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NEWSLETTER

ISSUE #39 AUGUST, 1990

Welcome to Canada!



PWAs Granted Entry for Games

During Gay Games III in Vancouver, August 4th to 11th, 1990, the Government of Canada has announced there will be a "window" period during which short term visitors with HIV/AIDS may enter Canada without hassle.

Under present regulations Immigration Canada may refuse entry to foreigners suspected of carrying the Human Immunodeficiency virus. The PWA Society has been working to have this policy reversed, and are encouraged by this partial time-limited easing of travel restrictions which we **strongly** urge become permanent.

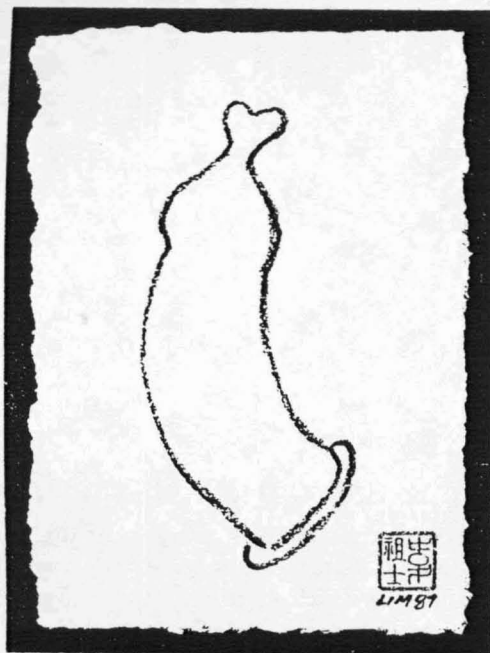
If you experience difficulties entering Canada during Gay Games III, contact Don DeGagne at Vancouver PWA Offices at 683 3381 or Mark Mees at Celebration '90 offices by telephone at 682 6023 or by fax at 682 3046.

Our Federal Minister of Health and Welfare, Mr. Perrin Beatty, has publicly declared his position that travel restrictions for short term visitors are unwarranted. We therefore expect that the Minister of Immigration, Barbara McDougall, should heed her colleague and permanently strike down unreasonable restrictions on persons with HIV entering Canada.

Meanwhile, we extend a warm invitation to our foreign PWA/HIV visitors. Come on down to our lounge, meet local PWA/HIVs and network! Welcome to Canada!

Douglas Starratt

PLAY SAFE at the games!



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Board Secretary's Report

A resolution is being considered to have Advocacy/Activism split off from the PWA Coalition.

A separate organization called ACT UP Vancouver is being formed at the initiative of some members involved in advocacy at the Vancouver PWA Society. The new organization will do Advocacy/Activism, as well as media work for people with HIV/AIDS.

The Board has spent most of its time over the past month hearing different visions for the future of the organization. Several very clearly different perspectives have come up, and the existing organization is gearing to provide services and support programs for PWA/HIVs. These developments are not dissimilar from those that have occurred in other organizations across North America.

This is a time of transition and change at PWA, and in a short while two stronger organizations will exist where one did till that point.

David Lewis

BIG CITY BABIES DON'T CRY



A New Vision

The PWA Society has been experiencing some vigorous internal debate lately regarding our organization's development. Various issues have come up and an overview of recent discussions, issues and events may be helpful for members and others to understand what's going on.

We all must be involved and concerned as our organization evolves and changes to meet the growth of our membership and their needs. With our major evaluation and assessment well underway, challenges to the board, staff, volunteers and members are being clearly articulated. This process needs input from everyone. This new look at the vision we have of PWA is already suggesting changes.

A lot has happened over the last few months. Probably the issue that has drawn the most attention is that of euthanasia and the personal statements made by board member David Lewis. The PWA board stands by the policy that we provide information on all aspects of interest to Persons with HIV/AIDS but do not advocate any particular therapy, practice or point of view. We are here to provide choices and information to our members. We are holding our next Monthly Medical Forum on Euthanasia so that people have the information to make their own decisions. Unfortunately, David Lewis' comments, in which he clearly and courageously speaks for himself, have been taken to be the policy of the PWA Society. They are not.

Another development affecting the PWA Society is the formation of an ACT UP group in Vancouver and how that will impact our advocacy/activism role. There is no question that political activism will become the role of ACT UP. Discussions have taken place at the board on our support for this move, as well as the recognition of our responsibility under our mandate to maintain an advocacy component for our members. Our two groups will be working in complementary ways for the empowerment and rights of all persons affected by HIV and AIDS.

The board has recently had four resignations and a process of appointing new board members is taking place. The board is strong and the funding situation of the society is very stable. Our financial situation, as always though, is in great part dependent on donations and this is an area of concern. Anyone who has some time to devote to our Finance Committee would be very welcome as would volunteers in general to help deliver our programs. Our Program Committee is always looking at ways of revitalizing and creating programs. Your ideas and time would be invaluable. Come in and tell us your thoughts and get involved.

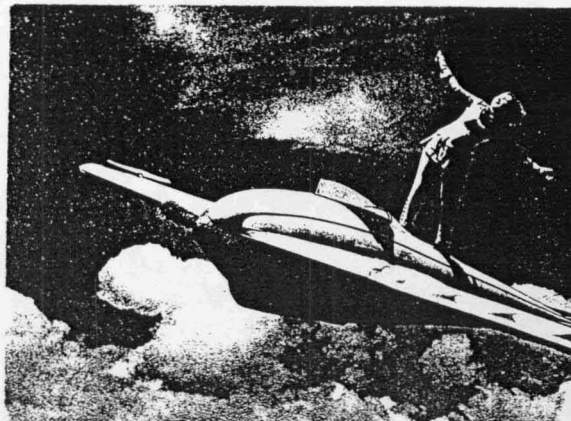
All committees really need member support. Please consider taking some time to attend the meetings. We need your input and energies. Our strength depends on commitment and involvement by you.

We all must be involved and concerned as our organization evolves and changes to meet the growth of our membership and their needs.

You can help make this society work by sending in your member questionnaire, writing letters to the board about your concerns, attending meetings, and dropping by or phoning board members and staff. We can't know what you're thinking if you don't tell us. Together we make this the best group for our needs.

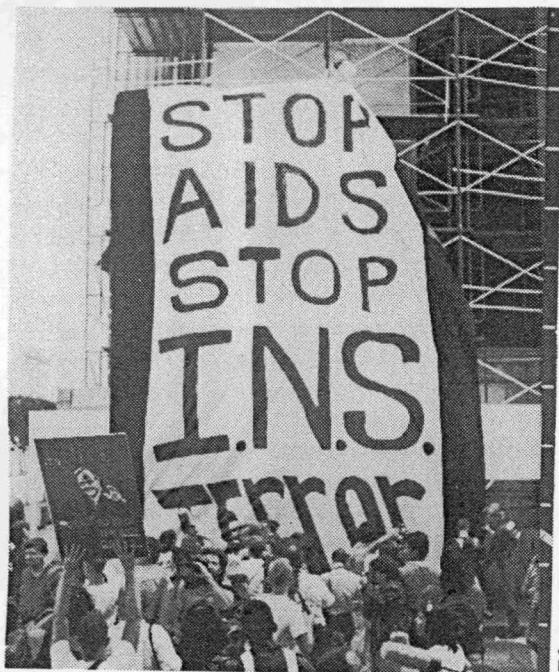
Alex Kowalski

Chair, Vancouver PWA Society



S.F. Conference

An Activist Reports



Photos by John Kozachenko

Demonstrating at the Sixth

Even before the Sixth International Conference on AIDS in San Francisco on June 20th, it was plagued by problems, principally the US Immigration and Naturalization Service's (INS) discriminatory policy towards Gays, Lesbians, People with HIV and those suspected of being any of the above. This led to the Global Boycott of the conference by over 100 organizations.

