



Truths About HIV and Women

Learn some basic realities about HIV – treatment, tests, transmission, and more – and help disrupt common myths about this health condition.

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The truth about HIV is that it is a health condition. There are drugs widely available to treat it, and these drugs are also part of preventing transmission to others.

Most people living with HIV worldwide acquired it through sexual contact or injecting drugs. These activities often carry a stigma in society and can come with pre-existing unfair judgments. HIV also unduly affects communities whose members experience stigma because of who they are – for instance, Black and brown people, people living in poverty, people of transgender experience (gender identity does not align with sex assigned at birth), and more. Stigma is an attitude or belief held about a person or group that discredits or shames them. Part of shaming them is telling stories about them that are not true.

These reasons, along with the fact that there was so little information and so much fear surrounding HIV in its earliest days, may contribute to why so many myths about HIV persist to this day. Thanks to decades of research, there is now plenty of accurate, true information about HIV. Conversely, a myth is a story or an idea that is not true.

When dealing with HIV, it is important to be able to tell truth from myth. Believing myths can result in fear, denial, and even damage to your health.

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Truths About HIV and its Treatment

The Truth: HIV is the virus that leads to AIDS.

HIV (the human immunodeficiency virus) is a virus that occurs in nature. AIDS is the most advanced stage of HIV. Because so little was known about AIDS in the epidemic's earliest days, ideas spread about where it came from that were later proven untrue (such as that AIDS was caused by party drugs, mosquito bites, government conspiracies, the drugs used to treat HIV, or anything else but the virus).

If you have an AIDS diagnosis, you have HIV. If you do not have HIV, you cannot progress to AIDS. Today we have several decades of solid, scientific proof supporting these facts.

The Truth: a long, full life with HIV.

In the 1980s and early '90s, before effective HIV medications had been developed, millions of people diagnosed with HIV and AIDS died. Thankfully, when people living with HIV have access to the many effective HIV drugs we now have, as well as resources to take good care of other aspects of their health, they can expect to live as long a life as a similar person who is not living with HIV. That life can include a career, relationships, great sex, and children (if they like!). This is why it is so crucial for everyone worldwide who needs HIV treatment and care to be able to get it – and why threats to HIV treatment access can be so devastating.

The Truth: HIV does not have a cure.

Although a few people appear to have been cured of HIV under special experimental circumstances, there is currently no available cure for HIV. There is significant global advocacy to find a cure, and research worldwide exploring different strategies to achieve different types of cure. You can learn more about this in our fact sheets on [Finding a Cure for HIV](#) and [HIV Cure Cases and Cure-Related Research Strategies](#).

The Truth: HIV drugs are powerful – and good at keeping people healthy.

HIV drugs do not cure HIV, but they can help keep people healthy for many years. Like all approved drugs, HIV drugs are tested to make sure they are safe and effective. They may also cause some effects that are different from what they were developed to do. These are called side effects. In most cases, the side effects of current HIV drugs are mild.

Older HIV drugs available prior to the availability of combination therapy (several HIV drugs taken together to increase their effectiveness) were known for having serious, often unbearable side effects. Nowadays, cases of severe side effects are extremely rare. Newer HIV medications have very few side effects and are easier to take.

The Truth: Taking HIV drugs as they are prescribed is how people stay healthier for longer.

Some people are tempted to stop taking their HIV drugs for a short time because they feel well, are experiencing problems from [side effects](#), or want to take a break from being reminded every day that they are living with HIV. However, studies have shown that interrupting your treatment or taking a “drug holiday” carries with it some concerns. Stopping your HIV drugs can:

- give the virus a chance to multiply and cause your [viral load](#) to rise
- give the virus a chance to develop [resistance](#) to your HIV drugs so that they no longer work
- cause your [CD4 cell count](#) to drop and your [immune system](#) to weaken

Several studies have shown that continuing to take your HIV drugs as directed is the way to stay healthy the longest. If you are having trouble taking HIV drugs as prescribed (known as [adherence](#)), talk with your healthcare provider.

Truths About HIV Testing and Transmission

The Truth: HIV tests are reliable. You can trust the results.

An HIV test measures HIV antigens (viral protein particles) and HIV antibodies, which are special proteins the body produces in response to a particular health condition. If you have HIV, your immune system will make antibodies against HIV. The combined HIV antigen-antibody tests (also called 4th generation tests) can correctly detect HIV 99 to 100 percent of the time. Nevertheless, if the result of this test comes back positive, the US Centers for Disease Control and Prevention (CDC) recommends that it be confirmed by a second test. This second test can not only confirm the first test, but also tell which type of HIV a person has — either HIV-1 or HIV-2.

