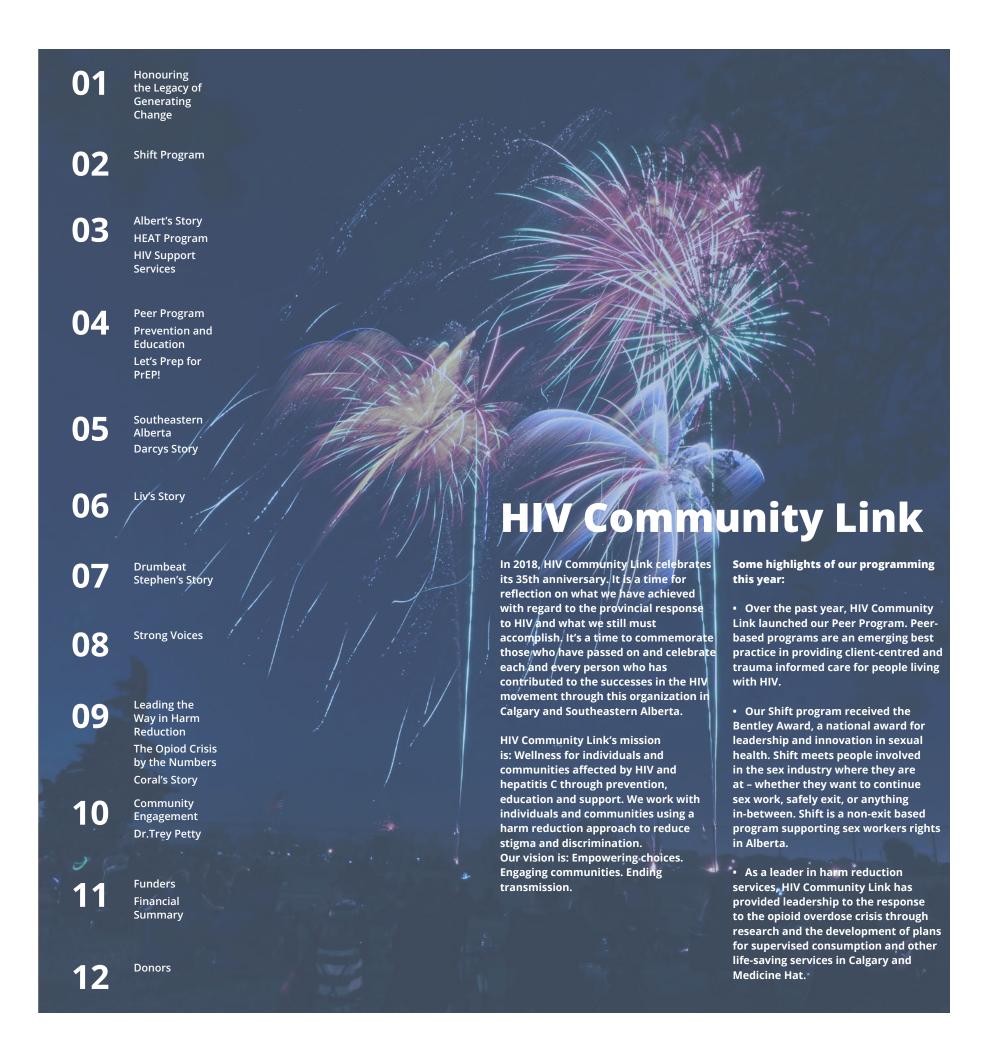


HIV COMMUNITY LINK 35th ANNIVERSARY



CELEBRATING 35 YEARS OF PREVENTION SUPPORT ADVOCACY





Honouring the Legacy of Generating Change

Letter from Leslie Hill, Executive Director and Alexandra De Freitas, Board Chair

The story of HIV Community Link began in 1983 when a group of remarkable individuals made it their mission to support those affected by the AIDS epidemic. First called the AIDS Calgary Awareness Association, the organization focused on advocating for people's rights. HIV Community Link quickly evolved and began holding support groups, community awareness events and fundraisers. Over the years, our incredible, dedicated community continued to expand the agency and services provided to people living with and at risk for HIV. Community events opened the door for the development of programming that would serve people living with HIV and AIDS and provided a platform for raising awareness about HIV and harm reduction.

As the illness has progressed, so has the organization. In 2013, AIDS Calgary Awareness Association changed our name to HIV Community Link, in order to better reflect the changing nature of the illness and our expansion of services to southeastern Alberta, in Medicine Hat and Brooks.

The services continue to focus on health promotion, increasing access to testing and prevention strategies and reducing the stigma associated with HIV. Based on a philosophy of harm reduction, we meet clients wherever they are on their journey, free of judgment, and with a goal to help improve their current situations. Today, we serve hundreds of people living with or at risk for HIV, helping them to better understand their diagnosis and experience improved wellness and quality of life. We build the capacity of thousands of service providers and professional allies that work with people living with HIV and populations

at greater risk for transmission. Our work is unique and built upon the strong foundation of prevention, support and advocacy put in place by a group of Calgarians back in the 1980s.

As we celebrate our 35th anniversary, we are honoured to be in the position of building on our legacy, by supporting our communities through another significant public health crisis. This year, we are expanding our harm reduction work to be able to support vulnerable Albertans in Calgary and Medicine Hat who are at risk of an opioid overdose. People who use drugs are at significant risk of HIV, hepatitis C and the current opioid overdose crisis means that they are also at significant risk of dying. Based on the research conducted through the Calgary and Medicine Hat Coalitions on Supervised Consumption, we are working to offer lifesaving supervised consumption services (SCS) in the two cities. The services will help to build trusting relationships between with people who use drugs, and studies demonstrate significant benefits including reductions in HIV and hepatitis C and in public drug use, inappropriate discarding of injection equipment, and reduction in public disorder. Most importantly, these necessary services will prevent the unnecessary deaths of so many people who are at risk of overdose.

