

THE NATIONAL AFRICAN HIV CONFERENCE

Sustaining the **momentum**



CONFERENCE REPORT

Thursday 18 – Friday 19 May 2006

Congress Centre, Great Russell Street, London WC1B 3LS





The 4th NAHIP conference “Sustaining the momentum” organised by the African HIV Policy Network (AHPN) took place on the 18th and 19th of May 2006 at the Congress Centre, Great Russell Street, London.

THE AIMS

- Sharing experience and good practice as well as learning from work done;
- Building an effective national response to HIV work with African communities in the current environment;
- Furthering the agenda for work with African communities through dialogue and debate.

THE EVENT



There was a very positive response from the voluntary sector and even with the financial problems faced by the NHS there was some representation from the statutory sector. Over 260 delegates from various organisations and groups attended. For the first time, to ensure active representation from people living with HIV, ten scholarships were offered and taken up.

There was an impressive line-up of speakers with specialist experience of some of the burning issues of the day. The conference was particularly pleased to have Caroline Flint MP (Public Health Minister) and Neil Gerard MP (chair All-Party Parliamentary Group on AIDS) gave the keynote address on day one and two respectively.

CONFERENCE HIGHLIGHTS

- **KEYNOTE ADDRESS BY CAROLINE FLINT MP, PUBLIC HEALTH MINISTER**



Caroline spoke of the importance that sexual health work now has within the Department of Health. She highlighted the work that NAHIP was doing and launched the latest “beyond condoms” campaign. She explained why she felt the campaign was important and urged

delegates to access the newly revamped NAHIP website www.nahip.org.uk. She went on to speak about the public health white paper, its implications for sexual health services and the investment that went with it. Caroline urged everyone to work together to reduce health inequalities and highlighted the work that the government is doing around ethnicity as demonstrated in the following quote from her speech:

“It is vital that services are culturally appropriate, especially where sensitive issues such as sexual behaviour and sexuality are concerned.”

■ HIV PAST PRESENT & FUTURE



Winnie Sseruma, chair of the AHPN, reflected on where we came from with HIV work; she explored some of the challenges that we have had to overcome and highlighted the successes we have had. She further went on to remind us not to be complacent as there was still much to be done and many obstacles to overcome. She finished off with a quote from Nelson Mandela’s speech delivered at the International AIDS Conference in Durban, South Africa in 2000, where he said:

“The challenge is to move from rhetoric to action, and action at an unprecedented intensity and scale. There is a need for us to focus on what we know works.”

■ THE NEW NHS — CHALLENGES OF COMMISSIONING AFRICAN SERVICES



Peter Nieuwets, commissioning manager at Adur, Arun & Worthing PCT, outlined the changes in the ever-evolving NHS. He explained the impact that this has and continues to have for African services. He outlined the need for community groups to engage proactively

with the new structures and urged communities not to just rely on HIV money but also to look at other areas for funding such as mental health, health inequalities and social inclusion to name a few. He finished his presentation by urging community groups to sell themselves and services to the commissioners as they were a valuable resource for the NHS and they were best placed to engage with their communities.

■ PARTNERSHIPS FOR PREVENTION — THE ROLE OF AFRICAN FORUMS



Priscilla Nkwenti, the chief executive of Black Health Agency, spoke of the importance of the African forums and the role they play. She explored the different kinds of partnerships that currently exist and also reflected on the challenges faced by partnership. She spoke of the need for better understanding of the functions of the forums and stressed the need for funding of these forums. She ended her presentation by speaking of the lessons learnt from their experience of running the Northern Forum.

■ KEYNOTE SPEECH BY NEIL GERARD MP, CHAIR ALL-PARTY PARLIAMENTARY GROUP ON AIDS



Neil spoke of the work that his group has done and continues to do. He also urged community groups to engage their local MPs more. Most MPs work hard to be on top of all issues that occur in their areas, but it is very difficult to know about everything. He called on Community groups and faith groups to make themselves known to the MPs to enable the MPs to understand the HIV/AIDS situation in their own areas. Unless HIV issues are brought to their attention they have no way of knowing what they are.

DESTITUTION, VULNERABILITY, DEPRIVATION — THE EXPERIENCE OF AFRICANS LIVING WITH HIV IN THE UK



Robin Brady, chief executive of Crusaïd, spoke about the hopes and aspirations of people living with HIV being dashed by the state of racism, stigma and discrimination. He spoke about how “an HIV diagnosis can lead to homelessness, loss of job, domestic violence, debt, depression, difficulty in coping with medication”. Each of these can impact a person’s health, which in turn can cause further financial problems for them. He further went on to state that Africans living with HIV in Britain also face a range of obstacles to employment, mainly in relation to their immigration status, which breeds resentment and anger. Not being allowed to work means a low standard of living and a loss of self-esteem.

IMMIGRATION AND HIV — A CHANGING ENVIRONMENT



Tauhid Pasha, Policy and Information Director for the Joint Council for the Welfare of Immigrants, spoke very movingly about the gradual erosion of the rights of immigrants living with HIV. How some of the new government policies affect access to healthcare and support, negative media reports on “health tourism” and people receiving exorbitant medical bills. He asked *Does it make sense?* Combination therapy v. Intensive care.

He concluded by asking delegates and policy makers to **RECOGNISE RIGHTS, REALISE BENEFITS.**

OVER THE TWO DAYS THERE WERE SOME WORKSHOPS AND SKILLS BUILDING SESSIONS.



THESE INCLUDED WORKSHOPS ON:

Young Free and Single – how young people can be empowered and engaged with sexual health messages as well as encouraging them to take ownership and advantage of available services.

Governance and Accountability – examined issues around governance & accountability for charity board members and managers, and exploring ways in which community groups can strengthen their practice in order to meet national standards.

