

# TRACKS

## THE SEXY ISSUE

Illicit drug users magazine




CHINESE LADY : BEV STEWART



This publication is not for general distribution. Tracks Magazine has been created for people who use illicit drugs. QuINN does not condone or accept illicit drug use but seeks to minimise the harm that can arise from illicit drug use, in line with Australia's public health strategy.

Issue 34

QUIHN RECOGNISES THE  
STRENGTH, RESILIENCE, SURVIVAL,  
AND SOLIDARITY OF PEOPLE WHO  
USE DRUGS AND REMEMBERS  
THOSE OF THE DRUG USING  
COMMUNITY WHO ARE NO  
LONGER WITH US. QUIHN  
VALUES ARE UNDERPINNED BY  
A SOCIAL JUSTICE FRAMEWORK  
THAT RESPECTS DIVERSITY  
AND DIFFERENCE AND WE ARE  
COMMITTED TO PROVIDING FULLY  
INCLUSIVE, PROFESSIONAL, AND  
NON-JUDGMENTAL SERVICES  
TO PEOPLE OF ALL CULTURES,  
LANGUAGES, CAPACITIES,  
SEXUAL ORIENTATIONS, GENDER  
IDENTITIES AND/OR EXPRESSIONS.



QUIHN ACKNOWLEDGES THE  
TRADITIONAL CUSTODIANS  
OF THE LAND ON WHICH WE  
WORK AND PAYS RESPECT  
TO ELDERS, PAST, PRESENT,  
AND FUTURE. QUIHN ALSO  
ACKNOWLEDGES AND RESPECTS  
THE CONTINUATION OF CULTURAL,  
SPIRITUAL, EDUCATIONAL  
AND HEALTH PRACTICES OF  
ABORIGINAL AND TORRES  
STRAIT ISLANDER PEOPLES.

---

WE ACKNOWLEDGE ABORIGINAL  
AND TORRES STRAIT ISLANDER  
PEOPLES' STRENGTH,  
RESILIENCE, AND CAPACITY IN  
RESPONSE TO THE IMPACTS  
OF COLONISATION. QUIHN IS  
COMMITTED TO CONTRIBUTING  
TO A RECONCILED AUSTRALIA.





**The Tracks Committee's mission IS TO EDUCATE, SUPPORT AND EMPOWER people who choose to use or currently inject illicit and prescription substances.**

At Tracks we welcome contributions which reflect the opinions and issues of those who have used, or are currently using illicit drugs. We pay \$30 for every piece published in Tracks and \$100 for work published as the cover.

We look for all sorts of submissions, you certainly don't need to be Picasso or Shakespeare to be published here.

As a general guide, we look for art including drawings, doodles & digital art / graphic design, photography, poems, personal stories, short stories, personal experiences, reviews, local news, yarns & gripes. If you'd like to submit something that isn't included in this list - go for it.

**If you'd like to contribute to Tracks you can:**

Visit [www.quihn.org/submit/](http://www.quihn.org/submit/)

Call us 1800 172 076

Email us [quihn@quihn.org](mailto:quihn@quihn.org)



**follow us**





quihn\_ltd



quihn\_ltd



QuiHN



# Hello & Welcome TO THE SEXY ISSUE OF TRACKS



Hello TRACKETEERS... and a warm welcome to Issue 34 of TRACKS mag. This issue is the SEXY ISSUE and we hope you enjoy it! The mag is full of fun, sexy stuff- including many fabulous contributions from our ever-talented readers.

This issue focuses on our ideas of 'sexy' and how this can mean different things to different people. We look at the relationship between sex and drugs and how the two are often intrinsically linked.

This issue will have a look at chemsex/ PnP (Party and Play) and we provide some tips on how to do it safely. We also have a personal story from Luke, who shares what PnP and 'sexy' mean to him.

We also share your thoughts on the best drugs to hook-up on.

On page 22, DecrimQLD explains what the decriminalisation of sex work laws mean for Queensland sex workers.

Plus, we introduce you to another QulHN legend; this issue we meet Elyce, who tells us about her role at QulHN and what she loves about her job.

You will also find out about the sexually transmitted infection, Trichomoniasis. AIVL also gives us the run down on the OST changes around Australia.

Ok sexy friends, Christmas is almost here again, and this can be a time of ups and downs - so stay safe when you use, avoid using alone and remember to support and check in with your mates!

