



European  
AIDS Treatment  
Group

# U=U Awareness-raising/Education Initiatives in HIV and non-HIV Care Settings

Mapping Paper



## Acknowledgements

We would like to thank all the respondents of the survey for their time and the information provided. We will strive to use it as best we can to overcome the lack of knowledge and promote awareness and a better understanding of U=U in the WHO European Region.

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This work was the result of the involvement of a diverse set of individuals from the European AIDS Treatment Group (EATG), acknowledged below:

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## Introduction

In line with EATG's aim to work on guidelines for healthcare service providers and to address stigma and discrimination, EATG signed on to the [2016 Undetectable=Untransmittable \(U=U\) Consensus Statement](#) launched by the Prevention Access Campaign. This states that a person on fully suppressive HIV treatment cannot transmit HIV. However, there remain inconsistencies in the knowledge and understanding of U=U in HIV and non-HIV related care/settings.

In order to overcome the lack of knowledge and promote awareness and a better understanding of U=U, EATG decided to develop a mapping activity that aims to collect and report on U=U awareness-raising initiatives in HIV care services/settings.

The mapping activity involved four EECA countries, namely Belarus, Kazakhstan, the Russian Federation and Ukraine and was implemented from the 11<sup>th</sup> of October 2021 to the 2<sup>nd</sup> of December 2021. It aimed to:

1. Identify countries to map.
2. Create a list of all the HIV community organisations and other NGOs working with HIV/AIDS care based in the selected countries.
3. Evaluate, through the perspective of HIV/AIDS organisations, the level of knowledge that people living with HIV (PLHIV), health care professionals working with PLHIV, people who use drugs, people working in HIV/AIDS-related organisations and the general public have of U=U.
4. Identify which organisations have already promoted awareness-raising/education initiatives on U=U and what activities have been implemented.

## Methodology

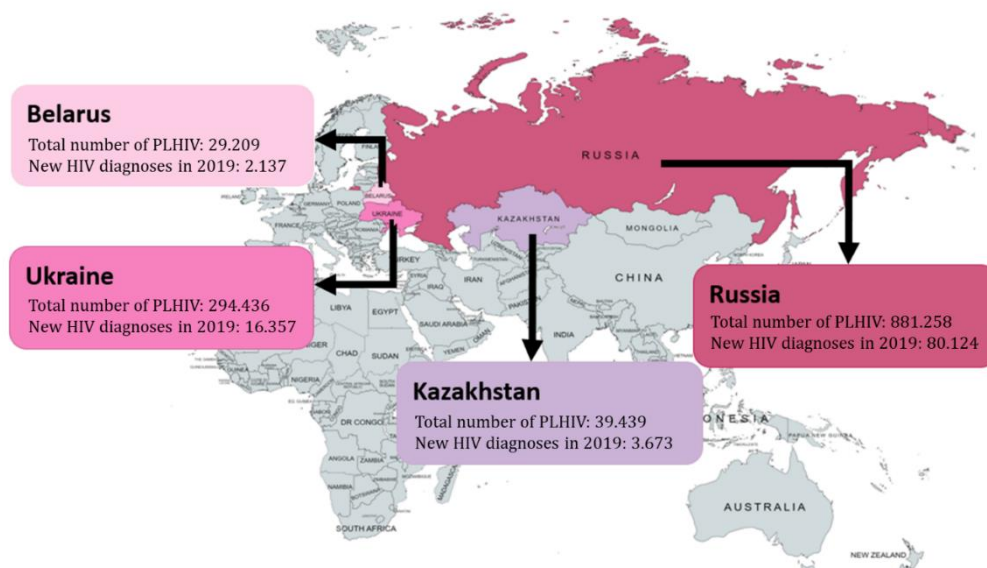
The mapping activity was divided into three phases. The first phase aimed to identify the geographical area and target countries. The second phase had the objective of creating a list of all HIV/AIDS community organisations and other NGOs working with HIV/AIDS care in the selected countries. The third phase was intended to evaluate, through the perspective of HIV/AIDS organisations, the level of knowledge that PLHIV, health care professionals working with PLHIV, people who use drugs, people working in HIV-related organisations and the general public have of U=U. This latter phase had the additional goal of identifying which organisations had already promoted awareness-raising/education initiatives on U=U and what activities were implemented. For those organisations which did not implement any U=U-related activities, the reasons were investigated.

## Phase 1

The geographical area that was considered for the present mapping initiative is Eastern Europe and Central Asia (EECA), a region that EATG has been actively working with since its foundation in 1992. Due to the limited time available for the mapping activity (from the 11<sup>th</sup> of October 2021 to the 15<sup>th</sup> of December 2021), the number of target countries was limited to four: the Russian Federation, Ukraine, Kazakhstan and Belarus. The countries were selected on the basis of the following criteria:

1. Countries in the Eastern European and Central Asian (EECA) region.
2. Countries with the highest number of HIV diagnoses in 2019, according to the HIV/AIDS surveillance in Europe 2020 (ECDC; 2019 data).
3. Countries connected with land borders.
4. Countries that speak a common language.
5. Countries that have already implemented activities on U=U.

According to the HIV/AIDS surveillance in Europe 2020, the Russian Federation was the country with the highest number of HIV diagnoses in 2019 (80,124) and the country with the highest number of PLHIV (People Living with HIV) in Europe and Central Asia (881,258), followed by Ukraine with 16,359 HIV diagnoses in 2019 and 294,436 PLHIV. Although Kazakhstan (3,673 new HIV diagnoses in 2019) and Belarus (2,137 new HIV diagnoses in 2019) are not the third and fourth countries with the highest number of HIV diagnoses in 2019, they are the countries with the highest number of HIV diagnoses that share a border with the Russian Federation and/or Ukraine. The four selected countries speak Russian, even if not all as their first official language, and have all implemented activities on U=U according to the data provided by [Prevention Access Campaign](#).



Map 1- Data from HIV/AIDS surveillance in Europe 2020 (2019 data)

## Phase 2

In the attempt to create a list of all the HIV/AIDS community organisations based in the selected countries, the following activities were executed:

1. Identify people working in HIV/AIDS community organisations that have a good knowledge of the organisations working with HIV/AIDS in the selected countries.
2. Identify databases of HIV/AIDS community organisations or other NGOs working with HIV/AIDS in the selected countries, to support the development of a list with all the organisations in the Russian Federation, Ukraine, Kazakhstan and Belarus.

To complete this activity, EATG members, [Life4me+](#) and [Aids Action Europe](#) were contacted to support the identification of the organisations. Furthermore, an online research study was conducted to identify additional organisations working with HIV/AIDS in the selected countries. The main source consulted to create the list of HIV/AIDS organisations in the target countries was the mapping previously implemented by Life4me+, available on their website and updated at the beginning of 2021.

The list of all organisations by country is available through the link in annexe I.

## Phase 3

After identifying all the HIV/AIDS organisations working in the selected countries, the next step was to:

- Evaluate, through the perspective of HIV/AIDS organisations, the level of knowledge that PLHIV, health care professionals working with PLHIV, people who use drugs, people working in HIV-related organisations and the general public have of U=U.
- Identify which organisations have already promoted awareness-raising/education initiatives on U=U and what activities were implemented.
- Identify which organisations have not implemented any U=U-related activities and investigate the reason for this.

To complete this activity, an online research study, meetings with [Prevention Access](#) (the first organisation that started promoting U=U globally) and [Life4me+](#) (the first organisation that started promoting U=U in Eastern Europe and Central Asia) contributed to the identification of which organisations had already implemented activities on U=U and which did not.

A list of the organisations that have already implemented activities on U=U was sent by Prevention Access, whose website provides a map of all the organisations that have promoted activities on U=U. All the organisations mentioned on the website of Prevention Access were already included on the list of organisations created during the first phase of this activity. Some of the contacts of the organisations on the list were updated thanks to the website of Prevention Access.

An online survey was designed and aimed to give the opportunity for all listed organisations to self-report whether they did or did not implement activities on U=U. The survey was also used to assess, from the perspective of HIV/AIDS organisations, the level of knowledge that PLHIV, health care professionals working with PLHIV, people who use drugs, people working in HIV-related organisations and the general public have of U=U.

The survey was chosen as the primary data collection method, due to the lack of time to arrange meetings with all the organisations, the lack of information on U=U activities available online and mainly to provide an opportunity for all organisations to self-report whether they did or did not implement U=U activities. Indeed, the survey has made it possible to gather as much information as possible in a short space of time.

Google Forms was the software used to design the online survey. Before the administration, the survey was translated into Russian with the voluntary support of a Russian-speaking EATG member and one Russian language specialist. The survey in English and Russian is available in annexe II.

After the translation of the survey, two representatives from Aids Action Group and Life4Me+ took the beta test and provided feedback. Thereafter, the survey was edited on the basis of their feedback and submitted for approval to EATG.

The survey was sent to all the organisations on the list with available email addresses and EATG members were also invited to further share it.

