

## Current HIV Science

- HIV transmission can be **PREVENTED** with testing, medication and condom use.
- HIV is **NOT** transmitted through any kind of contact with saliva, urine, and feces; or fluid that can transmit HIV (e.g., blood, semen) outside the body (e.g., placing, throwing).
- There is **NO** risk of HIV transmission through biting and ingesting that involves blood from someone with HIV.
- Probability of transmitting HIV from the most "risky" sex act is **LESS** than 2%. This small risk is **eliminated** with effective HIV treatment.
- A person on HIV treatment and virally suppressed **CANNOT** transmit HIV sexually. This is called: Undetectable=Untransmittable.
- A person with HIV, on treatment, **CAN** live as long as a person who does not have HIV.
- People living with HIV **CAN** donate organs to other people living with HIV.
- The FDA **DESTROYS** all blood that test positive for HIV and ensures blood supply safety.
- Consistent **USE** of medications by the HIV-negative person **prevents** HIV transmission. This is called PrEP - Pre Exposure Prophylaxis.
- People who do **NOT** know their HIV status are more likely to transmit HIV than people who know their HIV status.
- Some people have even been **CURED** of HIV.



## JOIN US!

### Change the Law, End the Stigma

Go to [www.hivmodernizationmovement.org](http://www.hivmodernizationmovement.org) to join the email list and learn how you can help to change Indiana laws!



#### Social Media

Follow HIV Modernization Movement  
[@hmmindiana](https://twitter.com/hmmindiana)

#### The Indiana Legal Codes are here:

[www.hivmodernizationmovement.org/laws](http://www.hivmodernizationmovement.org/laws)

Some codes also unfairly apply to people living with Tuberculosis or Viral Hepatitis.



#### For more information contact:

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#### Donate to HMM-Indiana



Numerous leading public health, medical, and legal experts endorse modernizing HIV-based criminal laws, including the Centers for Disease Control and Prevention (CDC), the American Medical Association (AMA), and the US Department of Justice.

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## HIV Modernization Movement INDIANA


**Mission:** HMM-Indiana seeks to modernize Indiana's HIV criminal and related public health laws.

**Rationale:** Deeply outdated and lacking in scientific merit, these laws lead to unfair prosecutions, stigmatize Hoosiers living with HIV and are counterproductive to ending the Indiana HIV epidemic.

**About Us:** We are a statewide network of Hoosiers living with HIV and allies consisting of service and clinical providers, public health authorities, community leaders, legal experts, and many others.

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 [hivmodernizationmovement.org](http://hivmodernizationmovement.org)

# What is HIV Criminalization?

It is the **inappropriate** arrest or prosecution of people living with HIV 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 or sex using proven prevention methods.

## HIV criminal laws...

1. **DON'T** work as intended; not a single study has found they reduce HIV transmission.
2. **DO** work against public health by creating a disincentive to HIV testing, fostering mistrust of health providers, and working against successful prevention programs like partner notification and public health messages emphasizing shared responsibility for safe sex.
3. **DON'T** align with current science. For example, they incorrectly suggest HIV is easily transmitted, ignores effective HIV prevention methods like an undetectable viral load, or that HIV is a death sentence.
4. **DO** increase stigma and discrimination, thus worsening the existing stigma of HIV, which experts agree is one of the biggest obstacles to ending the HIV epidemic.
5. **DON'T** make sense for our justice system as they punish behavior that neither caused, nor intended to cause, any harm and 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 inform or notify**

**IC 35-45-21-3 Failure of individuals with HIV/HBV to inform persons at risk**



- Requires people who know they have HIV/HBV (Hepatitis B Virus) to disclose their disease status to people with whom they will engage, or have engaged, in sexual or needle sharing activities that, according to the CDC, can transmit HIV/HBV. Violations can result in felonies.



**IC 16-41-14-17 Donation, sale or transfer of HIV infected semen: penalties**

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

- These make it a felony for people living with HIV to donate, sell, or transfer 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(f)(h) Battery by body fluid with HIV/Viral Hepatitis/TB**

**IC 35-45-16-2(d)(f) Malicious mischief by body fluid: HIV/Viral Hepatitis/TB**

- These make it a heightened felony (sentence enhancement) for people living with HIV, TB (Tuberculosis) and Viral Hepatitis to expose others to any body 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 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 transmission, treatment, and HIV as a chronic manageable condition.

*The burden of HIV falls disproportionately on Black people, sexual minorities, and people who inject drugs; researchers report that HIV criminalization also disproportionately impacts these groups, thus exacerbating HIV health inequities, making it more difficult to end the HIV epidemic.*