



# The Positive Side

A QUARTERLY PUBLICATION OF POSITIVE WOMEN'S NETWORK | VOLUME 18 NUMBER 1 | JAN FEB MAR 2010

## Discovering the Healing Power of Running

*Welcome them or hate the idea of them, the Winter Olympics will soon take place in BC and we'll hear about little else for weeks. Rather than ignore the events, we decided to make this issue about HIV+ athletes: the joys, challenges, and get-up-and-go of being active. It can improve your health and your outlook: jump in!*

By Kath Webster

My great discovery of 2009 was RUNNING. It started in February when my friend who has been living with multiple cancers for over a decade announced she would train for the Sun Run. Inspired by her, I decided to give it a try but had no intention of actually doing the Sun Run. "Who wants to run through the streets of Vancouver with a huge crowd of 50,000 maniacs? How ridiculous is that?" I later ate those words...

Once I started running it didn't take long to catch the bug. Maybe it was partly about proving to myself that I am indeed healthy despite living with HIV for the past two decades. My AIDS diagnosis was in 1995 when my CD4 count hit rock bottom and I developed serious opportunistic infections. It took a few years but thanks to HIV meds and self care as my priority, my health improved and I had the energy to exercise.

I followed the Sun Run training plan and lo and behold - it worked! I

started with 1 minute segments of running alternating with walking. Gradually over 12 weeks I was able to build up to 60 minutes of solid running! I ran every other day wherever I happened to be: East Van streets, gym treadmills, muddy trails at Trout Lake, pathways of Stanley Park, desert hills near Spence's Bridge, along the coastline of Pender Harbour and even a segment of the TransCanada trail. I became obsessed with the topic of running. I got tips



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Kath Webster at the Sun Run 2009

## Power of Running ... cont

from magazines, websites and the many runners whose paths I crossed.

Getting out the door and the first 5 minutes are the hardest part of running for me. By the end I'm usually beaming with happiness and joy. I get feelings of well being, elation, and strength in my body, mind and spirit. Stress and tension are dissolved. I sometimes imagine the chemical

*Getting out the door and the first 5 minutes are the hardest part of running for me. By the end I'm usually beaming with happiness and joy.*

toxins from my pills being released via sweat through my pores. It feels like a physical and emotional cleanse. Running reinforces in me that I am healthy and fit. In a sense, it helps me shift my identity away from that of a person

limited by HIV to a person who has power, confidence, passion, resilience, creativity and love of nature. HIV falls into the background. With my wide stride, I leave it in the dust.

As the Sun Run approached I finally decided to do it as a celebration of my achievement. "Why run 10 km through the city with a huge mob? Because I can!" I checked the weather, put on my lucky socks, packed some high energy snacks and set off for the start line. I pushed myself and completed the run in 68 minutes and placed 20,328th. OK, that leaves LOTS of room for improvement but hey, it's my personal best that counts!

Registering for an organized run is a great motivator for me. After the Sun Run, I signed up for the 5 Peaks Trail Run on Burnaby Mountain. Little did I know that the last kilometre was the extremely steep and gruelling Cardiac Hill. Again, I felt a huge accomplishment by completing this run.

Summer turned to fall and with it the rains

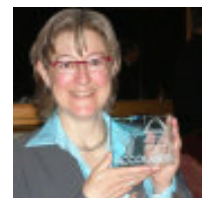
came. I subconsciously protested the changing season and didn't run for weeks. Instead, for much of October I became a sedentary film festival fanatic. Many bags of popcorn later, I realized that in order to maintain the gains I had made, I would have to succumb to either running in the gym or in the rain, neither my favourite. So, I upgraded my rain gear and got outside. I must say, running buddies make a big difference too. Hooray for Butch the dog!

My latest passion is running on the North Shore trails. Rivers and streams are flowing full and the rushing water inspires me as I run up and downstream and cross over bridges. The rainforest brims with life and provides a spiritual quality that I just don't get from road running in the city. A few years ago at a PWN retreat on Cowichan Lake, I went on a forest walk led by a local Aboriginal woman. She spoke of indigenous plants and the healing power of the forest which really struck me. She explained that simply being in the forest is healing in itself. The forest is so much more than the sum of its parts. It is an abundant living entity from tree top to forest floor, providing us with pure oxygen and life. This idea of the forest having a healing power brings a deeper meaning to me when running in the woods. I feel more connected to myself and so grateful for being alive and healthy.

