

DEDICATION

To CAAN's community of activists, advisors, artists, helpers, allies and sponsors past and present who have devoted time and lives to growing and nurturing our organization. We are especially grateful to the founding Indigenous people living with or challenged by HIV/AIDS whose legacy expands decades of groundbreaking work. Our transition to address broader but critical Indigenous health issues is possible due to their vision and commitment.

MISSION STATEMENT

"CAAN provides a national forum for Indigenous peoples to wholistically address HIV/AIDS, HCV, STBBI, TB, Mental Health, aging and related comorbidity issues; promotes a social determinants of health framework through advocacy; and provides accurate and up to date resources on these issues in a culturally relevant manner for Indigenous peoples wherever they reside."

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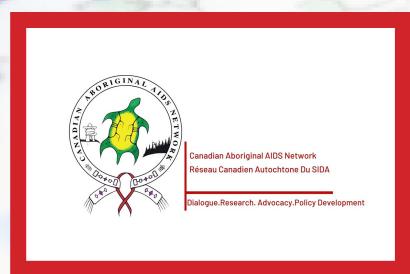
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Denise Lambert Chairperson

Denise resides in Treaty 6 territory and maintains a distinctive relational network. She is a mother to five children. grandmother to three+ grandchildren, with a large extended family in Treaty 4, Treaty 8, and multiple Métis locales. As a woman of fluid identities, Denise is currently engaged in the Indigenous Studies PhD program at the University of Alberta focused on the brilliance and resurgence of Indigenous knowledge. She is an Indigenous land-based practitioner and designs program, policy, and evaluation frameworks from this standpoint.

Denise brings over 35 years experience to improving Indigenous Health in Canada. Current projects include the Northern Indigenous Health Alliance (Alberta) promoting "Know Your Status" and appropriate linkages to care and support; the Helping Relations Project – a mobile COVID-19 emergency support program; and In Good Health – virtual addictions, mental, and sexual health project.

LETTER FROM THE CHAIR



Tansi!

I send greetings from Treaty 6 territory to all relations and friends of CAAN. My message for the 2021 Annual General Meeting is "We are forever together". These four words braid our past, present, and future as People of the Land.

As we celebrate the life path we share as Communities, Alliances, and Networks, the rebranding of CAAN ensures that those who have contributed to our development are acknowledged. Through the ceremonies, stories, and songs we share, our vitality as Indigenous people is renewed.

Many thanks to our past and present volunteers, board members, staff, consultants, funders, partners, and members. It is through our shared efforts that we celebrate the achievements of CAAN from our home fires to the international stage. May we continue to grow, thrive, and be of service for many generations to come.

Denise Lambert



LETTER FROM THE CEO



Tansi (Cree), Taanishi (Michif), Aniin (Saulteaux), Boozhoo (Ojibway), Hello (English), Bonjour (French)

It has been 40 years since the first case of HIV on this land called Canada. It is time to reflect on where we came from, where we are now and where we are going. As Indigenous people, visioning is very important to the health and wellbeing of the many diverse nations of Turtle Island. Our wise old ones have taught us that we vision for the next 7 generations.

It has been a year of change for the Network, as we move forward in strengthening the foundation of CAAN. There have been new programs and new research funded through the year to included new staff and new partners assisting in the work. The governance of CAAN has welcomed new Board members and new membership to lead the work.

As CAAN continues to be the voice for the Indigenous people throughout the land, we welcome the many nations to join us as we continue to bring life to the land, to the people and to the work we put our heart and soul into daily.

Hiy Hiy Margaret Kisikaw Piyesis, CEO CAAN Kind Hearted Warrior Woman -Kisewatisowin Okihcitaskwew Margaret Kisikaw Piyesis Kind Hearted Warrior Woman – Kisewatisowin Okihcitaskwew Chief Executive Officer

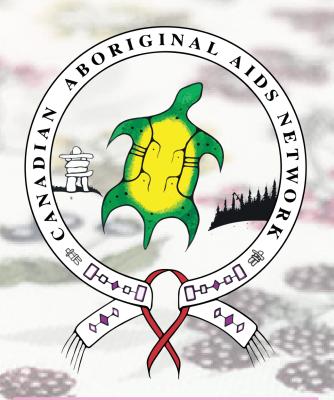
Cree Iskwew (woman) with the following roles and responsibilities: as a daughter to Nimama (My Mother), as a mother of two Children and a Kokum (Grandmother) to three, with direct ties to the Kisikaw Piyesis Family from George Gordon First Nation, in Saskatchewan on the land now called Canada. Descendant of both the Moose clan and the Bear Clan, living as a traditional medicine practitioner, a knowledge keeper and baby catching bundle carrier.

