GRAPEVINE

The Newsletter of Other Options, Inc.

October, 1992

AIDS DRUG REIMBURSEMENT PROGRAM: THE FACTS

1. The program administered through Department of Human Services and State of Oklahoma funded jointly by federal and states funds called the AIDS Drug Reimbursement program that provides the following medications to persons with HIV disease has been terminated (medications are AZT, Fluconazole, DDI, DDC, Pentamidine, Gancyclovir, Interferon). Yes, I know, poor planning.

2. Contractual period was to have been April 1, 1992 through March 31, 1993. $241,299 was designated for AIDS Drug Reimbursement and $62,500 designated for Home/Community Based Care.

3. Because of an increase in people taking medications and the state did not plan ahead for this increase, federal and state funds have run out and now have stopped.

4. An amount considered a maintenance effort consisting of $138,293 has also been spent. There is no more contracted.

5. The contract for those on the program will continue until October 31, 1992. DHS must continue to take new apps until then.

6. Call **1-800-522-8555** - express your concern clearly and decisively without anger or shouting. "I am against the DHS/ST of Oklahoma stopping the AIDS Drug Reimbursement program because it will cost the state more money in the long run to hospitalize or put in nursing homes those who will become sicker because ..... etc., Be brief and to the point - Call as many times as you can.

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WHY YOU SHOULD BE TESTED

FOR THE HUMAN IMMUNODEFICIENCY VIRUS (HIV)

TO TEST OR NOT TO TEST!

If you suspect you have come in contact with Human Immunodeficiency Virus (HIV) the decision to test is made. It use to be WHETHER one should test but, today the decision has shifted to WHEN. You may have had unprotected sex with an infected person as long ago as 1978; perhaps even the lover or spouse you have been faithful to all that time. Or, you or your sexual partners may have shared needles or received a blood transfusion or blood product before 1985.

Testing sends a powerful signal to begin critical immune system monitoring and treatment.

Testing provides a motivation for responsible sexual behavior and lifestyle changes which support health.

Testing ends indecision and denial.

WHAT IS HIV AND AIDS?

HIV is Human Immunodeficiency Virus (remember HUMAN when you talk about misquotes!). HIV is a virus that slowly destroys the body's ability

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OTHER OPTIONS FRONT DESK

To our ongoing readers and supporters of Other Options: With some innovative and creative luck you should be receiving the Grapevine more often than usual. The Grapevine is a volunteer-produced newsletter focussing on Other Options and HIV/AIDS epidemic. Our volunteers are wonderful and caring people that have lives of their own other than AIDS helpers and sometimes the newsletter gets bumped to the back burner in order to do hands-on work. The Grapevine is really a luxury and not a necessity.

The old-timers who have received the first 3 issues will continue to stay on this list. It is a small list. If you are receiving this for the first time the chances are good you will continue if we receive a donation from you. We hope you will. The cost of the newsletter will take direct services away from our clients. We are not willing to do that to fund this newsletter. We have enclosed a donation envelope. Make a donation - say it is for the newsletter.

WELCOME, NEW READERS!

If you are one of the lucky folks to be on our expanded mailing list, Welcome! We hope you enjoy the newsletter.

As always we invite readers to send in questions, articles and whatever. If you see an article or opinion with which you disagree, please let us know. We try our best to be informative, accurate and fair. ●

THE NAMES PROJECT

OKLAHOMA CITY - THE QUILT

The fifth anniversary of the NAMES Project marked the return of the Quilt to OKC. A massive tribute to the tens of thousands of people who died of AIDS.

The following paragraph was printed in the Gayly newspaper: "The Quilt was conceived by Cleve Jones during the time he was helping to organize the annual candlelight march in honor of San Francisco Supervisor Harvey Milk and Mayor George Moscone, who were assassinated in 1978. Jones asked march participants to write down the names of loved ones who had died AIDS. At the end of the march, those names were taped onto the walls of the San Francisco Federal Building, reminding Jones of a patchwork quilt and inspiring him to formulate plans for the NAMES Project AIDS Memorial Quilt. In August 1987 the NAMES Project was formally organized".

Today the Quilt represents some 15-acres, 21,000 panels and will be displayed in Washington, D.C. on October 9-11, exactly 5 years later.

Always a very memorable event for me. Other Options volunteers participated in the names announcements and gained an experience they will never forget. It was a time for PLWA's, friends and health professionals to say Hi and not have to play telephone tag or answering machine message to do it. We honored our dead and educated our living. "The Quilt continues to: confront the public with the reality of the devastation of AIDS, provide a positive and creative means of expression for the living whose lives have been touched by the epidemic, and raises needed vital funds and encourages support for people with HIV disease."

A friend and OOI volunteer invited many people to attend and participate in the memorial. One particular family came and brought thier 4 children ranging in age from 9 to 15 years. A very loving and conscientious family. They entered the Quilt display at the Myriad Convention Center and stationed themselves against the back wall facing the center with a clear view of the quilt process unfolding.

Later they approached their friend and commented on the event. They thanked him for inviting them to participate in "one of the most memorable experiences we will ever have and will never forget". The father said it had saved them "a million words in talking to their children about sex and AIDS." The parents comment was that the quilt became a tasteful way of introducing and answering questions to their children.

It was very expensive to bring the quilt here but the cost it will save in lives far outweighs the money spent. The Quilt allowed our living to express their grief in an appropriate way. The hours they must have spent sewing, talking, crying was a burden lifted for many. The chance to honor our dead was memorable for all. "Remember the NAMES."

Other Options as well as RAIN, Loaves and Fishes, Okla City HIV/AIDS Coalition, ASP, Alahaya, St. Lukes, Triangle Association, plus at least 8 agencies from the Tulsa area are benefitting from the work of The Names Project Oklahoma. We are so grateful this organization recognized all of us and was able to fund each of us. ●

The Facts *continued from Page 1*

7. See list on page 57 and page 441 of the "AIDS for HIV/AIDS" handbook(Consumer Assistance and Oklahoma State Government and Nation) for more numbers and instructions. Get a list of Senators and House of Representatives by calling STATE CAPITOL.

8. The goal is to put the AIDS Drug Reimbursement Program back on the agenda.

9. OUR GOAL IS TO HAVE THEM FUND US UNTIL DECEMBER 31. The Senate meets again in January 1993. The ADR program can be put on the docket and voted for at that time.

