# HIV and AIDS in Canada: A National Survey 

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Summary Report

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# HIV and AIDS in Canada: A National Survey Summary Report 

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## Highlights at a Glance

- People living in Canada (for the purpose of this report referred to as Canadians) continue to report relatively high levels of knowledge about HIV and AIDS. In 2011, $93 \%$ of Canadians 16 years of age or older describe themselves as at least moderately knowledgeable about HIV and AIDS, with no significant change in self-reported knowledge evident since 2003.
- Canadians are significantly more likely in 2011 (89\%) than they were in 2006 ( $80 \%$ ) to believe that HIV and AIDS treatments are effective in helping people with HIV lead normal lives.
- There is almost universal recognition that HIV can be transmitted by sharing needles $(99 \%)$ or through sexual intercourse without a condom ( $99 \%$ ).
- A substantial majority ( $82 \%$ ) recognize that HIV can be transmitted from an HIV-positive mother to her baby during childbirth.
- Only a minority ( $36 \%$ ) recognize that the virus can be passed from an HIV-positive mother to her baby when breastfeeding.
- Greater societal acceptance for people living with HIV is evident since 2006, with Canadians more inclined to report comfort with working in an office with someone with HIV, shopping at a store where an owner has HIV, and having a child attend school where a student has HIV.
- Half the population (47\%) has never been tested for H IV. When key reasons for testing, including blood donation, insurance, and research are removed as reasons for test ing, two-thirds ( $65 \%$ ) of Canadians have not been tested for HIV. No significant change in the prevalence of esting for HIV is apparent in Canada since 2003.
- Canadians strongly agree ( $91 \%$ ) that people living with HIV should have t he same rights as they themselves do, including the same right to employment, health care and housing.
- Only a minority of Canadians agree that people living with HIV have the right be sexually active, a finding that remains unchanged since 2006. When asked if people with HIV should have the same right to be sexually active if they practice safe sex or if they inform their sexual partners about their HIV status, agreement rises substantially.
- Almost nine-in-ten Canadians ( $87 \%$ ) ar e aware that people with HIV can be criminally prosecuted for knowingly failing to disclose their HIV status to sexual partners.
- Three-quarters ( $74 \%$ ) of Canadians believe it is appropriate to imprison people with HIV who knowingly fail to disclose their status to a sexual partner, with $55 \%$ reporting that it is "definitely " appropriate.
- No consensus within the population emerges around the effect of criminal prosecution of people with HIV who knowingly fail to disclose their status. Fewer than half ( $46 \%$ ) agree that such prosecution is an effective way to deter people from transmitting HIV.
- Almost one-quarter ( $22 \%$ ) of Canadians report that they have ever made a donation to a charitable or not-for-profit organization that deals specifically with HIV and AIDS. Among those who have not, almost half ( $48 \%$ ) report that they would consider making a donation to an organization involved with HIV and AIDS research, treatment or cure.


## I. Introduction

The Human Immunodeficiency Virus (HIV) and Acquired Immune Deficiency Syndrome (AIDS) have been in Canada for three decades. During that time, Canadian researchers, nongovernmental and govern ment organizations and health care and service providers have worked together, with the support of the Canadian public, to generate knowledge and develop and deliver an array of programs and ser vices designed to raise public awareness, prevent the spread of HIV, reduce discrimination and increase the length and quality of life for people with HIV.

Because Canada's HIV epidemic remains "concentrated" rather than "generalized," (i.e. HIV prevalence in the general population is below 1\%), research and prevention efforts have strategically targeted specific populations that are deemed most vulnerable to HIV infection, rather than the general public. This focused approach was partially in response to the limited resources available relative to the increasing costs of providing care and treatment to ever increasing numbers of people living with HIV. While this has been a prudent strategy, it is important to gauge what is happening in other segments of the population, and to know what the general public is thinking and doing in relation to HIV and how they are responding/interacting with people living with HIV. This information is used for assessing and informing educational strategies, modifying intervention efforts, and combating HIV stigma and discrimination. The impact of negative attitudes toward people living with HIV on strategies aimed at preventing HIV and sexually transmitted infections is well documented. Understanding the social environm ent into which
health promotion strategies and programs are implemented is critical.