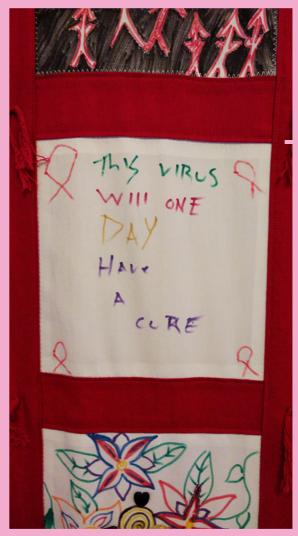
Waniska (Awakened) to the ways of the ancestors, practising traditional ways of knowing, healing along the way, seeking pimâtisiwin (life) for all nations through Indigenous practices, language, ceremonies, culture and traditions. Can celebrate 30 plus years working as a Co-Creator for Kisi Manito (Great Mystery) honoring the ancestors along the way.

QUILT - Of the many symbols and rituals adapted by the global AIDS movement throughout the decades, the most iconic would be the Red Ribbon and the Memorial Quilt. In this Annual Report, a more traditional quilt analogy will be used to describe CAAN, its peoples and its stories. For a simple quilt, a maker only needs a foundational base (backing), suitable batting for form, warmth and stability (middle), an interesting array of material and pieces that each tell a story or lay together to tell a bigger story (top), binding and thread to hold it all together.

The BACKING - The bottom of a quilt is one of three basic layers required to build a quilt. The backing, as it is called, must be durable but accommodating, sturdy enough to endure wear and tear but able to be pierced by the tiniest needle, and although backing is utilitarian and necessary, it must also be comfortable and consistent. The whole quilt keeps us warm but it is the bottom layer that embraces us and makes us feel safe. If we lay our quilt on the ground, a solid backing will protect us from the elements and rough spots. A wisely selected base is indeed the foundation of a good quilt.

Introduction





In 2022, the Canadian Aboriginal AIDS Network (now Communities, Alliances & Networks) will celebrate 25 years since its incorporation as a non-profit organization addressing HIV/AIDS. Activism and experience with this virus began many years before 1997 however, the disease had caused the death and impairment of many 2-Spirit and Gay men throughout the world and by the mid-80s, AIDS was a fatal mystery without a cure.

History has not been kind to our 2-Spirit brothers and sisters. Many fled their traditional communities due to fear of homophobic attitudes and actions from their colonized and Christianized families and neighbours. In Canada, safe havens were found in large urban centres, primarily in Montreal, Toronto and Vancouver. Being close to other gay organizations in these centres did not necessarily address the unique situations of our Indigenous LGBT relations and while they were allies with groups such as Canadian AIDS Society and Act-Up, our founders of CAAN yearned for their own safe and culturally relevant AIDS services.

Despite scientific proof that HIV could be transmitted to any human, AIDS was still viewed as a gay man's disease. The homophobia and stigma of AIDS caused thousands of Indigenous people to decline testing, regardless of contracting the virus from unprotected sex with a man or woman, blood transfusion, sharing needles, tattooing or in-utero. It is undetermined how many Indigenous people died from late diagnoses (if any) or from fear-induced risky behaviors. Misinformation led to many Indigenous women believing they were immune and hence became infected. People who also injected drugs or shared tattoo needles were also at risk.

In 1991, Health Canada hosted a conference where Indigenous people with HIV/AIDS spoke to the nations and shared the harsh reality of their lives. The issues of HIV amongst our peoples was not going to go away. The numbers of cases would grow and people would die. What grew from this conference were federal commitments to support and fund efforts to addressing the potential harm and fatal outcomes of the disease. Various 2-Spirit support agencies, AIDS service groups, friendship centres and community health projects became the founding members of CAAN.

