



AIDS Link

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STOP AIDS!
Keep the Promise

Behavior change - you, me, everybody!

What are your initial thoughts on behavior change in relation to HIV/AIDS? It is likely that many people would think of changes a person can make to reduce their risk of catching or passing on the disease by abstaining, being faithful, or using condoms. This would be partly right, but it is only one aspect of what is involved.

While it is clear that change at an individual level is necessary to reduce the spread of HIV/AIDS, it has also been realized that this is not sufficient. You can advise an individual to abstain, be faithful, use condoms, or get tested. However, if their peers make fun of their abstinence, condoms are not easily accessible, or they are worried about confidentiality at testing centers, there is a much lower chance of a person making the changes they would like to.

This means that in addition to targeting individuals, interventions need to influence:

- ◆ the social community level - such as peer groups, parents, and teachers;
- ◆ the organizational level - to enforce confidentiality and encourage supportive behavior from personnel at health and testing centers, and to increase collaboration among HIV/AIDS organizations; and
- ◆ the national level - through policy changes, legal frameworks, the mobilization of funds, and the development of appropriate standards for the quality of services such as education and counseling.

All persons at all levels can improve the HIV/AIDS situation through behavior change. Critical to this is the need to reduce stigma and discrimination. Fear of discrimination enhances the spread of HIV/AIDS in many ways and can greatly limit the effectiveness of behavior change interventions.

This issue of *AIDS Link* brings together news and suggestions on behavior change at a variety of levels from all over the country with the hope that we can gain from sharing our experiences.

Source: 'Behaviour Change Interventions for Sexual Health Promotion, a Manual' CAREC (2003)

Life with HIV/AIDS

Why do I cry?

I am a lady living with HIV in Corozal. Before I was married I used to work in a bar, but I always used condoms so I stayed safe. I took HIV tests at the hospital every three months and I was always negative. I used to take drugs too, so I would go to the hospital for help with that. One time the hospital recommended that my husband and I both got tested. We did, and we found out we were both infected with HIV. I was sure my husband had got it first and passed it on to me because he used to have lots of partners. He said I had it first though and that I had another man. We would fight a lot, so we separated.



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Spotlight on The National AIDS Commission

The National AIDS Commission (NAC) is a government agency under the office of the Prime Minister charged with coordinating and overseeing the national HIV/AIDS response. Its goals include advocacy, coordination of HIV/AIDS efforts, resource mobilization, policy and legislation development, and monitoring and evaluation. It also guides the implementation of programs for HIV prevention and for the creation of a supportive social environment. NAC consists of a Secretariat (the operational arm) and five sub-committees. The executive director of NAC is Ambassador Dolores Balderamos Garcia and its current members include representatives of government ministries, other organizations, and additional stakeholders.



Dolores
Balderamos

The National Policy on HIV/AIDS, which was developed by NAC and was passed in 2005, provides a framework based on human rights for the prevention of HIV/AIDS and the reduction of its impacts at all levels. It is aimed primarily at the government, but also provides guidelines for other organizations.

NAC has also developed the Strategic Plan for a Multi-Sectoral National Response to HIV/AIDS (2006 to 2011). Implementation of this plan is guided by



Ruth Jaramillo

NAC's technical director, Ms. Ruth Jaramillo. NAC hopes that the principles and approaches outlined in the plan will be used by all government departments and other stakeholders as the basis for developing their own plans, such that all initiatives countrywide can be harmonized to maximize their effectiveness.

NAC is in charge of monitoring the seven district-based AIDS committees, which are designed to activate the participation of community members. NAC considers that the responsibilities of the district committees are to build partnerships, guide local plans, mobilize



resources, advocate for the expansion of prevention and care services, and monitor program targets at the local level. However, interviews have indicated that due to feelings of a lack of support, from both community and national levels, some committee chairs have resigned and several committees have been fairly

inactive. Details on the committees are given in the district news sections.

NAC has been successful in policy development and in securing funds. However, the national response to HIV/AIDS is still lacking in communication and coordination, and has insufficient monitoring and evaluation. In recognition of these weaknesses, NAC has successfully advocated for the Global Fund to provide monies for a Monitoring and Evaluation officer and a Programs and Communications officer. One of the first duties of the latter is to reactivate NAC's sub-committees, which have been largely dormant for the last year.

