



TARGETS UPDATE







Community Perspectives on Re-Prioritizing the HIV Response: COmmunity-CREATION FOR ENDING HIV & STIGMA

JORGE GARRIDO, APOYO POSITIVO. SPAIN





Apoyo Positivo: community social innovation



- Since 1993 Apoyo Positivo has led the community HIV response in Spain.
- We promote **diversity** and attend its needs in **Health, Education and Rights**.
- We have 3 HIV&STI checkpoints & Community Centers in Spain and implement different programs and campaigns at the national level for our communities: HIV, LGTBIQ+, migrants, women and youth.
- We also develop a **Community HUB on innovation to develop solutions for our community (and social) needs.** Some of the projects are: PrEPARADXS App, INDETECTABLES series, or our Chemsex Program.
- We have co-led the **Fast Track cities initiative** in Madrid and Torremolinos, and we are the Community Partner for the Health Ministry in the national implementation (Spanish Fast Track Cities Network)



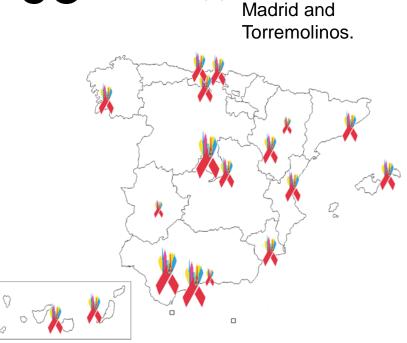






Fast Track Cities and 95-95-95 targets in Spain

ESTIMACIÓN DEL CONTINUO DE ATENCIÓN DEL VIH EN ESPAÑA, 2017-2019 151.387 personas viven con VIH en España 87,0% 97,3% 90,4% **Objetivo ONUSIDA** Figura 8 90-90-90 Nuevos diagnósticos de VIH. Diagnóstico tardío Personas que España, año 2020. Datos no corregidos por retraso en la notificación conocen su •--VIH >=500 CD4 349-499 CD4 .31.8% 21,4%_ Unidad de vigilancia del VIH, ITS y hepatitis. Actua isc cne 2019. Madrid: Centro Nacional de Epidemiología 200-349 CD4 <200 CD4 19.1% 27.7% SPONSORED BY: n =1.661



Some Fast Track Cities in the process: Alcorcón, Barcelona, Bilbao, El Hierro, Las Palmas, Murcia, Palma de Mallorca, San Sebastián-Donostia, Valencia, Vigo, Vitoria-Gasteiz and Zaragoza. Some more cities have signed the compromise but they haven't started any further step.

3 main Fast Track

experience: Sevilla,

- LACK OF POLITICAL COMPROMISE
- COMMUNITY LEADERSHIP

COVID19 & HIV: overlapping pandemics

- Closure of resources due to the pandemic (47% late diagnosis)
- Difficulties managing HIV treatment and services at the Hospital Setting due to restrictions. (Closing of STI specialized resources during the pandemic and barriers for migrants – 34% new HIV diagnosis)
- Chaos. Fake news, PLWHIV on risk, ART use for COVID19, PrEP for COVID19,... (Barriers on the PrEP access. Over 1.000 people on the waiting list and 6 months of wait for the first appointment)
- Increase of vulnerability: sex workers, Igtbiq people, specially trans woman, elder, migrants... Lack of basic resources. (Food and daily basic items' program)
- Increase of violence: gender violence, LGTBIQphobia,... (Lockdown and violence, chemsex and sexual violence,...)
- Increase of the hate speech: serophobia, LGTBIQphobia, racism,... (Increase of extreme right political party representation and supporters, hate speech and attacks)
- Loneliness pandemic & menta health issues (Lack of social network, mental health issues related with community aspects,...)
- Increase of STI infections (increase of gonorrhea, syphilis, chlamydia, hepatitis,...)
- Increase of target community issues like chemsex scene (Increase of chemsex users and slam)

EL PAIS	Madrid	susceiners inco	
Siete meses de lista de espera para el tratamiento preventivo del VIH			

El número de peticionarios de la PrEP se dispara y la clínica Sandoval, el único centro que lo distribuye en la región, no da abasto para atender toda la demanda

LOS EFECTOS DELA PANDEMIA

Protestas por el cierre del centro de enfermedades de transmisión sexual de Drassanes

