



Mission

The Committee for Accessible AIDS Treatment (CAAT) is a coalition of affected individuals and organizations from the legal, health, settlement, social service, and HIV/AIDS sectors committed to promoting the health and wellbeing of people living with HIV (PHAs) who are facing access barriers related to their precarious status in Canada.

Brief History

Formed in 1999 to improve treatment and service access for marginalized PHAs, CAAT has been at the forefront of education, research, service coordination, and advocacy on issues related to HIV, immigration and access. In 2001, CAAT undertook a groundbreaking collaborative community based action research project: Improving treatment access for PHAs who are immigrants, refugees, and non-status. The study documented the challenges faced by vulnerable PHA groups and engaged stakeholders from various sectors to develop a joint action plan to address these barriers. As a result of the study, several innovative initiatives were developed that continue to this day.

Vision

Our vision is a healthy urban community in which all individuals living with HIV/AIDS have the information and tools they need to access health, social and legal services that are welcoming, inclusive, and respectful regardless of their immigration status.

Values and Guiding Principles

The highest value is put on the voices and leadership of PHAs in our work, and the view that health is a holistic and inclusive of the physical, emotional, sexual, and spiritual aspects of life.

Equity and Social Justice

We value human rights based approach that respects individual rights for access to treatment and health care including access to sexual and reproductive health services regardless of HIV and immigration status, diversity and demonstrate respect for the voices of all stakeholders. We are committed to social justice for all. CAAT works from an anti-oppression, anti-racism, anti-homophobia/transphobia and anti-sexism framework aimed at reducing discrimination, stigma and prejudice based on culture, ethnicity, religion, age, ability, sexual orientation and above all. HIV status.

Community Ownership / Responsiveness

We place great value on community and evidence-based advocacy and solutions as a means to effect systemic and policy change. At CAAT, we also emphasize community ownership, transparency, accountability, and meaningful collaboration with the communities we serve.

CAAT's key program areas include:

- 1. Empowerment Education and Outreach
- 2. Community Development and Capacity Building
- 3. Service Coordination
- 4. Research & Evidence-Based Advocacy







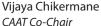


CAAT is celebrating our fifteenth anniversary!

In January 1999, the seeds of CAAT were sowed when a group of service providers gathered at Casey House Hospice in Toronto to strategize about a concerted effort to support and improve treatment access for immigrant, refugee and non-status PHAs (IRN-PHAs). Despite the wintery weather outside, the atmosphere inside was warmed by passionate discussions and a deep commitment to immediate action. Just a few months later, CAAT was officially born and, with funding from the OHTN, promptly embarked on a community-based action research study to document and respond to the plight of IRN-PHAs. What follows are fifteen years of building equitable partnerships and fostering collective empowerment aimed at improving IRN-PHAs' access to health care, HIV medications, community support, legal services and more.

Included in this special edition of the annual report, you will find a timeline that documents many of CAATs' milestones and achievements to-date. We are proud to say that over the last fifteen years, CAAT has established itself as a leader in addressing the complex issues facing IRN-PHAs in Canada and beyond and has served as an inspiration to many. From relatively humble beginnings of service providers scrambling to provide care for IRN-PHAs, CAAT has evolved into a thriving coalition of service organizations and affected communities with an Ontario-wide mandate to build our collective capacity to meet IRN-PHAs' changing needs. We take special







Y.Y. Brandon Chen CAAT Co-Chair

pride in the fact that, as CAAT continues to grow, it has remained a staunch supporter and example of GIPA and MIPA principles in practice. Today, IRN-PHAs constitute the majority of CAAT's staff and steering committee members!

Building on this rich history of community engagement, ownership, mutual respect and accountability, in 2013/2014, CAAT had another successful year of responding to the needs of our diverse communities. Most notably, CAAT launched the Ethnoracial Treatment Support Network (ETSN) training for positive youths aged 18 to 30. Our inaugural class consisted of twelve youths with diverse lived experiences, who all expressed overwhelming interests in more capacity-building and giving back to communities. As a result of this success, we have scheduled a Level 2 training for this group in 2015.

