



Atlanta WIHS

WIHS AT HOME AND ABROAD

BY DR. IGHO OFOTOKUN

Fall

My career as a doctor and a scientist has been focused on HIV and women's health and training the next generation of HIV and women's health researchers. My career was shaped by my experience as a young doctor in rural Nigeria at the height of the AIDS epidemic in the early 1990s. HIV care in Africa in those early days was limited to treatment with Bactrim for opportunistic infection. There was strong social stigma and life-saving medicines (HAART) were not available. Almost every patient died after being diagnosed with AIDS. Very few men wanted to know their status because of the stigma. Women, however, came for medical care because they wanted to live for their children, family, and community. Sadly, most of them died, leaving behind orphaned children. This early experience drew my interest and focus toward HIV medicine women's health.

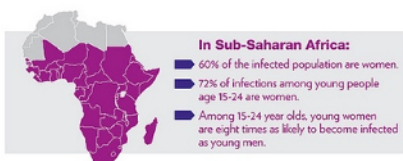
I completed my medical training over 15 years ago, and since then, I have worked mostly at Grady. As you know, in 2013, Atlanta and three other southern cities became part of WIHS when NIH decided to extend WIHS to the South because of the growing impact of the AIDS epidemic. WIHS enabled our team to assemble a group of selfless women who wanted to make a difference in the lives of other women affected by this epidemic (YOU!).



Dr. Igbo Ofotokun, WIHS Co-PI
Professor of Medicine
Emory University



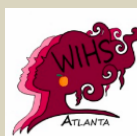
Women are more than half of all people living with HIV/AIDS worldwide.



It opened the door for researchers at Emory and across the country to study southern women either living with HIV or at risk of HIV infection. WIHS women together with women volunteering with research from all over the world are truly making a difference and changing the way we treat HIV infection in women.

I want you to know that we value your contributions and know that without your participation science would not move forward. We cannot put a price on the long hours you spend during research visits, the countless tubes of blood, the intrusive interviews, the invasive physical exams, bi-annual PAP smears, giving hair samples, and on and on. You are helping us find an end to this epidemic.

World-wide, more women than men are living with HIV infection. In Africa where the epidemic is most severe, 6 out of every 10 persons with HIV infection are women. The sad news is that we still see advanced cases of AIDS in Atlanta similar to what is seen in many African countries despite our advanced medical technology. We have a long way to go in making sure that every person at risk is tested and that all diagnosed cases of HIV are linked to care to receive life-saving medications. (continued on pg 3)



New and Ongoing Studies!

Currently Enrolling	Active but Done Enrolling, or Results Pending
WIHS FBRSCN: (1) WIHS participants only (2) Liver stiffness and fattiness	BLIR: (1) HIV+ men and women new to HIV treatment (2) Bone health
HC-HIV: (1) HIV- women willing to go on birth control (2) Effects of 3 types of birth control on genital tract	WIHS Core: (1) HIV+ & HIV- women (2) Lifelong study following progression of HIV in women
Project Neighborhood: (1) HIV+ men & women (2) Social & Environmental effects on linkage to care	WIHS CCSS: (1) WIHS participants only (2) Cervical cancer screening techniques
MIP: (1) HIV- women (2) Effects of Maraviroc & Truvada on genital tract	WIHS POPS: (1) WIHS participants only (2) Oral HPV
Microbiome: (1) HIV+ women (2) Effects of HIV drugs on good & bad vaginal bacteria	DTG: (1) HIV+ men & women on Dolutegravir (2) How well DTG gets into different parts of the body
WAVE: (1) WIHS participants only (2) HIV-related stigma & mental, immune, interpersonal health	Know Your Risk: (1) WIHS participants only (2) Knowledge of Anal Cancer
AMBI: (1) WIHS participants only (2) Assessment of Anal microbiome (good & bad bacteria)	Positive Influences: (1) WIHS participants only (2) Retainment in Care
AGING BONE: (1) HIV+ or HIV- men & women (2) Bone health and function	ANCAR- WIHS: (1) WIHS participants only (2) Anal cancer risk assessment and screening techniques
GTP: (1) WIHS participants only (2) Relationship between biology, environment & trauma and PTSD	
DRL: (1) HIV+ virally suppressed WIHS participants (2) Defining reservoir localization	

