



Canadian Working Group on
HIV and Rehabilitation

Active Voice: Effecting Positive Change

ANNUAL REPORT
2012-2013

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This report describes the activities of CWGHR from April 1, 2012 to March 31, 2013.

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MESSAGE FROM THE CO-CHAIRS

Dear members, colleagues, funders and other CWGHR supporters:

This year marks the 15th anniversary of the Canadian Working Group on HIV and Rehabilitation (CWGHR). It is a time to pause and reflect upon the critical work accomplished to date, and to take stock of where we are now and look forward to the possibilities ahead. Simply put, it is an opportune moment to tell the CWGHR story — past and present — and envision our future. To help us tell this story, we are engaging in important conversations with our many stakeholders, who are well positioned to assess the real-world impact of CWGHR's work on the lives of those living with HIV and other chronic and episodic illnesses. These stakeholders — including persons living with HIV, rehabilitation professionals, researchers and human resource strategists, to name only a few — have lent their time and their voices to this report. They are with us as we look to the future and expand CWGHR's programs, increase membership levels, diversify our funding and renew our strategic plan.

Looking back, 2012-2013 was full of successes, but not without challenges and opportunities. We continued to actively work on our core areas, namely education and practice, research and policy, all of which are highlighted in this year's report.

The past year was also the beginning of a transitional period for all the national HIV organizations in Canada as the Public Health Agency of Canada moves toward a more integrated approach with HIV, hepatitis C and other chronic and/or communicable diseases. CWGHR's innovative programs and collaborative approaches will allow us to continue to fulfill our mission and vision in the context of this change.

On behalf of the CWGHR Board of Directors, we would like to take this opportunity to thank our funders, donors, partners, members and fellow Board members for your unwavering support. We would also like to thank CWGHR's incredible staff for their dedication. It is because of your collective efforts that we mark 15 years of effecting positive change for those living with HIV and other chronic and episodic illnesses. Together our voices are powerful, and we are being heard.

David Salter and Glyn Townson
Co-Chairs
Board of Directors

Vision

The daily lives of people living with HIV will be improved in direct and meaningful ways through rehabilitation care, support and services.

Mission

CWGHR is a leader and catalyst for improved rehabilitation services for people living with HIV through integrated research, education, policy and practice.

Mandate

Within its mission, CWGHR has three primary mandates:

- Coordinating and advising on issues of disability and rehabilitation in the context of HIV;
- Supporting and undertaking initiatives in rehabilitation in the context of HIV; and
- Encouraging pan-disease collaboration to address issues experienced by people living with HIV and those with other complex episodic or chronic diseases.

CWGHR has a national voluntary Board of Directors that includes representation from diverse stakeholder groups and plays a strong and significant role in governance and leadership.

The **Canadian Working Group**

on HIV and Rehabilitation (CWGHR)

is a national, multi-sector, multi-disciplinary organization established in 1998 to address the emerging need for a national comprehensive response to rehabilitation issues in the context of HIV. As many people living with HIV began to live longer, primarily due to antiretroviral treatments, people also began to experience many of the disabling aspects of living with HIV and/or side effects of these life-saving treatments.

The role for rehabilitation supports and services has correspondingly increased to address these disabling impacts of HIV.

For more information visit
www.hivandrehab.ca

PROGRAMS

2012-2013 was a milestone year for the Canadian Working Group on HIV and Rehabilitation (CWGHR); the lead-up to our 15th anniversary in 2013 has been a time of both tremendous reflection and growth. Our work in HIV, disability and rehabilitation has certainly advanced in ways inconceivable in 1998, when CWGHR was founded and life-saving technologies for HIV were only emerging from their infancy. Much has changed since that time, and our role continues to evolve with the needs of those whom we serve, but our fundamental principles remain steadfast. Today, the voices and reflections of people who have been involved with CWGHR since the beginning and those who have joined our efforts over the years are critical to painting a vivid picture of CWGHR's programs and networks.

Over the past year, CWGHR's programs have continued to grow and develop based upon four pillars that are essential to developing and implementing effective, comprehensive and relevant rehabilitation policies and programs:

- Fostering and advancing knowledge in HIV and rehabilitation
- Capacity building/knowledge exchange for strengthening rehabilitation as part of the continuum of care
- Championing improvements in policies as they relate to HIV, disability and rehabilitation
- Promoting excellence in rehabilitation practice

WHAT IS REHABILITATION?

