Annual Report to Members

Canadian AIDS Society
September 2017
The CAS Year 2016-17 in Review
Towards Re-igniting our Movement

It’s a changing landscape for the HIV movement — certainly more volatile and unpredictable than any time over the past couple of decades. In this climate of uncertainty, the Canadian AIDS Society (CAS) is working to provide meaningful support to organizations and people living with HIV.

Check out some of the highlights of 2016-17:

2016 Forum & Annual Meeting
Breaking with tradition, the CAS PLWHIV Forum & Annual Meeting were held in Winnipeg in May 2016. The Forum brings together PLWHIV and leaders in the movement to influence and guide CAS on the ongoing needs of persons most affected by HIV. [For an update on the 2017 Forum go to: www.cdnaids.ca/update-regarding-the-2017-plwhiv-forum/]

The Annual Meeting is an opportunity for member organizations to set policy directions for CAS. [For an update on the 2017 Annual Meeting: www.cdnaids.ca/update-regarding-the-2017-annual-meeting/]

Development of 2016-2021 Strategic Plan
CAS developed a Strategic Plan for 2016-21, which was tabled at the Annual Meeting and was corroborated with consultation from members. We are aiming to forge a path for the future that can re-ignite our movement. To this end, we will be moving forward with a work plan that will be presented at our 2017 meeting.

CAF/LOI Project Development
As part of PHAC’s Community Action Fund for HIV and HCV, CAS developed five detailed projects as part of the Letter of Intent process which were rejected by PHAC. We have secured transitional funding for 2017-18 and we are looking at more advocacy around this issue, as 33% of organisations across Canada were rejected by PHAC. CAS has created a space within Basecamp to collaborate with members and non-members on the outcomes of the CAF/LOI and many of these were subsequently decreased. We will also be advocating for an increase to the Fi.

Advocacy
CAS continues to maintain an important role in the advocacy for HIV in general and specific related issues in particular. For example, CAS was involved in representation for:

- All CAF-related materials: www.cdnaids.ca/tag/community-action-fund/
- Deferral of MSM blood donor policy: CAS appearance and presentation before the Standing Committee on Health. (read the presentation by CAS to Parliamentary Committee on Health).
- Meeting with Randy Boissonault, Special Advisor to Prime Minister Trudeau on LGBTQ2 issues.
WAD 2016 Campaign
Since an estimated 21% of Canadians living with HIV are unaware of their infection, the 2016 campaign focused on testing for men who are in a relationship. The campaign included:

- Three posters of men in various relationship situations.
- Indoor advertising in washrooms of selected LGBT bars and restaurants across the country.
- Online advertising in DailyXtra and Fugues.
- www.cdnaids.ca/wad

HIV and Sexual Health Testing Toolkit
The HIV and sexual health testing toolkit is a collection of resources specifically for community-based sexual health organizations. These resources are designed to be personalised and distributed in the community, and flexibility has been built into each piece of the kit. The toolkit offers CBOs a means to address sexual health testing in a sex positive manner, while also stressing its importance as part of a holistic approach to health.

Check it out on our website at: www.cdnaids.ca/?s=testing

HIV and Aging

Youth Living with HIV
Youth living with HIV remains a priority population for CAS. Several initiatives occurred over 2016-17 including a new page on the CAS web site: www.cdnaids.ca/youth). We are continually looking for opportunities across the country to develop relevant youth-oriented initiatives.

Revamped Websites
The creation of completely revamped CAS web sites was a priority over the course of the year. Highlights include:

- Created new websites for www.scotiabankaidswalk.ca and www.quilt.ca
- Created a new website for cdnaids.ca on the WordPress platform.
  - Focussed on bringing news, resources and connections to our members.
  - Created pages specifically for information for Gay men and MSM; women; youth; aging populations; intravenous drug users; trans* people; and, aboriginal populations ( CAAN website.)

Scotiabank AIDS Walk
The Scotiabank AIDS walk has been re-named and significantly re-designed to offer more consistent branding year over year.

- Re-designed web site: www.scotiabankaidswalk.ca to improve user experience
- Re-designed use of FrontStream interface to allow for mobile optimized use, and more customized experience for each walk site.
• Re-worked Participant Agreement and Brand Identity Guidelines to match current Identity and be reflective of the current direction of the Walk.
• Updated and revitalized content of Coordinator Toolkit which was also moved to Google Drive for efficiency.
• Simplified and personalized each site walk page using the following format: www.scotiabankaidswalk.ca/cityname
• Reduced number of steps for potential donors or participants.

Canadian AIDS Memorial Quilt
CAS is the caretaker of the Canadian AIDS Memorial Quilt which remains as a vivid reminder of the struggles of the HIV movement during the 80s and 90s. The Quilt can also be a highly valuable tool for the purposes of increasing HIV awareness and fundraising. To this end, CAS intends to make the Quilt more accessible and visible to a broader public than ever before by:

• Completely re-designing www.quilt.ca to expand its storytelling capacity including the ability to search and view individual panels.
• Digitizing paper records for each quilt section and panel.

GIPA Project
The Greater Involvement of People Living with AIDS (GIPA) Project is an ongoing activity that CAS intends to update to maintain its relevance and applicability to PLWHIV. To this end, CAS:

• Launched a national bilingual survey comprised of 45 questions sent to 80 CAS members and approximately 45 other ASOs across Canada.
• Presented webinars on how the GIPA Principle is applied in practice at ASOs from coast-to-coast-to-coast.
• Module 11 in the GIPA “One Foot Forward” series is a deliverable during 2017-2018 fiscal year. Module 11 will share examples of best practices, sample policies and checklists that will help agencies ensure that they not only meet current GIPA accessibility standards, but exceed them.
• If you wish to join the Project’s Advisory Committee please contact us.

Mental Health and HIV project
Realize is taking the lead on the project. CAS will lend its support where possible. Discussions are underway to create an Advisory Committee. Preliminary discussions were held with the following organizations:

• Mental Health Commission of Canada
• Distress Centres
• Coalition on HIV and Mental Health (Mount Sinai hospital)
• Canadian Association for Suicide Prevention
• Canadian Centre on Substance Abuse

Fundraising
Fundraising for CAS concentrated on individual donor requests and on private sector companies that support diversity and inclusion. Funding requests to targeted companies concentrated on our various scopes of work in which we want to be engaged.
Medical Use of Cannabis
With the upcoming legalization of cannabis, CAS is working to ensure that the needs of people who use cannabis for medical purposes are properly addressed in the new cannabis legislation. Along with partner organizations, CAS activities include:

- Setting research priorities for the medical use of cannabis
- Staff will be presenting to “The Science of Cannabis: Defining a Research Agenda for Public Health” conference on March 31st, 2017 in Vancouver BC.
- Cannabis information on the CAS website: [www.cdnaids.ca/tag/cas-cannabis/](http://www.cdnaids.ca/tag/cas-cannabis/)

People who Use Drugs
CAS has been hosting a MAC AIDS grant for the Canadian Association of People who Use Drugs (CAPUD) and providing teleconference capacity for CAPUD’s Board of Directors to meet on a monthly basis. Highlights include:

- Involvement Action=Life campaign, in collaboration with the Canadian Drug Policy Coalition and other partners, advocating for an emergency response to the overdose epidemic.
- CAPUD’s #BANTHE BODY social media campaign
- CAPUD’s first commercial: [https://youtu.be/mr0t-Cbb57c](https://youtu.be/mr0t-Cbb57c)
- Our site: [www.cdnaids.ca/resources/populations/people-use-drugs/](http://www.cdnaids.ca/resources/populations/people-use-drugs/)

Canadian Drug Policy Coalition

- Co-founded by CAS, we continue to chair its Steering Committee and sit on CIHR’s HIV/AIDS CBR Review Committee.

Canadian Harm Reduction Policy Project
CAS is a research team member of this group. The purpose of the project is to conduct a comparative analysis of provincial/territorial harm reduction policy in Canada and assess the implications for expanding access to health services for people who use drugs. CAS is conducting the analysis and interviews for the province of Quebec and working with the project team on overall analysis.

Sex Workers as Peer Health Advocates
CAS is a research team member and Project Coordinator for a project on Sex Workers as Educators: Networking HIV Prevention Strategies.

- The goal of the project was to pilot a Peer Health Advocates Training Program, with and for sex workers, to develop an effective program to empower and enable sex workers to shape their sex work practice around health promotion and STBBI prevention strategies and to contribute to improving access to health services within their communities.
- The training program was implemented and reports of the findings are being finalized.
Trans webinars
Following up on the Trans Toolkit and specific information on the CAS web site for trans populations, CAS has developed a wide-ranging series of webinars on trans issues:

- Trans 101: an overview of the diversity within trans communities and their needs
- Families in transition: focused on trans children, youth and their families
- Trans inclusive health care: Barriers to care and integrating best practices
- Transitioning: WPATH Standards of Care and their application within Canada
- Trans rights: how to combat transphobia and trans discrimination
- Developing trans-inclusive spaces, policies, workplaces

You can view these recorded webinars at: www.cdnaids.ca/transgender-issues-webinar-series/

Social Media
CAS developed and maintained a significantly heightened social media presence over the course of the year. Highlights include:

- Monitored and increased sharing of member content on the CAS Facebook and Twitter accounts.
- **Facebook**: comparison of averages for 2015-2016 and 2016-2017:
  - Increased average post reach by 67 people
  - Increased average total reach by 74 people
  - Increased average interactions per post from 5 to 7
  - Increased average shares per post from 3 to 5
- **Twitter**: comparison of averages for 2015-2016 and 2016-2017:
  - 2015-2016: 1,052 impressions per day; 0.95% engagement (with paid ads)
  - 2016-2017: 536 impressions per day; 1% engagement (no paid ads)
- Instagram used during Scotiabank AIDS Walk and World AIDS Day.
  - Canadian AIDS Society
  - Scotiabank AIDS Walk
  - Marche action sida Banque Scotia

In the media
During 2016-17, CAS was cited in various media on a diverse range of issues including:

- Comments on Gaetan Dugas’ “exoneration” as patient zero.
- CAS received award of merit from Our Own Health Centre in Winnipeg.
- Launch of Scotiabank AIDS Walk #tiedtogether campaign in 28 communities across Canada.
- Reactions to recommended change to one-year MSM blood donation deferral period.
- Reactions to flawed LOI process in association with CAAN and Action Hepatitis Canada.
- Launch of WAD Awareness #sexhappens campaign: raising awareness for HIV testing. Mainstream media interviews (CTV, Global, Radio-Canada); Fugues and Positive Lite magazine articles.
• CAS reactions to the medical marijuana task force report (in association with the Arthritis Society).
• Plea for urgent change of direction for PHAC regarding the Community Action Fund.

CAS in the media: http://www.cdnaids.ca/about-us/cas-in-the-media/

Position Statement: U=U
Not since the introduction of Antiretroviral Therapy (ART) in 1996 has there been as significant a milestone as U=U (Undetectable Equals Untransmittable). Read the full position statement on Treatment as Prevention: www.cdnaids.ca/position-statement-treatment-as-prevention/

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