

# 5<sup>TH</sup> NATIONAL ABORIGINAL HEPATITIS C CONFERENCE

with added focus on Addiction

*“Strengthening Interventions  
– Creating Wise Practices”*



**1.888.285.2226**

Hosted by the  
CANADIAN ABORIGINAL AIDS NETWORK and the NATIONAL NATIVE ADDICTIONS PARTNERSHIP FOUNDATION

**FEBRUARY 17<sup>TH</sup>, 18<sup>TH</sup> & 19<sup>TH</sup> 2010**

**Ramada Plaza Hotel | 300 Jarvis Street | Toronto Ontario**

For more info visit [www.caan.ca](http://www.caan.ca) or [www.nnapf.org](http://www.nnapf.org) or email [hepc@caan.ca](mailto:hepc@caan.ca)

Funding made possible by



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## CONSULTANTS

DORIS PELTIER National Women's Coordinator/APHA Advocate

TREVOR STRATTON APHA Advocate/Consultant



# DAY 1

Wednesday, February 17th

• **Ballroom AB**  
• **Ballroom C**  
• **Gardenview**

• **Metro**  
• **Essex**  
• **Courtyard**

<b>7:00am - 7:00pm</b>			<b>Registration</b>		
<b>7:30am - 8:30pm</b>			<b>Breakfast</b>		
<b>9:00am - 10:30am</b>			<b>Welcome - Ballroom ABC</b> - Opening Prayer - <i>Wanda White Bird</i> - Welcome to Territory - <i>Chief Brian Laforme</i> - Opening Remarks - <i>Ken Clement, CEO CAAN</i> - Special Guests and Partners		
<b>10:30pm - 10:45am</b>			<b>Mini Break</b>		
<b>10:45am - 12:00pm</b>			<b>Opening Plenary - Ballroom ABC</b> - The Cedar Project: Hep C, HIV/AIDS and Aboriginal Youth - <i>Dr. Patricia Spittal, UBC</i>  - Hep C Program's Priority-Setting Process & Strategic Framework for Action - <i>Jeff Potts, PHAC</i>		
<b>12:00pm - 1:00pm</b>			<b>Lunch</b>		
<b>1:30pm - 2:45pm</b>			<b>Concurrent Workshops</b>		
<ul style="list-style-type: none"> <li>• <b>Gardenview</b> Film Festival</li> </ul>		<ul style="list-style-type: none"> <li>• <b>Ballroom C</b> Community Readiness &amp; Implementing Harm Reduction in Aboriginal Communities - <i>Trevor Stratton</i></li> </ul>		<ul style="list-style-type: none"> <li>• <b>Ballroom AB</b> A Gathering of Support: Developing an Aboriginal Grassroots Research Network on HIV/AIDS &amp; HCV - <i>Margaret Akan &amp; Gord Sinclair</i></li> </ul>	
<ul style="list-style-type: none"> <li>• <b>Metro</b> Strengthening your Well Being Hep Service BC Centre for Disease Control - <i>Gail Butt</i></li> </ul>		<ul style="list-style-type: none"> <li>• <b>Essex</b> The Epidemiology of Hep C in Aboriginal Communities: Resilience &amp; the Social Determinants of Health - <i>Dr. Tom Wong &amp; Dr. Paulette C. Tremblay</i></li> </ul>		<ul style="list-style-type: none"> <li>• <b>Courtyard</b> Kimamow Atoskanow Foundation - <i>Denise Lambert</i></li> </ul>	
<b>2:45pm - 3:15pm</b>			<b>Networking Break</b>		
<b>3:15pm - 4:30pm</b>			<b>Concurrent Workshops</b>		
<ul style="list-style-type: none"> <li>• <b>Gardenview</b> Film Festival</li> </ul>		<ul style="list-style-type: none"> <li>• <b>Ballroom C</b> Ready Set Go - Engagement and Retention of Youth in Need of Service - <i>Kim Sutherland</i></li> </ul>		<ul style="list-style-type: none"> <li>• <b>Ballroom AB</b> Arts-Based Approaches to Research - <i>Fred Andersen &amp; Marni Amirault</i></li> </ul>	
<ul style="list-style-type: none"> <li>• <b>Metro</b> Hep C Program, Prevention &amp; Harm Reduction Tool Kit - <i>Jeff Reinhart</i></li> </ul>		<ul style="list-style-type: none"> <li>• <b>Essex</b> Healing Our Spirit - <i>Shawna Tait &amp; Craig Bolton</i></li> </ul>		<ul style="list-style-type: none"> <li>• <b>Courtyard</b> National Native Addictions Partnership Foundation - <i>Leroy Bear</i></li> </ul>	
<b>4:30pm - 6:30pm</b>			<b>Dinner on your Own</b>		
<b>6:30pm - 9:00pm</b>			<b>Circle of Fire Ceremony - Metro Room</b> - Open to all Delegates - <i>Rick Lightening</i>		