10. Write each and every one of the Senators and Representatives. Some are not cognizant of what is happening. Advise them, they will advise the Governor.

11. AT ISSUE IS AZT (OR OTHER MEDS) AT A COST OF $198 A MONTH (AVERAGE) VERSES OKLA MED CENTER HOSPITAL AT $800 PER DAY. AZT (OR OTHER MEDS) AT A COST OF $198 A MONTH VERSES OKLA MEMORIAL HOSPITAL INPATIENT CARE AT A COST OF $16,800 FOR 21 DAYS (AVERAGE).

12. ONE PHARMACY IN JUNE 92 HAD 86 PERSONS ON GRANT PROGRAM. COST OF $16,800 PER MONTH. THAT FIGURE IS THE ENTIRE MAINTENANCE BUDGET FOR 86 PERSONS. ●

BAZAAR OR GARAGE SALE

Other Options needs help with a garage sale/bazaar/bake sale etc. We have accumulated tons of "stuff" and so have many of our friends. We would like that special person to volunteer to be a "driving force." Someone who loves to catalog, browse through old treasures, accumulate, sort and set up the spot, call volunteers for truck and stuff and organize at least 3-6 people to assist. Call Other Options. ●

THE GRAPEVINE UPDATE

Total number of AIDS cases reported in the United States through August, 1992: 230,179 from the Morbidity and Mortality Weekly Report (MMWR) June, 1992

The following information is from the June 1992 Center For Disease Control HIV/AIDS Surveillance Update by exposure category.

Men who have Sex with Men:	130,822
Injecting Drug User(IDU) Female and Heterosexual male:	51,477
Men who have Sex with Men and Inject Drugs:	14,487
Hemophilia/coagulation disorder:	1,857
pediatric	179
Heterosexual Contact:	14,045
Blood Transfusion/Blood Component or tissue	4,659
pediatric	300
Undetermined: adult	8,916
pediatric	104
Mother W/HIV infection:	3,315

Known deaths from AIDS in the United States: 152,153

Percentage of reported AIDS cases in the United States that have resulted in death:

Source: Center for Disease Control: HIV/AIDS Surveillance Atlanta.

State of Oklahoma Jan 83 through July 1992.

Total number of AIDS cases reported in State of Oklahoma: 1061 100%

By AGE	cases	Percentage
Under 5	10	1 %
5 - 12	5	0 %
13 - 19	6	1 %
20 - 29	272	26 %
30 - 39	486	46 %
40 - 49	179	17 %
Over 49	103	10 %
Total	1061	100 %

By Sex	Cases	% Sex
Male	992	92 %
Female	69	7 %
Total	1061	100 %

TRANSMISSION CATEGORIES		Cumulative
Men who have Sex with Men:	728	69 %
Injecting Drug User (IDU)	81	8 %
Men who have Sex with Men and Inject Drugs	122	11 %
Blood Transfusion	40	4 %
Hemophiliac	20	2 %
Mother W/HIV Infection	9	1 %
Heterosexual Contact	33	3 %
None of the Above/Other	28	3 %

Persons who tested HIV positive in Oklahoma State: 1,697

Source: Oklahoma HIV/AIDS Surveillance: July 1992

- The world Health Organization estimates that 8-10 million adults and one million children worldwide have HIV (MMWR, 1991 stats)
- By the year 2000, 40 million people may be infected with HIV (MMWR)
- 28 % of Oklahomans still believe that they can get HIV/AIDS by DONATING BLOOD. (MMWR) NOT!!!!!
- Persons aged 20-40 comprise 81 % of reported AIDS cases in Oklahoma. (OSDH, April "92)
- Just remember that those 20 year olds probably contracted HIV in their TEENS!!!!! (ME!)

OTHER OPTIONS, INC.

Offers AIDS Educators For Yor Workshops and Seminars:

- Application process for Social Security, Medicare and Medicaid
- Applying for medical benefits
- How to file for state and federal benifits
- What about insurance - your rights, your benefits
- How to obtain your medical records
- Financial planning assistance
- Safe sex seminars and lectures
- Speakers for community groups, youth groups, schools, churches, fraternal and social organizations

Use Other Options as a format for your organization - Rain, ASP, Oasis. Please feel free to send in stories about your upcoming events and news, etc.

A living Gift.../A lasting tribute
The Other Options Oklahoma Memorial Program

THE BOOK

Other Options has been involved in the production of a book about people and AIDS. The book conception began in 1987 with suggestions by Ken Taylor and Blake Rothous to contain stories about people living, and dying with AIDS and the many caregivers and health professionals taking care of them. We began to get the word out soon after that and stories began to appear. Jim Carter was a formidable supporter in 1989-90 and he to began to accumulate stories.

For many of us this book has been a prayer, a meditation in preparation. We want to share what we have discovered on the journey into HIV disease, the inner experiences, the human interest stories, the joys and tears, funny moments and dying moments, fears and sadness, letters from and to. There are stories never to be forgotten we want you to write, read and share with others.

You are invited to submit your stories in whatever form you choose, typed is preferable but not necessary. Our plan is that all proceeds and sales will be distributed to support groups in the state that request them through a proposal process. We are targeting groups that generally have no support from government or state sources and just need help to keep open. ●

UP AND COMING EVENTS

FOR OOI OR OTHER ORGANIZATIONS

Art contest is set:

Other Options, Inc. wishes to invite artists who have HIV disease HIV/AIDS) to submit for consideration color slides (returnable - please send self-addressed return envelope) of their two or three dimensional works (fine arts, sculpture and photography) oils, pastels, etc. We also wish to invite other participants to share and join the party.... ●

WHY *continued from Page 1*

to fight disease. When a person becomes infected with HIV, he/she has HIV disease. As HIV invades the immune system, the person may progress slowly or quickly through various stages of HIV disease, from no symptoms (asymptomatic), through symptoms (symptomatic) and into advanced HIV disease or better known as AIDS.

AIDS is Acquired Immune Deficiency Syndrome. AIDS is identified by a physician when an HIV infected person develops one or more indicator defining infections. AIDS illness is life threatening and must be taken seriously.

WHAT IS THE HIV ANTIBODY TEST?

