

poslink



HIV Entry Ban Lifted!

The Newsletter of
People Living with
HIV/AIDS Victoria Inc
Information, Education
& Representation

Issue 47 November 2009
ISSN 1448-7764

Contents

PLWHA Victoria Welcomes Removal of US HIV Entry Ban	2
"Why Are We Here?"	3
Executive Officer's Report	4
Annual General Meeting	6
A Disclosing Dilemma	8
News Briefs	16

Finally!

PLWHA Victoria Welcomes Removal of US HIV Entry Ban

The announcement that the United States will finally lift its 22-year ban on entry by people with HIV is welcome news that will improve the standing of the US within the global HIV community, People Living with HIV/AIDS Victoria has said.

"This is great news for positive people, and all the more so because it is so long overdue," said PLWHA Victoria President Paul Kidd. *"For more than two decades, the US has been alone among developed nations in imposing a ban on entry of HIV-positive people, even for short visits. Now we have hope that the ban will finally be gone."*

The immigration ban was instituted by former President Ronald Reagan in 1987. An attempt by Bill Clinton to reverse the ban in 1993 led to Congress, led by the virulently homophobic Senator Jesse Helms, writing the ban into a bill which Clinton signed into law. That legislation was repealed in 2008 by President George W Bush, but with

no real effect as the US Department of Health and Human Services continued to enforce the ban under administrative rules.

On Friday 30 October, President Obama announced that on Monday 2 November, US time, a final rule eliminating the ban will be published. A mandatory 60-day period is imposed before the change takes effect early in 2010.

"This is an unfair and discriminatory rule that is emblematic of the worst kind of public health policy," said Kidd. *"People living with HIV who travel to the US on business or for pleasure have in the past had to hide their HIV status and hope that HIV medications in their luggage aren't discovered. Some people have taken treatment breaks, against medical advice, while travelling to the US. The removal of this ban will be welcomed by positive people and we congratulate President Obama on his courage and leadership on this issue."*



President
Paul Kidd

Vice President
Paul Baines

Secretary
Brett Hayhoe

Treasurer
TBC

Positive Women Rep
Bev Greet

Straight Arrows Rep
Russell Varney

Board Directors
Leighton Browne, Suzanne Lau-Gooley,
Jeffrey Robertson, Neil Shepherd,
David Stephens, David Tonkin and
Sam Venning

Executive Officer
Sonny Williams

Speakers Bureau Co-ordinator
Max Niggel

Health Promotion Manager
Suzy Malhotra

Health Promotion Officer
Vic Perri

Phoneline Coordinator
Jon Colvin

Health Promotion Officer
Carlos Sepúlveda

Administration
David Westlake

Finance
Akke Halma

PLWHA Victoria
6 Claremont Street
South Yarra VIC 3141
Tel: 03 9865 6772
Fax: 03 9804 7978

info@plwhavictoria.org.au
www.plwhavictoria.org.au

PosLink is sponsored by unrestricted educational grants from:

Abbott Virology
Boehringer-Ingelheim
Bristol-Myers Squibb
Gilead Sciences
GlaxoSmithKline
Merck Sharp & Dohme

The Speakers Bureau is sponsored by unrestricted educational grants from:

Abbott Virology
Merck Sharp & Dohme
Tibotec

Why Are We Here?

Paul Kidd

President



The last year has been a busy one for PLWHA Victoria, and there is much we can be proud of. Our organisation is strong, highly professional and our dedicated staff and volunteers deliver work of high quality that makes a real difference to people's lives.

But I don't want to use these few minutes listing our achievements: our Executive Officer, Sonny Williams, will cover the year's activities in greater detail. You can also read about them in the Annual Report, which will be available at the end of this meeting.

Instead, I want to ask a question: why are we here?

HIV has been part of our collective lives in Australia for more than a quarter century, and for 21 of those years, PLWHA Victoria has represented the interests of positive people in this state, a mission we continue.

But the experience of positive people has evolved – today, deaths from AIDS are rare, and people living with HIV are remaining in the workforce, managing their illness and staying well for long periods of time. These people repeatedly tell us that they don't see a

need to be involved in HIV organisations like ours, although they support the work we do. I hear things like "it's good to know that PLWHA Victoria will be there if I ever need it, but right now I don't."

That doesn't mean that there aren't people who do need us right now. People newly diagnosed need us, as do a significant number who still experience major HIV-associated disease, as well as those who remain profoundly affected by years of ill health, social isolation and welfare dependency. Even among those 'doing well', they may be living longer, but few enjoy perfect health. The incidence of serious chronic illnesses including heart disease, diabetes, liver and kidney disease and some forms of cancer is higher in people living with HIV, and as more time passes the impact of these conditions on our community will only increase. And of course, stigma, discrimination and social exclusion continue to affect us all.

It's in this context that I ask, why are we here? What is the role and purpose of our organisation in this changing environment, and how can we continue to support and serve people with HIV into the future? How can we remain relevant in the lives of people for whom HIV occupies a shifting place, no longer the core of their identity but just one aspect of a bigger picture?

These questions are fundamental to our mission as an organisation – as they are to all organisations representing PLHIV – and it is imperative we find answers to them if we are to ensure the sustainability of PLWHA Victoria for the long term.

We need to be an organisation that is relevant to the lives of all positive people – supporting wellness, not just illness. We need to genuinely embrace the diversity of people living with HIV regardless of sexuality, gender, age or ethnicity. We need to develop new programs and services that address issues such as sexual disclosure and

negotiation, returning to work, remaining engaged with community and building healthy lifestyles.

We need to be passionate advocates for positive people about issues that matter today: we must unequivocally resist any further criminalisation of HIV transmission; we must combat the poisonous influence of HIV stigma, especially the stigma that manifests in our own communities and families; and we must work with government and other community organisations to remain a central and respected voice in the response to HIV.

We need to build and nurture partnerships with our allies in this work – especially the Victorian AIDS Council, Positive Women Victoria and Straight Arrows. None of us is an island; none of us can do this work alone; and each of us has a critical role to play. The three HIV-positive organisations in particular need to work more closely in coalition; it's time to outgrow the distrust which has divided us in the past and get on with the job. United, we are greater than the sum of our parts.

I am hopeful that by the time we hold our next AGM, PLWHA Victoria, Straight Arrows and Positive Women will have relocated to a new shared office space, a move that I believe will improve collaboration, energise our partnership and perhaps for the first time genuinely deliver a united, integrated voice for all positive people in Victoria.

Why are we here? I've outlined some of the challenges we are facing and the questions we are looking for answers to as we develop our new strategic plan, which we will adopt in the first half of next year. The Board has already begun examining these issues and I invite all positive people to be part of the planning process. More than just a three-year plan, the new strategy will articulate a long-term vision for our organisation which builds on the successes of our long history and evolves to meet the

challenges ahead. It is our roadmap for the future and I hope you will help us write it. There will be more details in the November issue of Poslink.

There have been some changes at the Board level this year, with a number of Board members departing and some new faces coming on board. I'd like to acknowledge my predecessors as President, Brett Hayhoe and David Wain, for their efforts on behalf of the organisation, and thank all the Board members past and present for the support they have shown me.

