

JUNE 1992

FROM OUR NEW EXECUTIVE DIRECTOR

Four time zones and four thousand miles away, my first day on the job as part of the AIDS Vancouver Island team began by attending the Annual General Meeting and Conference of the Canadian AIDS Society in Halifax. Along with staff member Bart Wittke, I was fortunate to be a part of the nation-wide meeting to discuss the past year's activities and accomplishments in communities faced with AIDS/HIV infection.

My road to Halifax, like that of many of my colleagues in attendance, has been a long one; we clearly remember the early 1980's when the newly discovered "gay cancer" began to infect and affect people in our communities. For all of us, AIDS has meant a change in direction - a new path- for the way in which we conduct our lives, both socially and intimately.

For a smaller portion of the people in attendance, AIDS and the last decade has resulted in a radical change in our professional lives. In countries around the world, we see a new industry carved out of the need for support programs & services to a very diverse community. To the staff and professionals committed to this movement, AIDS and HIV infection has challenged the very way in which we work and the career choices we make as individuals.

Many delegates in Halifax share a similar background to myself - as graduates of social work programs, our interests and ideals saw us work in community based agencies, jobs in which we could invest our passion for a just and equal human In my case, it meant employment with condition. Neighbourhood Houses of Greater Vancouver, Big Sisters of Canada, The YWCA, The Elizabeth Fry Society, and The Canadian Diabetes Association. Whether it be my time as a front line worker with street youth in downtown Vancouver or fundraising for transition houses in the NorthWest Territories, the common element to hold my interest has been the knowledge gained by surrounding myself with people of great integrity who inspire me to learn more about our community. I believe AIDS Vancouver Island, it's members, volunteers, and staff will do just that.

Looking back, my work outside the AIDS community provided a chance to work on single focus issues and develop specific skills... Four days in Halifax have shown that my time

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with AIDS Vancouver Island cannot be isolated to one issue using a single skill. Like the HIV virus, the causes and effects in our community cross all boundaries of gender, sexual orientation, class, and colour. Credible and reflective community action will include a broad base of representatives from across our community, using a range of talents and skills.

I am both excited and challenged to be a part of this community's response to the health crisis. As a staff member, I hope to offer my experience in social services, gay rights activism, fundraising and public relations to the benefit of the programs and services of AIDS Vancouver Island. As an individual, I welcome the chance to participate in the challenge of public debate, policy development, and community action. As a team, we can make Vancouver Island a leader in health care & social service delivery in this country.

I look forward to working together in the coming years. Sincerely, Weston

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Reference Material NOT FOR LOAN AVI Resource Centre The Update, Volume 4, Number 10 Page 2

IN MEMORY of David John Tuff May 19, 1959 - May 31, 1992

David, with the love and support of his family and friends, died with peace and dignity from complications related to AIDS. The love and compassion David had for all he met could no longer be contained in his mortal vessel. We have learned the lessons you were here to teach. Rest well my love, the love you so freely gave lives on.

In lieu of flowers, it was David's wish to have a park bench at English Bay dedicated to his memory. If you wish to make a donation, please contact Bart at 384 - 1511.

CANDLELIGHT VIGIL

Thank you to all the people who attended the Candlelight Vigil at Christ Church Cathedral on Sunday, May 17th.

Your presence showed that we not only remember those who have died from AIDS, but also that we are there to provide hope and support for those living with the disease.

This is the first time we have held the vigil indoors and I would appreciate any comments or suggestions concerning this or next year's vigil. Don 386-0414

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THE UPDATE

Production Editor: Isabella Luke

Editorial Committee: Terry Froud, John Hodder.

The Update is published monthly by the Vancouver Island AIDS Society. Submissions and letters to the editor are very welcome, and can be left with any staff member at AVI. #304-733 Johnson Street, Victoria, BC, V8W 3C7

Deadline is the 2nd Tuesday of each month.

A Tribute to Michael August 3, 1961 - May 6, 1992

We sadly announce the passing of Michael Redfern, an AVI volunteer since the summer of 1991. He was an inspiration to all of us and we shall miss his quick humour and willingness to share his experiences.

Michael worked as a PWA speaker and the following letter, sent to Michael but received at AVI the day after Michael died, says it best.

Dear Michael,

It isn't often that a counsellor or educator gets a chance to participate in an event which has had such an immediate and significant impact on so many young people. Your participation in our AIDS Forum has been described as "minute for minute, the most education that will go on at this school this year". You have a great deal to be proud of. Students and parents and teachers were left with a life long impression of a wonderful young man who taught them infinitely more about AIDS and people than any other experience.

As you struggle with the final stages of this journey please feel the love and respect and caring coming from all those whose lives you touched in this small community of Comox.

