



# Black scholarship on HIV and health: Configuring public health for Black emancipation

Winston Husbands<sup>1</sup> · Notisha Massaquoi<sup>2</sup> · Maureen Owino<sup>3</sup> · David Este<sup>4</sup>

Received: 12 March 2025 / Accepted: 25 March 2025

© The Author(s) under exclusive license to The Canadian Public Health Association 2025

## Abstract

The burden of Canada's HIV epidemic has fallen disproportionately on Black communities. Canadian public health authorities and research institutions have been generally impervious to calls for responses that mobilize and support Black community expertise and leadership, and focus on the needs and circumstances of those communities. A group of Canadian scholars and community health practitioners came together in 2022 as the Interim Committee on HIV among Black Canadian Communities (ICHBCC) to develop the Black HIV Manifesto and advocate for transformative responses to HIV on the basis of the manifesto. The ICHBCC conceived and championed the Special Section on HIV, Health, and Black Canadian Communities published in the current issue of the *Canadian Journal of Public Health*. This special section brings together Black scholars who report and discuss their research with Black communities. We expect that the special section will engage Black scholars and other Black stakeholders to strengthen the knowledge base on HIV among Black Canadian communities, which in turn will inform new avenues for transformative policy, programs, community engagement, and advocacy in response to HIV. Furthermore, we hope that the special section initiates scholarly and community interest in Black emancipation as the conceptual basis for public health scholarship and practice to promote health equity and justice.

## Résumé

Au Canada, le fardeau de l'épidémie de VIH pèse démesurément sur les communautés noires. Les autorités de santé publique et les établissements de recherche du pays sont en général restés sourds aux appels à des interventions qui mobilisent et qui soutiennent les compétences et le leadership des communautés noires et qui sont axées sur les besoins et la situation de ces communautés. Un groupe d'universitaires et de praticiens de la santé communautaire ont formé en 2022 un comité intérimaire sur le VIH dans les communautés noires du Canada (ICHBCC) pour élaborer un «manifeste noir sur le VIH» et préconiser des interventions transformatrices basées sur ce manifeste. C'est ce comité qui a conçu et soutenu la Section spéciale sur le VIH, la santé et les communautés noires canadiennes publiée dans ce numéro de la *Revue canadienne de santé publique*. Ses auteurs sont des universitaires noirs qui présentent leurs études aux communautés noires et en discutent avec elles. Nous pensons que cette section spéciale encouragera les universitaires noirs et d'autres parties prenantes noires à renforcer la base de connaissances sur le VIH dans les communautés noires canadiennes, ce qui dégagera en retour de nouvelles pistes de transformation des politiques, des programmes, de la participation communautaire et de la défense des droits en matière de VIH. Nous espérons aussi que cette section spéciale suscitera un intérêt intellectuel et communautaire pour l'émancipation noire en tant que base conceptuelle du savoir et de la pratique en santé publique afin de promouvoir la justice et l'équité en santé.

✉ Winston Husbands  
winston.husbands@utoronto.ca

<sup>1</sup> Dalla Lana School of Public Health, University of Toronto, Toronto, ON, Canada

<sup>2</sup> Department of Health and Society, University of Toronto—Scarborough, Toronto, ON, Canada

<sup>3</sup> Faculty of Environmental and Urban Change, York University, Toronto, ON, Canada

<sup>4</sup> Faculty of Social Work, University of Calgary, Calgary, AB, Canada

**Keywords** HIV · Black communities · Interim Committee on HIV among Black Canadian Communities · Black emancipation · Justice

**Mots-clés** VIH · Communautés noires · Comité intérimaire sur le VIH dans les communautés noires du Canada · Émancipation noire · Justice

