

Data updated April 30, 2020



Cameroon

Background

Public health and social measures (PHSMs) are an important strategy to slow transmission of COVID-19 and reduce the burden on health care systems. Effective implementation of PHSMs requires public support and adherence, but they can place a significant burden on people, especially when they restrict movement or entail the closure of services. This situational analysis, based on publicly available data and a recent phone survey, aims to inform efforts in Cameroon to balance PHSMs to mitigate COVID-19 with other priorities, including public acceptance and social impacts.

Effective Implementation of Public Health and Social Measures in Cameroon: Situational Analysis

Highlights¹

Public health and social measures should respond to data about the growth of the epidemic and be implemented in a way that engages communities. Communities should be involved in helping to determine strategies for adapting measures to the local context, protecting livelihoods, and introducing appropriate relief measures to counteract the economic impact of these measures. The government should counter misinformation with appropriate risk communication and engage with communities to ensure voluntary adherence to COVID-19 response measures.

- Cameroon has one of the highest caseloads in the region. The doubling time has increased to 13 days but it is unclear whether this is due to slowing transmission or lack of testing.
- The government closed schools and limited public gatherings early in the epidemic, but has not issued a stay-at-home order. Face masks are required in public. On May 1, it announced the partial relaxation of physical distancing measures.
- While population mobility has fallen since early March, the decline has been less significant than in other countries in the region, which could potentially put populated areas at increased risk of COVID-19 infection.
- According to survey results, urban Cameroonians have high awareness of the epidemic (97%). However, a large proportion continue to hold misperceptions, with more than half believing that COVID-19 is a germ weapon created by a government. The vast majority believe that COVID will be a problem for the country but fewer see themselves as personally at high risk.
- Compared to other countries surveyed, there was low approval and trust in the government's response, and Cameroonians showed limited acceptance of PHSMs.
- It may be difficult for households to comply with some PHSMs, as the vast majority would run out of food and money within a week, particularly low-income households.
- The country has been marked by ongoing violence in the north, northwest and southwest regions which has displaced hundreds of thousands of people. This will complicate the government's ability to control the spread of disease within and across its borders. On April 30, the first confirmed case was reported in the Far North region, and cases have now been reported in all 10 regions.

ABOUT PERC

The Partnership for Evidence-Based Response to COVID-19 (PERC) is a public-private partnership that supports evidence-based measures to reduce the impact of COVID-19 on African countries. PERC member organizations are: Africa Centres for Disease Control and Prevention; Resolve to Save Lives, an initiative of Vital Strategies; the World Health Organization; the UK Public Health Rapid Support Team; and the World Economic Forum. Ipsos and Novetta Mission Analytics bring market research expertise and years of data analytic support to the partnership.

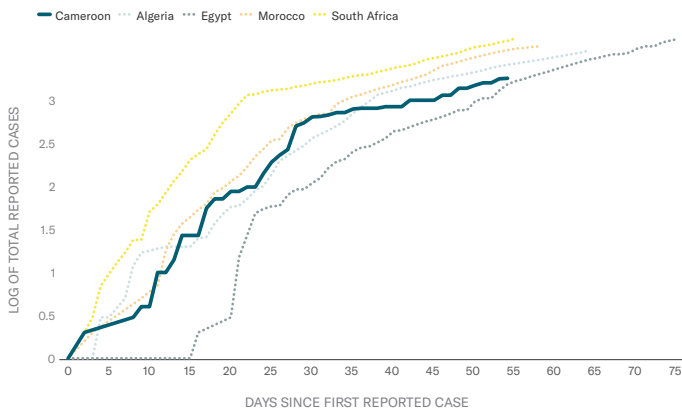
¹ This situational analysis brief is based on data from available sources as of the date of publication, and may not reflect more recent developments or data from other sources not referenced. Information about data sources available here: <https://preventepidemics.org/coronavirus/perc/data>

Disease Dynamics

CAMEROON HAS A LARGE AND GROWING COVID-19 EPIDEMIC, WITH ONE OF THE HIGHEST CASELOADS ON THE CONTINENT.

