CHIWOS STEERING COMMITTEE

Bienvenue! Welcome!

October 24th, 2016

BC: 10:30-12:00 PDT SK: 11:30-13:00 CST MB: 12:30- 14:00 CDT

ON & QC: 13:30-15:00 EDT

Teleconference



Acknowledgments

CHIWOS would like to acknowledge all of the traditional territories on which we have gathered.







CHIWOS - en français et anglais

- CHIWOS is officially a bilingual study.
- During national meetings, English will be spoken.
- However, if a Francophone Team member has a question or doesn't understand something, they are encouraged to stop the meeting and to ask in French.
- The answer will be given in French and English.
- All final central documents will be translated into French; working drafts will remain in English until finalized.



Acknowledgments

We would like to thank everyone involved for their invaluable contributions to the study. Thank you to...

All the women living with HIV involved in this study;

The PIs, Coordinators, Peer Research Associates, and all the co-investigators and collaborators;

The Steering Committee, Community Advisory Board members, and CAAB-PAW members;

Our funders: CIHR Institute of Gender and Health, the CTN, and OHTN;

Our affiliated studies: CANOC, REACH & OSC; and

all of our partners for supporting the study.

















Acknowledgments

And all our community and clinical partners

C.-B.: AIDS Vancouver Island, BC Centre for Excellence in HIV/AIDS, Cool Aid Community Health Centre, Downtown Community Health Clinic, Keys Housing and Health Solutions (Positive Haven), Living Positive Resource Centre, Oak Tree Clinic, Positive Living Fraser Valley, Positive Women's Network, Positive Living North, and Vancouver Island Persons with AIDS Society.

ON: 2-Spirited People of the 1st Nations; 519 Community Centre; ACCKWA; Africans in Partnership Against AIDS (APAA); AIDS Committee of Durham Region; AIDS Committee of Guelph and Wellington County; AIDS Committee of Simcoe County; AIDS Network Hamilton; Alliance for South Asian AIDS Prevention; Black Coalition for AIDS Prevention; Bruce House; Casev House; Centre Francophone; Elevate NOW; Fife House; Hemophilia Ontario; HIV/AIDS Regional Services (HARS); Maggie's: Toronto Sex Worker's Action Project; Peel HIV Network; Positive Living Niagara; Prisoners with AIDS Support Action Network; Réseau Access Network; Toronto PWA Foundation; Women's Health in Women's Hands; Children's Hospital of Eastern Ontario; Kingston Hotel Dieu Hospital; Health Sciences North, Sudbury Regional Hospital, HAVEN Program; Lakeridge Health; Maple Leaf Medical Clinic; McMaster Family Practice; Ottawa General Hospital; Riverside Family Health Team; SIS Clinic, Hamilton Health Sciences; St. Joseph's Healthcare London; St. Michael's Hospital; Sunnybrook Health Sciences Centre; Toronto East General Hospital; Toronto General Hospital; William Osler Health System; Windsor Regional Hospital, HIV Care Program.

QC: ACCM; L'ARCHE de l'Estrie; ASTT(e)Q; BLITS; BRAS-Outaouais; CACTUS; CASM; Centre Sida Amitié; Corporation Félix Hubert d'Hérelle; COCQ-SIDA; Fondation d'Aide Directe-SIDA Montréal; GAP-VIES; GEIPSI; M.A.I.N.S-Bas St-Laurent; Maison Plein Coeur; Maison Dominic; Maison du Parc; Maison Re-Né; MIELS-Québec; Le MIENS Chicoutimi; Portail VIH/sida du Québec; Sidaction Mauricie; Sida-Vie Laval; Stella, l'amie de Maimie.