People are not tested for HIV - they are tested for HIV antibodies. The immune system creates antibodies to disease when the immune system knows they are there. HIV antibodies usually develop soon after a person is infected. They may not be detectable for 3 to 6 months. That is a good reason to be tested more than once if your results are negative but you think you may have been exposed. This is generally refereed to as the window period.

The antibodies (not the virus) can be detected by a test called the ELISA test. If you show a positive test result, the lab will run the test again on the same blood 2 more times. If it continues to be positive, the lab will confirm with a test called the Western blot.

HIV TESTING AND COUNSELING. WHY!!

The reason for getting yourself tested is very clear. The availability of HIV medication makes the choice of knowing versus not knowing an easy one.

Being told you are anti-body positive when you still havetime to carefully consider your options is better than waiting until you become ill. If you wait until then it may be too late to do anything about it.

An HIV positive test allows you to make choices. HIV disease should be regarded as a chronic manageable illness. Remember, there are things an individual can do, and one of those is EARLY MEDICAL AND PSYCHOLOGICAL INTERVENTION.

A negative test can relieve anxiety about your health status, and help you to live a more healthy life by avoiding exposure to HIV.

Part of the testing process, whether you are positive or negative, is education about living with or avoiding exposure to HIV/AIDS.

ANONYMOUS OR CONFIDENTIAL: WHAT'S THE DIFFERENCE.

In anonymous testing no names are used and records are not kept by the test site. You are the only person who will have access to the test results, and it is up to you whether you return for your results.

In confidential testing, you will be asked to provide your name. However, the test is sent into the health department with a sounddex code and returned to the test site with a test results, no name is exchanged. Clients names with positive test results are required by the State Health Department.

If you do not return for your test results, no attempt is made by the testing site to contact you.

WHICH KIND SHOULD I CHOOSE?

Many test sites offer both confidential and anonymous testing. Prior to taking the test, the counselor should ask whether you prefer confidential or anonymous testing. The kind of HIV test you choose will depend upon who needs to see the results, and how you feel about the possibility that others could see these results.

If you do not want anyone else to see your results, do take a confidential test. If you are not sure if the test is confidential or anonymous, ask your counselor before you give your name.

WILL MY PARTNERS BE TOLD IF I AM HIV POSITIVE?

Although it is hoped that you discuss your positive results with your sex or needle partners, and urge them to be tested also, notifying these partners is your responsibility and decision.

If your test is positive, your HIV

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counselor will talk to you about notifying your sex partners and needle partners. They will discuss the merits of health department notification of partners versus you telling your partners. Only one person is given this information at the Oklahoma State Department of Health STD/AIDS division. That is who your counselor will give your information to at your request only.

You are not required to give this information, and you cannot be refused counseling and testing if you do not provide this information.

THE ROLE OF COUNSELING IN HIV TESTING PROCEDURE

HIV antibody testing ALONE provides no protection or information to a person on how to protect oneself. Testing by trained counselor (Oklahoma State Health Department trained) on the other hand provide extensive information that allows you to make informed decisions. The primary purposes of counseling is to help all individuals understand the modes of transmission, teach and support behavioral changes to reduce the risk of developing HIV infection through safer sex practices. Counselors assist individuals to understand the disease process and for those infected, to seek early intervention and medical treatment as soon as possible, and prevent infected clients from transmitting HIV infection. Counseling with testing is a significant component of preventive strategies against HIV infection.

Other Options counselors are trained in providing effective and accurate counseling prior to HIV antibody testing. They assess accurate history, listen to and interpret physical and psychosocial assessment. Through effective interpersonal communication skills, the HIV tester/counselor disseminates information about HIV antibody testing methods, modes of transmission, primary prevention, and HIV disease. Essential to the counseling process, the tester/counselor identifies self beliefs, feelings and perceptions about the population at risk. Since the testing counselor communicates with clients from a variety of backgrounds and lifestyles, the tester/counselor is culturally sensitive and uses neutral language that does not make a value judgement about the clients behavior (i.e., uses the term IV drug user instead of IV drug abuser). Principles of effective counseling which the tester counselor incorporates into everyday counseling include: non-judgmental and unbiased communication, respect for each clients self-worth, self-image, and lifestyle. They are aware of psychosocial issues arising from HIV infection.

The meaning of a positive and negative HIV antibody test are discussed in detail. A positive test result means that the person has been exposed to and is infected with HIV, not that they have AIDS.

A negative test means that at this time there is no evidence that the person has been exposed to or is infected with HIV.

The major purpose of negative post test counseling is to give the results and reinforce preventive education and assess the last potential exposure to HIV. Unanswered questions come up and these are addressed. Retest is discussed. Modes of HIV transmission and methods of prevention are reviewed.

The major purpose of positive test counseling is giving test results. Counselors provide facts about HIV infection and available options about treatments and resources are given in length. The tester evaluates the clients coping mechanisms and support systems. Time is given for the clients to absorb the news because they may not "hear" everything else discussed. The clients is given facts about HIV and the counselor keeps in contact with the HIV + persons for at least 10 days. A net-work of support can be given to the positive person. These are some of the assessments the counselor will make. ●

CO-FACTORS FOR AIDS

SMOKING
ALCOHOL
DRUGS

SAD BUT TRUE. I AM - IF YOU ARE - INTO **SAD**

DRIVING FORCE NEEDED

The housing is out there. Tons of buildings boarded up. Grants are available. Other Options will support sponsors and aid anyone interested in getting involved in this worthwhile venture. You must have stick-to-it qualities. You must be dedicated to the cause of housing for HIV persons. Long term projections, budgeting and planning will be needed. You must have driving force qualities. Stable, reliable, and responsible and motivated people only need apply. No pay, no outward benefits offered. You should be able to bring people in who are or want to get involved. It is a real Karma burner. Lets do housing this year. We have a committee that would love to have your input. Call and get invited to dinner at Furr's Cafeteria on a Friday evening. ●

A VERY SPECIAL THANK YOU

To THE BUNKHOUSE AND THE PORTHOLE for the their continued care and concern for the HIV infected individuals. The Bunkhouse was especially full of talent on August 16. Sid, Deb, Michael, Bryan, Leann, Sean, Curt, the BH Cloggers - Bravo! To Shemoane, Marsha, Amanda and especially to Kitty who keeps coming through.