There is also a long overdue need to strengthen the community-based response to maximize the potential of the existing stakeholders by enabling them to work together more effectively or, at the very least, to be kept up to date on each group's responsibilities and activities. It is, after all, this implementation at the community level that will impact on the HIV/AIDS situation and provide the lessons that need to be learnt to continue to steer policy and strategic development.

For further information contact: The National AIDS Commission Secretariat, #8 17th Street, King's Park Area, Belize City; 223-7594/92; nacbelize@yahoo.com, or see their new website at www.nacbelize.org.



Nationwide HIV/AIDS News

Education improvements

The Health and Family Life (HFLE) curriculum should now be in place in all primary schools whose teachers attended the Ministry of Education's (MoE) training workshop in September. The curriculum provides guidelines to improve lesson plans for all classes. It is very skills-based and covers HIV/AIDS topics such as prevention methods, self-esteem, negotiation and assertiveness skills, and the implications of having HIV/AIDS. Copies of the curriculum can be requested from 223-6970. The HFLE curriculum for secondary schools should be in place in a year's time. Until then, HIV/AIDS education is being introduced to students through school counselors. MoE held a course in October teaching counselors the peer education methods of Together We Can. This will enable them to train peer educators in their schools to do outreach with students.

Know Your Status campaign

This campaign was launched by the Ministry of Health (MoH) on 29th November, and will run until at least 31st December 2006. The message is: "Know your HIV status. Get tested TODAY! Know NOW! Live LONGER!" As part of the campaign, MoH conducted a national testing day at public places across Belize on World AIDS Day to promote the importance of knowing one's HIV status and to raise awareness of other HIV/AIDS services available at most public health facilities. Voluntary Counseling and Testing (VCT) centers were also open on some Saturdays in December. Other activities included public service announcements on TV and radio, the promotion of HIV/AIDS services in all major newspapers, and a group counseling and testing day for Belize Defence Force (BDF) at Price Barracks in Ladyville. For more information call the National AIDS Program at MoH, Belmopan, 822-2325 or 822-2363.

International Labor Organization (ILO)

December 2006 marks the end of ILO's three-year project to reduce stigma and discrimination in the workplace. The project worked with 18 companies from various sectors and districts to help them implement HIV/AIDS policies and programs. In addition to training 69 peer educators from these businesses, they also developed a peer education manual and a behavior change communications strategy for each type of workplace.

Caring for Children workshop

On 15th November the Cornerstone Foundation, supported by UNICEF, held a national workshop to strengthen the protection and support services for children and orphans made vulnerable by HIV/AIDS. One of the aims was to establish in Belize District a protection and support network for vulnerable children, of the type that has successfully been set up in other districts. Health, education, religious, and business sectors attended. Testimonies were given from around the country and working sessions were held to improve aspects of the network such as logistics, accountability and confidentiality. To be involved call 824-2373.

GOJoven scholarships

GOJoven is the Youth Leadership in Sexual and Reproductive Health Program, which aims to improve the capacity of young people and organizations to improve adolescent sexual health. It is offering scholarships to people aged 19 to 30 who are fluent in Spanish and English and who work or volunteer in the fields of sexual reproductive health or the environment. The scholarships last for one year and involve one and a half months of studying, and national and bi-national trainings. Applications from all over Belize will be considered but they are particularly looking for people from Toledo and Stann Creek. For more information, or application forms, contact Ms. Eva Burgos at 822-2612 or 663-5926. Forms must be in by the first week of March 2007.



GOJoven 2006 Belize and Guatemala participants

Alliance Against AIDS (AAA)

In November AAA held a two-day consultation to strengthen the HIV and AIDS anti-discrimination advocacy committee. The committee includes representatives from AAA, women's groups, the Dangriga HIV/AIDS Society, POWA Fu Women, people living with HIV/AIDS (PLWHA), and activists. AAA has a hotline, 223-6911, which anyone can call for information and advice on HIV/AIDS, or for support.

AIDS Link**Youth Fest**

A Youth Fest was held in the city to mark World AIDS Day. The theme was 'Move on.... Youth and AIDS in the 21st century.' The event was a collaboration between Together We Can (TWC), UNICEF, Youth For the Future (YFF), Exchange, the National Arts Development Foundation and various Ministries. Despite heavy rain, the day was a success. There was a large turnout, and the crowd was entertained by performances from students and local artists. Information stalls were run by organizations including the Red Cross, BFLA, YFF, and the Belize City Council.

