



# ACET News

## March

**Getting Through the Day:** *Care work at the start of 2021 had many similarities to the beginning stages of the Covid pandemic but with the added layer of a darker, lonelier time of year.*

There were post-Christmas financial challenges and the general health issues that this season brings; January in particular is historically one of the more difficult months, due to anniversaries of deaths or birthdays of loved ones.

**Almost a year into working through the restricted lens of Covid it is clear the pre-existing challenges around health, housing, addiction, finances and family support continue. Unfortunately many of these challenges have become more heightened and debilitating than before and many clients are weary and under-resourced in dealing with them.**

**Overcrowding in many households:** unemployment, home-schooling and limited childcare supports have resulted in many clients experiencing escalated relational difficulties. It has been challenging for some to have safe and confidential spaces at home to talk on the phone about their situations; on the other hand, some clients have become increasingly isolated and struggle with their mental health. Additional time at home has brought up unresolved issues from past traumas and grief.



*Brighter days ahead: we are looking forward to being able to meet clients for walks in the park.*

Thank you for being part of our work!  
You are welcome to read a report on our care work (pages 1 & 2); Covid in Zimbabwe and health news in Dublin's migrant community (pages 2 & 3); and on page 4 an encouragement – with some practical advice too – on how to do more than bounce back from the stresses of this season.

**Return to home-schooling:** we have been empowering clients to maintain strong links with their school liaison officers and teachers and to create routines and structures for their children. Young people are struggling with the lack of social contacts, as well as facing more distractions in their home environment. Self care and mental health minding has been an important need in this area for both adult and youth clients.

**Accommodation:** Some clients have concerns about how to manage their accommodation in a time where welfare and housing support services are more limited. We are working hard to find creative and realistic solutions to ensure clients feel safe and armed with a sound knowledge of their rights as tenants, and also where they can go to access resources in their communities.

*continues on page 2*

## MATILDA PROJECT



### Matilda News: Covid has brought trouble to Zimbabwe too

Not in a massive outbreak and death toll, but because of the severe lockdowns imposed across the region to prevent its spread. Formal, permanent employment in Zimbabwe is under 10%; most work as traders or doing piecework in farms or elsewhere and many emigrate to South Africa or Botswana for work in mines or as domestic workers, etc. Most of these migrant workers have no legal status. What this has meant in day-to-day terms for the villagers served by Matilda Project's two partner projects is that the adult children who usually support their family with "remittances" are no longer able to do so. Still in their second lockdown in the last quarter of the year before harvest with no income stream and no stores of food, a lot of families are experiencing severe hunger and worsening malnutrition.

**On a positive note, the rains this year have been the best since 2014, if not better! Maize is growing and there should be a good harvest in late April**, which will give great relief to anyone who has managed to sow a crop. Schools have been shut so no one has had to try and find money for school fees.

In response we've increased the frequency and spread of food packs to the most vulnerable. An extra 140 vulnerable children were added in November and have been getting a food pack each month since, along with the 100 or so children living with HIV and 138 who have lost both parents.

Then this month, following discussions with the village heads, Willard added 167 elderly people from 11 villages. They got their first food pack in February and we hope to give them another in March and April. These are grandparents, often guardians of kids who have lost one or both parents or sometimes a family member is sick or has a disability. The hardship is genuine: they plough and sow, but fail to harvest enough to feed their households for the year.

— Wendy Phillips, [matildaproject@gmail.com](mailto:matildaproject@gmail.com)



**Left:** A 79 year old grandmother (*left*) with her food pack, and her village Home Based Care co-ordinator, Modester. Her daughter, who is deaf, and two grandchildren live with her: they have no income.

**Right:** The eldest boy is living with HIV; he and his siblings are cared for by their partially sighted grandmother. When Willard (*back*) called there was no food in the home. The grandmother said he was an angel sent from God.



### Care Work update, continued:

**From a health perspective** it is fortunate that hospitals have been able to provide most clients with several months' supply of medication, preventing additional trips. However, we are acutely aware what can be missed during this time: conversations with doctors, clinical social workers and pharmacists. Staff are therefore listening to any gaps that may occur in the interim time and supporting clients to engage with healthcare services when required.

**Mental Health:** 'Lonely', 'afraid', 'very depressed', 'suicidal', and 'hopeless' are words we regularly hear clients use. There is a general sense of discouragement, fear and isolation with the inability to see family and friends, but also struggles to leave home for medical appointments or shopping. Getting through the day is feeling like a challenge more than ever.

Additionally, boundary setting with friends, neighbours or family members can be difficult, as people wish to keep their spaces low-risk while others might not share that same value or respect theirs.

It is so important now to provide emotional support; we encourage clients to be honest and open in how they are doing, what they are needing, missing or grieving, and to explore any slivers of hope, self-care and whatever is 'good enough' for that day. We also help clients practice self-compassion with themselves as much as possible.

A new year usually brings a renewed sense of motivation and new beginnings, however, in 2021 our care model has needed to focus on small achievable and practical responses that support clients' day-to-day living. We have been on this journey for a long time and continue to take the time required, celebrate little victories, offer hope, acknowledge challenges and remain present as we take small steps forward.

— Hansi Chisnall & Olivia Corbett are ACET's care workers



#HOLDFIRM

"May I be kind to myself in this moment... may I give myself the compassion I need."

Gentle encouragement from Kristin Neff



## Migrant Plus Vaccination Campaign

In the year since the Covid-19 pandemic began to rage globally so many things have changed: face covering and social distancing have become normal features of life. Almost every conversation, every action, every plan is affected by the constraints of Covid-19 restrictions and the uncertainty for the future.

Pre-existing health inequalities have been exacerbated by the pandemic. Now numbers of marginalised people find it difficult to access public services. For instance, people who would like to see their doctor are asked to call the surgery first for them to assess the suitability of an appointment. For those already facing language or cultural barriers, it is hard to explain their case online or on phone, which just adds another layer to their hurdles.

Luckily here in Ireland, three Covid-19 vaccines have already been approved and are being rolled-out. This has shed some light onto the path to the future.

Unfortunately, this good news is hindered by the fact that some marginalised people are frequently flooded with misleading information or material that feeds hesitancy towards the Covid-19 vaccine. Migrants seem to be a target of choice for this expanding campaign using social media. Being among those particularly exposed to the risk of contracting Covid-19, migrants should avail of the opportunity of getting vaccinated, free of charge. Unfortunately, this campaign seems to aim at discouraging them.

To try to counteract this misinformation, Migrant Plus is providing reliable information from official sources to help those hesitating make the right decision. To do this, the project is organising both informal conversations and structured online meetings to provide updated information and discuss any particular concerns people may have. So far, the feedback has been positive. Because of the developing nature of the Covid-19 related measures, the informal conversations are taking place on an ongoing basis, while the structured meetings are held as need arises.

To find out more see <https://www.migrantplus.ie/covid-19>.

— Yvon Luky, Migrant Plus, [luky@acet.ie](mailto:luky@acet.ie)



## Coats and Conversations: *addressing inequalities*

The Channel 4 series *It's a Sin* has drawn massive praise for its portrayal of the AIDS crisis of the 1980s and early 1990s in England. Focused on the experience of a number of gay men, it powerfully conveys the grief, shame, bravery and stigma associated with the time. The success of the series has also required some important clarifications. Community activists, including those living with HIV, have told of how medications have transformed the landscape of the virus. Normal longevity can now be achieved with one pill a day and if a person's viral load is 'undetectable' - a level common to over 90% of those accessing the treatment - then the virus cannot be passed on sexually. It is untransmittable (U=U).



*It's a Sin*, image Channel 4



This contrast of the past and present is wonderful good news. However our activities here in ACET in 2021 have shown that for many little has changed. Our care team began the year re-engaging their support of those living with and affected by HIV in Dublin. Tasks during the month included providing a coat for a client who needed one in the cold weather in order to access medication from the local pharmacy; empowering a client who has gone months without taking their HIV medication and supporting a client whose anxiety levels and poor mental health are such that they are struggling to eat regular meals. Like the bottom of Maslow's famous triangle, so much of our work is still addressing the most basic of needs, just like we were 30 years ago.

What sprung to mind is this quote from the 4th century theologian, Basil the Great: **“The bread which you hold back belongs to the hungry; the coat, which you guard in your locked storage-chests, belongs to the naked; the footwear mouldering in your closet belongs to those without shoes.”** There is enough to go around in our abundant world. There is enough to ensure that U=U and long, healthy lives can be unreservedly celebrated by all those living with HIV. But we must be willing to turn upside down the way that all our pandemics exacerbate our inequalities. Another world is possible. Our hope is that each coat, each empowering conversation and each practical support can be a glimpse of what could be.

— Richard Carson is ACET CEO

## Somehow We Do It — But How?: ‘unslumping’ ourselves



When day comes, we ask ourselves,  
where can we find light in this never-ending  
shade?

The loss we carry,  
a sea we must wade.

We've braved the belly of the beast.

We've learned that quiet isn't always peace  
and the norms and notions

of what just is  
isn't always justice.

And yet the dawn is ours  
before we knew it.

Somehow we do it.

— Amanda Gorman, from *The Hill We Climb*

So, how do we do it? What's to be done?

It's not just bouncing back. Consider birthing, its rhythm and cadences. The transition is the hardest part. Many say, “I can't do it, it's too hard!” and need the assuring words of “You can, I'm here with you”. And then follows the push, but before and after the push, a breath! Breathe, then push, then breathe.

Think of transitioning from this darkest season of retreat, from this long wintering of the pandemic, from this fallow time of grief, loneliness, loss and fear. There is constant hoping that we may soon be moving, tentatively, tantalisingly, towards the end of this big pause. Yes, somehow it seems like birthing. As we push into the Spring, we want to hear the midwife's voice, “Breathe my love,

breathe. Now push, and now breathe again”. Pushing without breathing is dangerous. So breathe, and breathe again.

To breathe before we push is an act of love. Revolutionary towards ourselves, towards others. And oh the preciousness of every breath! Our daily push? Getting out of bed, ‘homework, housework’: breathe, push and breathe. The breath is a literal breath but there are other helps too.

Rudyard Kipling says:

I keep six honest serving-men

(They taught me all I knew);

Their names are What and Why and When

And How and Where and Who.

**WHAT** can I do right now? A cup of tea and breathe again. Pet the pet. Touch the toes. Smell the smells. Delight in breakfast. Swallow and follow. Blink your eyes and pray and read and walk and move and listen to children laughing, birds singing, wind blowing, trees moving. And move with all of them.

**WHY?** ‘Being in a slump is not much fun, and unslumping yourself is not easily done’ (Dr Seuss). Admittedly meaning is elusive, but it has not gone. There is watching and waiting for planted bulbs to sprout, the hope of a carryout coffee with a friend, the vaccine, the promise of a nice hot shower.

**WHEN** will it end? Overwhelming. My very nervous system feels under threat, but the music continues. Let's befriend a tune and move and move and make your bed and zoom or text a pal. If you are safe tell your nervous system, “Now, just now, you are safe”.

**HOW?** Rediscover the values in your core! Hope, faith in the One who loves you. Patience: soon things will change.

**WHO?** And breathe in the sense of who is my Who: my loved ones; God; my beloved animals; a neighbour; a friend. So breathe, in for the count of four out for six. Repeat and be resourced for the moment. For eternity.

So breathe, my love, breathe.

— Vivienne Morrow Murtagh is ACET's counsellor

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