

**COMMENT:
on issue #70**

I am so very thrilled (if that's the right word) with the article *Saving Daniel* [UN#70]. It looks wonderful and I could not be happier. The lay-out, the sketch of Daniel by a very talented person, the paragraph at the end by NUAA, all fantastic. I have unashamedly mentioned it on RIP Dan Facebook and have had so many enquiries about where people can get a copy!! All good publicity for the cause. So, I humbly thank you and everyone at NUAA, you have given him and others who have gone before him respect and dignity.

Warm regards,
Judy

Dear Judy,

Daniel meant a lot to many here at NUAA. We were proud to know him and I am glad we could honour him in *UN*. Thanks so much for your letter. We share with you both the grief and joy of remembering Daniel.

Ed.

**COMMENTS:
on issue #71**

Wow! Enjoyed all the real stories! Thanks!

Lee

I was most impressed with the magazine, far better than I expected. Keep up the good work!

Gavin

Feeling the love? Please feel ours flowing back to you. Congratulations, a wonderful issue, well done. Love it!!!

Paul

I think the new edition is fantastic & love the new look. Thank you so much for your stories.

Sharon

I've read cover to cover and very impressed. Congratulations... nice easy read and well informed links to subjects of interest.

Tracy

I really liked all the links to websites. People think we don't access the net, but of course we do!

Cee

As usual, *UN* doesn't disappoint! I especially like the article *HIV Whipping Girl!* I'm passionate about informing about AIDS & HIV. Would like to write my story one day... still can't decide which parts the most interesting though!!

Simone

I've done heaps of jail. I'm no good at writing and spelling, but I love the mag, especially all the sick stories!

Fonz

I was quite impressed with the Xmas issue, the layout/format of this issue was appealing. I enjoyed the "Xmas bites" for its bang for buck and "Julie Bates" was empowering in the way she stood up against discrimination. On a side note I was extremely happy for the extensive write up on Fentanyl in the previous issue. The community needed that information.

Kieran

Thought this issue had many short stories as well as informative bits. You've done well, and I look forward to contributing more in the future.

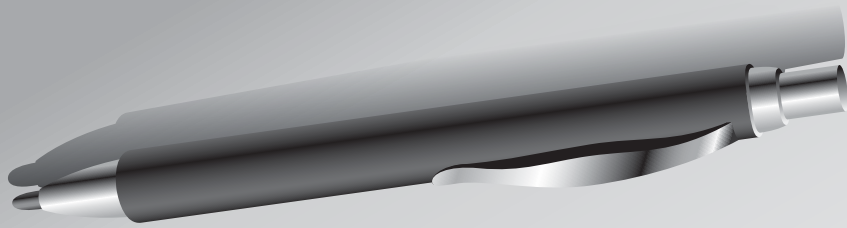
Deborah

Hi, I read your article on Sharleen. I knew Sharleen before and after she got AIDS and I just wanted to say, the article may have told the facts. And most of her friends in the Cross saw the 60 Minutes piece on her. But the Sharleen we knew and even loved a bit was not described accurately in your article. At least you did the article, it's just a pity it took so long.

Linda

This issue has been really informative and very helpful advice, particularly relating to the Xmas period. Well done!

Amanda



Issue #71 is a breath of fresh air! The stylish new layout and diversity and wealth of content demonstrate your passion & commitment on providing a mag of the highest quality. How did you source so many readers? In the past there have just been a few longer stories and the bulk written by staff or the sector! I found the news section far more accessible and found myself reading avidly a section I usually skip. I also loved the addition of relevant user's stories following each topic. The whole magazine is slicker, funkier and overall more accessible.

Stephanie

Love the new look! Fab!

Jennie

I am 34 and have been reading *UN* on and off for many years. Your editorial brought me to tears. I have been an intermittent drug user (in all of the stages you so accurately described!) for 23 years I have achieved high grades in school, been in legitimate employment since the age of 14, received a Diploma of Community Services and Welfare (have kicked Stage 1 Hep C's butt!) and feel proud not only of what I have achieved so far, but of the person I am today, regardless of my past. The way in which you talk about believing users can be "awesome lovers, parents, friends, workers, professionals, teachers..." as well as our lives can be "interesting and fulfilling" made me cry (on George St in peak hour!) As a user, you don't hear many (if any!) positive messages, so I thank you for your authentic and insightful words of encouragement. Thanks for reaffirming not just for me but for countless other users who will be touched and validated through your emotive and inspiring editorial.

Michelle

Love the new cover. The cartoons on some of the old covers really trivialised the content.

David

For me, a bit more boring. Probably a good thing for all the newbie/idiots though I doubt they read all that much. Don't turn into another boring, unreadable Big Issue. And the graphics are mainly terrible apart from a couple of pages where you made an effort, though I should stop complaining and offer my creative skills, so there you go.

Nat

I wanted to thank you. Last week my girl turned blue. If it hadn't been for your article on overdose I wouldn't have known what to do. I saved her life. What you didn't say is how physically demanding all that CPR is, I had to get really angry to do it, and we both looked like we'd been beaten up by the end of it. But she's alive and I'm elated and so very grateful to *UN*.

B

Awesome job with the latest issue of *UN*. I particularly like the new layout and design. I took part in the review last year. Job well done!

Jack

I was disgusted by how wrong your piece was about my son, Nic, in your magazine [*UN*#71]. He did not die of a Fentanyl® overdose. He died of "a respiratory arrest caused by an acute asthma attack and/or a cardiac arrest". What was printed was absolute lies and if you don't retract it, I will be taking it further. You should not print things like this without getting permission from parents.

Sandra

Dear Sandra,

It must have been very upsetting for you to read the piece in *UN*. Causing you distress at this very sad time was the furthest thing from our intention. Please accept our apology and our sincere condolences at the loss of a much-loved man who is sadly missed by many.

Ed.

NUAA noticeboard

The peer approach at NUAA's Needle and Syringe Program (NSP) works! Here is some data from our NSP and automated dispensing machine (ADM) in Crown Street, Surry Hills.

Occasions Of Service (OOS)	Number of syringes handed out
Jan 2013: 609 OOS	Last quarter: 85,688
Feb 2013: 531 OOS	Last year: 284,381
Mar 2013: 538 OOS	
2013 so far: 1678 OOS	
Average of 20 OOS per day	

Last year we commissioned an evaluation of our syringe provision services, including the NSP and our ADM which is attached to the outside of our building and vends needles 24/7. In the evaluation we asked each customer what was the last drug they injected. The table shows what percentage of people used which substance.

Last drug injected	NSP	ADM
Heroin	35%	42%
Amphetamine (Speed, Base, Ice)	44%	31%
Cocaine	1%	7%
Methadone	8%	7%
Morphine	4%	4%
Anabolic Steroids	0	1%
Subutex/Buprenorphine/Suboxone	5%	2%
Prescription Oxycodone (e.g. Oxycontin)	4%	6%

We also asked why people came to NUAA as their first choice. Note that people gave more than one reason. Figures represent how people answered by the % of people asked.

Reasons for obtaining needles from NUAA as a primary source	NSP	ADM
The location is convenient	80%	73%
I can remain anonymous	39%	30%
I like to discuss things with staff when I pick up equipment	29%	20%
I can access health information when I pick up equipment	28%	13%
I don't need to talk to anyone	10%	10%
They provide a good service	35%	20%
It is open at the times I need equipment	14%	7%
Needles and syringes are free, I don't have to pay	35%	17%
They provide a range of equipment	31%	13%
I can get as much equipment as I want at one time	31%	10%
I can go there as much as I want without anyone asking me questions	28%	13%
It is peer-based and staffed by peers	29%	17%
I can get equipment at any time of the day or night	8%	7%
Other	8%	7%

SOME COMMENTS FROM OUR NSP CLIENTS

"Convenience and [disabled] accessible for me!"

"Convenient location – well stocked... the happy staff. It's a good place to come to"

"Being able to sit down and talk to the staff about anything"



Needle and Syringe Program (NSP)

At NUAA's office, 345 Crown St, Surry Hills, 2010

Discover the difference a peer-run service makes.