My discovery of running started by taking the first step, as do all new ventures in life. I wonder what my next discovery will be!

For information on the Sun Run go to [www.sunrun.com](http://www.sunrun.com) and for trail running see [www.5peaks.com](http://www.5peaks.com).

*Editor's Note – her first Sun Run didn't stop Kath from going on that night to win an AccolAIDS award in the Kevin Brown PWA Hero category. There really is power in running!*



## HIV, Athletes and the World of Sport

By Miriam Martin

There seem to be people who were born to play sports. These are the people who thrive on pushing their physical limits, setting and breaking personal goals and challenging the records of others. These are the people who live for their daily training or team practice. For those who struggle to keep fit, the dedication of these people can be daunting, but it can also be an inspiration. These are the people we call Athletes.

Everybody benefits from and is encouraged to take part in some kind of physical activity or sport. For people living with HIV, the health benefits of regular exercise are quite clear while there are personal and interpersonal gains to be made from competing for personal best, against other competitors, or as a member of a team. But for HIV positive athletes and activists, breaking into the world of sport has been an enormous task, complete with its own history and challenges.

We have come a long way since 1992 when **Magic Johnson** thought he had to retire from the basketball court for fear of infecting other players. While the world of sport is far from free of prejudice and stigma against HIV, most countries now have laws to protect the right to participate without sharing your HIV status, and universal precautions are widely enforced for dealing with blood injuries. There is also a broad commitment, at least in word, from the international sport community to address and combat the spread of HIV. With the Vancouver 2010 Olympics on everybody's minds, we thought we would

**The first known former professional athlete to die from AIDS-related illness was NFL quarterback Jerry Sanford Smith. He played for the Washington Redskins from 1965-1977 and passed away on October 15, 1986.<sup>10</sup>**

take a moment to look at some of these issues, and to recognize a number of high profile HIV positive athletes.

### The HIV+ Athlete

There are numerous physical, psychological and emotional benefits to participating in sports. Moderate exercise contributes to improved overall health and can strengthen the immune system. A stronger immune system and better overall fitness help the body to fight HIV and may delay the onset of AIDS.<sup>1</sup> Many people find a sense of community in sports teams and leagues and gain confidence by competing. Athletes, especially competitive and professional ones, are also role models and community spokespeople. The participation of HIV positive athletes throughout the sports community is key to educating the public, reducing stigma and getting out the prevention message.

That being said, it is the right of athletes not to disclose their HIV status. There is no reason to fear infecting someone or becoming infected with HIV on the sports field, since the virus cannot be transmitted through casual contact, sharing sports equipment or sharing the same bathroom facilities. It is not transmitted through sweat or saliva, or by swimming in a pool with someone who is HIV positive.

Because transmission is theoretically possible in a bloody collision where both athletes have open wounds or lesions, people living with HIV have been discouraged from participating in boxing and wrestling. One athlete whose experience has challenged the exclusion of people living with HIV from contact sports is **Tommy Morrison**. Known as the Great White Hope,

## HIV and Sport ... cont

Tommy captured the 1995 heavyweight title in boxing. After a routine drug test, he was informed that he was HIV positive and was banned from participating in the sport.<sup>2</sup> He claimed years later that the test had been a false positive and he was reinstated, but his case raised questions about whether he should have been banned in the first place. If he had tested positive in another setting, he might have exercised his right to non-disclosure, and we know that there are thousands of people who have HIV and do not know it. What if one of these people has a bloody collision on the sports field?

### Universal Precautions

The answer to this “what if?” question is universal precautions, which are now the standard response to blood-injuries in sport. This means that any time blood is spilled, it is assumed that the athlete may be HIV positive and he or she is sent off the field until the bleeding has stopped. Universal precautions, which should also be required and enforced in other public settings, include: using medical gloves, immediately covering wounds, washing hands with soap and water, using appropriate disinfectant, and the removal and proper handling of garments and equipment that come into contact with blood. HIV may come with the most stigma, but there are other blood-borne illnesses that can also be prevented using universal precautions, like Hepatitis B and C, which are more common and more easily transmitted than HIV.



