

Positives For Positives

A Quarterly Publication to inform the HIV/AIDS Community

**Positive People as part of the Solution,
not the Problem**



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Call For Extra Medications

Currently Wyoming: Positives For Positives accepts donations of medications from people around the country and redistributes these meds in Uganda where access to anti-viral therapy is mostly absent. Your donations provide a lifesaving service to people who would have virtually no access to these medications if it were not for your support.

If you have switched therapies, stockpiled meds, have extra professional samples or have a friend who no longer needs drugs please consider making a donation. All types of medications are needed, particularly HIV antivirals and medication for opportunistic infections. If you would like further information call or email us or simply send your medications to:

Wyoming: Positives For Positives
1711 Carey Avenue
Cheyenne, Wyoming 82001
Phone: 800-492-2203
Email: info@pos4pos.org

Final Thoughts After Bangkok Women, HIV & Gender based violence

By Jeff Palmer

At its core, AIDS, is essentially an issue of human rights and human security. A look at the demographics of those infected and it looks more and more like a disease fueled by sexism and racism superimposed on poverty. Over 90% of the more than 40 million people living with HIV are from developing countries. A look at the hardest hit communities only buttresses sentiments of sexism and racism as engines spreading the disease and exacerbating the poverty. The hardest hit communities around the world are not rich, nor of western European descent, nor male. The war on AIDS is as much a struggle about reducing the inequities between women and men, rich and poor, young and old as it is a scientific struggle against a virus.

With all the social, economic, military and political chaos left in the wake of the HIV pandemic, it remains nearly impossible to persuade governments that view terrorism, quite correctly, as a threat to basic human rights and security, that AIDS is an equal threat. Unfortunately, when it comes to AIDS, our political leaders, who are mostly men in power, are failing in most countries around the world, year after year after year. The failings of these political leaders are most profoundly demonstrated in the increased vulnerability of women to HIV.

At the XV International AIDS Conference in Bangkok there was significant focus on the greater vulnerability of women, particularly young women, to HIV disease. Evidence of their greater risk is demonstrated by the ever increasing body count of infected women nearly everywhere in the world one looks. This evidence didn't appear overnight. The numbers of infected women have been increasing in ever greater and disproportionate numbers for the last 20 years.

Worldwide women make up 48% of HIV cases and comprise 60% of infected youth between the ages of 17 and 24. In Africa, 58% of HIV cases are women and a staggering 75% of young people who are infected are women. When it comes to ever increasing numbers of women being infected even Wyoming mirrors global trends. The number of women infected in Wyoming has gone from 13% of HIV cases for the years 1989 through 1993 to 37% of cases for 1999 through 2003. Around the world, young people (15-24) make up 50% of the 8,000 new HIV infections occurring daily.

The one constant nurturing HIV over the years, while it has made women the soft targets of some twisted evolutionary vengeance, has been gender inequality. Around the world, women are coerced into early marriages. They face unwanted pregnancies. They are more vulnerable to other sexually transmitted diseases. They die in labor. They are the soft victims of domestic violence. They are denied property and inheritance rights. They have unequal access to health

services, educational opportunities and work. They are held responsible for the disease by unfaithful husbands. They suffer sexual violence and rape.

While rape is used as a weapon and tool of war, the world barely notices and political leaders, mostly men, do nothing. In Rwanda, it is estimated that as many as 250,000 women experienced multiple episodes of rape during the 1994 genocide and as many as 67% were exposed to HIV. Today, in western Sudan, eastern Congo and northern Uganda thousands more women have been raped and episodes of rape, sexual cruelty and mutilation still occur. Women in Africa and elsewhere face these indignities daily, run the household, provide the food and raise the orphans. Their reward for a life of devotion, compassion and stoicism is only an early and agonizing death.

Around the world, between 20% and 50% of girls and young women report that their first sexual encounter was forced. While women are twice as likely as men to contract HIV from a one-time sexual encounter, they remain, for the most part, dependent on the cooperation of men to protect themselves. For women, living under clouds of social and economic abuse, domestic and sexual violence, the concept of "ABC" (Abstinence, Be Faithful, Use Condoms) is not a realistic option.

Working with young people around abstinence is not an issue, but when abstinence becomes behavior that is judged as good, and other behaviors are judged as bad it becomes a donor ideology that doesn't match the realities of young people and particularly young women. Young people want accurate and complete information about their reproductive health in order to make informed choices. Attempts to regulate young people by offering abstinence only information is a disservice and does not offer young people alternatives to the realities they face in their lives.

Abstinence is not a choice for women raped in the ongoing conflict in northern Uganda. Unfaithful husbands have made "faithful women" a high risk group, and negotiating condom use is not an option in an environment of fear from domestic violence and economic abuse. Actually, women are, most often, victims of abuse and violence from men they know, husbands, fathers, relatives and neighbors. The problem with "ABC" is that it doesn't go far enough. If abstinence isn't possible, then be faithful, and if you can't do that, then use condoms. And if you can't use condoms, then why not address the issues of men's violence against women and gender inequality. It doesn't hold men responsible for their actions and it doesn't engage them as part of the solution. It doesn't partner men and women to eliminate men's violence against women.

It is men who inflict the violence and it is patriarchy that sustains gender inequality. Men's violence against women is rooted in gender inequality and in the way boys and young men learn to be men. Violence is not in a gene. It is learned and it occurs among the rich and the poor and people of every nationality, race and religion.

Men do not come into this world as violent human beings. They are born like the daughters of the world, as squalling infants, dependent on their mothers. They have to learn to use violence against women, children, other men and different races. They learn that to be a man one has to be strong, attractive, decisive, a provider, a leader, heterosexual, possess strong sexual prowess, and be willing to use violence as a tool to assert control, privilege and power.

Before "ABC" can have any relevance, men must recognize their individual and institutional abuse toward women, and become part of the solution to ending that violence and abuse. Children need to know that all forms of violence are unacceptable. Young boys need to know that it is not necessary to control or dominate others in order to be a man. Men need to be held accountable for criminal acts of domestic and sexual violence. Government leaders need to end and condemn the use of rape and sexual violence in war and provide treatment to women infected so they will not die without having the opportunity to testify before international courts. Men need to know that when they stand witness and do nothing; they are silent accessories to the individual and institutional violence they know exists.

Get Involved Links: The following links are not all inclusive but are offered as a starting point for action.

Men working to end men's violence against women
The White Ribbon Campaign
365 Bloor Street East, Ste. 203
Toronto, Ontario M4W 3L4
Canada
Phone: 416-920-6684
Email: info@whiteribbon.ca
Website: www.whiteribbon.ca

Women's Equity in Access to Care & Treatment for HIV
A Global Initiative
WE-ACTx
3345 22nd Street
San Francisco, CA 94110
Phone: 415-648-1728
Email: acd@we-actx.org
Website: www.we-actx.org

UNAIDS
World AIDS Campaign 2004
Women, Girls, HIV and AIDS
Website: www.unaids.org/wac2004
Email: unaids@unaids.org

The appearance of paid advertisements related to HIV therapy is not an endorsement or recommendation by *Positives For Positives* for any particular product or medication.

Your treatment options should always be discussed with an experienced HIV Physician specialist.

