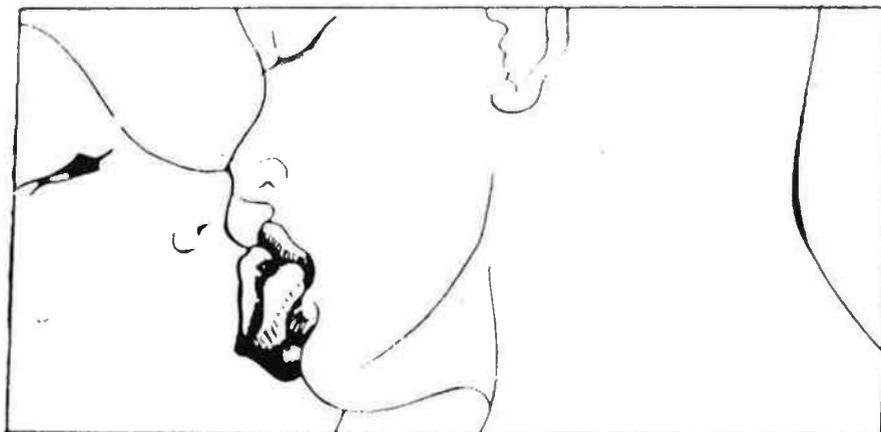


No. 46 August 1994

# Talkabout

The Newsletter of People Living With HIV/AIDS Inc NSW

◆ Where We Speak for Ourselves ◆



**Positive Dykes  
Just Do It**



# Meltdown Dance Party KATOOMBA

Civic Centre

## SUN OCT. 2

Celebrity  
Drag Show

ENTRY \$15 & \$5 con  
8.30PM - 2.30AM

D.J.  
Michael Flint

BLUE MOUNTAINS PLWHA\*  
041 877191 \*Phone Using 0415 number  
Tel: (047) 822110



The Aurora Program

## Matters of the Heart

THE AURORA PROGRAM brings gay men together to explore the issues and challenges that are central to our lives. It is a program run by gay men, for gay men.

THE FIRST PROGRAM - "MATTERS OF THE HEART" - will invite a small group to share their experience, their stories, in a friendly and confidential setting.

KEY MATTERS WILL INCLUDE...

### Accepting Myself

What makes me unique?  
Do I like who I am?

### Feeling Stuck

What blocks me from becoming  
the person I want to be?

### Intimacy

What stops me getting close?  
How can I learn to trust other men?  
Learning to be fully myself.

### Sexuality

How far do I want to come out?  
What does being gay mean to me?

Dates: 10 Saturdays, 3 September to 5 November, 1994  
Time: 1:00pm - 4:00pm  
Venue: Anaki House, 335 Crown Street, SURRY HILLS  
Cost: \$155.00 (GLCS Members) / \$185.00 (Non-GLCS Members)  
\$85.00 (Concession - Unemployed/Health benefits/Students)

Both HIV+ & HIV- men are welcome!

Facilitators of the Aurora Program: David Schwartz & Simon Jenkinson

Further Information: Phone Simon on (02) 332 2048

## MAN 2 MAN

### GAY MENS PROJECT

is conducting 3 workshops on  
health maintenance for  
HIV+ men and their friends

### POSITIVE HEALTH

sleep, drugs, feelings, food, choices,  
what do you need to know?

### POSITIVE SEX

sexuality, partners, disclosure, rights

### POSITIVE CULTURE

bars, films, friends, life, love, support, betrayal  
a panel of speakers discuss the world of positive and  
negative men in the sydney gay community

to book a place ring

206 2078

## AIDS Action

### HIV Positive Peer Worker

(30 hrs/week) ASO5 pro rata

The AIDS Action Council of the ACT is a community based health organisation providing education and support to the ACT community in all matters relating to HIV and AIDS.

We are currently seeking suitable applicants for the above position. The successful applicant will be responsible for developing, implementing and evaluating education and support workshops for people with HIV/AIDS. An understanding of issues affecting people with HIV/AIDS, and experience in or demonstrated ability to conduct education programs are essential. This position is a designated position for a person with HIV/AIDS.

The AIDS Action Council is an EEO employer and has an affirmative action employment policy in relation to people with HIV/AIDS. A duty statement and selection criteria for the position may be obtained by calling 257 2855 during business hours. Applications addressing the selection criteria should be addressed to the Recruitment Officer, GPO Box 229, Canberra ACT 2601. Closing date for applications: 5pm Friday 2 September 1994.

**position vacant**

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## **This Month's Cover**

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By Rini Kates. Positive dykes are speaking out against the isolation, the ignorance and the idiocy. In this issue we talk to six lesbians, positive and negative, on the HIV/AIDS frontline and, via Suin ni Chrochuir's work, place their efforts in historical context.

## Israeli PLWHAs battle ignorance

FOR THE FIRST TIME IN ISRAEL A group of HIV positive people has gone public.

The group, five gay men and one woman, appeared before the Knesset (parliament) as well as on television and radio.

The group also succeeded in having positive representatives elected onto the board of the Israel AIDS Task Force — the first time that people living with the virus had publicly declared their candidacy.

According to one of the PLWHAs, Sue Newman, "[Half] of all new cases of HIV are women, there is tremendous public ignorance on the ways one can be infected and the government is not helping because any form of education is aimed at risk-groups only. Well we [have] had enough. The battle is on."

— *The Body Positive*

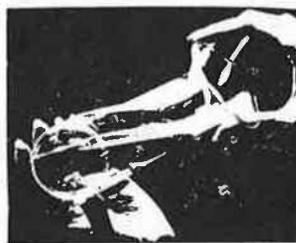
## "Kill your doctor"!

LONDON PROTEST GROUP GAYS Against Genocide have followed up their infamous anti-AZT protests (which sent two of their high-profile PWA members to jail) with posters. They name leading AIDS physicians who are prescribing AZT and say "kill your doctors before they kill you".

— *Time Out*

Already available in eighteen countries around the world, the female condom is due out in Australia later this year.

Shaped like a male condom, but much bigger, it is made of a thin, soft, loose-fitting polyurethane sheath that fits inside the vagina. An inner ring fits behind the pubic bone, like a diaphragm, and holds the sheath in place. An inch of the sheath and an outer ring hang outside the vagina. The condom has not been tested for its ability to block HIV, and tests have shown a large pregnancy rate (which researchers put down to improper use). Among other problems: it's expensive; gets easily twisted



## AIDS in Croatia

IN WAR-TORN CROATIA MANY PEOPLE "have turned to drug use to ease the pain they are experiencing" says Sanja Galkovich from the first Croatian AIDS organisation InfoAIDS. "The war has left many people with psychological nihilism including a sense of bleak future at best."

The Croatian Ministry of Health combats AIDS by deploying policemen to brutally arrest IV drug-users and gay men.

Galkovich says that there is an absence of safe sex information, "except some newspaper articles where certain minorities are blamed for the spread of AIDS". His group, a non-governmental organisation, is seeking assistance, particularly on potential funding channels. Contact:

INFOAIDS, NAD LIPOM, 14,  
41000 ZAGREB, CROATIA

## US AIDS 'Czar' resigns

AMERICAN PRESIDENT BILL CLINTON'S National AIDS Policy Coordinator, Kristine Gebbie, has resigned following a "mutual agreement" and calls by, amongst others, the National Association of People with AIDS (NAPWA) for her head.

Said NAPWA executive director William J. Freeman, "piecemeal solutions exist where comprehensive and decisive ac-

tion is required." He called on the President to provide "visionary leadership" and for the convening of a "dynamic and forceful" working group within the White House to implement a comprehensive action plan.

The administration has been the focus of much anger from PLWHAs despite increased budgetary allocations. Says information resource Project Inform, "After collecting big money in the campaign on the promise of important things to come in AIDS research, the administration has since spent an inordinate amount of time explaining why Clinton really didn't mean it when he called for a *Manhattan Project* on AIDS. At best, AIDS has provided an occasional photo-opportunity for a few people to pose with the president." (*Manhattan Project* refers to the World War II scientific and military effort to build the atomic bomb).

Project Inform suggested that Gebbie had been given "little if any authority to take action on anything."

The organisation says that uncertainty will mark the progress of research over the next few years and argued against returning to simple 'basic research', de-emphasizing therapy development and "changing direction with every shift in the breeze." Instead of complacency and "mistaken assumptions that our interests are being taken care of" they called for a renewal of "the aggressive spirit of AIDS activism which was so productive in the past."

— *PI Perspective/AIDS Weekly*

or pushed aside; it gurgles. But for many the advantages of "woman-control", the ability to use oil-based lube and that it can be inserted in advance, outweigh the problems.

Just announced is the plastic (male) condom, to be launched later this year. Made, again, of polyurethane, it has twice the strength and is thinner than rubbers. It doesn't cause allergies and is odourless

## Woof, woof!

BLUE MOUNTAINS PLWHA HAS gone pampered pooch crazy with a dog competition September 4 to raise money.

The show (which various PLWHA (NSW) staff, committee and volunteers were considering entering colleagues in at the time of going to press) will hand prizes to *Smallest Dog*, *Best Team*, *Best Dressed Dog* and more. Starts at 11am, Sunday Sept 4 and there's an entry fee of \$5 per class. "Bring a picnic lunch with you and have a fun day!"

Entries close September 1. Contact:

TONY WALKER, POBox 93,  
LEURA NSW 2780

## NAPWA/ACON on the move

AFTER SEVERAL MONTHS OF WORRYING uncertainty, ACON has found itself a glamorous — and thankfully larger — new location. The three-story building in Commonwealth St., Surry Hills comes with a ten-year lease grant from the NSW government as well as money towards the buildings refurbishment. ACON will begin its move in the spring.

The National Association of People Living With HIV/AIDS has moved to Victoria. Their new address is:

6 CLAREMONT ST., SOUTH  
YARRA, VIC 3141. PH:(03) 865  
6700. FAX: (03) 826 2700.

Newly elected as the organisations internal convenor is Andrew Morgan, nominated by PLWHA NSW. New Deputy Convenor is Xalid I. Abd-Ul-Wahid from the Northern Territory.

## Gras grants +

TWO OF THE THREE PROJECTS FUNDED under the Sydney Gay and Lesbian Mardi Gras' new *Development Funding Scheme* are HIV/AIDS related.

Artist Maree Azzopardi will

**HIV goes gloss!**  
**Two new glossy magazines for HIV positive people have been successfully launched in the USA.**  
**"Optimistic, upbeat and informative" is the take of some on PlusVoice and Poz. Others, such as PWAVoice, a sister magazine to Talkabout out of New York, have condemned them. A "proudly cynical exercise" which "demeans people everywhere who have struggled to think, to say, to write what it is to live — and in some cases to die — from AIDS,"**

says PWAVoice. "Poz is a magazine ostensibly for people with AIDS that manages to regard the sick either not at all or with nearly palpable fear. . . Its pages brim with delicate photographs of smiling, apparently healthy people, most of them male, virtually all of them white."

Says Poz editor Sean Strub, his magazine is intended as a cross between *Vanity Fair*, *Entertainment Weekly* and the *American Journal of Medicine*. The aim is to "provoke, inform and entertain in the vast arena that is AIDS." PlusVoice editor Brett Grodeck hopes to provide "encouragement, honesty and a little fun."

Brim full of full-page ads for pharmaceuticals, viatication companies and fashion houses though they are, both magazines are attempting to appeal to a "niche market" (as publishing parlance would describe HIV positive people) that is incredibly diverse. Of course they are bound to offend someone. Yet to many they do constitute an advance in the realm of information provision to HIV positive people, with lengthy high profile interviews (such as a no-holds-barred one in Poz with HIV positive ex-White House staffer Bob Hattoy) alongside, often tucked away in the back, well-presented treatments stories. In Poz, Fred Bingham, a horticulturist and long-term survivor, talks of how his understanding of herbs and experiments with organic materials have led to him being technically "in remission".

Neither magazine is currently available in Australia, however the ACON Library should have them soon. For subscriptions info contact:

PLUSVOICE, 29 S. LA SALLE ST., SUITE 1150, CHICAGO, IL 60603 USA

POZ, 349 WEST 12TH ST., NEW YORK, NY 10014 USA

carry out a three month artist in residence program at St Vincents with the resulting exhibition, *The Crisis Within*, focusing on PLWHAs from non-English speaking backgrounds.

*Elegies of Light* will be Choreographer Norman Hall's dance comment on HIV/AIDS, set to composer Gorecki's *Symphony of Sorrowful Songs*.

Mardi Gras' Campion Decent describes the HIV/AIDS focus as,

"a reflection of the part it plays in our lives" and hence its reflection in our culture. "We would expect to receive such applications and our #1 criteria was picking the best work," he added, "There were a number of other HIV/AIDS related proposals. Azzopardi's scheme was "very appealing. Cross-cultural, cross-gender, cross a number of different [art] forms. And she'd done the leg-work." *Symphony of Sorrowful*



*Songs*, a "beautiful piece of music", has become somewhat of an AIDS anthem in the classical world, says Decent. Hall has done similar work before.

## OPEN FORUM

PLWHA IS RUNNING AN OPEN forum on Advance Directives on Saturday 10 September. Advance Directives (also known as treatment directives or as living wills) are not legally binding in NSW. However the AFAO Legal Project has developed an easy to use Advance Directive form which can assist in ensuring that your wishes in relation to treatment issues will be respected especially if you are no longer physically or mentally competent to make such decisions.

We have enlisted the services of a solicitor and a local GP to provide some professional input. To make sure it does not remain all too theoretical, we've come up with some case scenarios which illustrate some of the treatment and social dilemmas which can occur. We'll discuss these in small groups.

It's heavy stuff but one which has to be considered at some point.

We want to make it social as well — drinks and nibblies will be provided. So come along and meet some other members and friends.

— Chris Connole

(See the advertisement on page 28 for further details).

## +ve Retreats

THANKS TO A VERY GENEROUS donation to the HIV Support Project, four *+ve Retreats* will be held in the next 12 months.

The first one will be on the weekend of the 14 - 16 October. Watch for a more comprehensive article in this mag next month.

## Conference time

THE NATIONAL ASSOCIATION OF People with AIDS (NAPWA) in conjunction with the Australian Federation of AIDS Organizations (AFAO) have announced and are currently planning and promoting the 5<sup>th</sup> National conference of people with HIV/AIDS.

This year's conference is to be held in Sydney over three days, 21-23 October 1994. The venue for this, the fifth conference of its type, is the Oxford Koala Hotel

conveniently located in Oxford Street, Darlinghurst. As with the conference held in 1992 this year's will be specifically aimed at the information and education needs of people with HIV infection or AIDS. The steering committee welcomes submission for presentations and/or workshops from any person in the AIDS field.

Registrations for attendance at the conference is intended for people with HIV.

The conference steering committee which is made up of representatives of the state's and territories PLWHA groups and a representative from AFAO, are aiming to provide a broad range of forums to facilitate learning, participation, networking, social events and some home grown fun, dancing and maybe a for the lucky a chance to cruise and fuck.

In the more formal structures, areas to be covered will include a primary focus on treatments with attention being paid to both conventional and complementary therapies. Cultural, visual arts and literary aspects of how we as people with HIV/AIDS are portrayed. Legal issues relevant to our lives such as legal protection

# Talkabout

*Talkabout* is published every month by People Living With HIV/AIDS Inc. (NSW). All views expressed are the opinions of the respective authors and not necessarily those of PLWHA, its management or members.

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*Talkabout* welcomes unsolicited contributions. However, we cannot accept responsibility for manuscripts and photographs or for material lost or damaged in the post. Letters submitted to *Talkabout* or its editorial coordinator are assumed to be for publication in whole or in part unless specified otherwise.

Send contributions to: PO Box 831 Darlinghurst, NSW 2010.

**DEADLINE FOR THE NEXT ISSUE  
AUGUST 18**

If your venue/organisation is interested in distributing *Talkabout*, contact the editorial coordinator. Call the editorial coordinator on 361 6750 for the date and time of the next Newsletter Working Group meeting.

**ISSN 1034 0866**

## B r i e f s

● The AIDS Rights Coalition has folded. All Act-Up files are now at the State Library. Anyone with any of the missing files can contact Alan Tasker at the library on 233 1397 and he will collect them, no questions asked.

● Out of Bathurst is a new rural newsletter for the gay community. It's called *Jessie's Rag* and you can get more information from Steve or Kelly on (063) 322 486. Another rural mag you mightn't have discovered is *Taboo*. They're at Po Box 551, Albury 2641.

● Auckland University researchers have 'discovered' that unemployment "may help compromise the immune system."

● The *Speakeasy* project at ACON is currently developing 'Crusing Cards' as "a fun way of meeting people and providing a language about safe sex negotiation". They'll be adorned with sexy photos of 'real' people. If you think you fit this category, and fancy some modelling, then give them a call on 206 2090.

● They'll be two *Art & AIDS* exhibitions in Canberra in November, one at the National Gallery — and one at the Institute of Arts. John Turner, co-curator of the latter show, says they're looking "for political content to the work" from a cross-section of people, not just gay men. The show looks like touring to Tasmania plus Sydney around Mardi Gras. If you're an artist and interested you'll need to submit a brief CV, slides and/or a proposal before August 31 to: Dr Jill Bennett, Institute of the Arts, ANU, Canberra, ACT 0200. Or ring her on (06) 249 5840.

● A biography and a film about the life of Kelvin Coe, the Australian dancer who died of AIDS last year, are currently being produced.