### Zero-Tolerance for Discrimination

Despite the right to non-disclosure and the standardization of universal precautions, many athletes still face discrimination if their positive status becomes known. As recently as 2004, Cirque du Soleil gymnast **Matthew Cusick** was fired when the organization found out he was HIV positive. With the support of the gay rights community, he sued his employer and won an unprecedented \$600,000 legal settlement. It

**Rudy Galindo skated pairs with Kristi Yamaguchi in the late 1980s. In 1996, he was the oldest man in fifty years to win the men’s title at the U.S. Figure Skating Championships. In that same year, he won bronze at the World Championships and was diagnosed with HIV. He continued to skate professionally with the Champions On Ice show until it went out of business in 2007.<sup>3</sup>**

must have been a learning experience for Cirque du Soleil who then adopted a zero-tolerance policy and started conducting anti-discrimination seminars for employees.<sup>2</sup>

### Sports and HIV Prevention

International sporting events are a fantastic opportunity to get condoms and a safer sex message into the hands of young people. It has been found that people involved in competitive sports engage more frequently than the population overall in activities that put them at risk for contracting HIV: casual sex, drinking and using drugs. The International Olympic Committee

(IOC) accepted these facts and adopted their Policy on HIV & AIDS Prevention Through Sport in 2004.<sup>1</sup> Meanwhile, free condoms have been distributed to athletes at every Olympic Games since Barcelona 1992. As one UNAIDS China spokesperson so eloquently expressed before the 2008 Beijing Olympics, “there are many young, strong, single people in the athletes’ village and, like everywhere, some will fall in love or other things”.<sup>4</sup> Apparently, 70,000 condoms were quickly used up at the 2000 Olympics in Sydney and another 20,000 had to be brought in. 100,000 were distributed at Salt Lake City 2002, 130,000 at Athens 2004 and Beijing authorities distributed a whopping 400,000 throughout the city, 100,000 of them for athletes. The visibility of a safer sex message and availability of condoms at large, high-profile sporting events has the power to reduce HIV transmission and save lives.

### Gay Games

It would be impossible to discuss HIV positive athletes without mentioning **Dr. Tom Waddell**. He was an all-around sportsman who participated in everything from football to gymnastics. He was also a medical doctor who served in the military, researched viruses and worked in a local San Francisco clinic that still bears his name. He represented the U.S.A. in decathlon at the 1968 Summer Olympics and came in 6th place. Despite this fact, he was sued by the United States Olympic Committee in 1982 for using the name “Gay Olympics” when he founded the hugely successful international sporting event that is now the Gay Games.<sup>5</sup> He was HIV positive and died in 1987.

The Federation of Gay Games has brought the issues facing athletes living with HIV into the spotlight on several occasions. Despite some

backlash from the conservative right, the entry ban for HIV positive foreigners was lifted for participants and spectators at both the 2006 Chicago Gaymes (as the VIIth Gay Games came to be known) and the 1994 Gay Games in New York. Another important awareness issue for the upcoming 2010 Gay Games (July 31-August 7 in Cologne, Germany) regards drug-testing and anti-doping rules. People living with HIV have always

**Robert McCall won the bronze medal for Canada, skating with Tracy Wilson at the 1988 Olympics. He passed away in 1991 of AIDS-related illness. The Wilson and McCall team is a Member of the Order of Canada.<sup>11</sup>**

been included in the Games and while the Federation plans to expand drug testing, they have committed to do so in a way that respects doctor-prescribed drug regimens which may include, for example, steroids to reduce facial wasting or to treat depression.

