

Drop in Centre & Office
111 Wickham Street
Fortitude Valley. Ph.252-2470.

DART NEWS

The QuIVAA Members & Volunteers Newsletter



inside...

hygienic injection
suggestions

new fits versus
used clean fits

the fear
pt 2

The NEEDLE EXCHANGE has
MOVED and is now open 7 DAYS a WEEK,
1 PM to 8:45 PM. see inside for more details!

ARE YOU

AN INTRAVENOUS DRUG USER & H.I.V.+

WE ARE SETTING UP A

SUPPORT GROUP AND WE NEED YOU!

What Are Your Needs ?

Let Us Know By Coming To Afternoon Tea

EVERY
WHEN: Monday-1pm

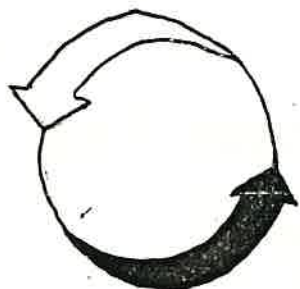
**WHERE: 5 ALLEN ST
WOOLLOONGABBA**

For Further Information Phone Dawn at QuIVVA on 252-2470
or Julie Litwin at Biala On 236-2400

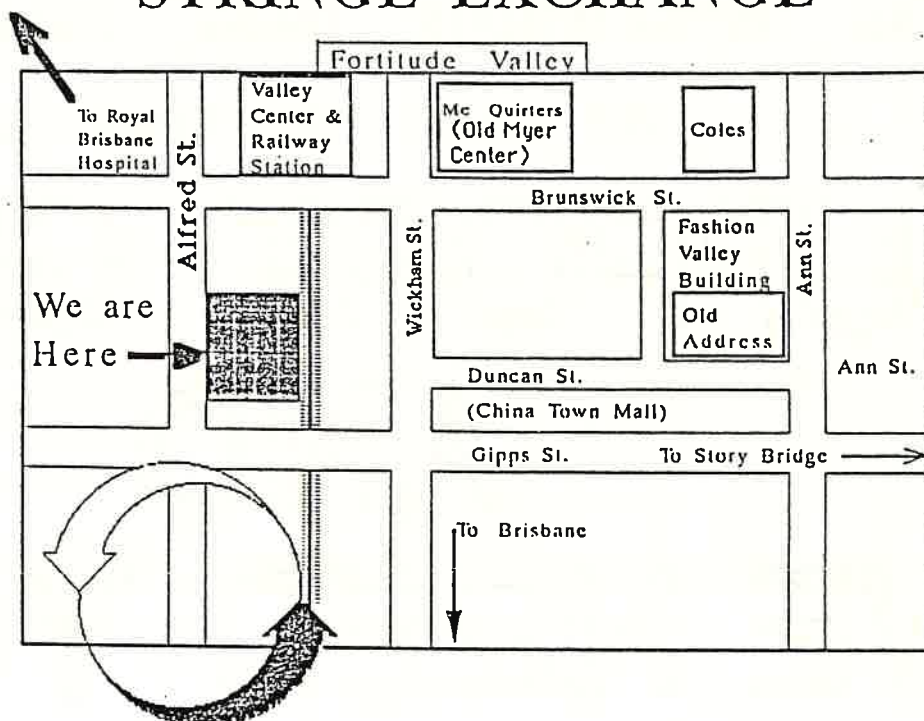
YES, the needle exchange
has moved at last.
There are a few changes
too.

The first of these is
the new hours.
The NEEDLE EXCHANGE
IS OPEN 7 DAYS A WEEK.
FROM 1 PM to 8:45 PM.
[This includes public
holidays.]

Secondly there is no
sign saying Needle
Exchange.
Instead : Look for
this logo.....



QLD. DEPT OF HEALTH
**BRISBANE NEEDLE AND
SYRINGE EXCHANGE**



Now available from New Outlet

1st Floor 162 Alfred St. Fortitude Valley
Hours 1pm to 8:45 pm.

