

2022

ANNUAL REPORT



MIND THE GAP

**OPTIONS FOR
SEXUAL HEALTH**

3550 E. Hastings Street
Vancouver, BC

optionsforsexualhealth.org



We acknowledge the Options for Sexual Health Provincial Office is within the ancestral, traditional and unceded territories of the xʷməθkʷáʻəm (Musqueam), Skwxwú7mesh (Squamish), and selílwitulh (Tseil-waututh) Nations. Our clinics are located on the homelands of the more than 198 First Nations and 30 Métis charter communities throughout the province. We share our gratitude for the land keepers who care for the land we live on beautiful, bountiful, and lush year round. We recognize the oppression that persists against the Indigenous peoples in British Columbia and we are committed to activism around decolonization and oppression.

Annual report prepared by Options for Sexual Health. This annual report shares what we have been up to as an organization during the 2021-2022 Fiscal Year. We encourage readers to share this document as a means of others getting to know
Options for Sexual Health.

If you have any questions about anything in this annual report, or about Options for Sexual Health, you can contact our Executive Director, Michelle Fortin at mfortin@optbc.org
Thank you for reading!

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2021 TO 2020

The last year is a testament to the strength, dedication and resilience of Options. Options staff and volunteers worked tirelessly to tackle ongoing challenges presented by the Covid-19 pandemic, environmental pressures, and an evolving socio-political context. We once again saw the heart that infuses all that Options is and does, as we moved forward together – collaboratively and courageously. As a Board, we are immensely proud of Options staff, volunteers, allies and partners.

As an organization, we are putting pieces in place that will allow for a stronger, more sustainable version of Options that can continue to support British Columbians for future decades. We have also focused on our increasing our depth of perspective by having greater diversity and breadth of lived experience in championing sexual health. The Board wants to particularly thank our Executive Director Michelle Fortin and our Leadership Team for continuing to lead Options with grit, resourcefulness, and most importantly, kindness through this time of transition. We are excited to continue our work to care-fully lay a foundation for Options' next chapter. With many thanks and much gratitude.

Joyce Rautenberg and Kaye Hare
Co-Feminists and Co-Chairs,
Options for Sexual Health

BOARD REPORT

The Board of Directors at Options for Sexual Health, like so many others, have navigated this global pandemic by being flexible and intentional. The last time they met in person was 32 months ago forcing them to be excellent communicators, listening while on a screen, instead of in a board room. Indeed, five of our 13 board members have never met with the board in person and another 3 had only one opportunity before the world shifted.

When you think about it, so much of the work in the social profit sector is driven by relationships. This is exactly the same with governors of an organization – getting to know and trust each other fosters collaboration and collective decision making. Despite the lack of direct contact and never getting a ‘feel’ for each other, Options’ Board of Directors have stepped up.

At our 2021 AGM two young women stepped up into Co-President roles, flipping the structure and recognizing a way to leverage each other’s strengths to the organizations benefit. The executive spent time identify the gaps in expertise, experience and social location, purposefully reaching out and finding diverse and invested board members from varied disciplines.

The board took on the difficult task of reconciling the gap in pay for our clinic staff and supported a process of data collection to better understand operational realities that put pressure on the organization to meet its mission.

The board chose to ask hard questions and participated in difficult conversations with the staff team that ultimately created deeper ties and commitment from everyone. Additionally, it was empowering when our board Co-President penned a heartfelt and targeted Op-Ed that epitomized the board’s collective dedication to reproductive justice and our staff team.

As we move into this next phase, the board at Options for Sexual Health will continue to ask hard questions, be champions for sexual and reproductive health and look forward to doing it together, in the same space, virtually or otherwise.

OP-ED

Last month I read an article describing how “geriatric millennials” (us oldie, barely millennials aged 35-40) were the only age group “winning at work during the pandemic”. The article described how our swiss-army knife skillset, born from being economic survivalists for the last 15 years, is now highly prized for working across generations and contexts during the pandemic era. The result is that we have been increasingly promoted into leadership positions.