### Tennis and Activism

Another hero of the HIV positive sports world is **Arthur Ashe Jr.** A professional tennis player, he won three Grand Slam titles and despite exceptional physical fitness, suffered a heart attack in 1979. This shocked Ashe and the world, and drew attention to the fact that heart disease can be hereditary. He underwent two major heart surgeries and learned in 1988 that he had contracted HIV during a blood transfusion. Before his death in 1993 due to AID-related illness, he founded the Arthur Ashe Institute for Urban Health<sup>6</sup>, which continues to be dedicated to universal healthcare and works to improve access for the most vulnerable populations in U.S. urban centres<sup>7</sup>.

## HIV and Sport ... cont

### Greatest Diver of All Time

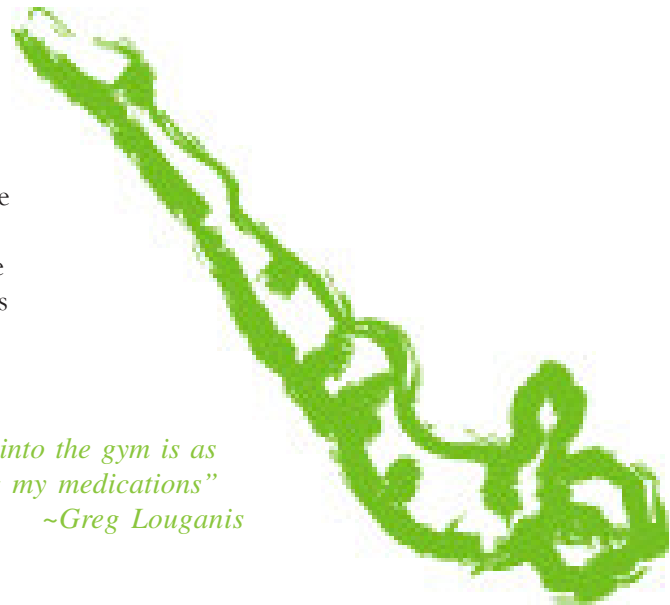
One of the highest profile and most outspoken HIV positive athletes is diver **Greg Louganis**. In total, he won an unprecedented 47 national titles during his career and swept the diving events, winning gold in both springboard and platform diving at both the 1984 and 1988 Summer Olympics. It is widely accepted that he would also have won in both competitions at the 1980 Olympics in Moscow, if the U.S. boycott hadn't kept him from participating.<sup>8</sup> At the 1988 Olympics, he hit his head on the board and suffered a concussion during the preliminaries. He received several stitches and having recovered enough to compete, he won the gold medal. In his book *Breaking the Surface*, Louganis describes feelings of embarrassment and fear because he knew at the time that he was HIV positive and on the advice of his friends, did not disclose his status.<sup>2</sup> When he did go public in 1995, he became an instant advocate for HIV positive athletes.

For Louganis, who spoke in the Opening Ceremonies of the 2006 Gay Games in Chicago, sports and exercise are part of his treatment regime. "I feel that getting into the gym is as important as taking my medications", he told one reporter during the Games.<sup>9</sup> Referring to people living with HIV, he adds, "What I find is that the ones who have other things going on in their lives are the ones that survive longer because they're involved with living".

*"I feel that getting into the gym is as important as taking my medications"*  
~Greg Louganis

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## Getting a Move On: Exercise For Mood, Mind and Body

By Janet Madsen

Mention the word exercise and it might prompt a smile or a groan. Sure, we all know that exercise is good for us. But does that really help get it done? Not necessarily. Some people are very disciplined about doing their workout (and call it that), but there are those who find a rigid time and activity schedule doesn't fit for our lives. The good news is that exercise can take many forms, and you can always improve your health step by step.

Some people will jokingly ask, why bother? One simple answer is it will make you feel better. Strenuous exercise boosts chemicals in the brain called endorphins,<sup>1</sup> which can produce the "runner's high". But even a good long walk can produce a change in your body, which can help to reduce stress and anxiety. Regular exercise can also improve sleep patterns, helping with fatigue. Not a bad place to be in when you're making decisions about HIV treatments or disclosure.

