Being & Belonging began as an open call soliciting video proposals that highlighted under-told stories of HIV and AIDS. A jury of artists and curators—Ezra Benus, Jorge Bordello, Lauraberth Lima, and nico wheadon—reviewed these proposals with the aim of bringing together voices that have historically been excluded from narratives about the AIDS crisis. The result is a program of seven short videos that stand apart from representations of HIV in popular culture.

This year marks the first time since we began commissioning videos in 2014 that the entire program is created from the perspective of artists living with HIV. Residing in five countries across the globe, this year’s artists represent a younger generation who were mostly diagnosed with HIV after the introduction of antiretroviral treatment in 1996—a turning point in the epidemic that drastically improved the life chances of people living with HIV. Their videos are decidedly focused on the present moment, expressing a range of contemporary issues and experiences that stand in contrast to narratives of tragedy, loss, or unprecedented heroism that are often placed on the first decades of the AIDS crisis.

Several videos in Being & Belonging reference the phrase “Undetectable = Untransmittable (U=U),” which reflects the fact that successful antiretroviral treatment reduces the amount of HIV in a person’s body to a point where they cannot transmit the virus. This simple truth has been a powerful tool for HIV advocates to defuse fear of contagion. Jaewon Kim and Clifford Prince King each offer poetic reflections on building intimate relationships while living with HIV, establishing vital new narratives for the era of U=U.

Though antiretroviral treatment is highly effective, proper healthcare remains out of reach for many people living with HIV around the world. All of the countries represented in the program—except for the US—provide universal healthcare, yet patent laws and profit-driven pharmaceutical companies make HIV medications incredibly expensive, leading some governments to compromise on the level of care they provide people living with HIV and other “high-cost patients.” In the program we hear from Camilo Acosta Huntetexas and Santiago Lemus, who experience jaundice as a side effect of the low-cost medication provided by the Colombian government, and from Jhoel Zempoalteca and La Jerry, who consider the complex intersections of colonialism and access to medicine in Mexico.
Being & Belonging highlights a number of perspectives that are often only represented in the HIV response through statistics, if at all. Camila Arce gives voice to a generation of young people born with HIV in Argentina who are confronting the systemic neglect that has killed many of their peers. Davina “Dee” Conner, working with Karin Hayes, assembles a collage of testimonies from Black women living with HIV in the US, reflecting on the medical mistrust, blatant discrimination, and invisibility they face. And Mikiki provocatively reframes the conversation around injection drug use to prioritize pleasure and connection over blame and punishment.

The intimate, first-person accounts that compose Being & Belonging give us depth and insight into stories that are often overlooked, illustrating the perseverance and artistry of people living with HIV who endeavor to create a sense of belonging. Throughout the seven videos, we see the artists and their communities establishing autonomy for themselves at micro and macro levels: in personal relationships, in opposition to government structures, or even in contrast to mainstream HIV/AIDS narratives.

Being & Belonging offers new images, stories, and sensations, aiming to disrupt expectations about what it means to live with HIV and how those experiences are represented. As you watch the videos, we encourage you to consider: Where does your knowledge of HIV come from, and how much of it is from the perspective of people living with HIV in the present moment? What new possibilities arise when we make space for the nuances of lived experience and embrace the emotional realities of people living with HIV today?
Through poetry and a cascade of surreal landscapes and abstracted bodies, *Los Amarillos* visualizes the side effects that some people living with HIV in Colombia face due to low-cost antiretroviral drugs. Among the many side effects of these drugs, jaundice (yellowing of the skin) is so common for HIV+ people in Colombia that it can act as a visible marker of HIV status, exposing people living with the virus to stigma and ostracization.

