

# 2019-2020 Annual Report



**ANISHNAWBE**  
HEALTH TORONTO





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and Board President
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## Our Mission

To improve, support,  
and promote the health,  
well-being, and healing  
of Aboriginal people in  
spirit, mind, emotion,  
and body within a multi-  
disciplinary health care  
model.





## Our Vision

*An Aboriginal Community:*

- That nurtures the Family Spirit and strengthens family identity by embracing and sharing culture and traditional knowledge.
- That respects the beauty and power of nature and creation, and helps to ensure a healthy environment.
- Where individuals and families are strong spiritually, emotionally, mentally and physically, independent and self-sufficient; with ready access to Traditional Health and healing as well as culturally-safe models of care from pre-birth (Traditional Midwives) to preparation for return to the spirit world (Traditional Healers).
- Where individuals are self-determining and able to take advantage of opportunities in order to reach their full potential and are prepared to share with others.
- Where people have a strong sense of identity and pride, as well as being knowledgeable of their traditional ways and values.
- Where Healing Lodges are at the centre of the community accessible to all of our people.

## Our Beliefs

*AHT roots all of its activities on the following teachings:*

- Healing, learning, and teaching are synonymous
- We are all responsible for our personal health, wellness, and healing
- Nature and creation is our First Family. We show respect for our First Family and include them in our prayers. We also show respect for the spirits of our ancestors who are part of our First Family.
- There is an energy or life force which exists throughout nature and creation. This energy is within all of us. It gives us life and emanates from the human body. It is our spirit; it then affects the mind, then the emotions, and finally the body; for healing to occur, treatment must include our whole being.
- The Healing Path also includes preparations for the journey to the Spirit World. Death is part of the cycle of life.

## Our Principles

*AHT will work toward achieving its visions and carrying out its mission based on the following principles:*

- We respect teachings of all people.
- We accept and provide care to all Aboriginal people and their families, including status and non-status First Nations, Inuit, and Metis people.
- We respect the right of our clients to receive services free from judgment and to choose the care path that is right for them.
- We strive to provide services that enable people to reconnect with and strengthen their spirit.



# Message from our Executive Director and Board President



## Our Board of Directors

The Board of Directors is a committed and talented group of individuals who take on the responsibilities of governance.

**Meegwetch!**

**Marian Jacko**, President  
**Clio Straram**, Vice-President  
**Carol Kuleba**, Treasurer  
**Billie-Jo Goulais**, Secretary  
**Annelind Wakegijig**,  
Member  
**Kyle Grover**, Member  
**Mark Atanasoff**, Member

Welcome everyone to our Annual General Meeting for 2019-2020.

In some fashion COVID-19 has impacted everyone and most aspects related to AHTs work environment, including the timing of our AGM and the necessity to conduct it virtually.

In September of 2019, we concluded an agreement with Dream-Kilmer, the developers of our property at 409 Front Street. The agreement will allow for AHT to resource a portion of the overall development of the property including the new health centre and assisting Miziwe Biik build its new facility

Our housing assistance program subsidized 165 families and provided housing retention support for 684 households. This program would prove to be very valuable for many in the days to come.

In February 2020, we received support from Toronto Region allowing us to begin the work of developing our own Ontario Health Team for the Indigenous community of Toronto. The initial work would begin by seeking feedback from AHT staff and board of directors, Indigenous organizations and agencies, AHT clients and non-Indigenous agencies.

Our Rapid Access to Addiction Medicine service, in operation since

2018 will be seeking additional funds to add a mobile capability. This added feature will enhance the service access for clients and our reach out capacity.

We received financial resources from Toronto Region to support a harmonized Indigenous-Western Palliative Care program. This support was a one-time allocation to be later picked up by the Province.

This year's Community Health Worker Training Program matched the previous year's retention rate with 6 of 8 students graduating. Hopefully this improved success will continue with graduating students working in our communities or pursuing additional education.

We continue our work to develop a Long Term Care facility for our community. Currently, along with a developer, plans are to locate this 128 bed facility at the waterfront. Sidewalk Labs, an affiliate of Google, is developing this waterfront property and AHT has been invited to participate.

We have been recruiting for a Director, Special Projects without a great deal of success. The next step will be to engage

a professional recruitment firm. This position will have responsibility for projects such as the Long Term Care service and the Training Program for Osh-Ka-Be-Wis, Ceremonialists and future Traditional Healers.

The work continues for our new facility to begin construction in the summer of 2021. This has been a moving target largely due to the necessary approvals required by the City of Toronto and Waterfront Toronto. In addition, we will conclude agreements with all parties to the development in 2021. We look forward to a ground breaking ceremony in the spring or early summer of 2021.

On behalf of the board of directors our thanks and appreciation to the staff and volunteers for their hard work in providing much needed health services to our community.

