

COVID-19 AND ITS IMPACT OF KEY POPULATIONS: A COMMUNITY REFLECTION



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TALK OVERVIEW

- **COVID-19 as an excuse to crackdown**
- **Violence**
- **Economic instability**
- **Access to services**
- **Reemergence of draconian HIV responses**
- **National aids planning**

COVID-19 AS AN EXCUSE TO CRACK DOWN

- **Scapegoating and targeting of key populations on the rise.**
 - **Some governments using COVID-19 to introduce new or to make more severe current laws designed to discriminate/criminalize key populations.**
- **False claims being circulated by governments – i.e. hormone replacement therapies increase the risk for COVID-19 infection and transmission.**
- **In countries imposing shelter-in orders or that are in lock down, where government issued IDs are obligatory:**
 - **Trans people at risk if gender on documents have not been changed;**
 - **Undocumented migrants/immigrants without government issued IDs are also at risk.**
- **Key populations may be at risk of not receiving urgent medical care in places where ventilators or hospital beds are in short supply and go to non-stigmatized groups first.**
- **Social protection measures being put into place by governments exclude gay men, sex workers, people who use drugs, and/or transgender people – and their providers.**

COVID-19 AS AN EXCUSE TO CRACK DOWN

- **Some governments are using restrictions on civil liberties and public gatherings to crackdown on LGBT organizations and individuals.**
 - **Uganda – where 20 people were charged after shelter for LGBT people was raided.**
- **Increased police and army presence on the streets means that key populations are at higher risk of arrest and harassment.**
 - **Instances reported in Cameroon, and Kenya, where gay/bi men, people who use drugs, sex workers, and transgender people have been beaten for ‘breaking the rules’ by congregating on streets because they have nowhere else to go.**
 - **In India, 18 people got picked up and taken to a rehab center, which lacked opiate substitution therapy and sufficient food.**
- **Growing concern over privacy and confidentiality in the ways governments are using data.**
 - **Governments are tracking mobile phones to monitor people’s movement during lockdown or curfews.**
 - **Need to prevent the use of the internet in State surveillance of criminalized key populations.**

VIOLENCE

- **Increased risk of violence as stigma, scapegoating and blame begin to take hold.**
- **Increased risk for intimate partner violence when stuck at home with abusive partners**
 - **Not just a risk/concern for cisgender heterosexual women.**
- **Opportunistic blackmail is on the rise.**

ECONOMIC INSTABILITY

- **Loss of jobs –resulting in income, housing, food, and healthcare insecurity.**
 - **Loss of work and/or work disruption creating heightened vulnerability to violence, housing instability and food insecurity among sex workers.**
- **Homelessness is expected to rise among key populations who are already disproportionately represented among people sleeping on the streets or in their cars.**
- **Marginally housed individuals unable to move between friends and shelters.**

MENTAL HEALTH AND SUBSTANCE USE

- **Key populations are re-traumatized by reintroduction of regressive policies, increased stigma, discrimination, and violence.**
- **PTSD like symptoms, depression, anxiety, suicidality – triggered by loss of loved ones, job, support systems, and sense of safety.**
- **Social distancing exacerbates sense of social isolation, loneliness gay/bi men, people who use drugs, sex workers, and transgender people may already be feeling.**
- **Concerns are beginning to mount over increases in problematic substance use and drug dependency, without access to needed services.**

ACCESS TO SERVICES

- **ARV stock outs or unavailability, HIV prevention, care, and treatment services because resources are being redirected to COVID-19 response.**
- **Lock downs and shelter in place policies especially difficult for:**
 - **Substance users' ability to access their drugs of choice or treatment – could lead to elevated risk, including risk of overdose.**
 - **Trans people to access gender affirming services, including hormone therapies.**
 - **All key populations ability to access HIV prevention (including PrEP), care and treatment.**
- **Funding for programs focused on key population may be deprioritized as non-essential, including:**
 - **Harm reduction, OSTs.**
 - **Gender affirming hormone therapies.**
- **Restrictions on gatherings will largely impact essential outreach and HIV prevention, care, treatment programs for key populations, which could lower 'yield', undermining achievement of targets.**
 - **We must argue against using 'poor performance' in this context to justify decreased funding.**

ACCESS TO SERVICES

- **Harm reduction services are being closed.**
 - **Harm reduction services should be defined as 'essential life-saving services' that must stay open and for workers to be categorized as critical health care staff.**
- **Need for outreach workers to have the right permits to be able to move around.**
- **Stronger guidance needed from WHO on COVID-19 and what constitutes essential services for key populations.**
 - **Harm reduction/HIV/gender affirming services had to adapt very quickly, without specific guidelines.**
 - **How do we make services as accessible as possible – i.e., what services can be delivered at pharmacies?**

ACCESS TO SERVICES

- **Stigma and discrimination already experienced by key populations will likely worsen when accessing COVID-19- and/or HIV-related services.**
- **Health professionals, including peer educators and outreach workers must be trained on COVID-19.**
 - **They must also be offered protective personal equipment to reduce the risk of COVID-19 infections.**

REEMERGENCE OF DRACONIAN HIV RESPONSES

- **Criminalization of COVID-19 in many countries, with key populations being singled out as vectors for disease.**
- **Use of index testing for COVID-19 is problematic – especially as countries become increasingly stringent and punitive.**
 - **It is likely that already criminalized groups will face more severe policing and punitive approaches from public health and law enforcement, including forced disclosure of contacts/networks after COVID-19 exposure has been reported.**
- **Return to abstinence policies and policing of sex under the cover of COVID-19 – lends itself to further scapegoating and blame.**
- **Guidance about sex in an era of social isolation important and only rarely disseminated.**

NATIONAL AIDS PLANNING

- **Many countries are moving National AIDS Planning processes, including Global Fund country dialogues/consultations, online.**
 - **Meaningful engagement of key population communities at risk.**
 - **Internet access and safety are critical.**
- **Ensure safety monitoring, hacking mitigation during virtual meetings.**
- **Track impact of COVID-19 on:**
 - **Key population funding, programs and services.**
 - **Human rights violations.**
 - **Violence.**
 - **Denial of services.**
 - **Need for mental health and concrete services (housing, food).**
- **Advocate for investments in COVID-19 response, while safeguarding funds/resources for country-level HIV portfolios.**

SUMMARY

- **Backlash and backsliding is happening as crackdowns continue unabated.**
- **Key populations are more vulnerable to violence than ever.**
- **Intensified stigma, discrimination, and human rights violations.**
- **Unemployment, housing instability, and food insecurity will worsen and undermine HIV responses.**
- **Progressive decline of mental health.**
 - **The specific impact that crackdowns, loss, stigma, discrimination and violence is having on key populations cannot be overstated.**
 - **Social distancing is worsening the situation.**
- **ARV stock outs or unavailability of harm reductions, HIV prevention, care, support, gender affirming, and treatment services because resources are being redirected to COVID-19 response.**
- **Denial of HIV/sexual health services or being asked to 'step to the back of the line' – widely reported.**

AND REMEMBER TO...

- **Consult and engage community-based and key population-led organizations during the COVID-19 pandemic!**
 - **Balance top-down approaches with bottom-up, creative grassroots solutions.**
 - **All ideas, adaptations, approaches should be carefully vetted by trusted community-based, key population-led organizations.**
 - **Take a participatory and collaborative approach to safeguarding HIV services and hard-fought gains made.**

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THANK YOU!