

## Correspondence



# Reply: Touch Me Not! Exploring the Devastating Stigma on People Living with HIV

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► See the letter “Touch Me Not! Exploring the Devastating Stigma on People Living with HIV” in volume 57 on page 444.

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Dear Editor:

We appreciate the thoughtful comments by Dr. Dalmacito Cordero Jr regarding our recent article addressing the epidemiological and clinical features of women living with human immunodeficiency virus (HIV) (WLWH) in Korea [1, 2]. His correspondence insightfully highlights the serious issue of stigma and discrimination against people living with HIV (PLHIV) in Korean society and points out that such stigma remains a major barrier to early diagnosis, prevention, and linkage to care. We fully agree that addressing stigma and discrimination is an essential public health priority on HIV infection requiring comprehensive efforts across sectors.

Although stigma was not the central focus of our study, we acknowledge that it is an inseparable and significant aspect of the broader HIV response. As Dr. Cordero notes, stigma in Korea is deeply rooted and continues to affect many PLHIV. In fact, I have previously published on the psychological impact of HIV-related stigma in Korea and emphasized the urgent need for social and

structural interventions to mitigate its effects [3]. We concur that eliminating stigma is not only a human rights issue but also a necessary step to achieving better prevention and care outcomes.

As of the end of 2023, the Korea Disease Control and Prevention Agency (KDCA) reported 19,745 cumulative HIV cases among Korean nationals, of which 1,250 (6.3%) were women [4]. While HIV transmission among men who have sex with men (MSM) remains the most common route in Korea, heterosexual contact is the predominant mode of transmission among WLWH [5]. To date, however, there has been no official report or study investigating the proportion of WLWH who are female sex workers. The absence of this data reflects both the lack of systematic research and the broader societal reluctance to address this marginalized population.

Historically, Korean media and public discourse have contributed to negative perceptions of HIV, often linking it with homosexuality, sexually transmitted diseases, sex work, and promiscuity [6]. This has compounded

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the stigma faced by both MSM and WLWH. Even though most women with HIV in Korea are infected through heterosexual contact and have no association with sex work or "promiscuous" behavior, they often suffer from the same harmful stereotypes, which significantly impact their social and emotional well-being.

We reaffirm that eliminating stigma and discrimination against PLHIV and sexual minorities is not only an ethical imperative but also a key strategy in HIV prevention and control. The KDCA's Second National Plan for HIV/AIDS Prevention and Control, announced in 2024, has rightly set the goal of achieving the UNAIDS 95-95-95 targets and "zero discrimination" [7]. We echo this vision and emphasize the need for continued efforts including public awareness, inclusive research, and community-based interventions to achieve these objectives.

Once again, we thank Dr. Cordero for his important reflections and for advocating for the dignity and rights of people living with HIV.

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#### Conflict of Interest

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