



World AIDS Day 2009: Universal Access & Human Rights

HIV-Positive Women Call for Accountability in the domestic HIV response: Renewed U.S. Leadership on HIV/AIDS Must Incorporate Gender Analysis

FOR IMMEDIATE RELEASE:

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Oakland, CA, Tuesday December 1, 2009 – World AIDS Day 2009 comes just weeks after the release of the first World Health Organization (WHO) report on women’s health worldwide indicating that globally HIV is the leading cause of death among women of childbearing age. Findings in the report show that regardless of a nation’s wealth, health outcomes are directly related to socio-economic factors, such as access to education and healthcare, household wealth, and geographic location. The WHO report additionally declares women’s health an “urgent priority”, concluding that “improving women’s health would improve the world.”

The U.S. Positive Women’s Network (PWN), a national membership body of HIV-positive women in the United States, points out that the U.S. HIV epidemic reflects the same trend: some populations are at increased vulnerability of contracting and dying from HIV, independently of personal risk behavior. Over the past thirty years, the U.S. epidemic has grown to disproportionately impact communities of color, women and those living in poverty, leading many HIV advocates to conclude that social and cultural drivers of the epidemic must be addressed for any domestic HIV response to succeed.

More than 300,000 women are now estimated to be living with HIV in the U.S.; over 80% of whom are women of color. Data shows that HIV remains the leading cause of death among Black women aged 25 to 34 – despite the availability of anti-retroviral treatment which can lengthen and improve quality of life.

“The status of women’s health in the U.S. generally reflects the level of economic rights, equality, and freedom from discrimination they enjoy,” says Brook Kelly, attorney for the Positive Women’s Network. “We continue to see that women of color and poor women in the U.S. have less access to the resources they need to keep them healthy – jobs, healthcare, education, good food, and stable housing.”

President Obama’s historic commitment to developing and implementing the first-ever National HIV/AIDS Strategy has been the cornerstone of the Administration’s involvement in the domestic HIV crisis. Obama has articulated three priorities for the strategy: 1) preventing new HIV infections 2) increasing the number of people with HIV who are in care and 3) reducing

HIV-related health disparities. But advocates point out that a gender lens must be applied to achieve each of these targets for women.

“Although women comprise about 27% of the U.S. HIV epidemic, we have failed to consistently apply a gender analysis to HIV prevention and care systems. AIDS Accountability International’s Scorecard on Women released last week showed that the U.S. did not even submit country data on women to UNAIDS in the most recent country reports filed in 2008. Gender analysis of all HIV-related policies and programs must be a key component of the National HIV/AIDS Strategy,” says Naina Khanna, director of policy and community organizing at Oakland, CA-based Women Organized to Respond to Life-threatening Disease (WORLD), and a woman living with HIV

Advocates also point to meaningful health reform that protects women’s rights as an urgent need for communities affected by HIV. Compared with HIV-positive men, women living with HIV are substantially less likely to have private health insurance (14% compared to 36%). And estimates show that half of people living with HIV in the U.S. do not receive regular medical care at all.

“80% of women testing positive in the U.S. contracted HIV through heterosexual contact. says , “To effectively prevent new HIV infections among women and ensure that women with HIV are in care, we must start with women’s sexual and reproductive health needs. This can begin with health reform that contains a robust public option which enables everyone to see a doctor regularly, and protects a woman’s right to choose. Then the National HIV/AIDS Strategy can pick up where health reform leaves off.”

Ellen Roelofs, a young 23 year old HIV-positive woman in Michigan, points to the lacking availability of HIV prevention education and technology that can be utilized by women. “We don’t even have the beginning of a plan to reduce HIV infections among women. Although young people make up a significant number of new infections, most schools don’t offer the accurate and comprehensive curriculum youth need to keep themselves sexually safe. And as long as safer sex means a man using a condom, that man's partners don’t really have the level of control they need to protect themselves. Fulfilling women’s rights includes giving us the tools and information we need to protect ourselves – with or without our partner’s support.”

“We’re here to support decision-makers in their efforts to address the needs of women living with and vulnerable to HIV within the National HIV/AIDS Strategy and health reform. The PWN’s women and HIV experts are available for consultation, “ said ZZ, title, affiliation. Information about the PWN is available at: www.womenhiv.org/positivewomen.

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The U.S. Positive Women’s Network is a project of WORLD (Women Organized to Respond to Life-threatening Disease) in Oakland, CA. We are a national membership body of women living with HIV in the United States. For more information please visit: www.womenhiv.org/positivewomen