

From: Pozitif-iz Association – Turkey

Impacts of Covid-19 on HIV and People Living with HIV

Introduction

We are concurrently going through two pandemics; one is HIV which has been in our lives for four decades, and the other is Covid-19 which has been high on the agenda for the last 3 years. Both continue to have an increasing and simultaneous impact on both public health and economy.

In this report, we aim to provide a summary of the repercussions of Covid-19 in the context of HIV. First, we would like to get a full picture of the overall situation. Therefore, we respectively address the number of HIV cases in Turkey, the rate of increase of HIV, the level of public knowledge, the impacts of Covid-19 on HIV and the rise in rights violations.

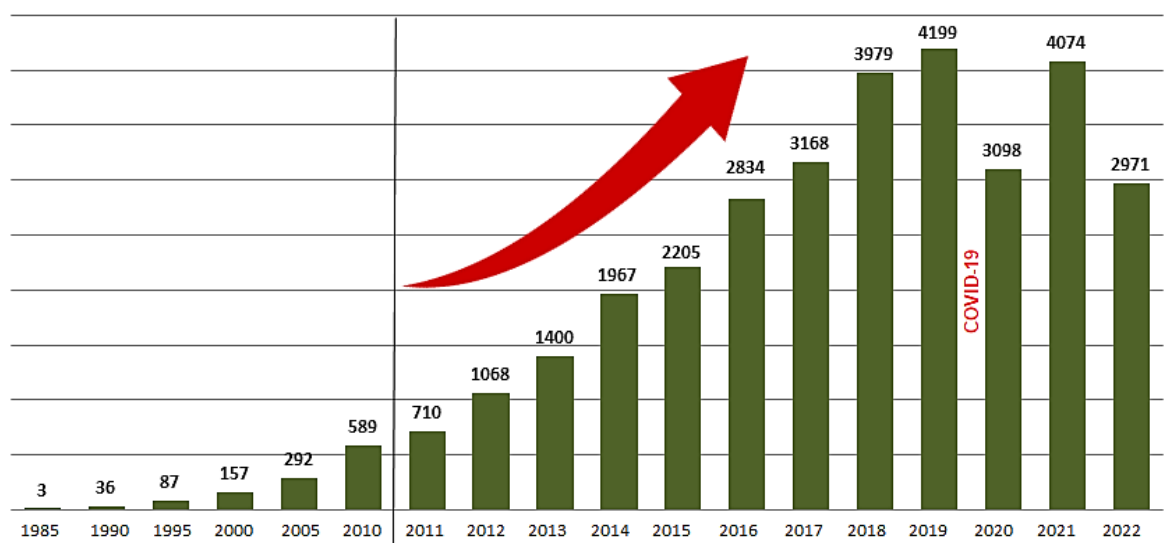
HIV in Turkey

Global reports published by the scientific community state that HIV continues to increase exponentially in Central and Eastern Europe, including Turkey. In 2020, Turkey was one of the two Central European countries with the highest number of reported new diagnoses. (1).

According to the official data (2) published by the Ministry of Health of the Republic of Turkey, since 1985, when the first HIV case was reported, until November 2022, a total of 36.630 persons have tested positive in the confirmatory test and been notified of the test results. Official figures show that since the first confirmed HIV case in Turkey, approximately 60% of the total number of persons diagnosed with HIV have been diagnosed in the last 5 years. A study revealed that by 2040, the incidence could reach up to around 375.000 (a 27% rise). In other words, the registered HIV cases in Turkey are only the tip of the iceberg.

According to 2021 data, 8 persons were diagnosed with HIV per day in Turkey. In other words, 1 person was diagnosed with HIV every 3 hours.

People Diagnosed with HIV by Years



Years 1985- 2010 refer to 5-year intervals and the rest are per annum

Owing to successful treatment options available today, persons living with HIV with an “Undetectable= Untransmittable” (4) viral load can live out their natural life cycle like everyone else and they no longer transmit HIV sexually. Nevertheless, HIV persists to be a serious public health problem on account of people who do not take medication because they do not get tested and find out about their diagnosis.