Thank you Alberta for 35 years of building a remarkable community called HIV Community Link. With your support, we have been able to modify our response to the shifting needs of the broader community. Together, we will achieve our vision: Empowering choices. Engaging communities. Ending transmission.





A Harm Reduction and Rights Based Approach to Sex Work

Shift is a rights based program that welcomes all adults currently or previously involved in sex work. Shift is unique due to the fact that it employs a harm reduction approach; meeting clients where they are in their life journey and supporting them to reach their self-directed goals. We recognize sex work as a profession that many individuals choose and we seek to educate and advocate for safety in the sex work industry.

This year, Shift continued to grow, supporting 110 unique individuals. We are excited to have a newly created Advisory Committee from the sex work community to guide the program's development. In addition, our safety and harm reduction tool, the Bad Date Sheet, made its way to more individuals in the community with the ultimate goal to keep sex workers safe. We provide monthly events to support sex workers and help them to create social support networks; Shift also witnessed an increase in clients accessing these events. Another valuable development for Shift was the strengthened partnership with the Calgary Police Service (CPS) to present questions and inquiries to the police on behalf of our clients. These guestions have ranged from obtaining clarity on current laws and procedures to what CPS are doing to support sex workers' safety.

In December 2017, Shift was recognized nationally for its work in the community and was one of the Bentley Award of Excellence winners. Action Canada for Sexual Health and Rights awards the Helen

and Fred Bentley Awards of Excellence for Innovation and Leadership in the area of sexual health in Canada

We have been able to make over 3900 contacts through our outreach program this year, have distributed safer sex supplies throughout the city, and continue to build relationships with community partners. Our presentations, Shifting Perspectives, have also seen an increase in access and interest within Calgary. This presentation is attended by general public, service providers, sex workers, and other individuals wanting to learn about this industry and how to support sex workers.

1173

contacts with registered clients with a 26% increase in intakes

educational workshops to 550 attendees (190% increase over previous year)

97%

of clients surveyed report that Shift nelps improve their personal health emotional wellbeing, or safety

Albert's Story

"It feels really good to give back"

Albert was born in a family of six children. He lived in Montreal, completed a degree in Interior Design and studied at McGill and Concordia. He was 25 years old when he had some lymph nodes removed from his neck because the doctors thought he had cancer. As it turned out, Albert was HIV positive. It was the mid 80's and his family was dealing with a lot at the time, so Albert decided not to tell his parents and siblings. "When I got my diagnosis after three months of waiting for the results, they put me in front of the camera, because they wanted to see people's reaction to the news. I just wanted to know, so I agreed," says Albert.

The fear that people would find out would follow Albert for decades. He started volunteering at an AIDS hospice in Montreal, which was opened by two women who offered their home for free, as there was no government support for people at that time. There were four people in the hospice, and Albert wanted to know more about HIV. "I thank my survival on those people. I saw them going through horrible treatments. I saw them as guinea pigs and I saw them getting ten times the amount of medication they are giving to people now," he recalls.

During those years of fear and hiding his status, Albert fell in love. "My partner was and still is HIV negative. He knew about my status. I told him about three weeks into our relationship, and he told me he needed a couple of days to think. He came back and said 'Let's take it one day at a time," Albert remembers, adding that they separated when he was 40 years old.

But he still didn't disclose his HIV status to others. "I wouldn't tell my dentist because I was in fear he wouldn't see me anymore. One time, I had to see a doctor in Montreal and the doctor took sexual advantage of me. I think that was because I was HIV positive and I was in fear of not being able to get medical help. I've never talked about it. I never said anything, but I want to now. I think people should know that that we were not respected."

Albert moved to Vancouver and later to Calgary. Ten years after his HIV diagnosis, he became ill with lymphoma. "That was kind of ironic. You think you have something, but you don't, and then you actually do ten years later. The doctors explained that my immune system had to work extremely hard to keep me alive. Within three months of taking the medication, I was undetectable."

Albert is now 56 and a talented artist. He started painting and drawing after he was diagnosed with cancer. The side effects from medication and a severe reaction to radiation left him dealing with long-term chronic pain and mobility issues, so painting is somewhat difficult and takes time. Albert donates art to charities and has donated beautiful pieces of art to Splash of Red, a fundraiser in support of HIV Community Link, for the last couple of years.

He takes care of his sick mom and volunteers in the Peer Support program at HIV Community Link as a Peer Navigator. "I might struggle with health issues and chronic pain and stigma, but there are people out there struggling with drug addiction, abusive relationships and HIV. It was good to open my mind and not be judgmental. They are still people and they need help."

"I'm grateful to be part of this organization. It feels really good to give back"

Albert encourages everybody to support the work of HIV Community Link. "I'm grateful to be part of this organization. It feels really good to give back; I'm hoping I can reach somebody that needs help,"

HEAT Program

HIV Education & Awareness Today

The HEAT program focused on providing HIV, hepatitis C and other STI education, awareness and prevention services to gay, bisexual and other men who have sex with men (MSM).

The program's online and in-person trainings address holistic wellness needs related to HIV and STIs. Our HEAT Program Coordinator continues to engage with the MSM community at locations including the bathhouse, bars, businesses, special events and community-based organizations. An important component of this program is online outreach delivered through social media and web-based applications.

In 2017-2018, we experienced an increase

in people accessing the HIV and STI testing services offered at Goliaths on Friday evenings, in partnership with Safeworks. We also supported the MSM community by connecting people to physicians willing to prescribe PrEP. As a community organization we believe that strong collaborations and partnerships with local and national organizations can generate community change. This year we supported sexual health and gender diversity initiatives led by Alberta Health Services and the Calgary Police Service, and were involved in the Calgary Domestic Violence Collective and the National REACH Working Group.

43

testing clinics in partnership with Safeworks, reaching 205 individuals

184

online outreach sessions, 148 community outreach session

1654

contacts with gay, bisexual and other men who have sex with men

HIV Support Services

Non-judgemental, Compassionate, and Confidential Support

HIV Community Link provides non-judgmental, compassionate and confidential support for people living with or affected by HIV. We provide access to information, resources, and referrals.

