



POSITIVE WOMEN'S NETWORK
USA

U.S. Positive Women's Network,
a project of WORLD
414 13th Street
Second Floor
Oakland, CA 94612
510-986-0340 **phone**
510-986-0341 **fax**
www.pwn-usa.org

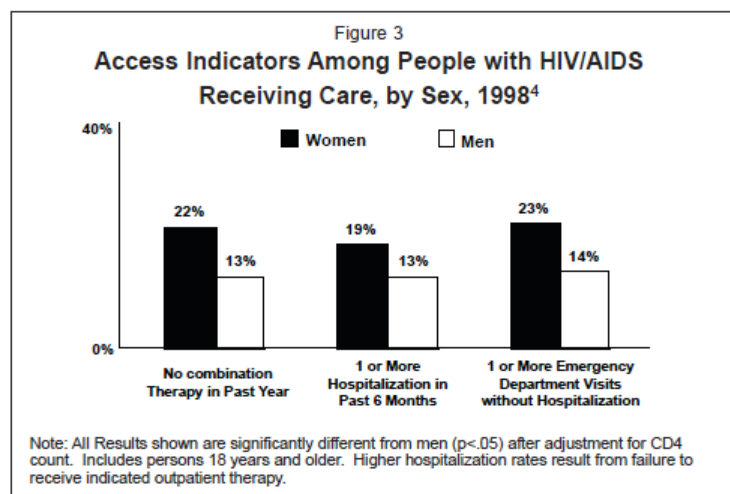
WOMEN-CENTERED CARE

Over half of people living with HIV in the U.S. are estimated to be out of care, and studies show these statistics may be even worse for women living with HIV. Research published by the Centers for Disease Control and Prevention (CDC) show that race, gender, and geography play a key role in health outcomes for HIV-positive people — women are getting sicker and dying faster of HIV; especially Black women and Latinas; and particularly if they are living in the South or rural areas.

Women's medical care and support service needs are unique. Achieving the best health outcomes for HIV-positive women requires care that is non-stigmatizing, holistic, integrated, gender-sensitive, upholds positive women's rights and dignity, is peer-based and is culturally relevant.

Current services for women are often disjointed and incomplete. One of the largest gaps specifically for women is apparent in the lack of integration of HIV care with sexual and reproductive health care. The failure to effectively meet women's needs on the whole increases barriers to linking HIV-positive women to care and keeping them in care once linked.

Wrap-around supportive services including emotional support, peer-based services, case management, transportation, housing, childcare, mental health services, substance use services, employment services, re-entry programming, legal assistance, and food vouchers are essential to meet the needs of women living with and vulnerable to HIV. When these supportive services are absent, HIV-positive women are likely to face increased barriers to staying in medical care.



Challenges

- ✦ HIV-related stigma is a barrier to accessing medical care and support services.
- ✦ Increased medicalization of HIV care may come at a cost to supportive services. Supportive services such as peer advocacy, case management and social services are critical to keeping women in care.
- ✦ Policies, service delivery silos and funding silos prevent integration that would help achieve women-centered care, including integrating HIV care with sexual and reproductive health.
- ✦ Providers are sometimes not informed or misinformed about the unique needs of women living with HIV, and research on women's health throughout the lifespan is inadequate.
- ✦ Low-risk perception of women and providers leads to late HIV testing, increased AIDS diagnoses and poorer health outcomes.

PWN Recommends

- ✦ Utilize tools such as the HIV stigma index to measure and evaluate how stigma impacts communities and to reduce stigma over time in healthcare settings as well as among the general population.
- ✦ Implement stigma reduction curricula for all personnel in healthcare settings providing care to HIV-positive people.
- ✦ Develop and test social marketing campaigns to reduce stigma and change attitudes towards people living with HIV.
- ✦ Sustain and expand essential supportive services to keep HIV-positive women in care, especially young women, older women, and women who are especially vulnerable to rights violations — sex workers, transgender women and drug users.
- ✦ Integrate sexual and reproductive health and HIV to achieve better prevention and care outcomes.
- ✦ Ensure continued provider training on: 1. the sexual and reproductive health, rights and options of women affected by HIV and 2. non-judgemental, quality and culturally appropriate care.
- ✦ Provide comprehensive, age-appropriate, non-heterosexist sexuality education throughout the lifespan.
- ✦ Increase research efforts: 1. to better understand how concurrent factors such as housing instability, violence, incarceration, and substance use affect barriers to HIV care and treatment, 2. to develop effective female-controlled prevention options – such as microbicides and the female condom, 3. to better understand how HIV affects a woman's body.
- ✦ Build culturally relevant peer navigation programs into medical home models to ensure effective linkage to and retention in care.