**Breakfast & lunch is served daily.**  
**Banquet on Thursday night.**  
**All other meals are on your own.**

**Elder:** *Mary Louie (Okanagan, BC) & Rick Lightening (Cree, AB)*  
**Counselling Room:** *Frontenac*  
**CAAN On-Site Business Office:** *Parkview*

# DAY 2

Thursday, February 18th

• Ballroom AB  
• Ballroom C  
• Gardenview

• Metro  
• Essex  
• Courtyard

<b>8:00am - 4:00pm</b>			<b>Registration</b>		
<b>7:30am - 8:30pm</b>			<b>Breakfast</b>		
<b>9:00am - 10:15am</b>			<b>Opening Prayer (Métis) - Ballroom ABC</b> - Opening Panel - <i>Kerrigan, Leroy, Leona, Fox</i>		
<b>10:15pm - 10:40am</b>			<b>Networking Break</b>		
<b>10:40am - 12:00pm</b>			<b>Concurrent Workshops</b>		
<ul style="list-style-type: none"> <li>• <b>Gardenview</b> Film Festival</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Ballroom C</b> Historical Trauma: Let's Get Over It! - <i>Jay Laplante, Native Wellness Institute</i></li> </ul>	<ul style="list-style-type: none"> <li>• <b>Ballroom AB</b> Nurturing Safe Spaces: Strategic Action Plan on Aboriginal Women's HIV/AIDS Issues - <i>Doris Peltier</i></li> </ul>			
<ul style="list-style-type: none"> <li>• <b>Metro</b> National Aboriginal Council on HIV/AIDS Policy Issues Panel - <i>Margaret Akan, Moderator</i></li> </ul>	<ul style="list-style-type: none"> <li>• <b>Essex</b> Youth Council - <i>Shannon Alec &amp; Jessica Yee</i>  MUST BE UNDER AGE 30</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Courtyard</b> CAAN HR Steering Committee - <i>Trevor Stratton</i>  CLOSED MEETING</li> </ul>			
<b>12:00pm - 1:00pm</b>			<b>Lunch</b>		
<b>1:30pm - 2:45pm</b>			<b>Concurrent Workshops</b>		
<ul style="list-style-type: none"> <li>• <b>Gardenview</b> Film Festival</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Ballroom C</b> Hepatitis C – Back to the Basics - <i>Monique Fong &amp; Julie Thomas</i></li> </ul>	<ul style="list-style-type: none"> <li>• <b>Ballroom AB</b> Let's Talk About Hep C Baby: with youth! - <i>Jessica Yee &amp; Shannon Alec</i>  ALL AGES</li> </ul>			
<ul style="list-style-type: none"> <li>• <b>Metro</b> Proposing Strategies for Hepatitis C: Are they worth the effort? - <i>John Plater &amp; Art Zoccole</i></li> </ul>	<ul style="list-style-type: none"> <li>• <b>Essex</b> Increasing Awareness of Issues &amp; Preventative Practices of BBP/STIs/HIV &amp; AIDS and Promoting Healthy Choices - <i>Karen Saganiuk, Marilyn Willier, Marie Caluttung</i></li> </ul>	<ul style="list-style-type: none"> <li>• <b>Courtyard</b> National Native Addictions Partnership Foundation  - <i>Duane Ettienne</i></li> </ul>			
<b>2:45pm - 3:15pm</b>			<b>Networking Break</b>		
<b>3:15pm - 4:30pm</b>			<b>Concurrent Workshops</b>		
<ul style="list-style-type: none"> <li>• <b>Gardenview</b> Film Festival</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Ballroom C</b> Aboriginal Women's Research - <i>Renée Masching &amp; Doris Peltier</i></li> </ul>	<ul style="list-style-type: none"> <li>• <b>Ballroom AB</b> Injecting Realities - and Bill C-15 - <i>Sandra Ka Hon Chu &amp; Patricia Allard</i></li> </ul>			
<ul style="list-style-type: none"> <li>• <b>Metro</b> Healthy Living with Hepatitis - <i>Billie Potkonjak</i></li> </ul>	<ul style="list-style-type: none"> <li>• <b>Essex</b> Access Barriers and Facilitators to Screening and Treatment for STIs and HIV/AIDS  - <i>Cheryl A. Morris &amp; Gabe Saulnier</i></li> </ul>	<ul style="list-style-type: none"> <li>• <b>Courtyard</b> National Aboriginal Task Force on Harm Reduction - <i>Trevor Stratton</i>  CLOSED MEETING</li> </ul>			
<b>6:00pm - 9:00pm</b>			<b>Banquet &amp; Cultural Activities - Ballroom ABC</b> - Key Note Address, Invited Dignitaries - Entertainment & Cultural Sharing - Special Highlights: Aboriginal Women and Aboriginal Youth		