Fear of stigma and discrimination are the main barriers that get in the way of people getting tested. Reasons why people do not get tested, can also be associated with inadequate knowledge and awareness of HIV, lack of knowledge of protection methods, failure to engage in adequate dialogue due to taboos and prejudices and failure to develop prevention strategies.

*According to the HIV/AIDS Awareness Survey conducted by Başkent University and Hacettepe University HIV-AIDS Treatment and Research Center (HATAM), **77% of the population in Turkey do not have information about HIV, whereas 75% are not aware that people living with HIV can live a normal life.***

Impacts of COVID-19 on HIV in Turkey

Although the number of people diagnosed with HIV seems low based on Turkey’s official data on HIV in the last three years, it is obvious that the Covid-19 pandemic and its impacts are behind this low figure. There has not been adequate HIV testing during the Covid-19 pandemic for a number of reasons, including newly imposed restrictions, the closing down of Voluntary Counselling and Testing Centres, the fact that both public and private centres focused their work solely on Covid-19 and that people could not go to health institutions lest they came into contact with Covid-19. All of these had repercussions that led to many people being now diagnosed at a late stage, that is the AIDS stage.

The feedback we received from our counselees / civil society organisations, particularly in the first months of the Covid-19 pandemic show the following:

- People who have engaged in risky contact could not get tested.
- People who have tested HIV positive but did not obtain the result of the confirmatory test could not get a conclusive diagnosis.
- Infection control units halted their polyclinic services.
- People living with HIV could not access a doctor- could not get an appointment.
- Those who could get appointments with infectious disease doctors with the help of CSOs received diagnosis and accessed treatment; however, there was no follow-up afterwards.
- When polyclinic services were started, physicians commonly adopted a dismissive attitude towards patients, sending them away and putting them off at a later day.
 - It is of utmost importance for an individual who receives a diagnosis of HIV and experiences trauma caused by the diagnosis, to get accurate information in the first appointment so that they can make peace with HIV and normalise it. The delay caused people to get more worried. Their belief in the doctor and the treatment were undermined.
 - HIV treatment and follow-up procedures that require specific knowledge were carried out by inexperienced assistants. The supervisors gave assistants responsibility; however, the lack of the necessary authority and initiative of assistants caused a major shortcoming.
- Success or failure of the treatments received by people living with HIV could not be monitored (!)
- People living with HIV could not get clarification on the interaction between their ARV drugs and Covid drugs handed out to people in quarantine by contract tracing teams of the Ministry of Health.

- People living with HIV who have contracted Covid-19 could not reach doctors to get information about what to do. As a consequence, they were left with more worry and anxiety.
- The Ministry of Health did not make a clear statement on whether people living with HIV were in the risk group for Covid-19.
- Although people with chronic health conditions were considered to be on administrative leave during the pandemic, proper clarification could not be achieved for a while on the status of those living with HIV.
 - Even after clarification was provided, people living with HIV could not share their status with their workplaces for fear of being outed as HIV positive; and, consequently had to work in person and go to the workplace mostly by public transport.

In the meantime, Civil Society Organisations working in the field of HIV provided informatory content about Covid-19 and HIV in order to keep people living with HIV informed and alleviate their concerns.

As a consequence of the above-mentioned points, Covid-19 has resulted in the following:

- more fear and anxiety for HIV-positive people,
- a lack of trust in health institutions, health services and doctors,
- people have decided not to go to the hospital, not start or stop their treatments (!),
- an increased risk of Covid-19 infection when people were recalled back to the hospital
- more workload for physicians.

Consequently, receiving an HIV diagnosis at a late stage and not accessing treatment resulted in the following:

- failure to start treatment on time,
- failure to maintain good health status,
- a rise in health expenses/economic burden due to possible diseases,
- a decline in the labour force,
- people who were unaware of their HIV status and/or who did not get treatment could not reach the level of “Undetectable= Untransmittable” viral load and continued to spread HIV.