## Meegwetch

Marian Jacko  
President,  
Board of Directors

Joe Hester  
Executive Director Mukwa Dodem  
Cree Nation

# Our Leadership



# Auditor's Report

# Auditor's Statement



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Toronto, ON M5K 1H1 Canada

## REPORT OF THE INDEPENDENT AUDITOR ON THE SUMMARY FINANCIAL STATEMENTS

### To the Members of Anishnawbe Health Toronto

#### Opinion

The summary financial statements, which comprise the summary statement of financial position as at March 31, 2020, and the summary statement of revenues and expenses and changes in net assets for the year then ended, and related notes, are derived from the audited financial statements of Anishnawbe Health Toronto (the Organization) for the year ended March 31, 2020.

In our opinion, the accompanying summary financial statements are a fair summary of the audited financial statements, in accordance with the criteria disclosed in Note 1.

#### Summary Financial Statements

The summary financial statements do not contain all the disclosures required by Canadian accounting standards for not-for-profit organizations. Reading the summary financial statements and the auditor's report thereon, therefore, is not a substitute for reading the Organization's audited financial statements and the auditor's report thereon. The summary financial statements and the audited financial statements do not reflect the effect of events that occurred subsequent to the date of our report on the audited financial statements.

#### The Audited Consolidated Financial Statements and Our Report Thereon

We expressed an unmodified audit opinion on the audited financial statements in our report dated June 26, 2020.

#### Management's Responsibility for the Summary Financial Statements

Management is responsible for the preparation of the summary financial statements in accordance with the criteria disclosed in Note 1.

#### Auditor's Responsibility

Our responsibility is to express an opinion on whether the summary financial statements are a fair summary of the audited financial statements based on our procedures, which were conducted in accordance with Canadian Auditing Standard (CAS) 810, *Engagements to Report on Summary Financial Statements*.

*BDO Canada LLP*

Chartered Professional Accountants, Licensed Public Accountants

Toronto, Ontario  
August 26, 2020

## Summary Statement of Financial Position

As at March 31	2020	2019
<b>Assets</b>		
<b>Current</b>		
Cash and restricted cash	\$ 5,983,420	\$ 4,764,123
Short Term Investments	3,700,000	-
Accounts receivable	469,489	383,225
Prepaid expenses	89,243	83,632
	10,242,152	5,230,980
<b>Fixed assets</b>	447,491	568,060
<b>Development costs</b>	4,521,752	3,170,914
	<b>\$ 15,211,395</b>	<b>\$ 8,969,954</b>
<b>Liabilities and Net Assets</b>		
<b>Current</b>		
Accounts payable and accrued liabilities	\$ 1,476,736	\$ 593,074
Deferred revenue	4,579,218	1,138,959
Due to funders	2,469,777	2,035,210
	8,525,731	3,767,243
<b>Deferred capital contributions</b>	4,478,161	3,623,092
	13,003,892	7,390,335
<b>Net assets</b>	2,207,503	1,579,619
	<b>\$ 15,211,395</b>	<b>\$ 8,969,954</b>

## Summary Statement of Revenues and Expenses and Changes in Net Assets

For the year ended March 31	2020	2019
<b>Revenues</b>		
<b>Unrestricted</b>		
Toronto Central Local Health Integration Network	\$ 6,549,197	\$ 6,051,372
Other programs	4,952,918	3,570,964
<b>Restricted funds</b>	1,413	626
	11,503,528	9,622,962
<b>Expenses</b>		
<b>Unrestricted</b>	10,871,878	9,248,507
<b>Restricted</b>	3,766	7,765
	10,875,644	9,256,272
<b>Excess of revenues over expenses for the year</b>	627,884	366,690
<b>Net assets, beginning of year</b>	1,579,619	1,212,929
<b>Net assets, end of year</b>	<b>\$ 2,207,503</b>	<b>\$ 1,579,619</b>





# Traditional Services



# Babishkhan Unit

# Our Wellbeing

The Traditional Team is the core of AHT's organization and works with all programs within it. Our team is made up of Traditional Healers from varying First Nation communities and Osh-ka-be-wis (Traditional Helpers). They work with clients on a daily basis doing one-on-one doctoring and teachings to ensure spiritual, mental, physical, and emotional wellbeing of our community members.

The program offers varying services that clients can be referred to such as sweat lodge ceremonies which are conducted for the community, family or individual. Fasting ceremony done twice a year for our community, one in the spring and one in the fall, Shake Tent ceremonies done in the fall, winter, and spring and we have the Ancestors Feast twice a year. Most of these ceremonies have been paused since the onset of the pandemic and we look forward to restarting all of them.

The Healers are well integrated into many programs that are offered by AHT, doing teachings for the Community Health Worker Program students, providing direction to the community outreach programming for the two spirited and trans community members and working with our clients in group sessions to promote Aboriginal mental health. Healers are available for outreach services for the clients who are not able to leave their homes. Hospitals, Hospice and Palliative visits are a big part of our services as we honour

the end of life as well as new life within our community.

All of the Traditional Healers will visit schools to provide the youth with their spirit names, a key part of identity, starting them on their path to learning who they are.

The Palliative Care team was comprised of 2 social workers who worked closely with the Traditional team. The program provided cultural supports and resources for palliative clients and their families, to share their understanding of life and their journey within the circle of life. The aim of the program was to improve the quality of life for clients through ceremonies, medicines, traditional practices and teachings. The Healers, Elders and Medicine People shared their teachings to understand the balance of the cycle, within the palliative care experience, for both the client and their family. The service was mobile, and the Traditional Palliative Care team traveled to the client. The program was able to support 18 clients during the duration, which was limited to the 2019-2020 fiscal year due to lack of ongoing funding.

