

Mission statement

Since 1999 Mrs Huguette Samgot has been fighting against acute poverty, illiteracy, ignorance, and apathy on gender and development among the rural population in Cameroon. During the years she has gained more members and is becoming more professional. This has led to found The Foundation Help Cameroon in 2009 as an official charity Organization.

The Foundation Help Cameroon: Strives to realize equal opportunities in Cameroon by financing secondary school of underprivileged pupils, facilitating access to clean water in easily accessible public places, provide key medical supplies for hospitals and medical/humanitarian support to social, physical and/or economically vulnerable persons.

Program description

Based on our mission statement, that foremost prioritizes equal opportunities for the Cameroonian population, we have structured our program into four themes:

1. Education for underprivileged children
2. Access to safe drinking water
3. Medical AID for rural health facilities
4. Socio-economic projects

Here under we present our motivation behind choosing these four themes. Each theme has one or more projects. We describe the project(s) per theme. For every project we say what we are doing, how we are realising it, who we are helping, since when, and what we envision for the project in the future.

1st theme: Educating today's children as the leaders of tomorrow

Motivation: Education is a key means to preparing the young for their future. The UN Millennium Development Goal has targeted improving access to education for every child of school going age. In Cameroon every child may go to primary school for free. But this has meant that the classes are very crowded and with very minimal suitable learning materials. And every parent is still expected to buy for the child all kinds of extras or to pay extras to the schools. Wealthier families send their children to well-resourced schools where they gain much competitive advantage over the children in the public schools. As a result, many talented children from poor families drop out of school early or are so poorly prepared for university, that they feel to compete with their age mates from the wealthier families. The talented children such as orphans (especially of HIV/AIDS parents) are most disadvantaged. Our foundation has raised funds to support such children so that they can study in boarding schools in more normal conditions. Without such support such children are condemned to the poor education systems and simply will have no future.

Project 1: Quality education for underprivileged children

What are we doing: Provide high quality education for underprivileged children over 12 years of age.

How are we realising this: Pay the tuition fees of underprivileged children. In the villages where we have realised wells we have made it known to the local population that we are willing to pay the school fees of five children. Families that were willing could verbally engage their child in the procedure. Through a selection procedure mostly based on motivation of the family and the child five children have been selected.

Who are we helping: We support children whose families do have the will, but not the means to send their children to boarding school where the quality of education is considerably higher than at local schools. Another target group are orphans. They have nobody to support them.

Since when: We have been supporting 5 children up until now, since 2006

Vision: For the coming years we want to make the procedure more transparent. However, some of the parents are illiterate, which makes it difficult for them to fill out documents. For the coming years we are not only looking for 5 underprivileged children who are highly motivated, but who have a talent for learning as well. A short test will be carried out for all the applicants, to measure their theoretical and practical knowledge. Here after, the best 40 will be invited to talk about their motivation. The 5 who are the most motivated will be selected for financial support until the age of 20.

2nd Theme: Safe drinking water for rural primary schools and public hospitals

Motivation: Water is essential for life, health and prosperity. The UN Millennium Development Goal is to half the proportion of people who do not have access to safe drinking water by the year 2015. Cameroon is unlikely to meet this target due to the lack of required resources (expertise and funds). The result is that a large part of the population will continue to drink water that is unsafe. This exposes them to the widespread water-borne diseases such as malaria, diarrhoea, dysentery, typhoid, cholera and bilharzia. Safe drinking water reduces the risks of common preventable diseases considerably. The Foundation Help Cameroon focuses on rural primary schools where most households live in some of the poorest conditions. Safe drinking water is often kilometres away from homes. The water that is more readily accessible is unsafe for drinking and is often a breeding site for mosquitoes and related malaria problems.

Project 1: Provide safe drinking water to local people in rural areas.

What are we doing: We build water wells in public areas such as hospitals, schools and even prisons. Our highest concern is to build wells that provide safe drinking water to the local population especially to pupils following basic education.

How are we realising this: We are working with a contractor who has already satisfactorily constructed some of our wells in the eastern province of Cameroon.

Who are we helping: The local, rural population of the Eastern Province of Cameroon.

Since when: We have been building boreholes informally (during our holidays) since 2007. The Doumé District Hospital, prison and primary schools that have received such water points have shown reduced problems with water-borne/ water related diseases. From verbal testimonies, it has been said, that the improvements in the health of the children have also resulted in their better school performances.

Vision: From the evaluation of the local people the only thing that they would like to see changed is that there are more boreholes. For some people it is still rather far to walk the distance to our clean drinking wells. Therefore, our only vision is to create more wells for schools, and hospitals.

