

The effects of the COVID-19 pandemic on the HIV response

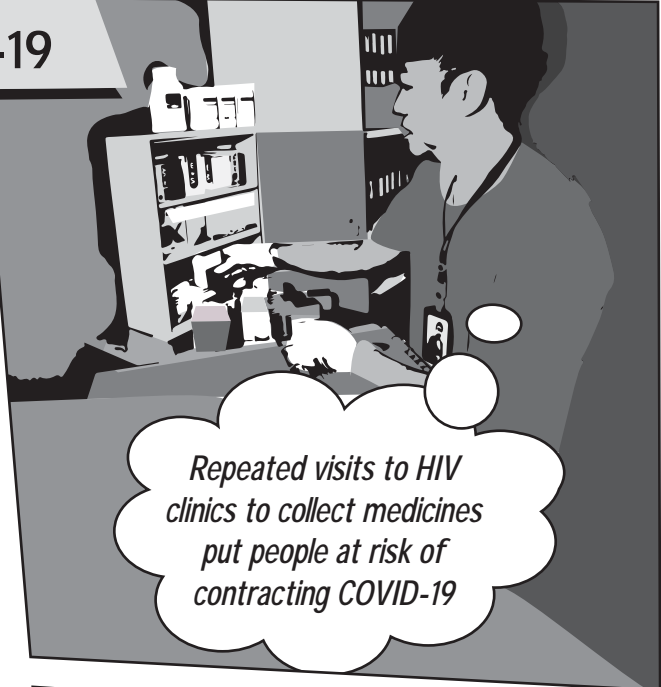




PEOPLE LIVING WITH HIV ARE AT HIGHER RISK FROM COVID-19



People living with HIV experience more severe outcomes and have higher comorbidities from COVID-19 than people not living with HIV



Repeated visits to HIV clinics to collect medicines put people at risk of contracting COVID-19



The pressure of dealing with both the HIV pandemic and the COVID-19 pandemic has had a huge impact on the mental health of people living with HIV



Access to COVID-19 vaccines in poorer countries is lagging well behind access in the richest



Communities have been key, helping many HIV programmes to rapidly rebound



Communities that had come together to respond to HIV quickly mobilized and refocused to fight COVID-19



People living with HIV are a priority for vaccination: HIV is considered a high-risk condition when developing vaccination programmes

The movement for a People's Vaccine grows stronger every day





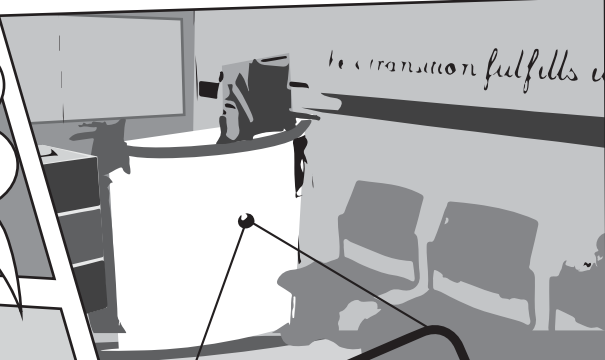
TREATMENT ACCESS HAS SLOWED DOWN

Early lockdowns left people living with HIV who were away from their home unable to access their treatment



The link to HIV treatment has been broken—people who are newly diagnosed are often not starting treatment

People have had difficulty in accessing HIV treatment



The global increase in viral load testing slowed considerably

HIV testing services have been hit—new HIV infections are not being diagnosed



Mental health-care support services have been closed



UNAIDS and partners reached out to people living with HIV affected by lockdowns to help them to access HIV treatment



