

PRESS RELEASE

UNAIDS urges countries to stay focused on HIV prevention during the COVID-19 pandemic

Overstretched health systems, lockdowns, loss of livelihoods and fewer employment opportunities could increase unprotected sex, sexual violence and exploitation, transactional sex and sex work, leading to an increase in new HIV infections

GENEVA, 6 May 2020—Despite the global progress made in HIV prevention, with new HIV infections falling by 40% since the peak in 1997, hard-won gains are in danger of being reversed by the COVID-19 pandemic sweeping around the world.

In the light of the COVID-19 pandemic, UNAIDS is urging countries to remain steadfast in their HIV prevention efforts and ensure that people can continue to access the services they need to stay HIV-free, discrimination-free and violence-free and to be able to enjoy their sexual and reproductive health and rights.

“COVID-19 is impacting almost every country and community, but the global HIV epidemic hasn’t gone away,” said Winnie Byanyima, UNAIDS Executive Director. “People are still having sex. People are still using drugs. During the COVID-19 pandemic, everyone must be given the tools they need to be safe and to protect themselves from HIV. Human rights are a cornerstone of HIV prevention and must be a cornerstone of the COVID-19 response.”

Three new documents on HIV prevention published by UNAIDS and partners in the Global HIV Prevention Coalition look at how to maintain and prioritize HIV prevention services in the context of COVID-19. They look at the critical measures needed to keep the most vulnerable alive and healthy, including the measures required to prevent and address violence against women and children, to keep the supply of critical commodities available and to sustain the livelihoods of the world’s poorest.

The documents explain that the range of options to prevent HIV—condoms, both male and female, lubricants, sterile needles and syringes and opiate substitution therapy for people who inject drugs, pre-exposure prophylaxis and post-exposure prophylaxis and treatment as prevention—are just as valid now as ever. Innovative ways of getting HIV prevention commodities to the people who need them must be found—dispensing longer-term quantities of prevention supplies, allowing distribution centres to remain open during lockdowns and protecting community distribution points are but a few possibilities.

In addition to hampering HIV prevention and treatment services, UNAIDS is concerned that the COVID-19 epidemic may increase the vulnerability of people to HIV. The widespread loss of

livelihoods and fewer employment opportunities could mean that transactional sex, sex work and sexual exploitation will increase, putting people at increased risk of contracting HIV unless they have the means to protect themselves.

As well as HIV prevention commodities, the sustained availability of services and support programmes for the prevention of HIV, prevention of gender-based violence and promotion of sexual and reproductive health and rights as essential services is critical. HIV counselling and testing services, the screening and treatment of sexually transmitted infections, continuity of access to sexual and reproductive health services, peer and other community outreach services, psychosocial support services, drop-in centres for key and vulnerable populations, comprehensive sexuality education and sexual violence protection are all vital to preserving the HIV prevention response. The lockdowns imposed during the COVID-19 response have resulted in alarming increases in reports of domestic and intimate partner violence against women and violence outside the home, necessitating urgent reinforcement of prevention, protection and support services for gender-based and sexual violence.

Since social distancing and lockdowns have all but stopped face-to-face service delivery, UNAIDS is urging the introduction of innovative means through which people can access services. Physical meetings can be made safer by using appointment systems that do not allow too many people in a facility at the same time, while holding meetings and education sessions virtually and the use of telephone hotlines and SMS services all have a role to play to both keep people safe from the new coronavirus and to allow them to continue getting the help they need to stay free from HIV. HIV self-testing is a safer way to carry out HIV testing that reduces contact with other people and reduces the service burden on health facilities.

Community organizations and networks have long been essential for the AIDS response, owing to the central role they play in raising awareness, providing information, dispelling myths and countering misinformation and service delivery for marginalized and vulnerable populations. Now more than ever, community-led actors should be supported to innovate, deliver and be recognized as essential service providers for both the HIV and COVID-19 responses.

Forty years in responding to HIV have provided valuable lessons, notably that the COVID-19 pandemic will not affect everyone equally and that the most marginalized, including key populations, will be the most affected. Across the three new documents, UNAIDS urges countries to take a human rights approach and prioritize the needs of the most marginalized populations during COVID-19, including maintaining critical HIV prevention services.

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The Joint United Nations Programme on HIV/AIDS (UNAIDS) leads and inspires the world to achieve its shared vision of zero new HIV infections, zero discrimination and zero AIDS-related deaths. UNAIDS unites the efforts of 11 UN organizations—UNHCR, UNICEF, WFP, UNDP, UNFPA, UNODC, UN Women, ILO, UNESCO, WHO and the World Bank—and works closely with global and national partners towards ending the AIDS epidemic by 2030 as part of the

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