



COVID-19
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UN EGYPT COVID-19 INSIGHTS SERIES

ASSESSING THE SOCIAL AND HEALTH IMPACTS FOR WOMEN LIVING WITH HIV AND AFFECTED AND KEY POPULATIONS DURING COVID-19

RAPID GENDER ASSESSMENT

No. 4/2020

1. Overview

The assessment analyzes the gendered social and health impact of COVID-19 on women living with HIV, and members of key populations in Egypt, focusing on HIV services for vulnerable populations. The assessment captures individuals' ability to access healthcare, employment, social and familial support, focusing on the gendered challenges facing them

2. Key vulnerable groups or sectors in focus

The assessment focuses on women living with HIV and members of key populations; namely injecting drug users (IDU), men who have sex with men (MSM) and other LGBTs. By 2019, there were 7600 WLHIV in Egypt (out of a total 13555), with 1400 cases newly infected in 2019 (out of a total of 2700). According to 2014 PSE data, there are 93,314 drug users in Egypt, with an HIV prevalence of 2.5%. while there are 23,000 FSW, and 64,300 MSM. The impact of COVID-19 on these groups is mainly centered around, access to HIV treatment during the crisis, as well as sustained prevention, testing, outreach for harm reduction for the mentioned KP groups.

3. Key insights from the knowledge product

- *A need to advocate for the concept of GBV while capacitating local authorities, CSOs and different communities to effectively capture and manage incidents of gender-based violence, providing them with the necessary tools to manage emerging cases of GBV with up-to-date knowledge of the available legal and psycho-social recourse. The assessment has found that 53% of people living with HIV could not access psycho-social support as a result of the interruption of services. Only 14% of women were able to access psycho-social support, in comparison to 40% of men*
- *Critical need for long-term economic empowerment solutions for women living with HIV and members of key populations, highlighting the need to integrate economic empowerment interventions into the national HIV response. The assessment's focus on gender experiences has shown that 67% of surveyed women living with HIV said they have lost their jobs as a consequence of COVID-19, versus 46.6% of men. 43% of women living with HIV were part of the irregular workforce before the pandemic. The findings*

have impacted the reprioritization of areas in need of reviewed action; such as reactivation of income-generating activities for women living with HIV, specifically those who are daily wage earners.

- *A need to integrate HIV with other health services* which PLHIV routinely require such as Sexual and Reproductive Health services as well as other surgical specialties such as general surgery, orthopedics and dentistry. Integrating health services with clear referral systems will better allow PLHIV to seek full healthcare in a timely manner
- Despite the quick response by the National AIDS Program (NAP) and MoHP to provide multi-month dispensing of life-saving ARVs to PLHIV to reduce in-person visits to hospitals with the aim of controlling infection rates, there is an urgent *need to support and advance targeted communication channels to bridge the information gap between service providers and recipients*. Targeted efforts are needed to relay this information in a timely manner through rapid resource mobilization.

4. Policy Implications

- Focusing on mainstreaming and integrating of HIV services, especially those targeting women and KPs, as part of a bundle or package of other universal health/ national services e.g. integrating Hepatitis and syphilis to the mass campaign of HIV testing of pregnant women in Egypt, which is currently ongoing.
- A renewed focus on the importance of making strategic information available, and monitoring of service uptake by beneficiaries, especially those more difficult to reach such as women and members of KPs. The NAP is currently in the process of rolling out a digital data collection tool to monitor uptake of services in VCTs and CSOs in governorates around Egypt.
- Building new modules for service delivery, those that provide a “one stop shop” for HIV services, while engaging the private sector.
- Catalyzing coordination and cooperation efforts among stakeholders of the national HIV response, including different government bodies and ministries, CSOs, UN agencies, research centers, social and economic-support bodies.

5. Programmatic relevance

In addition to providing critical strategic data on the current moment, the findings of the assessment have identified new priority programmatic interventions, including:

Community Engagement Sessions with Women Living with HIV and Key Populations: Through close collaboration with CBOs and CSOs, UNAIDS Egypt is setting to bring together women and KPs living with HIV from 3 governorates (Cairo, Alex and Minya) to explore and document needs, create sustainable channels of effective communication, and consistently include their voices in national dialogue and interventions.

Awareness sessions/Trainings on GBV to Government Bodies and CSOs: Through the work of a gender expert, UNAIDS Egypt is set to design and conduct training and awareness sessions to staff in the MoHP, NAP and CSOs



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on how best to deal with GBV survivors, complaints and tools for support as well as enhancing reporting channels. Development of an integrated tool for sustainability and mainstreaming of HIV services during similar crises.

Partners and Donors

This gender assessment was organized and managed by UNAIDS Egypt CO, conducted by an external consultant. It is funded by UNAIDS MENA Regional Office.

6. Link to the full knowledge product:

Publishable document in the pipeline

7. Name and email address of a focal point for the knowledge product

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