Rehabilitation can make a difference — it can be a process, program or service that:

- addresses challenges with physical, psychological, emotional, social and/or economic functioning or health;
- prevents problems from getting more serious; and
- supports people to be as independent as possible with the support they need to participate as fully as possible in society.



Within the context of these pillars — research, education, policy and practice — CWGHR’s activities fall within three interrelated program areas:

- HIV, Disability and Rehabilitation
- Integration between HIV and Other Chronic or Episodic Diseases and Disabilities
- International Perspectives

All CWGHR activities are undertaken in partnership with other HIV, disability and rehabilitation stakeholders; collaboration is key to our success. Educational activities and resource development are also integral components of all CWGHR’s programs. Finally, while many activities cross multiple areas, highlighted activities are described in this report under their primary area.

To access CWGHR’s educational resources, visit www.CWGHRCampus.HIVandRehab.ca or www.HIVandRehab.ca

Dr. Gregory Robinson is a physician by training with sub-specialties in family medicine and public and community health. He is living with HIV and now retired due to co-morbidities related to his HIV infection, including cirrhosis caused by antiretroviral drugs. Greg has been an advocate and activist with AIDS ACTION NOW! and is a lifelong supporter of CWGHR. He has served as CWGHR Co-Chair, educator of health providers on HIV and rehabilitation, member of various advisory committees, and as a co-faculty member of the interprofessional learning program. He was also a participant at the first meeting to develop an HIV and rehabilitation strategy in Canada.

When asked to reflect on CWGHR’s 15th anniversary, Greg notes, “We hardly anticipated the changes that were about to take place 15 years ago when a diverse group of stakeholders, including people living with HIV, AIDS service organization representatives, health and rehabilitation professionals, teachers and educators, program and policy makers, bureaucrats and researchers first gathered at a large table in Quebec City in 1998 to share their work and ponder how to move forward. We were on the cusp of changes that impacted rehabilitation in HIV and AIDS — from a course that was palliative and where rehabilitation was integrated into end-of-life care to treating a chronic, episodic illness where returning to active living was possible.”

HIV, Disability and Rehabilitation

While all of CWGHR's work directly impacts the lives of people living with HIV, some of our activities are undertaken with a cross-disability or cross-disease perspective. Other work is undertaken with a more specific focus on issues related to HIV and hepatitis C; the following section highlights this work.

HIGHLIGHTS

Access to Rehabilitation

CWGHR aims to improve access to rehabilitation programs and services for people living with HIV and other related illnesses through four key approaches:

- Working with health care providers and people living with HIV and other related illnesses to better understand the role of rehabilitation in prevention of illness, maintenance and improvement of health, and quality of life
- Working to change policies that create barriers to accessing rehabilitation programs and services
- Promoting and supporting program models that integrate or facilitate access to rehabilitation
- Identifying and undertaking research to provide evidence-informed solutions

As barriers to accessing rehabilitation present challenges across Canada, CWGHR has continued to address barriers and

improve access to rehabilitation through this multi-faceted approach that requires collaboration with many other groups in the HIV, disability and rehabilitation fields. Over the past year, CWGHR has developed a broad-based network of groups with an interest in increasing access to rehabilitation to guide our work.

While there are many related activities, a primary focus includes building a network of people who are working together to increase access to rehabilitation, especially for people with chronic or long-term episodic conditions.

“If I had been able to afford to see a physiotherapist when I first started experiencing this pain, I may not have had such a crisis where I could not move and couldn't get out of bed. I had to be taken to the hospital, as I couldn't move. And the depression that went along with the physical pain made it that much worse.”

—*Woman living with an episodic disability*



Key CWGHR activities have included:

- Consultations/focus groups using the 2012 *Discussion Paper on Equitable Access to Rehabilitation* (CWGHR and the Wellesley Institute) to gather input from various groups about how access (or lack of access) to rehabilitation has made a difference in their lives or their clients' lives, programs or systems that may increase access, and innovative ways to integrate rehabilitation into front-line care.
- Developing a case (e.g., highlighting economic and health benefits) for increasing access to rehabilitation and presenting the case to policy makers, planners and other decision makers to engage them in this process.
- Continuing to undertake or participate in research to learn about successful rehabilitation models and strategies and their impact on health, in order to promote opportunities to adapt them to other settings.

As increasing numbers of people are living longer with complex chronic illnesses, including but not limited to HIV, increasing access to rehabilitation programs and services is a priority requiring a coordinated and sustained effort among a wide range of partners.

