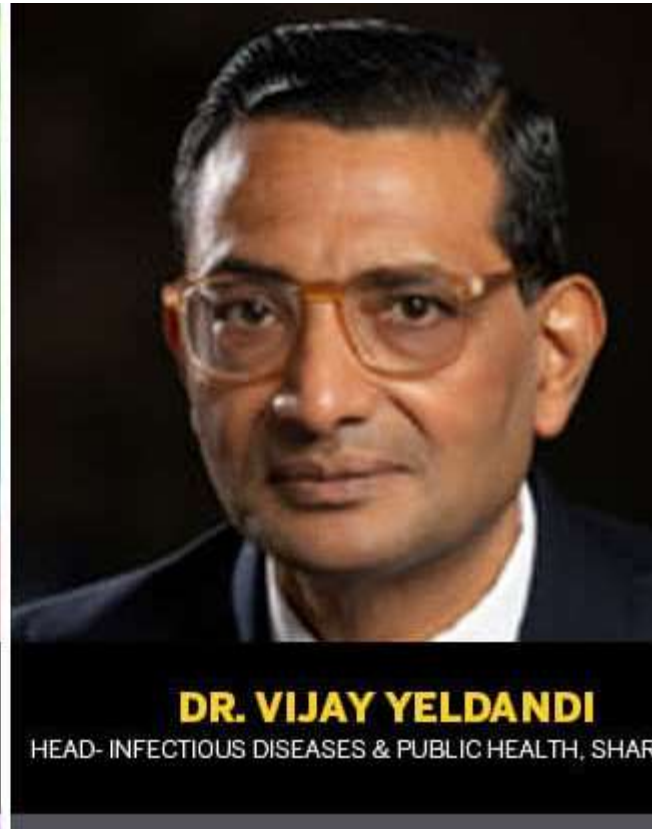


# Ensuring essential HIV services during the COVID-19 pandemic

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*Meeting the challenge of maintaining lifesaving essential services for people with HIV during the COVID-19 pandemic called for using innovative strategies by front line public health champions. **Dr Vandana Dabla**, Programme Manager, National Initiative to Strengthen and Coordinate HIV-TB response, Society for Health Allied Research and Education India (SHARE INDIA) and **Dr Vijay Yeldandi**, Head- Infectious Diseases & Public Health, SHARE INDIA share some case studies from the*

*field, from Andhra Pradesh, which has the fourth highest HIV prevalence in the country and the highest number of estimated AIDS related deaths in 2019*

This past year (2020) unleashed on an unprepared world a catastrophic pandemic that has affected every facet of socio-economic activity globally, leading to an unprecedented collapse of our fragile health care system with tragic consequences for the most vulnerable. Preoccupied as the medical world was, trying desperately to find solutions to the COVID 19 pandemic, the already tenuous arrangements for ensuring the care and support of the vulnerable population of People living with HIV/ AIDS (PLHIV) simply melted away. Years of hard work building a system to get ensure reliable access to antiretroviral medications essential for lifelong HIV treatment were collapsing.

India carries the third highest burden of HIV in the world, with an estimated 2.14 million people living with HIV/ AIDS in the country. The national lockdown forced by the pandemic response posed the challenge of “how to supply lifesaving medicines to patients” who were unable to access any HIV center facility because of the lockdown.

The challenge was particularly grave in Andhra Pradesh, which has the fourth highest HIV prevalence in the country (13 per cent), in addition to the highest number of estimated AIDS related deaths in 2019 (11.43 thousand). The state also witnessed the highest “Lost-to-follow up” (LFU) patients in the HIV treatment programme. The challenging task of sustaining the supply chain management of HIV lifesaving medications to the key HIV population was assisted by SHARE INDIA through NARI SAKSHAM, a community-based organisation.

With over a quarter of a century experience in public health and infectious diseases, the Society for Health Allied Research & Education India (SHARE INDIA), supported by PEPFAR and CDC India; provides technical assistance (TA) to the National AIDS Control Organisation (NACO) and Andhra Pradesh State AIDS Control Society to enhance the HIV treatment cascade.

The collective efforts ensured the supply of three-month antiretroviral medications to all female sex workers and their partners along with increasing awareness of COVID-

19 preventive measures. The stories from the field are inspiring us to understand the prevailing challenges and the unparalleled commitment of the field workers.

### **Santhi**



Santhi, outreach worker

Santhi is one of the outreach workers (ORW) who serves female sex workers registered at NARI SAKSHAM at East Godavari district of Andhra Pradesh. Dedicated to her mission, she said, “Nevertheless, lockdown and COVID does not stop us from providing HIV and TB medications to our peers on antiretroviral therapy (ART). Now we take the medicines directly to their homes”.

Unlike other days, Santhi started her outreach at 6 am itself. “No work – no money” Santhi stated and asked that, “When peers are finding it difficult to make ends meet since the lock down is imposed, how could they travel to Rajahmundry for ART?”

Sharing her emotional turmoil, Santhi said, “I am shattered witnessing some of my peers living in despair, which is beyond my imagination. I counsel them to stay strong and ensure adherence to medication to maintain their health. I feel happy to hear the peers “compliments” that keep motivating me”.

As she marches on the empty roads, passing house after house, Santhi remains focused on her mission. She wants to ensure that everyone in her area receives

medications and continues treatment. While Santhi thanks SHARE INDIA and CBO for the support and guidance, she acknowledges support provided by Nodal ART centre for arranging “travel pass” under medical emergency.

### **Chanti**



Chanti, outreach worker

Chanti, an ORW, shares her story. Waking up at 4 am now to distribute ARV medications at homes of patients, Chanti recalled, “It was one of the most challenging times in my 14 years of working in the field, due to the COVID-19 pandemic.”

She continued, “I could only see the narrow roads ahead with no transportation to the site. I would request my husband for transport on our personal vehicle to reach to my patients’ homes. One day, he met with an accident. Determined to distribute medicines to my peers, I convinced my brother to support me for my transport. It was really tough, but I did it”.

She used to travel more than 50 kms every day through scary narrow lanes. However, she also appreciates the need and determination of her patient’s desire to not disclose their HIV status to others, hence, they were unable to take anybody’s help travelling to the ART centre. For the same reason, Chanti realised that going directly to their homes would threaten their confidentiality.

She said, “To negotiate with the need to address stigma, I would first give them a phone-call before going and fix a place to meet and handover the medications. They would meet me and take medications with an overwhelmingly heartwarming smile. Those smiles were my reward”. Chanti ensured hand hygiene, maintained safe physical distance and wore the mask all the time.

The work of these intrepid public health warriors undeterred by the challenges of the COVID-19 pandemic is helping to save many lives. Their work is an inspiration that keeps us all at SHARE INDIA motivated to ever intensify our efforts to mitigate the direct and collateral damage to the lives of the people we are pledged to serve.