The Porthole's talented personalities were really on hand with song and fest to entertain us through August 1 night. Our favorite singers - Peggy Johnson, Rappin' J, Cuchla, and Tim L. help make the evening even more of a success. The PH Cloggers were on hand with great dancing. Thank you Sherry - for MC talent and hard work.

You continue to sustain all of our programs and support services. Not only Other Options, but all the AIDS groups that go to you for assistance. Thank you so much. ●

TO DISPEL A MYTH

Other Options is not like any other organization and continues to do the work of many for People Living With AIDS. We have been likened to another agency which we network and refer people to and they in turn do the same. No, we are not the same as them. We are a professional case-management, social service agency. We write, edit and publish the AIDS for HIV/AIDS handbook. We are OSDH trained HIV Testing and Counseling Site and monitor 4 other sites in the state of Oklahoma and provide field testing sites where needed. We provide prescription medication through pharmacies in the state over and above the AIDS drug reimbursement program, medicaid grant program and Ryan White Title II monies. Our accounts average $2000-$3000 per month and are accessed by discharge planners, social services, AIDS coordinators, health professionals who have expended all other resources.

Also some say we are independent of need and have grant money coming in frequently. NOT SO! OOI has not accepted federal grants as of yet. We do accept State funding in the way of testing laboratory blood samples and medical equipment to keep our testing clinics supplied. We depend entirely on individual donations and bequests, monthly tithers, book donations and benefits. We work entirely with volunteer help and do not maintain paid staff members. In the past 8 months I have received approximately $2,200 to offset my part time employment. When the clients needs outweigh my expenses I take care of the client. While we actively seek grants and corporate donors, it is the individual donors, small businesses, artist and entertainers, night club owners who do benefits that keep OOI open and operating. We must continually ask you to expand your giving. Put OOI in your monthly budget. Add OOI to your bill collection. Take that contribution envelope enclosed and put it with next months bills to be paid and tithe to us as you do to any non-profit organization. ●

ABOUT THE GRAPEVINE

The Grapevine has been created - to share guidance and information, to strengthen our commitment to the HIV-infected individual and to invite you to share stories, problems and solutions with all of us. We continue to exchange vital, and accurate information regarding your health. Once again, articles and communications contained in the newsletter are for your guidance and decision making. They do not constitute an endorsement of any kind. Before using the services of any group or person, verify their motives, make sure the information etc., passed between you and the service will be absolutely confidential. Our aim is to make this newsletter as comprehensive as possible so that you may increase your options, feel more in control, and improve you quality of life.

To all those individuals who are not HIV positive - do not get that way. HIV is hard to get. You have to work at it. I hope our input will help to give you factual information to your child, assist you in making a firm decision to have a monogamous relationship, to find strength in the nuclear family and see the wisdom of a non-promiscuous live style.

We will accept - your business card only for advertisement. We will not accept all cards. $15.

EDITORIAL POLICY

We offer an open forum for all organizations, health professionals, family, friends, and the community at large. Materials printed will reflect the beliefs and opinions of the authors and not necessarily those of Other Options. Your signature at the end of your material will be appreciated.

Other organizations within the state of Oklahoma are welcome to write a brief summary of their needs and request assistance, volunteers from the newsletter readers. Mailing list not limited to Other Options, Inc., we invite other organizations to write in and request donations, volunteers, etc.. We are here for each other. ●

LETTERS
FROM ALL OVER!

From Phoenix, Arizona to honor the memory of a friend.

August 02, 1992
Barry Richardson
10838 N 10th St
Phoenix, AZ 85020

On June 7, 1992 Walter Lacy died of AIDS. Unfortunately, these deaths in and of itself, is all to common to all of us by now. However, his struggle was unique.

When Walter was first diagnosed with HIV disease he chose a most unusual choice to fight this disease and at the same time help others fighting the disease with him. After over twenty years since graduating from college he returned to school and became a registered nurse so that he could help others fight along with him.

When I was diagnosed with AIDS in 1986 in Oklahoma City, he became my attendant. He threatened, coerced, and pleaded with me, always in his unique loving way, to fight even though the doctors told him it was a losing battle.

After I moved to Arizona, he kept in constant touch with me telling me of the latest drugs, vitamin regiments, and other news to help me to continue to fight this plague. He died helping others. When Oklahoma Medical Hospital needed additional staff for patients, he would put in the overtime knowing that he was placing himself in danger by not getting the proper rest he demanded others fighting this disease. His only concern was his patients needed him and loving care cost him his very life.

Walter, I and many others will miss your ready laugh in face of adversity. Without your help many of us would not be on this earth today. May peace and the love you so willingly shared with others now be with you forever.

With profound love and care, your patient and friend.

Barry

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DHS BUDGET REDUCTION 1993

Read and weep - the elderly, the children, the disabled, the mothers definitely will. I believe "they" call it "good business". I really believe it is inhumane. Is your Mother and Father included in this "cut"? Is your disabled family member included? Is your sister/brother or other relative not able to really make it out there included in these cuts. Is the parent you are helping to stay independent included in the "geriatric cutback"? So much for helping our elderly keep some dignity and regard. So much for medical help for those not fortunate enough to have the education and know how to get insurance.

The Oklahoma Department of Human Services FY 1993 Budget Reduction Option Summary reads as follows:

Reduction Action *	State Savings	Federal Loss
1) A. Eliminate Medicaid eligibility for 18, 19, and 20 year olds who are not categorically related: 2,056 clients	438,662	1,009,933
B. Replace DA incentive payments State only dollars to Federally matched dollars	500,000	
C. Juvenile Restitution, Payments to employers	67,084	-0-
D. Convert weekly day care rate to monthly rate effective 2-1-93	84,269	203,731
E. Reduce State funds in Rehabilitation Program Basic Grant to the minimum matching level required.	300,000	-0-
F. Reduce State only medical expenditures for custody children	103,660	-0-
G. Reduce the number of serving days in the Congregate and Home Delivered Meals Programs from 250 days to 195 days per year: 50,000 Clients	1,610,000	
H. Delay expansion of Greer Center: 40 Clients	840,000	1,540,000
Reduction Action *		
2) A. Discontinue quality assurance grants to providers: No client impact	150,000	-0-
B. Eliminate Podiatrist Services for Adults: 100 Clients	17,680	41,140
C. Reduce contract with State Department of Education for GED classes for JOBS participants by $50,000: 140 Clients	15,035	34,965
D. Eliminate all non-cooking sites in the Congregate and Home-Delivered Meals Program, except for those non-cooking sites which are currently preparing at least 1,2000 meals per day: 12,180 Clients	1,778,000	
E. Eliminate contract services for:		
a. Independent Living: 750 Children	72,917	375,000
b. At risk, parent-child: 379 Children	12,396	63,750
c. Respite Care: 180 Children	6,646	34,174
Reduction Action *		
3) A. Reduce Residential Care Program (B, C, D, E)		
a. 5% Reduction Operations	230,234	297,746
or		
b. 10% Reduction	460,466	595,489
B. Adopt Medicare criteria for oxygen equipment rental for adults: 200 Clients	62,630	145,700
C. Youth Services/Shelter programs		
a. 5% Reduction	329,080	-0-
or		
b. 10% Reduction	658,159	-0-
D. Reduce amount paid for E.T.&E client allowance in AFDC effective 12-01-92: 4,000 Clients	187,502	187,502
E. Reduce State funds in Rehabilitatio Independent Living Services Program to the minimum matching level required	295,000	-0-
F. Home Maintenance Aide - Place an edit in the authorization system reducing the number of days from 3-2. This would require local county office to call the State office for any increase of services above two days a week: 6,069 Clients 4,929 Providers	500,000	-0-
Reduction Action *		
4) A. Eliminate Dental Coverage for Adults: 10,188 Clients	500,000	-0-
B. Eliminate shelter allowance in AFDC effective 1-1-93: 15,956 Cases 46,000 Clients	777,271	1,807,601

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	State Savings	Federal Loss
C. Reduction of state dollars in the Congregate and Home Delivered Service Meals Program to the minimum matching level required by the Older Americans Act regulations: 25,068 Clients	4,033,977	-0-
Reduction Action *		
5) A. Delay scheduled implementation of Oklahoma Children's Initiative		
a. 2.5% Reduction	94,670	69,554
or		
b. 5% Reduction	189,340	139,106
B. Physician's Visits - Reduce Adult coverage from 4 visits per month to 2 visits per month: 8,023 clients	44,440	102,008
C. Eliminate Geriatric Day Care Program	300,000	
D. Eliminate AFDC Emergency Assistance 2400 Cases per month	1,321,743	1,321,743
Reduction Action *		
6) A. Eliminate Home Maintenance Aide Program Service: 6,069 Clients 4,029 Providers	1,700,000	
B. Reduce cap on Hospital stays for Adults from 20 days to 15 days per year: 28,302 Clients	1,055,936	2,456,536
C. Limit AFDC Unemployed Parent participation to 6 months effective 1-1-93: 589 Cases	406,382	945,071
Reduction Action *		
7) A. Reduce the financial eligibility for nursing facility patients from 300% of SSI Federal benefit level to 2505: 667 Clients	344,930	1,137,265
B. CAP AFDC Max payment at 5 person standard effective 1-1-93: 1,332 Cases; 8,545 clients	266,547	619,875
8) A. Reduce outpatient prescription drug coverage for adults from 3 to 2 per month: 22,738 Clients	1,006,190	2,311,290
B. Eliminate adult day care effective 12-1-92: 150 Clients	168,000	-0-
9) A. Eliminate Indigent Health Care Grant (Tulsa): 14,802 Clients	458,330	----------
B. Eliminate contract with State Department of Education effective 12-1-92: 300 Clients	43,852	101,981
10) A. Reduce the NTMC Program by placing a service cap of 4 days/week except for bedfast patients: 8,000 Clients	1,011,396	2,323,243
B. Reduce AFDC payment to 1988 level (approximately 10%) effective 1-1-93: 45,500 Cases; 133,000 Clients; terminate 500 Cases	3,701,325	8,607,705
11) A. Eliminate the Medically Needy Program 13,578 Clients	4,903,890	11,264,556
B. Eliminate "At-Risk" Day Care effective 12-1-92: 1,172 Cases; 2,924 Clients	685,673	1,594,584
12) A. Reduce Medicaid categorically needy eligibility standard from the AFDC needs standard to the AFDC payment standard: 9,256 Clients Note: FTE reduction only occurs if item 11,A also implemented	719,616	1,653,005
13) A. Reduce the eligibility standard for pregnant women from 150% of poverty to the federally mandated 133% of poverty: 2,118 Clients	729,274	1,675,190
14) A. Eliminate Medicaid eligibility for children ages 10 to 17 who are not not categorically related. Requires elimination of Item 1,A.: 2,828 Clients	627,057	1,440,392

* savings calculated based on 12-01-92 effective date unless otherwise stated.

The news release put out by office of public information states: Gov. Walters had asked the commission and Benjamin Demps Jr., in his role as Cabinet Secretary of Health and Human Services, to develop a new welfare reform package which focused on welfare being a second chance, not a way of life.

For many of the elderly it is the only way of life. For many of the babies in headstart it is the only way of life. For many of the mothers with babies it is the only way of life. For many of the elderly it is the only meals they get. For children in custody it is the only medical they will receive. For children at risk it is the only safe place. For the elderly on day care it is the only care they get. For many in need of medical care it is the only medical care they get. THOSE OF US WHO HAVE - PLEASE REMEMBER THOSE OF US WHO DO NOT HAVE.

Have we forgotten to care - Did we elect someone who has forgotten to care? I remember voting for him. I neglected to let the Governor know how I felt. I will right that wrong - right now. How about you!! ●

OTHER OPTIONS FROM THE GRAPEVINE

PASSING THE INFORMATION - NOT THE VIRUS!

FDA APPROVES NEW DRUG called zalcitabine (DDC) for advanced HIV disease. DDC is the third drug licensed specifically for treating HIV and is used in combo with zidovudine (AZT). DDC sold under the name HIVID, is the first drug to be approved under the FDA's accelerated drug review policy.

BOOK REVIEW

THE MEDICAL MANAGEMENT OF AIDS, THIRD EDITION. Edited by Merle A. Sande, M.D. If you don't have it and you are in the medical field of AIDS - It would advantageous to have it. Written by over 40 physicians and other experts and edited by San Francisco General Hospital staff. The most authoritative textbook on AIDS treatment. Material is organized. Cost is approximately $49. Order from W.B. Saunder Co., Harcourt Brace Jovanovich, In., 6277 Sea Harbor Dr., Orlando, FL 32821-9816.

