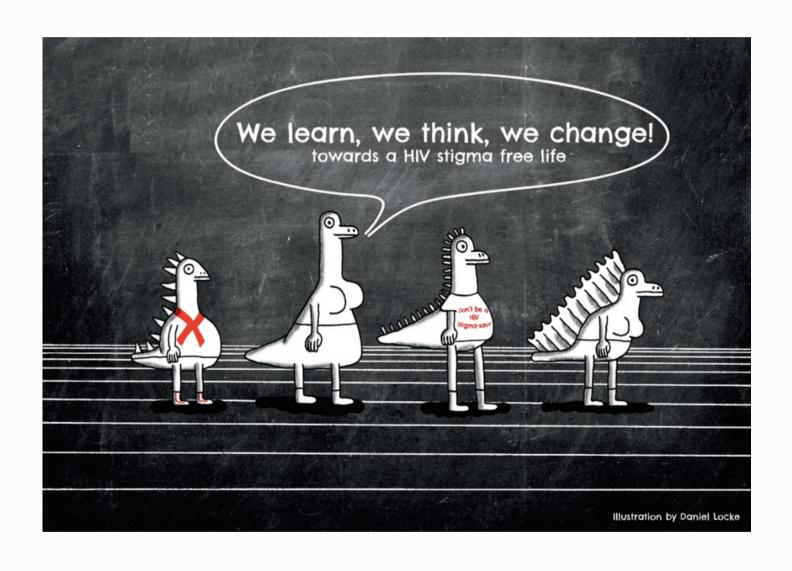
EILEEN NIXON, NURSE CONSULTANT HIV FUNGAI MURAU, RESEARCHER, ADVOCATE & ACTIVIST GILLIAN DEAN, CONSULTANT HIV/GU MEDICINE



HIV in 2021

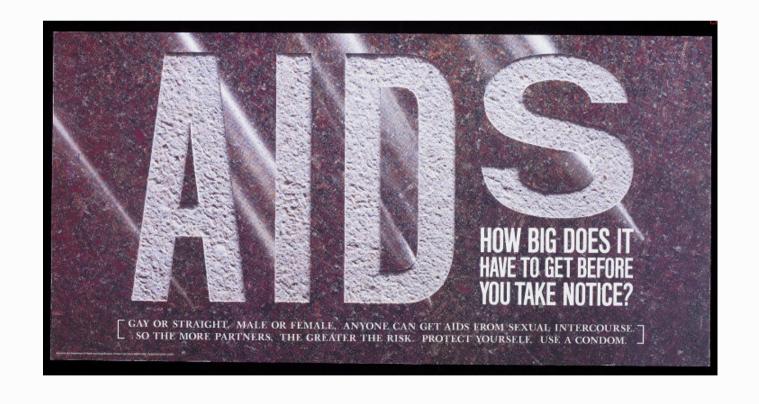
Why we need to end HIV Stigma







AIMS OF THE PRESENTATION



List of key updates

- HIV epidemic
- Progress towards ending HIV transmission
- The effect HIV stigma on people living with HIV
- Action plan to reach zero stigma in Brighton & Hove
- What YOU can do to help





HOW HIV BECAME A MANAGEABLE LONG-TERM CONDITION



Prevention is the only cure we've got.

"AIDS is exceptional. The response to AIDS needs to be equally exceptional"

Dr Peter Piot, UNAIDS Executive Director. London, 8 Feb 2005

"A mere disease, a disease that is not easily contagious, a disease that was a circumscribed epidemic just 25 years ago, has morphed into a pandemic of cumulatively over 65 million people! And this pandemic will continue to expand for decades!"