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**Banquet on Thursday night.**  
**All other meals are on your own.**

**Elder:** *Mary Louie (Okanagan, BC) & Rick Lightening (Cree, AB)*  
**Counselling Room:** *Frontenac*  
**CAAN On-Site Business Office:** *Parkview*

# DAY 3

Friday, February 19th

• Ballroom AB  
• Ballroom C  
• Gardenview

• Metro  
• Essex  
• Courtyard

7:30am - 8:30pm	Breakfast
9:00am - 10:00am	Opening Prayer (Eenoapik Sageatook) - Ballroom ABC <b>Taking Action:</b> Facilitated Discussion, Overview of Conference, Report back from HCV Caucus, Conference Chair
9:30pm - 10:00am	Break & Check Out
10:00am - 12:00pm	Opening Plenary - Ballroom ABC <b>Taking Action:</b> Roundtable Work <b>Closing:</b> Discussion & Finalization of a 10 Point Action Plan, Next Steps <b>Passing of the Medicine Bundle to Next Host</b>
12:00pm - 1:00pm	Closing Prayer - Box Lunch

**Breakfast & lunch is served daily.**  
**Banquet on Thursday night.**  
**All other meals are on your own.**

Elder: *Mary Louie (Okanagan, BC) & Rick Lightening (Cree, AB)*  
Counselling Room: *Frontenac*  
CAAN On-Site Business Office: *Parkview*

## DETAILED WORKSHOP DESCRIPTIONS

ALL WORKSHOPS AND EVENTS NOT MENTIONED IN THE FOLLOWING DESCRIPTIONS WILL BE IDENTIFIED ON SITE.

### DAY 1

CONCURRENT SESSIONS 1:30PM - 2:45PM

#### BALLROOM C

COMMUNITY READINESS & IMPLEMENTING HARM REDUCTION IN ABORIGINAL COMMUNITIES: CAAN HARM REDUCTION PROJECT

TREVOR STRATTON CAAN

The CAAN Harm Reduction Implementation Guide uses a Community Readiness Model to assess an Aboriginal Community's "stage of readiness". Participants will engage in the process of assessing how one Aboriginal community or agency views harm reduction; what might be some of the challenges; what resources in the community are available to help in the response; and given the 'mood' of the community, which strategies might be most appropriate to their stage of readiness.

## BALLROOM A B

A GATHERING OF SUPPORT: DEVELOPING AN ABORIGINAL GRASSROOTS RESEARCH NETWORK ON HIV/AIDS. WHAT ABOUT CO-INFECTION? HCV?

