

CHANGING THE WORLD OF HIV/AIDS CARE

# Annual Report 2012/2013

Dr. **Peter**AIDS  
FOUNDATION



PHOTO: KAREN LECLAIR

# Message from the Executive Director & Chair



There was a point in the Dr. Peter AIDS Foundation's history when our capacity to provide HIV/AIDS care was bound by the four walls around us. Today, however, our reach continues to grow, largely thanks to our expanding research, evaluation and knowledge transfer efforts, which allow us to share our model of care with health officials, researchers, and policy-makers from around Canada and the world.

Supporters like you have enabled us to build a strong reputation for engaging and retaining vulnerable individuals in their health care. We are now working to quantify that success through a three-year research evaluation of the Dr. Peter Centre in partnership with the BC Centre for Excellence in HIV/AIDS and researchers and decision-makers from across Canada.

An evaluation of another project shows that the Dr. Peter Centre is not only successful in helping clients to suppress their HIV viral loads (an important indicator of individual health and a reduced likelihood to transmit the HIV virus) but that, during the study, client satisfaction increased from 80 to 93 per cent.

Like you, we believe everyone who needs HIV/AIDS care should be able to receive it. That's why we partnered with the Canadian Drug Policy Coalition and CACTUS Montréal, which provided the first needle exchange

program in North America, to host an event on integrating supervised injection services into health care and community at The Canadian Association for HIV Research (CAHR) Conference in Montréal. The event was attended by health care leaders from across Canada. Our aim is to use our experiences to positively impact HIV care across the country and, thanks to your support, that's just what we're doing.

Of course, we continue to respond to the pressing need for direct HIV/AIDS care in our own community. In the past year, we experienced a 26 per cent increase in attendance in our Day Health program and grew our residential capacity by 16 per cent through our new Enhanced Supportive Housing program.

Your support allows us to provide comfort care to nearly 400 individuals in Vancouver and to have an increasingly impactful voice in a global conversation about how best to provide HIV/AIDS care. You are changing the world of HIV/AIDS care. Thank you.



**MAXINE DAVIS**

*Executive Director,  
Dr. Peter AIDS Foundation*



**PETER GREEN**

*Chair,  
Dr. Peter AIDS Foundation*

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## Meet the Chair: Peter Green

When Peter Green assumed the role of Chair of the Board of the Dr. Peter AIDS Foundation in June of 2012, he already had a long history of volunteerism, but the community of healing and kindness he found at the Dr. Peter Centre inspired him to give more of himself.

"I was immediately impressed by the fantastic spirit and great culture of the Dr. Peter Centre," Peter says.



*Peter Green, Chair of the Board,  
at the TELUS Day of Giving*

"While the Centre provides some absolutely essential services, like nursing and meals, it's so much more than that, too; it's a community and I was instantly welcomed into it."

Peter enjoys his family life and a successful career as a TELUS senior executive that brought him to Vancouver from his native England in 2007. He considers volunteering a way to give back and a way to build community.

"I've always volunteered in a variety of ways," Peter says. "Everything from the local soccer club to serving on the board of BC Children's Hospital – it's a way to take part in your community and I really like it."

Peter recalls first setting eyes on the Dr. Peter Centre while out on a family walk after first arriving in Vancouver. At the time he noted the distinctive West End building but knew little about the Centre. Within a few short years, however, he would become a passionate supporter of the Foundation and HIV/AIDS care.

"I got to know the Foundation through [Past Chair] John Evans, who

was a business associate," recalls Peter. "He suggested I come and serve breakfast at the Centre with [Dr. Peter's mom] Shirley and I've been hooked ever since."

Peter now volunteers tirelessly to support the work of the Foundation and encourages others to do the same. Peter says a major reason he supports the Foundation is that its model of care works.

