

CELL COUNT

ISSUE #30

CELL COUNT

Prisoners' HIV/AIDS Support Action Network

WHO WE ARE ...

PASAN is a community-based organizations working to provide advocacy, education and support to prisoners and young offenders on HIV/ AIDS and related issues.

PASAN formed in 1991 as a grassroots response to the emerging AIDS crisis in the Canadian prison system.

Today, PASAN is the only communitybased organization in Canada exclusively providing HIV/AIDS prevention, education and support services to prisoners, ex-prisoners, youth in custody and their families.

WHAT WE DO ...

I. SUPPORT SERVICES

PASAN offers support services to prisoners, youth in custody and their families, as well as to other organizations working on issues of HIV/AIDS and/or prison.

These services include:

a) Individual support counseling, advocacy, pre-release planning and referrals for prisoners and young offenders living with HIV/AIDS, primarily in the Ontario region institutions. We can assist our clients in accessing proper medical care and support while incarcerated, as well as help to arrange housing and medical/social support upon release. Much of this support is coordinated via telephone through collect calls, although we also do in-person support whenever possible. To date, PASAN has worked with more than 400 HIV positive prisoners and young offenders in over 30 different institutions (both federal and provincial) in six different provinces.

b) The only national AIDS Hotline specifically for prisoners. We accept collect calls from prisoners across Canada at 416-920-9567 and can help you with your questions about HIV/AIDS, and help you get the support you need.

c) We can help with replacement fees for birth certificates, S.I.N. cards and other necessary ID & release money (must be a client before release - twice a year maximum). The availability of funds vary, and we require proof of HIV status to access the fund. d) PASAN also provides ongoing support, networking, resources and training for AIDS services organizations (ASO's) and other community groups across Ontario. We assist ASO's to set up their own prison outreach and support projects, and act as a referral 'hub' for HIV positive prisoners and young offenders who are transferred from one region to another, thereby helping to ensure a continuity of support.

II. OUTREACH & EDUCATION

a) PASAN conducts **HIV/Hep C** prevention education programs in many adult and youth institutions in the southern Ontario region. An integral part of this program is our **Peer Educator's Group**, which is made up of ex-prisoners living with HIV/AIDS. Peer speakers accompany PASAN staff for workshops in prisons, youth facilities, and other institutions. We have found that Peers are often able to get across HIV/AIDS information in these settings.

b) PASAN produces CELL COUNT **quarterly**. This publication, which is written and edited primarily by prisoners and exprisoners themselves, is the only newsletter in Canada providing an uncensored forum for prisoners



and young in custody to explore and share their own experiences, and ideas about HIV/ AIDS. PASAN distributes 6000 issues a year to prisoners, institutions, and agencies across the country. **CELL COUNT is free for prisoners and people living with HIV/AIDS in Canada**.

c) PASAN also conducts free organizational and staff training for agencies and institutions working with prison affected, and drug using populations. We have experience in conducting training not only for community workers and ASO staff, but also for probation/parole officers, youth custody staff, prison social workers and case management officers.

III. NETWORKING & ADVOCACY

Since our beginning in 1991, PASAN has always maintained a focus on systemic advocacy on issues of HIV/AIDS and prisons. Our advocacy is based in recognition and defense of the fundamental human rights of prisoners, and our perspective derives from PASAN's brief entitled HIV/AIDS In Prison Systems: A Comprehensive Strategy (June 1992). This document outlined 40 recommendations for implementing a comprehensive HIV/AIDS strategy in the Canadian prison system. In lune 1996, PASAN released the follow-up document HIV/AIDS in Youth Custody Setting: A Comprehensive Strategy which specifically addressed the needs of youth in custody. In May 1999, PASAN released HIV/AIDS in the Male-to-Female Transgendered Prison Population: A Comprehensive Strategy. In August 1995, PASAN organized the first National Workshop on HIV/AIDS in Prison in Kingston, Ontario. PASAN has made presentations on HIV/AIDS in prison at the XI International Conference on AIDS in Vancouver (July 1996) and has appeared before the Parliamentary Subcommittee on AIDS in Ottawa (November 1996) and the Presidential Advisory Council on HIV/AIDS in Washington, DC (1998).

PASAN maintains an Activist Committee which monitors and advocates on issues affecting prisoner and/or people living with HIV/AIDS on a local, provincial and national basis. This committee maintains working links with other prisoners' rights groups, prison projects, and ASO's across Canada. We also maintain an ad-hoc Advocacy Committee of prisoners who assist us in identifying emerging issues.

OUTREACH AND SUPPORT SCHEDULE

<u>MEN'S</u>

DON JAIL – Every second Wednesday of each month from 3:00-4:30. Put in a request to the Volunteer Coordinator to attend.

 $\label{eq:HAMILTON-WENTWORTH - Once a month. Put in a request to Mrs Peters (Volunteer Coordinator) to attend.$

 $\label{eq:MAPLEHURST} \begin{array}{l} - \text{The second \& the fourth Monday of each month from 10:30-12. Put} \\ \text{in a request to Ms. Pedder (Volunteer Coordinator) to attend.} \end{array}$

OCI – First Thursday of each month from 3:00-4:30, Unit 6. Put in a request to the Dep. Sup. of Programming.

THE EAST – Programs every third Wednesday of the month from 1:30-3:30. Put in a request to the Volunteer Coordinator to attend.

THE WEST – Every third Thursday from 1:30-3:30 for group and one-to-one support. Both the men's and women's programs occur at this time.

WOMEN'S

GRAND VALLEY INSTITUTE (Kitchener) – Will be visited every 2 months throughout the year for support and outreach on issues relating to HIV and AIDS. For more info call: 416-920-9567.

THE WEST – (see above)

VANIER CENTRE FOR WOMEN – Every second Wednesday of the month from Oct to Dec. (Evenings)

<u>YOUTH</u>

- We visit different youth facilities throughout the City of Toronto on a regular basis. For more info call Connor at: 416-920-9567.

FEDERAL INSTITUTIONS

– We visit periodically, trying to get to each prison at least every two months. We see people individually or in group settings and talk about HIV/AIDS, Hep C and Harm Reduction. If you wish to know more or have HIV please contact us to find out when we will be at your institution.

We visit: Kingston Pen, Warkworth, Collins Bay, Bath, Frontenac, Millhaven, Fenbrook, Beavercreek and Pittsburg.

FOR MORE INFORMATION ON ANY OF THESE PROGRAMS CALL PASAN COLLECT AT: 416-920-9567

HIV+ CLIENT SERVICES

If you want to see your worker you will need to book an appointment with them. This way we can make sure that we are available to meet with you. **DROP-IN IS CLOSED**

- PHONE HOURS are Monday and Wednesday to Friday from 9-5 pm.
- ID REPLACEMENT
- RELEASE FUNDS \$50 (twice a year max.)
- **TOKENS 4** per week while available.
- **NEEDLE EXCHANGE -** is Monday and Wednesday to Friday: 9-12 and 1:30-5:00.
- SAFER CRACK USE KITS NOW AVAILABLE 2 kits per week, times are the same as Needle Exchange.

Sometimes we (and the phones) are very busy so... please keep trying !!!

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EDITOR'S NOTE

Welcome to the Summer Edition.

Many thanks out to all who have contributed to this issue.

PenPals: I have a stack of mail waiting to go out but I need new addresses for code #'s: 102, 105, 112, 113, 115, 120. They will be destroyed Sept I, if I don't hear back from you.

Tom Jackson Editor

ARTISTS IN THIS ISSUE

Cover, Page 13: Peter Collins Page 4: Eric Drooker Page 4, 9: Hadi Farahani Page 5: Unknown Page 10: William Antoine Page 10: Matt Wuerker Page 11: Charles King

Page 14: Syrus Ware



A Thank You

We would like to extend our sincerest appreciation on behalf of PASAN for all of the work done by Pete Collins over the past two years. Some of us have had the pleasure of knowing Pete for the past six years and have had the opportunity to work more closely with him.

Pete has written many articles for Cell Count, drawn many amazing pictures, written health care reports, organized educationals and training (unfortunately, neither occurred due to administration). Pete is working on a new tattooing pamphlet and designed our Prisoners Justice Day shirts for last year (which were banned from all prisons across Canada) & this year's as well, created a visual board for tattooing, written support letters and recently even donated a printer to the organization.

Although Pete is consistently busy with other projects, he continuously makes time for PASAN and takes an active interest in decreasing the rates of HIV/AIDS and Hepatitis C in prisons. We are so grateful for the time and endless giving Pete has shared. Many people continue to be a gift to our agency, however, particularly at this time we would like to acknowledge Pete for his strength, courage, intelligence, political insight and his tireless struggle.

We know from even our short time with Pete that his politics and fight for justice do not go unpunished from administration. Pete, your decision to fight on anyway is amazing to us. Please know that we will continue to support you in your struggles and will carry your politics forward when ever and where ever possible.

In strength and solidarity, PASAN Staff



Still Banned

Here is the latest update on the Cell Count ban in some of the federal institutions. We have written to the Wardens in Joyceville Institution and Collins Bay Institution to get some clarification about why some of our correspondence (including Cell Counts as well as some other pieces of mail) have been returned to us.

We have not heard back from either Warden however, a prisoner in Joyceville Institution shared with us a copy of a memo that he received from Joyceville staff. This memo stated that Cell Count (issue #29) was removed from his mail "as per direction from the Regional Administrator of Communications and Executive Services on behalf of the Deputy Commissioner". This information was not shared with PASAN directly so we have written to CSC Regional Headquarters for clarification.

In the past, we have been told that Cell Count is to be reviewed on a case by case basis but we do not know why our latest issue was returned to us.

This issue is long from over. We will keep you posted.

