



NASTAD



prevention
access
campaign

U=U is a Public Health Imperative!

May 5, 2021
Webinar

Housekeeping

- Please mute your computer microphone or telephone during presentations
- Keep your eyes on the chat for links to information and resources shared by our presenters
- Health departments encouraged to share links to their own U=U materials or resources in the chat
- Feel free to use the chat feature to ask questions and comment
- A follow-up e-mail containing links to webinar recording and resources referenced by speakers, copy of slides, and answers to questions in the webinar chat will distributed to registrants

Welcoming Remarks and Introductions



Davina (Dee) Conner (she/her)
U.S. Creative Engagements and
Outreach Specialist
Prevention Access Campaign



Stephen Lee, MD (he/him)
Executive Director
NASTAD

U=U

UNDETECTABLE
=
UNTRANSMITTABLE

The International AIDS Society is proud to endorse the



The power to LIVE UNDETECTABLE is yours



IT STARTS WITH ME.
I WON'T PASS ON HIV.
I know that someone doing well on HIV
medication can't pass it on. If everybody
does their bit we can stop HIV.

Paola

Can't
~~I WON'T~~
TRANSMIT HIV
TO ANYONE



Medication makes my
HIV undetectable.

There's *not enough virus*
to expose my sex partner.

Perry

U=U
UNDETECTABLE
UNTRANSMITTABLE



Can't
~~I WON'T~~
TRANSMIT HIV
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Michelle

U=U
UNDETECTABLE
UNTRANSMITTABLE



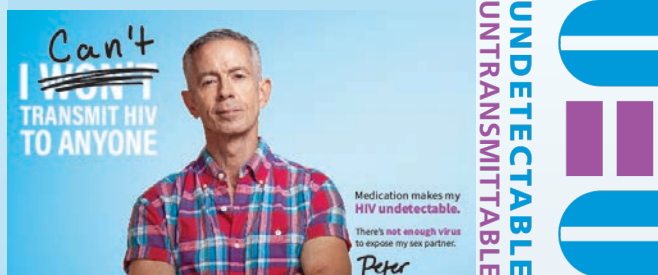
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Kalvin

U=U
UNDETECTABLE
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Peter

UNDETECTABLE
UNTRANSMITTABLE



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to expose my sex partner.

Kim

U=U
UNDETECTABLE
UNTRANSMITTABLE

www.untransmittable.org

U=U

Undetectable
Equals Untransmittable

U=U Public Health Jurisdictions

U.S. State Health Departments

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

U.S. Municipalities

1. Adams County Public Health Department (IL)
2. Alameda County Public Health Department (CA)
3. Baltimore City Health Department (MD)
4. Champaign-Urbana Public Health District (IL)
5. Chicago Department of Public Health (IL)
6. Baton Rouge (LA)
7. Columbus Public Health (OH)
8. Cleveland Department of Public Health (OH)
9. Cuyahoga County Board of Health (OH)
10. District of Columbia Dept. of Health (Washington, DC)
11. Denver Public Health (CO)
12. Detroit Health Department (MI)
13. Florida Department of Health - Hillsborough (FL)
14. Florida Department of Health - Okaloosa County (FL)
15. Genesee County Health Department (MI)
16. Hennepin County Public Health (MN)
17. Houston Health Department (TX)
18. Jefferson County Department of Health (AL)
19. Kent County Health Department (MI)
20. Kitsap Public Health District (WA)
21. LMAS District Health Department (MI)

22. NYC Department of Health (NY)
23. Long Beach HHS (CA)
24. Los Angeles County Dept. of Public Health (CA)
25. Minneapolis Health Department (MN)
26. Nashville Metro Public Health Dept. (TN)
27. New Orleans (LA)
28. San Diego County (CA)
29. San Francisco Dept. of Public Health (CA)
30. Scott County Health Department (IN)
31. Whatcom County Health Dept. (WA)

International

1. Brazil
2. Canada
3. China
4. Monaco
5. Thailand
6. Vietnam
7. Zambia
8. State of Victoria, Australia
9. Athens, Greece
10. London – Fast Track Cities Initiative
11. Paris, France
12. Toronto, Canada



Agenda

- Welcome!
- Effective Communication and the Public Health Strategy of U=U
- Updates on Current Implementation Research on U=U
- Meeting the Imperative: Health Department Implementation of U=U
- Public Health Resources and Tools

Effective Communication and the Public Health Strategy of U=U



Deondre Moore (he/him)
U.S. Partnerships and Community
Engagement Manager
Prevention Access Campaign

Updates on Current Implementation Research on U=U



Davina (Dee) Conner (she/he)
U.S. Creative Engagements and
Outreach Specialist
Prevention Access Campaign

NASTAD2021



Effective Communication and the Public Health Strategy of U=U

U=U is a Public Health Imperative!

Dr. Fauci: U=U is “the foundation of being able to end the [HIV] epidemic.”





U=U

Undetectable = Untransmittable

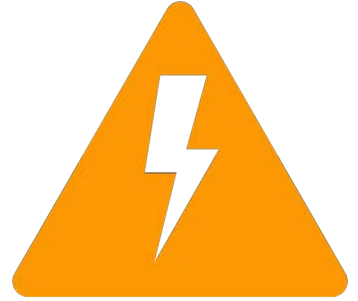
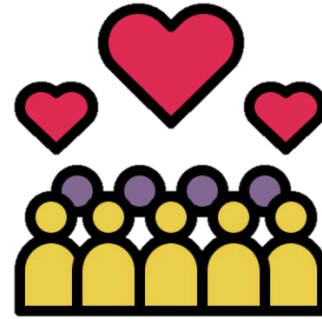
People living with HIV who are on treatment and have an undetectable viral load* **cannot transmit HIV** to sexual partners.

*under 200 copies/ml



Why is U=U a game changer?

- **Well-being of People w/HIV:** Transforms social, sexual, and reproductive lives
- **HIV Stigma:** Dismantles HIV stigma on the individual, community, clinical, and public policy levels
- **Treatment Goals:** Reduces anxiety associated with HIV testing and adds an incentive to start and stay on treatment and in care
- **Universal Access:** Provides a strong public health rationale to increase access and eliminate barriers to treatment, care, and diagnostics. (The Third U = Universal)



NON-SEXUAL TRANSMISSION

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)



Together, we can change the course of the epidemic...one woman at a time.

