

# Pills and Powders, Parties and Pubs

ACON's strategy for addressing alcohol  
and other drug use in the GLBT community

2009 – 2012



**acon**

BUILDING OUR COMMUNITY'S  
HEALTH & WELLBEING

# Health is:

*“Health is a state of complete physical mental and social well-being and not merely the absence of disease or infirmity.”*

Preamble to the *Constitution of the World Health Organisation* as adopted by the International Health Conference, New York, 19-22 July 1946 by the representatives of 61 States (Official Records of the World Health Organisation, no 2, p. 100) and entered into force on 7 April 1948).

# The prerequisites for health are:

*“The fundamental conditions and resources for health are:*

- *Peace*
- *Education*
- *Income*
- *Social justice*
- *Equity*
- *Shelter*
- *Food*
- *A stable eco-system*
- *Sustainable resources*

*Improvement in health requires a secure foundation in these basic requirements.”*

*Ottawa Charter for Health Promotion.* (21 November 1986) First International Conference on Health Promotion, Ottawa. WHO/HR/HEP/95.1.

# Health Promotion is:

*“The United Nations recognises that the enjoyment of highest attainable standard of health is one of the fundamental rights of every human being without discrimination.*

*Health promotion is based on this critical human right and offers a positive and inclusive concept of health as a determinant of the quality of life and encompassing mental and spiritual well-being.”*

World Health Organisation. (August 2005)*The Bangkok Charter for Health Promotion in a Globalised World.*



## LIST OF ABBREVIATIONS

<b>AIVL</b>	Australian Injecting and Illicit Drug Users League
<b>AOD</b>	Alcohol and Other Drugs
<b>AODP</b>	ACON's Alcohol and Other Drugs Program
<b>APSAD</b>	Australasian Professional Society on Alcohol and other Drugs
<b>ARCSHS</b>	Australian Research Centre in Sex, Health and Society
<b>BGF</b>	Bobby Goldsmith Foundation
<b>CALD</b>	Culturally and Linguistically Diverse
<b>DANA</b>	Drug and Alcohol Nurses Australasia
<b>DSM-IV</b>	Diagnostic and Statistical Manual of Mental Disorders, 4th revision
<b>GHB</b>	Gamma Hydroxybutyrate
<b>GLBT</b>	Gay, Lesbian, Bisexual and Transgender
<b>HCV</b>	Hepatitis C Virus
<b>MDS</b>	(National) Minimum Data Set
<b>NADA</b>	Network of Alcohol and other Drugs Agencies
<b>NCETA</b>	National Centre for Education and Training on Addiction
<b>NCHECR</b>	National Centre in HIV Epidemiology and Clinical Research
<b>NCHSR</b>	National Centre in HIV Social Research
<b>NDARC</b>	National Drug and Alcohol Research Centre
<b>NDRI</b>	National Drug Research Institute
<b>NSP</b>	Needle and Syringe Program/s
<b>NUAA</b>	NSW Users and AIDS Association
<b>PLC</b>	Positive Living Centre
<b>PLWHA</b>	People Living With HIV/AIDS
<b>SGCPS</b>	Sydney Gay Community Periodic Survey
<b>SSAW</b>	Same Sex-Attracted Women
<b>SWOP</b>	Sex Workers Outreach Program



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## PRESIDENT'S FOREWORD

I am pleased to present *Pills and powders, parties and pubs*, ACON's second strategy for addressing alcohol and other drug use in the GLBT community. This strategy builds on over two decades of work by ACON reducing drug and alcohol related harm, especially through needle and syringe programs, and the recent growth of programs on other licit and illicit drug use including amphetamine-type substances, alcohol and tobacco.

Mirroring the approach set out in the Australian Government's *National Drug Strategy: Australia's Integrated Framework 2004-2009*, its focus is on harm minimisation and reducing drug related harm across the spectrum of drug and alcohol use. ACON's strategy supports and further develops the National Drug Strategy's aim "to improve health, social, and economic outcomes for both the community and the individual, and encompasses a wide range of approaches, including abstinence-oriented strategies"<sup>1</sup>, with a decisive GLBT focus but without excluding anyone who may need our services.

Harm minimisation has three key objectives: supply reduction, demand reduction and harm reduction. As a health organisation, ACON's focus is on both *demand reduction*, including prevention of the uptake of harmful drug use and the reduction of use through treatment programs; and *harm reduction*, which involves strategies to reduce the extent to which drug use causes harm to individuals and the GLBT community generally.

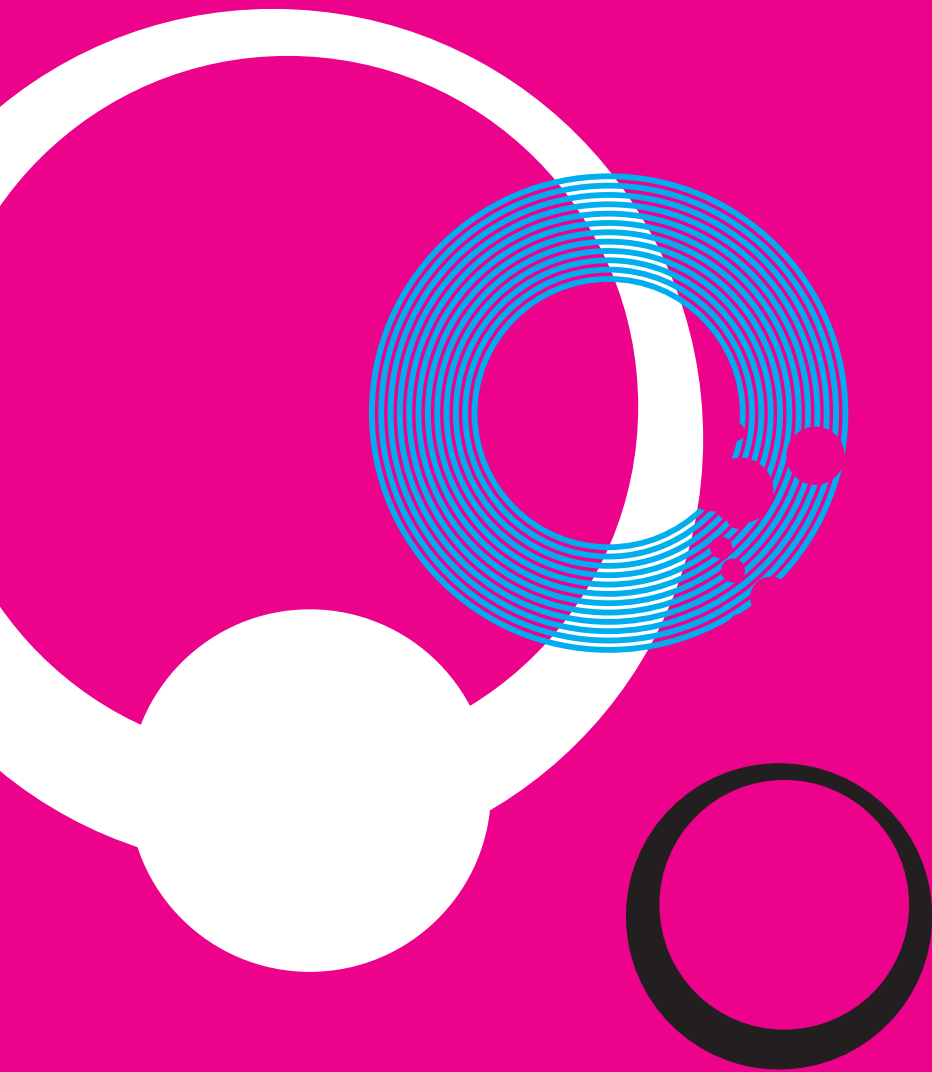
Research has shown that people who are same-sex attracted have elevated drug use in comparison to the general community. Some of that drug use is undoubtedly harmful – to individuals, their social networks, their employers, and the community as a whole. The impacts are not only poorer health, well-being and employment outcomes for individuals, but also social and economic problems for the GLBT community. In addition, alcohol and other drug use has often been associated with HIV risk and HIV transmission. We know that this association reflects a complex interplay of factors, and that efforts to respond to these risks need to be informed by an understanding of that complexity. ACON's fundamental role in working with GLBT communities in NSW to prevent the transmission of HIV makes this issue high on our priorities.

ACON's strategy outlines a number of important areas in which our endeavours will be focussed – education and skills development; early intervention; pursuing equal access to services and dealing with co-occurring mental health, alcohol and other drug use problems. Fundamental to our work in this area is building a sound evidence base. Our strong partnership with the research community in Australia<sup>2</sup> will help us ensure that this remains the case.

To achieve the goals of this strategy ACON must work in partnership with mainstream drug and alcohol and mental health services, and build their responsiveness to our community's needs. We must also work closely within GLBT community networks and with individuals: both those who use alcohol and other drugs at harmful levels, and their friends who want to help. I invite you to work with ACON in addressing these very important issues.



**Mark Orr, ACON President**



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# Introduction

ACON, formerly known as the AIDS Council of NSW, was established in 1985 as a major part of the community-based response to the emerging HIV/AIDS epidemic.

Since then, ACON has grown to become the leading health and welfare organisation for gay, lesbian, bisexual and transgender (GLBT) communities in NSW, and a leading agency in HIV/AIDS policy and program development.

ACON's programs span HIV prevention, care and support; sexual health; mental health; housing assistance and a range of health promotion programs such as encouraging cancer screening.