Another problem was the inflammatory statement made by the San Francisco Police Department officer Gary Delagnes, who threatened to shoot any protester who tried to splash him with AIDS tainted blood or jab him with a dirty hypodermic. And then there's the issue of conference accessibility to PWAs who could not afford the \$500 registration fee, or were too late to get one of the limited 375 passes issued to PWAs for free admission.

Our actions began on June 19th, when over 1,500 protesters marched through the financial district, blowing whistles and banging drums, on to the INS building. Eight activists were arrested and charged with either interfering with police or creating a disturbance when they vaulted over the police barricades and attempted to enter the INS building while running the gauntlet of club swinging police.

We then marched on the conference site at the Marriott Hotel and occupied the lobby demanding that at least 2,000 passes be issued to PWAs, the same number as that of the press passes given out. After meeting with the conference co-chair Paul Volberding, the organizers agreed to issue an extra 150 passes.

The opening of the conference saw the INS policy condemned by not just those protesting on the outside, but also by those speaking from the podium in Moscone Centre. John Ziegler, conference co-chair, addressed the 12,000 delegates and asked for a moment of silence as a gesture of solidarity with those who were not allowed in to attend the conference. Many of the speakers and delegates wore red armbands in opposition to the INS policy.

Peter Staley of ACT UP New York invited all the activists present to the front of the hall and then asked the delegates to stand and chant "300,000 dead from AIDS, where is George?" We were all aware that at that very moment George Bush was at a Jesse Helms' fundraiser in North Carolina.



Running the gauntlet of club swinging police.

Meanwhile 80 people were arrested and charged with interfering with a police officer when they jumped the barricades and attempted to crash the conference.

On the medical front, the major news came out at the Friday plenary session on "The Roles of Clinical Trials and Community Based Research in the Fight Against AIDS" when Martin Delaney of Project Inform released his findings on Compound Q (Trichosanthin). His study involved 46 patients who were failing AZT therapy and took Compound Q while continuing low-dose AZT. A mean decline of 0.35 CD4 cells per day over the course of one year was reversed by Compound Q. Patients showed a mean gain of 0.67 CD4 cell per day over a year's Compound Q treatment. Delaney contends that useful information can be derived from non-placebo trials using patient's medical histories as their own controls, what he called the parallel track concept.

The highlight of the closing ceremony was the ACT UP disruption of the speech by Secretary of Health Louis Sullivan, after which the protesters and delegates marched out and joined with the Gay Pride Parade already under way and attracting a record number of 325,000 participants.

John Kozachenko

PWA Evaluation Project

The PWA Review and Evaluation Project continues to document the success of the Society and to gather information about how we can become an even more successful self help/self care organization.

In the next few weeks, there will be a series of group interviews with a number of Society members, sometimes as part of the Saturday Drop-In, sometimes as part of a Program meeting, and sometimes at a specially scheduled time. Chuck and Dan will help lead these Focus Discussion Groups. Members should plan on joining these one-hour long discussions to help steer the direction of the Society. Call Judy at 683 3381 to ask about specially scheduled times and to sign yourself up for a focus discussion group.

Advocacy Committee

The Advocacy Committee of the Vancouver PWA Society is currently undergoing major change. This month through the end of August is a transition month. The Board is considering changes to allow it to work with and adapt to the formation of ACT UP Vancouver.

This trend is similar to what has happened in elsewhere across North America. It is proposed that the PWA Society should focus on services and programs, and ACT UP Vancouver should focus on activism and advocacy for PWA/HIVs.

Over the past month, Advocacy has looked at the mounting complaints by members against St. Paul's Hospital, as well as Royal Columbian Hospital, VGH, and others. Patient attempts to network with St. Paul's on these issues over the past 8 months have done almost nothing to resolve the real problems that exist. The new ACT UP Vancouver will take more aggressive steps to bring the issues to resolution in the style of ACT UP—seeing the steps taken to date by PWA have not shown themselves to be successful.

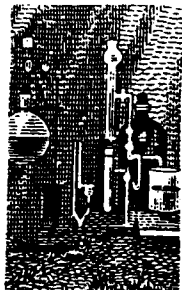
Advocacy continues to document cases of discrimination—more than anywhere else in Canada. We've also been dealing with the issue of a man who is trying to have his son immigrate to Canada to take care of our member. But Immigration is not letting the member have his son come in without major red tape and bureaucracy.

We have focused on the problem of parking tickets on cars that are parked by members with disabled placards. A member got very ill for many weeks and came out to find his car buried in parking tickets—ignoring his disabled placard and not even taking into consideration his physical problem. We have lobbied City Hall to change the parking laws so this cannot happen again.

For information on ACT UP/Advocacy, call 732 7975.

David Lewis

AIDS Treatment Highlights Research News



The following articles were selected and condensed by Chuck P., who assumes sole responsibility for their accuracy.

AZT: Earlier is Better

“Several news items on AZT again confirm data previously presented. The results of study ACTG019, the early intervention data, was published in the New England Journal of Medicine (April 5, 1990), ending residual complaints about the lack of hard data. The study showed that asymptomatic people using the drug in early intervention were between two and three times less likely to progress to AIDS during the two year study period. While the data seems solid regarding progression to AIDS, it showed that little improvement can be expected in CD4 counts from AZT (a growing theme with all the antiviral drugs). One very interesting point found in the data tables, but not discussed in the narrative of the article, is that there appeared to be a dramatic reduction in the incidence of lymphoma among those using AZT.

“Lingering doubts about the impact of AZT resistance were answered in new data submitted by Dr. Douglas Richmond, the discoverer of AZT resistance. At a scientific conference in Colorado, Richmond presented data showing that those who used AZT in early intervention were far less likely to develop resistance than those who waited until later to use the drug. This position was logically arrived at by Project Inform and a number of physicians more than a year ago. Initially, some physicians claimed that resistance argued against early intervention, on the belief that it might result in early development of resistance. Some physi-

cians and researchers argued that early suppression of viral activity would in fact delay the development of resistance, the point now proven by Richmond. Dr. Richmond’s definitive studies confirm data presented to the FDA a few months previously by Burroughs Wellcome. Perhaps this will end the debate on whether early intervention is a good idea or not”

Project Inform Perspective
May, 1990

Note: A comprehensive AZT Information Pack is available at our library, or phone us at 683 3381 and we’ll mail it to you.

PCP Prophylaxis: Earlier is Better?

“Current guidelines call for initiating PCP prophylaxis when the CD4 count falls consistently below 200. Since this guideline came into common practice, many physicians have reported a surprising number of cases of first-time PCP in people with counts higher than 200. The call for prophylaxis at a CD4 count of less than 200 is based on data from the national Multiple AIDS Cohort Study (MACS), which suggested that people with counts between 100 and 200 had a 14% risk of contracting PCP within 12 months. The guidelines, however, said nothing about the risk for people between 200 and 300, or above 300. Private contact with federal AIDS officials suggests that the risk for people between 200 and 300 is indeed significant, perhaps as high as 8% over the next 12 months. This is a very real concern which many people would choose to address if they were aware of it.

