

SCIENCE, RIGHTS, AND HIV ON TRIAL:

Is rising HIV criminalisation part of a global anti-science / anti-rights resurgence?

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BACKGROUND

Despite contemporary HIV prevention and treatment, criminal laws continue to be used against people living with HIV in ways that disregard scientific evidence and undermine public health and human rights.

Many prosecutions continue to involve acts posing negligible or no possibility of HIV transmission. This occurs within a wider global context marked by attacks on scientific expertise, shrinking civic space, and anti-rights political movements.

METHODS

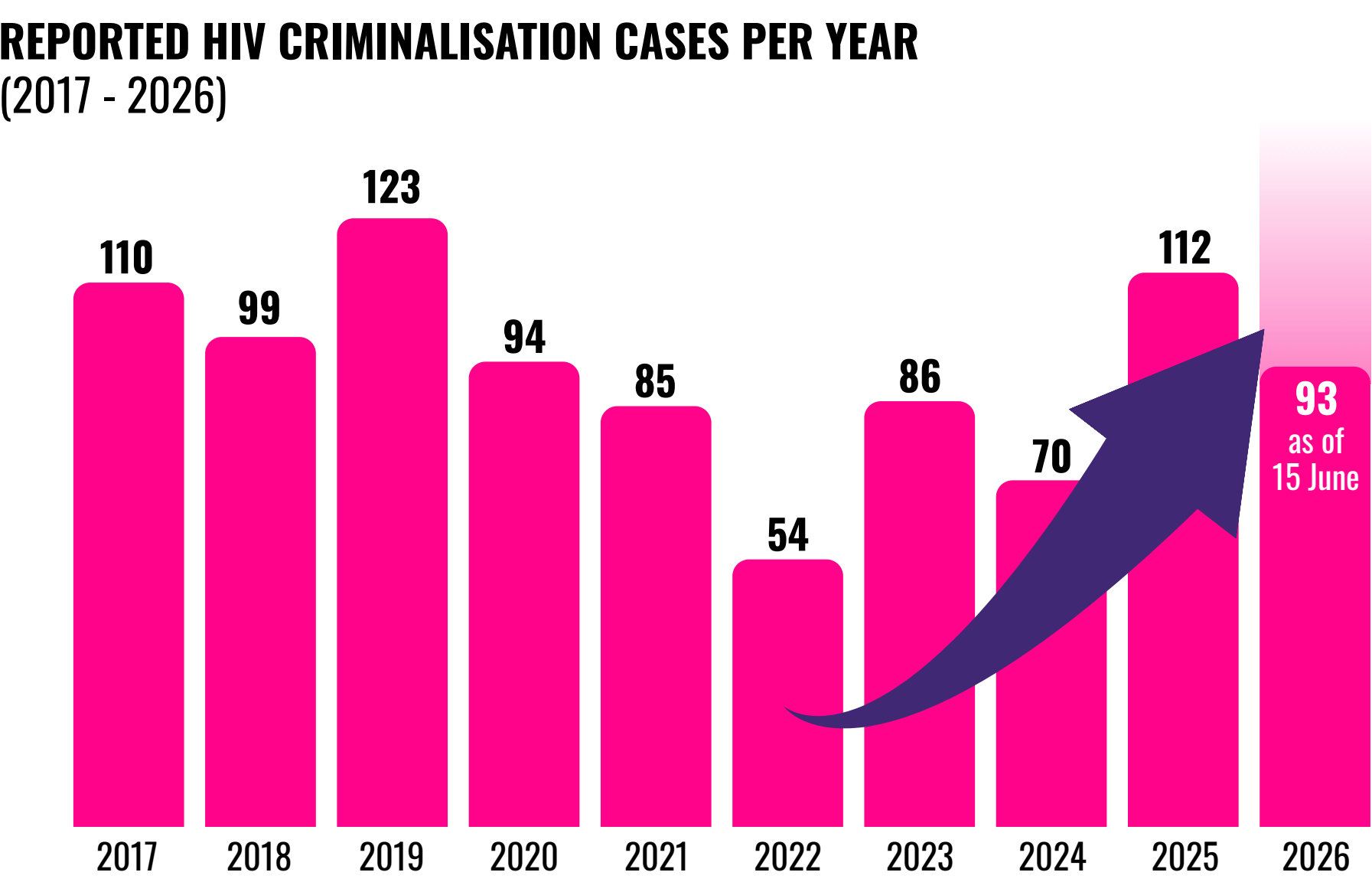
This analysis examines 115 entries covering 150 case reports documented in the HIV Justice Network’s *Global HIV Criminalisation Database* between 1 June 2025 and 15 June 2026. Improved monitoring and access to court records have enhanced case detection in some settings, particularly in Uzbekistan.



