

A downside of same-sex law reform

Taken from Positive Living March 2009

Written by Adrian Ogier

With impending social security changes set to adversely affect a good chunk of our community, it's important we look for ways to ease the transition for a group already doing it hard.

If you're living on a Disability Support Pension (DSP) and also living with a partner, Centrelink want to know by 1 July. They will then assess your joint income and assets and adjust your pension payment. By just how much will depend on how much your partner is worth. But as an example, for you to get the maximum current payment of \$562.10 per fortnight they cannot be earning more than \$240 per fortnight.

Welcome to one of the less popular realities of Australian society's recognition of same-sex relationships.

Let's be clear, there are plenty of up-sides. The reforms also mean that you and your partner can claim the same tax concessions currently available to couples of the opposite sex. You qualify for each other's

superannuation benefits. You and your children are recognised as a family. Immigration is easier. There's lots of good stuff.

Unfortunately, these offerings don't mean that much if there's just two of you and you're both on the pension. In fact, together you 'gain to lose' around \$200 a fortnight under the new system. Although you may well benefit from having joint Medicare and PBS safety nets.

It's all swings and roundabouts, and now brings us into line with heterosexual couples who are already assessed under these criteria. But for many individuals and community organisations, the question is whether a same-sex couple, already struggling with major health and financial issues, should be expected to adapt to less.

While many community advocates are still celebrating the reforms, others are asking for at least an 'easing-in' of the changes, particularly when they adversely affect the more marginalised among us.

The hope for a period of adjustment is not likely with the Attorney- General, Robert McClelland, stating that grandfather clauses will not be implemented to protect same-sex couples from social security changes. He believes that the 15 months we have had since the government announced its intention to end discrimination is enough.

Howard's efforts to push DSP

recipients into paid work failed and now PM Kevin Rudd has 45,000 more of them than predicted and a \$3-billion blowout. It's a good thing for him same-sex equal rights came along.

General Manager of Centrelink, Hank Jongen, estimates some 11,000 customers are likely to contact the organisation in the coming financial year to advise they are affected by the changes.

He also explains that 'establishing whether two people are a member of a couple involves consideration of financial aspects, and social aspects of the relationship, nature of the household, presence or absence of a sexual relationship, and nature of the commitment.

'Evidence relating to these factors is considered, although not all factors need to be present for a decision to be made that a person is in a de facto relationship,' he adds.

Other areas of concern include the new laws and their impact on those currently holding Pensioner Concession or Health Care cards.

At the time of going to press, a number of community organisations representing those most affected by these changes have endorsed a submission to the government seeking longer transitional arrangements as well as other savings provisions. NAPWA has endorsed this submission and it can be viewed on our www.napwa.org.au



The Candlelight Memorial 17.05.2009

Interfaith Service All Saints at Ainslie at 5pm and the memorial at the Museum will be held at 7pm. (Further details will be sent out separately)

The International AIDS Candlelight Memorial, a program of the Global Health Council, is one of the oldest and largest grassroots mobilization campaigns for HIV/AIDS awareness in the world. Started in 1983, the Candlelight Memorial takes place every third Sunday in May and is led by a coalition of some 1,200 community organizations in 115 countries hosting local memorials that honor the lost and raise social consciousness about the

disease. The Candlelight is also much more than just a memorial. It provides opportunities for leadership development, policy advocacy, partnerships, and improvement of community mobilization skills. With 33 million people living with HIV today, the Candlelight continues to serve as an important intervention for global solidarity, breaking down barriers, and giving hope to new generations.

Contents

3. Chinwag
4. Its all about balance?
6. Nurse Philip
7. Brenda

As you are all aware, POSITIVELY is a monthly publication for people living with HIV/AIDS in the ACT and surrounding districts. Currently we are looking for people to assist us with the publication e.g. writing groups. No experience is necessary as we will provide training in all aspects of publishing from writing articles through to the printing stage. If you can spare a couple of hours from time to time please drop into the office for a chat or give Marcus a call. Positively is a monthly publication produced within the ACT with funding from the ACT Dept of Health. Submissions for the next edition are due on **Wednesday 13 May** Opinions expressed in this publication do not necessarily reflect those of the editor, publisher, nor PLWHA ACT.

