



WOMEN'S HEALTH  
IN WOMEN'S HANDS  
COMMUNITY HEALTH CENTRE  
INCREASE • INNOVATE • IGNITE

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# ANNUAL REPORT 2014

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Ontario's Community  
Health Centres  
Every One Matters.



**Ontario**  
Toronto Central Local Health  
Integration Network





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IN WOMEN'S HANDS  
COMMUNITY HEALTH CENTRE  
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## THE MANDATE

of Women's Health in Women's Hands (WHIWH) Community Health Centre is to provide primary healthcare to racialized women from the African, Black, Caribbean, Latin American and South Asian communities in Toronto and surrounding municipalities. We are committed to working from an inclusive feminist, pro-choice, anti-racist, anti-oppression, and multilingual participatory framework in addressing the issue of access to healthcare for our mandated priority populations encompassing gender, gender identity, race, class, violence, sexual orientation, religion, culture, language, disability, immigration status and socio-economic circumstances.

## OUR COMMITMENT

- Working together as a multidisciplinary team to provide quality health care.
- Addressing the issue of access to healthcare (encompassing all the determinants of health) caused by poverty, gender, race, violence, sexual orientation, religion, culture, language, disability, class, and socio-economic circumstances.
- Developing strategies to remove the barriers embedded within the healthcare system which strongly influence how one experiences health and how one is treated by the health care system.
- Advocating for and with our communities for change.
- Participating in community activities which create the social and environmental conditions that promote health and wellness.
- Enhancing women's sense of well being in an atmosphere that allows us to validate each other's definitions and experiences.
- Supporting women's right to make informed choices about our health.

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# STRATEGIC PLAN 2012-2015

Recommended by the Board of Directors for endorsement by the WHIWH membership at its annual general meeting September 27th, 2012

## GOAL

To increase access to and provide primary healthcare for Black Women and Women of Colour from the Caribbean, African, Latin American and South Asian communities in Metropolitan Toronto and surrounding municipalities

## DIMENSIONS OF CARE

■ Client Centered Care ■ Evidence Based Practice ■ Quality Service Delivery

## STRATEGIC DIRECTIONS

- 1** WHIWH will provide excellent primary healthcare for its priority populations by delivering high quality, client centered and evidence informed primary healthcare with a focus on diabetes, mental health and HIV/AIDS.  
**By 2015 WHIWH will:**
  - Establish and meet performance metrics relevant to our priority populations
  - Use evidence to identify community needs and service locations
  - Draw upon best practices to develop service delivery models appropriate for our priority populations
- 2** WHIWH will facilitate and conduct research that improves service delivery and policies affecting its priority populations  
**By 2015 WHIWH will:**
  - Develop and implement a sustainable research model
  - Align research with primary healthcare priorities
  - Generate and disseminate research for evidence informed services; systems planning, advocacy and public policy work
- 3** WHIWH will engage in strategic partnerships that align with the organizations primary health care plan as well as system integration priorities.  
**By 2015 WHIWH will pursue partnerships that:**
  - Expand its geographic reach
  - Build organizational capacity and
  - Facilitate client access to services which address the broader determinants of health models appropriate for our priority populations

## OUTCOMES

- 1** Increased access to primary healthcare for WHIWH priority populations
- 2** Improved outcomes for our clients in relation to primary healthcare priorities : diabetes, mental health and HIV/AIDS
- 3** Increased research generated and disseminated for the improvement of service delivery for our priority populations

# Message from the WHIWH Board Chair and Executive Director

*"The road to success is always under construction."*

- Lilly Tomlin

At Women's Health in Women's Hands Community Health Centre we take great pride in our work and our commitment to quality healthcare. What drives our work and motivates us is a deeply held commitment to serve the many women who walk through our doors.

When service is the focal point around which our care revolves, it becomes a constant reminder for us about who and why we are here. We recognize that being healthy extends far beyond a state of being free from illness. It is the peace of mind one has when you can access strong supportive networks, when you and your family are safe and live a life free from violence, when you can buy nutritious food, live in affordable housing, engage in physical activity, and live a life free from discrimination.

WHIWH-CHC has excelled in assisting women along the road to success and in removing those barriers that hinder their ability to live healthy lives. We have excelled in treating our clients as equal partners in managing their health and respecting the expertise that women have in their own lives and in determining positive outcomes. In an effort to improve the quality of the services we provide, we continue our strategic commitment to building strong partnerships and working together with our communities to identify their priorities and look for solutions. It is with these core beliefs that we approach our everyday work at WHIWH-CHC.

We also know that improving and maintaining the health of the communities we serve requires continuous engagement with all stakeholders including volunteers, clients, community members, partners and funders. We can assure you that At WHIWH-CHC our clients are treated with dignity and respect. We understand that the best healthcare is delivered when we take the time to understand the client's physical, emotional and cultural needs. While these needs can be great, we fully understand that the opportunities created become greater. Our passionate and committed staff and board will continue to move towards being a high performing community health centre, providing the best possible care for our communities now and into the future.

