

HOWARD UNIVERSITY HIV-HCV CARIBBEAN CLINICIANS COMMUNITY OF PRACTICE (HU-CCCoP)



An Emerging Caribbean Regional Threat: HIV and Natural Disasters



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The Caribbean, like the rest of the world is increasingly becoming vulnerable to frequent and damaging natural disasters. While the primary natural hazards facing the region are earthquakes and hurricanes, volcanic activity is also of concern. Similarly, torrential rains often result in catastrophic flooding of low-lying areas causing disastrous mud slides. Furthermore, increasing sea-water temperatures can potentially fuel tsunamis and storm surges and result in disasters. With this predicted increase in disasters, the demand for emergency medical services will also increase. In this region of the world, people in

geographically remote areas or the rural poor, are highly vulnerable to disasters. Economically disadvantaged communities and households have fewer means to protect themselves from, and to cope with, the consequences of natural disasters. Access to basic health services is often minimal or non-existent and, they are often forced to live in areas that are prone to natural disasters such as landslides or floods due to poverty.

We know that during emergencies whether due to loss or misplacement, people often fail to take their medication – this includes HIV medications. The reasons vary from disaster related trauma; limited or no access to medication; to inadequate privacy and confidentiality to guarantee that HIV status is kept private. As a result, these individuals also have a higher risk of transmission if they do not continue their daily antiretroviral therapy.

Because of their compromised immune systems, lack of medication, unsanitary conditions – crowding and poor hygiene, not washing hands properly when handling food, unsafe cooking practices; limited access to food, clean water and other social and psychological support, people who are HIV positive are at increased risk for opportunistic infections. Accordingly, they are at greater risk of physically deteriorating during an emergency or disaster situation as the stress further exacerbates an already strained immune system. As a result, health complications and the possibility of death are an ever-present danger. *Furthermore, the conditions generated by emergencies can serve to increase a person's vulnerability to HIV,* depending on the stage of the infection, especially in situations where levels of infection are already high.

Displacement, because of a disaster, may also bring populations with different HIV prevalence rates into contact with each other. It is also during this time, that a breakdown in basic services essential for preventing STIs including HIV, is evidenced. To prevent HIV from

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persisting and expanding beyond the disaster incident, a response to HIV should be incorporated into the overall emergency response strategy. For example, in addition to medications, condoms are typically not available! And HIV-related stigma makes vulnerable individuals unable to access treatment and support.

Vulnerabilities and health risks of People Living with HIV (PLWH) will increase in a disaster situation if access to HIV prevention, treatment, care and support are not addressed and ensured before, during and after the disaster. It is therefore essential that contingencies are in place to ensure that health services are maintained. And linking local HIV service programs with the post-disaster effort is a major factor in the stabilization of HIV prevalence in the region. Without this preventive planning, the number of people infected with HIV could increase.

Emergency preparedness plans should focus on minimizing the adverse effects of a disaster and help ensure that emergency response is timely, appropriate and adequate. Such preparedness plans should be part of a long-term development strategy and not introduced as a last-minute response to the unfolding emergency. In the case of HIV, such preparedness means that all responders will have received basic HIV training before the emergency, as well as non-discriminatory behaviors towards patients who are HIV positive and their caregivers.

Preventive measures by predictive early warning systems, infrastructure and physical mitigation plans are also vital to recovery and rehabilitation efforts. It also implies that adequate and appropriate supplies specific to HIV are pre-positioned.

An equally important disaster response is to prevent new HIV transmission and provide support for those already affected during an emergency. Medical providers and patients with HIV can also serve to help minimize the impact of these disasters. Providing essential HIV prevention, treatment and care services, in particular the ability to have access to antiretroviral drugs (ARVs) for treatment along with condoms for prevention of HIV infections is vital.