Youth For The Future (YFF)

YFF, at 227-0771, is a youth-centered agency working for the empowerment of young people. They provide a resource center, use creative ways to educate youth about HIV/AIDS, and distribute male and female condoms. In 2005 their Belize City violence reduction and HIV/AIDS unit reached 2,500 youths. Their satellite tables, manned by peer educators offering condoms, brochures, and posters, reached 1,400 youths.

Caring for Children

On World AIDS Day Wesley High School presented a monetary donation to help children affected by HIV/AIDS. Also, BTL employees have initiated a project to collect donations in their workplace called Sharing Love for Children, and BDF is planning a fun run to raise funds.

**Belize Family Life Association**

BFLA provides HIV/AIDS education and prevention for the general public and has behavior change presentations targeted to specific groups including youth, the uniformed services, prisoners, men who have sex with men, and commercial sex workers. They also offer one-to-one talks. To request a presentation or to find out more, call 203-1018.

Young Women's Christian Association

The YWCA held a workshop on HIV/AIDS for 12 youths on 25th November. This was one in a series designed to help young people become more aware of HIV/AIDS in Belize, understand methods of HIV/AIDS transmission and prevention, and reduce stigma and discrimination. The YWCA will organize a second education workshop on HIV/AIDS for youth from rural Belize in January 2007, as well as two workshops providing training in peer education and peer counseling. To receive information on the project or sign up for a workshop contact 203-4971 or visit www.ywca.org.bz.

San Pedro

The AIDS Committee has a few active members who are all interested individuals from the community. This is the only San Pedro-based organization that *AIDS Link* is aware of that does HIV/AIDS work. The committee is putting together its first radio ad on HIV/AIDS, and hopes to have it filmed early in 2007. Other plans include giving a student-friendly booklet on HIV/AIDS to the library. On 1st December they organized a walk for HIV/AIDS awareness. The San Pedro polyclinic provides free tests and private clinics sometimes also offer free tests.

Stann Creek District News

World AIDS Week

The Dangriga HIV/AIDS Society held a range of activities during World AIDS Week, including outreach in schools around the district. Testing and counseling were provided at the society for 60 people. On 1st December WIN-Belize organized a torch run. Other AIDS Day events were cancelled due to rain.

Dangriga HIV/AIDS Society

The society has responded to the increasing number of PLWHA in Dangriga by changing their primary objective from an education role to providing care and support. They have 20 members who meet regularly to share experiences and learn ways of providing support to PLWHA. The society has begun work on the renovation of a building which will include a VCT center.

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To learn more, call 502-0173.

POWA Fu Women and The Women's Department

POWA has 20 to 25 regular members and around 50 affiliated members, including many young people. They work closely with the Women's Department to hold open-air committee meetings every month in different locations and to have satellite tables in town with crafts and information. In 2007 they hope to focus on enabling women, who did not have the opportunity when younger, to continue their education. Call Ms. Michelle Irving at 502-0038 for more information.

VCT Center

The VCT center is in the same building as the psychiatric building and HECOPAB. HIV tests are offered from Monday to Wednesday, so that VCT personnel are available for counseling clients with positive results for a few days before the weekend.

Behavior change at an individual level

Although there are important influencing factors at all levels, every individual can take steps to improve their sexual and overall health by making changes to their behavior. As behavior change takes place, a person moves from thinking about the benefits of making a change, to deciding to change and identifying the actions necessary for this, to making the changes and sticking with them. Relapses can happen at any point, where a person goes back to an earlier stage, but these are very common and should not be considered a failure. It helps to look at a variety of options for achievable goals in behavior change, and to perhaps try smaller, easier changes first.

Following this advice will reduce a person's risk of exposure to sexually transmitted infections (STIs). For those who are already HIV positive, it is especially important to bear these points in mind. The behaviors described below can help you to protect the health of your partner(s) and also to protect yourself from being infected by different strains of the HIV virus, or by other STIs, both of which could lead to poor health. For those who are HIV negative, this advice will help you stay that way.

Protect Yourself and Others

Self-esteem

An important first step is to value yourself as a person, to accept yourself for who you are, and to think positively about yourself. Thinking this way encourages people to protect their health, and can give them courage to make the right changes.

Abstinence

The main way that HIV is spread in Belize is through having sex, and the only way to be certain of not catching HIV or passing it on in this way is through abstinence. This means not having vaginal, anal, or oral sexual activity. Many of those taking a religious viewpoint would also encourage people to abstain, or to maintain loyalty to their partner.