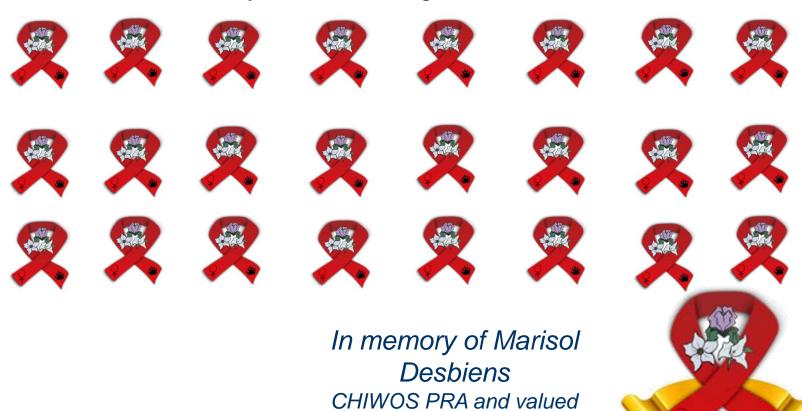






Acknowledgements

We honour and remember the 26 CHIWOS participants from across Canada who have passed away and are no longer with us.



colleague

Welcome and introducing new provinces

Meet the Principal Investigators!









Loutfy, ON Angela Kaida, BC

Alexandra dePokomandy, QC

Carrie Bourassa, SK



Robert Hogg, BC





Sharon Bruce, MB



Saara Greene, ON



Welcome and introducing new provinces

Meet the Coordinators!



Rebecca Gormley, BC



Paulette Poitras, SK



Adina Lasker, MB



Logan Kennedy, ON



Angela Underhill, ON



Karène P-Boucher,
QC
CHIWQS

Students of CHIWOS



Nisha Andany, BSc, MD CTN postdoc Fellows Supervisor(s): Dr. Mona Loutfy



Angela Cescon, MPH, MD Student Northern Ontario School of Medicine Sudbury, Ontario Supervisor(s): Dr. Mona Loutfy



Ashley Lacombe-Duncan, Ph.D. Social Work Factor-Inwentash Faculty of Social Work, The University of Toronto Toronto, Ontario Supervisor(s): Dr. Peter A. Newman



Anne Wagner, Postdoctoral Fellow Ryerson University, Department of Psychology Toronto, Ontario Supervisor(s): Dr. Candice Monson



Kayla Mitchell, Undergraduate Student Simon Fraser University, Health Sciences Vancouver, British Columbia Supervisor(s): Dr. Angela Kaida





Marilyn Fortin-Hughes, Masters' Student Université du Québec à Montréal, Sexology Montreal Quebec Supervisor(s): Joanne Otis, Dr. Alexandra De Pokomandy



Allison Carter, MPH PhD Student

Burnaby, British Columbia

Simon Fraser University, Faculty of Health Sciences

Sophie Patterson, PhD Student Simon Fraser University, Faculty of Health Sciences Burnaby, British Columbia Supervisor(s): Dr. Angela Kalda

Supervisor(s): Dr. Angela Kaida, Dr. Robert Hogg, Dr. Saara Greene, Dr. Deborah Money,



Nadine Kronfli, MPH, MD, FRCP(C) McMaster University Hamilton, Ontario



Marya Jaleel, MPH Masters Student University of British Columbia, School of Population and Public Health Vancouver, British Columbia Supervisor(s): Dr. Angela Kaida



Kate Salters, PhD Student Simon Fraser University, Faculty of Health Sciences Burnaby, British Columbia Supervisor(s): Dr. Angela Kaida, Dr. Robert Hogg



Agenda

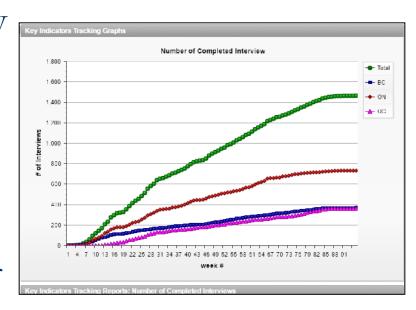
- 1. Wave 1 updates & Wave 2 ongoing (Facilitated by Mona Loutfy)
- 2. CHIWOS in MB and SK: Updates (Facilitated by Adina Lasker and Paulette Poitras)
- 2. Knowledge Translation and Exchange (Facilitated by Mona Loutfy)
- 3. PRA perspectives on doing peer-to-peer research (Facilitated by Tracey Conway)
- 4. Wave 3: survey changes and follow-up begins in January 2017 (Facilitated by Angela Kaida)
- 5. Grants
 (Facilitated by Mona Loutfy)
- 6. Other items and questions (Facilitated by Mona Loutfy)