“Some physicians contend that a count between 200 and 300 alone might not be enough to warrant prophylaxis. They suggest instead that prophylaxis is warranted for people with such counts when the low counts are accompanied by typical ARC symptoms, such as thrush, hairy leukoplakia, night sweats, or weight loss. Other physicians use responses to common skin antigen tests as a measure of immune health, and begin

prophylaxis on the basis of their outcome combined with CD4 counts.

"There is no one right way to make this decision, but there is a growing trend toward PCP prophylaxis at an earlier stage than that currently recommended. The time for beginning prophylaxis should be based on an overall evaluation, not just CD4 counts. Nonetheless, it now seems wise to begin thinking about prophylaxis well before the CD4 count falls under 200."

Project Inform Perspective
May, 1990

Note: A PCP prophylaxis Information Pack is available at our library, or phone us at 683 3381 and we'll mail it to you.



Hyperthermia: Hope or Hype?

"Much has been made in the media lately about a new "cure" for KS involving a process called hyperthermia. This is a process by which the blood temperature is artificially raised to 114 degrees Fahrenheit. Blood is withdrawn from the body, heated with a heat exchanger and then returned to the bloodstream. This treatment has previously been used for treating some infections and may be useful in treating some cancers.

"Hyperthermia has been tried in only two people with KS. According to reports, the first person's KS lesions started to improve in 48 hours, and his T4 cell count rose dramatically. His doctors claim that his blood cultures seroreverted from HIV-positive to HIV-negative.

"This case report has been submitted to medical journals (and rejected from at least one). It is crucial that these results be evaluated by objective doctors. Media reports have been sensa-

tional and have aroused a lot of premature excitement. And, of course, the \$35,000 price tag is very suspicious. Hyperthermia can be dangerous if done improperly by a physician who is not knowledgeable in the procedure. In short, this treatment cannot be evaluated until we have more information on larger numbers of patients who are followed for longer than three months."

Treatment Issues
June, 1990

Oral Alpha-Interferon Update

"Over 300 people are now taking liquid oral alpha-interferon in Florida, according to Lenny Kaplan of the PWA Health Alliance in Fort Lauderdale. Kaplan told the *Native* that he expected that, within the next few months, a thousand patients[sic] would be taking the drug, which has been touted by Kenyan researchers as a veritable cure for AIDS.

"Some of the Florida patents have been on oral alpha-interferon for five weeks. Kaplan said that preliminary anecdotes were very promising, but not quite as dramatic as the Kenyan results. He told the *Native* that "KS dropped off one patient", and that another patient's T-cells rose from 200 to 900 in the course of the treatment. Kaplan also told the *Native* that some patients report that both thrush and hairy leukoplakia have vanished.

"Kaplan told the *Native* that information on the changes in the immune systems of 50 of the patients will be available within two weeks.

"Kaplan refused to tell the *Native* where the group obtained the oral alpha-interferon"

NY Native
June, 1990

Comments from Chuck: For those of you who are interested, low-dose alpha-interferon wafers are now available from several sources in the USA. My personal opinion is that you would be throwing your money away, as this treatment will turn out to be useless. For lots more information on alpha-interferon, pick up an Information Pack from our library.

Kind Enough and Brave Enough

Dear Editor

I am HIV+. I face the possibility that AIDS will render me blind, incontinent and addicted to opiates. If that day comes, I pray a friend of family member will be kind enough and brave enough to assist me in committing suicide.

If any of you think you have the right to interfere, I respectfully suggest you drink a glass of salt water. Then ask yourself, "Would **you** be willing to endure such nausea hour after hour for the rest of your life?"

Roedy Green

Vancouver, BC

New Phone Line

For Women with AIDS/HIV

The Vancouver Women and AIDS Network would like to advise you of a new service we are offering for women infected with HIV (human immunodeficiency virus). Beginning in March 1990, our group has organized a twice-monthly, confidential drop-in and information phone line for HIV positive women.

Recent statistics show that possibly over 200 women in British Columbia are infected with HIV. Yet organizations which routinely deal with HIV infected persons (such as the Vancouver PWA Society and St. Paul's Hospital's Infectious Disease Clinic) report that they are in contact with only a fraction of that number of infected women. For whatever reasons, the majority of these women are not able or not willing to seek information and support through existing channels.

The Vancouver Women and AIDS Network is a group of approximately 15 women who have been meeting monthly since March 1989 to discuss the issues of AIDS and HIV infection in

women. The group includes women whose paid or volunteer work brings them into contact with HIV infected persons, as well as concerned members of the community.

The drop-in/phone line service is designed to provide information and support for HIV infected women, with the eventual goal of connecting the women with each other (if desired) and possibly establishing a regular support group if desired.

Women are encouraged to come to our drop-in, held on the first and third Tuesday of each month at the Vancouver Women's Health Collective, 302-1720 Grant Street, from 7:00-9:00pm, staffed/facilitated by our volunteer members. The phone line is open during drop-in hours at 255 9848. Children and caregivers are welcome. Confidentiality will be respected.

For information please call Jackie at the PWA Society, 683 3381, or Bridget at AIDS Vancouver, 687 5220.



Have Freedom Will Travel

I have just returned to Canada after the International Conference for PWA/HIVs in Madrid, Spain and I'm only beginning to assimilate the effect this conference has had on me in terms of how freedom directly influences our well-being.

During this conference, I was privileged to share experiences with so many people from areas of the world which face very hard social realities, in contrast to the realities I take for granted coming from a developed country. The fact that we were free to travel to Spain gave me an empowering feeling and filled me with new knowledge, friend-

ships and a network of new contacts around the world. I did not feel singled out because of an infection. Other "came out" for the first time and began feeling the momentum building of this group dynamic. We are not alone. We have a rightful place and role to play.

We came out of the conference with very clear recommendations. Having coordinated the 'Law and Discrimination' section of the conference, I can tell you that Human Rights is a major concern around the world and that attending delegates will work on developing ways of addressing attacks upon human rights as it relates to HIV in their respective countries. We will coordinate this drive internationally with documentation citing examples of the attacks as well as issues needing policy decisions. This will be brought back to next year's conference which is being held in Strasbourg, France.

"The present policy vis-a-vis HIV infected travellers is unnecessarily restrictive, and serves no useful purpose in the control of this disease."

The travel issue is certainly a big one and the conference delegates stated clearly their intent to pursue changing legislation where discrimination exists towards HIV+. All agreed to boycott all conferences held in countries which have this restrictive policy.

I am thrilled that we were able to pull this conference together in a country that does not discriminate against HIV+ but saddened that my new friends may face discrimination at the borders if they come to Canada. I will continue my work begun last year on the human rights portfolio as it pertains to HIV by fighting Canada's restrictive policy as well as assisting in the international effort.

I was in Toronto for the announcement of the National AIDS Strategy by Perrin Beatty last week. In his speech, he addressed Canada's border policy for people with HIV, acknowledging that with more than 80 million border crossings each

year, Canada cannot isolate itself from the rest of the world. As you know, the federal government determined it would not be appropriate to send representatives to the VIth International Conference on AIDS held in San Francisco in June.

He said, "We must look to our own borders. In terms of our situation here in Canada, I have received advice from the National Advisory Committee on AIDS and from my own departmental medical advisers, that there is no threat to public health posed by visitors infected with the HI virus. Their opinion, and it is one I share, is that the present policy vis-a-vis HIV infected travellers is unnecessarily restrictive, and serves no useful purpose in the control of this disease."

