

Extreme Reality

Winter 2009

MESSAGE FROM THE EXECUTIVE DIRECTOR

Welcome to the Winter Edition of *Extreme Reality*. It's been a whirlwind couple of months since accepting the position of Executive Director with the Northern AIDS Connection Society (NACS). The organization has been growing over the past couple of years most recently undertaking a Hepatitis C Aware project, through which Persons Living with Hep C (PLWHC) and community partners are part of an environmental scan of the issues, barriers and challenges individuals living with Hep C are facing in NNS. **Risk reduction messages are key** in the education process of issues surrounding Bloodborne Pathogens such as HIV and Hep C. within an area where issues of inadequate housing, high rates of Injection Drug Use, and STI rates are disproportionately high compared to other areas of NS.

NACS will be conducting a five-year strategic planning process over the next couple of months involving focus groups and interviews with our community partners, board members and staff of the organization. One of the guiding principles of the organization is the Greater More Meaningful Involvement of PHA's. An important part of our consultation process will involve interviewing Persons living with HIV/AIDS within Northern NS. This needs determination will assist in mapping future activities and improving NACS's service based response.

A new initiative through the NS Department of Justice – Lighthouses Grant will be launched in May. Through this project NACS will be taking a highly creative and innovative holistic approach towards involving youth in peer to peer learning and journey of self-discovery culminating in a photography project where youth participants will be provided with cameras to conduct individual PhotoVoice projects of their conflict with the law, personal experiences with risk behaviors and what they have learned during the project to make more informed and healthier voices.

Highlights within this edition of *Extreme Reality*: the launching of a condom co-op, updates on the Hep C project and an article on the issues and experiences of Hepatitis C treatment.

On a personal note, I sincerely look forward to working with all of our community partners, groups and individuals within NNS throughout the coming months. A special thank you the Board Members, staff and volunteers at NACS for their support and assistance in launching so many great initiatives.

We value the time you take to review our Newsletter and keeping abreast of the activities within the NACS office. We invite you to stop by our location at 33 Pleasant Street in Truro between 10-4 Monday to Friday, or contact me at nacsed@eastlink.ca.

NEWS HIGHLIGHTS

The Northern AIDS Connection Society (NACS) has many events and activities planned for 2010. On February 17 at the NS Community College Truro Campus, McCarthy Library, Jean Harrowing, Assistant Professor in the Baccalaureate Nursing Program at the University of Lethbridge Alberta, spoke on the contextual factors that influence health and health care in Sub-Saharan Africa and our role as Canadians working within these communities and involving students in the process of global citizenship.

The Canadian AIDS treatment and Information Exchange is hosting a workshop on February 24, 2010, at the Best Western Glengarry Hotel in Truro. NACS will have a presence at the 6th Annual Canadian Skills Building Symposium, to be held in Montreal on March 4th through to the 7th. Karen Kittilsen, the Executive Director of NACS, will be delivering a poster presentation reporting on the Hepatitis C Aware Project that was conducted in the Northern Region of Nova Scotia. NACS received funding through the Public Health agency of Canada for this project.

NACS also co-hosted a workshop with PASAN (Prisoners HIV/AIDS Support Action Network) in Truro on February 2nd at the Best Western Glengarry. Other AIDS Service Organizations from around Atlantic Canada participated. Topics included the planning and delivery of HIV/AIDS programming at a community based level for people in prisons.

Condom CO-OP

NACS wants to invite all interested parties to join their condom co-op. Financing your purchase of condoms through the NACS office is as easy as putting a team in the Scotiabank AIDS Walk for Life. For detailed information call (902) 895-0931 or email nacs@eastlink.ca

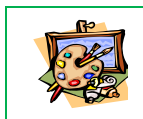
Wrap that gator,

No regrets later!



ART FOR AIDS AUCTION

Plans are under way for the 2010 Art for AIDS Auction, to be held at the Best Western Glengarry Hotel in Truro on June 14, 2010. The auction will display many pieces of art created by some very talented local artist in the Northern Region of Nova Scotia. The evening will begin with a 6pm viewing and at 7pm the Auction will begin. Also during the evening you can put bids on silent auction items. There will be snacks/cash bar provided and the auction will promise to be a fun filled night so come and enjoy. For more information call the office at (902) 895-0931.





RESOURCE LIBRARY

The Resource Library has gone through some major changes. In a quest for more space NACS added two new shelves and rearranged the format to make better use of limited space. NACS has a wide variety of material on sexual health including HIV/AIDS, Hepatitis C and other Sexually Transmitted Infections. In all there are over 10,000 pieces of material in the resource library.