Hey folks,

This SARS thing has really disrupted a bunch of our programs in the Toronto area, as well the programs that I run at Maplehurst, OCI and most recently the Central East Correctional Centre in Lindsay. The good news is that there hasn't been an outbreak for 20 days which hopefully means that things will be up and running again by the time this goes to print. So if you have been wanting to attend a PASAN program and didn't get to, sorry about that, we'll be there soon. Once this SARS scare is done, we'll have regular programs at Maplehurst, OCI, CECC, CNCC and Hamilton-Wentworth. I've started working with a bunch of other folks in the Toronto area in a new group called the ID Prison Group. It's a group that we formed to address the issue of people having their ID destroyed by cops when they're getting arrested or ID getting "lost" while they're inside. This sucks for people (as you know), especially for people without a home to go to when they get out because it's hard to get any services or \$\$\$ when you have no ID. Check out the ad below for the group and if you have gone into prison with ID and came out without it for whatever reason, please let us know. At this point we can't replace all the missing ones but we need to start documenting when this happens so prison superintendents and cops can understand what a huge problem this is for folks and how often it happens. Take care, stay strong and come check out the PASAN programs when we come to your institution!

Mooky Cherian

Do you have your Identification?

You have the right to leave prison with the property you arrived with. This includes your identification.

If your identification has been lost or stolen or destroyed while in prison please contact us. We are documenting cases of stolen and/or destroyed identification in prison or on route to prison for a statistical survey.

Please call 416-921-8668 ext. 269 (Collect Calls)

Leave a message which includes your name and description of the incident:

- What identity documents were taken
- Where were they taken (location of incident)
- Date they were taken
- Who took the documents
- Where are the documents now (if you know)
- What reason was given for taking them

Thank you for your time.

ID Prison Group (Includes representatives from Street Health, PASAN, John Howard Society, PAID ID Project and Aboriginal Legal Service)

(We regret that we cannot replace ID at this time)

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PRISONERS' JUSTICE DAY ~ AUGUST 10 ~

A Brief History ...

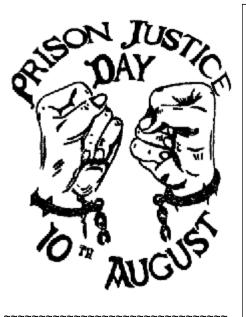
Since 1975, August 10th has been the day officially set aside for prisoners and their supporters to honour the memory of those who have died unnatural deaths in prison.

On August 10th, 1974, Eddie Nalon bled to death in a solitary confinement unit at Millhaven Maximum Security Prison near Kingston, Ontario when the emergency call button in his cell failed to work. An inquest later found that the call buttons in that unit had been deactivated by the guards.

Prisoners at Millhaven marked the anniversary of Eddie's death by fasting and refusing to work.

By May 1976, the call buttons had not yet been repaired. Bobby Landers was the next to die in one of those cells. With no way to call for help, all he could do was scribble a note that described the symptoms of a heart attack. The call for national support went out and Prisoners' Justice Day began.

What started as a one-time event behind the walls of Millhaven Prison has become an international day of solidarity. On this day, prisoners around the world fast, refuse to work, and remain in their cells while supporters organize community events to draw public attention to the conditions inside prisons.



EVENTS ...

PJD radio programming will be happening in Toronto on CKLN 88.1 FM, Aug 4 -9 evenings & all day on the 10th. If the library in the institution you are at would like a program guide &/or a cassette of a particular program please write to: PJD Committee c/o CKLN News Dept, 380 Victoria, Toronto, ON, M5B IW7.

Prisoners' Justice Day Update

August 10^{th} of this year will mark the 28^{th} Annual Prisoners' Justice Day. The event was started in 1975 to commemorate Eddie Nalon, who had died in segregation in Millhaven Maximum Security Prison the year before. Over time, the day has expanded, unfortunately reflecting the large number of deaths that take place inside prison walls.

Prisoners mark this day by fasting, refusing to work and holding memorial services. On the outside, community groups organize events in solidarity, both to honour the memories of the dead and to raise public awareness about the horrible conditions that exist within our prisons.

Right now we are in the process of organizing events for this year. Our planning committee currently consists of members of PASAN, Rittenhouse, The John Howard Society, JustUs, Aboriginal Legal Services of Toronto and the Anglican Diocese of Toronto Working Group on Justice and Corrections. The Diocese Working Group and The Bridge have organized an event during the day (noon to 6) at The Church of the Holy Trinity, which will include speakers, music, art and worship. Around 8:00 we will travel to the Don Jail where there will be more speakers, and the evening will end with a candlelight vigil to commemorate all of the people who have died inside prison walls.

If you would like more information about Prisoners' Justice Day, or would like to participate in planning the event, please contact Joan at (416) 972-9992.

Joan Rittenhouse - A New Vision

Prisoners' Justice Day is ...

... August 10, the day prisoners have set aside as a day to fast and refuse to work in a show of solidarity to remember those who have died unnecessarily – victims of murder, suicide and neglect.

... the day when organizations and individuals in the community hold demonstrations, vigils, worship services and other events in common resistance with prisoners.

... the day to raise issue with the fact that a very high rate of women are in prison for protecting themselves against their abusers. This makes it obvious that the legal system does not protect women who suffer violence at the hands of their partners.

... is the day to remember that there are a disproportionate number of Natives, African-

Canadians and other minorities and marginalized people in prisons. Prisons are the ultimate form of oppression against struggles of recognition and self-determination.

... the day to raise public awareness of the demands made by prisoners to change the criminal justice system and the brutal and inhumane conditions that lead to so many prison deaths.

... the day to oppose prison violence, police violence, and violence against women and children.

... the day to publicize that, in their fight for freedom and equality, the actions of many political prisoners have been criminalized by government. As a result, there are false claims that there are no political prisoners in north american prisons.

... the day to raise public awareness of the economic and social costs of a system of criminal

justice which punishes for revenge. If there is ever to be social justice, it will only come about using a model of healing justice, connecting people to the crimes and helping offenders take responsibility for their actions.

... the day to renew the struggle for HIV/AIDS education, prevention and treatment in prison.

... the day to remind people that the criminal justice system and the psychiatric system are mutually reinforcing methods that the state uses to control human beings. There is a lot of brutality by staff committed in the name of treatment. Moreover, many deaths in the psych-prisons remain uninvestigated.

August 10, 2003 marks 28 years of Prisoners' Justice Day

Prisoners' Justice Day Committee Vancouver - <u>august10@vcn.bc.ca</u>

Some of the people we remember on August 10:

EDDIE NALON, BOBBIE LANDERS, STEVEN ABBOT, MARK ANTHONY ACERA, CLARENCE FRANCIS ADAMS, TERRY ROY ADAMS, ROCKY ALBERT, TIMOTHY ALBERT, GARY ALLAN, BRUCE ALLEN, MICHEL AMYOT, H.J. ANDREWS, RANDALL ANDREWS, MAXWELL ANSAH, BRUCE ARCHER, HERBERT ARCHER, PITSEOLAK ARNAQUQ, ALLAN EDWARD ARONSON, DOLLARD ARSENAULT, ANDRE ARSENAULT, GILLES ARSENAULT, GARTH ROBERT ASHICK, ROBERT ASSOGNA, MARY ASTAFOROFF, MARCEL AUBIN, RAYNALD AUCLAIR, MOSES AUPALUKTUK, JOHN GEORGE AUXI, BRYAN-ADAMS AWASISH, RAY BABCOCK, ROBERT BABIN, PAUL BACHYNSKI, THOMAS JAMES BAILEY, P. BAKER, MARK NEIL BAKER, OSAMA MOHAMED BAKY, ABDEL BAKY, J.A. BARNETT, WAYNE DOUGLAS BARRICK, GEORGE BARRON, LOUIS BARTLEY, BOBBY BARTON, HENRY BAUM, PAT BEAR, WALLY BEAR, JOHNY BEAR, PHILLIP ELLIOT BEARSHIRT, ALAIN BEAULE, ARTHUR BEAUVAIS, JACQUES BEDARD, PAUL BELIVEAU, CHRISTOPHER BELL, JAMES E. BELL, ROBIN BELL, WILLIAM BELL, JACQUES BELLEMAIRE, PAUL BELLIVEAU, JACK BELLIVEAU, CLAUDE BENARD, JOSEPH THOMAS BENDELL, CONSTANCE BERARD, BERNARD LARRY BERGESON, MICHEL BERNARD, COREY ALLEN BERTRAND, GORDON WILLIAM BIDNELL, DONALD PHILIP BIGG, CHARLES BILLINGS, FERNAND BILODEAU, TERROLD BLACK, JERRY BLAIR, FARNAND BLAIS, DONALD WALTER BLEANEY, ERWIN BLIGHT, LEON BOILY, GERRY BLOUIN, JAMES BOLAND, JAMES BOLYANTU, LEANORE LEON BONNEVILLE, ROBERT A. BONOGOFSKI, GUYLAIN BORDELEAU, ROBERT GEORGE BOTTINEAU, CHRISTIAN BOUCHARD, ROGER JOSEPH BOUCHARD, IRENEE BOUCHARD, GAETAN BOUCHARD, WILLIAM BOUCHER, RENE BOUDREAU, JACQUES BOULAY, JACQUES BOULE, JAMES WALTER BRADLEY, DONALD RICHARD BRAGAN, SOLOMON BRASS JR., WALTON BRASS, EARLA STEPHANIE BRASS, DENIS BRATFORD, BYRON BRAY, DENIS BREARD, BYRON BRETT, PETER BRIDEAU, KENNITH CRAIG BRIGGS, SPENCER BRILTZ, MICHAEL BRNJAC, DAVID NATHAN BROCKMAN, DONALD BROKEN, DANIEL BROUILLARD, ROBERT BROWN, GLENN BROWN, ROBERT BROWN, GODFREY PAUL BROWN, PAUL EARL BROWN, IEAN BUISSIERE, J. BYBYK, ROSS ARNOLD BYERS, DAVID CABANA, WILLIAM CHARLES CADIOUX, JAROD WAYNE CALDER, JAMES CALLUS, DWAYNE CAMERON, PETER CAMPBELL, GERALD ROBERT CAMPBELL, PETRONILO CANDELARIA, DENNIS RALPH CARDINAL, RICHARD IRVING CARGYLE, RONALD CARLSON, JOHN CARMICHAEL, JOSEPH AUGUSTUS CARON, PAUL ANTHONY CARSON, BETTY CASE, LESLIE CASEY, ROBERT CASTILLO, GERARD CASTILLOUX, CECIL ELLWOOD CAVERLEY, GUY CHAPDELAINE, ANDRE CHARBONNEAU, RICHARD CHAREST, ROGER CHARRON, RAYMOND CHARTRAND, ELLIS FORD CHASE, JOE CHESTER, BERNICE EVA CHIEF, ROBERT CHOQUETTE, MARVIN BLAIR CHRISTENSEN, FREDERICK R. CHRISTIE, GRANT CLARK, OHN CLIFFORD, GORDON COE, CORY COLE, FRED BRADFORD COLE, MEREDITH COLEMAN, DENIS COLIC, FRANK COLLINS, TYRONE CONN, ROBERT CONSEY, JAMES EDWARD CONWAY, JOHN EDWARD CONWAY, RODDY COOK, JAMES BENTLEY COOK, DAVID COPELAND, RICHARD COPENALE, CALVIN CORBIERE, MARC CORBIN, GUNTHIER CORDES, FREDERICK COREY, EARL COTE, VICTORIEN COTE, ARLENE COTE, CLAUDE COTE, JACQUES COULOMBE, NORMAND COURTEAU, NOEL FRANCI COURTOREILLE, ANDRE COUTURE, GLEN ALAN CREASEY, JEAN CROTEAU, RAYMOND CROWE, ROGER MILES CUMPSTONE, GORDON ROBERT CURRENCE, DONALD J. CURRIE, CAREEN DAIGNEAULT, RAYMOND W. DANIELS, MICHAEL DANIELSON, DANIEL DANILUCK, PAUL DAOUST, VIATEUR DARAICHE, GUY DAVIS, WAYNE DAZZ, FEROZ KOTUB DEAN, ALEX DE JESUS, STEVEN LEO DEFORGE, MARTIN DERESTI, SYLVAIN DESFORGES, NAPOLEON DESROSCHES, RANDOLPH LYLE DEWAN, JAMES DEYOUNG, GORDON DIDNELL, GUY DIOTTE, ANDRE DIXON, BENJAMIN DIXON, RAY DOIRON, PIERRE DOLLARD, BRENDA DONOVAN, JOHN DORIA, BRADLEY DOUGHTY, GREGORY DUCHARME, FERNAND DUCHAUSSOY, DAVID JOSEPH DUFOUR, RON DULMAGE, JEAN DUMONT, JAMES EDWARD DUNCAN, MYLES KEITH DUNKLEY, JAMES ROBERT DUNLOP, JAMES ALLEN DUNN, TRUNG KY DUONG, JACQUES DUPRAS, GERALD DUPUIS, KARNEL SINGH DUSANJ, REGIS D'AMOUR, ROSS EARLE, SHAWN EARLE, KENNETH EDWARDS, SAMUEL SIDNEY EL SAFAIDI, THOMAS EDWARD ELLEY, ROBERT A. ELLIS, ROSS ELWORTHY, WALTER EMKEIT, WILLIAM ENGEL, LEONARD JOHN ENGELL, JAMES OLIVER ERDMAN, KEVIN ETHIER, ANTHONY EZZO, MEFUS FASTUGNAK, DENISE FAYANT, MICHAEL FAZEKAS, PHILIP JOSEPH FERGUSON, FRANCOIS TALON FERLAND, DOUG FETTERLEY, JOSEPH FIDDLER, ALEX FINLAY, DAVID A. FISHER, LARRY BRIAN FISHER, ROBIN CACEY FISHER, ALEXANDER FITZPATRICK, TERRY FITZSIMMONS, G. FORSYTHE, BARRY FORSYTHE, CLYDE JEFFREY FORTIER, PHILLIPE FORTIN, ERNEST EDWIN FORTT, PATRICK STANLEY FOUNTAIN, ROBERT FRASER, CHARLES FRASER, JOSEPH FREDERICKS, DENIS FRENETTE, ROBERT WILLIAM D. FRISBEE, SERENA FRY, IRVING DONALD FUNK, ROBERT GAGNE, REGIS GAGNON, JEAN-CLAUDE GALLAND, KEITH MANSEL GALLOP, JANISE GAMBLE, MARILYN GARDENER, GORDY GARGHTY, GARY GARNETT, PATRICH MICHAEL GARVE, PETER GATTOLA, YVON GAUDREAU, DENNIS GAUTHIER, GERRY GAVIN, JAMES GAY, EDWARD GEDDES, MICHEL GENDRON, YVES GENDRON, ROBERT GENTILES, VINCENT MICHAEL GEORGE, NORMAN GERRARD, RALPH ERNEST GERVAIS, IAN GIBBS, CARL EDWARD GIBSON, DONALD GORDON GILLARD, LUCIEN GERALD GIRARD, MARCEL GIRARD, JEFFREY ALFRED GLADEAU, WILLIAM GOAKERY, MICHEL GODBOUT, BRIAN GARY GODFREY, ALAN GONZALEZ, CHRISTOPHER GOOD, GERALD GOSSELIN, ROGER GOSSELIN, ARMAND ALBERT GOYETTE, JASON CHRISTOPHER GRAHAM, TERRENCE GRAW, HARRY HALL GREEN, SIMON GRENIER, PAUL YVON GRENIER, CHRISTIAN GRENIER, JOHN GRIFFITHS, DANIEL GRIMARD, JACQUES GROSSO, CHRIS GRULINSKY, JOHN GUITAR, ROBERT GULASH, ROY THOMAS GUNDERSON, MICHAEL LORNE GWILT, DONAT HACHERY, KAMIKAR SINGH HAER, DENNIS HAILLES, WILLIAM GEORGE HALEY, MARC HALLE, RICHARD HAMILTON, ROBERT HANSON, LORNE HANSON, JAMES L HARRIS, MICHAEL HARRIS, JAMES HUGH HARRIS, JAMES HARVEY, ROBERT HASSIM, BENARD HEBERT, ALLEN DOUG HENDERSON, CLARENCE HENNEBURY, BONNIE HENRY, FRANCOIS HERBERT, PETER HERNEY, FRANCOIS HEROUX, KEITH ROY HESS, LARRY DOUGLAS HILL, GORDON HILL, STEVE HILL, CARL HINES, KENNETH HISCOX, ROBERT HISTED, WILLIAM HOLDEN, BARRY LYNN HOLM, EDWARD HOLNESSY, TOM HOLTOM, CHRISTOPHER HOOD, DOUG HOOEY, ROBERT NORMAN HORNING, JOHN HORSEMAN, IVAN HORVATH, MICHAEL R HORWOOD, EUGENE TRUMAN HOUGH, EARL HOULE, LOUIS HOULE, THOMAS SAMUEL HOUSTON, CHARLES ALLAN HUGHES, ROBERT GARY HUME, DOUG HUTTON, CLARENCE JACE, JAMES PATRICK JACOBSON, ROY JOHN JENKINS, JOHN BRADY IENKINS, OLIVER JINKERSON, LAURENT JODOIN, DEVENDER JOHAL, KELLY JOHNS, RALPH S. JOHNSON, AMBROISE JOHNSTON, ROGER ALLAN JOHNSTON, ALAIN JOLY, GARY JONES, LORNA JONES, WALLY JOSEPH, LASZLO KATONA, TERRANCE KEELER, RODNEY KEEPINS, TEDDY KEG, ELMER KENNINS, BRADLEY KERSWELL, RIAZ KHANZADA, JOSEPH BATISTE KILROY, CHARLES H. KING, HARRY KITCH, WALTER KOLTUCKY, AUGUST KOMAC, DARWIN MICHAEL KOO, HELMUT KRAEMER, WINNIFRED OLIVE KRILL, ROY KULLY, JAMES LABARGE, MICHEL LABONTE, JEAN LACHAPELLE, MICHEL LAFLEUR, VINCENT EVERETT LAIRD,

