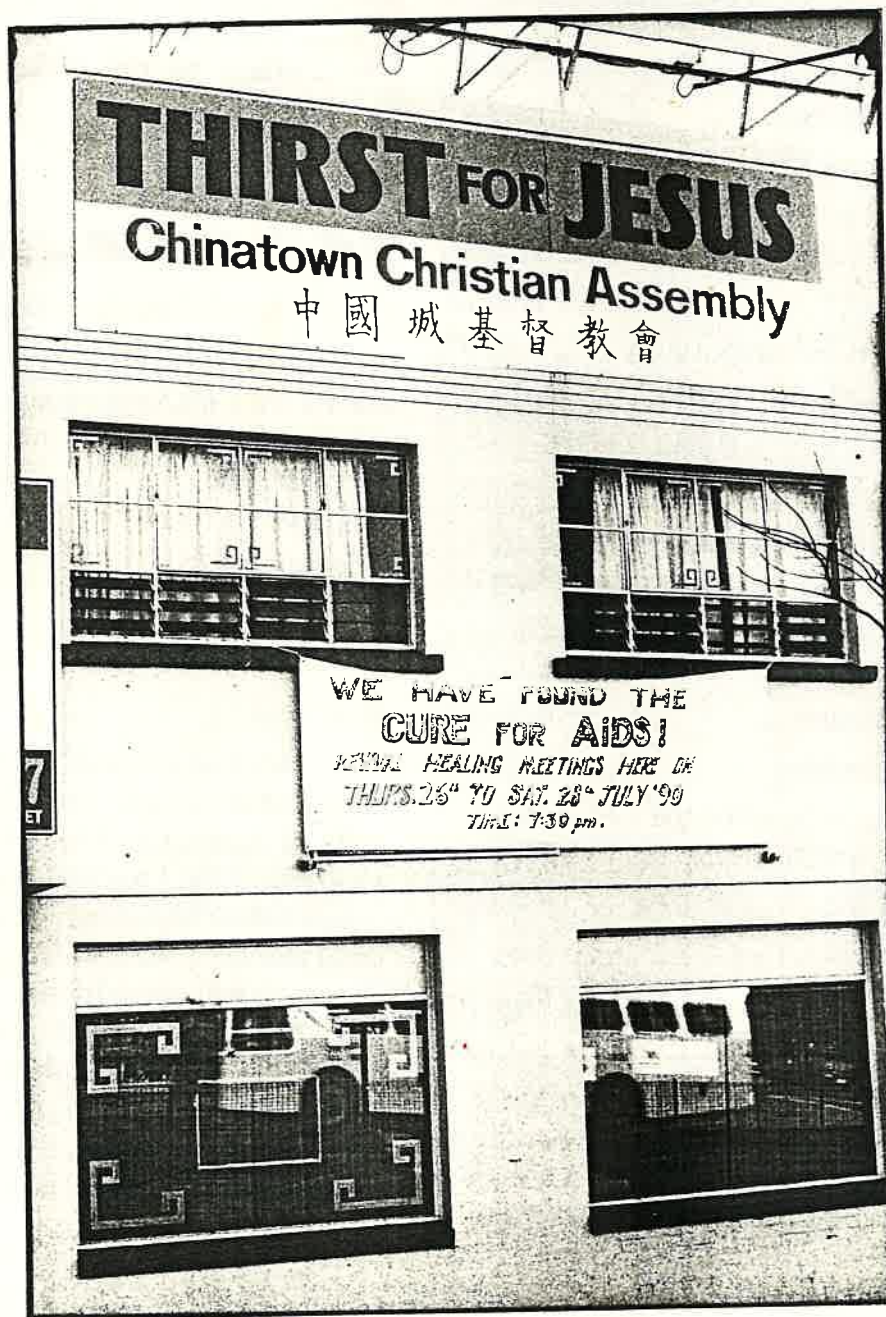


Dart News

MEMBERS' AND VOLUNTEERS' NEWSLETTER OF THE QUEENSLAND INTRAVENOUS
AIDS ASSOCIATION INCORPORATED (QuIVAA)

Summer 1991/92



In this issue:

Zen & the art of withdrawal

Arresting the HIV epidemic

Unhealthy drugs/unhealthy diet

Using in jail

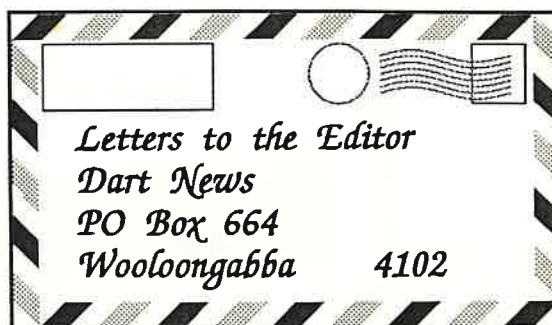
and much more...

Dart News

Contents

President's report	Page 3
Bones of Contention	Page 4
Zen and Now	Page 5
Overheard in the Office, QuIVAA Quotes	Page 5
Tash Talks; Drop-In Centre news	Page 6
New directions for QuIVAA	Page 7
Butterflies	Page 7
A cure for AIDS, or for the AIDS epidemic	Page 8
Is AIDS different for intravenous drug users?	Page 10
Stories of jail from prisoners and the Justice Dept	Pages 11, 12, 13
Project Nocturn	Page 14
What's Rumbling	Page 15
Fun at Picasso's, when the safe sex kit is launched, and floats	Page 15
Vitamins and other potions	Page 16
Safe using with Beej	Page 17
Dart Board	Page 18

The opinions expressed in *Dart News* are those of the contributors. They are not necessarily those of QuIVAA management committee, staff or members.



Dear Rubin & Dart News Team,

Just a note to say congratulations on such a fine *Dart News* edition. It's really great quality work and you've done an excellent job!!

Regards,

Michael Lane
(President)

Dear Dart,

I received my first *Dart News* a couple of weeks ago and thoroughly enjoyed it, although it took me a week or so to read fully! I particularly enjoyed the article called "My daughter, a known drug addict" which I took to school and showed a few of my friends. Some of them had already joined QuIVAA at the Safe Sex Kit launch, but the others got photocopies of forms to join so they could get *Dart* themselves.

Looking forward to my next issue,
Flame.

QuIVAA closes from 24th of Dec. to the
2nd of Jan. 1992 inclusive.

The Needle Exchange will be open on
Xmas Day, Boxing Day, and New Years Day
from 9am till 12 noon.

Dart News

President's Report

The findings of the Queensland Pharmacy Survey are now published and we delivered our media response along with Health Minister, Ken McElligott, at a special function at Parliament House on Friday (Nov. 29).

That function marked a new beginning in co-operative relations between QuIVAA, the Pharmacy Guild of Australia, the Pharmaceutical Society of Australia and the Society of Hospital Pharmacists. We're now more fully working towards the same goal... the reduction of HIV by supplying needles and syringes.

Our part of the deal is to start treating these people like allies rather than enemies, and you know what that means... if you want pharmacists to sell needles and syringes, give them the same courtesy and respect that you'd expect them to give you!