● The next HIV Support Project barbecue will be held on Sunday, August 14. Call Les on 206 2014 for more details.



● The book *Dying at Home; a Manual for People with AIDS who Wish to Die at Home* is now available from the PLWHA office. Author Phil Nott says he felt "compelled" to write of his experiences caring for one of his partner's close friends. The manual was launched by Dr. Carmen Lawrence.

of relationships, powers of attorney, wills, discrimination and avenues for accessing legal assistance will be explored. Support, welfare and counselling styles will also feature.

Low income earners wishing to attend the conference should not be immediately daunted by the cost of travel and accommodation. Financial assistance for those on DSS or low incomes as a result of their HIV infection is being provided through fundraising initiatives of individual state and territory PLWHA organisations. As subsidy numbers will be limited by availability of funds it would be advisable to contact PLWHA in your region as soon as possible. A registration fee for delegates who are working will help to offset the costs, and a concession rate will be available for part-time employed people. There will be no charge for people on social security or no income.

The conference will kick off on the evening of Friday 21<sup>st</sup> with a gala soiree at the Exchange Hotel. Entertainment, drinks, welcoming address and an opportunity to register for the next two days of conferencing. Registration for the conference will be available at the Oxford Koala from around midday.

The HIV Support Project from the AIDS Council of NSW be will holding one of their notoriously popular *Antibody* parties on the Sunday evening to cap off the weekends activities.

The steering committee are fortunate to have enlisted the services of Russell Westacott 2 days a week at the moment, fulltime as the conference dates approach. Russell is working from the Sydney AFAO offices and can be reached on (02) 231 2111.

— Andrew Morgan



**Christie McNicholl of TWA (Trannies With Attitude) looking fabulous in a Maudie wig. TWA were one of many performers at Plastic On Parade (see Talkabout July) at The Flinders, the inaugural PLASTIC event. \$500 was raised for PLWHA.**

## \$235,000 dispensed

IN ITS LATEST ROUND OF GRANTS the AIDS Trust of Australia has handed out nearly \$235,000 to a variety of research, education and care projects.

Two Sydney projects now better off are the lunches at the Exchange Hotel, who received \$10,000, and ACON for their buyers club.

Says PLWHA Convenor Alan Brotherton, "there's some good stuff in there but there's some pretty big gaps." He cited the knock-back for (PLWHA supported) *With Complements*, when research suggests that nearly all HIV positive people will use complementary therapies at some stage. Others projects seem, "distinctly less pressing" he says, in particular "questionable" prisons research and a book on the Quilt. As to another PLWHA rejection, "we're getting used to it. It's disappointing."

# PLWHA News

THIS MONTH'S BIG NEWS IS NO NEWS, or at least it is if you're one of the almost 100% of people with HIV or AIDS seeking regular information on complementary therapies. As you'll read elsewhere, our submission for funding of *With Complements* failed to scrape across the AIDS Trust hurdles and was turned down for funding, along with our two other applications to them. A lot of valuable projects were funded, however, and the basic problem is that there just isn't enough to go around. But I question whether a book on the Quilt or a project to study behaviour change in NSW prisons (difficult if you can't get condoms or fits) is of more use to us than a reliable complementary therapies newsletter. Luckily, it seems ACON has saved the day and secured funding to keep *With Complements* going, but it's been a close thing. Stay tuned.

Good news on the funding front is that we've been granted \$4000 out of ACON's *Hand In Hand* party disbursements. Half of the money will be used to fund our ever increasing Mardi Gras involvements (viewing rooms, time out rooms, ticket schemes) and the other half will go towards subsidising postage and distribution costs of *Talkabout* outside Sydney (the costs are higher than the subscription rate at the moment). This comes at a good time as the last 'Rural' Issue has been very well received. *Talkabout* is already widely distributed (around 40% of subscribers live outside Sydney) and hopefully the last issue has made it clear that living with HIV and AIDS is not just an inner city Sydney experience.

A few people have asked what PLWH/A's policy on meeting the needs of people with HIV outside Sydney is. We've recognised that a lot of people with HIV move out of the city for a lot of good reasons,

but that once out there, getting services and support can be anything from easy to a nightmare. As we only have three staff, not much money and 11,000 people across NSW to represent, this makes the task of ensuring services are available or solving problems everywhere in this wide (and increasingly brown) state pretty daunting. Given our limited resources, we feel the best way to meet these needs is to support local groups in solving problems themselves by offering what training, support and involvement we can and acting as a link with decision makers in Sydney. This approach has proven successful in the past with problems in Coffs Harbour and the Hunter region and we're working out the best and fairest way to continue to do this. We're also looking at establishing a toll free phone line so accessing our office isn't a great cost to people out of Sydney. For now, we're happy to ring back if you're calling from afar. If things aren't what they should be, let us know and we'll do what we can.

The Positive Speakers' Bureau training is underway and a starting date will be announced in the next *Talkabout*. Nine new volunteers were trained for the Nutrition Supplement Service recently.

If your diary's open on September right now (and that's a hint) then you should note the following dates. The PLWH/A Annual general Meeting will be held on Tuesday 20th September, starting at 6.30pm. This is important. Crucial, even, as it involves the current committee reporting back on the last eighteen months, the election of a new committee and (hopefully) the asking of clever, insightful and, yes, even difficult questions of the outgoing committee.

This already sizzling event may well pale into a soupy insignificance,

however, beside the launch of the Positive Speakers' Bureau, to be held immediately afterwards. Claude is currently seeking a suitably glamorous and affordable (i.e. cheap?) location for the gala night. More details soon.

Also in September, there will be an open forum on advance directives and living wills on Saturday 10 September at the PLWH/A office. This will be presented by PLWH/A committee members, a lawyer from the HIV/AIDS Legal Centre at ACON and a GP, and will be a practical 'how to' session as well as a discussion of the issues and implications of this difficult but important process. We'll also be looking for some ideas and input on what people's needs in this area are, and what policies we could adopt to seeing these met.

At an unspecified date (keep your eyes on this journal) there'll be another forum and information night on the latest crop of promising new treatments and how to get them here. There do seem to have been some genuine advances on the treatment front, but we may need to prod a few slumbering bureaucracies to get a lot of these new treatments into our medicine cabinets in a reasonable time.

The second national HIV/AIDS Strategy, which expires in 1995, is already under review by the Commonwealth. This has major implications for people with HIV and AIDS, (especially as one of the main audiences for the current review is the Department of Finance). Although this may seem an intensely bureaucratic and distant process, the outcomes will affect all our lives. AFAO, ACON and NAPWA are, fortunately, all involved in the process. PLWH/A NSW will have some input into the process through NAPWA.

Meanwhile, back at the office. . .

# Talkback



## In search of Mahamudra

I was diagnosed hiv+ in '86 with no conversion illness, so I suspect it was a few years earlier.

Started my formal spiritual journey in '84, becoming intensely involved in a personal development programme, addressing personal power, inner child, sexuality, creative cause, meditation, and healing childhood trauma. This opened a Pandora's Box of emotional exploration and intellectual possibility.

From then on, I did a lot of workshops. "Ah yes, this feels right for me!" seemed to be the catch cry of my life.

The next big step was long-term one-to-one counselling focused on sexuality. This combined elements of gestalt and psychodrama to create a potent insight to my inner workings.

Then I did a nutrition programme/cleansing which utilised both muscle kinesiology and a notion which describes people in

Greg Allen is filling in for Claude as a temporary administrative assistant, and is doing a particularly suave job of it.

Andrew Morgan, an ex committee member and self professed HIV dinosaur (is that Virusaurus Rex?) has been nominated as Internal Convenor of NAPWA, giving us two positions on the NAPWA committee. Andrew is also our representative on the Positive Living Conference steering committee.

— Alan Brotherton

relation to the four elements of Earth, Fire, Water, and Air.

I also did the 10 day Vipassana meditation course a few times — and continue to practise a variety of forms of meditation at my dedicated puja table.

I read many overseas PLWHA magazines, and follow the teachings of Ram Dass, Stephen Levine, Carolyn Myss, Deepak Chopra, and other luminaries of our time.

Recently, I have left my job, and saw my T-cells drop sufficiently to justify going on a pension. I therefore embarked on a range of treatments to address this: naturopathy, massage, moxa, acupuncture and osteopathy. At this stage, three months down the track, they have not affected my T-cell count, but I'm still hopeful — though a little more despondent. Thus far I have avoided AZT and Bactrim, but they remain options.

I find it hard to get clear as to whether I am planning for living or dying. Certainly my focus is about "defying death", which seems very different from living (dear I say, with joy and vitality!).

My intention in writing this expose is to connect with like-minded others (hiv+ or not) who are interested in sharing aspects of our journeys in an organic supportive kind-of-a-way. (Don't ask me what I mean by that!).

If you can relate to any of this and feel like making contact, then write to me. I look forward to hearing from you.

Please address all responses to:  
THE FLOWING RIVER,  
C/- TALKABOUT

— Kim Gotlieb

## Not so saintly

Contrary to any impression given by the word itself, viatication is not some form of spiritual elevation, offered by the Sisters of Perpetual Indulgence or any other religious order.

Readers may be forgiven for being confused by a typo that slipped through on the title of my article in *Talkabout* July 1994, which called the process "Viatification". The motives for those who offer viatication are financial, not spiritual, namely to buy the life insurance policies of those with about a year's life expectancy. They pay the policyholder perhaps 70% of the death benefit and collect the whole death benefit after the former policyholder dies.

— Geoffrey Bloom

*Editors response: Apologies for the typo — though, don't you think, viatification sounds better!?*

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## Carbon Copy

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To: Tony Keenan, President AFAO [Australian Federation of AIDS Organisations]:

The 10th annual International Conference on AIDS is soon to be held in Japan. I am aware that AFAO is sending representatives to this conference. As a HIV positive person, I am interested to know if AFAO will be reporting on a number of issues and if this reporting will be made public through the *HIV Herald* or *The National AIDS Bulletin*, valuable sources of information for the HIV/AIDS community.

The most important issue for many people, both lay and health care professionals, is the issue of treatments and medical research. Other issues of interest include; social/behavioural science, the biology of HIV and presentations from the HIV community. It is important for the HIV/AIDS community to be assured that the information from the conference flows into the public domain and that those reporting on the conference are qualified to assess and comment on the information presented. A lot of the information that comes from AFAO about treatments etc. is accessible by a large number of people and having recently become a user of electronic bulletin boards, I have seen a great deal of AFAO articles being distributed to the wider community via this medium. This is to be congratulated, and I hope that AFAO continues to maintain the high standard of information and reporting on issues pertinent to the HIV/AIDS community, such as the conference in Japan.

— Paul Chippendale

## Grimes'n'Ariss

I am writing as Chair of the Australian National Council on AIDS (ANCA) to pass on, at the request of members, Council's deep regret at the recent passing away of Mr Robert Ariss.

Robert was a community representative on ANCA from August 1990 to May 1992. He was a respected and valued member of ANCA who contributed much in progressing the work to combat the spread of HIV/AIDS in Australia. One of his major contributions was as ANCA's representative on the HIV/AIDS related Discrimination Education Reference Group which resulted in the Government's HIV Anti-Discrimination campaign. The campaign was initially run successfully in January 1993, and is presently being re-run in the media. He was also associated

with the *Battle of the Bands* in September 1991 which helped focus community awareness on youth AIDS education.

It would be appreciated if you could convey ANCA's sentiments to your readers of *Talkabout*.

— Don Grimes

## John Gardiner — Vale

John Gardiner was a comrade and a mate. He is sorely missed.

A quick witted, very subtly bitchy, astute and frank man, he died several weeks ago after fighting HIV for some time. He was a pivotal member of the PLWH/A team, who was involved with the organisation during a difficult time of its growth and development. John was a regional official within the AIDS bureaucracy of the Department of Health, Area Health Services. His role and his expertise allowed PLWH/A an extraordinary access to people across the AIDS industry, which at various stages was critical to continued funding.

Many people in the community think that AIDS funding grows on trees and the Department of Health has bags of gold for the asking; John was one of those patient and tactful negotiators who knew only too well the limitations of public funding, and the extent of community needs; in spite of his own declining circumstances he lucidly and rationally cajoled, lobbied and squeezed money out of a reluctant bureaucracy. In doing this he was part of a team, but it is only fair to record that his contribution was unique; he gave his time, his energy and his love to the HIV affected community. In this he had the admiration of the volunteers, the committee and hundreds of people throughout the AIDS bureaucracy.

And he was a good mate. In the midst of his own problems he took an active and loving interest in my life, organising chemother-

apy for me at a suburban hospital so that I could remain at work. He organised this from his own hospital bed at Prince Henry, having already lost sight in one eye. God I'll miss you.

— Wayne Holt

We welcome your letters. Please include your name and Ph. no. or address and send them to:

 **Talkabout, PO Box 831  
Darlinghurst 2010**

## Requests

**COOGEE FLAT SWAP.** Department of Housing. Very bright and sunny large one bedroom. 3rd floor. Five minutes from beach and public transport. I want to swap with someone who lives in Darlinghurst/Surry Hills/Woolloomooloo. If your unit is bright and sunny please call Robert on 664 2895. P.S. You can grow anything!

**DATABASE.** HIV positive people who have any experience with computer data bases or computer bulletin boards — that is, setting them up and/or using them. A working group is being set up to push for the establishment of a positive, user friendly, HIV/AIDS data base for conventional and complimentary treatments and therapies. Also sought are people with *Internet* experience or in accessing overseas HIV/AIDS data bases and bulletin boards. Contact: Peter Hornby on 206 2011.

### Art & AIDS

October's *Talkabout* special will be on Art

If you would like to contribute, please contact Paul Canning on

**3 6 1 6 7 5 0**

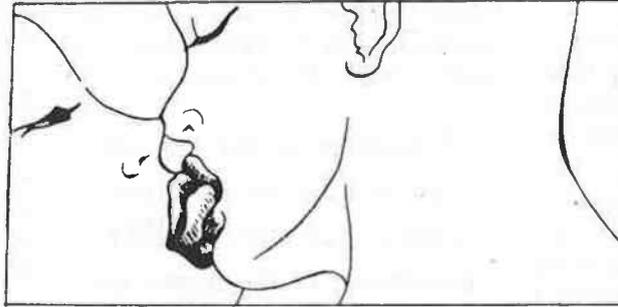
# Lesbians and HIV/AIDS

WHEN THE "GAY PLAGUE" headlines first appeared, there were crass jokes in the mostly lesbian household I lived in that with any luck, it might wipe all men from the face of the planet. As it became more obvious how serious the disease was, the jokes disappeared,

at least from my circle of acquaintance. Everyone just felt relieved that they didn't have to worry about condoms — another bonus of the lesbian lifestyle.

A few years later, I shared another house with a woman who was grieving for a lesbian friend who had died of AIDS — never officially diagnosed, because in the early 80s, women didn't get AIDS of course

By the time I started working on *Talkabout*, in 1990, I knew one lesbian whose closest gay friend was HIV positive, and two who had HIV positive brothers. No-one needed to tell



me that HIV affected lesbians. I didn't know any straight people who were affected by HIV.

Since then, dams have appeared on the lesbian scene, (becoming gradually thinner and less dental but continuing to be controversial), lesbians have organised benefits for Positive Women, and more than one community forum and publication has addressed the wide ranging and sometimes formidable topic of lesbians and HIV.

Is it because so few dykes actually have HIV or AIDS, and transmission rates are so low compared to other groups, that many people (including lesbians)

find it hard to take the subject very seriously? But trying to keep lesbians' and HIV upfront as an issue has remained important, just because HIV hasn't gone away. It clearly continues to be an issue for lesbians on an individual basis in their day to day lives,

whether as positive women, as friends, lovers and relatives of people who have HIV/AIDS, or simply as women who need good information on how to keep safe.

It's not so clear whether most lesbians have taken it on as an issue to be concerned about, or at least keep informed about. For this issue of *Talkabout*, I spoke to a number of lesbians, both HIV positive and negative, about what changes they had seen in their community's attitudes over the past eleven years since the first AIDS case was diagnosed in Australia.

— Jill Sergeant

## RIPPLES IN THE POND

THIS IS A VERY PARTIAL AND PERSONAL remembering of the events forming the changing face of lesbians and HIV/AIDS over the ten years since the mid eighties. It's a Sydney based view of one dyke HIV activist — me, **Suin ni Chrochuir**.

In the early eighties I lived in Britain. I remember the reports of a strange unshakeable illness being linked to fast lane and clubbing style of some ghetto gay men. I worried about my friend, Nigel — I didn't worry about myself. It was still being called GRID, Gay Related Immune Deficiency, I still worried about Nigel. I took Ter-

rence Higgins Trust information into the men's prison where I worked as a social worker, did I read it for myself? Late '85 I emigrated to Australia. Completely unrelated, also in '85, four lesbians are diagnosed HIV Positive, four of the first seven women diagnosed Positive in Australia.

Dredging through my memory, boxes of paper, the Women & AIDS Project filing cabinets at ACON, I'm struck by how much there seems to be — events, groups, workshops, panels, interviews and articles in paper, on radio and television. We have always been here, lesbians liv-

ing in the epidemic, Positive and Negative. We have always worked to find our meanings, looking for information that constantly seemed to elude us, and when we couldn't make sense of what we found, we learnt to create our own. We have refused to be invisible.

Apologies in advance for all the people and events I've missed out. It's just what I remember from what I know. Also note that although women and HIV/AIDS rememberings aren't always lesbian specific, all lesbians are women, so we've always been right in it all.

