

populations. Examples include a woman who has the impression that CAP is solely for gay white men or an immigrant farmworker who doesn't speak English. These types of people, Bruner says, might not be aware of, or know how to access, medical or social services.

Another activity to be implemented during 2001 is a back-to-work program. Two new employees will develop support services designed to better equip clients with the tools they need to return to the work force. This might include instruction in job hunting and employment

skills or assistance in navigating existing governmental job training and placement programs.

The new program also will work with employers to ensure a smooth transition when hiring an

employee with HIV or AIDS. These services might involve education about the virus, sensitivity training for managers and fellow employees, and consideration of physical accommodations for someone with physical handicaps.

"It's not about creating a separate, parallel vocational system exclusively for people with HIV," Bruner explains. "It's about helping folks with HIV shift their whole mental focus from sickness, disability and incapacity to ability and what they can do with the time that is left, which for some might be a lot."

True to its belief that a larger business infrastructure is necessary to support larger programs, CAP will hire a major gifts officer and an accountant. The board of directors also has



rolled up its sleeves to form new committees, including a public policy committee to advocate on behalf of those living with HIV and AIDS.

Finally, an additional caseworker is slated for a role in the housing facet of CAP's support services. This staffer will serve as an ongoing information and referral resource for people who have housing-related questions but might not need other services from CAP. Bruner says this might include, for example, someone who doesn't need financial assistance but just might be overwhelmed by the maze of options avail-

able through the broader publicly funded housing market.

Closing down for good

Despite this growth of programs and staff, Bruner maintains that Cascade AIDS Project's ultimate success will be when it can close down entirely.

"None of us got into HIV to continually build, grow and strengthen organizations or even programs and services," he says. "We got

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—Thomas Bruner

involved to help end this nightmare. Fifteen years into this work and counting, that's still my goal."

Until then, CAP sends its message, stronger than ever, that it's not over. **J**

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For more information

- **Oregon AIDS Hotline:** 503-223-AIDS, 800-777-AIDS and 800-499-6940 en Español.
- **Multnomah County:** Suite 300, 620 S.W. Fifth Ave., Portland; 503-223-5907.
- **Washington County:** 1001 S.W. Baseline Road, Hillsboro; 503-693-3234.
- **Clark County:** 1104 Main St., Suite M-100, Vancouver; 360-735-9170.



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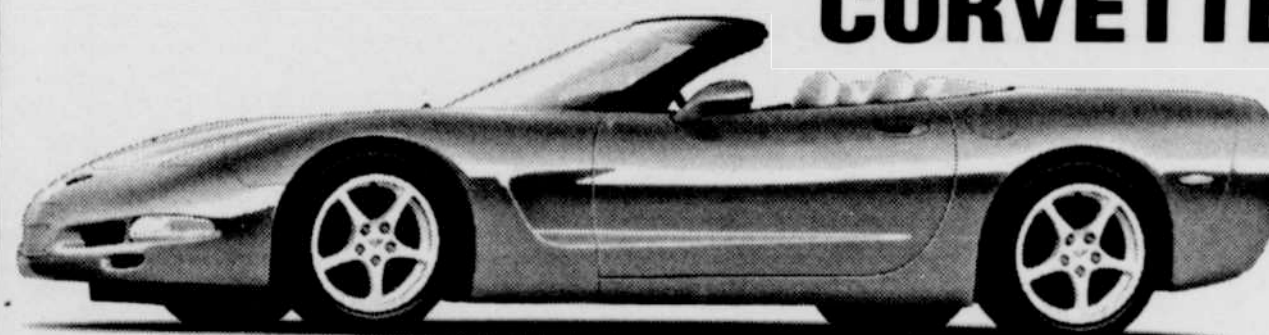
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