



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

# WOMEN'S HEALTH IN WOMEN'S HANDS COMMUNITY HEALTH CENTRE ANNUAL REPORT 2019



Ontario's Community  
Health Centres  
Every One Matters.





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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 prioritizing those 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 age, 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 health care for racialized women taking into account the social determinants of health.
- 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 2016-2020

## GOAL

To increase access to and provide primary healthcare for racialized women from African, Black, Caribbean, Latin American and South Asian communities in Metropolitan Toronto and surrounding municipalities.

## Dimensions of Care

**CLIENT CENTRED CARE**  
**EVIDENCE BASED PRACTICE**  
**QUALITY SERVICE DELIVERY**

## Strategic Directions

1

WHIWH will extend its role as an expert and leader in the delivery of high-quality, evidence-informed primary health care for racialized women

2

WHIWH will deepen its response to emergent priority populations, with a focus on racialized youth, seniors, refugee women and women with complex care needs/multiple co-morbidities

3

WHIWH will sharpen its focus on addressing the social determinants of health as fundamental to improving the health outcomes and health equity for racialized women

## Long Term Outcomes

- Safe healthcare and the reduction of barriers to health at WHIWH and in the health care system more broadly
- Improved health indicators/outcomes
- Improved Social Determinants of Health outcomes/indicators
- Improved access to information - on how to have good health/what good health means - for racialized women and their families
- Improved access to information - on what services are available and access to support when needed for racialized women and their families
- Smoother and more seamless transitions and navigation between health and social system and services

# MESSAGE FROM THE EXECUTIVE DIRECTOR AND BOARD CHAIR



transformation in Ontario. We remain committed to working continuously with all stakeholders including volunteers, clients, community members, funders and partners across the health and social services sector to ensure the next phase of healthcare is responsive to our communities' needs.

In the spirit of collaboration, we have been working tirelessly to ensure that WHIWH Community Health Centre remains a leader in racialized women's healthcare, research, community development and advocacy. This year we have been taking stock of the past, examining the present, and putting in place the means needed to ensure the future of our community health centre.

Our passionate and committed staff and board will continue to move towards being a high performing community health centre for our communities now and into the future. WHIWH-CHC has never been in better shape to respond to the needs of the communities we serve. Through the years, we have made great strides toward reducing barriers to accessing health. Yet, we remain devoted to the vision of addressing issues of access to healthcare for racialized women and to developing further strategies for removing the barriers embedded within the healthcare system, which in turn will foster greater health experiences and outcomes.

WHIWH-CHC is well positioned to be key contributors and ready to meet the challenges of the impending health care system

We are honored to share our Annual Report as a reflection of the incredible work the staff at WHIWH-CHC do every day that has an indelible impact on the lives of the women we serve.

We would like to express gratitude to our extraordinarily dedicated and diligent board members and staff who have worked so hard to carry out the mission, vision and focus laid out by the founders of our Centre. We also express our heartfelt thanks to outgoing Executive Director, Notisha Massaquoi for providing Women's Health in Women's Hands with staunch leadership, direction and inspiration for the past 2 decades. Notisha's years of commitment has led to the steady growth and recognition of our organization on a local, national and global scale. Notisha's transformational leadership has created a lasting legacy at WHIWH-CHC that will surely live on.

In solidarity,

Lori-Ann Green-Walker  
Executive Director

Renatta Austin  
Board Chair



# WHIWH BOARD OF DIRECTORS



**Renatta Austin**  
Chair



**Maria Stevens**  
Vice-Chair



**Rumana Chowdhury**  
Secretary



**Cherry Leung**  
Treasurer



**Victoria Morena**  
Member at Large



**Drupati Maharaj**  
Member at Large



**Nana Yanful**  
Member at Large



**Mahima Madhava**  
Member at Large



**Paula Bourne**  
Member at Large

# CLIENT CENTRED CARE

**97%**

Percentage of CHC clients who felt that WHIWH services helped improve their health and wellbeing

**88%**

Percentage of CHC clients who indicated that they are satisfied and very satisfied that WHIWH staff treat them with respect

**93%**

Percentage of CHC clients who strongly agreed and agreed that WHIWH has a positive impact on their community

**95%**

Percentage of CHC clients who indicated that always feel comfortable and welcome at WHIWH

**91%**

Percentage of CHC clients who indicated that they always and often received services in language of choice

**92%**

Percentage of CHC clients who strongly agreed and agreed that they would refer a family member or a friend to WHIWH

**89%**

Percentage of CHC clients who agreed that their health care provider always and often explains things in a way that is easy to understand

**93%**

Percentage of CHC clients who indicated that the current hours the centre is open works for them

**73%**

Percentage of CHC clients who indicated that their health care provider often and always tells them about treatment options and involves them in decisions about the best treatment option

**82%**

Percentage of CHC clients living with diabetes have received inter-professional diabetes care

**78%**

Percentage of CHC clients who are eligible & have been screened for cervical cancer

**83%**

Percentage of CHC clients who indicated that their health care provider often and always spends enough time with them during an appointment

**70%**

Percentage of CHC clients who are eligible & have been screened for breast cancer