Another significant highlight for CAAT this year was the introduction of the PHA Employment Preparedness Workshop in partnership with ABRPO, Black-CAP and PWA. This four-day training was aimed to support and build the capacity of PHAs





Maureen Owino Director

transitioning into employment. The array of topics covered by the workshop included assessing career direction, life planning and setting life goals, understanding and navigating income and medical benefits, writing resumes/cover

letters, and improving interview skills.

In addition to these new and exciting initiatives, we are happy to inform you that CAAT was chosen as one of this year's inductees to the Ontario AIDS Network Honour Roll. In particular, CAAT was presented with the prestigious Social Justice in HIV/AIDS Award.

At the international level, CAAT was selected as a model "effective HIV and social protection programme" by the Joint United Nations Programme on HIV/AIDS (UNAIDS). We were invited to share our work at the 34th meeting of the UNAIDS Programme Coordinating Board in Geneva, Switzerland this July, which was attended by over one-hundred UN member delegates. At this meeting, CAAT joined others to call for continued strengthening and promotion of GIPA/MIPA principles and active participation of PHAs in defining priorities and implementing programs.

As we celebrate our accomplishments so far, we want to pay special tribute to all IRN-PHAs who have been involved with CAAT in various capacities over the last fifteen years. Without your boundless love, none of

this would have been possible. You are truly the engine that drives the work we do. Your passion, lived experiences, knowledge and skills are invaluable: whereas your stories and struggles inspire us to do more, your triumphs and traumas inform us of what to do differently. We are honoured that you trust us enough to share your experiences and insights with us, and in return, we are ever more committed to drawing on them as both a guide for our work and a motivation to work harder.

We also would like to take this opportunity to express our appreciation for the selfless and unwavering support of our partners, including our trustee organizations, community partner agencies, volunteers and funders. Without you, none of our successes would have been possible.

Equally, to the steering committee and staff members past and present, we owe you a debt of gratitude for your enthusiasm, dedication and wisdom. To you all, thank you!

As we look to the future, we recognize the work that is still needed to realize our vision of a healthy urban community in which all PHAs regardless of immigration statuses have the support they need. Working together, we are hopeful that our collective efforts can one day bring a more inclusive and just society where IRN-PHAs can be full participants in pursuing and maximizing their goals and dreams.

Y.Y. Brandon Chen, Co-Chair Vijaya Chikermane, Co-Chair Maureen Owino. Director



Message from the Premier





Premier of Ontario - Première ministre de l'Ontario



December 4, 2014

A PERSONAL MESSAGE FROM THE PREMIER

On behalf of the Government of Ontario, I am delighted to extend warm greetings to everyone at the annual general meeting of the Committee for Accessible AIDS Treatment (CAAT). It is my pleasure to join you in celebrating 15 years of collective empowerment.

AIDS is one of the most destructive global pandemics in history. It has claimed millions of lives — men and women. It has also claimed the lives of hundreds of thousands of children. While we have made great strides in understanding this disease, much more needs to be done. In Ontario and around the world, many still do not know how to protect themselves, while those living with HIV continue to experience discrimination and stigma.

I was pleased to hear that CAAT is using this occasion as an opportunity to explore strategies on supporting HIV-positive people who face barriers in accessing treatment. I want to commend the leaders, staff and volunteers of CAAT for their commitment to working with our government to help service providers better deliver the care and support needed by newcomers living with HIV.

I offer my best wishes for a productive meeting and much success in your future initiatives.

Kathlea luyne Kathleen Wynne

Premier







"CAAT is an organization that practices GIPA/MIPA in its fullest.

Over the years, I have seen immigrant, refugee, and non-status people living with HIV come to CAAT in despair and powerless situations and left feeling energized, and not only have they gained knowledge and skills to themselves, but they have moved to empowered others through mentorship. This, to me, is true leadership in MIPA, and CAAT has been that all the way."

Lena Soje, ETSN Mentor

"CAAT and the ETSN have always been an inspiration showing how grass roots community development can make a huge difference in the lives of PHAs."