I'd also like to acknowledge the support of our funders, principally the Victorian Department of Health, who have been a crucial partner in the growth of the organisation over recent years, and the many donors and sponsors whose generosity enables so much of the work we do.

Finally, I'd like to pay tribute to our staff, a dedicated and energetic team of professionals who are the smiling public face of our organisation, and our Executive Officer, Sonny Williams, whose leadership has ensured that we have had a successful and productive year.

This report was presented at the AGM, 18 October.



**Minister for Health
the Honourable Daniel Andrews
and
People Living with HIV/AIDS Victoria
invite you to the official launch of
World AIDS Day 2009
Tuesday 1 December 2009
9am
Parliament Gardens
(enter beside the gatehouse via Macarthur Street,
off Spring Street)**

Two speakers from the Positive Speakers Bureau of Victoria will speak of their experience of living with HIV and the World AIDS Day 2009 message: "Take Action. No Discrimination."

Join PLWHA Victoria, community leaders, educators and parliamentarians as we celebrate the contribution of positive people to the health and diversity of the Victorian community. Morning tea will be served afterwards. You are most welcome to bring your partner, family and friends.

Please RSVP for security and catering purposes by Wed 25th November to PLWHA Victoria by calling 03 9865 6772 or e-mail info@plwhavictoria.org.au.

This event is sponsored by Abbott Virology



Executive Officer's Report

Sonny Williams



Welcome and thank-you for taking the time to attend today's AGM, this offers me the opportunity to report on the activities/programs of PLWHA Victoria over the last financial year 2008/2009.

I would like to start with a quick snapshot of some of the activities/programs delivered by the organisation:

- 200 people accessed the agency seeking financial assistances (E&D fund).
- 300 plus members accessed Planet Positive, a social space for PLHIV to meet, socialise and make connections.
- 150 members took advantage of the Treatment Interactive Events held 3 times a year.
- 52 members accessed the Positive Education programming.
- 32* newly diagnosed made use of Phoenix workshops, held 4 times a year to provide information, referrals and support(*8 per workshop).
- 166 individual talks were carried out to 5845 people via the Positive Speakers Bureau.
- 890 calls were made to the HIV and Sexual Health Connect Line.
- 1,400 contacts to the ConnectLine website.

- 5,000 safe packs at various festivals and events throughout the year.
- 11,000 contacts to the PLWHA website.
- +656 Information/resource kits distributed.
- +7,800 PosLink distributed over the last 12 months.

Breaking this information up / another way to look at it is:

- Face to face contact + 900
 - Information/resource kits + 8,456
 - 5,000 safe packs
 - Electronic or phone contacts + 13290
 - Speakers Bureau average audience size 35
- All of this adds up to a total of 27646 contacts.

I would like to repeat this is a snapshot of just some of the activities/programs delivered by the organisation. I have not mentioned all the partnerships, which range Circuit, Beyond or Mercedes Benz or committees, advisories the agency takes part in.

So what are we saying, PLWHA Victoria is still developing. We continue moving forward with the ongoing realignment of resources as the organisation has evolved and grown and expectations of the agency have changed and the experience of people living with HIV has altered. We've grown significantly both in terms of our annual budget, staff levels, partnerships and activity/program delivery; we anticipate this growth to potentially continue into the near future and offer us new ways to shape our work.

Once again we have seen the agency make contributions on a number of levels within the HIV sector, building collaborative partnerships, bringing others along and allowing time and space for relationships to develop.

The increasing reputation of PLWHA

Victoria as a professional, capable and well-managed organisation opens up opportunities for us to develop even more new programs, partnerships and methods of service delivery that support our mission and help build a stronger HIV community for Victoria. However as our reputation increases as an organisation, and as we expose ourselves to a wider audience; this creates the added risk and test of retaining staff who are offered roles in other areas which provide not only economic but leadership growth for individuals.

Professional development, a commitment to evaluation and quality control of programs or programs delivered remain cornerstones of PLWHA Victoria. Evaluation and feedback processes enable us to:

- Identify changing needs of target communities
- Monitor the extent to which target communities access programs and services appropriate to their needs
- Analyse how well programs and services are meeting the needs of target communities and what can be done to enhance this usage
- Analyse where programs and services are not meeting the needs of target communities and ways to address the reasons for this
- Link these reviewing processes to on-going programs and services development
- Contribute to retaining a high level of quality control without affecting the integrity of the work the agency performs with an emphasis on outcome and sharper definitions of outputs

Sitting beside everything we do is the need to retain a position in partnerships equal to and as relevant as others. Over the recent years the PLHIV sector capacity has continued to develop and that process will continue, but at what expense without increased enhancements?

With ongoing continued funder interest in health promotion, prevention strategies and outcomes, HIV is just one element of a broader framework of the management of blood borne viruses. Certain funders see potential in programs of interest; the question then is to ask if there is another way of shaping this work to open up other opportunities for funding. It is something we will have to look at and address when we may have little or no enhancements.

As the lives of PLHIV change we must be seen to be keeping pace and at the same time move and continue to meet the needs of the community we work with.

Looking forward, we are heading into a new period for PLWHA Victoria as we reflect at where the agency has come from, its growth in the last four years and begin the process of developing a new strategic plan. Our current plan expires in June 2010, and over the next few months, the board and staff of PLWHA Victoria will be considering the direction we want to take the organisation. However this requires the participation from our members, community and partners. A strategic plan exists to identify the goals and objectives the organisation strives towards, and the path we need to take towards achieving the goals and objectives identified. A new strategic plan will set the framework for business plans and budgets for PLWHA Victoria for the period up to 2013.

This report was presented at the AGM, 18 October.

'Cravings for a spectacular Sun'

Book Launch

'Cravings for a spectacular Sun' is the first book of poetry by Peter Davis. The book is full of a range of themes such as living with HIV, living as a forest hermit, childhood meditations, delinquent shopping mall birds, spinning their joy with a weighted machine, bisexuality and sex-on-site premises, the meaning of birds, motorcycle crashes and a hitchhiking diary.

The launch features Angela Costi, Andy Jackson, Peter Davis and live music by Duncan Graham and The Co Accused.

You can take up to 5 free copies of the book included in your entrance fee. A great way to stock-up on Christmas presents. The book includes a CD about Australian forest hermits.

Peter Davis is past winner of the Judy Duffy Award RMIT Prof Writing Editing. He is also a past feature writer for The Age A2 and 6 time document maker for ABC. Peter ran poetry readings for two years at the Dancing Dog Cafe in Footscray. He has also produced spoken word CDs for Angela Costi, the late Patrick Alexander and Holly Sievers. He has been a radio maker at 3CR and ABC since 1993.

