

Northern Readiness Project

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- Dr. P. Orr, Dr. M. Becker, Dr. Y. Keynan (College of Medicine, University of Manitoba)
- Dr. K. Kinew (First Nation Health and Social Secretariat)
- C. Cochrane (Assembly of Manitoba Chief)
- K. Anderson (Southeastern Chiefs Organization)
- Dr. A. Meyers (Public Health Agency of Canada's National Laboratory for HIV Immunology)

Preamble: We are pleased to present this letter of intent proposal summary to REACH 2.0 to request funding for our pilot study. We understand that providing this LOI, you will request a more fulsome proposal. We have chosen not to apply for the CIHR Catalyst grant in June 2016, as we are just newly forming relationships amongst our partners especially with our First Nation partners. This relationship building will take some time and we see the REACH 2.0 funding as important support funding to help us with the relationship building and pilot testing of our project prior to submitting for a larger scale study through CIHR.

Title: HIV Risk Reduction In Northern Manitoba: A Pilot Study To Assess Community Readiness In A First Nation Community.

Introduction: The HIV rates in Manitoba have been rising in recent years primarily in the urban Winnipeg center where treatment centers and programs are situated. In Winnipeg between 2014-15 there was an 18% increase in the number of people in the Manitoba HIV Program. In the northern region there was only a 4% increase of people who access HIV care despite the fact that the First Nations population in western Canada is a high risk group. There is a significant gap in our knowledge about the rates of HIV in northern Manitoba. Key concerns in Manitoba are: Do the low numbers of people from northern Manitoba who entered HIV care in 2015 reflect low numbers of people being tested for HIV? How can we ensure that HIV detection, treatment, and care are available for the predominantly First Nation people in northern Manitoba?

Community Readiness: One of the emerging ways of addressing complex issues such as HIV is through a community readiness approach. Community readiness assessment is a model for community change that integrates the community's culture, resources and level of readiness to more effectively address an issue. It brings the community together, builds cooperation and increases its capacity for prevention and intervention. Readiness is “the degree to which a community is prepared to take action on an issue¹. According to Paltzer et al, the relative success or failure of prevention programs may not be a matter of the quality of planning or evidence-base of the programs themselves, but an issue of those interventions being appropriately matched to a community's level of readiness. Evidence-based interventions may fail if a community is not interested or invested in supporting them. Community readiness is one indicator that has been used to measure community perceptions and attitudes toward efforts targeting alcohol and other drug abuse.²

Community Readiness & Aboriginal Communities: Addressing HIV in indigenous communities provides even more layers of complexity. It is well known that prevention within the Aboriginal community in Canada is most effective and realistic when it is community-driven and culturally sensitive.³ The Canadian Aboriginal AIDS Network (CAAN) has done a great deal of work in Canada around understanding community readiness in First Nations communities and has developed a tool based on the tool developed by Plested et al (2006). In their readiness assessment manual CAAN describes community readiness as a concept that recognizes that “Aboriginal communities cannot be forced into addressing issues but must be prepared physically, emotionally, mentally and spiritually. It takes into account the broader realities that can make readiness challenging such as colonization, intergenerational trauma, family violence, racism, coping mechanisms (i.e. substance abuse, silence) and shame. Likewise, communities have their unique strengths and resources that can be assessed and included in a strategy such as traditional beliefs and the wisdom of Elders. A community readiness assessment can also bring to light and honour the work that is already being done” (p.4).⁴

Interest and Opportunity in Manitoba

At a research meeting with Leadership from Northlands Denesuline First Nation there was interest expressed for assessing where individuals, families and the community are at with regards to knowledge around HIV, testing/diagnosis, treatment and living with HIV. Given that HIV rates in Saskatchewan are rising we would like to support Northlands in knowing that they're prepared for the future.

At the same time, we are developing an HIV collective impact research and evaluation network that is bringing together several new interests and partners to address HIV in

¹ Barbara A. Plested, Ruth W. Edwards and Pamela Jumper-urman. Community Readiness: A Handbook for Successful Change. (Tri-Ethnic Centre for Prevention Research, Colorado State University, April 2006)

² Paltzer, J, Black, P., Mobert, D.P. (2013). Evaluating community readiness to implement environmental and policy-based alcohol abuse prevention strategies in Wisconsin. J Alcohol Durg Educ. Dec; 57 (3): 27-50.

