Holding up our end of the line

The role of nurses amidst the coronavirus crisis



Florence Manjuh, <u>UICC Young Leader</u>, a registered nurse and the leader of the Women's Health Programme (WHP) at Cameroon Baptist Convention Health Services (CBCHS) discusses the impact on cervical cancer screening and her experience as a frontline worker during this challenging time.

The impact of COVID-19 on cervical cancer screening services

The COVID-19 pandemic has interrupted a lot of services for the Women's Health Programme. In Cameroon, there is currently a partial lockdown in place and people are encouraged to stay at home. While this measure is effective in containing the virus and protecting people, it has been shown to reduce the number of people around the world availing of cancer screening and diagnostic services.

Key challenges

- Reduction in individuals availing of cancer screening services
- Difficulties in providing community services
- Individuals are afraid to come to health centres for treatment
- Opportunity to share cervical cancer screening best practices at conferences has been cancelled

This is especially concerning for us, as one of our primary activities is cervical cancer screening. Over the last few weeks, many of our clients who tested positive for HPV have not come for their results. Some women that have been diagnosed with cervical precancers have also not come for treatment despite the enormous calls made by the clinical staff. By delaying treatment of precancerous lesions there is a risk that more women will go on to develop cervical cancer, which will be much more difficult to treat.

This year we had planned to share our best practices on cervical cancer screening and to improve the national cervical cancer response by presenting three abstracts at an international conference on cervical cancer here in Cameroon. Unfortunately, this is no longer possible as understandably the conference was cancelled due to the pandemic.

Another challenge we have is the difficulty to go out to the community for sensitization and screening. A good number of our clients are recruited when we go to the communities to educate and screen women. We have been working with some NGOs that sponsor screening for women in different communities. Over 1000 women in these communities who would have had free screening sponsored by NGOs this year will not have the opportunity to be screened due to the covid-19 pandemic.

Adapting our services

Despite these challenges we are there to take care of our patients and ensure they receive safe, quality care.



"The good thing is that we, the nurses, are conscious of the severity of this pandemic and are doing our very best to remain safe by using the available PPE and regular hand washing to ensure we can take care of patients, especially during this critical moment."

To combat this pandemic, a taskforce has been created in which I am a member. We have been following up to see that nurses adhere to the preventive measures put in place. Both online and in-person training on COVID-19 prevention and diagnosis have been provided for nurses and other staff.

All individuals visiting our health facilities are asked to wear masks and to regularly wash their hands. In the waiting rooms, patients are asked to sit apart from each other, and significant effort is made to reduce waiting times. Temperature control is done for all patients, staff and ca regivers at each hospital entrance and suspected cases are referred to COVID-19 treatment centers for management.

Moving forward

As the focal point for Project ECHO in Cameroon, we have continued our monthly virtual meetings where we share experiences and support our peers working on cervical cancer. In April, our meeting focussed on COVID-19, which was much appreciated and in June I had the opportunity to deliver a lecture on WHP's experience implementing a cervical cancer prevention programme in Cameroon.

We promoted our work to a global health audience through an online event organised by the Geneva Health Forum where I delivered a lecture on the use of a WhatsApp group. as part of CBCHS's cervical cancer prevention programme. This programme was launched in 2007, however it is even more relevant now as organisations recognise the need to use digital platforms in the delivery of their services.

The use of technology, from Project ECHO's monthly telementoring meetings to our own WhatsApp groups, have allowed us to continue delivering our services, communicating with our peers and sharing our work and expertise with the global cancer community despite the pandemic. As nurses, we are holding up our end of the line by providing essential health services in the community, while protecting people from COVID-19.

