



Aid for AIDS Wants Your Unused HIV Meds, Now More Than Ever

Donations dropped 70% due to COVID-19, and Americans on HIV treatment today have fewer unused meds, says the nonprofit's founder.

September 22, 2021 By [Trent Straube](#)

Lifesaving combination therapy for HIV arrived in 1996. That year also saw the launch of Aid for AIDS (AFA), an international organization based in New York City that gathers unused, unexpired meds and distributes them to people living with [HIV](#) across the globe who don't have access to treatment.

Founded by Jesús Aguais, who moved to New York from Venezuela in 1989 and for 12 years worked with an AIDS program at the now-shuttered St. Vincent's Hospital, [Aid for AIDS](#) has collected over \$160 million worth of antiretrovirals and provided them to over 55,000 people in 70 countries. It also accepts and distributes meds that treat comorbidities, such as [hepatitis C](#) and high cholesterol, that are common among people living HIV.

The need for donated [HIV meds](#) has only grown during the [COVID-19 pandemic](#), Aguais tells POZ. We caught up with the international advocate for the organization's 25th anniversary. Our correspondence has been lightly edited for length and clarity.

Congratulations on 25 years! HIV treatment in the United States today is much simpler—often one pill a day. Have these advancements affected your work?

Well, yes. I think we never really envisioned how things would be after 25 years, and the fact that Aid for AIDS is not only around but still very much alive is shocking for us as well. With the dawn of effective treatment, I think many of us thought that things would improve for everyone around the world. But the fact is that Aid for AIDS remains the only hope for hundreds of thousands of people around the world who need HIV medicine. To date, around 40% of people with HIV still lack access to treatment. That says a lot about how pertinent and relevant organizations like Aid for AIDS are, especially initiatives like our Medicine Recycling Program.

On that note, new and advanced treatments have also changed the panorama for people with HIV in the United States. Now, people don't change their treatment as often or don't become resistant

to them, and this has led to a decrease in donations because people don't have as many surplus medications on a regular basis.

There is a disconnect when it comes to access to treatment in the United States and the situation in developing countries, and people are not aware of what they can do with their surplus HIV medication, how it can save lives.

Recycling unused and unexpired medication is a simple but very powerful way to save lives. Because HIV is now considered a chronic disease here in the United States, people actually are not aware of the potential that donating their surplus medication can have.

What have been the biggest accomplishments for AFA during the past 25 years?

The biggest accomplishment, for me, has been proving that the medicine that was being thrown away can save lives. Twenty-five years ago, a lot of people were skeptical of the effectivity of the program. There were a lot of what-ifs: What if the medicine gets damaged? What if the pills get lost? But for us, there were no what-ifs.

Our experience with the HIV medicine recycling program has also allowed us to set a precedent for other innovative solutions that seek to improve the quality of life of people in vulnerable communities. Our model works and can be replicated to address any condition, because access to medicine is needed globally.

Similarly, what have been the biggest challenges and changes?

The biggest challenge is keeping HIV relevant, both regarding prevention and for donors. Getting the word out and raising awareness about donating surplus medication and the potential behind this very simple act is still a challenge today.

How has COVID-19 affected your organization's work?

The COVID-19 pandemic has been the biggest challenge in the 25-year history of Aid for AIDS. HIV medicine donations dropped 70%, forcing us to do things we had never done before to ensure that people in developing countries and our beneficiaries can continue to have access to treatment. We need help. We need donations—not only to go back to the levels we had pre-pandemic but even more. We need your surplus medication to save lives.

Where do most of Aid for AIDS's donated HIV meds come from?

From people with HIV, case managers, HIV providers. Mostly from private, individual donors who hear about our program through referrals, friends and health care providers. We also have a very dedicated network of partner organizations who collect medicine donations from their communities and clients for us.

Pre-exposure prophylaxis, or PrEP—the daily tablets to prevent HIV-negative people from contracting HIV—is a relatively new advancement. Does your organization also distribute PrEP and PEP, post-exposure prophylaxis, or do you focus only on antiretrovirals (ARVs) for people living with HIV?

