

PHARMACEUTICAL SOCIETY OF UGANDA

The Uganda Statement on the Role of the Pharmacist in the Prevention & Management of HIV/AIDS and in Maternal, Neonatal and Child Health (MNCH) in Uganda

Rationale:

A recent report from the World Health Organisation (WHO)¹ indicates that the HIV epidemic continues to be a major challenge for global health with some 33 million people living with HIV and 2.7 million new infections in 2007. Sub-Saharan Africa remains the most affected region accounting for two thirds of all infections. Since 2003 that has been unprecedented expansion of access to treatment with Anti Retroviral Therapy (ART) in middle and low income countries. However, despite this progress global coverage remains low only 42% worldwide and 44% In sub-Saharan Africa, ART is a lifelong intervention so sustainability remains a key issue for existing and new cases

The HIV epidemic continues to have a dramatic impact on the health, livelihood and survival of women and children. An estimated 15.5 million women and 2 million children worldwide were living with HIV in 2007. There was considerable progress in expanding access to prevention, treatment and care services in 2008 but financing a sustained and comprehensive response remains a challenge for the future. There is still a significant unmet need and the lack of adequate human resources in the middle and low income countries remains a significant problem.

The current situation in Uganda was outlined in a series of papers presented at a participatory workshop hosted by the Pharmaceutical Society of Uganda in October 2009. The prevalence rate of HIV in Uganda in the adult population is 6.4% (15 – 49 years), there are about 1,200,000 living with HIV of whom 200,000 are children. Over 1,000,000 children have been orphaned by AIDS. In 2007 there were 132,500 new infections, 25,000 due to MTC. In 2009 there were 78,000 pregnant women with HIV and some 180,000 adults and 12,000 children on ART. Mother to child transmission(MTC) of HIV is the second major mode of transmission of the virus in Uganda and the only route of transmission in young children. Much has been achieved in the development and implementation of national policies and in providing access to diagnosis care and treatment but many challenges remain. There is still a significant unmet need, only 180,00 adults out of an estimated 400,000 and 20,000 children out of an estimated 65,000 are on ART; there is concern regarding sustainability for long term treatment and funding for new preventive strategies. In addition Uganda has a significant shortage of skilled health care staff and support workers. The shortage of pharmacists is particularly acute with 0.74 per 100,000 population in 2007. There is a paucity of data but comparable figures for Africa have been stated for 2005 as Cameroon 5.8, Cote d'Ivoire 4.51, Ghana 7.38, and Kenya 3.90². Strengthening health systems and developing human resource capacity of health care staff for clinical services and for the management of procurement and supply should be key features of a long term strategy.

References

- 1 Towards Universal Access - Scaling up priority HIV/AIDS interventions in the health sector
September 2009 Progress Report World Health Organisation Geneva
- 2 2009 FIP Global Pharmacy Workforce Report

The commitment of the Pharmacy profession in Uganda

At a participatory workshop on HIV/AIDS and Maternal, Neonatal and Child Health (MNCH), held on 6th and 7th October 2009 in Kampala, and hosted by the Pharmaceutical Society of Uganda and the Commonwealth Pharmacists' Association, 149 members of the pharmacy profession met to discuss the role of pharmacists in the prevention and management of HIV/AIDS and their role in maternal and neonatal child health.

The predominating message to come from these discussions was that pharmacists have the knowledge, skills and expertise which they believe could be more proactively applied to the control of these communicable diseases in Uganda.

Furthermore, pharmacists of the Pharmaceutical Society of Uganda were united in their commitment to the communities they serve. To this end pharmacists want to provide increased access to treatment and a greater public health role in the prevention and management of HIV/AIDS in maternal and neonatal child health specifically, and in health promotion generally.

