

"Shades of Reflection"

A Concise Handbook

for

Immigrant and Women of Colour

and HIV/AIDS

"I have come to believe over and over again that what is most important to me must be spoken, made verbal and shared, even at the risk of having it bruised or misunderstood." ---Audre Lorde---

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Facilitators Handbook

"The fact that we are here and that I speak these words is an attempt to break that silence and bridge some of those differences between us, for it is not difference which immobilizes us, but silence. And there are so many silences to be broken." --Audre Lorde--

Purpose

The purpose of this handbook is to act as a resource for immigrant and women of colour. Although this is a condensed guide, we hope that you will find its contents enlightening. We have produced it in the hope that you will find it accessible and encourage you to photocopy it.

This handbook was inspired by the experiences of immigrant and women of colour who have participated in this work. Although we are making some small inroads, there is still a lot of work that needs to be done. Before any significant changes can be made, we need to continue to talk about and write about the experiences of immigrant and women of colour because they affect us all. There are very real issues that are endured each and every day of each and every week, month and year.

The motivation and participation in this work has not yet reached a level of crisis. It is expected that within the next few years a shift in perception will occur as more people living with HIV/AIDS become more visible in our communities. We will see an increase both in motivation and participation.

Content

Much of the information in this handbook may sound familiar. Many of the ideas reflect the strengths and experiences of women working for the health of their communities.

You will not find basic AIDS information in this handbook nor will you find any information here in other languages. Included at the end of this handbook is a list of resources and references.

It has been essential to put together a handbook of this kind because there are few resources available to immigrant and women of colour in response to the AIDS crisis--an epidemic that is reaching and afflicting our communities more and more every day. We hope that people using the guide will pass on the skills and resources to others in their community.

Immigrant and women of colour have specific experiences with HIV/AIDS. There are a number of factors that have helped us to understand why this is so and will be discussed a little bit later when we get into the issues that are specific to immigrant and women of colour--systemic racism, sexism, homophobia, classism, cultural values, beliefs, attitudes, life experiences, etc...

Your role

"It is easier to give orders than to work" --Lithuanian--

This handbook does not by any means attempt to embrace each community specifically (this is your role) but rather tries to include basic information that will assist you in designing specific activities and approaches that are relevant to you and your group. Many women who get involved in community HIV/AIDS work have been active in participating in issues affecting their community. We would like to encourage more young people's involvement with community issues.

HIV/AIDS and Values

Many people would rather sweep the AIDS issues under rug, pretend that AIDS does not exist and hope that it will go away. The truth of the matter is that AIDS will not go away and many people are dying without support.

--Anonymous--

People bring with them their own cultural values, attitudes and life experience that have helped to shape who they are. AIDS can be a difficult issue to face because it deals with a multitude of issues that include sex, sexuality, death, dying, spirituality, and topics which are not readily discussed in our communities most of the time.

- * HIV/AIDS is value laden.
- * AIDS is considered a private matter one not to be discussed with anyone outside of the family.
- * We often reflect our community's cultural values about sexuality, health, death and dying.
- * HIV/AIDS challenges our personal and community's values.

Ideas/Suggestions

- * Ask around your community to find a contact person/organization who is or knows about someone who is involved with AIDS work.
- * Make contact with the person for direction regarding education and outreach.
- * Educate yourself about AIDS and the related issues.

- * Discuss HIV/AIDS with your friends, families and coworkers.

We need to play a role in addressing HIV/AIDS in our communities. We are all too familiar with the issues that affect our health.

Community Participation

"A single arrow is easily broken; a bundle of ten is not" --Japanese--

In metro Halifax, there are small groups of people and individuals who are committed to doing HIV/AIDS-related work. They are often spread out with few opportunities for communication and networking with each other. Unfortunately, we are faced with a very sad reality. People often become involved with AIDS work through being touched personally in some way with AIDS. Volunteers are critical for ensuring sustainability. We hope to see an increase in the dedication and commitment to AIDS work within the various diverse communities. We would like to see long term effects result.

Ideas/Suggestions

- * Become a volunteer and get involved in the issues affecting your community
- * Take a leadership role and organize volunteers and community focus groups, etc
- * Become dedicated and committed to do AIDS related work within diverse communities
- * Take personal responsibility for community issues.

Issues Specific for Immigrant and Women of Colour

"Nobody but us will identify our particular issues. We have been excluded from much of the research into AIDS. It is our responsibility to establish ownership for our health, including HIV/AIDS, and getting our communities involved." --Anonymous--

Sexism

In the past diversity was not considered an issue that required any special significance in terms of information and services provided. Therefore, much of the research on HIV/AIDS has excluded women, especially those of colour. It was assumed that everyone experiences AIDS the same or perhaps it was not even considered at all.

Ideas/Suggestions

- * Continue to speak out about the issues affecting you and your community
- * Educate yourself and others about the myths of HIV/AIDS
- * Talk to someone who has HIV/AIDS.

There still exists a lot of myths, denial and misunderstandings of AIDS within our communities. This is very harmful and causes great damage both psychologically and spiritually.

Racism

Many people from our communities will not access AIDS related services while others refuse to have any association with AIDS service organizations. The reasons are complex and many.