Working against this stigma, artists Santiago Lemus and Camilo Acosta Huntertexas hyperbolize the yellowed skin of jaundice through a set of performative gestures. As packets of antiretroviral pills are gradually consumed, we see the artists' skin tones progress from their natural hues to a deeply saturated yellow. The names of the medications responsible for this side effect—Efavirenz, Atazanavir, and Ritonavir—flash across the screen in bold text. Over the course of the film, Lemus and Acosta's bodies are abstracted through close ups and contrasted against bright yellow landscapes, flora and fauna, and common household objects. These visual allusions generate a sense of unease and alienation, further amplified when the pair enters into public space.

The video concludes with the duo staging a performance where they use a deep-red antiretroviral pill, Darunavir, painting their skin while “dreaming of a stirring revolution.” Lemus and Acosta Huntertexas utilize the power of their own bodies as a call to action to change the landscape of antiretrovirals so that accessible treatment doesn’t require painful and stigmatizing side effects.
In the early AIDS crisis, purple lesions (Kaposi’s sarcoma) and facial wasting were common physical identifiers of HIV, similar to the jaundice symptoms seen in the video. What happens when illnesses or disabilities become visible? Discuss the differences between invisible and outwardly visible illnesses or disabilities. What are the consequences of labeling health through physical characteristics?

Los Amarillos explores the artists’ complicated relationship to the HIV medicine that sustains their lives, one that is shaped by Colombia’s healthcare system. Think about your own relationship to medicine—through COVID or monkeypox vaccines, HIV medication, PrEP, birth control, antidepressants, or other treatments. What processes or hurdles have you had to go through to obtain medication? How has your relationship to medicine changed the way that you understand yourself and connect with others?

Unlike the US, Colombia has a nationalized healthcare system that provides free medicine for all citizens. While there are over 40 medications for HIV treatment, the Colombian government only purchases certain HIV medications in bulk, limited by the high prices set by drug companies. The result is that people living with HIV are given a one-size-fits-all treatment, and are sometimes even prescribed ineffective medications. Read more about the history of treatment access in Colombia here.

Read more about color and HIV medication in this article about artists Oliver Husain and Kerstin Schroedinger.

Related Visual AIDS videos: Jorge Bordello, Ministry of Health, Beto Pérez, In the Future, Mykki Blanco, STONES & WATER WEIGHT

Santiago Lemus (he/him) uses organic matter, image, and sound to address the relationship between art, nature, and landscape. He is co-founder of Tomamos la Palabra.

@santiagolemuss santiagolemus.com

Camilo Acosta Huntetxas (he/him) is a visual artist with a focus on experimental video. He is a co-founder of the House of Tupamaras and a member of the performance collective Street Jizz.

@hunteasvideo huntetxas.tumblr.com
Camila Arce has been living with HIV since she was born in 1994, part of the first generation of verticales—people born with HIV—with access to HIV treatment in Argentina. (Verticales comes from the term ‘vertical transmission’ which is when HIV is passed from mother to child.) Memoria Vertical centers Arce’s poetry and activism, transmitting a range of raw emotions: resilience, rage, grief, connection, exhaustion, and persistence.

The video begins with some stark statistics: 5% of children born to women living with HIV in Argentina are born positive. The country has not developed specific policies to care for children with HIV or to prevent mother-to-child transmission, and does not provide access to special HIV medication for children. We then hear an audio clip of a well-regarded pediatrician, Dr. Abel Albino, speaking to the Argentine Senate in 2018, where he falsely claimed that HIV can pass through condoms.

Against this background of misinformation and systemic failure, Arce’s voice conveys her journey to reclaim her life from the narrative of suffering and death that has been imposed on her. The video shows how this has been a personal journey, but also one shared in community and through protest, gathering, and activism. In an interview, Arce reflected that as her generation of verticales becomes young adults, “it is the first time that we can speak in our own voice, because it is no longer our parents or our caregivers who speak for us.”
QUESTIONS

In Argentina, some people born with HIV refer to themselves as verticales. There is no equivalent noun in English. Reflect on what it means to have language for a shared experience. Are there words or names that have changed the way that you understand yourself and your life experience?

