

# WAYNE COOK 1959 - 1993

Former AVI president Wayne Cook died from an AIDSrelated illness in his home on Wednesday, October 20th. He was 34.

Wayne's death leaves an empty space in the hearts and minds of everyone who worked with him over the past eight years; his passing marks the end of an important period in our growth as an organization and as a group of people living with the reality of AIDS; a group of people that must now turn towards each other in support as we come to terms with Wayne's death.

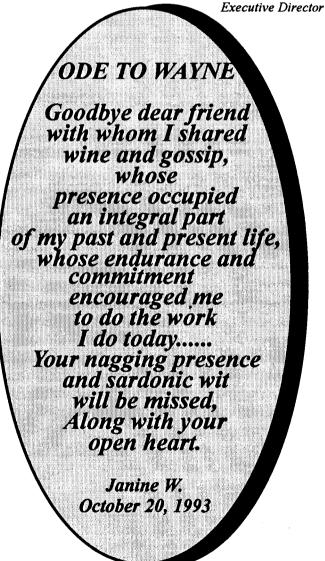
It is easier to understand Wayne's dying process knowing that it was meticulously planned and that he included people in each step of the way. From his well-organized household to his insistance that he have one-to-one time with those dear to him, Wayne was the consumate professional in staging the biggest production of his life. And he did it with class.

Indeed, even during the last thirty-six hours of his life, Wayne's nurturing and caring instincts took control and he was still providing comfort to people all the while trying to stave off the immense pain from a disease which had ravaged his body. His sense of humour was sharp as a nail and it is this which best exemplifies the true spirit of Wayne Cook.

On the afternoon before his death, Wayne was curled up in his bed, surrounded by friends and family, and his dog Nikki. His mood was jovial, almost jubilant because he knew that it was soon over. His wickedly delicious ability to tease and cast personal digs at everyone made the finality of his death all very normal; this day of lightness and fun was important given the very real pain he had been feeling for quite some time. The people Wayne loved needed it as did Wayne himself.

One question lingered in Wayne's mind over the last few months as he saw people come and go, providing support and asking if they could do anything; Wayne wanted to know why he was so fortunate to have so many people supporting him? The answer was simple. As is often the case, the universe works in such a mysterious way as to prove that "what goes around, comes around..." Wayne gave a great deal of himself to his community in his life and he deserved every single act of kindness which we were fortunate to be party to in the last six months.

He is a class act all on his own. And we will miss him. Dale Weston





Reference Material NOT FOR LOAN AVI Resource Centre CTORIA) HELPLINE:1-800-665-AIDS (2437)

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# **UPFRONT**

## AGM Presents New Faces, New Plans For the Coming Year

On October 2nd, AIDS Vancouver Island began a new year of challenging work. Members of AVI attended the Annual General Meeting to review the past year, elect a new Board of Directors, pass resolutions to the Constitution, and direct the Board to embark on a Strategic Planning process.

Members elected to the Board include Christine Morissette (Chair), Bart Wittke (Vice Chair), Lisa Dorian (Treasurer), Ned Lemley (Secretary), Marianne Alto, Linda Bouchard, Doug Eastwood, Karen Gallagher, Stan Fowler, Brenda Macevicius, Craig Hamilton Shier, Bryan Teixeira, and Janine Wear. Thanks and acknowledgment were extended to retiring Directors Brian Barton, Barbara Herringer, Susanne Klausen, and Verna Popejoy for their energy and commitment over the past year.

Two resolutions to AVI's Constitution were approved by the membership:

- 1. All AIDS Vancouver Island volunteers shall be required to be members of the Vancouver Island AIDS Society (AVI); and
- 2. All Directors shall be elected for a two-year term, with half the Board standing for election each year.

The Annual General Meeting ended with the membership endorsing the proposed Strategic Planning process, a two-year trial project which will integrate strategic planning into the everyday operations of AVI.

