



COVID-19 and TB/HIV services
WHO guidance and considerations

HIV-TB Implementation for Impact Working Group

April 15 2020

Vindi Singh, WHO

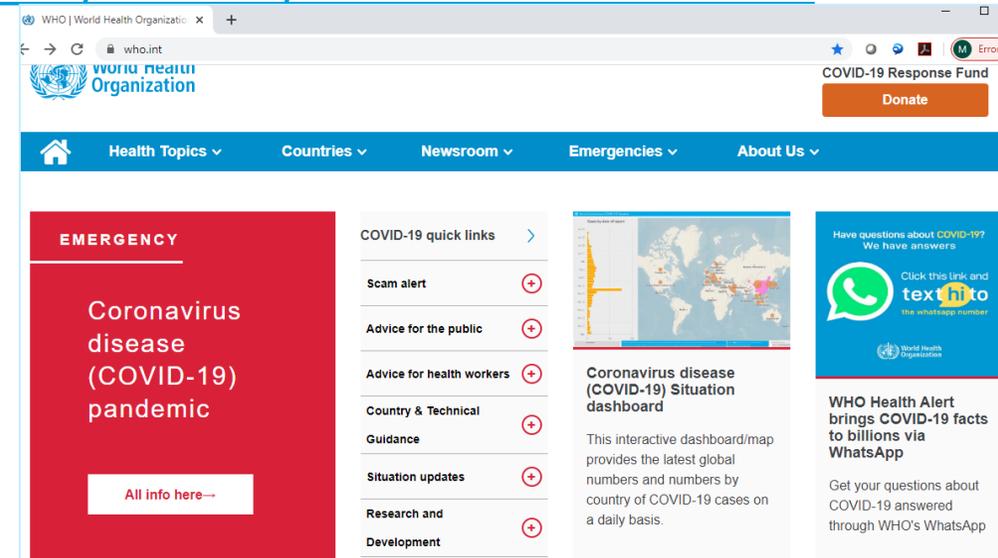
Overview



- A pneumonia of unknown cause detected in Wuhan, China was first reported to the WHO Country Office in China on 31 December 2019
- The outbreak was declared a Public Health Emergency of International Concern on 30 January 2020
- **By 14 April 2020, more than 1,844,863 confirmed cases reported and 117,021 deaths in 206 countries**
- WHO leading the response and working 24/7 to analyse data, provide advice, coordinate, help countries prepare, increase supplies, manage expert networks

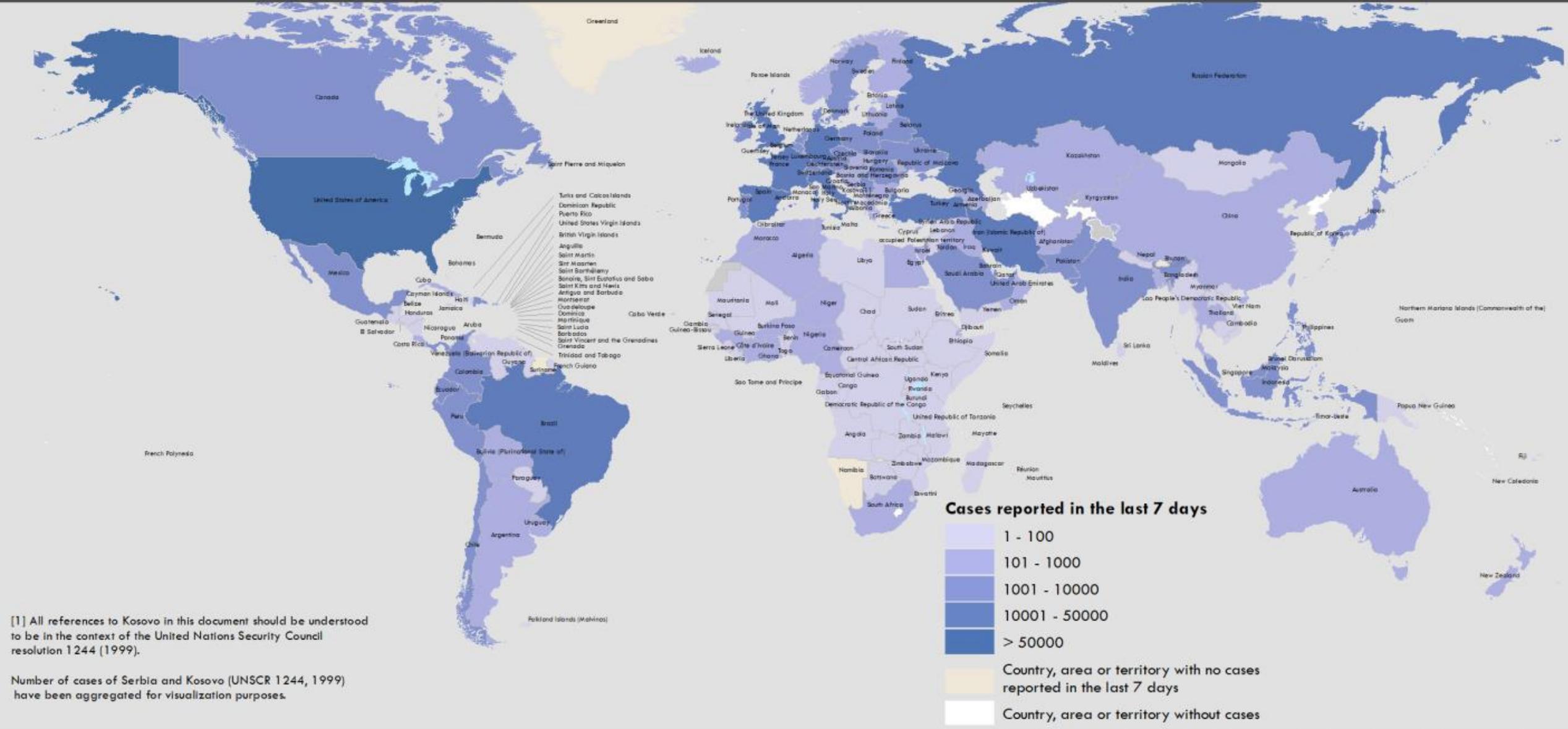
• WHO resources available online <https://www.who.int/emergencies/diseases/novel-coronavirus-2019>