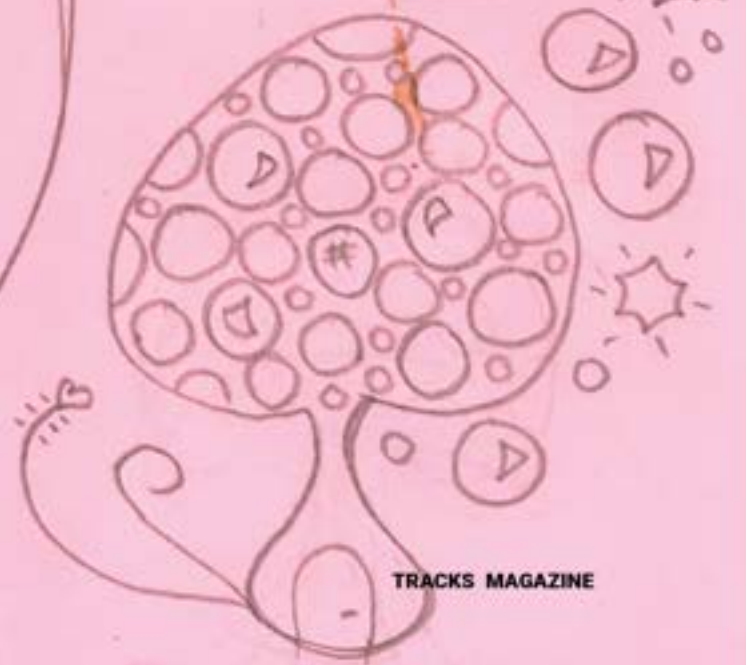
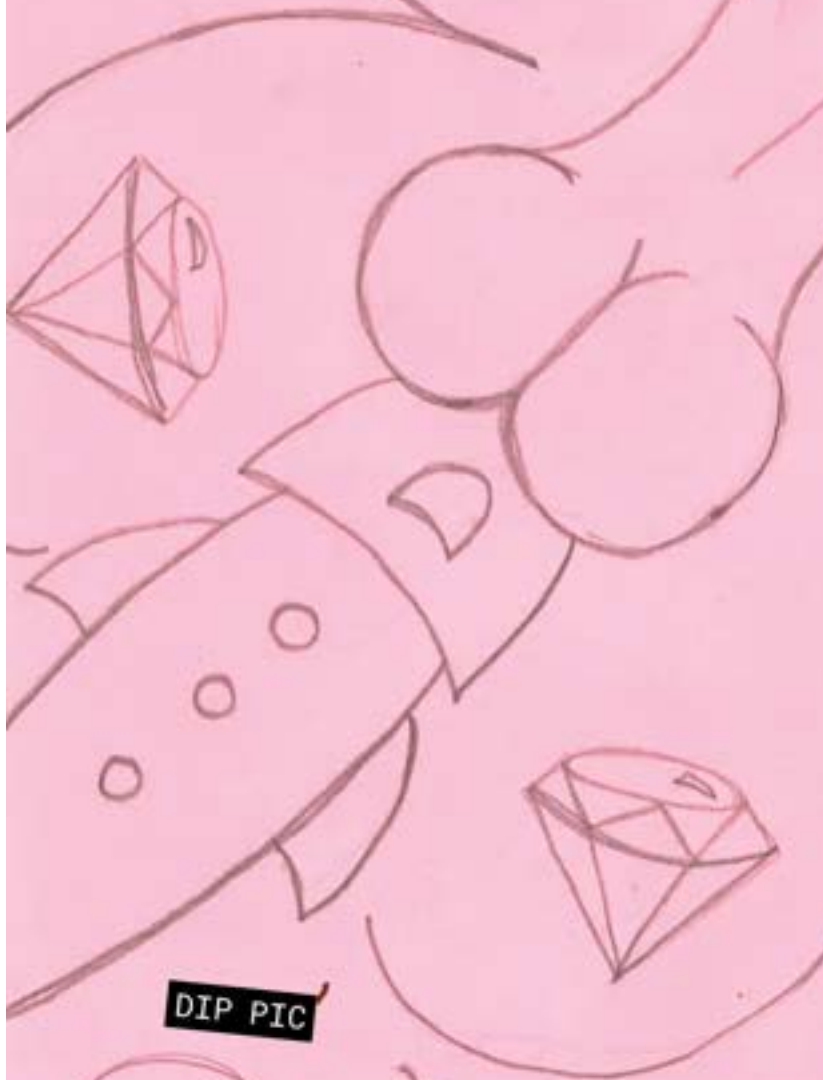
And of course, always - safety first - if you're gonna get on it, please do it safely.

Much love and  
merry festivities, -

The TRACKS Committee

XO

Dip Pic...



DIP PIC



# WELCOME TO THIS ISSUE OF TRACKS

08



## TRACKS News

The latest harm  
reduction news

**CHEMSEX**  
A rundown on  
chemsex & tips on  
how to do it safely



12

12



QuiHN offers  
health services  
for sexworkers

## One man's idea of sexy

Words from a self-  
confessed 'gay-male slut'



16

20



## Nursery Rhymes

A poem by  
Jason Williams

**Meet Elyce**  
Introducing a  
QuiHN staff legend



26



# TRACKS NEWS



## Naloxone Free For Householders & First Responders

Queenslanders will be able to access naloxone for free and police and paramedics will also be able to carry the drug on them on shift.

The medication will be free of charge and available to not only those who use opiates, but also friends, carers and family members of people at risk. Naloxone can be obtained from QulHN, selected pharmacies, alcohol and other drug treatment services, medical practitioners and homelessness/outreach services.

## Australia Legalizes Psychedelics For Mental Health.

From July 1, the Therapeutic Goods Administration (TGA) has announced authorised psychiatrists will be able to prescribe MDMA for the treatment of conditions such as post-traumatic stress disorder (PTSD) and psilocybin for treatment-resistant depression.

## HIV Meds To Become Free In Qld

Good news for people living with HIV in QLD. From October 2023, HIV medication will be dispensed free of charge (including those who are not eligible for Medicare).

## Doxy-PEP Trials Prove Reduction Of STIs In MSM

Although still in review, ASHM has reported clinical trials with MSM (gay, bisexual and other men who have sex with men) in Australia may be able to reduce the risk of bacterial sexually transmitted infections (STI) by taking the drug doxycycline prophylaxis, (Doxy-PEP) 72 hours after a sexual act.

Clinical trials of Doxy-PEP have shown significant reductions in syphilis (by 70-80%) and chlamydia (by 70-90%) and to a lesser degree, gonorrhoea. Guidelines are currently being developed to advise who may benefit from Doxy-PEP, as for some individuals the risk of regular post-exposure antibiotic use may outweigh the benefits. For more info, see ASHM's statement on Doxy-PEP here - <https://ashm.org.au/doxy-pep-statement>





# THE BEST HOOK-UP DRUGS

You guys tell us what your favourite drugs are to get down & dirty on

Gemma

'Gear and booze. I am normally pretty shy but give me enough of those two things & I turn into an animal. I feel more confident and sexier.'

Sammi

'Yarndi is the best for sex. It relaxes every part of your body and helps you feel more pleasure. Plus, there's no come down.'

Luke

'Meth and GHB. Without a doubt. Instant hormones and instant power-boner. And you can fuck for hours on them.'

Ellie

'Believe it or not, heroin is wild to have sex on. No inhibitions and literally, no gag reflex!!! Only trouble is, it's hard to cum but it's worth it!'

Frank

'Love of course! A blast of Serotonin with a Dopamine chase. Just kidding of course! It's meth. Accompanied by ketamine, GHB and amyl nitrate.'

Jo

'Frank (GHB) is a great fuck-drug. It's like, really dreamy and you feel comfortable and close to the person.'

Jude

'Back in the day, it used to be ecstasy - sexy fun for hours. Nowadays it's meth - hands down! It's like that drug was designed with sex in mind.'

Ollie

'Coke, champagne & Viagra! Breakfast of champions! No other way to do it.'

