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Track 3: Our Vision

Title: The Hidden Bars of the HIV Health Care Continuum: A Fish Bowl Exercise

OBJECTIVES: This workshop aims to facilitate a Fish Bowl exercise about health disparities as the barriers to care for women living with HIV. Health disparities form the “hidden bars” of the health care continuum that prevent people from getting tested, retained in care, and virally suppressed. The Women's Collective provides girl and woman focused HIV/AIDS direct services in the metropolitan Washington D.C. area. The voices and experiences of the women we serve, as well local trends in HIV incidence and prevalence, shape our services and guide our advocacy. Our organization's commitment is to the health, rights and quality of life of women and girls and we believe that health disparities form basis of barriers to care the hidden bars of the continuum. To address the barriers to care TWC focuses on five core issues that intersect with health disparities. These five “bars” will be the focus of the Fish bowl excessive:

- **Housing:** A lack of safe and affordable housing can impact health outcomes for women living with HIV (WLWHA), but HOPWA is underfunded and the current voucher amounts don't give WLWHA the ability to choose safe, fit-for-purpose housing.
- **Poverty and Income Disparities:** Poverty underlies many barriers to care and WLWHA may face specific barriers related to gender, such as limited decision-making power, a lack of control over financial resources, and child-care responsibilities that conflict with their jobs.
- **Gender-based Violence:** HIV is the leading cause of death and disease among women of reproductive age (15-49 years) worldwide and experiencing violence increases the risk of HIV infection by a factor of three.
- **Sexual and Reproductive Health and Rights:** Access to family planning services and comprehensive sex education is crucial to ensuring the rights of women and girls and preventing HIV transmission among youth.
- **Health Care Access:** Access to affordable, culturally competent care can improve outcomes across the continuum, by increasing both testing and treatment options, encouraging WLWHA to seek and stay in care.

METHODS: This workshop will bring together direct service providers, people living with HIV, and advocates for a discussion. The fish bowl discussion method will allow for many individuals to share their experience and expertise. The facilitator will guide the discussion and present questions to participants that will allow for collaborative brainstorming process on how we can most successfully address the hidden bars of the HIV care continuum.

RESULTS: This fishbowl exercise aims to: generate action steps to mobilize women's service providers for the development of HIV/GBV programming; increase resources and programming to promote the sexual and reproductive health rights of women living with HIV; identify specific methods and opportunities to advocate for housing, health care, and social support programs designed for the specific needs of women living with HIV.

CONCLUSIONS: Our goal is to come up with specific conclusion about the hidden bars of the health care continuum as well as opportunities and challenges for utilizing socio-economic determinants to inform the development of various tool-kits and models for dealing barriers to engagement and retention in care. Our plan is for the workshop itself to function as formative research. We will identify specific conclusions, which will be distilled into materials that facilitate on-going conversations and model-building around the specific results identified.