We once again want to thank our clients, staff, volunteers, community partners and funders for their support. We continue to invite you to join us by investing your time, energy and resources to help create a greater WHIWH-CHC.

In Solidarity,

Lauriana Mandody  
Board Chair

Notisha Massaquoi  
Executive Director



# WHIWH Board of Directors



**Lauriana Mandody**  
Chair



**Vijaya Chikermane**  
Vice-Chair



**Suja Suntharaligham**  
Treasurer



**Richelle Samuel**  
Secretary



**Karla Orantes**  
Member at Large



**Dr. Onye Nnorom**  
Member at Large



**Novlette Fraser**  
Member at Large



**Jewel Amoah**  
Member at Large



**Sarah Beech**  
Member at Large



**Kelita Vera-Espinola**  
Staff Representative



**Raelene Prieto**  
Staff Representative

# Client Centred Care

## WHIWH 2013/14 Survey highlights

**47%** of WHIWH clients have been with us for more than 7 years

**81%** felt staff explained things in a way that was easy to understand

**77%** were always seen on time when arriving for appointment

**99%** felt comfortable and welcome at WHIWH-CHC

**94%** felt they were treated with respect

**84%** felt the staff helped connect them to the services and programs they needed in their community

**87%** felt the programs and services offered by WHIWH CHC met their needs

**84%** of clients agree that their Healthcare provider always tells them about treatment options and involves them in discussions about the best treatment

**92%** of clients agree that their healthcare provider always spends enough time with them

**96%** of Clients would refer a friend to WHIWH-CHC for services

## Excellence in Primary Health Care

**80%** WHIWH Clients 18-69 have had a pap test (Cervical Cancer screening)

**86%** WHIWH Clients with Type 2 Diabetes have received multidisciplinary care

**76%** WHIWH Clients have had their annual health exam

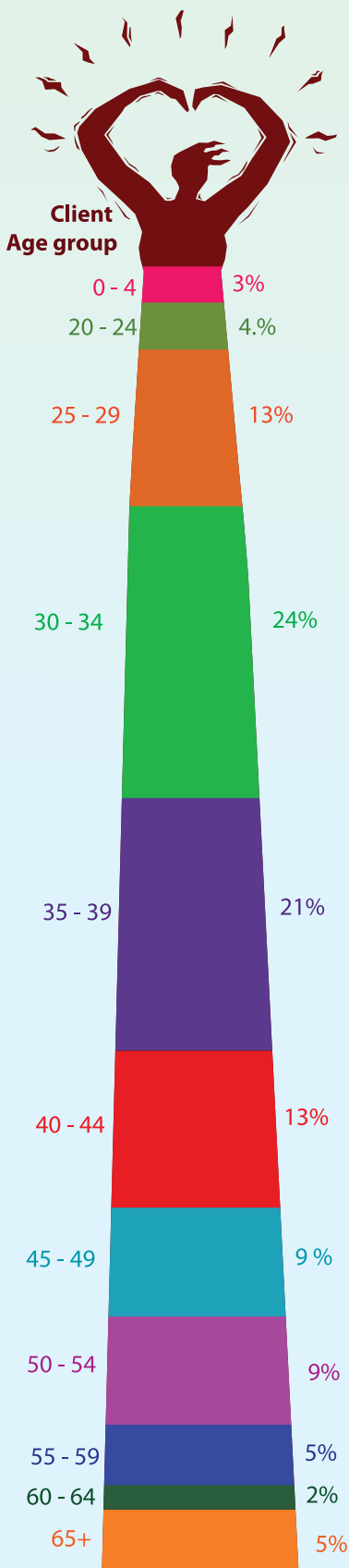
**“WHIWH helps women like myself to have access to healthcare and other services without any stress and their team is professional and confidential” – WHIWH Client 2014**

**“I am very satisfied with the service. The process was explained and I was given feedback along the way.” –WHIWH Client 2014**

**“I have no complains, they are doing a very good work and I am very satisfied, they are courteous and polite, they could not have been better” – WHIWH Client 2014**

**“First, I feel very comfortable at the centre. Every day is a new learning day for me. The network, self- love, self-care, self-acceptance, being aware, the level of health education I receive is huge. I am able to encourage and empower myself as a woman when I see a lot of women from almost everywhere globally, who contribute to other women” - WHIWH Client 2014**

# Evidence Based Practice



## Top 10 Reasons for Visiting WHIWH

1. Depression
2. Anxiety
3. Cervical Cancer Screening
4. Annual Physical/Reproductive Health
5. Diabetes
6. Hypertension
7. Immigration Issues
8. Financial Problems/Housing
9. Abuse
10. HIV/AIDS

