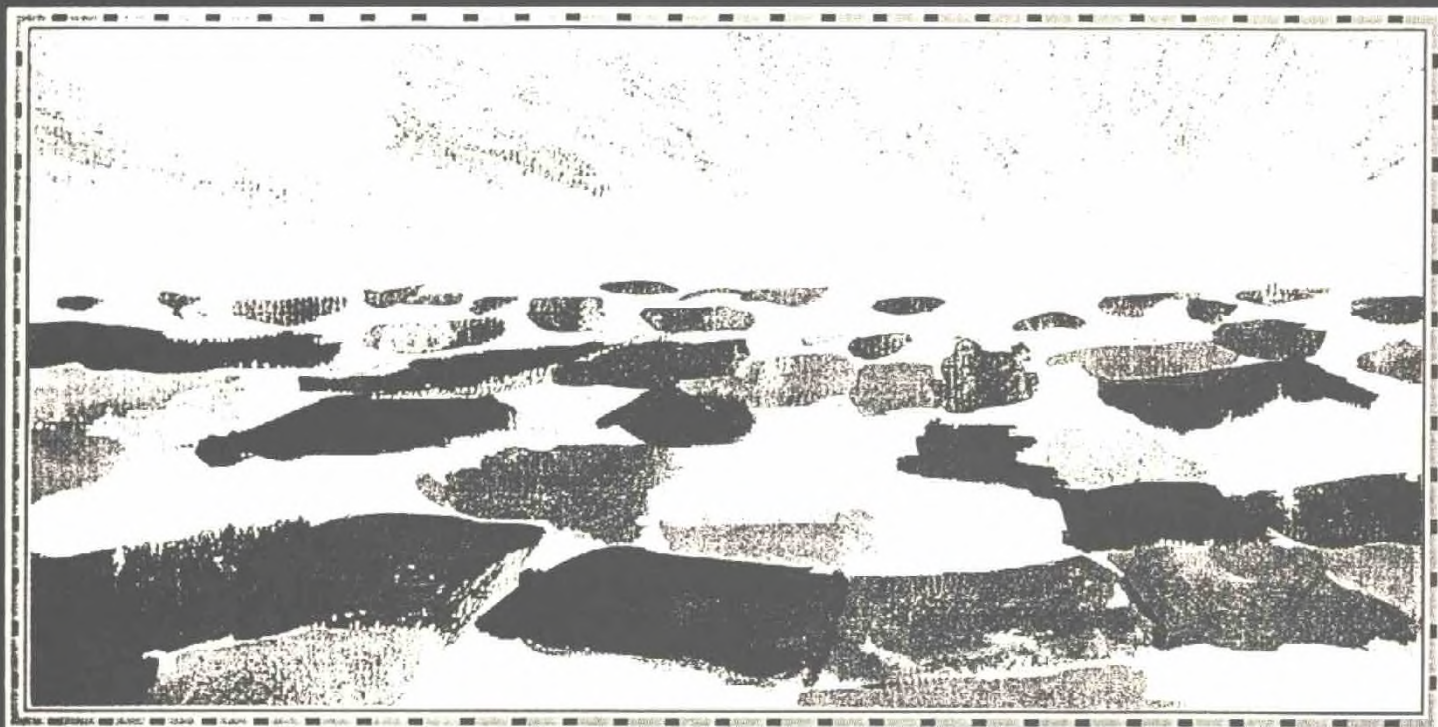


reACT-Believe

Summer 1992, Volume 3, Issue IV

AIDS Committee of Thunder Bay P.O. 3586
Thunder Bay, Ontario P7B 6E2 (807)345-1516
AIDS Infoline 345-SAFE



The Quilt

Visiting Thunder Bay, October 8 to 11, 1992
at the P.A.C.I. Gymnasium

AN EDUCATIONAL AND FUNDRAISING EVENT TO INCREASE AWARENESS OF THE IMPACT OF HIV/AIDS ON OUR COMMUNITY

act-b



Poster concept, art and design contributed by Henderson Delta Lakehill Marketing Communications • Colour separations contributed by XYZ House •
• Printing contributed by ABC Printers in City Name • Paper supplied by the Abitibi Price Provincial Papers Mill of Thunder Bay •

This is a photocopy of a full colour poster designed for the Quilt. Henderson Delta Lakehill donated the design work and has negotiated for the paper and printing services. ACT-B is very grateful for this generous donation.

