

SPECIAL
POINTS OF
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- Aging with HIV - Is it a gift or a curse?
- Empowerment workshops at the SCS school
- The most homophobic place on Earth?
- HIV fears put repeal of homophobic laws on the table for Caribbean nations

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Body, Mind AND Spirit Creating an Epidemic of Health

JAN — MAR 2011

QUARTERLY ASGS NEWSLETTER

Aging with HIV - Is it a gift or a curse?

Who was diagnosed in the late 80's early 90's with HIV infection didn't have a doubt about a premature passing. At that time such a diagnosis was still a death sentence and most people living with HIV (PLHIV) just wanted to make the best of the short time they had to live. You didn't prepare your future, you prepared your funeral. After the first anti retroviral therapy (AZT) was approved in 1990, a regime of 400 mg every four hours (also during the night), there was hope, but the enormous side effects such as anemia, neutropenia (a disorder which lowers a particular type of white blood cells), hepatotoxicity (liver damage), cardio-

myopathy (heart muscles disease), myopathy (muscle disease), vomiting, headaches, loss of appetite, change in body fat distribution, sleep problems and eventual death were devas-



tating. Many patients back then died from the side ef-

fects of AZT.

A new generation of HIV treatment named HAART (Highly Active Anti Retroviral Therapy) was approved by the FDA in 1997. The prayers were answered and finally there were drugs available with less life threatening side effects. In 2000, 2004 and 2006 more drugs were approved by the FDA. All over sudden HIV was not a death sentence any more. Even though HAART does not work for every one or fails within years of taking, mainly because of poor adherence to medications, most HIV clients are long time survivors and can live normal and productive lives.

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Empowerment Workshops at the SCS — March 21-23

Girl Power Saba

The Girl Power program is an educational program designed to enhance the self-esteem, self-worth and gender pride of girls ages 13-18. This educational program also aims to enhance skills focused on proper communication and negotiation, encourage either abstinence or condom use as well as general knowledge of STDs and HIV.

Girl Power (GP) also talks



A girls group watching a clip about Photoshop effects.

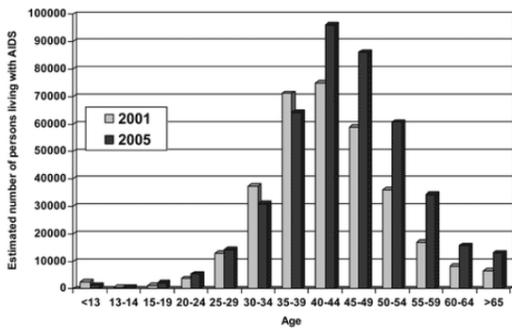
influences our body image and self esteem. It talks about lyrics and how they describe woman. How magazine covers/pictures are manipulated and reflect something which is a fake and young girls are finding themselves under pressure living up to that image. Positive examples in music and poetry are also given to create awareness.

about media and how it in-

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Figure 1
Age distribution (in years) of HIV-infected individuals living in the United States (reproduced with permission from Luther et al. [2]).



**Continuation from page 1
Aging with HIV:**

After the euphoria in the last decade, a number of questions are looming on the horizon. On such question is how does aging with HIV effect treatment for HIV and age related illnesses?

The CDC (Center for Diseases Control) expects that in 2015 over 50% (500,000 people) of all HIV infected persons living in the US will be 50 years or older. Also new HIV infections are on the rise amongst adults over 50 years. By 2015 it is anticipated that almost 100% of our islands HIV infected persons will be 50 years of age or over! This presents quite a

challenge for HIV treatment since many drugs for diabetes and high blood pressure for example interfere with HIV medication and can cause serious health issues. It is also found that PLHIV age much faster than HIV negative people and therefore will be in need for additional drugs much sooner.

Another issue is the financial security. Never expecting to live that long, many PLHIV are financially not prepared to reach retirement age. This fact also raises the question, who will take care of HIV positive elderly? Are the old age homes and home nurses prepared to cater to the special needs and the monitoring of adherence?