Tim McCaskell. AAN

"I remember a small team of astoundingly committed, energetic and hardworking people gathering the evidence to support what we all knew – that there were significant treatment access difficulties for positive newcomers; and then knocked on every door to appeal to funders, pharma partners and policy makers to rectify this unconscionable situation. Then came the treatment information training program for positive peers. Since those early days many other individuals have helped CAAT grow, often the same individuals that CAAT supported and helped to empower! What a valuable gift this is to our communities!"

Laurie Edmiston, CATIE

"As a racialized immigrant and a person living with HIV, I was slow to accept my HIV diagnosis. Since finding CAAT four years ago, I have found a new community and become an empowered peer where positive and transformative changes are taking place on a daily basis."

Christian Hui

"When I first heard about the work of CAAT in 2000, I remember feeling really touched and relieved to hear that PHAs who did not have health coverage and access to medication would be supported to get treatment. Over the years, CAAT's programs have grown leaps and bounds and continues to be, not only transformative but life saving for many who have participated in skills building trainings and mentorship programs."

Chris Leonard





"Friends are quiet angels
who lift us to our feet when our
wings have trouble remembering how to
fly." CAAT has been a friend in times of need,
meeting other people living with HIV and learning
from each other has encouraged me to soldier on
in the fight against all prejudice, racism and multiple
oppressions Academically and professionally,
I have learnt a lot from various mentors....They
provide me with all the support in a safe and
non-judgmental environment."

Marvelous Muchenje-Marisa

"The HIV Medication Access Program at PWA was the result of the first CAAT project which was a 2001 community based research project on improving the access to PHA's who are immigrants, refugees and non-status. I am happy to have been hired to coordinate this very important and successful program and work with the CAAT staff to ensure that our entire clients receive the best and most seamless services possible."

Llewellyn Goddard, Toronto PWA

"The development of the treatment access program for non-insured PHAs has been one of CAATs greatest contribution to the HIV movement."

Wangari Tharao, WHIWH

"CAAT is a unique program in Canada and maintains a calibre of excellence through it work to serve immigrants, refugees and nonstatus PHAs."

Devan Nambiar. Rainbow Health Ontario

"Working especially with
those facing discrimination because
of their race or immigration status, CAAT
lovingly welcomes these most marginalized
communities of PHAs to come in and become
advocates, first, for themselves, and then for others.
CAAT is the agency I look to for hope and inspiration
in my own work and proof to others that solidarity
and self-empowerment works."

Laurel Sprague,

Global Network of People Living with HIV, North America (GNP+NA)

"CAAT has been a leader in raising awareness about the challenges that people with HIV who are immigrants, refugees or without status in Canada face... CAAT has exhibited an unwavering commitment to the empowerment and leadership of people living with HIV ... to make change in their own lives and in the broader systems that support their health and well-being. Congratulations to all past and present members of CAAT for 15 years of building, organizing, collaborating, and empowering towards meaningful individual, social and systemic progress."

Frank McGee, AIDS Bureau; Ontario's Ministry of Health and Long Term Care



"Through CAAT's Legacy
and ETSN programs, I found a
mentor who empowered me not to give up.
I thought I was too old to return to school but
she supported me. She was there when I needed any
help. I am happy to inform you that last night, I went
for my graduation in PSW. CAAT has made a difference
in my life and I will use this education to make a
difference in other people's lives. Being positive, I
know I am not alone, I have people at CAAT who
have helped me much. Today, I know I can do
anything, and I am proud of that."

"Dear friends, your
work is just amazing! When I
was there in Canada, feeling alone
and without answers I meet your
fantastic and amazing team, and then start
to learn and share a lot of knowledge. Your
support what's for me just the difference
between feel sad and later feel love and
happiness to be alive!"