These programs are predominantly provided for members of our GLBT communities including Indigenous people, sex workers and all people living with HIV/AIDS. ACON recognises that there is little evidence relating to members of the transgender community. ACON will strive to ensure that there is equitable representation of transgender issues throughout this strategy and the Alcohol and other Drugs Program.

ACON also provides programs and services to people who associate with, but do not necessarily identify as, part of our communities.

ACON is a statewide service with offices in Sydney, Illawarra, Northern Rivers, the Hunter and the Mid-North Coast and an extensive range of outreach services.

ACON is also home to the Community Support Network (CSN), the Positive Living Centre (PLC), the Lesbian and Gay Anti-Violence Project (AVP) and the Sex Workers Outreach Project (SWOP).

ACON has always recognised and responded to the very real and significant need for programs that reduce the harms associated with the use of alcohol and other drugs in our communities. Changing drug trends and an increase in need led us to establish our first designated Alcohol and Other Drugs Program (AODP) in 2006.

ACON recognises that it cannot deliver every component of a comprehensive alcohol and other drug service across NSW, and that we



Know Your Rover - Press Advertising & Posters

need to work in partnership with area health services, other government departments and community groups.

It remains important that all alcohol and other drugs service providers continue to recognise their role in providing an appropriate mix of clinical services and health promotion programs to priority population groups across New South Wales, including GLBT and people living with HIV/AIDS (PLWHA) communities.

This strategy allows all stakeholders to be able to clearly understand the evidence base from which ACON works, the models of best practice that we strive to implement and the priorities that will guide us over the coming years.

The achievements of ACON's AODP are overseen by an ACON Board Advisory Working Group. Membership includes representation from the alcohol and other drug sector, researchers, community members and ACON staff.

Many have contributed to the development of this strategy including alcohol and other drugs sector experts, community members and ACON staff. The strategy is a collaboration of evidence, best practice, community experience and expert advice.

## BACKGROUND

ACON has a long history of working to reduce the harms associated with alcohol and other drug use.

Work in this field began in the late 1980s with a focus on preventing the transmission of HIV through injecting drug use and discussions on the possible impact of alcohol and drug use on sexual behaviour.

Since that time, ACON has further developed our services to include health promotion programs and education campaigns, needle and syringe programs (NSP) and community education and support at dance parties as well as providing counselling, support and referrals to drug and alcohol services.

ACON's work is developed with the understanding that:

- Drug use occurs in GLBT communities, in sex work settings and among people with HIV;
- Evidence and experience suggests alcohol and other drug use impacts on the health of our communities in multiple and significant ways that are culturally specific; and
- ACON is uniquely positioned to respond to the challenges associated with the use of alcohol and other drugs in our communities in ways that are culturally appropriate, and that will improve health and wellbeing.

Although many GLBT people who use drugs view such use as non-problematic, for some users, harm can occur. ACON is currently the only NSW agency leading a response to managing drug and alcohol use in the GLBT community, despite the overwhelming evidence of need.

Over time, ACON has produced education campaigns to reduce the harms associated with the use of alcohol and other drugs, has developed partnerships with external services, undertaken research and has lobbied for quality services for the GLBT community.



GHB - Campaign Material 2007



Happy Hour (and a 1/2) Alcohol Forum - Press Advertising

While ACON has a strong track record with its work in the area of alcohol and other drugs, it is recognised that we now need a more focused, coordinated and holistic response.

## CURRENT ENVIRONMENT

Most people who use alcohol and other drugs do so in a non-problematic way, but some people experience harm related to their use.

Problematic alcohol and other drug use can present many challenges: physical and mental health issues, employment and financial problems, as well as negative effects on relationships.

There is a growing body of evidence linking same-sex attraction with elevated levels of drug use.

### Gay Men

The Sydney Gay Community Periodic Survey collects data on sexual and health practices of gay men. In February 2008, (38.6%) of men reported having used ecstasy in the previous six months<sup>3</sup>. Levels of other drug use were also much higher than among men in the general

population: cannabis (33.7%), speed (15.8%), cocaine (17.6%) and crystal methamphetamine (15.5%) (See Figure One - p10).

### **Lesbians**

The Longitudinal Study of the Health of Australian Women found that same-sex attracted women aged 22–27 were significantly more likely than heterosexual women to report risky alcohol use (7% vs. 4%), cannabis use (58% vs. 22%), other illicit drug use (41% vs. 10%) and injecting drug use (11% vs. 1%)<sup>4</sup> (See Figure Two - p10).

### **Tobacco use**

Gay and bisexual men and women are more likely to smoke than their heterosexual counterparts. This is similar to the United States<sup>5</sup>, where research has also found that the tobacco industry deliberately targeted GLBT people<sup>6</sup>.

### **Alcohol use**

There is good evidence to suggest that heavy and “binge” alcohol use is more common among same sex-attracted women than among their heterosexual peers while gay men’s use of alcohol has been shown to be equal to, or lower than, that of heterosexual men.

### **Methamphetamine (“crystal”) use**

Monitoring systems in Australia have recorded a sharp increase in use of methamphetamine in its crystalline form since 2000, and a levelling and slight decline in the use since 2006<sup>7</sup>. Recent use of methamphetamine is much more prevalent among samples of GLBT community-attached men and women than their heterosexual peers<sup>8</sup>. There is evidence suggesting that some people in the GLBT community are particularly affected by problematic methamphetamine use, particularly when smoking or injecting the drug in its crystalline form<sup>9</sup>.

### **Injecting**

Injecting drugs places people who use drugs at risk of HIV and other viruses. In February 2008, around 5.7% of men in the Sydney Gay Community Periodic Survey reported that they had injected a drug in the previous six

months<sup>10</sup>, usually methamphetamine and steroids. People who inject steroids are much less likely than other injectors to be in contact with harm reduction services<sup>11</sup>.

### **Drug use in sex worker communities**

While HIV prevention strategies implemented in Australia have been highly successful in controlling HIV infection rates among sex worker populations, recent research examining the link between mental health, drug use and risk among female street based sex workers in greater Sydney indicates that this marginalised population is at high risk of contracting and/or transmitting HIV, HCV and sexually transmissible infections<sup>12</sup>. The vast majority of the surveyed group was heroin dependant. Almost two thirds reported sharing injecting equipment, other than needles, in the month prior, and one fifth reported providing a used needle to another person. In addition, half of the sample met the DSM-IV criteria for Post Traumatic Stress Disorder. Recent research into HIV negative gay male sex workers indicates elevated levels of illicit drug use and risk taking in the context of non-commercial sexual activity among this population<sup>13</sup>.

### **Drugs and the “dance party” scene**

In many “dance party” scenes in Australia, a significant proportion of people may identify as gay, lesbian or bisexual<sup>14</sup>. Levels of drug use may also be higher among GLBT men and women than heterosexual people in these scenes<sup>15</sup>. Heavier poly-drug use places users at risk of adverse consequences such as overdose, particularly if using drugs such as GHB.

### **Drugs and sex**

Both HIV negative and positive men reported having used party drugs to enhance sexual pleasure in casual sex encounters. Also of concern was that 16% of gay men who seroconverted reported using crystal methamphetamine and 18%, ecstasy, during the event that they believe led to them becoming HIV positive<sup>16</sup>.

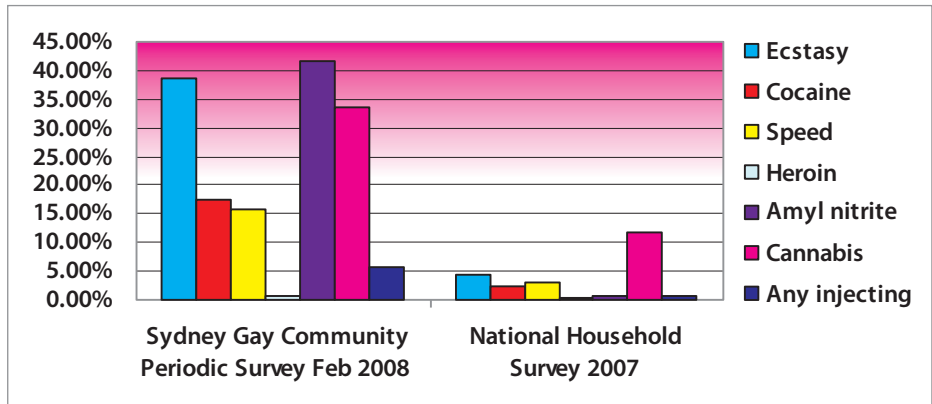
The nexus of drug use and sexual risk taking has been the subject of considerable research and debate. A number of Australian and

international studies have confirmed that there is an association between drug use and sexual risk taking within certain gay subcultures. Most of these studies indicate that the two practices are not linked in a simplistic causal sense, but that the relationship between these practices is complex<sup>17</sup>, and may be reflective of normative behaviours within particular subcultures<sup>18</sup>.

