

ACCKWA Position Statement on U=U

What is U=U?

U=U, Undetectable = Untransmittable, refers to the [campaign](#) regarding scientific evidence demonstrating that an individual who has maintained an undetectable HIV viral load (less than 200 copies per milliliter of blood) for at least six months will not sexually transmit HIV, regardless of condom use.^{1, 2}

Why is this important?

- Reduces social stigma and self stigma regarding HIV.
- Opens up social, sexual, and reproductive choices for people with HIV and their sexual partners.
- Potentially benefits the health of people with HIV because reduced stigma and the knowledge that HIV treatment can be highly effective make it more likely that people will get tested for HIV and will begin treatment earlier.
- Strengthens advocacy efforts for universal access to HIV treatment, care, and diagnostics
- Strengthens advocacy efforts for decriminalization of HIV.

Context and Additional Considerations

- Social, economic, and environmental factors influence people's vulnerability to infection, access to treatment, and ability to consistently follow treatment plans. These factors include but are not limited to gender identity, sexual orientation, ethnicity, race, immigration status, class, poverty, food instability, housing instability, social isolation, and incarceration history. These factors thus impact viral load and need to be considered when discussing HIV transmission.
- Social factors often affect viral load as an indirect consequence of stigma, homophobia, racism and colonization. Therefore, viral load should be understood as occurring in the context of these systemic problems.
- Some people continue to have a detectable viral load even with treatment.
- It is important to note that the same level of scientific data is not available to determine whether having an undetectable viral level for at least six months impacts transmission of HIV via pregnancy, chest feeding, or injection drug use.

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ACCKWA appreciates the importance of the U=U campaign in addressing aspects of stigma and advocacy, and looks forward to campaigns that further incorporate contextual factors that influence people's viral load.

¹ Cohen, M. S., Chen, Y. Q., McCauley, M., Gamble, T., Hosseinipour, M. C., Kumarasamy, N., ..., Fleming, T. R. (2016). Antiretroviral therapy for the prevention of HIV-1 transmission. *The New England Journal of Medicine*. 375(9), 830-839.

² Rodger, A. J., Cambiano, V., Bruun, T., Vernazza, P., Collins, S., van Lunzen, J., ..., Lundgren, J. (2016). Sexual activity without condoms and risk of HIV transmission in serodifferent couples when the HIV-positive partner is using suppressive antiretroviral therapy. *The Journal of the American Medical Association*. 316(2), 171-181.

