



# VANCOUVER WOMEN'S HEALTH COLLECTIVE

## ANNUAL REPORT 2020-2021

We acknowledge that we work on the traditional, unceded ancestral lands of the Coast Salish peoples.

We must remember that systemic oppression operates when we allow the status quo to function. Decolonization requires disruption but first, it is our responsibility to recognize the system at work and take it apart.

We also believe that it is important to situate our work in the rich history of the women's movement in the Downtown Eastside.

## Message from the board

IN LAST YEAR'S BOARD MESSAGE, past-chair Amanda Pollicino closed by stating: "At the end of this [2019-2020] fiscal year, the COVID pandemic hit and forever changed the world." We stepped into an ever-changing world. We had set a goal of working on "disruption" of the systems of oppression that we and our organization, carry - and oh how disruptive this year was! Our drop-in space closed from mid-March to mid-April, while our staff team reorganized the layout and established guidelines to adhere to provincial social-distancing and sanitizing rules. Thanks to that, we were able to gradually reopen drop-in and health support services when most of the organizations in the DTES were operating with restrictions that limited access to their facility. With additional funding and new partnerships, we added peer services, a bi-weekly naturopathic clinic and expanded counselling access.

2020 has put a strain on many of us and we first want to acknowledge the time and energy that Melissa Woodward, Clayre Sessoms, Erica George, Essya Nabbali, Dianne Henshaw put into working with us, and with our staff and volunteers to maintain the Collective active and supportive of the neighbourhood and community.

We aimed at pursuing the leadership work that members entrust us with, while remaining flexible to the needs of the community.

On the advocacy front, we participated in joint actions both on the regulations front and on the health front:

\* The BC Lobbying Transparency Act (LTA) changed on May 4, 2020 "in an attempt to increase transparency in lobbying". Though VWHC falls under the exemption to register, we developed a government relations policy so that any advocacy that is not invited will be signed by the board (co-) chair(s). We supported community action advocating for the LTA to differentiate the lobbying work that corporations do for the interests of their stakeholders, from the advocacy work that community organisations do for the benefit of the community at large.

\* VWHC co-signed an ask to Dr. Bonnie Henry to provide feedback on Vancouver Coastal Health (VCH)/Ministry of Health's COVID strategy for the DTES, in the fall of 2020 We participated in subsequent meetings with Deputy Minister of Health Stephen Brown & Dr. Patricia Daly, and Dr. Bonnie Henry and have been attending regular updates by VCH throughout the year.

Committee work this year focused on two topics, born out of last year's overarching goal of 'reducing harm and helping women feel safer in the space'

The Safe-r committee discussed how to "recognize the many different ways that one presents" in the space, while keeping all persons who are marginalized by gender engaged and feeling ownership of the Collective space. Those same topics were submitted to a new Community advisory committee of peers and Elder to share their insights and guide Safe-r committee and board with regards to addressing safety needs, participant capacity building, cultural safety, trans inclusion, and accessibility.

The Engagement committee carried on the work of the former membership committee and volunteer engagement committee, by exploring organizational membership and incentives/benefits for members; and building capacity of volunteers.

Additional volunteers involved with the Environmental scan committee completed the external environmental scan they had planned. Kudos to Angela Randall and Claire Fergusson who took the lead on submitting an application to acquire a practicum student's support to execute this project. Meyer Quaynor developed a questionnaire, compiled and analyzed the results.

Even (or especially - ) in a year of change, Succession planning had to stay top of mind to intentionally increase representation, at different levels, from the community we serve. This resulted in recruiting new board members, members of a new Community Advisory Committee, and peers. In the midst of the challenge of a pandemic, it was motivating and exciting to have these new voices and expertise enrich the conversations and actions of the Collective.



Bina Salimath



Alaina Chun

I HAD, LIKE SO MANY OTHERS, the hope and illusion that the pandemic would end with 2020 - we all know how that went... This fiscal year, VWHC reinvented itself over and over – from food distribution at the door to full respite site with folding beds and individual make-up counters, thanks to the support from Emergency funding and coalition work. A huge thank you goes to our funders, partners and leaders from other community organizations that invested time in bringing groups together to organise collective resources and advocate for the needs of the DTES community.

