Human immunodeficiency virus, or HIV, is a chronic disease that severely compromises the body’s immune system.

While there is no cure for HIV, advances in treatment have significantly reduced death rates over the past few decades, and with regular treatment, people living with HIV can live longer, healthier lives.

Many people worldwide still live with HIV, including in Canada.

Almost all people living with HIV experience some form of stigma.

There are three different aspects of stigma: enacted, anticipated, and internalized.

*Enacted* stigma refers to actual experiences of prejudice and discrimination from others.

*Anticipated* stigma refers to when people living with HIV *expect* to experience prejudice and discrimination.

*Internalized,* or *self* stigmaoccurs when people living with HIV internalize the negative assumptions held by society about themselves.

People living with HIV can experience *any* or *all* of these types of stigma.

Many people living with HIV also face other forms of stigma, including stigmas associated with race, ethnicity, gender, sexuality, substance use, sex work, and mental illness.

These different forms of stigma intersect and add up.

Stigma looks different for everyone. Everyone has their own story.

Anticipated stigma can make people afraid to disclose their HIV status.

When some people find out their partners are HIV positive, they reject them, resulting in enacted stigma, even though with regular treatment, the amount of HIV in a person’s blood can decrease to an undetectable level. And when HIV is *undetectable*, it’s *untransmittable* through sex.

HIV *cannot* be transmitted through saliva, sweat, or tears.

It cannot be transmitted by hugging or kissing, sharing food, or sharing toilets.

Unfortunately, these beliefs persist.

Stigma can make people living with HIV choose not to seek health care or treatment.

Some people living with HIV still face discrimination by health care workers and may even be denied services.

Stigma is associated with mental health and substance use issues, and has a negative impact on overall health.

The good news is, stigma can be overcome.

Social support and resilience can reduce stigma, reduce health risks, and improve overall health for people living with HIV.

Social support can come from many places. We all have a role to play.

The changes we make don’t have to be big.

Just as small interactions can add up to create stigma, little changes we make can help break it down.

We should be mindful of our language and tone.

Lean in, and listen.

It’s important for us to keep the conversation going.

We need to educate others, correct misconceptions, and promote respectful language.

Together, we can work toward eliminating HIV-related stigma once and for all.

What are you going to do?