



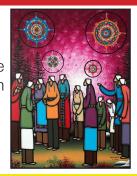
Oahas 2020-2021

WHAT IS Oahas?

Ontario Aboriginal HIV/AIDS Strategy is a provincially mandated AIDS service organization that provides outreach and support services to Indigenous people (First Nations, Métis and Inuit) who are living with or affected by HIV/AIDS and other STBBIs, by way of a network of community prevention workers. The strategy was created by a steering committee composed of government representatives, researchers, community representatives and people living with and affected by HIV/AIDS.

OUR MISSION

Oahas leads culturally distinct and sensitive programs and supports to prevent the transmission of HIV and other STBBIs through safety, knowledge and care with Indigenous people to achieve wellbeing.





OUR VISION

Oahas exists to end the HIV infections in Indigenous communities in Ontario.

Oahas operates based on the principles of Greater Involvement of People living with HIV/AIDS (GIPA), Meaningful Engagement of People living with HIV/AIDS (MEPA), Indigenous harm reduction, and respect for our cultural knowledges and teachings. These foundational principles guide all aspects of our relationships and work, and support our community prevention workers in providing culturally safe and trauma informed approaches related to prevention, education, outreach, testing and treatment supports and services for Indigenous peoples living in Ontario.

KEEPING THE CIRCLE STRONG



Joint Message from Sarah Tilley, *Board Chair* Meghan Young, *Executive Director*

As we reflect over the past year, we recognize the many challenges that were experienced collectively and brought into focus on the center global stage over the course of 2020. The COVID-19 pandemic illuminated many of the chasms that exist within our current structures and systems, and we recognize the tremendous loss of life that community members, volunteers, peers, employees, board members and the ASO sector has felt over this past year. We acknowledge that this is not a new experience for the communities we live and work in, rather that our collective grief has only been compounded by the continued intersecting convergence of factors, which are rooted in the continued practices of racism, colonialism, imperialism, white supremacy, capitalism, misogyny and sexism, and on-going violence against 2SLGBTQIA+ folx.

At this time, we would like to recognize these experiences of violence are not unique to Indigenous peoples and communities, but rather over the course of 2020 we saw horrific racists attacks against our Black and Asian relatives. As an organization, Oahas stands in solidarity with our relatives, and have taken time over the past year to really look internally and spend some time assessing our own racist beliefs and ideologies, and evaluating how these beliefs have led to the development of harmful policies and practices. As part of this process, the Board of Directors has taken steps to change their meeting practices to include designated time and space for discussions to evaluate how we are addressing racism as an organization. The Board has also engaged in two sessions with consultants to support the development of anti-racist structures and processes as an organization, and are committed to engage in these necessary on-going conversations and processes.

We also recognize that due to Canada's harmful and violent drug policies, increased isolation due to COVID-19 and reduced access to community connection and harm reduction services, we saw a huge surge in the number of premature deaths related to the drug poisoning catastrophe. The Office of the Chief Coroner reports there was a 76% increase in the number of opioid related deaths in the province of Ontario between April 2020 – March 2021, when compared to the previous year. We recognize the impact that this loss of life has had in community and for the frontline staff at the organization, and we would like to thank staff and community members, and our community partners for their tireless advocacy to change policy, and their community mobilization efforts to honour the lives of the loved ones we have lost.

As we look ahead, we recognize the impact that the continued housing crises has had in community, and we are turning our efforts to look at the ways Oahas can advocate for access to affordable, sustainable and safe housing for members across the province. As an Indigenous governed service provider, we understand the need for all people having the ability to access mother earth, clean water, food sovereignty, safe shelter and community connection. We understand that these elements are critical from an Indigenous harm reduction lens, and over this next year we are looking forward to our continued conversations and engagement with community to build our understanding of Indigenous harm reduction.

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In order to support continued innovation, adaptability and navigate a change management process, all of the staff at Oahas have engaged in number of crucial capacity building trainings over the past year. These include participating in two sessions on Indigenous focused workplan development, six session of social media training, and the Zone of Fabulousness training. As a result of participating in these trainings, we are continuing to strengthen our internal mechanisms for communicating and evaluating the important work staff are doing, as well as looking at how we are adapting service delivery to be safe and accessible during the pandemic, and ensure we, as an organization, are holding a community-centered focus in our work and are creating a culture of accountability.

Lastly we would like to take this opportunity to recognize, thank and honour a number of individuals who have been involved with Oahas:

We would like to start by recognizing that December 1, 2020 marked the 10-year anniversary of the passing of Laverne Monette (LV). LV was the founding Executive Director of Oahas and fierce advocate, and her knowledge and spirit continue to guide us and have a positive impact in the ASO sector.

