HUMAN RIGHTS Count!
Documenting HIV Related Human Rights Violations:
HIGH LIGHTED CASE STUDIES

Background:
*Human Rights Count!* is an evidence gathering program which documents HIV related human rights violations against people living with HIV. Toronto People With AIDS Foundation is proud to be the Canadian research partner for this innovative project which is the first of its kind to document human rights violations related to HIV. Based on a methodology model which empowers people living with HIV.

The overall aim is to decrease the number of HIV related human rights violations against people living with HIV by using the information gathered to guide advocacy campaigns. The program has the following objectives:

- To document HIV related human rights violations against people living with HIV;
- To empower people living with HIV to claim their rights;
- To analyze quantitative and qualitative human rights violations against people living with HIV across countries and regions;
- To inform future programming at national, regional and global levels through the sharing of evidence and documented cases.

The qualitative documentation of Human Rights violations reported by participants, revealed thirty one incidents of violations in medical settings and circumstances. This recording surpasses all other identified types of violations discovered through the analysis of the qualitative data. There were also nineteen incidents of violations that relate to privacy and disclosure.

**Case Study 1**

A closer examination of the thirty one medically related cases, one such report was deemed to be particularly impacting and selected as a case study to be highlighted, as it overlaps with matters of privacy and disclosure.
This case study is of a forty-three year old woman who reported being HIV+ for less than one year, at the time of the violation. She identifies herself as a Human Rights/HIV activist, member of an Indigenous group/tribe, prisoner/ex-prisoner, and sex worker/prostitute.

This participant had an HIV test for the first time and was expecting to see her doctor soon. She began to receive phone calls at the school she was affiliated with. Within that brief timeframe of acknowledging these phone calls from the medical center, where she accessed an HIV test, she was handed a note from the secretary of the school stating, ‘Your test results came, and you’re HIV+’. The secretary looked at her and said, ‘Just keep that to yourself and stay away from me.’

This victim has reported significant shock and psychological trauma as well as social impact from this incident. There was further disbelief of the events that had transpired, as she stated receiving medical care from this doctor for a number of years. The incident resulted in a feeling of intimidation and fear of seeking support from anyone and felt the need to second guess her own judgment of whom and where to go to re-establish trust.

**Case Study 2**

The review of qualitative reports indicates seventeen violations within a legal context. Events involving legal professionals, as stated by this participant, warranted highlighting this particular story. The victim felt it was apparent that the right to privacy was also violated.

This case study is of a thirty-year-old male. He states being HIV+ at the time of the violation and was aware of his status for no more than four years. He identifies as a member of an Indigenous tribe/group and a prisoner/ex-prisoner.

This participant had appeared in a Toronto Court for a bail hearing. His account of events is that the Crown suggested he should be held in detention and denied release, with the intent of not being able to father any more children. This statement was made in the presence of the Judge.

The Crown’s remarks were disregarded, however the impact of such a statement in a full court room made the participant ‘feel like crap’. As illogical as this statement was, he believed that there may be a possibility of not being released from detention.

The participant was certain this treatment by the Crown is directly related to the knowledge of HIV status.
The impact of this event was psychological trauma, including shock, severe depression to the extent of not being able to get out of bed on some days. This lack of motivation was felt to be a very strong barrier in pursuing gainful employment. There was also a degree of social impact where the participant experienced a lack of comfort in being around other people and the self awareness of various other anti social behaviors.

The participant felt unsafe in reporting this behavior as he feared the possible impact it may have on his children.

**Case Study 3**

The more infrequent violations observed through the qualitative analysis are those that involve family and verbal or physical abuse. Eight participants were able to provide an in-depth account of events that involved family members. With the possibility of some overlapping statistics, eight stories have been documented that involve some verbal or physical abuse.

The case study of a thirty year old woman that reported both verbal and physical abuse as well as violations where family members were involved was felt to be noted. At the time of the violation she was HIV+ for less than one year. She identifies as a refugee or an asylum seeker from her home country, Nigeria. This is where the violations have occurred.

The events reported take place over a period of six years. This participant’s violations begin upon being diagnosed with HIV. Her husband began to physically abuse her upon his knowledge of the diagnosis. She reports instances of abuse where she felt it could have been fatal. Some particularly traumatic forms of abuse were sexual in nature; as the participant states that both her children were a result of rape, perpetrated by her husband. There was potentially a third child that was aborted against her will.

The participant acknowledges that the abuse is directly related to the new knowledge of her HIV status.

The severe physical impact is directly significant to the psychological and social impact that ensued from the series of traumatic events including isolation from family members. There was no formal report made to any authority; as a means of coping, these events were disclosed to a social worker in Canada.

It is noteworthy that there have been forty seven reports of psychological and social impact from the seventy five surveys (63%) reviewed.