“The power of change comes from us, the youth. Don’t wait for the future generation. Act now and stay responsive towards the fight against HIV.”

Sitraka Faniry Nantenaina Ratsimba AIDS 2016 Youth Ambassador
WHAT IS THE AIM?

The International AIDS Society (IAS) has partnered with youth advocates to assemble a “cookbook” outlining the essential ingredients and recipes that young people can use to build a stronger HIV response in their own communities. The aim is to show the many different ways and opportunities that young people can join the HIV response on different levels, on social media, in their local communities, at work and in global advocacy forums.

WHO SHOULD USE IT?

This cookbook is for every young person who is interested in learning more about the role of social media in the HIV response and how to best take action.
Social media has increasingly become part of our daily lives. From staying in touch with friends, remaining updated on the latest news or finding that “perfect match”, uptake of social media will continue to influence and shape how we do things. Naturally, it plays a role in our work life too.

Today, more activists, especially young people, use social media as a tool for their HIV-related advocacy, to call for change, exchange views, share information and connect with peers. Social media is affordable, easily accessible, has a wide reach and can be used in many different contexts.

When the IAS Youth Ambassadors, a group of young HIV advocates and researchers from around the world, came together at the 21st International AIDS Conference (AIDS 2016) in Durban in July 2016, they highlighted how they use social media to support their HIV advocacy work.

Using the platform of the conference, they shared experiences, learned from established experts, and discussed innovative ways of ensuring that young people – including those who represent key population groups – are meaningfully engaged in HIV advocacy and research. Based on their own experiences of online activism, some of them developed this cookbook to inspire other young people to become more active on social media.

From Awais in Pakistan, who uses Facebook to encourage his peers to get tested for HIV, to Maryam in Zanzibar, who fights HIV stigma on Twitter and Instagram, they all found unique ways to use social media for their work in the HIV field. Check out their profiles.

What motivated you personally to get involved in the HIV response?

With regards to the situation in Madagascar, much has to be done to engage young people in the HIV response. They represent approximately 64% of the population here and only 2% get tested, even though more than 50% are affected. That’s why I feel dutifully concerned about fostering groups of young people as peer educators to influence others positively when it comes to addressing HIV.

How do you use social media for your work in HIV?

In my organization, we are mainly using Facebook to engage young people in the HIV response. In Madagascar, Facebook is the fastest growing and largest social network, and used by many young people. Using social media has helped to raise awareness and motivate youth to take action and be more involved in HIV activism by providing platforms for debate, reflection, as well as influencing and sensitizing them.

What was your most memorable moment or lesson learnt at AIDS 2016?

AIDS 2016 made me realize the fatal consequences of HIV and AIDS and that they need serious attention. Thanks to the activities I took part in at the Global Village in my NGO booth, I had opportunities to talk with many young people living with HIV. I gained insight into how they live and what challenges they face in their daily lives. Consequently, AIDS 2016 has been a life-changing experience for me as people never talk about HIV here in Madagascar.

What would you like to say to future Youth Ambassadors?

The power of change comes from us, the youth. Don’t wait for the future generation. Act now and stay responsive towards the fight against HIV.

**AIDS 2016 YOUTH AMBASSADOR**

**SITRAKA FANIRY NANTENAINA**

**AGE** 24 years old  
**COUNTRY** Madagascar  
**OCCUPATION** Youth leader of the associations, Youth and Women’s Rights and Youth Alliance for Change; junior consultant at Focus Development Association  
**ATTENDED FIRST AIDS CONFERENCE** Durban, 2016
JOYLENE TINAYE DZORO

What motivated you personally to get involved in the HIV response?
As a young woman who is living with HIV, I have seen other girls giving up medication and losing hope because they are HIV positive. The stigma tied to being HIV positive led them to die, and I lost two friends who defaulted their antiretroviral therapy. I stood up to fight against stigma in my community, which motivated me to be involved in the HIV response.

How do you use social media for your work in HIV?
I mostly use Facebook for discussions on HIV-related topics. I also use it to post photos of myself when I am conducting any activity related to HIV.

What was your most memorable moment or lesson learnt at AIDS 2016?
My most valuable lesson I learnt at AIDS 2016 was from Professor Elizabeth Bukusi. Prof. Bukusi told us to never stop learning, work with others, and that as young people we are never too small to make a difference. I love to learn; hence I really enjoyed all the workshops with the plenary speakers.

