



Outline



- What is U=U?
- The U=U Campaign
- U.S. Government Support
- Communicating about U=U
- U=U Worldwide and in the U.S.
- U=U in Ending the HIV Epidemic
- Q&A







Undetectable = Untransmittable

People living with HIV who are on treatment and have an undetectable viral load cannot transmit HIV to sexual partners.





How Do We Know U=U?

Source: Dr. Sarah Calabrese

Study	Enrolled Sample	Study Design		Number of New HIV Infections		
			Number of Condomless Sex Acts	Total	Phylogenetic Illy Linked	Phylogenetically Linked When HIV+ Partner Stably Virally Suppressed
HPTN 052 Cohen et al., 2016	1,763 serodifferent couples • 98% male-female couples	2-arm trial with HIV+ partner randomized to early or delayed ART	-	78 • 19 in early- ART group • 59 in delayed- ART group	46 • 3 in early- ART group • 43 in delaye ART group	0
PARTNER1 Rodger et al., 2016	1,166 serodifferent couples • 888 in analytic subset	Observational study	55,193 • 34,214 among	11	0	0
	Sex without c	condom	าร > 144	,000	times	
Opposites Attract Bavinton et al., 2018	358 serodifferent male-male couples	Observational study	12,447 • counted when HIV+ partner virally suppressed and HIV-partner not on PrEP	3	0	0
PARTNER2 Rodger et al., 2019	972 serodifferent male-male couples	Observational study	76,991	15	0	0



Why is U=U a Game Changer?



Transforms social, sexual, & reproductive lives of PLWH and frees them from the shame and fear of transmitting HIV



Dismantles HIV stigma



Reduces anxiety associated with HIV testing and adds an incentive to start and stay on treatment and in care to stay healthy



Provides a strong public health argument for increasing access and removes barriers to treatment and care (The Third U = Universal)





The basics:







< 200 copies/ml

Synonymous with viral suppression

U=U is about sex

Not breastfeeding or needle sharing

U=U only prevents **HIV**

Not other STIs

HIV disclosure laws

U=U might not be an exemption

V≠V

Viral load does not equal Value



Advocacy – The 3rd U: Universal

We demand access to treatment, care, and services to ensure everyone can get to U=U, in order to:

Save lives of people living with HIV

"Personal health"



Prevent new transmissions

"Public health"

End the HIV Epidemic



U=U Public Health Argument

Improving access and removing barriers to treatment, care & services:

1. Improves the well-being of people living with HIV



2. Eliminates new HIV transmissions



The U=U Campaign





A Defining Moment in History





A Defining Mome

1996

2016







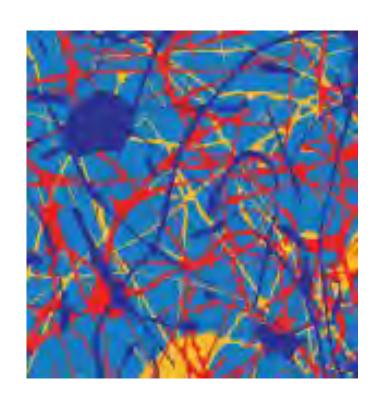
A Defining Moment in History

2016





Why Did We Need the U=U Campaign?



- Lack of access to accurate information
- Lack of expertise, authority, or disposition to Stawn cenclusies and heaggregate as rech
- Paternalism, bias, prejudice, and stigma
- Resistance to change



Why Did We Need the U=U Campaign?





Bringing Science to the People Jan to July 2016











July 2016

Partners







Bringing Science to the People Jan to July 2016











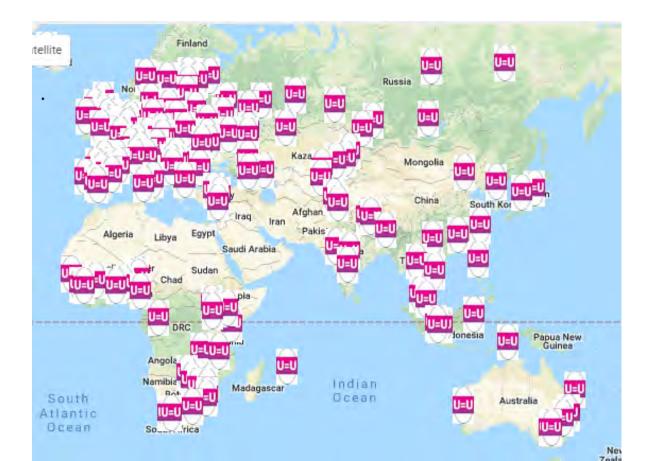


U=U Campaign

Argentina · Armenia · Australia · Austria · Azerbaijan Bahamas · Bangladesh · Belarus · Belgium · Bermuda Brazil · Bulgaria · Cambodia · Cameroon · Canada · Chile China · Colombia · Côte d'Ivoire · Croatia · Cyprus Czech Republic · Denmark