Free-Confidential-Anonymous

For Information

Phone

Brisbane 236 2414

Country (008) 177 833

Clean Fits Free of Charge
Stop AIDS

Well, here we go again.
Another (the third in fact) edition of that journalistic wonder,
Dart News. I have been co-opted into the position of editorial
writer and hence this short piece. Perhaps I should therefore offer
some kind and apologetic words about its timing. But I shall plead
the 5th (remember the old American films?) and say it ain't my
fault. It would appear that most of the previously produced
material left the QuIVAA offices under mysterious circumstances.
So a lot more new material was put into the computer only to be
erased mistakenly (of course) by some do-gooder changing programs.
But enough recriminations (at this rate I'll be blaming myself, and
we can't have that can we?) This issue has an article from one of
the workers about the reasons for their involvement. The 'Helpful
Hints' article makes interesting reading- few things there that you
may not know. The big news is that by the time you receive this the
QuIVAA T- Shirts will be on the shelves ready for your perusal.
Colours to suit all tastes, prices for all. Tis good to end on a
happy note. See you for the next issue. And an especial 'Thank You' to Kathy.

NEW NEEDLES AND SYRINGES VS. CLEAN USED FITS.

New needle and syringe units certainly have a number of advantages over clean used fits. Legally you can say that you have bought them for some one else, who just happens to be using-though this may be a little hard to believe if you have extensive bruising on your own arms. New units also tend to have all their markings still intact on their side so as to be able to measure out dosages- handy in those times when there are two of you and only 1ml of peth.-after all, fair is fair. New units also tend not to have barbed points either- so it doesn't feel like you are shoving a knife into your body or leave huge bruise marks. New units also tend to have fresh rubber on the end of their plungers- this means that when you draw back you don't get bits leaking out when you are tapping the bubbles out.

New units also don't have little bits of dried blood inside them- which is why you should always clean your fits after using so as to avoid such unsightly spectacles. It is also easier to go fishing for those hard to find veins with a new unit- not having to suffer the humiliation of a vein rolling all because the needle wasn't sharp enough to penetrate the vein. And who can ignore that feeling of taking a brand new unit out of its wrapper and listening to those crinkling noises- though what to do with the wrapper afterwards can be a problem . . . Having a new needle and syringe also

means that there is no chance of the police charging you with anything- particularly unsafe disposal (which happens if you have an used fit in your pocket, instead of in a container which is resealable, puncture-resistant, and rigid walled.)

Of course there is one instance where clean used fits will always be superior to new needles and syringes, and that is when there are no new needles and syringes available. Whilst it is always important to use new equipment, it is by far more important to never share used fits. A fit that is cleaned using the 2 * 2 * 2 method (that's twice in clean cold water, twice in bleach and twice again in clean cold water) will help prevent HIV infection just as well as new equipment ever would.



LEGAL STATUS
OF
THE SUPPLY AND POSSESSION OF NEEDLES AND SYRINGES

Amendments to the DRUGS MISUSE ACT were proclaimed on may 6 1989. These amendments were introduced as part of a strategy to prevent the spread of the AIDS virus (HIV) through the sharing of contaminated needles and syringes. The following points are now relevant:

1. Needles and syringes may be supplied, without restriction, to any person for any lawful purpose.
2. Needles and syringes may also be supplied to any person by medical practitioners, pharmacists and persons approved by the Minister for Health for the purposes of illegal drug use.
3. Possession of needles and syringes is no longer an offence for any person.
4. Persons may be authorized by the Minister for Health to legally accept and dispose of the trace amounts of illegal drugs that may be contained in used needles and syringes (by disposing of the needle and syringe in the prescribed fashion).
5. Unsafe disposal of needles and syringes is illegal. The Drugs Misuse Act and the Health Act require that needles and syringes be disposed of in a rigid-walled, puncture-resistant, sealed container.
6. Possession of illegal drugs remains unlawful.

FOR FURTHER INFORMATION PHONE: ALCOHOL AND DRUG DEPENDENCE SERVICES (07)236 2400 or (008) 17 7833

THE FEAR (PART 2)

There are those that see a distinct relationship existing between Sydney and New York. There are anomalies to this though- 1 in 60 babies born in Sydney in the last year were not HIV-infected, but there were in New York. Here are some statistics that show what has happened overseas could be a real danger for Australia. HIV- infected IV drug users in Edinburgh rose from 0% to 51% in two years, Geneva 7% to 51% in four years, and Bangkok reached 30% in just fifteen months.

