Redefining Support for Mothers Who Have HIV

North American experts weigh in on the role of breast feeding in the lives of mothers with well-controlled HIV.

May 17, 2021 By Heather Boerner

For years, U.S. infant feeding guidelines shied away from even discussing breast feeding with women living with HIV, largely due to fear of mother-to-child transmission. But a new consensus statement from experts in the United States and Canada calls for open conversations about undetectable viral load and a reframing of what it means to support women living with HIV.

Having an undetectable viral load prevents sexual transmission of HIV—the principle behind Undetectable Equals Untransmittable, or U=U—and it is expected to prevent transmission via breast feeding as well, but this has not been well studied.

In addition to arguing that clinicians should provide birthing parents who have HIV all the data on the risks and benefits of breast feeding, the statement recommends that clinicians "recognize, account for and advocate to change" policies that impact HIV-positive women who might want to breast-feed, such as systemic racism, economic disparities and misogyny. The statement also recommends that clinicians uphold HIV-positive women's bodily autonomy along the entire sexual and reproductive health continuum and life span and calls for more education for clinicians, resources to help women with HIV understand all their options and more research on breast feeding and HIV.

"Insistence on a 'zero-transmission-risk' choice concerning breast feeding is also at odds with the autonomy of parents living with HIV and their fundamental right to make informed choices about their children's care without judgment or interference from providers or government," write the authors of the statement.

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