

September 9-10, 2020

SPONSORED BY:



IN PARTNERSHIP WITH:



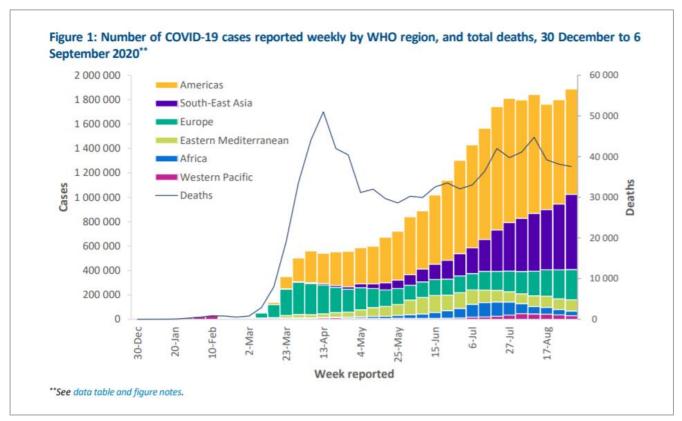


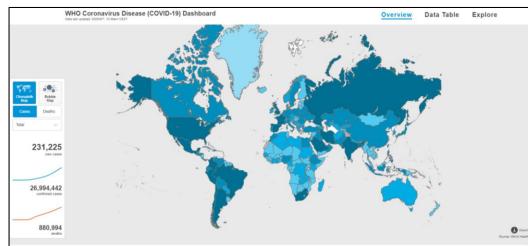
Implementing Mitigation
Strategies to Protect HardWon Gains in HIV, TB, and
HCV Responses –
Perspectives from WHO

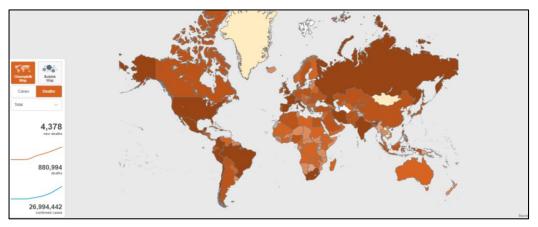
Dr Ren Minghui
Assistant Director-General
Universal Health Coverage/Communicable and Noncommunicable Diseases
World Health Organization

COVID-19 Situation report 7 September 2020

Globally, as of 10:38am CEST, 7 September 2020, there have been 26,994,442 confirmed cases of COVID-19, including 880,994 deaths, reported to WHO.

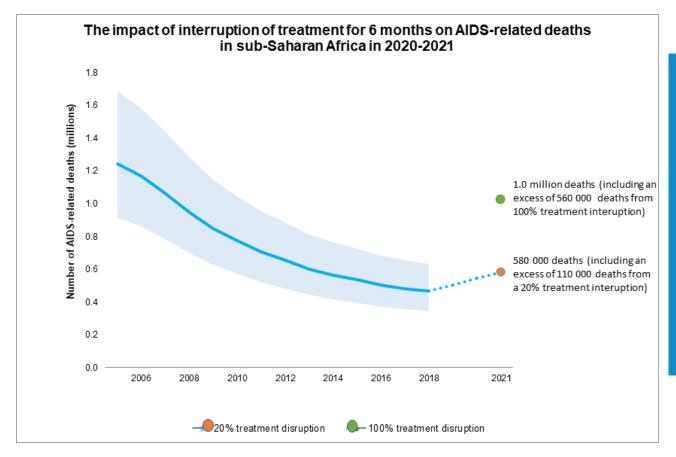


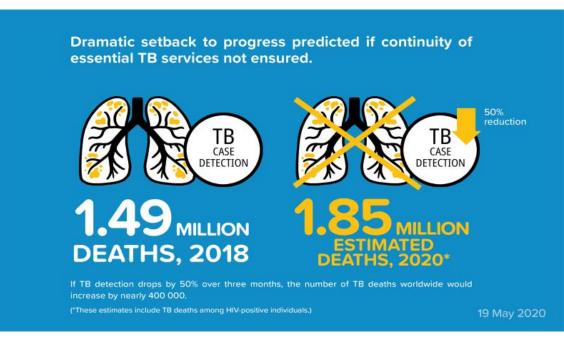






COVID and HIV in Africa: Impact on Deaths from HIV and TB





Jewell B, Mudimu E, Stover J, et al for the HIV Modelling consortium, *Potential effects of disruption to HIV programmes in sub-Saharan Africa caused by COVID-19: results from multiple models.* Preprint, https://doi.org/10.6084/m9.figshare.12279914.v1, https://doi.org/10.6084/m9.figshare.12279932.v1.

Alexandra B. Hogan, Britta Jewell, Ellie Sherrard-Smith et al. *The potential impact of the COVID-19 epidemic on HIV, TB and malaria in low- and middle-income countries.* Imperial College London (01-05-2020). doi: https://doi.org/10.25561/78670.