A review of this policy is in process by the Immigration Medical Review Board. You may participate by writing your comments to the Hon. Barbara McDougall, Minister of Employment and Immigration, Place du Portage, Phase 4, 14th Floor, Hull PQ K1A 0J9.

The PWA Society is also interested in knowing about any incidents of discrimination related to HIV. Please contact our offices. Confidentiality is assured. Also, if you are interested in human rights and HIV and have some spare time, we can sure use your help.

In closing, I would like to invite all of you who are visiting Vancouver this summer to come to the office and bring us greetings here at the Society. We'd love to meet you.

Wishing you all a great summer and free travels!

Don deGagne

ddI Member Questionnaire

Members taking ddI are reminded that we are surveying the side-effects of ddI and other issues relating to ddI. To share your experience, pick up a form from the Advocacy Committee or call 683 3381 and we'll mail you one.

FESTIVE!

THURSDAY AUG. 9TH

Two Fundraisers for the
Vancouver PWA Society

GRACELAND

1250 Richards St., Alley Entrance

Dick Madonna

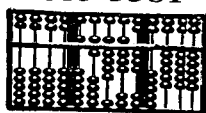
Seven Madonnas
entertain to a climatic
finale with a special
appearance by Richard
Richards as Dick Tracy!
Show at midnight - \$5
Cover

WEST END COMMUNITY CENTRE

At 870 Denman Street
Party, Music, Dancing
9:00 pm 2:00 am all to
benefit the Vancouver
PWA Society \$7.50
Cover

For further information, call

683-3381



Write for the Newsletter!

The newsletter committee has been working on a policy to guide contributors who submit articles and announcements for this newsletter. Our aim is to inform members about ongoing events and new treatment options, and to extend hope and caring for one another. Our pages serve as a forum for the views of our members. To make a wider discussion possible, here are the draft working policies we presently follow in choosing articles for publication:

- Articles must be of general or particular interest to PWAs as determined by the newsletter committee
- Articles may be opinionated but must not be misleading
- Articles should not be needlessly injurious to any person or organization
- All articles received by the Newsletter Committee by the deadline will be considered by the Committee and will be accepted, rejected, or referred back to the Author for amendment
- Articles re-submitted prior to print deadline will be considered by the Committee and either accepted or rejected
- The Committee will determine what Articles are accepted or rejected or held for later publication, and will determine layout priorities where space is limited
- Anonymous submissions will not be accepted, however a pseudonym may be used where the author of a submission is on record with the newsletter editor. Please indicate how you want the article byline to appear and how we may contact you.
- Articles and artwork by our own members will have layout priority over re-printed material from elsewhere.

- We reserve the right to edit for clarity, brevity and grammatical correctness

Please bear in mind our disclaimer which is printed in each issue as follows: This newsletter may report on experimental and alternative therapies but the Society does not recommend any particular therapy. Please contact your physician before trying any new treatment. Opinions expressed are those of the individual authors and are not necessarily those of the Board of Directors or the Vancouver Persons With AIDS Society.

Douglas Starratt, Editor,
Vancouver PWA Society Newsletter



Euthanasia Forum

Wednesday August 8th

Euthanasia—active/conscious participation in helping someone die peacefully—will be the topic of the August 8th Monthly Medical Forum. It will be held at Gordon House, 1019 Broughton Street, from 7 pm onwards.

After recent comments made by David Lewis in the media, outlining his own participation in euthanasia in the past, the forum looks as if it will have the biggest attendance of the summer.

The guest speaker will be Cheryl Smith of The National Hemlock Society, an organization that has published several books that tell, step by step, how to commit euthanasia successfully.

Also present will be Lewis, and several representatives from various seniors groups.

There may be a shortage of chairs, so come early! We may have to open the doors and set up a speaker system to play outside so people can hear what's happening.

For further information on the forum, contact David Lewis at 683 3381.

Advocacy

National AIDS Strategy Announced

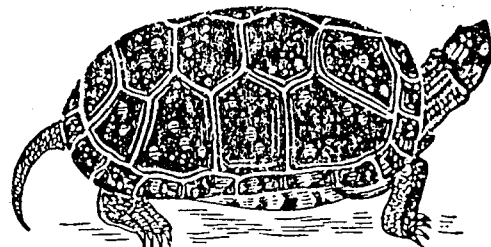
On June 28, the Federal Minister of Health, Perrin Beatty, announced the much delayed national strategy on AIDS. Too little, too late? Well, it's a start, but there's no new money and no new programs in place in time to affect the lives of anyone who is living with AIDS right now.

Asked for his comments, Don DeGagne, who serves on both the boards of the Vancouver PWA Society and the Canadian AIDS Society, said "If you asked me if I'll still be alive when this strategy is implemented, if this is going to save my life, I'd have to say no. I'd like to see things move faster. Where's the money to plug in programs? We need the resources and they're not there right now."

Missing from the strategy as it presently exists is effective action on putting sexual orientation under protection of the Canadian Human Rights Act, lifting of unreasonable travel restrictions for PWAs, programs and materials (condoms, needle kits) for prisoners to protect themselves, and above all, increased funding for programs to keep pace with the growing seriousness of this epidemic.

A few small steps in the right direction, for which we are not ungrateful, but it's going to take an infusion of cash and commitment to make the strategy truly effective.

Douglas Starratt
Editor, PWA Newsletter.



Calendar

Aug 3 Deadline for Submissions for September Issue of the PWA Newsletter.

Aug 8 Monthly Medical Forum for our members, the medical community, and other concerned individuals. 7:00 pm at Gordon Neighborhood house. Monthly Medical Forum topic is Euthanasia with Cheryl Smith of the Hemlock Society.

Aug 9 PWA Fundraisers at Graceland and at the West End Community Centre.

Aug 27 Lesbians and Gays with a Disability Monday, July 30, 1990, 7:30pm West End Community Centre, Stanley Court, 870 Denman St. For more information, please call Dan Guinan at the BC Coalition of the Disabled, 875 0188.

AIDS Mastery coming to Vancouver in August. A 3 day workshop about living powerfully in the face of AIDS. For all those whose lives are affected by HIV. See insert for details.

Sept 7 Deadline for Submissions for the October Issue of the PWA Newsletter

Ongoing Events

Mondays:

Advocacy Committee Meeting: Meets at 10:30 am in our offices to deal with access to treatments, human rights, political and legal issues. Members are encouraged to attend and get involved.

Art Therapy Group Use the visual arts to explore personal issues and concerns. No experience necessary -this is not an ordinary 'Art Class'. Facilitated by an experienced Art Therapist, Noel Silver. Call the PWA 683 3381 for more information.

Buddy Support Group: For buddies, sponsored by AIDS Vancouver. Meets every second Monday at 7:00 pm at AIDS Vancouver, 1272 Richards Street. Call 687 5220 for information.

Tuesdays:

Adult Children of Alcoholics: Special Interest to Gays and Lesbians, HIV+/- . Adult Children of Alcoholics is a 12 step support group for adults recovering from specific behaviour pattern established while living in alcoholic, addictive or otherwise compulsive family environments. Meets Tuesdays, from 7:00 pm until 8:30 pm in the PWA offices at 1447 Hornby Street.

Meditation Class "Living in Each Moment" From 2 pm - 4 pm This class is open to people living with HIV, friends and supporters. For more information and location, please contact Kristin at 872 0431

Personnel Committee Meeting: Meets at 10:30 am at the Society's Offices - works to provide policy and assistance in organizing human resources (volunteers and paid staff). You may have a talent or experience that would help. Contact Michel A. at 683 3381.