Over the last 30 years, three national surveys have been conducted to gain a better understanding of Canadians' behaviours, attitudes, knowledge, and perceptions of HIV and AIDS. The first national general population survey was conducted in 1989 by Michael Ornstein (Ornstein, 1989). The two surveys that followed were commissioned by the Public Health Agency of Canada, Health Canada and conducted by Ekos Research Associates 2003 and 2006 respectively (PHAC, 2003; PHAC 2006). The 2011 survey updates the information in the previous two national research studies (2003, 2006) and probes Canadians' attitudes in other areas, including the prosecution of people with HIV who knowingly fail to inform their sexual partners of their infection, and behaviours and attitudes around charitable giving to organizations involved in HIV and AIDS research, education and prevention. While trends over time are addressed by comparing the findings of the 2011 survey with those from the 2006 and 2003 surveys, it is acknowledged that the populations who participated in each of the surveys may be different.

In 2010, both the Canadian Foundation for AIDS Research (CANFAR) and the CIHR Social Research Centre in HIV Prevention (SRC) were looking for information on current knowledge, attitudes and perceptions of Canadians to help shape their respective programs. The SRC was developing its five-year strategic research program on new directions in HIV prevention research, while CANFAR wished to renew its educational/awareness programs, to determine
what type of research it should be funding, and how to increase corporate and private donations. The 2011 study was conducted collaboratively by SRC and CANFAR and executed by the national public opinion and $m$ arket research firm, The Strategic Counsel in response to these shared objectives.

The findings presented are based on a survey of 2,139 Canadians, 16 years of age or older, conducted between May 5 and May 25,2011 . All 10 provinces and the territories are represented. The survey was conducted using a dual mode methodology comprising a recruited online panel supplemented by random digit dial (RDD) telephone interviewing. The margin of error for the total sample is $+/-2.1$ percentage points at the $95 \%$ confidence interval.

## II. Key Trends Over Time

The findings of this most recent national public opinion research, suggest some shifts in public understanding of and attitudes toward HIV and AIDS since assessments, behaviours and opinions were last examined five years ago.

In 2006, Canadians expressed relatively strong levels of knowledge about HIV and AIDS and revealed improving levels of acceptance of people living with HIV in Canada. Findings collected in 2011 suggest further im provements in societal acceptance for people living with HIV and a more widespread understanding of how HIV is transmitted. Today, very few Canadians report that they could not befriend an HIV-positive individual, (with the vast majority disagreeing with this view). Most Canadians recognize that HIV is not transmitted through casual contact, but
through specific behaviours such as sharing needles with an HIV-positive person, having sexual intercourse with a person who is HIV positive without using a condom, and from an HIV-positive mother to her child during birth and breastfeeding. A small percentage (7-15\%) of Canadians has some misconceptions around casual transmission of HIV.

The research findings also reveal that some specific knowledge about the virus is widespread. Almost all understand that neither a vaccine nor a cure for HIV and AIDS is available yet. The substantial majority of Canadians understand that people living with HIV cannot defend themselves against common illnesses like colds and pneumonia and that a person with HIV can have no signs or symptoms.

Further, there is a broad public understanding that progress has been made over the last several years in HIV treatment such that people living with HIV can lead more normal lives. The 2011 findings reveal a substantial rise in public perceptions of the effectiveness of HIV and AIDS treatments, with nine-in-ten Canadians recognizing that improvements in treatments have enhanced the lives of people living with HIV.