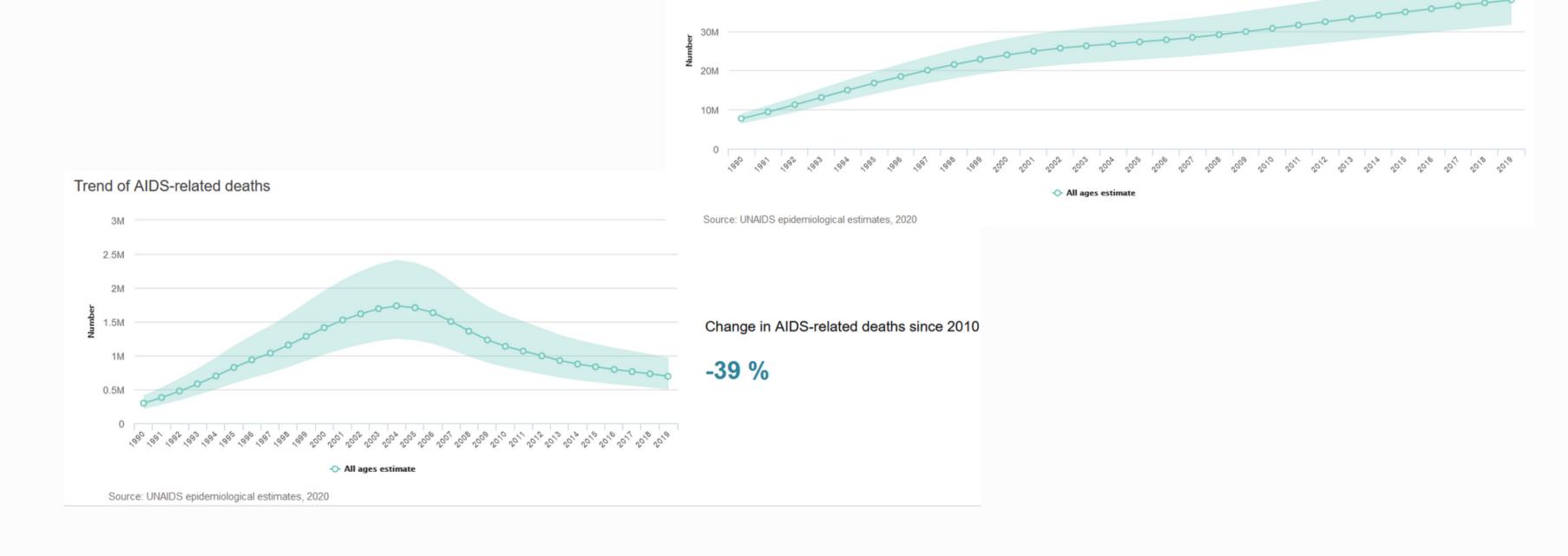
Putting 15 million people on treatment in 15 years was a dream.

Today, it's a reality.

Michel Sidibe, Executive Director, UNAIDS

#AIDS2016

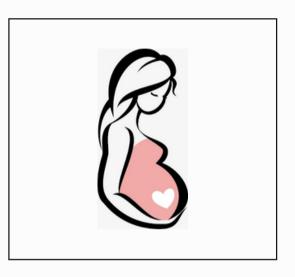
RISING NUMBERS OF PEOPLE LIVING WITH HIV

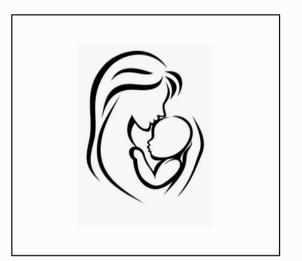


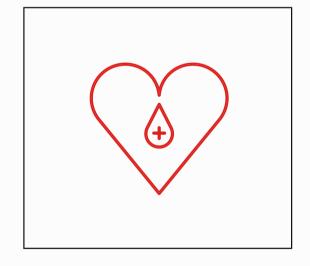
People living with HIV (all ages)

