



Living Positive Resource Centre, Okanagan

"The secret to staying young is to eat slowly and lie about your age!"  
-Lucille Ball

"Don't believe in miracles - depend on them."  
-Laurence J. Peter

### Important! Changes to free therapies program

By Karen Alexander

Over the past few months, we have had some challenges with our complementary therapy program because clients are arriving late, on the wrong day, or even not arriving at all for their appointments. We are very fortunate to have professionals in our community like Toshie, Kristi and Derek—all of whom—so generously volunteer their time. We also know that it is important for our clients to be able to access these free services. Here is what the treatments would cost if you needed to access these services elsewhere in the community: Reiki & Healing Touch costs between \$50-75 per one hour treatment; Massage Therapy costs \$40 per ½ hour treatment; and, Chiropractic costs \$40 per treatment.

**SO FOLKS**, if we want to ensure that our therapists continue to provide us with these services free of charge, it is essential that we all show up for our scheduled appointments. Anyone who misses complementary therapy appointments without contacting the office in advance to let us know will no longer be allowed to access these services.

The new schedule for therapies is as follows:  
**Dr. Derek** Chiropractic – every 2<sup>nd</sup> Tuesday from 10-11 a.m.

**Toshie** Reiki – every Wednesday from 10 a.m.-1 p.m.

**Kristi** Massage Therapy – every Thursday from 1:30-4:00 p.m.

Thanks for your cooperation!

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### Topher Talks! "Silence = Death"

By Chris MacKenzie

For years the AIDS movement had a slogan "Silence = Death". Back then they were talking about the need for loud, vocal activists.

The concept still remains true today, but in a more gentle voice. People infected or affected by HIV/AIDS still need to share their stories.

Agencies like Living Positive Resource Centre regularly get asked to give presentations on HIV and/or Hep C to various groups. Some

(Continued on page 6)

go/persistent silence isn't always



## HIV Drug Resistance, part two

By Jean-Guy Baril, M.D.

There are several reasons why the HIV virus may multiply in the presence of drugs.

**If a given therapy is not strong enough.** For example, instead of taking at least three drugs at the same time, the patient takes only one or two. With some exceptions, at least three drugs are prescribed at the same time to treat HIV infection.

**If the drugs are not taken on a regular basis.** The virus should never be in the presence of inadequate drug levels. Since it can multiply very quickly, it can replicate within only a few hours if drug levels are inadequate (example on the right-hand side of figure 2, below). If a dose of a prescribed drug is skipped, then the drug will be slowly eliminated from the blood. After a period of 8 to 24 hours, depending on the case, the blood's drug level is not high enough to prevent viral replication but is high enough to enable resistant viruses to develop (example on the right-hand side of figure 2, below).

### **If the drugs are stopped.**

Some drugs, such as efavirenz (Sustiva) and nevirapine (Viramune), are eliminated from the blood more slowly than others. These drugs can remain in the blood for a few days, while other triple therapy components are eliminated in a few hours. In such conditions, the virus is in the presence of just one drug for a few hours, which allow for the development of resistant strains.

### **If dietary restrictions are not adhered to.**

Some drugs should be taken with food, others on an empty stomach. If the recommendations are not followed, the drug may not be properly absorbed in the gastrointestinal tract, and its blood level may not be high enough to prevent viral replication and the development of resistance.

### **If there are interactions**

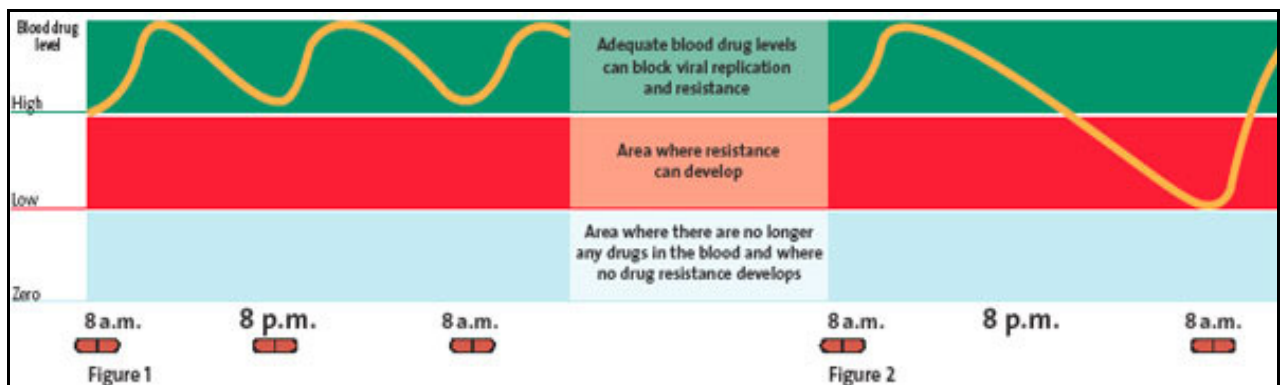
between your drugs or between your drugs and some over-the-counter products (e.g. some natural products or heartburn medications). These products can lower the blood levels of some HIV drugs and cause resistance to develop.