Democratic Republic of the Congo · Egypt · El Salvador England · Estonia · Finland · France · Georgia · Germany Ghana · Greece · Guatemala · Guinée · Guyana · Haiti Hong Kong · Hungary · Iceland · India · Indonesia · Ireland Israel · Italy · Japan · Kazakhstan · Kenya · Kosovo Kyrgyzstan · Latvia · Lebanon · Liberia · Macedonia Malawi · Malaysia · Mauritius · Mexico · Moldova · Monaco Montenegro · Nepal · The Netherlands · New Zealand Nigeria · Northern Ireland · Norway · Pakistan · Panama Peru · The Philippines · Poland · Portugal · Romania Russia · Scotland · Serbia · Singapore · Slovenia South Africa · South Korea · Spain · Swaziland · Sweden $Switzerland \cdot Taiwan \cdot Tajikistan \cdot Tanzania \cdot Thailand$ Trinidad & Tobago · Tunisia · Turkey · Uganda · Ukraine United States of America · Uzbekistan · Venezuela Vietnam · Zambia · Zimbabwe

960+ partners from 101 countries



U=U public health jurisdictions



U.S. State Health Departments

- 1. Arizona
- 2. California
- 3. Connecticut
- 4. Hawaii
- 5. Illinois
- 6. Indiana
- 7. Iowa
- 8. Louisiana
- 9. Michigan
- 10. Minnesota
- 11. New Jersey
- 12. New Mexico
- 13. New York
- 14. North Carolina
- 15. Oregon
- 16. Pennsylvania
- 17. Rhode Island
- 18. Tennessee
- 19. Washington

Municipalities

- 1. Adams County Public Health Department (Illinois)
- 2. Alameda County Public Health Department (California)
- 3. Baltimore City Health Department (Maryland)
- 4. Baton Rouge (Louisiana)
- 5. Champaign-Urbana Public Health District (Illinois)
- 6. Chicago Dept. of Public Health (Illinois)
- 7. Cleveland Dept. of Public Health (Ohio)
- 8. Columbus Public Health (Ohio)
- 9. Cuyahoga County Board of Health (Ohio)
- 10. Denver Public Health (Colorado)
- 11. Detroit Health Department (Michigan)
- 12. Florida Department of Health Hillsborough (Florida)
- 13. Florida Department of Health Okaloosa County (Florida)
- 14. Genesee County Health Department (Michigan)
- 15. Hennepin County Public Health (Minnesota)
- 16. Houston Health Dept. (Texas)
- 17. Jefferson County Dept. of Health (Alabama)
- 18. Kent County Health Department (Michigan)
- 19. Kitsap Public Health District (Washington)
- 20.LMAS District Health Department (Michigan)
- 21. Long Beach HHS (California)

- 22. Los Angeles County Dept of Public Health (California)
- 23 Nashville Metro Public Health Dept. (Tennessee)
- 24. New Orleans (Louisiana)
- 25. NYC Dept. of Health (New York)
- 26. San Diego County (California)
- 27. San Francisco Dept. of Public Health (California)
- 28. Scott County Health Dept. (Indiana)
- 29. Washington, D.C. Health Dept.
- 30. Whatcom County Health Dept. (Washington)

International

- 1. Canada
- 2. Monaco
- 3. Vietnam
- 4. State of Victoria, Australia
- 5. City of Athens, Greece
- 6. City of London Fast Track Cities Initiative
- 7. City of Paris, France
- 8. City of Toronto, Canada

Prevention Access Campaign – As of Dec. 16, 2019 www.preventionaccess.org/community