- Potential areas concern for HIV and TB programmes
 - Continuity of services
 - Reducing covid risk to health care workers and patients
 - TB diagnosis and treatment
 - TB preventive treatment
 - HIV differentiated service delivery, high risk groups
 - Diagnostics and supply chain



Countries, areas or territories with COVID-19 cases reported in the last 7 days

(From 08 April 2020, 10:00AM to 14 April 2020, 10:00AM (CET))



[1] All references to Kosovo in this document should be understood to be in the context of the United Nations Security Council resolution 1244 (1999).

Number of cases of Serbia and Kosovo (UNSCR 1244, 1999) have been aggregated for visualization purposes.

Data Source: World Health Organization
Map Production: WHO Health Emergencies Programme

Not applicable

0 2,500 5,000 km
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The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate border lines for which there may not yet be full agreement.

OBJECTIVE OF TODAY'S WEBINAR

- To discuss potential concerns for disruption of TB and HIV services in low and middle-income settings due to COVID-19
- To share technical guidance and resources from WHO and partners to mitigate disruption
- To learn from partners, MOH representatives, and civil society about emerging issues on the ground and potential solutions and experiences in preparedness and response
- To summarize key messages from this group and highlight country-level needs

Overarching technical guidance: WHO resources

Country & Technical Guidance - Coronavirus disease (COVID-19)

← Coronavirus disease 2019

- Technical guidance ▾
- Situation reports
- Media resources ▾
- Advice for public ▾
- Travel advice
- Donors and partners ▾