"The organization has a proven methodology to engage people in their HIV treatment," he says. "The way we do it is to empower vulnerable individuals to manage their illness. If we work together – volunteers, staff, donors, residents and participants – in a focused and committed way, we can be part of ending AIDS. I encourage everyone to join us in our mission – you'd be a welcome addition to our community."

To find out more about volunteer opportunities at the Dr. Peter AIDS Foundation visit [www.drppeter.org/how-to-help](http://www.drppeter.org/how-to-help).

# Sharing Our Knowledge

The Dr. Peter AIDS Foundation continues to grow its knowledge exchange capacity, briefing health care leaders touring the Centre and presenting at conferences and symposiums. Here is what others are saying about our model of care:

**"The Dr. Peter Centre is a model for the rest of us in so many ways.** Visiting their program this year and seeing in person how they seamlessly integrate harm reduction and supervised injection services into their nursing model was inspirational for me. The compassion and common sense that underlie all of their work was clearly evident in all of my conversations with staff, residents and participants. I've sent several other colleagues from the States to tour Dr. Peter Centre and learn more about their model, and they've all come back with greater enthusiasm for incorporating supervised injection services into their programs."

*Laura Thomas, Deputy State Director,  
San Francisco Drug Policy Alliance  
San Francisco, California*

**"The Dr. Peter Centre has pioneered the successful integration of supervised injection services** into a comprehensive health care model for people with complex health issues. Their approach serves as a model for other communities in Canada, and indeed, around the world. Maxine Davis, and the Dr. Peter Centre staff have been extremely generous in sharing their time and expertise in supporting others looking to implement supervised injection services as part of efforts to improve the health and well-being of people who use drugs."

*Susan Shepherd, Manager,  
Toronto Drug Strategy Secretariat,  
Toronto Public Health  
Toronto, Ontario*

**"As the Medical Director of the only supervised injecting centre in the Southern Hemisphere,** I was thrilled to visit the Dr. Peter Centre in 2013 and learn how effectively they integrate harm reduction into their broader model of care. We have much to learn from each other, and these friendships will help all of us scale up harm reduction services for those most marginalized in our community."

*Dr. Marianne Jauncey,  
Medical Director, Sydney Medically Supervised Injecting Centre  
Sydney, Australia*

# Milestones

## CANADIAN ASSOCIATION OF HIV RESEARCH (CAHR) CONFERENCE 2012

The Dr. Peter AIDS Foundation collaborated with the Canadian Drug Policy Coalition to present 'Integrating Supervised Injection Service into Health Care and Community: A National Knowledge Exchange'. The session focused on presenting the experiences of the Dr. Peter Centre with a goal of advancing successful expansion of supervised injection services throughout Canada.



**32%  
INCREASE  
IN CLINICAL  
CONTACTS:  
90,817 TOTAL**

## PRESENTATION TO THE ONTARIO HIV TREATMENT NETWORK (OHTN)

The Dr. Peter AIDS Foundation presented to the Ontario HIV Treatment Network (OHTN) on its implementation of harm reduction services into the Dr. Peter Centre.

## FIRST ANNIVERSARY OF STOP HIV/AIDS PROJECT

The Dr. Peter Centre marked its first year of its STOP HIV/AIDS-funded research project.  
*See page 9 for more information.*

April 2012

June 2012

July 2012

**SECOND ANNIVERSARY OF 7-DAY SERVICE**

The Dr. Peter Centre expanded from weekday-only to seven-day service in December 2010. Two years later, our data shows that offering Day Health program participants weekend service has significantly impacted how often they access nursing, meals, and other supports all week long.

**DIAMOND JUBILEE MEDALS**

Dr. Peter’s mother, Shirley Young, Executive Director, Maxine Davis, Past Chair John Evans, and Day Health program participant, Joe Nim Cho Leung each received a Queen’s Diamond Jubilee medal for their commitment to the HIV/AIDS community.