Positive Support Services in the ACT and surrounding areas

People Living With HIV/AIDS ACT

Provides support for HIV+ people in the ACT through a newsletter and links with other PLWHA organisations throughout Australia. We also provide individual support with advocacy and representation on health and other issues, and referral to other agencies. Ph 6257 4985

Positive Support Network

HIV+ people get together to offer support and share information. PSN is mostly a social occasion where people can share the experience of being HIV+ over a free meal, without the formality of a structured meeting. Dinner on alternate Tuesdays. Ph 6257 4985.

Positive Women's Group

The Positive Women's Group meets for social activities throughout the year. For information on the group's gatherings or if you would like to suggest some activities contact Marcus, Nada or Stephanie on 6257 2855 or 6257 4985

Trevor Daley Fund

The Fund provides assistance for people with HIV/AIDS who are experiencing financial hardship, for the part payment of bills, a treatments allowance and some other costs. Applications can be made to the TDF Committee by any service provider. For more information call the TDF on 6257 2855.

Counselling

Stephanie Buckle is the AIDS Action Council counsellor. Free consultation available to all HIV+ people, their partners, carers or significant others. Phone 6257 2855 to make an appointment.

Jane Keany is the counsellor for the ACT Division of General Practice HIV/AIDS Program, and offers subsidised counselling services for people infected with or affected by HIV, their significant others and people at risk of HIV infection. Jane is available at the Interchange General Practice. Phone 6257 3004 or 0402 222 408 to make an appointment

Health Maintenance and Treatments Information

All enquires to Marcus

Phone 6257 2855

Nutrition

Consultation with a dietician from The Canberra Hospital is available free at the Canberra Sexual Health Centre. Appointments necessary. Phone Canberra Sexual Health on 6244 2184.

An HIV specialist nutritionist from Melbourne will be visiting quarterly. For further info contact Marcus or Mick on 6257 4985

Canberra Sexual Health Centre

Co-located with The Canberra Hospital. Free service available (no Medicare card is required) for testing and treatment of STIs, HIV clinic and counselling for issues such as safe sex, relationships and sexual functioning problems. Walk-in consultations available for urgent matters. Call on 6244 2184 to make an appointment.

Library

PLWHA and the AAC have an extensive range of books and videos for your enjoyment.

Educational books on HIV issues, cooking, Sci-Fi and general reading material just to name a few of the areas covered. If you would like to borrow any of them please see Lynn or Mandi at the AAC reception desk who will sign them out to you and explain the borrowing conditions. We also have a number of new books in the library this month.

Greater Southern Area Sexual Health and Hep C Service

Sexual Health Counsellor/Educators

Angela Trevaskis

Queanbeyan, Braidwood, Yarrowlumla Shire

Ph- 02-6298 9233 Mobile 0428 972 414

Aboriginal Sexual Health HIV/AIDS Worker

Sharyn Medway

Ph 02-4827 3913 Mobile 0429 985 606

Sexual Health Nurses

Christine Taylor -

South Coast, Batemans Bay - Eden

Ph- 02-4476 2344 Mobile 0427 219 874

Shannon Woodward & Lee Constable

Queanbeyan-Goulburn Region

Ph- 02-6298 9213 mobile 042 789 3247

Margaret Trail

Albury 02 6058 1839

Robyn Ridley & Sally Anne Brennan

Wagga Wagga 02 6938 6492

Sally Daveron

Griffith 02 6966 9930

Clinical Nurse Consultant

Alison Kincaid Albury 02 6058 1831

Sexual Health Physician

Dr Katherine Turner

Ph 6298 9213

HIV/AIDS Related Programs Manager

Michael Bolton

Ph: 02 6923 5774

The Fine Print

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Meng Soo from Interchange General Practice, Jae Condon from ACON's Positive Living Centre and Jenny McDonald who specializes in HIV Nutrition.

It was great to see such a good crowd with 50 people ranging from men and women living with HIV, family, medical and allied health professionals. People expressed that they found the show to be both informative and a lot of fun.