Friendly, warm and welcoming! Free supply of your harm reduction needs including some speciality items. Tips and advice on safer using. Referrals to other health and aid services.

Opening Hours

Mon & Thu: 11am - 4:30pm
Tue: 1pm - 4:30pm
Wed & Fri: 1pm - 7:30pm

Coin-operated needle and condom vending machine available outside the NSP for use out of hours.

NUAA's mobile service operates through some Southwestern Sydney suburbs for NSP supplies, advice and referrals. Call 0487 387 442 to arrange to meet.



TO BECOME A MEMBER OF NUAA, SIMPLY FILL
OUT THE FORM ON THE BACK OF THIS MAG!



NUAA gives NSW illicit drug users a voice!

Call us for info, advice and assistance: (02) 8354 7300 or 1800 644 413
Great info and links on line: www.nuaa.org.au

NUAA'S Electronic Advisory Committee

NUAA is currently recruiting interested people for its Electronic Advisory Committee (EAC). This is about a new way people can be involved with NUAA and its work by means of the internet, emails and other e-fora. The idea is that people can be involved no matter where they are as they don't have to come in to attend meetings in person. It is very important for us at NUAA to get our community more involved. And as a NUAA member, this committee might give you more feeling of being part of NUAA and what we do.

NUAA can send you out a welcome pack to explain more about the EAC; or you can ring Jeffrey on 02 83547321; or email community@nuaa.org.au to get more information. We hope to hear from you!

NUAA'S OPEN MORNING...

Would you like to know how to get more involved with NUAA? Please come and have morning tea and get to know us!

Learn about NUAA and NUAA's goals for 2013/14!

Meet the NUAA staff and take a tour of NUAA's NSP and offices!

Learn more about the work we do – things like peer education; peer support for hepatitis C treatment and drug treatment; consumer participation; and policy and advocacy!

Our open days happen every 3 months. The next one is Tuesday, July 9, 11.30am-12.30pm.

Open Day seating is limited to 20 people so bookings are essential. Call Yvonne on 02 8354 7300 or email yvonneR@nuaa.org.au



NUAA NEEDS YOU AND WANTS YOU TO HAVE YOUR SAY.

Join the fight to end stigma and
discrimination against drug users.

The NSW Users & AIDS Association Board of Governance will be conducting a series of forums where you can meet members of our current Board and our staff. Please join us to hear stories from our illustrious beginnings, our affiliations and partnerships, current projects and our plans for an even brighter future. At these forums we will be discussing what it means to be a member, what membership offers and generally, what the benefits are of joining one of the oldest and longest serving peer based organisations in the world. The forums will give everyone an opportunity to ask questions and provide ideas and feedback for our ongoing membership drive.

Remember, without members NUAA ceases to be the collective voice of users in challenging stigma and discrimination and improving outcomes in a range of health, legal and social needs and concerns.

The first forum will be held at NUAA at 345 Crown St (entrance next door to the Salvation Army) at 5pm on Thursday 4 July. Light refreshments will be served.

For further information, please contact NUAA on 8354 7300.

NUAA WONDERS...

The final very successful NUAA WONDERS... series has its last session on 7 June at 2:00 pm, 345 Crown St Surry Hills. The series has been based on the World Health Organisation's *Guidance for Prevention of Viral Hepatitis B & C Amongst People who use Drugs*.

The topic to be discussed by our expert panel and audience will be that "Psychosocial interventions are not suggested for people who inject drugs to reduce the incidence of viral hepatitis" Check the NUAA website for more info.

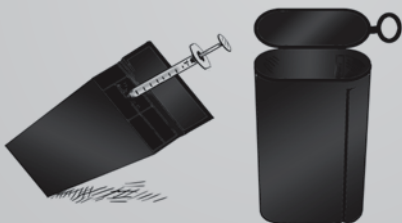
RSVP on 02 8354 7300 or email jeffreyw@nuaa.org.au

PARAPHERNALIA

Equipment stocktake for safer injecting

DISPOSAL BOX FIT PACK

5 fit pack or 10 fit pack of standard syringes that come in their own black disposal box. Remember, once you've used a fit, lock it away in the click-in compartment. They go in but don't come out, so you can't be tempted to reuse. It's better in the box. When full, dispose at your local NSP or Pharmacy.



FIT STICK

The fit stick is a single scabbard designed for 1 x 1ml fit disposal. Use it for on the go. Discreet. Unrecognisable.



100 FIT DISPOSAL BOX

The perfect companion to the 100 box is the range of large yellow fit bins stocked by NSPs. Choose the size most appropriate to your use and store it safely, well out of harm's reach. Remember to bring your bin back to your NSP or pharmacy for safe disposal as hazardous waste.



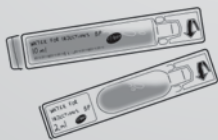
FITPACK SPOON

These are plastic spoons for mixing up. Swab first, even when new. Will hold some heat, but avoid excessive heat. Other countries provide little metal cook pots, but these are designed for product that doesn't need heat. Balanced to sit nicely on a flat surface.



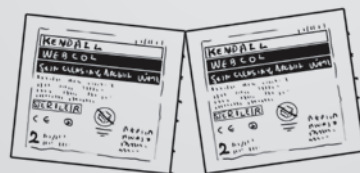
STERILE WATER

Comes in 2 ml and 10 ml packages, depending on your needs. If you can't access water, it is always better to boil any water you are going to use, just to be sure, although tests run by AIVL have shown that Australian tap or cistern water is nice and clean.



ALCOHOL SWABS

You can get them singly, in a strip or grab a box of them. For use on surfaces, spoons, scissors, tourniquets, anywhere there might be germs lurking. Use them on your body to get rid of skin flora at the injection site. Remember, wipe in one direction only, before you inject. Not for blood clean-up. Never used for cleaning fits or other equipment for reuse: only bleach or Fincol® can help you there.



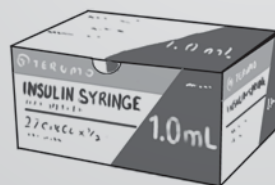
COMPLETE FIT

Your stock standard fine syringe with the orange lid, used for powders like heroin and amphetamine. Sometimes called the "complete" as it has barrel and needle in one. The first item to become available at NSPs. Often available in Terumo with 29 & 27 gauge needles or B&D Ultrafine 27 gauge needle, and with a barrel to fit 1ml or 0.5ml of liquid, it's all about personal preference. Like all fits, it's strictly one use only.



100 x 1mL SYRINGE PACK

If you have somewhere safe to store these, we recommend you take a box of 100 so you don't risk running out. There is no limit at NSW NSPs, you can take as much stock as you need.



PLAY IT SAFE

TOURNIQUET

Tourniquets can transmit blood borne viruses like hep C. Remember you don't have to see the blood for the virus to be present. So a single-use rubber tourniquet was developed so people didn't share and could dispose of after using once. Make sure it goes in the fit bin. Comes in blue, blue or blue, just like macaws.



1. No reusing! All these items are one use only.
2. Dispose thoughtfully! Throw all products away when you are finished, preferably in fit boxes or bins.
3. No limits! Take what you need and make sure you have enough clean equipment for your purpose.
4. Ask questions! Find out what you need to keep you as safe as possible. NUAA staff are peers, so if you want accuracy and confidentiality by people with real life experience, call or drop in.

STERIFILT

An alternative to cotton wool is the Sterifilt. Great for coke and other powders that don't fully dissolve. Goes on the end of a standard 1ml fit. Draw up or push through slowly.



CONDOMS, LUBE AND DAMS

All NSPs stock a range of condoms and dental dams in different brands, sizes, colours and flavours. Small, medium and large refer to width, not length. Don't forget to grab lube as well: condoms & lube go together like strawberries & cream...



STERILE GLOVES

Standard gloves. Get a pair or get a box of 100. Come in small, medium or large. Think about using them for taking care in complicated mix up procedures and where you are injecting others or someone else injecting you, like with PIEDs. And for safe sex as well.



