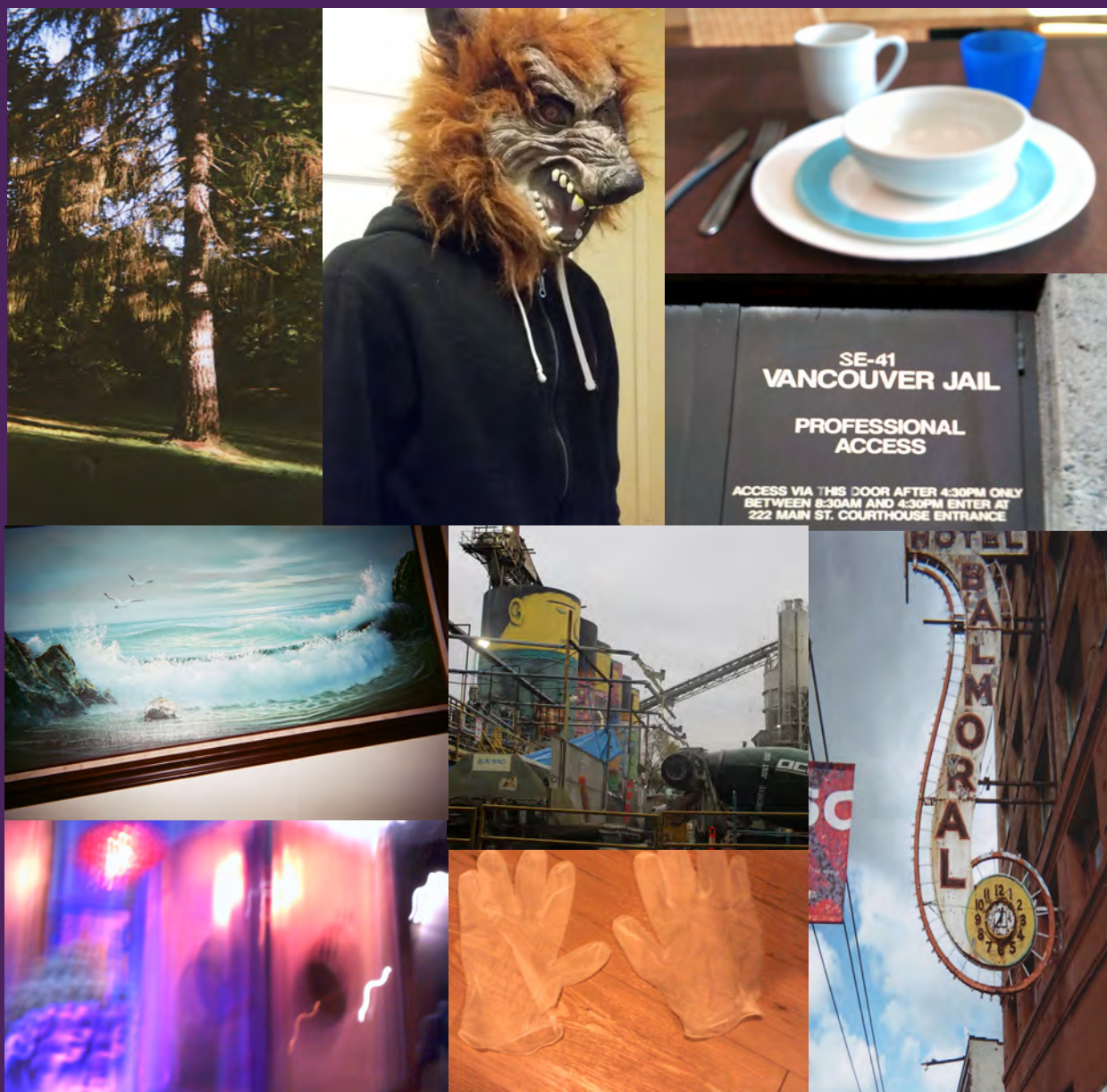


# THROUGH OUR OWN EYES:

## DISCLOSURE, STIGMA AND PAIN





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# Acknowledgements

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This work took place on the unceded Indigenous territories of the Squamish (Sḵw̱wú7mesh), Tsleil-Waututh (Səlílwətał), and Musqueam (xʷməθkwə́yəm) Nations.