## Mental Health Services

Our mental health services offer a multi-disciplinary approach to care. We offer counselling services that could include mental health counsellors, traditional counsellors, and psychiatry support. We use a long-term case management model to provide support that considers the spiritual, mental, emotional, and physical needs of every individual. Clients can self-refer to the program for intake.

### Scope of our Services

- Traditional Services
- Traditional Counselling
- Mental Health Counselling
- Couples and Family counselling
- Traditional Youth Counselling
- Walk-in/Phone-in Counselling
- Child and Family Therapy
- Psychiatry and Psychology Services
- Substance Use Supports
- Indigenous Supportive Housing Program
- 2 Spirit Trans Counselling and Peer Support
- Services
- Youth Outreach Worker
- Babishkhan Circle of Care Program
- Community Health Worker Program
- Case Management Supports





## *Rapid Access Addiction Medicine Program (RAAM):*

The fentanyl overdose crisis continues to disproportionately affect the Indigenous community. Across Canada, fentanyl overdose deaths exceed the number of CoVid deaths, making our Rapid Access Addiction Medicine program critical to the care of Indigenous people who are reliant on the contaminated street drug supply and those who are alcohol dependent. We continued to evaluate the services offered clients and have been developing some important changes. The past 3 years of operation have taught us that the complexity of cases presenting to the RAAM require a physician-led response and so we applied and were successful at getting the support from the funder to recruit a physician in a position that was previously occupied by a Nurse Practitioner. We are developing plans to operationalize the RAAM as a mobile service in the spring, which will see care delivered directly to homes, encampments and other facilities where drug and alcohol dependant community members are located. These measures will increase our capacity to ensure no barrier service to evidence based care that prevents death by fentanyl and/or alcohol. The objective is to provide alternatives to clients for whom the next dose of illicit drugs could be fatal due to contamination by fentanyl. Opioid Agonist Therapy (OAT) provides safety even in the presence of fentanyl use. Medication-assisted care liberates the client from the narrow existence afforded during fentanyl dependence. While on the OAT, they can reconnect with family and engage in morale building social activities that affirm identity, reduce isolation and improve mental and physical health.

Note about present developments: We successfully recruited Dr. Chetan Mehta who has been delivering and studying addiction medicine for many years. Since his arrival at AHT in October we have seen an increase in the continuity with which clients are engaging in care as well as in the number of clients who are being seen at the RAAM.

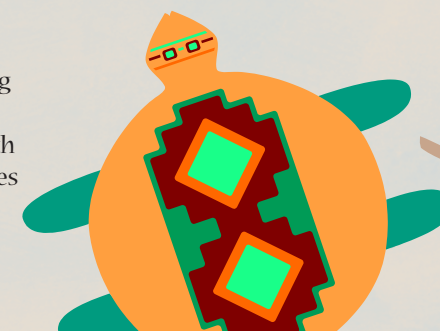
## *Aboriginal Mental Health & Addictions Program (AMHA):*

Following the move from Vaughan Rd. to the current Charles St. location, the AMHA quickly recovered from the short lull that proceeded the settling in at the new location. During the 2019-2020 year numbers actually did increase slightly. The program continued to deliver groups and engage clients in 1:1 counselling, although we did note an eventual increase in the numbers of no shows and cancellation which have been occurring across a broader time line and don't appear to be location specific. The weekly group that brought together Traditional Healer and teachings with a therapist, continued to be evidenced as the most popular and well attended group. We have been developing plans for more cultural content in all of the AMHA groups, using the understanding that culture is care. We were hoping to launch some of the new group work in early 2020. Included were plans landbased ceremonies that would set the tone for the counselling that would also shift focus to a greater emphasis on traditional teachings while still maintaining the western therapeutic modalities.

These plans were stalled by the onset of the pandemic which made in-person groups impossible with respect to social distancing requirements. While we saw a significant drop in participation at this point, the delivery of telephone counselling sessions slowly brought community members back in, finding the convenience of care over the phone, appealing and safe with no need to risk public transportation. Note about present developments: Now restabilized after the onslaught of challenges related to service delivery during the pandemic, we are close to being able to launch a number of virtual groups that will bring Traditional Healers and teachings into the living rooms and phone screens of clients. Additionally, we will be offering evening programming twice per week, during the critical hours when clients are reporting the that they are tormented by anxiety and doubt. Once the pandemic conditions allow, we will be using the Mobile Health vehicles to support all AMHA clients in participating in a series of landbased activities and ceremonies.

## *Two-Spirit & Transgendered Program:*

The Two Spirit Trans Services continues to see growth in numbers of participants. We had some staff changes over the past year but managed to maintain a high level of expert therapeutic services that are enriched by the integration of Traditional knowledge and healing ceremonies. We have seen 2 Spirit and Trans community members thrive under the support of peer mentoring that responds to day to day needs, replacing alienation with inclusiveness and specialized care. Successes include moving off the streets into housing that works to end precariousness and instability and engagement in training and employment. New relationships are fostered and sustained through access to therapeutic interventions that promote identity in queer positive space that challenges complicity to ensure safety and inclusion.



