

PSMP GRADUATES REUNION 22ND OCTOBER



The afternoon started when Lydia, pictured here enjoying an orange as she converses with Edith, arrived bringing in provisions for our buffet. The weather held fine and we laid out a selection of food. Those who attended the Positive Self Management Program graduates reunion were jovial, warm and friendly. We chatted to each other in the informal atmosphere, relaxed and learned how things had improved for us as a result of the confidence we'd built on the program. Our next PSMP course will be running in the New

Year, if you would like to put your name down to enrol on the course please call the office. There are still a few places left.

PSMP is a course not to be missed - you'll benefit so much from the experience that you'll wonder why you didn't do it before.

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EDITORIAL



Hi Folks!

The most exciting US Presidential election ever has now been won and I've no doubt many of you will be very satisfied that Barack Hussein Obama will be entering the White House on January 20th. I mention this because many of our readers hail from African stock and the next Leader of the Free World, who was born there will have some effect on all our lives.

London will host **World Pride** in 2012. Boris Johnson said, "I'm absolutely thrilled." This 2 week event will bring an extra million visitors.

In our summer issue you read "A Time of Hope" an encouraging story from one of our readers. I'm delighted to tell you that this inspired another lady to make a contribution which you can read on page 4 of this issue. Thank You. Perhaps during the December holidays one of our male readers will find time to let me have another perspective.

It is very important to us that you **complete the questionnaire** enclosed with this issue and return it to us. Please do it now lest you later forget, it'll only take a few minutes and a stamp. Your input is needed. Thanks!

The hardest part of goodwill messaging in our country today is being inclusive. With such diversity in our population where some have just finished Ramadan others are about to commence their Christmas, Buddhists have many different festivals with the The Elephant Festival in November. The Scottish people will celebrate the New Year. Whatever you're celebrating my spirit joins in your celebration and I wish you Good Health and Happiness in all your foreseeable future.

Jain

DO YOUR VIEWS COUNT?

After conducting 3 surveys in an attempt to find out what people living with HIV and AIDS are concerned about the following are the findings.

Your most important concerns were about the level of complaints that people had with the National Health Service (NHS) in general. This was at complete variance with my own experiences at both the Caldecote Clinic at the Kings College Hospital for over 20 years and the Trafalgar Clinic at the Queen Elizabeth Hospital during the last five years.

Complaint will vary according to the level of tolerance of the individual making it. However the allegations about lack of awareness of issues directly affecting people who have been diagnosed with the HIV by NHS staff including doctors struck me as being appalling.

It could reasonably be supposed that with the extra funding that has gone to the National Health Service together with the amount of information that is readily available to staff and patients alike, both in the public domain via Positive Nation, NAM etc. and the wealth of leaflets that have been produced by the NHS, that almost everyone working at the front line would at least be aware of the many and varied issues even if they were unable to deal with them themselves.

Whilst it is difficult to isolate individual issues from such a torrent of general complaints and allegations I believe that criminalisation and stigmatisation both run a close second. Both these issues have produced a level of fear and apprehension in the people to whom I've spoken.

In the case of criminalisation the level of concern appears to me to be at variance with the real likelihood of anyone finding themselves falling foul of these laws. It is therefore, in my view, an issue that needs to be addressed with some degree of urgency. Stress is a condition that works against the best interests of people who have been disadvantaged by the HIV and the sooner something is done to address this unnecessary anxiety the better.

These fears of a stigmatisation appeared to manifest themselves more predominantly in those from an African cultural background and within that culture more by women than by men. With respect to many uninfected people, but especially those from African backgrounds, the need for education about the reality of the situation and how their attitude impacts so detrimentally on their peers who are infected is of paramount and urgent importance.

YOUR VIEWS cont.

All these issues can be addressed by targeted education and greater promotion of both the effects and the consequences. Neither the effects nor the consequences have been addressed to date. What has happened is that information has been laid out but its take-up has been left to chance encounters with little done to monitor its effectiveness.

The following are points brought to my attention. NHS

1. By-passes good drugs – due to financial constraints.
2. Disclosure to Dentists breaks confidentiality.
3. Africans with HIV, not fluent in English constantly use different interpreters -thus exposing their status.
4. Giving info to NHS may lead to loss or access to support and if undisclosed may lead to legal action
5. G.P's, Dentists, Health care assistants Paramedics lack knowledge/ education about HIV/AIDS.
6. Clinics see People living with HIV/AIDS (PLWHA) as a number and not as a person.
7. Clinics now asking PLWHA to sign forms about unprotected sex. Reason unclear. Information is kept

STIGMA AND DISCRIMINATION

1. Disclosure important.
2. Black community are prejudiced, homophobic and treat people harshly.
3. Accessing of medication while in detention is becoming complicated and creates stigmatisation
- 4..PLWHA feel they are discriminated in all aspects.
5. African PLWHA; are always labelled as 'those people'
6. PLWHA feel pressured to disclose when filling in forms for employment/ housing/ education and relationships

EDUCATION

1. Older members who were diagnosed were not informed of the benefits of using a condom
2. Felt a need to seek relations, liaisons with positive for positive.
3. Lack of public education.
4. Assume all are positive if seeking bare back sex
5. Counselling/bereavement should be looked into due to cultural differences.

