

ARC News

December, 2001
Volume 5, Issue 5

for the AIDS Resource Centre – Okanagan & Region

WORLD AIDS DAY 20 Years And Counting...

*Blind and naked
Ignorance*

*Delivers brawling
judgments, unashamed.*

*On all things
all day long.*

— Alfred, Lord Tennyson

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.... Bodies, caskets, infants, orphans, new infections, new drugs, side effects, complications.... the list goes on.

Twenty years and the score is:

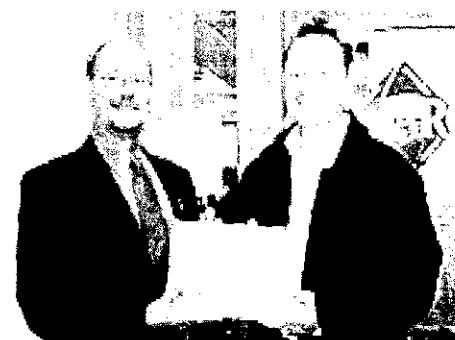
AIDS: 22,000,000 - Humans: 0.

Certainly, medical science has made some progress in the fight against AIDS. But, AIDS remains a catastrophic, fatal illness for which there is no cure. The promise of a cure is still a reality, but not one which we can expect to see realized for some years. In the meantime 36.1 million people are infected with HIV worldwide. Searching for a way to communicate the scope of the AIDS epidemic, Senator Patrick Leahy, (D. Vermont) recently said, Suppose we woke up tomorrow morning and learned that every single man, woman and child, every single person, in Miami, Minneapolis, Atlanta, Denver, Boston, Seattle, Washington D.C., New York City, Los Angeles, Chicago, Houston, Philadelphia, Dan Diego, Detroit and Dallas combined, were infected with a virus for which there was no cure. Don't you think that we would respond as rapidly and with the same kind of finances as "we did after Sept. 11th? But that's not what is happening. Instead the majority

of HIV infections and AIDS deaths occur in developing countries far from here, among people who look differently, dress differently, eat differently, worship and think differently than we do. How can we relate? And because the heaviest impact of AIDS is far away - it just doesn't seem to be a real crisis.

Twenty years ago the syndrome was called Gay Related Immune Deficiency Syndrome (GRIDS), an innocuous name for a condition which, basically only affected and killed gay men. Again these people were different, they have sex differently. It's hard to relate and anyway there was no cause for alarm, since there was no threat to 'right-living' individuals. Then we learned that people who use injection drugs were getting sick. Well, how can people live like that anyway? And who actually knows such people? Nope, no problem there.

... cont. on page 2



Top Walker Tracy

"World AIDS Day"

... continued from page 1

Here, in North America, the epidemic hasn't reached the catastrophic stage. In BC, HIV medications are available to those who need and want them. People with HIV/AIDS are living longer. AIDS isn't as visible as it was. There aren't as many people going through the final stages and dying. So again, it is far from view. It happens to other kinds of people, in other places, with other values. Yes, in our part of the world AIDS has been pretty considerate, it has kept, largely, to the shadows.

But, in South Africa, the hardest hit country in the world, AIDS is everywhere. It is the leading cause of death and very little has been done to stem the tide. President Mbeki, amidst all the death and dying, still denies a causal relationship between HIV and AIDS. And despite the fact that a single dose of the drug, Nevirapine, given to a mother in labour and a single dose given to the baby, within 72 hours of birth, can reduce transmission from mother to child by 50%, he asserts that the drugs used to manage HIV disease are not proven effective, would cost too much and are too toxic for people to take.

When denial can so resoundingly triumph over reason in the very centre of the AIDS epidemic it is hardly surprising that the real threat of AIDS can be largely disregarded in societies where only a few, marginalized, different and socially unimportant people are infected. So we can continue, very likely, for another 20 years, with AIDS somewhat under control, and mostly happening to those 'other' people, remembering how safe it is to be the 'same', and maybe the pattern that has played out in Haiti, in Thailand, in Kenya, in gay communities in 'shooting galleries' and South Africa will stay right

there with those 'other' people and not bother us. Maybe we don't need to think about the fact that, somehow, AIDS has spilled over from identified 'risk groups' to engulf entire populations.

That certainly is a comforting thought. And, who knows? It could be true. I'd almost be willing to bet on it. The numbers on the scoreboard aren't that important. And it doesn't matter whether you win or lose; it's how you play the game - if there's anyone left standing on the field.