Tammy

'My partner & I have been together 16 years, and we have 4 kids. We keep it spicy by having some gear every few weeks - it helps us connect and keep the passion alive. I'm not sure we'd have the time or energy to do it otherwise.'

Erica

'Almost all drugs are good to have sex on - they enhance it. Even mushrooms. It really comes down to the people you're with and how comfortable you feel in the moment.'

**TRACKS says be safe when getting it on!!**

For harm reduction tips on mixing sex and drugs visit - <https://adf.org.au/insights/mixing-drugs-sex/>





Educate yourself around PrEP and PeP (links provided at end of article) and keep in mind PeP and PrEP offer protection around HIV only not other STIs. Remember to stay hydrated and avoid drinking alcohol as this can increase the effects of drugs like GHB but also increases the risk of overdose. Remember to take your regular meds, if you use any. Set alarms and timers on your phone to remind you to take breaks. Respect each other – consent is extremely important and remember, "No" means "No". Set your limits – be clear about what kinds of sex you're into and try to rest and recover after a big sesh.

### Some other things to be mindful of

Sometimes liquid or dissolved drugs are put in a barrel (without a tip) and inserted and squirted into the butt (booty bumping). Drugs taken this way (anally) are absorbed faster than if swallowed and tend to have a stronger effect. This, in addition to swallowing your drugs can be a good option if you have trouble finding a vein or need to give your veins a rest.

However, if you are going to put drugs up your bum, dissolving it in water and squirting it with an unused, needleless syringe can reduce the chances of burning or damaging the delicate lining of your bum.

Rubbing a drug onto or into the bum can numb or irritate it and sometimes cause bleeding or inflammation and this can increase the risk of infections. Drugs like coke, meth and mephedrone

can damage or burn the lining of your bum, which can cause pain or bleeding and make you more susceptible to infections.

Drugs such as GHB/GBL can be quite caustic and are better off swallowed as attempting to booty bump it can cause serious damage the delicate lining of the bum.

Always use an unused needleless syringe (barrel) when booty bumping and avoid sharing them. Sharing a used, needleless syringe once it's been up someone else's bum increases the risk of transmitting STIs, HIV and hep C; particularly if the lining of the bum has been damaged by butt play or drugs. Dabbing drugs into more than one bum without cleaning the finger can also spread infections. During any kind of butt play, infections like shigella (shigellosis) and hep A can be transmitted so ensuring you thoroughly clean your bits and bobs (including hands and toys) can reduce the risk of this.

### WATCH THIS SPACE

AIVL are currently working on creating polydrug sexpacks with a focus on chemsex. These kits aim to reduce potential harms associated with the combining of poly drugs and sexual activities. The kits will contain items like lube, condoms, barrels, peer written info and resource tips, hydrolytes, chewing gum, lip balm and more.

Kits will be available from Drug User Orgs and NSPs towards the end of the year.