BASIC LIMITED CABLE TV

Available for $1.26 per month. This allows you the local channels you already receive + 3 cable channels. You experience better reception and $1.26 affords you some more news and entertainment than you can get for less than the price of a movie per month. Call your local cable TV. Check to see if you can pay in advance for 1 year. That would save you tax.

NON-TECHNICAL MEDICAL CARE PROVIDERS or HOME CARE PROVIDERS

We always need people who are qualified to care for an AIDS individual in the home. The Department of Human Services through the Non Technical Medical Unit oversees this program, provides training and will pay a minimal amount of money ($15 per day) for the care. Call Other Opts for information or 424-5818. The Home Care Providers pay less but are needed just as much. Call 424-5818 for more info.

"FIRST THEY CAME FOR THE JEWS, and I did not speak out because I was not a Jew. Then they came for the Communists, and I did not speak out because I was not a Communists. Then they came for the trade unionists, and I did not speak out because I was not a trade unionist. Then they came for me, and there was no one left to speak out for me." - Martin Niemoeller

(I don't cry anymore when I read this but, it is still relevant. Cookie)

DELAY NEW AIDS CASE DEFINITION

The Centers for Disease Control (CDC) announced that the proposed expansion of the AIDS surveillance case definition in adolescents and adults is delayed beyond April 1, 1992. CDC is now in the process of evaluating comments received during the public comment period which ended February 14,1992. CDC plans to provide six weeks of prior notification of the new implementation date of the revised case definition.

The new AIDS case definition will add all persons with documented HIV infection and a CD4 lymphocyte count less that 200/mm3. The new definition could add tens of thousands of AIDS cases nationwide.

Federal funding for prevention, treatment, and care is often linked to AIDS case counts. Oklahoma may be eligible for increased funding based on the number of AIDS cases that meet the new definition.

(from AIDS Surveillance Update-Houston TX 03-92)

WITHOUT A VACCINE, THE BEST WAY TO PREVENT AIDS IS TO AVOID INFECTION - THROUGH EDUCATION!!

LITTLE IS KNOWN ABOUT:

1. The profound psychological consequences of experiencing multiple losses to AIDS,

2. Levels of stress and burden imposed on the social network of People Living with AIDS.

3. The processes in which the social network ceases to be an adequate source of support and how this, in turn, influences utilization of community and institutional health care services.

4. The ramifications of how the projected large numbers of individuals who will be living with HIV infection as a chronic disease will impact on the organization of health care services

5. The psychosocial consequence for the family member, loved one/partner, friend or volunteer who provides informal support and assistance to PLWA throughout the course of the illness.

6. AIDS restructures the rhythms and routines of the caregivers and AIDS patients life together radically.

POSITIVELY AWARE FROM THE TEST POSITIVE AWARE NETWORK, INC.(TPA).

A grant to distribute the Positively Aware magazine received by Other Options, Inc. from the Test Positive Aware Network is working well and in demand. Over 200,000 copies of the national issue have been circulated. Other Options received 4,000 issues and have disseminated all at this date and the second edition has arrived and we have begun distribution.

The magazine is easy to read, informative to the general public as well as to the HIV infected individual, family members, friends, etc. Primary distribution is through the meal programs, discharge planners, social service organizations, Home Maintenance Clinic and satellites, Physicians offices seeing Infectious Disease patients, and support groups. Didn't get one! Call us.

We would appreciate your comments(in writing) and would mail these to TPA Network(Test Positive Aware Network, Inc.) so that we may continue to be favorably received by this organization and our efforts to request further funding for this journal will be ongoing.

SUPPORT GROUP UPDATES

NEW SUPPORT GROUP - LAWTON

Southwest AIDS Network Foundation of Lawton

Contact persons are Janet Olin or Luci Davis

405-248-5780 TDD

SISTER GAIL ADDIS

A new AIDS ministry has officially begun. Sister Gail Addis of Immaculate Conception Catholic Church and Loaves and Fishes Mobil Meals Program, is now offering an active AIDS ministry to our folks. She can be reached at Associated Catholic Charities on 425 NW 7, Okla City OK 73101, phone 232-8514. A very important step to healing.

TRANSPORTATION

ASP would like additional drivers to transport needy HIV/AIDS individuals to and from hospital, clinic, doctor appointments. There are so many more needs than we have drivers for. The criteria is a current drivers license and insurance on your car. Certainly you must be a careful and considerate driver. Call Larry Saddler at 525-6277. If no answer leave message.

KEN TAYLOR MEMORIAL AIDS WALK

Add to your calendar of important things to do!! The event will be held at Bricktown on November 1. Check-in time is 12 Noon and Opening Ceremonies at 1 p.m. The Walk will begin at 2 p.m. The walk will be a yearly event with all proceeds to benefit 16 AIDS related support and service connected organizations. The brochure enclosed with The Grapevine is for your corporate sponsorship, your sponsor list, and advance registration form.

LOAVES AND FISHES is in need of drivers.

ALMS (DIGNITY/INTEGRITY) is one of the 3 mobil meal programs actively working with our HIV/AIDS individuals who are not able, for one and other reasons, to cook for themselves. Please give these programs your support. ST LUKE'S METHODIST is the "other" program that delivers to our friends with HIV/AIDS.

OKLAHOMA MEDICAL RESEARCH FOUNDATION will benefit from the WIPE OUT AIDS WORKOUT sponsored by OKLAHOMA FITNESS PROFESSIONALS ASSOCIATION. The benefit will be held at Oklahoma Fitness Facilities all around the State of Oklahoma on November 14, 1992 which is a Saturday. The Okla Fitness Professionals recognize that supporting AIDS research at OMRF will aid in the breakthrough research for a cure for AIDS. OKLAHOMA MAY BE WHERE AIDS IS STOPPED. OMRF deserves our support as one of the top independent medical research foundations in the nation conducting important research into the causes and cures of AIDS and other diseases.

On October 4, the WIPE OUT AIDS WORKOUT sponsored an open house hosted by Dr. Thurman and Dr. Jordan Tang of the Oklahoma Medical Research Foundation. The general public was invited on Sunday afternoon to meet the two good doctors and view for themselves the place where AIDS could very well be stopped in the state of Oklahoma. The event was well received and well populated. The doors were opened and we were able to see first hand some of the secrets of a genetic research lab. Thank you very much Oklahoma Memorial Research Foundation for your care and concern.

