HIV-Positive Women Face Unique Challenges

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It's a common pattern among women living with HIV: They prioritize taking care of their families, sometimes at the expense of their own health.

Kimberly Snyder, who oversees the case managers at Alder Health Services in Harrisburg, Pennsylvania, says of their HIV-positive female clients, "They won't go to their [physician] follow-ups because their kid is sick and they have to get them to that doctor's appointment. Or somebody needs to go to school, or the house needs cleaning, or dinner needs to be made."

Part of Snyder's job is to work with such women to help them understand that their own health and well-being should also be a priority, "because if they're not healthy, they can't take care of the kids or the family," she says.

Lisa Johnson-Lett, 43, tested positive for the virus in 1995 but only recently started treatment, in part because of a longstanding fear of medication side effects. Plus, as she puts it, she "was in a state of denial" about her HIV status. In the end, her daughter was instrumental in convincing her to take antiretrovirals. "'Listen, Mom,'" Johnson-Lett, who lives in Piedmont, Alabama, recalls her daughter saying, "'you might be scared to take the medicine. But at the end of the day, whether you die of a heart attack or kidney failure because of the medicine, that's better than dying [much sooner] because you weren't taking the medicine and dying of AIDS.'"

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