

# WHA Network

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H1 Progress Report  
(April - September 2023)

*This report presents a summary of work carried out by the WHAI Network in communities across Ontario from April to September 2023.*

The Network remains committed to community development activities with WHAI's priority populations.<sup>1</sup> For many sites within the WHAI Network, this period was one of transition. As a result, this report will illustrate how the Network is embracing new energy, honouring long standing progress, building on province-wide collective action, responding to local priorities, and engaging in meaningful community change work across this province.

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<sup>1</sup> WHAI seeks to be informed by and amplify the experiences of those who face structural discrimination and exclusion, impacting HIV risk and the health outcomes of those living with HIV. As such, our work focuses on engagement with cis and Trans women, 2-Spirit and Non-Binary Femme people who are living with HIV, African, Caribbean and Black (ACB), Indigenous, or newcomers, who use drugs or substances, have experiences with violence and / or have been / are incarcerated. Within these communities, our work includes those who are pregnant or parenting, living with different abilities, and span from young adults to seniors. In some cases, this report will use the term 'women' to encompass these populations in our work.



## PWHAI Capacity Building, Communication, and Backbone Support

The WHAI network is comprised of 17 Coordinators who work within 16 communities across Ontario. Coordinator turnover remains high across the province, marking a period of transition for the Network. Out of the 16 WHAI communities, 14 reports were submitted during this period<sup>2</sup>, 2 of which were submitted by members of management in lieu of WHAI Coordinators.

Among the 14 Coordinators who submitted reports, over 50% had been in their roles for less than 1 year, several of whom have come on board within H1. This period of transition carried through to the PWHAI office where 1 position remains vacant. The Capacity Building Lead role with the PWHAI team is undergoing revision to best meet the changing needs of the WHAI Network.

The Provincial WHAI (PWHAI) team maintains multiple access points and communication channels to build capacity and connection among Coordinators. Support is specifically provided to onboard new Coordinators, offer learning for Coordinators, collaborative tool development, regular communication and sharing of information across the Network.”

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*“The level of support and the efficient communication is really helpful and validating in this position.”*

*“There is an overwhelming amount of material to learn and take in. maybe breaking it up into monthly or quarterly segments to focus on as an option would be supportive.”*

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Communication channels include the Network Google Hub, weekly emails, and communication from PWHAI overall. Feedback for this period indicates:

- **84%** (n=11) of WHAI sites reported that the Google Hub was quite or extremely helpful
- **100%** (n=13) of WHAI sites reported that weekly emails and overall communication from PWHAI are quite or extremely helpful

The weekly emails serve to support Coordinator capacity building and share evidence-based information and resources that they may draw on to further their work. During this period the following number of capacity building resources and updates were shared through WHAI’s weekly emails:

- HIV Education, Prevention, Care and Support: **45**
- Community Connection: **41**
- Wholistic Care: **29**
- Women Centred Harm Reduction: **24**
- Safety: **09**
- Economic Autonomy: **05**

The vast majority of Coordinators reported that they found the communication from PWHAI supportive, validating, and helpful in keeping up to date with relevant information. Feedback from some of the new Coordinators also indicate that the amount of onboarding information provided within the Google Hub can be overwhelming.

<sup>2</sup>. Please note, while 14 reports were submitted, the denominator for calculating percentages has been adjusted to reflect a more accurate picture of work across the province this period. The denominator used throughout the report is 13 rather than 14 since one submitted report did not reflect any activities for the period due to staff vacancy.

During this period PWHAI spent time reflecting on the use of inclusive gender language in our work. Coordinators overwhelmingly expressed value in this and felt that WHAI's framing was aligned and supportive of their practices.

Some suggested additional clarity on supporting Non-Binary communities; removing the word 'femme' to reflect women who may be more masculine; acknowledging Trans men in the work; and, engaging Non-Binary and 2-Spirit people in resource development processes to benefit to our collective learning over time.

Overwhelmingly, Coordinators and management at ASOs expressed immense gratitude for PWHAI's work in steering the Network forward, providing strong orientation frameworks, maintaining engaging meetings and learning opportunities, and for leading the network with care and a commitment to collectivity.