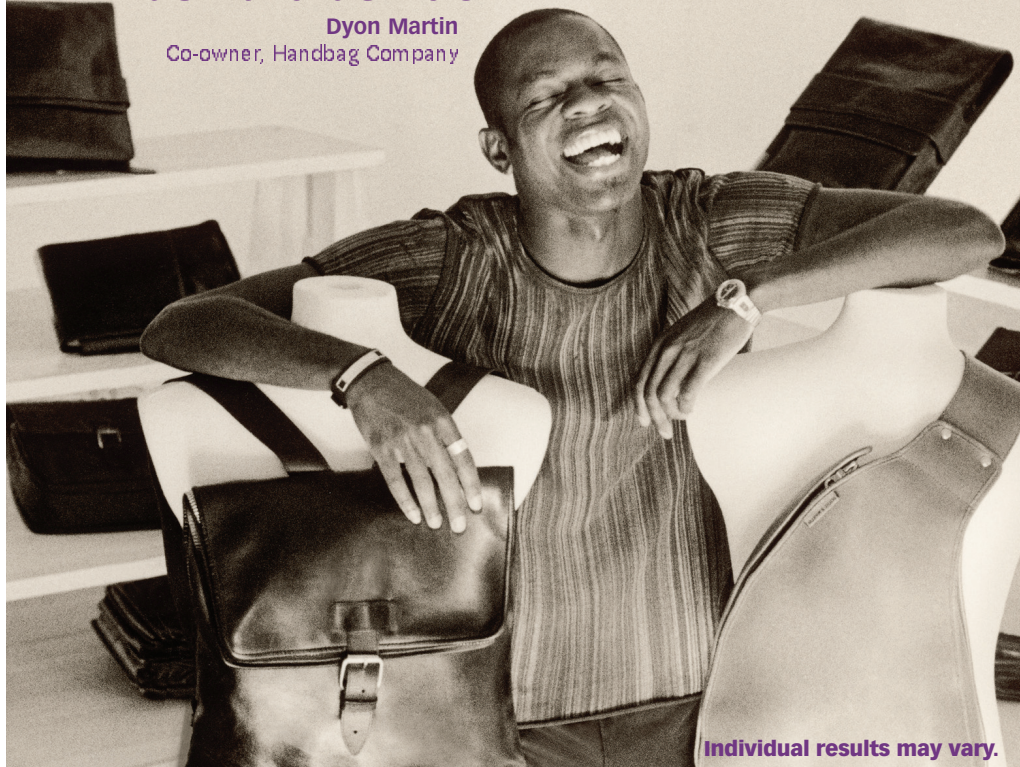
If you don't know of an HIV Specialist in your area. Contact your local health department or AIDS Service Organization.

Knowledge = Power

Sustiva in HIV combination therapy:

**"I like my HIV med to keep working
as hard as I do."**

Dyon Martin
Co-owner, Handbag Company



Individual results may vary.

**HIV medication with
as many goals as you.**


**Once Daily
SUSTIVA**

- #1 PRESCRIBED MEDICATION OF ITS KIND*
- PROVEN TO KEEP VIRAL LEVELS UNDETECTABLE FOR A LONG TIME IN COMBINATION THERAPY†
- HELPS REBUILD NATURAL IMMUNE SYSTEM BY RAISING T-CELL COUNT
- GENERALLY WELL TOLERATED WITH ESTABLISHED SAFETY PROFILE

* Based on IMS Retail and Mail Order Perspective.
May 1999–August 2004.

† Up to 168 weeks.

Visit www.sustiva.com

INDICATION: Sustiva (efavirenz) is a prescription medicine used in combination with other medicines to treat people who are infected with the human immunodeficiency virus type 1 (HIV-1).

Sustiva does not cure HIV or help prevent passing HIV to others.

IMPORTANT SAFETY INFORMATION:

Do not take Sustiva if you are taking the following medicines: Hismanal® (astemizole), Propulsid® (cisapride), Versed® (midazolam), Halcion® (triazolam), ergot medicines (for example, Wigraine® and Cafergo®), or Vfend® (voriconazole). **This list of medicines is not complete. Discuss all prescription and non-prescription medicines, vitamin and herbal supplements, or other health preparations (particularly St. John's wort) you are taking or plan to take with your healthcare provider.**

Tell your healthcare provider right away if you have any side effects or conditions, including the following:

- **Severe depression, strange thoughts, or angry behavior** have been reported by a small number of patients taking Sustiva. There have been a few reports of suicide but it is not known if Sustiva was the cause.

- **If you have ever had mental illness or are using drugs or alcohol.**
- **Dizziness, trouble sleeping or concentrating, drowsiness, and/or unusual dreams** are common. These feelings tend to go away after taking Sustiva (efavirenz) for a few weeks.
- **Pregnancy:** Women should not become pregnant or breastfeed while taking Sustiva.
- **Rash** is a common side effect that usually goes away without any change in your medicines. Rash may be a serious problem in some children.
- **If you have liver disease, have ever had seizures, or are taking medicine for seizures,** your healthcare provider may want to do tests to check your liver or check drug levels in your blood.

Changes in body fat have been seen in some patients taking anti-HIV medicines. The cause and long-term effects are not known at this time.

Other common side effects of Sustiva taken with other anti-HIV medicines include: tiredness, upset stomach, vomiting, and diarrhea.

You should take Sustiva on an empty stomach, preferably at bedtime, which may make some side effects less bothersome.



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Please see Important Information about SUSTIVA on the next page.


SUSTIVA[®]
(efavirenz) 600 mg
tablets

Ask your doctor if Once Daily SUSTIVA is right for you.

PATIENT INFORMATION

Rx ONLY

SUSTIVA® (sus-TEE-vah) [efavirenz (eh-FAH-vih-rehnz)] capsules and tablets

ALERT: Find out about medicines that should NOT be taken with SUSTIVA.

Please also read the section "MEDICINES YOU SHOULD NOT TAKE WITH SUSTIVA."

Read this information before you start taking SUSTIVA (efavirenz). Read it again each time you refill your prescription, in case there is any new information. This leaflet provides a summary about SUSTIVA and does not include everything there is to know about your medicine. This information is not meant to take the place of talking with your doctor.

What is SUSTIVA?

SUSTIVA is a medicine used in combination with other medicines to help treat infection with Human Immunodeficiency Virus type 1 (HIV-1), the virus that causes AIDS (acquired immune deficiency syndrome). SUSTIVA is a type of anti-HIV drug called a "non-nucleoside reverse transcriptase inhibitor" (NNRTI). NNRTIs are not used in the treatment of Human Immunodeficiency Virus type 2 (HIV-2) infection.

SUSTIVA (efavirenz) works by lowering the amount of HIV-1 in the blood (viral load). SUSTIVA must be taken with other anti-HIV medicines. When taken with other anti-HIV medicines, SUSTIVA has been shown to reduce viral load and increase the number of CD4+ cells, a type of immune cell in blood. SUSTIVA may not have these effects in every patient.

SUSTIVA does not cure HIV or AIDS. People taking SUSTIVA may still develop other infections and complications. Therefore, it is very important that you stay under the care of your doctor.

SUSTIVA has not been shown to reduce the risk of passing HIV to others. Therefore, continue to practice safe sex, and do not use or share dirty needles.

What are the possible side effects of SUSTIVA?

Serious psychiatric problems. A small number of patients experience severe depression, strange thoughts, or angry behavior while taking SUSTIVA. Some patients have thoughts of suicide and a few have actually committed suicide. These problems tend to occur more often in patients who have had mental illness. Contact your doctor right away if you think you are having these psychiatric symptoms, so your doctor can decide if you should continue to take SUSTIVA.