1. Brief overview of CHIWOS and ongoing Wave two

- ➤ A Canadian longitudinal communitybased research study
- Enrolled **1,425** women living with HIV from BC (356), ON (713) & QC (356) at baseline
- Peer-administered survey
- ➤ Two 18 month follow-up planned (wave 2 and wave 3)
- > **Study goals:** To assess the patterns of use of women-centred HIV care, & the impact on sexual, reproductive, mental & women's health outcomes

Baseline





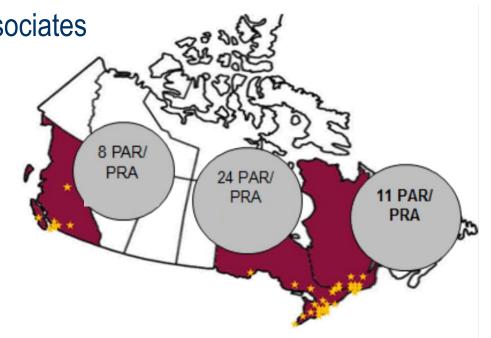
1. Brief overview of CHIWOS and ongoing Wave two

CHIWOS is led by:

 More than 40 Peer Research Associates (PRAs) from BC, ON & QC

- 3 NMT PRA Representatives

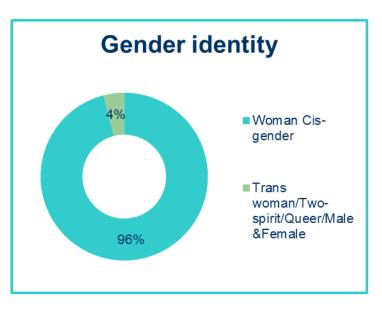
- 3 KTE PRA Representatives

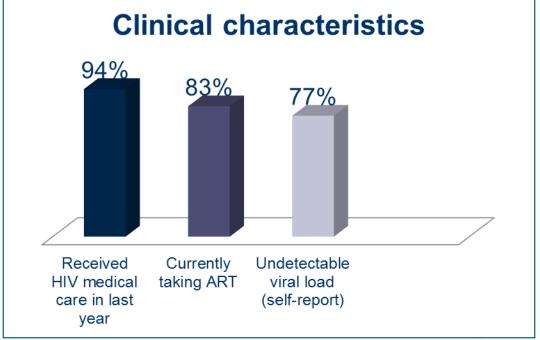


Cohort Profile		Total	British	Ontario	Quebec	p-value
Demographic Characteristics			Columbia			
	Total N	N=1425	N=356	N=713	N=356	
			%			
Median Age (IQR)	1425	43(36-51)	44(37-51)	41(34-49)	46(38-53)	<0.001
Gender identity	1425					
Woman		96%	96%	95%	96%	0.824
Trans woman/Two-spirit/Queer/Male&Female		4%	4%	5%	4%	
Sexual orientation	1420					
Heterosexual		87%	83%	87%	92%	<0.001
LBQQ2S		13%	17%	13%	8%	
Ethnicity	1425					
Indigenous – First Nations, Métis or Inuit		22%	45%	21%	2%	<0.001
Caucasian		41%	39%	39%	47%	
African/Caribbean/Black		29%	8%	32%	46%	
Other*		7%	8%	8%	5%	
Ever incarcerated	1425	37%	62%	29%	28%	<0.001
Injection drug use history	1399	31%	63%	19%	23%	<0.001
Clinical Characteristics						
HCV co-infection	1418	32%	56%	21%	29%	<0.001
HBV co-infection	1408	8%	13%	5%		<0.001
Median years living with HIV	1377	11(6-17)	12(7-18)			
Received HIV medical care in last year	1423	94%	98%			
Currently taking ART	1418	83%	89%			<0.001
Undetectable viral load (self-report)#	1349	77%	80%			

Cohort profile At national level







Wave 2 updates

- Launched in July 2015
- Multiple retention of pts activities
- To date, **1130** follow-up interviews (Oct. 18th, 2016)
- 79% of retention to date (Oct. 18th, 2016)