Our Calgary office is the base from which we continue to provide valuable services to those living with or affected by HIV and hepatitis C. Within the framework of harm reduction and client-centred practice our team provides supportive counselling and connects clients to information, resources and referrals.

During the 2017-2018 year, HIV Support Services saw 137 unique registered clients and assisted them through a variety of services. The staff provided 650 referrals to community services and resources and 1535 food bags were distributed. One of the highlights for our clients are the social engagement activities offered. Client lunches, Coffee Connections and other events are highly accessed and HIV Community Link held 43 of these activities throughout the past year.

After accessing our programs, most clients reported an improvement in quality of life, increased access to social support, and assistance with achieving goals. Our team at Support Services strives to continue to see these results in our clients' lives in the future.

HIV Support Services numbers for this period include:

1326 contacts with registered clients

448 hours of direct, one-on-one service delivery

97% of clients surveyed report an improvement in quality of life and ability to cope

Peer Program

Support for Those Newly Diagnosed

In this period, we launched our Peer Program, tailored to the specific needs of the HIV community in Calgary. Peer programs are being highlighted and leading the way in most promising practices, client-centred trauma-informed care and finding a valuable place in the cascade of care for HIV and hepatitis C.

- Currently, we have four Peer Support volunteers who provide both groups and one-on-one peer support.
- Plus Friends: a safe and inclusive group for men living with HIV.
 This group aims to offer support and community in a social setting.
 Anything discussed at the meeting stays with the group.
- Positive Connections: a monthly peer support group, a nonjudgemental and safe place for women to share their stories, successes and challenges.
- Peer Navigation: we match people living with HIV with a trained Peer Navigator who is also living with HIV. They provide one-onone support and help to navigate complex systems and services for those who are newly diagnosed or would like some extra support.

If you are living with HIV and would like to be involved in peer support, join us.

Numbers for the Peer Program

peer support groups held

29 individuals accessed Peer Support Services

88% of Peer Volunteers report the program has made them feel better prepared to address some of the stigma around living with HIV



Preventionand Education

The Prevention and Education team continued its work to improve population-specific education, prevention, capacity building and community development programs. In this period, the team increased the number of trainings offered to the general public and service providers, providing 56 trainings to 851 allied professionals. These included post-secondary faculties and departments such as Social Work, Nursing, Medicine, Women's Studies and Anthropology, as well as certificate programs for Addictions Counselling and Working with Homeless Populations.

In the last year, a key focus for the Prevention and Education team

was policy and advocacy work.
HIV Community Link endorsed the
'Undetectable Equals Untransmittable'
(U=U) Consensus Statement issued by
the Prevention Access Campaign. The
consensus states that if you have an
undetectable viral load and you take
your medications correctly, there is
effectively no risk of transmitting HIV to
your sexual partners. In the same period,
we continued to raise awareness of PreExposure Prophylaxis (PrEP), a medication
that reduces the risk of HIV transmission,
and participated in strategic initiatives
such as the provincial 2016-2020 Alberta
Sexually Transmitted and Blood Borne
Infections (STBBI) Operational Strategy
and Action Plan

Let's Prep for PrEP!

By Andrea Carter, Director of Programs

PrEP is an HIV prevention method for people who do not have HIV but want to reduce their risk. This daily pill, when used consistently, has been shown to very effectively reduce the risk of HIV transmission. The World Health Organization recommends offering PrEP to all people who have a significant risk of HIV infection.

This year we continued our many years of strong advocacy and education initiatives to build awareness and accessibility of PrEP. Activities include: providing one-onone education and support to individuals who are considering PrEP or navigating the necessary health insurance systems and processes; providing training and consultation to General Practitioners and other health care professionals regarding PrEP access, clinical guidelines and recommendations; education for community partner organizations who work with people at high risk of HIV to understand their options; participation in CanPrEP, a national working group on PrEP knowledge exchange and advocacy; and various media stories and interviews about the game-changing impact of PrEP to prevent HIV transmission in our

This year, our Drumbeat Program was invited to coordinate implementation of the Access for All: Expanding HIV Prevention Project. This national project was developed to support local, front-line organizations throughout Canada to facilitate PrEP discussion forums among key populations with lower levels of PrEP awareness and uptake. The Drumbeat was one of seven organizations across Canada chosen to host the community discussion forums.

PrEP is covered by a limited number of private insurance companies, but not PrEP options to the market. This has significantly reduced the out-of-pocket cost for PrEP. However, the \$250-500 per month price-tag still means PrEP is not an option for many individuals at high risk. Over the last several months we have worked alongside key stakeholders in the STBBI Operational Strategy and Action Plan - PrEP Working Group. The we are hopeful that the Government of Alberta will make the decision to include PrEP in the public health insurance plans, thereby providing all Albertans at risk with access to this breakthrough HIV prevention technology.

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Southeastern Alberta : Confidential and Empathetic Support

HIV Community Link provides confidential and empathetic support to people living with with or affected by HIV and hepatitis C in Medicine Hat, Brooks and the surrounding area. Our staff receive the clients in a non-judgmental setting and help guide them to resources that will be of most use to them in their unique situation.

Medicine Hat

This year was an amazing growth year for the Medicine Hat Cares Centre. With a harm reduction centered approach, we saw an increase in individual contacts, as well as in time spent with people providing supportive counselling, outreach, and referrals to community services. Our connections with community partners have given us the opportunity to collaborate and connect our clients to services such as housing, medical care, opioid replacement therapies, and addiction recovery supports and treatment. Our safer injection and safer sex supplies distribution continue to be effective tools n preventing HIV and hepatitis C transmission, as well as other STIs.

