U=U Media Guidelines:

A resource for journalists reporting on HIV

Journalists and those working in the media are uniquely placed to communicate about HIV in a way that encourages understanding, promotes factual information and reduces the stigma associated with HIV. One way journalists can do this is by talking about U=U.

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Undetectable equals Untransmittable or "U=U"" refers to the fact that people living with HIV who take antiretroviral therapy (ART) daily as prescribed and who achieve and maintain an undetectable viral load cannot sexually transmit the virus to a HIV-negative partner.

U=U should be mentioned anytime you are reporting on HIV. This includes stories or profiles on HIV case numbers, research relating to HIV, interviews with community members, scientific breakthroughs, treatment, and policy and advocacy.

Reporting on HIV without referencing U=U omits a large part of what makes up the new HIV prevention narrative (which includes both PrEP and PEP – see below) and can perpetuate misinformation and stigma about people living with HIV.

When reporting on HIV, referencing U=U has the following benefits:

A

It promotes the benefits of seeking medical treatment for everyone who tests positive for HIV.

B

It conveys the message that taking HIV treatment is an integral part of both HIV prevention (onward transmission of the virus) and HIV health promotion (for people living with HIV).

C

It reduces the stigma and discrimination often experienced by people living with HIV by challenging outdated assumptions, myths, and stereotypes.

Image: PANA (Positive Asian Network Australia) (John McRae photography, NAPWHA 2022)

Quick Reference Language Guide

Undetectable viral load	A level of viral load that is too low to be picked up by viral load testing, which means there is zero chance of passing on HIV through sexual contact.
Untransmittable	When a person living with HIV has no chance of passing on HIV through sexual contact.
Viral load suppression	The process of maintaining an undetectable viral load.
ART	Treatment for HIV is called antiretroviral therapy, or ART.
Pre-exposure prophylaxis (PrEP)	A drug that is taken before potential exposure that allows HIV-negative people to be protected from HIV infection.
Post-exposure prophylaxis (PEP)	A drug that is taken after potential exposure to HIV to help prevent HIV transmission.
HIV	Currently, HIV is considered a chronic, manageable condition provided a person is undertaking ART. Avoid using language to describe HIV as a 'fatal condition', 'death sentence', or 'life threatening'.
PLHIV	When writing or reporting on HIV, use the term 'person living with HIV'. Avoid using 'HIV/AIDS victim', 'HIV-infected' or 'HIV sufferer'.
Transmission	When reporting on HIV, use the words 'contracted' or 'acquired'. Avoid phrases like 'a person infected with HIV'.
Affected communities	HIV can affect anyone—however, there some communities that are significantly impacted. When reporting on these communities, avoid using phrases like 'high-risk population' or 'high risk-group'. Instead, use the term 'affected community' or 'high-incidence population'.

Image: Well Beyond 50 project, Living Positive Victoria

The global campaign, U=U, has been translated into other languages and appears in different iterations – e.g. I=I (Spanish), H=H (Russian), K=K (Vietnamese).

Further information about HIV and U=U

The science behind U=U

The science behind U=U is absolute: those who achieve and maintain an undetectable viral load cannot sexually transmit the virus to a HIV-negative partner. Undertaking consistent HIV treatment allows those living with HIV to achieve an undetectable viral load. Levels that reach below 200 copies/mL in the blood are classified as an undetectable viral load. When a person living with HIV reaches an undetectable load, they cannot pass on the virus through sexual contact, even without a condom.

U=U is backed by medical experts globally including Dr. Anthony Fauci, and is endorsed by health organisations including the World Health Organization (WHO), President's Emergency Plan for AIDS Relief (PEPFAR), Joint United Nations Programme on HIV/AIDS (UNAIDS), US Centers for Disease Control & Prevention (CDC) and the National Institutes of Health (NIH). Prevention Access Campaign (PAC) curates a list of over 1,000 organisations across the world that have committed to communicating about U=U within their communities. You can view it here.

Several studies have been published that support the science behind U=U. The HTPN 052 study proved that early ART can prevent HIV transmission. In 2016, these results prompted the World Health Organisation to recommend that all people living with HIV who had HIV-negative partners should be immediately offered antiretroviral therapy to reduce onward transmission to their sexual partners.

The PARTNER study included 1166 couples, with one being HIV-positive and the other HIV-negative. Results of this study showed that for those individuals who were HIV-positive and with an undetectable viral load, no instances of transmission to their respective HIV-negative partner occurred. The PARTNER 2 study, which included only same-sex male couples (one HIV-positive and one HIV-negative), found no instances of transmission in the over 77,700 condomless sex acts reported.

The Opposite Attracts Study included 588 same-sex male serodiscordant couples, which means one partner was living with HIV and the other partner was not. The study found that no instances of HIV transmission occurred in a total of 12,447 acts of anal sex without condoms when the HIV-positive partner had an undetectable viral load, and the HIV-negative partner was not taking PrEP. For more information on the science behind U=U, refer to the resources section of these guidelines on page 5.

