



Public Health Management and Service delivery during the COVID-19 Pandemic for HIV/AIDS patients: A case study of Malakand Davison, Khyber Pakhtunkhwa, Pakistan

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Abstract

During the COVID-19 pandemic, individuals already facing HIV/AIDS have experienced new and increased difficulties in receiving proper healthcare. This review looks at the ways COVID-19 interfered with HIV/AIDS health care, led to mental health problems and increased stigma for patients. It calls for finding new ways to ensure HIV/AIDS patients can continue to receive care services during the pandemic. The study also stresses the need for integrated testing and treatment services for COVID-19 and HIV, as well as suitable plans to assist those at high risk. Based on our review, policymakers, healthcare specialists and community groups may develop better solutions to assist HIV/AIDS patients affected by the pandemic.

Keywords: Pandemic, Organizations, Implications, Patients, Treatment

Introduction

Since the start of the COVID-19 pandemic, there have been many cases and thousands of deaths around the world (Liu et al., 2020). The country of Pakistan has experienced significant increases in COVID-19 cases (World Health Organization Report, 2020; Tanne et al., 2020). COVID-19 has made these gaps among different sections of society in Pakistan even wider (Garnier-Crussard et al., 2020; World Health Organization, 2020b). Individuals living with HIV/AIDS are more likely to suffer serious complications because of COVID-19 (Heymann & Shindo, 2020). Since people taking ART have stronger immune systems, those who are not could be at greater danger of getting COVID-19 (Cooper et al., 2020). Because of restricted services, some patients with HIV/AIDS have suffered even greater hardship (Gervasoni et al., 2020; Lodgell & Kuchukhidze, 2020). Because of the pandemic, HIV/AIDS patients are feeling more anxious and stressed which may make them rely on harmful strategies (Ridgway et al., 2020). Because people have had to stay apart, they are feeling more lonely which has influenced depressive symptoms and impacted their overall health and treatment compliance (Blashill et al., 2011). People infected with HIV and AIDS

who become sick with COVID-19 are stigmatized and discriminated against, instead of being assisted and protected as expected (Saeed et al., 2020).

In 73 countries, due to the pandemic, antiretroviral (ARV) medicines are in short supply. Twenty-four of these countries report serious problems or disruptions in their supply of ARVs (WHO, 2020a). Due to the COVID-19 pandemic, many HIV/AIDS patients now struggle to see treatment providers and talk to people about their mental and social challenges. This study seeks to assess how COVID-19 affects HIV/AIDS patients in Malakand Division and help develop better policies to support them. So, the pandemic has led to major problems in Pakistan, making socio-economic inequalities worse. Compared to others, HIV/AIDS patients are more likely to get sick with COVID-19 since their immune systems are weak. Because of halts in medical treatment, reduced access to some appointments and physical distancing, people are experiencing more worry and could turn to harmful ways of coping with it. Patients dealing with both HIV/AIDS and COVID-19 are stigmatized and discriminated against and at the same time, shortages of antiretroviral drugs have occurred during this pandemic. HIV/AIDS patients now find it much harder to get anti-retroviral treatment and psychological assistance, making it clear that the response and support systems need additional resources.

Problem Statement:

So, the pandemic has led to major problems in Pakistan, making socio-economic inequalities worse. Compared to others, HIV/AIDS patients are more likely to get sick with COVID-19 since their immune systems are weak. Because of halts in medical treatment, reduced access to some appointments and physical distancing, people are experiencing more worry and could turn to harmful ways of coping with it. Patients dealing with both HIV/AIDS and COVID-19 are stigmatized and discriminated against and at the same time, shortages of antiretroviral drugs have occurred during this pandemic. HIV/AIDS patients now find it much harder to get anti-retroviral treatment and psychological assistance, making it clear that the response and support systems need additional resources.

Major objectives:

1. To assess how COVID-19 has affected those with HIV/AIDS living in Malakand Division
2. Looking into how COVID-19 is affecting the mental and social welfare of HIV/AIDS patients.