[GET CONNECTED](#) [HIV INFORMATION](#) [A GIRL LIKE ME](#) [WRI](#) [OUR PARTNERS](#)

[Home](#) > [HIV Information](#) > [Expert Consensus Statement on Breastfeeding and HIV in the United States and Canada](#)

Expert Consensus Statement on Breastfeeding and HIV in the United States and Canada



Needle sharing

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



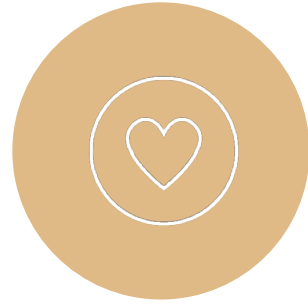
U=U GUIDELINES



TREATMENT



LABS



CARE



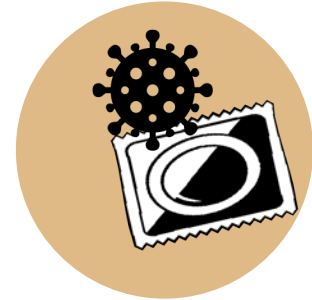
U=U GUIDELINES



<200



→ SEX



→ HIV



COMMUNICATING U=U



Clear



Consistent



Confident



Conscious



COMMUNICATING U=U

Clear

Can't pass it on
Can't transmit
Prevents HIV
Impossible
Zero risk
100% effective

~~Negligible~~
~~Extremely unlikely~~
~~Helps prevent~~
~~Virtually impossible~~
~~Close to zero~~



COMMUNICATING U=U



ZERO

Dr. Anthony S. Fauci, Director of NIAID, NIH:

"From a practical standpoint, **the risk is zero.**"

"If we bring the virus down to below detectable levels, not only do we save the life of that person, we make it, in fact, **impossible for that person to transmit.**"

Dr. Alison Rodger (lead author of PARTNER 1 & 2):

"If you're on suppressive ART, you are sexually noninfectious. **The risk is zero,**" and again "**It's very, very clear the risk is zero.**"

The British HIV Association (BHIVA): "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."

Centers for Disease Control (CDC):

Viral Suppression is estimated to be "**100% effective**" for preventing HIV sexual transmission.



COMMUNICATING U=U



Confident

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.



COMMUNICATING U=U



Confident

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

You might want to also consider condoms/and or PrEP:

- to prevent other **STDs or pregnancy**
- if the partner w/HIV is **struggling with adherence**
- when having sex with **other sexual partners**
- for an added emotional **feeling of security and agency**



COMMUNICATING U=U



Confident

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 regular viral load tests *you don't need to worry.*



COMMUNICATING U=U



Confident

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



COMMUNICATING U=U



Confident

Don't say: You never know...

Do say: *We do know.*



COMMUNICATING U=U



Confident

Do say: *We do know.*



COMMUNICATING U=U

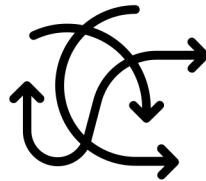


Consistent

Change is uncomfortable!

OLD WAYS OF
THINKING

Cognitive Dissonance



Discomfort

NEW WAYS OF
THINKING



Communicating U=U



Consistent

Change is uncomfortable!

Must be heard *repeatedly* from the right messengers and credible sources.

Use targeted channels including social media, outreach activities, patient information, clinical/waiting rooms settings, newsletters, and treatment guidelines.

Make U=U central to speeches/events like AIDS Walks, and other public events.

Have a conversation with those living with or vulnerable to HIV at every opportunity.



Communicating U=U



Consistent

Don't hide it on page five y'all! We often see newsletters and statements with lots of info we've seen for years that have buried U=U where folks are likely not to notice it.

Put it out front! Make it seen. U=U is still new and the only way it will change lives is if we share it again and again.



COMMUNICATING U=U



Conscious

Viral load \neq **Value**

Lead with love.

Not everyone can achieve and maintain an undetectable viral load.

Structural, social and emotional barriers make it difficult for people to start and stay on treatment - especially for marginalized communities.

No one with HIV is a danger. All people with HIV have options for safer sex such as condoms and, in some parts of the world, PrEP.



COMMUNICATING U=U



Conscious

Viral load \neq Value

Treatment is a personal health decision and not a public health responsibility.

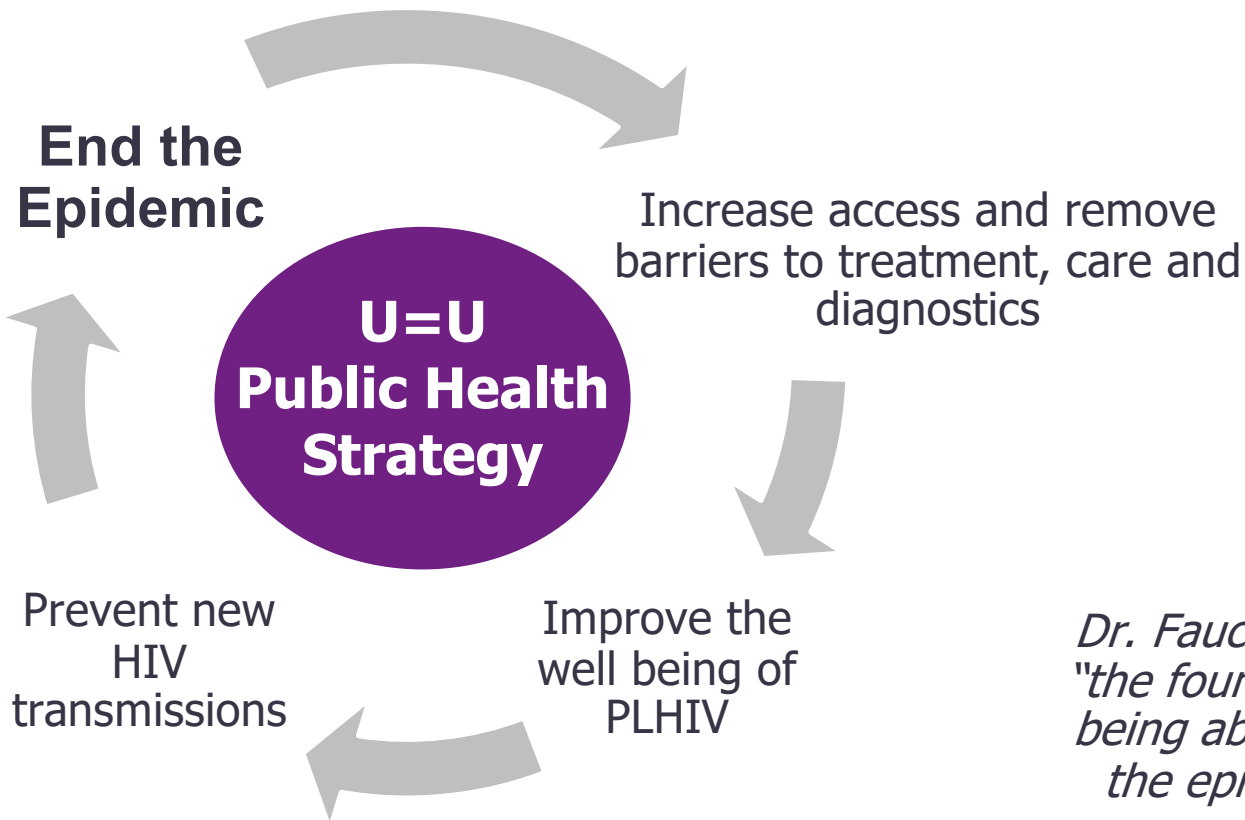
Use the public health strategy of U=U to increase access and remove barriers to information, treatment and care so people with HIV can stay healthy and be free from worry about transmission.

