

ARC News

April, 2001
Volume 5, Issue 1

Hold On...

Hold onto faith;
it is the source of believing that
all things are possible.
It is fiber and strength of a
confident soul.

Hold on to hope;
it banishes doubt and enables
attitudes to be positive and
cheerful.

Hold on to love;
it is life's greatest gift of all,
for it shares, cares,
and gives meaning to life.

Hold on to family and friends;
they are the most important
people in your life,
and they make the world
a better place.
FOR..
they are your roots!

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for the AIDS Resource Centre – Okanagan & Region

“HIV INCIDENCE RATES RISE” The Dangers of a False Sense of Security

While Africa battles a disease that's killing millions, expensive drug 'cocktails' appear to have kept AIDS at bay in Canada. New figures, however, show the new medicines may have engendered a false sense of security. A cursory look at recent epidemiological figures shows that *HIV incidence rates are once again on the rise*. According to the latest report of the BC Center for Disease Control, which shows figures for the first half of year 2000, if the current trend continues, year 2000 will be the first year since 1996 that incidence rates have gone up in BC. What is even more significant about these figures is that it is clear from the data that the incidence-rate

increases are occurring predominantly among the Men Having Sex with Men (MSM) risk category. Indeed, compared with 1999 when MSM accounted for 22% of all new infections, in the first half of year 2000, MSM accounted for **29%** of new HIV infections. This figure does not include all of the infections in this risk category that were reported in the “Unknown” category which also accounted for a whopping 29% of all new infections over this same time period. Taken together, these figures show a worrisome trend, that if not reversed may set us back into the era of the 1980s when the gay population was being decimated by HIV/AIDS.

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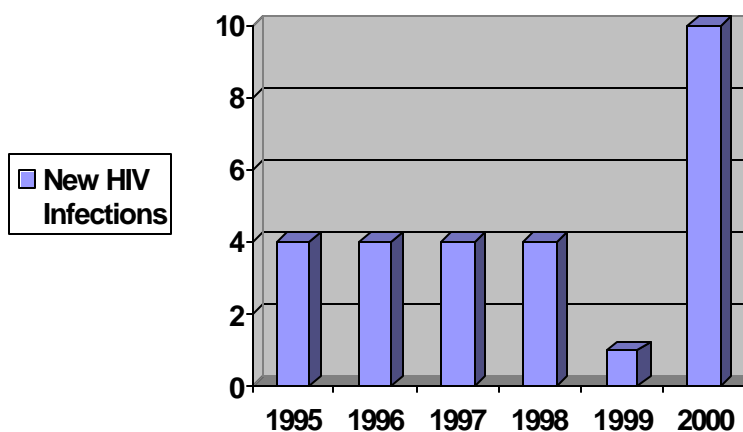


Figure 1: HIV Incidence Among Vancouver Vanguard Project Participants (MSM)

"Youth AIDS Activists"

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While attending a conference in San Francisco on overcoming barriers to condom use, it was hard not to notice that this issue of the rapidly rising incidence rates among San Francisco's gay population has more than a few people deeply concerned. Apparently, the rates of HIV infection have doubled in San Francisco since 1997, and considering that San Francisco is a "ground zero" for HIV/AIDS trends, it is not surprising that the "aftershock" is now being felt here in British Columbia. This being the case, it's not hard to imagine that the same community norms that have been developing in San Francisco that have directly fueled the renewed HIV epidemic, will soon be entrenching themselves in our own communities. What I am referring to here is the community norm that has become trenchant in the San Francisco gay population of not using condoms during anal intercourse. According to the advisor to the Mayor on HIV/AIDS policy in San Francisco, Michael Shriver, the single greatest challenge for San Francisco public health is to influence community norms to make it socially fashionable once again for the City's gay population to make effective use of condoms.