At the same time, however, the research findings reveal that neither acceptance nor knowledge is universal in Canada. Concerns about potential non-sexual contact with and exposure to HIV persist in some social scenarios examined in the research study. Today, a significant minority of Canadians report at least some discomfort with their children attending a school with a child who is HIV-positive. A majority reports that they would be at least somewhat uncomfortable with a
close friend or family member dating a person living with HIV. It is worth noting, however, that this on-going discomfort is among a decreasing proportion of the population and does not appear to be rooted in a bias or prejudice against people living with HIV, but rather in a concern that accidental exposure could result in HIV transmission. To a large extent, concern, especially for children and family members, is driving the discomfort evident in Canadian society.

Analysis of the most recent findings on public knowledge of HIV and AIDS reveals that while self-reported and general knowledge are pervasive (more than $90 \%$ of Canadians describe themselves as at least moderately knowledgeable) and public knowledge about several means of transmission is high, gaps persist. Only about one-third of Canadians recognize that HIV can be transmitted from an HIV-positive mother to her baby when breastfeeding. Further, some uncertainty about HIV being a chronic, ongoing, but manageable infection is apparent.

Perhaps most importantly, behavioural challenges persist, despite a relatively well-informed population. While more than nine-in-ten Canadians understand that condoms are effective in reducing the sexual transmission of HIV, only one-in-two describe condom usage as a "very effective" means. Further, the frequency of condom usage is limited, particularly among some higher risk groups within the population. Among all Canadians who are sexually active, less than one-quarter report condom usage when they last had sexual intercourse. This may be explained in part by the fact that the vast majority of respondents report long-term, monogamous
relationships, however, only a small proportion of single respondents and people who have had two or more sexual partners in the last year report having used a condom wh en they last had sexual intercourse.

The proportion of people who report ever having been tested for HIV remains unchanged since 2003, with about three-in-ten Canadians reporting testing (excluding testing for insurance, blood donation, and research ). Variation in the proportion of people who have been tested for HIV is apparent by subgroups within the population, with single respondents, people between 25 and 39 years of age, and people with multiple sexual partners reporting higher rates of testing.

Canadians are clear that people with HIV are entitled to the same rights as all other citizens. More than nine-in-ten Canadians agree that people living with HIV should have the same rights to em ployment, healthcare and housing as all others. Further, there is strong agreement that people living with HIV have the same right to be sexually active as all other Canadians as long as they inform their sexual partners of their HIV status. The importance of the caveat around disclosure of HIV status, however, is critical to this agreement. In 2006 and again in this year's study, fewer than half of all respondents agree with the general view, "people living with HIV have the right to be sexually active." The proportion who agrees with this view rises substantially when the caveat of disclosing one 's HIV status is added as a condition or when the caveat of practicing safe sex is included. Most Canadians are willing to accept that people with HIV have the same rights as all others, but
conditions of disclosing HIV status and a requirement for safe sexual practices are seen as conditions on these rights.

For the first time in a national study, attitudes around criminal prosecution of people with HIV who knowingly do not inform sexual partners are examined. Almost nine-in-ten Canadians are aware that a person with HIV can be criminally charged if they do not disclose their status to their sexual partners. Three-quarters of the population take the vie w that it is appropriate to imprison someone who knowingly fails to disclose their status. More than half believe that it is "definitely appropriate" to imprison people with HIV who knowingly fail to disclose their HIV status to sexual partners. Despite this resolute view, there is no public consensus on the outcome of such criminal prosecution. Canadians are divided in their views as to whether prosecution of people with HIV who fail to disclose their HIV status to sexual partners is an effective means of deterring people with HIV from transmitting the disease to sexual partners or whether it increases the stigma and discrimination against people living with HIV. Some uncertainty about the effectiveness of criminal prosecution is also apparent around the issue of deterring those who believe th ey may be infected from being tested for HIV. Overall, the data suggest that there is a strong view that criminal prosecution is appropriate, but the outcomes of such prosecution are unclear and divide the population.

The research study also sought to understand Canadians' behaviour around charitable giving and donations to organizations involved in issues related to HIV and AIDS treatment, prevention and education. The majority of people living in

Canada report that they have made charitable or not-for-profit donations in the last year. Most identify health or ganizations, agencies assisting children and youth, and disaster relief as the primary targets for their charitable dollars.

