In 2016, Prevention Access Campaign, activists, researchers, healthcare providers, and health officials launched U=U with the following goals:

1. **Build** a global science-based consensus on U=U.
2. **Disseminate** the widely unknown U=U science.
3. **Advocate** for access to quality treatment and care for people living with HIV to stay healthy and prevent new transmissions.
UNDETECTABLE = UNTRANSMITTABLE

People living with HIV who are on treatment and have an undetectable viral load* have zero risk of transmitting HIV through sex.

*(<200 copies/MI)
Four Key Takeaways:

- **Undetectable viral load** = **ZERO** risk of sexual transmission
- **Any WHO-prequalified test or sample type**, including dried blood spot samples, can confirm an undetectable viral load and all categories
- “Recommends breastfeeding for women taking antiretroviral therapy.”
- **Suppressed (but detectable 200 to \( \leq \) 1,000 copies/ml)** = “Almost ZERO” or “Negligible” risk
Are you thinking this?

U=U is just about people with HIV having sex without condoms
One of the most effective and historic counter-narratives to HIV stigma
- UNAIDS, December 2022

With U=U, treatment has transformed the prevention landscape.
- WHO, UNAIDS, Ministry of Thailand, February 2020

A simple but hugely important campaign built on a solid foundation of evidence.
- The Lancet, November 2017

U=U is the foundation of being able to end the epidemic.
- Dr. Anthony Fauci, July 2019

U=U set me free.
- Maria Mejia, 2017
U=U education is a **global mandate**

U=U is in the Paris Declaration
U=U education is a global mandate

U=U is a core standard

U=U is a program essential
U=U education is a global mandate

U=U was adopted in the 2021 Political Declaration on HIV/AIDS

2022 PCB Report: Undetectable = Untransmittable = Universal Access (U=U=U)
WHY IS U=U A GAME CHANGER?

• Improves quality of life of people living with HIV
• Reduces HIV stigma
• Propels progress towards 95-95-95 goals
  • Diagnosis: Reduces anxiety associated with HIV testing
  • Treatment: Incentive to start treatment and engage in care
  • Viral suppression: Motivation to stay on treatment and in care
• Supports ending discriminatory laws, policies and practices
• Calls for universal access to treatment, care and diagnostics
Making the case to withhold U=U INFORMATION

“We need to focus on getting men tested, not talking about U=U.”

“People are not staying on treatment (not accessing care) why is it important to talk about U=U? Isn’t it dangerous?”

“We haven’t reached the third 95 yet…”
U=U accelerates global targets

95% AWARE

Educating about U=U in testing outreach reduces anxiety & increases testing rates

95% TREATED

Educating about U=U can be a powerful motivator to start and stay on treatment and engaged in care

95% VIRALLY SUPPRESSED
IMPACT: U=U INCREASES HIV TESTING UPTAKE

89% more likely with U=U

p < 0.01
ON EFFECTIVE MEDICATION
HIV CAN'T BE PASSED ON
THROUGH SEXUAL CONTACT
**IMPACT: U=U EDUCATION LEADS TO POSITIVE HEALTH OUTCOMES**

When health professionals inform their patients living with HIV about U=U:

<table>
<thead>
<tr>
<th>Health Outcome</th>
<th>Informed by HCP</th>
<th>Not informed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Optimal Overall Health</td>
<td>61%</td>
<td>45%</td>
</tr>
<tr>
<td>Optimal Mental Health</td>
<td>63%</td>
<td>38%</td>
</tr>
<tr>
<td>Optimal Sexual Health</td>
<td>51%</td>
<td>41%</td>
</tr>
<tr>
<td>Viral Suppression</td>
<td>77%</td>
<td>56%</td>
</tr>
<tr>
<td>Comfortable Sharing HIV Status</td>
<td>33%</td>
<td>20%</td>
</tr>
<tr>
<td>Missed ART Dose ≥5 Times in Past Month Due to Privacy Concerns</td>
<td>3%</td>
<td>9%</td>
</tr>
</tbody>
</table>

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Positive Perspectives Wave 2 study

U=U reduces new HIV transmissions

• 27% increase in people accessing effective HIV treatment, which has resulted in a 66% decrease in new HIV transmissions.