#LeaveNoOneBehind





Universal Access - 3rd U



Dr. Fauci: U=U is "the foundation of being able to end the epidemic."





Talking about U=U

With Policy Makers

- Emphasize the public health benefits of increasing treatment access and uptake
- Share stories about the personal impact of U=U on people's lives
- Share language, resources, and Tweets





"400K ppl w/ HIV in the US aren't virally suppressed. #UequalsU is an effective way to reach PLWH who are not in care & encourage treatment adherence. And when PLWH are undetectable, they stay healthy & don't transmit HIV thru sex! #AIDSWatch"





Current Implementation Research on U=U

U=U is a Public Health Imperative!

How do we know U=U?

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

| Study | Enrolled Sample | Study Design | Number of Condomless Sex Acts | Number of New HIV Infections | | |
|--|--|--|--|--|---|---|
| | | | | Total | Phylogenetically 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 delayed-ART group | 0 |
| PARTNER1 Rodger et al., 2016 | 1,166 serodifferent couples • 888 in analytic subset • 62% male-female couples | Observational study | 55,193 • 34,214 among male-female couples • 20,979 among male-male couples | 11 | 0 | 0 |
| Opposites Attract Bavinton et al., 2018 | 358 serodifferent male-male couples | Observational study | 12,447 • counted when HIV+ partner virally suppressed with HIV+ partner on PrEP | 3 | 0 | 0 |
| PARTNER2 Rodger et al., 2019 | 972 serodifferent male-male couples • 783 in analytic subset | Observational study | 76,991 | 15 | 0 | 0 |

Sex without condoms > 125,000 times





Universal Access - 3rd U

nam aidsmap

HIV & AIDS - sharing knowledge, changing lives

News

About HIV

About us

HIV prevention policy

US HIV infections could drop by 94% before 2030, if treatment is prioritised

Krishen Samuel | 21 December 2020



Image: pxinoo/Shutterstock.com/Pexels

Modelling estimates suggest that new HIV infections in the US could be reduced by as much as 94% before 2030, if the current HIV prevention budget is spent more efficiently. Priorities would be linking those diagnosed with HIV to care, ensuring that they receive treatment and getting them to the point of viral suppression. Less money would be spent on screening low-risk heterosexuals and PrEP.

CDC model from December 2020

Demonstrates the power of the U=U science to end the epidemic if we can provide people with HIV the services and resources to reach undetectable.

Call to action to fight stigma, systems of oppression and provide healthcare, housing, etc. to all people with HIV.



@PREVENTIONAC





Treatment Goals

PEOPLE WHO HAD A
CONVERSATION ABOUT U=U WITH
THEIR HEALTHCARE PROVIDER

2x

MORE LIKELY TO REPORT
VIRAL SUPPRESSION



1 IN 3
NOT AWARE OF U=U



@PREVENTIONAC

Okoli C, Van de Velde N, Richman B, et al Undetectable equals Untransmittable (U=U): awareness and associations with health outcomes among people living with HIV in 25 countries *Sexually Transmitted Infections* Published Online First: 30 July 2020 doi: 10.1136/sextrans-2020-054551

In partnership with ViiV Healthcare



The Lancet: U=U Calls to Action

Call to action: how can the US Ending the HIV Epidemic initiative succeed?

Health-care professionals need to inform patients living with and affected by HIV about U=U to improve, first and foremost, personal health, as well as public health; sharing this information might greatly improve the social and emotional wellbeing of people living with HIV, reduce HIV stigma, reduce anxiety associated with HIV testing, and help motivate treatment uptake, treatment adherence, and engagement in care.

THE LANCET

February 19, 2021

Chris Beyrer, MD, MPH
Adaora Adimora, MD, MPH
Sally L. Hodder, MD
Ernest Hopkins
Greg Millett, MPH
Sandra Hsu Hnin Mon, MSPH
Patrick S. Sullivan, DVM, PhD
Rochelle P. Walensky, MD, MPH
Anton Pozniak, MD, FRCP
Mitchell Warren
Bruce Richman, EdM, JD
Raniyah Copeland, MPH
Kenneth H. Mayer, MD

#UequalsU
#ScienceNotStigma



The Lancet: U=U Calls to Action

Call to action: how can the US Ending the HIV Epidemic initiative succeed?

Providers:
Advocate for use of the concept of undetectable equals untransmittable (U=U)
in messaging and support all patients to remain virally suppressed.

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The Lancet: U=U Calls to Action

Call to action: how can the US Ending the HIV Epidemic initiative succeed?

A national culturally competent effort is needed to raise awareness of U=U

as a promising approach to reduce HIV stigma, which has a powerful potentiating role in both acquisition risks and treatment challenges.

THE LANCET

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#UequalsU
#ScienceNotStigma



The Lancet: U=U Calls to Action

Call to action: how can the US Ending the HIV Epidemic initiative succeed?

Advocates should be equipped to use the so-called public health argument from U=U in advocacy to increase access and remove barriers to quality health care; ensuring people with HIV have the treatment and services they need to achieve and maintain an undetectable viral load not only saves lives, but also is an effective way to prevent new transmissions.

