

No. 48 October 1994

Talkabout

The Newsletter of People Living With HIV/AIDS Inc NSW

◆ Where We Speak for Ourselves ◆



Many directions,  five art

PLWHA News



LATE SEPTEMBER SAW AN AGM FOR PLWH/A, the first for eighteen months as they switch to a new, financial-year driven, calendar.

In the introduction to the PLWH/A Annual Report (copies available from PLWH/A), Convenor Alan Brotherton described the past period as one of, "continuing growth for the organisation", with 152 new members and nearly 1,000 *Talkabout* subscribers. But it has also been a period of loss, he said, "for all of us personally, and for the PLWH/A movement." Many made major contributions to the organisation and *Talkabout* and Brotherton pointed out that it is despite "this constant loss and disruption that we have tried to build a stronger, more sustainable organisation."

Among the activities he singled out was what he described as, "one of the most significant and exciting events in the history of PLWH/A NSW" — the establishment of the Positive Speaker's Bureau. Interest has been strong, even though it is yet to be formally launched, with around 1,000 having heard a Positive Speaker. (The project will be the subject of a feature in December *Talkabout*).

The Nutritional Supplement Service was also established in the past period. It now has 126 regular clients and steady sales. A similar number to those assisted through referral and personal advocacy — 168. Support for complementary therapies from PLWH/A help secure funding for the *With Complements* newsletter.

And the development of a rural policy saw active assistance in resolving difficulties outside Sydney. Lobbying and raising the organisation's profile has continued to be a particular focus. PLWH/A played a major role in securing HIV anti-vilification legislation last May.

"We have a sound base from which to move forward," says Brotherton. "And hope that others will join us in meeting this challenge."

Elected to committee at the AGM were: Alan Brotherton (Convenor); Steven Ford (Deputy Convenor); Robert van Maanen (Secretary); Bill Rigney; Larry Wellings; Adam Davis; Peter Hornby; Vivienne Munroe. The Treasurer's position is vacant.

HIV living

information forums

meditation

wednesday 12 oct 6.30pm to 9.00pm

- does meditation slow progress to AIDS?
- how to choose the type of meditation for you
- where do I go to learn how to meditate?

naturopathy

wednesday 27 oct 6.30pm to 9.00pm

- what is naturopathy?
- how does it differ from orthodox medicine?
- what proven benefits are there in treating HIV?

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

A C O N

AIDS Council of New South Wales Inc.

188 Goulburn Street
Darlinghurst NSW 2010

for further information call (02) 206 2011

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This Month's Cover

Kathy Triffitt's self-imaging photography project led to this PWA's highly visual statement. More on page 23.

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
OCTOBER 21

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

Positive Asians

SUPPORTING POSITIVE ASIANS (SPA) is a new volunteer organisation set up in the middle of this year to address the needs of Asians who are HIV Positive.

SPA is currently working to organise practical support like provision of transportation, interpreters, domestic assistance and hospital visits for Positive Asians, provide emotional support and perhaps financial assistance.

They fill a gap that other HIV/AIDS organisations have been unable to fill for various reasons.

The Asian community generally lacks understanding and awareness of HIV/AIDS, according to SPA. Misconceptions about HIV/AIDS still abound. This makes it difficult for Positive Asians who fear that knowledge of the positive status will result in they and their family being ostracised by their community. These fears push them into isolation.

Positive Asians have special needs. For example, they may need

culturally appropriate and sensitive information and advice about HIV/AIDS, or are seeking doctors who understand their needs.

SPA hopes to help minimise the adverse impact of HIV infection on Positive Asians, and more importantly, foster and promote the principles of empowerment and personal responsibility for HIV Positive Asians. SPA aims to help all Positive Asians, regardless of sexuality and welcomes volunteers, men and women, to get involved in its activities.

To obtain more information about SPA and its activities call (02) 206 2036 between 10am and 5pm (Mon-Fri). If the telephone is unattended, please leave a message on the answering machine and they will get back to you. Alternatively, you can write, c/- The Ethnic Project, ACON, PoBox 350, Darlinghurst, NSW 2010.

Home test?

HOME-TESTING KITS LOOK TO BE going onto the American market sometime soon, supported by, amongst others, the National Minority AIDS Council (a voice for black PWAs) who cite the low-cost/easy access argument. In Australia the kits are under discussion but questions of support counselling, the test's reliability and the involvement of doctors have meant that "it's not going to be rushed" according to ACON's HIV Support.

1,000 Trees

DESPITE A LACK OF recognition by the official AIDS organisations in Sydney, the second tree planting for the HIV/AIDS Memorial Grove added another 300 young trees to the existing 700 in Sydney Park at St Peters.

Over eighty friends, partners and relatives of people who have died from AIDS did the second planting. They came from many suburbs to Sydney Park, four kilometres from the centre of the City, to share in a practical act of remembrance. By request, a tree was planted for a gay man who had died from AIDS in North West Tasmania.



Blessing ceremony Sydney AIDS Grove tree planting. Photo: Kendall Lovett

Mother Abyss of the Order of Perpetual Indulgence, assisted by Sr Carmen Get It, conducted a tree blessing ceremony with incense — explaining that traditionally incense is made from scented tree resins.

During the day several suggestions of flowers which could be considered suitable as a memorial symbol of AIDS were made. These included the banksia (serata) because it symbolises hardiness in a hostile environment; the kangaroo paw because it appears to be reaching out a hand of care and remembrance; the rose because it symbolises love; the carnation because its blooms are variegated or in plain colours. (ACT UP Sydney used white ones significantly at one of its demonstrations).

The stories of two banners displayed at the planting site were also available for people to read. One of these, *Stonewall 25 — affirming the human rights of lesbians and gays internationally*, carried in this year's Stonewall Commemorative Street March in Sydney. The other, *AIDS Action Committee — an initiative of the Sydney Gay Communities*, dates back to May/June 1983 and was the banner of the very first community-based AIDS group formed in Australia and forerunner of all government-funded AIDS

JUST AROUND THE CORNER JUST DOWN THE STREET

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— Kendall Lovett

Oh la la!

PAYING A FLYING VISIT TO SYDNEY IN September was Luc Montagnier, the world renowned French researcher who discovered HIV.

Montagnier opened his UNSW speech by noting the contribution of the "patient participant" in the fight against AIDS and concluded by pointing towards a four-pronged strategy — *Towards a Global Therapeutic Approach*: Antivirals (to attack the virus directly); Antibiotics (to fight opportunistic agents); Antioxidants (to combat oxidative stress); Restoration of the cytokine network.

New research suggests *Mycoplasma penetrans* is a HIV disease co-factor. And antioxidants may have a role in reducing cellular damage caused by free oxygen radicals. Montagnier is trialling several but warns PLWHAs taking vitamins C and E, "in a very blind fashion" that studies are incomplete on which antioxidant would be most appropriate. Speaking to the *Sydney Morning Herald* Professor Ron Penny said that dosing up on antioxidant vitamins had the potential to do harm.

Quote of the talk was Montagnier's winding up: "HIV-1 is well adapted to the human host."

In other treatment news: San Francisco researchers have found that 90% of itchy skin problems associated with HIV are not directly caused by the virus. They recommend a trip to a dermatologist but warn that several visits may be necessary before an effective treatment is found. And an American study has, perhaps not surprisingly, proved that regular sex leads to higher T-cell counts and longer lives. Sex was found to counter stress which damages the immune system.

Dentist Beat up?

NEW EVIDENCE IN THE 'CAUSE CELEBRE' case of the Florida dentist sued for allegedly passing on HIV to four of his patients (including Kimberley Bergalis) has suggested chief investigator, the Centres for Disease Control (CDC), selectively released data to the media.

Spin Magazine reports, two years

'You Are Obligated To Tell Us About Any Communicable Disease You Might Have' reads the — illegal? — sign in Kiwi Kim's Celtic Dragon tattoo parlour in Newtown. But Kim's were merely "following Health Department regulations!" in putting it up counters Kiwi Kim herself.

'Bureaucratic' which, she claimed, states that, "people with communicable

diseases should not come into a studio like this and demand to be tattooed."

"People who know they are [HIV+] always tell us," is how she spots the invisible.

"But the service we're providing is not essential anyway and we have the right to refuse anyone. We refuse people who are drunk or out of it or people who just looks unhealthy. HIV+ people are going to have problems with the tattoo healing anyway. They don't mind. They really don't mind."

Talkabout: So, if a HIV+ person asked for a tattoo you would refuse because they're HIV+? Kim:

"That's right." Talkabout: Do you realise that could be illegal? Kim: "No it's not.

We could prick ourselves with the needle, why should we do that? I've got a five-year old child. I don't want him to grow up without a mother. I'm sure most tattooists wouldn't do them. We don't really want to endanger ourselves."

Oxford St tattooist Happy, who describes himself as straight but gay-friendly, said that, "As long as every studio carries 100% hygiene and sterilisation methods there's no problem whatsoever. It's not the HIV virus, it's homophobia.

Everything's disposable. The majority of tattooists are like a biker-image. If they know you're gay they'll either kick you out the shop or double the price."

Another tattooist told Talkabout, "we've no hang-ups here, everything's disposable," and said that he'd be most worried about hepatitis B.

"On the face of it" the sign is illegal under Federal disability law says the Human Rights & Equal Opportunities Commission, their spokeswoman adding that "doctors aren't allowed to ask for HIV status in hospitals."

ACON's Geoffrey Bloom agrees: "There's a case to answer."

Ross O'Donoghue of the NSW Health Department counters Kim's daim of bureaucratic direction saying, "They might be using it as a convenient excuse. The revision of the Skin Penetration Act in 1991 was to allow PLWHAs to have procedures that penetrate the skin. It's the safe procedures that protect, not trying to guess peoples status.

Businesses have a right to refuse service — but not unlawfully." He said that a current review of the guidelines was looking more closely at their implementation.

after the case and with no plausible explanation yet advanced for the virus' transmission, that internal documents, obtained under freedom of information, show that Bergalis and the other patients had additional risks. In particular that, despite Bergalis' attempts to limit investigation of 'other risk factors', a gynaecological exam ordered by the dentists lawyer found human *pailloma* virus type 18, a strain known to be sexually transmitted and highly associated with HIV in gay/bisexual men. The CDC record is that Bergalis had had no sexual contacts and concludes, "We believe that Bergalis is concerned that, if she tells us her risk, her mother

would find out." Leaked files showed undisclosed risks with other patients.

Out-of-court settlements in the case were believed to have been in the millions of dollars. In its aftermath calls for lucrative mass health worker/patient HIV testing mounted.

Media interest in the story continues with recently published stories claiming that the dentist was "more than likely a serial killer who intentionally infected his patients." (*Four Corners* carried a BBC/local angle piece, *The Deadly Drill*, last August described as "hysterical" by some gay and HIV/AIDS media commentators at the time).