Donations to disease-related causes and organizations are particularly strong, with substantial proportions of Canadians reporting contributions to organizations dealing with cancer, heart and stroke, multiple sclerosis, and diabetes. By comparison, donations to HIV/AIDS organizations are more limited; but almost one-inten Canadians, who have made a donation in the last year, report that they have contributed to an HIV/AIDS-related organization and almost onequarter have made such a donation in the past (i.e., have ever made a donation to an HIV/AIDS organization). Further, half of those who have not donated to an HIV/AIDS-related organization in the past indicate that they could be persuaded to do so in the future, presenting a significant opportunity for such organizations to increase their donations from an untapped segment within Canada.

Even with a willingness to donate to HIV/AIDSrelated organizations, the substantial majority of Canadians believe that government continues to have a responsibility to fund HIV and AIDS research. More than nine-in-ten hold this view, with almost six-in-ten believing that "to a large extent" government has such a responsibility. At the same time, there is a widespread view that the private sector also has a responsibility to make contributions and donations to fund HIV and AIDS research. While not as strong as the view that government has such a responsibility, eight-
in-ten believe to at least a moderate extent that the private sector has a responsibility.

## III. Summary of Key Findings

## A. Overall Knowledge and Awareness of HIV and AIDS

Cancer is the disease that most concerns people living in Canada and on an unaided basis is cited at least five times more frequently than any other disease. HIV/AIDS is cited by $1 \%$. Findings
suggest a correlation between perceived seriousness of a disease and its prevalence among Canadians.

Although it ranks behind heart disease, breast cancer, and child obesity in perceived seriousness, three-quarters of Canadians identify HIV/AIDS as a serious health issue in Canada and three-inten see it as a very serious issue. Concern about HIV/AIDS is greatest among those who are single. Men aged 16-24 years report the highest level of concern. (Table 1)

Table 1: Perceived Seriousness of Health Issues in Canada Today


Self-reported fundamental knowledge about HIV/AIDS is high, as a large majority report that they are at least moderately knowledgeable about the disease. Self-reported knowledge levels appear not to have changed since 2003 with over $90 \%$ of Canadians reporting that they feel they are at least "moderately" knowledgeable about the disease. The most knowledgeable include women, and those aged 25-39. Knowledge rises with income and education, although the perceived seriousness of HIV declines as income and education rise. Those who are sexually active are more likely than those who are not to say that they are "very knowledgeable" and those who are in a self-reported sexual minority are most likely
to describe themselves as "very knowledgeable". Canadians are also relatively well informed about the transmission and spread of HIV. (Table 2)

General knowledge concerning HIV and AIDS was tested through five statements. A strong majority agrees that people who have HIV cannot defend themselves against common illnesses such as colds and pneumonia ( $84 \%$ ). This finding is consistent with the proportion found in both 2006 ( $81 \%$ ) and 2003 ( $84 \%$ ). A large majority also agrees that a person can be infected with HIV and have no signs or symptoms ( $82 \%$ ). About onethird of Canadians agree that one-in-four people living with HIV in Canada do not know that they have the infection. However some uncertainty is

Table 2: Self-Rated Knowledge of HIV and AIDS
"How knowledgeable would you say that you are about HIVIAIDS?"