*“[WHA]I framing on gender] helps as a reminder when doing research or educating myself on topics about women that the resources I'm using may not be inclusive and to make sure I'm keeping up with research and experiences unique to Trans women, 2-Spirit, and Non-Binary femme people.”*

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### **Equity, Diversity, and Anti-Racism Anti-Oppression Capacity Building**

WHA is committed to ongoing learning that builds collective capacity to work from strong anti-racism and anti-oppression frameworks. Coordinators across the Network shared the immense positive impact of completing San'Yas training as well as the impact of the Network's Anti-Black racism work on their personal and professional lives.

*“It was an important reminder to the importance of thinking critically about how we focus our work on being inviting and welcoming to Indigenous people and ensure that we are facilitating equity.”*

*“Coming from a health care/social work lens, a discipline that has historically been perpetrators of violence, [the training] helped me reflect on how to combat stigma, hatred, and colonization in my work.”*

### **San'Yas Indigenous Cultural Safety Training**

- **69% (n=9) of Coordinators completed Level 1 of the San'Yas training**
- **Two (2) Coordinators completed Level 2, 'From Bystander to Ally' training**
- **Three (3) Coordinators attended the WHAI debrief after completing the training(s)**

Coordinators reported that these trainings fostered deep learning and reflection of how anti-Indigenous racism and colonialism impact health care, and health outcomes in Indigenous communities. Coordinators reported that the discussions embedded in the training were especially helpful in thinking critically about their own actions and assumptions, as well as working through real world examples of how anti-Indigenous racism can manifest in health and community care settings. Two (2) Coordinators reflected that while they found the training to be a good starting point, they pointed to the importance of deeper ongoing engagement with the material.

With regard to impact, Coordinators reported that they are more mindful of engaging with Indigenous leadership when working in their local communities, more reflective of their personal biases, and focused on building strong partnerships with local Indigenous organizations to support meaningful community development work.

*“One thing that stood out to me was the importance of consistently and intentionally consulting Indigenous folks in the work that I wish to do.”*

*“I am reminded that cultural differences shape how individuals view this work, and that Indigenous people have traditions, medicines and ceremonies that can support harm reduction work outside of what I am usually familiar with.”*

### Anti-Black Racism Work

Coordinators spoke highly about the impact of working with Dr. Rai Reece and Snjezana Pruginic this period, and how they have integrated learnings from these sessions into their local work. Coordinators shared how being able to critically reflect in their sessions, share their experiences, engage from a place of vulnerability and openness, and work through examples of anti-Black racism collectively, has been beneficial to their personal and professional lives. When speaking to the impact of this work on the WHAI Network more broadly, Coordinators reflected that while some challenges persist in implementing robust anti-Black racism work locally, the Network’s commitment in this area has been vital.

Impacts named include fostering greater solidarity and acknowledgement of the intersectionality of oppression, influencing workshop and content creation, and amplifying the voices of Black women in the work. Several Coordinators and leaders expressly requested that these sessions continue as a way to build on the successes reported this period.

*“One change I noticed was in the equal prioritization of BHM and LPW in the social media posts we received this past February. Although LPW is mandated in our work, it falls in BHM so a focus on the voices of Black artists and activists in the posts we received was really appreciated.”*

*“I have learned to employ reflective practices within my WHAI work and that anti-racism work is never done.”*

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*“My commitment to this field sometimes leads to a personal investment in my work. With Dr. Rai Reece’s guidance, I learned to balance professional responsibilities and personal life, serving clients while setting necessary boundaries.”*

*“It has been really incredible to work with the other White coordinators to better understand our inherent biases and how to move forward, not by forgetting or ignoring, but by accepting and growing [from the] harm that we might have caused.”*

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## Resource Distribution and Social Media

As a tool to foster engagement and build community capacity, resource development and distribution remains an integral part of WHAI work. This period, WHAI Coordinators reported distributing over **5,000** physical resources across Ontario representing a significant increase in resource distribution compared to the previous reporting period. The three most utilized physical resources were:

- *HIV Testing Guideline Bookmarks (1,458)*
- *PrEP and Women: What You Need to Know (1,319)*
- *PEP and Women: What You Need to Know (1,195)*

Among **395** physical toolkits also distributed this period, the majority comprised of the Women and Harm Reduction Toolkit (**n=235**). The popularity of the bookmarks and the PrEP and PEP pamphlets specifically speaks to the benefit of having brief, easily digestible, and engaging resources on hand in order to support relationship building and conversation starters. The bookmarks were utilized as outreach aids and valuable “ice breakers” for Coordinators when looking to build engagement and make connections with priority populations and service providers. The PrEP and PEP resources have been described by Coordinators as “exceptionally informative” and convenient to use when sharing information about HIV prevention tools.

The impact of utilizing PrEP and PEP resources in community has provided invaluable pathways to conversations that support the full spectrum of HIV prevention tools, including PIP.

*“Physical merchandise, especially fanny packs and seed hearts, have been the easiest resource to use to chat with folks. Receiving something like a gift has made people curious and excited to speak to the WHAI coordinator at events.”*

*“The PrEP brochure has been exceptionally informative and convenient for community members to access during our field activities. It has significantly streamlined our communication process, making it much easier to convey essential information even within the brief interactions that occur at our field booths.”*

*“The Collective Action Community Change report has been helpful in guiding what I focus my programming on.”*

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Sharing resources online provided a valuable pathway to more comprehensive, or larger resources this period. Coordinators reported sharing links to the provincial Collective Action Community Change report as well as their local version, International Overdose Awareness Day materials, 'Living in the Asterisk, What Does U=U Mean for Women', PrEP and PEP pamphlets, and various WHAI toolkits.

Social media continues to be an important outreach and engagement tool for the WHAI Network. **100% (n=13)** of WHAI Coordinators reported sharing at least one WHAI social media post in their local work. The most shared post was for International Overdose Awareness Day (n=9). Coordinators reported that their agencies predominately use Instagram and Facebook and that while sometimes lengthy, the pre-made posts and captions are informative, engaging, and useful in local contexts.

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*“WHAI social media posts have been very helpful in both educating the Guelph community, and also in supporting Coordinators who are often focusing on many other tasks and may not always have capacity to create individual content for these important events. As well, it allows for a united front with a strong and consistent message”*

### Priority Areas for Collaboration

While many sites were in various states of transition this period, WHAI Coordinators across the province were able to implement incredibly impactful work at every stage of work.

Coordinators shared that their local work throughout this period addressed needs identified in their local Collective Action Community Change report and contributed to province-wide areas for collaboration. This fiscal, the shared Priority Areas for Collaboration were:



**HIV Education, Prevention, Care and Support**



**Women Centred Harm Reduction**



**Economic Autonomy**



**Community Connection**



## **HIV Education, Prevention, Care, and Support (100%, n=13)**



As a central pillar of WHAI work, **100% (n=13)** of WHAI sites reported doing dedicated work in this area. For the vast majority of Coordinators focused on HIV basics, prevention, the new testing guidelines, HIV self-testing, and U=U. Work on infant feeding guidelines, HIV care, and HIV disclosure was less common this period. Across the province, Coordinators reported integrating work on HIV basics and HIV prevention into workshops with community partners, tabling events, and relationship building activities. Coordinators discussed how doing this with WHAI's priority populations, service providers, and community members has been beneficial in opening doors to further work. Coordinators reported utilizing CATIE, OHTN, and WHAI-developed resources to inform their effort and ensure a strong evidence-based framework for their activities.

In addition to this central area, WHAI Coordinators implemented focused work on the following Provincial Areas for Collaboration:

*“For women at risk for HIV, the emphasis has been on raising awareness about prevention technologies beyond condoms such as PEP and PrEP. We have been raising awareness of HIV education through different settings including workshops, outreach activities and distribution of resource materials.”*

*“We organised an education and HIV/HCV testing event for ACB community members at a salon and the participation was amazing!”*

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## **Community Connection (100%, n=13)**

Community connection remains vital work for WHAI across the province. Coordinators spoke clearly and definitively on the demonstrated positive impact of fostering strong community connections between women living with HIV, women facing systemic risks for acquiring HIV, and allied service providers.