You should tell your doctor or pharmacist about all the medications or natural products you are taking, to ensure that there are no interactions.

### **Prevent resistance: Take your HIV drugs every day!**

The best way to prevent drug resistance is to take your medications as prescribed, not forgetting a single dose, taking them at the specified times, and adhering to your dietary restrictions, if any. Some drugs need to be taken every 8 hours, others every 12 hours and still others every 24 hours. In general, following the dosing recommendations prevents the development of resistance.

It is important to choose a treatment that is well suited to your lifestyle. If you have to stop taking your medications, talk to your doctor about the best way to end your triple therapy. You can also talk to your pharmacist or any other health care provider about the various ways to ensure treatment adherence (i.e. taking all of your pills at the specified times every day as prescribed by your doctor).



By Nikki Maier

Here is a startling fact. Aboriginal women continue to turn up with higher than average rates of HIV infections. Here is another startling fact. Another group of people still outdo other Canadians in terms of the higher than average rates of new HIV infections—men who have sex with men. What does this mean? From my viewpoint, it makes sense that those who are marginalized—that is to say those who do not make up the dominant population—in Canada tend to have poorer health than other Canadians. So what can be done?

Statistically, we know that Aboriginal women make up 50% of new HIV-positive tests in the Aboriginal population. And what about young Aboriginal women? Those numbers are growing and still we see this ostrich with its head in the sand mentality with many levels of government ignoring the problem. Incidentally, for those who were wondering, back in 2002, the main mode of transmission identified was Injection Drug Use (IDU) at 65%. The second most reported exposure was heterosexual contact at 31%.

Men who have sex with men have numbers that again are higher than the national average. If we look at the 2004 HIV-positive tests, you'll note that the risk category of 'men who have sex with men' make up 176 of all new cases in BC. Compare that to the second highest risk factor of 115 cases contracted through IDU, although closely followed by heterosexual contact at 99 cases. Clearly we have a problem.

So why are we ignoring the problem and what can you do about it? The truth? For me, this is the part where in the past I have tuned out. I tuned out, because I thought how can I do anything about it? What can we do? Well, perhaps it's time we took a hard look at how we think about other people. What does it mean to live in our society? Why are people marginalized and pushed onto the fringes of mainstream society? Certainly, it has something to do with how we're conditioned, and we're conditioned categorize people into groups. We make assumptions about people based on stereotypes. Just think about it. Awareness is only one more way we can help, and at this point every little bit helps.

**Nikki Maier, Editor**

This newsletter is the official publication of the Living Positive Resource Centre, Okanagan. It is published four to six times a year. The materials in this newsletter are meant to be consistent with LPRC purposes which are: a) to promote awareness of HIV/AIDS, b) to develop and provide educational resources, c) to support those infected with or affected by HIV/AIDS. Even so, the opinions and comments within this newsletter are those of the authors and do not necessarily reflect LPRC policy. The newsletter does not endorse the use of any particular treatment or therapy. The Board, staff and volunteers of LPRC 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 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 office at any time; publication deadline is three weeks prior to publication date. Submissions will be returned if a request is made in writing and an address is provided. Reprinting and distributing this newsletter is openly encouraged.

**LPRC's Board of Directors**

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## Living Positive Membership

For a small fee, you can support Living Positive Resource Centre, Okanagan by becoming a member. Membership entitles you to vote on issues that affect the agency, and the fee helps cover the cost of this newsletter. Please take the time to fill out this membership application and drop it off at our office or mail it to:

**Living Positive, 101-266 Lawrence Ave,  
Kelowna, BC V1Y 6L3**



### Living Positive Membership Application

Members must agree to uphold the aims of the Society and maintain confidentiality.

