

StreetHealth

ANNUAL REPORT 2006-2007



Street Health is an innovative, community-based health care organization providing services to address a wide range of physical, mental and emotional needs in those who are homeless, poor and socially marginalized. Support, education and advocacy are key components of our services.

A Message from the Board Chair

Once again, I would like to take this opportunity to personally thank each of our donors – we could not do it without your generous support. And a special word of thanks to the dedicated Street Health staff – your commitment is very much appreciated by the Board.

The next few years will be a time of challenge and opportunity for Street Health. The Government of Ontario has created a series of Local Health Integration Networks (LHINs), which are mandated to enable local communities to make decisions about their health systems, and to better coordinate health care service delivery to make it easier for people to access health care. Street Health is now a member of the Central Toronto LHIN. We look forward to any initiatives taken by the Central Toronto LHIN to improve health care accessibility for our Street Health clients – improved access for homeless and under-housed people is urgently needed.



Marguerite Ethier
Board Chair

A Message from the Executive Director

2006/07 has been another inspired and dynamic year at Street Health. Although it's impossible to relate all of the interesting endeavours that have taken place this year, two initiatives in particular stand out for me. On the research front this year we focused primarily on conducting a survey of over 350 homeless people looking at their health status and access to the health care system – a follow up to the original Street Health Report of 15 years ago. We are anxiously awaiting the results of the survey and the launch of the Street Health Report 2007, in September. Also, the federally funded peer initiative, the Crack Users Project, utilized informal discussions as well as formal workshops to train people to work with their peers on issues related to drug use (see article "Working Together – Street Health Peer Projects"). By all accounts the project has been a huge success.

It was with mixed feelings that I saw one of our registered nurses of 12 years, Barb Craig, retire in March. We'll miss Barb, but the new nursing team is full of energy and enthusiasm and ready to take on where Barb and other long time nurses have left off.

The staff and Board of Directors of Street Health should be congratulated again for all of the hard work and commitment they have shown throughout the year. The result has been an organization that is stronger and more responsive to our client's needs than ever. It is with this in mind that I look forward with great anticipation to next year and all the challenges and opportunities it may bring.



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Executive Director

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OUR PROGRAMS & SERVICES

Nursing Program

Staff nurses work with volunteer RNs to operate scheduled clinics in drop in centres and shelters. Nursing outreach is designed to locate people living on the street who tend not to go to locations where scheduled clinics take place. Our nurses advocate for clients on an individual basis and participate in systemic advocacy. Mentoring of nursing and medical students and providing educational sessions for community groups and schools are important components of our program.

Community Mental Health Program

For clients who have mental health problems we provide intensive support, including crisis intervention and case management. Often, symptoms of an individual's illness may lead to actions that can get them in trouble with the law. We continue to advocate for our clients on an individual and systemic basis to try to address the many issues associated with mental illness and poverty.



Harm Reduction Program

The street outreach team provides clients with support, referrals and HIV/AIDS prevention information, including safer drug use and safer sex information. The program includes a needle exchange, safer crack kit distribution and an evening outreach service. Peer training and development are also an important component of the program.

Hepatitis C Support

The Hepatitis C project provides support, referrals and prevention education. Clients are also offered testing and vaccinations for both Hepatitis A and B. The project includes a weekly support group to provide participants with the opportunity to learn more about Hepatitis C. Education and advocacy are important components of the project.

The Crack Users Project (CUP)

The Crack Users Project: Focusing on Strengths and Building a Strong Community, is a community capacity building initiative with the goal of reducing the harms associated with the use of crack cocaine. The project includes three weekly drop-ins, a health-care clinic with a Nurse Practitioner, housing help, a Community Support Worker and peer training opportunities.

Partners for Access to Identification (PAID)

The PAID project staff had over 13,000 client interactions, and processed over 9,000 pieces of identification through a variety of clinic locations across Toronto.

