



Treatment and Care for Everyone

People Living with HIV in the Philippines in the Time of COVID-19

Survey Results and Recommendations
30 April 2020

By Engr. Xavier Javines Bilon

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Introduction

With measures on enhanced community quarantine (ECQ) currently in place in many parts of the Philippines, there have been reports from people living with HIV about difficulties they encounter in accessing HIV treatment during the COVID-19 pandemic. To determine the extent of the challenges, UNDP and UNAIDS initiated the survey on treatment and care concerns of people living with HIV in the Philippines in the time of COVID-19.

As of December 2019, 74,807 cases have been recorded by the Department of Health (DOH). Sexual contact among men who have sex with men (85%, 59,906) was the predominant mode of transmission, followed by male-female sex (11%, 7,476), and sharing of infected needles (3%, 2,166).

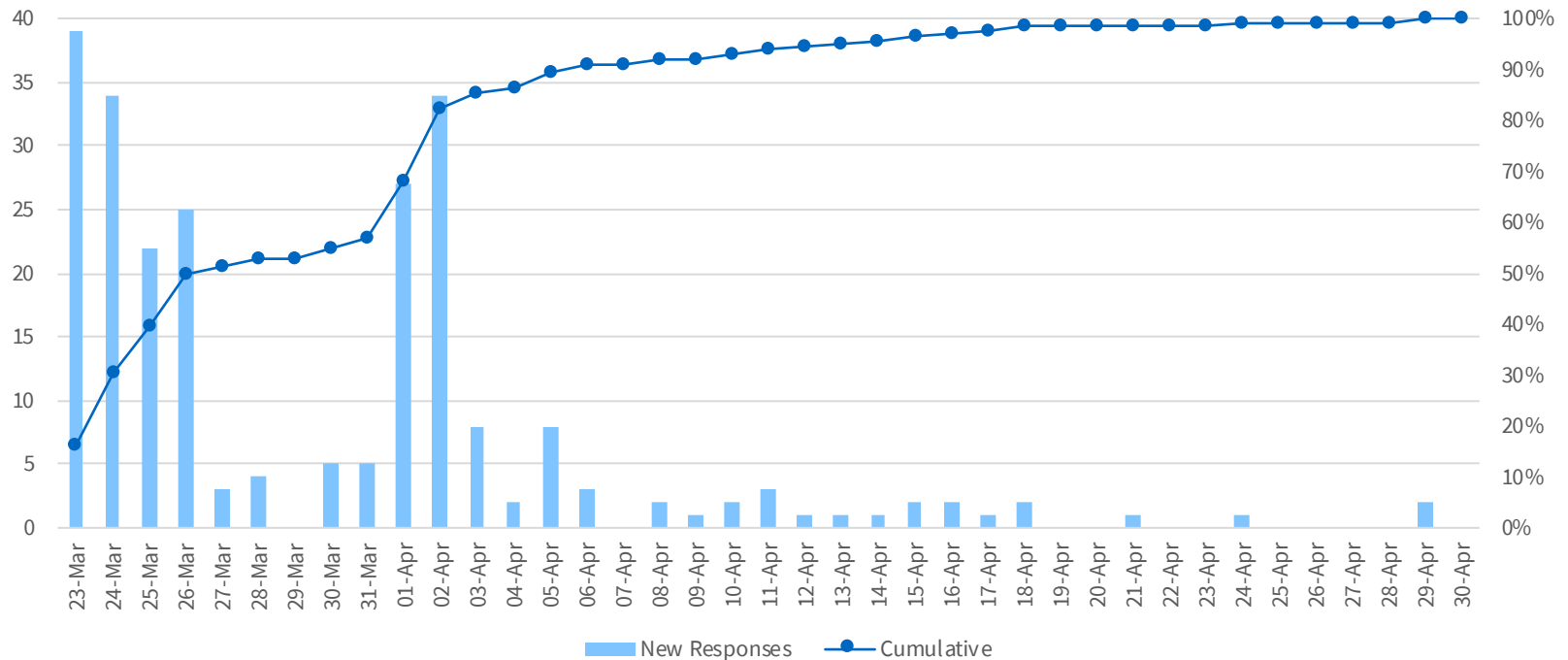
Approximately 60% of people who are diagnosed with HIV (42,731) are on anti-retroviral (ARV) treatment. People living with HIV (PLHIV) need to have continued access to ARV drugs as prescribed, with at least a month supply of ARV drugs and other medications needed with them all the time. Getting and staying on HIV treatment is important because it reduces the viral load or the amount of HIV in a person's blood to a very low level. This keeps people living with HIV healthy and prevents illness.

Survey Results as of 30 April 2020

Across different social media platforms, the reach of the survey is estimated at 104,639 people. We received 248 responses, with 7 duplicates and one incomplete response. After processing, we have a sample of 241 valid responses ($n = 241$). Average time to complete the survey is 8 minutes, 36 seconds.

New results and recommendations are underlined.