GLENDON LAKING, RAYMOND LALIBERTE, JACQUES LALONDE, KATHERINE FRANCINE LAMB, DEL LAMBERT, DIALLO MAMADOU LAMINE, GLEN THOMAS LANDERS, ROBERT WILFRED LANDRY, DEAN THOMAS LANGFORD, ROLLAN LAPOINTE, MICHEL LAPORTE, JOCELYN LAROCHELLE, PERCY LAROCQUE, JULIEN LAROCQUE, M. LARONDE, HENRY WILLIAM LARONDE, DANIEL LAROSE, KEVIN LAURILA, JACQUES LAVASSEUR, DAVID WALTER LAZARAWICH, DONG LE, DONALD LEBLANC, RANDY LEBLANC, WILFRID LECLERC, ERNEST ALBERY LEDOUX, MARIE LEDOUXE, DOUGLAS HAROLD LEE, ANDRE LEFEBRE, NORMAND LEFEBVRE, JEAN-GUY LEGAULT, ROMEO LEGAULT, ERIC LEIGH, JEAN LEONARD, JACQUES LEPAGE, DENNIS ENDEL LEPIK, LUCIEN LEROUX, ANDRE LEVESQUE, VERNON LEVY, LOUISE ANN LEWICKIE, JOHN LEWIS, HARRY LEWIS, EARL LEWIS, DOUGLAS LITTLEJOHN, GEORGE LOCKE, MICHAEL JOSEPH LONG, GEORGE LONGMAN, LOUIS LONGPRE, JAMES LONNEE, KEITH LAWRENCE LOTSBERG, GARY LOW, ROY ARMSTRONG LOWTHER, HAROLD J. LOYER, RICKY LUO, IAN STEWART MACASKILL, JODY MACAULLEY, HECTOR DANIEL MACDONALD, KENNETH ALLAN MACDONALD, VINCE MACDONALD, JANICE LYNN MACDONALD, JAMES MACHUM, JOSEPH MACKENZIE, BOB MACKENZIE, WILLIAM DOUGLAS MAJURY, LARRY MALLAT, PIERRE MALTAIS, THOMAS MANUAL, REAL MARCEAU, SERGE MARCOUILLER, JACQUES MAREOUX, JOHN MARLOW, MARIO MARQUIS, ALFIE MARTIN, R. MARTIN, YVON MARTIN, JOHN MASON, LOUIS MASSE, JACQUES MASSEY, HERMAN MATHAES, MARTIN RUSSELL MATHER, CHARLES MATHEW, ROBERT MATICE, STEVEN MATICE, MICHAEL MATTHYS, DENNIS MAZE, GEORGE MCATEER, JOHN MCBRIDE, EDWARD MCCAVE, BARRY WILLIAM MCCLURG, SHAUN MCCORD, PAUL ANDREW MCDONALD, GERALD MCDONALD, DAVID SIDNEY MCDONALD, A.J. MCDONALD, STEVEN D. MCDONALD, JOSEPH MCDONALD, WAYNE JAMES MCDOUGALL, JOHN MANLEY MCDOWELL, SHANE MCEACHERN, SHAWN MCEWAN, JOHN ALEXANDER MCGARRY, LEONARD JAMES MCKAY, HUGH DAVID MCKINNON, ROB MCKINNON, GEORGE MCLEAN, MICHAEL MCLELLAN, STU GEOFFREY MCLEOD, DONALD MCMILLAN, ALLEN WENTWORTH MCMULLEN, TODD MCMULLEN, RONALD MERASTY, JOSEPH MERCIER, PIERRE MESSIER, DANA METOSOS, LORIE MILES, HAROLD MILLER, GUY MILLETE, JAMES MILLS, TIMOTHY MILNE, LEONARD MIVILLE, JOHN CLEMENT MOINY, SERGIO MOKINO, VAUGHN MONDOU, JUAN FRANCISCO MONTERROSA, MARLENE MOORE, WILMORE MOORE, THOMAS MORDEN, PAUL MORDEN, PHILIPPE MORIN, GERMAIN MORIN, HUBERT E. MORRIS, RICHARD MORRISON, ANDY MORZIAK, FRANCOIS MOUSSEAU, JOHN MROZINSKI, ALLAN PHILLIP MUCKLE, DAVID MUIR, DEREK MURPHY, HARRY ALEXANDER MYER, BERTRAND MYRAN, RENALD NADEAU, EDWIN NAJERA, JOHN FREDERICK NEILSON, A. NELLIGAN, GARY NEUFELD, DAVID WILLIAM NICHOLLS, KIM NIELSON, ROBERT DOAN NIVEN, JIMMY NOADE, GARY JOHN NUSSIO, KUWANT SINGH OBEROI, DONALD OBREY, ISABELLA FAY OGIMA, RICHARD OIMETTE, ROBERT HARRY OIMETTE, E. M. OLSON, GREGORY OPSTINIK, DONALD O'BREY, ROBERT O'DELL, JOHN HENRY O'HARA, TOMMY O'KEEFE, EBAN JAN PAGE, JOSEPH PAHPASAY, DWIGHT ARTHUR PALENDAT, LARRY PARNEY, SERGE PASGAGNE, JOEY PASSALELPI, MARC PATENAUDE, ROBERT PATTISON, JOHN FRANCIS PAUZE, G. PAYNTER, LARS PEDERSON, DEBRA PELLETIER, ROBBIE PELLETTIER, DOMINICO PELLICANO, CLAUDE PELOQUIN, GILES RAYMON PERRAULT, CHRISTIAN PERREAULT, JEAN PERRON, ARCHIE PETE, EDWARD PETERS, SEYMOUR PETERS, BARRY PHILLIPS, LOUIS PICHETTE, SYLVAIN PICHETTE, CARLSON PIERCEY, JOE PITT, MICHAEL WAYNE PLATKO, DONALD POORE, STEVEN POUTSOUNGAS, LEONARD PRESCOTT, WILLIAM PREST, CLEMENT PREVOST, RICHARD PRIBAG, DANIEL PROBE, ERNST PROPHETE, ARNOLD PRUNER, LESLIE PURVIS, MICHEL QUESNEL, NORMAND QUINN, DON RAAFLAUB, ABDUL RASOUL RAHEMI, BIKASH RAI, ANDREWS RANDALL ARNOLD THANE RAPHAEL, LARRY RATHGABER, DOUGLAS RATTRAY, PASQUALE A. REDAVID, RONALD REDCROW, ROBERT WILLIAM REID, PAUL EDWARD REID, PETER MARTIN REILLEY, RICHARD REYNOLDS, LUCIEN RICHARD, MAUREEN SHIRLEY RICHARD, JOSEPH RICHARD, NORMAND RICHER, WILSON RIDEOUT, NIKI RIVARD, ANDRE ROBICHAUD, SERGE ROBIDAUX, RICHARD ROCHE, RAYMOND ROCHEFORT, CONRAD ROCHETTE, GERMAIN ROCHETTE, CAMILLA ROCHON, PAUL AURELIO RODRIGUES, DONALD CORMACK ROGER, AUBREY ROLFE, ALLAN ROSKA, TONY ROSS, CLARENCE ROSS, DONALD JOSEPH ROSSETTI, ROBERT CHARLES ROWLES, RICHARD THOMAS RUBY, DANIEL RUEL, GERALD RUSHTON, DAVID SABOURIN, PAUL SABOURIN, WILLIAM R. SACKVILLE, ROY HOWARD SAM, JEAN GUY SANSOUCY, HELIO SANTOS, ROBERT SATIACUM, JOHN HENRY SAUNDERS, ANTONIO SAURO, SANDRA SAYER, LESLIE SCOTT, JOSEPH DAVID SEGAL, GEORGE SEGGIE, JEAN SENECAL, RANDALL SEXSMITH, SHAUN SHANNON, MARK SHANNON, PATRICK SEAN SHEA, ROBERT SHEPHERD, GARY SHIELDS, DICK SCHIERE, JAMES SHOEMAKER, GILLES SIMARD, RANJODH SINGH, STEVEN TREVOR SIPLE, NORMAN SKEDDEN, BRONKO SKERL, GARRY SLOBODA, BARRY HENDERSON SMITH, FLORENCE SMITH, FRANK SMITH, FRANCIS SMITH, MICHAEL CLIFFORD SMITH, JOHN CHRISTOPHER SMITH, GASTON SOUCE, MURRAY B. SPARK, CRAWFORD SPARVIER, DANIEL SPILCHUK, DONALD ST. GERMAINE, RANDALL STADNYK, DARREN STAPLETON, JAN JERZE STEINKE, FRED C. STEPHENS, DAVID EDWARD STEVENSON, GERALD STEWARDSON, ROBERT WILLIAM STEWART, GLEN STEWART, JIMMY STEWART, CHARLES BENJAMIN STILTZ, CARL STONECHILD, MARCEL THOMAS STRAND, DENNIS STRATYCHUK, MATHEW STRUKEL, DAVID WILLIAM SYKES, ANDRE TALBOT, GORDON HENRY TAYLOR, PAULETTE TAYPOTAT, DAVID TEED, KRISTOPHER THALER, GASTON THERIAULT, LEONARD THERIAULT, EARL HOWARD THOMAS, WAYNE MAURICE THOMPSON, ROBERT JOSEPH THOMPSON, JOHN THOMPSON, AGNES THOMPSON, GERRY TILLEY, RENAUD TOULOUSE, MICHAEL WILLIAM TRAN, ROGER TREMBLAY, BRUNO TREMBLAY, PIERRE TREMBLAY, WILLIAM TUER, WILLIAM RICHARD TURCOTTE, ROBERTO ENRIQUE TURJILLO, ANTHONY TURNER, MARK CLAYTON TYLER, LARRY UNGER, KENNITH GUY VANZYP, JOHNATHON JAMES VARDY, DARREN VARLEY, RICHARD VIENOTTE, SANDO VIOLA, PAUL VIOLET, BIMBO VOTOUR, LYNN WABASSO, RALPH WILLIAM WABOOSE, ARTHER GERALD WADLOW, MICHAEL WILLIAM WALKER, ROBERT WALL, LYLE WAMBADISKA, KENNY WARREN, DAVID WARRINER, ARNOLD WATCHESTON, LARRY WATERS, JAMES WATTERS, JOE WAZUK, ROBERT LEE WEATHERBEE, RONALD WELSH, COREY WENGER, HUDSON WEST, BRIAN WHIFFEN, WALTER WHIPPLE, JAMES LELAND WHITE, ROBERT WAYNE WILLIAMS, RICK. WILLIAMS, STANLEY WILLIAMS, SCOTT WILLIAMS, RALPH WILLIAMS, JOHN WILLINGTON, ROBERT WILLIAM WILTON, J. WILTSHIRE, NOEL WINTERS, LUCAS WOJTOWICZ, WOLFHEAD, JOHN WOLTUCKY, W.G. WOOD, JAMES ELMER WOODSIDE, BRIAN ORVILLE, DEAN WYATT, SHOJI YAMAZAKI, VINCENT YELLOWHORN, ROBERT YEMEN, PAUL DWIGHT YOUNG, DONZEL YOUNG, TROY DARRELL YOUNG, JAN ZABOREK, VACLAV ZAVADIL, MICHAEL ZIMA MICHAEL ZUBRESKY, WALTER ZURBILO ...

This list includes deaths in federal and provincial prisons, remand, lock-up and prisoners on parole.

- THIS LIST IS NOT COMPLETE -

CELL COUNT

Behaviour Modification

Recently a couple of newspaper articles have surfaced and refer to high level meetings between the Correctional Services Canada (CSC) federal guard union representatives and wardens discussing methods for further punitive restrictions on prisoners. Most recently, one written by Judy Monchuk (CP) speaks about segregation units being overfilled and about 'deviant or rebellious' prisoners requiring more restrictive 'units' and punishments and finally, more 'rehabilitative' correctional programming. She indicates that they are looking to increase restrictions on the actual physical movements of prisoners and taking away televisions and computers as well as hobby craft privileges.

