



Planned Parenthood Toronto

# 2022 ANNUAL REPORT



**PLANNED  
PARENTHOOD  
TORONTO**

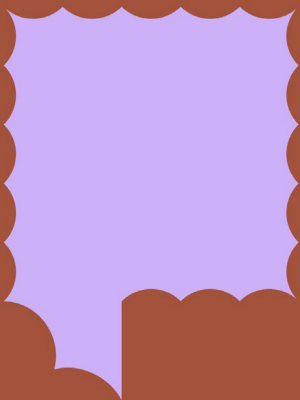
## LAND ACKNOWLEDGEMENT

Planned Parenthood Toronto is located on the traditional territory of the Anishnaabe, Mississaugas of the Credit First Nation, the Haudenosaunee, and the Huron-Wendat. Indigenous peoples have lived on and cared for this land for time immemorial. This territory is covered by the Dish With One Spoon Wampum Belt Treaty. Today, Toronto is still home to many Indigenous people from across Turtle Island. We acknowledge that settlers on the land directly benefit from the process of colonization.

As an agency, we are committed to an ongoing process of increasing our capacity to provide culturally safe health care that meets the diverse needs of Indigenous peoples.

# WELCOME TO **OUR 2021-2022** ANNUAL REPORT

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# LETTER FROM THE BOARD CHAIR & EXECUTIVE DIRECTOR



As we sit down to reflect on the 2021/2022 year at Planned Parenthood Toronto, we are amazed at the enormity of what the organization has experienced at this time of profound global shifts. Through institutional and systems challenges, growing climate disaster and an emboldened right wing, PPT's determination and resilience has been remarkable. We remain particularly grateful and in awe of the clarity of vision and values at PPT, the staff, volunteers and youth who make up the community of this beloved organization, and the many supporters, funders and donors who are in solidarity with us.

The 2021/2022 year saw some particularly significant shifts at PPT. Mohini started her tenure as Executive Director in July 2021.

**“Having previously worked in the HIV sectors both in Toronto and provincially and in the anti-violence shelter sector, I have been a long-time admirer and fan of the work, politics and culture of PPT. It has been a huge honour and pleasure to be at PPT over the past year. The kindness, skills,**

**values and resourcefulness of PPT staff are no secret, and it's been a joy to be here working with and learning from this resilient and determined community.”**

– Mohini Datta-Ray

This is a challenging time for non-profits across the world, particularly organizations such as PPT who deliver health services to trans, queer, racialized youth communities who are disproportionately adversely impacted by the social determinants of health and structural oppression. No non-profit organization has gone untouched by the brutal financial, emotional, psychological and health impacts of the ongoing COVID pandemic. Whether it be staff burnout and the impacts of “the great resignation”, an overwhelming demand for our unique services (among flatlined funding levels), a Provincial health system transformation with far-reaching consequences, an unprecedented mental health crisis among youth, or a large spike in demand for our excellent gender-affirming health care and services, our organization has been stretched unimaginably thin in our efforts to respond.

Despite all of this, PPT has come together with characteristic creativity and resourcefulness to meet this moment. The unwavering commitment of the staff team at PPT to ensure that, despite all of the instability around us, we remain accessible and available for youth and kind and generous to each other has been profound and crucial. As an organization, we have pivoted and pirouetted, responding to both long-standing and pandemic-era needs of our staff, clients, participants and supporters. While rising to these challenges, we've also intentionally increased our complement of racialized staff, committed resources to PPT's fight for sex-positive, youth-centred, reproductive justice, and reallocated staffing to where youth need us most. When the first and terrifying wave of Omicron hit in January 2022, PPT staff across the organization were already trained and prepared to run on-site vaccine clinics to survivors of violence and their children at 10 anti-violence shelters and residential facilities, contributing to high vaccine uptakes in these spaces. And this year, for the first time in PPT's history, we intentionally invested in formal and values-aligned fundraising that holds community engagement and youth leadership at its core.

