



AIDS Alliance for Children Youth & Families - 2011 Policy Priorities

Guiding Principles: AIDS Alliance believes that in this era of shrinking resources and aggressive budget cuts it is imperative that all HIV/AIDS organizations and advocates stand united in their call for optimal prevention, care and treatment services and effective research for all persons at risk for or living with HIV. It is our intention to continually scan the environment for threats to HIV/AIDS programs that lead to unintended consequences: potentially pitting one community against another, one geographical location against another or one segment of PLWHA against another. We are all in this together and are inter-connected. In times of challenges to resources and services, the issues, challenges and unique circumstances of PLWHA in the U.S. call for more collaboration, partnerships and vigilance against divisiveness and fragmentation.

- 1) Advocate for optimal funding for Part D of the Ryan White HIV/AIDS Program and Centers for Disease Control and Prevention (CDC) HIV prevention programs that target women, children, youth and families. Encourage availability of resources to maintain perinatal HIV transmissions at or below 1% in the US.
- 2) Support implementation of the 2009 reauthorized Ryan White HIV/AIDS Program that properly serves the needs of its consumers, particularly women, children, youth and families, as well as their providers. Collaboratively work with other advocacy groups to ensure that the 2013 reauthorization properly serves the needs of women, children, youth & families.
- 3) Champion the family-centered care model and advocate for medical home models that feature family-centered care, those that facilitate comprehensive and coordinated patient centered medical and support services (with a consistent provider and co-located or integrated service locations), that is the centerpiece of Ryan White Part D Programs.
- 4) Promote peer based education and support services as a means to engage, retain and support PLWHA, (particularly women and youth) into comprehensive medical care for effective individual and community level outcomes.
- 5) Advocate for the efficient collection and analysis of data to document the successful outcomes of Ryan White Part D programs, including reduction of perinatal HIV transmissions, retention of clients in care, and cost-effectiveness.
- 6) Monitor the implementation of the National HIV/ AIDS Strategy (NHAS) and Health Care Reform to ensure that they address the needs of all persons living with HIV/AIDS, in particular women, youth and families.
- 7) Work in partnership with the broader HIV/AIDS community and coalitions to support efforts regarding:
 - a. Safeguarding against federal budget cuts that are detrimental to our constituency
 - a. Appropriate housing resources for persons living with HIV/AIDS
 - b. Effectual implementation of expanded HIV testing and linkage to care programs
 - c. Full funding for the AIDS Drug Assistance Program (ADAP)
 - d. Harm reduction, in particular needle exchange
 - e. Implementation of comprehensive sexual health education for all youth, including LGBTQ youth
 - f. Advocacy for appropriate resources for NIH HIV/AIDS prevention, treatment and cure research and subsequent approaches to research that are relevant to women, children, youth and families
 - g. Ensuring that Medicaid meets the care and treatment needs of people living with HIV and AIDS by defending the program against harmful cuts and advocating for policies that would expand Medicaid coverage before 2014
 - h. HIV/AIDS workforce development
 - i. Advocacy for reproductive justice for women
 - j. Examination and repeal of HIV criminalization laws, policies and practices