- * There may be little information available that is relevant to the experience of immigrant and women of colour.
- * The information may not be culturally sensitive and/or appropriate. Often posters are explicitly graphic and may be offensive to some people. (NOIVMWC manual p.7)
- * There is very little information that is printed in other languages. To print information in other languages is both timely and costly and this is thought to take away from mainstream funding that may be less complicated. (see NOIVMWC manual p. 9)
- * Rarely is anyone employed from their own race or culture at AIDS service organizations.

Ideas/Suggestions

- * Gather all the resources and materials you can find
- * Take an active role in making sure resources are available to your community
- * Distribute the materials around your community
- * Encourage a friend or family member to get involved

This kind of racism and sexism is central in our culture and remains dominant in our society today.

Homophobia

For a moment, think about how you would feel if your best friend came to you and said she has tested positive for HIV. What would you do and how would you react? Would you think that she is a lesbian? And if she is, would you think she is a bad person and deserves this. Most women who have AIDS are heterosexual.

Everyone who is infected with HIV/AIDS is someone's best friend and no one deserves to have AIDS. At some point in our lives, we will all be touched personally, if not already as HIV/AIDS continues to spread.

For a long time many people thought that AIDS was a "gay disease". Although we know this is not true, this kind of thinking has prevented many other communities from addressing the issue.

- * Parents usually will not speak about gay/lesbian issues until questions/comments are made. It is something that is simply not talked about.
- * Many of our parents and their parents will speak about being gay/lesbian as something that is relatively new and that there was no such thing as being gay/lesbian when they were growing up. If you are persistent you may hear them say something about a strange or weird relative that everyone thought might have been gay but no one really knew for sure.
- * In many communities, the church has had a great influence over how people are supposed to be. It is often articulated by many individuals/groups that the Bible says being gay or lesbian is being a sinner. This conviction further encourages anxiety and conflict causing further feelings of isolation and confusion for many, especially young people who may be just becoming aware of who they are.

Ideas/Suggestions

- * Talk openly to others about sex and sexuality.
- * Understand how we have created such a place of resistance towards those who are on our side.
- * Individually and collectively make efforts to let people know that they're OK if they have AIDS or someone close to them does.
- * Examine your own ideas, values and beliefs, then challenge them, first to yourself and then discuss your feelings with a friend.

Many of these beliefs create problems with our self esteem. Self esteem is a major issue for immigrant and women of colour. Often times we have not given or received the necessary support from within our own communities. We need to support others in their initiatives to make our communities healthier, supportive and safer places to live. We are strong because we did not have many choices. We have a lot to contribute because of it. We have our experience, strength and hope to offer to others when and as they need it.

Classism

The level of urgency regarding AIDS has not reached the same status as it has within mainstream society. The realities of AIDS has not reached a height of concern that requires immediate intervention. In some immigrant and black communities, especially those of middle class, AIDS is not a front line issue. In some immigrant communities, there are other issues that are considered to be more important than AIDS.

- * Canadian citizenship/status
- language barriers
- * housing, employment, food and clothing
- * little education and lack of awareness regarding HIV/AIDS
- * resistance within the communities
- * lack of accessible programs and services

Gay men really are the pioneers in the AIDS movement and the barriers that they faced then are similiar to those that minority communities are dealing with today.

Ideas/Suggestions

- * Talk to gay men about AIDS and barriers (find out who was around during the initial AIDS crisis)
- * Advocate for sustainability for programs and services
- * Become more accepting of others and work together towards breaking down some of the barriers that exist within your community

Activity Ideas

There are several ideas that can be used depending on you and your community--focus groups, workshops, kitchen talks, displays and outreach. Each of these methods of delivery are very different and it is important to understand how each method works. You may need to learn how to develop or customize a workshop that is specific to your group and/or topic. For example is the topic about sexism and AIDS or are you talking about AIDS, sex and youth? Always remember to keep in mind who your group is.

Focus Groups

Focus groups are often the first step in getting the community together to identify the issues that are existing and generate ideas for decisions and/or solutions. Holding focus groups can be challenging but they can provide crucial information about the direction that activities such as workshops, kitchen talks and displays will need to go. Focus groups bring out real needs and issues.

Workshops

When developing a workshop it is very important to use your time wisely. There are several reasons why workshops can be held.

- * to process the effects on communities and individuals
- * to encourage safer sex practices
- * to increase awareness of distinct concerns of immigrant and women of colour and HIV
- * to raise awareness of the obstacles faced by immigrant and women of colour and AIDS related services
- * to problem solve collectively about the issues mentioned above
- * to get women together to talk about concerns and to learn from each others experiences
- * to meet and keep the focus on certain needs of specific group
- * to be culturally sensitive and specific
- * to establish better communication and collaboration with mainstream ASO's (AIDS Service Organizations)
- * to educate and support others
- * to increase community participation

When holding a workshop it may be a good idea to break down into smaller groups of people to encourage participation. This supports people's learning process because some people feel less intimidated when sharing information with a few people versus a larger group. This of course depends on the number of people attending the workshop. It is also a good idea to anticipate the size of the group attending if possible.