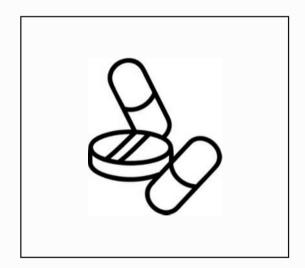
40M

MOTHER-TO-CHILD TRANSMISSION



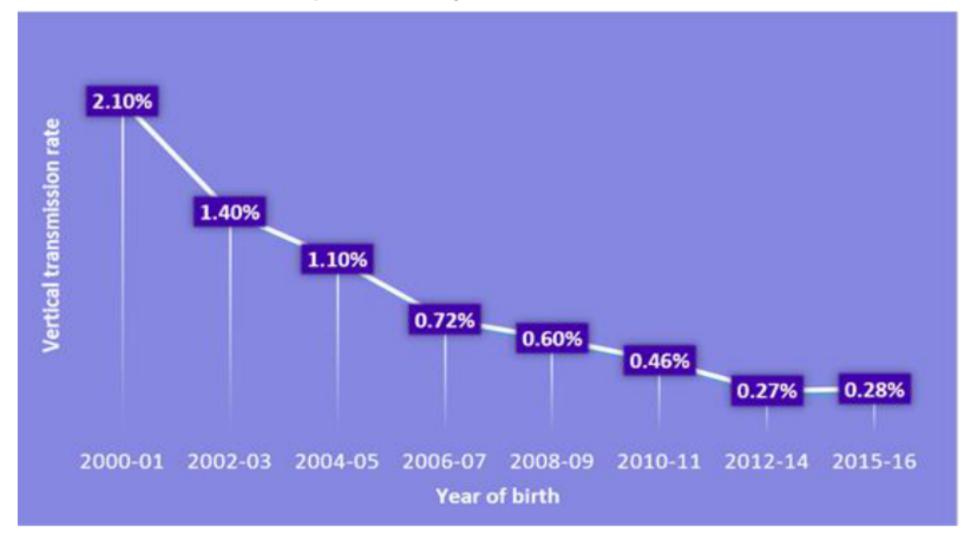








Vertical transmission in UK/Ireland, 2000-2016



Data for 2000-11 from Townsend *et al.* AIDS 2014; data for 2012-14 from Peters *et al.* CID 2016; data for 2015-16 from *Peters et al.* HIV Drug Therapy Glasgow 2018



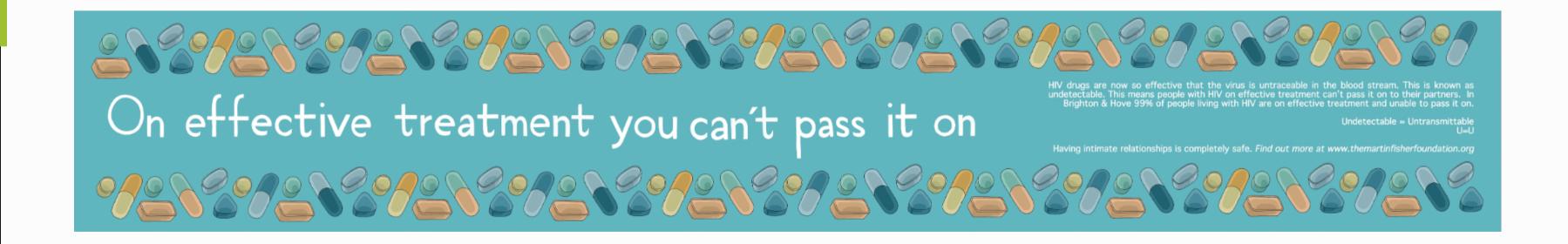
Link to National Surveillance of HIV in Pregnancy & Childhood (NSHPC) here



HIV TREATMENT AS PREVENTION

Effective HIV treatment ensures you can't pass it on





Donnell D, Baeten JM, Kiarie J et al. Lancet 2010. Cohen MS, Chen YQ, McCauley M et al. N Engl J Med 2011. Rodger AJ, Cambiano V, Bruun T, et al. JAMA 2016. Rodger AJ, Cambiano V, Bruun T, et al. Lancet 2019.