NEW STUDY! ANCHOR

The purpose of this study is to determine whether treating abnormal cells in the anus is effective in reducing the incidence of anal cancer in HIV-infected men and women. While deaths from AIDS are way down, anal cancer among people living with HIV is on the rise. We think that anal cancer can be prevented by routine screening and removal of precancerous cells. This strategy has reduced cervical cancer rates by 80%. But to get the insurance companies to cover routine anal cancer screening and preventative treatment, we need to prove that this strategy actually prevents cancer. We will recruit people with High Grade Squamous Intraepithelial Lesions (or HSIL for short) and assign them randomly to a treatment arm or a monitoring arm. This study will also help us learn a lot about HPV and other risk factors and why these sometimes cause cancer.

Who is Eligible?

(1) HIV+, all genders welcome, (2) 35 years or older, (3) Have biopsy proven HSIL, (4) Never had HPV vaccine, (5) Please call for more specifics

What do study visits look like?

(1) short physical, (2) blood draw, (3) urine pregnancy test (women), (4) anal swabs, (5) digital anorectal exam, (6) anal biopsies, (7) visits every 6mo for 5-8years

Compensation?

\$100 for most visits

Who should I contact if interested?

Aubrey Cyphert at 404-251-8931



Elton John and Prince Harry spoke about stigma and discrimination.



Atlanta Scientists in Durban (From Left): Drs. Carlos del Rio, Neale Weitzmann, Renee Donahue, Lisa Haddad, Ameeta Kalokhe, and Igbo Ofotokun.

WIHS AT HOME AND ABROAD (CONTINUED FROM PG 1)

Women are increasingly contributing to HIV research and that was very clear at this summer's World AIDS Conference held in Durban, South Africa. Below, I have highlighted the findings from four research areas in which women (particularly those in WIHS) contributed:

HIV medicine used for PrEP (pre-exposure prophylaxis) gets into the vagina better in some women: Our own Dr. Renee Donahue Carlson (former Emory Fellow) showed in her study that certain HIV medications get into the vagina better based on the type of microbiome (bacteria) in the vagina. See more on page 5.

No wonder more women in Africa have HIV infection: Another research group in KwaZulu Natal, South Africa showed that certain type of microbiome (bacteria) in the vagina make some women acquire HIV infection easily. They also showed that a type of microbiome can breakdown PrEP medication in the vagina and make it less active and effective. Women with this type of microbiome did not have good protection with a PrEP gel that was applied before sex. These studies are beginning to help us understand why PrEP does not work as well for women as it does for men. More studies will be needed to verify these interesting findings.

Food insecurity – lack of enough food – is bad for CD4 and viral loads: The San Francisco WIHS group has been studying food insecurity in WIHS women for many years. They found that four out of every 10 WIHS women do not have consistent access to enough food. What is interesting about this study is that even if a woman takes her HIV medication regularly and consistently, if she is food insecure, she is more likely to have a higher viral load and lower CD4 counts. The bottom

line is that ALL HIV-infected women need access to good nutrition for their health.

You think your bone is strong – think again: HIV chews up the bone, and so does treatment with HAART. That is why people living with HIV have weak bone (osteoporosis) and fracture their bone easily. Our team is working hard to figure out how to repair this broken bone protection system. Learn more on pg 6.

We will continue to keep you updated about WIHS through this newsletter and other means. We have been fortunate to have a highly motivated group of women in the Atlanta WIHS. We continue to enjoy our interactions with each and every one of you. You are all partners in our effort to improve health for women living with HIV infection. Working together, I believe we shall bring this devastating epidemic to an end.