We want to recognize the continued leadership changes at Oahas, and would like to thank Mark Atanasoff for his tenure as Executive Director at Oahas. We would also like to acknowledge and thank Glenn Checkley for his leadership as interim Executive Director at Oahas, and navigating the organization through the height of the pandemic between March and September 2020. We would also like to thank and acknowledge Sarah Tilley, for all of their leadership as they are coming to the end of their 2-year term as Oahas Board Chair.

Over the fall of 2020 the Board of Directors engaged the services of Adobe Consulting to recruit and hire a new Executive Director. We would like to thank Beth Jordan and her team at Adobe for all of their work in helping the Board navigate this process. We would also like to send a special thanks to Keith McCrady, Michael Baxter and Sarah Tilley, who volunteered to be on the hiring committee and support the ED recruitment process. As a result of this process, we would also like to welcome the successful candidate - Meghan Young. Meghan joined the Oahas team as the new Executive Director in November of 2020.

Lastly, we would like to give a special chi-miigwetch to Donald Turner. Don has provided tremendous love,

MEGHAN & SARAH



guidance and wisdom to the ASO sector as a whole over his many years as a vocal advocate and IPHA leader. The 2021 AGM marks the completion of Don's 3-year board term with Oahas, and we are deeply grateful for his service on the board, and look forward to him sharing his continued wisdom and generosity with the larger Oahas team through all of the work he does in Southwestern Ontario.





BOARD OF DIRECTORS 2020/21

(as of March 31st, 2021)

Sarah Tilley | Board Chair

Don Turner | Vice Chair

Michael Baxter | Treasurer

Bella Reynolds | Director

Tricia Longboat | Director

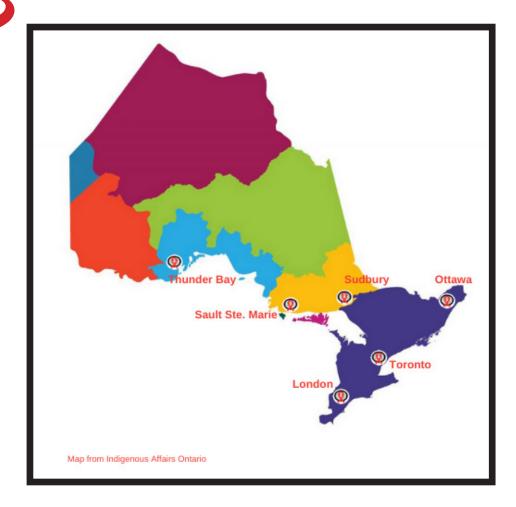
Mesha Maloney | Director

Jason Staats | Director



Clockwise: Sarah, Jason, Mesha, Tricia

WHERE WE ARE



OUR TEAM

Thunder Bay

Rene Boucher Sally Woodside Sarah Kaukinen Melissa Deschamps (on leave)

Sudbury

Tina Rowe, Steven Loranger Leisha Neuman (Gilbert Centre)

London

Destini Millar Christina Doxtator

Ottawa

Austin Ward Jimmy Constant

Sault Ste-Marie

Chasse Gibeault Kristine Lalonde Jennifer Cheryk Karrie Howden

Toronto Program Office

Pesokas McKay Loscher Sara Luey Alison Bray Anton McCloskey Shayne McGregor (TUHF)

Toronto – Administration

Meghan Young Carol Buenafé Meryca Shawongonabe

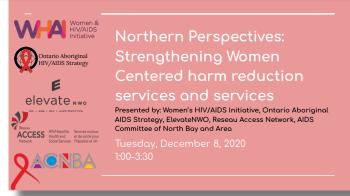
PROGRAMS

The fiscal year began in the early days of the COVID-19 pandemic and continued for the rest of the year – an event from which the end is not yet in sight. To say that the pandemic affected the most vulnerable people on the planet is an understatement. It is important to contextualize the respective communities and situate them in their proximity and access to life-giving resources at the best of times, but specifically, during the pandemic.

The community which we serve, Indigenous peoples living with HIV/AIDS and

those at-risk of HIV/AIDS and STBBIs – are especially vulnerable to COVID-19. With the introduction of COVID-19 safety protocols and the very real risk to the immuno-compromised members of the community, living in COVID-times is especially perilous. Coupled with the rise of deaths from the drug poisoning crisis, it was a grim year for those who continue to feel the impacts of the intergenerational abuse and trauma from the colonial policies and genocidal practices of the Canadian government.





