

# BE THE GENERATION

TO END THE AIDS EPIDEMIC

**BTG News**

**2021 Edition, Issue 4**

## From the Editor

I'm sure everyone reading this knows that December 1<sup>st</sup> is World AIDS Day. But amidst the chaos, research, activism, loss, and survival that has consumed our lives this year, some of us may need a reminder that December 1<sup>st</sup> also means that 2021 is almost over. If this year hasn't given you permission to slow down, allow me: please slow down. Take a moment to soothe yourself. If you only have time to *either* read this newsletter *or* take a moment of self- or community-care, then close this file down, and we'll catch up next year.

Why is it so important to slow down, rest, and rejuvenate? Think about it: the title of this program is, "Be the Generation to End the HIV/AIDS Epidemic." We're asking a lot of you! And those of us who have committed to this mission tend to be the sort of people of whom much is asked, all the time, from many directions. So this World AIDS Day, we remind you that the purpose behind all our commitments is a life that is happy, healthy, and free. That is how we want you to show up to this movement—not someday, but right now. That is how we will sustain ourselves and be the generation to end the HIV/AIDS epidemic.

Read on for reflections on HIV prevention research, including my goodbye to the [MTN](#). As always, share our [resources](#) and [stay in touch](#)!

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## **HIV Prevention Trials Network (HPTN)**

More than 81,000 drug overdose deaths occurred in the US in the 12 months ending in May 2020, the highest number of overdose deaths ever recorded in a 12-month period, according to provisional data from the Centers for Disease Control and Prevention. People who inject drugs (PWID) face more than just the risk of overdose. The lack of access to health care, including medication for opioid use disorder, poverty, poly-substance use, and mental health disorders experienced by PWID, combine to worsen the risk of HIV transmission and acquisition along with other serious health issues. The latest HPTN feature, [“Determining the Efficacy of Mobile Health Units Providing Integrated Health Services to People Who Inject Drugs,”](#) explores HPTN 094, a study to address the overlapping and intertwined epidemics of opioid addiction and HIV acquisition among PWID. The study is reaching people living with opioid use disorder by bringing integrated and judgment-free health services delivered in a mobile unit, supported by peer navigation, to where they live.



HIV VACCINE  
TRIALS NETWORK

## **HIV Vaccine Trials Network (HVTN)**

In two weeks, a new study called HVTN 302 will begin enrollment of up to 108 people to test three different experimental vaccines against HIV. These vaccines use the mRNA vaccine technology developed by Moderna and NIH that has been successful in fighting COVID-19. Researchers will study the safety of and immune responses to the different vaccines.

The Rev. Edwin Sanders, Senior Servant at Metropolitan Interdenominational Church in Nashville, TN has served as a long-time consultant to the HVTN and associated agencies and is the project manager for the COVID-19 Prevention Network Faith Initiative. Dr. Ulysses Burley III, Immunologist, faith lay leader, and Founder of UBtheCURE LLC, has also worked with the HVTN to provide faith communities with accessible biomedical education in the context of the social determinants of health. UBtheCURE is a consulting company that operates at the intersection of faith, health, and human rights with expertise in HIV/AIDS. The organization specializes in HIV and AIDS awareness, advocacy, and capacity building, but also includes mass incarceration, LGBTQIA+, gender and racial

justice, food security, and peace in the Middle East advocacy. UBtheCURE has been chosen to build upon the successful model of the CoVPN Faith Initiative to establish the HVTN Faith Initiative with the overarching purpose of increasing awareness of the impact of HIV/AIDS in the United States and the prospect of HIV vaccine development, while continuing to address the ongoing COVID-19 pandemic and other existing and emerging health challenges that disproportionately impact communities of color, which include people of faith. The HVTN Faith Initiative will mobilize a diverse cadre of faith ambassadors around the US to support communities to bridge faith and science.



Ulysses Burley, MD  
Founder, UBtheCure, LLC.  
Project Lead, HVTN Faith Initiative



### **Microbicide Trials Network (MTN)**

This is Brian Minalga (Editor of this newsletter), writing the MTN section this time around. If you haven't heard, as of December 1, 2021, the MTN will no longer be one of the research networks funded by the National Institute of Allergy and Infectious Diseases. The MTN was established in 2006, and over the past 15 years, this research network has been home to some of the most innovative HIV prevention research—and the amazing people running it.