These questions and many other are on the front burner with regards to the improvement of the quality of life of PLHIV and their families, and for that matter with the govern-

ments of many nations as governments will have to prepare to cover potentially higher costs for HIV positive clients in the elderly homes, possibly sooner rather than later, if the needed attention is not given to the improvement of the quality of life of the PLHIV through improved regimen therapies to avoid certain side effects that can have more costly and more difficult to manage 2nd line care and treatments. It is only our hope that governments along with other stakeholders that are involved in the implementation and execution of the treatment and care, and support areas of PLHIV, are giving the issue serious reflection and the necessary improvements where needed, rather sooner than later.

Martina Lebinger



Continuation from page 1, empowerment workshops SCS:

GP talks also about how to plan goals how to reach them. It gives participants a very practical tool as in how to "map out your live" so that goals can be reached. It talks about relationships, the difference between a healthy and unhealthy one. Communication is practiced so

that we can be strong in our communication with our partners but fair and reasonable. It also talks about when talking does not work anymore and walking away is the only healthy choice.

The participants were very engaging and contributed with honesty and personal experiences. It is made clear that such a program is desperately needed at school. Provid-

ing a perfect platform to educate life skills to Saba's young adults and preparing them for adult hood.

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Real Men facilitator Bastiaan Janssens with his group

Real Men Program

In its new curriculum, "Real Men, Urban Teens Write About How to Be A Man" Youth Communication, Inc. provides stories and lessons in which young men write about making transformations that help them break out of limiting stereotypes and achieve their goals in school, in relationships, and on the job. Interactive lessons help teachers and youth workers explore the themes of the stories with their students. (source: Open Society Foundations)

For the first time and with the knowledge that this curriculum will need to be adapted to Saba's needs, five Real Men facilitators did present stories written by young men in the USA to the students. The stories mainly talked about father figures, values, creativity, car-

rier choices and homosexuality.

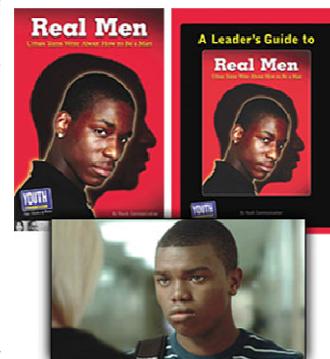
During the workshop it was clear that a lot of sensitization in regards to homosexuality needs to be done for both the students and the teachers alike. It is warranted that meaningful instruction on the issue of human reproductive health and sexuality inclusive of sexual orientation is in dire needs in our high school, and much evidence, based on attitudes and inputs from students and even some teachers indicate that such teachings need to be streamlined into the curricula.

Also screening of our teachers must be stepped up to ensure that the individuals that we are inviting into our communities are not fostering discriminatory attitudes towards our students but rather supporting images that reflect a strong self and individuality, rather

than promoting another one's perception of right in their country of origin.

The organization was very pleased with the positive feedback that the organization received from the minister of Education, Wellbeing and Science, during her latest visit on the island during the Month of March prior to the Education Conference that was held on the island of Bonaire, on both our programs, namely Girl Power and Real Men, that are being carried out in the schools.

There is 'talk' of incorporating parts of these lessons into the curricula in the years ahead.



Clinical HIV management workshops on Saba

From March 16-18 2011 Dr. Anita Radix presented a number of workshops for clinical HIV management for local physicians and medical staff from both Saba and St. Eustatius.

HIV treatment, side effects and interaction with other medications were discussed in detail bases on cases presented.

Because of the great demand, Dr. Radix created a separate workshop for the nurses, lab technicians and other medical staff of the medical centers. Besides basic information about HIV and treatment the A.C.T.S. program was presented, a program engaging nurses into the routine HIV testing and helping everyone to get tested.

