HIV NURSING 2022

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Inequity in the HIV Response
Breaking Down Structural Barriers Highlighted by COVID-19

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A few HIV related inequalities

**Inequality in services for children:** Only half (52%) of children living with HIV have access to life-saving medicine, and the inequality in HIV treatment coverage between children and adults is increasing rather than narrowing.

**Racial inequality:** In the United Kingdom of Great Britain and Northern Ireland and the United States, declines in new HIV diagnoses have been smaller among black people than among white populations. In Australia, Canada and the United States, HIV acquisition rates are higher in indigenous communities than in non-indigenous communities.

**Gender-based inequality:** In sub-Saharan Africa, adolescent girls and young women are three times as likely to acquire HIV as adolescent boys and young men.
The early days

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

People have had difficulty in accessing HIV treatment.

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

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

The global increase in viral load testing slowed considerably.

Mental health-care support services have been closed.

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

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.

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.

Harm reduction access for people who use drugs has been curtailed.
The data shows

- PLHIV are at increased risk (38%) for development of severe illness and death due to COVID-19 (WHO – global data analysis)
- In 2020 TB deaths increased among PLHIV for the first time in 13 years from 209,000 in 2019 to 214,000 in 2020 (WHO, 2021 global TB report)
- In many countries, due to weaker healthcare systems, informal settlements, over-crowded cities and public transportation and lack of clean water and sanitation, approaches to self protection, social distancing and containment was not viable
The data shows:

- Eastern Europe and Central Asia:
  - Percentage change: 48% in new HIV infections since 2010.
  - Number of new HIV infections: [Graph showing trend over time].

- Middle East and North Africa:
  - Percentage change: 33% in new HIV infections since 2010.
  - Number of new HIV infections: [Graph showing trend over time].

Source: UNAIDS epidemiological estimates, 2022 (https://aidsinfo.unaids.org/)
The data shows Latin America
Distribution of acquisition of new HIV infections by population, global, sub-Saharan Africa and rest of the world, 2021

- Global:
  - Sex workers: 26%
  - People who inject drugs: 49%
  - Gay men and other men who have sex with men: 21%
  - Transgender women: 2%
  - Clients of sex workers and sex partners of key populations: 30%
  - Remaining population: 2%

- Sub-Saharan Africa:
  - Sex workers: 15%
  - People who inject drugs: 3%
  - Gay men and other men who have sex with men: 10%
  - Transgender women: 9%
  - Clients of sex workers and sex partners of key populations: 6%
  - Remaining population: 6%

- Rest of the world:
  - Sex workers: 23%
  - People who inject drugs: 18%
  - Gay men and other men who have sex with men: 6%
  - Transgender women: 3%
  - Clients of sex workers and sex partners of key populations: 9%
  - Remaining population: 41%

Source: UNAIDS special analysis, 2022 (see Annex on Methods).
Number of HIV tests and test positivity rate by region, sub-Saharan Africa, 2017–2021.

What can we do
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Global AIDS Strategy 2021-2026

• Focus on addressing inequalities
• Strong advocacy for community leadership in programmes
• New targets for addressing structural barriers
What else can we do?

**Services**
- Treatment continuity (e.g., multi month dispensing of HIV treatment)
- Continuous access to targeted services/interventions

**Legal and policy interventions**
- Countries with smallest gaps in inequalities correlate to good policies and decriminalization
- Appropriate policies in health care settings

**Advocacy to ensure rapid and affordable health technologies**

**Working with communities**

**Respect for human rights**
References

- UNAIDS Epidemiological estimates, 2022
- UNAIDS Featured Story, Community engagement brings great success in Nigeria, 2021
- UNAIDS Global AIDS report, 2021
- UNAIDS Global AIDS strategy 2021-2026
- UNAIDS, Rights in a pandemic, 2021
- WHO, World TB report, 2021
Thank you