Healing



# Babishkhan Unit



## *Indigenous Supportive Housing Program:*

The ISHP (housing) program has continued to provide affordable and safe housing to families and single men and women throughout the year. The rent subsidies top-up the shelter portion that is afforded by Ontario Works and Ontario Disability and Support Program. But while social services shelter funds are capped out at 497.00 or 390.00 (depending on whether someone is receiving OW or ODSP) the importance of these rent subsidies is clear. While we have the capacity to support 177 households, the numbers have hovered at about 165, a consequence of the pervasive difficulties in securing housing even with the subsidies and the capacity to pay full first and last month's rent upon lease signing. The demands for spotless credit in order to secure housing, is often the mechanism used to deny those on social assistance from entering into rental agreements. The ISHP staff team and Circle of Care social workers have worked hard to address this through forging relationships and rapport with landlords. This has resulted in countering the exclusionary practices and placing community members into apartments that are comfortable and welcoming. The outcomes of stable housing are improved mental and physical health and this leads to gains in all other domains of a person's life and family wellbeing. Note on present developments: We currently have 186 households in housing and receiving monthly rent subsidies. We are very concerned about the future of this program and we are actively advocating that the province continue the rent subsidies to avoid the eviction of these families if the funding was to not be continued.

# Waash-Keshuu-Yaan Unit

## *Primary Care Services:*

Our multi-disciplinary team includes Nurse Practitioners, Physicians, Registered Nurses, Physicians, Clinical Counsellor, Physiotherapists and Health Promoter. Goal of care is to provide holistic healthcare programs and services. These programs and services include: health promotion, illness prevention, disease management, well baby and child health assessments, immunizations, infant and child developmental assessments, women's and men's health services, periodic health examinations, routine screening, diagnostic and testing procedures, prenatal and postnatal/Infant primary health care, health counselling, and individual, family, and couples counselling.

## *Diabetes Education Program (DEP):*

Our diabetes education program is inclusive of a diabetes prevention and diabetes management program. The multi-disciplinary team of Dietitians, a Diabetes Nurse Educator, a Social Worker and a Chiropodist provides individual, family, and caregiver support for diabetes. Our culturally-based program integrates Traditional and Western approaches to provide health education and aims to reduce secondary complications of diabetes. In addition to providing education and support, our services include: oral medication supports, disease management, insulin monitoring and management, nutritional counselling, foot care, and lifestyle management.

## *Oshkii Okitchidak Youth Program:*

### **New Beginnings Full Of Life Young Women Young Men Warriors**

Our program provides youth (ages 14-18) with counselling, advocacy, cultural groups and activities initiated by youth and driven by their interests. Given opportunities to participate in Traditional cultural circles and ceremonies, we support youth to have a strong sense of identity with the confidence to participate as equals in a native and non-native environment. The OSHKII OKITCHIDAK program engages youth and their families/supports in cultural activities that reflect their needs and interests.

## *Maternal Infant Program:*

Kitchiniigaan Noongom (The Future is Today) program provides pre- and post-natal support for women and their families until their child is 12-months old. Our traditional and culturally-based program celebrates the sacredness of life and honours the spirit of women. Services include education, nutritional counseling and support, traditional pre-natal circles, traditional teaching circles, traditional parenting circles, welcoming ceremonies, naming ceremonies, lactation supports, and infant development groups..





# 2019-20 Clients/Visits/Sessions



## FASD Prevention Program & Diagnostic Clinic:

This program strives to promote the awareness and prevention of Fetal Alcohol Spectrum Disorder (FASD) as well as early interventions for families and caregiver who are caring for children diagnosed with FASD. Health promotion and prevention activities include community information workshops, support groups, pre-natal circles, school programs, and both one-on-one and group support for families and caregivers. Community members are invited to access information on FASD support services and resources at our program office. It takes a community to prevent FASD and to support expectant mothers in an alcohol and drug-free pregnancy. Multidisciplinary team membership - Neuropsychologist, Physicians, Social Workers, Speech & Language Specialist, Psychiatrist, Traditional Healers and Medicine People. FASD multidisciplinary team provide FASD assessments, diagnosis, treatment and resource plans of care.



### Traditional Services

3,289  
Total Unique  
Clients

*"1 Client was seen  
approximately 10  
times for their care"*

877  
Clients

1,981  
Visits

### Waash-Keshuu-Yaan

1,908  
Clients

15,120  
Visits

31,220  
Total  
Encounters

### Babishkhan Unit

5,184  
Participants

1,600  
Clients

11,632  
Visits

*"1 Client attended  
a group session  
approximately 7 times  
for their care"*

### Chayuuweytim

350  
Clients

2,487  
Visits

792  
Group  
Sessions





**ANISHNAWBE**  
HEALTH TORONTO

# COVID-19 Pandemic Urgent Response

We gratefully received several PPE donations, including non-medical and surgical masks, exam gloves and hand sanitizer, donated to the Foundation by donors for staff, volunteers and clients



**“Thank you so much for all your help, especially with all this isolation. I looked forward to seeing people I could say a few words too. It really brightened my day! And being included when I felt alone meant so much.”**

**- Email from AHT Client**

With great donor support, during the COVID-19 pandemic, Anishnawbe Health has been able to quickly address the needs of the Indigenous Community in Toronto. The COVID-19 Urgent Response Fund has raised over \$170,000 and has allowed Anishnawbe Health to offer more support for this vulnerable community and ensure everyone stays as healthy as possible.