African HIV nurses in Durban, South Africa



AIDS 2016: WIHS Scientists Travel to Durban, South Africa



This summer, scientists and others from across the world gathered in South Africa to discuss putting an end to HIV at the International AIDS Conference. Atlanta scientists joined, along with policy makers and passionate persons living with HIV. The goal of the meeting was to discuss new research and what steps to take in the future to fight HIV.

In the first few pages of this newsletter, Dr. Ofotokun spoke about some of the research that was presented at the conference. We'd like to share more of this research with you in the next few pages. First, you will hear about Dr. Carlos del Rio's experience at AIDS 2016. Dr. del Rio is Chair of the Department of Global Health and co-Director of CFAR at Emory University.

Dr. Carlos del Rio: What's New? What's Next? What's Ahead?

At the close of AIDS 2016, Dr. Carlos del Rio summed up the status of the response to HIV/AIDS and the challenges ahead in a talk called "What's new? What's next? What's ahead?". In the talk Dr. del Rio reminded the audience of the huge increase in use of antiretroviral therapy (ART) with now over **17 million people** globally on ART. In fact, when the same conference met in Durban in 2000 there were only about 10,000 people on ART in Sub-Saharan Africa; 16 years later there are over 12 million. As a result AIDS-related deaths dropped by almost half since its peak in 2005 and

new infections have decreased by 35% over the past decade. There have also been major breakthroughs in science that have changed care and prevention:

- (1) We now know that treatment is prevention.
- (2) Treatment is necessary for everyone who is infected with HIV.
- (3) Giving HIV- people ARTs to prevent HIV, Pre-exposure Prophylaxis (PrEP), works.

Not surprisingly ARTs have become the core of the public health response to HIV, which has helped blur the separation of prevention and care. This has important implications for many diseases. (cont. p 5)



DR. CARLOS DEL RIO: WHAT'S NEW? WHAT'S NEXT? WHAT'S AHEAD? (CONT. FROM PG 4)

What we need to do next is clear: **we need to get more people diagnosed and on therapy, and we need to increase prevention efforts.** This has to be done quickly for the best result. In Sub-Saharan Africa, more young people are entering their sexually active years than ever before. As a result, there is an increase in the number of adolescents that urgently need prevention and care services. **We need to make youth programs a priority.**

In much of the world, the next decade of the AIDS epidemic looks a lot like the first decade with gay and bisexual men most at risk. **We have ignored the needs of MSMs in most of the of the world for far too long and that has been a costly mistake.**

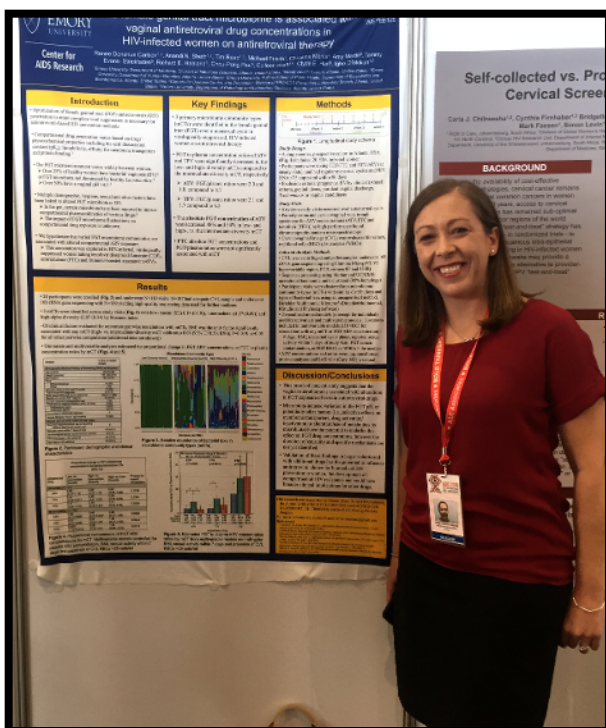
PrEP works and needs to be used more, but we need to pay attention to making them work well in woman and young people. While they are the populations most at risk, they have not benefited as much and the drugs have not worked as well as in men. Better drugs and newer strategies are urgently needed.

