

Developing a National Action Plan to Advance the Sexual and Reproductive Health and Rights of Women Living with HIV in Canada

Thursday, April 26th, 2018 || 12:30-4:00PM || Salon 3, Stanley Park Ballroom

MEETING AGENDA

Time	Topic	Speakers
1:00-1:05	Welcome Opening Remarks, Traditional Opening and Recognition of the Territory	Elder Valerie Nicholson
1:05-1:15	Opening Panel Overview of the Canadian Webinar Series on Supporting the SRHR of WLWH and purpose of the ancillary event	Facilitated by Muluba Habanyama, Canadian Positive People Network Dr. Angela Kaida, SFU, Chair of Webinar Series
1:15-1:25	Introduction and overview of WHO Consolidated Guidelines: Update on Canada's role in piloting guidelines, update on countries implementing these guidelines	Dr. Manjulaa Narasimhan, World Health Organization, Department of Reproductive Health and Rights
1:25-1:35	Importance of centering women's voices and lived experience in SRHR of WLWH	Tracey Conway, Canadian Positive People Network
1:35-2:05	Webinar Highlights <ul style="list-style-type: none"> ❖ Trauma and Violence Aware Care ❖ Supporting Safe HIV Disclosure ❖ Reproductive Health, Rights, and Justice ❖ Resilience, Self-Efficacy, and Peer Support 	Valerie Nicholson, Jay MacGillivray, & Dr. Neora Pick Jasmine Cotnam & Wangari Tharao Margarite Sanchez, Dr. Angela Kaida, & Dr. Deborah Money Tracey Conway, Brittany Cameron, Brenda Gagnier, & Dr. Carmen Logie
2:05-2:15	Introduction to Small Group Discussion Exercise	Muluba Habanyama
2:15-3:15	World Café Style Small Group Discussions across the four webinar topics <ul style="list-style-type: none"> ❖ Trauma and Violence Aware Care ❖ Supporting Safe HIV Disclosure ❖ Reproductive Health, Rights, and Justice ❖ Resilience, Self-Efficacy, and Peer Support 	Everyone
3:15-3:45	Large Group Discussion & Feedback	Facilitated by Muluba Habanyama
3:45-3:55	Next Steps and Wrap-Up	Collaborating partners
3:55-4:00	Elder Closing	Elder Valerie Nicholson

Developing a National Action Plan to Advance the Sexual and Reproductive Health and Rights of Women living with HIV in Canada

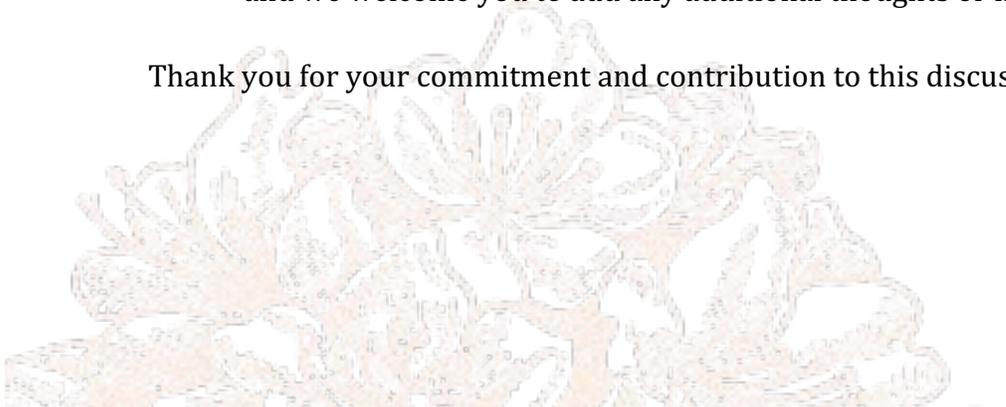
WORLD CAFÉ DISCUSSION INSTRUCTIONS

We are pleased to offer participants at this CAHR ancillary event an opportunity to discuss key opportunities, challenges, and next steps in developing a national action plan to advance the sexual and reproductive health and rights of women living with HIV. Following the opening presentations, we will be breaking into these small group discussions.

Tips and Instructions for Small Group World Café Discussions:

- There will be small discussion groups for each of the four webinar topics; you will be asked to move to a discussion topic of your choice at **2:15PM**
- 60 minutes has been allotted for small group discussions
- Each discussion group will have a note-taker and a facilitator
- Discussions will focus on key policy, programming, and research considerations highlighted by the Canadian Webinar Series
- Following the small group discussions, we will have an opportunity to come back together as a large group to discuss the **key messages that we would like reflected in the National Action Plan to Advance the Sexual and Reproductive Health and Rights of Women Living with HIV**
- As we move through the large group discussion, we encourage you to record additional insights or points using the post-it notes provided, which can later be added to the discussion notes of other groups
- Discussion questions will be circulated via a Google Form document after the event, and we welcome you to add any additional thoughts or insights that you have

Thank you for your commitment and contribution to this discussion!



Brief Biographies of Speakers at Developing a National Action Plan to Advance the Sexual and Reproductive Health and Rights of Women Living with HIV

Name	Brief biography
Welcome and Opening	
<p>Valerie Nicholson</p> 	<p>Kwe - Honouring my given names: The One the Eagles Watch Over and NoDe WenDa {wolf eyes}. Valerie is Mi'kmaq and Haida. She is the mother of 4 boys and grandmother of 4 grandsons and 1 granddaughter. Valerie has been living with HIV for 14 years, and currently works as a Peer Navigator with Positive Living Society of B.C. and the CHIWOS study. She enjoys working at all levels of community-based research and is the Chair of Canadian Aboriginal AIDS Network, Co-Chair of Red Road HIV AIDS Network, and a member of Canadian Aboriginal AIDS Network.</p>
Facilitator	
<p>Muluba Habanyama</p> 	<p>As a young person who has been living with HIV since childhood, Muluba Habanyama has firsthand knowledge of being a patient of clinicians, participating in programs and services offered by community-based organizations, strong connections to her peers. Muluba has taken on numerous leadership roles to reduce the stigma that often silences those living with HIV. She has worked with Women's Health in Women's Hands, Canadian Foundation for AIDS Research, YouthCO, and Peel HIV/AIDS Network, and Interagency Coalition on AIDS & Development. She serves on the board of The Teresa Group, Ontario HIV Treatment Network, and is the secretary on Canadian Positive People Network. She has most recently joined the community advisory committee of CIHR Canadian HIV Trials. In each of these roles, Muluba has deepened her knowledge of approaches to HIV prevention, treatment and care, and the unique needs of the communities most impacted by HIV.</p>
Opening Panel	
<p>Dr. Angela Kaida</p> 	<p>Angela is an epidemiologist and Canada Research Chair at Simon Fraser University. Her global research program centers on a rights-based, evidence-informed, and community-driven approach to sexual and reproductive health among women and youth affected by HIV.</p>
<p>Dr. Manjulaa Narasimhan</p> 	<p>Manjulaa coordinates WHO's work on strengthening linkages between sexual and reproductive health and rights (SRHR) and HIV interventions – at advocacy, policy, programmatic and research levels. This includes the development of WHO global guidance and tools on the SRHR for women living with HIV as well as the SRHR of adolescent girls and young women.</p>
<p>Tracey Conway</p> 	<p>Tracey is a community researcher who has just completed the CANOC Community Investigator project. She has been involved in HIV and women's research since 2000. Tracey is also the Co-chair of the Canadian Positive People Network.</p>