MARGARET AKAN & GORDON SINCLAIR All Nations Hope AIDS Network

Findings of the community based research project completed by ANHAN will be presented in a workshop highlighting data collected from focus groups. These four key questions are as follows:

- What is your knowledge about HIV/AIDS among Aboriginal people?
- How do you think our research can assist in reducing rates of HIV/AIDS among Aboriginal people?
- What kinds of services or supports regarding HIV/AIDS and Aboriginal people exist in your area?
- What kinds of services or supports would you like to see?
- What should our research priorities be over the next year? Three years? Five years?

An Inspirational story of co-infection, HIV and HCV will be shared and a sharing Circle to gather support for HCV co-infection research will close the session.

## METRO

STRENGTHENING YOUR WELL-BEING

GAIL BUTT Associate Director, Hepatitis Services, BC Centre for Disease Control

You can't fight Hepatitis C and HIV alone. Getting the help you need to live a healthy life requires cooperation from many health care providers and social service agencies. But getting the services you need isn't always easy. So many people have had to learn how to get the cooperation of service providers through trial and error. This workshop is designed to share the stories and lessons learned by others. Through these stories you will learn things like:

- How to keep from feeling rushed at appointments or overwhelmed by medical words
- How to talk about what you need
- How to negotiate for what you need
- When to get help from others

During the workshop you will also be able to help others by sharing stories and discussing how these stories might be shared with others who couldn't attend the workshop.

# ESSEX

## DIALOGUE & DELIBERATION

JEFF POTTS PHAC

The Renewed Public Health Response to Address Hepatitis C Stronger communities and healthier democracies drive effective public health interventions; and careful deliberation through conversation is the key to successful implementation of responsive public health policy. Dialogue and deliberation with stakeholders from across the country shaped the Government of Canada's Renewed Public Health Response to Address Hepatitis C and other infectious disease issues -- changing how communities across the country think about disease prevention, health promotion and social determinants of health. The Hepatitis C Program listened and learned that an effective response is a sustainable response that is grounded in communities poised to take action. Let's talk about it!

# DAY 1

## CONCURRENT SESSIONS 3:15PM - 4:30PM

### BALLROOM C

READY...SET...KEEP GOING! ENGAGEMENT & RETENTION OF YOUTH IN NEED OF SERVICE.

KIM SUTHERLAND Métis Person & Frontline Worker, Street Culture KIDZ Project Inc.

This workshop will explore one of the greatest barriers for Aboriginal youth, which is a lack of a conduit to be able to gain access to services. This program will show how it develops relationships between youth being served and agency mentors. Over 15 years of program experience will share its methods for how it engages and retains youth from at-risk populations. Workshop participants can expect a colorful (face-painting), humorous, exciting and interactive workshop.

### BALLROOM A B

ARTS-BASED APPROACHES TO RESEARCH

FRED ANDERSEN & MARNI AMIRAUULT CAAN

Arts-based approaches to qualitative research are becoming increasingly popular as researchers come to see the value in using tools such as video, photography, collage-making, etc in their research. This workshop explores Photovoice; an arts-based research process that uses participant photographs as a means to engage participants in group discussion that inspires social change. Issues of ownership, ethics, Photovoice methodologies (within the context of community-based research) and capacity-building will be discussed. This workshop will be facilitated by CAAN's Community-Based Research Facilitators (CBRFs), both of whom

who are part of CAAN's Research and Policy Unit. The CBRF role is to support Aboriginal communities to engage in community-based research.

## METRO

### CATIE'S HEPATITIS C PROGRAM, PREVENTION & HARM REDUCTION TOOLKIT.

JEFF REINHART Canadian AIDS Treatment Information Exchange

Front-line service providers have expressed a need for basic hepatitis C information and consistent messages that they can share with the communities they serve. Many current sources of hepatitis C prevention, care and treatment information are out-of-date and sometimes offer conflicting information. CATIE's Hepatitis C Program and Prevention and Harm Reduction Toolkit and are aimed at filling this resource gap with standardized, up-to-date and accessible information. Through interactive discussion, visual tools and lecture, the workshop will provide insight into the Hepatitis C Toolkit, including: an introduction to the structure and use of the bilingual Toolkit resources,

- the development of key-message materials and population-specific resources, as informed by research, community and people living with hepatitis C, and
- an exploration of key messages in hepatitis C in the areas of testing, prevention, treatment and care.