Common side effects. Many patients have dizziness, trouble sleeping, drowsiness, trouble concentrating, and/or unusual dreams during treatment with SUSTIVA. These side effects may be reduced if you take SUSTIVA at bedtime on an empty stomach. They also tend to go away after you have taken the medicine for a few weeks. If you have these common side effects, such as dizziness, it does not mean that you will also have serious psychiatric problems, such as severe depression, strange thoughts, or angry behavior. Tell your doctor right away if any of these side effects continue or if they bother you. It is possible that these symptoms may be more severe if SUSTIVA is used with alcohol or mood altering (street) drugs.

If you are dizzy, have trouble concentrating, or are drowsy, avoid activities that may be dangerous, such as driving or operating machinery.

Rash is common. Rashes usually go away without any change in treatment. In a small number of patients, rash may be serious. If you develop a rash, call your doctor right away. **Rash may be a serious problem in some children.** Tell your child's doctor right away if you notice rash or any other side effects while your child is taking SUSTIVA.

Other common side effects include tiredness, upset stomach, vomiting, and diarrhea.

Changes in body fat. Changes in body fat develop in some patients taking anti-HIV medicine. These changes may include an increased amount of fat in the upper back and neck ("buffalo hump"), in the breasts, and around the trunk. Loss of fat from the legs, arms, and face may also happen. The cause and long-term health effects of these fat changes are not known.

Tell your doctor or healthcare provider if you notice any side effects while taking SUSTIVA.

Contact your doctor before stopping SUSTIVA because of side effects or for any other reason.

This is not a complete list of side effects possible with SUSTIVA. Ask your doctor or pharmacist for a more complete list of side effects of SUSTIVA and all the medicines you will take.

How should I take SUSTIVA (efavirenz)?

General Information

- You should take SUSTIVA on an empty stomach, preferably at bedtime.
- Swallow SUSTIVA with water.
- Taking SUSTIVA with food increases the amount of medicine in your body, which may increase the frequency of side effects.
- Taking SUSTIVA at bedtime may make some side effects less bothersome.
- SUSTIVA must be taken in combination with other anti-HIV medicines. If you take only SUSTIVA, the medicine may stop working.
- Do not miss a dose of SUSTIVA. If you forget to take SUSTIVA, take the missed dose right away, unless it is almost time for your next dose. Do not double the next dose. Carry on with your regular dosing schedule. If you need help in planning the best times to take your medicine, ask your doctor or pharmacist.
- Take the exact amount of SUSTIVA your doctor prescribes. Never change the dose on your own. Do not stop this medicine unless your doctor tells you to stop.
- If you believe you took more than the prescribed amount of SUSTIVA, contact your local Poison Control Center or emergency room right away.
- Tell your doctor if you start any new medicine or change how you take old ones. Your doses may need adjustment.
- When your SUSTIVA supply starts to run low, get more from your doctor or pharmacy. This is very important because the amount of virus in your blood may increase if the medicine is stopped for even a short time. The virus may develop resistance to SUSTIVA and become harder to treat.
- Your doctor may want to do blood tests to check for certain side effects while you take SUSTIVA.

Capsules

- The dose of SUSTIVA capsules for adults is 600 mg (three 200-mg capsules, taken together) once a day by mouth. The dose of SUSTIVA for children may be lower (see **Can children take SUSTIVA?**).

Tablets

- The dose of SUSTIVA tablets for adults is 600 mg (one tablet) once a day by mouth.

Can children take SUSTIVA?

Yes, children who are able to swallow capsules can take SUSTIVA. Rash may be a serious problem in some children. Tell your child's doctor right away if you notice rash or any other side effects while your child is taking SUSTIVA. The dose of SUSTIVA for children may be lower than the dose for adults. Capsules containing lower doses of SUSTIVA are available. Your child's doctor will determine the right dose based on your child's weight.

Who should not take SUSTIVA?

Do not take SUSTIVA if you are allergic to the active ingredient, efavirenz, or to any of the inactive ingredients. Your doctor and pharmacist have a list of the inactive ingredients.

What should I avoid while taking SUSTIVA (efavirenz)?

- Women taking SUSTIVA should not become pregnant.** Serious birth defects have been seen in animals treated with SUSTIVA. It is not known whether this could happen in humans. **Tell your doctor right away if you are pregnant.** Also talk with your doctor if you want to become pregnant.
- Women should not rely only on hormone-based birth control, such as pills, injections, or implants, because SUSTIVA may make these contraceptives ineffective. Women must use a reliable form of barrier contraception, such as a condom or diaphragm, even if they also use other methods of birth control.
- Do not breast-feed if you are taking SUSTIVA.** The Centers for Disease Control and Prevention recommend that mothers with HIV not breast-feed because they can pass the HIV through their milk to the baby. Also, SUSTIVA may pass through breast milk and cause serious harm to the baby. Talk with your doctor if you are breast-feeding. You may need to stop breast-feeding or use a different medicine.
- Taking SUSTIVA with alcohol or other medicines causing similar side effects as SUSTIVA, such as drowsiness, may increase those side effects.
- Do not take any other medicines without checking with your doctor. These medicines include prescription and nonprescription medicines and herbal products, especially St. John's wort.

Before using SUSTIVA, tell your doctor if you

- have problems with your liver or have hepatitis.** Your doctor may want to do tests to check your liver while you take SUSTIVA.
- have ever had mental illness or are using drugs or alcohol.**
- have ever had seizures or are taking medicine for seizures** (for example, Dilantin® (phenytoin), Tegretol® (carbamazepine), or phenobarbital). Your doctor may want to check drug levels in your blood from time to time.

What important information should I know about taking other medicines with SUSTIVA?

SUSTIVA may change the effect of other medicines, including ones for HIV, and cause serious side effects. Your doctor may change your other medicines or change their doses. Other medicines, including herbal products, may affect SUSTIVA. For this reason, **it is very important to:**

- let all your doctors and pharmacists know that you take SUSTIVA.
- tell your doctors and pharmacists about all medicines you take. This includes those you buy over-the-counter and herbal or natural remedies.

Bring all your prescription and nonprescription medicines as well as any herbal remedies that you are taking when you see a doctor, or make a list of their names, how much you take, and how often you take them. This will give your doctor a complete picture of the medicines you use. Then he or she can decide the best approach for your situation.

Taking SUSTIVA with St. John's wort (*Hypericum perforatum*), an herbal product sold as a dietary supplement, or products containing St. John's wort is not recommended. Talk with your doctor if you are taking or are planning to take St. John's wort. Taking St. John's wort may decrease SUSTIVA levels and lead to increased viral load and possible resistance to SUSTIVA or cross-resistance to other anti-HIV drugs.

