

# Commonwealth Pharmaceutical Association

## Ocho Rios Statement

### The Role of the Pharmacist

### in the Prevention & Management of HIV/AIDS

#### *Rationale*

The HIV/AIDS epidemic is a significant health risk to individuals and communities living in Commonwealth countries. The two regions reported to have the highest adult prevalence rates are sub-Saharan Africa (8.8%) and the Caribbean (2.4%)<sup>1</sup>. It is appropriate and timely that the Commonwealth Pharmaceutical Association (CPA) issues a statement concerning the role of the pharmacist in the fight against HIV/AIDS.

#### *Process*

This statement is based on the outcomes of a Symposium and Workshop held during the 8<sup>th</sup> CPA Conference held in Ocho Rios, Jamaica, in August 2003. Over 200 pharmacists from 40 Commonwealth countries attended the Workshop.

During the Symposium, delegates were updated on the latest epidemiological situation and recent developments in approaches to prevention, care and treatment of HIV/AIDS.

At Workshop sessions, participants combined information and experience to define more prominent and constructive roles for pharmacists in the fight against HIV/AIDS. Practical strategies for implementation by national pharmaceutical associations as well as by pharmacists as individuals, resulted from intensive discussion amongst the diverse groups participating in the Workshop.

CPA pharmacists were renewed in their conviction that they can contribute proactively to the prevention of HIV infection and the treatment of HIV/AIDS patients and they are committed to this in the interest of public health.

The findings of the CPA workshop reaffirmed many of the guiding principles expressed in the 1997 Joint Declaration between the World Health Organisation and the International Pharmaceutical Federation<sup>2</sup>.

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<sup>1</sup> UNAIDS/WHO; Regional HIV/AIDS statistics and features, end of 2002. UNAIDS; Geneva.

<sup>2</sup> FIP/WHO. *The Role of the Pharmacist in the Fight against the HIV-AIDS Pandemic*. FIP; 1997



## ***Outcomes from the Ocho Rios Workshop***

### **General Statements**

1. Pharmacists are members of multi-professional health care teams.
2. Pharmacists are the primary legal custodians of medicines and consumer health educators. "Walk-in" access to pharmacies and clinics enables any member of the community to consult directly with a trained health professional.
3. Pharmacists play an important role in helping to break down the stigma and discrimination associated with the disease; in providing advice and materials in relation to the prevention of HIV infections; and in providing counselling and treatment in the care of HIV infected persons.
4. Pharmacists are committed to working collaboratively with other health professionals to improve health outcomes for communities, patients and their carers.
5. Pharmacists will work to ensure that both undergraduate and postgraduate training and education will prepare the pharmacist to deliver professional treatment, advice and information in a caring and confidential environment.
6. Pharmacists are committed to working with governments in the development and implementation of policies and strategies to improve access to information and in the provision of affordable antiretroviral (ARV) therapy.
7. CPA and its member associations will work strategically with the Commonwealth Secretariat and the World Health Organisation in facilitating and promoting the contribution of pharmacists to the fight against HIV/AIDS.



# Opportunities for Action

## 1. At the international level CPA will:

- (i) Work in collaboration with the priorities and programs of the Commonwealth Secretariat, UN organisations, national and international agencies and other health-related NGOs, to assist and promote the role and participation of pharmacists in all aspects of prevention of HIV/AIDS and the treatment and care of AIDS patients.
- (ii) Disseminate information on the latest developments and practices in the care and treatment of HIV/AIDS patients.

## 2. At the national level CPA will encourage member pharmaceutical associations to:

- (i) Develop country specific strategies and standard operating procedures to assist pharmacists to fulfil their role in the fight against the HIV/AIDS epidemic;
- (ii) Adopt a multi-sectoral approach and work strategically with the Ministry of Health, other related ministries and government agencies and promote the involvement of pharmacists in the development and implementation of strategies to combat HIV/AIDS;
- (iii) Nominate pharmacists to positions on national government and professional committees relating to HIV/AIDS;
- (iv) Lobby politicians and government health agencies to involve pharmacists in decision-making processes in policy development and implementation to control and manage the pandemic;
- (v) Enable access to updated information necessary for pharmacists to fulfil their role as part of the health care team;



- (vi) Provide continuing education programmes on HIV/AIDS prevention and management and/or facilitate access to courses provided by other institutions;
- (vii) Ensure the Ministry of Education, universities and training institutions include HIV/AIDS specific educational material in the training curriculum of pharmacists, health professionals and pharmacy support staff;
- (viii) Undertake promotional campaigns and provide relevant materials for pharmacists to undertake consumer and staff information, education and training activities;
- (ix) Facilitate the participation of pharmacists in scientific and operational research to continually evaluate and improve the quality of care and treatment of HIV/AIDS.