Reason for Termination	Frequency	вс	ON	QC
LTFU	2	1	0	1
Withdrawal	12	1	6	5
Death	26	10	12	4
Total	40	12	18	10

Sept. 27th, 2016

• End of Enrolment for Wave 2: Dec. 2016



Wave 2 updates

Week#

Date

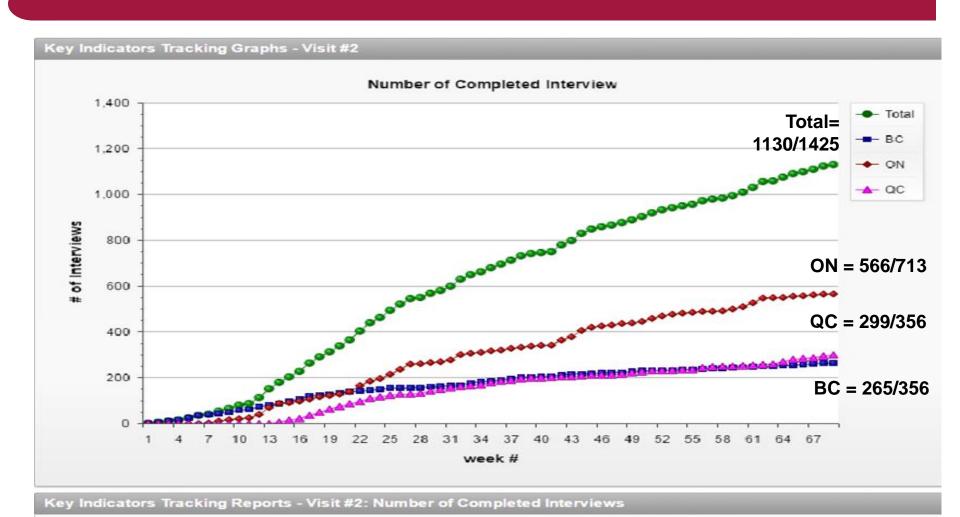
20-OCT-2016

NWeek

NTOT

1130

Date: Oct. 18th, 2016



ON

566

QC

299

BC

265

Wave 2 updates

Hard-to-Reach/Retain participants

- -Women who are under-housed
- -Women who use substances
- -Women not in care
- -Women with limited means of communication
- -Young women
- -Professional women



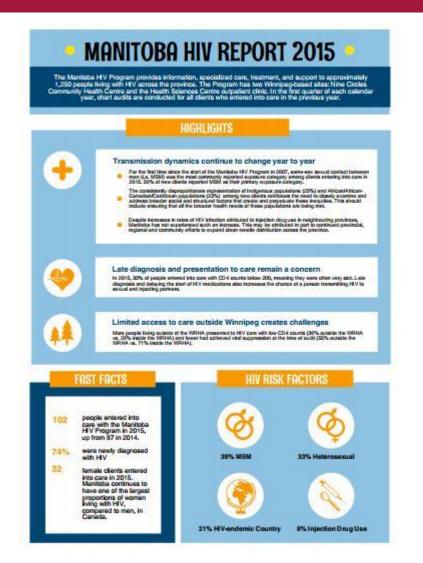




- Research Coordinator hired (Jan/16)
- Ethics approval granted (Mar/16)
- Working group solidified: includes PIs, U of M researchers, reps from community based organizations, 4 peers



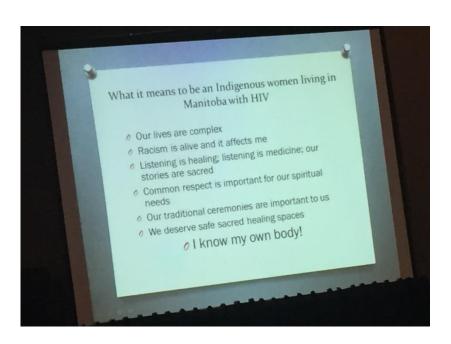






Presentation at CAHR (May/2016)







- Environmental Scan conducted (May-Aug/2016). "Where do Indigenous women living with HIV get their needs met in Manitoba?"
- Currently developing processes, questions, and guide for sharing circles/focus groups, in collaboration with SK