Chris Pike, Aboriginal Mental Health & Addictions Program, providing online counselling support

**“I feel so much better since I got started with phone counselling with Anishnawbe Health. People who need these services must feel so lost, so I am happy that they are reaching out to do phone counselling. My level of anxiety has already dropped majorly. Miigwetch”**

**- Tweet from grateful AHT Client**



In the spring of 2020, Anishnawbe Health provided 830 food hampers and grocery gift cards to our most vulnerable clients during the COVID-19 emergency. In addition to donor support, Foundation volunteers helped deliver food hampers to elders and clients with chronic health challenges.

**“Thank you for the grocery gift cards you donated for groceries. When I again looked at the cards during the middle of the night, tears came to my eyes at the true kindness shown. The cards will be well used and thanks again for the graciousness shown.”**

**- Card from AHT 76-year-old Client,**



# COVID-19 Pandemic Urgent Response



In March 2020, Anishnawbe Health Toronto implemented a staff rotation as part of our commitment to keep staff and clients safe as in-person services as well as phone and virtual care delivery could be maintained during the pandemic. We have been successful at ensuring that community members have access to counselling services, primary care services, traditional services, housing supports, psychiatry and psychology care, rapid access to addiction medicine, the Community Mental Health Worker Program, and case management.

## **Mobile Health:**

In June AHT launched the Mobile Health as a response to the CoVid 19 virus. The Mobile's central roles are to provide rapid and long-term housing options and perform CoVid testing for Indigenous community members with an emphasis on those who are homeless. The team consists of a Registered Nurse Extended Class (NP), a Social Worker, and a Housing Support Worker. Jane Harrison, (RN) coordinates the program, working closely with Joe Hester, E.D., and Harvey Manning, Director of Programs and Services to establish care sites where the risks are most significant. Once at the sites, the Mobile team tests everyone regardless of ancestry, ensuring the greatest impact against CoVid infection transmission. To date, the Mobile Health has tested more than 8000 people. We have partnered with Women's College Hospital (WCH) on this



Photo credit: Ryan Walsh



program, to increase our capacity for infection prevention control in a mobile environment and in accessing the growing body of knowledge in the spread of this CoVid virus. We have collaborated with the Region and the City of Toronto to ensure broad range testing in congregate living locations including encampments as well as Indigenous housing that is specific to families. The Mobile Health is also equipped for the delivery of primary care and to administered vaccinations.





# Anishnawbe Health Foundation

## *A message from Andre Morriseau, Chair of Anishnawbe Health Foundation*

2019/20 has been a year of successes, growth and unprecedented challenges. Fundraising for our \$10 million campaign to support a new home for Anishnawbe Health Toronto has now raised over \$8 million in pledges and gifts. In late 2019, we were pleased to announce the leadership pledge to the campaign of \$2 million from the Krawczyk Family Foundation. The announcement was made in November at a reception to publicly launch the campaign and celebrate our circle of amazing donors, sponsors and volunteers who have helped us to establish the Foundation over the past four years.

The reception coincided with a concerted media effort which raised the profile of the campaign for a new Anishnawbe Health Centre. Coverage included a full-page ad and an article by award-winning Ojibwe author Tanya Talaga in the *Toronto Star* and articles on lead donors Cherie Brant and the Krawczyk Family in *The Globe and Mail*. Anishnawbe Health was featured by 12 media outlets with a reach of over 6,500,000 people.

This coverage attracted another leadership supporter to our campaign – the Barry and Laurie Green Family Charitable Trust who have pledged \$500,000 to support the Family, Child and Youth unit at the new health centre.

In 2019, we also worked to expand our reach with donors with the help of our future neighbours in, Corktown. Under the leadership of Tricia Waldron and Larry Webb, the community has raised nearly \$60,000 for the campaign – more than doubling their initial goal of \$25,000.

Online donations increased this past year. Our new Sweetgrass Monthly Giving Circle grew to 63 members – a 350% increase in only one year. Please take a moment to review our donor list in this report. We are grateful for all of the donors and volunteers who are partnering with us to support the vision and mission of our Foundation.

In early 2020, the world was hit with a crisis like no other. When COVID-19 arrived in Canada, Anishnawbe Health Foundation took swift action and shifted priorities to focus on delivering immediate assistance to health centre clients and the Indigenous Community. With the help of an anonymous Family Foundation pledging to match the first \$25,000, the COVID-19 Pandemic Response Fund was launched. And, within one week, the match had been met by our generous supporters.

