

Aboriginal People and HIV/AIDS: Legal Issues

info sheet 2

This info sheet explains the context of HIV/AIDS-related discrimination among Aboriginal people, discusses how discrimination is experienced by Aboriginal people living with or affected by HIV/AIDS, and explains how discrimination contributes to the spread of HIV among Aboriginal people.

DISCRIMINATION

THE CONTEXT OF DISCRIMINATION

Aboriginal people living with or affected by HIV/AIDS experience discrimination in many of the same ways that non-Aboriginal people do. What differentiates discrimination against Aboriginal people living with or affected by HIV/AIDS is the history of oppression and social disintegration experienced by First Nations, Métis, and Inuit communities.

The deplorable extent of the health and social problems in the Aboriginal population represents a human rights failure in Canada. Aboriginal people sustain a disproportionate share of the burden of physical disease and mental illness. The high incidence in the Aboriginal population of problems such as domestic violence, suicide, and alcohol abuse reflect conditions of poverty, political alienation, and racial discrimination.

The context of oppression makes work in the area of HIV/AIDS frustrating for Aboriginal AIDS workers and activists. The discrimination experienced by Aboriginal people is both systemic, reflecting a structure that has either historically excluded or sought the assimilation of Aboriginal people, and directly individualized.

HOW IS DISCRIMINATION EXPERIENCED?

The combination of racism, homophobia, and AIDSphobia means Aboriginal people living with or affected by HIV/AIDS are one of the most marginalized groups in Canada. The following reflect stories of discrimination described during the consultations for the Project:

- An Aboriginal man with AIDS became ill and went to emergency at a Winnipeg hospital. While awaiting treatment the man became agitated, and security guards escorted him out of the hospital without treatment, allegedly remarking that the man was drunk. The next day the man went to another hospital, where he died. This incident occurred in December 1998.
- There are stories of Aboriginal people living with or affected by HIV/AIDS being driven from their home communities. There is often fear of disclosing HIV status because of homophobia and AIDSphobia, and concerns about ostracism.
- Poverty forces many young people to take up the sex trade and drug-related activities to survive.

This is one of a series of nine info sheets on Aboriginal People and HIV/AIDS: Legal Issues

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For further information please contact

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DISCRIMINATION

- Two-spirited people (gay, lesbian, bisexual, and transgender people) are often seen as unhealthy, sinful, and/or unbalanced. The atmosphere in some communities is homophobic.
- HIV/AIDS-related discrimination in health care continues, particularly for Aboriginal people. Both in cities and small communities, some doctors are not knowledgeable about HIV.
- There are often problems with confidentiality in small communities.
- A study in Alberta revealed that Aboriginal people using emergency facilities at a hospital in Edmonton were given substandard treatment. Discrimination in health care is acute, particularly for street-involved and inner-city Aboriginal people.
- Members of a community refused to visit a woman with HIV or her family for fear that her whole family might be infected and that HIV might be contagious.
- Some bands cannot deal with HIV/AIDS at all because they are overwhelmed by the demands of other problems.

These stories suggest that discrimination against Aboriginal people living with or affected by HIV/AIDS comes from a variety of sources, from band adminis-

trators and community members to health practitioners and the public at large. Discrimination is often associated with misunderstandings about HIV/AIDS, is often reinforced by other social problems and other forms of discrimination, and finds its roots in a history of oppression and cultural denigration.

WHAT IS THE LINK BETWEEN DISCRIMINATION AND THE SPREAD OF HIV?

Two issues with respect to discrimination and the HIV epidemic can be distinguished: the personal impact of discrimination on Aboriginal people living with or affected by HIV/AIDS, and the way that discrimination contributes to the prevalence of risk factors for HIV infection among Aboriginal people.

The systemic and individualized discrimination experienced by Aboriginal people generally, and by Aboriginal people living with or affected by HIV/AIDS in particular, contributes to the impact of HIV/AIDS on Aboriginal communities. Factors adding to a higher risk of HIV transmission in Aboriginal communities include: high rates of sexually transmitted diseases and teenage pregnancy, which are evidence of unsafe sex; low self-esteem; high rates of sexual and physical violence; lack of access to health information and facilities; drug and alcohol use; and poor health in general.

The prevalence of risk factors for HIV in the Aboriginal population reflects the history of racism and oppression experienced by Aboriginal people in Canada.

The information in this series of info sheets, prepared in partnership by the Canadian HIV/AIDS Legal Network (Legal Network) and the Canadian Aboriginal AIDS Network (CAAN), is taken from three discussion papers prepared by Stefan Matiation, based on discussions with key informants working in the field of Aboriginal people and HIV/AIDS: (1) *Discrimination, HIV/AIDS and Aboriginal People*; (2) *HIV/AIDS and Aboriginal People: Problems of Jurisdiction and Funding*; and (3) *HIV Testing and Confidentiality: Issues for the Aboriginal Community*. Copies of the revised, second edition of the papers and of the info sheets are available on the Legal Network website at www.aidslaw.ca, through the Canadian HIV/AIDS Clearinghouse (tel: 613 725-3434, email: aids/sida@cpha.ca), or through CAAN (tel: 613 567-1817; fax: 613 567-4652; email: caan@storm.ca). Reproduction of this info sheet is encouraged. However, copies may not be sold, and the Legal Network and CAAN must be cited as the source of this information. For further information, contact the Legal Network (tel: 514 397-6828; fax: 514 397-8570; email: info@aidslaw.ca) or CAAN.

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