Stover J, Chagoma N, Taramusi I, et al. Estimation of the Potential Impact of COVID-19 Responses on the HIV Epidemic: Analysis using the Goals Model. Pre-print. medRxiv 2020.05.04.20090399; doi: https://doi.org/10.1101/2020.05.04.20090399



Mitigating the Health systems disruptions during COVID-19

- Huge stress posed by increasing demand for care of people with COVID-19
- Lack of supplies and equipment
- Burden on health care workers
- Disruption of essential health services

Dilemma: balance the demands of responding to COVID-19 with strategic planning and coordinated action to maintain quality essential health services



Operational strategies for maintaining EHS

Part 1. Operational strategies for maintaining essential health services



Part 1: Operational strategies for maintaining essential health services



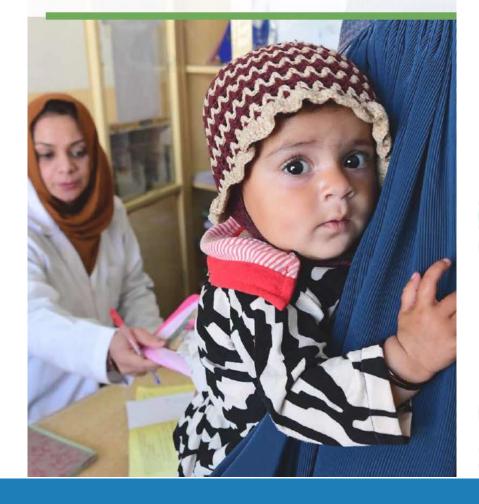
- 1.2 Context considerations
- 1.3 Adjust governance and coordination mechanisms to support timely action
- 1.4 Prioritize essential health services and adapt to changing contexts and needs
- 1.5 Optimize service delivery settings and platforms
- 1.6 Establish safe and effective patient flow at all levels
- 1.7 Rapidly optimize health workforce capacity
- 1.8 Maintain the availability of essential medications, equipment and supplies
- 1.9 Fund public health and remove financial barriers to access
- 1.10 Strengthen communication strategies to support the appropriate use of essential services
- 1.11 Strengthen the monitoring of essential health services
- 1.12 Use digital platforms to support essential health service delivery





Life course and disease considerations





PART 2: Life course and disease considerations

2.1 Life-course stages

- 2.1.1 Maternal and newborn health
- 2.1.2 Child and adolescent health
- 2.1.3 Older people
- 2.1.4 Sexual and reproductive health services

2.2 Nutrition, noncommunicable diseases and mental health

- 2.2.1 Nutrition
- 2.2.2 Noncommunicable diseases
- 2.2.3 Mental, neurological and substance use disorders

2.3 Communicable diseases

- 2.3.1 HIV, viral hepatitis and sexually transmitted infections
- 2.3.2 Tuberculosis
- 2.3.3 Immunization
- 2.3.4 Neglected tropical diseases
- 2.3.5 Malaria

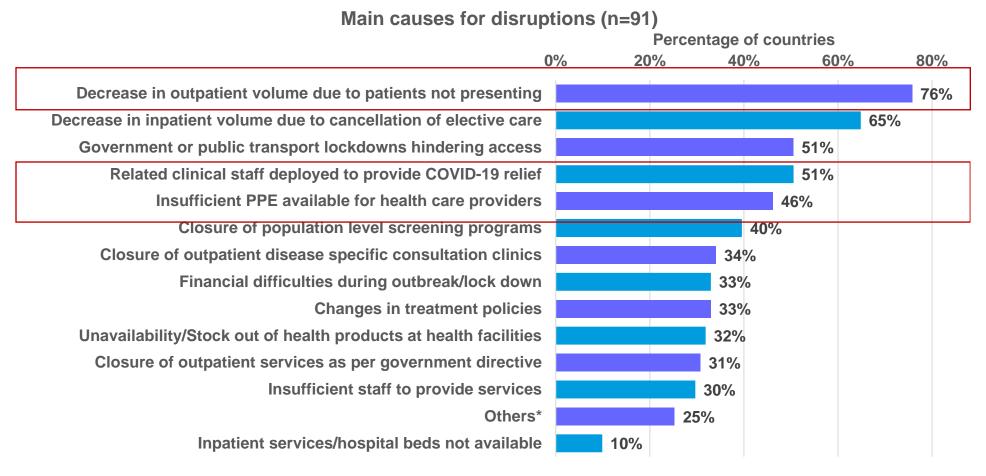




76% of countries noted decreased outpatient volumes as a main cause for disruptions



"A mix of demand and supply side factors are responsible for disruption of services. The situation differs from state to state, with partial and no disruption depending on program/service and region." - India

