

Xmas bites



Resolution for 2013:
I resolve to drive past
a detox at least twice
a week

Don't eat the yellow snow

There were the three of us, hanging out, our last chance to score before Xmas day. He'd been good but also real bad as dealers go. We didn't have enough cash, but we figured he owed us anyway. Back then with \$1 and \$2 dollar notes he didn't have enough time to check the massive bundle for our half weight. That done, we pulled into the closest petrol station with a loo. My mate, the last through the door, didn't realise I had the top open as he gave me a congratulatory slap on the back and a big bear hug. As the white dust began to land on the toilet floor, we didn't care – it was "hands and knees" trying desperately to make a pile of useable hammer... something, anything to take the pain away the memory of something lost. Any day but Xmas.

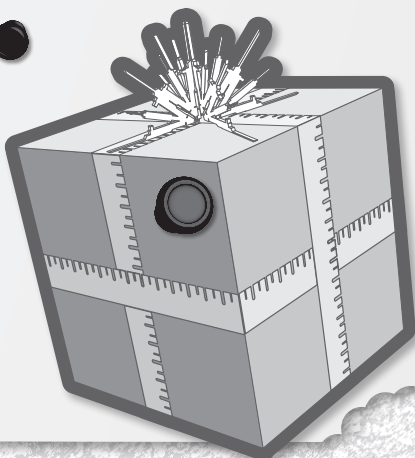
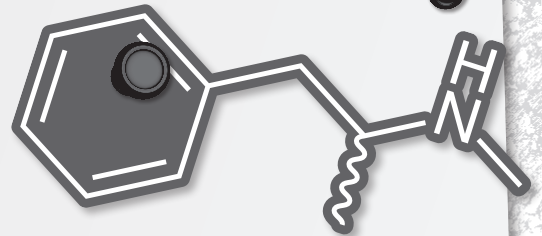
Dave

Best laid plans

My girlfriend and I would have a strategy: buy 2 weights of gear and an eight ball of charlie. Strategy being that it would last us until Xmas day night. But at 5am Xmas day as we whacked up the last of the charlie, realisation hit: "WE CAN'T GET ANY MORE COKE". In a fit of depression, we used the remaining gear. Showered. Dressed. Drove to the folks' place. 11am Xmas day, been here 30 minutes, feels like 30 hours. Screaming kids, the smell of baking food. But we had oceans of booze, grog being our only way forward now. Our other only hope is those little envelopes under the tree... please be for me! You go, Gran!

P.S. Remember to ask your dealer's trading hours for Xmas day.

N.



Duty sux

Long before the big day – we're talking a week here – my stress levels are skyrocketing. It's not just the money, money, money, it's the head fuck. I hate Xmas day. The loo at Nan's doesn't lock and there are people everywhere. I prepare this nightmare by getting on the night before and saving at least a 50 for Xmas Day. This is never ever enough to put up with the shit I'm going to cop. The family lunch is obligatory, as I have their only grandchild. For us not to turn up would be the ultimate fuck up. But this is the last place I want to be for Xmas. I do it anyway. I sit through lunch waiting for that precious moment when I can ring the dealer and get out of there.

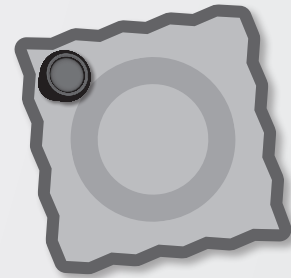
Sharon

season your season with tall tales and true

The Xmas bug

My Mum loved Xmas and I loved my Mum so every year she was alive I used to take time off work and go up to country Qld for 10 days at Xmas/ New Year. There were a few years I was running a habit and not on 'done, so I'd take a bit of gear but it barely got me there. I was always sick for the first few days. Mum was naive about drugs. She thought my using days long over and I wasn't going to enlighten her. So she was troubled as to why I was always sick when I came home. One year, she's excited over this article in the paper that says it's common for people with full-on lives to keep sickness at bay all year, but fall ill as soon as they let go to relax on holiday. So after that, this became the accepted reason I was sick at the start of my holiday and Mum would plan for it.

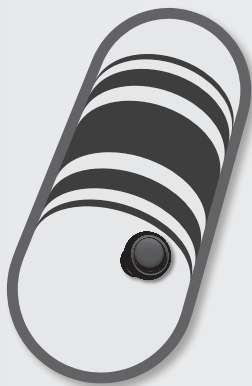
Mary



Dial-a-done

There we were Xmas Eve day, pretty wasted but trying to prepare for Xmas Day. No mobile phones back then, when my hubby and I were into it big time. The only chance to have a shot for Xmas was to sell our 'done. Luckily Jim, who rang from a phone box, wanted to buy our 'done. I answered it in the bedroom, told him to hold while I got my man to sort out the pick up/ delivery details. The day before Xmas with a 4 year old boy, I was frazzled and preoccupied. I forgot about poor old Jim on the line and went to help hubby trim our dope plants for at least an hour. I had to go change, when I went into the bed room. Holy shit, the phone was off the hook! Poor Jim was still there, 2 hours later, still on hold in a public phone box! Anyway, we met up, sold the 'done, got a shot and all was well with the world on Xmas day.