**3. At the individual level CPA will encourage pharmacists to:**

- (i) Provide services without prejudice or discrimination and maintain patient confidentiality;
- (ii) Use all available channels to be informed and updated about HIV/AIDS;
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- (iii) Adequately train support staff to provide relevant information and services to HIV/AIDS patients and their carers;
- (iv) Participate fully in local and national HIV/AIDS consumer education campaigns;
- (v) Provide consumers with information and provide an appropriate facility for confidential counselling;
- (vi) Collaborate with other health care providers to enhance the team effort;
- (vii) Participate in operational research to continually evaluate and improve the quality of care and treatment for HIV/AIDS.



## Implementing Strategies

CPA encourages all pharmacists and pharmaceutical associations to adopt a multi-sectoral approach when implementing strategies, to acknowledge cultural and social sensitivities, and to promote equitable access to all medicines, information and services.

### 4. Working with consumers and communities

*Globally, fewer than 1 in 5 persons has access to basic HIV prevention programs.<sup>3</sup> CPA encourages pharmacists to become more proactive in using proven prevention programs to increase community access to reliable information.*

**Pharmacists can inform, educate and communicate using a combination of prevention strategies:**

- (i) Posters in pharmacies – designed to target specific at-risk groups, e.g. orphans, women, adolescents, mobile populations, intravenous drug users, and breast-feeding mothers;
- (ii) Easy-to-read leaflets in local languages to increase awareness amongst at-risk groups as well as the general population;
- (iii) Videos and talks to schools, community organisations, religious organisations, clubs, health fairs, women’s groups;
- (iv) Pharmacist operated hotlines;
- (v) Media presentations e.g. TV, radio (phone-in programs, newspaper question and answer features);
- (vi) “Ask your Pharmacist” campaigns;
- (vii) Promotion of safe sex messages through peer group presentations.

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<sup>3</sup> GLOBAL HIV PREVENTION WORKING GROUP: *Report on Access to HIV Prevention, May, 2003.*



**Pharmacists can deliver quality pharmaceutical care and treatment by ensuring:**

- (viii) Good dispensing practice;
- (ix) Confidential counselling areas in pharmacies and clinics;
- (x) Follow-up support for patients and carers to promote adherence. (Support services could include medication reviews and pharmacist-led clinics for treatment of opportunistic infections.)

## **5. Working with governments**

*Collaboration with government will increase opportunities to:*

- (i) Build working relationships with parliamentary and political representatives at local and national levels;
- (ii) Participate in the development and implementation of healthy lifestyle and safe-sex campaigns;
- (iii) Acknowledge the wider social, economic and financial implications of HIV/AIDS;
- (iv) Advocate for inclusion of ARV drugs in national health lists, protocols and systems;
- (v) Promote antiretroviral (ARV) drug supply at lowest prices through:
  - *development of consistent and effective policies and strategies,*
  - *implementation of legislation and licensing, safeguarding public health in compliance with the TRIPS (Trade Related Aspects of Intellectual Property Rights) Agreement,*
  - *embracing the safe use of quality generics;*
- (vi) Engage in operational research projects to gather evidence of pharmacy input and impact;
- (vii) Include pharmacist representation on relevant committees/bodies;
- (viii) Advocate remuneration of cognitive services.



## 6. Working with other stakeholders

*Harnessing the strengths and resources of diverse stakeholders will lead to:*

- (i) Involvement of professional and community groups, (e.g. faith-based groups, service groups, patient groups, employers) in both prevention and treatment strategies.
- (ii) Co-ordinated activities with other established HIV/AIDS groups at national, regional and community level..
- (iii) Utilisation of public- private partnerships to increase capacity to deliver pharmacy services and negotiate prices of ARV drugs.