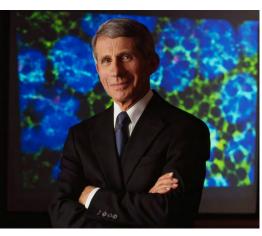
2017 - 2019

- "Effectively no risk" of sexual transmission when on treatment and undetectable
- → U=U: **100**% **effective** for preventing sexual transmission
- → Dear Colleague Letter (Aug. 2019) Authorizes flexibility in messaging, including PAC's communications and U=U















"HRSA continues to work with HIV prevention, care and treatment partners across the U.S. to increase awareness about the importance of HIV treatment and to integrate viral suppression messaging into ongoing discussions with PLWH to reduce HIV transmission." —HRSA/HAB letter to Ryan White HIV/AIDS Program Stakeholders



Dear Colleague Letter October 2018



DEPARTMENT OF HEALTH & HUMAN SERVICES

Administration

Rockville, MD 20857



Dear Ryan White HIV/AIDS Program Colleagues,

Several large studies have demonstrated that people living with HIV (PLWH) who have consistent viral suppression do not sexually transmit HIV. This letter outlines recommendations for Health Resources and Services Administration's (HRSA) HIV/AIDS Bureau's (HAB) Ryan White HIV/AIDS Program (RWHAP) recipients and subrecipients as they incorporate messages on the impact viral suppression has on HIV transmission in service delivery settings.

According to recent data from the 2016 Ryan White Services Report (RSR), the RWHAP has made tremendous progress toward ending the HIV epidemic in the U.S. From 2010 to 2016, HIV viral suppression in the RWHAP has increased from 69.5 percent to 84.9 percent, and racial/ethnic, age-based, and regional disparities have decreased. Scientific advances have shown that HIV medication (antiertorviral therapy) preserves the health of people living with HIV (PLWH) and prevents sexual HIV transmission. PLWH who take HIV medication daily as prescribed and achieve and maintain an undetectable viral load have effectively no risk of sexually transmitting the virus to an HIV-negative partner. Such findings underscore the importance of supporting effective interventions for linking PLWH into care, retaining them in care, and helping them addhere to their HIV medication.

HRSA strongly encourages RWHAP recipients, subrecipients, planning bodies, and providers to leverage their expertise and RWHAP infrastructure to incorporate viral suppression messages in service delivery settings where PLWH are engaged (e.g., outpatient ambulatory health services, medical and non-medical case management, health literacy, early intervention services, and treatment adherence discussions). To do this, providers should: 1) involve PLWH in the decision-making process of their HIV treatment and their sexual health; 2) develop a trusting relationship with their patients; 3) assess barriers to treatment adherence; and 4) support PLWH to achieve and maintain healthy outcomes.

HRSA encourages ongoing discussions about the impact of viral suppression for PLWH. Discussions with PLWH should be supported by all staff (e.g., case manager, social worker, medical provider, etc.), use consistent language, and include tailored messages regarding a person's viral suppression and sexual health practices, reinforcing prevention of other sexually transmitted infections.

Sharing messages about viral suppression with PLWH may have a profound impact on how they feel about themselves, their life choices, and reducing stigma and discrimination. By reducing HIV-stigma for providers, PLWH, and their family members, these discussions could have a positive impact on linkage to HIV care, retention in care, and HIV viral suppression.

sociate Administrato Page

HRSA continues to work with HIV prevention, care, and treatment partners across the U.S. to increase awareness about the importance of HIV treatment and to integrate viral suppression messaging into ongoing discussions with PLWH to reduce HIV transmission. We look forward to continued work with our RWHAP recipients, partners, and stakeholders to improve health outcomes for PLWH and to make continued advancements toward ending the HIV epidemic.

Sincerely

/Laura W. Cheever/
Laura W. Cheever, M.D., Sc.M.
Associate Administrator
HIV/AIDS Bureau
Health Resources and Services Administration

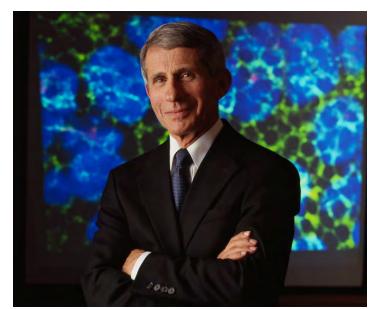
Health Resources and Services Administration. Ryan White HIV/AIDS Program Annual Client-Level Data Report 2016. http://hab.hrsa.gov/data/data-reports. Published December 2017. Accessed September 25, 2018.