MEDICINES YOU SHOULD NOT TAKE WITH SUSTIVA

The following medicines may cause serious and life-threatening side effects when taken with SUSTIVA. You should not take any of these medicines while taking SUSTIVA:

- Hismanal® (astemizole)
- Propulsid® (cisapride)
- Versed® (midazolam)
- Halcion® (triazolam)
- Ergot medications (for example, Wigraine® and Cafergot®)

The following medicine should not be taken with SUSTIVA since it may lose its effect or may increase the chance of having side effects from SUSTIVA:

- Vfend® (voriconazole)

The following medicines may need to be replaced with another medicine when taken with SUSTIVA (efavirenz):

- Fortovase®, Invirase® (saquinavir)
- Biaxin® (clarithromycin)

The following medicines may need to have their dose changed when taken with SUSTIVA:

- Crixivan® (indinavir)
- Kaletra® (lopinavir/ritonavir)
- Methadone
- Mycobutin® (rifabutin)
- REYATAZ® (atazanavir sulfate). If you are taking SUSTIVA and REYATAZ, you should also be taking Norvir® (ritonavir).
- Zolof® (sertraline)

These are not all the medicines that may cause problems if you take SUSTIVA. Be sure to tell your doctor about all medicines that you take.

General advice about SUSTIVA:

Medicines are sometimes prescribed for conditions that are not mentioned in patient information leaflets. Do not use SUSTIVA for a condition for which it was not prescribed. Do not give SUSTIVA to other people, even if they have the same symptoms you have. It may harm them.

Keep SUSTIVA at room temperature (77°F) in the bottle given to you by your pharmacist. The temperature can range from 59° to 86°F.

Keep SUSTIVA out of the reach of children.

This leaflet summarizes the most important information about SUSTIVA. If you would like more information, talk with your doctor. You can ask your pharmacist or doctor for the full prescribing information about SUSTIVA, or you can visit the SUSTIVA website at <http://www.sustiva.com> or call 1-800-426-7644.

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Positives For Positives

would like to wish all of our

readers and supporters

a Joyous Holiday Season

and a Most Happy New Year



Conversations with Fellow Inmates

By Danny Meyers

For a few years now, Jeff Palmer, the Editor of this newsletter, has generously granted me the privilege to discuss many issues concerning HIV/AIDS from the perspective of an HIV positive inmate. For this opportunity I am profoundly grateful.

Having been here at the Colorado Territorial Correctional Facility for many years it has become second nature to do whatever possible to assist my fellow inmates, regardless of their HIV status with a myriad of issues surrounding the disease. In addition, organized prison programs here such as "Life Skills" and "Healthy Living" have helped to bring the ABC's of HIV to every inmate who chooses to enroll. With this issue I hope to shed some light on how effective our combined efforts have been. To accomplish this, I have carefully chosen two inmates, one with HIV disease and the other without, whom I feel accurately represent their respective groups here at Territorial. I have selected to highlight these particular inmates because I felt their responses would be direct, truthful and uninhibited. As you will see, I was not disappointed. The following then are their candid responses to some, sometimes difficult but thought-provoking, questions. For the sake of privacy and to protect the identity of those interviewed I have not used their real names and I have transcribed their conversations exactly as they were related to me.

DM: How long have you been here?

Don: In the prison system or here at CTCF (Colorado Territorial Correctional Facility)?

DM: Here at CTCF.

Don: Around five years.

DM: So you have lived in other prisons in the system?

Don: Yeah, I came here as a "facility need" to operate a unique type setting machine few inmates can safely operate. (CTCF is one of the few facilities that produces license plates and license plates tags.)

DM: Were there organized classes in your last facility that tried to educate its inmates about HIV/AIDS?

Don: No, they couldn't have care less. Everybody knows that this is pretty much the only joint where inmates have "the bug". (This is the term that most inmates have for HIV.) I ain't got it though, they tell me. Hands up, palm forward.

DM: Having been here as long as you have, do you feel that enough effort is made to educate guys like yourself who don't

have the bug?

Don: I guess.

DM: You don't sound very sure.

Don: There's stuff in the library, but if I don't know my homies do, they tell me what's up.

DM: Do you think there's enough effort to educate guys at risk of infection such as yourself, after all, you can't always tell about other inmates? In fact, you usually can't tell.

Don: It depends on what I'm doin', you know. I went to them classes and I ask guys like you stuff and I pretty much know what I'm doin'.... You know, basically.

DM: During your time here, have you ever done anything that might put you at risk of HIV infection?

Don: I ain't no junkie or no fag, if that's what you mean.

DM: How about tattoos?

Don: Yeah, a few times about three years ago, but I know everything was sterile.

DM: Over the course of my sentence I have seen a lot of tattoo artists, who valve their ink supply, use a bottle cap or some other reservoir to contain their ink during the tattoo process. Then they pour the remainder back into the bottle contaminating the entire supply, as well as any needle they might use again. And incidentally, the gloves that he uses protect him, not you!

Don: This guy is my homie dude, and he wouldn't take a chance like that.

DM: But who is the one taking chances here?

Don: You made your point!

DM: Actually I want to say thank you for putting up with me and being so direct and so truthful. I asked you to do this for that very reason and also because you were finally getting the hell out of here in a few months.

Don: Yeah, I'm finally going home.

DM: So what are you going to do to stay safe?

Don: I knew you were going to ask me that.

DM: Well?

Don: I'm going to take the old lady down to the clinic and we're both going to get tested.

DM: I'm impressed! What if she is infected?

Don: Easy... she's gone.

DM: So what then to keep you safe?

Don: Use condoms, I guess.

DM: But you sound uncertain.

Don: It's an uncertain world.

(Continued on page 11.)



The word on HIV:

Ask your doctor how REYATAZ, in HIV combination therapy, can help you
fight HIV your way.

Individual results may vary.

INDICATION: Reyataz (atazanavir sulfate) is a prescription medicine used in combination with other medicines to treat people who are infected with the human immunodeficiency virus (HIV). Reyataz has been studied in 48-week trials in both patients who have taken or have never taken anti-HIV medicines.

Reyataz does not cure HIV or help prevent passing HIV to others.

IMPORTANT SAFETY INFORMATION:

Do not take Reyataz if you are taking the following medicines: ergot medicines, Versed®, Halcion®, Orap®, Propulsid®, Camptosar®, Crixivan®, Mevacor®, Zocor®, rifampin, St. John's wort, AcipHex®, Nexium®, Prevacid®, Prilosec® or Protonix®. Do not use Viagra®, Levitra®, Cialis®, or Vfend® while you are taking Reyataz without first speaking with your healthcare provider. **This list of medicines is not complete. Discuss all prescription and non-prescription medicines, vitamin and herbal supplements, or other health preparations you are taking or plan to take with your healthcare provider.**

Tell your healthcare provider right away if you have any side effects or conditions, including the following:

- **A change in the way your heart beats** may occur and could be a symptom of a heart problem.
- **Diabetes and high blood sugar** may occur in patients taking protease inhibitor medicines like Reyataz.
- **Yellowing of the skin and/or eyes** may occur due to increases in bilirubin levels in the blood (bilirubin is made by the liver).
- **Rash** (redness and itching) sometimes occurs in patients taking Reyataz, most often in the first few weeks after the medicine is started, and usually goes away within two weeks with no change in treatment.
- **If you have liver disease**, including hepatitis B or C, your liver disease may get worse when you take anti-HIV medicines like Reyataz.
- **Some patients with hemophilia** have increased bleeding problems with protease inhibitor medicines like Reyataz.

Changes in body fat have been seen in some patients taking anti-HIV medicines. The cause and long-term effects are not known at this time.

Common side effects of Reyataz taken with other anti-HIV medicines include: nausea, headache, stomach pain, vomiting, diarrhea, depression, fever, dizziness, trouble sleeping, numbness, and tingling or burning of hands or feet.