Loyal and dedicated volunteers spent hours de-cluttering and sprucing up the space – having to close offered somewhat of a luxury to do the work we never have time to do. We had time to discuss and strike a new partnership with the Boucher Institute of Naturopathic Medicine, as well as with Rhodes Wellness for counselling practicums. We expanded our hours and team, thanks to emergency funding. The silver lining ends there. The pandemic reduced access to health and wellness services and exacerbated inequities in our neighbourhood and society. For the Collective, this meant the NP clinic had to close because the NP were redeployed to COVID 19 support; in-person yoga classes were put on hold; program participants found themselves more in “survival” mode, requiring more intensive wrap-around care; and the waitlist for counselling support is extensive.

The impacts of our work are outlined in the next sections of this annual report, up until March 31, 2021. The effects of the pandemic may be easing up as vaccination campaigns advance; however, the impact on mental health and general safety and wellness will last much longer.

I am beyond grateful to my colleagues and volunteers at all levels, and to the incredible generosity of donors. After a summer working ‘solo’ with the volunteers, it was wonderful to have Casey back to coordinate programming, and welcome Nazie as new volunteer and outreach coordinator. The team and programming have grown (so did the amount of administrative work!!) as a result of everyone’s energy and belief in the values of VWHC. Thank you!



France-Emmanuelle Joly

THE FOCUS OF SERVICES offered by the Vancouver Women’s Health Collective is our Drop-in resource centre, a safer, secure, women-only space located in the heart of the Downtown Eastside (DTES) of Vancouver. Services are free of charge, or by donation. We welcome all who identify as women and gender non-conforming, and our clients reflect the diverse nature of Vancouver. We do not keep records of age, ethnicity, primary language, occupation or socioeconomic status, to avoid profiling women who use the space, and informal feedback tells us that women appreciate not having to disclose their history in order to access the space and services.

The VWHC volunteers are always on hand and strive to empower women as they access services and programs, research employment and housing options, other health/wellness services, or address their individual needs.

This year, we closed for a few weeks to reorganise the space; opened for at-the-door food and hygiene kit distribution in the spring; re-opened as respite site in the summer, and extended our hours, layout and team late fall and throughout the winter.

The pandemic provided the opportunity to access emergency funding that accelerated our organizational capacity in terms of space accessibility and equipment, volunteer training and staffing that will continue to impact our organisation into the next 21-22 fiscal year, including maintaining our outreach, counselling and advisory committee peers.

The funding for the Modular Respite Site from CERP created a dedicated space for folks to spend time on their self-care.

The funding for the Therapeutic Crisis Response from ECSF played a key role in expanding our business hours, implementing an outreach program, a revamped counseling program.

### DROP-IN RESOURCE CENTRE

Our Drop-in Resource Centre increased hours from 28 to 40 hours per week (weekdays, daytime) and offers:

- Computer access (reduced from 7) to 2 refurbished computers with Internet connectivity, printing, faxing. We had to cancel phone service due to virus spread concerns
- On hold - Yoga classes four times per week, and Pilates class once a week, provided free of charge by qualified instructors from various institutes.
- Increased Wellness Counselling with 10 counsellors, art and music therapists
- New this year: Naturopathic clinic in partnership with The Boucher Institute of Naturopathic Medicine, with 2 teams of interns
- On hold: Health and wellness workshops open to community members and to other community agencies regarding women's health issues.
- Free baked goods and breads, donated by community business partners (average 6,475 items)
- Free hygiene products (body/hair/feminine/dental) and distribution of donated make-up, costume jewellery, clothing, and linen & blankets.

For 2020-2021, the number of women who used the space averaged 33 (37 PY) per day (June 2020-March 2021).

A heartfelt thank you this year to our in-kind donors:

- Bean around the World, Pure Bread, Nelson the Seagull, and Kafka
- Sylvia Hotel (hygiene products and bedding)
- Groceries donations from Choices Market – Cambie store and through A Better Life Foundation & partners totalling \$6,900
- Weekly meals from A Better Life Foundation (4,277 served!)
- Jean Queen clothing store (make-up and hygiene product)
- All our individual and corporate donors who outdid themselves!!! Despite our inability to organize dedicated fundraising events in the last fiscal year, we have raised \$17,000+, a comparable amount as we did in the 2019/2020 fiscal year. The number of monthly donors and personal

fundraising campaigns increased by 40%. Special thank you to Shana Alexander for 2 Bootcamp fundraisers, and to former VWHC volunteer Megan Hopkins for a month of yoga fundraising for VWHC! We purchased a large fridge to keep our groceries donations!