[^0]apparent on two measures. About two-thirds of Canadians agree that HIV/AIDS is a fatal disease (one-in-five disagree). Although the question wording was changed slightly in 2011, this represents a modest increase over the proportions found in 2006 and 2003 ( $61 \%$ in both years). About six-in-ten Canadians agree that HIV/AIDS is a chronic or on going, but manageable, condition, with about one-in-four disagreeing that it is. (Table 3)

Consistent with their broad self-rated knowledge, there appears to be good understanding among Canadians as to how HIV is transmitted. Unprompted, Canadians identify sexual transmission, the unsafe use of needles, and blood
exchange as the main ways that HIV is transmitted to another person. When this issue is examined on a prompted basis, Canadians are almost universally aware that the primary means of HIV transmission are "by sharing needles with HIV/AIDS -infected individuals and by having sexual intercourse with an infected person without using a condom". While slightly lower, a substantial majority ( $82 \%$ ) is also aware that HIV can be transmitted from an HIV-positive mother to her baby during childbirth. However, awareness that an HIV-positive mother can pass the virus to her baby while breastfeeding is limited to just $36 \%$ of Canadians, suggesting further education on means of transmission may be warranted.

Table 3: General Knowledge of HIV and AIDS


Table 4: Perceptions of How HIV is Transmitted


Erroneous beliefs regarding the transmission of HIV exist within a sm all minority of Canadians. These include transmission by kissing an infected person on the lips ( $15 \%$ ), by sharing food or drink with an HIV-infected person (11\%) or by being coughed or sneezed on by a person with HIV (7\%). (Table 4)

More than nine-in-ten Canadians believe that condoms are effective in reducing sexual transmission or spread of HIV, although only half believe that condoms are "very" effective in doing so. The findings also reveal that those who are most sexually active and, potentially, the most at risk for HIV are also the most likely to recognize the effectiveness of condom use in reducing the transmission or spread of HIV. (Table 5)

Notwithstanding the high level of overall
understanding of the effectiveness of condoms for this purpose, less than one-quarter of Canadians report that they used a condom the last time they had sexual intercourse. This level of reported condom use is unchanged from 2006. In considering these findings, however, several related findings should also be considered. The majority of those who are married or have had only one sexual partner in the last year are much less likely to report having used a condom when they last had sexual intercourse. Conversely, reported condom use is significantly higher among those who are single, and particularly among young single males, those who have more than one partner, and those with casual sexual partners. Even among these groups, however, condom use is limited and significant proportions report that a condom was not used when they last had sexual intercourse.

Table 5: Perceived Effectiveness of Condom Use in Reducing Sexual Transmission or Spread of HIV

| How effective do you believe ... |  |  |  | \% Veryl <br> Somewhat <br> Effective <br> 94 |
| :---: | :---: | :---: | :---: | :---: |
| Condoms are in reducing sexual transmission or spread of HIV/AIDS? | 2011 | 50 |  |  |
|  |  | $10 \% \quad 20 \% \quad 30 \% \quad 40 \%$ <br> - Very Effective <br> Not Very Effective <br> - DK/NARef | $\begin{array}{llllll} 0 \% & \text { 60\% } & 70 \% & 80 \% & 90 \% & 100 \% \\ & \text { - Somewhat Effective } & \\ \text { - Not At All Effective } \end{array}$ |  |
| $\begin{aligned} & \text { Q.24-25 How effective do you believe . . .? } \\ & \text { Base: All respondents ( } n=2139 \text { ? } \end{aligned}$ |  |  |  |  |

## B. Testing

About one-half of Canadians report that they have been tested for HIV. This proportion is consistent with the proportions found in both 2006 and 2003. The most common reported reasons for testing are for blood donation ( $20 \%$ ) and to find out whether individuals were infected with HIV (17\%). One-in-ten Canadians report being tested for insurance purposes. (Table 6)

Marital status appears to play a role in reasons for testing. Those who are single are more likely than those who are married to report having been tested specifically to find out whether they were infected with HIV. Married Canadians, by contrast, are more likely to report having been tested for insurance purposes and for blood donation.