**CASEY AWARD**

The Dr. Peter AIDS Foundation was proud to be the recipient of the 2013 Casey Award, which celebrates individuals and organizations across Canada that demonstrate leadership in the fields of HIV/AIDS and social justice. “The Dr. Peter AIDS Foundation has continued to innovate and lead the world in its response to the challenges of HIV/AIDS, particularly for people who are marginalized,” said Bob Forsey, Chair of The Casey Awards.

December 2012

March 2013

## Rob L.'s Story

Growing up in White Rock, Rob L. says he was always the “weird gay kid.” He was bullied by his peers and began experimenting with his mother's prescription pills as a way to escape her alcoholism. By 14, he was living on the streets of Vancouver.

“It was hard then, but it wasn't as tough as it is for a lot of kids today,” says Rob. “In those days, you could get a hotel room for \$20 and I was

lucky that I could always head back to White Rock to see my mom for a while. Poor mom!”

While his drug use escalated throughout his teen years, by his 20s Rob was sober, in a relationship, and running his own power-washing company and, later, importing music. It was around this time, in the early 1980s, that Rob's friends in the gay community began to get sick.

“It was so frightening back then,” he says. “I knew so many people who were getting sick. I've seen so many people go.”

In 1986, not long after the first HIV test was made available, Rob went to get tested. When the results came back positive, he wasn't entirely surprised.

“I sort of thought I would be positive,” he said. “I think that's why I didn't have a big reaction at the time. I'd already sort of processed it.”

*“Coming here,  
it was the first time  
I'd felt really engaged  
for a very long time.”*

Rob relapsed into drug use in the late 90s and was in rehab by 2003. At that time, his health was beginning to decline and he first began taking HIV medication. It was around that time that he began focusing more attention on maintaining his health and, in 2005, he started attending the Dr. Peter Centre.



*Rob, a Dr. Peter Centre participant*



"I loved that it was a space to connect with the community," he says. "I'm very community-oriented, but I'd been very disconnected from other people because of my drug use. Coming here, it was the first time I'd felt really engaged for a very long time."

*"I've learned to be compassionate to myself by the compassion that is modeled at the Centre."*

These days, Rob is very involved at the Dr. Peter Centre. He's an active member of the Dr. Peter Centre's camera club, often winning the weekly "photo of the week" prize. He also attends the Centre for meals, nursing supports and counseling.

"My counselor is amazing," he says. "She's the one who got me interested in photography and that's really helped me to come out of myself. I've learned to be compassionate to myself by the compassion that is modeled at the Centre."

Another way Rob is contributing to the Dr. Peter community is by participating in the Community Advisory Committee for a research project evaluating the impact of the Dr. Peter Centre on health care access and outcomes for persons living with HIV/AIDS who use illicit drugs.

Funded by The Canadian Institutes of Health Research and the Michael Smith Foundation, with in-kind funding from the Dr. Peter AIDS Foundation and BC Centre for Excellence in HIV/AIDS, the project is a mixed-method evaluation of the Dr. Peter Centre's model of care and involves researchers from across Canada.

The Community Advisory Committee is made up of various stakeholders, including representatives from community organizations, health authorities, and five Dr. Peter Centre participants, including Rob. The committee weighs in on key points in the research process such as the development of surveys and methods.

"It makes me feel very valued to be on the committee," says Rob.

"I think that my experiences and point of view are valuable and I'm glad to be able to give something back to the Dr. Peter Centre."

*"So many of my relationships & my opportunities have come from this place – I'm so glad that it's here."*

Rob continues to build his connections to his community; he advocates for drug policy change, is involved in First Nations drumming, and is an avid cyclist, but the Dr. Peter Centre is at the core of his life and personal growth.

"I orbit the Dr. Peter Centre," Rob says. "It's a good, compassionate place that allows me to feel 100 per cent myself. So many of my relationships and my opportunities have come from this place – I'm so glad that it's here."

# STOP HIV/AIDS Project Results

The Dr. Peter Centre has completed the first year of its STOP HIV/AIDS project with extremely positive results.

