
Presidential Advisory Council on **HIV/AIDS**



March 12, 2013

The Honorable Kathleen Sebelius
Secretary
Department of Health and Human Services
200 Independence Avenue, S.W.
Washington, D.C. 20201

Dear Madame Secretary:

As Chair of the Presidential Advisory Council on HIV/AIDS (PACHA), I want to thank you for your continued support and leadership in the fight against HIV/AIDS. I am writing to inform you of the three resolutions that PACHA passed on February 7, 2013 during our 50th Full Council Meeting. The three resolutions are enclosed for your review and consideration. All three resolutions were brought forth by the *Disparities* subcommittee, which is Co-Chaired by Kathie Hiers and Douglas Brooks.

The first resolution is regarding criminalization, a topic that received a lot of attention during our October 2012 meeting. During our February meeting, the PACHA voted in favor for the *Resolution on Ending Federal and State HIV-Specific Criminal Laws, Prosecutions, and Civil Commitments*. The resolution calls for the following actions:

- PACHA resolved that the U.S. Department of Justice (DOJ) and the U.S. Department of Health and Human Services (HHS)/Centers for Disease Control (CDC), should complete a written review regarding opportunities for the creation of specific guidance and incentives to state attorneys general and state departments of health for the elimination of HIV-specific criminal laws. PACHA further resolved that DOJ and HHS should develop recommendations for approaches to HIV within the civil and criminal justice systems that are consistent with the treatment of similar health and safety risks; and supports legislation, such as the REPEAL HIV Discrimination Act, that advances these objectives;
- Current criminal laws should require modernization to eliminate HIV-specific statutes or application of general criminal law that treats HIV status, or the use of condoms or other measures to prevent HIV transmission, as the basis for criminal prosecution or sentence enhancement; and
- The CDC should issue a clear statement addressing the growing evidence that HIV criminalization and punishments are counterproductive and undermine current HIV testing and prevention priorities.

The second resolution passed by the Council is the *Resolution on the Needs of Male-Bodied Two-Spirit Individuals Living with or at risk from HIV*. (“Two-Spirit” is the term used to describe Lesbian, Gay, Bisexual, Transgender, Third, and Fourth Gender.) This resolution makes the following recommendations:

- HHS should provide current Native epidemiological, mental health, and behavior health data, as well as empanel Native Research and Epidemiological Workgroups to augment information on community viral load and social determinants to the Native epidemic with a focus on the male-bodied, Two-Spirit community;
- HHS should solicit the counsel and commitment of both spiritual and community leaders to develop strategies for prevention, care, and outreach informed by Native values and leverage social marketing to target youth.
- HHS should develop a consultation process to meet with tribal leadership to emphasize the need to augment testing and care linkage, as well as prioritize the immediacy of the epidemic among all Native communities and to also develop parallel confirming processes to ensure input and guidance from non-Tribal based Native community-based organizations; and,
- HHS should develop a Care Navigation and Coordination Strategy to address the unique health needs of Natives. The goal of the Strategy is to institute a more comprehensive continuum of care for Native populations, including an increased culturally-competent provider base and the improved use of medical home models.

Lastly, the PACHA passed the *Resolution on Effectively Addressing the HIV/AIDS Epidemic in Transgender Populations*. The recommendations below outline only a few that are included in the resolution:

- Relevant HHS operating divisions should dedicate grant funds to projects specifically focusing on transgender health, particularly in the context of HIV prevention and treatment, such as the 2012 Health Resources and Services Administration (HRSA) Special Projects of National Significance (SPNS) grants focusing on retaining HIV-positive, transgender women in care and the inclusion of transgender women as a priority population in the 2012 Office of Minority Health grant program on re-entry services for recently incarcerated individuals;
- The CDC should develop and fund a research portfolio on new community-driven prevention programs for transgender individuals;
- HHS should develop a measure for identifying transgender respondents on federally supported surveys, similar to the question for sexual orientation that was added to the National Health Interview Survey in 2013. Furthermore, PACHA resolved that all federal agencies involved in implementing the National HIV/AIDS Strategy (NHAS) should use this measure to collect and report accurate and reliable statistics about the HIV/AIDS epidemic among transgender populations; and

- The National Institutes of Health (NIH) should establish a cross-NIH coordinating mechanism to develop an integrated approach to pursuing a range of research related to transgender health and LGBT health more broadly, including HIV/AIDS and the socioeconomic determinants of transgender health;

We sincerely appreciate your thoughtful consideration of these recommendations. We take very seriously our roles as members of PACHA and truly believe, with your continued support and leadership, we are one step closer to an AIDS-free generation.

All my best,

A handwritten signature in black ink, appearing to read 'Nancy Mahon', with a long horizontal flourish extending to the right.

Nancy Mahon, JD
Chair

Enclosure

CC: Caya Lewis, Howard Koh, and Ron Valdiserri