BOOK LAUNCH
music spoken word
3CR Radio Benefit
all proceeds raised go to 3CR

Bar Monkey
St. Georges Rd., Nth. Fitzroy
(near Edinborough Gardens/
next to Moroccan Soup Bar)
6pm Sunday 22nd Nov.

entry \$10 & \$6
* includes free copy of book
'Cravings for a spectacular sun'
new poetry by Peter Davis

Annual General Meeting 2009

PLWHA Victoria announced a new Board of Management at its Annual General Meeting on Sunday 18 October at the Positive Living Centre. The 2009/2010 Board consists of: President, Paul Kidd; Vice President, Paul Baines and Secretary, Brett Hayhoe. Ordinary members consist of Jeffrey Robertson, Leighton Browne, Suzanne Lau-Gooey, Neil Shepherd, David Stephens, David Tonkin, Sam Venning, Bev Greet (Positive Women's Representative) and Russell Varney (Straight Arrows Representative).

President's Award:

Jeffrey Robertson

Jeffrey Robertson has been an energetic and committed member of the PLWHA community over many years. He is a member of our Board, a former President of Straight Arrows, an active member of the Positive Speakers' Bureau and a dedicated volunteer, trainer, spokesperson and advocate for people living with HIV.

Jeffrey's personal story is an inspiring one. In 2001, after his HIV status was disclosed without his consent while living in regional Victoria, he was the target of acute discrimination and homophobia. His marriage ended and he lost contact with his two children. His response was to speak out against the fear and stigma that had led to these attacks. He began running AIDS awareness campaigns in the local area and formed a support group for people living with HIV. He moved to Melbourne in 2003 after suffering a stroke and became involved in PLWHA Victoria and Straight Arrows.

A former President of Straight Arrows, Jeffrey joined the Board of PLWHA Victoria some years ago, first as the Straight Arrows representative and later as an elected Director in his own right. He is a genuine advocate for building and celebrating the links between HIV affected communities.

Despite the considerable challenges

presented by his physical disability, Jeffrey is always ready to lend a hand however he can. He is often the first to volunteer and is a regular attendee of social events such as Planet Positive. Jeffrey is an inspiring speaker and a long-term member of the Positive Speakers' Bureau. He embodies an ethic of community service that is an inspiration and an example to us all.



Jeffrey Robertson

Exemplary Service Award:

Ronald Lucas

This award is made to the former chief of Medicine at Fairfield Infectious Diseases Hospital, Professor Ron Lucas, who died earlier this year. Ron worked as a scientist and clinician at Fairfield from 1964 until his retirement in 1992. He is renowned as a virologist whose research led to the development of vaccines for Hepatitis A and B, which benefit millions of people worldwide. However, it is for Ron's compassion and his leadership in Victoria's response to the HIV epidemic that we honour him today.

When AIDS first emerged in the 1980s, there was great fear amongst the public and health professionals. AIDS patients were rejected by mainstream hospitals, but Fairfield provided a safe haven, a healing environment where staff were committed and accepting of a marginalised community of patients.

Very early in the epidemic, Ron recognised the need to work with the gay community, and together they pioneered a model of care and

treatment that set the standard for the world-class HIV clinical services we now have in Australia.

At a personal level, Ron was admired and loved by his patients for his calm and considered ways. He was a mentor to infectious diseases physicians such as Anne Mijch and Jenny Hoy, leaders in their own right who continue to carry on Ron's work.

Those of us who live with HIV have benefited from Ron's legacy at so many levels. It is with the highest appreciation and our sincere thanks that we present this award to Ron Lucas, and which will be accepted by Ron's wife, Jo Lucas.



Ron Lucas' wife, Jo, receiving the award from board member Suzanne Lau-Gooey

Enabling Sponsor Award:

Mercedes-Benz Australia/Pacific

Mercedes-Benz Australia/Pacific has been an extremely generous and consistent corporate supporter of PLWHA Victoria for over four years. They are an excellent example of a partnership between a community based organisation and an international corporation, a partnership which delivers significant benefits to people living with HIV.

Mercedes-Benz has provided ongoing assistance to PLWHA Victoria through various methods, from strategic advice with fundraising - a component of

support that is not often acknowledged or spoken about – to sponsorship for dinners and contributions to the Christmas Hampers distributed to PLHIV who are hospitalised or ill over the festive season. Our members have also benefitted from the provision of a Viano van that we share in partnership with the Victorian AIDS Council. Without these examples of support and sponsorship from Mercedes Benz, PLWHA Victoria and our volunteers would not be able to provide PLHIV with the sense of community care and connectedness that is so important to enhancing their health and well-being.

Mercedes-Benz is to be commended for their outstanding effort and its continued corporate responsibility. We are fortunate that they play such a significant role in our organisation and we hope that this relationship continues for many years to come.



Horst Von Sanden, Managing Director
Mercedes-Benz Australia/Pacific

**Research Progress Award:
Australian National NeuroAIDS
Brain and Tissue Bank**

The Australian National NeuroAIDS Brain and Tissue Bank ('the Brain Bank') is an innovative, world leading project to better understand one of the most challenging issues in HIV medicine. It represents a long-term effort to improve our understanding of HIV while embracing the highest ethical standards.

Established in 2004, the Brain Bank is a long-term project to obtain tissue samples from people who have lived with HIV and taken HIV treatments, to assist future research into the impacts of HIV on the brain. Participants in the project agree to donate samples of their brain and central nervous system tissues after their death, and are followed through annual examinations to gauge the neurological and psychological impacts of living with HIV.

Neurological complications are common in people with HIV and HIV-associated dementia remains a major clinical challenge for some. As people with HIV live longer, the prevalence of dementia is expected to rise, and there is the prospect of as-yet-undiscovered neurological impacts of long-term HIV treatment. The Brain Bank has been established as a mechanism to assist the study of these conditions.

In making this award, the PLWHA Victoria Board acknowledges the difficult and painstaking nature of this area of research, and the long-term vision of Dr Edwina Wright and her colleagues at the Alfred Hospital in undertaking a project that will contribute significantly to our understanding of a key area of HIV medicine.



Dr. Edwina Wright from The Australian NeuroAIDS Brain and Tissue Bank receiving the award from board member David Stephens

**Community Endeavour Award:
Peter Alexander**

Peter Alexander started his sleepwear business from the humble beginnings of his mother's kitchen table over 15 years ago and has gone from strength to strength in setting up his extremely successful and well-known company. Throughout this time Peter has maintained a solid and longstanding commitment not just to our organisation but to several HIV causes dating back to the days of StyleAID and the Laird Auctions. His personal and professional commitment to our organisation and to HIV-positive people makes him a very worthy recipient of this award.

When Peter was first told about this award, he was extremely surprised and believed that he hadn't really done anything to earn it. His humility and gratitude for the award are evident, but there's nothing humble about the depth and extent of support he has provided in improving the quality of life for people living with HIV (PLHIV) in our community. Over the past 7 years Peter

has donated over \$20,000 worth of high fashion and quality sleepwear to our Christmas Hampers which are delivered to PLHIV who have to spend the festive season in hospital or alone at home. With the social isolation and financial hardship that many of our members face over the festive period, the hampers are a welcome reminder that organisations and individuals such as Peter still care about people with HIV.



Peter Alexander's mother, Julette

**Speakers Bureau Award:
Eric Glare**

Eric Glare joined the Bureau in 2003 and describes his introduction to publicly speaking about living with HIV as jumping in the deep end and either sinking or swimming. He swam as a champion would and seized every training opportunity to develop his capacity as a speaker and constantly strives to improve his presentations.