Name: \_\_\_\_\_ E-mail address: \_\_\_\_\_

Mailing address: \_\_\_\_\_ Postal code: \_\_\_\_\_

(Check here  to receive Positive Okanagan by e-mail only)

Fee :  \$12 (individual);  \$25 (organization);  \$100 (lifetime);  Free (client)

Make cheques payable to **Living Positive Resource Centre**

LPRC's office is located at:

**101—266 Lawrence Ave,  
Kelowna BC V1Y 6L3**

Phone: (250) 862-AIDS (2437)

**1-800-616-AIDS (2437)**

Fax: (250) 868-8662

Website:

**[www.livingpositive.ca](http://www.livingpositive.ca)**

**Volunteer  
Profile:  
Wendy McNiven**

*By Karen Alexander*

We are pleased to welcome Wendy McNiven to our team of voluntary "Complementary Therapists". Wendy is a Unitarian Minister who has come on board to offer Spiritual Counseling to our clients. Please note that this is **NOT religious or clinical counselling**, and is more about self-empowerment and finding your own inner strength and peace.

Here is a thumbnail description from the website of the Canadian Unitarian Council, "Unitarians are people with an ethical, practical religion. Al-

though they hold different views on such matters as God, immortality and the value of religious traditions—including the Christian one—there is much on which they generally agree. Unitarians value both spiritual insight and rational enquiry. Some have words like God and Goddess in their vocabulary; others do not. We each explore our place in the universe in different ways - true to our own conscience and experience."

LPRC recognizes that there are times when some clients simply need someone to listen and help them work through tough times, and we are happy that Wendy has stepped forward to offer this service. She is willing to meet with clients one-to-one in our office – if you wish to take advantage of this service please call Karen at 862-2437 to arrange an appointment.

**MY MOTHER – MYSELF**

By Richard Babcock

Hardened by life at youth's early age,  
She suffered the sins of others,  
Aggressively sought to hold her own,  
When homelife and happiness would have  
been her drothers,  
As much as her sins,  
Her graces were equal,  
As she had witnessed before,  
As hard as you try,  
The cycle continues and increases your  
shame to the core,  
Before she went,  
The past and the spiritual—all were dis-  
cussed.  
As I mirror her life today all I remember—  
The GRACE.

**Meet our new Admin. Manager!**

*By Paula Penticost*

I am very excited to join the Living Positive Resource Centre as the new Administrative Manager! I recently made the move to Kelowna after spending over two years living and teaching in Southeast Asia. What a great experience it was to be immersed in a culture so different for my own – and what a challenge! While it was a great experience, I am glad to be back on Canadian soil again.

Originally, I am from Cape Breton Island, Nova Scotia and the majority of my family still resides there. In 2000, I received a Bachelor of Commerce degree from St. Francis Xavier University where I ma-

jored in Marketing.

This is my first position with a not-for-profit organization so I have much to learn from my colleagues and I'm eager to get to it. The experience of seeing a friend's mother living with Hepatitis C and a family member living with HIV has made me very aware of how important a centre like this is to the community and those affected. It is a truly humbling experience to be amongst such a dedicated team that cares so deeply about the clients and community that it serves. I look forward to meeting you!



*Paula Penticost*

# CLIENT SUPPORT PLUS



Clare Overton

By Clare Overton

For those of you who haven't already met me, my name is Clare Overton and I am the new client advocate here at LPRC. I started working at the agency in October 2005 after having graduated from O.U.C. with a BA in Psychology in June.

In 1995, I moved to Kelowna from Manchester, England.


After graduating from high

school, I left the sunny Okanagan to spend a few months in even sunnier Hawaii. From there, I left for Thailand where I spent the next few months traveling and teaching English as a second language.

When I returned to Kelowna, I enrolled at O.U.C. and started my training in Psychology. In my final year at O.U.C., I took part in a research study that focused on the concept of happiness in children with special needs. Somehow, all of those experiences led me here, and although it may seem like an unlikely place for me to have ended up I can honestly say that I couldn't be happier to have found such an amazing place to work. It is incredible to come to work every day and be surrounded by a group of people who are so passionate and committed to what they do. As for the clients, those of you that I have met so far have only helped to confirm that I made the right decision by coming to work here. Your stories never cease to amaze and encourage me. For those of you that I have not yet met, I look forward to our future encounters. Feel free to call the office and book an appointment with me any time, or stop by Thursday mornings from 9:30-11:30 a.m. during drop-in hours.


## CLIENTS' NOTICE BOARD

### CHIROPRACTIC CARE



Dr. Derek Ginter visits every 2nd Tuesday (10-11 a.m.). Call 862-2437 to arrange for your free session.

### NATUROPATHIC HEALTH CARE



Dr. Janice Potter, a Naturopathic Physician, offers her services free to our clients. Call 862-2437 for your referral.

### CLIENT SUPPORT

#### Kelowna

To meet with a client support worker, call 862-2437.

**South Okanagan & Similkameen:** call 1-800-616-2437 to book an appointment.


#### Vernon & North Okanagan:

Call Theresa McDonald of North Okanagan Youth & Family Services Society at 545-3572.