Rapid HIV tests are convenient, because they give results in about 20 minutes. However, even though false positives are very rare, a positive result from a rapid test is considered preliminary and should be confirmed by another HIV test. For more information on what HIV test is right for your situation, see our fact sheet on [HIV testing](#).

The Truth: People living with HIV look just like people who are not living with HIV.

Often, people living with HIV do not look or feel sick. Many times, they do not even know that they have the virus. Taking an HIV test is the only way to know if you are living with HIV. It is impossible to know whether another person is living with HIV – unless they choose to [disclose](#) to you that they are living with HIV.

The Truth: Anyone who comes into contact with HIV may acquire HIV.

Women and girls represent more than half of all people living with HIV across the globe. In the US, women account for approximately one in four people living with HIV and one in five new HIV acquisitions. Most women acquire HIV through heterosexual (“straight”) sex. In many countries, a code of silence about sexual relations combined with social acceptance of men’s sexual activity

outside of marriage has resulted in many women acquiring HIV who were having sex only with their husbands.

For a long time (and even nowadays in some areas), HIV was believed by society to exclusively affect gay men. Stigma against being gay and having (or being vulnerable to) HIV fueled one another, and fanned the flames of public hatred and fear of these overlapping communities. They also fueled the idea that heterosexual people were “safe” from HIV.

The reality is that any person who has sex without [treatment-as-prevention](#) methods or barrier methods like [condoms](#), or shares used [needles or injection equipment](#) with someone (while taking drugs, hormones, diabetes treatment, or any injectable substance) has the possibility of acquiring HIV.

If your partner is living with HIV and is unaware of their status and not taking HIV drugs, is having sex outside the relationship, or is sexually faithful but injecting drugs and sharing needles or drug equipment, you may be vulnerable to HIV.

The Truth: There are only a few specific ways people may come in contact with HIV.

HIV is only [transmitted](#) between people through fluids – blood, semen (pre-cum and cum), vaginal or anal fluids, and breast milk – that contain HIV. The most common ways for HIV to be transmitted are through having unprotected sexual contact and/or sharing drug equipment with a person living with HIV who is not on effective HIV treatment. HIV can also be transmitted to a baby perinatally (during pregnancy, birth, or breastfeeding) if the birthing parent is not taking HIV drugs.

Tears, sweat, mosquitoes, pools, sharing dishes or silverware, spitting on someone, and other forms of casual contact cannot possibly transmit HIV. Period.

The Truth: There are tools available to help people stay HIV-negative.

Research has shown that using condoms is one of the most effective ways of preventing the transmission of HIV and [other sexually transmitted infections \(STIs\)](#). Sex with condoms can be fun! It can decrease your worry about getting or transmitting STIs or HIV, and about [getting pregnant](#), which can in turn make your sex life more relaxed and pleasurable.

If you cannot or prefer not to [use condoms](#), you may want to consider taking [PrEP](#) (pre-exposure prophylaxis). This means taking HIV drugs while you are HIV-negative to reduce the chances that you will acquire HIV if you are exposed to it.

It is also important to know that when a person living with HIV is taking HIV drugs and their viral load has reached undetectable levels, that person cannot transmit HIV to a partner who is HIV-negative. Undetectable means there is not enough HIV in their bloodstream for a test to measure (as in, a test for the amount of virus in their body – not an HIV test, which measures HIV antibodies and/or antigens, as we learned above).

See our fact sheet on [Undetectable Equals Untransmittable](#) for more information on this exciting prevention approach; see our fact sheet on [Understanding Lab Tests](#) for more about viral load testing.

The Truth: People acquire HIV in ways other than sex.

If you have had no sexual contact at all, you have no chance of acquiring HIV from sex. However, if you have shared [needles or drug equipment](#), you are vulnerable to HIV. If you have had anal sex but consider yourself a “virgin” because you have not had vaginal sex, you can still potentially acquire HIV. Anal sex is considered an activity with a high chance of HIV transmission.

While oral sex is generally considered an activity with a low likelihood of HIV transmission, it may be more likely under certain circumstances (e.g., if you or your partner has bleeding gums). Although it is much less common for cisgender (gender identity aligns with sex assigned at birth) women and other people with vaginas to transmit HIV to one another during sex, there are still some reports of lesbians who have acquired HIV through rougher sex or sharing sex toys with a cis woman living with HIV. Also, many women who consider themselves lesbians have had sex with men and have acquired HIV that way. Lesbians who use drugs and share drug injection equipment can get HIV from a needle or syringe that has been used by someone who is living with HIV.

To learn more about the risks of different sexual activities, see our fact sheets on [Oral Sex: Facts, Pleasure, and Health](#) and [Safer Sex](#).

Truths About HIV and Overall Health

The Truth: Older adults have sex!