Province wide, this work looked like supporting social gatherings, building partnerships with drop-ins and other service providers, arts-based gatherings, and local events.

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*“This work has primary been carried out through hosting social gatherings for people living with HIV, we have also hosted specific events for mothers living with HIV to increase community connection.”*

*“Community connection through arts projects is a grounding way to foster communication and sharing.”*



### **Economic Autonomy (62%, n=8)**

Many Coordinators expressed challenges in uplifting work focussed on economic autonomy due to extremely tight organizational budgets and overwhelming community need. For many, practical supports including hygiene items, transportation support, and food as a way to support women’s participation in community development activities was an effective and meaningful strategy.

In addition to these supports, Coordinators reported working on anti-poverty networks, supporting financial literacy workshops, and integrating paid engagement opportunities for WHAI’s priority populations wherever possible.

*“At one of our gatherings a member presented on credit card applications for newcomers, boosting credit scores, and maximizing financial benefits like cash back.”*



*“The working group is currently creating a Living Library, a platform for people with lived or living experience with mental health and addictions to share their stories of the impact of poverty.”*

### **Women Centred Harm Reduction (92%, n=12)**



This period, Coordinators reported the success of working in partnership with harm reduction programs and other services providers to expand the reach and efficacy of their work. Coordinators partnered with drop-ins, outreach teams, and partnered with organizations supporting Black and Indigenous women who use drugs in order to address the intersecting factors that impact the lives of women who use drugs in their communities. They did this through gatherings, workshops, advisories, and coalition building work. Many Coordinators also supported collective efforts at their agencies for International Overdose Awareness Day. here was a widespread acknowledgement that supporting work in this area was an organizational and community-wide priority. ork initiated this period will continue to be developed over the next period.

*“The Fair focused on Black women and Harm reduction- Black Women’s Wellness Fair. The event was called a Wellness fair and not a harm reduction event to make it more appealing to the community. The participants were mostly newcomer women from the shelters. They learned about harm reduction in the Canadian context and harm reduction programs and services that are available to support their wellness.”*



*“Working with service providers and providing workshops, presentations, and resources about how to make harm reduction more accessible and safer for women. Discussing women’s social determinants of health and why harm reduction is crucial, as well as other services that should be connected to harm reduction.”*



## Safety (54%, n=7)



While not an identified Priority Area for Collaboration this period, Coordinators acknowledged that work on safety is often integrated into other priority areas.

During this period, Coordinators supported work on safety including coalition and network participation, supporting events like Take Back the Night, gender-based violence initiatives, and integrating important conversations about race, gender, class, and HIV prevention into broader work on women's safety in their communities.

## Wholistic Care (77%, n=10)



Building wholistic care frameworks and practices into community development was a significant focus of WHAI work this period. Coordinators were able to work in partnership both internally and externally to their organizations to build a more integrated and community-focused care response.

Coordinators held events that allowed women to come as they are, participate in systems-level work to integrate HIV care into broader services, foster spaces for service providers to connect with each other at a human level, and support wellness efforts focused on Black and Indigenous women. Given the identified community need, Coordinators will continue to build on Wholistic Care as a Provincial Area for Collaboration next year.

*“Wholistic Care was a priority in our Mother’s Day Care Corner. By sitting together sharing food, creating shared wisdom, and turning it into a collaborative art project, the women in attendance had opportunity to pause and rest, to create, and to be nourished in body and soul, as well as in community.”*

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*“During this reporting period I participated in the Take Back the Night Planning committee to help organize a meaningful event for the community.”*

*“In partnership with the Canadian Women of Colour Leadership Network (CWCLN), a virtual panel discussing Black trans inclusion was held at the end of June to celebrate Pride Month. Conversations on safety specific to this population were had.”*

*“Wholistic Care also took the form of day wellness retreats for ACB \*women frontline workers, in partnership with Soul Space. These retreats were meant to be an opportunity for ACB \*women frontline workers to have a day away with their peers in nature, while also connecting workers both personally and professionally with each other. The focus was on collective care rather than self-care.”*

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\* Note the asterisk placed beside the word women by some Coordinators indicates the inclusive language WHAI adopts where the term ‘women’ encompasses a spectrum of gender identity. Please see the note on the first page of this report for more.