You should take Reyataz once daily with food (a meal or snack). You should take Reyataz and your other anti-HIV medicines exactly as instructed by your healthcare provider.

Please see important information about REYATAZ on the next page.

Once Daily REYATAZ is a protease inhibitor (PI) that is taken in HIV combination therapy.

- ◆ **Can help raise your T-cells**
- ◆ **Can help lower your viral load to undetectable***
- ◆ **Low chance of diarrhea** (shown in clinical trials)[†]
- ◆ **Two pills taken once-a-day** (with a snack or meal)[‡]

*Undetectable is defined as a viral load of less than 400 or 50 copies/mL (depending on the test used).

[†] REYATAZ in combination therapy had a 1-3% rate of moderate-to-severe diarrhea.

[‡] People who have taken anti-HIV medicines before usually take REYATAZ with ritonavir once daily as part of their HIV combination therapy.

You and your doctor can **fight HIV your way.**


REYATAZ®
(atazanavir sulfate) 150 mg/200 mg capsules

PATIENT INFORMATION

Rx ONLY

REYATAZ® (RAY-ah-taz)

(generic name = **atazanavir sulfate**) Capsules

ALERT: Find out about medicines that should NOT be taken with REYATAZ. Read the section "What important information should I know about taking REYATAZ with other medicines?"

Read the Patient Information that comes with REYATAZ before you start using it and each time you get a refill. There may be new information. This leaflet provides a summary about REYATAZ and does not include everything there is to know about your medicine. This information does not take the place of talking with your healthcare provider about your medical condition or treatment.

What is REYATAZ?

REYATAZ is a prescription medicine used with other anti-HIV medicines to treat people who are infected with the human immunodeficiency virus (HIV). HIV is the virus that causes acquired immune deficiency syndrome (AIDS). REYATAZ is a type of anti-HIV medicine called a protease inhibitor. HIV infection destroys CD4+ (T) cells, which are important to the immune system. The immune system helps fight infection. After a large number of T cells are destroyed, AIDS develops. REYATAZ helps to block HIV protease, an enzyme that is needed for the HIV virus to multiply. REYATAZ may lower the amount of HIV in your blood, help your body keep its supply of CD4+ (T) cells, and reduce the risk of death and illness associated with HIV.

Does REYATAZ cure HIV or AIDS?

REYATAZ does not cure HIV infection or AIDS. At present there is no cure for HIV infection. People taking REYATAZ may still get opportunistic infections or other conditions that happen with HIV infection. Opportunistic infections are infections that develop because the immune system is weak. Some of these conditions are pneumonia, herpes virus infections, and *Mycobacterium avium* complex (MAC) infections. **It is very important that you see your healthcare provider regularly while taking REYATAZ.**

REYATAZ does not lower your chance of passing HIV to other people through sexual contact, sharing needles, or being exposed to your blood. For your health and the health of others, it is important to always practice safer sex by using a latex or polyurethane condom or other barrier to lower the chance of sexual contact with semen, vaginal secretions, or blood. Never use or share dirty needles.

Who should not take REYATAZ?

Do not take REYATAZ if you:

- are taking certain medicines. (See "What important information should I know about taking REYATAZ with other medicines?") Serious life-threatening side effects or death may happen. Before you take REYATAZ, tell your healthcare provider about all medicines you are taking or planning to take. These include other prescription and nonprescription medicines, vitamins, and herbal supplements.
- are allergic to REYATAZ or to any of its ingredients. The active ingredient is atazanavir sulfate. See the end of this leaflet for a complete list of ingredients in REYATAZ. Tell your healthcare provider if you think you have had an allergic reaction to any of these ingredients.

What should I tell my healthcare provider before I take REYATAZ?

Tell your healthcare provider:

- if you are pregnant or planning to become pregnant. It is not known if REYATAZ can harm your unborn baby. Pregnant women have experienced serious side effects when taking REYATAZ with other HIV medicines called nucleoside analogues. You and your healthcare provider will need to decide if REYATAZ is right for you. If you use REYATAZ while you are pregnant, talk to your healthcare provider about the Antiretroviral Pregnancy Registry.
- if you are breast-feeding. You should not breast-feed if you are HIV-positive because of the chance of passing HIV to your baby. Also, it is not known if REYATAZ can pass into your breast milk, and if it can harm your baby. If you are a woman who has or will have a baby, talk with your healthcare provider about the best way to feed your baby.
- if you have liver problems or are infected with the hepatitis B or C virus. See "What are the possible side effects of REYATAZ?"
- if you have diabetes. See "What are the possible side effects of REYATAZ?"
- if you have hemophilia. See "What are the possible side effects of REYATAZ?"
- about all the medicines you take, including prescription and nonprescription medicines, vitamins, and herbal supplements. Keep a list of your medicines with you to show your healthcare provider. For more information, see "What important information should I know about taking REYATAZ with other medicines?" and "Who should not take REYATAZ?" Some medicines can cause serious side effects if taken with REYATAZ.

How should I take REYATAZ?

- Take REYATAZ every day exactly as instructed by your healthcare provider. Your healthcare provider will prescribe the amount of REYATAZ that is right for you.
 - For adults who have never taken anti-HIV medicines before, the usual dose is 400 mg (two 200-mg capsules) once daily taken with food.
 - For adults who have taken anti-HIV medicines in the past, the usual dose is 300 mg (two 150-mg capsules) plus 100 mg of NORVIR® (ritonavir) once daily taken with food.
- Your dose will depend on your liver function and on the other anti-HIV medicines that you are taking. REYATAZ is always used with other anti-HIV medicines. If you are taking REYATAZ with SUSTIVA® (efavirenz) or with VIREAD® (tenofovir disoproxil fumarate), you should also be taking NORVIR® (ritonavir).

- Always take REYATAZ with food (a meal or snack) to help it work better. Swallow the capsules whole. Do not open the capsules. Take REYATAZ at the same time each day.
- If you are taking antacids or VIDEX® (didanosine) Chewable/Dispersible Buffered Tablets, take REYATAZ 2 hours before or 1 hour after these medicines.
- Do not change your dose or stop taking REYATAZ without first talking with your healthcare provider. It is important to stay under a healthcare provider's care while taking REYATAZ.
- When your supply of REYATAZ starts to run low, get more from your healthcare provider or pharmacy. It is important not to run out of REYATAZ. The amount of HIV in your blood may increase if the medicine is stopped for even a short time.
- If you miss a dose of REYATAZ, take it as soon as possible and then take your next scheduled dose at its regular time. If, however, it is within 6 hours of your next dose, do not take the missed dose. Wait and take the next dose at the regular time. Do not double the next dose. **It is important that you do not miss any doses of REYATAZ or your other anti-HIV medicines.**
- If you take more than the prescribed dose of REYATAZ, call your healthcare provider or poison control center right away.

Can children take REYATAZ?

REYATAZ has not been fully studied in children under 16 years of age. REYATAZ should not be used in babies under the age of 3 months.

What are the possible side effects of REYATAZ?

The following list of side effects is **not** complete. Report any new or continuing symptoms to your healthcare provider. If you have questions about side effects, ask your healthcare provider. Your healthcare provider may be able to help you manage these side effects.