Medicine Hat Cares numbers for the fiscal year:

481

registered clients with 91% of those surveyed reporting they receive services and support to help maintain their overall health

1,569

hours of direct one-on-one service delivery

237.206

needles distributed to people who use d<u>rugs</u>

Overdose Prevention Program

In Medicine Hat, HIV Community Link provides an overdose prevention program to help decrease the number of deaths in the area. We offer training to people who use drugs, friends, family, and service providers in order to reduce the risk of overdose, recognize the signs of an overdose and how to respond, and access life-saving naloxone kits.

542

take home naloxone kits distributed since the inception of the program in 2015

187

reports of kits used to respond to overdoses

15

service provider trainings delivered to 152 individuals

Take home naloxone kits have been provided to people who use drugs and those likely to witness an overdose in Medicine Hat and surrounding communities. The program has a focus on education, prevention of overdose and how to respond if an overdose occurs. Our goal is to reduce the number of overdoses and death by overdose in the community of Medicine Hat and surrounding areas.

Brooks

In Brooks, HIV Community Link has offered prevention and education services focused on a variety of topics including HIV, hepatitis C, harm reduction, stigma and discrimination. We have continued to foster connections with youth and immigrant serving organizations, while building community partnerships through facilitation of the Community Advisory Committee.

23

outreach and education sessions reaching 121 client contacts

80%

of the surveyed contacts report they are better prepared to talk about HIV testing and treatment with their peers

2

meetings of the Brooks Advisory Committee with participation from 10 community members and service provider partners

Darcy's Story

"Addiction can happen to anybody, and that's why education is so important"



Darcy has been coming to the Medicine Hat Cares Centre for years. He is 52 years old and left home when he was 14. His parents were separated and he had a tough childhood, moving from one foster home to another until the age of 10. He was living with his mother in Vancouver when he met his wife. "Life became pretty good." Darcy describes how he spent "the best years of his life" with her and their two children. They moved to Prince George in 1987 and it was there that he slowly got into using drugs. "I started to get into a little bit of trouble." He was growing marijuana on the side to make some extra money, and through working for some drug dealers tried hard drugs for the first time.

A few years later, Darcy moved to Medicine Hat to be near his father whose health was deteriorating. He wanted his boys to know their grandfather and his wife found a good job, so the family ended up staying in Medicine Hat.

Darcy was working as a mechanic and running his own shop. One day he met a neighbour who was involved in dealing cocaine. Darcy had used cocaine in Prince George, so slipped into some old habits

with the neighbour and started using again.
Soon after he was also dealing drugs, in the beginning to help a friend out, but quickly progressing to supporting his cocaine habit.
As Darcy went deeper and deeper into this business, he was eventually arrested, and lost everything.

Darcy spent five months in jail. When he was released and returned to his family, they had to downsize and move to a smaller house. "I slipped back into using and I served another two months in prison. During those months, my wife filed for a divorce, which really blew me off my feet. We were legally married for 23 years and were together for 27," Darcy recalls his devastation.

Over time, Darcy moved forward from these experiences. He met another woman, returned to his work as a mechanic, and life was good. Darcy had two more kids. "The day my little girl was born was absolutely the best day of my life, I always wanted a daughter," says Darcy.

But then, disaster struck again. Darcy had some serious injuries, and began taking medication to control his pain. His doctor prescribed OxyContin, a strong opioid, and he became dependent. As his tolerance increased, Darcy had difficulty controlling the pain. He describes: "One day, curiosity got the best of me because I was told injecting would help so much with pain," he said, so he started injecting his pills. His dependence progressed, and he was going through many OxyContin pills each day. He started buying them off the street.

Then, he tried heroin, and his use drug use escalated more and more. "The addiction accelerated, and this went on for two or three years. Someone told me that there was a needle exchange here in Medicine Hat at the Cares Centre. And here I was, one of the first clients for the centre. They helped at Christmas time, all kind of resources in the community, and just to talk to the people here was important."

Eventually, through conversation with the staff at the Medicine Hat Cares Centre, Darcy decided to reduce his drug use. He planned it for months, determined to access addiction treatment services. "At Christmas time last year, I decided that it was time for me to quit, and I did just that. December 27 was the last time when I ever touched a pill. I went to detox, and I am now on methadone as a replacement therapy." Darcy, now separated from his wife, is trying to regain access to his children. "I wouldn't be where I am without this place, without the people at Medicine Hat Cares Centre who continue to listen

to me and talk to me, and just be there for me, regardless. They were absolutely irreplaceable," says Darcy. He is a strong believer in harm reduction, and believes that supervised consumption services save lives and keep people safe. "In this day and age, you have no idea what you are about to inject. Doesn't matter how many times you had gotten the same thing from the same person. None of that matters. Drugs out there are so unsafe now."

"Addiction can happen to anybody"

Darcy now regularly carries naloxone, a medication that reverses the effects of an opioid overdose, and tries to convince people to learn how to use it. Naloxone reverses the effects of an opioid overdose. "Addiction can happen to anybody, and that's why education is so important. I've lost more friends than I could keep count of. I was trained here at the centre on how to use naloxone. Even though I've saved 9 people's lives, 2 of them twice, I wasn't able to save one of my closest friends. But I will continue to help and educate people."

Liv's Story

"Shift has been one of the best experiences of getting support"

Liv has three daughters. The youngest is 4 years old and the oldest is 11. Liv loves taking care of her children and has always considered them the most important thing in the world. She describes how she knew she was transgender, but put off her gender transition to support her children. "I was mid-transitioning when my partner of three months got pregnant. I chose the kid, I was 21. I've tried telling myself I'm a dude but it didn't work, so I started my transition

again 4 years ago." Liv believes she is now a much happier parent. "I remember when I told my daughters. I was never particularly masculine, I was trying to hide my femininity, but my kids could definitely tell, and they were not surprised when I told them. They were happy for me. It's been four years since then, and the only reason my ex has gotten used to calling me Liv and using she/her pronouns is because my kids yell at her every time she does otherwise".