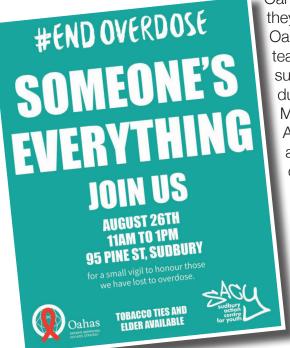
Against this backdrop, Oahas rose to the challenge of continuing programs through COVID-19. Through the ever-changing stages of lockdown and openings and armed with safety protocols,

Oahas ramped up street outreach to meet people where they were at.

Oahas staff played a cruicial role in the small but mighty team of harm reduction service providers that continued to support Indigenous community members across six sites during the pandemic - Thunder Bay, Sudbury, Sault Ste Marie, Ottawa, London and Toronto.

As an essential service, we continued programming creatively through pop up tabling events, telephone wellness checks, connections through social media and virtual ceremony and education.

With the help of local public health units and partner agencies, both Indigenous and non-Indigenous in these six cities, we quickly adjusted our programming to meet the needs of the community. Aside from street and community outreach – Oahas provided harm reduction supplies, food hampers, protein supplies,



covid safety kits and warm winter gear. Oahas conducted virtual support groups and educational sessions and took advantage of social media. It was important to stay connected in every way with the community to combat the isolation and loneliness brought on by social restrictions dictated by COVID-19.

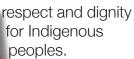
When times were briefly relaxed around Q2 and Q3, Oahas supported testing events and ramped up programming in partnership with other agencies whether through supply sharing, or supporting each other's events.

Programming highlights of the year included:

- Moving to larger programming space closer to community in Sault Ste-Marie
- On-boarding the new Executive Director and orientation of new program staff
- Increasing community outreach and harm reduction supply delivery in all sites
- Supporting isolation centers in Thunder Bay
- Providing access to culture through medicines and ceremony to mitigate the losses due to the pandemic and drug poisoning crises.
- Successful collaboration with many partners in each region.

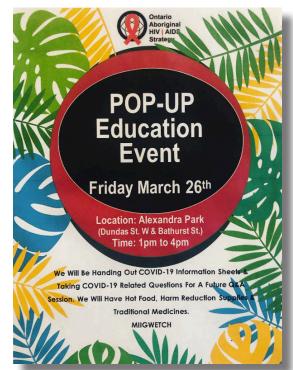
Overall, Oahas managed to maximize material resources and staff talent, though sadly, it is never enough. The pandemic stacked on top of both a drug poisoning crisis and housing crisis demonstrated once again the gaps in the Canadian social service net and shone a light to the systemic racial bias against First Nations, Métis and Inuit. While each day seemed to be about mounting

insurmountable challenges, Oahas provided care and support to the community, in the best way it knows how – with









Toronto Aboriginal Support Services Council COVID-19 Safety and Response Program



Without question, Oahas would not have been able to serve the Indigenous community in Toronto to the extend that we did, without the support of TASSC. During the first lockdown in Toronto due to COVID-19, the Oahas team brainstormed and collaborated with community partners across the city to continue our outreach program and provide harm reduction supplies. Through the additional fundraised dollars from TASSC, we were able to purchase a vehicle, ramp up community outreach and increase production and distribution of harm reduction kits. In addition, we were able to include COVID safety kits, protein kits, and hygiene kits. Along with food gift carts for food security for those in precarious food and housing situations, these kits constituted essential items we were able to distribute on our regular street outreach and to encampments across the city. It is heartening to see that in times of severe crisis, Oahas and our local partners were able to come together and address the immediate needs of the urban Indigenous community, despite the uncertainty and challenges of tomorrow due to COVID-19.





































NIMINWENDAM OMMA AYAAYAN

(I'm happy you are here) ■ ■ □

Program funded by Toronto Urban Health Fund

The Niminwendam Omma Ayaayan (I'm happy you are here) is a 40-week virtual workshop program for community members to stay connected and build relationships. Each session focuses on developing wellness practices and self-care strategies through culturally-specific activities and teachings, all guided by harm reduction principles.

Through Niminwendam Omma Ayaayan, we were thankful to offer honorariums to local community members such as Jerry Thistle. Jerry created beautiful art work through an Indigenous lens to promote and enhance the Niminwendam Omma Ayaayan program for community.

SHAYNE MCGREGOR, PROGRAM LEAD

This has offered community members a safe space, connection to culture and wellbeing enhancers. While continuing to build relationships, share resources and offer support where needed regarding individuals mental, physical, spiritual and emotional well-being.