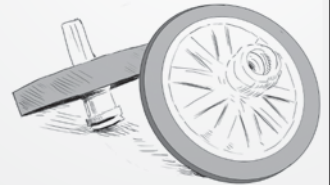
COTTON BALLS

Cotton for filtering out the rubbish from your mix and enabling a fine tip to pull up the liquid. Using freshly washed fingers or fingers cleaned with an alcohol swab, take a small bit from the centre of the ball and roll it tightly to put in your mix. Put your needle in the centre of the filter to draw up. Also used for blood clean up. Dispose of blood product with your fits, in a fit bin.



WHEEL FILTER

We can't emphasise enough how important using a wheel filter can be to your health. Unfortunately access is limited, but NUAA carries two kinds. The red one is a Particle Filter at 1.2 microns. Use this for pharmaceuticals. The blue one is a Bacterial Filter at 0.22 microns. Use this for methadone, bupe and PIEDs. Single use only. Using these can be tricky. NUAA can send you some instructions (as printed in UN #68) or come in to NUAA's NSP to find out how to use them properly so they become your new best friend.



TIP/NEEDLE

Tips come in blunt and sharp. There are various gauges, depending on your purpose. "g" refers to gauge. The higher the gauge, the finer (smaller) the needle.



For drawing up from containers and pushing through filters. NUAA carries 2 kinds of 18g needles – a blunt one (straight edged) and a sharp one. The sharp one is designed to pierce vial lids or capsules. Both pale pink, the blunt is in a pink packet and the sharp in a black and white packet.

For injecting. NUAA carries: 21g (green), 23g (blue), 25g (orange), 26g (brown), 27g (grey) & 30g (yellow). The following is a rough guide: talk to your NSP worker for best advice on what you should be using. 26g & 27g are the same size as the standard needles on complete 1ml fits. 21g & 23g are used primarily for PIEDs. 27g for Human Growth Hormone. 23g & 25g for methadone. 23g for pharmaceuticals, or if very well filtered can go up to 27g. 27g & 30g are best for hands and feet and veins close to the surface. Femoral (groin) injectors need to use a 21g or 23g.



BARREL/SYRINGE

There are various barrels for various drugs. They come in different sizes in NSW NSPs: 3 ml and 5 ml. Unfortunately, for anything bigger, 10ml or 20ml, you need to go to a pharmacy that sells them (and yes, NUAA is fighting to get larger barrels carried by NSPs). And with different fittings: luerlock (screw in) or slip on. Can be used with drawing up needles or injecting needles. If you are doing anything other than your standard powders, you need to be using barrels and tips. Ask your NSP worker what the best fit is for the purpose you have in mind. Talk to NUAA staff if you wish to have that discussion with a peer. As opposed to completes, syringes with attachable tips have larger amounts of dead-space where blood can collect, so there's a higher chance of getting hep or HIV if you reuse.



AWAKE WHEN YOU ARE

Automated Harm Reduction

Called ADMs (Automated Dispensing Machines) in the biz, and vending machines on the street, this is a useful option for getting sterile fits. You can find one at most hospitals and primary NSPs to cover hours of closure, and increasingly at secondary NSP sites: 150 state-wide and counting. But every time a new one goes in, there are protests (the latest kerfuffle has been in Redfern). Workers worry about needle stick injury. Administrative services worry about used fits on the ground. Businesses worry about loss of income from the rush of users and

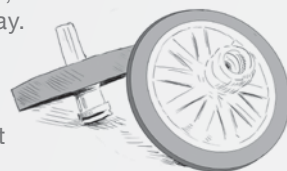
crime flooding to the scene (known as the honey-pot effect). The general public worry their kids will be attracted to these unlabelled, out of reach, dark coloured metal boxes and clamour to spend their lolly money on fits. All these concerns have been shown to be groundless and praise to NSW Health who stay strong in supporting the ADMs as part of an effective Needle and Syringe Program. But what about people who inject drugs? What do we think? Do we actually use the machines? And what would we do if ADMs weren't around? I asked some readers...

Wheelin' and dealin'

I use vending machines a lot, usually in the early morning hours, between 1am and say 5am. I've only ever used the pay ones, but I think free ones are an amazing idea. I'd never heard of that til you (*UN*) mentioned it. Sometimes I don't have the money, or they are broken or empty, especially over long weekends. If I can't get access to a fit from a machine, I ask friends first. I'm homeless so I can't carry many fits on me, I get searched a lot. I stash fits all round the city, so I go hunting if no one has a spare. After that, I'm getting desperate. I've shot up with used fits before, not knowing if they

were mine or not, or whose they were and even knowing they belonged to someone with hep. I did wash them out as best I can, but I've had to do that in toilets before today. I think that's how I got hep B, by reusing. Vending machines are really important to me, they make all the difference between using a clean, sharp fit and an old one. But they should carry big barrels and wheel filters. Filters are a biggie. I really think they should carry those as standard equipment.

Matty



Caveat vendor

I use the machines a lot. It's because they're confidential. I deal and don't like to carry fits on me; if I was searched and they saw fits they might go over me with a fine tooth comb and find the gear. So I tend to buy fits as and when I need them. I prefer machines that offer privacy. I don't want to be clocked. There are a few different kinds, the one flaw they all have is that they can jam and run out. I don't care so much when they eat coins, but I do care when I can't get a fit. Then I have to hassle a friend for one and usually get one that way. Would I reuse? Yeah my own sometimes. Would I use someone else's used fit? I wouldn't like to be in the position to test it. It's amazing what I can justify to myself at times.

Eddie

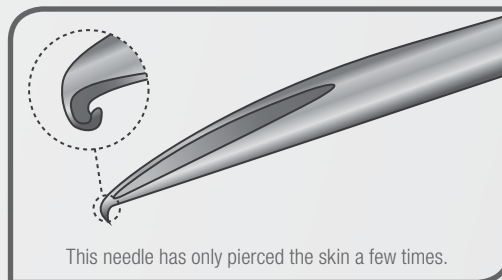


dispensing safety

Along a similar vein

I don't use them much, but I have used them. And those times have been emergencies. I have been in spots where I haven't been able to get a new fit. I ripped open my box (of used fits) at home and got some out. But I entertain sometimes, so could I be 100% sure each time I've reused that they were mine I was reusing? Of course not. All the fits go in the one bin. If I'm getting low on fits, I'll start putting a scratch on mine so I can ID them, that can help. Anyway it's not just HIV or hep C or hep B. Have you seen those drawings of reused needles? They really start to fray away and can seriously fuck your veins. Not to mention it hurts. Vending machines are great, it's a shame they cost so much. Maybe you could get tokens or a card, but that wouldn't be good for people who get searched a lot.

Elsie



Street value

I've used them all I think, the little cigarette type ones, the bigger ones. I think they are way too expensive, seems ridiculous that if the NSP is open I can get 1,000 for free but have paid \$3 for 3. Should be 20 cents max. There are free ones but they're rare. I'd say they are easy to use. I tried a new free one I was told about and it took me a while to work it out. A bit of an IQ test. You have to press one button at the top at the same time as another down the bottom to get it to work. No instruction, tricky if you're sick and in a hurry. I guess that's so only people in the know can get it, like child proofing, but I wondered if

it would get vandalised if you didn't know. And what if you had a disability. But great it was free. I guess if you can't work it out the first time you ask the local NSP next time you're in. I know some people say, why have vending machines, why not just keep the NSPs open 24/7 and I think we should have a few of those, even attached to Emergency at hospitals, but not everyone wants to talk to someone, they want discretion. I do think machines should carry everything – barrels, filters, the works.

Jai

Peerless experience

I'm aware of where vending machines are located, however it's by far my preference to stock up well – usually a 100 box – that is unless I'm making an effort to stop using. It's good to know the machines are there, but I am generally reluctant to pay for anything – especially something that's usually available for free. I also enjoy the social interaction that comes along with using the NSP. At these places, I'm not shy about my using. I like going to NUAA for the peer experience. I have passed on info to other users about the location of vending machines, but at the end of the day, why pay \$3 for something that should be free?