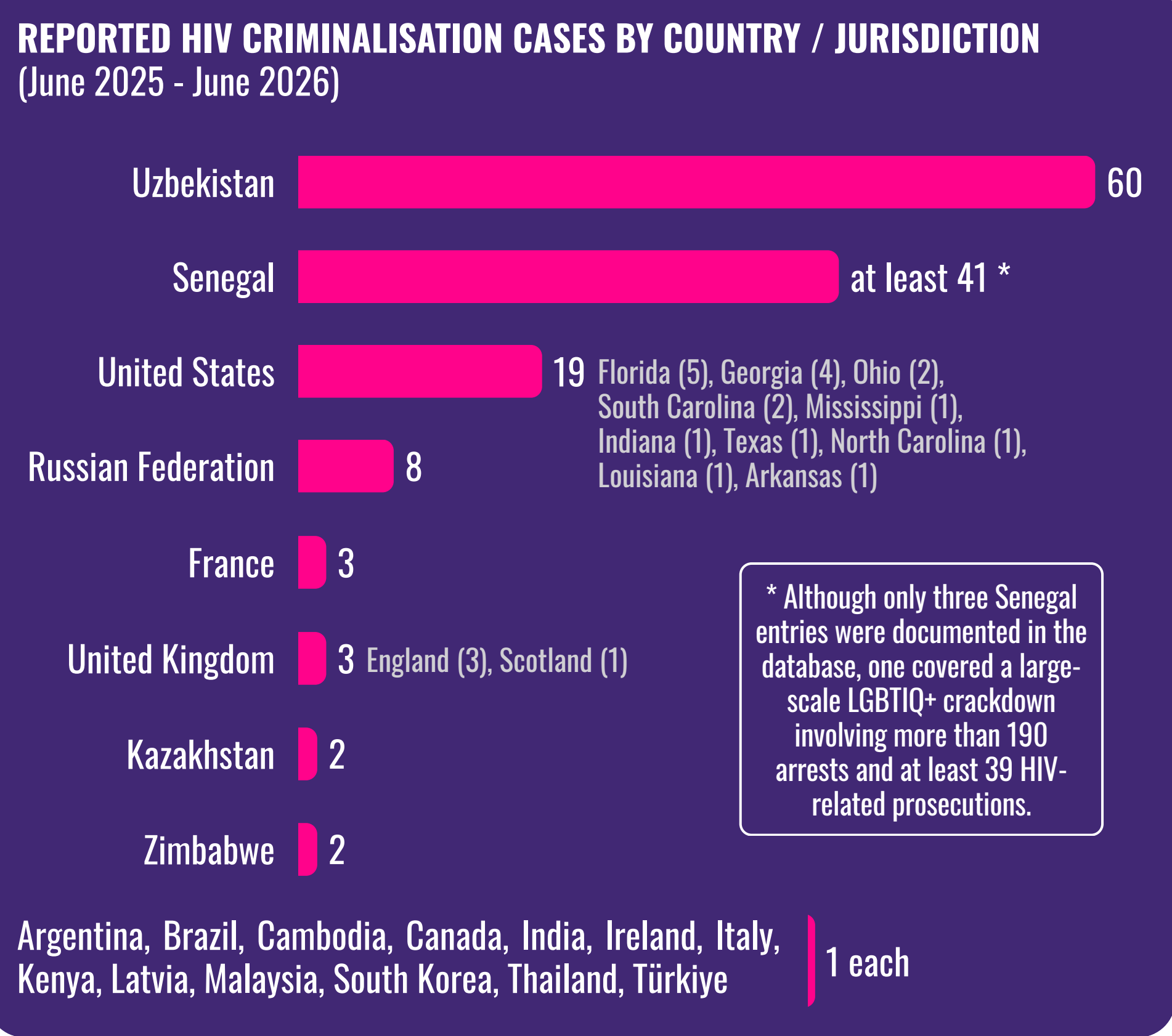
RESULTS

GLOBAL TRENDS

Our global monitoring data indicate a renewed upward trend in reported HIV criminalisation cases since 2022, following a marked decline between 2019 and 2022. Ninety-three cases documented by mid-2026 already exceed annual totals reported in both 2023 and 2024.



The data indicate continuing and uneven enforcement of HIV criminalisation laws across 31 jurisdictions in 21 countries, demonstrating their enduring reach and malleability, with particularly high levels of enforcement documented in **Eastern Europe** and **Central Asia**, parts of **Africa**, and the **United States**.



