

HIV Facts - Current Science

- HIV transmission can be **PREVENTED** with testing, medication and condom use.
- Saliva, fecal matter, urine and blood outside the body do **NOT** transmit HIV.
- Probability of transmitting HIV from the most “risky” sex act is **LESS** than 2%. This small risk is dramatically reduced with treatment.
- Further, recent studies show that a person on HIV treatment and virally suppressed **CANNOT** transmit HIV sexually (i.e., Undetectable=Untransmittable).
- Life expectancy for a 20 year old with HIV and on treatment is **NOW** 71+ years vs. 32 years in the 1980s.
- People who do **NOT** know their HIV status are significantly more likely to transmit HIV than people who know their HIV status.
- Consistent **USE** of medications by the HIV-negative person to prevent HIV transmission (i.e., PrEP - Pre Exposure Prophylaxis) is a very effective HIV prevention measure.
- Attempts to identify and avoid potential partners who may be HIV-positive is **NOT** endorsed as a method of HIV prevention by the CDC.
- While safe and voluntary disclosure of HIV status **IS** encouraged by public health officials as a best practice, such disclosure is designed to facilitate greater communication and candor about all health risks between sexual partners, **NOT** as a substitute for valid HIV prevention techniques.



How Can I Get Involved?

Learn more!

Visit the Sero Project or the Center for HIV Law and Policy websites for more information about HIV criminalization in the U.S.

www.seroproject.com
www.hivlawandpolicy.org

Join the HIV Modernization Movement
Go to www.hivmodernizationmovement.org to join the listserv and learn how you can help to change Indiana laws!

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[@hmmindiana](https://twitter.com/hmmindiana)

For more information contact:
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The complete Indiana Codes are here:
iga.in.gov/legislative/laws/2019/ic/
Several of these codes also unjustly apply to people living with Tuberculosis and Viral Hepatitis.



Brochure Sources

Centers for Disease Control (CDC)
Center for HIV Law and Policy
Prevention Access Campaign
U.S. Department of Justice
The SERO Project
Lambda Legal

Brochure Current as of 7.5.2019



HIV Modernization Movement
INDIANA

HMM is a diverse group of individuals who seek to modernize Indiana’s HIV public health and criminal laws. Deeply outdated and lacking in scientific merit, these harmful laws lead to unjust prosecutions and stigmatize Hoosiers living with HIV and are counterproductive to ending the Indiana HIV epidemic.

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What is HIV Criminalization?

It is the **inappropriate** criminal prosecution of people living with HIV, including for alleged non-disclosure of their HIV status, potential or perceived HIV exposure or non-intentional HIV transmission. Many cases involve acts that pose **zero** risk of HIV transmission, including spitting, biting, scratching, or sex using proven prevention methods.

HIV criminal laws...

- Do **NOT** work as intended; not a single study has found them to be effective at reducing HIV transmission.
- Work **AGAINST** public health by punishing those who learn their HIV status, creating mistrust of health providers, and working against successful prevention programs like partner notification and public health messages emphasizing shared responsibility for safe sex.
- Do **NOT** align with current HIV science and reinforce inaccurate information about HIV (e.g., incorrectly suggest HIV is easily transmitted or that HIV is a death sentence).
- **INCREASE** stigma and discrimination, thus worsening the existing social stigma of HIV, which experts agree is one of the biggest obstacles to ending the HIV epidemic.
- **LEAD** to unjust prosecutions as they punish behavior that neither caused, nor intended to cause, any harm.
- Are **REJECTED** by the U.S. Department of Justice and numerous leading public health medical, and legal experts.
- Are **COSTLY (\$)** to the state as they subject people with HIV to potential prosecution and incarceration with no public health benefit.

Which Indiana HIV Laws need modernization?

IC 16-41-7 Communicable disease: duty or authority to warn or notify
IC 35-45-21-3 Failure of carriers of HIV or HBV to warn persons at risk

- Requires people who know they have HIV/HBV to disclose their HIV status to people with whom they will engage, or have engaged, in sexual or needle sharing activities that can transmit HIV/HBV. Alleged violations can result in felony convictions.

IC 16-41-12. Communicable Disease: Precautionary measures for use of human tissues and blood products; Regulation of blood centers

IC 16-41-14 Communicable Disease: Testing of semen used in artificial insemination for communicable and sexually transmitted diseases

IC 35-45-21-1 Transferring contaminated body fluids

- These make it a felony for people living with HIV to transfer, donate or sell their blood, plasma, or semen for artificial insemination despite the fact that the FDA screens and protects the blood supply, and semen use, from infectious agents.

IC 35-42-2-1(c2), (f), (h1) Battery by bodily fluid

IC 35-45-16-2(a)-(f) Malicious mischief by bodily fluid

- These make it a heightened felony (sentence enhancement) for people living with HIV, TB and Viral Hepatitis to expose others to any bodily fluid (e.g., blood, spit, tears, urine), including those that do not transmit HIV, in a rude, angry or malicious manner.



IT'S TIME TO MODERNIZE Indiana's Laws that Work Against Public Health

We must ensure that any prosecution based on alleged exposure to a communicable disease, including but not limited to HIV, requires:

- Proof that the defendant (the person charged) **INTENDED** to do harm;
- Proof that the defendant engaged in conduct that is scientifically shown to **RESULT** in that harm;
- Proof that the conduct of the accused in fact **RESULTED** in that **INTENDED** harm;
- Punishment that is **PROPORTIONATE** to the actual harm the defendant caused.

We should avoid using stigmatizing language in the law and our laws should reflect the current science of HIV risk and transmission, and HIV as a chronic manageable condition.