Ron van der Meer, Editor

Comings and Goings

We are pleased to welcome Rhona Beck as a new member of the ARC team. Rhona began working at the centre in September, in the capacity of Office Coordinator. Her duties include general office and financial management, special events coordination and volunteer management. Rhona is hard working, efficient and goes about her business quietly, here at the office anyway.



On a sadder note, Jean Shiritt will be leaving after 16 months. Jean came to us through an HRDC contract (which was extended), working as Education Department assistant. During her time here she has contributed greatly to the planning, booking and coordination of Speakers Bureau presentations, Speaker Training, and volunteer coordination. She has given many extra hours at public events and Speakers Bureau presentations when volunteers could not be found to fill the shifts. Jean will be greatly missed. She's the only one who is able to tame our, often uncooperative, photocopier. Thank you Jean. We wish you every success in your next endeavor.

ARC News

Ron van der Meer, 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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TOPHER TALKS..

“A Client’s Viewpoint”

Topher Talk’s

A Client’s Viewpoint

Well another year is drawing to a close and the world rushes into silly season, otherwise known as the Christmas holidays. For some this is a time of great happiness; for others a time of great depression and sorrow. For those of you who are rushing head first in to this season with great energy and excitement, all the more power to you. But for *the rest of us*, who are in a state of panic or depression about the coming holidays, the challenge begins.

For those who are spending the holidays without family nearby, or worse yet, who have strained or non-existent relations with family, start early to look at your friends who are in the same position. Then possibly arrange a Christmas gathering with them over the holidays. The host does not have to provide everything, make it a potluck. Those that can cook make something, and those who can’t, bring bread or drinks.

If you do get invited out for a dinner over the holidays, remember to bring along ziplock baggies, in case there are leftovers that are offered to you. For those of you who are busy with family and friends over the holidays, try to remember those within our community that have no one, or can’t get home to be with family. Take a few minutes out of your day to phone them or drop by for a brief

visit. This does not have to be during the three ‘Days of Living Hell’ - Dec 24, 25, and 26. You can visit before or after.

Many people get depressed over their economic problems; for them, this is a very tough period. We all want to bring gifts to family and friends, but with cheque day for most a week early this month, budgeting is tough. Gifts don’t have to be money based. Offer to help your friends out with leaf raking, baby-sitting, or a ride somewhere if you have a car.

Don’t avoid festive situations just because gifts might be exchanged. While it might be uncomfortable to be around when people are exchanging gifts, don’t apologize for not bringing a gift, just sit back and smile. With another year coming to a close it’s a good time to sit back and reflect on what has happened over the past year.

Focus on the good things, not the negative things that happened. Let me share a few of the good things that happened to me over the past year. This is the year that I turned 40. I never expected to see this day. For the first time in 8 years, I finally reached “Undetectable” status and stayed there for 6 months. I actually reached a point where I could have the energy to go to the gym three times a week.

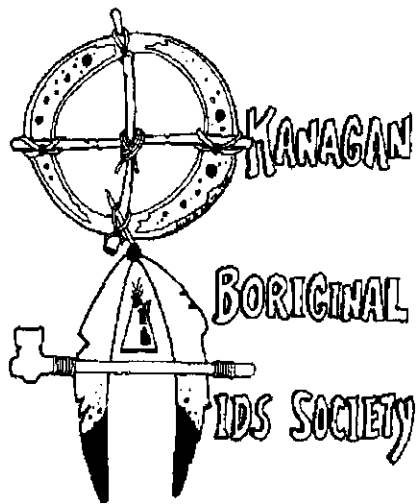
And most importantly, I have found friends who are HIV neg., and still accept me unconditionally.

Personally, I don’t make New Years Resolutions that are unobtainable. Set reasonable goals that you can achieve, and you will not disappoint yourself when the resolution is broken. Instead of quitting smoking, changing your weight, or finding the love of your life. Try “I resolve to Respect Myself More”. Maybe try “I will resolve to learn to take better care of Myself”. Or even simpler, try “I resolve to find something good about each and every day”. Eliminating negative feelings in your life goes a long way to leading a healthier lifestyle.

In closing, I would like to take this time to remind everyone that with the New Year come some time-sensitive items. If you qualify (receiving Disability Benefits), apply for your BC Bus Pass. For those who want to join a gym, remember that Parkinson’s offers us a \$65/year membership to the pool and gym. Also, because Pharmacare deductibles are slated to go up on January 1, 2002. anyone who pays for their medications may want to stock up before the year is out.

Have a great holiday season, remember to look out for the most important person in your life - That would be YOU! Get your rest, enjoy the celebrations around the city, and plan to have an even better year in 2002.

