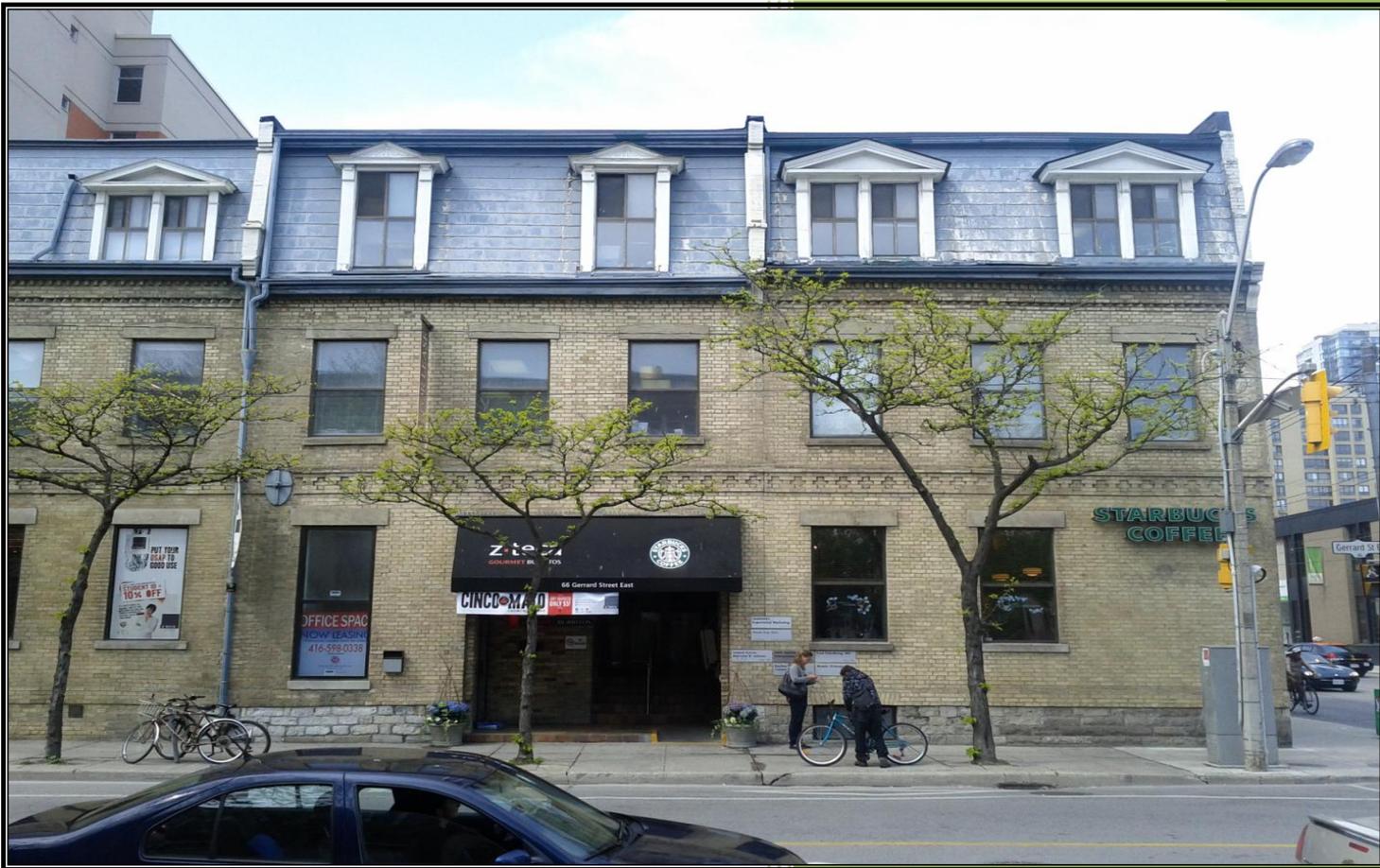


# 2012

## Annual Report



**Hassle Free Clinic**

**66 Gerrard Street East, Suite 200**

**Toronto, Ontario M5B 1G3**

**[hasslefreeclinic.org](http://hasslefreeclinic.org)**

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Produced by: Elmer Bagares &  
Jane Greer with many  
contributors

# A MESSAGE FOR THE PRESIDENT



## **PETER BOCHOVE**

**1948 - 2013**

In our Annual Report, this is where we usually have the “Message from the President”. Traditionally, it has contained highlights of Clinic accomplishments, praise for the staff for a job well done and expressions of pride to be President of our busy, successful clinic.

As we write this Annual Report, we are writing ‘for’ our President, Peter Bochove, who passed away April 28, 2013. Our clinic community offers our deepest condolences to his partner, Christopher Brown, Peter’s family and many friends.

After many years of being a friend of the clinic, Peter joined our Board in 1997. He was a successful businessman in our community. He had survived the police brutality of the 1981 Bathhouse raids that left his business in shambles, both literally and financially. Those raids resulted in the arrest of over 300 men, whose charges were later dropped. That horrendous attack against Bathhouse owners, patrons and indeed our whole city, galvanized him into activism.

After that nightmare, he fought with the City of Toronto for many years trying to obtain a permit for a new Bathhouse. It was completely legal, but the City would not approve it, clearly for no reason other than blatant homophobia. The issue was finally resolved with the intervention of Councillor Jack Layton, who got Peter his permit and set precedence for Bathhouse license approvals in the City, free from the harassment Peter had experienced.

He was a good businessman, but even more than that he cared deeply for the community his business served. He was an amazing moral compass, who saw beyond the bottom line. He refused to put profit ahead of people and became a huge advocate for safety, education and testing in Bathhouses, which, together with the work of other activists, allowed bathhouses in Toronto to remain open when other cities were shutting them down.

Peter played a pivotal role in helping us move into our current space on Gerrard Street. He found our property through a business associate and negotiated a favourable lease on our behalf.

Peter was an amazing support to staff at this clinic. He was always willing to let us bounce around concerns or ideas with him, providing excellent insight as well as a “you’ll outlast them” kind of encouragement. He trusted us completely to do our jobs, and would voice that trust to us all the time.

Of course, we remember these things, but we also remember the comedy routines he and George (Hislop) would run as our Board meetings got started, his articulate nature, and the pleasure we would have reading anything that he wrote. And write he did; letters to the editor, letters to government officials and politicians over ill-conceived policies, opinion pieces on all kinds of things including the right to privacy and human rights in general.

So this is the Message 'for' our President. We thank you for everything you did for us and the city we inhabit. We thank you for your unwavering support and leadership of Hassle Free Clinic over many years. We will miss you more than we can say.