PWA Support Meetings: 7:30 - 8:30 pm, at the PWA Society Living Room Lounge. These meetings are open to PWA/PWARCs only. Discussions about concerns held by the group at the time of the meeting. A good place to talk about your fears, concerns, and triumphs.

Women and AIDS Drop-in 7:00 to 8:30 pm For women to seek out information and support concerning AIDS/HIV First and third Tuesdays of each month at Vancouver Women's Health Collective, No. 302, 1720 Grant Street. Call Jackie at 683-3381 for details or call us at 255 9848 during drop-in hours.

Everyday:

Living Room Lounge our relaxed drop-in centre is open weekdays 10 until 5 and Saturdays 11 to 3. Juice and fresh-brewed coffee.

Referral Information available in our Library weekdays 10 to 5 and Saturdays 11 to 3. For people looking for medical information, alternative therapy, and other services

Wednesdays:

Program Committee Meeting: Meets at 10:30am at the Society's Offices to develop and facilitate individual programs such as RISE, Support Groups etc. Members are welcome and encouraged to participate. Contact Jackie.

Partners of Persons with HIV/AIDS and Family and Friends of persons with HIV/AIDS. Both groups will meet every Wednesday 7:30-9:30 pm at St. Andrews-Wesley Church. Rooms to be posted. Call Bridget MacKenzie at 687 5220 or Joy Moon at 299 4828 for more information.

Healing Circle: 7:30 sharp - 9:00 pm on the first floor lounge, room 113, of the Comox Building of St. Paul's Hospital. Come and experience some loving time, deep relaxation, meditation, bodywork & the joy of sharing. Co-ordinated by 3 professional facilitators: Lela, Donald and Maria. This weekly event is open to all members, their friends, supporters, etc. For further information contact Donald at 682 2989

Thursdays:

Finance Committee: Works to ensure proper financial procedures and puts forward funding proposals. Anyone with expertise or those interested are urgently requested to contact the General Manager, Chris Sabean or the chair, Alex Kowalski.

Executive Committee: Meets 10:30 am every Thursday at the Society's Offices to coordinate the business of the Society and to prepare for Board Meetings.

Empowerment for Living: 7-9 pm group for persons living with HIV, ARC, and AIDS offers support and empowerment, sharing, prayer, meditation (and everything the Holy Spirit gives us). Our atmosphere is friendly, confidential and informal. Call Christ Alive M.C.C. Church office at 681 8525 weekdays for further details.

Get Over It: AA Meeting of special interest to HIV concerned persons. 7 pm in PWA Coalition's Living Room Lounge.

Narcotics Anonymous: New Hope. Open to HIV positive or negative. Meets every Thursday, 8:30 to 10 pm, in the PWA Coalition's Living Room Lounge. Narcotics Anonymous 24 hour Helpline 873 1018.

Body Positive Support Group: For those testing HIV positive. Confidential Discussion Group meets Thursday evenings at 7:30 pm in PWA offices. For more information contact Kenn Mann at 683-3381

Coping with Loss and Grief: Sponsored by AIDS Vancouver Meets the First and Third Thursdays of each month, from 7:30 to 9:30 pm at St. Andrews Wesley Church Library at Nelson and Burrard. For more information call Joy Moon 299 4828.

Fridays:

Board of Directors Meeting: The Board of the Vancouver Persons with AIDS Society meets every second Friday at 10:30 am at the Society Offices. Meetings will be August 3rd, 17th and 31st. Open to all interested members. This your opportunity to stay abreast of Coalition activities, and have a voice in our future. The four standing committees (Advocacy, Finance, Personnel, and Program) are always open to new volunteers, and welcome your participation.

Movie Night: get together at 7:30 pm in the Living Room Lounge video screening at 8pm. See poster in the lounge for this week's attraction. Munchies provided.

Saturdays:

Drop-in: Open to all HIV infected persons. An ideal time for people living in outlying areas or working during the week to meet others for support and to seek out information and resources. The Library is open and peer counselling and vitamin consultants are available. Held in the PWA Society's Living Room Lounge Saturdays from 11 am until 3 pm. For information call the VancouverPWA Society at 683-3381.

Sunlight Harmful To PWAs?

"It has long been known that ultraviolet light can damage or suppress the Langerhans cells of the skin. These cells are an important part of the immune system, and have recently become a focus for intensive research on AIDS.

Researchers at the Centers for Disease Control have found the onset of AIDS, as well as almost all opportunistic infections, peak in the summer, when ultraviolet exposure from sunlight is highest.

The recent article in Nature reported that ultraviolet light increased the activity of HIV genes as much as 150 times in laboratory tests. (an unrelated virus, tested as a control, showed little or

no such effect.) Exposure to half an hour of direct sunlight increased the HIV activity 12 times. HIV is known to infect Langerhans cells in the skin, which are exposed to ultraviolet light from the sun or other sources.

We asked two AIDS-knowledgeable physicians what

they knew about the dangers of sunlight to persons with AIDS, ARC, or asymptomatic HIV infection. Neither had seen the Nature article; both urged normal caution. One warned especially that a number of drugs used by persons with AIDS make the skin much more sensitive to the sun than usual."

AIDS Treatment News
June 1988

Comments from Chuck: Recently researchers have established that excessive sunlight can both activate HIV and cause the rate of HIV-replication in your blood to increase as much as 100-fold. Sun-lovers beware!



Toss 'Em!

What's Lurking in Your Medicine Cabinet?

Traditionally, the medicine cabinet is found in the family bathroom. However, the bathroom is the worst place to store medicine. Bathrooms can be humid and damp, and drugs

deteriorate more rapidly under these conditions. Items including bandaids, gauze, cotton swabs, thermometer, and hot water bottles can remain in the bathroom; it is the medications and creams you'll want to move to a dry, cool place. If

you choose a cupboard or drawer in the kitchen be sure it isn't too near the sink, dishwasher or stove, or accessible to children. If you are unsure whether to keep a medication, check with your doctor.

Head to Toe Wellness Newsletter
BC Medical Association



Eat Well

Food Remedies to Common Problems for PWAs

Diarrhoea may result from infections, medications or changes in the intestinal linings. The type and degree of diarrhoea may vary according to the cause and individual tolerance. Diarrhoea can lead to the loss of fluids and electrolytes (minerals such as potassium and sodium) causing dehydration and electrolytic imbalance.

If diarrhoea is a problem:

- Try small meals served at room temperature
- Replace body fluids and electrolytes with liquids: water, broth, fruit juices, jello, popsicles, and Gatorade, and high potassium foods such as bananas, meat, potatoes, apricot and peach nectars.

- If milk causes diarrhoea, use Lactaid to break down the lactose before drinking milk; try yoghurt and cheeses in small amounts.
- If fats cause a problem, use the leaner types of foods: low-fat cottage cheese, part skim mild cheeses, and leaner cuts of meat.
- If cramping is a problem, avoid foods that may cause gas or cramps, such as carbonated drinks, beans, cabbage, broccoli, cauliflower, highly spiced foods, too many sweets and sorbitol sweetened gum.
- Avoid caffeine containing foods and beverages such as coffee, chocolate, and some carbonated beverages.
- Oatmeal, dried beans, apples, pears, potatoes and other foods from the fruit/vegetable and cereal/grain groups are good sources of certain types of fibre (pectins and gums) that may help to alleviate diarrhoea. Limit bran-type of fibre, seeds, and husks on grains.



Nausea may be caused by infections as well as some medical treatments.

If nausea is a problem:

- Eat more food during the times you feel better and avoid your favourite foods during the times when you experience nausea to keep from being "turned off" by foods you enjoy.
- Eat saltier foods and avoid very sweet foods.

- Try cold entrees such as meat, tuna, or egg salad sandwiches and cottage cheese with fruit.
- Eat smaller portions of food more frequently throughout the day.
- Eat drier foods, such as toast or crackers.
- Eat soft, bland foods that are easier to tolerate, such as rice, soft cooked or poached eggs, apple juice, nectars, and custards.
- Avoid greasy foods.
- If vomiting, replace fluids and salt by consuming broths, ginger ale, and juices.
- Drink fluids through a straw between (instead of with) meals.
- Do not lie down right after eating.



Fatigue: Experiencing shortness of breath and other problems encountered by PWAs can cause fatigue, making it difficult to spend the time necessary to prepare meals and maintain adequate food intake.

If fatigue is a problem:

- Prepare meals ahead of time when you feel well, and freeze in individual servings.
- Keep easy to prepare foods on hand, such as frozen dinners, canned foods, eggs, tuna and noodles.
- Eat frequent meals.
- Accept offers of family and friends to help prepare meals.
- Try take out restaurants.
- Utilize home delivery services.

Volunteer Newsletter
AIDS Vancouver





A Letter From Pat

Most of all thank you for the love and care you gave to my beloved son John..."

These words are characteristic of the hundreds of letters sent by parents, spouses, lovers, and friends to the palliative Care Team at St. Paul's Hospital. "Why?" you ask. What is so different, so special about this programme and specifically the Palliative Care Unit, and why are many AIDS patients asking to be admitted to the Palliative Care Programme?

Palliative care is active, compassionate care for the terminally ill when care and comfort, autonomy and dignity are paramount. The Palliative Care Programme provides comprehensive quality health care to persons experiencing their own, or their loved one's terminal illness. The Programme exists in the hope and belief that promotion of a caring community will enable them to experience an optimal quality of life and to attain a degree of mental and spiritual preparation for death that is satisfactory to them. Palliative Care seeks neither to hasten nor to postpone death but rather to affirm life, to preserve dignity while dying, and to provide support during the bereavement process.

The dying person and his/her loved ones together comprise the unit of care and are considered part of the palliative team. Provision of care requires an integrated multidisciplinary team able to meet physical, psychological, interpersonal and spiritual needs. The team members are from medicine, nursing, social work, pastoral care, music therapy, physiotherapy, occupational therapy, pharmacy, and volunteers.

The Palliative Care Team supports the individual by letting them live and die in the setting of his/her choice provided it is realistic and feasible. "Be it ever so humble, there is no place like home", is a commonly held view, especially when a patient is seeking security and familiarity and trying

to exert some control over his/her life. Home is a more acceptable and 'normal' environment than hospital for most people. In order to be successful however, home care must be the choice of the patient and family, and should not be the decision of the care givers or be more expedient for the health care system.

When remaining at home is no longer feasible, because the patient no longer wishes to remain at home, the environment is no longer safe, pain and/or symptoms cannot be adequately managed or family, friends and the community supports are inadequate, request for admission to the Palliative Care Unit is appropriate.

It is not unusual for patients to be admitted to the Palliative Care Unit for pain control and/or symptom management and then return home.

The admission criteria to the Palliative Care Programme includes: an acknowledgement of the terminal illness by the patient, family and the family physician; or acceptance of care, comfort, consolation instead of aggressive, cure-directed treatment; the physician having admitting privileges at St. Paul's.

Anyone may make a referral to the programme such as the patient, the family, or caregivers. On referral the first question asked is "Does the person know you are making this referral?" Also "Is the family doctor aware of the request?" When the referral is received by the Palliative Care Team the family doctor is contacted, then the patient and family are contacted and interviewed by members of the team, usually a doctor and a nurse.

Every effort has been made to make the Palliative Care Unit at St. Paul's as "home like" as

possible. The decor, furnishings and unit guidelines offer patients the flexibility similar to home. Upon entering the unit, most people remark "it feels so warm and cosy..." The nurses prefer street clothes to uniforms and the other disciplines do not wear the usual white lab coat. It is not unusual to see children visiting, up on beds snuggling a favourite uncle or grandma. Family pets are encouraged to visit provided they have an adult human with them. Patients are asked to bring articles from home such as clothing, pictures, plants or chairs to create their own special space. Visiting hours are open 24 hours a day and many patients have family, friends or lovers stay overnight either at the bedside or in the family room.

It is not unusual for patients to be admitted to the Palliative Care Unit for pain control and/or symptom management and then return home. Respite Programs help caregivers continue to manage care at home. Respite is a pre-booked admission to the unit, like a hotel reservation, for no less than four days and no longer than two weeks.

St. Paul's hospital has always integrated patients with AIDS across the medical units. The integration has supported the diffusion of knowledge and skills among all staff. Palliative Care has maintained this integration in combining AIDS and Oncology (Cancer) patients on the same unit, sharing the same rooms and facilities.

Answers to the opening questions "What is so different, so special about St. Paul's Palliative Care?" are perhaps contained in the rest of the letter:

"I am not going to cite any names for fear I leave one out, but you all know to whom I refer when I thank you for: the delightful outings; the many thoughtful gifts (from late night treats to cross word puzzle books); the patient ears when I needed to talk; the ever available shoulder to cry on; the back massages; the complete acceptance of me into your world."

Lois Brummet, Palliative Care Unit
St. Paul's Hospital



Support Group For Lesbians and Gays with a Disability

A support group for Lesbians and Gay men with a disability will start meeting this July. We will share experiences with each other and provide support and encouragement.

Lesbians and Gay men with any type of disability are invited to come and talk about being Gay in the disabled community and being disabled in the Gay community.

The group will meet on the last Monday of every month, starting on Monday, July 30, 1990, at 7:30pm. The meetings will be held in the West End Community Centre, in the Stanley Court, 870 Denman Street. For more information, please call Dan Guinan at the BC Coalition of the Disabled, 875 0188.

Interviewee

PWA's are needed for individual and small group interviews. (There is a \$25 honorarium for doing both a group and an individual interview, or \$10 for an individual and \$15 for a group interview.) I am an independent researcher interested in studying the ways in which members of the Society deal with personal and social issues related to the illness. This research will help establish an understanding of the benefits and problems associated with being a member of an AIDS organization. Any interested folks please contact Eileen McNutt at 687 8028 in early August.

Just a Reminder: Because That's What Friends are For! II

I wonder how many of you remember that Journal entry about the diary article that appeared in the PWA Newsletter Issue #30 exactly a year ago called "Because That's What Friends Are For!?" In a nutshell, it was about AIDS Vancouver's invaluable Buddy System which in my view is a "Key"-stone in relation to Persons Living With AIDS in terms of support. Buddy support does not have a 'price tag', and is not contingent on the whims of government or anything! The buddy support program, run by Martha Guss at AIDS Vancouver, has buddies who volunteer. They are great for all kinds of situations both frustrating as well as good. I've had a buddy since last September and it's been a unique and interesting experience. In my article last year, I said "I was excited and intrigued" to have a specially appointed buddy from AIDS Vancouver and that has certainly been fulfilled! In the last year I have done so many things that I would not normally have done even with my regular friends. It's my view that a good and dedicated AIDS Vancouver buddy keeps you on your toes, so to speak. There is tons to do, depending on your needs. In my case the activities sometimes are many: occasional rides to the hospital; long walks; fun talks and chats; sharing my frustration with HIV disease and AIDS; going to motion pictures; Sunday drives; brunch on the weekends and the theatre (the Coalition often has free tickets!).

