

HSE launches national campaign to address HIV related stigma

Campaign aims to raise awareness that HIV treatment is effective in keeping people healthy and in preventing onward transmission

The HSE Sexual Health and Crisis Pregnancy Programme (SHCPP) today, 27th January, launched a new campaign to address HIV related stigma.

HIV related stigma can happen when misconceptions about HIV lead to negative attitudes towards people living with HIV or misunderstandings about what it means to receive a HIV diagnosis. HIV related stigma can affect the mental wellbeing of people who are living with HIV; and fear of being discriminated against or judged negatively can prevent people living with HIV from disclosing their HIV status or accessing treatment. HIV related stigma can also deter people who may have been exposed to HIV from testing because they fear getting a positive result.

HIV infection is manageable. Effective treatment allows people living with HIV to remain healthy and can restore health in those who have become unwell with HIV infection. Furthermore effective HIV treatment also prevents HIV being passed on to others [note 1].

It is very important that these messages are communicated widely to ensure that people living with HIV know that they can live long and healthy lives and do not have to worry about passing on HIV to others. It is also very important that the public are aware of the progress that has been made in HIV treatment in relation to preventing sexual transmission and to encourage people who may have been exposed to HIV not to be concerned about having a HIV test.

From today, campaign posters with the tagline 'Effective treatment means you can't pass HIV onto partners' will appear in public transport, social venues and college locations across the country, as well as on digital platforms. The campaign references the global U=U campaign (undetectable equals untransmittable) [note 3].

The campaign was informed by robust evidence which shows that effective HIV treatment prevents HIV being passed on to sexual partners [note 1]. The campaign was developed by the HSE SHCPP in consultation with community groups and sexual health NGO organisations. Funding for the campaign was provided by the Department of Health as part of the HIV Fast Track Cities Initiative [note 5].

Dr Fiona Lyons, Consultant Physician at the GUIDE clinic said “It is important that people have access to early testing and treatment for HIV. Effective treatment prevents HIV associated illness for those living with HIV and reduces the level of virus in the body to an undetectable level, so that HIV cannot be transmitted to sexual partners”.

Maeve O’Brien, Interim Lead for Sexual Health and Crisis Pregnancy said “There is still a lack of understanding around HIV and what it means to live with HIV today and it’s important to address this. This public awareness campaign will improve people’s understanding of HIV and highlight the importance of early testing and treatment for HIV”.

For more information on HIV transmission, testing and treatment please visit www.sexualwellbeing.ie/HIV

The campaign can be found at https://twitter.com/_respectprotect

Ends

Notes to Editors:

1. More information on the benefit of HIV treatment is outlined in the HSE Position Statement on Antiretroviral Therapy and summarised in the Antiretroviral Therapy patient information leaflet, available on www.sexualwellbeing.ie/HIV.

Why is antiretroviral therapy beneficial?

HIV treatment is beneficial from an individual perspective, in that it keeps your immune system strong, restores the immune system if it has been damaged by HIV and reduces the risk of HIV related illness and death.. HIV treatment is also beneficial from a population perspective in that it prevents HIV being passed on to others. This is known as Treatment as Prevention (TasP).

What is the evidence?

Individual benefit

- In August 2015, the findings of the START study were published. (Molina JM et al. Initiation of Antiretroviral Therapy in Early Asymptomatic HIV Infection. INSIGHT START Study Group N Engl J Med. 2015 Aug 27;373(9):795-807) This clinical trial found that people living with HIV have a considerably lower risk of developing AIDS or other serious illnesses if they start taking antiretroviral treatment (ART) sooner, when their CD4 cell count is above 500, instead of waiting until their CD4 cell count drops below 350 (which is when people were previously advised to start treatment).

- A study that monitors people living with HIV, published in the Lancet in May 2017 ([https://www.thelancet.com/journals/lanhiv/article/PIIS2352-3018\(17\)30066-8/fulltext](https://www.thelancet.com/journals/lanhiv/article/PIIS2352-3018(17)30066-8/fulltext)), confirms that many people living with HIV can expect to live as long as their peers who do not have HIV. People who start HIV treatment and achieve CD4 counts over 350 by the end of their first year of treatment have life expectancies approaching normal.