We still focus on ARVs and medicines [that may benefit] people with HIV [including treatments for hepatitis C, diabetes, elevated cholesterol and other comorbidities]. If we continue pushing, I believe we'll be able to start PrEP and PEP programs in low- and middle-income countries with donated medicines. But for that, we need your help and support by donating your PrEP or PEP that you no longer need.

[When POZ last profiled you](#), late in 2017, your native country, Venezuela, was in the middle of a humanitarian crisis, including medicine and food shortages. Can you give us an update on the situation there for people living with HIV and the work Aid for AIDS is doing there?

The complex humanitarian emergency in Venezuela continues and has now evolved into a refugee crisis that affects the entire region. Since 2014, over 6 million Venezuelans have fled the country, making it the second biggest humanitarian crisis in the world. We continue assisting people in Venezuela by providing them with HIV treatment and testing. In 2018, we became the main providers of HIV medicine in the country by distributing 500,000 antiretrovirals to people in need.

Now, we have expanded our response and are supporting many of the Venezuelan refugees in Colombia. We have an office in Cucuta, the border city with Venezuela, where most of the refugees cross over to Colombia, Peru, Ecuador, Bolivia and other countries in the region. We provide them with HIV testing, prevention education and HIV treatment if needed.

Thanks to our work in Cucuta, we also identified a phenomenon that is extremely worrying to us: Many refugees perform sexual acts for survival [and say that] sex and sex-cam work is their only way to survive, earn money or have a place to sleep. We are currently doing more research on the matter but can already tell you that this is a phenomenon that has to be addressed within the HIV response framework.

What other countries or population groups are you concerned about today?

We're very much concerned about humanitarian crises globally. We get a lot of program submissions from China, Egypt, Africa and the Caribbean. There are still a lot of vulnerable communities that need our support.

What does the future hold for Aid for AIDS?

We have grown to become an international organization, addressing complex issues beyond access to treatment. Our goal is to adapt our innovative recycling model to address other health conditions and continue saving lives one by one for many more years to come. We hope we can see the end of the HIV pandemic and channel our expertise to address other causes.

Editor's note: Below is more specific information about donating meds to the organization, as written by Aid for AIDS in the 2020 POZ opinion piece "[Medicine Shortages Are an Unseen Consequence of COVID-19](#)":

AFA gathers, sorts, discards and stores unused, unexpired medicines including:

- Antiretrovirals: protease inhibitors, nucleoside reverse transcriptase inhibitors, non-nucleoside reverse transcriptase inhibitors, entry inhibitors and integrase inhibitors;
- Other medicines that may benefit people with HIV, including antifungals/antimycotics, antibiotics and treatments for respiratory conditions, diabetes, elevated cholesterol, hepatitis C and other comorbidities.

If you're interested in donating your surplus medications:

1. Send your unexpired medications to our headquarters at: 131 Varick Street, Suite 1006, New York, New York 10013. If you are unable to cover the shipping expenses, please email us at lklic@aidforaids.org so we can provide you with a prepaid shipping label.
2. AFA accepts all unexpired antiretroviral medications as well as all medicines that may be useful to manage comorbid conditions in people living with HIV. AFA accepts bottles that have been opened as long as the medicine is unexpired. AFA accepts sealed containers of liquid and powder medications and both sealed and unsealed containers of pills.
3. Please remove the names and addresses of all individuals from prescription bottles in order for us to comply with privacy and confidentiality laws. Always leave the medicine's name and expiration date visible.
4. Please place all pill bottles in a sealable plastic bag, and place this bag inside a padded envelope or cardboard box. All pill bottles should be securely closed. Please do not send any loose capsules or tablets inside a plastic bag or box!
5. Please fill out the donor card available at aidforaids.org, print it and place the card inside the envelope or box. If you would like to keep your donation anonymous, please include the other information requested, which enables us to track donations and monitor trends.