(Story continues overleaf)

**KATH VALLENTINE**

*What sort of changes have you seen in the lesbian communities attitudes to HIV over the last decade or so?*

I find community a difficult thing to talk about because it is so diverse and I don't want to set myself up as speaking for people.

I didn't really have a sense of community for quite a long time. Since mixing with more community oriented lesbians I've found it, first of all, very oppressive. I was meeting a wall where women didn't understand that lesbians actually got HIV. Previously I was one of those women too, because that's what I was told — that it was a no risk group.

Now, there's been a sort of a shift from feeling totally invisible in the lesbian community, and everywhere, as a dyke that's [HIV] positive. I have got contact with women in the service area that are lesbian, but it's only the last year or so that I can get some of my needs met within the lesbian community. Certainly not as much as gay men get their needs met within their community. In the HIV/AIDS service areas, I found my questions were difficult for people to answer because of that invisibility.

I don't feel so much now that people are looking at me like, "there's that dyke that's got AIDS". Maybe that's because I've changed the sorts of lesbians that I now mix

with. I've found a lot more understanding than I initially thought there was.

*You're public about being HIV positive within your own community, aren't you?*

I feel in a way I was virtually forced to come out about HIV because it became so uncomfortable to be so invisible. But it was also some-

***"I feel in a way I was virtually forced to come out about HIV because it became so uncomfortable to be so invisible"***

thing I had to do for me. It was uncomfortable because I never used to see much written about positive lesbians, I knew about three others, and with some of them I would maintain contact because we were isolated, and I still do. The whole thing was pretty uncomfortable.

It's not just lesbians changing, it's research into lesbian transmission and contact that changed. Being told that you were really safe and then researchers found out that you weren't. And not even knowing

Kath, Susan, Gabe and Kym interviewed by Jill Sergeant.

where you fitted anyway — because you weren't seen — was incredibly confusing.

*Did you come out because you felt it was important for other dykes to know about that?*

Yeah, once I'd started to get pissed off that dykes didn't recognise the fact that there *were* positive dykes and were unaware of a need for safe sex. Unaware because at the time there wasn't much information around. Since then there are safe sex paks around, although not as much as there are condoms.

*What kind of a response did you get from other women, having done that?*

Well, I got quite a supportive response, but the women that I'd come out to had actually come to a Positive Women's Benefit. So the sorts of lesbians there were those who had probably educated themselves as far as they could. In that sense there was a certain amount of safety.

I mix with a lot of lesbians who have a fairly high level of education about HIV in comparison with the rest of the community, but I've mixed with women outside that — really intelligent women too — who have absolutely no concept of HIV and AIDS. That's surprised me.

I find myself quite a lot of the time, on a personal level, playing the role of community educator. Some-

**LATE '86**

☞ There's a dyke on the front desk at ACON, the only one — great to see your warm smile, Jules. So I began a long association with the AIDS Council of NSW...

**EARLY '87**

☞ Grim Reaper. Phone counselling at ACON, we find no one knows what to say to lesbians. Lesbians want to speak to lesbians. They don't want to be fobbed off. ☞ Lesbians and AIDS Working Group meets regularly at ACON. We talk about writing a pamphlet. We don't.

**LATE '87**

☞ An American and Australian couple of dykes based in Melbourne reproduce the San Francisco Women and AIDS Network poster with gorgeous Tee Corinne graphic, *Lesbians & AIDS: What's the connection*

includes risk assessment and safe sex risk behaviours categories. They get these posters out personally. I've only ever seen one.

☞ *Spare Rib* (UK) *AIDS is a Feminist Issue*. ☞ *Square Peg* (UK) *Lesbians & AIDS: The Neglected Issue*. ☞ *On Our Backs* (US) *Let's Go Safe*, very clear, matter of fact guide for SM dykes to sexual safety including HIV. ☞ Californian based Lesbian AIDS Project carries out street based interview research with injecting lesbians. Makes important points re identity

and behaviour, lesbians and HIV, injecting and sex risks between us, and knowledge.

☞ Patton and Kelly's US booklet *Making It: a woman's guide to sex in the Age of AIDS*. Great cartoons from Alison Bechdel. Much photocopied. Includes lesbians.

**'88**

☞ Sydney Lesbian Line hosts Lesbians & AIDS talk and discussion at their coffee shop night. ☞ Lesbian Network runs a letter *Lesbians, AIDS & Denial*, on why we're involved and lists contacts. ☞ Stockholm, International AIDS Conference. CDC report seven cases of "probable woman to woman transmission". Positive lesbians locally still being told by clinicians that their lesbian sex carries no risk. ☞ ACON Women & AIDS Working Group starts meeting. We march each



FROM SQUARE PEG



times I just question whether I've got enough information to be an educator. I see myself as relatively educated about safe sex practices and the virus, primarily as it affects me, but I find it really hard to get information about lesbians and HIV. I don't necessarily want to be one of the few sources for dykes to find out about HIV, that's quite a big venture.

Obviously I like, to choose what I do with my time, and there's a political commitment about educating about HIV, but if you're going to be practical, it's not always possible.

*Are many other lesbians taking responsibility for HIV education?*

I have come across women who are prepared to learn and be educated and will actually go and do that off their own bat, and that's terrific, because it takes the pressure off me. Then there's other women who are drawn to people with HIV because of the sensational factor. That's hard at first. It's one of the things you get used to. To be a sort of "thing".

There's very few publications that women can refer to. It makes it hard. And when you say something, because it is a process of word of mouth, you don't know how that's going to change as it goes along. Is that information going to be as accurate as it was at the source?

Just because of the difficulty of education, doesn't mean that it's not

happening. I know there are a lot of lesbians who are involved and concerned about the epidemic in general.

[However] many lesbians feel they have to think about a lot more besides [the] one issue. A lot of the things we go to are fund-raisers. It's working and educating in with socialising half the time. It'd be good to do something different — just for a good time.

***"I don't think that the acceptance of safe sex is really common among lesbians"***

SUSAN

*What sort of changes have you seen in lesbians' attitudes to HIV over the last ten years or so?*

There is much more of an awareness of HIV among some lesbians. Safe sex has become a part of the lesbian movement. That's what I was told, it's much more fashionable now. Fifteen or so years ago practices like S&M were an absolute no no, now they are more acceptable. With the advent of AIDS, that section of the lesbian community, [who are] more liberal I suppose, has taken on safe sex at sauna parties and so on. So a certain section of the community feels quite confident about it. On the other hand, many

women still don't feel that AIDS is a lesbian issue in any way whatsoever.

It's a diverse community, like any other community, but I don't think that the acceptance of safe sex is really common among lesbians. The community is very much aware of HIV, but not in terms of how it might relate to them personally.

*Have lesbians taken on the issue of positive lesbians?*

I don't think so. Lesbians still think "we don't get HIV, the only lesbians who get HIV are drug users". There are lesbians who were infected through heterosexual intercourse, but [the lesbian community] turns a blind eye to it. Bisexuality in any form is really not acceptable, although that's probably changing with the idea of "Queer".

I'd say there are very few lesbians who know of lesbians — or other women — who are infected. I've heard of women saying, "there's no lesbians infected in this city, are there?" When you think of the statistics for this state, there are bound to be a number of lesbians. [That attitude is] fairly naive.

Positive lesbians have no visibility. There's no open discussion of the issues that I'm aware of.

There are often lesbians working in the support services that positive women access, and they are active in fund-raising for positive women, but they don't relate that back to

year in Mardi Gras parade, International

Women's Day (IWD) and Reclaim the Night marches with our banner, dishing out literature, latex and lube.



LATE '80s

☿☿ Books like Pat Califia's *Macho Sluts* and Joanne Loulan's *Lesbian Passion* include safe sex and HIV information as a matter of course. Range from 'this is safe sex — DO IT' to 'how to make a risk assessment based on past histories'. ☿☿ Women/Lesbians and HIV/AIDS interviews on 2SER and SKID ROW women and lesbian shows. Tend to try to cover everything, rarely able to explore lesbian specific concerns. ☿☿ Sydney ACT UP forms. Of course lesbians are ac-

tive in ACT UP.

LATE '89 - EARLY '89

☿☿ Commonwealth Health run silhouette TV ads where people with AIDS (PWAs) anonymously talk to camera about how they become HIV Positive. A lesbian filmed identifies as a needle user, not as a lesbian.

FROM '88/'89 ON . . .

☿☿ Dykes and friends lovingly hand pack various safe sex packs for lesbians from ultra cheap, one dam stapled in, info sheet of the Sapph Sex Pack, to the sophistication of Melbourne dykes in the Lesbian Latex Liberation Front with packs of photos, gloves, lube, dams in gor-



geous little zip lock baggie. '89

☿☿ *Gay Community News (US) Lesbians & AIDS: What are the risks?* Excellent example of doublespeak about when 'safe' isn't: "Many AIDS educators conclude that going down on a woman is not generally high risk behaviour. It is clearly risky if the woman you go down on is HIV Positive". Another excellent example of the 'negative assumption' — the 'you' is never Positive herself. ☿☿ *Off Our Backs (US) New Data on Lesbians & AIDS.* ☿☿ *Gay Community News (US)* has personal story of HIV Positive lesbian. ☿☿ *Sapph Sex* cards and info pack including dams, produced and distribute by dykes via ACON. *Sapph Sex* workshop run by 4 dykes, attended by over 20 lesbians working with women/lesbians in

+ WOMEN AT IWD

their community. They just see it as women supporting other women.

It can be difficult for lesbians who are positive to access the services, just because you're always bumping into other lesbians. There are services or events I don't take part in, just because there are heaps of dykes around. It's weird really, because I'm sure those lesbians who are involved would be supportive and so on, but when accessing support services it's nice to meet a total stranger — someone who's not part of my social circle. It can be threatening to meet people you know, it's like continually coming out.

*Is lesbian involvement in services a very recent thing?*

No. I've been using the services for three years and I've been very aware of it. It's been going on for a lot longer than that. Traditionally lesbians, except for separatists of course, have had friendships with gay men. When the men become sick, it's lesbians who will care for them — as it's always women who care for people. There's a large number of lesbians caring for gay men. 50% of the volunteer carers at the AIDS Council here are women, and a surprising number of them are lesbians. I know this sounds harsh, but there are other things they could be putting their energy into that would benefit other women.

*Where do you get most of your*

*support from?*

I get support from other positive lesbians and from a few lesbian friends who are very supportive, so my main support does come from lesbians. [But] I don't feel that I do have much support. I suppose that's a fairly common situation when you're positive.

***“To ask a woman to use a dam or glove is a really different kettle of fish to asking a man to use a condom”***

On a more personal level. I've been celibate for about three years. Because I was diagnosed when I wasn't in a relationship, and before that I'd been with a man and before that safe sex really wasn't an issue for lesbians, I've never practised safe sex with a woman. I don't know how I'd ever negotiate it, because there's such ignorance around it in the community. To ask a woman to use a dam or glove is a really different kettle of fish to asking a man to use a condom, because it's not a common practice. If someone else initiated it, that would be great, but for me to introduce it would be very frightening, very scary. So I just don't have sex, and that's a shame.

**GABE**

*You're with CSN now — how long have you been involved with HIV?*

As a carer I've been involved over three years. Personally, it's been since 1988. There were two ways I became involved. First, I had an adolescent daughter, and initially I started reading about it in terms of worrying about what she was doing. At the same time I got phoned up about a friend who was in hospital with AIDS. He died surrounded by a lot of ignorance in the hospital. That profoundly affected me, being with him when he died and dealing with the doctors' prejudice. I felt that nobody should have to go through this. I think that's when I decided that I would do something. It was a year later that I became a carer. For me it was personal but it was also, as a feminist; the personal is political, the political is personal.

*How's your involvement with HIV been received by other lesbians?*

Mostly quite good. The separatist types say, “what are you doing, getting involved with that?” But they would be the minority. I believe that AIDS is part of my community. Whether it's lesbian or it's gay, it's my community.

Those attitudes have changed because it's very hard — especially in

health, welfare,

women's services, who self selected by phoning up through an advert. Who says lesbians don't want to know about HIV/AIDS? Increased lesbian phone calls to ACON. A small attempt to increase access but still no Womens Project, til . . .

**LATE '89**

☞ Pilot Women & AIDS Project worker half time for six months. Pam Blacker is the lucky worker! ☞ Positive Women Syd-

**SAPPH SEX**

WHAT IS IT?  
ARE DYKES DOING IT?

WANNA KNOW?

RING: (02) 211 0499  
AIDS COUNCIL OF NSW

INVISIBLE LESBIANS



ney starts meeting, facilitated to start by non peer workers. Kathleen Casey of Albion St. Centre and ACON's Pam Blacker.

☞ Lenny St Luce appearing at Belvoir St Theatre gives first Sydney benefit for Positive Women, organised by ACON Women & AIDS Project.

☞ Sydney AIDS Candlelight Vigil includes lesbian speaking about

women and AIDS internationally and locally. ☞ AIDS: The Women eds Reider and Ruppelt a US book published in '88 gets here. Strong mix of strong women. What about an Australian book? ☞ (I start worrying about me. Take an antibody test. Do happy negative test result dance. A fortnight later realise again, it could've been me . . .)

**'90**

☞ Positive Women Sydney becomes an autonomous, peer based support group. Dykes have always been there. ☞ Women and AIDS Forum, Belvoir St, Mardi Gras. Includes a lesbian on the panel presentation/discussion. Sara Lubowitz

and Catherine Fergher organisers. ☞ CTV

Redfern Community Television run Women and AIDS show, with ACON Women & AIDS Working Group.

☞ US sex education video *Latex and Lace* gets to us at ACON

how. Much watched, for all its flaws. Like a Ladies Lingerie Party with sex . . . ☞ Queer TV dykes make Lesbians and HIV/AIDS show with panel of



POSITIVE WOMEN

some -



the city — to meet anyone who's not been affected by HIV. People have had to rethink. It is so much around us that we can't ignore it now. Worldwide, it is women who are most affected. As a lesbian, and a feminist, for me that's important. It is a political issue for women, whether they're lesbians or not.

*Do you know a lot of other lesbians who are involved in HIV, as carers or in some other way?*

In terms of carers, there are lesbians involved, but there are more heterosexual women carers. There are lesbians who become carers unofficially. They're visiting gay friends and making meals and being supportive, being part and parcel of their lives.

*Has HIV changed the relationship between gays and lesbians?*

Oh yes, I think it has. I think it's united us, it's that grief, loss. The gay community is experiencing something that the straight community has only ever experienced in a war situation.

Most lesbians I know can tell you that they have lost a friend who had AIDS. You'd be very hard pressed to find someone who has not. It has, in a sense, brought us closer as a community.

The AIDS community in Sydney is still predominantly male and there are difficulties. They think: "look, we have a crisis right here now, the majority of people affected are male

so we've got to concentrate on that". Women are forgotten. I don't think it's deliberate, it's just that [the women are] out in the suburbs, they're not here in the inner city.

A small group of women have worked within the AIDS community to raise women's issues, and they have been very much alone. It's

***"I have admired them because they have continually stood up and said 'women, women, women', against a lot of that 'Oh god, here comes that dyke again that's screaming about women'"***

been extremely hard for them and I have admired them, because they have continually stood up and said "women, women, women", against a lot of that "oh god, here comes that dyke again that's screaming about women"

It's very hard work and they don't get a lot of support. These women are also dealing with positive women so they actually see it first hand, and when they appear to be passionate, they're not being hysterical.

*Are there similar difficulties in raising HIV awareness among*

*lesbians?*

Lesbians have changed, but there are still lesbians who think that we are safe, that lesbians are not prone to HIV infection. And while I think lesbians are more sympathetic, they need to say: "it is an issue for us". Because there *are* positive lesbians out there. Even though they're a small number, they're part of our community and they need to be taken seriously.

**KYM**

*When did you first become aware of HIV as an issue that you should be concerned about?*

About seven years ago when my brother informed me that he was HIV positive. I was concerned about his well being and what I needed to know if I ever had to care for him. I felt quite safe, as a lesbian, at that stage. I can't remember ever thinking about it seriously before that.

It's brought up lots of issues for me about how I deal with him living and dying [and] my own mortality. It's been a time when I've had to reassess our whole relationship, just wanting to spend more quality time with him. It's brought us a lot closer together. Even though I haven't been prominent in his life because of distance, I feel like I've given heaps of support to him.

It's been quite draining at times

3 local dykes involved in HIV. Leonie Knight, Susanne Hollis, and me. Plus wonderful spoof cookery show comic presentation by ? of safe sex for lesbians! ♀♀ ACON Women & AIDS Project gets funding for full time permanent worker. I get the job. ♀♀ Albion St Centre put out *Lesbians and AIDS Factsheet* to clinic clients. Doesn't supply dams along with the free condoms, for next 2 years plus. ♀♀ Family Planning Association NSW (FPA) gets funding from Women and AIDS Project specifically to deliver HIV training to women's services.

**MAY '90**

♀♀ *Lesbians on the Loose* run *Sex, Drugs and HIV* article by me. Includes contact listings, talks body parts, basic. Great cartoon *Debbie Discovers Dentistry* by local dyke cartoonist.

**JULY '90**

♀♀ *Wicked Women* run *Lesbians and AIDS* article by Kimberley O'Sullivan. Sceptical re dams for oral sex. Also back to that basic distinction for Positive lesbians, "Women who are HIV Positive and their sex partners have to make very different decisions about their behaviour". Sounds familiar?

**AUGUST '90**

♀♀ Canberra, National AIDS Conference. PWAs take stage, includes Positive dykes. Women take stage, includes Positive dykes.

