4 June 2020 – Public health emergencies, such as the outbreak of coronavirus disease (COVID-19) are stressful times for people and communities, in particular for people living with HIV with reduced immunity.

How COVID-19 affects people living with HIV is not fully known yet. At present, there is no evidence to suggest that there is an increased risk of infection and increased severity of illness for people living with HIV, as long as they are on treatment and their HIV viral load is suppressed.

At the national AIDS programme's ART antiretroviral therapy (ART) dispensing centre, we provide treatment, as well as medical advice and counselling to help people living with HIV overcome any side-effects from medicine, encourage them to adhere to treatment and alleviate feelings of anxiety or fear created by the current epidemic.

Among the counselling messages communicated with the users of the center, the national programme advises the following:

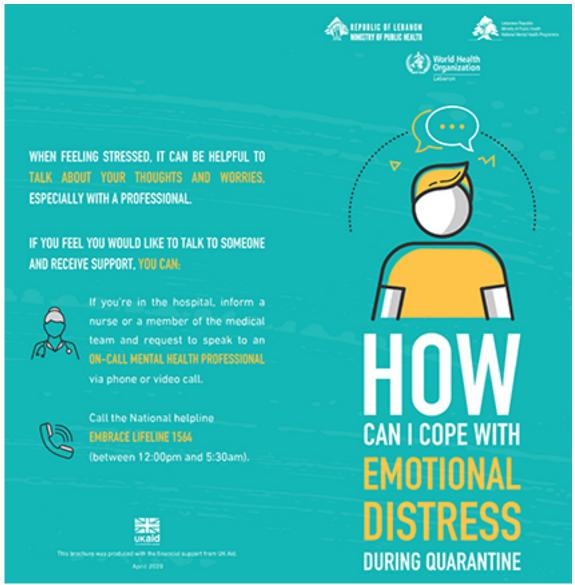
- 1. People living with HIV are advised to take the same precautions as the general population and adhere to the specific Ministry of Public Health/WHO recommendations to protect themselves and others from COVID-19 including:
 - Regular hand-washing with soap and water for at least 20 seconds.
 - Cover the mouth and nose with a mask when in public places.
 - Avoid touching eyes, nose or mouth with unwashed hands.
- Take measures to ensure appropriate infection control and follow guidance on physical distancing.

Educational/awareness leaflets, brochures and posters are available at the centre providing advice to patients and their care givers.

2. People living with HIV are strongly advised by the ART team at the centre to adhere to their

HIV treatment by taking their pills on time as prescribed, thus maintaining the suppression of their HIV viral load and preserving an adequate CD4 count that keeps their immune system as strong as possible.

- 3. People living with HIV who are older and/or have other co-morbidities, including cardiovascular disease, diabetes, chronic respiratory disease and hypertension, appear to be more at risk from serious complications as a result of COVID-19 than people without these co-morbidities. These people are strongly advised to keep taking their medications for chronic conditions and consult their prescribing physician if any symptoms or side-effects occur. Patients are given at least 2 or 3 months supply of ARVs in order to extend the duration of ART refills, thus reducing the frequency of contact with health facilities and decrease the risk of treatment interruption anticipating lockdowns and disruptions to clinic schedules during the COVID-19 outbreak.
- 4. The national AIDS programme, in coordination with the treating physicians and nongovernmental organizations, is exerting all efforts to ensure the rapid initiation of ART treatment for newly diagnosed HIV cases as soon as their HIV status is confirmed thus differing the submission of the regular required paper work.



Testimonies from the field

"People living with HIV are already a vulnerable and exposed population and the COVID-19 health crisis has increased pressure on them. A big portion of our current efforts are to develop information packages to explain that they are not at greater risk of acquiring COVID-19", said a health care worker.

"The best way to fight the current crisis is through continuation of regular health services. Patients are encouraged to adhere to their HIV treatment courses," said a local physician.

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