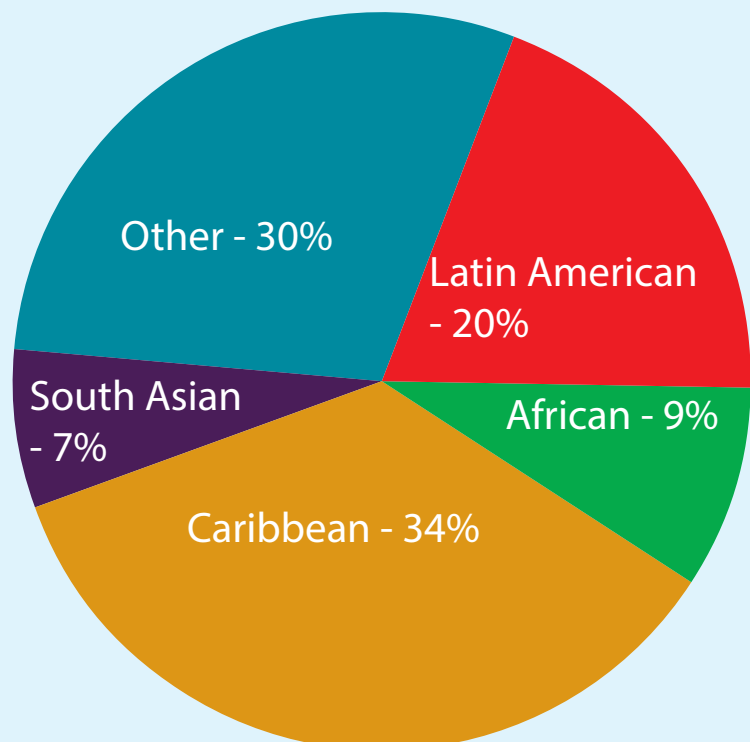
## Social Media and Communication

446 Facebook Likes  
1315 Twitter followers

## Top 10 Countries of Origin

1. St. Vincent and the Grenadines
2. Canada
3. Grenada
4. Jamaica
5. St. Lucia
6. Mexico
7. Trinidad and Tobago
8. Columbia
9. Brazil
10. Costa Rica

## Client Ethnicity



# Quality Service Delivery

## Minister of Health Deb Matthews Launches P3 at WHIWH



WHIWH CHC was proud to host The Minister of Health Deb Matthews for the launch and new funding announcement for the Positive Pregnancy Program. The program creators, pioneering midwife Jay MacGillivray and obstetrician Dr. Mark Yudin will co-lead this one of a kind clinic housed at St. Michael's Hospital. The Positive Pregnancy Program is a multidisciplinary program established for the care of HIV-positive pregnant women. The aim was to provide supportive and comprehensive care from

a variety of perspectives, including medical, social, and psychological. During prenatal appointments, women are seen by the physician, midwife, and also by a prenatal nurse and social worker. There are established linkages with HIV providers, pediatricians, and pharmacists. The program will continue to have ongoing involvement from the community and organizations as it evolves and grows. This dynamic team has cared for over 200 pregnancies and WHIWH is a proud partner in this initiative.

## Culturally Adapted Cognitive Behavioral Therapy

WHIWH CHC as the lead agency in partnership with the Centre for Addictions and Mental Health (CAMH), Canadian Centre for Victims of Torture (CCVT) and Sherbourne Health Centre have been awarded new core funding from the TCLHIN. The funding supports collaboration in the development and implementation of a model of mental health service delivery that will leverage culturally adapted Cognitive Behavioral Therapy tools and resources produced by CAMH; increase access to culturally appropriate and trauma-informed CBT (both group

and individual counselling) and improve mental health system navigation for Immigrant, racialized and refugee populations. The model aims to provide services to more than 200 people per year through individual and group counselling. The program will be executed by therapists who will be located in 3 partner agencies (WHIWH CHC, Sherbourne Health Centre and CCVT). Each organization will be adding approximately 20 additional counselling hours to their current counseling program as well as increasing the ability of agencies to provide extended counseling hours during evenings.

## Reaching Out to Our Communities - St James Town

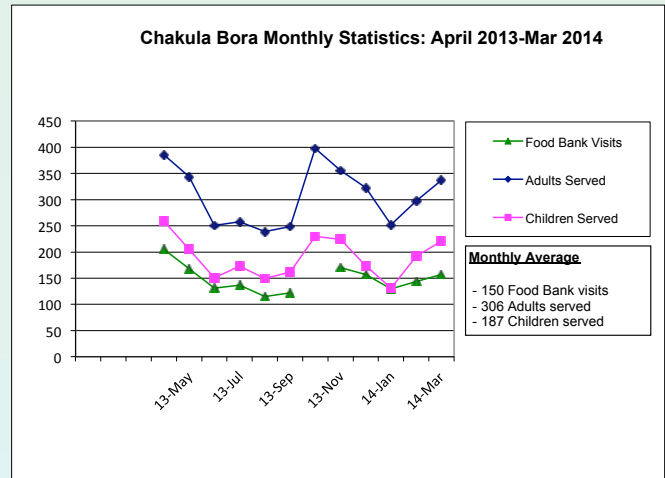
We have formalized our commitment to supporting the health and wellbeing of our communities living in St James Town by joining the St James Town Service Provider Network (SJTSPN) and the Health Access St James Town (HASJT) project. Collaborations to date include cervical cancer screenings, a yoga program, warm referral system, community engagement, and supporting residents with complex health issues. More to come over the next year!



