



Social Justice and Long-Acting Injectables to Treat HIV

HIV care has always intersected with class, race and gender.

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HIV and AIDS are useful lenses to examine health care disparities baked into the American system. It's worth asking who's first in line for novel drug therapies, including antiretroviral therapy (ART). Who has access? Who can afford what? And what are the consequences for those who get left behind?

Perhaps long-acting injectables to treat HIV could be a powerful tool to equalize health care disparities. But could injectable ART also be a tool to equalize America's criminal justice disparities as well?

As POZ reported in an [article](#) titled "Black People Make Up 82% of HIV Crime Cases in Maryland," Black people are only 30% of the state's population. That's what happens when institutional racism collides with institutional homophobia.

The HIV population isn't mostly all gay men. The face of HIV and AIDS has changed. Laws like Maryland's reflect the government's very homophobic approach toward anything LGBTQ-related during the early AIDS crisis. Back then, gay rights, and especially gay sex, were heavily stigmatized. Now, those laws are being used to harm Black people.

And it's not just Maryland, an otherwise progressive state, where laws criminalizing HIV transmission remain on the books. Such laws are on the books all over America. And the Maryland example shows that these laws, a vestige of AIDS hysteria, are disproportionately and overwhelmingly used against people of color.

By criminalizing the sex lives of HIV-positive people, these old laws perpetuate stigma and discourage testing. That leads to less treatment and more transmission. And in Maryland's case, it means more people ensnared in the criminal justice system. That's the opposite of progress.

HIV-positive individuals with an undetectable viral load can't transmit HIV to their sexual partners. If the people living with the virus entangled by Maryland's HIV laws, an overwhelming majority of whom are Black, were on treatment and undetectable, HIV transmission wouldn't be an issue to begin with.

Prioritizing care for this population would ostensibly neuter Maryland's backward laws criminalizing HIV transmission.

And that's why it's a social justice imperative to prioritize people of color when it comes to novel treatments like long-acting injectables to treat HIV.

Laws that criminalize HIV transmission are in effect in roughly 30 states, many of them less hospitable than Maryland for minorities like LGBTQ and Black people. Getting long-acting injectables to those most vulnerable to America's racist and homophobic HIV laws would go a long way to blunting these laws.

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