

For the AIDS Resource Centre — Okanagan & Region

" If you think you are too small to make a difference, you have never been in bed with a mosquito."

- the Dalai Lama

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Medicinal Marijuana

By John McDonald, staff reporter, Kelowna Capital News. Reprinted with permission

A local man suffering from AIDS and hepatitis C says he's being stonewalled in his pursuit of medical marijuana, a drug he claims is helping keep him alive.

"Without it, I can't keep my other medications down," says Richard Babcock, 43, of Westbank. "I just puke them up."

Sitting in the living room of his rented trailer, an agitated Babcock brandishes a letter from the Ministry of Human Resources explaining why it has denied him funding for the drug even though he has an exemption from the federal government that allows him to use it for medical purposes.

The letter informs Babcock that purchasing a controlled substance is illegal regardless of his exemption, and that the ministry has no authority to either purchase medicine or give out money for their purchase.

"All my other prescriptions are covered but not this one," says Babcock grimly.

His fight began last year when he applied to the Office of Cannabis Medical Access, a division of the federal government's Health Canada, for what's known as a section 56 exemption.

It allows him to possess up to 120 grams of dried marijuana for medical use and spells out the strict conditions that apply to the exemption.

Like others in his situation, Babcock had expected to be able to get access to marijuana grown by the federal government. However, an abrupt about-face by federal Health Minister Anne McLellan last fall means the pot grown under contract in an abandoned mine in Manitoba is off limits, reserved for clinical trials.

Babcock turned to the Compassion Club, a non-profit society started in the '90s in Vancouver that dispenses the clean marijuana that Babcock and others like him require.

"I know their stuff has been completely flushed of all chemicals," he says. "I can't take a chance on the street stuff. It could kill me."



Photo by Gordon Bazzana, Kelowna Capital News

But with a price of between \$6 to \$10 per gram plus the \$10 delivery charge, Babcock says it's out of his league. "And the delivery charge is the same, even if you order one or two grams," he says. "I'm on(acdisabilitypage 3)

TOPHER TALKS... A Client's Viewpoint

THE POWER OF ONE



"....keep on buzzing in someone's ear and if that does not help, sting them where they know they have been stung."



During the Positive Gathering held in Vancouver in November of 2002, Louise Binder, Cochair of the Canadian Treatment Action Council, was the Keynote Speaker.

One of the quotes she used during her talk was by the Dalai Lama, " If you think you are too small to make a difference, you have never been in bed with a mosquito." This was also included in her article "Louise's Top Ten Lessons", in Living + March/April 2003. When I first heard this quote, I wrote it down. It is something that hit home for me.

There is also a TV commercial that talks about the "Power of One, and One More" I might be wrong, but I believe the commercial is either for Mentoring, or Volunteering. Most great ideas, and most large movements start with the power of one individual that had a hope, dream, or even fear. They have found a cause they believe in fighting for, then their single voice rallied others, and like another TV commercial from years ago, "I told two friends, and they told two friends, and so on and so on." Okay, I watch too much TV.

The AIDS Movement started in the very early 80's with individuals who were family or friends of a person diagnosed with an HIV infection. Even to this day, there are small groups organizing in small towns and villages across Canada, that are started by family members who suddenly have to help a loved one that has been diagnosed. One of the biggest reasons for some people to organize is, once a positive person returns to a small community for family support, they discover the high level of discrimination and barriers that the positive person faces.

Positive People have been starting causes for years, for access to better treatment/medication, access to financial aid, the right to work, even the right for their child (whether infected or not) to school or daycare. We even have a local person who has won the right to legally use Medical Marijuana, and is now fighting to have it provided under MSP. Will he win? It is hard to say. But with belief in the fight and willingness to take it as far as needed. it may pay off in the end.

Unfortunately when individuals are isolated, the "Power of One" seems like David against Goliath. For individuals fighting a lifethreatening illness, especially one that is stigmatized like HIV/AIDS, the struggle/battle is almost unbearable. But remember the Dalai Lama's quote, "If you think you are too small to make a difference, you have never been in bed with a mosquito."

Where we are today in the battle against HIV/ AIDS is thanks to the fights of a lot of mosquitoes, that have been hovering over beds of politicians, lawyers, doctors, and anyone else that is standing in the way of our cause. Some of these mosquitoes have been squashed like a bug. But like the ever-present mosquito, there is always another one or two, or one hundred to take their place. So keep on buzzing in someone's ear and if that does not help, sting them where they know they have been stung.

