The IMPACT of COVID-19 Pandemic on CAB

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Community Advisory Board is a community engagement structure through which clinical research sites maintain communication with communities. It is comprised of volunteers from various organizations, departments and individual important in their communities. It helps to ensure that research studies address the health needs of communities and that research studies do not harm. CAB members also part of community structures and scientific committee in international clinical trials networks which BHP is affiliated with. For CABs to effectively execute their mandate, they meet regularly with research teams to discuss and input into new studies and to be updated on-going studies, share and assist with dissemination of study results and have the study teams respond to questions that CAB members might have brought from their communities.

COVID-19 changed the way CAB meetings are conducted and revealed gaps in needs of Community Stakeholders and CAB. CAB has meetings, every month with provision for meetings as needed. Meetings include training sessions aimed at equipping CAB members with skills to enable them to carry out their duties effectively. These meetings were in person meetings prior to the COVID-19 outbreak. When the pandemic necessitated the use of platforms such as zoom, Microsoft teams, Webex and skype, we realised 3 things:

1. Some CAB members had limited knowledge of how they work and how they are manipulated, also lacked the etiquettes that go with them

2. Most members did not have access to a smart phone or laptop and/or could not afford data or wifi

3. Some members did not have quiet space suitable for meetings

These prevented some CAB members to actively participate in community engagement activities and in various committees.

Community Engagement should be allocated a budget to ensure it functions during pandemics such as COVID-19. Research sites/organisations would benefit in ensuring funds are available to develop technological skills for CAB members and in helping them to have access to both hardware and software. Funders should have specific funding opportunities for community stakeholder engagement that could be used circumstances change and ensure independence from trials and thus continues to function even in the midst of pandemic.