## Chakula Bora Food Bank

The food bank is an important service that we offer clients as temporary relief from food insecurity. Over the last year, we had more than 2,000 visits to our

Chakula Bora food bank, serving more than 4,500 adults and 2,800 children. Average monthly statistics are shown in the table below:



## Mind & Body Movement Program

WHIWH CHC launched the Mind & Body Movement (MBM) Program, which is a collection of activities, groups and workshops that focus on achieving and maintaining wellness of mind and body through physical activity. This summer, over 100 women participated in Yoga, Zumba, and Latin Groove Dance workshops. It was the first time participating in these types of activities for many women. Although the classes varied from the calm poses of yoga to the upbeat international rhythms of Zumba, the response was nevertheless the same. Participants also reported positive changes to their mental wellness and physical health, as well as a strong sense of community belonging.



## Girls Group

Girls Group arose from a new partnership with For Youth Initiative (FYI) in January 2014 as a program for 16 - 21 year old racialized women that emphasizes sisterhood, empowerment and self-love. The girls engage in fun, creative, and critical thinking activities to help build self-esteem, leadership, coping mechanisms, and awareness of what it means to be a young racialized woman. It is a drop-in group that runs once a week at FYI and monthly at our CHC. To date, participants have developed a great sense of belonging, experience the group as a safe space where they have gradually given more of themselves to activities and conversation, and appear motivated to change and sustain practices that lead to and support healthier, joyous lives.



## Foot Health at WHIWH CHC

Our chiropodist, Seema Sarvat, held several foot health education workshops throughout the year that culminated in clients being fitted for biomechanically sound shoes that were procured via donation from the Michener Institute, Chiropody Clinic. Clients learned about important foot health tips such as appropriate method of nail care, moisturizing feet, neuropathy causing amputation and appropriate vs. inappropriate footwear. Over 50 clients benefited from the educational sessions and shoe fittings.



## Supporting new parents

We had another year of successful prenatal and postnatal groups at the Centre as well as blossoming collaborations with Humewood House's Young Parent Resource Centre and La Leche League Canada. Some of the outcomes reported and demonstrated by participants include increased knowledge and sense of self-efficacy about a range of parenting topics,

improved coping strategies, decreased isolation, and increased sense of community belonging. It is extremely rewarding to hear about the support networks that form, the increased confidence in parenting, and the application of new skills as a result of these initiatives!

## World Pride 2014

WHIWH CHC hit the streets during World Pride 2014 and joined the Trans March, Dyke March, and Pride Parade! Our theme, "United We Rise", captured the spirit and strength of togetherness over the weekend, as we celebrated our diversity, passion and pride! It was with pride that we participated in the Trans March, joining in chants like "Let's get critical, pride is political!" Our presence was strong for the Dyke March, where hundreds of people joined us in solidarity as we proudly waved flags, raised our voices, and jumped up as part of and in support of our LGBTQ+ communities.



For the Pride Parade, we marched as a collective with our partners in the LGBTQ+ Settlement network to celebrate newcomer pride. In cultural/traditional clothing, our group proudly waved flags from over 50 countries as we marched along the Pride route. We were also delighted to know that our image was included as part of the new Church Street Mural, which commemorates the history and achievements of LGBTQ communities!



## Fall into Fitness Walking Group

“Fall into Fitness Walking Group” was a fall 2013 initiative launched during Canada’s Community Health and Wellbeing Week. Each week, staff led a small group of clients on a neighborhood walk, then returned to the Centre for a snack and a short informal discussion about health related topics. Participants got to know each other and enjoy the crisp autumn air while nourishing their physical and mental health!



## Have Faith in Healthy Living Ambassador Project

The “Have Faith in Healthy Living” project was launched to support leadership development among racialized women from diverse faith groups in order to build the capacities of their communities to live healthier lives. To date, 72 Community Health Ambassadors have been trained and have subsequently delivered over 200 workshops to almost 3000 people. The workshops – “Get Moving” and “Eating Healthy My Way” - focused on provided key information and actions to increase physical activity and healthy eating practices. The training process for the “Have Faith in Healthy Living” project was designed with great consideration of diversity and inclusivity. Safe spaces were created and Ambassadors reported



feeling welcomed, relaxed, and accommodated. Furthermore, the project has been a great networking platform for the Ambassadors, leading to friendships, job opportunities, and stronger ties to their communities.