We are indebted to the participants of this project who so generously shared their perspectives and stories with us. Their insight is central to the dialogue around HIV, stigma and the law, and we are honoured that they were willing to share their experiences. We would like to thank our community partners Afro-Canadian Positive Network of BC, Canadian Aboriginal AIDS Network, Oak Tree Clinic and YouthCO for their collaboration and support with this project. This work would not have been possible without our amazing peer research team: Flo Ranville, Barb Borden, and Lulu Gurney. Thank you for all your hard work and the laughter and joy along the way. Your insight and support in conceptualizing and carrying out this project are invaluable. Also, a big thank you to the SHAWNA Positive Women's Advisory Board for their guidance with this project over the past two years. We would also like to express our gratitude to Elder Roberta for her support with the Indigenous women's group. Thank you also to Karina Czyzewski who helped with the curriculum development and piloting of this project. Thanks to Patience Magagula, Sarah Chown, Val Nicholson and Judy Mitchell for their support with the recruitment of participants. Also a big thank you to the SHAWNA team, especially Erin Seatter, Sarah Moreheart, Heidi Safford, Patience Chamboko, Kamal Arora, Ariel Sernick and Jenn McDerimnd for their logistical support with organizing the groups and the photo exhibit. This work is supported through the Vancouver Foundation and Canadian Institutes of Health Research.

# ACPNET BC

Afro-Canadian Positive Network of BC

BC WOMEN'S  
HOSPITAL+  
HEALTH CENTRE



BRITISH COLUMBIA  
CENTRE *for* EXCELLENCE  
*in* HIV/AIDS



CIHR IRSC

Canadian Institutes of Health Research / Instituts de recherche en santé du Canada

vansouver  
foundation

# About

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## The Centre for Gender and Sexual Health Equity (CGSHE)

The Centre for Gender and Sexual Health Equity (CGSHE) is a newly established academic research centre hosted by Providence Health Care and affiliated with UBC and SFU. CGSHE has a strategic research mandate to advance gender & sexual health equity among marginalized populations in BC, Canada, and globally ([www.cgshe.ca/](http://www.cgshe.ca/) or [www.gendersexualhealth.ubc.ca](http://www.gendersexualhealth.ubc.ca)). Building on extensive efforts of the BC Centre for Excellence in HIV/AIDS, and long-standing collaborations with BC Women's Hospital, CGSHE is highly committed to research that meaningfully engages with community and drives change in policy and practice to achieve gender & sexual health equity for marginalized communities.

## The SHAWNA Project

SHAWNA (Sexual Health and HIV/AIDS Women's Longitudinal Needs Assessment), led by CGSHE and UBC, is a five-year, community-based research project focused on the social, policy, legal, gender and geographic gaps in cis and trans women's sexual health and HIV care across Metro Vancouver. The project was launched in 2015, and is a collaboration of a diverse group of researchers, community, legal and policy experts, and cis and trans women living with HIV. SHAWNA is committed to ongoing meaningful involvement of cis and trans women living with HIV (MIWA) at every stage of the research process. Our diverse team includes peer research associates, outreach workers, and nurses, who have a range of experiential assets including trans and racialized women, sex workers, and women living with HIV. SHAWNA is guided by two advisory boards, including the Positive Women's Advisory Board of 12-15 cis and trans women living with HIV.

The SHAWNA project and CGSHE operate independently from government authorities, law enforcement, and religious organizations.

# About HIV and the Law

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## Stigma & HIV

While HIV is now a treatable chronic condition and people living with HIV have a nearly unchanged life expectancy after diagnosis, HIV related stigma continues to negatively affect the quality of life of people living with HIV. HIV related stigma is a key barrier to health and wellness and is shaped by many factors such as poverty, colonialism, racialization, gender identity, employment status, housing stability, sex work and illicit substance use. One way that HIV related stigma manifests is through the criminalization of HIV non-disclosure.

## HIV & the Law in Canada

In Canada, people living with HIV can be convicted of serious offenses for not disclosing their HIV status to their sexual partners – even if the virus was not transmitted or the chance of transmission was minimal. According to the law, people living with HIV must disclose their HIV status to a sexual partner, unless a condom is used AND they have a low or undetectable viral load. This is the case, even though each individually prevents against HIV transmission. Importantly, this does not reflect the science behind HIV transmission, and serves to further stigmatize and punish those living with HIV.

There is no evidence that criminalization of HIV non-disclosure is effective in preventing HIV transmission. In fact, HIV criminalization disproportionately affects marginalized people living with HIV and:

- undermines effective public health initiatives, such as HIV testing, counselling and support;
- creates a false sense of security that the law protects people from HIV infection;



- places the burden of HIV prevention solely on people living with HIV; and
- leads to human rights abuses by increasing the stigma and discrimination faced by people living with HIV.

Canada stands out globally in its assertive approach to the criminalization of HIV non-disclosure, and has among the highest number of convictions globally. In Canada, HIV non-disclosure is most commonly prosecuted as sexual assault, which is one of the most severe charges in the Canadian Criminal Code. Based on information compiled by the Canadian HIV/AIDS Legal Network between 1989 and 2016, 184 people faced criminal charges related to HIV non-disclosure in Canada. Of those, 33% were White, 23% Black, 6% Indigenous and 18% were known to have come to Canada as immigrants or refugees. Women make up 10% of all people charged with HIV non-disclosure. To date, 42% of women charged were Indigenous, highlighting the blatant over-criminalization of Indigenous women living with HIV in Canada.

## Positive Developments

Despite this, there has been some positive movement to support those living with HIV in Canada. Last year, the Federal Department of Justice released a national recommendation for HIV prosecutions. They made three key recommendations:

1) not to prosecute any cases where one's HIV viral load has been fully suppressed, 2) not to prosecute any cases where a condom is used and 3) not to prosecute any sexual act that carries no risk of transmission, such as oral sex. While BC has not yet adopted these guidelines, Ontario has applied the first of these recommendations. We are optimistic that they, and other provinces, will continue to move forward prosecutorial guidelines to protect the health, safety and rights of people living with HIV.



## Gendered impacts of HIV non-disclosure among cis and trans women living with HIV

While the criminalization of HIV non-disclosure is often represented as a legal approach that ‘protects’ women, there is growing evidence that highlights the negative effects of this policy on cis and trans women living with HIV, including:

- increased risk of violence from intimate partners;
- a higher likelihood of staying in abusive relationships, or fear of blackmail by vindictive partners, who may use a woman’s serostatus as a form of control by threatening criminal prosecution or involuntary public disclosure of her HIV status;
- reluctance to report sexual violence to police for fear of counter charges;
- fear of child custody loss;
- a reduced likelihood to meet (and be able to prove they have met) the bar for legal non-disclosure due to gendered power imbalances in negotiating condom use.

By creating anxiety and fear, and reinforcing vulnerabilities to violence and abuse, criminalization has a significant negative impact on women’s well-being and HIV related stigma that goes far beyond actual prosecution.

# About Photovoice

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Photo-voice is a participatory qualitative research method that offers participants an opportunity to engage in decision-making to make visible previously hidden or silenced experiences. The goal is to work together to create art and stories that inform public discourse, advocacy efforts and social change.

## The SHAWNA Photo-Voice Project on HIV Stigma, Disclosure & Criminalization

This booklet showcases the art, photography and stories of 26 cis and trans women living with HIV, that were part of a public exhibition in the fall of 2018 in Vancouver, BC. As part of a participatory community-based research project, cis and trans women living with HIV came together to record their lived realities of HIV disclosure, stigma and criminalization through photo-voice. Peer researchers and community leaders guided participants through an arts-based process that included collage, photography and self-reflection. Engaging in a critical dialogue, the participants narrated their artwork, reflecting on their lived experiences of HIV disclosure, stigma and criminalization.

The project took place between 2016 and 2018 and was conceptualized in response to research and advocacy priorities set during a Roundtable event on Criminalization of HIV and Women in BC in the fall of 2015. Overall, five diverse groups of cis and trans women living with HIV participated in a 2-month process (comprised of 5-6 meetings) of group-based (or one-on-one) self-reflection and art. To ensure meaningful and greater involvement of women living with HIV in research (MIWA/GIWA), the curriculum that guided the meetings was developed collaboratively with the SHAWNA peer research team and community partners. It included education around the criminalization of HIV non-disclosure in Canada, and a workshop on photography and the visual expression of ideas and experiences.

All sessions were co-led by peer researchers and community partners and took place in the context of existing support networks of African im/migrant, Indigenous and youth/ young women living with HIV. Given the lack of existing support networks for trans women living with HIV, trans participants worked one-on-one with a peer facilitator over the course of 5 sessions to create and narrate photographs and artwork. Our goal was to create a safe space for women to share their experiences; this included a warm meal and depending on the preferences of the individual groups, an Indigenous Elder opening the sessions through ceremony, or engaging in prayer or grounding exercises before and after sessions. Despite the challenging topic, participants stressed the significance of being able to share their stories, witness each other's pain and provide support to one another. The presence of a peer co-facilitator helped tremendously in opening up, bridging and focusing conversations, and in encouraging participants to share their own stories. All photographs and narratives displayed in this booklet were chosen by the participants themselves.

# J

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YOUTH  
GROUP

That is a picture of me holding my pills. They are very small for the most part, because I have to swallow them, but they hold such a control over your life. If you take them, you're good and you're healthy and you're within the norms of the law, in other words they keep your viral load undetectable and all that. And if you don't take them, then things change, and you get sicker and all this other stuff. So they're small little things but they have a very big impact on a lot of areas of your life.



# Beyonce

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YOUTH  
GROUP

Okay, it's a construction zone, I took it because when you do construction you need a lot of pieces to make one thing. It's like how our meds work—different types of pieces. We need a specialist who knows how to measure the amount, and then we need an artists who [says] 'hey, it's gonna be yellow and we're gonna just stamp it'. So, that's why I chose to take this picture. Cause I take a lot of meds, that are a whole lotta colours and pieces. So with disclosure in this picture, they don't really tell us what they're making when they do construction. We just wait. We wait and see what happens. That's exactly what happens with HIV. You decide when you want to reveal it—so, the outside world can just wait.







# C

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## YOUTH GROUP

I took a picture of the gloves because, when I moved back home HIV positive, my parents kept gloves in the hall closet because they thought that if I got cut they would need to help me with gloves on. It really hurt. They also told me not to get my razor confused with theirs. Many nights I would just sit at Tim Hortons or McDonald's in the bathroom and use [drugs], just very lonely and dealing with a lot of things. I've been discriminated against a lot around bathroom usage and I felt very hurt when I've been asked to bleach the shower after I use it.

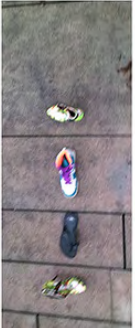


# K

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TRANS  
GROUP

Spelling out the word HIV with shoes. That in itself is a huge message, because the way I look at it, it doesn't matter who we are or what we are, we all walk the same little path. As a non-binary person, I didn't know how else to capture a non-binary individual—the only way I could do it was with shoes. [It's a] twelve-year journey of having to live with a virus that I so much wish I could just get rid of. Becoming HIV positive has been one of those things I regret. Saying that, I also wouldn't be where I am today if it wasn't because of being HIV positive.



# A

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TRANS  
GROUP

I never wanted to come here. I've been fortunate enough to make it out once before and unfortunately I choose to come back. Well the reason I chose to come back was because of the [HIV]—at the time I was dying. And I thought 'well, I'm dying I'm going back to Hastings'. And I ended up coming back here and I didn't die. So now I've been struggling to get back to where I was before. I've made it out of Hastings now, but I am still [there]. [It] isn't just a street, Main and Hastings is still up here [in my head], right? So it's about getting back, getting that outta my head too. Meaning I have to learn how to live outside of Main and Hastings, and what that means is I have to get healthy, mentally, spiritually, and physically.





# Bambi

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TRANS  
GROUP

The scattered arrays of shapes, and colors of red, and flashing neon, relates to stigma and how it is viewed as touchy, there are a lot of boundaries. Red means stop. The murkiness in the photo represents my ideas around the topic [of non-disclosure] being an uncomfortable topic to talk about. Also, there are two doors with a red lamp on top of it. When you're talking about the topic, stigma, decriminalization, and discrimination, it symbolizes that the subject is very mature and it's dealt with in the hands of the law and if it's not handled properly then you will go straight to jail. All the blurriness represents how murky the definition of what exactly the law is, or on what specific grounds you can be criminalized. It's still very uncertain, very up in the air, it's kinda shady.





# Aem

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## INDIGENOUS WOMEN'S GROUP

This is a picture of medication, cause you have to take meds every day. Well, I do, to live longer and be healthier and it keeps the viral load down. Basically, the meds and the condoms are a requirement of the law, I guess. And that is my little life, I guess. It's just straightforward stuff.



# A

---

## INDIGENOUS WOMEN'S GROUP

My residency was listed as a place for people with HIV only. So me living there meant that I had it, regardless. For people, like some of my family members that maybe I had not disclosed to, that caused a very, very, very big controversy in the family. One that I wasn't ready for. So, I was stigmatized for that. Also for entering and leaving these places, I think it caused a lot of problems, you know, being listed as [a building for people living with HIV]. People are going to be labeled and what not, and it should not have to be like that.



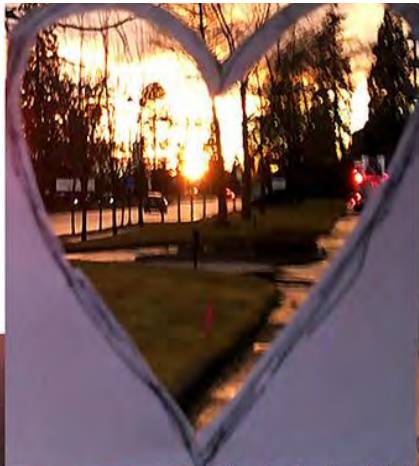


# Ceecee

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## INDIGENOUS WOMEN'S GROUP

My pictures are a combo. The heart-shaped frame represents the hope of the sunlight and capturing the love in there. There are the lights of a fire truck, and that's the emergency—the call of the importance of the issue of HIV criminalization in our daily lives. [...] And it's the story of us. And that's pretty powerful in itself, meaning all us people that deal with what we live with on a daily basis. All our stories need to be told. Then there is a picture of bars—incarceration, the law. This is where we potentially end up, or will end up if we don't adhere to the law. And then the final picture brings us back to the balance of who we are as Indigenous women walking this earth, the path, our traditions that keep us bound together. And what all keeps us together is this little symbol of the HIV.



**THE  
STORY  
OF US**





# Ginew

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## INDIGENOUS WOMEN'S GROUP

My name is Ginew, it means small eagle feather. My photo has the caption of 'open doors', 'open hearts', and 'open minds', which is what I want people to start realizing, that this disease is not going to go away. Well, it might someday but not anytime soon. Hopefully people get educated. Maybe someone in their family has it and they don't know.

rs, Open Hearts, Open Minds

L

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**INDIGENOUS  
WOMEN'S  
GROUP**

This one is about disclosure. I feel that the law is scarier than having HIV. [I have now] learned how to live with HIV. [...] I'm finally coming to grips and peace with my HIV, and I'm learning about the law. I'm still scared of the law though.



# Laura

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## INDIGENOUS WOMEN'S GROUP

Okay, this is a photo of my dishes, part of the stigma against me. When I was at my youngest sister's place, her husband made me use my own dishes. They said I have a sickness so I couldn't use the house dishes; I had to use one set only. And that didn't feel right, but I had nowhere else to live so I had to follow their rules. I had to wash my own dishes and put it by my bed. [...] It made me feel dirty because I don't [know] if they thought that I can pass it on through the dishes, or if it was contagious that way. I guess they didn't understand about it.





# Lolita

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INDIG-  
ENOUS  
WOMEN'S  
GROUP

I took a picture of the door to the jail. And I did that because of the way the law is. If you don't disclose, then that's the first place you're going to go. I've had problems with the police, and them knowing that I'm HIV-positive. [...] Cause I used to use needles, right? So, first thing [they ask], 'do you have any needles'? I haven't used needles in, like, 15 years, right? So you won't find any of that in there. Then they go, 'well what about razors'? Why would I have a razor? You know? They were more concerned on whether or not I have sharp things in my purse and I had blood on it, you know? I mean, that's what their main concern was, you know? But now most of the officers know me and know what I'm doing these days, so they don't bug me as much as they first did when I found out [about my diagnosis].



**SE-41  
VANCOUVER JAIL**

**PROFESSIONAL  
ACCESS**

**ACCESS VIA THIS DOOR AFTER 4:30PM ONLY  
BETWEEN 8:30AM AND 4:30PM ENTER AT  
222 MAIN ST. COURTHOUSE ENTRANCE**

# Yellow Feather Woman

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INDIGENOUS  
WOMEN'S  
GROUP

This is a picture of a carving at the Aboriginal Centre at school. My name is Yellow Feather Woman. I'd like to leave unhappiness here and bring home with me the friendship that I have made here [in this group]. Thank you.



# Judith

---

**AFRICAN-  
IMMIGRANT  
WOMEN'S  
GROUP**

HIV is not by choice or lifestyle—whether you are HIV positive or negative, you poo the same. The poo is one, regardless of colour. Even if you are rich, you eat chicken, rice, vegetables, but we are the same with poor people. The poor people eat vegetable and corn meal, but when you go to the washroom, it smells the same.





# Babsy

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AFRICAN-  
IMMIGRANT  
WOMEN'S  
GROUP

I cover my face, I'm ashamed because of the sickness. I don't buy it. I don't know where it came from, only God knows, so I'm ashamed. [...] You are the enemy. Nobody wants to come near you, only your children will love you.





# Sherry

---

AFRICAN-  
IMMIGRANT  
WOMEN'S  
GROUP

The storm has come as if we are in the water. [...] It is a storm of anger and discrimination—a storm of racism. We are being discriminated, I didn't do any crime. We need to look to Jesus. We need to look at the cross, he has the cross because of our sin, and pray that one day he may come and rescue us. And when he's come to rescue us, we are going to be weighed on the scale. All of us, there's no small sin, no big sin.

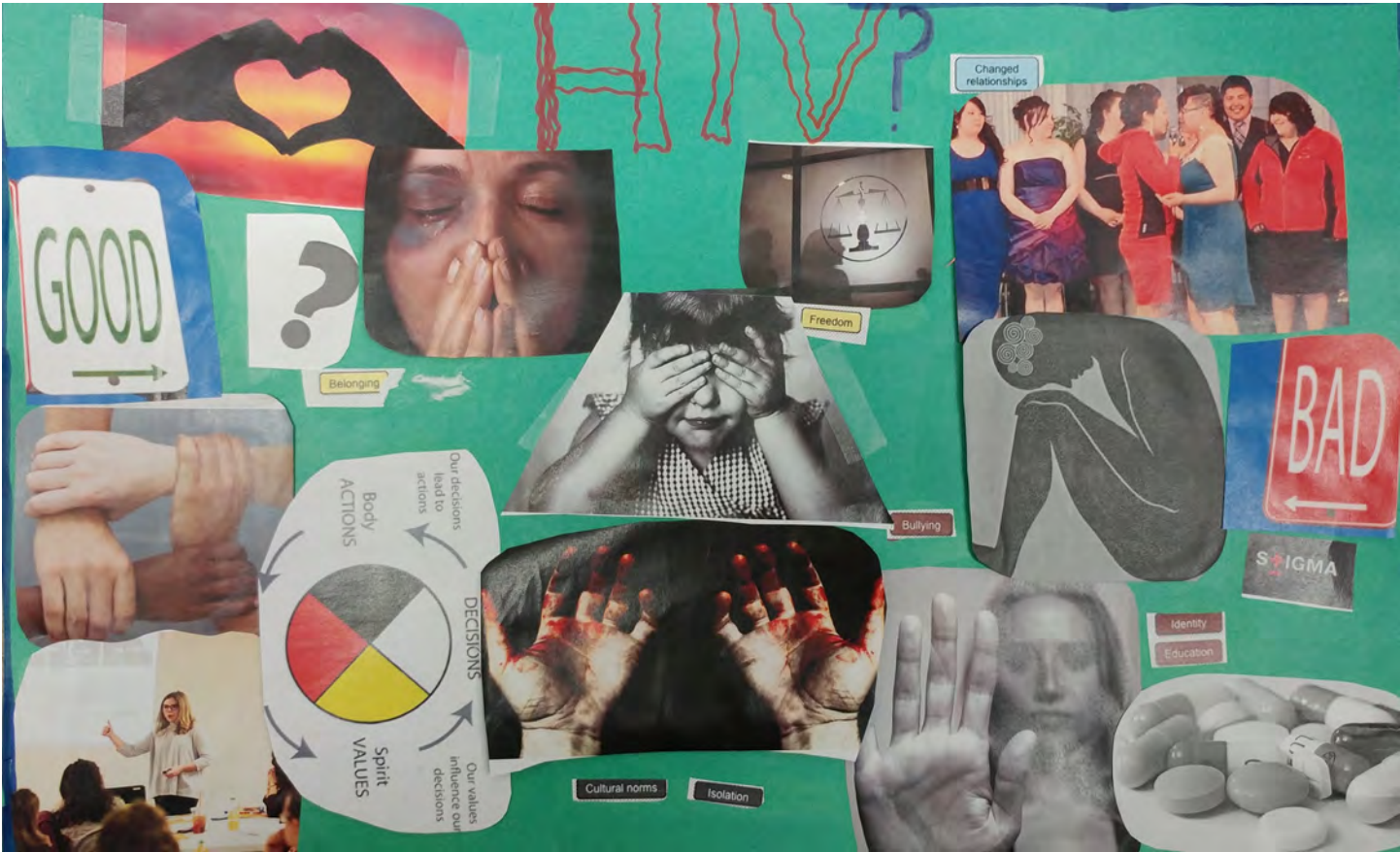


# Teetee

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## AFRICAN- IMMIGRANT WOMEN'S GROUP

Knowing my status completely changed my relationships. I feel like I don't belong and that is stigma. The hand [out straight] means 'I just want to be alone'. And say you decide to be in a relationship, once your partner finds out you are HIV positive they bully you and physically abuse you. For us African [immigrant and refugee] women, we are not so sure of what our rights are. We don't report abuse most times because we are scared. What if we are arrested? Say we have kids, how are they going to survive? So you keep that to yourself. The hands with blood [represent that] you are beaten and bullied. You keep [staying in] that relationship because you are afraid that the person will report you, so women live in fear.





# Betty Boop

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PILOT  
SHAWNA  
GROUP

I was born up North. Unfortunately, I had to leave my community, my family, everything behind when I became positive. My family was being talked about very negatively because of me being positive. To save them from any more stigmatization from the community, I left. I was actually outed in a doctor's office by the receptionist. I was sitting in the waiting room, she came out and said, 'Your tests came back positive'. In the community where I am, it was really bad gossip that flew around. My family became ostracized. As long as I was there, there was talk. And that's why I chose to leave. No doctor would see me [up north]. The doctor that I was seeing actually wore a mask and had the nurse who outed me put gloves on and a mask, just to explain to me that I was positive. I left everybody behind, came to Vancouver. As I said I'm Nisga'a, that's what the eagle symbolizes for me. And also in my photo is a bear and a salmon, and our culture [they are] serving anybody. Everybody is welcome to partake in a meal, and nobody is shunned, and that's what the salmon symbolizes.





# B

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## PILOT SHAWNA GROUP

This picture shows where I lived and hung out, and this is where I met the individual who I believe was responsible for my diagnosis. It's where I lived for too many years. I used to call it the four block trap. [...] I could not seem to get away from that area no matter what I did. And I'd lived in there for quite a while, and I lost so many memories. [...] I did move on from there, but, anyway, that's my story— a very, very little part of it. But I'm happy with my life today. It's been sixteen years [since my diagnosis]. I never thought I would live this long.



This picture is from the fourth floor, [it's] showing how high I was. I really have to be careful when I'm attracted to someone because I don't want to fall for them, I don't want to get hurt. Disclosure was a big part of it. I always make sure that before I fall for someone they know. The way that I disclose to people, it's right up front and that kind of turns people off. I just find that I'm alone because of disclosing my [HIV status] right away, I feel like it's too fast for some people. But I learned to disclose up front because I had fallen for someone before [and it didn't work out]. He was such a sweet guy; we were dating for three months and we would get together every weekend and go on dates. I was waiting for the perfect time to tell him because I didn't want to scare him away. This is the first guy who was like, interested in me and was approaching me and pursuing me. When I did disclose to him, he couldn't do it because he had a daughter, and he didn't want to take that chance. So we walked away from each other.





# Myrna

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PILOT  
SHAWNA  
GROUP

The buttons are self-explanatory. One says 'not myself today', one says 'numb', and one says, 'irritated', irritated at the laws surrounding it. Irritated at the fact that, you know, [...] you can't get into a relationship without fear of going to jail. And it's pretty romantic when you go out for dinner and you throw a paper—a consent form at somebody and saying, 'Before we go any further, please sign this'. I mean, how romantic is that? You know? You want to chase somebody away? That's a good way to do it.





# Ms. Beasley

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PILOT  
SHAWNA  
GROUP

This picture shows a lot for me. It's a picture of a phone, it represents that when I was diagnosed I was told over the phone that I was HIV positive. The doctor told me that the reason that I was told over the phone was because they accused me [of non-disclosure] right from the very beginning. In his second breath, after he told me I was HIV positive, he told me that they knew that I was trying to keep it a secret and that I was lying about it and that they suspected that I knew all along. So, that's the phone thing, it's a big one for me and it really still bothers me today.





# Niki

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PILOT  
SHAWNA  
GROUP

In this photo, the tree's branches are lifeless, hanging in despair as if it has hopelessly surrendered its life to the elements. Some trees can live up to 1000 years, yet in this picture, the life of the tree has been stolen. The threat of criminalization of non-disclosure has stolen my life as I knew it—as I would like it to be. I live in fear and despair and have put walls up around me. There is a constant threat hanging over me if I even dare to experience the things that bring me joy, things that I have a right to, things that others take for granted.







# Gracie

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PILOT  
SHAWNA  
GROUP

The bars, represent jail. And on the other side, there's a big tree—that's me. But half of me is still here. So, for me that would be discrimination. [...] I'm a First Nations woman, and I stand up for myself because we get discriminated against a lot—as a First Nations people and as people living with HIV. Once we're free and standing up for women, like it should be, we turn into butterflies. [They represent] freedom and beauty. To me [these pictures] are about my culture. When I look at my pictures I think about the Prairies, and about pow wows and fancy dancing.



# S

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## PILOT SHAWNA GROUP

I feel like I'm a scary, scary, scary thing. Maybe that's because of the HIV. Because of being rejected so much, so sometimes I just feel like I'm a monster, maybe that's why I get rejected. [A while ago] I met a guy and I didn't tell him that I'm HIV positive, and I told him he's supposed to be using condoms. I was so scared to tell him [that I am living with HIV]. [...]

When I told him he punched me because he said I wanted to kill him. Because of the threats that he was saying, I got so scared that I [would go] to jail. [After] he found out that he's negative, he told me he can't have an HIV positive girlfriend. So he left. [...]

Since then I never had any other relationships and then I finally... I started wanting to have a relationship...





# Kitty

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PILOT  
SHAWNA  
GROUP

This is a picture of Hastings Street with a clock sign. [I chose it] because the time on the sign is the same time it was when I found out I got HIV. The time has never changed, right? So you go to look at that clock—[no matter] how many times you look at that clock, it doesn't work anymore, so it's like the same time almost all the time.





# Participant Reflections

“What I want to leave here is my shame and my guilt. What I wanted to take away is all the love and caring and support I get from the ladies here.”

“A lot of fear but, you know, I’ve dealt with things that I’ve been able to deal with because I’ve faced them. Which, you know, I can [now] put a name to what I was scared of, before it was just an inbred kind of fear of all around stigmatization.”

“What I wanna leave here is fear, and what I’m gonna take from here is all of the stuff that I learned about the law.”

“With this new law, that’s my fear. My fear has always been to be incarcerated.”

“What I wanna leave here is the hurt and pain, and what I wanna take with me is the security I found here. This past couple hours is just — it’s like this magic. Thank you”

“I’d like to leave here some of the pain and sorrow that all of us are going through with this disease. Hopefully there’s a cure someday. And what I would like to take with me is the fellowship, the learning, the laughter, the love. Appreciation. Thank you.”

# Implications

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These powerful images and narratives emphasize the close link between HIV stigma and criminalization, and directly contradict the notion that the criminalization of HIV non-disclosure ‘protects’ women. Participants’ visual and narrative explorations of HIV disclosure, stigma, and criminalization highlight how these experiences are tied to social isolation, shame, abuse, and racialized discourses about HIV, and demonstrate the ways in which these linkages can increase the suffering of some women living with HIV in Vancouver.

Participants’ depictions of ‘hiding’ contrasted the legal imperative to reveal their status to intimate partners. Strong feelings of obligation and responsibility to access treatment, adhere to medication, maintain a low viral load, disclose their HIV status and negotiate condom use were common themes in many stories and photographs. For trans participants, disclosing their gender identity added an additional layer of complexity in negotiating sexual relationships. This sense of responsibility, and the obligation of disclosure, adherence, and constant monitoring of their viral load, weighed heavily on many participants. This was made more challenging by pervasive gender inequalities and limited social and structural supports, including safe housing, privacy, adequate social assistance and access to trauma-informed care. Given widespread stigma, fear of non-consensual HIV disclosure, or unintended HIV disclosure through, for example, accessing HIV specific supports, formed a common theme in participants’ narratives. Some feared that even being seen close to these services could inadvertently reveal their HIV status, and lead to severe consequences, including loss of housing, discrimination directed at their children at school, or family conflict. Cis and trans women living with HIV in Vancouver navigate these dual imperatives – to hide and to reveal – in the context of many daily challenges, as well as significant resilience and strong spiritual and religious beliefs. For many Indigenous participants spirituality and reconnecting with their cultural heritage formed a central source of strength.

Participants' powerful photographs and narratives of the lived realities of HIV disclosure, stigma and criminalization highlight that, rather than criminalizing HIV non-disclosure and further perpetuating HIV-related stigma, laws should focus on the protection of the rights of women living with HIV, promote equality, guarantee sexual and reproductive rights, and ensure access to supports and privacy. We hope that the stories participants so generously shared will further raise awareness of the negative impacts of this law on women living with HIV, and that they will help inform law reform, policy, and prosecutorial guidelines.



# Notes

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# Notes

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