IMMIGRATION & TRAVEL

1. Extra curricular activities for children infected and affected restricted by status
2. Take too long to process applications.
3. African people with HIV & poor English constantly using different interpreters, this exposes their status
4. Length of time individuals are kept waiting for a decision is stressful
5. Can not also plan for their future, laws do not favour PLWHA like those suffering from other diseases, eg cancer

CONCLUSION

These then are the main concerns of a fairly representative cross section of those interviewed who were either infected or affected by HIV in some way.

NEWS IN BRIEF

Partnership To Develop Next Generation Of HIV Vaccines

Elevation Biotech, a start-up biotechnology company, and the International AIDS Vaccine Initiative (IAVI), the world's only global non-profit organization dedicated solely to AIDS vaccine development, have partnered to develop the next generation of AIDS vaccine candidates.

“An AIDS vaccine remains our best hope for ending AIDS. Getting the human immune system to generate antibodies capable of neutralizing HIV remains one of the greatest challenges in the field of AIDS vaccine research and development.

Malawi drops HIV cash hand-outs

Malawian civil servants with HIV, who used to receive an extra \$35 a month to help them buy more food, are now to get a food handout instead because “The money may not be spent on what it's intended it for,” said Mary Shawa.

New findings indicate HIV/AIDS pandemic began c 1900, earlier than previously thought.

[Medicine & Health](http://medicine.physorg.com/) <http://medicine.physorg.com/>

[HIV & AIDS](http://medicine.physorg.com/sub_HIV+~+AIDS/) http://medicine.physorg.com/sub_HIV+~+AIDS/

New research indicates that the most pervasive global strain of HIV began spreading among humans between 1884 and 1924, suggesting that growing urbanization in colonial Africa set the stage for the HIV/AIDS pandemic.

The estimated period of origin, considerably earlier than the previous estimate of 1930, coincides with the establishment and rise of urban centers in west-central Africa where the pandemic HIV strain, HIV-1 group M, emerged. The growth of cities and associated high-risk behaviors may have been the key change that allowed the virus to flourish.

By 1960 a large number of people in this region were infected with HIV, reflected by the considerable amount of genetic diversity of the virus. From there events seeded the epidemic in different parts of the world. By 1981, people started realizing that something was happening and the rest is history.

The research, led by Michael Worobey, an assistant professor of ecology and evolutionary biology at The University of Arizona in Tucson, was co-sponsored by the National Institute of Allergy and Infectious Diseases

MY LIFE EXPERIENCE AS AN HIV+ PERSON

Until three years ago I was a healthy active lady with goals. Ambitions to be a wife, have children and contribute to my community were dashed by the result of a blood test. I'd always used precautions in my sexual activity so finding an HIV+ diagnosis came as a SHOCK. It took doctors a month to find the correct medicines for me.

My depression caused forgetfulness which led to my virus becoming resistant so new drugs had to be added. I learned to take my medication seriously, religiously and on time. These drugs prevented me from working due to their side-effects including daemonic nightmares. I was lucky and had good help from my nurse who supported me mentally, as well as physically until I was strong enough again and got back on my feet.

Being young I became bored and wanted to find something to do with my life. The Harbour Trust offered me a voluntary position where I work once a week. Now I have something to look forward to, a sense of belonging and interaction with people who understand my HIV.

They run a Positive Self Management Program (PSMP) course in which I enrolled. Here I found the courage to attend once each week for the seven-week course where I gained confidence by meeting other like people. On this program I learnt to manage the symptoms, keep active by exercising, understand my mood swings, fatigue and better control my stress levels. I learned to watch

my dietary needs, socialise and make friends with health professionals.

The group work on action plans that helped everyone to overcome areas of weakness by troubleshooting and sharing new ideas. We covered the old and new drugs, how they work, their side-effects and so the course was a huge success for me... it was a leap of life.

Today I'm a different person. I've allocated my HIV to a tiny spot in my life and moved on now aiming to catch my dreams and goals. I attend church to feed my soul and meet friendly people. I've found and put a good man in my life, I socialise with girlfriends some of whom are single others are mothers.

My thirst to do more in my community allowed me to apply for voluntary jobs in charitable organisations like charity shops and I was invited to give a presentation at a training session.