This project has provided many Ambassadors with an opportunity to do something that they are passionate about, which is to participate in the promotion of their community’s health. The first half of the project concluded with an Appreciation Day

that acknowledged and celebrated our Community Health Ambassadors.

Look out for them in the upcoming year! In the meantime, we invite you to continue the spirit and “Get Moving” and “Eating Healthy Your Way!”

## Advocacy Campaign to Raise the Minimum Wage



In January 2014, WHIWH CHC joined community agencies across the GTA to advocate to government to raise minimum wage to \$14/hour which would be

10% above the poverty line. As we are all too familiar with, living in poverty leads to higher rates of chronic conditions, and economic status intersects with race, gender, disability, legal status, and language to affect our clients’ health status.

WHIWH CHC challenged staff, clients, and community members in a petition drive to gather at least 500 signatures in support of the campaign and by June 2014, we collected over 600 signatures, contributing more than 25% of all signatures to the petition drive! We were also on hand to present the 40 ft. petition to the Ontario Ministry of Labour. Our visual display, “A Million Reasons Why” built on a social media campaign and demonstrated the impact of poverty on quality of life and why a living wage is necessary for all Ontarians. We also participated in monthly Days of Action and are committed to working with our community to advocate for fair wages across the province!

## Elusive Icons - Barbie arrives at WHIWH-CHC!



We had the pleasure of partnering with artist and WHIWH ally Frantz Brent Harris for a Black history month exhibition entitled “Elusive Icons: Black Fashion Dolls of 1968 to 2014”. This curated exhibit was sponsored by TD Bank and BAND and was a comprehensive collection of Black Fashion Dolls over the last 45 years. The artists’ goal was to portray

women as essential, beautiful and positive as well as facilitate discussions on body image sexuality and gender identity. It was a pleasure to host the exhibit within a women’s health centre for our clients and general public to get rare glimpse of one of the largest collections of Black fashion dolls including many which were hand made by Frantz himself.

# WHIWH Goes Global



As an official NGO of the UN Economic and Social Council (ECOSOC), WHIWH was invited to participate in the Fifty- Eighth session of the Commission on the Status of Women at the United Nations Headquarters in New York from the 10th to 21st of March 2014. WHIWH Board members Dr. Onye Nnorom and Suja Suntharaligham represented the Centre at this years consultation. The Commission on the Status of Women considered the theme: “Challenges and Achievements in the Implementation of the Millennium Development Goals for Women and Girls” The Commission on the Status of Women is dedicated exclusively to gender equality and advancement of women. It is the principal global policy- making body. Every year, representatives of Member States gather at United Nations Headquarters in New York to evaluate progress on gender equality, identify challenges, set global standards and formulate concrete policies to promote gender equality and advancement of women worldwide.

## AbbVie Women's Steering Committee



Marvelous Muchenje our Community Health Coordinator was selected as a member of the AbbVie's Women's Program & Steering Committee which held its first meeting in Paris, France from Nov 13th – 15th.

Marvelous was the North American representative at this international meeting. The Women's Program & Steering Committee is in the process of developing an educational campaign focused on raising awareness about the needs of women living with HIV. The aims of the campaign are to:

- Raise awareness of the unique needs of women living with HIV
- Encourage thoughtful and productive discussions on long-term care considerations and holistic/individualized care
- Reach women living with HIV and their caregivers at a variety of points throughout each stage of life to improve care and overcome stigma

## Visitors from India

For the fourth year in a row, we facilitated a site visit for a group of senior civil servants from India as part of their Study Tour to Canada in collaboration with the Institute of Public Administration of Canada (IPAC) and India's Lal Bahadur Shastri National Academy of Administration (LBSNAA). The civil servants learnt about CHCs across Canada from Scott Wolfe, Executive Director of Canadian Association of Community Health Centres; Vijaya Chikermane, WHIWH CHC Board Vice-Chair and Executive Director of the Alliance for South Asian AIDS Prevention (ASAAP) shared the research, practices, and program innovations of ASAAP; and our own staff talked about the policies, practices, research, and operations of WHIWH CHC and wrapped up with a tour. It was an engaging July afternoon of discussion and mutual knowledge exchange.



## The International AIDS Conference



The International AIDS Conference was held in Melbourne, Australia – July 20th – 25th, 2014 and WHIWH staff Wangari Tharao ( Programs and Research Manager), Marvelous Muchenje ( Community Health Coordinator) and Mubnii Morshed ( Research Coordinator) participated in the conference. Findings from several of our research projects were presented in the form of oral and poster presentations as well as workshops as follows:

- “Poverty, Intersecting Stigmas, and Health Outcomes among HIV-Positive African, Caribbean and Black Women in Ontario, Canada” – Oral presentation, Scientific Program – Dr. Carmen Logie
- Research Shouldn’t Sit on a Shelf – Stories of Strength, Action and Resilience from Women Living with HIV and Community-based Researchers – Workshop, Global Village Programme – Mubnii Morshed
- Implementation of HIV-positive Disclosure Interventions within Organizations: A model for African, Caribbean and Black Women in Canada – Poster, Scientific Program – Wangari Tharao