What made the MTN's research so special? It was designed specifically for bottoms. Yep, you read that right! The MTN centered people who have receptive vaginal and anal sex in their research. They did so by testing products that—unlike

vaccines, pills, injections, and implants—would only need to be used in the vagina or rectum to prevent HIV, and that could possibly be used right around the time of sex. The big-picture idea was empowering bottoms to take HIV prevention into their own...hands...by using products that made sense in their lived sexual experience. What if there was a douche that could prevent HIV? A lube? What if there was something as discreet and quick-acting as a Listerine pocket pack film that could be inserted vaginally just before sex to prevent HIV? What about a ring that could be left inside the vagina for a month or longer to prevent HIV long-term? These are the research questions that the MTN was asking. And they delivered. This summer, the dapivirine vaginal ring for HIV prevention was [approved for use](#) in Zimbabwe, with more approvals to come. Thanks to the MTN's research, cisgender women finally have an HIV prevention product that was designed specifically for them. That is revolutionary.

There are many ways to look at MTN's research, but I choose to frame MTN's legacy around "bottoms" because I think this approach has the most to teach us. In HIV advocacy, there is often the notion that the biomedical is somehow at odds with the social and structural. The MTN, however, had the radical idea that biomedical interventions could be designed in direct response to social and structural causes of HIV transmission. The people I'm referring to as "bottoms" include transgender people, cisgender women, gay and other men who have sex with men...people who are seldom asked how they can be supported in the social and structural contexts in which they have sex. The status quo approach looks at these communities and says, "Here's a product we spent a lot of time and money developing for you; take it." The MTN approach says, "You tell us: how can we support you?" That is how I will always remember the MTN. That is how we should all approach our call to end the HIV epidemic.

While the MTN is no longer one of our research networks, there is a commitment for the work that it started to continue through the HIV Prevention Trials Network (HPTN). We will continue to maintain a section for microbicides on our [website](#), and we will continue to report on microbicides research in this newsletter. The MTN itself will also have one last entry in this newsletter; be on the lookout for our first issue in 2022, where the MTN will have the final word. But for now, allow me to thank the MTN for all you have contributed to the field of HIV prevention research *and* social justice. Bottoms up!

HANC is pleased to share these webinar recordings, articles, videos, and other resources:

- [Be the Generation website](#): the best place to go for trustworthy information on biomedical HIV prevention research. Features sections on PrEP, U=U, Microbicides, HIV vaccine research, inspiring videos from researchers and community members, and even a quiz to test your knowledge of HIV prevention research.
- [Biomedical HIV Prevention for Women](#): a free downloadable training
- [Women in HIV Cure-Related Research](#): a free downloadable training
- [Transgender Training Resources Homepage](#): the Division of AIDS at the National Institute of Allergy and Infectious Diseases has put all its amazing resources related to research with transgender communities in one place. All resources are free; you may just need to create a free account if you don't have one already.
- [COVID-19 Community Resources](#): In 2020, HANC formed the COVID-19 CAB Coalition (CCC). The CCC includes folks from the COVID-19 Prevention Network's Community Engagement Group, ACTG's ACTIV-2 CAB, AVAC's COVID-19 Advocates Advisory Board, The National CFAR Coalition, Stony Brook's COVID-19 CAB, Community Partners, and DAIDS. This resource page includes links to prevention and therapeutic studies, general information on COVID-19, links to webinars, and social media accounts to follow.
- [Webinar Library](#): a collection of over 30 of our webinar recordings on topics such as HIV & race, HIV & women, HIV genetic sequencing, HIV & aging, outreach & marketing, Native Americans & HIV, microbicides research, pregnancy & lactation in HIV research, HIV in the Latinx community, community engagement, and more.

### **Important Dates**

- December 2-3: [U.S. Conference on HIV/AIDS](#). Join us for our workshops on December 3<sup>rd</sup>:
  - 1:15 to 2:15 p.m. Eastern: *“Respuesta Comunitaria al COVID-19 en Latinx en los Estados Unidos”* (Community Response to COVID-19 in Latinx in the United States)
  - 2:30 to 3:30 p.m. Eastern: *“It’s About Time: HIV Research Just for Transgender Women”*

- February 7: [National Black HIV/AIDS Awareness Day](#)