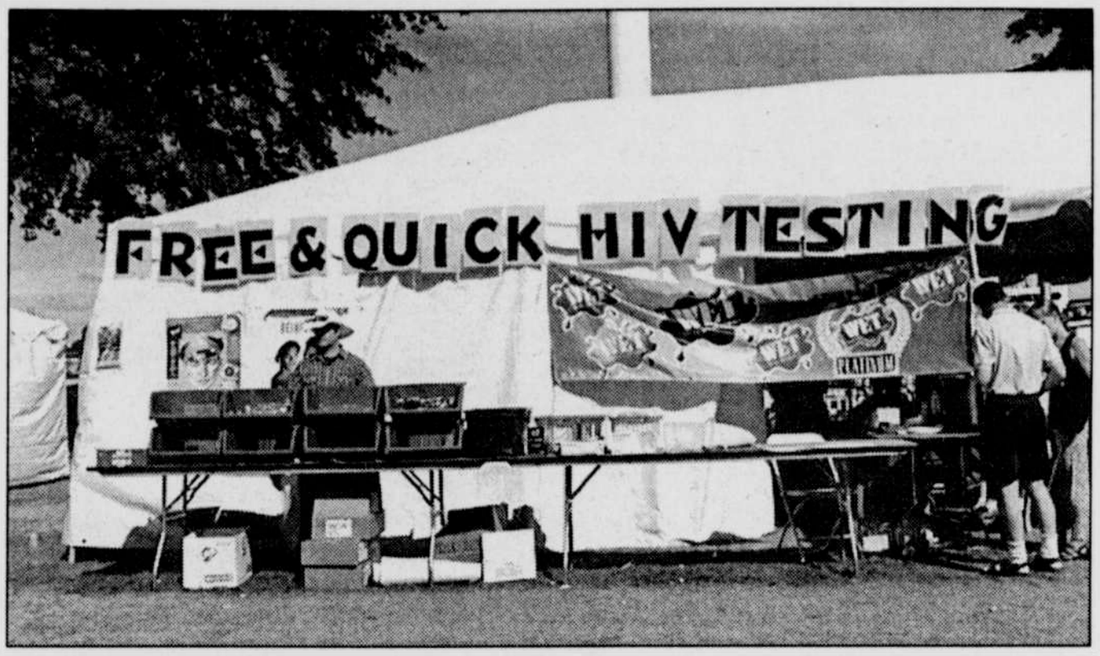

As part of its metamorphosis, Cascade AIDS Project no longer provides testing, leaving concerned citizens at the doorsteps of county agencies

An example, Bruner says, is a client who has HIV and has been doing relatively well for some time. This person identifies a particular service within CAP, then comes looking for help.

"Do we give it to you? Automatically? Just because you have HIV? Does HIV status—completely independent of all other factors—entitle you to a guarantee of publicly funded assistance? And, if so, does it guarantee it to you indefinitely?" Bruner asks. "Here's my answer: Absolutely not. The qualification is need. The qualification is that other resources do not exist. You have exhausted all other resources or services. No one else in your family or church or friendship support system is able to step in to assist."

That concept is a big shift in philosophy for an organization whose arms were once as wide open as Bruner's home state of Texas.

"You can get away with that when your resources are sufficient to meet all demand without having to really think a lot, but it is an entitlement mentality," the project's chief suggests. "It's a welfare mentality. It's a handout. It's quick, it's easy, it's simple. You provide verification of your diagnosis, and you get it. It's old-school social work that defines help in terms of the amount of stuff I give you, as opposed to how much you need. As opposed to how much you can get yourself. As opposed to how much others in your family or church or neighborhood can provide. It's a system that views itself as there to give away a bunch of stuff. The more stuff I give you, the more I've helped you. It's ultimately degrading to the people in need. It treats them as helpless, as unable to do anything for themselves."

Risky business

Similar to re-evaluating its support services, CAP has taken a second look at its prevention work. In order to increase effectiveness, the organization has narrowed its focus to populations at highest behavioral risk.

"While we like to say that HIV is an equal-opportunity infection, it's not and it never has been," Bruner says. "Some people are clearly at higher risk than others. They are not at higher risk because they are black, gay, young or female. What puts you at increased risk of HIV infection are what you do, who you do it with and how you do it."

Bruner acknowledges that everyone needs a basic working knowledge of the virus and disease. The broad and generic work, however, in which any outreach activity could be classified as prevention, is no longer possible. This includes, as he says, facilitating potluck meetings for white-collar, middle-aged gay men who themselves report that they are not at high risk behaviorally for HIV infection.