Photo: Carl Ambrose

Notices

Back Copies If you have any back copies of *Talkabout* that you're thinking about throwing out — *think again!* We can put them to good use! Either send them to us, drop them in or give us a ring (on 361 6750) so something can be organised. Cheers!

Next issue Birthday! Now we are six, and anyone with happy (or other!) memories of *Talkabout* over the last few years is invited

to contribute. Phone Paul on 361 6750 for more info.

Contacts Because of space problems the contacts listings will not be run in this month's *Talkabout*. The listings will return in the November edition.

The Tribute to Darren Reys AuYoung will be published in the November issue of *Talkabout*.

Celebrate Wayne Wright's fourth anniversary of ordination and remember PLWHAs at 69/219 Cope St, Waterloo, Sunday November 27 from midday. More info from 699 1179.

National conference

THE FIFTH NATIONAL CONFERENCE OF People with HIV/AIDS at the Koala Hotel, Sydney, October 21-23, has announced its workshop schedule.

The twenty workshops cover most topics of interest to PLWHAs with a primary focus on treatments, and they include a nationally and otherwise representative range of speakers. Other events include the Friday night 'meet-greet-register' at The Exchange Hotel and Sunday nights *Antibody* party.

Travel subsidies are available for low income earners. Contact your state PLWHA organisation. For more information on the conference contact Russell Westcott on 231 2111.

Prison moves

AIDS ORGANISATIONS ARE TO redouble efforts to force the NSW government to supply prisoners with condoms and syringes in the wake of a Human Rights Commission ruling against West Australia for restricting access to positive prisoners. A group of NSW prisoners is already suing their government.

A recent survey of nine NSW prisons has found whilst that a quarter of respondents said that they had been sexually assaulted most did not report it to authorities.

New homecare guide

DOING IT OURSELVES, A PRACTICAL guide on caring for PLWHAs at home, has just been released by ACON.

Speaking at its launch, SBS presenter Mary Kostakidis pointed to "distress complicated by no rights" for gay couples and told of her own experience where the family of a dead friend "came from interstate and cleared the apartment" leaving the dead man's lover, also a PWA, destitute. The growing 'advanced directives' movement (in part prompted by such cases) had, she said, "much broader applications." The

Makes You Think

Video Against AIDS/Stephen Cummins

Retrospective

2pm / October 29 /
College of Fine Arts,
Greens Rd, Paddington

\$7/5

All Profits to PLWHA

Showing: ||VIDEO AGAINST AIDS||

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Queer Screen



Noticed more advertising in *Talkabout* lately?

Wanted!

Advertising assistance

Yes, our advertising is expanding! We'd like to encourage more people to advertise (the money from

ads goes back into helping us put *Talkabout* out) but in order to do this we need some volunteer help.

This is where you might come in. If you have a few hours to spare, preferably (but not necessarily) some experience in the area and a friendly voice — you can do it! Contact Paul Canning on 361 6750.



B r i e f s

● John Boskovich, gay icon Sandra Bernhard's erstwhile director, is style-setting LA with 'Tranquillity Beads' made of silver-cast Prozac, Valium and Halcion. New York artist Barton Benes does similar 'Talismans' with AZT tablets.

● Looking for any angle on the O.J. Simpson media circus, tabloid *The Globe* produced this (to left) 'World Exclusive.' Back on Planet Earth, one of Simpson's defence team, an ex-cop, is suing the Los Angeles Police Department for AIDS-based discrimination.



● PLWHAs who are men who have sex with other men are needed for a health promotion needs assessment for the North Shore. For more info phone Margaret Duckett on 858 0724 or Peter Swann on 858 0730.

● The building of a HIV/AIDS respite home by the Catholic Church in Sydney suburb Quakers Hill has been criticised by local residents according to a report in the *Blacktown Advocate*.

● The National Association of People Living with HIV/AIDS says that bureaucratic obstruction in the Commonwealth Department of Health is helping turn away PLWHAs from essential treatments because patients are forced to go to hospital pharmacies for their prescriptions. Writing in *Queensland Pride* ex-NAPWA co-convenor Mark Counter says "Canberra has lost the plot" and "has become arrogant." He cited funding for the Canberra art show and no funding of NAPWA.

● Carl Densley, the man who organised the rival ticket at the recent BGF AGM, is the new president of Support of Positive Youth (SOPY).

● Commonwealth Employment Minister Simon Crean was forced to apologise this month after a number of AIDS organisations criticised his linking HIV with paedophilia in a radio interview.

● The Australasian Society for HIV Medicine is holding its 6th Annual Conference at Manly Pacific Parkroyal Hotel, November 3-6. A discount on registration fees for the four-day event is available for PLWHAs. More info from Shirley Corley on 418 9396.

● Two children whose parents died of AIDS following blood transfusions have received a \$345,000 out-of-court settlement.



Revellers lapping up the atmosphere in PLWH/As Time-out Room at the 1994 Sleaze Ball. Photos: Paige Slan (015 216 344). Copies of photos are now available from the PLWH/A office for \$5.

'politics of envy' over HIV/AIDS funding suggests to her that the AIDS community had been "extraordinarily effective."

Kostakidis told *Talkabout* that the guide, "should be used as a model for other illnesses." She described the personal stories as, "incredibly moving and told with such great honesty that they would be valuable to other people going through this experience. We don't talk much about dying, and when we're not prepared we're not in the best position to help others. It's part of an illness of our generation to not

be able to confront situations and deal with them adequately so the poor person who's dying feels supported."

ACON Executive Director Don Baxter said that the book was the outcome of 12 years of "wisdom from the carers", particularly CSN. However funding has only been available for 2,000 copies of the book, written by Pal Van Reyk and to be distributed nationally.



Talkback



Memorial Grove

Some months ago I bought a T-shirt from PLWHA with the slogan on the front of it *Bigots Beware*.

I know what bigots are — a dictionary definition states that a bigot is: "an obstinate and intolerant believer in a religion, political theory, etc." (*The Concise Oxford Dictionary*, Clarendon Press, Oxford 1990).

I also know who bigots are — I have met them across all political and sexual spectrums, sometimes surprisingly, other times expectably. The recent surprises relate to the establishment of AIDS Groves in Sydney Park for those who have been involved in any way with people who have died from AIDS.

The idea of the AIDS tree plantings is to enable people to express their grief by planting a tree as a living object for the person who has died, so their memory continues living.

Support for the project has been very encouraging. The two plantings on 15 May 1994 and 28 August 1994 saw about 1000 trees planted, and 400 names inscribed in registers as a permanent record of commemoration.

Relaxation Group

Meets every Wednesday
at 6pm



Albion St Centre
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Surry Hills
Inquiries: Michael Guy
on 332 1090

Now who are the bigots? It appears that the AIDS 'communities' are split into 'groups' and 'factions'.

Obviously not everybody will support such a project as an AIDS Memorial Grove. Those who have shown no support, or minimal support are basically the AIDS bureaucracies and so-called 'communities' newspapers. These include AFAO, ACON, CSN, ANKALI, Quilt Project, PLWHA, *Sydney Star Observer*, *Capital Q*, amongst others who can be found when I dig into the recent history of the project.

The only person, and I stress the singular, from any of the above organisations who has shown support and assistance is Jill Sergeant from *Talkabout*.

I hope that there will be a response to this letter so that I will be able to understand that which at the moment I am unable to comprehend — why are these organisations so unsupportive?

The positive aspect of all of this is that even with a minimum of publicity, assistance (only given by a few friends who became willing helpers in a project they felt was so worthwhile) and cooperation from the above organisations, at least 250 people on both days helped to plant 1000 trees.

A last-minute photo and statement by *Green Left Weekly* the week before the latest planting earns a very big thank you — to Ken Lovett who submitted it and to *Green Left* for printing it. Rodney Jones and Kevin Trewin achieved magic with about 1500 flyers from HIV Support. Many thanks to all of them too!

South Sydney City Council and its staff are to be commended for their approval of the scheme and for the assistance of their parks and nursery staff in implementing it.

Despite every obstacle, those

who planted trees — infected and affected by AIDS alike — were all pleased to have the opportunity to leave a living memorial at Sydney Park from which they, and those who come after, will be able to obtain peace and tranquillity and grieving in quiet surroundings of beauty and — dare I say it? — non-judgmental love!

— *Mannie De Saxe, Lesbian and Gay Solidarity, Sydney*

Disappointed

It is with great disappointment that I read *Talkabout's* report in Issue 47 of a complaint lodged against *Capital Q* with the Australian Press Council.

If I expected a standard of reporting in *Talkabout* as high as Mr Vilan rightly expects of *Capital Q*, I would consider lodging a complaint against *Talkabout's* article with the Press Council myself.

Did *Talkabout* seek our point of view on this issue? No. Did the writer seek our version of whether Alan Brotherton was misquoted? No, yet the writer takes his letter to the editor of *Capital Q*, which we could have easily have not published, as proof of guilt.

I reject every single one of the paranoid and near slanderous claims in Mr Vilan's lengthy and completely over-the-top complaint, and have my own version of events which, it seems, were never intended to appear next to his in *Talkabout*.

Given that *Talkabout* found Mr Vilan's allegations of bias so significant, it is grossly hypocritical to say the least that it did not give *Capital Q* or myself the right to respond and hence its readers the opportunity to make up their own minds.

Capital Q, however, will always endeavour to seek and publish both sides of the story, as it did with its two BGF stories. That way people

like Mr Vilan, who shot the messenger instead of the message-makers, can find out what's going on.

Finally, I fail to see how the issue was considered more important than any other HIV/AIDS-related news last month. Especially considering *Capital Q's* readers will read the details once the complaint has been adjudicated.

Similarly, if Mr. Vilan devoted pages and pages complaining against comments made about people with HIV/AIDS in the dozens of hateful articles written in Australia every month — which I see in the news services which *Capital Q* subscribes to — he may feel more satisfied.

— Peter O'Shea, News Editor,
Capital Q Weekly

Appreciated

This is just a short note to tell you how much we appreciate your publication which we receive in the mail.

Working mainly with the prevention of HIV we nevertheless get a lot of useful and interesting ideas and influences from reading *Talkabout*. Often we find antipodean solutions and suggestions quite invigorating — 'despite' the lack of a Swedish equivalent to your impressive gay and PLWHA community.

After having read our copy we send it on to the Positive Group (PG for short) for seropositive gay and bisexual men here in Stockholm. I know they appreciate *Talkabout* as well.

Again, thanks for invigorating news from Australia and good luck in the future!