In Cameroon children are often the ones carrying the water from the well to the house. New highways have been constructed connecting Province to Province. Along these highways basic schools have been built, young children between the ages of 4-12 often get caught in road accidents, carrying the water on their heads while crossing those roads. It is for this reason that along this road where there are primary schools we would like to build wells at both sides of the road. This will prevent children from crossing over with as much as 5 litres of water in their hands or on their heads.

Project 2: Education on water disinfection methods

What are we doing: We educate the local people that live near a well of Help Cameroon on the necessity of disinfecting their drinking water before oral usage and how to carry out the disinfection process.

How are we realising this: During three weeks after the construction of a new well we place a person next to the new well to informally educate people on how to disinfect their water before drinking it. The person who is responsible for carrying out this task will always say, at the end of the conversation with the water carrier, that he/she should tell this message at home as well. Furthermore, the person also visits the public place (school, hospital, etc.) to inform the personnel and the occupants how to disinfect the water before drinking.

Who are we helping: We are helping local people that live in the vicinity of one of our water wells. The wells are built in public places that serve multiple people.

Since when: We have placed a person next to the hospital in Doumé and the school in Paki, for a period of three weeks.

Vision: Our vision is to continue with this work. As the feedback from the local people is heart warming. The period of three weeks will stay the same. We have found that during three weeks, the recurrent users have all used the well at least thrice and is thus enough to safeguard dissemination to the necessary population. Again, the well users are kindly urged to share the information on water disinfection with as many people as they can.

3rd Theme: Medical equipment & supplies for hospitals in Cameroon

Motivation: Over the decades, many healthcare facilities (hospitals and dispensaries) have been built in Cameroon to improve access to healthcare. These healthcare facilities are often run by very dedicated and hardworking doctors, nurses and other staff who operate under very difficult conditions often without many of the basic items such as proper surgical tables, x-ray machines, microscopes, gloves and electricity. Either such basic items are missing or are in such a poor state that they need immediate replacement. The healthcare workers really need these items and supplies to adequately serve their patients.

Project 1: Provide indispensable medical equipment to rural hospitals

What are we doing: We replace old or non-existent medical equipment in rural Cameroonian hospitals with medical equipment from Dutch hospitals.

How are we realising this: In the Netherlands hospitals are regularly replacing their medical equipment even though what they replace is still in relatively good condition. The foundation Help Cameroon has collected such medical equipments from Dutch hospitals as a gift to support the hospitals in Cameroon that badly need them.

Who are we helping: We helped a rural hospitals in Eastern Cameroon last year that gave notice of not having certain indispensable medical equipments to provide adequate care to their in and out patients. Based on the list of medical equipments that the Cameroonian hospital was in need of, we provided these equipments, where we could.

Since when: We have informally, already made two such shipments (the other one was to the Cite-Verte district Hospital of Yaounde) and this has been a big boost to the local healthcare personnel.

Vision: Our plan is to improve the collection of such support in the Netherlands and also ensure that they are properly checked and serviced before they are shipped to Cameroon. We also plan to strengthen our team to monitor the donations (of the hospital equipments) in Cameroon to ensure that the medical equipments are used at the designated hospital.

4th Theme: Special projects to support persons with special needs

Motivation: There are two main areas of concern here. The first is the case of persons with physical deformations, e.g., albinism, blindness, deafness, mycoses, water head, lameness or leprosy and HIV/AIDS. Such persons are segregated, stigmatized and treated as if evil and are socially marginalized in Cameroon. Some of these conditions can be fixed through corrective

surgery in the national reference hospitals or abroad at high costs. But most of the affected persons are so poor that this is not an option. We help to get funds and arrange for the required treatments. Without such treatment the life prospects of the persons are marginal.

The second case is of persons with special conditions that are life-threatening, e.g. heart conditions, which require very specialized and often costly care. We have facilitated the treatment of some children in this kind of condition and believe that it is something that we should continue to do especially for children of families that are so poor that the child would have no chance otherwise. Even such a child born in a poor family needs to be given a chance to live, especially when suffering from conditions that can be treated and are life-threatening.

Project 1: Provide medical care to cure baby's water head.

What are we doing: We have taken on charge a girl, named Yvonne, of 3 with a water head. We provide medical support, food and physiotherapy to Yvonne. When needed, we also provide food and transport for her and her parents.