"We need to be spending time with street kids, homeless youth and runaway youth," Bruner explains. "Kids who trade their bodies for a night's shelter or for a meal, all around downtown Portland. Not because they're the cutest, listen best or write sweet cards that then can be printed in a newsletter but because that's where we've got to be."

And prevention work in this new arena requires a different tack.

"It's been years since we were able to talk just about sex and condoms. It's much more complicated today. We talk about a whole host of sexually transmitted diseases. We talk about the impact substance abuse has on decision-making. We talk about self-esteem and what we tend to do when we're lonely, hungry and eager to be loved, wanted and needed. Forget sex for a second—now we're into needles and bleach and being addicted to the rush and the high and what all those issues are about," Bruner concludes.

Feeling rejected

Although pleased by the new stability of the organization, critics among the HIV-positive community claim CAP relies more on national trends and statistics instead of seeking direct input from its own clients. Some suggest the organization should assemble an advisory board composed of people living with HIV or AIDS in order to give voice to its consumers.

And because of CAP's recent renaissance, members of the sexual minorities community specifically have felt that CAP has abandoned them.

Bruner recognizes that this last concern is shared by organizations around the country as many try to honor their original mission of serving those who have HIV or AIDS, not just those who are homosexual.

"When I arrived here, it was very apparent to me that our staff at that time was in a very different place. I think many of them identified their HIV work with gay rights work and gay community organizing. They saw them as one and the same, and they're not," Bruner says. "We are clearly about the business of HIV as a health and human rights issue, and not a gay community center. Not a gay rights organization. And not a gay mental health center. No one ever said it to me, but I think it blew a lot of folks away that the bearer of that message was himself a white gay man—and not just a white gay man but a white gay man who had a 15-year history in HIV work."

Craig Hartzman, president of CAP's board of directors, adds, "We will continue to be not only the voice of gay and lesbian people concerned about HIV, but we'll be the voice of and advocate for all concerned Oregonians and southwest Washington residents."


THE NEIGHBORHOOD WORD

WHO IS THIS GUY?

Brave Souls Among Us: Finding Our Own Heroes


Thomas Bruner

"Does HIV status—completely independent of all other factors—entitle you to a guarantee of publicly funded assistance? And, if so, does it guarantee it to you indefinitely? Here's my answer: Absolutely not. The qualification is need. The qualification is that other resources do not exist. You have exhausted all other resources or services. No one else in your family or church or friendship support system is able to step in to assist."

—Thomas Bruner

DEFINING SERVICES

Cascade AIDS Project is so multifaceted that those who are unfamiliar with the organization might not know what it actually does. Most of its efforts go into supporting and housing efforts, but prevention and advocacy are important elements as well. Some examples include:

Support and house

- **Back-to-Work:** Increasing independence by helping clients re-enter the work force.
- **Personal Active Listener:** Providing emotional support and practical assistance.
- **Apoyo Latino:** Helping Spanish-speaking families access services and education.
- **In-Home Caregiver Training:** Educating professional caregivers for people with HIV.
- **Development Projects:** Helping build affordable housing.
- **Transitional and Permanent Housing:** Providing a bridge to a stable home.
- **Warehouse:** Providing donated furnishings and moving assistance.
- **Also:** Legal services, transportation and emergency short-term financial assistance.

Prevent

- **Speakers Bureau:** Educating by sharing personal stories.
- **Teen to Teen:** Reaching out to youth at risk through peer educators.
- **Speak to Your Brothers:** Counseling and education targeting at-risk gay and bi men.
- **AIDS Hotline:** Providing information to callers from across Oregon and the Northwest.

Advocate

- **Lobbying:** Meeting with elected officials about HIV-related legislation.
- **Public Policy:** Promoting sound policy in government, workplace, school and other settings.
- **Education:** Providing information on issues and needs to appointed policymakers.
- **Voter Registration:** Encouraging people to exercise their vote in elections.

From personal to professional

Even some who recognize the shift in demographics have found CAP's makeover hard to swallow. The organization has abandoned its grassroots heritage for a modern and efficient corporate climate. Although this appeals to administrative and fund-raising types, the idea of a big-business approach colors the view for those who appreciated the nonprofit's earlier sense of community.

"I think there is a very healthy chunk of your readership that resents the hell out of the professionalization of HIV and AIDS services," Bruner tells Just Out. "A lot of these [critics] are people that were around volunteering, helping, fund raising in the earliest days. If somebody did a barbecue on the patio of a bar that raised $90, somebody with AIDS was given $90. The idea that somehow we've gone from that to a computerized, professionally audited, professionally marketed, multimillion-dollar, 50-staff person, nonprofit business operation, it's almost an affront. It's not just that they don't get it, but it pisses them off."

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