



W O M E N ' S
R E S E A R C H
I N I T I A T I V E
O N H I V / A I D S

WRI 2015 SUMMARY REPORT

September 2015

The Women's Research Initiative on HIV/AIDS was established in 2003 to elevate, enhance, and expedite research on women and HIV. Each year, the WRI convenes an annual meeting to address a specific topic area, bringing together an extraordinary group of leaders in this field to identify key opportunities to accelerate our understanding of HIV disease in women. The diverse group of participants representing researchers, clinicians, advocates, industry and government representatives, and HIV-positive women met from March 19-22, 2015, in Scottsdale, Arizona.

This year, the WRI embarked on a novel five-year visioning process using a proprietary methodology called Syntegration in order to identify the major policy needs and research challenges that must be addressed and overcome in order to significantly reduce the rate of new HIV infections and disease progression among women in the United States by 2020. The meeting was a highly facilitated working session that utilized a series of exercises, breakout sessions, and brainstorming techniques to develop a strategy to achieve specific targets over the next five years.

**Special thanks to supporters
of the WRI 2015 annual meeting:**
*Merck, Gilead, BMS, ViiV, AbbVie,
Janssen and the Syntegrity Group*

Meeting objectives

- Bring together a diverse group of experts on women and HIV/AIDS to collectively focus on the HIV epidemic in the United States and identify strategic overlap between their respective domains
- Determine and agree upon realistic and measurable targets for this initiative
- Produce an actionable, multi-stakeholder agenda and implementation roadmap aimed at addressing a select set of critical issues confronting the HIV community
- Recruit a network of experts across HIV who will champion the agenda and continue to collaborate on its execution

The WRI 2015 began by identifying eight topics that must be considered in order to comprehensively address the question of how to reduce the rate of new HIV infections and disease progression among women in the United States by 2020:

- Affordable, accessible gender-responsive care
- Impact of sex, gender, race, and class
- Integrated treatment and prevention framework
- Leadership and accountability for improving quality of life for women and HIV
- Population-based data systems
- Public awareness and education
- Research
- Social factors of health and well being

While these eight topics represented distinct buckets for discussion at the WRI 2015 meeting, a number of themes cut across categories:

- *Awareness and education:* need to remove stigma, normalize HIV
- *Policy:* Affordable Care Act, Ryan White, Medicaid
- *Research and data:* need to merge data systems, rather than creating entirely new ones
- *Social factors:* stigma, racism, economic inequalities, HIV criminalization
- *Treatment and prevention:* need to go beyond the continuum of care to develop a gender-responsive framework

After three days of workshops and exercises led by a company called Syntegrity Group, the WRI identified the necessary components of a five-year plan. Following is an outline of that plan; WRI leadership will work over the coming months to identify partners and champions to research, develop, implement or scale these goals and activities over the next 16 months.

Overarching goal

Significantly reduce the rate of new HIV infections and disease progression among women in the United States between now and 2020.

Subgoals

- Establish a new research paradigm that prioritizes the inclusion of qualitative data on women
- Ensure that the healthcare system delivers comprehensive, affordable, accessible, and gender-responsive care for all women, including transwomen
- Provide all healthcare practitioners with the tools they need to comprehensively engage in HIV prevention and treatment
- Identify mechanisms to measure quality-of-life issues for people living with HIV; develop metrics to drive accountability
- Elevate imperative to address stigma and normalization, including decriminalization

Strategies

1. Change the national healthcare and policy conversation to be more inclusive of women and HIV
 - Shift the focus of national policy to better include women
 - Develop and implement an innovative educational agenda focused on women and HIV
 - Push to normalize HIV while keeping women at the forefront of the national conversation
2. Transform prevention and care for women living with, and at risk of, HIV infection
 - Intervene in “Hot Spots” to develop, demonstrate, and implement new models of prevention and care for women
 - Engage the entire spectrum of care provision in delivering accessible, gender-responsive care
 - Stimulate grassroots efforts to drive inequality and stigma out of the system
3. Re-focus efforts on the significance and relevance of women and HIV research and data acquisition and use
 - Conduct research into the ways that complex social factors impact women’s acquisition of HIV and experience with the disease
 - Identify and utilize data systems to improve the quality of life for women living with HIV
 - Change the research paradigm to be more inclusive of women

Recommended activities

Over the course of the three-day meeting, the WRI developed a list of recommended tactics that will advance the goal of significantly reducing the rate of new HIV infections and disease progression among women in the United States between now and 2020. Those tactics fell into three categories: policy, advocacy/education, and research. Examples of each are listed below.