So you see, there really is a fun and great advantage to having a specially selected buddy from the AIDS Vancouver Program. As I said in the article from a year ago, "I am not certain what to expect" in relation to getting a buddy, but I can assure you all now considering it, that getting a special buddy from AIDS Vancouver will be a

truly positive, enriching and beneficial experience.

Clearly, HIV disease and AIDS is too much for a single person to deal with and often a buddy's concern and support can be an extra 'inner' shoulder to help hold up your struggle to be a diligent person living with AIDS. So you might say, in my view, getting a buddy is smart in relation to developing your HIV strategy—and that strategy is everything. It's not wise to carry all the weight of HIV disease and AIDS on your back; nor is it good to carry all your eggs in one basket and shut yourself in because of worrying about not wanting to burden your friends. There is a solution, and one part of it might be the welcoming of a new buddy.

Just a reminder: all buddies are carefully screened by the personnel of AIDS Vancouver and Martha Guss. So if you think you might be interested in an AIDS Vancouver buddy for yourself, you can contact Martha Guss at AIDS Vancouver at 687 5220.

Mark



Friday Afternoon Fests!!

Good Times Are Back!

The 2nd and 4th Fridays of each month starting in August at 1447 Hornby Street from 3pm to 7pm, with Friday Night Movies starting at 7:30pm. Refreshments, music, terrific company, chatting on the deck and all around good clean fun.

We're here and you're welcome...we'd like to see you here too!

Mark your calendar for August 10th and 24th
Programs Committee

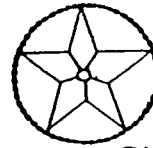
Thoughts Along the Way

Falling Out of Victim Consciousness

Do you ever feel a bit fatalistic about your state of HIV disease or what seems even less hopeful, a full blown AIDS diagnosis? Often it seems like AIDS is an unexplainable joke because it does not seem there is much an individual or even the medical doctors can do besides AZT and PCP prophylaxis. But I think that is where the integration of holistic health comes in to play with medical and clinical therapies. Remember the saying 'don't put all your eggs in one basket'. That phrase originated with AL 721 in San Francisco and New York City about three years ago. That strategy of diversity in our response to AIDS still applies today and evermore. AL 721 served its purpose in its time and space and although it wasn't the greatest of anti-virals, it symbolized an act of self-empowerment and inner, personal hope to seek healing.

But, as time has gone by and people have survived these four and five years with AIDS, I have seen some people weaken. This is not a bad thing, but I have now seen a need in our society for my unconditional caring and support services as well as some kind of holistic wisdom. With these goals of self-empowerment in our minds and hearts, only then can we as individuals and our society collectively fall out of victim consciousness. The individuals of our Coalition and of our society have the very real power of making great choices and of creating a new awareness that AIDS is rapidly becoming a chronic manageable illness. So I guess my message is whether you're HIV positive, ARC or AIDS, don't get swept off your feet with fear, fatalism or victim consciousness, but take it a day at a time, and concentrate a little more on pampering yourself.

M.A.P.



Leather Star

Leather Star is a Northwest organization based in Tacoma, and its primary goal is to grant realistic wishes of terminal PWAs in Idaho, Oregon, Washington state and British Columbia.

The organization has been granting these living wishes for about two years now, such as bringing a mother from Memphis Tennessee to the Northwest to visit her child who was afraid to leave town due to frequent hospitalization; reuniting a low income family in California, for the last time; found an ex-lover (after five years) for a man attempting to die with dignity; talked a major petroleum corporation into donating 250 gallons (960 litres) for travel to someone who wanted to go home. These are only some of the things that Leather Star has done. Leather Star guarantees the strictest confidentiality so that none of the names of people granted wishes are revealed.

As Puget Sound Mr. Leather 1990, my job is to educate the BC Community that they are able to access this fund and apply to have wishes granted. Along with that comes the job of fundraising. This is done in many ways—from benefits within the community, donations, bequests and just plain asking for help from local businesses.

The next fundraiser in Vancouver for Leather Star will be the Mr & Ms Vancouver Leather contest, August 5th, 1990 at Graceland. Tickets are \$8 to \$12 with Leather Star being one of four beneficiaries. Leather Star's major fundraiser is the Puget Sound Mr & Ms Leather Contest (PSML), and this takes place on the weekend prior to the US Thanksgiving holiday—this year on November 17th in Tacoma.

Should you require any further information regarding the granting of a wish or the willingness to donate or bequeath, please contact Martin Rooney at 688 9162.



Longtime Companion

Longtime Companion covers the gay AIDS crisis from 1981-1988 complete with the nondescript music of the time. This film is well intentioned, however, like the characters, it paints itself into an exclusive corner.

The conspicuous wealthy gay cliques of urban New York migrate to the resorts of Fire Island for pretty much what they do at home—sun and fun.

The New York Times reports a curious amount of gay men who are being treated for Kaposi's Sarcoma. The boys theorize for years as to the origin of the disease, for which after a year a name is arrived at, AIDS.

We observe the exclusive group cope with grief and for the first time becoming aware of lower economic standards. Because the format of the film is datelined at annual summer intervals, the plot is at best episodic. The only outstanding performance is by May Louise Parker, while the rest of the acting is adequate. This is due to poor direction and even worse editing. Parker's character, a straight friend, is the only excursion the boys of Manhattan have out of their little world of luxury homes, great looking male bodies and AIDS.

What saves this movie is the magic of Bruce Davidson's deathbed scene with his dying lover. The words are perfect but the performance is cold and calculating.

The ending of Longtime Companion employed a shot of upbeat optimism that left my jaw on the floor. The adrenaline rush was gratuitous.

While this review is not enthusiastic, I know this movie will deservedly have a place on public service TV. This film will serve special interest groups if picked up by the commercial networks, hopefully educating the masses confused on what courageous behaviour is in the most despairing of times. I would like to see an AIDS film that includes the poverty and terroristic discrimination which is much more prevalent in urban society than this bit of soap opera fluff had to offer. I give Longtime Companion **1/2. I predict it will have a three month showing at the Royal Centre Cinema.

Dave Wand

Remembrance of Valentine's Day

*You laughed at me
Called me fag
Ridiculed my value
Called me slut
slammed doors in my face
called me ugly
threw me on my stomach*

laughed

*as you raped my integrity
scorned my intelligence
because I had no face*

*I raised my hand
you did not see
I raised my voice
you did not hear
I DIED
you did not notice.*

Richard Hofmann

The Last Canto II

HIV Land

*such a journey to travel through
and why do you want me.*

Oh you are such a myth!