I would like to thank everyone responsible for making the past year at AIDS Vancouver Island such a rewarding one. Without the tireless commitment of volunteers and staff, we would be unable to maintain our strength and hope, and to accomplish our goals in education and support. Thank you all for giving so much of yourselves. I look forward to another year of working together for those affected by HIV/AIDS.

> Christine Morissette Chair, Board of Directors

	VANCOUVER ISLAND AIDS BALANCE SHEET	
	MARCH 31, 1993	
	1993	1992
	5	s
ASSETS		
	and the second	
PETTY CASH	450	403
BANK OF MONTREAL-CURRENT & SAVINGS	47,091	19,834
BANK OF MONTREAL-PROJECT FUND	10	7,559
MONTREAL TRUST TERM DEPOSITS	20,000 40 232	40,000
ACCOUNTS RECEIVABLE		4,480
PREPAID RENT	4,186 950	950
SECURITY DEPOSIT ON RENTAL PREMISES CURRENT PORTION OF DEFERRED EXPENDITURES	1,189	1.003
DEFERRED EXPENDITURES	731	1,921
DEFERRED EXPENDITORES		1,941
TOTAL ASSETS	\$114,840	\$76,156
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CURRENT		
ACCOUNTS PAYABLE	25,872	8,054
ACCRUED VACATION AND OVERTIME PAY	9,971	11,938
DEFERRED REVENUE	32,290	10,000
OBLIGATION UNDER CAPITAL LEASE	1,921	2,924
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GENERAL FUND	45,221	30,475
EMERGENCY ASSISTANCE FUND	-03	1,299
EDUCATION AND STREET OUTREACH PROGRAM		11,466
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	STIAL	\$76.156
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	1993	1992
REVENUE	2	\$
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UNDRAISING-BINGO	13,110	17,203
UNDRAISING-CASINOS	9,139	20,143
UNDRAISING-OTHER	24,130	27,661
BRANTS-HEALTH & WELFARE CANADA	116,000	114,795
GRANTS-PROVINCIAL GOVERNMENT	72.327	40,991
DRANTS-CAPITAL REGIONAL DISTRICT	148,941	125,096
BRANTS-UNITED WAY	26,50\$	24,000
GRANTS-OTHER	16,212	17,398
IONORARIA	3,564	5,206
NTEREST INCOME	2,303	4,784
AEMBERSHIP FEES	1,778	2,187
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XPENDITURES	1000	
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OPERATIONS	212,719	191,586
ALARIES & BENEFITS	268,136	245,508
		100.000
	480,855	437,094
URPLUS OF REVENUE OVER EXPENDITURES	1.00	3.236
URPLUS OF REVENUE OVER EXPENDITURES URPLUS, BEGINNING OF YEAR	1,548 43,240	3,236
	43,240	43,240
URPLUS, END OF YEAR	S44.778	\$46,476

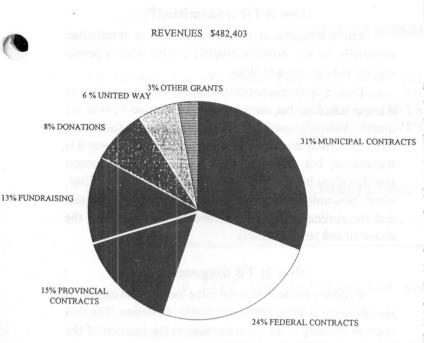
VANCOUVER ISLAND AIDS SOCIETY CONSOLIDATED STATEMENT OF REVENUE, EXPENDITURES AND SURPLUS

## THE UPDATE

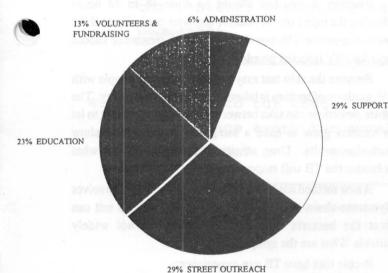
The Update is published monthly as a service to members. One-year subscriptions are available for \$15.00 Typed submissions and letters to the Editor are welcome, c/o AVT #304-733 Johnson Street, Victoria, BC, V8W 3C7. The Update will print no sexist, racist or homophobic copy and will cover issues and events from perspectives which will initiate positive change in the work done by and for AIDS Vancouver Island. The appearance of any advertisements, treatment information or letters to the editor, do not imply endorsement by AIDS Vancouver Island. Submissions may be edited for conciseness and grammatical correctness. AIDS Vancouver Island will not be responsible for errors or omissions.

