

THE **SHANTI** PROJECT NEWSLETTER

SUPPORT GROUPS FOR FRIENDS, FAMILY & LOVERS

Carol Tocher

FALL 1987

Although I first decided I wanted to work with Shanti in 1977, it wasn't until July of 1982, some two and a half years after my husband's death from a terminal illness, that I finally reached for the telephone and requested an application to do volunteer work. At that time, being a volunteer meant serving as an Emotional Support counselor, as Shanti had no Practical Support program, let alone any of the other components now in place.

The past five years as a volunteer have been most rewarding. My clients have enriched my life in many ways, and my four and a half years on the Board of Directors have challenged me and allowed me to participate in the exciting growth of Shanti Project. I feel committed to Shanti no matter what the task. I have served as a public speaker, and a facilitator for both volunteer and community trainings.

Certainly, one thing I enjoy most of all is co-leading a support group for friends, families, and lovers of people with AIDS, which I have done for a little more than



Carol Tocher and her Shanti support group for the loved ones of people with AIDS

three and a half years. I have worked with some wonderful co-leaders, including Doug Victor, Nick De Mara, Chris Sandoval, and currently, Blue Smith.

We used to call the group an Anticipatory Grief Group. Somehow, that no longer seems like an appropriate name for our current weekly support groups for friends, families, and lovers of people with

AIDS. It is true that most of the people who come to the group are grieving in anticipation of losing someone close. But one of the many lessons we have learned from our clients is that the group is really about living. How sad it is that many of us forget how precious life is until the threat of loss is at hand! Everyone comes to the group looking for ways to enjoy the time they have with the



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FALL 1987

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Shanti is a Sanskrit word meaning "inner peace."

The Shanti Project logo is an eclipse, a circle within a square. The circle portrays the inner world of the mind. The square conveys the solid reality of earth and body. United, they indicate the wholeness of the human being.

An eclipse is the passage from light to darkness and the return to light. For Shanti Project, it represents the changes brought about by illness and death, the darkness that can fall upon people experiencing these events, and the light that can follow in the wake of helpers who bring love and caring.

Tandy Belew created the logo.

one they love.

There is comfort that comes from being with others who share your pain, fear and hope regarding the changing relationship with the one you love.

People come to the group for a variety of reasons. Almost all come because they have a strong desire to support their loved one. They want to be there for him or her, whatever course the illness may take.

Some may have a strong need to be the primary support person in the life of their loved one. At the same time, they may feel overwhelmed at the enormity of the task. Many feel unsure of their ability to cope with what seems an impossible task.

The group operates on a drop-in basis. Some come regularly and some come when they can. We hope that everyone knows the group is there for them when they need it. We have one man who has attended almost every week for two years.

Newcomers hope to find support from others going through a similar experience. Most people find that support. Many have expressed the feeling that finally they have found a group of caring individuals who understand the range of feelings that have been so frightening and at times, devastating.

For others, coming to the group means moving out of isolation for the first time since their loved one's diagnosis. For most, feeling a part of a community brings a new sense of being able to cope. The act of sharing one's deepest feelings is cathartic.

The speed with which bonding develops usually comes as a surprise. New people are absorbed into the group almost immediately. They are always given a list of phone numbers with an invitation to call if they would like to talk during the week.

Loved ones of group members are

included in the social functions of the group. There is no pattern to our social events. Every five or six weeks, someone invites the group over for a week-end brunch. Often we see the group as an extension of the individual members' total support system.

We have a woman in our group whose brother in New York has become integrated into the support group. When someone in the group visits New York, her brother Michael gets a phone call with a message, an invitation for lunch, or a video cassette of a recent TV special in San Francisco. When Michael visits his sister in San Francisco, he is invited to dinner by a number of people in the group.

We begin our meetings each Thursday evening with these words, "This is a Shanti Support Group for friends, families, and lovers of people with AIDS." We go on to say that this is a safe place to talk about our feelings. "There is no right way or wrong way to feel. Allow yourself to accept that this group is here for you. We will hold what you talk about in confidence. We will neither judge you nor give you advice. We will not try to fix anything for you, because we know there is nothing we can fix. All we can do is hear you and let you know that we support you."

"Perhaps you will gain strength from hearing how others are coping. Perhaps you will gain courage from the quiet courage of your fellow group members. Each of us in the group wants to validate your feelings. Everyone agrees that just the simple knowledge that others think your feelings are justified is one of the main values of the group.

As the group is settling, one hears snatches of conversation. "How is Bob doing this week?" "You really look a lot more relaxed than you did last week!" "I do feel better. It's like a cloud has been lifted." "Tell me more about that new medication Andy is on."

Our group usually starts off with everyone doing a quick check-in and giving a hint about what they would like to talk about later. Often we find that several people will be experiencing the same kinds of feelings which sometimes sets the tone for the first part of the evening. Other times, it is obvious that one person is in such intense pain that we deal with their pain first.

We try to keep the size of our group limited to not more than nine or ten. Shanti Project currently has four support groups for friends, families and lovers. We all remember the few times that suddenly we were in a room of 19 people. It is impossible to get through check-in, let alone hear what anyone needs to talk about with so many people in the room. Of course, when we are suddenly inundated, the Project closes the group temporarily and begins the process of opening another group.

Going to a support group for the first time can be a frightening experience. Frequently the new member is overwhelmed at the recent diagnosis of a beloved brother, son, daughter, or lover and unable even to absorb the fact of that new diagnosis.

In their first meeting, he or she listens to someone whose lover has been ill for a long time, someone who has been supporting that lover for many months, someone who is exhausted with the task of caring, and maybe someone who feels guilty because they wish for the long struggle to be over.

I have sometimes seen panic cross the face of that newcomer as he or she realizes that another person's story may very well be a prophecy, a foretelling, of what lies ahead for him or her.

But time after time, I have heard that newcomer say, "Yes, it's scary. Part of me wants to run from the room. But another part of me knows I can learn from hearing how others are coping with AIDS. Part of me is grateful that my story is not as bad as I thought. I am very glad to know that I am not alone in what I am going through."

We try to make sure that each person who comes seeking support gets what he or she needs. There are those whose feelings are so inaccessible that they cannot bring themselves to look at them. We try to make sure that these people know about the other resources in Shanti and other AIDS organizations.

Not everyone comes back. There are those who are not comfortable in groups. They are often much more comfortable talking with one other supportive person than trying to share their feelings with a larger group.

A typical group of ten might include two parents of two different people with AIDS, a sister of a man with AIDS living out of town, a brother of a man with AIDS living here in San Francisco, a woman whose best friend was diagnosed a year ago and who is the primary support for that friend, a man who has a friend recently diagnosed who is rejecting all contacts from his circle of friends, a man whose lover has been hanging on to life by a thread for six months, a man whose lover was recently at the point of death and now is enjoying a period of good health, and a man whose lover died seven months ago and who is back in the group again because his room-mate has recently been diagnosed.

Sometimes people ask us if it is really possible to have such a diverse group work. Our experience is that the diversity is one of the things that makes the group most meaningful to everyone present. I remember Krandall saying, "It's so important to have Herta here, reminding us that most mothers are so completely supportive. And it's equally as

important for Herta to know that we share her pain that her son has stopped eating."

Just last night, someone said, "I don't think you all realize how important it is for us gay men to have the women here. Many of us are isolated from our families. We don't talk to our mothers and sisters." It was good for all the women there to hear that they are valued.

Marie then said that as a straight woman, she had expected to feel a little out of place. She expressed the feeling that she had felt a real part of the group immediately and told us how beautiful she found that to be.

In times of crisis, the whole group becomes a cohesive unit. People call with offers of help; one person will sit with the critically ill lover; another will shop or bring over a casserole.

One man said to me, "The last days of my lover's life were horrible. But I can't tell you how much comfort there was in all the messages left on my machine. It was so good to know all my friends were thinking of me." Jerry said the other night, "It was so wonderful to see Michael and Dana at Ellis' funeral in Oakland even though I told everyone not to come. And then to see all the group gather at my house the next night. No one else would know how I needed everyone's love just then."

I treasure what Christian said about two weeks ago. I had thought he seemed preoccupied for a while. Suddenly, he said, "Wow, I can hardly wait to get home. I'd been thinking that I've been Jim's sole support. Something Dale just said made me realize that Jim has really been taking care of me for the last two weeks. I need to get home and let him know how much I appreciate what he's been doing for me."

I remember how touched we all were by the man whose identical

(cont. page 7)

HEROES AND HEROINES OF OUR TIME

Shanti Volunteers Who Are Also People With AIDS: Part II

Bob Russell

In April '83, I was diagnosed with Kaposi's sarcoma. My life was shattered. At this time, the first wave of AIDS hysteria had broken in the media—front page stories of men diagnosed on a Monday and dead by Friday. Poppers were thought to cause AIDS.

My friends were afraid to touch me or eat food that I had touched. My boss had never heard of the illness. I had to explain to my parents what it meant to have AIDS. And I feared I would not live to see my 31st birthday, a few weeks away. I felt totally alone with my illness.

Three days later, I went to Ward 86, the newly-formed AIDS Ward. While waiting to have my vital signs taken, Bobby Reynolds came into the examining room. Bobby was the first person with AIDS I ever met. He wore his sad, hangdog smile and said, "I heard vou just got diagnosed." He spoke these soft words, tinged with sorrow, that I would hear him repeat time and again to other newly diagnosed men. Bobby touched me then, through my fear and pain with his humanity and compassion and told me to come to the Shanti support group. I did.

There was only one group back then—one Shanti group—one AIDS group. Sometimes as few as two or three people would show up. Now there are 15 Shanti support groups alone. Churches have also formed support groups for people with AIDS; metaphysical groups have formed; therapy groups exist. There are more kinds of AIDS groups than you can shake a stick at. But back then there was just this one little support group crammed into the

Community United Against' Violence (CUAV) office.

And Shanti was small. Jim Geary (just a name to me) actually lived in the Shanti office. Steve, who ran the support group, was Jim's one-person, part-time staff. Shanti was a shoestring operation.

I was still in shock two weeks later, when my counselor first arrived. I remember Marty, a very handsome, tanned blond nurse. I knew I had a crush on him (it turned out everyone had a crush on him). He was soft-spoken, had good listening skills and a smile that would make you melt. I never knew what to talk about. But I liked to look. Sometimes we'd go to the Patio Cafe for coffee and a goodie. I never called him because I didn't want to bother him. Within two months, Marty completed his volunteer commitment and left Shanti. I wonder about him often.

I continued going to the support group. There was Bobby again and Dale. Dale and I were diagnosed the same week and Marty was his counselor too (we used to compare notes). Cowboy Ron was there and a few others, at different places with their illness. All are dead now.

Scottie, from group, was the first man I knew to die of AIDS. He was in his mid-twenties, really cute, just diagnosed — a puppy dog. Scottie got sick real fast. He had an identical twin and the doctors wanted to do a bone marrow transplant. The twins agreed. Scottie went to Los Angeles and had it done. His body was bombarded with lethal doses of radiation. His immune system and everything else was wiped out.

Before the transplant could take effect, Scottie caught an infection. He died like a baby.

I stopped going to group shortly after that. And I didn't see another counselor. I never really associated myself with other people with AIDS, something many people who are diagnosed choose to do. I continued to work full-time, exercised daily and stayed healthy. I lived my life one day at a time and made every moment count.

In October '83, I attended a three-day workshop with Kubler-Ross for people with AIDS. It was at Wildwood. I bicycled there and back from San Francisco and became known as the "bicvclist with AIDS." The experience I got from the workshop profoundly affected me and I moved into a house with two other men with AIDS. We all appeared healthy but within three months, my first roommate had died. There was no will. Friends and family (bornagain Christians from the midwest) arrived, ransacking our home. Some of my possessions were taken as well. The family tried to set me down on my knees to be saved, renouncing my gayness and embracing their beliefs. That was fun!

My second roommate, Geoff, deteriorated more gradually. He developed lots of small infections and got weaker and weaker. When Geoff went into the hospital with Pneumocystis pneumonia one year later, I got my second Shanti counselor. I knew that Geoff would not be coming home, and I needed help dealing with his dying. Mike, my new volunteer, fresh from the training, was just

what I needed. He really helped me through that terrible time. I was the executor of Geoff's will and held his health care power of attorney. The family came. wanting to make his health care decisions, wanting his property. Friends wanted to put him into a hospice. Geoff's last request to me was that everything that could be done by the doctors was to be done. I had to honor that request, despite what other people felt. I felt the wrath of his friends and family. I became very stressed out and got pneumonia a week after his death. Through all the pain and suffering of that process. Mike, my Shanti person, was at my side.

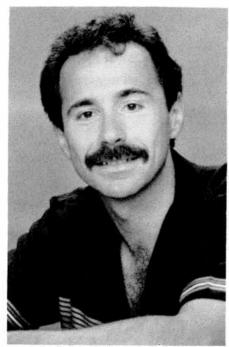
Again, my life returned to normal. I continued working and exercising — both so important for my self-esteem. My only involvement with Shanti from Spring of '84 through the end of '86 was attending the people with AIDS weekends at Wildwood and seeing Mike, my counselor, who had grown into a close friend. From my weekends at Wildwood, I became known as "the piano player with AIDS."

In November '86, I was diagnosed with early stage AIDS dementia. I had been exhibiting symptoms of disorientation, confusion, loss of memory, feebleness and general neurological impairment. I didn't know that dementia is a terminal illness but my friends knew I was dying. I went on AZT at that time and left work. AZT brought me back. The symptoms faded, My brain, which had shrunk, returned to normal size. After three months. I returned to work. But even now, if I stop taking the AZT, I will soon die.

In February '87, I took the Emotional Support training as a community participant and fell in love with Shanti for really the first time. It was the most powerful two weekends I had ever lived. I knew that I had come home. Bobby appeared on the client panel and

looked ashen. He didn't have long to live.

I facilitated the next training in May: so much more love; so many loving, caring men and women. Participating in the trainings continued to feel like the best



Bob Russell

thing for me to do. This training occurred as Bobby was dying. All of us grieved over losing this man; many of us still grieve for him. Bobby was followed by Dale, Cowboy Ron and Sean—men I had known since my diagnosis. Heroes that had chosen to fight AIDS with Shanti support. They are all gone now. My peer group has steadily died off. My grandfather must have felt much like this, watching his friends die.

I have returned to support group after four years. I bring my pain to the group and let it go. Those men left such a legacy to me, to people with AIDS in San Francisco. The plan was to be involved in the August training, but pneumonia again reared its ugly head. I believe this was because of the stress I suffered from dealing with my friends' dying.

Mike and I are no longer counselor and client. Our lives have grown

apart. I miss Mike deeply and still think of him so much. We shared two exciting wonderful years—fun times and painful times. Many friendships don't reach that level of intimacy. He'll always be a part of my life.

I have a new counselor now — Shirley. We're still getting to know each other. I'm happy I'm working with a woman and I get a strong sense that Shirley really wants to be there for me. That feels good.

I regret not having been more active in the fight with AIDS since my diagnosis. I feel like I wasted time. But I didn't know I'd have four and one half good, relatively healthy years. No one would have bet on that. I'm out there now...and fighting. I'm doing what feels right, doing what I should have done back in '83 - giving love and support where it's most needed. I'm able to stand up in public forums now and say, "I have AIDS. I have been living with AIDS for four and one half years." I do it for one reason: so that the newly diagnosed have something to pin their hopes on. Maybe they will have eight and one half good, healthy, quality years!

My heroes are gone. I carry them in my heart. And I, and others like me, must carry on for each of them. Wonderful men and women keep getting diagnosed with AIDS...and keep dying. There is so much pain and sadness in this work. People with AIDS come to me now (now I'm referred to as the "Grand Dame of AIDS") for support and encouragement. There's still so much work to do. AIDS is here to stay and getting worse. But compassion and caring, as manifested through Shanti, is the only thing that makes any sense in all this. As Thornton Wilder said in The Bridge of San Luis Rey: "There is a land of the living and a land of the dead...and the bridge is love."



1987 FINANCE REPORT

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We have examined the balance sheet of Shanti Project as of June 30, 1987 and 1986, and the related statements of support, revenue, expense and changes in fund balance and changes in financial position for the years then ended. Our examination was made in accordance with generally accepted auditing standards and, accordingly, included such tests of the accounting records and such other auditing procedures as we considered necessary in the circumstances.

In our opinion, the financial statements referred to above present fairly the financial position of Shanti Project as of June 30, 1987 and 1986, and the results of its operations and changes in financial position for the years then ended, in conformity with generally accepted accounting principles.

MEMBER AICPA FIRMS DIVISION SEC PRACTICE SECTION

SHANTI PROJECT

STATEMENT OF CHANGES IN FINANCIAL POSITION

For the Years Ended June 30, 1987 and 1986

1987 1986

Sources of working capital:

From operations:
Excess of support and revenue over expenses \$342,573 \$198,356

Revenue and expense item not affecting working capital:

41,735 9,569 Depreciation 384,308 197,925 Total from operations

Uses of working capital:

226,040 43,084 Purchase of fixed assets net of retirements 226,040 43,084 Total uses of working capital

Increase in working capital (Note 4) \$158,268 \$154,841

V- KIX

San Francisco, Californía September 10, 1987

To the Board of Directors of Shanti Project San Francisco, California

SHANTI PROJECT

BALANCE SHEET

June 30, 1987 and 1986

ASSETS	1987	1986
Current Assets Cash Receivables (Note 2) Inventory (Note 2) Propaid expenses (Note 2) Total Current Assets	\$214,537 222,695 4,768 128,484 570,484	\$205,491 159,776 4,292 70,132 439,691
Equipment Office equipment Less: accumulated depreciation (Note 2) Total Equipment, net	325,512 62,624 262,888	99,472 20,889 78,583
TOTAL ASSETS LIABILITIES AND FUND BALANCE	\$833,372	\$518,274
Current Liabilities Accounts peyable and accrued liabilities Accounts payable, City of San Francisco Total Current Liabilities	\$ 56,931 12,595 69,526	\$ 44,695 52,306 97,001
Fund Balance	763,846	421,273
TOTAL LIABILITIES AND FUND BALANCE	\$ <u>833,372</u>	\$ <u>518,274</u>

SHANTI PROJECT

STATEMENTS OF SUPPORT, REVENUE AND EXPENSES AND CHANGES IN FUND BALANCE

For the Years Ended June 30, 1987 and 1986

	1987	1986
SUPPORT AND REVENUE		
Contract cost		
reimbursement (Note 3)	\$1,048,612	\$ 916,610
Grants	477,556	* *10,010
Donations	481.061	350.305
Fundraising	414,995	310.499
Miscellaneous	129,045	148,237

TOTAL SUPPORT AND REVENUE	2,551,269	1,725,651
EXPENSES		
Personnel	1 262 216	
Residence	1,263,916	937,449
AIDS Office	313,788	173,634
Other operating	42,800 490,781	94,180
Miscellaneous		233,796
	97,411	98,236
TOTAL EXPENSES	2,208,696	1,537,295
	217-31475	1,227,493
MET EXCESS OF SUPPORT AND REVENUE		
OVER EIPENSES	342,573	188,356
Ford Polynomia 1		,
Fund Balance, beginning	421,273	232,917
Fund Salance, ending	* 762 044	
• • • • • • •	\$ <u>763,846</u>	\$ <u>421,273</u>

SHANTI PROJECT NOTES TO FINANCIAL STATEMENTS

NOTES TO FINANCIAL STATEMENTS

For the Years Ended June 30, 1987 and 1986

(1) Description of the Project
Shanti Project (the Project) is a non-profit California corporation established to provide community service.

The Project offers free counseling and smotional support for people with AIDS and their loved ones.

The Project provides non-counseling services such as transportation, shopping, and housekeeping, long-term lov-cost housing to persons with AIDS, information and referral services regarding AIDS and professional counselors to San Francisco General Hospital for AIDS patients and their loved ones.

Francisco General Respital for AIDS patients and their love ones.

(2) Summary of significant accounting policies

The significant accounting policies adopted by the Project are summarized as follows:

Contributions revenue.

Substantially all revenue from contributions is recorded when cash is received since this most accurately reflects such revenue.

Propoid expenses

Propoid expenses are smortized during the period in which the Project derives benefit therefrom except for \$12,795 which are deposite advanced by the City and County of San Francisco.

Depreciation of fixed assets

of San Francisco.

<u>Beprocistion of fixed assets</u>

Purchased fixed assets are carried at cost, they have
an estimated life of five years and are depreciated using
the straight-line method. Depreciation expense for the year
ended June 30, 1987 was \$41,735 and 1986 was \$9,569, and is
included in the statement of support, revenue and expenses
and changes in fund belances in general and administration

one changes an arrange expense.

Certain fixed assets are not reflected on the balance sheet since they were donated to the Project and fair market value at date of donation is not reseconably determinable.

value at date of donation is not reasonably determinable.

Income taxes
Shanti Project is exampt from income tax under the
Internal Revenue Code and Franchise tax under the California
Revenue and Taxation Code. Contributions to Shanti qualify
as charitable contributions pursuant to the Internal Revenue
Code and California Revenue and Taxation Code.

Code and California Revenue and Taxation Code.

Reserve for uncollectible receivables
The Project uses the direct write-off method to account for uncollectible receivables since this method most clearly reflects bed debts provision.

Inventories
Inventories are stated at cost on the first-in, first-out (FIFO) basis.

out (FIFO) basis.

(3) Cost relabursement contract

At June 30, 1987, the Project had a contract with the City and County of San Francisco and the State of California. The contract period was July 1, 1986, to June 30, 1987. The contract called for the Project to provide community service to persons with AIDS in five distinct areas, in addition to administering a sub-contract for the San Francisco AIDS Office. A renewal contract has been agreed upon for the next fiscal year.

The costs incurred by the Project pursuant to this contract for the year ended June 30, 1986 were as follows: Description of the support 138,376

Practical support 138,376

Residence 462,274

Professional counseling 183,598

Subtotal 41,800

AIDS Office subcontracts 42,800

TOTAL 51,008,901

(4) Changes in components of working capital Detail available upon request.

(**) Changes in components of working capital

Datail available upon request.

Office facilities occupied by the project are leased. In addition, the project has a non-cancelable lease for residential property with a resaning term of sore than one year.

Minimum annual rentals under the two leases with terms of one year or more are presented as follows:

1987/1988 \$228,000
1987/1988 \$228,000
1989/1990 199,200
1989/1990 199,200
1999/1991 225,600
1991/1992 180,000

The office lease contains an option to extend the lease for an additional five years at an increased rent. The total office rent expense was \$113,646 in 1987 and \$49,460 in 1986.

(cont. from page 3)

twin had been diagnosed. This man thought of himself as a loner. He seemed surprised each week to find himself at a support group meeting. The group struggled to identify with his belief that along with his brother, he was dying. Finally, one night, Claudia expressed the feeling that for her, losing her brother was losing part of herself. Asa leaned forward and said, "That's just how I feel. I didn't know anyone else ever felt that way."

The range of issues that comes up for group members is all encompassing. One man might be devastated by the fact that his lover seems to be rejecting his support; another might be dealing with his lover's depression. A woman might be trying to bring about a reconciliation between her brother and her parents.

Someone might be at the point of physical exhaustion from working eight hours a day and coming home to be on call throughout the night. But somehow, everyone in the group is able to give a little bit more and let in the enormity of each other's situation.

In the past three and one half years, I have become aware of how different today's groups are from those in the past. When we started, we were listening to men and women who were coping with the reality of AIDS in their lives for the first time.

Today, there is hardly a member who has not lost many friends to the epidemic. Sharing that global grief has brought a greater sense of community. So, in today's groups, along with the new grief, there is also that accumulated grief that everyone has been carrying for so long.

Many members of this group have stretched themselves in order to speak at the trainings we conduct for new volunteers and in order to further AIDS awareness in our community. Still others have gone on after the death of the most beloved person in their lives to become dedicated volunteers in our programs. I commend all these brave men and women who have gone on to serve their community in spite of their losses.

I am completely overwhelmed by the love, concern, and support shown by the people I have worked with for these past years. The depth of compassion from people who are going through so much pain in their own lives is an inspiration to me. I have learned so much and I continue to learn each week. My hope is that I can continue to work with the group as long as there is a need.

SPEND A DAY WITH LOUISE HAY SATURDAY, NOVEMBER 21 – A BENEFIT FOR SHANTI PROJECT

100% OF YOUR WORKSHOP FEE WILL BE DONATED IN YOUR NAME TO SHANTI PROJECT

Louise Hay offers an entire day of healing for your life, your body, your relationships. You will experience her powerful exercises and affirmations and increase your personal understanding and self-acceptance. Above all you will experience her wit and humor, and her charm and touching warmth.

I TOTAL OIL OILION SQUARE, STOCKTON AT POST Streets. San Fran	DECT, NOVEMBER 21, 1987, 8:30 AM-6:00 PM. At the HYATT cisco. Your \$75.00 workshop fee is a tax deductible donation to ir check is your receipt. A confirmation notice and further details
YES, I WANT TO SPEND A DAY WITH LOUISE HAY. PLEASI	E RESERVE PLACES IN MY NAME.
MY NAME (please print or type)	
	ZIP
MY HOME PHONE	MY DAYTIME PHONE
I understand that should I have to cancel, \$50.00 of my fee home address above. The \$50.00 remains my donation to SH RECEIVED BY SHANTI BY NOVEMBER 1st. Please mail this for (made to SHANTI PROJECT) to SHANTI PROJECT. 525 Howard	is non-refundable, but \$25.00 will be refunded and sent to my IANTI PROJECT. ALL CANCELLATIONS MUST BE IN WRITING AND m when completed along with your check for \$75.00 per person Street, San Francisco, CA 94105-3080. ATTENTION: BEA ROMANJARK YOUR CALENDAR FOR THIS SPECIAL DAY. JUST FOR YOU!!!
My Signature	Date
VISA or MasterCard Account No.	Expiration date

Siew Francisco, CA 94121 American Friend Svs Committee San Francisco, CA 94121

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SHANTI PROJECT Provides Individual Counseling • Support Groups Residence Program • Practical Support Program SF General Hospital Counseling

SHANTI VIDEOTAPES

The **Shanti** Project is proud to announce the availability of our complete volunteer training program on videotape. Videotapes of the training program can be used by any group wishing to start an organization to provide volunteer counseling. These training materials are designed to be used both as a resource by the organizers of a new group and in the training of volunteer counselors.

For more information about the **Shanti** training videotapes, call the **Shanti** Project office at (415) 777-CARE.