#### Other resources-



menrus.co.uk



qpp.org.au



positivelife.org.au



pivotpoint.org.au



# SEXUAL HEALTH SERVICES



FOR

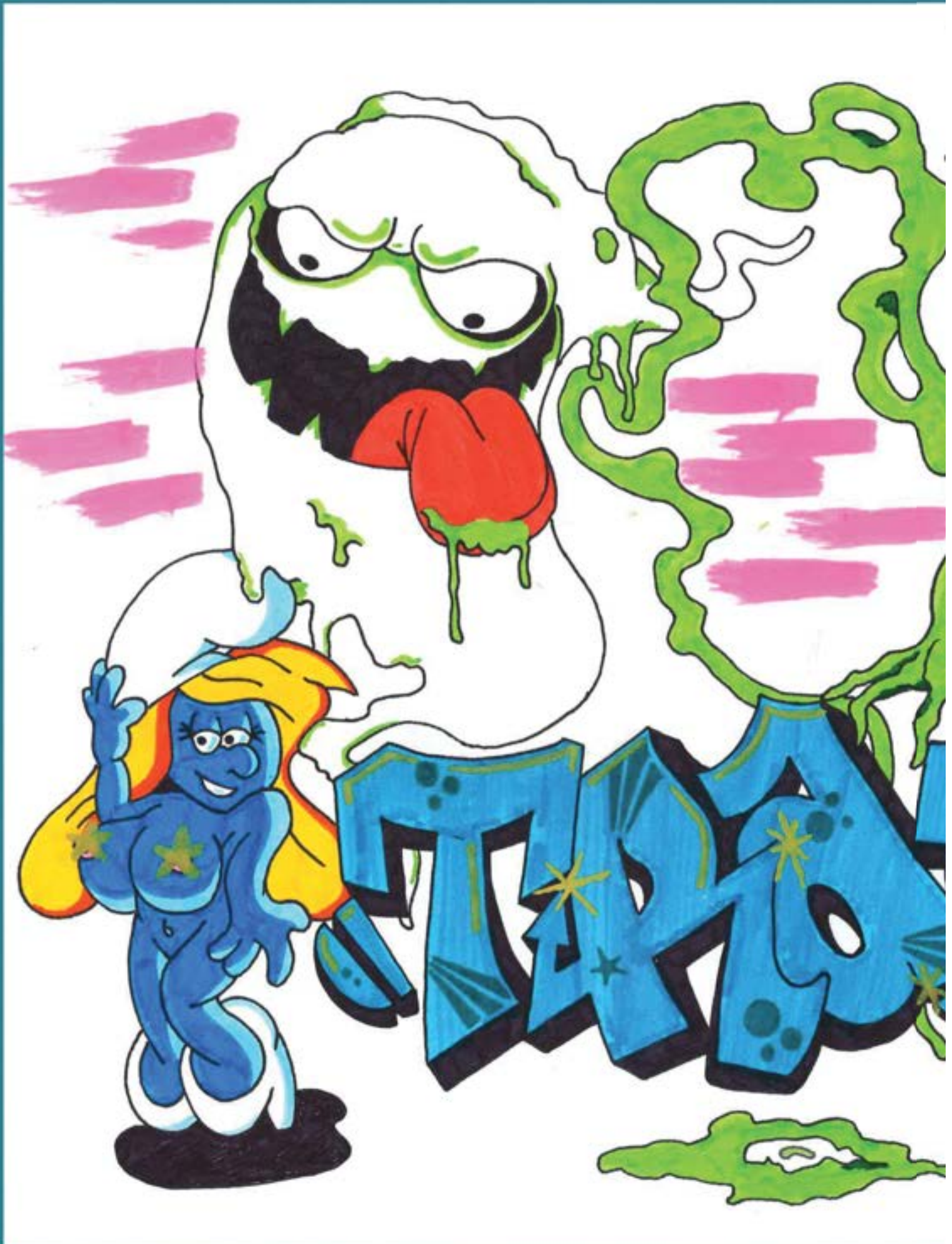
## Sex workers and the wider community

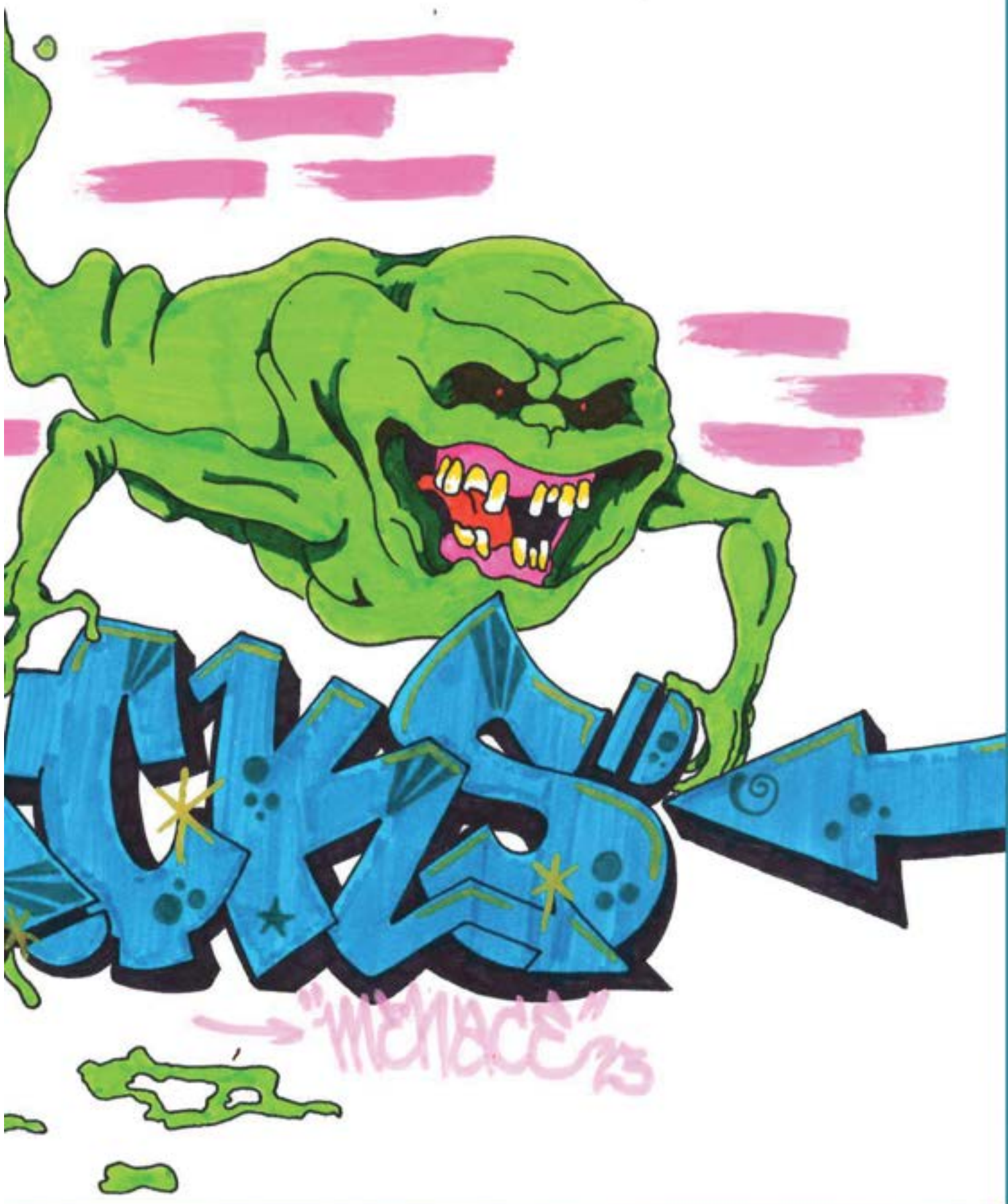
QuIHN offers a range of free health services including HIV, hep C and syphilis testing, STI checks, sexual health certificates and free sex packs.

INTERESTED?



**Call or visit your local QuIHN for more information.**





# ONE MAN'S IDEA OF SEXY



(Meet Luke...)

Originally from Queensland, Luke is a 36-year-old, gay man living in Sydney. A self-confessed 'gay-male slut,' Luke is outspoken and sassy but has a sweet and vulnerable side.

Asking Luke what his idea of sexy was, he said, 'Sexy is someone who is unapologetically themselves. He said, 'Sexy is, feeling wanted and to be lusted after, when someone wants your body.'

When asked to describe his ideal type of guy, Luke says, 'the Clark Kent-type - glasses and intelligence.' He thinks intellect is sexy. But he isn't opposed to the jock type either. He tells me he prefers guys with a bit of brains, and he says jokingly, 'Who wants to hook up with a dude who needs to take his clothes off to count to twenty-one?' (Meaning a guy needs to use his ten fingers, ten toes and willy to count to twenty-one).

Luke likes taking drugs. He said throughout his life he has struggled with self-esteem issues and has experienced bulimia, and one of the ways he got into drugs - was a desire to look good and lose weight. Luke explained light-heartedly that during Mardi Gras one year he, 'lived on meth and enthusiasm.' Luke said he used drugs as a weight loss tool and although he looked amazing, he knew it wasn't sustainable plus he said during this time he was an absolute bitch & was constantly hungry.

Luke says despite his struggles with bouts of bulimia, his relationship with food these days is much healthier.

Luke talks about PnP (party and play- otherwise known as chemsex). He says, 'For many gay men, sex and drugs go hand in hand; and PnP is basically using drugs to enhance sexual activities - to the extreme.'