MICHELLE KENNEDY MEDICAL MARIJUANA LEGAL FUND



Richard Babcock and the AIDS Resource Centre have set up a fund to assist with financing legal battles of people who have difficulties accessing medical marijuana despite holding valid Health Canada permits. (Michelle Kennedy from Kamloops is the first donor to the fund.)

To contribute, please make out a cheque or money order to The Michelle Kennedy Medical Marijuana Legal Fund, and drop it off at ARC.

Medicinal Marijuana (cont)

(Continued from page 1)

claim. I can't afford that."

Babcock was politely but firmly turned down by the College of Pharmacists in his request to have marijuana included in the drug schedules regulation.

Again, the reason stated is that marijuana is subject to the controlled drugs and substances act plus the narcotic control regulations, which the college claims supersedes the drug schedule.

Even the Office of Cannabis Medical Access has put obstacles in his path, denying him the first person he put forward as his designated grower because the man lived in Ontario and was already the subject of an earlier application.

The last straw, Babcock says, came when a



Photo: Gordon Bazzana, Kelowna Capital News

local infectious disease specialist, the doctor who had previously supported his application for a section 56 exemption, recently refused to sign the application for its renewal at the end of May. "He said he'd only signed it the first time as a courtesy," Babcock says. He leans back on the couch of his trailer and lights up a joint, his second of the day, and takes a long toke, before telling his story.

Born in Hamilton, Babcock was raised in Abbotsford, though in a less-than-tranquil home. "I was on the streets by the time I was 14," he says.

What followed was a patchwork life of odd jobs, petty crime and drug abuse.

When he was 29, Babcock drifted into IV drug abuse, shooting up cocaine whenever he could get it.

It was in 1998 that it all caught up with him in the form of a positive test for both HIV and hepatitis C and B.

"I quit right then and went into treatment," Babcock says. "I haven't done it since but it was too late."

Now Babcock exists in semi-isolation in his trailer, his T-cell count too low to risk catching a cold or flu. "I don't go out or socialize much at all. I don't have anyone over that's sick," he says. "That could kill me."

He's fatalistic about dying, knowing it could go either way if he doesn't respond to treatment.

"I'm at a crossroads," Babcock says. "If I don't get proper treatment, I won't make it but if I get proper treatment, and that includes medical marijuana, there's the chance for more time."

There are some bright spots. Somewhere along the line, he fathered a daughter with whom he has since rekindled a relationship after not seeing her for 15 years.

And Babcock has recently hooked up with a grower in B.C. who is providing him with clean marijuana for \$100 an ounce, much less than he can get it from either the Compassion Club or on the street.

"I'm going to get it one way or another because it's my only chance at living," he adds.

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Kate Alexander, Editor

This newsletter is the official publication of the AIDS Resource Centre-Okanagan & Region (ARC). It is published four to six times yearly. The materials in this newsletter are meant to be consistent with ARC purposes, which are to: a) promote awareness and prevention of HIV/AIDS; b) develop and provide educational esources; c) support those infected or affected by HIV/AIDS. Even so, the opinions and comments within this newsletter are those of the authors and do not necessarily reflect official ARC policy. ARC does not endorse the use of any particular treatment or therapy. 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 featured in this newsletter. Persons using the nformation provided 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 requested in writing and an address provided. Reprinting and distributing this newsletter is encouraged.

ARC Board of Directors

Rick Golke, President Julie Desautels, Vice-president Donna Hill, Secretary Clifford Turner, Treasurer Colleen Cardiff Jack Lakavich John Langston Kevyn O'Callaghan Wayne Ross

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Website: www.arcok.com

Volunteer corner



Volunteer Profile Martin Wortman

Martin writes:

"I have been involved with the Okanagan Aboriginal AIDS Society and ARC as an Office/ Speakers' Bureau volunteer for a little over two vears.

"The opportunity to give presentations to groups of Aboriginal as well as non-Aboriginal people around awareness and prevention of this insidious disease. HIV/AIDS. has been rewarding on many levels; improving my communication as well as people skills. Another benefit is a renewed interest in my Métis heritage."

Martin's is one of the faces we see most often here at ARC. His friendliness, calm demeanor and willingness to work hard are really appreciated by all the staff and clients. Recently, he assisted Kate, the Educator, with all the administrative running around necessary to put on a successful Core Training. He also took on the duties of a Small Group Facilitator, and is a frequent speaker at Crossroads and other groups. Thanks. Martin!