*But you make my soul cry
that not fighting you should mislead me.*

Connect, Connect, Connect—I confront

*In reflection my HIV tapestry
It's a disease but at one and
the same time HIV Land is my only journey.*

Anonymous

■ ■ ■ ■ ■

*In the beginning—when
God scattered stars into
space—He planned treasures
for us to discover—like
love and life—and people
like you.*

FLAVIA

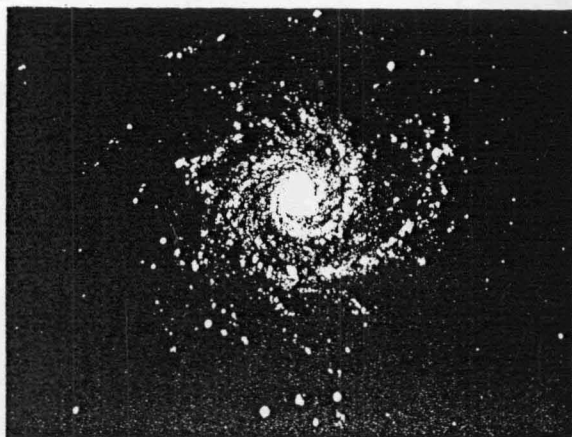


Roger J. Bourque

June 1945 - July 1990

Roger died peacefully in the Palliative Care Unit of St. Paul's Hospital on July 3rd, 1990.

We are thinking of establishing a memorial bench at English Bay in Roger's name. For information phone David at 681 7125.



Complimentary Ticket Procedures

Complimentary Tickets are provided for voting members who are unable to afford entertainment, social events and educational presentations which charge admission.

Due to the fact that many of our members are on low income, and since we receive a fixed number of tickets we have designed a policy regarding the disbursement of tickets.

Complimentary tickets are to be distributed in the following priority:

1. Voting members who are unable to afford tickets or are Ill. Ill is defined as: severely disabled, hospital out-patient status, in need of escort to attend outings or (members who have considerably progressed into AIDS).
2. Attendants escorting severely ill PWAs.
3. Voting members who actively volunteer with the Society seven hours or more per week.
4. Voting members whose total income is less than \$1,200 per month as set out in the CHF policy.
5. Other voting members.
6. Partners and caregivers accompanying PWA's
7. Volunteers from the community who are actively volunteering seven hours or more per week with the Society.

In the event all tickets available are not distributed to the above people any remaining tickets can be disbursed to full-time staff and then to part-time staff.



Attention, PWA Artists!

Your "Walk For Life '90" committee is in dire need of graphic ideas, suggestions, and submissions for posters and brochures for the Sept. 30 walkathon.

Posters and promotional material will be distributed throughout the city and mailed to the local media and abroad to potential corporate sponsors. Whoever volunteers their time for this graphic will have their name published with the art, so you will benefit by helping the Society!

There are many talented artists in town, but our first priority is to make this project available for PWAs. The logo is already in production, but we need visual promotion ideas. Please give us a call at the project office (ask for Dan or Sales) at 688-9255, or drop in at the GLC (1170 Bute Street). We'd like to have our posters ready for printing by mid-August.

Bar-B-Q! Farewell to David Lewis

A Barbeque will be held on August 19, from 1 to 6pm at the home of David Lewis, 3205 West 11th Avenue. It is open to all members of PWA.

David will be retiring from PWA in August 1990 to move on to other challenges and a position with the new ACT UP Vancouver organization.

The barbeque will be a fitting way to socialize in David's backyard and have a fun time in a stress-free environment. Bring your own food to be cooked, and your own potluck dish for the meal table.

I hope it won't rain!

See you there

Robert G.

HelpLine

"Walk for Life '90"

The PWA's 5th annual walkathon is gearing up for the walk on Sunday, Sept. 30th at Stanley Park. We need volunteers for lots of important work: everything from data entry to stage crews, telephone work to poster and brochure distribution! Do your part and make this year's walk even more successful! Drop by at 1170 Bute Street, Room 1F or call 688 9255.

Newsletter Production

We need help with photocopying, assembly, folding and stuffing, labeling and mailing of the newsletter. This is your chance to help out and have lots of fun with the lively newsletter team! Contact Michel A. at 683 3381.

Phone Lines

We Need You. the first Voice a PWA Hears Could Be Yours...

The Switchboard Committee needs help staffing our phone lines. Can you spare 3 1/2 hours a week? Training provided. Get to know your organization better and be a voice that represents us to our members and the public alike. Call Bryan Wade or Jackie at 683 3381.

Reception

The first person a PWA sees could be you!

The Reception Committee needs helpful, friendly people to greet everyone who walks in our doors, help them find who and what they need, assist them with membership, CHF, and other forms. Contact Michel A. at 683 3381.



NoticeBoard

Saturday Drop-In: Saturday social/info sharing drop-in held in the PWA Lounge from 11:00 am to 3:00 pm every Saturday. Meet other people with HIV, many of whom come in from the suburbs for this program. The library is open, peer counsellors are available, vitamin consultation, snacks and refreshments are provided. The roof deck is open for socializing if the weather co-operates. We look forward to seeing you on Saturday!

Bill Robson Art Show opened June 27th, at the PWA Society Board Room and running two months. **Gay Games Tickets** a limited number of tickets to the opening and closing ceremonies of Gay Games are available free of charge to full PWA members. Only one ticket per member will be given, on an "as available" basis, while they last. To get your ticket, please call Jackie at the office, 683 3381 **Teddy Bears:** we need a few good bears for the Living Room Lounge. Donations of cuddly critters gratefully accepted for duty in the Lounge or Hospital.

Roommate for PWA Let's find a two bedroom apartment in the West End. Contact Douglas S at 683 3381.

ddI Questionnaire take a few moments to share your experience. Contact Advocacy 683 3381.

Let's Go!

Movie Night Fridays

3rd "A Place in the Sun" with Liz Taylor and Montgomery Clift

10th "Grace Quigley" Kate Hepburn and Nick Nolte

17th "Black Orpheus" from Brazil

24th "King of the Gypsies"

31st "The Rose" Bette Midler and Alan Bates

The Movies start at 7:30 pm in the PWA Society's Living Room Lounge at 1447 Hornby Street. Munchies provided.

Staff Credits

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Associate Editor:

John Liesch

Art Director:

Lim P. H.

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Proofreading

Chuck Philbrick

Douglas Starratt

Copy Typists:

John Liesch

Judy McGuire

Production Manager:

Michel Arsenault

Many thanks to the production and assembly crews who photocopy, collate, stuff envelopes, and keep us going. If you want a volunteer assignment that's fun and rewarding, come join us on the lively Newsletter team!



WALK FOR LIFE '90

The 5th Annual 10 K Walk to support persons living with AIDS/HIV will be held on

Sunday, September 30, 1990

at Stanley Park Seawall

This is Vancouver's biggest fundraiser for Persons Living with AIDS.

The project team needs your:

- * Body (to walk, collect pledges, answer phones, etc.)**
- * Money (Pledgers? Donors? Sponsors? Benefactors?)**
- * Time (There's still lots of volunteer work to do.)**

Call Dan or Sales at the

"Walk For Life '90" Project Office

1170 Bute Street, Vancouver, BC 688-9255

"Walk For Life '90" is a fundraising project of the Vancouver Persons With AIDS Society

THE VANCOUVER PERSONS WITH AIDS SOCIETY NEWSLETTER IS PUBLISHED BY THE VANCOUVER PERSONS WITH AIDS SOCIETY. OUR OFFICE IS AT 1447 HORNBY STREET, VANCOUVER, B.C. V6Z 1W8 PHONE (604) 683-3381 FACSIMILE 683-3367. THE VANCOUVER PERSONS WITH AIDS SOCIETY IS A REGISTERED CHARITABLE ORGANIZATION (REVENUE CANADA REG. #0760124-11-27)

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