



2008 RESOLUTIONS REPORT

An update to the membership of the Canadian AIDS Society on the status and responses planned to resolutions passed at the 2008 People Living with HIV/AIDS Forum and Annual General Meeting. These resolutions are passed and used to influence the 2009-10 workplan as directed by the Board of Directors.

FORUM RESOLUTIONS

RESOLUTION #1

Whereas the struggle against AIDS in Canada has been built on a strong partnership between researchers, health care providers and the community;

And whereas community-based prevention work as well as research, education and support services are essential elements of the national strategy to combat the epidemic

And whereas the federal government has reduced its grants and contributions made by the Public Health Agency of Canada through the AIDS Community Action Program (ACAP) by \$2.5 million in 2007-08 and these cuts will be ongoing throughout Canada.

Be it resolved that the Canadian AIDS Society calls upon the Government of Canada to fulfill its obligations to the fight against AIDS by immediately restoring AIDS Community Action Program (ACAP) funding to the levels announced in September 2006.

And further, that copies of this Resolution be forwarded to the Prime Minister, and the Federal Minister of Health

Moved by: Murray Jose

Seconded by: Angel Parks

Vote: Carried

This resolution has been fully acted upon. Beyond delivering this resolution to the offices of the Prime Minister and the Federal Minister of Health, CAS has met repeatedly with decision makers and leaders representing all parties in Canada to ensure support for funding the community-based response to HIV/AIDS in Canada. During the federal election campaign, CAS was able to ensure that three out of four party leaders publicly announced their support for HIV/AIDS funding in Canada. Furthermore, despite threatened cuts across the Public Health response in Canada, CAS has been able to ensure that HIV/AIDS funding is protected. As recently as the last week of February, the Minister of Health, during a Standing Committee on Health presentation, agreed that HIV/AIDS funding is protected and secure. This has been accomplished through the development of strategic partnerships within the HIV/AIDS movement, including support from researchers, medical service providers, pharmaceutical partners, corporate leaders, and lobbyists; all led by the Canadian AIDS Society – representing the voice of the community based movement in Canada. While we have been unable to secure an increase in funding to the previously promised level of 84.4 million dollars, CAS has been successful in protecting Grants and Contributions at the community level.

RESOLUTION #2

Whereas the improper use of research and subsequent media distortion over the last year have contributed to dangerous and inaccurate policy and public opinion;

Whereas Resolution 3 from the 2007 AGM was approved regarding this issue;

Be it resolved that CAS recommit and strengthen their communication denouncing all proposals to treat HIV that does not involve the free and informed consent of the individuals involved.

Moved by: Murray Jose

Seconded by: Bill Merryweather

Vote: Carried

This resolution requires a commitment to entrench messages of free and informed consent within media responses prepared by CAS. As with the previous year's resolution, CAS has ensured that it responds to stories and coverage in the media that may be deemed to promote adverse public policy. While coverage of these responses is limited by the editorial decisions of media outlets, CAS has also taken steps to explore systemic responses within public policy spaces that will further address this issue. Specifically, this issue has been discussed with representatives from the Canadian Association of HIV Researchers (CAHR).

Communications strategies on this issue are aligned with the messages and concerns raised through interconnecting issues such as criminalization and universal access. CAS supports the rights of people living with HIV/AIDS to make informed decisions about their care and lives with HIV. This central tenant informs all positions taken by CAS on this and related issues. The development of a Memorandum of Understanding for doctors and patients (presented at the Forum in 2007) highlights this issue. As well, as an upcoming paper on treatment as prevention will help to further define CAS' position on this issue and will be presented to the board for discussion and development of a formal position on this topic.

RESOLUTION #3 – WITHDRAWN

No CAS response required.

RESOLUTION #4 – DEFEATED

No CAS response required.

RESOLUTION #5 – WITHDRAWN

No CAS response required.

RESOLUTION #6

Whereas the HIV Forum is the only national annual gathering of positive people;

And whereas people are continuing to become infected, ill and die; and whereas there is a need to raise awareness in the general public about the epidemic;

Be it resolved that CAS coordinates an annual public event during the HIV Forum to emphasize the continued struggle and impact that HIV has on people living with HIV and the general public.