NEW HORIZONS

Funded through a partnership with The Gilbert Centre

The New Horizons for 2S-LGBTQ+ Older Adults program is a program committed to reducing the social isolation experienced by this population through the creation of online and in-person social and support opportunities, educational workshops, and culturally relevant programming. The team is committed to community building, inclusion across identities, and the creation of spaces where all people on the 2S-LGBTQ+ spectrum feel welcome, heard, and honoured. The 2S-LGBTQ+ Older Adults program aims to support and empower those who identify as older



adults (55+) within the 2S-LGBTQ+ community, to promote healthy relationships, and to increase access to health and social services.



This program is Central and Northern Ontario specific, servicing the Simcoe/Muskoka, North Bay, and Sudbury areas. Coming together as a larger team allows for community building across regions and a larger network of support for the vast geographical area that we serve.

LEISHA NEUMAN

TWO-SPIRIT OUTREACH WORKER

FINANCIAL STATEMENTS

| As at March 31 | | 2021 | 2020 |
|----------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-----------------------------------------|--------------------------------------------------------|
| Assets | | | |
| Current | | | |
| Cash | \$ | 875,367 | \$ 182,532 |
| HST receivable | | 33,188 | 17,056 |
| Prepaid expenses | | 36,111 | 41,073 |
| | | 944,666 | 240,661 |
| Equipment and leasehold improvements (Note 3) | | 94,499 | 83,622 |
| | \$ | 1,039,165 | \$ 324,283 |
| | | | |
| Liabilities Current Accounts payable and accrued liabilities (Note 4) Deferred revenue | \$ | 97,720 775,144 | \$ 124,015 55,419 |
| Current Accounts payable and accrued liabilities (Note 4) | \$ | • | \$ |
| Current Accounts payable and accrued liabilities (Note 4) Deferred revenue | \$ | 775,144 872,864 | \$ 55,419 179,434 |
| Current Accounts payable and accrued liabilities (Note 4) Deferred revenue | \$ | 775,144 872,864 94,499 | \$ 55,419 179,434 83,622 |
| Current Accounts payable and accrued liabilities (Note 4) Deferred revenue Deferred capital contributions (Note 5) | \$ | 775,144 872,864 94,499 | \$ 55,419 179,434 83,622 |
| Current Accounts payable and accrued liabilities (Note 4) Deferred revenue Deferred capital contributions (Note 5) Fund Balances | \$ | 775,144 872,864 94,499 967,363 | \$ 55,419 179,434 83,622 263,056 |
| Current Accounts payable and accrued liabilities (Note 4) Deferred revenue Deferred capital contributions (Note 5) Fund Balances Operating Fund | \$ | 775,144 872,864 94,499 967,363 | \$ 55,419 179,434 83,622 263,056 21,160 |

Ontario Aboriginal HIV/AIDS Strategy Statement of Operations

| For the Year Ended March 31 | 2021 | | 2020 |
|---------------------------------------------------------|-----------------|----|-----------|
| Revenue | | | |
| Ontario Ministry of Health and Long-Term Care | \$ 1,833,026 | \$ | 1,805,610 |
| TASSC COVID funding | 248,669 | | - |
| The Gilbert Centre funding | 56,055 | | 3,000 |
| Elizabeth Fry Toronto funding | 30,000 | | - |
| OHTN research grant funding | 29,274 | | 51,520 |
| TUHF funding | 25,179 | | - |
| Miziwe Biik | 5,852 | | 19,703 |
| Other revenue | - | | 5,636 |
| Amortization of deferred capital contributions | 40,491 | | 39,367 |
| | 2,268,546 | | 1,924,836 |
| Expenses | | - | |
| Advertising and community relations | 1,841 | | 2,652 |
| Amortization | 40,491 | | 39,367 |
| Bank charges and interest | 2,907 | | 2,362 |
| Insurance | 6,646 | | 4,815 |
| Supplies | 51,446 | | 100,374 |
| Postage and courier | 6,242 | | 10,300 |
| Programming costs (Note 7) | 585,835 | | 281,751 |
| Rent | 161,270 | | 154,129 |
| Telephone and utilities | 40,800 | | 53,620 |
| Travel and accommodation | 28,064 | | 77,977 |
| Wages and benefits | 1,337,879 | | 1,203,515 |
| | 2,263,421 | | 1,930,862 |
| Excess of revenue over expenses (expenses over revenue) | \$ 5,125 | \$ | (6,026) |