Chris MacKenzie ♦



O.A.A.S Okanagan Aboriginal AIDS Society

Julienne Desautlels is the outreach worker for the OAAS

OAAS Notes By Brian Mairs, Director, OAAS

The Okanagan Aboriginal AIDS Society (OAAS) held our second Annual General Meeting on November 6, 2001. Our thanks to Chief Robert Louie for providing the meeting space in their new health services building in Oliver. The meeting provided for the opportunity for the Board of Directors to present reports and allowed for discussion on the subject of HIV/AIDS in Aboriginal communities, both on and off reserve.

Existing board members who will serve for one more year include Adam Eneas, Mary Mowry, Sandy Eneas, and Brian Mairs. Newly elected Directors who will serve for a two-year term are: Lana Louis, Jean Hall and Margaret Eli. Adam retains the position of President, and Mary Mowry is our Vice President. Daryle Roberts continues as our Executive Director.

Our Society continues to seek out all levels of funding to continue our goal to educate the Aboriginal population, including both federal and provincial funding initiatives as well as honoraria paid to cover the

cost of presentations (from those who can afford to do so). We would like to thank all of the volunteers who assisted us in the past year and advise you that we look forward to putting you back to work in 2002. If you are looking for an opportunity to volunteer your time, don't hesitate to pick up the phone - I am confident we will be able to find something for you to do.

I Care ... Do You?

Our Society is dedicated to education for the prevention of the spread of HIV, specifically in the Okanagan Valley. It is unfortunate to note that across Canada, each day, one more Aboriginal person becomes infected with HIV. The highest cause for the spread of this disease is from injection drug use followed by heterosexual sex. Together these account for 85% of the spread of HIV in Aboriginal persons.

What can YOU do?

Educate yourself about HIV/AIDS and then educate your family, friends and community.

Help your community learn that HIV is not a virus that only infects gay men, but may infect anybody who undertakes high-risk behaviours. Ask our office for reading materials or for a person to come to your community to provide information. Julie can come out to speak to children, teens, parents, women's groups, men's groups, elders, care workers, Friendship Centres and your Chief and council.

Use clean needles and injection drug equipment EVERY TIME YOU USE! Needle exchange programs are available in some cities, but if this is not an option for you, clean your equipment with bleach and water by rinsing *twice* with bleach, then rinse very well *twice* with water (leftover bleach causes nasty sores).

Use condoms EVERY TIME YOU HAVE SEX. In the Aboriginal communities, heterosexual sex is spreading the disease twice as fast as gay sex. Understand that women are not immune to HIV, as almost half of the new cases of HIV infection reported were by women in our communities

Volunteer Corner



The Volunteer Spotlight Falls on Sheila Lund

Sheila Lund began volunteering in February 2000 in response to a call for participants in the Acts of Choice youth theatre program. She was attracted by the prospect of meeting other young, out-of-the-closet thespians. The idea of working in a theatrical program that addresses the issues of HIV/AIDS and sexual health and lifestyle choices for youth was the dealmaker. She willingly turned her hand to whatever tasks needed doing and was responsible for writing the script "One Chance", performed as part of the 2000 Acts of Choice program. Sheila has continued to volunteer as a Speakers Bureau presenter, at various awareness events and even wore the stunningly fashionable, albeit inferno-like, Care Bear Costume during this year's AIDS Walk.

Her most memorable moment, arising out of her association with ARC, was when she crashed the 'Tupperware™-like' sex toys party hosted by an unnamed ARC staffer and an elusive other person.

Her most challenging moment was when she arrived at an elementary school to address 600 students. The students were 10 and 11 year olds and there was much blushing and discomfort evident among the faculty. She never the less forged ahead - the show must go on!



Sheila Lund
Volunteer Position

Youth Theatre Director
for
ACTS of CHOICE – Youth Peer
Education Program

This is a plum position for an enthusiastic, theatre-oriented individual. It offers variety, creativity and challenge. The successful candidate will have opportunities to work on script development, directing, lighting, costume and props and more. With such a broad range of activities this position will be a great addition to your resume.

ACTS of CHOICE is a youth driven, youth focused theatre program to educate about HIV/AIDS, and informed choices. Duties include developing interactive theatre presentations together with interested youth and ARC's education department and maintaining related records. Most development and rehearsal will be in Kelowna, and there may be some performances out of town.

Skills/Attributes: acting/directing experience, good communication, some office skills, organizing, team-work, ability to motivate & sensitive to diversity/cultural issues, ability to work during school hours

(occasionally), 16-25 years of age.

Time commitment: approximately 5 hr./wk. (depending on organizing requirements and production schedule).

