



Date of Publication: August 16, 2021

Author(s): | Dr Julie Abimanyi-Ochom | Dr Fisaha Haile Tesfay

Title: HIV/AIDS, the potentially forgotten epidemic amidst COVID-19 epidemic.

COVID-19 threatens to reverse impressive progress made against the HIV/AIDS pandemic through impacting [HIV/AIDS funding](#), [restricting](#) patients follow up due to lock downs, disruptions in service delivery due to [overstretched health systems](#) and shifting global and [national priorities](#). This has implications for attainment of set targets to end AIDS by 2030 which would require [increased spending](#). The objective of this blog is to shade light on the impact of the COVID_19 pandemic on HIV/AIDS care, support and funding

In 2021, the UNAIDS lunched a new [Global AIDS strategy 2021-2026](#) to end inequalities and end AIDS as a global health challenge by 2030, and overcome setbacks caused by the COVID-19 pandemic. The new strategy underlines the need to help people that face discrimination, stigma and unequal access to HIV education, prevention and care.

Globally, HIV remains a major public health issue, affecting 38.0 million people of which 59% are in [most burdened Sub-Saharan African region](#). Adolescents and young women are most vulnerable with [4500 infected every week](#) in Africa. Sub-Saharan Africa bears the highest burden of HIV mortality and morbidity compared to any other place in the world. In 2019, nearly 1.7 million new infections, 690, 000 deaths occurred in sub-Saharan Africa. Despite the great progress made in terms of reducing HIV mortalities and morbidities, only 12.6 million (33%) of those living with HIV are accessing treatment.

Global resource mobilisation and targeted investment on HIV/AIDS has been the key element of the once successful HIV prevention and control program. For instance, evidence shows that among the funding from the G20 countries between 2000 and 2017, HIV/AIDS consistently received the most funding, estimated at \$42.1 billion (40%) of [global funding](#) and the greatest investment in terms of disability adjusted life years (DALYs) estimated at \$772 per DALYs. Significant global resources have been invested in the HIV/AIDS epidemic including [Global Fund](#) and [PEPFAR](#), therefore, so much has been achieved in terms of prevention, scaling-up of treatment and support in [response to HIV](#). Access to improved treatment (antiretroviral therapy (ART)) and global public health prevention initiatives have led to HIV infection transforming from being a death sentence to a [treatable](#) and [manageable chronic disease](#), hence many people living with HIV/AIDS (PLWHA) are ageing, increasing their risk to [non-communicable diseases](#) (NCDs). Given the increasing life expectancy of people living with HIV due to the improved care, the emergence of NCDs is of a growing concern. According to predictions, [84%](#) of HIV patients will experience at least one NCD and [28%](#) of patients will have three or more NCDs by 2030. No doubt, the added burden of NCDs on HIV affected households will be significant especially in Sub-Saharan Africa given the weak [health systems](#). Despite this emerging [double burden](#) especially in developing countries including Sub-Saharan Africa, there is limited evidence on the impact of NCDs for PLWHA.

The successful outcomes of investment in HIV prevention and control especially in Sub-Saharan Africa

notwithstanding, the emergence of COVID-19 in 2019 has significantly undermined the global funding to HIV/AIDS care and support services. Even before COVID-19, [funding to HIV response](#) in low- and middle-income countries peaked in 2017 and started to decline with only 76% of the 2020 target resources available in 2019. Therefore, the 2020 Fast Track prevention and treatment targets commitment to the UNAIDS 2016-2021 strategy were not reached.

HIV remains a pandemic of inequalities, hence the new [Global AIDS strategy 2021-2026](#) targets to reach those who are left behind. Reaching those who are left behind requires significant investments to implement innovative models. It is therefore crucial that the HIV/AIDS epidemic is not silently neglected because HIV/AIDS remains an [urgent global health crisis](#), especially in most burdened Sub-Saharan Africa.

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