

ACTIVITY REPORT

OCTOBER 2024



cuida d'bo
EMPOWERING HEALTH

We are dedicated to ensuring that every woman in Cabo Verde has access to essential healthcare and health education.

www.cuidadbo.org

cuidadbo@gmail.com



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EMPOWERING HEALTH



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1. INTRODUCTION

This activity report provides an in-depth overview of **Cuida d'bo**'s activities, achievements, and impacts during the period from June 2023 to October 2024. This timeframe represents the first 18 months of our NGO's operations.

1.1 Our story and mission

Initially, we arrived in Cabo Verde through a volunteering experience to contribute to a broader awareness about breast cancer among women in vulnerable communities. Our exchange with local partners, organisations, and locals, gave us a better perspective on the broader challenges these women face, especially in accessing basic gynaecological care. We created **Cuida d'bo** to connect women in situation of social vulnerability with essential gynecological care.

1.2 Our vision

Our vision is a world where all women have equal access to information, prevention, diagnosis, and treatment, regardless of their location or social background. We strive for a future where Cabo Verdean women actively incorporate self-care practices and seek medical care to lead healthy, fulfilling lives.





Cuida d'bo means “take care of yourself” in Cabo Verdean Creole. We are a non-governmental organization (NGO) dedicated to supporting Cabo Verdean women through health education and access to essential healthcare services. We do this by:



Facilitating Access to Information

Making it easier for women to access information about gynaecological diseases. Educating and raising awareness to encourage women to prioritize their well-being.



Providing Support and Resources

Ensuring necessary resources, guidance, and assistance from diagnosis to treatment.



Advocating Inclusive Health Policies

Working towards policies that create an inclusive health system capable of providing efficient responses at all stages of cancer diagnosis.

2. SÃO VICENTE ISLAND: HEALTH, SOCIAL AND ECONOMIC CONTEXT

2.1 The official numbers

Cabo Verde, with a total population of 598.682 and a fairly balanced gender distribution of 301.036 females and 297.646 males, faces healthcare challenges despite ongoing efforts to improve the system. The country's Human Development Index (HDI) serves as an indicator of overall progress in social and economic dimensions, Cabo Verde being placed as "Medium" category (HDI=0,661), according to the 2022 United Nations Development Programme Human Development Report. [\[1\]](#)



São Vicente, one of the smaller islands of Cabo Verde, is mainly populated in Mindelo, with over 90% of the approximately 76.000 inhabitants, estimated by the National Institute of Statistics, comprising 38.500 men and 37.500 women [2]. The "Hospital Dr. Baptista de Sousa" serves as the reference hospital for São Vicente Island and the other islands of Barlavento, providing both secondary and tertiary care. The community grapples with significant disease burden and cancer ranks as the third leading cause of death in Cabo Verde (61,2/100.000 inhabitants) [3].

In particular, breast cancer is the most common cancer worldwide and the leading cause of cancer-related death in women [4]. Breast cancer disproportionately affects people in low- and middle-income countries, where survival rates can be less than half of those in high-income countries due to late diagnosis, inadequate infrastructure, and low priority in national health agendas. It is estimated that 60 to 70% of breast and cervical cancer cases diagnosed in sub-Saharan Africa are already at stage 4 of the disease [5]. Additionally, it is estimated that black women are more likely to be diagnosed with breast cancer at an earlier age and 42% more likely to die from it than their white counterparts. [6]

Data from 2022 shows that there were 67 cases of breast cancer recorded in Cabo Verde, representing 30,3% of all female cancers registered on the island, and 23 deaths were registered, corresponding to 8,1% of overall cancer mortality in the island [7].

The recommendations for mammogram in Africa are for women above 40 years old [8]. However, there isn't a Breast Cancer Screening program in place in Cabo Verde which means the access to a screening mammogram is a privilege and not a right.

The implementation of a national cancer registry has been a pursued path and would be a significant step to mapping oncologic patients. However, it is important to highlight that there are no Electronic Medical Records in the country, making it difficult to account for the total number of cases, which are likely higher than those recorded.

A study published in 2022 shares information on cases reported in the "Registo Oncológico do Hospital Baptista de Sousa" (ROHBS), which began in 2018, but it is still unofficial. The Tumor Node and Metastasis (TNM) classification was absent or incongruent in about 90% of cases, and the registration forms were incomplete, highlighting the need to improve the healthcare records. Furthermore, the data is not aligned with the information provided by Global Cancer Observatory,



underscoring the need for a population-based registry in Cabo Verde to understand the country's oncological reality and better plan and promote cancer care [9].

Early diagnosis is essential in most tumours and cancer could be detected through exams such as imaging, computed tomography, biopsy or cytology, in case of a cervical cancer.

Many women in Cabo Verde have never consulted a gynaecologist, which means they never been screened for breast cancer.

The economic context greatly influences the access to healthcare, and in Cabo Verde the public system is unable to provide an adequate response to the population. Sources indicate that the minimum wage is around 15,000 CVE, approximately 136€ [10], which is not sufficient to meet basic nutritional needs and to be invested in healthcare.

In an attempt to understand the prices of medical appointments and examinations, **Cuida d'bo** contacted the public and private healthcare system.

As you can see on Table 1 the price of a mammography in the public system is 17€ which represents about 12,5% of the minimum wage in Cabo Verde.

Table 1 - Estimated price per medical appointments and examinations in CV (conversion from CVE to Euro in October 2024).

	Public system	Private system
Gynecological appointment	3€	32€
Mammography	17€	40€
Cytology	12€	20€
Ultrasound	10€	25€
Minimum Wage	15 000 CVE (136€)	



According to our field investigation in São Vicente, the waiting time for an appointment or examinations, such as mammography, can exceed one year due to the lack of resources and equipment downtime or maintenance.

Long waiting times, healthcare costs that far exceed the minimum wage, and a general lack of knowledge combined with misinformation about healthcare, cultural beliefs, fear, and shame all create significant barriers to disease-prevention behaviours. These conditions discourage women from seeking essential care, often leading to late-stage breast cancer diagnoses in the country.

2.2 A picture from the field

Data obtained by **Cuida d'bo** throughout its activity, explained in detail in [Section 3.2](#), provides some additional insights to the reality of the island: the health literacy is very poor among the women we contacted, and they lack the habit of visiting a gynecologist as regularly as advised.

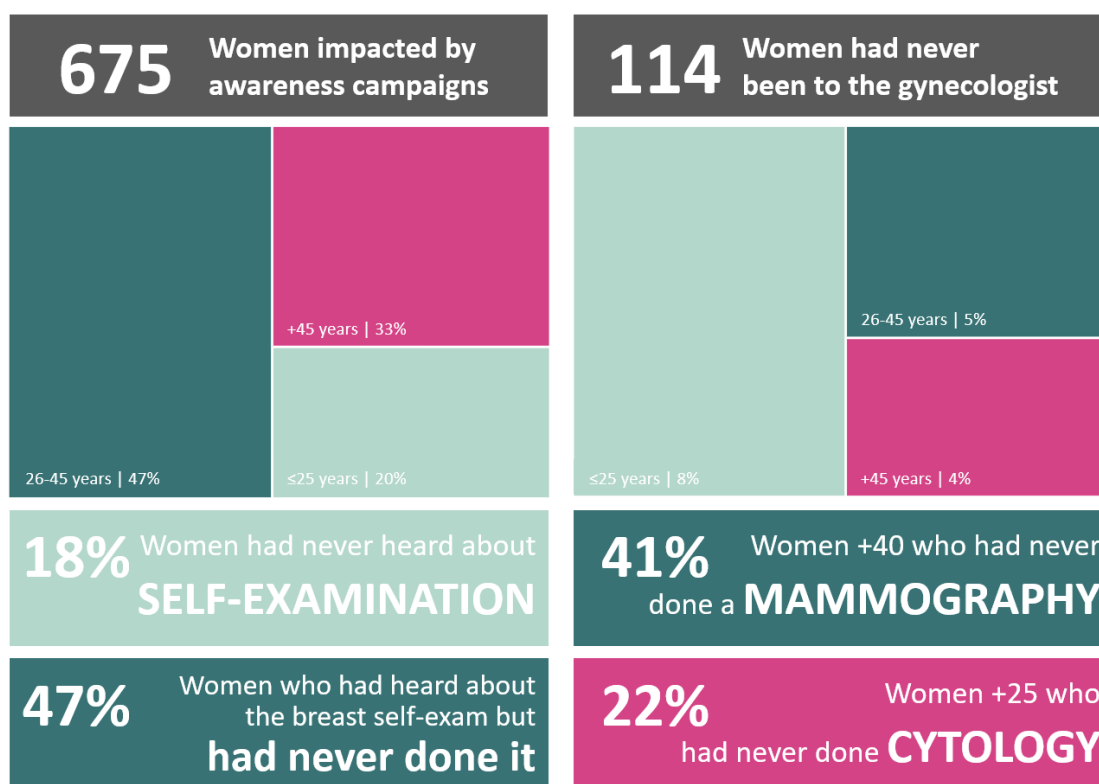


Figure 1 - Summary of women impacted by awareness campaigns per age group, and data regarding their behavior related to gynecological healthcare prevention.



The numbers expressed in [Figure 1](#) demonstrate inadequate access to the healthcare system for routine gynecological consultations, emphasizing the need for **Cuida d'bo** to develop dedicated work in raising awareness about women's health, which includes providing more equitable access for women in economically disadvantaged contexts.

Improving early detection rates in Cabo Verde is vital for saving lives.



3. ADDRESSING THE PROBLEM

3.1 Early Journey

The project from which **Cuida d'bo** arised, which happened in **June 2023**, was only meant to **create awareness** for breast cancer and explain how to do the breast self-exam in vulnerable communities.

However, quickly it was noticeable that the Cabo Verdean women did not check their gynecological health in a regular basis. It was decided that **data should be gathered** during the



awareness campaigns, so that, later on, it would be possible to redirect the women in most need to see a doctor. A total of 50 women were in the database at that stage.

Contacts with **gynecology clinics and doctors were initiated**, so that they would partner with this project. We reached *Verdefam*, an association for the protection of family in Cabo Verde that includes gynaecology appointments in its services and agreed on a cheaper price for the women that were sent from the project. In parallel, **Dra. Nilce Santos**, a gynaecologist, was also reached and agreed to see these women for free in one of the public health care centers of the island, in Bela Vista. **Consultations began in October 2023.**

A total of **800€ was raised** at this earlier stage in Europe, through the help of friends and co-workers, in order to provide initial financing for the necessities of the project – which included consultations for Verdefam and any subsequent exams prescribed.

In **October 2023**, in a return to Cabo Verde, door-to-door awareness and data collection was continued in vulnerable communities. More women were added to our database. Priorities were defined at this stage and later refined, with the help of doctors that we knew in Europe.

In parallel to the door-to-door awareness campaigns, local Associations and entities were contacted to evaluate their interest in receiving a round table awareness campaign for breast cancer. Round tables were organized with the support of Aldeias SOS, Organização das Mulheres de Cabo Verde (OMCV) and Estabelecimento Prisional da Ribeirinha. The women who participated in these rounds tables were also added to our database.





Factors such as misinformation, cultural beliefs, fear and financial constraints often prevent women from seeking the necessary care.

3.2 Official Operational Journey

The official operation journey of **Cuida d'bo** was refined throughout time, consisting now of five main steps, as described in the [Figure 2](#) below.



I. Awareness and Data Collection

Volunteers perform awareness campaigns and collect data, used to attribute priorities to women, according to their need to go to a medical appointment

Priority 4

Priority 1, 2, 3

II. Initial Medical Examination

1st medical appointment in private sector
(according to priority)

Urgent
examinations

Routine
examinations

Private sector

Public sector

Carrying out prescribed ultrasound, mammography,
Cytology and/or others

III. Examinations Review

2nd medical appointment in private sector for review

Anything Suspicious?

No

Yes

IV. Suspicious Confirmation

Extra examination (biopsy)

Cancer Diagnosis?

No

Yes



V. Treatment

Figure 2 - Cuida d'bo Operational Journey.



I. **Awareness and Data Collection:** Volunteers for **Cuida d'bo**, who receive prior training, perform awareness campaigns, both door-to-door and round tables, the latter with partners. During a campaign, the symptoms of breast cancer are explained, as well as how the breast self-exam should be performed. A leaflet summarizing this information is distributed as educational material to the approached women. Volunteers also explain the importance of visiting a gynaecologist or their general practitioner regularly for the routine examinations. Additionally, and with consent, data is gathered in an online form. This adds the women to our database and the answer to the questions is used to determine their priority to visit a gynecologist.

These priorities are defined from 1 until 4 and the criteria is based on symptomatology, age and how long it has been since the last time women visited a gynaecologist, as explained in [Table 2](#).

Table 2 - Cuida d'bo priority definition.

Has symptoms?	Age	How long since last medical visit?	
Yes	-	-	Priority 1
No	>45 years	Never	Priority 2
		>5 years	Priority 2
		2-5 years	Priority 3
		Until 2 years	Priority 4
	26-45 years	Never	Priority 2
		>5 years	Priority 2
		2-5 years	Priority 3
		Until 2 years	Priority 4
	≤25 years	Never	Priority 3
		>5 years	Priority 3
		2-5 years	Priority 4
		Until 2 years	Priority 4



Women assigned with priority 1 are immediately referred for a consultation with a clinical partner, as well as priority 2, while women with priority 3 are manually reviewed to assess the remaining flow. The attribution of priority 4 means that women are considered self-sufficient in taking care of their gynaecological health, but nonetheless acquire knowledge about the breast cancer symptoms and self-exam and the importance of keep looking after themselves.

- II. **Initial Medical Examination:** According to their priority, women are sent to our partners for a gynaecological consultation. The practitioner will examine them and make any prescription if they consider it necessary. Prescriptions can include medications and examinations such as: cytology, mammography, vaginal ultrasound or breast ultrasound.
- III. **Examinations Review:** According to their revised urgency, women can either be sent through a routine flow, which consists of scheduling the required exams in the public system, with the normal waiting times; or they can be sent through an urgent flow. For this last case, **Cuida d'bo** promotes and finances scheduling exams in the private sector, which has considerably shorter waiting times. Women are informed that they should reschedule a second appointment, also financed by **Cuida d'bo**, after they have their exam results.
- IV. **Suspicion Confirmation:** If, after evaluating the first set of exams, the practitioner has a suspicion for breast cancer, they will prescribe additional exams, financed by **Cuida d'bo**, which can include a biopsy.
- V. **Treatment:** If the results confirm the presence of cancer, the treatment phase shall start. Fortunately, it never happened, and this path is still under refinement due the lack of innovative treatment options in Cabo Verde and health protocols with Portuguese government, but it is **Cuida d'bo's** goal to be involved as well.



3.3 Cuida d'bo in 2024

Throughout time, and during the year 2024, more volunteers were received in Cabo Verde to do the awareness campaigns, both door-to-door and round tables. Contacts with local clinics and doctors continued, to redirect the most concerning women according to the defined priorities and to better understand the healthcare reality in the island.

After the successful visit to São Vicente in October, we initiated a new fundraising campaign on the *GoFundMe* platform to secure funding for consultations and medical exams. The campaign page provides a detailed account of the project's journey, including the milestones we have reached and the impactful steps we have taken so far.

To broaden our reach, we shared the campaign on our personal *Instagram* profiles, encouraging friends and colleagues to do the same. This not only expanded our audience but also helped build trust and credibility, as the message was shared by individuals who are genuinely committed to the cause.

In parallel, the educational materials provided in the awareness campaigns, the structure of the project team and the operational flow were refined and improved, while the foundation of **Cuida d'bo** as an official NGO was initiated, to give continuity to the project and scale it.

More information on the partners and entities **Cuida d'bo** has been working with can be consulted in the [Section 3.4](#). More quantitative information on the results, namely, money gathered and how it is being used to finance gynecological care, can be consulted in [Section 4](#).

3.4 Partnerships: The power of collaboration

Since its beginning, **Cuida d'bo** has made the effort to establish several partnerships with other associations and entities, either to reach more women or to have the necessary support to proceed with the regular course of its activities.

The [Table 3](#) describes the partners and their role for **Cuida d'bo**.



Table 3 - Official Partners of Cuida d'bo.

Official Partner	Role
<u>Volunturismo</u>	<ul style="list-style-type: none">☪ First point of touch and home for the field volunteers☪ Coordination with local entities in São Vicente
<u>Verdefam</u>	<ul style="list-style-type: none">☪ Non-profit organization☪ Provided gynecological consultations at a lower price
<u>SAMEG</u>	<ul style="list-style-type: none">☪ Healthcare clinic☪ Provided gynecological consultations at a lower price
<u>LCCC</u>	<ul style="list-style-type: none">☪ Locally fighting cancer in the island of São Vicente, we have joined efforts in several initiatives

Other associations that **Cuida d'bo** has had initiatives with, mostly to reach women in the format of round tables, are:

- ☪ **OMCV:** Cabo Verdean non-governmental organization dedicated to the defense of women's rights and the promotion of gender equity.
- ☪ **Aldeias SOS:** Independent, non-governmental social development organization, with no political or religious affiliations, that works in favor of underprivileged children and their families, in collaboration with communities, partners, and governments.
- ☪ **Cruz Vermelha:** Its mission is to prevent and alleviate human suffering with impartiality and without any discrimination, including on the basis of nationality, race, gender, class, religion, or political beliefs.
- ☪ **Kredita na Bo:** Social program of the Adored Sisters, providing comprehensive care to women in situations of prostitution, victims of trafficking, and in penitentiary contexts.
- ☪ **Estabelecimento Prisional da Ribeirinha:** Prisional establishment that receives inmates from the islands of São Vicente and Santo Antão. Has a medical team, with whom **Cuida d'bo** established contact with to raise targeted health initiatives.

Our goal is to keep establishing partnerships, both with associations where we can reach more women to spread awareness about their health, but mostly with clinics in the island that can provide gynecological care for the women who need it.



4. IMPACT: PATIENT OUTREACH METRICS

4.1 Our volunteers

Cuida d'bo has collaborated with 27 volunteers, 20 of whom have been involved in fieldwork in Cabo Verde, and many of them continue to be actively involved in projects within departments. Currently, human resources, coupled with funding, are the best asset of **Cuida d'bo** to elevate our daily work and contribute to increasing the literacy of Cabo Verdean women for the prevention and early diagnosis of breast cancer.

4.2 Our financial impact

From June 2023 until October 2024 Cuida d'bo raised about 3883€ via different sources as can be consulted in [Figure 3](#). 48% of the money raised was donated by 'Family and friends' followed by 40% that was raised through corporate events.

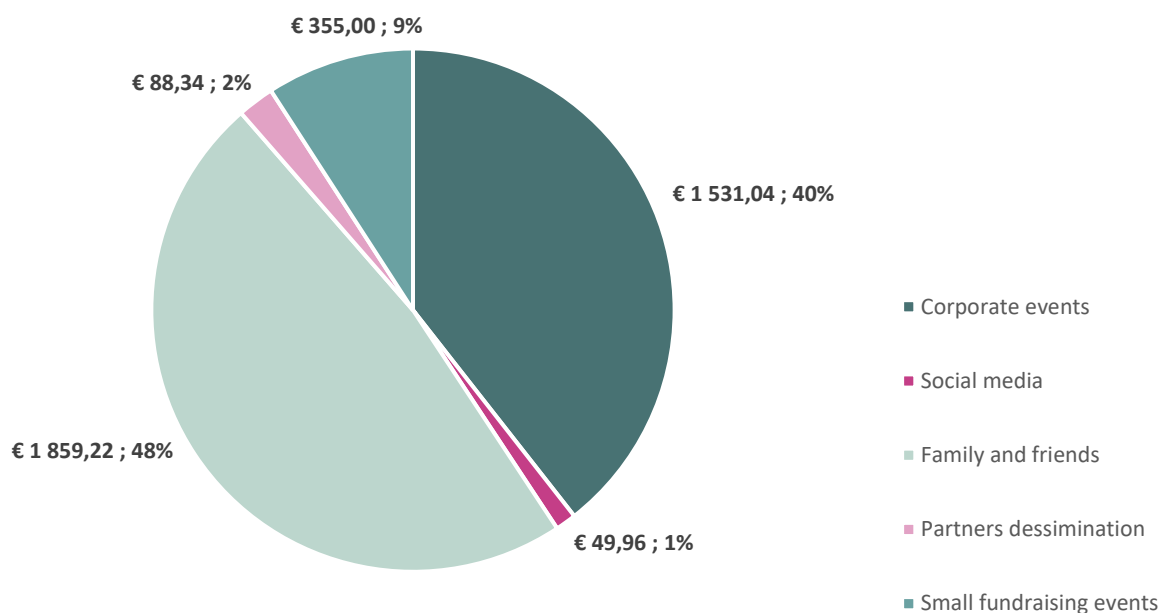


Figure 3 - Donations raised by Cuida d'bo per category.



A total of 2037,92€ was already allocated mainly for the payment of medical appointments and examinations for women in situation of vulnerability (68%) and for the printing of educational materials for door-to-door awareness campaigns (11%). Details can be seen on [Figure 4](#).

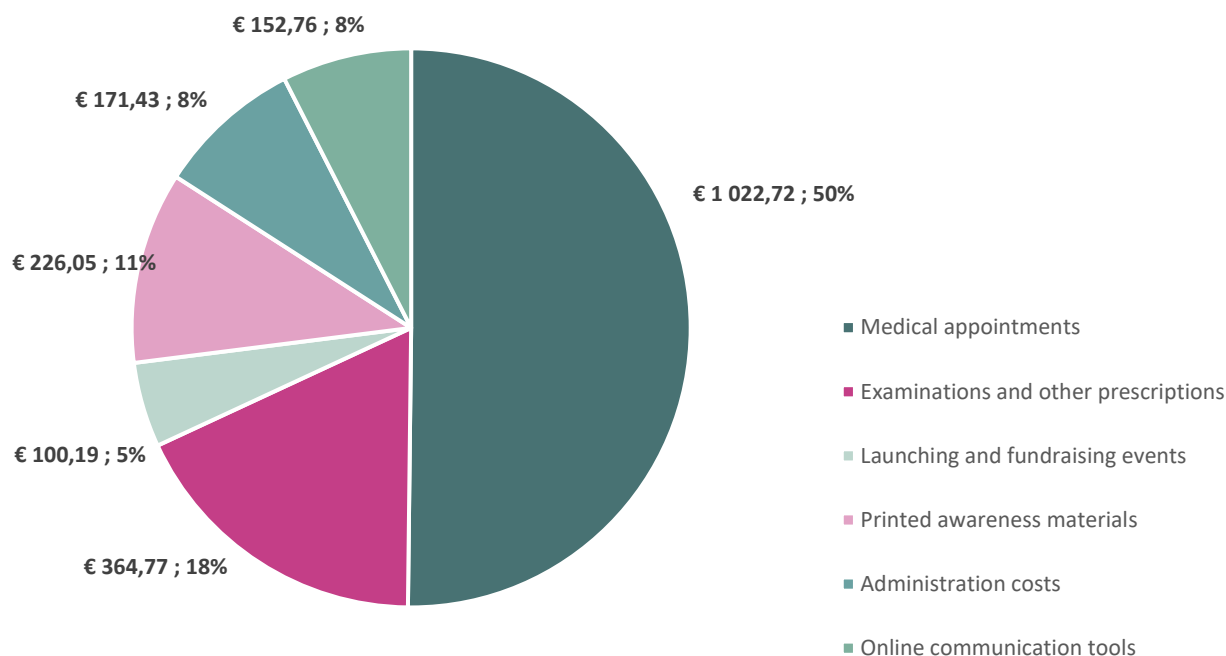


Figure 4 - Money invested by Cuida d'bo per category.

4.3 Our impact within the community

We are proud to have reached 675 women through these awareness initiatives and until now have facilitated 86 medical appointments, facilitating the prescription of more than 200 exams, which these women would not have been able to afford otherwise.

