



PARKDALE QUEEN WEST

COMMUNITY HEALTH CENTRE



Pictured above: Knowledge Keeper Tim McGregor, community drummers, and Vivian Recollet (right end)

NIIWIN WENDAANIMAK PROGRAM PRESENTS EAGLE STAFF

At the Fall Equinox ceremony held September 22 at the Queen West site, the Niiwin Wendaanimak (Four Winds) team introduced their new Eagle Staff to the Program. The gifting of the Eagle Staff is a significant bestowing of honour, trust and care for those who receive it. For Parkdale Queen West, it is a great honour to have the Centre's Indigenous-led service be recognized in this way. (Continued)

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A NOTE FROM THE EXECUTIVE DIRECTOR

We are unrelenting in our efforts to provide responsive services for the communities who need our care, and it is a mark of trust when the communities and partners we work with affirm and acknowledge these efforts. In September, we received two such gifts: the *Inspiring Positive Change at a Systems Level* award from Cota, a long-time community partner who has been providing a community-based organization that supports adults with mental health and cognitive challenges to live well within their communities for over 45 years.

The Indigenous staff and the Niiwin Wendaanimak program and Council work to bring culturally responsive and safe care to First Nations, Inuit and Métis peoples accessing care at the Centre.

As a non-Indigenous-led organization with an Indigenous-led Niiwin Wendaanimak Indigenous wellness program, having that program gifted with an Eagle Staff by Anishinabe Elder and Healer Jake Ago-Neh is another affirmation of the impactful work our teams are leading.

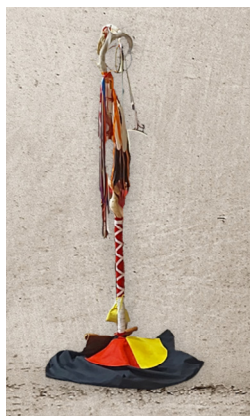
As we celebrate these gifts, we are also reminded that there is much work to be done in building relationships of trust, respect and care with border communities and the harm reduction work we do in supporting people who use drugs. We held an Open House and a virtual Town Hall gathering to hear and respond to concerns from residents and businesses regarding the use of public space adjacent to our Centres by community members who are unsheltered, issues with publicly discarded drug use equipment, and general concerns about safety around our Supervised Consumption Services. We have responded with enhanced community sweeps, weekend custodial support and enhanced externally facing community safety support to address and de-escalate potential crisis events. We have received positive feedback from these interventions, and with our staff will continue to respond to concerns.

While many of the solutions to homelessness, toxic drugs, overdose crisis, and poverty are beyond our control, we do see value in continuing to use our voices to advocate for systemic change that will address these issues and bring about positive change for all in our community. We invite all our neighbours and partners to do the same by appealing to our political leaders to invest in supportive housing, emergency shelter and a range of harm reduction and treatment supports for people who use drugs.

The work we do is lifesaving. It builds community and improves health and wellbeing, and we continue to be thankful for the support of partners, funders, clients and community members. Working together we can make our City a more livable and compassionate place.

Angela Robertson

Niiwin Wendaanimak presents Eagle Staff (Cont'd.)



At the ceremonial welcoming of the Eagle Staff, Knowledge Keeper Tim McGregor, Elder Jacqui Lavalee, and Knowledge Keeper Clayton Shirt— alongside Indigenous community dancers and drummers— provided teachings and shared ancestral stories of Indigenous culture and systems that take back thousands of years.

An **Eagle Staff** is a unique, sacred symbol representing traditional Indigenous culture and kinship. It is a significant element of the Indigenous peoples' relationship to Mother Earth and those who have protected it. Those who carry it are entrusted with upholding Indigenous knowledge, traditions and values, thus fostering a connection to ancestral roots.

Parkdale Queen West CHC is thankful for the work of Indigenous staff and the Niiwin Wendaanimak Program in bringing culturally safe care and traditional practices to the Indigenous communities we serve.

