

Journal of Indigenous HIV Research

Volume 9, Winter 2018



Canadian Aboriginal AIDS Network

### ***Brief Overview of the Canadian Aboriginal AIDS Network (CAAN)***

The Canadian Aboriginal AIDS Network is a national, not-for-profit organization:

- Established in 1997
- Represents over 400 member organizations and individuals
- Governed by a national thirteen member Board of Directors
- Has a four member Executive Board of Directors
- Provides a national forum for members to express needs and concerns
- Ensures access to HIV/AIDS-related services through advocacy
- Provides relevant, accurate and up-to-date HIV/AIDS information

### ***Mission Statement***

CAAN provides a National forum for Aboriginal Peoples to wholistically address HIV and AIDS, HCV, STBBIs, TB, Mental Health, aging and related co-morbidity issues; promotes a Social Determinants of Health Framework through advocacy; and provides accurate and up to date [resources](#) on these issues in a culturally relevant manner for Aboriginal Peoples wherever they reside.

### ***Acknowledgements***

CAAN is grateful for the participation of Indigenous people living with HIV and AIDS and of the health care and support of professionals who shared their time and wisdom.

### ***Funding Acknowledgement***

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Canadian Aboriginal AIDS Network©

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### ***Editorial Policies: Purpose and Audience***

The JIHR is an annual on-line and paper journal published by CAAN as a service to its members and anyone with an interest in Indigenous Community-Based Research.

The JIHR is a peer-reviewed journal which welcomes contributions from any author. Priority however, may be given to an author of Indigenous ancestry/background, should manuscripts of comparable quality be available. First consideration will be given to innovative articles covering areas identified as HIV/AIDS research-intensive which demonstrates the use of Community-Based Research (CBR) methods and/or philosophy.

Articles published in JIHR are directed toward several audiences. The primary audience is Indigenous HIV and AIDS service organizations and Aboriginal people living with HIV and AIDS (APHAs). The JIHR secondary audiences include community leaders, policy and decision-makers, and anyone with an interest in HIV and AIDS, particularly within Indigenous populations and communities.

### **Acknowledgements:**

CAAN would like to acknowledge the members of the 2018 Editorial Peer Review Board.

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## Volume 9 Introduction

### What is in a name?

In 2006, The Canadian Aboriginal AIDS Network (CAAN) published the first volume of The Canadian Journal of Aboriginal Community-Based HIV/AIDS Research (CJACBR). The rationale for creating this publication was to “enhance dissemination of Aboriginal community-based HIV/AIDS research using a variety of methods, such as a paper journal, electronic publishing using existing resources, and providing technical support enabling community members to access scholarship funding to present findings at appropriate conference venues, including assistance in developing conference presentations,” (CJACBR Workplan 2006).

Things have changed since 2006. We’re challenging ourselves and our colleagues to write from strength-based perspectives (advocating for inclusion, acceptance, patience and compassion, rather than fighting stigma and discrimination, for example) instead of telling our stories from a deficit model. For many years, manuscripts have been submitted to the CJACBR that start with statements that bring attention to the fact that Indigenous People in Canada experience higher rates of HIV than non-Indigenous people in Canada or, that talk about how broken and traumatized Indigenous communities are.

Focusing on the positive does not mean turning a blind eye to the negative—it means highlighting all of the amazing front line and research work that our communities are doing so that we can understand what works and we can do more and better for First Nations, Inuit and Métis Peoples in Canada. Stories of the incredible leadership of Indigenous people living with HIV (IPHAs), the development of innovative and culturally responsive Indigenous Methodologies in research, or the programs that are helping IPHAs explore wellness and living well with HIV, for example, are so important if we truly want to work toward getting to zero.

Our language has changed a great deal since 2006 too. We are seeing a lot of politically-charged debate in our communities right now around terminology, for example. Aboriginal is being replaced with Indigenous. HIV/AIDS is no longer considered correct. Today we refer to HIV, or HIV and AIDS, recognizing that living with HIV and facing an AIDS diagnosis are two distinctly different things. In 2018, we talk about IPHAs and peers, Capacity Bridging, doing our research ‘in a good way’, and culturally responsive programming, for example ... the list is endless.

All of this to say that after a re-naming contest that yielded responses that didn’t *quite* hit the mark and a lot of thought and much debate, the Operations Team of the AHA Centre is pleased to announce a new name for our annual peer-reviewed journal! We felt that we needed a name that reflects the changes we’ve alluded to above and one that is shorter and hopefully easier to remember too.

We hope that you will agree that the **Journal of Indigenous HIV Research (JIHR)** encompasses all of those things.

Articles published in Volume 9 demonstrate the strengths-based stance we have come to expect from our authors and from our community. We are excited to bring our readers two articles that have been written in more of a narrative, storytelling form, two articles that share information about two very important projects in a more traditionally academic style of writing, as well as a commentary on the new term ‘HIV Older.’

*“She Makes Me Feel Comfortable”*: *Understanding the Impacts of Animal Assisted Therapy at a Methadone Clinic* is written from the perspective of Anna-Belle and her team that includes Georgette Sharilyn Sewap, Dr. Colleen Anne Dell, Brenda McAllister and Jill Bachiu. Anna-Belle is a therapy dog who works with the Methadone Assisted Recovery (MARS) program in Saskatchewan to help people with addictions. Anna-Belle tells us about her relationship with one of her very special friends she met through the MARS program.

*A Thunder’s Wisdom* is the results chapter of a PhD dissertation written by Dr. Randy Jackson. This submission challenges us with a knowledge translation product that shows us how practicing culture can help us to understand another side of an HIV diagnosis.

*Antiretroviral therapy treatment interruption among Indigenous Peoples living with HIV in Canada – a Building Bridges study guided by community* brings results from the Canadian Observational Cohort (CANOC) collaboration uses a mixture of storytelling and statistical reporting to share their insights on HIV treatment interruption for Indigenous Peoples in Canada. Authors include: Denise Jaworski, Flo Ranville, Valerie Nicholson, Roberta Price, Carol Kellman, Elizabeth Benson, JanaRae Tom, Erin Ding, Janet Raboud, Hasina Samji, Renée Masching, Mona Loutfy, Anita C. Benoit, Robert S. Hogg, Evanna Brennan, Susan Giles, Anita Rachlis, Curtis Cooper, Nimâ Machouf, Chris Tsoukas, Mark Hull, on behalf of the Building Bridges Team and the Canadian Observational Cohort (CANOC) collaboration.

*Evaluating knowledge and attitude change among participants in a participatory filmmaking and HIV and AIDS education workshop for Indigenous youth* is brought to us by PhD Candidate Rachel Landy and shares findings from her doctoral research that used filmmaking to engage Indigenous youth in Labrador, teaching them about HIV.

We hope you enjoy reading the articles in Volume 9 of the JIHR as much as we enjoyed putting this volume together for you! A special shout out to all of our reviewers this year. Thank you for taking time to review these papers with a discerning eye and a lot of heart!

We are accepting submissions for Volume 10 until Monday April 1, 2019.



Marni Amirault



Sherri Pooyak



Jennifer Mavritsakis