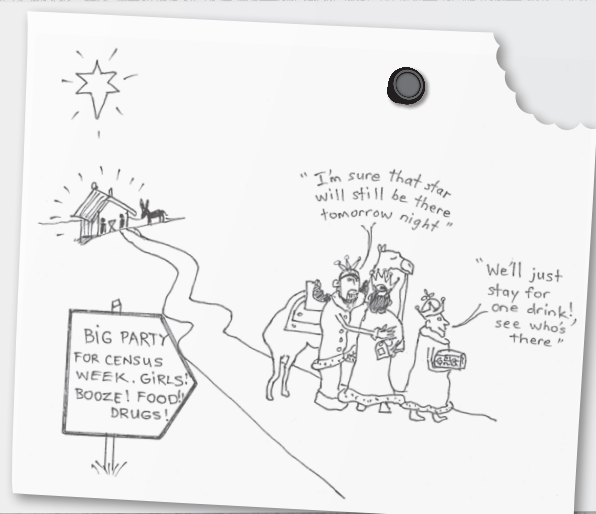
F.G.



Xmas colours

My sister was doing the Xmas Day thing and she needed my stereo. The girlfriend and I were sick as, trying desperately to rack up some cash to get to the magic \$100. About 3 hours later, we were still \$20 short. My sister was not going to be put off any longer; she was coming for the stereo. I started to pack it up. As I lifted the deck off the table, something caught my eye as it fell to the floor. Red and gold. I remembered now! I'd stashed \$170 under there to hide it from the flatmate I caught going through my room! Bring on Xmas and thank you sis for being so persistent!

L.S.



Xmas bites



Dr Claus

Melbourne, Xmas 1985. Hanging like an anchor – yet again. No money and no chance of tick. No possibilities – except perhaps – the irascible Dr J, GP at the Buoyancy Foundation, “helping keep drug users afloat”, 28 years ministering to the user. He had, on a whim, given me his home phone number at some point “for serious emergencies only”. He answers on the tenth ring. My drained sister drives us down Punt Road to a crumbling Toorak mansion. In black tie, a splash of WWII medals on left breast, he walks me to his study, past a roomful of open mouthed Melbourne establishment dowagers, glasses of sherry shocked in mid-sip (the usual Xmas do at the Js, my dear). Sparing the usual lecture, he taps the bubbles out of a fit of god lovely morphine! I twist my arm to expose the scarred mainline. He chuckles and plunges the pick into muscle. “Merry Xmas, son!”

Patrick

Cost cutting

I'm a mother so try to be as organised as possible at Xmas. This includes making sure I've scored enough gear to get me through on Xmas eve, so I can do the 5am present thing and get the roast on. One year, my husband was trying to hold back present-attack for 5 more minutes as I mixed up and blat mine away. Nothing, nada, not one escalated heartbeat, not one shred of relaxation. Zip. The other packet was no better. My dealer wasn't on, I'd spent my cash and wasn't in a position to go hunting, so that was that. When I hassled my dealer the next day, he said he knew the gear was shit but he thought people would prefer something for Xmas rather than nothing. Er no. And you know, as if. A few days later I find out about the diamond necklace he got his girl for Xmas and it all fell into place.

Lin



Ballooning costs

It's NYE and I'm having a few friends over. I score, sort some, and pop a party balloon in my wallet for 'ron. I'm near the supermarket so I stop in for chips, dips and olives on the way home. I get home and in unloading all the goodies I find I've lost the drugs. My stomach plunges and in my mind's eye I have a clear picture of the supermarket checkout, of pulling a note out of my wallet in a whacked kind of way and the balloon bouncing out. I go racing back to the supermarket, to the same checkout, and fall to my knees muttering some crap about a lost earring. The checkout operator, the next customer, they join in the search for this mythical piece of jewellery I say is a stud, nothing to look at but my dead grandfather gave it to me. Snuffing around like a truffle hunter, I scope out the area of a 5 metre radius, going through chockies and mags on display, the plastic bags and discreetly eyeing the worker's hair. All with the focus and concentration that only the truly stoned can muster. No, I never found it. And no, I never again put a balloon in with my cash.

Jenny



season your season with tall tales and true (continued)

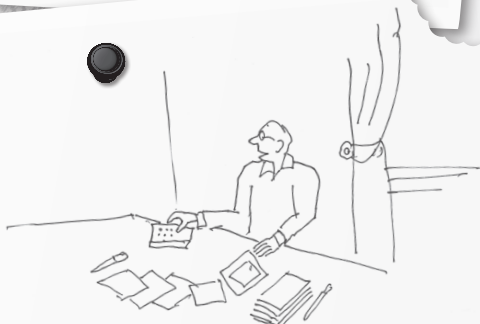


An inconvenient bupe

Last Xmas was long-overdue huge family shindig at my auntie and uncle's sheep stud homestead. I took a vial of suboxone with me – the most important item of luggage, along with the presents! In the wee hours of Xmas morning, I felt the familiar twinges of withdrawal (having left a 2-3 cap a day habit in Sydney) and started to rummage for the bupe. I couldn't find it and started to panic. Eventually I discovered an 8 mg tablet I'd packed separately and popped it under my tongue with great relief – waking Xmas morning in no pain and enjoyed a (relatively) lovely Xmas day.

That night I left my usual insomniac pose with book, grog and smoke in hand on the verandah for a dunny visit. While there, I inspected the medicine cabinets. I wasn't expecting much. My other auntie's had once been a cornucopia of benzos, a treasure trove for years until I confessed, under interrogation, to having raided it. Imagine my surprise at moving a vat of laxatives to find behind it a 500 ml brown bottle of my long-dead grandmother's morphine! Of course I soundly kicked myself for having already taken bupe; my opiate receptors were well capped. That bottle though drove me crazy. I had a glug (no effect) and topped it up with water. Had it really sat there for ten years? Would anyone notice if it disappeared? Should I decant some and refill it with, I dunno, red cordial? What to do, what to do? In the end I just left it. On any future visit, I'll be sure not to take any bupe til I get there – just in case! Merry Xmas.