How are we realising this: In 3 year Yvonne has received a medical operation for her water head. After the medical operation, she is receiving physiotherapy and is still monitored by the doctors who operated on her head. Yvonne and her family live in Doumé. The operation could only be performed in Yaoundé, at the best hospital of the country. Because Doumé is 4 hours away from Yaoundé we paid the transport, food and accommodation for Yvonne and her parents while they resided in Yaoundé. At the moment, Yvonne is rehabilitating. The rehabilitation of Yvonne is mostly taking place in Bertoua, an hour drive from Doumé. Here the nuns of the (naam revalidatie centrum) take care of Yvonne and provide food for her and her parents.

Who are we helping: We help Yvonne Zimama to cure her water head

Since when: 2008

Vision: The coming year we would like to help Ms. Marie Paule and her elephant face, young Ruphate and his poorly circumcision, children (4-18) suffering from umbilical hernia. We want to start raising funds to cure her physical condition.

SWOT analysis

Strengths, Weaknesses, Opportunities, and Threats of the program

1. Strengths

The projects are carried out at the grassroots level, which means that donations directly affect the lives of local people. Help Cameroon always works on demand and thus the projects are mostly shaped by local stakeholders. The priority placed on education of children, access to safe drinking water and supply of medical material are things which have been derived from an on-going dialogue between Help Cameroon and local stakeholders. The involvement and engagement of local stakeholders safeguards ownership, empowerment and gratification after project realisation.

The last three years of work have demonstrated that our target populations are happy with the work we have done. If you would make a visit to the villages where we have carried out our projects, you will find that most local people know our projects and our project manager. If you would ask them what they feel about our projects, they will smile, talk about how it helps their lives and afterwards they will sum up other things that the foundation should change in their village. The local ownership of the projects provides a very powerful basis for a respectful mutually beneficial long-term relationship amongst the partners. Whatever activities are started have excellent chance to be sustained by the people even if further funds are not provided.

All the funds that we received have been used to help or save lives in the rural areas of eastern Cameroon. Most other wells break down within a year whereas ours are still functional even after four years (some wells were built while not having this foundation).

2. Weaknesses

We are focusing on themes that supposed to be national priorities but for which the national government is unable or does not provide required support. It has therefore been difficult to secure required funds to do the things that we want to do because they are things which in principle are supposed to be provided by the government.

Our small funds have meant that most of the staff is not paid, and key project activities are done on volunteer basis. This exposes the program to the risk of discontinuity when the volunteers cannot perform. Most donors are willing to provide funds for the projects but are reluctant to recognize the need for fully resourcing the core staff that makes the work possible. Future project budgeting will need to properly include contributions to required staff resources such as basic salary, allowances, travels and communication costs. These costs tend to be small but unless provided may mean that the project cannot properly be executed.

3. Opportunities

At the moment there are some opportunities that are of interest to our Foundation's mission. Local authority contacted our Foundation during periodical dialogue to built wells along the newly built road between city to city. At those places along the road where there are schools. For our Foundation this would be a big project, but one that is very beneficial to our mission statement: to provide equal opportunities. Building water wells will most likely lead to higher school performance and to less accidents with pupils along the road.

The government of Cameroon has asked to invest more in child and maternal health. The Foundation would also like to focus on umbilical hernia for children and uterus malformations within Girl-child mothers which is in line with government objectives. Even though we are not financially supported by the Cameroonian government, we do work together with local authorities, such as mayors. Our projects will thus help local government carry out their mandate.

The country of Cameroon has very intelligent people, mostly from urban areas. This means that the building of a well or carrying out a medical operation are things that are safe in the hands of Cameroonian's. We are in a fortunate position (our project coordinator being herself Cameroonian/Dutch) that we can hire contractors from Cameroon to carry out our projects. This creates jobs on a local level as well, and means more families are being fed.

4. Threats

Our biggest threat is the bad image that people have in the Western World of projects in Africa. Their fear is that a lot of donations sent to Africa do not reach the target population. We had problems with the lack of trust so decided to work with few donors with whom we have had excellent track records. The danger of having few donors is that there is a high relation of dependency. Signing up with Global Giving will hopefully overcome this dependency.

When looking at the trust issue of the west with giving donations to African projects: we can most likely overcome this issue because we are a Dutch foundation that works on the grassroots level. Most of the work that we do has two levels: project management in Cameroon and the contractors at the local level. We work very closely with the Cameroonian contractors and if, for example, materials or transport has to be paid, we do this personally and hand it over to the contractor or doctor (or other middle men). To safeguard good continuation of a project, we visit the project site constantly, with announced and unannounced visits. Of course, it is impossible for donors to see all the work we do. It is for this reason that we present the donors with a digital booklet including a photo collage, at the end of every project. The points that are discussed in the final report are the costs, the process and the outcome of the project.