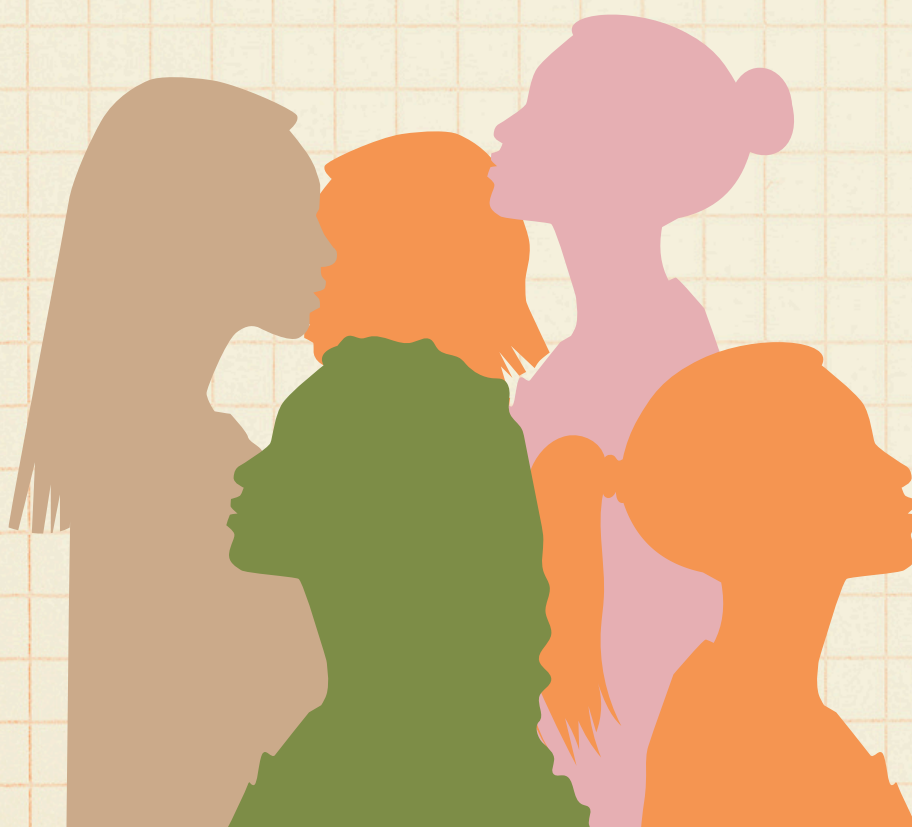


WHA I NETWORK

**H2 PROGRESS REPORT
OCTOBER 2023-MARCH 2024**



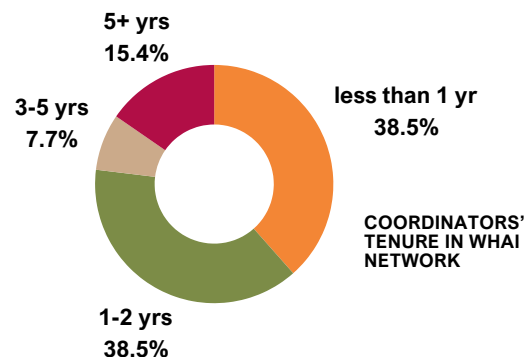
INTRODUCTION

This Progress Report outlines WHAI's community development and capacity building work undertaken from October 2023 to March 2024. This progress report summarizes support provided to Coordinators by the provincial WHAI (PWHAI) team, WHAI intra- and inter-Network collaborations, the distribution of WHAI resources and social media engagement. As well, this report outlines WHAI's equity, diversity and inclusion work, engagement of **women** with lived/living experience, and outlines WHAI's six (6) Areas for Collaboration which refine and inform how Coordinators carry out their work in their local communities. This report is informed by the five (5) conditions of Collective Impact, which include a common agenda (informed by WHAI's Areas for Collaboration), shared measurement, mutually reinforcing activities, continuous communication and backbone support (highlighted by the supportive role of the PWHAI team). With a focus on reducing new HIV diagnoses, enhancing local community capacity to address HIV/AIDS and creating welcoming spaces for **women**, WHAI invites community organizations to contact their local WHAI worker to explore opportunities to connect and collaborate.

Please note that throughout this report, the term '**women**' is written in colour to remind us of the importance of prioritizing and centring communities who face disproportionate structural risk factors related to HIV, as well as being a reminder that gender is not binary, and the importance of thoughtfulness towards inclusivity for Trans, Two-Spirit, and Non-Binary people in WHAI work. Identities are capitalized throughout, except "cis." This is to remind us of the privilege and space afforded cis people, and to support the amplification of identities outside gender-binary constructions. For more information about WHAI's priority populations, see the Collective Action Community Change (CACC) report on our website.