Co-Leads: Trauma and Violence Aware Care

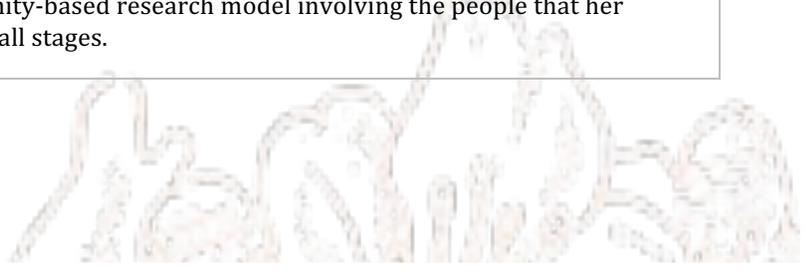
<p>Dr. Neora Pick</p> 	<p>Neora is a clinical professor, and the Medical Director of the Oak Tree Clinic, the provincial clinic for women & children living with HIV in British Columbia, Canada. During her work with women/youth living with HIV, she has become aware of the huge role trauma plays in their lives, and is now one of the leaders in Trauma-Informed Care in HIV in BC/Canada.</p>
<p>Valerie Nicholson</p>	<p>See above.</p>
<p>Jay MacGillivray</p> 	<p>Jay is a registered midwife and is co-founder/co-director of the interdisciplinary Positive Pregnancy Programme in Toronto. She works in nuanced reproductive care with clients living with, or at increased risk of acquiring, HIV.</p>

Co-Leads: Supporting Safer HIV Disclosure

<p>Wangari Tharao</p> 	<p>Wangari is the Director of Research and Programs at Women's Health at Women's Hands, a community health centre that provides primary healthcare services for African, Caribbean, Black, Latin American and South Asian women in Toronto and surrounding areas. She is a recognized HIV advocate and a community-based researcher whose work focuses on bridging knowledge generation, programmatic and policy practice to support effective actions on HIV.</p>
<p>Jasmine Cotnam</p> 	<p>Jasmine currently holds two part-time research coordinator positions at Women's College Hospital and works part time with the Canadian Aboriginal AIDS Network, where she holds one of the two APHA Liaison positions. In addition, Jasmine is a Peer Research Associate (PRA) with the Ontario HIV Treatment Network on various studies, Women's College Hospital on the CHIWOS study, and McMaster University on the WATCH study.</p>

Co-Leads: Reproductive Health, Rights, and Justice

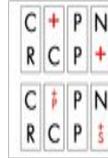
<p>Dr. Angela Kaida</p>	<p>See above.</p>
<p>Margarite Sanchez</p> 	<p>Margarite is an artist, activist, and agriculturalist. She is also co-founder of Viva Women and the Southern Gulf Islands AIDS Society, and a PRA with CHIWOS.</p>
<p>Dr. Deborah Money</p> 	<p>Deborah is the Executive Vice Dean at the UBC's Faculty of Medicine and a Professor in Obstetrics and Gynecology, Medicine and School of Population and Public Health. In addition to developing a provincial women-centred program of care for pregnant women living with HIV, she has been a leader in development of guidelines for the care of women related to infectious diseases, including HIV. She has been a long-standing advocate for improving women's health locally, nationally and internationally.</p>
<p>Dr. Mona Loutfy</p> 	<p>Mona is a Professor and Clinician Scientist at Women's College Hospital and the University of Toronto. She launched the Women and HIV Research Program at the Women's College Research Institute in 2006 to carry out social justice research related to women, reproductive health, stigma, quality of care, and HIV & HCV. She works from a community-based research model involving the people that her research will affect at all stages.</p>



Co-Leads: Resilience, Self-Efficacy, and Peer Support

Tracey Conway	See above.
Dr. Carmen Logie 	Carmen is an Assistant Professor, Factor-Inwentash Faculty of Social Work, University of Toronto and an Ontario Ministry of Research & Innovation Early Researcher. Her research explores the social ecological contexts of health and well-being of people living with, and at elevated risk for, HIV in Canada and globally.
Brittany Cameron 	Brittany describes herself as an HIV Positive Mother, Wife, LGBTQ* Ally, and Human Rights Activist. She is a Peer Engagement Worker at PARN, where she works with people living with HIV assisting them as they build their skills and capacity to facilitate programs, while also creating events and conferences in order to educate and strengthen the community. Brittany is a Graduate of The Positive Leadership Development Institute (PLDI).
Brenda Gagnier	Brenda is a person who has been living with HIV for 28 years. She moved to Ontario in 2009 and became a volunteer at her regional ASO. In 2011, she was hired and trained by the Ontario HIV Treatment Network to be a PRA on two consecutive studies. In 2012, she was recruited by CHIWOS to be part of the national ongoing study on the sexual and reproductive health rights of women.





Developing a National Action Plan to Advance the Sexual and Reproductive Health and Rights of Women Living with HIV:

HIV:

A CAHR Ancillary Event

Thursday, April 26th, 2018

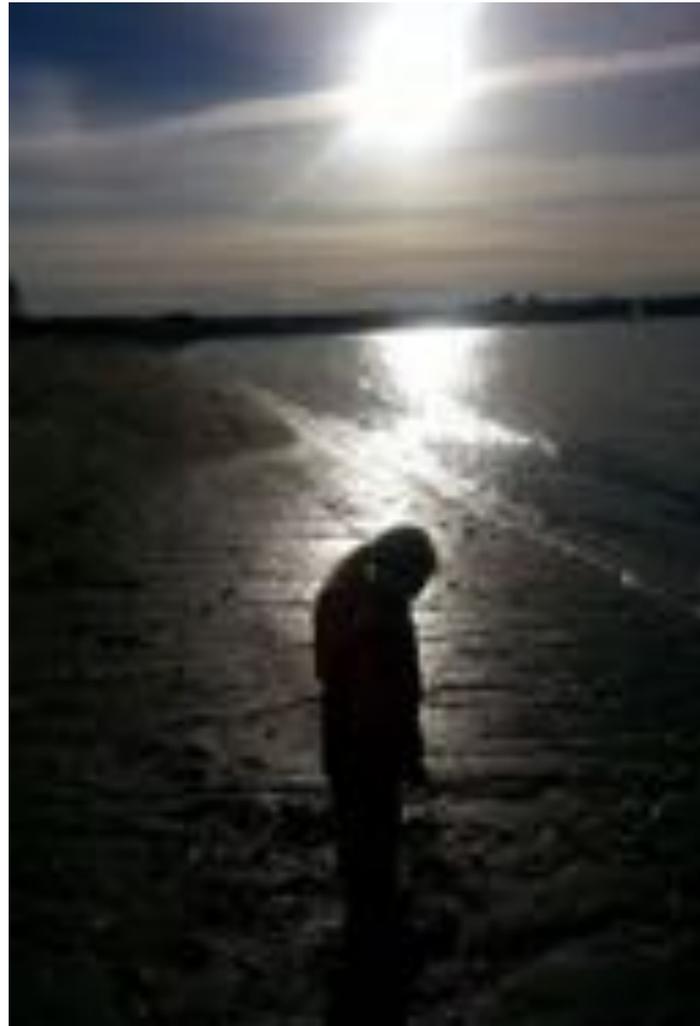
12:30 – 4:00

Stanley Park Ballroom 3

Honouring

CHIWOS wishes to acknowledge the ancestral, traditional and unceded Indigenous territories of the Coast Salish Peoples, and in particular, the Musqueam Nation, Tsleil Waututh Nation, Squamish Nation on whose territory we are privileged to gather today.