On behalf of Hassle Free Clinic

Leo Mitterni and Jane Greer

**Board of Directors**

Peter Bochove: President  
Chris Phibbs: Vice President  
maxine bailey  
Nicole Greenspan  
Corinne Hart  
Sherri Helsdingen  
Rob Howe  
Rajendra Maharaj  
Warren Ross

**Volunteers of 2012**

Koshiga Abayan  
Loudes Alexandar  
Richard Baer  
Michael Baker  
Sarah Banani  
Kate Barton  
Ronald Benedetti  
Alexandra Bieg  
Robert Booth  
Chèran Carty  
Micaela Collins  
Alexandra Conchie  
Antonio Coxca  
Daniela Cipullo  
Molly Dion  
Bisa Dobson  
Emma Elliot  
Michelle English  
Andrew Eo  
Leigh Farina  
Ed Follet  
Erin Fauteux  
Sean Gamble  
Richard Gilmour  
Prabhar Gopalakrishnan  
Lorraine Hewitt  
Wolfgang Hock  
Tara Holder  
Mandom Hui

MANY THANKS TO  
THE HASSLE FREE CLINIC  
BOARD MEMBERS  
VOLUNTEERS &  
PHYSICIANS OF 2012!

Chris Holbrook  
Robert Juhasz  
Miran Kim  
Ghada Khoraych  
Paul Lee  
Alan LeBlanc  
Peter Locker  
David McClure  
Lysanne Menezes  
Nelson Moreira  
Ben Moase  
Robert Novakovic  
Tiffany Peterson  
Terrence Pettit  
Sigal Rehmane  
Warren Ross  
Fiona Sillars  
Harvey St. Amant  
Stephanie Thome  
Tiffany Tin  
Michael Tomlin  
Jane Tooley  
Mandi Torris  
Imran Warsi  
Mathieu Warren  
Stephen Westfall  
Thomas White  
Zoe Winterton-Perks

**Clinic Staff**

Anisha Abdulla  
Elmer Bagares  
Shawn T. Fowler  
Jane Greer  
Esther Guzha  
Heather Jamieson  
Jerry Juzkiw  
Amy Lin  
Maria Maksymiw  
Tara McKee  
Leo Mitterni  
Lisa Ross  
Sarah Siddiqui  
Sudesh Singh  
Zavaré Tengra  
Rahim Thawer  
Hang Tran

**Relief Staff**

Loudes Alexandar  
Richard Baer  
Michael Baker  
Miomir Cirak  
Angelo Cruz  
Brendan Curran  
Lindsay Elin  
Stephen de Wit  
Andrew Eo  
Jason Haines  
Mandom Hui  
Joe Lee  
Paul Lee  
Lee Renwick  
Chloe Richer  
Liana Salvador-Watts  
Sarah Siddiqui  
Len Tooley  
René Lopez Torres  
Fernanda Villanueva

**Public Health Nurses**

Martin Dushesne  
Wendy Johnston

**Men/Trans Clinic Physicians**

Edward Lee (Medical Director)  
Megan Acsai  
Evan Collins  
J. Troy Grennan  
Charlie Guiang  
Karen Ko  
Pamela Leece  
Allison McGee  
Hamidah Meghani  
Brian Minnema  
Kate Reeve  
Malika Sharma  
Howard Song  
Itamar Tamari  
Darrell Tan  
Kent To

**Women/Trans Clinic Physicians**

Nina Malayil (Medical Director)  
Linda Chou  
Ashifa Jiwa  
Erin Johnston  
Jane Kiraly  
Zeenat Patel  
Brigit Swenson  
Astra Teo  
Rachel Vogler  
Shiela Wijayasinghe  
Laura Winer

**HIV/Syphilis Blitz Relief Testers**

Jessica Abraham  
Martin Dushesne  
Kristel Guthrie  
Sara Pineda  
Roger Prasad

## Introduction

Hassle Free Clinic is a community-based collectively-run agency providing medical and counselling services in all areas of sexual health. We are one of the busiest sexual health clinics and the largest Anonymous HIV test site in Canada.

Hassle Free Clinic has separate hours for men and women at the same location. Transgendered clients can attend during the hours they feel most comfortable. The Men/Trans Clinic provides Sexually Transmitted Infections (STI) testing/treatment and HIV testing, counselling and support. The Women/Trans Clinic provides the same STI/HIV services as well as birth control, pregnancy testing, abortion referrals and other services related to sexual and reproductive health. Each clinic is staffed by doctors, clinicians, counsellors and volunteers. A City of Toronto Public Health Nurse is assigned to work during the Men/Trans Clinic hours. Testing is done at the Ministry of Health Laboratory and through a private lab. The Ministry provides treatments for most STIs free of charge.

The clinic has always promoted an integrated, comprehensive approach to service delivery. A full spectrum of sexual health issues – HIV, STI, birth control and pregnancy – may be dealt with at the same time, rather than dividing sexual health care into separate services.

Most importantly, we ensure that service delivery is informed by a non-judgmental, supportive attitude towards all sexual health concerns. We believe active client involvement in health care decision making is paramount. Therefore, we provide appropriate counselling and education to help clients make well-informed decisions.

## WE PROVIDE:

- Confidential Sexually Transmitted Infection (STI) counselling testing and treatment
- Rapid Point-of-Care (POC) and standard Anonymous HIV antibody testing with pre- and post-test counselling
- Safer sex counselling
- Birth control methods & information
- Pregnancy testing, decision counselling, abortion referrals & follow-up
- HIV support for newly diagnosed individuals
- Health Promotion/Nursing Clinic for HIV+ women

- Bathhouse & community outreach testing
- Hepatitis A & B vaccination
- Presentations to community groups, agencies, organizations and at conferences
- Referrals to HIV specialists, gynecologists, midwives, therapists, counsellors, AIDS service organizations (ASOs), and health and social services
- Services are provided in several different languages.

The clinic is incorporated as a non-profit charitable organization with a nine-member community Board of Directors. The Board takes responsibility for overall financial and policy direction while allowing staff collectives to make program and policy decisions.

The clinic is core-funded by the City of Toronto Public Health Division with additional funding from the AIDS Bureau, Ministry of Health and Long Term Care. The clinic also accesses the provincial STI billing program, a part of OHIP that does not require health cards.

We would particularly like to acknowledge and thank the many individual donors we have, primarily grateful clients. The amounts can be large or small, but we appreciate all of these donations, many of which are made anonymously.