**Drug use and mental health**

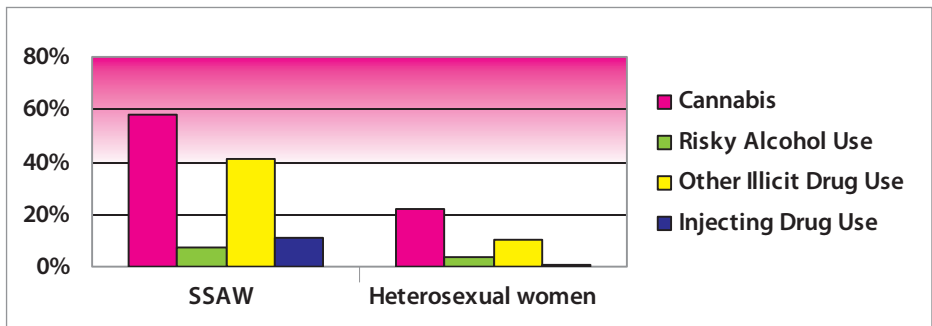
Currently, there is a dearth of available research evidence regarding links between mental health issues and alcohol and other drug use (comorbidity) within the GLBT community. Research does, however, separately show high

levels of both mental health issues and alcohol and other drug use patterns amongst the GLBT community<sup>19</sup>. Problematic use of crystal methamphetamine and associated mental health issues among the GLBT community poses cross-sector challenges. Young GLBT people report higher use of alcohol and other drugs and are more vulnerable to developing mental health issues than their heterosexual peers; they are less likely to seek help and support from professionals than from family and friends<sup>20</sup>.



**Figure One: Recent Use of Illicit Drugs: Sydney Gay Men & Men in National Household Survey**

Courtesy of: Dr Garrett Prestage, Senior Lecturer, Australian Research Centre in Sex Health & Society, La Trobe University and National Centre in HIV Epidemiology & Clinical Research, University of New South Wales



**Figure Two: AOD Use: Australian Same Sex Attracted Women (SSAW) vs. Heterosexual Women**

(From The Longitudinal Study of the Health of Australian Women)

## **PARTNERS**

Good partnerships are essential to the programs and services that are run by ACON's Alcohol and Other Drugs Program.

ACON works in partnership with a range of organisations in the alcohol and other drugs sector, as well as community members, to create and improve drug and alcohol service delivery across NSW.

ACON actively fosters these partnerships to ensure that work is carried out in a collaborative, effective and cost efficient manner and that the quality of service delivery is maximised for our communities.

Key partners working with ACON on the delivery of the Alcohol and Other Drug Program include:

### ***Gay, Lesbian, Bisexual and Transgender Community Groups***

ACON recognises that our work with GLBT community groups is essential to extending the reach of our programs and services across NSW.

### ***HIV/AIDS Organisations and Community Groups***

ACON has a long tradition of working in with partner HIV/AIDS organisations such as Positive Life NSW, and the Bobby Goldsmith Foundation (BGF). These partnerships remain essential to the effective delivery of our AODP.

### ***Community***

Community participation is an integrated and valued element in the design and delivery of ACON's services. ACON's communities are invited as community experts to provide feedback on ACON's projects, as well as volunteer to work within various areas of the AODP, including our NSPs and in the delivery of the ACON Rover Program.

### ***Research***

ACON values and works in partnership with a number of Australian and international research institutes on partnership projects, for example the National Drug and Alcohol Research Centre (NDARC), the National

Centre in HIV Epidemiology and Clinical Research (NCHECR), the National Centre in HIV Social Research (NCHSR) and the Australian Research Centre in Sex, Health and Society (ARCSHS). ACON has also initiated its own Ethics Committee to ensure research programs addressing GLBT community needs are undertaken in a beneficial and ethical way.

### ***GLBT business operators and event promoters***

ACON has a long and successful history of working with GLBT licensed and sex on premises venue operators and community party promoters to expand the reach of education campaigns and harm reduction measures.

### ***Drug User Organisations***

ACON will continue to work with both the Australian Injecting and Illicit Drug Users League (AIVL) and the NSW Users and AIDS Association (NUAA). These peer-based organisations represent national and state (respectively) issues of significance for people who use, or have used, illicit drugs.

### ***Acute and other medical services***

ACON recognises the critical role played by medical services in meeting the acute and ongoing medical needs of its communities. The AODP values its partnerships with services such as hospital Accident and Emergency departments, NSW Ambulance Service, Aboriginal Medical Services, general practitioners with high GLBT client loads and community event on-site service providers such as Mardi Gras Medical.

### ***Mainstream Drug and Alcohol and Mental Health Service Providers***

ACON works with mainstream drug and alcohol and mental health services to ensure that their programs and treatment services are responsive to the needs of GLBT people. ACON recognises that these partnerships are essential to ensuring that our community has access to appropriate treatment and that ACON has a role to play in supporting these services and to build their capacity in this regard.

### **Federal, State and Local Government**

The NSW Drug Summit in 1999 recognised that an effective drug and alcohol program, and service delivery, required a whole-of-government contribution. While NSW Health is the lead agency on many drug and alcohol programs and services, other NSW agencies such as NSW Police, the Department of Education and Training and the Department of Community Services also share responsibility for addressing alcohol and other drugs issues within our communities.

NSW Health's Area Health Services play a very important role in addressing alcohol and other drug issues in local communities as they are responsible for ensuring that local services implement state policies in a way that is consistent with, and appropriate to, the needs of the local population.

ACON values the role that NSW Police play, particularly in critical Local Area Commands,

such as Surry Hills, in ensuring the safety and amenity of GLBT community life.

Local government has a unique contribution to make to the creation and maintenance of physical environments and planning infrastructures that improve the health of local populations. Local government is responsible for key public health activities, including the processing of development applications relating to the provision of needle and syringe programs and for the regulation of licensed premises.

Local government areas with large GLBT communities are particularly significant partners for the AODP. City of Sydney notes gay and lesbian communities as a priority population in its Drug and Alcohol Strategy 2007-2010, and continues to produce campaigns relevant to the GLBT community in partnership with ACON.

### **Sex Workers**

The Sex Workers Outreach Program (SWOP) is a valued component of ACON which presents the AODP with specific issues relating to the needs of sex workers who use alcohol and other drugs. As such, the AODP will work with SWOP to meet the needs of its constituents through the development and delivery of activities as defined within the SWOP Business Plan.

### **ACCESS ALL AREAS DVD - A PARTNERSHIP APPROACH BETWEEN ACON AND THE AUSTRALIAN GOVERNMENT**

In 2006 ACON became involved as a partner in the development of a national education resource aimed at people who use drugs who are contemplating entering into drug treatment. ACON's involvement included sitting on the Advisory Committee, providing space for filming, providing the producers with client stories and contributing to the editing process.

Key highlights included the inclusion of treatment options for people dependent on methamphetamine and ensuring our communities' visual representation on the DVD.

This resource is being disseminated to drug treatment providers throughout Australia including all ACON Branches and NSP sites.

## CLUB DRUGS CAMPAIGN – A PARTNERSHIP APPROACH BETWEEN ACON AND NSW HEALTH

ACON was invited by NSW Health to sit on the Advisory Committee to contribute to the development of a club drugs campaign targeting young adults who use illicit drugs at clubs, pubs and festivals. This campaign was disseminated across NSW and produced a series of advertisements and information resources focusing on the use of ecstasy, GHB, crystal methamphetamine and the risk associated with overdose and the need to seek urgent professional medical help.

ACON's involvement on the committee resulted in posters being produced that are relevant to our communities. Highlights from this partnership included, for the first time, the development of posters targeting lesbians who use crystal methamphetamine and GHB overdoses in the home environment.

In the second phase of this campaign ACON took on a leading advisory role and worked closely with NSW Health on the development of the next round of campaign-creative materials. The second phase of the campaign had a stronger focus on the needs of the GLBT community and more specifically addressed the use of crystal methamphetamine in this community.

Key outcomes of the partnership included positioning the ACON Rover Program within the campaign materials, tailoring the campaign message for the GLBT community and the inclusion of a Mardi Gras message within campaign materials for the duration of the 2008 Mardi Gras Festival.



Overdose - Poster



Crystal - Poster



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# Principles & Policy Context

## PRINCIPLES

The following principles guide ACON's AODP:

### Evidence Base

To build our programs and services on the most current evidence available.

### Equity

To strive to achieve equity for the diverse communities within ACON's AODP.

### Access

To ensure that our communities have access to quality programs, both from within ACON and the broader AOD sector.

### Participation

To work within a community involvement framework to increase our communities' participation in the development and delivery of the activities of the AODP and to enable ACON to better respond to emerging drug trends.

### Rights

To ensure that our communities' health and human rights are upheld and to advocate, where appropriate, on behalf of our communities should those rights be compromised.

### Partnership

To ensure that our work is delivered in a coordinated and comprehensive manner and in partnerships with key community and government agencies to increase impact and effectiveness.

## POLICY CONTEXT

ACON's *Drug and Alcohol Strategy 2009 – 2012* works within the principles of International Charters, as well as with related Australian and NSW Government policies.

ACON operates within the World Health Organisation's definition that "health is a state of physical, mental, and social wellbeing and not merely the absence of disease and infirmity". More specifically, the *Ottawa Charter for Health Promotion* frames ACON's work. This sees health promotion as the process of



2009 Mardi Gras Campaign

enabling people and communities to increase control and improve their health. ACON believes that the fundamental conditions and resources for health are: peace, education, income, social justice, equity, shelter, food, a stable eco-system and sustainable resources.

*The National Drug Strategy: Australia's Integrated Framework 2004-2009* informs ACON's response to the use of alcohol and other drugs within our communities and demonstrates ACON's commitment to working within a nationally integrated framework.

