Protecting Sexual and Reproductive Rights for People With HIV After Roe v. Wade Ends

People living with HIV have much at stake after the overturning of *Roe v. Wade*.

September 26, 2022 By Alicia Green

The morning of June 24 started off like any other for Marsha Jones. That is, until the devastating news broke that the Supreme Court had overturned Roe v. Wade. After almost 50 years, the 1973 landmark case that established women's constitutional right to an abortion had been reversed by the decision in Dobbs v. Jackson Women's Health Organization. States each now had the power to establish their own laws to protect, restrict or ban abortion.

"I was really upset," says Jones, the executive director of The Afiya Center (TAC), a reproductive justice organization dedicated to Black women and girls in Dallas. "My feelings about this are centered around the most vulnerable folk who are going to be harmed the most and what happens next."

As news of the court's decision spread across the country, advocates like Jones wondered what this ruling would mean for marginalized communities.

"We tend to forget about people who are living with HIV, as if pleasurable sex that can sometimes lead to an unintended pregnancy doesn't exist for [this community]," Jones says. "And then we totally forget about the fact that everybody who has a womb does not identify as a woman."

Jones adds, "In Texas, they criminalize HIV as assault with a deadly weapon." She explains that this can put a pregnant person with HIV at risk, especially if they're seeking an abortion and their complete medical records become accessible. [Editor's note—From The Center for HIV Law and Policy: "Despite the fact that Texas does not have a criminal statute addressing HIV exposure or transmission, people living with HIV have been prosecuted for HIV exposure under general criminal laws, including attempted murder and aggravated assault."]

"There's going to be an assumption that sex happened because a person is pregnant," she says. "So that person can be criminalized right there on the spot for HIV exposure. I haven't seen it happen yet, but this is something that could very well happen."

Naina Khanna, co-executive director of Positive Women's Network–USA, which supports women living with HIV, blames the lack of such protections for people with the virus on stigma, discrimination and provider bias. "People with HIV who can get pregnant may already have difficulties talking to their providers about their sex lives," she explains. "Their providers and clinicians might be judgmental about sexuality."

Data show that people living with HIV are not adequately counseled about pregnancy, fertility or contraception, Khanna says. In addition, she notes that people living with HIV have disproportionately low incomes, which further impedes their access to birth control and emergency contraception. Such barriers increase the risk for pregnancy among those living with HIV.

"Not having the right to abortion also increases the risk of criminalization for people with HIV who can get pregnant," Khanna says. While a person with HIV could be criminalized for seeking or having an abortion, they could also be punished for having a baby, she explains.

"We have laws that criminalize people living with HIV in more than two dozen states," Khanna says. "And those laws can extend to breastfeeding and chest-feeding as well. There have been situations of people living with HIV who breastfeed or chest-feed who have been threatened with having their kids taken away from them and other types of things."

According to the Center for HIV Law and Policy, 30 states have HIV-specific laws or general felony laws.

Advocates believe that the overruling of Roe v. Wade will also exacerbate HIV stigma.

"We're going to force people back into not talking about the conditions they're living with and to live in isolation," TAC's Jones says. "We know when people live in isolation, it increases health disparities and negative health outcomes."

According to Khanna, surveillance registries that track pregnancies are another cause for concern.

"We need to be really mindful of what the vulnerabilities of those kinds of surveillance systems could be," she says. "Providers could be subpoenaed in any situation to provide information about whether a patient or client has been pregnant in the past in a state that criminalizes abortion."

Khanna advises people to be careful about what they share via social media and even to think twice about using apps that track menstrual cycles.

"We're going to create a whole new level of stigma," Jones says. "[For people with HIV], the only difference is the stigma's going to be different."

The fall of Roe v. Wade will also mean a loss of access to certain health care for people at risk for and those living with HIV. For instance, although Planned Parenthood may be best known for providing abortion access across the United States, the organization also offers HIV prevention, treatment and support services. And it's only one of a few groups that address multiple health

needs within their communities.

“When your Planned Parenthood starts losing money, they’re going to take that money from services like HIV,” Jones explains. “There will be a certain level of service that they’re not able to provide anymore.”

Krista Martel agrees. She is the executive director of The Well Project, an HIV organization focused on women and girls at risk for and living with the virus. She worries about the clinics that will get shut down because they offer abortion services and how that will affect people with HIV.

“It may curb HIV testing and giving [people] better access to pre-exposure prophylaxis [PrEP] and regular preventative wellness checkups,” Martel says. “It’s very possible that there are going to be even higher rates of HIV transmission.”

The impact could be more devastating for residents of rural communities, where services are sometimes lacking or nonexistent. In many cases, those living in rural areas drive hours to see providers, have prescriptions filled and receive other services, including abortions.