Dr. Patty Solomon is the Associate Dean of Rehabilitation Science and a professor in the School of Rehabilitation Sciences at McMaster University. She is also a longtime friend of CWGHR, having responded to a request for proposals on education and HIV at a time when there was very little information of the sort in standard program curriculum. It was a serendipitous decision that ultimately resulted in a pioneering research track that has transformed how we understand HIV and rehabilitation.

“At the time [I answered the request for proposals], rehab wasn't on the radar. We talked about palliative care for those living with HIV. Rehab was a hard sell,” notes Dr. Solomon. “Through CWGHR I became very interested in this research area. We brought in patient perspectives and demonstrated how a continuum of care was most important.”

But Dr. Solomon also knows that much work remains to be done on the research front, and plans to continue her area of study — and her relationship with CWGHR.

“CWGHR's programs and leadership are very symbolic of the growth and stature of the organization over the past 15 years. While CWGHR's fundamental focus remains the same, there is definitely a maturity and confidence in the work. CWGHR will continue to be important for promoting the type of research and relationships needed to really think about HIV and rehabilitation, and truly make people's lives better.”



Glyn Townson did not come to be on the CWGHR Board of Directors by chance; he is a longstanding fan of the organization who has been active in the HIV community for many years. He has a background working with disabilities, and is also openly positive and has very personal reasons for wanting the very best for those living and aging with HIV.

“When I got involved with CWGHR, things had changed from walking through end-of-life decisions to HIV as a chronic manageable condition. I experienced this firsthand. So I could see how big this thing could get and how important it was,” says Townson. “It was a breath of fresh air to be coming up with solutions instead of dealing with problems and death.”

Townson sees that needs have increased, and is confident that CWGHR is at the very forefront of the aging with HIV movement — and he is pleased to be part of the success story.

“CWGHR offers honest, cross-sectoral communications and uses a very inclusive model to deal with the challenges of aging with HIV. And we’re writing history as we go. There really isn’t a blueprint.”

Aging

Aging with HIV and/or other chronic or episodic conditions continues to be an important area of programming, education, policy and research. As with all of CWGHR’s work, alliances and partnerships are critical, as the response requires coordination and collaboration amongst a wide range of people.

CWGHR’s work over the past year has built on current alliances and developed new partnerships to bring together experts in the field of aging and experts in HIV and related conditions. We continued working with the Canadian Association on Gerontology, the Canadian Homecare Association, the Quality End of Life Care Coalition of Canada (QELCCC), and the AIDS Community Research Initiative of America (ACRIA) to promote knowledge exchange and coordination of HIV and aging work across Canada and beyond.

“We need to learn from the aging sector what they know about aging and in return we can offer them what we know about HIV and aging. Working with our partners on aging opens up a lot of possibilities for policies and programs for the people coming up behind us.”

—Glyn Townson

Key activities in aging over the past year include:

- Continuing to play a leading role to coordinate the national HIV and Aging Coordinating Committee and Research Working Group.
- Launching an HIV and aging webinar series with a range of collaborators as presenters.
- Coordinating sessions on rehabilitation and aging across the lifespan with front-line care providers.
- Participating in several research initiatives, including the development of recommendations for rehabilitation with people who are aging with HIV (for care providers and people living with HIV).
- Creating and distributing a survey with ACRIA of learning needs of HIV and aging sectors to help inform our work. In response, we are planning educational programs and opportunities to work with both HIV and aging sectors to develop and integrate programs.
- Developing a new module on aging to be added to our online course on rehabilitation in the context of HIV.
- Coordinating research to learn from other chronic disease groups about models and strategies for collaboration with the aging sector.

Mental Health

As mental health is a key component of effective rehabilitation, especially for people living with HIV and other chronic and episodic conditions, CWGHR has recently undertaken several initiatives to integrate mental health issues into our work:

- In 2011-2012, we led the Positive Outlook project, including a series of interactive educational sessions across Canada on HIV and mental health with people working on the front lines in HIV, disabilities and rehabilitation. This was done to bring a practical approach to assessing patients/clients for depression and other mental health issues, including evidence-based techniques to positively impact the mental health of people living with HIV and other disabilities.

“Totally stunning, I was captivated throughout all the days. This Positive Outlook workshop was relevant [and there was] very good interaction between the teacher and students. It elicited thinking about lots of topics. It also gave lots of validation and language and affirmation to what I'm already doing, which for me is important to trust that I am doing the right thing. Thank you so much! I am so impressed and feel lucky to have been present.”