*The National Drug Strategy* provides a policy framework for a coordinated, integrated approach to prevent and reduce the harms caused by drugs in the Australian community. The Strategy guides governments and non-government organisations in the development and delivery of drug strategies, programs and initiatives for the prevention and reduction of harmful drug use.

The principle of harm minimisation has formed the basis of successive phases of Australia's National Drug Strategy since its inception in 1985.



**TOGETHER GAY MEN CAN TALK  
ABOUT SEX AND DRUGS**

When drugs are used to enhance sex and sexual pleasure, issues around risk and safety can become complex.

Here's your chance to explore drug use, sex and sexual risk.

- Ask our panel of experts questions
- Share your stories
- Learn about recent research

**19 February 5.30pm - 7.00pm**  
The Winsome Hotel, 11 Bridge St North Lismore

To RSVP or for more information or transport assistance email [sioux@acon.org.au](mailto:sioux@acon.org.au) or call Sioux on 6622 1555.

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*Mardi Gras Festival Event - Promotional Material 2008*

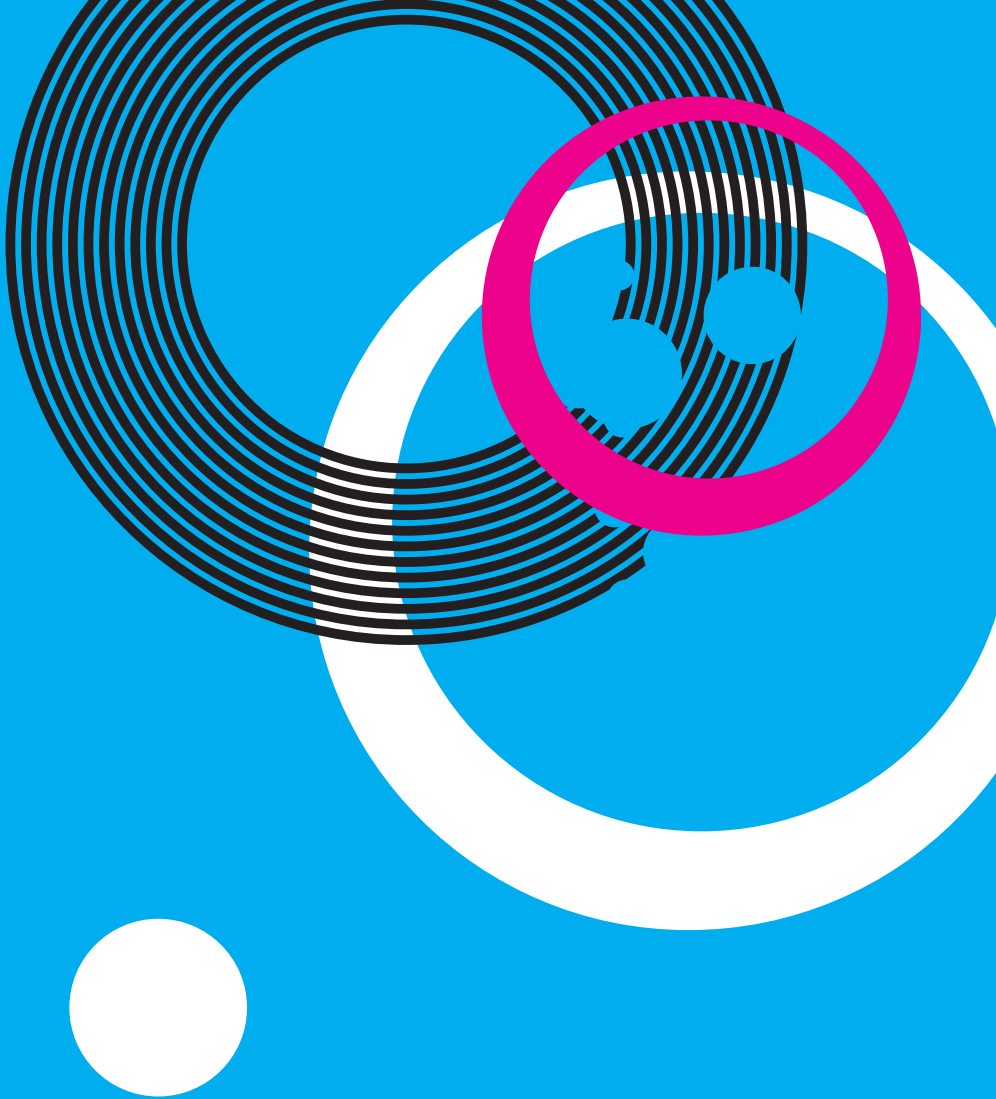
Harm minimisation does not condone drug use. Rather, it refers to policies and programs aimed at reducing drug-related harm.

Harm minimisation aims to improve health, social and economic outcomes for both the community and the individual and encompasses a wide range of approaches, including abstinence-oriented strategies.

Australia's harm-minimisation strategy focuses on both licit and illicit drugs and includes preventing anticipated harm and reducing actual harm. Harm minimisation is consistent with a comprehensive approach to drug-related harm, involving a balance between demand reduction, supply reduction and harm reduction strategies. It encompasses:

- **Supply Reduction Strategies:** To disrupt the production and supply of illicit drugs, and the control and regulation of licit substances;
- **Demand Reduction Strategies:** To prevent the uptake of harmful drug use, including abstinence-oriented strategies and treatment to reduce drug use; and
- **Harm Reduction Strategies:** To reduce drug-related harm to individuals and communities.

There are a number of other key policy approaches which underpin ACON's work. These are detailed in Appendix One.



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# Key Action Areas

# KEY HEALTH ACTION AREA 1:

## EDUCATION, INFORMATION AND PREVENTION

### Goal

**To increase education, information and prevention efforts to increase knowledge about licit and illicit drug-related harms and assist people to make healthy life choices.**

It is essential that GLBT communities are well informed and educated about alcohol and other drugs.

In particular, it is important that GLBT communities are educated about, and are able to respond to, the potential harms associated with the use of alcohol and other drugs and the various strategies that can be implemented to address such harms.

Education and information is important in preventing some GLBT people from using licit and/or illicit drugs in the first place. This is particularly the case when working with young GLBT people. However, it is also important to recognise that on an ongoing basis, education and information is essential in assisting people to adopt self-management techniques and reduction strategies, which can assist them to implement less harmful approaches to their use of alcohol and other drugs.

Education resources and campaigns are an efficient and effective way to increase our communities' knowledge in relation to alcohol and other drugs, as are community events, forums, social and support groups and community development approaches.

### ACON will:

- 1.1 Continue to develop funding submissions to undertake statewide social marketing campaigns that address the potential harms associated with the use of crystal methamphetamine, treatment and support options, as well as harm reduction strategies.
- 1.2 Continue to develop funding submissions to develop a range of



GHB - Campaign Material 2007

## GHB CAMPAIGN

GHB (Gamma Hydroxybutyrate), also known as G or Gina, is a bitter tasting chemical liquid that acts as a central nervous system depressant. The recreational dosage range of GHB is narrow and even small overdoses can cause temporary unconsciousness. Large overdoses can be life-threatening.

Helping people understand the risks associated with taking the drug GHB was the focus of a health promotion campaign. The key message was "Not Every Dose Is The Same".

The campaign was designed to alert people to the risks of overdosing on the substance, with funding provided by NSW Health's Mental Health and Drug and Alcohol Office.

To help target the message, the campaign features fish-shaped soy sauce containers which are commonly used by GHB users to dispense the drug. Campaign posters and postcards were distributed in pubs, clubs and at parties. Relevant information has also been posted on the ACON website and the innovative ACON partying at home website.

- culturally appropriate education and information resources that address the needs of priority population groups and issues including drug use and sexual risk, people living with HIV/AIDS, sex workers, young people and alcohol use, Indigenous people, people from CALD backgrounds, and people living with comorbidity issues.
- 1.3 Develop education and information resources that educate the community about complex issues such as drug interactions, serotonin syndrome, overdose and injecting drug use among gay men.
  - 1.4 Work with partners (national, state and local) on education and information campaigns to make sure they are relevant to GLBT communities.
  - 1.5 Develop discussion papers, briefing documents and policy papers that explore issues and make programmatic recommendations in relation to the use of alcohol and other drugs by the GLBT community.
- 1.6 Ensure ACON representation on advisory structures for national, state and local campaign and resource development that are of particular relevance to GLBT communities.
  - 1.7 Establish ongoing relationships with a range of community media to increase community understanding and debate on drug use within GLBT communities and ensure that media coverage reflects an evidence base in relation to GLBT peoples' use of alcohol and other drugs and the associated consequences and harms.



*Partying At Home - Campaign Material 2007*

## PARTYING AT HOME WEBSITE

At [www.partyingathome.acon.org.au](http://www.partyingathome.acon.org.au), visitors are provided with detailed information on how to reduce the potential risks associated with private parties. The website was created by ACON with funding from, and in consultation with, the Surry Hills Community Drug Action Team.

The website is designed to help people understand the risks associated with partying at home and minimise those risks if they, or their guests, choose to consume alcohol or other drugs when partying in home-based environments.

The site includes harm reduction strategies relating to the use of both legal and illegal drugs, information on practising safe sex in house party environments and information about the legal responsibilities of hosts and guests. The site also provides information and downloadable signage on how to recognise and respond effectively to medical emergencies.

The content on the website was gathered from an online survey of almost 200 people about their partying and information needs.

