

2010 ANNUAL REPORT:

Living with AIDS Shouldn't Mean Living Alone

When I was diagnosed with HIV, I isolated myself from help and support. I thought I had to deal with this by myself. I wallowed in this self-imposed exile for several years before I realized it was no way to live. And living with HIV is what I had to do.

I founded The Women's Collective to find, support, and organize women with HIV/AIDS. Today we provide support and programs for women living with, and at risk for, HIV/AIDS, and their families in a compassionate, loving environment.

Every day, I'm awed by the spirit and resourcefulness of the vibrant, amazing women we serve. Every time a woman walks through our doors for the first time, I recommit myself to empowering women living with and at risk for HIV/AIDS to live full, productive lives.

Patricia Nalls

Founder/Executive Director



We are...

compassionate
 positive
 capable
 powerful
 authentic
 supportive
 empowering
 safe
 genuine
 hopeful
 reliable
 dependable
 warm
 cheerful
 gracious
 hospitable
 responsive
 secure
 healthy
 trustworthy
 considerate
 sanctuary
 affirmative
 honest
 true
 optimistic
 confident
 strong
 able
 energetic
 hearty
 vigorous

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Our Mission

Our work began in 1993 and grew out of the life experience of our Founder and Executive Director, Patricia Nalls, a woman living with HIV/AIDS who used her personal lessons learned to create a community-based organization run by and for women living with and at risk for HIV/AIDS in the Washington, DC area.

The mission of The Women's Collective (TWC) is to meet the self-defined needs of women, girls, and their families living with or at risk for HIV/AIDS, reducing barriers to care and strengthening their network of support and services. As a Washington DC-based nonprofit organization led by women with HIV and their allies/advocates, we work to fulfill our mission by:

- Providing services that are peer-led, women- and girl-focused, family-centered, and culturally appropriate.
- Providing a safe, non-judgmental environment for *all* women.
- Providing a voice for women and girls who are at risk for or living with HIV and their families through advocacy at the local, national, and international levels.
- Creating partnerships among service providers, governmental, non-governmental and private entities.

Our services are divided between three programs: Care Management for women and families living with HIV/AIDS; HIV/STD Prevention for girls ages 13 and up; and Policy and Advocacy for women locally, nationally, and internationally to advocate for themselves and others whose voices are often not heard at policy tables. Our programs combine to support women and girls in taking control of their health while improving their health outcomes and quality of life. More information on TWC can be found at www.womenscollective.org.

With one in 20 residents estimated to be living with HIV/AIDS, the District of Columbia has the worst local HIV/AIDS epidemic in the country, an epidemic that is highly generalized into the heterosexual population in poor areas of the city. Now more than ever, our services are vital to improving the health outcomes and quality of life of women and girls in the District. Addressing the social determinants of health that impact the ability to women and girls to seek and maintain care regardless of their serostatus is at the core of our work. ■

2010 Program

The Women's Collective rises to the challenge of meeting the needs of the women, girls and families that come to us for services and support. While over the last year we have met this challenge—we are reminded that the numbers of women with HIV/AIDS in this community continue to increase and are staggering.

Some highlights from our program year include:

Our **Medical Case Management Program** continued to strengthen its work with women living with HIV/AIDS and their families. The Women's Collective medical case management program grew to include more highly trained staff, programming and strengthened program infrastructure and protocols all which reflect a rapidly changing service delivery system that is more responsive to the needs of women and families.

TWC secured funding to implement the **Positive Pathways** program, which is an evidence-based structural intervention that addresses barriers to HIV medical care for African American women living in the poorest neighborhoods of DC. Through 2 trained Community Health Workers (CHW) places at TWC, CHWs will identify out-of-care women, build peer-based trust and inform them about living with HIV, provide personalized assistance to help them enter and navigate service systems, and support them throughout the early part of their medical care until they become fully engaged.

HIV care management team members facilitated 11 monthly **Coffee House** support groups for over 75 unduplicated women living with HIV/AIDS. These groups are peer-driven but co-facilitated by an HIV care team member with experience in counseling. Groups include free time to talk about immediate issues as well as structured time that introduces skills building and educational segments to support women's questions and interests. Guests are invited to present based on women's interest such HIV and menopause. These groups are another creative unique way to get messages to women, increase dialogue and peer support. Seated massages were also provided during groups.

In response to the increasing need for food for families and the decrease in food bank funding locally, TWC maintained its own **Kitchen Pantry** program that is a responsive emergency food bank for women and families. In 2010 the kitchen pantry program served over 250 families.

Accomplishments

We continued to strengthen our woman- and girl-focused **HIV Counseling, Testing and Referral Services (CTR)** program and expand our hours of testing and outreach to include late nights and weekends. We see the provision of HIV counseling, testing and referral as a critical link and conduit to all of our other services. We are able to provide this invaluable service to women in our community in a safe and comforting environment both at our offices and aboard our mobile testing van.

We participated as community partner in the **Female Condom (FC2) Demonstration Project** to increase awareness and understanding of the female condom benefits, eventually leading to more women using FC2 to prevent HIV/AIDS and other STDs. We distributed 25,879 FC2 in DC to women and trained 24 peer educators to work in the community to educate women on FC2.



We provided **Comprehensive Risk Counseling and Services (CRCS)** services with the goal of promoting the adoption of HIV risk reduction behaviors by women at risk for and living with HIV/AIDS with multiple, complex problems and risk reduction needs.

We provided two group-level Centers for Disease Control and Prevention (CDC) effective behavioral interventions: **Healthy Relationships** and **SIHLE or Sisters Informing, Healing, Living, and Empowering**. HR targets women living with HIV with risk reduction skills building around condom negotiation while providing support in disclosing one's status. SIHLE targets sexually active African American girls ages 14-18 with HIV risk reduction skills building. Both interventions were highly successful in reaching women and girls in supportive group settings.

We successfully reached over 2,500 community members with HIV and STD prevention education via our **Youth HIV/STD Program's Respect. Educate. Prevent. Protect. or REPP program**. REPP trains youth ages 12-25 as leaders using a service learning framework that promotes community engagement and education via youth-defined outreach. In 2010 this included participation in health fairs, poetry slams, open mic nights, and the provision of age appropriate safe sex parties.



The Policy and Advocacy program successfully developed and maintained the **Positive Leaders Uplifting Sisters or PLUS Network** — a diverse group of women living with HIV/AIDS who advocated successfully throughout the year to ensure that DC maintained appropriate levels of funding for services, to ensure housing is made available to women and families, and to collectively raise their voices at policy tables where typically women most affected by policy decisions are, not represented.

In addition, we traveled the country to present our **agency model / framework** to providers and peers in three-day long workshops designed to enhance services designed for women by presenting our history and model for replication and adaptation. We reached over 150 providers over 12 months, distributed more than 1,500 copies of our model that includes a tool-kit and DVD.

In addition, we continued to strengthen the **agency infrastructure** through the development of policy and protocol manuals.

Staff continued to engage in **professional development activities** that included attendance at local and national conferences and trainings to build their knowledge, ability and skills. Staff participated in local and national policy planning meetings for both care and prevention services and leant their voice to the debates.

Until there is a cure, we will continue to do everything we can to provide quality services and ensure women's voices are heard. We are committed to sharing our stories and saving our lives-one woman at a time. ■

Independent Auditor's Report and Financial Statement

We have audited the financial position of The Women's Collective as of December 31, 2010, and the related statements of activities, and cash flows for the year then ended. These financial statements are the responsibility of the organization's management. Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with generally accepted auditing standards. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audit provides a reasonable basis for our opinion. In our opinion, the accompanying financial statements referred to above present fairly, in all material respects, the financial position of The Women's Collective as of December 31, 2010, and the changes in net assets and its cash flows for the year then ended in conformity with general accepted accounting principles.

July 20, 2011

Chaconas & Wilson, P.C., Certified Public Accountants

**The Women's Collective, Inc.
Statement of Activities
For the Year Ended December 31, 2010**

Support and Revenue

Grant Awards	\$768,567
Contributions	\$287,907
Interest Income	\$6,548
Other Income	<u>\$200</u>
Total Revenue	\$1,063,222

Expenses

<i>Program and Services</i>	
HIV Care Management	\$469,482
HIV Prevention	\$461,076
Policy & Advocacy	<u>\$364,582</u>
Total Program Services	\$1,291,140
Fundraising	\$138,714
Management and General	<u>158,495</u>
Total Expenses	\$1,1592,349
Change in Net Assets	\$(529,127)
Net Assets, Beginning of Year	\$2,631,727
Net Assets, End of Year	\$2,102,600



Board of Directors 2010

- Abby Charles
- Janelle Dennis
- Marcia Ellis
- Endrea Frazier
- Ndidi Amutah-Hardrick



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