—Participant in Positive Outlook workshop

- In early 2013, we undertook a post-evaluation (i.e., one year out) with participants from the workshops to see if/how the training sessions had influenced their daily practice (i.e., whether they were able to integrate the learning into their practice and whether the learning was sustainable). Based on the results of the post-evaluation, we are updating the training and broadening its scope to include working with people with other chronic diseases, in order to promote a more integrated approach to mental health.
- We also consulted with other chronic disease groups to determine if/how they integrate mental health into their work. This will also help inform our work with HIV and related conditions and strengthen our capacity to work with other health-related groups to address mental health challenges as they relate to chronic or episodic conditions.

CWGHR is continuing to work on these issues and integrate mental health into our current and planned activities.

In March, CWGHR representatives led a workshop on *Dealing with Depression*, as part of Positive Gathering 2013, held in British Columbia, providing information and care techniques for symptoms of depression that may affect HIV positive people, with the goal of improving self-care. The session was full, and participants indicated that this is a very important and relevant topic.

E-Module for Evidence-Informed HIV Rehabilitation

Launched in May 2011, this e-module is an important evidence-based resource for rehabilitation and other health professionals so that they can better address the needs of people living with HIV and related conditions. To date, this resource has been accessed more than 40,000 times by people worldwide to guide them with respect to the care of people with HIV. Over the past year, CWGHR has updated the e-module to integrate new information and will continue to update it on a regular basis.

www.hivandrehab.ca/EN/information/care_providers/documents/CWGHR_E-moduleEvidence-InformedHIVRehabilitationfinal.pdf

Occupational Therapy Practicum

Occupational therapists (OTs) can play a very important role in the health and well being of people living with HIV and related conditions. In 2012, in order to connect OTs and people living with HIV, CWGHR launched a new initiative to bring together OTs and front-line programs that provide services for people with HIV and related conditions. Through connecting practicum placements with university OT programs and front-line services, the overall goal is to increase the knowledge and skills of pre-practicing OTs to work with people with HIV and related conditions, and for front-line programs to learn about and benefit from the skills and services of an on-site OT.

Canada-United Kingdom HIV and Rehabilitation Research Collaborative

Over the past year, CWGHR continued working with several academic and health institutions and community organizations to coordinate collaborative research and knowledge exchange on HIV, disability and rehabilitation through our expanded and strengthened Canada-UK HIV and Rehabilitation Research Collaborative (CUHRRC). CUHRRC provides a mechanism for teams of researchers, clinicians and people living with HIV to work together on priority areas of research in HIV and rehabilitation in Canada and the UK. Research initiatives undertaken to date include:

- a national survey to assess disability and rehabilitation services used by people living with HIV in Canada; and
- a scoping study of Canadian and UK policies on access to rehabilitation services in each respective country.

In order to share the findings of this work and other related research, CUHRRC and CWGHR will collaborate on a two-day knowledge exchange forum in June 2013. We will bring together researchers, people living with HIV and other related conditions, clinicians, educators and policy makers to present research findings and discuss moving this work forward. This will include implications for policies and programs that can have a direct impact on the lives of people living with HIV or those vulnerable to HIV and related conditions.



Kelly O'Brien is a physical therapist and Assistant Professor in the Department of Physical Therapy at the University of Toronto. She has been actively involved with CWGHR in many ways over the past 12 years, since she initially worked clinically with people with HIV at the former Wellesley Hospital (and later St. Michael's Hospital) in downtown Toronto. Today, with PhD training in the field of Clinical Epidemiology, Kelly is a leader in research and education in HIV and rehabilitation. In 2008, she undertook a scoping study to identify priorities for guiding research in HIV and rehabilitation and has since played a key role in developing CWGHR's HIV and rehabilitation curriculum, e-module and other educational resources. Kelly is also a founding member of CUHRRC, and plays a lead role in many endeavours to advance research in HIV, disability and rehabilitation.

"Personally, as a researcher, I feel extremely fortunate to have worked with CWGHR since my graduation from physical therapy at the University of Toronto. It is through the outstanding leadership of CWGHR that I have learned what it means to engage in community-based research. CWGHR and CUHRRC have provided an opportunity to meaningfully engage with the community throughout all aspects of HIV and rehabilitation research. It is the time spent working with CWGHR that ranks among some of the most rewarding and enriching academic experiences."

“Inviting representatives from different universities to collaborate with CWGHR in the development of a facilitator’s guide was an inspired idea. In bringing us together, you facilitated our own interprofessional and inter-university learning and collaboration. Just as we have found with interprofessional student teamwork, having a specific project to work on together is the key to a successful collaborative learning experience.”