OH WHAT A NIGHT.....! CHINWAG IN CANBERRA

On the evening of 2nd April 2009, CHINWAG came to town. Chinwag is an interactive community forum hosted by NAPWA's [Treataware](#) on HIV Treatments and Healthy HIV Living for positive people, their friends, family and carers. HIV information is presented in a comical interactive 'chat show' format, and is hosted by highly esteemed community superstar Vanessa Wagner (Tobin Saunders), and Nurse Nancy (Kath Albury).

A panel of experts informed and entertained the audience and was made up of our very own General Manager Andrew Burry, Dr. Tuck

Special thanks must go to the pharmaceutical company Boehringer Ingelheim who sponsors the delivery of Chinwag across the nation, particularly to regional areas where there are fewer practitioners and specialists with experience in HIV than the major metropolitan centres.

An external consultant, Rob Wilkins from Sydney also attended with his primary role being to evaluate Chinwag. Evaluation forms were distributed which people could complete and place anonymously into a box or alternatively, anyone can speak or correspond directly with Rob. If you require his details again, just contact Nada or Marcus at Westlund House Resource Centre



This website provides basic information on some of the most common Sexually Transmissible Infections (STIs) found among gay men as well as information about STI testing and treatment. It is written for both HIV positive and HIV negative men.

This website should only be used as a guide. Not all STIs present with symptoms and even when symptoms do appear they aren't always the same. Some people may have no obvious symptoms, others mild symptoms and some more severe. If you think that you have an STI, get a check-up. If your doctor doesn't see many gay men or you don't want him/her to know you are gay, go to a sexual health centre.

HIV its all about Balance

“I realised very early on that if I was going to be one of the lucky ones, that it was going to be of my own making. I took a proactive approach and learned as much as I could about the virus.”

Ron was diagnosed with HIV back in the early days of the epidemic. He adopted a different approach to many others. ‘There was a stick your head in the sand attitude at the time. It seemed unacceptable to me and I just started my own personal research.’

‘I realised very early on that if I was going to be one of the lucky ones, that it was going to be of my own making.’

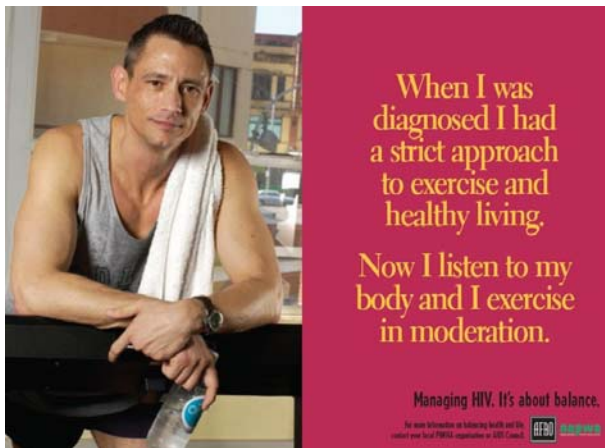
‘I took a proactive approach. I learned as much as I could about the virus. Where there were no real strategies available at the time, I developed some of my own from a holistic model. I learned about nutrition, anatomy, physiology, and virology and anything that had some kind of a healing component to it.’

Part of Ron’s determination was because there was little treatment available. ‘There was only AZT mono-therapy. I didn’t respond well to that at all. So I started seeing a naturopath, taking vitamin supplements and streamlining my diet. I learned as much as I could about the human body and became a personal fitness trainer. It all worked hand in hand.’

He also had to face personal issues including becoming infected with HIV at the age of 19. ‘I tested positive after having sex with one guy. It was a very unfortunate thing for me. A lot of issues arose from that. Learning to take responsibility from the very beginning and saying “I did know better, I did put myself in that situation, and I am not necessarily to blame but this is my responsibility now.” I think it was very empowering for me, to be able to actually discern between blame and responsibility.’

Ron also found his HIV diagnosis precipitated a mental health problem. ‘HIV brought it to a head and I overcame a major depressive disorder and I was able to work through that by a combination of treatment as well as psychotherapy.’

Now Ron describes having heightened self-awareness. ‘I pay more attention to my body than ever before. Having 20 years of experience, I understand the nuances better. I know when I’m pushing myself too much and when my body’s run down. I know when it’s more mental or physical. I’m able to discern between what I’m making up and what’s real. My peer network helps me with that. And bouncing those things off of my friends who are also HIV positive.’



