



**planned  
parenthood**

TORONTO

**annual report  
2007-2008**



# ppt then and now: change is good (sometimes)

**Planned Parenthood Toronto (PPT)** began its fiscal year unpacking moving boxes as we expanded our organization to include two sites. Site A houses our new training centre, our community education programming, and research initiatives; Site B continues to be the central place for our clinical services for youth, our women's and teen programming areas, and administration offices. Our big move ends what we were then, and initiates what we are now – **a versatile, responsive and growing organization providing a wide range of clinical services to youth 13 to 29 years, innovative health promotion and prevention initiatives, and community engagement initiatives that build expertise across the health centre sector.**

With this expansion came many operational and environmental changes: a new phone system and computer network upgrades to increase our capacity to meet the needs of our fast infrastructural growth, renovations to our site B (on Prince Arthur Avenue) to include two new examination rooms, new office spaces and a renovated waiting room and reception area for our clients and guests. The feedback from our clients thus far indicates that they're "loving" our new look and expanded waiting area.

Our second site is a barrier-free location which allows us opportunities to invite the community in for training sessions, support groups, volunteer activities, community meetings and to participate in other PPT events. Though these changes meet our current needs, we recognize that working from two locations

is not our ideal solution. We look forward to launching a capital campaign in the foreseeable future that draws on the support from our communities and donors to help us to reunite our staff team in a new, barrier-free building with enough physical space to accommodate current and future programming and service needs.

This annual report highlights our major accomplishments for the 2007-2008 fiscal year, and there were many: from establishing the **one-stop shop** in health services to building innovative programming for **young parents, young men and newcomer youth**. This past year we expanded our women's programming by piloting new programming at **Julliette's Place** and consulted with the community and women who have sex with women (WSW) to produce the report **Dis(engaged)** which captures the barriers WSW face in accessing sexual and reproductive health care services. In our teen programming area we supported the development of **peer-led workshops** in community settings by training youth volunteers to deliver healthy sexuality workshops to their peers. Our award-winning anti-homophobia program **T.E.A.C.H.** (Teens Educating And Confronting Homophobia) continued to break new ground by reaching over 3,000 youth through 115 workshops. The **Toronto Teen Survey**, our first community-based research project, reached over 1,200 communities of diverse youth whose comments will greatly inform and change the way in which we provide services. The final research report is in progress, but the initial findings were shared earlier this year at consultations

with community partners, many of whom have already commented on the potential of this project to create a new framework for sexual health services for youth.

And finally, at the governance level, we initiated the development of a **new PPT Equity Vision** to solidify our commitment to equity and to challenge us to ensure that equity principles are reflected in all aspects of our agency.

In the external environment, it was also a year of movement and change. We moved from provincial funding to the **Local Health Integration Network (LHIN)** and the year was spent learning about our new funding partner, the Toronto Central LHIN (TC LHIN), and seeking opportunities to familiarize them with what we do. Within the Community Health Centre sector a move from a provincial to a localized funding model could potentially mean different priorities, funding levels and relationships across the province. However, Ontario's community health centres, now split between the 14 different LHINs, continue to maintain a strong and vibrant bond that will keep us connected and committed to our unique model of care. A new branding campaign, unveiled

by the **Association of Ontario Health Centres (AOHC)** this past year, symbolizes the strong and identifiable connection of Community Health Centres. We ended the fiscal year hearing the TC LHIN speaking about health equity and why it is important for all health service providers to address issues of access for disadvantaged populations. This is very encouraging news. Community health centres are founded on the premise that they provide services to populations who face barriers to access and we can lead in demonstrating with our LHINs what the needs and barriers are and how to work together to address them.



