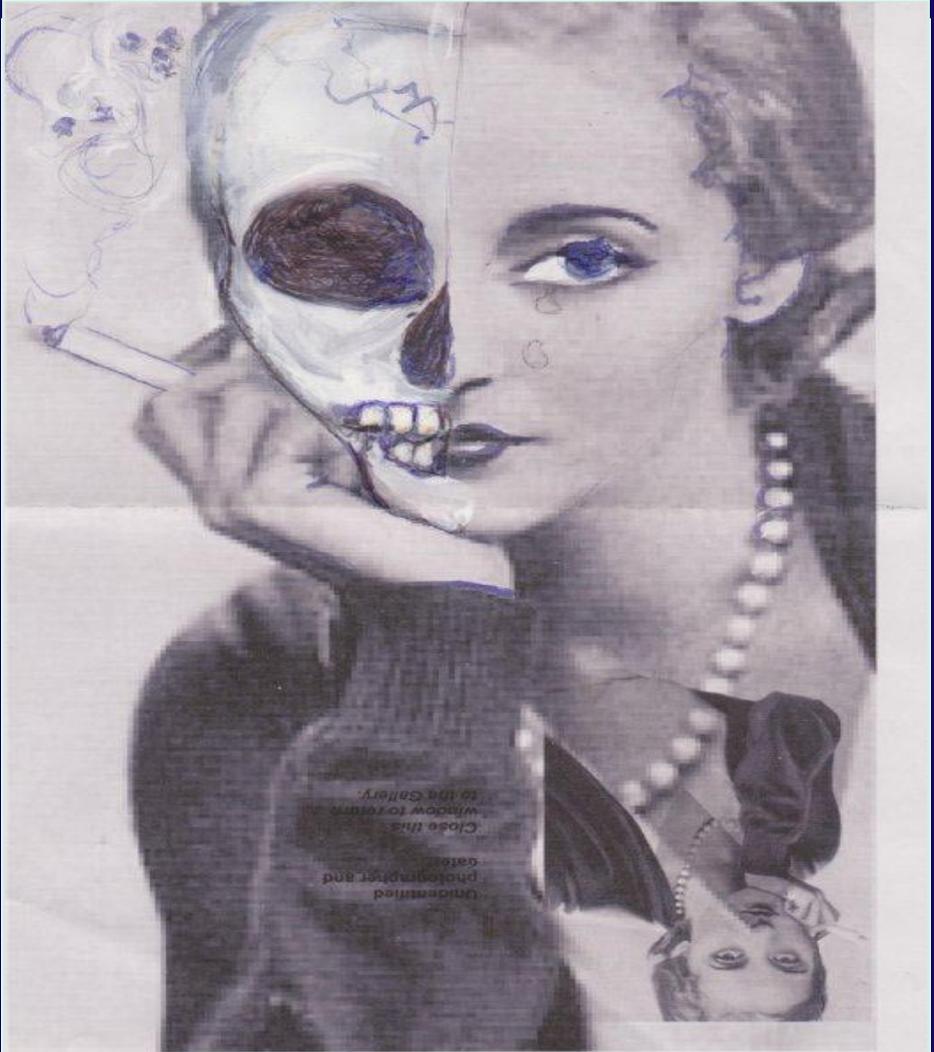


FLIP

SIDE

Association of Participating Service Users



SMOKING

NO. 28 SUMMER 2010

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An Innocent Angel

Almost every photograph of Tallulah Bankhead has her smoking a cigarette. Glossy romantic silvery black and white shots of an innocent angel with a fag in her mouth.

She was one of the first stars known for always having a cigarette in her mouth. It was like her trade-mark. She influenced hundreds of young actresses and they in turn influenced countless millions of ordinary women.

This whole early 20th century cinema era is misty with the smeary dreamy blue haze of cigarette smoke. This incredibly strong glamorisation of tobacco smoking is still effective and therefore at work today every time we look at a photograph. Greta Garbo, Marlena Dietrich, Bette Davis, all of these actresses borrowed the Tallullah look.

Tallulah Bankhead smoked more than 100 Craven A cigarettes per day. Everything for which she was loved and famous was

destroyed by her smoking addiction. She was loved for her dramatic talent, her sexy voice, her excellent comic skills, ad-libbing, wild behavior and great confidence.

Over time her cigarette smoking damaged her voice to the extent that she had to stop working as an actress in the theatre. She went on to perform on radio and was very successful for a while-but over time she lost her strength and health and began to fear leaving her own home.

She was loved for her sexy 'smokey' voice and for her sense of humour-quick clever tongue, but she lost these things eventually, as well as her health, happiness and life.

Tallullah's life really deteriorated from the time she was diagnosed with emphysema. Her 'bad girl' reputation was a like an anvil around her neck.

Ironically, she became terrified to leave her house, (agoraphobic) because she had spells where she would become very short of breath (emphysema), so she began to stay inside her home near

to her oxygen mask. She certainly wasn't 'too cool to quit', she tried desperately to give up smoking for the rest of her life but much of the damage was done. She found quitting was very hard for by then she had developed such a dreadful habit.