ACON is also encouraging visitors to the site to give feedback which will enable the AODP team to better meet the needs of community members.

## KEY HEALTH ACTION AREA 2:

### ASSISTING WITH EARLY IDENTIFICATION OF PROBLEMATIC USE

#### Goal

**To increase early identification of problematic alcohol and other drug use, and provide and support best practice early interventions.**

ACON recognises that a range of strategies are required to be able to respond to the use of alcohol and other drugs by the GLBT community.

Brief and early intervention strategies aim to ensure a reduction in the severity of alcohol and other drug problems by their early identification and treatment.

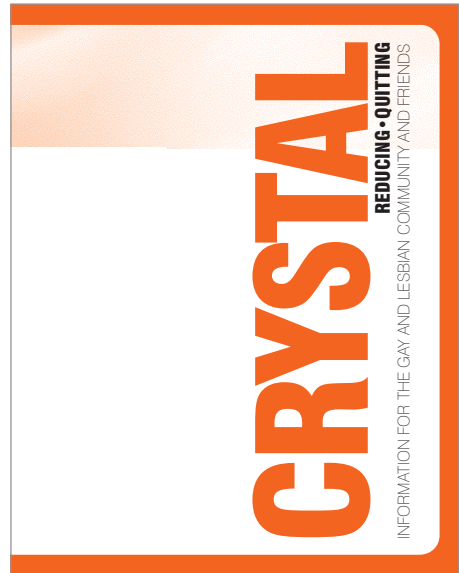
ACON also acknowledges the need to address co-occurring alcohol and other drug problems and mental health issues (comorbidity).

Ensuring that people are aware of services and what they offer is essential, as is educating the community to be better able to recognise problematic drug use so that they can seek support in a timely way. Ensuring that the needs of young GLBT people are met is also imperative.

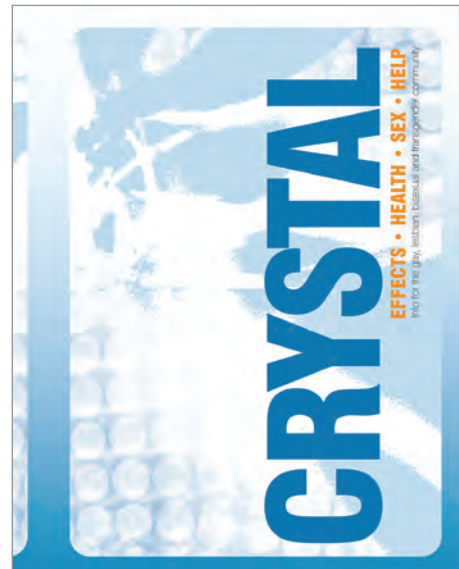
ACON considers resources such as Alcohol Use Disorders Identification Tool (AUDIT), developed by the World Health Organisation, to be of great benefit. In relation to alcohol, the benefits of screening and early identification include:

- Educating consumers about hazards and risks;
- Identifying problems before serious dependence has developed;
- Motivating people to change their consumption levels and behaviour; and
- Exposing persons at risk to brief but effective interventions that are designed for use by health care workers.

In addition, ensuring easy access to services and making available a range of treatment options to the GLBT community is vital.



*Crystal, Reducing and Quitting - Booklet*



*Crystal - Effects, Health, Sex, Help - Booklet*

## CRYSTAL BOOKLET SERIES

In 2004, ACON launched in partnership with the NSW Users and AIDS Association (NUAA) the first in a series of education booklets addressing the increase in the use of crystal methamphetamine.

*Crystal – Effects, Health, Sex, Help* was the first resource in Australia to be published on this substance and reached an audience much broader than the GLBT community.

The involvement of all stakeholders, including the GLBT community, ensured that the resource was well targeted and contained information that people needed to reduce harm and assist them access support.

The second booklet in this series *Crystal, Reducing and Quitting*, focused on seeking support and strategies on how to reduce and stop using crystal methamphetamine. As with the first, this booklet has also been distributed outside of the GLBT community across NSW.

Exploring dependence, planning, taking action and getting help and support have made these booklets essential resources to assist people who are experiencing problematic crystal use, along with their friends and families.

### ACON will:

- 2.1 Ensure that all ACON staff are able to access information on the range of AOD and mental health services, and referral pathways that are available in NSW.
- 2.2 Ensure that all ACON's clinical staff are trained and use early identification diagnostic tools.
- 2.3 Develop programs and services that address early warning signs for problematic drug and alcohol use and the possibility of comorbidity, and promote appropriate care pathways.
- 2.4 Seek support to develop campaigns and resources that will educate our communities to be able to identify problematic use of alcohol and/or other drugs and comorbidity.
- 2.5 Work with the AOD and mental health sectors to improve the quality of services and enable them to better respond to our communities' needs.
- 2.6 Generate dialogue in the GLBT media to promote discussion among the GLBT

community in relation to problematic alcohol and other drug use and comorbidity.

## KEY HEALTH ACTION AREA 3: BETTER CARE AND TREATMENT

### Goal

To increase the availability of treatment services, and improve case co-ordination with treatment services, using harm-reduction and demand-reduction models based on individual client needs.

Research shows that members of the GLBT community experience significant barriers when accessing services, with the majority of our community preferring to be able to access specific GLBT services.

ACON's AODP aims to be able to provide high quality services that will meet the diverse needs of our community within models of clinical best practice and that are culturally appropriate. These will include:

- Counselling
- Case management and coordination
- Shared care
- Group support
- Crisis intervention

Working in partnership with the AOD sector is vital in ensuring that ACON provides the best possible services to our community.

The development of case coordination processes with the array of alcohol and other drugs and mental health services that are currently available will improve the quality of services to the GLBT community.

### ACON will:

- 3.1 Ensure that ACON staff receives basic training on alcohol and other drug issues and comorbidity issues.
- 3.2 Increase the frequency and quality of interventions delivered to clients who present with alcohol and other drug issues and ensure that internal and external referral pathways are efficient and appropriate.
- 3.3 Seek funding to ensure that we are able to employ AOD and mental health specialists to deliver high quality services and programs.
- 3.4 Ensure that all our AOD work is accurate and meets government policy directives.
- 3.5 Continue to work in partnership with



**THE COUNTER HAS GONE  
AND WE HAVE A NEW LOOK NSP!**

Don't panic.....we still stock the same equipment but now you can drop in and stay a while. Come and read a magazine, find out about other services, chat to staff and our great new community volunteers, pick up a resource, or just take some time out from the day. You can now help yourself to supplies, and if you need something we don't have please let us know.

This is your NSP so tell us what you think about it – the good and the bad.

**acon** BUILDING OUR COMMUNITY'S HEALTH & WELLBEING

Mon–Fri  
10am–6pm  
Ph: 9206 2052

*NSP - Press Advertising*

## NEEDLE AND SYRINGE PROGRAM

ACON has provided injecting equipment free of charge to people who inject drugs for over 15 years. ACON also provides NSP services at major gay and lesbian dance parties.

In 2007, ACON focused on enhancing the services that are provided by our NSPs. This has included working in partnership with the New South Wales Users and AIDS Association (NUAA) who have placed a worker in our Hunter Branch to improve service delivery and engagement with the community as well as provide a base for NUAA in the Hunter region.

At Commonwealth St, a model of facilitated self service has been piloted. This model has resulted in an open access area that is comfortable and welcoming. Key to the success of this model has been the involvement of ACON's community members who volunteer to work on the NSP.

Volunteers receive on the job training and are encouraged to attend TAFE and other courses and conferences. Community based education, access to sterile equipment, resources and information and referrals to services are offered. Health promotion activities are also carried out and have included for example oral health, drug treatment options, pharmacotherapies, legal issues and poly drug use.

All staff and volunteers are trained in Motivational Interviewing and undertake Brief Interventions to ensure that that the people who access our NSPs receive the best possible service and support.

- research agencies to ensure that our care and treatment responses are evidence based and meet quality driven minimum standards.
- 3.6 Continuously improve referral pathways and client coordination with partner organisations so that our clients' care and treatment experience is of the highest standard.
- 3.7 Work with research agencies to support clinical trials, therapeutic intervention development and evaluations, and to improve our clients' treatment experiences and outcomes.
- 3.8 Work with NSW Health to seek partnership opportunities in relation to the existing NSW methamphetamine clinics and drug-specific programs.
- 3.9 Seek opportunities to work in partnership with GPs to support their drug and alcohol work with our communities.
- 3.10 Work to ensure that GLBT issues for the prescribing of pharmacotherapies to our community are included in the training of GPs.
- 3.11 Work in partnership with peak and professional bodies to increase the profile of GLBT people's drug use and comorbidity issues and to assist in the provision of quality services to the GLBT community.
- 3.12 Continue to seek funding to run smoking cessation programs for people living with HIV and GLBT people.

# KEY HEALTH ACTION AREA 4:

## WORKING WITH MAINSTREAM SERVICES

### Goal

**To improve GLBT people's access to mainstream drug and alcohol and mental health services and ensure these services are able to respond in culturally appropriate ways.**

Research indicates that many services in the AOD sector are not able to effectively respond to the needs of the GLBT community.

ACON recognises that while there are competing demands upon the treatment providers in the drug and alcohol sector, a lack of acknowledgment of an individual's sexuality results in poorer quality of service and treatment outcomes.

For community members with a co-occurring mental health issue, ensuring that more complex and extensive service needs are met is an additional challenge.

