

Keywords

Social sciences, sexuality, Living with HIV, U=U

Disclosures and Silences: navigating sex, HIV, and undetectable viral load pre and post HIV diagnosis

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Background

Biomedical prevention in the forms of undetectable viral load (UVL) and Pre Exposure Prophylaxis (PrEP) have significantly reduced HIV incidence in Australia. These prevention strategies are also seen as ways to eliminate stigma towards people living with HIV (PLHIV). This presentation explores the effects of UVL on contemporary sexual negotiations.

Method

The paper draws on interviews from the *Newly Positive* study with 51 people diagnosed newly diagnosed with HIV. Forty-one participants identified as gay, bisexual, or queer men, (GBMQ), 4 identified as heterosexual men, and 6 as heterosexual women. The interview schedule included questions about pre and post diagnosis sexual negotiations, and knowledge and acceptance of UVL.

Results

Prior to diagnosis awareness of UVL was typically low, however, even among the small number of GBQM who had a good understanding of UVL, avoidance of HIV sexual partners was common.

Post diagnosis acceptance of UVL was high and removed concerns about onward transmission. UVL also freed participants from the need to disclose their HIV status to sexual partners, though many remained conflicted about not disclosing their status.

Among GBQM PrEP dominated both their pre and post diagnosis sexual negotiations, including, in some cases, feeling they had to say yes when asked if they were on PrEP post diagnosis. Most participants said they would disclose their status if directly asked, but in practice questions from sexual partners about HIV status were typically less direct, for example, 'have you been checked?' Many participants continued to have anxieties about sexual rejection if they disclosed their HIV status.

Conclusion

UVL has removed anxieties about onward transmission, but ethical dilemmas about status disclosure persist, as do fears of rejection. While our findings indicate the need to continue promoting and explaining the science of UVL, we argue that ongoing sexual stigma may also reflect unconscious assumptions of moral deficit and unruliness associated with HIV.

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