PWHAI - CAPACITY BUILDING, COMMUNICATION, AND BACKBONE SUPPORT

WHAI consists of seventeen (17) Coordinators located at sixteen (16) AIDS-service Organizations (ASOs) across Ontario. For this reporting period, WHAI received thirteen (13) out of the expected sixteen (16) progress reports: one (1) of these thirteen (13) reports were submitted by a manager, while the remaining three (3) were not submitted due to vacancies in the WHAI Coordinator role at three (3) ASOs. Over the past several years, the network has seen a great deal of Coordinator turnover, but this reporting period demonstrated a level of stability, with **38.5%** of Coordinators in their role for more than a year, and **38.5%** in their role for two (2) years.



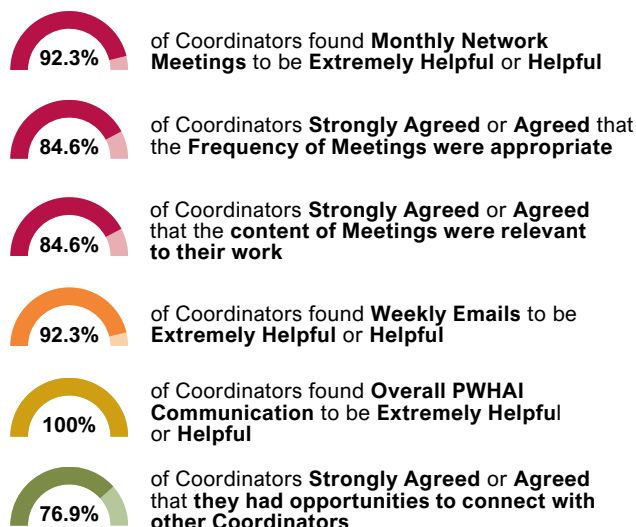
In response to the level of turn over noted above, the provincial WHAI team has worked to provide support to Coordinators as they onboard and progress in their work, which is rooted in our guiding documents, including the Collective Action Community Change report and the provincial Action Plan to 2030.

The PWHAI team also evolved this period with the addition of the new Evaluation and Knowledge Translation Lead position, as well as the forthcoming Resource Development and Social Media Coordinator position. These new roles were developed through a consultation process with the Initiative and are structured to strengthen provincial and local WHAI work.

The PWHAI team supports Coordinators in several ways. Coordinators have access to WHAI's Google Hub, which contains evidence-based and community created resources available for capacity building in their communities, and work shared by other Coordinators to encourage cross-provincial collaboration and resource sharing.

The PWHAI team also facilitates monthly Coordinator meetings, which provide a space for Coordinators to connect with each other. These meetings also serve as an opportunity for capacity building and knowledge translation and exchange, with occasional guest speakers and presentations about emergent evidence and practices.

When asked about PWHAI supports, feedback from Coordinators was positive:



"Our monthly meetings have become an invaluable platform for collective learning and collaboration. These gatherings not only provide us with a space to share our ideas and experiences but also help us strengthen our bonds as a team. The sense of sisterhood and allyship that these meetings foster is truly remarkable and contributes to a positive and productive work environment."

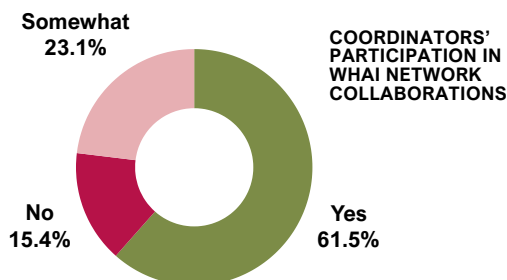
During this period, Coordinators highlighted that, at times, WHAI work can overlap with their local ASO work. An important consideration for the provincial team, as well as for Managers and Executive Directors, will be to strike a balance between Coordinator responsibilities to their ASO and to WHAI.

WHAI NETWORK COLLABORATIONS

WHAI provides opportunities for intra-WHAI collaboration for Coordinators to work together on provincially-focused work. In this reporting period, nearly **62%** (n=8) Coordinators reported participating in a intra-WHAI collaboration.

Examples of these intra-WHAI collaborations included planning for the 16 Days of Activism Against Gender-based Violence in November, Love Positive **Women**, Black History Month, and the Strawberry Ceremony in February, as well as the Truth and Reconciliation Commission and Reclaiming Power and Place Calls to Action / Justice working group.

Coordinators actively supported the development of the themes for these campaigns which included a focus on Trans **women** and **women** engaged in sex work for 16 Days as well as a focus on the Soft Girl Era for Love Positive **Women** and Black History Month. Coordinators also informed the colour schemes, aesthetics, and direction of these social media campaigns. Many Coordinators have asked for more opportunities for WHAI Network collaborations, and PWHAI will do their best to support.