**82%**

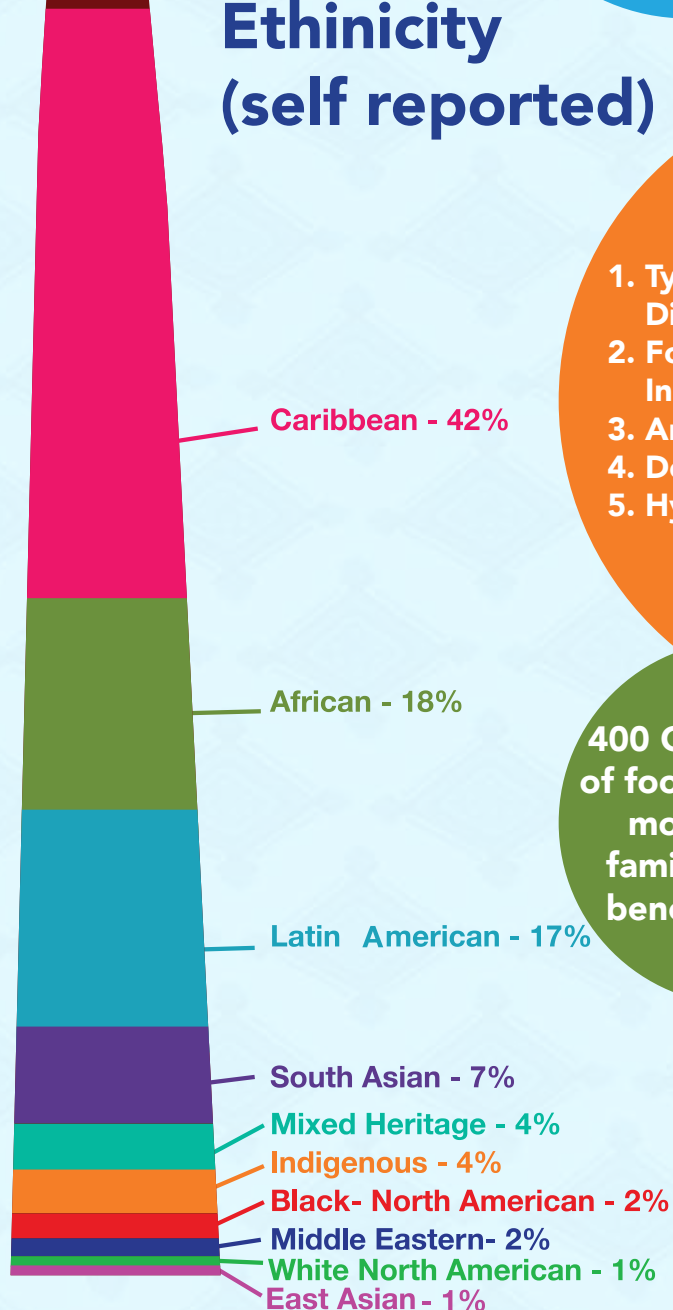
Percentage of CHC clients who indicated that they always and often found health centre staff easy to talk and encouraged questions



# EVIDENCE BASED PRACTICE



## Client Ethnicity (self reported)



**Number of Registered Clients:**  
**3741**

**Number of Client Visits (all encounter types):**  
**12,865**

## Top 10 Reasons for Visit

1. Type II Diabetes
2. Food Insecurity
3. Anxiety
4. Depression
5. Hypertension
6. Periodic Health Exam
7. Chiropody Services
8. Cervical Cancer Screening
9. Abuse
10. HIV/AIDS

**400 Clients access of food bank every month - 4650 family members benefit annually**

## Top 5 Languages

1. English
2. Spanish
3. French
4. Arabic
5. Portuguese

# QUALITY OF SERVICE DELIVERY

The Population Health Team at WHIWH is made up of highly skilled Dietitians, Therapists, Social Workers, Community Health Workers and Life Style Coaches committed to enhancing the reach into our communities to support our clients living with Mental and emotional health imbalance or the debilitating effects of Diabetes. Our supportive one-on-one work with clients through counselling and advocacy is enhanced by our Mind Body Movement Programs, Food Bank support,

Gardening Programs and initiatives, consistent outreach and a continued intention to guide and support all clients as they navigate their most traumatic and impactful moments. With continued commitment to trauma informed care, stigma reduction strategies, cultural competence, harm reduction, anti-racism and anti-oppression, all programs, services and outreach is guided by our mandate toward excellence in client care.

## Mental Health and Community Engagement

Mental Health Groups at WHIWH include support around topics such as:- fear response/ violence and trauma, grief and loss, low self-esteem, family reunification, impacts of immigration, mindfulness techniques. Programs such as our Women 2 Women Circle also allow a client led space to discuss matters that are currently impacting client's lives.

An example of an empowering support group this year was the Building Bonds Group designed to share, understand, and empower racialized women's experiences of family separation and reunification through immigration. The group critically explored feelings of guilt, expectations vs. reality, and parent-child relationships through a cultural lens. The goal is to strengthen the bonds within themselves, group members, community, as well as, rebuild their bonds between separated and/or reunified family members. There is a gap in the services provided for individuals that recognize the phenomena of family separation and reunification in racialized communities.

This space created a synergy that was immediate in having the voices of guilt, shame and anxiety heard and understood as participants found ways to feel empowered in moving forward with their loved ones and being kinder to themselves.





## WHIWH at HYPE Youth Summit:



Farah Ahmed represented our Mental Health team at the 2019 HYPE Youth Summit by the AIDS Committee of Durham. This phenomenal event brought together HIV+ youth from across Ontario to gain key health resources and connections to support their wellness. WHIWH facilitated a Trauma-Informed Care workshop for youth focused on safety, their rights as service users, and the self-advocacy. This youth-directed space also provided service providers an opportunity to listen to the experiences, perspectives and needs of POZ youth from across the province.

## 1st Annual REC-Amend Symposium:

Joelleann Forbes, one of our Mental Health Therapists, represented WHIWH in the Accessible BIPOC Mental Health Services at the University of Toronto. Systemic barriers, social determinants of health, intergenerational healing, and resiliency were some of the topics discussed at this symposium.

## Diabetes Treatment, Education and Prevention

WHIWH DEP and DPP teams respond to the wide spread, generational impact of Diabetes on clients in our priority populations. Support is multi-faceted and includes a variety of techniques to ensure that treatment includes education and prevention methods with every interaction. All new clients to WHIWH receive some form of care or prevention by our skilled clinicians; as well as, our support and outreach programs.

### Diabetes Prevention Workshops:

Diabetes Prevention workshops are offered to the clients who are at high risk of developing type 2 Diabetes or those with Pre Diabetes. These workshops focus on Healthy Eating, Physical Activity and Stress management to prevent type 2 diabetes. The participants discuss topics such as Canada's Food Guide, Physical activity Guidelines and Stress Management exercises. They are also provided healthy recipes. Participants discuss lifestyle changes to promote health and wellbeing.

### Outreach

Lots of fun was had by our outreach team this year led by one of our Dietitians Amardeep Riar, Chantal Carey our Population Health Worker and Amna Shah our Lifestyle Coach, connecting with communities and providing education on both diabetes prevention and management.