These groups included:

2-Spirited People of the 1st Nations - Ontario
Ontario Aboriginal HIV/AIDS Strategy - Ontario
Healing Our Spirit Society - British Columbia
Manitoba Aboriginal AIDS Task Force - Manitoba
Healing our Nations - Nova Scotia
All Nations Hope AIDS Network - Saskatchewan
Feather of Hope — Alberta
Happy Valley-Goose Bay Friendship Centre — Newfoundland & Labrador

The years between 1991 and 2021 portray an organization that has and will continue to weather storms and still persevere with courage and dignity. The newly launched and stunning website caan.ca outlines a brief review of CAAN's growth and resiliency and it is expected archived documents will be catalogued for members to review. Incorporated in 1997, CAAN will be celebrating its 25th anniversary in 2022 and we anticipate much of our history, trials and tribulations will be showcased.

The Foundation of CAAN -what our organization is built upon

CAAN's Mission

CAAN leads a collective response to promote the sexual health of First Nation, Inuit and Métis People at risk of or living with HIV, hepatitis C and other related health issues such as mental health, addictions and aging, in a culturally relevant manner where Indigenous traditions, values and knowledges are vibrant, valued and integrated into the daily lives of our diverse communities.

CAAN's Vision

On these ancestral lands, First Nations, Inuit and Métis Peoples, their families and communities achieve and maintain strong, healthy and fulfilling lives, and significantly reduce the impact of HIV and AIDS, HCV, STBBI, TB, Aging, mental health and related co-morbidity issues, and Indigenous cultures, traditions, values and knowledge are vibrant, alive, respected, valued and integrated into day-to-day life.

THE BATTING OF THE QUILT — Although not visible on the outside, the batting is what gives the quilt its structure, shape and qualities. Will it be thin and lumpy, bulky and awkward, heavy and cumbersome? Or will it be even, consistent and easy to maintain? It depends on what you choose as the middle layer for it is an essential part of the quilt's function, performance and evaluation. The batting is like heart and soul of the quilt.



The Heart and Soul of CAAN -

Since its beginning CAAN has been driven by its members. From its original purpose of advocacy for IPHAs and member groups by a Board of Directors, PHA advisors/speakers and devoted staff, CAAN has over 2 decades of innovative projects and cutting-edge research which has been shared throughout the world.



MEMBERSHIP

There are two kinds of membership at CAAN:

- 1. Full Voting Membership is open to all Indigenous Persons living with HIV/AIDS or Hepatitis C and all Indigenous-led organizations and communities with a significant focus on HIV and AIDS, HCV, STBBIs, TB, Mental Health, Aging and related co-morbidity issues.
- 2. Associate Non-Voting Membership is open to any organization or individual with an interest in supporting the mandate of CAAN to address Indigenous HIV and AIDS, HCV, STBBIs, TB, Mental Health, Ageing and related co-morbidity issues.

For additional membership information, please visit https://caan.ca/membership

GOVERNANCE

In the 2020/21 reporting year, CAAN was governed by a 13-member Board of Directors, of which Indigenous People Living with HIV and AIDS and Hepatitis C held members-at-large positions. The Board members develop, implement and monitor policies which will allow CAAN to do its work. Board directors are legally responsible for the governance of the organization and are elected by and accountable to the CAAN membership. A list of current Board members may be found on the CAAN website.

CAAN's Staff

The management team consists of Margaret Kisikaw Piyesis, Chief Executive Officer, Tamara O'Donnell, Director of National Programs and Renée Masching Director of Research.

List of Staff 2020-21 is available for viewing on the CAAN website.

THE TOP OF THE QUILT - This is where a quiltmaker can truly shine. Depending on the patches selected, the patterns envisioned, and the history of the pieces, a unique and mesmerizing tale can be told. Indigenous peoples have always been industrious with their fabrics and embellishments and traditional communities throughout the world have always had a form of quiltmaking and patchwork in their skills-set. The original Memorial AIDS Quilt is a wonder to behold and still inspires many people today to memorialize their loved ones who passed from AIDS. What we place on Top of a quilt tells our stories, shares our happiness and tears, honours our accomplishments and celebrates our milestones. Over time, some parts get worn out and are replaced with something new or different. The Top of the Quilt is a kaleidoscope of lives well lived and important times together.