### REIKI & HEALING TOUCH

Find balance and calm. Enjoy the relaxing benefits of a quiet hour with Toshie. Call 862-2437 to book your free Wednesday session (10 a.m.-1 p.m.).

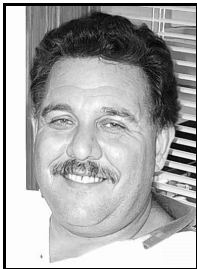
### MASSAGE THERAPY



Free half-hour sessions Thursday afternoons (1:30-4:00 p.m.) with Kristi Maguire, Registered Massage Therapist.

### CLIENT SERVICE HOURS

9:00 a.m. to 4:00 p.m.



Brian Mairs

By Nikki Maier  
I sat down with, Program Coordinator, Brian Mairs to chat about O.A.A.S..

### What's new with O.A.A.S.?

Program funding runs out March 31<sup>st</sup>, so we're in "wind down". It means that we have to make arrangements with or get in contact with all the places we've been providing services for to let them know those services are not available [after March 31<sup>st</sup>]. So—exit strategies, unless we get other funding.

### How long has O.A.A.S. been around?

Since 1999, I was on the board of directors and I ended up writing a proposal that was ac-

cepted and the rest of the board decided I would be the best one to actualize the proposal since I'd written it.

### What are your plans for O.A.A.S. in the future?

We're currently sending out an application to the federal government for the non-reserve First Nations, Inuit and Metis branch to provide services to the urban aboriginal population.

### How does that programming differ from your current one?

The federal government has changed the direction for what they're willing to fund. For the past four years, it's been community capacity building. And now they're going more in the direction of harm reduction as it relates to people who use or share injection drug paraphernalia and broadening

the scope from just HIV to include Hep C. The key is prevention.

### What is harm reduction?

It is a fundamental philosophy of reducing the harm to a person and to the community around them, and it can include something as simple as wearing a bike helmet. It can include reducing the amount of drugs you take as opposed to immediate [drug] abstinence.

### What is fulfilling about your job or day-to-day activities?

I think the best part of what I do is providing the prevention education. I go to Round Lake Treatment Centre every five weeks and I provide core training on HIV, Hep C and the basics of harm reduction, which includes needle cleaning and both male and female condoms.



(250) 862-2481

[www.oaas.ca](http://www.oaas.ca)

## Topher Talks, continued from page one

groups are looking for general information on the diseases, while other groups like to hear about real life stories of what it's like to live positive. These stories are a very important tool for both education and healing.

The education end of it is to help people put a face to the disease. As they say, "People are more likely to donate to a cause if they know someone with the disease." Also, programs that train support-workers like the face-to-face training because it helps students gain a better understanding of the diversity of problems people (infected with either

HIV or Hep C) face.

Personally, I find the opportunity to talk to groups and share my story helps me to better understand my own health problems and myself. There is a bit of a cathartic feeling after talking to a group of total strangers and sharing my story. If there's a chance that my story will help one or more people understand the complex life that we lead as Positive persons, then I feel that the experience is worthwhile.

Now, I personally was a very shy and quiet person when I was first diag-

nosed. Approximately two years after getting involved with LPRC, I was asked to sit on my first panel presentation. I was very hesitant at that time, almost feeling a fear for my personal safety and comfort zone. That feeling quickly disappeared when I felt the support in a room full of strangers.

So, if you think you would like to share your story, and help educate others in our community, please contact our education department at LPRC to hear more about the different programs they offer. Phone: 862-2437.



## What is the BC Coalition of People with Disabilities?

By Nikki Maier

The BC Coalition of People with Disabilities (BCCPD) will celebrate their 30<sup>th</sup> year in operation this September, and is located in Vancouver, BC. This past week, I had the opportunity to talk to Margaret Birrell of the BCCPD about the work they do with and on behalf of British Columbians living with Hepatitis C and HIV.

*How would the BCCPD benefit people living with Hepatitis C?*

We are actually part of the Compassionate Umbrella Group of Canada that has negotiated an agreement with the federal government that has compensated victims of Hepatitis C that were excluded in the last round of compensation. They were the people who were excluded from compensation from the government. We just negotiated for the “pre 86/post 90” excluded group. [Originally, only people infected due to tainted blood from 1986-1990 were compensated.]

*Why was it necessary to negotiate for these individuals?*

People were compensated from [receiving] tainted blood. But they excluded many others. We found out that there was interest from those excluded and that the government had overestimated the number of people who were included. We got an “all-party” motion to include (on compassionate grounds) to start to pay the people in the excluded group. We got a Memorandum of Understanding from the Government of Canada signed on the 10<sup>th</sup> of November, 2005 to move forward on the compassion payments.