THE LANCET

February 19, 2021

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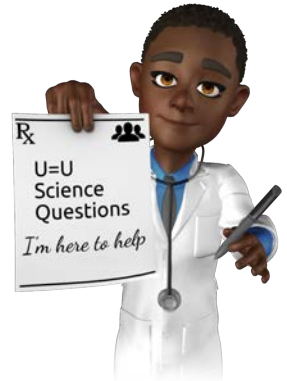
#UequalsU
#ScienceNotStigma



Common science questions

Do people stay undetectable?

- Adherence is key
- The PARTNER study tested at six and twelve months.
- ...and there were no transmissions
- There is a variety of guidance, but it is clear from the PARTNER study, twelve months is sufficient, and viral suppression was durable in between tests.



US FEDERAL HEALTH ACHIEVEMENT



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

Confirmed “**Effectively no risk**” (2017)

Indicated U=U is **100% effective** (2019)

Authorized messaging flexibility, including “**U=U**” (2019)

Integrated U=U into ART guidelines (2019)





For people living with HIV, the promise of being able to **eliminate their risk of transmitting HIV to their sexual partners** by decreasing their viral load through medication adherence can serve as motivation to initiate and maintain care and treatment. Similarly, U=U provides health care providers with scientific evidence and encouraging messages to share with their patients to help increase ART initiation, routine engagement in medical care, ART adherence, and viral suppression.²

The momentum of the spread of the U=U campaign and the underlying message of prevention of transmission as a by-product of viral suppression makes it an attractive option for countries seeking to decrease HIV stigma and discrimination, alleviate fears associated with HIV testing, and, perhaps most importantly, increase ART adherence and retention with hopes of ultimately increasing the proportion of people living with HIV who are virally suppressed.³

1. CDC Global. Undetectable = Untransmittable Strategic Toolkit. https://58b1608b-fe15-46bb-818a-cd15168c0910.filesusr.com/ugd/de0404_dc7f983a5b33410fbdaf62e84a192aa9.pdf Accessed February 28, 2021 Page 8; 2. Page 3; 3. Page 7

GLOBAL ALLIES



U=U education
is a ***minimum
program
requirement***
of all PEPFAR
countries.

The idea that someone living with HIV, who is both on treatment and virally undetectable, cannot transmit the virus to a sexual partner is revolutionary.¹

U=U messaging has the potential to reduce stigma toward PLHIV, including self- stigma; increase demand for HIV testing and ART, including early initiation of treatment; improve treatment adherence; and increase understanding that a suppressed VL is important to maintain the longterm health of PLHIV.¹

The concept of U=U can also strengthen advocacy efforts for universal access to effective treatment and care, and messaging around U=U should be well-integrated into HIV prevention, care, and treatment programs, including those serving key populations.¹

Prevention Access Campaign is the leading site for U=U information, resources, and news.¹

1. PEPFAR. PEPFAR 2021 Country and Regional Operational Plan (COP/ROP) Guidance for all PEPFAR Countries. <https://www.state.gov/wp-content/uploads/2020/12/PEPFAR-COP21-Guidance-Final.pdf>. Page 336. Accessed February 28, 2021 2. Page 338





U=U and

Social Media

- Use the #UequalsU hashtag
- Share often and consistently using accurate, clear language
- Contact PAC for any sample copy or information



Meeting the Public Health Imperative: Health Department Implementation of U=U



Samuel Burgess (he/him)
STD/HIV/Hepatitis Program Manager
STD/HIV Program
Louisiana Department of Health



Marlene McNeese (she/her)
Assistant Director
Division of Disease Control
and Prevention
Houston Health Department



Kenneth Pettigrew (he/him)
Capacity Building Manager
COHAH Government Co-Chair
DC Health



Mariah Wilberg (she/her)
Statewide HIV Strategy and
Services Coordinator
Minnesota Department of Health



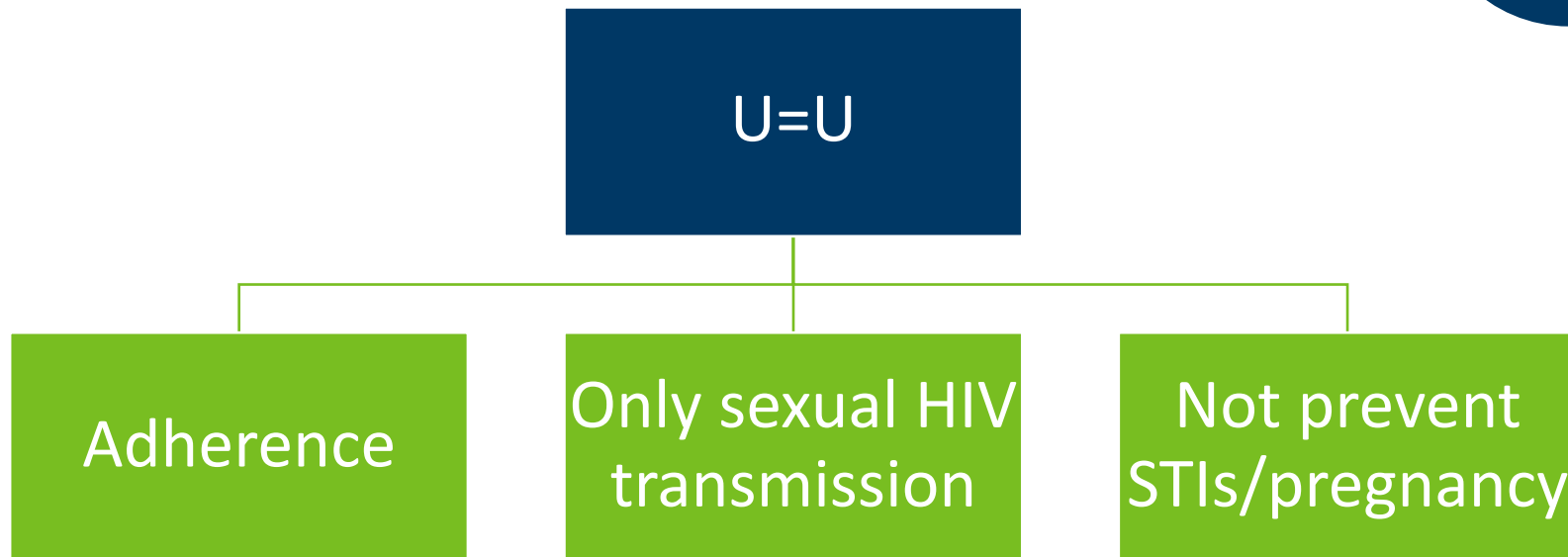
**END
HIV** MN

UNDETECTABLE = UNTRANSMITTABLE IN MN



I agree with the
science, BUT...