The African and Black Diaspora Global Network on HIV and AIDS (ABDGN) which is housed and trusted by WHIWH and chaired by Wangari Tharao also had a great presence at the conference and WHIWH staff at the conference supported these activities. ABDGN activities focused on three areas: a) Black Diaspora Roadmap where all sessions relevant to delegates working with Black populations in the diaspora were pulled together and printed for delegates for ease of navigating the conference; b) Black Diaspora Networking Zone (NWZ) in the Global Village which was organized in partnership with the Australia Federation of AIDS Service Organizations (AFAO), the Centre for Culture Ethnicity and Health (CEH), and AFAO’s African Reference Group. The theme of the NWZ was “Under the Baobab Tree”. Twenty five (25) local and international presenters shared their work at the zone throughout the conference to ensure local people who could not afford to register as delegates also had access to knowledge being generated in research. WHIWH presentations in the official program were also presented at the NWZ ; and c) the Black Diaspora Regional Session in the Scientific Program.

The session was titled “Stepping up from Vulnerability to Opportunity: HIV and AIDS in the Global Context of African and Black Migrant and Diaspora Populations” and was moderated by Dr. Teresa Zakaria, Manager of Migrant Health Programme for International Organization for Migration (IOM) in Yemen. Speakers included: Wangari Tharao, Canada, Women’s Health in Women’s Hands; Phill Wilson, Black AIDS Institute, USA; Valerie Delpech, Public Health England, UK; and Chris Lemoh, Monash Health, Australia. The session was near capacity with almost 500 participants and many attendees, including members of the Conference Coordinating Committee indicated it was one of the best sessions at the conference.

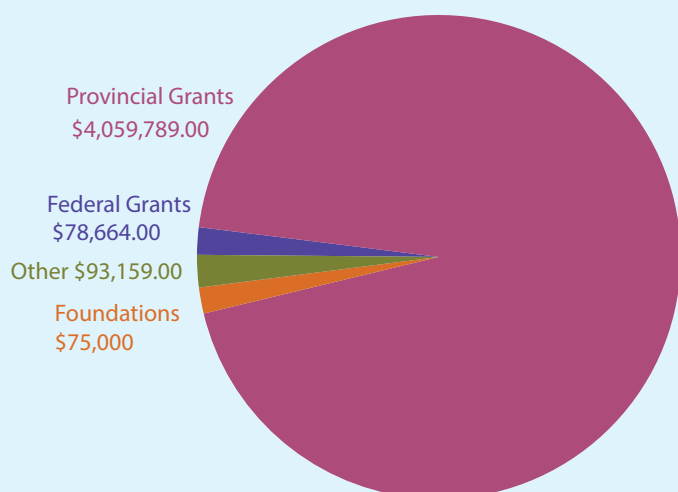


# Summarized Financial Statement

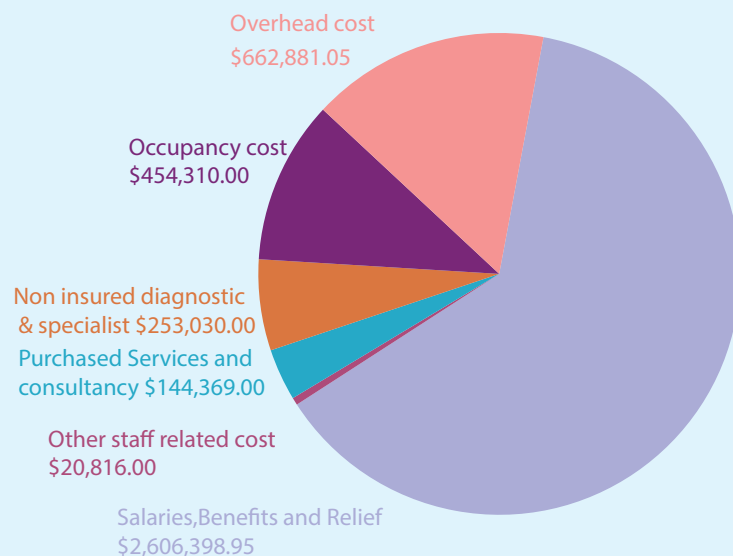
Women's Health in Women's Hands CHC -summarized statement of Revenue and Expenses for the year ended March 31st, 2014 (With comparative figures for 2013)