## Black communities and HIV in Canada

In 2022, among cases with a reported racial or ethnic background, Black people (i.e., people who identified as Black from Canada, Africa, the Caribbean, or elsewhere) accounted for 28% of new (first-time) HIV diagnoses in Ontario and close to one fifth of new cases in Canada, though Black people make up just 6% and 5% of the respective provincial and national populations (OHESI, 2024; PHAC, 2024). Yet this trend, evident for the last 35 years, may underestimate the degree to which Black communities are burdened with Canada's HIV epidemic. First, Black people's share of new Canadian diagnoses is now rebounding toward pre-COVID levels (one of every four new cases), a trend that is likely to continue. Second, less than half of all new Canadian diagnoses and about two thirds of Ontario diagnoses are categorized according to ethnicity or race. Nonetheless, trends in new diagnoses only tell part of the story: Black people are also more likely than their white counterparts to die of HIV-related causes (Tjepkema et al., 2023). Consequently, while HIV transmission has been falling among white Canadians (principally white gay men), the enormous disparity between Black and white Canadians persists.

## Changing the trajectory of HIV among Black Canadian communities

### A community-focused movement of scholars, practitioners, and community advocates

Canadian strategies and institutions to address HIV have failed Black Canadians. In fact, decision-makers in the Canadian research and policy-making communities may never have envisioned Black Canadian researchers, community health practitioners, or advocates as leaders in developing and implementing a viable response to HIV, or they may have privileged their institutional interests over the well-being of Black communities. At the same time, Black scholars are beholden to an academic system that rewards them as individuals while their supportive Black communities languish on the margins of the Canadian social order.

In 2022, a small group of Black scholars, community health practitioners, and community advocates came

together to critically reflect on the crisis of HIV among Black communities, the absence or misrepresentation of Blackness in Canadian discourses to address or “end” HIV transmission, and the urgency of transformative action to substantively diminish the impact of HIV among Black communities. With support from the Canadian Association for HIV/AIDS Research (CAHR), the group drafted a manifesto on HIV among Black communities which they discussed at a special session at CAHR's annual conference (in April 2022) for Black stakeholders. Three months later, the group expanded its membership as the Interim Committee on HIV among Black Canadian Communities (ICHBCC), finalized the manifesto, and began implementing opportunities for dissemination and advocacy (Owino et al., 2024).

The manifesto outlines a framework for transformative action to change the trajectory of HIV among Black communities. It proposes a leadership role for Black communities in decision-making (about research, policy, and programs) to address HIV among those communities. This leadership role aligns with a principle of Black emancipation in contradistinction to the traditional paradigm by which public health “experts” and authorities mobilize public health knowledge and practices against Black people's interests, expertise, knowledge, and circumstances (Owino et al., 2024).

Along with other initiatives, in 2023, the ICHBCC proposed a special section of the *Canadian Journal of Public Health* (CJPH) on “HIV, Health, and Black Canadian Communities”. Over the past 2 years, the guest editors collaborated with the leadership of the CJPH to design and implement the special section. Previously, in the 10 years up to 2020 (the year of George Floyd's murder), a search of CJPH using “Black” as the search term yielded 174 articles, only four (2.3%) of which focused on Black people's health (two of which were first-authored by white or non-Black scholars). Using the same search term for 2021–2023, only 3 of the 76 articles (3.9%) focused on Black people's health, and one of those was first-authored by a white scholar.<sup>1</sup> This is acutely disappointing in view of the persistent disparities in access to the social determinants of health between Black and white Canadians, and the magnitude of the effort that may be required to understand and address the attendant health inequities; however, the pattern is consistent with the diminished

<sup>1</sup> We identified articles that focus on Black people's health as those about Canada that mentioned “Black” people in the title.

opportunities for Black people's advancement as researchers. Black communities and their circumstances are often acknowledged in passing, but rarely the focus of attention.

In terms of outcomes beyond the CJPH, we expect that our advocacy for a special section will engage Black scholars and scholarship in specific ways. First, we hope that the special section will engage Black scholars to strengthen the knowledge base on HIV among Black Canadian communities, which in turn will inform new avenues for transformative policy, programs, and community engagement. Second, we hope that the expanded breadth and depth of Black scholarship will help to strengthen advocacy for equitable, community-focused, productive ways to support Black scholarship. Third, we hope to enhance a tradition of Black Canadian health scholarship that is commensurate with the effort required to eliminate the burden of HIV and achieve equity and justice.