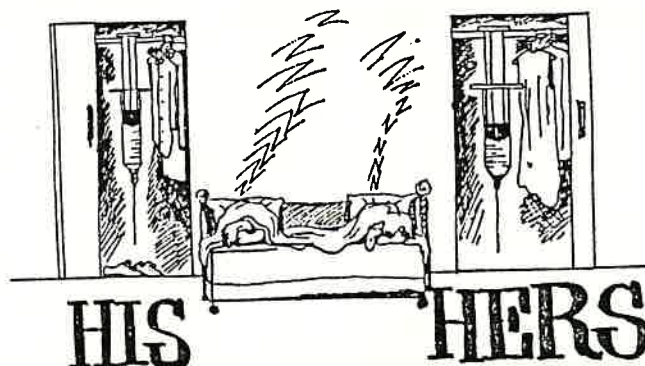
The first recognisable 'victim' of HIV infection through needle sharing remembers the occasion when it happened. A group of people were sitting around the room waiting for the heroin to arrive- five regular users and one teenager who had never tried the drug before. After his positive result was known, contact traces were made which turned up, among others, a person who had used intravenous drugs on only one occasion and had no other risk factors.

This shows the danger that occasional/first-time users are both in and present- most regular users understand (and it is hoped practice) safe needle and syringe use but for many reccos, the less often they use, the less of a danger they believe themselves to be in and the less chance that they will have of being infected. Do these people not

realise that it only takes one shot?

'Party animals' (those that hit up sometimes, particularly only at parties) are the ones who can become infected and then pass on the virus to many others through their unsafe practices. Five teenagers, some from private schools, are being counselled at Sydney's Albion Street AIDS clinic after being infected through shared needles at parties. The significance of this is more obvious when it is considered that whilst it takes ten years for 50% of HIV infected people to progress to Category 4 infection (AIDS), it only takes two hours from when a person is infected to when they become infectious. This, in effect, will mean that the number of HIV-infected children will increase, particularly where female IV drug users are sexually active and in their child bearing years.

A professor from Sydney's Macquarie University has said, "needle sharing is a social ritual which is very important . . . it is a question of sharing something between two people". Does the sharing of 'something' mean that users believe that the feeling of intimacy involved conquers the dangers of not only HIV transmission, but also other dangers such as Hepatitis? Somehow I think this professor has read too many novels in his youth. It has been my sheltered experience that sharing is



often the result of needle and syringe scarcity, rather than as a token of affection.

It has also been said that many young addicts, particularly those that have been injecting for awhile, are more concerned about death by overdose rather than with AIDS, which could take many years. To have this view also reflects a belief that all addicts stay addicts and will therefore die by overdose. What of those that decide to end their addiction? By then it may be too late to substitute the fear of death by overdose with death by AIDS.

Prisons also represent a very large danger to the outside community, particularly due to their oppressive atmospheres which causes a denial of the basic realities of what occurs within. How does this sound, "One guy here [Long Bay Jail] shared with a whole lot of people the night before his AIDS result came back positive." A 'whole lot of people' could mean an individual needle being used 30 to 40 times a day. Whilst that may not mean 30 to 40 people, it does indicate a surprisingly high number. And imagine how blunt that needle would be by the time it got to you if it had been used 29 times already!! The main problem is that whilst further transmission may be contained within prison walls, prisoners do get released which means that they do go on to form relationships. This means that if they are infected and are not aware of this,

another tier of progression of the disease will begin.

The only thing successfully combatting HIV transmission is education and although education by its very nature means that safe practices cannot be physically enforced, at least every person that ignores the education is personally responsible for exposing themselves to the virus. This doesn't mean that in circumstances, such as in prisons, where safe measures are not easily instigated the person is at fault. It means, rather, that nobody should share used needles no matter with who, nor where and that they should always practice 'No condom, No sex.'

It is easy enough with needles and syringes- if a fit hasn't come from an unopened packet before your eyes, take precautions and wash it. Twice in clean cold water, twice in bleach, and twice again in clean cold water. This is the 2*2*2 method. Compared to this, it will be very easy to get your own filter and spoon, and of course you should also have your own water. Condoms are very freely and easily available and also quite easy to use, particularly with a little practice . . .

If every person does their bit, and follows safe practices, then HIV infection will decrease to a minimal rate (perhaps zero . . .). After all, you don't catch AIDS, you let someone give it to you.