Expenditure	2014	2013
Salaries,Benefits and Relief	\$2,606,398.95	\$2,605,196.48
Other staff related cost	\$20,816.00	\$15,134.00
Purchased Services and consultancy	\$144,369.00	\$153,196.00
Non insured diagnostic & specialist	\$253,030.00	\$248,556.00
Occupancy cost	\$454,310.00	\$440,862.00
Other overhead cost	\$662,881.05	\$768,010.00
<b>Total Expenditure</b>	<b>\$4,141,805.00</b>	<b>\$4,230,954.48</b>
<b>Revenue</b>		
Federal Grants	\$78,664.00	\$104,640.00
Provincial Grants	\$4,059,789.00	\$4,189,274.00
Municipal Grants		\$86,411.00
Foundations	\$75,000.00	
Other	\$93,159.00	\$187,865.00
<b>Total Revenue</b>	<b>\$4,306,612.00</b>	<b>\$4,568,190.00</b>
<b>Adjustments</b>		
Transfer from/to Special Project Funds	92,517.00	(47,076.52)
Due to Central Local Health Integration Network	\$(248,518.00)	\$(258,517.00)
Due to Ministry of Health and Long Term Care	\$(8,806.00)	\$(31,642.00)
	<b>\$(164,807.00)</b>	<b>\$(337,235.52)</b>
<b>Total Revenue minus adjustments</b>	<b>\$4,141,805.00</b>	<b>\$4,230,954.48</b>

Revenue



Expenditure



# Community Partners And Funders

We acknowledge the many stakeholders in the community who work with and alongside us in broadening our work to meet the needs of our growing client population. We recognize the importance of our many academic and community partners who continue to be instrumental in implementing service and creating spaces for us to meet the needs of racialized women.

Association of Ontario Health Centres  
Across Boundaries  
African and Black Diasporic Global Network on HIV and AIDS (ABDGN)  
African and Caribbean Council on HIV/AIDS in Ontario  
Africans in Partnership Against AIDS  
AIDS Committee of Cambridge, Kitchener, Waterloo and Area  
Hamilton AIDS Network  
AIDS Committee of Ottawa  
AIDS Committee of Toronto  
Alliance for South Asian AIDS Prevention  
AIDS Niagara  
Black Coalition for AIDS Prevention  
Canadian Association of Community Health Centres  
Canadian Centre for Victims of Torture  
Canadian HIV/AIDS Legal Network  
Canadian Mental Health Association – Communities of Interest  
Casey House Hospice  
Canadian Public Health Association  
Centennial College School of Community and Health Studies  
Central Neighborhood House  
Centre for Urban Health Committee for Accessible AIDS Treatment  
CIHR Canadian Clinical Trials Network  
CIHR Social Science Research Centre in HIV Prevention, University of Toronto  
Daily Bread Food Bank  
El Tawhid Juma Circle  
Ernestine's Women's Shelter  
Fife House  
For Youth Initiative  
Fred Victor Centre  
Health Access St James Town  
Hospital for Sick Children  
Humewood House  
Interagency Coalition on AIDS and Development (ICAD)  
Institute for Clinical Evaluation Sciences  
La Passerelle-I.D.É.  
LGBTQ+ Settlement Network Toronto  
Maple Leaf Clinic  
Margaret Fraser House

McMaster University  
Mount Sinai Hospital  
Newcomer Women's Services  
Ontario Coalition of Agencies Serving Immigrants  
Ontario HIV Treatment Network  
Ottawa Children's Hospital  
Ottawa University  
Parkdale Community Health Centre  
People to People Aid Organization (Canada)  
Planned Parenthood of Toronto  
Ryerson University Faculty of Social Work  
Sherbourne Health Centre  
St James Town Community Corner  
St. Joseph's Hospital  
St. Michael's Hospital  
Taibu Community Health Centre  
Teresa Group  
The 519 Church Street Community Centre  
The Redwood  
Toronto HIV/AIDS Network  
Toronto Newcomer Strategy: Health Pillar Committee  
Toronto People with AIDS Foundation  
Toronto Public Health  
Unison Health and Community Services  
University Health Network  
University of Toronto Bloomberg Faculty of Nursing  
University of Toronto Centre for Community Partnerships  
University of Toronto Factor Inwentash School of Social Work  
University of Toronto Faculty of Medicine  
University of Toronto, Dalla Lana School of Public Health, University of Toronto  
York University Faculty of Health, School of Nursing  
York University Faculty of Social Work  
Women's College Hospital  
Women's College Research Institute

## Funders

Women's Health in Women's Hands expresses gratitude to our funders, first and foremost, the Central Toronto Local Health Integration Network.