— Staffan Hallin, RFSL HIV
Department

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

 **Talkabout, Po Box 831
Darlinghurst 2010**

Talkabout October 1994

남부 시드니 지역에서
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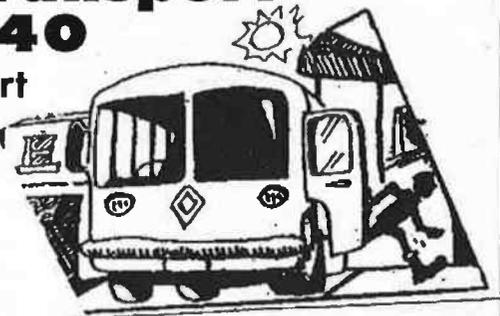
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Current PLWHA Committee

Alan Brotherton, **Convenor**
Steven Ford, **Deputy Convenor**
Robert van Maanen, **Secretary**
Bill Rigney, Larry Wellings, Adam
Davis, Peter Hornby, Vivienne
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A/g Administrative Support Officer
Greg Allen 361 6023
Talkabout Coordinator
Paul Canning 361 6750

Tribute



Dr. Timothy Carrigan

31.7.50 — 28.8.94

TIM CARRIGAN DIED ON 28 AUGUST 1994, aged 44 years, and the gay community lost one of its important thinkers and activists. Tim Carrigan was throughout his adult life centrally concerned with gay men, our lives and our culture. From his first days in early gay liberation discussion groups, his explorations of Freud, his activism in the Adelaide Homosexual Alliance in the '70s, his participation in the early National Homosexual Conferences, Tim's thinking and writing critically examined the motives and movements in gay men's lives. There are still from those days a number of papers, often penned with the late John Lee, in which Tim explored gay men's sexuality, the rise of gay capitalism, the perplexing relations between gay men and lesbians, the advent of the 'gay community' and so on. I met Tim during these years and marvelled at his incisive critique, his grasp of fine detail in argument and his breadth of



theoretical sophistication.

A first visit to San Francisco in 1975 wrought a dramatic transformation in Tim, as it did to others at that time. The change in appearance we witnessed on Tim's return presaged a shift for us all, a shift far more dramatic in the long run than its clone image was rendered in the simplistic debates about gay macho. His developing love of gay community life and a sense of its exciting possibilities were firmly in place by the time he moved to Sydney in the late '70s to become a keen participator in its community. Oxford Street became and remained a vital interest in his gay life, shared with his partner of the last eleven years Phil Jones.

In the early '80s Tim completed a fine PhD in Sociology on the theoretical importance of the ideas of the gay liberation movement and also tutored at Macquarie University for a number of years. With Bob Connell and John Lee he contributed to some quite wonderful work on the sociology of masculinity. We shared an office and a salary in those days, and it was an intellectually challenging and politically exciting time.

Tim made a major move out of

the academy in 1988 to take up the editorship of *The Sydney Star Observer* after it was bought by a group of us as a community paper. His time with the SSO was marked by a dramatic lift in its circulation, its

quality and the cementing of its place at the heart of Sydney's gay community.

I managed to entice Tim back to Macquarie University in 1991 to the newly established National Centre for HIV Social Research to work on HIV/AIDS social research issues in relation to gay men. In our work on HIV prevention research initially and later on gay men living with HIV and AIDS, Tim's contribution was always theoretically advanced and led toward the new, the unexpected, the innovative. Proudly wearing his HIV status tattooed on his calf muscle as a *plus*, Tim pursued the cultural issues related to gay men's collective experience of the epidemic best in his last piece, *Eric Michaels and the Stakes of History*, in which he warned gay men against forgetting our history.

Tim retired early this year to take care of his deteriorating health. His death in August was too sudden, unfair and a particular loss to those of us working in HIV/AIDS and in gay theory. Tim Carrigan will be sadly missed by colleagues, family, lovers, friends, and thinking faggots everywhere.

— Gary Dowsett, Macquarie University, Sydney

Tim Carrigan photo: Phil Jones

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660 6392

Art For Life's Sake

By David Urquhart

From the dramatic and confrontational work of Act-Up and its political allies to sublime and subtly subversive essays on sex and power, art has been used as a weapon as well as a release in the age of AIDS.

In the lead up to Don't Leave Me This Way: Art In The Age Of AIDS at the National Gallery, Talkabout looks at PLWHAs and art. Starting with Urquhart's interview with exhibit creator Ted Gott, over the following pages 'artists' and non-'artists', HIV infected and affected, explore art's meaning — and use — to and in their lives.

THE NATIONAL AIDS Campaign and the National Gallery of Australia have come together to present this major exhibition, curated by Ted Gott. It will be the largest art exhibition on the subject of HIV/AIDS yet to be staged in Australia, and a world first. The show will run during the summer holiday season when between 100,000 and 200,000 people are expected to see it.

The exhibition will be supported by a book and the conference, *Harmed Circles* which, according

to its organisers, "will allow a unique blend of artists and 'front line' workers in the field to speak for themselves about their work. It will present a dynamic mix of lively debate, film, video, song and performances". During the four month run of the show there will be organised tours, guest lectures and a schools program.

Not all the artists in the show are HIV Positive. Curator Ted Gott explains that, "there are 108 artists in the show and some of them are HIV Positive and some have AIDS. Some have died from AIDS. There are also many, many artists who are HIV Negative but who have lost friends to HIV/AIDS and who have been galvanised into doing work from that perspective."

Let's start with an overview of the exhibition.

The show is divided into five sections. The first room is devoted to *Imaging the Virus* and contains representations of the virus. The point here is to try and make people remember that it is simply a virus and to drop any preconceptions about classes, sexualities and genders that contract AIDS.

The second room is, about the *Body in Question* and has images of types of bodies that society does not want to recognise in terms of contraction of HIV Negative gay bodies, lesbian bodies, drug taking bodies,

Aboriginal bodies and also straight bodies, but obviously it's the more controversial ones that stand out. That section also looks at the body as a political, moral and social battle ground in the age of AIDS; as a site of physical suffering and decay; of extreme beauty and poetry; beautiful but as transient as a flower.

The third room deals with *AIDS and Popular Culture* and looks at something that people may not be expecting in the National Gallery of Australia — the art of the streets. The point I want to make in that room is how AIDS is an issue that has caused people to use street mentality and the visual imagery of the streets as a means of consciousness raising.

The fourth room looks at the problem of *Art and Censorship*. While it talks about the joys of sex in the age of AIDS, and about unprotected sex, this art also highlights the move to censor the arts and to censor sexuality. This move comes from some kind of misguided hope that this will stop AIDS. Of course, the tragic thing is that the more you censor discussion of human sexuality the more a disease like AIDS spreads through ignorance.

The last section of the show deals with *Photographs of PLWHAs*. Some of them, like Robert Mapplethorpe's photographs of classical statues and skulls, are wistful. Others show ACT-UP activists as not just crazy people seen on TV being carried away by police. These are incredibly proud and dignified photographs accompanied by powerful autobiographical statements. There are impersonal and predatory documentary photographs which show the photographer as a potential enemy. There is also a selection of Kathy Triffit's self-portraiture project showing self-empowerment of PLWHAs. The point is to ask what photographs tell us about living with AIDS, do they tell the truth or do they lie.

That's the show in nutshell. *Any personal favourites?*

There are large illuminated x-ray photographs by two artists from London, James Barrett and Robin Forster, of a couple of men making love. The work talks about the need for PLWHAs to retain the right to eroticism, humanity and love and dignity and pride in the face of the encroachment of medical technology.

David Edwards's 'Pieta' photograph is about the important role that the Sisters of Perpetual Indulgence have played in AIDS education and AIDS prevention since the mid 80's when they started handing out condoms. It's also about the impact of AIDS on the gay community and about gay grief in the age of AIDS, but done very much with a gay ghetto humour. I think it's great to see artists using wicked black humour. There are works like the t-shirt by ACT-UP Golden Gate which shows Clark Kent kissing Dick Tracy with a wonderful text saying, "Clark wants Dick, Dick wants condom" which I think is one of the hits of the exhibition.

One of the most beautiful works in the show is, I think, Anna Vojak's gently humorous portrait of Tony Carden as a modern day saint. Anna wanted to image a modern day martyr to a cause. It's almost life size and totally captivating and ravishing to the eye. It's very hard to walk past.

There are enormous (15m x 10m) photographs by Andre Serrano from New York of cum shooting through the air and of an artery spurting blood into water. These beautiful and confronting works are talking about the incredible beauty of the two essential life fluids and the sadness involved in people's fear of these beautiful fluids in the age of AIDS.

Sydney Aboriginal artist Harry Wedge's painting called *Blood Transfusion* is the only work of art that I could get from around the world that deals with the subject of blood transfusion as a means of HIV transmission. I

couldn't find a single work of art, that would stand up in the National Gallery, about haemophilia.

Rea, another Aboriginal artist from Sydney, is represented by a work called *Lemons*. It depicts a bitter sweet sense of life and love in the age of AIDS by juxtaposing flowers with lemons and contains a very frank text about the need to use dental dams. The brilliant colours and high gloss surfaces seduce you into looking and then she hits you with a very up front message. I think it's a very clever piece of AIDS educative art, a classic example of how art can have relevance.

I have managed to cover a range of races. I've included the work of gay men, lesbians and IV drug users. I've incorporated heterosexual transmission of AIDS and as many images of women and children as I could find, so the show does convey an entire spectrum of HIV living if you like. Ninety five percent of the artists in the show are either gay or lesbian and that reflects the current epidemiology of the disease. *Some HIV/AIDS activists think that \$300,000 of AIDS health money going into this show is a scandal.*

As Curator of the show I would say that the role of the National AIDS Campaign is to educate in the fight against AIDS, to break down discrimination and prejudice. They recognise that the visual arts are a very powerful means to educate. This art speaks quite frankly about the lives we're living today. It educates almost without people knowing it. The expenditure on this show is also justified in that this show may save some lives. It's a general catchcry that art can't save lives. I actually think that if people enter this show and see works talking about the dangers of unprotected sex, about the need for women to insist on condoms

at all times, and so on, it certainly will help save lives.

Something that shocked me about Rea's piece is that several women at the Gallery didn't know what a dental dam was. They now know and they may go and get one and use it. There is a work of art that can actually teach someone something. Another work showing a woman in the bath with a string of condoms is talking about the need for a woman to empower herself sexually and not to accept that her boyfriend doesn't like condoms. She has the right to demand that they be used. There are very strong messages about the need for safe sex and the dangers of unprotected sex; messages about anti-discrimination and the need to recognise the impact that AIDS has had on a range of diverse communities in Australia. The fact that this show can give some feeling of worth to all of those people who are undergoing so much suffering, I think, is a valid rationale for the National AIDS Campaign to fund this exhibition.