Pierre D., LaDonna S., Christine M., Pam T., Frances H., Didi M., Lois M., Holly N.

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EXPENDITURES \$480,855



29% STREET OUTREACH



# SUPPORT SERVICES

### **Positive Touch - Painting with Love**

A little girl once came along with her mother who needed an emergency massage for her spasmed lower back. I was working gently to relieve her mother's considerable discomfort when the little girl looked up from her colouring book and blurted out "LaDonna, you do the same thing I do." "Oh, what is that?" I asked. "Painting with Love," she answered, with a matter of fact attitude. Her mother's back spasm began to relax as we laughed with delight and respect for the wisdom of children.

Touching for therapeutic effect is the oldest and simplest of all healing treatments. Loving touch is a basic human instinct, the need for contact and relationship-- a language we use to express our feelings. Massage and caring touch give comfort and promote good health in both the giver and the receiver - creating a state of relaxation, renewing vitality and balance.

We are not "brains walking around on the end of sticks" and a caring massage gives us the time and the space to balance headtime with body- time. This personal time-out gives people a context for recovery and rebalancing, inducing a sense of well-being. Taking time to tune-in to the healing wisdom of the whole self is a feeling similar to coming into a clearing in a lush forest away from external stimuli and fear. It is in the times of being present with a person with loving touch when I most strongly feel the presence of hope and a loving spirit.

Why is it that when we most need this powerful form of communication and soothing , fear sometimes steps in and stays our hands? I have witnessed this with family and friends who visit a loved one in the hospital (an environment that seems to encourage the hands-off approach) and felt the discomfort of people wanting to touch and be touched and not knowing how to begin. Being willing to learn, remember and practice with awareness the basic skills for giving loving touch will give us the confidence to reach out, and we can recognize this in all forms of the art of communication. The bonus surprise is that we receive back and are soothed and have nourished ourselves in the giving.

On November 14th from 1-4 pm I will share some of these basic tools for touch which I have learned from my own experience. This experiential workshop is open to all PWAs, volunteers, staff, family, friends and partners who want to become more touch literate and learn simple ways to comfort and centre themselves by giving the gift of loving human touch.

LaDonna Smith, RMT Self-Care Educator

# EDUCATION

# TUBERCULOSIS AND HIV

Some questions and answers

#### by Pierre Desmarais

Tuberculosis is not a new illness but is on the increase in the United States, especially in immigrants, First Nations people and in people with HIV/AIDS.

### What is Tuberculosis?

Tuberculosis (TB) is caused by a bacteria affectionately called Mycobacterium tuberculosis. This disease is chronic or acute and possibly life-threatening if left untreated.

TB is different from Mycobaterium avium complex (MAI) in its mode of transmission and its virulence. MAI is in the same family as tuberculosis but is more often seen in later stages of AIDS.

# How many are infected with TB?

The World Health Organization (WHO) estimated in 1990 that about 1.7 billion people (one-third of the world population) were infected with the bacteria that causes TB and that 8 million new cases of active TB were reported, with 3 million deaths due to TB.

If we add this figure to the number of existing cases, that would bring the number of cases of active TB in the world to 20 million people. The WHO also estimated in January 1992 that 4 million people with HIV were infected with TB worldwide.

In Canada, outbreaks of TB have occurred in some cities but there is no epidemic. Precautions need to be taken to ensure the situation remains under control.