Credit: Rodrigo Moreno

For Planned Parenthood Toronto, breaking down access barriers to sexual and reproductive health services is a proud and vital part of our history. Being a voice for women and all youth is an integral part of what we do. Challenging changes to the criminal code to increase the **age of consent** this year is one example. This amendment proposed that youth under the age of 16 can no longer consent to sexual activity. However, there is an important exception called the "close-in-age" exemption which allows teens to have consensual sex with peers who are within five years of their age without facing prosecution. Our concern with this age of consent legislation is that it can potentially confuse youth as to whether

any exploration of sexuality under the age of 16 is a criminal offence and therefore keep youth from seeking information about sex and sexuality, sexually transmitted infections and reproductive health if they feel they are doing something illegal. It is already challenging for youth to feel safe to disclose any information about their sexual health. They face many systemic barriers to access as well as biased and judgemental services. This legislation, now law, may add more barriers to access and create confusion among youth rather than building trust and informed decision-making. While we did not win this challenge, our role now is to ensure that our clients know what the law means and how it impacts them.

In the 1960s Planned Parenthood Toronto led the way for change in other laws that restricted reproductive choice and freedom. It's true that we live in a

different age and time when access issues look and affect us differently. Our agency-wide changes parallel the multitude of changes in our environment (diverse communities, needs, funding resources and accountabilities) however we are ever mindful of what change can do to improve and challenge individual lives. Our staff, board and volunteers are part of that continuum of change that collectively makes our agency strong, vibrant, engaged with, and responsive to the needs of the communities we serve.



Hazelle Palmer  
Executive Director



Tania Little, CFRE  
Chair, Board of Directors

“Staff are *cool*,  
queer-positive, and  
open-minded.”

Planned Parenthood Toronto's Health Services continue to enhance existing services and develop new ones that respond to emerging health issues and client input. In 2007-2008, we saw a growth of the **One-Stop Shop** concept - making PPT's Health Services the one place clients need to go to meet all of their healthcare needs. One of the main areas of growth has been in the **Mental Health Services** area. The Case Coordinator role was created, based on client feedback, and the services provided by the Case Coordinator, including mental health intake, crisis intervention, referrals, advocacy and coordination of services, have been widely used by our clients. We also piloted an art therapy group for young parents, as a way of creatively engaging our clients in mental health services, and it proved to be a great success.

Our **prenatal care services** and services for young parents continue to grow in reputation in the community, and, with the addition of the case coordinator role, we are now able to better serve our pre- and post-natal clients. From enhanced partnerships with area hospitals and midwives to more funding for childcare for clients accessing our services, we aim to support all of our clients in their reproductive choices.

We continue to stress the importance of **peer-to-peer education** in health services, and as a result have introduced new components on healthy sexuality and sexual pleasure in each education session. We have seen an increase in the number of male volunteers, which is helpful in reaching male clients.

Our focus on increasing access to healthcare led us this year to re-examine our appointment and drop-in schedule based on client feedback, and begin to offer all-day drop-in. One of our biggest successes in the past year has been our designation as an anonymous HIV testing site. Moreover, we are now able to offer point-of-care rapid HIV tests, which further increases client access, as they no longer have to wait three weeks for their HIV results. We were also able to speed up our process of extending the age range served, and now offer full health services to any youth aged 13-29.

As in past years, client feedback has been instrumental in helping us to gauge the work that we do and improve it to better meet the needs of the community. Overwhelmingly, clients are pleased with the care they receive at PPT: of 219 survey respondents, 98% felt that PPT supports them to make their own choices about their health and well being, numbers which we feel confirm the importance of the work that we do to make Toronto youth and women experts in their own healthcare.

17 active *youth volunteers*

2,445 clients

64% between 16 and 19 years

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Teen Sex InfoLine and Instant  
Messaging Services

Planned Parenthood Toronto's Teen Programming provides several initiatives for youth 13-16 years old to get reliable information about sexuality and sexual health and increased access to community resources.