Eric was a key speaker at the inaugural launch of World AIDS Day at the Parliament of Victoria in 2005 and again in 2007. He spoke eloquently about the impact of HIV on his life and the loss of his career and strongly encouraged listeners to peel away stigma to talk about sexual health and HIV prevention, to support PLHIV and their families, and to support young people and their parents.

A preparedness to do print and radio media after completing the Bureau's media training gave Eric a voice to clearly articulate the realities of living with HIV and a mental health condition thereby making the interviews highly impactful. He has presented at conferences and for HIV drug company staff to provide personal perspectives on living with HIV to great acclaim.

Eric has demonstrated an extraordinary voluntary commitment to the Bureau, working on numerous projects such as the HIV & STI School presentation. This year he has worked on a large project assessing the effectiveness of the Bureau's evaluation

methodologies and the Speaker Request Form in preparation for the rollout of the secondary school rural project. Utilising his research background and his lateral thinking, he has provided mentoring and consistent support to speakers and the Bureau.

PLWHA Victoria commends Eric's outstanding contribution to the development of the capacity of the Positive Speakers Bureau and this award recognises how vital his contribution and support have been in addressing HIV discrimination.



Eric Glare receiving the award from board member David Tonkin

**Volunteer Commitment Award:
Anna Georgiou**

Anna is one of the organisation's longest serving and most committed volunteers, having had a presence in our office for nearly 10 years! Her warmth, efficiency and her ability to extract blood out of a stone has enabled the organisation to continue to offer services to people living with HIV in Victoria. Anna has played a key role in obtaining gifts, prizes and resources for events as wide ranging as our Treatment Interactive Events, community forums, Planet Positive and of course the annual Christmas Hampers, which we have been able to continue for nearly 10 years because of her input.

Anna is probably one of the most well connected volunteers in Melbourne. She can get tickets to any major event in town and introduce you to all the people 'you need to know'! Fortunately for us, she has used that knowledge and skill to obtain thousands of dollars worth of goods and services from an ever increasing and supportive range of individuals and organisations. She was instrumental in instigating relationships with key organisations including e.g. Mercedes-Benz, Peter Alexander

Sleepwear and Paul Bangay Designs who have maintained their support for our organisation now for several years.

Anna continues to selflessly donate time and effort to PLWHA Victoria and her commitment and energy have never waned. We are fortunate that she is part of our organisation and we hope that this relationship continues for many years to come.



Anna Georgiou receiving the award from Jeffrey Robertson



**PMC
has moved!**



**Prahran Market
Clinic (PMC) has
moved.**

**You can now find
us at Prahran Central
Mezzanine Level
Corner Chapel &
Commercial Roads
Prahran 3181
Phone 9514 0888**

POSITIVE ATTITUDE
Traditional Christmas Day Lunch
**An invitation to people living with HIV
and their family and friends.**
Friday 25 December, 12noon,
Old Fitzroy Oval, (next to Grandstand)
Collins Street tram 112
along Bunswick Street to stop 20
RSVP 18 December, Yvonne 9471 0033,
or Max 9478 0182
**We request that you bring a small gift
of around \$5 value to put under our
Christmas tree to share and make it a
very Merry Christmas Treat!**

A Disclosing Dilemma

Alex Nikolovski

Positive Living Centre Coordinator

I would like to focus on an issue that is raised with some regularity. In my experience, and the experiences of other staff members, many people who come through the Positive Living Centre have a need to talk about the subject of disclosure with respect to their HIV status. This often relates to telling family members, friends, work colleagues, professionals or potential partners. Disclosure can often be a balance between what may be the secure option of not telling and the compelling need to tell, and this balance is unique to each individual confronted by this issue. Also, disclosure and discrimination are closely linked issues. There often may be distressing outcomes in disclosing one's status, outcomes that are often related to the virus being treated as a moral issue rather than a health issue. Our role in supporting people living with HIV/AIDS is not one of telling people what to do, rather it is one of assisting them to explore the need and also investigate their options and potential consequences.

Firstly, let's touch on the issue of developing long term relationships. In this day and age, getting out and meeting new people can be difficult enough, even more so if it is the first time you set out to meet new people after being diagnosed with HIV. While many newly diagnosed people may feel they have to give up any hope of dating and relationships after diagnosis, the truth is finding that special someone can and does happen. People living with HIV/AIDS can have healthy loving relationships just like anyone else. This is the message we encourage newly diagnosed individuals to hear. I came across the following article on the net that I felt would be appropriate to share with you all, which centred on this issue:

"Dating can be exciting as well as exhausting, and being HIV-positive can add a whole new layer. I have been

positive for almost three years and have been on many dates—before and after my diagnosis. In fact, if your dates have been anything like mine, they can be likened to a job interview that ends with a root canal instead of a goodnight kiss. Yet I endure them in the hopes that the next one will be the last one and I will find my soul mate. Dates are all about selling ourselves and trying to find out if the person across the table from us is a good match. We laugh, flirt, and tell them our good qualities, while keeping our snoring and other bad habits out of the picture until the move-in date—surprise! In those first few meetings we leave out the big stuff, our political and religious differences, our incomes as well as our views on Paris Hilton. But, when should we disclose our status?

Dating when you are HIV-positive is an entirely separate ballgame. There is the inevitable, difficult and possibly awkward conversation when you have to tell them your status. Being positive is nothing to be ashamed about, but there is a very real possibility that the person with the perfect laugh and similar interests as your own might reject you. I made a promise to myself that I would tell them by the third date—or earlier if it looks like he's making a break to steal third base. Sounds like a good plan, right? Maybe. The third date rule worked in the past, twice. Then recently after a third dinner with someone I was really beginning to care about, I disclosed my status and was rejected. Not for being positive, but for not being honest and upfront about my status.

So what do we do? Only date positive people? I know there are thousands of serodiscordant couples (couples where one is positive and the other negative) who are living happily ever after. Should we tell them on the first date, the second or the third? There is no easy answer, if there even is one. It is a highly personal and touchy decision to make. But it must be made.

If you decide to go the route of meeting people in a similar position, one alternative is a dating website for HIV-positive individuals. Gay or straight you can register, log in and find that perfect someone, complete with a hundred great qualities and about the same number of T-cells. This can take the guesswork out of when to reveal your status. With everything we know about how HIV is transmitted, there should be little fear when having sex. Positive or negative, everyone should keep themselves and their partners protected. I once heard some great advice—always assume the person you are having sex with is HIV-positive, even if they say they are otherwise.

In the past I have dated HIV-negative people, who after some time were just too afraid to let go of their fear (or ignorance) to have a normal sex life. I have also dated negative people who understand the reality and risks and were okay to have a great, and creative, sex life. In my opinion, I think dating would be easier if our status was on the table from moment one. If nothing else we already have something in common—and could possibly learn something new.

I now tell potential partners before or on date number one. Being HIV-positive has taught me more about myself than I cared to know at first, but I now relish in all the new knowledge. I used to be afraid of things that I now face head-on. Rejection still hurts, of course, but I find I am rejected less when I keep my head held high and speak the truth—proud of who I am and how far I have come.

