Addressing lack of access to primary care among women living with HIV

16% of women living with HIV were unable to access primary healthcare within the last 6 months.

These experiences doubled the likelihood of women living with HIV being unable to access primary care:
1. Gender minority identity*
2. Being born outside Canada
3. Contemplated/attempted suicide
4. Physical and/or sexual violence

*Trans, nonbinary, gender diverse, Two-Spirit

Calls to Action!

01. Integrate culturally responsive & culturally safe approaches within primary health care

02. Provide access to more integrated primary health care & HIV health services

03. Address transphobia & gender discrimination/stigma within primary & HIV health services

04. Increase knowledge & education about trans & Two-Spirit health needs within primary healthcare

05. Increase access to trauma-informed programs to address gender-based violence

06. Remove barriers to access for mental health services & counselling

Note: The SHAWNA Project's recruits participants who self-identify as women. However, recognizing gender fluidity, including over time, some participants have other or more gender identities. In addition to trans & cis women, ~2% of the cohort comprises of non-binary participants. Of Indigenous participants, ~13% are Two-Spirit.