In the video, Arce says “I was presumed dead before I was born… My revenge is to be alive.” What kind of messages did you receive about your future when you were growing up? How have you shaped your own future since then?

In Memoria Vertical, we see young people claiming agency and taking action to change their life conditions. How do you see young people making change in your community? How could our society better support the visions of young people?

RESOURCES

In response to the efforts of Argentine AIDS activists, a new set of laws were passed this summer ensuring the civil rights of people living with HIV, enacting specific protections for women and children, and proposing the national production of HIV medication.

When proper care is provided to mothers living with HIV, mother to child transmission reduces to essentially 0%. To learn more about pregnancy and HIV in the 21st century, check out Understanding U=U for Women Living with HIV, a community brief written by Jessica Whitbread and L’Orangelis Thomas.

Check out the work of these organizations led by young people living with HIV in Latin America: Jóvenes Positivxs (@jovenesposlac), RAJAP in Argentina (@rajaporg), CEVVIH in Chile (@cevvih), and Positivxs CR in Costa Rica (@positivxscr).

Related Visual AIDS videos: Kia LaBeija, Goodnight, Kia, Lucía Egaña Rojas, Female Disappearance Syndrome, J Triangular and the Women’s Video Support Project, 滴水希望 (Hope Drops)

Camila Arce (she/her) is an artivista from Rosario, Argentina who has been living with HIV since she was born 27 years ago. @sidiosa
“I don’t live with HIV—on some levels, HIV lives with me. And I’m going to give it a hell of a ride.” This is a quote from Deirdre Johnson, one of seven Black women featured in Here We Are. The humor and sense of triumph in Johnson’s words express a hard-won sense of empowerment conveyed throughout the film as the women share their stories. Johnson’s words are accompanied by interviews with Evany Turk, Stacy Jennings-Senghor, Acintia Wright, Alecia Tramel-McIntyre, Tamera Garret, and director Davina “Dee” Conner. (To learn more about the women in the video, head to HereWeAreVoices.com)

Through a collage of voices, viewers are invited to listen as these women speak about their diagnoses and the role that stigma plays in their lives, especially as it relates to medical mistrust and their experience as Black women mothers. At the same time, Conner and Hayes are mindful to highlight how these women have come to thrive in their lives. Here We Are ends with the women dancing and glowing in their all white outfits, grooving and moving in their own ways, together.

This video builds upon co-director Conner’s experience of living long term with HIV, and her long running multiplatform show, Pozitively Dee’s Discussion Podcast. Conner’s skills as an interviewer shine as the women clearly feel comfortable and welcome to share their stories. In content and form Here We Are celebrates the power of community, and what happens when Black women living with HIV come together in all their experiences and power.
Several speakers in the video share how they do not often see themselves as Black women represented in public conversations around HIV. In the AIDS-related media you have seen, who is discussed and who tends to be left out? If you are someone living with HIV, do you feel represented? What impact can representation have on your physical, emotional, and spiritual health? If you are not living with HIV how does representation shape your beliefs about who is living with HIV and what their life is like?

Medical mistrust plays a crucial role in the lives of the women on screen. In thinking about your own relationship to healthcare and other systems of care, what do you need in order to feel safe, heard, and able to talk about your health with a provider?

The International Community of Women Living with HIV has been building a network of positive women since 1991. In the US, organizations like the Well Project, Sister Love, and Christie’s Place work to create community for women living with HIV.

In Here We Are, reproductive health and HIV are often spoken about in tandem. For Black women, both issues are connected via a long history of medical racism. Learn more about medical racism by watching this online conversation with Abdul-Aliy A. Muhammad, Ericka Hart, Lauraberth Lima, and Blake Paskal from 2020.

In the US, Black women have long been at the forefront of the reproductive justice movement. Learn more about the intersection of race and reproductive health through resources collected by Race & Medicine and this 2019 profile of the activist organization SisterSong.