"Ending AIDS by 2030," can we do it? Can we treat our way out of the epidemic? In my mind at this point the answer is clearly no. The science is there, but the resources are not. We have weak healthcare systems that

fail to link patients to care, fail to keep them in care, and do a bad job getting and keeping patients virologically suppressed. **We need to better understand how to keep people in care, or the Health Care Continuum.** Strategies like care based on a person's specific and individual needs, money as incentive, home self-testing, couples counseling and testing, care that focuses on multiple diseases, and quicker start of ART are some that are currently being studied.

If we are to do all of this, we will also need more resources. We need more **money** to make these things happen. Tuberculosis also needs attention and funding. As Nelson Mandela said, **"We can't fight AIDS unless we do much more to fight TB as well"**. Substance abuse is contributing to the epidemic, and access to **substance use treatment** is simply not available. We also need to **end stigma**. If we don't make ZERO stigma and discrimination a reality, we will not End AIDS.

In closing Dr. del Rio urged the audience to keep talking about and promoting the fact that HIV/AIDS is still a major health problem globally and that if we put more effort in we can make a big difference. Be passionate, be angry, don't accept the status quo!



DR. RENEE DONAHUE

"I presented my research at the International AIDS Conference, "AIDS 2016", in Durban, South Africa in July, 2016. This research was a collaboration of multiple WIHS investigators including my mentors, Dr. Igho Ofotokun and Dr. Anandi Sheth. The goal of this study was to determine if the bacterial community (called the microbiome) that normally lives in women's vaginas could affect the amount of HIV antiretroviral drugs that get into the vagina. We evaluated the vaginal levels of the HIV drugs tenofovir, emtricitabine and atazanavir and found that the levels were affected by some microbiome communities for tenofovir and atazanavir in particular. Since women can have very different types of bacteria, these findings could be important for choosing the best HIV antiretroviral drugs to help prevent women from getting HIV or from transmitting it to their partners. Further research is needed to confirm these findings, and many WIHS women kindly volunteered to be in the 'WIHS Microbiome Study' during 2015-2016. We are currently working on analyzing the results from that study. Thank you WIHS women for your contributions to improving HIV science!"

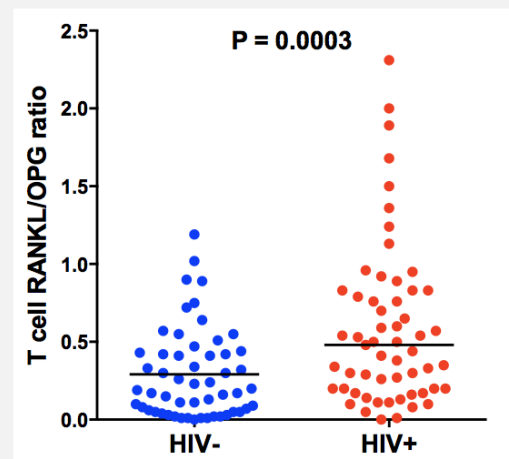
DRS. NEALE WEITZMANN & KEHMIA TITANJI

Our bones are constantly being broken down and built back up again. Osteoclasts are the cells that break down bone and are necessary for bone re-generation. However, in HIV infection too many osteoclasts are made, which leads to an increased rate of bone loss. Antiretroviral therapy (ART) often makes this situation worse. This can lead to osteoporosis and bone fractures. Osteoclasts are directed by two proteins, RANKL (responsible for osteoclast creation and thus bone loss), and osteoprotegerin (OPG) which prevents osteoclast creation and protects the skeleton from bone breakdown. HIV-infection targets B cells (immune cells) and changes how they normally function. This causes B cells to produce unusually high batches of RANKL and unusually low batches of OPG. Therefore, HIV-infection leads to bone breakdown.

