Fall 2003

Call of the Amazons

Humboldt Community Breast Health Project

Volume 4, Issue 4

HCBHP volunteer Sharon Nelson, center, stands with cellist David Davis, M.D., and pianist Felicia Oldfather. Davis and Oldfather performed together at the Breast Health Project's third annual benefit fundraiser, including Dr. Luther Cobb, Sue Mullin, Nancy Correll and Annette Gurnee Hull.

An Evening of Music & Light

The Humboldt Community Breast Health Project presented its third annual musical fundraiser, "An Evening of Music and Light," on Sept. 21 at the Van Duzer Theater, Humboldt State University.

This year's concert featured several return performers: Dr. Luther Cobb, who played pieces from Grieg, Gershwin and Gottschalk; Sue Mullen, Nancy Correll and Annette Gurnee Hull, performed their stunning piano duets and art songs. New to this year's program, Dr. David Davis and Felicia Oldfather, played a duet for cello and piano; Virginia Ayoob, Ryan MacEvoy-McCullough and David Davis, played a fantasy piece on clarinet, piano, and cello.

Sharon Nelson, HCBHP volunteer and breast cancer survivor, once-again chaired the lavish event.

Thanks again to the community for supporting us and to the many volunteers and sponsors, who donated to make this a special event.

(See page 10 for more on the concert donations).

The Rope Burns of Cancer and Beyond

by Julie Ohnemus, M.D.

The diagnosis of cancer almost always presents the opportunity for grieving. (I write from the perspective of cancer, but in truth, this is applicable to any illness or loss we experience as human beings.) Our culture recognizes the need and allows time for grieving when someone actually dies. But indeed cancer often causes many losses, that if grieved, can be fully accepted and result in greater wholeness.

> *Sometimes the loss is a small one and sometimes it is a very big one. Sometimes the loss is an illusion that I've held for many years. Whatever it is that I lost, I must grieve...It is imperative that I take responsibility for the impact the loss has made on my life and that I take the time to deal DAILY with the feelings that arise as a result of the loss...If I do not do my grieving about the old hurts and insults, then, when I am faced with a here and now grief experience, I will end up having to dredge up all that old energy along with the current experience. ("Good Grief Rituals" by Elaine Childs-Gowell, ARNP, PhD)*

LOSSES

The Office of Cancer Survivorship (OCS), National Cancer Institute, defines "survivor" as anyone who has been diagnosed with cancer from the time of diagnosis and for the balance of that individual's life. It is important to note that the OCS also considers caregivers and family members to be secondary survivors as they too are touched by the experience of cancer in a family member or loved one. New figures compiled in April 2003 indicate that there are now 9.6 million persons living with a history of cancer in the United States, and so this process of grieving affects many of us.

Each cancer survivor can list losses that she or he has experienced either

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From the Director

Recent life events have drawn me to review my journals of when I was diagnosed with breast cancer in March 1996. Journaling or writing about your experience has been proven in clinical trials to improve your illness (see "The Write Stuff" on page 8). For me it allowed me to release the emotions of the experience on my shoulders. In looking back it has allowed me to see where I have come and remind me of the lessons learned. It is a tool that all of us possess and requires only pen & paper. For some it takes the form of interwoven art. The experience in word can also be a gift for others. The following is an excerpt from my journal dated 12/31/96. Though it retraces events occurring seven years ago, they still serve me today to work through another struggle and opportunity to grow:

'96 – a topsy-turvy year, and a journey destined to change the rest of my life. Images that stand out: a dark cave – the roller coaster – the hat – the question mark – the "grace spot" – the spore – the poppy – the garden – the flute. . .

It has been a year of "lightening" – I have re-connected and re-membered – letting go of past aggressions and forgiving myself. I have reacquainted with the emotion of anger, of grief, of depression, of fear. This has opened the precious present to me. I have grown in self-love, self-trust, and self-loyalty, which has only deepened my faith and spirituality. Prayer has become a means to communicate with the consciousness of the Universe – intoning to Her schedule.

Uncertainty has opened me to process, to creativity, to curiosity, to courage. I have renewed my awareness of my center, which has faithfully awaited my descent. As I entered the underworld and passed through many gates of fear – forced to shed much of my identity – my roles of physician, administrator, provider of finances . . . – I wondered and feared what I would be without those faces. Not only did my roles change, but so too my appearance. Running on empty . . . So stripped, I stood naked to my emotions; my past achievements could not save me; my future could no longer be calculated – I became vulnerable to the moment (someone commented they had never seen that look of vulnerability in my eyes before).

Blessed, the moment embraced me, and simply nurtured my heart, and my nakedness became holy – an awakened spirit on a human path. Intuition became my embodied perceptive sense. Human being became a verb instead of a noun. And this transformation led to much healing and re-birth.

'96 – a year of my re-birth, still the same and yet different. Open to the joy of vulnerability, the imagination of the soul, the gift of love, the lamp of awareness, the passion of life . . . '96 – a good year.

Knowing that I emerged from this year with more than I started, offers me the hope to trust what life deals me. Engaging in the process, which involves being present to life and grieving the losses (see grieving article), gifts me with the opportunity to discover greater wholeness and meaning. Cancer can initiate that opportunity for everyone. This is what healing is all about.

Julie Ohnemus, M.D.

Humboldt Community Breast Health Project.

a community resource of support and education for those facing a breast health concern or breast cancer

We are a client-centered, grass roots organization with services provided by breast cancer survivors and their support persons.

We promote healthy survivorship through education, healing support and hope, enabling each person to become their own best medical advocate

We support and challenge our community to address breast health concerns responsibly and holistically

As survivors we heal through service and by bearing witness to others

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The opinions and views expressed by individual contributors do not necessarily reflect those of HCBHP

Meet Our Staff

Dawn Elsbree,

Director Of Operations

After many years of being a full time mother to my three children, I was beginning to go a little stir crazy and was feeling a growing need to re-enter the paid workforce in some meaningful way. I read about this job opportunity with HCBHP in the Times Standard and felt something resonate deep inside. I had heard of the Project and its work and felt a deep admiration for the staff and volunteers who had committed themselves to helping those with breast health concerns.

My background is in non-profit management and I have always been driven by a need to feel like my work was somehow helping to make the world a better place. Locally I have worked for Youth Educational Services at HSU and at the Ink People Center for the Arts as well as doing some freelance grant-writing. Every day I spend at the Project, I feel more at home with the warm, loving people whose mission it is to offer compassion and healing help to others. I am thrilled to have this chance to join them and help HCBHP grow to serve even more of the local community. It is an honor to work with such a thoughtful organization.

Holly-Yashi To Produce Jewelry with HCBHP's Amazon Warrior Logo

Holly-Yashi and HCBHP are teaming up to produce a line of jewelry using the Amazon Warrior logo. We will have a line of ear rings, pendants and pins to market in the hopes of raising money independent of grants. We will sell the jewelry through the Breast Health Project's office, on the web and through the newsletter. Our projected goal is to have some of these available for selling in early October.

Choose 5490 at the Coop

Although we missed the deadline to be part of the 1% donation program, they still may provide the Project with a dividend contribution based on patronage. So keep on using the number and next year we will be back to the 1% at the register program.

HCBHP Receives Women's Foundation Grant

HCBHP received a $10,000 grant from the Women's Foundation Community Action Fund to help support the Patient Navigator Program. The Project is known for improving the service standard in breast cancer care by offering ongoing monthly support groups, coordinating care between the medical system and community services and assessing women with uninsured and/or underinsured assistance needs. With the help of the grant, the Project will be able to address the breast health needs of Hispanic and American Indian women.

Expected Outcomes:

- Improve the quality of our services by strengthening our Patient Navigator Program with continued volunteer training and community outreach.
- Recruit and train more volunteers to keep pace with increasing need for services.
- Meet with area health care providers to provide information and ensure that they understand the services we offer and how to refer clients to our program.
- Outreach to underserved communities that help us move toward having our client demographics more closely reflect the demographics of Humboldt County as a whole.
- Translate our brochure and key educational materials into Spanish to enhance our participation in local Hispanic health fairs, and educate women about the importance and methods of earlier breast cancer detection and address potential fears about accessing our health care system.
- Collaborate with Potawot Village staff to develop a framework for an annual women's health event and create a breast health information booth for Activity Days.
- Outreach to providers at Potawot Village to create a system to refer women with abnormal mammograms to HCBHP Patient Navigator Program.

HCBHP Receives Grants from Local Foundations

Both the Union Labor Health Foundation and the Mel and Grace McLean Foundation have awarded the Humboldt Community Breast Health Project funds to help bring more healing to families in Humboldt County. HCBHP received $9,750.00 from the Union Labor Health Foundation to help fund a Patient Navigator Program Outreach Coordinator position. This position would assist Mary Scott, our Clinical Services Director in meeting the ever-increasing need for client services as well as outreach to underserved communities. The Mel and Grace McLean Foundation awarded the Project a grant in the amount of $7500 to help fund the production of the Project s quarterly newsletter.

A Day in the Park

A diagnosis of cancer affects the whole family, including children. As a way of honoring the children who have walked the journey with us, from diagnosis to recovery, "A Day in the Park" was created. This fun-filled event honored the supportive role children take in the healing of their family members with cancer.

Thanks to Mary Scott, "A Day in the Park" was a huge success. 23 children and their families attended. Thanks to Joseph Byrd who entertained and accompanied the childrens' activities with his accordion and Nina Wolf for painting the young and friendly faces.

Volunteer Opportunities

Warm-line Volunteers Needed

Warm-line volunteers are the backbone of the Breast Health Project. Warm-line volunteers are cancer survivors and support people who are available during our open hours to listen, answer questions and provide referrals. Warm-line volunteers are asked to work in the office for a minimum of four hours per week, greet clients/visitors, perform client intakes, document and follow up on client activity, maintain files, research and provide information to clients/community. Volunteers perform with the supervision of the Patient Navigator Coordinator. Training will be provided. Please call Mary Scott at 825-8345 ext. 2 if you are interested.

Volunteer Position Opening: Library Assistant

The HCBHP resource library contains the area's most extensive collection of topics on breast cancer and breast health issues. As a lending library, there is a critical need for a library volunteer who will follow-up on overdue materials with friendly reminder calls and be sure that materials are returned in a timely manner. A minimum commitment of 3hrs/month should be sufficient to insure that our library is kept up-to-date and materials continue to be available for public use. Training provided. If you are interested call Maria at: 825-8619.

In Memory of Andrea Martin

She was a true amazon warrior, a pioneer in the breast cancer advocacy movement, an environmentalist and a visionary. Her work still continues with the Breast Cancer Fund.

In Memory of Isabel Gaasch, HCBHP volunteer

Her work with the Project was invaluable, and in light of her advanced cancer, she gave us grace and beauty.

In The News

Pesticide-free Advantage

Studies have shown that food grown organically or without pesticides contain up to 58% more polyphenolics. Human diets high in polyphenolics can reduce the risk of heart disease and some cancers.

Put the remote down.

Another study suggested that regular, moderate exercise in postmenopausal women reduced their risk of breast cancer. What was different with this study is that it showed that even just walking 30 minutes three times a week offered protection.

Emerging Lymphedema treatment?

Two cycles of laser treatment were found to be effective in reducing the volume of the affected arm, extracellular fluid, and tissue hardness in approximately 33% of patients with postmastectomy lymphedema at 3 months after treatment.

Support proven

Higher levels of perceived emotional support showed a moderate but significant association with increased survival in African-American and white women with breast cancer who were followed for 10 years after diagnosis when adjusting for known prognostic factors.

Stable

Death rates from the four most common cancers - lung, breast, prostate, and colorectal - continued to decline in the late 1990s according to new data from the "Annual Report to the Nation on the Status of Cancer, 1975-2000." For all cancers combined, the death rate began to stabilize in the late 1990s, showing neither an increase nor a decrease, while the incidence rate (newly diagnosed cases) began to stabilize in the middle of the decade.

Death rates from breast cancer continue to fall despite a gradual, long-term increase in the rate of new diagnoses. Declining breast cancer death rates and rising breast cancer incidence rates during the 1990s have been attributed, in part, to increased use of mammography screening. This report notes that higher rates of late-stage disease in some population groups and geographic areas may reflect delayed access to care, often among women who lacked health insurance and among recent immigrants.

Age BIAS!

The results of the current study indicate that based on older age alone, women are less likely to receive adjuvant chemotherapy. Women older than 65 with tumors that do not respond to estrogen, so-called ER-negative tumors, were about seven times less likely to be treated with chemotherapy than women younger than 50. This is worrisome because these women do not benefit from estrogen therapy. "For them, chemotherapy is the only option,". Women with ER-positive breast cancers between the ages of 50 and 65 were six times less likely to be offered chemotherapy and those over 65 were 62 times less likely to receive it than women younger than 50. In addition, the results suggest that age bias may contribute to undertreatment and lack of accrual of older women into clinical trials.

Mammography and then . . .

Women whose screening mammography results are interpreted as "suspicious abnormality" or "highly suggestive of malignancy" have a high risk for breast cancer and should undergo core-needle biopsy or needle localization with surgical biopsy. Women whose screening mammography results are interpreted as "need additional imaging evaluation" have a moderate risk for breast cancer and should undergo diagnostic mammography or ultrasonography to decide whether a nonpalpable breast lesion should be biopsied. Women whose screening mammography results are interpreted as "probably benign finding" have a low risk for breast cancer and can undergo follow-up mammography in 6 months. Either fine-needle aspiration biopsy or ultrasonography is recommended as the first diagnostic test of a palpable breast abnormality to distinguish simple cysts from solid masses. Fine-needle aspiration biopsy also allows characterization of a solid mass. Diagnostic mammography does not help determine whether a palpable breast mass should be biopsied and should not affect the decision to perform a biopsy.

Prescription Drug Pricing Litigation - Taxol Settlement

For those of you (or your family or friends) who have been treated with Taxol (paclitaxel) between January 1, 1999 and February 28, 2003, there is important news that may be of benefit to you, as well as to everyone. Who needs this drug in the future? A number of Attorneys General have recently announced the settlement of a law suit brought against Bristol-Meyers Squibb, the Taxol patent holder, and individuals who received the drug between the 1999 and 2003 dates may be eligible to recover cash as a result of the settlement.

The lawsuit claimed that Bristol-Meyers Squibb fraudulently obtained patents on Taxol in order to prevent the marketing of less expensive generic forms of the drug. Under the terms of the settlement, Bristol-Myers Squibb must make cash payments to eligible patients or their surviving heirs, and must also make Taxol available at no cost to patients who show the appropriate level of financial need.

To find out if you are eligible to recover under the settlement, or to let your family and friends about it, visit: http://www.taxolsettlement.com.

The Rope Burns of Cancer & Beyond *cont'd*

because of the cancer itself or the treatment. As medicine begins to study quality of life as it relates to cancer and its therapy – losses and dysfunctions that so many survivors have reported over the years are now being verified. The losses of body parts, including temporary hair loss, have been acknowledged as side effects of therapy for some time. But recently the Office of Cancer Survivorship has verified such losses as cognitive and sexual dysfunction, which too often, is not discussed. The financial instability that one experiences, including job loss, job lock in order to afford one's health insurance, promotion loss (who wants to invest in someone with a history of cancer?), money loss with out-of-pocket expenditures (travel, complementary therapies, higher insurance costs, child care costs...) is not acknowledged by society. And the loss of our culture's illusion of immortality can have a large psychological impact that looms in one's awareness, or not, but does come out as fear, anger, depression, and illness if not dealt with. Stephen Levine defined grief as: "the rope burns left behind when what we have held to most dearly is pulled out of our reach, beyond our grasp." This definition reflects the image of uncertainty that a cancer diagnosis and its treatment can create.

Too often these losses are belittled because we are told or it is implied we should just be grateful to be alive. (And believe me, we are very grateful to be alive!) As Lawrence Leshan, PhD, states in "Cancer As a Turning Point": "One of the most weakening factors in the cancer situation is the steady pressure to stop thinking & feeling about yourself as a person who happens to be sick at the moment and to start responding to yourself as a sickness that seems to have a person somehow attached to it. All your efforts and thoughts gradually get turned toward the illness and the treatment." We need to return to the "first person". Cancer's "lesson" is not about settling for less, rather facing one's own mortality often calls us to live life more fully and to seek out healing. To achieve this healing we must grieve both the small and large losses in our life.

What does grieving mean? Grieving is as unique as the experience of cancer itself, so the form grief takes varies from person to person. But there are common elements to grief work. According to Elizabeth Kubler-Ross, when we have a grief issue, we go through five stages: first we deny the event; second we try bargaining the situation with "magical" thinking, hoping to change it; next we become sad, mad, scared and maybe depressed; finally we come to reconcile ourselves to the loss. However, often in cancer or other situations where there are many recurring losses - it is nearly impossible to move through grief in a logical, organized way. The traditional idea of "stages of grief" are too simplistic, and the "stages" of grieving bump up against the stages of another one, and another one . . . Dr. Paul Kent Froman who has studied grief in AIDS says the "result is a chaos of emotion." Froman describes four "elements" of grieving: 1. Be willing to experience your feelings, as opposed to repressing or stuffing them, or getting stuck in them. 2. Realize that you are still in control of your life. 3. Grieve in your own way. 4. Be willing to take action.

Whatever form your grief takes, it is important to remember that grief takes time and space; it is a process, so that whatever you are feeling it is all part of the process of healing; this process is often cyclical in nature – meaning there are levels to our pain and letting go; and that action is a crucial part to the process. Taking action creates opportunity for us to move from being victims to survivors.

Grieving's Common Threads

First one must pause to recognize & acknowledge the loss. Make a list of your specific losses – remember the day of your diagnosis, your treatments and their impact on your life, etc. For some this simple act of taking time to acknowledge the loss is healing in and of itself, but it is more common, additional steps are needed to accept and let go of the loss.

All those "parts" of yourself were important or useful to you at some level prior to their loss, and thus the reason for the pain. Ask yourself, "What were the feelings I felt as I listed my losses? Did I feel sad? Did I feel numb? Look at your list and choose one you would like to explore more deeply. Take some time to write about the loss. Describe it. Remember stories, experiences, images, and sensations. Write down your reflections and feelings. If you are experiencing feelings, stop and let yourself feel them.

Lots of us believe we don't know how to grieve. We never learned how to listen to and feel emotions. Truthfully, you are the world's authority on how you feel. Grief does not necessarily result in a day-long cry, although it may. You can process and express grief in numerous ways. Examples of ways to express grief include:

- Cry.
- Draw or paint a picture.
- Write a letter, poem, story or song.
- Rock.

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The Rope Burns of Cancer & Beyond *cont'd*

- Sing or play music.
- Talk to a friend or helper.
- Think about past times you have grieved & write down your own ideas in your journal.

("Reaching for the Light" by Emilie P. Rose)

As you grieve your losses you are not only looking for "relief", but also for truth. You must move away from the why for the loss and the blame for the loss, because this keeps you in your head. Rather you must look at the loss directly in the eye. If you allow yourself to feel the pain of the loss with the intention of moving through it then grieving will occur. Part of moving through the pain involves honoring the part or function and how it fulfilled your life before cancer. Ask yourself – what did this serve or do for me? How did it please me? How was it part of my identity? What will I miss without it?

Once people find themselves in the pain of the loss, the question arises how to move out of the pain. Part of the healing is the process of finding the answers for you. According to Dr. Lawrence LeShan: "The truth is that the solution comes from becoming more and more the self you truly are." Loss, in fact, does reveal more of our self. It perhaps raises our attention to something we took for granted. Loss can rid us of our masks, our roles, our false gods, our identity, as we knew it, till we are left with our bare essence. Fighting for this true essence develops our self-love and value.

If I remain committed to moving through the pain of the loss – not clinging to the past – I am forced to be creative to see how I might live without that part of myself. I need to ask – how can I make my life different and better after the illness than it was before? What is my purpose in my life's new context? What can I become without this loss? Can I move beyond "I am this" to just "I am"? Answer with your heart, not your mind. Your answer is right because it is yours. Just dare to imagine it!

"She became ... 'a complete beginner'. She became naked to the truth. Trusting her 'new unknowing', she stepped childlike onto the wide, exciting path ahead. Willing to let go of old ways of the thinking and hiding... She saw that going whole-heartedly within the problem was the answer.... No longer just 'a warrior'...but a pilgrim with fascination and respect." (Healing into Life and Death by Stephen Levine)

Eventually, grieving brings you to a point where you become ready to let go of the loss. This letting go often happens gradually. Note you are "letting go" – not "giving it up". These involve different stances and amount of control. In "letting go" there is more of a stance of acceptance, as opposed to being victimized. Ask yourself: How do I touch my life and this loss with mercy instead of fear or dread? How do I soften or make peace with this loss? In grieving you send forgiveness into your pain instead of fear (e.g. forgive your body for having cancer) – let your anger move into compassion and eventually healing will arise.

Reflect on ways you might symbolize your grief process and the letting go of losses. Consider using an action that symbolizes the letting go, such as:

- Write a letter to say goodbye.
- Paint pictures that show the loss and letting go.
- Create something new at the place of the loss.
- Make a divorce certificate.
- Create a ritual of the before, the letting go, and the after – representing a rite of passage. (Example rituals found in "Good Grief Rituals")
- Do a guided imagery picturing yourself letting go.
- Write in your journal ("Reaching for the Light").

Grieving does not change the past, but it does change the color, flavor, and texture of the memory or its current presentation, and its impact on our physical, emotional and spiritual self. As cancer survivors we need to develop a "fierce and tender" concern for all of the self, not just the physical. We as human beings possess individual self-healing powers; the question is how to mobilize our innate healer and bring into play our search for our complete health. Grieving is such a means of mobilization.

Once you accept the loss, you can integrate the "new you" into your life. I recall when I was at such a point in my cancer experience. I was reading the "Care of the Soul" by Thomas Moore, and had reflected on the passage: "Wisdom is the marriage of intellect's longing for the truth and soul's acceptance of the labyrinthine nature for the human condition." That night I had the following dream recorded in my journal:

"Last night I dreamt, a group of people & I were a summoned jury held up in a hotel room, awaiting to be called to the jury box. We readied ourselves, read the details of the case. For some reason we were packing our suitcases with all our belongings from the dresser drawers. Eventually, we were called forth and ended up outside in a mall of small shops. There was a question: Is this a court of law? As we stepped to

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The Rope Burns of Cancer & Beyond *cont'd*

some nearby microphone and recorded our verdict, from on high the reply came: "No, this is a "court of being."

The jury was out on how I might integrate my new wisdom – the marriage of my new truth and my acceptance of my human condition. But my dream told me I simply needed to be with my self, stay open, be flexible, and allow time and patience to heal. And I did heal – in my wholeness I found gratitude!

As you go through the process of grieving and healing from your losses, remember: Grieving takes time, patience, courage, and creativity. Grieving involves pain. Tears are often essential. Pain will transform and often lessen in intensity – sometimes fading completely. You will feel better. Grief is part of healing. You are not alone.

The Well of Grief

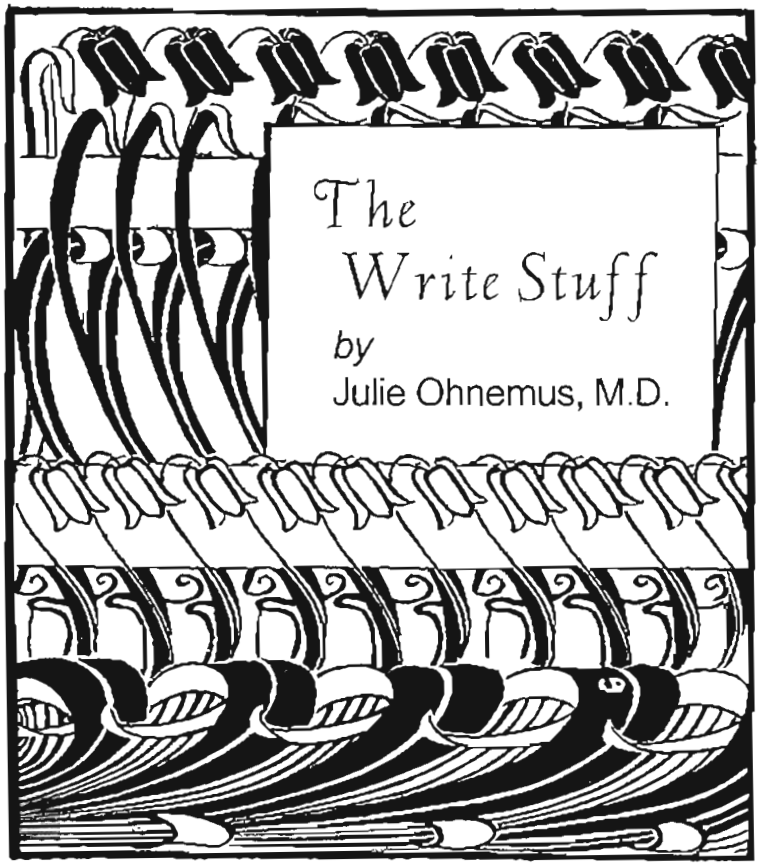
Those who will not slip beneath
the still surface on the well of grief

turning downward through its black water
to the place we cannot breathe

will never know the source from which we drink,
the secret water, cold and clear,

nor find in the darkness glimmering
the small round coins
thrown by those who wished for something else

David Whyte
(from Where the Rivers Meet)



Can writing about your feelings really improve your health? Yes, according to researchers who have explored this topic. Studies have shown that the simple act of writing about emotionally difficult events or feelings has a positive effect on the immune system functioning and a direct impact on the body's ability to withstand stress and to fight off infection and disease. People who write about stressful experiences visit doctors less often and have stronger immune responses. (UCSF Cancer Resource Center Newsletter. Fall 2002)

Kathleen Adams, director of the Center for Journal Therapy (888-421-2298 or www.journaltherapy.com) writes the following on her website:

What is the Power of Writing?

Life-based writing is one of the most reliable and effective ways to heal, change and grow. The journal, notebook, computer screen or blank book creates a bridge between the past and the future.

The power of writing is accessible to anyone who desires self-directed change. It requires no special talent, skills or experience — only a willingness to explore moments of ecstasy and moments of despair, critical illness and crucial life choice, psychological healing and spiritual discovery.

Journal Therapy

Journal therapy — the purposeful and intentional use of reflective writing to further mental, physical, emotional and spiritual health and wellness — is an effective means of providing focus and clarity to issues, concerns, conflicts and confusions. Journal therapy transforms the traditional diary into a genuine, unique therapeutic method that offers cost-effective, holistic self-management through the introduction of style, technique, creativity, intimacy and life mastery.

Getting Started . . ..

Experiencing writer's block? Here are some ideas on how to free your "writer within" (excerpted from Natalie Goldberg's Writing down the Bones, Shambahla Press, 1998, p.46)

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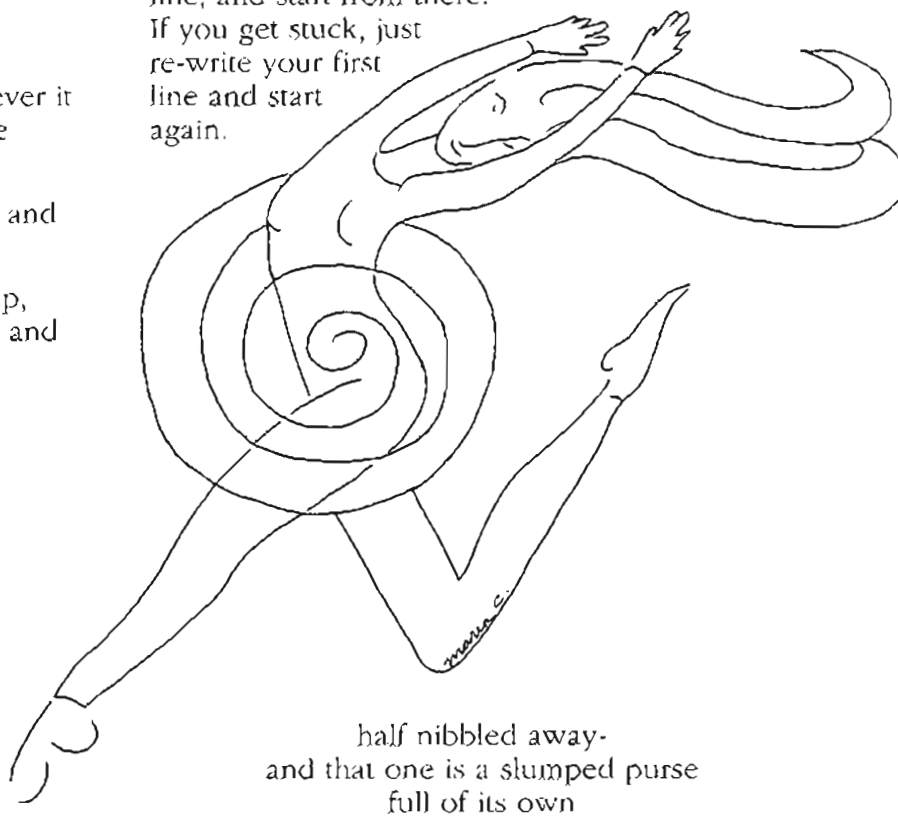
The Write Stuff *cont'd*

- Begin with "I remember. . .". Write lots of small memories. If you fall into a large memory, keep going. Don't be concerned if the memory happened 5 minutes ago or 5 years ago. Everything that isn't this moment as you write is a memory coming alive again.
- Take something you feel strongly about, whether negative or positive, and write about it as though you love it. Go as far as you can, then flip it over and write it again as though you hate it.
- Choose a color, any color, and then take a 15-minute walk, noticing your chosen color wherever it appears in your environment. When you arrive back home, write for 15 minutes.
- Pick a place – a laundromat, a bus stop, a café and write what is going on around you.
- Write about your morning. Breakfast, waking up, walking to the bus stop. Slow down the details and be specific as possible.
- Write about 'leaving' using any approach you would like.
- Visualize a place you really love. Be there. See it. Now write about it.
- Who are the people you have loved? Describe them with love.
- Take a poetry book, flip open the page, take any line, and start from there. If you get stuck, just re-write your first line and start again.



The Ponds

Every Year
the lilies
are so perfect
I can hardly believe

their lapped light crowding
the black,
mid-summer ponds.
Nobody could count all of them-

the muskrats swimming
among the pads and the grasses
can reach out
their muscular arms and touch

only so many, they are that
rife and wild.
But what in this world
is perfect?

I bend closer and see
how this one is clearly lopsided-
and that one wears an orange blight-
and this one is glossy cheek
half nibbled away-
and that one is a slumped purse
full of its own
unstoppable decay.

Still, what I want in my life
is to be willing
to be dazzled-
to cast aside the weight of facts

and maybe even
to float a little
above this difficult world.
I want to believe I am looking

into the white fire of a great mystery.
I want to believe that the imperfections are nothing-
that the light is everything -- that it is more than the sum
of each flawed blossom rising and fading. And I do.

Mary Oliver

Forever Grateful

With deep gratitude and appreciation, we thank the following individuals and businesses that have made contributions to the Humboldt Community Breast Health Project, from June 19 to September 15, 2003

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Coming Soon!

Holly-Yashi Amazon Warrior Jewelry Line

Amazon Warrior logo designed by breast cancer survivor, Maria Carrillo

Spread The Word About HCBHP

By Proudly Wearing our Amazon Warrior Logo*

T-shirts (short sleeve) $18.00 (long sleeve) $20.00
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Youth T-shirts– $14.00
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***T-Shirt Colors Available:** natural/ash/stone-washed green
Youth-daffodil yellow.

*Please call the office at 825-8345 for sizes and colors available

Dr. Luther Cobb's 2001 Benefit Performance

CD's still available

$10.00 donation

Mail this page to: HCBHP
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HCBHP Programs

Amazon Warriors Support Group

Provides psychospiritual support and networking for breast cancer survivors and meets the first and third Thursday.
Fortuna Support Group meets on the first Saturday of the month.
For more information on times and location, call 825-8345

New Support Group

Gynecological Cancer Support Group will be meeting the second and fourth Tuesday, at 3 p.m. For more information, contact Carol Vander Meer at 825-6610 ext.5.

Internet Access

Offers searches on topics related to cancer. (A great deal of cancer-related information is available over the Internet.)

Lending Library

Offers the latest books, tapes, and videos (on western and complementary medicine) to help breast cancer survivors and their families and friends

WeCAN! - Women's Cancer Advocacy Network

A group of trained advocate volunteers who help support and guide women and their support system through cancer screening, diagnostic and treatment services.

Upcoming Events

October 10 & 11, 2003

Reclaim Your Life After Cancer

Redwood Acres Fairground, Eureka
A two-day workshop for women, packed with self-discovery and enlightening activities, designed to lead you back to your real Self. Led by Kris Falco, Psy.D., Vikki Gay and Joanne Wightman. For more information or to register, contact REAGAL (Redwood Equine Assisted Growth & Learning) at 786-4158.

If you would like your health-related event to be listed in the Upcoming Events, please e-mail information to info@hcbhp.com.

Humboldt Community
Breast Health Project

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