On the other hand, Turkey, which already had a poor record in testing and diagnosis during the Covid-19 pandemic, lost significant time in achieving 95-95-95+95 targets.

Rights Violations Increased During COVID-19

With the support of **Etkiniz EU Program**, Pozitif-iz Association publishes annual reports on rights violations faced by people living with HIV. These reports (6) reveal that people living with HIV in Turkey are subject to stigmatisation, discrimination and rights violations first and foremost at health institutions and by health workers and secondly in the working life, with the rising number of violations every other day.

Unlike the previous reports, [The 2020 Report on Human Rights Violations](#) by Pozitif-iz Association covers the impacts of the Covid-19 pandemic on people living with HIV, revealing that the pandemic was used almost as a cover to justify the rights violations taking place, particularly in the field of health.

Furthermore, a widespread perception took hold during the Covid-19 pandemic that it was legitimate to render health data accessible to everyone for the common good. The slippery slope has become steeper for people living with HIV, making it harder for them to cope with their concerns.

The Covid-19 pandemic has introduced several new concepts to our lives, the definition of “risk groups” is one such concept. These groups were used as a reference for several

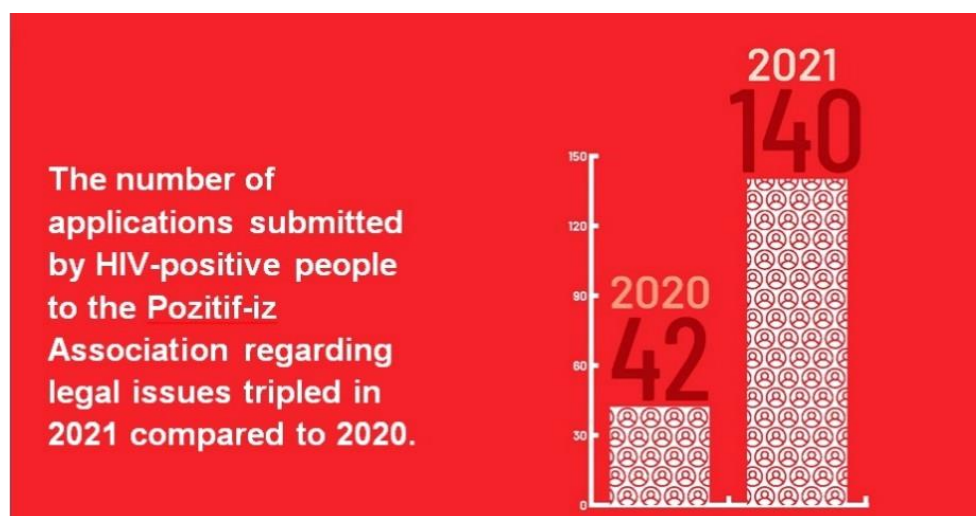
administrative practices. An example of such practices was the regulation adopted at the outset of the pandemic, requiring that only those in risk groups could be considered to be on administrative leave to be able to work from home.

Inefficacy of lawmakers and law enforcers to explain the risk groups kept many people living with HIV in the dark during the peak of the pandemic about whether Covid-19 had any specific impact on them. In addition to their existing concerns about their health status, they also had to worry about disclosing their HIV status to their employers to be able to work from home and lose their job as a consequence.

[“The Report on Violations of the Rights of HIV positive People in Turkey in 2021”](#) by Pozitif-iz Association reveals that the impacts of Covid-19 on people living with HIV persist in 2021 with an increasing number of rights violations, particularly in the health sector. **In 2020, the number of applications received by Pozitif-iz Association was 42, rising three-fold to 140 in 2021.**

People living with HIV faced major barriers in accessing health services for several reasons, including the lack of adequate knowledge about HIV among health workers, particularly family doctors, the fact that health workers shied away from providing treatment to HIV patients and discrimination against patients.