One may ask the question though, considering the devastation the HIV/AIDS epidemic has caused for untold millions, how could such a community norm that flies in the face of so much of what we know about HIV/AIDS, develop to begin with? Well, the answer begins to come clear when we consider a brief history of the AIDS epidemic. Twenty years ago, when the first cases of AIDS were diagnosed in the U.S., the mysterious disease struck close to the population that is still most associated with its ravages: Gay men. But then, as the virus spread, it touched more "normal" lives, left it's urban habitat and invaded small

towns across the U.S. and Canada. By the mid-'90s, everyone was talking about AIDS, not as the gay man's disease, but as a universal threat. Schools started talking about condoms; kids were shown videos touting abstinence or AIDS prevention or both; and some cities started handing out clean needles to intravenous drug users. And then, around 1996, almost as quickly as the AIDS panic had materialized, it eased, and then slipped away as "drug cocktails" became the principle form of treatment. Around the world, AIDS-related deaths dropped by nearly 50 percent annually. The reemergence of other, less deadly STDs, like chlamydia and herpes took over the pages of medical journals and newspapers, while advances in HIV and AIDS prevention were relegated to the back page summaries. Wealthy corporations and private donors, once dependable sources of AIDS research funding, began to ease off — a 1999 Gallup survey showed a 22 percent drop that year in the number of groups making donations of \$50,000 or more to AIDS-related causes. Who can blame them? There was, after all, a new drug "cocktail" in town, and with vigilant self-medication, HIV-positive patients could now live virtually symptom-free for years. Everyone who could afford it was shoveling back the expensive combinations of drugs, and the side effects ranged from unpleasant to downright terrible; but it surely was better than AIDS.

The problem, of course, is that no cocktail has ever beaten AIDS. And now, doctors and epidemiologists fear that the availability of potent drug cocktails have lulled many in the highest-risk populations, which now include both gay men and heterosexual men and women, into a false sense of security.

There is no cure for AIDS — so why are so many acting as if there is? Some of the blame lies in human nature and our easy embrace of good news.

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Michael Hook, Editor



This newsletter is the official publication of the AIDS Resource Centre — Okanagan & Region (ARC), formerly Kelowna and Area AIDS Resources, Education and Support Society. It is published four to six times yearly. The materials in this newsletter are meant

to be consistent with ARC purposes which are:

- * to promote awareness of AIDS and related diseases
- * to develop and provide resources to combat the spread of AIDS and the HIV virus
- * to develop and provide educational resources
- * to support those living with AIDS and those diagnosed HIV+, and/or their significant others.

Even so, the opinions and comments within this newsletter are those of the authors and do not necessarily reflect official ARC policy. The newsletter does not recommend, advocate or endorse the use of any particular treatment or therapy described as information. The board, staff and volunteers of ARC do not accept the risk of, nor responsibility for any damages, costs or consequences of any kind which may arise or result from the use of information disseminated through this newsletter.

Persons using the information provided through this newsletter do so by their own decision and hold the society's Board, staff and volunteers harmless.

Submissions for publication may be sent to our offices at any time; publication deadline is two weeks prior to publication date. Submissions will be returned if a request is made in writing and an address provided. Permission to reprint and distribute this newsletter is openly encouraged.

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Website: arc@silkh.net
Internet: www.silk.net/arc/**

TOPHER TALKS..

"A Client's Viewpoint"

Once again I have been thinking about a topic for this newsletter. As usual I think of something and write it the day before it is due. This time I decided to just do a ramble and cover several different points of interest.

I am not a big fan of giving one group more importance than another, BUT after attending the latest PAN meeting (Pacific AIDS Network), I can't help but make some comments. PAN is a network of AIDS groups from across BC and the Yukon. During the meeting that took place March 2-4, three women's issues came to the forefront.

The first issue that arose is that women are being denied child custody because of being HIV +. The reasoning for this policy apparently is founded on the assumption that the HIV+ mother is going to die anyway. Funny how the world is calling HIV a chronic manageable illness, yet HIV+ mother's are being denied access to their children. If parental rights are being denied because of having a chronic manageable disease, then diabetics, MS patients, and cancer patients are also unfit to be parents and should have their children taken away as well. OR are the courts overriding the medical profession and legally telling the world that HIV is terminal and not a chronic manageable disease. I wish the world would get their facts straight so we know if we are manageable or terminal.

The second issue that was brought up is that apparently HIV+ women who get arrested on

a Friday in the province's capitol are locked in a men's holding cell and denied medication and proper clean up areas. The holding cells are designed for holding large groups of males, and thus there are no showers or private washrooms for the women to use. As for the issue of medication, since the jail system does not employ medical staff qualified to dispense the medication, women are being denied basic medical treatment. We all know how compliance to treatment regimes is important in preventing drug resistance, yet

HIV still spreading...
Get educated and
find out the real facts!

once again the legal and political system is denying basic rights ensuring access to important treatments.