Ron is also fortunate to have a wonderful relationship. ‘I have got the most perfect partner I could possibly have. We can talk about anything, and we do. With him I very much feel that as long as one of us is doing well, and as long as one of us is in a good position and has the capacity to make decisions, we’re doing alright.’

These days Ron maintains his health by following routines. ‘My main exercise now is to do the walk from Bondi to Bronte 4 times a week. It takes about 45 minutes, its wonderful as it is paved and beside the ocean.’

‘Half the time I walk alone and the other half with my partner. When I am alone I listen to my MP3, usually uplifting music. It depends on my needs at the time, if I need quiet then I don’t ask my partner to come along.’

‘I follow that up at home with yoga sun salutations and exercise ball work for core stability. It’s also a way of getting some quiet meditative time in my exercise program.’

‘Because I live and work in a world of HIV, my mind is constantly running on about programs and how to do things better. Taking the walk is an opportunity to shut down and focus on myself.’

Ron works in ACON’s Healthy Life +program, which is based at the Sydney Positive Living Centre. He has noticed the relationship between physical and mental health with people involved in the program. ‘With regular exercise people feel improvements in mental health and well-being and describe an increase in confidence and resilience.’

Sometimes the benefits of keeping fit are most apparent when they are reduced. ‘If I take a break, it takes me about a week to get back into it. And I can feel the difference. My capacities diminish, I feel less tolerant and have less stamina. I notice it especially in my relationship with my partner. My tolerance diminishes and I become short and sharp.

And he will tell me “you need to take a walk” and I listen when he says that.’

When it comes to his own fitness program, Ron has different motivations now. ‘I still go to the gym and lift weights, but it’s no longer my priority. I have reframed it as I have got older and I am more focused on body movement. It’s about giving my body what it wants, not taking from it what I want. When I say ‘body’ I am talking about the holistic perspective – the body, mind and soul and understanding all of that. It’s about bringing my mind and body to rest.’

Reflecting over the years Ron says, ‘One of the hardest things was to set boundaries for my health care and health management. Without having to disclose my status, especially early on, it was hard to say, “no I can’t do this, that or the other, because I just can’t, because it’s not good for me.” It took ten years

before I was able to really stand behind my 'yes's' and my 'no's'. Right or wrong, this is what my body needs'.

After living with HIV for more than 20 years Ron seems to have found his balance. His exercise regime, his outlook on life and the ways in which he chooses to relax all seem to enhance his overall well-being. HIV is a relatively new virus. Living with HIV for 20 years is new territory. We know that ageing naturally increases the risks of cardiovascular disease. However, there is also some evidence to suggest that HIV – as well as the treatments that are used to treat HIV – can contribute to cardiovascular disease. Regular exercise and relaxation can contribute towards reducing cardiovascular problems regardless of the underlying issue.

'Generally speaking, I have learnt and continue to redefine "balance" in my life. Prior to highly active antiretroviral therapy (HAART), I adopted a very strict, all-or-nothing, approach to healthy living. Twenty years into it I recognise that not just my virus has aged, but so too has my body – so I do my best to listen to what it needs. At this point, I do my best to include various forms of exercise in moderation, paying attention to my body as well as other aspects of my life that will require my energy, like my work. I suppose it's fair to say that my need for relaxation and having a bit of "reflection" time has become a vital part of establishing that balance.'

Managing HIV. It's about [balance](#).

JUST WALK IT

Just Walk It is a free walking program which aims to increase participation in regular physical activity. Walking groups are led by volunteer leaders offering a local, enjoyable, social and supportive physical activity option for people who wish to walk in their local area with friends, family or colleagues.

JUST WALK IT

What do I gain from joining a walking group?

The Heart Foundation recommends that you do at least 30 minutes of moderate-intensity physical activity, such as brisk walking, on most or all days of the week.



Regular walking can reduce the risk of developing heart disease and stroke, help you to feel more energetic, reduce stress, improve posture and mood, maintain bone density and improve joint mobility and stability. People of all ages can improve their health and well-being by becoming active.