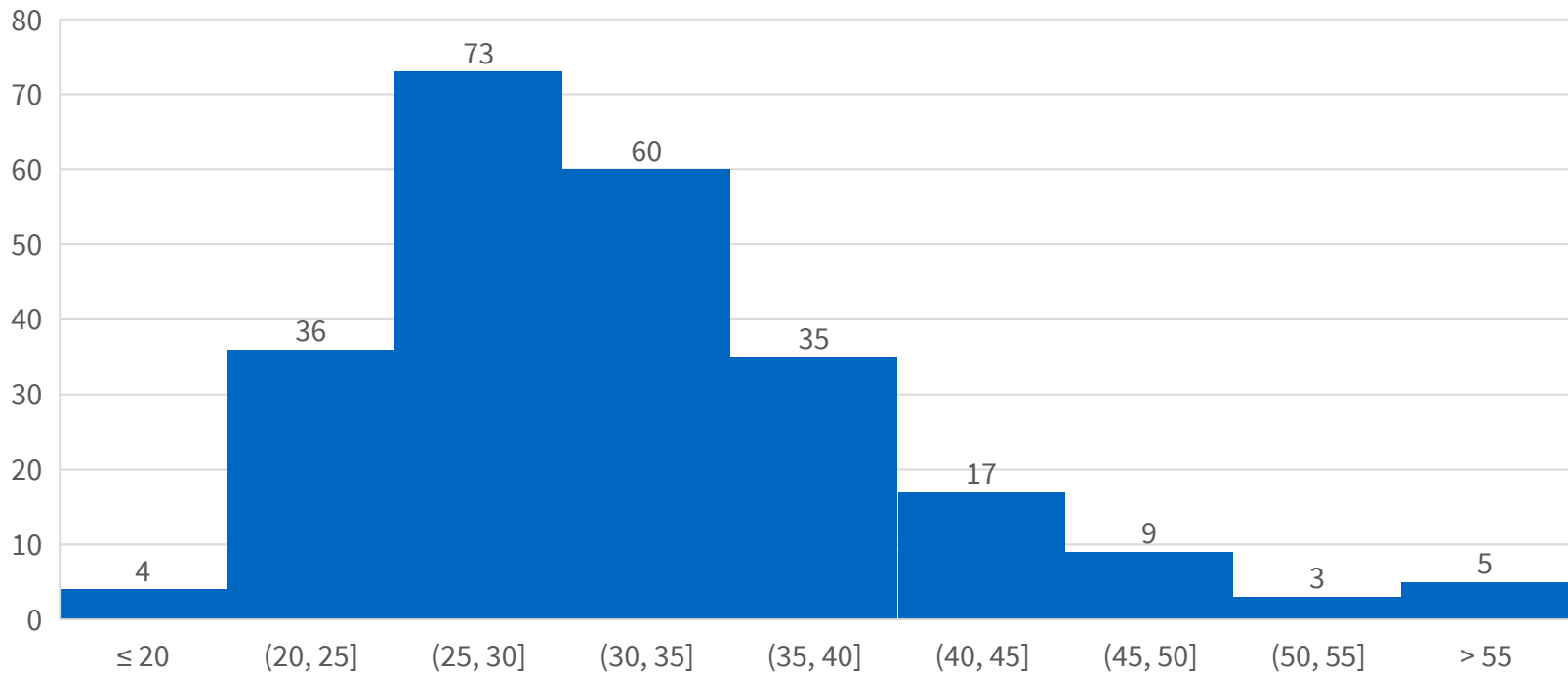
Number of Responses per Day



n = 241

Demographic Characteristics

Age

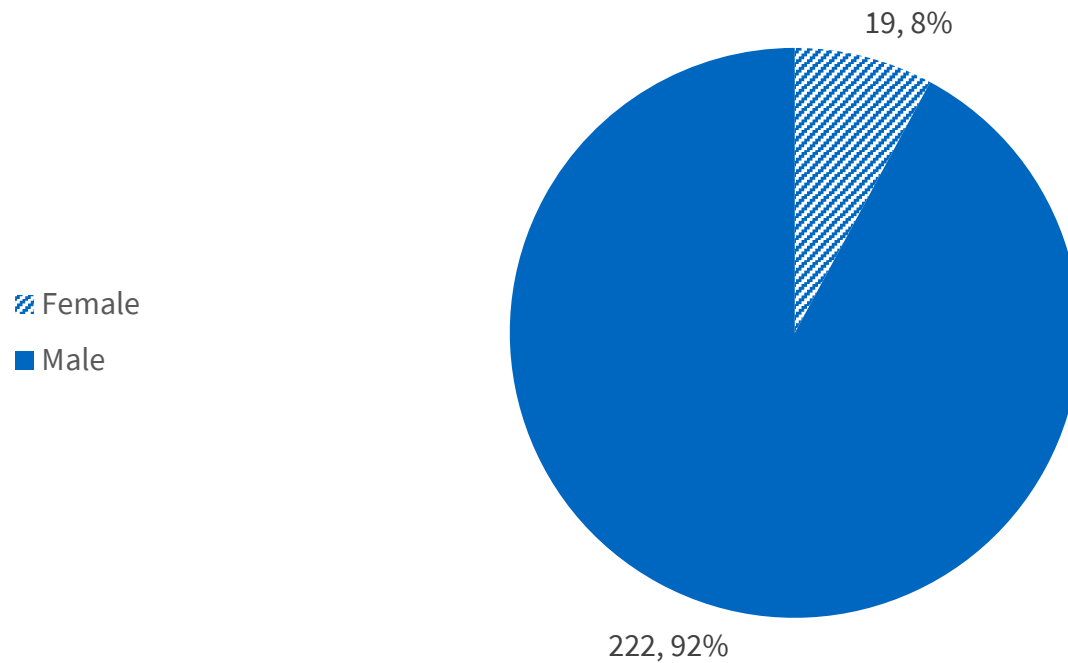


Mean = 32.5
Median = 31

Minimum = 19
Maximum = 59

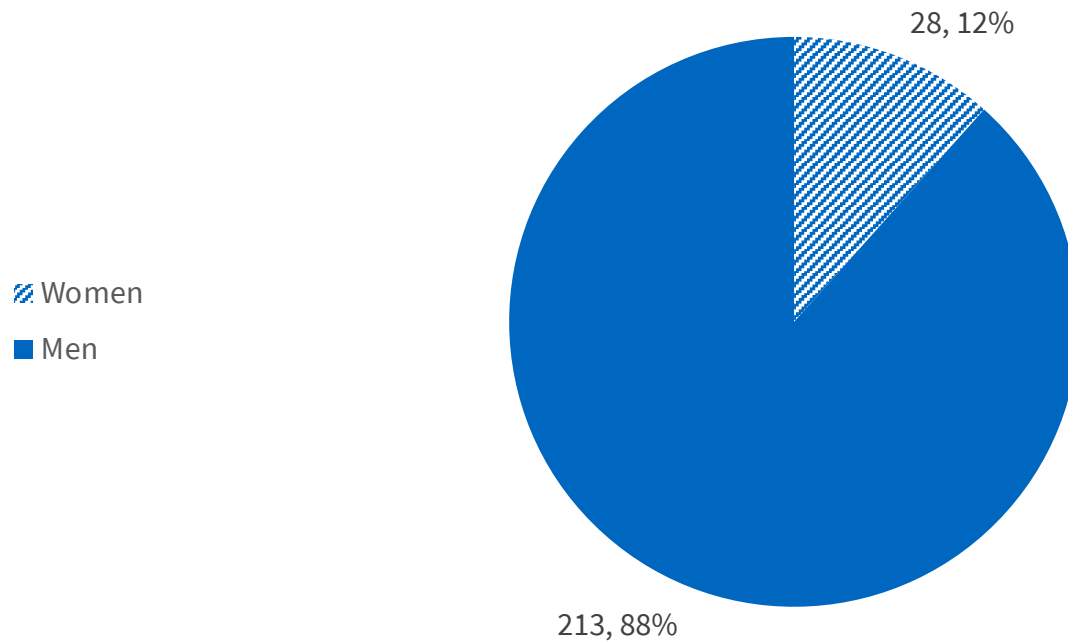
Demographic Characteristics

Assigned Sex at Birth



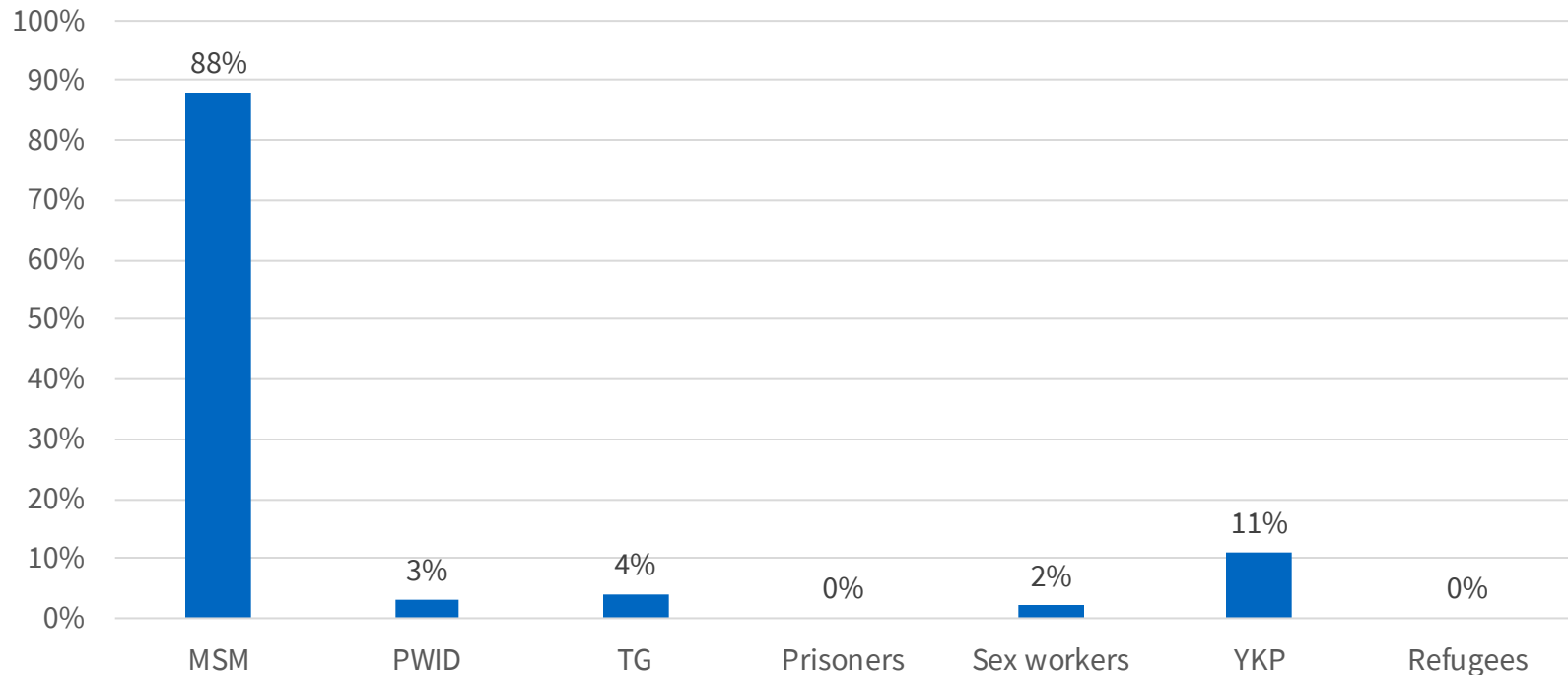
Demographic Characteristics

Gender Identity



