

• SPECIAL ARTICLES FROM THE 2011 CARIBBEAN HIV CONFERENCE •

EDITORIAL: Turning the Tide in the Caribbean: A Call to Strengthen the Evidence for a Sustainable Response to HIV/AIDS

HIV continues to be one of the greatest challenges to global health in modern times. An entire generation has grown up not knowing a world without HIV. As of 2011, approximately 34.2 million persons were living with HIV, nearly 2.5 million acquired the virus, and 30 million people have died of HIV-related causes worldwide. Globally, the Caribbean is the second region most affected by the HIV epidemic following the Sub-Saharan Africa. By 2011, more than 230,000 persons were living with HIV, approximately 12,000 adults were newly infected, and an estimated of 10,000 people died from HIV-related causes in the Caribbean (1, 2). In general, this epidemiological data from the Caribbean represent a decrease when compared to the trends reported a decade ago. Still, several countries in the region remain with a HIV prevalence rate equal to or over 1.0% (3).

The Caribbean region is diverse in cultures, languages, and sociopolitical organizations and is also diverse in HIV trends and the responses to the epidemic. The HIV epidemic in the region has been mostly driven by sexual transmission, and historically Bermuda and Puerto Rico have shown an epidemic driven by injecting drug use (IDU) (4). Nonetheless, new trends show a shift and an increased risk through IDU in the region as a whole and by sexual transmission, particularly among men who have sex with men (MSM) in Puerto Rico (5). Although challenging, this scenario offers an opportunity to exchange the local and regional experiences for prevention and treatment. It's a good time to share our success stories and pitfalls, and to establish regional ties in response to the epidemic.

There are some emergent prevention interventions such as adult male circumcision, pre-exposure prophylaxis (PrEP), treatment as prevention, microbicides, post-exposure prophylaxis, and vaccines that hold great promise. However, there are several challenges to address before suggesting the implementation and scale-up of these strategies, including logistical concerns (such as feasibility, acceptability, and accessibility) and definitely more culturally relevant research. This is particularly true in areas such as the Caribbean where more effective combination of strategies for both primary and secondary prevention have yet to be fully implemented. Moreover, further attention should be placed in the social determinants of health associated with HIV - including housing, education, gender inequities, stigma and discrimination, among others - which affects prevention and care. These social and contextual factors are placing many populations and communities at disproportionate risk. For example, it is not only a matter of economic considerations that as of 2011 only

two thirds of the people with HIV and eligible for antiretroviral therapy in the Caribbean are in treatment (1). Identifying and addressing those factors that challenges preventive practice and access to services through the implementation of health promotion policies is an integral part of the concept of combination of interventions.

This special publication of the *Puerto Rico Health Sciences Journal* on HIV in the Caribbean contributes to the following steps to turn the tide and address the socio-cultural, political, and behavioral barriers to prevention and care in the region. All the contributions are result of the *2011 Caribbean HIV Conference* celebrated in The Bahamas, an event that provided the venue, tools, and opportunities for people of the Caribbean to demonstrate the synergistic results of cooperation and collaboration. The five articles included cover some of the most at risk populations in the Caribbean- including MSM and prisoners-, the emergent mechanisms for HIV prevention, as well as the analysis of the feasibility for a sustainable response to HIV in the region through a regional conference.

In the Caribbean more research as well as theory and practice-based discussions are needed to achieve the goal of an HIV/AIDS free generation. Nonetheless, we hope that the compilation of these articles serves as an additional tool to assess and organize our regional response. Furthermore, we also expect that this and future initiatives continue to emphasize the critical role of Caribbean communities in establishing a sustainable response. This implies early engagement with promising practitioners and researchers, public and private sectors, youth, most at risk groups, and people living with or affected by HIV as central actors working together to turn the tides of the epidemic in the Caribbean by strengthening our own capacities.

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