All technical guidance by topic

Critical preparedness, readiness and response actions for COVID-19

Country-level coordination, planning, and monitoring

Surveillance, rapid response teams, and case investigation

National laboratories

Clinical care

Infection prevention and control / WASH

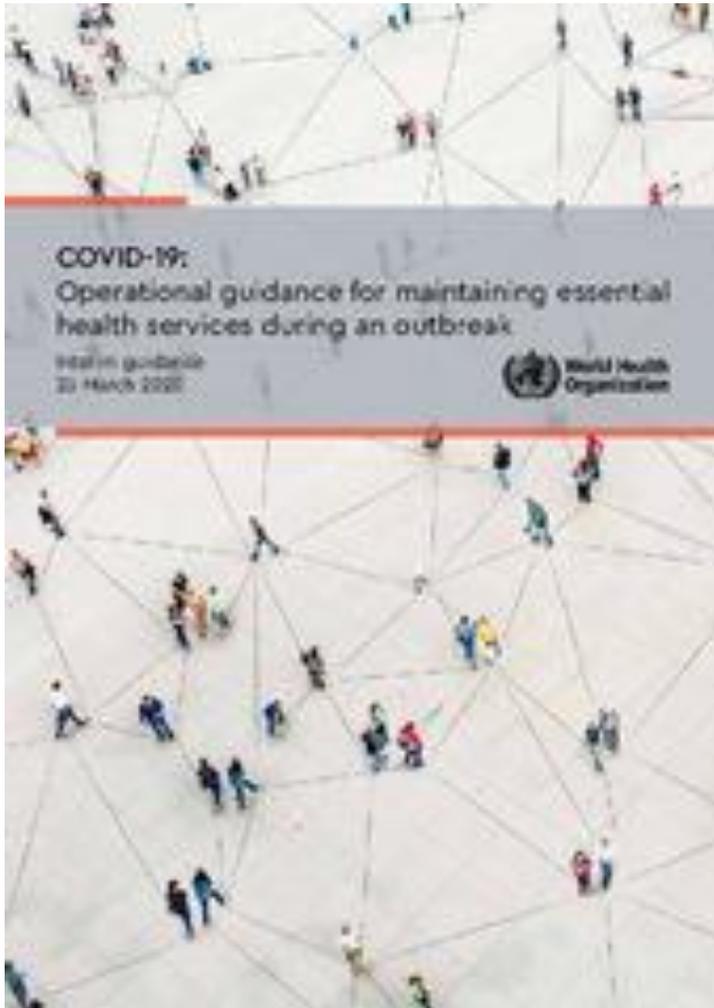
Risk communication and community engagement

Essential resource planning

Guidance for schools, workplaces & institutions

<https://www.who.int/emergencies/diseases/novel-coronavirus-2019/technical-guidance>

Maintaining Essential Health Services



<https://www.who.int/publications-detail/covid-19-operational-guidance-for-maintaining-essential-health-services-during-an-outbreak>

When health outbreak and conditions in decisions to while simulta action to ma system collap
the Operatic response, an that countries reorganize a for all.

WHO TEAM

Guiding principles for immunization activities during the COVID-19 pandemic

Interim guidance
26 March 2020



***As the COVID-19 pandemic evolves, this document and accompanying FAQ will be revised as necessary. ***

Due to the global circulation of the virus causing COVID-19 and the current pandemic, there is risk of disruption to routine immunization activities due to both COVID-19 related burden on the health system and decreased demand for vaccination because of physical distancing requirements or community reluctance. Disruption of immunization services, even for brief periods, will result in increased numbers of susceptible individuals and raise the likelihood of outbreak-prone vaccine preventable diseases (VPDs) such as measles.¹ Such VPD outbreaks may result in increased morbidity and mortality predominantly in young infants and other vulnerable groups, which can cause greater burden on health systems already strained by the COVID-19 response. The high potential for VPD outbreaks makes it imperative for countries to maintain continuity of immunization services wherever services can be conducted under safe conditions. Prior disease outbreaks and humanitarian emergencies have underscored the importance of maintaining essential health services such as immunization, and effectively engaging communities in planning and service delivery.^{2,3} Yet the complexity and global reach of the COVID-19 response with respect to mandatory physical distancing (also referred to as social distancing) and economic impact on households is unprecedented for public health.

HIV related questions and answers

Q&A on COVID-19, HIV and antiretrovirals

24 March 2020 | Q&A

Are people living with HIV at increased risk of being infected with the virus that causes COVID-19?



Can antiretrovirals be used to treat COVID-19?



Can antiretrovirals be used to prevent COVID-19 infection?



What studies on treatment and prevention of COVID-19 with antiretrovirals are being planned?



What is WHO's position on the use of antiretrovirals for the treatment of COVID-19?