What Mrs Monchuk's article doesn't reveal is that the activities they slate for removal are either recreational or educational and certainly not contributive to the inherent problems in a prison environment - these activities are adopted by prisoners who wish to spend their time quietly and productively. These articles also fail to indicate what miraculous correctional programming the CSC are considering to "rehabilitate marginal, deviant or rebellious" prisoners. It is interesting to note that the only programming the CSC is currently able to offer prisoners are courses that span a staggeringly brief 6 weeks (of half-days), in theory these programs are to change a persons life.

By the way, when speaking of segregation in a Canadian penitentiary the word doesn't just imply solitude - it is 23 hrs/day lockup and sometimes 23 1/2 his lockup. It begs the question: "what movement do they (CSC) feel needs restricting?" Prisoners, in most cases, are placed in segregation as a punishment, or they have requested protective custody fearing for their safety. Segregation is being placed into a small cell locked away from human contact, among other restrictions and losses of privileges. Whether segregation is the result of punishment or fear for one's life, it is hardly likely they 'want' to be there. (I mention this simply because the articles imply that segregation is a 'soft touch' that unruly prisoners covet).

In an effort to lend credence to the premise that 'prisons are out of control', the articles refer to the amount of charges that federal corrections guards have issued to prisoners over a 2 yr period, but it doesn't indicate how many charges were dismissed, dropped or resulted in 'not guilty' verdicts. It also does not refer to the patterns of increased charges being laid during the Christmas holidays as a tried and true method of increasing paycheques through the resulting overtime. Nor does the article refer to the periods of labour negotiation during which the goal is to orchestrate incidences which will, as the theory goes, increase the bargaining power of the union. Nor does the article refer to the certain staff members whose continued abuse of authority gets them shuffled around the system as a result of being troublemakers. This is a similar type of occurrence as that of priests that were concealed and shielded by their 'brotherhood', and subsequently shuffled back and forth between parishes, finally resulting in the scandalously late 'discovery' of child sex abuses. It is inconceivable to me that the press has forgotten the many charges CSC staff members have incurred over the recent years ranging from drug smuggling, rape, stalking, kidnapping, fraud and the sale of drugs, alcohol and institutional transfers.

An indication of the propensity for violent and unlawful behaviour was underlined when CSC frontline staff members physically assaulted their union leader as he left high-level government and union meetings. This physical attack was perpetrated as a result of taking a deal that they (CSC guard union members) felt was a 'sell out' and the assault was committed in full view of news reporters and cameras covering the meetings. Could that event not leave anyone questioning the professionalism of some of the staff? If they would attack one of their own in full view of news cameras what guidelines and laws do they respect when protected by the cloak of secrecy that surrounds CSC?

I've served 2 decades in prison and out of that time I've had a total of 18 weeks (of half days) in CSC programs. Twenty years ago I started this sentence in Millhaven Penitentiary when there was no electricity in the cells - there were no tv's, no radios, no computers. There were however, a lot of suicides/suicide attempts, escapes/escape attempts, stabbings, riots, lockdowns, beatings and murders. The number of these types of incidents have gone down due to the introduction of a somewhat more thoughtful legislative approach to imprisonment. However, as eloquent and enlightened as the legislation is it can only impact the day to day running of the prison system to a limited degree when the frontline administrators and workers undermine the spirit of the law.

As such Canadian prisons are still plagued with a lot of systemic problems. However, time has shown (to those paying attention) that more restrictions and more punishment only serve to create tensions and an escalation in 'rebellious behaviour, unfocussed rage and incidences of violence. Punishment in itself is not an enlightened, thoughtful or intelligent approach to encourage or coax change from people. An argument can be put forward that guard unions cynically desire more restrictive and punitive environments in order to escalate problems which in turn will justify their size and pay scale. What Canadian prisons really need are more balanced and fair-minded approaches to the human condition. We need to move away from the narrow-minded punishment mindset and towards an enlightened intelligent response to the social problems that lend themselves to sending more and more young people towards life in prison. We need to have psychologically balanced and educated people following this country's legislation while working in the prison setting. We need to use the restrictive measure of imprisonment as a last resort to violations of the social contract. In the meantime, treating people even when they are in prison with consideration and respect is the only way to positively impact their behaviours and choices.

Driving The Point Home: A Strategy for Safer Tattooing in Canadian Prisons

By Pete Collins, Giselle Dias, Meigan Dickenson, Rick Lines, Lilly Vidovich

The following are the recommendations that came out of the report submitted to Correctional Services of Canada for their review and consideration. It is our understanding that CSC NHQ is seriously looking at tattoo pilot projects and are currently coming up with their own recommendations.

Based upon the research and the prisoner consultation process, we are making the following recommendations to the Correctional Service of Canada.

- I. Tattooing should be decriminalized.
- CSC should authorize the establishment of pilot safer tattooing projects in each of its five administrative regions. Each project should be housed in a specific room in each institution. At least one of the pilot projects should be in a women's institution. CSC should consult with prisoners and community-based organizations in establishing these projects.
- 3. Facilities for safer body piercing should be provided within the pilot projects.
- 4. Inmate Committees in each institution should be authorized to purchase the equipment and materials for the safer tattooing and body piercing projects from their own funds, and be responsible for paying for the ongoing maintenance costs of the equipment.
- Project funding should be sustained by the prisoners obtaining tattoos and body piercing from the project, who themselves pay for tattooing and body piercing services out of their personal savings accounts.
- 6. The safer tattoo and body piercing project should consist of the same items as a tattoo and body piercing shop in the community.
- 7. Tattoo artists should be drawn from the general prisoner population and selected by the Inmate Committee.
- Tattoo artists should be trained in safer tattooing practices, HIV and hepatitis C prevention, infection control and universal precautions, and should be given an opportunity to learn all aspects of their trade including body piercing.
- 9. The safer tattooing and body piercing project should be accessible to prisoners.
- 10. Prisoners should have the *option* of seeing Health Care before and after receiving a tattoo or body piercing.
- All safer tattooing and body piercing projects should be inspected by the local Public Health Department.
- Sterile tattooing and body piercing equipment and materials must be available for purchase by prisoners outside of an

Statement on the new Youth Criminal Justice Act

On April I 2003 the Youth Criminal Justice Act (YCJA) replaced the Young Offenders Act (YOA) in Canada.

The new act has the potential to lower the number of girls who are jailed since it says that youth should only be jailed as a last resort. Right now Canada imprisons more youth per capita than any other western country including the United States.

While we are hopeful about the new act's potential we are also seriously concerned that the act erodes privacy rights of girls, could actually increase the number of youth sentenced as adults, and makes it possible for the government to claw back legal aid money from parents (mainly single moms).

While watching youth court for over two years we have seen that girls are incarcerated very often for breaches (breaking a condition/s of their bail or probation) especially if they have a drug addiction. We see girls with addictions being jailed "for their own protection" by judges and crown lawyers who want to protect them from sexual exploitation and stop them from using drugs. We see girls being forced into treatment through bail and probation conditions and we have seen that if girls leave this treatment they are charged with breaching their "attend residential treatment" or "reside" condition and often jailed.

This is where the YCJA comes in. The new act says that judges can only jail youth for serious breach violations. If this is implemented then less girls will be jailed for their own protection since breaking a curfew or leaving residential treatment are not serious breaches. JFG will be watching youth court to see what happens.

We have reasons to be skeptical: under the YOA youth weren't supposed to be jailed as a substitute for child protection, health or other social measures and yet girls were jailed to stop them from using drugs (health issue) and protect them from sexual exploitation (child protection issue).

In the YCJA the word "health" has been removed from that list. This means that jail could in theory be used to substitute health measures including drug treatment and defence lawyers would have a harder time arguing that this is illegal.

It's disturbing that under both the YOA and new YCJA youth could be sentenced adults at 14 (for murder, attempted murder, manslaughter, aggravated sexual assault).

It's also disturbing that under the YCJA there is a new category of an offence called a "third serious violent offence". Someone as young as 14 who is charged under that category can be sentenced as an adult. We, and many other advocates for people in prison, are very concerned about how broad and undefined this category is. We are worried that girls who are charged with three lower-level assaults for example (for things like slapping someone) may be sentenced as adults under the "third serious violent offence" category.

Justice For Girls www.justiceforgirls.org



<u>Concerns Arising Out of the</u> <u>Youth Criminal Justice Act</u> (excerpts)

Aspects of the Youth Criminal Justice Act Supported by the Sparrow Lake Alliance

- support for the increased use of alternative measures;
- limiting the use of custody for non-violent offenders (although this is undermined by the "catch-all" phrase;
- the focus on reintegration and case management;
- the fact that transfer hearings will occur after guilt has been established, thereby avoiding transfer on the basis of worst-case allegations;
- The proposal for treatment as an alternative would be very useful if the resources to support it existed.

Aspects of the Youth Criminal Justice Act that concern the Sparrow Lake Alliance

- The act emphasizes the protection of the public but refers to reintegration and rehabilitation as the key means of achieving this. How do we reconcile the inherent differences in approach that result from these two often competing principles?
- In many respects, the Act treats children as if they were adults, without recognizing their developmental levels, family history and agerelated vulnerabilities. Examples of this include the possible admissibility of nonwavered statements and lowering the age of presumptive transfer.
- We continue to have concerns about the overall safety of youth in adult facilities.
- Are the treatment-type options discussed in the YCJA feasible? Or are they mere windowdressing (as they would be if they come without resources? -- or if they are left to the discretion of the provinces?). Could the same ends be achieved by providing the provinces

with appropriate funding in the appropriate child welfare or mental health contexts?

- Will youth be stigmatized and families alienated by more laxity in the public release of identification and records?
- Are parents being excluded from the process on one hand but given more responsibility on the other?
- Are provincial directors, including superintendents and other personnel at youth facilities, the appropriate decisionmakers with respect to the most appropriate level of custody
- Despite the YCJA's best intentions, will we end up with more youth in secure custody than in the past?