## History of Hassle Free Clinic

The main inspiration for Hassle Free came in part from the staff at the Rochdale Free Clinic. Hassle Free officially began operating in February 1973, when counsellors from Rochdale opened a 24-hour, 7 days a week street clinic on Yonge Street. The clinic was funded by a grant from the federal government's Local Initiatives Project, and offered drug crisis counselling and treatment in a discreet and non-judgmental manner as our name suggests.

By 1975, the drug-oriented street scene had largely disappeared. Meanwhile, the clinic had built a reputation for providing "hassle-free" medical care, particularly STI and birth control services. A small but significant step was taken in 1977 when the clinic's global budget was covered by a shared cost grant from the Ontario Ministry of Health and the City of Toronto Board of Health. The grant came as a dramatic last-minute intervention, when the clinic had exhausted its funds and was faced with imminent closure.

In January 1980, when Hassle Free Clinic moved to our previous location at 556 Church Street, it was reorganized into separate men's and women's hours. The separation was the result of increasing numbers of male (mostly gay) clients and limited space, making it difficult to serve men and women at the same time. By the early 1980s the reputation of the Men's clinic as a safe place for gay men to obtain sexual health services was well established, although in fact we have always served large numbers of heterosexual men. The majority of women seeking services are heterosexual. From the early days, staff had also identified some of the unique sexual health needs of transgendered and gender fluid clients. This has now been translated into a comprehensive program of trans inclusivity.

## LOOKING BACK...

### A vanguard among our communities

Did you know...

- Hassle Free Clinic has been in operation for nearly 40 years! Starting from grassroots initiatives and growing while maintaining its community-based approach to sexual health care.
- Hassle Free Clinic's location has changed several times to meet the needs of our perpetually growing and ever changing population. Our present location is wheelchair accessible.

## ... LEADING THE WAY

- Did you know Hassle Free Clinic was one of the early responders at the beginning of the HIV/AIDS epidemic?
- Did you know Hassle Free Clinic was the first in Ontario to offer “illegal” anonymous HIV testing?
- Did you know Hassle Free Clinic was the first clinic in Canada to offer rapid point-of-care HIV testing?

Following the first wave of the AIDS crisis in 1983-84, the clinic began offering HIV education and prevention counselling. When HIV testing became available in 1985, the clinic immediately offered testing on an anonymous basis. At this time “anonymous” testing was illegal in Ontario. The number of male clients testing positive for HIV increased each year, reaching a peak of 230 in 1990. The seropositive rate in the Women’s Clinic was low and remained stable during this period. In the late 1980s, the clinic introduced HIV positive support group programs for women and men which were well received by clients, and highly regarded by other health providers.

In 1985 the clinic mounted a campaign to legalize anonymous testing. Under pressure from community organizations, Toronto City Council and the Board of Health publicly endorsed the program. The Ontario Ministry of Health, however, refused to support the program until January 1992, when the NDP government legalized anonymous testing. Having offered anonymous HIV testing for the previous seven years, HFC was relied on to develop Ontario’s Anonymous Testing Guidelines and train staff in designated sites across the Province.

In 2001, Hassle Free became the first clinic in Canada to offer rapid point-of-care (POC) HIV testing on site, which was halted due to questions about the accuracy of the device. In May 2006, HFC once again became the first clinic in Canada to offer such testing with a newly approved device. This device has proven to provide consistently accurate results since that time. It is 99.5% accurate, similar to standard laboratory testing. Results are ready in a few minutes as opposed to waiting a week or two with the standard method. Individuals still have the choice of choosing either testing method but the vast majority of individuals choose rapid POC testing for obvious reasons. Based on our experience with POC testing and our lobbying

efforts, the Ministry of Health and Long-Term Care announced in 2007 that it would be making POC tests available at designated sites across Ontario

Another focus has been trans inclusivity at the clinic. With this goal in mind, we have redesigned our intake sheets, client service brochures, hour slips, data collection systems, STI information sheets, website and waiting room. Physician, staff and volunteer training about trans care is an ongoing process.

Since the beginning, Hassle Free Clinic has played an important front-line role in identifying and serving the sexual health needs of a large and diverse at-risk population. We are increasingly called upon as consultants in developing health policy and educational programming. Without compromising our front-line status, we are now firmly established as a partner in Toronto Public Health's sexual health program, as well as the Ministry of Health and Long-Term Care's HIV testing program.

After 39 years of providing medical care to high-risk clients in a non-traditional setting, we are proud to be one of Canada's largest and most influential sexual health clinics.

"Thank you so much for helping me when I needed some help. I greatly appreciate it. I know I am not your usual target group – so please put this donation to good use so I won't feel bad about taking your resources"

"Thank you for your kindness and consideration through a very difficult time. I can't express how much I appreciate the caring and understanding you showed me"

- Quotes from  
Hassle Free Clinic  
clients

## HASSLE FREE CLINIC'S CORE VALUES

### INFORMATIVE ➤

Complete and understandable information about reproduction, sexuality, birth control and Sexually Transmitted Infections (STIs)

### CONFIDENTIALITY ➤

Confidential STI testing and treatment, with emphasis on client responsibility for follow-up and informing contacts

### ACCESSIBILITY ➤

Access to Anonymous HIV counselling, testing and support  
Access for women to the full spectrum of reproductive care

### INFORMED CHOICE ➤

Active client involvement in health care decisions, emphasizing fully informed choice

### RESPECT ➤

Medical treatment and counselling provided in a respectful, non-judgmental manner

### CELEBRATING DIVERSITY ➤

Work from anti-oppression framework that recognizes and celebrates the wide diversity of Toronto's communities

## Hassle Free Clinic Philosophy

Hassle Free Clinic places great importance on maintaining equitable staff-client relationships and non-judgmental attitude to sexually related health concerns. The Clinic is committed to maintaining the following values and principles in the provision of sexual health care:

## Highlights of 2012

### Hassle Free Clinic and New Media

In 2010, Hassle Free started to examine our current web presence, how we could use available media to our benefit, and how our clients might be best served through social media.

Currently, the clinic uses our own website, and maintains general accounts on Facebook and Twitter to communicate clinic closures, service limitations as well as any relevant health information. For example, in the past year, Hassle Free used these accounts to communicate information on drug resistant gonorrhea, updated PAP guidelines, a meningitis travel advisory for MSM, and to promote several surveys and research opportunities to our clients.

Starting with the HIV Testing Blitz in 2011, Hassle Free also used several websites and mobile apps to communicate clinic information to MSM populations. Two microsites were created, [come-on-in.ca](#), and [viens-nous-voir.ca](#), to communicate the key messages of the Blitz, and we continue to refer to their content through our current site. We've had great success and feedback from clients after seeing Hassle Free present on sites such as [gay.com](#), [squirr.org](#) and [craigslist.org](#), as well as on geolocating hookup apps including Grindr and Scruff.