Our diabetes team also provided outreach at Afrofest, Black Mom's Connection, South Asian Women's Centre, H.A. Halbert Jr. P.S. –Early ON Child and Family Centre, St. James Town Festival, and Black Health Alliance.



WHIWH also organized an event on World Diabetes Day to raise awareness and provide information on Diabetes.



## Life Style Coach:

Clients received ongoing support on prevention of type 2 diabetes from our Lifestyle Coach. This coaching creates a supportive, one-on-one connection to clients and a space to increase their awareness while voicing daily concerns and experiences.

## Mind Body Movement

Mind Body Movement is a program that focuses on the mental and physical wellbeing of our clients. The program offers Yoga, Tai Chi, Qigong and Afro Caribbean Dance classes. This year we added Qigong and Afro Caribbean Dance class to the program. These programs are offered once a week. The program creates a sense of belonging to the community and reduces social isolation for the participants.

**Chair Yoga:** Increases flexibility and strength through gentle movements for clients with limited mobility.

**Tai Chi:** Meditation in motion, slow movements to promote balance and increase strength.

**Qigong:** New class introduced in 2019, focuses on breathing techniques and promotes balance.

**Afro Caribbean Dance:** New addition to the program also in 2019 features high intensity cardio exercise with Afro Caribbean music.







## Chakula Bora Food Bank

WHIWH places ongoing commitment and support for enhancing food security for all clients. Our foodbank in conjunction with the Daily Bread food bank has been offering great service to our clients thanks to our outstanding volunteers and students.

## Community Gardening Program

Women's Health in Women's Hands Community Health Centre (WHIWH CHC) re-ignited its community gardening program this summer with the help of our program participants and summer students. The gardening program saw the planting of an assortment of vegetables, herbs, and flowers in our raised bed gardens, for all to harvest. The aim of this group was to foster community connectedness, and to help address aspects of food insecurity, including having guest speakers on various topics relating to access to food, and healthy eating as it relates to the new Canada's Food Guide.



## PRENATAL PROGRAM

The Prenatal link is an educational, participatory and interactive group designed to support our clients during their prenatal journey. Prenatal classes are an essential part of holistic prenatal care and can help clients with the changes of pregnancy, understand prenatal visits, how to care for their newborn, prepare for labour and birth and coping with post-partum depression.

In alignment with our mandate, we strive to make the program culturally relevant, reduce barriers to access, consider the social determinants of health, and create an anti-oppressive environment where participants are supported and can share ideas, their lived experience, and build community.





# WOMEN OF RESILIENCE AWARDS GALA and DINNER

Women's Health in Women's Hands Community Health Centre held our 'Women of Resilience' Awards Gala and Dinner, honoring 6 remarkable women who exemplify the concept of resilience and strength within their communities. This was our way of recognizing women who have selflessly worked with little or no recognition to achieve justice, equality, inclusion and preservation of dignity for others at the local and global scale. 200 guests were in attendance at this seamless and beautiful event. The ability to feature board, staff and the exceptional work of WHIWH CHC to our community partners, funders and politicians was well displayed.





# INTERNATIONAL WOMEN'S DAY - #BalanceforBetter

Women's Health in Women's Hands CHC hosted Prime Minister, Justin Trudeau and Minister for Women and Gender Equality, Maryam Monsef's meeting with group of young women entrepreneurs for International Women's Day. The Ministers also toured the Centre, greeted and met with WHIWH staff.



Prime Minister, Justin Trudeau visited Women's Health in Women's Hands CHC in March of 2019. In light of the recent blackface/brownface indignity related to the Prime Minister, and although an apology has since been issued, please note that we do not condone such racist and reprehensible behaviour - which does not exemplify leadership that is guided by social justice



## MIDWIFERY CARE UPDATE



In order to increase access to an integrated and culturally appropriate maternal and newborn care for racialized women, in 2018, Women's Health in Women's Hands Community Health Centre initiated a new partnership with the Positive Pregnancy Program of St. Michael's Hospital and the East York Don Mills Midwives of Michael Garron Hospital. We are pleased to report that during the initial year of the partnership, we offered comprehensive, on-site midwifery care and support for 70 pregnant clients. Looking forward to the continued success.

## RESEARCH AND PROGRAMS

### Welcome to new members of the team:

#### **Marvelous Muchenje:**

We would like to welcome Marvelous as the new Manager, Health Promotion and Community Engagement. Marvelous is a



Social Work and a Global Health practitioner with nineteen (19) years' experience in the community-based sector. She has worked for the last 12 years at WHIWH leading our HIV program, where she

supported women living with HIV through skills development, health promotion, case management, and outreach to women and ethno-cultural communities in Toronto. She also brings to this position almost 20 years of experience in international work as a gender and human rights activist. Diagnosed with HIV in 1995, she continues to participate passionately and humorously in various initiatives in the HIV movement, women and reproductive rights, and working with marginalized communities.



### **Muluba Habanyama:**

Muluba joined the team as the Coordinator of Collective Visions, a project for young racialized women living with and affected by HIV. She also served as a community health ambassador for 4 years and has been a big fan of WHIWH for years. As a young woman who was born with HIV and has been living with the disease for 26 years, Muluba has firsthand knowledge and experience of the need for community based services for young women of colour. Muluba has taken on numerous leadership roles to enhance the well-being and quality of life of all women. She enjoys reading, photography, being an aunt and croissants.



The “Collective Visions” program is by and for young racialized women living with or affected by HIV. The project aims to facilitate linkage to care; ensure provision of mental health and wellbeing services; creation a safe environment; foster skills and leadership development; and reduce isolation through the establishment of social support networks for young racialized women living with and affected by HIV. We will utilize arts-based strategies such as photo-voice, storytelling, skills development workshops, team building and bonding activities and more. To check the program out, email the coordinator at: [muluba@whiwh.com](mailto:muluba@whiwh.com)

### **Junic Wokuri**

Junic Wokuri is a Registered Practical Nurse who recently joined the team at WHIWH as a



research nurse. Prior to coming to Canada, Junic worked as a Registered Nurse in the department of Neurosurgery in Uganda and with several human rights advocacy organizations. Junic is very passionate

about the elimination of all forms of discrimination and human rights violations. She has been involved with WHIWH previously as a community health ambassador with our ACB Women Taking Control Over HIV/ AIDS and Sexual Health project and as an interviewer for the AC Study.