July-August 2019

U=U is the foundation of being able to end the epidemic





Dr. Anthony S. Fauci, Director NIAID, NIH



December 2019

DHHS TREATMENT GUIDELINES

All persons with HIV should be informed that maintaining a plasma HIV RNA (viral load) of <200 copies/mL, including any measurable value below this threshold value, with antiretroviral therapy (ART) prevents sexual transmission of HIV to their partners.

Patients may recognize this concept as Undetectable = Untransmittable or U=U.



How to Communicate U=U







Clear

Confident

Consistent

Conscious



Be clear about U = U

The way the risk is described has significant impact for individuals living with HIV and on HIV stigma. All HIV information providers need to adopt a consistency of message around U=U.

The language we use makes a difference:

Don't say:

Negligible
Extremely unlikely
Virtually impossible
Close to zero
Helps prevent

Do say:

Can't pass it on
Can't transmit
No risk
Zero risk
Prevents HIV



Be confident about U = U

Overly cautious attitudes have profound impacts. Actively challenge misconceptions and doubts.



Don't say: I believe in U=U but use a condom and/or PrEP just in case.

Do say: Condoms or PrEP aren't clinically necessary to prevent HIV with U=U.

You might want to use a condom and/or PrEP:

- to prevent other STDs or pregnancy
- if the partner w/HIV is struggling with adherence
- if you have condomless sex with other partners of unknown HIV status
- for an added emotional feeling of security and agency



Be confident about U = U

Don't say: You're only as good as your last viral load test.

Do say: If you're taking you medication as prescribed and having a regular viral load test you don't need to worry.

Don't say: You never know...

Do say: We do know.



Be consistent about U = U

People need to see, hear and practice saying U=U repeatedly to accept and believe it.

- Integrate into patient information, guidelines, clinical rooms, outreach activities, and communications
- Have a conversation about U=U with those living with or vulnerable to HIV at every opportunity
- Use social and traditional media repeatedly to convey the message



Be conscious about all aspects of U=U

Viral load does not equal Value

- Not everyone is able to achieve and maintain an undetectable viral load.
- Recognize structural, social and emotional barriers that make it difficult for people to start or stay on treatment - especially for marginalized communities.
- All people with HIV have options for safer sex (e.g. condoms and PrEP)
- Acknowledge that treatment is a personal decision and support those on treatment to achieve maximal adherence
- Use the public health argument of U = U to address the barriers to universal access



U=U

UNDETECTABLE

UNTRANSMITTABLE

exæquo.be

Q AIDES



are the solution

Taking HIV medication daily suppresses the virus and means you can't pass it to others.

> #UequalsU DCTakesonHIV.com

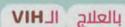


SCIENCE=HEALTH ACTUP

#UequalsU #ScienceNotStigma

thewellproject

OUALS UNTRANSMITTA



مايتراش=مايتعدّاش

PEOPLE ON EFFECTIVE



I CAN'T



UNDETECTABLE = UNTRANSMITTABLE НЕДЕТЕКТАБИЛНО = НЕПРЕНОСЛИВО



Здружение за поддршка на луѓето живеат со ХИВ -ЗАЕДНО ПОСИЛНИ Скопје

San Francisco AIDS Foundation supports

The science is clear: People living with HIV, who are on effective treatment. do not transmit HIV to sexual partners.



NIET DETECTEERBAAR NIET OVERDRAAGBAAR

UNINFECTIOUS **UNDETECTABLE**

nam aidsmap

UEU

Around the World

It's a fact







No more scaremongering

People on effective HIV treatment can't pass on the virus.



検出預算以下は感染しない

株出席表以下,の状態からか男かそれ以上だと HIVはうつることはありません。

#UequalsU #検出限界以下は感染しない

KHÔNG PHÁT HIỆN







HIV TREATMENT = PRE

NON SONO CONTAGIOSO 五石

"We now have the robust data to say, with confidence, that people living with HIV who are on effective treatment cannot pass on the virus."



Dr Michael Brady

Hear Horcelie's story



Terrence

HIGGINS













Matthew Hodson @Matthew_Hodson People with #HIV who are virally suppr Have babies born without HIV Have sex, without condoms, without ris Live as long a life as someone without Facts not fear.

U=U













Science not stigma.



"We now have the robust data to say, with confidence, that people living with HIV who are on effective treatment cannot pass on the virus."