You’ve got to have Faith – explored the role faith plays in HIV prevention, treatment and care, the role of faith leaders, and ways in which health care workers support the church/mosque in caring for people living with HIV.

Monitoring and Evaluation – examined the effectiveness of project management tools and how they can help to maximise effectiveness and efficiency and thus ensure that progress is made towards achieving desired goals.

Effective Partnerships – explored different types of partnerships, why they exist, and how best to utilise the partnerships in addressing the challenges faced in the new NHS as well as exploring the pros and cons of successful partnerships.

Living Positively – acknowledged the role of people living positively [with HIV] as partners in prevention, treatment and care. Not only to evoke strong emotions about *what not to do* but also to enjoy safe sex, and influence the design of services that are targeted to them.

Hiding Behind Culture – explored the role and use of cultural values as effective tools for good health promotion practices, treatment and care; and discussed how fluid culture is and the importance of challenging unsafe practices.

Confidentiality and Disclosure – session concerned itself with answering questions of confidentiality regarding information held on the HIV status of people; how to work with clients in light of recent criminalisation court cases; and whom we disclose to, and the implications of that on confidentiality.

AFRICANS AND HIV IN THE UK — AN EPIDEMIOLOGICAL PERSPECTIVE



Valerie Delpech, head of HIV reporting at the Health Protection Agency, painted a very thought-provoking picture on the impact that HIV continues to have on African people. She reminded us of the uneven burden that women bear, accounting for two-thirds of all diagnosed infections; the fact that too many Africans, especially men, were still reporting late, resulting in poor health outcomes; that there were higher mortality rates; and that TB was still the most common AIDS defining illness amongst Africans in the UK. She challenged health promoters to ensure that more efforts were made to reduce late diagnosis, increase promotion and access to condoms and reduce stigma.

THE NEW NHS — IMPLICATIONS FOR HIV AND SEXUAL HEALTH



Nick Partridge, chief executive of the Terrence Higgins Trust, spoke about the ever-changing NHS and what challenges and opportunities that posed for the voluntary sector. He articulated the cost pressures that PCTs were under and highlighted the need for the forging of new partnerships. He explained how the policy environment caused particular challenges even though it was meant to make the patient experience easier but in practice needed more joined-up thinking. He shared a vision of the new NHS where patients had more choices on the kinds of services that they could access at convenient locations and at suitable times. He urged the statutory sector to invest more in the voluntary sector in order for their targets to be met.

PROMOTING A NATIONAL RESPONSE TO THE HIV PREVENTION NEEDS OF AFRICANS IN ENGLAND



Walter Gillgower, NAHIP programme manager, spoke about the unique partnership model that was adopted for this programme, which saw the statutory sector working in partnership with the voluntary and academic sectors. He stressed the importance of strategic planning, and ensuring that the partnership was fit for purpose. He shared the plans for NAHIP's future work and how important it was for NAHIP to continue with its facilitation and support work, ensuring that there was continued capacity building and support. Walter ended by informing delegates that NAHIP will continue to highlight and promote good practice, showing leadership and developing new partnerships, and encouraged more joined up thinking in the health promotion work targeted at African Communities.

TO TELL OR NOT TO TELL — CONFIDENTIALITY AND DISCLOSURE



Martha Chinouya, a researcher from London Metropolitan University, spoke very movingly about her experience of working with African women around confidentiality and disclosure. She recounted her experience of sharing a space with these women and learning what it was like to be amongst them. She shared with delegates the findings of her study with these women and highlighted some of the challenges that they faced. The language used by health promoters and clinicians in the UK does not always hold the same meaning to some Africans. Disclosure in some instances didn't necessarily mean telling people explicitly about HIV but using locally accepted idioms and stories. She urged health promoters to think about the lived experiences of African people and seek ways of addressing the misunderstandings that have been created.

“THE OUTSIDER STATUS” — COMMUNITY CARE ISSUES



Ogo Chime from the Sussex African Communities Project spoke about the study that he and other colleagues had been involved in. He reminded delegates of how stigma works and highlighted the impact of stigma on the individual, the family and the community. He shared the cycle of stigma, which states that stigma leads to discrimination, which then leads to violation of human rights. Ogo highlighted the various places where stigma was encountered, by health care providers, in the family, the education system and in the community. He ended by proposing that in order to address stigma there has to be a two-pronged response: a political and structural response on one hand and strong community responses on the other.

WHAT NEXT, WHERE DO WE GO FROM HERE?



Max Sesay, chief executive of the AHPN, ended the conference by reflecting on the two days. He shared with delegates the gratitude that he has felt as he has witnessed this conference evolve. He gave an insight into how the AHPN will continue to do the work it does including the provision of conferences like this one, learning from the previous ones and constantly improving them. He concluded by thanking all the delegates and speakers and invited everyone to plan to be at the next conference that is to be held in 2008.

CONFERENCE FEEDBACK



“Well organised conference! However, lets have some of these conferences organised outside London to reflect the character of AHPN’s network.”

“Excellent work by NAHIP in lobbying for the African people. Keep up the good work.”

“The conference organisation was excellent, but there was a conspicuous absence of young people whom we should be targeting.”

“It would be useful in future to see some workshops or paper presentations on issues that specifically affect African gay men – they are a growing and hard to reach community and I think it important that the community starts facing these issues. Well done, really good conference.”

“Excellent all round! Positive to see African communities taking hold of the issue.”

THE FUTURE

Work has already begun for the planning of the next national African HIV conference in 2008. Taking into consideration the views expressed by the delegates, we will be ensuring that we have a broader range of sessions and speakers as well as providing culturally appropriate food.

For further information please go to www.nahip.org.uk