Our **Teen Sex InfoLine**, a telephone service where teens can speak to trained peer volunteers about sexual health and relationship issues, continues to be strong fifteen years after its inception. Our **instant messaging service**, where teens can reach these same volunteers through an Internet chat program, is still the most popular amongst our clients. Our website, Spiderbytes, also continues to draw in youth looking for answers to their pressing questions. In 2007-2008, the top issues clients requested information on were birth control, pregnancy, sexually transmitted infections and relationships. In addition, many of these clients received referrals to community agencies and websites and information about navigating health care and social services systems.

A new area of growth in Teen Programming has been the provision of sexual health workshops in schools and peer-led workshops in community-based programs for teens. This is an outgrowth of the workshops led by the **Toronto Teen Survey's Youth Advisory Committee** (YAC), as part of the data collection phase of the research. As this phase finished, it was clear that there was still a need and desire from community agencies and schools to have peer-led workshops continue. PPT addressed this need through the internal integration of the YAC into Teen Programming, and piloted the program in early 2008. The pilot was a

success, and the program will go into full operation in 2008-2009.

Teen Programming continues to focus on the **importance of volunteers** in the delivery of services, and in their training. Volunteers take a 10-session training which encourages them to examine sexuality issues from an anti-oppression perspective, increase communication skills, and increase their knowledge of sexual and reproductive health information and resources. Being a peer volunteer with Teen Programming has proven to greatly enhance the skills, knowledge, confidence and opportunities of the youth involved and has led to increased job opportunities and greater eligibility for admission to university and college.

**33** hours

**154** women

**11** *weeks*

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Programming for Women at  
the Juliette's Place shelter

## women's programming

Women's Programming includes sexual health programming for newcomer women in shelters, peer-to-peer education services at The Bay Center for Birth Control and sexual health programming for Women Who Have Sex With Women (WSW).

In 2007-2008, PPT's Women's Programming focused on expanding much-needed programming for women in their reproductive years in the community, particularly to newcomer women residing in the shelter system. The **Julliette's Place Pilot** involved providing a variety ways for women to access accurate and relevant sexual health information in their own shelter location. For a period of 6 months, PPT staff provided opportunities for newcomer women to obtain sexual health information both within a group setting and at one-on-one sessions. To support this initiative, PPT staff and selected shelter staff formed an advisory committee that provided feedback on design, planning, implementation and evaluation of this pilot. In addition, PPT staff provided sexual health training to shelter staff to build their capacity to support women on their sexual health issues and to reinforce the work that PPT was doing.

PPT staff conducted 34 workshops to 374 women in shelters and community agencies on topics including healthy sexuality and self-esteem, birth control options, sexually transmitted infections and healthy relationships.

Our satellite **peer-based education service at the Bay Center for Birth Control (BCBC)** continued to be

effective at providing sexual health information and education to BCBC's clients. PPT's volunteers provided education and information to a total of 626 women, with an increased emphasis on sexual pleasure, STI prevention and breast and cervical health.

Another important focus in Women's Programming this year was the **Women Who Have Sex With Women (WSW) Sexual and Reproductive Health Community Consultation**. This consultation process was initiated with Sherbourne Health Centre to implement focus groups with women from WSW communities and conduct key informant interview with service providers. The final report, entitled **(Dis)engaged**, highlights the challenges and barriers in sexual and reproductive health faced by Women Who Have Sex With Women. One key finding was that WSW are often disengaged from the healthcare system, but have built resilience by finding alternate forms of healthcare and supports in their communities. The report was launched in a very successful community forum where over 50 service providers from across the city were in attendance. This report will form the basis for new programming initiatives at PPT for WSW communities.

It became obvious that our  
Time Out group could not  
**explore** their own issues without  
*building confidence* in their **ability**  
to parent.

This year in Community Programming, we have continued to provide important sexual health information, while also providing numerous opportunities for individual community members and community groups to shift attitudes and behaviour and to build important life skills. Establishing relationships with new communities, building partnerships and providing responsive community programming based on community health needs continues to be the foundation of the work we do.