Thanks to the donations to our COVID-19 Pandemic Response Fund, the team was able to offer more support to ensure the community stayed as healthy as possible. Major donors to the fund included Audrey S. Hellyer Charitable Foundation, Barry and Laurie Green Family Charitable Trust, the Carrick Family, CIBC, Greenrock Charitable Trust and the Rotary Club of Toronto. With the help of volunteers, we doubled our efforts to get healthy, nutritious food to the most at risk community members by delivering more than 2,500 grocery gift cards and healthy food hampers. We were also able to provide funding for increased access to remote counselling for clients facing additional mental health challenges because of social distancing. In addition, donor support has helped to augment the care on

Anishnawbe Health's newly launched Mobile Healing Unit. This RV allows Anishnawbe Health Toronto to bring mobile COVID-19 testing, health care and traditional healing to the homeless and precariously housed. Today, the COVID-19 Pandemic Response Fund continues to grow with over \$170,000 in gifts as well as in-kind donations including PPE, hand sanitizer and food.

Unfortunately, due to the pandemic we were unable to hold our 4th Annual June Reception & Auction. We would like to thank our Auction Committee for their continued support and we look forward to when we can celebrate together again in person.

The Anishnawbe Health Foundation family has also faced two big losses in recent months. Valued staff member John O'Leary and volunteer champion Tricia Waldron both sadly died in unfortunate accidents in 2020. We miss them greatly and we are humbled that both John and Tricia's families chose to direct donations in their memory to the Foundation.

I encourage you to get involved with our Foundation's growing circle of supporters and volunteers who are committed to making a difference in the health and healing of the Urban Indigenous Community. To those who have supported our organization this past year in any capacity, we thank you and are honoured by your generosity.

Chi-Miigwech,  
Andre Morriseau  
AHF Board Chair

*Please visit [www.supportanishnawbe.ca](http://www.supportanishnawbe.ca) to review the Audited Financial Statements of Anishnawbe Health Foundation for the year-ended March 31, 2020.*



# Anishnawbe Health Foundation



Anishnawbe Health  
Foundation  
[SupportAnishnawbe.ca](http://SupportAnishnawbe.ca)

## Vision

Healthy Indigenous peoples contributing  
to sustainable urban communities.

## Mission

To inspire philanthropy to:

- Support an environment where the urban Indigenous community can heal spiritually, physically, emotionally and mentally by enhancing capital and program funding for Anishnawbe Health Toronto; and
- Foster the reclamation, preservation, research and application of traditional healing methods, including the sharing of these with all people.

## Board Members

### Anishnawbe Health Foundation Board of Directors 2019/20

**Andre Morriseau**, Communications Manager, Ontario Native Women's Association (ONWA)  
(Chair)

**Cherie L. Brant**, Partner, Indigenous Law Group, BLG LLP (Vice-Chair)

**Lyndsay Brisard**, York University Commerce Program (Youth Representative)

**Tim Laronde**, National Director Indigenous Strategies at Chandos Construction

**Diane Gray**, President, Ozhige Insulpanel Limited

**Elisa Levi**, RD, MPH, Indigenous Health Consultant

**Judith Moses**, President and CEO, Judith Moses Consulting

**Margaret Purcell**, MES, CFRE, Director, Individual Giving, Indspire

**Stephen Scott**, Senior Manager, Investments, Canada Infrastructure Bank

**Chandrakant Shah**, OOnt, MD, FRCPC(C), FAAP, SM (Hyg.), Honorary Consultant Physician,  
Anishnawbe Health Toronto & Professor Emeritus, Dalla Lana School of Public Health,  
University of Toronto

### Anishnawbe Health Foundation Finance, Audit and Investment

#### Committee Members 2019/20

**Stephen Scott**, Senior Manager, Investments, Canada Infrastructure Bank

**Carol Kuleba**, Anishnawbe Health Toronto Treasurer

**Joe Bates**, CPA, CA, Partner, MNP

**Thomas C. Darnay**, CPA, CA, CAFM, Chief Financial Officer, Indspire

**Peter Godec**, CFA, Partner, Jarislowsky Fraser

**Jeff Pentland**, M. Phil, LLB, Managing Director, Northleaf Capital

**Victor Pelletier**, Director, Indigenous Services, Dixon Mitchell

**Kelly Rodgers**, CFA, President, Rodgers Investment Consulting







# Anishnawbe Health Foundation Events



For the second year in a row, Old's Cool General Store raised \$2800 for Anishnawbe Health, in September, through Orange Shirt Day t-shirt sales. Community members and local politicians gathered at the store on September 30 to mark the day with drumming and a teaching.



# Anishnawbe Health Foundation Events



## *Honouring Our Circle of Campaign Supporters*

*In November, a reception was held to honour and celebrate the circle of amazing donors, sponsors and volunteers who have helped us to establish the Foundation over the past several years. Guests enjoyed traditional drumming and delicious Indigenous foods.*



## *Empty Bowls*

*The Gardiner Museum's Empty Bowls 2019 raised over \$14,500 for Anishnawbe Health. The Gardiner continues to be one of the longest running partnerships with Anishnawbe Health, dating back over 25 years. To-date Empty Bowls has raised over \$200K for Indigenous health in Toronto*



*What We Do*



# Anishnawbe Health Foundation Events



Anishnawbe Health staff (Raiden, Alex & Julie) along with Foundation Board Member (Lyndsay) getting ready to deliver holiday toys and turkeys to 45 Anishnawbe Health clients with families. With donor support, the Foundation participated in the program for the first time in 2019, to add food support to toys provided by CP24 CHUM Christmas Wish.