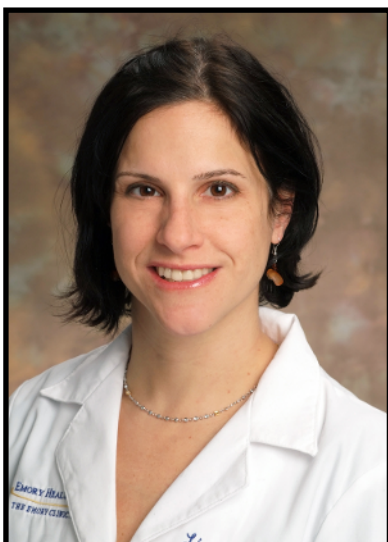
In this study we looked at T cells (immune cells), another key target of HIV. We know that T cells also make more RANKL with HIV-infection. T cells were not known to be an important source of OPG. Our results show, however, we now show that T cells do in fact contribute to the total pool of OPG in the body. HIV-infection they too make

less OPG than uninfected T cells! The final ratio of RANKL to that of OPG is thus overall higher in many patients (Figure) and this likely contributes to the osteoclast imbalance and thus bone loss associated with HIV infection. Understanding how changes in immune cells lead to changes in bone breakdown may help us to find future drugs to combat bone loss and fracture in HIV infection.

Increased T cell RANKL/OPG ratio in HIV infection



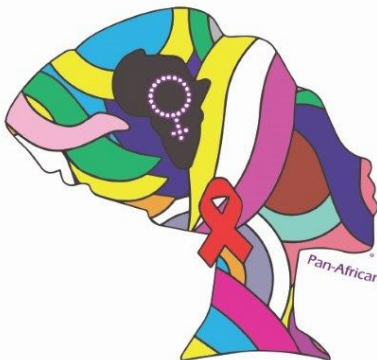
WIHS IN DURBAN: DR. LISA HADDAD



I wanted to look at the pregnancies among women enrolled in WIHS. Of the 4214 women in WIHS, 1750 HIV+ and 664 HIV- women met our eligibility criteria. We saw that HIV+ women between 1994–2001 had fewer pregnancies and successful births than HIV- women. This was before ARTs were used often. However, between 2002–2012 there were no big differences in the number of pregnancies and births between HIV+ and HIV- women. Our research suggests that ARTs played a big role in allowing pregnancies and healthy births among HIV+ women. We also saw that abortion rates haven't changed over time, which suggests we may need focus energy on decreasing unintended pregnancies among all women – HIV-infected and uninfected.



Atlanta Women Represented in Durban



Women NOW! 2016
Pan-African Women's HIV, Sexual and Reproductive Health & Justice Summit



by Damaris Henderson of SisterLove

Throughout July, members of the SisterLove staff were in Durban, South Africa to attend the International AIDS Conference – a global convening where thousands gather once every two years. It was the ninth International AIDS Conference since 2000 and the second in Durban. Most importantly, it was the first conference to have a strong focus on women and girls, human rights, and the role of stigma, gender based violence, racism, transphobia, homophobia, and other social determinants of health in the perpetu-

ation of the HIV epidemic on a global scale.

In the days prior to the International AIDS conference, SisterLove and Positive Women's Network– South Africa convened WomenNOW! 2016 – the first ever pan- African women and girls pre-conference to focus on the HIV epidemic in the context of sexual and reproductive health and rights. WomenNOW! participants represented several different nations, with the largest contingent coming from South Africa, and also including representatives

from Kenya, Zimbabwe, Uganda, Haiti, the U.S. and others. Women–NOW! was a remarkably intimate departure from typical conferences, marked by a supportive and nurturing environment for honest discussion, and a unique, open forum for participants to bring forward issues, experiences and solutions related to HIV, sexuality, and reproduction. There is hope that the pre-conference will become a continued tradition for as long as there continues to be a need for the International AIDS Conference.



MORE ON: WOMEN NOW! 2016, Pan-African Women's Summit on HIV, Sexual & Reproductive Health & Justice

By Linda Felix

Linda Felix is a community advocate and serves on several boards within the Emory/Grady Community, include the [WIHS CAB](#). She is also a member of the Sister Love 20/20 Leading Women's Society.