Related Visual AIDS videos: Cheryl Dunye & Ellen Spiro, DiAna’s Hair Ego REMIX, Iman Shervington, I’m Still Me

Davina “Dee” Conner (she/her) is an HIV educator international speaker, and podcast host who has been living with HIV since 1997.

Karin Hayes (she/her) is an award-winning documentary director and producer.
In *Nuance*, Jaewon Kim expresses the emotional landscape of a romantic relationship through an unfolding collection of 42 photographs. The images accumulate meaning in relation to the narrator’s words and the video’s soundtrack, piecing together an abstract picture of the nuances of this relationship.

The initial warmth and connection gives way to a sense of anxiety and conflict, as the narrator worries about the “gap” between himself and his partner, and distinctions like positive/negative and safety/danger. Toward the end of the video, the music picks up and the narrator begins to come to terms with the differences between him and his partner. “Now, I no longer need to be confused with ‘positive’ and ‘negative’, and the boundary between ‘safety’ and ‘danger’ is becoming blurred.”

Though *Nuance*’s experimental form leaves much open to interpretation, Kim describes the video as metaphorically revealing the concept of U=U (undetectable = untransmittable), which refers to the fact that the virus cannot be transmitted by someone living with HIV if they are on treatment and have an undetectable viral load. *Nuance* goes beyond the mere scientific reality of U=U to explore the psychological nature of a serodiscordant relationship—a relationship between two people with different HIV statuses—and how, even in spite of reliable medication, pervasive stigma still has the potential to disrupt connection.
In *Nuance*, Kim very precisely controls what is visible and what is not. The bodies of the two characters are almost entirely absent from the video. Discuss how you think Kim is using absence and opacity as an aesthetic strategy. What do these choices allow the video to do that more straightforward forms of representation and visibility might not?

Experimental video often creates meaning or conveys emotion through form (light, sound, and other aesthetic choices). It can be challenging to take it all in at once. We invite you to re-watch *Nuance* at video.VisualAIDS.org. What do you notice when you watch it again? Did you find new relationships between the visuals, sound, and dialogue?

While we sometimes think of conflict and tension with a partner as a bad sign, it can also be a necessary part of communication and intimacy. Perhaps the relationship in the video is stronger because the serodiscordant relationship necessitated more communication. Have there been moments in your own relationships where differences in identity have prompted you to work through conflict to build a deeper connection?

**RESOURCES**

Too often we see serodiscordant relationships or encounters depicted from the perspective of HIV-negative people. For another narrative from the perspective of a person living with HIV, check out the 2016 film *Paris 05:59: Théo & Hugo*.

In a recent essay in *Frieze* magazine, Liz Kim connects Jaewon Kim’s work to the Minjung (‘people’s art’) movement of the 1980s. Read the article here.


Jaewon Kim (he/him) is currently based in Seoul, South Korea. He uses video, photography, and installation to discuss the lives of queer people and people living with HIV.
Mikiki describes *Red Flags* as an attempt to create a more neutral depiction of sexualized injection drug use among gay men, also known as slamming within the chemsex or “party and play” scene. Normally framed through the narrow lens of abuse and immorality, injection drug use is rarely seen from the perspective of users themselves, and even less often do these narratives center on pleasure and belonging.

Mikiki interviewed numerous friends from the slamming scene to create *Red Flags*, but due to the intense stigma surrounding injection drug use only two participants were comfortable with their voice being used unaltered. Those interviewees, James and Ali, reflect on the tendency to punish people for their drug use rather than understanding why people use drugs. James invites us to consider what it would mean if we gave people the tools to be “good addicts.” He explains: “The more risk means the more respect. It doesn’t mean don’t do it. It means do it with a sense of knowing and understanding... There’s a skill set.”