HELPFUL HINTS

As this newsletter is for and by, etc.,etc., users and ex-users, it was thought that the former may appreciate some helpful hints about safe and hygienic injection practices. After all, safe needle and syringe use should extend to more than just how not to become HIV infected. These suggestions will help devotees to increase the health aspects that often otherwise suffer in their lives, whilst still doing what they do. Naturally IV drug use can not be condoned . . . but seeing it does occur, at least it can be practised in the correct and safe manner.

1. Always use a clean needle and syringe.
2. If a clean needle and syringe is not available rinse out used equipment thoroughly with household bleach (2*2*2). That's twice in clean cold water, twice in bleach and twice again in clean cold water.
3. Apply a tourniquet and select an intact, superficial vein. If the vein overlies an artery (easily felt as it pulsates) it is advisable to inject elsewhere.
4. The safest places to inject are on the backs of hands, the forearms, the upper arms, and in front of the elbows. Feet and ankles are also good. The further from the heart the better.
5. The skin overlying the vein to be injected should be cleaned, either with an alcohol-swab, methylated spirits or soap and water. Be sure to rinse the soap off, however.
6. Always use your own personal, clean equipment eg. spoon, glass, water (preferably sterile but at least boiled).
7. If an acidic medium is needed to dissolve a substance always use a freshly sliced lemon. (Never use a lemon that has been cut and left for any length of time.)
8. After injecting, apply gentle pressure to the site to prevent bruising. Don't bend your arm, it can cause bruising.
9. Dispose of the needle and syringe in a sealable, rigid-walled, puncture proof container.
10. Use the needle and syringe only once.
11. Be sure to jack back so as to be sure you are in the vein.



On a recent Project Nocturn I was asked " Why I worked with QuIVAA?" and "Why I gave out AIDS prevention information?" To best answer this I'll leap back in time to 1982. I had just come back from Darwin and was sitting in a lounge room overlooking the backstreets of Kings Cross with two friends. The conversation eventually got around to discussing a recent television program on the new disease, AIDS. Being in a high risk category or two I got paranoid. I thought I've got AIDS. I was skinnier than I am now. Always had the flu or some other disabling viral infection like a runny nose. I was heavily into self medication at that time. I didn't know anything about AIDS. Any information I did have came from the mass media. The hysterical and completely inaccurate information I had got from television and newspapers reaffirmed my belief that I was infected. As if I didn't have enough to worry about. What the hell, oblivion here I come.

A month or two later I decided to move to Brisbane and get a few things together, like my model airplanes from childhood. Sydney was becoming a dangerous place for me. I kept in contact with friends in Sydney. Phone conversations (the reason I'm a pauper today) centred around people I had known who became infected with the

virus. I was beginning to understand the very real threat that AIDS posed to my lifestyle. I was scared. Christ, I'd enjoyed some pretty high risk activity. Yet I was too terrified to obtain factual information just in case I really did have AIDS.

After two years in Brisbane I had found out four people I had known had died through AIDS related conditions. One person was a very close friend. Their death prompted me to find out everything I could about AIDS. I obtained some pamphlets. This information helped to dispel some fears that I had. Being a self centred person I thought I may still be infected. I didn't do anything about it other than to practice safe sex. I had not used injectables for a couple of years by this time.

I had joined a program that helped me do something for myself as far as my addictive personality. Immediately I put on weight. I decided to see a doctor a get a test done for my liver. I told the doctor about my past risk behaviours. The doctor talked to me and suggested that I should be tested for H.I.V. (Human Immunodeficiency Virus, the virus which causes AIDS). I had to make a decision (I was not really good at making decisions) with the information that the doctor gave me I was able to make an informed choice. What the hell fear was consuming



me so I said yes and had the test done.

I had to wait a couple of weeks to get the results. During this time I found out my ex lover of many years was H.I.V.+ve. Shit! A cloud of depression came over me. I still felt a lot for this person. This was my first real deep love. We had spent seven years of our lives together. What if I was positive and passed the virus to my current lover who I had now been with for five years.

The days dragged by till the day came that I fronted up to the doctor and got my results. Thankfully the result had been negative. I somehow had negotiated years of risky behaviour without being infected. I felt I must do something to stop this insidious disease. I wanted to help in whatever way I could. My friends were dying.