Introduction and overview of the Canadian Webinar Series on Supporting the Sexual and Reproductive Health & Rights of Women Living with HIV

PRESENTATION BY: ANGELA KAIDA

THURSDAY, APRIL 26TH | | 12:30-4:00PM | |
SALON 3, STANLEY PARK BALLROOM

Overview of the Canadian Webinar Series

- ▶ In February 2017, the World Health Organization (WHO) released the **Global Consolidated Guideline on the Sexual and Reproductive Health and Rights (SRHR) of Women Living with HIV (WLWH)**, which:
 - Outlines evidence-based recommendations and best practice statements to uphold human rights and promote gender equality;
 - Centres the values and perspectives of WLWH for the first time;
 - Emphasizes the influence of constraining and enabling social environments on SRHR;
 - Challenges individual countries to act within their own legal, cultural, economic, and political contexts to improve these social environments;
 - Provides guidance for countries to implement quality services for advancing SRHR of WLWH.

Collaborating partners



Learning objectives for the webinar series

- ▶ Designed and delivered a four-part webinar series **exploring the intersecting social positions and structural inequities** that influence SRHR in Canada.
- ▶ **Learning objectives** included:
 - ❖ Define **constraining and enabling environments** that shape women's SRHR;
 - ❖ Present key **Canadian research findings**;
 - ❖ Disseminate Canadian **best practices in implementation** for addressing SRHR;
 - ❖ Showcase the importance of community-academic partnerships and a commitment to the meaningful involvement of women living with HIV (**MIWA principle**) in practice;
 - ❖ Inform a **national action plan** to advance SRHR for women living with HIV

Four-part webinar series

- ▶ Between September 2017 and March 2018, we hosted **four bimonthly webinars** on the following prioritized topics:
- ▶ September 13, 2017: **Trauma and Violence Aware Care**
- ▶ November 16, 2017: **Supporting Safe HIV Disclosure**
- ▶ January 24, 2018: **Reproductive Health, Rights, and Justice**
- ▶ March 9, 2018: **Resilience, self-efficacy, and peer support**



Webinar details

- Each webinar adhered to a similar structure



- The webinar series featured **24 presenters from across Canada**, including women living with HIV, representatives from AIDS Service Organizations, frontline health and social care providers, clinicians, and researchers, including:
 - ❖ Valerie Nicholson, Angela Kaida, Manjulaa Narasimhan, Carmen Logie, Neora Pick, Jesleen Rana, Jay MacGillivray, Tracey Conway, Wangari Tharao, Kerrigan Beaver, Mona Louffy, Jasmine Cotnam, Marvelous Muchenje, Sandra Godoy, Deborah Money, Krysta Williams, Brittany Cameron, Saara Greene, Frederique Chabot, Allyson Ion, Doris Peltier, Shazia Islam, and Kath Webster

Webinar details

- Provided key Canadian resources – papers, toolkits, guidelines
- **National and international audience** of WLWH, academic, community, practitioner, governmental, and funder stakeholders
- Webinars were recorded and are publicly available online at: **www.chiwos.ca**

Table 1. Global participation on the Canadian webinar series on SRHR of women living with HIV

Webinar	Registrants	Attendees	Total Views*
Trauma and Violence Aware Care	209	106	514
Supporting Safer HIV Disclosure	190	76	169
Reproductive Health, Rights, and Justice	170	79	291
Resilience, Self-Efficacy, and Peer Support	256	100	182
TOTAL across the webinar series	825	361	1,156

Key priorities

Priorities emerging from webinar presentations and discussions included:

- Need for social and health equity approaches to addressing SRHR;
- Foster enabling environments for care;
- Strength and resilience-based approaches;
- Need for trauma and violence aware care across all levels of action
- Centre the voices, experiences, and priorities of women living with HIV

Need for broader consultations to work towards developing a national action plan

Developing a national action plan

- ▶ Purpose of today's ancillary event:
 - ▶ Discuss policy, programming, and research considerations to lay the foundation for a national action plan to advance the SRHR of WLWH
 - ▶ Identify the key messages we want to relay in the national action plan.

Agenda for the day

- ▶ Agenda overview
- ▶ Resources
 - ▶ Agenda + Speaker bios
 - ▶ Webinar summary slides
 - ▶ Guiding questions for small group discussion
- ▶ Logistics
 - ▶ Each of us will join one discussion group/topic
 - ▶ Each group will have a facilitator and a note-taker → HANDS UP
 - ▶ Large discussion group
- ▶ This is **a step** in the process towards developing a national action plan
 - ▶ Diverse voices will bring diverse opinions
 - ▶ Google form will be circulated with the discussion questions.

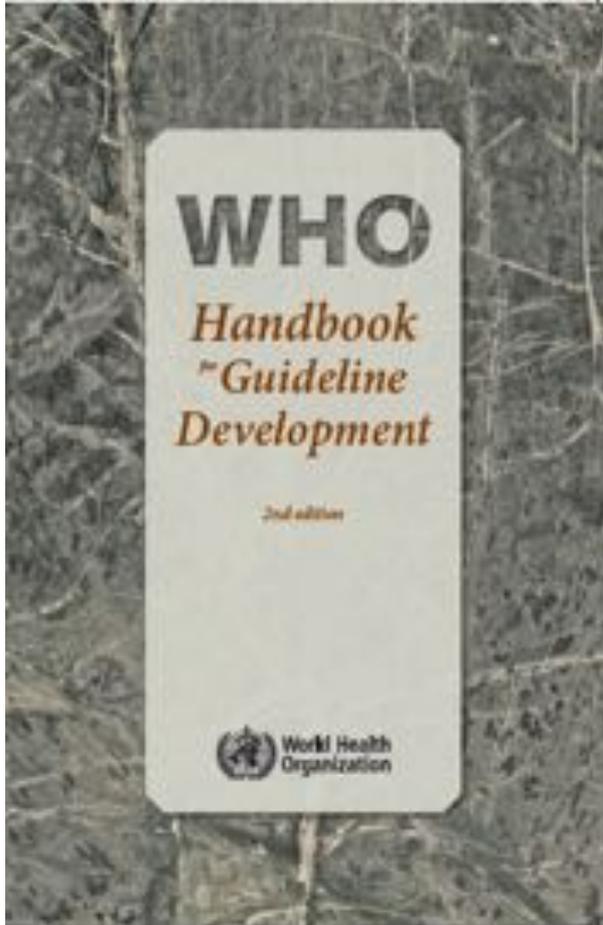


World Health
Organization

Consolidated guideline on sexual and reproductive health and rights of women living with HIV

Presented by: Manjulaa Narasimhan
Thursday, April 26th, 2018

What is a WHO guideline?