She died alone and weighing only 32 kilograms at age sixty two after a virus developed into double pneumonia. This is a pretty typical way for a smoker to die. She left 18 films and some wonderful stories, but the most important one may be this: if you smoke, try and stop it before it kills you.

Cecilia



Me Ciggies

I like to smoke
I know I shouldn't
To give it up
well I just couldn't
They're my pals with coffee
or after a meal
They go everywhere with me
and how good I feel
I know they are expensive
n' yeah I cough a bit
I'm a little slower walking
but someday I'll get fit
My cigs won't make me have bad health
My cigs won't take away my wealth
I can't smell smoke in my hair?
or clothes or breath or anywhere?
My fingers and teeth aren't yellow
and at least when I smoke in the street
the passersby's can look
as I enjoy my treat!

Martine



Smoking in detox

We understand that smoking kills 20,000 people a year and occupational health and safety tells us that no one at work should be forced to have second hand smoke in their lungs.

But while in rehab 12 years ago I would not be straight and sober today if I was not allowed to smoke. I would not have gone if I could not have smoked in there.

I do not mean that you can smoke inside the detox or rehab but they need to make changes and put a gazebo or area where clients can smoke away from entrances or exits and where staff are not affected by second hand smoke.

Hopefully we might get sober and straight and down the road have a look at smoking and what damage it creates to our self and our family but to get sober and straight is the overriding thing. So let's relax and have a smoke, or not. G

Recovery

On the ground was a stone,
just an ordinary looking
stone.

It had rough edges and a bit
of dirt on it.
It had patches of brown and
black colour,
with a bit of white here and
there.

It wasn't a particularly
attractive stone.
Somehow it got picked up,
it got washed and cleaned.

Then it had a big change –
it was split open.
and inside was...
a diamond,
a beautiful, crystal-clear
diamond.
Uncut and unpolished,
but a diamond nonetheless.

Just waiting to be nurtured
so it could sparkle and shine
brightly,
it is the best diamond it can
be.

Glenda P

Keep trying

I have tried numerous times to give up smoking. I am currently trying to give up right now. The first time I was on patches, but at that time I had other drug related issues, so it didn't really work. If I couldn't get any other drugs, I needed a cigarette.

Another time I tried Champix which was actually quite good until someone noticed that I was in more of a grumpy mood. I was on anti-depressants at that time which was good as I had no bad dreams or anything like that.

Currently, I am on patches again. Yesterday I had one cigarette, but today I have had at least two. I find that if you have something to do you probably won't even think about having a smoke. I don't crave for a smoke but it is what fills the time in if you don't have anything to do.

It is hard also when other smokers stand close to you and smoke, or you go to the pub and your friends head outside to have a smoke and you want to be part of the act. You get a waft of the smell and this is also when you want one.

At work we have made it if someone wants to smoke then they will have to smoke in the car park or four metres away from the front door as I am not the only one at work who is trying

to give up smoking too. One of my co-workers was on Champix and they say it worked, but times have gone by where they want to have a smoke too.

Darren

It's all about choice

There has been considerable debate over the new 'smoking ban' in residential withdrawal settings. Supporters say it could save thousands of lives and give people an opportunity to give their lungs a break at least for the 7 days of withdrawal treatment.

There is no question that the changes in policy around smoking in public places has empowered those who have wanted to quit and improved the experience of many who do not smoke in public eating, transport and other places. I am an advocate for helping people quit and am passionate about drug counsellors discussing nicotine use and strategies to cease smoking as part and parcel of AOD (alcohol and other drug) treatment. I have also been instrumental in setting up a Tobacco Free Clinic which recognises that most people need numerous attempts to quit and require good advice, general health assessment and counselling support to assist their efforts.

However, I have observed that people who smoke are increasingly stigmatised, shunned and disadvantaged in their withdrawal attempts as a result of the new smoking bans in detox. I have had a number of clients flatly refuse to go to detox for their alcohol, heroin or cannabis dependence due to the smoking bans in detox. I have also had a number of clients leave detox early because they 'couldn't cut it being smoke free'.

A lot more needs to be done to prepare clients for detox, getting them 'head ready' for the experience of being smoke free. Smoking withdrawal is significantly distressing even with nicotine replacement therapy so it is no wonder clients are finding this difficult. I have referred at least 4 clients since the ban to a withdrawal service (thankfully they are still available) who allow smoking due to the clients being unwilling to attend a smoke free withdrawal service.

The issue for me is about choice and options; it is interesting that a sector that understands the importance of ownership and motivation would force abstinence for a particular substance against the will of the client. There is a lot more work to be done in understanding the complexity of this issue and ensuring we maintain the dignity and respect of clients who feel they are not

ready to quit. Choice and control is such an important human right. As an ATOD (alcohol, tobacco and other drugs) worker I am committed to working with the client on **their agenda not mine**, to use all of my motivational interviewing skills to support change where there is ambivalence and to uphold **harm minimisation** where there is a desire to continue to use a potentially harmful substance.