**SEPTEMBER '90**

♀♀ ACON Women & AIDS Working Group put on *Before You Leap* women and HIV/AIDS forum. Great poster by Sara Lubowitz. Probably the last time we'll use the 'panel' method.

**NOVEMBER '90**

♀♀ Campaign run *Lesbians and Safe Sex* article by Titi Chartay. Very pro safe sex.

**? '90-'91**

♀♀ Add Terrence Higgins Trust UK *Information for Lesbians* pamphlet and poster to the others we've been gathering, photocopying, sending out again, from US, Canada, Europe. None of them are right for us, style, wording, resources, stats, are all overseas not local, not accessible, easily rejected. ♀♀ ACT UP/NY publish *Women, AIDS & Activism*. Amazing book. We don't get it here til '91, but Lyle Chan gets photocopies of drafts to us from US in '90! Inspirational photos of dykes using dams.

**DECEMBER '90**

♀♀ World AIDS Day (WAD) in NSW has first womens WAD poster via Dept of Health funding for ACON Women & AIDS Project. ♀♀ (Late '80s/early '90s get very blurred — what happened when and who, let alone why)



trying to support him emotionally and being the mediator with family who don't accept him at all and don't wish to see him. They're quite ignorant. I've given them heaps of literature to read, but basically they think you can catch it by being in the same room. So he's not allowed to come home.

*You've obviously made a point of informing yourself about it. Did that start with his diagnosis?*

No, because I didn't think he was going to get ill. It took two years for me to get serious about it, that was my own state of denial. Me trying to keep him alive by pretending he was okay.

I feel slightly suspicious of the fact that lesbians are given the really low risk category almost to the degree whereby a certain percentage of the lesbian community has developed what I'd term 'a certain false sense of security'. There are a number of lesbians who are becoming positive and it's always really clear how they have become positive, so that does make me a bit suspicious about how it is transmitted. But that's not a huge concern. I prefer to practice safe sex until I know my partner's negative and monogamous.

*When did it start to change from being just an issue that you were concerned about because of your brother, to being something that affected you in a different way — as a lesbian?*

#### JANUARY TO MARCH '91

☞ Megan Mkwanzani a.k.a. Schlunke produces first Australian *National Needs Assessment of HIV Positive Women*. Phase one of Commonwealth funded Positive woman resource package.

#### EARLY '91

☞ SIECUS report from Cole and Cooper *Lesbian Exclusion for HIV/AIDS Education. Ten Years of Low Risk Identity and High Risk Behaviour*. Beautiful clarity in exposing the mythic distortions of epidemiological 'truths'. Part of work of New York lesbians organising their Lesbian AIDS Project with the backing of Astrea, a lesbian action foundation, to become a funded project with the

When I became aware that lesbians were becoming part of the statistics. Probably four, five years ago. The last three years, I've heard of a number of women's support groups happening, and I guess that means that there's enough women out there to need them. So that's

### **"Awareness around HIV in the lesbian community has increased a lot in the last three/ four years"**

heightened my awareness that this does happen to us as well.

*Have attitudes around HIV have changed among lesbians?*

A lot of my friends seem to take it very seriously. In fact when I got into this new relationship I asked [them], "what would you do in this instance", and they said, "well, you treat everyone as positive and go from there". There was none of this, "oh we're really safe". Most lesbians I know seem to treat it as a very serious issue. Awareness around HIV in the lesbian community has increased a lot in the last three/four years.

*How did you get involved with PLWA in the mountains?*

Originally I saw an ad about the Memorial Park planning. A friend

of mine had her sister and brother in law both pass away from AIDS, so each tree planting I go to I go for myself, but also to support her. I guess that's my subtle way of participating and honouring people. My involvement is partly because of my brother, but I have other friends now who are positive. Even if HIV/AIDS had not touched so closely in my own life, I would still be involved in doing something, purely on a humanitarian basis.

#### VIVIENNE

Eight years ago I started going to a support group for HIV Positive women and within a short amount of time among the small number of women there were four lesbians and one woman who had identified as a lesbian but was now in a relationship with a man. I quickly felt an emotional connection with all these women.

Although I hadn't been exposed to the lesbian culture or politics in Sydney I was upset when some of these women wanted a separate support group. I couldn't comprehend that this group wasn't meeting their needs. What could I do? It took some time for me to understand that these lesbians lived their lives with a community, where their social, health, family, financial and emotional needs were met. Now they were saying, why should they

GMHC by 1992. At last. Why not here? ☞ Streetwise Comics put out *Gaokwize*, includes lesbian sex in *Love on the Run*.

#### MARCH '91

☞ IWD march Women & AIDS makes big SAFE SEX impact, many lesbians marching. Women & AIDS t-shirt launched as fund-raiser for Positive Women.

#### MAY '91

☞ First National Positive Women's Conference. Held in Sydney, auspiced by Quest for Life. Positive women start national networking and newsletter, to be produced by different cities in turn where Positive Women groups exist.

#### JUNE '91

☞ *Gayzette* Newcastle reprint awful US article by Beth Elliot *Does Lesbian Sex Transmit AIDS? Get*

*Real!* Tells lesbians concerned about HIV not to confuse our sexuality with that of gay men. Oh really ...

#### JULY '91

☞ *SEND A DYKE TO NEW ORLEANS* ... and we did! A Positive Australian dyke, Jennifer Websdale, gets some funding from AFAO to attend the National Lesbian & Gay Health Conference and AIDS/HIV Forum in New Orleans, plus visits to women/lesbian HIV/AIDS groups in New York and San Francisco. Some Sydney dykes fund-raiser with Jen, for the



FROM GMHC



# Contact List



## **AIDS Council of NSW (ACON)**

188 Goulburn St/55 Oxford St. Darlinghurst. 206 2000 (switch). Fax: 206 2069.

### **COMMUNITY SUPPORT NETWORK (CSN)**

Trained volunteers providing practical home/personal care for people with AIDS. 206 2031.

**CSN WESTERN SYDNEY** Pat Kennedy 204 2404.

**FUN AND ESTEEM WORKSHOPS** For gay and bisexual men under the age of 26. Groups in Parramatta, Campbelltown and city. 206 2077.

**GAY & LESBIAN INJECTING DRUG USE PROJECT (GLID UP)**. Outreach, information & referral. We are sensitive to the issues faced by lesbians & gay men who inject drugs. 206 2096.

**HIV/AIDS LEGAL CENTRE** Legal advice/advocacy on HIV/AIDS related problems. 206 2060.

**HIV**  
*living*

Support Groups give you the chance to meet others with HIV, exchange ideas and make friends

If you'd like to join a group, become a facilitator, or just find out more about them, give us a call on **206 2014** (gives good phone)

**HOUSING PROJECT** SEE ADVERT.

**POSITIVE ASIAN MENS PROJECT** Looks at the needs of all HIV+ Asian men. Michael Camit. 206 2036 or 206 2090.

**POSITIVE WOMEN** Individual or group support for and by HIV/AIDS positive woman. Non-judgemental and completely confidential. Women and AIDS Project Officer or Women's HIV Support Officer, 206 2000, TTY for the Deaf 283 2088.

**RURAL PROJECT** SEE ADVERT.

**TIFFY'S TRANSPORT SERVICE** SEE ADVERT.

**ACON WESTERN SYDNEY** 9 Charles St, Parramatta. 204 2400.

**ACON ILLAWARRA** 129 Kembla St, Wollongong. (042) 26 1163.

**ACON MID-NORTH COAST** 93 High St, Coffs Harbour. (066) 51 4056.

**ACON NORTHERN RIVERS** 147 Laurel Ave, Lismore. (066) 22 1555.

**ACON HUNTER** Level 1, 6 Bolton St, Newcastle. (049) 29 3464.

## **G E N E R A L**

**AIDS TRUST OF AUSTRALIA** 221 2955.

**ALBION STREET CENTRE INFORMATION LINE** 332 4000.

**ASIANS & FRIENDS SYDNEY** A social, cultural and support group for gay Asians and their friends, meets every Friday from 7.30-10pm. Gus or Jim (02) 558 0061 a/h.

**AUSTRALIAN FEDERATION OF AIDS ORGANISATIONS (AFAO)** 231 2111.

**AUSTRALIAN NURSES IN AIDS** Special interest group for nurses. John Miller 339 1111 or Maggie Tomkins 332 1090.

**CIVIL REHABILITATION COMMITTEE** Family Support Centre. HIV education and support to families of ex-prisoners and ex-offenders. Joanne Wing 289 2670.

**KIDS WITH AIDS (KWAIDS)** and parents of KWAIDS. Inquiries c/- Paediatric AIDS Unit, Prince of Wales Hospital, 39 2772.

**HANDS ON PROJECT** Community based HIV/AIDS training program for youth workers. 267 6387.

**INNERSKILL** Needle & syringe exchange, information & referral, also a range of free services for unemployed people. 810 1122.

**LATIN AIDS PROJECT** Support, counselling and information for the Spanish speaking community. 315 7589.

**MARK FITZPATRICK TRUST** Financial assistance for people with medically acquired HIV. Also administers the NSW Medically Acquired HIV Trust. (06) 287 1215 or (008) 802 511.

**METROPOLITAN COMMUNITY CHURCH (MCC)** 638 3298. MCC Sydney 32 2457.

**MULTICULTURAL HIV/AIDS EDUCATION AND SUPPORT PROJECT** Workers in 15 languages who provide HIV/AIDS information. Also provides cultural information, training & consultancy. Peter Todaro 516 6395

**NATIONAL AIDS/HIV COUNSELLORS ASSOCIATION** Mark Cashman 206 2000.

**NATIONAL AUDIO VISUAL ARCHIVE OF PLWA** Royce 319 1887 (after 1 pm).

**NATIONAL CENTRE IN HIV EPIDEMIOLOGY & CLINICAL RESEARCH** 332 4648.

**NATIONAL CENTRE FOR HIV SOCIAL RESEARCH** (Macquarie Unit). 805 8046.

**NATIONAL ASSOCIATION OF PEOPLE LIVING WITH AIDS (NAPWA)**. (03) 483 6700.

**NSW ANTI-DISCRIMINATION BOARD** Takes complaints of AIDS related discrimination.

318 5400.

**NSW USERS AND AIDS ASSOCIATION (NUAA)** Community/peer based organisation providing support, referral and advocacy for injecting drug users and their friends. Needle exchange services. 369 3455.

**QUILT PROJECT** Memorial project for those who have died of AIDS. 360 9422.

**SEX WORKERS' OUTREACH PROJECT (SWOP)** 212 2600.

**SILK ROAD** Social and support group for Asian gay and bisexual men. Meets every Friday. Workshops, discussions, social activities. Arnel 206 2000.

**SOCIAL WORKERS IN AIDS (SWAIDS)** A special interest group for social workers working with people with HIV/AIDS. Also acts as a lobby group for people affected by HIV/AIDS. Anthony Shembri or Pina Commarano on 661 0111.

**SYDNEY PWA DAY CENTRE** Daytime recreation/relaxation centre for people with AIDS. Advice, information & daily activities in an informal supportive environment. Lunches on some days, massage, acupuncture & other services available. 20 William Lane Woolloomooloo. 357 3011.

**SYDNEY SOUTH WEST NEEDLE EXCHANGE** For access and locations 827 2222, 828 4844 or Mobile 018 25 1920.

**VOLUNTARY EUTHANASIA SOCIETY OF NSW INC.** 212 4782.

## **CLINICS & HOSPITALS**

**ALBION STREET AIDS CENTRE** Main Sydney clinic providing ambulatory care, HIV testing and counselling. Also conducts experimental AIDS treatment trials. No Medicare card required. 332 1090.

**EVERSLEIGH HOSPITAL** A palliative care inpatient facility and community service. 560 3866.

**GREENWICH HOSPITAL** Palliative care inpatient unit, day hospital and community outreach. 439 7588.

**HAEMOPHILIA UNIT** Royal Prince Alfred Hospital. 516 7013.

**KIRKTON ROAD CENTRE** Community based primary health care facility of Sydney Hospital. Nursing, medical services, counselling, 9am-8pm, Mon-Fri. Social welfare

service, needle & syringe exchange 2-6pm, Sat-Sun. Outreach bus 8pm-midnight, 7 days. Darlinghurst Fire Station, Victoria Rd, Kings Cross. 360 2766.

**LIVERPOOL SEXUAL HEALTH CLINIC/HIV OUTPATIENT CLINIC** Elizabeth/Bigge Sts., Liverpool. Free, confidential HIV/STD services, counselling, HIV support groups, practical support. 827 8022.

**LIVINGSTONE ROAD SEXUAL HEALTH CLINIC** 182 Livingstone Rd Marrickville. Open Mon, Wed, Thur 1-5pm. For appointment, 560 3057. No medicare card is required

**NERINGAH HOSPITAL** A palliative care inpatient facility, domiciliary and community service. 4-12 Neringah Ave. South, Wahroongah. 487 1000.

**PRINCE HENRY** (Special Care Unit) Anzac Parade, Little Bay. 694 5237 or 661 0111

**PRINCE OF WALES CHILDREN'S HOSPITAL** (Paediatric AIDS Unit) High St Randwick. 399 2772/4.

**ROYAL NORTH SHORE** HIV outpatient, day treatment, medical consultations, inpatient services, counselling, support groups, sexual health clinic, testing. 438 7414/7415. Needle & syringe exchange 906 7083. Pacific Highway, St Leonards (by railway station).

**ROYAL PRINCE ALFRED** (AIDS Ward) Missenden Rd, Camperdown. 516 6437.

**SACRED HEART HOSPICE** A palliative care facility. 170 Darlinghurst Rd, Darlinghurst. 361 9444.

**ST GEORGE HOSPITAL** HIV/AIDS Services Inpatient, Outpatient and Day Treatment Centre: South St, Kogarah. 350 2960 Sexual Health Clinic: Belgrave St, Kogarah. 350 2742.

**ST VINCENTS HOSPITAL HIV MEDICINE UNIT** Victoria St, Darlinghurst. Multidisciplinary HIV specialist care including medical, nursing, counselling, physiotherapy, occupational therapy, nutritional advice and community liaison. **Inpatient care:** Ward 17 South. 361 2337. **Outpatient care:** Immunology B clinics, Tu, Thur and Fri AM by referral. 361 7111. Ambulatory care/ Urgent triage nurse practitioner on call. 361 7121. Clinical Trials. 361 2492.

**SYDNEY SEXUAL HEALTH CENTRE** 3rd floor, Sydney Hospital, Macquarie St, Sydney. Appointments 223 7066.

**TAYLOR SQUARE PRIVATE CLINIC** Management of STDs and HIV medicine, participation in drug trials, counselling and social welfare services, home visits. Health care card holders and financially disadvantaged are bulk billed. 331 6151.

**TRANSFUSION RELATED AIDS (TRAIDS) UNIT** For people with medically acquired HIV/AIDS. Crisis/long term counselling & welfare support to clients and their families throughout NSW. TRAIDS is based at Parramatta Hospital. Pam 843 3143. **Red Cross BTS:** Contact Jenny 262 1764.

**WESTMEAD CENTRE** (Westmead and

Parramatta Hospitals). Westmead 633 6333. Parramatta 843 3111.

## EMOTIONAL SUPPORT

**ANKALI** Emotional support to PLWAs, their partners, family and friends. Trained Volunteers provide one-to-one non-judgemental and confidential support. 332 1090.

**CLASH** Confidential group of HIV+ heterosexuals who support each other by taking away some of the hardship of being alone. (Free call) 1-800 812 404.

**DROP IN SUPPORT GROUP** For PLWAs who would like to meet others in the same situation and gain support. Glebe Town Hall (catch 470 bus). Entry through Mt Vernon St. Every Wednesday, 3.00 - 4.30pm Call Pedro on 660 5455 or Claire on 516 6111, page 6437.

**FAMILY SUPPORT City:** A support group for family members of people with AIDS. Regular short term groups. Helen Golding on 361 2213. **Outer Western suburbs:** Meets evenings on a regular basis. Claire Black or Kevin Goode at Wentworth Sexual Health and HIV Services on (047) 24 2598.

**HIV AWARENESS AND SUPPORT (HAS)** is an open group for HIV+ users, their friends, partners etc. Meets every Wed 7pm at 15 Ice St, Darlinghurst. Contact via HIV support worker at NUAA, 369 3455.

**HIV+ SUPPORT GROUP** South Western Sydney. Meets in Liverpool Wed 6.30pm. Julie 827 8022. Transport can be arranged.

**PARENT'S FLAG** Parents and friends of lesbians and gays. Meets 2nd Mon of the month. Heather, 899 1101, or Mollie 630 5681.

**POR LA VIDA** Un servicio de informacion y apoyo para personas afectadas por el VIH y El Sida. 206 2016.

**QUEST FOR LIFE FOUNDATION** Emotional support and education for people with life threatening illnesses, their families, loved ones and health professionals. Support groups, meditation/relaxation classes, one-to-one counselling. 906 3112.

**SUPPORT OF POSITIVE YOUTH (SOPY)** Drop in

groups for young people with HIV/AIDS meet every Thursday. Girls and guys welcome. 318 2023

**SUPPORT GROUP FOR PARENTS OF HIV+ ADULTS** Every 3rd Fri in the month 7-9pm at Ankali House 335 Crown St. Confidentiality assured. Julie Fuad, 569 2579.

**SYDNEY WEST GROUP A** Parramatta based support group. Pip Bowden 635 4595.

**YOUTH HIV SUPPORT WORKER** Counselling, advice, information to positive youth and their peers in the Central Sydney area. 690 1122.

