

# Forging a Sustainable Response to HIV/AIDS in the Caribbean – the Strategic Role of a Regional Conference

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The paper provides a rationale for a Caribbean HIV/AIDS Conference as a key ingredient to the regional response mechanism. This initiative stems from the need to address crucial elements of the regional response within the realities of the present regional economic situation and global financial climate, as well as epidemiological and demographic trends. A mixed method approach was adopted for this study, drawing on both primary and secondary data collection techniques. A small survey of leaders and senior practitioners formed the basis of the primary data collection phase, complemented by key informant interviews. The paper proposes a model for a Caribbean HIV Conference that can better position the regional response in line with the present global and local socio-economic and health landscape. Central to this model is the repositioning of the Conference from an “Event” to being an “Activity” in the regional planning agenda and the positioning of the Conference as a fundamental fixture of the region’s health calendar. The positive externalities from the synergies developed around the Conference can be identified in terms of the quantifiable costs savings to Agencies. The less quantifiable path relates to networking, exchanges and stronger regional ties that are facilitated through the activity. The main findings of the survey of health leaders indicate significant support for an ongoing regional conference. The results therefore endorse the location of a Conference entity together with the relevant support mechanisms as a key feature on the Caribbean’s health landscape. [P R Health Sci J 2012;3:180-184]

*Key words: Caribbean HIV/AIDS Conference, Regional, Economic situation*

## A Review of the Caribbean HIV landscape

Since its first officially reported case in 1981, HIV/AIDS has continued to carve a significant mark on the Caribbean’s demographic, social and economic landscape. By the end of the 1980s cases of HIV/AIDS were reported across all Caribbean countries. By 2001 there were 210,000 people living with HIV/AIDS (PLHIV) and, by 2008, it was estimated that there were between 210,000 and 270,000 persons living with HIV (PLHIV) in the wider Caribbean (1-3).

HIV/AIDS continues to be a major cause of mortality and morbidity among a number of Caribbean countries, this in spite of the gains associated with antiretroviral treatment (ART) which has seen coverage increase from 1% in 2004 to 51% in 2008, resulting in a 40% reduction in the number of AIDS-related deaths in that year. It is the leading cause of death among men and women aged 20-59, at 15.7% and 14.5% of deaths respectively (1, 4). Additionally, the observed decline in new infections over the last eight years stood at a mere 4.8%. When taken within the context of a considerable increase in life expectancy of PLHIV, the number of persons living with HIV and requiring continuous care and support has, and continues to gradually increase.

All countries in the region have established national coordinating bodies as part of their response to HIV/AIDS.

National responses are also coordinated around National Strategic Plans that have been developed in most countries of the region and guided by a Caribbean Regional Strategic Framework (CRSF).

At the regional level, support to national initiatives in response to the HIV epidemic is provided by a number of entities. The Pan Caribbean Partnership in HIV/AIDS (PANCAP), which was established in 2001 by the Caribbean Heads of Government and put under the leadership of CARICOM, coordinates the regional response for HIV, which is guided by a Regional Strategic Framework. Other regional entities which provide support to National programmes include The Caribbean Regional Network of PLHIV (CRN+), and the Caribbean Vulnerable Communities Coalition (CVC) which work closely with PANCAP. PANCAP’s core functions include:

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- maintaining a unified vision and direction among all partners in reducing the spread and impact of HIV/AIDS in the region;
- coordinating the activities/programmes of partners at the regional level;
- acting as a “clearinghouse” for information for decision-making;
- building capacity among partners;
- monitoring the impact of programmes in member states and organisations;
- streamlining programmes and projects to avoid duplication of effort and thereby maximise the use of resources (5, 6).

The regional and national response for HIV/AIDS has, and continues to receive significant financial and technical support from the international donor community. Among the key agencies providing support include UNAIDS and co-sponsors (PAHO/WHO, World Bank, UNICEF, UNDP, UNESCO, ILO, WFP, and UNFPA), in addition to the US Government (USG) through its key (USAID and Centers for Disease Control and Prevention (CDC)). Two key programmes which presently provide a substantial share of the opportunities for national and regional response is the Global Fund for AIDS, TB and Malaria (GFATM) and The President’s Emergency Plan for AIDS Relief (PEPFAR) initiatives. Through these initiatives, programmes have received considerable funding at both the national and regional levels.