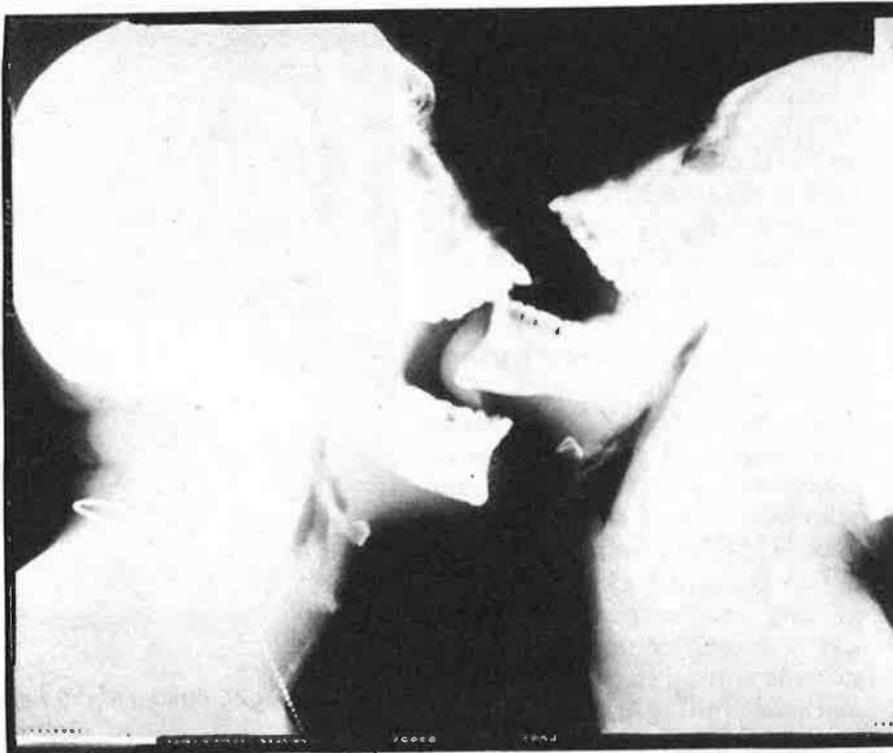
It was suggested to me that there was drug company sponsorship of the exhibition.

That is definitely not correct. *Why do you think artists have responded so strongly to HIV and AIDS?*

They're doing works about AIDS because their lives have been ripped apart by HIV/AIDS. I think that artists recognise that art is a very powerful way of making an educative statement. Artists sometimes say that making art is a way of solving their problems.

Do you think some people have discovered their creativity through wanting to say something about AIDS?

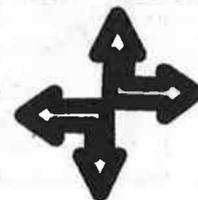
Yes. There are a lot of people, for example, with ACT-UP who have produced amazing works of art. Among the founders of ACT-UP New York there were a lot of people in the advertising and publicity industry who were already very savvy in visual language. Then I think that a lot of younger people joining ACT-UP discovered not



(Top) James Barrett and Robin Forster, X-Ray Series #1, 1992. (Bottom left) David Edwards, Untitled (AIDS Pieta), 1992. (Bottom right) E. Ira McCrudden, Miss Bailey House, 1990.

only a cause but one that needed their skills in a visual way. Also a lot of people coming out of art schools have had their life damaged at such a young age and that has given them a topic full of the essential story of life, full of hate, love, passion, tragedy and heroism. It is a tremendous topic for art and it's a real topic. I think it has galvanised the visual arts in a way that we haven't seen since the sixties.

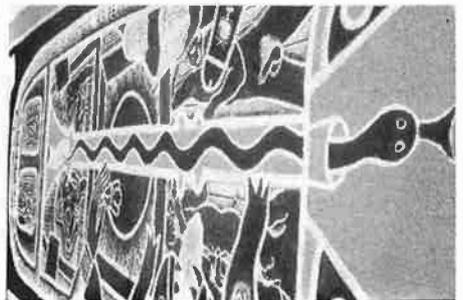
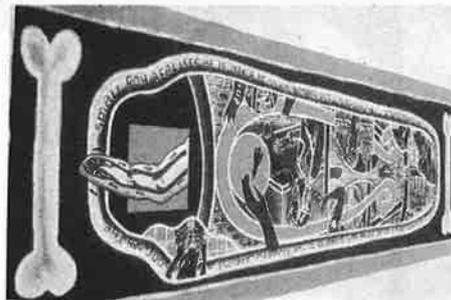
Rather than saying what's the point of doing art about AIDS, does it save anybody's life, I think the real question now is, what's the point of painting a black square any more. (I want it on the record that I do like abstract art.) Art for art's sake doesn't seem relevant for this show, this is art for life's sake.



THE SATELLITE SHOW TO THE National Gallery exhibition at the Canberra School of Art, curated by Jill Bennett and John Turner, will include material that doesn't fall into the existing AIDS categories, rather art that tends to question and analyse AIDS politics. As well as the work of politically engaged artists, the show will include work from a range of different communities both ethnic and social. One artist, for instance, looks at the experiences of married men on Canberra beats who aren't out and who have to deal with the experience of HIV in this 'twilight zone'.

John Turner explained that getting people from outside the gay community to participate is not the only difficulty. "It's also difficult finding people who are questioning the politics of AIDS rather than doing representations of safe sex practices and so on. One of the things on my mind was the lack of political discussion around AZT; the whole issue of HIV Positive people being used as laboratory rats. We want a dialogue that's outside the set way of seeing things."

Jill Bennett doesn't see theirs as a normal art show "where people come along, drink the wine, glance at the art and go away. We want people to engage with it, realise that it's a political event that they are being asked to take seriously. For that reason we will have a program of talks during the show. Australian artists Matthew Jones and Ross Moore from the National Gallery show will be taking part



(Top Left/Right, Bottom Right) Ross Moore, *Of The Visible and Hidden Three*
(Bottom Left) Simon Carver, *Is The Rectum a Grave?*

as well as Nayland Blake from the US. London x-ray artists James Barrett and Robin Forster will talk about the Spanner trial and the S/M prosecution in Britain, and AIDS and censorship. These will be lunchtime talks open to everyone."

The curators want to change any perception that art is removed from the reality of everyday life, and to show that art can ask what John Turner calls "sharp questions" and deal with difficult issues. "We want to get a dialogue going with the general community and not have the issues stuck in art institutions with no application to everyday life."

"The show is about people and AIDS rather than people with AIDS. We are confronted by

AIDS and there's a lot of friction where ideas are being shaken up. That's the area we're trying to tap into, where a lot of activity is being questioned. Also, we have to question our attitude to medicine and the role of doctors."

Don't Leave Me This Way: Art In The Age Of AIDS

National Gallery of Australia, Canberra
12 November, 1994 to 5 March, 1995

Harmed Circles: Cultural Responses To The AIDS Crisis (conference)

National Gallery of Australia, Canberra
11-12 November

Satellite exhibition
Canberra School of Art, Australian National University
7-12 November

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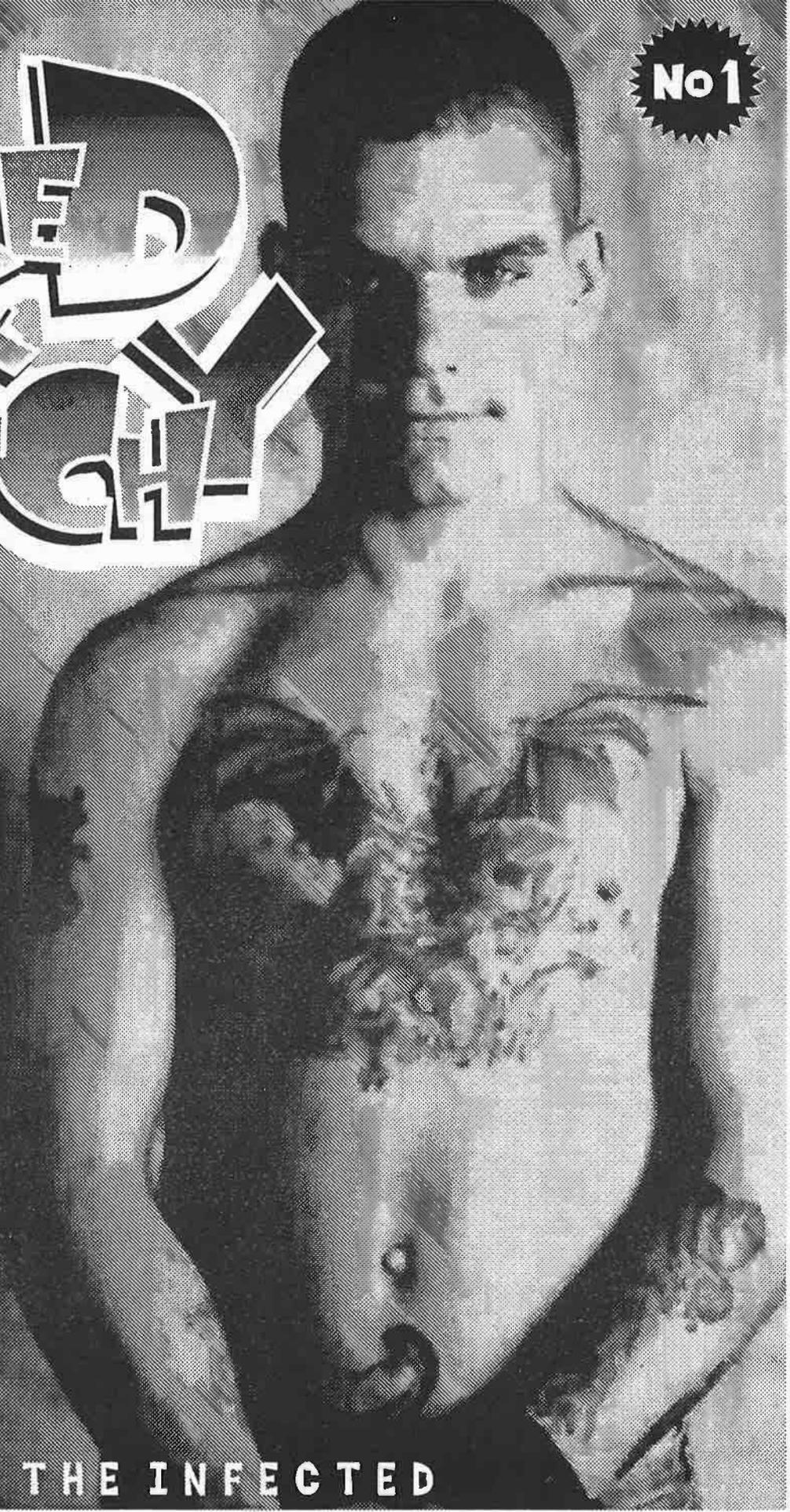
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David McDiarmid, 1994

Tony Carden

[MY PAINTING'S] CALLED *WARRIOR Blood*. It's an idea I had quite a while ago. I thought it would be a good way to document AIDS. When the exhibition [*Don't Leave Me This Way*] came up I decided it would be perfect for it. The piece is a representation of people who I believe to be 'AIDS Warriors' — people who are fighting the AIDS epidemic. I've been very careful to make sure that I have a complete cross section of society on the canvas. Each persons blood sample is their own blood sample without any exception. The majority of the people are not HIV Positive, which is interesting. There are Catholic nuns on there, drag queens, actors, politicians, medical professors.