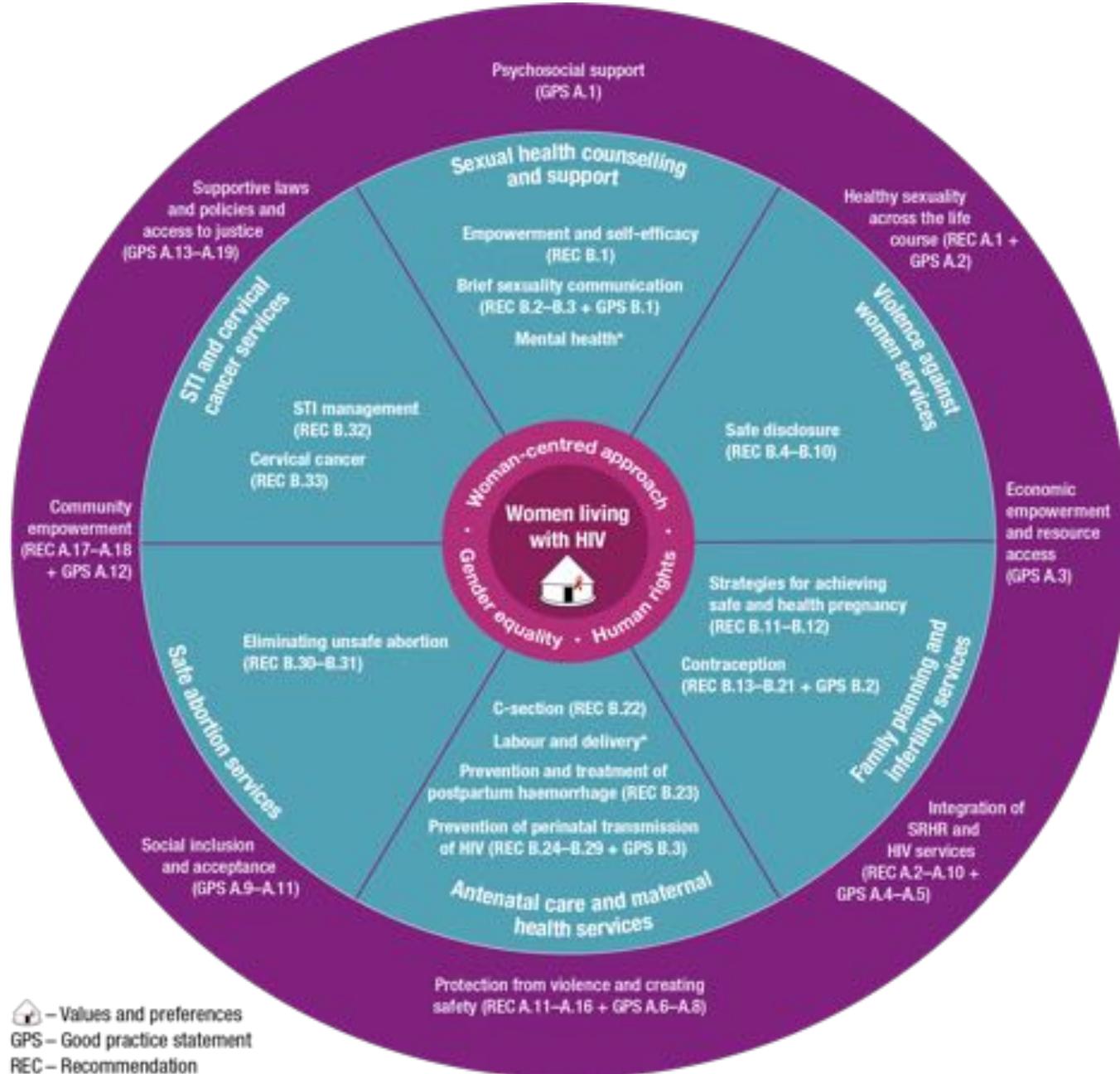


- “A **WHO guideline** is any document, whatever its title, that contains WHO recommendations about health interventions, whether they be clinical, public health or policy interventions.”
- “A **recommendation** provides information about what policy-makers, health-care providers or patients should do. It implies a choice between different interventions that have an impact on health and that have ramifications for the use of resources.”

Guiding principles



- **Woman-centred approach**
- **promotion of human rights**
- **gender equality**



– Values and preferences
 GPS – Good practice statement
 REC – Recommendation
 – Enabling environment
 – Health interventions

C-section: caesarean section; SRHR: sexual and reproductive health and rights; STI: sexually transmitted infection.
 * For sections on "Mental health" and "Labour and delivery", this guideline does not include any RECs or GPSs but refers to existing WHO guidance.

Meaningful Community Engagement

Building a safe house on firm ground

KEY FINDINGS FROM A GLOBAL VALUES AND PREFERENCES SURVEY REGARDING THE SEXUAL AND REPRODUCTIVE HEALTH AND HUMAN RIGHTS OF WOMEN LIVING WITH HIV



- **Core Team Members: Luisa Orza, Alice Welbourn, Susan Bewley, E. Tyler Crone, Marijo Vazquez**

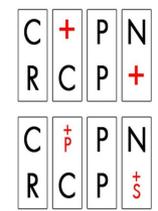
- **GRG members: Nukshinaro Ao, Cecilia Chung, Sophie Dilmitis, Calorine Kenkem, Svetlana Moroz, Suzette Moses-Burton, Hajjarah Nagadya, Angelina Namiba, L'Orangelis Thomas Negrón, Gracia Violeta Ross, Sophie Strachan, Martha Tholanah, Patricia Ukoli, Rita Wahab.**

<http://salamandertrust.net/wp-content/uploads/2016/09/BuildingASafeHouseOnFirmGroundFINALreport190115.pdf>

Effective Implementation

A pair of hands, one from the left and one from the right, are shown holding a small green seedling with soil. The hands are positioned as if they are gently supporting the plant. The background is a soft, light-colored gradient.

Action on the recommendations in this guideline requires a strategy that is informed by evidence, appropriate to the local context, and responsive to the needs and rights of women living with HIV.



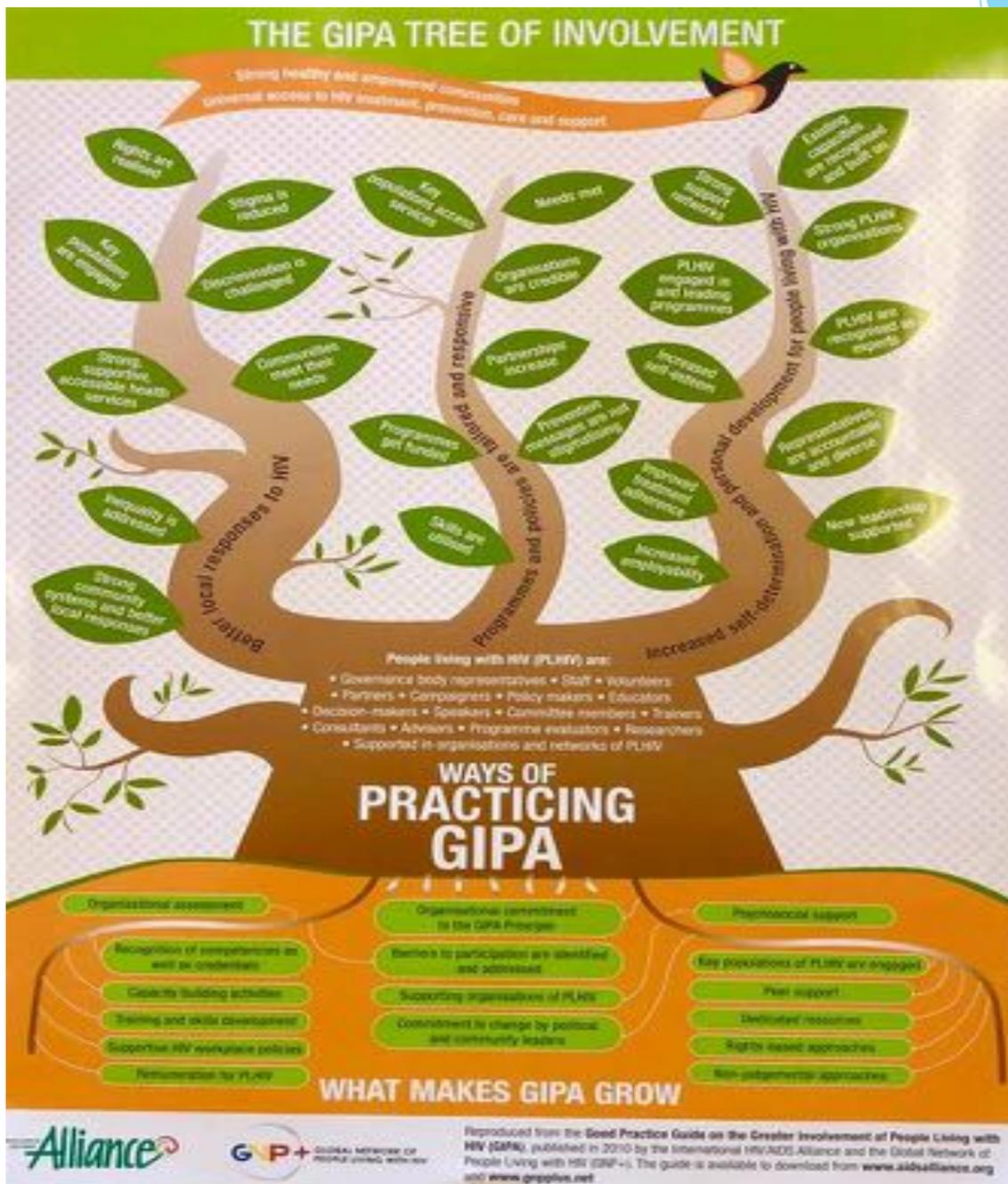
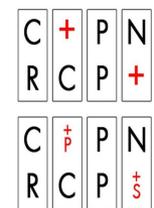
MEWA / GIPA