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I met Jillo (the President of QuIVAA) through the self-help program. One night she came up and said, "Hey, want to come to a meeting of QuIVAA?" Well I had never heard of QuIVAA so I asked her about it. What exactly QuIVAA planned to do in fighting AIDS? "Oh, QuIVAA is going to educate IV drug users about AIDS." After telling me all about the aims of QuIVAA and the people involved I thought well it won't hurt me to go to this meeting. I went and met the steering committee. I thought what a bunch of

crazies. They all laughed a lot and told some very funny stories, especially this guy who turned out to be a doctor. I was intimidated before I went but after ten minutes they got me involved. The first job I did was to address envelopes. From the first meeting I got to know people who like me wanted to prevent AIDS. We all had that in common.

By being involved I learned a lot about myself and that I too had a valuable contribution to make. I did workshops on AIDS and over the past year gathered heaps of knowledge. I've made mistakes over the time I have been with QuIVAA but that has been O.K. I have learned through my mistakes. I've picked up new skills that will help me. I've learned that it is alright, that I'm not perfect.

To share with someone the knowledge I've now acquired may help save that person's life. To promote a change away from behaviour that may reduce risk makes the death of friends a little more worthwhile.

The so called second wave of AIDS has crashed on the population. We have been in the fortunate position that Australia is isolated. This fact has given us something that other countries do not have and that is time. We can learn not to be complacent. There is NO VACCINE to prevent AIDS. There is NO CURE. Effective education by users for users works. To date QuIVAA has held

(cont. p.13)

escape to dust
to powdered flaw
rag bag memory
bed bound and sore
had to pull a gun
on this conversation
with a dropper full/empty
fill some more

so i follow that track
follow the blue/black
proud red shoot back
when gun is gunned
and this black well
where dead rivers run
stuck and plunging
junk sick sun

a dead letter sent
is one received
so shoot the news
back track the sleeve
back in blue/black
the gauntlet run
stuck like a pig
in junk sick mud

Angelo



ONLY WANKERS
DONT WEAR
CONDOMS!

ARE YOU A WORKER IN
THE SEX INDUSTRY ?

If so SQWISI (Self Health
for Queensland Workers in
the Sex Industry) is holding
a workshop for workers to
let SQWISI know what they
can do for

YOU.

DATE: Sat. 23 September

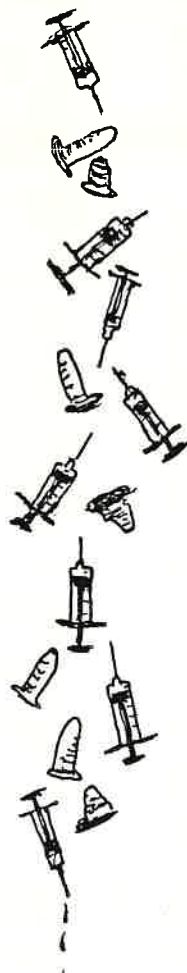
TIME: 2 - 4 pm.

ADDRESS: cnr. Jane and
Thomas Streets,
West End.

Refreshments will be provided.

A Legal Advisor will be available to answer questions.

For further details,
ring 844 4565
1 - 4pm. Mon - Fri.



ARTWORK
BY
'STREETWISE
COMICS'

IF YOU CAN'T GET A NEW FIT: RINSE NEEDLES THROUGH TWICE WITH COLD, CLEAN TAP WATER - TWICE WITH FRESH BLEACH - AND TWICE WITH WATER AGAIN!

Hi Everyone,

Another fantastic edition of 'Dart News' hot off the press. Many, many thanks to our volunteers and in particular, John C who has taken over the editorial role. Unfortunately, we have lost Michele, one of our dedicated volunteers and the previous editor of 'Dart News'. Michele has gone to Melbourne. Thanks for your time and energy into QuIVAA, Michele - we miss you! It's a magnificent effort, volunteers - you should be very proud of yourselves!!

Over the last couple of weeks there have been some very exciting things happening here. On Tuesday 30 August, we had a Special General Meeting which adopted a constitution which will hopefully lead to the incorporation of our organization. It was a night of reflection, for me personally, as we were able to look back over the last 17 months and see QuIVAA's achievements. One of the ways I measure the success of QuIVAA, in relation to user self-organization, is the involvement of our members, not only in the grassroots work of the organization, but I believe, more importantly, also the involvement of users on the Management Committee.