Next year, we will continue to maintain our presence online, as well as look at increasing our capacity through an evaluation and redesign of [hasslefreeclinic.org](#).



## HIV/SYPHILIS BLITZ

### PROGRAM STATISTICS

- 49 extra clinics ran during the second iteration of the blitz

### HIV TESTING

- 730 HIV rapid POC tests with pre and post test counselling were conducted
- 22 were HIV positive
- Positivity rate of 1.77%

### SYPHILIS TESTING

- 454 syphilis tests were conducted
- 7 were new syphilis infections
- Positivity rate of 1.54%

## HIV/Syphilis Testing Blitz & Enhanced Testing (ET) Program

We reported last year of our involvement in a testing blitz aimed at gay men and MSM. This Blitz was funded and took its overall direction from the AIDS Bureau, with other partners involved. Much effort was put into promotion, education and evaluation but Hassle Free's main contribution was the running of actual clinics at various locations.

Several measures indicate that the campaign was successful. This initiative had main three objectives:

1. Encourage high risk men to test for HIV
2. Improve knowledge about HIV transmission, seroconversion symptoms and the window period
3. Raise awareness of the links between other STIs, especially syphilis and HIV transmission.

Based on the success of the Blitz, the AIDS Bureau approached Hassle Free with an interesting proposition. Feedback from the Blitz verified that Hassle Free's name was a draw for gay men and MSM, regardless of the location. The AIDS Bureau proposed an increase in funding, on an ongoing basis, to offer an Enhanced Testing Program. This funding was approved in November of this year.

On-site Sunday clinics began immediately, which have proven immensely popular. We also started the infrastructure work necessary to support this new programming, such as database and website re-designs.

We are making plans to offer off-site clinics in 2013 at four different locations; the AIDS Committee of Toronto, South Riverdale Community Health Center, the 519 Community Centre and St. Stephen's Community House. Other sites may be considered as program development continues. We are excited by this new direction and the growth it represents for us.

## **Multi-Drug Resistant Gonorrhea**

### **Did you know?**

- Gonorrhea (GC) is the second most common reportable sexually transmitted infection in Ontario
- Not everyone with GC will show symptoms
- The most common symptoms among men include: a burning or painful sensation when urinating, and/or a white, yellow or green discharge from the penis
- The initial symptoms among women include burning or painful, sensation when urinating, increased vaginal discharge and/or vaginal bleeding between periods.

This year, the clinic was instrumental in triggering a change for the treatment of gonorrhea (GC). GC is the second most common reportable sexually transmitted infection in Ontario.

Hassle Free staff were starting to see treatment failures when cefixime was used (a one pill-treatment). This was not a complete surprise as cefixime failures were reported in some other countries. But no research was conducted to see if that was the case here.

Hassle Free Clinic has a high success rate following up positive GC cases with tests of cure. These protocols were established many years ago to maintain a high standard of care. With the development of new less invasive urine tests using Nucleic Acid Amplification Testing (NAAT), we continued to use cultures on symptomatic clients which were dropped in many other places allowing us to monitor antibiotic resistance from susceptibility reports.

Dr. Vanessa Allen, a Microbiologist with Public Health Ontario worked with the Men/Trans clinic to do a chart review of treated gonorrhea cases. It showed that out of 291 cases, 133 returned for a test of cure. Of those, without any risk of re-infection, nine individuals were still GC positive. While most providers were using Nucleic Acid Amplification Testing (NAAT) only, Hassle Free ensured the health of our patients by also doing culture testing, which has the ability to tell us which drugs the specific strain of GC would be sensitive to, so all patients were cured.

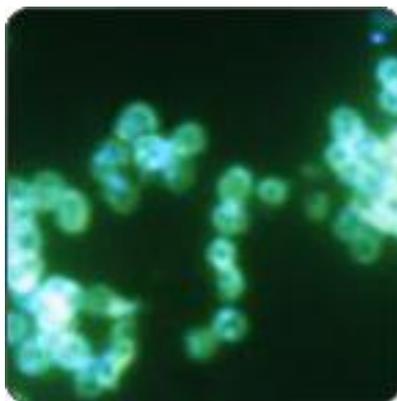
The work of Dr. Allen and the Men/Trans staff led to a change in the Province's treatment recommendations. Everyone who is GC positive, or a contact of a person with GC is now being treated with ceftriaxone, an injectable antibiotic. It is expected the federal guidelines will follow suit in 2013. The work also led to the publication of an article on our study in the

prestigious Journal of the American Medical Association (JAMA) with Leo Mitterni being named as one of the principal investigators.

Although this change was necessary to ensure gonorrhea is properly treated, it is a short-term solution. All of the experts agree that it is not a matter of if, but when, GC will also become resistant to ceftriaxone, and there are no new drugs in the pipeline to replace it. Hassle Free Clinic will continue with the standards of practice already in place which has served us well in the past and should in the future as well.



The above image is a microscopic view of a stained sample of gonorrhea detected in a urinary tract specimen



Antibiotic-Resistant Gonorrhea

- GC has progressively developed resistance to antibiotic medications used to treat it
- It is crucial to continuously monitor antibiotic resistance and encourage research and development of new treatment regimens

## *Highlights of 2012*

### **Organizational Restructuring**

Hassle Free is probably one of oldest collectively-run organizations in the City. It has thrived and grown within this structure, but ironically, that growth has now made functioning and further growth within a collective difficult.

With that in mind, in 2012 our Board of Directors decided to undertake a structural review. By September of this year, we had hired a consultant, Michael Dick of the Osborne Group. Although it remains a work in progress, lots of headway had been made by year end. Michael interviewed all staff about our roles and had draft job descriptions for our review. He had also drafted a new Personnel Manual that reflects our organizational values and is in compliance with all employment legislation. In addition, he recommended two long-term staff people be given the title and authority of Directors within each clinic with shared responsibility for overall clinic management.

For a change process, it has gone remarkably smoothly. It is a change that has been under discussion for many years, and thus far has been well accepted. We look forward to the implementation of these changes for 2013.

## CHANGE...

The Board of Directors voted to hire a Human Resource Consultant to develop recommendations in three areas:

- Develop job descriptions
- Develop different reporting and accountability roles
- Revise/Update the Personnel Manual to ensure legislative compliance

### Volunteer Program

Hassle Free is extremely thankful to have a very committed team of volunteers. There were over 60 active volunteers in 2012, contributing well over 5,000 hours of service. They form an integral part of our perpetually busy clinic. From greeting people at the reception counter to booking appointments, they are in many ways the face of Hassle Free – the first voice and face with whom clients come in contact. This can be very challenging, as clients often are in crisis when they call or attend the clinic. We rely on volunteers to also assist with research, collating data, and the day-to-day maintenance of the clinic.