Liv had struggled with depression since high school. "I heard this band, Against Me. They had an album on the radio called Transgender Dysphoria Blues. I knew I was trans, but had never heard the term "gender dysphoria" before, so I decided to research it a little bit, and after that I told myself, 'Oh my God, that is so totally me, so I need to go and see a psychologist or a psychiatrist to either find a way that I can shut this down and stay in my relationship, or see what I can do to transition'," she remembers. Liv talks about how important it was for her to get support through her transition, and is happy for her "small victories" in the last couple of years: when she took her partner to court to split custody, and the judge didn't know who the biological mother was, or when she realized that most women in the housing program she is in did not know she was transgender. Before her transition, Liv went from job to job just to make money for her family, but now is thinking of going back to school to become a social worker. "I take care of my kids from 7am to 7pm, and a graveyard shift is scary for me as a visible trans woman. I want to volunteer for the Distress Centre and apply to school."

Liv is happy where she is now, but her life was different two years ago, when she met someone online and they started dating. It was fun in the beginning, she says. They drank a lot and went dancing all the time, and then after a month that person proposed to her. Liv's kids were in California with their biological mother, so Liv felt lonely. When she lost her job her new partner suggested she could make money as a sex worker. "I had always wanted to do modelling and they convinced me that this wasn't going to be that much different. It was a night of a lot of drinking when I decided to post an ad. The money was good. I didn't really realize I was actually trafficked; I was giving a lot of my money to this partner, which made it even more difficult to pay my child support. My partner starting drinking more and more, because they had more money from me."

Liv described how she found herself trapped in sex work and an abusive

relationship. "Every client I ever had, there never really was any joy to it, and then they started getting aggressive." Liv recounted how she was sexually assaulted many times by her clients and friends of her partner, and how she felt alone. "I was reaching out for help from friends and family, but my family won't have anything to do with me because I did sex work. Most of my friends didn't talk to me anymore."

After eight months of sex work, Liv had a very traumatizing experience with a client, and realized she needed to get out. Luckily, Liv was still in touch with her father, who had previously worked at HIV Community Link. The next morning, Liv got in touch with Shift and asked a friend to help her move out. "It was extreme desperation that drew me to here and got me out of that house. The Shift worker came with me and advocated for me at Alberta Works and she spoke to Mary Dover House, so I could get into their housing program. Shift helped me turn my life around. The only reason I eat is because I get food from the Food Bank on Tuesdays here, otherwise I would have nothing. It's hugely helpful. It's been really nice to be able to come here, relate with the other clients and always have somebody to talk to. It's been one of the best experiences of getting support in my life. If I hadn't come here, I would probably still be in that house doing sex work, getting abused."

After getting her life back, Liv started to think more about the lack of understanding for trans people. She would like to be able to help other women like her. "We are just as much people as anybody else, and we have feelings. Everybody has their own story and the best thing you can do if you are not sure about something, as with anything, is just ask. I want the world to understand that we are just people. Share that you know a trans persons and stand up for that person."





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Drumbeat

Tackling Stigma and Removing Barriers to Accessing Resources

Drumbeat helps tackle stigma and remove barriers to accessing resources, addressing HIV in the African, Caribbean and Black (ACB) communities, and achieving better access to HIV testing and support services. In this period, Drumbeat held a PrEP Access forum that brought together community leaders, people living with HIV, serodiscordant couples and health professionals who work with ACB communities. Drumbeat also provided peer support activities for ACB individuals who are affected by HIV. In the African Kitchen and Under the Mango Tree are two of these activities geared towards providing prevention information, reducing isolation and building resiliency amongst ACB communities affected by HIV.

Drumbeat uses a community development approach to building the capacity of those serving ACB communities. We provide HIV education to ACB associations, faith groups and churches, stores and barbershops, and also to frontline staff in health care settings and immigrant serving agencies, focusing on cultural awareness training and developing service provider competencies.

Drumbeat continues to strengthen our role as a regional hub for the Canadian HIV/ AIDS Black, African and Caribbean Network (CHABAC).

Drumbeat numbers:

872

contacts with people in the African, Caribbean and Black communities

trainings and workshops reaching 569 individuals

99%

of training participants surveyed reported increased intention and capacity to reduce risk factors



Did You Know?

There have been approximately 80,500 HIV diagnoses in Canada, and Alberta has the 3rd highest national rate of new HIV diagnoses, according to the 2014 data. 1 in 5 people living with HIV don't know they

While we have come so far in the treatment of HIV, there remains stigma and fear associated with the illness and the behaviours associated with it. It impacts perception of people living with HIV, willingness to get tested, and even access to life saving treatment.

"Stigma remains the single most important barrier to public action. It is a main reason why too many people are afraid to see a doctor to determine whether they have the disease, or to seek treatment if so. It helps make AIDS the silent killer, because people fear the social disgrace of speaking about it, or taking easily available precautions. Stigma is a chief reason why the AIDS epidemic continues to devastate societies around the world."

~ Former United Nations Secretary-General, Ban Ki Moon

Stephen's

from a grassroots organization to what it is today

35 years ago. Stephen was one of the people sitting around a kitchen table discussing the possibility of creating an AIDS support group in Calgary. They named it AIDS Calgary, and it was the grassroots organization that would later become HIV Community Link. There were a few other people in that old, two-storey house in the Beltline: Bob Humphries, Damien Pepper, Jim Lang. AIDS was already affecting the gay communities in North America, with the ones in San Francisco and New York City being decimated. The virus had only recently been identified as being sexually-transmitted, after months of speculation. Calgary hadn't had its first diagnosed case yet.

When AIDS Calgary moved into its first office, the organization was housed in two cramped rooms above what was then called 'Dick's', a gay club in the old Model Milk building on 17th Avenue, with a bathhouse down in the basement. The offices themselves were either freezing cold or sweating hot, and the volunteers were constantly calling the bathhouse to please turn up the heat, or to please turn it down.

