Historical Empowerment

December 14, 2010

There is no better way to summarize the goals of self-empowerment than to highlight The Denver Principles, a manifesto issued in Denver in 1983 by a group of people living with HIV/AIDS. The Denver Principles are as relevant and powerful today as they were nearly 30 years ago. Here is a portion of this historical document:

We Are Not Victims
We condemn attempts to label us as “victims,” a term that implies defeat, and we are only occasionally “patients,” a term that implies passivity, helplessness and dependence upon the care of others. We are “People With AIDS.”

Recommendations For All People
1. Support us and join in our struggle against those who would refuse to touch us, or who would fire us from our jobs, evict us from our homes or separate us from our loved ones, our community or our peers, since available evidence does not support the view that AIDS can be spread by casual, social contact.

2. Do not scapegoat people with AIDS, blame us for the epidemic or generalize about our lifestyles.

Recommendations For People With AIDS
1. Form caucuses to choose their own representatives, to deal with the media, to choose their own agenda and to plan their own strategies.

2. Be involved at every level of decision-making. Specifically, serve on the board of directors of provider organizations.

3. Be included in all AIDS forums with equal credibility as other participants, to share their own experiences and knowledge.

4. Substitute low-risk sexual behaviors in place of those that could endanger themselves or their partners; we feel that people with AIDS have an ethical responsibility to inform their potential partners of their health status.

Rights Of People With AIDS

1. To live as full and satisfying sexual and emotional lives as anyone else.

2. To receive quality medical treatment and quality social service provisions without discrimination of any form, including sexual orientation, gender, diagnosis, economic status or race.

3. To obtain full explanations of all medical procedures and risks, to choose or refuse their treatment modalities, to refuse to participate in research without jeopardizing their treatment and to make informed decisions about their lives.

4. To ensure privacy and confidentiality of medical records, to receive human respect and the right to choose who their significant others are.

5. To die—and to LIVE—in dignity.

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