Moved by: Glyn Townson

Seconded by: David Nixon

Vote: Carried

This resolution has been put forward to the HIV Committee of the Board of Directors for discussion and review as the People Living with HIV/AIDS Forum Agenda is being struck. The public event planned for this year's gathering involves an opportunity for the public to view portions of the AIDS Memorial Quilt that is housed with the Names Project. CAS has been working with volunteers who hold pieces of the quilt across the country to identify a safe storage and access agreement to ensure that the quilt panels are viewable as part of Canada's public memory and response to HIV/AIDS.

Efforts are currently under way to ensure that the Minister of Canadian Heritage takes responsibility for the quilt, as an artifact of importance to all Canadians. CAS is seeking to have the Minister, or a representative, attend the Forum to accept this charge. Public viewing of the quilt will become an annual part of the Forum.

The Terms of Reference for the HIV Committee of the Board of Directors have also been amended to include the planning of future public events to be associated with the Forum on an ongoing basis.

AGM 2008 RESOLUTIONS

RESOLUTION #1

Whereas in the past few years many people living with HIV/AIDS (PLWHIV) have been accused of criminal conduct for not revealing their seropositive condition to sexual partners;

Whereas decisions to lay charges against PLWHIV/AIDS appear random and often do not reflect the real risk (to public health or to partners);

Whereas the risk of transmission as evaluated by the courts are often random and unscientific;

Be it resolved that CAS summon and direct a task force on ways to ensure an appropriate redress procedure with respect to public health law; (amendment: ...to ensure an appropriate recourse with respect to public health law and a framework to limit recourse to criminal law)

Be it further resolved that this task force be composed of various partners (for example but not limited to, battered women advocacy groups, provincial AIDS Service Organization coalition representatives, PHAC and the Canadian HIV/AIDS Legal Network);

Be it further resolved that this task force be directed to explore different courses of action and recommendations, which are to be developed (described) wherever possible, with the aim of having them officially confirmed by PHAC.

Moved by: David Thompson, Canadian HIV/AIDS Legal Network

Seconded by: Yvan Savoie, L'ARCHE de L'Estrie

Vote: Carried (as amended; three abstentions)

This resolution has been shared with the Canadian HIV/AIDS Legal Network and CATIE who have begun to develop and present workshops and presentations across Canada addressing this issue.

In Ontario a working group has been formed to address the issue of criminalization within the provincial boundaries. However, given the unique nature of this work, three national organizations – CAS, CATIE and the Canadian HIV/AIDS Legal Network – have actively participated in this group. Resources developed by this group have been shared with other CAS member organizations. CATIE and the Legal Network have been positioned to provide response through workshops and community forums across Canada. CAS has monitored the issue from the perspective of people living with HIV/AIDS and incorporated messages and findings into training materials and communications tools. We are also working to ensure that the community perspective on this issue is represented within responses planned by the Public Health Agency of Canada (PHAC), including representation on any advisory committees. CAS is pushing PHAC to develop the guidelines on HIV Transmission (previously published by CAS) in order to present a national standard and statement on HIV transmission and risk. We will continue to monitor and

advise PHAC through this process of public policy discussion and will seek to provide perspective where required, and push for broad-based consultation, where possible, to ensure the inclusion of all perspectives in responding to this issue.

RESOLUTION #2

Whereas many PLWHIV/AIDS live longer than ever before and will be using the services offered to senior citizens;

Whereas retirement homes, psychosocial workers, and health care and social service professionals have not been adequately trained or prepared to provide support and aid to an aging population with HIV/AIDS;

Whereas vulnerable populations experience aging differently than people in the traditional model where a person is surrounded by a family network;

Whereas there is little prevention education aimed at senior citizens;

Whereas HIV/AIDS community organizations could benefit from more information and training on the problems of aging and HIV;

Be it resolved that CAS call on the appropriate partners to begin considering possible ways to implement efficient means of interventions with respect to HIV and aging.