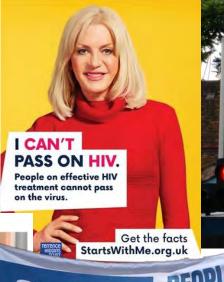
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People on effecti

HIV treatment CANNOT

pass on the virus

Matthew Hodson @Matthew Hodson People with #HIV who are virally suppr Have babies born without HIV Have sex, without condoms, without ris Live as long a life as someone without Facts not fear.

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U=U

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U=U

Science not stigma.





















U=U (We Can Win) - B Flow, Judy Yo, Ron Kay, D2 & JC Starboy (Shot by No ID Guru Pictel)







MASHOSAKA





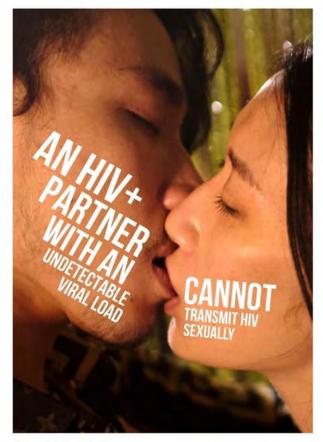




hiv-uujapan.org

#UEQUALSU | @PreventionAC U=U

Vietnam (CDC and PEPFAR)



























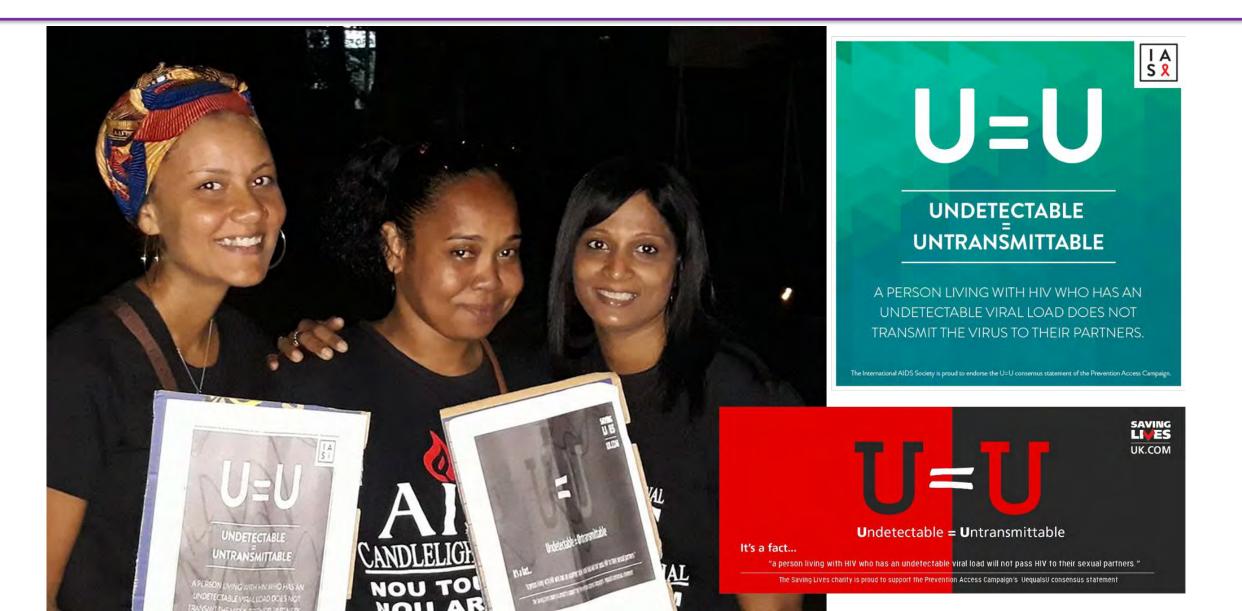


Ireland and Nigeria (PEPFAR)