## PRACTICAL HELP

**BADLANDS** Residential harm reduction service providing safe, non-coercive space for people who are at high risk of HIV transmission or acquiring HIV. Residents are mainly injecting drug users and/or sex workers. 211 0544.

**BARNADOS FAMILY SERVICES** Support for families affected by HIV/AIDS. Respite care, short/long term foster care and assistance with permanency planning for children whose parents have HIV/AIDS. 387 3311.

**BOBBY GOLDSMITH FOUNDATION** A community based, registered charity providing some financial assistance to approved clients. 360 9755.

**DOG GROOMING** Reduced rate for PWA pensioners. Ben on 519 8785. Free to PWAs on limited incomes. Judy on 559 3225.

**FUNERAL CELEBRANT** General funerals, free in cases of financial hardship. Patrick Foley on (018) 61 1255.

**FOOD DISTRIBUTION NETWORK** Cooperative distributing cheap boxes of fruit & vegetables. 9am - 4pm Mon-Fri, 699 1614.

**HANDS ON MASSAGE AND REIKI** for PLWAs. Training of volunteer masseurs. Richard 660 6392

**PETS** The Animal Welfare League will help with Vet. care for established companion pets. Referrals through BGF, 360 9755.

**PETS** The Inner West Veterinary Hospital will never refuse urgent treatment for a pet



**Current PLWHA Committee**

Alan Brotherton, *Convenor*  
Les Szaraz, *Deputy Convenor*  
Robert van Maanen, *Secretary*  
Graeme Blair, *Treasurer*  
Chris Connole, Ross Duffin, David Martin, Larry Wellings  
There are three vacancies.

**PLWHA Coordinator**  
Annella Wheatley 361 6011  
**Administrative Support Officer**  
Claude Fabian 361 6023  
**Talkabout Coordinator**  
Paul Canning 361 6750

**Office:** Suite 5, Level 1, 94 Oxford St., Darlinghurst.  
**Post:** PO Box 831 Darlinghurst NSW 2010.  
**Fax:** 360 3504

**PETS** The Inner West Veterinary Hospital will never refuse urgent treatment for a pet because of lack of money. 516 1466.

## OUTSIDE SYDNEY HAWKISBURY & BLUE MOUNTAINS

**BLUE MOUNTAINS PLWA SUPPORT CENTRE**  
Wed 11am-3pm (lunch). Fri 6.30-10.30pm (dinner). (047) 82 2119 or Dennis (047) 88 1110.

**BLUE MOUNTAINS HIV/AIDS CLINIC**  
Services include testing, treatment, monitoring and counselling/support. (047) 82 0360. 9am-Noon, M/W/F.

**CSN BLUE MOUNTAINS** Hands on practical help for people with HIV/AIDS. Pat Kennedy, (02)204 2404.

**KARUNA BLUE MOUNTAINS** Emotional support for people with HIV/AIDS, their partners, family and friends. Ann (047)82 2120.

**SOUTHERN HIGHLANDS HIV/AIDS VOLUNTEER SUPPORTER GROUP** Emotional and practical support for PLWHAs, their family and friends, living in the Bowral district. Marion Flood (048) 61 2744 or David Willis (018)48 3345.

## CENTRAL COAST & HUNTER

**CENTRAL COAST SEXUAL HEALTH SERVICE**  
Offering HIV clinic for testing, monitoring, treatments, support. Patrick (043) 20 241.

**CSN NEWCASTLE** Rosemary Bristow, ACON Hunter Branch. (049) 29 3464.

**COASTAL CONNECTIONS** Gay & lesbian social group. (043) 20 3399.

**HUNTER AREA HIV SUPPORT/ACTION GROUP** 6.30pm, 4th Wed every month at ACON. Inquiries (049)29 3464.

**JOHN HUNTER HOSPITAL** (Clinical Immunology Ward). Lookout Rd, New Lambton, Newcastle. (049) 21 4766.

**KARUMAH DAY CENTRE.** First floor, 101 Scott St, opposite Newcastle Railway Station. Open Tues 6-9pm (games night), Wed 6-9pm (games night & masseur when available), Thur 11am -3pm (lunch & activities). (049) 29 6367.

**KONNEXIONS DAY CENTRE** 11am-3.30pm Mon for lunch & social. Lesley. (043) 67 7326.

**NSW ANTI-DISCRIMINATION BOARD** Newcastle. (049) 26 4300.

**NEWCASTLE GAY FRIENDSHIP NETWORK** Peer support, workshops and activities for gay men under 26. ACON (049) 29 3464.

**POSITIVE SUPPORT NETWORK** Emotional/hands on support for PLWHAs on the Central Coast. Keith Jones (043) 23 2905.

**THE LAKES CLINIC** (Tuncurry ) A sexual Health Service. Bridgepoint Building 2nd flr. Manning St. Thu 10 -2pm. Free and confidential.(065) 55 6822.

**Alcohol and Drug Information Service**  
24 hour service, seven days  
Information, assessment, counselling and referrals for alcohol and other drugs, locations of needle exchanges in NSW

008 422 399

**Gay and Lesbian Counselling Service**  
4pm to midnight every night  
General counselling and information and referral about gay related issues

008 805 379

**Gay and Lesbian Counselling Service Rural Youth Line**  
Sun-Wed 5-7pm  
Information on HIV/AIDS for young guys in country areas

008 672 147

**Gay and Lesbian Teachers and Students**  
Mon, Wed 4-8pm, Sat 6-10pm  
Advice and counselling for gay and lesbian students

008 636 693

**Gay and Married Men's Association**  
Mon, Tue, Fri 6.30-10.30pm  
Support group for men who are married, were married and are gay, bisexual or attracted to men

008 804 617

**NSW HIV/AIDS Information line**  
Mon-Fri 9am-8pm,  
Sat 10am-6pm  
Advice and referral information for HIV/AIDS

008 451 600

**Rural Project, ACON**  
Mon-Fri 10am-6pm  
General advice and referrals on HIV/AIDS in country areas

008 802 612

**Take Control Line**  
Mon-Fri 10am-6pm  
Confidential and frank information on treatments for HIV/AIDS

008 816 518

## NEW ENGLAND & NORTH COAST

**ARMIDALE HIV EDUCATOR** Melinda Spinks (067) 73 4 712.

**BLIGH STREET SEXUAL HEALTH CLINIC.** (Tamworth) Free & confidential STD/HIV testing & management. (067) 66 3095.

**CHAPS OUT BACK** (Coffs Harbour) Assistance & advice for PLWHAs. Drop in centre/coffee shop each Thur 10am-4pm, support group first Sat each month 2pm-4pm at ACON. Steven (066) 51 5703 or ACON.

**CLUB 2430** (Taree) Manning Area Gay and Lesbian Support Group. Social functions, newsletter, monthly meetings. Bill or Barry (065) 53 7502 or Liz (065) 51 1315.

**COASTAL LYNX** Mid north coast gay & lesbian support group. (065) 62 7091.

**GAY/MSM WORKER** Bernie Green. Bligh St Clinic Tamworth. (067) 66 3095.

**HASTE** (Hastings AIDS Support Team & Network). Craig Gallon (065) 62 6155.

**KEMPSEY AIDS NETWORK** Madelaine Mainey. (065) 62 6155 HIV Program officer Craig Gallon 018 66 4186.

**LISMORE SEXUAL HEALTH/AIDS SERVICE** A free, confidential service for all STD and HIV testing and treatment. (066) 20 2980.

**NEW ENGLAND NEEDLE EXCHANGE PROGRAM** (067) 662 626 (message). 018 66 8382.

**NORTH COAST POSITIVE TIME GROUP** A support and social group for PLWHAs in the North Coast region. (066) 22 1555.

**TAREE SEXUAL HEALTH SERVICE** 93 High St Taree, Tue 2-6pm, Thurs by appointment. (065) 51 1315.

**TBAGS** (Tamworth Boys & Girls Society). **TAGLS** (The Armidale Lesbian & Gay Society). Bernie (067) 66 3095.

**TROPICAL FRUITS** Gay & lesbian social group. Regular events. (066) 22 4353.

**WOLLUMBIN CARES** (North Coast) Community AIDS Resources, Education and Support. Gerry or Keven (066) 79 5191.

## SOUTH WEST/EAST

**ALBURY AIDS SERVICES** Community Health Centre 665 Dean St (060) 23 0206.

Needle & Syringe Exchange, Judy Davis.

**ALBURY/WODONGA HIV/AIDS BORDER SUPPORT GROUP** (060) 23 0340.

Please let us know  
your opinion on the  
new look listings  
and if you want to  
update your listing  
or add a new one!

**BEGA VALLEY HIV/AIDS VOLUNTEER SUPPORTER GROUP** Emotional and practical support to PLWHA, their family & friends living in this area. Jenni Somers or Ann Young (064) 92 9120

**BEGAV** Bega area gay & lesbian social group 018 60 4180.

**COOMA/SNOWY MOUNTAINS HIV/AIDS VOLUNTEER SUPPORTER GROUP** Emotional and practical support for plwhas, their family and friends living in this area. Victor on (018) 48 6804 or Pam Davis on (064) 52 1324.

**CSN WOLLONGONG** Daniel/Maddedu, (042) 26 1163.

**EUROBODALLA HIV/AIDS VOLUNTEER SUPPORTER GROUP** Emotional and practical support to PLWHA, their family and friends in the Narooma to Batemans Bay area. Jenni Somers or Liz Follan on (044) 76 2344.

**GOULBURN NEEDLE & SYRINGE EXCHANGE,** HIV/AIDS supporter group, AIDS task force. Alan (018) 48 2671.

**GRIFFITH HIV EDUCATOR/SUPPORT WORKER** Laurane Pierce. (069) 62 3900.

**NSW ANTI-DISCRIMINATION BOARD** Wollongong. (042) 26 8190.

**NOWRA SEXUAL HEALTH CLINIC** Confidential and free support for PLWHAs. Nowra Hospital, (044) 23 9353.

**PORT KEMBLA SEXUAL HEALTH CLINIC** Confidential and free support for PLWHAs. Fairfax Rd, Warrawong. (042) 76 2399.

**POSITIVE SPACE ILLAWARRA** Positive Space offers a confidential meeting place to chat, listen and share with other positive people in the Illawarra area. Don't hesitate to call (042) 26 1238 to chat with or meet others. Wednesdays and Fridays 12pm-5pm.

**QUEANBEYAN HIV/AIDS/STD WORKER** Yantene Heyligers (06) 29 89236.

**SOUTHERN HIGHLANDS HIV/AIDS/STD WORKER** David Williams 018 48 3345.

**WAGGA WAGGA HIV & SEXUAL HEALTH SERVICES**

## REGIONAL HEALTH SERVICE HIV/AIDS COORDINATORS

### CENTRAL WEST

Dr. Martha Gelin  
Ph: (063) 32-8576/538/571  
Fax: (063) 32-8555

### CENTRAL COAST

Mr Jeff Smith  
Ph: (043)20-3399 (018) 43-6044  
Fax: (043) 25-0566

### ILLAWARRA AREA

Ms Vivienne Cunningham-Smith  
Ph: (042) 75-5823/76-2399  
Fax: (042) 76-2521

### NORTH COAST

Ms Margaret Hoskins  
Ph: (066) 20-2145 Fax: (066) 21-7088

### NEW ENGLAND

Ms Christine Robertson  
Ph: (067) 66-2288 Fax: (067) 66-3003

### HUNTER AREA

Ms Marilyn Bliss  
Ph: (049) 291-292 Fax: (049) 294-037

### SOUTH WEST

Mr Dalton Dupuy  
Ph: (060) 23-0350 Fax: (060) 23-0168

### SOUTH EAST

Mr Greg Ussher  
Ph: (048) 27-3148 Fax: (048) 27-3183

### ORANA AND FAR WEST

Dr Kevin Coleman  
Ph: (068) 81-2222/2242  
Fax: (068) 81-2225

### SOUTHERN SYDNEY

Mr Colin Clews  
Ph: 350 2959 Fax: 350 3981

### WESTERN SYDNEY

Mr Chris O'Reilly  
Ph: 843 3118 Fax: 893 9716

### NORTHERN SYDNEY

Mr Graham Stone  
Ph: 438 8237 Fax: 906 6174

### WENTWORTH AREA

Ms Elizabeth O'Neil  
Ph: 047 22-2255 Fax: 047 24-2620

### INNER WESTERN SYDNEY

Mr Gilbert Whitten  
Ph: 827 8033 Fax: 827 8030

### SOUTH EAST SYDNEY

Ms Jo Sexton  
Ph: 350 2959 Fax: 350 3981

### CENTRAL SYDNEY

Ms Lesley Painter  
Ph: 550 5366 Fax: 550 5039

Paula Denham (069) 38 6411. AIDS Task Force (069) 25 3055 or (069) 38 6411.

**YASS HIV/AIDS VOLUNTEER SUPPORTER GROUP** Emotional and practical support for PLWHAs, their family and friends living in the area. Alan, (018)48 2671.

**YOUNG HIV/AIDS VOLUNTEER SUPPORTER GROUP** Valerie, (063) 82 1522.

**W I S T**  
**BROKEN HILL HIV/STD WORKER** Darriea Turley. Community Health Centre. (080) 88 5800.

**DUBBO/MUDGEES HIV/STD WORKER** Robert Baldwin. Community Health Centre Palmer St (068) 85 8937.

**GALOW** (Gays & Lesbians out West). Robert. (068) 85 8937.

**ORANGE COMMUNITY AIDS TASK FORCE** Shirley-Ann Bailey. Central West HIV Support worker, Luke Austin. Community Health Centre. (063) 62 6422.

## ACON Housing Project

206 2039  206 2029

We offer help & advice about public housing, in particular: accessing priority housing; transfer; and the special rental subsidy — as well as housing discrimination, harassment and homelessness. Call the

Housing Officer on 206 2039 for an appointment. The Housing Project also has a

number of houses and units available to clients who are waiting for public housing. You must be eligible for priority housing and in the process of applying.

To be placed on the waiting list, call the Tenancy Co-ordination Officer on 206 2029.

## ACON MEDITATION GROUP

Meets every Monday of every month at 6pm.

55 Oxford Street (ACON)

Inquiries: Call David

on 358 1318

have to reach out of this framework to address the particular needs of being HIV, "we want our community to accept this part of us as well". So these HIV Positive dykes faced other lesbians head on, with their virus. Standing up on stage at fund-raising events and disclosed their status to their lesbian sisters. They raised money from lesbians to send a Positive dyke the National Lesbian and Gay Health Conference and HIV Forum in New Orleans, July 1991. They and their partners and friends confronted whoever would listen with the message "dykes get this virus too". Or should I say "Women get AIDS Get Active".

The first lesbian forum was held when lesbians were still getting the message that they weren't at risk. Since then the LIP report disproves this. As lesbian sex statistics aren't collected in the epidemiological picture it is impossible to know how many transmissions occur between lesbians. The LIP report shows that dykes do have unprotected sex with men and they do inject drugs. Although these practices aren't always supported or talked about. These findings were discussed at a HIV lesbian forum earlier this year. I went to this forum expecting women to be asking: How can we support our

Positive partners? What toll has HIV taken? How can we mobilise as a community to further raise awareness? Instead I was shocked to be listening to really basic questions: What is a dam? Where do we get them? How do you use them? If HIV is a virus, why isn't it caught like the flu? It

**"They have insisted on dam availability and have forced AIDS organisations to create policies about oral sex"**

was exciting for me that a place had been provided for these simple questions to be answered. But I came away feeling that some of the women there were representative of people across the board, those who want to know will find out and those that don't think it affects them or don't want to know will continue on unknowing.

And so above all that there have been changes among lesbians over the last 10 years that I've seen. More lesbians are committed to education. There is now government funding to target gay and lesbian injecting drug users. Some

lesbians are eager to develop transmission and lifestyle education around Mardi Gras, and wanting to create visibility for HIV Positive women. More lesbians are taking it upon themselves to organise forums and fundraisers for Positive women and to march with the *Positive Women & Friends* banner.

I get the feeling some dykes know there is a great need to support and educate each other and they're not sitting around waiting for someone else to do it. In stark contrast to the lesbians I've come to know — like when dental dams became dams, and even before then, dykes I knew took them as their own. I saw this as good for me because they became talked about, available and used and in some quarters accepted, and in my world hopefully that created some sort of overflow effect into the heterosexual community. Leading the way for discussions about oral sex, vaginal juices, menstrual blood, viral load, they made it possible for me and hopefully other women to say "oral sex? Have you tried these damn dams?!!" I could continue these questions into a heterosexual context, experiment with dams, because they have insisted on dam availability and have forced AIDS organisations to create policies about oral sex.

National Lesbian Conference and Festival, over 600 dyke dollars gathered over a few days!! Women's, gay and lesbian, and HIV organisations chip in another \$1000. Yes! ♀♀ Women & AIDS Project stall has brisk business throughout conference with dykes seeking lesbian specific information, and lesbian friendly space in HIV world. ♀♀ Lesbians and AIDS workshop by Sue Brumby at conference is controversial risk assessment. Positive dykes very vocal. ♀♀ *On Our Backs* (US) run *A Decade of Denial: Lesbians & HIV* article by Denenberg. First time I'd ever seen a *Heroes List* for frontline lesbian HIV activists, American, of course.