Further examination of HIV testing was undertaken by excluding from the analysis those who were te sted for the purposes of insurance, blood donation, or research. Consistent with
findings from both 2006 and 2003, two-thirds of Canadians who were not tested for HIV in connection with one of the three purposes have never been tested. In other words, only three-inten of these Canadians have ever been tested for HIV. This suggests that HIV testing in Canada has not increased in eight years, as the proportions found in 2011 are essentially unchanged from those found both in 2006 and 2003. (Table 7)

Table 6: Proportion Tested for HIV


Table 7: Proportion Tested for HIV (excluding testing for insurance, blood donation, research)

Have you ever been tested for HIV?
(excluding testing for insurance, blood donation and participation in research)


[^1]
## C. Perceptions of whether HIV/AIDS is

## Curable

The belief that HIV/ AIDS is "becoming less of a problem" has weakened consistentl y since 2003, with a slight majority in 2011 saying that they neither agree nor disagree. This suggests so me uncertainty among Canadians about the status of HIV/AIDS today.

Consistent with findings from 2006, a large majority of Canadians in 2011 ( $85 \%$ ) believe correctly that HIV/AIDS is not curable. The belief that it is curable is limited to a very small minority (7\%).

Uncertainty as to whether HIV/AIDS is curable has increased slightly from $3 \%$ of Canadians in 2006 to $8 \%$ in 2011.

In a related finding, just over three-quarters of Canadians recognize that at the present time there is no effective vaccine to prevent HIV infection. Just $8 \%$ believe that there is such a vaccine. (Table 8)

Almost nine-in-ten Canadians today believe that HIV/AIDS treatments are effective in helping people with HIV lead normal lives. This is a significant increase since 2003. (Table 9)

Table 8: Perception of whether or not HIV/AIDS is Curable


Table 9: Perceived Effectiveness of HIV/AIDS Treatments


## D. Attitudes Toward People with HIV

Canadians exhibit a strong and increasing level of acceptance for and com fort with people who are living with HIV. Minorities in each case say that: they feel afraid of people living with HIV (16\%); that if so meone becomes infected with HIV they have only themselves to blame for it (11\%); or that they could not become friends with someone who has HIV (8\%). (Table 10)

Consistent with these findings, Canadians appear more comfortable working with people with HIV and having their children interact with other children who have HIV than in the previous surveys. Perhaps related to the broad recognition that HIV can be transmitted from an infected individual to a sexual partner, the research does find evidence of so me continuing unease with having close friends or family members date a person living with HIV. (Table 11)

Among those for whom some discomfort with people living with HIV remains, this appears to be driven primarily by fear about trans mission of the disease rather than by stigma or discrimination. Discomfort with the "type" of person who has HIV is limited to a small proportion of Canadians. This is confirmed by the substantial majorities rejecting both the view that they are afraid of people living with HIV and that they could not become friends with a person who was living with HIV. It is im portant to note, however, that while Canadians generally exhibit low levels of prejudice to people who are living with HIV, they do believe strongly that people living with HIV bear a responsibility to disclose their HIV status to sexual partners.

There are demographic differences on these issues. People who identify as a sexual minority report higher levels of comfort on each of the statements surveyed, while people who identify as members of a visible minority group are less likely to do so on three of the four statements and
marginally less likely than Canadians overall to
member dating som eone living with HIV. (Table be comfortable with a close friend or family 12)

Table 10: Agreement with Attitudes Toward People with HIV


Table 11: Level of Comfort with HIV/AIDS


Table 12: Levels of Comfort with Specific Scenarios by Self-described Minority or Majority Status

|  | National Average | Visible Minority $(5,6,7)$ | Sexual Minority | No Minority |
| :---: | :---: | :---: | :---: | :---: |
|  | \% Very / Somewhat Comfort-able $n=2139$ | \% Very / Somewhat Comfort-able $n=166$ | \% Very / Somewhat Comfort-able $n=98$ | \% Very / Somewhat Comfort-able $n=1656$ |
| ...if your child were attending a school where one of the students was known to have HIVIAIDS | 60 | 48 | 89 | 61 |
| ...if you worked in an office where someone working with you developed HIVIAIDS | 77 | 66 | 89 | 78 |
| ...shopping at a small neighbourhood grocery store, if you out the owner had HIVIAIDS | 72 | 65 | 85 | 73 |
| ...a close friend or family member dating someone with HIV/AIDS | 43 | 40 | 61 | 43 |

## E. Rights of People with HIV

In most respects, Canadians believe that people living with HIV should have the same rights as any other Canadian. A strong majority of Canadians believe that people living with HIV should have the same rights to employment, healthcare and housing as all other Canadians. Sexual activity is the exception to this very broadly held view concerning the rights of people living with HIV.