The Lancet HIV 2017 4, DOI: (10.1016/S2352-3018(17)30183-2)





OCCUPATIONAL EXPOSURE TO HIV

HIV transmission from a patient to a healthcare worker is very rare. If the HIV patient has an undetectable viral load, Post Exposure Prophylaxis (PEP) is NO LONGER INDICATED

Universal precautions for handling blood & bodily fluids

There are no additional infection control measures required to look after a person with HIV unless they have another infection that requires additional infection control measures /PPE

Gloves and aprons are NOT required

When there is no potential for exposure to blood or bodily fluids





LIVING WITH HIV TODAY



CURRENT CHALLENGES FOR PEOPLE LIVING WITH HIV

While many people living with HIV are well and stable, many also face the following issues:

- ageing faster than general population, increasing co-morbidities / multi-morbidity
- higher prevalence of mental health issues
- social isolation due to death of many peers
- transition from paediatric to adult care
- increasing homelessness / recreational drug use / financial hardship / unemployment
- difficulty remaining engaged with HIV treatment and care for life
- stigma and discrimination





ENDING HIV TRANSMISSION



ENDING THE HIV EPIDEMIC **BY 2030**

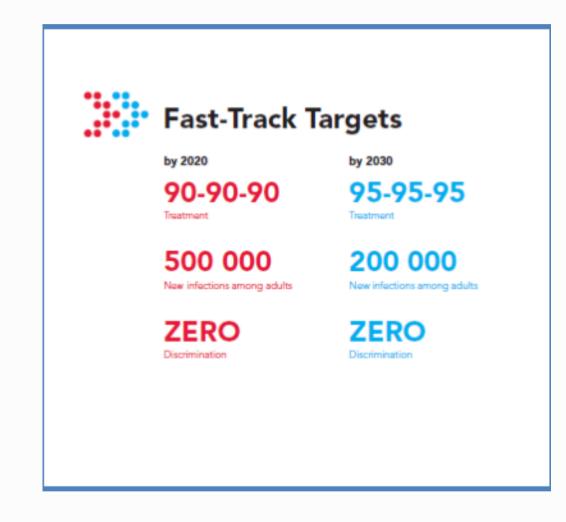


PARIS DECLARATION

1 December 2014 (amended 24 July 2018)

FAST-TRACK CITIES: ENDING THE AIDS EPIDEMIC

Cities achieving the 90-90-90 targets by 2020













On treatment

Virally suppressed

BRIGHTON & HOVE

Fast-track cities: Ending the AIDS epidemic

Cities achieving 90-90-90 targets by 2020

Paris declaration 1 Dec 2014

Brighton & Hove Fast track city 2019

94%

99%

99%

and aiming for zero discrimination!







Twenty point action plan - first four tackling HIV stigma & discrimination

ACTION 1: All national and local HIV treatment and prevention initiatives should explicitly plan and evaluate how they will address HIV-related stigma, discrimination and health inequalities

ACTION 2: Training on HIV and sexual health should be mandatory for the entire healthcare workforce to address HIV stigma and improve knowledge of indicator conditions

ACTION 3: Implement a programme of coordinated national campaigns across the decade, aiming to enable residents in England to know how to find out their HIV status and increase their awareness of combination HIV prevention

ACTION 4: Opt-out rather than opt-in HIV testing must become routine across healthcare settings



WHAT IS HIV STIGMA AND DISCRIMINATION?



