Research Project : Provision and acces to healthcare services in Douala

Background and description of the project

A priority of health care policymakers in many developing countries is to ensure that the vulnerable groups of people (particularly women of child birth, the poor, elderly, children) have access to high quality health services. Policymakers try to ensure that access in terms of distance (or time taken) to a health facility and cost are affordable to these groups and therefore not a deterrent to service utilization. Consequently, a sizeable proportion of public resources may go to construction of additional health structures directed at decreasing distance travelled to health facilities and increase the likelihood that these health services will be used. Perhaps what should be noted is that a mere presence of services within a reasonable distance (as a result of standing structures) is not enough to ensure use of those services. Likewise, monetary cost, which is usually mentioned as the major barrier may not always be a deterrent to access and utilization of health services. It is not uncommon therefore to find that many individuals, mainly those using government facilities in developing countries will not use available health services even when they are free or nearly free. One of the explanations for this is the perception that government facilities are of low quality and are of low efficacy.

Worldwide, public health has become an international topic of concern over the last decade. There are arguments that public health, in many parts of the world, has reached crisis levels: over 14 million people are killed by infectious diseases each year (90% of which are in the developing world); over 40 million people globally are infected with HIV/AIDS (90% of which are in the developing world); over 500 million people are infected with malaria each year and the disease kills upwards of two million people annually; over eight million people develop active tuberculosis (TB) each year and the disease kills over two million people annually (95% of those afflicted and 99% of deaths resulting from TB are found in the developing world). Perhaps, even more surprising is the fact that while most illnesses – especially infectious diseases – are preventable or treatable with existing medicines, the World Health Organization (WHO) estimates that over 1.7 billion people have inadequate (or no) access to these medicines (WHO, 2004). The paradox in most developing countries is the fact that governments focus more on building and expanding health facilities that are largely underutilized by the poor and the non-poor alike. Worse still, services offered are often of low quality that even the poor do not find it worth their time and cost in accessing them.

Yet health services use a considerable amount of economic resources and count among each country's major employers. They also foster a feeling of security in individuals and a climate of confidence in society, factors which are important for the development of the economy and more generally for the society as a whole" (Health 21). Consequently therefore, "everyone should have a fair opportunity to attain their full health potential and, more pragmatically, that none should be disadvantaged from achieving this potential, if it can be avoided" (Whitehead, 1992). Perhaps, Whitehead argues, this definition does not necessarily mean complete elimination of all health differences so that all people can enjoy

the same level and quality of health but defines means which reduce and (or) eliminate inequities that may result from avoidable (or unfair) factors.

Project objectives

At the end of WHO conference in 2010, it stated that urban areas should strive for urban equity and thus in this research work, our main objective is to examine the reasons for the unequitable provision and use of health care services in Douala so as to fight for urban equity. Particularly, this programme aims :

- To examine reasons for the insufficient quality provision of health care services in Douala
- To examine the measures use in handling health care services equipment's and their uses in healthcare service centers in Douala
- To examine the various impacts of poor use and provision of health care services and their consequences in Douala
- To examine the various stakes and challenges faced by health practitioners in the use and provision of health care services in Douala
- To examine good governance measures of town planning and the respect of medical corps norms on the use of medical health care services equipment's

Expected outcome

- Guide treatment response to advance therapeutic approaches
- Optimise healthcare pathways in our health system

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