Fewer than half of Canadians believe that people with HIV have the right to be sexually active, and nearly one-third disagree, believing that people with HIV do not have the right to be sexually active. These findings are consistent with findings from 2006, suggesting that Canadians' views on this issue are quite stable. However, attitudes do shift when the right to be sexually active is qualified. About seven-in-ten Canadians agree that people living with HIV have the right

Table 13: Agreement with Statements about HIV/AIDS and Rights

to be sexually active if they practice safe sex, and an even larger majority of Canadians (about eight-in-ten) agree that people living with HIV have the right to be sexually active as long as they inform their sexual partners about their HIV status. These are significantly higher proportions than that found when the right to sexual activity is unqualified, and suggests that Canadians may be viewing this issue through the lens of controlling the risk of HIV transmission and of protecting those who might be at risk of becoming infected through sexual activity. (Table 13)

## F. Criminal Sanctions for Failing to Disclose HIV Status to Sexual Partners

Almost nine-in-ten Canadians are aware that people with HIV can be criminally prosecuted for knowingly failing to disclose their HIV status to
sexual partners. Furthermore, about threequarters of Canadians believe that it is appropriate to imprison someone who knowingly fails to disclose his or her HIV status to a sexual partner, and more than one-half believe that it is "definitely" appropriate to do so. (Table 14)

Table 14: HIVIAIDS and Criminal Charges for not Disclosing Status to Sexual Partners


[^2]Despite the majority belief that it is appropriate to imprison those who kno wingly fail to disclose their HIV status to sexual partners, an examination of related issues finds some divisions among Canadians. While fewer than half agree that criminal prosecution is an effective way to stop or deter people from transmitting HIV to their sexual partners, fully one-third do agree that this is effective. Canadians are even more divided as to whether criminal prosecution increases the stigma and discrimination of people living with HIV ( $41 \%$ agree and $33 \%$ disagree), and as to whether criminal prosecution deters or stops those who think they may be infected with HIV from being tested ( $31 \%$ agree and $40 \%$ disagree).

## G. Charitable Giving and HIV/AIDS

The vast majority of Canadians report having donated to a charitable or not-for-profit organization in the last year. The most frequent
beneficiary of Canadians' donations are organizations seeking treatment or a cure for diseases and llnesses, although significant proportions of donations are directed to organizations assisting children, disaster relief agencies, organizations dealing with poverty and homelessness, and hospitals.

Fewer than one-in-ten Canadians report donations in the last year to organizations dealing with HIV/AIDS. Those who reported having donated to an HIV/AIDS-related organization tend to be young, have a high school education, be knowledgeable about HIV/AIDS, single, and members of a sexual minority.

While almost one-quarter of Canadians have ever donated to an HIV/AIDS organization, almost half who have not made a donation to an HIV/AIDS organization say that they are willing to consider such donations. Although strong intent to donate to an HIV/AIDS organization
("very likely") is limited to about one-in-ten, these findings do suggest an opportunity to extend the base of people donating to these organizations. Related to this, the vast majority of Canadians are prepared to consider varying the recipients of their charitable donations. Once again, this finding suggests opportunity for HIV/AIDS organizations. (Table 15)

Canadians are most likely to contribute to charitable organizations through monetary donations, including sponsoring individuals taking part in an event on behalf of a charity or purchasing tickets for raffles and draws. Canadians are also willin $g$ to give their time, as almost half report having volunteered with organizations that are engaged in charitable or not-for-profit work within the last year.

