THE REGIONAL CENTER FOR THE WELFARE OF AGEING PERSONS IN CAMEROON (RECEWAPEC)
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RECEWAPEC CONTRIBUTION

BAMENDA NORTH WEST REGION, CAMEROON
CENTRAL AFRICAN REGION

By
President/Promoter of RECEWAPEC.
National legal frame work 1

What are the legal provisions in your country that recognizes the right to autonomy and independence? Do they have a constitutional legislative or executive foundation?

Following my research on the legal provisions in my country that recognize the right to autonomy and independence at the Regional Delegation of Social Affairs in Bamenda, I hereby realize the following provisions.

Judicially speaking, there’s no specific legislation presently as concern the protection and promotion of the rights of older persons but however, various provisions of decrees and laws rule their protection.

The Cameroonian social legislation provide a series of texts relating to the organisation of the social protection of older persons including:

- Law No 67/LF/18 of June 1967 on the organisation of social insurance in Cameroon
- Also there is a constitutional foundation. The constitution establishes in its preamble the principle of the protection of older
persons as follows: “The state protects (...) older persons” e.g. 18th January 1996

- Decree n° 2005/254 of 7-7-2005 for the implementation of law n° 2004/016 of 22-07-2004 on the functioning of the National Commission on Human Rights and Freedom

- Cameroon has also ratified several international conventions like the Universal Declaration of Human Rights, the charter of the United Nations and the FRICAN Charter on Human and People’s Rights. However, these decrees if being implemented and followed, then these ageing persons would be better than they are now.
2. **Normative elements**

**What are the key normative elements of the rights to autonomy and independence? Please provide references to existing laws and standards where applicable.**

The key Normative elements of the rights to autonomy and independence by older person include:

1. Doing things for themselves
2. Participation in the development of the Community.
3. Having friends, family members and money as resources.
4. Preserving their physical and mental capacities. Existing laws that protect these elements are as follows;
   - Law No 69/LF/18 of November 10, 1969 establishing the disablement pension and insurance in case of death as modified by Law No 84/007 of July 4, 1987. In addition, several actions for the protection of older person with disabilities have been carried out by the Ministry of Social Affairs.
   - Decree no 2005/320 of 8-12-2005 and decree no 2017/383 of 18-07-2017 organizing MINAS with respect to ensuring the implementation of government policy on issues of prevention, assistance and protection of socially vulnerable persons and drawing up a national documentation on the protection and promotion of older persons.

**These include,**

- Drafting a National Policy document for the protection and promotion of older persons.
- In addition, many ministerial departments provide various supports to older persons such as MINJUSTICE, MINATC, MINCOM.
3. **How should autonomy and independence be legally defined:**

The constitution of 18-01-1996 in one of its articles states “The nation protects the youth, women, older persons and persons with disabilities”

Autonomy and independence of older persons is defined in relative terms in Cameroon referring to a situation whereby the older persons would accept some help at hand, doing things alone, having family members, friends and money as resources and preserving physical and mental capacities.
Implementation

4. The steps taken to ensure older persons enjoy their right to autonomy and independence following Cameroon Decree No 2011/408 of Dec. 09 2011 to Consecrate the reorientation of the missions of the ministry of social Affairs to be responsible for the elaboration and implementation of the government policies as concerns prevention, assistance and protection of persons socially vulnerable to move vulnerable population from potential resources to real development resources ensuring harmonious integration of vulnerable classes I the development process and transform vulnerable persons from simple consumers to wealth producers.

➢ There is also a policy for older persons to participate in the development and life of the community.

The option of “Active aging” adopted in the action plan of Vienna, about two and half decades ago which comes about because of the progressively growing population in terms of aging. Average longevity represents a hidden resource for the Cameroon average economy.

At the institutional level, it’s noticeable that structures are being put in charge to make great implements.

These improvements aims at recognizing and consolidating the place of older persons.

Thus, the Decree no 85/116 of August 28, 1985 organizing the ministry of Social Affairs has created a bureau for senior citizens.
5. What are the best practices and main challenges in adopting and implementing a normative framework to implement these rights?

Good practices available in long-terms and palliative care involves multiplier schemes which are good practices learnt from human rights perspectives. It provides risk diversification which considers the fact that countries experience different types of risk in long run. To provide non-contributory pensions to elders in informal sector and the prevention of employment accidents and occupational safety, their coverage and administration schemes based on compulsory and social contributions.