Erin



Have fit, will travel

I'm on a Greyhound bus going "home" to the bush for Xmas. I'd had a shot before I left to soften the long trip on a jammed-packed bus full of kids and other noise, and a bit in my kit-bag to keep me topped up for the few days I intended to be out of town. The breakfast stop couldn't have come soon enough. I shuffle off to the toilet along with everyone else, the only black clad princess in a flock of shorts, singlets and trackies. Queue for a cubicle, get in and have my shot. Made sure it was a good one. I'm tidying up all the bits and pieces and can't find the fit. I'm checking everywhere, getting increasingly distraught, hearing the women outside, washing hands, rifling in handbags, restlessly waiting to pee. I can't find it; I decide I must have flushed it or packed it, but either way I had to just leave it. I had already stayed in there a suspiciously long time, the toilets on either side having flushed several times since. I open the door and see myself in the mirror. Time stops. Jaws drop. I am holding the fit in my teeth, Carmen Miranda style... I spit it in my hand, mutter an incoherent apology about being a diabetic and head for the coffee counter, hoping no-one would twig, tell the driver and get me thrown off the bus. But luckily it was Xmas and you could feel the love...

Jill



Xmas bites



EDITOR'S NOTE

This one is not true folks, but I couldn't resist the black humour... but I guarantee there really are doctors and nurses who believe that all sickness and trauma involving users is just "drug seeking". I reckon this guy would have got 2 x Panadol® for his trouble!



Santa Never Made it to Donny by Don P.

*Xmas was too fast approaching, like a runaway bloody train,
I'm sitting here staring at nothing, the complete lack of drugs on my brain;
The last wash has been washed a dozen times, been dregging the bong for a week,
And me dealer ain't into tick – I've spent thousands! The bastard's got a cheek;
Now I'm seriously thinking a run-in, just to teach the prick to be fair,
But his flat looks like Fort Knox under siege mate, and there's guns behind every chair;
So I ponder and consider my dilemma, praying for a free shot or two,
But God helps them what helps 'emselves, so here is what I'm gonna do;
I'll hit the hospital with a story – no! a saga!; one of pain, nay sheer agony,
If acted out properly then they should give morphine to me;
I figure a fall should do it, a witness or two would be fine,
So it's down to Central Tunnel, where cameras watch all the time;
Then I stumble and bumble, like a blind man, hit all 16 steps going down,
But as I lay awaiting the ambo, I realised I can't hear a sound;
By the time we land at St Vinnie's, I'm bleeding from everywhere,
They tell me now I'm a para – all for a shot – NOT FAIR!*



EDITOR'S NOTE

From the first issue of NUAA news, here is a news piece about NUAA's first Xmas celebrations ever, held in 1989, not long after we moved into our very first official premises.



Carols by Red Light

It was a joyous and spiritual night of mixed orders. The Sisters of Perpetual Indulgence were joined on the balcony at 24 Darlinghurst Rd by members of the Sisters of Charity, the Good Shepherd Sisters and Brown Josephites. Along with some more conventional carols, we were treated to "Hark the Herald Fairies Shout (Gay is Good and Gay is Out)", "A Dog in a Manger" and, especially appropriate for NUAA, "I Came Upon a Fit So Clean", which features the moving lyrics:

*"I came upon a fit so clean
With glorious song of old
From angels bending near the earth
To swap their needles old."*

NUAA members, staff and friends, tourists and inhabitants of the Cross, clutched candles in the street and joined in the singing with gusto and a marvellous diversity of keys. One member of staff was particularly touched when a gentleman of the street, enjoying the festivities, offered her a slug from his bottle. Accepting gratefully this gesture of goodwill, she got her first taste of a meths mix. A truly spiritual experience.



Season your season with tall tales and true (continued)

'Twas the night before Christmas... by Carley

*'Twas the night before Xmas in a crummy boarding house
Where a couple were squirming like a half poisoned mouse*

*See the trouble had started the night before
When they went to get dosed but found only locked doors*

*No-one had told them the chemist closed early that day
... so much for the supposed joyful holiday*

*Slowly it dawned on the unfortunate two
Just what happened, and there was nothing they could do*

*Five days to pass with not a single dose.
How could they make it? They had no choice*

*They'd not been naughty but ever so nice;
No drugs for months, all sugar and spice.*

*They felt like all their hard work was a terrible waste
As what they needed now was, ironically, a taste!*

*To get clean they had decided to relocate
And as a result had no local "old mate";*

*Instead they went and bought supplies of booze
What the hell – what could they lose?*

*They went home where they spewed and they poohed, they wept in despair
What had they done to deserve this punishment so unfair?*

*As they steadily fell into a drunken mess,
It was obvious they were headed to fail this test*

*The future was dim, far from bright.
It wasn't too long before they began to fight*

*It started around noon and went well into the night.
They forgot what it was about, but both knew they were right!*

*So off he went and sat under a tree
When it occurred to him – the hospital – emergency*

*So off he went on Christmas day,
with nothing to lose and without delay*

*He sat there for hours that did not pass fast
It was quite obvious to him he'd been left to last*

*To the doctor he was just a junky full of demands
He barely listened to the problem at hand*

*He wouldn't even help with some magnesium
But don't worry punters, karma will get him.*

*A couple of nights later came the last string
Kicked out of our room, accused of being pinned!*

*So much for the beautifully lit Christmas tree
We had to settle for a park bench, with our 'neighbour' who reeked of pee*

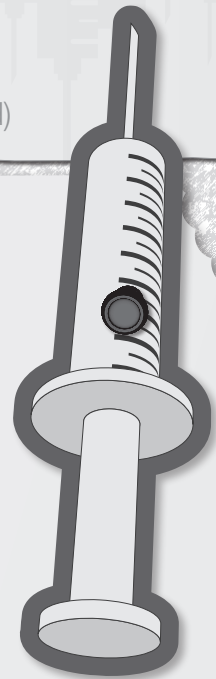
*Day three we walked through the suburbs and who should we meet?
But a well known local dealer out and about on the street.*

*We had not much money,
yet the small taste was like honey*

*I'd treated my baby horribly,
Knowing he already felt terribly*

*Yet in one of our lowest times,
He was still so beautiful – all mine.*

*So i guess from this nightmare one wish came true,
I know I love him and he loves me too.*



How Did
You Know?