Special acknowledgment is due to Vivian Recollet, Indigenous Health Promoter, for her work in building the Niiwin Wendaanimak Program guided by the long-time support of Elder Wanda Whitebird and the first Council Chair Cynthia Bell, who created the building of the Niiwin Wendaanimak Program as a space for truthfulness, honesty, bravery, wisdom, integrity and respect for Indigenous traditions.



Staff and members at the Eagle Staff celebration



Program staff and members at their fall retreat

NIIWIN WENDAANIMAK FALL CELEBRATIONS

The fall is a specially busy time for the Niiwin Wendaanimak team, with many celebrations and observances.

In addition to introducing the new Eagle Staff to the program at the Fall Equinox ceremony on September 22, the team hosted Orange Shirt-Making workshops, where members hand-screened nearly 100 Orange Shirts in preparation for National Day for Truth and Reconciliation on September 30 — All while supporting members through various workshops, drop-in groups, and community excursions.

In October, a group of staff, peers, and members visited The White Buffalo Healing Lodge in Shawanaga First Nation, Ontario. The four-day trip allowed the group to observe and participate in setting fish nets, teaching circles, a sweat (purification ceremony), and sitting with Traditional Healer Jake Ago Neh.

The team is pleased to welcome two new staff: **Ray Misquadis**, Indigenous Case Manager, and **Jacques Nadjiwon**, Indigenous Health Promoter. We also thank and bid farewell to **Chantell Morais** and **Beth Luttenberger**.





PARKDALE QUEEN WEST CHC RECIPIENT OF 'INSPIRING CHANGE' AWARD

We are pleased to share that Parkdale Queen West is the proud recipient of the **Inspiring Positive Change at a Systems Level Award**, one of the *Inspiring Change* award categories issued by **Cota Health** (Cota) at their 50th Anniversary celebratory gathering on September 21.

Cota is a community-based organization that provides mental health services and housing supports for vulnerable populations across Toronto and is an invaluable partner of Parkdale Queen West.

The award recognizes the contributions of Parkdale Queen West in supporting and promoting harm reduction advocacy and services at several of Cota's locations. A special mention goes to Harm Reduction Outreach Coordinators **Aaron Woznica** and **Melody Grant** for their role in supporting and coordinating harm reduction training at Cota's modular housing sites; **Jane Rajah**, Registered Nurse, for her ongoing support of people with diabetes at many of Cota's locations; and **Raymond Macaraeg**, Nurse Practitioner for coordinating Mobile Health services at Cota's housing and sheltering sites.

In acceptance of the award were Aaron, Jane, Melody, Executive Director Angela Robertson, Primary Care Manager Tysa Harris and Board member John LeFave.

Thank you to Cota for this affirming acknowledgment of Parkdale Queen West's work and collaboration and to the staff and peers who support the various health and harm reduction efforts with Cota and other housing and sheltering partners.

Pictured above: Angela Robertson, Jane Rajah, Tysa Harris, Aaron Woznica, Melody Grant, John LeFave and Cota CEO Paul Bruce



PQW STRATEGIC PLAN UPDATE

Parkdale Queen West CHC launched its new strategic plan for the 2023-2026 period.

Our vision remains:

- Inclusive Communities.
- Responsive Healthcare.
- Healthier Lives

Our mission has been refreshed to:

Providing and leading equitable, accessible, comprehensive healthcare for people where, when, and how they need it.

Along with a refreshed mission, we adopted two additional core values:

- Client-centred.
- Community responsiveness.
- Social justice, equity, and access.
- Capacity building.
- **Humility and reconciliation.**
- **Accountability.**

The following are the four strategic pillars that will guide our work for the next three years:

1 Leading **excellence in care** with innovation and engagement.

2 Championing systemic **health equity** through advocacy.

3 **Reconciliation** through 'Indigenous health in Indigenous hands'.

4 Sustaining **growth** and success in a nurturing environment.

Thank you to all of our clients, staff and partner agencies for their feedback on the process and creation of the new plan.