What would you like to say to future Youth Ambassadors?
I would say never give up the fight against HIV. To make a change, it starts with an individual. Let us all be involved.

AGE 22 years old
COUNTRY Zimbabwe
OCCUPATION Social worker
ATTENDED FIRST AIDS CONFERENCE Durban, 2016
What motivated you personally to get involved in the HIV response?

I was born with HIV and first received treatment when I had a CD4 count of 4 cells and suffered from opportunistic infections. I remember when I was told that I was living with HIV at 11 years old, and my first question was if it meant I have to die. But then I found out that scientists had developed a treatment and if I take it as the doctor says, all the opportunistic infections will heal and I will be like any other child. This really motivated me because if someone who might not be infected can dedicate their life to find a treatment or cure against HIV, then I will do anything to support them and show them that their work is appreciated. Other young people with HIV saw my medical condition improve quickly and wanted to learn from me. Hence I supported them as well and realized that the best thing that I could learn from my condition is to help other young people that struggle living with HIV, to give them hope and change their lives.

What was your most memorable moment or lesson learnt at AIDS 2016?

When I shared the panel with gurus who actually saved my life and millions of others, the original advocates, the first and current IAS president, and other very important panelists. It was important for me to hear where we came from with the fight against HIV and AIDS.

What would you like to say to future Youth Ambassadors?

I am glad to have been one of the Youth Ambassadors and I hope we have made a difference in our communities. Future Youth Ambassadors now can pick up the stick and continue the race until we emerge as winners. Your contribution is key, no matter what diversity you represent.
What motivated you personally to get involved in the HIV response?
When I first disclosed my status publicly, I realised how many young people fear disclosure due to the fear of rejection from their families, friends and communities. What I wanted to do was inspire young people to bravely share their story and disclose their status, knowing that they are not alone.

How do you use social media for your work in HIV?
In my view, Facebook is the best social media platform because it makes it easy to connect with other young people. I mostly use it to engage with others and share important information about HIV. Sharing that kind of information can help many people, young and old. It is also very easy to use: you can invite people, “like” their posts and learn about their vision and work.

What was your most memorable moment or lesson learnt at AIDS 2016?
Charlize Theron’s speech during the opening session was a BIG thing for me, she shared an important message regarding stigma. She also mentioned that young people living with HIV need love and support to get through the journey. Another memorable thing was being alongside young people at the conference, this motivated me and reminded me that I am not alone, but that I am fighting alongside many other young people.

What would you like to say to future Youth Ambassadors?
Never give up in life, keep fighting and do not be afraid to say whatever is on your mind.
What motivated you personally to get involved in the HIV response?

After learning that my parents were living with HIV, I faced a lot of stigmatization at school and in the community. I felt very bad. I longed to know what the infection is and why people are afraid to speak with people who are living with HIV and AIDS.

How do you use social media for your work in HIV?

Social media is a big part of my life. I use Facebook, Instagram and WhatsApp on a daily basis. Through these tools I share messages about HIV and young people. I mostly post about the work that we do at ZAPHA+ (Zanzibar Association of People Living with HIV/AIDS) on the Tanzania Young Reporters Facebook page. I post about the work that children and youth are doing to end the stigma associated with HIV and AIDS. I believe that social media is a great way to share the work that we’re doing as it has the ability to reach a wide audience.

What was your most memorable moment or lesson learnt at AIDS 2016?

My most memorable experience was the way that all participants were living together in a peaceful way and with so much joy. It was as if we knew each other since forever, although we had just met in Durban. What I learned is how other countries involve youth in the fight against HIV and AIDS. We need to do that in Tanzania as well.

What would you like to say to future Youth Ambassadors?

As youth, we should never be afraid to share our stories with others. Our stories help the community know the problems we face and how they can assist. There are many people in our society who are experiencing similar problems. Through our stories we can lead youth to share their problems and challenges, and that way we can find solutions.
KAPEMBWA CHISANGA

What motivated you personally to get involved in the HIV response?

After seeing my fellow youths failing to come out openly and talk about their HIV status, this motivated me so much because I knew I was different and I had to accept this fact. And also my mentor, Brighton, who comes from a humble background and is impacting so many lives of young people living with HIV in the community.

How do you use social media for your work in HIV?