## ESSEX

### HEALING OUR SPIRIT

SHAWNA TAIT & CRAIG BOLTON Healing Our Spirit

We will be presenting a workshop on HEP C Education & Prevention for Youth. The workshop will be based on the basic elements of Hepatitis. We will discuss what Hepatitis A, B and C are, how the virus is transmitted and how the Youth can protect themselves by using Harm Reduction. The objective of the workshop is for our Youth to gain more knowledge on Hepatitis C and prevention in order to eliminate the spread of the virus. The workshop will be interactive and engaging for the Youth. We would like to target a youth audience in order to increase their knowledge and offer them the tools required to think twice about the risky behaviours they may put themselves into. We will then provide enough time to go over the information and will give the Youth a chance to ask questions and receive answers.

## COURTYARD

### NATIONAL NATIVE ADDICTIONS PARTNERSHIP FOUNDATION

LEROY BEAR

PRESENTER BIO: Leroy Bear is two-spirited person and a member of the Muskoday First Nation. He is the oldest of seven children and has had the support of family all his life. Although he has no children of his

own, he is Uncle to eight nieces; Grandfather to 11; and Great-Grandfather to two.

He has held many positions during his work experience – he has been a waiter, parking lot attendant, office clerk, retail store manager, student counselor, collections agent, assessment clerk, instructor, executive director, and financial/office manager. He has experienced life on the streets in many cities across Canada and his friends are people from various walks of life.

Leroy was diagnosed with Hep C in September 1999 while undergoing treatment for alcohol and drug addictions. Since then, he has strived to maintain a drug-free, sober life-style. His employment with NNAPF since January 2005 has helped him in his recovery journey.

## DAY 2

CONCURRENT SESSIONS 10:40AM - 12:00PM

### BALLROOM C

HISTORICAL TRAUMA: LET'S GET OVER IT

JAY LAPLANTE Project Director, Native Wellness Institute, Seattle, Washington

“Humankind has not woven the web of life. We are but one thread within it. Whatever we do to the web, we do to ourselves. All things are bound together. All things connect.” -- Chief Seattle, Duwamish

Is “historical trauma” already becoming cliché in our Native communities? Does the term hit too close to home? Are the pains of one’s past really connected to one’s present behavior and outlook on life? This workshop is designed both for persons living with Hepatitis C or HIV/AIDS and for their service providers. It will focus on definitions of and opinions about historical trauma, how decision-making and help-seeking behaviors are affected by one’s historical and personal past, and how the Native Wellness model—physical, mental, emotional, spiritual—can be incorporated into personal wellness and community healing interventions, used to uncover barriers to living a balanced life, and facilitate a more hopeful and positive future.

PRESENTER BIO: Jay LaPlante (Blackfoot and Cree) is a founding board member of the Native Wellness Institute and now serves as a Project Director. He grew up on the Blackfeet Reservation in Montana and received a B.A. in English from Portland State University in Oregon. For over twenty years, Jay has provided training and TA on suicide, substance abuse, child abuse and neglect, HIV/STDs, and other social, health, education, and political issues with numerous Indian tribes, organizations, and individuals, including youth throughout the US and Canada. His involvement with the first Gathering of Native Americans (GONA) training team helped many individuals to begin a journey of healing from the historical trauma of oppression, alcoholism, and poverty.

## BALLROOM A B

### NURTURING SAFE SPACES: STRATEGIC ACTION PLAN ON ABORIGINAL WOMEN'S HIV/AIDS ISSUES

DORIS PELTIER CAAN

A second draft of the CAAN Aboriginal Women's Strategic Action Plan will be presented and will give a preliminary overview of this work in development to address Aboriginal women-specific issues on HIV/AIDS. Following the presentation participants will have an opportunity to give their feedback and ask questions. The coordinator will also utilize a set of key questions inviting input and feedback on co-infection issues, on how these issues can be woven into this strategic action.

## METRO

### GETTING IT TOGETHER ~ A MINI-SYMPOSIUM ON WAYS AND MEANS TO DEVELOP EFFECTIVE POLICY ADVICE AND PROGRAMS FOR HIV AND HCV PREVENTION, CARE, TREATMENT AND SUPPORT.