*"It has been helpful to connect and collaborate with other WHAI workers across territories because it creates a community of practice. It also creates opportunities for **women** accessing services to share with other **women** across regions which breaks down feelings of isolation (i.e., Love Positive **Women** card exchange)."*

"I have participated so far in the TRC Resource/MMIWG work group, the GBV 16-days campaign work group and the Anti-Black Racism Work Group across WHAI. It has been valuable for me to connect with other WHAI workers across the region, develop skills in campaign support/resource development, and participate in provincial knowledge sharing. I have also found it overall helpful to connect with other WHAI workers in this capacity as I feel more connected to the overall team and focus of WHAI."

WORKING COLLABORATIVELY WITH PARTNERS

Community partnerships are an integral piece of WHAI work, and in this reporting period, **77%** (n=10) of Coordinators reported working with partners to operationalize their work. Some examples of partnership work included sharing resources related to **women** and HIV, providing HIV 101s tailored to priority populations, sitting on networks and coalitions, and collaboratively planning community events. Collaboration with partners was particularly fruitful for Black History Month, as Coordinators worked with student centres at local universities/colleges, community health centres, and local BIPOC collectives and grassroots groups to facilitate meaningful engagement across providers and with **women**.

*"I have had the opportunity with the REACH Clinic to explore accessibility issues to PEP and PrEP for **women** who use drugs and who sex work. The clinic is looking to identify gaps in health access and for ways to improve their service delivery. They have joined the network of service providers who work with sex workers and will be part of planned community consultations to improve access to supports."*

At the same time, **23%** (n=3) of Coordinators reported challenges initiating contact with key agencies with whom they wished to partner. Full workloads and staff turnovers impacted by rising costs of living and stagnant salaries in the social service sector have affected the sustainability of meaningful, long-term partnerships. After several cohorts of Coordinators requested support in partnership building, PWHAI developed the *Growing Partnerships of Mutual Care* resource which was released January 2024. **77%** (n=10) of Coordinators reported using this new resource in this reporting period, with **77%** (n=10) of Coordinators finding it **Very Helpful** to **Somewhat Helpful** in supporting their partnership work.

"I often use WHAI's Growing Partnerships of Mutual Care toolkit to help identify areas needing new partnerships and to develop strategies for capability building. My community partners and I prioritize building sustainable partnerships, aiming to minimize the impact of personnel changes on the continuity and implementation of our collaboration."

RESOURCE DISTRIBUTION

Resource distribution is a major component of WHAI's work to raise awareness and build community capacity to work with **women** living with HIV and those who face structural risks related to HIV acquisition. In this reporting period, WHAI Coordinators distributed **3,413** paper resources across the province. The most popular resources distributed were:

1. *HIV New Testing Guidelines Bookmarks* (**1,648** copies)
2. *PrEP and **Women**: What You Need to Know* (**690** copies)
3. *PEP and **Women**: What You Need to Know* (**637** copies)

Many Coordinators noted that the small size of these resources made distribution at gatherings and outreach easier and therefore requested more resources of this size. Electronic versions of WHAI resources were also shared by Coordinators to extend reach to community members and partner organizations who prefer electronic versions and/or may not be able to obtain paper copies.

Both the CACC report, as well as local reports, were noted by many Coordinators as important tools in guiding and shaping their local community work:

"Our local collective action report and identified next steps are integral components of the Provincial HIV Action Plan to 2023. By aligning our efforts with the broader plan, we ensure that our local initiatives are contributing to the overarching goals [...] we aim to address key priorities outlined in the action plan, such as increasing access to HIV testing and treatment, reducing stigma and discrimination, and enhancing prevention efforts."

Coordinators highlighted that local reports were also an important tool in forging new partnerships with local community organizations:

"I have been sharing the report with organizations that work with priority populations and scheduling following up meetings to discuss opportunities for collaboration to address issues highlighted by community in the report. This has been useful in strengthening existing relationships and building relationships with new partners. One working group looking at supports for sex workers is planning to do consultations with community building on the feedback in the local report."

PWHA! also mailed resources to Coordinators to distribute for 16 Days of Activism Against Gender-based Violence, as well as Love Positive **Women**, Black History Month and the Strawberry Ceremony gatherings in the month of February, which included tote bags, fanny packs, bookmarks, lighters, lip balms, seed hearts, stickers, condoms and lube. These items are tools which aid Coordinators in igniting conversations and supporting community capacity building related to sexual health, HIV testing, harm reduction and wellness. Coordinators distributed over **2,000** of these items to mark these occasions and build awareness within their communities. It is important to note that this resource mailout was connected to one-time funding.