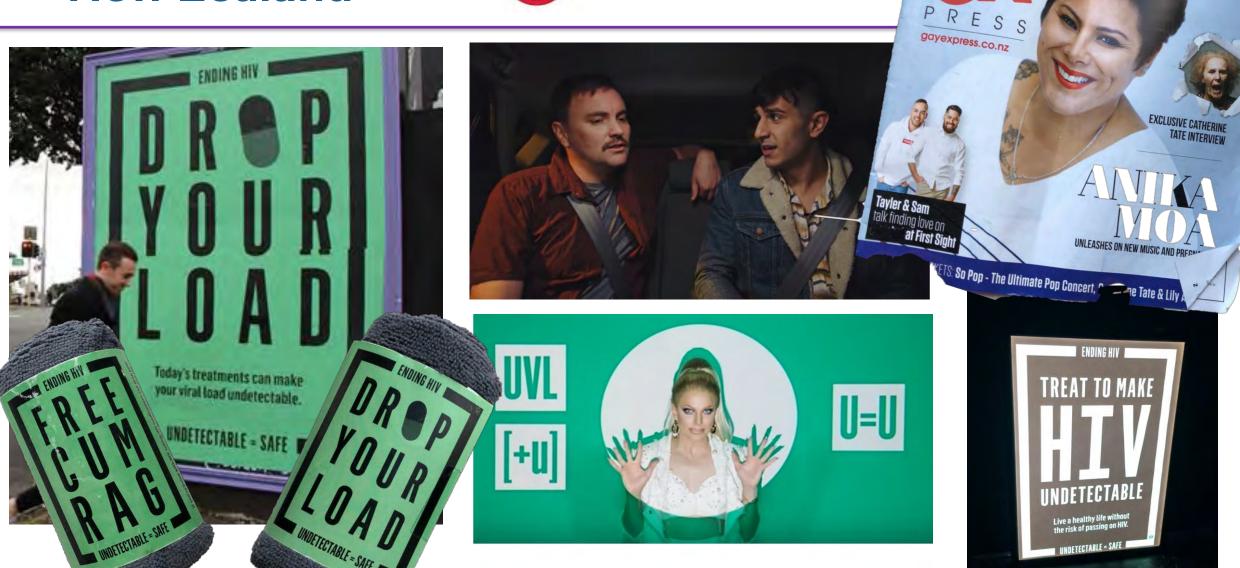
Mauritius



New Zealand

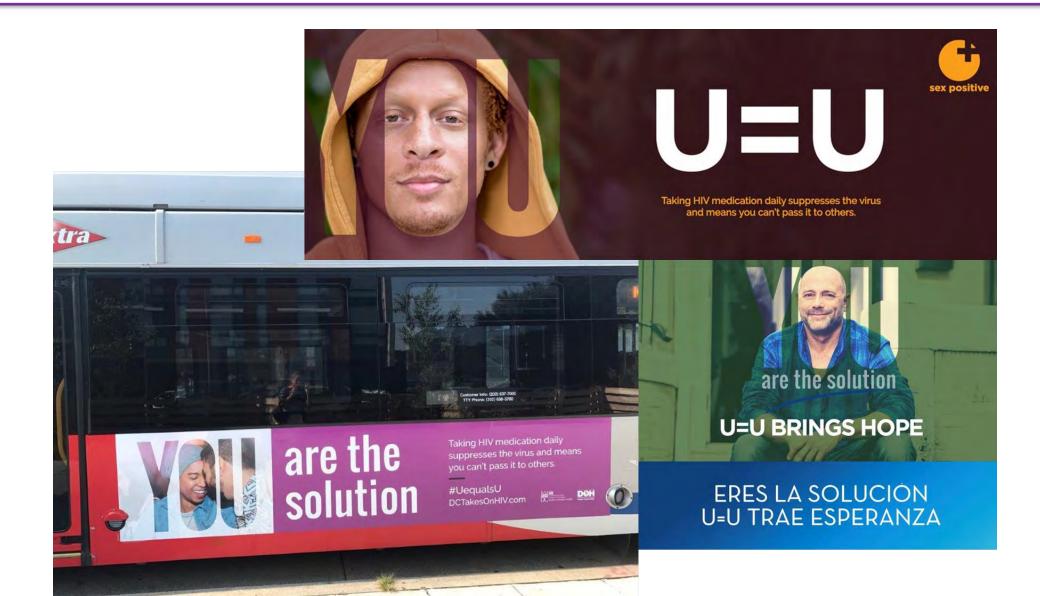


YOUR GAY VOICE | NOVEMBER 2018





Washington, DC





New York (State & City)





#UEQUALSU | @PreventionAC

Baltimore (MD)