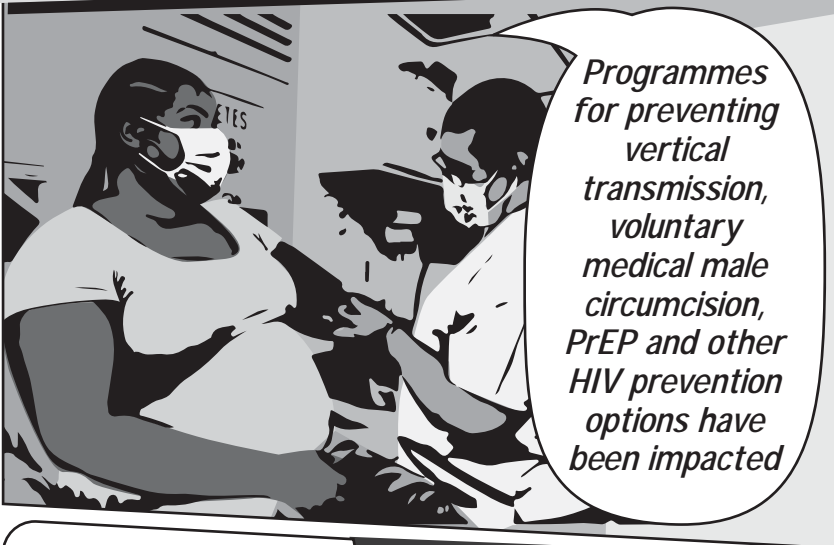
HIV treatment has been delivered to homes

HIV self-testing, multimonth dispensing of medicines and the use of telehealth and virtual platforms for information and support have been accelerated, reversing many initial setbacks in HIV service provision

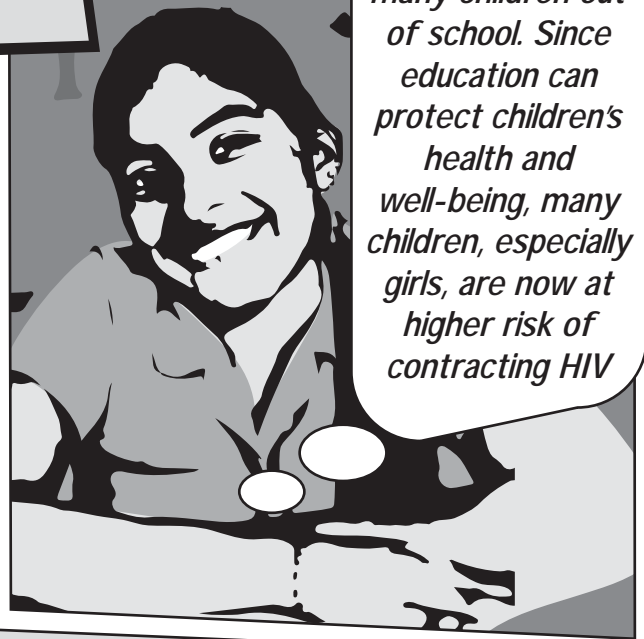




HIV PREVENTION PROGRAMMES HAVE BEEN INTERRUPTED

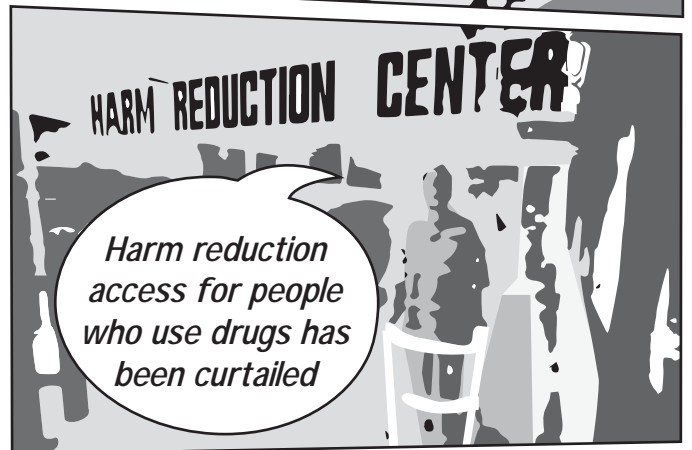


Programmes for preventing vertical transmission, voluntary medical male circumcision, PrEP and other HIV prevention options have been impacted