—Representative from a participating university

HIV, Disability and Rehabilitation Curriculum

Over the past year, CWGHR has updated our on-line interdisciplinary course *Rehabilitation in the Context of HIV*. This self-directed course increases the capacity of rehabilitation professionals and other health and care providers to respond in an interprofessional way to people living with HIV and other complex episodic disabilities. In addition, a new module was developed on HIV and aging to respond to this increasingly important area within rehabilitation.

Several universities across Canada have also purchased this course curriculum to integrate into their curriculum for pre-practicing rehabilitation and other related disciplines. Over the past year, participating universities have been meeting to exchange ideas on ways to use the curriculum, not only with rehabilitation students but also with students of other disciplines such as pharmacy, dentistry, social work and nursing.

As all participating universities are interested in ways to facilitate learning with the curriculum, CWGHR is working with

the group of participating universities to develop a facilitator’s guide that will include an integrated approach of HIV with other chronic or episodic conditions.

National HIV Partner Organizations

As a national HIV partner organization, CWGHR collaborates with other national HIV organizations in Canada on issues of common concern. Over the past year, CWGHR continued to work with the other national HIV partners on shared planning, input into federal policy issues and programs related to HIV and promoting integration of rehabilitation within national HIV programs.

In 2012, the national HIV partners began to focus on a transitional period in federal government funding for HIV. As HIV funding through the *Federal Initiative to Address HIV and AIDS in Canada* is moving towards an approach that addresses HIV in the context of hepatitis C and other chronic, communicable and/or sexually transmitted conditions, the national partners are exploring new ways to work together and bring in new partners in this integrated, holistic approach.

Integration between HIV and Other Chronic and Episodic Diseases and Disabilities

While there are various issues that are unique to the experience of living with HIV, there are also increasing commonalities with other chronic illnesses, such as multiple sclerosis, lupus, diabetes, arthritis and some forms of cancer and mental illness. These conditions often have an episodic component where people experience unpredictable and fluctuating states of health and illness/disability over time. Many Canadians are living with these types of illnesses and face challenges including employment participation, income security, community involvement, social inclusion and access to care and services in a comprehensive and integrated way at both national and provincial levels.

HIGHLIGHTS

In the past year CWGHR continued to play a leading role in addressing the challenges experienced by people living with a range of episodic disabilities.

In addition to continuing to present workshops on episodic disabilities and employment issues for a broad range of employers and employees, and playing a coordinating role in the Episodic Disabilities Network, CWGHR has launched several episodic disability initiatives, including Health Gateway, an enhanced Episodic Disability Employment Network (EDEN),



Dave Skitch is the peer coordinator with the Toronto HIV/AIDS Network, and has experience in rehabilitation management as well. He came to know about CWGHR during the 2006 AIDS Conference held in Toronto, and has been working with us ever since — noting that CWGHR has made a huge difference in his way of looking at things.

“CWGHR, from the beginning, has done a lot of research and health promotion work — especially promoting rehabilitation services. As a positive person myself, I definitely saw a lot of value in this, and my involvement with the organization has been really positive,” says Skitch. “Over the years, my positive thoughts about CWGHR’s work have only been reinforced, but now I know that if we really want to reduce stigma it’s time to integrate with other communities facing similar issues. And CWGHR is doing that. It’s an exciting time.”



Richard Weston helps organizations to implement strategic human resource planning, and has firsthand experience addressing cases of employees living with HIV — some of the very first cases, in fact. Weston notes that, when dealing with HIV in the workplace, the trick is dealing with both long-term human resource planning and also with the silence that surrounds this issue. But he also knows that we can exponentially expand our understanding and ability to plan by integrating what we know about HIV with our knowledge of other diseases and disabilities.

“I work to develop managers to address episodic disabilities,” says Weston. “People just don’t understand them, so we need to work towards managing absences, how to deal with other employees, and how to transition those living with episodic disabilities back into the workplace. In these respects, HIV is not the only game in town.”

CWGHR understands that there is much to be gained by integrating HIV and other chronic and episodic conditions, and that’s very positive in Weston’s eyes.

“CWGHR does a great job of pulling together research and lived experience, and has laid the foundation for a more holistic focus. I hope to see even more advocacy on behalf of those living with all episodic disabilities, as there is always more work to be done.”

as well as the report *Evolving the Workplace: Identifying Opportunities to Support People with Episodic Disabilities in Employment*.