Population benefit

- In a large study called the PARTNER Study, people with HIV who were taking treatment with an undetectable viral load did not pass on HIV to their partner.
 - The first phase, PARTNER1 (Rodger AJ et al. Sexual Activity Without Condoms and Risk of HIV Transmission in Serodifferent Couples When the HIV-Positive Partner Is Using Suppressive Antiretroviral Therapy. JAMA. 2016 Jul 12;316(2):171-81. doi: 10.1001/jama.2016.5148), looked at several hundred gay and straight couples who were having sex without a condom and where one partner was HIV positive and one partner was HIV negative. Results, first presented in 2014, found that where the HIV positive partner was on treatment and had an undetectable viral load they did not pass on HIV to their partner. This applied to vaginal and anal sex without a condom.
 - The second phase, PARTNER2 (Rodger AJ, Cambiano V, Bruun T et al. Risk of HIV transmission through condomless sex in serodifferent gay couples with the HIV-positive partner taking suppressive antiretroviral therapy (PARTNER): final results of a multicentre,prospective, observational study. Lancet. 2019 May 2), recruited gay male couples only, to improve the level of evidence available for gay men. Overall several hundred gay couples were enrolled through PARTNER1 and PARTNER2. Results presented at the 22nd International AIDS Conference in July 2018, similarly found that the risk of HIV transmission when the HIV positive partner was on treatment and had an undetectable viral load was effectively zero. This research now provides a similar level of confidence for gay men as for heterosexual couples.
2. The HSE published its **Position on Antiretroviral Therapy for all people living with HIV** in July 2017, which recommends that *“all people living with HIV attending HIV services in Ireland are offered antiretroviral therapy as soon as possible and informed of the benefits of antiretroviral therapy in improving their personal health and reducing HIV infectiousness.”* <https://www.sexualwellbeing.ie/sexual->

[health/sexually-transmitted-infections/information-on-hiv/hse-position-on-antiretroviral-therapy_vfeb2018.pdf](https://www.hse.ie/eng/health/sexually-transmitted-infections/information-on-hiv/hse-position-on-antiretroviral-therapy_vfeb2018.pdf)

3. Undetectable equals Untransmittable (U=U): effective treatment keeps HIV at an undetectable level in the body. This means the virus can't be transmitted to sexual partners. U=U campaign <https://www.preventionaccess.org/about>
4. The international UNAIDS targets for 2020 are that:
 - 90% of all people living with HIV know their HIV status
 - 90% of those diagnosed are receiving HIV treatment
 - 90% of those on HIV treatment are virally suppressed
5. In June 2019, Dublin, Cork, Galway and Limerick signed up to the HIV Fast-track Cities Initiative. The Initiative is supported by the Department of Health, in line with Healthy Ireland and the Healthy Cities programme, and has been endorsed by an Taoiseach and the Minister for Health. In addition to the above UNAIDS 90-90-90 targets, the HIV Fast-track Cities Initiative includes the target:
 - Zero stigma and discrimination
6. The 2018 HIV estimates for Ireland were developed by HPSC in collaboration with UNAIDS:
 - The number of people living with HIV in Ireland at the end of 2018 is estimated to be 7,200 (95% CI 6,200-8,000).
 - Approximately 90% (95% CI 78%-100%) of people living with HIV are estimated to be diagnosed while 10% remain undiagnosed (UNAIDS target: 90%).
 - Approximately 88% (95% CI 77%-99%) of people who are diagnosed with HIV are estimated to be on antiretroviral therapy (ART) (UNAIDS target: 90%).
 - Approximately 95% (95% CI 82%-100%) who are on ART are estimated to be virally suppressed (UNAIDS target: 90%).

HSE Health Protection Surveillance Centre. HIV estimates for 2018 in Ireland using Spectrum, a UNAIDS-supported modelling tool. Dublin: HSE HPSC; 2019.

Available on <https://www.hpsc.ie/a-z/hivandaids/hivdataandreports/HIV%20estimates%20for%202018%20in%20Ireland%20and%20final.pdf>

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