The survey remained available for 10 days, from the 17<sup>th</sup> to the 26<sup>th</sup> of November and a reminder was sent on the 22<sup>nd</sup> of this same month.

The survey was divided into three different parts:

- Characterisation of the organisation:  
Where the organisation is based and with which countries they are working.
- Assessment, through the perspective of HIV/AIDS organisations, of the level of knowledge that PLHIV, health care professionals working with PLHIV, people who use drugs, people working in HIV-related organisations and the general public have of U=U.
- Identification of organisations that did or did not implement activities on U=U.

In the event of an affirmative answer, information on the following aspects was gathered:

- Type of activity
- Target group of the activity
- Eventual partnerships with other organisations.
- Where the activity was implemented.
- Who funded the activity.

- Whether the activity increased the knowledge of the target group.
- Challenges encountered during the implementation of the activity.

In the event of a negative answer, information on the following aspects was gathered:

- The reasons that prevented them from implementing U=U-related activities.
- What is needed for the organisation to implement activities on U=U.
- Whether the organisations would like to be supported to implement activities on U=U.

In order to allow a comparative analysis of the collected data, the questionnaire was semi-structured, where the respondents were asked to select the answer from predefined options. Additionally, participants were given the opportunity to provide another answer, by selecting the predefined option “other” and including further specifications. Some open-ended questions were included, where respondents were asked to elaborate on their points and provide more extensive information.

An Excel file was created with the survey results and subsequently, a quantitative and qualitative analysis was conducted.

The organisations that answered the survey were invited to an online meeting and were asked to share the content produced (for those who implemented U=U awareness-raising initiatives in HIV and non-HIV care settings).

After mapping all the organisations that did and did not promote U=U, an online research study was conducted with the purpose of identifying additional organisations that had implemented activities on U=U but did not answer the survey and collecting some good practices. Furthermore, an email exchange with Prevention Access and an online meeting with Life4me+ provided some additional good practices and strategies to overcome the difficulties faced by the organisations to implement U=U awareness-raising/education initiatives.

## Limitations and Challenges

Due to the limited time available for the delivery of the mapping activity (from the 11<sup>th</sup> of October 2021 to the 15<sup>th</sup> of December 2021), the present mapping initiative could not be extended to more than four countries.

Due to the limited time available and lack of resources, the present mapping activity and the survey could not be translated into Ukrainian and Kazakh. Therefore, it was decided to resort to Russian, being this language spoken in all the target countries. The survey and the emails sent to the organisations required to be translated from English into Russian. The translation of the survey took longer than expected and consequently reduced by a week the time frame that was given to the organisations to answer the survey.

The websites and social media of the target organisations are mainly in Russian, which increased the difficulty of the research but did not represent a barrier for the implementation of the present activity.

Some organisations did not have an email address available and/or had an invalid email address. As a result, they could not be invited to answer the survey.

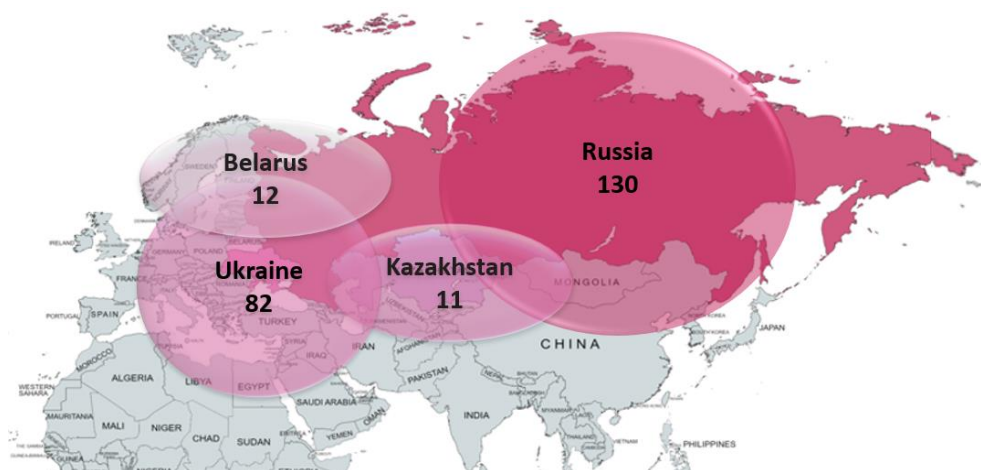
All organisations that participated in the survey and that promoted U=U awareness-raising initiatives in HIV and non-HIV care settings were invited to attend an online meeting to further discuss their activities on U=U and/or share the materials produced. Just one organisation replied to the email and agreed to arrange a meeting. This lack of responsiveness increased the difficulty of identifying the materials produced by all the organisations on U=U.

The organisations that did not promote U=U awareness-raising initiatives in HIV and non-HIV care settings (5 in total) were also invited by email to an online meeting to discuss the reason, but no response has been received.

Not all the activities have been implemented or promoted online by the target organisations, which increased the difficulty of their identification and mapping.

## Results

In total, 235 organisations were mapped. 130 organisations in the Russian Federation, 82 in Ukraine, 12 in Belarus and 11 in Kazakhstan. The list of all organisations by country is available in annexe I.



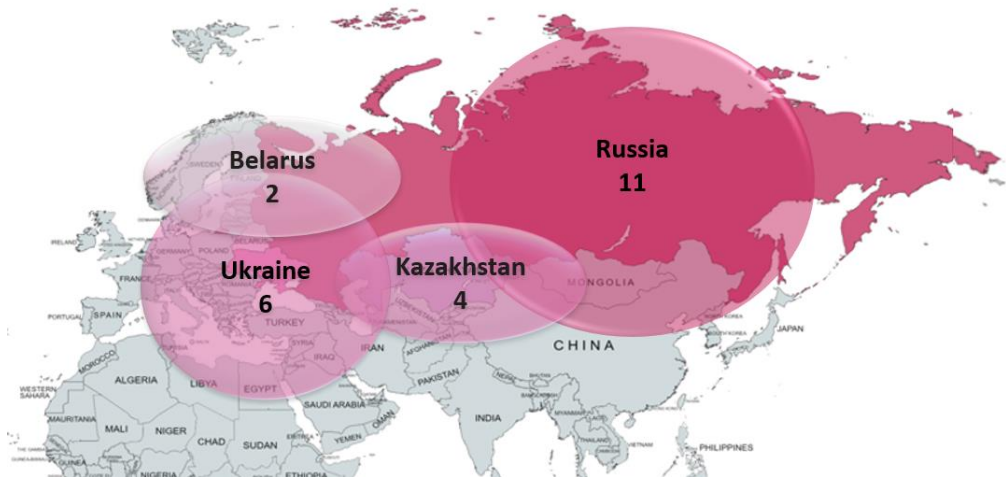
Map 2- Number of identified HIV/AIDS organisations or other NGOs working with HIV care by country



The survey was sent to all the organisations with valid email addresses<sup>1</sup>. EATG members, Life4Me+ and Aids Action Europe were asked to share the survey with partner organisations.

The survey remained available for 10 days, from the 17<sup>th</sup> to the 26<sup>th</sup> of November, and a reminder was sent on the 22<sup>nd</sup> of this same month.

28 organisations filled out the survey. Of the 28 answers, 23 were considered valid<sup>2</sup>. On the basis of the 23 valid answers, Russia was the country with the highest number of participant organisations (11), followed by Ukraine (6), Kazakhstan (4) and Belarus (2).



Map 3- Number of valid answers by country

Of the 23 participants, 18 respondents were NGOs, 3 HIV-clinics and 2 foundations.

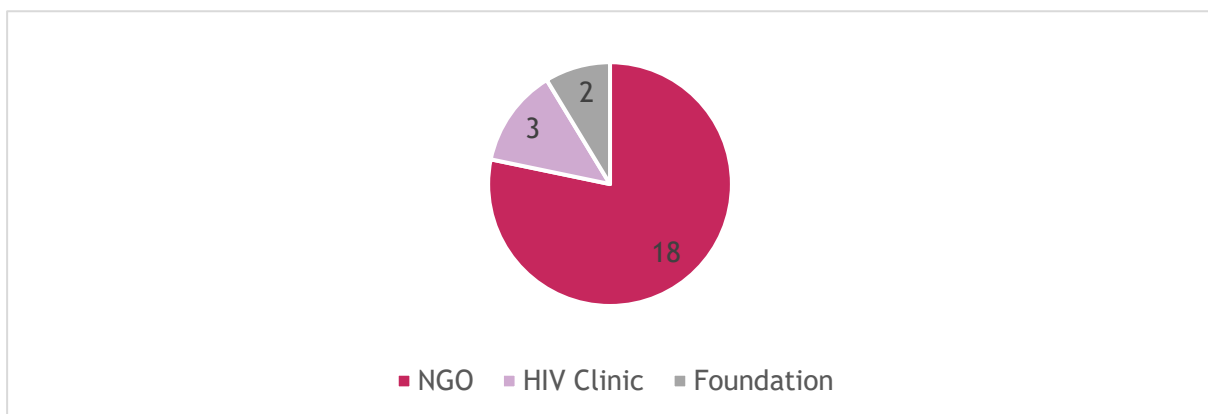


Figure 1 - Number of organisations by type

<sup>1</sup> 23 organisations had no email addresses available.