Uzbekistan accounted for 40 % of all reported cases during the review period. Cases frequently involved prosecutions for alleged ‘exposure’ resulting in ‘restriction of liberty’ sentences, including in intimate relationships, cases with no evidence of transmission, and prosecutions of women despite partner awareness or evidence of effective treatment.

Senegal saw a sharp escalation in arrests linked to anti-LGBTIQ+ policing, including forced HIV testing, public disclosure of HIV status, and multiple HIV-related prosecutions brought alongside charges based on same-sex conduct. Possession of condoms was frequently cited as evidence of criminal conduct.

Cases from **multiple jurisdictions** also demonstrate the continued displacement of HIV criminalisation from HIV-specific criminal statutes towards the use of *general* criminal laws, including assault, sexual offences, public health, and child protection provisions, suggesting that legal reform alone may be insufficient.

Taken together, these cases illustrate how HIV criminalisation can operate in ways that disregard contemporary HIV science, privacy, informed consent, and individual autonomy, while also revealing increasing convergence between HIV criminalisation and wider anti-rights political movements seeking to regulate sexuality, reinforce traditional social norms, and challenge scientific and human rights standards.

SCIENCE ON TRIAL

Across multiple jurisdictions, courts, prosecutors, and police continued to pursue cases inconsistent with, or failing to fully engage with, contemporary HIV science.

Those cases are based on acts for which the *Expert Consensus Statement on the Science of HIV in the Context of Criminal Law*¹ recognises no or negligible possibility of HIV transmission.

Prosecutions involving **spitting** persisted, including cases in North America and Europe.

Prosecutions involving people with **undetectable viral loads** also continued. Courts often failed to even consider viral load evidence, relying instead on assumptions about infectiousness rather than case-specific assessments of transmission possibility, intent, or harm.

WHEN SCIENCE SAYS “NO POSSIBILITY”, COURTS SAY “CRIME”

Scientific evidence ¹	Criminal legal framing
Undetectable viral load: no possibility	Allegations of ‘exposure’ or ‘transmission’
HIV treatment can dramatically reduce or eliminate the possibility of transmission	Presumption of infectiousness and criminal liability based primarily on knowledge of status
Condoms are an effective HIV prevention method	Possession of condoms treated as evidence of ‘criminal conduct’
Spitting: no possibility	Assault with a ‘deadly weapon’ / reckless conduct / endangerment charges

RIGHTS ON TRIAL

The documented cases demonstrate that HIV criminalisation disproportionately affects populations already experiencing stigma, discrimination, criminalisation, or structural inequality.

Courts, prosecutors, and media frequently portrayed people living with HIV as dangerous, reckless, deceptive, or threats to public safety, reinforcing stigma and legitimising intrusive state control.

HIV-related prosecutions were part of a broader crackdown targeting **LGBTIQ+ people** in Senegal. In several jurisdictions, **women** faced prosecution despite evidence of partner awareness, coercive circumstances, or negligible possibility of transmission. Cases involving **migrants** highlight intersections between HIV criminalisation, immigration enforcement, detention, and deportation. **Sex workers** and **economically marginalised communities** also faced heightened vulnerability to policing, surveillance, and public exposure.

These patterns suggest that HIV criminalisation frequently functions not simply as a public health measure, but as a mechanism reinforcing broader systems of social control, exclusion, and inequality.

WHAT WORKS?

