

Battling against the Epidemic of HIV Infection Ensuring that Everybody Counts

Shrivastava SR^{1,2} and Shrivastava PS²

¹Member of the Medical Education Unit and Institute Research Council

^{1,2}Department of Community Medicine, Shri Sathya Sai Medical College & Research Institute, Sri Balaji Vidyapeeth (SBV)–Deemed to be University, Chengalpet District, Tamil Nadu – 603108, India

Corresponding Author*

Saurabh RamBihariLal Shrivastava,
Department of Community Medicine,
Shri Sathya Sai Medical College & Research Institute,
Sri Balaji Vidyapeeth (SBV)–Deemed to be University,
Chengalpet District, Tamil Nadu- 603108, India
E-mail: drshrishri2008@gmail.com
Tel: +91-9884227224

Copyright: 2020 Shrivastava SR, et al. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

Received date: February 12, 2020; **Accepted date:** March 17, 2020;
Published date: March 24, 2020

Abstract

Since the very much start of the HIV epidemic, the disease has remained a global public health concern. There is no doubt that a wide range of interventions have been done, which has resulted in a decline in the number of people infected or died because of the disease. Nevertheless, the gained successes are quite misleading as a significant amount of disparity and challenges have not been addressed yet. Acknowledging the global mission to attain universal health coverage, social stigma associated with the disease, and the reluctance of people to avail health care due to various reasons, the need is to build a response centered on the preservation of human rights, maintenance of equity and involvement of the local community. To conclude, in order to bring about an end to the epidemic, it is no longer an issue to provide appropriate health services to those who need them, but the idea should be to reach everybody through strengthening of the health sector, reforms in the policies, and involvement of all the concerned sectors.

Keywords: HIV . Vulnerable population . Stigma

Introduction

Since the very much start of the HIV epidemic, the disease has remained a global public health concern, and it is predominantly because of the fact that more than 35 million people have lost their lives till date across the world [1]. Further, close to 37 million people are living with the disease till the end of last year, while almost 2 million new cases have also been detected [1]. Despite the fact that the disease can infect anyone and everyone regardless of the financial status or other socio-demographic attributes, it is quite common among vulnerable & marginalized sections of the society like men who have sex with men, intravenous drug abusers, migrants, prisoners, commercial sex workers, truckers, transgender, etc [1,2].

Ground Reality

There is no doubt that a wide range of interventions have been done and a simultaneous strengthening of the prevention & control activities has also been attained, which has resulted in a decline in the number of people infected or died because of the disease [1]. Nevertheless, the gained successes are quite misleading as a significant amount of disparity and challenges have not been addressed yet [3]. It is quite alarming that despite the implementation of many targeted measures & sustained financial support, most of the marginalized population groups are still left behind,

and in addition, most of the vulnerable population groups are still deprived of the essential health services [3-5]. Further, it is extremely difficult to digest the reasons for some population groups being more vulnerable to infection or the reasons which are preventing adolescent boys to avail infection related care [4].

Social Perspective

It is a fact that despite the disease being existing for more than 3 decades and lot of activities have been done across heterogeneous settings to improve the knowledge of the people about the disease, still there is a significant amount of stigma and discrimination linked with the disease [6]. This kind of social discrimination has complicated the entire dynamics of the disease and there is lot of reluctance from the general population as well as high risk group of people to avail health care [7]. In-fact, it won't be wrong to put in record that the health seeking behavior of majority of the high-risk population groups towards any of the services (viz. diagnostic, treatment, etc.) provide by the health sector has been extremely poor [6,7]. There is an immense need to devise customized strategies and involve community-level workers to improve the existing scenario [7].

HIV Self-Testing

HIV Self-testing has been advocated as a crucial and an innovative approach to neutralize the component of social determinants which act as a significant barrier and prevents people to avail diagnostic services [8]. In this approach, the individual can perform the test on their own without coming to the health centers and thus can come to know about their HIV status [8]. This not only improves the indicator that how much proportion of people is aware about their status, but also provides an opportunity to not be victimized on the social grounds [9]. In-fact, encouraging results have been obtained in all the settings, wherein HIV self-testing has been adopted [8,9].

Targeting the Needs of the Vulnerable

Acknowledging the global mission to attain universal health coverage, social stigma associated with the disease, and the reluctance of people to avail health care due to various reasons, the need is to build a response centered on the preservation of human rights, maintenance of equity and involvement of the local community [4]. The global stakeholders have tried to involve the communities in a meaningful way to ensure that the implemented measures reach to those who need them most [5]. It is anticipated that it will simultaneously aid in improving the uptake of the available services, accomplishment of better & equitable coverage, and making a long-term impact [4].

Moreover, there is an indispensable need to digest the fact that everyone counts if we plan to eliminate the disease and attain universal health coverage [4]. This means that the available health services should be customized to meet the needs of the affected & at-risk population groups [4]. However, for all this to happen, the health stakeholders should implement a zero-tolerance policy to discourage stigma & discrimination in health set-up [4]. In addition, the provided services should be quality-assured to ensure that the beneficiaries continue to avail care [5]. Further, an effective response should not only address the needs about the infection, but even complete needs of people, and this can be achieved by integration of the disease-related services with other national health programs [2-4].

Conclusion

To conclude, in order to bring about an end to the epidemic, it is no longer an issue to provide appropriate health services to those who need them, but the idea should be to reach everybody through strengthening of the health sector, reforms in the policies, and involvement of all the concerned sectors.

References

1. World Health Organization (2020) HIV/AIDS - Key Facts. Available from: <http://who.int/mediacentre/factsheets/fs360/en>.
2. Shrivastava S.R., et al., "Addressing the public health challenge of HIV infection among the vulnerable population group of transgender: An urgent global need. *Ann Trop Med Public Health* 10.2 (2017): 457-458.
3. Shrivastava S.R., et al., Challenges in HIV care: "Accelerating the pace of HIV-related services to accomplish the set global targets". *Ann Trop Med Public Health* 10.3 (2017): 509-10.
4. Ghebreyesus T.A. World AIDS Day 2017-Everybody counts; 2017. Available from: <http://who.int/mediacentre/news/statements/2017/world-aids-day/en/>.
5. Shrivastava S.R., et al., "How can we improve the universal uptake of HIV testing services? World Health Organization". *Int J Prev Med* 7.13 (2016): 13.
6. Brown L.B., et al., "The influence of social networks on antiretroviral therapy initiation among HIV-infected antiretroviral therapy-naive youth in Rural Kenya and Uganda". *J Acquir Immune Defic Syndr* 83.1 (2020): 9-15.
7. Kerrigan D., et al. "Assessing and addressing social determinants of HIV among female sex workers in the Dominican Republic and Tanzania through community empowerment-based responses". *Curr HIV/AIDS Rep* 17.1 (2020): 88-96.
8. Giguere R., et al., "Use of HIV self-testing kits to screen clients among transgender female sex workers in New York and Puerto Rico". *AIDS Behav* 24.2 (2020): 506-15.
9. Fan S., et al., "Effect of availability of HIV self-testing on HIV testing frequency among men who have sex with men attending university in China (UniTest): protocol of a stepped-wedge randomized controlled trial". *BMC Infect Dis* 20.1 (2020): 149.