Each year, the clinic undertakes volunteer training. Front desk volunteers are trained to do appropriate screening when booking appointments. Even though this can involve complicated assessments of a variety of situations, it is working extremely well. Our volunteers have a strong knowledge base, but ensure staff are consulted when appropriate.

Hassle Free also works with a very solid and committed group of “behind the scenes” volunteers. Our nine-member, community-based Board of Directors continues to lend a wealth of expertise, skill and guidance to our overall operations. The staff is particularly grateful for the Board’s unwavering support.

Many of our volunteers take initiative and go above and beyond the call of duty with regard to hours and responding to last minute requests. Our volunteers take great pride in their work and many have been extremely loyal for years. We are especially appreciative to several of our volunteers who have provided service

### Interested in volunteering ?

#### APPLY IN PERSON

- Application forms are available at the front desk

#### APPLY ONLINE

- Go online and fill out the application forms available at:

<http://www.hasslefreeclinic.org/VolunteerForm.php>

- Please note that volunteer applicants will be contacted on an as needed basis
- Prospective volunteers are interviewed, must sign a confidentiality agreement form and go through an orientation and training process provided by staff and other volunteers
- Duties are mostly administrative such as filing, booking appointments and other tasks as needed
- On-going training and support is provided

for over 5 years. These include Ronald Benedetti, Ed Follet, Sean Gamble, Richard Gilmour, Wolfgang Hock, Lysanne Menezes, Ben Moase, Warren Ross, Harvey St. Amant, Jane Tooley and Stephen Westfall.

# THANK YOU!

## A DECADE OF VOLUNTEERING EXCELLENCE!

We would like to commend the following individuals for their outstanding service and commitment to the Clinic. Their loyalty and dedication continue to go above and beyond the call of duty.

Robert Booth - 10 years

Wolfgang Hock – 10 years

Warren Ross – 10 years

Harvey St. Amant – 11years

## **Student Placements & Training**

Clinical health education is an important part of our commitment to community education. The clinic has had many excellent students and, over time, several have been recruited to work as relief, as well as for outreach and our Bathhouse program. The clinic often supervises residents, nursing and medical students from several institutions. Periodically, we also have staff from various agencies attend the clinic for observation and training, particularly around rapid HIV POC testing.

## **Clinical Trials & Studies**

The clinic is often invited to be involved in research related to sexual health matters. The Clinic continues to be involved with a study entitled Linking Molecular and Social Clusters in Analyses in HIV Transmission. This interesting study is being carried out jointly by the University of Windsor and the Ontario HIV Treatment Network. The study is designed to better understand what social sub groups are being most affected by HIV, so targeted prevention efforts can be applied. We are doing this by obtaining a blood sample to identify molecular HIV types and comparing them to social clusters to try and better understand patterns of transmission. This study's aim is to better comprehend the relationship between different molecular strains of HIV and linking them with various social clusters by interviewing recently diagnosed HIV positive men who have sex with men about their social and sexual interactions.

Hassle Free is also collaborating with St. Michael's Hospital in a syphilis study. This research study will help us identify if a new method of testing blood samples can give us new information about the different stages of syphilis infection.

The clinic is also investigating the possibility of conducting a prevalence study of *Mycoplasma genitalium* (MG). The clinic hopes to assess MG in our communities to improve testing and treatment of this bacteria.

## Conferences and Professional Education

- 519 Community Centre Refugee Drop-In – HIV Testing
- AIDS Bureau HIV Test Conference Plenary
- AIDS Bureau Point of Care and Anonymous Test Training (3 sessions)
- AIDS Bureau Strategy Consultation
- AIDS Committee of Toronto – STI 101 Joint Volunteer and Outreach Training
- AIDS Committee of Toronto – Portuguese Speaking Gay Men’s Group, HIV 101
- AIDS Committee of Toronto – Totally Outright, Pre HIV Test Counselling
- Alliance for South Asian AIDS Prevention – Healthy Relationships for Queer/Questioning Men
- Black Coalition for AIDS Prevention Training
- CATIE –Dialogue on Treatment and Prevention Planning Committee and Attendance
- Filming on HIV Testing for Deaf Outreach Project
- Filming on HIV Testing for a Mosque in partnership with Africans in Partnership Against AIDS (APAA)
- Positive Youth Outreach – Healthy Relationships
- Ryerson School of Midwifery – Sexual Health, Abortion, HIV Testing
- Sexual Health Network – Issues in Herpes Counselling
- Sexual Health Network – HIV 101
- South Riverdale Community Health Centre – Anonymous and Point of Care Testing
- Toronto Public Health – POC Training

## **Networks and Working Groups**

- AIDS Bureau Testing Frequency Working Group
- CATIE (Canadian AIDS Treatment Information Exchange) Advisory Committee
- Centre for HIV Positive Women and Their Families Working Group
- Clinic Sharing Network
- Crystal Meth Working Group
- Gay Men's Sexual Health (GMSH) Network
- HIV AIDS Bureau Provincial Strategy Consultation
- HIV Patient Instructor Steering Committee (University of Toronto Medical Students)
- HIV/Syphilis Blitz Evaluation Committee
- M2M Networking and Working Group
- Ministry of Health HIV Network
- Mycoplasma Study Advisory Committee
- Native Youth Sexual Health Group
- Positive Youth Outreach
- Public Health Agency of Canada (PHAC) - Counselling and Testing Guidelines Expert Working Group
- Sexual Health Network
- Women's College Hospital Community Advisory Board

## **Media Interviews and Articles**

- CTV National News
- Global Television
- Journal of American Medical Association (JAMA)
- Toronto Star
- Xtra Magazine

### Anonymous HIV Testing Program

Anonymous and POC HIV testing continue to be the clinic's best-known programs. Counselling focuses on HIV transmission, willingness and ability to practice safer sex, identifying barriers to safer sex practices, and a rational understanding of relative risk. The impact of testing positive and dealing with an HIV positive result are discussed. As in all sexual health counselling, STI, birth control, pregnancy, assault and abuse issues are dealt with as appropriate.

A continuing trend with clients is HIV anxiety unrelated to risk. We regularly see clients who have out-of-control anxiety about being infected with no real risk. Clients are not refused testing, except where too-frequent testing is contributing to their anxiety. Counselling these clients has become easier with the introduction of counselling guidelines developed by the High Anxiety No/Low Risk (HANLR) Working Group.