As we continue to nurture, grow and shift, we commit to doing so responsively and carefully, with youth who need us most at the centre of our work. Over the next months we will continue to reach out to you, whether you are a longstanding member of our community of support, or more recently getting involved, to come together in solidarity with our push for reproductive justice and health equity. This year, you have responded to our calls for action generously, because you, like us, feel the urgency of the moment. You, like us, know that we cannot wait any longer. There is no more time to waste. The time for youth futures is now.

In solidarity,



Tom Gleason,  
Board Chair



Mohini Datta-Ray,  
Executive Director



# HEALTH SERVICES

- **WHO DID WE SERVE?** 
- **TOP ISSUES ADDRESSED BY PROVIDERS** 
- **VACCINES**
- **VIRTUAL MENTAL HEALTH SERVICES FOR YOUTH** 
- **LOW AND NO-TOUCH MEDICAL ABORTIONS** 

# WHO DID WE SERVE?



# 3656

Clients Served

# 27,815

Services Provided

## WE SERVED 3656 UNIQUE CLIENTS AND PROVIDED SERVICES TO THEM A TOTAL OF 27,815 TIMES.

# 185

We supported over **185 trans identified clients** in 2021-2022.

We have continued to ensure that all youth have access to reproductive health, **no matter the situation with their insurance.**

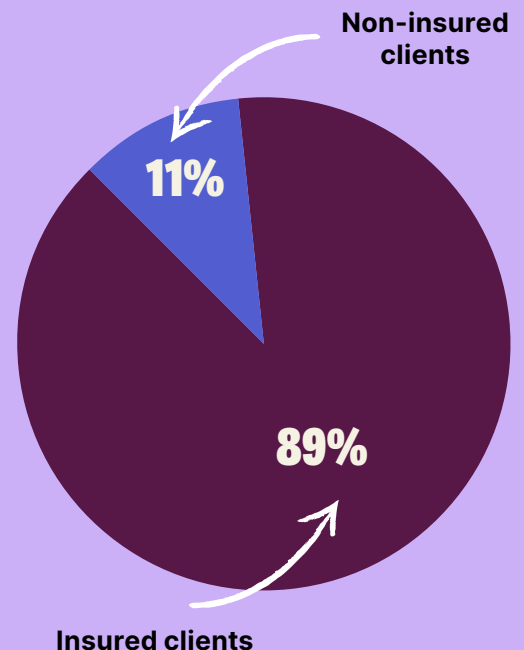
# 64%

This year, we **increased our spending on non-insured clients by 64%**. Non-insured individuals make up about 11% of our clients.


# 30


















We continued to provide **access to mifegymiso\* services to 30 unique clients** this year.

*\*Mifegymiso is a medical abortion using two specific pills mifepristone and misoprostol.*



# TOP ISSUES ADDRESSED BY PROVIDERS



-  **Birth Control**
-  **Counseling / Advice on Contraception**
-  **Request for Referral(s)**
-  **Anxiety**
-  **IUD Advice / Insertions**
-  **Advice on Community Resources**
-  **Depression**
-  **Fear / Concern about Sexually Transmitted Infection**
-  **Prescription Renewal**
-  **Effects of Past Trauma (Psychological)**
-  **Trauma**
-  **Gender Dysphoria**
-  **Fear / Concern about Pregnancy**
-  **Problem with Lack of Health Card**
-  **Medical Abortion**
-  **Low Self Esteem**
-  **Referrals to Social Worker**



# VACCINES

Starting in December 2021, in response to the Omicron variant, PPT quickly mobilized to support Toronto gender-based violence shelters to increase the vaccination rates within these congregate living settings. To do this, PPT got trained by Inner City Health Alliance and other Community Health Centres to host 8 vaccination clinics. PPT also held an onsite vaccination clinic at the Canadian Helen Keller Centre for individuals who are Deaf/Blind. Through this mobilization, PPT vaccinated 89 individuals, the majority of whom were between 18 and 29, and their children.

PPT supported non-insured youth to access COVID vaccinations by providing support around vaccine questions.

PPT staff also worked to decrease vaccination hesitancy by answering questions and engaging children and youth at the shelters.