• Each 1% increase in the proportion with an undetectable viral load was associated with a 6% reduction in new HIV cases, with PrEP available 20% reduction.
THIS IS OUR TIME
WIN-WIN AGENDA
Articulating **U=U** as a Win-Win-(win)

U=U perpetuates a ‘virtuous cycle’ of reinforcing impact. These include both the individual and public health benefits associated with reduced viral load and prevention of onward transmission, as well as broad-based (and in some cases still to be quantified) economic and societal benefits.

<table>
<thead>
<tr>
<th>Individual and Public Health</th>
<th>Economic</th>
<th>Societal</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Reduced mortality and improved health outcomes for people with HIV;&lt;br&gt;• Decreased HIV transmission;&lt;br&gt;• Improved mental and sexual health of people with HIV;&lt;br&gt;• Improved HIV testing rates, treatment uptake and adherence;&lt;br&gt;• Investment in service delivery with broad-based health implications;</td>
<td>• Economic gains estimated at $4.02 trillion by 2030 (based on 90-90-90 targets);&lt;br&gt;• Lower death rates, longer lives and decreased healthcare utilization all have significant economic benefit at the national, individual and community level;</td>
<td>• Dismantling of HIV stigma;&lt;br&gt;• A policy tool to remove legal barriers facing people living with HIV;&lt;br&gt;• A tool to address systemic and structural barriers facing people living with HIV/AIDS and members of key populations;</td>
</tr>
</tbody>
</table>
SCIENCE DOESN'T HAVE A PUBLICIST
Tell the truth or we will tell it for you
HIV STIGMA is a public health emergency & U=U is an immediate and effective response.
U=U CONSENSUS STATEMENT

“Risk of Sexual Transmission of HIV from a Person Living with HIV Who Has an Undetectable Viral Load”

Issued July 21, 2016
U=U 1100+ PARTNER NETWORK
105 COUNTRIES

- 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
- Jamaica
- Japan
- Kazakhstan
- Kenya
- Kosovo
- Kyrgyzstan
- Latvia
- Lebanon
- Liberia
- Luxembourg
- Macedonia
- Malawi
- Malaysia
- Mauritius
- Mexico
- Moldova
- Monaco
- Montenegro
- Namibia
- Nepal
- The Netherlands
- New Zealand
- Nigeria
- Northern Ireland
- Norway
- Pakistan
- Panama
- Paraguay
- Peru
- The Philippines
- Poland
- Portugal
- Romania
- Russia
- Scotland
- Serbia
- Singapore
- Slovenia
- South Africa
- South Korea
- Spain
- Swaziland
- Sweden
- Switzerland
- Taiwan
- Tajikistan
- Tanzania
- Thailand
- Trinidad and Tobago
- Tunisia
- Turkey
- Uganda
- Ukraine
- United States
- Uzbekistan
- Venezuela
- Vietnam
- Zambia
- Zimbabwe
1100+ PARTNERS IN 105 COUNTRIES
www.preventionaccess/community
In 2016, the Prevention Access Campaign, a health equity initiative with the goal of ending the HIV/AIDS pandemic as well as HIV-related stigma, launched the Undetectable = Untransmissible (U = U) initiative. 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. This concept, based on strong scientific evidence, has broad implications for treatment of HIV infection from a scientific and public health standpoint, for the self-esteem of individuals by reducing the stigma associated with HIV, and for certain legal aspects of HIV criminalization. In this viewpoint, we examine the underlying science-based evidence supporting this important concept and the behavioral, social, and legal implications associated with the acceptance of the U = U concept.