<sup>2</sup> 2 organisations did not work in the HIV/AIDS field and 3 organisations were from Kyrgyzstan, a country that was not part of the selected countries for the mapping.

As far as the services provided by the organisations are concerned, 82.6% provide social support, 73.9% provide psychological support, 69.6% provide peer support and 60.9% offer screening tests for Sexual Transmitted Infections (STI).

Services/activities provided by the organisations	N	%
Social support	19	82.6
Psychological support	17	73.9
Peer support	16	69.6
Screening tests for STI	14	60.9
Help groups	11	47.8
STI consultation	11	47.8
PrEP	2	8.7
PEP	2	8.7
Medical Care	2	8.7
Information and awareness-raising	2	8.7
Counselling support	2	8.7
Legal Assistance	2	8.7

Subsequently, some questions were included to assess, from the perspective of the organisation, the level of knowledge that different target groups have of U=U.

For 65.2% (n=15) of the participants the level of knowledge of U=U among PLHIV was reported to be average, for 21.7% good (n=5) and for 13% (n=3) extremely poor.

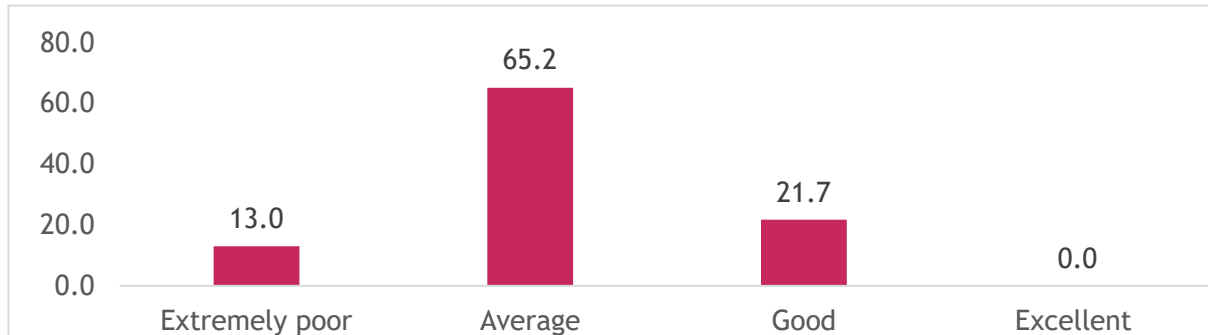


Figure 2 - Level of knowledge that people who live with HIV (PLHIV) have of U=U

The level of knowledge of U=U among healthcare professionals working with PLHIV was considered extremely poor by 43.5% (n=10) of the respondents, average by 34.8% (n=8), and good by 17.4% (n=4). 4.3% (n=1) of the respondents reported that healthcare professionals have excellent knowledge of U=U.

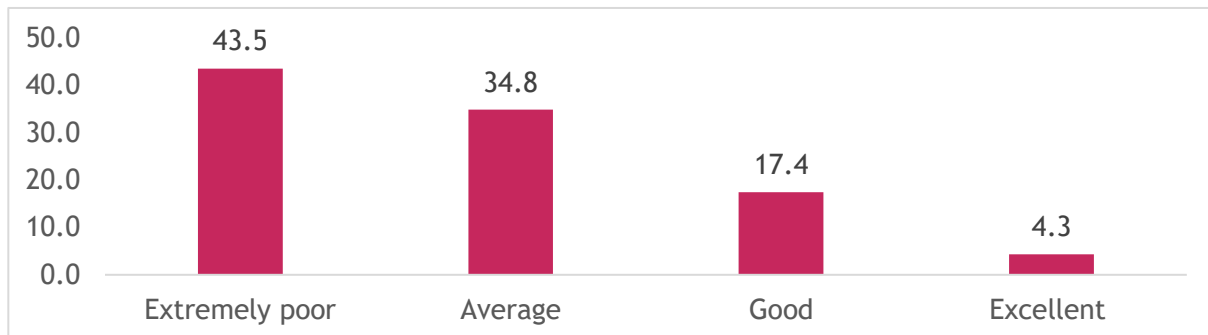


Figure 3 - Level of knowledge that healthcare professionals working with PLHIV have of U=U

As far as the level of knowledge of U=U among people who use drugs is concerned, it was assessed to be extremely poor by 69.6% (n=16) of the respondents, average by 26.1% (n=6) and one participant did not answer this question.

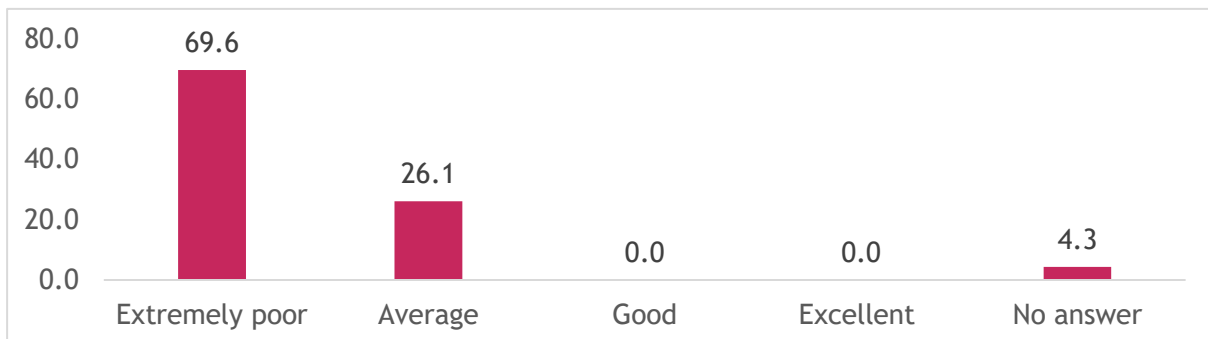


Figure 4 - Level of knowledge that the people who use drugs have of U=U

69.6% (n=16) of the participant organisations reported that **people working in HIV/AIDS-related organisations** have good knowledge of U=U, 17.4% (n=4) considered that they have excellent knowledge of U=U, 8.7% (n=2) average and 4.3% (n=1) estimated that their knowledge is extremely poor.

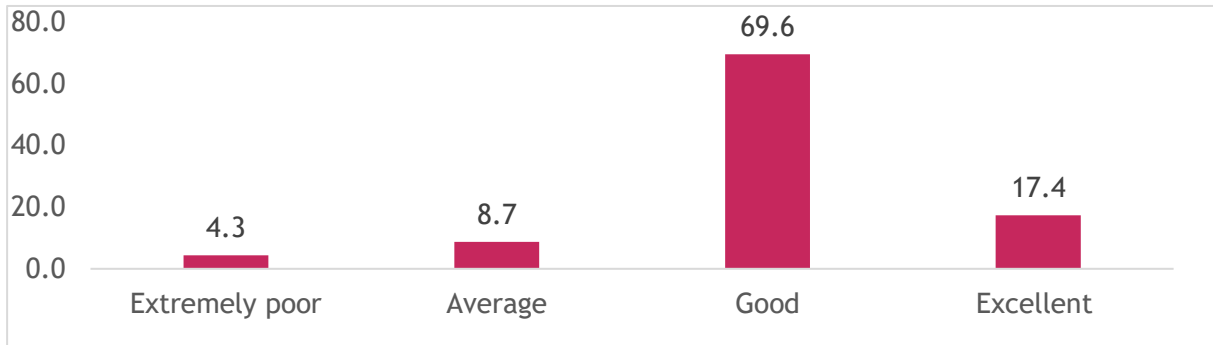


Figure 5 - Level of knowledge that people working in HIV/AIDS-related organisations have of U=U

Among the **general public**, the level of knowledge of U=U was assessed to be extremely poor by 69.6% (n=16) of the participant organisations, good by 21.7% (n=5) and 2 participants did not answer this question.