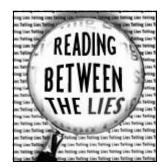
Youth in Adult Jails

The concept of youth under the age of 18 in adult jails continues to be a disturbing one. Youth are especially vulnerable in the adult corrections system when exposed to adult inmates and "adult" guards. The James Lonnee inquest highlighted the risks to youth from peer violence condoned by "adult" guards. The YCJA allows youth to be placed temporarily in adult custody, and presumes that older youth will be in adult custody. At the inquest into the death of James Lonnee, evidence was heard which illustrated the negative, harmful and destructive influences of the adult prison culture on the young offender corrections culture. Where the two were mixed, youth were simply unsafe, were set up against peers and staff, and were victimized. Tragically, James was killed while in segregation with another youth in an adult facility staffed by adult guards. The recommendations generated by the inquest speak to the importance of stripping youth facilities of the adult jail culture, and of having dedicated youth facilities with staff trained in and understanding of the developmental needs of youth.

The weak and the young are the most vulnerable prey in the adult jails. Youth in adult facilities will have to be kept in segregation. Programming in segregation is virtually "nil". If integrated, the youth will have to prove himself to the adult population and will be at risk of physical, verbal and sexual abuse. This is not in the best interests of children. The practice of housing youth with adults should be abolished in order to conform with the spirit of the UN Convention on the Rights of the Child (despite Canada's reservation) and the notion of primacy of children in our society.

The Sparrow Lake Alliance

Visit www.sparrowlake.org for the complete Draft Submitted to: The Standing Committee on Justice and Human Rights



Young Woman in Prison Speaks Out

I have made various plans and backup plans for my fantasized future only to be met with resistance. My question is why? Is this not an environment that claims to have a duty and desire for rehabilitation? Apparently only when it is suitable for my keepers to extend this courtesy. I am taught to "channel" my anger and frustration appropriately through things like journal writing. So here I am an inmate but not just an inmate, I am an inmate said to have great potential and intelligence, but is it only when I speak the language that asks no questions?

I am said not to be a credible individual due to my history of "lying and manipulating," but why am I credible when it comes to stating praise for the programs I have completed through this system? I have to have good things to say because you need to use me as your promoter for your own manipulation tactics, the ones that society accepts through their delusions of what my rehabilitation is all about. So where was my rehabilitation when I watched my friends get the shit kicked out of them by uniformed guards? These are the upstanding productive members of society who are employed under this so-called oath of dedication to my rehabilitation? I am sorry if I appear confused, wouldn't you be? Where, I ask, was the "rehabilitation" when my friend was assaulted and humiliated by male guards who had to remind her just who was in control?

Ok, I get it, you can justify this to her family by saying you had to use any force necessary to ensure the good order of the institution. She was the aggressive one huh? She cut herself to express the pain she felt inside her heart and you respond to her in this way? I will know better for the next time. It is not ok to feel. Security first, rehabilitation second. But I am in jail right, so what do I expect? Well I will be more than happy to respond to this question by saying I expect you to meet only one thing set forth not by me, but for me. I expect you to feel your oath in being dedicated to my rehabilitation. I understand this to be just a little too much to ask as this would also require a level of humanity to be integrated into your manipulative

ta ctics

The bigger and more recognized you become to society, the smaller and more insignificant and forgotten I become. I gave one explicit example of my questionable rehabilitation. I can not prove or provide evidence that what you did was not only unnecessary, but wrong. I experience such deep frustration sitting every day with thoughts of all the subtle and unrecognizable abuses that occur every day.

So what of this? Another time maybe. So this is to be what you would like to call my rehabilitation huh? Well, no thanks. I have found my own form of rehabilitation that does not impinge on anyone's right as a human being, especially my own.

While being incarcerated, spirit means a lot. It defines who we are as people and I believe that a person should hold onto their spirit while they are in prison. Don't give in to Corrections and lose that spirit, because that would be giving them what they want, another "programmed robot."

They can strip me of my rights, they can take every material possession away from me, but they can not and will not take away my spirit.

An 18 year old incarcerated young woman, Burnaby Youth Secure Custody Centre, April 2003

NEEDLE-EXCHANGE PROGRAM IN FEDERAL PRISONS BACKED

Commons Committee Wants To Curb High Rate Of HIV Infection In Addicts

OTTAWA– The Commons Health Committee has come out in favour of needle-exchange programs for drug users within federal prisons to curb high rates of HIV infection among prisoners.

The controversial recommendation in a report tabled yesterday is couched in technical language, but committee members confirmed the intent.

It calls for "harm-reduction strategies for prevention of HIV/AIDS amongst intravenous drug users in correctional facilities based on eligibility criteria similar to those used in the outside community."

Harm reduction is the term used for programs that allow drug addicts to use drugs in a safe manner.

Addicts can get access to clean needles in most Canadian cities but not in prisons, despite the extremely high number of drug users in prison, and the high rates of HIV-AIDS and hepatitis C.

"We've been asking how do drugs get into prisons and we can't get answers," said Liberal committee member Hedy Fry in an interview. "People say they've been doing all the things you should do to stop it but it still manages to get in."

Given the fact that drugs are common in prisons, the problem of infectious disease becomes crucial for public health, she said.

"They (prisoners) come back out and there's huge re-infection of other people, especially families – we

find there's such a high percentage of women with HIV/AIDS."

During the committee hearings, Francoise Bouchard, director general of health services at Corrections Canada, said that 70 per cent of prisoners have substance abuse problems.

Bouchard said drug seizures are regularly made within prisons despite a wide range of measures to prevent the entry of illegal drugs.

Federal prisoners can get bleach kits to sterilize their needles, but the kits are often not used, she said. The drug problem is so pervasive that some prisons have special drug-free units for prisoners who are highly motivated to beat their addictions.

In a dissenting opinion, the Opposition Canadian Alliance opposed the proposal for prison needle exchanges, saying they would lead to higher rates of drug use in prisons.

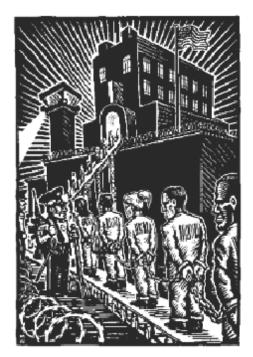
"It would amount to an admission of defeat to the disturbing reality of heightened drug use and abuse among inmates."

The committee recommended that funding for the federal HIV-AIDS strategy be more than doubled to \$100 million from the current \$42.2 million annually.

But the Alliance called for a somewhat smaller funding increase, to \$85 million.

The committee heard that about 4,000 new HIV infections are being reported in Canada annually, adding an estimated \$600 million annually to future medical costs.

Dennis Bueckert, Winnipeg Free Press (June 6, 2003)



The Man Inside My Head

Inside my head a demon lurks He never leaves my mind He plays with my emotions To see what he can find He likes to think he's number one What he wants, he gets But we both know I run this show How quickly he forgets He tampers with my emotions He tries to cause me fear But little does he know the facts I'm very much aware He emphasizes all my doubts And urges them to grow But what he doesn't realize Is what I'm about to show And that is I am tired of him And I'm taking back control For he's caused me enough damage Ran up too high a toll He's made me worry needlessly And caused me too much grief It's high time I took back my life Provided some relief I'm giving him his notice now To find somewhere else to hide I'm taking back what's mine His ship sails with the tide He doesn't even have a name So he'll not likely be missed I've only one message for him He is hereby dismissed

Spunky

<u>Untitled</u>

As boredom sets in The feeling of loneliness creeps by The lights in mind start to dim And a tear drops from my eye

I've been here before But this time it's not the same I should have settled the score But I promised to quit the game

When I walked down the path I went left instead of right Some people felt my wrath That's why I'm sitting in seg, tonight!

Ron Hunter

DeLinkQuent

Let us learn from those Who have failed Now it's time to excel No more payin' bail 'Cause we're stayin' outta jail cells We deserve better than poverty, Struggle & violence Too many brothers have died for us To live in silence Call me paranoid for The tears that fall But somebody is tryin'a Kill us all How are we supposed to Get by, work together & make it/ If our leaders are getting high Drunk & inebriated No more drinking, smoking Slowly dying inside ... Instead of dope, give us hope Instead of prison, give us pride We're tired of hypocrites That sing the same ol' song They keep on telling us what to do But they keep on doing wrong Judges sentence us to prison for life And deny all appeals While politicians make International drug deals We're tired of sitting around Feeling self-pity Matter of fact We're talking back

April Daniels

"Dear Mom"

Dear Mother I am truly sorry For all I've put you through Hopefully you'll pick up the pieces And understand what I had to do

I truly ran out of all options Denied I was of more time I turned where I could to no avail Believing someone was my crime

I wish you strength and recovery I know you'll be just fine You've people you can turn to I have no one left in mine

So please believe me when I say I meant to you no harm Understand that dealing in real estate I just happened to buy the farm

Spunky

Love is Fragile

Life's sweetest pleasure Is warm and tender Enjoy it and treat it gentle It will last forever When it is treasured! In reality it's not as strong As it may seem Love is fragile like a dream Don't ignore it It must never be mistreated It will shatter like fine crystal And disappear forever Remnants of what might have been It will remind you of Your pride and the emptiness You will always feel inside

Dedicated to: 11/11/77 From: 04/11/74



All I Have to Give

You're the first thing I think of Each morning when I rise You're the last think I think of Each night when - I close my eyes

You're in each thought I have And every breath I take My feelings are growing stronger With every move I make

I want to prove I love you But that's the hardest part So, I'm giving all I have to give To you ... I give my heart

Charles King

VEIN CARE

Be kind to your veins, they're the only ones you've got! Veins become leaky, infected and will eventually collapse if they don't have time to heal between injections. You can tell a vein has collapsed when it seems to have disappeared or you can't draw blood from it. To help prevent your veins from becoming damaged:

- try to use a different injection site for each time you shoot up
- learn how to inject in a number of places and with either hand so you'll be able to use the other side if one side needs a rest
- save the "easy" spots for when you know you don't have time
- shoot in the direction of your heart with the hole of the needle facing upwards
- taking oral vitamin C may help your veins repair themselves
- To make sure your vein is full of blood and easier to hit, try:
- clenching and relaxing your fist
- gently rubbing or slapping the skin over the vein
- soak your arm in warm water
- squeeze your bicep with your hand
- pushups, pull-ups or wrist curls
- use a tourniquet (belt, string, rubber bands, shoelaces, etc.)