Ontario Aboriginal HIV/AIDS Strategy Schedule of Revenue and Expenses by Program (Unaudited) For the Year Ended March 31

| \$ | 1,434,847 - - | \$ | 398,179 | \$ | _ | \$ | | | | _ | |
|----|---------------------|-----------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| | · · · | | · - | | | | - | \$ | 1,833,026 | \$ | 1,805,610 |
| | - | | | | 248,669 | | - | | 248,669 | | - |
| | | | - | | · - | | 56,055 | | 56,055 | | 3,000 |
| | - | | - | | - | | 30,000 | | 30,000 | | - |
| | - | | - | | - | | 29,274 | | 29,274 | | 51,520 |
| | - | | - | | - | | 25,179 | | 25,179 | | - |
| | - | | - | | - | | 5,852 | | 5,852 | | 19,703 |
| | - | | - | | - | | - | | - | | 5,636 |
| _ | 37,591 | _ | 530 | | 1,429 | | 941 | _ | 40,491 | | 39,367 |
| | 1,472,438 | | 398,709 | | 250,098 | | 147,301 | | 2,268,546 | | 1,924,836 |
| | | _ | | | | | | _ | | _ | |
| | 1,725 | | - | | - | | 116 | | 1,841 | | 2,652 |
| | 37,591 | | 530 | | 1,429 | | 941 | | 40,491 | | 39,367 |
| | 2,907 | | - | | - | | - | | 2,907 | | 2,362 |
| | | | 1,295 | | - | | - | | | | 4,815 |
| | | | 10,626 | | 6,714 | | | | | | 100,374 |
| | 5,426 | | - | | - | | 816 | | 6,242 | | 10,300 |
| | 242,269 | | 56,359 | | 223,255 | | 63,952 | | 585,835 | | 281,751 |
| | | | | | - | | - | | | | 154,129 |
| | | | | | | | | | | | 53,621 |
| | | | | | | | | | | | 77,976 |
| _ | 968,844 | | 293,583 | | 7,577 | | 67,875 | _ | 1,337,879 | | 1,203,515 |
| | 1,472,433 | | 398,709 | | 250,098 | | 142,181 | | 2,263,421 | | 1,930,862 |
| \$ | 5 | \$ | - | \$ | - | \$ | 5,120 | \$ | 5,125 | \$ | (6,026) |
| | | 1,725 37,591 2,907 5,351 31,553 5,426 242,269 132,686 28,712 15,369 968,844 | 1,472,438 1,725 37,591 2,907 5,351 31,553 5,426 242,269 132,686 28,712 15,369 968,844 1,472,433 | 1,472,438 398,709 1,725 | 1,472,438 398,709 1,725 | 1,472,438 398,709 250,098 1,725 - - 37,591 530 1,429 2,907 - - 5,351 1,295 - 31,553 10,626 6,714 5,426 - - 242,269 56,359 223,255 132,686 28,584 - 28,712 6,912 2,457 15,369 820 8,666 968,844 293,583 7,577 1,472,433 398,709 250,098 | 1,472,438 398,709 250,098 1,725 - - 37,591 530 1,429 2,907 - - 5,351 1,295 - 31,553 10,626 6,714 5,426 - - 242,269 56,359 223,255 132,686 28,584 - 28,712 6,912 2,457 15,369 820 8,666 968,844 293,583 7,577 1,472,433 398,709 250,098 | 29,274 25,179 5,852 5,852 5,852 | 29,274 25,179 5,852 5,852 5,852 5,852 5,852 1,725 1,725 1,725 1,725 1,725 1,725 1,725 1,725 1,725 1,725 1,725 1,725 1,725 1,725 1,725 | 29,274 29,274 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25,179 25, | |

Thank You

Funders | Donors

AIDS and Hepatitis C Programs, Ministry of Health and Long-Term Care
Toronto Aboriginal Support Services Council

Gilbert Centre

Toronto Urban Health Fund

Rotary Club of Toronto

Ontario HIV Treatment Network

HealthStats Inc

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Once Upon A Queer Time

W. Blair Welch

Anne Caroline Buenafe

Glenn Checkley

Janine Cutler

Ezra Blackwood

Suzanne Brunelle

Artur Kerobyan

Keith O'Regan

The PrEP Clinic

... and to all our anonymous donors and countless volunteers...







Do you have questions about COVID-19 or questions about the COVID-19 vaccines?

If so, Oahas is organizing a community information session to make sure you get the answers to your questions!







2 ADMINISTRATION OFFICE

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oahas

oahas_ig

artwork pictured left - Leland Bell, 2015

