



NEWS RELEASE

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New pilot survey releases preliminary highlights about HIV and Aboriginal Peoples in Regina

REGINA - Preliminary findings of a new HIV related survey among Aboriginal people in Regina were released today.

The pilot study, called A-Track (Aboriginal-Track), is the first of its kind in Canada to look at HIV prevention, testing and care, along with sexual and drug use indicators among Aboriginal people.

The Public Health Agency of Canada (PHAC) funded the A-Track study as part of a pilot for a national surveillance program aimed at monitoring trends in risk behaviors and rates of HIV and related infections among Aboriginal people in Canada.

“Reducing the rates of HIV and related infections among Aboriginal peoples is important,” said Dr. Gregory Taylor, Deputy Chief Public Health Officer, at the Public Health Agency of Canada. “That is why the Government of Canada has worked with national and local Aboriginal organizations to develop the A-Track Surveillance System.”

The A-Track pilot survey in Regina was done in full partnership with the Aboriginal community, including Elders, front line health and social services agencies in Regina, the Regina Qu'Appelle Health Region, All Nations Hope

AIDS Network (ANHAN) in Regina, First Nations University of Canada and the Canadian Aboriginal AIDS Network.

“This survey was done in a respectful and meaningful partnership with all organizations involved,” said Margaret Poitras, CEO from ANHAN. “ANHAN looks forward to the life that this work will bring to the Aboriginal community in Regina in the restoration of the people, the families and many diverse nations represented.”

The A-Track survey was conducted from December 5, 2011 to June 15, 2012 in Regina with 1,064 First Nations and Métis people participating. Participants completed a questionnaire and provided a finger-prick blood sample which was tested for the presence of HIV, hepatitis C and syphilis antibodies.

It is important to note that these findings are not necessarily reflective of the Aboriginal population as a whole in Regina as the survey was based on a self-selected sample of people at selected venues in the city and therefore may have some elements of bias in it.

Key results of the A-Track survey in Regina include:

Access to health services

- 77 per cent had visited a health care provider for a diagnosis or consultation in the 12 months prior to the survey.
- 30 participants self-reported that they previously had tested HIV positive. The majority of them (87 per cent) reported being under the care of a physician for their HIV infection.
- Among those who visited a health care provider, 28 per cent reported accessing traditional or Aboriginal-specific services or health care.
- Of the participants who injected drugs during the six months prior to the survey, 84 per cent accessed harm reduction and needle exchange services in the 12 months prior to the survey.

HIV-related knowledge

- 93 per cent of respondents correctly identified that using condoms is a way to prevent HIV infection.
- 70 per cent of respondents correctly identified that limiting sex to one, faithful, uninfected partner is a way to prevent HIV infection.

HIV testing and treatment

- 70 per cent had been tested for HIV during their lifetime; of those, 68 per cent had been tested during the 12 months prior to the survey.
- Of the 1,045 participants who provided a blood sample, five per cent were positive for HIV, and of those 46 per cent were not aware of their positive status.

Sexual and drug use indicators

- In the 12 months prior to the survey, 18 per cent reported not having sex, 42 per cent reported having one sex partner and 40 per cent reported two or more partners.
- Of those who reported having two or more sex partners, 53 per cent had used condoms the last time they had sex.
- 50 per cent of all surveyed had never injected drugs for non-medicinal purposes and 32 per cent had injected drugs in the six months prior to the survey.
- Of those who reported injecting drugs in the six months prior to the survey, nine per cent reported injecting with needles and/or syringes that had already been used by someone else and a slightly higher proportion 13 per cent reported that the needles and/or syringes they used were subsequently used again by someone else.

“The preliminary survey findings speak to the critical importance of continuing to support both preventive and care strategies that ensure HIV testing is readily accessible and that testing for HIV and other viruses are offered at all appropriate healthcare interactions in Regina,” said Dr. Maurice Hennink, Deputy Medical Health Officer for the Regina Qu’Appelle Health Region.

“The findings from this survey provide us with a deeper understanding of some of the factors present in the community that will have an impact on service provision and strategies,” said Dr. Carrie Bourassa from the First Nations University of Canada.

“The preliminary results of the A-Track survey are consistent with research findings involving smaller numbers of participants in other parts of Canada and highlight the importance of investing in identified areas of community, strengthening community-based response to HIV and AIDS,” said Ken Clement, CEO of the Canadian Aboriginal AIDS Network.

The results of the Regina A-Track survey are still being analyzed and a final report will be released in a few months. These results are only preliminary findings.

A summary of the A-Track survey process and its key findings is available.

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