She will be coordinating our new ACB Women’s Reproductive Health Study (CTN 308). This study will explore how to improve the vaginal health of African, Caribbean and



Black women. To participate please call, Junic at 416-263-4897 or via email at [ACBWomen@whiwh.com](mailto:ACBWomen@whiwh.com)

## Project updates:

### ACB Women Taking Control Over HIV/AIDS and Sexual Health

This signature project continues to deliver amazing results in its 3rd year of the 2nd phase of multi-year funding – 6 years in a row. Community Health Ambassadors (CHAs) continue to build connections by keeping a strong community presence through outreach activities, by sharing knowledge with ACB women through creative workshops, and promoting HIV testing. Connecting with over 10,000 people in the 2nd phase of the project, the CHAs continue to show that community engagement from the ground up is a necessary component and a powerful resource for African, Caribbean and Black women.



### netWORKING Mentorship Program for Young Black Women

In January 2019, WHIWH fully launched the netWORKING Mentorship Program for Young Black Women. Funded by the Together We Can Mentorship Initiative, under the Ontario Ministry for Children, Youth, and Community Services the program exists as one of the only mentorship programs for African, Caribbean, and Black (ACB) women across Ontario. Led by the netWORKING Youth Advisory Committee, the project is designed for and by ACB women, and has served as a uniquely holistic sense of support in the lives of participants. Matching over 40 Black women



with mentors, the program has worked to enrich the enormous strengths young women possess, while also aiding them with further tools in navigating and combatting the barriers they face individually and collectively. Through cultivating spaces where young Black women can center themselves and their communities, the netWORKING Tribe created monthly sessions to further nourish peer-to-peer relationships, as well as exchange knowledge and resources on health and wellness, financial literacy, post-secondary education and much more.

During Fall 2019, the project will recruit its 2020 cohort! Please contact Amma at (416)593-7655 Ext 4884 or [mentor@whiwh.com](mailto:mentor@whiwh.com) for additional information.



## **Flourish Communities Collaborating to address FGM/C**

2019 was to a tremendous year for the project “Flourish: Collaborative Approaches for Supporting Survivors of Female Genital Mutilation”. Indeed, the program has flourished beyond what we first expected; we were concerned about the participation of women who have experienced FGM/C due to the sensitivity and silence on the issue. We have seen the program expand with the involvement of women from different countries including: Sudan, Egypt, South Africa, Botswana, Ethiopia, Nigeria and Zimbabwe.

To get an in-depth understanding of how FGM has impacted our priority populations and their service providers, we conducted some knowledge gathering activities that included: health care provider survey, focus group discussions with FGM/C survivors, digital stories and consultation with internal staff members. Information gathered is being used to develop educational resources for service providers and community members. The digital story telling project proved to be a therapeutic and healing process for most of the women, of which the majority had never shared about their experience or dealt with the trauma resulting from the practice. Flourish has created a safe environment for women to discuss their experiences of FGM/C.

We reached more than 81 organizations through this project. We also attended several conferences, forums and workshops to network, promote the program, and raise awareness of the issue. We look forward to continuing our efforts to end FGM/C and providing culturally appropriate services and resources to our clients who have gone through the practice.

## **Stigma Reduction Intervention**

Through 5-year funding provided by the Public Health Agency of Canada, Women’s Health in Women’s Hands (WHIWH), Black Coalition For AIDS Prevention (Black CAP) and Africans in Partnership Against AIDS (APAA) have formed a Community Alliance with the aim of better understanding the intersectionality of stigma, culture, and HIV positive status that African, Caribbean and Black (ACB) women living with HIV experience. The objective of the project is to develop and pilot test an intervention that reduces internal stigma to better support ACB women living with HIV, using an intersectional approach. In January 2019, we held a deliberative dialogue bringing together community members, frontline



workers, researchers, service providers, and policy makers of the HIV/AIDS community to collaboratively discuss, share knowledge, and generate new ideas about potential stigma reduction interventions. The proposed intervention will be developed and piloted within Toronto, as well as adapted to be rolled out in 6 locations across Canada. For more information on the project or to get involved, contact Denese Frans, Research Coordinator at [denese@whiwh.com](mailto:denese@whiwh.com)

## **Peer-driven HIV testing Project:**

This project has steadily gained momentum, so much so that we currently have 8 certified Peer Testers (PTs) as well as 8 Community Health Ambassadors (CHAs) on their way to becoming certified. The project is utilizing the community network of certified PTs to increase access and opportunities for HIV testing for ACB women within local neighborhoods or here at the centre for those who drop-in. Using PTs enables ACB women to be offered HIV testing and tested by a peer they can identify with, who has an in-depth understanding of HIV and the multifaceted issues women grapple with around the disease and their individual risks. Due to an increase in the number of people available to provide testing, we not only support the anonymous, rapid point of care walk-in appointments offered in our clinic, but the peer testing team also provides these services at the many outreach events we participate in around the GTA, as well as several research studies ran by WHIWH CHC and partner organizations.

To enquire about HIV testing services, please contact the HIV testing coordinator Hella Fesehay: [hella@whiwh.com](mailto:hella@whiwh.com)

## **INSTI HIV Self-Test Study**

Finally, the testing option we have all been waiting for, BUT wait... It has to be approved by Health Canada first!!!! The device is being used all over the world and has helped revolutionize HIV testing by reducing reliance on service providers, but it is not approved in Canada, yet. This HIV testing study is part of a national study led by Dr. Sean Rourke, St. Michael's Hospital, to help get INSTI HIV Self-Test Device approved in Canada.

The INSTI HIV Self-Test Study, will allow participants to administer the test themselves. They will administer the finger prick to draw blood and follow instructions provided to perform the test and interpret the results by themselves. The aim of this study is to evaluate the INSTI HIV Self-Test device's performance, including performing steps to use the device and interpreting test results. For details about the study and to participate, please contact us at (416) 263-4869 or via e-mail at [selftesthivstudy@whiwh.com](mailto:selftesthivstudy@whiwh.com).