*How long did it take?*

We managed to get that within a year of activism. There were over 400 groups across BC who joined the coalition, which was a national effort; although,

largely joined by two other provinces—Quebec and Ontario, and us, BC.

*Are there any other reasons our clients might be interested in your organization?*

One other area that would be reflective of our mutual clients who are both HIV+ and Hep C + would be that we are a Centre of Excellence for provincial and federal disability benefits. So we specialize in that and support other groups that work in housing, job training, health benefits. We’ve kept on top of the legislation so we keep the community informed on changes to legislation. We have 1,700 members on our mailing list and faxing service, which we use to put out as community alerts.

*Since you’re located in Vancouver, what can people outside the Lower Mainland do to access an advocate?*

We have a 1-800 line, which people can use to call in and leave their number. Then we get the number and call them back and we will refer the people to a resource in their own area whenever possible, since it’s always best to have a face-to-face meeting with an advocate. We use whatever tools we have to help people.

### **General BCCPD contact numbers for all programs, except Advocacy Access:**

Telephone 604-875-0188

Toll Free 1-800-663-1278

Fax 604-875-9227

TTY for the Hearing Impaired 604-875-8835

Email [feedback@bccpd.bc.ca](mailto:feedback@bccpd.bc.ca)

### **Advocacy Access Program**

Phone 604-872-1278; Toll Free 1-800-663-1278

## Dining out for Life returns to Kelowna!

By Karen Alexander

We are pleased to announce that we will once again hold the “Dining Out for Life” event on Thursday, March 23<sup>rd</sup> in Kelowna. We are very fortunate this year to have Alan and Carol Dolman as our Honourary Chairs. In Alan’s role as Chairman of the Board for the Interior Health Authority, he is fully aware of the limited funding available to organizations such as ours, and applauds our efforts to reach ‘outside the box’ in an attempt to supplement government based funding.

We are indeed fortunate to have Mr. and Mrs. Dolman on board for this event.

The list of participant restaurants will be posted on our website in February, so be sure to check and see if your favourite spot has joined in. Log onto [www.livingpositive.ca](http://www.livingpositive.ca) and click onto the “Dining Out for Life” logo.



## Dealing with the winter blues? You're not alone

By Wendy McNiven

The Winter Solstice may be over, but so far, short days and long nights are still part of the scene. The angels and shepherds are gone. The coloured lights are mostly put back into their boxes. We're expected to have happy memories of Christmas we spent together with friends and families. And we're supposed to be all rested up from our holidays, and ready to go back to work for another several months.

But for some of us, this time of year is more difficult than the rest of the year. No matter how much society pressured us to be jolly, we couldn't seem to get that Christmas “merry and bright” feeling going. For some of us, there are very few happy memories to draw on. And the fact that our lives are not filled with love and laughter and well-being seems to have been exaggerated by comparison with those social expectations.

Maybe January is hard for you because it's so dark and long. Maybe the Christmas bills have come in, and you are facing financial difficulties. Maybe

you find it a hard time because of the loss of a loved one, the illness of a child, or a separation. Maybe it's your own poor health, or being estranged from family members, or some other event that has turned your world upside down. However, this world is not a perfect place, nor is it populated with perfect families or perfect friends.

So – how do you deal with a long, dark winter, if you're one of those people who finds it difficult?

The first thing to remember is that *you are not alone*, as much as it might seem otherwise. There are many who understand, many who know how hard it is to stand outside the revels of the season. And there are many who are willing to stand with you, just as you are.

There is a story of a little girl sent by her mother on an errand. When she finally returned, her mother asked what had taken her so long. The girl explained that a friend had broken his bicycle and she had stopped to help. “But,” her mother said, “you don't know anything about fixing bicycles.” “I know,” she

said. “I stopped to help him cry.”

Let someone help you cry. Or maybe you can be the one who helps someone else cry. If you are alone, find some way to be with people or, maybe even, a place to volunteer.

Be realistic about the people you'd like to have around you when you're down. Those people may not be able to give to you the way you need them to. On the other hand, maybe they'll surprise you and offer just that kind of presence that really lifts your spirits. Be open to whatever happens.

Maybe this winter will be long and dark for you. If tragedy has taken someone from you, if illness and pain are your companions, if separation and brokenness loom so large that they block out your view of the horizon, there may be nothing that will help you this year. You don't have to bow to the pressure to put on a happy face.

And remember—things change and life evolves. Maybe when the days really do begin to feel longer, light will also find it's way into your spirit.