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Background: The 2019 pandemic of the coronavirus disease (COVID-19) was found to have a negative impact on vulnerable people, including people living with HIV (PLHIV). This study aimed to investigate the mental health among PLHIV co-infected with SARS-CoV-2 in France.

Methods: COVIDHIV is a cohort of PLHIV co-infected with SARS-CoV-2 followed-up in France. Socio-demographic, clinical data and those on mental health were collected. The depression and anxiety symptoms, and post-traumatic stress disorder (PTSD) were assessed by the Hospital Anxiety and Depression Scale (HADS) and PTSD Checklist (specific version) (PCL-S), respectively. Multivariable logistic regression analysis was performed to identify factors associated with mental health outcomes at the baseline.

Results: A total of 397 participants were included, with a mean age (\pm SD) of 52 \pm 12.0 years. About two-thirds of the participants (64.0%) were male, 61% were employed and half of them lived in a couple. Rates of mental health symptoms were 22.6% for depression, 34.2% for anxiety, 53.9% for insomnia, and 12.7% for PTSD. In multivariable regression adjusted for age and duration between COVID-19 confirmation and enrolment, female gender (adjusted odds ratio (aOR) = 1.95, 95% CI: 1.13-3.38), being professionally active (aOR = 0.52, 95% CI 0.30-0.90), fatigue (aOR = 3.17, 95% CI 1.75-5.75), and cannabis use (aOR = 2.73, 95% CI 1.03-7.26) were associated with anxiety; being professionally active (aOR = 0.32, 95% CI 0.18-0.59) and fatigue (aOR = 2.04, 95% CI 1.07-3.88) were associated with depression; and fatigue (aOR = 3.15, 95% CI 1.24-7.98) and self-perceived as vulnerable to COVID-19 (aOR = 2.16, 95% CI 1.03-4.52) were found as associated factors for PTSD.

Conclusions: This study highlighted the high prevalence of mental health outcomes at the baseline, and these symptoms should be part of the management of PLHIV with SARS-CoV-2.

EPLBD07

The COVID-19 health crisis has disproportionately impacted sex workers compared to other key populations: preliminary results from the multi-country community-based EPIC research program

Community-based EPIC research program N. Lorente^{1,2,3}, <u>R.M. Delabre¹</u>, L. Riegel¹, C. Folch^{2,3}, O. Apffel Font^{1,4}, G. White^{5,6}, J. Castro Avila¹, R. Diagne⁶, O. Bourhaba^{7,6}, L. Kretzer^{8,6}, M. Magassouba^{9,6}, J.M. Mutima^{10,6}, E.A. Kambire^{11,6}, G. Girard¹², A. Velter¹³, C. Lacoux^{14,1}, T. Cerveau⁶, A. Ben Moussa^{7,6}, R. Freitas^{15,1}, L. Sagaon-Teyssier^{12,16}, H. Mendoza^{17,1}, B. Spire¹², I. Aristegui^{18,1}, D. Rojas Castro^{1,12}, EPIC study group ¹Coalition PLUS, Community- based Research Laboratory, Pantin, France, ²Centre d'Estudis Epidemiològics sobre les Infeccions de Transmissió Sexual i Sida de Catalunya (CEEISCAT), Departament de Salut, Generalitat de Catalunya, Badalona, Spain, ³Centro de Investigación Biomédica en Red de Epidemiología y Salud Pública (CIBERESP), Madrid, Spain, ⁴Coalition des organismes communautaires québécois de lutte contre le sida (COCQ-SIDA), Montréal, Canada, ⁵PILS, Saint-Louis, Mauritius, ⁶Coalition PLUS, Community- based Research Laboratory, Dakar,

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Background: To describe the impact of the Covid-19 health crisis on specific key populations (KPs): people living with HIV (PLHIV), sex workers (SWs), men who have sex with men (MSM), and people who use drugs (PWUD), in 27 countries.

Methods: Coalition PLUS, an international network of communitybased organisations fighting against HIV and hepatitis, initiated the multi-country and community-based research program EPIC to document the impact of the Covid-19 health crisis on KPs and community health workers. Quantitative data were collected among N=10583 respondents from KPs, between June 2020 and March 2022, in 28 countries, mainly from Africa, Latin America, and Europe. We present preliminary data comparing PLHIV (n=3932), PWUD (n=1383), MSM (n=2965) and SWs (n=2303), using Chi-square tests.

Results: Median[IQR] age of respondents was 32[26-41], 39% selfidentified as female, 55% male, 6% transgender person. Overall, 16% of foreign-born respondents were undocumented (22% and 25% in PWUD and SWs, respectively, vs. ≤12% in other KPs; p<0.001), and 28% were in unstable housing (60% in PWUD vs. ≤26% in other KPs). The negative impact of the crisis on quality of life was more often reported in SWs and PLHIV (48% and 47%, respectively) than in other KPs (≤39%, p<0.001). SWs also reported more often: a deterioration of their financial situation (85% vs. ≤75% in other KPs; p<0.001) and a negative impact on their personal and professional lives (83% and 84%, respectively, vs. ≤74% and ≤73%, respectively, in other KPs; p<0.001) since the beginning of the health crisis. Having asked/received support from the organisation that implemented EPIC in their country was less often reported in SWs (36%) than in other KPs (>46%, p<0.001). A significant proportion of SWs reported they felt more at risk of HIV infection with clients and nonclients (28% and 23%, respectively), than before the crisis.

Conclusions: This preliminary analysis highlights the disproportionate impact of the COVID-19 health crisis on SWs compared to other KPs, although all were highly affected by the health crisis. Deeper analyses are needed to identify possible levers for community health and other health workers to better support KPs in time of health crisis, and especially SWs.

EPLBD08

Limited awareness of HIV status hinders uptake of treatment among female sex workers and sexually exploited adolescents in Wau and Yambio, South Sudan

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