Erin

Safety third

I use vending machines anytime the local NSP isn't open, so could be 24/7. I'm a street dealer, I need needles for me plus my clients. So I get them for me but I also pass a lot on, especially overnight. I want people to be safe. I do get boxes of 100 from NSPs but I go through a lot too. Vending machines are fantastic, a really great solution when shops are shut, and confidential too. If I couldn't get a clean fit when I needed one, I'd ask a friend or a client for one. If I couldn't get one that way, I'd reuse, no question. If I couldn't get any sort of fit, I'd use a rusty nail.

Bert

PROTECT our world

It's better in the box

I am annoyed by any rubbish in the street, be it chip bucket, drink bottle or plastic bag. I care about my world and it upsets me when people don't consider the impact of their actions on the environment at large or their local community. It is not so hard to find a bin or hang onto garbage until the next opportunity to dispose of it "thoughtfully".

As someone who injects drugs, I particularly notice discarded fits and it pisses me off. Sure, sometimes it pulls my strings so I feel like having a shot and that's not fair. But mostly, I think it gives users a bad name and reinforces the stereotype that we are "other": irresponsible, selfish, careless.

While there are many reasons for leaving a fit in a public place – like we don't want to be caught with it by a law enforcement officer – there are many more reasons to box and bin it.

Not only do Fit Packs secure fits so they can't be used again or injure or distress anyone, they are quite discreet if left in public view; most people don't even know what those black boxes are, even if they can spot a fit a mile away. The best scenario is box your fit and drop it in a sharps bin at an NSP, chemist, hospital or designated community centre. And bin your wrapper and other rubbish.

Putting your discarded used fit in a safe bin reduces the risk of someone reusing it if they are desperate. Reusing an unsterile fit can cause bacterial infection resulting in abscesses and endocarditis. Or if you have a blood borne virus, you could pass it on. Given favourable conditions inside a syringe, hep C can last up to two months; hep B can survive four weeks or more; and HIV can persist up to four weeks.

Tidying up your equipment also reduces the angst of the general community who, on seeing using paraphernalia lying around, has an emotional reaction that is usually unkind to injectors and subsequently can damage the services that protect our health.

Every time the general public sees syringe rubbish, they are connected to the worst stereotypes of users and viruses carried by blood. It not only reminds them that there are drug users living in their community, it imparts a sense of danger around

both the people and the behaviour. They bond to a belief that people who inject drugs do not hold the same values around being effective members of society and caring about the other members of the community. While a fit is a common item to us, they react as they might to a used condom or tampon left in the street.

And although needle stick injuries from street rubbish are unheard of, mischievous media means many people make an immediate connection to child safety. Who needs evidence when emotion will do the job?

When that emotion is directed towards destroying much we have worked hard for, including reducing our NSPs and other services, it becomes a very serious matter. When Mr Citizen sees using paraphernalia, they look for the nearest NSP to blame, target and try to close; and the area becomes a "hotspot" for increased police activity. Every time we drop a fit, we are giving ammunition and intel to use against us. All we have fought for over decades can become at risk because of a bit of street rubbish.

So, if you've had your shot, put it straight into the Fit Pack box. Even when it's tricky. Even when you're in a hurry. Try it and you'll find it gives you a good feeling to be doing something positive to protect yourself, your health services, your fellow users and other community members.

Kleo

TWO GREAT DISPOSAL SERVICES

A great app developed to help you find the most convenient location to dispose of your sharps safely, you can find **safesharps** on the net or put in on your phone via the app store. The app lets you put your location in – anywhere in Australia – and then gives you a disposal point within 10k of where you are. Have a look here <http://www.safesharps.org.au> or enter **safesharps** at the app store.

And if you see fits lying around your hood, get proactive and ask for them to be picked up. Call the **NSW Health 24 Hour Needle Clean Up Hotline on 1800 633 353**. They'll come and tidy them away!

EDITOR'S
NOTE





Life changes stories of changes in drug use



IF YOU CAN'T BE WITH THE ONE YOU LOVE...

As we go through life, our drug use changes along with everything else. Some change is by choice and some is thrust upon us, but all of it affects the type of drugs we take and how frequently we take them. For some of us, it is meeting the needs of a family, getting a new job or being sacked or moving to the country or wanting to go overseas; for others it is losing or gaining contacts, friends or family members; and still others make changes due to a prison sentence, ill health or simply because they are growing older. *UN* asked a number of people who have made changes in the way they took drugs about why and how that happened, and what it

meant for them. In fact, the whole issue is about change in a way, and you will see that most of the writers have experienced some kind of difference in how and what they use for different reasons. This sections includes a selection of shorter stories, followed by four longer stories, from people who have experienced change in the way they use drugs. I've included stories from people who have gone from heavy use to occasional use, because sometimes we just need to be reminded it can be done, that there are lots of ways to live a life and that people who use drugs are capable of anything, including shaping our own destinies.

MIRANDA'S STORY

Slowing down

Speed was my "drug of choice" but "life had become unmanageable" as they say. I decided to go bush to straighten out. I was left with a huge hole in my life so started using pot and alcohol, the only things available where I was and two substances I'd never used before. I even went on my own into the bush looking for mushrooms, which I found. None of these things really worked for me so I found myself back in the city, only to find that the speed was shit and hard to get. This led me to trying ice, again it wasn't what I was craving. I'd spent my life up until now always up, but things were about to change forever. When the ice dealer (who are notoriously unreliable) moved, I was introduced to heroin. I've never looked back and to this very day she remains my "drug of choice".



Sure, that's a creative and fresh way of looking at it Suzie, but I'm a conservative kind of girl... I couldn't possibly attempt a change I've never tried before!



You've got to stop thinking you can fix things with a daily pill! You need at least SIX pills, THREE times a day...

DAVE'S STORY

A friend in need

When I was 18 I broke my back, I was given heavy meds, then cut off with no alternative than to self medicate. For 20 years heroin has been my "drug of choice". I was a runner and had a massive habit. My tolerance was through the roof but that was all about to change. We all think we are invincible and I did pretty well for a few years. But eventually I got busted and instantly went to jail. By the time they offer you a [pharmacotherapy] program you're already straight. But my mate in there was getting Suboxone®. I didn't realise the jail population were smoking it and getting smashed. Some were getting off on it like speed. It was the major commodity in there. I used it for recreation and boredom relief. It certainly didn't change my want and need for my "drug of choice". I got my girlfriend to meet me at the gate with a loaded one. Things are pretty much back the way they were before.



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DUBBY'S STORY

When the drugs don't work

Since the age of 15 I didn't really have a "drug of choice", but took it all. Heroin became it about the time my son was born when I was 31. But I only ever snorted it. This went on daily for 15 years. During this time I did make efforts to stop. One day I lugged my sorry arse to the dealer and spent my 100 bucks only to find it did nothing... I had the shits. I decided then and there to stop, which I have done by buying bupe. I found I liked the feeling, a bit speedy. I have never been on a program but buy it off the street.

I still use a tiny amount daily, much less than the lowest dose you can be prescribed. Although I dabble with gear once or twice a year, I have no desire to use again. For over 5 yrs now, bupe has become my preferred drug, combined with a little bit of pot.



JENNY'S STORY

Breaking the drought

I was a committed heroin user until the 2000 drought when gear all but disappeared off the streets. A lot of people I knew pursued pills and some went on methadone. I had always used a lot of coke but I started using more and then tried ice. Ice for me was like heroin but better. It had a good kick and made me feel good – sociable and relaxed – with the bonus of having a lot more energy to get things done. It was like the early days of heroin for me. The obvious alternative, prescription pills, just make me too out of life, I don't like the weight and it can make you do stupid things, like shoplift – you can think you're invisible. But really you stand out like dog's balls. I like to fly under the radar a bit more than that. I don't

think heroin has ever come back to what it was, and I think it's a waste of money. Ice is my new drug, it's what I do now.