HEALTHY NAIL SALON PROGRAM LAUNCHES NEW VIDEO



Pictured above: Nail technicians' video central figures with guest speakers and supporters

The Healthy Nail Salon's premiere of their animated video **Voices of Strength, Nail Technicians during COVID** at the auditorium of the Ontario College of Art & Design University (OCAD) on July 5 gathered over 50 friends and colleagues in a ceremony filled with congratulatory remarks and appreciation for the work of nail technicians.

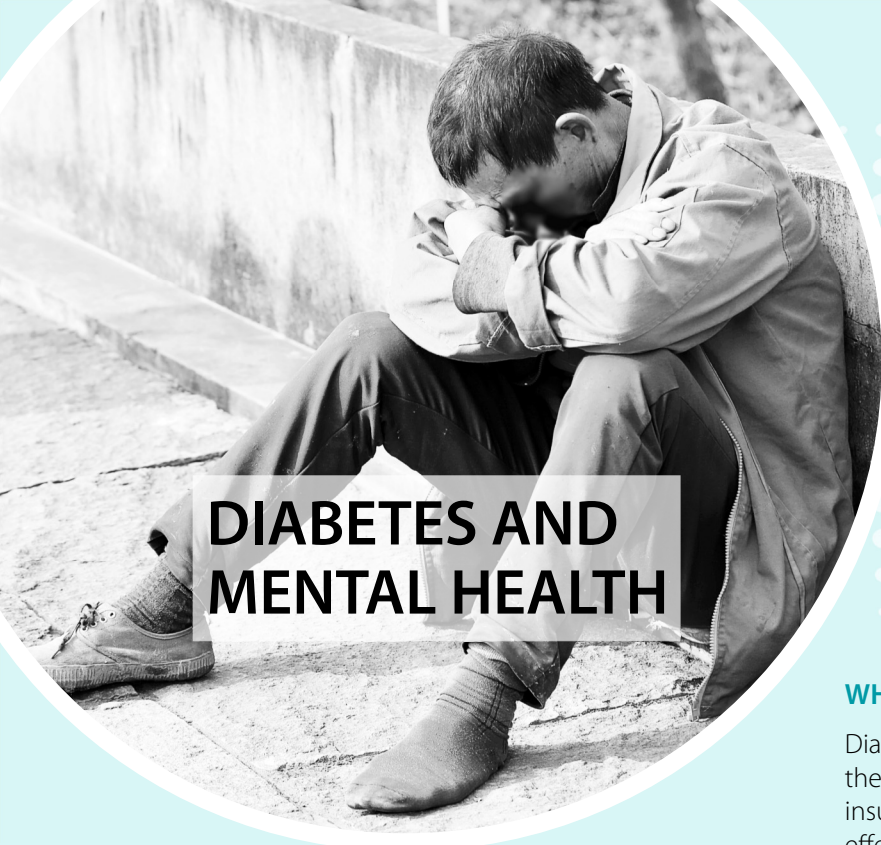
"What did you do to care for yourselves?" asked a member of the audience during the Q&A session, speaking to the ambivalence of providing beauty and care services to others amid adversity.

Voices of Strength is a collection of short stories from eight (8) nail technicians as they overcome challenges during the COVID-19 pandemic while working in an industry that relies solely on in-person service.

The video-animated form afforded nail technicians a compelling way to share their stories while maintaining anonymity and highlighting their voices, which are full of emotion, strength and resilience.

In a truly collaborative effort, the production of the video brought together a wealth of multicultural experiences and numerous stakeholders, including members of the Nail Technicians Network, students and administrators from OCAD, York University faculty members and Parkdale Queen West CHC staff.

The premiere culminated with a singing performance, and inspiring speeches from Myrtle Sodhi, Artistic Manager, York University; Parkdale Queen West Executive Director Angela Robertson; and Jackie Lang, Community Health Worker.