Environmental Scan

- Regina interviewed 12
 organizations, Saskatoon
 interviewed 12 organizations &
 Prince Albert interviewed 7
 organizations
- Will present to Steering
 Committee on October 21st 2016
 & get feedback
- Presentation of the Environmental scan to different target audiences such as Tribal Councils included in Scan and other community events brought forward from the Steering Committee

Regina & Area

- Although there are many services, resources and supports that are offered to HIV + women in the City of Regina, there is a lack of partnership between the Community Partners & Provincial Health Regions. The conversations are happening but isn't as progressive as other Municipal communities throughout the Province.
- There is a growing concern from community partners about the lack of cultural sensitivity of HIV + individuals that receive treatment & care from Provincial Health Regions that needs to be addressed in an effective and efficient timely manner.
- Within the Community Partnerships there is a collective understanding of respect, understanding, compassion, and care of HIV + Individuals that access their care and oftentimes they rely on each other for resources. They help and support individuals by meeting them where they are at without judgment or discrimination. This is a positive note and a lot can be learned from this model of care.

Continued Updates for SK

Saskatoon & Area

- Although there are many services, resources and supports that are offered to HIV + women in the area of Saskatoon, there is a better partnership between the Community Partners & Provincial Health Regions.
- Within the Community Partnerships & Provincial Health Regions there is a collective understanding of respect, understanding, compassion, and care of the HIV + Individuals that access their care and often times they rely on each other for resources. They help and support individuals by meeting them where they are at without judgments or discrimination. This is a positive note and a lot can be learned from this model of care.

Prince Albert & Area

- Although there are not many services, resources and supports that are offered to HIV + women in the area of Prince Albert there is a respectful partnership between the Community Partners & Provincial Health Regions.
- Within the Community Partnerships & Provincial Health Regions there is a collective understanding of respect, understanding, compassion, and care of the HIV + Individuals that access their care and often times they rely on each other for resources. They help and support individuals by meeting them where they are at without judgments or discrimination. This is a positive note and a lot can be learned from this model of care.
- Despite being a smaller community of services, resources, and supports for HIV + individuals, the community pulls together and does amazing work with what little they have. This is reputable and should be looked at in expansion to funding needed in the Northern communities they serve.

Next Steps in Saskatchewan

- Present Environmental Scan to Steering Committee
- Present Environmental Scan to Community Partners & Tribal Councils
- Begin Focus Groups/Sharing Circles in each community (Regina, Saskatoon & Prince Albert)
- Begin Process of Posting positions for PRA in each community (Regina, Saskatoon & Prince Albert)



Saskatchewan Steering Committee



Janet Carriere



Jackie Eaton



Jean Goerzen



Donna Lerat



Elder Betty McKenna



Carolyn Pelletier



Paulete Poitras







Knowledge Translation & Exchange (KTE)

Published papers 2015-2016

BMC Medical Research Loudy et al. SMC Medical Research Methodology (2016) 16:101 Establishing the Canadian HIV Women's Sexual and Reproductive Health Cohort Study (CHIWOS): Operationalizing Community-based Research in a Large Mona Loudy^{1,7} Saara Geece¹, V. Logan Kercecy¹, Johanna Lewis^{1,8}, Janie Thomas-Parane¹, Tracey Conney National Quantitative Study Mona Looky", Suara Greene", Y. Loguin Rennedy , Johanna Levis", Jamie Thomaserannes, Trate, Neundra de Polemandy , Nuda O'Briend, Albon Carnety, Wangsi Thamai, Yapan Richados, American de resentanción, hacia screent, asson caner, vianger transo, vianes screents, electron de Recordo de Carlos (Sangalin Carlos Produktioncher Robert S. Hoggs). Angela Kalda and on Behalf of the CHNOS Research Team Buckground: Community-based research has guined increasing recognition in health research over the la Buckground: Community-based research has gained worstern exception in health research over the L. decided Such participation of research approaches are faulded for their stellar to undoor required. It leads to OKCION, SACTI PRINCIPANTY RESIDENT INSPONDERS ARE SURREST, THE SECRET OF SHIRT RESIDENT IN SHIRT RESIDENT RESIDENT IN SHIRT RESIDENT IN SHIRT RESIDENT IN SHIRT RESIDENT IN SHIRT RESIDENT RESID ensuing clitical appropriate incis. Joseph Jocal Intervised present production communities, budge and facilitating receiption of the production of the produ and stabilisting received notices. 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Successes, challenges and further considerations are offered. Discussion: Typosph the steegation of community-based enearch principles we have been scient. Docussion: Through the integration of community-based releases, processes, we have community as a horizontal releases, and processes, we have community to the based of the community of the comm a triory lear long formative grade for this study, developing a nover surely around resemble support to project training 39 free Receipt his followers (\$9,00), developing ongoing comprehensive support to \$90,000 and projection around an encourage substant arounds properly to project project account of the project p starting 39 Herr negatirth Associatis 97/AU, desting ongoing comprehensive support on PAGE, ongoing beside community-based released process. 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The districts that energie given the diverse perspectives of numerous team member. (Continued on next page)