Total cases	Total deaths	Case-fatality rate (%)	Total # of days to double case count	Date of first reported case
1,832	61	3.32	13	March 7

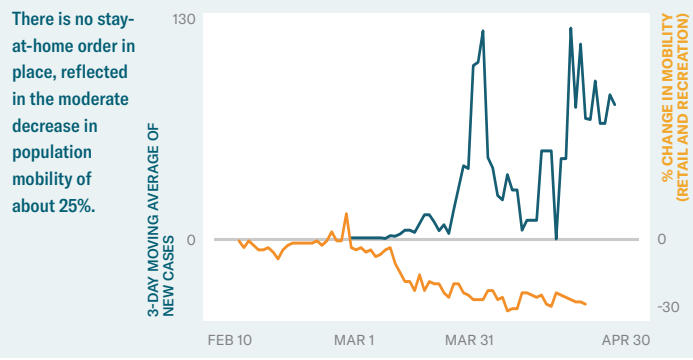
Rate of growth of caseload in Cameroon has been similar to other high-caseload countries in Africa as of April 30, 2020



- Cameroon's COVID-19 epidemic has grown at a similar pace to the other four most affected countries in the region—South Africa, Morocco, Algeria and Egypt, although recent growth in confirmed cases has been slower.
- The daily number of new reported cases has been highly variable since the beginning of the epidemic.
- As of April 30, the doubling time is 13 days. Doubling time is the number of days it took for cases to double to reach the current level. This metric can be used to estimate the recent rate of transmission, with higher doubling times indicating slower growth. In general, doubling times exceeding seven to 10 days and increasing over time suggest a slowing of the epidemic.
- If testing is deemed to be sufficient or is increasing, then changes in case counts per day can also be used to assess COVID-19 transmission. As of April 27, Cameroon had conducted 7,687 COVID-19 tests and the government was working to establish testing labs in all 10 regions of the country.

Implementation of Key PHSMs

Cameroon initiated public health campaigns and entry restrictions within a week of the first case, and then moved to close schools and limit public gatherings within two weeks.



3-day moving average of new cases and date of PHSM implementation

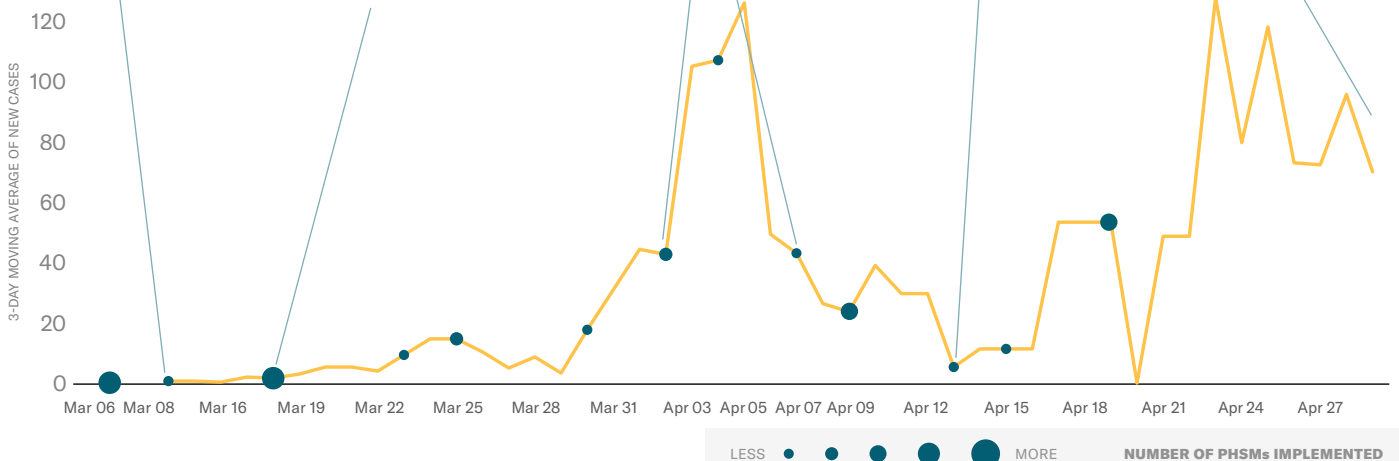
March 13: Travelers must test negative for coronavirus to obtain to obtain entry visa