Getting to YES: Three Key Messages







Reaching Health Care Providers

END
HIV MN



MetroDoctors

THE JOURNAL OF THE TWIN CITIES MEDICAL SOCIETY

STDs/HIV in Minnesota and New Tools to End the HIV Epidemic

Healthcare providers play a vital role in responding to HIV and STDs in Minnesota. This article discusses the incidence, prevalence and prevention strategies and ways in which you can help.

A New Era of HIV Prevention

There are more options for preventing HIV than ever before. Two recent advancements are using HIV treatment to prevent sexual transmission of HIV and pre-exposure prophylaxis (PrEP), a daily pill that prevents HIV.

When taken as prescribed, HIV medications reduce the amount of HIV in blood, or viral load, to undetectable levels. This allows people living with HIV to live long and healthy lives, and we now have evidence that being undetectable prevents sexual HIV transmission.

Several large studies among couples showed that HIV transmission from a person with undetectable HIV to their HIV-negative sex partner. These results led to the creation of the Undetectable = Untransmittable (U=U) campaign, which convey the consensus that people living with HIV who get and stay undetectable have effectively no risk of sexually transmitting HIV. Minnesota was the third state to join the U=U campaign in October 2017, just weeks after the CDC issued a Dear College Letter¹ indicating the effectiveness of HIV treatment as prevention. For more

information see HIV Undetectable = Untransmittable (U=U) Information for Providers (www.hiv.gov/u=untransmittable).

PrEP is another new HIV prevention strategy where HIV-negative people take HIV medication daily to prevent HIV from establishing an infection after exposure. Currently, Truvada² is the only FDA-approved medication for PrEP. Any healthcare provider with prescribing privileges can prescribe PrEP. It is indicated for people with an increased risk of acquiring HIV, including men who have sex with men, people whose sex partner(s) are living with HIV, people with a recent bacterial STD, people who exchange sex for money or goods, people who inject drugs, and people living in communities with high rates of HIV. For more information, see HIV PrEP for the Primary Care Provider (<http://dx.doi.org/10.1093/cid/cir100>).

all patients about sexual health, talking about sexual risks, completing sexual health histories, providing the necessary screenings and treatments per CDC guidelines, getting infected patients' partners in for testing, and prescribing PrEP when indicated.

Please be sure to report all lab-confirmed cases of chlamydia, gonorrhea, and syphilis, presumptive and confirmed cases of HIV and any reportable disease during pregnancy (even if the patient has been previously reported) to the Minnesota Department of Health as required by state statute.³

HIV Infection in Minnesota

HIV incidence and prevalence remain unacceptably low in Minnesota. In 2016, Minnesota's HIV infection rate was 6.2 per 100,000; slightly less than the Midwest HIV infection rate of 7.5 per 100,000.

How You Can Help

You can make a difference by educating

(Continued on page 10)

By Mariah Wilberg, Jared Shank and Dawn Giff

MetroDoctors: The Journal of the Twin Cities Medical Society



Mariah Wilberg

Jared Shank

Dawn Giff

Undetectable = Untransmittable

A Cure for HIV Stigma?

BY MARIAH WILBERG

FELT LIKE MY LOVE WAS POISON. At 19, I was diagnosed with HIV. I believed I was a danger to my partners and that I could never have a "normal" relationship. This message was reinforced by my care team, who urged me to protect others by using condoms for the rest of my life. Overwhelmed, I refused HIV treatment and care. By 25, my HIV had progressed to AIDS. I started treatment, but HIV was still my shameful secret.

It wasn't until I learned about U=U that I finally accepted my HIV status. I cried as relief washed away years of shame, stigma and fear. I went on to meet and eventually marry my HIV-negative partner, something that would never have been possible before I learned that undetectable means untransmittable.

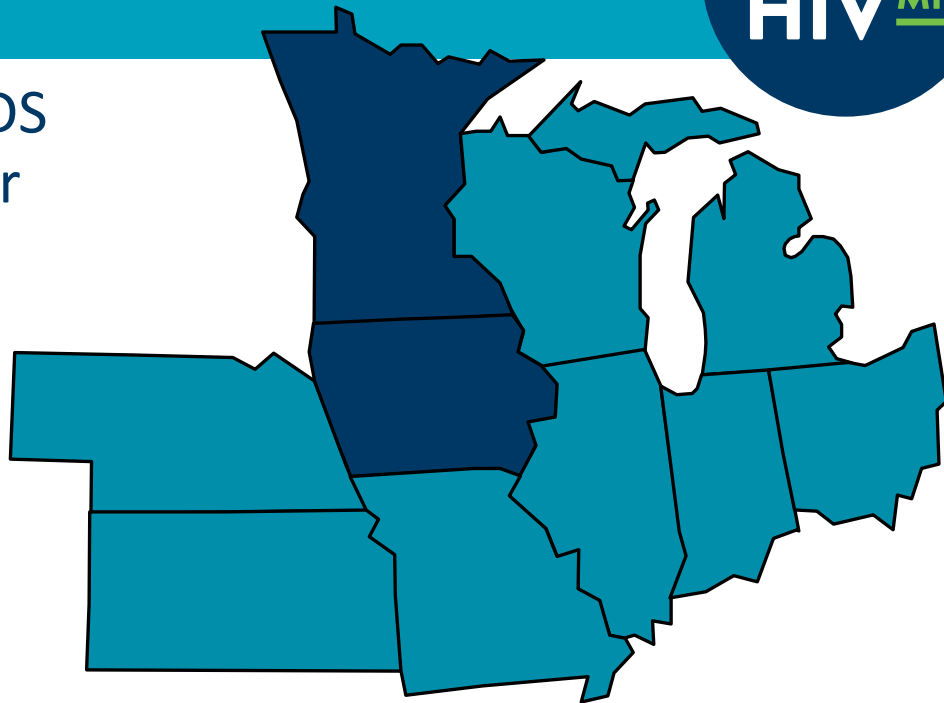
Why didn't anyone tell me?
Combination antiretroviral therapy (ART) marked a new era in the global HIV epidemic, seemingly overnight, HIV was transformed from a death sentence to a chronic but manageable condition. We are on the cusp of another revolution. The power of ART is again