The total number of HIV positive results although lower, remained relatively consistent with previous years. Last year, we reported 100 positive tests compared to 92 in 2012. There was a slight increase in number of women who tested HIV positive; with 7 new cases among heterosexual women. Women now represent 1 in 5 new HIV diagnoses in Toronto. There were a total of 85 positive HIV results from the Men & Trans clinic. This number includes 3 positives from bathhouses and 11 from the HIV/Syphilis testing Blitz.

Usually, HIV testing is conducted by appointment only. This is to ensure that adequate time is allotted for a potential positive result, as well as to ensure proper consent, counselling, and referrals. However, the clinic continues to offer walk-in HIV POC tests for individuals with extenuating circumstances. The Men/Trans Clinic offers immediate POC tests for all suspected and confirmed syphilis cases. This continues to be a challenge given the on-going syphilis epidemic. It is particularly important for patient care however, as syphilis treatment is different for HIV positive individuals.

### Did you know?

- Ontario positivity rate at Anonymous Test Sites is approximately 3 times greater than in other forms of testing (Nominal or Non-nominal).
- Ontario has one of the highest pre-natal testing rates in Canada based on a client-centred, express consent policy
- 1 in 120 adults in Toronto are HIV positive
- Women represent 1 in 5 new HIV diagnoses in Toronto

### HIV Positive results in 2012

- M/T Clinic = 85
- W/T Clinic = 7

## BATHHOUSE OUTREACH STATISTICS AT A GLANCE

Total number of HIV antibody tests:

339

Total Number of HIV Positive Results:

3

Total number of STI tests (Syphilis and Hepatitis screening):

110

Total number of clients seen during bathhouse outreach:

556

### **Bathhouse Outreach Program**

Since 1975, the clinic has provided anonymous STI testing and information at local baths. The service began as a routine STI testing clinic, with an HIV counselling component added in 1983, anonymous testing in 1995 and rapid POC testing in 2010. Clinics usually run for 3-hour sessions in five Toronto bathhouses. We provide free condoms and lube, and testing for HIV, syphilis and hepatitis. Bath management has always cooperated, offering space for testing, regular announcements and display areas for educational materials.

The program is aimed at all Bathhouse patrons, but in particular at men who otherwise might not attend a clinic or their doctor for STI and HIV concerns. While many patrons are self-identified gay men who have no difficulty accessing services, others fall into a variety of hard-to-reach communities. Bathhouses have always attracted closeted bisexual and married men who have sex with men (MSM) who require the anonymity of this setting, and who are unwilling to access sexual health services in their communities. The clinic has been actively cooperating with other agencies offering community-specific outreach services. The bath program offers an ideal opportunity for staff to provide information and testing to specialized groups within the MSM community. It is noteworthy that the number of HIV tests has more than doubled since we began offering rapid POC HIV testing at the baths. This year, 3 individuals tested HIV positive in the bath program.

The clinic continued to collaborate with the M2M partners for several regular special-event Bathhouse testing nights. In particular, we partnered with Asian Community AIDS Services (ACAS), Alliance for South Asian AIDS Prevention (ASAAP) and Centre for Spanish Speaking People (CSSP).

## Health Promotion & Nursing Clinic Program

The Health Promotion/Nursing Clinic for HIV Positive women/trans women continued to grow in popularity in 2012. This year, in response to the overwhelmingly positive feedback and thanks to an allocation from the consortium that received the funding from “VOICES”, we were able to move the group from once to twice monthly. Twice-monthly programming began in June of 2012. This was also made possible by a one-time grant from Alterna Savings, a credit union that funds community programs. The women welcomed the extra groups as they provide more frequent opportunities to meet and be with other HIV positive women.

Attendance rose from an average of 17 participants to an average of 23 per group, covering topics from treatment information to domestic violence. The education and support opportunities have empowered some women to venture out and register for school or look for work. The group has also allowed participants to build peer connections where they can provide support for each other when needed. In addition at each group, women avail themselves of the opportunity for one-on-one nursing consultations.

An offshoot of the HP/Nursing Clinics has been the development of our individual support program. Our HIV positive women’s support worker has provided emotional support and practical assistance on many fronts for women in the group. This includes accompaniment to appointments, hospital visits, delivering medication to give support for adherence, home visits where support has been needed around relationships, children, family deaths, etc.

Through these groups, we have identified a need for stronger, women-centered support programs, and would like to investigate the feasibility of this in 2013.

This program is made possible with the donation of space and the consistent help of volunteers from People With AIDS Foundation. In addition, our thanks go to Casey House for the provision of childcare funds and nursing staff, and to PASAN for staff support.

Total attendance  
at Health  
Promotion &  
Nursing Clinic:

330

Individual  
nursing  
consultations:

55

## Links Statistics

- 28% of referrals were made to the AIDS Committee of Toronto (ACT)
- 19% of referrals were made to Towel Talk (housed at ACT)
- 9% of referrals were made to the The 519 Church Street Community Centre
- 15% of referrals were categorized under “other”

## Making the Links Program

The Making the Links is a program for MSM who are taking high risks and/or have other things going on that may be impacting their choices. Almost all Links’ clients discuss barebacking, HIV/AIDS and risk reduction. It is useful to note some of the issues associated with high risk behaviour; that is, anxiety, stress, depression, guilt, shame, loneliness, isolation, substance use, family issues, relationship issues, abuse, bathhouse issues, coming out or unresolved sexual identity issues.

Almost all clients seen by the program were given a community referral, doctor referral and/or hard-copy resources to walk away with. Some clients preferred to just talk and refused further referrals; nor were further referrals appropriate in each instance depending on individual motivations to make a behavioural change. Community programs and support groups were most often framed as mediums for breaking poor behaviour patterns, increasing social opportunities in safe spaces and being able to talk about things that matter to them in non-bar or substance-using environments.

## Sexual Health (STI Testing) Program

The number of sexual health visits for each clinic has steadily increased by approximately 2,000 since 2009. Despite the increased volume physicians, nurses, staff and volunteers continue to provide the same high standard of care. Positivity rates have remained relatively stable.

Sexual health visits remained relatively stable in both clinics in 2012. More than three quarters (80%) of the visits to the Men/Trans clinic were for testing and treatment of STIs and/or STI related concerns. Sexual health visits to the Women/Trans clinic include contraception, pregnancy tests, abortion referrals and other gynecological concerns.