The Corktown Toronto Matching Gift Campaign, started by the Corktown Residents and Business Association (CRBA) raised over \$50,000 in order to dedicate a room in the new Anishnawbe Health Centre. The CRBA fundraising efforts culminated in a holiday party with an additional fundraiser for Anishnawbe Health.



Anishnawbe Health Foundation hosted the Toronto Foundation's Trust Collective Learning Journey Event. Over 40 women were brought together to learn about Anishnawbe Health's work and why culture, identity and ceremony are at the core to strengthening the urban Indigenous community. The women came together to honour grandmother moon, hear teachings about the four sacred medicines, enjoy traditional foods and listen to traditional drumming and singing.



# Our Future



# Our Future

*"This building, our future, has the chance to fulfill hopes beyond the services it offers. We are bringing an architecture to the Toronto landscape that represents us culturally and that our community will see and be proud of. The new home for Anishnawbe Health Toronto gives hope and inspiration. It shows good things are possible if we work together; that good things are within our grasp."*

*– Joe Hester, Executive Director,  
Anishnawbe Health Toronto*



*"Chi Miigwetch to our staff, partners and volunteers for their hard work in providing much needed health services to our community."*





# Anishnawbe Health Foundation

## Our Donors Chi-Miigwetch! Nia:wen! Thank you!

*Thank you to everyone who has made a gift to the Foundation to support health and healing for the Indigenous community.*

*The following people and organizations have made a pledge or gift to Anishnawbe Foundation of \$1,000 or more between*

*September 1, 2019 and August 31, 2020:*

### \$1 Million +

The Krawczyk Family Foundation

### \$250,000-\$999,999

Barry and Laurie Green Family Charitable Trust

### \$100,000-\$249,999

Anonymous

The John C. and Sally Horsfall Eaton Foundation

### \$25,000-\$99,999

Alternative Acres

Cherie Brant in honour of Clare Brant

C.I.B.C.

Greenrock Charitable Trust

L.I.U.N.A. Ontario Provincial District Council

### \$10,000-\$24,999

Audrey S. Hellyer Charitable Foundation

The Bennett Family Foundation

Better Toronto Coalition at Toronto Foundation

Carrick Family

Gardiner Museum

Nicole Gray, Stella Mclean and Leigh Tynan

Omar Khan

OPSEU Social Justice Fund Board

The Presbytery of East Toronto

The Rotary Club of Toronto

Schachter Family Fund at Toronto Foundation

Pamela A. Thomson

In memory of Bill and Noreen Wilkey

### \$5,000-\$9,999

Anne Butler Slaght Foundation

The Chawkers Foundation in memory of

John D. O'Leary

The Home Front at Upside Foundation

International Brotherhood Electrical

Workers (IBEW)

The McDonald Family

Mary McDougall Maude

Dr. J. Douglas Salmon Jr. & Family

Tricia Waldron

### \$1,000-\$4,999

AMAPCEO

Sue Ann Ang

Association of Bridge, Structural,  
Ornamental and Reinforcing Iron

Workers Local 721

Nancy Benjamin

Monica Black & Flow Hydrotherapy

Borden Ladner Gervais LLP

Community Counts Foundation

Julie Cookson & Anthony De Giusti

Sarah Dopp

Suzanne Dubeau

Gabriel Eidelman

Emerald Foundation

Extraordinary Conversations

Nora Farrell in memory of John D. O'Leary

Glenview Presbyterian Church

Greg Hancock

Timothy Hodgson in honour of Cherie Brant

Samuel Hunter

IATSE Local 873

Arden King in memory of John D. O'Leary

Ellen King in honour of Nelson King

Leith Wheeler Investment Counsel Ltd.

Elisa Levi

Lytton Communications

Linda Mather in honour of

Harry Frederick Brant

James McDonald & Maureen McKenna

Gord & Deborah Meyer

Estate of Cora Maria Moore

Bill Morneau & Nancy McCain

Judith Moses

Mary Murphy & David Ehrlich

Bruna Nota

Old's Cool General Store

Ontario Secondary School Teachers'

Federation

Patricia J. Fleming (FBG) Fund at Toronto

Foundation

Jeff Pentland

John Purcell

Peter Godec Foundation and the Godec Family

David Richardson

Ridgewood Capital Asset Management

Todd Ross & Kirk MacKenzie

St. Cuthbert's Anglican Church, Leaside

Clio Straram

Karen Tisch Slone

Toronto Netralya Lions Club

Wendy Vanden Heuvel in honour of Olivia Shortt

Edward C. Xie

Katie Young in memory of John D. O'Leary

Maureen Young in memory of John D. O'Leary

### Gifts-in-Kind

*Donations of goods and services from the following people and organizations helped the Foundation throughout 2019 and 2020, including donations of PPE for staff and clients during the pandemic (Sept. 1, 2019-Aug 31, 2020):*