HIV STIGMA DEFINITIONS

Self or internalised stigma

Acceptance of negative self-beliefs associated with having HIV

Anticipated or perceived stigma

Negative beliefs and expectations of treatment/care

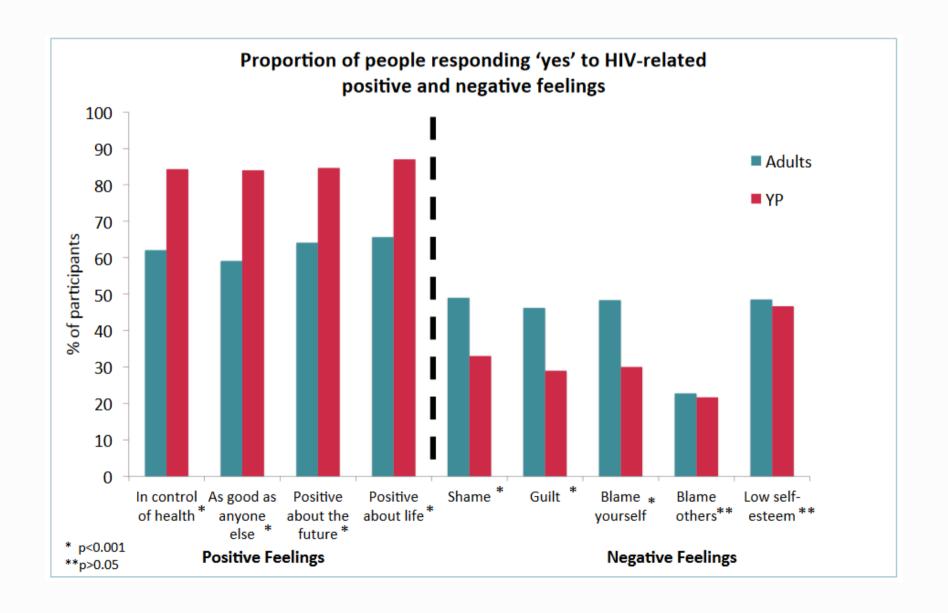
Discrimination

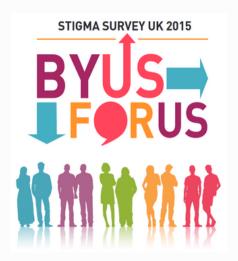
Negative and devaluing treatment of people due to their HIV status



SELF IMAGE

An intergenerational comparison of positive self-image across the UK The Young People Living with HIV Stigma Survey UK 2017



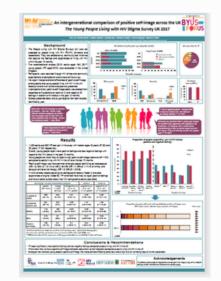


1,450 adults and 300 YP took part in the study

- median age adults 45 years (37,52)
- median age YP 20 years (17,22)

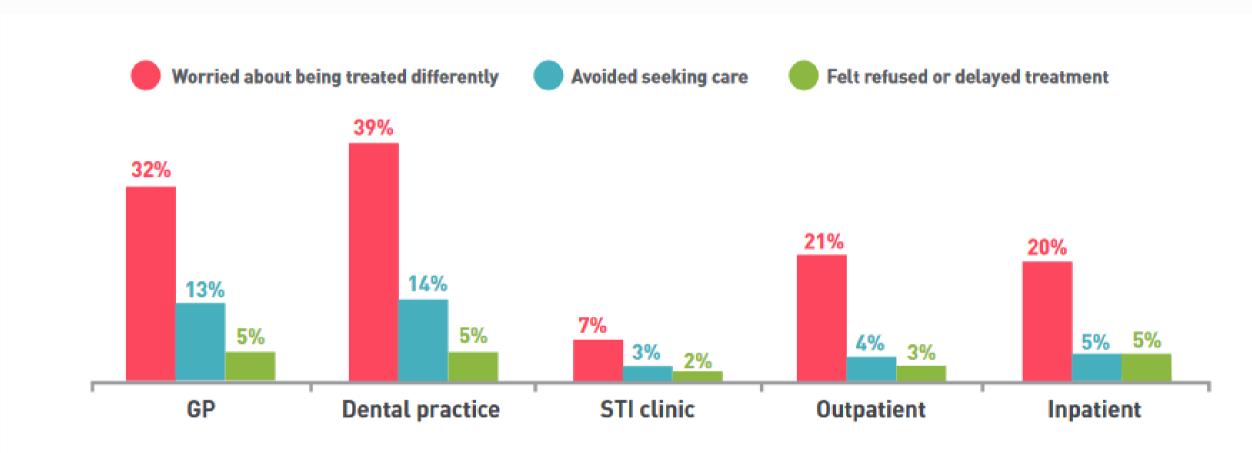
In the last 12 months, have you experienced the following in relation to your HI	V status?
Felt suicidal?	18%
If diagnosed HIV positive in the last 12 months, felt suicidal?	28%