## VIRTUAL MENTAL HEALTH SERVICES FOR YOUTH\*



This year we were able to provide a group mental health program for racialized and 2SLGBTQ participants. Workshops included 'From Roots to Forest: a virtual hope building and storytelling workshop', and 'Express: a virtual 8 week expressive arts and peer support group'.

*\*In addition to all our regular virtual mental health services for youth*



# LOW AND NO-TOUCH MEDICAL ABORTIONS



PPT submitted a resolution to our provincial association, *The Alliance for Healthier Communities* on “no and low-touch” medical abortions\* in order to support increased access to medical abortion in Ontario. Abortion care access can be very unequal across Ontario depending on where folks live. This is a way to make sure more people can get abortions quickly and in their communities so they don’t have to travel long distances for in-person appointments.

The resolution was passed! The resolution stated that health centres who are members of the *Alliance* will ensure the availability of no and low touch medical abortions. This will be a part of their regular comprehensive sexual health services. *The Alliance* committed to work with these centres as well as experts such as PPT, to share training tools, resources, and guidelines to do this successfully.



## \* What are low and no-touch medical abortions?

Low and no touch abortions are a way of making medical abortions (using pills) more low-barrier for folks because it no longer requires in-person appointments or mandatory ultrasound and bloodwork. It makes use of online technology and is mostly done completely virtually. It is a safe and effective way to provide abortions. Patients are able to book an online appointment and, as long as they are under about 12 weeks of pregnancy (gestational age) they are prescribed the medication (Mifegymiso) virtually, which

they can pick up and take. Sometimes, if the abortion provider decides that the patient needs an ultrasound or lab work, they might have to go to a lab to get it done (this is a low-touch abortion). However, often, no ultrasound or lab work is necessary and the patient just needs to pick up the medication at the pharmacy and begin the abortion themselves (this is a no-touch abortion). The abortion provider will follow up with the patient to make sure the abortion was successful and that there were no other complications.

# INTERVIEW WITH CHERYL DOBINSON!

*The Alliance interviewed Cheryl Dobinson, Director of Community Programming and Research about the resolution.*



## ***Why did Planned Parenthood Toronto decide to put forward the resolution?***

We found that No and Low Touch Medication Abortion was really beneficial for clients, especially during the COVID-19 pandemic. So we wanted to advocate to ensure people across Ontario have that kind of increased access. We recognize that in places outside Toronto abortion can be harder to access and may require travel. Our hope is that in all communities in Ontario people who are pregnant can have access to abortion services and that no and low touch medication abortion is an option available to them. That way regardless of where people live, they can get the healthcare they need and in the lowest barrier way possible.

## ***Why are Alliance members a good place for people to receive this kind of service?***

Alliance members are located across the province and are often the only healthcare providers in some areas. Because these are places where people are already accessing services and have trusted relationships, it makes sense to offer this service that meets the needs of different populations.

## ***Could you please talk about the process prior to the AGM? What was required to put the resolution forward?***

We worked closely with Choice in Health Clinic around drafting the resolution, identifying the ways to frame it and gathering the evidence. We then submitted a draft to the Alliance and got feedback. That helped ensure the resolution provided enough clarity and offered sufficient evidence to promote its uptake. Once we

had a more solid version in place, we did an education session at the Board Liaison Networking Meeting. That was a great opportunity to introduce the resolution, answer questions and collect feedback. The Alliance facilitated and supported us in that process, which included receiving suggested amendments from other members.

## ***What work have you done since the resolution received the overwhelming support at the AGM?***

We've been working with the Alliance and Choice in Health Clinic to pull together resources that would be useful for other member centres. That includes resources around medication abortions in general and no/low touch medication abortion in particular. We've also connected through the Alliance with the National Abortion Federation (NAF) to promote their online medication abortion training for healthcare providers. PPT providers were involved in the training by participating in the live "ask an expert" session where they could share their experience not just with medication abortion but also no and low touch medication abortion. Going forward we plan to finalize a tool kit and share it with all members to support them as they implement the resolution. Supporting future NAF trainings is another piece of work that I see us doing in the future.