The Uganda Statement is a compilation of recommendations made at the Workshop to expand the role of pharmacists in practice settings in the prevention of these communicable diseases and in the continual improvement of accessibility to treatment and services by all members of the community in Uganda. Further discussion, both within the profession and with government, will be necessary to define these roles in greater detail. In addition, The Uganda Statement is a declaration by the pharmacists of Uganda to affirm the commitment made by over two hundred Commonwealth pharmacists at the CPA Conference in Ocho Rios, Jamaica, in 2003 and to implement the recommendations of The Uganda Statement, as resources permit, to achieve beneficial health outcomes for the people of Uganda.

Consensus for action agreed in Uganda

The Pharmaceutical Society of Uganda will work with its members, with government, with academic institutions, with regulatory and other agencies, with Civil Society Organisations (CSOs), and with employers as appropriate to

Support pharmacists in their commitment to enhancing service delivery, updating skills and knowledge, undertaking higher-level qualifications for specialist services, improving communication with clients, colleagues and the health-care team.

Develop human resources through work force planning and capacity building and to consider planned distribution of pharmacies and also access to services in rural areas.

Define and implement standards and safe working , support enhanced IT and access to information and to develop innovative new practices including pharmaceutical care.

To promote education training and research to increase the number of trained pharmacists and opportunities for postgraduate education and training.

To enhance communications and strengthen collaboration

To promote a key roles for pharmacists in policymaking at all levels

**General statements from the
Commonwealth Pharmaceutical Association
"Ocho Rios Statement on the Role of the Pharmacist
in the Prevention & Management of HIV/AIDS"
Jamaica, August, 2003**

- Pharmacists are members of multi-professional health care teams
- Pharmacists are the primary legal custodians of medicines and have the knowledge and expertise to provide authoritative information relating to medicines
- Pharmacists play an important role in helping to break down the stigma and discrimination associated with HIV/AIDS
- Pharmacists can deliver professional treatment, advice and information in a caring and confidential environment
- Pharmacists will maintain patient privacy and confidentiality
- 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 and sustainable antiretroviral and antibiotic therapies

**Increasing Pharmacists' contribution to the prevention and management of
HIV/AIDS and in MNCH in Uganda**

The Pharmaceutical Society of Uganda will direct its efforts and resources towards:

1. advocating for sustainable and cost-effective partnerships between public and private sector stakeholders to co-ordinate improved patient access to HIV/AIDS and MNCH services leading to increased case detection, provision of referral information for counselling, testing and diagnosis and authoritative information on treatment options
2. working strategically with the Ministry of Health, other related ministries and government agencies to provide an enabling environment for the implementation of policies and strategies aimed at long-term sustainability of service provision to HIV/AIDS patients
3. facilitating member access to up-to-date information on antiretroviral therapy and international standards for HIV/AIDS care
4. providing members with continuing education programs on HIV/AIDS prevention and treatment, with particular focus on access in outreach areas, or facilitating access to such programs provided by other institutions
5. promoting HIV/AIDS and MNCH awareness campaigns and providing relevant materials for members to undertake consumer and/or staff education and training activities, separately or in collaboration with other agencies

6. promoting the inclusion of Pharmacists in HIV/AIDS and MNCH management teams, especially in the area of clinical services and Drug and Therapeutic Committees
7. nominating Pharmacists to positions on national government and other professional Boards and Committees relating to HIV/AIDS and MNCH
8. nominating Pharmacists to government/industry decision-making committees to advise on the registration, procurement and uninterrupted distribution of Pharmaceutical supply
9. nominating Pharmacists to government decision-making committees to provide evidence-based medicines expertise during the development of treatment guidelines
10. reinforcing the Society's code on ethical prescribing and dispensing

The Pharmaceutical Society of Uganda will encourage its members to:

11. provide services without prejudice or discrimination and maintain patient confidentiality
12. use all available resources to remain informed and up-to-date on evidence-based treatment of HIV/AIDS in line with national and international treatment guidelines
13. train, or facilitate training, for support staff under supervision, in the provision of HIV/AIDS treatment and information
14. participate fully in local, national and other initiatives for and community HIV/AIDS and MNCH education and awareness campaigns
15. provide/negotiate/advocate for appropriate facilities for confidential patient counseling in Pharmacies, clinics and workplaces
16. collaborate with other health care providers and with government initiatives in implementing a comprehensive care concept in the treatment of HIV/AIDS patients

