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HIV Prevention Among Heterosexual Blackmen in Ontario: The Need to Revisit Provincial Policy

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HIV prevention among heterosexual Blackmen in Ontario: the need to revisit provincial policy

Authors: *Roger Antabe; Erica Lawson; Winston Husbands; Josephine Wong; Godwin Arku and Isaac Luginaah*

Ontario has the highest number of HIV infections, and African, Caribbean, and Black heterosexual (ACB) men account for a disproportionate share of HIV diagnoses—in Ontario and Canada. Discourses have interpreted ACB men’s vulnerability to HIV as ‘self-inflicted’. These discourses have privileged biomedical explanations hinged on behavioural factors including ACB men’s poor adherence to condom use, multiple concurrent sexual partnerships and non-adherence to facility-based HIV services. HIV/AIDS policy in Canada have assumed this trajectory, notwithstanding the fact that unique characteristics of the ACB community could provide viable policy options for addressing HIV vulnerabilities and building resilience among this vulnerable population. As part of an Ontario based study called weSpeak, we examined the perspectives of stakeholders from AIDS Service Organizations and heterosexual ACB men on the heightened risk of HIV infection among heterosexual ACB men in London Ontario. Analysis of four focus group discussions (N=24) and thirteen in-depth interviews (N=13) revealed that while service providers perceived HIV vulnerability among heterosexual ACB men as mostly behavioural, there was consensus that HIV services may not be culturally tuned and sensitive to the unique health needs of this population. Heterosexual ACB men indicated the crucial contribution of persistent structural barriers including a disconnect with service providers, stereotypes and stigma that limit their engagement with service providers and other stakeholders in building resilience to HIV. The findings emphasise the urgent need to engage ACB men in the design of specific health policies and strategies aimed at addressing disproportionate vulnerability of HIV infection among this vulnerable population. More broadly, the study makes a strong case for community-centered health policy making in Ontario.

Keywords: African; Caribbean; Black; Heterosexual, Men; HIV/AIDS; Vulnerability