Age does not protect you from acquiring HIV. In fact, people over the age of 50 are acquiring HIV at an increasing rate. UNAIDS estimates that 4.2 million older adults (age 50 and over) are living with HIV worldwide. Unfortunately, older adults are frequently ignored in discussions about HIV prevention and care and so do not know that they may be vulnerable to HIV. For more information, see our fact sheet on [Older Women, Sex, and HIV](#), as well as materials from our [Women Like Us: Aging Positively](#) program.

The Truth: People living with HIV can give birth – and breast/chestfeed – babies who remain HIV-negative.

With proper healthcare and HIV drugs, people living with HIV can have healthy pregnancies. Advances in HIV treatment have dramatically lowered the chances that a birthing parent will pass HIV on to their baby. Research has proven that if the birthing parent takes HIV drugs as prescribed and is virally suppressed (very little HIV in their blood), the chances of transmitting HIV to the baby during pregnancy, birth, and/or breast/chestfeeding can be less than one in 100. For more information, see our fact sheets on [Getting Pregnant and HIV](#); [Pregnancy, Birth, and HIV](#); and [Overview of Infant Feeding Options for Parents Living with HIV](#).

The Truth: Keeping healthy is (in part) about bodies and organs.

[Women across the gender spectrum](#) have a range of body parts that need care. Most cisgender women have a uterus, for example, while most [transgender women](#) have a prostate. To safeguard your health, it is important to get screened based on your anatomy, regardless of gender identity or presentation. For example, gynecologic (GYN) care means screening for and treating health

issues affecting the sexual and reproductive organs mainly of people with a vagina, cervix, uterus, and/or ovaries, which can include people who identify as transmasculine.

For all people of trans experience, whether or not they have a uterus, it is a good idea to consult with a trusted provider or peer about inclusive, respectful, and knowledgeable care for your sexual and reproductive health.

The Truth: HIV is an STI – and there are other STIs that also matter.

People living with HIV cannot transmit HIV to sexual partners when they are taking HIV medications and have an undetectable viral load. That said, it is still important to take steps to prevent [other STIs](#). This includes during sex among partners who are all living with HIV.

For those who are HIV-negative, multiple STI exposures or untreated STIs contribute to and increase the vulnerability to HIV.

Many STIs have no symptoms but can still be passed from person to person. A lot of people who have an STI do not even know it. The only way to know for sure is to get [tested](#) - to have regular sexual health screenings by your healthcare provider.

Fortunately, you can reduce your chances of getting many STIs by practicing [safer sex](#). Most STIs, though not all, can be successfully cured through treatment. For other STIs, there are effective medications that can help you manage your condition.

The Truth: Pleasure is a right!

All women living with HIV across the gender spectrum deserve to have full, satisfying sexual lives. The ability to have [pleasurable, safe sexual experiences](#) if you so choose has been declared to be a central part of health and wellbeing by many institutions around the world, including the World Health Organization. Not only does it feel good; experiencing sexual pleasure is good for you both emotionally and physically and can lead to lower stress, better sleep, increased levels of "the love hormone" oxytocin, and more! For more information, [download a printable PDF of our pamphlet "Get the Facts: Sexual Pleasure and HIV"](#).

Get the Facts!

Myths about HIV are very harmful. They can make you afraid of something that is not dangerous. And they can make it seem as if something is not dangerous when it really is!

It is important to learn the truth and get the facts right. Sometimes seemingly well-informed or well-meaning people give out false information. Continue to browse The Well Project's resources for accurate, evidence-based, regularly updated information about HIV. If you have a specific question about HIV, talk to your healthcare provider or contact your local HIV organization.

More Resources from The Well Project

Fact Sheets and Resource Collections

- [Women and HIV](#)
- [Did You Just Test HIV-Positive?](#)
- [HIV Transmission](#)
- [Getting Pregnant and HIV](#)
- [Can I Breastfeed While Living With HIV?](#)
- [SHE/HER/THEY](#)
- [Transgender Women: HIV Prevention as a Priority](#)
- [Dating and HIV](#)
- [Serodifferent Partners: Dating, Relationships, and Mixed HIV Status](#)
- [Women Like Us – Aging Positively](#)

First-Person Voices

- [A Girl Like Me](#)
- [A Girl Like Me LIVE](#)
- [The Well Project Leadership Exchange](#)
- [Women Making a Difference](#)
- [Hearts and Minds of The Well Project](#)

The Well Project is a non-profit organization whose mission is to change the course of the HIV/AIDS pandemic through a unique and comprehensive focus on women and girls across the gender spectrum. Visit their website, <https://www.thewellproject.org/>, to access fact sheets (English and Spanish), blogs, and advocacy tools, and to join a global community of women living with HIV.