The following side effects have been reported with REYATAZ:

- **rash** (redness and itching) sometimes occurs in patients taking REYATAZ, most often in the first few weeks after the medicine is started. Rashes usually go away within 2 weeks with no change in treatment. Tell your healthcare provider if rash occurs.
- **yellowing of the skin or eyes.** These effects may be due to increases in bilirubin levels in the blood (bilirubin is made by the liver). Call your healthcare provider if your skin or the white part of your eyes turn yellow. Although these effects may not be damaging to your liver, skin, or eyes, it is important to tell your healthcare provider promptly if they occur.
- a change in the way your heart beats (**heart rhythm change**). Call your healthcare provider right away if you get dizzy or lightheaded. These could be symptoms of a heart problem.
- **diabetes and high blood sugar (hyperglycemia)** sometimes happen in patients taking protease inhibitor medicines like REYATAZ. Some patients had diabetes before taking protease inhibitors while others did not. Some patients may need changes in their diabetes medicine.
- if you have liver disease including hepatitis B or C, your liver disease may get worse when you take anti-HIV medicines like REYATAZ.

- **some patients with hemophilia** have increased bleeding problems with protease inhibitors like REYATAZ.
- **changes in body fat.** These changes may include an increased amount of fat in the upper back and neck ("buffalo hump"), breast, and around the trunk. Loss of fat from the legs, arms, and face may also happen. The cause and long-term health effects of these conditions are not known at this time.

Other common side effects of REYATAZ taken with other anti-HIV medicines include nausea; headache; stomach pain; vomiting; diarrhea; depression; fever; dizziness; trouble sleeping; numbness, tingling, or burning of hands or feet; and muscle pain.

What important information should I know about taking REYATAZ with other medicines?

Do not take REYATAZ if you take the following medicines (not all brands may be listed; tell your healthcare provider about all the medicines you take). REYATAZ may cause serious, life-threatening side effects or death when used with these medicines.

- Ergot medicines: dihydroergotamine, ergonovine, ergotamine, and methylergonovine such as CAFERGOT®, MIGRANAL®, D.H.E. 45®, ergotrate maleate, METHERGINE®, and others (used for migraine headaches).
- HALCION® (triazolam, used for insomnia).
- VERSED® (midazolam, used for sedation).
- ORAP® (pimozide, used for Tourette's disorder).
- PROPULSID® (cisapride, used for certain stomach problems).

Do not take the following medicines with REYATAZ because of possible serious side effects:

- CAMPTOSAR® (irinotecan, used for cancer).
- CRIVAN® (indinavir, used for HIV infection). Both REYATAZ and CRIVAN sometimes cause increased levels of bilirubin in the blood.
- Cholesterol-lowering medicines MEVACOR® (lovastatin) or ZOCOR® (simvastatin).

Do not take the following medicines with REYATAZ because they may lower the amount of REYATAZ in your blood.

This may lead to an increased HIV viral load. Resistance to REYATAZ or cross-resistance to other HIV medicines may develop:

- Rifampin (also known as RIMACTANE®, RIFADIN®, RIFATER®, or RIFAMATE®, used for tuberculosis).
- St. John's wort (*Hypericum perforatum*), an herbal product sold as a dietary supplement, or products containing St. John's wort.
- "Proton-pump inhibitors" used for indigestion, heartburn, or ulcers such as AcipHex® (rabeprazole), NEXIUM® (esomeprazole), PREVACID® (lansoprazole), PRILOSEC® (omeprazole), or PROLONIX® (pantoprazole).

Do not take the following medicines if you are taking REYATAZ and NORVIR® together:

- VFEND® (voriconazole).

The following medicines may require your healthcare provider to monitor your therapy more closely:

- CIALIS® (tadalafil), LEVITRA® (vardenafil), or VIAGRA® (sildenafil). REYATAZ may increase the chances of serious side effects that can happen with CIALIS, LEVITRA, or VIAGRA. Do not use CIALIS, LEVITRA, or VIAGRA while you are taking REYATAZ unless your healthcare provider tells you it is okay.
- LIPITOR® (atorvastatin). There is an increased chance of serious side effects if you take REYATAZ with this cholesterol-lowering medicine.
- Medicines for abnormal heart rhythm: CORDARONE® (amiodarone), lidocaine, quinidine (also known as CARDIOQUIN®, QUINIDEX®, and others).
- VASCOR® (bediril, used for chest pain).
- COUMADIN® (warfarin).
- Tricyclic antidepressants such as ELAVIL® (amitriptyline), NORPRAMIN® (desipramine), SINEQUAN® (doxepin), SURMONTIL® (trimipramine), TOFRANIL® (imipramine), or VIVACTIL® (protriptyline).
- Medicines to prevent organ transplant rejection: SANDIMMUNE® or NEORAL® (cyclosporine), RAPAMUNE® (sirolimus), or PROGRAF® (tacrolimus).

The following medicines may require a change in the dose or dose schedule of either REYATAZ or the other medicine:

- FORTOVASE®, INVIRASE® (saquinavir).
- NORVIR® (ritonavir).
- SUSTIVA® (efavirenz).
- VIDEX® (didanosine) or antacids.
- VIREAD® (tenofovir disoproxil fumarate).
- MYCOBUTIN® (rifabutin).
- Calcium channel blockers such as CARDIZEM® or TIAZAC® (diltiazem), COVERA-HS® or ISOPTIN SR® (verapamil) and others.
- BIAXIN® (clarithromycin).
- Medicines for indigestion, heartburn, or ulcers such as AXID® (nizatidine), PEPCID AC® (famotidine), TAGAMET® (cimetidine), or ZANTAC® (ranitidine).

Women who use birth control pills or "the patch" should choose a different kind of contraception. REYATAZ may affect the safety and effectiveness of birth control pills or the patch. Talk to your healthcare provider about choosing an effective contraceptive.

Remember:

1. Know all the medicines you take.
2. Tell your healthcare provider about all the medicines you take.
3. Do not start a new medicine without talking to your healthcare provider.

How should I store REYATAZ?

- Store REYATAZ (atazanavir sulfate) Capsules at room temperature, 59° to 86° F (15° to 30° C). Do not store this medicine in a damp place such as a bathroom medicine cabinet or near the kitchen sink.
- Keep your medicine in a tightly closed container.
- Throw away REYATAZ when it is outdated or no longer needed by flushing it down the toilet or pouring it down the sink.

General information about REYATAZ

This medicine was prescribed for your particular condition. Do not use REYATAZ for another condition. Do not give REYATAZ to other people, even if they have the same symptoms you have. It may harm them. **Keep REYATAZ and all medicines out of the reach of children and pets.**

This summary does not include everything there is to know about REYATAZ. Medicines are sometimes prescribed for conditions that are not mentioned in patient information leaflets. Remember, no written summary can replace careful discussion with your healthcare provider. If you would like more information, talk with your healthcare provider or you can call 1-800-426-7644.

What are the ingredients in REYATAZ?

Active Ingredient: atazanavir sulfate

Inactive Ingredients: Crospovidone, lactose monohydrate (milk sugar), magnesium stearate, gelatin, FD&C Blue #2, and titanium dioxide.

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Princeton, NJ 08543 USA

This Patient Information Leaflet has been approved by the U.S. Food and Drug Administration.

F1-B0001B-07-04

Based on package insert dated July 2004, 1168954A2

Revised July 2004

(Continued from page 8.)

DM: Did you know that after just 3 drinks you are twice as likely NOT to use a condom?

Don: I don't drink a lot of alcohol.

DM: Three beers is not a lot of alcohol.

