

Ensuring access to quality, safe, and non-discriminatory services for HIV key populations and migrants in the context of the COVID-19 pandemic

Statement of the Joint UN Programme on HIV/AIDS (UNAIDS) Interagency Working Group on Key Populations on the need to ensure access to quality, safe, and non-discriminatory services for HIV key populations and migrants in the context of the COVID-19 pandemic

The rapid spread of COVID-19 continues to impact billions of lives around the world. Unprecedented human and financial resources are needed to address this pandemic. UN entities, NGOs, communities of people living with HIV, sex workers, gay men and other men who have sex with men, people who use drugs, transgender people, and people in prisons and their sexual partners, as well as civil society all have a role to play in fighting COVID-19, saving lives, and tackling far-reaching social and economic consequences. Critical moments like this remind us more than ever that inequality can be a matter of life and death and that everyone is born free and equal in dignity and rights, including to the highest attainable standards of health.

[Lessons learned from the global HIV response should inform COVID-19 responses:](#) HIV has taught us that it is a shared responsibility and we need to empower communities and involve them in the response; we should never compromise on human rights; we need to remove all forms of stigma and discrimination; and we need to support vulnerable and marginalized groups.

UNAIDS estimates that 62 % of the new HIV infections are among key populations and their sexual partners. Key populations experience particular forms of exclusion, criminalisation, inequality and discrimination that render them particularly vulnerable to HIV and again now to COVID-19. People in prisons and closed settings, where physical distancing is not always an option, are extremely vulnerable to COVID-19. People in prisons also have a higher prevalence of HIV and TB which poses a higher risk of complication if infected with SARS-COV 2, as do migrants, who also face greater HIV vulnerability. LGBT people are reporting an elevated risk of domestic and family violence, increased social isolation and difficulties in accessing crucial HIV treatment and gender-affirming health services. Leaving key populations behind at this critical moment could have a grave impact on health and human lives. It could reverse the gains in the global HIV response as well.

We call on all Governments and partners to join us in,

Making quality, non-discriminatory HIV prevention, treatment, care and support services, and health services in general, available for key populations and migrants in the context of the COVID-19 pandemic.

These services must be based on respect, protection and fulfilment of human rights, regardless of existing punitive laws, policies and practices. They must be free from stigma and discrimination, based on evidence and science, and compliant with the most recent international guidance. Services must be equitable, based on informed consent, confidential and safe - for communities, as well as healthcare workers.

Rapidly adapting service provision to take into account the new realities of the COVID-19 pandemic.

Examples of adapted services are safe access to home HIV testing and remote counselling. Where possible, 3 to 6 months' supply of ARVs, TB and viral hepatitis treatment should be supplied to ensure continuity of treatment, reduce transmission of HIV and co-infections, as well as the risk of COVID-19. People who use drugs should have access to harm reduction, including, where applicable and as advised by medical professionals, access to multiple opioid substitution doses to reduce OST site visits and COVID-19 exposure risk. Alternatives to imprisonment, where allowed, for non-violent offences could save lives, particularly for crimes not recognised under international law. Measures of early release should be taken for specific categories of people who are at particular risk of being affected by COVID-19, such as the elderly and individuals affected by chronic diseases or other health conditions, as well as pregnant women, women with dependent children, prisoners approaching the end of their sentence and those who have been sentenced for minor crimes in prisons, in-line with national policies and without compromising public health and safety. Emergency social protection measures for key populations are needed since they are often excluded from social services, including, but not limited to, housing and health insurance, and are often in precarious work situations. Service provision must continue to take into consideration intersectionality, gender and age diversity. It must be properly resourced with people, funding and materials. In order to be effective and efficient, these services must include key populations, their communities and organizations in their design and implementation.

Ensuring COVID-19 responses do not lead to the proliferation of punitive laws and measures to enforce restrictions or to criminalise transmission and exposure.

The gravely detrimental effect of such punitive measures on already marginalized or criminalized people has been well-documented in the HIV response, including by the Global Commission on HIV and the Law.

We won't stop COVID-19 if some people can't afford or access testing or treatment. We must ensure that responses to COVID-19, or any other pandemic or health emergency, do not leave key populations, migrants and other vulnerable groups behind. As the Interagency Working Group on Key Populations we stand ready to work with all partners to ensure safe and rights-based access of key populations to quality HIV and COVID-19 services.

The Interagency Working Group on Key Populations is established under the [UNAIDS Division of Labour](#) and is co-convened by the United Nations Development Programme ([UNDP](#)), the UN Population Fund ([UNFPA](#)), and the United Nations Office on Drugs and Crime ([UNODC](#)) in partnership with the Global Network for and by People Living with HIV ([GNP+](#)), the International Network of people who Use Drugs ([INPUD](#)), MPact Global Action for Gay Men's Health and Rights([MPact](#)), Global Network of Sex Work Projects([NSWP](#)), [IRGT](#), and the [UNAIDS Secretariat](#).