RAIN-OK CARE TEAM TRAINING CLASS completed their training on September 19, at the Bethany First Nazarene Church in Bethany. Welcome First Nazarene to an exciting experience. Looking forward to utilizing your expertise.

OTHER OPTIONS, INC. TRAINING PROGRAM continues to offer training to interested individuals and expectant volunteers, testers and counselors every Saturday afternoon at Metropolitan Community Church on 2522 N Shartel (3 blks east of Classen on 25th) from 1:00 pm to 3:30 pm.

LETTERS

continued from Page 6

SAME PLACES, OTHER SPACES

THIS LIVING IS SO HARD, HOW CAN WE BE ANYTHING BUT KIND TO EACH OTHER.

It is difficult not to get involved in their lives and I must have promised myself dozens and dozens of times that I must not get this close again. Never!! NOT!! A next time seems to come no matter how many times I try to push it away. Sometimes have a "pity party" a week. Sometimes I can go a whole month without one. I just wanted to share that with you. Tonight I am having one of those times and I feel sorry for me.

...then I remember how many, many times I have walked in on the same scene, different faces, SAME PLACES, OTHER SPACES. Someone else is gently climbing up on the bed and taking their friends head in their arms and ... I always think I am the only one - thank you Ron and Doyle.

IN MEMORY OF MY FRIEND

It is easy for you my friend. One gasp - one breathe and your on the other side. On I go. On we go. We cannot help but miss you. Love you.

Submitted by Mike S.

YOUR OPTIONS!!

AIDS IS HARD TO GET

SO DON'T!!

YOU HAVE TO WORK AT IT. GET AN EDUCATION INSTEAD!!

Fear is the one emotion that traps us all, preventing the possible happiness that life has to offer. "Running away may relieve our anxieties momentarily, but lasting ease requires our turning toward what we dread most." says Sheldon Kopp. "In dealing with fear, the way out is in." ●

WISH LIST
FOR OTHER OPTIONS, INC.

- A cure!
- A vaccine!
- **Office space for Other Options, Inc.**
- More warm bodies. See list of volunteers services
- Need Pentamidine treatment machines. Please make your tax deductible donation to Other Options.
- TDD Relay for the deaf - approximate cost $200 to $400
- Someone to pay for specialized contact lenses for an HIV client - approximate cost $300.
- Used cars that are still in great shape - your car is tax deductible. Folks on limited income need vehicles.

AREAS OF NEED

OOI can help you find the place to be in this epidemic.

1. Ask your church to start a much needed meal on wheels program in MWC, Bethany, Yukon, Del City, Moore, Norman, etc. Start your own.
2. **Housing, housing, housing, housing! Don't tell me about it - do it!**
3. Donate a usable building - it is tax deductible.
4. Add your checkmark to the 'Volunteer List' on the inside back cover of the *Grapevine* and mail it back to Other Options, Inc.

SHOPPING LIST FOR OTHER OPTIONS PEOPLE LIVING WITH HIV/AIDS

1. Shampoo
2. Conditioner
3. Toilet paper
4. Razors
5. Shaving Cream
6. Tooth brushes
7. Tooth paste
8. Deodorant
9. Sink cleanser(ajax, etc.)
10. Hand and Body lotion (lubraderm is a good one)
11. Hair gel/combs/brushes, etc.
12. Bath soap (Ivory, Lever 2000, etc.)
13. Laundry soap - small boxes, small bottles. They get too heavy to lift.
14. Pre-natal vitamins

Hang a plastic bag on your bathroom or kitchen doorknob to fill up each time you shop. "One for me," and "One for them." Remember when you're shopping for yourself - "One toothbrush for me and one for them, one shampoo for me and one for them..." (Good for the soul).

Deliver to Other Options at 3104 N Council Road and we will dispense through the Loaves and Fishes Mobil Meals Program. Remember, most PLWA's receive food stamps and cannot buy the above paper products with food stamps - $486.00 does not stretch that far!! That's bottom line income for well over half of our People Living With AIDS.

A thank you to those that keep us stocked up and dispensing. If you are visiting a PLWA and you know they do not receive mobil meals and are needy - come by and pick up a sack of paper products for your friend. ●

OTHER OPTIONS,INC.
OFFICE SPACE PROPOSAL SPECIFICATIONS
07/09/92

Space size: Approximately 1000 Square feet

Area of town: Northwest OKC, preferably

Type of space: Office or retail

BENEFITS TO LESSOR:

- **Other Options, Inc. is a non-profit 501(C)(3) organization whose status may offer tax benefits to the building owners.**
- **Other Options, Inc. could occupy space that is otherwise unoccupied and may continue to be unoccupied for an extended period of time.**
- **The lessor could essentially take a current option on a future rent paying tennant. Grants and revenues are growing at a steady pace.**
- **Other Options, Inc. would do all necessary leasehold improvements which would become the property of the lessor.**
- **Space that is occupied is less expensive to insure.**
- **Space that is occupied is less subject to deterioration.**
- **Other Options, Inc. would provide needed traffic for other tennants.**

Other Options, Inc. has outgrown their current facilities and must expand their space in order to continue to meet the needs of the community. Due to an unexpected surge of case management clients, Other Options, Inc. needs space on a rent deferred basis.

PASS THE WORD NOT THE VIRUS

RECIPES

Submit your favorite recipe to OOI's *Grapevine* for the next issue.

We include different recipes for different nutritional formulas put out by the "biggies". We do not endorse any of them. What works for you may not work for the next person. So be selective. Ask around. Check with the nutritionist at your clinic, Oklahoma Memorial Hospital, Health Maintenance Clinic. If you come across one you cannot do without, that is the one we want to let people know about.