What are you trying to say with the piece?

I wanted people to acknowledge these people strongly — with strength — and that's why I wanted their blood on there. The work that they're doing is very powerful, so I wanted that to be represented in a powerful way. Having your blood on a canvas is pretty powerful. I think it's also a little shocking and I like to shock people.

Do you think it's still possible to shock people?

Definitely. In general it's becoming more difficult, but with AIDS it's

still possible.

How did you choose the people?

I wrote a list and then I'd just go around my general everyday activist things and when I'd see somebody I wanted on the canvas I'd just ask them. Or show up to an AIDS function of some sort. There were definite people I wanted and people I definitely didn't want. I think some people will be surprised at the people I selected.

Why do you think that?

Because some of them are pretty mainstream type of people. David Cooper. Sister Margaret Mines. Not people you'd expect an AIDS activist to call a 'warrior'. But I think they are because they work in it every day of the week and they're affected by it drastically. And I don't think people acknowledge that.

This is your first art piece?

Yes, I think. Oh that painting over there I did.

What's your background?

I'm an actor. So I guess I was trained to entertain people. When I got sick I turned into an activist because I didn't want to be an actor any more, and I thought it was important that I say things because not many people do.

Have you wanted to create something like this before?

Nope. I'm not really into creating

art except as an actor! It's not something I've ever desired to do. I just did it because I thought it was necessary. Everything is happening very quickly, very little is being documented. Very few people are singled out and thanked. I think that's important.

Do you think this is a particularly strong medium to do that in?

In this situation it is. Their names will be hanging up in the Art Gallery. Thousands of people will see them and they'll talk about it because it's got blood all over it and some of it's AIDS blood. If it was on TV it would be forgettable but you can't really forget that. It's pretty confronting.

When did you hit upon the idea of the blood?

[At this point Frances Dart, a friend of Carden, remembered that, "It came from a dream."] Carden: I wanted it to be peoples blood because I wanted it to be part of them. [Frances: "Blood from people with HIV and from people without HIV, so they were all together"]. Carden: I didn't want there to be any separation. I wanted them to all be as one.

The repetitive and boxed nature of the arrangement is very 'Pop' and I suppose reinforcing that idea of blood being a continuous human thing through all these different names?

And actually I have changed it slightly. It's not going to be complete. It stops about here because I want people to realise that there's no completion to it. That there still needs to be more people on there. It's called work in progress.

Did you get all the people you asked?

Nobody has said no.

Did that surprise you?

No, but some of them were very difficult about giving their blood because they're such wimps! There are a number of people who aren't on there who I would have liked, but they're dead. So I can't get their

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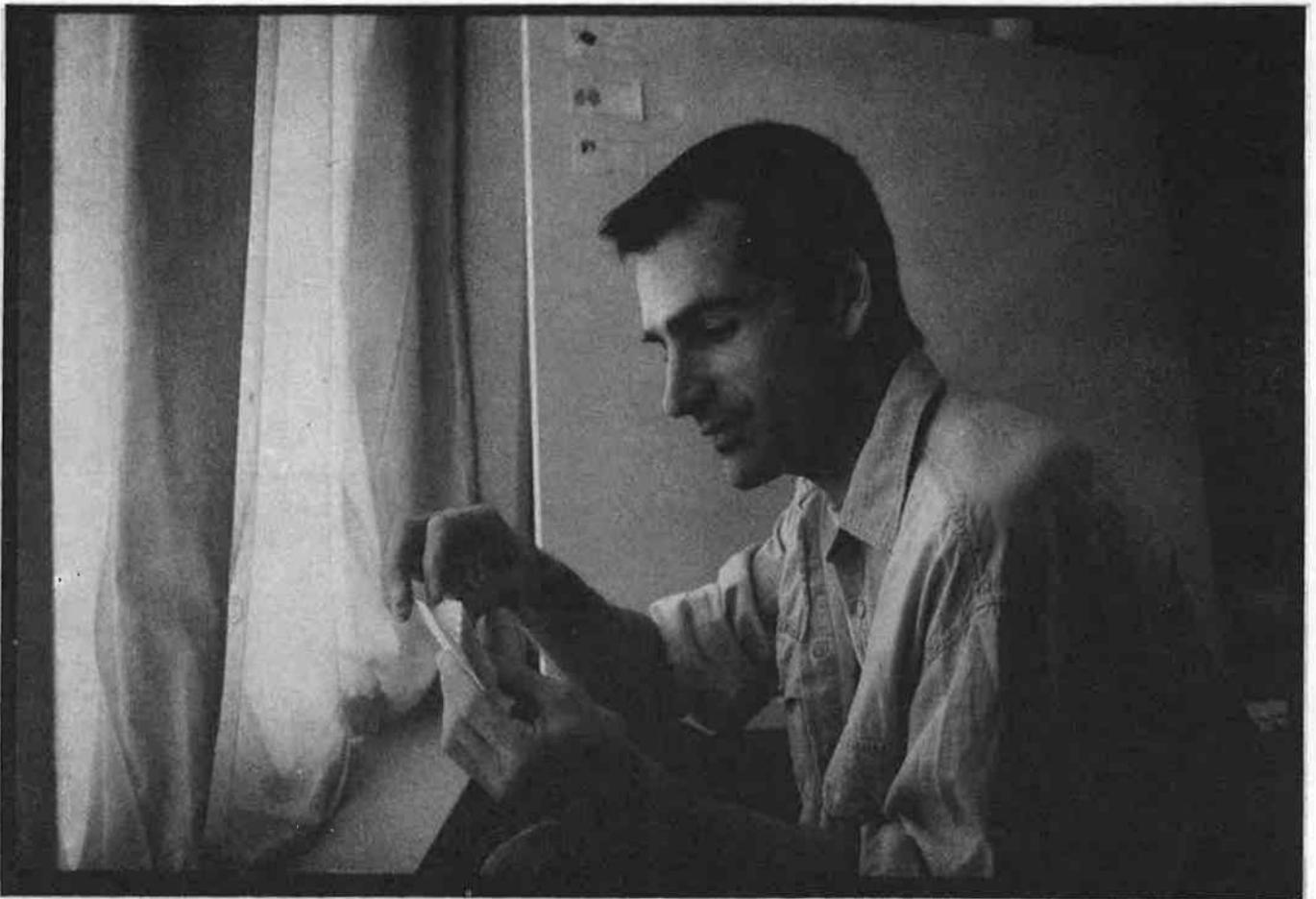


Photo: Jamie Dunbar

blood. That is upsetting. If someone doesn't appear on there it doesn't mean I don't think they're not an 'AIDS Warrior', it just means I couldn't get their blood. You can't get everyone. I certainly tried to get as many people I could.

Do you have any other ideas? Things you'd like to do?

Create a cure for AIDS! Not that I can think of off the top of my head. I'm not really an artist. I don't think of myself as one. I just do things because I feel that I have to.

You'd see this as part of your activism?

Yes. It's more an activists statement than an artists piece of work. *Are you proud of it as an artists piece of work?*

I don't think it's fair to call it an artists piece of work because I'm not an artist. I'm proud of it as an activist. The documentation. I'm proud of those people. It makes me happy that other people will realise [that those people] have done a lot of

good and they've contributed heavily. That makes me happy. Knowing that people will see that who would not normally. People will see it and say "oh, I didn't know that person had anything to do with AIDS." That makes me happy.

AIDS is no longer glamorous. I wish I had the time to get all of the 'AIDS Warriors' down on the canvas. I certainly would like to be able to get more on there but it takes a lot of work to collect them all. To get people to do this. I haven't had the energy and time to get every single one.

How would you feel about somebody else picking up your idea and running with it?

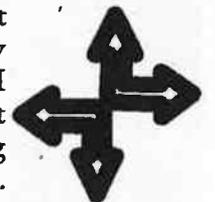
Well I sort of half expect that to happen anyway! Because people normally do that. I guess I find it a bit offensive but imitation is the most sincere form of flattery. When I created the Clovers Clones earlier in the year somebody tried to imitate

that but it didn't work because they didn't do it properly. If someone was trying to imitate what I've done I hope they would do it properly.

What does 'properly' consist of?

Not cutting any corners. When I did the Clovers I had twenty people all dressed up as Clover. The people imitating me had like eight, rattily thrown together characters. That's not 'properly'. Everyone I had had to be of a certain standard. The outfit: they had to wear it in a certain way, have certain jewellery. And if they didn't then I wasn't interested in them. I paid very great attention to detail. I guess that's 'properly'. It would offend me to see someone imitate it and pay little attention to detail.

That would really offend me. I wouldn't want anybody thinking that I had done it.





(Airbrushed gouache, charcoal, pencil on paper work by Marcus Craig. Clockwise from Top left) Hot Bod (from Arson), 1994. White-Figure Satyricon. Kabuki Revealed, 1994. From Flash To Flesh, 1994.



Art and AIDS — a personal development

UNTIL RECENTLY I DID NOT, AS AN artist, see how social/political issues were relevant to my work. I knew, however, that my work needed to develop, I had always portrayed gay masculinity using a sensuous blend of light and shade on the healthy, well-developed male figure.

After my latest exhibition *Arson!*, part of the 1994 Mardi Gras Festival, a friend and colleague pointed out that if my work was to be put into the context of the wider community and the art world, then I was definitely addressing an 'issue' in my work: the issue of sexuality. I knew I was expressing sexuality in my work, but did not see myself as 'addressing the issue' of sexuality.

After hearing several interpretations of one or two pieces that featured in that show I began to think that maybe, after all, I was 'addressing an issue' and that perhaps I should use this and what I had learnt from these people in my artistic development.

Having given up a Public Service career two years ago due to redundancy and not returned to employment due to HIV status and complications I found myself in a situation where I had the time to spend working as an artist and making the most of my talents at something I enjoy and that gives others pleasure. Having had five successful art exhibitions during the past four years I am now quite confident as an artist in certain sectors of the community. But it is time to branch out, to develop my work further and become more visible to a wider community.

For many years since HIV diagnosis in 1984 I said I would never lead a life based around my HIV status. That was fairly easy to do when working full-time. But now I find it affects me everyday. My life has changed because of this

virus called HIV. And I now believe that, basically (other than the loss of friends) that the change in my life is for the better. It is therefore a natural progression for me now to put my work into the context of HIV/AIDS.

The fact that the community, particularly the gay and lesbian community is gradually incorporating the AIDS issues into it's cultural agenda would, only a few months ago, have been quite scary for me — if I'd realized it was



Rescue, 1994

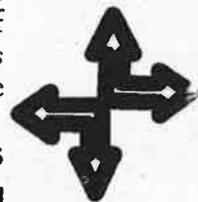
happening to the extent that it actually is. But my views have changed. I don't find it scary. It's part of life. We must accept that this virus and all it's associated issues and implications have become so intertwined in our lives that they have progressively become part of our arts world, our culture. On reflection, this has been happening for some years now. There have been numerous plays and movies on the subject, for example, during past years. The recent funding of two AIDS related projects by the Sydney

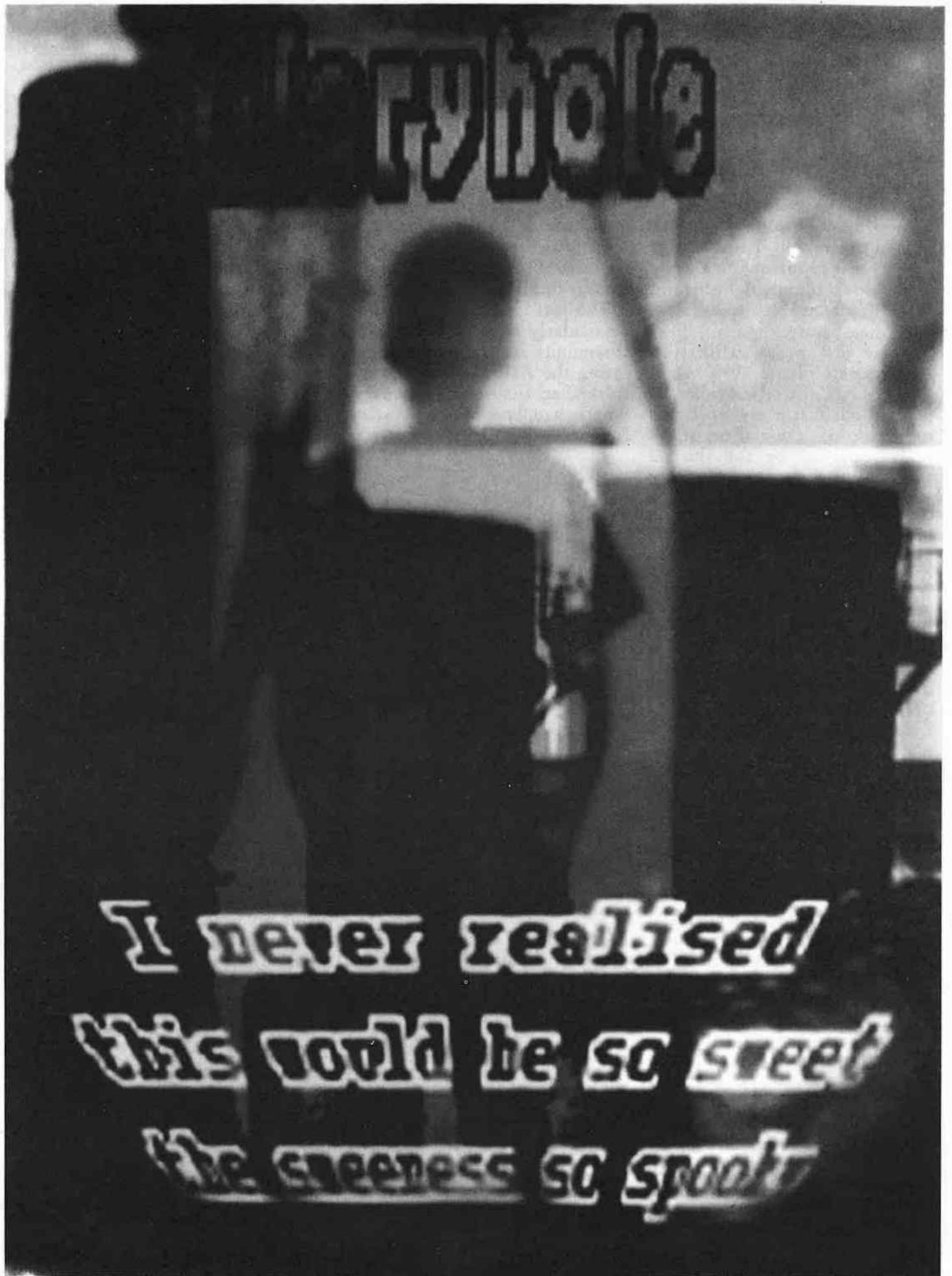
Gay and Lesbian Mardi Gras and, more so, the Art and AIDS exhibition coming up in Canberra, have really made the point to me that yes, AIDS has become culturally significant.

For me, a HIV Positive artist in the nineties, my work is a result of crisis. It is therapy, occupation and expression. If I am to develop my work further and address the issues surrounding HIV/AIDS then I am faced with a further dilemma — the conflict between aesthetics and these social issues. In my next exhibition, to be part of the 1995 Mardi Gras Festival, I will attempt to resolve this dilemma. To me aesthetics is beauty, but sociopolitical issues are quite the opposite. And we who are HIV Positive know that much soul-searching goes on about our lives and our condition. My challenge as an artist is to reconcile these opposites and express the soul-searching. To put the sexuality and sensuousness of my work to date into the context of HIV/AIDS and thereby address the related issues. I find this a difficult but exciting challenge.

In conclusion, I would like to point out that one of the underlying philosophies in my life and work, and the fact that I am now using my time as an artist, is that life must go on after HIV Diagnosis and after the deaths of friends. We must try to take advantage of our fate rather than let it control us. To do this can be a struggle. But it is also very enriching and rewarding. Just as our culture will be enriched and rewarded by the emotive consequences of HIV that many of us face, pass through, and face again.

— Marcus
Craig





Gloryhole. Andrew Thomas-Clark, 1994

Spooky HIV Sweetness

Andrew Thomas-Clark

*Performing 'The Illustrated Story of a Queer Boy' in the
Don't Leave Me this Way Art & AIDS Conference: The
Australian National Gallery, Canberra*

**"The technical rationality of capitalism had a found way of administering
and exploiting the liberation of attitudes towards sexual pleasure"**

Andrew (1)

**"It is a passion for another land, always a promised one, that of an
occupation, a love, a child, a glory. They are believers, and they
sometimes ripen into sceptics." *Julia Kristeva (2)***

The backrooms and the saunas are power centres for our dead sisters' ghosts. They are laboratories for my studies, as I can learn more there than at University campuses. Every time I orgasm, in a cubicle, I feel I am invaded by at least three entities who share my orgasm. This may or may not be AIDS dementia. Is it sensible to deny these experiences?

Please contact me through *Talkabout* if you have similar spiritual invasions. So far I am not the only one who has had these experiences. If this is real, do these entities want to stay in these spaces? Or should they progress to *the great Sauna in the sky where nobody says no*.

As I researched the glooms of the Den once: sucked a cock to the left, licked an arse to the right, and tickled a few testicles ahead simultaneously, "*shit*" I accidentally knocked out someone's *catheter*.

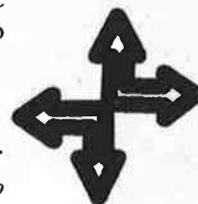
This hadn't happened to me when I gave everyone oral at the AIDS ward last year.

Meanwhile, blood splashed all over the place as he moaned, and everyone thought that he was cumming. The blood was as warm and as sticky as cum, but it was more watery. A light flashed across the room. "*Sorry!*" It was dismissed as a false memory. But I suspect the room had more spirits than human entities. The energy remained. But the

blood disappeared.

The next day I went to the lunch group at the Lizard Lounge to watch the fat lady sing, and everyone feasted up to survive the oncoming week. Everything was sweet. I never expected this stage of my life to be this sweet. Someone familiar turned to me, but his face was radically changed. The colours were bright and the music was sweet. I looked the other way, and there was the man whose arse I licked last month. But now he couldn't walk. The fat woman's voice was sweet. Someone cooked us a trifle.

The backrooms are haunted with ghosts. I never expected it to be so sweet. The Sweetness, so spooky.



1. Andrew Ross, *No Respect. Intellectuals and Popular Culture. Routledge, New York 1989. p 62.*

2. Julia Kristeva, *Strangers to ourselves. Harvester Wheatsleaf, New York, 1991 "Ironists and Believers." p 10.*

Self

it's hard for me to think of life before h-i-v.

it's this all encompassing thing.

i was first diagnosed in 1985... mid 1985. so it's coming up nearly seven years now and it's really hard for me to think of what my life was like before then...

i think one of the things that h-i-v has given me is a search for identity, a search for meaning and purpose. it has given me something to focus on that i didn't have before. it's like a hobby for me now, in some ways... like looking after myself, i read a lot of metaphysical, self-empowerment type books which i get a lot of enjoyment out of. i think, for me, that's sort of like a nurturing thing and if i don't constantly read and keep myself together, i get very depressed.

i am a firm believer, now, that i have the power to keep myself well. i try and do a lot of work on the emotional side of things, but you can only accelerate the growth process so much.

at the moment i am trying to find a purpose.

the biggest thing for me is giving up work. this is part of a process of finding what i want to do and what i am meant to be doing which is crucial for me.

i think one of the things that's with h-i-v and i suppose with any other illness like cancer, leukaemia or whatever, you adjust. you adjust to your physical symptoms. you may not like what is happening to you, but i think that mentally you adjust and i find that really interesting.

i mean, most people are freaked out by aids and h-i-v but to me it's a perfectly natural thing to have. i don't feel guilty about having h-i-v... i did in the beginning and i don't anymore. a lot of people talk about it as being a gift — i am not quite there yet...

the images that i have been working with over the past couple of days ... i really get crapped off with the way the australian media use the word victim. i don't want to be a victim and they just use it time and time again. in the early stages of aids and h-i-v, there was this paranoia, these scare tactics.

the other image that i have been working with is anger. i am not angry i have h-i-v but i am angry at the way people perceive us.

i am angry that people perceive it as a gay disease.

i am angry about the way we are represented ... we are human beings. we have family ... i am someone's brother, i am someone's uncle, i am someone's son.

we are members of the community but the community is pushing us away and the media have a lot to answer for that.

i don't think the grim reaper campaign helped. i think it just isolated and stereotyped.

another image i have been working with is fear.

i don't have a fear of dying at all.

i am not worried or fearful about dying because i know i will die one day but i do fear being sick.

i do fear, because i am slim in build... skinny in build as some people call it... i fear losing weight.

the other thing that i am fearful of is k-s.

i have a real fear of getting k-s because i don't know how i will deal with that.

it's a self-image thing and i have got a lot of work to do on my self-image... self-identity.

h-i-v is challenging the way that we see ourselves and the way we represent ourselves. i mean there is a lot of suffering... i know that... and a lot of pain but there is also a lot of joy.

i just hope that people can see us living with h-i-v and that we are just like everybody else and it's just another disease.

i don't want people's sympathy ... i want their support, their encouragement, their love, their help and their acceptance.

i think we all make judgements, i don't think we can help that... but it's when you start boxing people in and saying they are heterosexual or homosexual that you are really classifying a person and a person is much more than just what they are and what they do. it's an ideal situation, i think, if we could just accept people more as whole human beings. maybe out of h-i-v we are challenging that.

stephen (extracts from a personal history, july 1991)

Imaging

SELF-IMAGING HAS BEEN KATHY Triffitt's work project for the last seven and a half years. Although looking to have it published, she's at the moment developing *Am I Dead Sweetheart?*, a piece combining PLWHA voices from interview tapes, slides, ambient sounds and voices coming from the audience. It will be performed at the National Gallery on November 11. Triffitt lectures in photography at the University of Newcastle.

"This project started in 1987 as a response to many of my friends being diagnosed with HIV in the early eighties when there weren't any support systems. They were left to cope with the fear and the uncertainty. The only information was from the media — victims and silhouetted figures. There were the medical images defining people by afflicted body parts and signs and symptoms, not as a person living with HIV/AIDS. *The Grim Reaper* had a huge impact on peoples self-esteem. A lot of people were too frightened to tell their stories.

Self-documentation is people writing their own history. *Self-*

imaging is people looking at their own representation as a process of empowerment.

I teach people basic photography then hand the camera over. I ask people to live and breathe with the camera for as long as they feel that they can. At the same time I do an oral history for them. They edit the transcripts. The text is as important as the images.

Originally I thought I would take the photographs. I did start taking them. I was obviously influenced by the media representation and the medical photographs because when I went into my darkroom and started printing and — I suppose it was part of my therapeutic process — I created what I call 'photographic biopsies'. I actually dissected these people. I created these triptychs, so they took on a religious context as well. Through my own process I created 'victims' I suppose. That was quite startling. As I put them out to dry I felt as though I were putting bodies out in a morgue. That's when I handed the camera over.

I wasn't producing the images I thought I was producing.

Once I step into somebody's life I'm there for as long as they want me to be. We usually become friends. Over 50 have been involved.

The exhibition has toured all over the place. And one focus is to turn around the media image of the HIV Positive person. There's been some amazing experiences when it's gone to rural areas. The project has a life and it's growing all the time.

Stephen from Melbourne was quite an amazing experience. He was looking at 'labels'. He found a church, took the camera and he destroyed the victim label. He burnt it and threw it in the air. (See cover photo). When he came out the church he said that he felt that something had been lifted. It was such a cathartic experience and you could see the glow on his face. The text (to left, pg 22) is in lower case because it better imitates the speaking voice and that concept of equality — that everything said is important.

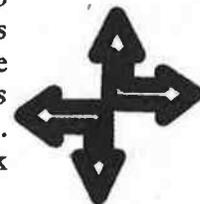
I think there's a strong influence from this work, and from mine and Paul Young's early involvement, to *Talkabout*."



experience of "half my friends being positive." Through having a gay brother she became interested in the "different problems" of gays with HIV from non-English speaking backgrounds (NESB).

The project will "explore and express the wider implications for people from NESB living with HIV/AIDS. To make the wider community realise the isolation

experienced by these people. Unresolved issues [like] language, education, cultural diversity and homophobia, prevalent to the ethnic communities" — problems often rooted around religious "taboo" and family, yet also themes reflected in Catholic "iconic institution" St. Vincents with its 17th South-centred version of an extended family. Her partner is a nurse, that was part of her introduction to this world, and she, roaming out of her studio and the ward, wants to cast her net "as wide as want to be involved. There's unlimited scope. So much to work from."



Maree Azzopardi, Surrender, 1994

A FEW MONTHS AGO MARDI GRAS announced the winners in its inaugural arts grants schemes. Two of the three funded were HIV-related. One is Maree Azzopardi's three-month Artist In Residence at St. Vincents Hospital which begins in March next year.

Azzopardi is an artist of Malteses heritage and involvement with the gay and lesbian and HIV communities. Her unusual mixed media work involves polaroids, paint, collage, scanning, photocopying, charcoal etc. Work she describes as, "almost made to be hung in a sacred setting" and "about transformation" whilst remaining "immediate." She plays with "tongue-in-cheek" imagery around very Catholic themes of martyrdom.

This project came from her

(~~EITHER~~
KYLIE'S
ON ACID)²

OR
=

I + AM³
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X

DANCE PARTY EQUATION : (2) ON THE CORRECT USE OF RECREATIONAL DRUGS
(3) "WHEN THE CELL COUNT FALLS BELOW..."
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Scott Redmond. B. 1962 — Gold Coast, Qld. Lives and works, Brisbane. 1986 - 1994. 24 solo exhibitions. Bris, Melb, Syd, G. Coast and Townsville.
1982 - 1994. 60+ group exhibitions including Australian Perspecta '93. 1989 - 1994. Co-curated a number of gay and lesbian exhibitions and AIDS
fund-raising exhibitions including You Are Here for the 1993 Mardi Gras Festival and Remain In Light for the 1994 Mardi Gras Festival.

Photo therapy

THIS PHOTO WAS ONE OF MANY taken of twins Peter and Anne Howard over a period of a year or two, some taken at times when Pete didn't feel or look the best but which he nonetheless wanted taken for he knew their importance for Annie once he'd gone.

The picture is all the more poignant now that Pete has gone, for he died on July 10 this year. It is a lasting expression of the love shared between them, one that can be looked at and relived over and over again. (In fact, I have it in front of me on my desk, as does Annie).

This, I suppose, is the magic of photography for me — for even before I began working as a professional photographer over a decade ago I recognised that a photograph can express far more than words. In fact it's why I switched careers from journalism in 1983, after I'd photographed the Dalai Lama the year before for an article I wanted to write on Tibet. Those photos came out so well I decided to switch from typewriter to camera. It was the immediacy of an image, the emotions recorded in a moment



of time that appealed. Ever since I've been lucky enough to work in the field for which I have a passion, photographing a fascinating range of subjects.

However, it's the opportunity to capture those special and often fleeting moments in people's lives that I regard as a privilege. For example, at one of

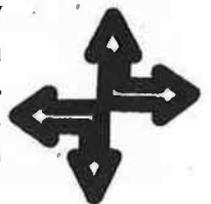
the Hospice Christmas parties I've photographed at St Vincent's over the past few years, I was photographing what I thought was a patient and her sister, but when I asked if that was the case they dissolved into laughter. The resulting photos showed the pair (mother and daughter!) arms around the other, laughing loudly at my mistake. These photos, so full of joy, are now, I'm sure, especially treasured by the family as they were the last that were taken of their mother.

I find it sad that people often overlook taking photographs of loved ones until it's too late. When I visited the father of a friend of mine who had died suddenly, armed with a box full of photos of Andrew that I'd taken over the years (and had reprinted multiple copies for his family members to have), he expressed regret at having so few pictures of his son. He hadn't known I was bringing those photos and they turned out to be the perfect present.

For photographs can be memories on film. Through them the moments can be relived, explaining no doubt why they were generally the first material possessions saved from houses threatened by bushfires earlier this year — a fact that was pointed out to me by a well-meaning friend as something for me to consider. I assured him that it was one of the very reasons I took photographs, both professionally and personally, mindful and fully aware that a photograph can be a special memory recorded and treasured for ever.

— Jenny
Templin

Jenny can be contacted (during business hours) on 569 1542



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Brenton Heath-Kerr

WELL KNOWN TO SYDNEY party-goers over the last decade for his incredible costumes, Heath-Kerr has recently matched that appeal with increased recognition as an artist — marked by his presence in the Canberra show.

“As much as my work is a study of costume, a historic, cultural study, the basic underlying theme is an analysis of the fact that we are all, underneath it all, flesh and blood. And underneath all that are just spirit. And the spirit is the same for every one despite what’s on the outside. It’s using the idea of illusion, an external created character that is surface only, and peoples responses to that change according to what the character on the outside is.

It started out of a sense of insecurity based around my sexual lack of sensitivity and security because of being HIV. Since I found out — at twenty-two — the whole nature of my sexual expression has changed. I couldn’t feel a sense of intimacy without the thought of HIV. It developed to the point that it absolutely dictated my conscious and unconscious moods. Now everything I do has a certain conscious awareness that’s evolved with my circumstances. Before it was an unconscious response, it wasn’t a deliberate approach. It was done as an escape. Now I pursue it as a specific response, to make a statement about what my circumstances are. I’m a lot more decided that what I can do can be used to the greater good of mankind rather than just for my pleasure.

When did the nature of your work change?

With the onset of the last twelve months, a specific set of illnesses that meant I was at home alone having all the time to think. It was



Heath-Kerr as a cartoon ‘Betty Page’, fifties love goddess at Sleaze ‘94. Photo: Mazz Images

something that overwhelmed me, and I don’t think I’m alone in that. [But] all those things have given me a clarity of vision. As much as it’s bad it is good. I have no vision beyond the next twelve months and that really makes you start thinking what does it all mean and that’s really the beginning of everything. You have to start thinking about everything then!

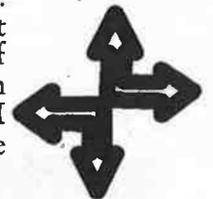
How does AIDS inform, say, your work at Sleaze?

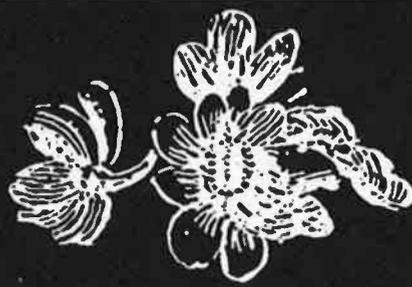
I wanted to do a sister to Tom of Finland. It’s an exploration of a yin and yang type thing. The female and the male. Where Tom represented the idealised, iconographic gay character, Betty Page epitomises a female sexuality (which has been taken in by the lesbian community as much as the broader community). She represents free sex. A lot of peoples response is that it’s pornographic but that’s a reflection of people responding to it. As a visual perception it is naturally universal. So, the universality of images far out reaches any immediate communal, or choice, of sexuality. And it represents a feminine aspect of myself. It combines a lot of things. There’s a power in the simplicity of an image, words are too restricting.

The actual sexual act, I believe, should not be at all dampened, the passion and the beauty of sex doesn’t necessarily have to be lessened because of AIDS. Within the exploration of that, as it has affected me, then the image of a freewheeling sex-kitten [is powerful]. People will laugh and life should be celebrated — That it isn’t all as bad as it might seem.