#### Who is at Risk?

Persons at highest risk for TB include:

- People with immunosuppressing diseases (HIV, Hodgkin's disease, Diabetes).
- Immigrants from countries where TB is widespread.
- Substance users (intravenous drug and alcohol users).
- Crack/cocaine smokers.
- People that have limited access to quality medical care.
- \* The homeless.
- Prisoners.
- Residents of long term care facilities.
- People that have close contact with persons with TB (health care providers).

### How is TB transmitted?

Active tuberculosis of the lungs can be transmitted essentially through airborne droplets created when a person coughs, sneezes, talks or sings.

These droplets can be inhaled into the lungs and can cause a latent infection that can progress to an active form of the disease. This progression is more rapid in persons infected with HIV. TB usually develops in the lungs because of the way it is transmitted, but there can be a variety of less common manifestations in the brain, lymph nodes, bones, joints, liver, blood, pericardium (heart's envelope), gastrointestinal tract and the peritoneum (envelope covering the organs in the abdomen and pelvic cavities).

### How is TB diagnosed?

If a person has been exposed to the bacteria that causes TB the tuberculin skin test (PPD) will display a reaction. The skin reaction consists of an inflammation at the location of the inoculation.

Persons that are immunosuppressed because of disease (e.g. HIV infection) or drugs (e.g. corticosteroids) may not react at all (anergy) even if they are infected.

Reading of this test should be done 48 to 72 hours following the injection. A positive test does not indicate if the person has active TB, but that preventive treatment should begin for HIV infected people.

Because the skin test may not be accurate in people with HIV, a culture of sputum is taken, as well as a chest X-ray. The culture procedure can take between 4 to 6 weeks in order to let the bacteria grow to have a sample large enough to show conclusive results. Drug sensitivity testing can show what antibiotics the TB will respond to.

A new method has been approved in the USA that involves polymerase chain reaction (PCR) technology. This test can detect the bacteria within 48 hours but is not widely available. What are the symptoms?

People that have TB can experience:

- Fatigue.
- Loss of appetite or anorexia.
- Weight loss.
- Night sweats or fevers.
- Cough and shortness of breath.

These are symptoms of TB but are not specific to this disease. What are the treatments?

 Treatment of TB is usually done with a combination of two or more drugs.

- Treatment usually lasts for a year to a year and a half.
  The CDC has recommended that HIV-infected people with
- a positivePPD test or a positive sputum culture should take:
- Isoniazid (INH), 10 15 mg/kg/day up to 300 mg/day.
- \* Rifampin (RIF), 10 15 mg/kg/day up to 600 mg/day.
- Pyrazinamide (PZA), 20 30 mg/kg/day.

When drug resistance is suspected:

Ethambutol (ETB), 25 mg/kg/day.

This is added to the regimen for 2 months or until results from the drug sensibility test is available.

### What is drug resistant TB?

Drug-resistant tuberculosis (DR-TB) is a strain of TB that is not responding to certain medication currently used to fight TB. Resistance can occur to a single drug or to several drugs (multidrug-resistant tuberculosis or MDR-TB).

Patients who are noncompliant with their drug therapy are the leading cause of MDR-TB, but new strains of this bacteria are also coming from countries where prevalence of TB is high (Asia, Africa and Latin America).

The incidence of MDR-TB is increasing dramatically.

If MDR-TB has been diagnosed treatment with rifabutin, capreomycin, cycloserine, streptomycin, will be considered based on sensitivities.

#### Vaccination

A vaccine for TB has been developed and is used in certain high risk groups like nurses. The American Thoracic Society advises against the utilization of the tuberculosis vaccine BCG and other live, attenuated vaccines in persons with HIV because of possible side effects.

### What can be done?

- \* Conduct TB training programs in community organizations for members.
- Lobby proper authorities in order to have quicker diagnostic tests.
- Show that regular testing for TB is crucial for HIVinfected people.
- Urge pharmaceutical companies to develop less toxic therapies.
- Inform members that the BCG vaccine can be hazardous for PLWHIV/AIDS.