Being faithful

Having multiple partners is very risky and increases your chance of being exposed and exposing others to HIV. The only way that sexual activity is not risky is if you and your partner are faithful to each other, and you have both had tests that show you are both HIV negative. It is important that you are both honest in this, because if either of you has other sexual partners there is a risk of catching or passing on STIs.

Correct and consistent condom use

If you are having sex and are not in a relationship where you are certain you are both faithful and HIV negative, you can reduce your risk of catching STIs by using male or female condoms at all times during sex. If either or both of the partners has HIV or any other STI,

the use of condoms will reduce the risk of the STI passing between you.

Find out how to use condoms and where you can get them, and keep them handy if you might be having sex. You could also find out about using water-based lubricants, which can help stop

a condom from breaking or tearing during sex (do not use oil-based lubricants, like baby oil, cooking oil, hand lotion or Vaseline, because they can cause condoms to break). Negotiate safer sex in advance, and be assertive about it. You should be able to stand up for your rights and values, and if your partner cares about you, they should respect your decision to protect both of you.



Living With HIV/AIDS

Behavior change at an individual level

STIs

Some STIs cause open sores that can increase the chance of blood-to-blood transmission of HIV. Also, having an STI weakens your immune system, making it easier for HIV to invade your body. This means that if you are having unsafe sex and you have an STI, you could be increasing your risk of catching HIV. Help yourself by getting tested for STIs, and getting treatment if necessary.

Alcohol and other drugs

Alcohol and other drugs can greatly reduce a person's perception of risk, and so people are less likely to protect themselves from STIs. Also, when you are drunk or stoned it is more difficult to use a condom properly. This means it is important to avoid sex if you are under the influence of drugs.

Getting tested

It is important for the health of you and your partner(s) that you get tested for HIV and other STIs whenever you have unprotected sex or come into sexual contact with a person who is, or might be, infected.

Protecting others

In the words of a person with HIV, "If you get infected and you have other partners it is important to use condoms so you don't give them HIV and also because they may already have it worse than you, so if you don't protect yourself, you can get more ill from them. I think it is bad for people with HIV to go and infect other people because you feel so bad when you know you have it. And what about the person's family? What will happen to them? Think about their children."

HIV/AIDS and Healthy Living**Keep a positive outlook**

Although it can be frightening to know you have HIV, if you look after yourself you can still have a long, healthy life. These days HIV can be compared with other types of ill health, such as cancer or diabetes, which do not have a cure but do have treatment. A person can live for many years with HIV before it develops into AIDS, and even then there are free medicines available that can reduce the symptoms. There is a lot of information and advice out there. Some people find it helpful to turn to their family, or to God, for support.

General advice for healthy living becomes even more important for people living with HIV/AIDS, so that you can help your body, and particularly your immune system, to stay strong. It helps if you can, as much



as possible, get plenty of exercise and sleep, avoid cigarettes, alcohol, and other drugs, and maintain a balanced diet with lots of fruits, vegetables, and eggs, as well as taking vitamin supplements.

Adherence to medication

Antiretroviral medicines can have a huge effect on the health of people with AIDS. They can, for a while at least, reduce the amount of the virus in the blood, increase the strength of the immune system, and reduce symptoms. However, they need to be taken with food and following a very strict timetable, because if even one or two doses are missed your health can get much worse.

Opportunistic infections

HIV lowers a person's immune system, reducing the body's ability to fight off infections. This means it is important to be aware of the symptoms of other illnesses so that you can see a doctor early on and receive treatment for them before they become too severe.

Sources: This information was compiled from interviews with a PLWHA, VCT and BFLA personnel, and from the variety of leaflets available at VCT centers, BFLA, the Cornerstone Foundation, and the Women's Department.

COMING UP: children and HIV/AIDS, diet/nutrition, bedside care, ...

Discussion Topic

What are your ideas on behavior change approaches? What experiences have you had?

People's behaviors are the outcome of a range of factors from an individual level up to the levels of organizations, communities, and public policies, and so HIV/AIDS interventions require a holistic approach. Without a clear understanding of this broader context and interventions to improve it, the effectiveness of HIV/AIDS programs is severely limited. The following are views and experiences in relation to behavior change. Due to space restrictions, the focus here is on the individual and community levels, leaving organizational and policy changes for future issues.