On top of making you feel better, regular exercise can improve immune function. This doesn't require marathons to achieve.<sup>2</sup> The idea that strenuous exercise is the only way to go is turning out to be false—it's *regular* activity that counts. Walking for 20 minutes a day (in 10 minute segments, if you want) can help in improving health.<sup>3</sup>

### How Much is Enough?

It's true that you don't need to bike across town to enjoy benefits of exercise. Simple walking can help to improve fitness, flexibility, cardiovascular health, and strength. But there are lots of things you can do. For flexibility, try yoga. For strength, try simple resistance exercise for your major muscle groups in your arms and legs and

core.<sup>4</sup> For cardiovascular, try brisk walking, a walk/run combination, swimming, biking, hiking. Get moving 3-4 times a week and you'll see improvements.

Cardiovascular exercise (the huffing and puffing kind) can bring us back to the enjoyment of moving our bodies. When we were kids, running, jumping, climbing, and moving in many ways was not necessarily organized into a "sport"; it was just being ourselves. Revisit that place of enjoyment. The old Nike slogan, "Just Do It" comes to mind. Do what makes you feel that freedom again.

For some of us, running around as kids also helped us deal with the puzzles and pains of growing up, even if we didn't realize it. Exercise can still help us in this way. Nobel Prize winning Physicist Wolfgang Ketterle says his runs "Don't solve problems, but running helps me to look at problems from a different perspective. It helps you to loosen up and relax. If you felt so strongly about something or if you are disappointed by it, then when you are running, you feel that there is more in the world than the problem that overwhelmed you."<sup>5</sup>

### Check with Your Doctor, but Don't Wait to Start

It's good to check with your doctor before starting any strenuous exercise program like training for a half marathon. But of course you can get out and walk while you're waiting for your appointment! Going for a walk daily is a great start to getting more of a move on.

As with your HIV specific care, your doctor is your ally. It's normal to feel some muscle soreness as you increase your activity levels because your muscles are adjusting to new demands. That

## Getting a Move On ... cont

doesn't need a doc's visit. But if you feel sharp, shooting pain when you're doing something, stop and take a rest. If it still hurts when you start to exercise again, stop for the day. If it continues to hurt at the same level or worse a day or two after exercise, slow down your routine and check with your doctor. In the long run, you want to keep at exercise, and sometimes that means taking recovery time if you get injured.

### Exercise Doesn't Have to Be Expensive

You don't need money to move. Walk. If you have runners, run. For those on limited incomes, Parks and Recreations facilities around the province usually offer Leisure Access programs that allow you to swim, skate and take classes free and/or at very discounted rates. Contact your local community centre for details.

### Find Something About Exercise You Like, Even if it's not the Exercise itself

Getting started can be difficult if you're someone who "hates to exercise". But isn't there something you can find to like about it? Do something with a friend. Do it a time that is special to you. Tell yourself you're strong. Smell the air. Feel your heart pounding strongly as it pumps blood through your body. Feel your muscles and spine stretch. Focussing on the experiences of the moment can help you to really experience how it feels to move, changing the way you feel about exercise itself.

Being better in touch with your body can help in your HIV care too. Knowing what feels "right" can help when things aren't. It can make you better at knowing when to take a break from too many commitments, and better at communi-

cating with your doctor. And that's all good for your health overall.

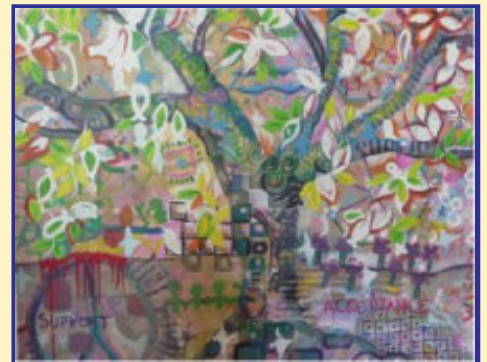
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## Women, Empowerment & Building Resilience

**28 women attended the October 2009 PWN retreat at the Bowen Lodge by the Sea on Bowen Island and what fun we had! In addition to laughter yoga, belly dancing, massage and body work, professional facilitators presented on traditional and complementary therapies. A new and special highlight this fall was an interactive painting workshop that resulted in a beautiful mural with the theme "Women Empowerment and Building Resilience".**

*"I realize just how important it is to be supported by other poz women."*



## Ouch! Natural Options for Post-workout Pain

By Janet Madsen

Exercise is good for you, but it can also cause some strain and pain. When you run, bike, swim, lift weights or do other strenuous exercise, you can cause tiny tears in your muscles. This situation is better than it sounds, because your body goes to work to repair them, creating more strength than you had before. This is why recovery days are so important—your body's hard at work repairing and rebuilding when you're resting.

