



POSITIVE WOMEN'S NETWORK
USA

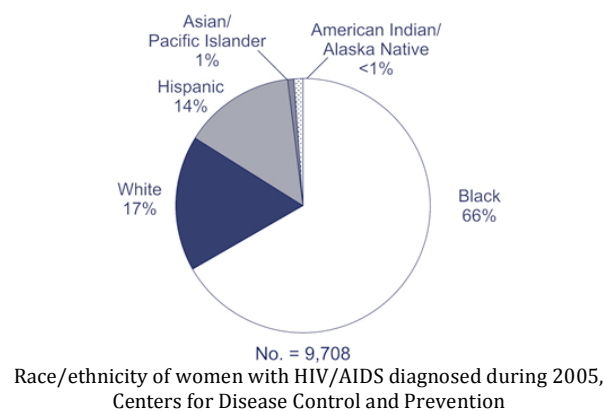
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PREVENTION JUSTICE

Prevention Justice is a call to institutionalizing an effective HIV prevention approach that recognizes the structural factors that affect people's lives and put them at risk for HIV in the first place. For women in particular, prevention justice has unique nuances.

Telling women to abstain or asking women to tell their partners to wear a condom is not enough to protect women from HIV. Women will be safe from HIV when the overall quality of our lives and the lives of our loved ones is uplifted and when we have a variety of ways to protect ourselves, including methods that don't require our partner's knowledge or consent.

In the U.S., most HIV-positive women are low-income women of color who face many **layers of oppression and marginalization**.



Women's health is affected by the consequences of racism, sexism and homophobia— including lack of access to well-paying jobs, inability to obtain quality women-centered health care, lack of safe and stable housing, gender-based violence, and inequitable development policies.

To address the HIV epidemic among women, we must change the way we do HIV prevention — shifting from individual behavior to addressing broader social and structural issues.

Challenges

- ✚ Missed opportunities for HIV testing: Many women are never or rarely offered an HIV test by their provider as a routine part of their medical care because women are perceived as not at risk for acquiring HIV. The reality is that any woman who is sexually active can acquire HIV. The perception that women do not need HIV testing is dangerous to women's health – leading to late testing and poor health outcomes.

- ✦ Gender-based violence: Due to the lack of woman-controlled HIV prevention mechanisms, women are forced to negotiate safe sex with their partners and can only use prevention tools such as male condoms with their partner's knowledge and consent. As a consequence, power dynamics in relationships may negatively impact women's health.
- ✦ Incomplete or non-existent sex education: Sexuality education throughout the lifespan currently does not exist, and where there is sex education, it is incomplete and sometimes even misleading. If women do not have scientifically accurate information about how to protect themselves regardless of who they are having sex with, how are they supposed to protect themselves?
- ✦ Structural racism: Racism embedded in the criminal justice system, the education system and other institutions tears communities apart and has a devastating impact on the availability of male partners for women, the ability of women and men of color to obtain employment, safe and stable housing and quality medical care.
- ✦ Criminalization of drug use: Current policies and practices related to drug use harm HIV prevention efforts by making it difficult for people to reduce their risk or overcome addiction without losing their jobs, children, and homes.
- ✦ Transphobia: Transgender women are especially vulnerable because discrimination, bias and violence resulting from transphobia create and perpetuate barriers to employment, health care, and mental, physical and emotional well-being.

PWN Recommends

- ✦ Increase research on the biological and structural factors that impact a woman's vulnerability to HIV throughout her lifespan, including poverty and access to healthcare and housing, as well as physical, emotional and psychological changes associated with aging.
- ✦ Implement prevention efforts that address the links between sexual and reproductive health and rights, violence against women, and HIV.
- ✦ Prevention efforts should be grounded in harm reduction. Syringe exchange is a proven intervention and should be fully funded and implemented.
- ✦ Male and female condoms and other prevention resource tools should be available and widely accessible in incarceration settings.
- ✦ Targeted and resourced national HIV prevention campaigns for Black and Latina women in the U.S., developed in consultation with community partners, including women living with HIV.
- ✦ Policies and resource distribution that uphold providing nondiscriminatory prevention and testing services, to all women with special attention to the unique needs of transgender women, women who are incarcerated, and sex workers.
- ✦ Additional investment in research on women-controlled prevention methods including vaginal and rectal microbicides, female condoms, and how women may use tools such as pre- and post-exposure prophylaxis (PreP and PEP) – to put prevention squarely in the hands of women.
- ✦ Biomedical prevention that upholds the rights, dignity and quality of life for women living with and vulnerable to HIV.
- ✦ Age-appropriate and comprehensive sexuality education at all ages throughout the lifespan. This education should be non-heterosexist and reduce HIV-related stigma, challenge gender norms, and reinforce gender equality.
- ✦ Improved surveillance and data collection on women's risk factors beyond behavior for acquiring HIV, and better real-time reporting and tracking of new HIV cases to monitor trends.