COVID-19 has put many children out of school. Since education can protect children's health and well-being, many children, especially girls, are now at higher risk of contracting HIV

The more than 11 million people in custody worldwide, and the 30 million people entering and leaving detention every year, have not been able to follow the recommended ways to prevent COVID-19



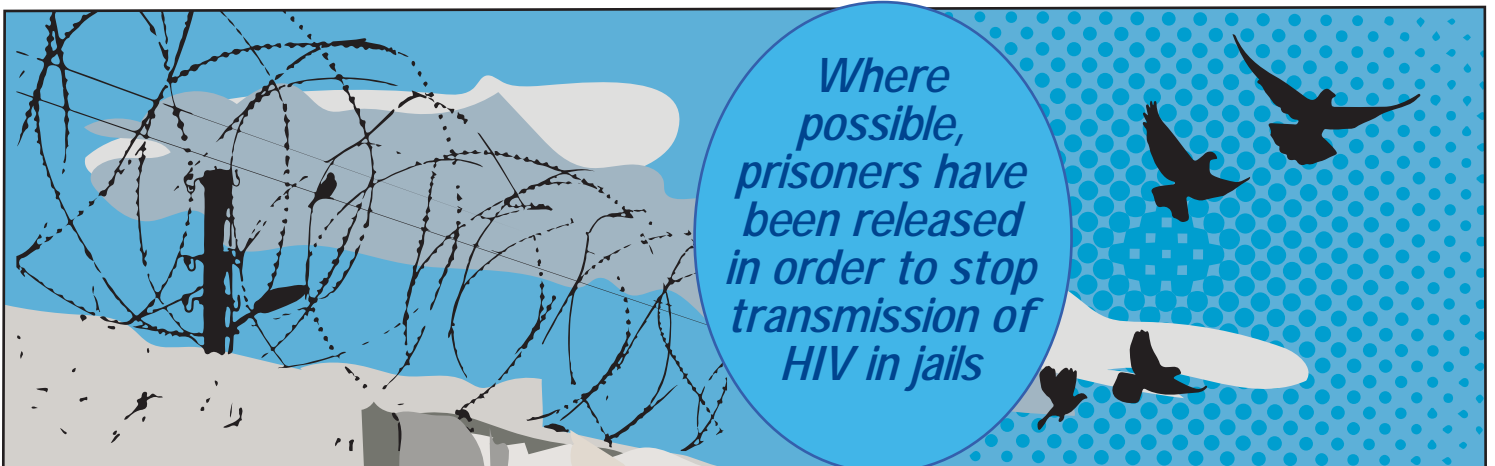
Harm reduction access for people who use drugs has been curtailed