These resources were well-received by **women** and community partners and were impactful in relationship building work.

Particularly, the lighters and lip-balm were popular in harm reduction drop-ins and raised awareness about gender-inclusive harm reduction practices and programming, as well as wholistic care-focused gatherings

*"Members love the LPW lighters. I think those are most popular with peers. The bookmarks I love because they are easy to distribute at literary events and universities. The LPW condom packs are discrete, which supports ACB **women**, newcomers, and queer youth at "classroom closet". I also used the LPW bags and fanny packs for ACB community and health center staff so that the messages can be circulated in public spaces where they can combat stigma."*

SOCIAL MEDIA

PWHA! creates social media posts as tools to support Coordinators and ASOs in their online engagement with community partners for awareness raising and capacity building. **85%** of Coordinators (n=11) said these social media posts were **Very Useful** or **Useful**. In terms of sharing, **100%** of Coordinators (n=13) have shared WHA! posts on their ASO's social media accounts, primarily Instagram and Facebook. The most shared posts were

1. 16 Days of Activism & Indigenous AIDS Awareness Week posts (**100%**/ n=13)
2. Love Positive **Women** and Black History Month posts (**92%**/ n=12)
3. International **Women's** Day (**77%**/ n=10)

Staff vacancies and varying policies surrounding staff access to ASO's social media accounts impacted how many WHA! social media posts were shared.

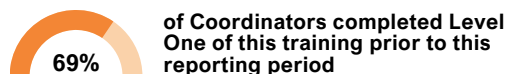


EQUITY, DIVERSITY, ANTI-RACISM CAPACITY BUILDING

WHA! is committed to ongoing learning that builds collective capacity to work from strong anti-racism and anti-oppression frameworks. Intentional and ongoing efforts of anti-racist work is essential to rupturing systems of white supremacy that continue to underscore the disproportionate impacts of HIV within ACB and Indigenous communities. Much like H1 reports, Coordinators across the Network shared the positive impacts of completing the San'yas ICS training as well as the impact of the Network's Anti-Black racism work on their personal and professional lives.

SAN'YAS INDIGENOUS CULTURAL SAFETY TRAINING

All WHAI Coordinators are required to complete San'yas Indigenous Cultural Training courses throughout their time in the Network. Coordinators appreciated the utilization of case studies in these trainings that helped them to recognize instances of anti-Indigenous racism in the workplace.



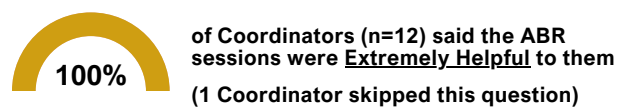
Most Coordinators also appreciated the opportunity for group discussions included in this training. As well, the reflection questions posed in the forums of the training provided Coordinators space to work through their thoughts, apply their learnings and commit to advocacy.

“The training provided concrete examples of situations you may find yourself in relating to anti-Indigenous rhetoric and ways that you can navigate them. Provided many reflection opportunities to think about what you would do in these situations and realize areas where you are lacking as an ally, and forces you to understand levels of privilege you may benefit from even if you don't view yourself as a privileged person.”

WHA! is currently working alongside Coordinators and artist Stephanie Babij to develop a resource for capacity building on the Truth and Reconciliation Commission's Calls to Action and the Reclaiming Power and Place report on the inquiry into missing and murdered Indigenous **women** and girls Calls to Justice. This summer, Coordinators will be piloting this resource in their respective ASOs, and PWHAI looks forward to reviewing the feedback shared by Coordinators and their colleagues.

ANTI-BLACK RACISM SESSIONS

For the past four (4) years, WHAI has been committed to providing spaces and training for Coordinators to learn more about addressing the impacts of anti-Black racism in their communities and workplaces and working to rupture systems of white supremacy. In this reporting period, Coordinators undertook required monthly sessions with Dr. Rai Reece and Snjezana Pruginic, who facilitated space for them to reflect on, support each other, and strategize about ways to apply these learnings to their community, workplaces, and lives. Coordinators shared examples of personal and professional changes they had undergone because of these sessions.



“My work also advocates for ACB (African, Caribbean, and Black) women, recognizing the systemic racism they face in healthcare access and services during our gatherings with ACB women. I listen to their frustrations and collaboratively work on solutions. By amplifying their voices, addressing their unique challenges, and advocating for equitable healthcare services, I strive to empower ACB women to access the care and support they need.”

Despite the great impacts that Coordinators have shared regarding these sessions, many have expressed experiencing roadblocks to implementing these learnings into their ASOs and communities. Further support for Managers/EDs was noted in relation to their willingness and ability to foster an environment that is receptive to the initiatives that rupture systems of anti-Black racism in the workplace.