MARGARET AKAN National Aboriginal Council on HIV/AIDS (NACHA), Moderator

The National Aboriginal Council on HIV/AIDS (NACHA) advises the Public Health Agency of Canada and Health Canada on Aboriginal HIV/AIDS policy and program development. Sixteen members who represent diverse First Nations, Inuit and Métis communities and agencies communicate regularly with government officials to provide input on Aboriginal health issues, cultural and social considerations, emerging concerns and wise practices. Council members also review documents and offer perspectives on complex matters such as the criminalization of HIV transmission or the need for more effective community-based interventions.

Council members will briefly introduce NACHA, provide information on HIV/AIDS and Hepatitis C epidemiology, and share an overview of frontline realities, challenges, responses and successes. Risk factors for HIV and Hepatitis C transmission are similar! Co-infection is common. Both epidemics advance due to deficiencies in the determinants of health and risk factors like unsafe intravenous drug use. Session participants will discuss what makes HIV and Hepatitis C similar and what makes them different in areas of prevention, diagnosis, treatment, care and support.

Participant discussions aim to identify best practices and what works on the frontlines. Guided by key questions, participants have the opportunity to formulate recommendations for NACHA to consider in their role as advisor to the federal government.

# DAY 2

CONCURRENT SESSIONS 1:30PM - 2:45PM

## BALLROOM C

HEPATITIS C 101 - BACK TO THE BASICS

JULIE THOMAS & MONIQUE FONG HEALING OUR NATIONS

In this workshop we will be discussing Hepatitis A and B, with most of the focus on Hepatitis C (HCV). This workshop allows people to learn about our liver and why it's important to us, and what effects HCV has on our liver. We will discuss who is at risk for contracting HCV, modes of transmission for the virus, and prevention methods as well. The workshop will allow others to view the signs, symptoms and treatment of HCV.

Throughout the workshop there are six photographs, participants will be asked "By looking at this person do you think they have HCV?", at the end of the workshop there will be an open discussion about the photos and the answer to the question asked.

## BALLROOM A B

LET'S TALK ABOUT HEP C BABY! WITH YOUTH

JESSICA YEE SHANNON ALEC

CAAN is proud to announce the creation of the first National Aboriginal Youth Council who will work nationally to address the rising rates of HIV and other STI's amongst the younger Aboriginal population and the realities our youth face dealing with the many issues surrounding HIV. Come out to this interactive "talk-show" style panel to meet the new members of the National Aboriginal Youth Council and hear directly from the source about how Hep C, HIV, and other STI's are affecting our next generations, but most importantly, what WE are doing about it!

## METRO

PROPOSING STRATEGIES FOR HEPATITIS C: ARE THEY WORTH THE EFFORT?

ART ZOCCOLE & JOHN C. PLATER

Art Zoccole and John Plater, both members of the Ontario Hepatitis C Task Force will describe their experience and perspectives on the recent development of a Proposed Strategy to Address Hepatitis C in Ontario 2009-2014. Sharing their insights on the development of the Ontario Strategy and others, they hope to encourage the session participants to consider if there a need for a National Aboriginal Hepatitis C

Strategy, how one might be developed and the role of advisory bodies such as the Ontario Hepatitis C Task Force in the development of policy by governing bodies.

## ESSEX

INCREASING AWARENESS OF ISSUES AND PREVENTATIVE PRACTICES SURROUNDING BBP/STIS/HIV/AIDS AND PROMOTING HEALTHY CHOICES.

KAREN SAGANIUK, MARILYN WILLIER & MARIE CALUTTUNG

Building on the Youth Gathering and Family Violence Workers Facilitation training, and encouraging Aboriginal People living with Hepatitis C and/or HIV/AIDS to share their personal stories for a deeper understanding of the human side of the illness and to inspire ideas of how to better support HIV-positive people in their communities

## COURTYARD

NATIONAL NATIVE ADDICTIONS PARTNERSHIP FOUNDATION

DUANE ETTIENNE

PRESENTER BIO: 2 Spirited Band member of the Skeetchasten First Nation, British Columbia Completed two years of BA, two years of French Language (Alliance Francais), Studied in Spanish for two years at the University of Madrid, and also two years at University of Completese, Mexico City. Their after was self-employed for Private, Aboriginal, Non-Profit, Federal Government Departments over at the last twenty years in Specific Claims, Executive Assistant Positions. But while working in the HIV/AIDS field, a few of the Boards and Committees I've sat on are listed below:

Two-Spirited People of the First Nations; Board Member

HIV/AIDS Analyst – Assembly of First Nations; represented AFN on various boards/committees/workshops/ presentations, two Aboriginal Community Based Research Projects/TB.