SUPPOSED
BE TAKING
MANDATORY
DRUGS ?



SPECIAL
REPORT

Julie Bates

Famous and Fabulous

EDITOR'S NOTE



At the 2012 NUAA Annual General Meeting, Julie Bates was inducted into the NUAA Hall of Fame for over 30 years working with injecting drug users and sex workers. Julie was a

Founding Member of NUAA's forerunner ADIC and its first co-ordinator, representing the membership on a multitude of committees for many years. She also co-founded the Australian Prostitute's Collective (now SWOP). Check out the acclaimed film about the early days of HIV, Rampant: How a city stopped a plague, to get a feel for Julie's importance in the early days. Still working for social justice, she has her own business that focuses on the legal status and quality work practices in the sex industry. A major contributor to the UN's granddaddy, NUAA News, Julie was a consultant on the recent Review of UN. Julie Bates is worthy of her name in lights forever in the annals of NUAA. And as we meditate on the 30 year anniversary of the first HIV patient in Australia, it is fitting that we print some of her award acceptance speech.



This is very much an unexpected honour and truly humbling but I accept without hesitation, for where else can one get an award for being a drug user and a rabble-rouser!

It was the mid '70s when, on the outside looking in, law clerking for a Melbourne criminal law firm, I first got an inkling of the discrimination facing drug users and sex workers and without a spokesperson in sight!

This was when I first became vocally opposed to social and legal injustice and it wasn't just me. It was a time of inquiries into police corruption and other challenges to social norms and draconian laws. Gay men and sex workers were forming action groups to connect and mobilise.

In 1982 I found myself in Sydney, this time on the inside looking out. For a while I succumbed to the sense of shame and silence I had seen in so many others. But HIV was on our doorstep; we had a new enemy and an even greater urgency

to protect ourselves. AIDS hysteria was permeating everything. Fear and loathing and misinformation were raging across Australia. Hospital staff were leaving HIV patients' meals on disposable plates in corridors outside wards and the dead were being double bagged so loved ones were unable to say a final goodbye. HIV+ patients were refused air travel and positive children were turned away from child care centres. Some wanted to quarantine positive people on an island somewhere off Australia. Drug users were re-using fits due to lack of supply, sharpening needles on matchboxes. Methadone programs were scarce and other treatment afforded was far from enabling people to recover their personal respect.

In the midst of all this I was working in the sex industry and had developed a few bad habits in my new life in Sydney. Now the political was personal. Because of the threat posed by HIV and with the help of others I started forging connections with

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“Make no mistake: NUAA is the reason Australia has one of the lowest rates of HIV infection amongst users in the world.”
Julie Bates

gay men, other sex workers and users, social workers, politicians, bureaucrats and health care providers. We came together under a common threat with much to learn about this new age plague. The threat to our lives and liberty was palpable – our friends were dying and we needed to inform our communities and help prevent the devastation that we were seeing here and in America.

Although there was no funding for a drug user response to HIV/AIDS at first, we started our campaign to alert users to the risks of sharing using equipment and unsafe sex and piggybacked off other funded groups, in particular the Australian Prostitutes Collective. We were given space for meetings by Alex Wodak at St Vincent’s and others at the local community health centre.

NUAA started its days as ADIC (the AIDS Drug Information Collective). The name was suggested by one of our early members – a NSW policeman – and chosen from a pot which included *The Dark Side of the Spoon*.

While HIV was the catalyst that united a group of very diverse people into forming ADIC/NUAA, we believed a user organisation had a strong role to play in advocacy. This was the first time users’ voices were heard and there was much wrong with the law and in health care – things like access to methadone and other treatment, pain relief in hospital and clean using equipment.

Make no mistake, ADIC cum NUAA is the reason Australia has one of the lowest rates of HIV infection amongst users in the world – we, you and those who have gone before us are the unsung heroes in the fight against AIDS.



Julie Bates

Famous and Fabulous

There are many who walked the walk and talked the talk with me in those years who gave their best and then some. Many of them my endearing friends and colleagues to this day and courageous people one and all across the divide of politics, bureaucracy, community, health and research.

Like NUAA's inaugural President and my then partner Alan Winchester. His energy, insight and intelligence contributed so much to the concept of harm reduction and the birth of the user rights movement. Alan ran a tight budget to show users could be trusted with managing a government funded organisation. All eyes were upon us. The powers-that-be even decreed that the treasurer of a user group could not be from the target population!

And like John Berry, our one man outreach band. The outreach workers travelled by bus and train at first, til we could buy a car. Sadly, John did not survive HIV and died shortly after NUAA's incorporation.