Directors' Bios

where located on Hunter Court. employee of Vernon School Currently he is serving as the District and is working her way **Jack Lakavich** was Overseas president of the Board and has through an English Honors BA Personnel for the United been in that position since Sep- at OUC. For a slight grasp on Church from 1967-1996. He tember 2001. Outside of ARC, life's hectic pace, she also writes served in Fiji, Japan, Bangla-Rick works as a funeral director and publishes poetry. with First Memorial Funeral Kelowna since May of 1995.

Services. He has lived in Wayne Ross has been a board Kelowna in 1998. He is the member for approx 6 months. Chair of the Outreach Core at Wayne is a local real estate First United Church.

Rick Golke has been a board volunteer, educational facilita- and also operates a Bed & member with ARC since Sep- tor/trainer, and board member Breakfast. He has two children tember 1997 when the offices for the last six years. She is an and three wonderful grandgirls.

> desh, India and the Philippines. He retired and moved to

Donna Hill has been an active agent for Macdonald Realtors

Poetry			
F*cked-over & forgotten This bittersweet existence, this thing I call my life. The pleasures I experience, are of my own design. Am I up to going the distance? Only time and God will tell. The inevitability of the moment brings tears to my eyes. In the end I will lie bleeding, having been stigmatized to death. -Richard Babcock			
Refugee "A person who flees to safety"	I feel like a refugee on a boat in Vancou Denied entry by the government. They send out a good doctor every three You have to get through throngs of oth Just to get to the doctor's cabin. There is very little food as it is rationed. Conditions are poor, we are frustrated to As to when we will be able to dock. There is no end in sight!	ee months ner refugees	

MAY 2003

ARC Event Calendar 2003

<u>January</u>	February Feb, 15th 1st Annual Night of 1000 Dinners	<u>March</u> March 15th 1st Annual ARC Auction & Gala Evening
<u>April</u>	<u>May</u> May 9th 1st Annual Variety Show May 25th 20th International Candlelight Vigil	June June 14th 1st Annual Battle of the Bands
July	<u>August</u>	<mark>September</mark> Sept. 21st 7th Annual AIDS Walk
<u>October</u>	November Nov. 22nd-29th AIDS Awareness & Red Ribbon Campaign	December Dec. 1st Worlds AIDS Day ARC Open House

Upcoming Events! <u>1st Annual Variety Show: An Evening with the Divas</u>

The AIDS Resource Centre would like to invite you to an evening of entertainment with some of Vancouver's top professional female impersonators, performing live with local talent.



8 pm Friday, May 9th 2003 ~ The Performance Centre 1376 Ellis Street~ Tickets \$25 available at: The AIDS Resource Centre #202 1626 Richter St. Funktional 2934 Pandosy St. and at the door

<u>20th International Candlelight Vigil</u> 7:30 pm, May 25th, Benvoulin Church Gazebo, 2279 Benvoulin Rd.

All members of the community are invited to attend the International AIDS Candlelight Memorial. This year marks the **20th Anniversary** of one of the world's largest annual community-based AIDS event; locally. The AIDS Resource Centre has coordinated the event locally for the last 5 years. Please consider attending this memorial to show your concern and compassion for people living with HIV/AIDS and for those who have lost a loved one. We hope that you will take the time to come, contribute your vision for tomorrow, and possibly share how HIV/AIDS has had an impact on your life.



For more information or to get involved with any of these events please contact Melissa @ 862-2437 or e-mail mhill@arcok.com.

Client Support plus

Fair Pharmacare

By Terri Ross,

Client Support Worker



You may have heard about the Government's new plan for Pharmacare, called Fair PharmaCare, and you may have some questions The Ministry of Health has or concerns. produced a pamphlet designed to answer your questions you can pick it up at your local Ministry offices or go online to access it www. gov.bc.ca.

The goal of the new Fair PharmaCare program is to provide more assistance to people with lower incomes. The new plan will assist families to pay for eligible prescription drugs based on their net income. This means the lower your income the more assistance the government will provide towards your prescription drug costs. The new program will start May 1, 2003 and eligible individuals must register with the

government before May 1, 2003. You can register by mail, phone or Internet, call 1-800-**387-4977** or visit the web site previously mentioned.