It might take a day or even two to experience discomfort. This is called delayed onset muscle soreness (DOMS). It indicates you've overworked the current level of your muscles' ability. Experiencing those aches and pains can be uncomfortable. There are standard treatments like acetaminophen for pain or ibuprofen for inflammation, but there are some natural alternatives too.

**Arnica** cream or ointment<sup>1</sup> can stave off or ease muscle soreness and inflammation right after your exercise. Massage it onto tender areas several times a day. Arnica is available in most natural food stores.

Take an **ice bath**, or as cold a bath as you can bear<sup>2</sup> right after a hard session. When you've been exercising hard, ice or cold water can ease some of the inflammation of the muscles. Immerse the body parts that have borne the brunt of exercise. Obviously, this one requires some willpower, but make it as cold as you can bear.

**Epsom salts**<sup>3</sup>: Soak in a warm tub with a couple of cups of Epsom salts (and a drop or two of an essential oil if you'd like a perfumed bath). Epsom salts draw the inflammation out of the muscles to ease soreness. Don't use this remedy right after exercising, as heat can increase inflammation and soreness. This is one to save for the day after a strenuous session (and your ice bath!)

**Yoga**<sup>4</sup> can help to increase flexibility and focus, decrease stress and aid in recovery. Just make sure you don't overdo it when you're on a recovery day.

Love that **cherry juice**: A recent study out of the Oregon Health and Science University found that cherry juice<sup>5</sup> could ease post-exercise pain experienced by long distance runners. If it works for them....



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**Note:** As with any of the health related information you find in our publications, it cannot replace the care you received from your doctor and other health care providers. These articles for information only.

## Hepatitis C and HIV Together

*A presentation by Evelyn Maan, Research Program Manager at Oaktree Clinic*

The liver is a vital organ with a wide range of functions, a few of which are: detoxification, making blood proteins, and producing biochemicals necessary for digestion. The liver is located below your lungs on the right side of your body. It is necessary for survival and there is currently no way to compensate for the absence of liver function.

Hepatitis C is a virus which is spread by contact with infected blood. Sexual transmission of HCV is considered to be rare. There are more than twenty different kinds of HCV, but two main ones in North America. Recent studies suggest that HCV may survive on environmental surfaces at room temperature for at least 16 hours, but no longer than 4 days.

People with HIV are living longer than ever before. This gives time for other health conditions to emerge, and for people living with both HIV & HCV, liver disease has become an important cause of illness and hospitalization.

### HIV's effect on HCV

- Some studies indicate that HIV-HCV co-infected patients have higher HCV viral loads and experience more rapid progression of liver disease than those with HCV alone.
- There is conflicting information regarding whether HIV meds slow the rate of liver disease or if they actually cause some liver side effects.
- When the immune system is very weak from HIV (high viral load & low CD4), it is hard to control the replication of HCV.



### HCV's effect on HIV

- The ways in which HCV may affect HIV disease progression are not known, but some researchers have argued that HIV disease is accelerated by HCV-related immune activation (over working of the immune system) and slowed recovery of the immune system after starting HIV therapy.
- Others have suggested that when taking effective HIV therapy, HCV co-infection does not cause HIV disease to progress faster.

In both cases more research is needed ...