### Black emancipation and public health

Why, to paraphrase Richard Horton (2024), almost 200 years since the British government “emancipated” enslaved African peoples throughout the Caribbean and Canada, is Black people's health still quarantined by inequity and injustice? The answer is that legal emancipation was never designed to achieve the promise implied in the concept. First, enslavement was a thoroughly violent system that forcibly oppressed and decimated the enslaved (Beckles, 2013). Second, at emancipation, the British government massively compensated the enslavers and simultaneously compelled the formerly enslaved to pay reparations to their enslavers through 4 years of enforced free labour (Beckles, 2016). Moreover, while notable Canadian institutions of higher education and, by extension, their white professoriate benefitted directly from enslaved labour, the descendants of the formerly enslaved were expressly unwelcomed in those very institutions (Cooper et al., 2020; Shaw, 2022). Britain, and her white settler colonies, reaped the benefits of enslaved labour during the period of enslavement and for generations up to the present day. Evidently, emancipation in 1834 represented a “repackaging of slavery” for a post-slavery dispensation (Beckles, 2016, p. 213). Thereafter, the long aftermath of slavery in the British Americas adjusted to the evolving standards of racial capitalism—a form of enduring structural disadvantage that suspended Black people's humanity (Maynard, 2017, p. 40).

Black people's over-exposure to HIV suggests that the public health infrastructure (including the research community) has been rather cavalier about Black people's lives. But we are not suggesting that public health is irretrievably dangerous or useless. Instead, the concept of Black emancipation entails a systematic reconsideration of how we interpret humanity and who is considered (fully) human (Hartman, 2008). To this end, Black communities deserve a quality of

Black leadership that exercises stewardship over the institutions and knowledge regimes that misconstrue and undermine our health and well-being, or a form of engagement that uproots and dismantles systemic anti-Blackness. This special section of the CJPH, and the work of the ICHBCC over the last 2 years, is the start of a process of reorienting public health through the disciplined leadership of Black communities to realize Black emancipation and ensure the well-being of Black communities.

### Our emerging program

Over the next year, the ICHBCC will focus on:

1. Strengthening the leadership role of ICHBCC, its network, and other Black individuals and institutions in HIV-related research and policy
2. Revising and disseminating the Black HIV Manifesto as a basis for understanding and responding to HIV among Black communities
3. Advocating for Black emancipation as a methodological framework/approach for knowledge development, policy, and programs that advance Black health and well-being
4. Supporting research and policy that promote Black health and well-being consistent with values and priorities outlined in the Black HIV Manifesto
5. Advocating for policy, program, and knowledge development innovations that challenge systemic anti-Black racism.

Collectively, these activities will help ensure that HIV and Canada's Black communities remain a high priority in the health and social service domain.

### Foundational issues requiring critical attention

A number of foundational issues that need greater precision and clarity emerged from the collection of papers in the special section. First, over the past 15 years, many Black stakeholders have used the term “African, Caribbean and Black” (or ACB) as a default term in reference to Black people from African countries or of African descent in Canada. This usage is analytically problematic, since it conflates ethnicity and race (and perhaps national origin as well). We suggest that, henceforth, scholars should state their rationale for using this term, rather than use it as a default for race.

Second, there are no available national or provincial data that adequately describe how some segments of the Black population (e.g., transwomen, transmen, or people who consume illicit substances) may be affected by HIV.

Third, though the (white) research and policy establishment has mounted a considerable response to HIV among

gay and bisexual men and other men who have sex with men (gbMSM), the continuing large disparity in diagnoses indicates Black gbMSM have been effectively sidelined in the HIV response. Such marginalization could not have occurred if the HIV research establishment had justly resourced Black stakeholders to develop and implement community-based evidence-informed responses to HIV. Unfortunately, CIHR's funding programs force Black scholars to compete against each other and everyone else for meagre returns relative to the persistent health-related inequities that undermine Black lives and livelihoods. Competitions in which a couple of teams of Black scholars compete against many different teams can easily result in none of the Black teams being funded, even when they reach the funding threshold. This system may also privilege researchers who are already well known or who have been successful in the past at the expense of emerging scholars who are more likely to be Black. It is not an efficient model for supporting research to build the required knowledge base and promote evidence-informed interventions for Black communities that are disproportionately burdened by the Canadian HIV epidemic.