Finally, the issue was raised about there being no facilities in the province that will provide detox / rehabilitation for women with children. If a mother with children wishes to go into treatment for a drug or alcohol addiction, she also has to seek out someone to care for her children while she is in treatment. If the mother cannot find anyone to care for her children, she either has to surrender her children to the proper authorities, or not receive treatment. Where is the justice in this? The social support system claims to protect women, but forces them to surrender their children when everyone knows that parenting

children is a healing factor.

As a final thought, I have read of a set of U.S. commercials that were set to run before Bush got elected. It is hoped that the funding to run the commercials will remain. The tag line of the commercials reads, "Why are we killing ourselves?". One scene shows two people about to have a bath together and one-person walks in carrying a tray with a toaster and some bread and plugs it in over the tub. The scene cuts to a fogged mirror with the tag line written in the fog. These ads are directed at people who are not practicing safer sex.

After twenty years of knowing about HIV, and 15 years of knowing how to prevent it's spread (okay there is still debate over oral sex, but moving on), why in the world are people still not practicing safer sex? Why after 20 years of learning to use condoms, are people shying away and taking up barebacking? Barebacking is the act of having anal or vaginal penetration without use of condoms.

Some people claim it is a nuisance to put a condom on. Try popping 40 pills a day every day for the rest of your life. Now that is a nuisance! People claim a lack of intimacy: Just remember that if you are unsure where your partner has been in the last twenty years, being intimate is one of the last things you might want to do. Share stories not body fluids!

In closing then, HIV is still spreading, and we know how to prevent its spread. So for the populations still uninfected, "stay safe, stay healthy!"

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Looking Back on the Health Providers Education Project (HPEP)

November 12, 1999 - March 31, 2001

Over the last year and a half I have had the pleasure of being the HPEP Coordinator for the AIDS Resource Centre, Okanagan & Region. The experience has been wonderful, and has allowed me to meet others within our community who also have had the desire to inform our community about the issues of HIV/AIDS and women. We began by creating an advisory committee made up of members from different organizations in the Kelowna area and which included HIV positive women. This group of 14 worked hard to modify the presentation manual to fit the needs of our community. The manual could then be used to educate health care professionals within our region and thus help them to understand the need for HIV testing and the care for women who are infected or affected by HIV/AIDS. This process was completed close to the end of the year 2000.

The next step was to train women who would be willing to go out into our community and share this

information with Health Care Professionals, free of charge. Seven women within the advisory committee volunteered to join this second stage of the project. They all took a 15-hour training program to enhance their listening, speaking and questioning skills. In addition they helped develop information needed to make presentations to Health Care Providers. Lots more changes were made to the Presentation manual as each woman took a look at it from a speaker's point of view. This experience created the need for time to do revisions and the reprinting of manuals, handouts and overheads. However, all this time and effort was worthwhile. Seven certificates have been given out to Kristina Levinski, Gina Baker, Connie Klempner, Janet Wilson, Arlene Henderson, Jean Shirritt, and Debbie Grey. I wish to thank them for all their hard work.

The last phase of HPEP was the implementation of the revised program within the community. I sent out letters,

made phone calls, and began to book appointments for speaking engagements within our community. We have done speaks at the Ministry of Social Development and Economic Security, OUC North Campus Social Work Class, Aboriginal schools and gatherings. The Okanagan Aboriginal AIDS Society helped to link us to the aboriginal community and facilitate those events. Many other speaks have been booked for April and May, even though time has run out and our funding is now finished as of March 31, 2001. The speakers and I have chosen to continue for now as an all-volunteer group speaking to all interested Health Care Providers. However, we are in the process of looking for more funding to help us carry on our mission of helping spread the truth about HIV/AIDS and that it can and does affect/infect anyone, even heterosexual and same-sex-orientated women. ♦

Barbara-J Morrell
HPEP Coordinator

Au Revoir Mes Ami's from Lynette....

It is with deep regret that I take my leave of the AIDS Resource Centre in Kelowna and hence the "Au Revoir" rather than good-bye.