CAAN Board Member

APHA Caucus

APHA Coordinator for CAAN

The Canadian Aboriginal AIDS Network's "Skills Building Forum '99"

Laboratory Centre for Disease Control Working Group

Canadian Strategy on HIV/AIDS; for Aboriginal people living on-reserve and off-reserve.; Community based infrastructure; Move from a federal strategy to a nationally shared approach, more team-building; focus on education and prevention.

National Aboriginal Reference Group on HIV/AIDS (NARGHA)

ABORIGINAL WORKING GROUP ON HIV/AIDS EPIDEMIOLOGY AND SURVEILLANCE; 1998-99: developing ways for better use of HIV/AIDS statistics among Aboriginal people in prevention and care programs, as well as mechanisms to liaise its work with other governmental HIV/AIDS programs.

# DAY 2

CONCURRENT SESSIONS 3:15PM - 4:30PM

## BALLROOM C

ABORIGINAL WOMEN'S RESEARCH

DORIS PELTIER & RENEE MASCHING CAAN

This session will explore CAAN's recently completed projects regarding Aboriginal Women, HIV and AIDS with an emphasis on next steps. Highlights and overview of research targeting Aboriginal Women done by CAAN and some of its member groups will outline key issues and some recurring messages. The session will engage the audience in matters of relevance to Aboriginal women and seek to identify emerging research needs. Discussions will include Hep C issues as well as co-infection needs.

## BALLROOM A B

" INJECTING REALITIES " : EFFECTIVE ADVOCACY FOR HIV PREVENTION IN CANADIAN PRISONS, INCLUDING BILL C-15 (MANDATORY MINIMUM SENTENCING)

SANDRA KA HON CHU & PATRICIA ALLARD Canadian HIV/AIDS Legal Network

Various studies have reported rates of hepatitis C virus (HCV) and HIV among people in prison in Canada to be at least 20 and 10 times higher than in the population as a whole, in part because they have inadequate access to HIV prevention tools such as sterile needles and syringes. This has had a disproportionate impact on Aboriginal people, who are overrepresented in prison. Needle and syringe programs (NSPs) are a proven, cost-effective means of reducing HIV and HCV transmission among people who inject drugs, yet they do not exist in Canadian federal prisons.

While much public health and human rights evidence supporting the implementation of PNSPs has been gathered, the voices of those who have been placed most at risk of HIV and HCV infection have been missing. This project sought to bridge that gap by interviewing people from across the country to learn more about their experiences in federal prisons, including their reasons for injecting, their use of needles and make-shift implements and the sharing of these materials. In 2008 and 2009, 50 interviews were conducted documenting the personal experiences of people who had injected drugs in prison. Among those interviewed were 12 individuals who identified themselves as Aboriginal or Métis. This session will highlight these interviews. It will also discuss Bill C-15, which is mandatory minimum sentences for drug convictions – why it's bad policy and its impact on people's health and human rights; and the prison affidavit project – and the disastrous consequences of not having comprehensive harm reduction measures in prison (e.g. prison needle exchange) on people inside

## METRO

### HEALTHY LIVING WITH HEPATITIS

BILLIE POTKONJAK CLF

This session by the Canadian Liver Foundation will give an overview of the liver, what the liver does, what happens when you have liver disease, and an overview of the most common types of liver disease with the emphasis on hepatitis C

## ESSEX

### ACCESS BARRIERS AND FACILITATORS TO SCREENING AND TREATMENT FOR STIS AND HIV/AIDS.

CHERYL A. MORRIS Registered Nurse and Regional Coordinator of the Blood Borne Pathogens/ Sexually Transmitted Infections Prevention Program (FNIHB-ATLANTIC)