“Challenging policies and practices of community networks that exclude voices of Black communities is often met with resistance. All of the committees I sit on have discussed the lack of representation of diverse voices but refuse to change how they operate as a group. The focus is on “recruiting” new members rather than creating inclusive spaces that support diversity.”

Coordinators shared suggestions on topics and direction for future Anti-Black Racism Sessions. Suggestions included using more case studies and real-life examples, more conversations on unconscious bias, more focus on intersectional Black identities, such as being a Black Trans **woman** (transmisogynoir), and being Black and disabled (ableism), as well as opportunities to share this work with other Black-led organizations and build partnerships. Conversations on the intersections of anti-Black and anti-Asian racism was noted, with particular attention to how both forms of oppression, coupled with misogyny, impact Black and Asian **women** in distinctly different ways.

There was a request to use multiple sources rather than one book on which to build sessions. As well, some Coordinators suggested having joint sessions for white and racialized Coordinators, mirroring the joint session that occurred during WHAI's in-person Forum in October 2023.

In May 2024, WHAI collaborated to create an *Anti-Black Racism facilitation guide* informed by these sessions to support Coordinators, other ASO staff and community partners, in their work to rupture and dismantle systems of white supremacy. We look forward to Coordinators' feedback on this resource in the next reporting period.

PRIORITY AREAS FOR COLLABORATION

WHAI's Priority Areas for Collaboration support Coordinators in refining their community capacity building and outreach work in their communities. Coordinators' local reports were instrumental in informing the incredible work done in their local communities, especially for new Coordinators.



This fiscal year, the prioritized Areas for Collaboration were HIV Education, Prevention, Care and Support, **Women**-Centred Harm Reduction, Community Connection, and Economic Autonomy

HIV EDUCATION, PREVENTION, CARE AND SUPPORT (100%/ N=13) 100%

HIV Education, Prevention, Care and Support is the foundation of WHAI's work, undertaken by all Coordinators in this reporting period. WHAI work is informed by evidence-based practices, which in turn, informs and guides the capacity building and awareness raising work done by Coordinators. Coordinators extensively utilized the following resources:

1. Community AIDS Treatment Information Exchange (CATIE) (100%/ n=13)
2. **Women** and HIV in Ontario: An Introductory Toolkit (85%/ n=11)
3. Ontario HIV Treatment Network (OHTN)/ Ontario HIV Epidemiology and Surveillance Initiative (OHESI) (77%/ n=10)

Interventions related to HIV self-testing was a focus of Coordinators in H2, which was supported by the HIV testing guidelines bookmark resource. Outreach and tabling at several sites and community spaces provided Coordinators opportunities to reach **women** who they may not encounter through their ASOs. Coordinators noted strategically tailoring these sessions to address specific audience, i.e. **women** in community or service providers.

Coordinators noted a more expansive approach to HIV prevention and testing by including conversations on menopause and its impact on HIV+ **women**. As many more **women** access testing services remotely, there were requests for a walk-through of the PrEP Clinic to better inform **women** in their communities on what to expect when using this service.

*"One of the most salient impacts is that we had more ACB newcomer **women** asking for HIV testing kits and booking consultations to learn more about sexual health."*

"Through inclusive efforts, we've heightened awareness around HIV's challenges among key groups, notably newcomers. Distributing 250 HIV self-test kits over 3 informational sessions to newcomer hotels and shelters has empowered individuals to manage their health proactively."

In March 2024, WHAI updated the *Living in the Asterisk (*)* resource which sheds light on how **women** are impacted by U=U. PWHAI looks forward to how this resource will support Coordinators' HIV capacity building work in the new reporting period.

COMMUNITY CONNECTION (100%/ N=13) 100%

Community Connection underscores the importance of creating spaces for **women** to gather, share their lived experiences, and share resources amongst each other. By building community between **women** and service providers, Coordinators reported significant impact on wellbeing and engagement in health and social services. Coordinators accomplished this through hosting and partnering on a variety of events, including arts-based events, monthly **women's** socials, as well as organizing advisory groups.

*"I hosted an art and card-making night themed after Love Positive **Women** for **women** who are living with HIV. At the event, **women** shared life skill tips and shared their experiences with immigration, transcultural, and racial identity."*

*"Participants have helped to plan the menu for the **Women's** Cooking Club. The cooking club is for **women** living with HIV and most of the participants are asylum seekers from Africa, many being housed in hotels or transitional housing. The opportunity to cook together and share a meal fosters connections between the **women** and provides access to culturally appropriate food that they otherwise do not have access to."*

WOMEN-CENTERED HARM REDUCTION (92%/ N=12) 92%

In this reporting period, most Coordinators engaged in a variety of harm reduction initiatives, many of which were gender-inclusive and centred on the needs of **women** who use drugs. Some Coordinators have also been actively collaborating with harm reduction staff at their respective ASOs as a means to better inform their gender-inclusive harm reduction practices. Coordinators recognized the intersectionality of **women** who use drugs and tailored programming, presentations, and connection opportunities to these populations, including **women** engaged in sex work, ACB **women** who use drugs, and Indigenous **women**.