JIAS Sexual inactivity and sexual satisfaction among women living with HIV in Canada in the context of growing social, legal and public Angela Kalda¹, Allison Carter^{1,3}, Alexandra de Pokomandy^{1,4}, Sophie Patterson^{1,3}, Karêne Produk-Boucher³, Adriana Nohpal², Paul Sereda³, Guillaume Colley³, Nadia O'Brian^{1,4}, Jamie Thomas-Pavand², Kerrigan Boever³, Valerie J Nichelson³, Wangari Tharso⁶, Myléne Fernet⁷, Joanne Otts⁷, Robert S Hoge^{1,3}, Mona Louds^{3,4,4}, on behalf of *Corresponding author Angels Each, Scothy of Hogis Sciences, Smort Feare University, Blowen Hall Res 19512, BBIE University Dine, Burnely, EC, Canada VS-3 SS, Not + 1 778 782 9000, Ear + 3 778 782 9007, Paraphiliphility. Abstract introduction: Women represent nearly one-quarter of the 71,300 people living with HIV in Canada. Within a context of widespread introduction and one-going risks to HIV disclosure, little is known about the influence of growing social, legal and public health surveillance of HIV on sexual activity and satisfaction of wiseme linking with his (NUM).
Methods: We analyzed baseline crop-sectional survey data for WUWH (2 16 years, self-identifying as women) errolled in the Canadian HW Women's Senual and Reproductive Health Cohort Study (CHWOS), a multisite, longitudinuk, community-based or penetrastive) in the prior since country and community-based or penetrastive) in the prior since months, enduding memory postparture women (5 6 month). Solitations women self-color from those through the control postparture women (5 6 month). Solitations using an average of laverage of laverage and laverage of laverage or laverage o

Results Of 1213 participants (20% 8C, 50% ON, 26% OC), median ape was 43 years (OR: 35, 500, 20% destified as Abortigoid, Alexandro Correlates of Micran, Carloboum and Black, 41% as White and Blk as other whichlies. Heteroscus directation was reported by 82% of the control of

the structure there has the or unsubsecution vis. Conclusions: Approximately half of WIWH in this study reported being sensually inactive. Associations with sexual dissatisfaction Conclusions. Approximately half of WILVIV in this study reported being sexually inactive. Associations with sexual dissatisfaction and high Helvicelest sigms suggest that WILVIVI face challenges navigating healthy and statelying sexual flows, despite good HIV treatment outcomes. As half or Sexual Sexual sexual reported being statisfied with their or a res, additional research is expectations associated with sexual active, findings undersoon as means of resisting serveriblems and disclosure and re-appropriate the sexual active, if indeps undersoon a need for interventions to de-stignature HIV, support safe disclosure and re-appropriate the sexual rights of WILVIVI.