We are also grateful for the funding provided by AIDS Bureau, Ministry of Health and Long Term Care , Ontario Diabetes Program and Health Promotion Division, , Ontario HIV Treatment Network, , City of Toronto Urban Health Fund, Canadian Institutes of Health Research, the Public Health Agency of Canada, and the Ontario Trillium Foundation, an agency of the Government of Ontario

# WHIWH-CHC staff list

**Abas, Sherry** - Administrative Assistant  
**Barry, Asiatou** - Research Coordinator  
**Burden, Julia** - Physician  
**Caetano, Marilene** - Nurse Practitioner  
**Caro, Erika** - Dietician  
**Curling, Deone** - Therapist  
**Donaldson, Simone** - Intake Counselor  
**Flores, Rosa Maria** - Receptionist  
**Gichuki, Mercy Lilian** - Project Coordinator  
**Goodluck, Monika** - Programs & Communications Manager  
**Green-Walker, Lori-Ann** - Clinical Services Manager  
**Jara, Angela** - Receptionist  
**Jessamy, Nalya** - Physician  
**Jeyachandran, Ishara** - Financial Coordinator  
**Joseph, Marie Claud** - Registered Practical Nurse  
**Kalonga, Tchela Louise** - Clinical Secretary  
**Lala, Anu** - Therapist  
**Lewis, Cassie** - Receptionist  
**Luengo, Carolina** - Nurse  
**Malhotra, Sonia** - Physician  
**Massaquoi, Notisha** - Executive Director  
**McCalla, Vivia** - Diabetes Nurse Educator  
**McPherson, Corrine** - Administrative Coordinator  
**Morshed, Mubnii** - Research Coordinator  
**Motran, Ashley** - Dietician  
**Muchenje, Marvelous** - Community Health Educator  
**Naughton, Jacquie** - Human Resources Manager  
**Prieto, Raelene** - Therapist  
**Sarvat, Seema** - Chiropodist  
**Samayoa, Claudia** - Clinical Secretary  
**Sammy, Sumintra** - Clinical Secretary  
**Saunders, Megan** - Physician  
**Sivakumar, Eesananthini** - Receptionist  
**Tharao, Wangari** - Programs & Research Manager  
**Vahidi, Nassim** - Community Health Worker  
**Vandahl, Julie** - Nurse Practitioner  
**Vera-Espinola, Kellita** - Administrative Assistant  
**Villanueva, Fernanda** - Health Promoter

## Student Placements

**Augustin-Lesmond, Ginelle**  
**Caetano, Marilene**  
**Iqbal, Warda**  
**McMillan, Catharine**  
**Vahidi, Nassim**

# Contact Information:

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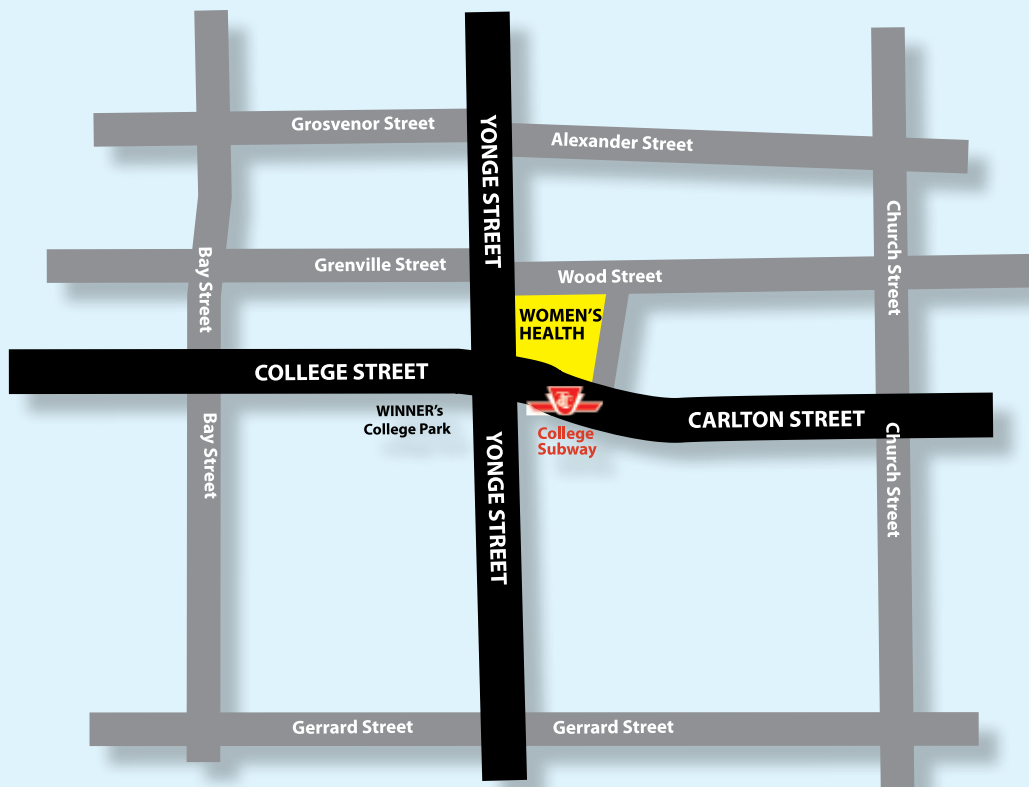
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## Hours

Mon - Thur: 9:00 am to 8:00 pm  
Fri: 9:00 am to 5:00 pm  
3rd Sat. of the Month: 10:00am to 4:00 pm

## Location Map









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