Notice of the Final Oral Examination
for the Degree of Master of Public Health
of

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BA (University of Victoria, 2016)

“Evaluating a Métis Community Pilot of Dried Blood Spot Testing within a Métis-Specific Cultural Response for Those Living With/Affected by HIV and Other STBBI”

School of Public Health and Social Policy

Monday, May 25, 2020
11:00 A.M.
Conducted Remotely

Supervisory Committee:
Dr. Catherine Worthington, School of Public Health and Social Policy, University of Victoria (Supervisor)
Dr. Rachel Landy, School of Public Health and Social Policy, UVic (Member)
Dr. Renée Monchalin, School of Public Health and Social Policy, UVic (Member)

External Examiner:
Dr. Carrie Bourassa, Department of Community Health and Epidemiology, University of Saskatchewan

Chair of Oral Examination:
Dr. Nancy Clark, School of Nursing, UVic

Dr. David Capson, Dean, Faculty of Graduate Studies
Abstract

There is a shortage of literature on culturally grounded Métis approaches to addressing human immunodeficiency virus (HIV) and sexually transmitted and blood-borne infections (STBBI). The goals of this research were two-fold: to document and explore the development of an emerging Métis model of health and wellness for people living with or impacted by HIV and STBBI, and to conduct an evaluation of a dried blood spot testing (DBST) pilot for HIV and STBBI in Alberta drawing strongly on perspectives of Métis community members. This study utilized community-based and Indigenous research approaches in partnership with Shining Mountains Living Community Services (Shining Mountains) to address these goals. The first research goal (documenting and exploring a Métis model of health and wellness for people living with/impacted by HIV/STBBI) involved three gathering circles comprised of eight diverse Métis community members and stakeholders, which was supplemented by a community mapping exercise, and resulted in the development of the Red River Cart Model. The second research goal (evaluating a pilot of DBST for HIV/STBBI) involved the analysis of 26 survey responses and four gathering circles comprised of 19 participants who were self-identifying Métis individuals who received DBST at one of two events in the Métis community, semi-structured interviews with three DBST providers, and the document analysis of minutes from meetings with stakeholders held throughout the planning process of the DBST pilot. Results include the Red River Cart Model (a service tool and multi-level conceptual model describing a Métis understanding of health within an HIV/STBBI context) and suggest that DBST is an acceptable community-led testing intervention for Métis people. This research builds on limited existing literature by articulating a Métis model to health and wellness which can be used by service providers, policy makers, and Métis communities, and provides evidence in support of a testing intervention implemented by Métis people for Métis people.