Don: Once again, you've made your point.

DM: I want to wish you all the best and thank you for your honest answers. Stay safe!

The next interview gives us all, including myself, a great deal to think about. The inmate with whom I speak has the unfortunate distinction to be one of a growing number of inmates who become infected during their incarceration rather than before.

DM: Thank you for agreeing to speak with me for this interview. Initially you said no to my request. What changed your mind?

Jim: You kept pestering me (he laughs), but also because I began to realize I might have something of importance to offer.

DM: And what might that be?

Jim: I guess to tell guys how easy it is to get infected. I mean you can't trust anyone when they say they ain't got it.

DM: How do you think you became infected?

Jim: Drugs. Some guy I've known a few years who told me he had it but that he got rid of it by taking drugs the doctor gave him.

DM: And you believed him?

Jim: There are a lot of guys runnin' around here who say the same thing. I feel pretty f---in' stupid now but that doesn't change anything that's happened.

DM: Do you think what happened to you will help anyone else with making better choices?

Jim: Ain't that why we're talking"? It's a bitch bein' a convict and a junkie! It's real easy to talk yourself into things just to get high.

DM: How did you find out you were HIV infected?

Jim: I got a fever and then pneumonia. When they tested me at the hospital a few weeks later, I showed up positive for HIV and HEPC.

DM: Did you borrow somebody's kite (needle)?

Jim: Yeah, and he said it was soaking in bleach. F---kin' liar!

DM: You believed it?

Jim: Don't go there with me again, man.

DM: I'm not trying to make you feel bad. The fact is that this is the exact error in judgment that caused my infection. How has your life changed since you became infected?

Jim: I haven't been sick since the hospital.

DM: I mean do people know about your status? Do you tell them?

Jim: Not if they don't ask.

DM: If you were going to shoot up with or have sex with another person now that you have become infected, would you tell them?

Jim: Yeah, but after that, it's on them.

DM: So once they have been informed, you are no longer responsible?

Jim: I'm not making them do it!

DM: Well, I appreciate you allowing me to take up your time as well as your honesty. I hope that you will always be this truthful with people with whom you come in contact.

After having completed these interviews, I realized how far we have come as inmates with or without HIV/AIDS. I also realize the colossal error we would be making by thinking our lessons have been learned and by resting on our laurels. I am very proud of our willingness as inmates to learn and grow, but we need to understand that the real test that we will face is how and when we apply what we have learned in our lives as free citizens in the free world.

Most of those who leave prison will be a great deal stronger and all together healthier. I have witnessed a near instantaneous relapse among too many of us, lying waste to the considerable effort and discipline we showed to others and ourselves – many of us for the first time. It may interest you to know that one of the two individuals interviewed for this article overdosed on heroine less than one week after his release. It really doesn't matter which, my point is that the vulnerability is always there. We are indeed very human.

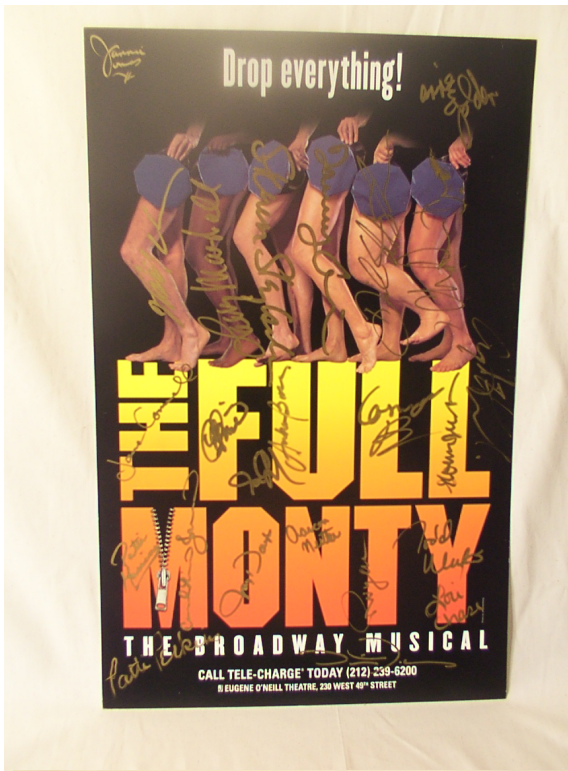
Respectfully,
Danny Meyers

As always your thoughts, ideas and suggestions concerning this and other articles written by Danny may be sent to him at:

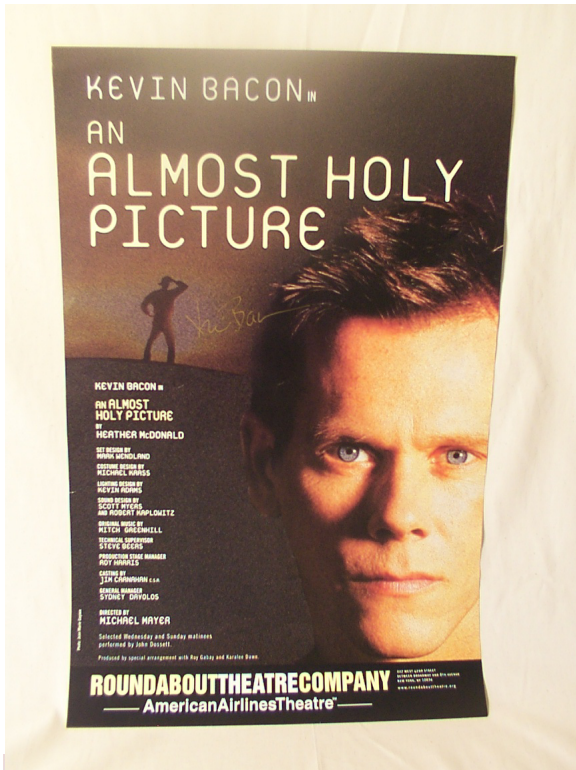
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XV International AIDS Conference: Report from a Peace Corps Worker

The XV International AIDS Conference in Bangkok was broken down into three different organizing committees: Scientific program, Leadership program and Community program. The different seminars, workshops and other programming fit into one or more of the different committee bodies. The latter of the three is where I spent most of my energy and time because not only was I working directly with the community program projects but they also related more directly to my current activities at my site.

The Community Program committee was responsible for organizing the community gathering, the empowering visit program, the Global Village, the Silabha Art and Cultural Program, youth activities as well as the PHA (People with AIDS) Lounge. The PHA Lounge was the main activity I was involved in and also the most valuable part of the conference for me, which I will extrapolate on later.

One of the main differences of the International AIDS Conference from other international health conferences is that many of the delegates, leaders, performers and scientists are living with the health topic being discussed. Working at the PHA Lounge was an amazing opportunity to get to know many people working on the forefront of this epidemic personally.

While at the Conference I tried to keep my focus attuned to AIDS topics related to Asia, specifically Thailand. Luckily there were three groups from Thailand that were very vocal and focal: The Thai Drug User's Network, Empower Sex Workers and Thai Youth Action Programs. Each group also represents important themes that were in many different sessions about AIDS in both Asia and other countries.