**Ruby Magana,
Corozal
HECOPAB**

"It's something tough to change an individual, so you have to start with the young ones to instill moral values. If you talk about condoms, you can just talk and talk and talk, but if a person starts to value themselves as a human being they will do things differently. So focus on this, and the positive and negative consequences of your actions. There is a lot of peer pressure, so talk about this with youth groups."



**Ken Kapinski, University of
Belize**

"Adults' minds are already set. The culture is not to care much about things like HIV/AIDS. The hope is to target children as they go through schools so they can learn how to make the right choices... You can

get the message out all day but if the pieces to support it aren't in place it's not going to have a big effect. If you increase your opinion of your self-worth, it influences your decisions on if you want to keep yourself physically and mentally healthy."

A health educator

"School outreach works better if the principal screens what you plan to present. If you can't say certain things at the time, you can tell the children they can see you in your office. Sometimes children are embarrassed to ask questions in front of their friends so I stay behind afterwards so they can come individually. People need to see what happens to those who don't change their behavior. Last year we had two PLWHA who talked to schools and that was very effective."

A lady from a Cayo village

"People in my village would listen more intently to someone from an organization, like the Ministry of Health, rather than a person from their own village."

A hospital worker, Belmopan

"I think CNAs (Community Nurses Aides) need more knowledge about how to help PLWHA and from them the effects can spiral and they can tell other people. The CNAs are an integral part of this because they are in constant contact with people in their communities."

Joan Burke, BFLA

"We find it is best if before doing behavior change work, we have a focus group with the target population,



such as men who have sex with men, to hear about their needs and what they would like to learn."

**Michelle Irving,
Women's**

**Department and POWA Fu
Women, Stann Creek**

"We hold an open-air committee meeting every month in different locations, with singing, dancing, drama, poetry, drumming, and crafts, and we have a satellite table too. It's not boring so people come, and the people are in their own community setting. We do condom demonstrations, give out male and female condoms, have quizzes on HIV 101, and have brochures on topics like male and female health, domestic violence, and negotiation skills... We can help people to make small changes and not judge them for not doing better... It's good if parents talk openly with their children about puberty, sex, and STIs, without judgment so that children feel they can ask their parents for whatever information they need to help them make the choices they are faced with."

A BFLA nurse

"We have a short test and if people score certain amounts they win different levels of prizes. People come to our booth and read the information leaflets so that they can get prizes."

Discussion Topic

What are your ideas on behavior change approaches? What experiences have you had?

Troy Banner, City Council HIV/AIDS field officer

"I find it best to do hands-on activities where possible rather than reading from a powerpoint presentation.



The thing that really makes people change is when they can see the position that PLWHA are in. I use lots of visual aids. I show photos of skin cancer and

TB that PLWHA are at risk of. That is what scares them. I have seen that change people's lives... Changing stigma and discrimination is very difficult. I tell people nobody is perfect. I ask, 'Do you know if you have HIV, if your brothers or sisters have HIV? Don't judge people or discriminate. You don't know what is in your own family'."

A BDF staff member

"If I don't have all the resources I need, I step back and take a different approach. If people fear stigma so they don't go to meetings, I could approach them individually with pamphlets."

A church leader

"Medical staff doesn't seem to have the capacity to open up to clients, so the clients may lie to them and say that they have been taking their medication when this is not true. Sometimes people would rather stay at home and die quietly than go through the way the medical staff makes them feel."

Caleb Orozco, United Belize Advocacy Movement (UNIBAM)

"People assume that with behavior change you can have a structural set of information and that's sufficient, but that's not true. It helps, but every person is different and has a different past and different self-esteem and views, so you need to approach each individually. You need to focus on the gaps in people's knowledge instead of giving a set package of messages, and to put the information into a context that they can relate to."

A Stann Creek professional

"People have a lot of issues with institutions and often prefer to stay sick than to deal with bureaucracy, power, and being looked down upon by doctors. A lot of people living with HIV/AIDS are afraid to go to institutions that help them or the hospital."

Father Dominic McDonagh, Dangriga HIV/AIDS Society

"I think what will have an impact will be helping people see AIDS in a different light, like diabetes. People may find out a person has HIV/AIDS, but so what? They can still have a long, healthy life. In Honduras PLWHA do outreach work. HIV/AIDS is such a common thing that people have passed the point of stigma and discrimination because it's so widespread."