The early days of NGOs such as ACON, PLWHA, APC, AFAO and NUAA yielded unique and challenging prevention and advocacy projects and campaigns. In advising government and international organisations, we challenged discrimination and vilification, worked as carers and advocates and chronicled the history of people living with HIV in academia, art, literature,

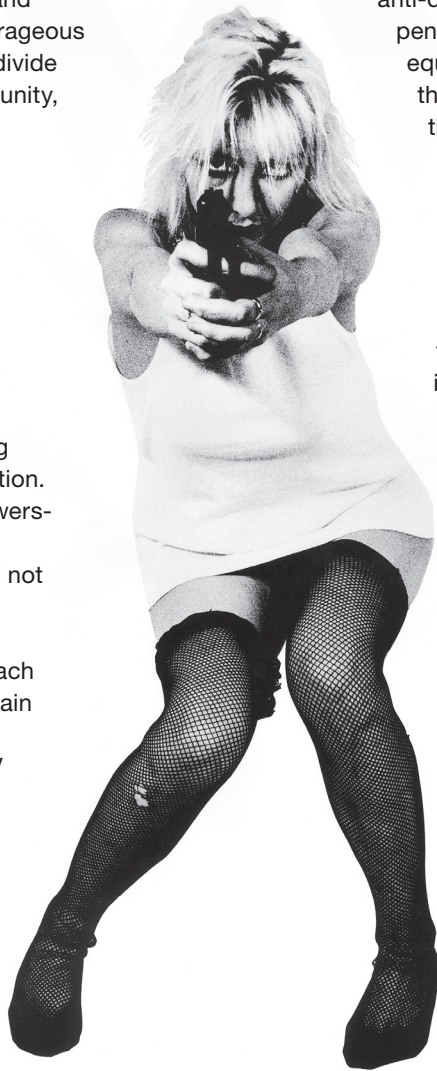
plays, movies and newsletters so that no one need feel alone or unsupported.

We achieved the fast tracking of the release of AIDS drugs; more HIV/AIDS hospital beds; anti-discrimination laws; repeal of laws penalizing the possession of used injecting equipment; the start up of NSPs and the injecting room; and, importantly, the education of service providers to address fears and discrimination.

As a bunch of misfits, junkies and whores we have come a very long way from those early days above the old Rankin Court, and afterwards up the never ending flight of stairs where we forged our independence in a disused brothel in Kings Cross above the Bourbon & Beef.

Australia's response to HIV with human decency would not have been possible without NUAA forging a voice for users, demanding that users be seen as valuable members of the community. I am so proud of the sophisticated and professional entity NUAA is today and that we have changed and saved countless lives along the way.

The work of NUAA has made a difference and the world is surely a better place because of it. Australia still has the lowest rate of HIV infection among injecting drug users in the western world and Hep C rates are dropping. That the work goes on is a credit to you – all of you who continue to spread the word to use and have sex safely, who are leading by example, who are speaking out about injustice and who are fighting discrimination. You are heroes, one and all. Take a bow!



Shoot clean.



powerhouse museum presents

HIV AIDS
30 YEARS ON
the Australian story

27 November 2012
 – 9 June 2013

Image: Australian AIDS Memorial Quilt, 1992. Collection: Powerhouse Museum. Gift of the Quilt Project Sydney, 2011.



www.worldaidsday.org.au



Sharleen

HIV whipping girl

EDITOR'S
NOTE



Sharleen was a frequent visitor to NUAA right from our first office and used our services regularly. NUAA, and particularly our first co-ordinator, Julie Bates, loved and helped her as best we could. Julie did a story about her adversity in the very first issue of NUAA News (as UN was known then). Sharleen's human rights were completely trampled and her life became a living hell, not because of drugs, sex and HIV, but because of the stampeding panic of the general public and the vilification of the media. As we acknowledge 30 years of HIV in Australia, it is only fitting that we dually recognize Sharleen in her role as the scapegoat and the sanity that Julie tried to bring to the whole unhappy drama.

Sharleen Spiteri was a sex worker, an injecting drug user, and she was HIV+. In 1989, Sharleen went on 60 Minutes and told reporter Jeff McMullen that she tried to get her clients to practise safe sex, but sometimes they wouldn't wear condoms.

This took place when paranoia about AIDS was at its height. Sharleen was a walking invitation to moral panic. Her interview on 60 Minutes caused a national furore. The NSW government took Sharleen from her flat under police guard, and forcibly detained her in a locked AIDS ward. She was kept in detention for several weeks. After they let her out, Sharleen spent much of the remaining 16 years of her life under 24-hour supervision by health workers. She became the most expensive public patient in NSW history.

For the final four years, Sharleen was under house arrest in a refuge for HIV+ drug users in the inner-city suburb of Surry Hills. She died, still under a public health order, in 2005. But when these events took place, other HIV+ sex workers were left on the street. So why was Sharleen singled out? And was it really necessary to take away her liberty?

It was sometime in the mid 1980s when I first met Sharleen. She had come to the offices of the then Australian Prostitutes Collective in Kings Cross seeking comfort, company and condoms as did many sex workers of the time.

The HIV blame game had reached new deplorable heights. While gay men had been blamed at the outset of the epidemic shortly after, sex workers and injecting drug users were similarly pilloried. However, street-based sex workers being more visible often took the physical brunt of this demonizing of marginalized communities. They were being pelted with eggs and abuse on William Street, and the media had narrowed its focus on sex workers as the presumed bridge to infecting 'nice' middle class families via male contact with sex workers. The industry was at an all time low, and sex workers were not only suffering financially but were also fearful of contracting a deadly virus, without treatment.

Shutting down Sharleen, ABC Radio National, <http://www.abc.net.au/radionational/programs/hindsight/shutting-down-sharleen/3115028>

Sharleen

I had known Sharleen since the mid 1980s as someone who picked up condoms and fits, another using sex worker in dark days. I got to know her well in about 1989. By this time, she had been diagnosed with HIV, her mother had gained custody of her young son and she was getting nowhere in getting even supervised access. As you can imagine, she was one very frightened, confused and angry young woman.