Though not explicitly addressed in the video, the stigma surrounding chemsex is often linked to HIV. While studies have identified chemsex as a risk factor for HIV, this association often reinforces stigmatizing ideas about HIV as the consequence of “bad choices” or immoral behavior. Speaking about *Red Flags*, Mikiki reflected: “I think we still see drug use as a choice that bad people make or a bad choice that good people make. And what I’m trying to do is to propose that maybe there are some other options for how we think about it. Maybe there’s other options for how we live as people who use drugs.”
In the video, Ali reflects on how people who grew up in environments where drug use was common “didn’t really get a choice whether or not [they] knew about drugs.” Class, geography, race, and many other factors shape the way that we come to know about and relate to drugs. Reflect on the direct and indirect messages you received about drugs as you were growing up. Consider the different messages around risk, responsibility, and danger that you received for different types of drugs: meth, opioids, weed, alcohol, caffeine, etc. What accounts for these differences?

The video begins with abstract visuals and a descent down a staircase, opening up into a cacophonous, glitchy landscape of limbs, members, and sounds that evokes the sensory overload that can come with a high. Towards the end of the video, the soundtrack calms and fades along with the visuals. Discuss the formal choices that you noticed in the video and how they might relate to the content of the video.

People who use drugs have long been at the forefront of AIDS activism. From developing needle exchange programs and safe consumption sites, communities of drug users have popularized harm reduction models and a collective mindfulness around how the logics of public health and criminalization intersect with risk, personal autonomy, and pleasure. Learn more in the zine that Visual AIDS and What Would an HIV Doula Do? created for MoMA PS1 last year: Harm Reduction is not a Metaphor.

For more critical cultural production about drug use and chemsex, check out the Mephisto Texts published by Love Lazers and The Infernal Grove.


QUESTIONS

RESOURCES

Mikiki (they/them) is a performance and video artist and queer community health activist of Acadian/Mi’kmaq and Irish descent from Ktaqmkuk/Newfoundland, Canada.

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Structured through a series of traditional Mexican dances, *Lxs dxs bichudas* critiques the concept of *mestizaje*, a colonial ideology that emphasizes the illusion of racial unity—a nation of mestizos, or mixed-race people, descended from the mixing of Spanish and Indigenous people—to the point of obscuring the racial hierarchies that continue to oppress Black and Indigenous people in Mexico.

The video references several traditional dances, including the dance of the Huehues, a satirical dance that mocks Spanish colonizers. Performing the dance in an HIV clinic with pill bottle maracas and white masks, the artists extend the mockery to criticize HIV stigma.

In the video, the artists reflect on their own positions within the project of *mestizaje*. At the end of the first dance, La Jerry removes their mask, signifying a break from whiteness. Zempoalteca, who is lighter skinned than La Jerry, remains masked until the final act of the video. In a key scene, he reckons with his whiteness as his words intertwine with his mother’s, who speaks in an indigenous Zapotec language: “the colonist’s tongue and face are now mine? … A mask that, when worn, makes us accomplices of extermination.” Upon removing his mask, Zempoalteca joins La Jerry for a final dance as they “harvest” pill bottles from the earth and join in solidarity against a government that fails to provide medication to people living with HIV. Rather than dissolve their differences into a colorblind *mestizaje*, the artists seek to build a new model of affinity that acknowledges their divergent relationships to whiteness.
The video begins with a public mural painted by Desiderio Hernandez Xochitiotzin depicting Spanish conquistadors invading Mexico in 1519 and a voiceover explaining how the conquistadors developed power by dividing and selectively integrating elements of Indigenous culture into their society. How might the experiences of people living with HIV in Mexico and Latin America today be structured by the divisions created by colonialism?

Throughout the video the artists play with gender norms. Historically, the dance of the Huehues is performed by men, while other parts of their choreography relates to a tradition from the city of Juchitán that celebrates the pride of women. Through their costumes and language, Zempoalteca and La Jerry further complicate traditional gender roles and expectations. How does their gender transgression relate to their critique of colonialism?