On behalf of everyone and personally I extend our fond thoughts and best wishes With hope and sincerity, Don McCririck

Counsellor/Teacher Highland Secondary School Comox. BC

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destructive lifestyle" that is "monstrous" and, as a result, have created a "monstrous disease." Elizabeth Kubler-Ross, in AIDS: <u>The Ultimate Challenge</u>, wonders if "our AIDS patients, children and adults alike, chose to contribute their short life spans on planet Earth to help us open our lives ... and to finally see the light."

AIDS does not choose people and people don't choose AIDS. I see this most clearly when I think of AIDS as just one of many meaningless though devastating natural disasters. Ever since Brian was diagnosed, I have compared AIDS to a tornado to remind myself and my friends how the puzzling randomness of disasters can make us ask questions that don't have answers.

Risks

A tornado unexpectedly touches down on a small midwestern town. Some people find safety in a shelter or basement, while others driving in cars or without shelters are caught in the storm. Many people die. Families wonder why their homes were hit; surviving spouses question why their lives were spared. Why did the tornado hit this particular town at this particular hour and kill these particular people? How were they different from the survivors? Did they unconsciously want to die? Was it just bad luck or fate or God's will? Some survivors' questions project onto the tornado a personality and a will. Did it strike with a purpose? What were they supposed to learn? Was it that the dead might not have had to die if they had lived differently? Was it merely that death can strike anyone at any time without warning? Or was it that no one should ever live where strong winds blow?

No matter how careful we are, living in today's world means living in the path of unpredictable winds over which we have a little control but which can threaten our lives. We are aware of the risks of living in cities built on earthquake faults or in the paths of tornadoes, of flying in jets, of walking on city streets at night, of making love. We take precautions, yet some of us still die. We want explanations for their deaths as much as want to postpone our own. But the goals of leading a risk-free life, of creating a cocoon of total safety, or of being certain that one's death will not be random, are unattainable. Every day we take ordinary risks with no guarantee that we will survive.

Taking risks does not mean that we want the worst outcome to happen. Even those few who knowingly took the greatest risks, or made mistakes, or were not able to make the best decisions because of alcohol or drugs and therefore increased their chances of infection, were not choosing AIDS. We all are ultimately responsible for our actions, but sometimes events that are beyond our control radically change the consequences of everyday activities. The tragedy of AIDS is not that so many people live such desperate lives that they choose to die of AIDS. It is that so many people are dying for no reason other than that they took the kinds of risks we all take in our efforts to lead meaningful lives. Taking risks and losing is not the same as choosing to die.

Choice and responsibility are important issues for many facing this epidemic. But the act of telling those with AIDS that they chose their disease - a notion that one does not have to accept in order to take responsibility for one's health and wellbeing - can have damaging effects. People who are sick, especially when treatments don't stop the course of their illness, unnecessarily ask themselves, "What is wrong with me? Why did I want to get sick and die? How are my attitudes creating a fertile ground for AIDS? Why can't I choose life?" And if we are convinced that most people with AIDS really choose to get this virus, then it can be argued that they are to blame for their illness and they, not society, must pay the price.

All people with AIDS, regardless of risks they did or did not take, deserve our respect and our care. They have a right to determine for themselves how to respond to this disease without anyone assuming that they chose AIDS to rescue them from their bad lifestyles or to complete their lives. The burning moral issue in this epidemic is not how to judge who did or did not choose their illness so that we can separate the "innocent" from the "guilty." It is rather how we all choose to respond to people who are living with AIDS and HIV.

Gratitude

Another troubling response that gives excessive meaning to AIDS is gratitude. This feeling is based on the perception that AIDS is happening now because our individual or collective pasts were immature, sinful, sick, or spiritually impoverished. AIDS is assigned meaning because it forces us to grow up, it is our salvation from sin, it cures us from a deeper psychological illness or it rescues us from spiritual death.

Some gay men's gratitude toward AIDS, and the larger society's perception that AIDS is making gay men grow up, project a "Peter Pan" stereotype of gay men. In the old days, the story goes, gay destructive adolescents who were obsessed with quick sex, partying, drugs, dancing, youth and beauty - a pre-AIDS "lifestyle" that was so hopelessly (continued on page 8)

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compulsive that only massive deaths could change us. Some characterize this "lifestyle" as if it were an illness itself that inevitably led to AIDS and for which AIDS is a cure. AIDS has replaced bathhouses with literary bookcases, discos with country-western bars, cruising with dinner parties, casual encounters with long-term commitments, partying and promiscuity with community service and monogamy. The media have been quick to report the news that AIDS finally has forced gay men to act like adults. The lesson is that AIDS has improved our lives.

It is true that many of us have responded to this epidemic by making changes in our lives. We take responsibility for our past actions and accept the consequences without selfhate. We educate each other about safer sex and other safe practices. We ask for help and offer it. We demand the services we deserve from our governments. We learn how to live well in the present. We pay more attention to our health and explore all possible treatments. We celebrate our lives together. We face each other's deaths and come to terms with our own. We remember, grieve and hope. We respond to AIDS as we would to other life-threatening situations; we reorganize our lives and take care of each other.