A POSITIVE MENTAL ATTITUDE

A person's attitude towards AIDS has a profound influence on the course of the illness. A positive expectation of recovery is likely to produce improved health, whereas a negative expectation more often results in physical and mental deterioration. This "self-fulfilling prophecy" occurs because when people expect something to happen, they act in ways which increase the likelihood of that expectation coming true.

With HIV, for example, if people believe that they can fight the disease, they tend to reorganize their lives around a less stressful and more healthy way of living. This often ameliorates the severity of their illness and can lead to periods of comparatively good health - thus confirming the person's original belief and expectation. In reverse, if a person feels that they are powerless to do anything about HIV, they tend to either live fast and wild or totally neglect themselves. When this results in declining health, it only serves to confirm and reinforce their initial feelings of helplessness.

"It's no use feeling sorry for yourself," says Helen. Diagnosed with HIV, she's convinced that a 'positive attitude' is important. "There are positive steps a person can take to stop themselves from getting sick. I find that I'm looking after my body better and that makes me feel better too. The fact that I'm taking more control over my life, gives me a sense of optimism which is reflected in the fact that I'm in a state of very good health... and I intend to stay that way."

The role of expectations in affecting the functioning of the immune system is illustrated by Dr. Richard Smith's experiments of the University of Arkansas.

Seven tuberculin-positive patients were

inoculated in one arm with tuberculin and the other arm with non-reactive substance. The frequent repetition of these injections established a behavioral conditioning in which the patient expected the reaction in one arm to always be positive and the reaction in the other arm to always be negative. Then, without the patient's knowledge, the injections were switched to opposite arms. This resulted in a very drastically reduced immune reaction to the tuberculin injection - the swelling being on average only 4 mm in diameter instead of 15 mm. Dr. Smith therefore concluded that a patient's expectation

"It's no use feeling sorry for yourself," says Helen. Diagnosed with HIV, she's convinced that a 'positive attitude' is important... "I'm in a state of very good health and I intend to stay that way."

significantly affects their immune response.

In a similar vein, the way attitudes toward an illness can influence its course of development was demonstrated by Dr. Simonton in his study of cancer patients at Travis Air Force base in California. He found that patients with positive attitudes had better responses to treatment, whilst those with negative attitudes had poorer responses. Even more significantly, he discovered that patients who were very seriously ill, but had positive attitudes, recovered better than patients who had less severe cancers but negative attitudes. These findings were confirmed by a study of breast cancer patients at Kings College Hospital in London. Of those who adopted a positive, optimistic and

fighting response to their diagnosis, 45 per cent were still alive 15 years later, compared with only 17 per cent of those who responded negatively and fatalistically. This evidence suggests that although an optimistic and constructive mental approach may not guarantee recovery, it certainly will often lengthen life expectancy and increase the probability of survival.

In the case of AIDS, even more so than cancer, a person is confronted by overwhelmingly negative attitudes and expectations: "Once you've got AIDS it's too late... There's nothing anyone can do... AIDS inevitably results in a rapid and painful death." These views are not realism, but pessimism. They look at AIDS in the worst conceivable light, and contrary to all scientific evidence, deny any chance of a hopeful prognosis. Negative attitudes and expectations are thus a denial of truth and reality.

Adopting a positive mental attitude involves opening one's eyes to the possibility of taking control of the future by acting in ways which help ease suffering and prolong survival. Rather than seeing HIV as an

irreversible personal defeat and a non-commutable sentence of death, a positive response looks upon HIV as a personal challenge which has hopeful possibilities. In the words of the Fred Astaire and Ginger Rogers musical, it means a commitment to "pick yourself up, dust yourself down, and start all over again".

Bill, a person with AIDS, described how a positive mental approach helped him to survive and lead a worthwhile, enjoyable life: "Having AIDS is not necessarily a death sentence. But judging from the statistics and how the media often reports them, a person with AIDS could understandably feel helpless, lost and resolved to an early death. Yet that is not always the case.



Not every AIDS patient is gravely ill. Many are doing extremely well living happy, productive and basically healthy lives. I am one of them. Having been diagnosed almost a year ago and having survived pneumocystis and a near fatal bout of cryptococcus meningitis, I am around to tell about it. I realize I have been lucky and my good fortune has been through a combination of excellent health care, a great support system, and a positive attitude... No matter that there is no cure at the moment for the disease, it is imperative to keep a positive attitude."

