HIV/AIDS in an era of COVID-19: The challenge

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Is this our battle?

• Why should we be paying attention to the COVID-19 pandemic as we struggle to end HIV/AIDS in NY State?

• The obvious answers: anyone with a compromised immune system is vulnerable to any infection, particularly COVID-19
• Secondly, a substantial portion of folks living with HIV are over 50 years old, placing them in a high-risk category for coronavirus infection because of their age, not necessarily HIV status
• Thirdly, access to health care is more complicated than ever with health care facilities struggling to manage COVID-19
What are our biggest challenges?

• Stigma!!!!... and the hefty exposure to conspiracy theories directed at communities of color that raise doubts about the origins of COVID-19

• ...as well as doubts about the trustworthiness of any communication coming from government about anything, but most certainly the management of COVID-19
Why worry about conspiracy theories?

• At this stage of the nation’s history, science is just another voice in the room. Even wildly improbable explanations for COVID-19 are treated as credible by many people.

• Pronouncements coming from scientists, doctors, or public health researchers are treated as fake news.
Crisis of trust

• Communities of color in the US have a long history of mistrust directed at scientists, doctors, and health care institutions

• Management of the COVID-19 pandemic has only increased levels of mistrust in our neighborhoods
Black adults have less positive views of medical scientists than Hispanic and white adults

% of U.S. adults who ...

<table>
<thead>
<tr>
<th>Have a great deal of confidence in medical scientists to act in the best interests of the public</th>
<th>Black</th>
<th>White</th>
<th>Hispanic</th>
</tr>
</thead>
<tbody>
<tr>
<td>U.S. adults</td>
<td>35%</td>
<td>45%</td>
<td>43%</td>
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<tr>
<th>Have a mostly positive view of medical research scientists</th>
<th>53%</th>
<th>67%</th>
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<tbody>
<tr>
<td>U.S. adults</td>
<td></td>
<td>66</td>
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<tr>
<th>Have a mostly positive view of medical doctors</th>
<th>61%</th>
<th>68%</th>
<th>75%</th>
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<tbody>
<tr>
<td>U.S. adults</td>
<td></td>
<td>72</td>
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Note: Whites and blacks include those who report being only one race and are non-Hispanic. Hispanics are of any race.


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Black Americans are more skeptical of experimental treatments, potential COVID-19 vaccine than Hispanic and white adults

% of U.S. adults who say ...

Benefits outweigh the risks of allowing more access to experimental treatments before completion of clinical trials

- Black: 41%
- Hispanic: 53%
- White: 63%
- U.S. adults: 59%

They would definitely/probably get a COVID-19 vaccine if it were available today

- Black: 54%
- Hispanic: 74%
- White: 74%
- U.S. adults: 72%

Note: Whites and blacks include those who report being only one race and are non-Hispanic. Hispanics are of any race.

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This is our fight

• If we are to control the pandemic, we have to create a foundation of trust that will assist folks to hear and act upon recommendations that come from public health

• Veterans of HIV/AIDS like us have some experience working through the theories to assist folks to see the truth.
COVID-19 and excess mortality

• The pandemic response has put care for chronic conditions such as HIV on hold.

• There is some fear that elevated levels of preventable, excess mortality will result from our being so swamped with COVID-19 care that we neglect the health of chronic diseases patients and most importantly us.
From late January to early October 2020, the U.S. had 299,000 more deaths than the typical number during the same period in previous years (excess deaths).

At least 2 out of 3 of these excess deaths were from COVID-19.

The largest percentage increases were among people who were Hispanic or Latino and adults aged 25–44.
Concluding thoughts

• We must see the fight against COVID-19 as our fight. It is in the best interest of everyone in this conference to work as hard to combat this pandemic as we have worked up until now to eliminate HIV/AIDS in New York.

• One fact is quite evident: we can’t win the fight against HIV unless we win in our struggles with COVID.