Meaningful Engagement of Women Living with HIV / Greater Involvement of People Living with HIV

- ▶ Inclusion at all levels of project including conception, implementation, and evaluation.
- ▶ Reciprocal mentoring and capacity building respect knowledge and skills that are present, while maintaining awareness of power imbalances; acknowledge community knowledge, wisdom, especially expertise in their own lives.
- ▶ Ensure community represents populations being served and has expertise.
- ▶ Compensation and availability of resources to ensure meaningful contribution.
- ▶ Important this work belongs to the community:
 - ▶ **NOTHING ABOUT US WITHOUT US**
- ▶ **Women living with HIV are the experts in their lives.**

Barriers

- ▶ In many environments stigma and fear impact the ability of WLWHs to engage
- ▶ A lack of economic and social power experienced by many WLWHs
- ▶ A lack of education, adequate resources and skills building for MEWA to have better impact
- ▶ **Tokenization**
- ▶ **Lack of experience and adequate process**
- ▶ **Lack of resources**
- ▶ **Not recognizing power imbalances**





Trauma and Violence Aware Care:

Canadian Webinar Series on Implementing the WHO Guidelines on Sexual and Reproductive Health and Rights for Women Living with HIV



Date: Wednesday, September 13, 2017

Time: Time: 9-10:30am PST / 10-11:30am MST / 12-1:30pm EST / 6-7:30pm Geneva

Recording Link:

<https://www.youtube.com/watch?v=qSNlf29Q7rw>

Webinar series hosted in collaboration with:

CHIWOS, Canadian Positive People's Network, Oak Tree Clinic, BC Women's Hospital, Women's Health in Women's Hands, Canadian Aboriginal AIDS Network (CAAN), WHO, HRP and the IBP Initiative

A. Creating an enabling environment: Good practice statements (GPS)

Protection from violence and creating safety

GPS A.6: Violence against people from key populations should be prevented and addressed in partnership with key population-led organizations. All violence against people from key populations should be monitored and reported, and redress mechanisms should be established to provide justice.²⁷

GPS A.7: Health and other support services should be provided to all persons from key populations who experience violence. In particular, persons experiencing sexual violence should have timely access to comprehensive post-rape care in accordance with WHO guidelines.

GPS A.8: Law enforcement officials and health- and social-care providers need to be trained to recognize and uphold the human rights of key populations and to be held accountable if they violate these rights, including perpetration of violence.



World Health
Organization

Consolidated guideline on
**sexual and reproductive health
and rights of women
living with HIV**



Webinar Objectives

- This webinar created as **a response** to recommendations from the WHO Consolidated Guidelines of the SRHR of Women living with HIV
- **Provide an overview** on the **prevalence of trauma** among women with HIV in Canada, using data from the Canadian HIV Women's Sexual & Reproductive Health Cohort Study (CHIWOS)
- **Identify the health outcomes of trauma, and why we need TVAC/P**
- **Identify some of the health care system barriers to TVAC/P**
- **Hear best practices** from national stakeholders regarding the implementation of TVAC services to support women with HIV
- **Gain insights** from women with HIV to highlight gaps in research/priority areas
- **Develop an action plan on trauma and violence aware care** for the Canadian context



Research Overview:

Gender-based violence and trauma among women living with HIV in Canada

Table 1. Prevalence of experiences of adulthood violence among women with HIV in Canada (n=1312)

Experienced violence in adulthood (>16 years old)	N (%)
Any type of violence	1054 (80)
Physical violence	817 (74)
Sexual violence	579 (44)
Verbal violence	973 (74)
Control	608 (46)

Definition

Trauma and Violence Aware Care/Practice (TVAC/P)

*A **strengths-based** framework that is grounded in an understanding of and responsiveness to the impact of trauma, that emphasizes **physical, psychological, and emotional safety** for both providers and survivors, and that creates opportunities for survivors to rebuild **a sense of control and empowerment** (Hopper, Bassuk & Olivet, 2010).*



Trauma in the Canadian Context



Implementation Overview

- Trauma and Violence **Awareness**

- Acknowledge the role / impact of trauma and its link to health and health behaviors
- Trauma-aware values, including Meaningful Involvement of Women Living with HIV (MIWA)

- Trauma-Aware Clinical **Care**

- Acknowledging truth
- Share the expertise and power with the women
- Examine practice routines, including to key populations, Immigrant, Refugee and Non-status (IRN) , and Indigenous Women Living with HIV
- Self-reflection
- How does their reality impact access, navigation & engagement with health services?

- Examples of **Canadian** Trauma and Violence Aware Care resources

- VEGA –Violence Evidence Guidance Action
- Oak Tree Clinic –Women’s Centered HIV Care; Trauma & Cultural Safety “Walk Through”
- Equity-oriented care (EOC)



Key Priorities

- How can we implement Trauma and Violence Aware Care/Practice?
 - Across various settings and demographics
 - Key opportunities and gaps in current practice
 - Key messages to policy makers and healthcare/service providers



Supporting Safe HIV Disclosure:

Canadian Webinar Series on Implementing the WHO Guidelines on Sexual and Reproductive Health and Rights for Women Living with HIV



Date: Thursday, November 26, 2017

Time: 9:00-10:30 PST, 12:00 -13:30 EST, and 18:00 -19:30PM in Geneva.

Recording Link:

<https://www.youtube.com/watch?v=l eAlj4pP7HU&feature=youtu.be>

Webinar series hosted in collaboration with:

WHO HRP, CHIWOS, Canadian Positive People's Network, Oak Tree Clinic, Women's Health in Women's Hands, Canadian Aboriginal AIDS Network and the IBP Initiative

Webinar Objectives

- **Provide an overview** of current research about **HIV disclosure** in the Canadian context using data from the Canadian HIV Women's Sexual and Reproductive Health Cohort Study (CHIWOS);
- **Respond** to recommendations provided by the WHO Consolidated Guidelines of the Sexual and Reproductive Health and Rights of Women living with HIV (attached)
- **Introduce a toolkit** developed by women living with HIV and stakeholders for health and social service providers to support safer HIV disclosure.
- **Gain insights** from women living with HIV to highlight gaps in research and priority areas for further attention.
- **Develop an action plan** on how to support the sexual and reproductive health and rights of women living with HIV in the Canadian context, including actions to support safe HIV disclosure.



