





Taking Action Against HIV and AIDS in the UK Overseas Territories

Project Brochure - Quarter 3 2011

The Taking Action against HIV and AIDS in the UK Overseas Territories Project is a DFID-funded programme which aims to strengthen the capacity of UK Overseas Territories to lead an integrated national HIV / SRHR response, thereby contributing to low transmission of sexually transmitted infections (STIs) and HIV among at risk populations and improved quality of life of people living with HIV in the UK Overseas Territories.

In the Caribbean, the programme is designed to enable UK Overseas Territories (OTs) to provide universal access to HIV prevention, treatment, and care and to strengthen linkages and integration of HIV, sexual reproductive health and rights, and health programmes. The programme supports UK OT's National AIDS Programmes to strengthen and implement country specific plans. Specific Technical Assistance (TA) is provided according to country needs, while close work with other regional organisations and projects – especially the EC-funded Overseas Countries and Territories project – ensures complementarity and maximises use of resources.

In the South Atlantic, the focus is on preventing HIV and sexually transmitted infections through enhancing access and quality of sexual and reproductive health and rights information, services and supplies. In order to do this, it is pivotal to ensure that STI and HIV programmes are fully integrated within wider health sector plans. TA is provided according to each Territory's needs in order to develop skills and support the integration of programmes and activities to island plans. Specialist advice is supporting the territories in developing clinical pathways that will ensure the islands are adequately prepared and able to respond appropriately when needed.



South Atlantic Update

Successes and Achievements (July - September)

Falkland Islands

- The Sexual & reproductive Health /HIV Strategy Group have planned to facilitate improved curriculum planning using the Christopher Winter Project resources in partnership with teaching staff to strengthen the Sex & Relationship Education (SRE) programme.
- The Chief Nursing Officer continues to lobby for the inclusion of a 'HIV in the work place' policy in the island's Government's Management Code as part of a current ongoing review. The policy seeks to protect individuals who are living with HIV.
- The latest figures from the cylymida screening programme show that the overall positivity rate among those tested in the first half of 2011 was 7%. Rates were higher among men than women (13% vs 1% respectively). Information about why individuals were offered a test is not available, so the data could be skewed. However, the figures do indicate that chlamydia is prevalent and needs to be treated. In light of this, new posters were developed to promote testing that target the general population.
- Discussions have taken place to explore the possibility
 of using a telephone abortion-counselling service
 from a well-established abortion care provider in the
 UK. Telephone counselling offers women chance to
 discuss their situation in complete confidence. This
 may help the Falkland island Government to reduce
 costs of flying women to the UK when they later
 decide to continue a pregnancy.

Ascension Island

 HIV and sexual health awareness raising efforts on island (via newspaper articles, in-service training talks by the medical officer and team etc) have been tailored to focus on individuals with higher risk behavior. In particular, individuals who leave the island for holiday and young adults who are leaving home for work or further education have been targeted and encouraging to come for testing.

St Helena

- Media articles have focused on the use of condoms as a way to try to reduce the perceived stigma associated with condoms and to tackle the 'vandalism' that has occurred at condom distribution points in the community.
- Encouraging figures from the first half of 2011 show that none of the 50 HIV tests and 40 syphilis tests

conducted on island were positive. In the same period, more than 70 people were tested for Chlamydia, mostly though routine health screening and this yielded a positive rate of 2.6%.

Tristan da Cunha



The island of Tristan da Cunha



St Mary's School Tristan



St Mary's staff and pupils with Jim Kerr, far left

 The education sector on Tristan has been a hive of activity since an in-service professional education day. The workshop involved teaching and clinical staff and has successfully led to the development of an SRE curriculum and plans to catch up with SRE provision for out of school young adults.

- In addition, solid links have been developed between the teaching and clinical staff where clinicians will participate in the SRE classes to support teaching staff in managing questions about STIs, etc. This has also proved to be a catalyst for other activities in relation to HIV prevention and sexual health.
- The Education Advisor, Mr Jim Kerr, has offered his expertise to represent the teaching staff on the Safeguarding Committee, and Ms Faye Howe, a Social Worker advising St Helena and Ascension Islands ,has offered her support to Tristan.
- The Education Advisor has also followed up on the condom distribution plan and will follow up with the newly arrived Senior Medical Officer and with the community nurses to ensure the dispensers are fitted and refilled.
- Pocket-sized guide to contraception and sexual health were adapted for the Tristan da Cunha population (see overleaf).

Challenges during the reporting period

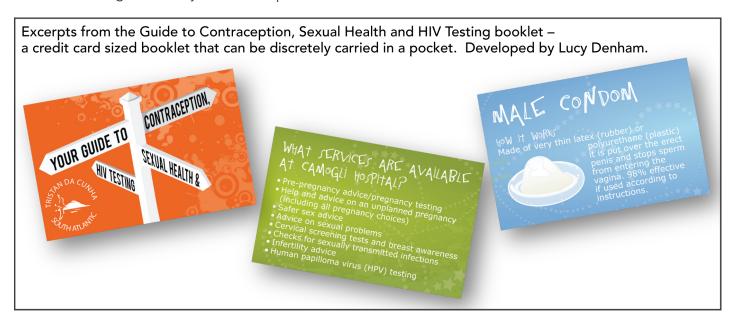
Chlamydia testing remains limited and very low on some islands and there is a need to systematise the collection, collation and dissemination of laboratory data to support clinicians and the Sexual Health committees to identify where screening efforts need to be focussed.