## **AC Study:**

AC Study will provide the first comprehensive picture of how HIV affects African Canadian communities in Ontario. The research aims to: a) Increase core knowledge related to HIV transmission among African Canadian communities; b) Identify key individual and societal factors that may influence people's possible exposure (or not) to HIV; c) Shed light on the extent to which the healthcare system may be helping or hindering our fight against HIV; and d) Explore the extent to which our connections to Black communities and our experience of racism and other discriminations may help to spread or stop HIV.

The team began collecting data January 2019. 544 participants have taken part in

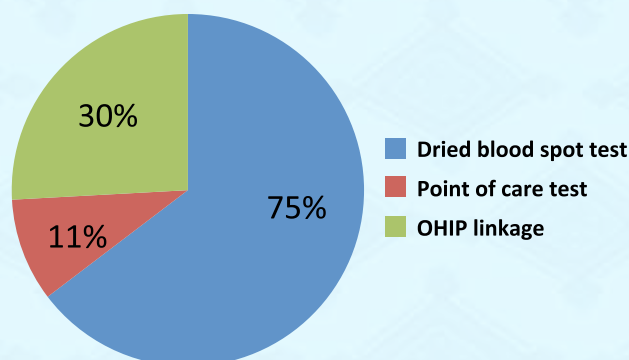


Toronto since then. We hope to complete data collection in December 2019. The results will be shared with African Canadian researchers, community members and community-based agencies that focus on improving health and wellbeing among African Canadian communities.

The AC Study has three parts, a questionnaire which is the required portion of the study (and not included in the chart below), a dried blood spot test to test for HIV and OHIP data linkage to study how access to health care plays a part in our health. We also offer point of care HIV testing so that participants have the option of knowing their HIV status on the spot. Some participants choose to do all three parts and some choose to do one or two parts.

### Participants in AC Study

How much do they participate in each part of the study?



## Health Promotion and Skills Development Program for Women Living with HIV

Women's Health in Women's Hands CHC has been delivering this program since 2003/2004. The aim of the program is to promote wellbeing of African, Caribbean and Black women living with HIV through increased access to services and capacity building activities. Working in partnership with the Black Coalition for AIDS Prevention (Black CAP) and the Africans in Partnership Against AIDS (APAA), we bring together 20-30 ACB women living with HIV once a month to

network, share information and participate in health promotion and capacity build activities. The program also has a clearly defined client care pathway to support smooth entry into care and case management to optimize utilization of Primary healthcare services available at WHIWH as well as those available in the community through a well-established referral mechanism.

Out of the approximately 4000 women served by the centre annually, 12% are women living with HIV while the rest are affected, at risk or unaware of the disease or their own status. This provides a large group of women that has continued to play a major role in our research program. We appreciate the role racialized women have played in supporting WHIWH research activities either as researchers, research partners/collaborators or as research participants. We could not have done it without you.

## From Research to Action: Knowledge Translation and Exchange Activities

### Forum on Mental Health, Substance Use and Addictions Among African, Caribbean and Black Communities Impacted by HIV

The Knowledge, Transfer and Exchange (KTE) forum under the theme "Mental Health, Substance Use and Addictions among African, Caribbean and Black (ACB) Communities Impacted by HIV" was organized by community agencies serving ACB individuals in Toronto and the Greater Toronto Area (GTA).

The event was attended by ACB people living with HIV, service-providers and researchers. The objectives of the KTE forum were to: a) Gain knowledge of the impacts of mental health issues, substance use and addictions in ACB people living with HIV in Ontario; b) Engage community members to collaboratively explore, identify and share: i) Factors that increase mental health, substance use and addiction issues in ACB people living with HIV in Ontario; ii) Explore and discuss the intersection of mental health and substance use with systemic violence, HIV, micro-aggressions and social determinants of health; iii) Identify barriers that impede access to mental health and addictions services for ACB communities in Ontario; Explore opportunities for accessing care for ACB communities with mental health and addiction issues including complementary interventions and trauma-informed care; and iv) Build collective resilience and learn skills/practices that can address identified challenges.

More than 80 participants attended the forum; people with lived experience shared their challenges in accessing mental health and harm reduction services. They also provided solutions and opportunities to address the gaps in service delivery and resource allocation to effectively meet the needs of ACB populations in Ontario. Look out for the report that will be generated from this forum.

## **“Expect the Unexpected” - Trauma Experienced by Service Providers Who Support Racialized Immigrant Women’s Mental Wellbeing**

Our project on immigrant women, activism and mental health connected mental health and wellness to community activism and examined

how to help service providers understand the positive link between mental health and wellness and social activism.

However, one of the unexpected results that emerged from the study was that service providers that had an immigrant identity themselves needed support to deal with emotional triggers they experienced while supporting clients with shared experiences of trauma. Service providers in this situation had very limited support as professionals engaged in this satisfying but often re-traumatizing work.

The knowledge, translation and exchange forum, held on January 31st, 2019, brought together approximately 25-30 service providers, researchers, policy makers and immigrant women to: a) share what we had unexpectedly found; b) explore/discuss how organizations were currently dealing with the issue; and c) develop action plans for moving forward.

The team has also developed a 3-5 minutes video to accompany the report from the project/forum. All the products developed from this project will be posted on WHIWH research website for sharing with others. We are also sharing the findings in conferences and are writing two manuscripts for publication in peer-referenced journals.



# INTERNATIONAL PROGRAMS

## NGO Delegation, UNAIDS Programme Coordinating Board (PCB)

In January 2019, WHIWH joined the NGO Delegation of the UNAIDS Programme Coordinating Board (PCB) as one of the two North American NGO representatives. Wangari Tharao, Director of Research and Programs represents WHIWH on the NGO Delegation. The PCB holds its meetings in Geneva, twice a year, in June and December. One day of the meeting is dedicated to a thematic topic of importance to the global HIV community. June meetings are usually for taking care of business and mostly focuses on governance and administrative aspects of UNAIDS.