Living with HIV means we have to make some changes and that our lives will inevitably become different from before. I see my diagnosis date as a new birthday, and I've been lucky enough to have been able to celebrate my continued health every year with a ski trip—although if you've ever seen me ski, the phrase "continued health" could

be a thing of the past. But yes, dating can be hard and I don't see it becoming easier for anyone in the near future. We can only take care of ourselves, be proud of who we are and what we can do, and hope that the next root canal—or date—will be the last one."

This article, entitled "Dating Positively" by an American freelance writer, Mathew Carter, provides a very personal insight into the issue of HIV and relationships. There are many myths that surround HIV and one of the most common is that once diagnosed, you must give up any chance of meeting someone and developing a relationship.

Many people living with HIV express concern around confidentiality, given the potential for stigma and discrimination surrounding the virus. For many, the worst thing that can happen is having others find out about their HIV infection. That may be the biggest reason HIV disclosure is so difficult. When beginning new relationships, disclosing one's status can potentially be a very daunting task. People living with HIV/AIDS may find it hard to disclose their status for a variety of reasons, including the fact that their HIV diagnosis will no longer be a secret. They may fear the rejection that may come with disclosing their HIV status to a prospective partner. They may fear the judgments and stereotypes that come along with an HIV diagnosis. They may be afraid they will lose their only shot at a relationship.

If you are going down the route of developing relationships and have decided to reveal your status, disclosure can be potentially easier if you arm

yourself with the right tools and know the right things to say at the right time. These guidelines have been shown to be helpful for some when the time for disclosure may arise:

- It can be very helpful to explain to your potential partner that you care enough about them and trust them enough to disclose your status.

- A supportive approach with assurances to him or her that it is possible to have a healthy, fulfilling relationship, despite HIV can be an effective strategy.

- Discuss and explain that a sexual relationship is both possible and enjoyable.

If you have made a decision to disclose, when should you? Is there a perfect time? Probably not, but there are choices to be made regarding when to tell. As mentioned earlier, disclosure can be a very troubled arena in the development of a potential long term relationship, but what if the relationship hasn't gotten to that point? There are a couple schools of thought regarding when to tell. While there is no perfect time, there is a time that probably best suits you.

Some individuals prefer to "kiss and tell" and will meet a few times before disclosing their HIV status. This does have its advantages. For one it allows you to wait and see if the relationship is going to get serious before disclosing. If the relationship stalls, your status was not disclosed needlessly.

There are some people who choose to "tell and kiss," meaning that HIV

disclosure occurs very early in the relationship, in some cases on the first meeting or date. One reason for early disclosure is there is less emotional attachment at that point. It is a fact of life that some people will not be ready to date a person with HIV. Some feel that it is better to be rejected early as opposed to later when an emotional connection has occurred. In addition, early disclosure implies honesty. Waiting to disclose until you have had a few dates under your belt may be viewed as dishonest by some. Finally, people who disclose early find comfort in knowing that if the relationship does succeed and move forward, their partner accepts them for who they are without conditions.

What about the issue of disclosure with respect to relationships that are not on an intimate level? Deciding not to tell certainly may have an upside, especially in a workplace, family or social setting, where a lack of understanding and knowledge can prevail. I want to explore what can be a more subtle set of circumstances in which disclosure may become an issue. The following kinds of scenarios do not represent specific people who use our service but do reflect an amalgam of situations that have surfaced over a period of time. These situations typically involve being in a public setting; for example, having lunch at work with colleagues, participating in a study group, attending a family barbecue or just sitting on the train. They involve hearing something said about HIV that you know to be wrong, to be based on a lack of knowledge, to be derogatory or to be absolutely prejudiced. These are cases of 'indirect' discrimination.

"I work in a health care setting for the aged, and I was sitting at lunch today and my work mates were talking about doing something differently if they had an HIV positive patient, such as washing sheets separately or providing different cutlery. They were making comments about how people catch the virus through sex or that they would have to be a drug addict to have the virus. As a person living with HIV, I could just feel my blood boil, and they're health professionals! They should know better. No wonder I don't say anything, if that's what you're up against."

"I don't even know why the subject came up. I was at a party and I didn't know many people. For some reason the topic of HIV came up and they started talking about how people acquired the



virus. One person even commented that if you 'play with fire you're bound to get burnt.' What does that mean? This is about someone's health! I had to move off because if I heard anymore I would just have to say something. It's just so upsetting; it makes me so mad. I went home early and I just went to bed crying. Why do people have to be that way?"

If you are living with HIV, how do you respond in these situations? Do you correct them or make a comment about their remarks? What are the consequences for you if you do? Does it then raise suspicion about you own status, and how might you cope with that? If you say nothing how will you feel? Angry? Anxious? Depressed? Alone? Ashamed? There are no right or wrong answers to these questions. It depends upon the situation you find yourself in and, above all, your own judgement and self-worth. But these are situations that invariably have an emotional impact.

This is where the staff at the Positive Living Centre can play a role, by giving people the opportunity to talk about their concerns in a supported and confidential way. In all the situations that have been highlighted in this article, talking to a staff member may be a vehicle for people to explore their feelings about these kinds of situations. It may not be about educating or changing the views of others, for that can be a difficult path to go down. It may be about your need to state what you think, how you feel, what you can do about your own situation and what coping strategies work for you. It may be about exploring what being HIV positive actually means to you. It may be about encouraging you to consider professional counselling, which the VAC/GMHC can offer, and that can be a very effective tool, empowering you and allowing you to take action.

I have highlighted the area of disclosure just as an example of the kind of assistance the support staff at the PLC (and more broadly the VAC/GMHC) can offer. You are encouraged to see one of us about any issue you are confronted by and we will do our best to help you in a supported and confidential manner or refer you to the appropriate service for your needs.

Please note: This article is a combination of two articles on the subject of disclosure, which have appeared in the Positive Living Centre newsletter this year.

Connected

Do you know someone living with HIV? A partner, family member or friend? Then connected with this one day workshop. You will get support and information in a safe environment. You can ask questions about what living with HIV is like. We will help you better support those in your life who is living with HIV.

Information sessions will include topics such as HIV transmission, anti-retroviral medication, disclosure, stigma, the available support services and how to create an environment of open communication.

