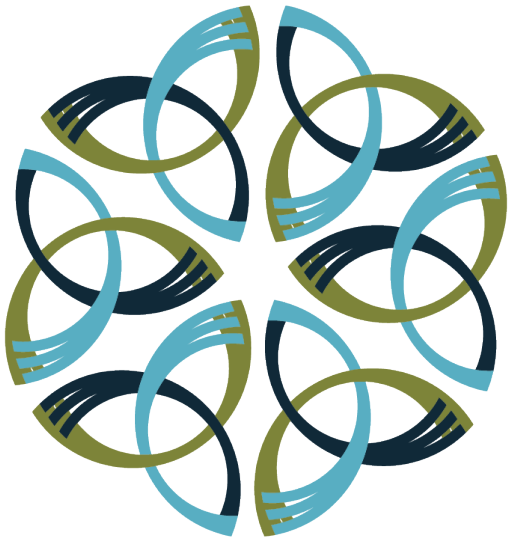
PMAC PRINCE MAHIDOL AWARD CONFERENCE 2018



PARALLEL SESSION 4.3

COMMUNITY SYSTEMS: THE BEDROCK OF RESPONSES TO EID AND AMR

| BACKGROUND

Community preparedness and response to emerging infectious diseases (EID) and antimicrobial Resistance (AMR) is critical to the health outcomes of individuals. In HIV, people both living with and affected by HIV have been at the forefront of providing treatment preparedness to promote health-seeking behavior, improve adherence and other health outcomes, whilst advocating for increased availability, accessibility and uptake of key viral load diagnostics as well as 2nd and 3rd line antiretroviral therapy. In Malaria, civil societies work with other stakeholders to address artemisinin resistance in Southeast Asia via educating communities about the hazards of substandard drugs and organizing public awareness campaigns to complete a 3-day treatment course and on measures to prevent further spread of resistant pathogen strains. Similarly in tuberculosis, community-based outpatient treatment of MDR-TB in resource poor settings yield higher cure rates and facilitated better referrals to other health services required by TB affected communities. Furthermore, lessons learned from the early response to Ebola in West Africa have recognised the problem of sidelining community engagement as a key factor contributing to failure of the early emergency health programs to meet the needs and realities confronting affected populations in the region.

Today, prevention, detection and response to EID relies significantly on an effective surveillance system which starts at the community level with effective mechanisms in place to ensure linkage into national level health systems reporting. The Ebola crisis highlights the importance of integrated community case management (iCCM) and the roles of the network of community health workers and community leaders in early and better case reporting, contact tracing and bringing people into care, whilst reducing stigma and discrimination associated with the virus. Community-based control and preventive behaviours for vector control is recognized as a key pillar in disease response and preparedness for Zika and other mosquito-borne diseases. The use of innovative technologies in the response to EID by communities and community health workers contributed to the prompt control of the outbreak by providing a valuable platform for early warning and guiding early actions.

| OBJECTIVES

The session aims to explore community roles in preparedness and response to EID and AMR, concentrating on lessons and approaches deployed in disease-specific programs, such as HIV, TB, Malaria, Ebola and Zika, whilst underscoring the importance of focusing on people, i.e. ensuring that systems for health involve the affected community and promotes community action as part of the overall health system critical for identifying, reporting and responding to emergency health threats.

The session is designed to generate discussions on commonalties and contexts of community action, and to reflect on emerging challenges that still persist in response to EID and AMR from the community perspectives, as well as to identify practical solutions drawing the lessons learned from community responses to the epidemics of HIV, TB, Malaria and to the most recent outbreaks of Ebola and Zika across the globe.



Panelist

Alessandra Nilo

Executive Director

GESTOS
Brazil

Ms. Alessandra Nilo, General Coordinator, Gestos Ms. Nilo is a journalist, film director and screenwriter with an academic specialization in communication and health and post-graduation in Diplomacy. She is co-founder and Executive Director of Gestos, an HIV and Sexual Right's organization located in Recife, Brazil. Since 2001, Ms. Nilo has worked to publicize the UN General Assembly Declaration of Commitment on HIV and AIDS as a tool to monitor and evaluate the implementation of national HIV policies. In 2003, she developed the UNGASS-AIDS Forum platform in Brazil. This was later expanded and used throughout the world as an advocacy and research tool to support a network of women activists in the field of sexual and reproductive health and rights. Ms. Nilo dedicates her career to increasing civil society' influence on decision-making processes at local, national and international levels and full implementation of international commitments on matters related to HIV and sexual and reproductive health and rights. She has represented civil society in the Brazilian national delegations to the High Level Meetings on HIV, and has been involved with delegations for the Commission on the Status of Women, Commission on Population and Development and the 2030 Agenda negotiations at UN. S Ms. Nilo was member of the High Level Task Force for ICPD and Beyond , and is co-leading the Women Won’t Wait campaign in Latin America. She is the Regional Director of the Latin American and Caribbean Council of AIDS Organizations , and represents NGOs from that region at the UNAIDS Program Coordinating Board. In Brazil she is among the leaders of the CSO Working Group for the 2030 Agenda, a coalition composed by more than 40 members, including CBOs, NGOs, networks and social movements.