Responding to the mpox emergency: Community Protection in the Americas

Dr. Ruben Mayorga Sagastume

Senior Advisor, Civil Society Engagement for the Elimination of Communicable Diseases

EPI-WIN session
4 September 2024
Virtual (Zoom link)

PAHO coordinating CSO meetings with GCTH

Soon upon acknowledgement of the populations affected by mpox:

- Periodic, joint meetings of key populations (MSM, TW, PLH, others) with the group of National AIDS Program (NAP) Directors, called Grupo de Cooperación Técnica Horizontal-GCTH
- Updates in each of the thematic pillars
- Virtual, attended by up to several hundred participants via Zoom
- Algo, webinars exclusively for CSO



HIV/AIDS Forum in Lima, 25-26 Oct 2022









- Joint meeting PAHO, GCTH, GF, IAPAC, AHF, USAID, IPPF, Via Libre
- More than 80 F2F participants, > 100 remote participants
- Key populations CSO together with NAP Directors
- Lima Declaration, making reference to focalized communications for GB/MSM, vaccine access

CSO in Peru convened in coordination with UNAIDS, PAHO and MoH's communications department



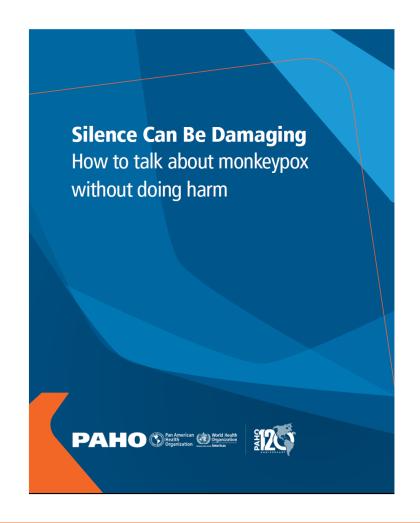
- https://www.paho.org/es/historias/peru -responde-viruela-simicainvolucrando-comunidades-afectadas
- "We focused training healthcare personnel working in differentiated services for these populations (CERITS, UAMPs and ARV services), as well as mobile brigades and CSOled services, focusing on active case finding, communications and evidence-based information.... always avoiding stigmatization".

Carlos Benites, NAP Director, Peru

Publication of "Silence can be Damaging"

Objectives

- To reinforce knowledge about transmission, prevention, diagnosis and treatment, including vaccines.
- To encourage communities with bidirectional production and dissemination of information, educational content and communication materials
- To provide resources that facilitate dialogue among communities, especially the most vulnerable.



NOTE ON THE FIRST EDITION

This is the first version of this guide, based on existing information and evidence as of 20 August 2022. The dynamics and evolution of the monkeypox outbreak will be followed closely and there will be revisions and updates. The purpose of this guide is to provide resources so that people can work together to address the emergency created by the monkeypox outbreak, drawing on participation from civil society, communities, and in particular, organizations working with gay and bisexual men, and men who have sex with men.

4. TALKING ABOUT MONKEYPOX MEANS TALKING ABOUT SEXUALITY.

The current monkeypox outbreak mostly affects gay and bisexual men, and other men who have sex with men and who have multiple sexual partners.

Information from the United States Centers for Disease Control and Prevention (CDC) indicates that 76% of people diagnosed with monkeypox had sex with more than one sexual partner in the three weeks prior to diagnosis2. The same data source reports that cases of monkeypox have increased among users of HIV pre-exposure prophylaxis (PrEP).

A concentrated epidemic

A study published in the New England Journal of Medicine analyzed the demographic and clinical characteristics of 528 monkeypox cases in 16 countries (6), and found that: 98% of those infected were gay or bisexual men whose average age was 38 years; 41% of cases were people living with HIV, the great majority of them with wellcontrolled HIV infection; 96% of those with HIV infections were taking antiretroviral therapy; and the HIV viral load was undetectable in 95% of cases.

In view of these data, which show that the majority of cases are concentrated in MSM, many of whom have HIV infections, communication must be directed to the appropriate recipients at each juncture of the emergency targeting the priority audiences without creating excessive attention that could be counterproductive for those groups, while effectively informing the rest of the population of the risks.

The strategy calls for creating information adapted for each segment of the population (general population and affected populations) using correspondingly specific language and distribution channels.