**Health Promotion** continues to be an integral part of everything we do at PPT. For newcomer youth in high schools, this took the form of the **Self-Esteem Health Appreciation Respect Project (SHARP)**. A group of newcomer youth attended an eight-week, student peer education training program, and in turn held a health fair for their peers to pass on the information that they had learned in the sessions. Parent and teacher education sessions were also held to provide these groups with more information on how to support youth around sexual health issues. Finally, a service provider manual was created and distributed to help other service providers initiate and run similar programming in their communities. In addition to SHARP, health promoters continued to provide **healthy sexuality workshops** to youth in high schools.

PPT's **Time Out** Group, a casual drop-in space created to support young parents in their new role and to provide opportunities for them to explore their interests and develop their skills, remains successful in helping young parents to make more connections and friends and learn more skills to address challenges in their lives. Some of the key issues and themes that emerged this year included child development, sexual health, and increasing

visibility. A second program for young moms, a violence prevention project called **Through Her Eyes**, was created in response to requests from Time Out participants. Through Her Eyes uses expressive arts therapy to explore challenging relationship issues.

Our **Young Men's programming** grew this year, with health promoters providing workshops across the city, as well as a new, internal group beginning in March 2008. Key themes that emerged in young men's programming this year included healthy relationships, homophobia, mental health, links to health services, and the need to provide distinct programming for younger men accessing our programs. We also piloted a successful external Health Service for young men at **Second Base Youth Shelter**.

Anti-Homophobia Education for Youth, delivered through our **Teens Educating and Confronting Homophobia (T.E.A.C.H.)** program, maintains its excellent reputation in the City of Toronto. T.E.A.C.H. trains youth to facilitate anti-homophobia workshops in schools and the community. It has proven to be an excellent leadership opportunity for LGBTQ youth and their allies, and this year trained 15 new peer facilitators.

In the past year, T.E.A.C.H. has provided anti-homophobia education to diverse groups of youth. Issues of cultural and language access have emerged as issues to be addressed within the program. ESL students and youth from newcomer communities who experience language issues have expressed challenges in grasping some of the concepts and language in the current T.E.A.C.H. workshops. We look forward to finding new ways to address these challenges.

Almost **60%** of *youth*  
surveyed **said** they  
have **not** had **sex**.

## Research

Research continues to be an area of growth at PPT. This year marked the end of the research phase of the **Toronto Teen Survey**, a project which aims to gather information from youth on assets, gaps and barriers that currently exist in sexual health education and services and to use the information to develop a city-wide strategy to increase positive sexual health outcomes for diverse Toronto youth. In 2007-2008, the final surveys were conducted with youth across Toronto. In the fall, the surveys were analyzed and discussed and the data was compiled into graphs for presentation at survey provider focus groups. Between January and March 2008, findings were presented to 85 service providers in 11 focus groups. During these facilitated discussions, service providers were asked to reflect on what the results mean to them in their everyday work, how current services could be adapted or improved, and to provide input into the development of a comprehensive, coordinated city-wide strategy to improve and target sexual health services for youth that takes into account the diversity of youth communities and necessary approaches. The next stage is to disseminate the findings to all relevant stakeholders, including youth, service providers, PPT staff, Toronto Public Health, and policy-makers. The TTS team also presented at a number of conferences, and had elements of the research published in academic journals.

We have also begun preliminary work on an **Anti-Homophobia Research Project**, with the goal of increasing positive health outcomes for Lesbian, Gay, Bisexual, Transgender/Transsexual Queer/Questioning (LGBTQ) youth living in Toronto by gathering information

on homophobia from Toronto's diverse youth communities and using the information to improve anti-homophobia educational initiatives for youth. We feel that this project is very important to further understand the issues facing LGBTQ youth on a daily basis.