During a workshop you can also show a video followed by a discussion.

(For further information about workshops see Black Outreach Project Manual Chapter 4)

Kitchen Talks

Kitchen talks are like small group workshops because they provide an informal setting to allow people to feel comfortable enough to share information, talk about their feelings and also discuss other things that would not normally be shared. Women of colour have always gathered around each others' kitchen tables to discuss their concerns.

Displays

"If the eyes didn't see, the hands wouldn't take" --Yiddish--

Displays are set up as an opportunity to give out information and resources for those who are interested in learning more about your topic. You can have available a selection of various pamphlets, articles, business cards, resources and/or other material. Displays are effective because they provide visual cues for participants. It may be easy for some people to get bored in a workshop. Displays are an excellent way to be both creative and stimulating yet educational too.

Outreach

"The tongue of experience has the most truth" --Arabic--

Experience has taught us that communities want to hear the personal stories from PHA's, (persons with HIV/AIDS) preferably from a member of their own community. This makes the face of AIDS seem more real because it touches closer to home. Specific issues that are relevant only to the experiences of immigrant and women of colour are highlighted by hearing the experiences of women living with HIV/AIDS. Some of these specific issues include racism, sexism, homophobia, and classism.

Support Ideas

"I alone can do it. But I can't do it alone" --Anonymous--

The instant a person is told they are HIV-positive or have AIDS, their life from that moment on has changed forever. Support is a necessary part of the healing process and often comes in ways that are not expected. It is absolutely necessary for anyone that is HIV infected and/or affected to get support. Support does not always come easy for some people because they may be rejected by their family, friends and community.

Ideas/Suggestions

- * Share your feelings with others
- * Seek support from friends
- Spirituality
- * Offer support when necessary

Personal Stories

A personal story is told because it puts a face to AIDS. A powerful healing that can be life transforming takes place when personal stories are shared. PHA's often describe the process of what happened to them, the difficulties they had to go through and where they are in their life now--major life transformation can occur and often on a deeper spiritual level.

Grief

"I have been to hell and back" --C. Larose--

An interview with a 33 year old black woman who was diagnosed HIV-positive in 1989 revealed how much more spiritual she is now prior to her diagnosis. She described the transformation that occurred in her life from the time of diagnosis to the loss of her husband to meeting her new husband.

Grief is about loss and can have profound effects on individuals, families and communities. Grief is something we know very little about (Grieving our Losses: AIDS and Bereavement). In recent years more and more research is being on grief especially in this time of AIDS. We have not been taught how to grieve.

Grief is a process that can take only one day or can last up to a lifetime. Most people are somewhere in between. Grief has many stages that people often move in and out of at particular times throughout their lives.

Everyone grieves differently. Grieving is about healing.

Ideas/Suggestions

- * Talk to elders in your community about death and dying. Many of them probably have stories they are eager to tell.

- * Allow people to grieve in their own way no matter how unusual or how much you disagree.

Children

"Dearer than our children are the children of our children" --Egyptian--
"She went through a lot." --C. Larose--

Children are affected by the loss of a parent/s. Children are resilient and bounce back fairly quickly. In the above noted case the little girl was six years old at the time when her father died. She has adapted really well to the loss. She had been told exactly what happened to her father and how he died. She was there throughout the illness and had experienced many things children that age never go through. She is also very aware of her mother's health and status. She has a lot of support from friends and family.

Ideas/Suggestions

- * Be honest and open with children
- * Listen attentively to children
- * Encourage children's involvement with family and community issues

Conclusion

During the past few years we have come a long way in addressing HIV/AIDS in our various communities. We must always take into account the unique aspects of our culture. The specific groups' larger issues of racism, sexism, homophobia and classism in our society affects us all as individuals and as communities. We must always take our own culture into account when doing AIDS work. We know our individual communities best. AIDS organizations can help us with resources and support but we must take this important work into our own groups, our work places and our communities.

Finally, AIDS is not a mystery. You do not have to have any special talents to do the work. You only need to be dedicated and committed to the issues that affect the health and well being of your community. While it is important to learn and educate yourself, the real value is in the compassion and care for people in our world.

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Resources

AIDS Coalition of NS (ACNS)
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Halifax, NS, B3J 1H1
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**Atlantic First Nations AIDS Task Force
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Contact: Bernadette Christmas

YMCA
1565 South Park Street
Halifax, Nova Scotia
B3J 2L2
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FAX #: (902) 425-3180

NS Advisory Commission of AIDS
1740 Granville Street, 6th Floor
Halifax, Nova Scotia
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Northend Community Health Clinic
2165 Gottingen Street
Halifax, Nova Scotia
Telephone: (902) 420-0303
FAX #: (902) 422-0859
Contact: Rose Fraser

Mainline Needle Exchange
Cornwallis Street
Halifax, Nova Scotia
Telephone: (902)
FAX # (902)

**NS Council on Multicultural Health
 (see Multicultural Association of NS)**

Stepping Stone Association
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North Branch Library
Gottingen Street
Telephone: (902) 490-5723
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Parents Resource Centre
2465 Gottingen Street
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NS Home for Coloured Childre
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