DIABETES AND MENTAL HEALTH

Compared to those with diabetes only, individuals with diabetes and mental health concerns are at risk for decreased participation in diabetes self-care and reduced quality of life. (Diabetes Canada, 2018)

Annual global awareness campaigns such as **World Mental Health Day** (October 10) and **World Diabetes Day** (November 14) each bring attention to issues related to systemic barriers to accessing health and social supports and the stigma associated with both diabetes and mental health.

Though diabetes is often associated with physical concerns specific to the condition, living with diabetes can significantly increase the risk for mental health concerns. Conversely, a mental health condition can put people at risk for developing diabetes.

According to Diabetes Canada:

- A wide range of psychiatric disorders, including schizophrenia, bipolar and related disorders, major depressive disorder, anxiety disorders, sleep disorders, eating disorders and stress-related disorders, are more prevalent in people with diabetes compared to the general population.
- Individuals with depression have a **40-60 %** increased risk of developing type 2 diabetes.
- Among Canadians with type 2 diabetes, **33%** do not feel comfortable disclosing their disease to others, often due to the stigma attached to the condition.

WHAT IS DIABETES? A BRIEF SNAPSHOT

Diabetes is a chronic condition that occurs when the body does not produce insulin, not enough insulin, or no longer uses the insulin it produces effectively.

Insulin is a hormone made by the pancreas that helps **glucose**, a type of sugar that comes from food, get into the body's cells to be used for energy. As glucose travels through the bloodstream to the cells, it's called blood glucose or blood sugar. Without enough insulin, blood glucose cannot move into the cells.

People with diabetes may have higher-than-normal or lower-than-normal levels of glucose in their blood; over time, having too much or too little glucose in the blood can cause serious complications resulting in blindness, kidney failure, cardiovascular diseases and lower limb amputation.

The most common types of diabetes are:

Type 1 diabetes, in which the pancreas does not produce insulin. It often occurs in childhood, and people with Type 1 diabetes require daily insulin injections.

Type 2 diabetes occurs when the pancreas does not produce enough insulin or does not effectively use insulin. Its cause can be a mix of behavioural, social, economic, environmental and genetic factors. People with Type 2 diabetes may also require daily insulin injections.

Gestational diabetes is a condition diagnosed during pregnancy. While it often goes away after delivery, there is a high risk that people with gestational diabetes and their babies may develop type 2 diabetes later in life.

DIABETES AND MENTAL HEALTH

As in many chronic health conditions, diabetes is accompanied by everyday challenges that significantly impact mental health.

Living with diabetes can be burdensome and overwhelming. Diabetes care demands considerable physical, emotional and economic challenges, including the need for continual monitoring and treatment to manage blood glucose levels within a narrow range— essential in reducing the risk of developing severe health complications.

These challenges and the constant demands of managing diabetes can take a significant psychological toll on people living with diabetes. As a result, many people with diabetes experience distress, decreased mood and disabling levels of anxiety and stress, which in turn affect their ability to cope with and care for their diabetes.

The term '**diabetes distress**' is used to describe the negative emotions and hopelessness resulting from the psychological burden of self-management and the persistent concerns about health complications experienced by people living with diabetes. In addition, it includes the concern about the potential deterioration of personal and professional relationships, including friends, family and healthcare providers.

Stigma

People living with diabetes often experience stigma associated with their condition. Stigma occurs when people with diabetes are blamed for their diabetes diagnosis.

In type 2 diabetes and gestational diabetes, the stigma is often due to its association with weight and lifestyle factors, not considering its complex biological and social determinants.

In type 1 diabetes, the stigma is often associated with intensive management of the condition, including overt insulin injections, dietary management, and hypoglycemic (low blood sugar) events.

In both, people's perceptions of diabetes can lead to experiences of guilt, shame and isolation, and these experiences can lead to adverse mental and physical health outcomes.

Social and economic factors in diabetes

Inequities in the social determinants of health, including access to education, adequate housing, employment and working conditions, and access to comprehensive healthcare and social connections, often intersect to influence the risk of developing diabetes and poor diabetes outcomes, with long-term implications for disease progression and mortality risk.