**SEPTEMBER '91**

♀♀ Jen's report to AFAO from the *Send a Dyke* ... trip, coins the phrase *Cuntaphobia*. Important connections made with NY LAP women. Depressingly familiar strug-

gles for lesbians in US, seeking lesbian HIV meanings. ♀♀ *Lesbians on the Loose* runs report of Jen's trip findings.

**LATE '91**

♀♀ Dam problems - dental supplies firms not wanting to supply to anyone but dentists. Safe sex dykes just keep snipping condoms into dams. Leather leg straps for US (still none locally made?) make for hands free damming. US chocolate flavoured edible lube makes the latexed labia licker's life lovelier. ♀♀ AIDS funding submission by a Sydney dyke, Leonie Knight, for a lesbian HIV video, is knocked back. (She goes on to win a Ber-

lin Film Festival award for an art film). ♀♀ *We Want Safe Sex NOW* ... for all sorts of reasons, ACON Women & AIDS Project campaign launches four poster and pamphlet set. Positive women/lesbians give feedback of being included, at last, not under some separate, do-it-differently, category. ♀♀ Wauchope lesbian community organise a lesbians and HIV day workshop for themselves with ACON's help. Total involvement. Newcastle dykes do the same, with SICH funding (Students in Community Health). Lesbians come to terms with facts, fears,

EARLY, AND PRIMITIVE, STICKERS

## Lesbian Poster Project

Kate Monroe and several other women from the local night club scene in Sydney have got together in order to produce a series of posters relating to lesbians and safe sex. After several fundraising events which have raised approximately \$3,700 they have incorporated the Poster Campaign as a registered charity.

The concept for the posters is to have four strong female identified images covering issues for lesbians, Positive lesbians, and sex practices accompanied by bold text. They hope to use women from the lesbian communities and distribute the posters nationally. They want to "give a face to HIV Positive women" and "portray the community as diversely as possible" including "a diversity of women and their sexual partners".

Women interested in the project can phone Kate on (02) 699 8950.

I'm seeing lesbians caring for their partners. Things have changed here in the last 10 years. I now see lesbians committed to their lovers in illness, supporting their women in making their last dreams come true, and then burying them, unabashed in their lesbianism, proud in the midst of this virus. I see their friends, supporting in offerings of massages, food, gardening, and the day to day things that coexist with those things I have come to know that goes with living and dying with HIV.

**KIMBERLEY O'SULLIVAN**  
(O'Sullivan came out in 1978 and has been active in a wide range of lesbian/gay and lesbian feminist community organisations and

do the same, with SICH funding (Students in Community Health). Lesbians come to terms with facts, fears, and feeling with a strong mix of laughter, anger, and tears. ♀♀ FPA run periodic Lesbians and HIV sessions as part of their education calendar.

### OCTOBER '91

♀♀ Megan Mkwanzani a.k.a. Schlunke: AIDS activist, strong woman, and a founding member of Positive Women Sydney, dies.

### LATE '91

♀♀ Sydney lesbians meet to form LIP, Lesbian Information Project. We want more than lip service. LIP survey of local lesbians on HIV receives 520 completed questionnaires in three months without hardly trying! Amazing. ACON funds independent report of survey. Many LIP funding submissions result in a TRIBES project at NUAA (NSW Users and AIDS

events. She's written widely on sexuality and was recently appointed editor of *Wicked Women*)

I remember being at a party four years ago and there was the particular situation of four women, one gram of speed, one needle. A couple of them made a big deal of 'oh, I got my dental dams and my gloves!' after six of us had had the same needle in our arms! Nobody thought anything of it at the time because [dams] was the only message we were getting. The next morning I thought 'fuck!' I realised that there were a whole lot of behavioural issues that were not sexual issues that weren't being addressed. No discussion was happening about lesbians having sex with men and the drug culture — which isn't new, there's always

Association) to target injecting dykes. ♀♀ Local Positive lesbians fax World Health Organisation about exclusion of woman to woman safe sex information in their WAD literature listing heterosexual and gay male sexual activity only. Receive polite but ineffectual replies.

### '91-'92

♀♀ Glyde prototype dams for sex, bypassing dental suppliers entirely. Yeehay! We have fun being guinea pigs.

### '92

♀♀ Positive women appear on *A Current Affair*. The lesbian interviewed gets edited to less than a minute, perhaps because her answer to the perennial media question "How did you get it?" was "I think we can rule out breast milk"! Positive women/lesbians appearances on TV, radio, and in magazine

been a lesbian smack sub-culture. I wrote an article after this experience and people really hit the roof, really negative reactions. You know how you write about something and they label you proscriptive: 'Are you saying everybody does it!?'

The good thing about HIV/AIDS is that it's forced peoples sexual secrets out into the open, and those sorts of secrets keep us sick as a community. It's forced all these other issues about sex, fantasy etc. up that we'll all benefit from when this pandemic is over. Lesbians have always seen themselves as the innocent pure parties defiled by outsiders. It happened with bisexual women in the seventies and with the new public face of bisexuals it's happened again where it's: 'bisexual women come in the community — contaminated by their contact with men, who are full of diseases — and then disease us.' And we're angelic, and it's come out of coalition and going to dance parties with gay men. It's crazy! There's always been a lesbian drug culture. Many lesbians work in the sex industry, and stuff that happens to them at work affects other lesbians. Nasty stuff in parlours that I hear of, like the ugliest girl being kept on as the person available for unsafe sex or them not letting SWOP [Sex Workers

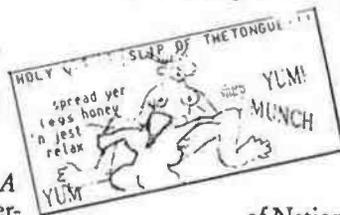
and newspaper articles throughout late '80s and early '90s have featured the personal story approach by media workers, causing major exposure for the individual women but frustratingly little focus on the political and educational messages they have wished to get

across. Media stuck at 'innocent victims' level for women and using Positive women for prevention messages.

♀♀ Positive Women Melbourne complete Phase 2

of National Resource Package.

A video and book made for and by Positive women/lesbians. Everyone worked so hard for this, particularly Melbourne Positive Women Project worker Deb Gillies. At last a local Positive product available for all



FROM GLID UP



Outreach project] in. That has to be exposed and attacked. It's an industrial issue, occupational health and safety.

Lesbians haven't talked much about safe sex because they haven't talked much about sex. They're appallingly ignorant about HIV, they must be equivalent to yobbos in the suburbs.

I would feel quite confident having a sexual relationship with a positive women. But I would not want to be a positive lesbian who was looking for a fuck in this city. It'd be hideous. They're pioneers. All that stuff you need to keep you going you probably won't hear for five years.

The anger isn't there because lesbians really believe they're an unaffected group as a whole. There are a percentage that is aware but they are by no means a majority. Therefore the politics around HIV/AIDS is foreign to their lives.

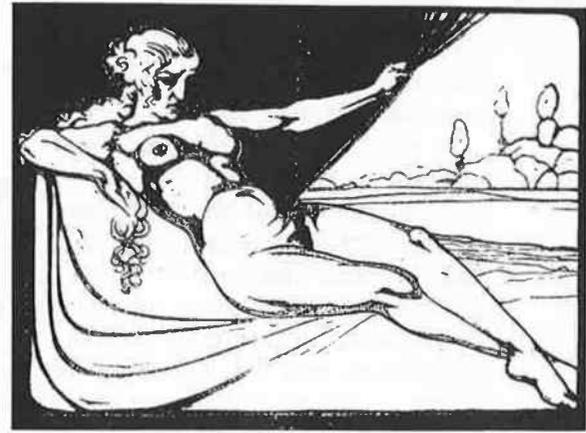
**JADE**

*Jade is the worker for a new project for SM Dykes.*

LIP [Lesbian Information Project] grew out of a need that some women perceived to provide more specific information on HIV awareness and safe sex practises in relation to SM dykes. Most of the info seemed directed towards what SM lesbians term 'vanilla' sex. There's nothing about how to fist

**A generous donation of 18 original Art Deco woodcuts by Frans Ermengem (1893-1985) has been made by Mr Greg Martin to raise funds for the Positive Women's Group of NSW. The Women and AIDS Project at ACON, on behalf of the Positive Women's group, is organising the fund-raising event to be held at the Bare Gallery**

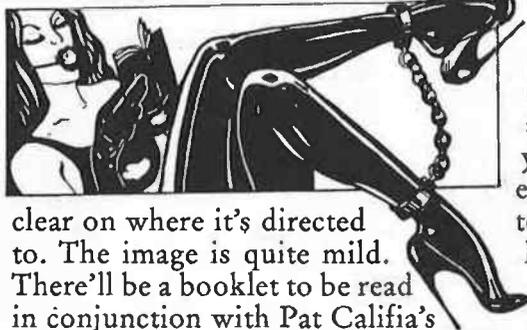
**Newtown, on Tuesday the 6th of September at 7pm. Julie McCrossin will be introducing the evening and whipping everyone into a bidding frenzy. The prints will be on show for a week following the opening so that bidding can continue. The majority of the prints are numbered and dated but a small number of them are not signed; these ones will come with an approved authentication certificate. If you would like to be put on an invitation list for the opening please contact Shan at the Women's Project, on 206 2049/2054. Your support of this event will be greatly appreciated.**



safely or whipping or cutting.

The project involves a poster with the slogan *Bound To Consent*, which I think is great and

It'll be a booklet of help and tips and safety issues. Even in the mindplays there's things which you may have never thought of before that you can harm people with. Our booklet's about how to have to sex to include those safe practises as part of an everyday thing you're going to do anyway, especially when you're using toys and gloves — it's simple hygiene. Just because someone says 'let's have safe sex!' that shouldn't be a suss thing. Maybe, if it was quite a common thing to happen, then for women who have HIV they could move through the commu-



clear on where it's directed to. The image is quite mild. There'll be a booklet to be read in conjunction with Pat Califia's *SM Safety Manual*, which seems to be the bible of SM lesbians (and is available in most gay/lesbian/feminist bookshops).

HIV Positive women. ♀♀

*False Nature* play by Bernie Sheehan with a Positive lesbian character plays to full houses of Sydney lesbians. Playwright consulted with local Positive lesbians at script stage — very unusual.

**FEB AND APRIL '92**

♀♀*National AIDS Bulletin* run *Lesbian Visibility at What Price?* article by Maxine Drake accusing lesbian HIV activists and educators of "piggy-backing" lesbian visibility on the AIDS issue" and "hijacking part of the safe sex debate" in our "efforts to increase the profile of lesbian sexuality". Brings howling response amongst outraged Sydney lesbians, with an article and 3 letters to *NAB* including famous "lick my

**A POSITIVE RESPONSE**

Maxine Drake, come lick my cunt and see what the price is. I am one of the first seven women diagnosed HIV positive in Australia since 1985. Four of us were and are lesbian identified.

I could write for pages on the facts, but feel that you and the *National AIDS Bulletin* need to do some work on gaining informed knowledge, so you publish the truth and not reactive, dangerous crap.

Jennifer Websdale

friends make it happen. Kath makes public statement as a Positive lesbian. (Local gay and lesbian press fail to cover this event during Mardi Gras).

cunt" challenge by a Positive dyke, Jennifer Websdale.

**FEB '92**

♀♀*Daring Dykes — Desire & Doing It.* Breakthrough performance event by and for dykes about our sex, HIV, and safety, and fun. Benefit for Positive Women. ACON Women & AIDS Project workers, Kath Valentine and Vivienne Munro, plus a host of dykes and

**MARCH '92**

♀♀ At last *POSITIVE WOMEN & FRIENDS* banner held high at IWD march — and everywhere else since. ♀♀ Positive Women Sydney, ACON Women & AIDS Project and Albion St Clinic doctor, Virginia Ferner, meet for several consultation sessions towards forming a gender specific patient database. We get very excited. Might even go national. Whatever happened to that? ♀♀ Amsterdam, International AIDS Conference. Lesbian/women AIDS activists make loud, critical statement re woman to woman transmission, and Positive Women and HIV treatments. ♀♀ Glyde produce dams for sex (name them *Lollies*, despite strong local advice



N.A.B. APRIL 1992

ARTIST: RINI KATES

FROM NUAA



nity so much easier and feel the same as everyone else.

It won't be a sterile book. It'll be a *Let's Have Fun* book. It'd like to give it that air. It's a very grass-roots production and readable and won't have references for *More information somewhere else*.

It'll be focus tested beforehand to lesbians and SM lesbians. I'm going to try to contact as many leather-identified positive dykes as possible. I don't know many.

It's really important that women are aware that they are not low-risk. It's all quite possible.

They'll also be a [smaller] safe sex kit. The project's work should be out in the Spring [early October], with a big launch. It'll be widely available.

*Jade can be contacted via 698 1707.*

Kimberley and Jade interviewed by Paul Canning

against). ♀♀ NUAA produces first glossy dam dykes safe sex pack — thanks Sue Newman. First of many. ♀♀ *Outlook* (US) run *Risky Business: Should Lesbians practice safer sex?* article by Solomon. Still these ??? articles. ♀♀ FPA Women and AIDS Project expands to one and a half workers. ACON still has one worker with half time Positive woman worker in HIV Support Project. ♀♀ *Star Observer* run *Dams, Whores & Thought Police* article by Barbara Farelly, interviewing me. Historical and attitudinal. The dangers of confusing identity with behaviour by organisations and individuals. ♀♀ I resign from Women & AIDS Project.

### FEB '93

♀♀ *Lesbians on the Loose* run *Lesbian & AIDS: The Great Denial* article by Stevie. Urgent and angry, but wiping out our her-story by overstating the 'nothing and never'

Why does it seem so little? What did it all add up to? An atmosphere of scarcity fuelled debate over dialogue, and controversy and conflict over conclusions. We kept looking to the [United] States, whilst bemoaning the lack of local responses. But we found out that they, for all they had a bigger Positive and Negative activist population, were struggling as we were, and producing articles, resources, services, political

feeling re HIV lesbian activism locally.

### '93-'94

♀♀ Commonwealth run HIV anti discrimination ads on TV etc. The Positive lesbian filmed is not aired.

### FEB '94

♀♀ Lesbian and HIV Forum at Eco Bar in Mardi Gras produced by Kate Monroe and Izzy with a panel of speakers and discussion, targets 'clubbing' lesbians. ♀♀ Lea DeLaria 'The Muff Diva' US lesbian comic performs at Kinselas. Denigrates dams and the dykes who use them. The lesbian and gay male audience laughs, loudly. Some of us don't find it funny. ♀♀ Jennifer Websdale,

action in spite of, and not within, the prevailing women's, HIV, and health 'industries'. No one else was going to 'save' us.

The focus on woman to woman transmission and the safety of lesbian sex, whilst obviously important and vital to all lesbians, often suffered from a 'Negative assumption', making Positive lesbians alternately invisible or solely responsible. Positive lesbians have often been labelled as *the*

## HIV lesbian and injecting friendly doctors and clinics

### SYDNEY CLINICS:

Family Planning Association 716 6099; Leichardt Women's Health Centre 560 3011; Albion Street Centre, Surry Hills 332 4000; Sydney Sexual Health Centre 223 7066; Kirkton Rd 360 2766

### SYDNEY GPs

DARLINGHURST: Janet Kidd 332 2531; Marilyn McMurchie 331 7953. LEICARDT: Dianne Chambers, Linda Mann, Julie Blaze 550 0288. PADDINGTON: Pam McDonald, Vicki Sutton 331 5080; Jane Reffell 361 0333 (& city 299 1311). ANNANDALE: Liz Rickman, Sari Larsen 560 7928. GLEBE: Nyrie Dodd 660 4316.

### NSW REGIONAL

Contact your regional health service HIV/AIDS Coordinator [listed in contacts, page 19] as a good starting point for information about friendly doctors. The following list is of some good people to call to put you in touch with a good

doctor in your area.

**Armidale:** Melinda Spinks 734 712. **Coffs Harbour:** ACON 514 056. **Kempsey:** Craig Gallon 626 155 or 018 66 4186. **Taree:** Liz Meadley 511 315. **Dubbo/Mudgee:** Robert Baldwin 858 937. **Griffith:** Laurane Pierce 623 900. **Albury:** Judy Davis 230 206. **Wagga:** Paula Denham 234 811. **Goulburn/Yass/Young/Cooma:** Alan Thorpe 273 168. **Southern Highlands:** David Williams 018 483 345. **Bega Valley/Eurobodalla:** Jenny Somers 929 120. **Queanbeyan:** Yantene Heyligers 298 9236. **Gosford:** Patrick McEvoy 202 114. **Newcastle:** ACON, HIV Support 293 464. **Wollongong:** ACON 261 163.

(List compiled from service providers known or recommended to be HIV, lesbian and IDU friendly by the ACON Women's Project)



AIDS activist, strong dyke, and a founding member of Positive Women Sydney, dies.

### EARLY '94

♀♀ Brisbane City Council ban local Dyke HIV Sex Poster. ♀♀ ACON forms Women's Team! Soon to appoint Manager over several projects. Well done Lisa Brockwell for the Women & AIDS Project, and all the gang. It never was a one woman show.

### APRIL '94

♀♀ Deb Gillies, AIDS activist, strong woman, and a founding member of Positive Women Melbourne, dies.

### ???'94

♀♀ Lesbian & AIDS pamphlet due out from ACON Women's Team???

*risk*. Our lesbian HIV actions — resources, events, articles — have seemed isolated, underground, lost, actively 'forgotten', and overlooked. We've had to believe that just like a stone thrown in a pond that seems to sink from sight, we've been making ripples all along. Looking for a tidal wave.