**Saturday 28 November 2009
Positive Living Centre,
51 Commercial Road, South Yarra
11am - 4pm
Cost \$20**

**Registrations & enquiries to
Vic Perri or Trish Thompson
03 9865 67700 or email [trish_ thompson@vic aids.asn.au](mailto:trish_thompson@vic aids.asn.au)**

**A joint program of
People Living With HIV/AIDS Victoria
and the
Victorian AIDS Council/
Gay Mens's Health Centre**





World AIDS Day

Memorial Ceremony 2009

Positive Living Centre
51 Commercial Rd, Prahran

Tuesday December 1st

Commencing Promptly at 5.45pm - Doors Open at 5.00pm

Featuring: The Honourable Michael Kirby,
Jon Jackson, Hadleigh Adams, Rachel Berger,
Luke Gallagher MC

AIDS Memorial Quilt Display Exhibits

Finger Food and Bar available

World AIDS Day. Take Action. No Discrimination.



aidsquilt.org.au



PositiveWomen

Supporting Women Living with HIV/AIDS



Services, support and advocacy for
homosexual people living with HIV





Annual General Meeting

Positive Women Victoria held our Annual General Meeting on Thursday 29th October at the Queen Victoria Women's Centre, celebrating 21 years of support and advocacy for women, a great milestone. After conducting member business and board nominations, Our Chair Bev gave an overview of the organisation's achievements for 2008/2009:

"The number of women diagnosed with HIV has increased, but I am heartened by the fact that we have survived as a vibrant organisation to offer the support, advocacy and camaraderie newly diagnosed women will need on their journey. This year has been a year of change for Positive Women Victoria. Dawn Wilcock resigned in May after three years at the helm moving on to a new position. We thank her for her work and wish her every success in her new position. Kellie Madge stepped up to the plate in the interim and has done a fabulous job. She remains on board and is doing an excellent job editing the newsletter and among numerous other tasks, she organised the Annual General Meeting. Michelle Wesley, our support worker, continues to provide empathetic support to newly diagnosed women and ongoing peer support, fulfilling our basic mission; to decrease the effects of stigma and isolation for HIV-positive women who still suffer

considerable discrimination. Kerrilie Rice was appointed as our new CEO in July, bringing with her an impressive background in women's health. Kerrilie has already displayed what a great asset she is to the organisation. Our annual retreat held in May brought together both old and new members, to share their stories, belly dance and even get a massage. Hopefully forming friendships to sustain them throughout the year. In addition, our regular peer support dinners are attracting higher numbers and providing the chance for women to stay connected and further consolidate the benefits of a peer support network. All of our board members have now undergone governance training and have expressed a strong commitment to our organisation. I feel very confident about the next 12 months. We hope to run a National Positive Women's Conference in 2010 and must turn our attention to fundraising to make this happen as well as support our peer support, education and advocacy programs. This year we sponsored two women to attend the Asia-Pacific regional AIDS conference (9th ICAAP) in Bali. This gave them the opportunity to develop a view of the situation in the region but also to report directly back to us about the relevant issues. This year we celebrated our 21st anniversary with the launch of our history book *Positive Women - celebrating 21 years of advocacy and support for women and families living with HIV in Victoria.*"

Our Annual General Meeting keynote speaker Dr Susan Paxton hosted the Australian premiere of her documentary "Diamonds - Stories of Women from the Asia-Pacific Network of People Living with HIV/AIDS". Dr Paxton spoke about the process of creating the documentary and attendees were treated to the first viewing of the documentary in Australia, a series of very powerful and moving stories by HIV-positive women. As is tradition for any coming of age, a 21st

birthday cake was arranged and this was enjoyed by all. Positive Women Victoria would like to thank our Board, members, staff and supporters for all of your support over the past 12 months.



Bev Greet cuts the birthday cake

Patron Anne Phelan features on JOY FM radio

Our Patron Anne Phelan has once again been hard at work on our behalf, spreading the message of Positive Women Victoria. Her latest venture has been as spot on JOY FM radio show, *Allegro Non Troppo* on Sunday 13th September 2009. Annie spoke at length about our organisation, what we do and presented "Pats Story" on air. You can download an MP3 podcast from www.cpod.org.au/page.php?id=55&page_style=joy.css&no_brand=1

A Body of Knowledge Update

Our *A Body of Knowledge* photographic exhibition has been on show in Perth, Western Australia for the past few weeks. Sally Lewis from the Western Australian AIDS Council gave us this update from the opening night

of the exhibition: "The opening night went really well, with lots of tears in the room when Dr. Moira Wilson, Clinical Lecturer in Infectious Diseases, spoke of her relationship with her patients, and when our two positive women spoke about what the work meant to them. Senator Louise Pratt was the last person to speak and had a hard act to follow but was lovely in her praise of the women. Verity James was the host and handled the emotion brilliantly with a great mix of humour and compassion. We had good numbers of people through while the exhibit was open and some great feedback. The exhibit was also promoted in The West Australian and X-press magazine."

Positive Steps Update

Positive Steps, our structured peer support group has wound up its first group. The group met for a total of 10 evenings, where a whole range of issues as women living with HIV were discussed with the help of Facilitator Michelle Wesley from Positive Women Victoria and Counsellor Trish Thompson from the Victorian AIDS Council. The group

now organises their own catch-ups on a social basis and this is going well. Feedback from the evaluation sessions has been overwhelmingly positive! We will be rolling out Positive Steps again very soon.

The Rose Fund Update

The next Rose Fund round will be during November, application forms and information will be mailed directly to members. Be sure to encourage any HIV-positive women you know to apply!



DIARIES



NOVEMBER

Tue 17 - Members Activity

Thu 19 - Drop-In

DECEMBER

Thu 3 - Drop-In

Fri 11 - Xmas Dinner



NOVEMBER

Retreat for heterosexual men and women

DECEMBER

Fri 11th - Xmas Party



**ATTENTION
POSITIVE WOMEN**

Women, at least 18 years of age and living with HIV/AIDS in Victoria, are wanted for a PhD study into their social supports and experiences of living with HIV/AIDS. Participation involves a brief questionnaire and then a face-to-face interview with me at a time and place that is convenient to you. The interview will take about an hour of your time.

\$50 compensation will be paid for your time.

If you would like to hear more about this study, please contact me, Jayne Russell, at the Australian Research Centre in Sex, Health & Society (ARCSHS), La Trobe University.

Phone: (03) 9285 5107

Email: Jayne.Russell@latrobe.edu.au



News briefs



Launch of the NAPWA Criminalisation Monograph

"The key to limiting HIV transmission lies in behaviour modification in an enabling environment," Senator Louise Pratt told the launch of the NAPWA HIV criminalisation monograph in Canberra today.

The launch was hosted by Senator Pratt, who chairs the Parliamentary Liaison Group for HIV/AIDS, Blood-Borne Viruses and STIs. Deputy chair Kay Hull MP officially launched the monograph and commented *"It really is time to have this discussion"*.

You can watch a video of the launch speech on the NAPWA website home page at www.napwa.org.au or if you would like a copy of the monograph you can contact napwa **free call 1800 259 666**.

Re-assurance for HIV positive women about short term risk of bone loss

Short-term rates of bone loss are similar in younger HIV-positive and HIV-negative women, US investigators report in a study published in the online edition of the Journal of Acquired Immune Deficiency Syndromes.

Although HIV-positive women had lower bone mineral density in the lower spine and neck on entry to the study, they had similar rates of bone loss during

follow-up. Moreover, HIV treatment was not a risk factor for bone loss.

"Our results provide some reassurance that short-term bone loss is modest in the majority of premenopausal, weight stable HIV+ women", write the investigators.

Several studies have reported that HIV-positive women have an increased risk of low bone mineral density. There is also information that suggests that bone loss is accelerated in this group in the period immediately after antiretroviral therapy is started. However, bone mineral density appears to be stable in people who are taking established HIV treatment.