It is true in my case too. I am a long-term Board member of Options for Sexual Health Association, which is Canada’s largest sexual health not-for-profit. When asked to step into the Board Co-President role of Options much earlier than expected in September 2021, I answered the call.

It is a true honour to be the Board Co-President. Building from early grassroots advocacy in 1963, Options now runs 45 clinics that provide comprehensive, judgement-free sexual health care in BC. These clinics do things like provide a startlingly high number of pap tests when other health care providers have refused to do so during the pandemic. Options also runs a Sex-Sense Line, provide sex education for thousands of K–12 students, and serves as the training ground for sexual health nurses and educators in BC. I am fiercely proud of the work we do.

But it doesn’t feel like I am winning. Instead, I am terrified by how much I am losing. More precisely, I am terrified about how much Options and British Columbians are losing during my tenure.

The skinny is that Options is having discussions to close approximately $\frac{1}{4}$ of our clinics in the next 3 months. These are not theoretical conversations; these are conversations in which clinics have been short-listed and circled. The result is that thousands of British Columbians in our cities and our rural and remote towns, thousands of British Columbians who need Options the most, will no longer have access to sexual health care. It also means that other important work we have started – around trans care and anti-racist and de-colonizing care – will go underfunded.

The problem? There are a few issues ranging from cost of living to decreasing contraceptive sales, but the biggest one is that Options hasn’t had an increase in provincial funding since 2012. We have submitted budgets and briefing notes. We have begged. It has done no good.

And we have stretched those 2012-era dollars as far as they will go. Every creative and/or janky solution has been exhausted. The choice is to shatter or to save what we can. It is a breathtaking loss to our nurses, doctors, staff, patients, partners and volunteers. People who have fought so hard and for so long for the right to sexual health care. I don't know yet what shred of self I will lose, when I have to personally make the motion to close those clinics.

I can only hope I won't have to do it again in a year or two.

It feels unfair, though not wholly unexpected. Part of being a geriatric millennial means that I heard lessons from not only the Boomers but the Silent Generation – the most senior workers who were leaving the professional world just as I was entering. I remember speaking to one advocate who had been involved in sexual health for almost 5 decades. I asked what had kept her motivated to work in the grueling, underpaid field of sexual health for so long. She replied “because I worry that your generation has no idea that you are only one government away from losing it all”.

Her words stuck with me. After the last several years, I think it is safe to say that my generation is now aware of the power of a single government. But being thrust into leadership, I am now aware of another power dynamic. That being ignored and undervalued by many governments over many years can also cause us – me, you, our families, our communities – to lose it all.

Well, my economic survivalist self refuses to accept that this loss is inevitable. Options is asking for \$312,000 more dollars per year out a provincial health care budget of nearly \$24 billion. I invite you to join Options in our fight for this funding, which will provide foundational sexual health care and support sexual health rights in this province. Here is how you can help:

1. Write a letter to your MLA in support of Options and sexual rights and health care for all British Columbians
2. Donate directly to Options. I promise each dollar will be used wisely.

Solemnly,

Kaye Hare, PhD.

Co-President of Options for Sexual Health

2021-2022

Fiscal year 2021/22 will be remembered as the one when Options' took up more space than even we knew was possible. During the second full year of COVID-19 as a harsh reality across the world, Options programs continued to adapt to serve folks often being the only point of care in communities across the province.

Our educators were in classrooms almost every school day, virtually reaching more youth and engaging in lively conversations about all things sex ed. There was a deepening of understanding around how to engage youth online and the team has been pleasantly surprised by the increased level of participation by students. It seems that the layer of anonymity being online creates an opportunity for vulnerability not present in face-to-face sessions.

Our Sex Sense team continued to be that calm, accepting, and knowledgeable voice at the other end of the line 5 days a week. Once again, anxious callers increased, impacted by the effects of COVID-19 on the medical system that was less responsive and accessible for folks. The time taken on calls and emails increased as the team ensured that responses were measured, non-judgmental, and kind.