March 18: Gatherings of more than 50 people prohibited; limits on maximum capacity for public transport; schools closed; curfew on bars and restaurants from 6 p.m.; all land, sea and air borders closed

April 2-7: Mass testing of households in door-to-door campaign in the city of Douala

April 13: Requirement to wear face masks in public spaces and systematic sanctioning and quarantine of those found to have breached the restriction

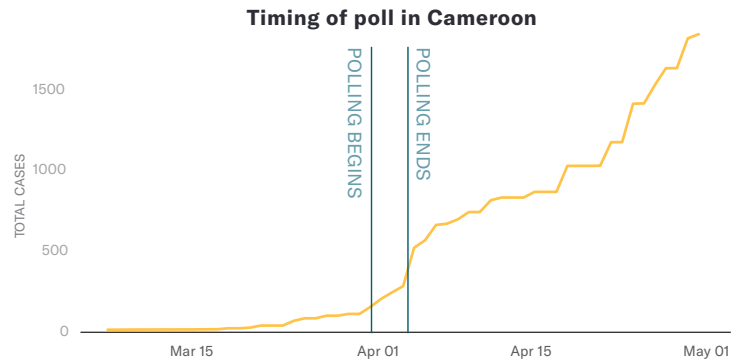
May 1: Partial relaxation of measures, including allowing access to bars, restaurants and leisure facilities after 6 p.m.



Public Reactions to COVID-19 and Related PHSMs

RESULTS FROM RECENT POLLING

Market research firm Ipsos conducted an in-person survey of 1,042 adults in Yaoundé between March 31 and April 3, 2020. At the time of polling, Cameroon had 142 to 271 confirmed COVID-19 cases.

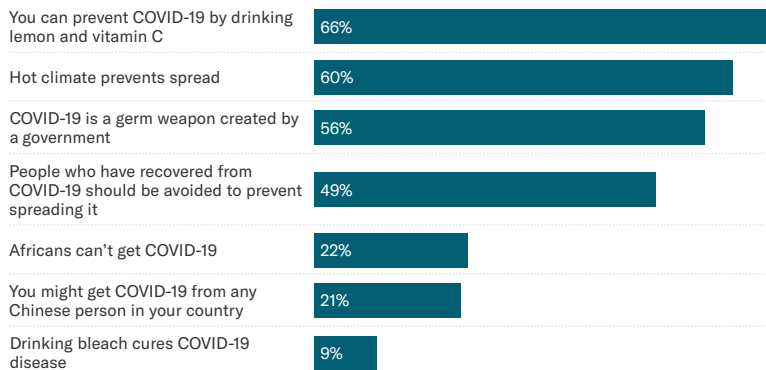


Information on COVID-19

Urban Cameroonians have high awareness of the epidemic (97%). However, a large proportion continue to hold misperceptions, including some that could offer a misplaced sense of protection (60% believe that hot climate prevents spread) or contribute to stigma (49% believe that those who have recovered should be avoided, while 21% believe that you could get it from any Chinese person in the country). Over half of respondents (56%) thought that COVID-19 was a germ weapon created by a government. Almost half of respondents (45%) said they needed more information about the disease, particularly on treatment, prevention and transmission.