The role of the Management Committee is to decide on policy issues affecting QuIVAA, implement strategies and give support and direction to the workers and members. I am pleased to

say that on our Management Committee there now exists an even balance of users/ex-users and other interested people. On behalf of the Management Committee, I would like to extend a warm welcome to John and Janine who were elected to the committee at the Special General Meeting.

During the last week, myself, another member of the Management Committee, Adrian, two of our workers, Madonna and Colin, along with our new committee member, John, attended a public meeting of SCIVAA (Sunshine Coast Intravenous AIDS Association). Genevieve and Madonna helped a small group of users earlier this year to put in a submission for funding to both the State and Commonwealth Governments for 2 part-time workers to establish a user group up there and to do outreach work on the Sunshine Coast. The public meeting was held to form a working group so that they can define their aims and objectives and stabilize the group.

One of QuIVAA's aims is to help establish other user self-organization groups in Queensland. I wish SCIVAA every success in the future - as I said to them, "It can be done, users can organize and will respond to the AIDS crisis." QuIVAA has now set up a role model for other user groups here in Queensland and, I believe, proved very successfully that users can and will take responsibility in helping prevent the spread of HIV.



IV League reps from Queensland (left) with respective police official.

The only other thing that I feel is important to share with you is the establishment of the Australian IV League (AIVL). AIVL is the national umbrella group for user groups in Australia. We have recently lodged a submission to the Commonwealth Government for approximately \$210,000. Unfortunately, our chances of receiving that much money is nil, but hopefully we will receive enough money to employ a worker for AIVL and some funds for resources. It is really important for us to have a 'national voice' in this epidemic and to have input into national strategies that are developed by the Australian National Council on AIDS and their sub-committees. I believe AIVL will fill an important role both in the information sharing between user groups here in Australia and support for our own innovative strategies in making contact with users.

It is sometimes hard for me to be a 'bureaucrat' cause I find it hard to relate intellectually to the 'powers that be' - I'm learning slowly but surely though. Thank you for your continued support and faith in me.

Luv,

[Handwritten signature]
XX

(cont. from p.10)

workshops for users and has designed pamphlets and posters that are now in production. Through our drop in centre we are able to distribute AIDS education to users. Our face to face education has been warmly received by users.

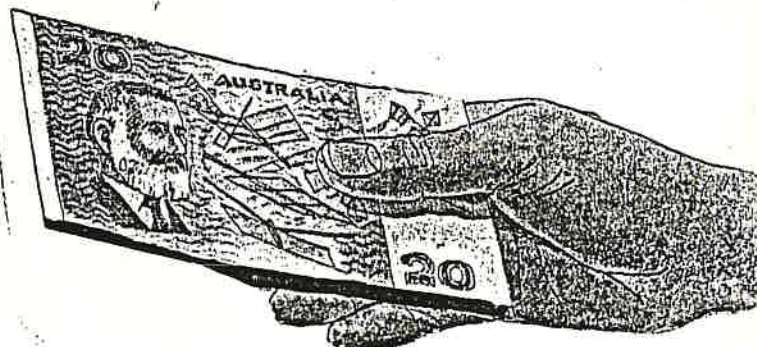
We do not judge. We are not interested in what or how much one uses. We only wish to educate about safe needle and syringe usage and safe sex. While undertaking this, the self-esteem of users is of paramount importance. Users should be free to make their own informed decisions. As most of us know we users are capable of getting what we want and that other users or ex-users are respected and empathetic to our cause. Remember this is your service its not part of the Health Department and is self determining. BE AN INFORMED USER NOT A BLOODY LOSER.

AUSTRALIAN NATIONAL AIDS AND
 INJECTING DRUG USE STUDY
 A RESEARCH PROJECT INVESTIGATING

AIDS
&
INTRAVENOUS
DRUG USE

JILLO
252-2470

PHONE: (07) 252-2470 between 9-5 weekdays
 or (07) 236-2400



FAN-TAS-TIC gang. Another great edition of Dart News. Thanks everyone for all the dedicated work!