I.D. Replacement – Access to Health Cards for the Homeless (Access)

Without identification people cannot access basic services including: health care, welfare, shelters and food banks; nor can they apply for jobs, secure housing, open a bank account or apply for other identification. Access was established to reduce the barriers homeless people face in accessing health cards. Access holds identification replacement clinics once per month where they issue Ontario Health Cards and assist with the application process for other necessary pieces of identification for homeless people.

ID Safe

ID Safe is an innovative response to the profound difficulties experienced by people who live without secure housing. ID Safe offers a small level of security by storing important identification documents for homeless people. Due to the nature of street life – sleeping on the streets, communally in shelters or in temporary accommodation, homeless people often find their identification gets lost or stolen, as they have no secure place to store possessions.

Research

Research is a vital component of our programs because it allows us to better understand the changing needs of the communities we serve. The 2007 Street Health Report, which documents the health status and barriers faced by homeless people in accessing health care, will be launched in September 2007.



Photovoice Project

Day In The Life "Photovoice" Project in collaboration with Professor Nancy Halifax and Fred Yurichuk continued to flourish. Homeless community members told stories and displayed photographs about their daily life experiences on the street at events and venues across Toronto, educating the public and policy-makers about the issues that matter to the homeless community.

Clothing And Sleeping Bag Distribution

Clean donated clothing, as well as cleaned sleeping bags, are distributed.

Mail Service

Homeless people by definition lack the postal address required to qualify for certain services. Street Health will provide a mailing address and handles a person's mail.



WORKING TOGETHER – STREET HEALTH'S PEER PROJECTS

Street Health is on the cutting edge of peer involvement in our programs and education efforts. We believe that in order to provide the most appropriate, sustainable and useful services, we must first consult and involve our homeless clients. We have always ensured that the communities we serve have a voice and a meaningful presence, both in our programs and our decision making processes. This includes participation on the board of directors, focus groups where members of the community can voice their views on community issues or the agency itself, social action activities such as demonstrations, and volunteer work. Over 21 years ago the very first nursing clinic was created as a result of a consultation with the homeless community and we continue this innovative tradition today.

One the most intensive and rewarding forms of community involvement, for both the community and the agency, is peer work. Street Health has experienced a tremendous amount of success with peer-based initiatives. Our attendance and success rates are among the best of any homelessness agency in the city of Toronto. Peer work can include many types of initiatives such as outreach education and research. Peer based programs are invaluable and



Congratulations to the Crack User's Project participants on their incredible success over the past year. Shown here is the first group of 'Cracktologists' to complete the Peer Outreach Worker training program.

enormously effective in reaching, supporting and assisting some of the most marginalized people in the community. Peer projects are valuable because they benefit not only the agency, but also the individual and community as a whole. Agencies are better able to reach their target populations, participants are given job training and employment opportunities, and the community is given a role-model and perhaps a brighter future. Clients state that peers have more "credit", they are trusted more than non-peers and the information provided by peers is viewed as more accurate and authentic.

Peer workers were first introduced to Street Health through the AIDS Prevention Outreach Project. Peers have worked with this project as street outreach workers and HIV/AIDS prevention and harm reduction educators. Evaluations

have revealed that the peer element continues to be the most highly valued aspect of the projects. Clients have commented that "...peers understand what it's like to be on the street. They are giving advice from personal experience. Others won't understand."

Over the past year Street Health has seen the success of several new peer-based projects, including the Crack User's Project, the Hepatitis C Speaker's Bureau and the Peer Research Project for the Street Health Report.

The Crack Users Project (CUP) is a community capacity building initiative with the goal of reducing the harms associated with the use of crack cocaine in southeast downtown Toronto. Peer involvement is at the hallmark of this project with over 20 community members trained in outreach and education. Peer outreach workers provide harm reduction supplies, support and education to peers on the streets, while peer speakers educate their peers and service providers about crack use. Recently, one of the project participants, Sandy Alcott, attended the International Harm Reduction Conference in Poland along with several Street Health staff. Sandy presented the CUP project to a large audience, which received rave reviews.