ACON recognises that working with the AOD and mental health sectors to gain improved access and service quality is paramount.

ACON has good relationships with AOD, mental

health and related service providers and their peak bodies.

ACON will strengthen and build new partnerships with treatment and other service providers, and this will be done on the basis of:

- Mutually agreed referral pathways and shared care agreements;
- Sharing of expertise;
- Advising on alcohol and other drug and mental health issues for the GLBT community; and
- Working in partnerships to develop community social marketing campaigns.

### ACON will:

- 4.1 Work in partnership with the Network of Alcohol and other Drugs Agencies (NADA) and explore the potential to develop a campaign that promotes treatment services that are best placed to work with the GLBT community across NSW.
- 4.2 Develop an AODP training resource on

## NETWORK OF ALCOHOL AND OTHER DRUGS AGENCIES (NADA)



During 2007, ACON became a member of the NADA. NADA is the peak organisation for the alcohol and drug non-government sector throughout NSW. NADA's membership comprises approximately 120 agencies ranging from small counselling, prevention and education services to larger treatment organisations. These agencies make up approximately one third of the drug and alcohol sector in NSW.

NADA's activities focus on better positioning the sector through capacity building and contribution to policy development. NADA provides strategic advice to government and advocates on behalf of the sector. NADA plays an integral role in the overall governance of the NSW Drug and Alcohol Program through its involvement in specialist council and committee structures.

ACON has been recognised by NADA as a member of the drug and alcohol non-government sector and will work with NADA and its member organisations to improve the treatment and care experiences of the GLBT community.

GLBT issues and disseminate this across NSW.

- 4.3 Instigate meetings with NADA and other peak bodies such as the Mental Health Coordinating Council, the Australasian Professional Society on Alcohol and other Drugs (APSAD) and the Drug and Alcohol Nurses Australasia (DANA) and seek input into their annual conferences and policy processes.
- 4.4 Support external mainstream drug and alcohol and comorbid services as requested and within ACON resources.
- 4.5 Continue to refer ACON clients to external support groups, where appropriate.
- 4.6 Seek representation within advisory structures for national, state and local AOD and mental health service providers.
- 4.7 Seek opportunities to be included in TAFE Certificate IV course in Drug and Alcohol.
- 4.8 Meet with the Workforce Development Program to discuss the inclusion of GLBT issues within state wide educational programs.
- 4.9 Continue to work with peak bodies for drug and alcohol agencies to encourage the development of programs, policies and procedures to eliminate discrimination against our community members.
- 4.10 Work with Area Health Service Drug and Alcohol Services on the development of localised drug and alcohol strategies to ensure our communities' interests are represented.
- 4.11 Continue to advocate for workforce development initiatives to be established to increase sexual health services' capacity to respond to alcohol and other drug use issues, and vice versa.



### ACON'S SEX WORKERS OUTREACH PROJECT (SWOP)

SWOP operates extensive outreach services to sex industry workplaces in Sydney and regional centres of NSW.

Through their outreach work, SWOP came into contact with Vinh, the only son of Vietnamese immigrants who arrived in Australia as refugees in the 1970s. Due to Vinh's sexuality his parents did not have a relationship with him.

Vinh worked in a popular male brothel and started using ice to keep himself awake during the evening shifts. After work Vinh found it hard to sleep, so he would then take valium.

Vinh had a substantial gambling debt to pay off, so sometimes provided unsafe sex for extra money. He was reluctant to tell his friends about his work as he felt they would judge him. Vinh had attended counselling services in the past but did not continue as he felt the counsellor was not accepting of his sex work.

Through SWOP outreach at his workplace, Vinh learned that SWOP has links with drug and alcohol service providers and that it provides training to some of these services to dispel myths that counsellors may have regarding sex work.

Through the referral that SWOP outreach workers provided, Vinh attended counselling for several months, after which he had changed his hours of work, significantly reduced his drug use and was feeling more confident about himself. Vinh also accessed his local SMART Recovery group.

## KEY HEALTH ACTION AREA 5: GETTING THE COMMUNITY INVOLVED

### Goal

**To continue to build shared responsibility for addressing problematic drug and alcohol use in the GLBT community.**

Addressing the use of alcohol and other drugs is a responsibility that is shared across the GLBT community.

Ensuring that the community is skilled and educated on issues relating to alcohol and other drugs, meeting the needs of young GLBT people and offering a range of programs that address the use of alcohol and other drugs are important components of the community's response. For example, we will continue to work with the party promoters, licensed venues and sex-on-premises venues,

to assist them in responding to issues that arise relating to the use of alcohol and other drugs in these particular settings.

We will also put in place, through partnership with key agencies, education programs that challenge attitudes and perceptions, build skills and knowledge, and make our community more drug and alcohol literate and responsive.

Of course, central to these approaches will be efforts to work with community members and partner agencies to further develop our understanding and knowledge of the role that drugs can play in our communities.

"The fact that drugs aren't the likely reason for most of the risk-taking that occurs among gay men doesn't mean it isn't problematic – indeed, I'd suggest that most of the evidence suggests that many gay men use drugs to enhance sex, to make intensive sex partying an even more heightened experience. So the drugs can actually enable some men to take risks – they may have wanted to take some degree of risk anyway, but the question has to be asked whether (a) the drugs made that more possible for them, & (b) if the general cultural values that have developed, at least among some groups of gay men, have just built up in such a way that some old values about taking care of yourself and of each other haven't become a little lost in the way they're increasingly thinking about partying.

... it's my belief that the solution to the problems our community faces around drugs won't be resolved by thinking about it in terms of sexual risk or in terms of harm-minimisation – both of these are important, of course. But the more fundamental issue is how our community thinks about drugs. Mostly we seem to plan for drugs and assume they naturally have a place in how we socialise. In terms of planning for when things go wrong that's a good thing. But in terms of how it frames the way we all think about the issue it's problematic. The expectation that drugs are the norm means that some gay men, particularly some young gay men, take up and continue to use drugs when they otherwise might not, and, in some cases, their capacity to do so might not be as certain as it is for others...

Also, by focussing on one particular drug as though it's the demonic reason for all our community woes, ignores the fact that some, seemingly much less problematic drugs are overlooked, even though they might have very harmful effects on some individuals".

*Excerpt from a presentation by Dr Garrett Prestage, Senior Lecturer, National Centre in HIV Epidemiology and Clinical Research at ACON's Sexual Risk and Alcohol and Other Drug Use Forum*

## ACON'S ROVER PROGRAM

In 2003 ACON established the Rover Program. The program involves trained volunteers providing a range of health promotion services at large scale events and parties, such as Mardi Gras, Sleaze Ball, Harbour Party and Toy Box. Some of these health services include:

- Assisting people who are intoxicated.
- Providing essential items, such as water, to people who are dehydrated.
- Working with on-site medical services.
- Providing basic care items such as sun screen and band aids.
- Acting as an information point for people on issues such as directions, lost property and assisting those that have lost their friends.

Rovers work in close partnership with medical services operating on-site at parties such as Mardi Gras Medical and UniMed.

The ACON Rover Program has been developed in line with national and state-based drug policy and is a model of best practice within the health sector. The Rover Program is promoted in the NSW Health Department's current Club Drugs Campaign (copy of advertisement attached). Rovers play an essential role in preventing people from experiencing health problems, such as overdoses. Through their early intervention and prevention role they also help to reduce admissions to Accident and Emergency wards and on-site medical services. People at parties are aware of the ACON Rover Program through press advertising and promotional materials that are displayed at events.

ACON Rovers are easily identifiable: they wear pink fluorescent vests and carry light wands.

### ACON will:

- |     |  |     |  |
|-----|--|-----|--|
| 5.1 | Continue to build and invest in our partnerships with both private sector and not for profit GLBT operators to reduce drug and alcohol harm.             | 5.6 | Develop consultation and advisory (including technical advice) structures with other HIV and GLBT organisations across NSW for all ACON alcohol and other drug campaigns and resource development processes. |
| 5.2 | Continue to co-host and develop community forums in order to increase community knowledge and information.   | 5.7 | Ensure ongoing partnerships with other HIV and GLBT community based-organisations across NSW and seek joint delivery of drug and alcohol education and information resources and campaigns.                  |
| 5.3 | Participate in relevant interagency meetings, such as the Surry Hills Licensing Accord.  | 5.8 | Develop a Community Involvement Committee and continue to liaise and work with NUAA.   |
| 5.4 | Continue to liaise with entertainment venue owners and operators on alcohol and other drug issues and where appropriate, provide education and training. |     |  |
| 5.5 | Seek funding opportunities to support ACON Rovers so the program can be maintained and further developed across NSW.                                     |     |  |

# KEY HEALTH ACTION AREA 6:

## RESEARCH, MONITORING AND EVALUATION

### Goal

**To increase and improve the research, monitoring and evaluation programs that underpin GLBT people's drug and alcohol use and related services.**

ACON remains at the forefront in its response to emerging trends to reduce the problems related to the use of alcohol and other drugs in the GLBT community.

While this work includes well established programs and new and innovative evidence-based responses, there is a clear need for increased research to inform our approach.

This research needs to look at GLBT people's use of alcohol and other drugs, experiences of comorbidity, as well as their treatment service use and the outcomes related to their treatment programs. There is also a need for focused research into the nexus of comorbid injecting drug use and mental health issues for sex industry workers.