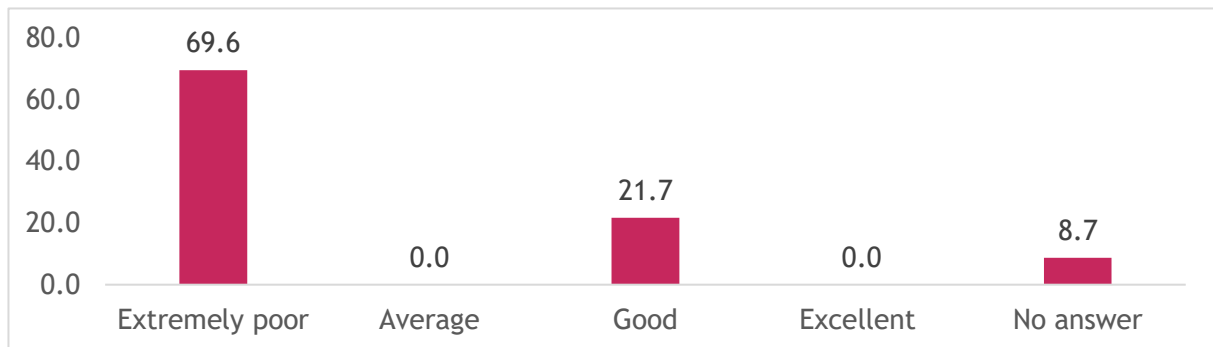
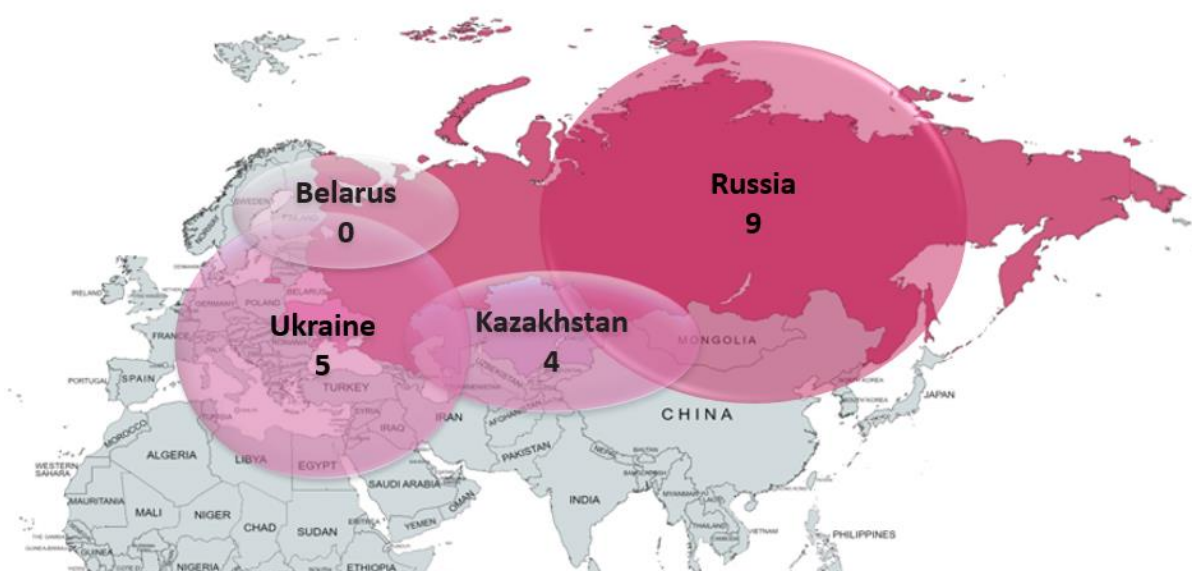


Figure 6 - Level of knowledge that general public has of U=U

As shown, no one of the groups evaluated has excellent knowledge of U=U. According to the participants, people working in HIV/AIDS-related organisations have a good understanding of U=U, PLHIV have average knowledge and healthcare professionals working with PLHIV, drug users and the general public have extremely poor knowledge of U=U.

Of the 23 participants, 18 reported that they have already implemented activities on U=U (9 in Russia, 5 in Ukraine and 4 in Kazakhstan), while 5 did not.



Map 4- Number of reported activities by country

Of the 18 participants that have already performed activities on U=U, 73.9% (n=17) said that they conducted an informational campaign, 65.2% (n=15) produced informative materials, 56.5% (N=13) organised some capacitation sessions, 39.1% (n=9) coordinated events or conferences to promote U=U, 2 participants promoted U=U in support groups, 1 participant organisation raised U=U awareness through peer-to-peer consultations and another one through counselling activities for PLHIV.

Kind of activity on U=U implemented by the organisations (n=18)	N	%
Informational campaign	17	73.9
Produced informative materials	15	65.2
Capacitation session	13	56.5
Event / conference	9	39.1
Support group	2	8.7
Peer-to-peer consultations	1	4.3
Counselling for PLHIV	1	4.3

Of the 18 organisations, only 4 shared the link with more information about the implemented activities. An additional online research study was conducted to overcome this lack of information. More information regarding this point can be found under the section “Implemented activities on U=U” (page 16).

When asked who the target group for the promoted activity was, several distinct groups were mentioned, but PLHIV with 95.7% (n=22), and the LGBTQI+ community with 43.5% (n=10) were the main groups targeted by the organisations to promote U=U.

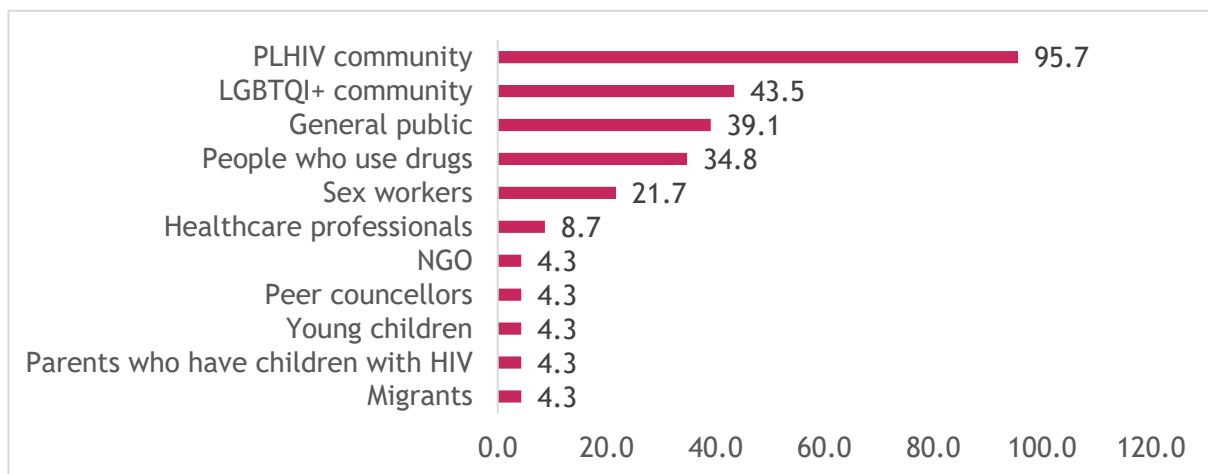


Figure 7 - Target group when the organisation conducted activities on U=U

15 participants worked in partnership with other organisations to promote U=U, while 3 did not.

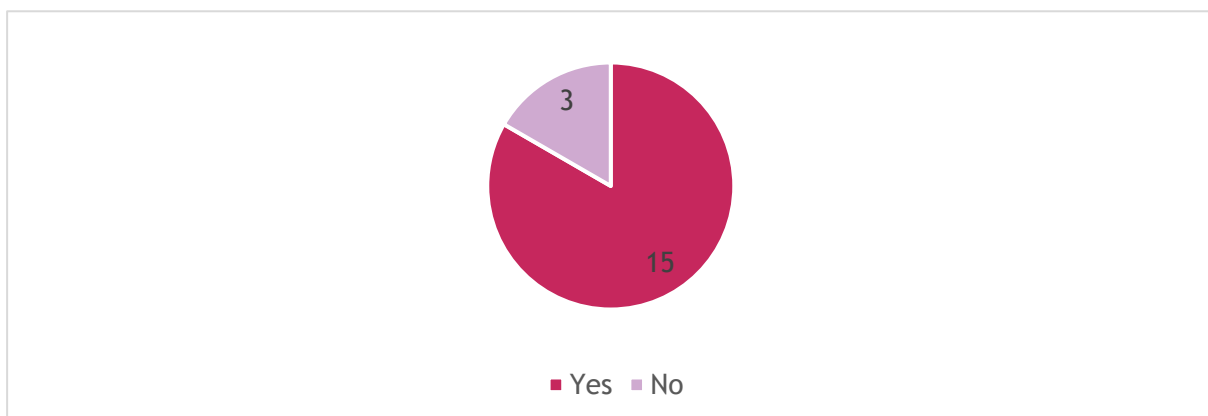


Figure 8 - Did you work in partnership with other services, institutions or members of target communities?

To implement these activities, the organisations worked mainly in partnership with the PLHIV community (13), HIV clinics (11), local organisations (9), the Ministry of Health (4), local municipalities (2) and pharmaceutical companies (2).