Regardless of the crisis, it is critical that contingencies are in place to ensure that health services are maintained. This is a major factor in the stabilization of HIV prevalence in our Island States. Arguably, it is our responsibility as care providers to develop awareness of existing policy and practice in emergency programs that aim to link local HIV service programs with any post-disaster efforts. This action will help safeguard our patient's health and stabilize HIV prevalence in the region. If, as care providers, we are unable to accomplish this task, the numbers of our most vulnerable populations infected with HIV could easily increase further. The bottom line is that an infectious disease threat anywhere can be a threat everywhere.

HU-CCCoP plans to present on this emerging threat during our next funding cycle.

EMERGENCY PREPAREDNESS RESOURCES FOR PEOPLE LIVING WITH HIV

- Ready.gov offers tips and tools to help you plan ahead for many different kinds of disasters and emergencies. <https://www.ready.gov>
- CDC's Disaster Information for People with Chronic Conditions and Disabilities lists information and resources for those with certain health needs, including people with HIV. <https://www.cdc.gov/disasters/chronic.html>
- The FDA's Safe Drug Use after a Natural Disaster offers information on the use of drugs that have been potentially affected by natural disasters. <https://www.fda.gov/drugs/emergency-preparedness-drugs/safe-drug-use-after-natural-disaster>
- Fact Sheet from the US Virgin Islands: Coping with stress after a disaster or traumatic event. <https://doh.vi.gov/sites/default/files/docs/coping-with-stress-fact-sheet.pdf>

View guidelines for clinicians who care for people living with HIV that have been displaced by disasters.

Developed by the U.S. Department of Health and Human Services:

<https://files.aidsinfo.nih.gov/contentfiles/lvguidelines/DisasterDisplacedHIVCare.pdf>

PREPAREDNESS MATTERS! According to a 2020 report from the United Nations Office of Coordination of Humanitarian Affairs (OCHA), the Latin America and the Caribbean region is the second most disaster-prone region in the world — 152 million people were affected by 1,205 disasters between 2000-2019. **Do your patients have an emergency plan in the unforeseen event of a flood, hurricane, earthquake or other disaster?**

<https://nickrobson.net/ky/2019/01/20/2019-2020-caribbean-latin-america-disaster-readiness-manual/>

https://reliefweb.int/sites/reliefweb.int/files/resources/20191203-ocha-desastres_naturales.pdf

HU-CCCOP Expert Faculty Shares his Thoughts



John I. McNeil, MD, FACP

Born in Trinidad and Tobago, Dr. John I. McNeil is a graduate of Howard University College of Medicine and specializes in internal medicine and infectious diseases. He has had a long and distinguished career in infectious diseases clinical care including HIV and is the principal of his own medical private practice firm in Maryland.

Do you think the Howard University HIV-HCV Caribbean Clinicians Community of Practice Program has strengthened the HIV/HCV clinical workforce in the region?

The Howard University HIV-HCV Caribbean Clinicians Community of Practice Program has responded to the immediate needs of clinicians in the Caribbean region by providing them with a relevant and well-researched series of educational lectures and discussions. The training courses have included the latest information and science when it comes to

the diagnosis, treatment and management of patients living with HIV. Being the second region in the world, behind sub-Saharan Africa, with the highest incidence of HIV, it is critical for clinicians in the Caribbean to have ready access to advanced training courses. As a result of the *HU-CCCOP* training, their analytical and clinical decision-making skills were strengthened enabling them to provide the highest level of care to their patients. Providing access to information and resources is the best way to strengthen the workforce in the region.

What additional resources or opportunities are needed to further enhance the capacity of clinicians in the region with respect to the diagnosis, treatment, management and care of persons living with HIV?

There are very few resources specifically targeted to the Caribbean when it comes to health care. Continuing distance learning programs like *HU-CCCOP* that involve Caribbean experts assessing their own need for information will be valuable. Creating more opportunities where Caribbean experts who are living and working in the

region can collaborate on complex cases related to the diagnosis, treatment and management of PLWH could also be quite beneficial. Discussions with individuals from teaching, research, governmental and development organizations in the Caribbean may help to identify the resources needed to conduct important research into areas such as pharmaceutical and biomedical development, policy needs and direct care resources necessary for the enhancement of HIV-HCV management.