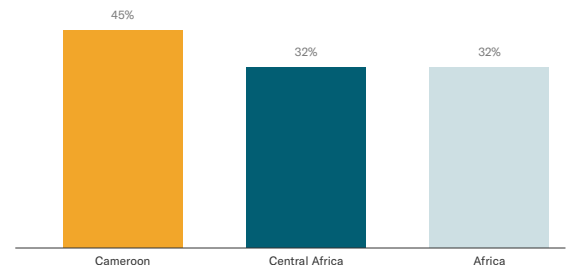
Belief in Misinformation and Rumors

Percentage believing each false statement is probably or definitely true



Demand for Information

Percentage reporting they **do not** currently have enough information about COVID-19

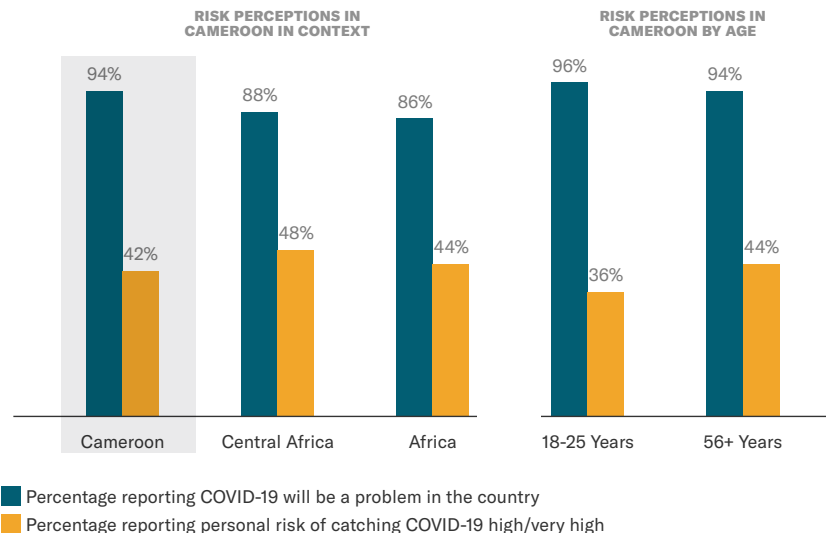


Information Needs



Risk Perceptions

While 94% of respondents reported that the virus will be a problem for the country, a much lower share (42%) perceived a high personal risk; even among older adults (ages 56+), only 44% thought they were at high risk.



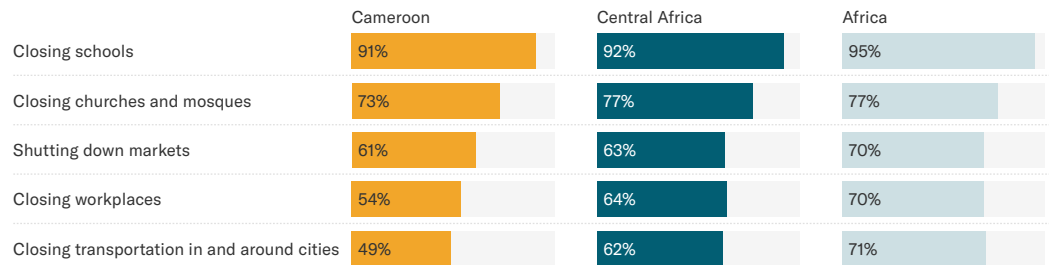
Support for Government and PHSMs

Only about half of respondents (53%) were satisfied with the government's response to date, and a similar share (55%) trust the information provided by the government on COVID-19. Doctors are a more trusted source for health information than the presidency and political leaders, but overall levels of trust in institutions are relatively low. Nonetheless, 59% of respondents felt confident they would get the help they needed if they were to fall sick.

Urban Cameroonians expressed somewhat lower support for PHSMs compared to other countries polled. For example, while 91% supported closing schools, only 49% supported closing down transport within a city and 54% supported closing workplaces.