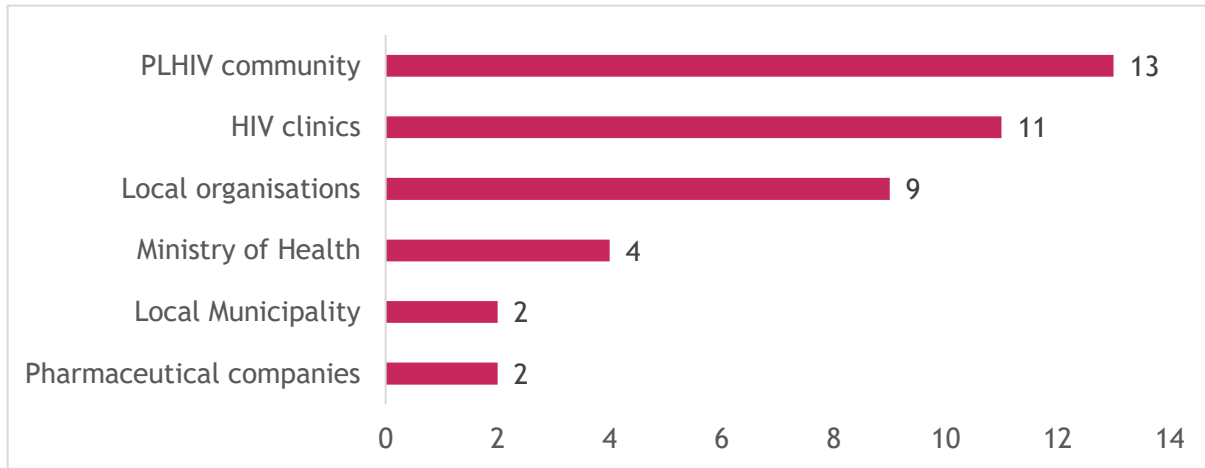


Figure 9 - Type of partnership the organisations worked with to promote U=U awareness

*“In order to promote the campaign, we also engaged open-minded physicians, leaders of international organisations like UNAIDS, well-known activists, celebrities, journalists, etc.”(P.13)*



72.2% (n=13) of the respondents promoted the activity on their websites and social media. 55.6% (n=10) implemented the activities in the HIV/AIDS organisations, 44.4% (n=8) in public areas and LGBTQI+ organisations, 27,8% (N=6) in HIV Clinics and 6,6% (n=1) promoted U=U through capacitation sessions, forums and conferences.

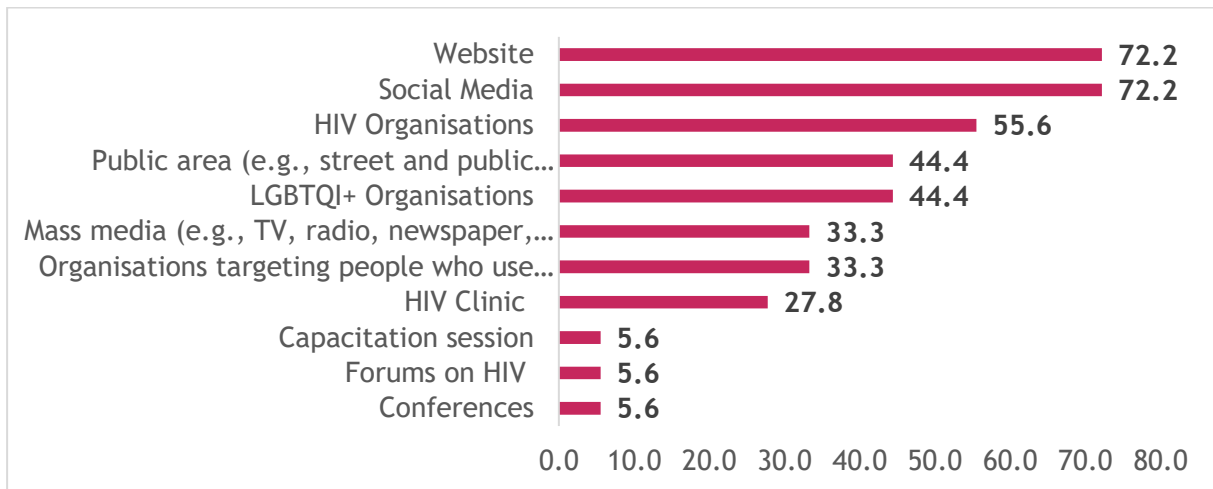


Figure 10 - Places where the U=U activity was implemented

44.4% (n=8) of the organisations received funding mainly from foundations, 33.3% (n=6) from other NGOs, 16.7% (n=3) had no funding, 11.1% (n=2) received funding from institutions, pharmaceutical companies and in-housing financing. 5.6% (n=1) had the support of volunteers and conducted the U=U-related activity as part of other projects/campaigns.

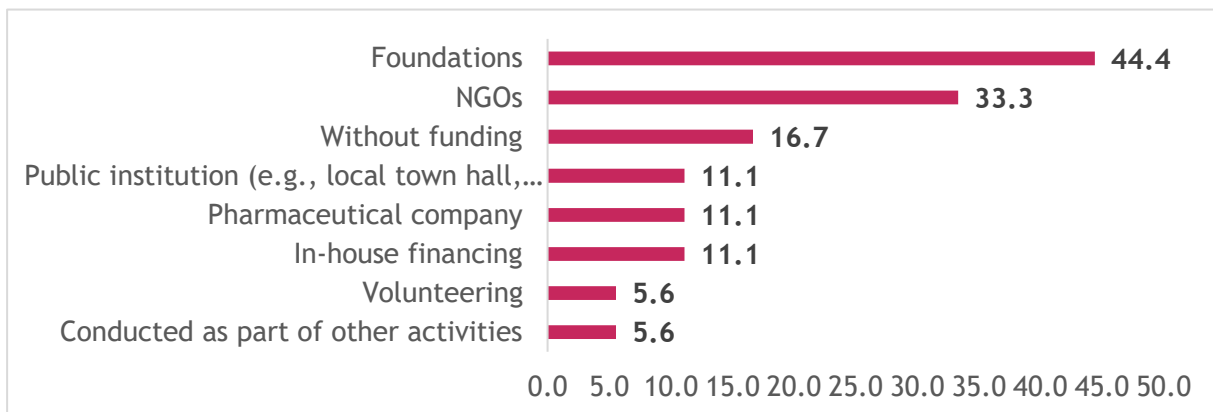


Figure 11- Who funded the U=U activity?

Of the 18 participants that conducted activities on U=U, 17 reported that the activity increased the knowledge of the target group. One participant did not answer this question.

50% (n=9) considered stigma (9) the biggest challenge when implementing U=U activities, followed by 44.4% (n=8) of the respondents identifying the lack of information and lack of funding as the main obstacles. Furthermore, 11.1% (n=3) of the participants mentioned the resistance of organisations and 5.6% (n=1) the resistance of healthcare professionals as other barriers.



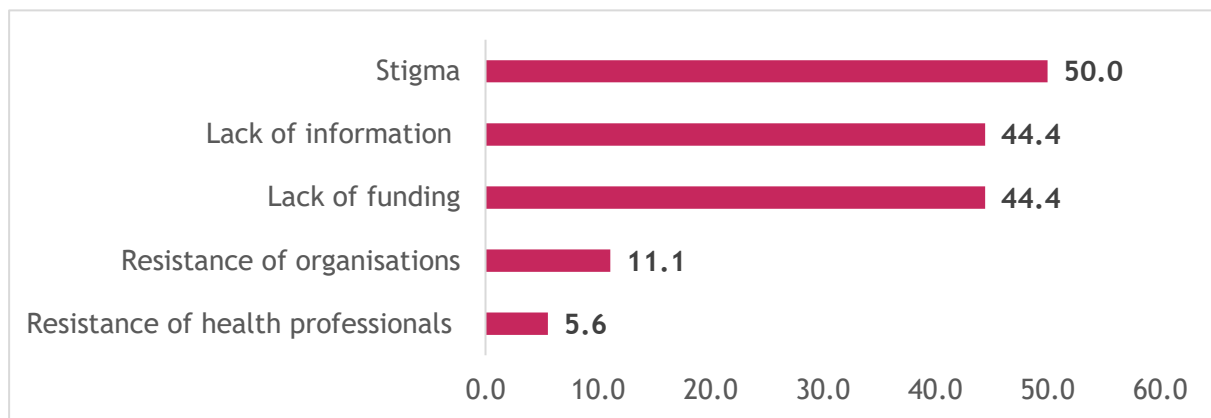


Figure 12 - Difficulties faced by the organisations implementing the U=U activity

*“At the beginning, in 2017, even some activists did not want to support the U=U statement and had many criticisms about it. With medical specialists, the situation was much worse. Some of them accused the organisation of promoting unprotected sex [...]. But today we see how attitudes to U=U have changed”. (P.13)*



As shown in the previous figure, stigma and lack of information remain two central barriers. Indeed, according to Life4Me+, it is still difficult to convince organisations working with PLHIV to get involved in U=U activities and even harder when it comes to health care workers. At the beginning, in 2017, when Life4me+ started promoting U=U in Eastern Europe and Central Asia (EECA), one important shared belief was that if organisations and doctors started promoting U=U, PLHIV would stop using condoms and taking antiretrovirals, which might have caused an increase in the number of new infections.