However, the June 2019 meeting took place at a time when UNAIDS was struggling with number of issues that had brought negative global attention to UNAIDS and at this verge, the Executive Director was leaving. Of particular importance at the June meeting, were discussions on the selection of a new Executive Director and the Management Action Plan and Report of the Working Group of the Programme Coordinating Board (PCB) to strengthen the PCB's monitoring and evaluation role on zero tolerance against harassment, including sexual harassment, bullying and abuse of power at the UNAIDS Secretariat. There was firm support for the importance of maintaining a strong and independent UNAIDS, for the end of AIDS by 2030 to become a reality. The

NGO Delegation spent a lot of time on side meetings, vigorously engaging civil society, member states and cosponsors to hear, raise concerns and important perspectives, as well as manage any potential conflicts.

On the last day of the meeting, June 27th, 2019, the 44th Thematic Segment was held. The thematic focused on delivering on SDG3, strengthening and integrating comprehensive HIV responses into sustainable health systems for Universal Health Coverage (UHC). For the NGO Delegation and all others involved, the thematic offered opportunities to explore ways in which the HIV response could leverage the potential benefits of UHC, while avoiding any potential pitfalls and optimizing on the successes and lessons learnt throughout the HIV and AIDS response. Look out for the thematic report with accompanying decision points (DPs) prepared for discussion and adoption at the Dec. 2019 meeting.



## The 63rd United Nations Commission on the Status of Women (UN CSW):



In March 2019, WHIWH staff had the honour of attending the 63rd United Nations Commission on the Status of Women (UN CSW). Held at the UN Headquarters in New York City, Denese Frans (Research Coordinator), Simone Donaldson (Social Worker), Muna Aden (A/C Study Research Coordinator), Farah Ahmed (Social Worker), and Amma Gyamfowa (Young Women's Mentorship Coordinator), had the honour of participating in the meeting. They engaged in informative dialogues and events that highlighted gendered health equity advancements, activism, and globally transformative initiatives for women and children. Through attending the UN CSW, staff members participated in knowledge translation activities, and made cross-sectoral and global connections which will support our work at WHIWH. Their participation is furthering WHIWH practices to increase, innovate, and ignite healthcare for racialized women on local, national, and global levels!

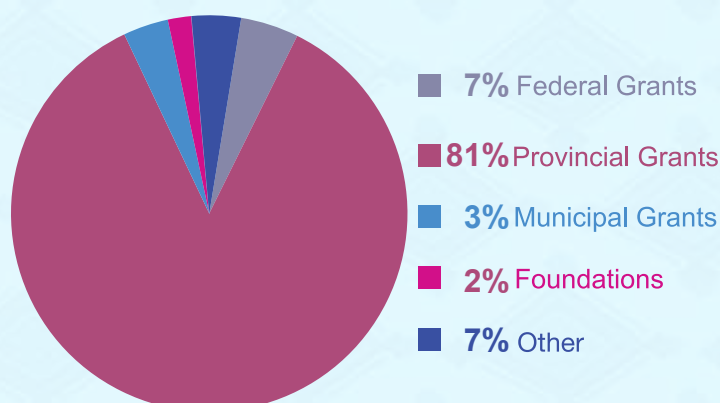


# FINANCIAL HIGHLIGHTS:

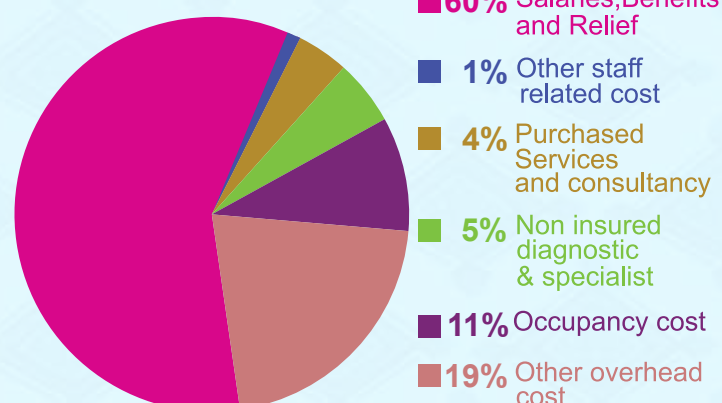
Women's Health in Women's Hands CHC -summarized statement of Revenue and Expenses for the year ended March 31st, 2019 (With comparative figures for 2018)

Expenditure	2019	2018
Salaries,Benefits and Relief	\$3,262,382.00	\$3,138,570.00
Other staff related cost	\$20,366.00	\$16,683.00
Purchased Services and consultancy	\$234,491.00	\$224,803.00
Non insured diagnostic & specialist	\$287,447.00	\$282,372.00
Occupancy cost	\$582,965.00	\$494,960.00
Other overhead cost	\$1,053,164.00	\$1,129,245.00
<b>Total Expenditure</b>	<b>\$5,440,814.00</b>	<b>\$5,286,633.00</b>
<b>Revenue</b>		
Federal Grants	\$415,206.00	\$260,157.00
Provincial Grants	\$4,880,470.00	\$4,704,537.00
Municipal Grants	\$179,674.00	\$202,684.00
Foundations	\$133,838.00	\$106,053.00
Other	\$402,855.00	\$220,659.00
<b>Total Revenue</b>	<b>\$6,012,043.00</b>	<b>\$5,494,090.00</b>
<b>Adjustments</b>		
Transfer from/to Special Project Funds	-\$220,521.00	-\$102,554.00
Due to Central Local Health Integration Network	-\$329,290.00	-\$95,421.00
Due to Ministry of Health and Long Term Care	-\$15,362.00	-\$9,482.00
Recoveries During the Year	-\$6,056.00	\$0.00
	-\$571,229.00	-\$207,457.00
<b>Total Revenue minus adjustments</b>	<b>\$5,440,814.00</b>	<b>\$5,286,633.00</b>

## REVENUE



## EXPENDITURE



# THANK YOU!

It is with deepest gratitude that WHIWH-CHC would like to thank each and every Student Intern, Community Health Ambassador, Peer Leader and Volunteer. Your countless hours of dedication and commitment to the advancement of healthcare for racialized women has been invaluable.

