus and its impact on Cameroon for effectively confronting the COVID-19 pandemic.

Alarming Misinformation

In Cameroon, as in many Sub-Saharan African countries, misinformation people claim that dark skin presents a natural immunity to COVID-19. Also, some are that Chloroquine intake rids the body of the virus. Further, some have endorsed the use of chloroquine tablets with lemon and bicarbonate cured infected persons. On top of that, there is also a false narrative that the virus cannot be transmitted among humans. All these narratives are starkly false, and even deadly. They breed complacency among citizens, undermine the government’s measures, and enhance the spread of COVID-19.

The public needs credible information from Government and trusted national institutions and support organizations to inform and educate the public about the virus, in a way that comply with Government-mandated measures. Authorities should inform citizens in a way that influence public behaviour in ways that inhibit the spread of the disease. False information, on the other hand, may cause the disease to spread even more rapidly and widely, exposing themselves and their communities to more risks.

A study released in The Globe and Mail reported that “[a]t least two Nigerians are in hospital after being poisoned by an unknown substance in a country where many believe that the virus is false. Medical misinformation spread to the public can result in terrible decisions and actions. And such actions could lead to severe consequences and impact the health of infected and injured persons may spread the virus unchecked.

What we know

Although we need more data in order to fully understand the behaviour of COVID-19, we already know it is a severe respiratory disease that must be tackled with urgency, seriousness, and science-backed measures by all government levels and citizens. In Cameroon, the virus is handled right, most people will not die. We do not know that COVID-19 is spread via human touch, and by virus being left on objects or surfaces for prolonged periods. Table top Labs report that the virus infects people—the surfaces later being touched by other people, who then touch their own faces, allowing the virus to come in through the mouth, nose, and eyes. We know that the virus also spreads through respiratory droplets (coughing, sneezing, being out even just talking and breathing) from infected persons. The challenge of containing the virus is made all the more difficult as some persons are infected over long time (a week or more) before they show symptoms—and some never manifest any symptoms at all! Thus, infected persons may spread the virus before they show any signs, or without ever showing signs of infection. Anyone — no matter the race, gender, colour, nationality, or age — can be infected with COVID-19.

For instance, a newborn baby was diagnosed with COVID-19 in the UK on 30 March 2020, reported The Telegraph. As of March 31, 2020, there was no treatment, cure or vaccine for COVID-19. Therefore, citizens have to follow the guidelines provided by WHO and the Government of Cameroon: social distancing, frequent washing of hands, avoiding close contact with hands, and self-quarantine. Importantly, getting tested is crucial to knowing the state of infection; it will help us to ramp up additional targeted measures to curb the pandemic.

What we can do

The public needs simple, clear, and regular information from the Government and other competent organisations. Fighting COVID-19 is a collective battle. While citizens are expected to play their part, the Government’s role is to create an enabling environment. Actions such as contact tracing, patient surveillance, free testing, free treatment, quarantine follow-ups, and economic support to those most affected by the pandemic can create a conducive environment for fighting the virus. The Ministry of Public Health has issued several communications to educate the public about COVID-19 and to offer advice on mitigating risk.

However, it’s not enough to issue a press statement or a written communication listing the measures the public should take in stopping the spread of the disease. It’s the responsibility of many Cameroonian, especially those in rural communities, rely on information from friends and family members. To that end, the Government of Cameroon and other organisations have to make use of all channels and forms of communication to improve information flow to citizens. If people don’t know how to be one free, they don’t know how to use that information. Similarly, people are not likely to act on the language in the language they best understand. The language should be French, English, Pidgin, or a specific local dialect accommodating community practice.

On another front, local examples have to be used so that the local audience can relate to them. Implementing WHO and national guidelines can be challenging in Cameroon. The average number of persons in a household in Douala and Yaounde is about four to seven—and in some cases, they live in a very confined spaces. Many areas lack drinking water, so lack of easily available water for washing hands. Many families living in poverty have faced daunting challenges to buy soap, hand sanitiser, and other care goods. Many families survive on daily street sales to feed and support themselves. For these reasons, the Government must identify appropriate local situations and take steps to build public trust and facilitate public compliance with the WHO guidelines and national measures.

