



## A Conversation with Professor Wanji, University of Buea, Cameroon

By Theresa Hoke, FHI360

In my role as Research Uptake Advisor for COUNTDOWN, I have collaborated with Professor Samuel Wanji since project inception. Professor Wanji is Head of the Department for Microbiology and Parasitology at the University of Buea, Cameroon, and he serves as Executive Director of the Research Foundation in Tropical Diseases and Environment, Buea. The other week I spoke with Professor Wanji to explore how his work as an NTD researcher has been impacted by disruptions brought on by the COVID-19 pandemic. On an internet call we talked about his research and life in general in Buea, the capital of the Southwest Region of Cameroon. Here's what I learned.

### The current situation on campus

People have adapted to a new environment of semi-confinement. After a 6 weeks shutdown, schools have resumed operations. Students have been back on the campus for about 2 weeks. University life is largely back to normal—perhaps too much so. Students are supposed to be wearing masks, but they're not necessarily doing so consistently. There are not enough handwashing stations or hand sanitizers, either.

### Coping with COVID-19 in Buea

People have heard a lot about COVID-19, as the media have covered the pandemic extensively. While awareness is high, people don't have the materials and measures to protect themselves from infection. Social protections are not in place, either. When businesses close or workers lose wages due to shutdowns, the government is not offering subsidies to help the population cope economically. People are greatly worried; when there's not enough money to buy food, people starve.

*"People are greatly worried; when there's not enough money to buy food, people starve"*

Southwest Cameroon has recorded 79 cases total; in the past 2 weeks there have been about 15 to 20 new cases. In the Southwest region people can't easily go for testing. The University of Buea Emerging Infectious Diseases lab is one of the approved COVID-19 testing labs. It takes about 48 hours from taking the sample to producing the results with a nucleic acid test. Despite these limitations, there have been improvements: In the beginning COVID-19 testing was being performed in just one lab nationally, in Yaoundé. Now each region is supposed to have an accredited place for testing.

Limited access to labs is not the only barrier to testing. People are afraid! COVID-19 is a highly stigmatized condition. Even in the case of no known COVID-19 infection, a simple cough or sneeze can bring hostile reactions. People suddenly regard you as abnormal and potentially dangerous. The practical constraints surrounding COVID-19 also keep people away from testing. Because of the difficulties of self-isolating in a typical household, a stadium was transformed into a COVID-19 center. While waiting for test results, suspected cases are put in quarantine, and staying there is not voluntary; rather, individuals are obliged to remain at the COVID-19 center until test results show they are free of infection.



Hand wash at the entrance of the screening point

*"Suspected cases are put in quarantine, and staying there is not voluntary...individuals are obliged to remain at the COVID-19 center until test results show they are free of infection"*

Health care workers are bearing the burden of COVID-19. Like medical professionals everywhere in the world, the health care workers were not prepared for this pandemic. Traditionally, health care workers are regarded as "second to God", responsible for people's lives. Even when they know COVID-19 is highly contagious, they are receiving patients as usual, in a caring manner, even if they have no personal protective equipment (PPE) to reduce their risk of infection. Meanwhile, hospital occupancy has declined, as people are afraid to go "where COVID patients are being treated".

*"Health care workers are bearing the burden of COVID-19. Like medical professionals everywhere in the world, the health care workers were not prepared for this pandemic"*



Recruitment of participants

### Impact of COVID-19 on NTD research

Prof Wanji is conducting community-based research to test the use of doxycycline as an alternative treatment for onchocerciasis. He and his research team are no stranger to research disruptions. Over the past few years severe civil unrest in the Southwest Regional has shut down the university and made travel hazardous if not impossible. Just as Prof Wanji and his team were headed to the field for data collection in 2017, violence broke out. Study sites became a battlefield!

*On resilience: "...the experience of working in the context of conflict is helping the research team cope with today's pandemic. 'Unrest prepared us for COVID-19'"*

Prof Wanji spoke of resilience: Not only is the civil unrest much better than it was a year ago, but that experience of working in the context of conflict is helping the research team cope with today's pandemic. "Unrest prepared us for COVID-19." Earlier, when faced with the threat of violence, the study team had to devise and implement new strategies to support participants who were supposed to be taking the 5-week course of drugs. Past success with adaptations to research procedures is giving the team confidence that it can operate successfully within the constraints imposed by COVID-19.

*"When faced with the threat of violence, the study team had to devise and implement new strategies to support participants who were supposed to be taking the 5-week course of drugs"*



Finger pricking for smear preparation

Further, Prof Wanji's team seized the opportunity to do some extra good in the face of COVID-19. When the study team learned of deconfinement, with possibility to travel to study sites for the onchocerciasis research field work, they quickly assembled prevention supplies and messages to strengthen the capacity of communities to protect themselves from COVID-19. Community members had seen preventive measures like facial protection, physical distancing, and handwashing on television, but they had no experience putting those measures into practice. For the communities participating in Prof Wanji's trial, he and his team introduced measures like washable re-usable masks, hand sanitizer, and a water system for handwashing. They also provided health education to teach community members how to apply these prevention strategies in their routine lives.

Prof Wanji observed that research has been heavily penalized by COVID-19. The pandemic has required research teams to be flexible and resourceful to keep studies alive. COVID-19 also instills humility. Faced with the pandemic's profound and tragic impact, including in the best-resourced places in the world—one can't help but ask: "Has science been defeated? What does this mean for humanity?" COVID-19 also builds courage: As long as we have the capacity to continue our work in NTD research and programming, we must push on by learning how to live with COVID-19.

*"As long as we have the capacity to continue our work in research and programming, we must push on by learning how to live with COVID-19"*