# COMMUNITY PROGRAMS

In 2021-2022, Community Programming staff delivered **441 workshops and group sessions** to **5572 youth**.

Another **6000+** people accessed **sexual health information** from Teen Health Source.



## NBD

NBD (Nonbinary BIPOC Drop-in) is a bi-weekly, virtual hang out space for youth who are nonbinary, gender nonconforming, and/or gender diverse and Black, Indigenous, and/or people of colour.

### 15 Sessions, 25 Participants

Some topics that we explored included make-up, zine making, and affirmations writing. We had many discussions about topics like growth, solidarity, chosen names, expression, coming out, and chosen family.

## TIME OUT

Time Out is a weekly drop-in program which supports young parents and helps meet their needs with regard to sexual and mental health, self-development, parenting skills and practical life skills.

**39 sessions, and 19 participants.**

Participants of this program continued to experience a wide range of mental health issues including depression and anxiety. Much of this can be attributed to COVID, the resulting unpredictability of day to day life, and the rapidly-changing measures and protocols. Folks also reported extreme anxiety about leaving the house for fear of contracting COVID.



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## PEAK

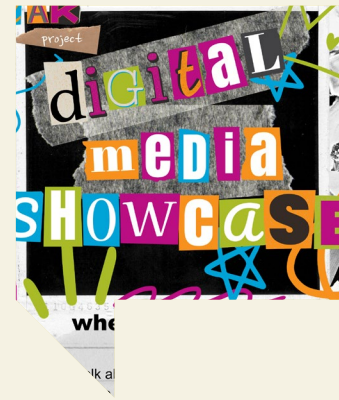
PEAK (Prevention Engagement Action Knowledge Project) was an HIV/STI prevention and anti-stigma peer education project.

**43 PEAK community workshops, 824 participants.**

**8 podcasts and 5 zines were created by volunteers.**

[Listen to the Podcast Here](#)

We explored various topics in our workshops, podcasts, and zines including sexual health, healthy relationships, self-resilience and self care for young people living with HIV or another STI.



## YMP

YMP (Youth And Masculinity Project) is a bi-weekly, virtual hang out space for young men and masculine identified youth between the ages of 16-29 in Toronto.

This past summer, our weekly drop-in program ran for 12 weeks, engaging 16 youth. Our participants had the chance to discuss various topics including masculinity, healthy relationships, and improving their sexual and mental health.

We also ran a drop-in workshop series in the winter where participants engaged in conversations and skill/capacity building exercises to improve their overall sexual, physical, and mental health and wellbeing.

## BYMHI

Black Youth Mental Health Initiative (BYMHI) is an initiative that came out of the sharing of perspectives/ experiences by Black staff at PPT. The Black Youth Mental Health Initiative hosted multiple virtual workshops specifically for Black youth.

**Over 100 participants** attended who benefited by sharing the space with Black facilitators and therapists to explore topics like healthy relationships, self-care, liberation and movement.

Participants named the profound impact of having Black staff accessible and represented through the initiative and repeatedly shared their desire for continued programming.