Heavy reliance on overseas funding sources for core aspects of the national and regional response continues to be a feature of the regional and national HIV/AIDS response. It has been estimated that over US\$1.3 billion was provided by donors to support the national and regional programmes for HIV/AIDS over the last 8 years (1). The changing economic climate, through its impact on the larger developed countries, have over the last three years, affected the core lines of support from international donors. This has resulted in significant fallout as financial support have been substantially reduced to countries as fewer resources are available to support HIV/AIDS programmes, in countries in need. Caribbean territories have therefore found themselves with the dual challenges of insufficient capacity on one hand and inadequacy of resources on the other hand.

Another feature of the health landscape is the dominance of chronic non-communicable diseases as a growing source of mortality and morbidity among Caribbean territories, and a major demand on national and regional health systems. This is driven in part by epidemiological and demographic transitions linked to rapidly ageing populations. The competing demands on the resources in the health coupled with demands on the state’s purse to address other social challenges such as crime and the environment threaten to expose these programmes to varying degrees of resource swapping across key areas. The situation therefore places increasing demands on the health sector to maximize both the efficiency and effectiveness of

its resource use across all disease conditions, maximizing and exploiting the relevant synergies where possible.

In order to effectively address the challenges to the health response in general and specifically that related to HIV/AIDS, a number of key approaches must be adopted; these include

- The need for a rigorous research agenda to address the shortcomings of the responses to date and evaluate the potential of new and innovative approaches that are on the agenda
- The need to address key elements of the regional response within the realities of the present Economic situation and global financial climate, as well as the epidemiological and demographic trends, this in turn calls for:
  - Greater emphasis on monitoring the effectiveness and efficiency of resources allocated across programmes; and
  - The need to address areas of commonality and explore fully the adoption of a more integrated approach to the HIV/AIDS response into the broader health system.

The proposed approach emphasizes the importance of monitoring and evaluation (M&E) in the response mechanism and the central role of the research function in support of the M&E function both in the form of operations research as well as the more deeper and probing methodologies that aim to address and shed light on the key “why” questions the drive the social and economic determinants of the epidemic.

These areas have been flagged as central to PANCAP’s regional response as captured in the Caribbean Regional Strategic Framework (CRSF).

“National health systems will be strengthened to enable the delivery of enhanced HIV/AIDS services.....There will be greater emphasis placed on monitoring and evaluation, in order to be able to both demonstrate the success of implementation activities and also provide information for a more sensitive response. This will be complemented by more research to inform programme design, in particular in the areas of stigma and discrimination where considerable efforts are required to counter deep underlying social constraints to a successful response” (6).

Efforts at forging a more sustainable HIV response in the region can also be captured in the new strategic direction and focus of the Pan American Health Organization with its renewed focus on a Primary Health Approach to addressing the HIV response. This new focus, which emphasizes health systems strengthening as the platform for building a more sustainable HIV and related health response, has resulted in a gradual shift in the dialogue that is increasingly addressing HIV within the context of more integrated health service delivery models.

The issue of a sustainable HIV response is not necessarily new and has been included as a key item in such conferences as the The International conference “Towards Sustainable Global Health” (7). The conference organisers included UNESCO-

International Centre for Technical and Vocational Education and Training (UNEVOC), ILO, and the University of Bonn, and it addressed HIV sustainability within a broader range of issues related to human health in general. The topic of the sustainability of the HIV response has, and continues to be a feature of the International AIDS conferences over the years. The topic has gained in importance with the present restrictive financial environment and the continued prospects of a reduction or curtailment of funding to programmes at the national and regional level and its disastrous consequences.

## Materials and Methods

This paper explores the critical role of conferences in facilitating the required response to the challenges to the health and specifically the HIV/AIDS landscape in the Caribbean.

In addressing this issue a Mixed Methods methodology was adopted, drawing on both primary and secondary research techniques. The latter was based on a review of Literature including reports from national and regional HIV/AIDS programmes. Primary Research involved the conduct of a survey of practitioners and professionals across the region in HIV/AIDS and Health. This was supplemented by key informant interviews with a number of agency representatives from the CARICOM/PANCAP, UNAIDS and PAHO offices in the region.

### The role of conferences as a key learning tool

The importance of social interaction to intellectual development has been highlighted in the literature for some time now, where scholarly communication patterns; conversations in hallways telephone conversations and more recently, e-mail exchanges, have been cited as essential to the growth of knowledge of the individual by Weedman (8). To this end, the conference has been highlighted as a major facilitator to such knowledge growth.