Luke explains, 'as a gay man who combines illicit drugs with sex, PnP is a way of getting to know yourself, your boundaries, and a good way to know where you're at sexually. For many gay men, PnP is kind of like a handshake.' He says...

**'PnP enhances EVERYTHING. For a man, having a shot of gear and indulging in GHB results in a rush of hormones and an instant boner.'**



PnP is part of every sexual experience Luke has. He finds sober sex and that kind of intimacy confronting and A LOT of pressure. He laughs and says without PnP, 'it's all over way too quickly and then you're just left having to change the sheets.'

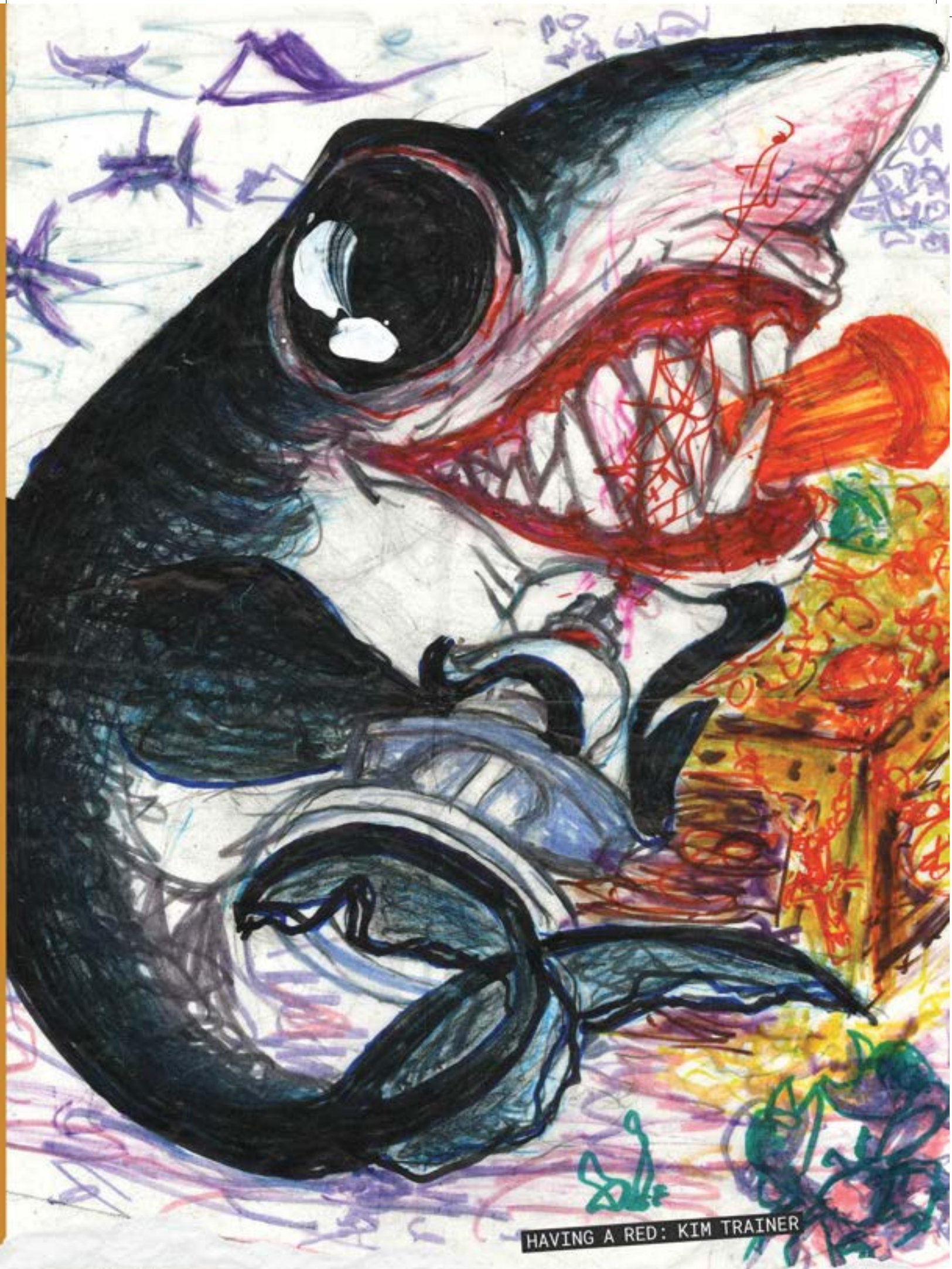
Luke is also HIV positive. His viral load is low to non-existent due to the ARTs (antiretroviral therapy) he takes. Luke talks about having HIV and how it has affected his sex life. He says, despite his HIV viral levels being undetectable, he has deep reservations when it comes to sleeping with men who are not HIV positive and has made a conscious choice to only have sex with other men who are also positive.

He doesn't completely rule out guys who aren't positive, but he finds it too much of a burden - he said he doesn't want the responsibility on his conscience of infecting someone accidentally. When meeting potential partners, it is a question that he asks - He classes this as 'finding and knowing his tribe.'

He says he feels a bit jealous of those who find intimacy easy and can hook up without PnP. But he also knows this sort of thing in life can take time - and he admits there are different levels of intimacy- 'PnP can make you feel very close to someone - being present when someone shoots up is incredibly intimate.'

Luke explains, PnP lowers inhibitions and allows him to enjoy the foibles of being a young, gay man. He said, 'It makes connecting with someone so much easier, when you speak to someone who indulges like you do- it just makes things easier because you're on the same level.'

Luke tells me he is well aware that PnP is a false sense of intimacy but says there is a, 'Feeling of implicit trust between you and the other people you are doing it with. PnP takes away inhibitions, barriers and shame, bringing you closer to someone and making you feel part of something.'



HAVING A RED: KIM TRAINER



# TRICHOMONIASIS

STI

KNOWN AS TRICH (PRONOUNCED 'TRIKE')

Trichomoniasis is an infection of the genitals and can be passed on during sex without a condom.

## Quick Facts

- Trichomoniasis is a genital infection caused by the organism *Trichomonas Vaginalis*
- Many people have no symptoms
- Examination, urine samples and swabs are used to diagnose Trichomoniasis
- Trichomoniasis is treated with antibiotics

## What is this?

Trichomoniasis is a genital infection caused by the organism *Trichomonas Vaginalis*. In Australia, Trich is more common in people with vaginas who are older and/ or who are living in remote areas. It is less commonly diagnosed in people with a penis.

