

STRATEGIC PLAN 2009-2012

STRENGTH IN COMMUNITY



AIDS Vancouver Island

This plan has been developed with funding from the the Centre for Sustainability through their Social Services Partners in Organizational Development grant. We gratefully acknowledge the work of James Pratt and Judy Frabotta of James Pratt Consulting. Special thanks to all the volunteers, clients, staff and partners for their input into this document.

STRATEGIC PLAN 2009-2012

Introduction

IDS Vancouver Island works to prevent HIV and hepatitis C and to support those living with these diseases. Like many AIDS Service Organizations (ASOs) across the country and around the world, we have worked to keep up with the many challenges inherent in the fight against such diseases. These include diverse populations and communities, expanding demands and shrinking resources and the ever present need to combat the stigma and vulnerability experienced by many of those we work with. The following strategic plan will help guide us to respond to new and old challenges. It outlines the strategic directions our organization will take in the next three years in order to ensure that we work effectively with those affected and infected with HIV and hepatitis C.

How we developed the strategic plan

The goals of the strategic planning process were to clarify our vision, mandate and service principles, to develop consensus around organizational identity and rebranding, and to identify priorities for organizational development.

The Board of Directors engaged an external consultant to undertake the following activities.

- » Focus groups with clients
- » An on-line survey
- » Key informant interviews
- » Staff/Board retreat

A key part of the process for developing the plan was an environmental scan conducted by the external consultant. This was informed by the results of the surveys, focus groups and key informant interviews. A copy of this report is available upon request.

Accountability

Accountability is an integral part of ensuring the strategic plan is a workable and effective document. The Board of Directors is responsible for the oversight of the plan and will review it on an annual basis to ensure its implementation. An operational plan will be developed with measureable indicators for success ensuring programs remain aligned to our strategic goals and that program activities continue to be effective.

Mission:

AIDS Vancouver Island serves the needs of people infected and affected by HIV and hepatitis C. We take evidence-based action to prevent infection, provide support, and reduce stigma.

Vision:

Our vision is of a world free of HIV and hepatitis C. Until that time, those most at risk in our community continue to be marginalized - not only by their disease, but also by stigma and discrimination, poverty, and despair. As we fight these diseases, we join with those we serve to provide services based on consideration and respect and to provide visibility and a voice in the community.

"Strengthening community, preventing infection, providing support, and combating stigma."

Value Statements

- » We are a community of people committed to the mission and vision of AVI. While our roles may differ, we work together to achieve our aims and value the contributions of each person in that endeavor.
- » Every human being is equally valuable and deserving of care, respect, and access to health services.
- » Our work takes us to where the disease is most prevalent and the risk of spread is highest in our community; our priorities are determined by research and evidence.
- » We engage diverse, visible, and invisible populations, making every effort to understand and meet their different needs.
- » We stand for justice. We are advocates and offer visibility and a voice for people infected with HIV and/or HCV.
- » We protect and nurture ourselves and each other.

- » We build connections and community within the populations we serve and bridges to the larger communities in which we operate.
- » We collaborate to the fullest extent possible with other organizations doing similar or complementary work.
- Our services are guided by a sex positive approach which is reflected in a positive and respectful recognition of a continuum of sexuality and the affirmation of the right of people living with HIV to continue healthy sexual lives.
- » We recognize that addiction and mental illness are significant health issues that require a range of accessible treatment options.

Through the strategic planning process, AVI identified the following strategic issues that we will concentrate on over the next three years.

ISSUE 1

Meeting the diverse needs of those affected and infected

AVI serves diverse people and communities who are living with, affected by or at risk of acquiring HIV and hepatitis C. Resources are limited and the challenge is to target them strategically while ensuring that those communities most at risk have access to education and support.

GOAL: TARGET INVESTMENT OF RESOURCES TO BETTER MEET THE NEEDS OF AVI'S DIVERSE COMMUNITIES

- Review research and create an assessment summary of the needs of the different populations at risk of and living with HIV and HCV on Vancouver Island.
- ii. Assess the accessibility of all current AVI programs for different population groups and make recommendations for changes where needed.
- iii. Review internal statistics methodology and ensure that agency statistics are useful in determining populations served.
- iv. Improve engagement with affected and infected communities.

ISSUE 2

Prevention and support for men who have sex with men (MSM)

High HIV infection rates continue to be found amongst MSM. Historically close ties with this community have weakened in recent years, and programming targeted specifically at MSM has been in decline. It is necessary to reevaluate and reinvigorate the services that AVI provides to MSM, including gay, bisexual and transgendered men and youth.

GOAL: ENSURE THAT MSM HAVE ACCESS TO APPROPRIATE HEALTH PROMOTION, DISEASE PREVENTION AND SUPPORT THROUGH AVI

- i. Review present efforts to address MSM sexual health and wellness.
- ii. Further develop and implement mechanisms to involve MSM in the direct design and delivery of prevention and support services.
- iii. Develop targeted strategies to improve relations with members of gay communities.
- iv. Provide necessary training and support to staff to improve skills in working with MSM.

