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## WORDS MUST MATCH DEEDS RESTORE & INCREASE COMMUNITY BASED HIV FUNDING FOR WOMEN AND MINORITIES

In the United States, the proportion of HIV born by female adults and adolescents rose from 7% in 1985 to its peak at 27% in 2007, and subsequently dropped slightly to 23% in 2009. Simultaneously there has been a reported drop in the annual incidence of new HIV infections among women and girls. As noted by Liz Brosnan, Executive Director of Christie's Place, a women-serving organization in San Diego, CA, "While this is good news, we remind the nation, our elected representatives and national HIV advocacy organizations that now is not the time to divest public and private investments in community based organizations that provide critical support to women and girls impacted by HIV. Rather, now is the time to continue and scale up support for gender-responsive services that enhance the longevity, health and quality of life for all women and girls in order to continue the downward trend and end AIDS amongst this population group."

Ending AIDS can be achieved if the federal and state governments, as well as foundations and private funders, fully support and involve organizations that are led by and serve women and girls vulnerable to or living with HIV. Advocates for women express grave concern about a trajectory of disinvestment in women-led and serving HIV organizations, and the consequent dwindling of community-based programs and services, during Affordable Care Act implementation.

"The history of HIV shows that culturally relevant and gender-responsive supportive services, including psychosocial support, treatment literacy, case management, and transportation are necessary strategies to reach and engage women and girls in medical care. Yet with the diminishing investment in women-focused organizations and services, it's not clear that ACA implementation will have an HIV infrastructure to build on." remarked Ingrid Floyd, Executive Director of Iris House, a women-serving HIV organization in New York, NY.

Reductions in funding are not just a result of the changes in philanthropy trends but also reflect a shifting public funding environment. The budget sequester and recent policy decisions demonstrate a skewing of priorities away from community-based organizations primarily serving women. "Both the US Office on Women's Health (OWH) and the Office of Minority Health (OMH) budget line items for supporting community based organizations that serve females and minorities impacted by HIV were eliminated in the President's Budget for FY2014.

"These funding cuts, totaling approximately \$3.3 million will not only affect service delivery but will also weaken the infrastructure of the major organizing forces in our communities: women and nonprofit organizations. Women make up the vast majority of the nonprofit workforce (73%) and a little under 50% of nonprofit executives. Without opportunities for employment, growth and advancement, women will continue to be economically and civically marginalized and hence likely more vulnerable to HIV infection," said Vanessa Johnson, National Coordinator of the National Women and AIDS Collective, a woman openly living with HIV in Washington, DC.

These funding cuts are indicative of what's happening across the board for all women programming in the US. The failure to ensure a full continuum of health and social support services for women, including women impacted by HIV rests with our government's inability to match rhetoric with funding support. HIV requires a response that encompasses more than an emphasis on medical services, say advocates.

In order to restore confidence in the administration's commitment to women, NWAC and its member organizations demand that funding be restored and increased for US OWH and US OMH community based HIV initiatives. This funding will strengthen the capacity of domestic nonprofit organizations and programs led-by women to respond effectively to the HIV/AIDS epidemic among women thus reducing the acquisition and transmission of HIV infection.