The Speaker's Bureau Project provides another excellent example of how community members and the agency can benefit from the peer model. This project provided in-depth Hepatitis C and public speaking training to 10 community members living with Hepatitis C. The peers not only learned a great deal about how to manage the disease and their own health, but also learned how to teach their peers and others about preventing the spread of Hepatitis C. A highlight for the Speaker's Bureau this year was a two day Hepatitis C Train-the-Trainer event. The peers presented on various panels to approximately 100 service providers. The peer element of the training was mentioned several times in evaluations as the most useful, interesting and inspiring aspect of the training.

In October 2006, Street Health began our first research project that involved peer researchers. The Street Health Survey project, a survey about homeless people's health, recruited and trained a team of 15 Peer Researchers with lived experience of homelessness and poverty. These Peer Researchers participated in extensive training, conducted hour-long interviews with over 350 homeless men and women in shelters and meal programs in Toronto and participated in the analysis of findings and crafting the report. With the help of these peer participants the report will be launched in September 2007.

Using a peer researcher model had a lot of benefits, both to the project and to the Peer Researchers who were involved. Peer involvement added to the quality of our data, because often survey participants were more likely to open up to someone who knew where they were "coming from". Having peers involved in our data analysis also helped us to make sure that our study is relevant to the homeless community. As one Peer Researcher said, "we are the backbone of the whole thing – if we didn't do what we did, it wouldn't have been done." (cont'd)

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Peer Researchers on our team told us that being involved had a strong positive impact on them as individuals as well. Being involved in the project boosted the



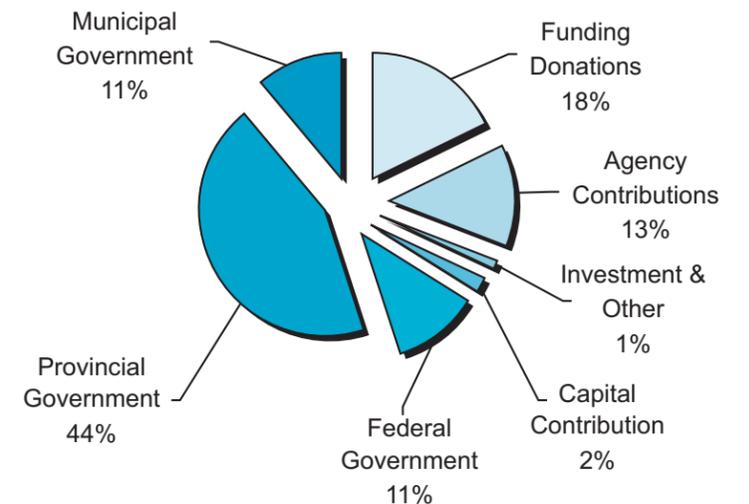
level of respect they got in the community: "...people are looking up to me..." "...we got respect walking down the street...". Many Peer Researchers told us that the experience of interviewing homeless people was 'eye opening', providing them with new insight and awareness about the issue and people's unique experiences of homelessness: "I learned not to judge or lump people too much – my preconceived notions of the people was shaken...". Peers involved in the project gained valuable skills and experiences, made a meaningful contribution to the community, participated in regular constructive activities, increased their confidence, and gained valuable experience in the work force. "At first I didn't believe in myself, didn't know if I could do it..." "I improved my reading and writing..." "I learned something about myself." "I was excited going in there and felt great afterwards." "...now I'm looking for other work and I'm now involved in other community work and it's great..." The money peer researchers earned through their work on the project helped to supplement incomes and also acted as recognition of the valuable work they provided.

Street Health will continue to look for new and innovative ways to involve our clients in the work that we do. Through peer based initiatives we can provide strong, high quality and sustainable programs for the communities we serve.

Fundraising 2006-2007

Although fundraising income in Toronto has become increasingly more difficult to obtain, our revenue continues to stay strong, proving the endless generosity of our donors and friends. Fundraising initiatives are carried out as a result of extensive long-term planning, in order to maximize our capacity for receiving charitable dollars. If you are interested in hearing more about our efforts, please contact us! Thank you everyone for your continued support!