The Role of the Pharmacist at Community Level

Given their accessibility, Pharmacists can help reduce HIV transmission by informing, educating and communicating with all members of the community in:

17. participating in awareness campaigns, e.g. World AIDS Day, to promote the Pharmacist as an authoritative and accessible source of information on HIV/AIDS and MNCH within the community
18. using daily opportunities to communicate prevention information to patients/consumers
19. providing information on voluntary counseling and testing services (VCT)
20. referring patients/consumers to VCT services to assist in early detection and diagnosis
21. providing consumer information on sexually transmitted infections, including referral services
22. spreading prevention messages using all available media outlets: newspaper advice columns, talkback radio, TV interviews and community health announcements
23. participating in community, school and faith-based activities
24. supporting other community-based HIV prevention programmes

Pharmacists can deliver quality treatment and care for HIV patients by:

25. maintaining high standards of pharmacy practice and observing any official Code of Practice
26. working as members of multi-disciplinary healthcare teams
27. acquiring skills in patient counseling
28. providing quality pharmacist/patient interaction to promote adherence and optimise treatment outcomes (monitoring treatment, providing information on medicines, nutrition and opportunistic infections)
29. promoting holistic and wellness concepts to HIV positive patients and providing psychosocial support or referral to support service providers
30. supporting families within national standard guidelines on MNCH agreed by clinicians, or referring patients to appropriate facilities
31. treating opportunistic infections, including sexually transmitted infections, within treatment guidelines prescribed by a clinician
32. maintaining patient medication records with appropriate sharing of patient histories between service providers
33. recording and notifying incidents of observed drug resistance
34. undertaking courses in the management of pharmaceutical supply and higher level courses for specialist services
35. ensuring an up-to-date knowledge of the national HIV/AIDS Guidelines

The Role of the Pharmacist at Government Level:

Working with the Pharmaceutical Society of Uganda, Pharmacists can:

36. build working relationships with politicians and officials within the Ministry of Health
37. contribute to policy development and implementation as it relates to Pharmacy practice, Pharmacy education and public health (with special focus on reducing stigma and discrimination)
38. advocate for and assist government and relevant authorities in the development and use of evidence-based treatment guidelines
39. advocate for and assist government and appropriate agencies to combat the importation and distribution of counterfeit and substandard medicines
40. advocate for increased employment of pharmacists in drug procurement and distribution nationwide
41. advocate and negotiate with government to increase patient access to affordable and sustainable antiretroviral therapy, for antenatal patients where appropriate
42. advocate and negotiate with government to increase patient access to information and services in the treatment of sexually transmitted diseases

43. work with the university of Uganda to review curriculum to ensure it meets the changing trends and requirements of Pharmacy practice in Uganda
44. work with government to formulate strategies and incentives to encourage Pharmacists to work in outreach areas to ensure adequate human resources for the delivery of quality treatment and care

The Role of the Pharmacist in Collaboration with other Organisations

Working collaboratively, the Pharmaceutical Society of Uganda and its members can maximise impact by:

45. interacting with other health professionals in the design and implementation of HIV prevention strategies
46. interacting with networks of people living with HIV to better meet their needs and requirements
47. interacting with other health professionals to optimise treatment and care of HIV patients, in both hospital and community settings
48. joining with other health-related professional organisations in the hosting of inter-professional workshops, seminars and continuing educational lectures
49. assisting major data collecting agencies to strengthen and improve systems for the strategic use of HIV/AIDS and MNCH related information
50. inviting other health-related professions to be represented on the Society's committees and negotiating for reciprocal representation
51. promoting medical and Pharmacy practice research within Uganda
52. continue to involve Pharmacy and other health-related student bodies in Pharmaceutical Society of Uganda activities