<https://www.who.int/news-room/q-a-detail/q-a-on-covid-19-hiv-and-antiretrovirals>

Key messages

- PLHIV who are taking ARV drugs should ensure that they have at least 30 days of ARVs if not a 3 to 6-month supply and ensure that their vaccinations are up to date (influenza and pneumococcal vaccines).
- adequate supplies of medicines to treat coinfections and comorbidities and addiction should also be ensured
- adapted and evidence-based measures to reduce possible transmission should be considered and implemented
- services that reach vulnerable populations such as community-based services, drop-in centres and outreach services can continue providing life-saving prevention (distribution of condoms, needles and syringes), testing and treatment while securing safety of staff and clients.
- simplified antiretroviral therapy delivery models which include multi-month prescriptions and dispensing for clinically stable patients (3-6 month supply)

Maintaining essential HIV prevention and sexual health services

- Some HIV prevention activities likely to be **paused or scaled down**, eg VMMC
- But **condoms, harm reduction programmes** need to continue with modifications
 - Delivery of supplies with social distancing through pharmacies, vending machines, post
 - Larger supplies for longer time periods
- **Continue HIV testing** including through expanding access to self-testing
- **Prioritize continuation of contraception services**
 - Ebola in West Africa: increased unplanned and teenage pregnancies during emergency response → unsafe abortions and AGYW morbidly

CONDOM SHORTAGE LOOMS AFTER CORONAVIRUS LOCKDOWN SHUTS WORLD'S TOP PRODUCER

Malaysia's Karex Bhd makes one in every five condoms globally. It has not produced a single condom from its three Malaysian factories for more than a week due to a lockdown imposed by the government.



Condoms “not essential” – purchase banned in a supermarket in South Africa



WHO recommendations supporting DSD for clinically stable clients during COVID-19 (advise multi-month dispensing (MMD) and avoid group meetings)

WHEN

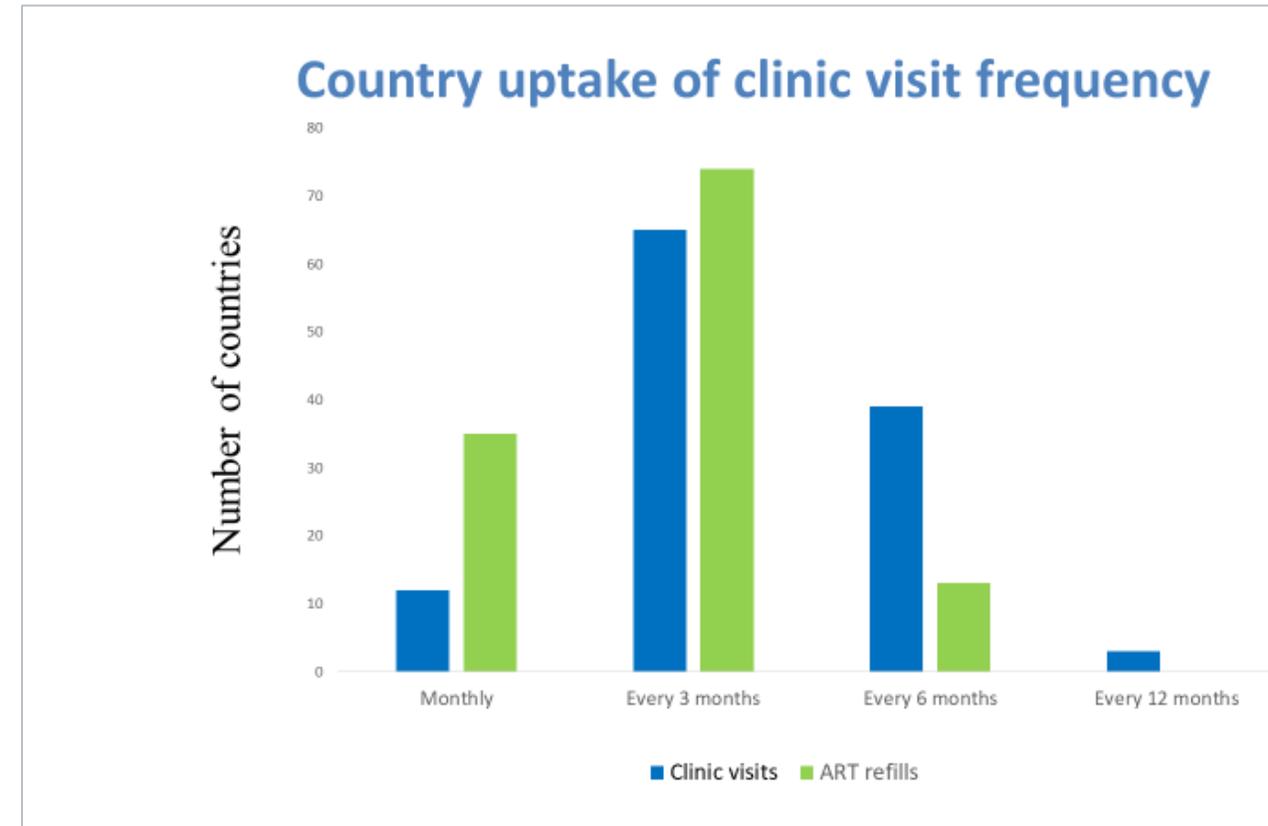
- 3-6 monthly ART refills
- 3-6 monthly clinic visits

