

# Multinational Undetectable = Untransmittable (U=U) Call-to-Action

*U=U accelerates progress towards national and global goals to end the HIV epidemic*

This call-to-action urges all nations to support the evidence-based U=U message and incorporate U=U into national efforts to prevent, diagnose, and treat HIV. Doing so can improve the health of individuals and communities and accelerate progress towards the Joint United Nations Programme on HIV/AIDS (UNAIDS) 95-95-95 targets<sup>viii</sup> and related initiatives to achieve epidemic control.

Leading global medical, scientific, and public health institutions accept and promote U=U. UNAIDS, the World Health Organization (WHO), and the U.S. President's Emergency Plan for HIV/AIDS Relief (PEPFAR) endorse U=U and call for U=U's inclusion in official guidelines, statements, programming, and communications to ensure broader dissemination of the science and greater impact for those affected by HIV<sup>ix-xi</sup>.

## *U=U Improves Outcomes for Individuals and Communities*

U=U knowledge has been linked to improved HIV prevention, care, and treatment outcomes among diverse populations in high and low resource settings in over 25 countries spanning every region of the world. These benefits span every step of the continuum from HIV diagnosis to viral suppression.

U=U education increases uptake of HIV testing<sup>xii</sup> and has been linked to improved treatment adherence and viral suppression<sup>xiii-xiv</sup>. U=U knowledge impacts factors known to influence quality of life and health outcomes, including decreased stigma<sup>xv</sup>, improved self-image and mental health<sup>xiii</sup>, feeling better about HIV status<sup>xvi</sup>, and comfort with and frequency of sharing HIV status with partners<sup>xiii</sup>.

Increasing viral suppression at the community level has been shown to lead to steep, multi-year decreases in new HIV diagnoses among key populations<sup>xvii</sup>. Combination prevention strategies, including prioritizing HIV diagnosis through home-based testing, immediate linkage to care, and support for treatment adherence, can lead to greater reductions in HIV incidence compared to standard of care<sup>xviii</sup>.

This accumulating evidence underscores how U=U can be leveraged to reach the 95-95-95 goals and support national efforts to end HIV as a public health crisis. Greater support of U=U is a win-win; improving the health of people living with HIV improves the public health of communities.

## *Strategies for U=U Integration*

The following strategies presented for consideration are informed by the evidence base, emerging and promising practices, and lessons learned from national U=U rollouts. These strategies are intended to be applicable in diverse settings when developed with the meaningful and ongoing involvement of people living with HIV, key populations, and other affected stakeholders from all sectors and in collaboration with multiple levels of government.

- Develop national strategies for sustainable and effective countrywide U=U programs that are informed by the communities and individuals most impacted;
- Integrate U=U science into HIV guidelines and official communications;
- Implement policies to address inequities, decrease barriers, and increase access to treatment, care, and diagnostics;

- Include U=U as a mandatory component of existing HIV prevention, care, and treatment research, services, policies, and programs;
- Use U=U in health education and promotion efforts to generate demand and increase utilization of testing, prevention, care, and related services;
- Conduct U=U awareness campaigns for key populations and the general public to decrease stigma;
- Improve access to and uptake of HIV treatment and viral load testing to ensure equitable access to the benefits of U=U, particularly those in low-resource settings;
- Recognize U=U as a primary HIV prevention method and/or adopt combination prevention strategies that prioritize prompt diagnosis, linkage to care, and treatment adherence support for people living with HIV; and
- Train, support, and require the HIV prevention and care workforce, including clinicians, peers, and other support professionals to deliver accurate and concise U=U messages during service delivery.

## Conclusion

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. As global leaders unite to amplify U=U, let all nations follow the science to achieve 95-95-95 goals and worldwide elimination of HIV.

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