CAAN's National Programs Unit consists of the following projects:

- Promising Practices
- Assessing Community Readiness
- Women and Youth Leadership
- International Indigenous Working Group on HIV/AIDS (IIWGHA)
- Indigenous AIDS Awareness Week (formerly AAAW)
- Four Directions Hub Coordination
- Indigenous Leadership Coordination
- Wellness Coordination (formerly IPHA Liaison)
- National Programs Coordination

CAAN's Research Unit manages the following projects:

- AHA Centre 2.0 co-led with Dr. Charlotte Loppie
- Transformation (formerly Women's Health Research Program – WHRP) – co-led with Dr. Mona Loutfy
- Weaving Our Wisdoms (WoW) co-led with Dr. Stephanie
 Nixon
- DRUM & Sash co-led with Dr. Catherine Worthington
- GIPA Homefire co-led with Dr. Charlotte Loppie
- Indigenous Harm Reduction practices dissemination
- Mobilizing CAAN's research co-led with Dr. Charlotte Loppie
- Visioning Health 2 co-led with Dr. Charlotte Loppie

Independent Researchers supported by CAAN Research Unit:

- 9Genders led by Michael Parsons
- Peers for Wellness with Dr. Alexandra King
- Iskwew Iskotew (Woman Fire) led by Doris Peltier

The CAAN Research Unit is pleased to announce the establishment of the Feast Centre for Indigenous STBBI Research co-led by Dr. Randy Jackson and McMaster University.



CAAN's SPOTL9GHTS in 2020/2021



Feast Centre for Indigenous STBBI

"The Feast Centre for Indigenous STBBI Research is a vibrant, well-connected network of Indigenous and allied STBBI community and academic scholars. The mission of the Feast Centre is to establish, implement and sustain Indigenous STBBI research programs and initiatives through a national network of community and academic partnerships." (October 14 2020 Launch) Official website <feastcentre.mcmaster.ca>

The Feast Centre for Indigenous STBBI Research is the culmination of over twenty years of community-based Indigenous HIV/AIDS and STBBI research, co-directed by Dr. Randy Jackson, McMaster University, and Ms. Renée Masching, CAAN. The McMaster Indigenous Research Institute (MIRI) and the Aboriginal HIV/AIDS Community-Based Research Centre (the AHA Centre) are key partners whose collective work demonstrates a deep commitment to the scientific and community-based rigour that lies at the heart of the Feast Centre. The Centre is national in scope and includes representation from Indigenous and allied scholars, community organizations, diverse community members, and traditional knowledge holders from across Canada. Grounding our work in Indigenous knowledges and methods, the Feast Centre is guided by a Council of Elders that includes Inuit, Métis and First Nations representation and by a Governing Council that represents the four pillars of health research: epidemiology, clinical science, basic science and social science.

Our vision is for the Feast Centre to be a vibrant, well-connected network of Indigenous and allied STBBI researchers and community who privilege Indigenous ways of being and knowing and are committed to work that demonstrates considerable community impact.

The Feast Centre privileges Indigenous knowledges and meaningful community participation in order to shape our research approaches to fit Indigenous realities. We are particularly focusing on further developing and using culturally relevant data collection approaches (e.g., storytelling, etc.) and analytic procedures that create relationships, and support Indigenous autonomy to respond to STBBI in ways consistent with diverse Indigenous cultures. This includes supporting research that is strengths- and assets-based to contribute to what makes Indigenous communities healthy through positive action; understanding cultural sources of resilience; a focus on social determinants of health; and exploring other facets of experiential knowing (e.g., multigenerational Indigenous knowledges, cultural protocols, etc.).

In concrete terms, the Feast Centre is offering training opportunities for Indigenous and allied scholars engaged in Indigenous STBBI research across a range of disciplines and levels of expertise. We have created scholarships and grants to support community scholars, students and mid- to late- career scholars who are committed to the work of centring Indigenous knowledge and methods to create Indigenous solutions to Indigenous community needs. In addition to grants and scholarships, we offer research training opportunities, guidance in knowledge translation and exchange, and opportunities to attend Feast-led writing retreats and academic/community conferences.

For more information see <feastcentre.moonfruit.com>

Partners:

McMaster University
Affiliated Research Centres:
McMaster Indigenous Research Institute
CAAN Communities, Alliances & Networks
Aboriginal HIV &AIDS CommunityBased Research Collaborative Centre- AHA Centre



CAAN's SPOTL9GHTS in 2020/2021

Rebranding CAAN

In October 2020, CEO Margaret Kisikaw Piyesis submitted the following report discussing the Rebranding of CAAN:

The organization has been listening and talking to members regarding the re-branding of the Network. There have been several suggestions. One that came to light was Communities, Alliances & Networks (CAAN)

We would keep CAAN.ca as this has much history of the organization. The acronym would change meaning along with the vision.