Now, for individuals on Disability or individuals that receive Medical Services Plan (MSP) premium assistance, you have already been registered for prescription drug coverage for 2003. Further, the Minister of Health assures British Columbians that individuals with HIV/AIDS, cancer, mental those who need palliative drugs; illness. transplant and renal patients, hose on income assistance, in long-term care facilities or coping with cystic fibrosis, as well as children with severe mental disabilities registered with the home program of the Ministry of Children and Family Development, will continue to have the same drug coverage.

OUC Bachelor of Social Work Practicum

Many of you have had the opportunity to meet Willow Lloyd, our 4th Year BSW Practicum student. Unfortunately if you haven't met her yet you only have a couple of weeks left to do so. We are sad to year Practicum with ARC and stayed on as paid say that Willow will be moving on from ARC after staff while she worked on her degree. Well, now completing her practicum at the end of April. We would like to thank Willow for all of her hard work and dedication; it was delightful to work with her at the AIDS Resource Centre on a part time basis and we feel that she was a valuable part of our team (3 days/week). She will do outreach in Vernon and and contributed to the organization in many ways. Penticton, which will be a relief for many of our Good luck with your future, Willow, and keep in clients! touch!

ner for graduating with their Bachelor of Social Work Degrees!!! As many of you know our client Support Worker Chris Jenner completed her 3rd that she has completed her education we are pleased to announce that she will continue working

So once again thank you to both Willow & Chris— On the same note, we would like to say CON- and Congratulations!!! GRATULATIONS to both Willow and Chis Jen-



Camp Moomba: Summer Fun for Kids!

For those of you who have children or know of any child that is infected or affected by HIV/AIDS, you may be interested in sending them to Camp Moomba this summer. Camp Moomba is for children ages 6 to 16 and takes place in Port Moody BC. For children residing outside of the Lower Mainland, transportation will be covered and the Camp is FREE! There are many organized activities for the children, which include; kayaking, fishing, canoeing, swimming, arts & crafts, drama, a leadership program etc. Camp takes place between June 29 to July 5, 2003 so you should register as soon as possible, you can pick up a registration form from your Client Support Worker at the AIDS Resource Centre or you can contact Camp Moomba directly at 1-888-442-5437.

Holidays

Speaking of summer fun, Terri Ross will be taking holidays from May 12 till May 19, 2003. During her holidays Chris Jenner will be working full time, so if you haven't met Chris, come in and say Hi!



O.A.A.S. news

First Nations Traditional Healing

By Brian Mairs

OAAS Program Coordinator

What Is First Nations Traditional Healing?

Most First Nations have traditions about health and illness. These traditions are not based on western science. Instead, they come from the Nations' beliefs about how individuals fit in the web of life. This web includes the Nation, all humanity, the earth, and the universe. Many healing traditions focus on harmony. Healing occurs when someone is restored to harmony and connected to universal powers.

Traditional healing is "holistic." It does not focus on symptoms or diseases. Instead, it deals with the total individual. Different people with HIV disease may get different treatments. Healing focuses on the person, not the illness.

Certain people in each Nation are recognized as healers. They receive special teachings. Healing traditions are passed from one generation to the next through visions, stories, and dreams. Healing does not follow written guidelines. Healers work differently with each person they help. They use their herbs, ceremony and power in the best way for each individual. Healing might involve sweat lodges, talking circles, ceremonial smoking of tobacco, shamans, herbalism, animal spirits, or "vision quests". Each Nation uses its own techniques. The techniques by themselves are not "traditional healing". They are only steps towards becoming whole, balanced and connected.

How Does Traditional Healing Interact with Western Medicine?

Healers have different views about combining their methods with western medicine. Some do not see any value in medical science or treatments. Others believe that the systems deal with different aspects of an individual so there is no problem using both.

Most western physicians do not understand the value or importance of traditional healing to their First Nations patients. A few, especially in areas with large First Nations populations, are more open to traditional healing.

If you combine western medicine and traditional healing, let your physician know about any treatments you are using. There might be interactions. For example, a traditional healer might use a herbal preparation to help you sleep. In that case, your physician would probably not want you to take sleeping pills. Your healer might want you to use herbs to cleanse your system. These might interact with western medications that you are taking. Your physician might help you avoid negative interactions.

The Bottom Line

First Nations traditional healing is a holistic approach to health. Each Nation has its own healing traditions.

Traditional healers do not follow a standard procedure. Instead, they apply their skills to each person individually.