Volunteering was a foreign concept for me, something I previously only did, in South Africa, for the church or the school. I have, however, enjoyed it *so much* that I probably hold the record for volunteer hours per month in Canada!!

I have a special relationship with many of you and I will miss you all, but you will always be in my heart and a part of my life. The following describes what being a volunteer, and being around the AIDS Resource Centre, Kelowna, has taught me..

Standing for what you believe in,
Regardless of the odds against you,
And the pressure that tears at your resistance,
...means **COURAGE** (Daryle)

Keeping a smile on your face,
When inside you feel like dying,
For the sake of supporting others,
...means **STRENGTH** (Terri/River)

Stopping at nothing,
And doing what's in your heart,
You know is right,
...means **DETERMINATION** (WWFA)

Doing more than is expected,
To make another's life a little more bearable,
Without uttering a single word of complaint,
...means **COMPASSION** (Noreen)

Helping a friend in need,
No matter the time or effort,
To the best of your ability,
...means **LOYALTY** (Merv)

Giving more than you have,
And expecting nothing,
But nothing in return,
...means **SELFLESSNESS**
(Volunteers & Jean)

Holding your head high,
And being the best that you can be
When life seems to fall apart at your feet,
Facing each difficulty with the confidence
That time will bring you better tomorrows,
And never giving up,
...means **CONFIDENCE!** (PWA's)
Thank you all.... Lynette Oosthuizen

Volunteer Corner



Hello Again!

Some sad news on the volunteer front. Lynette Oosthuizen, one of our most dedicated volunteers has left us for (hopefully) greener pastures. She and husband Chris have moved to Edmonton. We will miss all of her hard work as well as her outgoing personality. Lynette organized the AIDS Walk and Red Ribbon campaigns, put together our newsletters and much more. She was a pleasure to work with and very dedicated. In fact she is so dedicated that she has continued to process this newsletter via computer from Edmonton!! So a huge thank-you to Lynette for everything – we miss you!!

Some good news is that Lynette rounded up her own replacement. **Felicity Ching** has joined our ranks and will be working with Gary Taylor to organize this year's AIDS Walk to be held September 23, 2001. Right now Felicity is busy sorting through last year's information and has begun the process of contacting sponsors and volunteers. Welcome Felicity – it's great to have you as part of our team.

We also have two more new volunteers since the last newsletter. Anne Stack and Lauralie Westriem. They are both interested in being part of a care team. Anne has also been helping out by doing one 4 hour shift a week at our reception desk which is really appreciated.

One of our volunteers Speros Doulos and our Youth Coordinator Melissa Hill had the opportunity to travel to Vancouver to attend

YouthCo Choices training. The purpose of the training was to enable Melissa and Speros to facilitate a workshop for adults who work or volunteer with youth. Their proposed workshop will address sensitivity to youth issues, effective listening, minimizing authority and concepts such as youth voice. If you are interested in participating in the upcoming workshop please call Melissa at 862-2437 for more information. Melissa and Speros found the information they gained while at the YouthCo training very worthwhile and are excited to be able to share what they learned.

On April 22nd a Volunteer Festival will be held at Parkinson Rec Centre, and the AIDS Resource Centre will have a booth. This is a great way to make sure that our needs are expressed to the community and for people to find out about all the volunteer opportunities available in Kelowna. I would encourage all of you to come down and check out what's happening. I look forward to seeing you there.

Thanks to all of the volunteers for their many hours of hard work over the last few months.
Noreen Redman ♦

If you want happiness for an hour
- take a nap,
If you want happiness for a day
- go fishing,
If you want happiness for a year
- inherit a fortune,
If you want happiness for a lifetime
- **Help Somebody!**

A VOLUNTEER'S STORY.....

Hello, my name is **Marie Amaron**, and I have been a volunteer at the AIDS Resource Centre for four years. Never having been a volunteer before, and not having any idea what I could do, it took a few months of trial and error before I found my niche. With the help of a professional librarian, Richard Sulkers, we set up the library to be the way it is today. I think my love of books led me to this position, and my desire to do something useful in memory of my two dearest friends who I lost a few years ago.



**Marie
Amaron**

I do hope you will take advantage of the books we have to offer, which cover all aspects of the HIV/AIDS subject, legal matters, care-giving, health, grief, spirituality, and many other subjects.