NEW recommendations on safe disclosure

REC B.4 (NEW): WHO recommends that policy-makers and service providers who support women living with HIV who are considering voluntary HIV disclosure should recognize that many fear, or are experiencing, or are at risk of intimate partner violence.

Strong recommendation, low-quality evidence

REC B.5 (NEW): WHO recommends that interventions and services supporting women living with HIV who are considering voluntary HIV disclosure should include discussions about the challenges of their current situation, the potential associated risk of violence, and actions to disclose more safely, and facilitate links to available violence prevention and care services.

Strong recommendation, low-quality evidence

REC B.6: Adolescents should be counselled about the potential benefits and risks of disclosure of their HIV status to others and empowered and supported to determine if, when, how and to whom to disclose.

REC B.7: HIV testing services for couples and partners, with support for mutual disclosure, should be offered to individuals with known HIV status and their partners.

REC B.8: Initiatives should be put in place to enforce privacy protection and institute policy, laws and norms that prevent discrimination and promote tolerance and acceptance of people living with HIV. This can help create environments where disclosure of HIV status is easier.

REC B.9: Children of school age should be told their HIV positive status; younger children should be told their status incrementally to accommodate their cognitive skills and emotional maturity, in preparation for full disclosure.

Framing 'Safe' Disclosure

- What is 'safe' disclosure?
- Supporting safe disclosure requires a **women-centered approach** that respects the **autonomy and dignity** of an HIV-positive individual throughout the disclosure process
- A person-centered approach allows an individual's **reality and sentiments to inform and determine how the disclosure action plan will develop** and be implemented in order to maximize their wellbeing and safety.
- Each individual and their **circumstances are different** and should be treated as such
- PHAs should experience a **non-judgemental** responses to the expression of their needs and choices
- **Peer Support** is an invaluable source of support in the disclosure process

Research Overview:

Disclosure in the context of the criminalization of HIV non-disclosure among women living with HIV in Canada

- When women can safely disclose their HIV status, disclosure is associated with fewer barriers to accessing HIV care, improved ART adherence, better quality of life, and reduced HIV transmission risks
- Disclosure can lead to (more) violence, fear, dissolution of relationships, abandonment, stigma, and discrimination
- In Canada where HIV non-disclosure is criminalized there are additional expectations, barriers, and consequences to disclosure
 - Women are two-fold more likely to face a legal obligation to disclose their HIV status to sexual partners compared to men and less likely than men to meet the legal criteria for non-disclosure
- In the Canadian HIV Women's Sexual and Reproductive Health Cohort Study (CHIWOS) (n=1,230)
 - 73% of participants reported being aware of the HIV non-disclosure law in Canada and 51% reported a complete understanding of the legal obligation to disclose
 - Upon being provided a concise definition of the most recent case law only 37% were both aware and had a complete understanding of the legal obligation to disclose



Canadian Coalition to Reform HIV Criminalization

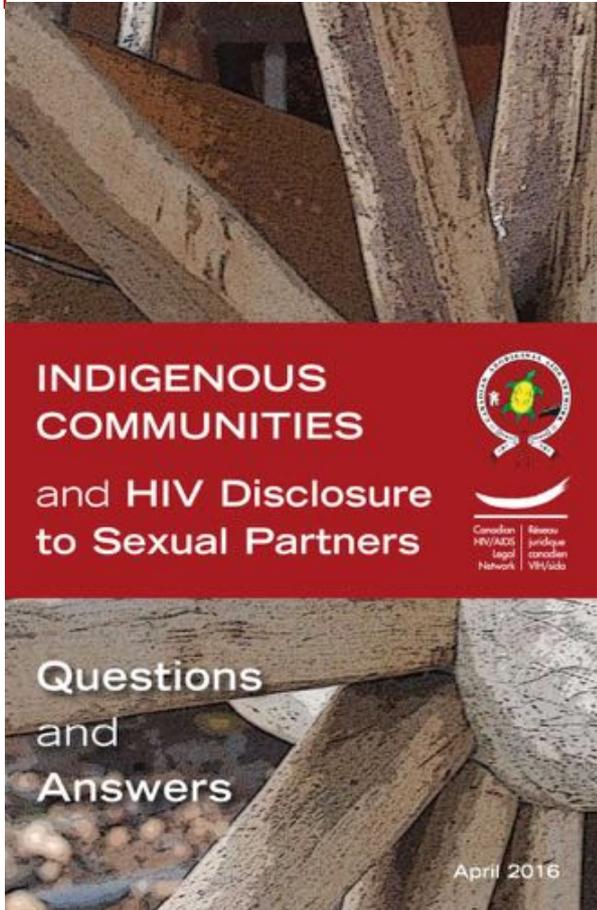
- Formed following the HIV Is Not A Crime 2 Training Academy convention held in Huntsville, Alabama
- Made up of people living with HIV, community workers, lawyers and academics from across the country
- Joined forces at a national level to progressively:
 - ***reform discriminatory and unjust criminal and public health laws and practices that criminalize and regulate people living with HIV in relation to HIV exposure, transmission and nondisclosure in Canada***



Implementation Overview

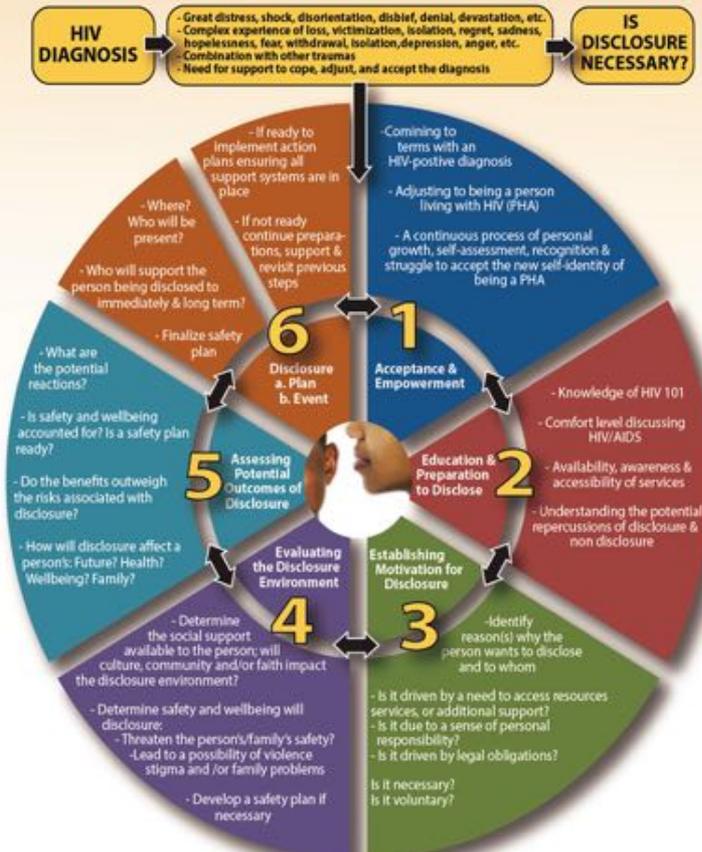
<http://www.aidslaw.ca/site/indigenous-communities-and-hiv-disclosure-to-sexual-partners-questions-and-answers/?lang=en>

This brochure has been prepared by the Canadian HIV/AIDS Legal Network with the Canadian Aboriginal AIDS Network. It provides Indigenous Communities with important information about the law in Canada as it relates to HIV disclosure.