The number one social media platform I use is Facebook because it’s the most accessible and affordable platform for sharing the work I do. I use it in fighting stigma and discrimination against people living with HIV through sharing my own story of openly living with HIV.

What was your most memorable moment or lesson learnt at AIDS 2016?

The interactions with new people I met, learning about new HIV medication, and seeing the ocean for the first time coming from a landlocked country, were some of the moments I will always remember.

What would you like to say to future Youth Ambassadors?

To my fellow future ambassadors, they should be courageous and speak about their status and their rights. Above all, embrace humility because it is one the most important characteristics.

AIDS 2016 YOUTH AMBASSADOR

AGE 24 years old
COUNTRY Zambia
OCCUPATION Childrens Radio Foundation youth reporter
ATTENDED FIRST AIDS CONFERENCE Durban, 2016

SOCIAL
HUMBLE
FUNNY

Produced by the International AIDS Society
What motivated you personally to get involved in the HIV response?

Many of my friends and family died due to the HIV and yet people still remain silent about the virus and shun talking about it. So in order to end HIV, I wanted to get involved and raise awareness.

How do you use social media for your work in HIV?

The social media platform which I use mostly is Facebook. I use it to raise awareness on pertinent issues relating to HIV and to advocate for better policies for people living with HIV in the world. I use it also to network with people working in the HIV response in my country and globally.

What was your most memorable moment or lesson learnt at AIDS 2016?

It is possible to end HIV by 2030 if we unite and stop spreading hate. Young people's voices are important in the eradication of HIV. The most memorable moment was, of course, meeting Prince Harry and talking to him about Zimbabwe.

What would you like to say to future Youth Ambassadors?

Stay calm, be yourself and learn as much as you can from the inspirational people around you.

SHAUN TAFADZWA BERA

AIDS 2016 YOUTH AMBASSADOR

AGE 22 years old
COUNTRY Zimbabwe
OCCUPATION International Working Group, Youth RISE
ATTENDED FIRST AIDS CONFERENCE Durban, 2016
AIDS 2016 YOUTH AMBASSADOR

CHUNYAN LI

What motivated you personally to get involved in the HIV response?

The global fight against HIV and AIDS helps me realize how firmly we human beings could stand together regardless of country borders, ethnic origins, religious beliefs, political standings or social classes. And I want to be one of them.

How do you use social media for your work in HIV?

The most popular social networks among Chinese young people are Weibo (Chinese version of Twitter), Wechat and QQ (similar to WhatsApp). An important function of Wechat is the Friends Circle (serves similar as Facebook) where you can post pictures, texts, videos or share links. It makes it easy to communicate messages within groups of a similar background as well as to reach a wider community. It’s a readily accessible tool for online campaigns and advocacy. We often use it in our research on sexual and reproductive health (SRH) to approach potential questionnaire respondents and for online health education.

What was your most memorable moment or lesson learnt at AIDS 2016?

The most impressive experience at AIDS 2016 was discovering what a group of excellent fellows I have! Especially the brilliant people I met in the Youth Ambassadors Programme! AIDS 2016 gave me the first opportunity to travel to Africa, and the very chance for me to meet with a group of youths who are fighting for their communities with courage, responsibility, and innovation.

What would you like to say to future Youth Ambassadors?

Don’t be preoccupied by things you read or hear from others. Get involved, make your own experiences and stand with the people.
What motivated you personally to get involved in the HIV response?

Being a young person and knowing that I can make a difference in the HIV field, together with other young people. Also being recognized and given the chance to represent my community on important platforms, such as the AIDS 2016 Conference.

What was your most memorable moment or lesson learnt at AIDS 2016?

Being in the Youth Ambassadors group and meeting with internationally recognized leaders, including Prince Harry and Prince Seeiso Bereng Seeiso of Lesotho. This made me realise how important it is for leaders to stop politicising health and engage more on delivering better facilities for the people.

What would you like to say to future Youth Ambassadors?

Speak out and be heard. No effort is ever too small to go unrecognized.
AIDS 2016 YOUTH AMBASSADOR

AUDREY BREZAK

What motivated you personally to get involved in the HIV response?