Now on a slightly less pleasant note... I title the next little piece **Minority Renewal???**

It seems to me we've become so inured to Big Brotherish intimidation that when an Outreach worker reported that the police were consistently out in force in the Valley Mall, taking names, etc., I almost let the matter slip.

This is conjecture,

but it seems to me that in the name of urban renewal, the authorities are trying to sweep the Valley's deviant problem under the mat, and that's bad news for Aboriginals, street kids, users, the mentally ill, trannies, gays, and the homeless.

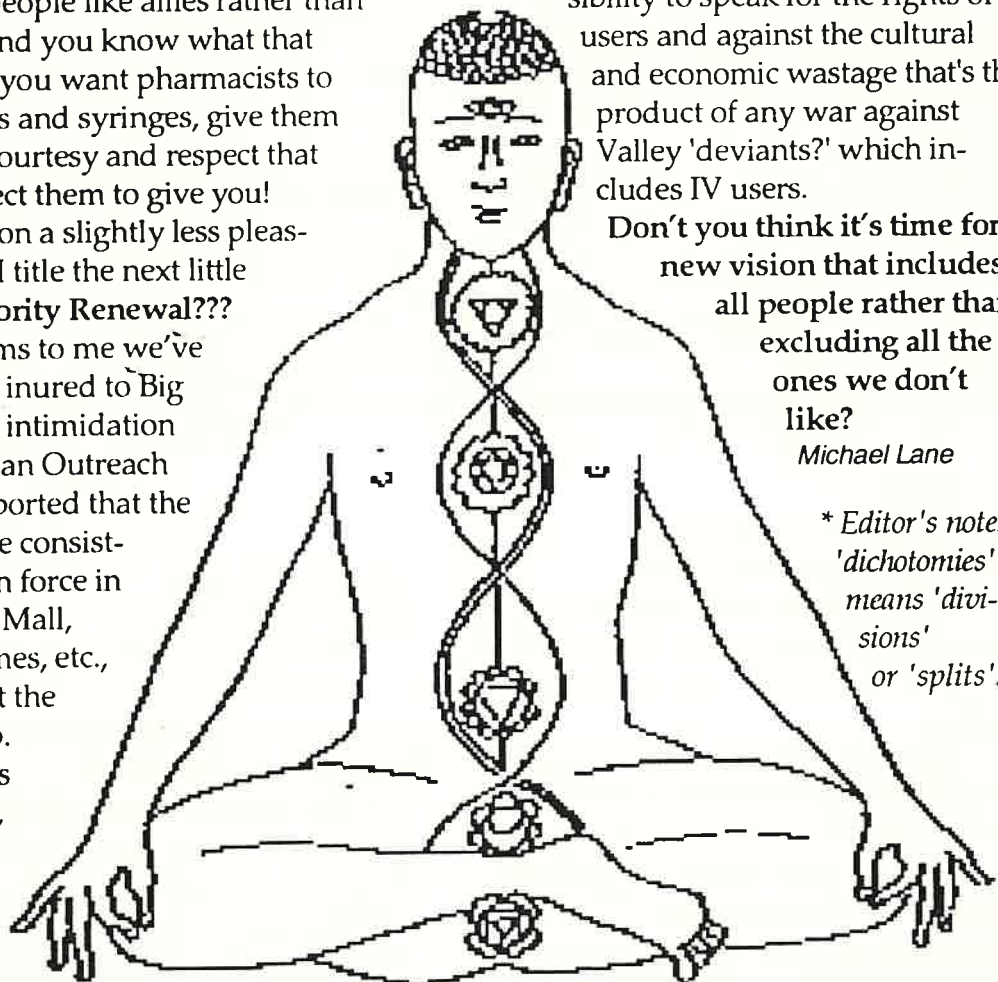
If the authorities naively believe that moving people on will result in those people simply disappearing, then they are sadly mistaken. Naive inability to accept reality is ultimately counter-productive and inevitably a waste of resources. This extends to the constant creation and recreation of social dichotomies. *

For our part, it's QuIVAA's responsibility to speak for the rights of users and against the cultural and economic wastage that's the product of any war against Valley 'deviants?' which includes IV users.

Don't you think it's time for a new vision that includes all people rather than excluding all the ones we don't like?

Michael Lane

** Editor's note: 'dichotomies' means 'divisions' or 'splits'.*



Dart News

Bones of Contention

I have written a small retrospective of HIV and injectors for *Dart News*.

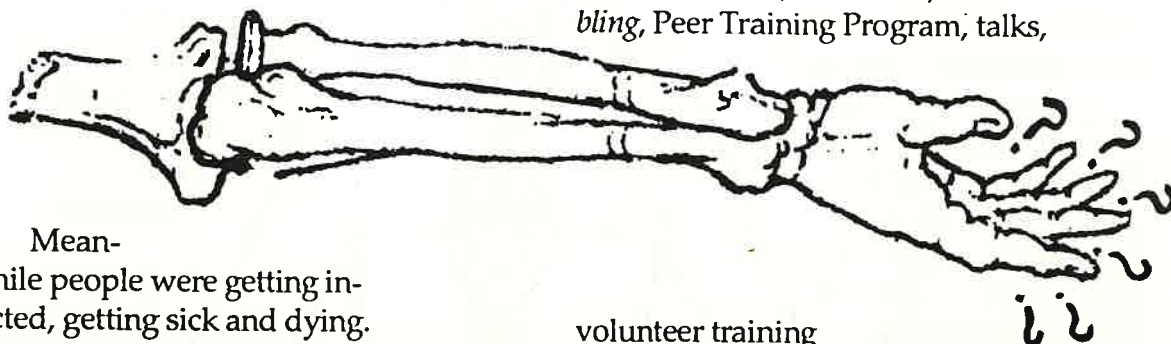
In this article I will discuss how QuIVAA has responded. But first a bit of history of AIDS. Take it away Sam.

AIDS created headlines in 1984/5 in Australia.

Who discovered the virus is to this day a bone of contention. Was it the French or the Americans and who really cares?

Men who had sex with other men were getting very sick with strange and exotic diseases which seemed to be linked to weakness of the immune system.

This led to the label of GRID; Gay Related Immune Deficiency. That label was immediately attacked by the gay community for being discriminatory, which it obviously was. Another bone of contention.



Meanwhile people were getting infected, getting sick and dying.

It was soon discovered that the virus affected recipients of blood products (transfusions, haemophilia treatments).

Another bone of contention: to test all blood or not? Fact: Since 1985 blood products have been screened for HIV.

Then injectors were recognised as being at risk. Pandemonium: "Those junkies will give it to everyone", or "Junkies are not responsible", was a common response.

Yet another bone of contention.

Like the gay community, injectors responded to these assumptions, and began to fight for themselves.

1988 QuIVAA formed by users for users to prevent the spread of HIV within the injecting drug using community.

1989 Funding received. QuIVAA opened offices. We began to produce educational materials e.g. posters, coasters, videos; and go out into nightclubs and hotels. Workshops developed by users for users, peer education commences, *Dart News*.

1990 QuIVAA video project, drop in centre producing educational materials, QuIVAA facilitated the formation of both SCIVAA and GAIN.

1991 Needle and Syringe Exchange, workshops, media kit, safe sex kit, Project Nocturn, Drop-In Centre with Friday lunch and Tuesday movies, Street Outreach work, *Dart News*, *What's Rumbling*, Peer Training Program, talks,

volunteer training group formed, etc.

