SCIENCE OVER STIGMA
EFFECTIVELY MESSAGING THE SCIENCE OF U=U TO REACH COMMUNITIES

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Texas Syndicate
October 17, 2019
Outline for Today’s Webinar

- What is U=U?
- History of the U=U Campaign
- Communicating about U=U
- Join & Amplify the Movement
- Q&A and Discussion
What is U=U?

Undetectable = Untransmittable

People living with HIV who are on treatment and have an undetectable viral load cannot transmit HIV to sexual partners.
Dinah de Riquet-Bons at opening plenary of AIDS 2018 in Amsterdam
Chloe Orkin, Chair of the BHIVA, talks with Gareth Thomas about U=U on BBC, September 2019

The most important thing I can say is that, in the UK,
A Defining Moment in History

In 1996 we learned effective treatment would save our lives.

Today, we know it means we can’t pass on HIV to sexual partners.
Where Did U=U Come From?

- ARVs first used in the 1990s when pregnant women who used AZT showed significantly reduced risk of transmitting HIV to their babies.

- Based on Treatment as Prevention (TasP) pioneered in 2007 by Dr. Julio Montaner and Swiss Statement of 2008 authored by Dr. Pietro Vernazza.

- Pioneered in 2016 by a community of HIV activists, researchers, and AIDS organizations to easily convey the science.
# How Do We Know U=U?

Source: Dr. Sarah Calabrese

## Summary of Recent Evidence for Undetectable=Untransmittable (U=U)

<table>
<thead>
<tr>
<th>Study</th>
<th>Enrolled Sample</th>
<th>Study Design</th>
<th>Number of Condomless Sex Acts</th>
<th>Number of New HIV Infections</th>
<th>Phylogenetically Linked When HIV+ Partner Stably Virally Suppressed</th>
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</thead>
<tbody>
<tr>
<td>HPTN 052</td>
<td>1,763 serodifferent couples</td>
<td>2-arm trial with HIV+ partner randomized to early or delayed ART</td>
<td>-</td>
<td>78</td>
<td>46</td>
</tr>
<tr>
<td></td>
<td>• 98% male-female couples</td>
<td></td>
<td></td>
<td></td>
<td>• 19 in early-ART group • 59 in delayed-ART group</td>
</tr>
<tr>
<td>Cohen et al., 2016</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>• 3 in early-ART group • 43 in delayed-ART group</td>
</tr>
<tr>
<td>PARTNER1</td>
<td>1,166 serodifferent couples</td>
<td>Observational study</td>
<td>55,193</td>
<td>11</td>
<td>0</td>
</tr>
<tr>
<td>Rodger et al., 2016</td>
<td>• 888 in analytic subset</td>
<td></td>
<td>34,214 among non-fatal cases</td>
<td></td>
<td></td>
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<tr>
<td>Opposites Attract</td>
<td>358 serodifferent male-male</td>
<td>Observational study</td>
<td>12,447</td>
<td>3</td>
<td>0</td>
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<tr>
<td>Bavinton et al., 2018</td>
<td>couples</td>
<td></td>
<td>counted when HIV+ partner virally suppressed and HIV-partner not on PrEP</td>
<td></td>
<td></td>
</tr>
<tr>
<td>PARTNER2</td>
<td>972 serodifferent male-male</td>
<td>Observational study</td>
<td>76,991</td>
<td>15</td>
<td>0</td>
</tr>
<tr>
<td>Rodger et al., 2019</td>
<td>couples</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Sex without condoms > 125,000 times
Non-sexual Transmission & U=U

Breast / Chest feeding

U=U does not apply to breastfeeding but the risk is extremely low. Recommendations vary based on region, availability of healthy options (e.g., clean water for formula).

Needle sharing

Although there is currently no conclusive research to establish that U=U applies to needles sharing, it is likely that the risk is extremely low to non-existent.
Why is U=U a Game Changer?

- Transforms social, sexual, & reproductive lives
- Dismantles HIV stigma
- Encourages HIV testing and adds an incentive to start and stay on treatment and in care
- Provides a strong public health argument for eliminating barriers to universal access (The Third U = Universal)
Why is U=U a Game Changer?

Greatly improves the lives of people living with HIV

Propels us toward the end of the epidemic
Why Didn’t We Know About U=U?

Science doesn’t have a publicist.

- Lack of knowledge about the research
- Lack of expertise, authority, or disposition to draw a conclusion on the aggregate of research
- Paternalism, bias, prejudice, and stigma
- Resistance to change
Why Did We Need the U=U Campaign?

A. Most people in the community, except the “privileged,” did not know about the U=U science. Many still do not know.

B. All people with HIV have a right to accurate information about their social, sexual, and reproductive health.

C. HIV stigma is a public health emergency. U=U is an immediate & effective public health solution.
History of the U=U Campaign
Bringing Science to the People — Jan.-July 2016

July 2016

NYC Health
Terrence Higgins Trust
NASTAD

The following statement was endorsed by Terrence Higgins Trust and Consultant HIV Physician, London, UK, NASTAD, NPA, NAC, Staff of the Health & Human Services USA, the Department of Health & Human Services, USA, and the Department of Health and Human Services, USA.

The current statement is of the highest importance and has been developed in consultation with experts from around the world. The statement is based on the latest available evidence and is intended to inform public health decisions and guide the provision of care.

The statement is consistent with the World Health Organization's (WHO) and the Joint United Nations Programme on HIV/AIDS (UNAIDS) guidance on HIV prevention. It also aligns with the recommendations of the European Centre for Disease Prevention and Control (ECDC) and the National Institutes of Health (NIH).

The statement is intended to be used as a guide for public health professionals and organizations, and is not intended to be used as legal or medical advice. The statement is subject to change as new evidence becomes available.
July 24, 2017

Featured: Charles King (CEO Housing Works) Dixon Diallo (CEO Sister Love) Dr. Anthony S. Fauci (Director of US NIAID) Ambassador Deborah Birx (PEPFAR) Luiz Loures (Deputy General of UNAIDS) Bruce Richman (Founder/Executive Director – Prevention Access Campaign - U=U Campaign)
“The science really does verify and validate U=U.”

Dr. Anthony S. Fauci, Director of NIAID, National Institutes of Health at United States Conference on AIDS
https://youtu.be/Lfrrlfipgwc
“Effectively no risk” of sexual transmission when on treatment and undetectable
→ U=U: 100% effective for preventing sexual transmission
→ Authorizes flexibility in messaging, including PAC’s communications and U=U

Dr. Jonathan Mermin, Dr. Eugene McCray, Dr. Carl Dieffenbach, Anne Rancourt, Murray Penner, Gina Marie Brown, Dr. Richard Wolitski, Jesse Milan, Bruce Richman, Dr. Anthony S. Fauci
“U=U is the foundation of being able to end the epidemic” – Dr. Anthony Fauci, NIH/NIAID
Dr. Jerome Adams
United States Surgeon General
People living with HIV “cannot and will not go on to transmit the virus as long as they remain virally suppressed.”
November 2017

Dr. Maureen Goodenow
Director NIH Office of AIDS Research
“U=U is a game changer because it transforms the social, sexual, and reproductive lives of PWH. U=U is an essential component for ending the epidemic.’
June 2018

Robert R. Redfield, MD
Director of the Centers for Disease Control and Prevention
and Administrator of the Agency for Toxic Substances and Disease Registry.
“If you’re virologically suppressed you are not infectious, U=U.”
November 2018
U=U
It is the World Health Organization's position that UNDETECTABLE = UNTRANSMITTABLE. A person living with HIV who has an undetectable viral load does not transmit the virus to their partners. This campaign is supported by UNAIDS. The campaign was launched after four large studies conducted from 2007 to 2016 among thousands of serodiscordant couples did not show a single case of sexual HIV transmission from a virally undetectable partner. The campaign emphasizes the potential of self-adherence for universal access to effective treatment and care, and the benefits of integrating this message into HIV prevention, care, and treatment programs, including those serving key populations.
U=U in Medical Journals

U=U is a simple but hugely important campaign based on a solid foundation of scientific evidence.

The U = U concept bridges the best of biomedical science with current concepts in behavioral and social science...

Providers should discuss U=U with all patients living with HIV.

Our findings [PARTNER2] support the message of the U=U (undetectable equals untransmittable) campaign...
“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
U=U (We Can Win) - B Flow, Judy Yo, Ron Kay, D2 & JC Starboy (Shot by No ID Guru Pictel)
FACT: People with HIV who are on treatment with an undetectable viral load cannot pass on HIV during sex.

Today's medications help people with HIV stay healthy and protect their sexual partners.

Learn more about U=U at www.preventionaccess.org
Can't
I WON'T
TRANSMIT HIV
TO ANYONE

Medication makes my HIV undetectable.
There's not enough virus to expose my sex partner.

Kim

HIV CANNOT be passed if the virus is undetectable.

HIV treatment makes the virus undetectable so it cannot be passed through sex.

Condoms offer protection against sexually transmitted infections and unplanned pregnancy.

In New York, HIV testing and treatment is available regardless of your ability to pay or your immigration status.

FOR MORE INFORMATION
Text CARE to 877877 or visit nyc.gov/health and search U equals U

#equalsU
U=U

are the solution

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

#UequalsU

DCTakeonHIV.com

U=U

undetectable equals untransmittable

A person living with HIV who has an undetectable viral load does not transmit the virus to their partners.

U=U

UNDETECTABLE UNTRANSMITTABLE

#LOVEPOSITIVE

exæquo aidsmap

n=nn

undetectable

UNTRANSMITTABLE

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

No more scarce-mongering

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

U=U

undetectable-untransmittable

The National HIV Nurses Association is proud to support the

UequalsU

We stay HIV treatment is proven to work.
U=U Consensus Statement

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 · 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 · Taiwan · Tajikistan · Tanzania · Thailand · Tunisia · Turkey · Uganda · Ukraine · United States · Uzbekistan · Venezuela · Vietnam · Zambia · Zimbabwe

Prevention Access Campaign - As of Oct. 16, 2019
www.preventionaccess.org/community
## 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 York
13. Pennsylvania
14. Rhode Island
15. Washington

### Municipalities
1. Alameda County Public Health Department (California)
2. Baltimore City Health Department (Maryland)
3. Baton Rouge (Louisiana)
4. Champaign-Urbana Public Health District (Illinois)
5. Chicago Dept. of Public Health (Illinois)
6. Cleveland Dept. of Public Health (Ohio)
7. Columbus Public Health (Ohio)
8. Cuyahoga County Board of Health (Ohio)
9. Denver Public Health (Colorado)
10. Detroit Health Department (Michigan)
11. Florida Department of Health - Hillsborough (Florida)
12. Florida Department of Health Okaloosa County (Florida)
13. Genesee County Health Department (Michigan)
14. Hennepin County Public Health (Minnesota)
15. Houston Health Dept. (Texas)
16. Jefferson County Dept. of Health (Alabama)
17. Kitsap Public Health District (Washington)
18. LMAS District Health Department (Michigan)
19. Long Beach HHS (California)
20. Los Angeles County Dept of Public Health (California)
21. Nashville Metro Public Health Dept. (Tennessee)
22. New Orleans (Louisiana)
23. NYC Dept. of Health (New York)
24. San Diego County (California)
25. San Francisco Dept. of Public Health (California)
26. Scott County Health Dept. (Indiana)
28. Whatcom County Health Dept. (Washington)

### International
1. Country of Canada
2. Country of Monaco
3. City of London – Fast Track Cities Initiative
4. City of Paris
5. State of Victoria, Australia
6. City of Toronto, Canada

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Prevention Access Campaign - As of October 3, 2019
www.preventionaccess.org/community
The U=U Campaign is Sharing Knowledge

People living with HIV

Healthcare Providers

Public

Policymakers
Dr. Alison Rodger, lead author PARTNER2 to Bruce Richman at International AIDS Conference, July 25, 2018
How to Communicate U=U
Language Matters
Language Matters

Be clear and consistent about risk.

**Say:**
- Can’t pass it on
- Can’t transmit
- No risk
- Zero risk
- Prevents HIV
- Eliminates onward transmission
- Effectively no risk

**Don’t say:**
- Negligible
- Greatly reduces
- Extremely unlikely
- Virtually impossible
- Close to zero
- Helps prevent
- Makes it hard to transmit
Dr. Anthony S. Fauci, NIAID:
From a practical standpoint, the risk is ZERO.

If we can get people to undetectable, “not only do we save the life of that person, we make it in fact impossible for that person to transmit.”

Dr. Carl W. Dieffenbach, NIAID:
If the person [with HIV] is virologically suppressed, 'durably' -- your chance of acquiring HIV from that person is ZERO, let's be clear about that: ZERO.

British HIV Association’s Statement:
We recommend consistent and unambiguous terminology when discussing U=U such as "no risk" or "ZERO risk" of sexual transmission of HIV, avoiding terms like "negligible risk" and "minimal risk.”
Attitudes Matter

Overly cautious attitudes have profound impacts. *The big erasers:*

Don’t say: I believe in U=U but use a condom just in case.

Say: Condoms or PrEP aren’t clinically necessary to prevent HIV with U=U.

You might want to a use a condom and/or PrEP:
• to prevent other **STDs or pregnancy**
• if the partner w/HIV is **struggling with adherence**
• for an added emotional **feeling of security and agency**
Attitudes Matter

Overly cautious attitudes have profound impacts. The big erasers:

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

Say: If you’re taking you medication as prescribed, getting your labs done regularly, and stay connected to care --- don’t worry!

Don’t say: You never know...

Say: We do know.
• Messaging must be viral load *morally neutral*.

• Acknowledge that treatment is a *personal decision and not a public health responsibility*.

• All people with HIV have *options for hot and safer sex*: condoms and, in some parts of the world, PrEP are effective choices.

• Recognize *structural barriers* that make it difficult or impossible for people to start and stay on treatment especially for marginalized communities.

• Use the public health argument to *remove barriers to universal access*.
Prioritization Matters

People not only need to know how say it, they need to see it’s prioritized by those at the top.

• **Don’t:** Introduce in the sixth paragraph or end of a video where it might not get seen.

Do:
• Put it up front and into context as historic life-changing news.
• Use pull quotes from experts and testimonials from PLHIV.
• Integrate into communications: HIV stigma, treatment, treatment access, criminalization, activism history, etc.
U=U & HIV Criminalization

Part of the modernization toolbox

Defense/parole in individual cases vs the potential negative impact if leading argument in policy reform

U=U advocates and those working in crim reform need clear guidance

Be mindful of disclosure laws
Rules to Enjoy U=U

The basics:

Treatment

Labs

Connection

< 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
Do viral blips affect U=U? Should a patient be concerned?

• No.
• Viral “blips” (typically between 50 to 1,000 copies/ml) are not clinically significant to risk. If they increase over time, this might be a sign to adapt treatment regimens.
“Unsophisticated Consumers” won’t understand U=U (i.e., they might stop treatment and experience viral rebound yet still believe they are undetectable.)

- Educate!
- Medicine only works if you take it
- TLC!
Public Health Questions

There will be a rise in STIs because people with HIV will stop using condoms.

- **Educate!**
- ...and still U=U
- U=U only prevents HIV
- Condoms help prevent STIs and pregnancy
Public Health Argument

• Use U=U as an argument to get universal treatment and access to care, which also prevents new infections

• Third U = Universal

• U=U primarily is about keeping people healthy and fighting stigma; this argument can be made to policy makers
JOIN AND AMPLIFY THE MOVEMENT!

1. **Train** staff in U=U basic science & communications
2. **Promote** prominently & consistently – website, newsletters, events
3. **Communicate** consciously
4. **Leverage** the U=U public health rationale in advocacy
5. **Speak out** if you see incompetence, incorrect language, or inaction
6. **Connect** to the movement: join as a Community Partner & take part in social media: #UequalsU

It’s time to redefine what it means to live with HIV!
“U=U is perhaps the most inspiring recent campaign and reality in the HIV history. It brings hope to so many of us but most importantly it brings the message that we are not disease vectors.

Listen to this and let it sink in:

We are not disease vectors. We are human beings.”
Q&A AND DISCUSSION

Murray Penner
Executive Director, North America
Prevention Access Campaign
It’s time to redefine what it means to live with HIV!

Thank You!

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Prevention Access Campaign
www.uequalsu.org
Twitter/IG: @PreventionAC
Facebook/YouTube: UequalsU

#UequalsU