



DoD HIV/AIDS Prevention Program Status Report:

Cameroon



BACKGROUND

Introduction/General Information

The population of Cameroon is estimated between 14 and 16 million people, with an average life expectancy of 55 years. English and French are both official languages. The literacy rate in Cameroon is estimated at 63%, distributed disproportionately between males and females. Cameroon is described as a developing nation with significant oil reserves and favorable conditions for agriculture. The primary sectors of the Cameroonian economy are agriculture, industry, and service. Annual per capita income ranges from \$600 to \$1,700.

Country HIV/AIDS Statistics and Risk Factors

HIV/AIDS prevalence estimates in Cameroon range from 8 to 12% of the population, affecting roughly 920,000 people. Identified significant risk factors include high-risk heterosexual contact with multiple partners and lack of adequate care and treatment for sexually transmitted infections (STIs).

Military HIV/AIDS Information

The Cameroonian Armed Forces (CAF) is estimated at 27,000 active-duty personnel. Because the CAF has not performed force-wide HIV testing since 1996, current prevalence rates are unavailable. It is

believed that HIV prevalence in the military significantly exceeds rates found in the civilian population.

PROPOSED PROGRAM

In June 2001, the CAF submitted a plan titled *Prevention of STI/HIV/AIDS Among Cameroon Armed Force*. Objectives outlined in the plan included:

- Behavior change,
- STI management,
- HIV infection and opportunistic infection management,
- Training for military medical personnel, and
- Sentinel surveillance to determine the prevalence of STIs within the CAF.

The behavioral change component of the plan included training designed to increase awareness of STIs while concomitantly reducing risky behaviors. The plan also noted that STI prevalence could be reduced through the use of increased testing and syndromic management.

PROGRAM RESPONSE

Contractor-Based Assistance

In August 2001, Johns Hopkins University, Baltimore, Maryland, was awarded a DHAPP contract with the goal of reducing the incidence of HIV among uniformed personnel in the CAF, police, and prison wardens. The main program components

included HIV prevention curriculum development, implementation of on-site educational and training programs for service members, establishing a VCT program, and improved HIV surveillance and treatment.

The project was begun by determining seroprevalence rates for representative samples of CAF personnel through the use of serological surveys in all military garrisons. Serological and behavioral data, the latter collected by means of knowledge, attitudes and practices surveys, were supplemented through the use of focus group discussions.



DHAPP funds were used to support anonymous blood testing as part of an HIV prevalence survey.

To implement the behavioral change communication component of its program, Johns Hopkins University created a peer educator training program that included 1,000 personnel drawn from the CAF population, 200 from the Cameroon Police, 100 Cameroon prison wardens, and approximately 600 from military families. In addition to receiving training from peer educators, military units participated in monthly health education meetings and were given access to HIV/AIDS/STI information centers located in 10 military garrisons nationwide. The centers were equipped with reference materials (e.g., books and newspaper articles on HIV/AIDS/STI, audiovisual materials, and computers with Internet access). A media campaign of HIV/AIDS prevention messages was also

conducted throughout the military that entailed distribution of pamphlets, brochures, posters, educational aids and guides, and production of a quarterly HIV/AIDS prevention program bulletin.

As a result of this effort, 5 VCT centers were created and equipped within close proximity of hospitals that previously conducted HIV testing for CAF and other uniformed service personnel. The Hopkins program also provided training for the 100 counselors assigned to the VCT and STI/HIV/AIDS information centers on counseling, care, and support techniques for AIDS patients. In addition, 50 medical personnel were trained and certified in syndromic management for STIs prior to being assigned to VCT and information centers throughout the country.



DHAPP sponsored voluntary counseling and testing centers.

Clinical Provider Training

A Fogarty HIV training grant provided support for a Cameroon Family Practice physician in a fellowship at Johns Hopkins University. It provides lectures and teaching rounds in the CAF medical facilities.

PROGRAM IMPACT

Master Trainers and Peer Educators

The program trained 951 peer educators, 51 VCT counselors, and 48 medical personnel in STI management and treatment.

Number of Troops Trained

The numbers trained among the military, police, and prison wardens total 35,450.

Potential Number of Troops Affected

The total number of troops that can be reached is 55,845, which includes military, police and prison wardens.

Voluntary Counseling and Testing (VCT)

DHAPP opened 6 VCT centers. Each contains information, counseling, and bleeding rooms; TV, VCR, and educational tapes; HIV prevention books, pamphlets, and posters from a variety of sources; 2 permanent staff for each center (counselor and laboratory technician) appointed by the Division of Military Health, and additional counselors on part-time rotation.

Laboratory Capabilities/Infrastructure

Established as part of the VCT center; see above.

Mass Awareness

DHAPP supported 4 mass awareness events, 1 each quarter (soccer match, sensitization campaign in Koutaba, HIV presentations at various workshops, and distribution of educational materials during Cameroon National AIDS week). These reached numerous civilian communities in addition to the military.



DHAPP funds sponsored sporting events, such as this one, as part of the HIV/AIDS mass awareness campaign for the CAF.