You'll find me every Monday sitting behind my wee desk, ready to help in any way I can.

You may also obtain more information and resources by e-mailing or phoning the Pacific AIDS Resource Centre in Vancouver at the following toll-free number:

1-800-994-2437

or e-mail:

library@parc.org ♦



Support Plus... Client Support Information

Schedule C Update!

Recently BCPWA and the Ministry of Social Development and Economic Security released information regarding the allocation of additional funds for people living with HIV/AIDS and other severe disabilities. In this press release, they informed the public that beginning July 1, 2001, individuals receiving disabilities benefits level II will be eligible to receive up to \$300.00 for health care goods; this money will be in addition to what they are already receiving. This is great news!! However, we want to caution people that if you are not already receiving Schedule C benefits you will still need to apply and be eligible for these additional funds. The advantage when July 1, 2001 arrives is that the application process will be a lot shorter and you will receive your benefits a lot faster than the current process. Also, for those individuals already receiving Schedule C benefits, you do not need to worry if your amount is higher than the \$300.00/month, as the Ministry cannot lower your health care benefit. On the other hand, if your schedule C amount is lower than \$300.00, you can reapply and hopefully get your amount increased to the \$300.00 level. Finally, for those of you that are currently in the middle of your schedule C application with the assistance of the AIDS Resource Centre, we want to assure you that we will be proceeding as normal. Our goal is to get your application approved prior to July 1, 2001 so that you will not need to wait an additional three months. Also, if your application is higher than \$300.00, we want to get it approved before the Ministry puts a ceiling on the additional

benefits. If you have any questions or concerns please contact your Client Support Worker at the AIDS Resource Centre.

Canadian Regulatory Approval of KALETRA!

On March 11, 2001 it was announced that Canadian authorities approved the protease inhibitor **Kaletra** (lopinavir/ritonavir), previously known as **ABT-378/r**, for the treatment of HIV infection in combination with other antiretroviral medications. Kaletra will be available in capsule and liquid form, in pharmacies nationwide as of March 12, 2001. Adult dosages are usually three capsules (or 5.0 mL) twice daily with food. The dose for children 6 months to 12 years is based on body surface area. Patients do not need to refrigerate Kaletra capsules and liquid formulation if used within 42 days and stored below 25C (77F). The most commonly reported side effects are abdominal pain, abnormal stools, diarrhea, feeling weak or tired, headaches, nausea and vomiting. If you would like more information regarding this new medication or other HIV/AIDS treatments you can access information from CATIE (Canadian AIDS Treatment Information Exchange); phone: 1-800-263-1638, fax: 416-203-8284, email: info@catie.ca or on the Web: <http://www.catie.ca>.

You can also call your Client Support Worker at the AIDS Resource Centre for updates regarding HIV/AIDS treatments.

Spring has Sprung!

Spring is here, finally! The AIDS Resource Centre hopes that the sunny weather helps to improve people's outlooks and moods. We know how important sunny weather can be, especially after a long gray winter.

Please note that the AIDS Resource Centre will be closed on Monday, May 21, 2001 for

Victoria Day, and Terri Ross will be away from May 7 to 11th for a spring holiday. River Glen will, however, be available in the Kelowna office during Terri's absence.

Another reminder that Terri has drop-in available at the Kelowna office on Thursdays from 9am to noon, if you need to see her on a different day please call to schedule an appointment. Thanks. ♦

TERRI ROSS

Client Support Worker

Phone: (250) 862-AIDS (2437)

Toll Free: 1-800-616-AIDS (2437)

e-mail: tross@silk.net

"HIV incidences rise"

... continued from page 2

There is something seductive about denial — and for gay men, whose sex lives have been overshadowed by the specter of an incurable disease, the temptation to believe, to abandon oneself to the idea of a cure, must have been nearly irresistible. Even appearances can compound the denial: Thanks to the developments in drug regimens, many HIV-positive people look perfectly healthy for years, their rosy cheeks and robust demeanors meaning that potential sex partners cannot detect an infected person by appearance alone. But the latest numbers don't lie. And while millions are dying in Africa, here at the AIDS Resource Centre our task is unique: We've got to convince at-risk populations that helpful as they may be at extending life expectancy, the current treatments are not a cure!