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## PPT Training Centre

Through the PPT Training Centre, we have had the opportunity to cultivate an effective foundation for sharing knowledge and ideas. In 2007, PPT secured three-year funding from the **Ontario Trillium Foundation** to hire a coordinator for the Centre and to support initial set-up, development of modules, and promotion and implementation of service provider workshops at the PPT Training Centre. In the past year, we have offered a number of sessions of our **Anti-Homophobia Service Provider training** through the PPT Training Centre, which have all been very well-attended and positively evaluated. We also delivered service provider trainings in community settings, at the request of various community organizations.

PPT's Training Centre staff also participate in networks that are collectively seeking to develop training and support for service providers working with different communities. By working collaboratively with community partners we can support individual well-being, influence public policies, and build healthy communities.

We are excited at the possibilities presented by the development of our Training Centre, and look forward to further sharing our expertise in this area with communities across Toronto.

# financial statements

REVENUES	Health Services	Other Programs	Total
Province of Ontario - Toronto Central LHIN	2,198,803		2,198,803
City of Toronto		117,708	117,708
United Way Toronto		231,819	231,819
Ontario Trillium Foundation		37,400	37,400
Ontario HIV Treatment Network		101,425	101,425
Donations		59,137	59,137
Major Gifts		250,000	250,000
Sally Bowen Fund Donations		3,650	3,650
Items for Sale		68,794	68,794
Other Income		16,648	16,648
Investment Income	976	17,485	18,461
	<b>2,199,779</b>	<b>904,066</b>	<b>3,103,845</b>

EXPENSES	Health Services	Other Programs	Total
Salaries and Benefits	1,586,359	383,726	1,970,085
Building	73,326	80,513	153,839
Outside Services	131,841	-	131,841
Supplies and Equipment	117,385	129,001	246,386
Administrative	37,622	4,106	41,728
Cost of Items for Resale		49,213	49,213
Fundraising		11,997	11,997
Sally Bowen Fund Expenses		33,561	33,561
Non-insured	27,006		27,006
Non-recurring	200,835		200,835
Amortization (capital)		7,140	7,140
	<b>2,174,374</b>	<b>669,257</b>	<b>2,873,631</b>
<b>Excess of revenues over expenses</b>	<b>25,405</b>	<b>204,809</b>	<b>230,214</b>
Amount refundable to Toronto Central LHIN	(25,405)		(25,405)
<b>Excess of revenues over expenses, net</b>	<b>-</b>	<b>204,809</b>	<b>204,809</b>

## STATEMENT OF REVENUES AND EXPENSES

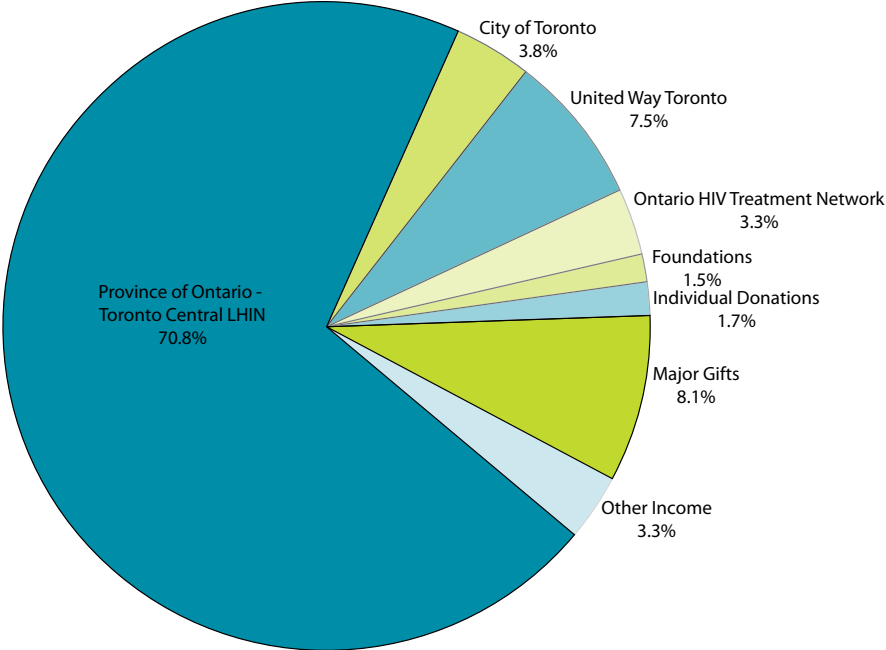
Year Ended March 31, 2008

These figures are a statement of Planned Parenthood Toronto's financial activities from April 1, 2007 to March 31, 2008. Complete audited financial statements are available upon request.