It took courage to stand in front of students and give the story of my life with the HIV. I've gained knowledge of the HIV through reading articles and booklets, from libraries and hospitals and I got a lot of information from the Internet as well as the PSMP. They thanked me for sharing my theoretical knowledge and being a physical positive example of an HIV+ patient. I felt satisfied and worthwhile.

Since living with HIV I've had some bad experiences. When suffering toothache I visited a few dental

practices where they embarrassed me saying loudly, "NO! WE DON'T DEAL WITH HIV PATIENTS HERE!"

My nurse referred me to a dental practice where I was given an appointment the following day... thanks to nurses. On another occasion after leaving hospital the people/family I lived with concluded that my TB - an AIDS related illness - was HIV. The discomfort and verbal abuse caused me to move to another house. Now I'm at peace living alone but with one less stress.

I strongly urge every active individual alive to recognise that HIV and AIDS are real and can infect babies, innocent victims or those who ignore the safer sex information given to them. I remember on the day I was diagnosed what kept haunting me was, "WHY ME?" I've had to learn to live with it, yet move on with my life... as I realised that I have more to give in my community as a normal human being. I'm a deputy in our neighbourhood watch and I'm good at that.

Finally, it only takes effort, one step at a time for everyone to read and understand how chronic illnesses affect/infect people and the symptoms that follow, whether we have been diagnosed or not we shouldn't forget that precautions need to be taken, advice followed as we can't trust anyone even ourselves these days.

Thank you for reading my story I hope it helps to cheer you up a little if you were feeling sad.

CAREERS IN ACTION


Harbour Trust were again invited to participate in this year's Careers in Action They at the Greenwich Heritage Centre.

Lydia and Iain represented us in presenting the Harbour Trust to the school leavers who attended. They saw groups of school leavers who were attentive and showed interest in the work done by the Trust. Some of the boys were interested in the careers in the fire service and the army as the girls expressed desires to be nurses, midwives and one charming young lady told us that she intended to be a dancer.



A future fireman hugs a friend while form-filling.

Our representatives explained to them that there were career opportunities in fundraising, nursing, social working and various aspects of management within the field of HIV/AIDS.

We would like to take this opportunity to thank the Education Business Partnership for the opportunity to help these young people in making decisions about their future and promoting  **harbour trust**

Positive Feedback.

We have recently had an enquiry from one of the students we met at the April Careers in Action day. The young lady has expressed an interest to work in Sexual Health Care Education. Beth, with her knowledge of vocational and academic Health & Social care qualifications will be writing to her in due course with appropriate help and advice on how to achieve her chosen career path.

NEW HIV TESTING

<http://www.avert.org/aidsnews.htm>

Concern over new HIV testing recommendations

September 22, 2008

BHIVA, the British HIV Association, has issued new testing guidelines with the recommendation that all 15-59 year olds in some areas of England should be offered HIV tests by their GP.

In areas where there are more than two HIV cases for every 1,000 people, it is recommended that everyone should be offered a test when they register with a GP. This would mean around 20% of the population would be offered an HIV test.

The idea behind the new guidelines is to try and prevent the problem of late diagnosis. According to Professor Peter Borriello, Director of the Health Protection Agency's Centre for Infections, around a third of the 73,000 people living with HIV in the UK are unaware that they have the infection. Late diagnosis is also the most important factor associated with HIV-related morbidity and mortality in the UK. BHIVA hope that the guidelines will 'normalise' testing and remove stigma.

Whilst efforts to overcome the problem of late diagnosis are generally to be welcomed, AVERT has concerns about these "guidelines" which are recommendations produced by BHIVA, an association that is primarily made up of HIV specific hospital based doctors.

Despite the fact that BHIVA are making recommendations that have significant implications for GPs and other healthcare professionals, it does not appear that these recommendations have been endorsed by any organisations that represents GPs or nurses.

Dr Adrian Palfreeman, author of the guidelines, and a consultant in Leicester said the idea was to "normalise" HIV testing.

"Without earlier diagnosis we will not see the reduction in transmission that we need to see, nor a further fall in serious disease" said, Professor Peter Borriello, HPA

GIVE GENEROUSLY

You know you can make a small donation which will help. To arrange your contribution by giving a regular amount that can really help our worthwhile work

- in cash or through your payroll.
- or by either sending a cheque or
- a direct debit even £1/mth will help us.

Please contact Edith or Beth. Tel 020 8301 8142

Gift Aid



Choose your donation...

the food chain

info@foodchain.org.uk www.foodchain.org.uk

A wonderful charity that delivers food each Sunday of the year to people who are, due to their HIV, in need of this service will be celebrating its 20th anniversary this year. They'll be holding a Carol Service on Tuesday 16th December from 7 p.m. at St Paul's church in Covent Garden. There will be readings from Sheila Hancock and others and you'll be offered wine and mince pies afterwards.