### Total Number of Sexual Health Visits in 2012

Women/Trans Clinic:

7,853

Men/Trans Clinic:

14,968

### Comparison with 2011

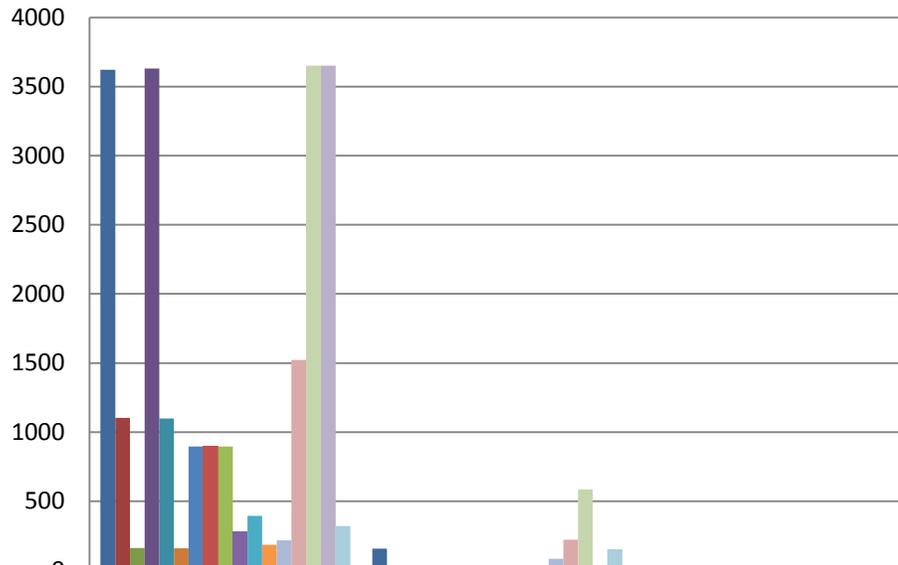
Women/Trans Clinic:

8,176

Men/Trans Clinic:

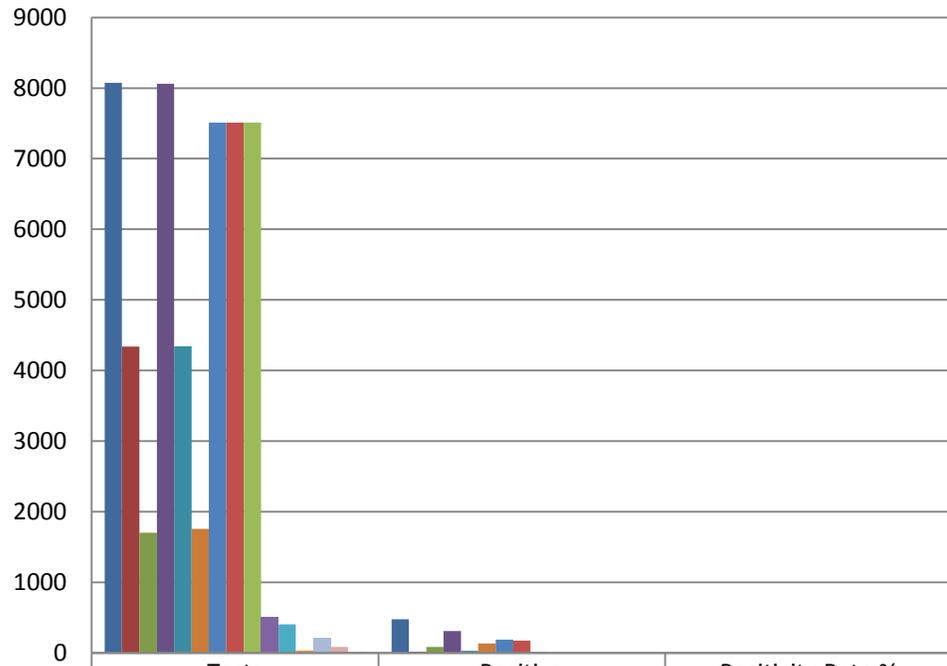
15,094

## Women & Trans Clinic STI Statistics



	Tests	Positive	Positivity Rate %
■ Chlamydia - Cervical	3621	158	4.36%
■ Chlamydia - Pharyngeal	1104	2	0.18%
■ Chlamydia - Rectal	162	2	1.23%
■ Gonorrhea - Cervical	3630	23	0.63%
■ Gonorrhea - Pharyngeal	1099	2	0.18%
■ Gonorrhea - Rectal	159	2	1.26%
■ Syphilis	896	4	0.45%
■ Syphilis - Infectious	896	0	0.00%
■ Syphilis - Late Latent	896	4	0.45%
■ Hepatitis A	280	0	0.00%
■ Hepatitis B	393	2	0.51%
■ Hepatitis C	184	1	0.54%
■ HSV I & II	217	84	38.71%
■ Abnormal Paps	1521	222	14.60%
■ Bacterial Vaginosis	3652	585	16.02%
■ Trichomonas	3652	19	0.52%
■ Urinary Tract Infection (UTI)	320	152	47.50%

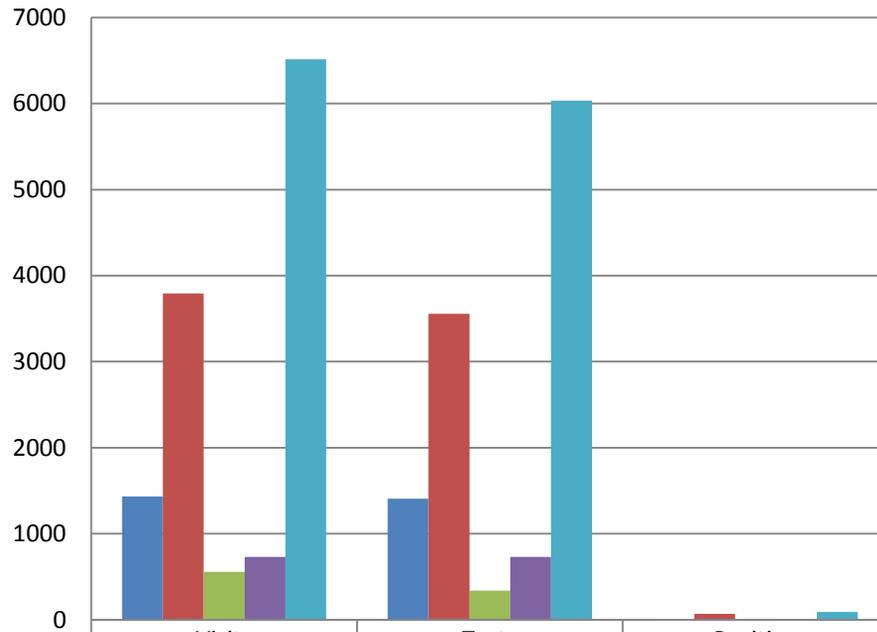
## Men & Trans Clinic STI Statistics



	Tests	Positive	Positivity Rate %
■ Chlamydia - Urethral	8075	478	5.92%
■ Chlamydia - Pharyngeal	4341	15	0.35%
■ Chlamydia - Rectal	1703	84	4.93%
■ Gonorrhea - Urethral	8061	308	3.82%
■ Gonorrhea - Pharyngeal	4344	29	0.67%
■ Gonorrhea - Rectal*	1757	133	7.57%
■ Syphilis	7513	189	2.52%
■ Syphilis - Infectious	7513	176	2.34%
■ Syphilis - Late Latent	7513	13	0.17%
■ Hepatitis A	506	0	0.00%
■ Hepatitis B	406	5	1.23%
■ Hepatitis C	35	4	11.43%
■ HSV I & II	206	0	0.00%
■ LGV*	87	5	5.75%
■ Parasites	20	0	0.00%

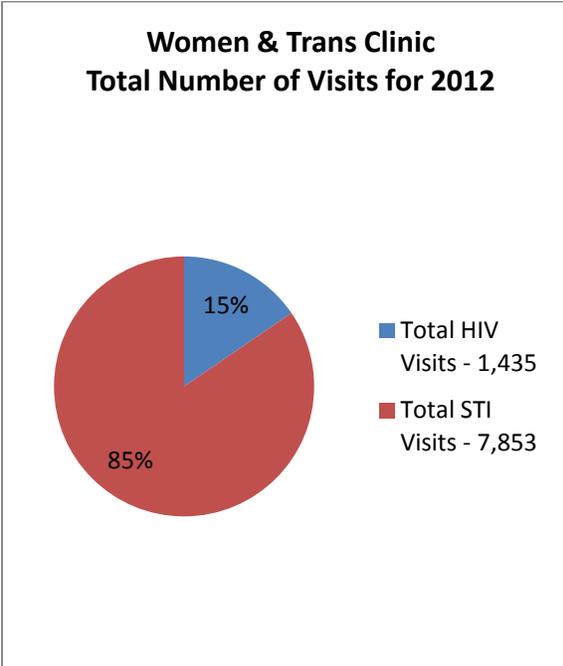
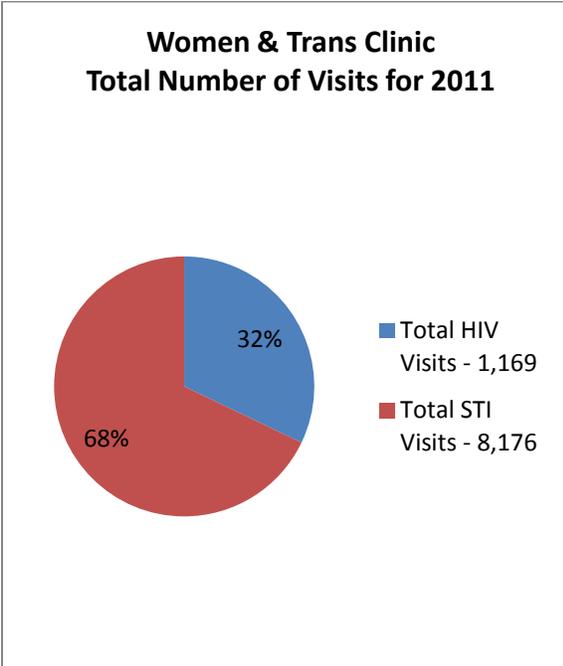
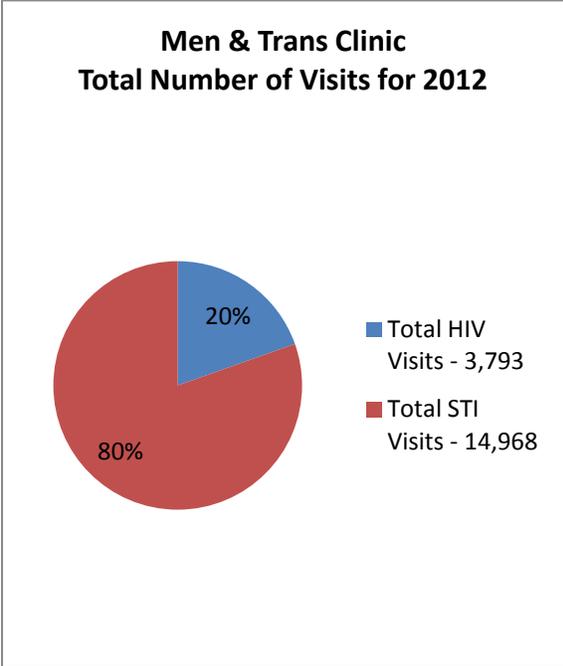
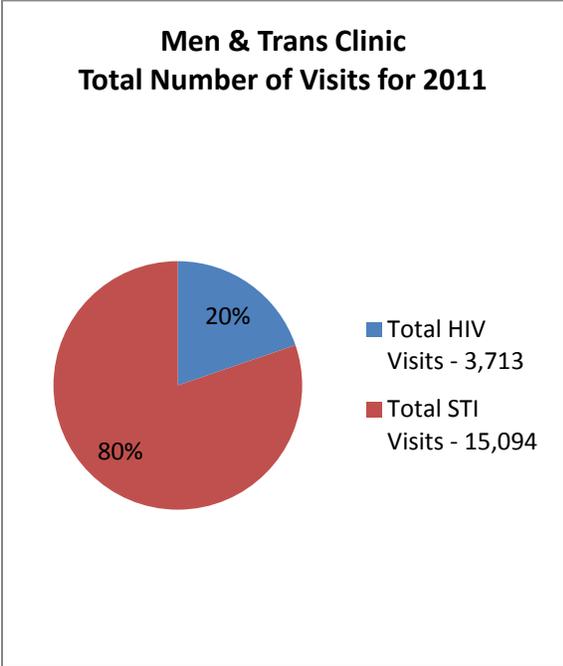
\*All Rectal Chlamydia is processed for LGV

## HIV POC Statistics



	Visits	Tests	Positive
Women & Trans Clinic	1435	1407	7
Men & Trans Clinic	3793	3556	71
Bathhouse Outreach	556	339	3
HIV Blitz	730	730	11
TOTAL	6514	6032	92

# Total Number of Visits – Comparison with Last Year’s Statistics



The STI Visits category includes contraception, pregnancy tests, abortion referrals and other gynecological concerns.