



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

Background

Globally, marginalized women are disproportionately impacted by HIV and continue face barriers in access to and retention in HIV services. However, research and data on HIV treatment outcomes among marginalized women living with HIV remains sparse.

The Question

What are the individual, interpersonal, and structural correlates of undetectable viral load (pVL) among marginalized women living with HIV and on ART in Metro Vancouver, BC?

The Study

The Gender & Sexual Health Initiative (GSHI) research team drew upon data collected from interviews with a longitudinal cohort of **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 living with HIV included in this study:

- 39% had an undetectable viral load (pVL) at their baseline interview;
- 84.7% had an undetectable viral load (pVL) at least once during the study period;
- 18.1% sustained an undetectable viral load.

Factors found to be associated with having an undetectable viral load included:

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

While 85% of participants had an undetectable viral load at least once over the four-year study period, very few (18.1%) were able to consistently sustain these levels.

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.
- Innovative approaches to improve ART access, adherence and outcomes for sex workers need to be explored, with special consideration of ethical implications of ART scale-up strategies.
- In line with a human rights-based approach, criminal laws around sex work shown to impede HIV prevention and health care access need to be removed.

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.