KEY MESSAGES—COVID-19 AND HIV

UNAIDS is mobilizing

- As COVID-19 spreads rapidly around the world, UNAIDS is mobilizing to respond.
  - COVID-19 is a serious pandemic, unprecedented in our lifetimes, which is set to hit countries with the highest burden of HIV very soon.
  - In many countries, due to weaker healthcare systems, informal settlements, over-crowded cities and public transportation and lack of clean water and sanitation current approaches to self-protection, social distancing and containment may not be viable.

UNAIDS is concerned

- UNAIDS is concerned about the welfare of vulnerable and marginalized populations, including key populations and people living with HIV.
  - UNAIDS is concerned that during the COVID-19 outbreak stigma and discrimination will jeopardize the human rights and affect access to services for people living with HIV, sex workers, transgender people, people who use drugs, gay men and other men who have sex with men and people in prisons.
- UNAIDS is concerned about the welfare of the 15 million people living with HIV who do not have access to life-saving HIV treatment and who may have compromised immune systems, as well as the 24 million people who are on antiretroviral therapy.
- UNAIDS is deeply concerned about the possibility of severe disruption to HIV prevention, testing and treatment services.

COVID-19 and people living with HIV

- Although there is currently no clear evidence that people living with HIV are at an increased risk of acquiring COVID-19 or of becoming more ill from it, many people living with HIV are ageing and/or have other health conditions, including heart disease or lung disease, that are known to make people susceptible to more severe COVID-19 disease.
In addition, 15 million people living with HIV do not have access to antiretroviral therapy which may compromise their immune systems.

So, as UNAIDS gathers more information, **UNAIDS urges:**

- **All people living with HIV to take precautions** to reduce exposure to COVID-19.
- **All people living with HIV to reach out to their health-care providers** to ensure they have adequate stocks of essential medicines.

As COVID-19 affects countries with higher HIV prevalence, we expect better understanding and new learnings about the interactions between HIV, HIV-related immunodeficiencies, and COVID-19, and how that affects people.

**UNAIDS is taking action**

- **UNAIDS is working with governments and community partners** to:
  - **Undertake rapid surveys** through networks of people living with HIV in countries to assess information needs, medication on hand and ability to access service support networks.
  - **Find out if multimonth dispensing** of antiretroviral therapy is being fully implemented, and, if not, to identify the challenges to implementing this policy and how they may be resolved.
  - **Assess the possibility of HIV service interruption** at health facilities, community sites and mobile and outreach sites.
  - **Develop contingency plans** for access should COVID-19 responses affect those routine services.
  - **Reach the most vulnerable with information on how to protect themselves** and ensure access to the services they need.
  - **Assess** whether travel restrictions and/or quarantine measures are affecting access to necessary medical care.

- **UNAIDS is monitoring developments in clinical trials that are testing various medicines for the treatment of COVID-19.**

- **UNAIDS is urging people to act with kindness,** not stigma and discrimination. People affected by COVID-19 are part of the solution and must be supported.

Celebrating and sharing examples where people living with HIV and communities are taking action together to solve problems and help each other.
UNAIDS recommends

- **UNAIDS strongly recommends** ensuring that HIV services continue to be made available for people living with and at risk of HIV infection.
  - Including the availability of condoms, opioid substitution therapy, sterile needles and syringes, harm reduction, PrEP and HIV testing, including testing for pregnant women.

- **UNAIDS recommends that countries** move forward to the full implementation of the World Health Organization treatment guidelines to allow multimonth dispensing of three months or more of HIV treatment.
  - To prevent people from running out of medicines and reduce the need to access the health system, reducing burden on the health system and reducing exposure to people who are ill in health settings.

- **UNAIDS strongly recommends** ensuring access to COVID-19 services for all vulnerable populations, including a targeted approach to reach those most left behind and removing financial barriers, such as user fees.
  - This includes actions ensuring zero stigma and discrimination, particularly in health-care settings.

- **UNAIDS is urging governments** to respect the human rights and dignity of people affected.

- **UNAIDS is advocating** for experiences learned in the HIV epidemic to be applied to the COVID-19 emergency response.

UNAIDS is working with communities

- **UNAIDS is calling for the inclusion of community leadership in preparedness, planning and response**—a seat at the table

- The HIV community and response have much to offer in terms of preparedness and resilience.
  - **UNAIDS recommends** working with communities to find local solutions, particularly in informal settlements, humanitarian crises settings, cities and areas without access to basic necessities such as running water and adequate health services.
  - In building trust, bringing partners together, coordinating, providing information, finding joint problem-solving measures at the community level and being a voice for the voiceless.

- **UNAIDS is working with communities and networks of key populations** to mitigate the impact of COVID-19 on their daily lives.
UNAIDS’ action in countries

UNAIDS’ action in China

- In China, UNAIDS worked with civil society and the government to devise and launch a survey to evaluate the impact of COVID-19 on people living with HIV.
  - More than 1000 people living with HIV responded and one third (32.6%) reported that, because of lockdowns and restrictions in movement, they were at risk of running out of treatment.
- Based on this information, UNAIDS in China was able to work closely with community partners and the government to reach people who were at risk of running out of medicines and offer support as needed.
- UNAIDS also provided protective equipment to organizations serving people living with HIV, hospitals and others.

UNAIDS’ action in South Africa

- UNAIDS has undertaken a rapid analysis of data on people living with HIV, including an age breakdown. A further assessment of how many people living with HIV are in which age group and are on antiretroviral therapy and are not on antiretroviral therapy has been carried out.
- An assessment of health system capacity is also available, which highlights the limited public health hospital capacity, especially in areas with high populations of uninsured people.
- UNAIDS is in discussions with civil society, especially people living with HIV, with a focus on community-based monitoring work and support.

UNAIDS’ action in the Islamic Republic of Iran

- UNAIDS is working with the National AIDS Programme to strengthen communication with networks of people living with HIV, including providing information on prevention measures, and is encouraging the implementation of multimonth dispensing by health facilities.
- UNAIDS has collected information on the need for prevention through networks of HIV organizations and on medicine needs from hospitals.
- UNAIDS is working on mobilizing resources with international partners and donors as well as with other United Nations agencies.

UNAIDS’ action in Kenya

- UNAIDS has deployed a staff member to help the Office of the Government’s spokesperson in strengthening communication and awareness-raising on preventing and responding to COVID-19.