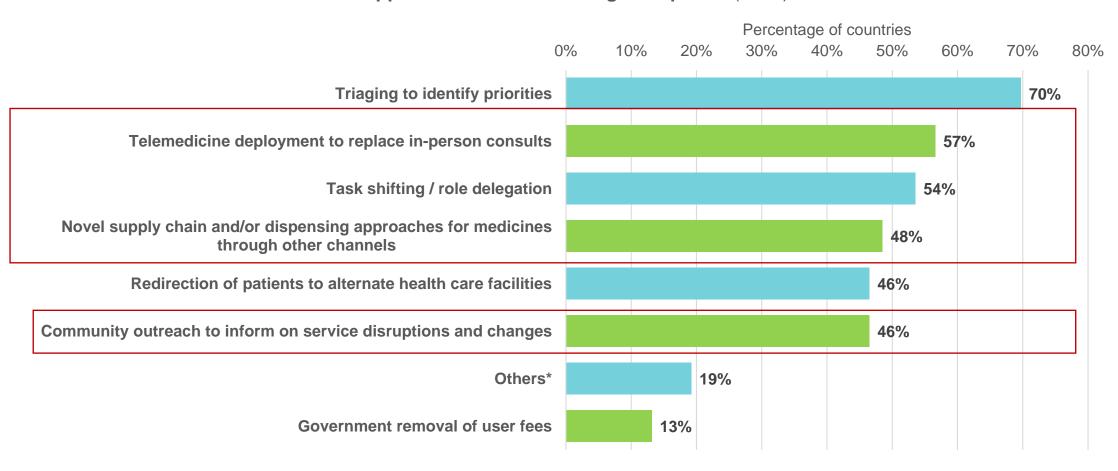


^{*}includes fear/mistrust, other government policies and directives, misinterpretation/communication of facility measures, nonengagement with private sector and service delivery modifications (for changes in utilization)

Nearly three quarters of countries identified triaging to identify priorities as a primary approach for overcoming service disruptions



Approaches for overcoming disruptions (n=99)



^{*}includes designation of COVID-19 specific facilities, mobile medical teams, digital health, transportation support for patients, additional training/guidelines, intensified communications to health facilities, COVID-19 specific treatment centres, advocacy and strengthening partnerships

Ensure that mental health services are maintained to mitigate lost to follow-up with services



Coping with stress during the 2019-nCoV outbreak



It is normal to feel sad, stressed, confused, scared or angry during a crisis.

Talking to people you trust can help. Contact your friends and family.

If you must stay at home, maintain a healthy lifestyle including proper diet, sleep, exercise and social contacts with loved ones at home and by email and phone with other family and friends.



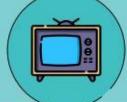


Don't use smoking, alcohol or other drugs to deal with your emotions.

If you feel overwhelmed, talk to a health worker or counsellor. Have a plan, where to go to and how to seek help for physical and mental health needs if required.

Get the facts. Gather information that will help you accurately determine your risk so that you can take reasonable precautions. Find a credible source you can trust such as WHO website or, a local or state public health agency.





Limit worry and agitation by lessening the time you and your family spend watching or listening to media coverage that you perceive as upsetting.

Draw on skills you have used in the past that have helped you to manage previous life's adversities and use those skills to help you manage your emotions during the challenging time of this outbreak.





Helping children cope with stress during the 2019-nCoV outbreak



Children may respond to stress in different ways such as being more clingy, anxious, withdrawing, angry or agitated, bedwetting etc.

Respond to your child's reactions in a supportive way, listen to their concerns and give them extra love and attention.

Children need adults' love and attention during difficult times. Give them extra time and attention.

Remember to listen to your children, speak kindly and reasure them.

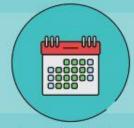


If possible, make opportunities for the child to play and relax.



Try and keep children close to their parents and family and avoid separating children and their caregivers to the extent possible. If separation occurs (e.g. hospitalization) ensure regular contact (e.g. via phone) and re-assurance.

Keep to regular routines and schedules as much as possible, or help create new ones in a new environment, including school/learning as well as time for safely playing and relaxing.





Provide facts about what has happened, explain what is going on now and give them clear information about how to reduce their risk of being infected by the disease in words that they can understand depending on their age.

This also includes providing information about what could happen in a re-assuring way (e.g. a family member and/or the child may start not feeling well and may have to go to the hospital for some time so doctors can help them feel better).

https://www.who.int/teams/menta l-health-and-substanceuse/covid-19

ACT-Accelerator

- Investments in Vaccines, Therapeutics,
 Diagnostics and Health Systems / Civil society
 to improve health outcomes related to COVID-
- WHO convening partners around the world to make this a reality and to deliver these Global Goods equitably
- COVAX more that 70 countries agreed
- WHO is Boosting our support to countries to ensure that we maintain the essential health services