Implementation Overview

THE HIV-POSITIVE SERO-STATUS DISCLOSURE SUPPORT MODEL



hivdisclosure.ca

This toolkit is designed for organizations, service providers and peers who would like to provide support to people living with HIV who are contemplating disclosure. It is also for anyone who is interested in learning more about the disclosure model and may be interested in implementing the model in their setting.



Key Priorities

- Foster a safer environment for HIV disclosure **by addressing HIV stigma**
- **Foster a supportive environment** by creating opportunities for peer support in the disclosure process
- **Center experiences of strength and resilience** to disrupt the deficit-based narrative



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Reproductive Health, Rights, and Justice:

Canadian Webinar Series on Implementing the WHO Guidelines on Sexual and Reproductive Health and Rights for Women Living with HIV



Date: Wednesday, January 24th 2018

Time: 9:00-10:30 PST, 12:00 -13:30 EST, and 18:00 -19:30PM in Geneva.

Recording Link:

<https://youtu.be/rhhrFTxspq4>

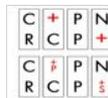
Webinar series hosted in collaboration with:

WHO HRP, CHIWOS, Canadian Positive People's Network, Oak Tree Clinic, Women's Health in Women's Hands, Canadian Aboriginal AIDS Network and the IBP Initiative

Webinar Objectives

- **Provide an overview** of new WHO recommendations on elective C-section and safe abortion for women living with HIV as well as current research about **the reproductive health of women living with HIV** in the Canadian context using data from the Canadian HIV Women's Sexual and Reproductive Health Cohort Study (CHIWOS);
- **Introduce guidelines and a toolkit** developed by clinicians, women living with HIV and stakeholders for health and social service providers to support reproductive health and rights within a **reproductive justice framework**; including the newly updated **Canadian HIV Pregnancy Planning Guidelines (2018)** and the **Supporting Mothers in Ways that Work: A Resource Toolkit for Service Providers Working with Mothers Living with HIV (2016)**;
- **Gain insights** from women living with HIV to highlight gaps in research and priority areas for further attention;
- **Develop an action plan** on to support the sexual and reproductive health and rights of women living with HIV in the Canadian context, including actions to support the reproductive health, rights, and justice of women living with HIV.

Webinar moderator: Dr. Deborah Money



WHO Guidelines

NEW recommendation on caesarean section

REC B.22: WHO recommends that elective caesarean section (C-section) should not be routinely recommended to women living with HIV.

(strong recommendation, low-quality evidence)

NEW recommendations on safe abortion services

REC B.30: WHO recommends that safe abortion services should be the same for women living with HIV who want a voluntary abortion as for all women.

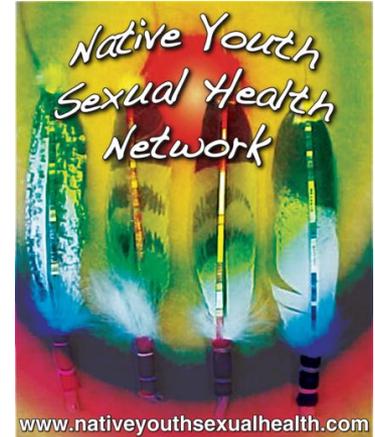
(strong recommendation, very low-quality evidence)

REC B.31: WHO suggests that women living with HIV who want a voluntary abortion can be offered a choice of medical or surgical abortion, as for all women.

(conditional recommendation, very low-quality evidence)

Framing Reproductive Justice

- **Human right** to have / not have children, parent the children we have in safe and healthy environments, and it is the obligation of government and society to ensure that the conditions are suitable for implementing those decisions
- **Broader analysis of racial, economic, cultural, and structural constraints on our power**



Key issues highlighted by “lived experience with U=U before the hashtag”:

- 1) Breastfeeding, HIV transmission, HIV criminalization in the context of mothering;
- 2) Support beyond conception for HIV sero-different couples
- 3) Women-centered research and care

Presented by: Krysta Williams (NYSHN) & Brittany Cameron (Wife, Mother, Activist)

Research Overview:

Pregnancy and contraceptive use among women living with HIV enrolled in the CHIWOS study

- 25% of WLWH report pregnancy intention
- 39% have ever discussed their reproductive goals with a healthcare provider
- Among sexually active WLWH: 73% using contraceptives (Kaida et al, 2017)
 - Range of methods used more limited than general pop.
 - Driven by male condom use and tubal ligation
- 24% reported ≥ 1 pregnancy after HIV diagnosis (Salters et al, 2017)
 - Pregnancy incidence = 41.6 per 1,000 WYs; 95% CI: 36.6–47.2
 - 61% of all pregnancies were **unintended**
 - Higher pregnancy incidence after diagnosis in recent years (2000-2013) vs. earlier
 - Greater increase in unintended vs. intended pregnancies
- Need to expand the availability and accessibility of options/services best suited to the needs of each woman at her stage of life—and considering her reproductive intentions—to support & improve reproductive health

Presented by: Dr. Angela Kaida



Implementation Overview

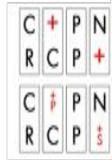
Presented by: Dr. Mona Loutfy, WCH; Dr. Saara Greene, McMaster; Frederique Chabot, Action Canada

- **Updated 2018 Canadian HIV Pregnancy Planning Guidelines** for health care providers
 - Use of a Human Rights Framework
 - Recommendation to discuss & review pros/cons of each conception option
 - Additional guidance re: Psychosocial/Mental Health, Legal & Ethical issues
 - Inclusion of additional safer conception option: Condomless sex timed with peak fertility (with a partner living with HIV who is on cART with full viral suppression)
- **Supporting Mothers in Ways that Work toolkit** for health and social care providers
 - Purpose: To increase providers' awareness and understanding of the psychosocial needs and experiences of WLWH during pregnancy, childbirth, and postpartum.
 - Raises awareness about the consequences of the cultural and social expectations related to breastfeeding; supporting mothers under surveillance of HIV criminalization; HIV-stigma & discrimination; optimizing care for WLWH
- **Barriers to abortion** exist in Canada; limited availability of abortion services compounded by wait times, unnecessary strict rules and regulations, conscientious objection by healthcare providers
 - Disproportionately affect young & marginalized women



Key Priorities

- **Women living with HIV** need to be supported in achieving their reproductive goals, however that looks for them
- **Action** must include addressing social inequities, and how this shapes the opportunity of 'choice' (shift to discussions of reproductive justice)
- **Addressing the stigma around breastfeeding and support beyond conception** was a common theme
- **Updated 2018 Pregnancy Planning guidelines** need to be disseminated, implemented, and evaluated.
- **Mothering toolkit** to help providers understand the psychosocial needs and experiences of WLWH, and to support women in ways that they need to be supported
 - Experiences of not breastfeeding
 - Criminalization of HIV non-disclosure
 - Think critically about assumptions held and create environments free of stigma and discrimination



Resilience, Self-Efficacy, and Peer Support:

Canadian Webinar Series on Implementing the WHO Guidelines on Sexual and Reproductive Health and Rights for Women Living with HIV



Date: Friday, March 9th, 2018

Time: 9:00-10:30 PST, 12:00 -13:30 EST, and 18:00 - 19:30PM in Geneva.

