

## Presentation Summary and Recommendations for Community Practice and Action

<b>Date and Title</b>	<b>June 13, 2019: Panel Discussion on the Impact of HIV/AIDS and HIV-related Disparities and Stigma within the Native and Indigenous Communities</b>
 <b>SUMMARY</b>	<p>In recognition of the National Native and Indigenous People HIV/AIDS Awareness Day, the Los Angeles County Commission on HIV (COH) convened a panel of Native and Indigenous leaders to learn about Native histories, cultures, and the how historical trauma continues to play a significant role in Native health and wellness. The discussion highlighted the importance of community, family, and diverse tribal perspectives and affiliations within the Native and Indigenous communities.</p>
 <b>KEY TAKEAWAYS</b>	<ul style="list-style-type: none"> <li>• It is important to learn and recognize the persistent and powerful effects of colonization, historical trauma, oppression and forceful and systematic separation of families on the overall health and wellness of Native communities.</li> <li>• Some Native communities are refugees from Latin American countries who fled to avoid persecution. They often fear seeking care or treatment due to their immigrant status and lack of linguistically and culturally competent services. Spanish may not be their native language and children or family members often serve as interpreters which may negatively impact discussions regarding sexual health.</li> <li>• Native communities are disproportionately affected by the lack of affordable housing, poverty, low educational attainment, unemployment/underemployment, alcoholism and drug addiction.</li> <li>• Native communities need support beyond language translation and interpretation. Providers must understand the importance of emotional, mental and community health in traditional Native health practices. Native individuals use both Western medicine and traditional healing practices. Some individuals may not trust clinics or hospitals because of dismissal of Native healing practices and beliefs and the absence of a welcoming atmosphere towards Indigenous people.</li> <li>• For Native peoples, medicine is not a just a pill. Healing involves the family, gender identities, tribal community, relationships to the land, language and history. The loss of a community member has a devastating impact on the Native community as it represents a loss of language, a leader, knowledge, and culture.</li> <li>• Efforts that gather communities to celebrate their cultures, such as pow-wows, serve as an important avenue to educate Native and Indigenous groups about HIV/AIDS/STD prevention, testing, and treatment. Pow-wows and drumming circles can bring important health and social services to the Native communities.</li> <li>• Reduce barriers by supporting and fostering a sense of community belonging and giving Native and Indigenous individuals a safe and welcoming space to be with one another and develop personal networks and relationships.</li> <li>• Fund and support programs that uplift Native communities, their families, health, and well-being.</li> <li>• Train providers and organizations on Native and Indigenous histories, cultural and healing practices, language, family bonds and dynamics. Furthermore, it is important that providers understand and respect the deep spiritual meaning of Two Spirit. In Native American society, those who identify as Two Spirited are respected as spiritual leaders within the tribe. Though Two Spirit may now be included in the umbrella of LGBTQ, the term "Two Spirit" does not simply mean someone who is a Native American/Alaska Native and gay. (Source: <a href="https://www.ihs.gov/lgbt/health/twospirit/">https://www.ihs.gov/lgbt/health/twospirit/</a>)</li> </ul>



**RECOMMENDATIONS  
FOR  
COMMISSIONERS**

- Engage the Planning, Priorities and Allocations Committee in addressing HIV in Native and Indigenous communities. Consider how long standing socioeconomic barriers such as unemployment and poverty affect access to HIV care and treatment.
- Support activities that raise HIV awareness and expand access to culturally and linguistically competent testing and care services. Consider how lack of trust affects one's willingness to seek services.
- Expand efforts to educate the Native communities about Undetectable=Untransmittable (U=U) and PrEP.
- Support educational campaigns that feature positive and empowering stories of Native and Indigenous individuals who are living with HIV.
- Collaborate with other County agencies, such as the Department of Mental Health to identify ways to braid funding to enhance health and resilience in Native communities.
- Be mindful that there are only a few Native and Indigenous individuals working or engaged in the HIV movement. They shoulder the burden of speaking and representing the community. They need support and healing as well and the expectations imposed on them to serve on multiple boards and planning councils are often unrealistic.
- Engage all COH Committees in following up on recommendations from the panel discussion.



**VIDEO LINK**

**To view the video of the presentation, visit:**

<https://www.youtube.com/playlist?list=PLEB64iMMVDIizWWzfZ0cLxt8-Dp0cT-mj>

**Special thanks to: Mark Parra** (Diné), Los Angeles County Department of Mental Health; **Dr. Gabriel Estrada** (Caxcan Nahua, Raramuri, Chirichua, and Chicana/o descendant), California State University Long Beach; **Leland Morrill (Navajo)**, Diné/Santo Domingo Pueblo, Kewa), Author, advocate, and speaker; and **Michelle Enfield**, former Commissioner.

**Resources to learn more about the Native and Indigenous History in California and Los Angeles:**

Native American Heritage Commission

<http://nahc.ca.gov/resources/california-indian-history/>

Mapping Indigenous LA

<https://mila.ss.ucla.edu/>

Original Peoples of Los Angeles County

<http://www.laalmanac.com/history/hi05.php>