Most products are readily absorbed and provide you with essential proteins, vitamins, and minerals. Most help you maintain weight. Some are milk based such as "GO!". If you can not take milk, you will not want to use GO!. "Go" is a formula produced by the person who made Gatorade and has 14 grams of protein. Made specifically for athletics and designed to hasten healing and replenish muscle tissue damaged during exercise. I call it the "buck and box" formula. That's how much it cost. Lipisorb is my favorite. No, I don't drink it, but I push it. It is a more readily absorbed fat blend (good for patients with fat malabsorption) with medium chain triglycerides (MCT oil) to improve fat absorption. Seems to diminish severity and incidence of diarrhea and abdominal discomfort. There is Sustacal, high calorie and lactose free. Jevity is another isotonic formula with fiber. If your having diarrhea problems - no Jevity for you. The usual Ensure is still doing its great job. Flavor of the month seems to be strawberry. Nutrameal is another favorite that seems to have more nutrition than Ensure and Ensure Plus. Keep in mind Carnation Instant Breakfast is still doing its job and always the first one to try because it is easily accessible and inexpensive. Call Other Options for the druggist that sells the product at the least amount or for a "GO" representative. Anyway.....

LIPISORB SMOOTHIE *submitted by Joe Bell*

1. 6 ounce can of pineapple juice
2. 8 ounces of orange juice
3. 4 or 5 level scoops of lipisorb to an 8 ounce glass of water
4. Use one whole banana
5. Use 3 or 4 tablespoons of strawberries (use topping you get at Braums Ice Cream. They sell 2 toppings. Get the one from over the counter and not the preserves in the jar(freeze the rest of topping)

Put all in a blender and add ice - about 12 cubes and blend up. Makes an ice type drink. It will fill the blender and make 2 or 3 glasses of 8 ounces each. Stick blender in refrigerator for storage.

THRUSHBUSTER SHAKES/RECIPE *submitted by Craig Epson-Nelms - a hemophilia A patient.*

Thrush is an overgrowth of yeast in the mouth or throat. One of side effects of HIV disease, and also people taking antibiotics. Remember thrush appears as small white patches, and is sometimes painful. We all have yeast and bacteria in our systems; problems arise when the natural balance is upset - chemotherapy, immunological problems, good ole HIV/AIDS allows yeast to increase; antibiotics kill out natural bacteria, allowing yeast to overgrow.

The addition of acidophilus bacteria to the diet can help. Acidophilus is found in buttermilk, cottage cheese, and yogurt. Adding to diet can help restore the yeast/bacteria balance. The milk product in yogurt will not offend those persons who are lactose intolerant, because the bacteria break down all the lactose (lactose=milk sugar).

** (Acidophilus is an aid not a substitute for medication)

** Diabetics or those who must reduce sugar intake, follow diabetic instructions at end of recipe.

1. 1 carton Dannon yogurt, fruit flavor of your choice(if you use another brand, make sure it has LIVE yogurt cultures)
2. one 6 oz can Bacardi Pina Colada fruit mixer (in the frozen juice section of grocery store)
3. ice cubes or chips
4. frozen or fresh fruits

Pina Colada Barcardi mixer is recommended because the cream of coconut base makes a thicker shake. You can substitute Barcardi Daiquiri Mixers (peach, lime, strawberry, raspberry): match them up with the same flavored yogurt, and fresh fruits. Any fruit flavor you like combines nicely with Pina Colada mixers. Try blueberry, banana, or Dannon Pina Colada flavored yogurt.

In blender, combine the mixer and ice as detailed on side of Barcardi mixer can; substitute water for rum. Blend in yogurt and fresh or frozen fruits to taste. Experiment with the proportions of mixer, ice, water, and yogurt as necessary to get the thickness you want. There is no reason to use the whole carton of yogurt; other than convenience. Serve immediately. Store in freezer for later.

THRUSHBUSTER FOR DIABETICS:

Look for mixed drink bases (no alcohol) that are sugar-free. Diet yogurts are also available. Fresh fruits are always OK - try substituting a lot of pureed fruit for the mixer. Bananas are good, but only 1 per shake - any more and you get too much shake! If your doctor says even plain yogurt is too sweet, buy acidophilus powder at a health food store.

Whatever you use must have live acidophilus cultures. This can be a very lowcal, health treat. Add Nutrasweet for added sweetener.

Drink at least 1 a day when you have thrush or using antibiotics. Enjoy!!

enough for now. LLP, Cookie and the crew

Volunteer List

Please checkmark items below for which you can volunteer and mail to Other Options, Inc. The address is on the reverse side of this page. Thanks!

_____ 1. bookkeeping	_____ 2. newsletter	_____ 3. computer work
_____ 4. speakers	_____ 5. graphics	_____ 6. printing/xeroxing
_____ 7. give dinners	_____ 8. truck for hauling/moving	_____ 9. office work
_____ 10. cook individual meals	_____ 11. "paper product"	_____ 12. drivers
_____ 13. home care work	_____ 14. exerciser	_____ 15. massage
_____ 16. HIV tester/counselor	_____ 17. RN/LPN/AIDE	_____ 18. schedule benefits
_____ 19. grant writing	_____ 20. garage sales	_____ 21. mail outs
_____ 22. entertainer	_____ 23. companion	_____ 24. caterer
_____ 25. legal help	_____ 26. deaf enterperter	_____ 27. clean houses
_____ 28. odd jobs	_____ 29. housing committee	_____ 30. do "mom" things
_____ 31. pen pal to prisoners	_____ 32. start a meal program in MWC, Moore, Norman, etc.	

Name _____

Address _____ Phone _____

City _____ State _____ Zip _____

About You

Your Gift Is Very Important

When you give to Other Options, Inc., you are helping to improve the quality of life of Persons Living With AIDS by allowing us to deliver appropriate and effective services through Other Options. Because Other Options is a non-profit 501(c)(3) organization, all contributions are fully tax deductible.

My gift is in memory of _____

My gift is in honor of _____

I want to support regularly. My pledge: $_____monthly $_____yearly $_____quarterly

Enclosed is my tax deductible contribution

___$1,000 ___$500 ___$250 ___$200 ___$100 ___$50 ___$5

Make checks payable to Other Options, Inc.
PO Box 36
Bethany, OK 73008-0036
(405) 728-3222

Grapevine

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"Show me the manner
in which a nation or community
cares for its dead
and I will measure with mathematical exactness
the tender mercies of its people,
their respect for the laws of the land
and their loyalty to high ideals."

— Gladstone

Other Options, Inc.

Guardian West
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Oklahoma City
495-9292

Guardian Midtown
1133 N. Robinson
Oklahoma City
232-9292

Guardian North
11600 N. Penn
Oklahoma City
752-9292

(GRAPEVINE printing courtesy of Guardian Funeral Homes)