We have over the years responded as one of the premier Australian users groups; our focus always on preventing the spread of HIV/AIDS.

The future presents new challenges and differing responses to the epidemic. How will we respond and be effective with injectors in preventing HIV/AIDS and supporting our friends who have become infected?

Colin

What's Rumbling

Monday 9th

Streetwork Team West End, Valley and City Morning

Tuesday 10th

Streetwork Team West End Morning

Wednesday 11th

Closed till 12 noon Staff Meeting
1 pm Drop In Centre Open
Streetwork Team City Arvo.

Thursday 12th

Streetwork Team Stones Corner Morning

Friday 13th

Streetwork Team Toowong Morning
11 am Dart News team meeting
12 am Lunch for volunteers
1 pm QuIVAA Xmas party

Monday 16th

Streetwork Team West End, Valley and City Morning

Tuesday 17th

Streetwork Team West End Morning

Wednesday 18th

Closed till 12 noon Staff Meeting
Streetwork Team City Arvo.

Thursday 19th

Streetwork Stones Corner and Woolloongabba Morning

Friday 20th

Streetwork Team Toowong Morning

11 am Dart News meeting

12 noon Lunch for volunteers

1 pm volunteers forum with Michael

Monday 23rd

Volunteers needed to pack Safe Sex Kit
Streetwork Team West End, Valley and City Morning

Tuesday 24th

Streetwork Team West End Morning
10 am Peer Team Meeting
2 pm Drop In Centre video

Wednesday 25th

9am to 12 noon Needle Exchange only

Thursday 26th

9am to 12 noon Needle Exchange only

Fun at Picasso's

The safe sex kit launch was great. It was held at Picasso's nite-club, Spring Hill and what a venue that is. Outdoor seating, a pool table, and of course, free wine and entertainment. A questionnaire was given out to evaluate reaction to the kit. My favourite item in the kit was the postcard "These are some of my favourite things", covered in fits, water and spoons. The poster "Rebel with a condom" was very good and the "Queen of Fits" poster has grown on me although I'm still not so keen on the condom pack. Full marks for the safe sex kit and a round of applause for all those involved. Coogie provided some light entertainment, until his string broke. There was a speech about the kit with credit given where due. Then the kits were given out *en masse*. A rock 'n' roll/blues band was unleashed to ensure a perfect evening for the perfect safe sex kit launch, and got everyone up raging till they dropped.

Mark

**Don't forget Fridays -
Come to the Drop-In Centre on Fridays for Dart News meetings at 11am,
Lunch at 12 noon
Volunteers meeting with Michael Lane at 1pm
and on Tuesdays-
videos in the Drop-In Centre 2pm**

Dart News

Tash Talks

Drop In Centre News

"Anyone want a coffee?"
Come down to QuIVAA as the Drop-In Centre is really firing now.

Every Tuesday is **videos**. The last 3 weeks we've had *The Wall*, Pink Floyd; *Comic Strip*, you know the one, it's got the Young Ones in it, *Dead Ringer* was last week and next week will be *Angelheart*, a really good movie with Mickey Rourke, a hunk of spunk! Because it has been a successful little adventure it will be an ongoing event every Tuesday at 2pm.

Janine, who handles the **Nocturns**, is running out of badges and would

appreciate
some help doing more.

Come down and do some **badgemaking**; you can either colour in the already printed designs or make up your own logo - it's good therapy.

The volunteer meetings are going really well. It's a good feeling to see so many people coming to these meetings and having so much input into QuIVAA. If it wasn't for all you guys coming in I'd have nothing to write about! The volunteers meeting has had some members start drawing up a **volunteers code of practices and ethics**, which is going along well.

Fridays are really firing now, we have the **Dart News meeting** in the morning (at 11am), **lunch at 12** (\$1.50 gets lots of yummies for your tummy), and then the **volunteers meeting**.

I would also like to say thanks to the people who have helped with the different articles and poems for *Dart News*. I'd like to say a special thanks to the guy under difficult circumstances for your poem and story about using in jail. This is the last *Dart* for this year, so Merry Xmas from me.

People who want to write something for the **next Dart News**, do it! We're going to look at some aspects of the **methadone** business, so if you've got a brief story of your own, especially **positive tips**, then we would love to read it. Call Rubin if you need any help with writing it or to arrange typing.

We're getting a Xmas hamper together; it's not in a box, or a washing basket, it's in a really really groooovy and far out black cane basket - thank you Chris and John! Tickets are \$1.00 each. It's really good value!

See you next year, Love Tash. xxx

A.I.V.L. who?

Australian Intra-Venous League (A.I.V.L.) is the organisation that represents users at a national level.

QuIVAA has two representatives on the committee of A.I.V.L.

These are Michael Lane and B.J. Some of the issues currently being taken up by A.I.V.L. are: is bleach really as good as they say?; discrimination against users, HIV+ve and HIV-ve; A.C.T. heroin trials; pain management for users; and uniform State Laws on possession of needles and syringes.

These and other user based issues are important to all of us, users or otherwise if we are to prevent the spread of this virus effectively.

A.I.V.L. needs QuIVAA's support if it is to be able to tackle these important areas on a national level. So I will keep you all up to date with the latest news in future issues of this worthy journal. If you have any interest in any of the above topics there are articles and papers on most of them available at QuIVAA, just ask and we will photocopy any or all of them for you.

B.J.

Dart News

New and old directions

A special all-day meeting of staff and volunteers recently looked at the future directions they all wanted QuIVAA to take.

A lot of interesting ideas came up during the session, and at the end of the day several things were clear. People felt that QuIVAA should have a higher profile in the media and with the general public as well as the using community. The health area was seen as the main one for QuIVAA to work in but advocacy in other areas was also seen as important and needing development.

People felt that the intention of QuIVAA was to develop the fraternity of drug users and ex-users and their friends and family, and we have been successful there. We have credibility with the using scene in Brisbane and also with the health bureaucracy.

QuIVAA provides data to government services and publishes material for members and the general public as well as government bodies. We attempt to influence government policy as it relates to users.

We provide encouragement, support and hope to the using community, a group that has never before been represented by any organisation. QuIVAA fights discrimination and intercedes for people when they need help dealing with the Health Department, courts etc.

QuIVAA helps other groups who are serving the using community, such as SCIVAA and SQWISI.

We provide safe using/safe sex information and material, and education to go with it.

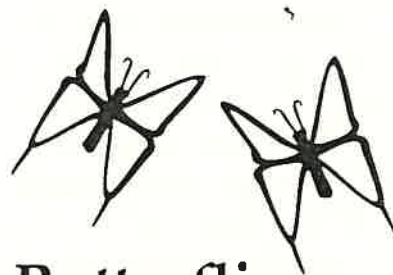
So our future directions include our old projects continuing and in some cases expanding, and a higher profile generally. Our particular field will be to work towards harm reduction in the using community and improving both

the knowledge and the general health and wellbeing of that group.

This was a preliminary meeting and will go a step further at the Project Implementation day planned for Dec. 7th.

Please come along to volunteers' meetings at 1pm on Friday afternoons, or write to *Dart News* if you want to have immediate input, and have your views heard.