"In July, I was one of over 250 women of color who traveled to Durban to participate in SisterLove's Women Now! 2016. Women Now! served as a pre-conference to AIDS 2016 with the goal to create a platform that addressed the needs of women of color. We want to assure that research, services, and initiatives are directed towards women, because women carry the greatest burden of this disease."

"Durban is the second largest city in South Africa. It's a beautiful city with public parks, shopping centers, flea markets, and a few tall buildings. Representatives from Canada to Zimbabwe came to Durban for the Women Now! pre-conference. Wonderfully, I was awarded a complete scholarship from SisterLove, Inc. Atlanta, which allowed me to participate in this event. SisterLove is our community partner here in the Atlanta (WIHS)."

"We had a very busy agenda for three days. Opening day was filled with presentations that pointed out major research results. We networked and held a dedication ceremony. Our working sessions began on day two. We were addressed by United States Ambassador and Global AIDS Coordinator, Deborah Birx. Amb. Birx oversees the implementation of the U.S. President's Emergency Plan for AIDS Relief (PEPFAR). We learned that under President Obama, PEPFAR is focused on breaking the "cycle of infection." There is a new focus on young women, because new infections have decreased by less than 15%, while the "at risk population" (young women) is seeing double the infections. Alarming, less than 20% of men 20 years and older have been tested. This speaks to the need for women to have ways and means to protect and provide for themselves. With all of our cultural differences, women everywhere seek to be valued. Women want to be educated. Women who were taught not to ask questions or have an opinion refuse to be quiet and overlooked anymore."



I want the WIHS participants to appreciate how much we as women have to offer and how valuable and important you are in assuring the voices and concerns of women are addressed. We have a voice at the table at every level from the women researchers to the women participants. Unlike far too many countries in the world, we have the ability to shape the direction of research and how that research will serve our greater community.

The trip was a wonderful experience. In addition to participating in Women Now! I was part of a mission trip to deliver over 250 toothbrushes to the ZAZI campaign. ZAZI is a South African organization supporting sexual rights, education, and HIV prevention for girls and women 15–24 years old. I also had the opportunity to see a little of the Middle East from the air, and while in Qatar, I saw the most beautiful Hijabs, the full length black covering worn by women. I will also say that I felt very safe and secure. I only wish I had a few extra days to see more of South Africa. To our WIHS women I say thank you for your participation. We learn from one another and we rise together.



RETENTION EVENTS

BACK-TO-SCHOOL BBQ

By Nikia D. Braxton, MPH

As August arrived, Atlanta and its surrounding geared up to start another school year!!! Your WIHS family knows that it's sometimes hard to get our young scholars ready for learning, so we gathered donations from loving extended WIHS family members, faith institutions, and your local Emory WIHS Team to equip our scholars with backpacks and a few school supplies to start the year out right! Through the blazing summer heat, heavy scattered storms, and thirsty mosquitoes we managed to fully enjoy an old school backyard BBQ with over 75 beautiful WIHS family members in

attendance. Many thanks to all that supported this event and to all those that were in attendance. WIHS is a sisterhood of families united to make a difference, and the Emory staff honors you for joining us on this magnificently empowering journey, we lovingly know as WIHS.

We want our retention events to be fun and engaging for you. If you enjoyed this event or would enjoy more events like it down the road, please let our staff know! If you have ideas for other types of events you would like to attend, please send your ideas to WIHS@emory.edu, or tell the interviewer at your next WIHS visit.



WIHS FRIENDS AND FAMILY



This summer we welcomed two new additions to our WIHS family! You may have met our wonderful Dr. Cecile Lahiri (pictured Left) at an IDP clinic visit or one of her HIV reservoir (anoscopy, lumbar puncture) study visits. Dr. Lahiri is an assistant professor in Emory's School of Medicine. On June 27th she gave birth to little Elise, a 6lbs 8oz and 20-incher with a full head of hair.