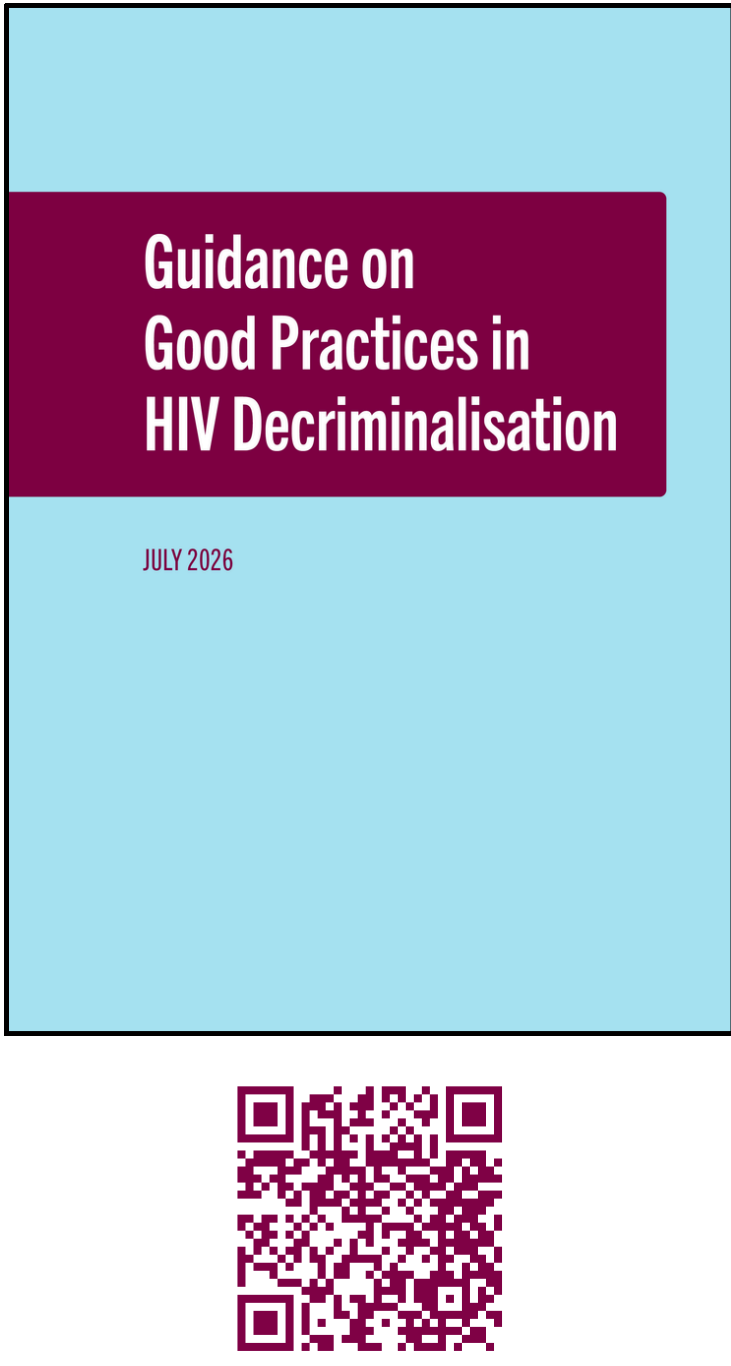
The documented cases also highlight legal and policy approaches associated with reduced enforcement, greater scientific accuracy, and fairer outcomes.

Positive developments included acquittals, successful legal challenges, and increasing judicial engagement with contemporary HIV science in Canada, France, Italy, Türkiye, and the United States.

Many of these approaches are reflected in the new *Guidance on Good Practices in HIV Decriminalisation*, developed by the HIV Justice Network with support from UNAIDS.

Emerging good practices include:

- recognising contemporary HIV science in legal proceedings;
- limiting prosecutorial discretion and overcharging;
- requiring proof of actual intent and significant harm;
- prohibiting criminalisation related to pregnancy, infant feeding, or vertical transmission;
- strengthening community-led monitoring, legal support, and accountability mechanisms.



CONCLUSIONS

Taken together, these findings suggest that science, rights, and HIV are increasingly being put ‘on trial’ in legal and political contexts:

- Many HIV criminalisation cases continue to diverge from contemporary HIV science, despite encouraging examples of science-informed decision-making.
- Enforcement disproportionately impacts already criminalised and marginalised communities.
- General criminal laws increasingly sustain HIV criminalisation even where HIV-specific laws have been repealed or modernised.
- Recent case reports, interpreted within a decade of global monitoring, suggest that HIV criminalisation increasingly operates within broader political environments hostile to science, human rights, gender equality, and community-led public health responses.
- Law reform and guidance alone may not reduce prosecutions where legal systems remain shaped by narratives portraying people living with HIV as dangerous, immoral, deceptive, or threats to public order.
- The new *Guidance on Good Practices in HIV Decriminalisation* provides an evidence-informed framework for aligning criminal law with science, human rights, and public health principles, but sustainable change also requires challenging the stigma, social norms, and political narratives that legitimise punitive responses to HIV.

When scientific evidence establishes that there is no possibility of HIV transmission, continued criminalisation reflects not a failure of science, but a failure to apply it.

¹ Barré-Sinoussi et al., *Expert consensus statement on the science of HIV in the context of criminal law*, Journal of the International AIDS Society, 2018

EXPERT CONSENSUS STATEMENT
ON THE SCIENCE OF HIV
IN THE CONTEXT OF CRIMINAL LAW

Further information on the Expert Consensus Statement at www.hivjustice.net/eec