Michael Hook - Editor ♦

The HIPPO Report

The Hepatitis C project is forging ahead here at the AIDS Resource Centre. A HIPPO Advisory Committee Meeting was held March 15, 2001 and many issues surrounding Hepatitis C in this region of BC were discussed. Also, it was decided that a simple model of the terms of reference for the HIPPO Advisory Committee would be used. Each member of the committee has prepared a paragraph about his or her particular role on the committee so that in case one member is unable to continue serving for the entire three years of the project, a suitable substitute might be found. It was announced that the Hepatitis Clinic near Kelowna General Hospital has now officially opened and is headed by the only hepatologist in the Okanagan Valley, Dr. Pina Micheletti.

Hepatitis C Round Table Discussions in Victoria, BC

On Thursday, February 15th and Friday, February 16th, Alan Franciscus, the founder of the HCV Advocate gave two excellent presentations. The information was well organized and the discussions (sometimes heated) made a lot of good points and brought out helpful information for those in attendance. The Thursday session was held at the Capital Health Region Building on Cook Street and it was intended for health care professionals. "Hepatitis C – A Viral Mystery" a video produced by Stephen Steady was shown and questions that followed were answered by either Alan Franciscus or David

Mazoff. At this particular session it was announced that the Capital Health Region was seeking to establish a Hepatitis C Clinic in Victoria.

The Friday session took place at Begbie Hall in the former nurses' residence of the Royal Jubilee Hospital. On the date, the video "I have Hepatitis C" was shown. A nasty snowstorm deterred some people, but overall the attendance was very good. Most people were from Vancouver Island, however there were people from Seattle, Kelowna, Nelson, Grand Forks and other parts of the province. This day, Dr Chris Fraser from the Swift Street Clinic was available to answer any questions the audience may have had regarding treatment issues, side effects and the like.

Parent Resource Fair

On Tuesday February 20, a Parent Resource Fair was held in Osoyoos, BC at one of the elementary schools. The Hepatitis C project was asked to set up a booth and a combined HCV/HIV awareness booth was put together at this Fair. The two volunteers, Tim and Janet looked after disseminating information on HIV/AIDS and Hepatitis C.

Hepatitis C Information Sessions (Stand Alone)

One of the notable results of the Hepatitis 101 presentation to ARC's Speakers Bureau members is the fact that we now have volunteers ready, willing, and able to address organizations who request Hepatitis C stand-alone information sessions.

The first of these was given on February 26 to the Servants Anonymous organization. Julie, Janet and I shared the burden of doing the presentation and the group was delighted with it. It is hoped that SAS will become a regular request for information sessions in the future. Congratulations Janet and Julie on a job well done!

Information Sessions to First Nations Bands

Following in the tradition of the Round Lake Presentations, joint HIV, HCV information sessions were given to the First Nations Bands in the Okanagan Region. The first of these presentations was given to the Westbank First Nations Band and included with the AIDS 101 and HEP C 101 was an information session from the HPEP Coordinator, Barbara-J Morrell. Overall this session was very successful. Also present at this one were: Jean Shirritt, Michael Hook, Julie Desautels and Barb Hill. There were three more sessions, which followed on the following dates: March 2, 2001, March 9, 2001 and March 22, 2001. All sessions had good outcomes. ♦

Merv McLeod - HIPPO Coordinator

"Topher Talks"

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For those of us infected, we need to do everything in our power to stop the spread of this disease. Get educated, practice safer sex, support those already infected, and take time to find out the real facts. Contact the AIDS Resource Centre at 250-862-2437 or 1-800-616-2437. Or better yet take one of our training sessions for basic AIDS 101 training. ♦

NOTICE BOARD

The Health Care Providers Education Project (HPEP) is now accepting invitations to do speaks to Health Care Providers. If you or someone you know may wish us to speak to your group, please call Barbara J. @ 862-2437.

Train to be an AIDS101 Presenter!
The AIDS Resource Centre is still taking registrations for our dynamic new Presenter's Training program taking place every Tuesday evening (6:30 pm-8:30 pm), Until June 19, 2001
Call Michael or Jean @ 862-2437

ARC DROP-IN HOURS
Terri Ross, our Client Support Worker, has drop-in hours on Thursdays from 09h00 - 12h00. If you wish to see her at other times, an appointment is necessary.