metrosociety.org **metrodoctors** | june, july 2018 **33**

U=U Provider Needs Assessment Survey

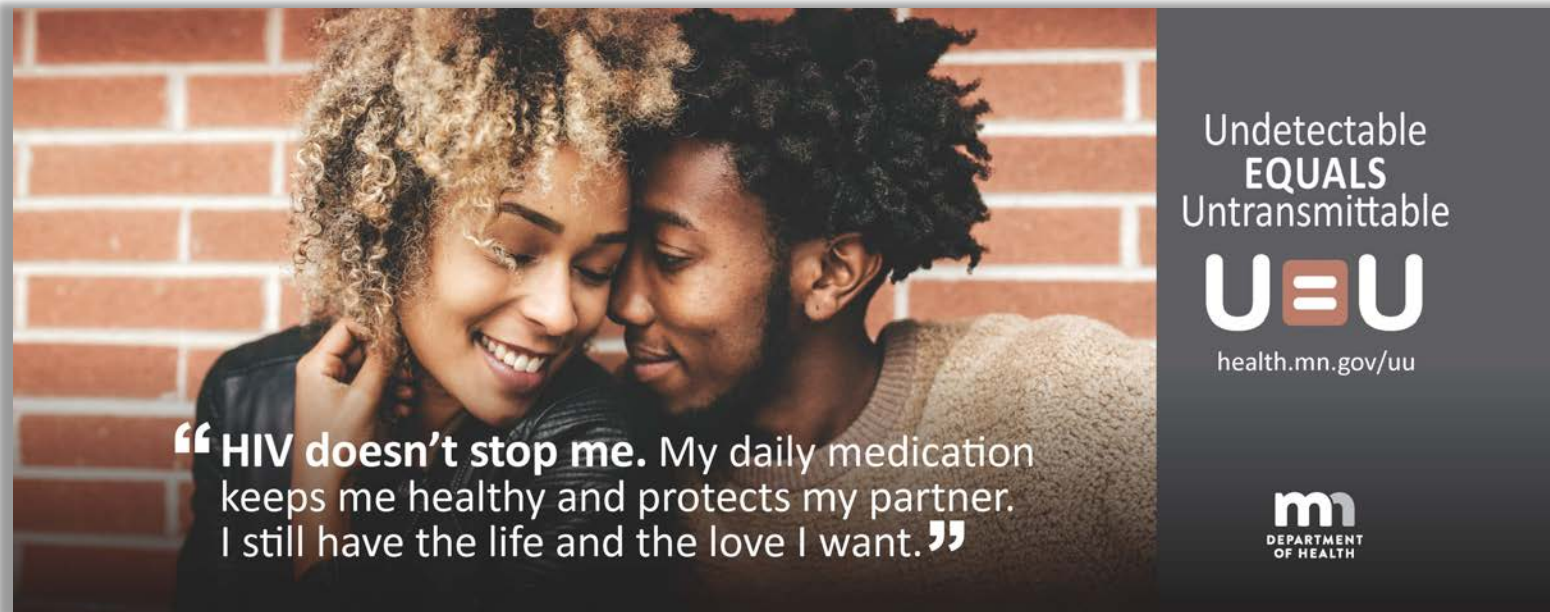
END
HIV ^{MN}

- Partnership with Midwest AIDS Training and Education Center
- Over 400 responses
- Contents:
 - Provider knowledge & beliefs
 - Patient characteristics
 - Message testing
 - Argument rating
 - Qualitative section



Ad Campaign – Up During Superbowl ‘18

END
HIV ^{MN}



“HIV doesn’t stop me. My daily medication keeps me healthy and protects my partner. I still have the life and the love I want.”

Undetectable
EQUALS
Untransmittable

U=U

health.mn.gov/uu

m
DEPARTMENT
OF HEALTH

Cross-Sector Partnership Dedicated to Ending HIV Stigma

END
HIV ^{MN}



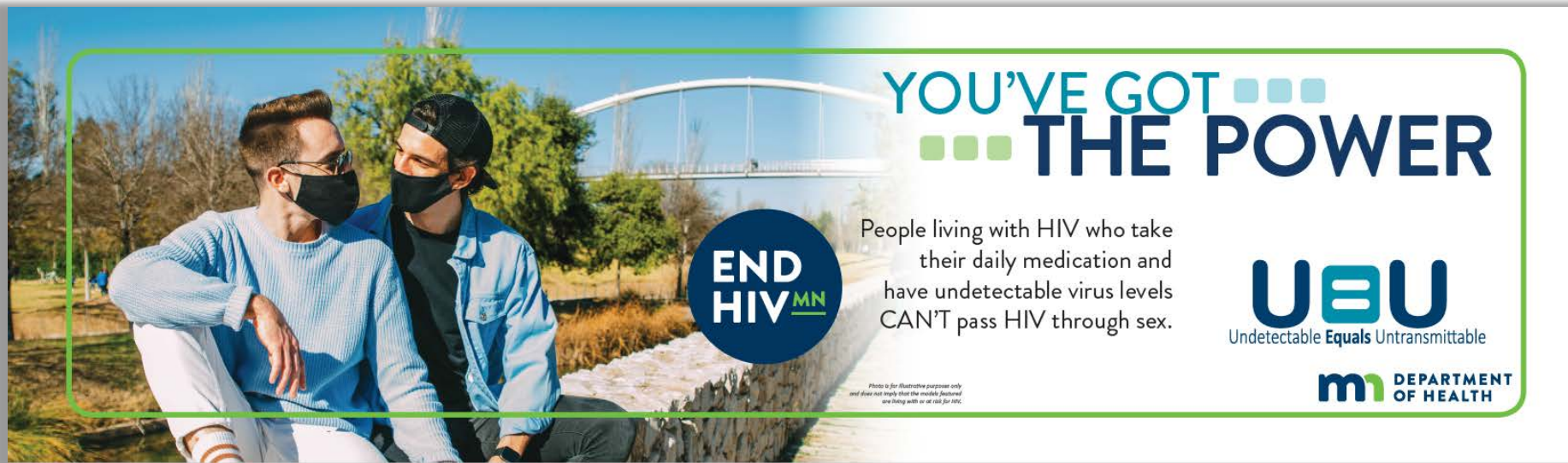
Photo Shoot with PLWH & Folks on PrEP

END
HIV^{MN}



Coming Soon! Another Transit Campaign

END
HIV^{MN}



**YOU'VE GOT ...
... THE POWER**

People living with HIV who take their daily medication and have undetectable virus levels **CAN'T** pass HIV through sex.