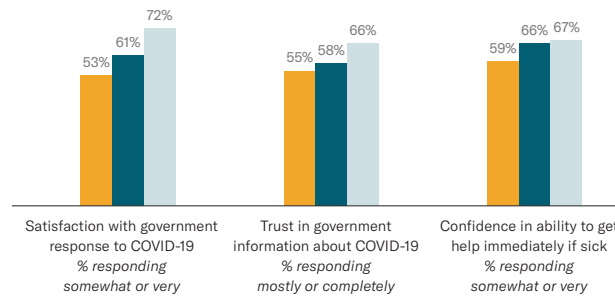
Support for PHSMs

Percentage of respondents that somewhat or strongly support



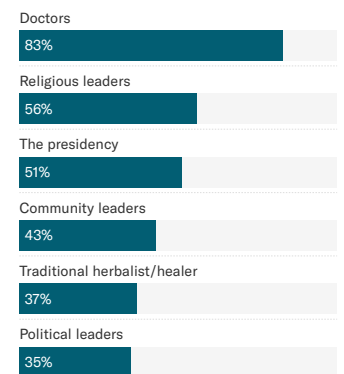
Perceptions of Government & Health System

Cameroon Central Africa Africa



Trust in Information Sources

Percentage that completely or mostly trust each source for health information



Barriers to Adherence

It may be difficult for households to comply with some measures, as a large majority would run out of food and money within a week (particularly low-income households), and only 16% of households have a separate room where they could isolate sick family members.

16%

of respondents have a separate room in the home to isolate someone with COVID-19

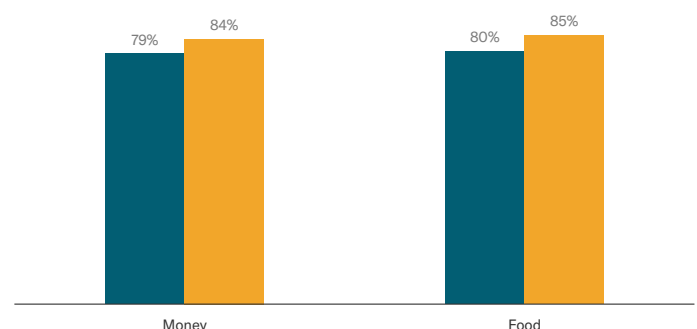
11%

of respondents in families making less than US\$100 per month have a separate room in the home to isolate someone with COVID-19

Supplies of Food & Money

Percentage who expect to run out in 1 week or less

Overall Low-income (Less than US\$100/month)



Economic and Relief Measures

Cameroon's economic outlook is affected by the growing epidemic as well as by the global downturn and fall in oil prices. The government has developed a National Preparedness and Response Plan to address the crisis and mitigate its economic impact. The presidency also launched a special solidarity fund initially endowed with 1 billion CFA francs (US\$1.6 million) to finance the plan, which will consolidate public funds and charitable contributions. The control of relief efforts has led to political battles along party lines.

- **Health care:** The preparedness and response plan projects COVID-19 health spending to reach CFA 58.7 billion (US\$100 million, or 0.44% of GDP) over the next three months.
- **Social support:** The government has suspended all transfer fees between mobile money accounts and deferred utility payments for three months for vulnerable households.

Overview of Security Incidents Related to COVID-19

A rise in unrest or insecurity—including peaceful protests as well as riots and violence by and against civilians—can affect adherence to PHSMs and serve as a warning sign of the burden such measures are imposing on the population. Cameroon has already been experiencing violence in the north, northwest and southwest regions with the displacement of hundreds of thousands of people. A number of COVID-19-related incidents have been reported since March, including complaints from Cameroonians who were either stigmatized or chased from villages because they had come from towns where COVID-19 infections had been reported. There have also been reports of violent enforcement of PHSMs by police and military forces, protests against restrictions on prayer attendance at mosques, a protest by prisoners following several COVID deaths in prisons, and anti-foreigner harassment. Violence during a food distribution organized by a footballer resulted in the deaths of several children on April 20.

INFORMATION ABOUT DATA SOURCES AVAILABLE HERE: [HTTPS://PREVENTEPIDEMICS.ORG/CORONAVIRUS/PERC/DATA](https://preventepidemics.org/coronavirus/perc/data)

