

Volunteering a worthwhile experience

by Esther Dykeman

Like many other Dal students, Paul Carreio has a special friend he sees most weeks.

"I know when I haven't seen her. It's like a good friendship." Paul Carreio's friend is a mentally retarded woman without family who lives in an institution in Halifax.

Paul is a Citizen's Advocate volunteer.

Citizen's Advocacy is only one of the programs available to potential volunteers in Halifax. There are 80 agencies listed with the Volunteer Bureau on Coburg Road. According to Mrs. Marion Flanders, the co-ordinator of the Bureau, over half of them are interested in student volunteers.

Paul feels his experience has been invaluable. "I now have better insight into what it's like to live as a person who is called mentally retarded," said Carreio. The places that they live...what they do on a day-to-day basis. That's a very different sort of life-style than my own."

Paul became an advocate two years ago after some experience working with the mentally retarded. He went through a thorough screening process and was assigned to his protégée. He is responsible for visiting her on a regular basis, generally once a week.

"I was the first person, as far as they (the institutional staff) knew, that she asked for when I wasn't there," Carreio said. "She'd never had a telephone call before...I don't know that her birthday has always been remembered. Certainly, sometimes it has been forgotten."

This week, the Volunteer Bureau organized a display on volunteer opportunities in the lobby of the SUB. Flanders says the response from the display has been good.

Last year there were 250 volunteers registered at the bureau and this year they're anticipating an increase.

"I think unemployment is a factor in the number of people looking for volunteer work," says Flanders. Volunteer work can give working experience and the opportunity to explore different career avenues. "It can provide a very worthwhile reference," says Flanders.

Julie Hutchinson is a part-time student at the School of Social Work. Three years ago her husband brought home a brochure on the "Youth Alternative Society".

This program offers an alternative to a court appearance for youths between the ages of 8 and 16 who have committed a non-violent offense.

Together with the victim, a police officer, and 2 volunteers from the community, the youths agree upon some way in which they can redress the community and the victim. Less than 5 per cent of youths who go through this program become involved with the law again, says Hutchinson.

"I'm tickled pink to be involved in something that can help those kids who've made a stupid mis-

take," she said. "A record is so damaging...It's a very fulfilling experience for me."

Last summer, David Pilon, an honours psychology student at Dal, volunteered two days a week at the Abbey Lane Day Clinic. His motives were essentially practical.

"I've never had the chance to be where there were 'mentally ill' people. I just wanted to get some first-hand experience since I want to go on to graduate work for which you need real experience."

The Day Clinic is designed for acute patients who are able to spend nights at their homes.

"There's such a stereotype about the 'sick' in our society, and I really had no idea what to expect," says Pilon. "I was quite happy to find out that these people are not what others think they are. They're really quite normal. Just like ourselves, but to excess."

David plans to volunteer again if he has the time.

"For me it was certainly a worthwhile and satisfying experience. For people who are interested in helping others, I'm sure they'd find it that way too."

The final epidemic comes to Halifax

by Alec Bruce

Suppose a warhead carrying a one-megaton, thermonuclear device rendezvouses with the corner of Quinpool and Robie Streets at precisely noon on a normal working day.

Instantly, a fireball 2 km in diameter consumes peninsular Halifax with temperatures of 10 to 20 million degrees Fahrenheit, melting most of the subsurface rock. Plumes of ejecta arch thousands of feet into the air, displacing as much as a million tons of earth. The blast produces winds of 200 km per hour, and radiates enough force to collapse houses as far away as Rockingham.

Halifax disappears, leaving a crater 300 metres across and 60 metres deep.

The vital question in such a grisly scenario is, or course, whether the city can ultimately recover. Will clean food and water be available to the few survivors? Will the resources exist to properly care

for the sick and injured? What of shelter and essential services - will they be adequate? Can Halifax, now a 1200 square km desert, ever return to a healthy and vigorous state?

Not according to Dr. Joseph Clarke, local spokesman for the group *Physicians for Social Responsibility*. Clarke believes once the bomb drops, the future dies. "War produces casualties," says Clarke, "and casualties require medical attention. The devastation of a one-megaton blast in Halifax would be total. A proper medical response would be impossible, and the road to recovery would be blocked."

At an October 8 lecture in the Tupper Building, a small audience of doctors and medical students listened carefully as Clarke explained his reasoning. "In the first place," said Clarke, "the energy released in a nuclear explosion is unbelievably massive. A one-megaton device is just slightly less in maximum yield

than the total arsenal used by the allies against Germany during the second world war. In the second place, all of this energy is released in an incredibly short time all in one place."

These factors combine, according to Clarke, to effectively destroy all medical resources. In Halifax, this would accompany a 75 per cent general death rate. The destruction of hospitals, shelters, materials, personnel and doctors in rough proportion to the rest of society would make adequate care for the survivors impossible.

The extent of the injuries sustained by survivors would be phenomenal, the most common form being heat-related. As burns are the most difficult type of injury to treat even under the best conditions, the care of burn-patients would be pathetic and ineffective after a nuclear explosion, says Clarke.

The conditions of post-blast society would further hamper recovery procedures. Food and water


reserves would be contaminated. Encroaching fall-out and associated radiation sickness would limit the mobility of survivors. The accumulation of thousands of corpses would result in social disorganization and the spread of disease. Panic, fear, grief and sustained illness would unravel the last strands of communal feeling, preventing progress of any kind.

Dr. Clarke's picture is not one that offers much hope for our bomb-ridden world. As long as we have the arsenal we will always live under a nuclear umbrella. But his rationale may be the clearest ground. Like any good doctor, Clarke knows the value of preventative medicine. He believes the only way to recover from a nuclear war is not to have one.

According to Clarke, "Physicians are no strangers to incurable diseases, and faced with the termination of life on a huge scale, physicians should direct their aims to means of prevention."

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