MALCOLM'S STORY

Sydney or the bush

My dad was a speed dealer, so I grew up doing speed. But I was a bit of an inconvenience to his lifestyle, which included a girlfriend who was only a few years older than I was, so at 16 he found me somewhere else to live. My new flatmate was a beautiful escort, but what my father didn't tell me was she was a heroin user. That relationship marked my first drug change and I used heroin for a few years til, at 20, I went to the top of NSW on the coast for work. I couldn't get heroin there, and part of my reason for going was to get away from gear anyway. I started drinking while I was there, which I didn't do before and don't do now. I also went back to speed while I was up there. I met another girl (!) and we lived together and used speed for about four years. After that, I moved elsewhere in country NSW, but it was always speed. Then I came back to Sydney and, as you do, I got stuck here. I went back to heroin almost the minute I stepped foot back in the city. I still use speed from time to time, but it's like heroin is my city drug and speed is my country drug. I also use MS Contin now, which I mix with physeptone to get better length out of it, but that's because I can get it more easily and cheaply than heroin. Given a choice, I prefer heroin.





FATIMA'S STORY

Nursing a broken heart

I'd always used coke as a recreational drug, I'd tried it a long time before heroin. But it was always a drug I could say yes or no to... until I had two life changing things happen to me around the same time. The worst was that my darling daughter was stillborn. I want to emphasise that it was totally unrelated to my history with drug use. But I still felt incredible guilt as all mothers do in this situation. I was very angry and sad – totally bereft. I devoured heroin in increasing amounts, but it didn't really help. I started to use coke as a way to cope, self medicating my way out of the void. And it worked... However, it took quite a large toll on me financially. I continued to use heroin and would start my days with a shot, then began the search for money to buy coke. I did this many ways over the two years that I used coke which I injected several times a day. I moved from my regular day job as a tradie to doing crime. I got on the 'done so I didn't have to worry too much about getting the opioid fix and could focus on coke. Coke became the escape that heroin just couldn't fulfil at that time. It helped me feel like I could keep going on, a suicide prevention strategy; and it worked for me. There came a time, after nearly two years of multiple daily use, when I found coke was taking its toll. I felt I

was losing my grip and my partner had decided to slow up. We decided to try and start a family again, so I made the decision to give up the coke. I have since been blessed with a lovely little boy. I'm on a bupe program now. I use heroin and ice on occasion and drink alcohol regularly, but I haven't touched coke since.

JIM'S STORY

Plan X

Usually I just do grog and nyandi, but at Xmas you couldn't get nyandi anywhere round home [in rural NSW]. It just dried up, a total drought. Something about Xmas, it often happens. But someone had some pills, some Xanax, so I tried those. That was pretty good, not creative but relaxing. A lot of people were doing those and other pills as well, even patches. I didn't inject them, though some of the others were doing that. I'm not an injector, I've only done it once. When the nyandi came back I started doing that again but I still do a few Xanax now with grog sometimes. But some people I know are fully into the pill thing now. Maybe they would have anyway but it started as a replacement kind of thing. Now I have something else I can add in the mix if I need to, so it makes you less stressed if the nyandi goes off to know that.





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ANNA'S STORY

As part of a balanced diet

For over twenty years I have used heroin. As well as using because I love it, I self-medicate for serious pain from a chronic health problem. It makes me feel much better and I really enjoy it! I don't believe that I am doing anything wrong by taking drugs. I take them as part of a balanced diet!

About 12 years ago, my ex-partner and I had a child. Following a lot of pressure from doctors, we both went on methadone. I resent methadone as an unhealthy alternative to heroin. If heroin were legal, I would use it every day with no problem at all as I function perfectly well on it. I changed other things about my life, like any other new parent, including reducing the amount of partying and using I did, but I feel that I did not have to completely give up drugs in order to be a good parent and effective worker. I would like to see more choices to help people who use drugs, but most of the change I have made has been to please others and avoid rubbing against DOCS, not because I really felt it necessary.

I've always been what I regard as a functional user. I think that I am living proof that using heroin every day for twenty years does not turn you into a criminal, thief, bad parent or other negative stereotype. I have always held down a well-paying, highly skilled job and paid for my own drugs. I have never lost a job due to drug use. I think I am a good parent to a great child. My business supports us in a lovely suburb. He does well at school and has lots of friends. He excels at half a dozen sports and hobbies, is well-dressed, has all the latest gadgets and toys, has a special relationship with his grandparents and enjoys holidays overseas.

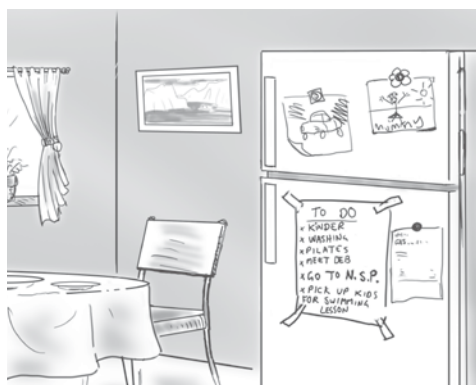
Most of the users I know have jobs, pay their taxes and are responsible members of society. There are

many like me – who knows how many. There are probably a lot more functional users than those who are “chaotic”! We are often the hardest workers and very responsible because we are trying to stay below the radar. All the parents I know who use illicit drugs are responsible members of society, working in every occupation out there. They work hard at being good parents, including volunteering in the school canteens and libraries, partly because they are so worried about DOCS.

Society sees and stereotypes the visible users, those who have been forced onto the streets as a result of prohibition. Not everyone is lucky enough

to earn the money I have, often the difference between “passing” as Ms Average Citizen or being pegged as a user. Prohibition just makes it a complete struggle for everyone to do what they want and often, need, to do.

At the moment, while no one knows, I am a respected and involved part of the community. But I live in fear that I will be “found out” because I know the effect it would have on my son's life.



The minute any of them found out about my drug use, that would be the end of it. I would never be able to mind their kids; their kids wouldn't be allowed to spend time with my son; and I would be the pariah that society turns drug users into.

Humans will always take drugs and have always taken drugs. It is time to legalise heroin use and bring a heroin program into Australia. It is time that we acknowledge the part that heroin users play in our society. It is time the government and society stop torturing – and locking up – innocent people. Prohibition helps no one except the politicians, police and business people who are making a lot of money out of the illegal drug trade. These people treat drug users as pawns and this has to stop.



GINA'S STORY

The line

I did heroin every day for 10 years. I really got sick of it. I got sick of having no life, no money and no social contact. I didn't have a job. I was bored with it, and I just knew I could do better for myself. It was a long time between deciding I didn't want to live a life of daily heroin use and actually managing to achieve this. A long time. I changed cities a couple of times. I went on and off methadone. I got jobs and lost jobs.

But eventually, I just gradually built up enough other stuff in my life so I could let go of heroin slowly.

But I missed getting smashed and having a good time. I started using a lot of ecstasy, and speed to stay up and enjoy the ecstasy, and I did a lot of acid. It was like going from

no life to really feeling alive. It was part of the process.

I was clubbing a lot, going to bush doofs, partying and dancing under the stars to dance music, I loved that so much, it was great. I would stay up for days. I had a full time job and would party all weekend.

Because I had the history with heroin use, I seemed to slip back into that using all day thing quite easily, so soon I was using speed on a daily basis. Things disintegrated as my speed habit increased. I lost my job. I was dealing pot and speed and Es – well it was more like facilitating and skimming than real dealing – just buying in bulk for friends and using the extra for myself.

It started to disintegrate as my speed habit increased. I lost my job. I was getting scattered, using more ice and feeling more disturbed, like my fuck ups were worse. Then I had a bad experience with a drug psychosis which led to being involuntarily locked up in a psych ward. That was a real turning

point. I bought off a person I didn't normally buy from and got something dodgy. But I knew it had been triggered by too many drugs over too many days and not enough sleep.

I felt like I needed to get "normal". I wanted dogs, work, a life. So I thought, ok I did this for heroin, I can do this for speed too. All this time I used to smoke pot every day all day, because I felt it didn't count as a drug. But I decided after a while to quit that too.