Excessive focus on sex and sexual intercourse

Monkeypox has not yet been classified as a sexually transmitted disease, but close contact during sexual intercourse has been identified as the main situation in which the virus is transmitted. WHO estimates that 95% of transmissions occur during sexual intercourse.

When reporting on monkeypox and communicating with the general public, there should be less emphasis on sexual intercourse, even if this jeopardizes the communication of key information for prevention. The disease is transmitted among men who have sex with other men.

Current trends that increase the number of sexual relations

- Social media and dating apps. EPractically every city in the world has businesses that provide apps to quickly find people for sexual encounters. They are also used by couples and groups. These apps can be an excellent tool for conveying messages that create awareness of the issue and increase its
- Chemsex. As the word suggests, chemsex involves combining chemicals, i.e., recreational drugs, with sexual activity (1). This sexualized use of substances is an emerging trend in the sexual practices of gay and bisexual men (13), and has spread especially in group situations. Not all sexual practices that occur while under the influence of drugs are considered chemsex. An inhibition-reducing, stimulating, analgesic, muscle-relaxing, and sexual performance-enhancing effect is what makes chemsex a practice that fosters the circulation of monkeypox, STIs, and viral hepatitis (14).

The most commonly used substances in the practice of chemsex are GHB/GBL (liquid ecstasy), mephedrone ('meph'), cocaine, amyl nitrite ('poppers'), methamphetamines, ketamine, and MDMA ('molly'). Some of these psychoactive substances create heavy dependence (15). Chemsex has been associated with overdoses, suicide, addiction, mental health problems, and sexual assault. It can also have a heavy impact on sexual health and well-

 Slamming. This term is used to describe the injection of drugs in a recreational sexual setting (not in other contexts), usually involving gay and bisexual men (16). The most commonly used substances are methamphetamine and mephedrone. The goal is the same as in chemsex: to reduce inhibition and extend the duration of the sexual encounter. Many people share syringes during a slamming session, and this is the most efficient way of transmitting HIV and viral hepatitis. This form of drug use in the context of sexual relations has not become as widespread as chemsex. Many of the risks of injectable drugs are due to the sharing of needles during these sexual activities.

Demographics of these practices

Initially, chemsex and slamming were concentrated in a sub-population of middle- and upper-middle class gay men with the resources needed to acquire the substances and organize the group sex events (17). However, there is a trend to promote the participation of gay, bisexual, and other MSM, and young people in particular, as guests at these events (18). For this reason we should not pigeonhole the populations most involved in this practice. Both practices are still subject to a degree of taboo within the gay and bisexual community. This, added to the illegal status of the drugs used in this context, makes it difficult for people to talk openly with health workers, or even with friends.

² As of July 22nd, CDC analyses of the history of sexual exposure in the three weeks prior to diagnosis indicate that 27% of these patients had one partner, 40% had two to four partners, 14% had five to nine partners, and 19% had ten or more partners.

Promoted sharing of CSO experiences

Community experiences of the 2022–2023 mpox outbreak in Europe and the Americas

Technical brief

The survey was launched in 23 newly affected countries in Europe and the Americas and in nine languages. Countries in which geospatial application users were invited to participate included Belgium, France, Germany, Ireland, Italy, Netherlands (Kingdom of the), Poland, Portugal, Serbia, Spain, Switzerland and the United Kingdom of Great Britain and Northern Ireland in Europe and Argentina, Brazil, Canada, Chile, Colombia, Costa Rica, Ecuador, Guatemala, Mexico, Peru and the United States of America in the Americas.

Fig. 2. Adaptive changes in sexual behaviour because of mpox

Between May and December 2022



ĸ

93.2% reduced their number of sexual partners



88.3% avoided group sex



84.5% avoided sex clubs



55.7% had open conversations



• 53.6% avoided using drugs in sexual contexts*

> * Calculated among those who usually participate in these activities.