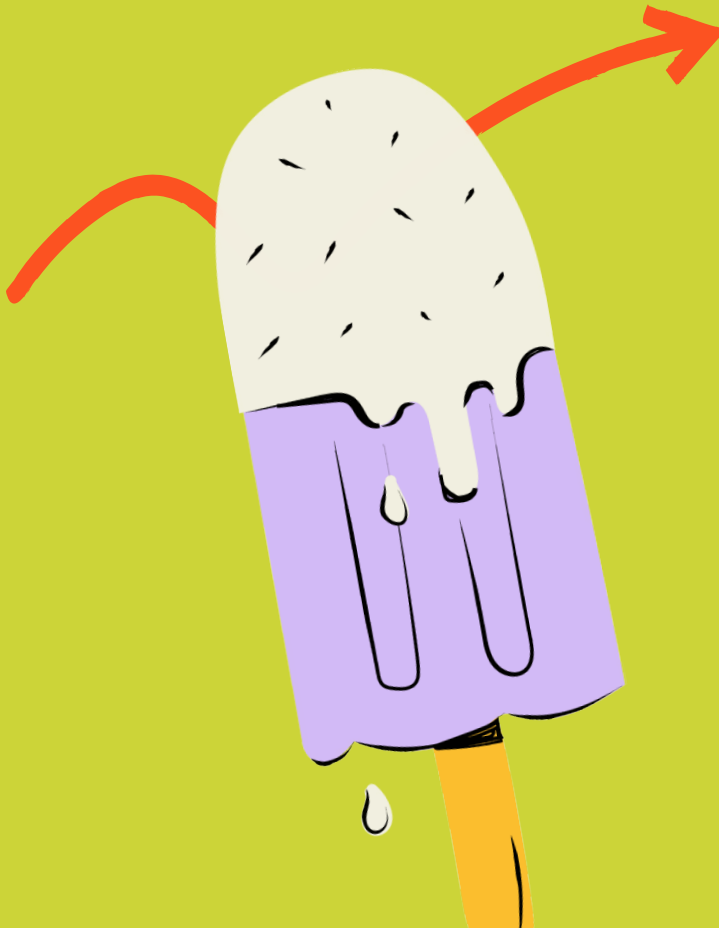


## TEACH

Teens Educating And Confronting Homophobia (TEACH) is a peer-based anti-homophobia/biphobia/transphobia education program. We deliver peer education activities in high schools and community settings across the city.

**This year we had 100 workshops, 3206 participants.**

We introduced new workshop modules on gender identity and envisioning queer futures, and facilitated for groups including parents, teachers, social workers, 2SLGBTQ+ youth, and other students from elementary school to college and university.

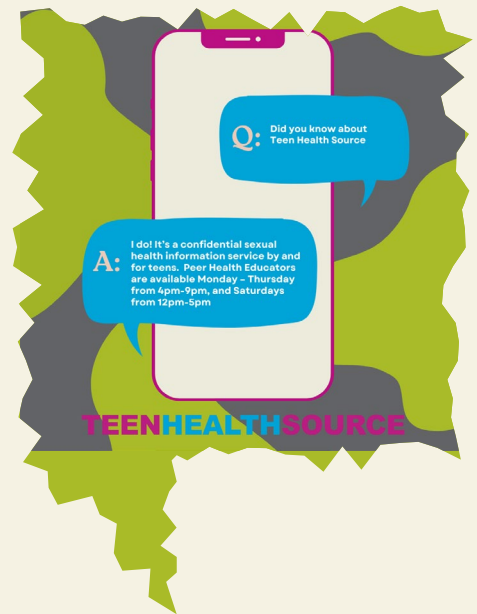


# HEALTH PROMOTION WORKSHOPS

The Health Promotion team at PPT offers a range of workshops for youth that promote healthy sexuality and informed decision-making. We deliver our workshops in community settings, such as high schools, youth shelters, group homes, community centres, and recreational settings.

**This year we had 210 workshops and group sessions with over 1400 participants.**

PPT's goal is to give youth the information and skills that they need to make informed decisions for themselves. To do this, we explore topics like healthy relationships, fertility awareness, birth control options, mindfulness, boundaries and consent, and communication.



## TEEN HEALTH SOURCE

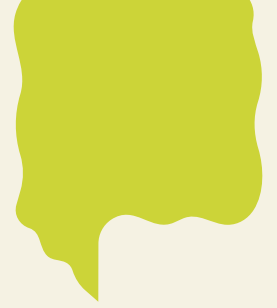
Teen Health Source is a confidential sexual health information service by and for teens.

**Over 6000 people accessed our services in 2021/2022.**

Our volunteers answer teens' questions and provide sexual health information by phone, email, online chat, or text in a way that's youth-positive, non-judgmental, sex-positive, pro-choice, and inclusive. We also host an artificial intelligence chatbot to help answer sexual health questions when Teen Programming volunteers are offline.

Additionally, we offer workshops in schools and community settings, conduct outreach initiatives, and maintain a teen-focused sexual health website where youth can find answers to commonly asked questions, [TeenHealthSource.com](https://TeenHealthSource.com)

# VOLUNTEERS

**THIS YEAR WE HAD 83 VOLUNTEERS  
PROVIDE 1588 HOURS TO PPT.**



## COMMUNITY CENTRIC FUNDRAISING (CCF)

In November 2021, PPT created a new Director of Development position to build out our fundraising strategy and centre CCF principles in our fundraising model.

**“Community-Centric Fundraising is a movement to evolve how fundraising is done in the non-profit sector. Its goal is to support fundraisers and other non-profit professionals to re-examine every fundraising philosophy and practice they have been taught, engage in vigorous ongoing conversations, and explore doing**

**fundraising in ways that reduce harm and further social justice.”**

**- [Communitycentricfundraising.org](https://communitycentricfundraising.org)**

We’ve been busy! The work this year included:

1. Investing in new tools for communication and strategies to communicate better with our supporters.
2. Investing in new staff positions
3. Speaking to PPT staff and community members about what fundraising at PPT can look like



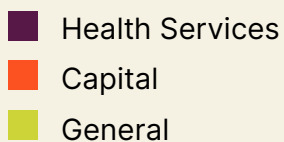
# FINANCES

Statement of Revenue and Expenses for the year ended March 31, 2022

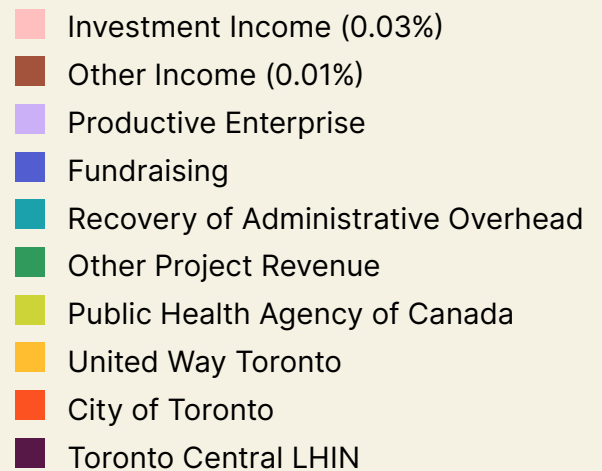
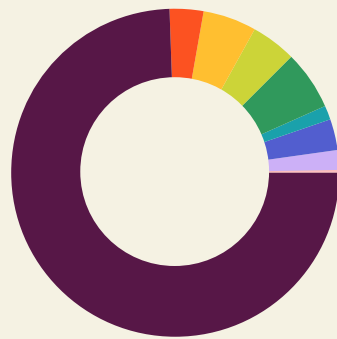
## Revenues

Revenues	General	Capital	Health Services	Total
Toronto Central LHIN	-	15,000	3,221,681	3,236,681
City of Toronto	136,448	-	-	136,448
United Way Toronto	235,289	-	-	235,289
Public Health Agency of Canada	187,861	-	-	187,861
Other Project Revenue	251,925	-	-	251,925
Recovery of Administrative Overhead	-	-	68,044	68,044
Fundraising	133,564	-	-	133,564
Productive Enterprise	81,908	-	-	81,908
Other Income	442	-	-	442
Investment Income	1,414	-	-	1,414
<b>Total Income</b>	<b>\$1,028,851</b>	<b>\$15,000</b>	<b>\$3,289,725</b>	<b>\$4,333,576</b>