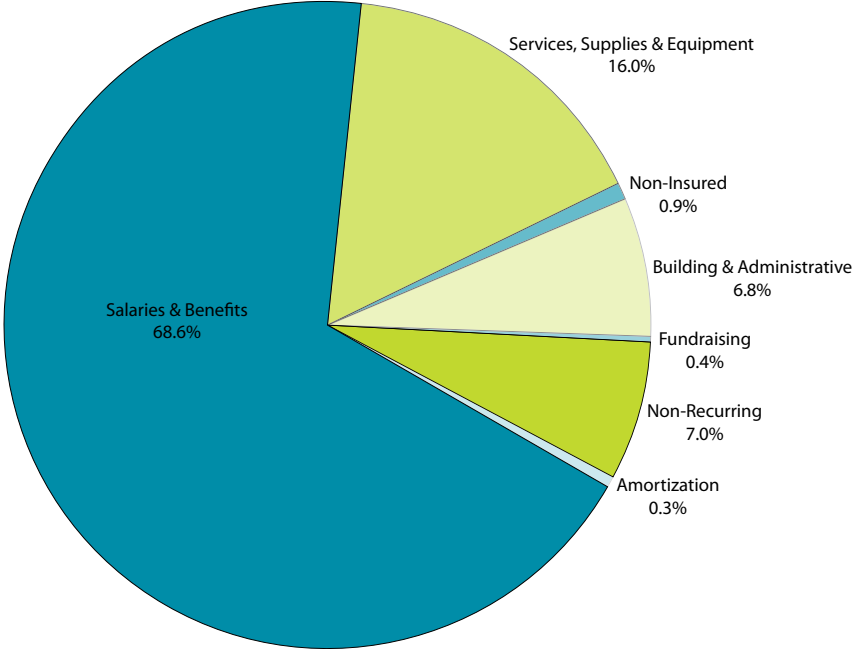
Note: Excess of revenue over expenses for Health Services is repayable to the Toronto Central LHIN

Total Excess of revenue over expenses is due to a major gift received during the year, and has been allocated to restricted reserves.

Revenues 2007-2008



Expenses 2007-2008



# our staff & supporters

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## Staff 2007-2008

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## Funding Partners

Toronto Central LHIN  
United Way Toronto  
City of Toronto  
Ontario HIV Treatment Network  
Ontario Trillium Foundation

## Major Donors

Blane Bowen\*  
Jim and Mary Connacher\*  
Estate of Catherine Cragg  
Patrick Hodgson Family Foundation\*  
Barrett Sellwood  
Gaye and Andrew Stein

\*Sally Bowen Fund donations

## our mission

**Planned Parenthood Toronto** is a community-based, *pro-choice* agency committed to the *principles of equity* and to providing **accessible** and **inclusive** services which promote **healthy sexuality** and *informed decision-making* to the people of the City of Toronto.

## our vision

A **community** of informed people who *achieve their potential* and who **contribute** to the **health** and well-being of *individuals* and the **community**.

## equity vision

**Planned Parenthood Toronto** is committed to being an agency that values and reflects the *diverse communities* of Toronto. We recognise that **Equity** is not just about equality. **Equity** is **access** to high quality, unique programming and services that *respect your choices* and meet your **differential needs**. Equity is ensuring that **community input** informs what we do and guides us to *take action* for social change that **benefits you**.

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Ontario's Community  
Health Centres

PPT is a United  
Way Toronto  
Member Agency