Speed Dating for Gay & Bisexual Men

The North Pole 131 Grenwich High Road SE10 8JA

Starts 7 p.m. sharp on 8th Dec 2008

For Guys to meet Guys

One of the best ways to meet men in south-east London. You can expect between 10 & 15 three-minute dates in a luxurious private room with a friendly and relaxed atmosphere. £5.00 to register.

Ring **Andrew or Jackie** Tel: 020 8305 5000

The **Metrosafe Peer Mentoring Program** has, in partnership with **AHEAD** and, **harbour trust** has recently been awarded three year's funding from the **Kings Fund Partners for Health in London** scheme to develop **Africasafe** and **Harboursafe**, for Heterosexual African men and women and BME men who have sex with men, respectively. We're all very excited to see HIV Prevention Peer Mentoring grow in this way, so watch this space for details. (Click the arrow for **Kings Fund** website and underlined for **AHEAD** and **harbour trust**.)

INFORMATION

where to find out more about hiv

⦿ <http://www.greenwich.gov.uk/Greenwich/HealthSocialCare/HealthMatters/HIVAIDS/VoluntarySectorServices/HarbourTrustContact.htm>

The Harbour Trust is a community HIV charity which supports people living with HIV/AIDS, their carers and families.

⦿ <http://www.metrocentreonline.org/services.htm>

110-114 Norman Road SE10 9JQ The Metro Centre aims to work with self-identified lesbian/gay/bisexual people.

⦿ <http://www.thepositiveplace.org.uk/> 52 Deptford Broadway Deptford SE8 4PH The Positive Place exists to respond to the needs of people who Live in South London & are affected by HIV and AIDS

⦿ i-Base Treatment Phonenumber. An HIV Treatment phonenumber where you can discuss your issues with a treatment expert. 0808 8006 013

⦿ Visit www.aidsmap.com for the latest news about HIV & AIDS and a fully searchable treatments database and a complete list of UK treatment centres

⦿ <http://www.cwac.org/index.htm> Children with AIDS Charity. Specialist Paediatric HIV Service in St Mary's Hospital in Paddington, London.

⦿ <http://www.gaylawyers.co.uk/Default.aspx>

Our understanding lawyers will make you feel as comfortable as possible when contacting us with your legal issues.

harbour trust will be **CLOSED** from Thursday 11th December until Friday 9th Jan 2009 inclusive.

Places that are OPEN 365 Days are:

NAT National Aids Helpline has changed to Adult Sexual Health Advice. Tel 0800 567123

The Samaritans Tel 0845 7909090

Condoms-in-the-post

For free condoms-in-the-post provide us with: Size required, your name and full address, including postcode by:

Tel: 020 8305 5000 Text 'condoms' to 07939314897

H A R B O U R T R U S T

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<http://www.iains-images.co.uk/harbour/index.htm>



1.) In order to minimise our costs and better understand your needs please complete and return the following questionnaire when you complete it.

Please place a ✓ or a X in the appropriate boxes.

<input type="checkbox"/>	a) I will be happy to receive our quarterly newsletter by e-mail?
<input type="checkbox"/>	b) I will be notified by e-mail and access our quarterly newsletter on the website?
<input type="checkbox"/>	c) I will require a copy of our quarterly newsletter by post as I get now?
<input type="checkbox"/>	d) I do not want a copy of the quarterly newsletter at all.

2.) Would you attend an informal Drop-in if we were able to offer space for this?

<input type="checkbox"/>	a) Once each month in the evening?
<input type="checkbox"/>	b) Once each month in the afternoon?
<input type="checkbox"/>	c) Once each week in the evening?
<input type="checkbox"/>	d) Once each week in the afternoon?
<input type="checkbox"/>	e) I would only attend an occasional Drop in.
<input type="checkbox"/>	f) I would not attend a Drop-in at all.

3.) How could we improve the newsletter or make use of our facilities here to make them more relevant, interesting or be better able to meet your needs?

<input type="checkbox"/>	a) Having advertisements?
<input type="checkbox"/>	b) I could volunteer to arrange social events. i.e. Chat & Chill. Bring some food and drink.
<input type="checkbox"/>	c) I could arrange an occasional family afternoon. e.g. You could attend with your children.
<input type="checkbox"/>	d) I would like to see - please state.....

My name is.....

My e-mail address is.....

When completed please return this to: Newsletter Editor, Harbour Trust, Unit 11 START Woolwich, Gunnery Ho., Gunnery Terrace, Woolwich. London. SE18 6SW.

Newsletter can be read and/or downloaded at: <http://harbourtrust.f-sw.com/>

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