GABE SAULNIER Healing Our Nations (former recipient of a national CAAN award for his involvement in the first stage of the research project)

Pilot project to examine sexual health care service needs and priorities of Aboriginal people living in rural communities as well as barriers and facilitators surrounding the screening and treatment for STIs and HIV/AIDS. The community-based questionnaire will provide a more contextualized picture of Aboriginal people's views around HIV/AIDS and STI testing, treatment and prevention to inform the development of strategies that better address the distinct experiences and realities of this population. Results of this research project can be used to help develop culturally appropriate sexual healthcare initiatives and enable Aboriginal voices to be better heard and included in these processes. The finalized questionnaire will be made available to communities via Health Canada and HON's websites. Building community-based partnerships will significantly contribute to strengthening community capability in the face of HIV and other STIs (e.g. chlamydia, gonorrhea, HPV) epidemics.

# DAY 3

HOTEL CHECK OUT IS AT 11AM

## BALLROOM ABC

- TAKING ACTION: FACILITATED DISCUSSION, OVERVIEW, REPORT BACK
- FINALIZATION OF 10 POINT ACTION PLAN
- PASSING OF THE MEDICINE BUNDLE TO NEXT HOST
- NEXT STEPS

The draft 10 Point Action Plan is at the end of this conference program. It is meant to stimulate discussion and ideas, explore gaps and needs, and ideally, at the closing session, people can come up with final language and terminology to make this suggested document ready for presentation to key stakeholders. It is our hope that various Aboriginal and non-Aboriginal groups will endorse this document and add their name to it, as a guiding statement of what needs to happen to turn the HCV epidemic around for Inuit, Métis and First nations People in Canada. The suggested actions are NOT meant to dictate what needs to happen, rather only serve to get people thinking along these lines.

ALL KEY STAKEHOLDERS STRONGLY ENCOURAGED TO ATTEND.

MOST DELEGATES WILL DEPART FRIDAY.

BOX LUNCH PROVIDED AT NOON ON FRIDAY TO ASSIST THOSE LEAVING ON EARLIER FLIGHTS.

# APPENDIX #1

## TEN POINT ACTION PLAN TO ADDRESS HEPATITIS C AMONG INUIT, MÉTIS AND FIRST NATIONS IN CANADA

**PREAMBLE:** This consultation version is ONLY for the purpose of providing a document that stakeholders can consider and eventually adopt. The goal is to have this document almost finalized at the closing session of the 5th National Aboriginal Conference on Hepatitis C with added focus on Addictions, and after incorporating feedback and adjusting language, have national Aboriginal stakeholders become signatories to this action plan.

These ten points are based on reviewing federal government funding and some related documents, and are intended only to stimulate discussion. They are by no means in final form. All or none can be taken and are offered only as suggested actions.

1. Formation and financial support for a National Aboriginal Task Force on Hepatitis C.
2. Define and utilize a cultural framework that allows Inuit, Métis and First Nations to design and implement population-specific programming allowing for language, culture, literacy and other needs.
3. Where possible and cost-effective, intersect with other funding streams to adequately address co-infection issues.
4. Strengthen and apply a pillar of meaningfully involving Aboriginal People living with Hepatitis C (including those who have cleared the virus and those co-infected with HIV/AIDS) in all aspects of this area of work (similar to GIPA in HIV/AIDS work).
5. Develop a mechanism to allow seamless transition from one national conference to another, with clear support for earmarked federal funding so that each conference builds on previous work and is more outcomes-based.
6. Create and strengthen partnerships between Aboriginal and non-Aboriginal stakeholders to ensure this work has the best possible reach.
7. Develop and lead annual report cards on progress taken indicating where targets have not been achieved and why.
8. Support an evidence-based approach, by creating new knowledge, building on existing knowledge and work with Knowledge Brokers to ensure all stakeholders have up-to-date resources that are SMART.
9. Respect and apply a community-development approach, maximizing opportunities for Aboriginal communities to become full partners in leading a response.
10. Continue to identify, review, modify or expand all work of the National Task Force based on funding climates, community needs, and evidence base.