THE AUTHOR AS THE INVISIBLE LESBIAN  
IN 1989 ACON POSTER



# Fair Treatment



by Ross Duffin

TWO YEARS AGO THE WAY drugs for life threatening illnesses were made available in Australia was radically overhauled. It was anticipated that this may unblock the pipeline for drugs for HIV/AIDS and herald a new age in the treatment of HIV infection. Unfortunately, the pipeline proved either empty or disappointing. Recent advances in HIV/AIDS treatments hint that the pipeline may be ready to start flowing again — and, that some pressure may be needed to unrust the pipe.

As time has gone on, increasingly the limitations of the existing drugs have become known. Clinical trials all prove that AZT, ddI and ddC have an effect on slowing HIV disease — but that effect wears off. Many people who have chosen these drugs have exhausted the benefit they can get from them. One advance that went fairly unnoticed during that time was the significant benefit that some people get from using acyclovir.

The drugs which have been tested since these first generation drugs have mostly proved disappointing. Some of these drugs seemed to show no activity such as the TAT-gene inhibitor. Some seemed to have a high side effect profile — particularly rashes which meant the drug could no longer be taken. In some cases, the virus became resistant to the drug very quickly — in a matter of days in some instances.

The only hope seemed to be to find better combinations of existing drugs given early in the course of HIV disease — a strategy which makes some sense but will probably not benefit those of us who have used up our benefit

*Is it time to dust off those old slogans for treatments access again? Good news on the horizon at last?*

from the existing drugs.

Progress in finding better treatments became so slow that there became wide spread pessimism that there would ever be a way to more effectively treat HIV disease with anti-viral drugs. Other strategies, such as immune restoration therapies were focuses on. Now, a number of different small trials of newer anti-viral drugs and newer combinations are suggesting that it may be time to refocus on antiviral therapies and review our pessimism.

The most promising news relates to a class of drugs called proteinase inhibitors. These drugs attack an essential enzyme of HIV — one that HIV needs to manufacture its proteins. The results of first trials of a drug of this class, a proteinase inhibitor made by Roche called saquinavir, were reported on a year ago. These trials showed that there was some anti-HIV activity and that the drug was well tolerated. But, the amount of activity demonstrated didn't seem to be something to get really excited about, although larger trials are needed to quantify the effect. It was known that there might be problems in the 'bioavailability' of saquinavir (i.e. getting appropriate amounts of the drug to the sites where it is needed).

## Alternative Therapy Trial



We are looking for fifty individuals who have been clinically diagnosed as category four AIDS to trial alternative therapies — **COST FREE** —  
The trial is the first of its kind and the results will be presented at the 1995 World AIDS Congress in Africa  
If you are interested in taking part contact Jan on 361 6011 and leave your name, address and phone number.

A number of other companies have proteinase inhibitors, and over the last year some of them have commenced human trials. While these trials are mostly small safety trials, a number of reports are emerging of significant anti-viral effects from these drugs. It is likely that some of these drugs will go into much larger human trials in the next year.

As well as the proteinase inhibitors, there is good news about combinations involving AZT with 3TC, and, AZT with 3TC and alpha-APA. 3TC or lamivudine is an anti-viral of the same class as AZT. It has a good safety profile. Trials of 3TC alone did not show much anti-viral effect. However, laboratory work revealed a potentially important interaction between AZT and 3TC — 3TC seemed to have the potential to drive HIV to be more sensitive to AZT. Small European human trials confirm that this interaction may be significant. Alpha-APA (or loviride) is another drug that seems to work well with AZT, and there are small trials confirming the promise of this drug in combinations involving AZT (and 3TC).

While the news is only so far of small trials, it is a long time since early human trials of anti-viral treatments have shown very promising results. These treatments will now go into larger human trials, and Australia will be involved in them.

This raises a number of questions. Will the trials be established sufficiently quickly enough to maximise participation? Will the protocols of the trials of these promising drugs have criteria which exclude people who have previously used anti-viral drugs? Will there be access schemes for

those people who cannot participate on the trials? How soon should trials combining anti-viral therapy and immune therapy such as interleukin-2 be established?

All of these questions come at a time when AIDS activism around treatments has declined. It declined after the changes to drug approval mechanisms occurred. A significant victory had been won and there seemed to be nothing clear to fight for in the pipeline. If this promising news continues, there will be clear things to fight for. And if six years after the first demonstration in Australia for access to AZT the pipeline is indeed rusty then once again some outside pressure by us will be necessary to oil the pipe.

**INTERLEUKIN - 2**  
— FIRST INFUSIONS OCCUR  
THE MUCH PUBLICISED INTERLEUKIN-2 (IL-2) trial has commenced in Australia, with some people having been infused in the last few weeks. This is the first 'cytokine'

trial for HIV disease in Australia.

A characteristic of HIV disease is changes which occur in the 'cytokines' which regulate the immune system. Some cytokines appear in much greater levels, while the levels of others seems to decline. It may be possible, by artificially giving some of these cytokines, to alter the immune system in a helpful way.

US trials have demonstrated that IL-2 can cause large rises in the CD4 cell count of some people with HIV disease. In the US, most people have been 'infused' with IL-2 over 5-6 days every two months. The Australian trial, which lasts for 12 months, has three arms

*ARM 1:* 'infusion' or intravenous administration over 5-6 days every two months plus anti-viral therapy

*ARM 2:* PEG-IL2 by injection twice every 8 weeks plus anti-viral therapy

*ARM 3:* anti-viral therapy.

If you are on the intravenous arm, then you need to be monitored in hospital for at least the first two visits. There are many possible side effects from interleukin-2 infusion which necessitate close monitoring. The side effects include severe flu-like symptoms, diarrhoea and fluid retention.

A number of people have already enrolled in the trial which is limited to 120 places. This is the first trial to compare different types of IL-2 therapy to anti-viral therapy. It is only available to people with between 200-500 T-cells.

Concern has been expressed by people with lower T-cells about not being able to get on this trial. The US trials tend to show that response is less likely at lower T-cell counts, and that side effects are less able to be tolerated. A US trial is looking at IL-2 in people between 100-300 T-cells.

Once people on the trials have completed 12 months, they will be offered IL-2 free for at least 12



# HIV 'Healthy Living' project

## WHAT IS HEALTHY LIVING?

THIS IS A CONCEPT THAT COULD FILL an entire blackboard with many ideas whether they be medical drug therapies to spiritual well being. It's a very broad concept that is never too far from our thoughts.

There are certain lifestyle factors people see important in being healthy and also in maintaining their health, whether it be emotional support, physical health/exercise or nutrition, just to list a few. Often people want more information about these lifestyle factors and how they can use them to be more beneficial to their health. It can seem at times a very daunting task deciding either who or where to go for such information.

The Central Sydney Area Health Service incorporates most of the inner Western Suburbs

from Redfern and Marrickville to Strathfield and Drummoyne. This inner Western region has a large concentration of people living with HIV, second only to the Eastern Suburbs of Sydney. It also includes people living with HIV from varied ethnic backgrounds (both English and Non-English speaking), people of aboriginal descent and people living in public housing.

The *HIV Healthy Living Project* is a part-time project funded by the Central Sydney Area Health Service. It's three main objectives are:

**A** To investigate the healthy lifestyle needs of people living with HIV in the Central Sydney Area and their awareness of the existing services promoting healthy living;

**B** To increase the awareness of existing healthy living services provided by various Government and Non-government organisations for people living with HIV in the Central Sydney Area;

**C** To recommend new services that may be beneficial in maintaining and promoting healthy living for people living with HIV.

## HOW DOES ONE ACCOMPLISH THESE OBJECTIVES?

FIRSTLY, IT IS NECESSARY TO OBTAIN feedback from people living with HIV. This is being done through a healthy living questionnaire. The questionnaire aims to identify *the gaps* in existing healthy living services and provide information that will help improve these services or provide additional services.



### AREA-WIDE SERVICES

In-patient, out-patient,  
Day-only treatment  
and counselling:  
phone 350 2955  
HIV/STD screening  
and treatment, counselling,  
information and referral:  
phone 350 2742  
Hospice/respice care:  
phone 587 8333

### AROUND CANTERBURY

Clean fits, condoms, lube,  
information and referral:  
phone 016 288 504  
Home Nursing:  
phone 718 5305  
Drug and alcohol counselling:  
phone 787 3988

### AROUND SUTHERLAND

Clean fits, condoms, lube,  
information and referral:  
phone 018 277716  
Home nursing, clean linen,  
equipment loan:  
phone 350 2955  
Drug and alcohol counselling:  
phone 525 6055

### AROUND ST. GEORGE

Clean fits, condoms, lube,  
information and referral:  
phone 018 479 201  
Home nursing, clean linen,  
equipment loan:  
phone 350 2955  
Drug and alcohol counselling:  
phone 350 2944

You don't have to travel to the city for HIV/AIDS care. Call us.

Secondly an information leaflet will be prepared that will outline and promote the healthy living services available to people living with HIV in the Central Sydney Area.

Healthy Living is such a personal concept and to every person it can mean something different. It is especially important to people living with HIV to maintain an optimal state of health though this depends on what lifestyle factors one sees as important in maintaining health. It is also very important for healthy living services to exist enabling people living with HIV to access and use these services as a resource. A Healthy Living Service that creates positive attitudes, communication and networking provides a very beneficial environment in which to help an individual.

Certainly, the most important thing we can do is to empower ourselves with knowledge and the ability to make choices.

If you live or use services in the inner west of Sydney and would like to assist by completing a questionnaire please don't hesitate to contact David Murray on Ph: 560 3057, fax: 568 3338.

Questionnaires are available from PLWHA, Suite 5, 1st Floor, 94 Oxford Street, Darlinghurst NSW 2010.

— David Murray

## Im mobile!

HOW MANY OF US WISH WE COULD say that, yes, we're mobile. I'm not just talking about those who physically can't get around much anymore, but also those who can't afford to.

The Department of Social Security have a scheme in place called the Mobility Allowance — you have probably never heard of it, most of us haven't.

The DSS states that Mobility Allowance is paid to people with disabilities who can't use public transport without a lot of help. Mobility allowance provides assistance with the extra costs of travel.

To be eligible for the scheme you have to be receiving a Disability Support Pension, other DSS allowance or benefit.

You will need proof from your doctor stating your physical limitations and you must be doing paid or voluntary work or some training for at least eight hours each week.

To apply for the scheme you fill in the claim form, along with your doctor's report called a Mobility Allowance Medical Assessment (both forms are available from your local DSS office) take them or send

them to your DSS office with proof of your identity and a letter outlining the work or training from the organisation that you do it with.

Mobility Allowance is \$55.50 per fortnight and increases every January as the cost of living goes up. The allowance is not income or assets tested and is paid in addition to your Disability Support Pension or other DSS benefits. You will not be eligible if you have received a sales tax exemption on your car in the last two years.

It's paid every second Thursday into the same bank, building society or credit union as your other benefits. In some instances if you are getting Mobility Allowance you can get a six months' payment in advance, you can enquire about this at your DSS office or by telephoning 13-2468 for the cost of a local call anywhere in Australia.

Eligibility for payment is reviewed yearly. It's also reviewed if your circumstances change i.e. you go back to part-time or full-time work where you are over the income threshold for DSS benefits or if you stop your regular eight hour volunteer, paid work or training program. As with any DSS payment you have to let them know when your situation changes.

For more information about this scheme telephone 13-2468, or for information in other languages call 13-1202.

— Stephen Gallager

### Not positive about cooking?



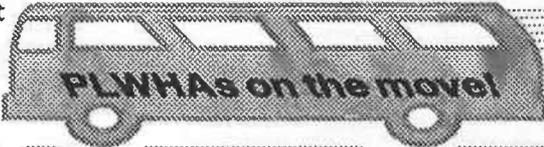
If you're not confident about cooking, or find it difficult to cook foods suitable for your modified diet, then come and join us - The Albion Street Centre Nutrition Unit is conducting cooking classes for HIV+ people, their carers and friends

Where? The Albion Street Annex, Crown St, Surry Hills

When? 6th September, for six weeks, 6-8pm

Cost? \$30 for the six week course

How? Ring Caroline or Hilda at Albion Street on 332 1090



**OPEN FORUM**  
**Advanced Directives**  
 Treatment Directives Living Wills Getting your affairs In Order

Solicitor Chris Ward and a local GP will be on hand to answer your questions  
 A small group exercise will be held to look at issues  
 Drinks and nibbles will be provided  
 Enquiries: Phone PLWHA on 361 6011

2-4pm  
 Saturday  
 September 10

Venue: PLWHA Office, 94 Oxford St, Darlinghurst  
*(ring buzzer)*

# Using Anti-discrimination laws fruitfully

THERE HAVE BEEN A COUPLE OF occasions in the last few months where some knowledge of our Anti-Discrimination Legislation in NSW has been very helpful.

I was present one evening at a fundraising function for PLWA'S at a dinner-theatre combine. There was a basically good humoured crowd present, ready and willing to take the usual fare offered on these occasions. However, by the time the interval had arrived, I found myself, and others like me and near me, quite angered by the wit of one of the comedians. One is always ready for some bawdiness in circumstances such as these, and while that was there, and was in fact expectantly vulgar according to my discriminating taste, it was not the bawdiness that offended but the racism displayed in the formwork that supported the act.

I left the auditorium and sought out the duty manager who was effectively protected from marauders like me. I voiced the nature of my complaints, but, confronted with deference almost rampant, and smiles spread as a protecting shield, I fled outside and brooded in palpable silence.

Managerial deputies had promised me a phone call on the next day. Foolishly, I hung around waiting and when another night brought not balm, I rang the theatre for an interview. It took me several days, urged on by the scriptural imperative to knock at the door, believing that justice would not bring him out, perseverance from a persistent pest would.

When he was finally corralled, I had calmed down to a point of being all sense and reason. To my surprise, and obviously to his, I did not rant and rave but asked

him whether or not he was aware that one of the acts and actors came perilously close, in my mind, to breaking the law of vilification, and inciting contempt about some persons who were very much racially different and were an exposed minority. In the days when I was waiting to speak to the manager, I found that a number of gay persons who were in the audience had allowed themselves to be offended and this was even more apparent with those who were also from a region with a language other than English.

The manager was genuinely surprised that umbrage had been taken and that the law may have been dented if not broken. We had a few pleasant minutes on the phone at the end of which, he asked me how he could find out about such laws, promised to have the act cleaned up, and offered to refund any money that might have been spent on an unpleasant evening.

The second incident happened to me in a major public hospital on the south side of Sydney. I had been admitted through casualty at about 4.00 am, pained by unstable angina. I was well looked after and soon found myself parallel parked in the busy acute coronary-care ward. The next bed was curtained for some pretence at visual privacy but there was no way that the conversation between the old male patient and one of the Residents could be ignored.

The hospital was doing its best to tell the old man that he needed surgery very soon. Among other preparations, the hospital required not only his consent for the surgery in a few hours time but for an HIV test. A form was waved before him, but there was no way he could have seen or appreciated

the notes spelt out on its obverse side. My angina had subsided but my adrenals were running and my alertness was acute. I listened in vain for the pre-test counselling. I could scarcely contain myself when the Resident had gone with his duly signed consents. When dawn arrived, I decided to get some other light on the scene by asking for a copy of the HIV Request Form.

It was nearly enough to cause my angina to become unstable and when I was transferred to my third bed in the hospital within six or seven hours, I eventually was able to examine the Document in detail. The final lines told me that I should contact the Social Worker should there be any queries. I did so; was met with intelligent questioning, and a carefully worded statement that the Document might well be seen as deficient. Both of us recognised that neither was in a position to scream: Unlawful! but there was cause to pause.

The Social Worker recommended that when I was better, I should write to the Hospital Manager with the precis of my disquiet. This I did, querying line after line, inviting discussion, recommending an approach to the Anti-Discrimination board about legality and accuracy. I received a prompt and courteous reply saying that the matter had been referred to the appropriate Director of Nursing. In due course, I received a letter dealing with each one of my points. I was not wholly satisfied but unfortunately, by now I had been in two other hospitals, had cardiac angioplasty, and had my computer stolen from my room. Like many half addled with concern about health rather than efficien-

cy, I had not backed up and have no record of the three typed pages of comments that I had sent to

the hospital. I do remember that I asked them for a copy of the new consent form which I presumed they would make. So far, nothing has arrived, and when I get the chance I will go back and persist a little more.

I quote both of these incidents to indicate that people are being treated unfairly in many ways that the law in fact covers. However, it is not the primary task of the Anti-Discrimination Board to wield a big stick. The Board does help to make the law, it does help to see that the law is observed, and the task is done in many ways. The first way is to inform citizens through Fact Sheets of what our rights and obligations are. The aim is to allow us, being now well informed, to talk the matter over with those whom we think are not doing the right thing. Should our own personal efforts be impractical or unsuccessful, the Board has means and mechanisms to go further. Only as a last resort, does a complaint come to court of some kind, and as the reports given to the Attorney General show, this method of conciliation works wonders.

Should you like some Fact Sheets or any other documentation about how or why the Board does things, please phone. They have a whole team ready, willing, and able to help you.