HEALTHCARE SETTING EXPERIENCES





Heard negative comments from a healthcare worker about your stats or other PLWH	13%	
Felt there was excess attention to using barrier protection e.g. gloves, masks	21%	
Been given the last appointment of the day, not by choice	12%	



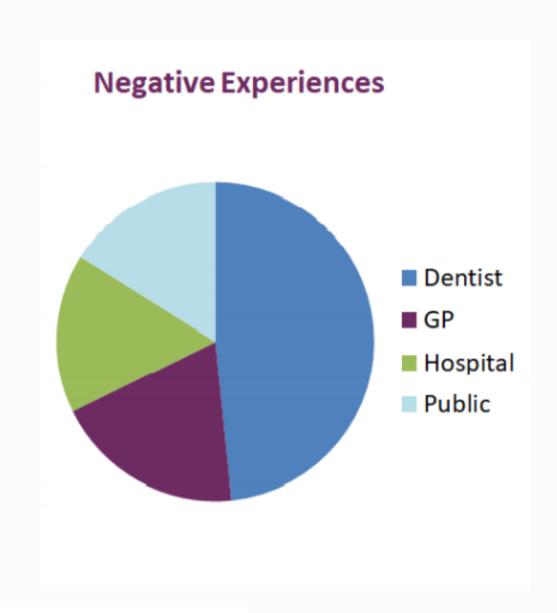


HIV STIGMA & DISCRIMINATION IN BRIGHTON AND HOVE



BRIGHTON & HOVE STIGMA DATA





Positive Voices Survey 2017 – Brighton and Hove qualitative data



Examples from Brighton & Hove data

"When I attended my GP she made me feel very upset because instead of reading my notes to find out that I contracted my HIV from my ex who I was with for a long time and had 2 children with she came straight out and asked if I contracted it by sleeping around."

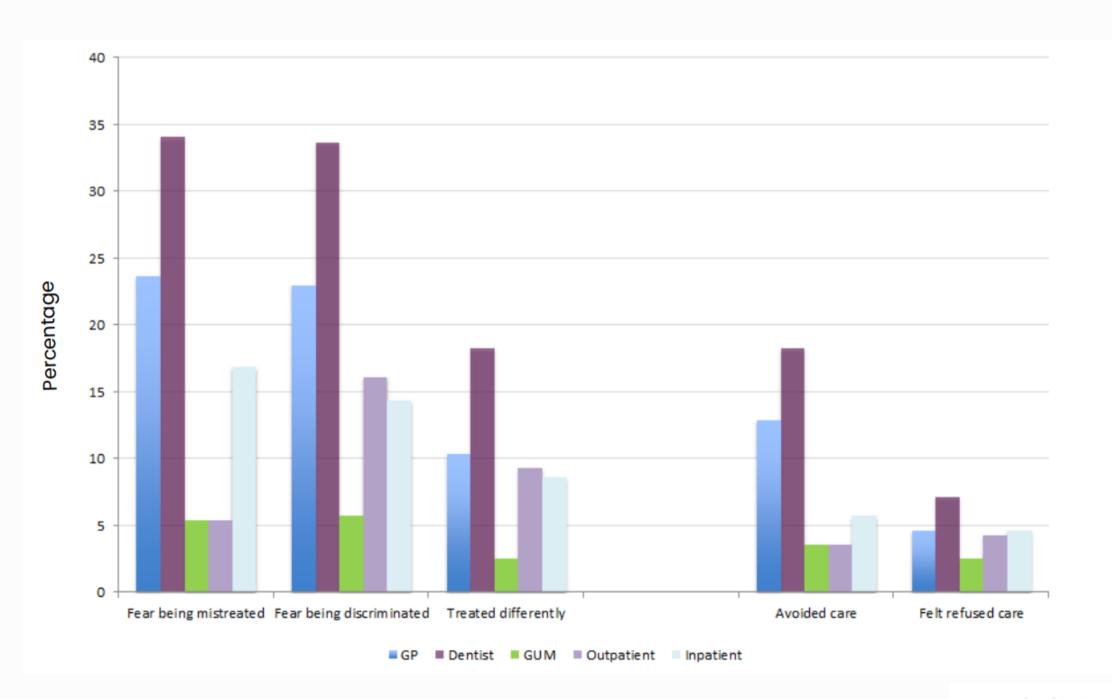
"The last 3 times I have been at xxxxxx they have been nasty. On one occasion I was asked because they could see my medical one occasion I was asked because they was asked because they was asked because they was asked