Some of this work included supporting harm reduction programs and **women's** programs to distribute harm reduction kits, working with partners to host focus groups, and working with partners on social and game nights for **women** who use drugs to introduce and integrate gender-inclusive harm reduction practices at their sites.

*"Attending the drop-in for Sex Workers to connect **women** who use drugs with information and supplies for harm reduction and safer sex and access to HIV self-test kits."*

*"We organized a sex and harm reduction night for **women** and femme people who use substances. The game night helped educating people about safe sex, STBBI prevention and safe injection through fun games. We also gave out sex toys, safe sex kits and harm reduction supplies as prizes for all participants."*

SAFETY 62%/ N=8) 62%

Coordinators reported that often, a focus on Safety initiatives was integrated under other Priority Areas for Collaboration, the most common being Economic Autonomy given the strong links between safety and access to finances. The 16 Days of Activism Against Gender-based Violence offered time for Coordinators to focus on the connections between HIV risk and gender-based violence in their work. Some were able to collaborate with **women** with lived experience to facilitate these conversations. Many Coordinators were able to form partnerships with staff in the gender-based violence/violence against **women** sector to support their initiatives, which included monthly peer support groups, supporting **women** accessing safe housing, participating in committees aimed at increasing safety for WHAI's priority populations, delivering presentations on gender-based violence and intimate partner violence, led by **women** with lived experience.

*"I was able to share information about gender-based violence and partner violence with students at Laurentian university. In the harm reduction focus group, we also discussed how to improve **women's** safety in accessing harm reduction supplies."*

*"We have developed networks with shelters and supports that can help **women** access safe housing if needed. We have developed a safe space for **women** to access harm services [...] Moreover, we have connected these organizations with Black led and serving spaces, so they can better support their clients of ACB identity."*

WHOLISTIC CARE (92% / N=12)

92%

Coordinators focused on building community capacity for Wholistic Care in numerous ways within their local communities with many being informed by non-Western healing models/approaches. The "Soft Girl Era" theme (a movement developed by Black **women**) chosen for Love Positive **Women** and Black History Month connected directly to WHAI's understanding of Wholistic Care. Many Coordinators addressed Wholistic Care by focusing on advocacy in referral processes to ensure appropriate services and care, reducing barriers to access for **women**, participating in committees and strategic planning aimed at integrating wholistic approaches, and working with Indigenous, Black and newcomer-serving agencies to increase pathways to appropriate supports.

More specifically, Coordinators reported on facilitating work connecting **women** to supports beyond basic/practical needs, fostering wrap-around supports, providing culturally inclusive supports for Indigenous **women**, hosting culturally specific wellness events, especially for Black **women**, supporting arts-based activities/crafts to support mental and emotional wellness, and offering complementary therapies sessions (ex. 1 on 1 energy healing, reiki, yoga, etc.). These complementary therapy offerings and mental health supports were offered by local care providers.

*"Activities like vision boarding, weaving, and creating art with water and tree themes, provided a nurturing environment where **women** could explore expressing themselves softly and powerfully, prioritizing their health."*

"Developed a comprehensive document of local and provincial resources that includes harm reduction, HIV prevention and care, legal support, supports for mothers, etc. to share with agencies."

ECONOMIC AUTONOMY (92%/ N=12)

92%

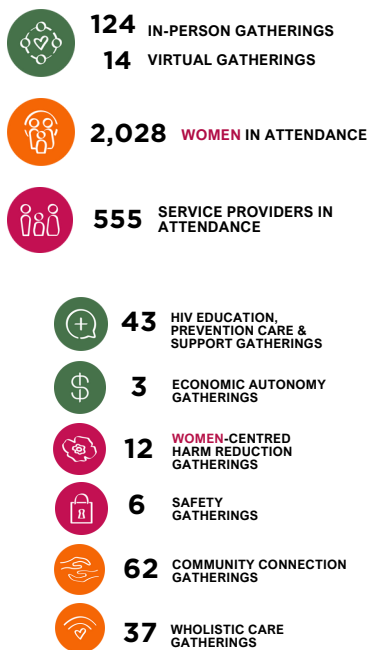
Rising costs of living across the province has severely impacted the Economic Autonomy of WHAI's priority populations. To address this community need, Coordinators supported **women** in a myriad of ways, which included creating stronger and streamlined referral pathways for **women**, especially newcomers, and supporting partners in educational workshops related to financial, employment and educational supports. In addition to these forms of Economic Autonomy, Coordinators also advocated for WHAI's priority populations through participating in networks and roundtables discussing poverty in their communities, supporting **women** in their communities by paying them honouraria to lead in-house programming and socials, as well as their participation in peer advisory groups. Some Coordinators discussed the challenges inherent in working to support **women** and respond to community needs pertaining to Economic Autonomy given the immense scale of need and systemic forces that contribute to poverty and financial insecurity across the province. As an area for future work, supporting a broader systems approach to this work may be beneficial to fostering sustainable impact for **women**.