Here are the words of the ancestors:

The people were sent from the stars, seeded in Mother Earth grown from the land taught by nature of Mother Earth under Father Sky following the laws of Grandmother Moon and Grandfather Sun held in the center of four directions when this is understood a rebirth of living, learning, sharing, healthy communities will emerge on turtles back.

Given to Betty McKenna on October 16, 2020 in pipe ceremony with the Man in the Stone Canoe Check with the new CAAN.ca website and our Facebook page CAAN – Communities, Alliances & Networks for more information on these creative and affirming transitions.



CAAN was there! Examples of where CAAN shows up -

- CanCURE, Renée Masching is on the Community Advisory Board
- CanHepC Network, Carrielynn Lund and Renée Masching are contributors
- CIHR Clinical Trials Network,
 Carrie Martin represents CAAN on the Community Advisory Board
- CBRCanada presentation with Carrie Martin, Elder Mike Standup and Renée Masching
- AHA Centre Communities of Practice



Pleased to Announce:

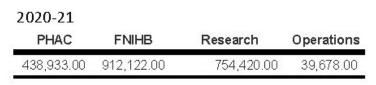
Received news in March 2021 that we were successful in our CIHR Project Grant application—scoring first in the competition—for a sexual and reproductive health research (SRHR) project with partners from the International Indigenous Working Group on HIV/AIDS (IIWGHA)

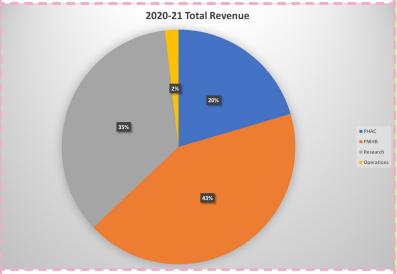
We were also successful in our CIHR submission to the Indigenous Peoples and COVID-19 Knowledge Synthesis, Evaluation and Assessment Grants Rapid Research funding call. Our project on COVID-19 and Harm Reduction knowledge synthesis and mobilization, in partnership with the Dr. Peter AIDS Foundation

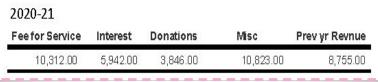
Submitted Letters of Intent (LOIs) for the Public Health Agency of Canada's (PHAC) Community Action Fund and Harm Reduction Fund (the latter in partnership with the Dr. Peter AIDS Foundation

Looking Forward - Events 2021 and Beyond (save the date!) Indigenous AIDS Awareness Week/Day Dec 1-7 2021 Wise Practices May 2022 Winnipeg MB International AIDS

Keeping the Lights On - Overview of CAANs Finances Where is the pie?









QUILT: The final and most challenging part of making a quilt is the binding and stitching together. It is tedious and your back will ache. You might prick your finger with needles and pins and some blood may flow, adding bits and pieces of your DNA to the stories of your ancestors. This is your last chance to ensure the finished quilt will last until you are an ancestor also. One loose and neglected knot will eventually reveal itself and then see what happens...



"Family Matters" quilt. This quilt is part of our Family Matters research project. Each square was made by IPHAs or their family members as part of our sharing circles discussing the impacts and realities of living with HIV as a family. The squares were sewn together by Dodie Longpre, Aunt of Research Coordinator Carrielynn Lund.

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Quilting is a mindful activity, you have to be present. There are no short-cuts. When you are quilting, you have to pay attention so your stitches are neat and untangled. Thread is important — don't use dollar-store spools. I dedicate my stitching thread to those I am making the quilt for - be they here with us still or have walked on. I ask for help from my creator, my angels and my helpers and I swear they infuse my thread with good energy. I call it my spirit thread and feel I am not alone when using it. I sew things together.

With CAAN, our quilt-making has spanned decades and each new patch or project adds to our story. Sometimes we have to look back to our original pattern so we stay on track, other times we need to re-design parts entirely. The making of a good quilt or organization requires creativity, vision, patience, wisdom, memory, passion and, most vital - hard work.

A real Quilt is never finished ...