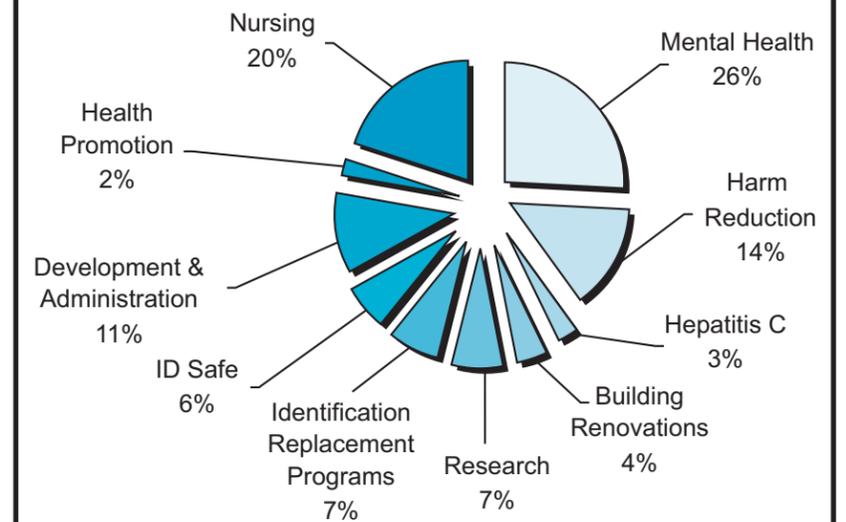
Street Health Revenue 2006-2007



Finance

Street Health is a fiscally responsible organization. Each dollar is accounted for in order to ensure that we are providing the highest level of support and services possible to our clients. We have some stable core funding, however, donations and grants allow us to add new and innovative services for our homeless clients, while continuing to provide high quality care.

Program Expenditures 2006-2007



THE 2007 STREET HEALTH REPORT: COMING SOON

In 1992 Street Health published a ground-breaking piece of research, the **Street Health Report**, which documented the health status and the barriers faced by homeless people in accessing health care. Several of the policy recommendations made in the report were implemented, resulting in improved conditions for homeless people. The 1992 report continues to be cited by academics and community groups today.

Important social and political changes have occurred since the **Street Health Report** was first released, including government cutbacks to social programs and new health issues which have had a dramatic impact on the health of homeless people. There is a serious lack of up-to-date information on the health status and needs of this population.

In 2006 we began the *Street Health Survey* project to fill this gap. This project has surveyed 350 homeless men and women in Toronto about their health and well-being, demographics and access to health and social services. A team of 15 Peer Researchers with lived experience of homelessness and poverty conducted these interviews, and will help with the analysis of our findings.

The **2007 Street Health Report**, which examines these study results, will be released in September 2007. The report will provide valuable health information and a sound evidence base to inform program planning and strengthen advocacy efforts aimed at policy change.

We hope you will join us for the launch of the **2007 Street Health Report**. For more information, contact Erika Khandor (erika@streethealth.ca). Details regarding the launch will be posted on our website (www.streethealth.ca) soon.

"The **Street Health** commitment goes beyond applying a bandage; it is a commitment to aiding a person in any way possible. The staff at Street Health not only provide health care, but they also educate and build lasting relationships based on trust and compassion."

- Laura Cowan, Executive Director



YES, I WOULD LIKE TO SUPPORT STREET HEALTH'S NURSING OUTREACH PROGRAM

I want to help you provide vital services for those people living on the street.

Enclosed is my donation for:

\$35 \$50 \$100 I would prefer to give \$ _____

My payment preference is:

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Master Card # _____ Expiry Date ____ / ____

Visa # _____ Expiry Date ____ / ____

Name: _____

Address _____

City _____ Postal Code _____

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Please detach this coupon and send with donation in the return envelope provided.

All donations are tax deductible.

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