If you want more information on the Northern AIDS Connection Society you can go online to our website @ www.northernaidsconnectionociety.ca or call our office @ (902) 895-0931

Hepatitis C Aware Project

As part of the needs assessment being carried out in Northern NS for the Hep C Aware Project, staff has been conducting Focus Groups with our community partners. We have received a lot of very rich information for the project. This information has been compiled and will be included in the projects' evaluation and asset mapping.

One – on – one interviews are now being conducted with Persons Living with or Affected by the Hepatitis C Virus (HCV). It is sometimes challenging for persons living with or affected by Hep C to feel confident about coming forward because of the discrimination and stigma associated with the virus. However, Persons Living with HCV have experiences and stories to tell, they need to be heard.

Hep C 101 and Tattooing and Piercing power point presentations have been developed and delivered to youth groups and as part of CCA training programs. If you are interested in having a presentation for a group please contact the NACS office. Expanding awareness of HCV is part of the process of deconstructing stigma, discrimination in our communities.

If you or someone you know are Living With or Affected by the Hepatitis C Virus, become a key part of this project by contacting Janet MacPhee with the Northern AIDS Connection Society by phone 1-902-895-0931 or toll free 1-866-940-2437 email hepcordintor@eastlink.ca . One way to influence change and ensure the continued, knowledge, awareness and support for persons living with HCV is by becoming involved and voicing your concerns and opinions. No personal information will be included in the project your information will be kept confidential.

Health News

Medications – GI Problems are the usual with antiretroviral medications. There are many things that you can do to minimize the side effects of medication.

- Take correct dose of medication at regular time intervals.
- Take medications with food or after a meal.
- Medications that are to be taken on an empty stomach can be taken with a light snack until body adjusts 8-9 weeks.

If symptoms are apparent for extended period of time see your doctor. Your doctor will need to rule out other causes for GI problems. Quite often people HIV have GI problems even without meds.

Treatment of GI problems

- 1500 mg oat fiber twice daily
- Supplements like Metamucil
- Pancreatic digestive enzymes (prescription needed)
- Anti motility agents such as Imodium to control diarrhea



GETTING STARTED ON TREATMENT by Bette MacAloney

My first appointment was in early April 2005 with an internal medicine doctor who determined what should be done about my Hepatitis C. The next appointment was in May for a liver biopsy with a follow up for the results in June. My liver had some damage and I was advised about treatment for Hepatitis C. Before going ahead with treatment, I was given a prescription for blood work. The next day, I went to the hospital lab to get this done and was informed that the results would be at least six to eight weeks. By August, I had not been notified about the result and I began to think something must be wrong. I called the doctors' office several times during the month of August and spoke only with the secretary. She let me know that I would be notified if there was something wrong when they receive the result. In early September, I had not been notified yet and I asked my family doctor if he could refer me to another specialist. He referred a liver specialist in Halifax.

By October, I received an appointment notice in the mail with instructions to see a nurse practitioner at QE11 Health Sciences Center. I thought this notice must be a mistake because this was not the same doctors' name that my family doctor had mentioned. I phoned the hospital to confirm and everything was correct. At this appointment, my husband and I met with the nurse practitioner who specializes in Hepatology and also with the doctor who was the liver specialist. I will be seeing the nurse practitioner at appointments throughout my treatment. The doctor explained to us in detail about my liver condition. I have cirrhosis and the treatment for Hepatitis C was necessary but was my choice. The length of treatment would be 48 weeks beginning in January 2006. When I left the hospital

that day, my mind was overloaded with information but I tried to keep a positive attitude that I could get through this. My husband was very supportive and willing to anything he could to help. Christmas 2005 was a blur and more testing began at the Truro hospital in early January 2006. Treatment began as scheduled January 9th.

In the first weeks, I didn't feel like doing anything only resting. My energy was low and I felt as if my legs had exercise weights on them. After the first month, I could manage to do some of my household chores such as loading the dishwasher, doing a small amount of laundry and preparing the supper meal. This kept my day busy for me although I took many rest breaks. Even though I rested as needed, my energy was spent by late afternoon. In the evening, all I could do was rest. Instructions from the beginning included drinking plenty of water, 8 to 10 glasses a day. I didn't know how I could possibly get in that amount so I measured the water into a container holding this amount. Most days, the water was gone by 3:00 P.M. Drinking water helped me with dry mouth, irritated throat and the bad taste left from food. I soon learned that the water had to be consumed at room temperature due to the coldness of my hands and feet. Refrigerated water only made the coldness feel worse. It was comforting for me to know that I could phone the hospital with any questions I might have about treatment.

