HIV INFORMED

Language Guide

Why This Matters

The language we use matters. People living with or at risk of HIV can be subject to stigma and discrimination. When talking about HIV, some words and language can imply blame and may reinforce stigmatising attitudes or misinformation about HIV. By using respectful, up-to-date, and person-first language, we can build trust with the people we support and help ensure people living with HIV are not subjected to negative attitudes, stereotypes or discrimination.

We have compiled a handy dos and don'ts guide to help you talk about HIV in ways that challenge stigma and promote respect.

DON'T Say

- **'Suffering from HIV' / 'Victim' / 'Sick' / 'Contaminated'**
  These terms suggest helplessness or disease and can be deeply stigmatising.
- **'An HIV positive' / 'HIVer' / 'Carrier' / 'AIDS patient'**
  Reduces someone to their diagnosis. This language is outdated and dehumanising.
- **'Caught HIV' / 'Infected with HIV' / 'Spread HIV'**
  These phrases imply blame or carelessness. They also increase stigma.
- **'Clean' (e.g. "Are you clean?")**
  Implies that someone living with HIV is "dirty." This is harmful and completely inappropriate.
- **'Eradicating HIV'**
  This implies we are trying to eradicate people living with HIV. Suggested language ending new HIV transmissions.
- **'AIDS' / 'Full-blown AIDS' / 'AIDS virus'**
  AIDS is not a virus or a singular disease. It refers to a collection of conditions that occur if HIV is left untreated over time. Most people today never reach this stage thanks to modern medication. Instead, use: advanced HIV.
- **'Patient' (outside clinical settings)**
  Implies someone is unwell or being treated. People living with HIV are often healthy and well — unless relevant to care, avoid calling someone a "patient."
- **'Disclose/disclosure of HIV status'**
  Implies that there are secretive connotations around sharing HIV status and may reinforce self-stigma and shame. Instead, use: Tell, talk about, or share.
- **'How did you get HIV?'**
  You don't need to know how someone acquired HIV; it's not relevant to their care.

DO Say

- **'Person/people living with HIV'**
  Puts the person first, not the virus.
  A respectful and empowering way to describe someone's status.

- **'Person/people with an undetectable viral load' or 'person/people with a virally suppressed viral load'**
  Reflects the success of HIV treatment. There is no risk of passing HIV on when a person has a virally suppressed viral load. Again, it is important to put the person first.

- **'A person's HIV status'**
  Neutral, respectful, and non-judgemental language. Avoids assumptions or loaded terms.

- **'HIV is manageable with treatment'**
  Accurate and reassuring. Reflects today's reality that people with HIV can live long, healthy lives.

- **'Diagnosed with HIV' / 'Acquired HIV'**
  These are accurate, neutral ways to talk about how someone learns of their status or how HIV is passed on.

- **'Advanced HIV' / 'Late-stage HIV'**
  Replaces outdated and misunderstood terms like "AIDS." Advanced HIV refers to cases where the immune system is severely weakened due to untreated HIV.

Specific body fluids: blood, semen, vaginal fluids, rectal fluids, breast milk, amniotic fluid, pre-ejaculate.
Use specific terms instead of "bodily fluids," which can be vague or misleading.

Additional Advice

- Don’t make assumptions based on appearance, age, sexuality, or gender — anyone can be living with HIV.
- Always use inclusive, non-judgemental language.
- Show understanding, and gently challenge people who use incorrect language.
  People don’t always get things right, but we can use situations such as these to educate others.

Your words carry weight. Speak with care.
Always keep this language guide handy.