By themselves, techniques such as sweat lodges or vision quests are not "traditional healing." They have the most meaning as part of an overall healing tradition.

Traditional healers and western physicians are often sceptical of each other. However, it is best if your care providers all know about everything you are doing for your health in order to avoid possible interactions between different techniques.



By Brian Mairs OAAS Program Coordinator

Are you confused about the meaning of holistic? Have you ever been discussing holistic health and discovered that the other person was defining holistic in a totally different way than you? This is not surprising, since there are no accepted standard definitions for holistic, holistic health, or holistic medicine. Most usage falls within two common definitions:

Holistic as a whole made up of interdependent parts. You are most likely to hear these parts referred to as:

1) The mind/body connection,



(Continued on page 8)



MAY 2003

Letter to the editor

What the hell am I doing here – or so it felt after reading Topher Talks in the March ARC newsletter. It's a client's viewpoint, yes, and I respect that.

"Commitment and loyalty are behavior and personality traits found in every type of worker, paid or volunteer." However, I find it almost absurd for anyone to state that those who undertake "paid work" on the HIV/AIDS issue are less committed than those who volunteer. The writer of this article states: "...in the last few years, the AIDS movement has floundered and lost steam" and that part of the reason is because of "a loss of interest and the belief that AIDS no longer kills."

He then goes on to blame this loss of momentum on people who are "working on" the issue. Nowhere have I come across statistics to prove that doing a regular paid job on an issue depreciates the feeling of commitment to one's work. Commitment and loyalty are behavior and personality traits found in every type of worker, paid or volunteer.

I am not underestimating why the writer

thinks the job can be done any better by volunteers. Hats off to them for sure, volunteers are essential. However, my disappointment with the article is the misconstrued relation between "paid work" and volunteering. The two are very different, but both are necessary for a healthy work atmosphere. More important, both contribute to development of society.

The writer states: "Hell, most of us had real jobs to pay bills, and volunteered long hours to the movement with few rewards." To many of us, doing a "real job" requires the same commitment, dedication and loyalty.

Also, concluding the article with the statement "Let's prevent what we cannot cure" is quite reflective of ARC's mandate and almost makes the writer's opinions seem like they are also ARC's viewpoint. Believe me, I do have reservations about that supposed alignment.

- Navin Vasudev



Holistic Health cont.

(Continued from page 7)

- 2) Mind/body/spirit, or
- 3) Physical/mental/emotional/spiritual aspects.

When this meaning is applied to illness, it is called holistic medicine and includes a number of factors, such as:

- 1) Dealing with the root cause of an illness,
- 2) Increasing patient involvement, and 2) Considering both conventional
- Considering both conventional (allopathic) and complementary (alternative) therapies.

Holistic as a synonym for alternative therapies. By this definition, "going holistic" means turning away from any conventional medical options and using alternative treatment exclusively. This meaning mainly relates to illness situations, and sometimes is used for controversial therapies.

The expanded perspective of holistic as con-

sidering the whole person and the whole situation allows us to apply holistic as an adjective to anything. For example, we can develop a new project at work or re-organize our life holistically. When illness is involved, the broad definition of holistic allows us to integrate both conventional and complementary therapies. Consider adopting this holistic approach to your life.

My holistic approach

I see holistic health as an approach to creating wellness, which encourages you to:

- Balance and integrate your physical, mental, emotional and spiritual aspects;
- Establish respectful, cooperative relationships with others and the environment;
- Make wellness-oriented lifestyle choices;
- Actively participate in your health decisions and healing process.

PREVENTION news

SEX NOW!

By Kate Alexander

Educator/Speakers' Bureau Coordinator



Visit the Community Based Research Centre's website at

www.hiv-cbr.net

During 2002, the Community Based Research Centre, a Vancouver society concerned with HIV research, carried out a survey of sexual behaviour among gay men. Infections among men who have sex with men are on the rise in BC and elsewhere, despite the history of HIV infection and activism in this community. The survey was distributed at Gay Pride events in Vancouver, Victoria and Prince George. CBRC designed it to be fun and informative, as they believe good health is the foundation of good sex.

Men from all parts of BC and over 200 from out of province completed 1854 usable surveys— with men aged 15 to 78 (average 37) and a good spread of income, education and ethnicity represented.

Key findings were:

- Unprotected anal sex is becoming more common, with a rise from 14% to 19% in two years.
- Knowledge about HIV and syphilis is better among older men; youth education is critical.
- Disclosure: 70% of the men expected they would be told if a potential sex partner had HIV.
- One-third have difficulty talking about sexual safety with their partners.