END HIV^{MN}

U=U
Undetectable **Equals** Untransmittable

m1 DEPARTMENT OF HEALTH

Photo is for illustrative purposes only and does not imply that the models featured are living with or at risk for HIV.

Replace Stock Photo with This:

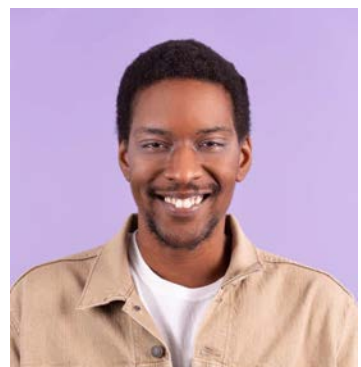
END
HIV ^{MN}



Thank You!



Mariah.Wilberg@state.mn.us



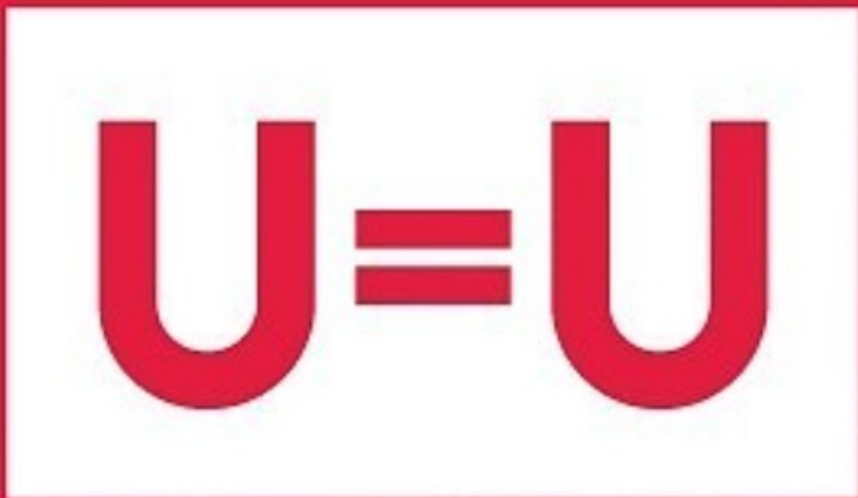


UNDETECTABLE=
UNTRANSMITTABLE

U = U

In Action!





UNDETECTABLE = UNTRANSMITTABLE



lahealthhub



lahealthhub Did you know people who are living with HIV can achieve an #undetectable viral load and CAN NOT transmit the virus to their sexual partners? It's a new day y'all and Louisiana is moving in the right direction. If you haven't gotten tested in a while #start now, because no matter what we can all live healthy lives! #louisiana #uequalsu #hiv #livingwithhiv #healthy #undetectable #untransmittable #pride #starttheconversation #gettested #starttreatment #love #empowerment



lahealthhub



lahealthhub Won't be long until you find some of these pins around your community! U=U signifies that individuals with HIV who receive antiretroviral therapy (ART) and have achieved and maintained an undetectable viral load cannot sexually transmit the virus to others. #sciennotstigma #uequalsu

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. .
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. .
. .

#sexualhealthmatters
#stdprevention#publichealth
#hivtesting #hivisnstd
#louisianahealth #louisianahealthhub
#stdeducation #sexed



lahealthhub



lahealthhub What does U=U
(undetectable = untransmittable)
mean to you? #StartTheConversation

71w



bwillbzz it means that no one
should be afraid to get tested...
we can all live long, healthy, and
normal lives regardless of the
outcome.



dgainsta #UequalsU is the
epitome and foundation of HIV
prevention.



QUESTIONS? COMMENTS?

Sam Burgess

samuel.burgess@la.gov

www.lahealthhub.org

Meeting the Public Health Imperative: Health Department Implementation of U=U

Incorporating Messages into Houston's HIV Programming

Presented by: Marlene McNeese, Assistant Director
Houston Health Department
Disease Prevention and Control Division
Presentation Date: May 5, 2021

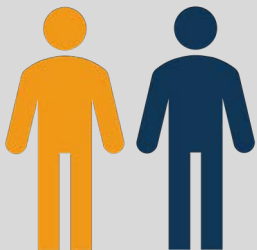


**HOUSTON HEALTH
DEPARTMENT**

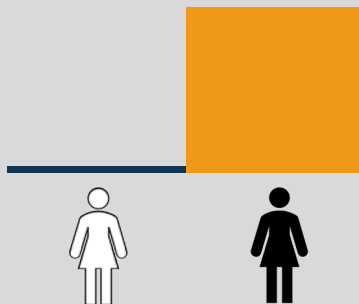
Houston HIV Landscape



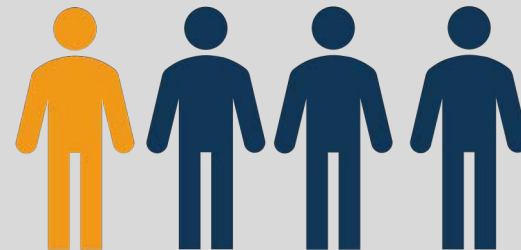
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1 in 2 newly diagnosed
Houstonians is a black or
Latino gay/bi male.



Black women are newly
diagnosed with HIV at
21.1x the rate of white
women.



1 in 4 Houstonians
is uninsured.

Source: (1) Houston Health Department, HIV Surveillance Program. *HIV Infection in Houston: An Epidemiologic Profile 2010-2014*.
(2) Texas Medical Association, Estimates of the Uninsured for Counties in Texas, Adults 18-64, 2015.



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- 1) It is rooted in science,
- 2) It is important to spread the word about the power of viral suppression both for individuals and their communities.
Substantial disparities do exist in access to care, which makes this a social justice issue.
In Houston: Youth and young adults have lower retention and viral suppression compared to older adults, Black (non-Hispanic) males living with HIV have the lowest percent of individuals achieving retention in care and viral suppression compared to all other groups.
- 3) Finally... the HHD is fighting stigma. We want to kill the stigma that those living with HIV can't live and love the same ways as anyone not living with HIV.

If you are living with HIV and taking effective treatment, you can't transmit HIV through sex.

[illegible]

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Challenges to U = U Messaging



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- Health inequities among those persons in care who achieve and sustain viral suppression
- Personal definitions of “in care”
- Language matters! Control of messaging- **can only control what messages and language used by the HHD**
 - Other health departments and agencies (both government and non-government) may use language that local community finds stigmatizing
 - Challenge: Stigmatizing language is not the same for all communities, all individuals and may change over time
- Access impacted by design of a care system to ensure RW reimbursement
 - Multiple steps before provider visit





- Long history of transparent collaboration
 - Be transparent in new initiatives!
- Engage with the stakeholders that community engages with (e.g., CAB, providers, CBOs)
- Buy-in should occur at multiple levels and across stakeholder groups.