Additionally Dr. Radix met with a number of the PLHIV and also in-

formed them of more suitable



Dr. Radix facilitating the workshop for nurses

treatment and care options to ensure an improved quality of life while preventing earlier onset of other diseases and advertng more serious illnesses that can occur due to present, outdated, HIV treatment therapies that are still being utilized on our island but

not in any industrialized country. Continued training is foreseen in the near future and on a more continuous basis to improve on the treatment and care, and support aspects related to HIV infection, at several levels within the healthcare arena but also within the target group of PLHIV and yet other stakeholders.



Physicians' workshop

Penalties for practicing homosexual acts in selected Caribbean countries:

Life Imprisonment:

- Barbados
- Guyana

25 years imprisonment

- Trinidad and Tobago

15 years imprisonment

- Antigua & Barbuda

10 years imprisonment

- Belize
- Dominica
- Grenada
- Jamaica
- St. Lucia
- St. Kitts & Nevis
- St. Vincent and the Grenadines

**EVERY
HUMAN
HAS
RIGHTS**

The Most Homophobic Place on Earth?

Brian wears sunglasses to hide his gray and lifeless left eye—damaged, he says, by kicks and blows with a board from Jamaican reggae star Buju Banton. Brian, 44, is gay, and Banton, 32, is an avowed homophobe whose song *Boom Bye-Bye* decrees that gays "haffi dead" ("have to die"). In June 2004, Brian claims, Banton and some thugs burst into his house near Banton's Kingston recording studio and viciously beat him and five other men. After complaints from international human-rights groups, Banton was finally charged last fall, but in January a judge dismissed the case for lack of evidence. It was a bitter decision for Brian, who lost his landscaping business after the attack and is fearful of giving his last name. "I still go to church," he says as he sips a Red Stripe beer. "Every Sunday I ask why this happened to me."

Though familiar to Americans primarily as a laid-back beach destination, Jamaica is hardly idyllic. The country has the world's highest murder rate. And its rampant violence against gays and lesbians has prompted human-rights groups to confer another ugly distinction: the most homophobic place on earth.

Between 2004 and 2006, two of the island's most prominent gay activists, Brian Williamson and Steve Harvey, have been murdered — and a crowd even

celebrated over Williamson's mutilated body. Perhaps most disturbing, many anti-gay assaults have been acts of mob violence. In 2004, a teen was almost killed when his father learned his son was gay and invited a group to lynch the boy at his school. Months later, witnesses say, police egged on another mob that stabbed and stoned a gay man to death in Montego Bay. And this year a Kingston man, Nokia Cowan, drowned after a crowd shouting "batty boy" (a Jamaican epithet for homosexual) chased him off a pier. "Jamaica is the worst any of us has ever seen," says Rebecca Schleifer of the U.S.-based Human Rights Watch and author of a scathing report on the island's anti-gay hostility.

Jamaica may be the worst offender, but much of the rest of the Caribbean also has a long history of intense homophobia. Islands like Barbados still criminalize homosexuality, and some seem to be following Jamaica's more violent example. In 2006 two CBS News producers, both Americans, were beaten with tire irons by a gay-bashing mob while vacationing on St. Martin. One of the victims, Ryan Smith, was airbused to a Miami hospital, where he remained in intensive care with a fractured skull. Gay-rights activists attribute the scourge of homo-

phobia in Jamaica largely to the country's increasingly thuggish reggae music scene. Few epitomize the melding of reggae and gangsta cultures more than Banton, who is one of the nation's most popular dance-hall singers. Born Mark Myrie, he grew up the youngest of 15 children in Kingston's Salt Lane — the sort of slum dominated by ultraconservative Christian churches and intensely anti-gay Rastafarians. Banton parlayed homophobia into a ticket out of Salt Lane. One of his first hits, 1992's *Boom Bye-Bye*, boasts of shooting gays with Uzis and burning their skin with acid "like an old tire wheel."

Banton's lyrics are hardly unique among reggae artists today. Another popular artist, Elephant Man (O'Neil Bryant, 29) declares in one song, "When you hear a lesbian getting raped/ It's not our fault ... Two women in bed/ That's two Sodomites who should be dead." Another, Bounty Killer (Rodney Price, 33), urges listeners to burn "Mister Fagoty" and make him "wince in agony."