Health Gateway E-library

Health Gateway is an accessible web-based e-library for people living with complex chronic illnesses and episodic disabilities and their caregivers, connecting them to the resources that meet their needs, wherever they are in their care journey. Throughout 2012, CWGHR and Bridgepoint Health continued our collaborative work, expanding the scope of the resources available through Health Gateway. In 2012-2013, planning began for the expansion of the *Health Gateway* database to a national scope.

For more information visit www.healthgateway.ca

Educational Resources and Activities

CWGHR is expanding our episodic disabilities and employment education offerings and reach:

- CWGHR’s on-line courses on *Managing Episodic Disabilities* for Human Resources (HR) practitioners across Canada have been accredited by additional regional HR associations and colleges.

“EDEN is great. I just found it — it [answers] exactly what I’m struggling with. I just had the worst day because of issues related to work and accommodation, and here was this lovely answer to all my problems in my inbox.”

—*Episodic Disabilities Employment Network website user*

- The first edition of the business case, *Evolving the Workplace: Identifying Opportunities to Support People with Episodic Disabilities in Employment*, is being used to support the hiring and retention of people with episodic disabilities.
- New in-person workshops for managers and supervisors have been developed and presented to provide practical training on working with people with episodic disabilities in an employment setting.
- The first steps were taken in building a relationship with Lancaster House, a provider of conferences, information and analysis on labour, human rights and employment law, with a webinar training session for managers and supervisors and an in-person session is planned for May of 2013.

Episodic Disabilities Networks

Episodic Disabilities Employment Network (EDEN), our employment social network website for people with episodic disabilities, continues to grow, with increased numbers of users and resources. The website includes forums, blogs and information resources on employment rights, accommodations, disclosure in the workplace, stigma and discrimination and work/life balance, to name only a few.

For more information visit
www.EDENCanada.ca

CWGHR continued to coordinate the national and Ontario Episodic Disabilities Networks (EDN and OEDN), comprised of HIV and other disability-related organizations working together to address the challenges facing people living with episodic disabilities. The networks collaborate on cross-disability research, and engage in initiatives to advance public policy change to promote broad-based integration to strengthen episodic disabilities initiatives in Canada. The vision for the future is for Canada to develop a national episodic disabilities strategy to promote overall coordination and governance among disability support programs that impact the lives of Canadians living with all episodic disabilities.

Highlights of EDN activities:

- The EDN has been actively engaging members of Parliament to support the recommendation that the Government of Canada “create a more flexible and supportive employment insurance sickness benefits program to improve the labour market participation rates of Canadians living with episodic disabilities as part of a national workforce employment strategy to address current and future labour shortages.”
- CWGHR has been planning a national policy dialogue on episodic disabilities, in partnership with the Episodic Disabilities Network. CWGHR has continued working with Canadian episodic disabilities groups, government and other stakeholders to promote a national strategy on episodic disabilities.



Think tank on HIV, disability and rehabilitation

Think Tank/Roundtable

Over the past few years, CWGHR has been holding annual “think tanks” or roundtable sessions to bring people together to explore important issues that are current or upcoming in HIV, disability and rehabilitation. In March of 2013, CWGHR collaborated with the Canadian Aboriginal AIDS Network (CAAN) to host a think tank with two main purposes: first, to increase our shared understanding of disability and rehabilitation issues and perspectives related to complex chronic illnesses and second, to nurture relationships among rehabilitation sectors and Aboriginal communities to support future collaborations. This initial exploratory meeting brought out many important ideas and reflections and began the dialogue for continued work together.

Annual Forum on HIV and Rehabilitation

Each year, CWGHR continues to bring together a diverse group of stakeholders — people living with HIV, AIDS service organization representatives, other disability groups, rehabilitation and other health professionals, teachers and educators, program developers and policy makers, government representatives and researchers — from an ever-expanding range of networks and partners.

In June 2012, CWGHR's forum was held in conjunction with some of our national HIV partners: the Canadian HIV/AIDS Legal Network, the Canadian AIDS Society (CAS) and CATIE. CWGHR collaborated in sessions hosted by CAS and the Legal Network and also hosted our own forum. The CWGHR forum featured two major sessions for the day:

- Looking Ahead: CWGHR, 2012 and Beyond (Consultation Session), and
- What's rehab got to do with it? Promoting wellness in the current reality of living with HIV (Skills-Building Session).