## How do you get it?

Trichomoniasis can be passed on by having sex without a condom with a person who has Trichomoniasis.

## What are the symptoms?

### Vagina

If you have a vagina, most people have no symptoms:

- Frothy yellow-green vaginal discharge
- Unpleasant vaginal odour
- Itching and burning-vulva-or-vagina, or both

### Penis

If you have a penis, most people have no symptoms. If symptoms occur, they can include:

- Discharge from the penis
- Pain on passing urine

## How is it treated?

Trich is treated with antibiotics.

The medication may cause nausea, so taking it with food reduces side effects. Alcohol should be avoided for 48 hours after taking antibiotics.

All sexual partners should be treated, even if they have no symptoms.

## Are there any complications if not treated?

- Trichomoniasis during pregnancy may lead to low birth weight babies and premature birth.

## Is it likely to come back after treatment?

To avoid getting reinfected and passing Trich on to anyone else:

- You should not have any sexual contact until one week after starting treatment. Not even sex with a condom.
- You should not have sex with any partners until one week after they have started treatment.
- If your partner is treated after you, this means no sex until one week after they have started treatment. Otherwise you could be reinfected and would need to be treated again.

## How can I protect myself?

Using a condom or a dam during sex is the best way to protect yourself from Trichomoniasis.

## ADDITIONAL INFORMATION

- When you've been diagnosed with an STI like this, all of your sexual partners from the last few months should be checked by a doctor. It is very important that all your sex partners (regular and casual) are checked because if STIs are not treated they may cause serious problems later on.
- For further info or help, please contact your GP or visit your nearest sexual health service.



WOLF MAN: KIM TRAINER

WORDS BY  
JASON WILLIAMS, 2014



POEM

# NURSERY RHYMES

Riddles and rhymes  
scared me for life.  
When Humpty Dumpty fell  
He was pushed by his wife.

The kings horses, and men,  
were stoned off their heads.  
They couldn't put his fat arse  
back together again.

The three blind mice  
had the perfect excuse;  
Of passing the buck  
when they got too loose.

It all got blamed  
on the barbers wife.  
She ended up getting  
Twenty years to life.

3 fried mice...3fried mice...  
Ring'a ring'a Rosie;  
been ringing her for weeks.  
She had a pocket full of my cash,  
she was supposed to meet with me.

She starts to blow her tissue  
as she tell me what's gone down.  
The cops had fucking grabbed her,  
now I'm 10 grand down.



NOTHING TO SAY : MEL ANDERSON



# SEX WORK LAWS IN QLD ARE CHANGING



## WHAT DOES IT MEAN FOR WORKERS?

Respect Inc is Queensland's sex worker organisation providing a peer education, outreach and community development program for sex workers. Everyone who works, volunteers or is on the Management Committee at Respect Inc is a sex worker.

#DecrimQLD is a committee of sex workers who have joined with Respect Inc., to progress the removal of harmful and discriminatory sex work laws and achieve decriminalisation in Queensland. We asked Respect Inc and DecrimQLD about the laws surrounding sex work and what the proposed changes might look like.

### What is decriminalisation in regard to sex work?

Decriminalisation of sex work means that it will no longer be criminalised, and sex work will be recognised as regular work.

Decriminalisation means there will be no criminal laws that specifically refer to sex work and there should be no police involvement or licensing in sex work. In its place will be general laws that govern all workplaces so that sex workers can access workplace rights like any other worker does.

With any luck, there are hopes to introduce a Decriminalisation Bill into parliament before the end of 2023.

### The current laws


While it is not illegal to be a private sex worker in Queensland many aspects of our work are criminalised.

Sex workers in Queensland currently have to choose between working legally OR working safely. It is illegal for us to work in pairs, have security without a bodyguard licence, or even check in with another worker after an outcall. For us to work legally we must work completely alone, or in one of only 20 licensed brothels.



It is currently illegal for sex workers to describe their service in their adverts or hire a receptionist to take/screen calls. Sex workers cannot work in the same hotel as another worker (yep, how would you know?!) or share a driver with another worker. It is even illegal to let another sex worker know the address of where you are going for a booking.

Up until September, 2023 police were legally allowed to entrap sex workers. They could, (and would) pose as clients, and pressure us into agreeing to offer illegal services, such as a double booking or uncovered blow job. We didn't even need to do the act, just simply saying we would consider it meant we could be charged. They would show up to our workplaces and continue to stack charges before taking all our cash, phones, laptops - as they are considered tainted property in the commission of a crime.





We believe that the main purposes of decriminalisation and the new framework should be:

- To fully decriminalise sex work in Queensland to:
    - (a) recognise sex work as work
    - (b) enhance the human rights and workplace health and safety of sex workers
    - (c) reduce stigma and provide for discrimination protections for sex workers
    - (d) allow sex workers to work together and in collectives, and employ support staff
    - (e) protect sex workers and businesses to enable them to operate in accordance with the laws of the State and the Commonwealth as they apply to all individuals and businesses generally, including laws governing employment, workplace health and safety guidelines, workers compensation and rehabilitation, planning and discrimination.
- 
- 

**An important component of modernising sex work laws in Queensland (through decriminalisation) is a change to the definition of sex work. This includes removing stigmatising and outdated terms like 'prostitution'.**



Sex workers are diverse and so are sex work businesses. The definition of sex work should include sex workers who do contact and non-contact sex work: erotic dance/stripping,

erotic massage, full-service sex work, BDSM, sex for favours, online and in person services. It should also include sex workers who work independently, co-operatively, do incall/outcall, street/bar-based work or work in massage parlours, with escort agencies, in brothels and online.


Decriminalisation will be undermined if the process gets bogged down with misguided attitudes to sex work as potentially criminal, and we know that the criminalisation of vulnerable people does not help.

We know that creating more, harsher and specific laws about sex work has the opposite-of-intended effect and drives sex work underground so that sex workers are less safe and more likely to be exploited.