Douglas Hyde, Belize City Youth For the Future

"Approaches I have found to work include holding debates at schools and getting two teams to each argue a different side of an issue, and using sporting events like football and basketball. With outreach through sports, we hold sessions with the teams before they play, telling them about HIV/AIDS. During the game we have satellite tables and we have an MC on the microphone talking about the game, but also saying things like, 'Come and get your condoms! Protect yourself!' At half time we have youths distributing information and condoms. We've also held hair-braiding competitions and while the youths are there we teach them about HIV/AIDS. It helps to find



innovative ways like this to get the information across."

These are just a few ideas. For more information on how to approach interventions you can order 'Behaviour Change Interventions for Sexual Health Promotion, a Manual' (2003) online from the Caribbean Epidemiology Center at www.carec.org.

If you want to talk more about this and other current international issues, write to AIDSLink@hotmail.com and ask to join our discussion group.

COMING UP: effects on children, religion, gender issues, vulnerable populations ...

Highlights from Cayo District

Belmopan AIDS Committee

The committee has had several meetings since it restarted in October. Members include hospital staff, teachers, PLWHA, representatives of youth groups, religious organizations, and other interested persons. They carry out awareness-raising activities and provide material support to PLWHA. Events for World AIDS Week included visits to many schools in the Belmopan area by Youth With a Mission, a radio presentation, a candle-light vigil, a rally, and a march around Belmopan by school children. The committee is well supported by community fundraising and participation in events. To become involved call Mr. Mike Mendez at 610-1274.

Cayo AIDS Committee

Meetings have been unsuccessful for a long while as they did not tend to lead to any action and so the committee currently operates by the chair phoning particular members to ask for their support for upcoming activities. The committee obtains funding by sending proposals and reports to organizations such as BFLA, who can sometimes help out. For more information contact Ms. Claudia Dominguez at 804-2098.

San Ignacio BFLA

BFLA has recently set up a room for young people to do their homework in, where they can find out about sexual health for school projects.

BFLA

The BFLA nurse tests around 3 to 8 people per month, and refers those with positive results on to the VCT center for counseling and medication. She also provides outreach work, mainly in high schools and in the town. She has had little involvement with outreach and education in the rural areas.

Toledo Maya Women's Council (TMWC)

The TMWC has been thinking about doing HIV/AIDS work for over a year, but was held back by a lack of financial and human resources. However, they hope to begin work in 2007 and are in discussion with the Ministry of Health about how best to develop an HIV/AIDS education program targeting young people. They also hope to work with other organizations to translate existing HIV/AIDS information leaflets into Mayan languages.

San Ignacio VCT Center

The center tested 318 women and 57 men between June and September. The VCT center can come to workplaces to provide voluntary rapid HIV testing for free. To request this, or to find out the dates for village outreach sessions, call 824-3129.

The Cornerstone Foundation

World AIDS Day celebrations in San Ignacio were organized by Cornerstone with live music by The World Culture Band. Cornerstone, the VCT center, and BFLA had information booths, and free counseling and testing were available. Cornerstone's Youth Pan di Move peer educators learned how to increase HIV awareness through drama during a two day training session in December.

Belmopan HECOPAB/Hospital

HECOPAB offers HIV testing, counseling, and outreach work, particularly in schools. They have a portable testing device, but do not have their own transport, which limits their outreach and testing in rural areas. This has also prevented them from doing outreach with commercial sex workers for almost half a year. Their CNAs attended a one-week course on bedside care, gender equality and HIV/AIDS in November. The hospital has a support group for PLWHA.



HECOPAB and VCT Center

The VCT center tests 15 to 20 people in a typical month, as well as 5 to 10 prenatal mothers who are referred to them. They have a portable testing device, but do not conduct HIV/AIDS testing or outreach work in the villages. No one interviewed in the hospital compound knew of anyone providing HIV testing in rural areas. As with all districts, the CNAs have received training in HIV/AIDS and bedside care, and are able to provide informal outreach in the villages. HECOPAB's health educator hopes to begin discussions soon on a plan to train peer counselors to start a campaign 'Mek Wi Talk', to encourage open discussion about HIV/AIDS.

AIDS Committee

The AIDS Committee organized a walk and a candle-light vigil to raise awareness of World AIDS Day. Persons interested in becoming involved can call Ms. Martha Coc at 702-2021.

