Does Shuttering HIV Services to Stop COVID-19 Save More Lives?

The benefits of HIV services “are far larger” than the risks of more COVID-19 transmissions, says UNAIDS and WHO analysis.

April 19, 2021 By Trent Straube

This past year, businesses across the globe shut down and people stayed at home in an effort to stem the transmission of the coronavirus that causes COVID-19. But when it comes to disrupting HIV services to prevent COVID-19, it turns out that it’s much more beneficial in the long run to continue operating services related to HIV/AIDS during the pandemic. In fact, it saves more lives, and the benefits outweigh the COVID-19 risk by 100 to 1.

Mathematical analysis by the United Nations Joint Programme on HIV/AIDS (UNAIDS) and the World Health Organization (WHO) show that maintaining HIV services would avert between 19 and 146 AIDS-related deaths per 10,000 people over 50 years, while COVID-19–related deaths resulting from exposures linked to HIV services would amount to 0.002 to 0.15 per 10,000 people.

“Ministries of health take into account many factors in deciding when and how to offer essential health services during the COVID-19 pandemic,” said Meg Doherty, the director of the WHO’s Global HIV, Hepatitis and Sexually Transmitted Infections Programmes, in a WHO press release on the analysis. “This work shows that taking the longer view, the benefits of continuing key HIV services are far larger than the risks of additional COVID-19 transmission; innovative and safe delivery of services must continue as the pandemic is brought under control.”

To crunch the numbers, a team of global researchers led by John Stover, the vice president and founder of Avenir Health, looked at four different areas of HIV services and how the COVID-19 pandemic affected them:

- Voluntary medical male circumcision
- HIV diagnostic testing
- Viral load testing

- Programs to prevent mother-to-child transmission of HIV.

In related news, the United Nations General Assembly will hold a high-level meeting on HIV/AIDS in June, during which the global process on ending AIDS by 2030 will be assessed. The COVID-19 pandemic has pushed back many HIV-related goals. In fact, UNAIDS estimates that it'll cost $29 billion annually over the next five years to get the global AIDS strategy back on track by 2025.

In addition, during the past year, UNAIDS released a number of reports looking at COVID-19 through the lens of HIV. For POZ articles on those reports, see:

- "HIV History Teaches Us How (and Why) to Reduce COVID-19 Stigma"
- "When COVID-19 Offers an Excuse to Violate Human Rights"
- "COVID-19 Criminalization: Seven Lessons From the HIV Response."

In other global HIV news, Andrew Spieldenner, PhD, is the new executive director of MPact Global Action for Gay Men's Health and Rights.

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