Moved by: Stéphanie Lalande, Bureau regional d'action sida

Seconded by: Louis-Marie Gagnon, Maison Plein Coeur

Vote : Carried

This activity has been added to the 2009-10 workplan. CAS has already secured some private sector support for this activity and, building on this, a project proposal will be submitted to the Human Resources, Social Development Canada, Social Development Partnerships Program – Disability call for proposals. This project will begin with a needs assessment among people living with HIV/AIDS and will develop a response plan that will include identifying partners in research, service provision, and community-based services.

RESOLUTION #3

Be it resolved that the CAS board of directors begin strategic planning in 2008/2009 and build into the Forum and AGM agendas in 2009, opportunities for members and delegates to participate in the strategic planning process and commit the resources necessary to complete the process of strategic planning.

Moved by: Michael Sobota, AIDS Thunder Bay

Seconded by: Murray Jose, Toronto PWA Foundation

VOTE: Carried

Resources have been allocated in the 2009-10 workplan and budget. A Strategic Planning Committee of the Board of Directors has been struck. This committee will seek to further establish a broader National Advisory Committee consisting of People Living with HIV/AIDS and other regional representatives. In addition to recruiting an independent consultant to assist in the strategic planning process, the Board will conduct a preliminary survey of participants at the 2009 Forum and AGM.

RESOLUTION #4

Whereas heterosexuals experience disparity with regards to HIV/AIDS education, treatment, care and support;

Whereas heterosexuals are not listed as a targeted population according to the Federal Initiative;

Be it resolved that CAS look at finding resources to conduct a targeted HIV/AIDS prevention campaign addressing the vulnerabilities that place heterosexuals at risk of transmission of HIV/AIDS.

Moved by: Roland Boudreau, AIDS New Brunswick

Seconded by: Blaine MacIsaac, AIDS Coalition of Cape Breton

While we do not have the resources to launch a national prevention campaign, we did aim to develop an AIDS Awareness Day Campaign that had broad-reaching public appeal. Vulnerabilities to risk for transmission of HIV/AIDS are not limited to specific social groups, but rather should be focused on patterns that are better defined through behaviour than social grouping. This has been the long-held opinion of CAS and one that is the focus of the HIV Transmission: Guidelines for assessing risk (Transmission Guidelines).

The 2008 World AIDS Day Campaign adopted this message by asking people to examine their own behaviour to assess their risk for contracting HIV/AIDS. This campaign - RUPositive.ca - has at its centre a web-based quiz which provides a glimpse of some of these risk behaviours and places respondents on a continuum of risk, mirroring the continuum described in the Transmission Guidelines. During December this campaign was advertised in L'actualité, La Presse, Macleans and the Globe and Mail. Posters for the campaign were distributed through CATIE to public health clinics, HIV specialists, schools, hospitals and AIDS Service Organizations. This more public and generalized campaign is being promoted throughout the year, during which time we will collect the anonymous results from the web-based quiz and work to incorporate them into CAS' 2009 World AIDS Day campaign. Linking personal responsibility with ownership and leadership, CAS will call on Canadians to know their own risk, status, and role in helping to stop the spread of HIV/AIDS.

RESOLUTION #5

Whereas CAS has members outside Quebec who only speak French;

Whereas CAS is a bilingual national organization;

Whereas the issues of language are barriers to the full participation to the activities of the CAS;

Be it resolved that CAS work towards making the necessary resources available in order to enable all of its members to participate in all caucus meetings in the official language of their choice.

Moved by: Roland Boudreau, AIDS New Brunswick

Seconded by: Rick Johnston, AIDS Coalition of Nova Scotia

VOTE: Carried

Due to the prohibitive cost of setting up interpretation equipment in multiple rooms, CAS has always elected to use the main meeting area for the caucus most in need of interpretation. Participants requiring whisper translation in other caucus meetings should indicate this need through the registration process and CAS will aim to secure whisper translation for caucus. CAS will monitor the use and effectiveness of interpretation services through the event evaluation forms.

