

Canadian Aboriginal AIDS Network

14th Annual General Meeting
Resolutions 2012

1. Adverse Side Effects

Whereas: Many APHAs are living with HIV & are on HIV treatment; and

Many APHAs experience adverse side effects; and

Be it resolved that: CAAN partner with CATIE to develop a culturally appropriate treatment information fact sheets that highlight adverse side effects.

Motion Tabled

2. Communication Assurance Policy Specific to Board Members

Whereas: It is recognized, by the membership APHA Caucus, that improvements or enhancements for communication links between Board members and CAAN; and

It would be beneficial for continued and regular communication between board members, CAAN and APHA's Caucus; and

Board members, and the expression for an enhanced communication standard by APHA Caucus, are aware of specific communication barriers;

Be it resolved that: CAAN develop clear and concise communication policies that will allow continued and enhanced involvement of Board members and APHAs Caucus, thus giving assurances that Board members remain active throughout elected term.

Motion Carried

3. Strategy for Cross-Cultural & Education

Whereas: There is room for enhancement and/or developing of ceremony within many AIDS SERVICE Org's for APHA's; and

There is a division, whether implicit or explicit, of understanding between ASO's and APHA's; and

With regard to healing & health communication, specific to historical and present-day resilience, there is a recognized need for enhanced communication;

Be it resolved that: CAAN and its members strengthen and share specific cross-cultural education/prevention resources.

Motion Carried

4. International AIDS Conference (IAC) 2014 - Australia

Whereas: IAC has offered faith based speakers & panels at sessions & workshops; and
Indigenous peoples have faith based belief, values, & ceremonies of healing and celebration; and

Indigenous peoples have much knowledge to share about our ways of honoring the Creator, ways of healing & ways of wellness;

Be it resolved that: CAAN create a sub-committee of the existing international indigenous working group on HIV & AIDS to address faith-based initiatives. (IIWGHA)

Motion Carried

5. Integration of Issues

Whereas: CAAN originated as a national organization focused on HIV and AIDS; and

The issue related to HIV and AIDS are complex and require interventions that reflect the Aboriginal strategy on HIV/AIDS II (ASHAC II); and

Funding is being directed to integrated approaches and addressing determinants of health;

Be it resolved that: CAAN be supported in broadening the original mandate to reflect current realities to include HCV/STI/TB & Determinants of Health.

Motion Carried

6. Mental Health

Whereas: CAAN recognizes the need for support for all populations experiencing different spheres of mental health issues (ie. Bipolar, deficiencies, mental, emotional, and psychological, trauma, post-traumatic stress); and

CAAN and the National Aboriginal Mental Health Network (NAMHN) will create a working group to address the mental health concerns of adult children;

Be it resolved that: CAAN develop factsheets with NAMHN.

Motion Carried

7. Anti-bullying

Whereas: CAAN provides support for APHAs regardless of where they reside; and

APHAs experiences bullying by service providers when accessing services related to their holistic health needs; and

CAAN supports the overall health of APHAs;

Be it resolved that: CAAN raise the issue of bullying of APHAs nationally by creating radio and television spots.

Motion Carried

8. Constitution and Bylaw Amendment

Whereas: Section 8 of the Corporate Bylaws Board of Directors states "... (1) Atlantic ... 'indicating (1) representative for 4 provinces; and

Section 8 indicates one (1) seat on existing Board of Director for Atlantic; and

It is recognized that CAAN is a voice for all Canadian regions; therefore each Province and Territory has opportunities to be on the CAAN Board;

Be it resolved that: Amendments be made to sections of said bylaws to state ... ' (4) Atlantic ... ' or "... (1) Nova Scotia; (1) Prince Edward Island ... '

Motion Carried

9. National Aboriginal Archive on HIV & AIDS

Whereas: Métis, Inuit and First Nations people have created HIV & AIDS prevention, care, treatment and support, policy and resource materials; and

There is no central archive of ephemera, print and digital materials available for historical, cultural and scientific research; and

Future generations to come have access to the materials;

Be it resolved that: CAAN explore the best mechanisms to establish archive regarding Aboriginal people and HIV & AIDS.

Motion Carried

10. Two-Spirit Environmental Scan

Whereas: CAAN provides community needs assessment for First Nations, Inuit, Métis, Indigenous, Aboriginal GBLT people in Canada; and

Work with EGALE and the National Aboriginal Youth Council on HIV and AIDS;

Be it resolved that: CAAN conducts community needs assessment for First Nations, Inuit, Métis, Indigenous, Aboriginal GBLT people in a timely manner; and

CAAN conducts an environmental scan of the gaps and services for First Nations, Inuit, Métis, Indigenous, Aboriginal GBLT needs.

Motion Carried

11. Supporting Leadership Opportunities for Aboriginal Youth Living with HIV and AIDS

Whereas: Aboriginal youth ages 15 to 29 comprise almost one-third (32.65) of the population of Aboriginal people living with HIV/AIDS; and

Aboriginal youth living with HIV/AIDS are critical in the response, prevention, treatment, and education about HIV/AIDS in our communities; and

There is a severe lack of Aboriginal youth living with HIV/AIDS presence in the governance structures of CAAN and affiliated committees;

Be it resolved that: CAAN provide infrastructure and ongoing support for the meaningful involvement and inclusion of Aboriginal youth living with HIV/AIDS, which should also include meaningful mentorship opportunities to take on leadership

roles with the support of the National Aboriginal Youth Council on HIV/AIDS (NAYCHA).

Motion Carried

12. Aboriginal Youth and Research

Whereas: There is currently a lack of information and research led by Aboriginal youth themselves about why other Aboriginal youth are specifically not accessing testing, care, support and education of HIV/AIDS;

Be it resolved that: CAAN secure community based research funding to support Aboriginal youth to find out about these realities and lead research initiatives around these gaps.

Motion Carried

13. Aboriginal Youth and Elders

Whereas: The knowledge and sharing between youth and elders/grandparents is critical to the healing and wellness of Aboriginal communities, including the HIV/AIDS response; and

Having intergenerational dialogue about topics such as healthy sexuality, harm reduction, Two-Spirit, and other issues of sexual/reproductive health is integral to foster this healing and wellness;

Be it resolved that: CAAN provide support to host an Elders/Youth dialogue and discuss the potential for creating an Elders/Grandparents Council.

Motion Carried

End