I commenced a process of attempting to get some access for Sharleen to her son. You could say Sharleen was challenged from the day she was born and she wasn't always easy to work with. By all accounts she suffered parental abuse and certainly family breakdown; and somewhere very early along the road of life she inherited the tag of "naughty girl" as she attempted to express her rights and needs. Eventually, and after many years of abuse and neglect, Sharleen became the embodiment of that naughty girl. However, in survival

mode, Sharleen challenged the legal, welfare and public health systems unfortunately often to her own detriment.

Enter Ron Hicks, a former medical journalist, who in 1989 was writing a feature on HIV, women and children for Australian Magazine. The story was to cover the so called “second wave” where it was believed HIV would be spread from gay men via injecting drug users to the broader community. Sharleen’s story of loss and grief, of contracting HIV and having her son taken away, featured in this article. Hicks then took the story to 60 Minutes, he said because she admitted to him “she did sometimes have unprotected sex”. There were better and more humane options for addressing this issue if one was truly concerned for the health of the nation.

In those days, sensationalistic media reporting fed the community’s ignorance and fears around HIV. Heaping blame and focusing on one individual, and an injecting drug user and sex worker at that, Sharleen went from “naughty girl” to “HIV whipping girl” almost overnight. She bore the brunt of HIV stigma, discrimination and the entire arsenal of legal responses manifesting in her detainment and supervised living arrangements for the remainder of her life.

I believe Hicks and 60 Minutes were culpable of the gravest professional misconduct occasioning actual and ongoing harm to Sharleen. They should have been sued, but I was too busy picking up the pieces of Sharleen’s life after they had finished with her. They literally phoned me and said: “You can have her back. She is in a hotel in Artarmon and our nurses can’t cope with her any more”. When the first program was aired that fateful Sunday night, all hell broke loose.

Having secured one of her releases back into the community, I had taken Sharleen shopping the next day to the Queen Victoria building to spend some of the booty she had received from 60 Minutes; and it seems the whole of Sydney knew she was out and about. On returning to our secret location at a city hotel, a government car with blackened windows was waiting for us and we were whisked away to

an old unused nurse’s home at a geriatric hospital in Waterfall where they kept Sharleen sedated for a number of days while they were deciding what to do with her and where to put her. This was the start of the public health orders, detainment and community supervision being imposed on Sharleen on and off for the rest of her life.

Perhaps Sharleen’s son who was denied access to his mother and is now a young man, may one day come to see how her human rights were eroded and how she was exploited and punished.

Hicks’ take on the success of HIV prevention programs in Australia, giving credit to health authorities and the Grim Reaper campaign, was naïve and even insulting. This simplistic view does not acknowledge the intrinsic role of gay men and injecting drug users, and of course the heroic role of Australian sex workers, in changing sexual practices and educating vast numbers of men. Sex workers eroticised safe sex with the “roll the condom on with the mouth” trick and established safe sex as the norm. Even Sharleen, as compromised as she was, did her best and played her part in getting clients to accept condoms. There is now a wide body of research that acknowledges this role and also acknowledges the legislative impediments that we had to overcome to effect such a dramatic change in the provision of our services and in our health and wellbeing generally. Despite ongoing legislative and other impediments, we continue to demonstrate high levels of good sexual health and in the now 30 years of HIV in Australia, there has not been one documented case of sex worker related HIV.



Life after the holidays

unwrapping detox



What goes up must come down. Every boom must have a bust. Santa would need to deed me the North Pole itself before I could afford to sustain the comfort level of a silly season drug holiday. So after Xmas/NYE, I get the detox I had to have.

There are many reasons you might want to detox. You might want to try abstinence or just need a break. You might have run out of money, want to go overseas, have a baby or get your tolerance down. Whatever the reason, it is always better to be in control with good planning.

The bonus of detoxing at home is that you're in the driver's seat. If you have kids, arrange sleep-overs. Tell your house-mates you're sick and need space. Then you can walk the floor at 3am, shower 20 times if you need to and commandeer the remote controls. No-one will wake you just as you fall asleep or expect you to sleep when you know you can't. You can smoke, self-medicate, punch a wall.

NUAA, your doctor and local clinic can help with advice and publications like Turning Point's *Getting Through Withdrawal* series. Look on the net for info. Call free phone service ADIS (Alcohol and Drug Information Service) to find a local service to assess you for home detox and provide medication for symptom relief. ADIS runs 24/7 with counsellors so you can also call them for support during your detox (02 9361 8000 or 1800 422 599).

There are three main things you need to consider with any detox.

1. Headspace

There are two schools of thought with this one. The first says: don't make a big drama of it, think of it like any other illness. Lots of people do it all the time. Chances are you've done it before, so you know it's achievable. It's just one of those life things you have to do, like tidying the house, doing your taxes, exercising. And like all those things it has a beginning, middle and an end. You have made the big decision to do it, just keep making the decision to stick with it. There is always tomorrow and you can have drugs again any time you want – just not today.

The second says: make a ritual of your last shot. Count the hours you've been drug free. Reward yourself. List the pros and cons of using and make some decisions. Mourn the loss of the drug and prepare yourself for a different way of doing things. Throw out your dealers' numbers. Stick signs up around the house "Making a change!" Try affirmations: "I am a person with choices and I choose to clear my body of drugs". Plan new ways of doing things.

Mix the bits that fit with what you want your detox to achieve. Either way, the trick of not taking drugs is just that: you don't take them, no matter how you feel or whatever reason you dream up. Not so easy when you're in the middle of it, so don't beat yourself up if it doesn't quite work out that way.