The value of a defiant, optimistic and constructive response to AIDS was also vouched for by Roger who has AIDS-Related Complex. He recalled the consequences of "turning adversity into a virtue" through switching to a healthier lifestyle and radically reappraising his outlook on life: "My condition is stable and improving. Physically, I am getting a little better every month. Mentally, I am getting better every day...I have become a better person, with much to live for. I am doing everything in my power to get well... Now that I feel better about myself mentally, I'm feeling better physically."

It's not just that a positive mental attitude engenders a sense of emotional well-being; it also appears to have a strengthening effect on the body's natural defences against infection. A study by Dr. Lydia Temoshok, of the University of California, in 1989 found that people with AIDS who were positive and assertive tended to have a better functioning immune system than those who were distressed, passive and resigned to their fate.

Reprinted from "AIDS: A Guide to Survival" Peter Tatchell

VISION ON... AN UPDATE

The last newsletter reported that the Board and Staff would be revisiting the agency's goals and looking ahead to the next three years. Since then, four evening workshops were held to develop new objectives for the agency.

The group reviewed the activities of ACT-B by talking about their experiences with the agency. Everyone learned where we were all coming from and our reasons for being involved with ACT-B. From that point, the group dreamed a little about the next three years. All this discussion helped determine what current and new activities would be completed to meet ACT-B's goals. Then, using these activities as a foundation, specific objectives were

written for each goal. A complete report on the entire process is being prepared and can be made available to members on request.

From the workshops, ACT-B also established the framework to carry out its mandate. The membership will be presented with this blueprint at the November Annual General Meeting and will be welcome to contribute their comments and ideas to further shape ACT-B's three-year work plan. The Board's responsibility will be to ensure the agency's new objectives are achieved.

A lot of work was involved in completing this goal-setting process. All those who participated were enthusiastic and contributed a substantial amount of excellent material. They deserve a round of applause for their efforts.

ANONYMOUS TESTING IS AVAILABLE IN THUNDER BAY: PHONE 625-5981.

You can now find out your individual health status concerning HIV by being tested anonymously in Thunder Bay.

The process is simple. All you have to do is phone 625-5981 to set up an appointment. During this initial phone call, you will be asked for a first name, in order to book an appointment. No other identifying information will be asked for.

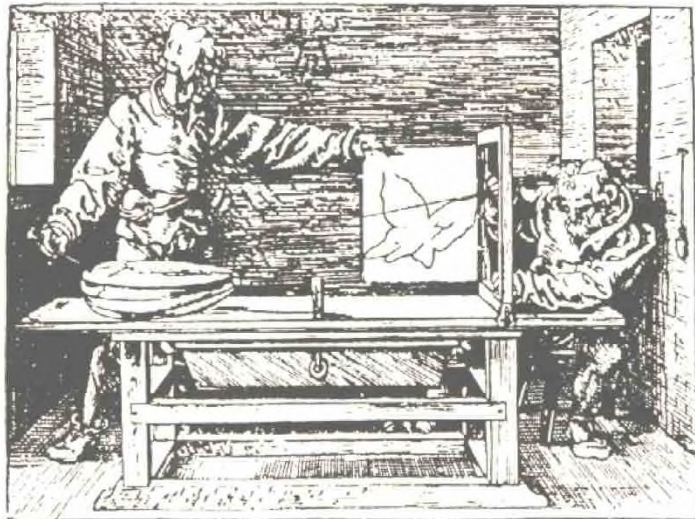
At the appointment, you will receive information to explain to you just what the test means, and to provide appropriate counselling relevant to your own personal situation. A blood sample will be taken and you will be given a date and time to return for your test results. Currently, this may be three weeks.

Appointments are being accepted beginning July 21, 1992.

If you have any questions about anonymous testing, please call us at ACT-B: 345-1516.

Accurate, candid and up to date information coupled with sensitive pre and post test counselling is what you should receive if you choose to be tested. We're here to help assure you receive that.





Gallois' Revelation

"If you put tomfoolry into a computer, nothing comes out but tomfoolery. But this tomfoolery, having passed through a very expensive machine is somehow enobled and no one dares to criticize it."

Please give us your feedback! Comments, concerns, compliments and criticisms about the newsletter, our publications, or about any aspect of the agency. You can phone or mail. You can remain anonymous if you wish. We'd like to know your comments in order to improve on weak points, and continue to deliver our strong points.