U=U Message Dissemination



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- Social marketing campaign for both PrEP and TasP with a specific focus on transgender, non-binary, and gay/bisexual Black and Latinx communities
- May – December 2019, partnered with Houston METRO, and FOX 26 KHOU; combined have delivered 93,043,846 impressions:
- Placements inside on bus cards on all 950 Houston METO buses equating to 1,900 placements; and, the I am Life®, METRO RED LINE light rail platforms in the Texas Medical Center
- Weekly live segments on FOX 26 morning show
 - The FOX 26/I am Life® campaign joint online digital /websites promotions generated 86,386,910 unique visits across FOX 26 website and other sister properties.

I am LIFE
I am here. I exist.
I matter.

If you are living with HIV, you can still fulfill your dreams. **Get In Treatment to Stay Undetectable.**

Undetectable means being Untransmittable as you **live healthy and live longer.**

houstonIamLife.com

#GetTreatment
#stayUndetectable

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Considerations for Program Implementation



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- Achieving viral suppression for people living with HIV requires a change in the entire health care delivery system = Health System Intervention
- Plan time and strategy for addressing racial and social justice; intersectionality - people had hard time talking about race and equity

Acknowledgements

Houston Health Department

- Disease Prevention and Control Division
- Bureau of HIV/STD & Viral Hepatitis Prevention

Gilbreath Communications

HHD IAL and U=U Brand Ambassadors

Dedicated Community Advocates

Administrative Office

Houston Health Department

8000 North Stadium Drive

Houston, Texas 77054



832-393-5010



www.houstontx.gov



**HOUSTON HEALTH
DEPARTMENT**

Panel Discussion

Public Health Resources



Torrian Baskerville (he/him)
Senior Associate
NASTAD



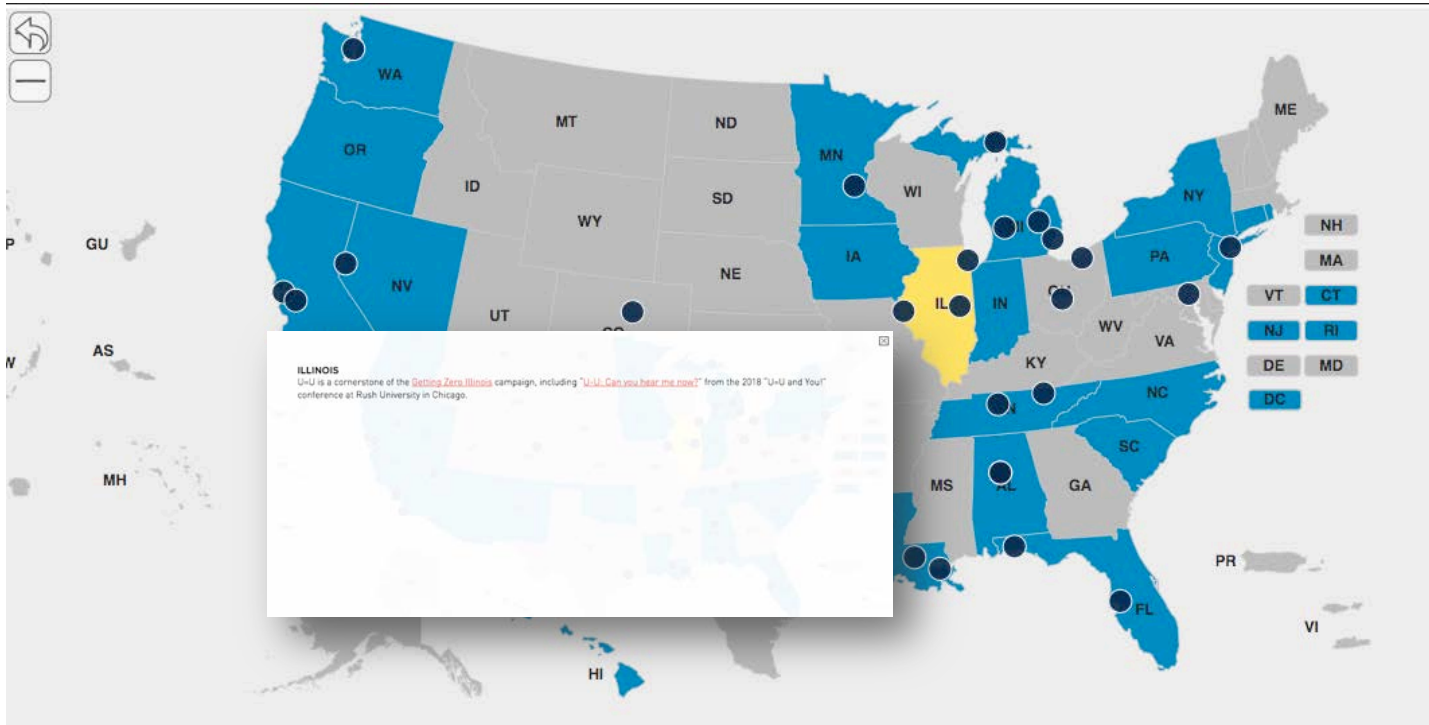
Deondre Moore (he/him)
U.S. Partnerships and Community
Engagement Manager
Prevention Access Campaign

NASTAD U=U Policy Statement



www.nastad.org/sites/default/files/resources/docs/uu-policystatement-2018.pdf

U=U Health Department Engagement Map



www.nastad.org/maps/undetectable-untransmittable-health-department-engagement-map

U=U and EHE Resources

- Sign-on to the U=U Campaign
www.preventionaccess.org/community
- U=U and EHE for Health Departments
www.preventionaccess.org/uuehe
- U=U Public Health Advocacy
<http://bit.ly/uupublichealtharg>
- Positive Series (Downloadable materials)
<https://positiveseries.org/>
- HRSA and CDC letters and other resources:
www.preventionaccess.org/resources





Thank you!

For more information, feel free to reach out to:

Torrian Baskerville – tbaskerville@nastad.org

Dee Conner – dee@preventionaccess.org

Tim Horn – thorn@nastad.org

Cameron Kinker – Cameron@preventionaccess.org

Deondre Moore – Deondre@preventionaccess.org