LOVED, HEALTHY,









Oregon Health Authority



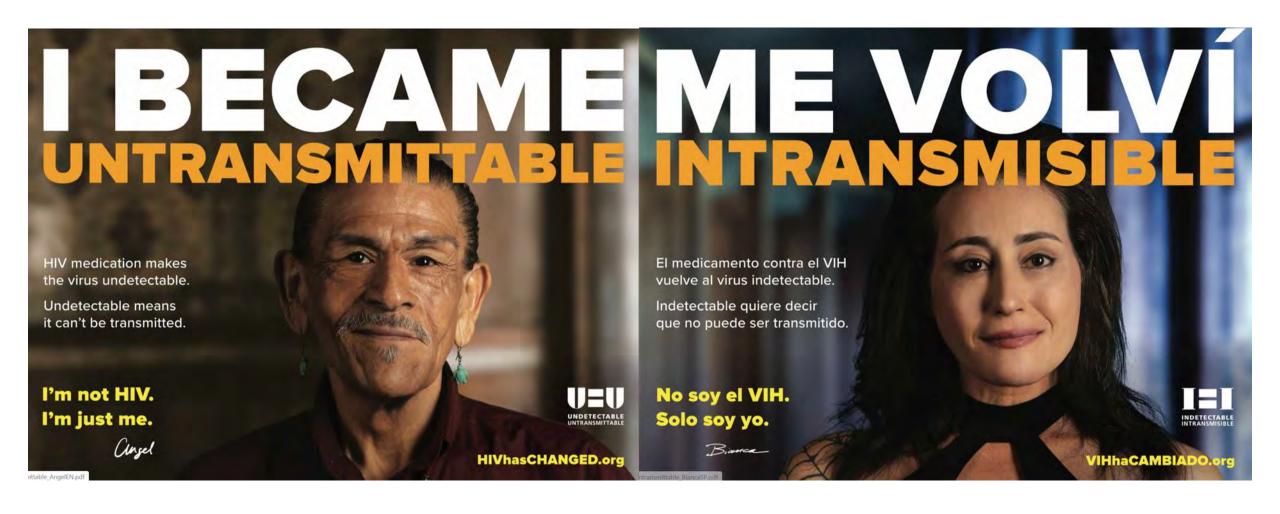


Equitas Health (OH)





Santa Clara County (CA)





Aunt Ritas, Phoenix (AZ)





Broward & Miami Counties (FL)





The Institute for Family Health (NYC)



Fidel Figueroa, Peer Educator

"Maintain your appointments, take your medications, and always consult with your provider about any issues you have in order to maintain good health. We are here for you. You are not alone. We support you every step of the way."



Gilberto L., Engaged in care at the Institute for Family Health

"I've been undetectable now for about a year. You can manage this disease. Once I got treatment and all the information I wasn't aware of, it was like my life was given to me again.'



People who take their HIV medication daily to maintain an undetectable viral load can't pass it to their sexual partners.







¿Vive usted con el VIH?

a las personas que viven con el VIH sobre U=U, esto les ayude a tener una mejor salud."

U=U VIH indetectable VIH intransmisible La ciencia detrás de U=U es real. Cuando las personas que viven con el VIH mantienen una carga viral indetectable, ellos no pueden transmitir el VIH a sus parejas sexuales.







People who take their HIV medication daily to maintain an undetectable viral load can't pass it to their sexual partners.

#UequalsU





Larry and Luke, Couple, Engaged in care at the Institute for Family Health "When you first get diagnosed, there are a lot of fears about it... but the fact is that if you do take your medications you can get to an undetectable level."

Undetectable Untransmittable

People who take their HIV medication daily to maintain an undetectable viral load can't pass it to their sexual partners.

















Positiveseries.org

#UEQUALSU | @PreventionAC

U=U in Ending the HIV Epidemic Efforts

- 1.Integrate U=U messages into EHE plans
- 2.Include U=U/treatment messages in testing, PrEP, PEP & condom campaigns (the toolbox)
- 3. Conduct HIV provider and case manager trainings on U=U
- 4.Include requirements in RFPs/service standards to incorporate U=U into outreach, marketing & agency programs
- 5. Conduct forums for community members & organizations, policymakers & other stakeholders
- 6.Incorporate U=U messages into rapid start programs
- 7. Issue Dear Colleague or comparable letter to providers (NY)