Just about a month later, the lovely Dr. Jessica Wells, RN (pictured Right) gave birth to tiny Olivia, weighing in at 6lb 11oz and 18in long. Some of you may know Dr. Wells from our anal cancer studies. She is a research assistant professor in Emory's School of Nursing. We are so excited for these two and their new adventure!

FOOD FOR FOOTBALL AND COOL NIGHTS!

Buffalo Chicken Thighs

contributed from Cooking Light

Preheat oven to 375°

Ingredients: 6 tbsp all-purpose flour *** 1/2 tsp salt *** 1/4 tsp garlic powder *** 1/4 tsp ground red pepper *** 8 bone-in chicken thighs, skinned *** 1tbsp olive oil, divided *** 3 tbsp hot sauce *** 1tbsp butter



Combine first 4 ingredients in a heavy-duty zip-top plastic bag; seal. Shake to blend. Add half of chicken to bag; seal. Shake to coat. Remove chicken from bag, shaking to remove excess flour mixture. Heat a large nonstick skillet over medium-high heat. Add 1 1/2 teaspoons oil to pan; swirl to coat. Add flour-coated chicken to pan; sauté 4 minutes on each side or until browned. Transfer browned chicken to a jelly-roll pan. Repeat procedure with the remaining uncooked chicken, flour mixture, and oil. Discard remaining flour mixture. Bake chicken at 375° for 8 minutes or until done.

Combine hot sauce and butter in a microwave-safe dish; microwave at HIGH for 30 seconds or until butter melts, stirring to blend. Place chicken in a shallow dish; drizzle with butter sauce. Toss to coat.



September-November 2016 Community Events

Contributed by: Leah Powell

Music at Centennial Olympic Park

Wednesday Wind Down (May–September): Each Wednesday evening from 5:30 to 8 p.m., with performances varying from jazz to reggae.

Music at Noon (May – October): Every Tuesday and Thursday from noon to 1 p.m. Features a variety of live music including R&B, jazz and reggae.

Tot Spot at Atlantic Station

(April 5, 2016 – Sept. 27, 2016)

Location: Atlantic Station, 1380 Atlantic Drive NW, Atlanta, GA 30363 Phone: 404-410-4010

Each Tuesday morning, Atlantic Station's Central Park transforms into every child's dream play-

ground! From 10:00 a.m. to noon, tots can enjoy games, storytelling, toys, music and some very special guests.

Wellness Wednesday at Atlantic Station (4/6/2016 – 9/28/2016)

Location: Atlantic Station, 1380 Atlantic Station Drive NW, Atlanta, GA 30363 Phone: 404-410-4010

Each Wednesday from 6:30 p.m. to 7:30 p.m., Atlantic Station's Central Park becomes the perfect place to find tranquility of the mind and body while instructors lead guests through exercises including core fusion, yoga and more. Wellness Wednesday welcomes all ages and skill levels.

Flicks on the Bricks

Through 10/21/2016

Location: Duluth Town Green Venue: 3167 Main Street, Duluth, GA 30096; Phone: 770-476-3434

Come on down to Duluth and enjoy a free movie on us. Flicks on the Bricks presents a movie on the 1st & 3rd Friday of the month. Movie starts at Dusk. Check the site for the movie lineup.

Green Market in Piedmont Park

March 19, 2016 – Dec 10, 2016

Saturday farmers' market features fresh produce, meat, and eggs from local Atlanta growers, along with breakfast, brunch, and a variety of treats. Free chef demonstrations, live music, and children's programs keep you tapping your toes.



Atlanta Historic Downtown Architecture Tour

Through 12/31/2017

Take an audio tour of Atlanta's historic downtown right on your smartphone. Download the free Geotourist app on iTunes or Google Play app stores to access the tour. Created for the Atlanta Chapter of the American Institute of Architects, the audio tour starts at the Candler Building on 127 Peachtree St. and continues south along Woodruff Park. Included in the tour are the Flatiron Building, which predates the one in New York City; the Hurt Building, one of Atlanta's earliest skyscrapers; and the Fairlie-Poplar Historic District, with many buildings placed in the National Register of Historic Places.

