

DISCLOSURES AND SILENCES: NAVIGATING SEX, HIV, AND UNDETECTABLE VIRAL LOAD PRE AND POST HIV DIAGNOSIS

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BACKGROUND

Advances in the biomedical prevention of HIV, alongside the global U=U (Undetectable = Untransmittable) campaign have been posited as having the potential to reduce HIV-related stigma, particularly in sexual contexts by alleviating anxieties surrounding disclosure and bridging the "serodivide" (the avoidance of sex with partners of a different HIV status).¹

STUDY DESIGN AND METHODS

The *Newly Positive* study investigates contemporary experiences of HIV acquisition, diagnosis, treatment and care in Australia. Drawing on interviews with 51 people diagnosed with HIV in the previous 12 months, our analysis explored the effects of undetectable viral load (UVL) on sexual negotiations.

BEFORE DIAGNOSIS

Across the interview accounts awareness and acceptability of U=U prior to diagnosis was low. Women, heterosexual men, and bisexual men usually had no knowledge of UVL prior to diagnosis or awareness of U=U messaging. In contrast, most gay and queer identifying men had at least some awareness of UVL, although levels of understanding were low:

Do you mean you would avoid people with HIV sexually?

Absolutely. Even [if they were] undetectable. I was ignorant in the sense that I did not know that they couldn't pass it on.
(Kieran, gay man, 36, Australia)

Importantly, knowledge of UVL or use of PrEP did not necessarily translate into a willingness to have sex with people living with HIV.

Avoidance of HIV-positive partners was common, although it was often indirect and based on assumptions about a person's HIV status rather than explicit exclusionary practices. A few gay/queer men drew a distinction between trust in the science and trust in individuals' capacity to maintain an undetectable viral load.



CONCLUSION

UVL has substantially reduced anxieties about onward HIV transmission among people living with HIV. However, ethical dilemmas surrounding disclosure persist, as do fears of rejection by sexual partners, with some of these fears reflecting participants' own practices of sexual exclusion prior to diagnosis. It appears biomedical prevention has not yet lived up to the promise of making discussions of HIV status more open.

While continued promotion of UVL and U=U remains important, increasing knowledge alone may not fully address HIV-related sexual stigma. Participants' accounts suggest that sexual stigma may reflect enduring ethical and affective associations attached to HIV that continue to shape sexual inclusion and exclusion even in the context of biomedical prevention.

AFTER DIAGNOSIS

Reaching undetectability was an important milestone for participants and played an important role in sexual negotiations. Beyond its implications for onward transmission, undetectability also carried important symbolic value and, for many participants, marked a return to sex. Acceptance of UVL as a prevention strategy was high and undetectability was understood to free PLHIV from legal and ethical obligations to discuss their HIV status with sexual partners.



I mean, everyone takes care of his own sexuality and sexual health. And I know I am undetectable, so, I cannot pass on the [virus], so I don't find it necessary.
(Gustavo, gay man, 34, Argentina)

Most participants said they would disclose their status if directly asked, but in practice questions from sexual partners about HIV status were often less direct, for example, 'Have you been checked?'

Some participants described questions from potential sex partners such as, 'Are you on PrEP?' which they felt was used as a proxy for confirming the HIV-negative status of partners. Some participants found it easier to say yes than explain that they were undetectable:

I'll be honest, I have maybe once or twice said 'yes', just really because I've felt that uncomfortable with the way it was proposed but [it] didn't sit with me properly after.
(Jaco, gay man, 44, Australia)

Undetectability removed participants' fears of onward transmission, but it did not always make talking about HIV easier or lessen concerns around sexual rejection.

1. Koester K. A. et al. (2018) "Losing the Phobia:" Understanding How HIV Pre-exposure Prophylaxis Facilitates Bridging the Serodivide Among Men Who Have Sex With Men. *Frontiers Public Health*. 6:6:250. doi: 10.3389/fpubh.2018.00250.

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