Policy

- Meet with the Office of National AIDS Policy regarding the inclusion of quality-of-life metrics in the updated National HIV/AIDS Strategy
- Engage with Health and Human Services (HHS) and Health Resources and Services Administration (HRSA), and HRSA's HIV/AIDS Bureau (HAB) on compensation mechanisms for services beyond the Ryan White Care Act
- Determine HHS structure and plan around integration of women's health issues, to facilitate better coordination and focus on women and HIV
- Conduct analysis of ongoing and proposed federal cross-agency initiatives

Advocacy/education

- Map out a plan to develop tools that effect change around bias and diversity, including policy documents, curricula, intersectionality
- Identify potential stakeholders/partners in national testing campaign; map out plan based on interest and opportunities
- Identify currently existing programs that educate providers on women living with and at risk for HIV; research, identify, and work with target organizations/associations
- Identify private sector allies beyond the pharmaceutical industry to explore research opportunities, engage in, and support HIV normalization activities

Research

- Undertake "Hot Spots" demonstration project; identify advisory team and determine next steps; initiate landscape analysis into models of comprehensive, gender responsive care for women and families
- Working with NIH leadership, investigate consultation on new epidemiological/ biomedical models to demonstrate efficacy of interventions in low-incidence settings
- Identify existing/new funding opportunities, as well as ongoing research into key populations including black, Hispanic, and trans-women
- Perform novel care delivery analysis with stakeholder associations, organizations and providers

Conclusion

The WRI 2015 was a successful and productive meeting that generated a preliminary five-year plan to help reduce the rate of new HIV infections and disease progression among women in the United States. By leveraging its transdisciplinary nature, the WRI 2015 was able to create the broadest view and most inspired solutions and we look forward to advancing these activities in conjunction with allies, champions, and mission-aligned partners.

APPENDIX A: PARTICIPANTS

Erika Aaron
Drexel University College of Medicine

Sevgi Aral
Centers for Disease Control

Dawn Averitt
The Well Project

Gina Brown
PWN-USA

Dawn Carey
Dartmouth College

Elizabeth Connick
University of Colorado Denver

Antigone Dempsey
HRSA/HIV/AIDS Bureau

Lisa Fitzpatrick
United Medical Center

Sally Hodder
West Virginia University

Naina Khanna
Positive Women's Network - USA

Tonia Poteat
Johns Hopkins University

Linda Scruggs
Ribbon Consulting Group

Kathleen Squires
Thomas Jefferson University

Vani Vannappagari
ViiV Healthcare Limited

Shannon Weber
Bay Area Perinatal AIDS Center

Charles Wira
Geisel School of Medicine at Dartmouth

Adaora Adimora
UNC School of Medicine

Judith Auerbach
University of California, SF

Gina Brown
NIH Office of AIDS Research

Kimberley Brown
Janssen

Jenna Conley
The Well Project

Jeffrey Scott Crowley
O'Neill Institute/Georgetown Law

Dazon Dixon Diallo
SisterLove, Inc.

Krista Heitzman Martel
The Well Project

Elizabeth Johnson
Christie's Place

Marisol Martinez-Tristani
AbbVie

Maura Riordan
AIDS United

Daniel Seekins
Bristol-Myers Squibb

Patrick Sullivan
Emory University

Fulvia Veronese
NIAID, DAIDS

Andrea Weddle
HIV Medicine Association

Carmen Zorrilla
UPR School of Medicine