"We have heard from peer leaders that gift cards to Walmart have been helpful in supporting the needs of mothers in our program. As well, we aim to facilitate referrals and community connects to employment services and subsidized programming when needs are identified."

*"We have been able to source clothing and hygiene products for **women** that include: soap, tampons, underwear, socks and other essentials. This supports financial pressures of having to purchase these items themselves."*

GATHERINGS

Community Gatherings include events that WHAI Coordinators organize or co-organize where participants are brought together to build community capacity/engage in community development related to WHAI work. Community gatherings can include forums, workshops, town halls, informal groups and awareness raising events. In this reporting period, **100%** (n=13) of Coordinators hosted gatherings, totaling one hundred and thirty-eight (**138**) gatherings across Ontario.



Coordinators utilized their local CACC reports to inform their planning of gatherings in this period. There was a focus on capacity building for service providers, including HIV education such as sharing information on HIV self-testing and updated guidelines as well as the utilization of WHAI's **Women and Harm Reduction** toolkit in gatherings.

Coordinators also spearheaded new collectives and initiatives with service providers as a means to share information and resources more efficiently. Some examples include the Red Care Collective, a project led by Coordinators from the AIDS Committee of Toronto that aims to enhance the capacity of HIV service providers through up-to-date resource sharing and meeting, to better support people living with HIV in the City of Toronto.

As well, the Community Care Cupboard, a project led by the Coordinator in Peterborough, aims to provide staff from partnering organization and **women** with updated HIV information, along with access to basic care needs. These gatherings contributed to providing opportunities to inform service providers about the need for gender-inclusive HIV care for **women** they serve.

The majority of gatherings centred on HIV Education, Prevention, Care and Support and Community Connection, followed by Wholistic Care, **Women**-Centred Harm Reduction, Safety and Economic Autonomy.

Gatherings focused on 16 Days of Activism Against Gender-Based Violence, Love Positive **Women**, Black History Month and International **Women's** Day at their respective ASOs. These were larger in attendance and were organized with community partners. They supported collaboration between community organizations and local ASOs, as well as supporting service pathways between community organizations.

A number of Coordinators also attended and participated in tabling at larger community gatherings. Although not a core component of community development work, tabling with WHAI resources provided Coordinators some of the few opportunities to connect with other service providers in-person to network, share WHAI resources, and build sustainable, ongoing partnerships.

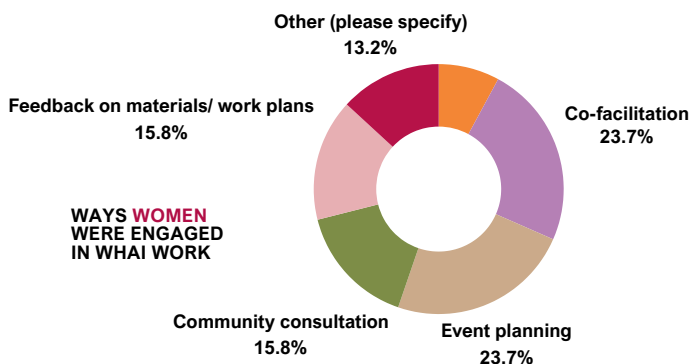
"One main success from my partnership work with the KT6 Crew and Peterborough Drug Strategy has been the creation of our Community Care Cupboard Project. Through consultation with these organizations, we have collaborated to design and rollout the Care Cupboard project."

"As well, over this reporting period we engaged in many educational events and were able to share knowledge on HIV Basics, Sexual Health, HIV Self-Testing, HIV Prevention and Self-care/Mental Wellbeing with our priority populations. This impact has increased important community partnerships and also facilitated further interaction between the community and our agency. We also received feedback that folks were appreciative of the knowledge learned and hope to organize further workshops with us."