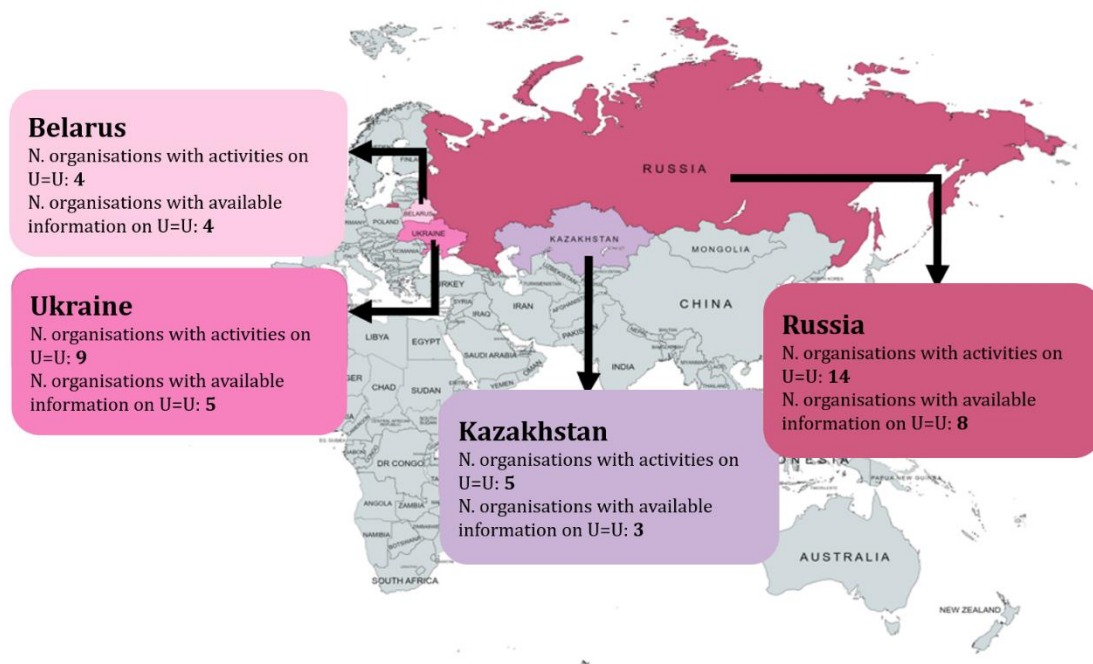
With the support of UNAIDS, the United Nations, community, doctors, leaders and celebrities, the amount of information on U=U increased. As a result, organisations and doctors progressively started becoming interested in the topic and wanted to promote U=U. For instance, in Kazakhstan, when the doctor responsible for the HIV/AIDS national programme acknowledged U=U, many organisations and other doctors working with PLHIV followed the lead.

5 organisations that responded to the survey have never implemented activities on U=U due to a lack of funding and indicated more funding as the main point of their need assessment. 4 of the 5 respondents said that they would like to receive support to promote U=U awareness.

Despite the limited number of answers, the results of this survey helped to understand, through the perspective of HIV-related organisations, the level of knowledge that PLHIV, healthcare professionals working with PLHIV, people working in HIV-related organisations, people who use drugs and the general public have of U=U. Additionally, it helped to understand the types of activities that HIV/AIDS organisations have been implementing and the challenges that they have faced in promoting awareness-raising/education initiatives on U=U in Belarus, Kazakhstan, the Russian Federation and Ukraine.

## Implemented activities on U=U

As previously discussed, of the 23 participants to the survey, 18 organisations have implemented awareness-raising/education initiatives on U=U. However, only four of them shared a link to access the content of the activities. This lack of information was compensated by the additional online research that was conducted with the objective of gathering information on the activities implemented by the organisations that filled the questionnaire and simultaneously identify additional activities promoted by other organisations that did not participate in the survey. Therefore, through the survey, a total of 32 organisations that implemented activities on U=U were identified (14 from Russia, 9 from Ukraine, 5 from Kazakhstan and 4 from Belarus). Of the 32, only 20 have information about the activity implemented available online (8 from Russia, 5 from Ukraine, 4 from Belarus and 3 from Kazakhstan).



Map 6 - Number of activities on U=U available

Overall, the content available online can mainly be found on the websites of the organisations and focuses on the promotion of information on U=U through the implementation of awareness-raising/education activities and campaigns. For instance, in Belarus the website *Positive*

*Movement*<sup>3</sup> reports information on U=U and the *Regional Organisation of the Belarusian Union of Health Workers of Brest*<sup>4</sup> raised awareness on U=U on the occasion of the World AIDS Day (WAD). Similarly, in Kazakhstan<sup>5</sup> and Ukraine<sup>6</sup> information on U=U was found on websites with Q&A sections and videos<sup>7</sup>. The list with all the identified activities is available in annexe I.

As reported by *LaSKY*<sup>8</sup>, *Phoenix PLUS*<sup>9</sup> and *Life4Me+*, Russia is the country with the most available information on websites and social media<sup>10</sup> about U=U,

A pivotal role is therefore played by *Life4Me+*, which has been promoting U=U in the Eastern Europe and Central Asian region.

*In 2017 we translated all the information about U=U (researches, statements) into Russian, developed the website and informational materials like presentations, posters and started the awareness campaign to promote U=U among Russian-speaking countries of Eastern Europe and the Central Asian region. In 2021, on the occasion of the 5th anniversary of U=U, our website was updated with new information. Also, we promoted U=U on the biggest conferences and forums held in Russia, such as the International Conference on HIV / AIDS in Eastern Europe and Central Asia (EECAAC 2018) and the annual St. Petersburg HIV Forum. In October 2021 with the support of Life4me+ U=U was discussed for the first time at a medical scientific conference in Russia within the VI St. Petersburg HIV Forum. (P. 13)*



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<sup>3</sup> <https://pmlus.by/services/hiv-infection/undetected-load/>

<sup>4</sup> <http://profmed-brest.by/dokument-bez-nazvaniya-5>

<sup>5</sup> <http://plwh.kz/blog/pri-podderzhki-usaid-sostoyalsya-ivregionalnyj-forum-lzhv/>

<sup>6</sup> <https://teenergizer.org/2020/11/neopredelyaemaya-virusnaya-nagruzka-cto-eto/>

<sup>7</sup> [https://www.facebook.com/watch/?extid=CL-UNK-UNK-UNK-IOS\\_GKOT-GK1C&v=2388522604806082](https://www.facebook.com/watch/?extid=CL-UNK-UNK-UNK-IOS_GKOT-GK1C&v=2388522604806082)

<sup>8</sup> <https://lasky.ru/peredachi-vich-infekcii-ot-lic-s-neopredelyaemoj-virusnoj-nagruzkoj/>

<sup>9</sup> <https://parniplus.com/health/prevention/nn-hiv/>

<sup>10</sup>Read the mentioned content in Annexe I.

More content can be found on the website of Life4me+<sup>11</sup> (i.e., informative materials, videos, photos and PowerPoint presentations), all in Russian and available for download. The U=U campaign promoted by Life4me+ has reached thousands of people and organisations, which have joined the initiative and posted pictures with the hashtag “#НравноН” (U=U) on their social media (Twitter, Facebook, Instagram and VK).



Figure 13 - Image from the website of Life4me+

Due to the lack of information available online and the limited time to reach all the 32 organisations to further understand the scope of the implemented activities, an online meeting with Life4Me+ was arranged with the objective of receiving an overview of the implemented activities, thus identifying some good practices that were not sampled through the survey and the online research. Additionally, Prevention Access shared some good examples by mail. Examples of good practices can be found below.

- The *Saint Petersburg AIDS Centre* has promoted awareness-raising activities targeting organisations, HIV clinics, doctors and anyone potentially interested in the topic. Lately, the organisations have worked in partnership with doctors to promote U=U in hospitals. They affixed posters in the corridors of the hospital, promoting U=U awareness, targeting not only PLHIV, but everyone working in the hospital and the general public.
- The Russian railways have invited Life4me+ to organise a capacity session for their medical workers on U=U. For the session, Life4me+ invited a doctor to provide a scientific perspective on U=U, and a person living with HIV to share their own experience and reinforce why doctors should talk about U=U with their patients.

<sup>11</sup> <https://life4me.plus/en/campaigns/nravnon/>



- Provide trainings on U=U for HIV and non-HIV related services. Life4Me+ has already made available on their website training materials in Russian<sup>14</sup>. Prevention Access has dispensed several U=U trainings for healthcare professionals and the community.

### 3. Partnership

- Develop partnerships with organisations that have experience in implementing U=U activities, with organisations that can provide funding and use all the materials that are already available.

### 4. Communications

- Enhance the promotion of U=U on various levels and in different areas. The organisations that promoted U=U are located mainly in big cities. Therefore, close work should be done to extend it to less-central areas.