The risk for type 2 diabetes and gestational diabetes, in particular, is more prevalent in some populations, including racialized communities and communities facing marginalization, as they often are those who experience social and economic inequities the most.

These social and economic inequalities influence opportunities and access to healthy foods, adequate housing, social connectedness and access to diabetes education, prevention and support, hence an individual's ability to manage diabetes effectively.

Breaking down stigmas associated with living with diabetes and barriers to accessing relevant healthcare and social support can help reduce the risk of diabetes-related complications and improve the quality of life of people living with diabetes.





Celebrating World Diabetes Day, November 10, 2023

TACKLING THE SOCIAL DETERMINANTS IN DIABETES THROUGH EDUCATION AND PREVENTION

No matter which type, education and prevention are crucial to managing diabetes. Learning about the symptoms of diabetes and the potential complications that may develop and watching daily habits and diet can help people be proactive about their health.

Foremost, education and prevention involves addressing the social and economic factors that impact people with diabetes daily — food insecurity, housing instability, and barriers to access to services and social inclusion.

The Diabetes Education Program teams at both Parkdale and Queen West sites do just that, whether in one-on-one support or group setting. Programs are all-inclusive and intended to increase knowledge, skills and confidence in diabetes management. From learning to plan menus, grocery shopping and preparing healthy meals to coping with daily self-care practices, the goal is to empower people with diabetes, particularly type 2 diabetes, to make healthy choices based on their situations and life circumstances while addressing the social stigma and isolation that people living with diabetes often experience.

Christine Young (left) and Jane Rajah, Parkdale site



“Diabetes is not something people often want to share with others due to its associated stigma, says **Christine Young**, Diabetes Dietitian — People with diabetes sometimes feel that they are not doing all they should do to manage their diabetes. For this reason, peer support is essential. In groups, they share resources and experiences and know they are not alone; there is a sense of community belonging.”

Also essential is building relationships with the community and local organizations to connect people with diabetes with available resources and supports and reduce social isolation. “People with diabetes who are isolated are at increased risk for experiencing mental health challenges that can make managing diabetes more challenging,” says **Jane Rajah**, Diabetes Nurse.

Based at the Parkdale site, Jane and Christine work collaboratively with community service organizations that provide housing and supports to adults living with mental health challenges, such as Cota Health and Habitat Services, to bring diabetes care and education to clients where they are.

While the teams at both Parkdale and Queen West sites provide similar programming, their approaches are slightly different based on the populations they serve.

Katie Brunke, Diabetes Dietitian and **Joanna Neander**, Diabetes Nurse at the Queen West site, work for the most part with clients living in shelters who are transient or under-housed. “Our program is very therapy-focused and motivational; we tend to do more one-on-one support, says Joanna. And within our Diabetes Support Group, we regularly bring in our allied health peers, which is a great opportunity for clients to connect with other in-house services.”

Katie and Joanna often see clients concurrently in the form of joint appointments. “This works well for our program, says Katie. We each bring different elements of expertise to the appointment and can support our clients where they are”.

Additionally, Katie and Joana serve as preceptors for three Dietetic Interns annually from the Toronto Metropolitan University and the University of Toronto.

Whichever strategies the teams use, they help facilitate social inclusion and access to healthcare services, thus promoting better outcomes and improved quality of life for people with diabetes; it is what the diabetes program teams do best.

LIVING AND COPING WITH DIABETES

When **Laura** first came to Parkdale Queen West CHC some 10+ years ago to get support for her diabetes, she was socially isolated and experiencing severe depression, with which she had been clinically diagnosed a few years earlier; her primary healthcare provider at the time suggested that she see **Jane Rajah** (Diabetes Nurse at the Parkdale site), who, in addition to providing individual support, connected Laura with diabetes education programming.

Laura has type 2 diabetes. She says planning her meals takes most of her time: "I have to be aware of what I eat all the time. Some days are good, and sometimes, I eat something I shouldn't. I learned that to be successful, I must eat well at least 80% of the time."