“Service providers from AIDS Service Organizations (ASOs) and other community partners identified communication gaps concerning available programs and services for people living with HIV in Toronto. This dialogue spurred the inception of the Red Care Collective (RCC). Our steering committee, formed in October 2023, included representatives from Blue Door Clinic, the SI9, The Centre of Spanish-Speaking People, and staff and peers from Casey House. Through regular bi-weekly meetings, we meticulously developed RCC’s online resources, establishing protocols and uploading materials to a dedicated drive. Following completion, we facilitated a launch event at the SI9, inviting ASO service providers, Toronto Public Health nurses, and healthcare professionals.”

ENGAGING WOMEN IN WHAI WORK

Two-hundred and forty (240) **women** from WHAI’s priority populations supported Coordinators across the province in their local WHAI work. **Women** were involved in consultations, advisory committees, facilitation, and volunteering for community offerings and in-house ASO programming. Involving **women** in WHAI’s work provides a platform for **women** to exercise leadership, ensure that WHAI work is grounded and informed by their wisdom and living experiences as **women**, provide educational and teaching opportunities, as well as build community with other **women** across Ontario. Their involvement also ensures that WHAI continues to be informed by the core values of GIPA/MEPA.



As an integral part of WHAI work, Coordinators shared some positive outcomes from engaging **women** this period:

“Involving one or two clients to co-host events can help diminish the unspoken power disparity between service providers and users. Participants often engage more actively with peer facilitators during Q&A sessions and group activities.”

*“By actively involving WHAI’s priority populations in conducting this work, we not only amplified their voices but also strengthened their connections and social support networks, fostering resilience and empowerment among **women** living with HIV.”*

“During HIV awareness week, PLWH spoke and shared at several events. The impact of sharing stories, of naming ones who have died, of sharing memories, was much more profound than hearing a politician speak about HIV. Community was brought together in shared emotion and rallied in support of one another.”

LOOKING FORWARD

As we move into the 2024-2025 fiscal year, WHAI hopes to cultivate more opportunities for Coordinators to share their local work and collaborate on network-wide initiatives. When asked about future 16 Days of Activism, Love Positive **Women**, Black History Month and the Strawberry Ceremony gatherings, most Coordinators have already begun the process of planning activities for upcoming initiatives. PWHAI will do their best to integrate these ideas into future planning, working alongside Coordinators.

Coordinators also shared examples of capacity buildings sessions that would support their skills and work moving forward.

Amongst newer Coordinators, more support for internal processes such as progress report writing were noted as well as skills and strategies to foster engaged and thoughtful facilitation and presentations were requested. In addition, Coordinators requested KTE related to building strong engagement among **women** through models such as community advisories. These KTEs would be particularly useful in strengthening engagement with **women** who use drugs, **women** who sex work and **women** experiencing gender-based violence.

In their reports, Coordinators also highlighted emergent trends in their reports. Overall, there is a need for the application of an intersectional lens to structural responses to issues impacting **women** from WHAI's priority populations, such as the need for inclusive and decolonial mental health services, homelessness supports, the need for greater gender-inclusive harm reduction supports, and support for racialized newcomers.

Rising costs of living have limited opportunities for **women** living with HIV to actively engage with programming at ASOs. Coordinators have reported that communication with, and participation of, some **women** has decreased this reporting period. Increased need for mental health support was noted, particularly for those experiencing challenges securing employment.

Recent rolling back of overdose prevention, harm reduction and safe supply funding, coupled with the criminalization of drug use and drug users, particularly those that are Black, Indigenous and have a history of incarceration, has led to a decrease in the creation of resources previously accessed by **women** who use drugs. Coordinators noted a significant need for support for **women** who use drugs and those who are precariously housed in their local communities. Educating service providers in other sectors, such as housing and settlement, on the importance of gender-inclusive harm reduction care can be capacity building work that Coordinators prioritize for the new reporting period.

Several WHAI sites in Central and Southern Ontario noted a larger number of ACB newcomers in need of practical and mental health supports at their ASOs. This growing need has resulted in higher waitlists for support at ASOs and community partners. Many ACB newcomer **women** have reported experiencing barriers to health services and emergency rooms due to not having OHIP. This emergent trend also reinforces the need for more cohesive partnerships between Priority Population Networks (PPNs), particularly WHAI and the African Caribbean Council on HIV/AIDS in Ontario (ACCHO), therefore PWHAI will explore opportunities for collaboration, such as a drawing on resources and encourage more local collaboration at ASOs with both WHAI and ACCHO workers.

WHAI work is rooted in the principles of community development that seeks strategies to prevent new HIV diagnoses amongst **women**, as well as build safer, supportive, and welcoming environments for **women**, alongside the essential collaborations with community partners. For the next reporting period, a development to watch for is the continuation of the partnerships built in H2. While the Network experienced a period of transition at both local and provincial levels, Coordinators demonstrated ongoing commitment to their local community work.