There are a variety of potential causes of liver damage in HIV-HCV coinfecting patients:

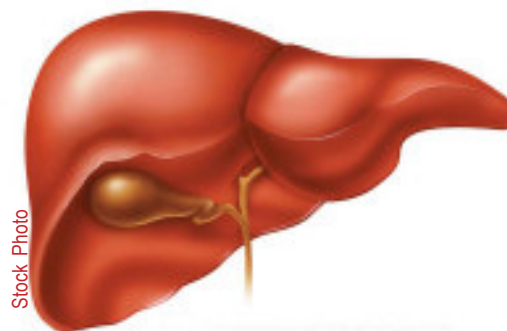
- Pre-existing liver disease (e.g. hepatitis B or hepatitis D)
- Heavy alcohol use
- HIV-related opportunistic infections (e.g., Mycobacterium avium complex (MAC))
- Nonalcoholic steatohepatitis (NASH), which is characterized by fat in the liver with inflammation and damage. The cause of NASH is still not clear and it can occur without any apparent risk factor and can even occur in children.
- Toxicity related to drugs used to treat HIV and its complications.
- Infection related damage of the bile ducts in patients with CD4 cell counts below 100 cells/mm<sup>3</sup>.



## Treating HCV & HIV

**If someone meets the guidelines for HIV treatment their HIV should be treated first. Leaving HIV untreated for 6 to 12 months could have serious consequences in this case.**

**Sometimes HCV should be treated first. If HIV doesn't need to be treated yet (if CD4 cell counts are high enough, and HIV viral load is low enough), it's a good idea to treat HCV first. Then the liver can be in better condition to deal with HIV drugs.**



COMING SOON TO HCV:  
NEW MEDS ARE IN DEVELOPMENT THAT  
MAY INCREASE CURE RATES.  
A METHOD OF SCANNING THE LIVER  
THAT DOES NOT REQUIRE NEEDLES.

## World AIDS Day Condom Campaign

It's hard for us to imagine, but sometimes the public forgets that condoms are about more than just birth control. On World AIDS Day, December 1<sup>st</sup> 2009, twelve PWN volunteers hit the streets with 2800 free condoms and a simple message: "Latex condoms, when used consistently and correctly, are highly effective at preventing the sexual transmission of HIV, the virus that causes AIDS." Information cards with fun trivia questions and a condom attached were distributed at busy Vancouver transit hubs and in various Davie St businesses for the day. In addition to our hardworking individual volunteers, a very warm Thank You goes out to the groups and businesses that supported the campaign:

-  Bang-On T-shirts (Davie St.)
-  Book Warehouse (Davie St.)
-  Cottonmouth Smoke Shop
-  Gamma Phi Beta Sorority (UBC)
-  Homewerx (Davie St.)
-  Love's Touch
-  Sacred Heart Tatoo (3 locations)
-  Shoppers Drug Mart (Davie St.)
-  The Dish
-  Ultra Love



## Events and Program Information

	MON	TUE	WED	THU	FRI
<b>drop-in</b>	<b>11:30-3:30</b>	<b>11:30-3:30</b>	<b>11:30-3:30</b>	<b>11:30-3:30</b>	-----
<b>lunch</b>	-----	<b>12:00-2:00</b>	----	-----	-----
<b>office</b>	<b>9:00-4:00</b>	<b>9:00-4:00</b>	<b>9:00-4:00</b>	<b>9:00-4:00</b>	<b>9:00-4:00</b>

### SpringBoard 2010

This year's SpringBoard conference will look at "the confines of health", with a focus on women in prisons.

**Thursday April 22, 4pm- 8pm**  
**Century Plaza Hotel**  
**1015 Burrard St, Vancouver**

More information will follow in the next newsletter and online at [www.pwn.bc.ca](http://www.pwn.bc.ca).

For more information, contact [janetm@pwn.bc.ca](mailto:janetm@pwn.bc.ca)

### [www.YouShouldKnow.ca](http://www.YouShouldKnow.ca)

PWN is thrilled to announce the launch of You Should Know – a sexual health website dedicated to women over 40. Our very own Janet Madsen has been writing like mad to get out the best women's sexual health and prevention information available on the world wide web! Visit [www.youshouldknow.ca](http://www.youshouldknow.ca) and pass it on to the women you know.

### Post-Holiday Lunch

The post-holiday lunch for PWN members will be taking place on **Tuesday, January 19, 2010** from **12pm to 2pm**, at **Century Plaza Hotel** on **Burrard St.** (next to St. Paul's Hospital). Join us for **FOOD, GIFTS and FUN!** It's also a chance to acknowledge the work of our volunteers. **RSVP to PWN at 604-692-3000.** Hope to see you there!