### VOLUNTEER-RUN ORGANISATION

Volunteers maintain all services. Resource Centre volunteer hours averaged 283 per month, i.e. 3,392 hours per year, an increase of 20 hours per month over year 19-20 and an extraordinary commitment that is essential to the delivery of all the Collective services. Our 7 Board members, 6 counsellors, and 14 naturopathic interns also generously volunteered their time, offering an additional 444 hours of counselling and 332 hours of naturopathic treatments. In all, volunteers donated 4,566 hours of service (compared to 3,800 in 19-20) Our group of volunteers consisted of 27 volunteers, with 8 long-term volunteers. Committee work and practicum also provided additional opportunities to volunteer to another 8 students.

### NURSE PRACTITIONER COMMUNITY CLINIC

The NP clinic that the Vancouver Women's Health Collective usually hosts thanks to a partnership with BC Women's Hospital (BCWH) was temporarily closed as the team of NPs was redeployed to support healthcare services during the pandemic. Appointments were shifted to virtual.

Virtual meetings with BC Women's Hospital are ongoing to discuss return of the team of Nurse Practitioners NP community clinic hosted at VWHC.

### NATUROPATHIC CLINICS

An agreement was negotiated and signed with the Boucher Institute of Naturopathic Medicine (BINM) to offer naturopathic clinics at VWHC on Wednesday evenings and Friday all day, starting July 2020. On each of those days, three 4th-year students will be on site with a supervisor, and offer 1:1 consultations and treatments, including acupuncture.

Overall feedback from clients is positive, and the recurring bookings are a testimony to the wellness and healing provided.

We had very good feedback from BINM that our 'satellite-clinic' is a successful community settings and the students have appreciated being so busy. And it is so fun to see former VWHC volunteers come back as naturopathic interns!

### RECLAIMING OUR SPIRIT (ROS) PART 2

A Strategic advisory committee of partner organisations (VWHC, Kilala Lelum, UBC School of Nursing and Reichert Associates) met monthly to address questions regarding process/implementation of activities.

The initial group of ROS (research) participants was very different from the ROS 2 participants: the former were selected as being self supportive and from two locations with different socio-demographics, creating a mix of cases with varying complexities. The latter ROS 2 in community setting caters to participants who have barriers to care and experience levels of poverty that require intensive case management, clinical support, real wraparound care that is more similar to complex case management. Building relationships and trust also takes longer and sometimes requires

open-ended, multi-hour visits, which the program is built to accommodate.

COVID has had two immediate effects; one of restricting the size of the group; the other of exacerbating the complexity of the needs and contexts the participants are faced with. It has also caused Elders to be altogether in higher demand and under higher vicarious strain, hence interfering with their capacity to commit to ROS activities.

A 1st cohort has been run with staggered intake of 7 women, between June-September 2020; 2 graduated in February 2021. This first Cohort developed:

- 'Spirit of the Circle' goals and agreements, to create a sense of ownership and anchor interactions when triggering words or actions happen in the group.
  - A calendar based on what activities women are interested in (e.g. storytelling, land-based, drum making, talking circle...)
  - An outline of how the weekly circle may unfold. It may go in another direction, but at least a fallback plan is in place.
- 8-10 women are on waitlist for the next cohort; 4 of which are being assessed for readiness to be enrolled in March 2021.

### HIGHLIGHTED BENEFITS

ROS 2 is actualizing relational, patient-centred and trauma informed care by understanding there are deep reasons for the lack of trust and that other programmes don't always make this possible.

- \* support women in a different way by just removing time constraints and offering the RN the flexibility to spend as much time as needed.
- \* helps participants to set boundaries, have them in control of their time, stop the meeting at any moment of their choice or not having to rush.

All partners are working on an after-program support as program ends are experienced as another form of abandonment, and are hard for both participants and staff. Knowing that the team is still supportive makes a difference to participant's continued progress.

### THERAPEUTIC CRISIS RESPONSE

The ECSF grant played a key role in expanding our business hours, implementing an outreach program, a revamped counseling program designed to address the accessibility barriers and increased need that resulted from the pandemic.