"Premenopausal HIV+ women with antiretroviral therapy exposure had slightly lower bone mineral density than comparable HIV- women but experienced similar short-term bone loss", conclude the investigators.

Michael Carter

www.aidsmap.org.au

Sculptra for HIV-Associated Facial Wasting Approved on the PBS

Sculptra (Poly- L-Lactic Acid), the injectable cosmetic facial filler, has now been approved on the PBS for the treatment of severe facial lipoatrophy caused by antiretroviral therapy in HIV-positive patients.

To access this treatment your HIV physician will need to refer you to an accredited injector – i.e. a practitioner of cosmetic procedures who has undergone accreditation training to inject Sculptra for people with HIV. Details can be found on this website: www.lipoatrophy.com.au.

The PBS listing recommendation was made in the March 2009 Pharmaceutical Benefits Advisory Committee (PBAC) meeting. Details can be seen at the following website link: <http://www.health.gov.au/internet/main/publishing.nsf/Content/pbacrec-mar09-positive>

[health.gov.au/internet/main/publishing.nsf/Content/pbacrec-mar09-positive](http://www.health.gov.au/internet/main/publishing.nsf/Content/pbacrec-mar09-positive)

The Schedule of Pharmaceutical Benefits now lists Sculptra as available on the PBS subsidy to PLHIV at the patient co-payment of \$32.90 per item, now making this an affordable treatment. Schedule details can be found here: www.pbs.gov.au

This new listing allows for:

- Two viles of Sculptra x 4 repeats (total 8 viles) for initial treatment; and,
- Two viles (only) for biannual top up (maintenance) as required.

Together, the total allowance is up to ten (10) viles over a two year period.

It is important to note that while the product itself is now available at the affordable PBS co-payment (same as the PBS cost for any other treatment), physicians who are accredited injectors may set their own consultation and administration fees, which may vary across Queensland and the nation. At the time of writing there is currently no Medicare item number to cover the cost of consultation and injection fees. Currently there are limited numbers of accredited practitioners, and we hope this list will grow as new providers train to administer Sculptra to people with HIV. However, not all areas will have practitioners, so we encourage people interested in accessing support to speak to your HIV doctors about Sculptra as you will need to be referred by them in the first instance. Should readers have any queries about access, or other issues related to obtaining Sculptra, please don't hesitate to contact us here at QPP.

NAPWA have issued a Media Release about Sculptra which can be found at www.napwa.org.au/media.

NAPWA has worked over many years to secure PBS approval for this essential medicine. Peter Canavan of NAPWA advises that "we have been advocating

for more than a decade about the social and psychological impacts from HIV-associated lipoatrophy and lipodystrophy and we acknowledge the cooperation of Sanofi-Aventis in making this product available over several years through clinical study and access programs."

NAPWA has also called on the Medical Services Advisory Committee (MSAC) to urgently approve an application for a Medicare item listing for the procedure needed to administer the treatment. "Getting PBS funding for the drug is only part of what is needed. Without Medicare funding for the necessary procedure, many people with HIV will still be unable to afford this treatment. We are very keen to ensure that Medicare funding is made available as soon as possible," said Canavan.

QPP Treatment Update Issue 21

Rilpivirine - Yet another new NNRTI in the pipeline

Combination antiretroviral therapy (cART) has dramatically changed the prognosis and life expectancy of HIV patients, especially in wealthy countries. Current guidelines recommend the NNRTI efavirenz (Stocrin) as part of first-line treatment.

Efavirenz is limited, however, by its low genetic barrier to the development of drug resistance, as well as its potential for central nervous system (CNS) toxicities. It is also contraindicated in pregnant women due to the risk of birth defects (i.e. it is classified as teratogenic – causing birth defects).

In an attempt to overcome these limitations, several 'next-generation' NNRTIs are in various stages of clinical development.

Studies of the experimental NNRTI rilpivirine (AKA TMC 278) show that the drug has potent activity against other NNRTI-resistant strains of HIV. After 96 weeks of treatment, rates of HIV suppression in people first starting treatment compared favourably with those taking efavirenz (Stocrin). Rilpivirine showed favourable results with fewer central nervous system disturbances compared with efavirenz and, thus far, no concerns about its use during pregnancy.

In conclusion the authors wrote, "Rilpivirine seems to be well tolerated and shows less CNS disturbance than efavirenz, and has non-teratogenic potential.

QPP Treatment Update Issue 21

Intence (etravirine) – A new long awaited NNRTI now listed on the PBS

Intence® (etravirine) is a new non-nucleoside reverse transcriptase inhibitor (NNRTI), and the first to show efficacy when resistance has occurred with the existing other NNRTIs (efavirenz & nevirapine). Intence is the first new NNRTI in approximately 10 years, and as such has been long awaited and needed. Intence® was approved on the Pharmaceutical Benefits Scheme (PBS) from 1 July 2009 for HIV combination therapy.

Intence® will be used as a second line drug if previous treatment with existing HIV drugs has failed..

As people with HIV live longer, there is a growing demand for new medicines to combat viral resistance and keep viral load durably suppressed to undetectable. In addition, new medicines with improved tolerability profiles are essential to assist PLHIV to sustain long-term adherence to HIV treatment.



"NNRTIs have been trusted by clinicians and used in antiretroviral therapy for more than a decade, but NNRTI resistance has limited the use of this important class of HIV medication," said Dr Jonathan Anderson, a HIV doctor and member of the Advisory Board of Tibotec, the company that manufactures the drug.

In the registration studies Intence® was shown to be generally safe and well tolerated. A rash, which was generally mild to moderate, occurred more frequently with treatment by Intence® compared to placebo (9 percent vs. 3.1 percent).

The recommended dose of Intence® is 200 mg (two 100 mg tablets) twice daily following a meal.

Prior to the 1 July PBS listing, Intence® was available to nearly 400 patients via Early Access and Compassionate Supply Programs and was formerly known as TMC 125.

"Intence is an important new drug for treatment-experienced patients with limited options, and the HIV community is very pleased that it will now be

available to patients on the PBS," said John Daye, Co-convenor of NAPWA's Health, Treatments and Research Portfolio.

Intence® was developed by Tibotec Pharmaceuticals, Ltd., and will be marketed in Australia by the Tibotec division of Janssen Cilag Pty Ltd, part of the Johnson & Johnson Family of Companies.

QPP Treatment Update Issue 21

Vitamin D and Efavirenz: Bone Health

According to a large study in the UK reported at the IAS Conference in Cape Town this year Efavirenz (Stocrin) use is associated with severe Vitamin D deficiency. Vitamin D is an important essential mineral essential for bone health.

This cross sectional study of 1041 adult HIV outpatients demonstrated that 72.9% had Vitamin D deficiency, with 34.2% severely deficient. Factors associated with lower serum markers for Vitamin D were black race, winter (when sunlight exposure – an important source of vitamin D - is low) and currently being on Efavirenz (Stocrin). Additionally patients on tenofovir (Viread) had significantly elevated alkaline phosphatase (a liver enzyme) implicated in bone disease.