Felicity



Butterflies

The Health Dept. has some grave concerns about the dispensing of Surflo equipment to users. QuIVAA's concerns are about the safety of users. Herein lies the dilemma of the great butterfly debate. To continue to supply this particular item of injecting equipment we need to know that we are protecting users and not contributing to the inherent dangers (perceived or otherwise) of injecting behaviour. Do you see my point? So, if you have a need for butterflies, can you bring yourselves to become a little more vocal in your requests by signing a petition, just your initials will do, stating the obvious demand and clearly pointing out that if they are available they will only be used the one time and no attempts will be needed to clean them. The cleaning issue is the big one. Apparently, they can't be cleaned once they are used.

We know that they *are* being cleaned and reused in the face of current unavailability and this is a plank of our argument for starting to supply them again. The petition will be in the exchange at QuIVAA, then it's up to the Management Committee.

Beej.

Dart News

A cure for the AIDS epidemic

Since the HIV/AIDS epidemic started it has infiltrated the injecting drug community and cannot be eliminated. Since 1989 it has not been possible to rationally discuss injecting drug use without considering AIDS.

Today the crisis needs the unifying of HIV/AIDS as a single issue with a single policy response - and new laws to minister to today's problems.

Drug problem out of control

If we consider that our drug problem has got out of hand in recent times - it is reasonable to ask if this policy to eradicate drug misuse should have its effectiveness monitored.



One thing is certain: we cannot fiddle with drug laws when doing so increases HIV risk behaviour. HIV has the potential to saturate our user community. The magnitude of such a tragedy in personal and social terms is permanent and must be taken into consideration when policies are being set.

3 responses from NCADA

The major aim of HIV prevention programmes is to eliminate HIV transmission by injecting drug use.

The new N.C.A.D.A. has three responses to drug use; demand reduction, supply reduction and harm reduction. When conflict arises harm reduction strategies should take precedence over the desire to reduce drug use.

Civilian casualties in the drug war

Our Fitzgerald inquiry found that the war on drugs has caused more incur-

sions on the civil liberties of ordinary people, more corruption and more interference in normal life than almost anything else. A new approach is needed. Drug law reform is necessary for many reasons.

Law reform

Fitzgerald pointed out that the CJC research has to be conducted objectively, in the public interest and focus on social need in the use of (police) resources, totally free of political considerations and includes the searching for and assessment of relevant initiatives and systems elsewhere.

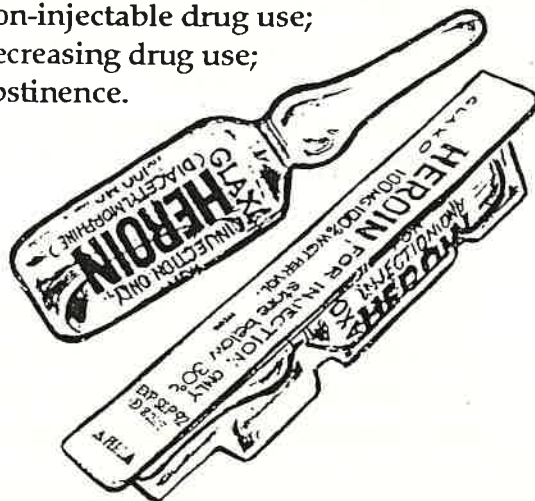
Where to look?

Perhaps the CJC could be guided by the following principles:

1. The spread of HIV is a greater threat to public health than drug use, and priority should be given to services which aim to minimise HIV risk behaviour.

2. Services should maximise contact with those who continue to use drugs and help them change their behaviour towards less risky practices particularly regards HIV, by adopting the following hierarchy of goals:

- stopping people sharing injecting equipment;
- moving people from injectable to non-injectable drug use;
- decreasing drug use;
- abstinence.



Dart News

3. Changes in professional and public attitudes to drug use must be encouraged, to maximise contact with and change the behaviour of drug users.

4. Services should experiment with a variety of approaches to achieve these aims and monitor their effectiveness.

Mersey RHA Program

These principles guide the Mersey RHA and their effect is profound.

For a number of years to November 1991, there has been no HIV transmission by injecting drug users in the Mersey RHA.

Heroin dealing and demand on the black market is substantially reduced as is drug-related crime.

Police have a warning system for first offenders on all drugs including heroin, with 85% not re-offending.

A treatment program is available to habitual users of amphetamines and cocaine as well as heroin and methadone.

Treatment drugs are available from swallowing and snorting to smoking and injecting.

The Atlantic Project

The Atlantic Project in Mersey is willing to assist in the design, implementation and evaluation of realistic HIV / drug initiatives. They produce and disseminate educational material to this end.

The National Centre for Epidemiology and Population Health (N.C.E.P.H.) has released a 2 volume document "Feasibility Research into the Controlled Availability of Opioids". This research was achieved with help from the people in Mersey and is an innovative and effective approach to the drug problem. The Government of the A.C.T. is considering this research and our CJC is bound to consider it.

Legal heroin shock horror!

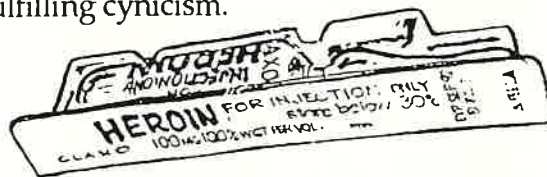
It is difficult to understand the media mindset which reduces this research to the absurdity of "legal heroin" headlines. There seems to be a media need to bury all HIV / drugs issues under theological godswallop, emotional clap-trap and moral rectitude.

"A cure for AIDS" - as a simple newspaper screamer, is no further from the truth than "Legal heroin" is.

HIV prevention programmes must seek their goals wherever there is a glow of hope. Simple changes in policy and the law can keep the epidemic exactly where it is for people who inject drugs. That must be achieved here.

Preparing the way

It is essential to raise both the quality and quantity of informed debate. Fitzgerald stated that it is informed public opinion which will ensure the maintenance of political will to implement his report. No community can afford to be complacent or lapse into self-fulfilling cynicism.



After spending \$23 million it would be a tragedy to slip back into the social disaster of the pre-Fitzgerald era. Strong and recent memories call for a reform process to continue smartly and if necessary be carried out in a way that removes "political considerations". Perhaps this is achievable through the stated permanent role of the CJC, to provide the Commissioner of Police with policy directives, based on CJC research investigation and analysis. These directives would cover law enforcement priorities, etc...

One more over simplification comes to mind: **silence equals death.**

Mick

Dart News

Is AIDS different for IDUs?

Whilst a lot of information has been gathered about HIV infection in gay men, a lot less is known about how HIV affects users. This is partly because there haven't been the same numbers of users diagnosed and treated over the years as there have been gay men, so research in this area hasn't been a priority. There are also a number of other issues which affect this, including users' lack of access to medical treatment, and distrust of the medical profession by users.

Queensland also has a number of specialist AIDS medical services and community based support services for people living with HIV. These services were established in response to the effect HIV was having among the gay community and so based within the gay community.

These groups, while providing invaluable services, are not easily accessed by IDU. The result is that needs of HIV positive users are not being met, or differences being acknowledged.