In Queensland, criminal laws and charges attached to use of prophylactics (condoms, dams, etc.), mandatory testing and working with an STI or HIV are in place and sex workers are targeted by police posing as clients who request services without protection. Attaching a criminal penalty to these health measures means police become the 'safe sex police'. This is a job they are not qualified for and do not do well. Queensland's laws are outdated and steeped in these stigmatising stereotypes that ignore the evidence.

Sex workers are often incorrectly presumed to be a public health risk and 'vectors of disease'. This is a stigma-based misconception that is not supported by evidence.

We support sex workers' uptake of safe working practices and regular testing, but this is best achieved through peer education, WHS guidelines and access to free, voluntary and anonymous testing NOT criminal charges.



For more information about sex worker's rights and advocacy; follow us on social media @DecrimQLD

Contact us if you want to join our mailing list [DecrimQLD@respectqld.org.au](mailto:DecrimQLD@respectqld.org.au)

*Huge shout out to Ella and Janelle from #DecrimQLD for their contribution to this article.*

*\*For more info on obtaining a Sexual Health Certificate for work, see page 12\**



AKA: FANTASY, FRANK, G, GBL,  
GRIEVOUS BODILY HARM, JUICE,  
LIQUID E, LIQUID X, OJ

# GHB



[www.hi-ground.org](http://www.hi-ground.org)

**Hi-Ground**

GHB is a depressant that acts on the central nervous system (CNS) slowing down breathing and heart rate. In Australia you are more likely to find GBL or 1,4-B than GHB. GBL and 1,4-B are chemicals that are closely related to GHB. Once GBL or 1,4-B enter the body, they convert to GHB almost immediately. GHB can be described as tasting 'salty', and GBL and 1,4-B 'like drinking liquid plastic' or a strong, unpleasant, bitter, acid, chemical taste.

**Compound:** GHB (GAMMA-HYDROXYBUTYRIC ACID) OR PRODRUGS GBL (GAMMA BUTYROLACTONE) OR 1,4-B (1,4-BUTANEDIOL)

## ADMINISTRATION

GHB, GBL and 1,4-B are all usually taken orally (by mouth). It's best to use a 1ml or 3ml syringe to measure the dose and to administer.



## DURATION OF EFFECTS

<b>TOTAL</b>	1.5-5HRS
<b>ONSET</b>	10-20MINS
<b>PEAK</b>	45-90MINS
<b>COME DOWN</b>	15-30MINS
<b>AFTER EFFECTS</b>	2-4HRS

## HALF LIFE

Even though the apparent effects of the drug wear off after 1.5 hours, the drug is still active in your system for up to 5 hours after you have taken it. Remember this if choosing to use other substances.

## DRUG TESTS

**Roadside Police:** GHB is not detectable by a saliva test. It is illegal to drive under the influence of any illicit drugs, including GHB and any driver may be subject to a roadside behavioural impairment test. Wait at least 24 hours before driving.

**Drug Checking:** DIY reagent testing is an option. Robadope reagent reacts with GHB.

## MOST COMMON EFFECTS

Decreased motor skills, Lack of coordination, Relaxation, Blurred vision, Slurred speech, Involuntary muscle twitches - can cause legs to give way, Nausea, Drowsiness, Vomiting, Depressed breathing & heart rate, Euphoria, Happiness, Mood lift, Increased sexual desire, Increased appreciation of music/people/dancing.

## LESS COMMON EFFECTS

Repetitive motions 'Chicken arms', Unconsciousness ('blowout'), Rolling eyes, Nodding off, Excitability, Aggression, Confusion, Blackout, Decreased social inhibition.

## RARE EFFECTS

Seizure/convulsions, Incontinence, Death

## POSSIBLE LONG-TERM EFFECTS

With extended use the risk of physical and psychological dependency and stomach ulcers increases.

## SAFER USING

- Taking drugs is never without risk. In an unregulated market it's impossible to know the purity or dose of any drug.
- Use around friends/people you trust and in a safe environment - somewhere you feel comfortable
- Use a syringe barrel to measure your doses to the 0.1ml. Record the time of use and mls on your arm or somewhere accessible in case you overdose and need help.
- Use 1ml or 3ml slip lock syringe barrels to dose. No larger.
- GHB may actually be 1,4-B or GBL, which convert into GHB inside your body. Meaning you'll need less to reach the same effects and the chance of overdose is increased.
- Start with small dose eg. 1ml.
- GHB doses accumulate. This means they build on one another. So it is a good idea to lower your dose if you plan on having more.
- It is best to dose yourself so that you know the precise measurement.
- Wait at least two hours before redosing. Set the alarm on your phone or try to have a sober friend with you who can keep track of time.
- Remember: Combining GHB with depressants (alcohol, opioids, benzos, ketamine) is an extremely dangerous combination and can result in overdose and death. Know how long each drug stays in the system.
- Alcohol is metabolised before GHB, so using both can cause a build up of GHB and increases the risk of overdose.

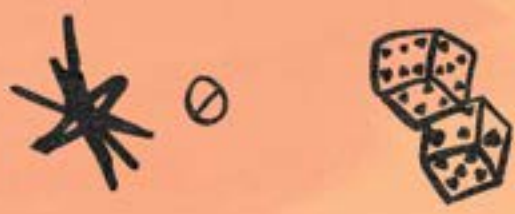




# QUIHN LEGENDS

(MEET ELYCE)

legends





**Tell us about your role and what you do at QulHN.**

*My job title is Group Facilitator and I deliver groups across five locations in different correctional facilities (prisons) in Townsville.*

**So, you go into prison and deliver groups – What sort of thing do you talk about and what are you trying to achieve with them?**

*The groups are known as Substance Intervention Programs, and we try to come from a harm reduction approach regarding substance use and in the way we communicate with people. Like, we definitely avoid going into the jails and saying things like, 'drugs are bad, and you need to stop using them.' So, it's not just about substance use?*

*No, it's not just about substance use. It's about providing tools to help people deal with things once they get out. Like if you have a job once you get out, and how that can affect your using or your using can affect your job and things like that. Or your family, friends (having connections) – how this stuff can affect you overall – how it all looks and the bigger picture stuff.*

**How do you find it? 'Cause that's a pretty heavy sort of job, right?**

*Yeah, it's really interesting- just the vast sort of difference throughout my day. Like I go into a prison, and I'll be around people who have obviously committed some kind of offences and then during my lunch break I'm finding socks for my kid who has Crazy Sock Day at kindy; the contrast is just wild to me sometimes. But I find the work really rewarding.*