The number of women impacted has been increasing over time, as expected given the growth of **Cuida d'bo** and the increase in the number of volunteers. In the first semester of 2023, when the project began, we reached 54 women, and by the end of the year, 73 more. After redefining our steps and with the support of partners, in 2024 we decided that we had the capacity to reach more women, as our expansion and financial capabilities were sufficient to redirect more people



to consultations. We reached 212 in the first semester, and from July to October 2024, we reached 336 more. The [Figure 5](#) to the Database throughout time by priority demonstrates the evolution in number of impacted women throughout time and evidences the split per priority.

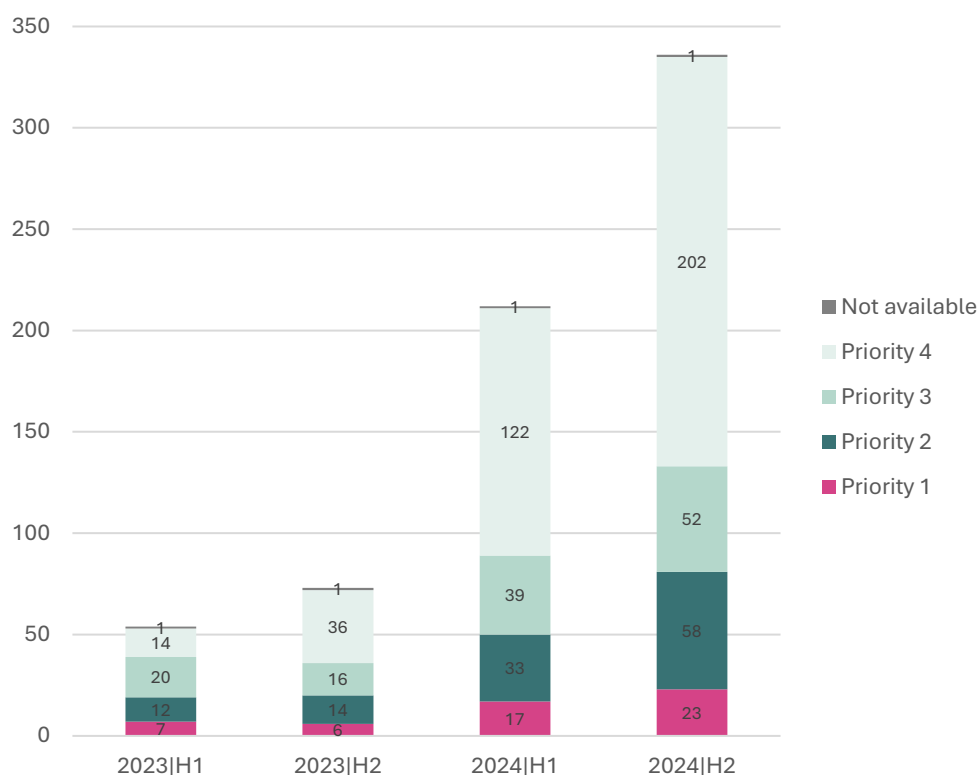


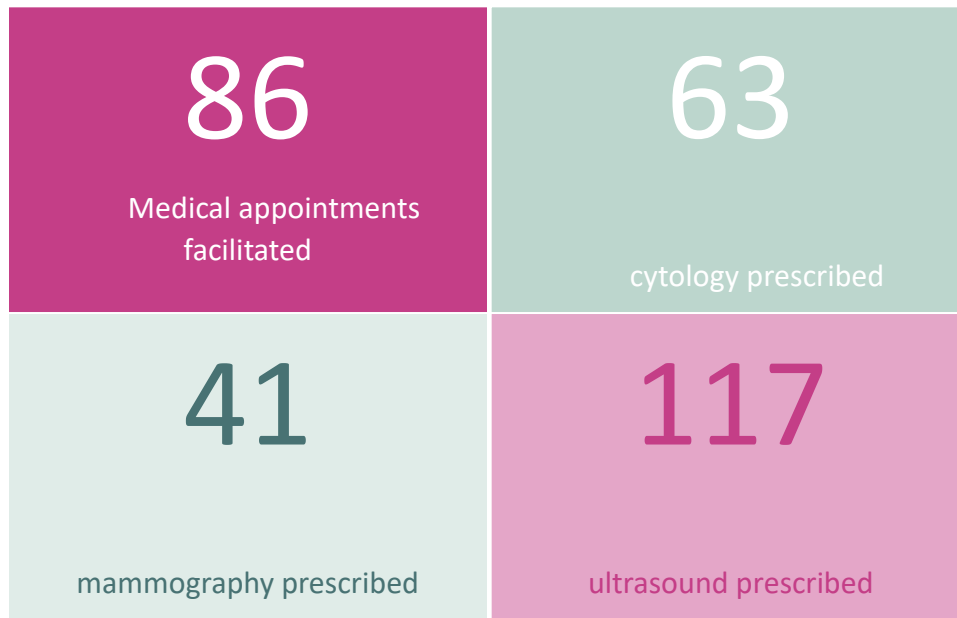
Figure 5 - Number of women added to the database throughout time by priority.

