

# WHAI Progress Report Summary Document April - September 2020

## Background

The Women and HIV/AIDS Initiative (WHAI) consists of 17 community development workers embedded in HIV/AIDS serving organizations across 16 regions in Ontario. As a network, we build local capacity to respond to the needs of women living with or facing systemic risk for HIV acquisition. WHAI prioritizes work with women disproportionately impacted by HIV, including women living with HIV, African, Caribbean, and Black (ACB) women including newcomers, Indigenous women, Trans women, women who use substances, women who have experienced violence, and women who are or have been incarcerated.

During this reporting period, COVID-19 has had deep and global impacts. In Ontario, WHAI Coordinators have shown dedication to collective community care, critical thinking, and quickly adapting their work to respond to the needs of WHAI's priority populations of women. Below is a brief summary of our work from April-September 2020, which focuses on 4 collaboratively defined goal areas. The full report can be found at [whai.ca](http://whai.ca)

## Health Care Centred On Women's Needs and Lived Experiences

**94%** of Coordinators worked toward our Collective Goal of: *Communities in Ontario will provide culturally appropriate and holistic HIV prevention and health care centred on women's needs and lived experiences in H1.*

This work happened through:

- Collaborating with community partners and building awareness about HIV/STBBI risk factors, testing access, and PrEP during COVID-19 through resource and information sharing, awareness raising, webinars, and 1:1 conversations
- Supporting colleagues and community partners to maintain critical services, while maintaining connection with and learning from WHAI's priority populations of women
- Supporting the launch of the CHIWOS toolkit through knowledge dissemination to community stakeholders

## Economic Security

**71%** of Coordinators reported working with **51 community partners** toward the collective goal of: *WHAI will work with priority populations of women and community partners to help increase community support and reduce harms related to economic insecurity.*

This work happened through:

- Working collaboratively with community partners and the broader WHAI team to share information and support access to governmental financial supports
- Highlighting the specific and acute financial impact COVID-19 has had on WHAI's priority populations of women - particularly BIPOC and homeless women
- Supporting food security initiatives
- Creatively coordinating information about service access and the importance of working on anti-poverty initiatives with women

## Women and Harm Reduction

**88%** of Coordinators reported doing work with **47 community partners** toward the Network's collective goal of: *Organizations and communities will have increased capacity to work with women who use substances from a strengths-based, harm reduction, and overdose prevention perspective that honours self-determination, human rights, and choice, and integrates a trauma-informed approach.*

This work happened through:

- Supporting harm reduction teams with kit making and targeted distribution to women-serving agencies (i.e. shelters) and to outreach and satellite locations
- Working to ensure access to harm reduction and overdose prevention supplies to women impacted by isolation, poverty, structural racism, and the increasing toxicity of the drug supply
- Hosting gatherings (virtually and in person) to facilitate knowledge exchange and collaboration on the barriers to access for women who use drugs and identify areas of opportunity

# Community & Emotional Wellness

82%

of Coordinators reported working with more than **50 community partners** toward the collective goal of: Through an anti-oppressive lens, WHAI will foster the leadership of our priority populations of women and community partners to build community capacity for social connectedness, emotional wellness, and positive health outcomes.

This work happened through:

- Prioritizing flexibility in creating connection despite immense barriers to maintaining lines of communication
- Using the framework of community and emotional wellness to address the intersections between COVID-19, anti-Black racism, colonial violence, experiences of poverty and homelessness, and the current political climate in women's lives
- Centring the voices of BIPOC women
- Facilitating **30 gatherings** with women and community stakeholders
- Holding space for storytelling, advisory groups, wellness initiatives, and other mutual aid activities

# Engaging Women in the Work

42 ♀

Despite the many barriers during the pandemic, **42 women with lived experience** were engaged as leaders and partners in WHAI work across the province.

In doing this work, Coordinators highlighted:

- COVID-19 public health measures presented significant challenges to maintaining partnerships with women who had historically been more involved
- For the first time, **8 sites** reported an inability to engage any women with lived experience in their community capacity building work
- Many Coordinators reported that the shift of their work to frontline roles resulted in increased engagement with women, making a significant contribution to their community capacity building work and progress toward the CCI goals
- Across the Network, engaging women in the work, particularly BIPOC women, was identified as an important priority looking to H2

# Key Learnings

## Notable Successes

- Adaptable approaches to community development work
- Addressing intersectionality and engaging in important and necessary work on anti-Black and anti-Indigenous racism
- Utilizing frontline task shifting to inform community development
- Creating connection through virtual platforms and social media
- Fostering intra-Network Support
- Organizing gatherings

## Notable Challenges

- Community-wide service disruptions
- Difficulties maintaining contact with community partners and women
- Social isolation
- Converging impacts of COVID-19, anti-Black racism, colonialism, and poverty on women
- Challenges in balancing the personal and professional in such a stressful and heightened time

# Looking Ahead to H2

The WHAI Network displayed remarkable commitment to responding to the needs of women living with and facing systemic risks of acquiring HIV amidst converging health crises. This reporting period served as a significant learning period from which WHAI Coordinators will continue to grow.

Some key recommendations for moving forward in this work are:

- Expand access points for women in community through stakeholder coordination and partnership
- Develop strategies to expand virtual engagement for women and community stakeholders including work on increasing access to computers, phones and other technological resources and capacity building sessions to effectively use these tools for community engagement
- Focus on reconnecting with stakeholders to rebuild strong relationships that inform community development initiatives
- Connect with women from WHAI's priority populations (particularly Black and Indigenous women), centre their voices, and work alongside them as leaders in this work
- Continue to do focussed work on addressing anti-Black and anti-Indigenous racism across systems, community institutions, and within the HIV sector
- Centre openness, flexibility, and a willingness to listen and adjust during this ever-changing sociopolitical environment

Expand Access

Engage Virtually

Rebuild Relationships

Connect Women

Embrace Openness