This small and mighty group of people set up a phone line and designed training manuals for volunteers. The office quickly filled up with safer sex pamphlets, condoms and lube. "My background was with Gay Lines, so I knew how to get a

phone thing going and how to record the calls to keep track of them with log sheets. I remember getting the same calls over and over again: 'Can I get it from sharing a coffee cup? Can I get it if someone coughs on me? Toilet seats?' We would also get calls saying we should all die and bomb threats being called in. We didn't publicize where the office was for the express purpose that we didn't know if that was safe to do. It was highly controversial. How dare we have an AIDS organization in Calgary?" Stephen adds.

It took them years to find funders for the organization, but in the beginning they managed to do the important work with support from gay clubs and the Imperial Sovereign Court of the Chinook Arch. "Funding came from the community. The drag queens would put on shows to raise money for us, so would get a couple of hundred bucks. \$200 kept our rent paid, so it was a real struggle for us for the first years until various things like United Way and government funding kicked in. Bob and Damien were putting their own money into it. They didn't make a big deal about it, but I know Bob paid the rent sometimes, paid the phone bill sometimes, and they didn't have a lot of money themselves." Not long after they started the organization, the AIDS crisis started affecting the gay community in Calgary. The group started losing friends to the epidemic. "Over the years, I lost maybe two or three friendship

circles of people. It went quite quickly between diagnosis and death.

It wasn't unusual to attend two or three funerals or memorials in a month, and it got to the point that those were social times. It's like you don't see your family except at weddings, funerals and bar mitzvahs, and it was kind of the same thing. They were sad, but they were more celebrations of life. I look back and think of the people I have lost and were close to me, and I still have dreams about some of them and they are still with me in some way," Stephen says.

Jim, Damien and Bob passed away, and Stephen is grateful for the time they had together. "Im was quite a character; he was born about 30 years too late. He was Roman Catholic, but he incorporated Native spirituality, Radical Faeries, Pagan, and meditation into it all. He often carried an eagle feather with him. Jim would have fit right in with the hippy movement of the 1960's. He was also involved in the Faithful Companions of Jesus, the Sacred Heart Convent on 18th Avenue. Jim used to work reception for them and they got to know him quite well and absolutely adored him. So when he died, the bishop wouldn't hold a mass for him because he was gay, so the sisters held one for him. One of them, Sister Una Conran, who was very involved with AIDS Calgary and was close to Jim, got up during the service. Sister Una quoted Jim as saying that if St. Peter wouldn't let any of us through the main Pearly Gates, all we had to do was come around back and Jim would open those gates right up!

Stephen was politically active and, at that time, his main focus was to get sexual orientation included in human rights legislation in the province. There was a lot of discrimination in regards to housing and employment. There was just nowhere you could go to get any sort of justice if you were discriminated against.

"..who amongst us could have known the fight would go on for 35 years?"

Stephen believes those early days made a definite impact on the community, saved lives and offered critical support to those affected. He later worked for AIDS Calgary as the Coordinator of Volunteer Services in 1990-1991, when the AIDS Quilt was being displayed in Calgary, a memorial to and celebration of the lives of people lost to the AIDS pandemic. "It doesn't seem like 35 years since we were sitting around that kitchen table on 12th Ave at Bob and Damien's house drinking far too much coffee and smoking too many cigarettes and trying to hammer out what this organization would be like. Who amongst us could have known the fight would go on for 35 years? Bob, Damien, Jim and the others never lived to see what AIDS Calgary became, but I like to think they know."



Strong : The Strong Voices Program is a Culturally Informed Outreach and Support Program

The Strong Voices program prevents and reduces HIV-related harms by providing diverse Indigenous populations access to a continuum of healing practices in a timely, holistic, and culturally safe manner. Program participants' movement along the path of well-being is identified through indicators including cultural identity and access to traditional practice.

Since its beginnings, Strong Voices has been guided and led by and for the local community through a dedicated and passionate Volunteer Advisory Committee. In 2017-2018, Strong Voices focused on client-centred support and outreachbased case management. Strong Voices worked with 51 clients this year, addressing individualized needs such as crisis support, housing, employment, access to treatment and health services, and healthy relationships.

During this period, Strong Voices organized 11 Sweatlodge Ceremonies. Strong Voices also hosted a Community BBQ in June of 2018, with over 100 individuals from the community in attendance.

In partnership with Bow Valley College's Addictions Diploma Program, Strong Voices has hosted 6 practicum students in this period, helping to build capacity of future service providers. Strong Voices also provided HIV-related educational trainings to Sunrise Native Addictions Services, Siksika Health Services and the Southern Alberta HIV Clinic.

Strong Voices numbers:

51

registered clients and 1530 contacts (32% increase)

237

community outreach sessions

58%

of participants report an increased sense of cultural belonging and support





Leading the Way in Harm Reduction

In late 2016, HIV Community Link was asked by the Alberta government to lead two research-based needs assessments to look at the wants, needs and preferences of people who use substances in Calgary and Medicine Hat. As part of the provincial strategy to address the escalating opioid crisis, the research would help to inform the development of supervised consumption services (SCS) in both communities.

Over the spring and summer of 2017, we worked collaboratively with stakeholders from Alberta Health Services, multiple levels of government, law enforcement and community-based agencies that serve our clients to develop coalitions in Calgary and Medicine Hat. The Calgary Coalition on Supervised Consumption and the Medicine Hat Coalition on Supervised Consumption then oversaw the completion of the needs assessment project in both communities. Led by Dr. Katrina Milaney from the Cumming School of Medicine at the University of Calgary, our research gave us invaluable insight into what our clients want and need, and the overwhelming stigma they face.

The research and data collection has positioned us to work with our partners and provincial and federal governments to build and operationalize SCS in Calgary and Medicine Hat.

With 35 years of providing non-judgmental support for those living with HIV and working extensively in harm reduction, this next phase in our organizational evolution will bring with it rapid growth and allow us to build on our already strong foundation of knowledge and expertise. These programs will help Albertans access the services they need and help treat every person with the dignity and respect they deserve.