The research project showed that, prior to intake in the project, only 35% of individuals had a suppressed viral load. This number grew to 49% within three months of the initial admission into the program and then to 76% at the most current measure (March 31, 2013).

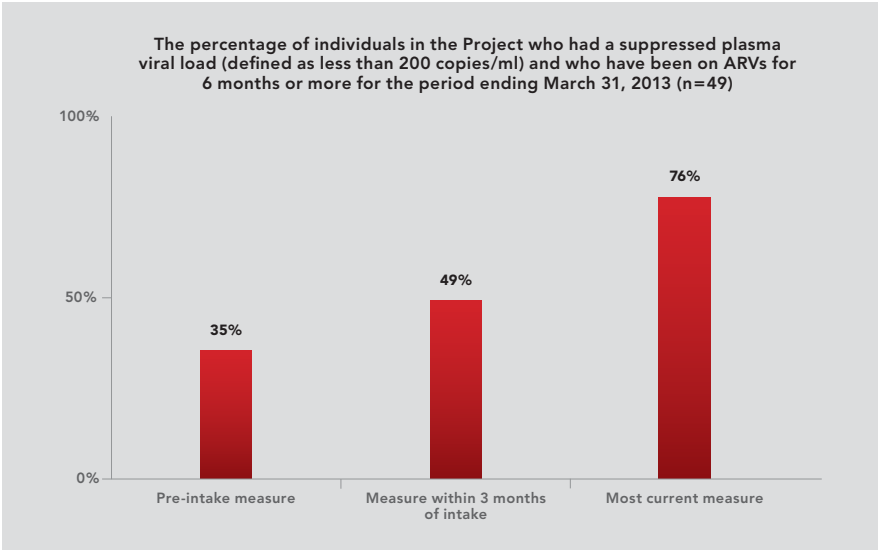
A suppressed viral load is defined as a pVL of less than 200 copies/ml and

is a key indicator of individual health – and it means there is a reduced likelihood of transmitting the HIV virus to other people.

During the same period, client satisfaction increased from 80% to 93%, and positive client-provider engagement scores increased from 50% to 76%.

STOP HIV/AIDS stands for Seek and Treat to Optimally Prevent HIV/AIDS and is a pilot project funded by the BC

Ministry of Health Services to expand HIV testing, treatment and retention in care for individuals who are vulnerable and require specific uninterrupted support to be adherent to antiretroviral medication. The Dr. Peter AIDS Foundation is proud to be a part of ending AIDS through this “Treatment as Prevention” initiative.



# Community Support

## Remembering Robert Kenny

On January 31, 2012, a longtime Dr. Peter Centre supporter, Mr. Robert Kenny, passed away. In his life, he was a man with a big heart who wanted to make a difference in his community and, in his passing, he was no different.

Robert Kenny grew up in Vancouver’s West End and began supporting the Dr. Peter AIDS Foundation in 2001, when he sponsored a suite in the new Dr. Peter Centre Residence. He named the suite in memory of his partner, Earl, and soon sponsored the neighbouring suite. To this day, a single plaque sits between the two rooms, which reads “May Love and Tranquility Reside Here, Bob and Earl.”

Mr. Kenny continued to support the Centre for the remainder of his life. He especially enjoyed visiting the Centre each Christmas to give gifts to the participants. And, when Mr. Kenny passed away, he remembered the Dr. Peter AIDS Foundation in his will, leaving a legacy of compassion and kindness to maintain the building he had already invested in.

*Making a legacy gift supports specialized health care at the Dr. Peter Centre, which has a lasting impact on our organization, our clients' lives and our community. The Dr. Peter AIDS Foundation would be honoured to help you plan a legacy gift that reflects your personal charitable goals and ensures that your legacy plans can be fulfilled within our mission and mandate. For more information please contact [foundation@drpeter.org](mailto:foundation@drpeter.org).*



Robert Kenny with Dr. Peter’s mom, Shirley Young.

