Parallel session 1: Economic evaluation

**PS 01/11**
The financial contribution of the State to the fight against the river blindness in Cameroon

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**Introduction:** In Cameroon, the river blindness is a public health problem affecting roughly 7 million people. The fight against river blindness is carried out through the Ivermectin Treatment under Community Directive strategy (ITCD). The performance of these ITCD activities depends on the financing available. The purpose of this article is to evaluate the financial contribution of the Cameroonian State to the activities of ITCD over the period 2005-2007.

**Objectives:** Evaluate the annual amount of public funds from direct State allocations starting from the central and provincial levels or of funds locally budgeted for and disbursed for the effective implementation of ITCD activities in the health districts and regions. Consider the financial contribution of the State per treated person.

**Methodology:** The data were collected by means of a questionnaire relating to the State’s financing from the technical, administrative and financial officers of the four levels of intervention of the health system: central, provincial, district and regional health. In addition to the interviews, the following public accounting books were used: budget allocation cards, debt security confirmation, expenditure authorisation slip, purchase-delivery-reception slips of goods and consumables, contracts with suppliers and service providers, cash receipts, travel and supervision expenses discharge cards, inventory cards, receipts and paid and signed invoices and annual financial reports.

**Results:** The annual financial contribution of the State rose to US$1,468,579, US$1,689,580 and US$ 1,904,396 in 2005, 2006 and 2007 respectively. However, this annual financial contribution remained stable with roughly US$0.41 per person treated during the same period. The various fields of ITCD which received State
financing are the following: the functioning of the departments, the motivation of
Community distributors and staff, production, on a national scale of communication
material (Advocacy, Social Mobilization, Communication for the change of
behaviour), training, distribution of Mectizan and the management of the side
effects, supervision, monitoring and evaluation of the ITCD activities.

Conclusion: The sustainability of the activities of ITCD still requires a lot of financial
efforts on the part of the State beyond US$41 per treated person. When the external
financing, the bulk of which comes from the African River Blindness Control
Programme (APOS) is withdrawn, the performance of the river blindness control
activities will depend on official financing.