Keywords: HIV; women; Canada; sexual and reproductive health; sexual abstinence; sexual satisfaction; com-

Basilised & May 2015, Studied 25 September 2015, Asseptior 5 October 2015, Published 1 December 2015.
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Incroduction
Globally, women account for over half of all adults living with
HIV [1]. In Canada, approximately one-quarter of the 72,300
people living with HIV (PUWH) are women, nearly double the
proportion observed in 1999 (12%) [2]. With early and
sustained use of applicational transmit Manage (14). stained use of antiretroviral therapy (ART), women

with HIV (WLWH) are living longer and healthier lives [3-5] lowered risks of sexual and perinatal HIV transmission lowered risks or sexual and permanal bit transmission [6–8]. This altered landscape of MV risk has re-ignited global discourse regarding the need for a right-based approach to sexual health [9–12]. Sexual health research and programming



Knowledge Translation & Exchange (KTE)

Numerous oral & poster Conference presentations



Knowledge Translation & Exchange (KTE)

Knowledge Translation and Exchange Working Group

- Meet every two months
- Contribute to the CHIWOS KTE Work Plan and strategize, plan and oversee different kinds of KTE activities including:
 - > Push KTE: Outgoing knowledge from CHIWOS to end users
 - ➤ Pull KTE: Incoming knowledge that informs CHIWOS research activities and decision-making
- > Composed of various academic and ASO stakeholders
- Three PRAs represent each province, including Tracey Conway as committee chair.



Other KTE activities

- Blogs (e.g. Huffington Post)
- > Webinars
- Humans of CHIWOS campaign
- > Social media
- > ASO presentations
- > ASO events
- Provincial Newsletters
- Many PRA led!
- and many many more!!!



Women represent one of the fastest growing demographics at risk for HIV, with one in five individuals living with HIV in Canada being women. Despite this shift, there is limited research focusing specifically on the health of

To address the need for more knowledge about the health issues and care needs of this population, Dr. Mona Loutly, scientist at Women's College Research Institute, initiated the largest ever pan-Ganadian national research collaboration focused on this issue "Women's experiences with HIV are unique," says Dr. Loutly, who is also a physician and the research director at the Maple Leaf

Medical Clinic, which focuses on care for people with HIV in inner city Toronto. "Our research collaboration's goal is to better understand these experiences and use what we learn to inform policies and services that can help women living with HIV in Canada

Working in collaboration with research teams in Ontario, Quebec, British Columbia and most recently Saskatchewan and Manitoba, Dr. Loutly is leading a study that aims to better understand how women use women-centred HIV care in those provinces. The study is also assessing the impact of these services on health outcomes. The project is into its fifth year, and over 1,400 women have completed the interview-administered survey. The team has made specific efforts to include harder-to-reach, vulnerable populations

WITH HIV

women living with the condition.

achieve optimal health and well-being.

completed the interview-administered survey. The team has made specific efforts to include harder-to-reach, vulnerable populations and women from ethno-cultural and ethno-racial groups to ensure that the full range of women's health issues and experiences are

KTE- Accessing CHIWOS data?

Data Project and Request Form

- >30 data analyses currently underway
- •Consult your provincial coordinator
- •Consult: <u>www.chiwos.ca</u> under: CHIWOS Study/CHIWOSdocuments"
- •Thanks to data Analysis Team at the Epidemiology and Population Health program at the BC-CfE
- •CHIWOS and CANOC database linkage underway







Knowledge Translation & Exchange (KTE) Stay tuned!



PRA perspectives on peer-to-peer research

PRA Representatives on the National Management Team

> Challenges, rewards, and lessons learned in wave 2 (retention of participants)







Wave 3 - Participant Follow-up

Wave 3- Starting January, 2017

- ➤ 18 month follow-up with participants
- Updated survey version

Process:

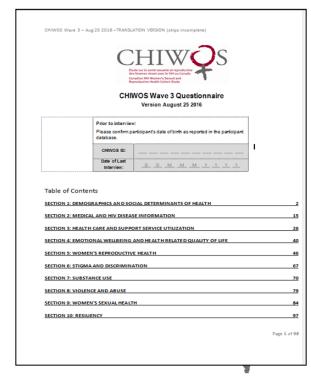
- ➤ Revisions incorporated ongoing feedback from PRAs, participant surveys, CABs from the Wave 2 survey, etc.
- > Teams worked on specific survey sections
- ➤ Revisions done in English, will translate final version to French



Wave 3 – overview and new priority topics!