"Sometimes I get frustrated. I want to be normal and not have to think all the time about what I should or shouldn't eat. I need to be constantly alert with the daily to-dos to keep my blood sugar balanced. There is always an immediate impact if I don't. Sometimes, someone will offer me a treat; they don't know what you need to do to manage diabetes. Now that the holidays are near, I will have to do my best to balance my meals so as not to impact my blood sugar."

Laura attends most of the diabetes education group programs at the Parkdale site.

"In groups, we learn what happens in the body and how to make healthy meals to manage our diabetes. I wouldn't be aware of the complications resulting from when my blood sugar gets high if I didn't have this education. — We also share our struggles, our personal feelings and emotions that come with the diagnosis, what it is like to live with diabetes, and how to cope; this is very helpful".

CLIENT STORY

Laura is thankful for the ongoing support she receives at Parkdale Queen West and appreciates the integrated care from primary healthcare providers **Dr. Sherry Sandhu, Jane, and Christine Young**, Diabetes Dietitian. "When I see Dr. Sandhu, she already has the notes from Jane and Christine. We are all working together to keep my blood sugar balanced. With Jane, I learned to keep myself safe during COVID. Knowing that I had the support was reassuring."

As for Laura's future goals, she wants to enroll in a swimming program, pending financial support, while she continues to walk her dog *Munya* for physical activity.

"Having someone acknowledge the challenges of my health condition and link me to diabetes education programs and supports made a huge difference. For the first time, I felt connected."

- Laura

MOBILE HEALTH CLINIC

Total # of interventions since launch in 2021: **6,079**
Without the mobile clinic:
● 37% of clients would have accessed the Emergency Department for care
● 18% would NOT have sought care

“COME SEE US RIGHT OUTSIDE ON THE BUS”

Breaking down barriers to quality and compassionate care is what Parkdale Queen West’s Mobile Health Clinic teams do every time they take the TELUS bus to the sites they visit, which they do in collaboration with community-based organizations, including shelters, supportive housing and apartment buildings across Toronto.

They are a team of nurse practitioners, registered nurses, harm reduction workers and peer support workers working together to bring essential primary healthcare and harm reduction services to marginalized populations and people who are homeless and may not access quality healthcare otherwise.

In June 2023, Nurse Practitioners Raymond Macaraeg, Maeve Freeman-McIntyre, and Gemma Georgina Bisessar of the mobile health team presented at the Alliance for



Gemma Georgina Bisessar



Raymond Macaraeg



Maeve Freeman-McIntyre

Healthier Communities’ annual primary healthcare conference, *Connected Communities: Building Equitable Integrated Healthcare*.

The Alliance is an organization that represents a network of community-governed primary healthcare organizations across Ontario, such as Parkdale Queen West CHC, working to eliminate social and economic inequities through the delivery of comprehensive primary healthcare.

With their session catchy title: **“Come see us right outside on the bus: Addressing health disparities through mobile intervention in Toronto,”** the team shared the outcomes of the mobile health clinic program evaluation and showed how this innovative model of care helps reduce inequalities across Toronto neighbourhoods.

The team even took the bus to the conference site! An added perk for session participants to see firsthand what the mobile health clinic looks like inside.

The Mobile Health Clinic is made possible through partnership with the **TELUS Health for Good** program and the **University Health Network Social Medicine Program**.



“I feel much safer and much-taken care of, so I won’t hold back on my health issues. The clinic comes to us; I don’t need to go out looking for service. It’s very close to my shelter, so it’s perfectly comfortable for me.”

- Mobile Health Clinic client

INTERNATIONAL OVERDOSE AWARENESS DAY AT PQW

International Overdose Awareness Day on August 31 is a day to honour and remember without stigma the thousands of people lost to drug overdose (often referred to as *drug poisoning*) in our communities and across the world.

It's also a day to honour the people whose lives have been altered by overdose in various ways: they are family and friends grieving the loss of a loved one; workers in healthcare and support services extending strength and compassion; and spontaneous first responders who often assume the role of lifesavers.