Volunteers make the effort to collect all required information needed to feed our database, however, due to the low level of literacy, some women do not know their age and do not have the identification document. In these cases, the need for consultation is manually assessed, although no priority is assigned, the reason why in the graph it appears as "Not available".

The real impact of our awareness efforts is reflected in [Table 4](#), as evidenced by the number of initial and follow-up consultations and diagnostic tests prescribed.



Table 4 - Details about gynecological actions financed throughout time.



Although the aim is to maintain this pace of impact, we are also committed to have a real impact on the community, not only through the education and awareness, but also by ensuring that women are receiving the best quality healthcare that they deserve.

We aim to empower the women to schedule their own diagnostic exams and appointments, enabling them to take charge on disease prevention without constant intervention. However, we recognize that increasing literacy must be an ongoing effort.

Considering that, we are reviewing our database and operational journey to make sure that all women in need not only are able to get a medical appointment but also get all necessary examinations within adequate timelines.



5. FUTURE GOALS: ADVANCING OUR VISION

Our goal for 2025 is to continue working in the field, door-to-door, to increase the health literacy of women, gather more population data, and maintain support for consultations and examinations for women in need.

Our mission is to enhance healthcare access for Cabo Verdean women, facing the innumerable challenges due to low literacy, lack of women's commitment to their health and well-being, and social and economic barriers. Considering the challenges, **Cuida d'bo** is focused on its pillars, being committed to:

- ☪ **Facilitating access to information:** dedication to keep our awareness campaigns, continuously improving our educational materials and through the involvement of partners to reach communities more effectively and make people accountable for their healthcare.
- ☪ **Providing support and resources:** aim to enhance the consultation and examination monitoring platform to streamline the interface between **Cuida d'bo** and our partners, ensuring timely healthcare provision. Additionally, we are committed to explore the oncology patient pathway, understanding the areas that could be improved with our assistance, and empowering healthcare professionals to provide better access to an early diagnosis and treatment.
- ☪ **Advocating for inclusive health policies:** our desire is to be part of the healthcare ecosystem shaping. **Cuida d'bo** aims to work closely with governmental health services, such as the “*Delegacia de Saúde*”, to continuously map the state of health in Cabo Verde and establish measures to build a stronger and more inclusive health system capable of providing efficient responses at all stages of cancer diagnosis and treatment.



Despite the first project of **Cuida d'bo** being focused on breast cancer, our ambition is greater in empowering women in various health-related matters, always with the goal of making prevention the primary focus and educating on risk factors, signs, and symptoms.

Another significant cancer in Cabo Verde is cervical cancer. According to 2022 data, it accounts for 20,8% of cancers in women (46 cases per year) and it is the 3rd most fatal cancer, with a mortality rate of 9,5% in the overall population, which represents a high burden [4]. Efforts have been made to mitigate cervical cancer, and there are tools that can be implemented, such as a formal screening process and vaccination as a prevention method. Vaccines are already available in Cabo Verde but for now not adequately disseminated within the community.

Cuida d'bo has dedicated departments managing ongoing projects and fundraising initiatives to improve women's access to healthcare. Active planning and field work are crucial to re-think and shape new broadening health initiatives, by enhancing the focus on gynecological care and upgrading the healthcare ecosystem in Cabo Verde.

*Our vision is to empower and inspire
Cabo Verde women to embrace self-care
and embody the motto “Cuida d’bo”.*



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