Gabriel Gutiérrez García, ETSN graduate, from Mexico City

Kantan, ETSN graduate

"Participating in the CHAMP sessions has helped me become more aware of and learn about HIV and the stigma it carries in the society and how to deal with it"

Imam Abdul Hai Patel

"It is a place of solace, solidarity, acceptance, and empowerment. It is a place where newcomers feel heard, seen, validated. I am so proud to be part of the CAAT family"

Eva Sin, Toronto Public Health

"One of the first emails, when I joined as the PHA Support Coordinator at Alliance for South Asian AIDS Prevention in 2004 was from ETSN. The training laid the strongest foundation of my work.... in helping to the best of my ability to serve South Asian population living with HIV. This amazing group of mentors and community members still remain closest to my heart and made me feel "I belong"

Rounak Faizi Khan (Ronny)

"...CAAThasrevolutionized how we understand and practice community-based research in three fundamental ways: developing and championing knowledge production as an inclusive, equitable, and empowering process; ensuring that the primary stakeholders are engaged and invested in the process; and promoting leadership among those primary stakeholders..."

Winston Husbands, ACT

"Through its pioneering research on HIV stigma to practical capacity building, CAAT has been a leader within the AIDS service and broader social service sector. Many of our residents and staff have not only benefited from CAATs services but also have practically applied their learnings."

Keith Hambly, *Fife House*



"I feel honoured to be part of CAAT. CAAT has encouraged, empowered and mentored me throughout the years and has led me to other job opportunities."

Marisol Desbiens

"When everyone turned their backs on me, CAAT willingly, without judgment, accepted and embraced me with open arms. Because of CAAT's support, I am able to dream again..."

Raj Jagwani

"Newcomers to Canada living with HIV need a voice and someone in their corner. CAAT's research and advocacy are key in meeting that need."

Richard Elliott, Canadian HIV Legal Network

"CAAT and ABRPO... travel collaboratively on 2 rails- one that speaks of a shared set of values of responding to the whole person in their context, and the other speaks to a practice that incorporates the importance of respectful, meaningful partnerships. I love working WITH CAAT, I experience the partnership as generative and co-creative and mutually supportive. A gift."

CAAT Report 2014.indd 8

Yvette Perrault. ABRPO

"As an HIV specialist physician, I repeatedly saw first-hand the complex structural challenges faced by refugees, immigrants & non-status persons in the country I call home. I was so happy to see that a grassroots organization like CAAT had taken on those challenges with a positive outlook and with such fierce determination, and have been proud to work with CAAT in my own small way."

Darrell Tan

"Peel HIV/AIDS Network appreciates the support CAAT has provided in extending the Legacy Project into the Region of Peel. Not only has the Legacy Project reduced PHA isolation within our community but it has also built new friendships and stronger communities."

Philip Banks, PHAN

"CAAT is one of the few organizations that truly lives up to its values of inclusion and community engagement and is a vibrant community of leaders who are truly committed to each other. It's an organization that I will always be committed to."

Shannon Ryan, Black CAP

8

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For complete quotes & more voices from our communities, see CAAT website: www.hivimmigration.ca.





1999-2000

- CHCs in Toronto identified growing number of non-status PHAs facing treatment barriers
- Service providers & CHC executives met at Casey House to strategize about how to respond to service gaps
- CAAT was established

- CAAT conducted survey among HIV doctors & ASOs to identify extent of IRN-PHAs' treatment barriers
- CAAT received OHTN grant to conduct CBPAR to improve IRN-PHAs' treatment access



2003

- CAAT compiled its first list of community resources for IRN-PHAs
- First ETSN peer treatment counsellor training held
- CAAT received funding for HIV Medication Access Project & members endorsed housing the project at PWA

- CAAT organized HIV & Immigration Forum at Toronto City Hall
- CAAT issued research report, "Intersecting Sexuality, Gender, Race & Citizenship: Mental Health Issues Faced by IRN-PHAs"
- CAAT debuted at the IAC with poster presentation in Bangkok, Thailand





2001

- CAAT issued groundbreaking report,
 "Improving Access to Legal Services & Health-Care for IRN-PHAs"
- CAAT joined coalition against mandatory HIV testing in immigration medical exams
- CAAT organized "Immigration & HIV Skills Development Forum" & received funding to develop further resources for working with IRN-PHAs