### Thank You RBC!

The Royal Bank of Canada has agreed to sponsor our Wellness Workshop Series, which will deal with wellness and complementary therapies for women living with HIV. Thanks to a generous donation from RBC, we will be exploring complementary therapies such as reflexology, cranio-sacral therapy, traditional Chinese medicine, and much much more. Stay tuned for details.

### PWN & the Olympics

PWN has been advised that from **February 4- 28**, there will be road closures, ongoing delays and increased traffic into downtown Vancouver due to the Olympics. The PWN drop-in and office will be operating at reduced hours during that time. **Please phone PWN before you come**, if at all possible. Outreach Support services outside of the downtown core will continue. Watch for more details to come.



## Events and Program Information

### PWN's Plastic Bag Initiative

What do Tanzania, Kenya, Uganda, China, Australia, Ireland, South Africa, major cities in India and Bangladesh and a growing number of towns in the United Kingdom and North America have in common?

These countries and cities have taken official actions to restrict the use of plastic shopping bags; some have banned them and some have imposed steep taxes on them.

**Did you know...** Plastic bags start as crude oil, natural gas, or other petrochemical derivatives, which are transformed into chains of hydrogen and carbon molecules known as polymers or polymer resin. After being heated, shaped, and cooled, the plastic is ready to be flattened, sealed, punched, or printed on.

Why do we need to stop using plastic bags? Environmental concerns! Most of the reasons given for reducing bag use have to do with their sheer volume and long-term persistence. The Washington-based Worldwatch Institute estimates that 500 billion plastic shopping bags are distributed and discarded every year, each of which can take up to 1,000 years to break down (Clapp, Globe and Mail 2008).

Although Canada has yet to ban plastic bags, at Positive Women's Network, we want to do our part to reduce, reuse and recycle.

**We have started a Plastic Bag Initiative – when you bring a reusable bag to collect groceries at our Food Bank, you get a point. Four points gets you a prize!**

If you don't access PWN's food bank, here are some simple things you can do in your community to help this cause:

- Think twice about taking a plastic bag if your purchase is small and easy to carry.
- Keep canvas bags in your home, office, and car so you always have them available when you go to the supermarket or other stores.
- Ask your favourite stores to stop providing bags for free, or to offer a discount for not using the bags.
- Encourage your local politicians to introduce legislation taxing or banning plastic bags.
- The protection of the environment is everyone's concern. Thanks for doing your part!

*“When we heal the earth, we heal ourselves.” ~David Orr*

## connect with us

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**Positive Women's Network**, a partnership of women living with and affected by HIV/AIDS, supports women in making informed choices about HIV/AIDS and health. We provide safe access to support and education/prevention for women in communities throughout British Columbia. The Positive Women's Network provides leadership and advocacy around women's HIV/AIDS health and social issues in the national and local health care communities.

**Thanks to our Supporters!**

The work of Positive Women's Network is made possible by grants from the **Provincial Health Services Authority of BC**, the **Public Health Agency of Canada/AIDS Community Action Program**, and **BC Gaming & Enforcement**, as well as the following sponsors:



**Abbott Virology** is the exclusive pharmaceutical Sponsor of SpringBoard.



**BC Hydrex** for keeping our drop-in well-furnished.



**Bristol-Myers Squibb** for sponsoring our upcoming Positive Players pocket guide.



**Merck Frosst Canada Ltd.** for supporting our food program.



**RBC Foundation** for supporting our Wellness Workshop Series.



**Vancouver Foundation** for sponsoring Leadership, Engagement, Action and Dialogue (LEAD).



Our portable housing subsidies and food program made possible by support from **Shooting Stars Foundation**.

**DISCLAIMER**

The information herein cannot replace the information provided by a medical professional. In using this material, the user acknowledges these limitations and does not hold Positive Women's Network or its funders liable for any damages, costs or consequences that may result from use of this material.

Unless otherwise noted, all materials and graphics in this newsletter are written and produced by the PWN Health Promotion Team (janetm@pwn.bc.ca).