REMEMBER THAT INFECTIONS ARE HARD TO HEAL, IT IS BETTER TO PREVENT INFECTIONS

WHERE TO SHOOT

Always shoot in a vein, never an artery. To be sure you're in the vein, pull back the plunger, if slow moving dark red blood comes into the syringe, YOU'RE IN A VEIN. If the blood is bright red and frothy or if the plunger is forced back by the pressure of blood, YOU'RE IN AN ARTERY – GET OUT! Untie, pull needle out, raise the limb above your head if possible and apply pressure for 10 minutes. Also:

- areas that are furthest away from the heart heal the slowest and have the worst circulation (eg: feet)
- areas that are closest to the heart have veins that are near major arteries and nerves which can cause serious damage if hit
- the veins in your arms are the safest places to shoot
- never inject where you feel a pulse (an artery)
- try to hit surface veins instead of deeper ones
- shoot in the direction of your heart

GOOD PLACES TO SHOOT

The veins in your upper arms and forearms are as safe as any!

BAD PLACES TO SHOOT

DO NOT fix into your eyes, face, armpits, penis or breasts, these veins are so fragile and hard to find that they're not worth the risk. The same goes for veins near your belly button and inner thigh, they are too deep!

PLACES TO SHOOT ONLY IF YOU HAVE TO

Veins in the hands and feet are fragile and will hurt, inject slowly into these areas. Inject slowly into the veins behind your knees also and be careful of the artery that runs next to the vein.

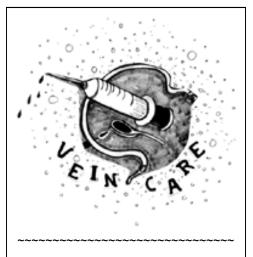
IF YOU HAVE TO USE YOUR JUGULAR (in the neck)

Hits into your jugular are very dangerous. Chunks and clots can go quickly to your brain or heart and cause a stroke or heart attack. Your best bet is not to shoot here at all. If you must, clean the area first with alcohol, then shoot towards the heart and come in at the smallest angle possible - 35 degrees or less. Flag it to make sure you're in. Go as slow as possible and don't stand up too fast. There is no 100% safe way to shoot in your jugular.

GERMS

Germs cause abscesses including spit germs, skin germs and other people's germs. To avoid germs getting into your body while you're fixing:

- don't lick the bubble off the top of the point
- don't lick the site before or after fixing
- don't use a dirty mix like toilet water or spit (if you have to use toilet water, use the water in the tank, not the bowl)
- don't touch the filters too much
- avoid sharing spoons, water, filters and rigs with other people
- clean the site before fixing if you can with soap or alcohol



ABSCESSES

Abcesses (also called boils) begin with redness, swelling and tenderness at the injection site and develop into an infection with a hard, pus-filled center. They are caused by tiny germs getting pushed under the skin by the rig. If you notice a hard warm lump developing and can't see a doctor, put a warm compress on it at least 3 times a day, this will bring blood to the area and will make it go away or it will soften and fill up with pus. Also keep the abscess clean with soap and water. It may drain by itself but if you choose to drain it yourself, ONLY USE A CLEAN NEEDLE to poke it with. The pus should come out easily, never squeeze it because it will spread the infection. If you are able to, put a dry bandage over it and keep it clean. If you get a fever, chills, extreme fatigue or pain (especially in the groin or armpits) that is related to the abcess, you may have a blood infection - you probably need medical attention for this. Some infections need antibiotics to be cleared up.

COTTON FEVER ("The Bends")

Cotton fever happens when a piece of the filter gets sucked into the syringe and injected into your blood. Within hours, you develop a fever and get really sick, your bones ache, you feel hot and cold at the same time and you shake. The best thing to do is to rest, eat something and cover up with a blanket. Cotton fever usually gets better after an hour.

CHALK LUNG

Chalk Lung is caused by injecting something that won't mix with water. These pieces can include talc, chalk and cornstarch (many pills have these pieces.) Your lungs may scar making it hard to breathe. Chalk Lung can be prevented by filtering carefully every time.

WANNA BE A ROCK STAR AND LIVE? GET A SAFER CRACK USE KIT!

The Safer Crack Use Coalition is a group of front line workers, harm reduction activists, users and other community members, who came together a few years ago to look at ways to respond to the needs of folks using crack in Toronto. And we mean poor folks and people who live in or are from communities that are targeted by police etc., not your Lexus driving corporate CEO users.

We saw that poor and homeless crack users are extremely isolated, that they don't come to health centres or connect with outreach programs, because they are treated like shit too often, even by workers. Being a crack user in a society that dehumanizes folks that use (especially crack), that supports a 'war on drugs'/ 'lock 'em up' mentality, means you are at constant risk for police harassment and assault, prison, having doctors/social workers etc. not treat you at all or not meet your needs when they do, losing your home and having to use outside (leaving you even more vulnerable) and generally that your quality of life is terrible. Not so much from the drugs you use, but the bad treatment you get for using.

We saw that folks were getting HIV and Hep C alot from smoking and sharing pipes that burn and cut your lips, and that folks had no idea of ways to use that were less harmful. And so we came up with the safer crack kit, which has a pipe that won't burn or cut you, and lots of other materials and information to help you stay healthy and take care of yourself if you are smoking crack. The kits are given out during outreach at some agencies, outreach specifically to places crack smokers hang out, and so we were also able to connect and talk to folks, let them know that someone gives a shit and wants to hear from users what they need and want.

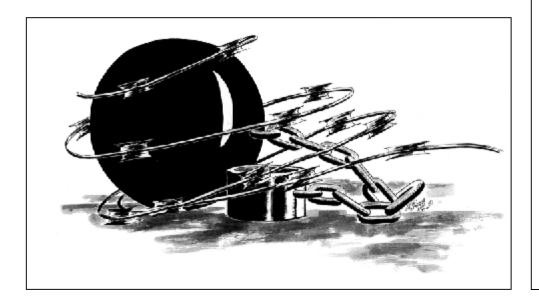
We get no funding for the kits, we scrape together the cash ourselves. We cannot meet the demand for the kits, so we are constantly fundraising to buy more. The Safer Crack Use Coalition is also involved in research with crack smokers to have some statistics and real information about users lives and issues to bring to public health and other powers, to show them how important these health and human rights issues are.

So, if you'd like to get a kit, you can go to...

Queen West Community Health Centre - 168 Bathurst @ Queen St. West StreetHealth - 338 Dundas @ Sherborne PASAN ... you know where ! Parkdale - Community Health Centre 1229 Quuen West @ Dufferin Maggies - 298 Gerrard @ Parliament

Or, call Connor at PASAN and I'll tell you where and when you can pick them up outside of the downtown area in Toronto. There are similar distribution projects in Guelph, which you can also find out about through Connor. Smoke safe and take care!

Connor McCollum Coordinator Young Offender Outreach & Education Program



Safer Crack Use Kits

These Kits Contain:

Straight Shooter Alcohol Swabs Vaseline (lip balm) Chewing Gum Matches Extra Screens Latex Condom Water-based Lube

* The Straight Shooter is a pipette made from double-fired glass with rounded tips to help prevent cuts to the fingers and lips. It doesn't heat up as quickly as some metal pipes and won't give off poisonous fumes like water bottles or inhalers

* Everyone should have their own pipe

* You should use several screens in the pipe

* Place in screen(s) level with the tip of the stem, break up your rock and sprinkle onto the screen

* Touch the flame to the stem briefly to melt the rock instead of concentrating the heat and move the flame along the stem to spread out the heat

* Drink lots of water

* Clean your pipe regularly

* Take care of yourself

Safety Tips:

Use Vaseline on your lips to keep them from cracking and burning – this helps stop the spread of diseases like HIV, Hepatitis B & C and Herpes

Avoid sharing pipes. If you must share, clean the mouth piece with alcohol swabs in the kit

Vaseline is for your lips – when you fuck, use a latex condom covered with water-based lube

Always use a latex condom when giving a blow job and make sure you don't have Vaseline on your lips

Chew sugar-free gum to stop your teeth from grinding

Allow time for the pipe to cool before using it again

You can make a mouth-piece with an elastic band, matchbook cover or a piece of tape so you don't hurt your lips or catch someone else's germs

Clean your pipe when it is cool

Replace screens as often as possible



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Currently, there are about 200 million people worldwide who are infected with the Hepatitis C virus, 4.9 million of those are in the United States (estimates go as high as 15 million) and 5 million in Western Europe. The prevalence seems to be higher in Eastern Europe than in Western Europe. In industrialized countries, HCV accounts for 20% of cases of acute hepatitis, 70% of cases of chronic hepatitis, 40% of cases of end-stage cirrhosis, 60% of cases of hepatocellular carcinoma and 30% of liver transplants.

The incidence of new symptomatic infections has been estimated to be 13 cases/100,000 persons annually. For every one person that is infected with the AIDS virus, there are more than four infected with Hepatitis C. The CDC (Center For Disease Control) estimates that there are up to 230,000 new hepatitis C infections in the U.S. every year. Currently, 8,000 to 10,000 deaths each year are a result of HCV.

Over the next 10-20 years chronic hepatitis C is predicted to become a major burden on the health care system as patients who are currently asymptomatic with relatively mild disease progress to end-stage liver disease and develop hepatocellular carcinoma. Predictions in the USA indicate that there will be a 60% increase in the incidence of cirrhosis, a

HEP C (HCV) & DRUG USE

All drugs exert strain on the liver and can suppress the immune system. Combined with alcohol over a long period of time the effects can be greatly increased, proving fatal to some.