Highlights from Corozal District

World AIDS Week

In the last week of November HECOPAB held a workshop with youth and women's groups. Students produced posters on the theme of HIV/AIDS, which were displayed in schools. Students, church groups, and others took part in a walk and a candle-light vigil.

HECOPAB

The health educator is in charge of outreach for schools, women's groups, churches, and other groups. They would like to do outreach work for commercial sex workers, but do not currently have funding for this. CNAs have been bringing in donations to each of their monthly meetings.

Orange Walk News

World AIDS Week

Many activities took place during World AIDS Week, coordinated by the Ministry of Health and the Orange Walk AIDS Committee. Awareness days were held at various schools and colleges where presentations were given to sensitize students to the risks of HIV/AIDS and other sexually transmitted infections. On one evening a session was held at the technical high school to teach parents about HIV/AIDS. There was also a candle-light vigil and on 1st December there was a parade and a health fair, with free HIV counseling and testing available.

AIDS Committee

The committee remains mostly inactive due to a lack of funds and of members' time. However, with the arrival of new VCT personnel it is hoped that the committee will be restructured and reactivated in 2007. To find out more, contact Dr. Osorio at the hospital.

Self-Awareness Week

A self-awareness week was held at the Technical College, including two days of events focusing on HIV/AIDS and how it affects families. Representatives from Orange Walk, Belize City, and Cayo organizations took part and gave presentations to students, teaching about HIV/AIDS and other sexually transmitted infections.

HECOPAB

The health educator has mainly been conducting outreach in rural schools recently and working on World AIDS Week. She plans to hold workshops on HIV/AIDS for sex workers, the police, BDF, and barbers over the next few months.

Women's Department

The Women's Department had a gender-based violence fair on 24th November, which incorporated information on HIV/AIDS.

Youth For The Future (YFF)

The Corozal YFF branch started dealing with HIV/AIDS in late 2005. The YFF representative, Mr. Ivor Nicholson (607-6256), along with a group of volunteers, attended AAA's 16-week course on HIV/AIDS counseling and home-care for PLWHA. They have set up an AIDS Committee, which includes school teachers, nurses, young people, and community activists. They hold meetings when they would like to plan events, offer information-sharing and referrals, and provide resources.

VCT Center



The VCT nurses see around 5 to 25 people per week for HIV tests, and also encourage testing for pregnant women.

Hospital AIDS Committee

Eight hospital personnel have joined together, under the leadership of Mr. Clemente Novelo, to conduct HIV/AIDS outreach work. Their plans include holding education sessions in schools and doing talk shows.

Caring for Children

The Atlantic Bank sponsored a fundraiser on 2nd December for the Caring for Children program, with radio and TV coverage. Also, a Christmas basket will be placed in the bank for donations for HIV/AIDS affected families, such as clothes and toys.

World News

Looking 25 years into the past and the future



The year 2006 marked the 25th anniversary of AIDS. Although it is thought that HIV began in Africa around the early 1950s, it remained unnoticed until it appeared in the USA in 1981. In the early years, action to control the spread of HIV/AIDS was limited by society's denial and ignorance of the disease, and stigma and discrimination against those infected. Some countries have made great progress in changing this, but others are still weakened by their society's response.

AIDS has already killed over 25 million people and research by the UN indicates that the next 25 years will see even more deaths from AIDS. By 2025 the death toll is predicted to potentially reach 18 million in China, 31 million in India, and 100 million in Africa. Over the last few years more effective medicines, better access to treatment, and improved prevention have started to lower the predictions, but the future still looks bleak.

Although many potential vaccines are being tested, the search for an effective vaccine has so far failed, partly because the virus rapidly evolves into new strains that are resistant to existing vaccines. In contrast, much progress has been made with antiretroviral (ARV) medicines so that in countries where mixtures of the strongest ARVs are available, AIDS has changed from a death sentence to a manageable chronic illness. However, fewer than one in five people with HIV/AIDS globally receive the ARV medicines they need.

As well as the personal suffering of infected individuals and their families, AIDS has the potential to devastate whole countries' education systems, agriculture, industry, and economy as more people are weakened and killed by the disease.

In Africa, where AIDS is already the leading cause of death, the incidence of HIV is still increasing and may not reach its peak for another 10 years. In Botswana, which has the world's highest infection rate, a child born today can expect to live for less than 30 years. The fate of Africa hangs over much of Asia, Eastern Europe, and

the Caribbean, but fortunately there are still opportunities to prevent HIV/AIDS from escalating to such alarming rates if all levels of society become involved.