I would rather be heard and make a point. This is the difference between now and when I started doing costumes. I think it’s the thing that’s kept me going. My determination. And I have costumes planned. The issue that is driving me now is being HIV and now being considered with full-blown AIDS, which I find a terrifying term. The semantics can be frightening. You have to be careful what you listen to and what you read and what you read into it because you can be totally swept away by words and concepts which aren’t necessarily true. I don’t do anything I don’t want to do. I have made that my life and that’s thank to services, Andrew who cares for me, Darian Zam who helped paint Betty and people who love me, my friends. I developed a friendship with Simon Reptile and we became particularly close. He became ill as I became ill. We became friends because of the disease.

I have a distinct desire to make a few big statements before I die. I’d like to be particularly active and vocal and I’m not shy about that any more. I’ve as much right to express myself as any human being and I intend to make the most of it.”





DON'T LEAVE ME THIS WAY



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Nayland Blake *Don't Leave Me This Way* 1989, illustrated bus shelter poster, originally commissioned by American Foundation for AIDS Research

EXERCISE!

— the time is always right if you are HIV positive —

By Mark Zacka

MUCH HAS BEEN WRITTEN ABOUT exercise for people who are HIV positive. So the appearance of another article on exercise probably begs the question *why*? The main reason is because clearly, not everyone is involved in regular exercise and the benefits to be gained are so desirable that it is worth really labouring the point.

BENEFITS OF EXERCISE

All systems of the body are affected by regular exercise. If exercise is of an appropriate type, intensity, duration and frequency then these effects will be of a healthful nature. Many are aware that regular exercise increases muscular strength and endurance and improves cardiorespiratory fitness. These types of benefits are associated with decreased likelihood of stroke, heart attack and other cardiovascular illnesses and an increased ability to perform activities of daily living.

Less well known benefits of exercise include mood modulation. The central nervous system (which includes the brain and spinal cord) releases "endogenous opiatics" in response to activities such as jogging, swimming etc. These chemicals are responsible for an effect known as the "post exercise high" that many regular exercise participants experience. Endogenous opiates (e.g., endorphin and sererouen) are also responsible for attenuating pain. Exercise can assist mood modulation by improving sleep patterns and allowing deeper and more beneficial rest. Other benefits include decreased anxiety and depression, plus a greater sense of control and a heightened feeling of optimism. There may also be increased relaxation, concentration, self esteem and confidence.

The lymphatic system is an important part of the immune system



Graphic: Phillip McGrath

and significant in removal of toxins and foreign invaders. The lymphatic system is similar to the cardiovascular system (CVS) but doesn't have a pump like the heart. The lymphatic system depends on skeletal muscles (e.g., the muscles of the arms and legs) to pump the lymphatic fluid around the body. This is why exercise that works the skeletal muscles is so vital for effective lymphatic system function.

The digestive system benefits in

many ways from exercise. Appetite can be stimulated and digestion enhanced. Movement of various muscles, especially the abdominals, and the changing of body position allows gravity to assist the digestive process. Constipation can be relieved as sluggish bowels can be stimulated by the movement associated with exercise.

Exercise also works the respiratory system. Breathing is deepened during exercise. This helps to fully expand the lungs

and clear them of any foreign matter. The diaphragm (the main respiratory muscle) and other respiratory muscles are strengthened with regular exercise.

The skeletal system also benefits from exercise as the bones maintain and increase density through regular and sustained weight bearing. Weight bearing also assists the nutrition of cartilage (which is a shock absorber for bones).

SCIENTIFIC EVIDENCE

Recent studies now show that regular exercise can benefit people who are HIV positive. A study by Rigsby and colleagues (1991) demonstrated improvements in muscular strength and cardio-respiratory fitness following 12 weeks of exercise that included aerobic, strength and flexibility training. Spence and colleagues (1990) showed that individuals who are HIV positive, had recently recovered from an episode of Pneumocystis carinii pneumonia and who were currently using AZT, were able to significantly increase their body weight and muscle strength following a 6 week regime of progressive resistance exercises. Schlenzig et al and Keyes et al in 1989 demonstrated increases in CD4 cells and CD4/CD8 ratio after a period of aerobic activity.

WHAT TO DO AND HOW TO GET STARTED

The most important initial determinant of what type of exercise and how much exercise should be performed, is the individuals level of fitness. For some people a short walk may be all that can be managed, whereas others may be able to perform a full gym style "work-out".

What type of exercise? Some people play sport as their form of exercise. This may be OK but generally it is best to *get fit to play sport rather than play sport to get fit*. This rule will help to reduce injuries and boost performance.

There are generally two types of exercise, *Aerobic* and *Anaerobic*. Both types of exercise have their advantage but it is best to perform a combination of both types for

maximum benefit.

Aerobic exercise involves working your muscles continually, so that your heart rate increases and is kept at an elevated level for a set period of time. This will help improve cardiovascular fitness and begin to increase strength. Examples of aerobic activities include walking, jogging, running (but not sprinting), swimming, cycling, rowing, stepping and aerobic classes.

Anaerobic exercise involves *progressive resistance exercise* (PRE) or weight training. The basic principle involves putting a 'load' or 'stress' on the muscle for a short duration to make the muscle stronger and larger. PRE is of major importance if you are attempting to increase your weight. This form of exercise is usually performed in a gym using weight machines or free weights, however there are many exercises that can be performed using the body's own weight e.g., push ups, chin ups etc.

There is much to know about safe exercising. Issues of warming up, cooling down, stretching are all need to be tackled. Whilst *appropriate* exercise can have many benefits, *inappropriate* exercise can be dangerous and bad for your health. If you are serious about commencing an exercise programme then it is wise to contact a physiotherapist or exercise specialist for specific advice. It is also advisable to inform your doctor and other practitioners you are seeing that you are intending to start exercising.

WHAT TO WATCH OUT FOR
Some signs that may need qualified attention include:

Muscle pains that persist for days, do not settle, may increase or are aggravated with fever;

Sudden drops in your exercise tolerance;

Increasing shortness of breath;
Increasing unsteadiness.

It is also unwise to exercise if you have a fever or your doctor has told you that you are anaemic.

A FEW TIPS

Try to base your exercise

programme on an activity that you enjoy and that is convenient for you to undertake, both in proximity and cost. Exercise can be fun but often it does become repetitive and it is at these times that you need to 'dig deep' and persist with your programme. Varying the types of exercise you perform may help but don't be afraid to take some time off now and then to rest from the rigours of routine — though not too much time off!

Exercising with friends may help to ensure your compliance but try to find your own motivation. This will stand by you in the long run. Start the intensity, duration and frequency of your programme at a very comfortable level and increase these factors gradually. Give your programme time to have effect — *the benefits won't happen overnight, but they will happen!*

Have fun!

EXERCISE PROGRAMMES

FOR PEOPLE WHO ARE HIV POSITIVE IN SYDNEY
Royal Prince Alfred Hospital (Central Sydney Region) hydrotherapy and gym group.

Contact: Physiotherapist 516 6111 pager 6861.

St. Vincents Hospital (Eastern Sydney Region) Gym group.
Contact: Physiotherapist 339 1111 pager 408.

PLWHA Day Centre Gym group.
Contact: 357 3011.

Some gyms in Sydney also have special free times or special rates for people who are HIV positive.
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Review



MAKING AIDS FICTION POPULAR

THERE IS A PROBLEM WITH GAY fiction that deals with the subject of AIDS and HIV. Readers tend to avoid it. I work in a gay bookshop and it has struck me that when gay male customers ask for book recommendations, in clarifying what they want, they will often specify "something light" or "something that doesn't deal with AIDS." Many gay men have reached a saturation point with AIDS and when they want something to read in their leisure time, AIDS is *not* what they want to

read about. Instead they want escapism. Something light and witty.

So where is the market for these books if their main potential purchasers are avoiding them? Certainly, straight people aren't buying much gay fiction, let alone AIDS fiction. Though it is interesting to note that gay people read "straight fiction" all the time. Possibly because it attracts greater review coverage and promotion, and the authors are better known to them as a result. There's also so

much more of it. Perhaps gay people are simply more adventurous readers? Or straight readers are anxious that reading a gay book might call their sexuality into question? Whatever the reasons, there are only a handful of gay and lesbian writers who have achieved cross-over success to the straight market.

Armistead Maupin is the prime example of a writer who has. His *Tales of the City* series of books is incredibly popular. They have been best-

selling for years and years and the television series currently screening will raise the profile of him and his books to a level no other gay writer enjoys. Maupin has attracted the criticism that he is writing gay issues for a straight market. It's probably fair comment. His books aren't likely to challenge a sophisticated gay or lesbian reader, though they're bound to find them enjoyable. However, for a straight reader the *Tales* series can be a revelation and that is Maupin's great success. The humanity of his characters and the relentless humour that peppers the narrative draws the reader into an empathy for his characters and their circumstances. In the six books of his *Tales* series, Maupin takes on a huge number of issues unpalatable to middle America (transsexuality/coming out/drug taking etc) and makes them digestible. HIV and AIDS is one of the series most dominant issues, particularly in the later books as the years pass from the seventies into the eighties.

Fiction titles that have dealt with AIDS and been popular sellers are invariably those books that have a strong comic element to them. Local writer Garry Dunne's novel *Shadows on the Dance Floor* combines a Sydney backdrop with some biting one-liners as he narrates the decline of his character Mr Pointy Head from AIDS.

American writer David Feinberg sprang to prominence with his first novel *Eighty-Sixed*, the hilarious adventures of the neurotic B.J. Rosenthal pre-AIDS and post-AIDS. *Eighty-Sixed*

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won several American literary awards including the Lambda award for Best Gay Male Fiction and the American Library Association Gay/Lesbian Book Award. Feinberg followed this success up with a sequel, *Spontaneous Combustion*, which continued B.J.'s story.

Next month in the States sees Feinberg's debut into non-fiction, published by Viking in hardback. Entitled *Queer and Loathing: Rants and Raves of a Raging AIDS Clone* it's a collection of autobiographical essays, journalistic pieces and "demented Feinbergian lists."

Next column: AIDS fiction without the jokes

— Graeme Aitken

NEW TITLES

Power and Community: Organisational and Cultural Responses to AIDS. Dennis Altman (Taylor & Francis) \$32.95

Moral Threats and Dangerous Desires: AIDS in the News Media. Deborah Lupton (Taylor & Francis) \$41.95

The AIDS Manual. Albion Street Clinic. (MacLennan & Petty) \$20.00

AIDS Care at Home: A Guide for Caregivers, Loved Ones and People with AIDS. Judith Greif and Beth Ann Golden. (Jacaranda Wiley) \$35.95.

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