#### HIGHLIGHTED BENEFITS:

- hired and supported a team of 5 peers and one elder to form the VWHC Community Advisory Committee (CAC), contribute their expertise and lived experience and make recommendations on topics including: addressing safety needs, participant capacity building, cultural safety, trans inclusion, and accessibility. Recommendations are in the process of being reviewed by board members for implementation, and further development.
- hired an outreach team of 3 peers that engaged in more than 432 supportive encounters with folks marginalized by gender in the DTES and supporting with snacks, meal tickets, personal items and harm-reduction supplies, referrals to fill support gaps, emergency mental health support, general or specific health supports, safer sex and substance use supplies & education, etc.
- increased our staff hours by 60% (and the services that are enabled by us being open), and responded to the increased demand for drop-in services, especially between 5pm & 7pm. Despite suspending our popular daily (Mon-Fri) yoga hour and NP Community Clinic, overall participation in our other programs increased by up to 87%. improving our ability to respond to client demands while also offering the safe, welcoming space our clients have come to know and love.
- 78+ counseling participants (nearly triple the number of individual sessions accessed per month over previous year) - more than 60 required support with virtual access (significantly higher than projected) Requests for this free service have more than tripled over pre-pandemic levels, for individuals in need of free, accessible, and consistent mental health supports. By the end of January, we had been able to connect with everyone on our waitlist; however, word spread around and the waitlist grew back to over 100 requests.
- Able to accommodate requests from Community partners for 3 multiple-barriered clients in urgent need of counseling hours.

### MODULAR RESPITE SITE

The CERP funding created a dedicated space for folks to spend time on their self-care. Previously to having access to respite beds and make up counters, folks would settle in the bathroom or computer desks, creating conflict with other participants who wanted to use those facilities. Spending time doing self care allows folks a time to self-regulate and better manage their behaviours and interactions.

The respite beds and make-up counters are used every day.

The development of an inreach peer program has given several peers the opportunity to share their lived experience and expertise with their community while gaining work experience and generating an income.

#### HIGHLIGHTED BENEFITS:

- 460 hours of access to 4 respite rest stations and over 500 hours of access to 4 beauty stations.
- 15 additional hours per week of overall program access due to our new expanded hours of operation as well as Special events such as Galentine's day, International Womxn's Day, Knitting circles and Arts & Relaxation (6 to 10 participants)
- distributed meals, food hampers filled with groceries (protein, fresh fruit, snack, juice), and gift cards.
- A partnership with the Office of the Police Complaint Commissioner allowed us to provide mental health and advocacy support 1 individual woman who was in a complaint process with the police.
- 10 community support conversations with a main facilitator and guests. Attendance reached an average of 5 per session. In particular, the session on the impact of racism on people's ability to meet their safety needs was very well received. A major challenge was to gain momentum and build trust. Most folks who would benefit from community support circles were lacking access to one-on-one counseling sessions that would bring them to a level of preparedness prior to participating in circles.

**EXPANDED FOOD PROGRAMS**

- Weekly meals through A better Life Foundation
- Introduced Vegan meals from Savannah from Vegan Supplies
- Welcomed the first ‘public’ **Community Fridge** in partnership with The Vancouver Community Fridge Project (VCFP). <https://vcfp.square.site/>  
The fridge is located at the entrance of WWHC and is open access. It is restocked, cleaned and maintained by the VCFP.  
A pantry for dried and canned foods is the next step!

**PROGRAMMING THAT IS STILL IN THE DEVELOPMENT STAGE**

and that we are excited to bring to WWHC soon:

- yoga therapy,
- storytelling class,
- “Eating Healthy on a Budget” alongside the Boucher Institute
- ‘creative movement’ class;
- cranio-sacral therapy

**PARTICIPATED IN THE FOLLOWING WORK GROUPS OR ADVISORY COMMITTEES:**

- Feminists Deliver
- Community of Practice (CoP) organised by Vancouver Coastal Health (VCH) and DCHC DTES Women’s Night Clinics Coordinator, discussing:
  - lateral violence in our organizations
  - Mapping for Accountability & Safety: Tracking gender-based violence indoors in the DTES
  - developing a program plan for a community led and driven GBV research project
- CRNN - community coordinated response network