Wendy Porch presenting at the AIDS 2012 workshop session held in partnership with UNAIDS

International Perspectives

HIV, disability and rehabilitation issues are gaining recognition and significance, both in Canada and around the world. CWGHR has been working with other HIV and disability organizations to promote and strengthen collaborative initiatives among HIV, disability and human rights groups.

HIGHLIGHTS

- Continuing educational sessions on HIV in the context of the *UN Convention on the Rights of Persons with Disabilities (CRPD)* in Canada and internationally, to promote discussion on HIV, disability and the CRPD, and ways that the CRPD can be used to promote and protect human rights of people living with HIV.
- Conducting workshop sessions with HIV and disability groups internationally at the AIDS 2012 International Conference,

in partnership with UNAIDS and with the participation of world-renowned groups Human Rights Watch and One Billion Strong.

- Advancing partnerships at the international level through presentations at the annual Conference of States Parties to the CRPD at the United Nations in September 2012.
- Continuing work with the Global Contact Group on AIDS and Disability to promote knowledge exchange and planning at the international level.

As the CRPD has been ratified in Canada and many other countries, there is a need to provide education and support for its implementation. This work will continue as new partnerships are developed and more people around the world begin to recognize the linkages between HIV and disability.



Murray Jose, Executive Director of PWA, at the award presentation

“The Toronto People With AIDS Foundation (PWA) engages people living with HIV in enhancing their health and well-being through practical and therapeutic support services and broader social change, and inspires them to live into their dreams and discoveries.”

Award of Excellence in HIV and Rehabilitation

In 2008, CWGHR launched its first annual Award of Excellence in HIV and Rehabilitation. CWGHR established this award to recognize a person or organization who/that has made an important contribution to advancing the field of HIV and rehabilitation. In 2012, the 5th annual Award of Excellence recipient was the Toronto People With AIDS Foundation (PWA). It was the first time the award was given to an organization and coincided with the 25th anniversary of PWA. PWA has been a leader in addressing the needs of people living with HIV and is moving in a direction that examines people's dreams and builds physical and emotional health, as well as enabling the social participation of people living with HIV so that they can achieve those dreams. This exemplifies CWGHR's understanding of rehabilitation.

The award was presented at a breakfast held in conjunction with CWGHR's Annual Forum and General Meeting in June 2012.

BUILDING ON OUR FOUNDATION

CWGHR sees a strong internal infrastructure as key to ensuring coordination and integration among our programs and activities. Clear organizational direction also promotes sustainability and growth of CWGHR's work as a whole. CWGHR's Board of Directors and advisory committees play an important role in providing advice for planning, implementation and evaluation of CWGHR's work, and guiding CWGHR's future direction.

HIGHLIGHTS

Undertaking the strategic planning that guides our work in HIV, disability and rehabilitation, with a focus on our four primary pillars:

- Advancing and fostering knowledge in HIV and rehabilitation
- Building capacity among health and other care providers and the HIV community to strengthen rehabilitation as part of the continuum of care
- Championing improvements in policy and practice related to HIV and rehabilitation
- Cultivating and strengthening CWGHR's resources for sustainability and growth

As the current plan is in place through 2013, CWGHR began gathering input over the past year to inform the future strategic directions. This critical work continues. Priority areas for our work include:

- **Aging**
- **Access to Rehabilitation Services**
- **Mental Health**
- **Income Support and Employment**

Two other key areas of organizational focus are also being addressed:

• **DEVELOPMENT STRATEGY**

CWGHR's Development Committee has continued to grow and implement the development strategy that guides CWGHR's work in the area of promoting organizational sustainability and growth. This strategy provides a framework for advancing knowledge- and resource-based collaborations and initiatives as a key component of CWGHR's strategic planning.

• **MEMBERSHIP**

CWGHR's membership is open to organizations and individuals with an interest in HIV, disability and rehabilitation. Over the past year, CWGHR has continued to expand opportunities for people to participate in our activities. Membership information is available at www.hivandrehab.ca/EN/get_involved/become_member.php

LOOKING AHEAD: 2013-2014 AND BEYOND

CWGHR has a very busy agenda in 2013-2014, as we continue to build upon and expand the scope of our work in HIV, disability and rehabilitation in Canada and internationally. Highlights for the coming year include:

- **Continuing** to work on increasing access to rehabilitation services, specifically for people living with chronic diseases, building on the foundation of *The Discussion Paper on Equitable Access to Rehabilitation* and meetings with key stakeholders.
- **Reviewing** and updating CWGHR resources such as the *E-module on Evidence-Informed HIV Rehabilitation* and the interprofessional HIV, disability and rehabilitation course to ensure that they remain current and relevant.
- **Expanding** the on-line version of CWGHR's interprofessional curriculum on HIV, disability and rehabilitation, in order to integrate aging and other chronic illnesses and a newly developed Facilitator's Guide, in partnership with academic and health institutions.
- **Expanding** the reach of educational sessions on mental health in the context of HIV and other chronic/episodic conditions, in collaboration with post-secondary institutions and front-line service providers.
- **Co-hosting** an international forum on HIV, disability and rehabilitation research, in partnership with the Canada-UK Research Collaborative on HIV and rehabilitation (CUHRRRC).
- **Continuing** the development and coordination of CUHRRRC, including current and upcoming research initiatives and strategies to promote international dissemination and knowledge exchange on HIV and rehabilitation.
- **Hosting** a national episodic disabilities policy dialogue.
- **Expanding** the *Episodic Disabilities Employment Network* and related educational activities.
- **Furthering** work on the initiatives recommended in *Evolving the Workplace: Identifying Opportunities to Support People with Episodic Disabilities in Employment*.

- **Expanding** *Health Gateway* to the national level.
- **Continuing** to coordinate national and provincial episodic disabilities networks for research, education and policy advancement.
- **Coordinating** research and educational initiatives on aging with HIV and other chronic diseases, including new collaborations between fields of HIV, other chronic diseases and aging sectors.
- **Undertaking** research to identify and respond to the needs of caregivers who provide support for people living with

life-long episodic conditions. Specifically, we will be collaborating with the Ontario Homecare Association and the Centre for Families, Work and Well-Being at the University of Guelph.

- **Expanding** curriculum and educational opportunities on HIV in the context of the *United Nations Convention on the Rights of Persons with Disabilities*.
- **Participating** in global networking among HIV, disability and human rights groups including the 2013 Conference of States Parties to the UN Convention on the Rights of Persons with Disabilities.

Throughout 2013, CWGHR will reflect on the impact and scope of our work, as well as lessons learned over the past 15 years. We know that important work and learning lie ahead, and look forward to continuing in our efforts to effect positive change for those living with HIV and other chronic and episodic illnesses in 2013 and beyond. Through continued collaborative efforts, undertaken with our many diverse stakeholders, we will continue to be a leader and catalyst for improved rehabilitation services for people living with HIV and related illnesses, through integrated research, education, policy and practice.

WITH THANKS

CWGHR Board of Directors 2012–2013

David Salter, Co-chair
Glyn Townson, Co-chair
Larry Baxter
Tara Carnochan
Alan Casey
Stéphanie Claivaz-Loranger
(as of June 2012), Treasurer
Paul Curwin (to June 2012), Treasurer
Richard MacLachlan
Kelly O'Brien
Marina Sampson, Secretary

CWGHR Staff

Glenn Betteridge, Project Coordinator,
Aging with HIV
Le-Ann Dolan, Program Director
François L'Ecuyer, Director of
Communications (July 2012 to
January 2013)
Janet London, Administrative Coordinator
Catherine Nasije, Project Assistant
Wendy Porch, Disability Specialist
and Education Coordinator
(to December 2012)
Manna Tang, Finance Manager
Tammy C. Yates, Coordinator of Episodic
Disabilities Initiatives (from December 2012)
Elisse Zack, Executive Director

Consultants and Students

Consultants on projects

Blue Lemon, Social networking
website development
Janet Butler-McPhee,
Communications consultant
COCO* Creative, Publication
design and layout
Jessica Cattaneo, Evaluation
Desire2Learn, Online course
technical development
eFuel Partners Inc.
Nkem Iku, CUHRRC Coordinator
Sandra Moll & Erika Pond Clements,
HR mentorship program content
Alexandra Osatchuk, Education
module development
Melissa Popiel, Episodic Disability
and Employment Consultant
Lynne Sinclair, Interprofessional Learning
Curriculum and Mentorship Coordinator
Pat Vandesompele, Web design
Annette Wilkins, E-Module development
Gilleen Witkowski, Education course
development

IT Support

Joe Batista, Business Computer Solutions

Translation

Christiane Devaud, C.D. Translation
Ginette Pilon, York Translation Services

Financial Administrative Support

Brendan Pennylegion, CA

Students

Prasa Gopee-Ramanan (July–August 2012)
Charles Furlotte (from January 2013)