



Barriers to Undetectable Viral Loads among Marginalized Women Living with HIV in Vancouver, BC

Background

Globally, marginalized women experience high rates of HIV and face barriers in accessing and staying in HIV treatment and services. Despite this, there has been little research on HIV treatment outcomes among marginalized women living with HIV.

The Question

What factors are related to having an undetectable viral load among marginalized women living with HIV and on ART in Vancouver, BC?

The Study

The Gender & Sexual Health Initiative (GSHI) research team drew upon data from interviews with **744 marginalized women in Vancouver, BC between 2010 and 2014**. This project is part of AESHA (An Evaluation of Sex Workers Health Access), an ongoing study on working conditions, health and safety in the sex industry led by GSHI/BCCfE and UBC, in collaboration with a range of community partners, with ongoing outreach to street and indoor sex work venues (by experiential and non-experiential team).

The Results

Of the 72 women included in this study:

- 39% had an undetectable viral load at their baseline interview;
- 85% had an undetectable viral load at least once in the study;
- 18% sustained an undetectable viral load.

While 85% of participants had an undetectable viral load at least once over the four-year study period, very few were able to consistently sustain those levels.

Factors associated with an undetectable viral load:

- Older age;
- Length of time since diagnosis;
- Being single (vs. having an intimate male partner); and
- Stable housing.

The Policy Implications

- There is a need for interventions that address social and structural factors, including access to low-barrier, women-centered, stable housing for marginalized women living with HIV in BC.
- Research supports the effectiveness of community- and peer-led sex work tailored services, delivered near where marginalized women work and live via outreach.
- Criminal laws impeding sex worker-led programs and creating barriers to HIV prevention and access to health care should be removed, in line with a human rights-based approach.

Duff P, Goldenberg S, Deering K, Montaner J, Nguyen P, Dobrer S, Shannon K. Barriers to Viral Suppression Among Female Sex Workers: Role of Structural and Intimate Partner Dynamics. *Journal of AIDS*. 2016. 73(1): 83-90.