Demographic Characteristics

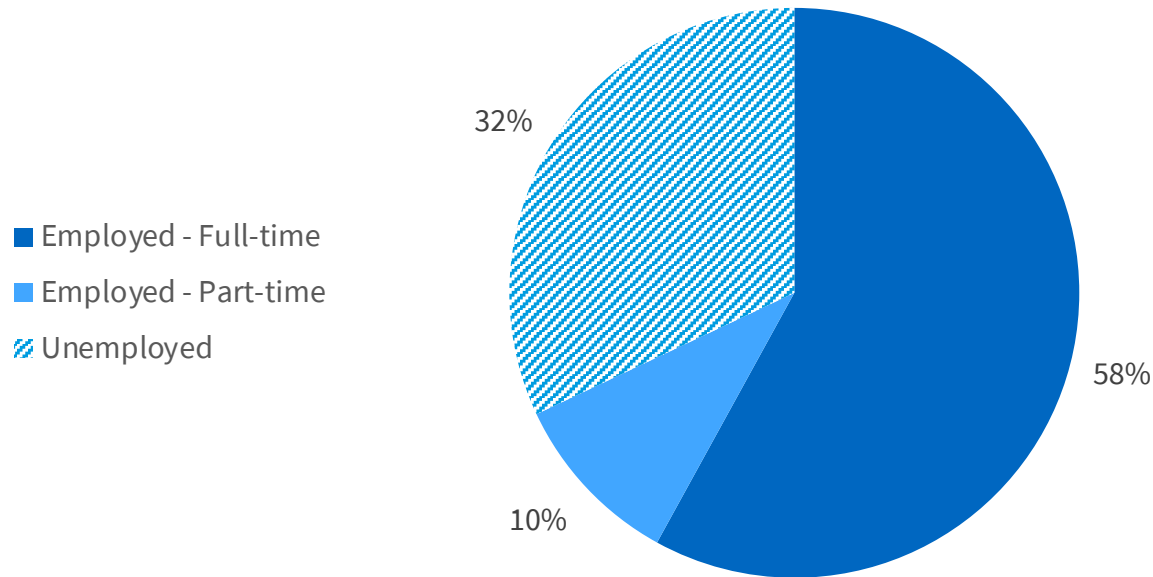
Membership to Key Populations



Men who have sex with men comprise 88% of the respondents (211). There are 28 women respondents (12%), nine of whom are transgender women (32% of women, 4% of respondents). Eight respondents are people who inject drugs (3%), while six are people who engage in sex work (2%).

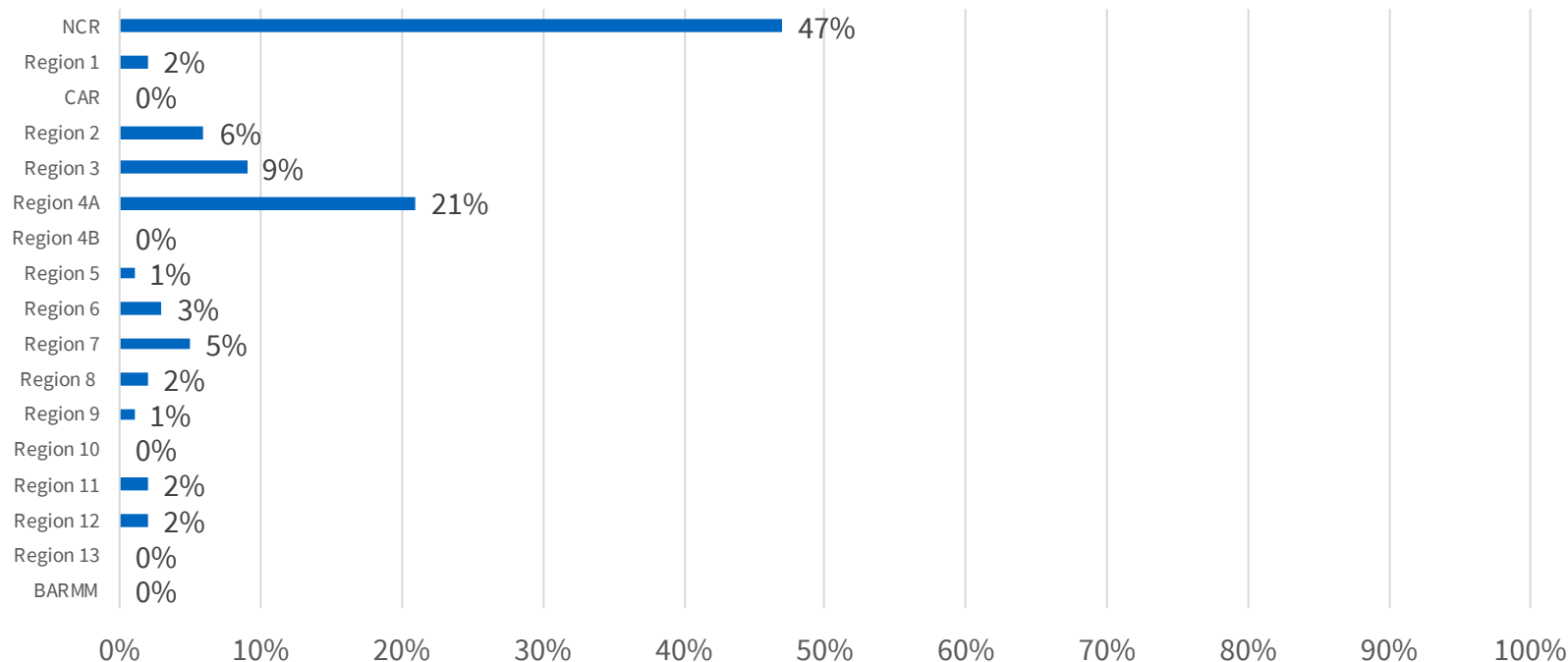
Demographic Characteristics

Employment Status



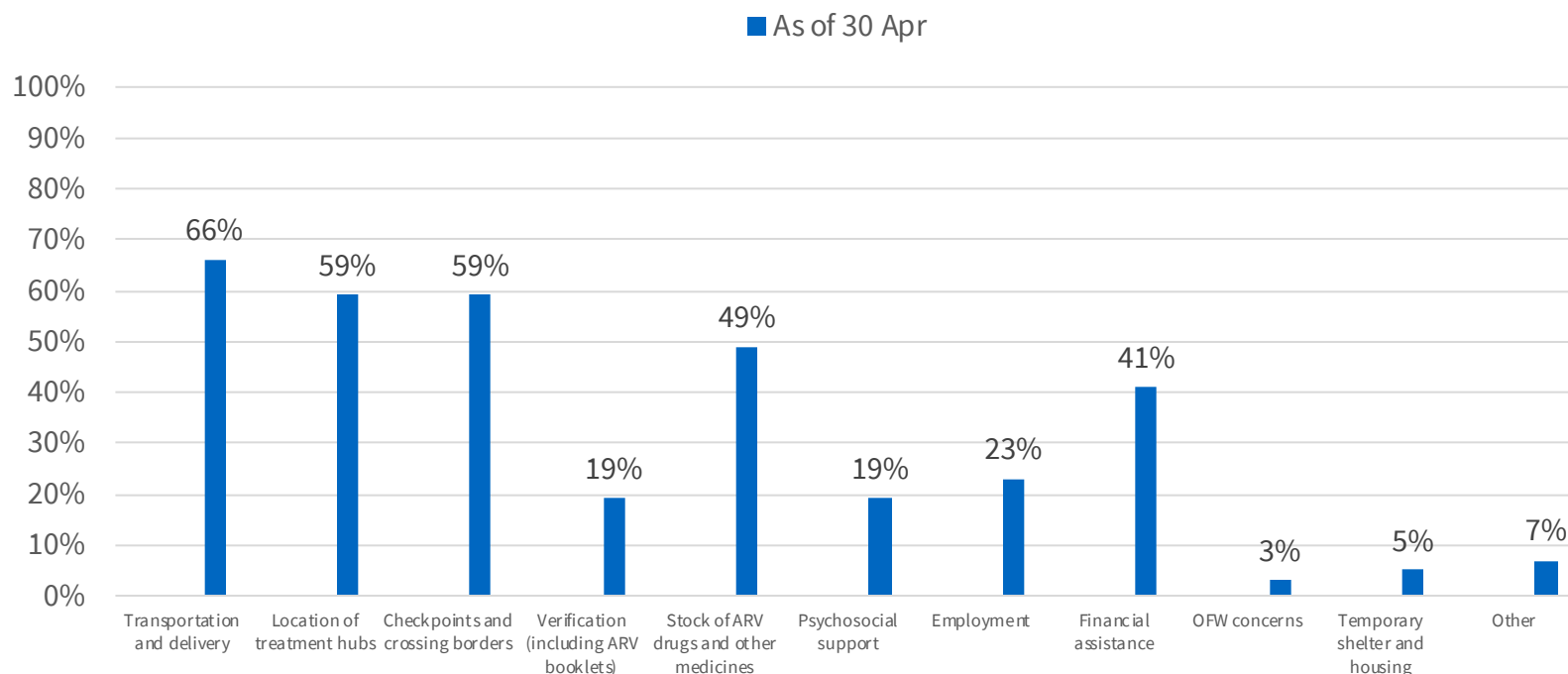
Demographic Characteristics

Region of Residence



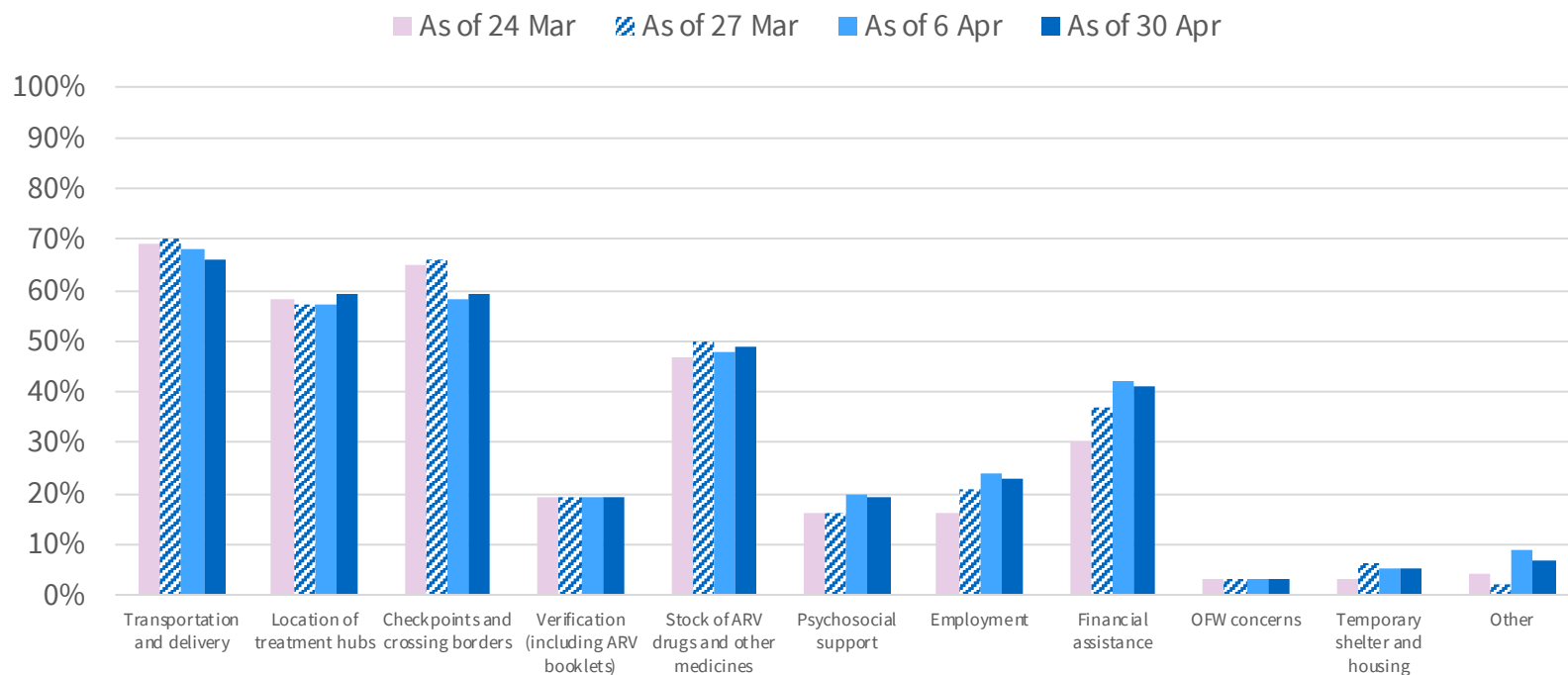
Around half of the respondents are from Metro Manila (114, 57%). More than a third of respondents reside in Luzon (93, 39%), 9% in Visayas (22), and 5% in Mindanao (12).