Supervised consumption services are an evidence-based public health practice which are proven to save lives and to reduce the harms associated with drug use. In Canada, these programs are regulated by the federal government and typically embedded in existing community-based organizations. They offer clients a safe space to use their substances while being monitored by a team of health care professionals, who can respond in case of an overdose. SCS also provide clients with harm reduction supplies and education on safer forms of substance use.

When clients access an SCS they are also provided support for other needs, including emergent health issues, housing, food security, employment and even things as simple as provincial identification cards. With a focus on building relationships with clients over the short and long term, SCS teams also help with referrals to external health care providers including mental health and addiction programs, primary care and opioid replacement therapy.

The Opioid Crisis By the **Numbers**

687

Albertans died by accidental opioid overdose in 2017

In Calgary:

- The Calgary Zone continues to see the most opioid related overdose deaths in the province; 15.8 per 100,000 compared to the provincial average of 13.1 per 100,000 in 2017
- Calgary EMS responded to 1,698 opioid related calls for service in 2017
- 370 people who use substances participated in our research; 24% said they had overdosed within the last six
- · 18% of injection drug users said they had used a needle that had already been used by someone else;
- 14% said they had lent a used syringe

In Medicine Hat:

- · The rate of overdose in Medicine Hat more than doubled from 4.4 2016 to 10.2 per 100,000 in 2017.
- · Emergency department visits for opioid poisoning in Medicine Hat increased by 62% between 2015
- 185 people who use substances participated in our research; 73% report using drugs 3-4 times per day, 62% reported using injection drugs, and 93% reported using drugs though modes other than injecting. Of these, the most common drug was crystal meth, followed by opioids including hydromorphone, heroin and morphine.

Coral's Story

I don't have HIV In my blood, but i do on my heart"

Coral Bush retired at the end of March 2018, after 17 years spent at HIV Community Link. She had volunteered for another two years, before she was offered the receptionist position. "It was in January, 19 years ago, there was an ad in my community newspaper that AIDS Calgary was looking for a receptionist. Sue, the Volunteer Coordinator, who later became the Executive Director, handed me a volunteer application. I was asked if I felt comfortable around gay people, people who had chosen different lifestyle. There were a lot of condoms around. I said 'Sure, why not?'"

Little did Coral know that this would become the job of her life. She had a diploma in Early Childhood Education from Mount Royal and had worked for the Calgary Herald's daycare. Before starting her job at AIDS Calgary, Coral had been on disability for 10 years because of a heart condition. "I live with a long-term illness myself, so I think I can relate to clients. You have to enjoy every day that you have," Coral says, adding that she has been lucky to have found the agency. "It is an amazing place. It has changed so many people's lives. The people we have been able to support, the education that we put out there. After every staff meeting, I sit back and tell myself: 'Oh my God, I work with so many smart people that do so much,' I feel overwhelmed sometimes."

Coral remembers the stigma and discrimination that clients were facing every day in a time when AIDS was a frequent diagnosis. "Some clients didn't like to be seen coming through our doors", she adds with sadness. "We used to put a candle out with a little poem every time we lost a client. And one time, for our Friday lunch, our clients came in and there were three candles out. It was devastating, I will never forget it. We would count them all on World AIDS Day, when our staff members had a list with names of people we had lost that year. And every one of us had 15 or 20 people on their list. We were losing over 100 people a year."

So much has changed in the time Coral has been with the organization. Treatments have gotten better, people are living normal, healthy lives, and the things she have learned have had a lasting impact on Coral. "This place has changed completely the way I look at the world. I very rarely judge people, you never know, they could be your child, your brother, or even yourself," says Coral, who believes everybody needs a chance, and we need to offer people as many chances as we can. "It made me realize life is not only about sunshine and flowers. There is a lot of pain out there, a lot of bad things happen to people." But Coral always had a smile and something nice to say to clients, because "It's so wonderful when you make a breakthrough with a client. We should never give up on people."

She often talks about her first team leader, Garth, who taught her about HIV and how to work with clients. Garth pushed her out of her comfort zone, he was so good with the clients, so compassionate, Coral adds. Since then, she has done "just about everything" in this agency, from presentations, handling petty cash, ordering supplies for the agency, to being the first point of contact for people who come in for support. "Once, there was a person involved in sex work who came in and she had been sexually assaulted, and I talked to her because she didn't want to talk to any male staff. If there are things that need to be done, I just do them: wash the dishes, sweep the floor. It is important for the clients to see this is a friendly, safe place for them and that they are welcome here. Some come here as family, I've known them for so long."

She considers HIV Community Link her family. "I don't have HIV in my blood, but I do on my heart. I care about all clients, and I am sad when people are ignorant and have stigma about HIV, addiction and metal health," Coral adds. She encourages everybody to get educated on things they may not quite understand.

Now that she's retired. Coral wants to spend more time with her son, her mother and her wonderful husband Bob who she's been married to for 46 years. Coral adores her 11-year-old grandson, and every client and staff member knows he's her "pride and joy". Bob, who has been a long-time volunteer, wakes up extra early on Wednesdays with Coral to come and help out, "There is no cure for HIV, our numbers are growing, and we're serving more and more people. Get educated and consider supporting this organization. It could change your perspective completely. Don't go pointing and judging people, just have an open heart!"

Community **Engagement**

HIV Community Link continues to attract a dedicated and vibrant group of volunteers, who provide a pillar of support to our programs and fundraising initiatives. Our volunteer group has increased in number, and we have continued our partnerships Cause, Youth Central and the Chrysali Society. This year, we were able to that our volunteers through an appreciation right, providing special shout-outs to hose who are always the first to assist: with events and important activities. We have also formed a unique partnership with a local flower wholesaler, where volunteers are able to gather and build oouguets, which are then provided to our clients, who are so excited to receive flowers to brighten their days!

support of our Advisory Committees, in ddition to our Board of Directors who provide governance and vision to the organization. We are eternally grateful to all the volunteers who support HIV Community Link in various capacities, and look forward to adding more fresh nvolved with the organization.