WHERE

- ART maintenance at community level

WHO

- Trained non-physicians/nurses/midwives can initiate and maintain ART
- Trained/supervised lay providers can distribute ART
- Trained/supervised CHWs can dispense ART between clinic visits



HIV and COVID-19 Diagnostics considerations



- **While sharing technologies in this emergency response, it will remain essential to maintain other critical molecular diagnostics, particularly:**
 - Early infant diagnosis
 - Tuberculosis testing for people living with HIV
 - Viral load testing for people living with advanced HIV disease; those suspected of failing treatment, including pregnant and breastfeeding women; infants, children, and adolescents.

COVID19 | Supply Chain Interagency Coordination Cell:

Workstreams – Enablers – Goal



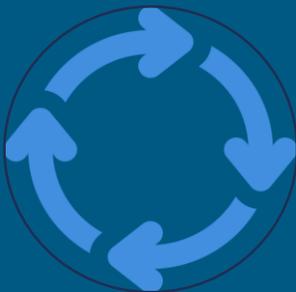
Supply and Demand

Visibility over the supply and demand of critical items for COVID19 response: PPE, lab diagnostic and clinical equipment



Logistics and Access

Up to date information about access and logistics constraints, availability of assets and services



Programme Continuity

Flag disruptions to ongoing humanitarian and development programme



Scale up of Operations

Provide visibility to the COVID19 response, identify gaps and appropriate actors to fill them and facilitate access to finance

Information Management & Advocacy

Collect, analyze and disseminate the appropriate products through different platforms

Coordination

Establish a main entry point for the COVID19 response to support informed decision making among partners

Enable an efficient and effective supply chain response across the community through the dissemination of information to support strategic guidance, operational decision-making, and overall monitoring

17 April, 2020



World Health Organization (WHO) ✓

@WHO

#AskWHO on mental health during #COVID19. Ask your questions to our expert Aiysha Malik.



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psc.p.tv

2:38 PM · Mar 10, 2020 · Periscope

738 Retweets 1.2K Likes



World Health Organization (WHO) ✓ @WHO · 21h

Replying to @WHO

Ask your questions on how to manage fear, stigma and discrimination during #COVID19 - use hashtag #AskWHO.

46 92 189

Leverage existing systems to address fear, stigma and discrimination

Engagement at social media



Tedros Adhanom Ghebr... ✓

@DrTedros

Following

Thank you Mark Zuckerberg & @sherylsandberg for a constructive call today & your efforts to support the #COVID19 response. Your partnership & that of your @Facebook teams is greatly appreciated & we look forward to even more, in the service of accurate, lifesaving information!

1:16 PM - 10 Mar 2020

121 Retweets 457 Likes



WHO, UNICEF and IFRC issued guidance on **risk communication and community engagement** for COVID-19 preparedness and the response

[https://www.who.int/publications-detail/risk-communication-and-community-engagement-\(rcce\)-action-plan-guidance](https://www.who.int/publications-detail/risk-communication-and-community-engagement-(rcce)-action-plan-guidance)