How significant is it that the distance-based HU-CCCoP lectures are presented by a team of culturally competent expert faculty?

The HU-CCCoP lectures were intentionally designed and conducted by culturally competent expert faculty from the US. To ensure that the lectures were culturally appropriate, the US faculty included individuals with HIV-HCV Caribbean

experience that came from working there, from working in a similar cultural context, or from having Caribbean heritage themselves. Not only did the lectures provide information and knowledge-sharing between Caribbean and US experts, but more importantly, they laid the foundation for future dialogue that will enhance the treatment and care of affected individuals.

The goal of the HU-CCCoP Project was to register 20 clinicians from 10 Islands to actively participate in this distance-based, system-strengthening program. Novel in its approach to provide a full team of culturally competent subject matter experts, the project far surpassed this target by enrolling 473 clinicians.

HU-CCCoP Focal Country	Number of Course Participants	Percent of Total Course Participants
Bahamas	12	2.5%
Barbados	34	7.2%
Belize	84	17.8%
Dominican Republic	27	5.7%
Guyana	46	9.7%
Haiti	89	18.8%
Jamaica	83	17.5 %
Suriname	19	4.0%
Trinidad & Tobago	68	14.4%
U.S. Virgin Islands	6	1.3%
Other Island States Participating in Webinars (Antigua & Barbuda; Bermuda; St. Kitts/Nevis)	5	1.1%
TOTAL	473	100%



Impact of our Collaboration

The Howard University HIV/HCV Caribbean Clinicians Community of Practice Program has conducted 12 online courses on pertinent topics related to the diagnosis, treatment, care and support of persons living with HIV and Hepatitis C. One of the courses was conducted in French to accommodate French speaking clinicians, primarily those practicing in Haiti, the Dominican Republic and the Bahamas.

HU-CCCoP training results indicate the percentages of the following clinical disciplines who participated:

- 51 % Physicians
- 22.6% Nurses
- 9.9 % Allied and Public Health Professionals*
- 5.5% Social Workers
- 4.7% Dentists
- 3.8% Pharmacists
- 2.5% Laboratory Personnel

* Includes nutritionists, dieticians, psychologists, midwives, behavioral therapists, contact investigators, addiction counselors, traditional healers and HIV program managers.

HEPATITIS: One of the biggest global health threats of our time

The World Health Organization (WHO) estimates that globally there are 290 million people living with viral hepatitis who are unaware of their status. Diagnosis and linkage to treatment and care is imperative to reduce suffering and the loss of countless lives. On World Hepatitis Day, July 28, 2020, WHO will be urging countries to raise awareness to find the “missing millions”.

- **What can clinicians in your Island State do to find the “missing millions”?**

<https://www.worldhepatitisalliance.org/missing-millions/>

- **What steps can clinicians take to increase awareness of viral hepatitis, particularly among people living with HIV?**