Sexual and reproductive health and rights services have been scaled back



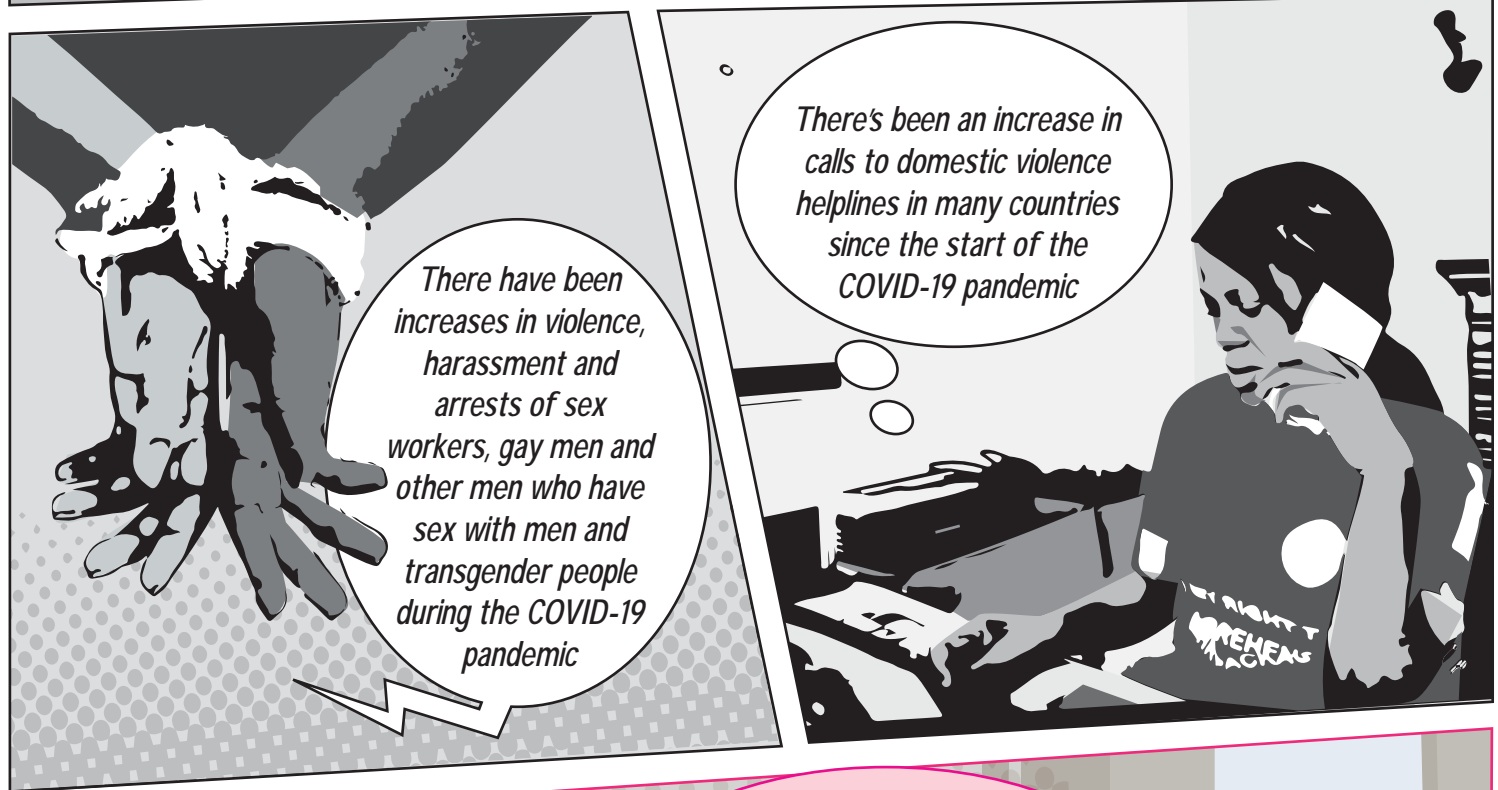
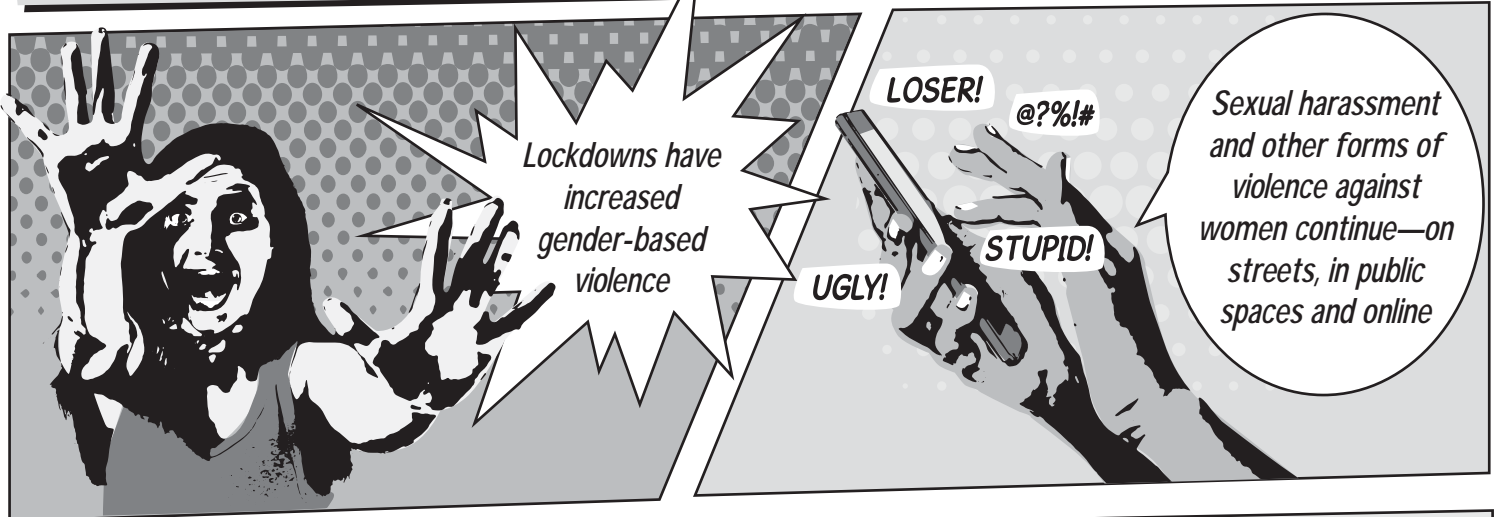
Harm reduction services have adapted and are reaching people who use drugs where they congregate and live