Finally, we propose that Black scholars, practitioners, and community advocates should come to terms with the concept of Black emancipation; otherwise, Black scholars may continue to reproduce the standard approaches to developing and deploying knowledge that seem intellectually appealing and professionally rewarding in the short run but ultimately undermine Black people's health and well-being.

**Acknowledgements** This special section is an initiative of the Interim Committee on HIV among Black Canadian Communities (ICHBCC). The guest editors acknowledge the ICHBCC's generous support, especially Dr. OmiSoore Dryden's contribution to this invited commentary.

**Author contributions** The authors wrote this invited commentary jointly as guest editors of the CJPH Special Section on HIV, Health, and Black Canadian Communities.

**Availability of data and material** Not applicable.

**Code availability** Not applicable.

## Declarations

**Ethics approval** Not applicable.

**Consent to participate** Not applicable.

**Consent for publication** Not applicable.

**Conflict of interest** The authors declare no competing interests.

## References

- Beckles, H. (2013). *Britain's Black debt: Reparations for Caribbean slavery and native genocide*. University of the West Indies Press.
- Beckles, H. (2016). *The first Black slave society: Britain's "Barbarity Time" in Barbados, 1636–1876*. University of the West Indies Press.
- Cooper, A., Baylis, F., Cameron, C., Francis, A., Lovejoy, P., et al. (2020). *Report on Lord Dalhousie's history on slavery and race*. Dalhousie University. [https://issuu.com/dalhousieuniversity/docs/lord\\_dal\\_panel\\_final\\_report\\_web](https://issuu.com/dalhousieuniversity/docs/lord_dal_panel_final_report_web). Accessed 13 Jan 2025.
- Hartman, S. (2008). *Lose your mother: A journey along the Atlantic slave route*. Farrar, Straus & Giroux.
- Horton, R. (2024). Can public health overcome its colonial history? *The Lancet*, 404, 2033.
- Maynard, R. (2017). *Policing Black lives: State violence in Canada from slavery to the present*. Fernwood Publishing.
- OHESI (Ontario HIV Epidemiology and Surveillance Initiative). (2024). *HIV diagnoses in Ontario, 2022*. Toronto, Ontario. <https://www.ohesi.ca/reports/>. Accessed 14 Jan 2025.
- Owino, M., Dryden, O., Este, D., Etowa, J., Husbands, W., Nelson, L., Ojukwu, E., Peters, E., & Tharao, W. (2024). A Manifesto for transformative action on HIV among Black communities in Canada. *Canadian Journal of Public Health*, 115, 245–249.
- PHAC (Public Health Agency of Canada). (2024). *HIV in Canada: Surveillance report to December 31, 2022*. Ottawa. <https://www.canada.ca/en/public-health/services/publications/diseases-conditions/hiv-canada-surveillance-report-december-31-2022.html>. Accessed 17 Feb 2025.
- Shaw, M. (2022). *Historical legacies, Black Canadian slavery and institutional histories*. Black Perspectives. African American Intellectual History Society. <https://www.aaihs.org/historical-legacies-black-canadian-slavery-institutional-histories/>. Accessed 10 Dec 2024.
- Tjepkema, M., Christidis, T., Olaniyan, T., & Hwee, J. (2023). *Mortality inequalities of Black adults in Canada*. Health Reports. Statistics Canada. <https://www150.statcan.gc.ca/n1/pub/82-003-x/2023002/article/00001-eng.pdf>. Accessed 10 Dec 2024.

**Publisher's Note** Springer Nature remains neutral with regard to jurisdictional claims in published maps and institutional affiliations.

Springer Nature or its licensor (e.g. a society or other partner) holds exclusive rights to this article under a publishing agreement with the author(s) or other rightsholder(s); author self-archiving of the accepted manuscript version of this article is solely governed by the terms of such publishing agreement and applicable law.