### Total Revenues



### All Revenues



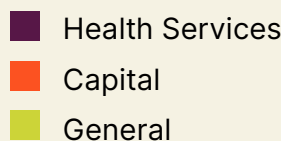
## Expenses

Expenses	General	Capital	Health Services	Total
Salaries and Benefits	-	15,000	3,221,681	<b>3,236,681</b>
Building	136,448	-	-	<b>136,448</b>
Purchased and Contractual Services	235,289	-	-	<b>235,289</b>
Operating	187,861	-	-	<b>187,861</b>
Administrative	251,925	-	-	<b>251,925</b>
Cost of resale contraceptives	-	-	68,044	<b>68,044</b>
Fundraising	133,564	-	-	<b>133,564</b>
Programming	81,908	-	-	<b>81,908</b>
Non-insured	442	-	-	<b>442</b>
Amortization	1,414	-	-	<b>1,414</b>
<b>Total Expenses</b>	<b>\$1,007,985</b>	<b>\$103,884</b>	<b>\$3,260,685</b>	<b>\$4,372,554</b>
<b>Excess of Revenues</b>	<b>\$20,866</b>	<b>\$(88,884)</b>	<b>\$29,040</b>	<b>\$(38,978)</b>
<b>Amount Repayable to Toronto Central LHIN</b>	-	-	<b>\$(29,040)</b>	<b>\$(29,040)</b>
<b>Excess of Revenues over Expenses, net</b>	<b>\$20,866</b>	<b>\$(88,884)</b>	<b>\$ -</b>	<b>\$(68,018)**</b>

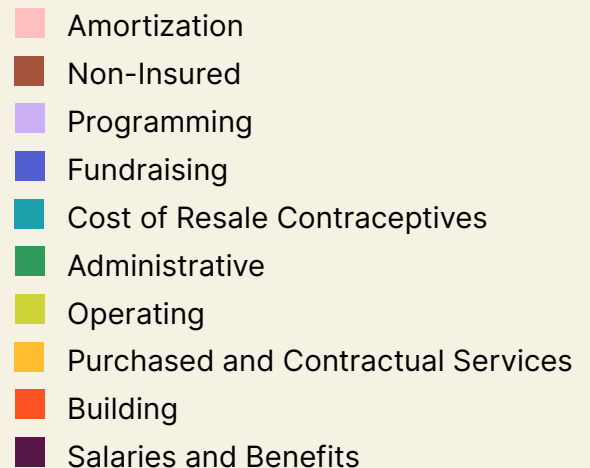
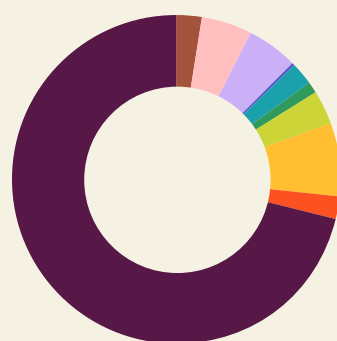
\*The true cost for non-insured expense is \$246,166; we were fortunate to secure a one time \$30,000 reimbursement of unspent non-insured funds from another agency.

\*\* This amount is funded by a draw from reserve.

### Total Expenses



### All Expenses



These figures are a statement of Planned Parenthood Toronto's financial activities from April 1, 2021 to March 31, 2022. Complete audited financial statements are available upon request.

# BRAND REFRESH



**Notice anything different about us?** In order to create a more responsive brand for PPT that reflects the wide range of programs, services and community that makes up PPT, we invested in a Brand Refresh and new website design that's accessible, centres youth, and provides easily-navigable access to PPT's programs, services and resources.

**Thank you! Now and forever, here's to health equity, reproductive justice and youth futures!**

# THANK YOU THANK YOU THANK YOU

Many of the programs and services PPT offered in 2021-2022 would not be possible without the dedication of our many and passionate supporters and co-conspirators. We want to say a big thank you to all of our amazing volunteers, students, partners, donors, funders, staff, and clients and participants who committed their time and energy to PPT.

Your involvement, leadership, skills and enthusiasm helped foster critical access to health and wellness, and that made a difference for the communities of youth who rely on us. Every vaccine, drop-in hang out session, or therapy appointment happened because of you. We couldn't do it without you.

# GET SOCIAL

Stay in touch and learn more about what we are working on as it happens. Follow us on social media for updates @PPToronto on Twitter, LinkedIn, Facebook and Instagram.

@PPToronto



## Contact Us

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