Since then, I take drugs to party. I'm married now with young children. I still want to have fun. I work and I'm totally entrenched in the day to day grind of being a Mum. I still take drugs because that's an out for me. Mostly it's around an occasion,

but sometimes it's just because I feel like it,

because I haven't done it for a while. Then I've had a

great time and I

can get back to work and

a normal routine straight

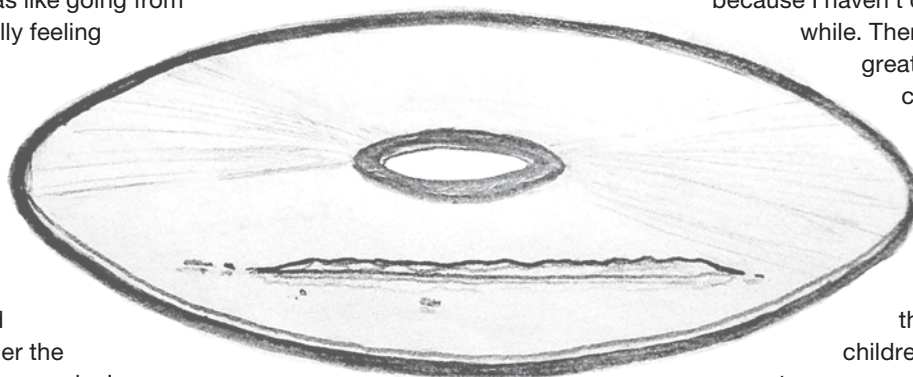
after. I am conscious

that my children don't need

to see me using and I try to be a good role model for them.

I would never go back to daily use. Never in a million years. Part of it is I notice the come down more now. I'm mentally shaky for a couple of days, and I don't enjoy that anymore. I enjoy being in control and maintaining my commitments. I try to minimise the risk. I don't like fucking up. I control my drug use carefully so I can control the balance.

I don't usually feel like I want it more often than I have it. Friends ask me regularly to get drugs for them – if I used every time someone asked me it would be too often, so I say no a lot; I tell them I will next time I'm doing it, but I know if I get it for them I'll want some and I can't afford to do that. It's taken two decades but I think I have finally learnt where to draw the line for myself.





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JEREMY'S STORY

Professional habits

I have used illicit drugs most of my life to greater and lesser extents. Some periods in my life I didn't do any drugs at all. These are all just different stages of life.

Some years back I had a full-on heroin habit for a few years, but I lost a lot of material things that I valued and didn't like being broke all the time. I also didn't enjoy where my head went. So I made a decision to stop. I didn't go to rehab or join a group or anything, but I did move away from the area I was living.

I like who I am today. I am now in my 40s, living with my primary-school-aged child. I have an interesting and demanding job that I love and think I'm very good at, and luckily it pays very well. I manage a large team and a lot of people rely on me to do my job well.

On weekends I like messing about on the water with my son in our boat.

Of all the drugs I have taken, ice is my favorite. I smoke ice through a pipe about three times a month. I've been doing that for around five years, when I got into the job I am in now. It's a tool, I use it to boost me through a long day – it gives me a lift and stops me being crabby when the pressure is on. I also use it at home sometimes, maybe once a month, usually for a specific purpose like doing housework.

It is important to me to not get in a bad place with my ice use. I make sure my child's and my needs are met first. I put a limit on how much I can use in a month and space it out. Mostly I just see myself

as someone with a balanced and rounded life and ensure that stays true.

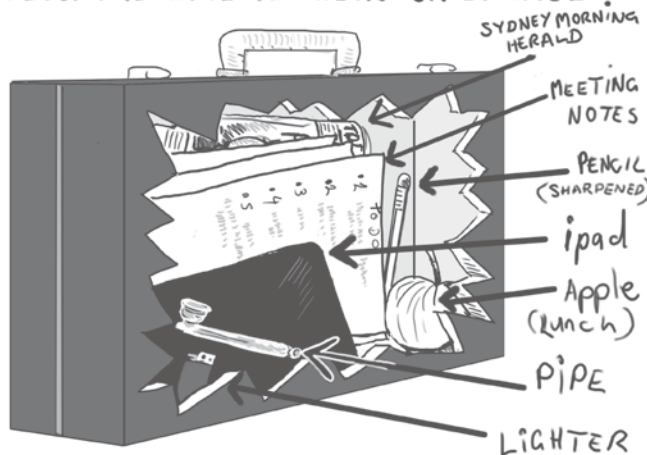
I use ice and I am neither mad nor violent, despite the hysteria in the community around ice and ice users and the newspaper beat up. I take ice as part of a full and interesting life. Maybe if you did it every day and never slept you might have a problem. But sleeplessness itself can make you go a bit crazy.

All good things have some harms attached. I am careful about keeping my pipe clean and not sharing,

as I know there can be risks around blood to blood contact due to the cracked lips you can get from smoking ice. I make sure I get enough sleep both before and after using.

I wouldn't like people to know I use illicit drugs but I don't think it would even occur to people. I am good at my job and I am a good parent, so I think those things

WHAT DOES A RESPECTABLE SYDNEY PROFESSIONAL HAVE IN THEIR BRIEFCASE?



are much more important to know about me than that I use ice now and again. I'm an intelligent and informed member of society, who works, pays taxes and has a son doing well in a private school. I guess I am one of those people who "pass" as a non-drug user. Ice has a really bad reputation and there is a lot of discrimination against drug users, so of course I wouldn't want people to find out. I don't tell people about my drug use, but I am the kind of person who keeps to themselves pretty much anyway, so it's not like I am close to people that I lie to. I am generally a keeper of laws and I think it's stupid and pointless that drug use is illegal. I believe that what I do and how I organize my life is nobody's business but mine.



EDITOR'S NOTE

Dearest GWAM (Girl Without A Mission): Thanks for your piece, please give us your details so we can pay you. I would love to work with you more; it is a joy to an editor to find a writer who can communicate

as clearly as you do. Don't sell yourself short. I think you are incredible and I see amazing things in your future, with or without drugs! PLUS Dear Talented Illustrator, call me for \$ and more work!

GWAM'S STORY

Girl seeks mission possible

I love drugs, I don't deny. I get so stoned at times I think I can fly. Why do I do it? I simply cannot tell you why...

Like a lot of people in my situation, my drug taking began in high school and I suppose I'm still at school, albeit the Sydney University of Crime. This is where the judiciary send us small fish so we become bigger and smarter fish.

I am in my second year of a three year sentence at Silverwater Women's Prison. My crimes include fraud, theft and shoplifting. These drugs were committed to buy drugs, not cars or real estate. To think of all the money I have pumped in my veins, like petrol at a service station; I could have paid off a nice house.

Hopefully someday drugs will be decriminalised to at least make them seem less exciting, less attractive. Governments to date have let us down simply because they have not got the clear message. They have failed to gain control in the war of drugs. I think it is time to adopt new and improved strategies since the current systems let us down in a big way.

There seems to be a whole community committed to monitoring my day to day choices but giving me no real strategies.

I see some of the girls in my wing disempowered with their lives, the world and its people. Some have good families, talent and bright prospects, but simply do not want to be released since they have nowhere to go. They may have burnt bridges within their family units or simply choose not to return to abusive or violent partners. Some reoffend to be part of a safer world that has become home, where they feel less

stressed not having to deal with outside pressures.

I try to pass my time keeping busy basically so I don't think so much about drugs. I'm currently doing my Year 10 school certificate. I listen to music and get stoned on rare occasions.

I believe we need a needle exchange program in gaols around the country. Hep C and HIV transmission are real and serious issues. Needles are shared in gaol and transmission sadly is of little

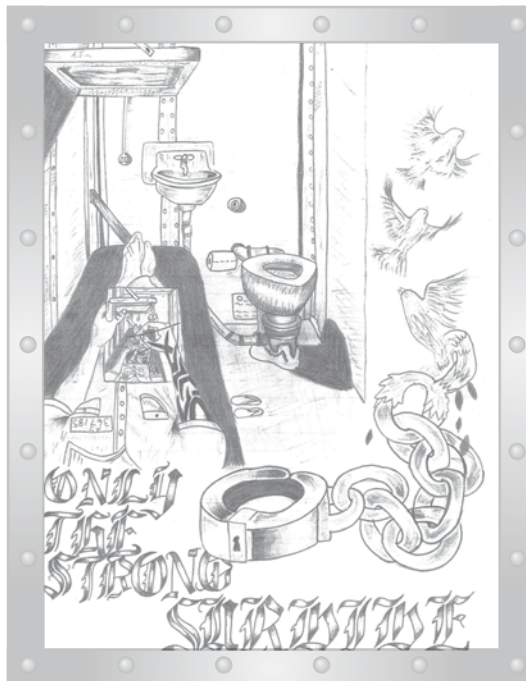
concern to IV drug users disempowered with their lives. I have been passed around like a sex toy to obtain drugs for me and my cell mate. I am at serious risk myself.