Subsequent studies confirmed and extended these findings. The PARTNER 1 study determined the risk of HIV transmission via condomless sexual intercourse in 1166 HIV-discordant couples in which the partner with HIV was receiving ART and had achieved and maintained viral suppression (HIV RNA viral load <200 copies/mL). After approximately 58,000 condomless sexual acts, there were no linked HIV transmissions. Since a minority of the HIV-discordant couples in PARTNER 1 were men who have sex with men (MSM), there was insufficient statistical power to determine the effect of an undetectable viral load on the transmission risk for receptive anal sex. In this regard, the Opposites Attract study evaluated transmissions involving 343 HIV-discordant MSM couples in Australia, Brazil, and Thailand. After 16,800 acts of condomless anal intercourse there were no linked HIV transmissions during 588.4 couple-years of HIV disease. Not only did ART provide a nearly normal life expectancy for most people with HIV who adhered to their treatment regimens, it also eliminated the risk of transmitting the virus to an uninfected sexual partner. It became clear that treating people with HIV was a highly effective means of preventing HIV spread. "Treatment as prevention" proved to be a critical addition to the prevention tool kit that also contained measures such as condom use, voluntary medical male circumcision, and screening of the blood supply. Studies of these interventions also provided the critical evidence base for the principle that "undetectable equals untransmissible," or "U = U," which has helped reduce some of the external and sometimes self-imposed stigma associated with HIV infection.
U=U
Around the World
Durban, South Africa
Yaounde, Cameroon
U=U NATIONAL CAMPAIGNS

Zambia  Kenya  Vietnam
We can #endAIDS now if "undetectable equals untransmittable" becomes a reality for all persons living with HIV.

Not only will this ensure optimal quality of life for every person living with HIV but also will help translate the promise of our governments to end AIDS by 2030.
NATIONAL U=U CAMPAIGNS

Ukraine

Government Campaign

Informational Campaign

Promotional video

Targeted advertising

National Branding

https://aryphc.org.ua

https://www.youtube.com/watch?v=h3pl9tF3Yyk

info page / Сайт

Info-company 1st December

Инфокампания к 1 декабря

@PreventionAC
U=U
Undetectable equals Untransmittable

is a scientifically validated and guidelines supported fact\(^{11-14}\) that everyone should be aware of. U=U offers the potential to reduce stigma within communities and healthcare settings, whilst improving health outcomes of people living with HIV.\(^{15,16}\)

To access healthcare professional training and information visit the Terrence Higgins Trust Can't Pass It On campaign

This HIV campaign has been developed by Gilead Sciences with input from and endorsed by:
Band U=U

Japan

@PreventionAC
WHERE ARE WE NOW?
Community-led campaigns worldwide
Kampala, Uganda

IS GAME CHANGER
DISMANTLES HIV STIGMA
PROMOTES GOOD ADHERENCE

UNDETECTABLE = UNTRANSMITTABLE
WHERE ARE WE NOW?

Community-led campaigns worldwide

Montreal, Canada
Communicating U=U

South Africa
WORDS AND ATTITUDES MATTER

Clear
Consistent
Confident
Conscious
WORDS AND ATTITUDES MATTER

Negligible
Extremely unlikely
Helps prevent
Virtually impossible
Close to zero

Zero risk
Can’t pass it on
Can’t transmit
Prevents HIV
Impossible
100% effective
WORDS AND ATTITUDES MATTER

Don’t Say:

I believe in U=U but use a condom and/or PrEP just in case.

Do Say:

Confident

Condoms or PrEP aren’t clinically necessary to prevent HIV with U=U.
WORDS AND ATTITUDES MATTER

Do Say:

Condons 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 HIV positive partner w/HIV is struggling with adherence
- for an added emotional feeling of security and agency
WORDS AND ATTITUDES MATTER

Don’t Say:

You’re only as good as your last viral load test.

Do Say:

If you’re taking your medication as prescribed and having regular viral load tests you don’t need to worry.
WORDS AND ATTITUDES MATTER

Do Say:

If you’re taking you medication as prescribed and having regular viral load tests you don’t need to worry.
WORDS AND ATTITUDES MATTER

Don’t Say:

You never know...