AWIC- The Mask Drive with support

from Gursikh Sabha Canada,

Toronto Netralya Lions Club and

Save Max Real Estate

Chiefs of Ontario

Corktown News

CP24 CHUM Christmas Wish

Gardiner Museum

Cyndy De Giusti

Victoria Grant

Just Socks Foundation

Connie Langille

The Lunch Lady Foundation

Lush Fresh Handmade

Cosmetics

Mia MacDonald and Kate

Young, Keller Williams

Portfolio Realty

Nickel Nine Distillery

Publishers Group Canada

Jayne Terry

Judy Winberg & Andy

Pollack

Milton Winberg

Our Support



# Anishnawbe Health Foundation



## Sweetgrass Circle

### Monthly Donors

*The following donors were members of the Foundation's Sweetgrass Circle in 2019/20:*

Anonymous (3)  
Nicole Abi-Najem  
Jason Adams  
Paula Attfield  
Makram Ayache  
Zuzana Betkova  
Monica Black & Flow Hydrotherapy  
Diane Chung  
Dianna Contin in memory of  
David Contin  
Barb Crisp in memory of  
Rodney Bobiwash  
Christopher Di Tecco  
Sarah Dopp  
Stephen Douglas  
J. Dunlop  
Sara Ehrhardt  
Winston Ellie  
Brian Feldman  
Robert Fidler  
Loretta French  
Victoria Gallant  
Julian Gitelman  
Anne Gloger & Susan Phillips  
Daina Green  
Patricia Hernandez in honour  
of Kwaku  
Simone Hilley Bland  
Antu Hossain  
Tomaz Jardim  
Alexandra Kennedy

Christianne Labelle  
Colin Lacy  
Lia Lepre  
Joy Macdonald  
Jim Mackey  
Joanne Manderson  
Kayla Matson  
Patricia McVitty  
Ruth McWhannell  
Gord and Deborah Meyer  
Jenn Miller  
Angela Miller in memory  
of John O'Leary  
Judith Moses  
John Nielsen  
Sean O'Donnell  
Lise Olds  
Alexandra Paxton-Beesley  
Elise Pineda  
Todd Ross & Kirk MacKenzie  
Catherine Russell  
Dr. J. Douglas Salmon Jr. & Family  
Norman Shulman  
Tema Smith  
Raymond St. Aubin  
Clio Straram  
Julia Swiggum  
Christina Swindells-Nader  
Meighan Szigeti  
Andy Wang  
Karen Wendling  
Linda Wild  
Mark Wilson  
Marlene Ziobrowski

## Tribute Gifts

*The Foundation received donations to remember and/or honour the following special people between September 1, 2019 and August 31 2020:*

Kwaku Adu-Poku  
All the Staff at AHT  
Ellen Anderson  
Robin Arbuckle  
Matthew Barrigar  
Bear  
Melvyn Beiman  
Madeline Berke  
Derek Birch  
Rodney Bobiwash  
Alexandra Bowron  
Clare Brant  
Cherie Brant  
Harry Frederick Brant  
Betty Butterworth  
Isaiah Carpenter-Winch  
Celeste  
Charlotte and Jay  
Howsen Chong  
David Contin  
Lauren D'Angelo  
Brenda Darling  
Diann and Nate  
Bert Donia  
Cydne Dufresne  
Alison Dunning  
Kelly Fraser  
Alexa Gilmour & Adrian Marchuk  
Gillian and John  
Frederique Guinel  
Samyukta Hattangadi & Fred Glander  
Stephen Hong  
Belinda Huang  
Lake Inez  
Rusa Jeremic  
Ken Johnston  
Jordan and his Mother  
Hansaben Kalaria  
Chef Sang Kim  
Nelson King  
Lauren Kofsky and Matt Greer  
Katy Lalonde and Adam Babij  
Tim Laronde  
Connie Learn  
Cheryl Lewis  
Lucien, Sierra, Asher, Kate, Piper  
Lino Magagna  
Charles Manuel  
Geoff & Barbara McCord  
Calvin McLaughlan  
Alex McKay  
The Montgomery Family  
Catherine Moore-Broatman  
Murdered and Missing Indigenous Women  
and Girls  
Samira Nadkarni  
Stewart Nanibush  
Robert James Neshevich (Niizho Miigwan)

John D. O'Leary  
OPSEU Local 560  
Rashmi Patel  
Robert Purtell  
Ben Rosenblum  
Sam Sabbah and Nadia Farooki  
Kathy Saunders  
Naomi Sayers and her father  
William Sayers  
Dr. Chandrakant P. Shah  
Rajiv Shah  
Olivia Shortt  
James Smith  
Janet Solberg  
Stephanie  
Dr. Jill Tinmouth  
Shaquille Wallace  
Steve Wallace  
Elder Wanda Whitebird  
Susan Wayne  
Joy Wolfson  
Heather Young  
Elizabeth Yu  
Carmen Yuen



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HEALTH TORONTO



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**Anishnawbe**  
HEALTH FOUNDATION



[WWW.SUPPORTANISHNAWBE.CA](http://WWW.SUPPORTANISHNAWBE.CA)



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