I would say to government: Please be reminded that prisoners return to communities near you. Often with hep C. So change is important for society. Ignorance is not bliss.

The problem for me is that in 12 months I will be released without any progress on dealing with my drug use. NA, SMART and relapse prevention haven't worked for me. Chances are that I will

quickly reoffend with my newly acquired skills and potentially come back to gaol. That's the reality I have accepted. The reality I cannot break away from. I have no mission in life.

I feel I cannot hold a job with my addiction, that the only job option on my release is in the sex industry. I feel that is the reality of my life. I cannot return to my husband as he is too violent for me to deal with. There appears to be very few options open to me at this point. I might just decline parole and stay in gaol until I feel empowered enough to face the world and life's realities. I guess I am a girl without a mission and that life is just like that.



1968: a true-ish story from back-in-the-day

EDITOR'S
NOTE

A fiction based on fact by a great friend of NUAA's and User's News, who sadly died a few years ago from hep C induced kidney failure.

A very smart woman who had lived an amazing life, using lots of all sorts of drugs for much of it, she was a much-respected worker in harm reduction for some years before her death. This is a story about a different kind of harm reduction, about looking out for your mates. Without any leave to do otherwise, I respect her anonymity, but some readers may remember her as Ida Bigge-Hit. Let's salute her as yet another amazing woman who and worked so other users should not acquire the blood to blood virus that took her life.

1968. Keith Gibney lived with his gorgeous, working-girl friend in an up-market flat near the Picadilly Hotel in Victoria Street, Kings Cross. Rumour had it he was a crim, but I never saw any direct evidence of that. He also had a reputation as a give-up, but Mindless said that this was the usual cynical speculation.

"He's probably sometimes had to save himself from going to jail by giving the cops some information – but he only gives up pot-heads, never speed-freaks."

In those days speed had not yet acquired its sinister reputation and, amongst some of the drug cognoscenti, the habitual daily marijuana smoker was less than reliable when backed into a corner by the fuzz. Therefore their occasional sacrificial loss in the drug war seemed inevitable if not truly justifiable.

Lisa – or Mindless as she was best known – took me along with her to visit Keith one day when we were looking to get some speed. She'd scored from him before, and prior to knocking at the door, she warned me. "Don't make him angry. Just agree with whatever he says and don't talk too much. Be very cool."

We knocked at the door using our be-bop un-copper beat. Thirty seconds passed. There was a peephole in the door, so we knew that whoever was inside knew it was us. There was a further wait of thirty seconds, then the door opened. I could see

it was still on its chain. A female voice whispered. "Who is it?"

Mindless answered. "Mindless and Casbah."

A male voiced yelled from inside. "Let them in." The door chain was loosed. An auburn haired woman let us in and locked the door behind us. A good-looking man with the raw-boned features of a professional boxer beckoned us to approach. Gibney was seated in a lush double bed and wore a classy dressing gown like you'd see in a Noel Coward movie. Two lounge chairs were arranged near the foot of the bed. We sat.

He asked in a sly, insinuating manner: "Were you followed here by the cops, Mindless and Casbah? Did you go slow and allow your flatfoot friends to follow you to the hideout of poor Keith – he who the cops unjustly pursue and wish to incarcerate?"

He leered at us to see if our features would betray us and show him that we were indeed informers. We kept our cool. Mindless knew what the man wanted and replied with the same laconic acid-tinged manner, "We were not followed – we risked our lives and drove the wrong way down three one-way streets just to make sure no-one was behind us. We always take such elaborate precautions Keith, every time I come to your excellent and most secreted abode."

He didn't let on he was amused by her response but I could tell he dug it.

Mindless asked him, "Got any speed?"

Keith put a finger to his lip and pointed up to the light fittings as if to tell us there was a microphone there. He said, "Gee I'm sorry, but I haven't had any for four months."

He reached down under the bedclothes and came out with a plastic bag that must have held an ounce and a half. At the same time another well-dressed bloke that Mindless and I knew from the scene emerged from out of the kitchen. It was John Claude, a shady character who never let anyone know much about him. He resembled John Lennon and was the only person of our acquaintance who wore sunglasses indoors and at night. The shades had yellow glass so everything he saw must have looked jaundiced. John was more laconic than Keith.

Keith threw the bag of speed to John and snarled. "Get Mindless and Casbah a couple of dessert spoons – they are just about to get their just desserts."

John disappeared into the kitchen then came back with two large spoons. He set them down on the coffee table that was in front of our two chairs.

Claude inquired: "Shall I be mother, Keith?"

"Yes – you do the honours, John."

The room seemed to suddenly grow menacing. I thought, "Oh shit, these bastards are going to kill us."

John put a large amount of speed into each of our spoons. I thought it looked a bit too much. They were talking in a snide double meaning type of way that Bob Dylan sometimes sang. They sounded like they were going to bump us off. I'd heard rumours they'd done a lot of shonky things to people. I looked at Mindless. She didn't seem perturbed, and asked Keith, "How much is this going to cost us?"

Keith stood up in bed and began to bounce up and down as if the bed were a trampoline. He told us, two syllables to each bounce, "Oh Mind – less you – are my – frie ends – Friends don't – charge mon – ey Friends – give things – to their – friends for – free to – their best – friends with – out charge – gratis."

Mindless tried to negotiate, "There's too much in the spoons there Keith. We'll take a bit of it home for later."

Keith stopped bouncing up and down and began to jump back and forth from one side of the bed to the other. He declaimed "oh no Mindless – none must be – allowed to leave – Hundreds of – secret police – may be waiting – outside to search – my lovely friends – and that would cause – me to lose – too much face – The whole of this – excellent feast – must be partaken – or none at all."



1968:
a true-ish story from
back-in-the-day

(continued)

I now knew what Keith was on about. This was a test of how much Mindless and I trusted him. If we passed this paranoia trap he was setting, then Keith would respect our courage and we'd forever get free gear.

A strange acceptance of the situation entered me.

Keith invited us, "Roll up your sleeves my little darlings."

Mindless accepted her spoon, then somehow managed to scuttle off to the bathroom, feigning a strange modesty about hitting up in front of the boys. She later told me she had only shot about a quarter of the brimming spoonful, secreting the remainder into a covert section of her attire. The "small" taste slammed her so hard, she sank, speechless for once, to the cold tiles, where she

sat savouring the forces that flowed through her body, on and out her head to the stars.

I, on the other hand, seeing this as a test of trust, some sort of religious ritual drug ordeal, was intent on injecting the entire amount. That I always made very careful and deliberate preparations, and hit up incredibly slowly, definitely worked in my favour that day. By the time the plunger was approaching the halfway point, Mindless had rejoined us, and by contriving to bump my arm, knocked the needle through the bottom wall of my vein, causing me to pop the rest of the dose into the muscle tissue beneath. This slowed the absorption of the drug and probably saved my life.

We had passed the test and lived to tell the tale.



Party people

adult mood alteration

BEAU'S STORY

I like to think of myself as an Adult Mood Alteration specialist. I'm always pleased to pop over for a consultation with my clipboard: So, how do you want to feel? what sort of space do you want to be in? and what time do you want to get there? I like to help people enjoy themselves. Clover Moore owes me a statue for all the drugs I've taken off the streets.

The other day I was walking along with my little dog, I'm in Central Station. I'm stopped by three cops. The woman officer seems to be the mouthpiece; she is flanked by two big burly male cops. She sneers at me "Hey you! Off to get your methadone?"

I say, "So, you have decided just by looking at me that not only am I heroin dependant, but I'm on a program to treat my use. That's very generous of you. As it happens, I am neither."