ISSUE 3

Prevention and support for Aboriginal people

It is well documented that Aboriginal people are at disproportionate risk for HIV and HCV. Survey and interview results suggest the receptivity of Aboriginal people to services appears to depend a great deal on cultural context.

GOAL: SUPPORT ABORIGINAL PEOPLE AND COMMUNITIES IN ACCESSING CULTURALLY APPROPRIATE HIV AND HCV PREVENTION AND SUPPORT

- i. Review present efforts to address HIV and HCV prevention and support both on and off reserve.
- ii. Develop policy to guide collaboration with Aboriginal organizations.
- iii. Develop and enhance partnerships with Aboriginal organizations.
- iv. Support efforts within Aboriginal organizations to build capacity for disease prevention, health promotion, and harm reduction, including providing training to health workers and accessing funding.
- v. Review accessibility of AVI programs for Aboriginal people and implement any necessary changes.
- vi. Provide necessary training and support to staff to improve skills in working with Aboriginal people.

ISSUE 4

Access to treatment for people living with HIV

Despite the availability of effective treatments, a high proportion of HIV positive people are not receiving treatment. New research reveals that treatment not only extends the life of the individual, but also lowers the likelihood of transmission.

GOAL: PROVIDE INCREASED SUPPORT TO HIV POSITIVE PEOPLE IN ACCESSING AND MAINTAINING TREATMENT

- i. Review service models and evidence-based research for the provision of treatment as prevention of transmission and disease progression.
- ii. Promulgate findings on the relationship between treatment and prevention.
- iii. Develop programs to increase the uptake of treatment and to further support those on treatment.
- iv. Identify new funding that may be available for this purpose.

ISSUE 5

Sustainable and appropriate infrastructure

The 2008 loss of the fixed site for the Victoria needle exchange has caused hardship to the people we serve. It has also enabled us to create a new model for distributed needle exchange that allows this critical service to take place at an increased number of access points. A fixed site in Victoria remains a critical need. AVI has also recognized the need for a relocation of its Victoria prevention and support services. We purchased a building in partnership with the Cool Aid Society, the ACCESS Health Centre. In 2009 we will be fundraising with the goal of opening the ACCESS Health Centre mortgage free. In addition, as offices up island experience pressure, it is important to ensure their infrastructure also remains viable and effective.

GOAL: PROMOTE AN EXPANDED DISTRIBUTED MODEL OF NEEDLE EXCHANGE, INCLUDING AT LEAST ONE FIXED SITE IN VICTORIA

- i. Provide leadership and advocacy in the development of a distributed model of needle exchange in Victoria.
- ii. Work with VIHA to secure a fixed site location for the needle exchange in the downtown area.
- iii. Continue the provision of harm reduction services that includes the best mix of service to meet the needs of clients.
- iv. Continue the development and maintenance of partnerships to improve the provision and expansion of harm reduction services.
- v. Ensure ongoing research to track outcomes of delivery model.

ISSUE 5 CONT'D.

Sustainable and appropriate infrastructure

GOAL: COORDINATE MOVE OF NON-EXCHANGE SERVICES TO THE ACCESS HEALTH CENTRE

- Work with Cool Aid Society to raise additional funds for ACCESS Health Centre.
- ii. Move Victoria operations to ACCESS Health Centre when construction is completed.

GOAL: ENSURE ALL AVI OFFICE SPACES ARE SUFFICIENT TO MEET THE NEEDS OF THE STAFF, VOLUNTEERS AND CLIENTS

- i. Conduct a review of all AVI offices to determine suitability.
- ii. Make recommendations regarding improvements.
- iii. Implement recommendations.

ISSUE 6

Organizational Capacity

AVI works in a complex and challenging environment. The context of our work means that communications, funding issues, and partnerships are essential to ongoing effective programming. These and other particular challenges of working at an AIDS Service Organization can place great stress on all staff at different times. AVI is committed to creating a supportive and learning environment for all staff.

GOAL: STRENGTHEN ORGANIZATIONAL CAPACITY

- Review internal and external communications and develop mechanisms to improve where necessary.
- ii. Develop and strengthen external organizational partnerships to improve collaboration.
- iii. Continue efforts to sustain funding and diversify funding sources.
- iv. Develop and implement strategies to value and support front-line staff.
- v. Strengthen leadership capacity.





AIDS Vancouver Island

Victoria 1601 Blanshard Street Victoria BC V8W 2J5

Phone: (250) 384-2366 Fax: (250) 380-9411

Toll free Infoline: 1-800-665-2437

Email: info@avi.org

Nanaimo 201-55 Victoria Road Nanaimo BC V9R 5N9

Phone: 250-753-2437 Fax: 250-753-4595

Courtenay/Comox 355 6th Street Courtenay BC V9N 1M2

Phone: 250-338-7400 Fax: 250-334-8224

Toll free Infoline: 1-877-311-7400

Campbell River 1249 Ironwood Road Campbell River BC V9W 5T4

Phone: 250-830-0787 Fax: 250-830-0784

Toll free Infoline: 1-877-650-8787

Port Hardy PO Box 52 Port Hardy BC VON 2Po

Phone: 250-949-0432 Fax: 250-949-9953