"I was refused cosmetic surgery 4 years ago - consultant said HIV patients are too high risk for cosmetic surgery".

"A (dental) hygienist at xxxxx Practice victimised me and then refused to treat me because of my HIV status."



SOUTH EAST ENGLAND STIGMA EXPERIENCES





WHY IS HIV DIFFERENT FROM OTHER LONG-TERM CONDITIONS?



STIGMA IN OTHER LONG TERM CONDITIONS

Diabetes

- patients surveyed in US in 2017
- -n=12,000
- 78% Type 1 and 52% type 2
- avoidance of disclosure
- fear of judgement or blame

Liu, N. Brown, A. Folias, A et al. 2017. Browne JL, Ventura A, Mosely K, Speight J. 2013

Epliepsy

- 10,000 tweets
- relating to epilepsy
- 40% were derogatory

McNeil, K. Brna, PM KE Gordan 2011

Lung cancer

 higher stigma scores compared to breast or cervical cancer

Marlow, L. Waller, J. Wardle, J. 2015



WHY SINGLE OUT HIV STIGMA NOW

HIV is a blood borne virus that is largely sexually transmitted

High levels of engagement in treatment and care are central to managing the HIV epidemic

The end of HIV transmission is really within our grasp



WHAT YOU CAN DO TO STOP HIV STIGMA AND DISCRIMINATION



BRIGHTON & HOVE CITY-WIDE ACTION PLANS



Reducing stigma among healthcare workers

- Stigma reference slides for all Trust presentations
- Stigma education resource pack
- "10-things I wish you knew" teaching tool
- Rollout to primary care/dentists

Empowering people living with HIV

- Building resilience
- 1-1 mentoring
- Work with MIND charity
 "for better mental health"

Community engagement

- Work with local business
- Build on public awareness campaign
- Repeat knowledge/attitudes survey
- MFF HIV information bus



THE BEGINNING OF THE END OF HIV STIGMA



- Reflect on your own perceptions /judgements of people living with HIV
- Use universal precautions appropriately when handling blood and body fluids
- Challenge prejudice or discriminatory behaviour towards people with HIV
- Be mindful that some people with HIV may have self-stigma or anticipated stigma and may interpret your actions differently than you intended
- Show your family and friends the Brighton & Hove public awareness campaign <u>here</u>
- If you would like to get involved please contact eileen.nixon1@nhs.net or gillian.dean2@nhs.net



... AND REMEMBER



Now we have effective treatment, HIV has become like many other medical conditions. By taking as few as one tablet a day the virus is completely controlled and cannot be passed on. People diagnosed early with HIV and started on treatment can remain fit and well, and live as long as anyone else. HIV treatment has moved on... we should too!

Find out more at www.themartinfisherfoundation.org