“When services start being cut at the top, you are going to feel it the hardest at the bottom,” Jones explains. “And if you are losing services, for whatever reason, in the metro areas, you are going to feel it the worst in the rural areas.”

Immigrants, LGBTQ people, young people, low-income people and Black women are some of the additional communities likely to be heavily impacted by the reversal of Roe v. Wade. These groups also tend to have higher HIV rates.

According to Khanna, the Trump administration severely compromised the overall health of immigrants. Clinics have reported that fewer immigrants are accessing services in states with large immigrant populations.

Many immigrants fear being apprehended by Immigration and Customs Enforcement and then deported, a risk they also face if they seek or have an abortion in states where it is illegal.

“It’s very risky and dangerous,” Khanna says. “It could be dangerous for your whole family and your livelihood. But it’s also even dangerous to access contraception. It can also place you in harm’s way for deportation.”

For LGBTQ people, Roe’s reversal threatens basic rights that this community worked long to achieve. Experts are concerned because the right to intimate same-sex relationships (Lawrence v. Texas), for example, as well as the right to same-sex marriages (Obergefell v. Hodges) were protected on the basis of the right to privacy, which was the foundation for the right to an abortion established by the decision in Roe v. Wade.

Supreme Court Justice Clarence Thomas has called for the reconsideration of gay rights following the overruling of Roe. His comments have further energized anti-LGBTQ individuals and groups to

continue their attacks on this community through enacting discriminatory policies. According to the Human Rights Campaign, more than 300 anti-LGBTQ bills have been introduced this year, more than 130 of which target trans people.

“We all have a stake in this fight,” says Tiommi Luckett, an organizer at the Transgender Law Center, a national trans-led organization. “Bodily autonomy and agency are under attack. As certain politicians continue to push an agenda, it will continue to leave all of us at risk.”

Luckett adds that the LGBTQ community and people living with HIV have endured decades of medical discrimination and a lack of autonomy. She says the overturning of Roe v. Wade will have far-reaching implications for people who need access to medication and treatment that conservative courts no longer support them receiving.

But Luckett believes community will continue to be the bridge that connects people who are denied lifesaving treatment to services and resources. “We’ve always taken care of each other,” she says. “That still holds true today as the fight continues.”

Advocates argue that Roe’s overturning will disproportionately affect Black women. According to the Centers for Disease Control and Prevention, Black women are nearly four times more likely to have an abortion than white women. Forcing this population to carry unwanted pregnancies could have deadly consequences.

That’s because Black women are also more than three times as likely to die of pregnancy-related complications than their white counterparts. One study found that banning abortion nationwide could lead to a 21% increase in pregnancy-related deaths overall. For Black women, there would be a 33% increase in death.

“Black women experience a lot of discrimination within the health care system,” Khanna says. “That can include dismissive treatment, stereotypes and not paying attention to conditions that disproportionately impact [them]. All of this contributes to medical mistrust, which is also a reason that Black women may not access contraception.”

HIV rates are also higher among Black women than women of other racial groups. These rates are especially high in the South, where abortion laws are stricter. That’s why advocates are working to ensure that all these women have the support they need.

TAC’s Jones says the group will continue to assist Black women living with HIV, those seeking abortions and those who are forced to carry pregnancies.

“We’re prepared to serve them no matter how things look as we fight to get people’s rights back and to have access to the full spectrum of reproductive health care,” Jones says. “We will meet you right wherever you are.”

Jones wants people to be aware that although abortion may be illegal in some states, it is still legal in others. “So call the numbers and get the information and resources you need to make the

decision that’s best for you,” she says.

Despite the current state of abortion rights across the United States, advocates have not given up the fight. They’ve organized and marched. They are making sure the voices of those most affected are heard on the state and federal level. But the fight is not theirs alone—everyone has a stake in this battle.

Khanna says it’s a fight for humanity and dignity. She is calling on folks to protect abortion access by voting in November.

“Abortion is on your ballot whether you know that or not,” Khanna explains. “There are candidates on your ballot that stand either to protect abortion or not to protect it. And I can guarantee you that those candidates who will not protect abortion access also will not protect trans rights and LGBTQ communities. We have to send a clear signal in November with our votes.”

Martel also encourages people to vote to dismantle the systems that want to limit bodily autonomy. She wants people to pressure elected officials to fight against the Supreme Court’s attacks on human rights. But, most important, Martel doesn’t want people to lose hope.

It is imperative that people know that there are organizations and health care providers out there that care deeply about this, she explains. They can provide support for those who need it. In cases where they may not be able to help, they will work to find someone who can.

“You are not alone,” she says. “There are people out there who will fight for you. Sometimes, it does feel overwhelming, but I’m confident that we are going to be able to fight this and get to a better place than we were before.”

© 2026 Smart + Strong All Rights Reserved.
http://beta.docker.poz.com/article/protecting-sexual-reproductive-rights-hiv-roe-wade-abortion