2002

- CAAT launched "HIV/AIDS & Immigration Service Advocate Training Manual"
- ACAS, APAA, ASAAP, Black-CAP, CSSP, ABRPO & CATIE collaborated to develop peer-based HIV treatment counselling program, later known as ETSN



2005

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 CAAT conduct policy research: Status, Access & Health Disparities, review of relevant policies affecting IRN-PHAs

- CAAT organized Think Tank on HIV and immigration policies, programs and research
- CAAT organized think tank on policies, programs & research issues facing IRN-PHAs
- CAAT organized community forum to address needs from PHAs attending IAC



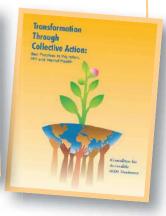
- CAAT received operational funding from AIDS Bureau
- PWA became trustee of CAAT
- CAAT co-organized forum to share knowledge and improve planning and coordination among PHA capacity building initiatives



- CAAT formalized its governance structure
 & elected first steering committee
- CAAT & partners successfully advocated for an immigration lawyer to be housed at HALCO
- CAAT issued research report,
 "Transformation Through Collective
 Action: Best Practices in Migration, HIV
 and Mental Health"
- CAAT trained IRN-PHAs as KTE ambassadors to promote research recommendations
- CAAT co-organized Building Equitable Partnership Symposium with CAMH & developed online resources







2011

 CAAT launched its first ever research study funded by CIHR, the "Community Champions HIV/AIDS Advocates Mobilization Project: CHAMP"

- CAAT hosted research think tank on HIV and immigration
- CAAT received Casey Award
- CAAT launched "When PHAs become service providers" research study





2009

- CAAT and research partners issued report on medical inadmissibility policy, "The Economic Burden of Immigrants with HIV: When to Say No?"
- CAAT introduced CME-accredited training module for doctors performing immigration medical exams
- CAAT launched Legacy Project
- CAAT received City of Toronto Human
 Rights Award on Access and Equity

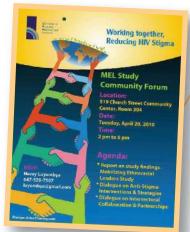


2013

- CAAT received increased funding from AIDS Bureau to deliver IRN-PHA-related capacity building programming across Ontario
- CAAT successfully completed organizational review
- RPCHC became new trustee of CAAT

2010

- CAAT launched Newcomer PHA Sexual Health Promotion Project
- CAAT completed "Mobilizing Ethnoracial Leaders Against HIV Stigma" study
- CAAT worked with partners to launch PHALearning.org



- CAAT co-organized national research think tank to address the needs of PHA service providers
- CAAT selected as a best practice model on addressing HIV through social protection & invited to present at UNAIDS Programme Coordinating Board meeting
- CAAT inducted into OAN Honour Roll with receipt of Social Justice in HIV/AIDS Award
- CAAT launched first ever ETSN Youth training program
- CAAT Legacy launched PHA employment preparedness mentoring project



Community-Engaged Research & Evidence-Based Advocacy

Alan Li, Chair, CAAT Research Committee **Henry Luyombya**, CHAMP Research Project Coordinator

Community HIV Championship: CHAMP

Our signature CIHR-funded study, Community Champions HIV/AIDS Advocates Mobilization Project (CHAMP), completed its intervention and data collection in 2014 and is now in final stages of data analysis and KTE. CHAMP engaged both HIV-positive and HIV-negative participants from Asian, African, Caribbean and Latino communities to evaluate the effectiveness of two interventions namely Acceptance Commitment Training and Social Justice Capacity Building - in reducing HIV stigma and mobilizing community stakeholders to take on HIVrelated leadership.

Extensive data has been collected from participants through pre- and post-training surveys, focus groups, interviews as well

as nine months of documentation of HIV and social justice-related leadership activities. Analyses showed significant reduction in internalized and enacted stigma in all participants and increased community engagement ranging from care and support for PHAs to HIV prevention and health promotion. Multiple KTE activities that are driven by participants have been organized, including media events, workshops and presentations at faith-based institutions, service agencies, community centres and conferences.