## Pennies with Purpose

In February of 2013, Canada withdrew the penny from circulation. To celebrate its retirement, several of our friends, including The Dish on Davie, TELUS, and Vancity, as well as many individual supporters, donated more than 294kg (788lbs) of pennies to the Dr. Peter Centre. Vancity branches continue to collect rolled coins on behalf of the Foundation. Download coin rollers at [drpeter.org](http://drpeter.org).

**pennies**  
*with* **purpose**

# Financials 2012/2013

*These financial statements are derived from the audited financial statements of the Dr. Peter AIDS Foundation as at March 31, 2013 and the year then ended. Complete audited financial statements are available at [www.drpeter.org](http://www.drpeter.org).*

## Consolidated Statement of Financial Position

*(Prepared by Management)*

As at March 31	2013 \$	2012 \$
<b>Assets</b>		
Total current assets	<b>1,666,229</b>	1,188,400
Capital assets	<b>6,324,764</b>	6,625,638
<b>TOTAL ASSETS</b>	<b>7,990,993</b>	7,814,038
<b>Liabilities</b>		
<b>CURRENT</b>		
Accounts payable and accruals	<b>429,432</b>	312,190
Deferred revenue – current portion	<b>251,913</b>	388,522
Current portion of mortgage payable	<b>42,859</b>	41,626
Current portion of capital lease payable	<b>–</b>	12,196
<b>TOTAL CURRENT LIABILITIES</b>	<b>724,204</b>	754,534
Deferred contributions	<b>688,800</b>	382,446
Mortgage payable	<b>1,555,794</b>	1,598,653
Deferred contributions related to capital assets	<b>4,322,071</b>	4,531,501
<b>TOTAL LIABILITIES</b>	<b>7,290,869</b>	7,267,134
<b>Net Assets (deficiency)</b>		
Invested in capital assets	<b>404,039</b>	441,662
Unrestricted	<b>181,488</b>	(10,971)
Replacement reserve	<b>114,597</b>	116,213
<b>TOTAL NET ASSETS</b>	<b>700,124</b>	546,904
<b>TOTAL</b>	<b>7,990,993</b>	7,814,038

# Consolidated Statement of Operations

(Prepared by Management)

Year Ended March 31	2013 \$	2012 \$
<b>Revenue</b>		
VCH (Vancouver Coastal Health)	<b>2,568,285</b>	2,426,461
PHSA (Provincial Health Services Authority)	<b>1,382,465</b>	1,382,465
BC Housing	<b>197,398</b>	222,157
BC Community Gaming Grant	<b>100,000</b>	100,000
Donations and fundraising	<b>902,823</b>	778,191
Resident contributions	<b>274,357</b>	265,876
Other income	<b>22,961</b>	28,563
Amortization of deferred contributions related to capital assets	<b>237,357</b>	216,492
Amortization of deferred contributions related to operations	<b>339,565</b>	371,811
<b>TOTAL REVENUE</b>	<b>6,025,211</b>	5,792,016
<b>Expenses</b>		
Amortization of capital assets	<b>339,565</b>	321,310
Operations	<b>429,765</b>	458,226
Program services and other supplies	<b>477,235</b>	457,225
Property maintenance and utilities	<b>312,376</b>	311,576
Human resources	<b>4,313,050</b>	4,332,802
<b>TOTAL EXPENSES</b>	<b>5,871,991</b>	5,881,139
<b>Excess (deficiency) of revenues over expenses for the year</b>	<b>153,220</b>	(89,123)

# Thank You to Our Donors

During the course of fiscal year 2012–13, the Dr. Peter AIDS Foundation received generous donations from our supporters. Your support allowed us to provide programs and services for our participants and residents and allowed us to expand our knowledge transfer and evaluation efforts. We are truly grateful for the ongoing support we receive from each and every donor and greatly value every contribution. Thank you for helping to change the world of HIV/AIDS care.

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