El servicio ha sido trasladado al Hospital de Vall d'Hebron, que sostiene que mantiene la atenció

redacción médica

Las infecciones de transmisión sexual aumentaron pese al confinamiento

Las infecciones bacterianas agudas aumentaron durante el período de observación incluidas la sífilis y la gonorrea

Tristeza, soledad, desesperanza: el hoyo emocional de la pandemia

El Colegio Oficial de Psicología de Madrid estima que las peticiones de consulta en la comunidad han crecido entre un 20% y un 30% debido a las consecuencias del virus







APROXIMACIÓN AL CHEMSEX 2021: Encuesta sobre hábitos sexuales y consumo de drogas en España entre hombres GBHSH



COVID19 & HIV: opportunities

- Early opening of the HIV / sexual health community resources (Checkpoints)
- Partnerships with Health Care System and HIV departments to facilitate the earliest access to HIV treatment and services (PrEP programs, HIV treatment delivery, peer educator projects, online contact, HIV treatment for migrants,...)
- Accurate information on COVID19 & HIV (International and national HIV community network and collaboration with the Health Care professionals and Health Ministry)
- Community work and networking. (Food and daily basic items' program, social work)
- ALL ABOUT STIGMA: mental health becomes the HIV comorbidity with more impact on the PLWHIV lives. (All the HIV response' stakeholders agree, everyone focus on PROMs, QoL and stigma / mental health: patient stratification, personalization,...)
- Community programs and support (Psychosocial projects, online attention, peer educators,...)
- Community checkpoints, prevention programs (We are essential resources for the most vulnerable communities on the HIV pandemic and the global sexual health attention linked and coordinated with the Health Care System)
- Chemsex is a community issue: NOTHING ABOUT US WITHOUT US (Community chemsex projects connected with the Health Care System and key stakeholders)

Crisis are an excellent opportunity to innovate and move faster, especially when they comes beside community innovation and engagement.



"After-COVID19": Community entrepreneurship trinity and Co-creation

WHY IS COMMUNITY PARTICIPATION IN HIV STRATEGIES SO CRUCIAL?

WE KNOW

WE ARE the 15-15-15 % and the ones to led the end of stigma

WHAT is missing

COVID 19 showed the weakness of the HIV response and we've warming about what we need

HOW to find it

We've been (always) innovating in key issues and responses during this period.

WHO have to led the search

We've always been (part of) the solution.

"To end the AIDS epidemic, community responses to HIV must be integrated into national AIDS plans, from the planning and budgeting phases, to the *implementation,* monitoring and evaluation phases."

> (Co-creation by) UNAIDS



"After-COVID19": Community leadership and Cocreation, with key stakeholders and the public administration, for

- Improve the access to HIV & STI testing (Early diagnosis; community checkpoints)
- Improve the access to the Combination Prevention Package (Condoms, lubs, PrEP programs, PEP, U=U message, sexuality education, harm reduction, etc.)
- Early and universal access to HIV treatment (other STI) and friendly services for vulnerable communities with the community (no barriers for migrants and other communities. Cultural and community competencies)
- Patient stratification, personalization and Quality of life. (Social determinants of Health)
- Mental Health (STIGMA) as a priority to end HIV pandemic. (Measure indicators, actions laws and evaluation - implementation)
- Prioritize and guarantee Community programs and support (WE ARE ESSENTIAL RESOURCES)
- Manage HIV & Sexual Health trends beside the community: chemsex, MPX, etc.



CASA Community Centers: a Fast Track Model made by and for the community







•

ŝ

Q



"After-COVID19": URGENT political compromise, for

- Stablish People Living with HIV in the center of the decision-making process
- Invest resources and funds to implement the strategies, including community as part of that core of key agents. Include Community at every level of the HIV and sexual health response
- Facilitate HIV treatment and friendly services for the most vulnerable communities
- Invest in social determinants of health and the response to the HIV stigma, and other stigmas related with our communities and way of lives.
- Promote mental health care and specialized resources, and activities to change toxic social and leisure models
- Educate on diversity and sexuality at macro, meso and micro level.
- Coordinate, evaluate and publish outcomes.





Muchas gracias! ③

JORGE GARRIDO

coordinacion@apoyopositivo.org www.apoyopositivo.org @apoyopositivo