Please address enquiries and applications to Melissa Hill at the ARC office

Volunteer Core Training

Friday, Jan. 18 6:30 to 9:30pm

AND

Saturday, Jan. 19 9:00 to 4:00

AND

Sunday, Jan. 20 1:00 to 4:00

We have finally booked space at the OUC, KLO campus for the long awaited (2001 Fall) Core Training. Core Training is ARC's intensive and extensive, interactive education program for all volunteer applicants. This program is a 'must have' for anyone wanting a comprehensive understanding of HIV/AIDS and we encourage anyone to participate regardless of their interest in volunteer work or current availability. It covers HIV/AIDS from A to Z, including the medical, financial, social, emotional and personal impacts of AIDS; its history and the prospects for the future. Volunteer Applications are available by calling or visiting the ARC office.

The moderate \$15.00 registration fee will be reimbursed to those who complete the three-day training when they have begun to actively volunteer.

If you, or anyone you know, would be interested in participating please call Ron at the office with your names and contact information.



Support Plus... Client Support Information

Client Support

River and I have had a busy two months assisting clients with a variety of issues, the biggest undertaking was processing applications for the rental-housing subsidy. Although there were only ten units available, we are pleased to let you know that a selection committee has approved all of the subsidies. Some very difficult choices had to be made as we only had limited spaces available for our clients.

A reminder that River is in Vernon every Friday and in Penticton every second Wednesday, so if you need to speak with her for support services, it is a wise idea to call at least one or two days in advance. River can then reserve the time and be ready for you when you come in.

Monthly Nutritional Supplement ('replaces' Schedule C)

On October 12, the Ministry of Human Resources made some sweeping changes to the Disability Level II funding as it relates to Schedule C. This change effectively blocks **new** applicants from applying for food, nutritional supplements and bottled water as a health care good, and having the actual expense covered. The new legislation requires you and your doctor to complete a form (for which your doctor gets paid). The maximum benefit payable is \$165

for additional food, \$40 for vitamins and \$20 for bottled water

. If you already have a diet allowance and are approved for the "Monthly Nutritional Supplement", your diet allowance will be discontinued. The instructions on the forms are less than crystal clear and far from intuitive, so we have prepared an instruction sheet for physicians to follow to ensure that your application has the best possible chance of being approved. If you are thinking about applying for the Monthly Nutritional Supplement, please call our office so we can assist you and your doctor with the documentation.

Brian Mairs Client Support

CPP Newsletter – Staying in Touch

By now most Canada Pension Plan recipients will have received the Staying in Touch newsletter. One of the pages is dedicated to allowable earnings and restrictions. It is important to note that while CPP allows \$3,800/year in earnings before they need to be reported.

This does not apply to BC Benefits. If you are on CPP disability and are receiving BC Benefits; you must still report earnings to the Ministry of Human Resources according to *their* rules. Any unreported earnings, which are later discovered, will be deducted from your cheque.

River Glen Client Support ARC

HIPPO update.....



HIPPO Update

The Hepatitis-C Information Project Program of the Okanagan (HIPPO) has had a number of new activities lately. One of the objectives of the program is to offer help to support groups and, to this end, HIPPO has been working with a revitalized Hepatitis-C support group here in Kelowna. For several years, there had been a Hepatitis-C support group having regular meetings. For a variety of reasons, the attendance at meetings dwindled and finally, when the facilitator of the group relocated, this support group dissolved. The name of the new group is HEPKOP, which stands for Hepatitis-C – Kelowna Outreach Project. Elaine Riseley and Lisa Mortell have recently restarted regular meetings on the first Saturday of each month from 1 PM to 3 PM, and these take place at the Kelowna General Hospital. The conference room is accessible by the Rose Avenue entrance to the hospital. Recently there was a Hepatitis-C Medical Capacity survey distributed to the physicians in this region. The return rate of completed surveys was 32%. This is considered to be a very high rate of response. Considering the heavy caseload of physicians, it is, in fact, exceptional. We thank the doctor's who took the time to assist us in this data collection effort.

Merv McLeod
HIPPO Coordinator

President's Inaugural Address

Hello and greetings to all who read this publication. My name is Rick Golke and I have been chosen to be the new President of the Board of Directors for the AIDS Resource Centre. I thought it would be a good idea to introduce myself to all by way of a short letter.

I have been serving as a director on the board for the past four years. Over that time we, as a board, have undergone significant changes as has the organization itself. Currently, I believe we have a very diversified and well-balanced board. I look forward to serving my first term as president. As many of you are aware, this board operates from Carver's Policy Governance model. I believe we are truly starting to make good progress as we become more conversant with the principles of this style of governance.