So what are the differences? Research from America indicates that the way that HIV is expressed in users is quite different to the patterns seen in the gay community. While it is not possible to predict exactly what will happen to any individual, some trends can be stated.

The major differences would seem to be: Lower rates of Kaposi's Sarcoma. This is a blood vessel cancer, (sometimes called a skin cancer because it often appears as purple or pink spots) which has been common in the HIV positive gay community, but appears in less than 4% of users.

Lower rates of cytomegalavirus and herpes.

Cytomegalavirus is a common virus that

can cause hepatitis, pneumonia or loss of sight, depending on which organ system it attacks. Again, this is less common in users.

Higher rates of:

Bacterial pneumonia, which causes fluid to build up in the lungs.

Tuberculosis (TB).

Endocarditis, which is a heart disease.

Cryptococcal disease, affecting the brain.

Toxoplasmosis, a parasite which affects the brain and sometimes heart and lungs.

Pneumocystis carinii pneumonia (PCP), a parasite which affects the lungs.

The differences in these patterns can possibly be explained in terms of different levels of exposure to infection through lifestyle and social factors. The implications however, are that HIV infection is not diagnosed as early in users because they don't have the "normal" symptoms of HIV progression. This means that diagnosis occurs and treatment begins at a much later time, if at all.

Painkillers

Pain relief for HIV+ users in hospitals is another important issue. There are many cliches used; things like "s/he's just faking it to get drugs", "your methadone dose should be enough" are common examples of statements which lead to poor quality of care for users.

The issues surrounding HIV+ve users are enormous. So what to do? One way to change a situation is to talk about it and gather information. QuIVAA keen to hear from HIV+ve users, or anyone who is interested in finding out more about treatment and care. So give us a call.

Extracts reprinted from an article by the NSW Users & AIDS Association.

Dart News

Peruse the Kingdom

I watched B40.

Blue came out rubbing his pointer between nose and lip.

He straightened his Rays, then with the nonchalance of a "fuck you Jack" introduced PURPOSE with DIRECTION by eight stepping and stopping two doors down. He leant against the railing.

Check it out. The Kingdom. Peruse the Kingdom.

I could see him and he couldn't see me and so I watched him while he leant over the railing, staring the scene still, like I probably would have, still framing the screws there, meaning OVER THERE, frozen in the sunlight and in the distance and I am OVER HERE and it's all RIGHT here, and I watched him letting the thoughts run through me.

And the door to B40 opens and closes and Dave pushes his shades a little further into the bridge of his nose before he joins Blue at his place on the balcony and together they peruse the Kingdom. Beneath the cool that shades secure, evaluations are being made, modified, examined and maybe even commented on in the balcony.

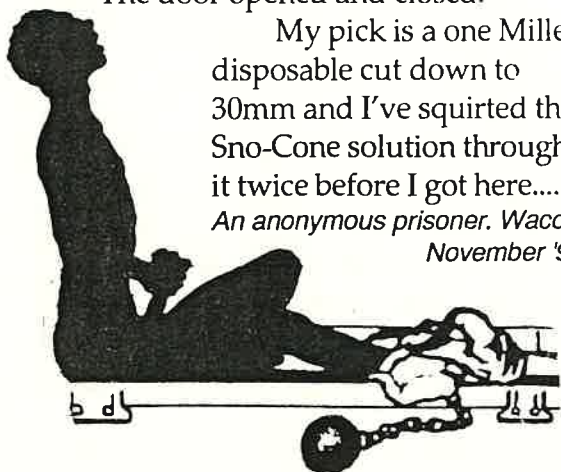
I know this language, this scratch and rub and cool posing language, this languid language of nods and half remembrances. B40.

Unrehearsed the spiel of Need readied the phrases.

The door opened and closed.

My pick is a one Miller disposable cut down to 30mm and I've squirted the Sno-Cone solution through it twice before I got here....

An anonymous prisoner. Wacol, November '91



Positively Boggo!

Last time I was on remand I was hanging out. I was on methadone, but just before going inside, I was reducing 10mg a day so I could feel the hammer (heroin) more; I was dealing at the time. So by the time I was in remand I was hanging from both lack of methadone and hammer.

The screws knew I was hanging out (I'd just been busted and looked really bad). They stuck me in the prison hospital for two fucking weeks. All they gave me was my Dilantin. At first they wouldn't give me my Valium, but one time the doctor came to see me and I was having a fit at the time (so she couldn't really see me). I was screaming out a lot "I want to go to prison!" Finally, when I was out of hospital, I talked to the doctor and told her the Valium helped my fits. She told the sister "I've seen this girl in action", and prescribed Valium three times a day. I was still hanging from a lack of methadone.

I was lucky. I knew about half the girls there. One of them got a 'good' visit and laid a taste on me. The dope came in ready mixed and ready to go, in a cut down 1ml syringe. She hit me up in my slot. It was a Sunday morning (cell cleaning time). I was fucked, a shaking mess, so 2 girls came and told me to lie down, and they tidied my cell up for me.

One time I remember there were 3 girls and only one fit. I got them some bleach (stole it from the kitchen). Most of them knew the 2x2x2, though they didn't practice it all the time. You know what it's like when you've got hammer - you just want to get it into you as fast as possible. So that went on.

I was the only HIV+ve, so I always made sure that I didn't infect anyone else. The girls I hung with knew I was

Dart News

HIV+ve (in fact, I think the whole prison knew - but I never got any shit from any crims) and they were really great. A lot of times I'd freak out about little things (to do with infecting them) and they'd say to me "Snap out of it". They weren't scared of touching me and stuff like that.

There was one time - it was really funny. We were standing around waiting to get our medication, and this other girl grabbed me right in front of the screw and full-on kissed me - a very passionate kiss. I know she only did it to show the screws there's nothing to fear. Afterwards, to blow her out, she turned to the screw, still hugging me, and said really sarcastically "Well, I guess I'll be dead in the morning. Are you going to charge me for this?" (She was in for murdering 3 people).

Sometimes there was lots of dope after the weekend visits - sometimes zilcho. One time a girl came and asked for my fit because she wanted to give it to someone she didn't like, to infect her! It was clean anyway. I said "It's bleached" but it was the only one I had

so I didn't want to loan it out anyhow. I was more paranoid of infecting the girls than they were of getting infected.

The screws had me eating at a table on my own with a plastic knife, fork and plate - just for little old me. I had to wash my dishes separately too. And do my own washing. But I'd go to do it and the girls would say "Fuck off out of the kitchen"; it was the same in the laundry. So really the girls knew more about HIV and how you got it than the screws did. They were more interested in learning the facts about it than the screws.

One time I took back a HIV guff sheet and tried to give it to one of the screws who was dead ignorant and giving me a hard time. She said "I don't need to read that: I know all about it."

So really the jail system was trying to isolate me but they didn't have the space - and also the girls wouldn't let them.

Every morning muster, in front of 4 screws, the girls used to give me a morning kiss. It was excellent the way they stood by me. It helped heaps.

An anonymous ex-prisoner

At last - AIDS info in Queensland jails!

The Department of Justice and Corrective Services now has a project officer responsible for HIV/AIDS education. Ms. Dianne Roughley is introducing a peer education pilot programme at Wacol prison. She hopes to train 12 prisoners who will pass on the message to others.