This type of study used the library approach and the method of content analysis. Many studies were analyzed and in the end, I chose 25 that were related to COVID-19 and HIV/AIDS treatment for review. Their abstracts were examined to decide if they were suitable for the review. In this study, researchers looked for factors that could make HIV/AIDS patients more likely to contract COVID-19 and noticed an impact on their treatment from the coronavirus. It was decided to only include studies that met the study's objectives, covered the study period of 2010-2022 and fitted specific inclusion requirements. Most of the selected publications appeared in scientific journals recognized by African Index Medicus, Google Scholar, Web of Science, EBSCO, SSA and SCOPUS. An organized way of researching was chosen so the research findings matched the expected outcomes.

A study of the data

As a result of COVID-19, HIV/AIDS patients now deal with even greater health issues and also face new problems. Having a weaker immune system due to treatment makes these patients sensitive to COVID-19. Because of the pandemic, there have been clinic closures, different clinic schedules and lack of healthcare workers for people needing HIV treatment. The disturbance often leaves HIV/AIDS patients without needed treatment which can be very harmful. Many countries face greater difficulties in treating HIV because of a lack of antiretroviral medications. Officials from the World Health Organization have reported that a six-month break in antiretroviral therapy would cause many additional deaths from AIDS. Because of the measures put in place to prevent the spread of the virus, patients have found it difficult to keep up with their treatment plans and visit clinics regularly.

There has been an increase in stigma and discrimination for HIV/AIDS patients living with COVID-19. As a result of the pandemic, many of these patients have experienced depression, anxiety and feelings that they are not worth anything. Because they fear getting COVID-19, people are experiencing more stress and anxiety which may reduce their immune system's capacity. Some people use drugs to cope, but this behavior can be harmful for their health. Because of the pandemic, it is now more important to develop new solutions for HIV/AIDS patients. Online health visits, postal testing and programs in the community can be used to keep helping HIV patients where they live. Even so, for patients to have access to all useful solutions, careful planning and carrying them out effectively are important. All in all, the pandemic has caused HIV/AIDS patients to deal with extra health difficulties and face new challenges. We must handle these issues and make sure that these patients continue to have access to treatment and support services. Since the needs and challenges of HIV/AIDS patients are unique and different during the pandemic, this problem needs an all-encompassing strategy.

Conclusions and Recommendations

Due to COVID-19, HIV/AIDS patients world over have faced tough economic conditions and difficulties getting proper care and treatment. The pandemic has stood in the way of people accessing HIV prevention, testing and support services. HIV/AIDS patients have been badly affected by the strict precautions of quarantine, lockdown of economic activity, restrictions on travel and giving attention only to life-threatening situations. The researchers found that individuals handling both HIV and COVID-19 suffer from negative attitudes and mistreatment in their families, during hospital visits and among the general public. Due to the pandemic, some HIV treatment clinics now operate fewer hours, have fewer counselors and support workers available and, in some cases, treatment becomes more infrequent. Since the pandemic, it is necessary to distribute resources, offer free treatment and come up with approaches to assist HIV/AIDS patients. All district and local clinics should offer services for both COVID-19 and HIV testing and treatment.

Essential authorities such as health departments, NGOs and health administrations, should take measures to prevent continual interruptions in HIV/AIDS patient treatment. It is necessary to ensure that hospitals are open, healthcare professionals are available, medicine is accessible and test centers function properly while COVID-19 is spreading. To sum up, the pandemic has revealed that HIV/AIDS patients require help from many different angles to stay healthy and cope with social issues. When patients' needs are emphasized, they continue to get the support and care they

need and when testing for both COVID-19 and HIV is done together, the risk to these individuals is reduced and their health can improve further.

Recommendations:

1. Insure that people with HIV have continuous access to treatment: Try not to make treatment stop and offer support with healthcare, medicines, testing and providing hours of operation to patients through COVID-19.
2. Coordinate COVID-19 and HIV treatment and testing at district and local hospitals to enhance the health of HIV/AIDS patients.
3. Use funds properly: Fund HIV/AIDS care by supporting patients through medicine, screening and necessary support.
4. Setup effective ways for reaching HIV/AIDS patients and provide them with the help and services needed, so their situation does not become more challenging as the pandemic continues.

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