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Reggae's anti-gay rhetoric has seeped into the country's politics. Jamaica's major political parties have passed some of the world's toughest anti-sodomy laws and regularly incorporate homophobic music in their campaigns. "The view that results," says Jamaican human-rights lawyer Philip Dayle, "is that a homosexual isn't just an undesirable but an unapprehended criminal." Meanwhile, gay-rights ac-

tivists say Jamaican police often overlook evidence in anti-gay hate crimes, such as the alleged assault by Banton in 2004. His accuser, Brian, says cops excised Banton's role from their reports of the 2004 beating. A police spokesman denies that. But in dismissing the case earlier this year, the judge in the trial warned Banton to avoid violence and "seek legal recourses" when he has complaints

against gays in the future. Banton refused TIME's request for an interview. His manager, Donovan Germain, insists that the singer is innocent and that "Buju's lyrics are part of a metaphorical tradition. They're not a literal call to kill gay men."



By TIM PADGETT/
KINGSTON (TIME)

HIV fears put repeal of homophobic laws on the table for Caribbean nations

Examples abound of government-supported homophobia in the Caribbean. In a recent UN resolution to condemn arbitrary killings based on various identity features, nearly all Commonwealth Caribbean states voted to remove "sexual orientation" as a category.

With the exception of the Bahamas, former British colonies of the region all retain laws criminalizing male homosexuality. These laws either date back to, or are a literal transplantation of the Victorian 1861 Offences against the Person Act. Offences of "buggery" or anal sex and "gross indecency" meaning any sexual intimacy between men, remain on the books.

A judge once said that the risk of prosecution in places where sodomy laws exist

makes gay men into "unapprehended criminals". In HIV prevention and care, the anti-homosexuality pro-



Dr. Denzil Douglas, back row, far right, prime minister of St Kitts and Nevis, has called on fellow Caribbean leaders to look again at reform, though he has not yet initiated any changes. Photograph: Odd Andersen/PA

scriptions are obstacles that reinforce societal stigma and discrimination.

Ian McKnight, executive director of Caribbean Vulnerable Communities (CVC) – a coalition of interests representing high-risk groups in the fight against HIV and Aids in the Caribbean, says the law makes

reaching out to men who have sex with men (MSM) a high-wire operation: "Outreach workers face harassment for distributing condoms. The police aren't afraid to throw the book at anyone."

In 1967 consensual homosexual acts were decriminalized in England and Wales. In the case of *Dudgeon v UK* in 1981, the European court of human rights agreed with a gay man from Northern Ireland

that though he had not been prosecuted under the provisions of the 1861 Act, the "maintenance in force of the impugned legislation constitutes a continuing interference with the applicant's right to respect for his private life".

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A UN Aids report on the Caribbean says that less than 40% of HIV prevention programs geared towards MSMs actually reach the target audience.



It bears noting that the UK government's defense in the Dudgeon case raised similar themes that Caribbean countries now voice in their opposition to homosexuality: that the laws protected religious, moral and cultural values. Apart from the purely substantive reason the court used to dismiss these arguments, there was an equally compelling quasi-political factor in its decision. The "margin of appreciation" –ie the latitude that states have within the European Convention on Human Rights system to maintain individual positions on sensitive issues – was not applied. The court's majority reasoned that changing attitudes towards gay rights already formed the practice in other European member states and as such, Northern Ireland had no basis for an exemption. No such cohesive system of human rights monitoring exists among Caribbean countries. Decisions of tribunals within

the UN or Inter-American systems of human rights are not routinely incorporated into domestic law in Caribbean countries, as happens in the UK after rulings from the European court of human rights. Ironically, the retention of British Victorian laws has become a marker of how Commonwealth Caribbean nations define themselves as independent states – and distinctly from Britain. Gay rights activism from metropolitan centers in Europe and North America are seen as direct challenges to national sovereignty. A UN Aids report on the Caribbean says that less than 40% of HIV prevention programs geared towards MSMs actually reach the target audience. In an apparently bold political move, St Kitts and Nevis Prime Minister Dr Denzil Douglas, as Caricom lead on HIV, encouraged fellow PMs to revisit the matter of discriminatory laws such as those prohibiting homosexual-

