It’s a Terrible Time for COVID-19 to Strike HIV, STI and Hepatitis Programs

A survey of local health departments reveals concerning news—and a silver lining.

April 27, 2020 By Trent Straube

Amid the COVID-19 pandemic, local health departments across the nation are limiting or closing services related to HIV, hepatitis and sexually transmitted infections (STIs), according to findings of a recent survey. To make matters worse, the pandemic arrives at a challenging time for these services.

Fewer staff are available to work in the HIV, hepatitis and STI programs because they’re devoting their time to the COVID-19 response or because they’re following social distancing guidelines. Prevention, education and outreach programs are hardest hit, with many of them shuttered or suspended. Many local health care departments noted that they’re no longer starting clients on pre-exposure prophylaxis (PrEP), which prevents people from contracting HIV.

The COVID-19 pandemic has also caused many health departments to reduce services and hours and suspend walk-in services.

Those survey findings were reported in a blog post by the National Association of County & City Health Officials (NACCHO), which represents about 3,000 local health departments.

This is all happening as the nation faces historically high rates of STIs as well as the effects of the ongoing opioid epidemic, which itself increases the rate of infections such as HIV and hepatitis C. What’s more, a NACCHO press release notes, many health departments are still trying to recover from budget cuts and layoffs related to the 2008 recession.

Survey findings offered glimmers of good news. The press release spells out four ways health departments are meeting these challenges:

- Adopting telehealth services to offer screening, counseling, case management, partner services and other services via telephone or conferencing platforms, such as Zoom.

- Supporting an express STI testing model so that clients can get tested without having to see a

provider, limiting face-to-face contact to reduce the spread of COVID-19.

- Utilizing syndromic management and presumptive treatment of STI cases, as detailed in a recent Dear Colleague letter from the Centers for Disease Control and Prevention.

- Providing syringe services by phone, enabling clients to place orders and pick up syringes with limited contact; increasing the number of syringes distributed per visit to limit visits to the program; and possibly mailing naloxone, the overdose reversal medication, to clients.

In related news, see "National Coalition Forms to Buck a 'Major Public Health Crisis'" and "Need to Tell Someone to Get Tested for an STI? TellYourPartner.org allows you to anonymously relay the message via text or email."

In other COVID-19 news, keep in mind that novel coronavirus guidance and concerns for unique populations may vary. For example, see "3 Reasons COVID-19 Poses a Higher Risk for the LGBTQ Population," "UPDATED: What People With Liver Disease Need to Know About the New Coronavirus" and similar articles regarding people with HIV and people with cancer.

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