We are currently finalizing our research report, which will be launched at a community event in early 2015. In addition, we are working with various community partners to plan collaborative initiatives to scale up and replicate our training interventions in diverse community settings.



CHAMP research team





Supporting PHA Service Providers

This CAAT-led, community-based research study explored the impact on mental health service access when PHAs transition from service users to service providers. The study identified key challenges as well as innovative strategies to promote effective GIPA/MIPA practices and capacity building programs. The study generated much national interest and resulted in a research think tank, "Supporting the Supporters," which saw close to 50 stakeholders from across Canada coming together to highlight relevant research and program priorities. The think tank has also led to the creation of a national working group under the auspices of CIHR-REACH CBR Collaborative. Key findings from this study have been published in an article in the fall 2014 issue of AIDS Care.



Other research studies in which CAAT has played a leadership or collaborative role include:

- PHAs Engaged in Employment Roles (PEER): Uncovering the Impact of GIPA/ MIPA and the Wise Practices of Formal and Informal Peer Support (CIHR-REACH CBR Collaborative);
- Understanding HIV Infection Post Migration amongst ACB Populations in Ontario (University of Toronto);



Stamp Out Stigma in Churches

- PREPARATORY 5 Study: Maximizing CBO's Role in PrEP (St. Michael's Hospital);
- Exploring the Acceptability and Feasibility of PrEP for African and Caribbean Populations (St. Michael's Hospital);
- Asian MSM Pathways to Resiliency (AMP2R) (Asian Community AIDS Services);
- Reducing HIV Vulnerabilities and Promoting Resilience Among Heterosexual Self-Identified African, Caribbean and Black Men in Ontario (Ryerson University & AIDS Committee Toronto);
- The Canadian HIV Stigma Index Project (Global Network of People Living with HIV/AIDS & CIHR-REACH CBR Collaborative);
- Youth Engagement to Prevent HIV/STI & Promote Sexual Health (YEP) Study (Ryerson University); and,
- Strength in Unity (SIU): Reducing Stigma of Mental Illness among Boys and Men in Asian Communities in Canada (Ryerson University).







Community Development, Training & Capacity Building

Raj Jagwani, Capacity Building Coordinator

HIV & Immigration Service Access Training

CAAT's HIV & Immigration Service Access Training engages both PHAs and service providers to enhance their understanding of issues facing IRN-PHAs when they access legal, social, health and other support services. Since 2013, with additional funding from the AIDS Bureau, CAAT has taken on an expanded role in helping ASOs in Ontario build their capacity in the area of HIV and immigration. To this end, over the last year, CAAT has worked diligently to strengthen our existing partnerships and form new coalitions across the province.

Among other things, in 2014, we have:

 established a provincial advisory committee with members from across Ontario to advise the planning and implementation of CAAT's capacity building mandate;

- updated our HIV and immigration training curriculum and manual;
- conducted a new two-day HIV/ Immigration training program in Toronto that was attended by twenty-five participants; and,
- facilitated five workshops in partnership with HALCO for service providers at the ACCHO Symposium, Central Opening Doors Conference, AIDS Committee of Durham, AIDS Committee of Ottawa and Toronto Public Health.

Ethno-racial Treatment Support Network (ETSN)

The goal of ETSN is to facilitate collective empowerment and community succession. It does so by offering training in both treatment literacy and peer counselling skills that integrates GIPA/MIPA and the vision of shared leadership. Specifically, ETSN provides three levels of training:



CAAT at Café Scientifique





2014 ETSN level 2 graduation

- Level 1: "Helping Ourselves" focuses on treatment literacy and communication skills with health care providers;
- Level 2: "Helping Each Other" focuses on peer counseling support skills; and,
- Level 3: "Peer Facilitators Training" focuses on helping former peer graduates take on the role of peer facilitators.