Recording Link: Visit www.chiwos.ca for webinar recording

Webinar series hosted in collaboration with:

WHO HRP, CHIWOS, Canadian Positive People's Network, Oak Tree Clinic, Women's Health in Women's Hands, Canadian Aboriginal AIDS Network and the IBP Initiative

Webinar Objectives

- **Provide an overview** of current research about **resilience among women living with HIV and pathways between resilience and self-efficacy and other health outcomes** in the Canadian context using data from the Canadian HIV Women's Sexual and Reproductive Health Cohort Study (CHIWOS);
- **Introduce strategies and programs** developed by women living with HIV and allied researchers, clinicians, and serviced providers to understand the importance of peer support and leadership and capacity building in fostering resilience and self-efficacy, and how best to support peer leaders;
- **Gain insights** from women living with HIV to highlight gaps in research and priority areas for further attention;
- **Develop an action plan** on how to support the sexual and reproductive health and rights of women living with HIV in the Canadian context, including best practices to foster resilience, self-efficacy, peer support, and peer leadership among women living with HIV.



Creating an enabling environment: Good practice statement (GPS)

- Interventions must be provided in the context of an enabling environment
- **GPS A.1:** Psychosocial support interventions, such as support groups and peer support, provided by, with, and for women living with HIV, should be included in HIV care.
 - Peer support an essential mechanism to foster safe space, respect, and an enabling environment for WLWH



Framing Resilience, Self-Efficacy, and Peer Support

- **Meaningful Engagement of Women Living with HIV/Greater Involvement of People Living with HIV** through reciprocal mentoring, capacity building, inclusion of community knowledge and wisdom
- **Peer Support** improves mental health, strengthens coping skills, reduces isolation
 - Who is a “peer”?
- **Strengths-based approach** to focus on assets, self-determination, community knowledge, and peer partnership
- **Resilience:** Positive growth in the context of stress and adversity
 - Resilience is dependent on opportunity

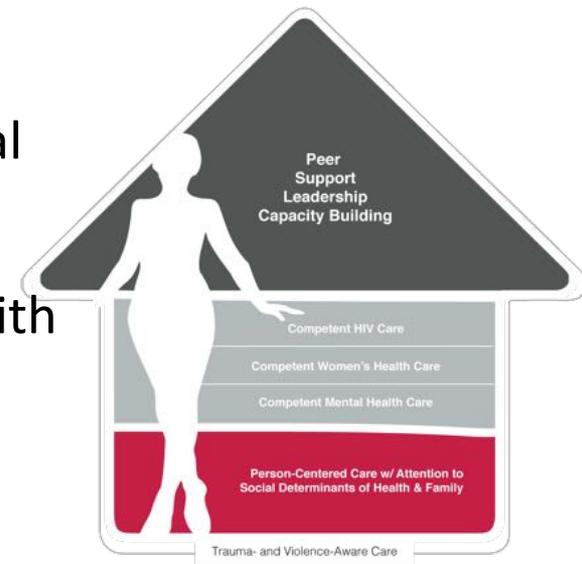
Presented by: Tracey Conway (CPPN) & Allyson Ion (McMaster University)



Research Overview:

Exploring social ecological pathways from resilience to quality of life among women living with HIV in Canada

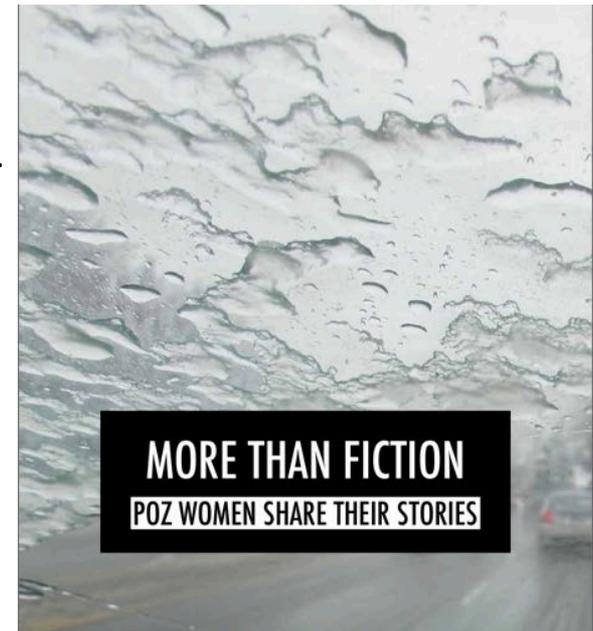
- Resilience to stress and adversity associated with positive health outcomes for WLWH
- Social and structural factors mediate pathways to resilience
- Lower resilience associated with economic insecurity and lower levels of mental and physical health
- Social support and receiving WCHC associated with higher resilience, improved physical and mental health
 - WCHC is strengths-based and person centered: may improve self-worth and self-advocacy



Implementation Overview

Presented by: Doris Peltier (Visioning Health), Shazia Islam (Alliance for South Asian AIDS Prevention)

- **Visioning Health:** Opportunities to “tell a different kind of story” through construction of strengths-based, culturally relevant, and gender-specific knowledge
 - Reconceptualize health: Health about the reclamation and celebration of culture, identity, healing, and spirituality and connecting with communities
- **More than Fiction Anthology:** Storytelling honours and validates resilience, builds community, and provides a personal narrative



Implementation Overview

Presented by: Kath Webster (PLDI)

- Positive Leadership Development Institute: Building self-efficacy through peer leadership and mentorship

- Enable others to act
- Create a shared vision and community



- Turning to One Another Network

- Bringing GIPA to Life through Peer Engagement and Collaborative Relationships

Objective: To increase the capacity of ASOs to build effective working relationships between ASO staff and Peers in multiple roles.



Key Priorities

- **Develop more contextualized knowledge** about how and why peer support works
- **Foster an enabling environment** by creating opportunities for peer leadership
- **Centre experiences of strength and resilience** to disrupt the deficit-based narrative
- Integrate **community, social, and structural factors** into policy and practice
- **Resilience-building** to be conducted in tandem with strategies to reduce HIV-related stigma and economic insecurity



Introduction: World Café Discussions

- Small discussion groups for each of the four webinar topics
- Please move to a discussion topic & table of your choice **BY 2:15**
- We have 60 minutes for small group discussions
- Each discussion group will have a note-taker and a facilitator
- Discussions will be guided by a set of key questions raised through the webinars
- Following the small group discussions, we will have an opportunity to come back together as a large group to discuss the **key messages that we would like reflected in the National Action Plan to Advance the Sexual and Reproductive Health and Rights of Women Living with HIV**
- Please record additional insights or points using the post-it notes provided, which can later be added to the discussion notes of other groups
- Discussion questions will also be circulated via a Google Form document after the event, and we welcome you to add any additional feedback



Large Group Discussion and Feedback

- We invite you to share thoughts on the following:

What are the key messages that we would like reflected in the national action plan?

- Please feel free to record any additional thoughts or insights on the post-it notes provided



Next Steps



Thank you!

Thank you to everyone who participated,
and to the many presenters who made
this discussion possible.

All webinar materials, including recordings, slides, and other
resources can be found at www.chiwos.ca

For more information contact

Rebecca Gormley, CHIWOS Coordinator: rgormley@cfenet.ubc.ca

Sarah Watt, Webinar Coordinator: sawatt@sfu.ca



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Social Sciences and Humanities
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Closing

Thank you!