RESOLUTION #6

Whereas the struggle against AIDS in Canada has been built on a strong partnership between researchers, health care providers and the community; and

Whereas community-based prevention work as well as research education and support services are essential elements of the national strategy to combat the epidemic; and

Whereas the federal government has reduced its grants and contributions made by the Public Health Agency of Canada through the AIDS Community Action Program (ACAP) by \$2.5 million in 2007-08 and these cuts will be ongoing throughout Canada.

Now therefore be it resolved that the Canadian AIDS Society calls upon the Government of Canada to fulfill its obligation to the fight against AIDS by immediately restoring AIDS Community Action Program (ACAP) funding to the levels announced in September 2006. And further, be it resolved that copies of this resolution be forwarded to the Prime Minister and the Federal Minister of Health and all other MPs.

Moved by: Michael Sobota, AIDS Thunder Bay

Seconded by: Carri Johnson, AIDS Committee of North Bay

Vote: Carried (as amended)

This resolution has been fully acted upon. Beyond delivering this resolution to the offices of the Prime Minister and the Federal Minister of Health, CAS has met repeatedly with decision makers and leaders representing all parties in Canada to ensure support for funding the community-based response to HIV/AIDS in Canada. During the federal election campaign, CAS was able to ensure that three out of four party leaders publicly announced their support for HIV/AIDS funding in Canada. Furthermore, despite threatened cuts across the Public Health response in Canada, CAS has been able to ensure that HIV/AIDS funding is protected. As recently as the last week of February, the Minister of Health, during a Standing Committee on Health presentation, agreed that HIV/AIDS funding is protected and secure. This has been accomplished through the development of strategic partnerships within the HIV/AIDS movement, including support from researchers, medical service providers, pharmaceutical partners, corporate leaders, and lobbyists; all led by the Canadian AIDS Society – representing the voice of the community based movement in Canada. While we have been unable to secure an increase in funding to the previously promised level of 84.4 million dollars, CAS has been successful in protecting Grants and Contributions at the community level.

RESOLUTION #7

Whereas Resolution 8 from the 2007 Annual General Meeting directed the implementation of a Standing Committee;

Whereas the Board of Directors decided afterwards not to establish such committee;

Whereas the needs of people in ethnocultural communities living with HIV/AIDS are urgent are not always met by existing resources, especially with respect to immigration, support services and accommodations;

Be it resolved that CAS make the focus on problems faced by the ethnocultural communities a priority for the 2009-2010 work plan.

Moved by: Brigitte Charbonneau, AIDS Committee of Ottawa

Seconded by: Santa-Grâce Lucien, GAP-VIES

Vote: Carried

CAS' proposal to PHAC for funding under the National Voluntary Sector HIV/AIDS Response Fund (NVSRF) included project activities that focus on translation of research project findings from within ethnocultural communities to interested community-based groups through a series of training opportunities facilitated by CAS. It is our hope that these sessions, animated by CAS program consultants, will continue this meaningful dialogue, resulting in the development of target activities, in addition to existing activities for CAS throughout the year. CAS will also ensure the development of opportunities for cultural networking through networking zones built into the 2010 Skills Building Symposium.

RESOLUTION #8

Whereas there is concern about potential coercion and/or lack of informed consent to participate in research, including treatment as prevention;

And whereas there is a need to address and consider the concerns of community members, including PHAs/APHAs/ASOs etc.;

Be it resolved that CAS develop a position paper on the requirement for genuine partnership and community consultation at all levels of research initiatives.

Moved by: Marcie Summers, Positive Women's Network

Seconded by: Glyn Townson, B.C. Person's with AIDS Society

Vote: Carried

We have taken on the leadership role of bringing in community voice by working with the Canadian Association for HIV Research. CAS has been strategically representing the principles of community-based research within consultations with research funding bodies for some time now, resulting in support for improved knowledge transition and meaningful engagement through community-based research initiatives. Broadening this level of support and engagement is a long-term goal, in need of a strong position statement endorsed and promoted by CAS' governance body. While CAS was unable to secure funding for the development of this paper through government funding sources, we will include it in the 2010 funding appeal. Prior to that, CAS will monitor and seek financial support through foundations and private sector grants.