## Student Interns

Tega Binitie-Cassidy	Muna Alkhaifi
Samdarshi Mehta	Carolyn Lee
Debi Banerjee	Alina Zaltzman
Uzoamaka Wogar	Nancy Tran
Kezia Amoako	Nontobecko P Nkala
Christine Vu	Bukama Mutu
Rachel Seewald	Malia Omali
Alisha Gebhardt	Tofi Ajibolad

## Volunteers

Chikerenma Umechuruba	Jenny Wang
Denise Greenland	Maria Pamela Delgado
Juliana Prospere	Karla Arana
Yris Diaz Lopez	Dennis Tour
Aura Ruseria	Itunu Adekoya
Bertha Hernandez	Vasantha Krishnan

## Community Health Ambassadors

Amandah Wekwasithole	Jillisa Brown
Majorie Kabahenda	Sarah Edo
Stacy Savary	Walaa Kheir
Victoria Hylton	Allyson Opoku
Nonty Nkala	Sophia Ali
Junic Wokuri	Sinit Asfaha
Dakarayi Chigugudhlo	Busayo Oluwakemi
Dena Henry	Muluba Habanyama
Ekene Okafor	

## 2019 Health Ambassadors Diabetes Prevention Program

Deeksha Gupta	Susanne Lambert
Fouzia Amjad	Lisa Baker
Dilani Balasubramaniam	Ratna Chaudhary
Shahin Kauser	Reham Teama
Suguna Ananth	Chikerenma Umechuruba
Vivian Novoa	Sujatha Chintakunta
Sharma Mahmood	Ahreby Gnana
Shagana Logaratnam	Lahmea Nava
Itunu Adekoya	Alaa Hassan
(Nana) Gina Adae- Amoakoh	Martina Rozario
Rhonelle Bruder	Swati Mahapatra
Ayan Mohamed	Vidushi Sharma
Yenia Leon Rumbaut	Samantha Gajindranauth
Kisa Hamilton	Warda Sharmeen
Sanifa Holaki	Vanessa Pietrantonio
Zamani Ra	Melissa Perry
Carlota Bohorquez	Noori Begum
Maryan Issa	Vasantha Krishnan
	Novlette Evans



# COMMUNITY PARTNERS AND FUNDERS

## Community Partners

Access Alliance Multicultural Health and Community Services  
Access St James Town  
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  
Afrochic  
AIDS Committee of Cambridge, Kitchener, Waterloo and Area (ACCKWA)  
AIDS Committee of Ottawa  
AIDS Committee of Toronto  
AIDS Niagara  
Alliance for Healthier Communities  
Alliance for South Asian AIDS Prevention  
Anishnawbe Health Toronto  
Anne Johnston Health Station  
Asian Community AIDS Services  
Black Coalition for AIDS Prevention  
Black Creek CHC  
Black Physicians of Tomorrow (BPT)  
BrAIDS For AIDS  
Canadian Aboriginal AIDS Network  
Canadian Association of Community Health Centres  
Canadian Centre for Victims of Torture  
Canadian HIV/AIDS Legal Network  
Canadian Mental Health Association – Communities of Interest  
Canadian Positive People's Network,  
Canadian Public Health Association  
Caribbean Women's Society  
Casey House Hospice  
Centennial College School of Community and Health Studies  
Central Neighborhood House  
Centre for Addiction and Mental Health  
Centre for Research on Inner City Health,  
Centre for Spanish Speaking People  
Centre for Urban Health  
Centre Francophone de Toronto  
CIHR Canadian Clinical Trials Network  
CIHR Social Science Research Centre in HIV Prevention,  
Committee for Accessible AIDS Treatment (CAAT)  
Daily Bread Food Bank  
Davenport Perth Community Health Centre  
Delta Family Resource Centre  
Dr. Roz Healing Place  
East Don Mills Midwives of Michael Garron Hospital  
El Tawhid Juma Circle  
Ernestine's Women's Shelter  
Fife House  
Flemingdon Community Health Centre  
For Youth Initiative  
Forward in Faith International  
Fred Victor Centre  
Hamilton AIDS Network Health  
Hassle Free Clinic  
HIV & AIDS Legal Clinic Ontario (HALCO)  
Hospital for Sick Children  
Humewood House  
Institute for Clinical Evaluative Sciences  
Interagency Coalition on AIDS and Development (ICAD)  
Interim Place  
International Community of Women Living with HIV  
Jamaican Canadian Association (JCA)  
Kingsway Community Life Centre (KCLC)  
La Passerelle-I.D.É.  
LGBTQ+ Settlement Network Toronto  
Maple Leaf Clinic  
Maple Leaf Sports and Entertainment  
Margaret's  
Midaynta Community Services

McMaster University  
 Michael Garron Hospital Department of  
 Midwifery  
 Midwives Collective of Ontario  
 Mount Sinai Hospital  
 Newcomer Women's Services  
 NGO Delegation, UNAIDS Programme  
 Coordinating Board (PCB)  
 North York Women's Shelter  
 Oak Tree Clinic, BC Women's Hospital  
 Ontario Coalition of Agencies Serving  
 Immigrants  
 Ontario HIV Treatment Network  
 Ottawa Children's Hospital  
 Ottawa University  
 Parkdale Queen West Community Health  
 Centre  
 Pathways For Education  
 People to People Aid Organization (Canada)  
 Planned Parenthood Toronto  
 Positive Living Niagara (PLN)  
 Positive Pregnancy Program  
 The Redwood  
 Rexdale CHC  
 Rexdale Women's Centre  
 Robert Carr Network Fund  
 Ryerson University Faculty of Nursing  
 Ryerson University Faculty of Social Work  
 Salvation Army  
 Sherbourne Health Centre  
 Sojourn House  
 Somerset West CHC  
 South Asian Women's Centre  
 St. Andrew's Roman Catholic Church - Toronto  
 St James Town Community Corner  
 St. Joseph's Hospital  
 St. Michael's Hospital  
 St. Michael's Hospital HI-FI Lab  
 Taibu Community Health Centre  
 Teresa Group  
 The 519 Church Street Community Centre  
 The AIDS Network, Hamilton (The Network)  
 The Canadian Clinical Trials Network  
 The Redwood  
 Thorneloe University  
 Times Change, Women's Employment Service