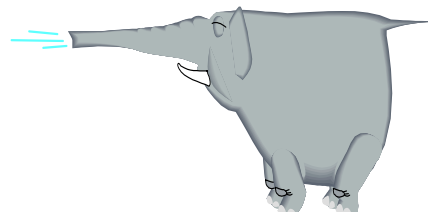
Where can I join a group?

To find a group near you, contact Heartline on 1300 362 787 (cost of a local call) or Just Walk It on 02-6269 2635. How do I start a group in my local area or workplace?

If there is no group near you and you would like to start one, contact Just Walk It on 02-6269 2635 or email us for a coordinator's kit and information to help you start your group

FLU Vaccination, to have or not to have ?

With the colder months fast approaching its time to start thinking about having a flu vaccine. Some people choose to have the flu shot every year like clock work, others don't, its up to you to decide if you want to have the vaccination.



There are many factors to take into consideration for example viral load are you undetectable ?, t-cell count - are they within a the "normal" range? Are you feeling a little run down and the last thing you need is a dose of the flu? Or are you running on all cylinders and feel that you are eating well, feeling well and haven't had the need to have the vaccination before? Talk to your Dr, discuss the pros and cons but do it sooner rather than later. Like all vaccinations they take time to work. Even if you choose to have or not to have a vaccination, your Dr may have some good tips for staying healthy during the flu season.

Need help with a Legal question ?

Why not come in and use the

FREE Legal Advice Clinic.

Running every second Thursday Night at Westlund House Resource Centre. Bookings are essential and can be made by calling reception on

6257 2855. Appointments are 1/2 hour duration starting at 6pm.

ACT HEPATITIS RESOURCE CENTRE

We are a community organisation providing information, support and health promotion for people affected by hepatitis C and other hepatitis viruses in the Canberra community.

If you have hepatitis, know someone with hepatitis, or just need a question answered – you are not alone, we are here to help. You can visit the ACT Hepatitis [Resource Centre](#) at our new premises:

Level 2, Suite 8
18 Corinna Street,
WODEN ACT

or phone for a confidential appointment:

1300 301 383 www.hepatitisresourcecentre.com.au



Nurse Philip

Dear Nurse Phillip, I have a very slim build and am not very tall. A friend was concerned that because of this, I might be getting too much antiviral medication for my low weight. He advised me to carefully shave off about one tenth of each of my pills to reduce the dosage. Then if the next viral load at 3 months was still undetectable, shave a bit more off for the next 3 months. Will this help me find my proper dosage?

No; the process that you have described is a very effective way to develop resistance and destroy treatment options.

If you gradually lower your doses, you will steadily be reducing the blood levels of your antivirals. Ultimately, there will be so little that the medication no longer works; you will no longer have suppression of your HIV. The virus will then be replicating more rapidly (thereby producing more mutant variants, some of which will be able to survive in the presence of your ART). In the presence of significant amounts of antiretroviral medication, resistant virus will start to grow more quickly than the sensitive virus, encouraging the development of even larger amounts of resistant virus. This will

become apparent as a higher (detectable) amounts of drug-resistant HIV:

Depending on the degree of resistance, increasing the dosage of your combination (even going back to the full dosage) is unlikely to give you complete viral suppression. If this happened, you would have lost at least one treatment option and possibly trained your virus to be resistant to one or more whole classes. If this happens, you will need to try to find another combination from a reduced number of choices.

In addition, for many medications, it is important that they are stored and taken in an unbroken state. The formulation of these medications requires that they be kept intact for a range of reasons, including, stability (so that they remain usable right up to the expiry date), correct rate of delivery (some coated tablets may release the medication too quickly if they are broken) and unreliable dosing (it may not be possible to divide the medication accurately enough). Always check the product information, or speak to your pharmacist or other health care provider before deciding to cut or break a tablet.

It might be useful to examine the motivation for attempting to reduce

your antiretroviral dosing and discuss this with your doctor or other health professional. If you are trying to reduce side-effects, a better choice might be to change medications or alter the way in which you take the current combination. For some medications (PIs and NNRTIs), it is possible to measure the amount of drug in your blood by using a simple blood test. If the levels are not in the safe zone, supervised adjustment of the drug (with appropriate monitoring) may be undertaken.