Discounts at the Center or Puppetry Arts

1404 Spring Street NW, Atlanta, GA 30309

The Center for Puppetry Arts is free to Fulton County residents on the **first Saturday** of every month.

Discounts at the High Museum of Art

1280 Peachtree St. NE, Atlanta, GA 30309

Walk-up admission to the High Museum of Art is free for Fulton County residents on the **first Saturday** of each month. Tickets are subject to availability and must be picked up by 1 p.m. Fulton County residents may view the High Museum's current exhibitions as well as the permanent collection. Current exhibition admission is subject to availability. Bank of America and Merrill Lynch cardholders also receive free admission on the first Saturday and Sunday of each month.

World of Coca-Cola

121 Baker St. NW, Atlanta, GA 30313

Members of the Armed Forces (active duty, reserves and retirees) receive free admission to the World of Coca-Cola year-round. Simply present your Armed Forces ID card at a World of Coca-Cola ticket window.

Explore the Sweet Auburn District

1 mile southeast of Peachtree Street

Discover Atlanta's civil rights history in the Sweet Auburn neighborhood. From the birth home of Martin Luther King Jr., to the Sweet

Auburn Curb Market, guests and locals alike can spend a full day exploring this historic area. Available daily.



Martin Luther King Jr. National Historic Site

449 Auburn Ave. NE, Atlanta, GA 30312

The National Historic Site includes year-round tours of Dr. King's birth home, the church where his father preached – Ebenezer Baptist Church – his and wife Coretta Scott King's final resting places, the International Civil Rights Walk of Fame and the Visitor Center exhibiting civil rights memorabilia. Located on the same block, and also with free admission, is the The King Center where you can see the Martin Luther King, Jr.'s Nobel Peace Prize on display. Available daily.





News from our Community Partner, SisterLove, Inc. HIV Criminalization

SisterLove is an organizational member and core organizer of the Georgia Coalition to End HIV Criminalization, a group that evolved from the HIV Criminalization Working Group, in order to promote reform and modernization of Georgia's discriminatory laws. The current laws increase HIV stigma, put people living with HIV in vulnerable and potentially violent situations, and discourage many from getting tested. The Coalition aims to mobilize communities in Georgia to build a movement for HIV decriminalization, with meaningful involvement of people living with HIV, as well as advocates from a wide range of social justice fields, health care providers, policy makers, and other stakeholders.

If you are interested in joining the Coalition or attending our monthly meetings in Atlanta, please contact SisterLove Policy and Advocacy Manager, Mel Medalle (mmedalle@sisterlove.org) or SisterLove HIV Prevention Specialist, Damaris Henderson (dhenderson@sisterlove.org).



SisterLove, Inc.

7th Annual 2020 Leading Women's Awards

Friday, October 14, 2016
at the Georgia Freight Depot!

Each year, SisterLove honors 20 HIV+ women from around the country who have been living positive for 20 years or more. This community-oriented honors ceremony celebrates our belief that these women possess the rare hindsight and foresight to help to eradicate the HIV and AIDS pandemics through their outstanding leadership and dedication. For more information and tickets please check out: <http://www.sisterlove.org/2020-leadership-society/2020-red-carpet-event/>

Hello WIHS Women! This newsletter is for you. Tell us what you think.

WIHS Atlanta
341 Ponce de Leon Ave NE
Atlanta, GA 30308
(404) 616-6150
WIHS@EMORY.EDU

- What do you want to read about?
- What questions do you have for the CAB, our docs, or our study staff?
- Ever wondered how you can get those questions answered?

You can email us at WIHS@emory.edu. Then, in the next newsletter we can have articles about what you want to see! In the next newsletter we want to do a piece on our WIHS women. Please email us and let us know:

Why did you join WIHS? We know all of you have inspiring personal stories. If you think your story could help or inspire another WIHS woman reading this newsletter, we would like to hear from you!