But it is important to remember that when we make these changes, we are the same people we were before AIDS. Our strength and power do not originate in this disease, but grow out of who we were as individual men and women, as families, as friends and as communities before HIV entered some of our bodies.

If we have anyone to thank for the changes we have made, it is ourselves and each other, not AIDS. We deserve the credit. We can be proud of who we are now, and of what we are doing, without making the present seem better than it is by painting a bleak portrait of our past. The caricature of our past doesn't do justice to the depth and maturity of our lives before AIDS, including the sexual creativity that has enabled us to protect ourselves and each other by eroticizing safe sex. Nor does gratitude towards AIDS take into account the physical pain, the multiple losses, the discrimination, the anti-gay violence, the isolation and the cruel accusations that tear us apart today.

Few of us respond to this epidemic without fear and confusion, without love, without anger and without aching to know why. It is the patchwork of these responses, not the diseases, not the disease itself, that gives meaning to our lives as we weather this terrible storm.

Allan Berube (Taken from AIDS Regina Newsletter, Mar/April/90, Vol. 5.3)



NEW Reference Books for the Library

The following reference books have been added to the library. These will be in-library use only books.

The Food Pharmacy Guide to Good Eating by Jean Carper

The author merges old traditions with new truths to come up with recipes to treat and prevent disease. The recipes are interspersed with interesting facts about the pharmaceutical properties of different foods.

Complete Guide to Prescription and Non-prescription Drugs (9th edition)

This book, updated in 1991, includes drug charts alphabetized by generic name as well as a Brand Names directory. Each drug is described according to function, dosage, side effects, drug interactions, warning and precautions.

The Merck Manual (15th edition)

Covers all but the most obscure disorder of mankind. The disorders are organized according to organ systems and described as to what it is, the common signs and symptoms, and usual treatments. The language is quite technical as this book is written for medical practitioners.

Dorlands Medical Dictionary (24th edition)

An authoritative guide to the spelling, pronunciation and meaning of current medical terms.

CLASSIFIED ADVERTISEMENTS

HELP WANTED

AVI is seeking a dependable, honest person who can work with limited supervision, to do janitorial for four hours each Monday, Wednesday and Friday. This is a paid position. Please contact Isabella or James for more information at 384-2366.

GAY MEN'S SOFTBALL SLO PITCH - Margaret Jenkins School, 1824 Fairfield Rd. - Sundays 10 - 1. If your are interested call Phillip @ 360-1758 or Andy @ 383-3981





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	HIV & PWA Support Group 5:15 pm	Business Meeting 1:30 pm	2	3 Family, Friends & Lovers Support Group 7:30 pm 923 Burdett Vol. Training, 7-10 pm	4	5 Network '92 Nanaimo	6 Network '92 Nanaimo
7 Network '92 Nanaimo	HIV & PWA Support Group 5:15 pm	8 Business Meeting 1:30 pm Joe the Barber 1 - 4:30 pm Victoria AIDS Respite Mtg 7:00 pm	9	10 Family, Friends & Lovers Support Group 7:30 pm 923 Burdett Vol. Training, 7 - 10 pm	11	12	13
14	HIV & PWA Support Group 5:1 5 pm	5 Business Meeting 1:30 pm Joe the Barber 1 - 4:30 pm	16	17 Family, Friends & Lovers Support Group 7:30 pm 923 Burdett	18 Vol. Training, 7 - 10 pm	19	20 Vol. Training, 9:30 - 4:00
21 Vol. Training, 10:00 - 4:00	HIV & PWA Support Group 5:15 pm	2 Business Meeting 1:30 pm Board Meeting 6:30 pm	23	24 Family, Friends & Lovers Support Group 7:30 pm 923 Burdett Education Mtg. 5:15 pm	25	26	27
28	HIV & PWA Support Group 5:15 pm	9 3	30				

COMING EVENTS

Network '92 - Vancouver Island AIDS Conference Nanaimo, June 5, 6, 7 Bizarre Bazaar (Moss St. Paint-in) - July 18 Volunteer Training - June 3, 10, 18, - 7:00 - 10:00 pm Volunteer Training - June 20 - 9:30 - 4:00 pm Volunteer Training - June 21 - 10:00 - 4:00 pm

Positively HIV Positive

A Process Oriented Support Group

Healing, wholeness and symptoms

Individuality, networking and friends

Vitality, expression and power

People helping themselves and others

In Victoria, B.C. Starts Thursday, June 18, 1992 On going Thursday mornings 10:00am-12:00 noon At the Living Room, 733 Johnson St. Cost: by donation Contacts: David at 385-9837 or Stan 595-2723

Facilitated by

DAVID REIMNEITZ, Process Work Student STAN TOMANDL, Process Work Counsellor

Recommended Reading: Working With the Dreaming Body, Working With Yourself Alone, The Dreambody in Relationships, all by Arnold Mindell.