



THE AHA CENTRE

NEWSLETTER • FEBRUARY 2019

Happy New Year!

It is a new year and 2019 began with re-newed energy and challenges. While AHA Centre operations and staff looked forward to starting the year on solid footing, we were faced with an unexpected change in CAAN's upper management. A shift in leadership has the AHA Centre's co-director, Renée Masching, stepping in as Acting CEO of CAAN. Official statements from CAAN regarding this change can be found on our website's homepage at ahacentre.ca.

We would like to take a moment to thank all of you – our members, partners, colleagues and friends – for your continued support.

The Mobilising CAAN's Research Team Meeting

The AHA Centre participated in a meeting that brought partners from across many of CAAN's research projects together in February. The goal of this meeting was to plan for a Project Scheme Grant application to CIHR fall 2019. This was an opportunity for us to take inventory of CAAN's KT outputs over the past twenty years, and also assess what needs to be put in place if we are to effectively share research findings and lessons learned over the course of CAAN's rich and diverse research history.

Call for Papers: Journal of Indigenous HIV Research (JIHR):

We are currently accepting papers for Volume 10 of the JIHR. The submission deadline is April 1, 2019.

Articles must fall under one or more of the following headings:

- **Indigenous community-based HIV and AIDS research development and findings:** Quantitative, qualitative, or mixed methods research that is community-engaged throughout. We welcome papers that speak to any stage of the research process, including research development, design, data collection and analysis processes and findings
- **Emerging Issues in Community-based HIV and AIDS Research with Indigenous communities:** These articles focus on ground-breaking issues, the application of ethics protocol such as the TCPS 2, OCAP™ (Ownership, Control, Access and Possession), the Principles of Métis Health Research, Inuit Qaujimanituqangit (IQ) and/or other locally enforced protocols that are grounded in CBR in the Indigenous community in Canada.
- **Student work:** Students can submit articles (term papers, thesis, etc.) that focus on HIV and the expanded mandate in Indigenous communities.
- **Commentary:** Opinion pieces which speak to trends in Indigenous community-based research, Knowledge Translation or other

issues of importance to Indigenous stakeholders.

- **Stories:** Personal accounts of experiences related to HIV or accounts of successful and innovative approaches that address HIV in Indigenous communities.
- **International work that includes an Indigenous Canadian component:** Articles written for an international audience about Indigenous peoples, HIV and AIDS and/or related issues. Articles must include a Canadian component.

Community Engagement Fund: Call for Applications

Deadline to apply: May 3, 2019
Up to \$10 000 available per call

Purpose:

- To assist Indigenous communities, Indigenous AIDS Service Organizations, and/or Indigenous students interested in developing a research project.
- Provide funding to develop a research project
- Encourage community engagement (i.e.: plan meetings with new team members, develop research ideas and proposals)
- Support the development of larger research grant proposals (to organizations such as CIHR, SSHRC, Waakebiness-Bryce, NIH US)

All details are available on our website:
<http://www.ahacentre.ca/community-engagement-fund.html>

SUGGESTED READINGS

In an effort to promote our Indigenous colleagues who may or may not be directly engaged in HIV research, we want to share articles, videos and other relatable information to our research team.

Research team, if you have research findings in myriad formats that you would like us to

promote, please send it to Jenn at jenniferm@caan.ca

Our centre's co-director, Charlotte Loppie, and CBR manager, Sherri Pooyak, were a part of the team that wrote this strong systematic review, published in January 2019.

Experiences of the HIV Cascade of Care Among Indigenous Peoples: A Systematic Review

Authors: Kate Jongbloed, Sherri Pooyak, Richa Sharma, Jennifer Mackie, Margo E. Pearce, Nancy Laliberte, Lou Demerais, Richard T. Lester, Martin T. Schechter, Charlotte Loppie, Patricia M. Spittal, For the Cedar Project Partnership

Abstract:

Indigenous leaders remain concerned that systematic oppression and culturally unsafe care impede Indigenous peoples living with HIV from accessing health services that make up the HIV cascade of care. We conducted a systematic review to assess the evidence related to experiences of the HIV care cascade among Indigenous peoples in Australia, Canada, New Zealand, and United States. We identified 93 qualitative and quantitative articles published between 1996 and 2017 reporting primary data on cascade outcomes disaggregated by Indigenous identity. Twelve involved data from Australia, 52 from Canada, 3 from New Zealand and 26 from United States. The majority dealt with HIV testing/diagnosis (50). Relatively few addressed post-diagnosis experiences: linkage (14); retention (20); treatment initiation (21); adherence (23)¹ and viral suppression (24). With HIV cascade of care increasingly the focus of global, national, and local HIV agendas, it is critical that culturally-safe care for Indigenous peoples is available at all stages.

<https://link.springer.com/article/10.1007%2Fs10461-018-2372-2>

We would also like to highlight an article published by SAGE Publishing and Health Promotion Practice on February 6, 2019:

The Impact of Indigenous Youth Sharing Digital Stories About HIV Activism

Authors: Sarah Flicker, Ciann Wilson, Native Youth Sexual Health Network, Renee Monchalin, Jean-Paul Restoule, Claudia Mitchell, June Larkin, Tracey Prentice, Randy Jackson, Vanessa Oliver.

Abstract:

This article reports on the micro-, meso-, and macro-level impacts of sharing digital stories created by Indigenous youth leaders about HIV prevention activism in Canada. Method. Eighteen participants created digital stories and hosted screenings in their own communities to foster dialogue. Data for this article are drawn from individual semistructured interviews with the youth leaders, audio-recordings of audience reflections, and research team member's field notes collected between 2012 and 2015 across Canada. Data were coded using NVivo. A content analysis approach guided analysis. Results. The process of sharing their digital stories had a positive impact on the youth themselves and their communities. Stories also reached policymakers. They challenged conventional public health messaging by situating HIV in the context of Indigenous holistic conceptions of health. Discussion. The impact(s) of sharing digital stories were felt most strongly by their creators but rippled out to create waves of change for many touched by them. More research is warranted to examine the ways that the products of participatory visual methodologies can be powerful tools in creating social change and reducing health disparities.

<https://doi.org/10.1177/1524839918822268>

CONTACT US

Please do not hesitate to contact us if you have any questions or comments:

<http://www.ahacentre.ca/contact-us.html>