(taken from The POSITIVE Side, Autumn 1993)



A United Way Member Agency

### **BARB'S INPUT**

Bart talked to approximately 600 students at Belmont High School on October 8th and a very excited school nurse shared with me the following day: "The school is buzzing'... 'The best seminar ever'... 'You could have heard a pin drop''. They are now looking forward to World AIDS Day on December 1st in a positive upbeat way!!

Two Glenlyon Norfolk House students, Heather Hobbs and Nicola Holdsworth, made 300 red ribbons during AIDS Awareness Week and collected over \$105 to be sent to AVI. Who says the youths of today are not responsible?!

We are already booking for December and into 1994. Any speakers who already know their holiday schedules, please let me know ASAP. A big thank you to the speakers who are members of the Women's Project. We are getting more requests for women related topics and it is so good to have you available.

(Aaron hab beem talkin through hib nobs, and had an awaful code, however, he has been great through AAW and carried us all through with his usual efficiency and good humour.)

# WAVES

It's been over 10 years since Allan died of AIDS. Then there was Maggie's friend, James, two more Allans and then Glen. Just over two years ago, my lover's dear friend, Richard, died and last month, Jamie.

Losses

not measured in multiples but in waves and my grief becomes a tide pool cold brine

I gasp - sucking sea air. Then warming to sun I yearn to become part of the memory, to bring you here, knowing I have only this moment.

More waves are approaching.

Pam Terry

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# **HOLLY'S CORNER**

Special thanks to the following for their donations and their help in raising money last month:

Shelley Corbeil at Magic Angel Cafe

- Case Shaddellee at the Dutch Bakery
- Ian Haddow at Rogers Chocolates

Ken Agate at Blethering Place Tea Room

Yvonne at James Bay Tea Room

Cullen Morton and Jim Anderson at First United Church

Mr. Grocer - Royal Oak

Save-On Foods

ABC Rent-A-Car

Ken Baker of Several Skills Productions - for his help in mounting tub on truck unit for the Great Galvani at Eaton's Centre.

Gil and Angela Henry - for donating the tub to The Great Galvani.

Your support and belief in us is so appreciated!

### EATON'S CENTRE -- A NIGHT TO REMEMBER!

The Great Galvani and Moscoe the Magnificent brought down the house on October 13th during Eaton's Preferred Customer Shopping Night. The Great Galvani (Ned Lemley), famous singer/psychic, sang on request from his fire engine red bathtub, and Moscoe the Magnificent (Frank McNeil) saw lineups all evening long for his amazing visions into the past, present and future. THANKS TO BOTH OF YOU! WHAT A SHOW!

#### THE ART OF AIDS RAFFLE

The Art of AIDS Raffle is a November to February raffle where the winners will each receive a beautifully framed poster bearing the theme of HIV/AIDS.

The Art of AIDS Raffle is the first collective fundraising effort amongst AIDS Service Organizations on Vancouver Island. This concept was developed with the hope to benefit each of our organizations in several ways:

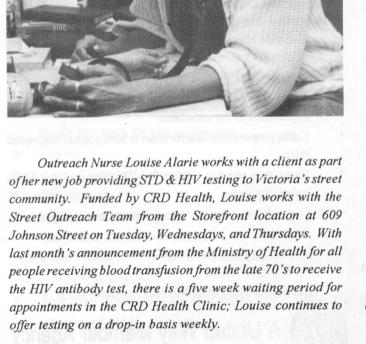
- we have the opportunity to work together for the common good;
- 2 we have an enhanced profile for all of our organizations;
- 3 we are providing an opportunity for community members to invest in their local AIDS Service Organization;

4 - this raffle will be the beginning of a yearly fundraising event, from which all of us will benefit, both in terms of our profile, and in terms of dollars being raised.