In May 2023



35.5% of those who made changes

were still changing their sexual behaviour



64.5% of those who made changes because of mpox reverted to their previous

sexual behaviour

The main reasons for stopping these changes included:



42.7% because of a decrease in transmission



29.7% because of mpox vaccination



14.9% because of behavioural fatigue



4.5% because of getting mnor



Production of materials for CSO in Guatemala

- PAHO worked through a CSO working with peers to validate materials produced; now adapted for regional communications for CSO
- https://drive.google.com/drive/folders/14W4ne0U
 -EtwGCNEGg3hS1R2yCAU-tOkW
- https://drive.google.com/file/d/1krAZVDLiiQITVM wbfbmXjKaowKr0QbO_/view?usp=drivesdk
- https://drive.google.com/file/d/1DAKe4HfJQlArKZ 1p5AjgxQlYHFKVSrwp/view?usp=drivesdk
- https://drive.google.com/file/d/14FZmewBYCpDb bSE-eQdoJFQ0eOjKhMmM/view?usp=drivesdk
- https://drive.google.com/file/d/15iMKq8SwPUATu _n6VwzaS54O1dPOC24U/view?usp=drivesdk









Mou between PAHO and Grindr

- PAHO and Grindr joined efforts to provide key information on mpox to LGBTQI+ communities in the Americas
- Work together to tackle misinformation on mpox and address critical information gaps – particularly around prevention, treatment, and care – among those groups who are disproportionately at risk of mpox infections.
- ... further contemplates discussing and addressing ways to support non-discriminatory and non-stigmatizing communication activities around the virus, in coordination with institutions working with LGBTQI+ communities

Recursos de MPOX con la OPS

Mensajes coordinanos fueron enviado a usuarios en LATAM mensualmente.

Junio a Diciembre 2023

2 diferentes mensajes 3 idiomas

de mensajes: 18 # de paises: 27

total de impresiones: 10.4 M

% de rendimiento

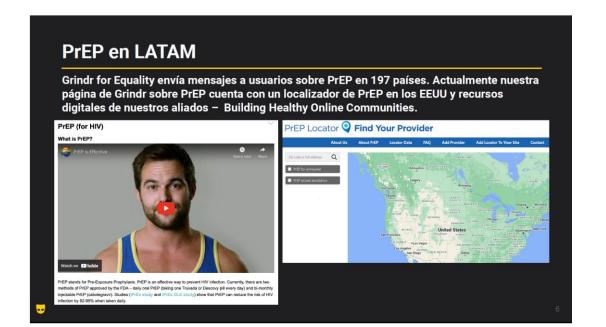
Mensaje 1 - 88% visto, 4% clicks Mensaje 2 - 81% visto, 3% clicks

¡Empodérate de tus planes!
El Mpox sigue circulando y nos puede afectar en forma desproporcionada.
Si piensas que puedes estar enfermo, quédate en casa y contacta a un profesional de salud.

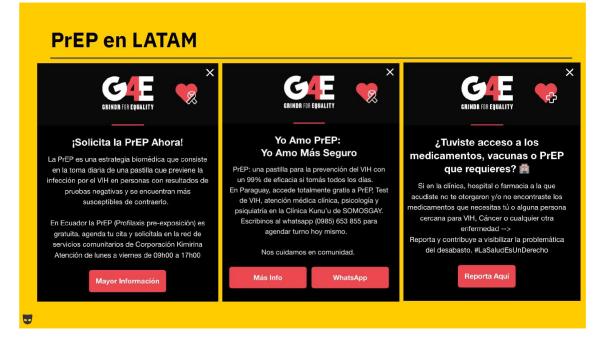
Mantente informado para tu comunidad. Lee más sobre cómo protegerte a ti mismo y a quienes te rodean.

Aprende Más









Follow up

- Risk communications materials to promote differentiated services for key populations
- Continuous integration of mpox into HIV and STI services
- Enhanced screening for HIV and STIs among KP, promoting earlier diagnosis and immediate treatment for HIV infection
- Upscaling of PrEP and other combination prevention strategies
- Promotion of syphilis diagnosis and treatment among KP
- Promotion of joint elimination of diseases transmitted via sexual contact (HIV, STI, HPV, hepatitis) among these communities

Contacts at PAHO's HIV, STI, Hepatitis and Tuberculosis Unit

• Rubén Mayorga Sagastume <u>mayorgarub@paho.org</u>

Mónica Alonso González
 <u>alonsomon@paho.org</u>

Hortencia Peralta
 peraltahor@paho.org

Omar Sued
 <u>suedoma@paho.org</u>

Bernardo Nuche

 nuchebber@paho.org

Marcelo Vila
 <u>vilamarc@paho.org</u>