On March 29, 2020, Human Rights Watch published a seminal article about ensuring medical care and reducing detenue population at overcrowded detention facilities and shelters for displaced people. The article, titled “Libya: Detainees at Risk of Coronavirus Spread,” encouraged governments around the world to take concrete steps in these directions. Many Governments have taken appropriate actions, and they are worth emulating in Cameroon. On 27 March 2020, Ethiopia’s president released over 4,000 prisoners to prevent overcrowding in prisons and to help contain the spread of the coronavirus, reported Democracy Now. Earlier in March, BBC reported the Iranian Government temporarily freed 54,000 prisoners to combat spread. On April 1, 2020, President Abdelmadjid Tebboune of Algeria pardoned close to 5,000 detainees who have 18 months or less to serve in their sentences, noted BBC.

Similarly, the Government of Cameroon needs to take aggressive and urgent action to activate its health policies and mobilize all sectors of society in the most efficient ways so as to minimize the spread of COVID-19 and save lives. A first step would be to establish criteria for such interventions including involvement of all age groups, older persons, persons with underlying health conditions, and persons with minor offenses. Unless the Government takes this kind of action, thousands more will be at risk.

Government preparedness

So far, Cameroon’s response to the pandemic is weak. The country needs to invest in a robust health systems preparedness and build resilience capacity to fend off biosecurity threats such as COVID-19. Recent events in Cameroon emphasize this need. On 28 March 2020, patients and staff fled the Yaounde Central Hospital, the country’s COVID-19 epicentre, after the first confirmed case was announced. To manage the situation, the Hospital Director, Professor Pierre Fouda, announced that his hospital was just a test and in isolation. Despite his assurance, most staff and patients never returned to the hospital. Following the announcement, thousands of people flooded hospitals and pharmacies to buy protective face masks and gloves. Most likely, the number of COVID-19 patients spikes in Cameroon, there will be an acute shortage of essential health-disposals inventories that could increase public vulnerability and spread the virus. The increasing number of COVID-19 patients will rapidly overwhelm Cameroon’s health system and resources. The existing facilities for a small number of medical doctors, nurses, and support staff. WHO recommends that countries maintain at least one doctor per 10,000 inhabitants, they estimated Cameroon has one doctor per 40,000 inhabitants. For a population of 24 million, Cameroon doctors are an intractable obstacle to a surge in medical doctors. A surge in COVID-19 patients would overwhelm the country’s health system within weeks and leave a smaller total number of doctors at expositional increase of infections in Cameroon. The death toll would be horrible.

Follow science, not fiction

The main lesson about COVID-19 spreads the virus or causes health complications, if not death. False hope from evangelical preachers may lead to complacency, infections, and further untreated spread of the virus. Beyond lockdown and following WHO guidelines, the Government of Cameroon must set up multiple treatment centres across every county, recruit and deploy competent laboratory technicians, and conduct free tests to ensure that people know how to act. Testing allows the Government to gather data that is useful for large-scale decision-making and planning. For example, through testing, the Government will know which communities have infections, how many people are infected, and the growth rate of the virus. It is essential to know how far the virus has spread, it is important to determine when various restrictions on transport and other areas can be lifted. Government and citizens must be ready to lift restrictions as there are more resources, urgency, and care than for 100 confirmed cases.

Second, testing also gives citizens the belief that Government action in fighting COVID-19 is effective and requires more attention and compliance. Testing helps citizens know whether they are a danger to their family members and the general public. A citizen who has tested positive will take more seriously the doctors’ advice to stay at home, to isolate, and to wear a face mask. Indeed, for the testing of all COVID-19-positive cases, the most treatment needed is isolation and maybe some threat lozenges. Although ending a bout of infection by this complementation of treatment is crucial, the treatment of all infected have severe, life-threatening symptoms. On the other hand, if a test is negative, it clears the person to return to an un-isolated and “normal” life.

There remain many unanswered questions about COVID-19. The virus is still changing; the disease is based on personal experiences, and research from similar viruses like Severe Respiratory Syndrome (SARS-CoV) and Middle East Respiratory Syndrome (MERS-CoV). Further research is needed to address many unresolved issues about COVID-19, such as survival of the virus on surfaces, and the effects on the higher and lower population in COVID-19 reinfection. But we already know this: COVID-19 is highly contagious and has killed tens of thousands of people around the world. Cameroon must take decisive steps to confront this fast-spread disease.

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Page 11