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Survival News

THE OFFICIAL PUBLICATION OF AIDS SURVIVAL PROJECT

We are diverse people living with HIV, united to promote self-empowerment and enhanced quality of life for HIV-affected individuals through advocacy, education, peer support and treatment activism.

AIDS Survival Project Recognized for Excellence

by Rob Nixon

For the second year in a row, AIDS Survival Project (ASP) has been honored by The Community Foundation for Greater Atlanta as a finalist in the Foundation's Managing for Excellence Award. Sponsored by The Boston Consulting Group and initiated by the Foundation in 1984, the highly competitive award recognizes nonprofit organizations that exhibit managerial improvement, achievement and thoughtful planning. To date, nearly 500 organizations have participated in the competition.

"The selection process is a very rigorous one, and these organizations represent the best of the nonprofit sector," said Alicia Philipp, president of The Community Foundation. "Not only do they exemplify excellence in management and accomplishment, but they have a tremendous dedication to the improvement of the health and well-being of our citizens and our community."

Among the criteria the award's Advisory Committee looks at are an active board at the center of a clear governance system; financial strength created by successful resource development; operations guided by mission, strategic planning and regular evaluation; actions that respect the contributions of volunteers and employees from diverse backgrounds; and a commitment to excellence. ASP was named a finalist in 2003. This year, it was given a special designation as First Runner-Up, which carried a cash award of $2,500.

"This was a decision of the Advisory Committee for this award cycle," noted Foundation Program Officer Phillip Rush. "In the past, the finalists were peer awards, but this year the committee felt that AIDS Survival Project should receive an award slightly differentiated from Project Open Hand [selected as Second Runner-Up]. The committee felt ASP had done extremely well and wanted to recognize it in that particular way."

ASP Executive Director Jeff Graham and Board President Susan Cornutt receive the agency's Managing for Excellence recognition from ***Alicia Philipp****, president of the Community Foundation for Greater Atlanta.*

PHOTO: BECKY OLLINGER

The selection process is highly competitive and fairly stringent. The extensive review process includes two rounds of written applications and submission of a number of documents detailing financial matters, board and staff qualifications, etc. Thanks to the impressive efforts of ASP Development Director Greg Carraway, the organization proceeded to the next round, narrowing the field to those groups the Foundation felt warranted a lengthy interview and site visit. After an in-depth meeting with key ASP staff and board members, the Advisory Committee felt that ASP warranted special recognition for 2004.

ASP Board President Susan Cornutt and Executive Director Jeff Graham attended The Community Foundation's Annual Meeting Luncheon on November 5, where the awards were presented.

A special supplement to *The Atlanta Business Chronicle* had this to say about ASP:

"The organization has sophisticated policies to ensure that people with AIDS shape the organization at every level. This approach complements more traditional diversity policies that suffuse the organization's planning and operations. ASP has a strong tradition of collaboration. It is co-located and partners with a mental health organization [Positive Impact] and an organization [AIDS Treatment Initiatives] that advocates complementary therapies. [AIDS Survival Project] is also the leading advocate in the public policy arena, understanding that issues of its clients must be addressed at all levels."

Winner of the 2004 Managing for Excellence Award was the Bobby Dodd Institute, which helps individuals with disabilities and disadvantages take steps toward economic self-sufficiency, independence and integration into society. Second Runner-Up Project Open Hand provides freshly cooked meals and nutrition services to people living with AIDS or HIV, homebound seniors and individuals with other critical illnesses and disabilities.

The Community Foundation for Greater Atlanta is one of metro Atlanta's largest funders of charitable organizations. Last year, the Foundation awarded more than 4,000 grants totaling $42 million.

AIDS SURVIVAL PROJECT
Georgia's Statewide Resource for Community-Based Advocacy and HIV Treatment Education

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From the President

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PERSPECTIVE

Giving Back

"One can never consent to creep when one feels an impulse to soar." —Helen Keller

Ever end up some place in life that you never imagined? I have… twice. Once when I tested HIV+ in 1987, and then again at AIDS Survival Project's October board meeting and officers' elections. I was honored to be elected President of ASP's board of directors, the first HIV+ woman to ever hold that position. AIDS Survival Project has been an important and pivotal part of my life since 1992 when I joined the HIV+ women's support group.

When I first came to AIDS Survival Project, I couldn't see a month down the road, never mind 12 more years. I tested positive in a time when there were no medications available and no drug studies that allowed women to participate. I felt isolated, scared, damaged, and I saw little hope in planning for the future. I had never met or spoken with another HIV+ person in the five years since my diagnosis, but I knew that I needed to. I found only one support group in Atlanta for HIV+ women. It was at AIDS Survival Project. The friendships that I made in that support group gave me the incentive to take actions that changed my life. I no longer felt isolated. I learned to laugh. I began to see that the other group members saw value in me and I began to value myself. I began to want more for myself, no matter how long or short my life would be. I began to have hope for my future. And I really wanted to give back.

I attended AIDS Survival Project's weekend workshop, now called *THRIVE! Weekend*. I trained to be a peer facilitator for that workshop, the second female facilitator in the program, and have been active in planning each of ASP's annual women's healing retreats. I believe it is important for women living with HIV to step up, serve and be seen. With guidance, education and support from others, I have advocated for AIDS funding and services through the CAEAR Coalition in Washington, D.C., and the AIDS Drug Assistance Program (ADAP) Task Force in Atlanta. Since 1996, I have been honored to be a member of ASP's board of directors and have served as Vice-President for several of those years. So much of who I am today as a happy, healthy, informed and active woman living with HIV is directly because of the nurturing and inspiration I have received from the people involved with ASP over the years. To have an opportunity like this, to give back to an agency that has given me so much, is such a joy and a privilege. I look forward to my work as Board President.

In this same spirit of self-empowerment and commitment, ASP welcomed two members to the board in October: Dr. Edith Biggers and Tracy Bruce. Following AIDS Survival Project by-laws, these board appointments will be up for election by the membership at the September 2005 annual meeting. Both Edith and Tracy are familiar faces around ASP. Dr. Biggers has a long history with the agency from her work at the Fulton County Health Department and her previous service on the ASP board in the mid-'90s. Edith is a long-standing and consistently popular presenter at *THRIVE! Weekend* workshops and has been a strong supporter as well as a presenter at the agency's annual Women's Healing Retreat. She has given countless hours of service to the HIV and AIDS community.

Tracy's initial involvement with ASP was through visiting the Treatment Resource Center, attending *THRIVE! Weekend* and the annual Women's Healing Retreat. Her involvement with the agency escalated with her participation in the first Positive Action Network leadership program, where she felt a renewed commitment to advocacy and self-empowerment. She translated this renewed commitment-to-action into lobbying efforts at the state legislature for increased ADAP funding. Tracy also helped plan ASP's 2004 Women's Healing Retreat and facilitated a support group at that forum. She is currently in the process of completing her peer counseling training.

And now, I challenge you to think about your own gifts and how you can contribute. More than ever before, those of us infected with and affected by HIV and AIDS need to be involved. Ever benefited from an ASP program? It may be time to give back. Do you believe that access to medications and quality health care should be available to all who need it? Well, it's time to put legs on those beliefs and get involved. Are you afraid that your needs and values aren't reflected by those in leadership today? If you're not part of the solution, you're part of the problem. There are volunteer and donation opportunities available at every level. A familiar and inspiring quote: Be the change you want to see in the world. Reconnect with an ASP staff member you may have worked with in the past. Contact our Associate Director, Carmen Giles, and see what new volunteer opportunities are available. Do you believe in the work of AIDS Survival Project? Then support us with your monetary donations, as well. Every dollar counts.

Be committed and consistent with your support. The need for services at AIDS Survival Project never waivers. Consequently, our need for an active and generous volunteer and donor base never wanes. Go into 2005 with confidence that you have something to give back and know that your support is more important and vital to this community than ever before.

Survival News

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Eric L. Watts ..... ***Editor & Graphic Designer***
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Action = Life

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ADVOCACY

Looking Forward to 2005

This month, the reality of election 2004 becomes the reality of a new political environment as President Bush celebrates his second inauguration, dozens of new members of Congress are sworn in and we face new Republican leadership in the Georgia General Assembly. 2005 is likely to be a year of vast political challenges and changes.

Federal Appropriations Leave PWAs Out in the Cold

Just days before Thanksgiving and nearly two months after the start of the federal fiscal year, Congress finally passed a budget. While we've known for months that the outlook for HIV funding was not good, there were some last-minute disappointments that are sure to cause problems in the coming year. The quick highlights are:

- A $45 million increase in funding for the entire Ryan White CARE Act. While the details were not yet available, it was assumed that this went entirely to the AIDS Drug Assistance Program (ADAP). Unfortunately, this modest increase will not fully eliminate waiting lists. The other programs funded under the CARE Act will all be vying for their share of funding that has remained level for the past three years.
- A $30 million increase to abstinence-only education. On a related note, the woman tapped to be the new Secretary of Education under the Bush Administration is a vocal advocate for abstinence-only education.
- A $10 million decrease in funding for the Housing Opportunities for People with AIDS program.
- Funding for both the National Institutes of Health and the CDC were increased by $800 million and $167 million respectively, but the amount going to specific HIV/AIDS programs is not yet known.

New Leadership in the Georgia General Assembly

The future of ADAP funding in Georgia remains uncertain but hopeful, at least for now. Although there were rumors of cuts to funding for ADAP when the Board of the Department of Human Resources reviewed their budget recommendations to the Governor, it appears that funding will remain steady when the Governor announces his budget recommendations in early January. This good news does not mean that we are without worries for Georgia's ADAP. For the past seven years, we've been highly successful in working with key lawmakers in both the House and Senate to ensure that ADAP remained a state budget priority. Unfortunately, the recent election cycle saw nearly all of these supportive lawmakers either elected to new positions or stripped of their roles on the appropriations committees. For us, that means starting again in building a base of support. Please let us know if you are from any of the districts mentioned below, because we'll need your help in building these new relationships.

No official announcement has been made about how the appropriations committee will be structured in the new General Assembly or who will be in leadership roles concerning health care spending. However, these are the men we anticipate making new relationships with:

- Rep. Don Parsons, Cobb County, is expected to be the Chair of the Appropriations Committee.
- Rep. David Graves, Bibb County, and Rep. Jeff Brown, Coweta and Troup Counties, are expected to have leadership positions on the subcommittee reviewing health expenditures.
- Rep. Ron Stephens, from Savannah, is expected to chair the Medicaid subcommittee.

This year will start off very differently than in the past, as newly-elected House Speaker Glen Richardson has already announced that the usual two weeks of budget hearings featuring testimony from department heads will not take place.

Reauthorizing the CARE Act

The past year has been a time when organizations both large and small have drafted their positions on the reauthorization of the Ryan White CARE Act. This critical legislation must be reauthorized by Congress every five years. I'll certainly be writing extensively on this process as the year progresses. Although reauthorization does not determine funding, it does determine how those funds will be spent over the next five years. Already, there are concerns that some dramatic changes could take place that may impact your ability to seek or provide services in the future.

Several groups have openly questioned the need for separate funding for large urban areas under Title I and states under Title II. Other groups have begun to question the need to fund services such as child care, transportation, treatment education and peer counseling. There's even been one group that issued a press release after the election suggesting that any group engaged in advocacy that could be considered pro-gay be banned from applying for CARE Act funding.

The voice of Georgia advocates is likely to take on greater importance than ever before. We are a large southern state with both strong Title I and II programs, and U.S. Rep. Charlie Norwood from the Augusta area is expected to take a lead on reauthorization efforts. AIDS Survival Project, working in conjunction with other Georgia members of the CAEAR Coalition, will be scheduling a series of meetings around the state to discuss what reauthorization means to you and to solicit your support for our efforts in D.C.

Positive Action Network and Getting Your Voice Heard

This coming year will also see some changes to our Positive Action Network. We were honored to receive our initial funding for this program from the Healthcare Georgia Foundation. However, that funding has come to a close and it's been difficult to secure the resources necessary to ensure that we could have full-time staff for this initiative. As a result, I'll be stepping back in as the coordinator of this project at least for the first few months of 2005.

The year will be an important one for ensuring that the voices of people living with HIV and their advocates are heard in a way that is loud, strong and effective. We're starting the year off right with two upcoming events to help you learn how to be an effective advocate.

First, we will host our annual Lobby Day and Training on Sunday and Monday, February 6 and 7. On Sunday, we will be joined by professional lobbyists and members of the Georgia General Assembly to go over the issues of importance in this year's legislative session and how you can influence the outcome. On Monday, we will put that new training into action as we take the message of funding for ADAP, Medicaid and other HIV-related issues to the capitol for our annual Lobby Day.

Following that, on Wednesday, March 16, we will return to the capitol for our annual Legislative AIDS Awareness Day. Representatives from many AIDS service organizations will join other concerned citizens to share educational information on HIV in Georgia. More details on this event will be published in the March/April issue of *Survival News*.

If you would like to be involved in either of these important events, please e-mail me at JGraham@aidssurvivalproject.org.

Peer Counseling Perspectives

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PEER SUPPORT

Case Management Update

Case management has been essential to many people living with HIV. Case managers have helped people access medical care, housing, emergency financial assistance, food, clothing, support and mental health/substance abuse treatment programs. They are familiar with community resources and can serve as guides through the complicated systems that HIV+ people have to negotiate. Unfortunately, although the needs of HIV+ people are increasingly complex and urgent, major funding for services is remaining flat at best. Stresses on the Ryan White system of care are resulting in changes in services from state to state. For instance, some states have enacted various restrictions on the availability of their AIDS Drugs Assistance Programs (ADAP), instituting waiting lists or limiting medication options. In the Atlanta metropolitan area, there will soon be significant changes in the goals, approach and process of case management services.

Throughout 2004, consumers and providers of HIV case management and medical services in the Atlanta area met to develop standards for case management funded by the Ryan White CARE Act. They were concerned with how to use limited funds to achieve maximum results for a growing population. The new standards and system they have set up will go into effect May 1, 2005.

While some consumers may choose to contact a case management agency such as AID Atlanta on their own, many others are referred through AIDS service organizations, clinics and hospitals. Under the new case management standards, representatives of many referring agencies will screen people to help them determine if they may be eligible for case management services. Ryan White-funded agencies that commonly refer clients for case management will use a screening tool to enable them to make appropriate referrals and to educate consumers about what they need in order to access these services in the most direct manner.

In order to qualify for any Ryan White-funded service, an individual must first provide documentation proving that they are HIV+, their county of residence and their income. It is essential that potential clients bring proof of these three qualifiers with them when they present for case management.

The primary goal of Ryan White-funded case management is to promote access to health care, so the new standards require consumers to be actively enrolled in primary medical care. For adults, active enrollment is defined as at least one visit with a primary care provider every six months. Clients enrolled in case management will not have to be in health care in order to register for case management, but they *will* need to get themselves into primary care in the first six months in order to maintain their eligibility for case management services.

Consumers who meet the initial eligibility requirements will be further assessed for their psychosocial situation and needs. Based on this assessment, some consumers may be found to not qualify for case management. These people will then be given resource packets to enhance their familiarity with community resources. People who are assessed to be at this level who need access to ADAP will be able to apply for that without enrolling in case management. Education and other support services—such as AIDS Survival Project's programs—may be suggested for people who don't qualify for case management but who do need or want to develop skills to enhance their ability to manage the impact of HIV on their life.

Consumers who qualify for more assistance will work with their case manager on developing a plan toward self-management with the ultimate goal of "graduation" from case management. Common goals for people who qualify for one of the higher levels of case management include establishing steady medical care and adherence, secure housing, a stable income, adequate support networks, and management of mental health and substance abuse issues. Together, the case manager and client will develop an individual service plan aimed at taking concrete steps that will allow a client to be self-sufficient. Rather than a focus on crisis management, the new role of Ryan White-funded case management is skills-building and empowerment with a focus on supplementing what a client already has and building on that through the partnership of client and case manager.

The new standards set out specific criteria for the minimum level of contact a case manager and client need to have. Toward the goal of using limited resources conservatively, the standards also describe the various circumstances under which case management services will be terminated, how records are to be maintained and what the qualifications are to be employed as a Ryan White case manager.

If you or someone you know is concerned about access to a case manager or how these new standards may have an impact, call your local case management agency. In Atlanta, that would be AID Atlanta at (404) 870-7800. The new standards can be found online at www.co.fulton.ga.us. AIDS Survival Project peer counselors will be able to answer questions about the screenings for case management eligibility as we approach the May 1 initiation date.

THRIVE! Weekend Wish List

- Ballpoint pens, any color
- 2-pocket folders, any color
- Binders – 1½" white round ring clear view binder
- Bottled water
- Cans of soda
- Coffee, regular or decaffeinated
- Adhesive name tags

We always need these items to help us continue to offer this educational program to the community. If you would like to donate any of these items to us, please contact Sarah Biel-Cunningham at (404) 874-7926 ext. 14 or e-mail SBiel@aidssurvival project.org. All donations to AIDS Survival Project are fully tax-deductible and your generosity is always appreciated!

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Reaching Out!

Sheryl Johnson
SJohnson@aidssurvivalproject.org

PEER SUPPORT

An International Exchange

On September 29, AIDS Survival Project hosted a delegation of visitors from three countries in Africa—Kenya, Nigeria and South Africa. The group, all members of parliament in their respective governments, had come to the United States on a fact-finding mission to look at our federal government's response to HIV/AIDS. While in the U.S., they held several meetings in Washington, D.C., and Atlanta with agencies including local legislators, community leaders, civic organizations and faith-based groups. The focus of the meetings was to learn about local governance responses to AIDS.

The participating members of parliament were recruited from diverse backgrounds and from numerous political parties within their countries. An additional aim of the study tour was to forge strong working relationships with their counterparts in other African parliaments and to continue those partnerships after the conclusion of the study tour. On the last day of their visit to Atlanta, they visited AIDS Survival Project. Once they completed a tour of our facility, they were seated in the Bruce Almond Community Room for a group session enabling them to speak openly with persons living with HIV/AIDS. The group seemed very excited by the prospect of being able to ask questions and to receive information from people who have hands-on experience with living with the virus and who do not mind speaking openly about it.

The group was not shy at all and launched into a friendly mêlée of inquiries, as if afraid that all of their questions would not have a chance to be answered. They wanted to know such things as how do we handle the stigma attached to the disease and what types of alternative therapies do we have access to? Of the nine individuals that visited, everyone was curious about certain things and wanted to find out information about specific areas. I remember one woman stating that she wished that our comments could be recorded on a compact disc or filmed on a DVD so that they could take our images back home and share us with others. I was so moved by her simple enthusiasm that I gave her a copy of an article that was written about me in an issue of *The Atlanta Journal-Constitution* that had been published earlier in the year. "Take this home with you and share it with your fellow countrymen. Tell them that we are doing very well over here and that we are always thankful for the options that are available to us and for all the choices that we have."

ASP staffers met with members of parliament from several African nations.

The tour, funded by the International Republican Institute, also received additional funding from the State Department. Before departing on the tour, the members held meetings to discuss their goals and objectives with other representatives from their home countries. Their goals and objectives were then evaluated through the length of the program through debriefing sessions and breakout discussion groups. At the conclusion of the program, there was a scheduled panel discussion at the Institute's office in Washington, D.C., where members presented what they learned and discussed ways in which they can apply their findings to their work in their home constituencies and national parliaments.

It is always eye-opening to talk with people from other countries about the plight of people with HIV and AIDS. We take so much for granted in this country. We are so fortunate to have the range of options that are open to us: the number of doctors and specialists available, not to mention the medications, complementary and alternative therapies and the wide range of support groups. There is still so much stigma and discrimination on the continent of Africa that people cannot even share their diagnoses with members of their families, much less get access to good medicines, doctors or clinic facilities. It was good to be able to share information with these dignitaries who are working diligently through their government agencies in order to improve conditions and access to medications for people in their countries and to gain greater access to whatever resources are available to them.

As an African-American woman living with HIV, I always make time to give thanks for the many blessings in my life and in turn, I bless all the people that I come in contact with, many of whom are struggling just to keep afloat. Let us remember that expressing gratitude should be a part of our daily routine. The visit from our African neighbors certainly made me more aware of how much I have to be thankful for and how little it takes to bring a little sunshine into someone else's life.

*Support for **AIDS Survival Project** is provided by Titles I and IV of the Ryan White CARE Act, the Centers for Disease Control and Prevention's HIV Prevention Projects for Community Based Organizations and Case Management Linkage to HIV Care, the Healthcare Georgia Foundation, the Atlanta AIDS Partnership Fund, Fulton County Human Services, the LiveWell Fund, the Elton John AIDS Foundation, the M•A•C AIDS Fund, Georgia Shares, IBM, Roche Laboratories, the DeKalb County and Clayton County School Employees Funds, Bristol-Myers Squibb Immunology, Broadway Cares/Equity Fight AIDS, GlaxoSmithKline, Pfizer, Inc., Concerned Brothers & Sisters of Atlanta, Until There's A Cure, Serono, Gilead Sciences, and hundreds of organizations, businesses and individuals who share our vision and commitment to the education, empowerment and support of all people affected by HIV and AIDS.*

The Backbone

Carmen Giles, MPA
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Highlights, Holidays and Heartfelt Farewells

This column provides updates and information about our volunteers and staff, as well as persons in the community. If you have information to share, please call, e-mail or write to ASP.

Happy New Year 2005! Thanks to all the volunteers, supporters, partnering agencies and friends for making 2004 an outstanding year for ASP. We have grown in so many ways. We have expanded our services to offer HIV testing and counseling and have more great people working on our staff. We appreciate the help all of you have given us. We could not have accomplished so much in 2004 without you.

Holiday Volunteer Appreciation Party

Thanks to all of the volunteers who came out for this special party. It's one way we are able to show our volunteers just how much they are appreciated by us. Everyone seemed to have a wonderful time, and if you didn't make it, we hope to see you at the next volunteer appreciation gathering this spring. Each volunteer received a free movie rental certificate, popcorn and holiday goodies. We hope this helps to express how grateful we are to have you around. We hope you will join us again as we plan to make 2005 the best year yet!

What's going on with volunteers, members and staff

- What a gift we have received by having **Antoniette S.** as a part of our family. Happy 4th Anniversary as our front desk volunteer.
- **Nicholas Forge**, our brilliant intern, was a co-presenter with **Dorothy Ziemer** at the National Association of Social Workers (NASW) Conference.
- **Earl H.** presented at UGA's Masters of Social Work Human Behavior Class with our own **Sarah B. Cunningham** and **Mary Lynn Hemphill**. Earl also started *THRIVE! Weekend*'s training program to become a group facilitator. He shadowed with **Joe G.** in November. Way to go, Earl!
- Please join us in sending get well wishes to **Spencer W.** and **Tyrone T.** We hope you both feel better real soon.
- A special thank you to **Bonnie O.**, who has helped so many staff members with various projects over the last two months. We are so glad to have you around!
- Congratulations to **Dázon Dixon Diallo** for being the recipient of the Ford Foundation Leadership for a Changing World Award. This award recognizes the tremendous contribution and strong leadership Dázon continues to make in our community.
- Thanks to all the volunteers who provided such capable and cheerful assistance with our parade of benefits and fundraisers over the past month: **Alfredo B.**, **Leland B.**, **Joan C.**, **Richard C.**, **Van C.**, **Hollis E.**, **Erin G.**, **Calvin H.**, **Earl H.**, **Jan H.**, **Ken H.**, **Margie H.**, **Mary Lynn H.**, **Sheryl J.**, **Endsley R.**, **Danny S.**, **Justin S.** and **Michele S.**
- We are so glad to have **Jan Hackney** back in the TRC after a challenging election bid for the State House District 48. Although she was not elected, Jan won 46.6 % of the vote. That's quite an achievement for a first-time candidate, especially in the North Fulton district.
- *THRIVE! Weekend* manager **Sarah C.** will celebrate her birthday on January 5. Happy birthday, Sarah!
- "Parting is such sweet sorrow." **Justin Sears**, who has done a magnificent job of taking ownership of the Positive Action Network program, worked his last day at ASP on December 23. Before his departure, he presented at the Southeast Regional Gay Men's Health Summit held in Jacksonville, Florida. We appreciate the contribution Justin made to our program and our team. We wish him the very best and will miss his presence in the office.

A Special Congratulations to Arleen C.

Year 2004 went out with a bang, especially for **Arleen C.** After much hard work and persistence, many wonderful things happened in Arleen's life the last few months of 2004. Join us in congratulating Arleen for earning her peer counseling certification. Arleen has worked since 1998 to accomplish this (that's six years!). When asked what made her persevere, Arleen said, "I wanted to be able to help another. My passion is to give back what was so freely given to me." She added that being a peer counselor helps her show others that they are not alone and that HIV is not a death sentence. Arleen told me "it's as simple as that," but little of what Arleen has been through and overcome has been simple. Before the year ended, she also celebrated two years of sobriety. We are so proud of her! In December, Arlene was a member of the second graduating class of the Positive Action Network and also received special recognition from VOICES, a Fulton County Health Department pilot program. With so many accomplishments, we weren't surprised that the Fulton County Health Department offered Arleen a position late last year. Arleen has given so much, it's great to see so much good come her way. The next time you see her in the office, covering the front desk or on peer counseling duty, please let her know, too, how proud you are of her.

A warm ASP welcome goes out to our newest volunteers

Bonnie O.	**Arnold B.**	**Edward P.**
LaSharra B.	**Alfredo B.**	**David M.**
Patrick A.	**Molli M.**	**Daniel V.**
Willie W.	**Antoinette L.**	**Juan A.**
Keith D.	**Christopher P.**	

Congratulations to volunteers and staff members who will be celebrating birthdays

In January:

Jim S.	**Sarah C.**	**Lloyd P.**
Richard A.	**Bertha D.**	**Laurency G.**
Maddalena P.	**Luke M.**	**Jonathan K.**
Jason B.	**Christopher M.**	

In February:

Michaela N.	**Robert R.**	**Terry R.**
Tim B.	**Ken D.**	**Zachery B.**
James J.		

Save the date(s)!

To help keep you educated and up-to-the-minute on the latest issues in the HIV world, here's a list of upcoming ASP-sponsored educational opportunities to put on your calendar. For more information, give us a call at (404) 874-7926.

THRIVE! Weekend—On Saturday and Sunday, January 29-30, *THRIVE! Weekend* will be held at the ASP offices. Please call us and sign up to attend or to volunteer. If you can't make the January *THRIVE!*, they are held every other month. The next *THRIVE!* will be held on March 12-13. For more information, to register or to volunteer, please call the ASP offices.

Martin Luther King Day March—Come join the AIDS Survival Project team on Monday, January 17 as we march in the annual MLK march. Call ASP at (404) 874-7926 for additional information.

Come by the office any time you can just to say "hi" or to volunteer. We'd love to see you and hear how you've been.

If you have exciting things going on in your life that you'd like us to know about, or if you know what's going on in the lives of any ASP volunteers or members and know they would like to be mentioned here, please call me at (404) 874-7926, ext. 20 or e-mail me at CGiles@aidssurvivalproject.org and give me the details.

Prevention Counseling

Kevin English
KEnglish@aidssurvivalproject.org

INFORMATION

Modern Technology in HIV Testing Takes Another Leap

Initially, when HIV testing began in the early 1980s, it would take up to two weeks to obtain results from your primary care physician. During these two agonizing weeks, individuals had to suffer and lose countless hours of sleep wondering "if"—the "if" being, "Am I HIV+?" Waiting this long for results can take a toll on a person's physical and mental well-being.

Then in the late 1990s came the OraSure oral testing device, which required giving a saliva sample from the mouth. Results were obtained within three to five days. This helped to cut out a week of worrying, but it still gave a person time to ponder the "if." Not only did the oral swab test give individuals time to process the possibility of a positive test result, but it also gave them time to chicken out and not go back for the results. This was a challenge for AIDS service organizations across the country. How do we encourage people to return for their results?

This also caused a big increase in HIV infection because many individuals who had tested positive had not returned for their results and passed the virus on to someone else! Many ideas were tossed around to meet this challenge, such as offering different types of incentives or meeting the people where they are. These ideas worked for some, but ultimately they did not put a big dent in decreasing the numbers of individuals who were tested but did not return for their results.

Thanks to OraSure Technologies, we now have a solution to that problem. OraQuick was introduced in 2002 as a new testing device that would process a small droplet of blood in 20 minutes. Individuals can get their results in one visit. Great! But there was still one dilemma. The person had to be stuck with a needle. Beyond that, there was the question: Was this person ready to hear the results right away? It seems to be that no matter how much modern technology has attempted to make it easy for individuals to take an HIV test, there always seems to be some sort of roadblock. It is obvious that everyone cannot be satisfied, but effort has been made to accommodate the majority.

Now, OraSure Technologies has come up with another answer. In November 2004, the company introduced another device, called the OraQuick Advance Rapid HIV-1/2 Antibody Test. What is OraQuick Advance? It is used to see if a sample of oral fluid or blood contains HIV antibodies. What does this mean? It means that once upon a time it would take an oral sample three to five days to be processed in a lab, but now it can be processed in 20 minutes in many different settings. Results can be obtained in one visit.

With this new technology, more and more individuals can be tested and obtain results more quickly than before, without having to wait several days or longer. And they have the option of giving either a sample of oral fluid or blood. The more important thing now is how eager an individual is to know their results right away—but that's the issue for pre- and post-test counselors. At least the new technology has helped answer the challenge of making sure people obtain their results.

AIDS SURVIVAL PROJECT
HIV Counseling and Testing Center

- Confidential Rapid HIV Testing
- Same-Day Results
- Culturally Sensitive Pre- and Post-Test Counseling
- No Cost to You
- No Appointment Necessary
- Convenient to Downtown, Midtown and MARTA

Hours

Mon.–Wed. .. 12:00 p.m.–8:00 p.m.
Thurs.–Fri. ... 10:00 a.m.–5:00 p.m.
Sat. ..... 10:00 a.m.–2:00 p.m.

For more information, please call (404) 874-7926 or visit www.aidssurvivalproject.org

LUNCH & LEARN

Sculptra™
poly-L-lactic acid

January 12, 2005

Come learn about the only FDA-approved treatment for facial wasting and the recently approved patient assistance program. Featured speaker: Dr. Jonathan A. Jarman, MD, of Atlanta Cosmetic Surgery. Times TBA. Call (404) 874-7926 for more information and to reserve a seat.

Healthy Relationships

A 5-Session, Small-Group Intervention for Men & Women Living with HIV

Beginning in late January 2005

- Develop decision-making and problem-solving skills to make informed and safe decisions about disclosure and behavior.
- Examine risks, develop skills to reduce risks and receive feedback from others.
- Define stress and reinforce coping skills for disclosing to family, friends and sexual partners, and building healthier and safer relationships.
- Watch movie clips to stimulate discussions and role-plays about disclosure and risk reduction.

Interested participants in Atlanta: please contact Greg Smith at (404) 874-7926 or e-mail GSmith@aidssurvivalproject.org.

Donations & Development

Greg Carraway
GCarraway@aidssurvivalproject.org

INFORMATION

You Are Us

All of us here at AIDS Survival Project—board, staff and volunteers—want to start 2005 by expressing our heartfelt thanks to all of you who saw us through the roller-coaster year of 2004.

Thank you to the Healthcare Georgia Foundation for providing the seed money that allowed ASP to establish the Positive Action Network. To the Atlanta AIDS Partnership Fund for its continued, generous commitment to our HIV Advocacy Program. To the Elton John AIDS Foundation and the M•A•C AIDS Fund for supporting our HIV prevention and education outreach. To Broadway Cares/Equity Fights AIDS for their support of our volunteer training program. To Statscript Pharmacy for sponsoring our 2004 Annual Meeting. And to all of our friends and colleagues at Bristol-Myers Squibb, Roche Laboratories, Abbott Laboratories, GlaxoSmithKline, Pfizer, Inc., Serono and Gilead Sciences for supporting our HIV treatment advocacy and educational programs.

Here's one that may take your breath—thank each and every one of you for your taxes (for all the anguish they engender and dubious projects they may underwrite, they are also the *modus operandi* of this nation's collective humanity). Thanks are due as well to those whose voices of support helped fund Titles I and IV of the Ryan White CARE Act, without which the Treatment Resource Center, Peer Counseling and Community Outreach programs might have withered on the vine. If you live in Fulton County, your taxes and support funded Fulton County Human Services, without which *THRIVE! Weekend* would only be able to do half of what it does.

I'm not quite sure about the protocol for expressing thanks to the CDC, but without its endorsement and funding, AIDS Survival Project would not have ended the year with a new HIV Counseling and Testing Center and Linkages to Care program. Thank you, CDC, for making this exciting and needed expansion of our services possible.

Thank you for joining our AIDS Walk team—with a very special thanks to top team fundraisers Ilyse Tasdemir, Joe Netto and Jeff Graham! Thank you for bidding on artist-decorated plates at the Art of Dining in April, donating the proceeds from your tickets to see *Bent* at the Actors' Express in July, and for coming out to see the Dames Aflame's *Frou Frou A Go Go* burlesque extravaganza in November. To those who work with the DeKalb and Clayton County school systems, thank you for giving through your employee giving fund. Thank you for sending in your check for $10, $25, $500 in response to our seasonal donor appeals, giving to ASP at your workplace through Georgia Shares, using your Kroger Community Commitment card, and for all the countless other ways in which you remembered the importance and value of supporting the work we do.

Above: ***Bonnie Olsen*** *(center) was one of the many great ASP volunteers who helped our Get Out the Vote campaign at AIDS Walk Atlanta, October 17.*

Below: Development Director ***Greg Carraway*** *(center right) and Ex Lucis committee members (from left)* ***Nanha Kim***, ***Adam Waterson*** *and* ***Sarah Barrick*** *raffle off a prize at the "High 5" benefit, November 18.*

Two special thanks go out to the fundraising efforts of the Concerned Brothers and Sisters of Atlanta and to all who joined our LiveWell Fund family, and to LiveWell Fund committee chairs Bill Harris and Brent Adams, as well as committee members Larry Sheldon, Spencer Waddell and Drew Cornutt. You would not be reading this issue of *Survival News* if not for the support of these tireless fundraisers and generous donors.

Finally, thank you to the Beauty Aid organization and all the participating metro area salons and spas for sponsoring makeover mayhem at the Aveda Institute in September, to the sponsors and attendees of our First Annual Halloween Affair at Underground Atlanta in October, and to our silent auction of original art—"High Five"—sponsored by Georgia State's Ex Lucis student photography group in November.

In 2004, we could not have done what we did without you. We will not be able to do what needs to be done without you in 2005. We hope you will make a commitment to give to AIDS Survival Project to the best of your means and ability, throughout the year. Without you, we are nothing. You are us!

A Good Fundraiser Is Hard to Find

Are you one of those rare exotic creatures—someone with fundraising experience who likes to raise money? AIDS Survival Project is looking for a few good fundraisers to help with a variety of upcoming donor campaigns and benefits. If you'd like to learn more about serving on our LiveWell Fund committee, have a background in grants research and writing, or would like to roll up your sleeves to help with a special event, please contact Greg Carraway at (404) 874-7926, ext. 18, GCarraway@aidssurvivalproject.org, or drop by the office and we'll talk.

Special guest celebrity judges and hosts of the costume contest: ***Lucky Yates***, ***Tallulah*** *(taking a bow, of course), and* ***Mr. Magnificent****.*

First Annual Halloween Affair, "Film Fantasia"

There they were—Baby Jane Hudson and sister Blanche, Cher with dead ex Sonny in tow, the Wicked Queen from *Snow White*, the Invisible Man, pharaohs, witches, mummies, intergalactic space divas and even Thing One and Thing Two—all packed into Underground's Event Loft for our First Annual Halloween Affair. Despite larger-than-life personalities (with matching egos), all had time to sample delicious party fare provided by A Southern Tradition and to dance to the serious house beat of DJs Brandon Sutton and Chris Kind. We are extremely grateful for each and every star, myth and monster who took time from their busy virtual lives to support the work of AIDS Survival Project and to contribute to the fight against AIDS and for those living with the disease. We hope to make this Halloween-themed affair an annual event, so keep your eyes and ears open for upcoming save-the-date announcements!

First Annual Halloween Affair Host Committee

- Charlie Chasen & Jamie Collins
- Susan & Drew Cornutt
- Kevin Kirby
- Gregory Nevins
- Dr. Jesse Peel
- Drew Plant & Bill Golden
- Barron Segar & Charles Potts
- Larry Sheldon & Len Greenough
- Laura Zekoll

AIDS Survival Project is grateful to the following sponsors for their support of our First Annual Halloween Affair:

Presenting Sponsor

- Elton John AIDS Foundation

Producing Sponsors

- A Legendary Event
- A Southern Tradition
- Atlanta Convention & Visitors' Bureau
- Powell Goldstein, LLC
- Printing Concepts

(Producing Sponsors, continued)

- Underground Atlanta/Event Loft

Event Sponsors

- Active Production and Design
- Central Atlanta Progress
- Lanier Parking
- 99X Radio Station
- *Southern Voice/David*

Above left: I Had *You, Babe: Best Celebrity/Star costume winners Cher* ***(Nicholas Forge)*** *and her dead Sonny* ***(Michael Morrison)****. Above right: Let Them Entertain You: Dames Aflame performers* ***Chico*** *and* ***Luna Luxx*** *made a special appearance. The following week, Dames Aflame held a fabulous fundraiser show for ASP, "FrouFrou À GoGo."*

Big Thanks

To Halloween Affair committee members **Charlie Chasen** and **Susan Elliott**, who gave of their time and creativity so generously in working with staff and board on this event; to Hall of Horror decorator **Ken Hornbeck**, paparazzi **Hollis Ellison**, and costume contest emcees **Lucky Yates**, **Tallulah** and **Mr. Magnificent**; and to our volunteers: **Van Caldwell**, **Joan Campitelli**, **Jamie Collins**, **Erin Green**, **Earl Hammond**, **Calvin Hemphill**, **Mary Lynn Hemphill**, **Margie Huwig**, **Sheryl Johnson**, **Endsley Real**, **Justin Sears** and **Saul Vargas**.

Far left: But Ya Are, Blanche: Best Movie winners ***Ken Hornbeck*** *and* ***Jeff Graham*** *(no, not THAT Jeff Graham) recreate "Whatever Happened to Baby Jane?"*

Center: Who was that Masked Man?: ***Rob Nixon*** *keeps a low profile as The Invisible Man.*

Right: A couple of Things out of "The Cat in the Hat": ***Jeff Graham*** *(yes, THAT Jeff Graham) and* ***Peter Stinner.***

PHOTOS: HOLLIS ELLISON

George E. Burgess
GBurgess@aidssurvivalproject.org

TREATMENT

Knowledge = Power

First, I'd like to say Happy New Year to all the readers and supporters of AIDS Survival Project! What a wonderful 2004 we had as an agency. Let us reflect for a moment on a few successes we had this last year: new staff members, new initiatives such as the HIV Counseling and Testing Center, and providing support and office space for the Atlanta Interfaith AIDS Network in their time of need. Our biggest success is that ASP remained true to our mission statement: *We are diverse people living with HIV, united to promote self-empowerment and enhanced quality of life for HIV-affected individuals through advocacy, education, peer support and treatment activism.*

We move forward this New Year with this theme in mind: *Knowledge = Power*. Our Treatment Resource Center (TRC) is planning some superb events such as Treatment Forums, Lunch & Learn sessions and *Survival News* articles. First on our calendar of events for this year are updates on two major HIV/AIDS conferences. You can access these daily updates by logging in to our web site at www.aidssurvivalproject.org.

12th Conference on Retrovirus and Opportunistic Infections (CROI)

This conference will be held February 22-26 in Boston, Massachusetts. The mission of the CROI is to provide a forum for basic scientists, clinical investigators and global health researchers to present, discuss and critique their investigations into the epidemiology and biology of the human retrovirus and the diseases they produce, with the ultimate goal of translating laboratory and clinical research into progress against the AIDS epidemic.

The subjects that will be highlighted are vaccines, primary/acute infections, antiretroviral therapy (immune-based therapies and treatment strategies), HIV drug resistance, opportunistic infections and co-pathogens, hepatitis virus co-infections, HIV prevention science (including microbicides), pediatric, adolescents and HIV infection in women/women's health. The conference will also feature a presentation, "Lipodystrophy: Ten Years of Progress." In conjunction with the daily update on CROI, the TRC will hold its yearly treatment forum on this conference in late March. Please check our web site or the next issue of *Survival News* for date, time and presenter.

17th National HIV/AIDS Update Conference (NAUC)

This conference will be held April 10-13 in Oakland, California. The American Foundation for AIDS Research (amfAR)'s 2005 Update Conference, cosponsored by the Pacific AIDS Education and Training Center, promises to provide an excellent forum to learn the latest in HIV/AIDS prevention, treatment and care, and offers an opportunity to improve existing HIV/SIDS programs.

One of the most informative annual HIV/AIDS meetings in the U.S., the NAUC attracts health care professionals, service providers, community advocates and people living with HIV/AIDS. Its aim is to translate research advances into practical strategies to help end the AIDS pandemic and to improve the lives of people living with HIV/AIDS. The conference will feature six focus points (tracks) on the following information:

- Care and service
- Mental health and addiction
- Prevention and harm reduction
- Public policy and funding
- Treatment and research
- High-risk communities

So as you can see, this is just the beginning of 2005. Yes, we will hold our popular Women Empowerment Forum this summer. New forums are in the plan, such as "Women's GYN Issues" and "Barriers to Clinical Trials." The latter forum will be a collaboration with other agencies conducting clinical trials such as vaccine, microbicide and antiretroviral studies. For more information about these upcoming events, please call AIDS Survival Project and ask for the Treatment Resource Center. If you have any topic ideas for Treatment Forums, call us. We look forward to hearing from you!

Remember, "In all that you're getting, get understanding."

Happy New Year!!!

Keep safe!

Oakland, California · April 10-13, 2005, Oakland Marriott City Center

amfAR AIDS RESEARCH 2005 National HIV/AIDS Update Conference

Gracias! Merci! Danke! Thank You!

Beauty Aid

For six hours on September 12, the Aveda Institute in Buckhead became coif and manicuring headquarters for dozens of area salons and spas who donated staff, time and talent in support of AIDS Survival Project. Since 2000, Beauty Aid has organized this annual fundraising event on behalf of the AIDS service community, and AIDS Survival Project is honored to have been chosen as this year's beneficiary. We wish to express our gratitude to all the folks who worked so hard with the Beauty AID organization, with a special thank you to Beauty Aid President **Wendy Watkins** and Founder **Butch Thompson**, and to the Aveda Institute for hosting the event.

Ex Lucis and "High Five"

For the seventh time, Georgia State University's School of Photography's student collective—Ex Lucis—invited ASP to be the beneficiary of a silent auction of art donated by students, faculty, alumni and independent artists from the metro area. The gallery brimmed with over 100 pieces of striking, beautiful and above all, original photographs, paintings, sculptures, pottery, textiles, collages and prints.

"High Five" would not have been possible without the dedication, hard work and good spirits of the Ex Lucis Committee and all the individuals and businesses which donated their time, products and services to make this event a high-energy, fun-filled evening. AIDS Survival Project extends a sincere thanks to the Ex Lucis Committee—**Adam Waterson**, **Nanha Kim**, **Sarah Barrick**, Faculty Advisor **Conne Thalkin** and Gallery Director **Cathy Byrd**—for putting together such a fabulous event.

We also thank A Southern Tradition for delicious victuals and Whole Foods for their generous donation of wine and beer. Thank you, too, to our highly capable volunteer staff: **Alfredo Blanco**, **Leland Boyer**, **Van Caldwell**, **Richard Cruce**, **Jan Hackney** and **Michele Smithers**.

A Southern Tradition

If it seems you've read the words "A Southern Tradition" more than once on this page—you're not going crazy! We want to express our gratitude to **Dorothy Haynes**, **Greg Savitt** and all the wonderful folks at A Southern Tradition for providing delicious edibles not only for "High Five," but also for catering "The First Annual Halloween Affair" and our LiveWell Fund Reception last spring. Now *that*'s a shining example of community spirit!

Cara Emery
CEmery@aidssurvivalproject.org

The Local Forum Wrap-Up

The good news: Many of us with HIV are living longer. The bad news: Long-term side effects that no one expected are showing up, and we aren't quite sure what to do. The good news: People and organizations are beginning to address these long-term survival issues. Over the past two months, three forums were held to address some of the problems that we have come to associate with long-term survival, and in even *more* good news, I'm going to provide you with a wrap-up, if you were unable to attend. Aren't you glad you read this newsletter now?

Drug Resistance

We know that many people who take antiretrovirals for an extended period of time will develop resistance to their medications. The National AIDS Treatment Advocacy Project (NATAP) held a forum November 4 at the DeKalb County Board of Health to address HIV drug resistance strategies. I am indebted to them and to Dr. James Jones, the presenter, for an excellent overview of a difficult subject.

It's important to understand how HIV responds to drugs. It's very adaptable and can survive through mutations. If you're HIV+, the virus is present even when your viral load is undetectable. The HIV in our bodies goes through *every* possible genetic mutation on a *daily* basis, so there is always some virus in your body that is resistant to antiretrovirals. When you're taking drugs and miss a dose, the resistant virus has a chance to multiply. This is why, in a medical sense, the goal is at least 95% adherence, meaning taking your drugs when you should every day at least 95% of the time. We know that people get clinical benefits (lower viral load, more CD4 cells, living longer, less HIV-related illness) with higher rates of adherence. What we don't know is how long that will last, so if you skip doses of your drugs, you do so at your own risk.

And just to make life more unfair, resistance can develop or already be present even when you take your medications properly. Some people are infected with HIV that is drug-resistant. Your body may have a problem absorbing antiretrovirals, or you may be taking other drugs that lower the level of them in your blood. And there is one school of thought that assumes you will eventually become resistant to *any* drug you take.

So what can we do when resistance develops? A good start is to take a genotypic or phenotypic test and try to figure what drugs will work. One fairly new approach is double protease-boosted combinations. This involves taking a regimen that uses two protease inhibitors (PIs) with a small amount of Ritonavir, which is also a protease inhibitor. The Ritonavir boosts the amount of the other two PIs, so there is a constant amount of drugs in the bloodstream that is sufficient to keep HIV from reproducing. And of course, if you're resistant to many drugs, the best thing to do is add at least two (if possible) new drugs that you aren't resistant to. That may mean something like...

Fuzeon

We held a forum here at AIDS Survival Project on November 10 to discuss this new antiretroviral. Our panel—Nicole Antoine, MSW; Maria Trattler, ANP; and Richard, a patient—had an open discussion about the practical side of taking Fuzeon, also known by the generic name of enfuvirtide. It is the only drug available in the new class of fusion inhibitors. This is good, because people who have developed resistance to a lot of the drugs currently available will still benefit from Fuzeon. More good news: According to our panelists, it doesn't cause the usual antiretroviral side effects such as nausea, gastrointestinal problems, neuropathy, etc. It's also very effective, in one case lowering a patient's viral load from "millions" to 190. Richard saw his CD4 cells jump from 51 to 278, and a viral load drop from over 100,000 to 1200. The quality of his life also improved.

So why aren't we all taking Fuzeon? The bad news: It has a very long protein structure, so it must be injected—a big minus to people who don't like needles. The injections can cause swelling and other skin reactions, but all of the panelists felt that learning some tricks, such as how to rotate injection sites, made Fuzeon much more manageable. There are also materials such as charts and travel kits that are helpful, and a local support group for those who are taking (or thinking about taking) Fuzeon.

The challenges for some people are less medical and more financial, as Fuzeon is expensive. As of now, there are only six slots for it to be covered under Georgia's AIDS Drug Assistance Program (ADAP), and they are all filled. So if you receive your HIV medications from ADAP and you need this drug, there could be a problem. Good news: There is patient assistance available from the manufacturers Roche and Trimeris. They also have a special program called ASAP for patients who are starting treatment with Fuzeon in combination with an investigational drug in expanded access.

Dealing with resistance and taking drugs are aspects of daily life with HIV. But living with HIV for the long haul has presented problems that we would have never foreseen, such as changes in our bodies. One problem that seems to be on the increase is…

Facial Wasting

HIV and/or medications used to treat it are associated with the redistribution of body fat. This is seen in fat distribution where you don't want it, like in the abdomen, and a lack of fat in other places, such as in the facial area. Over 40 people were in attendance at an AID Atlanta seminar on November 4 to learn about the benefits of Sculptra, a drug which has been approved by the FDA for one official use: the treatment of facial lipoatrophy (wasting) in patients with HIV. Dr. Jonathan Jarman and Dr. L. Jack Cheng of Atlanta Cosmetic Surgery were on hand to present and demonstrate the benefits of this new drug, which was just approved by the FDA in August 2004. Dermik Labs has obtained the U.S. rights to Sculptra and requires doctors that wish to administer the drug to be strictly trained in its proper administration. At press time, the doctors of Atlanta Cosmetic Surgery were the only Atlanta physicians trained to perform the procedure.

Sculptra's main ingredient is poly-L-lactic acid microparticles, a natural substance that is both biocompatible and biodegradable. The doctor injects this compound under the dermis and sub-dermis of the face. Facial wasting can be treated with a series of one to six sets of Sculptra treatments, usually one for each side of the face. The current cost for one set of these treatments is $1,500. At present, most insurance companies will not cover a Sculptra treatment. When the Dermik representative was asked if a patient assistance program had been established, the answer was they were "working on it," but nothing was in place as of yet.

Side effects are mostly minor, all of which went

CONTINUED ON PAGE 20

For More Information

Drug Resistance

- www.natap.org
  The NATAP web site has a search feature so you can locate articles by subject.
- www.aidsmeds.com/lessons/Resistance.htm
  A good basic walk-through on resistance

Fuzeon

- www.Fuzeon.com
- StatScript Pharmacy
  (404) 733-6800
  They offer a local support group for Fuzeon

Facial Wasting

- www.sculptra.com
- www.atlantacosmeticphysicians.com
  They offer Sculptra treatments
- www.facialwasting.org
  A web site that addresses facial wasting

Ellen Steinberg, MS, RD, LD
AIDS Treatment Initiatives—HIV/AIDS Buyers Club
139 Ralph McGill Boulevard NE, Suite 305
Atlanta, Georgia 30308-3311
Phone: (404) 659-AIDS • Toll-Free: (888) 874-4845

Eating Defensively: Protecting Yourself from Food-Related Illnesses

Because foodborne pathogens take advantage of the impaired immune system, people with HIV/AIDS are more susceptible to food-related illnesses than otherwise healthy individuals. If a person with HIV/AIDS acquires a foodborne disease, the illness can be difficult to treat, putting the person at risk for persistent and generalized infections. In fact, acquiring a foodborne illness can hasten the progression of HIV and even be fatal for a person with AIDS. Therefore, everyone with HIV/AIDS should be aware of and practice food safety recommendations.

The enemy: *Salmonella*, *Campylobacter jejuni* and *Listeria monocytogenes* are just a few of the "bad bugs" known to cause food-related illnesses. The defense: You! Foodborne diseases are often avoidable and safe food-handling behavior is the key to their prevention. Here are some basic food safety recommendations to help you protect yourself from food-related illnesses.

- Wash your hands with warm water and soap for at least 20 seconds before handling food.
- Use different cutting boards for raw and cooked foods. If possible, use a different cutting board for raw meat products.
- Never thaw frozen foods at room temperature. Thaw food in the refrigerator, under cold running water or in the microwave.
- Keep foods at the correct temperatures. Use a cooking thermometer for hot foods and test the temperature of the refrigerator and freezer.
  - Hot foods: cook at 165º F to 180º F and hold at 140º F to 165º F.
  - Cold foods: keep the refrigerator set between 35º-40º F and the freezer at 0º F.
  - Do not eat foods that have been left out of the refrigerator for more than two hours.
- Never place cooked food on a plate which previously held raw meat, poultry or seafood.
- Avoid the following: raw or undercooked meat, poultry or seafood; unpasteurized dairy products and fruit juices; raw sprouts such as alfalfa; raw or partially cooked eggs or foods containing raw eggs.
- Scrub fruits and vegetables with a brush under running water. Fruits such as melons also need to be washed before cutting.
- Consider using paper towels to clean up kitchen surfaces. If you use cloth towels, wash them often in the hot cycle of your washing machine.

The new year is a perfect time to adopt behaviors that help keep you healthy. Eat well, exercise, get plenty of rest and remember these food safety tips. For more information about food safety or any other nutrition issue, call AIDS Treatment Initiatives (ATI) at (404) 659-2437. I wish everyone a happy and healthy year. Remember to eat your fruits and vegetables, but don't forget to wash them well!

InfectedAffectedNegativePositiveLongTermSurvivorNewlyDiagnosedInfectedAffectedNegativePositive

AIDS SURVIVAL PROJECT
THRIVE! WEEKEND

THRIVE! Weekends are free, interactive gatherings organized by **AIDS Survival Project** and led by men and women living with HIV. Join us for two full days of candid group discussions and empowering presentations on HIV/AIDS. Professional child care and meals provided. ASL by request.

2005 *THRIVE! Weekend* Dates

Jan. 29–30	May 14–15	Sept. 17–18
March 12–13	July 16–17	Nov. 6–7

To register, call:	TTY	Toll-Free
(404) 874-7926	(404) 524-0464	1 (877) 243-7444

Funded in part by the Fulton County Board of Commissioners under the guidance of the Fulton County Human Services Grants Program, Broadway Cares/Equity Fights AIDS, Roche Laboratories, Inc., the Bristol-Myers Squibb Company, The BroadView Foundation, The Central Congregational United Church of Christ and The LiveWell Fund.

PositiveBeginnings
BeingYourOwnAdvocate
IssuesForLongTermSurvivors
WomensHIVMedical
SaferSex
Antiretrovirals
FamilyFriendsCaregivers
ClinicalTrials
Disclosure
SocialSecurity
DentalCare
SubstanceUse
SaferUsing
FoodSafety
Legal
HIVOverview
Nutrition
OpportunisticInfections
FromSurviveToTHRIVE!
ComplementaryTherapies

InfectedAffectedNegativePositiveLongTermSurvivorNewlyDiagnosed
InfectedAffectedNegativePositiveLongTermSurvivorNewlyDiagnosed
InfectedAffectedNegativePositiveLongTermSurvivorNewlyDiagnosedInfectedAffectedNegativePositive

This list of HIV/AIDS-related support groups in the metropolitan Atlanta area is updated and published in Survival News *annually. If your group would like to be listed in future editions of this list or if you would like additional copies of this list, please contact an ASP peer counselor at (404) 874-7926.*

HIV/PLWA

HIV/AIDS Group	Wednesday	11:30 AM–1:00 PM	Closed; 3-month commitment, call David
A Center for Relationship Therapy		Atlanta	(404) 325-3401
PWA Group	Every other Saturday	12:00 PM	Call for information; ask for Lola
AIDS Alliance of NWGA		Cartersville	(770) 606-0953
PWAs Group	Tuesday	6:30–7:30 PM	Open
AID Gwinnett		Lawrenceville	(770) 962-8396
Peer Counseling	Monday–Friday	10:00 AM–5:00 PM	Trained HIV+ volunteers provide support, info
AIDS Survival Project		Atlanta	(404) 874-7926
Adult Interpersonal Psychotherapy Group	Tuesday	5:30–7:00 PM	Open; call Scott Conkright
Atlanta Therapy		Atlanta	(404) 315-7150
Directions (newly diagnosed/coming out of denial)			Call for information
BRAC Center		Atlanta	(404) 264-9011
Peer Education			By appointment
BRAC Center			(404) 264-9011
HIV+ Support	Every 2nd Wednesday	6:00–7:00 PM	Open
	Every 4th Thursday	6:00–7:00 PM	Open
Marietta Community Health Center		Marietta	(770) 514-2464
Common Ground Day Program (lunch and activities)	Monday–Friday	10:00 AM–3:30 PM	Open
Rev. Michael Brunson, Common Ground		Atlanta	(404) 874-8686
Psychotherapeutic for PWAs	Thursday	1:00–2:00 PM	Open; call first
Rev. Michael Brunson, Common Ground		Atlanta	(404) 874-8686
PWAs Group	Monday–Friday	11:00 AM–12:00 PM	Lunch follows; open; call first
Rev. Michael Brunson, Common Ground		Atlanta	(404) 874-8686
PWAs Group	Every 2nd Tuesday	6:00–8:00 PM	Open, call first
Rev. Michael Brunson, Common Ground		Atlanta	(404) 874-8686
National AIDS Education Services for Minorities			Call for support group information
NAESM		Atlanta	(404) 753-2900
Here's to Life (all genders and sexual orientations)	Wednesday	6:30–8:00 PM	Open; arrive at 6:00 pm for a light dinner
Our Common Welfare		Atlanta	(404) 297-9588
People of Color (men and women)	Monday & Thursday	5:00–7:00 PM	Open
Outreach, Inc.		Atlanta	(404) 249-6999
Long-Term Survivors	Tuesday	7:00–8:00 PM	Call Dr. Baker
Positive Impact		Atlanta	(404) 636-6607 ext 4
Living Well with HIV for Long-Term Survivors	Monday	7:00–9:00 PM	Closed; call Dr. Kupferberg
Positive Impact		Atlanta	(404) 316-3964
The First Few Years Managing HIV in Your Life	Thursday	5:30–7:00 PM	Closed; Danny Sprouse
Positive Impact		Atlanta	(404) 589-9040
Entre Hispanos (men and women)	Wednesday	5:00–6:30 PM	Call Alvaro Ordonez
Positive Impact		Atlanta	(404) 589-9040
HIV+ Veterans	Thursday	11:00 AM–12:00 PM	Open; call James Moorer
VA Hospital		Decatur	(404) 321-6111 ext 6023
Discovery (newly diagnosed)			6 week workshop; call Michael Seabolt
AID Atlanta		Atlanta	(404) 870-7770

WOMEN'S

Women's Therapy Group	Tuesday	6:00–7:30 PM	Closed; call for intake
AIDS Survival Project		Atlanta	(404) 874-7926
Reaching Out to Sisters with HIV/AIDS (ROSHA)	Monday	6:00–8:00 PM	Open; ask for Jewel Chandler
ANIZ, Inc.		Atlanta	(404) 521-2410
HIV+ Women's Group (Grady clients only)	Tuesday	10:00–11:30 PM	Open
Grady IDP		Atlanta	(404) 616-6317

Women's Group	Every other Saturday	11:00 AM–12:00 PM		
AIDS Alliance of NWGA		Cartersville	(770) 606-0953	
Women for Life (women's)	Monday	6:30–8:30 PM	Open	
Our Common Welfare		Atlanta	(404) 297-9588	
Women's Therapy Group	Tuesday	6:00–7:30 PM	Closed; call Barbara Rubin	
Positive Impact		Atlanta	(404) 733-5678	
Sister Soul (African-American women's prevention program)			Call Shaye Pyrone for more info	
AID Atlanta		Atlanta	(404) 870-7743	

MEN'S

Men of Color (infected and affected)	Thursday	6:30–8:30 PM	Open; ask for Jewel	
BRAC Center		Atlanta	(404) 264-9011	
Positive Attitudes (gay/bi men/trans)	Tuesday	7:00–9:00 PM	Open	
BRAC Center		Atlanta	(404) 264-9011	
Putting Back the Pieces	2nd & 4th Wednesday	6:00–7:30 PM	Call for information; Melvin Gaye	
ANIZ, Inc.		Atlanta	(404) 521-2410	
Many Men, Many Voices (risk behaviors)			Call for time/date; 6 sessions;	
NAESM		Atlanta	(404) 753-2900	incentives may apply
Heterosexual Men's Group	Monday	6:30–8:00 PM	Call for more information	
Our Common Welfare		Decatur	(404) 297-9588	
Straight Up (straight men)	Monday	6:30–8:30 PM	Open; Prentiss Curry	
Our Common Welfare		Atlanta	(404) 297-9588	
Positive Life (gay and bisexual)	Tuesday	6:30–8:30 PM	Open	
Our Common Welfare		Atlanta	(404) 297-9588	
Young Men's Group (African-American MSM)	Wednesday	6:30–8:00 PM	Open; Troy James	
Positive Impact		Atlanta	(404) 870-7746	

BEREAVEMENT

Grief Support	Every 2nd & 4th Tues	7:00 PM	Open by appointment; ask for Elizabeth	
Abbey Hospice		Conyers	(770) 385-1818	
	Every 1st & 3rd Tues	7:00 PM	Open by appointment; ask for Elizabeth	
Abbey Hospice		Covington	(770) 385-1818	
Faithful Care (spiritual support)			Call Rev. Michael Brunson for more info	
Atlanta Interfaith		Atlanta	(404) 874-8686	

FOR CHILDREN AND ADOLESCENTS

We Want to Know (children support)	Monday	6:00–8:00 PM	Call Zina Age for more information	
ANIZ, Inc.		Atlanta	(404) 521-2410	
AFLASH (adolescent females 11-17 yrs)			Call Lynette Jenkins	
ANIZ, Inc.		Atlanta	(404) 521-2410	
Support for Children's Bereavement (not restricted to HIV-related loss)			Call for more information	
Link Counseling Center		Atlanta	(404) 256-9797	

GLBT

Deeper Love (African-American men's group)			Call Kevin Bynes for time/date; week course	
AID Atlanta		Atlanta	(404) 870-7763	
Life Guard (gay men's group)			Call Kevin Bynes for time/date; 6-week course	
AID Atlanta		Atlanta	(404) 870-7763	
Toolbox (slipping and sliding graduates and public)	Every other 3rd Thursday		Open; ask for Kevin Bynes	
AID Atlanta		Atlanta	(404) 870-7763	
LaGender (transgender group)	Thursday	6:00–7:30 PM	Open; contact Dee Dee Chamblee	
ANIZ, Inc.		Atlanta	(404) 521-2410	
Gay/Bisexual Men's Therapy Groups	Monday	11:00 AM–12:00 PM	Call Scott Conkright	
	Wednesday	5:30–7:00 PM		
Atlanta Therapy		Atlanta	(404) 315-7150	
Parents & Friends of Lesbians And Gays	Every 3rd Sunday	2:45–5:00 PM	Open; meetings held in Atlanta area,	
(GLBT families)			Macon, Dahlonega and Southern	
			Regional Hospital; call for location	
PFLAG		www.PFLAGATL.com	(770) 662-6475	
Women's Support Group (lesbian, bi, ?'ing, trans)	1st & 3rd Tuesday	7:30–9:00 PM	Call for more information	
Sue, Rainbow Center		Virginia-Highland	(404) 235-6800	

Long-Term MSM Group ..... Thursday ..... 7:00–8:30 PM ..... Call for registration; Danny Sprouse
Positive Impact ..... Atlanta ..... (404) 589-9040

EDUCATION

THRIVE! Weekend (infected and affected) ..... Bimonthly Sat. & Sun. ..... Call for dates; preregistration required
AIDS Survival Project ..... Atlanta ..... (404) 874-7926

Healthy Choices = Healthy Lives ..... Bimonthly Saturday ..... 10:00 AM–1:00 PM ..... Call for dates; preregistration required
AIDS Survival Project ..... Atlanta ..... (404) 874-7926

Lunch and Learns (HIV treatment topics) ..... Call for dates; preregistration required
AIDS Survival Project ..... Atlanta ..... (404) 874-7926

Treatment Forums (HIV treatment topics) ..... Call for dates; preregistration required
AIDS Survival Project ..... Atlanta ..... (404) 874-7926

MISCELLANEOUS

Hepatitis A Vaccine Outreach ..... Call HIV/STD hotline for time/date/location
AID Atlanta ..... Atlanta ..... (800) 551-2728

Support and Spirituality Group ..... Wednesday ..... 11:30 AM–1:00 PM ..... Interview and 3-month commitment
Positive Impact ..... Call for location ..... (404) 876-2216

COUNSELING

Individual Counseling (HIV/AIDS) ..... Call for appt. and intake (sliding scale/fee)
Barbara Rubin ..... Atlanta ..... (404) 733-5678

Individuals/Couples/Family Counseling ..... By appointment
BRAC Center ..... Atlanta ..... (404) 264-9011

Individual Counseling (for clients in the day program) ..... By appointment
Common Ground ..... Atlanta ..... (404) 874-6425

Individual Counseling (HIV/AIDS) ..... Call for appt. and intake (sliding scale/fee)
Dr. Randy Beggs ..... Atlanta ..... (404) 378-4167

Individual Counseling (HIV/AIDS) ..... Call for appt. and intake (sliding scale/fee)
Dr. Scott Conkright ..... Atlanta ..... (404) 315-7150

Individual Counseling (HIV/AIDS) ..... Call for appt. and intake (sliding scale/fee)
John Ballew, LPC ..... (404) 874-8536

Individual Counseling (HIV/AIDS) (for those without insurance) ..... Call for appt. and intake (based on need)
Metropolitan Psychotherapy Community Clinic ..... (404) 321-4594

Individual Counseling (HIV/AIDS) ..... Call for appt. and intake
Positive Impact ..... Atlanta ..... (404) 589-9040

Individual Counseling (HIV/AIDS) ..... Call for appt. and intake (sliding scale/fee)
Sarah Lopez, David Woodsfellow; A Center for Relationship Therapy ..... (404) 325-3401

SOCIAL

Hetero Pos Atlanta (social group) ..... If interested in joining, send e-mail to Heteroposatl@aol.com.
..... If no e-mail, contact an ASP peer counselor at (404) 874-7926

Atlanta Poz Guys (social group) ..... Monthly ..... If interested in joining, send e-mail to atlpozguys@aol.com

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POZ Outlook ..... Every other Saturday ..... Call for dates and times; $15 membership fee
POZ Outlook ..... (404) 292-7451

SUBSTANCE USE

Support Group ..... Call for more information
Alanon & Alateen ..... (404) 687-0466

Recovery Support Group ..... Call for more information
Alcoholics Anonymous ..... (404) 525-3178

Transition Center Support Group (Grady clients only) Monday & Friday ..... 10:00–11:00 AM
Grady IDP ..... Atlanta ..... (404) 616-3618

Keeping It Real ..... Monday ..... 11:00 AM–12:30 PM
Grady IDP ..... Atlanta ..... (404) 616-3618

HIV+ Narcotics Anonymous (Grady clients only) ..... Tuesday & Friday ..... 1:00–2:00 PM ..... Drop-in; open
Grady IDP ..... Atlanta ..... (404) 616-3618

Recovery Support Group ..... Call for more information
Narcotics Anonymous ..... (404) 362-8484

Antiviral Drug Used to Treat AIDS to Be Tested as Vaccine. The U.S. arm of an international drug trial will enroll 400 gay men in San Francisco and Atlanta to determine whether the properties that allow tenofovir (Viread) to suppress HIV among infected patients might also prevent HIV among the uninfected. Researchers believe tenofovir is a good candidate because it is deemed the least toxic AIDS drug and is taken just once daily. "There are 150,000 HIV-infected people who have been on tenofovir, and the safety profile looks very good," said Dr. Lynn Paxton, who is coordinating the U.S. and overseas studies for the CDC. "We want to look at it, to see if it's safe for HIV– people." Participants in the trial will be randomly assigned to take either tenofovir or placebo every day for two years. At the international study's end, researchers will compare the results. Researchers want to know if the drug is safe for preventing HIV and whether such a pill could cause an undesirable increase in unsafe sex. The study would also determine if any participants who acquire HIV have tenofovir-resistant virus. The researchers must ensure that participants are fully educated about potential risks. Researchers are ethically bound to dissuade all participants from engaging in risky sexual behavior and offer counseling on proper condom use and safer sex practices. Subjects will be warned there is no way for them to know if they are receiving the active pill or a placebo, and that even if they receive the drug, it may not protect them. A proposed tenofovir trial among Cambodian prostitutes—designed by University of California-San Francisco and to be funded by the Bill & Melinda Gates Foundation—was called off last summer after the nation's prime minister objected to the study's design. Similar trials have begun without incident in Nigeria, Cameroon and Ghana. The CDC is sponsoring trials among 1,200 HIV– men and women ages 18-29 in the Botswanan cities of Gabarone and Francistown. In Bangkok, CDC-supported researchers are enrolling 1,600 uninfected IV drug users. "These trials first got started among heterosexuals in the developing world, because [heterosexual sex] is what's driving the worldwide epidemic," said Paxton.

UN Agency Reinstates Two AIDS Drugs. On Tuesday, November 30, the World Health Organization announced that two generic drugs removed from its list of safe AIDS medicines in May have been reinstated. Lamivudine and AZT, manufactured by Indian maker Cipla, were taken off the list because an independent laboratory that certified them to be biologically equivalent to brand-name drugs was found to be keeping inadequate records. A different laboratory has confirmed that the drugs are equivalent, WHO said. The drugs are administered to AIDS patients in developing countries.

China Approves Human Test of Experimental AIDS Vaccine. On Friday, November 26, China announced it has approved human testing of a domestically developed HIV vaccine, Xinhua News Agency reported. The State Food and Drug Administration also pledged to "accelerate approval process of all kinds of anti-AIDS drugs to help speed up relevant clinical researches," Xinhua said. Chinese scientists who have been studying the genetics of HIV since 1996 developed the vaccine, Xinhua said, citing the drug agency. "Researchers attacked a monkey with [the] AIDS virus after injecting the compound vaccine into its body, and found no abnormal reactions occurred," said the report. Phase I testing of the vaccine will be carried out on 30 volunteers ages 18-50, said Xinhua. A spokesperson for the drug agency cautioned that the experimental vaccine would undergo lengthy testing. "Experiments with this drug don't necessarily mean the drug will be a success," the spokesperson said. "We do not expect that such vaccinations will be available to the public within a short time."

World AIDS Day Marked with Parades and Stark Warnings. On Wednesday, December 1, as new UN data painted a grim portrait of the global AIDS epidemic, activists joined religious, social and national leaders worldwide to observe World AIDS Day. On Tuesday, November 30, UNAIDS head Peter Piot warned that the potential scenario of tens of millions of new infections in China, India and Russia could destabilize the global economy. "There is something new and ominous in the course of this epidemic," said Piot. China's Premier Wen Jiabao acknowledged that the world's most populous country faces a "stark situation" in fighting AIDS and asked for "unremitting efforts" in that struggle. In India—which has the world's second-largest population of HIV-infected people—schoolchildren, health workers and recovering drug addicts carried AIDS awareness messages during their march. "We need to put hearts and souls together to combat the deadly scourge of AIDS," said Assam Health Minister Bhumidhar Barman. In Bangladesh, more than 5,000 people, including sex workers and nongovernmental organization staff, joined a parade that began at Parliament. A procession including film stars and students in Bangkok brought together 1,000 people. The Thailand Red Cross Society planned a candle-lighting ceremony. Taiwan officials, who earlier reported the HIV infection rate for women had increased, announced a series of HIV/AIDS awareness promotions targeting women. A joint TNS/Gallup market research survey recently found little more than one in 10 people in the East and Southeast Asia believed HIV/AIDS is a major concern in their country.

Anti-AIDS Campaigners Spotlight Need to Protect Women, Girls. From Armenia to Zambia, activists worldwide took part in World AIDS Day while the UN sought to raise awareness on how "the face of AIDS is increasingly young and female." "The number of women living with HIV is on the rise in every region," said UNAIDS chief Peter Piot, speaking in New York City at the Cathedral of St. John the Divine. "Prevention methods such as the ABC approach—Abstinence, Be faithful and use Condoms—are good, but not enough to protect women where gender inequality is pervasive," he said. Piot called on countries to pass laws that protect women against domestic abuse and rape and ensure they have property rights in order to make women "far less vulnerable to HIV." Among global activities:

- In Asia, activists in Japan and South Korea passed out condoms. Bangladesh, Thailand and Vietnam held marches and the Philippines promoted HIV testing. China televised a first-ever visit by President Hu Jintao to AIDS patients in a hospital and the national government ordered local officials to increase their knowledge about HIV/AIDS.
- Red ribbons were tied to lampposts and draped over buildings across southern Africa to promote HIV/AIDS awareness. Appealing for tolerance, Anglican Archbishop Njongonkulu Ndungane of South Africa said: "HIV/AIDS is not God's punishment of the wicked. AIDS is a preventable, treatable and manageable disease—no more, no less."
- In Eastern Europe, Serbia-Montenegro presented live HIV education radio and television programs. Activists in Zagreb, Croatia, handed out condoms and sold Christmas cards made by HIV-infected children.
- A televised five-hour dance-a-thon held simultaneously in Arnhem, the Netherlands and Cape Town, South Africa, raised money to fight AIDS.
- In Portugal, which has one of the highest rates of new HIV infections in Western Europe, the new headquarters of an association to support AIDS patients opened.

Vigils, Concerts and Tears Mark Losses to AIDS. On Wednesday, December 2, a midday crowd of several hundred gathered in Golden Gate Park's National AIDS Memorial Grove as part of San Francisco's 11th annual commemoration of World AIDS Day. Mayor Gavin Newsom and Assemblymember Mark Leno (D-San Francisco) addressed the crowd; Rabbi Camille Shira Angel led a prayer. Tom Nolan, executive director of Project Open Hand, which provides meals to people living with HIV, received the HIV/AIDS Community Service Award. In the Bay Area, Artists Against AIDS USA held an evening flashlight march in Union Square, and organizers at Marin AIDS Project led a candlelight vigil in San Rafael. The AIDS Emergency Fund and the Breast Cancer Emergency Fund held a fundraiser at Justin Herman Plaza. In the Castro, the San Francisco Gay Men's Chorus sang at Most Holy Redeemer Church. Advocates used the day to stress that HIV/AIDS treatments are not a cure and to draw attention to the epidemic's increasing toll on women and girls worldwide. "The reason we want to continue to have World AIDS Day is that there's an increasing rate of infection, AIDS diagnosis and death in Third World coun-

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tries, in Africa, Asia—particularly China—and also in Russia," said James Loyce, deputy director of the San Francisco Health Department. Loyce added that infection rates are on the rise among local women, IV drug users and young men who have sex with men. "We need to remind ourselves that this pandemic is not over," he said.

India Plans All-Out Fight Against AIDS. On December 1, India's government marked World AIDS Day by announcing a massive media campaign designed to bring HIV/AIDS awareness to its one billion-plus population. In discussing the government's new approach with Parliament, Health Minister Anbumani Ramadoss said the intensive campaign would include distributing 1.5 billion condoms countrywide. "We are going all-out and within six months the whole country should know about HIV/AIDS and its implications," said Ramadoss. Meanwhile, schoolchildren, health workers, activists and recovering drug addicts held marches and rallies in major centers across the country. At least 15,000 people marched in the southern city of Bangalore, the capital of the Karnataka state, calling for an end to discrimination against women and girls living with HIV/AIDS. A report released by the Karnataka government said some 500,000 adults are HIV+ out of the state's 53 million population. In 2004, 1.5% of pregnant women in Karnataka tested HIV+ at antenatal clinics, the report said. "High prevalence rates of HIV infection in this group signals that HIV has spread into the sexually active general population," said A. R. Nanda, executive director of the nongovernmental group Population Foundation of India, which coauthored the report. Rallies and marches were also held in India's remote northeast, which borders the heroin-producing "Golden Triangle" of Laos, Myanmar and Thailand. The region accounts for less than 4% of India's population but is estimated to be home to over 30% of its IV-drug users. People in Guwahati, the main city of Assam state, marched. In the heavily Christian states of Nagaland and Mizoram, prayer services were held and volunteers distributed AIDS pamphlets door-to-door. In predominantly Muslim Kashmir, three venues held seminars on HIV/AIDS—a taboo subject for many in the conservative state.

China Orders Local Officials to Learn More About AIDS. On December 1, Chinese President Hu Jintao said local officials must learn about HIV/AIDS, and the government publicized its commitment to fighting the disease by broadcasting television scenes of Hu visiting AIDS patients. Long criticized for its slow response to AIDS and for harassing AIDS activists, the government marked World AIDS Day by publicizing efforts to slow the spread of HIV among the two highest-risk groups in China—prostitutes and IV drug users. Hu called on "leaders of various levels to enhance their HIV/AIDS knowledge," Xinhua News Agency reported. The central government has distributed 100,000 AIDS education pamphlets to local officials, Xinhua said. "Officials… may have limited knowledge of disease and feel scared. It is hoped that by educating them on related policies and dispelling their concerns, the state policies can be followed and implemented locally," said Hou Peisen, director of China's National Health Education Institute. State television devoted the first half of its half-hour midday newscast to showing Hu's November 30 visit to a Beijing AIDS ward—the first time the president has been shown meeting AIDS patients. Wearing a red AIDS awareness ribbon on his jacket, Hu was seen shaking hands and speaking with one patient. Xinhua reported on HIV prevention efforts among prostitutes and a needle-exchange program in the southern region of Guangxi, which borders Vietnam. However, in many parts of China, local officials are still reluctant to embrace such efforts for fear of acknowledging drug use and prostitution in their areas. On Tuesday, November 30, a joint report by the UN and the Chinese Cabinet's AIDS task force warned that HIV is spreading from high-risk groups into the general population.

Vietnam to Focus on Women During World AIDS Day. On Friday, November 26, UN and local officials announced that Vietnam will use World AIDS Day to focus on educating women about the alarming rise of HIV among the nation's females. "Both men and women must work together to transform the relationships, social norms and structure in ways that reduce the vulnerability of women and girls to HIV/AIDS," said Anthony Bloomberg, UNICEF representative in Vietnam. Although men still comprise most HIV infections in Vietnam, female sex workers also represent a considerable portion. As the disease moves more into the general population, a growing number of low-risk women are becoming infected, officials said. The Ministry of Health reports that HIV infections among pregnant women have increased ten-fold in the past seven years. UN and Vietnamese officials said women are increasingly vulnerable to HIV due to lack of access to reproductive health services and information about safe sex. In the run-up to World AIDS Day, the Vietnamese Women's Union will hold a rally and host a nationally televised discussion aimed at increasing awareness and prevention and reducing discrimination and stigma.

AIDS Prevention Up to Individuals, Not Government: Abbott. Launching World AIDS Day in Australia, Health Minister Tony Abbott told leading AIDS activists the government would do everything it could to fight AIDS, but those at risk have to take the greatest responsibility. "The government won't expect too much of people or disown them when they turn out to be human, but the government can't be everyone's keeper," said Abbott. "In the end, it's personal behavior, not governmental behavior, which largely determines the rate of HIV/AIDS infections." Around 13,600 people are living with HIV/AIDS in Australia, and the disease has killed more than 6,300 Australians in the past two decades. Though the rate of new HIV infections dropped slightly in 2004, this was preceded by a series of recent increases. "We can't be complacent, but we shouldn't lose heart either and conclude that our guard has dropped, with a small but significant reduction in the number of new AIDS notifications," said Abbott. The ministerial advisory committee on HIV/AIDS, sexual health and hepatitis has a draft strategy currently undergoing a public comment process. Abbott said he expects the plan to be in place by July 1, 2005. Opposition health spokesperson Julia Gillard was critical of the lag in implementing a new strategy. "The minister for health must acknowledge the urgency of completing and implementing a fifth national HIV/AIDS strategy that specifically addresses the growing problems of HIV/AIDS within our indigenous population," Gillard said. Also on December 1, Foreign Minister Alexander Downer announced the government will give $2 million (US$1.5 million) to fight Asia-Pacific's HIV epidemic. The money will go to three community organizations.

AIDS Rate for Gay Men Climbs. Released on World AIDS Day, the CDC's report of U.S. HIV/AIDS diagnoses rates for 2000-2003 showed an overall 1% growth rate for new infections, large increases among men who have sex with men (MSM), and pervasive racial disparities. The CDC maintains that about 40,000 new HIV infections occur each year in the United States, a figure reached in the mid-1990s. Infections among MSM increased by 11%, a number offset by decreases among injection drug users. MSM accounted for 44% of new diagnoses. CDC data released in early December showed syphilis—viewed as an indicator of safe-sex practices—was up for the third year in a row after a decade of decline. The years that have passed since the epidemic's initial ravages, together with complacency arising from the availability of effective AIDS drugs, has produced an increase in risky sex practices, officials said. "We need to pay close attention to this population and find new ways to intervene," said Dr. Ronald O. Valdiserri, deputy director of the CDC's HIV prevention program. "This is not a trend we want to ignore." Though they represent just 13% of the nation's population, African-Americans comprised 51% of new diagnoses. Black men had seven times the infection rate of white men and three times the rate of Latino men. Black women accounted for 69% of new female diagnoses—18 times that of white women and five times the Latina rate. U.S. Health and Human Services Secretary Tommy G. Thompson called the disease's impact among women of color "quite sobering." "We have a ways to go before we reach [that] mark," Valdiserri said of the government's goal of halving new U.S. infections by 2005. The CDC estimates 850,000-950,000 Americans now live with HIV/AIDS, with some 280,000 unaware they are HIV-infected. "It's simply unacceptable that so many people continue to be infected by this virus," said Dr. Julie Gerberding, director of the CDC. The report was based on 32 states that have detailed and names-based HIV reporting and account for about half of all U.S. HIV/AIDS cases. Though the report excludes California and New York, Valdiserri said the CDC believes the new estimates are an accurate reflection of the national epidemic.

North Dakota Has Lowest Incidence of AIDS.

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North Dakota continues to have the nation's lowest AIDS incidence. During the first six months of 2004, nine new cases of HIV/AIDS were diagnosed in the state; most were the result of sexual transmission. On Wednesday, December 1, the state Health Department marked World AIDS Day with a call for at-risk people to be tested. "Studies show that people who know their status, in most cases, take the steps necessary to avoid transmitting HIV to others," said Karin Mongeon, program manager with the department.

As Many as 260,000 Mexicans Are Living with HIV. Though the official number of HIV-infected Mexicans remains low, Jorge Saavedra, director of the National Center for the Prevention of AIDS, said on November 24 the real figure could be between 78,000 and 260,000. Saavedra said the reason for the broad estimate is that many people "don't know, others don't want to know and some know but only in a confidential manner." Mexico has officially recorded 90,043 AIDS cases, said Saavedra, speaking at the end of an HIV/AIDS conference in Mexico City. Some 14,606 of those cases are women, meaning men comprise 85% of Mexico's cases, he said. Nine out of 10 people in Mexico contract the disease through sexual contact, said Saavedra, whose comments came one day after a UN report estimated that 36% of people living with HIV in Latin America are women.

Five Million South Africans Are HIV+. Five million South Africans, or 11% of the population, are HIV-infected, according to an Actuarial Society of South Africa report released Wednesday, December 1, in conjunction with World AIDS Day. Though the figure is lower than the health department's recent estimate of 5.6 million infections, the authors of the report said the number poses a major challenge to the country. "We are still talking the same order of magnitude of disaster," said professor Rob Dorrington, head of the Center for Actuarial Research at the University of Cape Town, and coauthor of the report. In 2004, AIDS accounted for 44% of all deaths in the nation, the report stated. Population growth has dropped to 0.8% a year and is projected to fall to 0.4% beyond 2011, it said.

U.S. Health and Human Services, Ad Council Launch HIV Detection Campaign. The U.S. Department of Health and Human Services and the Advertising Council have partnered to launch a national public service ad campaign to encourage African-American men to get tested for HIV. One-half of newly infected U.S. residents are under age 25, according to HHS. One in 50 African-American men is HIV+, experts estimate. Of new AIDS cases among teens, 67% are African-American. AIDS is now one of the top three causes of death for African-Americans ages 25-54. The two new TV ads—created *pro bono* by VogtGoldstein—discuss the importance of being tested and encourage viewers to learn their HIV status, as this knowledge is the first step in fighting the spread of the disease. The ads, which target African-American men ages 13-28, are being distributed to 1,600 TV stations nationwide for airing in donated time slots. The ads invite viewers to telephone 800-342-AIDS to learn more about HIV prevention, testing and treatment.

AIDS Toll on Georgia Blacks Severe. World AIDS Day prompted Georgia health officials and researchers to call for increased HIV intervention and education efforts aimed at minority populations. Blacks comprise 29% of Georgia's population, yet they account for 64% of the state's cumulative AIDS cases. Figures from the Georgia AIDS Coalition show that as of June, African-Americans represented 18,446 cases; whites, 9,266 cases; and Hispanics, 701 cases. Improved drug therapies are helping people with AIDS live longer. But health educators say blacks are more likely to be diagnosed in the late stages of infection, when treatment is less effective. Avoiding exposure and undergoing routine testing are the best defenses, they say. An estimated 25% of Georgians with HIV do not know they are infected. Men who have sex with men make up almost half the state's AIDS cases. However, experts say heterosexual women—especially black women—are increasingly vulnerable. In one decade, AIDS cases among Georgia women have doubled to represent about 26% of all cases. More aggressive education on STDs is needed from grade school to graduate school, said Dr. David Satcher, director of the National Center for Primary Care at Morehouse School of Medicine. Satcher noted that poverty plays a role in who lives with AIDS and who dies from it. Only about half of Georgia's HIV patients have access to the best AIDS medications and physicians, Satcher said. Approximately two-thirds of state residents with AIDS live in metro Atlanta, and thousands of these are thought to be homeless. Stockbridge, Georgia, resident Denise Stokes, who has lived with HIV for 22 years, said the AIDS crisis among blacks cannot be blamed exclusively on the "down low" lifestyle, in which men with wives or girlfriends secretly engage in sex with other men. Stokes instead blamed ignorance, prejudice, fear and denial.

Blacks Must Tackle AIDS on Road Toward Social Equity. Coretta Scott King on AIDS: "Today, people from around the globe commemorate World AIDS Day… Worldwide, an unprecedented number of people—nearly 40 million men, women and children—are living with HIV, according to figures released last week by [UNAIDS]… As the pandemic expands, women are increasingly on the front lines… Here in the United States, women are also increasingly affected by HIV/AIDS, and race is a major risk factor: African-American women are more than 23 times as likely as white women to be diagnosed with AIDS, and the disease is now the leading cause of death among black women ages 24 to 35… I have seen firsthand how HIV/AIDS has damaged our community, our families and our children. The disease represents one of the most serious dangers facing African-Americans today. It is a threat to our shared goal of achieving true social equality. African-Americans have been working together to fight injustice since the early days of the civil rights movement. First, we battled segregation and economic injustice; then we struggled against violence and drug abuse. Sometimes, it seems like a never-ending battle in which the enemy keeps changing. It is tempting to give up in the face of calamity after calamity. But like my husband, Martin Luther King, Jr., we have no intention of ceding in the struggle for social justice—whether it occurs on the streets of Selma or in the maternity wards of American cities. Strong women are a cornerstone of the African-American community. But now, we face a disease that is silencing the voice and stilling the hands of those mothers, daughters and sisters. It is time for all of us to take action to protect ourselves and our young people against HIV/AIDS. We can start by challenging the ignorance, bigotry and fear that surround this disease. We must acknowledge the widespread misinformation in our community about how HIV is contracted and how it should be treated. One of the most formidable obstacles to AIDS education is homophobia, which afflicts people of all races. We need to create a climate that encourages openness and education about AIDS instead of allowing shame and guilt to prevail over reason, understanding and compassion. Most important, we must educate our children about HIV prevention. They need to know that it is OK to talk about AIDS, because illness, like injustice and inequality, cannot be eliminated by remaining silent. African-Americans have overcome many obstacles in the struggle for social equality, but we are still in the early days of acknowledging and fighting HIV/AIDS. In meeting this challenge with the same courage, commitment and creativity that empowered our freedom struggle, we can truly overcome." (The author is the founder of the Atlanta-based Martin Luther King, Jr. Center for Nonviolent Social Change.)

Mayor Urges Macon to Do More in Fight Against AIDS. Speaking on World AIDS Day, Macon, Georgia, Mayor Jack Ellis said the city must do more work with local HIV/AIDS service providers if it is to effectively fight the disease. "The fact of the matter is it is a drain on our economy," Ellis said of AIDS at a City Hall news conference. "We have to find a way in our upcoming budget to fund some of these organizations." Local health authorities say HIV/AIDS is spreading at an alarming rate in Middle Georgia. In Bibb and 12 surrounding counties, around 800 people are known to have HIV or AIDS, said Dr. Harold Katner, a Mercer University professor who treats HIV-infected patients. The HOPE Center, a local public treatment center, said that number has increased 20-25% in three years, with black Middle Georgians comprising at least 80% of those seeking treatment. Elsie Sharpe, who works with HIV-infected people through the Macon-based nonprofit J&S Consulting, said she is seeing more young people affected by the disease. "We need to start earlier with prevention," she said. If Macon can fund $100,000-$200,000 yearly on the arts, said Ellis, it should spend a similar amount on HIV prevention. "We do have a severe problem in our city," he noted. Ellis said his trips to countries like South Africa, Cameroon, Uganda and Ethiopia showed him various methods

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of fighting HIV/AIDS. Substantial differences exist in HIV's impact on black and white Georgians and on how they view the disease, a recent survey showed. Almost three-fourths of black Georgians said AIDS is a more urgent state problem than it was a few years ago, compared to just four-tenths of whites, according to the survey by Kaiser Family Foundation and the Morehouse School of Medicine's National Center for Primary Care.

Human Rights Watch Says Curbs on Condoms Undermine Global Fight Against HIV/AIDS. In a report issued Tuesday, November 30, Human Rights Watch said criticism of condoms and restrictions on access to them are hurting global anti-AIDS efforts. "Governments should be promoting condom use, not treating condoms like contraband," said HRW researcher Jonathan Cohen. "The clear result of restricting access to condoms will be more lives lost to AIDS." "The Bush Administration is spending millions of dollars on abstinence-only programs that mislead people at risk of HIV/AIDS about the effectiveness of condoms," said HRW researcher Rebecca Schleifer. "Exporting these programs to countries facing even more serious epidemics will only make the situation worse." The United States is the leading donor to the fight against AIDS. Department of Health and Human Services spokesperson Tony Jewell said the U.S. government does fund condom distribution through some of its AIDS programs, and he defended the abstinence-only approach. "It's a scientific fact that you will not get [an STD] if you do not have sex," Jewell said. The report criticized religious leaders, including Vatican officials, who have linked condoms with promiscuity. In some countries, police seize condoms from HIV-prevention workers and use possession of condoms as evidence of prostitution or sodomy, the report said.

Governor Bars Health Agency from Giving Out Flavored Condoms. As dozens rallied against AIDS on Wednesday, December 1, in Springfield, Illinois, the administration of Governor Rod Blagojevich defended his decision to stop the Illinois Public Health Department from purchasing any more flavored or colored condoms. Blagojevich said the World AIDS Day commemoration was "a time to reaffirm our commitment to promoting HIV/AIDS awareness, education and prevention." But some health workers said they were disappointed by the governor's decision to stop distribution of the condoms to clinics and local health agencies. "It catches the younger people's eye, and that's the generation we're trying to get because they're engaging in risky behavior," said Dante Bryant, an outreach specialist at the Sara Center in Springfield. Sara Center receives the flavored and colored condoms from the state and then hands them out at bars or areas frequented by drug users. In 2004, IPHD has given clinic and local health agencies about 360,000 flavored condoms and 910,000 colored condoms in addition to the millions of ordinary condoms it regularly provides. Illinois has spent about $117,000 in federal money on condoms in 2004. When Blagojevich learned about the special condoms, he ordered IPHD not to purchase any in the future. "He just felt it was inappropriate," said Rebecca Rausch, a spokesperson for Blagojevich. "It's one thing to promote safe sex. It's another thing to encourage sexual activity." Some, however, rejected the idea that the special condoms encourage sexual activity that would otherwise not take place. "I haven't seen any indication of that," said Don Hunt, a Springfield Public Health Department supervisor. Louanner Peters, Blagojevich's deputy chief of staff for human services, said the administration is concentrating efforts on minority AIDS education and testing and education programs for soon-to-be-released prisoners in addition to distributing regular condoms.

Beijing Starts Promoting Condom Use to Fight HIV/AIDS. In what AIDS activists are calling a new initiative, advertisements that promote condom use and advise against risky sex are being placed in Beijing public venues and nightspots. The prominent displays appeared ahead of World AIDS Day, December 1, and are a response to the nation's 40% annual increase in HIV/AIDS. More than 40 billboards were set up along both sides of Beijing's Bar Street. In October, the city placed two condom-dispensing machines on each end of Sanlitun Street in addition to five free condom dispensers in bars. An additional 100 such machines will be deployed by December 31, Xinhua News Agency reported officials as saying. "I've never seen condom machines or AIDS-prevention billboards in Sanlitun," said Hu Jia, a city AIDS activist. In 1998, China's inaugural condom advertisement — affixed to 80 buses in southern Guangzhou—was aborted after only 33 days. In 1999, a condom promotion broadcast on China's largest television network, CCTV, was cancelled after one day. In October, however, six ministries jointly issued a report urging more public AIDS-prevention ads in shopping and recreational areas, ports and airports. Eighty-three ads will go up in airports nationwide; the city has 80 prevention posters in subway stations and about 600 ads on subway trains. A State Administration for Industry and Commerce advertising ban on family planning products still exists, "but condom ads that are aimed at preventing HIV/AIDS are allowed, with most of them focused around this period," said an official with China's Center for Disease Control and Prevention. Despite assurances that users would retain their privacy and not be arrested, a needle-exchange program set up in Beijing in October has yet to see a single client. Suspicion persists because injection-drug users (IDUs) are often jailed or sent to labor camps. In early December, the city began offering IDUs methadone treatment, which experts believe will be more effective.

Many Mainland Chinese Prostitutes in Hong Kong Not Using Condoms: Survey. On Thursday, December 2, the sex workers rights group Teng Zi said many mainland Chinese prostitutes working in Hong Kong are not using condoms because they fear police would use the condoms as evidence. Of 108

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mainland Chinese prostitutes surveyed, 43% said they did not use condoms because they were afraid police would view condom possession as proof of prostitution and would have them deported. An additional 23% said they did not use condoms because they want to please clients.

Asian Gay and Lesbian Network Slams Singapore's Gay Sex Prohibition. Singapore's law prohibiting gay sex is hampering HIV prevention efforts among homosexual men, an AIDS education group said Sunday, November 21. Stuart Koe, head of the Fridae Asian gay and lesbian network, rejected recent remarks by Minister of State for Health Balaji Sadasivan, who said advocacy groups like Action for AIDS were "not doing enough" to fight the disease. "Since gay sex is illegal, how then can any agency or organization in Singapore promote safe sex among men… without being complicit in abetting illegal activity?" said a statement on Fridae's web site. Singapore defines gay sex as "an act of gross indecency" punishable by a maximum of two years in jail. Prosecutions, however, are rare. Koe said the government's AIDS awareness campaign has neglected the threat to gay men. "Singapore's public health service has systematically ignored and left [gay men] out of all of its public health messages," he said. Previously, health ministry officials have said the AIDS campaign does not promote condoms out of respect for residents who hold conservative views on sex. Singapore AIDS activists called on authorities to fight an "alarming" rise in HIV infections among gay men. Ministry statistics show HIV infections among men who have sex with men rose from 12 cases in 2000 to 40 cases in 2003. Seventy-seven new HIV cases were reported among gay men in the first 10 months of 2004.

Prison Watchdog Calls for Exchange of Needles Program. Canada's federal prisons ombudsman, Howard Sapers, on Thursday, November 18, called on Public Safety Minister Anne McLellan to establish needle-exchange programs in penitentiaries. Sapers' annual report said the Correctional Service of Canada has for years ignored such recommendations. According to Sapers, drug use is rampant in Canadian prisons with some prisons reporting that three-quarters of inmates inject drugs. Access to clean needles would help contain the spread of blood-borne diseases like HIV and hepatitis C. Since infected inmates ultimately are released into the community, "this is a public health issue," Sapers said. "It's not a question of whether we condone [drug use] or not condone it." He noted that similar programs in other countries have been shown to reduce the spread of disease without leading to inmates using the needles as weapons against guards. Kevin Sorenson, a Conservative Member of Parliament, noted the prison system is supposed to have a zero-tolerance policy on drug use, yet is considering providing prisoners with clean needles. The government must take into account the safety of guards, said Sorenson. "Some corrections officers need gloves to avoid needle sticks while going through searches," he said. The report praised the Correctional Service for setting up a pilot program to provide safe tattoos to prisoners.

Alicia Keys, Stephen Lewis Push for AIDS Awareness. On Monday, November 29, singer Alicia Keys took part in Toronto's first Urban AIDS concert and awareness campaign. "I've seen it. It's changed my life completely," Keys said of the suffering she witnessed on a recent trip to visit children with AIDS in Africa. Flanked by Stephen Lewis, UN special envoy for AIDS in Africa, at a pre-concert press conference, Keys said she hopes her involvement will raise funds for women and children with AIDS. The concert included Canadian urban-music stars Nelly Furtado, Swollen Members, K-OS and Keshia Chante.

Ethiopian Prime Minister's Wife Takes Rare Public HIV Test by High Profile Figure. On November 30, Azeb Mesfin, wife of Ethiopia's prime minister, became one of the nation's few high-profile figures to take a public HIV test. She was one of several women—including Mulu Ketsala, the finance and economic affairs state minister, and U.S. Ambassador Aurelia Brazeal—who took the test at Zewbitu Memorial Hospital in Addis Ababa; the facility is Ethiopia's largest HIV/AIDS treatment center, with 3,000 patients. Test results are not being made public. "Everyone should know their status. Having an HIV/AIDS test is like having any medical checkup," Mesfin said. "HIV is of special concern to women, and especially to African women," said Brazeal. "When it comes to HIV/AIDS, knowledge is power."

Mandela Launches New Anti-AIDS Drive in South Africa. On Tuesday, November 23, the Nelson Mandela Foundation launched a radio and TV campaign in which the former South African president and Hollywood star Brad Pitt encourage people to volunteer to fight HIV/AIDS in the nation. "They are our brothers and sisters and they are entitled to our compassion and support," Mandela says in the ad. "We must act and act now," Pitt adds. The toll-free number—0800046664—uses Mandela's prison cell number—46664—by which he was identified during his 27 years in prison under apartheid. The hotline became operational on Tuesday, November 23, and remained up through the end of December. Before being assigned to organizations, volunteers will be trained and sensitized to the work. John Samuel, CEO of the foundation, said the project aims to "galvanize the whole of South Africa behind this issue." Olive Shisana, who chairs the foundation's HIV/AIDS advisory group, said the campaign targets the "white community and the educated black community," whose response to the epidemic has tended to be more apathetic. "Close to 26% of workers in [the mining industry] are infected or affected," said business leader Tokyo Sexwale. "There is a need for us to stem the tide… We are asking for more hands but in the name of Nelson Mandela." Another angle of the campaign, said foundation trustee Irene Menell, was to destigmatize AIDS and do away with the idea that "there is something culpable about people acquiring HIV/AIDS."

People with HIV More Likely to Be Below the Poverty Line. 27% of HIV-infected Australians live below the poverty line, in most cases as a result of their disease, a recent report found. Dr. Jeffrey Grierson and colleagues tracked the lives of 1,000 Australians living with HIV and found that although advanced treatments have made the disease more manageable, the financial impact is still great. According to the report, while new treatments allow more HIV+ people to return to the workplace, at least 54% are reliant on government benefits. "Financial hardship is partly to do with access to employment, but it is also the compound of living with HIV long-term," said Grierson. "There's the lack of increased opportunity in employment and the extra costs associated, which aren't covered by Medicare, like counseling and the costs of dealing with the side effects of treatment," he added. Though 71% of Australians living with HIV are on some type of antiretroviral therapy, at least 77% of these have experienced difficulties with the treatments, the report found. "This is consistent with the findings from previous surveys and reminds us that we are far from having a solution to the problem," said Grierson. "When you add to this the finding that 44% of this sample has another major health condition, such as cardiovascular disease or hepatitis C, it is not surprising that HIV is still having a major impact on people's lives." Grierson said 17% of study participants reported discrimination by a healthcare provider in the last two years. ♥

LOCAL FORUM WRAP-UP, CONTINUED FROM PAGE 11

away after some time. The only truly bothersome side effect was device-related: subcutaneous papules, or small bumps, at the injection sites, which may decline over time, but may also last for some time, although Dr. Jarman claimed they were usually "felt but not seen" by most people. According to the Dermik representative, the strict training required of all physicians using the drug is to help keep down problems such as these papules and even bigger bumps which can occur, reportedly due to poorly administered treatments.

As you can see, there's a lot to learn from local community forums. If you couldn't attend any of these, you can find more information here at AIDS Survival Project in the Treatment Resource Center, or check out the sources listed. ♥

MAKE YOUR VOICE HEARD!

There are many challenging issues facing the HIV/AIDS community in the 2005 legislative session. You can make a difference by supporting AIDS Survival Project's crucial advocacy efforts. Check our web site (www.aidssurvivalproject.org/advocacy/advocacy.html) or e-mail info@aidssurvivalproject.org.

David Salyer
cubscout@mindspring.com

OPINION

The Fourth Annual "Just Shut Up" Awards

Every year, people all over the world say stridently stupid, misinformed or absurd things about HIV and AIDS. Here's a list of some folks who make you wonder what, if anything, they were thinking before they opened their mouths in 2004. Their comments are best met with three little words: *Just shut up.*

Jose Batista

Down in Bexar County, Texas, the Alternative Housing Corporation (AHC) secured federal funds to develop an eight-unit transitional housing complex for single mothers with HIV/AIDS. AHC conducted more than a dozen meetings with local neighborhood associations and met no opposition to the structure. Vacant land was chosen on a bus line across the street from Stephen F. Austin Elementary School in the Five Points neighborhood of San Antonio. At a town hall meeting near completion of the transitional housing, Bexar County officials finally heard from the opposition, led by Jose Batista. "It was something we weren't expecting. Especially in front of the school," Batista grumbled. His fear? Children could be infected with HIV if a child carrying the virus bit them. Batista felt no better when Bexar County Housing and Human Services representatives explained that there has never been a documented case of child-to-child HIV transmission by biting. "There's no cure," Batista brayed. "The causes [given by health officials] are always changing. As adults, we get scared when we don't know what's going on. But kids don't even know [what to be afraid of]." Jose Batista is a man wild horses couldn't drag into the loop, so let's definitely not put him in charge of telling kids what to be scared of. The transitional housing plan is about getting homeless HIV+ single moms back to work and back into the community—a compassionate endeavor. Batista promotes the nonsense that these women have birthed a bunch of rabid little vampires poised to gnaw away at the unsuspecting population of the local elementary school.

Balaji Sadasivan

The Southeast Asian country of Singapore is one of the world's most prosperous nations. Home to a little more than four million people, figures from the World Health Organization tell us that about 4,000 Singaporeans are living with HIV. Speaking publicly last November, Senior Minister of State for Health Balaji Sadasivan reported that HIV/AIDS cases were doubling every three to four years. Sadasivan blames gay men for the spread of HIV and claims nongovernmental agencies like Action for AIDS (AfA) are not doing enough to promote safer sexual practices. Naturally, he fails to acknowledge that gay sex is still illegal in many parts of Singapore (as are oral and anal sex) and that agencies like AfA are routinely prohibited from distributing brochures or condom packs that would lead to education and prevention. "We must recognize there are conservative people in Singapore and there's no need to say the only way to educate people is to try to do it in an in-your-face approach," Sadasivan protests. "To educate people, you don't have to be offensive," he rambled further until finally warning, "If we do not act, by 2010 we may have more than 15,000 HIV persons in Singapore." Does he have a plan, a strategy? Nope. His job would seem to be pointing fingers and declaring, "Sexual behavior is a private thing, it's something people don't want to talk about. It's not discussed in polite society."

Rep. Dave Weldon

U.S. Congressional Representative Dave Weldon (R-Florida), a physician, traveled to the East African nation of Uganda in 2003 to "gain a better understanding" of their successful efforts to prevent HIV. Uganda's approach, dubbed "ABC," encourages Ugandans to Abstain from sex, Be faithful to one partner, or use a Condom. The nationwide program has dramatically reduced HIV infection. Weldon, an uptight conservative, sure looks swell holding those Ugandan AIDS orphans in pics posted on his official government web site. It almost, *almost* makes you forget that he spent most of 2004 distorting and mangling the ABC message here in the United States. For him, it's all about A (abstain from sex if unmarried) or B (be faithful—*and married*—to your partner). Weldon pretends the C component, using condoms, is mentioned only "as a last resort," claiming A and B supercede C in Uganda. Don't believe it. Condom use rose steeply among unmarried sexually active men and women there. Weldon doesn't want you to know that a range of complementary messages and services delivered by the government and a wide diversity of nongovernmental organizations since the late 1980s are working. *Rep. Weldon, shame on you for misrepresenting Uganda's extraordinary accomplishments!*

Dick Cheney & John Edwards

Did you see last fall's vice presidential debate between Cheney and Edwards? It was kind of like watching the Grinch Who Stole Christmas verbally abuse an aging member of some long-forgotten boy band. Cheney—constipated or just mean?—was dismissive of Edwards, maybe because the sunny senator has nice hair and awfully white teeth. Both, however, stumbled all over themselves when moderator Gwen Ifill said she wanted to hear about AIDS—"and not about AIDS in China or Africa," she made clear. "But AIDS right here in this country, where black women between the ages of 25 and 44 are 13 times more likely to die of the disease than their counterparts." At an obvious loss, Cheney mumbled about the global AIDS pandemic before admitting, "I had not heard those numbers, with respect to African-American women." The incidence of HIV infection among African-American women has far exceeded HIV cases among white women for at least a decade. How the vice president missed that is a mystery—unless he never cared to know in the first place. Edwards fared no better, completely missing an opportunity to skewer the Bush administration for flat-funding the Ryan White CARE Act, ignoring prevention efforts for African-Americans and neglecting the AIDS Drug Assistance Program. Well, at least neither of them sputtered, "AIDS? I thought that was a gay disease!"

Dr. Julie Gerberding

According to Centers for Disease Control Director Julie Gerberding, it's time to "get over the dichotomization" of sex education—"that you're either for abstinence or you're against it, either you're for condoms or you're against it." Gerberding claims, "We need a comprehensive, integrated approach, and it starts with abstinence in our kids. And it may have to move forward into other forms of prevention, depending on the target population." Appointed CDC Director by George W. Bush in 2002, Dr. Julie tries hard to sound thoughtful when she speaks publicly about HIV/AIDS, but her comments never jive with what's really going on at the CDC. Under her so-called leadership, the CDC has stealthily gutted condom information from all government fact sheets and web sites, allowed politically motivated audits of HIV prevention programs for gay men, abandoned the concept of behavioral counseling and shifted federal funding to widely criticized initiatives that focus almost exclusively on people who are already HIV+. Anything considered even vaguely sexually suggestive is out. Abstinence-based programs and anti-condom junk science are in. Gerberding, who wrote as recently as 1998 that "public health messages must emphasize that the use of condoms and the avoidance of high-risk sexual

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behaviors are the most effective methods of preventing infection" now appears to be suffering from an undiagnosed multiple personality disorder—and Bad Julie has taken over.

William Donald Schaefer

America has a long history of electing uncompromising loudmouthed politicians… over and over again… for decades. Strom Thurmond, Jesse Helms, Trent Lott, to name a few. In the absence of actual intellect or leadership, they tend to provide something else we love: theatre. William Donald Schaefer, Maryland's Democratic (yes, *Democratic*) Comptroller, has been a lifelong public servant. Now 82, the former mayor of Baltimore and former governor of Maryland remains an unflagging source for bad ideas and repugnant quotes. At a Board of Public Works meeting last October, Schaefer got in the state AIDS administrator's face, demanding to know why she does not establish a public registry listing HIV+ Maryland residents. Looks like he's not going to let this one go—Schaefer called for such a registry three times in the 1990s and it was defeated each time by the state legislature. Interviewed later, Schaefer declared, "As far as I'm concerned, people who have AIDS are a danger. People should be able to know who has AIDS." Not knowing when to stop, he also reminded everyone that people with AIDS "brought it on themselves." The solution here, of course, is to create a public registry of politicians with RIDS—*Really Ignorant Demagogue Syndrome*.

Phillippia Faust

Got a lame, one-dimensional abstinence-only message for America's adolescents, ages 12 through 18? Get a grant! That's what Phillippia Faust, a nurse at Georgia's Rockdale County Medical Center, did last year. Faust was awarded a federal grant of $177,809 a year for three years (that's $533,427, or *half a million dollars*) to create an abstinence-only program. Now she no longer has to carry a poster from classroom to classroom—*Sex Outside of Marriage is… Not needed. Not normal. Not expected!*—as she did in the past. Now, Faust can afford a staff, supplies and a real curriculum. "We do discuss teen pregnancy and STDs," says Faust. "But abstinence is all about strengthening the family. Abstinence upholds the family as the basic unit of society and recognizes marriage as the framework for the family, which equates childbearing within the context of family. Abstinence identifies marriage as the only acceptable and legitimate place for the sexual experience and that avoidance from premarital sexual activity, including but not limited to sexual intercourse, is the expectant standard for the unmarried." It's entirely possible that Phillippia Faust is a really nice person, but she sure does sound like an insufferable, proselytizing control freak with an astonishingly narrow and oppressive view of human sexuality. How does she stop teens from engaging in premarital sexual activity? By staging mock weddings—complete with props, scenery, bridal attire and graphic slide show presentations of the ghastly things sexually transmitted diseases can do to your body. After two mock weddings last May, Faust told *The Atlanta Journal-Constitution*, "I just wanted kids to have a grand visual of what their day-to-day decisions can lead to for their families, with an image of two beds—the bed of poor choices and the bed of 'we made good choices by waiting.'" Those are your tax dollars at work… and a half a million bucks can buy a lot of mock weddings.

Randall Tobias

In late 2003, White House occupant George W. Bush appointed Tobias his Global AIDS Coordinator, charged with overseeing and implementing a $15 billion U.S. Emergency Plan for AIDS Relief. His lack of public health experience and potential conflict of interest as a former corporate pharmaceutical company CEO aside, Tobias has channeled hundreds of millions of newly appropriated funds to administer treatment programs for tens of thousands of AIDS patients in Africa and the Caribbean. So what about prevention? That's where Tobias gets shifty and loopy. "Statistics show that condoms really have not been very effective," Tobias blurted on the eve of a trip to the African country of Uganda, where, in fact, AIDS activists and healthcare providers have had a great deal of success promoting condoms. Two months later, Tobias delivered a different message: "Ugandan President Yoweri Museveni has, largely by sheer leadership and will, fought back this disease in his country with an A-B-C prevention focus. We must learn from his leadership in the fight against AIDS. Abstinence works... Being faithful works... Condoms work. Each has its place." Actually, HIV and AIDS have decreased in Uganda *despite* President Yoweri Museveni, who routinely makes idiotic public comments (he once declared that no homosexuals live in Uganda and publicly argued that HIV can only be spread by unprotected heterosexual sex, careless blood transfusions and tribal customs such as circumcision). Randall Tobias is a sycophant who excels at sucking up to dim-witted presidents here and abroad.

Pope John Paul II

Sure, the pope urges humanity "not to close its eyes" to the suffering of millions of HIV/AIDS patients, especially the estimated 2.5 million infected children. In late January of 2004, he even condemned pharmaceutical companies for reaping astronomical profits from HIV meds in industrialized nations while balking at negotiating lower drug prices for poorer African countries. He was all up on his popebox, um… soapbox, about Big Pharma's "lack of social conscience" and "genocidal actions." Any perceived lucidity disappeared barely nine months later when he released the text of a speech for an upcoming *World Day of the Sick* event. "Heartfelt applause is due the pharmaceutical industries, which have committed themselves to keeping at low costs medicine useful in AIDS therapy," he wrote. Huh? Obviously, PJP2 doesn't get out much. Pharmaceutical companies did not turn benevolent in the course of nine months. One of them, Abbott Laboratories, even raised the price of one of its drugs by 400%. God help us, the decrepit old pontiff sounds like a drug company lobbyist.

Jennifer Smoter, Laureen Cassidy, Heather Mason, Ann Fahey-Widman & John Leonard

Around World AIDS Day in December of 2003, pharmaceutical giant Abbott Laboratories increased the U.S. wholesale price of its HIV drug Norvir by 400%. Marketed since 1996, protease inhibitor Norvir exists primarily due to a grant from the National Institute of Allergy and Infectious Diseases (NIAID) and the National Institutes for Health (NIH), both part of the U.S. Department of Health and Human Services. Never in the history of antiretroviral therapy has a company announced such a price increase on an existing drug. Abbott did not bring a "new and improved" version of Norvir to the market, nor did it raise the price of its other protease inhibitor, Kaletra, which happens to contain Norvir. Shocked AIDS activists, consumer groups and HIV physicians responded with sharp criticism. Slammed from all sides, Abbott representatives and spokespersons spent 2004 justifying the price hike. Smoter, Cassidy, Mason, Fahey-Widman and Leonard robotically repeated the same worn-out public relations prattle and transparent lies as always. *"This new price is necessary to support our ability to continue research to bring a next generation of HIV medications to market, to develop improved formulations of our existing products, and to continue our commitment to the developing world. This pricing action supports our ability to continue research and development."* Year in and year out, pharmaceutical companies like Abbott are the wealthiest and most profitable corporations in the world. Number of new HIV drugs Abbott had in research, development or clinical trails in 2004: ZERO. Number of the Seven Deadly Sins Abbott gleefully embraced in 2004: ONE. Greed.

David Salyer is an HIV+ journalist, educator and activist living in Atlanta, Georgia. He leads safer-sex presentations for men and has facilitated workshops for people infected or affected by HIV since 1994. Reach him by e-mail at cubscout@mindspring.com.

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A Statement by ASP's Positive Action Network on MLK Day

On January 17, the world will come together to remember a great man. Dr. Martin Luther King, Jr. was one of the greatest advocates in recent American history. During a time of great turmoil, Dr. King was a beacon of light to a population that was oppressed by hatred and fear. The civil rights movement still lives on today with different faces but with the same message: Love. So on the day dedicated to Dr. King, as we remember the past, we step into the future with the message that "we have a dream."

We have a dream that one day the world will give the great minds of our time the money needed to find the cure to the AIDS pandemic. People are dying all over the world. Here in the U.S., the growing number of young adults becoming infected is very alarming. In Africa, AIDS has orphaned over eight million children. We have faith that one day, a cure will be found and people from around the world will quote that great spiritual, "Free at last, free at last, thank God all mighty, we are free at last."

We have a dream that one day the government will hold the lives of people with AIDS with respect and will appropriate the funds needed to afford life. The AIDS Drugs Assistance Program (ADAP) is at risk of being cut again. Even as a war rages overseas, people here at home are fighting a war of their own—a war to live. ADAP provides the medications that are needed to live a long life.

We have a dream that one day, we as people infected with or affected by AIDS will be treated as equals. We are loving people with something special to give to society if we are just given that chance. Dr. King once said, "The good neighbor looks beyond the external accidents and discerns those inner qualities that make all men human and, therefore, brothers." We are all connected in this world; let's support one another.

We have a dream that one day, all relationships will be respected. Dr. King once said, "Injustice anywhere is a threat to justice everywhere." So now, as it was then, justice around the country is jeopardized by hatred and fear and by people using ideology to bully the lives of others.

As we go into MLK Day, we ask for the chance to love and be loved. We look forward to the day that we no longer need to fight for a cure, when AIDS is just a bad memory and we can say "remember when." The family here at AIDS Survival Project will continue to fight the good fight until this dream becomes a reality. We invite you to call our offices to find out what you can do on Dr. King's day to honor his memory and commit yourself to the cause for human rights for all.

Classified Advertisements

CLASSIFIED AD POLICIES: All classified ads are printed free of charge and will run in two consecutive issues per submission [1/2, 2/2]. Ads may be renewed by resubmitting. To place an ad, use the form at right and send to Classified Ads, c/o ASP, 139 Ralph McGill Blvd #201, Atlanta GA 30308-3339 or e-mail TrekBearGA@aol.com. E-mailed ads *must* include a daytime phone number for verification. Do not call the ASP office to place an ad. Deadline for all ads is the first workday of the previous month. ASP reserves the right to edit ads as necessary and is not responsible for the content or credibility of any ad.

POSITIVELY PERSONAL

MALE SEEKING MALE

GWM, 40, HIV+, 5' 9", 160 lbs., excellent shape mentally and physically. Seeking older penpal for friendship and understanding. Mark Partain, #166286, LCF Dorm 7, 28779 Nick Davis Rd, Harvest AL 35749-7009. [1/2]

Healthy HIV+, good-looking, masculine man seeking same. I'm a mechanic and need love. Don't go it alone. Drug and alcohol-free; friends or relationship. Let's hook up! Call Michael Gray, (770) 489-7436. [2/2]

MALE SEEKING FEMALE

Youthful-looking 50-year-old looking for HIV+ female, 35-40, to correspond and motivate, and to possibly share their lives. Melvin Jackson, #19171-083, B33, Terre Haute IN 47808. [1/2]

MALE SEEKING ANY/ALL

Incarcerated Capricorn, attractive, 6' 2", 198 lbs., understanding, diligent, caring, spontaneous, humorous, optimistic, adventurous, athletic Black man seeking companionship which will first derive from friendship, us knowing each other's inner selves. Charlie Roberts, GDC#408997, S.S.P. Holly A-64T, Hardwick GA 31034. [1/2]

FEMALE SEEKING ANY/ALL

30-year-old Nubian woman seeks correspondence with one who desires to grow in mind and spirit as well as build each other up in areas that would produce a harmonious relationship. Scorpio. 5' 4", 150 lbs. Roszina Jones, 1115849-J2, PO Box 206, Davisboro GA 31018. [1/2]

EMORY UNIVERSITY SCHOOL OF MEDICINE

VOLUNTEERS NEEDED

ARE YOUR HIV MEDICINES NOT WORKING FOR YOU ANYMORE? HOW ABOUT TRYING A NEW INVESTIGATIONAL ENTRY INHIBITOR?

The Emory AIDS Clinical Trials Unit is studying an investigational anti-HIV medication known as an entry inhibitor, which means it blocks one of the ways HIV enters a T-cell (the blood cells that fight infection). This phase II clinical research trial will assess this drug's safety, effectiveness and dosage. A nominal fee will be given for time and travel.

IF YOU:

are HIV+ • are 18 or older • have a viral load of 5,000 or more • have failed at least two anti-HIV combinations of drugs • are currently taking a failing combination of anti-HIV drugs that contains Norvir • have 50 or more T-cells

THIS 48-WEEK RESEARCH STUDY IS NOW SEEKING VOLUNTEERS TO ENROLL!

For more information, contact: Dale P. Maddox, LCSW, (404) 616-6333
Ponce IDP Center, 341 Ponce de Leon Ave, 3rd Floor, Atlanta GA 30308

SHOP AT KROGER—SUPPORT AIDS SURVIVAL PROJECT!

Every time you use your Commitment Card, Kroger donates a percentage of your purchase to ASP, at *no additional cost to you!* Thanks to you, ASP received almost $1,300 from Kroger last year. Call Greg Carraway at (404) 874-7926 ext. 18 to get *your free* card!

Use this form to place your own Classified or Positively Personal ad!

Name _____
Address _____
City/State/ZIP _____
Daytime Phone # ( ) _____
I am: ❑ **Male** ❑ **Female** ❑ **TV/TG/TS**
Seeking: ❑ **Male** ❑ **Female** ❑ **TV/TG/TS** ❑ **Any/All**
Ad should say (35 words or less): _____

Mail to: Classified Ads, c/o ASP, 139 Ralph McGill Blvd #201, Atlanta GA 30308-3339

AIDS Survival Project is incorporated in the state of Georgia as a 501(c)(3) nonprofit corporation. All donations are tax-deductible. A large percentage of our annual budget is funded solely by your contributions; the rest is supplemented by grants solicited from private foundations.

We are happy to provide the newsletter to anyone who cannot afford a subscription; however, we ask that anyone who can afford to subscribe, please do so.

❑ I am a person living with HIV/AIDS and want to be a member of **AIDS Survival Project**.
❑ Enclosed is $30.00 for a one-year subscription.
❑ I cannot afford to pay for a subscription. Please enter my free subscription.
❑ Please send me information on how I can include **AIDS Survival Project** in my will or planned giving.

Name: _____
Address: _____
City/State/ZIP: _____
Phone: Day _____ Evenings _____
E-Mail: _____

Please contact me about volunteering for the following:

❑ *Survival News* Committee ❑ *THRIVE! Weekend*
❑ Peer Counseling ❑ Treatment Advisory Committee
❑ Advocacy Committee ❑ Special Events Committee
❑ I have other special skills I would like to offer: _____
❑ I would like to make a donation in memory of: _____
❑ I would like to make a donation in honor of: _____
❑ Please acknowledge this donation to:

Name: _____
Address: _____
City/State/ZIP: _____

Please send this form to **AIDS Survival Project, 139 Ralph McGill Blvd, Suite 201, Atlanta GA 30308-3339.** Thanks!

JANUARY 2005

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
						1 7:00 - 8:30 pm Narcotics Anonymous 12-Step Group
2	3	4 11:00 am - 12:00 pm Volunteer Orientation 6:00 pm Women's Support Group (closed)	5 5:30 pm - 7:30 pm MACAI (closed)	6 7:00 - 8:00 pm Positively No Speeding (open Crystal Meth Anonymous group)	7	8 7:00 - 8:30 pm Narcotics Anonymous 12-Step Group
9	10	11 6:00 pm Women's Support Group (closed)	12 Lunch and Learn: Sculptra (details, see pg. 7). Call for time/RSVP.	13 7:00 - 8:00 pm Positively No Speeding (open Crystal Meth Anonymous group)	14	15 7:00 - 8:30 pm Narcotics Anonymous 12-Step Group
16	17 Office closed for Martin Luther King, Jr. Day Join ASP contingent for MLK Day March; call (404) 874-7926 for details	18 6:00 pm Women's Support Group (closed)	19 12:00 pm - 2:00 pm Ryan White Consumer Caucus (closed, but inquire re: membership at (404) 874-7926 ext. 15)	20 5:30 pm - 6:30 pm Volunteer Orientation 7:00 - 8:00 pm Positively No Speeding (open Crystal Meth Anonymous group)	21	22 7:00 - 8:30 pm Narcotics Anonymous 12-Step Group
23	24	25 6:00 pm Women's Support Group (closed)	26	27 5:00 pm – 10:00 pm Human Rights Campaign (closed) 7:00 - 8:00 pm Positively No Speeding	28	29 *THRIVE! Weekend* Details pg. ?? 7:00 - 8:30 pm Narcotics Anonymous 12-Step Group
30 *THRIVE! Weekend* Details pg. ??	31	1 11:00 am - 12:00 pm Volunteer Orientation 6:00 pm Women's Support Group (closed)	2 5:30 pm - 7:30 pm MACAI (closed)	3 7:00 - 8:00 pm Positively No Speeding (open Crystal Meth Anonymous group)	4	5 7:00 - 8:30 pm Narcotics Anonymous 12-Step Group
6 ADAP Lobby Training	7 ADAP Lobby Day	8 6:00 pm Women's Support Group (closed)	9	10 7:00 - 8:00 pm Positively No Speeding (open Crystal Meth Anonymous group)	11	12 7:00 - 8:30 pm Narcotics Anonymous 12-Step Group
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27	28					

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY

FEBRUARY 2005

TIMES AND DATES SUBJECT TO CHANGE. ADDITIONAL EVENTS MAY BE ADDED AFTER PUBLICATION DATE. FOR MORE INFORMATION ON THESE AND OTHER EVENTS AT ASP, VISIT www.aidssurvivalproject.org/events.html OR CALL (404) 874-7926.