Since our last newsletter QuIVAA has had a few things happening, one of which has been the release of the White Paper on HIV and AIDS. Members have received a letter explaining how this affects QuIVAA's funding. If you would like further information and to be updated on this issue contact QuIVAA on 252 2470.

The number of people coming in to the Drop In Centre has increased. There has also been more people having input into 'Dart News' either by contributing articles or helping with layout. But the volunteers always appreciate more people becoming involved with 'Dart News', especially when it comes to putting the information into a print ready stage.

Don't forget that there will be AIDS and IV workshops held every Friday at 1pm at QuIVAA and workshops at night every few weeks, there are more details in 'Dart News'.

Remember, if you are interested in becoming involved in badge making or focus groups for posters, coasters, etc just give us a ring.

If you are in the Valley come up and have a cuppa and pick up some condoms, safe disposal containers etc. Enjoy 'Dart News' and we hope to hear from you soon.

Madonna, Genevieve and Colin

AIDS AND IV DRUG USE WORKSHOP TIMES

Friday	
15 September	1pm
Wednesday	
20 September	7pm

Friday	
22 September	1pm

Workshops will be held every Friday at 1pm.

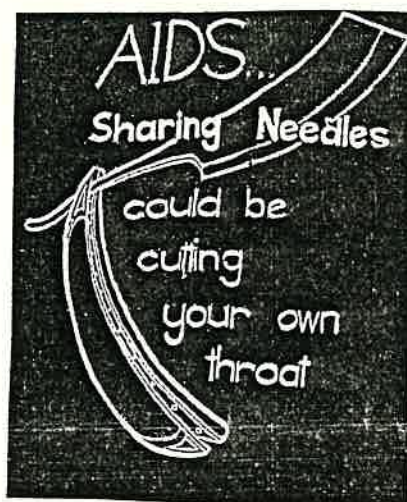
WORKSHOP PLACE

Queensland Intravenous AIDS Association (QuIVAA)

111 Wickham Street
Fortitude Valley

Phone - 252 2470

QuIVAA also runs focus groups to come up with ideas for posters, pamphlets, coasters, badges and t-shirts. If you are interested in becoming involved or have any ideas contact QuIVAA.



WHAT IS AIDS?

WHAT ARE THE SYMPTOMS?

WHAT IS HIV?

WHERE CAN I FIND OUT MORE ABOUT SERVICES FOR USERS?

WHAT DOES QuIVAA DO?

HOW CAN I BECOME INVOLVED IN QuIVAA?

WHAT IS SAFE / UNSAFE IV DRUG USE?

WHAT IS SAFE / UNSAFE SEX?

WHY SHOULD YOU ALWAYS USE WATER

BASED LUBRICANT WITH CONDOMS?

WHAT IS THE PROPER WAY TO CLEAN NEEDLES AND SYRINGES?

To find out the answer to any of these questions, and many more, you can come to a AIDS and IV drug workshop at QuIVAA. Workshops are held at least once a fortnight at night and during the day, or give us a call on 252 2470 or drop into QuIVAA sometime.

QUEENSLAND INTRAVENOUS AIDS ASSOCIATION
(QuIVAA)

MEMBERSHIP APPLICATION

QuIVAA is a group formed in Brisbane (Qld) to stop the spread of the AIDS virus (H.I.V.) through intravenous drug users.

QuIVAA is a community based organisation composed of:

- * current and ex-users of intravenous drugs
- * sexual partners of IV drug users
- * workers in the sex industry
- * health care workers
- * concerned members of the community

Your membership entitles you:

- * to show support for the activities of QuIVAA
- * to receive any newsletters or circulars from the group
- * become involved with the activities of the group

To join QuIVAA simply supply a first name, the initial of your surname and a contact point (an address or post office box number) that you are comfortable with. All information is strictly confidential.

FIRST NAME.....INITIAL OF SURNAME.....

CONTACT ADDRESS.....

.....POSTCODE.....

CONTACT PHONE NUMBER.....

(strike out not applicable)

Would you be interested in becoming involved as a volunteer Yes / No

Would you be interested in an AIDS workshop Yes / No

For further information contact QuIVAA 111 Wickham Street Fortitude Valley Q 4006 Postal address P.O.Box 182 Broadway Q 4006 Phone (07) 252-2470