Social media represents an emerging element in the charitable giving sphere. More than one-in-ten who have made a charitable donation in the past year report that their involvement with charitable giving has changed with the availability of social media options. Those most likely o report that their giving has been affected by social media are the young, those who are single, and those who self-identify as members of a sexual or visible minority. As this describes the demographic characteristics of those most likely to have made a donation to an HIV/AIDS organization, the suggestion is that social media could be a valuable tool for HIV/AIDS organizations.

## Table 15: Donating to Charity/Not-for-Profit that deals with HIV/AIDS




Likelihood of considering making a donation to an organization involved with HIV/AIDS research, treatment or cure


[^3]Canadians believe that it is the government's responsibility to continue funding HIV/AIDS research, with nearly six-in-ten believing this "to a large extent". Although the belief is less pervasive that the private sector has a role in funding HIV/AIDS research, nine-in-ten Canadians believe to at least "a moderate extent" that it does.

In a related finding, almost three-quarters of Canadians believe to at least a moderate extent that a company's history of giving to causes such as HIV/AIDS research has a positive influence on their impressions of the company and that it influences their purchasing behaviour. Moreover, those most likely to hold this view are those from a higher socio-economic stratum. (Table 16)

Overall, the research findings on charitable giving reveal a population that is notably involved both monetarily and voluntarily with a range of organizations. While the incidence of giving to HIV/AIDS organizations is limited, opportunities exist to extend the donor pool, as significant proportions of Canadians express a willingness to consider donations to HIV/AIDS causes and organizations and place at least some priority on HIV/AIDS issues in their consideration of their annual donations. Social media should be pursued as a means of capturing potential donors as the profile of those who report changes in giving due to social media reflect the current donor profile of those who give to HIV/AIDS organizations.

Table 16: Views on HIV/AIDS Research Funding Issues


[^4]
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[^0]:    Q. 8 How knowledgeable would you say that you are about HIVIAIDS on a scale of 1 to 7 , where " 1 " is not at all knowledgeable and " 7 " is extremely knowledgeable and the midpoint " 4 " is moderately knowledgeable.
    Base: All respondents ( $n=2139$ )
    Q. 9 To what extent do you agree or disagree with the following on a scale where " 1 " is completely disagree, " 7 " is completely agree and the midpoint " 4 " is neither agree nor disagree. HIVIAIDS is much less of a problem in Canada today than it was ten years ago.
    Base: All respondents ( $\mathrm{n}=2139$ )

[^1]:    Q. 27 Have you ever been tested for HIVIAIDS for any of the following reasons? [for insurance purposes; when donating blood; for immigration purposes; to
    find out if you were infected with HIV; to participate in a research study; for another reason)

    * Note: responses have been re-percentaged to exclude those who have been tested for insurance purposes, when donating blood and to participate in
    a research study. Multi-mention.
    Wording in 2006: Have you ever been tested for HIV, excluding testing for insurance, blood donation and participation in research studies?]
    Base: Those who have been tested

[^2]:    Q. 46 In your opinion, is it appropriate to imprison someone who is found guilty of knowing that he or she has HIV/AIDS but did not tell their sexual partner or partners of their status? Would you say it is..
    Base: All Respondents $(\mathrm{n}=2139)$

[^3]:    Q. 65 Have you ever made a donation to a charitable or not-for-profit organization that deals specifically with HIV/AIDS?

    Base: Those who say they have donated to a charitable organization in the last year ( $\mathrm{n}=1765$ )
    Q. 66 How likely is it that you would consider making a donation to a charitable or not-for profit organization involved with HIVIAIDS research, treatment and cure? Would you say it is..
    Base: Those who have not made a donation to a charitable organization that deals specifically with HIV/AIDS ( $n=1374$ )

[^4]:    Q.72-74 Please indicate the extent to which you believe each of the following by selecting a number between " 1 " and " 7 ' where " 1 " means to no extent at all, " 7 " means to a very large extent and the midpoint 4 means to a moderate extent.
    Base: All respondents ( $n=2139$ )