## Working Collaboratively with Partners

Working in partnership is integral to WHAI work, as evidenced throughout this report. **69% (n=9)** of Coordinators reported being able to work collaboratively with partners this period – 4 Coordinators reported only being “somewhat” able to do so. When successful, partnerships were crucial factors in reaching WHAI’s priority populations, sharing resources and strategies, event planning, identifying local service gaps, and more. As a result of the widespread transition in Coordinator positions, many sites reported that partnerships are new or needing to be re-developed as part of future work.

In addition, Coordinators discussed the challenges inherent to partnership building when the capacity and resources of partners is already stretched thin. The need for the further development of skills and tools to support partnership development has consistently been identified by Coordinators. In response, PWHAI is working on the development of a shared resource to support this critical work.

“From co-hosting events and tabling to providing workshops, I have been partnering with organizations to spread awareness about HIV related information, harm reduction and how women are impacted.”

“Working with other community organizations has resulted in well attended events and reaching communities and populations that might not have been as accessible in the past.”

Within WHAI, 4 Coordinators reported being able to participate in cross-Network collaboration, 4 reported somewhat being able to do so, and 5 were not able to participate in this type of partnership at all. When possible, Coordinators reported that being able to partner with other WHAI sites was beneficial to their work, was an invaluable source of information and skills, and an affirming space to share success and challenges with peers.

Supporting cross-Network collaboration and partnership will continue to be a focus of PWHAI efforts, particularly in periods of transition.

“I have been able to participate in WHAI working groups such as the TRC working group and attend WHAI meetings. I find the information updates with the small group discussions during the meetings helpful. The small group discussions provide space to reflect on the new information and brainstorm ideas on how the information can be used in my work.”

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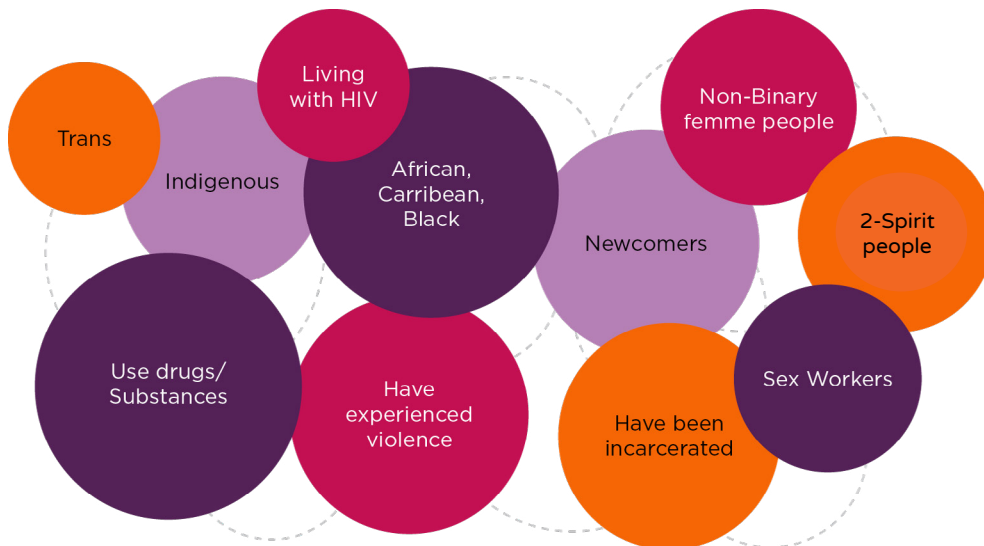
## Engaging Women in the Work

**158** women from WHAI's priority populations were actively involved in carrying out WHAI work this period. Coordinators consulted with their communities through advisory committees, peer groups, visits to drop ins and support programs, 1:1 discussions, coalition tables, and event planning groups.