Our incredible clinicians ensured that our pop-up clinics could be that consistent service in their communities. More than ever people counted on us to deliver compassionate, knowledgeable care in person and without judgement. Despite the number of patients seen being slightly lower than last year, we did over 3000 cervical cancer screenings (Pap), almost double that of the previous year and STI testing and treatment went up by 6%. While our nurses, clinic administration staff and volunteers made certain that as many folks as possible could access direct services, we saw the greatest number of people turned away based on sheer volume and capacity.

This past year we had some tough conversations with our provincial clinic teams. For years Options has done more with less. The board and Leadership Team agreed that we would not move into the next year without a plan to pay staff a respectful wage, which meant straightforward conversations about clinic closures. The call to action within the organization was met with incredible energy and passion. The champions within Options rallied to connect with MLAs and Health Authority leadership across the province. Staff across the organization said they felt engaged and deeply appreciated the transparency of the dialogue; and they stepped up.

Heartfelt letters to local MLAs garnered a number of meetings that allowed the story of Options to be heard by many. It was empowering to receive slack messages from nurses in small communities about writing Op-eds, how to talk to patients about the issues and what local allies we might reach out to. It was inspiring and humbling to experience their combined passion and tenacity; and it made my role so much easier. Our allies across the province stood up and advocated for us to the Minister of Health and we are so grateful for their support.



MICHELLE FORTIN
EXECUTIVE DIRECTOR

EDUCATION

Submitted by Kristen Gilbert,
Education Director

I've been reading a lot of reports and think pieces recently which are sounding the alarm about missed education during these COVID years. People are reasonably concerned about what social and academic skills students have lost or failed to acquire while we've struggled to deliver school-based learning in this pandemic climate. Today, news from the US indicates that math and readings skills have taken a tumble for elementary students, there. As an educator, I'm certainly concerned about how these gaps will affect young people in the future. As a sexual health educator, I'm also deeply concerned about another gap in knowledge: sexual health education in BC.

Did you know that sexual health education is mandated in British Columbia? If you're surprised to hear that, it's because of the uneven delivery across the province. While there are phenomenal school-based sex ed programs in some districts, and some teachers are delivering inclusive and comprehensive lessons, we've always "filled the gap" at Options by offering up to date sexual health education in our signature style. You may have heard that parents aren't supportive of sex ed, but that isn't true: a recent SIECCAN study confirmed that more than 90% of BC parents agree that sex ed belongs in schools. We also know from the last Adolescent Health Survey (2018) that students in BC want more information about sexual health: it was listed as the second-most requested topic that students wanted to learn more about (mental health was first on the list).

So why is sex ed so "hit and miss" around the province, and how can we close the gaps? Current teacher training offers no support for teacher candidates wanting to get more comfortable teaching sexual health. There is an enormous gap in pre-service learning for educators and institutions who train teachers must step up to offer more. At Options we have "filled the gap" by offering professional development for working teachers in the form of Pro-D days and our Sexual Health Educator Certification (SHEC) program, but we call on teacher certification programs to graduate teachers who are confident, competent sexual health educators.

There also is no oversight from the Ministry of Education to ensure that BC students get the sexual health education that they are entitled to. Individual teachers, school administrators, and school boards can set their own practices regarding the delivery of sex ed, and the result is an uneven delivery of this mandated topic. Some districts have worked hard to empower their teachers with training and support, but others have hired so-called "pregnancy crisis centres" to deliver out of date abstinence-only lessons to students in their schools. We want funding, guidance, and support from the Ministry of Education to ensure that sexual health education is available to all students, as is their right.

We know from more than 30 years of data from the Adolescent Health Survey that healthy practices increase when sexual health education is prioritized. BC students are, more than ever, choosing to delay the start of sexual activity until they are older, feel ready, and until they feel deeply connected to their partner. We can give young people tools to make decisions with comprehensive sexual health education.

COMMUNICATIONS

Submitted by Ashleigh Turner
Communications Director

"Don't Google That!"

Have you ever taken to Google to find answers? We have, too. And it's not always the answer you want to find, especially when it comes to sexual health. Unfortunately, accurate sexual health information can be challenging to find on the World Wide Web. That's where we come in. When we say "we're here for you, we mean it. Our digital resources offer immediate access to information and fill the gap where so many other services and websites fall short. Our resources are constantly being updated to bring current content and information to the forefront, and the best is yet to come. Let me back up and tell you a little bit more about communications at Options.

Communications is a big word, and a big role. It has expanded tremendously over the past decade, and it would be reasonable to say that it's almost a given that this trend will continue. What is communications anyway? Everyone defines it slightly differently, and at Options for Sexual Health, it's our website, our social media, our brand and marketing, our outreach, our volunteers, our live streamed events, and so much more.

Although we have other ways of sharing information (like our fabulous clinicians, Sex Sense team, Educators, and even good old paper pamphlets and fact sheets!), our digital resources are available 24/7, providing access, acting as a first point of contact, helping to fill gaps in knowledge for patients, and more. Our digital offerings, including our website, social media, and live streamed events are filling the gap, providing accurate information in approachable and clear language. We want people to be able to easily find the information they are looking for, and know they have a reliable resource at their fingertips. IYKYK, we're here for you! Our website and social media are the gateway to all of our services, connecting people with clinics, Sex Sense, and a copious amount of information.

Since the beginning of pandemic life, our online resources have been the go to for many people, especially when they can't easily access health care or haven't been able to have all of their questions answered elsewhere. I don't know about you, but when I need to find information quickly, I usually tend to search out things digitally rather than researching through books. This is the fast-paced world we live in, and our copious amount of resources and fact pages are there for users when they can't find the information in person or even through health care appointments.

The questions that don't get asked in a clinical setting, like "can I get pregnant if..." get answered by our digital offerings. Our live events have managed to fill the gap in areas like contraception use, pleasure, clinical perspectives, and many other areas of sexual and reproductive health. We answer the most common to the most obscure questions.

One of the drawbacks of being an organization specializing in sexual and reproductive health services, education, and care is that we are constantly trying to fill the gap, while also having to be incredibly mindful of the language we use. In the previous annual report I detailed the fact that certain words or phrases have led to shadow bans and decreased algorithm uptake. This is of course still the case, and in fact has become even more extreme over the past year with Instagram being taken over by Facebook (Meta) and censoring almost all words pertaining to sexual and reproductive health. We have persisted; striving to find new ways to adapt and get our content out to those who need it, but the struggle continues.

We remain a steady source of information for users, enabling them to access information through many portals, including our website, Facebook, and Instagram. Our website is a source of current facts and resources, written in accessible and approachable way to meet a wide range of audience needs. Our website visitors have remained consistent, 385,000 visits annually with many users viewing more than one page per visit. Our bounce rate continues to decrease, telling us that people are finding the content they want on our website.

With the recent addition of online booking, our website has also become a means of making an appointment for users. Our Facebook and Instagram followers have increased steadily despite the ongoing challenges for sexual and reproductive health in the social media realm. Looking to the future, and as the scope of social media changes, we will continue to adapt to ensure our accurate content is available and accessible.

And don't forget -- you can help your favourite sexual health organization out and give us a follow on Instagram and Facebook: find us @optbc on Facebook and @OptionsForSexualHealth on Instagram!

CLINICAL UPDATE

Submitted by Blanka Jurenka, Lauren Taylor, and Nicole Pasquino
Clinical Team

Now that the pandemic dust of 2020/21 has settled, our staff at Options is taking stock of what we have managed to accomplish in this past year, and what other challenges we have yet to face. Before 2020, our clinics filled in immense gaps in care throughout the province, providing best practices in sexual and reproductive healthcare that many patients were otherwise not able to access. Our clinics have been a main point of contact for a wide spectrum of patients but for 2SLGBTQQAI folks specifically there are limited resources in many areas of B.C. We have offered a safe place to connect and inclusive sexual health services for these communities since the creation of Options as an organization.

Fast forward to when social distancing became a necessity, Options continued to provide specialized care, but now through virtual appointments from individual clinics. Our staff also quickly set up a busy telehealth clinic that was able to provide STI screening and contraceptive options in a supportive, inclusive and accessible environment. Virtual clinics kept essential reproductive care accessible for existing Options patients, as well as for new patients—those who could not travel, were immunocompromised, unable to take time off work/other duties, or had not accessed Options care before. The diminished number of physicians in the province along with the impacts of compassion fatigue and sheer exhaustion from managing through COVID has influenced our ability to deliver regular telehealth services. Through the previous fiscal year, our Telehealth Clinic was our busiest of all our clinics but in 2021/22 the number of physicians willing to provide services in evenings fell drastically and patients receiving these needed services decreased by 29%.

Throughout 2021/2022, Options clinics returned to in-person care as soon as possible. This was facilitated more quickly than many family practices and walk-in clinics seemed able to do; our patients, already having some difficulty accessing Paps pre-pandemic, let us know, from all over the province, that they had been referred to Options by their own FP or walk-in clinic for this important screening test. In response and acknowledgement of this added clinical load, the BCCA met with Options to discuss strategies to support these patients. Options continues to be one of the largest clinics (collectively) providing cervical cancer screening in BC, and works in partnership with the BCCA to do so.

Additionally, we have had a staffing shake-up this year, with enthusiastic, accomplished staff joining our lead administrative/clinical team; this has given us a renewed sense of vigour and determination for the work ahead.

Despite these positive developments, obvious gaps in ongoing and improved accessibility of all comprehensive, informed, inclusive reproductive care remain.

The family doctor shortage continues to impact our ability to both keep our treasured family doctors on staff in our clinics, and to meet the needs, as above, of those growing numbers of patients losing their family doctor and turning to Options for reliable, reproductive health care.

Our funding remains a challenge in the following three major areas:

1. Our expert, compassionate nurses, the backbone and heart of our clinics, have long been underpaid compared to their unionized peers, and provide Options care largely out of their dedication to the field, and to their patients. They cannot continue to do so indefinitely. Already we have staffing shortages due to burnout, illness, or a necessary move to a better-paid position.
2. Our administrative staff also face similar barriers that directly impact retention at our clinics and the overall morale of our wonderful staff.
3. We have no electronic charting in any provincial, in-person clinic, which is a disincentive for family doctors to work with us, as well as a potential medio-legal risk.

We offer all of our staff our heartfelt thanks, and are determined to advocate for them so they can advocate for our patients.

Each year at Options poses difficult challenges. These past two years, of course, have been particularly remarkable, for everyone. In the face of these challenges, we are proud of what we have been able to accomplish to keep inclusive, reproductive health care available to our patients. We will strive to ensure anyone who needs this care can access it, and we remain dedicated to our mission: to champion and celebrate sexual health.

THE GAP

HIV/HCV PEER SUPPORT

Submitted by Noor Bajaj

This was my first year at Options as the Knowledge Exchange and Translation Coordinator. The year has completely flown by me like a whirlwind. When I first started, we were still experiencing a high amount of Covid-19 cases and now we are living with it and navigating a new normal..

Over the past year as the Knowledge Exchange and Translation Coordinator I have been able to continue the work of the two wonderful KETC nurses that were previously part of our team. I have been able to take their vision of creating an HIV/HEP C support group forward. We have been able to bring onboard a wonderful peer support worker and facilitator, Flo. She brings with her years of experience and community connections.

We've launched our peer support group at two separate locations, Vancouver Friends for Life and our Kootenay Loop Clinic during two Saturdays of the month. It was difficult to attract participants during the beginning given Covid. However, Flo has been able to make many meaningful community connections and attract participants through her perseverance and passion for the project. When she is not running the group, Flo is attending partner community organization events, outreaching, and promoting our support group. Alongside Flo, I am also continuing to research and reach out to partner organizations to build connections and promote our peer support group. Many organizations have been supportive of our support group and excited to promote it.

Apart from the peer support group, I have been able to take on other endeavors and help out with some of our other initiatives. I've been able to attend and help get ready for social justice action here at Options. It's so wonderful when we're able to rally alongside community members and get to know them and their experiences. I have also been able to take on some Equity, Diversity, and Inclusion initiatives. I am currently working around resources for clinicians and staff at Options that center around intersectionality, trauma-informed care, and anti-oppression.

For the upcoming year, Flo and I hope to be able to attract more participants and get a community going. We hope our support group will be a safe space and a place of support. Apart from the support group, I hope to continue working on the EDI resources and hopefully work towards translation of some of our resources to increase our outreach to individuals whose first language may not be English.

FUNDING PARTNERS

**WE WOULD LIKE TO THANK OUR
PARTNERS FOR THEIR GENEROSITY:**

**MINISTRY OF HEALTH
BC WOMEN'S HOSPITAL AND HEALTH CENTRE
PROVINCIAL HEALTH SERVICES AUTHORITY
MERCK
CITY OF VANCOUVER
BC GAMING AND POLICY ENFORCEMENT BRANCH
MINISTRY OF CHILDREN AND FAMILY DEVELOPMENT
FRASER HEALTH AUTHORITY
BC WOMEN'S HEALTH FOUNDATION
CENTRAL OKANAGAN FOUNDATION - CAROLE TAYLOR FUND
DIVISIONS OF FAMILY PRACTICE - SHUSHWAP**

COMMUNITY PARTNERS

**WE WOULD LIKE TO ACKNOWLEDGE
THE AMAZING ORGANIZATIONS WE WORK ALONG SIDE WITH A
COMMITMENT TO THE CONTINUED GROWTH OF SEXUAL AND
REPRODUCTIVE HEALTH KNOWLEDGE AND AWARENESS:**

**CENTRE FOR GENDER AND SEXUAL HEALTH EQUITY
WOMENS HEALTH RESEARCH INSTITUTE
CART
STIGMA AND RESILIENCE AMONG VULNERABLE YOUTH CENTRE
WOMYNS' WARE
AISLE
FEMINISTS DELIVER
BCTF**

FINANCIALS- STATEMENT OF FINANCIAL POSITION

Options for Sexual Health

STATEMENT OF FINANCIAL POSITION

As at March 31

	2022	2021
	\$	\$
ASSETS		
Current		
Cash	516,286	310,065
Temporary investments <i>[note 3]</i>	167,697	166,058
Accounts receivable <i>[note 4]</i>	135,323	45,852
Inventories	127,957	138,680
Prepaid expenses	19,329	22,545
	966,592	683,200
Capital assets <i>[note 5]</i>	19,688	4,834
	986,280	688,034
LIABILITIES AND NET ASSETS		
Current liabilities		
Accounts payable and accrued liabilities <i>[note 6]</i>	103,926	118,359
Deferred revenue <i>[note 8]</i>	540,564	225,423
Current portion of obligation under capital lease <i>[note 9]</i>	4,567	3,362
	649,057	347,144
Obligation under capital lease <i>[note 9]</i>	6,811	11,378
	655,868	358,522
NET ASSETS	330,412	329,512
	986,280	688,034

Commitments *[note 14]*

Other *[note 17]*

FINANCIALS- STATEMENT OF OPERATIONS

Options for Sexual Health

STATEMENT OF OPERATIONS

Year ended March 31

	2022	2021
	\$	\$
REVENUE		
Provincial government contracts <i>[note 10]</i>	1,327,327	1,330,495
Fee for service <i>[note 12]</i>	398,885	388,235
Donations and fundraising <i>[note 13]</i>	330,638	280,628
Grants <i>[note 11]</i>	246,406	173,545
Investment income	1,993	1,931
	2,305,249	2,174,834
EXPENSES		
Salaries, benefits and volunteer hours	1,588,213	1,479,666
Rent	319,836	297,896
Medical supplies	228,405	228,761
Advertising and promotion	38,549	38,199
Office and administration	40,606	37,802
Equipment and leases	14,647	26,246
Professional and consulting	20,502	20,353
Delivery	18,432	14,994
Insurance	12,576	12,361
Training and education	11,849	11,399
Amortization of capital assets	5,725	6,189
Interest on capital lease	4,121	5,008
Travel	716	1,062
Fundraising	172	159
	2,304,349	2,180,095
Excess of revenues (expenses) for the year	900	(5,261)

WHAT ELSE HAPPENED IN 2021-2022?

ARE WE THERE YET?
WE ARE STILL IN A
PANDEMIC BUT THERE
IS A LIGHT AT THE END
OF THE TUNNEL!

WE HAD 1597 HOURS OF
VOLUNTEER TIME IN OUR
CLINICS

CLINIC VISITS BY TRANS
AND NON-BINARY FOLKS
MORE THAN DOUBLED THIS
YEAR OVER THE
PREVIOUS YEAR

CERVICAL CANCER
SCREENING
APPOINTMENTS WERE UP
178% THIS YEAR OVER LAST
YEAR WITH 3114 PAP TESTS
DONE AT OUR CLINICS

WE TURNED AWAY 700
PATIENTS AT OUR DROP
IN CLINICS DUE TO SUCH
HIGH DEMAND FOR
SEXUAL HEALTH
SERVICES

MIDWAY, KASLO,
WEST KELOWNA,
CASTLEGAR, AND SOME
SCHOOL CLINICS CLOSED
DUE TO NURSING
SHORTAGES

WITH OUR SHEC PROGRAM
MOVING ONLINE, WE WERE
ABLE TO PROVIDE
THE TRAINING
AROUND THE WORLD!
WE HAD 22 OUT OF PROVINCE
AND 7 OUT OF COUNTRY
STUDENTS

OUR EDUCATORS
TAUGHT SEX
EDUCATION CLASSES TO
8340 STUDENTS

OUR EDUCATION TEAM
DELIVERED A SUPER COOL
EDUCATION SERIES:
THE ENDOCATION
PROJECT

THE AVERAGE
DURATION OF CALLS
AND EMAILS TO SEX
SENSE INCREASED BY
6%

TELEHEALTH DOCTORS SAW
1047 RETURN PATIENTS AND 464
NEW PATIENTS THIS YEAR, A
SLIGHT DECREASE OVER LAST
YEAR

SEX SENSE FIELDLED MORE
QUESTIONS FROM CALLERS
AND EMAILERS IN THE 30-39
AGE GROUP, WHILE CALLERS
UNDER 19 DECREASED

OUR 2021-2022 BOARD OF DIRECTORS

Joyce Rautenberg

Kaye Hare

Kathryn Fitzgerald

Janice Turner

Kaye Hare

Jack Guo

Sarah Nelligan

Tanya Davoren

Milo Leraar

Brandi Scales

Brandy Wiebe

Kathy Greenberg

Ashley Brooks

IN MEMORIAM



In August of 2022 we lost a member of our Options family.

Joan Westman DeCarle was with the organization more than a quarter of a century and was in many ways the heart of the Provincial Office team. A caring, thoughtful and kind person, Joan was someone who remembered the little things about everyone.

Much like the elephants she adored, her memory was incredible. Joan started with Options in a reception role and over the years became the keeper of our shared history.

Finishing in the role of Finance Director, Joan was a woman of few words who was fiercely loyal and committed to the world being a just place. She was an incredible light in our world. In the world.
Our hearts go out to her loved ones. She is greatly missed.

The background is a solid teal color. In the top right and bottom left corners, there are large, white, abstract curved shapes that resemble parts of a face or lips, creating a modern, minimalist aesthetic.

OPTIONS

FOR
SEXUAL
HEALTH

All About Choices