In observance, Parkdale Queen West teams held community events at the Parkdale and Queen West sites intended to raise awareness of the impact of overdose, promote education on overdose response, and celebrate the lives of those we have lost. Activities included a community memorial banner, HIV and HEP C testing, naloxone response training, harm reduction kits, information sharing, music and food.



Pictured above: Mia Hershkowitz, Client Support Worker, writes a message on the memorial banner



Left to right: Anthony Balkissoon, Kim Rampanen and Audrey Shulman

Overdose is everywhere.

in Canada

- The Public Health Agency of Canada reported 7,560 opioid toxicity deaths in 2021. That's about 21 deaths per day.
- There were 32,632 opioid-related deaths between January 2016 and June 2022.
- In 2021, fentanyl was responsible for 87% of opioid overdose deaths.

worldwide

- The World Drug Report 2022 states opioids account for 69% of drug overdose deaths.
- The estimated number of people using opioids globally doubled from 26-36 million in 2010 to 61.3 million in 2020.

Pictured left to right: Barakat Olasupo, Jordan Howe and Arpa Azmila





PARKDALE COMMUNITY GARDEN GETS A MAKEOVER

A Parkdale residents group who has worked together for over ten years to advocate for improvements to the **Melbourne Ave. Parkette** celebrated the relaunch and the unveiling of the parkette's new mural and revamped community garden on September 28, 2023, and Parkdale Queen West CHC was invited!

The event gathered community residents and local community service organizations, including the Office of

Councillor Gord Perks and Toronto Police Services, 14 Division.

Parkdale Queen West's staff frequently visit the parkette to help with the cleanup.

The Melbourne Ave. Parkette, located near Queen St. West and Dufferin Street, includes a children's playground and a community garden with 24 plots where residents can enjoy the benefits of growing herbs and vegetables.

The new mural—the work of Wong, the artist, illustrates colourful images of nature, creating a peaceful and welcoming space.

THE VALUE OF FOOD DONATION

Food donations are significant resources for our Parkdale Parents Primary Prevention Program (5Ps) and Harm Reduction Program.

The value of food donated this past year by

**DAILY BREAD FOOD BANK:
\$67,653**

**SECOND HARVEST:
\$74,803**

Thank you to Daily Bread Food Bank and Second Harvest for their ongoing support of our programs over the years.

www.pqwchc.org

PARKDALE SITE

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Toronto, ON M6K 1L2
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Fax: (Admin) 416.537.5133
Fax: (Clinical) 416.537.3526

QUEEN WEST SITE

168 Bathurst Street
Toronto ON M5V 2R4
Tel: 416.703.8482
Fax: (Admin) 416.703.7832
Fax: (Clinical) 416.703.8479

SATELLITE SITE

27 Roncesvalles Ave.
Suites 301 & 503
Toronto, ON M6R 3B2
Tel: 416.537.8222
Fax: 416.537.7714

WEST END ORAL HEALTH CLINIC REOPENED!



The West End Oral Health Clinic (WEOHC) is now open at our Parkdale and Queen West sites.

WEOHC is run by a volunteer dentist and supervised dental hygienists and dental assistant students from the George Brown College School of Dental Health.

Dental services offered:

- General checkups
- Cleaning (hygiene, scaling and polishing)
- Fillings
- Extractions
- X-rays
- Oral self-care instruction
- Referrals to dental specialists

Services are free of charge for individuals who:

- Are between 18 and 64 years
- Have no other extended health/dental insurance
- Live within the City of Toronto
- Ontario Disability Support Program (ODSP) recipients are eligible for cleanings only if required above allowable coverage.
- Ontario Works (OW) recipients are eligible only for cleaning with a dental hygienist.

For more information or to make an appointment, please call or email:

416.537.2455 ext. 1415
weohc@pqwchc.ca



**PARKDALE
QUEEN WEST
Community
Health Centre**