To date in Australia, sexual orientation measures and data on GLBT alcohol and

other drug use has only appeared in a limited number of studies (including the Illicit Drug Reporting System and the Ecstasy and Related Drugs Reporting System), unless sexuality is the specific focus of the research.

The National Drug Strategy Household Survey has recently been amended to collect sexuality data. ACON commends the Australian Government for helping to expand our understanding of drug use patterns and associated issues among the GLBT community.

ACON believes that ongoing research into population groups that are vulnerable or exposed to particular health issues, is fundamental to Australia's health approach.

### ACON will:

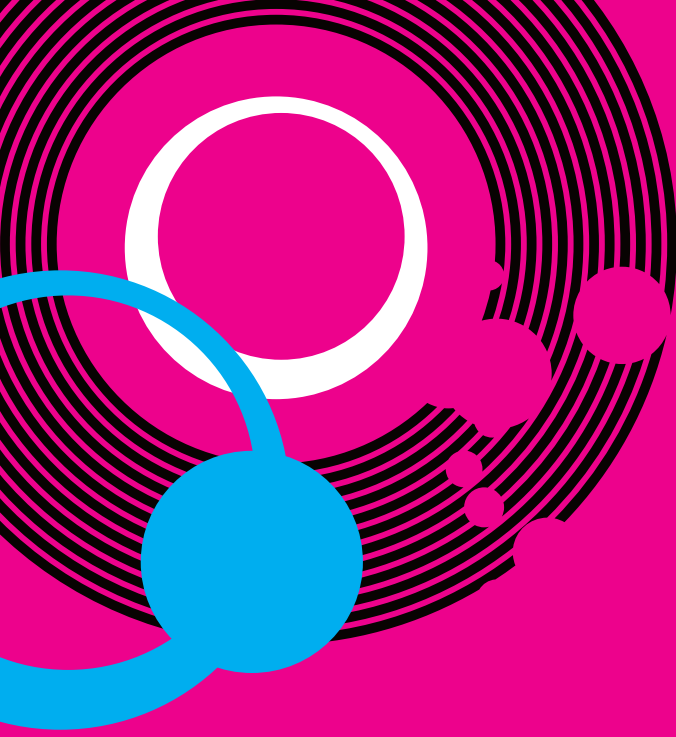
- 6.1 Continue to advocate for sexuality data to be collected across AOD service intake and assessment processes and be included in the National Minimum Data Set (MDS).

### RAPID ASSESSMENT OF CRYSTAL METHAMPHETAMINE AND GHB USE IN THE GAY, LESBIAN, BISEXUAL AND TRANSGENDER COMMUNITY IN NSW

In 2005, in partnership with the National Drug and Alcohol Research Centre (NDARC), ACON undertook the rapid assessment of crystal methamphetamine and GHB use in the gay, lesbian, bisexual and transgender community in NSW. This research was funded by NSW Health. The project found that the use of crystal methamphetamine increased in the GLBT community and that dependent drug use was posing great challenges to both consumers and service providers. Key issues identified included:

- While community concern has focused largely on gay men, the use of crystal methamphetamine was found to be at similar levels among lesbian and bisexual women.
- More information needed to be made available to users, frontline service providers and those working in the HIV Sector.
- Consideration needed to be given to establishing a specialised Drug and Alcohol Team at ACON; and
- GLBT cultural sensitivity training needed to be provided to generalist AOD services.

- 6.2 Continue to advocate for the inclusion of a sexuality question in population-wide research approaches and data sets relating to drug and alcohol, and comorbidity issues.
- 6.3 Contribute to the ongoing development and implementation of the Sydney Women and Sexual Health and Gay Men's Periodic Surveys so they are able to better explore drug use and sexual risk.
- 6.4 Streamline our own established ACON NSP/AODP data management systems for NSPs including referral and brief intervention monitoring.
- 6.5 Seek funding to enable ACON to undertake drug and alcohol research in partnership with research agencies.
- 6.6 Continue to contribute to the ACON ethics process for all studies that contain alcohol and/or other drug or comorbidity content.
- 6.7 Improve our client satisfaction monitoring processes so that they are meaningful and contribute to the improvement of our drug and alcohol services and programs.
- 6.8 Ensure that our drug and alcohol programs and services include sufficient resources so that appropriate evaluation processes can be carried out.
- 6.9 Advocate for, and contribute to, research that provides new information or builds an evidence base for effective and innovative prevention and treatment initiatives for problematic psychostimulant use.



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**Links & Information**

## ACON

We help and enable people in our community to stop using drugs or to reduce the harms associated with drug use by providing a range of targeted resources and support services.

**Tel:** (02) 9206 2000 in Sydney  
**Freecall:** 1800 063 060 in non-metro NSW  
**Email:** aod@acon.org.au  
**Web:** [www.acon.org.au](http://www.acon.org.au)

## ALCOHOL AND DRUG INFORMATION SERVICE (ADIS)

ADIS is a 24 hour telephone-based information and referral service that provides information on NSP locations, treatment services, support options and more.

**Tel:** (02) 9361 8000 in Sydney  
**Freecall:** 1800 422 599 in non-metro NSW

## BOBBY GOLDSMITH FOUNDATION (BGF)

Practical, emotional and financial support for people with HIV.

**Tel:** (02) 9283 8666  
**Freecall:** 1800 651 011  
**Web:** [www.bgf.org.au](http://www.bgf.org.au)

## CRYSTAL METH ANONYMOUS (CMA)

A 12-step fellowship group in Sydney.

**Tel:** 0410 324 384.  
**Web:** [www.sydcma.com](http://www.sydcma.com)

## GAY AND LESBIAN COUNSELLING SERVICE (GLCS)

Telephone counselling available 5.30pm to 10.30pm.

**Tel:** (02) 8594 9596  
**Freecall:** 1800 184 527 in non-metro NSW  
**Web:** [www.glcsnsw.org.au](http://www.glcsnsw.org.au)

## LANGTON CENTRE

The Langton Centre in Surry Hills, offers a range of specialist alcohol and other drug treatment services.

**Tel:** (02) 9332 8777

## NSW USERS AND AIDS ASSOCIATION (NUAA)

NUAA is a peer based-organisation that provides information, referral and support.

**Tel:** (02) 8354 7300  
**Freecall:** 1800 644 413  
**Web:** [www.nuaa.org.au](http://www.nuaa.org.au)

## POSITIVE LIFE NSW

Representing the interests of people living with HIV in NSW.

**Tel:** (02) 9361 6011  
**Freecall:** 1800 245 677  
**Web:** [www.positivelife.org.au](http://www.positivelife.org.au)

## POSITIVE LIVING CENTRE (PLC)

Programs, events and activities for people living with HIV/AIDS.

**Tel:** (02) 9699 8756

## SELF MANAGEMENT AND RECOVERY TRAINING (SMART)

SMART supports strategies for people who want to gain control over their alcohol and/or other drug use. Contact ACON to find GLBT-friendly groups.

## SEX WORKERS OUTREACH PROJECT (SWOP)

**Tel:** (02) 9319 4866 in Sydney and interstate  
**Freecall:** 1800 622 902 in non-metro NSW  
**Web:** [www.swop.org.au](http://www.swop.org.au)

## STIMULANT TREATMENT PROGRAM (STP)

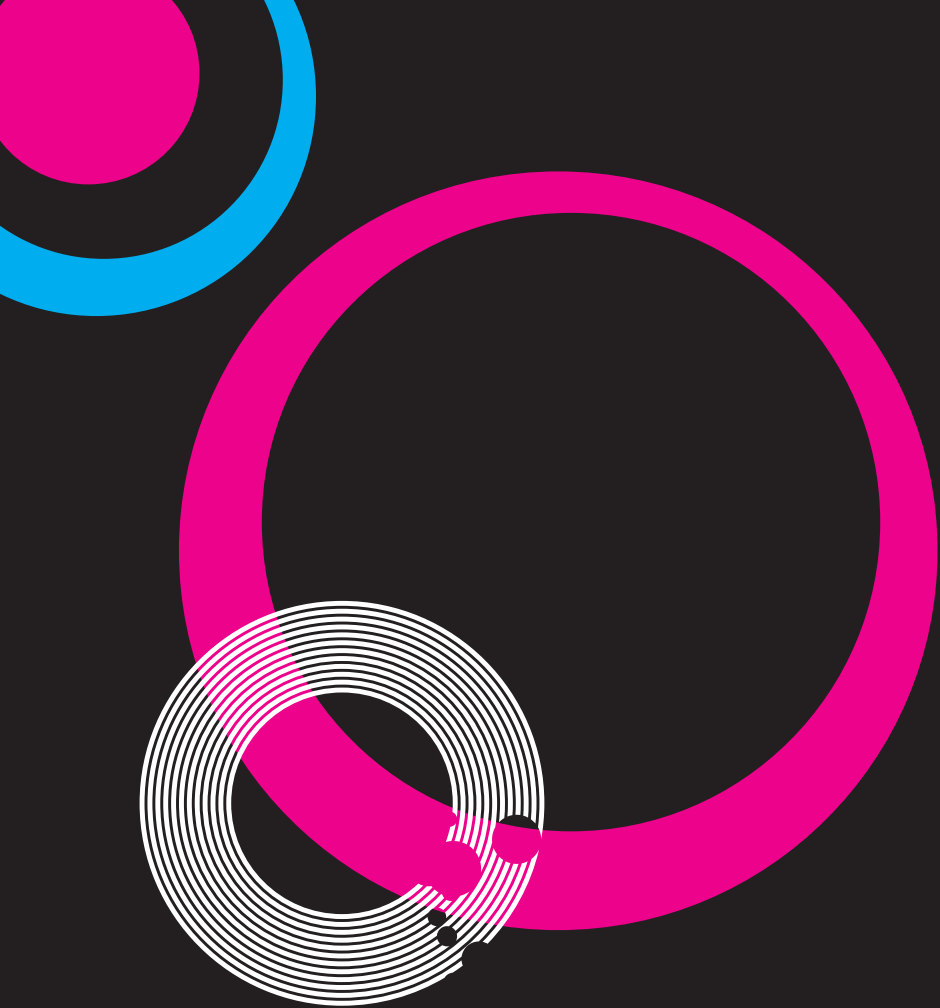
STP has locations in Sydney and Newcastle.