Detoxing is not pleasant so you need to distract yourself. Dip into DVDs, CDs, magazines or comics. Draw a stick-figure cartoon starring you. Write lists ("things that make me happy"). Make a collage. Try relaxation tapes or meditation. Bounce a ball off the wall. Anything to stop obsessing over cravings. Delay the decision to get on... after you have a shower, after you write a story for UN. Make bargains (with yourself or the gods!). Distract yourself until you know your dealer is off for the day.

Don't get caught up in head chatter at 3am. This isn't an ideal time to dwell on how you lied to your partner, ripped off your friend or let down your kid. Remind yourself your emotions are exaggerated because you are detoxing. You are doing the best you can right now, and that's good enough.

2. Physical withdrawal

Everyone's different, but some common symptoms are detailed on p25. Go to your doctor or clinic and get some meds for symptom relief. Your chemist can be helpful too, as can naturopaths and herbalists.

Ask a doctor for a few days' supply of sleeping tablets like benzodiazepines (such as diazepam (Valium[®]) or oxazepam (Serepax[®]) or get an over-the-counter codeine based pain killer like Mersyndol[®] and/or Nurofen Plus[®] to help you sleep and ease muscle pain. Try butylscopolamine (Buscopan[®]) or similar for stomach and bowel cramps, metaclopramide (Maxalon[®]) for nausea, loperamide (Immodium[®]) for diarrhoea, and quinine sulphate for leg cramps.

Non-steroidal anti-inflammatories (NSAIs) like aspirin, ibuprofen, naproxen, diclofenac (Voltaren[®]) help with pain. Too many NSAIs can cause kidney failure, but you can use them alongside opiates. Talk to your chemist about maximum daily doses. Rub in anti-inflammatory cream or massage with sports creams like Goanna Oil[®], Tiger Balm[®], or Deep Heat[®].

Buprenorphine will ease opioid withdrawal. To be taken only after 24 hours without heroin or 48 hours without methadone, otherwise your detox will slam on much worse. Methadone helps but isn't prescribed in Australia for detox. Clonidine (Catapres[®]) and lofexidine have been proven to reduce symptoms from opiate detox (but some people get low blood pressure and dizziness).

Look after your nutrition. Multi-vitamins, massive doses of vitamins B and C, and iron will help, especially if your diet has been lacking lately.

Don't forget natural remedies. You could try St John's Wart for depression, echinacea for "head-cold" symptoms, valerian for sleep or ginseng to ease fatigue and low energy. Some swear by aromatherapy; others by Rescue Remedy[®], a bach flower remedy for reducing distress and restlessness. Vinegar in the bath or bath salts like Radox[®] may help aching limbs.

Sleep is the great healer. You can work towards normalising your sleep by making your bed for sleep/sex only, not for watching TV or reading; keeping a

regular sleep schedule (going to bed and getting up same time every day); and regulating your light intake – more sun by day and less light by night with low-wattage bulbs and a dark bedroom.

3. Emotional withdrawal

Check the table on p25 for moods and reactions you may experience.

Planning will help your detox go as smoothly as possible. You will still feel crappy and hostile, but more on top of things. Organise a soothing environment. A tidy, clean, nice-smelling space will reduce anxiety. Decide if you want your friends to drop in or stay away, then tell them (but always have someone you can call on).

Recognise that you are going to feel bad, and that's ok. It's what happens when you stop taking a habit-forming substance and there is no way of avoiding it. It's part of life to experience negative emotions and detox has a way of re-tweeting them all.

Note your anxiety is exaggerated, but don't ignore it. Acknowledge the cause of your anxiety without blame and take a small step forward, like making an appointment with an expert on the issue troubling you. Once the anxious part of you is satisfied the message has got through, you will feel relieved. It may be that detoxing is a step towards fixing things you're worried about, so congratulate yourself. Do some deep breathing and stretching. Remind yourself you are an amazing person doing something really hard.

Finally, remember there is no such thing as failure. Any experience will always make you better prepared for another time and place.





Life after the holidays

Users' tips on detoxing at home

(detox continued)

Lee, heroin user

I know it will be one long week. I also know that I'll probably score once in that time.

I go for valium to relax the muscles and I find quinine good for cramps. I get all the usual prescriptions the clinics or doctors offer for symptom relief. I make sure I have plenty of fluids.

I know I'll be upset and depressed, and just want to cocoon. I don't want any contact with anybody. I know it will pass. I remind myself it's all in my head, and I stop myself thinking negative thoughts.

Nathan, ice user

I can go up to a couple of weeks on ice, but I can feel when the psychosis is coming on. When the cash is running out, the realisation sets in that I have to pull up. I do it to get a break, and I know that I have to do it if I want to have another big pig out later!

My trick is to make sure I have plenty of sleeping tablets and heaps and heaps of cold drinks ready. I know I'll be crashed for at least two or three days to properly get over it. I always feel completely drained and really short tempered. For me, I don't want any support from others; I just want to be left alone to get over it.

Nigel, heroin user

I like to get right away to detox, preferably to the tropics, somewhere hot. Around 60 days is a good amount of time to get away from it and really turn things around if you can manage it. If I hang around home, I worry that those who love me will realise something is wrong. But if I'm going somewhere, it helps me that no-one knows, I don't have to worry about them as well as me.

Once the plane door shuts, I leave the tears behind. I just resign myself to the fact that I'll spend the first week sick, but then by the end I'll be partying and dancing with chicks! What a reward!

While I'm sick, it makes me feel better to drink heaps of flat soft drink, icy, icy cold and lots of lollies.