Aspirin, Acetaminophen and Ibuprofen all have some impact on the liver. Light use may be safe. Aspirin and Acetamenophen should be avoided if their are any problems with blood clotting disorders. Ibuprofen is the safest for the liver, but long term use can cause problems.

Cigarettes are carcinogenic and may be a co-factor in the development of liver cancer. Smoking is also known to destroy some vitamins such as B1, B6 and C. If you have poor circulation, smoking may make it worse. Smoking may also increase depression by reducing blood circulation to the brain.

Sleeping pills, benzodiazepines and barbituates place stress on the liver, are mildly toxic and may accentuate liver damage in people with hepatitis C. These are best avoided altogether.

Anti-depressants and other prescribed medications also place stress on the liver and are mildly toxic, but are probably safe in low doses. If your are on these and experience an increase in other symptoms, inform your doctor immediately.

Marijuana is not thought to directly affect the liver, but does suppress the immune system. Marijuana is also thought to be cancer causing and may be more damaging than cigarettes.

Marijuana may also increase fatigue and any problems with mental function.

Steroids can cause liver damage in even healthy people. Steroids also suppress the immune system. As steroids are heavily processed by the liver, it is probably best to avoid them.

Opiates including Heroin, Morphine and Methadone, reduce the effectiveness of the immune system and may accelerate the rate of liver damage.

Methadone and hepatitis C: If you're on a methadone program you may be able to access initial hepatitis C antibody testing and ongoing liver function test monitoring through your prescribing clinic. If the clinic does not offer such services, ask for a referral to a GP who does.

The effects of methadone can alleviate possible painful symptoms of hepatitis C. Although this may be helpful, it can camouflage early signs of liver damage (if it develops). Flu- like hepatitis C symptoms may give the impression that you are on prescription pills. If this causes problems with staff at the clinic, it may be useful to remind them of the complicating effect of hepatitis C symptoms.

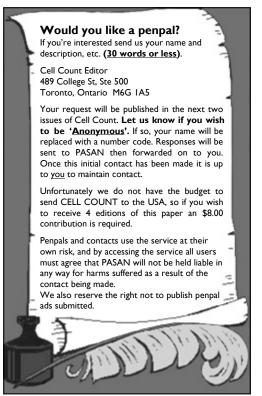
If you experience flu-like symptoms of hepatitis C, these symptoms should not be misinterpreted as withdrawal symptoms from opiates. People should be careful with methadone dosages and aware of their real tolerance for drugs.

This is especially important when liver damage is severe.

Stimulants, including Amphetamines, Ecstasy and Cocaine, directly affect the liver and suppress the immune system and are also likely to increase the effect of hepatitis C on mental health.

Hallucinogens, Magic Mushrooms and LSD all affect the digestive system and may place a heavy strain on the liver.

Amyl Nitrate is severely toxic to the immune system. It also places stress on the heart, circulatory system and the liver.



RESOURCES 3

ONTARIO

2-SPIRITED PEOPLE OF THE IST NATIONS 43 Elm St, 4th Fir, Toronto, M5G IH1 416-944-9300

AFRICANS IN PARTNERSHIP AGAINST AIDS 517 College St, Ste 338, Toronto, M3G 4M2 416-924-5256

AIDS COMMITTEE OF CAMBRIDGE, KITCHENER, WATERLOO and AREA 85 Frederick St, Kitchener, N2H 2L5 (519) 570-3687 Collect Calls.

AIDS COMMITTEE OF GUELPH 206-2 Quebec, Guelph, N1H 2T3 (519) 763-2255 Collect Calls.

AIDS COMMITTEE OF NORTH BAY and AREA 202-240 Algonquin Ave, North Bay, PIB 4V9 705-497-3560 Collect Calls.

AIDS COMMITTE OF OTTAWA 207 Queen St, 4th Flr, Ottawa, K1P 6E5 (613) 238-5014

AIDS COMMITTEE OF THUNDER BAY Box 24025 Downtown North PO, Thunder Bay, P7A 4T0 (807) 345-1516 Collect Calls.

AIDS COMMITTEE OF WINDSOR I 168 Drouillard Rd, Ste B, Windsor, N8Y 2RI

AIDS NIAGARA 111 Church St. St Catharines. L2R 3C9 905-984-8684

ANISHNAWBE HEALTH AIDS PROGRAM 255 Queen St E, Toronto, M5A IS4 416-360-0486

ASIAN COMMUNITY AIDS SERVICE 107-33 Isabella St, Toronto, M4Y 2P7 416-963-4300 Collect Calls.

BLACK COALITION FOR AIDS PREVENTION (BLACK CAP) 207-110 Spadina Ave, Toronto, M5V 2K4 416-977-7725 Collect Calls.

FIFE HOUSE 571 Jarvis St, 2nd Flr, Toronto, M4Y 2J1 416-205-9919

HAMILTON AIDS NETWORK 135 Rebecca St, 2nd Flr, Hamilton, L8R 1B9 905-528-0854

HEP C SOCIETY OF CANADA 3050 Confederation Parkway, Mississauga 905-270-1110 Toll Free: 1-800-652-HepC (4372)

HIV/AIDS LEGAL CLINIC OF ONTARIO Toronto, 416-340-7790 Collect Calls.

HIV/AIDS REGIONAL SERVICES (HARS) 844-A Princess St, Kingston, K7L 1G5 (613) 545-3698 Collect Calls.

ONTARIO ABORIGINAL HIV/AIDS STRATEGY 844-A Princess St, Kingston, K7L 1G5 (613) 549-7540 Collect Calls.

PASAN 500-489 College St, Toronto, M6G IA5 416-920-9567 Collect Calls.

PEEL HIV/AIDS NETWORK 77 Queensway West, Ste 101, Mississauga, L5B 1B7 905-896-8700

PETERBOROUGH AIDS RESOURCE NETWORK 302-159 King St, Peterborough, K9J 2R8 Toll Free: 1-800-361-2895 or (705) 749-9110 Collect Calls. THE WORKS 277 Victoria St, Toronto, 416-392-0520 Collect Calls

TORONTO PWA FOUNDATION 399 Church St, 2nd Fir, Toronto, M5B 216 416-506-1400

VOICES OF POSITIVE WOMEN 105-66 Isabella St, Toronto, M4Y IN3 416-324-8703

EASTERN CANADA

AIDS COALITION OF NOVA SCOTIA 326-1657 Barrington St, Halifax, NS (902) 425-4882

AIDS COALITION OF CAPE BRETON PO Box 177 Sydney, NS, B1P 5E1 (902) 539-5556

AIDS NEW BRUNSWICK (506) 459-7518

AIDS PEI 16 Great George St, Charlottetown, CIA 8C4 (902) 566-2437

AIDS SAINT JOHN 115 Hazen St, NB, E2L 3L3 (506) 652-2437

ATLANTIC FIRST NATIONS AIDS TASK FORCE PO Box 47049, 2164 Gottengin St, Halifax, NS, B3K 2B0 (902) 492-4255

NEWFOUNDLAND/LABRADOR AIDS COMMITTEE PO Box 626, Stn C, St. Johns, NF, AIC 5K8 (709) 579-8656

SHARP ADVICE NEEDLE EXCHANGE 150 Bentnick St, Sydney, Cape Breton, NS, BIP 6HI (902) 539-5556 Collect Calls.

SIDA/AIDS MONCTON 165A Gordon St, NB, EIC INI (506) 859-9616

QUEBEC

CACTUS 1626 rue Hubert, Montreal, H2L 3Z3 (514) 847-0067

CENTRE FOR AIDS SERVICES MONTREAL (WOMEN)

1750 Rue Saint-Andre, 3rd Flr, Montreal, PQ, H2L 3T8 (514) 495-0990 Fax: (514) 495-8087 Toll Free: 1-877-847-3636

COALITION DES ORGANISMES COMMUNAUTAIRES QUEBECOIS DE LUTTE CONTRE LE SIDA (514) 844-2477

COMITÉ DES PERSONNES ATTEINTES DU VIH DU QUEBEC (CPAVIH) 2075 rue Plessis bureau 310, Montreal (514) 521-8720

PRAIRIES

AIDS CALGARY 200-1509 Centre St, Calgary, AB, T2G 2E6 (403) 228-0155

AIDS PROGRAM South SASKATCHEWAN 1504B Albert St, Regina, SK, S4P 2S4 (306) 924-8420

AIDS SASKATOON Box 4062 Saskatoon, SK, S7K 4E3 I-800-667-6876 or (306) 242-5005 **CENTRAL ALBERTA AIDS NETWORK** 4611 Gaetz Ave, Red Deer, AB, T4N 3Z9 (403) 346-8858 Fax: (403) 346-2352 Toll Free: 1-877-346-8858 (Alberta only)

HIV EDMONTON 600-10242 105th St, Edmonton, AB, T5J 3L5(780) 488-5742 Collect Calls.

LIVING POSITIVE 703-10242 105th St, Edmonton, AB, T5J 3L5 (780) 488-5768 Collect Calls.

NINE CIRCLES COMMUNITY HEALTH CENTRE 705 Broadway, Winnipeg, MB, R3G 0X2 (204) 940-6000 Toll Free: I-888-305-8647

PLWA NETWORK OF SASKATCHEWAN Box 7123, Saskatoon, SK, S7K 411 (306) 373-7766

STREET CONNECTIONS 820 Main St, Winnipeg, MB, R2W 3N8 (204) 586-1463 WOMEN: 50 Argyle, Winnipeg, MB, R3B 0H6 (204) 943-6379

BRITISH COLUMBIA

AIDS VANCOUVER ISLAND 304-733 Johnson St, Victoria, V8W 3C7 (604) 384-2366

BC PWA PRISON OUTREACH PROJECT (604) 527-8605 Collect Calls.

PACIFIC AIDS RESOURCE CENTRE 1107 Seymour St, Vancouver, V6B 5SA (604) 681-2122

POSITIVE WOMEN'S NETWORK 614-1033 Davie St, Vancouver, V6E IM7

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email changes to: cellcount@pasan.org

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