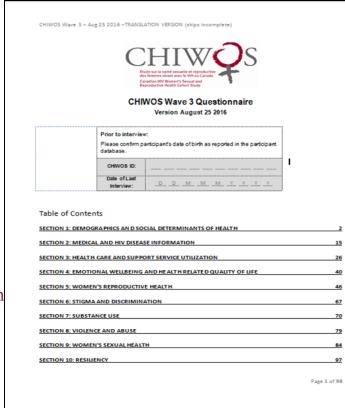
The survey includes the same 10 sections with some new priorities

- Section 1: Demographics and Social Determinants of Health
- > Section 2: Medical and Disease information
 - New priorities: Aging, Side effects and Medical knowledge on HIV;
- > Section 3: Health Care and Support Service utilization
 - ➤ New priorities: Access to health care for women in remote areas, healing and holistic health;
- Section 4: Emotional wellbeing and Health related
 Quality of Life
 - New priorities: Post-traumatic stress, social isolation/support;



Wave 3 – overview and new priority topics!

- > Section 5: Women's Reproductive Health
 - New priorities: Disclosure and criminalization
- Section 6: Stigma and Discrimination
 - New priorities: Enacted stigma, racism, sexism scales
- > Section 7: Substance use
 - New priorities: Stigma and IDU, harm reduction services
- > Section 8: Violence and Abuse
- > Section 9: Women's Sexual Health
 - New priorities: sexual violence, sexual activities, satisfaction and concerns about sexuality.
- > **Section 10**: Resiliency



New Grant Funding- CHIWOS renewal

Renewal grant – CIHR

- ▶1st place in the CIHR competition!
- ▶5 years renewed (March 2016-2021)



CIHR renewal grant will allow:

- Launch of CHIWOS wave 1 and 2 in SK and MB
- ► Have a third (wave 3) follow-up in BC, ON, QC
- ➤ Body mapping



New Grant Funding in 2015-2016

BC:

- -CIHR Knowledge Synthesis Grant, Normalizing sex and intimacy: A knowledge synthesis and translation grant to promote healthy sexuality and intimate relationships among women living with HIV (\$50,000)
- -CIHR Planning and Dissemination Grant, Canadian HIV Women's Sexual and Reproductive Health Cohort Study: Peer Research Associate (PRA)-led Knowledge Translation and Exchange (KTE) Strategy (\$15,000)

ON:

- -CIHR, CBR Catalyst Grant, PRA-led KTE Initiative (\$33,000)
- -AFP, Innovation Funds, PRA-led KTE Initiative (\$21,590.82)

QC:

- -Réseau Sida/Mi FRSQ, Knowledge Translation -ACFAS(\$2,500)
- -Réseau Sida/Mi FRSQ, Co-designing care: engaging patients and providers to improve primary care for women living with HIV in Quebec. Ph.D project- Nadia O'Brien (\$30,000)

Trainee Funding & Awards in 2015-2016

- CIHR-CAHR Doctoral Research Award (2015-2018), Allison Carter
- CAHR New Investigator Award (2015), Sophie Patterson
- CTN Post Doctoral Fellowship (2015-2016), Nisha Andany



- Social Science and Humanities Research Council (SSHRC) 2016 Doctoral Award, Ashley Lacombe-Duncan
- Dr. Robert Remis Scholarship in Public Health and Epidemiology, 2016, awarded by the CAHR, Ashley Lacombe-Duncan
- Lupina Junior Doctoral Fellowship, Munk School of Global Affairs, Comparative Program on Health and Society, Ashley Lacombe-Duncan



Future Grant Funding- Overview

Applying for CIHR Foundation Grant (2016/17)

The Foundation Grant program is designed to contribute to a sustainable foundation of health research leaders, by providing long-term support of innovative, high-impact programs of research.

Programs of research are expected to include integrated, thematically-linked research, knowledge translation and mentoring/training components.

The Foundation Grant program will:

- support a broad base of research leaders across career stages, areas, and disciplines relevant to health;
- develop and maintain Canadian capacity in research and other health-related fields;
- provide research leaders with the flexibility to pursue new, innovative lines of inquiry;
- contribute to the creation and use of health-related knowledge through a wide range of research and/or knowledge translation activities, including any relevant collaboration.

Questions and Comments?



Thank you!

For more information about CHIWOS, please contact:

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