Conferences in academia and research have been cited as providing the managed occasion for supporting both knowledge sharing and knowledge building (9). According to Jacobs and McFarlanew, conferences offer the means whereby the inexperienced mix with the more experienced and in so doing gain a fuller understanding of how plans and theories and models are applied, practiced and presented to inform decisions. Conferences also provide the forum wherein socio-cultural knowledge building and sharing take place. A conference is therefore defined as a managed event for formal presentation of recent developments in the field and community evaluation of those developments, discussion of the interpretations and implications of those developments. The conference can be interpreted as creating community that fostered social and intellectual relationships and created an environment for communication and interaction involving new and established researchers, policy makers and key stakeholders (10).

With this in mind, the Caribbean HIV/AIDS conference can be seen as a mechanism for guiding future action and collaboration in the area of HIV/AIDS, through the creation of forum for:

- informing the future research agenda based on sharing the experiences and an indication of the challenges before us;
- the dissemination of research to guide and inform Policy
- facilitating information exchange between scientists, NGOs, the At-Risk Populations, Donors, Partners and Policy Makers.

In performing these functions the conference creates the opportunities to support PANCAP in such core functions as information dissemination for decision-making; capacity building, programme monitoring and streamlining.

### Feedback and views on a Caribbean conference – demands side

Thus far in our exploration of the role of a regional conference we have focused purely on the supply side. In an effort to better gauge the situation from the demand side, the potential targets of the conference activity, a survey was administered to a cross-section of senior practitioners and professionals in the area of HIV/AIDS and Health. This survey was carried out by means of a self administered questionnaire. Purposeful sampling was implementing. As a non-probabilistic sampling approach, this has the benefit of focusing in a deliberate manner on a specific group of interest. A total of 60 invitations were sent out to persons to participate in the survey. Of this a total of 44 responded, giving a response rate of just over 73 percent. Those who were sampled came from International Agencies (12%), Ministries of Health and other Public Sector entities (49%), National NGOs (2%), Regional NGOs (14%) and other entities (23%) from across the English and Non English speaking Caribbean. Survey Monkey was used to administer the survey instrument. Respondents were not required to give their names thereby allowing the opportunity to respond freely to the questions asked.

## Results

Respondents were questioned on the frequency with which HIV/AIDS policies and plans were discussed involving all key stakeholders in country. Based on the responses, it was reported that these discussions were held in large part at least once annually, as reported by 78% of the respondents interviewed, and shown in table 1.

On the issue of the frequency of HIV/AIDS related workshops and conferences, one half of the respondents interviewed indicated that these meetings were typically held at least once yearly. It is noteworthy however that over one quarter of the respondents (26%) also indicated that research dissemination was done in intervals of 3 or more years. A detailed breakdown is provided in table 2.

**Table 1.** Frequency key in-country HIV plans & policies are discussed

	Response
More than once per year	51.2%
Once per year	26.8%
Every 2 years	4.9%
Every 3 years	0.0%
Every 4 or more years	2.4%
Very Rarely	14.6%

Source: Computed

**Table 2.** Frequency in-country HIV research is disseminated

	Response
More than once per year	16.7%
Annually	33.3%
Every 2 years	9.5%
Every 3-5 years	2.4%
Less frequently	23.8%
Never	14.3%

Source: Computed

The respondents surveyed were regular attendees at HIV/AIDS and health related conferences with just fewer than 55% of them indicated that they had attended 4 or more such conferences in the last 5 years. Respondents gauged the success of a conference by extent to which opportunities for networking were provided. They were also encouraged by the presence of innovative research and information, as well as opportunities for capacity (skills) building as shown in figure 1.

Interest in regional conferences was generally very high with 89% of the respondents expressing their support for a regularly held HIV/AIDS conference, while a significantly higher 94% expressed support for a regularly held conference on the broader heading of health as captured in table 3 below. This was further verified by the lion share of respondents (86%) who saw significantly more value in a health conference which included HIV/AIDS, than a standalone HIV/AIDS conference. Respondents also expressed the view that these conferences are best held at two to three year intervals.