**Tel:** (02) 9361 8088

## TWENTY10

Support for young same sex-attracted people and their families and communities.

**Tel:** (02) 8594 9555 in Sydney  
**Freecall:** 1800 652 010 in non-metro NSW.  
**Web:** [www.twenty10.org.au](http://www.twenty10.org.au)



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# Appendix One

*Related Policy Documents and Contexts*

- The *National Cannabis Strategy 2006 - 2009* has been developed within the existing legislative framework and focuses on prevention, supply reduction and treatment in a partnership framework. The strategy also acknowledges and supports the priorities and key result areas of existing strategies and plans from areas such as drug use, mental health, education and indigenous health, which have relevance to the minimisation of cannabis-related harm.
- The *National Alcohol Strategy 2006 - 2009* was developed as a response to the patterns of high-risk alcohol consumption that are prevalent in Australia. It outlines priority areas for coordinated action to develop drinking cultures that support a reduction in alcohol-related harm in Australia.

The four priority areas that have been nominated as the focus of the Strategy are:

- intoxication
  - public safety and amenity
  - health impacts
  - cultural place and availability
- The *National HIV/ AIDS Strategy 2005 - 2008* has identified five priority areas for action to be addressed: development of a targeted prevention education and health promotion program for HIV, improving the health of people living with HIV/ AIDS, developing an effective response to changing care and support needs, a review of the HIV Testing Policy and the provision of a clearer direction for HIV/AIDS research.
  - The *National Hepatitis C Strategy 2005 - 2008* recognises people who inject drugs, people in custodial settings and Aboriginal and Torres Strait Islander people who engage in risk behaviours as those disproportionately affected by hepatitis C. To achieve the aims of this National Hepatitis C Strategy, education, prevention, treatment and care and support services must be strongly targeted towards these groups.

In addition to the national strategies, the NSW Government has a series of policy frameworks that inform the direction of ACON's AODP. These include:

- *The State Plan: A New Direction for NSW:* This plan identifies the need to build healthy communities as one of its key goals. In order to do this, it has highlighted the need for "improved health through reduced obesity, smoking, illicit drug use and risk drinking".
- *The Drug and Alcohol Plan 2006 - 2010: A Plan for the NSW Health Drug and Alcohol Program.* Importantly, this plan recognises the needs of the GLBT communities and has identified "sexual and gender diverse groups" as a special population group under the plan.
- *The NSW Health Amphetamines, Ecstasy and Cocaine: A Prevention and Treatment Plan 2005 - 2009.* This plan also recognises that gay, lesbian and transgender people are a special population group and acknowledges the barriers that GLBT people experience in seeking and accessing treatment and interventions. The plan recommends the involvement of community-based gay and lesbian health networks in the development of targeted approaches.
- *The NSW HIV/AIDS Strategy 2006 - 2009:* There are a number of key objectives outlined in this strategy relating to drug use. Some of these include:
  - To strengthen HIV prevention among gay men who inject drugs;
  - To gain a more accurate picture of the relationship between alcohol and drug use and sexual risk taking among gay men;
  - To increase gay men's access to related health services such as alcohol and other drug services and counselling services;
  - To increase gay men's awareness of the relationship between alcohol use, unsafe sex and HIV infection;

- To provide people living with HIV/AIDS with information about recreational illicit drug use, interactions between recreational drugs and HIV treatments and potential impacts on immune function and nutrition;
- To improve access to NSP services among Aboriginal communities and CALD communities;
- To build community support for the NSP; and
- To improve understanding of the needs of people who inject drugs.

• *The NSW Sexually Transmissible Infections Strategy 2006 - 2009.* This strategy highlights the need to improve links between sexual health services, drug and alcohol services and other programs that work to increase access to sexual health education and services for people who inject drugs.

• *The NSW Hepatitis C Strategy 2007 - 2009.* This strategy lists a range of objectives to be achieved, including a number which address the health needs of people who inject drugs.

• *The NSW HIV/AIDS, Sexually Transmissible Infections and Hepatitis C Strategies: Implementation Plan for Aboriginal People 2006 - 2009.* This plan recognises that social factors relating to issues of sexuality, sexual identity, drug use and gender are often regarded as sensitive and personal issues within society in general and can be difficult to discuss openly. This can be further compounded by specific cultural sensitivities within Aboriginal communities.

• *Community Mental Health Strategy 2007 – 2012 (NSW)* provides a framework for improving responses to the needs of people across NSW with mental illness, their families and their carers.

The strategy identifies the value of partnerships between mental health services and a range of agencies and care

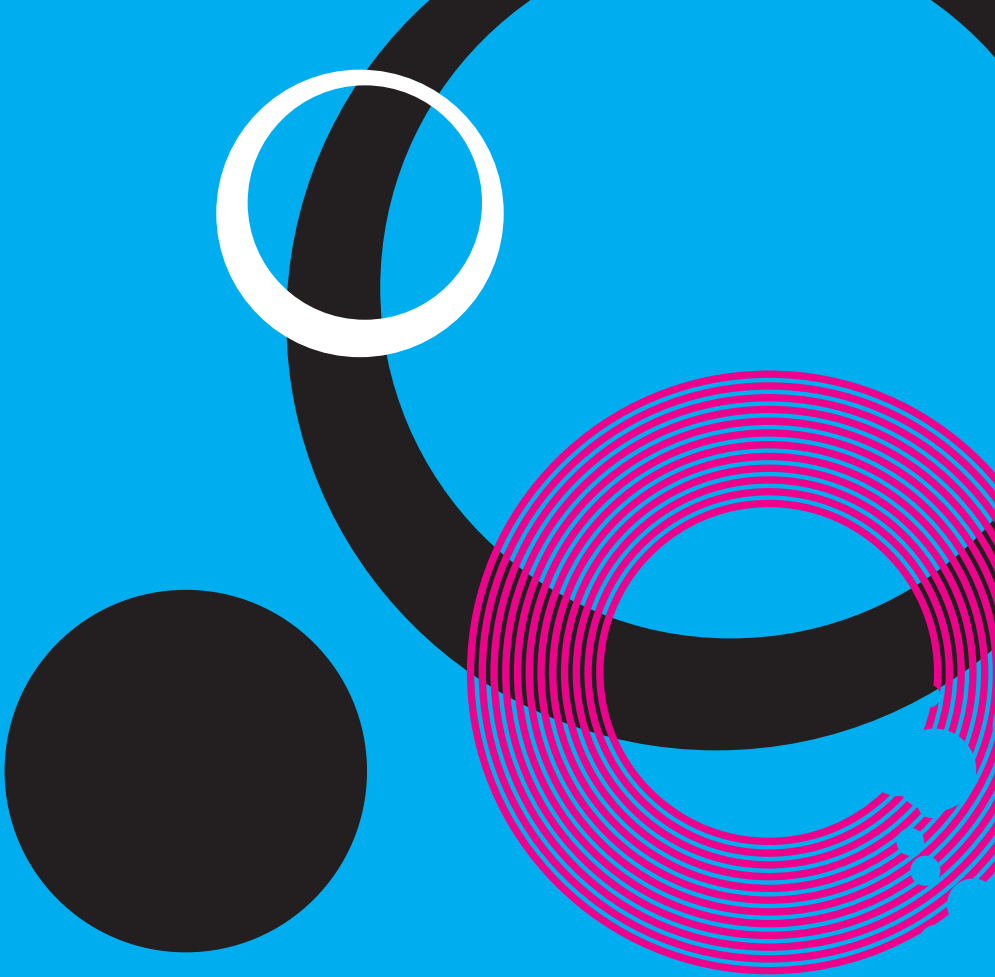
providers. There is a focus on the need for better integration of mental health services and alcohol and other drugs services, and for information sharing between services who work with clients who experience comorbidity.

- *National Amphetamine-Type Stimulant Strategy 2008 – 2011* has been developed in response to growing rates of amphetamine-type substance production and use in Australia and internationally.

The strategy includes five priority areas for work:

- Community awareness and understanding of amphetamine-type stimulant use and related problems
- The supply of amphetamine-type stimulants
- The use of amphetamine-type stimulants
- Problems associated with amphetamine-type stimulant use
- Organisational and system capacity to prevent and respond to amphetamine-type stimulant problems

The strategy identifies GLBT communities as key stakeholders who need to be engaged in capacity building work to improve prevention work and responses to amphetamine-type stimulant related problems. The need for better research on patterns of stimulant use and injecting, and how this impacts upon sexual risk behaviours within the GLBT community is also noted.



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