

# Understanding how HIV testing has been affected by the COVID-19 response



## AUTHORS:

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## BACKGROUND:

In response to COVID-19 being declared a pandemic, concerns were raised about the impact on people living with HIV (PLHIV), different communities affected by HIV and healthcare systems. EATG collected several data reporting the disruptions and solutions found at community level.

## OBJECTIVE:

As the first rapid assessment indicated changes to testing practices, EATG expanded the questions on testing in the second rapid assessment to understand how testing appointments and follow-up to testing were being affected and the community centres response to this.

## METHODS:

- EATG conducted an online survey-based rapid assessment with a data collection period from 27 March to 3 April 2020.
- The questionnaire included quantitative and qualitative questions in English and was disseminated through the networks of EATG and AIDS Action Europe.
- The results of the first survey informed the questions of the second rapid assessment which was also available in Russian and was broadly disseminated for response from 27 April to 4 May 2020.
- The survey was addressed to PLHIV and communities most affected by HIV who are affiliated to organisations or as individuals.

## RESPONDENT DEMOGRAPHICS:

- The respondents to the survey included **30 people** from **22 different countries** across Europe and Central Asia. Overall, participants were made up of **23 respondents affiliated with a local organisation, 20 were PLHIV, 14 were MSM, 5 were migrants, 3 were women, 1 was a PrEP user and 1 person was injecting drugs.**
- The respondents to the second survey included **57 people** from **26 different countries** across Europe and Central Asia. In total, **50 participants indicated being affiliated with organisations advocating for or serving PLHIV** and affected communities (**35 participants identified as MSM, 19 people as injecting drug users, 16 as sex workers, 9 as trans persons and 4 as migrant community members**).

## RESULTS:

- In the second survey, 16/47 respondents reported that HIV testing in healthcare settings was available only in emergencies, 11/47 as postponed and 17/47 reported no change.
- Several respondents reported disruption to HIV testing activities from community centres, with suspension of testing activities or appointment-only testing.
- In the first survey, three respondents reported exploring self-testing programmes in the UK (Brighton and Hove), Russia and Italy. Three respondents noted that they are looking into the possibility of self-testing (Portugal, Czechia, Poland).
- In the second survey, respondents noted that in countries where self-testing is available, self-testing kits were accessible through the following means: NGOs (25/29), pharmacies (16/29), online (15/29), vending machines (3/29) (Graph 1).
- While 6/29 people reported kits were unavailable due to shortages, 16/29 respondents noted they were never available in their location.
- Examples of community interventions to assist and encourage self-testing were provided from several countries. An example is the case of Czechia, where the Checkpoint advertised its self-test programme on LGBT social media. The test can be ordered online and online counselling is also provided. There is user support via a 24/7 hotline. Linkage to care is ensured via a peer service.

## CONCLUSION:

- There appears to have been limitations in access to HIV testing overall. However, community organisations have developed innovative approaches to maintain counselling and testing services, including self-testing and online assistance/counselling and linkage to care support.
- Financial and regulatory barriers to self-testing remain in many locations, suggesting self-testing was not a viable alternative everywhere. These barriers must be addressed if self-testing is to be used to mitigate limitations in testing centres?

Do you have information regarding access to HIV self-tests?

