**Webinar on lessons learned on maintaining care and services at GHESKIO while facing a humanitarian crisis**

Wednesday, 7 December 2022   
Time: *11 AM – 1: 30 PM*

**Description**

Over the past 40 years, GHESKIO has been at the center of all efforts for HIV prevention and care developing and implementing comprehensive client centered models. Haiti has faced continuous infectious diseases such as TB, Cholera, Zika, Chikungunya, COVID-19 at a time when increasing non-communicable diseases, hypertension and cardiovascular diseases, are becoming the leading cause of mortality in adults. Over these years the country had to face multiple natural disasters including 2 earthquakes, and 12 hurricanes. Each time that there is a new catastrophe GHESKIO has been on the frontline to help the Ministry of Health (MSPP/MOH) tackle it head on. However, Haiti is facing now a humanitarian crisis, the worst ever.

Socioeconomic conditions in Haiti are among the worst in the Americas. The population lives in extreme poverty, in crowded conditions with limited access to education, lack of potable water and no public services to eliminate human waste. Provision of healthcare in Haiti has been integrally challenged by tumultuous socio-political conflict over the past five years. The country is facing increased cases of gang-violence and kidnapping. Since June 2021 access to four (4) geographical departments and part of the West department south to Martissant has been completely blocked by armed gangs. Our personnel and patients are unable to come to the two GHESKIO main sites (GHESKIO-INLR and GHESKIO-IMIS). On July 7th 2021 the country faced another major crisis when the president was assassinated at his home. This led to additional political turmoil aggravated by a generalized shortage of fuel as the main fuel terminal was in the control of powerful gangs blocking all access.

The unprecedented socio-political situation in Haiti has created enormous stress on the country and on the capacity to provide health care. For the past five years, Haiti has had a negative economy that has been described as an “economy at war”. This prolonged socio-political turmoil is aggravated by increasing security issues, kidnapping, gang -violence, exodus of the brightest and a general strike and paralysis of public transportation. Since September 2022 following a significant increase in fuel prices the country faces massive protests which led into a complete locked-down situation. This chaotic situation affects all sectors, specially the health system forcing the closure of many hospitals and clinics. This led to the worst humanitarian crisis the country has ever faced. At the end of September 2022, as WHO was preparing to help Haiti move towards the elimination of cholera in Haiti, new cases were documented. Those extreme unsanitary conditions aggravated by the fuel crisis constituted the perfect storm for cholera resurgence.

Fortunately, for the past 40 years GHESKIO has always adapted and improved its contingency plan after each crisis. GHESKIO had to activate very early its contingency plan to face this complex crisis. To continue progress towards achieving the 95-95-95 targets set forth by the Joint United Nations Program on HIV/AIDS (UNAIDS), GHESKIO had developed a package of community-based interventions to ensure continuity in services and care for patients living with HIV. Among other services, this package included scale up of the once-daily tenofovir, lamivudine, and dolutegravir (TLD) treatment regimen, multi-month antiretroviral therapy (ART) distribution, dry blood spot HIV testing, and the roll out of community centers for ART distribution and viral load testing. Community-based HIV services, and in particular community ART dispensing, complement traditional facility-based care by transferring basic services for clinically-stable patients out to community sites, reducing the burden on clinicians and facilitating more convenient and less costly access for patients. One main concern is that the fear that this humanitarian crisis could increase the risk of Dolutegravir resistance, complicating ART treatment nationwide.

During the IAS Educational virtual symposium held in 2021, sessions included working toward a post pandemic world, continue combatting HIV and TB co-infections and addressing the needs of key populations. In 2022, as a follow up activity further to the 2021 symposium, GHESKIO will organize a webinar session which will aim at sharing the impact of the humanitarian crisis in Haiti, lessons learned on how to respond, maintain care and services at GHESKIO during these periods of unrest and crisis.

**Objectives**

The webinar will aim at sharing:

* The impact of the humanitarian crisis in Haiti, lessons learned on how to respond, maintain care and services at GHESKIO.
* The impact of Co-infections and Non-Communicable diseases on the HIV Program.

**Target audience**

The target audience for this webinar include:

* Program officers of the Ministry of Health (MOH)
* Stakeholders (PEPFAR, Global fund, AFD)
* Sites personnel of the GHESKIO MSPP network
* Sites personnel of 9 Community Centers of the GHESKIO network
* HIV Implementing Partners for PEPFAR and Global Funds
* Students of Medical Universities
* Broader networks of HIV stakeholders from the region

**Agenda:** This webinar will comprise two (2) panel sessions of 1 hour 10 minutes each. Panels members will comprise international keynote speakers and GHESKIO presenters that will share their unique experience dealing with a major humanitarian crisis.

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| Time | title of presentations | Speakers |
| 5 mins | Introduction and overview of the webinar | Dr Bernard Liautaud |
| PANEL I | **Humanitarian crisis in Haiti** |  |
|  | Introduction of panel I speakers | Moderator 1  Dr Bernard Liautaud |
| 10 mins | Impact of the Humanitarian crisis in Haiti on health care delivery | Presenter 1  Dr Jean William Pape  GHESKIO |
| 10 mins | Conflict, water infrastructure, and cholera epidemics | Dr Sasha Fahme  Weill Cornell University |
| 10 mins | Maintaining high quality HIV research while facing a humanitarian crisis. | Dr Vanessa Rouzier  GHESKIO |
| 10 mins | Mitigating the negative impact of prolonged socio-political turmoil through the implementation of Community Care Centers at GHESKIO. | Dr Patrice Joseph  GHESKIO |
| 30 mins | Discussion | *Moderators + presenters* |
| PANEL II | **Impact of Co-infections and Non-Communicable diseases on the HIV Program** |  |
| Time | Introduction of Panel II speakers | Dr Gabriel Thimothe  GHESKIO |
| 10 Mns | HIV and Co-infections in 2022: what is new? | Dr Anton Pozniak  Chelsea and Westminster Hospital NHS |
| 10 Mns | MDR TB management at GHESKIO: Challenges and successes. | Dr Stalz Vilbrun  GHESKIO |
| 10 mns | Collision of HIV and non-communicable diseases epidemics | Dr Margareth McNairy  Weill Cornell University |
| 10 mns | Potential Consequences of Dolutegravir (DTG) resistance on the HIV program in Haiti: What should be done to prevent it ? | Dr Bernard Liautaud  GHESKIO |
| 30 Mns | Discussion | *Moderators + presenters* |
| 5 mins | Summary of Meeting/ Final remarks and Perspectives | Dr Marie Marcelle Deschamps  GHESKIO |