Work to institutionalise HIV care and Abortion pathways on each island continues to present a challenge.

Condom distribution strategies have moved at various paces on differing islands, but remain quite centralised. On some islands, issues include: identifying manpower to support community distribution and of negative attitudes towards condoms that affect motivation to continue stocking community distribution points.



- Support will be provided to clinical and laboratory staff in collecting and collating testing data in order to enable health care providers to target their screening activities in the most cost-effective way. Alongside this, newly developed posters that promote Chlamydia screening will be finalised and islands will be encouraged to display these and develop media messages to accompany them in order to increase uptake.
- Planning for the repeat of the 2009 Health and Lifestyles Survey of secondary school pupils has now commenced. All islands expressed an interest, having found the original survey a valuable tool in guiding the curriculum for sex and relationships education.
- A systematic review of HIV and Abortion care pathways for each island will be revised with a view to making recommendations to address outstanding needs.
- Sexual Health committees will be supported in developing a work plan of feasible activities to continue their efforts in this important area for 2012 and beyond.
- Planning for an evaluation of the project will be finalised and a desk-based review will start in quarter 3 and continue into quarter 4. This will include interviews with key people who have been involved in the project. The report will be finalized in time to disseminate at the beginning of 2012. We look forward to hearing your feedback on the project through this review.



Caribbean Update

Successes and Achievements (July – September)

Health and Family Life Education (HFLE) Strengthening:

 After 3 training workshops in August and September, Anguilla, British Virgin Islands (BVI) and Turks and Caicos Islands (TCI) are better equipped to deliver life skills-based Sexuality and Sexual Health Education at primary and secondary levels. TCI has been a trailblazer in not only developing Guidelines for the implementation of the revised HFLE Curriculum but they have also developed an Education Sector HIV Policy for addressing HIV in the Workplace.

Harmonisation with Regional Activities

• The Project continued its partnership with UNICEF Barbados & Eastern Caribbean and carried out a joint activity in 3UK OTs (TCI, BVI, and Montserrat): Reports were submitted for all 3 target countries; BVI, TCI & Montserrat (although there were some problems with the Montserrat datasets).

Tourism Sector Programming

- Tourism Sector Health and Wellness Programmes were designed and implemented in both TCI and Anguilla using participatory approaches involving key tourism stakeholders; buy-in was achieved at the level of the Hotel and Tourism Sector Association. This is critical to the programme which seeks to provide strategies to improve the overall health and wellness of persons working in the sector, rather than focussing solely on HIV and AIDS issues. In TCI the sector has a comprehensive 2 year budgeted workplan to support the roll out of their workplace programmes; further, 3 of the leading hotels have already signed **Memoranda** of Cooperation and agreed to incorporate newly developed HIV and AIDS Workplace Guidelines for the Tourism Sector in the Turks and Caicos Islands into their operations manuals.
- The Peer Education Programme for tourism sector workers in Anguilla was extremely well received and resulted in improved HIV knowledge among workers. There was renewed commitment among workers to disseminate information and to generally promote tolerance and acceptance of persons as a way of addressing stigma and discrimination in the workplace.

Most at Risk Population (MARP) Programming: A men's health intervention supported by CVC (Caribbean Vulnerable Communities) was completed in Montserrat. The intervention focused on assessing men's health and developing tailored Behaviour Change Communications (BCC) materials for men, including men who have sex

with men (MSM), in Montserrat. The NAP and Ministry of Health in Montserrat are now better equipped to respond to **men's health needs** based upon a series of focus groups and training for health care providers aimed at responding to the psychosocial and clinical sexual health needs of men and MSM in Montserrat.

Policy and Legislation: The final stage of the development of anti stigma and discrimination policy and legislation in the OTs is underway with the drafting of tailored policy and legislation for each of the OTs. The consultants are to deliver final outputs by the end of October.

Multi-country HIV Mapping Exercise: Terms of Reference for the HIV Mapping Exercise has been finalised and work is underway. The resulting summary of HIV and AIDS related human, financial and project resources available to British Overseas Territories will enable National AIDS Programme Coordinators (NAPCs) to more readily access resources beyond the life of the DFID Overseas Territories programme.