We also want to say thank to the people iving with HIV that are involved in our olunteer program and are always illing to help out with our events, sharing their stories and supporting our awareness work.

> 218 volunteers in total

45

2,058 volunteering hours

Communications and Media Relations

This year, HIV Community Link continued to raise awareness of the issues surrounding HIV and hepatitis C through active engagement with media and media partnerships for our signature events. Local media outlets covered our leadership role in HIV, hepatitis C, sex work and overdose prevention, in Calgary and across Southeastern Alberta.

2017 meant new marketing materials and a new website for the agency, while social media saw a significant growth for the second year in a row. HIV Community Link launched two social marketing campaigns as a result of our pro-bono partnerships in to Teresa Leung (Art Director), Sean time and talents.

media interviews and articles

7,300

blog entries and 25 newsletters

Events

We have received incredible community support for our signature events this year. HIV Community Link's events were attended by members of the governme general public, donors and sponsors, while wonderful volunteers supported our efforts to raise awareness and fund for our cause. Thank you for all you did t help us create success through our ever

- Splash of Red 2017 raised \$54,222 and gathered close to 200 guests
- Scotiabank AIDS Walk & Run raised \$75,723 and had over 250 participants
- Community Voices saw Calgary Men's Choir and the BarberEllas raising their voices together in celebration of World AIDS Day

Dr. Trey Petty

'HIV can affect anyone, and everyone deserves to receive the best care"

Dr. Petty has been providing compassion ate dental care since 1984. The 80's AIDS epidemic found him working in New York, where he received additional training for dealing with medically complex patients. "I happen to be American, but still a nice guy, he jokes. "Our hospital in NY was actually the first hospital on the East Coast that was openly welcoming people with HIV. I was one of the first dentists involved with providing oral health care to people that where suffering horribly from this condididn't even know it was a virus back then. "Because of the hesitation of so many of my colleagues to treat people that deserved care just as much of anyone else, we used to call it FRAIDS. Afraid of AIDS." It was all wrapped up in homophobia, the fear of the unknown, Dr. Petty believes, saying that he is lucky he was able to provide care to the people that, at the time, no one else wanted out any financial barriers for the patient. to see. "We used to dress up in space suits. We used to drape the room in plastic because they honestly did not know what they were dealing with back then."

After six years of working in New York, Dr. Petty moved to Canada. The Government of Alberta was actually looking for a dentist with his particular training to come to Calgary and set up a dental clinic at the Foothills Hospital. "They could not find anybody else willing to see somebody living with HIV, but the profile of people that we saw at the clinic was quite broad, because we didn't believe in segregating the patients. My early involvement in doing this was very close to my heart and I had already decided that I wanted to do this in my career," he says.

Dr. Petty has practiced in Calgary since 1989; he has served as Head of Dentistry and Oral Medicine at Foothills Medical Centre; as Regional Division Chief, Dentistry

and Oral Medicine for the Calgary Health Region and Tom Baker Cancer Centre. He has led his own private practice at Holy Cross Hospital Centre since 2006. He continues to have patients with HIV, welcomed by a well trained staff. "We are honoured to be involved as an AIDS Walk sponsor. HIV is still relevant, it is still important; we still have to have awareness walks, people like myself to raise our hands and say this is not a problem for us. We have a lot of patients living with HIV; a chart count would show more than 600 patients in Southern Alberta. A lot of the work we do with them is assessment, very specific concerns rather than just looking after their general dental care", he explains.

"Even in my small, funny little field here, there's still stigma"

Dr. Trey often jokes with his wife that when he dies, she has to explain in his obituary why he died. "I ran into people I've known for 20 years and they are surprised I am alive and not dead. Why would I do this unless I had HIV? The stigma is still there and tion," remembers Dr. Petty, adding that they very real. Even in my small, funny little field here, there's still stigma. It hasn't surprised me, but it blows me away."

> Dr. Trey Petty is happy that people living with HIV can qualify for the Assured Income for the Severely Handicapped (AISH). If somebody on AISH comes to his clinic, he knows he can provide excellent care with-"We are lucky to live in a world that is more accepting of people no matter what their condition might be. HIV can affect anyone and everyone deserves to receive the best care, to be treated like a human being," says Dr. Petty.



10

Funders

Alberta Community HIV Fund

Alberta Culture and Tourism

Alberta Health

Canada Summer Jobs

The Calgary **Foundation**

The City of Calgary, Crime **Prevention Investment Plan**

The City of Calgary, Emergency **Resiliency Fund**

The City of Calgary, Family and Community **Support Services**

Public Health Agency of Canada

United Way of Calgary and Area

Viiv Healthcare

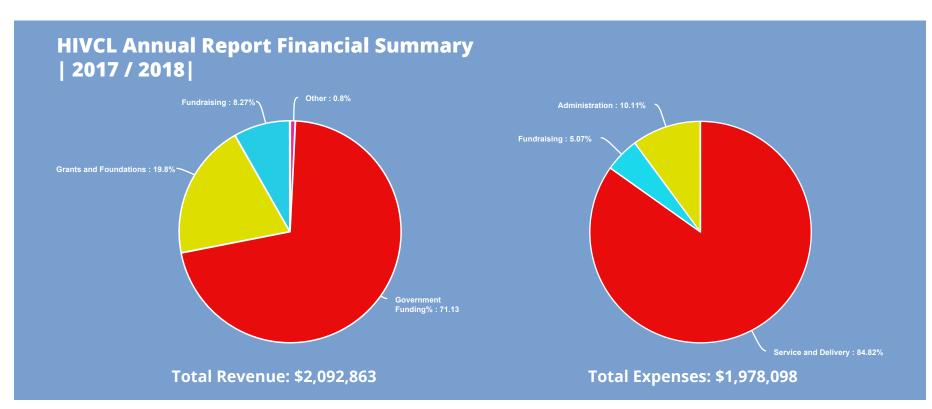
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