<https://www.cdc.gov/hepatitis/hcv/patientedu/hcv.htm>

HIV and HCV Resources

- WHO Guidelines for the Care and Treatment of Persons Diagnosed with Chronic Hepatitis C Virus Infection. <https://apps.who.int/iris/bitstream/handle/10665/273174/9789241550345-eng.pdf?ua=1>
- Presentation by Dr. Massimo Ghidinelli, entitled “Viral Hepatitis in Latin America and the Caribbean: A Public Health Challenge.” Dr. Ghidinelli directs the HIV, Hepatitis, Tuberculosis and Sexually Transmitted Infections Unit at the Pan American Health Organization. http://www.vhpb.org/files/html/Meetings_and_publications/Presentations/BRAS11.pdf
- Webinar presented by Dr. Nick Walsh, Regional Advisor for Viral Hepatitis at the Pan American Health Organization, entitled “A Simple Cure: Hepatitis C (HCV) Virus Testing and Treatment in the age of Direct-Acting Antiretrovirals (DAA).” <https://www.youtube.com/watch?v=guTiQmIjb8s>
- Webinar presented in Spanish by Dr. Nick Walsh, Regional Advisor for Viral Hepatitis at the Pan American Health Organization, entitled, “Situación de la hepatitis viral y avances hacia una respuesta de salud pública”. https://www.paho.org/hq/index.php?option=com_docman&view=download&category_slug=presentations-3840&alias=48522-situacion-de-la-hepatitis-viral-y-avances-hacia-una-respuesta-de-salud-publica-2018-1&Itemid=270&lang=en
- *Patient Education Resources on Hepatitis C* is toolkit developed by the US Centers for Disease Control and Prevention (CDC) that includes fact sheets with general information on Hepatitis C. It also includes information for patients on diagnosis and treatment and what to expect when getting tested, as well as information for special populations (MSM, injection drug users). <https://www.cdc.gov/hepatitis/hcv/patientedu/hcv.htm>

KNOWLEDGE CENTER RESOURCES

Case Studies: A Unique Teaching Tool

Distance-based training programs have proven to be an effective method of information sharing. A unique feature of the HU-CCCoP program is the inclusion of case-based studies in every online course to enhance clinician’s learning experiences.

Each case study is carefully designed to incorporate the current clinical topic presented along with the social, cultural and clinical realities that are relevant within the context of Caribbean. Case studies actively engage participants in problem solving and clinical decision making. It helps them to apply the knowledge gained through discussion of in their own clinical practice.

In March, HU-CCCoP will launch a Case Study Bank on our website. Clinicians are encouraged to access the case studies and use them as teaching tools or conducting professional development seminars. View the case studies at <https://www.huttc.org/cccop/webinars.html>.

Webinar in French

In our commitment to cultural competence, we have presented a webinar in French to our clinicians in Haiti. Dr. Vladimir Berthaud, HU-CCCoP expert faculty, presented on “HIV and Cardiovascular Diseases”. The archived webinar can be accessed at <https://www.huttc.org/cccop/webinars.html>.



VOICES FROM THE FIELD

QUESTION: Do you feel that the focused trainings have impacted positively on HIV/HCV prevention, care and treatment for the citizens in your country?

“Yes, personnel in the field of STI/HIV AIDS management were updated on current information on HIV and HCV through the trainings. It was an excellent opportunity for colleagues to reflect on best practices and focus on areas that need to be addressed. Interactions with clinicians across the diaspora also reinforced the fact that we need to continue to work collectively and not in isolation to provide the best possible care for our patients.”

– **Dr. Abiola Jacobs, Guyana National Care and Treatment Centre**

“In Suriname, all general practitioners are allowed to treat PLWH so trainings are always welcomed since keeping primary care physicians up-to date has been one of our biggest challenges. These training courses have helped to inform our physicians on the latest developments related to HIV and HCV, and have greatly improved the quality of care for PLWH in our country.”

– **Dr. Monique Holtuin, Suriname Ministry of Health**

HEALTH AWARENESS DAYS

WHO to celebrate Nurses and Midwives in 2020

The World Health Organization has designated 2020 as the International Year of the Nurse and Midwife. Let's celebrate the many contributions that nurses and midwives make, particularly in caring for people living with HIV. The WHO 2020 International Year of the Nurse and Midwife toolkit can be accessed at: <https://www.who.int/docs/default-source/documents/yonm-2020/campaign-toolkit.pdf>

WORLD HEALTH DAY

APRIL 7

In this International Year of the Nurse and Midwife, World Health Day 2020 will shine a light on the vital role played by nurses and midwives in providing health care around the world, and call for a strengthening of the nursing and midwifery workforce.