ETSN has had another productive year in 2014. Some highlights of our work include:

- ETSN alumni networking event: In February, 35 ETSN graduates attended an alumni networking event that featured an HIV treatment update education session delivered by Dr. Darrell Tan of St. Michael's Hospital.
- ETSN peer facilitators training: Two

- training sessions were held for 15 peer facilitators, who were then engaged to plan and deliver two series of ETSN training described below.
- ETSN Level 2 Training Helping Each Other: One series of Level 2 training was conducted between April and May, and 11 peers successfully graduated from the program.
- ETSN for Youth: In response to community partners' request as well as needs identified by former participants, we revised the ETSN curriculum to develop a Level 1 training program tailored for racialized HIV-positive youth between 18 and 30 years of age. The program was enthusiastically received and 12 youths successfully completed the training in November.





The Newcomer PHA Sexual Health Promotion Project

Raj Jagwani

Capacity Building Coordinator

The Newcomer PHA Sexual Health Promotion Project, funded by the City of Toronto, was created to improve the health of IRN-PHAs and to reduce their vulnerability to HIV/STIs and the adverse effects of criminalization of HIV nondisclosure. The Project employed peers to conduct outreach and education at a variety of health, social services and settlement agencies. Topics covered at the educational workshops included: sexual health and HIV/STIs; healthy sexual relationships; dealing with HIVrelated stigma and discrimination; criminalization of HIV non-disclosure and disclosure strategies; and, HIV/ immigration issues facing IRN-PHAs.

In 2014, the Project:

17

- reached out to 109 organizations including both ASOs and newcomer settlement agencies;
- conducted 17 workshops in Toronto, which attracted more than 700 participants in total; and,
- organized 3 community forums on criminalization of HIV non-disclosure and sexual health promotion, which together drew over 70 attendees.

The Legacy 2 Project: "Walk with Us"

Ciro Alessandro Bisignano

Project Coordinator

The Legacy Project is a PHA mentorship program funded by the Public Health Agency of Canada and developed and implements by CAAT in collaboration with ABRPO, ACCHO, ETSN, OHTN, PHAN and PWA. Phase 2 of the Legacy Project engages diverse PHAs and community partners in both individual and group mentoring initiatives to promote capacity building, foster professional and civic engagement, reduce social isolation and HIV stigma, and improve access to services and determinants of health.



Legacy training

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2013 OAN Honour Roll

The Legacy 2 Project enjoyed a successful year in 2014. Here are some of our notable achievements:

- We partnered with ABRPO to conduct a second round of the nine-day PHA worker training, which aimed to support PHAs in employment. We are glad to report that 20 participants successfully graduated from the program.
- We have continued to build a close partnership with the PHA mentorship program at PHAN.
- We worked together with Black-CAP, ABRPO and PWA to develop a new employment preparedness workshop.
 The training program is four-day long and will help PHAs who are interested in employment explore their career goals

- and emotional readiness, understand the potential impact of employment on their access to social assistance, and learn practical skills such as resume preparation and job interviews. Fifteen peers participated in a pilot training series conducted in September, and the results were overwhelmingly positive.
- We have continued to explore ideas for group mentoring initiatives. In November 2013, Legacy and CAAT Research Committee co-sponsored a CBR critical writing circle learning series that was attended by 10 peers interested in developing skills in research writing. In early 2015, we hope to launch a new group mentoring initiative that will provide peers with support relating to mental health and substance use issues.





November 2013

- CBR critical writing circle learning series at Ryerson University
- CAAT Annual General Members meeting
- Legacy PHA worker training: Phase 1
- CAAT Research Coordinator Henry Luyombya & former CAAT Co-Chair Fanta Ongoiba, Executive Director of APAA, inducted into OAN Honour Roll

December 2013

 CHAMP co-sponsored World AIDS Day event "Stamp Out HIV Stigma" in churches

January 2014

- ETSN Level 3 peer facilitators training
- Legacy PHA worker training: Phase 2

February 2014

- Guest lecture for sociology class at University of Toronto on HIV & immigration
- ETSN alumni education & networking forum
- CHAMP presentation at the Faith in the City Conference

March 2014

- ETSN Level 2 training
- Presentation at Toronto Opening Doors Conference
- Co-hosted "Supporting the Supporters" national research think tank with CIHR-REACH
- Presentation at CTAC Café Practique: Strengthening the Pillars of Treatment Access consultation in Vancouver, BC