One thing I want to say, right off the top, is thank you to all the wonderful



volunteers that enable this organization to deliver its services. Volunteers are a vital resource to this agency's success and I want you to know your efforts are appreciated.

From our perspective as board members, our concern lies with the long-term goals and the future of the organization. I believe we are indeed fortunate to have a very capable and dedicated executive director in Daryle Roberts. He manages the daily running of the organization with great efficiency; allowing us as board members to focus on where the organization is going. One goal we have identified in the short term is to increase the membership of ARC. Membership currently stands at 43 or so members and as a board

we have set a goal of raising the membership to 100 by the next Annual General Meeting.

To that end I would encourage all readers of this newsletter to take out a membership, if they have not done so already. As well please promote awareness of this valuable community resource and encourage friends and others to consider membership. Certainly, with a strong membership base this organization's voice will be much stronger and that will only lead to more awareness, more education and more funding which in turn will help us to make AIDS even more preventable.

I look forward to a year of opportunity, challenge and growth and certainly to meeting more of the wonderful people that are the AIDS Resource Centre, Okanagan and Region.

Rick Golke, President,
Board of Directors

Healthcare Awareness Alert

As a person living with HIV, I have become a consumer of a variety of health services over the past several years. Recently, I had occasion to visit a local health facility for services. Presumably because I was wearing an AIDS Walk Volunteer T-shirt, I was asked "Can I assume you have AIDS?" and then "There is nothing in your chart about it. I should have been wearing gloves!" It seems there are still people who fear that you can catch it on the wind and feel that it might be handy if HIV+ individuals were identified with a big "A" on their foreheads. The procedure I went in for was non-invasive, to the extent that no direct contact was needed. Most disturbing to me was that the room I was in gives on to a hall that serves as a waiting area for other patients.

I was not extended the professional ethics or simple courtesy of having the door closed before this discussion was launched into. This is the *second* time that medical personnel have felt at liberty to disclose or discuss my HIV status in a public setting. Even if we were discussing so pedestrian a matter as athlete's foot, I would expect consideration for my right to privacy. Despite years of information about the disastrous results which can arise from careless disclosure of personal health information (especially HIV) there are still some gaps in healthcare etiquette, ethics and education. It would be wrong to suggest that these lapses are common. Like most people with HIV I use the services of doctors, dentists, lab technicians,

nurses and a host of others as part of my HIV management. Most of the time I receive excellent service and I appreciate the care that I get. But as thick-skinned as I have become about people's reactions to my positive status, I do not react well to the suggestion that I am irresponsible or would casually place anyone at risk for contracting HIV from me. The experience was disturbing and dehumanizing.

I would like to think that my negative experiences were unique. But I'm not confident, somehow, that they were. If you have a similar experience in a healthcare setting I would like to know about it. Should it prove that the problem is extensive we will want to think about the best way of addressing it.

Ron

NOTICE BOARD

● ARC DROP-IN HOURS

River Glen, 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.

Aboriginal AIDS Society



For more information call Julie @ 250-862-2481

World AIDS Day December 1, 2001

Client Christmas Party

Beehive Bistro, 537 Lawrence Ave.
Sunday Dec. 2 @ 6:00

Santa will be making a visit with presents for the children!

Holiday Hours of Service

The AIDS Resource Centre will be open
Dec. 24 8:30 - 4:00
Dec. 25 & 26 CLOSED
Dec. 27, 28 & 31 10:00 - 4:00
Jan. 1 CLOSED

OUR THANKS GO OUT TO...

the new Board of Directors:

Rick Golke, President; Lorri Gasser, Vice-President; Cliff Turner, Treasurer; Donna Hill, Secretary; and Directors Colleen Cardiff, Earlene Roberts and Julienne Desautels.... for volunteering to take the helm.

To Ray Shirritt, who repeatedly, and often on short notice, stepped into the breach to fill gaps in our volunteer comple-

ment at many, many of ARC's awareness and fundraising events. Thanks Ray.

To Lynette Oosthuizen who continues to format this newsletter from somewhere in Alberta.

To all the volunteers who helped with the Red Ribbon Campaign. Too many to name, but they stood in the cold and drizzle offering ribbons to passersby and taking donations.

Thanks to everyone who came out to the Annual ARC Open House. We hope they enjoyed the visit and learned more about our programs and services.

Corrections:

Last issue thanks went out to Kevin Hill's band, Rusty Parts. It is actually Kevin Gower's band of the same name.

The statement that the Condom Cops programs has been approved for next year was premature. We remain optimistic.