I became interested in HIV and AIDS after spending the summer following my freshman year of college living in rural Kenya for 3 months. I saw the disease claim many lives at the hospital where I worked, among them the youngest child in my host family. Coming from the United States, where HIV is less prevalent and rarely visible, I saw the consequences of the disease as a stark reality in this perinatally infected boy with whom I shared a room and whom I cared for in his last few months of life. Learning his fatal condition was completely preventable motivated me to join the fight against HIV. Since then, I have been committed to using my potential to the fullest to learn skills and do my part in helping close the HIV prevention implementation gap.

How do you use social media for your work in HIV?

Since AIDS 2016, social media has become a tool to connect to my fellow youth ambassadors and continue our discussion about the changes we would like to see in the HIV response as well to pitch ideas for collaboration. We are also connected to each other and others working in the HIV response through Twitter—it is fun to follow top HIV researchers like Linda-Gail Bekker and to be able to discuss about our issues in real-time, even though we are usually half a world apart!

What was your most memorable moment or lesson learnt at AIDS 2016?

The greatest resounding lesson from AIDS 2016 was that all of us committed to this cause, we are one, especially in the fight against HIV and AIDS. Talking with HIV researchers, advocates, and other Youth Ambassadors, I realized we share and are working towards a common dream – that HIV is no longer considered a threat to society and that it is no longer a burden to those living with it. That they are able to live their full lives and achieve their dreams.

What would you like to say to future Youth Ambassadors?

The words of NY Times columnist, Nicolas Kristof, come to mind “It’s up to your generation, next.” Now is our time to unite with the youth of the world, learn from one another, and use our collective voices to influence change to make a better, healthier world for us all. Standing together, we are far more powerful than we ever could be alone.

AGE 22 years old
COUNTRY United States of America
OCCUPATION Student
ATTENDED FIRST AIDS CONFERENCE Durban, 2016
AIDS 2016 YOUTH AMBASSADOR

STACEY JUMA OKEYO

What motivated you personally to get involved in the HIV response?

What really drove me to actively get out there and speak out for my friends and peers living with HIV was when I lost my best friend due to the stigma of being HIV positive. Back then, people in my community diagnosed with HIV were considered outcasts. Nobody wanted to be associated with them, hence my friend kept her status hidden from us, not knowing that she was killing herself slowly.

I was also too naïve and uneducated on issues related to HIV and AIDS so I only came to know about her condition from her confession on her death bed, but it was too late. Her death motivated me to learn more about HIV and to try to make my people understand and learn more about it from me.

How do you use social media for your work in HIV?

Facebook is what we commonly use to share and discuss issues on HIV as it is a well-known social media platform and enables us to reach many people.

What was your most memorable moment or lesson learnt at AIDS 2016?

My memorable moments were during the grand opening of the conference when we were on stage and were introduced to the delegates, as well as that golden chance of meeting, greeting and having a chat with Prince Harry of the UK, it was awesome I must say.

What would you like to say to future Youth Ambassadors?

Being a youth ambassador is a privilege and takes commitment: one must be a smart thinker, ready and willing to learn, and represent the International AIDS Society and people living with HIV, both during the conference and back in our home countries. So to the future ambassadors, be courageous, open your minds to learn more, act as role models in our different fields and home countries, and advocate for the needs of people living with HIV.

AGE 22 years old
COUNTRY Kenya
OCCUPATION Relations Manager at Kisumu Shinners Community Based Organization
ATTENDED FIRST AIDS CONFERENCE Durban, 2016
ROBINAH BABIRYE

What motivated you personally to get involved in the HIV response?
First of all because I am affected by HIV, and also due to the challenges people living with HIV face, particularly the young people, and especially with regards to adherence to treatment and sexual and reproductive health and rights.

What was your most memorable moment or lesson learnt at AIDS 2016?
My most memorable moment and lesson learnt was that young people living with HIV regardless of race, sexual orientation, gender and age can be given a chance to access equal rights and services without being stigmatized or discriminated against, and that we are supported and heard by all the UN agencies.

What would you like to say to future Youth Ambassadors?
I would like to say to the Youth Ambassadors that we still have a chance to change the future to a better one. We are young, vigorous and we need to be united as one if we are to become real change agents in the HIV response.
AIDS 2016 YOUTH AMBASSADOR

AWAIS WILLIAM

What motivated you personally to get involved in the HIV response?

I am determined to work for the LGBTI community as it has been neglected for ages. The increasing HIV prevalence and infection rates among men who have sex with men and transgender people show that we cannot continue like this. Society needs to open up and accept the different ways in which people live their lives.

How do you use social media for your work in HIV?

Social media has become an important communication tool in my work, especially with other youth. It’s a great platform to raise awareness regarding HIV prevention and to fight misinformation and remove myths. On Facebook, where I have many followers and friends, I post questions related to HIV, such as: When did you last get tested for HIV? Does pre-counselling make any difference when getting tested for HIV? I also upload pictures whenever I get tested. Occasionally, I share personal success stories that are related to HIV and I promote safer sex practices.

What was your most memorable moment or lesson learnt at AIDS 2016?

My three most memorable moments at AIDS 2016 were being part of the first group of IAS Youth Ambassadors, witnessing the global AIDS response and contributing young people’s perspectives, as well as learning about practices and models that help reduce HIV vulnerability.

What would you like to say to future Youth Ambassadors?

My message to young HIV advocates is to not be shy to take over responsibility. Be part of the movement and make the world see that young people are able to do this. Young people really matter. All we need is to be devoted to this cause. I wish you all the best!

AGE 23 years old
COUNTRY Pakistan
OCCUPATION Monitoring and Advocacy Officer, Perih Male Health Society
ATTENDED FIRST AIDS CONFERENCE Durban, 2016

UPFRONT INQUISITIVE KIND
HOW YOU CAN BECOME AN HIV ADVOCATE ON SOCIAL MEDIA

**YOUR WEBSITE**

You don’t need to know HTML, be a graphic designer, or have a credit card to make your own website (although it helps). There are free tools available to create a website with prepared layouts and themes, including WordPress (www.wordpress.com), Weebly (www.weebly.com), and blogging and micro-blogging sites like Blogger (www.blogger.com) and Tumblr (www.tumblr.com). Free services usually host your website on their domain, but if you’re willing and able to pay, you can get your own URL.

**YOUR FACEBOOK PAGE**

In most countries around the world, Facebook is the most popular social network to connect with friends and family, and to follow updates from organizations, celebrities and the news media. It makes sense, then, that advocates use Facebook to raise awareness about their cause and spark action. A Facebook page allows you to build an audience online and post updates that will appear in their news feeds – just as if you are their Facebook friend.

**YOUR FORUM FOR ADVOCATES TO CONNECT**

Choose a place where advocates for your campaign can connect with each other and have discussions. Find out what tools your community is already using and take advantage of them. Some people prefer e-mail list-servs to communicate, while younger people are increasingly using closed groups on Facebook or WhatsApp messenger groups. Keep in mind that each tool has its pros and cons, and some might be used in your social group or part of the world, but may be less popular in others.
HOW YOU CAN BECOME AN HIV ADVOCATE ON SOCIAL MEDIA

YOUR HASHTAG
A hashtag helps to streamline conversations on social media about a specific topic. You can turn any word into a hashtag by putting a number sign before it, like #this. When posted to a social media platform like Twitter or Facebook, the hashtag turns into a hyperlink, which anyone can click on to follow all of the posts about that particular topic, and join in the conversation. You can turn any word or phrase into a hashtag, but if it is too general or has already been used by someone else, your conversations can get drowned out. Think of it like a radio frequency: find one that no one is using before you broadcast.

YOUR STORY
Think about what makes you passionate about the issues you care about. Chances are that you’re engaged in a cause because it personally affects you, your loved ones, or your community. How do you get other people to care? Share the story about why you care. What makes a good story? Stories tend to be more persuasive if the reader can visualize the characters and can relate to their motivations and feelings – even if they can’t relate to their experiences.

PHOTOS OR VIDEOS
Visual content not only helps readers to visualize the issue and the people it affects, it also performs better on social media. But you don’t need to be a pro to produce visual content for your campaign. Many young advocates are filming themselves on a webcam or their phone and uploading their thoughts on issues to YouTube, Facebook, Instagram and other platforms. Camera-shy? Write your message on a piece of paper, take a photo, and share it on social media with your hashtag.
HOW YOU CAN BECOME AN HIV ADVOCATE ON SOCIAL MEDIA

ESTABLISH YOUR GOAL

What is your overall objective?

To reduce HIV stigma? To help people living with HIV get access to treatment? To prevent new infections? Write your goal down so you don’t forget. Sometimes in the midst of a campaign we lose sight of the larger goal we are trying to achieve. Throughout the process of developing and implementing your campaign, keep reminding yourself of your goal and asking yourself if what you are doing is helping you get closer to it.

IDENTIFY YOUR STRATEGIES

What strategies will help you achieve your goal?

HIV stigma could be reduced by educating the public about HIV transmission risk. More people would probably have access to treatment if the government opened more youth-friendly HIV clinics. New infections could be prevented if more people knew their HIV status. You can have more than one strategy to achieve your goal, and they could be focused on different audiences.

CHOOSE YOUR TACTICS

What tactics will you use to operationalize each strategy?

This will depend on the tools and resources you have access to, and which tactics will work for each audience. For example, a Facebook campaign might be effective for educating the general public, but the government might be more persuaded by a targeted e-mail campaign. There is no ideal tactic for every situation; some tactics work well in certain contexts while falling flat in others.
Don’t wait until the end of your campaign to evaluate.

Keep monitoring your campaign as it continues, so you can modify your tactics based on which ones work best. What kinds of posts get the most likes? Did you lose followers because of something you posted? Have people RSVP’d for your event on Facebook? Mistakes are inevitable in any campaign, but if you can learn what works and what doesn’t, it will help make your campaign more effective.

Some goals are short term and some are long term.

Some goals won’t be achieved through one social media campaign, but will require a wider effort or multiple campaigns. Whether you achieve your result or not, the process of running a campaign helps you learn how to be a better advocate, persuading people to change their minds and take action – and these are skills that can be used for life.
**RULES AND GOOD PRACTICES**

Just like in everyday life, there are rules and good practices when it comes to communication on social media platforms. This set of basic social conventions that facilitate online interaction has been referred to as network etiquette or “netiquette”.

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<tr>
<th>Don’t</th>
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<tr>
<td>In your posts or comments, do not discriminate on the basis of race, creed, colour, nationality, ethnic origin, religion, civil status, sexual orientation, political or other beliefs, gender, disability, age or medical condition, in particular HIV.</td>
<td>✗</td>
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<tr>
<td>Don’t send humiliating pictures, videos or texts through apps such as WhatsApp and Snapchat or social media forums such as Facebook, Twitter and Instagram.</td>
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<td>Don’t post intimate pictures of someone else or yourself.</td>
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<td>Don’t create “hate groups” to bully someone.</td>
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<td>Don’t create fake profiles in the name of someone else for the purpose of bullying that person.</td>
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<td>Don’t post inflammatory messages with the aim of upsetting people.</td>
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<tr>
<td>Don’t use aggressive language or swear words, and be aware that capital letters could be perceived as aggressive.</td>
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Netiquette and Cyberbullying

#DELETECYBERBULLYING

If you have experienced cyberbullying, follow below guidance provided by the EU Initiative #DeleteCyberbullying

1. Tell someone and ask for help.
2. Remain calm and don’t react to provocations.
3. Save all the evidence. Take photos or screen shots.
4. Let the bullies know that they are hurting you and ask them to stop.
5. Contact the police if the harassment hasn’t stopped.
6. Don’t post any personal information, such as your private address, online.
7. Think twice before posting photos and ask others not to share your photos and videos.
8. Regularly change and use different passwords.
9. Clean your contact list.
10. Learn about and regularly update your browser settings.

Please visit www.deletecyberbullying.wordpress.com for further information.
WHAT IS HIV?

HIV stands for human immunodeficiency virus. Once the virus has entered the body, it begins to destroy a type of white blood cell called a T-helper cell, also referred to as CD4 cell, and makes copies of itself inside them.

The T-helper cell is an important component of the immune system, which is our body’s natural defense against microbes. Therefore, if a person becomes infected with HIV, it will be harder for them to fight off infections and diseases. Many people living with HIV do not have any symptoms, they don’t look or feel sick. But if HIV is left untreated and the immune system is weakened, opportunistic infections or cancers can develop. These co-infections and co-morbidities are signs that the person has developed the acquired immune deficiency syndrome (AIDS), their immune system is damaged and their vulnerability towards opportunistic infections is increased.

WHERE DID HIV COME FROM?

Chimpanzees in west central Africa have been identified as the source of the virus (HIV-1). It is estimated that the chimpanzee version of the immunodeficiency virus (called simian immunodeficiency virus, or SIV) was transmitted to humans when they came into contact with blood from SIV-infected chimpanzees. In the human body, the virus mutated into HIV and slowly spread across Africa and later into other parts of the world.
Use **condoms** or other effective sexual prevention methods consistently and correctly when you have vaginal, anal or oral sex. Other effective prevention methods include taking antiretroviral medication to stay virally suppressed.

Avoid sharing **needles**, syringes and other injecting equipment with anyone.

Get **tested** for HIV. If you get tested, you know your HIV status. If you know you are living with HIV and take your daily medication, this will reduce your viral load and lower the risk of transmission.

Ask your doctor about **post-exposure Prophylaxis (PEP)** if you had condomless sex and did not use any other effective sexual prevention method or shared syringes with a person who lives with HIV or might live with HIV. More information on PEP on page 28.

Ask your doctor about **pre-exposure prophylaxis (PrEP)** if you know you will have condomless sex with a person who lives with or might live with HIV and will not use any other effective sexual prevention method. More information on PrEP on page 28.
**HIV FACTS AND TERMS**

### HOW IS HIV TREATED?

No effective cure currently exists for HIV. But with proper medical care, HIV can be managed. Treatment for HIV is called antiretroviral therapy or ART. ART uses a combination of antiretroviral drugs (ARVs) to stop the HIV virus from copying itself and spreading throughout the body attacking the immune system. ARVs keep the virus at low levels. If taken every day, ART keeps people living with HIV healthy and result in an undetectable viral load. People who are virally suppressed can live a healthy life. Increasingly, we are starting to see that people living with HIV are having life expectancies that are similar to those of their HIV-negative peers.

### KEY HIV PREVENTION TERMS

**eMTCT**

Elimination of mother-to-child transmission of HIV refers to a strategy for ending new HIV infections among children and keeping their mothers alive and families healthy. It consists in actions of family planning, antiretroviral treatment to women and for prevention of HIV transmission to babies during pregnancy, labour, delivery, and breastfeeding. It also includes improving access to early infant diagnosis and paediatric treatment for children living with HIV with the goal of ending HIV and AIDS as a public health issue by 2030.

Recently, Cuba, Belarus and Thailand have received validation from the World Health Organization (WHO) for eliminating mother-to-child transmission of HIV.

**PrEP**

Pre-exposure prophylaxis (PrEP) is a prevention method for people who are not living with HIV but are at high risk for infection. It consists in taking a daily pill: a combination of two HIV medicines. Combination drugs for prevention of HIV are approved in USA, Canada, Australia, France, Kenya, Peru and South Africa. Studies are underway to investigate long-lasting injectable PrEP (12-weekly injection) and non-daily PrEP.

**PEP**

Post-exposure prophylaxis (PEP) is another name for emergency HIV treatment. It involves taking antiretroviral medication as soon as possible (within three days) after exposure to HIV and during one month to reduce the risk of HIV acquisition.

**VOLUNTARY MEDICAL MALE CIRCUMCISION**

Male circumcision has been found to reduce the HIV acquisition for males, but circumcised men can still become infected with HIV, and if HIV-positive, can infect others. The WHO recommends that male circumcision should never replace other known effective prevention methods and should always be considered as part of a comprehensive prevention package, which includes correct and consistent use of male or female condoms, reduction in the number of sexual partners, delaying the onset of sexual relations, HIV testing and counselling, and, if necessary, linkage to antiretroviral therapy.
HIV FACTS AND TERMS

KEY HIV CARE AND TREATMENT TERMS

PEOPLE LIVING WITH HIV
The preferred term to refer to people living with HIV or AIDS is “people living with HIV”, as it reflects the fact that persons with HIV may continue to live well and productively for many years. Most people with HIV do not have and will never develop AIDS.

CD4
CD4 cells are a type of immune system cell in the body that HIV attacks and kills over time. A simple blood test can count the cells and tell how strong the immune system is.

VIRAL LOAD
Viral load is the amount of virus in the blood; it is measured in copies/mL. A viral load test is a blood test that helps provide information on how well antiretroviral therapy is controlling the virus, it shows how many copies of the virus can be found in the blood.

VIRAL SUPPRESSION
When antiretroviral therapy reduces a person’s viral load to an undetectable level. Having an “undetectable” viral load doesn’t mean that a person is cured, the virus is still present but its levels are below what a laboratory test can find.

TREATMENT ADHERENCE
In order to sustain suppression of the virus, people living with HIV need to adhere to their treatment. But taking medication every day for the rest of one's life can be challenging, particularly for young people. Youth-friendly health services including individual adherence counselling, psychosocial support including peer support groups, social protection interventions and life-skills training are among the strategies that can help improve treatment adherence among young people.

CO-INFECTIONS AND CO-MORBIDITIES

CO-INFECTION
If a person has more than one infection at the same time. For example, when a person with HIV also has tuberculosis (TB), they are said to have an HIV/TB co-infection. This can make treatment for both infections more difficult; the diseases may also interact and progress faster.

CO-MORBIDITY
If a person has developed more than one disease (morbidity) at the same time. Examples for co-morbidities are: cardiovascular disease; endocrine and metabolic issues (including diabetes, hyperlipidemia); HIV-associated neurocognitive disorder (HAND); depression and other psychiatric manifestations.

NON-COMMUNICABLE DISEASES
Those are diseases who are not caused by infections. Examples of NCDs are cancer, hypertension, diabetes, or mental health conditions. As life expectancy for people living with HIV rises, non-communicable diseases play an increasingly important role in the HIV field.
“ENDING” THE AIDS EPIDEMIC
The expression to “end” the AIDS epidemic by 2030, means achieving the following goals:

- Fewer than 500,000 people newly infected with HIV per year
- Fewer than 500,000 people dying from AIDS-related causes per year
- Elimination of HIV-related discrimination.

For 2015, UNAIDS estimated 2.1 million new HIV infections and 1.1 million AIDS-related deaths.

HLM
HLM stands for the UN High-Level Meeting on Ending AIDS. From 8 to 10 June 2016, 193 member states adopted the Political Declaration on HIV and AIDS: On the Fast-Track to Accelerate the Fight Against HIV and to End AIDS by 2030.

WORLD HEALTH ASSEMBLY (WHA)
The World Health Assembly is the annual meeting of Member States that gives direction to the goals and priorities of the World Health Organization (WHO). The Sixty-ninth World Health Assembly (2016) adopted three global health sector strategies on HIV, viral hepatitis and sexually transmitted infections (STIs) for the period 2016-2021. Each aims to accelerate and intensify the health sector response to further progress towards ending all three epidemics.

SUSTAINABLE DEVELOPMENT GOALS (SDGs)
Until 2015, the HIV response was one of the eight international development goals on the Millennium Development agenda. From 2016 onwards, the Sustainable Development Goals (SDGs) have replaced the Millennium Development Goals and the global response to HIV is streamlined throughout several development goals. The 17 goals, to be achieved in the next 15 years, are interlinked and centred on social inclusion, ensuring that no one is left behind. Most relevant to the HIV response are “Good health and well-being” (SDG 3); “Reduced inequalities” (SDG 10); “Gender equality” (SDG 5); “Peace, justice and strong institutions” (SDG 16) and “Partnerships for the goals” (SDG 17).

UNAIDS’ 90 90 90 TREATMENT TARGETS
These are global treatment goals set by UNAIDS. By 2020:

- 90% of all people living with HIV will know their HIV status through testing.
- 90% of all people with diagnosed HIV will be on treatment (ART).
- 90% of all people receiving antiretroviral therapy will have viral suppression (through treatment, the amount of virus in the blood will reduce to undetectable levels). This means that a person can live a good quality life and also that the possibility of transmission of HIV from this person to others is very low. It does not mean that the person is cured.
# HIV FACTS AND TERMS

## REFERENCES AND ADDITIONAL RESOURCES

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BECOME AN HIV YOUTH ADVOCATE
The mission of the International AIDS Society (IAS) is to lead collective action on every front of the global HIV response through its membership base, scientific authority, and convening power.

Founded in 1988, the IAS is the world’s largest association of HIV professionals, with members from more than 180 countries working on all fronts of the global AIDS response. Together, we advocate and drive urgent action to reduce the global impact of HIV.

The IAS is the steward of the world’s two most prestigious HIV conferences – the International AIDS Conference and the IAS Conference on HIV Science. These conferences have established a gold-standard meeting that convenes the world’s top scientists, civil society members and policymakers to jointly discuss the fight against HIV.

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