April 2014

- Community meeting to strategize support for MSM/PHAs attending World Pride
- Presentation at HIV 201: ACB Communities workshop organized by Toronto Public Health

May 2014

19

CHAMP presentation at ACT Research Day

June 2014

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- Legacy presentation at the Senior Pride Conference on intergenerational collaborations & mentorship
- Panel presentation at the World Pride Human Rights Conference
- CHAMP presentation at Acceptance Commitment Therapy Conference in Minneapolis, Minnesota
- Co-hosted LGBT/HIV immigration information fair & reception during World Pride
- Co-sponsored World Pride AIDS Candlelight Vigil; CAAT Research Coordinator Henry Luyombya co-hosted the vigil with Ontario Human Rights Commissioner Barbara Hall

July 2014

- Presentation at UNAIDS Programme Coordinating Board meeting in Geneva, Switzerland
- Guest lecture for sociology class at University of Toronto on HIV & immigration
- CHAMP presentation at IAC in Melbourne, Australia

August 2014

• CHAMP completed post-intervention follow-up data collection processes

September 2014

 Presentation at ACCHO Symposium on effects of Canada's new refugee laws on PHAs

October 2014

- Legacy launched new employment preparedness training
- Workshops & presentations at the Central Opening Doors Conference in Vaughan, ON
- HIV/AIDS service access training at AIDS Committee of Ottawa

November 2014

- ETSN launched new Level 1 training for HIVpositive youth
- Received Social Justice in HIV/AIDS Award and inducted to the OAN Honour Roll









NETWORKING MEMBERS AND COLLABORATORS

333 Sherbourne Health Centre 410 Sherbourne Health Centre

Access Alliance Community Health Centre

ACCHO – African and Caribbean Council on HIV/AIDS in Ontario

AIDS Committee of Toronto

Africans in Partnership Against AIDS

AIDS Action Now

AIDS Bereavement and Resiliency Project of Ontario

AIDS Committee Toronto

Alliance for South Asian AIDS Prevention Asian Community AIDS Services Black Coalition for AIDS Prevention

Canadian AIDS Treatment Information Exchange

Canadian HIV Legal Network

Canadian Institutes of Health Research Canadian Treatment Action Council

Casey House Hospice

Centre for Addiction and Mental Health Centre for Spanish Speaking Peoples

CIHR Centre for Research Evidence into Action for Community Health

Community Care Access Centre, Toronto AIDS Community of Durham Region Davenport Perth Community Health Centre Ethno-racial Treatment Support Network

FCJ Refugee Centre Fife House Foundation Government, health and legal service providers

HIV/AIDS Legal Clinic of Ontario

Immigrants, refugees, and newcomer PHAs

Latino Positivos Ontario McMaster University

Metro Toronto Chinese & Southeast

Asian Legal Clinic

Ontario HIV Treatment Network

Ontario AIDS Network

Ontario Council of Agencies Serving Immigrants

Ontario HIV Treatment Network Parkdale Community Health Centre

Peel HIV/AIDS Network Pharmaceutical partners

Pride Uganda Alliance International Regent Park Community Health Centre

Ryerson University St. Michael's Hospital

Toronto Department of Public Health Toronto General Hospital: HIV Clinic Toronto People with AIDS Foundation

Toronto Western Hospital: Asian Mental Health Initiative

University of Windsor Welleslev Institute Women's College Hospital

Women's Health in Women's Hands Health Centre

York University

Glossary

AS0 AIDS Service Organization

CB(PA)R Community-Based (Participatory Action) Research

CHAMP Community Champions HIV/AIDS Advocates Mobilization Project

CHC Community Health Centre

GIPA Greater Involvement of People Living with HIV/AIDS

IAC International AIDS Conference

IRN-PHAs Immigrant, Refugee and Non-Status People Living with HIV/AIDS

KTE Knowledge Transfer and Exchange

MIPA Meaningful Involvement of People Living with HIV/AIDS

MSM Men Who Have Sex with Men **PHAs** People Living with HIV/AIDS PRAs Peer Research Associates







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