U=U in Ending the HIV Epidemic Efforts



- 8. Display U=U posters and materials in waiting rooms/agencies
- 9. Hire a U=U Coordinator and/or treatment navigators
- 10.Begin a U=U Ambassadors program (PAC can provide TA and/or conduct a Train the Trainer program)
- 11. Create social marketing campaigns, including outdoor advertising, and hire local PLWH as "models"
- 12. Include U=U prominently in promotions for AIDS walks, gay pride events & other agency/community events
- 13. Publish U=U e-newsletters
- 14. Create a U=U website landing page (don't bury U=U information)

#UEQUALSU | @PreventionAC

U=U in Ending the HIV Epidemic Efforts

- 15. Engage niche and mainstream media outlets tell personal stories
- 16. Engage medical schools, colleges, & organizations that serve youth
- 17. Create videos of PLWH telling their stories
- 18. Engage diverse PLWH representatives in ALL aspects of decision making, campaigns and events
- 19. Include U=U messages and education in agency newsletters, fundraising appeals, etc.



Social Media

- Share #UequalsU often and always use the hashtag!
- Contact PAC if you want sample Tweets/language

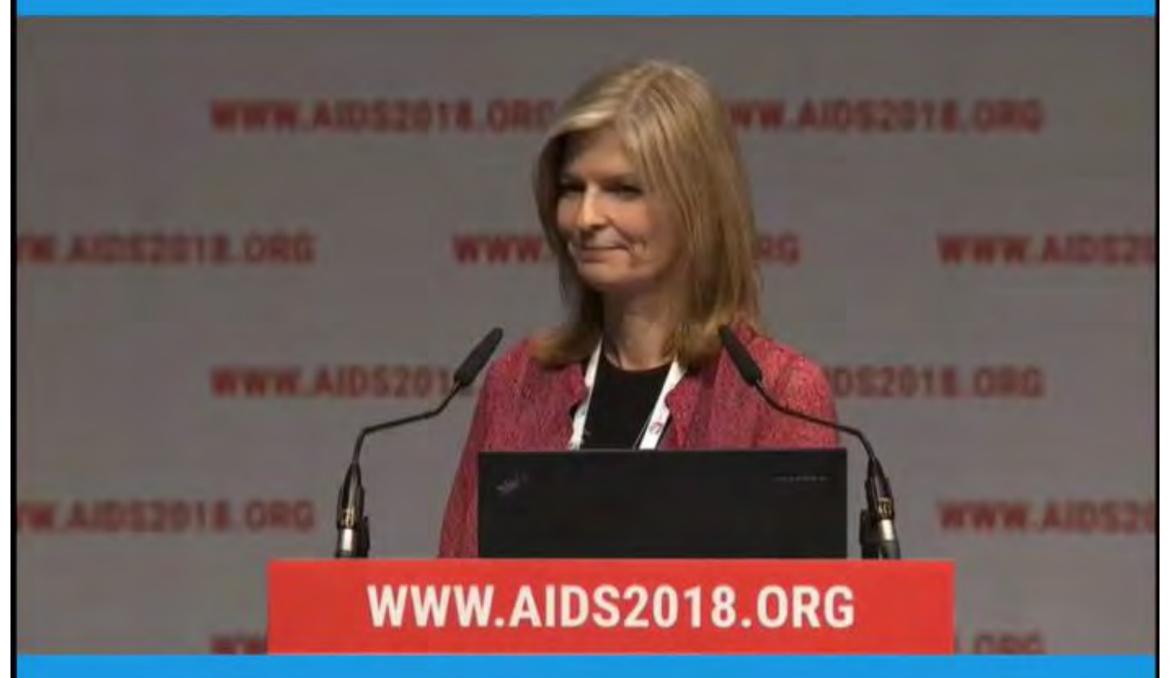




It's time to redefine what it means to live with HIV!



- 1. Train all staff in U=U basic science and communications and provide learning opportunities to diverse audiences
- 2. Communicate clearly, confidently, consistently, and consciously
- 3. Speak out if you see incompetence or inaction and support positive efforts
- **4. Advocate** with the U=U public health argument to increase access and remove barriers to treatment and care
- 5. Connect to the movement: join as a Community Partner & take part in social media #UequalsU



Dr. Alison Rodger, lead author PARTNER2 to Bruce Richman at International AIDS Conference, July 25, 2018

It's time to redefine what it means to live with HIV!







Thank You!

Murray Penner

murray@preventionaccess.org Twitter/IG: @murray_penner

Prevention Access Campaign

www.uequalsu.org

Twitter/IG: @PreventionAC

Facebook/YouTube: UequalsU



#UequalsU