Then other challenges faced to implement this normative framework are;

✓ High cost of medicines common in the treatment of ageing facilities
✓ Poor cooperation between the old peoples community, and the trained personnel
✓ Absence of specific programmes to fight against STDs in favour of elder persons.
✓ Non-implementation of the laws put in place for the promotion and protection of older person
✓ Unavailability of trained personnel to implement this framework
Equality and non-discrimination

6. Which are the measures adopted to ensure equitable access by older persons to the enjoyment of the right to autonomy and independence, paying special attention to groups in vulnerable situations

They involve responsibility of other non-state actors in respecting and protecting the right to autonomy and independence of older persons include;

1. Provision of health insurance.
2. Access to credit saving association by market Based organizations.

Pooling risk such as individual crop failure or illness among the group members, traditionally, these communities based systems of risk pooling are based on the rules of generalized reciprocity, which has been often formulated anthropological literature. “In a community where everyone is likely to fine himself in difficulties from time to time, he who is in need today receives help from him who may be in like need tomorrow”

House hold us risk diversifying strategies to cope with social risk old age private household provide welfare to the elderly in many ways, through the provision of shelter, basic provisions, remittances and the provision health care needs. Differentiates risk managements and mitigation strategies where the formal encompasses all activities where household to smooth their variability of income while risk mitigation strategies include crop diversification, prudent use new technologies and migration of family members.

Through informal and sharing and collective decisions making, the Cost of transaction is reduce.
- Participation of older persons in the life and development of a community.
- MINAS has put in place a project named “Maison de Age” which is a place for education, information, intergenerational exchanges and leisure for older persons
Participation

7 Does the design and implementation of normative and political framework related to autonomy and independence included an effective and meaningful participation of older person? The answer to this question is 80% NO. Because of the following reasons;

1. In Cameroon, most of the things are being done on paper, the government have not sent actors to the ground to really implement normative and political framework related to old persons, hence slow participation.

2. The participation of this framework is also slow because of the fact that although stated that pension should be pay to all elders on the other hand its mostly only paid to ex –workers of the formal sector and rendering the informal sector helpless.

3. It’s also slow because of the economic and financial situation of the country ,where most of the older population doesn’t have a means to participate in organized semesters due to lack of finances for transportation and care.

4. It’s also slow due to insecurity situation of the country which comprises of the crises in the English speaking regions, Boko Harram insurgencies in the North and violence, these insecurity cases usually makes the participation turnout not effective.

5. The designs does not work also affecting because most of them are only implemented in the urban sector (centralized government) which renders those at the rural areas ignorant.

However, there exist legal framework that guarantees the autonomy and independence of older persons
Accountability

8. What judicial and non-judicial mechanisms are in place for older persons to complain and seek redress for denial of their right autonomy and independence?

The existing mechanisms are ensured by the

- Courts of first instance and high courts
- Ministry of basic education
- Ministry of higher education
- Ministry of social affairs
- The National Commission on Human Rights and Freedom

Mechanisms necessary or already for older persons to seek redress for the denial of their autonomy and independence are the granting of priority to the fight against social exclusion of older persons. In 2004, Cameroon laid the basis of a new concept, the profitable social, as foundation for the 3 ‘A’ approach, That is Assistance - Accompaniment - Autonomy. This approach aims at breaking the vicious circle of precariousness dissatisfaction, because to economic charges and sources of breaks. She dissolves to permanent psychosocial accompaniment, developing aids and diverse technical supports through targeted and multi-sectorial. Politics, enabling to transform vulnerability into production of wealth engines. In order words, beyond the humanitarian requirement towards extremely vulnerable persons, in other to guarantee their full contribution to the development of our country. Among other identified strategic, is the reinforcement of National solidarity jugulate or reduce social exclusion.
National Legal frame work

1. What are the legal provisions in your country that recognizes the right to long-term and palliative care? Do they have a constitutional legislative or executive foundation.

- The legal provisions of Cameroon which recognizes the right of elder person’s to long-term and palliative care include, provisions of laws and decrees applicable rule their protection.
- The civil code which requires the descendants to take care of their parents unable to provide for themselves.
- The penal code also protects older person in section 180, 282, 283, 351, 275, 277, 278, 279, 280 and 287.
- The Cameroonian Social Legislation provide a series of text relating to the protection and caring of the old. Ordinance n° 73/17 of 22-05-1973 on the organization of social insurance which entrusted to NSIF (National Social Insurance Fund) a part of the general policy of the government the service of various benefits provided by legislation of social protections.
- At the constitution, there is an establishment in its preamble the principle for the care and protection of older person’s as follows: “The nation protects (...) older persons.”
Normative elements

2. What are the Key normative elements of the rights to long-term and palliative care? Please provide references to existing laws and standards where applicable.

The ongoing implementation of the Universal Health coverage which consists according to the WHO ensuring equal access of all individuals according to their needs, to complete quality health service (preventive, curative, palliative, rehabilitation and promotion) in that any risk of causing financial, prejudice or impoverishment.

The key normative elements for the protection of the rights to long-term and palliative care from my research at the Cameroon Baptist Convention Hospital’s palliative care centre in Bamenda includes:

- Drafting of a National policy Document for the protection and promotion of older persons.
- Organization of an international workshop on ageing in Yaounde with support of help age International (from September 11 to September 15, 2006)
- Holding of 04 inter-regional consultation workshops in (Ebolowa, Bafoussam, Garoua and Limbe), for the putting in place of a policy on the protection and welfare of older persons. And drafting of a national plan.
- Fight against emergent phenomenon of abandoned older persons
- Capacity building of Associations, NGOs and private social concerns delivering care to older persons.
➢ Development of partnership and advocacy and mobilization of resources.
3. How should long-term care and palliative care be legally defined?