Fortunately, most of today's antiretrovirals are designed to result in blood levels that are effective and safe for most people who are taking them. Sometimes, there are departures from the usual dosing instructions. This mainly happens for reasons of drug interactions and problems with the kidneys or liver. There are a small number of medications where reduced dosages are suggested for people below a particular body weight but this is a rare occurrence. Your doctor will discuss any advised dosing modifications when prescribing the medication.

If you intend to make any dosage modifications be sure to discuss them with your doctor.

CARE INC. Financial Counselling Service & The Consumer Law Centre of the ACT

Care Inc. Financial Counselling Service is a community organisation set up to ensure low income consumers are treated fairly and to support them to overcome debt.

We offer information and financial counselling, and have a community development and education program. Care also hosts the Consumer Law Centre of the ACT and the No Interest Loan Scheme (NILS). Care Inc. is based in Canberra, ACT, but provides financial counselling services to the surrounding areas.

We have Budget tools to help you review your finances.

If you would like to speak to a financial counsellor please call us any weekday morning on 02 6257 1788.

The **ACT NILS** scheme is an alternative form of low cost credit provision which assists low income consumers to access affordable loans for the purchase of essential household items.

To be eligible you must be an ACT resident, have leased or owned your current home for at least six months, can show the capacity to repay the loan in 12 months, and hold a current Centrelink Health Care Card.

How to apply?

You can request an application form from the PLWHA worker or contact Care Inc. direct on 6257 1788. After lodgement of the application form the loans administrator will contact eligible applicants and arrange an appointment to assess the applicant's capacity to repay the loan.

Brenda's Blenda

With the heat and for your health there is nothing better than seafood. But how to identify and buy seafood was very confusing for me. So to make it easy on the pocket I asked for some advice from the local fish market!

Oysters: These are Australia's favourite and can be purchased already opened or as the saying goes, in the half shell. Australian oysters are some of the best in the world, eaten raw or cooked in the half shell.

Oyster Kilpatrick is a favourite with finely chopped bacon and a dash of Worcester Sauce, grilled for a minute.

Prawns They can be eaten cooked or eaten cold. To cook they need only a minute tossed in a pan with some oil or on a BBQ plate. If green, cook fast until transparent either peeled or unpeeled.

Whiting or Ling; Small white fillets, ideal for those of us who don't like bones and for children Best dipped in seasoned flour and pan fried in a little butter, don't over cook as it could toughen the fillets.

Mackerel; Dust in flour and BBQ grilled or pan fry.

Bream; Pan fried, grilled or steamed.

Taylor; A slightly oily fish, and goes well with mediterranean or middle eastern dishes with flavors' such as tomatoes, onions, garlic and fresh herbs (fennel, rosemary, oregano and marjoram). Ideal baked whole, BBQ or bread crumbed and quickly



pan fried.

Snapper; Baked whole wrapped in alfoil in the oven, grill or BBQ.

Flathead; These have a distinct mild flavour and a tender to firm flesh. Use dipped in beer batter, fry and serve with chips and salad. You can also dusted in flour and pan fry.

Mali Mali; A versatile fish with a juicy white flesh, great in Thai curry or pan fried, steamed or BBQ.

Mullet; Remove the skin which can have a strong flavour. Pan Fry, grill or BBQ

Barramundi; A white fillet, best grilled or pan fried quickly. Note; it's

not a good fish to BBQ as it could dry out quickly. The Barramundi Au Gratin is easy. Cook the fillet then sprinkle grated tasty cheese on the top and quickly grill. Simply serve with chips and green salad.

It is very important not to over cook seafood. It is well worth it to standby observing and turning your sea food only once as your seafood could end up tough.

A great salad is ideal as a side dish as it doesn't overtake the delicious flavors of the seafood.

Enjoy.