At the Conference there were many different Youth forums and the youth made their point very clearly: The youth need to play a larger part in the decision making bodies on AIDS/HIV issues for they are the ones "at risk" and living with HIV/AIDS. The youth showed unity, enthusiasm and intelligence in articulating the direction they want HIV/AIDS work to move into. Although youth assertion and empowerment challenges society widely it is even more of a challenge in Thailand which has a more hierarchical society and youth are often not listened to in policy-making decisions. I felt proud and optimistic being a youth with the amount of activity and energy the Youth Program displayed during this conference. The youth is where the epidemic of AIDS will either expand or descend and it is up to us, our actions, our knowledge and what we can share with each other.

Kun Paisan Sawannawong from the Thai Drug User's Network had a prominent voice during the conference. He challenged Nayoke Thaksin and his government to not wage war on drug users but to provide assistance and support. Kun Paisan called for needle exchange programs, comprehensive addiction treatment services and antiretroviral treatment for

HIV positive drug users. The importance in Thailand for providing clean needles and assistance for drug users was emphasized by recent epidemic trends in HIV prevention and care. In Thailand, the intravenous drug users have the highest percentage of spreading the virus.

Kofi Annan in his opening address stressed the importance of focusing on women and girls living with AIDS and HIV. Throughout the conference the importance of empowering women was an important theme, including the empowerment of sex workers. The empowering of sex workers is especially important in Asian countries where a larger percentage of males visit sex workers. During this conference I learned how deep and dense the topic on sex workers is but in brief sex workers need to be able to tell their clients that they must wear a condom. When looking at the trends of the spread of HIV in Thailand the highest rate is currently among IDUs, however, in the long term trends it quickly switches over to sex workers and their clients. The IDU group which is a relatively small and isolated group intermixes with sex workers group and their clients which is a much larger group is able to spread the virus to a much larger percentage of people. In Ubon, one of my friends is beginning a project in which they talk to the owners of sex brothels as well as the workers in trying to empower the workers as well as make it mandatory for clients to wear condoms.

The HIV/AIDS epidemic is clearly not limited to one specific group and there can not be one answer to cure it. If there was there would not have been a XV International AIDS Conference with people from all over the world, from all different groups representing. There were so many amazing speakers and groups at this conference that to even try to begin to expand on all of them would make the 362 page final program look like a short story, but to be a part of so much passion, energy, and collaboration was incredibly inspiring.

I plan on using the energy spurred on from the conference and continue to expand my work with HIV/AIDS at my site. I have a training of trainers' camp on HIV/AIDS awareness on my health clinic after the conference. The camp will be for 20 students who are about to move into their final year of high school. I will use two videos that I received from the conference as well as inform the students about information on HIV/AIDS trends in Thailand. In addition, I met several people working in NGOs (non-governmental organizations) and GOs (governmental organizations) in Ubon and I am hoping to collaborate with them after the conference.

In addition, I have already talked to the doctors in my community about my experience on the conference and shared with them pictures, stories and brochures. We are currently in the process of figuring out what the best next step in working HIV/AIDS should be in our community. Plus, indirectly, several of the community members in my village were glued to the television news about the AIDS conference

trying to see if I was going to be on television or not. And although that is a little silly, I think just me going to the international conference on HIV and AIDS and telling all the people in my community, spurred more discussion and awareness than anything else I could have done.

While at the conference I realized that as Peace Corps volunteers we are able to make a huge difference with HIV/AIDS awareness because we work directly at the grassroots level. There are so many great NGOs in Thailand working on HIV/AIDS issues but as in all organizations there are limits that they face. As Peace Corps volunteers in our villages we can easily change villagers' views on HIV/AIDS by going to a conference on HIV/AIDS. By participating in the local PHA group, by encouraging people to check out the AIDS hospice in Lopburi or simply by having dinner at someone's house. Since we are working in such a influential area it is important that as volunteers we have accurate information as well. I think the GIG and Peace Corps can help provide volunteers with informative facts and knowledge about HIV/AIDS in both Thai and English.

I also think that collaborating with some of the NGOs and GOs that are doing amazing stuff in our province is a great use of Peace Corps strengths as well as the strengths of the other organizations. As a single volunteer we face many limits to what we can do and I can think we can strengthen what we do with different collaborations with other organizations. I included an attachment, a short list of contacts in the Issan area and I think that providing contacts for NGOs and GOs working with AIDS in different regions could also be something helpful that GIG could do.

Despite all the amazing organizations from IAS (International AIDS Society), UNICEF, to smaller in-country organizations and all the amazing world leaders, such as, her excellency Sonja Ghandi, his excellency, Nelson Mandela, to a few movie stars who graced the XV International AIDS Conference with their presence, it was the simple and small interactions with the community members and the delegates that will leave a everlasting impression on me.

Working at the PHA Lounge gave me an amazing opportunity to greet, meet and listen to people who are living with HIV/AIDS and fighting the epidemic. By volunteering there I was able to enter into one of the most supportive and loving communities I have ever seen. What I will remember most from the conference is sitting at the lounge and just opening my ears and having so many people open their hearts to me and share anything and everything. I will remember walking down the halls of the crowded conference and sharing handshakes, hugs and smiles from my new friends at the conference. I will remember my friend that gave me the book, "Thoughts from the seat of the soul", when we said goodbye to each other. I will remember the wonderful people from the Thai Network of People living with AIDS that I worked with at the PHA Lounge. I will remember the different people I danced with to rhythms from around the world after the parade down Bangkok. These are the things that stuck out most to me and that were the most valuable part

of the Conference. It is the humanity and the love that we share that should always be the most valuable part of any Conference including, the XV International AIDS Conference. I feel blessed to have had the opportunity to partake in it and I hope that I can convey a little bit of the information and love I received from the Conference as well.

Sincerely,
Noah
Peace Corps Group 115, CBOD
Ubon Ratchathani, Thailand

Selected Resources in Thailand
These are only a few offered as starting points.

Thai Network for People with HIV/AIDS (TNP+)
494 soi Nakronthai 11, Lat phrao 101, Krongjun Bangkokpi
Bangkok 10240, Thailand
Tel: (66) 2377-5065
Email: kamon@thaiplus.net

CARE Ubon/RAKS Thai Foundation
335/2 Palochai Rd., Amphur Muang
Ubon Ratchathani 34000
Tel: (045)240136
Email: raksthai@ubon.a-net.net.th

AIDS ACCESS Foundation
48/282 Center Place Ramkhamheang Rd.
Sapansoong Bangkok 10240, Thailand
Tel: (66) 2372-2113
Email: glenn@aidsaccess.com

AIDS Network Development Foundation
Northeast Office, 628/8 Phimanchon 1, Ropbueang Road
Muang Khon Khaen 40000, Thailand
Tel: (66) 4322-7847
Email: aidsnetu@losinfo.co.th

Thai National AIDS Foundation (TNAF)
801/21 Soi Ngamwongwan 27, Ngamwongwan Road
Bangkrasor, Muang
Nontaburi Province 11000, Thailand
Tel: (66) 2953-6732-3
Email: tnaf@ksc.th.com

Thai NGO Coalition on AIDS
(Same as TNAF above.)
Email: tnca@ksc.th.com

Thai Youth Action Programs (TYAP)
P.O. Box 287, CMU Post Office
Chaing Mai 50202, Thailand
Tel: (66) 5327-4157
Email: tyap@loxinfo.co.th
Website: www.tyap.org

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Tibotec
TPAN (Test Positive Aware Network) - Positives Aware Magazine
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Wyoming HIV/AIDS Office
Virologic
Visionary Health Concepts
Yellowstone AIDS Project