In Cameroon, palliative care is defined as an approach in health care services that improves the quality of life for patients and their families facing the problems associated with life threatening illness, through the prevention and relief of suffering and which does not entail rendering the beneficiary financially impoverished.
Implementation

4. That are the policies that programmes adopted by your country to guarantee older person’s enjoyment of their right to long-term and palliative care?

The policies and programmes include;

- Development of a minimum package of activities in the form of curative, preventive and promotional care by level of the health pyramid.
- Basic training and ongoing training of various types of services providers and health care to elder persons.

For this reason, a National reproductive Health program has been drafted. It gives a primary place to the reproductive care of older persons with the following specific objective.

- Sensitize population on problems related to the increase by 25%. The number of health facilities and other structures delivering specific services to older persons.
- Carry our a systematic detection of breast and genital cancer.

Provide structures dealing efficiently with elder person in townships; Garoua, Bertoua and Bamenda.
5. **What are the best practices and main challenges in adopting and implementing a normative framework to implement these rights**

Key elements facing older people in Cameroon regarding autonomy and independence are rights to ending restrictions in family reunification, arbitrary internet blocking two years ago jeopardizing freedom of expression, right for care of terminality ill old persons. Studies and data reveal a set of vulnerable group which rely on information in the informal sector. For survival and mostly on private welfare institutions and most families are not economically viable to meet up with their needs.

- The civil code also makes provisions for duty of maintenance that is the responsibilities of the descendants over ascendants, which implies that obligation of supporting them in case of need.

Challenges faced to implement this framework are;

- **Poor Organization.**

  In Cameroon, older persons are not well organized. They don’t have special group to where they belong in many cases and not all of them have their status identity cards.

- **Communication is also a problem because most of the older persons don’t have access to recent means of communication and even though some have there is not enough networks in rural areas.**

- **Non-availability of old people’s homes**
Equality and non-discrimination

6. Which are the measures adopted to ensure equitable access by older persons to the enjoyment of the right to long-term and palliative care, paying special attention to those who are vulnerable or invulnerable situation?

They have been various measures taken to ensure equitable and non-discrimination access by older persons to the enjoyment of their rights to health services and long-term Care.

Special care is taken to ease identification of old and invalid persons through the field visits of agents of NSIF for door to door identification and payment of persons.

- Development of health facilities and their supply with minimum packages in order to bring health services closer to the population including older persons.

- Cost reduction policy in order to facilitate access to basic care by all, including those related to some pathologies like HIV/AIDS or other chronic diseases.

- Systematic cast reduction in some public and Para public health facilities. This is the case with the National Social Insurance fund hospitals with a 40% reduction for medical fees.

- Giant of aid by the state in the form of help or medical assistance to indigents and needy persons among which are found older person.

Furthermore, in application of the provision of Dec. No 82/412 of Sept. 09 2982 setting the modalities for grants of aids persons benefit
from various types of assistance including medical, financial, school and psychosocial, in equipment from the state, for their personal needs and those of their offspring
PARTICIPATION

7. Does the design and implementation of normative and political framework related to long-term and palliative care including and effective and meaningful participation of older persons?

Following my research from one of the palliative centres in C.B.C. hospital, Nkwen, Bamenda, the implementation strategy related to long term and palliative care amount of participation is slow due to the following reasons.

1. Despite actions carried out, most of the older persons are still put on the sidelines of long-term care promotion and development actions. Initiatives aiming at enhancing skill and experience of older personnel should be capitalized. The participation is also slow in Cameroon because despite the government and social partners to promote health and well being of older persons, some issues are still persistent.

2. Limited accessibility to health care and drugs for older persons.

3. Insufficient services and personnel specialized in geriatrics (only provided in Douala and Yaounde central hospitals)

4. Lack of specific program of care delivery to older person infected or affected by HIV/AIDS.

5. Unavailability of nutritionist in health districts.

6. Socio-economic and political changes affect the place, role and living conditions of older persons, more and more victims and other abuses plague by insecurity.
Accountability

8. What judicial and non-judicial mechanisms are in place for older person to complain and seek redress for denial of their right to long term and palliative care?

Judicial mechanisms put in place for older persons to complain and seek redress of their right to long term and palliative care include:

Ordinance no 73/17 or 22-05-1973 organizing social security amended by law No 84/006 of 4-07-1984 creating a legislative commission at the level of each region that is charged with resolving disputes in the social security domain. Moreover, there exist a Reprieve Committee at the NSIF that serves the same purpose.

✔ The criminal code which comprises protective provisions for older persons; notably, Article 180 on the alimony that curbs the lack of support payment owing to ascendants; article 282, that punishes the neglect of incapable persons; Article 283 that sanctions the omission to assist any person in danger.

✔ The criminal procedure code comprises protective provisions to older persons in particular. This include notably: Article 116 (3) which states that the judicial police officer shall as soon as the preliminary enquiry is opened. In form the suspect of their right to make themselves assisted by a court: Article 12212 that proscribes form of physical violence, torture, tricking in order to obtain information from the suspect.