<https://www.who.int/news-room/events/detail/2020/04/07/default-calendar/world-health-day>



CARIBBEAN AMERICAN HIV/AIDS AWARENESS DAY *

JUNE 8

* Commemorated in the US Virgin Islands
<https://www.hiv.gov/topics/caribbeanamericanday>



NATIONAL HIV TESTING DAY

JUNE 27*

* Commemorated in the US Virgin Islands
<https://www.hiv.gov/events/awareness-days/hiv-testing-day>



WORLD HEPATITIS DAY

Test. Treat. Hepatitis

JULY 28

World Hepatitis Day is recognized every year on July 28th.

It is one of the World Health Organization's seven officially mandated global public health days. Learn more about how medical professionals can become involved in WHO's World Hepatitis Day. For material on the "Finding the Missing Millions" Hepatitis C Awareness campaign, click go to: www.who.int/campaigns/world-hepatitis-day.



WORLD AIDS DAY

DECEMBER 1

https://www.paho.org/hq/index.php?option=com_content&view=article&id=8983:2013-hiv-hepatitis-tuberculosis-sexually-transmitted-infections&Itemid=40077&lang=en



SAVE THE DATE

Upcoming Conferences for Clinicians

- The 2020 Conference on Retroviruses and Opportunistic Infections (CROI) is bringing together the leading basic, translational, and clinical researchers from around the world to share the latest studies, important developments, and best research methods in the ongoing battle against HIV/AIDS and related infectious diseases. The conference takes place in Boston, Massachusetts from March 8-11, 2020. Learn more at <http://www.croiconference.org/>.
- The 11th International AIDS Society Conference on HIV Science will take place from July 18-21, 2021 in Berlin Germany. Stay tuned at <https://www.iasociety.org/>.

Howard University HIV-HCV Caribbean Clinicians Community of Practice Program Archived Webinars

- **Prescribing Pre-Exposure Prophylaxis (PrEP) for HIV Prevention: A Guide for Clinicians in the Caribbean** — John I. McNeil, MD, FACP
- **HIV, HVB, HCV and TB Co-Infection in the Caribbean** — Helena Kwakwa, MD, MPH
- **HIV and Metabolic Complications: Cardiovascular Diseases and Diabete** — Vladimir Berthaud, MD, MPH, CPH, FACP, FIDSA, DTMH
- **Strategies to Reduce HIV/HVC Among Sexual and Gender Minorities in the Caribbean** — Orlando O. Harris, PhD, RN, FNP, MPH
- **Understanding the Associations between Mental Health and HIV** — Danielle R. Hairston, M.D.
- **Intimate Partner Violence and HIV: Identifying the Link** — Donna M. Christensen, MD
- **HIV and Substance Use in the Caribbean: An Overview** — Helena Kwakwa, MD, MPH
- **Strategies for Improving Adherence to Lifelong Antiretroviral Treatment** — Mallika Mootoo, MD
- **HIV and Neurocognitive Disorders Management** — Leleka Doonquah, MD
- **HIV Update: Clinical Trials in HIV Prevention** — Keith W. Crawford, RPh, PhD
- **HIV and Agin** — Ruth Ramos-Gonzalez, MBBS
- **HIV and Cardiovascular Diseases (French)** — Vladimir Berthaud, MD, MPH, CPH, FACP, FIDSA, DTMH

All HU-CCCoP webinars are archived at <https://www.huttc.org/cccop/>

THE HU-CCCoP TEAM

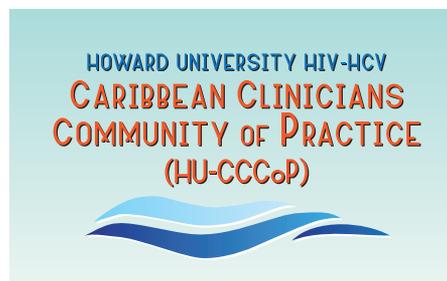
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