



**Health and Legal Professionals Welcome HIV Policy Assessment Directive in Defense Bill**  
*Time for Department of Defense policies to reflect current science, say HIV physicians, nurses and advocates*

**For Immediate Release**

Contact:  
William McColl, (202) 595-4167  
WMcColl@aidsunited.org

*New York, December 23, 2013*— Members of the Positive Justice Project (PJP), a network of more than a hundred individuals and agencies representing people living with HIV in the U.S., issued statements today supporting the required report on the military's HIV and Hepatitis B policies that was included in the 2014 defense bill that President Obama is expected to sign shortly.

Section 572 of the nearly two thousand page-long National Defense Authorization Act of 2014 (NDAA), which approves spending for the military and national security, gives the Secretary of Defense 180 days to submit a report describing policies on the enlistment, commissioning, retention, deployment, discharge or disciplining of individuals with HIV or Hepatitis B, and an assessment of whether the policies “reflect an evidence-based, medically accurate understanding of how these conditions are contracted, how these conditions can be transmitted to other individuals, and the risk of transmission.”

Positive Justice Project member organizations urged the Secretary of Defense to take the report seriously.

“This is an essential step in helping to modernize and improve the military's response to HIV. A review and assessment of policies regarding members of the Armed Forces who are living with HIV will provide commanders, military lawyers and judges with current scientific information about how best to promote the health of military members while dismantling HIV-related stigma at odds with that goal,” said Ronald Johnson, Vice President of Policy and Advocacy for AIDS United. “We commend the Senate and House Armed Services Committees, Congressional leaders, and Representatives Ros-Lehtinen and Lee and Senator Coons for diligently prioritizing this issue.”

The directive – a bipartisan effort of Representatives Barbara Lee and Ileana Ros-Lehtinen – will require the Secretary of Defense to examine and justify two major aspects of military policy that have subjected people with HIV to negative treatment based on their health condition: automatic exclusion from enlistment, and from certain assignments for those who become infected after enlistment; and restrictions on consensual sexual relationships that can lead to prosecution and expulsion from service when violated.

Dr. Michael Horberg, a board member and former chair of the HIV Medicine Association and a member of the President's Advisory Council on HIV/AIDS (PACHA), hailed the defense bill's HIV directive. “The notion that people with HIV cannot enlist and serve in any aspect of the military, or that their health status warrants special “safe sex” orders or punishments for consensual sex, seems rooted in a 1980's understanding of HIV, and flies in the face of national efforts to get people with HIV tested and into treatment.”

“Bringing existing military policies on the treatment of people living with HIV into the twenty-first century is long-overdue,” said Catherine Hanssens, Executive Director at the Center for HIV Law and Policy (CHLP), which staffs and coordinates the Positive Justice Project. “For too long, qualified individuals have been refused

consideration for military service. And those who become HIV positive following enlistment are targeted with “safe sex” orders, prosecutions, discharge and imprisonment on the basis of gross misinformation about how HIV is transmitted and the scientific and everyday realities of living with HIV.”

Terrance Moore of the National Alliance of State and Territorial AIDS Directors, stated: “HIV criminalization can provide cover for lingering homophobic reactions to LGBT service members. Special penalties for otherwise legal conduct by those with HIV can reinforce stereotypes of LGBT people as predatory, dangerous and deviant. We need government agencies, including the Department of Defense, to show positive leadership against ugly stereotypes, and to lead through the example of rational policies.”

Carole Treston, RN, of the Association of Nurses in AIDS Care, added: “Nurses are in the business of counseling people with HIV, and part of that counseling is assuring those who are newly infected that they can lead a normal life that includes intimate relationships. It can be an uphill battle when government agencies are still telling people living with HIV that they are too dangerous to serve in the armed forces or too infectious to have a love life. That message is not just counterproductive; it’s cruel.”

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