

**NJ Women and AIDS Network
Confronting the Crisis: Women & HIV Conference
November 1, 2010**

Acknowledgements

Thank you to Monique for inviting me to be part of this conference.
And thank you to the entire NJ Women and AIDS Network for your advocacy on behalf of women with HIV/AIDS and your efforts to reduce the spread of this disease.

Introduction

We gather today to renew our commitment to ensure that more women get educated, tested, and treated. All of you here today are on the frontlines working with women teaching them how to protect themselves, empowering them with information and counseling those affected by HIV/AIDS.

You know better than anyone that although there has been tremendous progress in the fight against HIV/AIDS there is still much work to do.

And because of the fiscal realities that we face as a state we may not always have all of the resources at our disposal that we would like.

As you know, Gov. Chris Christie faced a nearly \$11 billion state budget shortfall before the start of the current fiscal year and, as a result, the Department of Health and Senior Services had to make very difficult decisions including changes to the eligibility of the Aids Drug Distribution Program.

These decisions were not made lightly. The Department fully understood the impact that this change would have on the lives of vulnerable patients living with HIV/AIDS and that is why we worked continuously to explore every possible option to restore the benefit.

Fortunately, the Department was able to craft a solution with a combination of \$5 million in additional rebates and newly available federal AIDS grant funding. Nearly 1,000 New Jersey residents with HIV/AIDS were immediately enrolled in the new drug benefit program—the Temporary AIDS Supplemental Rebate and Federal Assistance Program—that provides free AIDS medications to individuals between 300 and 500 percent of the federal poverty level.

As a physician, I know how important these life-saving medications are to individuals with HIV and AIDS. These two drug benefit programs provide life-sustaining and life-prolonging medications to 7,700 low-income individuals with no other source of payment for these drugs.

Progress made in NJ

Thankfully all of you have also reached some important milestones due to all our efforts to educate and test residents at risk for HIV:

- Routine HIV testing is conducted in numerous health care settings throughout the state. And, of those who report being tested for HIV, over 52% are women.
- HIV testing for pregnant women was mandated in 2008. And in 2009, 97% of all pregnant women were tested for HIV.
- Mother-to-Child transmission of HIV has been dramatically reduced due to testing and proper obstetrical care. The rate of HIV transmission has been reduced from 21% (77 children exposed to HIV) in 1993, to 2% (2 children exposed to HIV) in 2009—and that is truly a great success story.

Although we have made progress, we cannot be complacent. As we stand here, people are still being infected, people still fear getting tested, and people living with HIV/AIDS are still being discriminated against.

But the good news is that advances in treatment have allowed us to look at HIV/AIDS as a manageable chronic disease. And it is preventable. So while infection rates are dropping, our challenge remains because people continue to get infected with a disease that is completely preventable.

And the statistics tell us that too many of those getting infected are women.

HIV/AIDS & Women Statistics

- Nationally, New Jersey has the second highest proportion of women living with HIV/AIDS (35% of all cases);
- Women comprise one-third of all cases in our state; 1 out of every 306 women in New Jersey is living with HIV/AIDS;
- 8 out of every 10 women living with HIV/AIDS in NJ are African American and Latina;
- Heterosexual contact continues to be the primary way that women are exposed to HIV. Almost 60% of women living with HIV/AIDS acquired the disease through heterosexual contact.

These stark statistics remind us how much work still lies ahead.

DHSS Efforts to Combat HIV/AIDS in Women

The Department's Division of HIV/AIDS Services is working on reducing the number of women infected with HIV through various initiatives

The Department provides funding and support to 34 HIV prevention programs that offer a variety of services to women throughout the state. These services include:

- HIV testing, referral and access to treatment;
- Outreach, education, awareness and training;
- Specialized behavioral, HIV prevention interventions such as the SISTA (Sisters Informing Sisters on Topics about AIDS) program, which is spearheaded by the NJ Women & AIDS Network. This program helps educate women at risk for HIV. It teaches them to care enough about themselves to protect themselves, and to get tested if they think they are at risk.
- We also dedicate funding and support toward prevention counseling and drug treatment; reproductive care services and syringe access services

Transmission via IDU/Needle Exchange

As I mentioned earlier, nearly 60% of women living with HIV/AIDS acquired the disease through heterosexual contact. And 77% of these women reported sexual contact with someone who has injected drugs. Overall Injection drug use continues to account for nearly 40% of all HIV infections in the state.

New Jersey's Syringe Access Program Demonstration Project shows great promise in preventing the spread of HIV via injection drug use. The state's programs in Atlantic City, Camden, Newark, Paterson and Jersey City have succeeded in enrolling more than 6,500 individuals, of which more than 3,200 were referred for drug treatment.

The Department also provides a network of nurses at the syringe exchange programs who provide services to women including reproductive counseling; pregnancy, HIV, STD and hepatitis testing; safer injection counseling and overdose prevention. More than 1,200 women attending the syringe exchange programs have received services which have helped them stabilize their lives and in some cases reunite with their families.

Closing

These programs are truly making a positive impact.

But as I said earlier, women continue to be infected with this completely preventable disease. There are many factors that put women at risk including lack of access to care, poverty, unemployment and discrimination. No one intervention will be sufficient, we need to continue the full measure of comprehensive, targeted programming to more effectively change at-risk behaviors.

That is why the partnership of agencies like the NJ Women & AIDS Network is essential in reducing the incidence of HIV in our state.

Thank you again for all of the hard work that you do everyday on the frontlines of the battle against HIV/AIDS. Gatherings like this one will help us to gain strength for the continuing fight and renew our efforts to protect our residents.

Thank you.