ity. Douglas's rhetoric and progressive posture seem well-fitted for obtaining funds to combat the disease. As Ian McKnight from CVC notes: "The funding agencies are clear that decriminalization is critical for access to treatment programs regarding MSMs." But having heard the St Kitts and Nevis PM make his reform call at other international forums, McKnight is skeptical: "Why then hasn't he [PM Douglas] initiated these changes in his own country?" No other regional leader has taken up Douglas's entreaty or been similarly vocal on these issues. But inching progress may be measured by the fact that repeal of anti-homosexuality laws is now on the table in the Caribbean. It remains poignant however, that the need to address HIV is what acts as a spur in moving along this dialogue.

Philip Dayle, guardian.co.uk

What is diabetes? What causes diabetes?

Diabetes (diabetes mellitus) is classed as a metabolism disorder. Metabolism refers to the way our bodies use digested food for energy and growth. Most of what we eat is broken down into glucose. Glucose is a form of sugar in the blood - it is the principal source of fuel for our bodies.

When our food is digested the glucose makes its way into our blood-

stream. Our cells use the glucose for energy and growth. However, glucose cannot enter our cells without insulin being present - insulin makes it possible for our cells to take in the glucose.

Insulin is a hormone that is produced by the pancreas. After eating, the pancreas automatically releases an adequate quantity of insulin to move the glucose present in our blood into the cells, and

lowers the blood sugar level.

A person with diabetes has a condition in which the quantity of glucose in the blood is too elevated (hyperglycemia). This is because the body either does not produce enough insulin, produces no insulin, or has cells that do not respond properly to the insulin the pancreas produces.

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This results in too much glucose building up in the blood. This excess blood glucose eventually passes out of the body in urine. So, even though the blood has plenty of glucose, the cells are not getting it for their essential energy and growth requirements.

There are three main types of diabetes:

Diabetes Type 1 - You produce no insulin at all.
Diabetes Type 2 - You don't produce enough insulin, or your insulin is not working properly.

Gestational Diabetes - You develop diabetes just during your pregnancy.

(World Health Organization) Diabetes Types 1 & 2 are chronic medical conditions - this means that they are persistent and perpetual. Gestational Diabetes usually resolves itself after the birth of the child.

Treatment is effective and important

All types of diabetes are treatable, but Type 1 and Type 2 diabetes last a lifetime; there is no known cure. The patient receives regular insulin, which became medically available in 1921. The treatment for a patient with Type 1 is mainly injected insulin, plus some dietary and exercise adherence.

Patients with Type 2 are usually treated with tablets, exer-

cise and a special diet, but sometimes insulin injections are also required.

If diabetes is not adequately controlled the patient has a significantly higher risk of developing complications, such as hypoglycemia, ketoacidosis, and nonketotic hypersmolar coma. Longer term complications could be cardiovascular disease, retinal damage, chronic kidney failure, nerve damage, poor healing of wounds, gangrene on the feet which may lead to amputation, and erectile dysfunction.

Medical News Today



Gone NUTS?! Eating nuts can lower cholesterol, say experts

The review of 25 studies, involving nearly 600 people, showed eating on average 67g of nuts - a small bag - a day reduced cholesterol levels by 7.4%.

The US Loma Linda University team believes nuts may help prevent the absorption of cholesterol. UK experts said the research showed nuts were an important part of a healthy diet, but warned against eating nuts covered in sugar or salt.

Previous work has indicated eating nuts regularly is beneficial, but the Archives of Internal Medicine study set out to put an accurate figure on the effect.

The people involved ate 67g of nuts a day on average, over

a period of three to eight weeks.

As well as improving cholesterol levels, it also reduced the amount of triglyceride, a type of blood fat that has been linked to heart disease.

However, the impact was least pronounced among the overweight.