Toronto Community Housing Corporation  
 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 Ottawa  
 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 Gender and  
 Woman Studies  
 University of Toronto Faculty of Medicine  
 University of Toronto, Dalla Lana School of  
 Public Health,  
 University of Western Ontario  
 ViiV Pharmaceutical  
 West Scarborough Community Centre  
 Women's College Hospital  
 Women's College Research Institute  
 Working Women Centre  
 World Health Organization, Department of  
 Reproductive Health and Research  
 York University Faculty of Health, School of  
 Nursing  
 York University Faculty of Social Work  
 YouthRex  
 Youth Service Network



## Funders

Women's Health in Women's Hands expresses gratitude to our funders, first and foremost, the Toronto Central Local Health Integration Network. We are also grateful for the funding provided by United Way, AIDS Bureau, Ministry of Health and Long Term Care, , Ministry of Children, Community and Social Services, Hope and Grace Foundation, Ontario Diabetes Program and Health Promotion Division, City of Toronto Employment and Social Services, City of Toronto Confronting Anti-Black Racism Initiative, Employment and Social Development Canada-Canada Summer Job Program, City of Toronto-Community Investment Program, McMaster University, Ontario HIV Treatment Network, City of Toronto Urban Health Fund, Canadian Institutes of Health Research, the Public Health Agency of Canada, University of Toronto, Women's College Hospital-Women Xchange program and the Ontario Trillium Foundation, an agency of the Government of Ontario, Centre for Addiction and Mental Health.

## WHIWH STAFF

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Deidre Reys

Denese Frans

Deone Curling

Eesananthini Sivakumar

Erika Caro

Entisar Yusuf

Esther-Wangari Tharao -20th Anniversary

Farah Ahmed

Hella-Genet Feshaye

Ishara Jeyachandran

Janice Snagg

Jeanene Richards

Jesleen Rana

Joelleann Forbes

Julie Vandahl -10th Anniversary

Junic Wokuri

Krina Desai

Kristyn Jewell

Lori-Ann Green-Walker

Lyndsay O'Brecht

Mandeep Cheema

Marie Claud Felicien

Marilene Caetano

Marvelous Muchenje

Maryam Dadgar

Megan Saunders

Muluba Habanyama

Muna Aden

Muna Alkhaifi

Natasha Lawrence

Natsuko Fukuda

Notisha Massaquoi

Raelene Prieto

Rosa Maria Flores

Sherry Abas

Simone Donaldson

Sonia Malhotra -10th Anniversary

Tchela Solomon

Trishna Bendale

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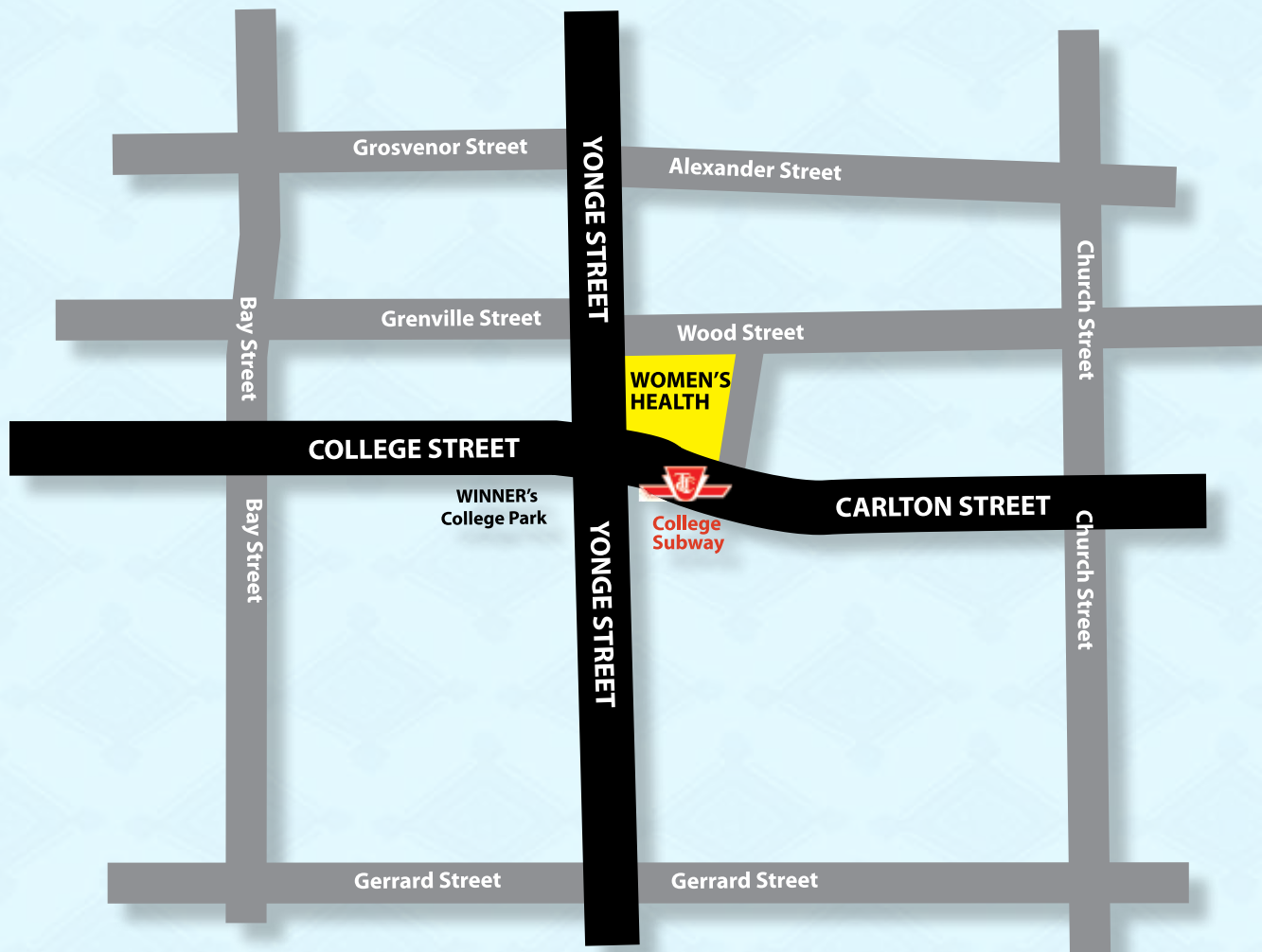
## Hours

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

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## Location Map









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