FURTHER INFORMATION: Opposite Attracts Study

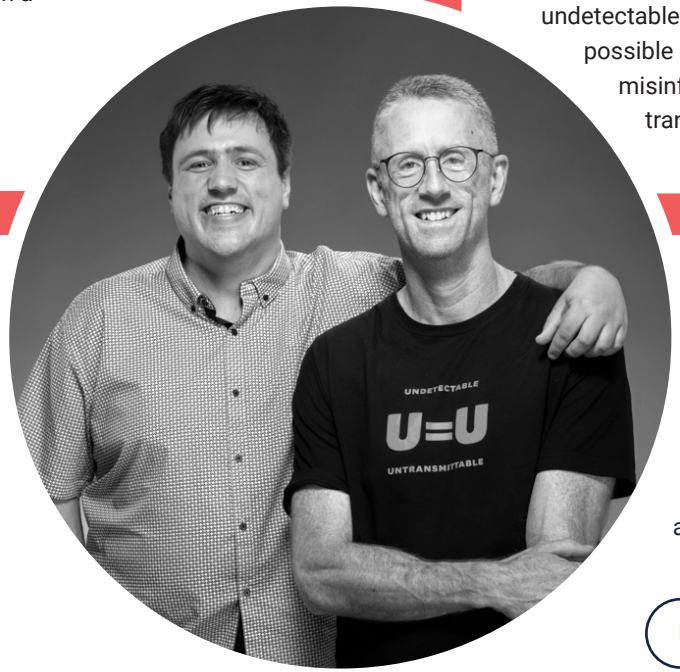
Image: PLAN (Positive Latinx Australian Network)
(John McRae photography, NAPWHA 2022)

Person-Centred Language

Using appropriate language when reporting on HIV is integral to both factual storytelling and to avoid HIV stigma. When reporting HIV, it's best practice to use person-centered language. Person-centred language focuses on the individual themselves and not the illness or disabilities that they may live with.

For example, referring to an individual as 'a person living with HIV' as opposed to 'a HIV-positive person' allows the individual to be seen as separate from their illness and not defined by it.

Small changes like these can have a significant impact when it comes to reducing the amount of stigma people living with HIV experience on a day-to-day basis.



Reporting on Transmission Risk

Media reports that focus on the perceived risk of HIV transmission have the significant potential to increase the stigma experienced by people living with HIV. Individual community transmission events are rarely of any clinical or population significance, and reporting on them in a sensationalised manner has the potential to further stigmatise people living with HIV.

Where the risk of HIV transmission is negligible to non-existent (i.e., reporting on improper sterilisation of equipment in a medical setting, sexual conduct where the person with HIV has a sustained undetectable viral load, etc.), speculating about possible HIV transmission contributes to misinformation about how HIV is actually transmitted and should be avoided.

Avoid reporting on individual transmission events unless an evidence-based risk exists.

If you must mention transmission risk in your reporting, U=U clearly communicates the very low likelihood that any transmission occurred. When talking about U=U in your reporting, avoid using vague or ambiguous language when referring to the concept of a person being 'undetectable' and therefore, the risk of them passing on HIV.

Reporting on U=U should always be definitive—avoid using the phrases 'nearly impossible', 'almost no risk', and 'extremely low' as these types of references can cause confusion and insecurity in the minds of your readership.

Linking to HIV support services

When reporting on HIV, it's helpful to link people to services that can assist in diagnosis and support—reading an article about HIV or that references HIV, might motivate someone to go get tested or want to understand more about their HIV diagnosis.

We recommend linking to the National Association of People with HIV Australia (NAPWHA) HIV Peer Support and/or learning module, HIV 101 for People With a Recent HIV Diagnosis which both house a list of Australian state-based services that can offer support to someone who has been recently diagnosed.

FURTHER INFORMATION: National Association of People Living with HIV Australia

Image: HetMAN (Heterosexual Men's Advocacy Network) Australia, (John McRae photography, NAPWHA 2022)

About these guidelines

These media guidelines have been developed to assist journalists reporting on HIV to ensure their information about Undetectable=Untransmittable (U=U) factual and appropriate. Interviews were conducted with journalists and people living with HIV to inform the content of these guidelines.

The journalists interviewed to inform these guidelines identified the need for a set of guidelines that are short and concise, making them easy to use in time-poor media settings. Journalists also wanted a reference guide covering appropriate language and terminology relating to HIV and U=U and information that is not overly technical.

From the interviews, people living with HIV highlighted the importance of communicating clearly about zero transmission risk when discussing U=U and addressing the potential for HIV stigma to be perpetuated through media. PLHIV also stressed the importance of language, the inclusion of appropriate terminology and the need to include resources on HIV and U=U that journalists and other media representatives can access to inform their reporting.

ashm

ASHM is a peak organisation of health professionals in Australia and New Zealand who work in HIV, viral hepatitis, other blood borne viruses and sexual health. ASHM's *U=U: Guidance for Healthcare Professionals* is one of the global best-practice clinical guides to U=U.

napwha national association of people with HIV australia

The National Association of People with HIV Australia (NAPWHA) is Australia's peak non-government organisation representing community-based groups of people living with HIV (PLHIV). NAPWHA represents the positive voice in Australia.

Resources

About U=U

> https://www.ashm.org.au/HIV/UequalsU/
> https://www.aidsmap.com/about-hiv/faq/what-does-undetectable-untransmittable-uu-mean
> https://www.niaid.nih.gov/diseases-conditions/treatment-prevention
> https://www.tht.org.uk/our-work/training/cant-pass-it-training
> https://www.apcom.org/contextualizing-uu-at-countries-in-asia/

Reporting on HIV

> http://www.hivmediaguide.org.au/
> http://www.hivmediaguide.org.au/media-tool-kit/Reporting-HIV-best-practice-tips/take-care-language/do-and-dont/index.html
> https://www.thewellproject.org/hiv-information/why-language-matters-facing-hiv-stigma-our-own-words
> https://www.glaad.org/reference/hiv

Australian HIV data

> https://data.kirby.unsw.edu.au/hiv

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