A similar programme has been operating successfully in NSW jails since 1987. Prisoners learning from other prisoners as opposed to 'experts' has been shown to create credibility. Prior to this pilot programme Queensland prisons have stated they provide HIV/AIDS videos, pamphlets & pre-test counselling

(HIV tests are compulsory) though the writer neither heard of or experienced any of these (except the HIV test) when he was in Moreton Reception Centre early this year.

One of the positive points of the new project is that factual information helps dispel the myths that surround the virus and the discrimination suffered by prisoners identified as HIV+ve. The negative factor is that once you have the knowledge there are few ways that one can employ it (apart from abstinence). **No bleach, no condoms, no fits & no methadone create a fertile breeding ground for transmission of the virus.**

Rubin, Editor

Dart News

Risky business... using drugs in jail

It's Monday night and hey! that's your name they're calling out; "Report to Surgery, report to Surgery!"

If that's your name and you had a taste less than 3 days ago or a smoke of dope within the last 30 days, you're in the shit.

Did you know that this can happen to you?

7 days in the D.U. (Detention Unit) - no blankets or mattress during the day - no smokes too.

Loss of all privileges - outside visits, L.O.A.s (Leaves of Absence) cancelled for up to three months and longer if they choose...

It's not in the regulations sure, but now they view you as a security risk and what they say goes.

In the grey area, Management holds the matches and you're in the black part of the grey.

You'll lose your employment and be stranded looking at palm trees in the Greenland of Wacol's compound. Is that what you want?

How about having your parole/ Work Release/ Home Detention application refused?

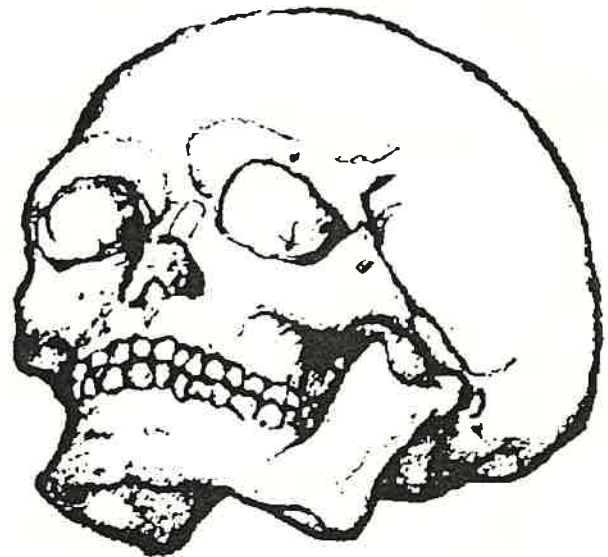
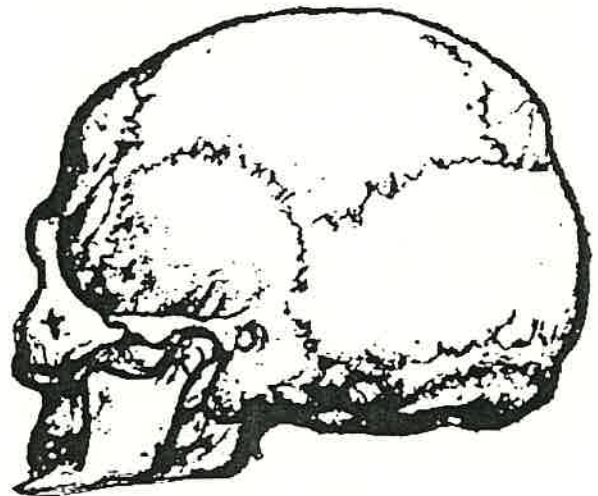
Or every day you've accumulated as remission on your sentence now having to be served?

It can happen. It does happen. Hey, I'm not trying to scare you mate... but shit happens... and when you're in this place it happens often enough for you to be made aware of it. If you want to make it out - no man - it's your choice and I know you'll make a choice - but man...

If they say to you, "This is a serious charge and we could, if we choose, have it heard as an outside charge in Court," know they're going to take every good thing you've accomplished for yourself

during your sentence and crumple it in front of your face. They'll reclassify you as spit and smear your record with this shit and in the weeks to come say "How're you doing?" and if you think they care, you'd best act repentant and pull out the routine if you've got it... If while you're in jail you choose to use, know what you stand to lose... this is some of it, and the choice remains yours... good luck!

Anonymous prisoner



Dart News

Project Nocturn has a busy social life...

In the last 12 months Project Nocturn has been to 26 different venues. 20 of them were personal invitations from the clubs and other diverse places. To give you a little peep into some of the spots we've been to..... OK! We kicked the year off doing the rounds of the different Universities and colleges for Orientation week. Then there was the 4ZZZ market day and the Fringe Festival in the park also. I can't leave out the Sleaze and Hookers Ball, and the City Mall for Youth week and many many more. There are also many night clubs which we frequent, like the Orient.

Clever and Dick, the condom costumes, have gone to quite a few venues this year and even featured on TV during the opening of Youth Week.

Project Nocturn has proven to be a successful tool for QuIVAA in the area of giving out AIDS prevention information, which we do in the form of condoms, posters, pamphlets badges, stickers.

It has been a very productive and enjoyable year. We now have such a

good name out there that the demand for this project is more than we can supply, and I have had to decline many invitations that were offered.

On each Project Nocturn I have always taken volunteers with me. I would like to thank all those people, as without their unpaid work the project would not have run so smoothly.

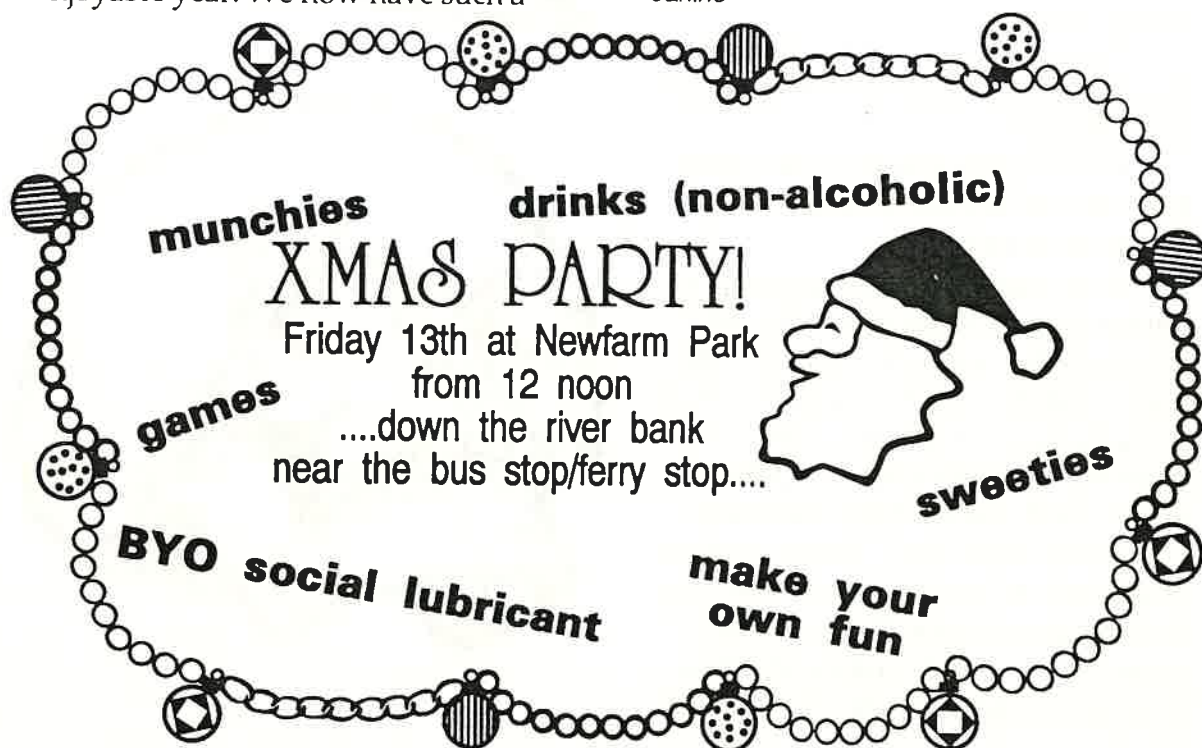
What continually kept me going was the optimism and appreciation shown by the people I met on the project. Some people have shown their appreciation by making donations at the Project Nocturns.

I hope next year will be as successful and enjoyable as this one has been.

So to all who helped with this project, thanks again. Anyone who is interested in any aspects of Project Nocturn, feel free to contact me on 8447440 and you will be welcomed as a new member of the team.

Have a great Xmas and New Year everyone; see you next year.

Janine



What's Rumbling

Monday 9th

Streetwork Team West End, Valley and City Morning

Tuesday 10th

Streetwork Team West End Morning

Wednesday 11th

Closed till 12 noon Staff Meeting
1 pm Drop In Centre Open
Streetwork Team City Arvo.

Thursday 12th

Streetwork Team Stones Corner Morning

Friday 13th

Streetwork Team Toowong Morning
11 am Dart News team meeting
12 am Lunch for volunteers
1 pm QuIVAA Xmas party

Monday 16th

Streetwork Team West End, Valley and City Morning

Tuesday 17th

Streetwork Team West End Morning

Wednesday 18th

Closed till 12 noon Staff Meeting
Streetwork Team City Arvo.

Thursday 19th

Streetwork Stones Corner and Woolloongabba Morning

Friday 20th

Streetwork Team Toowong Morning

11 am Dart News meeting

12 noon Lunch for volunteers

1 pm volunteers forum with Michael

Monday 23rd

Volunteers needed to pack Safe Sex Kit
Streetwork Team West End, Valley and City Morning

Tuesday 24th

Streetwork Team West End Morning
10 am Peer Team Meeting
2 pm Drop In Centre video

Wednesday 25th

9am to 12 noon Needle Exchange only

Thursday 26th

9am to 12 noon Needle Exchange only

Fun at Picasso's

The safe sex kit launch was great. It was held at Picasso's nite-club, Spring Hill and what a venue that is. Outdoor seating, a pool table, and of course, free wine and entertainment. A questionnaire was given out to evaluate reaction to the kit. My favourite item in the kit was the postcard "These are some of my favourite things", covered in fits, water and spoons. The poster "Rebel with a condom" was very good and the "Queen of Fits" poster has grown on me although I'm still not so keen on the condom pack. Full marks for the safe sex kit and a round of applause for all those involved. Coogie provided some light entertainment, until his string broke. There was a speech about the kit with credit given where due. Then the kits were given out *en masse*. A rock 'n' roll/blues band was unleashed to ensure a perfect evening for the perfect safe sex kit launch, and got everyone up raging till they dropped.

Mark

**Don't forget Fridays -
Come to the Drop-In Centre on Fridays for Dart News meetings at 11am,
Lunch at 12 noon
Volunteers meeting with Michael Lane at 1pm
and on Tuesdays-
videos in the Drop-In Centre 2pm**

Dart News

Tash Talks

Drop In Centre News

"Anyone want a coffee?"
Come down to QuIVAA as the Drop-In Centre is really firing now.

Every Tuesday is **videos**. The last 3 weeks we've had *The Wall*, Pink Floyd; *Comic Strip*, you know the one, it's got the Young Ones in it, *Dead Ringer* was last week and next week will be *Angelheart*, a really good movie with Mickey Rourke, a hunk of spunk! Because it has been a successful little adventure it will be an ongoing event every Tuesday at 2pm.

Janine, who handles the **Nocturns**, is running out of badges and would

appreciate
some help doing more.

Come down and do some **badgemaking**; you can either colour in the already printed designs or make up your own logo - it's good therapy.

The volunteer meetings are going really well. It's a good feeling to see so many people coming to these meetings and having so much input into QuIVAA. If it wasn't for all you guys coming in I'd have nothing to write about! The volunteers meeting has had some members start drawing up a **volunteers code of practices and ethics**, which is going along well.

Fridays are really firing now, we have the **Dart News meeting** in the morning (at 11am), **lunch at 12** (\$1.50 gets lots of yummys for your tummy), and then the **volunteers meeting**.

I would also like to say thanks to the people who have helped with the different articles and poems for *Dart News*. I'd like to say a special thanks to the guy under difficult circumstances for your poem and story about using in jail. This is the last *Dart* for this year, so Merry Xmas from me.

People who want to write something for the **next Dart News**, do it! We're going to look at some aspects of the **methadone** business, so if you've got a brief story of your own, especially **positive tips**, then we would love to read it. Call Rubin if you need any help with writing it or to arrange typing.

We're getting a Xmas hamper together; it's not in a box, or a washing basket, it's in a really really groooovy and far out black cane basket - thank you Chris and John! Tickets are \$1.00 each. It's really good value!

See you next year, Love Tash. xxx

A.I.V.L. who?

Australian Intra-Venous League (A.I.V.L.) is the organisation that represents users at a national level.

QuIVAA has two representatives on the committee of A.I.V.L.

These are Michael Lane and B.J. Some of the issues currently being taken up by A.I.V.L. are: is bleach really as good as they say?; discrimination against users, HIV+ve and HIV-ve; A.C.T. heroin trials; pain management for users; and uniform State Laws on possession of needles and syringes.

These and other user based issues are important to all of us, users or otherwise if we are to prevent the spread of this virus effectively.

A.I.V.L. needs QuIVAA's support if it is to be able to tackle these important areas on a national level. So I will keep you all up to date with the latest news in future issues of this worthy journal. If you have any interest in any of the above topics there are articles and papers on most of them available at QuIVAA, just ask and we will photocopy any or all of them for you.

B.J.

Dart News

Vitamins... (continued)

zinc, germanium and protein. Also it's an anti-fungal which combats candida albicans (thrush), microsporum, and epidermophyton.

Ginseng is good for fatigue, poor appetite and stomach disorders. Cheapest to buy from a Chinese supermarket.

Royal jelly is also good for fatigue and poor appetite. It contains all minerals and boosts your immune system.

Acidophilus is a friendly bacteria that lives in your intestine. This friendly germ produces vitamin B12 for your body to use. The intestinal environment induced by lactobacillus also inhibits parasites which are common in people with ARC/AIDS. Parasites can be dangerous as they interfere with the absorption of food, and can induce malnutrition. Antibiotics destroy acidophilus in your body, making it easier for candida to survive and flourish.

Acupuncture has been known to relieve and cure illnesses such as gastric ulcers, bowel cancer, nervous disorders. It has been proven to increase T cell ratio and B cells, and normalise lymphocytes.

Massage is extremely important for HIV+ve people. It relieves stress and helps the blood flow evenly through your body.

Lavender oil in the bath will help to soothe your skin as it is a natural anti-septic. 3-4 drops is enough.

Remember, the less chemicals we put in our bodies the less we tax an immune system already working overtime. The better our diet, the stronger our bodies will be. If you are sick, a vitamin supplement will help your body fight infection.

Pat

(Extracts taken from NSW Positive Women Newsletter, Vol. 1, No. 1, which is an excellent publication you can read in the QuIVAA library.)

Have you ever met an expert you can trust?

How many times have you been ripped, and in the company of great people that you probably met yesterday, if you get my drift, and suddenly it's time for another taste. You all want to be first and some caring person has broken the picks off most of the used fits. Now there's not enough to go round.

So, out come the old three glasses, onto the kitchen table. Some people on this side of the table, some on the other. Everyone is shitfaced anyway. Which glass was used first? Is this the one with clean water in it? Which end did you start at? Is this the one that may have some blood in it? Can you remember? And which side of the table am I on anyway? Did I start on this side or the other? I'm too stoned to remember now, man. Besides all the confusion, is the bleach still any good? How long ago was it bought? Has it lost its potency over the ten months since we bought this huge bottle that was going to last for ever? Does anybody know the answer to these questions? Does anyone care? Is it true that no one really knows? Isn't it time that we, as practising users, took the time to find out?

Yes, you say we don't need any practice, very funny, but seriously, very little research has been done on these and other topics that may be of vital concern to those of us who enjoy the odd taste or two. If we can instigate some action on these grey areas of safe using we all might survive this epidemic. In the meantime, **use a new fit every time that you inject; it's the only really safe practice.** You can stock up at QuIVAA. We will supply as many as you request.

So folks, be prepared, and be safe.

Beej.

Dart News

Dart Board

ADDS

Alcohol and Drug Dependence Service
270 Roma Street
Brisbane, Qld. 4000
Phone: (07) 236 2400
Alcohol and drug treatment and issues.
Needle and syringe exchange.
Hours: Needle exchange open seven days a week.
Office hours: Mon to Fri. 8 am to 5 pm.

ADIS

Alcohol and Drug Information Service
270 Roma Street
Brisbane, Qld. 4000
Phone: (07) 236 2414
Free phone: (008) 177 833
24 hour phone counselling and information available.

AICHS

Aboriginal and Islander Community Health Service.
10 Hubert Street
Woolloongabba, Qld. 4102
Phone: (07) 393 0055
Medical and dental help for Aboriginal and Islander people, women's health, AIDS education, nutrition advice, referral, advice and welfare.
Hours: Mon. to Fri. 8.30 am to 4.30 pm

AMU

AIDS Medical Unit
6th Floor, 63 George Street
Brisbane, Qld. 4000
Phone: (07) 224 5526
Testing for HIV outpatient services, pre- and post-test counselling guaranteed.
Hours: Monday to Friday 9am to 4.30 pm

BYS

Brisbane Youth Service
702 Ann Street
Fortitude Valley, Qld. 4006
P.O. Box 1389
Fortitude Valley, Qld. 4006
Phone: (07) 852 1382
AIDS Education for and by young people, community art, AIDS education, detached youth work, support provided to at-risk youth.
Hours: Mon. to Fri. 9 am to 5 pm

Community AIDS Support

Valley Community Psychiatry Service
162 Alfred Street
Fortitude Valley, Qld. 4006
Phone: (07) 854 1605
A specialised counselling and support service for people with HIV, their partners and family.

NA

Narcotics Anonymous
P.O. Box 159
North Quay, Qld. 4002
Phone: (07) 391 5045 (24 hours)
Self-help groups run throughout Brisbane for those interested in talking about or taking action on their drug use.

Prisoner and Family Support Association (Qld)

54 Mollison Street
South Brisbane, Qld. 4101
Phone: (07) 844 6608
Welfare and social support for prisoners, ex-prisoners and their families.

Dart News

Dart Board

QuAC

Queensland AIDS Council Incorporated.
522 Stanley Street
Mater Hill, Qld. 4101
Phone: (07) 844 1990
Fax: (07) 844 4206
Hours: Mon. to Fri. 9 am to 5 pm
Welfare and education of the
community. Support of HIV+ve persons
and accommodation.

QuIVAA

Queensland Intravenous AIDS
Association Incorporated
3 Water Street
Mater Hill, Qld. 4101
P.O. Box 664
Woolloongabba, Qld. 4102
Phone: (07) 844 7440 (3 lines)
Fax: (07) 846 5187
Free phone: (008) 172 076
Hours: Mon. Friday 9 am to 5 pm
Education, Needle and Syringe
Exchange, Advocacy, Referral and
Support. Includes AIDS workshops,
Outreach Streetwork, Project Nocturn,
design and production of education
materials, *Dart News*, Peer Education
Team, Drop In Centre.
Come along and learn a new skill.
A user friendly service.

QPP Community Centre

5 Allen Street
Woolloongabba, Qld. 4101
Phone: (07) 846 3939
Support and advocacy for those infected
with HIV / AIDS. This is a warm friendly
at home type service. It offers a
supportive environment, massage and
relaxation therapies. Regular support
groups for HIV+ve people every

Tuesday 7.30 pm. A partners, family and
friends group meets on the first and
third Thursday of the month 6 pm.
Friday open day evening meal served at
7 pm.

Hours: Monday to Thursday 10 am to 3
pm, Friday 10 am to 10 pm

SQWISI

Self Health for Queensland Workers in
the Sex Industry
65 Vulture Street
West End, Qld. 4101
Phone: (07) 844 4565
This number is also a 24 hour emergency
number. SQWISI will return your number
within 5 minutes.
Education, support, referral, needle
exchange, outreach in the community.
Education for women, men and
transsexual workers.
Hours: Mon. to Fri. 9 am to 5 pm

Women's House

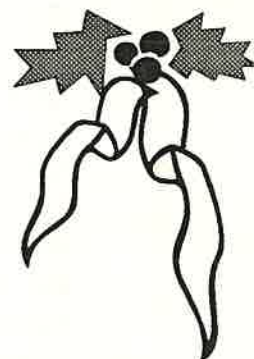
14 Brook Street
Highgate Hill, Qld. 4101
Phone: (07) 844 4008
Counselling and information for women
includes rape crisis, domestic violence,
incest, refuge, health issues and referral.
24 hours.

Youth and Family Service

Logan City
2 Rowen Street
Slacks Creek, Qld. 4127
Phone: (07) 208 8199
Primary health service, youth health bus,
HIV testing, needle and syringe
exchange. The bus operates around the
Logan area. Ring for details of location.



Management Committee, Staff and Volunteers
wish you a big fat Merry Xmas & Happy New Year.



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