**SUPPORTED COMMUNITY ACTION**

- Advocating for the LTA to differentiate the lobbying work that corporations do for the interests of their stakeholders, from the advocacy work that community organisations do for the benefit of the community at large.
- Co-signing an ask to Dr. Bonnie Henry to provide feedback on Vancouver Coastal Health (VCH)/Ministry of Health’s COVID strategy for the DTES



# Organizational Capacity - Volunteer & Staff Capacity Building Outreach, Communication, Funding & Membership

## VOLUNTEER & STAFF CAPACITY BUILDING

Recruited 1 FTE counsellor, 1 volunteer and outreach coordinator

### VOLUNTEER MANAGEMENT

- Interviewed and enrolled 30 RC volunteers; 2 circle facilitators, 8 peers and 2 Elders
- Managed, supervised and evaluated 8 practicum students (5 counselors, 2 social service workers, 1 social justice)
- Provided references for 6 volunteers applying to medical and arts studies; and for 2 former staff

### VOLUNTEER ENGAGEMENT

- Designed workshops/training program (ongoing) called Intersectional Crisis Intervention  
Wrote training content and collaborated on script writing  
Hired 1 Director/Producer, 1 Videographer, 4 Actors and began filming training videos!
- Organized trauma informed training for all current board, volunteers, and peers

### CAPACITY BUILDING

- Knowledge transfer from ED to Program coordinator in terms of grant writing

### COMMITTEE WORK

4 committees based on the VWHC's Strategic priorities: (see Message from the board)

- Succession planning
- Environmental Scan and Outreach
- Engagement
- Safe-r

Discussed and agreed on a thesis project with 'student consultant' Nicole Fornelli, a MA student in Project, Human Systems Intervention at Concordia University (Montreal). Nicole is interested in supporting our organization in building capacity to achieve our goals and improve ways of working – more specifically our Succession Planning and Decolonizing processes.

## COMMUNICATIONS

- 5 newsletters
- Website updates, Twitter, Facebook and Instagram

## FINANCIAL ACKNOWLEDGEMENTS

We acknowledge the financial assistance of

- the Province of British Columbia for our Resource Centre;
- BC Women's Hospital, an agency of PHSA, for the NP Clinic;
- Women and Gender Equality Canada for funding for Reclaiming Our Spirit – Part 2
- City of Vancouver
  - \* Capital funding for washroom renovations (pending)
  - \* Organizational Capacity Building for training program development
- Community Foundations of Canada/Vancouver Foundation
  - Emergency Community Support Fund and Community Response Fund
- Lu'ma BC Housing in partnership with Vancity Community Foundation - Reaching Home COVID Emergency Relief programming (CERP)
- Community Coordinated Response Network for Peer hours

We are very grateful to community partners who donate food, clothing, hygiene items, services and to those who fundraised for us or made individual donations. Indirect fundraising activities and generous donors raised over \$17,000.

A special thank you goes to Central City Foundation for their support as landlord.

## ANNUAL CLIENT SERVICES

* due to COVID-19 - Statistics include only half a month for March 2020 - at-the-door food & hygiene kit distribution mid-Apr.-May 2020 - opened as respite site in June 2020 - extended our hours as of mid-Dec. 2020	April 2020-March 2021	April 2019- (mid-)March 2020
<b>CONTACTS</b>		
Drop-in	6,676	8029
Appointments*	332	1176
Email	34	152
Phone	410	1656
<b>Total Contacts</b>	<b>7,452</b>	<b>11,013</b>
<b>No. of women in space:</b>	<b>6,872</b>	<b>9205</b>
<b>SERVICES DELIVERED</b>		
NP visits	0	1367
NP Related	243	1622
Food/Drink	13,028	6551
Hygiene & Clothing	2,935	4273
Acupuncture	-	15
Naturopathic visits*	332	-
Yoga & Pilates	0	677
Computer/Phone/Fax	653	1317
Workshops/Events	37	125
Counselling	769	348
VWHC/Other	167	636
<b>Total Services</b>	<b>20,935</b>	<b>16,931</b>
<b>RC Services</b>	<b>20,692</b>	<b>13,942</b>
<b>NP Appts. &amp; NP Related</b>	<b>243</b>	<b>2989</b>

\* Appointments usually refer to NP appointments, of which there were none this fiscal year. This year (2020-2021) the count of appointments is for naturopathic visits only



acknowledges the financial assistance and donations from



~ NELSON *The* SEAGULL ~