### 5. Translation

- Translate the Undetectable = Untransmittable (U=U) Strategic Toolkit<sup>15</sup> produced by Prevention Access into Russian. This document was designed to help build the capacity and skills of in-country staff to promote the U=U campaign and supporting messages. The toolkit can be used by anyone interested in delivering accurate information about U=U.

### 6. Online repository

- Create an online repository or promote an existing one that could be used by HIV and non-HIV care services to facilitate the organisations to share their experiences/activities on U=U, find partnerships to join new initiatives and use available materials such as flyers, presentations and videos.

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<sup>14</sup> <https://life4me.plus/bundles/hivresources/pdf/campaign/nravnon/UequalsU.pdf>

<sup>15</sup> <https://preventionaccess.org/wp-content/uploads/2021/04/CDC-Global-UU-Toolkit.pdf>

## Conclusion

The present mapping activity involved four EECA countries (Belarus, Kazakhstan, the Russian Federation and Ukraine) and aimed to identify all the organisations that promoted U=U awareness-raising initiatives in HIV care services/settings.

According to the results of the survey and the online research, of the 235 mapped HIV-related organisations, only 32 promoted U=U. The Russian Federation is the country that reported the highest number of implemented activities on U=U, followed by Ukraine. A more limited number of initiatives were found online for Belarus and Kazakhstan. The limited number of identified organisations that promoted U=U might be explained by the fact that a vast number of organisations did not implement activities on U=U or did not share them online.

The survey results, combined with the online research study and the meetings with active organisations working on U=U, provided an overview of the types of activities implemented by the organisations in this framework. Online information on the website of the organisation and social media, informative materials (e.g. posters), capacity-building sessions for organisations, PLHIV, LGBTQI+ and medical communities are the main activities on U=U implemented in the countries that were mapped.

A pivotal role is therefore played by Life4Me+, which has been promoting and supporting all HIV and non-HIV care services in the implementation of activities on U=U. What further emerges is that the World AIDS Day, on the 1<sup>st</sup> of December, represents a solid opportunity for HIV/AIDS organisations to establish partnerships with non-HIV/AIDS institutions and jointly disseminate U=U awareness.

In the attempt to overcome some of the challenges faced by the organisations in the implementation of activities on U=U, it was recommended a major advocacy to integrate U=U into official HIV treatment/prevention guidelines, a more extensive provision of trainings on U=U for HIV- and non- HIV-related services, more partnerships with organisations that have experience in the implementation of U=U activities and with organisations that can provide funding, an increased usage of materials that are already available, which should be translated into Russian. An online repository might also be used to facilitate the organisations' promotion of their activities on U=U.

In conclusion, if on the one hand, the present mapping activity has shown that there is still a long way to go for Belarus, Kazakhstan, the Russian Federation and Ukraine to promote awareness-raising and education initiatives on U=U, on the other, that EATG and partner organisations might have a great opportunity to start supporting these countries in the implementation of U=U initiatives.



## Annexe I - Mapping U=U

The document with the mapping of the present initiative can be accessed through the link below and QR code.

### Notes

- Use the filters to identify the organisations that have already implemented U=U-related activities and those which already have information on the topic available online.
- The document can be updated over time.

### Link

<https://docs.google.com/spreadsheets/d/1ZG6Vjhjowf50tlOjle-0Rtas5m34hDD/edit?usp=sharing&ouid=116797923381808927267&rtmpof=true&sd=true>

### QR Code





## Annexe II - Survey Questionnaire in English and Russian

*Dear participant, this survey is addressed to **community organisations, NGOs and other institutions/services** working in the field of HIV care at the local, regional, or national level in four EECA countries (the **Russian Federation, Ukraine, Kazakhstan, and Belarus**).*

*This survey is being conducted by the European Aids Treatment Group - EATG in the framework of our Quality of Life Programme and aims to **collect and report on “Undetectable = Untransmittable” (U=U) awareness-raising initiatives in HIV and non-HIV care services**. In order to overcome the lack of knowledge and promote awareness and a better understanding of U=U, the ultimate goal of the survey is to map good practices and promote activities that the EECA region has been implementing.*

*It will not take more than **10 minutes** of your time. Please support us in this relevant data collection to work on guidelines for healthcare service providers, and to better address stigma and discrimination across the region. EATG always takes into consideration all ethical norms and standards, in line with GDPR, respecting individuals’ personal rights like confidentiality and anonymity. Filling out this survey, **you agree to give this data for research purposes**. If you want your data to be removed from this survey, please send an email to [willian.gomes4@hotmail.com](mailto:willian.gomes4@hotmail.com).*

*This survey will end on **26/11/21**.*

*Уважаемый участник, этот опрос адресован **общественным организациям, НПО и другим учреждениям / службам**, работающим в сфере лечения ВИЧ на местном, региональном или национальном уровнях в четырех странах ЕЦА (**Российская Федерация, Украина, Казахстан и Беларусь**).*

*Это исследование проводится Европейской группой по лечению СПИДа - EATG в рамках нашей Программы Качества Жизни. Оно имеет целью сбор информации и составление отчёта об инициативах по повышению осведомленности о **H = H вирусной нагрузке в организациях, связанных и не связанных с ВИЧ**. В целях преодоления нехватки знаний, для увеличения осведомленности и лучшего понимания H = H, конечной целью исследования является выявление передового опыта и продвижение мероприятий, реализуемые в регионе ЕЦА.*

*Это займет не более **10 минут** вашего времени. Пожалуйста, поддержите нас в сборе соответствующих данных, необходимых для разработки рекомендации поставщикам медицинских услуг и для борьбы со стигмой и дискриминацией в регионе. EATG всегда принимает во внимание все этические нормы и стандарты в соответствии с Общими правилами защиты данных GDPR, уважая личные права людей, такие как конфиденциальность и анонимность. Участвуя в этом опросе, вы соглашаетесь предоставить данные для исследовательских целей. Если вы хотите, чтобы ваши данные были удалены из данного опроса, отправьте электронное письмо на адрес [willian.gomes4@hotmail.com](mailto:willian.gomes4@hotmail.com).*

*Данный опрос закончится **26.11.21**.*

## PART I / Часть 1

---

**Q1** What is your name? / Как вас зовут?

.....

---

**Q2** What is your email address? / Укажите ваш адрес электронной почты

.....

---

**Q3** What is the name of your organisation? / Как называется ваша организация?

.....

---

**Q4** Where is your organisation based? / В какой стране вы находитесь?

- Belarus / Беларусь
- Kazakhstan/ Казахстан
- Russian Federation/ Российская Федерация
- Ukraine/ Украина
- Other: (please specify)/ Другое: (укажите).....

---

**Q5** What is your country of intervention? / С какой страной сотрудничает ваша организация?

(Multiple answers are possible)/ (Возможны несколько вариантов ответа)

- Belarus / Беларусь
- Kazakhstan/ Казахстан
- Russian Federation/ Российская Федерация
- Ukraine/ Украина
- Other: (please specify)/ Другое: (укажите).....

---

**Q6** The organisation you have been working with is a: / Укажите вид вашей организации:

- NGO/ Неправительственная организация (НПО)
- Foundation/ Фонд
- HIV Clinic/ Клиника ВИЧ
- Other: (please specify)/ Другое: (укажите): .....



---

**Q7** Does your organisation work with HIV care? / Ваша организация занимается поддержкой людей с ВИЧ?

- Yes/ Да
- No/ Нет

IF (1) Q6 = [1] (Yes)

---

**Q8** Please, select the services/activities that your organisation provides. / Выберите услуги, предоставляемые вашей организацией.  
(Multiple answers are possible)/ (Возможны несколько вариантов ответа)

- Screening tests for HIV/ Скрининговые тесты на ВИЧ
- Peer Support/ Поддержка равного консультанта
- Psychological support/ Психологическая поддержка
- Help groups/ Группа взаимопомощи
- Social support / Социальная поддержка
- STI consultation / Консультация по ИППП
- Providing funding for other organisations/ Предоставление финансирования другим организациям
- Other: (please specify) :/ Другое: (укажите): .....

## PART II / Часть 2

ONLY IF (1) Q6 = [1] (Yes)

---

**Q9** From the perspective of your organisation, what is the level of knowledge that people who live with HIV (PLHIV) have of “Undetectable = Untransmittable” (U=U)? / С точки зрения вашей организации, каков уровень знаний о «неопределяемой = непередающей» (H = H) вирусной нагрузке у людей, живущих с ВИЧ?

- None/ Никакой
- Extremely poor/ Очень низкий
- Average/ Средний
- Good/ Хороший
- Excellent/ Отличный

---

**Q10** From the perspective of your organisation, what is the level of knowledge that healthcare professionals working with PLHIV have of U=U? / С точки зрения вашей организации, каков уровень знаний о Н = Н у медицинских работников, взаимодействующих с ВИЧ пациентами?