³ Gahagan J, Ricci C. *HIV/AIDS prevention for women in Canada: a meta-ethnographic synthesis*. Available from: www.cpha.ca/uploads/progs/infectious/t0049_e.pdf

⁴ CAAN (2011). *Assessing Community Readiness & Implementing Risk Reduction Strategies Manual*. Halifax, Nova Scotia. Canadian Aboriginal Aids Network.

Manitoba. The Manitoba HIV Collective Impact Research-Evaluation-Action Network was launched in March 2016 and for the first time has brought together previously siloed partners including researchers, community-based organizations, health authorities, policymakers, aboriginal and Northern Health, peers and others in Manitoba to work together on common HIV goals. Through this approach we understand HIV issues in Manitoba as “complex” and requiring a systems approach to understanding and making change. This is why we have adopted a collective impact approach. There is an increasing rise of collective impact networks in North America, Europe and Australia as it is being recognized that “no single organization has the ability to solve any major social problem at scale by itself. Collective impact is a powerful new approach to cross-sector collaboration that is achieving measurable effects on major social issues”.⁵ The Community readiness approach is one of the key principles agreed upon by the Network.

Proposal: We are proposing to conduct a pilot study to assess the community readiness regarding testing for, and community support for living with HIV in northern Manitoba with Northlands Denesuline First Nation. We will use the Canadian Aboriginal Aids Network (CAAN) has tool available (<http://www.caan.ca/national-aboriginal-toolkit/section-four/>) for First Nation communities to gauge their needs for implementing risk reduction strategies that are culturally appropriate and geographically available.

A Project Coordinator, a Youth Advocate, and an Elder Advocate will be hired and trained to champion the movement for assessing HIV preparedness in the community. Our network will provide these key people with the training and support for conducting community meetings, workshops, focus groups, and individual interviews to assess community readiness using the CAAN tools. The partners will use the information to strategize HIV action plans that are culturally appropriate.

Relationship Development: A major part of this pilot study is in the development of new relationships and partnerships both with the First Nation but also amongst this new research team. Dr. Larcombe is new to the HIV scene in Manitoba as are several other of the partners who will bring fresh perspectives to HIV in Manitoba. Dr. Larcombe also brings her own established relationships with First Nations communities. These new players have been brought together as a result of the new MB HIV Collective Impact Research-Evaluation-Action network that has resulted due to support from REACH 2.0. The relationships that will be built through the pilot will also result in developing an authentic larger scale community-based participatory research proposal.

Outcomes: This research will pilot the process for training, assessing, and the development of an action plan, for HIV testing and care in remote populations. Ultimately we are working towards increasing HIV testing (diagnosing and monitoring) by HIV awareness, training, and access to care for those First Nations people living with HIV throughout northern Manitoba using methods and processes that are respectful of First Nation cultures. This grant would provide funding and network support for a pilot study targeting a First Nation community in northern Manitoba to assess where they are at for HIV preparedness and to create an action plan to move forward to support risk

⁵ Kania J., Kramer M. (2011). Collective Impact. Stanford Social Innovation Review.

reduction in a way that is appropriate for their community. This pilot work would then facilitate our understanding of First Nation community readiness and also facilitate the development of methods to work with other First Nations communities in Northern Manitoba. After completing the pilot we plan to develop a larger scale study and initiative and submit a proposal for funding to CIHR.

Partners:

- Nine Circles Community Health Centre – MB HIV Program (M. Payne, L. Ringaert, T. Reimer), & Two-Spirited People of Manitoba Inc. (A. McLeod) have been providing HIV care in Winnipeg and are looking to expand their impact into rural and remote Manitoba.
- Northlands Denesuline First Nation (Chief J. Antsanen), University of Manitoba (Dr. L. Larcombe, Dr. P. Orr, Dr. M. Becker, Dr. Y. Keynan), First Nation Health and Social Secretariat (Dr. K. Kineu), Assembly of Manitoba Chiefs (C. Cochrane), and Southeastern Chiefs Organization (K. Anderson) have partnered in previous health research and bring their successful partnership to the project.
- Public Health Agency of Canada’s National Laboratory for HIV Immunology (Dr. A. Meyers) is also a new research partner with expertise in HIV diagnostics and treatment.

Research, Practice and Policy significance: This pilot work will aid in the development of future strategies for Northern First Nations communities One potential strategy may include the Public Health Agency of Canada working with Nine Circles Community Health Inc. and the University of Manitoba to develop a strategy for a remote HIV care centre in northern Manitoba based on the findings from this partnership initiative.