Type of Concern

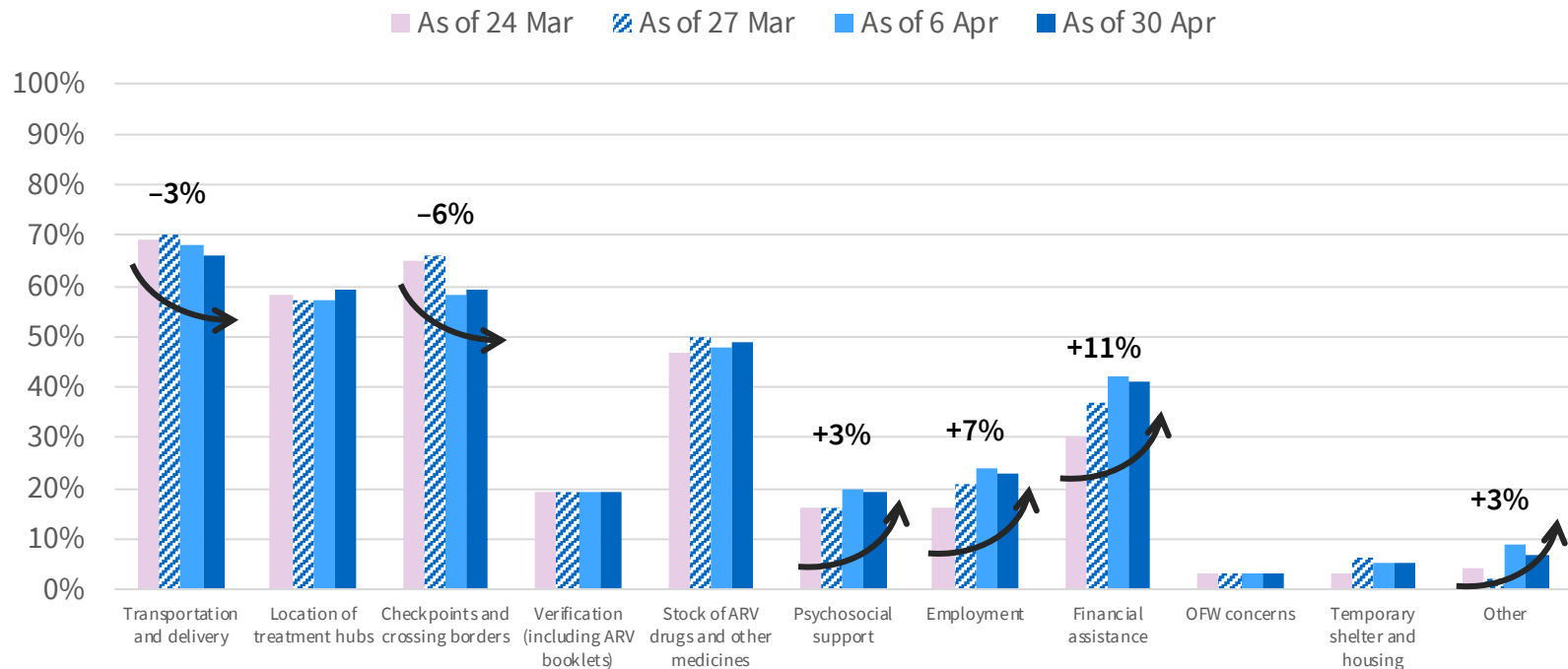


The report reveals that unavailability of public transportation and cost of courier services for ARV delivery (66%) is one of the most common barriers encountered by people living with HIV in accessing HIV treatment and care. This problem is also compounded by other issues such as with checkpoints and crossing borders.

Type of Concern (Comparison)



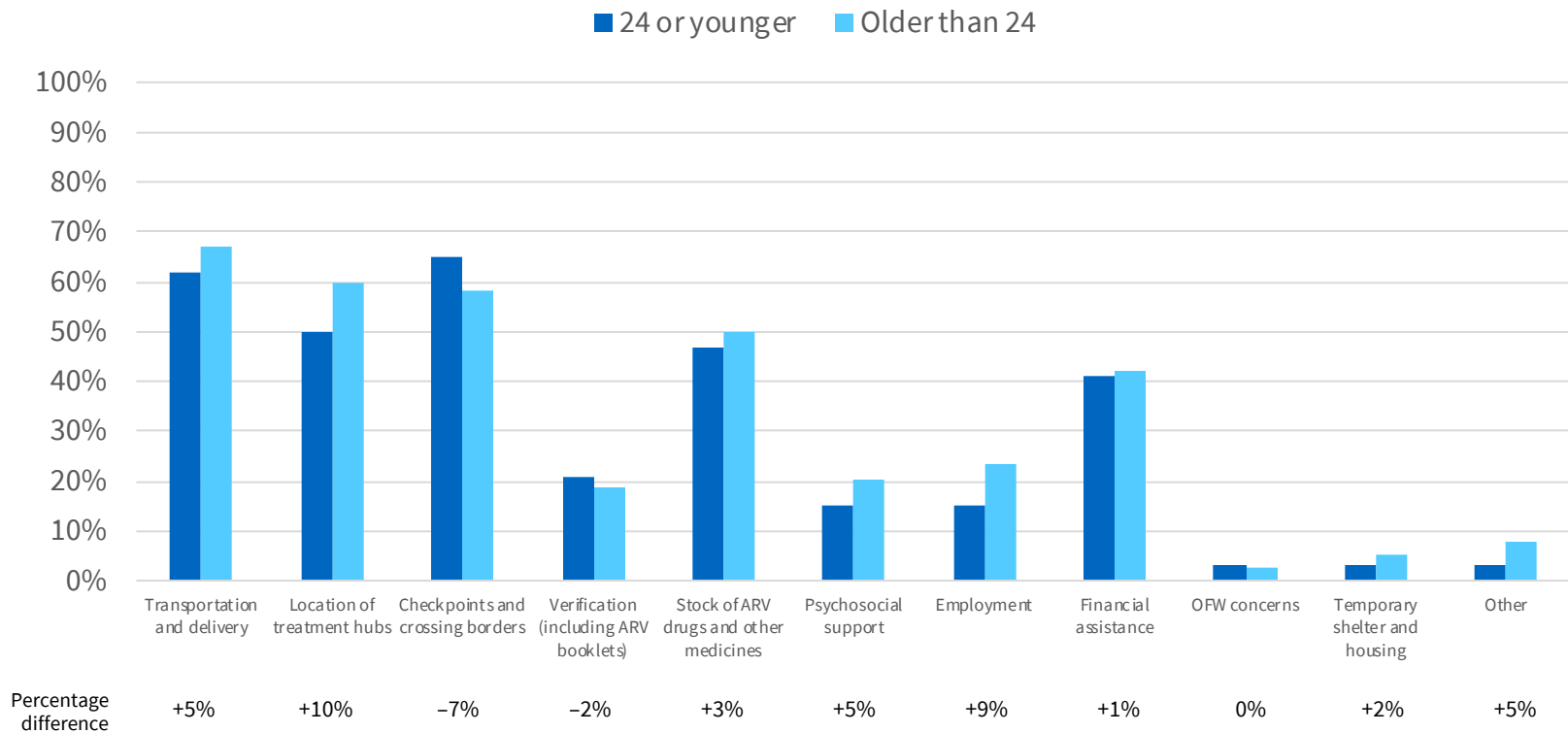
Type of Concern (Comparison)



Percentage differences of types of concerns in which the difference between 24 March data and this report is greater than ±3% are displayed.

