Dear Friends and Supporters,

Thank you for your support for our trip to Foumban, Cameroon. We wanted to summarize our month long outreach and let you know how things went. Overall things went very smoothly and we were able to accomplish an amazing amount with a very small budget and 2 willing and hard working women!



We arrived at the beginning of the Nguoun festival and joined with the volunteers from CEPROSCON in staffing the booth that they had set up to conduct HIV screening and prevention. We were impressed by their organization and the numbers of people who lined up publicly to undergo HIV testing. Overall 500 HIV tests were performed during the weekend of which 150 were paid for from funds that we raised here in the U.S. We also sponsored 50 more tests over the week that followed. Each person was given a syringe and a number as they

registered and waited in line to have their blood drawn. Afterwards we gave out small gift bags filled with soap, toothpaste, toothbrushes, pens, and condoms that seemed to be very much appreciated by the recipients. Each person was then seen by a counselor in a private booth who discussed each person's risk factors and strategies for prevention in the language in which they were most comfortable.

Raphiatou spent the next six days giving HIV test results to over 250 of the persons who had been tested during the festival. Concurrently, Patty did medical consultations utilizing a hospital exam room provided by Dr. Inoussa, medical director of the Kings Hospital. Each day more and more people came for medical care, so much so that we had to limit the number of people that were seen each day. The most common diagnoses were hypertension, gastoesophageal





reflux, arthritis, muscle

aches and pains, infections, vision problems, and dental abscesses. We underwrote lab tests necessary to diagnose common conditions such as malaria, typhoid, and diabetes. We also provided appropriate medications free of charge thanks to Americares. Dr. Inoussa was available to follow-up the positive malaria and typhoid tests or deal with the small number of patients who needed to be hospitalized or have surgery. Patty saw and treated over 150 patients during that week at little or no cost to them. The evaluation at the end of the week was that we were

both welcome to return at any time and bring other health care providers with us!!

Of the HIV test results that Raphiatou gave, 16 people were positive. During the next two weeks she followed up these cases, making home visits or phone calls as appropriate. The rate that we experienced of 6.4% positive HIV tests in an adult population concurs with current government statistics for Cameroon. Statistics never tell the full story however, so we would like to share with you the 3 individual stories of people who touched us the most.



The first little girl we will name K is 9 years old. Her grandmother, who is currently providing for her as well as her 12-year-old brother, brought her in to see Patty for a medical consultation. She was diagnosed with bilateral ear infections, a bit unusual for a 9 year old. Her grandmother requested that we test the young girl for HIV since both her parents had died and she seemed so thin and was ill so often. Raphiatou agreed to sponsor the test and she was indeed found to be HIV positive. Later, Raphiatou presented her case to the HIV Review Committee that meets biweekly at the hospital to

review new HIV cases and discuss HIV follow-up within Foumban. K was approved for HIV anti-retroviral therapy since her CD4 count was low. In Cameroon all children under the age of 15 are provided with free HIV medications by the government. Later, Raphiatou visited K and her grandmother at their home, offering support and education. To this end, we agreed to pay her school fee so that she can continue her education.

The next woman named H is married and in a monogamous relationship. She had given birth 2 months before to a little girl and was breastfeeding, as the majority of women in Cameroon do. She had been tested during her pregnancy and was found to be HIV positive, but came requesting retesting the week after the festival. Not surprisingly she again tested positive. Her husband was tested and found to be negative for HIV. It is unknown at this point how HIV entered this relationship, but they have been working through these marital issues for the past few months. H was again devastated as



it was impossible for her to continue in denial. It is too early to test the infant, but she will be followed-up and tested by Dr. Inoussa when she is 6 months old. In the meantime we have agreed to sponsor the infant to be formula fed over the next few months. This will decrease her chance of receiving the HIV virus through breast milk.

The final case that we want to share is the story of L, a 26 year old who is married and has 3 children. She is a neighbor of Raphiatou's father and came to visit us late one night to seek medical help. She has had bilateral breast abscesses that were treated and healed, but she has continued to loose weight over the last year and doesn't feel well. We advised that she come to the hospital the next morning to be tested for HIV and diabetes. She complied and it turned out that she is HIV positive. Given the poverty in which this

family lives, we decided to supply her with \$6 (3000CFA) to go for the confirmatory testing. She never went. Raphiatou then requested that her husband come for testing which he did. However, he never returned for his results, and did not want to know them although Raphiatou had them in her possession at the house when he came to visit. We know that his test results are positive. This situation is one of the saddest for us because of the despair that seems to have immobilized this couple, preventing them from receiving medication that would help. L is rather advanced in her disease process, yet seems unable to access the help that is available. The husband appears to remain in total denial.

In order to distribute the remaining funds that were contributed directly for orphans, Raphiatou visited the local Women's Aide Society. They provided her with a list of 45 children orphaned by both parents from their area of the village. Their greatest need is for their school fees to be paid. Since it is mid-year in the school year at this time and fees have already been taken care of, we have decided to distribute this money early next September to pay as many school fees as we are able.

We also distributed some of the medication from Americares to a small clinic located in The Center for the Promotion of Women and the Family, The Women's Aide Society, and the local government clinic located near Raphiatou's father's house. We also made more friends and connections with other centers and schools as well as the Protestant hospital. We now know more of what the medical needs are as well as where the holes exist in HIV follow-up and care. We are invited back to speak at a bilingual



high school next year on HIV prevention and to conduct testing. Dr. Inoussa would like to see us return with a small team of medical personnel on an annual basis.

We wish to thank each of you for your partnership in this endeavor. Without your contributions and backing we would not have been able to accomplish all that we did during our short time there. Although we realize our impact is quite small in comparison to the needs, our presence there even on a short term, annual basis provides great hope in a difficult situation.

Sincerely,

Raphiatou Noumbissi

Patty Hewson