While there isn’t much research about the impact of HIV in Indigenous communities in Mexico, we do know that Indigenous people are disproportionately impacted by the epidemic. Language barriers are a significant part of the problem—there are many Indigenous languages spoken in Mexico but health services and prevention information is often only available in Spanish. Read more on The Body.

Since 2018, people living with HIV in Mexico have faced shortages of medication due to government bureaucracy and issues with distribution outside of urban centers. Learn more through these news articles.

Related Visual AIDS videos: Beto Pérez, In the Future, Jorge Bordello, Ministry of Health, Cristóbal Guerra, Nobleza(s) de Sangre

Jhoel Zempoalteca (he/him) is a visual artist and educator born in Tlaxcala, Mexico. @jhoelze

La Jerry (they/them) is a non-binary folk dancer born and raised in Juchitán, Mexico. @__lajerry
At the heart of Clifford Prince King’s *Kiss of Life* is a wish—a wish for relationships filled with care, reciprocity, and understanding. The film centers the stories of several queer Black men living with HIV who express their own hurdles with dating, disclosure, and self-love. From former lovers, to mothers, to strangers on dating apps, the subjects of the film reflect on the way HIV has shaped their relationships. We hear from Michael Barren Withrow, an elder who acknowledges the stark difference between dating in a world where undetectable = untransmittable and a former world where the fear of transmission loomed over sex and dating. D’Angelo Lovell Williams shares their experiences with disclosure on dating apps and coming out to family members. They emphasize the importance of people living with HIV to control their own narratives.

Interlaced between the interviews are poetic readings and sublime images of nature. For King, there was an impetus to supply beautified imagery within narratives of HIV. *Kiss of Life* serves as a rebuttal of narrow representations of Black, queer men living with HIV. It posits that joy and self-acceptance are possible in spite of pervasive stigma. As Withrow claims in the film, “There’s others. That’s all there is to it. There’s others, there’s other people that will accept you.”

The film ends with a poem read by King while showering, followed by a cover of Sade’s *Kiss of Life* while King and a lover run down a wooded, dirt road. These final moments, along with the title, suggest a rebirth, a cleansing, and a return to one’s self made possible by love and community.
How can beauty help people see HIV more fully? What role has beauty played in your understanding of HIV?

Typically, when HIV is discussed in regards to relationships the conversation is centered on romantic relationships. *Kiss of Life* expands beyond this singular dynamic to express how HIV impacts familial relationships, or how new friendships/community can be forged while living with HIV. What possibilities do you think can arise when we continue to consider the impact of HIV solely beyond romantic and sexual relationships?

The film constructs a kind of intergenerational dialogue between Michael and D’Angelo. Do Michael and D’Angelo share the same perspective on living with HIV? Discuss how the AIDS epidemic has changed over the last forty years and the differences that exist between younger and older generations of people living with HIV.

Looking for more beauty? Check out the photographs of Clifford Prince King (@cliffordprinceking) and D’Angelo Lovell Williams (@dangelolovellwilliams).

Two of King’s inspirations for *Kiss of Life* were Maya Angelou’s poem *Recovery* and Marlon Riggs’s iconic 1989 film *Tongues Untied* (available to stream on Kanopy).

Related Visual AIDS videos: Derrick Woods-Morrow, *Much handled things are always soft*, The SPOT (Safe Place Over Time), Lyle Ashton-Harris, *Selections from the Ektachrome Archive*

*Clifford Prince King (he/him) is an artist living and working in New York and Los Angeles. King documents his intimate relationships in traditional, everyday settings that speak on his experiences as a queer Black man.*

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GLOSSARY

**CHEMSEX** or **PARTY AND PLAY** (PnP) refers to using drugs as part of your sex life. Chemsex can refer to a number of drugs including methamphetamine (also known as crystal meth, tina, or T), GHB, cocaine, ketamine, and MDMA. Read more here.