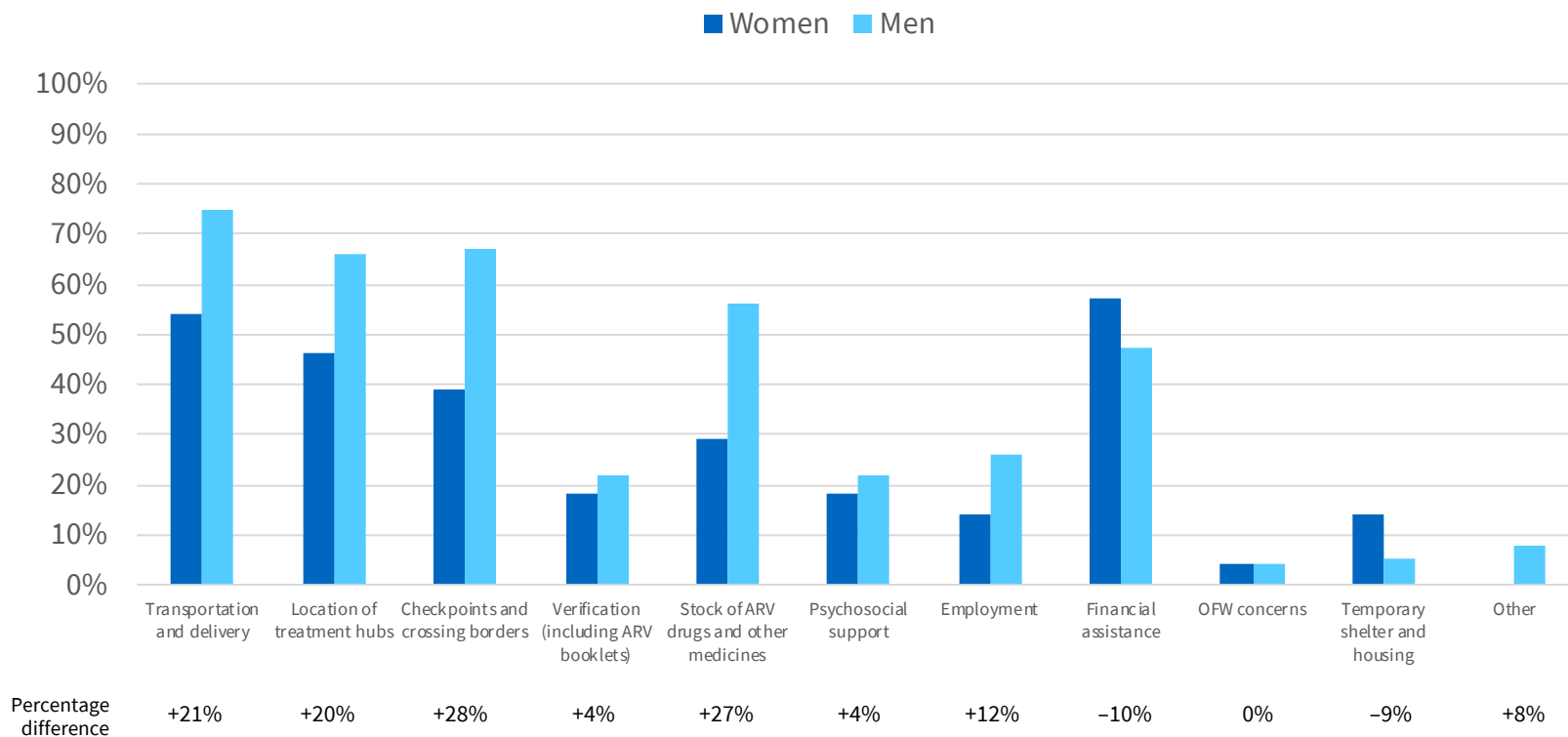
Young People Living with HIV

Type of Concern



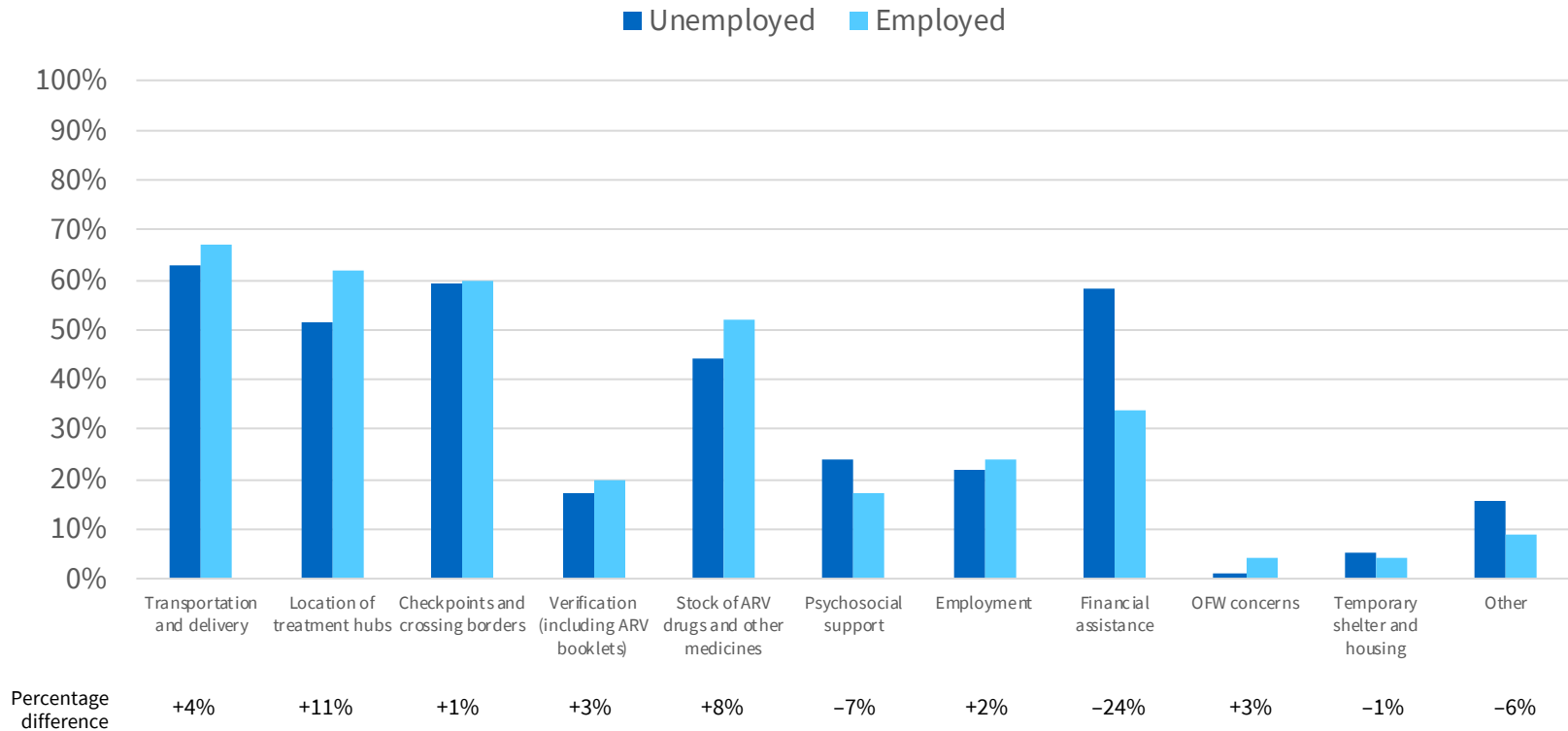
Women Living with HIV

Type of Concern



Unemployed People Living with HIV

Type of Concern



Issues with **Transportation and Delivery**

- No public transportation available within a city/municipality, across cities in Metro Manila, across provinces, and going in and out of Metro Manila, especially for those who need to go to an HIV facility for consultation.
- Although some people living with HIV reside in areas near an HIV facility, some have to go to a farther facility because of unavailability of their treatment in the nearest facility.
- Some people living with HIV are not comfortable disclosing their HIV status to their local governments to ask for assistance regarding transportation and delivery.

Issues with Location of Treatment Hubs

- For PLHIVs in Metro Manila, it is possible to use transportation services by LGUs and courier services (such as Angkas and Grab).