Your books of tickets and an information sheet have been enclosed with your Update. Consider yourself one of the founding participants in the Art of AIDS Raffle, a groundbreaking event you are working on with concerned people all over Vancouver Island! Please call us with any questions at 384-2366, and THANK YOU FOR BEING ACTIVELY INVOLVED!

> Holly Nelson Special Events and Communications

# STREET OUTREACH



# PWA SOCIETY VICTORIA BRANCH

**OFFICE AND LIBRARY:** 613 Superior St. Open 12:00 to 4:00 pm Monday through Saturday. Phone 383-7494.

**SUPPORT MEETINGS:** Thursdays at 7:00 pm for all HIV positive persons and their primary support partner. We share information and experiences related to our common condition.

**PEER COUNSELLING:** available Thursday afternoons. Drop-in or appointment. One-on-one with a trained HIV+ counsellor.

**REIKI:** on Saturdays by appointment by a second degree Reiki practitioner. Free.

**TREATMENT INFORMATION PROJECT:** Wednesdays (other days by appointment only). One-on-one discussion (without endorsement) of options and standards of care from published sources.

**DEEP RELAXATION/MEDITATION GROUP:** Anyone interested in participating on an on-going, weekly, facilitated, deep relaxation/meditation group for HIV+ persons is asked to call Grant on Tuesdays.

**NEW GROUP FORMING:** anyone interested in participating in an on-going professionally facilitated lifeskills/process training/assertiveness training/how-to-deal with difficult people/ putting-your-life together type program (the final program will be custom designed to the needs of the participants) are asked to register at the office as soon as possible. Participation is limited. This program requires a regular commitment.

MASSAGE & SHIATSU: Wednesdays by appointment. By Frank. Claire LeBlanc is back with her unique blend of bodywork/healing. Your choice. Donation basis.

**ACUPUNCTURE CLINIC:** by Dore Vanden Heuvel, Doctor of Traditional Chinese Medicine, on Tuesdays and Thursdays by appointment. Positions open for new clients. By donation.

**ENTERTAINMENT:** a limited number of complimentary tickets are available to our members for local theatre productions.

**CLOTHING:** lots of clean useable clothing available free.

WELFARE PROBLEMS: Roshni Narain of AVI will be in the office November 10 and 24 to provide local advocacy with Social Services and support counselling. Drop-in and appointments.

**HAIR CUTS:** Joe the Barber will be in Tuesday, November 16. By appointment. Free. **FOOD BANK:** orders in by Wednesday 4:00 pm; pickup and/or delivery on Thursday afternoon.

**PARTY:** there will be a social/party for the HIV+ community and their friends and supporters on Saturday, November 13 at 7:30 pm. Please bring a non-alcoholic beverage. We will supply the rest.

**KUDOS:** Thanks to the Albion Guest House in Vancouver for the complimentary room and breakfast for the Society delegate from Victoria who attended the recent BC AIDS Conference.

**KUDOS:** Special thanks to Laury McKean and Stephen Vincent of the Seattle Treatment Education Project for a very informative presentation on the recent international AIDS Conference held in Berlin. Thanks to AVI and VARCS for cosponsorship of this event.

WE ALWAYS WELCOME DONATIONS OF NON-PERISHABLE FOOD ITEMS AND CLEAN RE-USEABLE CLOTHING AND HOUSEHOLD ITEMS. WE ALSO WELCOME ALL VOLUNTEERS.

### **PWA FOOD BANK**

It is through the efforts of many dedicated people, the Victoria branch of the Persons With AIDS Society provides the above services to those living with HIV/AIDS. The Food Bank offers home delivery of monthly food hampers to members who are trying to maintain their health on a limited income. Supplied, when available, by the MUSTARD SEED, hampers sometimes contain foodstuffs inappropriate for those with HIV/AIDS related illnesses and the small supply of canned goods on hand at the Society's office supplements the hampers inadequately. Furthermore, "the cupboard is bare."