This study is the first to show an association between efavirenz use and low vitamin D. The researchers, lead by T Welz from Kings College Hospital in London, suggest that "further studies are required to define the potential mechanisms and clinical implications of this interaction between ART [HIV antiretroviral treatment], Vitamin D and bone" as well as "the clinical implications of the potential synergy between efavirenz and tenofovir on vitamin D and bone metabolism."

However, a previous study reported in the Journal of AIDS (JAIDS) in 2009 by Todd Brown and colleagues found equal bone loss -2.3% and -2.5% over 96 weeks whether patients were on EFV or Kaletra (respectively). Thus, it has been suggested that perhaps there are different mechanisms of action in the way Protease Inhibitors (PIs) or NNRTIs result in bone loss in HIV, perhaps not only efavirenz. Other factors such as lactic acidosis and mitochondrial toxicity also may cause bone loss due to HIV itself and to therapy. These remain the bone research questions to answer as well as the utility of effect of Vitamin D supplementation.

QPP Treatment Update Issue 21



★ SPEND THE NIGHT WITH ★
STEVE AND BRUNO



Join Steve Cruz and Bruno Bond in conversation with the Fabulous Adam Richard Fri 27th Nov at 10pm The Laird Hotel, 149 Gipps St. Abbotsford (Men Only event, Gold coin Entry)

Later, at 1am, the night continues with a video screening of Steve and Bruno in action, with live commentary from the boys themselves! at Club 80, 10 Peel St Collingwood (Usual entrance fee applies).



www.protection.org.au



Positive Personals

We will accept advertisements under 50 words for dating or friendships under the following categories:

- Men seeking men
- Women seeking men
- Women seeking women
- Men seeking women

Personals (Dating or Friendship):

Please keep your advertisements under 50 words. Be clear about who you are and what you are looking for. Be honest to avoid disappointment for you and your correspondent. It is up to you if you want to include the suburb or regional area you live in. Advertisements and replies must be sent by mail only – please do not phone the office about this service.

Write your response letter and seal it in an enveloped with a 50 cent stamp on it. Write the reply number of the advertisement on the outside of the envelope in pencil. Place this envelope in a separate envelope and send it to: Personals, PLWHA Victoria, 6 Claremont St, South Yarra, Vic 3141.

Personal details given to PLWHA Victoria (such as return addresses) will be kept strictly confidential and will only be seen by one staff member working on the magazine at any time. Send your advertisement to Personals, PLWHA Victoria, 6 Claremont St, South Yarra VIC 3141.

Men Seeking Men

I'm Masculine. A long term. Aus guy. 46 year old. I stay pretty active and am fit. I like the outdoors, sport, music, quiet nights in. Seeking masculine blokes with similar interests. Reply Number #0001 or call 0432 698675

Men Seeking Women

HIV positive heterosexual male, youthful 40's, seeks female companionship. To be there for each other, share interests and find happiness. I am always looking for new, interesting and worthwhile things to engage in or just attend. I'm friendly, I maintain good health, 6 ft tall and Caucasian. I live in inner Melbourne - though I can travel. Reply Number #0002

I am 40, employed part-time and have a 5 year old son. I would like to write at first and then start meeting. I'm looking for a long term commitment. My interests are outdoor activities, films and reading. Reply Number #0003



Women Seeking Men

I am 52 years of age. I was diagnosed HIV positive in 2008 at ST Vincent hospital in Melbourne when I was visiting my daughter. I seek male companionship. To be there for each other, share interests and find happiness. I am always looking for new, interesting and worthwhile things to engage in or attend. My diagnosis was a shock to me as I did not have a partner since 1999 when he passed away in an accident. I am an African mosotho woman and I live in Lesotho, South Africa. I am friendly and maintain good health. I feel quite isolated so please reply even if only for correspondence. Reply Number #0006

Accommodation

Aus guy. I'm fit, honest, etc. 46 year old. Would like to hear from other masculine poz blokes interested in sharing/setting up house. Reply Number #0004 or call 0432 698675

Live in Carer – Caretaker Driver
Are you in need of help around the home, need someone to drive you to your doctor's, shopping, outings, events, etc? I'm a single young man currently working for ST Vincent hospital. I have health Services papers and Tradesman papers including full Victorian drivers license. The only cost is a place to call home (rent free). Reply Number #0005



DiversityLink is an e-mail list for and about people living with HIV/AIDS from culturally and linguistically diverse (CALD) backgrounds run by the Multicultural HIV/AIDS and Hepatitis C Service in NSW

This group is open to anyone interested in the HIV/AIDS field, including people living with HIV/AIDS, health, youth and community workers.

To join send an email to: info@multiculturalhivhepc.net.au and for more information, call (02) 9515 5030 or visit www.multiculturalhivhepc.net.au.



Services, Support and Advocacy for Heterosexual People Living With HIV

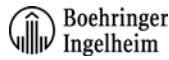
**Fairfield House
The Alfred Hospital
Moubray Street Entrance
Prahran VIC 3181
Tel (03) 9076 3792**

**Email
information@straightarrows.org.au
www.straightarrows.org.au**



Acknowledgement

PLWHA Victoria would like to thank our sponsors for providing unrestricted educational grants to fund *Poslink* and Treatment Interactive Events.



Free Wills

PLWHA Victoria offers members a limited free will-making service via De Ayers.

For further information, please call PLWHA Victoria on 9865 6772, and we will arrange for De to get in touch with you.

The service covers up to six beneficiaries and has no provision for setting up trusts, fund management or the like.

Membership application

All details provided will be treated as strictly confidential.

I wish to become a member of People Living with HIV/AIDS Victoria and to receive all privileges of said membership. I agree to abide by the Rules of the organisation at all times. I understand I can obtain copies of the Rules of the organisation from the PLWHA Victoria office.

Please Full Membership
tick I am HIV-positive and am able to provide verification of this if required.

Associate Membership
I do not wish to disclose my HIV status, I am HIV-negative or I do not know my HIV status.

Name

Signed

Address

Postcode

Telephone

Email (required)

Please fax or post your membership application to:

I do not wish to be contacted by postal mail.

PLWHA Victoria
6 Claremont Street
South Yarra VIC 3141
Tel 03 9865 6772
Fax 03 9804 7978



Disclaimer: Poslink is an independent publication of PLWHA Victoria. The views expressed in Poslink are those of the authors and do not necessarily reflect the views of PLWHA Victoria or its sponsors except where specifically stated. Submission of materials to PosLink will be understood to be permission to publish, unless otherwise advised. While all care is taken to ensure the accuracy of information in PosLink, the information contained in this publication is not intended to be comprehensive or current advice and should not be relied upon in place of professional medical advice. You should seek specialist advice from a medical practitioner in relation to care and treatment. Poslink makes no warranties or representations about content or information in this publication, and to the extent permitted by law exclude or limit all warranties and representation and any liability for loss (including indirect losses), damage and expenses incurred in connection with, or reliance on the content or information contained in, Poslink. The intellectual property rights in all materials included in Poslink are either owned by, or licensed to, PLWHA Victoria and all rights in those materials are reserved.