Retreats Offered.
BCPWA is offering three retreats this year:
1) The all-famous Loon Lake retreat
2) Camp Howdy at Halloween
3) A second part to the spiritual retreat.
If you wish to attend one of these retreats just call BCPWA (if you are a member) and ask to be put on the list for an interview
Call: 1-800-994-2437

Aboriginal AIDS Society
Hours of operation are Monday-Friday 8:30 AM - 5:00 PM.
For more information call Julie @ 250-862-2481

Core-Training
Wednesdays on: May 9, 16, 23, 2001 at 7:00-9:30 pm at the AIDS Resource Centre
Free for ARC Volunteers.
Register by calling Jean @ 862-2437.

OUR THANKS GO OUT TO..

Board members of ARC & OAAS for their time & support;

Starbucks Coffee;

All volunteers of the AIDS Resource Centre donating their time and skills both at the front reception desk, and in the Education Department;

Issac of NAC Technologies for all his work and expertise setting up the new server-based computer system;
James Banko for helping to raise HIV/AIDS awareness in a recent Okanagan Saturday article, and for all his assiduous lobbying efforts to attract an HIV/AIDS medical specialist to the Okanagan Valley.

Joint Speaker's Bureau Meeting / Hepatitis Info Session!

All Speaker's Bureau Members invited
Wednesday, April 25, 2001
6-9 pm in Board Room.

"Speaking to Youth" Workshop
to be held Saturday, May 26, 2001
9:30 am to 4:30 pm, ARC Boardroom.
Open to all. No cost. Call Melissa @ 862-2437 for additional information



WHY ARE WE STILL WALKING?

“Because.....
There is Still No Cure”

Please join the AIDS Resource Centre Okanagan & Region for our 5th Annual Okanagan AIDS walk on September 23, 2001. The walk will again take place at the Waterfront Park (at the Dolphins) in Kelowna. To maximize the profile and awareness of AIDS we will also be supporting a run on the same day. Information TBA.

We look forward to your participation as a sponsor, volunteer and/or participant. SEE YOU ALL THERE!!

For full information contact the AIDS Resource Centre at 862-2437 or e-mail walk2001@silk.net or fill in the form below.

- Business/ Organization Name _____
- Address _____ City _____ Postal _____
- Telephone _____ Fax _____ Email _____
- Contact Person(s) _____
- I am interested in supporting the AIDS Walk, please send me information regarding:
☐ TEAM ☐ INDIVIDUAL ☐ CORPORATE ☐ VOLUNTEER

See Supplementary Notices on Back

AIDS Resource Centre
 #202-1626 Richter St, KELOWNA, British Columbia, Canada V1Y 2M3
 TEL: (250) 862 – AIDS (2437)
 FAX: (250) 868-8662
 E-MAIL: arc@silk.net
www.silk.net/arc

Call for Mural Art Submission

The World AIDS Group of BC is calling for submissions for the creation of a mural in a community outside the Lower Mainland. The project will include the following:

- The mural must address a theme or themes associated with HIV/AIDS; ie the impact of HIV/AIDS on the local/global community, gender relations and HIV/AIDS, injection drug use/steroid use and HIV/AIDS, etc.
- The mural must exceed 6 feet square.
- The artist must be a resident or former resident of the community the mural will be located in.
- The artist must secure the wall space for the mural's permanent installation.
- The WAG logo, name, and e-mail address are to be included in the mural.
- A \$3,500 grant is available for all supplies and material costs, and to remunerate the artist for the creative process (including all labour costs).
- The mural must be completed by August 31, 2001.

Please include a written submission detailing how you will meet the above criteria and a mock-up of the proposed mural art.

Mural Art Submission Deadline: May 31, 2001

The World AIDS Group of BC offers youth and young adults opportunities to learn about sexual health and sexually transmitted diseases including HIV/AIDS, in both a local and global context. Skills training and community development are encouraged through popular theatre, art, and peer education. The World AIDS Group began as a community initiative for Vancouver's first World AIDS Day, December 1, 1988.

WAG's founders included OXFAM-Canada, CUSO, and IDERA.

For more information, please contact the World AIDS Group of BC at 604-696-0100 or wagbc@vcn.bc.ca

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