**— Hugh Murray**  
Member of the NSW Anti-Discrimination Board

### THE ANTI-DISCRIMINATION COMPLAINTS PROCESS\*

IF SOMEONE BELIEVES THEY HAVE been unlawfully discriminated against they can lodge a complaint with us at the Anti-Discrimination Board of NSW. We must then investigate it and, if the discrimination appears to be against the

# NSW Anti-Discrimination Board HQ

3 1 8 5 4 0 0



Newcastle  
(049) 26 4300

Woollongong  
(042) 26 9353



crimination Act. This means that we can only deal with a discrimination

law, we can attempt to 'conciliate' it — that is, help the person who complained and the employer or owner of the place of employment they're complaining about reach a *private* and *confidential* settlement. The settlement will depend on the circumstances of the case. It could be one or any combination of the following:

- ⚖ An apology;
- ⚖ That the employer pays financial compensation to the person who complained;
- ⚖ That the person is considered for a job;
- ⚖ That the person is reinstated;
- ⚖ That your employment procedures are changed;
- ⚖ That an education program is run in your workplace to ensure that people aren't discriminated against in future; and so on.

Most complaints are conciliated. If a complaint can't be conciliated, it is possible for the person who complained to go to the Equal Opportunity Tribunal — a court that provides a legal judgment that must be followed.

It is against the law for anyone to hassle or victimise someone, in any way, for making a complaint to the board — even if their complaint turns out to be unfounded.

### WHAT TYPE OF DISCRIMINATION CAN WE DEAL WITH?\*

THE NSW ANTI-DISCRIMINATION Board can only deal with discrimination complaints that are covered by the NSW Anti-Dis-

crimination Act. This means that we can only deal with a discrimination

complaint if:  
⚖ It is based on any of the grounds and it happens in one of the areas of *public* life listed below. Or;

⚖ It is vilification on the basis of someones race, homosexuality or HIV/AIDS status. That is, a public act of incitement to hatred, serious contempt or severe ridicule.

The laws do *not* allow us to deal with discrimination complaints based on other grounds such as religion or political conviction).

### GROUND FOR DISCRIMINATION COMPLAINT\*\*

- ⚖ Sex (including sexual harassment and pregnancy)
- ⚖ Race (including colour, ethnic or national identity/background)
- ⚖ Marital Status
- ⚖ Homosexuality (male or female, actual or presumed)
- ⚖ Age
- ⚖ Physical Impairment
- ⚖ Intellectual Impairment

### AREAS COVERED BY LAW\*\*

- ⚖ Employment
  - ⚖ State education
  - ⚖ Obtaining goods and services (eg advertising, access to public places, entertainment, government or professional services)
  - ⚖ Accomodation
  - ⚖ Registered clubs
- (N.B. Religious institutions are exempt)

\*Taken from Paper for AJC Conference, by Anthea Lowe, Director, Information Services, Anti-Discrimination Board of NSW, 20 & 21 July, 1992, Sydney.

\*\*Edited from an article in *Equal Time*, the quarterly newsletter of the Anti-Discrimination Board of NSW.

# Gloria's Food



## Supplement it!

LAST AUGUST *TALKABOUT* RAN AN article just prior to the opening of the Supplement Centre. Well folks the Supplement Centre is now well and truly open and has been very popular providing cheap supplements to all. At the same time Fiona Dangerfield, a student dietitian, did a survey of supplement use in the Eastern Sydney Area Health Service (ESAHS), you might have been part of that survey. The study showed that 50% of respondents (total 63 people) were currently using supplements. 35% were buying them at ACON (PLWHA service not available at the time of the survey.) Nutrition supplements were considered important by people even though they were a significant cost. The Supplement Centre is a way of keeping the costs down.

If you haven't been to the centre and were wondering how to go about it here is a follow up article to help you on your way.

Firstly you need a script from your friendly practitioner. This to help you with the myriad of choices. Your practitioner should be familiar with the supplements and help determine the most appropriate range for you. The script is current for six months.

If you are eating well and just want a little extra you can try a general milk based supplement. eg *Sustagen Gold, Hospital Sustagen*. You could even make your own. See recipe next page.

If you have lactose intolerance ie. bloating, cramping after milk consumption then adding extra milk powder is not a good idea. It will exacerbate the problem.

*Lactaid* drops, available from chemists, can be added to milk drinks to break down the lactose. Otherwise you can use a lactose free product. eg *Ensure, Digestelact, Balance*. *Balance* is an ordinary milk with the lactose broken down. You can find it with the UHT milks at *Coles Supermarkets*. Otherwise ask your local supermarket to get it in.

Fat reabsorption requires a different modification. If you have chronic diarrhoea it is harder for your body to break down fat. This is where the magic word MCT comes into its own. Instead of fat being in its usual long chain form it has been converted into medium length chains — Medium Chain Triglycerides for the scientifically minded. Your body can easily absorb these even in the presence of diarrhoea. Because the company has done the work these feeds are more expensive. There is no point in having them if you don't need them. Examples include *MCTE028, Lipisorb* and *Portagen*. *Portagen* is available on script — so can be a lot cheaper for people on pensions.

Carbohydrate only supplements are an easy way of adding the calories of sugar without the sweetness. You can mix them with fruit juice, milk and moist foods such as soups or stews. eg. *Polycose, Polyjoule*. Protein supplements can be used in the same way. eg. *Pro-mod*.

Sometimes people reach a point where it becomes extremely difficult to eat enough, due to

decreased appetite, nausea, diarrhoea etc. This is the time to consider a supplement as the main part of the diet and the food as an added bonus. At this stage a complete supplement is necessary. Complete means there are enough of all the nutrients in the right amounts so that you could live entirely on the feed alone. In fact

### CHEAPER SUPPLEMENTS — FROM PLWHA!

The PLWHA Nutritional Supplement Service (NSS) sells a wide range of nutritional supplements such as *Ensure Powder, Fortisip, Endura Opti* etc. at near cost price. The only requirement for purchase is that your health care provider, including your GP, dietitian, naturopath or homoeopath complete the appropriate script. While a copy of the script has been sent to most of the AZT prescribers and other health providers within NSW, you can pick one up from the PLWHA office or they are happy to post or fax one out.

This service works in a similar way to the ACON Vitamin Service and operates Monday to Friday, 10.00am to 6pm daily. It is located in the PLWHA office, suite 5, level 1, 94 Oxford Street Darlinghurst and accepts *Bankcard, Mastercard, Visa*, cash and cheques with I.D.

The NSS is staffed almost entirely by volunteers. So, if you have a couple of hours to spare, please let them know.

Further information from  
PLWHA on 361 6023

many people do, for example people who can no longer swallow may be on a supplement for many years. Examples include *Ensure*, *Lipisorb*, *Fortisip*. With

your intake taken care you can eat as much or as little as you want.

Sometimes even drinking the necessary amounts of supplement required becomes too much. Another shift in feed supplement is to nasogastric feeding. Nasogastric feeding is exactly what it says. Feed goes in through a tube from the nose (naso) to the stomach (gastric). This can be run either

continuously or just overnight while you are asleep. Imagine having consumed the same calories as a full roast dinner and pudding while you are asleep. No mess, no washing up! The tube can be taken out during the day and you can eat or drink as desired.

Traditionally nasogastric feeding required hospitalisation for tube insertion and learning.

# Recipe

**1 kilogram milk powder (skim or whole milk)**  
**\* 1 cup sugar \* 1 cup powdered chocolate flavouring**

**To make up, add about half a cup of powder to 2 cups of water \* Vary the amount of water, powder, flavour and sugar to your own taste**

Albion Street is now starting to nasogastric feed appropriate clients. Over several day visits you can learn all you need to know to feed at home. You then feed overnight and

have the full backup support and follow up at the centre.

The supplement centre has a full handout of all the feeds available. This information is summarised in the table below. Read the handout for more detail. The supplement centre is fulfilling a great need. Well done to every one involved.

— Hilda High

 Supplement	Lactose free	MCT oil	Low fat	Sweet	Savory	Citrus	Unflavoured	Cal/ml	Suitable diarrhoea
<b>Carbohydrate only (powders)</b>									
Polyose	✓						✓	41g	✓
Polyoule	✓						✓	41g	✓
<b>Carbohydrate only (liquids)</b>									
Nutrical	✓			✓		✓		2.4	✓
<b>Protein only (powders)</b>									
Promod	✓						✓	51g	✓
<b>Weight gain (powders)</b>									
Sustagen Hospital Formula			✓	✓				1.0	
Endura Opti	✓	✓	✓						
<b>Weight gain (drinks)</b>									
Sustagen Gold				✓				1.1	
<b>Weight gain (foods)</b>									
Ensure Puddings				✓				17/g	
Sustagen Instant Puddings				✓				17/g	
Sustacal Puddings			✓	✓				2/g	
<b>Complete Nutrition (powders)</b>									
Ensure Powder	✓			✓				1.0	
<b>Complete Nutrition (liquids)</b>									
Fortisip	✓		✓	✓	✓	✓		1.5	✓
Ensure Plus	✓			✓	✓			1.5	
Sustain				✓				1.12	
<b>Fat Modified Complete Nutrition (powders)</b>									
Lipisorb	✓	✓	✓	✓				1.0	✓
MCT Elemental 028 Extra	✓	✓				✓	✓	0.8	✓
<b>Elemental Complete Nutrition (powders)</b>									
Vital	✓	✓	✓	✓				1.0	✓

If you're a positive woman and you're interested in receiving occasional information, social news, invites and medical updates — especially for women — then call **Vivienne Munro**, at ACON's HIV Support Project on 206 2012 to join the mailing list

**INVITATION**  
**FREE LUNCH**  
 for people living with and affected by HIV/AIDS  
 Every Monday  
 Doors open at noon  
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**THE LIZARD LOUNGE**  
**EXCHANGE HOTEL**

I'VE ALWAYS BEEN A FORGIVING person and rarely remain angry for any length of time. Except for one ex-flatmate who shall remain nameless, never share with a Virgo and never go out with a barman and if the barman you happen to be going out with is a Virgo forget it — you'll be lucky if you survive the experience. So, after discussing with David the possible consequence of his actions and offering some friendly advice we parted. I went home to have a good long cry and take out my unexpressed anger on my flatmates (fortunately close friends) and then proceeded to let go of the whole horrible affair, to forgive and forget. The forgetting part is always difficult for me. I had a strong feeling I would not ever hear from David again.

So life continued and for two months I neither saw or heard from David. Life was blissful and peaceful and through a long struggle I was finally coming to terms with my HIV status. I was not going to die in the next week, I was healthy and generally happy, I had a great job and career and wonderful friends — what more could a boy want.

Ring, Ring, "Good Afternoon Paul Chippendale".

"Yeah, um hi Paul, this is David, ah. . . we meet about two months ago, do you remember?"

"Yes. . . I'm not likely to

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- ◆ epidemiology
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HAI

### Australian Volunteers Abroad

**To Tell or Not To Tell?**  
*In June Talkabout's feature To Tell or Not To Tell — part 2 There's The Rub we heard the flip side to disclosure. The Catch-22 of 'if you tell you're damned and if you don't you're damned as well.' Paul Chippendale described his experience of waking up to unwanted, and unsafe, sex. Here, he tells us what happened next*

forget. How can I help you David?" — In my most professional tone.

"I went and had the test last week and got the results today".

"Yeess. . ."

"I have AIDS".

I closed my eyes and before me appeared a gaping black vortex that started to suck me into it. *No No No* I mentally screamed. I've been there, I've fought my way out, this can't happen.

"Paul are you there?"

"Yeah".

"I also found out the other day that my ex-boyfriend has just being diagnosed positive, so I don't think I got it from you".

"So why did you ring me?"

"Because I need someone to talk to, someone who would understand".

This guy certainly knows how to get to me. I'm a sucker for helping people and have spent a

lifetime perfecting the art. I really should be a social worker so that I could display my 'Pearls' for real.

"OK, lets meet for coffee and a big slice of chocolate mud cake".

We made arrangements to meet that evening. Boy was I in for a long session of educating this young man. We meet and not being one for small talk I got straight to the point and we discussed a whole range of issues from HIV vs AIDS, to being dumped by the latest boyfriend just because they couldn't cope with a HIV positive person. I explained what it meant to have sero-converted and we talked about life-expectancy, about telling friends and family. It seemed we covered a great deal of ground. By the end of it all I couldn't help liking the guy. As a result of all this we became close friends and see each other regularly — a little mutual support society (pearls and all).

## Review



# *Savage Nights*

***This is not an advertisement for the Health Department***  
by Andrew Thomas Clark

DESCRIBED AS the "James Dean of the nineties", the late Cyril Collard was inspiringly moral. *Savage Nights* moralism is impregnated by an intense pathology of apathy, and a glossary of reckless loneliness.

Looking at the project in its entirety, I would say that Collard was more a Judy

Chicago than a James Dean. His acting I agree with Simon Hunt's review (*SSO* 1/7/94), was not Collard's outstanding feature. His 'in your face' honesty was however, the genius which could possibly make Collard the world's most inspiring HIV artist.

This is not a nice film like *Philadelphia*. Collard asserts that it was not an advertisement for the Health Department. It will however surpass the quagmire of American ideologically sound films in filmic significance. Collard exposes his bisexual experiences and questions his needs from the two genders. Judgement of responsibility is also questioned in HIV unsafe sex practices, leaving



*Jean, Laura et Samy au Les Nuits Fauves*

us to ask, was he a monster, or was he pathetically human?

Judging this film in terms of Postmodernism, the queer debate, and gay activism would be absurd. Collard is not asserting bisexual rights in his artistic agenda. His sense of irony deruses any faith of identity. And Sean Slavin's review (*Capital Q*) was, as he even admitted polluted by peer pressure. The rhetoric that artists must submit to 'positive images' unquestioningly. The accusation from Slavin that Collard was trying to "transcend" his moral responsibility epitomises the tyranny of liberal reviewers who fail to understand the moral of 'in your face' honesty.

Jean, played by Collard himself

was a thirty year old bisexual from hell. He was not particularly likeable character. But as Collard's assistant Corine Blue, said to *Campion Decent* (*SSO* 17/6/94), "Collard didn't trust those who try to be likeable". Flying along the freeway in his convertible between Laura (Romane Bohringer): a naive and histrionic art student, and Sami (Carlos Lopez), a hunky air head rugby player from

Spain, couldn't you just throttle Jean's neck? Yet this is Collard's own story.

Jean discovers that he is "unable to love". Ever had that feeling? Really? Single, HIV and unable to make long commitments (death is not far), love commitment becomes a foreign concept to a bisexual living in denial.

His indecision was infuriating in his flimsy life on the jagged edge. As he said in the film: "Sometimes I'll do anything to forget I'm wasting away". This was not just denial to himself and deceit to others. This was a camp survivalist plea. Does this all sound familiar? Come on — think!

Laura becomes obsessed with

Jean. He had unsafe sex with her before telling her he was positive. She was at first outraged. Then she resigned herself to her obsession, which does not allow for condoms to go between herself and her beloved Jean.

The interesting observation of this experience is watching the actual cinematic audience reaction: the tension. I researched this as I did with Passolini's *Salo*. In *Salo*, the audience could watch violent body mutilation, paedrist attacks and rape, but the bulk of the people left when on the film, the children had to eat turds. Equally bizarre was the audience reaction to *Savage Nights* tolerating unsafe sexual practices in gay beats, but could not tolerate unsafe sex with women.

Collard was onto this in Jean talking to his mother. This is the scene where the mother knowing Jean's HIV status, does not approve of him having a girlfriend. Jean then asks if that meant that it was now OK to be gay. Must he be gay now because he is HIV? Why are there more concerns for straight women seroconverting than for gay men? Do people have double standards?

Simon Whatney hated this film accusing Collard of depicting gays as "freakish monsters". But *Savage Nights* is not a gay film. The S&M scenes I would not call freakish. The trannies I would not call monsters. The roguish characters we know are real.

The SBS Television's *Movie Show* also gave Collard the thumbs down. The liberals are threatened by fluidity. They pretend that they can't relate to these characters who they do not like. But who would dare to deny their reality?

In the spirit of founding PLWA (years ago) which demands that we are in your face, therefore you better listen to us and not just talk about us, we cannot dismiss a HIV artist as Collard for breaking rules. In everyday life, we know that we must never be constrained simply in fear of stereotypes. This film is simply a pathology of apathy non of us can transcend.

## JOIN US IN THE FIGHT AGAINST AIDS SUBSCRIBE NOW

PLWHA Inc. (NSW) is part of a world-wide movement to empower people with HIV infection, their friends, supporters, family and lovers to live full, creative and meaningful lives free from fear, ignorance and prejudice.

Help yourself and others affected by HIV to create a positive, friendly and supportive environment in which we can all live with HIV & AIDS — join PLWHA.

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# **HIV living**

## **opportunistic infections**

**wednesday 3 august 6.30pm to 9.00pm**

- what is an opportunistic infection?
- can they be prevented?
- can they be treated or cured?

## **complementary therapies**

**wednesday 10 august 6.30pm to 9.00pm**

- what therapies work?
- what evidence is there?
- how can I find a practitioner?

## **chinese medicine**

**wednesday 17 august 6.30pm to 9.00pm**

- how is chinese medicine different to western medicine?
- what role does acupuncture play in hiv treatment?
- what evidence is there to support tcm?

## **stress, fatigue & sleep**

**wednesday 24 august 6.30pm to 9.00pm**

- to be confirmed please check sso or call the hiv support project

## **HIV drug trials**

**wednesday 31 august 6.30pm to 9.00pm**

- what's new?
- what looks promising?

AIDS Council of NSW  
Ground Floor  
188 Goulburn Street  
Darlinghurst NSW 2010

for further information call (02) 206-2011

**these free sessions are organised by hiv positive people for  
hiv positive people, but anyone is welcome - just turn up  
the only silly question is the one you don't ask**