### Discussion

A review of the survey findings reveal significant interest in positioning the conference as a key fixture of the region’s health calendar, as depicted in the overwhelming support for conferences in both HIV/AIDS and broader health issues. The presence of regular dialogue on issues around HIV/AIDS involving key stakeholders

**Table 3.** Level of interest in regional HIV & health conferences

	Regional HIV conference	Regional Health conference
Very Interested	64%	80%
Somewhat Interested	25%	14%
Uncertain	4%	4%
Not Very Interested	7%	2%
Not at all Interested	-	-
Total Respondents	44	44

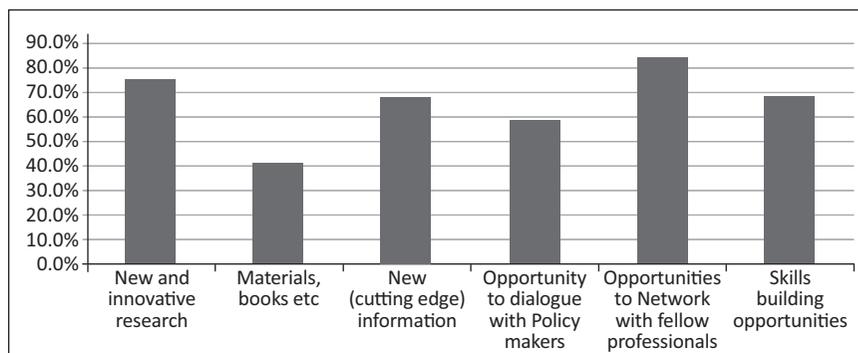
Source: Computed

across national programmes, as well as degree of research, provide the basis for information and experience sharing using the conference as the forum with which to do so.

This makes the case for repositioning the conference away from an “Event” towards being an “Activity” in the regional strategic HIV/AIDS landscape. In so doing the Caribbean can be aligned within the CRSF as a key medium through which the information dissemination, M&E, capacity building and broader research functions of PANCAP can be fulfilled. Additionally, the interest expressed in a broader health conference makes the case for a broader Caribbean Health conference as a key fixture on the regional health agenda. This model makes for an easy fit into the existing regional structure for health.

The benefits of a conference that spans the Caribbean regional health agenda inclusive of HIV/AIDS include the opportunity to exploit the positive synergies across key areas in the region’s health agenda such as the sharing of good practices and experiences as well as the charting of future research agendas. The regional approach to a conference brings with it, as well, significant costs savings through the hosting of key meetings and skills building sessions involving those present at the larger conference. The savings here in travel and related costs to National, Regional and International agencies are significant, as regional meetings typically costs between US\$20,000 to US\$70,000, with over 90% of this cost incurred in travel and hotels related costs.

Moreover a Caribbean conference that brings together, academia, policy, technocrats, practitioners and community



**Figure 1.** Indicators of a successful conference. Source: Computed

has the potential to reinforce and strengthen the benefits of the regional mechanism in addressing the challenges of a sustainable HIV/AIDS and wider health response, with positives spin off to the national programmes.

Locating the conference as a key strategic activity on the regional planning agenda begins the process of repositioning health at the center of the region's development agenda "The Health of our Region is the Wealth of our Region" (11).

## Resumen

Este artículo provee fundamentos para una Conferencia de VIH/SIDA en el Caribe como ingrediente principal del mecanismo de respuesta regional a la epidemia. Esta iniciativa surge de la necesidad de atender asuntos cruciales de la respuesta regional en el contexto de la situación económica en el Caribe y del ambiente económico global, así como de las tendencias epidemiológicas y demográficas. Este estudio se realizó utilizando métodos mixtos y combinando técnicas primarias y secundarias para la recopilación de datos. La fase de recolección de datos primarios se basó en una pequeña encuesta a líderes y profesionales de servicios, complementada con entrevistas a informantes clave. El artículo propone un modelo para una Conferencia de VIH en el Caribe que contribuya a ubicar la respuesta regional de manera más congruente con el panorama socioeconómico y de salud actual, a nivel global y local. Para este modelo es fundamental establecer la Conferencia en la agenda de planificación regional como una "actividad" en lugar de un "evento" y posicionarla como una pieza esencial del calendario regional para asuntos de salud. Los efectos positivos de la sinergia desarrollada alrededor de la Conferencia pueden identificarse en ahorros cuantificables en las agencias de la región. Los menos cuantificables están relacionados con el establecimiento de redes, intercambios y vínculos regionales más sólidos, facilitados por esta actividad. Los hallazgos principales de la encuesta a líderes en salud indican un apoyo significativo a una Conferencia

regional continua. Por consiguiente, los resultados apoyan el establecimiento de una entidad a cargo de la Conferencia junto con los mecanismos de apoyo necesarios, como un componente esencial para el escenario de salud en el Caribe.

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