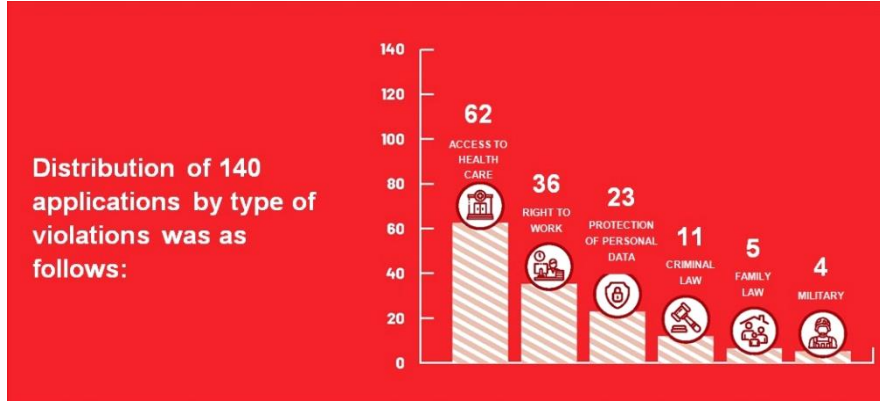
In addition, in August 2021, the Medical Messenger system (Medikal Ulak-MEDULA)¹ was launched and made accessible to health service providers. Launching of the MEDULA system was an institutional rights violation in its own right in the context of the protection of personal data; furthermore, it has led to new rights violations, including the “denial of the right to health”. It is the cause of a major part of the **rights violations that have tripled in number in 2021 in comparison to 2020.**



¹ What is Medical Messenger (Medula) System?

Medula refers to an electronic “prescription authorisation/ provision system” that works between Social Security Institution (SGK) and healthcare facilities.

The Medula system allows all hospitals under contract with SGK-Social Security Institution, all doctors including family and occupational physicians, inpatient nurses, reporting secretaries, pharmacists and pharmacy assistants to enter the patient’s ID number in the system and access the past medical history of patients including all their diagnoses and diseases, medications taken by patients, movements of patients with timestamps such as where and when the patients have been admitted etc. In particular, people with HIV, hepatitis or other infections, or psychiatric or neurological conditions have faced problems with the advent of this system.



HIV POSITIVE HEALTH WORKERS WERE THE HARDEST HIT BY COVID-19

Healthcare workers with HIV face no medical or legal restrictions to perform their professions regardless of their medical branch; nevertheless, it has been healthcare workers with HIV who have been most affected by the launching of MEDULA. Healthcare workers living with HIV could not even apply for infection control services in their own workplaces for fear of being stigmatised and discriminated against and exposed as HIV positive without their consent. As a consequence, they had to go to a different hospital, even to another province to get treatment and follow up procedures.

The report, prepared with the support of the EU under Etkiniz Grant Program, provides a retrospective reporting of rights violations and a legal analysis on the basis of applications received by Pozitif-iz Association in 2021. The purpose of this report is to demonstrate the projection of the recent past on today's reality in the context of rights violations with respect to HIV, while also providing a roadmap on HIV response and displaying the pathways of people living with HIV.

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Sources:

- 1 - [HIV/AIDS surveillance in Europe 2022. 2021 data](#)
- 2 - [HIV/AIDS İstatistik](#)
- 3 - https://www.hivglasgow.org/wp-content/uploads/2020/11/P114_Yaylali.pdf
- 4 - [Undetectable = untransmittable | UNAIDS](#)
- 5 - [“Dünyanın en büyük HIV/AIDS araştırması çarpıcı sonuçları” new article](#)
- 6 - Pozitif-iz Association Rights Violations Reports;
2018 and 2019 Report: [Pozitif-iz Association Launches The Report On Rights Violations In 2018 And 2019](#)
2021 Report [Pozitif-iz Association Published 2021 Rights Violations Annual Report](#)
2022 Report [Pozitif-iz Association Launches The 2020 Report on Human Rights Violations!](#)