Milla, heroin user

Sometimes a girl's gotta do what a girl's gotta do. I try to get my head right by telling myself it hurts, but

it will end. I think it is a lot worse than flu, because the muscle thing is really bad and my head is awful. I have a real problem with running over bad moments in history and making myself feel bad about things I did or failed to do. I try to get out of my head by reading and watching TV and DVDs although my concentration can be a bit shaky.

If I can, I buy a little bit of methadone just for symptom relief. Because I'm not on a program, I find I only need a tiny bit, just a couple of mls, only ever by mouth, and just for the first three days. I also use good old Aspro Clear®, which I find really helps, believe it or not. Other than that, I get anti-nausea tablets from my doctor, which I try to take as soon as I reach consciousness on the first two days, to maximise the chance of keeping them down.

I also drink copious amounts of diet cola, lots of home-brand cordial type ice-blocks, and hard sugary lollies. I find long hot showers really help, especially when your muscles are screaming and you want to punch a wall. I get in there and really stretch my muscles around. Hot water bottles can help too in winter (the best season for detoxing). I make sure I have heaps of clean towels, sheets and trackies ready because I sweat a lot. I always feel very low energy and can barely walk, so need to be stocked up on food – like dry crispbreads and fruit – so I don't have to go out.

The other thing that really helps me is masturbating – a lot. The orgasm really relaxes the body and I always seem to feel horny when I detox. I don't want actual sex, and even if I am detoxing with my boyfriend we will masturbate together rather than have sex.

If I'm really serious I will turn off my phone and only turn it back on if I want to make a call and never look at the missed calls or messages. I have been derailed too many times by contact from the outside world.

Michael, ice user

My top tip is sleep. Sleep lots. Lots. The lethargy is incredible. The detox takes about 7 days and I sleep most of that. I find I need to use an antidepressant such as Endep®, to help with sleeping. I also use

clonidine to help with discomfort – some of the ice around now can hit you like a heroin detox.

I really think if you are stopping from quite a spell and you are looking at staying stopped that it's worth getting a psych assessment, as sometimes that can help sorting out the right meds.

I get very anxious indeed, paranoid and irritable. I get anxiety from cravings, but valium (or any benzo I can get) definitely helps me control that. I want calm surroundings, music I like. My advice is to not be around anyone who will aggravate you. If you are still in psychosis you will want to be on your own. You can get angry and aggressive from anything, you know, just from the toilet door not opening.

It's also really important to drink heaps of water. Rehydrate continually. Water will clear it out, wash it all out.

You really need to let your body recover. You've probably run your body pretty hard while you've been using, so be nice to yourself. Remember to eat because you may not have done that for a while. I can really eat a lot. I eat lots of fruit and make sure I top up with vitamins. Also I find I need a good laxative because it builds up when you're using. I once had an x-ray and it showed the stool all impacted and backed up from using. You need to clear all that in your detox.

Another thing is that you get really horny on ice and you have lots of sex. I know some guys who end up with red raw penises after an ice binge. So let all that settle down, be calm, be good to yourself.

I make sure I don't give myself a hard time, that I am gentle and do all the things that relax me and make me happy.

Effects of detoxing		
Drug	Duration	Side-effects of detoxing
Opiates: heroin, oxys etc.	For most people, it peaks in 2 to 3 days, clearing by 5 to 6 days and mostly gone by 14 days. May take 3-4 weeks before you have a night's undisturbed sleep.	Irritability, restlessness, anxiety, physical and nervous tension, depression, sweating, runny nose, yawning, tears, sneezing, goose pimples, insomnia, stomach cramps and pain, nausea, vomiting, diarrhoea, muscle cramps especially legs and arms, back pain, pains in joints and bones, headache, cravings, sleeplessness, nightmares and disturbed sleep, fatigue.
Speed and ice	Crash up to 4 days, withdrawal 2-10 days, subsiding over 2-4 weeks	Crash typically commences 12-24 hours after last use, and subsides by days 2-4: Exhaustion, fatigue, sleep disturbances (typically increased sleep, although insomnia or restless sleep may occur), flat mood, anxiety or agitation, generalised aches and pains, some cravings. Withdrawal typically commences 2-4 days after last use, peaks in severity over 7-10 days, and then subsides over 2-4 weeks: Strong cravings, fluctuating mood and energy levels, alternating between: irritability, restlessness, anxiety, and agitation, fatigue, lacking energy, depression, disturbed sleep including vivid dreams, insomnia, general aches and pains, headaches, muscle tension, increased appetite, poor concentration. Disturbances of thought (paranoid ideation, strange beliefs) and perception (misperceptions, hallucinations) can re-emerge during withdrawal phase after having been masked during crash.
Cocaine and MDMA	10 to 14 days	An immediate crash followed by lack of patience and low energy, depression, sadness, long sleeps, hunger, craving, fatigue, low energy, nausea, vomiting.
Benzos and tranquilisers	2 weeks, up to 6 months	Symptoms include anxiety, insomnia, restlessness, agitation, irritability, poor concentration and memory, muscle tension aches and twitches, depression. Rarely some people can have severe effects including seizures and confusion. No users of benzos, similar sleeping pills and tranquilisers should stop using suddenly as this could be dangerous. A gradual reduction in dose over a period of time is usually necessary. Specialist advice should be obtained.
Methadone	Mild symptoms start at 24 hours, and peak in 2 weeks. Getting your sleep patterns back may take six or more months.	Like other opioids (above). Poor sleep including weird dreams for some months. Don't stop suddenly; work with your prescriber to reduce over time. A slow detox means fewer and less harsh symptoms and a better chance of staying opiate free long term (if that's your goal). Symptoms will get more severe as your dose decreases. It takes 3-4 days to fully experience the effects of a drop in dose. Some people transfer to bupe first, then off that, as withdrawal symptoms may be shorter and milder.