



## Children, adolescents and young women living with HIV in the time of COVID-19

As we await definitive scientific evidence of the impact of COVID-19 on those living with HIV, and Sub-Saharan African – with disproportionately concentrated burden of the global HIV epidemic – beginning to report a rise in infections, we can be certain that those living with HIV will face additional vulnerabilities and challenges.

Worldwide, out of 37.9 million people living with HIV, 1.4 million are pregnant women and 2.8 million are children and adolescents. Among them, about 20 per cent of pregnant women and close to 50 per cent of children and adolescents are not on HIV treatment. In the circumstances, they are more likely to be immune compromised and may be at risk of more serious illness if they contract COVID-19.

For pregnant women, children and adolescents living with HIV, access to testing and an uninterrupted supply of lifesaving antiretroviral medications is essential to avoid risk of disease progression, risk of transmission and potentially risk of severe COVID-19.

In addition to these women, children and adolescents living with HIV, there may be others who are immune compromised because they are poorly adherent to treatment or because they have treatment failure.

Measures to control the spread of COVID-19, including lockdowns and curfews which have now been implemented in all high HIV burden countries, have a disproportionate impact on access to HIV services, ongoing access to antiretroviral treatment and other essential health services. The implications are especially serious for marginalized and otherwise vulnerable young people living with HIV.

Against the backdrop of the COVID-19 pandemic, it is especially important to determine the HIV status of individuals presenting for COVID-19 evaluation, as this may influence clinical management. It is equally important to identify simple strategies to ensure a continuous supply of ART, for example through multi-month dispensing of medication or arranging for home based or community delivery of antiretroviral drugs, ensuring an uninterrupted supply of ARVs.

For families living with and affected by HIV (including HIV-negative family members), it is essential to carefully adhere to COVID-19 prevention measures to avoid entire families contracting the virus.

Beyond the immediate medical risks, mental health issues affecting young people living with HIV that are complex and challenging to manage in the best of times are especially significant in large-scale lockdowns.

Reports indicate that young people are anxious, confused by scant or conflicting information, and subject to depression as the lockdown continues and normal social interaction and support systems are constrained, with little sense of how long this period of uncertainty will last.

Recent evidence indicates that lockdowns have significant implications for younger workers, in particular women and girls, daily wage earners, people living in informal settlements and those living in poverty. In some countries, lockdowns have also had disproportionate impact on already marginalized ethnic groups and minorities. These challenges may be exacerbated in women, children and young people living with HIV.



From their experience living with HIV, many young people worry that additional stigma may attach to COVID-19, affecting future social interaction, education, health care, and employment.

We have made tremendous progress in our fight against HIV. Some countries have achieved what seemed impossible: the virtual elimination of HIV as a public health threat. Failure to maintain that momentum threatens the work of decades, billions of dollars in investments and, above all, the hope of millions of women,

children and adolescents who are living with HIV and dreaming of an AIDS free future.

Together with our global partners including UNAIDS, WHO, Global Fund and PEPFAR, UNICEF urges governments to design and implement physical distancing and lockdown measures taking thoughtful account of the wide range of backgrounds of those affected, especially pregnant women, children and adolescents living with HIV.

## How can governments support children, adolescents and young women living with HIV in the time of COVID-19?

UNICEF calls on all governments to:

1. Secure multi-month ARV supplies for children and adolescents living with HIV. Be innovative in ensuring the uninterrupted supply and distribution of ARVs for children and adolescents, including production of ARVs during lockdowns.
2. Stand against stigma and protect vulnerable populations—including religious and ethnic minorities—from discrimination and violence related to COVID-19.
3. Engage children and young people in the design of all mitigation responses, build trust, and hear their concerns and expectations.
4. Ensure that young people stay informed through reliable sources (UNICEF, UNAIDS, and WHO), are virtually connected, and receive the support and care required to feel in control and mentally secure.
5. Equip communities to provide young people with information that minimizes fear and stigma.

6. Ensure that essential community health workers are provided with COVID-19 testing and effective personal protective equipment needed to deliver care to people in their homes.

7. Ensure that children and families living in poverty – especially those affected by HIV – are linked to social assistance and food support schemes as a matter of urgency and priority.

8. Recognize the global HIV community of practice as a resource whose capacity and experience can be drawn on in the management of the COVID-19 pandemic. In many countries, those who led and managed the HIV epidemic response over the past two decades are now leading and managing public health responses to the pandemic.

**8 WAYS**  
GOVERNMENTS CAN SUPPORT CHILDREN LIVING WITH HIV IN THE TIME OF COVID-19

<p><b>1. Get ARV supplies</b></p> <p>Secure multi-month ARV supplies for children and adolescents living with HIV.</p> <p><i>Tip: Innovate to ensure an uninterrupted supply and distribution.</i></p>	<p><b>2. Stand against stigma</b></p> <p>Protect vulnerable populations, including religious and ethnic minorities, from discrimination and violence related to COVID-19.</p>
<p><b>3. Engage children</b></p> <p>Involve children in the design of mitigation responses.</p> <p><i>Tip: Build trust, and hear the concerns and expectations of young people.</i></p>	<p><b>4. Stay connected</b></p> <p>Ensure young people stay informed through reliable sources (UNICEF, UNAIDS, and WHO).</p> <p><i>Tip: They should feel connected and receive the care required to feel in control and mentally secure.</i></p>
<p><b>5. Share information</b></p> <p>Equip communities to provide young people with information that minimizes fear and stigma.</p>	<p><b>6. Protect health workers</b></p> <p>Provide essential community health workers with COVID-19 testing and effective personal protective equipment for delivering care to children in their homes.</p>
<p><b>7. Help families in poverty</b></p> <p>Ensure that children and families living in poverty – especially those affected by HIV – are linked to social assistance and food support schemes.</p>	<p><b>8. Engage Global HIV Community of Practice</b></p> <p>Involve HIV peer supporters and healthcare providers who bring years of experience dealing with an epidemic similar to COVID-19.</p>

Source: "Children, adolescents and young women living with HIV in the time of COVID-19: Key messages for UNICEF". Available at: [childrenandhiv.org/covid19](https://childrenandhiv.org/covid19)

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