Coordinators reported that engaging women as partners in program planning and delivery, workshop facilitation, and outreach was incredibly impactful and effective in broadening the reach of the work, increasing the relevance of the work to community, and fostering connections between WHAI's priority populations.

It was also reported that when opportunities to contribute to planning and operations are offered, people were more likely to participate. Challenges with obtaining funds for honoraria, maintaining communication with priority groups, and rebuilding relationships through staff turn-over remain Network-wide concerns.

### WHAIs Priority Populations

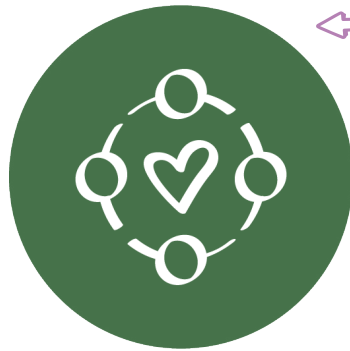


*"I have observed that those in the community respond better to and are more likely to participate when they're interacting with folks with lived experience. I think input/engagement from those in priority populations has allowed us to share resources and knowledge with more people than we may have otherwise."*

*"I have received positive feedback from women living with HIV, folks saying that they are happy to be involved in the planning process of events, and consulted about educational materials. Many have expressed that they enjoy having conversations and being part of the community that WHAI creates."*

## Gatherings

**92%** (n=12) of WHAI Coordinators hosted **80 gatherings** aligned with the Priority Areas of Collaboration this period.



**67** were **in person**  
**11** were **virtual**  
**2** were **hybrid events**



**2,111** attended **across Ontario**  
**60%** (n=1,275) were from **WHAI's priority populations**  
**26%** (n=539) were **service providers**

The majority of gatherings this period were aligned with work on Community Connection, HIV Education, Prevention, Care, and Support, and Wholistic Care. Gatherings on Women Centred Harm Reduction, Safety, and Economic Autonomy were less frequent this period; however, these topics were often integrated into other events.

These gatherings were focussed on bringing women and service providers together to build connections, increase awareness, practice well-being, and build collective capacity. Events such as arts-based workshops, advisory groups, community awareness events, educational and information sharing workshops, discussion groups, and social gatherings are all examples of how WHAI Coordinators were able to bring stakeholders together in order in a good way this period.

Working in partnerships remained integral to this work, allowing WHAI Coordinators to share tasks and resources, collaboratively develop content, and reach participants from WHAI's priority populations more effectively.



## Looking to the Future

This next period will see WHAI Coordinators deepen their relationships with community members and work collectively towards our goals to reduce HIV risk and build capacity to address local and provincial HIV related needs. Local Collective Action, Community Change reports should continue to inform this work as it contributes to province-wide impact within the Priority Areas for Collaboration.

Coordinators also identified several trends that emerged this period that may inform future work including an increase in refugees and asylum seekers from WHAI's priority populations requiring community support, increased demand for supports pertaining to economic autonomy, and capacity pressures both within the ASO sector and more broadly. In addition to these identified trends, Coordinators reported that continuing to support the urgent work being done by harm reduction partners will remain a focus of their work next period.

Maintaining strong partnerships and furthering skills in community development and capacity building frameworks will be especially important in WHAI's work across Ontario. Coordinators also had several recommendations for training and capacity building needs that can be explored by PWHAI next period. These included building skills on integrating trauma informed care into a community development approach, partnership development and maintenance, cross-cultural communication, conflict resolution, workshop facilitation, and grant writing to support broader work were identified as areas for development.

In addition, Coordinators requested more topic-specific information on settlement and immigration, financial literacy/tools and social assistance, women-centred harm reduction, and ongoing updates regarding HIV science.

Despite the level of transition experienced across the Network this period, WHAI collaboratively made incredible impacts across the province.

The commitment of Coordinators to build relationships, challenge themselves to grow, centre the needs of our priority populations, and collectively work toward progress is invaluable as WHAI continues its provincial change work in future.