Residence of Client	Nearest HIV Facility	Average Distance in km	Average Distance in Hours by Walking
Navotas	Malabon City Social Hygiene Clinic	4.9	1.0
Pateros	St. Luke's Medical Center - Global City	3.5	0.8
	Rizal Medical Center	3.3	0.7
	Pasig City Treatment Hub (PATH)	2.5	0.5
	Taguig Social Hygiene Clinic	2.3	0.5
Other areas in Metro Manila have at least one HIV facility in their city			

Issues with Location of Treatment Hubs

- For PLHIVs in Regions 1 and 2, the nearest HIV facility is too far. The estimated average time it will take to walk from their residence to the nearest HIV facility is up to 11.6 hours.

Residence of Client	Nearest HIV Facility	Average Distance in km	Average Distance in Hours by Walking
Urdaneta City, Pangasinan	Region 1 Medical Center	27.9	5.7
La Union	Ilocos Training and Regional Medical Center	3.1	0.6
Tuguegarao City, Cagayan	Cagayan Valley Medical Center	5.4	1.1
Cabagan, Isabela	Cagayan Valley Medical Center	52.7	10.7
Cauayan City, Isabela	Santiago City Health Office HIV/AIDS Action Team (SCHO-HAT)	41.1	8.4
Santiago City, Isabela	Santiago City Health Office HIV/AIDS Action Team (SCHO-HAT)	1.3	0.3
Echague, Isabela	Santiago City Health Office HIV/AIDS Action Team	23.7	4.8
<u>Tumauini, Isabela</u>	<u>Cagayan Valley Medical Center</u>	<u>57.0</u>	<u>11.6</u>

Highlighted in blue are clients whose distance of residence to the nearest HIV facility is estimated at 1 hour by walking or longer.

Issues with Location of Treatment Hubs

- For PLHIVs in Region 3, the nearest HIV facility is somehow far for some clients, especially for those residing outside Bulacan. The estimated average time it will take to walk from their residence to the nearest HIV facility is up to 6.7 hours.

Residence of Client	Nearest HIV Facility	Average Distance in km	Average Distance in Hours by Walking
Sta. Maria, Bulacan	RE De Jesus Mulli-Specialty Clinic and Diagnostic Center (GreenClinic)	0.1	0.1
Bocauae, Bulacan	RHU 1 Marilao Bulacan (Kanaryong Silungan)	6.3	1.0
Meycauayan, Bulacan	Meycauayan City Primary HIV Care Clinic (Home of Bamboo)	2.4	0.5
Marilao, Bulacan	RHU 1 Marilao Bulacan (Kanaryong Silungan)	0.7	0.1

Highlighted in blue are clients whose distance of residence to the nearest HIV facility is estimated at 1 hour by walking or longer.

Issues with Location of Treatment Hubs

- For PLHIVs in Region 3, the nearest HIV facility is somehow far for some clients, especially for those residing outside Bulacan. The estimated average time it will take to walk from their residence to the nearest HIV facility is up to 6.7 hours.

Residence of Client	Nearest HIV Facility	Average Distance in km	Average Distance in Hours by Walking
Moncada, Tarlac	Guimba Community Hospital (Balay Ti Namnama)	27.9	5.6
San Jose City, Nueva Ecija	Guimba Community Hospital (Balay Ti Namnama)	33.1	6.7
	Talavera General Hospital (Talavera's HOPE)	29.2	5.9
Balanga, Bataan	Bataan General Hospital (Bataan HAVEN)	2.4	0.5
<u>Dinalupihan, Bataan</u>	<u>Jose C. Payumo Jr. Memorial Hospital (HEARTH Unit)</u>	<u>1.9</u>	<u>0.4</u>

Highlighted in blue are clients whose distance of residence to the nearest HIV facility is estimated at 1 hour by walking or longer.

Issues with Location of Treatment Hubs

- For PLHIVs in Regions 4-A, 4-B and 5, the nearest HIV facility is either somehow or too far. The estimated average time it will take to walk from their residence to the nearest HIV facility is up to 13.7 hours. There are also areas in which no HIV facility is accessible by foot.

Residence of Client	Nearest HIV Facility	Average Distance in km	Average Distance in Hours by Walking
Bacoor, Cavite	Bacoor Social Hygiene Clinic	7.2	2.0
Dasmariñas, Cavite	Dasmariñas City Health Office I (SHC)	4.7	0.9
Kawit, Cavite	Imus Social Hygiene Clinic	3.6	0.7
Naic, Cavite	General Emilio Aguinaldo Memorial Hospital	19.6	4.1
General Trias, Cavite	Dasmariñas City Health Office I (SHC)	6.7	1.4
<u>Tagaytay City, Cavite</u>	<u>General Emilio Aguinaldo Memorial Hospital</u>	<u>21.3</u>	<u>4.1</u>
<u>Sto. Tomas, Batangas</u>	<u>Calamba Doctors Hospital</u>	<u>11.8</u>	<u>2.5</u>
<u>Lipa, Batangas</u>	<u>Batangas Medical Center</u>	<u>25.0</u>	<u>5.0</u>
<u>Calatagan, Batangas</u>	<u>Batangas Medical Center</u>	<u>67.0</u>	<u>13.7</u>

Highlighted in blue are clients whose distance of residence to the nearest HIV facility is estimated at 1 hour by walking or longer.

Issues with Location of Treatment Hubs

- For PLHIVs in Regions 4-A, 4-B and 5, the nearest HIV facility is either somehow or too far. The estimated average time it will take to walk from their residence to the nearest HIV facility is up to 13.7 hours. There are also areas in which no HIV facility is accessible by foot.

Residence of Client	Nearest HIV Facility	Average Distance in km	Average Distance in Hours by Walking
Taytay, Rizal	Cainta Reproductive Wellness - Social Hygiene Clinic	3.8	0.8
Los Baños, Laguna	Calamba Doctors Hospital	14.6	3.0
San Pablo, Laguna	San Pablo Social Hygiene Clinic	1.4	0.3
Sta. Rosa, Laguna	Ospital ng Biñan	8.3	1.7
Bay, Laguna	San Pablo Social Hygiene Clinic	20.1	4.2
	Calamba Doctors Hospital	20.9	4.2
Calamba City, Laguna	Calamba Doctors Hospital	5.1	1.0

Highlighted in blue are clients whose distance of residence to the nearest HIV facility is estimated at 1 hour by walking or longer.

Issues with Location of Treatment Hubs

- For PLHIVs in Regions 4-A, 4-B and 5, the nearest HIV facility is either somehow or too far. The estimated average time it will take to walk from their residence to the nearest HIV facility is up to 13.7 hours. There are also areas in which no HIV facility is accessible by foot.

Residence of Client	Nearest HIV Facility	Average Distance in km	Average Distance in Hours by Walking
Antipolo City, Rizal	Antipolo Social Hygiene Clinic	9.7	2.2
	Marikina City Satellite Treatment Hub	3.4	0.7
	Cainta Reproductive Wellness - Social Hygiene Clinic	7.3	1.5
Lucena City, Quezon	Quezon Medical Center	1.8	0.4
Cuyo, Palawan	No HIV facility reachable by foot		
Masbate City, Masbate	No HIV facility reachable by foot		

Highlighted in blue are clients whose distance of residence to the nearest HIV facility is estimated at 1 hour by walking or longer.

Issues with Location of Treatment Hubs

- For PLHIVs in Regions 6 and 8, the nearest HIV facility is too far. The estimated average time it will take to walk from their residence to the nearest HIV facility is up to 11.7 hours.