Sources: 'AIDS Relentless March Leaves Legacy of Misery', www.thebody.com; 'Fight Against HIV/AIDS Pandemic requires All Levels of Society, Behavior Change', Kaiser Daily HIV/AIDS Report (21st November 2006)

Regional News

**DISCRIMINATION DOES NOT
PROTECT AGAINST HIV... IT HURTS**

It is widely recognized that stigma and discrimination are huge barriers to the effectiveness of interventions to reduce the spread of HIV/AIDS in the Caribbean, as in many other places worldwide. They have damaging effects on interventions right through from prevention, to testing, treatment, and the care and support of those infected and affected by the virus.

The OUCH! Campaign, run by the Caribbean Epidemiology Center (CAREC), seeks to bring about a change from the pain of rejection to an environment of tolerance and acceptance, by appealing for behavior change from the community in general, but specifically from healthcare workers and the private sector. The campaign gives a human face to HIV/AIDS and sends out the message: "Stigma and discrimination does not protect against HIV... It hurts."

It doesn't just hurt individual PLWHA, by potentially robbing them of their human rights and making them feel isolated, demoralized, and afraid. A fear of discrimination can stop people from using condoms and adopting other behaviors to reduce their risk of catching or spreading HIV. It can also stop people from getting tested, prevent people from acknowledging that they are HIV positive, and prevent PLWHA from seeking treatment. It can limit the education, care, and support that families and communities are able to provide. At a national level, fear of discrimination can lead to under-reporting, preventing the authorities from getting a true picture of the epidemic, which will affect the planning and provision of services for PLWHA and other vulnerable groups.

The OUCH! campaign aims to get people to think differently about HIV/AIDS and those living with the disease, and to overcome their prejudices. It is hoped that this will be

If I could die and live again...

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I was seven months pregnant when I found out I was HIV positive, and when my baby was born, she was tested too. When they told me I was infected I felt very bad, but the thing that hurt me more was when they told me my baby had it too. When they told me my baby was going to die, I was running crazy!

I told my Dad I have HIV and he still treats me like normal. At the moment me and my baby are living at my Dad's house, but I want to get my own place. Maybe in the future when I get ill, I will live with my Dad again. He is the only person I've told that I have HIV. A lot of people know me, and if they know I have HIV they might not treat me the same. I saw one person who may have the same thing, and all her friends back away from her.

I come for tests every three months and so far I've got a very low level of the virus, so I'm healthy and can live a normal life without needing to take medicine. Things are hard, but I believe God will help me through. I know He is always with me. It's best not to be afraid and to take the treatments how they say, and then everything keeps the same. I'm not afraid of too much for me, but only for my baby. I am afraid when she gets sick. The medicine is helping her though. I'm glad there is medicine so that me and my baby can live longer, healthy lives.

Sometimes when I remember I've got this sickness I sit down and cry. Then I think, "Why do I cry?" I am still healthy and there are medicines. I'm still living and God still loves me, and I say, "Thanks God, and thanks for

those who made the medicines." If I could die and live again with no sickness, I would think about my life first – no drugs, no alcohol, no doing things for money. But when you're young, you feel nothing is going to get you, and then you feel the pain and say, "Why? Why?"

For confidential support and referral information, contact AIDSLink@hotmail.com.

OUCH! campaign

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brought about using the power of the mass media to reach a wide audience, as well as encouraging one-to-one interventions for behavior change. To achieve this CAREC has produced a variety of products for the media (radio, TV, and newspaper ads), as well as printed products (booklets, posters, leaflets, and cartoons) which can be used for example in places where healthcare and HIV/AIDS services are provided.

Because stigma and discrimination are often based on ignorance and fear, it is important that these interventions are directed at providing opportunities for increasing interactions between PLWHA and the community.

All materials are intended to be used to support interventions in the Caribbean. For more information, or to access copies of the products, go to www.carec.org.

Belize Quarterly Statistics

From July through September 2006:

122	number of new HIV infections reported
13	number of new AIDS cases reported
21	number of AIDS-related deaths reported

These figures are all higher than in the previous quarter. These are only the cases that were reported to the Ministry of Health. The true number of cases is not known. If you would like an email copy of the full quarterly reports you can call 822-2325, or ask your local hospital to photocopy theirs.

AIDS Link

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