It is not yet clear why nuts have this effect, although one suggestion is that it is down to the plant sterols they contain, which are thought to interfere with cholesterol absorption.

Lead researcher Joan Sabate said increasing nut consumption as part of a healthy diet should be recommended.

He added: "The effects of nut consumption were dose related, and different types of

nuts had similar effects." Ellen Mason, senior cardiac nurse at the British Heart Foundation, agreed, but she urged people to go for unsalted nuts.

"Apart from salted peanuts at the pub, nuts in sugary cereals or the traditional Christmas selection, nuts have been largely lacking in our diets in the UK," she added.

The study was carried out by independent researchers, although it was partly funded by the International Tree Nut Council Nutrition Research and Education Foundation.



"The effects of nut consumption were dose related, and different types of nuts had similar effects"

Lead researcher Joan Sabate





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“Creating an Epidemic of Health”

The ASGS welcomes new ideas, new approaches, new faces!

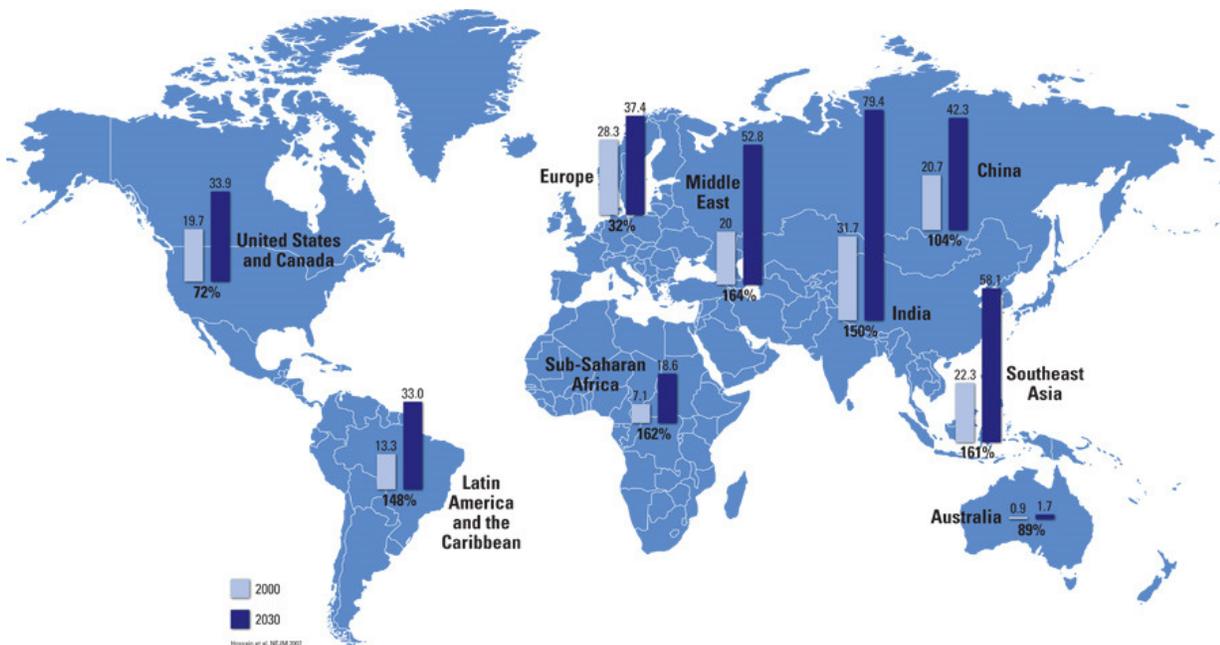
We invite you to join our membership and help us in our ongoing efforts to empower the community, especially the youth of our island to live a healthy lifestyle in an environment free of stigma.

We offer you an opportunity to give back to your new community in a positive and beneficial manner to both the community and oneself.

We welcome your contribution and excellent abilities. These attributes can open the doors to creative and expressive community outreach.



Worldwide Prevalence of Diabetes 2000-2030



This newsletter is funded by:

