

## Resolution on the Inclusion of Mental Health and Psychosocial Support Services in HIV/AIDS Programming

An official statement from the Global Alliance for Behavioral Health and Social Justice (formerly the American Orthopsychiatric Association)

The Global Alliance for Behavioral Health and Social Justice is committed to applying principles of social justice to policy development, community action, and systems-change pertaining to population wellbeing. Forty years after the first cases of HIV were reported, substantial evidence demonstrates the prevalence of HIV is significantly higher among adults with serious mental illness. As a stakeholder attending the United Nations High-Level Meeting (HLM) on HIV/AIDS (June 8-10, 2021), the Global Alliance stressed the need to address this global disparity by infusing equitable and appropriate community-based mental health and psychosocial services (MHPSS) into multiscale HIV/AIDS services across low-, middle-and high-resourced settings.



We know that:

- Persons living with HIV (PLWH) have double the estimated rate of depression compared to the overall population.
- Persons living with mental health disorders have a higher likelihood of co-occurring health concerns such as HIV, which can reduce lifespan by as much as 10-20 years.
- The COVID-19 pandemic has negatively impacted mental health among PLWH by disrupting medication uptake and HIV care, increasing risk of status exposure, and heightening HIV stigma.

The interactions among HIV, COVID-19, and mental health can be viewed as "syndemic," or synergistic epidemics, and require urgent global attention. To address these concerns, we urge accelerated efforts toward universal health coverage that ensures strong and comprehensive primary health care and social services systems that are fundamentally grounded in human rights. This coverage must:

- Be people-centered, publicly funded, resourced, and fully integrated;
- Integrate mental health care, resources, and psychosocial support services into HIV screening, care, and treatment; and
- Incorporate accountability measures to stakeholders with lived experience, including culturally relevant systems-level policy that ensures comprehensive, equitable, evidence-based mental health promotion and assessment.

To support the implementation of these recommendations, the Global Alliance strongly urges Member States to commit to the development of a skilled, supervised, and adequately resourced MHPSS workforce.

According to the most recent UNAIDS Global AIDS Strategy, enhanced integrated health and social services would include community-engaged peer support, anti-stigma and anti-discriminatory policies, and linkages between HIV services and support services for other communicable and noncommunicable diseases (NCDs), including mental health conditions. As noted by UNAIDS, the full integration of MHPSS across the life course into HIV care settings will both strengthen HIV prevention and care outcomes and improve access to mental health care and support. The Global Alliance supports the proposed target of reaching 90% of PLWH with access to these services by 2025 and calls upon Member States to integrate mental health screening and care into HIV research, programs, and services, with a commitment to monitoring and evaluating indicators that are specific to mental health and well-being.

Additional Resources	Relevant Articles from the American
Domion D II Stigratt M I Navyor N Dakking D N Dala A	Journal of Orthopsychiatry
Remien, R. H., Stirratt, M. J., Nguyen, N., Robbins, R. N., Pala, A.	Colling D.V. Ellington K.C. was Ungen U
N., & Mellins, C. A. (2019). Mental health and HIV/AIDS: The need	Collins, P. Y., Elkington, K. S., von Unger, H.,
for an integrated response. <i>AIDS</i> , <i>33(9)</i> , 1411–1420.	Sweetland, A., Wright, E. R., & Zybert, P. A.
	(2008). Relationship of stigma to HIV risk
Shiau, S., Krause, K.D., Valera, P., et al (2020). The burden of	among women with mental
COVID-19 in people living with HIV: A syndemic perspective. <i>AIDS</i>	illness. American Journal of Orthopsychiatry,
Behavior 24, 2244–2249.	<i>78</i> (4), 498–506.
	https://doi.org/10.1037/a0014581
National Institutes of Mental Health:	
https://www.nimh.nih.gov/health/topics/hiv-aids/	Neff, J. A., Amodei, N., Martinez, C., Jr., &
	Ingmundson, P. (1999). HIV/AIDS mental
Movement for Global Mental Health:	health training for health care providers: An
http://www.globalmentalhealth.org/	evaluation of three models. American
	Journal of Orthopsychiatry, 69(2), 240–246.
AIDS United:	https://doi.org/10.1037/h0080425
https://www.aidsunited.org/	
	Williams, E., Donnelly, J., & Proesher, E.
Impact of Mental Illness on Those Living With HIV:	(2001). An HIV/AIDS risk-reduction program
https://hab.hrsa.gov/sites/default/files/hab/Publications/careac	for mentally ill hospital patients: Assessing
tionnewsletter/mentalhealth.pdf	readiness for change. American Journal of
	Orthopsychiatry, 71(3), 385–389.
UNAIDS (2020):	https://doi.org/10.1037/0002-
2020 Global AIDS Update — Seizing the moment — Tackling	9432.71.3.385
entrenched inequalities to end epidemics   UNAIDS	<u>9452.71.5.365</u>
UNAIDS (2021):	
End Inequalities. End AIDS. Global AIDS Strategy 2021-2026	
UNAIDS	
How You Can Help	
• Join our Global Mental Health Task Force. Learn more at <u>www.bhjustice.org/global-mental-health</u> .	
• Raise awareness! Show that you are #IntoMentalHealth or willing to #SpeakOutHIV on social media and help	
#StopTheStigma.	

- Donate to an organization that advocates for or provides mental health and HIV/AIDS-related services.
- Join an international coalition focused on mental health or HIV/AIDS, such as the Movement for Global Mental Health or AIDS United.

Principally drafted by Surasya Guduru and Evelyn P. Tomaszewski with contributions from Erica L. Hamilton and Gita Jaffe.