- Over a third of the men were in couples, and reported unprotected sex within the relationship only (safe if both are HIV negative and truly monogamous). However, 16% of men in couple relationships reported unprotected sex outside the relationship.
- 34% of the men had experienced anti-gay abuse, with 4% subject to physical violence. Rates were significantly higher in BC than elsewhere, with Prince George worse than average for BC.
- Sexual practices did not seem to vary by bcation, ethnicity or education.

In conclusion, CBRC feels that the risks of unprotected anal sex are considerably higher than two years ago, because more healthy men with HIV are having sex; rising syphilis rates contribute to HIV transmission; and the strategy of delaying medication means newly diagnosed men are more infectious.

The survey reached men who identify strongly enough as gay/queer/bi/two-spirited to attend a pride event; more research is needed on other men who have sex with men.

Men who have sex with men still represent a 65% share of HIV-infected people in BC, yet resources to educate and support them have dropped precipitously. Gay men need a fair share of provincial funding; this group has been hit very hard in this epidemic, and the prognosis is not promising, the way things stand.

BORDER RIDERS BORDER RIDERS Press Colombia - Oregon - Washington Founded 1969

After a long and courageous battle with his health, Ken passed away at home with his loving and devoted partner Joie Lamontagne and his two dogs that were his pride and joy, along with his devoted friends. He is survived by his family—son Scott Sawyer, brothers Arnie (Fran), Lauri , Roy (Lynn), Walter (Margaret), Paul (Kim), sisters Miriam Laird (Alvin), Nancy Harju (Johnny), Margaret Zolynsky (John), many nephews, nieces and great ones.

Obituary: Kenneth Arnold Niemi

He was a long-time member of the Border Riders Motorcycle Club in Vancouver. All who knew him loved Ken. All the hearts that he touched will sadly miss him.

A Celebration of Life was held on Saturday February 22, 2003.

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NOTICE BOARD

FIX: the Story of an Addicted City

This powerful documentary by Nettie Wild is the story of how, together, a heroin addict and Vancouver's former mayor fight for the introduction of harm reduction programs

Most showings will be followed by a forum. See insert for details.

- Oliver -Oliver Theatre (April 29)
- Vernon -Vernon Towne Theatre (April 30)
- **Penticton** -PenMar Theatre (May 1)
- **Kelowna** -Paramount Theatre (May 2 to May 4)

ARC Hours

Our client service hours are **9:00 a.m. to 4:00 p.m.**

Free Coffee

Starbucks provides <u>FREE</u> coffee for ARC clients. Please ask at the reception desk for your coffee the next time you come in to the ARC office.



<u>Reiki & Healing Touch</u>

Enjoy the relaxing and balancing benefits of a quiet hour with Toshie. Call 862-2437 to book your free Tuesday session.



<u>Client Support Hours</u> Kelowna

Terri Ross has drop-in hours at ARC on Thursdays from 9:00 a.m. to noon. At other times, an appointment is necessary. Chris Jenner takes care of out-of town clients.

<u>Vernon</u>

Every second Friday, including May 9, May 23, June 6, June 20, July 4.

<u>Princeton</u>

Please call for an appointment, which will be on the second Tuesday of the month.

Penticton

Every second Tuesday: May 13, May 27, June 10, June 24, July 8.

Outside Kelowna, call **1-800-616-2437** to book an appointment. In Kelowna, call 862-2437.

Loon lake Camp



BC Persons With AIDS Society is gearing up for their healing retreats for HIV+ men and women. These gatherings of Positive People from all walks of life are taking place at Loon Lake Camp near Golden Ears Park. Dates are:

July 7-10 and September 2-5, 2003.

Don't miss out on this chance to meet new friends, enjoy outdoor activities and connect with the splendor of nature. Call now to book an interview, because space is limited (cut-off date for registration is June 23).

1-800-994-2437

Volunteer Opportunities at ARC

ARC welcomes new volunteers. Here are some of the rewarding possibilities:

- Receptionist
- Other general office duties
- Speakers' Bureau (AIDS education)
- Fundraising and Events
- Care Team member (home and hospital visits)
- Board member
- Newsletter editor

Please contact Melissa Hill if you are interested in any of these positions: call 862-2437 or email her at <u>mhill@arcok.com.</u>