**HARM REDUCTION** refers to strategies that aim to reduce the harms associated with activities deemed by the culture to be dangerous, such sex and taking drugs. The contemporary concept of harm reduction emerged in the early 1980s when healthcare workers started to provide clean syringes to people who inject drugs rather than insisting on abstinence. Other examples of harm reduction include condoms, PrEP, and seat belts. Read more here.

**HIV CRIMINALIZATION** refers to laws that punish perceived or potential HIV exposure and alleged nondisclosure of HIV status prior to sexual contact (including acts such as biting or spitting that cannot transmit HIV). HIV criminalization has resulted in sentences up to thirty years and sometimes requires sex offender registration, often in instances where no HIV transmission occurred or was even likely or possible. Read more here.

**HUMAN IMMUNODEFICIENCY VIRUS** (HIV) is a virus that attacks the body’s immune system, reducing the number of CD4 cells (T cells), making people more vulnerable to other infections or cancers. If not treated, HIV can lead to AIDS (acquired immunodeficiency syndrome). People are diagnosed with AIDS when their CD4 cell count drops below 200 cells/mm or if they develop certain types of illnesses. Read more here.

**INTERSECTIONALITY** is a term developed by Kimberlé Crenshaw who describes it as “a lens through which you can see where power comes from and collides, where it interlocks and intersects. It’s not simply that there’s a race problem here, a gender problem here, and a class or LGBTQ problem there. Many times that framework erases what happens to people who are subject to all of these things.” Read more here.
JAUNDICE is a symptom where the skin or the whites of the eyes become yellowish. Jaundice can be caused by a variety of viruses and medical conditions including as a side effect of medications. In English, the word can also connote bitterness, resentment, or envy. Read more here.

PRE-EXPOSURE PROPHYLAXIS (PREP) is a daily medicine for HIV-negative people to lower their chances of getting HIV. To learn more about PrEP, including where you can find it in your area, visit: PrEPLocator.org.

POST-EXPOSURE PROPHYLAXIS (PEP) is an antiretroviral medicine that greatly reduces chances of transmission if taken within 72 hours of exposure. PEP should be available in all emergency rooms. Read more here.

SERODISCORDANT describes a mixed-status relationship, when one partner is living with HIV and the other is HIV negative. Read more here.

STIGMA is a mark of shame or prejudice. People living with HIV experience stigma in many ways, including in their intimate relationships. When something like HIV is stigmatized, it can distort factual information and trigger certain behaviors and attitudes, such as:
• Thinking that people deserve to get HIV because of their choices
• Refusing to provide care or services to a person living with HIV
• Socially isolating a member of a community because they are HIV positive
Read more here.

UNDETECTABLE refers to how regularly taking HIV medication can lower the amount of HIV in your blood (aka your viral load) to an undetectable level. People who are undetectable cannot transmit the virus to others. This doesn’t mean you no longer have HIV—it means that by continuing your plan of treatment, you can live with HIV by managing your health on your own terms. Read more here.

VERTICAL TRANSMISSION or PERINATAL TRANSMISSION is when HIV is passed from a mother to child during pregnancy, childbirth, or breastfeeding. When proper care is provided to mothers living with HIV, mother to child transmission reduces to essentially 0%. Read more here.
DAY WITH(OUT) ART

In 1989, Visual AIDS presented the first Day Without Art, organizing museums nationwide to cover up their artwork, darken their galleries, or even close their doors as part of a day of action and mourning against the AIDS crisis. Since 2014, Visual AIDS has commissioned artists and filmmakers to create new short videos responding to the ongoing crisis. Each year we work with over 120 art organizations to premiere a new video program on December 1, Day With(out) Art / World AIDS Day. The 40+ videos that we have commissioned are available to view at video.VisualAIDS.org.

VISUAL AIDS

Founded in 1988, Visual AIDS is the only contemporary arts organization fully committed to using art to fight AIDS, while assisting artists living with HIV and preserving the legacy and artistic contributions of those lost to AIDS.