Where possible, prisoners have been released in order to stop transmission of HIV in jails



VIOLENCE AGAINST VULNERABLE PEOPLE HAS INCREASED

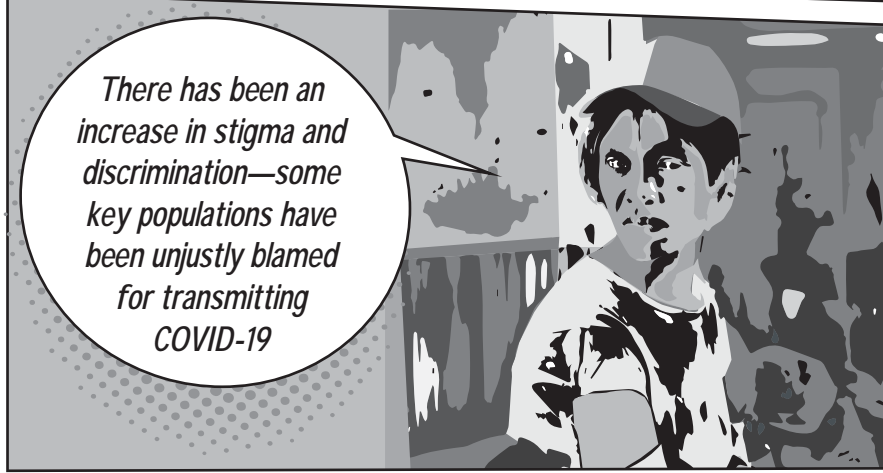




STIGMA AND DISCRIMINATION HAS WORSENERD



COVID-19 stigma has been directed at people living with HIV



There has been an increase in stigma and discrimination—some key populations have been unjustly blamed for transmitting COVID-19



Access to justice has been curtailed and COVID-19 has been used as an excuse to introduce laws targeting transgender people and people living with HIV



Communities have monitored and shone a light on human rights violations, in some cases leading to swift and effective changes in policy and practice

Affected communities involved in the definition, implementation and follow-up of COVID-19 programmes have helped to reduce stigma around the disease





THE ECONOMIC EFFECTS HAVE BEEN HARSH



*Sex workers
have lost their livelihoods and
are often excluded from social
protection programmes*



*People living on the margins of
society and working in the
informal sector have often not
been reached by official social
protection schemes*



*Food and hygiene
products have been
distributed to the
most vulnerable*



*Some countries have
included sex workers and
transgender people in
social protection
programmes*



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