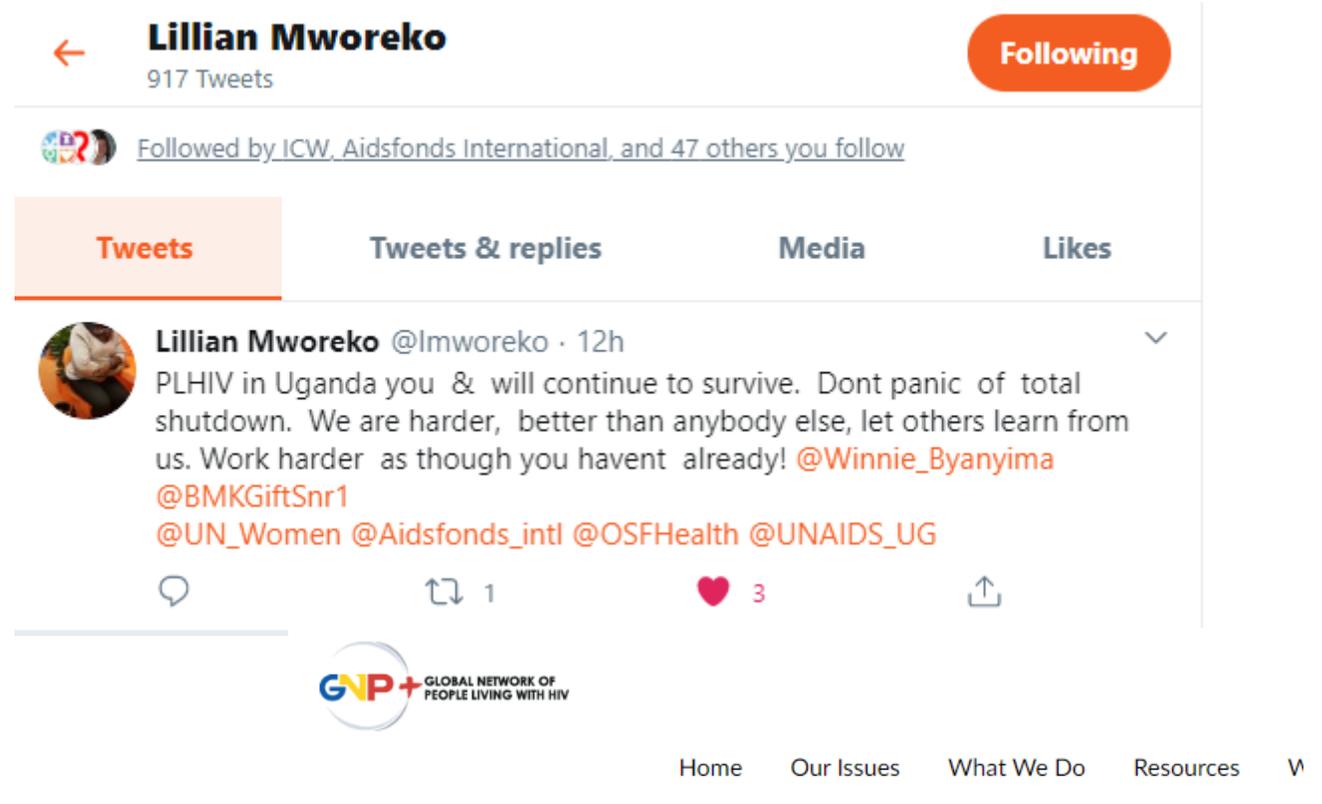
Civil society and community engagement

Engagement facilitated through:

- UNAIDS Joint Programme
- Global Fund
- Global Action Plan for healthy lives and wellbeing
- UHC 2030
- Initiatives from communities and civil society

Issues:

- Coordination and content management
- Language and adaptation



The screenshot shows the Twitter profile of Lillian Mworeko (@lmworeko). The profile header includes a back arrow, the name "Lillian Mworeko", "917 Tweets", and a "Following" button. Below the header, it says "Followed by ICW, Aidsfonds International, and 47 others you follow". The main content area has tabs for "Tweets", "Tweets & replies", "Media", and "Likes". A tweet from 12 hours ago is visible, with the text: "PLHIV in Uganda you & will continue to survive. Dont panic of total shutdown. We are harder, better than anybody else, let others learn from us. Work harder as though you havent already! @Winnie_Byanyima @BMKGiftSnr1 @UN_Women @Aidsfonds_intl @OSFHealth @UNAIDS_UG". The tweet has 1 retweet and 3 likes. At the bottom of the screenshot, the logo for the Global Network of People Living with HIV (GNP+) is visible, along with a navigation bar containing "Home", "Our Issues", "What We Do", "Resources", and "W".

10 Mar 2020

Lessons learnt from the HIV response for COVID-19: Building community resilience

Commentary By Rico Gustav, Executive Director of Global Network of People Living with HIV

Addressing TB prevention diagnosis and treatment within HIV services: selected questions

- How can we distinguish between TB and COVID-19 among PLHIV?
- How does WHO recommend ART initiation be offered in patients with TB symptoms in this COVID-19 pandemic situation, to avoid multiple visits to health facilities?
- What is the guidance around multi month drug dispensing strategies for ARV and TB treatment during the COVID-19 pandemic?
- How can we continue provision of TB preventive treatment?
- How will COVID-19 affect contact tracing and community outreach for TB and HIV treatment?