

## **Sigma's 30th International Nursing Research Congress**

### **Ethno-Racial Context of HIV: Building Capacity for Health Equity and HIV Response in ACB People**

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#### **Purpose:**

Racial disparities in HIV/AIDS prevalence is common and varies across countries. The prevalence and impact of HIV/AIDS among African, Caribbean and Black (ACB) people is relatively high compared to other racial communities in Canada. Whilst Black Africans constitute 3.5 % of the Canadian resident population, they account for a large proportion of positive HIV tests. According to Statistics Canada, in 2013 Black people constitute only 4.3% of Ontario's total population. ACB people infected with HIV through heterosexual contact accounted for 18.8% of the estimated number of people living with HIV in the province. This disproportionate burden of HIV among ACB people, is not yet adequately explained by racial/ethnic context. Event though, these are among the major factors that may account for the disparity in HIV infection. As a result of the social and epidemiological dynamics of the virus and vulnerability factors there is no single response to halt HIV/AIDS. This fact in health disparity and dynamics calls for strengthening of building capacity for health equity and HIV response in the ACB people. The purpose of this presentation is to critically examine ethno-racial health inequities gap in the context of HIV and need for building capacity for health equity and HIV response in the ACB community.

#### **Methods:**

This paper will present the qualitative findings of a recent mixed methods study that examined heterosexual Black men's response to HIV/AIDS in Ontario. The goal of the study was to engage straight ACB men and service providers/decision-makers to develop effective responses to reduce HIV vulnerabilities and promote resilience and equity among ACB men and communities. It is a 5-year program of research and related activities with ACB heterosexual men in Ontario to: enhance their appreciation of the conditions that help HIV to spread; strengthen their commitment to HIV prevention; and strengthen community network to end HIV and promote health among CB communities.

#### **Results:**

We used a multi-phase mixed method approach informed by community based research to engage straight Black men aged 16 and over. Samples included both HIV positive and negative people in the Ontario. Phase one was primarily qualitative and data sources were focus group discussions and individual in-depth interviews involving 170 participants. Data Analysis, thematic analysis guided the data interpretations and peer debriefing and audit trail helped to establish the trustworthiness of the data. In order to execute *theory-to-practice* knowledge translation is the integral part of the study.

This presentation will focus on the ethno-racial context of HIV/AIDS and structural barriers influencing access to health and social services. This theme explicates how the social determinants of health and other HIV-related health inequities affects ACB community response to HIV in terms of prevention measures. We will also discuss strategies employed to address their vulnerability to HIV

#### **Conclusion:**

Closing ethno-racial health inequities gap in the context of HIV in the ACB community needs to be grounded in social justice and health equity principles. Building capacity for health equity and HIV response in the ACB people needs actions that involves HIV combination prevention strategies. HIV combination prevention strategy is an innovative approach that employs a multi-sectoral health equity and HIV strategies to target HIV vulnerabilities and those affected by the virus including ACB people. This approach mobilizes evidence-informed and equity based behavioral, biomedical, and structural interventions to address both the immediate risks and underlying causes of the diseases and associated inequities.

HIV elimination efforts needs to address inequities and policy gaps at multiple levels: individual, community, and organizational level. The Community stakeholders in this study identified the need for a more strategic collaborative partnership between existing ACB community organizations and AIDS service organizations and evidence based interventions.

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**Keywords:**

Combination prevention, Community responses and ethno-racial context of HIV/AIDS and structural barriers

**References:**

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**Abstract Summary:**

Racial disparities in HIV/AIDS prevalence is common and varies across countries. There is no single response to halt HIV. Closing ethno-racial health inequities gap is important. HIV combination prevention strategy is an innovative approach that employs a multi-sectoral health equity and HIV strategies to build ACB community response.

**Content Outline:**

## 1. I. Introduction

- Racial disparities in HIV/AIDS prevalence
- HIV among ACB people
- Building capacity for health equity and HIV response in the ACB people
- II. Body
- Qualitative findings of a recent mixed methods study
- The goal of the study
- Objective of the study
- Finding of the study
- Structural barriers
- Social health determinant of heterosexual

## III. Conclusion

- Ethno-racial health inequities gap in the context of HIV and need for building capacity for health equity and HIV response in the ACB community.
- Closing ethno-racial health inequities gap in the context of HIV in the ACB community
- HIV combination prevention strategies
- HIV elimination efforts needs to addresses inequities and policy gaps at multiple levels
- Strategic collaborative partnership

First Primary Presenting Author

**Primary Presenting Author**

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**Author Summary:** weSpeak Principal investigator. Her research program which is grounded in over twenty-three years of clinical practice is in the area of inequity in health and health care as well as maternal-newborn health. Her research projects have been funded by international, national, provincial and local agencies and these projects are guided by the tenets of qualitative research and participatory action research (PAR).

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