Challenges

- Activity in CI: Cayman Islands have been unable to fully engage with the Overseas Territories project. Disappointingly, plans to support HFLE, Tourism and MARP programmes on Cayman have therefore been abandoned.
- Policy and Legislation: Ongoing delays in receiving phase II reports for TCI and Anguilla have slowed progress with policy drafting.
- Regional Partnership: EC/PAHO experienced difficulties in programme implementation for most of the period due to lack of/delayed funding. Consequentially, the development of health strategic plans has been indefinately delayed. However funding came back on stream in September and activities should resume immediately.
- NAP Staff Retirement: Three longstanding National AIDS Programme Coordinators (Cayman Island, Montserrat and Anguilla) are retiring from their posts in the second half of the year causing potential disruption to the Overseas Territories programme and staffing gaps in country. We welcome new NAPCs Anjella Skerrit (Montserrat) and Ms Maeza Adams (Anguilla) to the programme!



PROJECT COMPLETION

Although the main body of work has now been completed, several outstanding assignments will be wrapped up over the coming months;

- Multi-sectoral committees: Ongoing support to committees will be provided in TCI, Anguilla and Cayman Island.
- MARP Programming: Monitoring will be conducted of the TCI programme targeted at the Creole Community; the BVI Youth focused intervention and the Anguilla MARP programme.
- Policy and Legislation: Reports will be finalized for TCI and Anguilla and draft policy and legislation will be drafted for five OTs.
- HFLE: In BVI: Guidelines for HFLE Policy development and implementation will be reviewed and finalised.

ENDLINE DATA COLLECTION AND PROJECT EVALUATION:

- HFLE endline data will be collected in BVI and TCI through questionnaire to students and focus groups (Nov 2011).
- Tourism endline data in Anguilla will be collected through a questionnaire to workers in November.
- DFID's external evaluation of the project will take place from October November.

END OF PROJECT DISSEMINATION MEETING: Between October and November ½ day dissemination meetings will be held in each of the 5 OTs where substantial programming has occurred (Bermuda will not be hosting an end of project meeting). The meetings will serve to share project outputs, discuss challenges, successes, and lessons learned and to share best practices from across the OTs. In most of the OTs the MSC's will host the meeting.



Turks and Caicos Island where a Health and wellness programme - incorporating HIV prevention strategies - has been developed this quarter

Programme Goal, Purpose and Outputs

The goal of the revised 'Taking Action Against HIV & AIDS in the UK Overseas Territories' Programme is to ensure low transmission of STIs and HIV sustained amongst at risk populations and improved quality of life of people living with HIV in UK Overseas Territories.

Progress towards this goal will be measured by monitoring 3 key indicators:

- % of young women and men aged 15-24 who are HIV infected.
- % of women and men diagnosed with STIs during the last year.
- % of HIV positive adults/children still alive 12 months after initiation of antiretroviral therapy.

The purpose of the programme is to strengthen the capacity of UKOT to lead an integrated national HIV/SRHR response. This will be measured through:

- % of targeted tourism establishments in Anguilla, Cayman Islands and Turks and Caicos Island that have adopted and successfully implemented HIV/AIDS policies and programmes in the workplace.
- % of secondary school youth (13-15 yrs) in all OTs (excluding Bermuda) who ever had sex who used a condom on last sexual intercourse.
- % of OTs in which new supportive legislation/policy addressing HIV related Stigma & Discrimination is adopted and implemented.
- % of OTs with operational strategic health plans in which HIV and SRHR are integrated.

Output 1:

Increased capacity of UKOTs to access resources to implement annual HIV/SRHR plans

- % of planned Technical Assistance and capacity building activities delivered in proposed year of the work-plan
- No. of OTs that take full responsibility for TA. procurement and management during the preceding year (COTs only).
- No. of COTs accessing HIV mapping database and number of SAOTs who have access to SRHR/HIV database of resources.

Output 2:

An effective and efficient multisectoral mechanism in place to coordinate HIV/SRHR programmes

- % of UKOTs with established multi-sectoral HIV/SRHR committee
- % of UKOTs with committees which regularly meet and review SRHR/HIV-AIDS action plans/programmes.

Output 3:

Most-at-risk populations in UKOTs successfully identified and reached through targeted interventions

- No. of targeted OTs with evidence informed community based programmes reaching priority most-at-risk populations.
- % of OTs with evidence-informed guidelines/protocols/ strategies for SRHR/HIV prevention, care and support services targeted at vulnerable groups.
- % of targeted tourism workers with improved HIV knowledge (relevant for Anguilla, CI, TCI).
- % of targeted Secondary school youth with improved HIV knowledge.

Output 4:

Number of adopted HIV/SRHR related policies and legislations increased in UKOTs

- No. of new/amended policies/legislations adopted per UKOT.
- No. of OTs with MARPS /civil society empowered and actively involved in the development of policy and legislation that reduces stigma and discrimination.
- % of UKOTs with active programmes/policies addressing HIV/STI/SRHR related stigma and discrimination.

Output 5:

DFID,PANCAP, EC/PAHO and other regional resources aligned and harmonised in support of OTs national Health and HIV/AIDS strategies

- No. of COTs with integrated work-plans/budgets, reflecting plans and budgets from all partners.
- % of UKOTs in which, DFID, PANCAP, EU/PAHO and other relevant institutions undertake joint planning and reviews.

For further information about the programme, please contact Caroline Baker at c.baker@options.co.uk