- None/ Никакой*
- Extremely poor/ Очень низкий*
- Average/ Средний*
- Good/ Хороший*
- Excellent/ Отличный*

---

**Q11** From the perspective of your organisation, what is the level of knowledge that people working in HIV-related organisations have of U=U? / С точки зрения вашей организации, каков уровень знаний о Н = Н у сотрудников организаций, связанных с ВИЧ?

- None/ Никакой*
- Extremely poor/ Очень низкий*
- Average/ Средний*
- Good/ Хороший*
- Excellent/ Отличный*

---

**Q12** From the perspective of your organisation, what is the level of knowledge that the people who use drugs have of U=U? / С точки зрения вашей организации, каков уровень знаний о Н = Н у людей, употребляющих наркотики (ЛУН)?

- None/ Никакой*
- Extremely poor/ Очень низкий*
- Average/ Средний*
- Good/ Хороший*
- Excellent/ Отличный*

---

**Q13** From the perspective of your organisation, what is the level of knowledge that general public has of U=U? / С точки зрения вашей организации, каков уровень знаний у широкой общественности о Н = Н?

- None/ Никакой
- Extremely poor/ Очень низкий
- Average/ Средний
- Good/ Хороший
- Excellent/ Отличный

### **PART III/ Часть 3**

ONLY IF (1) Q6 = [1] (Yes)

---

**Q14** Has your organisation carried out activities on U=U? / Ваша организация проводила мероприятия, посвященные Н = Н вирусной нагрузке?

- Yes / Да
- No/ Нет

If you answered "YES" to the previous question, please answer the questions 14 to 22, then 25 and 26.  
If you answered "NO", please answer the question 23 to 26.

IF (1) Q13 = [1] (Yes)

---

**Q15** What kind of activity has your organisation carried out on U=U? / Какие именно мероприятия ваша организация проводила о Н = Н вирусной нагрузке?

(Multiple answers are possible)/ (Возможны несколько вариантов ответа)

- Informational Campaign/ Информационная кампания
- Event/conference / Мероприятие / конференция
- Produced informative material / Изготовление информационных материалов
- Trainings/ Тренинги
- Other: (please specify) :/ Другое: (укажите): .....

IF (1) Q13 = [1] (Yes)

---

**Q16 What was your target group? / Какая была ваша целевая группа?**  
(Multiple answers are possible)/ (Возможны несколько вариантов ответа)

- People living with HIV / Люди, живущие с ВИЧ*
- LGBTQI+ community / ЛГБТ - сообщество*
- Sex Workers/ Секс-работники*
- People who use drugs/ люди, принимающие наркотики*
- Healthcare professionals/ медицинские работники*
- General public / широкая общественность*
- Other: (please specify) :/ Другое: (укажите).....*

IF (1) Q13 = [1] (Yes)

---

**Q17 To implement this activity, did you work in partnership with other services, institutions or members of target communities? / При проведении данных мероприятий работали ли вы в партнерстве с другими службами, учреждениями или членами целевых сообществ?**

- Yes / Да*
- No/ Нет*

IF (1) Q13 = [1] (Yes)

IF (1) Q16= [1] (Yes)

---

**Q18 Please, select the type of partner that you worked with. / Выберите с какими партнерами вы сотрудничали?**  
(Multiple answers are possible)/ (Возможны несколько вариантов ответа)

- PLHIV community/ Сообщество ЛЖВ*
- Local Municipality / Местный муниципалитет*
- Government / Правительство*
- Ministry of Health / Министерство здравоохранения*
- Local organisations / Местные организации*
- Pharmaceutical companies / Фармацевтические компании*
- HIV clinics/ Клиники ВИЧ*
- Other: (please specify) :/ Другое: (укажите): .....*

IF (1) Q13 = [1] (Yes)

---

**Q19 Where did you implement the activity? / Где вы реализовали данную деятельность?**

*(Multiple answers are possible)/ (Возможны несколько вариантов ответа)*

- HIV organisations/ ВИЧ-организации
- HIV clinics/ Клиники ВИЧ
- LGBTQI+ organisations/ ЛГБТ - сообщество
- Organisations targeting people who use drugs/ Организации, взаимодействующие с людьми употребляющими наркотики
- Hospitals / Больницы
- Local organisations/ Местные организации
- Public area (e.g. street and public transport)/ Общественные места (например, улица и общественный транспорт)
- Social media/ Социальные медиа
- Mass media (e.g. TV, radio, newspaper, magazine)/ СМИ (телевидение, радио, газеты и журналы)
- Website/ Веб-сайты
- Other: (please specify) :/ Другое: (укажите): .....

IF (1) Q13 = [1] (Yes)

---

**Q20 Who funded your U=U activity? / Кто финансировал вашу Н = Н деятельность??**

*(Multiple answers are possible)/ (Возможны несколько вариантов ответа)*

- NGO/ Неправительственная организация (НПО)
- Public institution (e.g. local town hall, and the national health service)/ Государственное учреждение (например, местный муниципалитет и национальная служба здравоохранения)
- Pharmaceutical company/ Фармацевтическая компания
- Foundation / Фонд
- Other: (please specify) :/ Другое: (укажите): .....

IF (1) Q13 = [1] (Yes)

---

**Q21 Did the activity increase the knowledge of the target group of U=U? / Повысило ли данное мероприятие уровень знаний целевой группы о Н = Н?**

- Yes/ Да
- No/ Нет

IF (1) Q13 = [1] (Yes)

---

**Q22 What difficulties did you face to implement the activity? / С какими трудностями вы столкнулись при реализации данной деятельности? (Multiple answers are possible)/ (Возможны несколько вариантов ответа)**

- Lack of funding/ Отсутствие финансирования
- Resistance from organisations to work on U=U/ Нежелание организаций работать с Н = Н
- Lack of information / Отсутствие информации
- Stigma/ Стигма
- Other: (please specify) :/ Другое: (укажите): .....

IF (1) Q13 = [1] (Yes)

---

**Q23 Could you share the contents produced? You can add the link on the box below. You can also send it to [willian.gomes@hotmail.com](mailto:willian.gomes@hotmail.com). / Могли бы вы поделиться созданным контентом? Вы можете добавить ссылку в поле ниже или отправить материалы на электронный адрес [willian.gomes@hotmail.com](mailto:willian.gomes@hotmail.com).**

If you answered questions 14 - 22, please answer questions 25 and 26.

IF (2) Q13 = [2] (No)

---

**Q24 Why has your organisation not implemented any activity on U=U so far? / По какой причине ваша организация до сих пор не проводила мероприятия о Н = Н? (Multiple answers are possible)/ (Возможны несколько вариантов ответа)**

- Lack of funding / Отсутствие финансирования
- Resistance from organisations to work on U=U/ Нежелание организаций работать с Н = Н
- Lack of information/ Отсутствие информации



- Stigma/ Стигма*
- Other: (please specify) :/ Другое: (укажите) .....*

IF (2) Q13 = [2] (No)

---

**Q25** What would your organisation need to implement activities on U=U? / Что именно потребуется вашей организации для реализации мероприятий о Н = Н?

*(Multiple answers are possible)/ (Возможны несколько вариантов ответа)*

- More funding to work on U=U/ Больше финансирования для Н = Н*
- More information on U=U/ Дополнительная информация о Н = Н*
- More information on U=U translated in Russian/Ukrainian/ Больше дополнительной информации о Н = Н на русском/украинском языках*
- Other: (please specify) :/ Другое: (укажите).....*

IF (2) Q13 = [2] (No)

---

**Q26** Would your organisation like to receive support to work on U=U? / Хотела бы ваша организация получить поддержку для работы с Н = Н?

- Yes / Да*
- No/ Нет*

**Q27** If possible, can we contact your organisation for an online interview? / Можем ли мы связаться с вашей организацией для проведения онлайн-интервью?

- Yes / Да*
- No/ Нет*

***Thank you for your participation! / Благодарим за участие!***



## **Annexe III - U=U Activities promoted by Italy, Ireland, Portugal, Spain and the United Kingdom**

Click on the link below to check some activities on U=U implemented by Italy, Ireland, Portugal, Spain and the United Kingdom.

**Link**

<https://docs.google.com/spreadsheets/d/1DJBdlgvMe61cMO9NSGRqEls1c1Pja2mM/edit?usp=sharing&ouid=116797923381808927267&rtpof=true&sd=true>



European  
AIDS Treatment  
Group

### **About the European AIDS Treatment Group**

The European AIDS Treatment Group (EATG) is a patient-led NGO that advocates for the rights and interests of people living with or affected by HIV/ AIDS and related co-infections within the WHO Europe region. Founded in 1992, the EATG is a network of more than 150 members from 45 countries in Europe. Our members are PLHIV and representatives of different communities affected by HIV/AIDS and co-infections. EATG represents the diversity of more than 2.3 million people living with HIV (PLHIV) in Europe as well as those affected by HIV/AIDS and co-infections.

For more information, please visit [www.eatg.org](http://www.eatg.org)