They asked me to strip none-the-less. Just a search this time.

"If we ask you to put down the dog, what will it do?" Fear in the eyes.

I look at the two big guys and their tough front woman, with their superhero utility belts and guns on hips, and sigh. "She's a pedigree. She will ignore you."

I put her down and there and then, in a corner of the train station, I take off my shoes, my shirt, my pants. I am standing there in my undies. Of course they find nothing.

They radio my name in, looking for warrants. I tell them I have no file, but they don't believe me til they see it. "You appear to be clear in NSW. We will now run a national trace and if there is a record of you, we will be making a note," Ms Plod says sternly.

"There won't be" I say. Eventually, they have to let me go. I have no record and yet this is a regular harassment. I am used to undressing in public. No matter where I am, the police will show an interest. Fuck me, I'm famous.

Oh take me away, to that translucent place where you can't be touched and everything is beautiful. My ode to Ketamine.

I go to lots of night clubs. My typical night starts on ice, then I like to take some G, get a bit of what

comes my way. Sometimes I may not even get to a club, but slide down the K-hole or slip into a G-coma and enjoy...

The quality of the ice can be variable, even from the same dealer, and it's everywhere, everyone seems to be holding, but they hang on to K, til at some private party early in the morning 20 or so people relax with that loveliest of drug. When I am sick of that ice yee-yaw, I like a sideways slice to slow down – could be heroin, Xanax®, Rivotril® or similar.

I think harm reduction is vital. The rule is: help your friends. I carry lots of fits, water, swabs to give away. I think educating the general public is key. EG: People are gonna sit in the back streets and have a shot, so give them some respect. As long as they clean up their mess and take it away, what's the problem? Not good to have someone screaming at you. When you're in a hurry 'cause it's a stressful situation like that, that's when mistakes happen and that's when people don't tidy up like they should, cause they just want to get done and away.

If I could give one piece of advice to other mood alterationists, it would be this: be conservative with amounts, bump don't jump. You can add a little more but you can't take it out. Better three holes in your arm then one in your heart. That goes for K, that goes for heroin, that goes for all drugs. That, and look after each other. Love one another as I have loved you.



Party people life, liberty and the pursuit of happiness

MARTY P'S STORY

Harm minimisation is important to me. I'm talking about good management of substance use combined with an active lifestyle. I hold down a couple of jobs and enjoy myself when it comes to party use. I party pretty much every weekend and then a few times a year there will be a lot more activity, like Mardi Gras and New Year and I'll really get into it for days. I know I will be partying, so I'll organise my work around that. Then other times if there is something big at work, I'll moderate my drug use more.

I use crystal, G, K, Es, amyl, a bit of coke, that sort of thing. I try to plan, and organise safe sex as well, depending on what's going on. I take drugs because I'm a little shy and I want to be a little more sociable – friendly, happy, confident. I want to have fun, to enjoy myself. I want to be chilled out, happy, relaxed. I inject rarely, but it's about who I'm with. I have done that but I'm not confident doing it on my own. Recently I met someone who does, so maybe I'll be doing more in the future. We'll see. Mostly it's dropping caps and so on.

I had a really bad run in with cops last year at a dance party that really changed the way I partied. I had some gear in my jocks, some K and a couple of caps, but I think it is because I was wearing shorts that had weed in the pocket the week before that the dog picked me out.

I was arrested and strip searched. There was a mobile police station, and there were 20 or so people there, actually a lot I knew. I was marched down there by police. I was stripped down to naked and examined. I found it very humiliating, I was totally traumatised by the end of it. I was kept standing there naked for some time, then when they found stuff I was rushed out for further questioning. It was

debasing. There was a lot of judgement; I was really made to feel like shit.

Then at the end, they were like, go back to your party, thanks for your help, have a good time. They were arseholes, then suddenly everything was all good. I didn't go back to the party, I was really stressed by it so I just went home. Then there was three months of waiting to go through the court process. I got one charge dropped then a 12 month good behaviour bond. For wanting to be chilled and happy.

Now I have trauma, every time I see police – even if I'm just getting coffee and see them I feel stressed – it has stayed with me quite strongly. If they were more respectful, it might have been different.

So now I'm a lot more careful about what I do. Before, I would carry a night's worth of drugs; I'd stage myself more thru the night. But now I get a big kick early so I'm not carrying anything. Then I'll be opportunistically scoring all night, with less planning and less quality control. I don't know what I'm taking then, because I'm not using my regular dealer who looks after me. I don't have that relationship with other dealers when I'm out. The drugs could be shit, I'm using more experimentally, it's more on faith than it would have been.

I really want to feel cruisy, happy but not messy. But because of the way I am doing my drugs now, I get a lot messier and I might even go home earlier because I'm messy earlier. It's certainly not safe using. And I may not be so safe sexually because I will take more risks when I get really high quickly than when I stage myself.

I just want to have a good time and I think I should be able to do that without being treated like a criminal.



Party people brilliant on G

JEAN-LUC'S STORY

For Sydney's gay, lesbian, bisexual and transgender (GLBT) community Mardi Gras is much more than its annual march and party. In fact, for many punters the entire month of February is about celebrating one's sexuality AND EXCESS. Many community members feel they have carte blanche, in terms of getting as out of it as possible, as often as possible, on as many substances as possible.

Now don't get me wrong, as a self-designated "career user" I very much subscribe to this school of thought. But I'm a bit more cautious these days when GHB is in the party-going equation.

Now let's go back to around 2000. For whatever reason, the MDMA aka pills aka ecstasy aka Es I was scoring were woeful.

Along comes G. Then, as today, it sells for approximately \$10 per ml. On 4 mls punters were often guaranteed an entire night of dancing and feeling de lurrrrrrve, for \$40. I had even gone out on just 2 mls and had 4 brilliant hours of dancing and sex.

Before using the drug I did some independent research. I learnt the drug works as a central nervous system (CNS) depressant. That you shouldn't consume any grog two hours before or after ingesting it. And MOST IMPORTANTLY that there was a tiny window between achieving the desired euphoric effect of G and falling asleep and potentially asphyxiating, falling into a coma or dying.

I believed that these unwanted affects were something that I could avoid if I put in place my own harm minimisation plan.

So I avoided alcohol at all costs anytime I planned on using G. I made sure I always used the same dealer. I made up my doses at home when I was straight. I kept my fluids up without going overboard. I even set my alarm on the mobile to alert me every four and a half hours – the approximate length the effects last. I avoided CNS depressants like xannies, vals, alcohol and smack. In fact, I even avoided stimulants such as crystal meth, MDA and coke.

And guess what happened? Yup, I dropped and woke up at St Vinnies. What the FUCK???? I had done ALL the right things, hadn't I? Well obviously

something went wrong. I went from being the life of the fucking party to a social embarrassment. Worse still I ALMOST FUCKING DIED!

Fast forward to 2012. I went to a massive queer reunion dance party in Sydney's CBD. After not touching G for all that time, I had four mls over 8 hours and had myself one EPIC FUCKING NIGHT!!! Actually, it was one of the best nights I have EVER had.

The moral of this story? Well firstly, NEVER BE BLASÉ ABOUT DRUGS. Secondly, be informed, armed with the correct information about the effects of the drugs you're taking, including the danger of mixing drugs that are similarly classified, like CNS depressants. Thirdly, make sure the people you are with know what you are on, what an overdose looks like and what to do if you have one.

A person that has overdosed on G may look like they are sleeping peacefully when in fact they have slipped into a coma. If you see someone in a club who looks asleep, go and give them a nudge to see if they wake up. If you can't rouse them, time is crucial. Dial 000 and get the paramedics on the scene as fast as possible.

I fucking love my G. ALWAYS HAVE ALWAYS WILL. Would I use G again? U better believe it! But whatever we take, it's imperative that we be mindful of what can go wrong no matter how much we try to minimise the harms associated with our drug use.

Now readers, get the fuck out there and have an AMAZING time! But most importantly STAY SAFE. Look out for yourself AND YOUR MATES. After all we wanna be able to do it all again next year, next month, next week, FUCK, EVEN TONIGHT!!!