Thank you to the agencies and individuals who have given us their comments. They are greatly appreciated.

Write to: AIDS Committee of Thunder Bay

P.O. Box 3586
Thunder Bay, Ontario
P7B 6E2

(807) 345-1516

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

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Carol Bold, Assistant Editor

The opinions and medical information offered by ReACT-Believe are those of the individual authors and not necessarily those of the staff or Board of Directors of the AIDS Committee of Thunder Bay. Medical information offered by ReACT-Believe should be used with your own discretion. Please consult your doctor.

ACT-B Advisory Council

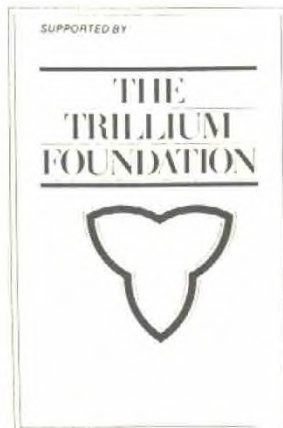
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OPEN HOUSE!!

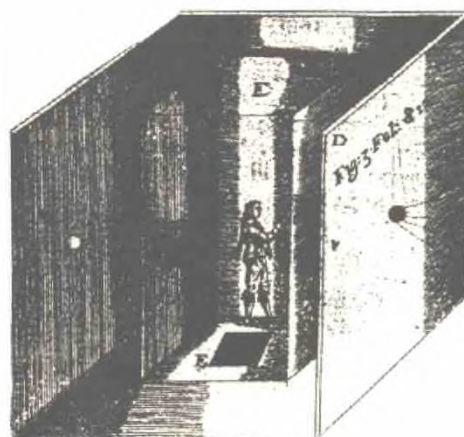
And the ribbon was cut!

The Resource Centre Open House, held Friday June 19, was a tremendous success. The opening ceremony - hosted by ACT-B Vice President Gail Linklater, Board Member Ted Romanowski and provincial AIDS Coordinator Dr. Jay Browne - marked the finish of a three year plan and provided ACT-B with the opportunity to thank the Ontario Ministry of Health for its support in establishing the much needed new and expanded facility. Sharon Kennedy, representative from MPP Shelley Wark-Martyn's office, presented ACT-B with a plaque and Dr. Browne cut the ribbon.

The Resource Centre never looked better and everyone attending seemed impressed. A large meeting room was set up as the

beverage and reception area and a smaller room displayed a variety of posters and a table of materials produced by ACT-B. Some significant donations were also received, including two large floor plants and a framed poster of the movie "Long Time Companion" which ACT-B premiered in Thunder Bay.

Many thanks go out to those involved including: Gail and Ted for their role in the opening ceremony, Karen Ferland for volunteering as "hostess" with the "mostest", Leona Bergkvist and Susan Gibbs for greeting guests and staffing the reception table and Lawrence Korhonen for planning and coordinating the event.



Do ya gotta f-f-fridge you could give us, eh?

The Centre is still in need of some things such as a fridge. The one that is here right now is about as big as a bread box. It can only hold about two tins of juice and a pint of cream for coffee. **A larger fridge is desperately needed.** Apartment size is probably most suited for the space it will go into, but we'll take any larger fridge. If anyone out there has a fridge they are planning to get rid of, call 345-1516. We'd be glad to take it off your hands.



MORT GERBERG

"Protocol or no, if he doesn't stop talking soon, I'm gonna eat him."

Scene from an Ontario AIDS Network Meeting

NEWS FROM THE EDUCATION DEPT. ...

THE SPRING OUTREACH TOUR

April 21 - May 22, 1992

The 1992 Spring Outreach Tour, possibly the last one in the foreseeable future, was highly successful. Divided into western and eastern portions, there were a total of 40 presentations in 18 communities reaching 1421 people, and covering 3967 kilometres. The western tour ran from April 21 to May 1, with 18 presentations in 8 communities, while the eastern tour ran from May 11 to 22, with 22 presentations in 10 communities.

The main theme of the tour was "AIDS: A Challenge for our Community". The presentations were divided as follows: 9 public school, 13 high school, 4 hospital, 6 agency (health, social service, jail), and 8 community. There was good response from the presentations, although the community forums were usually sparsely attended.

The coordination of the tour was smoothly done,

thanks to the work of Joanne Books. This tour was the last one to be undertaken as part of our commitment to do outreach to Northwestern Ontario, based on Trillium Foundation funding.

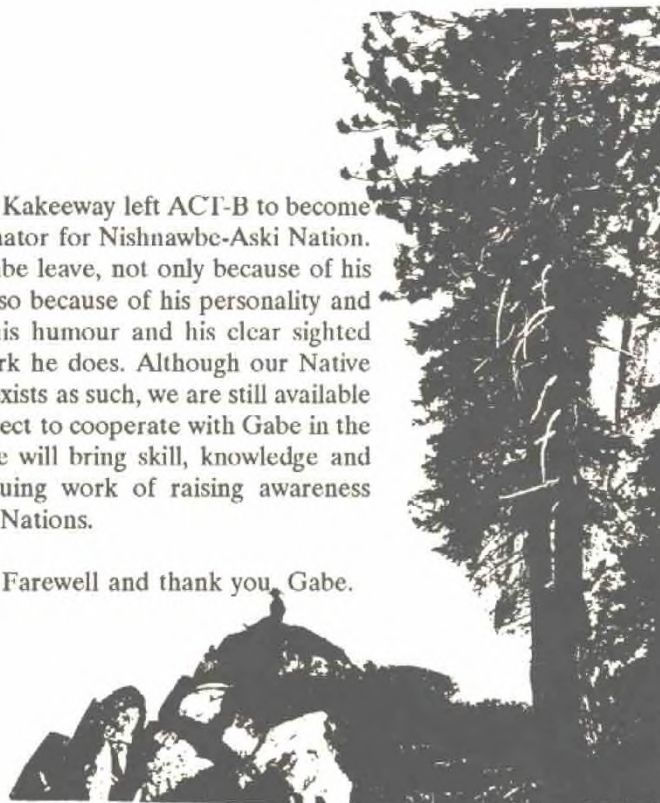
There seems to be a growing awareness of the fact that AIDS is an issue everyone must deal with, and everyone wants to know the numbers locally. Schools seem to be doing some work in AIDS education, with varying levels of impact. Work with agencies, including health care facilities, seems to be important. There are still a lot of myths and misconceptions, and these presentations provided an opportunity for people to get new information, and to voice their concerns.

I want to thank all those who helped to organize the tour, and to express my appreciation for the hospitality you showed in each of the communities I visited.

Meegwetch, Gabe!

In May this year, Gabriel Kakeeway left ACT-B to become AIDS Education Coordinator for Nishnawbe-Aski Nation. We were sorry to see Gabe leave, not only because of his professional skills, but also because of his personality and humanity. We all miss his humour and his clear sighted understanding of the work he does. Although our Native AIDS Project no longer exists as such, we are still available as a resource, and we expect to cooperate with Gabe in the future. We know that he will bring skill, knowledge and sensitivity to the continuing work of raising awareness about AIDS in the First Nations.

Farewell and thank you, Gabe.



So, do ya still wanna be in TV?

On June 16, a group of people (The Television Project Working Group) got together to talk about what kinds of shows we would like to present on Cable 7 TV. We will be doing half-hour shows in addition to a special on the Quilt. From a list of brainstormed ideas, the group came up with plans for the shows. Carol Nicholson helped the group establish a format that would make the work easier to do as well as keeping the shows consistent.

There are two parts to the group working on this project. One is planning: this involves deciding what the content will be, planning the segments, and writing scripts as needed. The other part is technical: camera crews, directors, editors, VTR operators, sound and lighting crews will be needed. It is rumoured this is a fun thing to do. If you're worried that you've never done these things before, relax. McLean Hunter conducts regular workshops and will train our team.

We'll need people to work on scripts, and do some videotaping prior to the season starting. The actual shows can probably be done in two or three nights in the fall, and three or four nights in the new year.

We'd like to have people willing to commit for the season, although working a half season is possible.

If any volunteers want to take part in this time limited project call David at the Resource Centre. Space is limited for the technical crews and some positions have already been filled.

*so if you want to be in television....
call 345-1516, now!*

PREPARING FOR THE QUILT

"Do it! Money will come when you are doing the right thing."

Michael Phillips

The First Law of The Seven Laws of Money.

With this philosophy in mind, allow me to update the activities of the Quilt committee(s). The Working Quilt Committee, co-chaired by Sheila Berry and myself, has been meeting once or twice per month for just over a year. In the Fall of 1991, the committee decided to "Do it" and confirmed with the Names Project Foundation Canada that our display would take place OCTOBER 8 - 11, 1992, at the PACI GYMNASIUM. The Board of Directors had approved this decision in May 1991.

We then agreed to form an Honorary Quilt Committee, whose members would act in an advisory capacity and would provide a much needed profile within the community. All members are well known, respected individuals in the community. Their ambassadorship and support of this project is indeed appreciated. This committee is co-chaired by Dusty Miller and myself, and has met twice.

"Money will come..." Fundraising Update

To date we have raised roughly \$4,000 for the display. Another \$4,500 is available to us through the AIDS Awareness Week budget. Our fundraising goal for the Quilt display is approximately \$10,000. Our pancake breakfast was great fun and raised \$710. Thanks to the Second Cup Keskus for providing their delicious coffee and tea for our Quilt fundraising events. Also a special word of thanks to Sonja and Diane for making such great pancakes!

The Ken Hamm Concert was a wonderful evening of music. Thanks to Ken, William Roberts, Rodney Brown, Damon Dowbak, Gibson Martin and I and their special guests the Abolition Dancers(a clogging group from Minneapolis). It was truly a great evening and we raised \$400.00 for the Quilt.

We will be holding two extra bingos at Diamond Bingo Hall on Friday, August 21 @ 10:00 p.m. and one on Sunday, September 13 @ 1:00 p.m.

If you are able to volunteer at these bingos, please give Sheila a call! These fundraising events will bring us to our goal without difficulty.

Costs for the display include a fee to the Names Project for transporting the Quilt from it's base in Halifax, hospitality for the crew that travels with the Quilt, advertising, promotion and other expenses. No admission is charged at the display, however, donations are accepted and these go to the Support Fund which serves the emergency financial needs of PLWHIV/AIDS in Thunder Bay.

Organization for the display is coming along well. Committee members are working hard to ensure that "all systems are go" when the Quilt arrives.

So there you have it...a year ago the Quilt Committee and our Board of Directors decided that a display of the AIDS Quilt was the "right thing to do". Now the funds are pretty much in place, the organizing is going well, and all of us are anticipating this event with much enthusiasm!

Anyone interested in being involved with the Quilt, please contact either myself or Sheila.



Susan Ivany

Board Member and Co-chair of the Quilt Committee

The cover of this issue shows the draft of a poster design for the Quilt Project. All the design work was donated by Henderson Delta Lakehill Inc.

Join us. Become a member!

Members set our course at Annual Meetings.
They are kept up-to-date about our work.
They elect the Board of Directors who keep that work on track.

ACT-B Membership form.

Name _____

Address _____

Postal Code _____

Telephone _____

Enclosed is: ☐ \$10 Membership fee
 ☐ \$25 Supporting membership fee
 ☐ \$ Donation

Mail to: AIDS Committee of Thunder Bay
 P.O. Box 3586
 Thunder Bay, Ontario, P7B 6E2



FIRST NOTICE MEMBERSHIP RENEWAL BEFORE A.G.M.

To be eligible to vote at the Annual General Meeting, your membership must be up-to-date, (30 days prior to the meeting). The A.G.M. is in November. Please, renew your membership now.

OPENING DOORS NORTHWESTERN ONTARIO CONFERENCE ON HIV/AIDS COUNSELLING

Growing out of the Ministry's counselling initiative in late 1990, this conference is a regional follow up designed to assist professionals in Northwestern Ontario who are involved in HIV/AIDS counselling issues. Although in the early planning stages, it is shaping up to be an informative and stimulating event. Topics will range from counselling to community development, with an emphasis on direct work with clients. We anticipate including client representation in order to provide two way learning and information exchange.

The conference planning committee is comprised of local and regional members. They include Michael Sobota and Glenna McLeod, AIDS Committee of Thunder Bay; Vivian Johnston, Thunder Bay District Health Unit; Paul Johnston, McKellar Hospital; Rai Therrien, Northwestern Health Unit (Kenora) and Russel Angus, Community Consultant.

At present the conference is scheduled to take place in early November and will be held over approximately a day and a half. If you are interested in further information on topics, taking part, or have any questions/suggestions, please call Megan at the office.