Local businesses have recently been approached in efforts to determine community interest in maintaining a more reliable food supply at the PWA Society's office. RUMOURS responded enthusiastically and has offered their support in the form of a benefit sometime in the next few months. AIDS VANCOUVER ISLAND has pledged their support and has offered use of their volunteers to any group interested in holding a collection of foodstuffs.

Individuals or groups interested in making a donation to the Victoria PWA Food Bank may do so at the Society's office at 613 Superior St. between noon and 4:00 pm Monday through Saturday, or may call 383-7494 during the same hours to arrange for pick-up. Items particularly in need are whole, unprocessed, nonperishable foods with a minimum of additives. The Society appreciates the efforts of the MUSTARD SEED for supplying the basic hampers but it is time to call upon our community to help with this much needed project.

# FOR SALE

SANYO Portable Stereo ...... \$200.00 CD Player Dual / **Cassette Player with** Clock Timer & Remote Control VCR, FISHER Mono ...... \$200.00 SONY Walkman AM/FM/Cassette ...... \$125.00

# Call: 480-1391

### **OVER 40?**

Prime Timers Victoria is a social, recreational, and educational organization for gay and bisexual men over 40. We meet on the third Sunday of each month at James Bay United Church, 511 Michigan Street, starting at 3 PM.

Come on down and check us out, or feel free to contact us at 384-2423.

# **Body Work**

Due to lack of interest, there will no longer be regularly scheduled body work sessions at AVI, effective November 1, 1993. However, body work at AVI may be

scheduled by appointment. Please call 384-2366 and allow 48 hours notice.

If you wish to schedule immediate body work, please call Frank McNeil at 388-0934. Frank will provide service calls.



A new spirit of giving

#### VANCOUVER Island AIDS Society

(non-profit registration # 0756957-11-28)

#### MANDATE

"AIDS Vancouver Island shall confront Acquired Immune Deficiency Syndrome, prevent its spread through education, support all those affected by the disease, and advocate on their behalf."

#### **BOARD OF DIRECTORS**

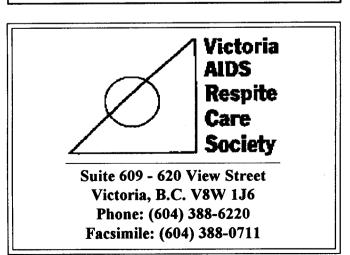
PRESIDENT	Christine Morissette
VICE-PRESIDENT	Bart Wittke
TREASURER	Lisa Dorian
SECRETARY	Ned Lemley

#### DIRECTORS-AT-LARGE

Marianne Alto	Bryan Teixeira
Craig Hamilton Shier	Janine Wear
Linda Bouchard	Doug Eastwood
Stan Fowler	Karen A. Gallagher
	Brenda Macevicius

#### **STAFF**

Executive Director	Dale Weston
Coordinator of	
Administrative Services	James Austin
Program Clerk	Isabella Luke
Coordinator of	
Support Services	Curtis Magnuson
Social Worker	Roshni Narain
Support and Education	
Worker (Island Outreach)	Shari Dunnet
Coordinator of	
Street Outreach	Jaine Mullally
Street Outreach Worker	
Coordinator of Volunteers	JoAnn Reid
Special Event &	
Communications Officer	Holly Nelson
Coordinator of	
Education Services	Aaron Severs
Education Assistant	Barb Chester



#### UPDATE READERSHIP SURVEY

In order to provide you with the information you want to read, and when you want to read it, we ask that you take time to answer the following questions, and drop this survey in the mail to us at #304, 733 Johnson St., Victoria, V8W 3C7. Thank you for your time!

- 1. Do you always/sometimes/never read <u>The Update</u>? comments:\_\_\_\_\_
- 2. Do you find the information and articles helpful and informative? yes no comments:
- 3. What changes, if any, would you like to see made regarding the content, design, or layout of <u>The Update</u>? comments:
- 4. In order to cut costs, we are considering producing <u>The</u> <u>Update</u> once every two months. Would you be supportive of this change? yes no comments: