Risk Communication and Community Engagement, Mitigating Stigma and Discrimination: Lessons from HIV/AIDS

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Lessons learned from HIV:

1. No singular community is exclusively at risk for disease.
2. Focus on *how* disease is transmitted, not *who* transmits it.
4. Ensure an equitable response.
5. Language is important.
6. Images are important.


WHO’s Risk communication and community engagement (RCCE) for monkeypox outbreaks, June, 2022.

CDC’s Reducing Stigma in Monkeypox Communication and Community Engagement, July 2022.

Non-stigmatizing language:

» Do talk about monkeypox or the monkeypox virus and communities most affected.

» Don’t attach labels of particular demographics to the disease. For example, monkeypox is not a ‘gay’ disease. Take care to note that anyone in contact with the virus can become infected.

» Do talk about the behaviors that can lead to acquiring or contracting monkeypox if the virus has entered social networks.

» Don’t talk about people spreading monkeypox or infecting others, as it implies that someone is doing this intentionally.

» Do emphasize that everyone who has close contact with someone who is infectious is at risk of monkeypox.

» Don’t imply that only men who have sex with men are at risk.

» Do focus on patterns we are currently seeing in the data, for example, ‘Many of the cases we are currently seeing are in communities of men who have sex with men’.

» Don’t imply that those who identify as gay or bisexual are inherently more at risk, or apply moral judgements or assumptions about people’s sex lives.

WHO’s Risk communications and community engagement interim guidance on using inclusive language in understanding, preventing and addressing stigma and discrimination related to monkeypox, 9/22.
Two-tiered RCCE approach:

Key affected populations

General population

Courtesy of Brian Pederson, FHI 360
General audiences, including household contacts of MPX cases:

- MPX is a public health issue relevant to everyone
- MPX can be acquired by all people, regardless of gender identity or sexual orientation
- Provide information about what MPX is, how it spreads, encourage seeking healthcare if symptoms

Sexually active MSM, sex workers:

- Identify targeted channels to directly reach this audience – websites, dating apps
- Message across racial, ethnic, socioeconomic, geographic backgrounds
- Provide non-alarmist, fact-based messaging that provides tools people need to protect themselves and others
- Target venues where skin-to-skin contact is likely (large-scale events, massage parlors, spas, saunas, sex clubs)

Chris Akolo, EpiC/FHI 360, personal communication.
CDC’s Reducing Stigma in MPX communication and community engagement, Dec 2021.
WHO’s Risk communication and community engagement (RCCE) for monkeypox outbreaks, June 24, 2022.
1. Engage Community:
   - Work directly with affected groups – LGBTQIA, MSM, CSWs.
   - Discuss household contact risk among contacts of cases
   - Engage CSOs, CBOs, community leaders to message specific audiences, local contexts
   - Use culturally-appropriate language and communication channels

2. Engage Media:
   - Media engagement is critical to combating myths and misconceptions, and avoiding stigmatization
   - Train media, social media, community influencers to provide accurate information and address stigmatizing language

3. Engage Healthcare Providers:
   - Engage HCW networks to educate, advise about MPX case definitions, strategies for contact tracing
   - Train HCWs about occupational risks of MPX infection
   - Address discrimination within healthcare settings, directed towards marginalized/stigmatized groups (PLHIV, MSM); may reflect discriminatory laws, policies
   - Monitor health service user experiences; educate HCWs to provide discrimination-free healthcare

UNAIDS, Zero Discrimination in Health Care Settings, 2017
RCCE / MPX Resources:


www.cdc.gov/poxvirus/monkeypox/pdf/monkeypox_stigma_508.pdf
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