*I like my role because it's just really practical support and information that we provide. Sometimes people just need to do these programs to get parole, (to get their parole approved). So, even if all you're doing is helping somebody get their parole, everything they gain on top of that is a bonus.*

**Do the crew attending the groups enjoy the program?**

*Yeah, I think they mostly enjoy the groups. We can tell by the interaction and the conversations we're having. Plus, the feedback we receive indicates they've enjoyed the content, or that it has been useful in some way.*

*Sometimes the participants can be really stand offish at the start of the program, because they have been treated badly in similar group situations and told things like, 'drug dealers are worse than sex offenders because they affect more people' and stuff like that.*

*And you know, obviously that's not something somebody from QulHN says but it's that discrimination that can put people on the backfoot when attending these groups. But when they realise, we're not there to judge them, they come around. And it's always those guys who at the end of the group will do a little speech, and say like 'thank you guys, you were so like understanding and nonjudgmental' or 'I just gotta let you know, on behalf of the group we really appreciate it.'*

*It's always so nice to see the difference between the start and the end (of the program) with the participant's attitudes.*

**Are there any parts of the role that you find tricky? And what are the best bits?**

*Some of the group topics can be a bit confronting, for example, family violence and stuff like that, so we need to be a bit delicate around those sorts of subjects. We have to be mindful of not triggering ourselves or others when looking at that sort of stuff.*

*Overall...*

**'...the role is great; no two days are the same and no two groups are the same. I'm quite a social person and during the groups, we have a lot of really engaging conversations with the crew, and that is probably my favourite part of the job.'**





WORLD ABOVE : SARAH FULLER



# ARE YOU ON METHADONE, SUBOXONE, SUBUTEX OR BUPRENORPHINE?

From 1 July 2023<sup>1</sup> most people on methadone, Suboxone, Subutex or buprenorphine (opioid treatment medications) can get their medications cheaper through the Pharmaceutical Benefits Scheme (PBS) co-payment system.

Other than being more affordable<sup>1</sup> most of the ways you access your medications won't change and we think, for most people, it will be better.

## What will you pay?

*For each 28-day script of methadone, Subutex, Suboxone or buprenorphine, most people will pay:*

- \$7.30 for concession card holders.
- \$30 for nonconcession card holders.
- These costs count towards the PBS safety net.
- If you reach the PBS safety net threshold for the year, your medications will become free or much cheaper for the rest of the year.

No extra charges for 'consultations', 'dosing', 'dispensing' or 'new bottles' can be charged at community pharmacies.

## Who is eligible?

*You are eligible if you are on methadone, Subutex, Suboxone or buprenorphine;*

- Get dosed at a community pharmacy or hospital pharmacy.
- Have a medicare card or you can get one.
- Have signed the privacy agreement allowing your pharmacy to register you in the PBS program.

## Has anything else changed?

*Most ways you access your opioid treatment medications like how many takeaways you can get have not changed. Some things might have changed including:*

- how your scripts are written
- when you need your next script
- how often you need to see your GP.

Talk to your pharmacist as soon as you can to find out if you need to make an appointment with your GP.



To find out more about the changes to the opioid treatment program scan the QR code or visit [aivl.org.au](http://aivl.org.au)





## WHERE CAN YOU GET SUPPORT?

Most states and territories have services and support to help you learn about the new system, change to the new system, advocate to your GP or pharmacy or report issues with your program.

### ACT

*Canberra Alliance for Harm  
Minimisation and Advocacy  
(CAHMA)*

(02) 6253 3643

### SA

*Hepatitis SA Clean Needle  
Program Peer Projects*

1800 437 222 or  
(08) 8362 8443

### NSW

*NSW Users and AIDS  
Association (NUAA)*

1800 644 413

### QLD

*QuiHN*

1800 172 076 or  
(07) 3620 8111

### NT

*NT AIDS and Hepitits  
Council (NTAHC)*

(08) 8944 7777

### WA

*Peer Based Harm  
Reduction WA (PBHRWA)*

(08) 9325 8387

*Community Program for  
Opioid Pharmacotherapy (CPOP)*

(08) 9219 1907

### VIC

*Harm Reduction Victoria/  
Pharmacotherapy Advocacy  
Medication Service (PAMS)*

1800 443 844



To find out more about the changes to the opioid  
treatment program scan the QR code or visit [aivl.org.au](http://aivl.org.au)





UNTITLED : JASON WILIAMS



**DOWNLOAD**

the FREE

Queensland Needle & Syringe

Program app



Access a directory of public and pharmacy Needle & Syringe Program (NSP) sites across Queensland.

Read useful information about safe injecting practices, blood borne viruses and overdose.



The Pharmacy Guild of Australia



Queensland Government

## NEEDLE & SYRINGE PROGRAM LOCATIONS

### QuiHN Brisbane

1 Hamilton St, Bowen Hills QLD 4006  
07 3620 8112 / Mon-Fri 9am – 7pm

### QuiHN Cotton Tree

59 Sixth Ave, Cotton Tree QLD 4558  
07 5443 9576 / Mon-Fri 9am – 7pm

### Biala

270 Roma St, Brisbane 07 3837 5600  
Mon-Fri 9am – 12pm, 1pm – 4pm

### QuiHN Gold Coast

Unit 12/89-99 West Burleigh Rd,  
Burleigh Heads  
07 5520 7900 / Mon-Fri 9am – 7pm

### QuiHN Townsville

47 Thuringowa Dr,  
Kirwan, Townsville 4185  
(07) 47358 828 / Mon-Fri 9am – 5pm

### QuiHN Southport

Southport Health Precinct  
Level 1 16-30 High St,  
Southport 4215, Gold Coast, QLD  
(07) 56879039 / Mon-Fri 10am-4pm

### QuiHN Burleigh Heads

#### Gold Coast

Unit 12/89-99 West Burleigh Heads,  
Burleigh Heads 4220, Gold Coast, QLD  
07 5520 7900 / Mon-Fri 9am – 7pm

## FOLLOW US



quihn\_ltd



quihn\_ltd



QuiHN



**QUIHN.ORG**