Do Say:

We do know.

Confident

@PreventionAC
WORDS AND ATTITUDES MATTER

Do Say:

We do know.
WORDS AND ATTITUDES MATTER

Change is uncomfortable!

- Must be heard *repeatedly* from the right messengers and credible sources.
- Use targeted channels including social media, outreach activities, patient information, newsletters, clinical/waiting rooms settings
- Make U=U information prominent, not buried in text.

- Make U=U central to speeches/events including AIDS Walks, and other public events.
- Have a conversation with those living with or vulnerable to HIV at every opportunity.
- Celebrate U=U!
WORDS AND ATTITUDES MATTER

Viral load ≠ Value

- Not everyone can achieve and maintain an undetectable viral load.
- Structural and social barriers make it difficult or impossible 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.
WORDS AND ATTITUDES MATTER

Viral load ≠ Value

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

- Use the U=U win-win strategy to increase access and remove barriers to information, treatment and care.

- #LeaveNoOneBehind
# What constitutes “viral suppression”?

<table>
<thead>
<tr>
<th>Source</th>
<th>Measurement (copes/mL)</th>
</tr>
</thead>
<tbody>
<tr>
<td>WHO</td>
<td>“suppressed but detectable”</td>
</tr>
<tr>
<td>CDC</td>
<td>“viral suppression”</td>
</tr>
<tr>
<td>PEPFAR</td>
<td>“viral suppression”</td>
</tr>
</tbody>
</table>


What constitutes “viral suppression”?

PEPFAR:

It should be noted that for calculating the third 95 (virological suppression) a cutoff of <1000 cps/ml is used. This is not the clinical definition of viral suppression. Any viral load over 50 cps/ml is actionable and should prompt ascertainment of barriers to treatment and provision of support... (Page 266)

A quantifiable VL above 50 cps/ml should prompt an evaluation of barriers to treatment, enhanced adherence counseling and a repeat viral load. (Page 267)

Goal of therapy

PEPFAR

The goal of treatment for all people living with HIV is durable viral suppression, which reduces morbidity and mortality and prevents HIV transmission

*<50 copies/mL

WHO

The ultimate goal for all people living with HIV is to reach and sustain undetectable viral loads. Taking antiretroviral therapy as prescribed will support this goal, prevent transmission to their sexual partner(s) and/or children, and improve their own clinical well-being

* Not detected by the test or sample type used.
# EMBRACING INNOVATION

Choose facts over fear

<table>
<thead>
<tr>
<th>Recognize cognitive dissonance</th>
<th>Separate feelings from facts</th>
<th>Consider the negative and positive impacts</th>
<th>Borrow confidence from the experts</th>
</tr>
</thead>
</table>

@PreventionAC
Are you still thinking this?

U=U is just about people with HIV having sex without condoms
Throughout the history of the global HIV epidemic, rarely has such a clear opportunity emerged to alter its course.

There is a worldwide possibility to fight HIV stigma and improve HIV prevention, care, and treatment outcomes by following the science and disseminating the evidence-based U=U message at scale.

Doing so will propel nations, and the entire world, one step closer to finally ending the epidemic.

United States & Canadian Government
Multinational Undetectable=Untransmittable (U=U) Call-to-Action
issued at the World AIDS Conference 2022
JOIN THE MOVEMENT

Integrate U=U into global and national strategies, policies, laws, guidelines

Educate and encourage dialogue about U=U among healthcare professionals, policymakers, and community

Promote U=U clearly, repeatedly, and prominently in health communications reaching key populations and the public

Advocate to remove barriers to treatment, care and services to improve the quality of life of PLHIV and prevent new transmissions
TO END HIV
WE MUST LET
PEOPLE LIVING WITH HIV LEAD!

Bruce Richman
bruce@preventionaccess.org
Preventionaccess.org

#UequalsU
#WinWinAgenda