Residence of Client	Nearest HIV Facility	Average Distance in km	Average Distance in Hours by Walking
Hernani, Eastern Samar	Eastern Samar Provincial Hospital	58.2	11.7
Palo, Leyte	Eastern Visayas Regional Medical Center	11.4	2.7
Miagao, Iloilo	FPOP Iloilo	46.5	9.4
Bacolod City, Negros Occidental	Corazon Locsin Montelibano Memorial Regional Hospital	1.5	0.3
<u>Victorias City, Negros Occidental</u>	<u>Corazon Locsin Montelibano Memorial Regional Hospital</u>	<u>37.3</u>	<u>7.6</u>

Highlighted in blue are clients whose distance of residence to the nearest HIV facility is estimated at 1 hour by walking or longer.

Issues with Location of Treatment Hubs

- For PLHIVs in Region 7, the nearest HIV facility is somehow far, especially for those residing outside Cebu City. The average time it will take to walk from their residence to the nearest HIV facility is up to 9.4 hours.

Residence of Client	Nearest HIV Facility	Average Distance in km	Average Distance in Hours by Walking
Cebu City, Cebu	Cebu City Social Hygiene Clinic	3.3	0.7
	Vicente Sotto Memorial Medical Center	1.9	0.3
	Visayas Community Medical Center (Balay Malingkawasnon)	1.9	0.4
Moalboal, Cebu	Cebu Provincial Hospital - Carcar City	46.0	9.4
Minglanilla, Cebu	Talisay District Hospital	6.4	1.3
<u>Lapu-Lapu City, Cebu</u>	<u>Mandaue City Social Hygiene Clinic</u>	<u>9.9</u>	<u>2.1</u>

Highlighted in blue are clients whose distance of residence to the nearest HIV facility is estimated at 1 hour by walking or longer.

Issues with Location of Treatment Hubs

- For PLHIVs in Mindanao, the nearest HIV facility is too far. The average time it will take to walk from their residence to the nearest HIV facility is up to 21.2 hours.

Residence of Client	Nearest HIV Facility	Average Distance in km	Average Distance in Hours by Walking
<u>Dapitan, Zamboanga del Norte</u>	<u>Corazon C. Aquino Hospital</u>	<u>9.3</u>	<u>1.9</u>
Carmen, Davao del Norte	Davao Regional Medical Center	19.3	3.9
Midsayap, North Cotabato	Cotabato Regional and Medical Center	53.7	10.9
Surallah, South Cotabato	South Cotabato Provincial Hospital	26.4	5.3
Davao City	Davao Reproductive Health and Wellness Center	1.3	0.3
Digos, Davao del Sur	General Santos City Social Hygiene Clinic	85.8	17.6
Salay, Misamis Oriental	Northern Mindanao Medical Center	61.1	12.4
Butuan City, Agusan del Norte	Butuan Medical Center	5.7	1.2
Columbio, Sultan Kudarat	South Cotabato Provincial Hospital	96.4	21.2

Highlighted in blue are clients whose distance of residence to the nearest HIV facility is estimated at 1 hour by walking or longer.

Issues with **Checkpoints and Crossing Borders**

- Some PLHIVs have to go to a different city/municipality or province to go to the nearest HIV facility.
- Some PLHIVs are not comfortable disclosing their HIV status at checkpoints to be allowed to enter the area where their treatment hub is.
- Some PLHIVs are worried that people securing the checkpoints will not understand their health condition. Some are worried they might be discriminated against when they disclose their HIV status at checkpoints.

Issues with **Verification**

- Some PLHIVs do not have ARV booklet or confirmatory result which are being asked from them by their employer or treatment hub. This makes it difficult for them to access ARV refill.

Issues with **Stock of ARV Drugs and Other Medicines**

- No stock of Isoniazid Cotrimoxazole azitro and vitamins at Region 1 Medical Center
- No stock of Efavirenz at Las Piñas Social Hygiene Clinic.
- Some PLHIVs are reporting partial refills (being provided with one or two bottles, instead of the usual three bottles).
- Some PLHIVs are asking if stock of ARV drugs will be affected in case the period of enhanced community quarantine will be extended.

Issues with **Psychosocial Support**

- Some PLHIVs experience anxiety and depression, with no psychosocial support available.
- Across time, more respondents are reporting issues with psychosocial support during the period of enhanced community quarantine.

Issues with **Employment**

- One PLHIV reported that their employer, who knows their HIV status, told them that they won't help them with their expenses if they get diagnosed with COVID-19.
- Some PLHIVs report that they do not have enough income. Some of them have jobs, but their companies employ a “no work, no pay” policy.

Issues with **Financial Assistance**

- Some PLHIVs experience problem in paying for their PhilHealth contribution, given the employment issues some of them face.
- A person living with HIV who has a disability and is currently unemployed is requesting for financial assistance for their medicines.
- Some PLHIVs require financial assistance for delivery of ARV refills, food, and other essential needs.

Other Concerns

- Some PLHIVs want to know whether they are at a higher risk with COVID-19. Is HIV infection a pre-existing condition in relation to COVID-19? Is the recovery rate of PLHIVs the same with the general population?
- There are reports from PLHIVs that stock of certain ARV drugs in some treatment hubs is running low.
- Some PLHIVs are asking if it is possible to have their refill for two months, instead of one, when going to their treatment hub.
- Some PLHIVs who live alone and in places with no kitchens have no access to healthy food.
- PLHIVs who are OFWs are unsure where they can get treatment when they come home to the Philippines.
- One PLHIV reported that TMC i-REACT is not allowing them to have their ARV refill delivered through courier services.

Other Concerns

- There is a need for proper and concrete treatment and care plans for PLHIVs in a time of crisis or medical emergency.
- Some PLHIVs are under quarantine with people whom they are not comfortable disclosing their HIV status with.
- Some PLHIVs are reporting lack of access to condoms during the period of enhanced community quarantine.
- Some PLHIVs are not able to avail of laboratory services needed for their treatment, including CD4 count.

Recommendations

- Ensure that local government units are able to extend their transportation services to people living with HIV going to an HIV facility for ARV refill.
- Provide additional transportation/delivery assistance to patients whose nearest HIV facility are outside their province or those that are too far from their residence, such as facilities that are around 5 km or 1 hour by walking from their residence. Specific areas that need assistance are Regions 1, 2, 6, and 8, and Mindanao by providing transportation/delivery assistance.
- Coordinate with PNP and AFP to ensure that people living with HIV are allowed entry at checkpoints when going to an HIV facility for ARV refill. Moreover, DOH can provide guidelines to PNP and AFP to guarantee that privacy and rights of people living with HIV are respected at checkpoints. Additional assistance should be extended as well to young people living with HIV.

Recommendations

- Ensure that ARV medicines will be available across all HIV facilities despite the enhanced community quarantine being implemented.
- Extend accessible psychosocial support services to people living with HIV during the COVID-19 pandemic.
- Coordinate with DSWD regarding assistance needed by people living with HIV in the time of COVID-19, such as food, medicines, other essential supplies, and financial assistance, with particular attention given to women living with HIV and their specific needs.
- Disseminate information on HIV and COVID-19, FAQs for people living with HIV and accessing treatment in the time of COVID-19, and how to protect one's mental health during community quarantine.
- Have an explicit and detailed advisory or guidance note from PhilHealth that allows utilization of OHAT package to cover ARV delivery costs, in line with DOH's advisory.

Recommendations

- Develop and implement a more concrete treatment and care plan for PLHIVs during emergencies and crises, given the possibility of extended period of enhanced community quarantine.
- Ensure continued access to condoms for PLHIVs and key populations during the period of enhanced community quarantine.
- Assess the feasibility of providing more than 1-month worth of ARV medicines to PLHIVs upon their refill, to avoid frequent visit to HIV facilities or delivery, given the possibility of extended period of enhanced community quarantine.
- Strengthen existing information dissemination campaigns.



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