

President's Advisory Council on AIDS (PACHA)
Resolution on the Needs of Women Living with HIV

Whereas we are at a critical moment in the HIV epidemic and cannot end the epidemic without addressing the specific needs of all affected communities;

Whereas women bear more than a quarter of the domestic HIV burden and women of color represent over three-quarters of women living with HIV;

Whereas women living with HIV enter later into HIV care, have a lower likelihood of receiving antiretroviral therapy, have twice as many HIV-related illnesses, and have higher mortality rates, than men;

Whereas accessing care and essential support services, including housing, are particularly complicated for women living with HIV as they are disproportionately low-income, and are more likely to have caretaking responsibilities, than men;

Whereas the primary mode of HIV acquisition for woman is heterosexual contact and female – controlled prevention methods are not yet available;

Whereas transgender women living with HIV face unique challenges in accessing and adhering to HIV and HCV care and treatment regimens;

Whereas women most at risk for or living with HIV are more likely to experience sexual or intimate partner violence one or more times in their lives;

Whereas the Affordable Care Act (ACA) provides numerous opportunities to increase access to care for women living with and at risk for HIV, including expanding access to private and public insurance coverage;

Whereas sustained success in perinatal prevention efforts requires unfettered access to prenatal care;

Whereas access to reproductive health services is essential to decrease the occurrence of unplanned pregnancies and to promote safe conception;

Be it resolved, the PACHA recommends that the Secretary of Health and Human Services (HHS) request all relevant federal agencies work with the White House Office of National AIDS Policy and the HHS Office of HIV/AIDS Policy to develop amendments to the National HIV/AIDS Strategy and its implementation plan to ensure they include specific, targeted and measurable goals and objectives for reducing HIV incidence and HIV-related health disparities and improving health care access and health outcomes for women living with HIV.

Be it further resolved, the PACHA recommends that the National HIV/AIDS Policy (NHAS) implementation plan be amended to address the needs of women in the following ways:

- 1) To evaluate the effectiveness of the first two years of the National HIV/AIDS strategy in addressing the needs of women living with HIV, including those co-infected with HCV;
- 2) To make gender-sensitive care for women living with HIV more widely and readily available through the integration of HIV care and prevention services with sexual and reproductive health care and intimate partner violence prevention and counseling;
- 3) To expand and expedite the provision of housing and services that facilitate linkage to and retention in care for women with HIV;
- 4) To produce and make available in a timely manner more refined data that analyzes the unique health and service needs of women with HIV; and
- 5) To produce expanded research into the development of women-controlled prevention methods.

Be it further resolved that the PACHA recommends that routine HIV testing, screening and counseling for intimate partner violence and sexually transmitted infections be covered as required Medicaid preventive services for women, just as these services are now required to be covered by private insurance plans without cost sharing.

Be it further resolved that the PACHA recommends that ONAP work with HHS, the Health Resources and Services Administration (HRSA), and the Center for Medicare and Medicaid Services (CMS) to develop an Affordable Care Act implementation plan that ensures that the full prevention, care, and treatment needs of women living with and at risk for HIV are met.