Brenda



Informing HIV treatment choices

www.treataware.net

DIETICIAN'S CLINIC

Jenny MacDonald

will conduct a Dietician's Clinic at the

AIDS ACTION COUNCIL

Westlund House

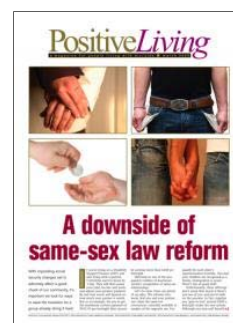
on

TUESDAY

16 June

Please call Mick or Marcus on 6257 4985 for further information and to make an appointment.

Please bring your latest blood test results to the clinic.



NAPWA's free newsmagazine for people living with HIV/AIDS in Australia. Published since 1989, *PL* is Australia's only national publication for positive people.

Copies are available from PLWHA ACT Westlund House —or via the web at www.napwa.org.au

**Workers Reference
Group Update**

March 09

Kenn Basham, Michael Beck, Mick Doring and Aslan Storm were in attendance at this month's meeting.

Kenn Basham our NAPWA rep, reported that NAPWA will be having their Special General Meeting (SGM) on the weekend of the 3rd and 4th of April. He informed us that NAPWA will sign off on the Strategic Plan and formally adopt it.

Ken also informed us that NAPWA will be having a theme for their meeting as it is their 20th anniversary. They will have guest speakers to commemorate the 20 years that NAPWA has been running. Kenn will be one of the speakers as he was a part of the birth of NAPWA and beyond

Kenn will be going to Port Moresby at the end of March, to view some local training and then will sit in on IGAT HOPE board meeting. IGAT HOPE is similar to our NAPWA, it is in Papua New Guinea and it is going from a small community based support group to a national body that will run programs for all of Papua New Guinea and as such NAPWA is helping to train their board in formal meeting procedures and governance. We wish Kenn and the other NAPWA members luck in this endeavour.

Michael will be attending the next AAC board meeting on his own as Kenn will be out of town. We wish Michael luck with his first solo meeting with the AAC board.

Mick reported that the dietician clinic was very successful, our dietician Jenny McDonald was run of her feet when she was here Monday the 16 March. Jenny will be back with us in June and September, please call Mick or Marcus to make an appointment. We are also happy to report that Jenny will be joining us for a special peer support dinner in September where she will be doing a talk about... you guessed it eating right and what constitutes a healthy diet. Please take the time to RSVP to Marcus or Mick on 6257 4985 as we will need to know numbers for catering. Hopefully Jenny will approve of the dinner menu.

We are still reviewing the Strategic Plan and hope to have this finalised by the end of April, and as always if you have any ideas for social outings or other ideas that fit in with our "living well" program let us know on 6257 4985 or email us on plwha.act@aidsaction.org.au. by mail at GPO Box 229 Canberra ACT 2601, so please don't be shy about coming forward.

**Aslan Storm
WRG member**

COMING EVENTS

Wednesday 8.04.2009

PSN Lunch
12- 4pm

Good Friday 10.04.2009

Westlund House Resource Centre closed

Easter Monday 13.04.2009

Westlund House Resource Centre closed

Tuesday 14.04.2009

PSN Dinner 6pm Westlund House

Wednesday 15.04.2009

PSN Lunch
12 - 4pm

Come along to the April volunteers meeting for the AAC at Westlund House 6pm and hear John Davey of Goodman Law talk about the new Same Sex Entitlement Changes.

Wednesday 22.04.2009

PSN Lunch
12 - 4pm

Monday 27.04.2009

ANZAC Holiday

Westlund House Resource Centre closed

Tuesday 28.04.2009

PSN Dinner 6pm Westlund House

Wednesday 29.04.2009

PSN Lunch
12 - 4pm

Tuesday 12.05.2009

PSN Dinner 6pm Westlund House

PSN Dinners Moves to Winter Schedule

Wednesday 13.05.2009

PSN Lunch
12 - 4pm

Sunday 17.05.2009 Candlelight Memorial

Interfaith Service All Saints at Ainslie at 5pm and the memorial at the Museum will be held at 7pm. (Further details will be sent out separately)

Wednesday 20.05.2009

PSN Lunch
12 - 4pm

Wednesday 27.05.2009

PSN Lunch
12 - 4pm

Wednesday 3.06.2009

PSN Lunch
12 - 4pm

Is he thinking what I'm
thinking?

www.thinkagain.com.au