Jenni Thompson

Co-ordinator ATOD Program

Knox Community Health Service

Between the cars

Between the cars
a flicked cigarette
– or fast firefly.

Darrel

I wouldn't have gone

When I went into detox, I was aware that, (coming off benzodiazepines and cannabis) I probably wasn't going to get much sleep. I knew I was going to need to smoke during the day and most likely at night too.

In the past I had been in psychiatric wards where we had to stay in our rooms overnight and of course weren't allowed to smoke inside. I snuck many a cigarette in the shower overnight with the fan on when I couldn't sleep. I didn't have any choice about being in a psych ward.

I rang the detox two or three times to find out if I could smoke there and if I could also leave my room to smoke at night time if I needed to. Each time I was reassured that I could. It was pretty simple really, I was going to give up drugs and I was very serious about it, but I wasn't going to give up cigarettes yet. If I had have been told I couldn't smoke there, I wouldn't have gone. I just wouldn't have! I'd already failed at a home detox, there wasn't anywhere else to go.

That was over five years ago. I recently celebrated six years clean. I've gotten married, had a baby and worked for the first time in twenty years. I'm happy and I contribute to society.

I still smoke, despite several attempts to give up. These days I value my health and my life too much not to keep trying to quit. But if I hadn't been able to smoke at the detox and consequently gone there who knows where I'd be now. I don't think the cigarettes would be a problem because I'd probably be dead.

Banning smoking in detoxes is a bad move. I estimate that about 80 % of residents were smokers when I was there. It's unrealistic to expect that residents won't smoke while there. So where will they smoke?

Most detoxes don't allow their residents to leave the confines of the centre. And what about during the night? Has anyone even thought this through?

By all means, do whatever is required to protect staff and other residents from passive smoking but please don't ban smoking altogether in residential withdrawal units. It is unknown how many people like myself just won't go. There are too many barriers to treatment already, don't create another one.

M

Sweet mother tobacco

In my times of darkness and pain you were there. When my entire body ached with the pains of opiate withdrawal, you were my sole comfort... See, you never witness a smoker of tobacco homeless, desperate and willing to do anything for a smoke directly as a result of their tobacco use.

However, this is a double edged sword. While it gives the consumer the ability to function whilst under its influence, at the same time, it is this that is so profoundly insidious about cigarettes.

It is a true example of ignorance at a government level; the whole notion of no tobacco in detox facilities. It is a profoundly baffling philosophy for those of us who have experienced a detox first hand.

I think of the tireless and seemingly endless years of legislation introduced by the federal government in regards to solving the problems of the Aboriginal people:

"Let's economise them!"

"Let's say sorry!"

What these dense, ignorant and always inexperienced political minds fundamentally fail to understand is that the problem is a simple one. A group of middle-class educated white men are trying to fix the problem of the

poverty stricken (and often

alcoholic), black man. The same laughable contradiction applies to the waste of time and tax payers money which is the reform to ban tobacco smoking in detoxes.

While it is not okay to smoke in detox, it is still okay to sell and profit greatly from tobacco taxes! You can buy them, just don't smoke them. ANYWHERE! Absurd isn't it?

To close with a final word, to kill the snake you cut it off at the head.

And the rest in time will follow.

Toby



a life boat

I think it's a Goddamn outrage that's what I think. I've been to many withdrawal units and smoking is an intrinsic part of stopping other drugs.

I have stopped taking illegal drugs now and have since also stopped smoking but stopping smoking at the same time as stopping heroin is just going to make the heroin withdrawal much, much worse.

When coming off substances such as alcohol and other drugs one needs to be able to do so a step at a time. Stopping smoking at the same time is just going to make it so much more difficult for people.

It's the last thing people need at such a difficult time! One more horror habit to stop. When I was detoxing I clung to smoking like a life boat.

Kelly



Detoxes & Rehabs

My name is Susan. I attended a 28 day rehab just over 3 years ago. Whilst I was not allowed to smoke in my room, I was allowed to smoke outside at the time. I understand that you are simply attempting to protect the rights of those who choose not to smoke, but perhaps there is another way, (maybe it is more expensive?).

Withdrawing from drugs was the most difficult and psychologically emotionally demanding process I have ever had to endure. I had very little left to lose and was suicidal at the time. There is no way I would have entered a rehab or detox facility if I was unable to smoke - it would have been the straw that broke the camel's back. I was struggling with a 10-year eating disorder, mental health issues and drug addiction all at the same time when I went into that rehab. How much do you think a person should have to handle?

I am just over three years clean of drugs and alcohol, and now I have my life back. I cannot imagine where I would be if the process of detoxification wasn't made as easy and client-centered as possible. Most people in the rehab (including the nurses and other staff), smoked.

We have had this same argument around smoking and psychiatric units. Maybe service providers and policy makers could ask the clients what they think of this idea first?

Withdrawal from smoking increases insomnia, anxiety and depression; these are some of the exact symptoms people who are in withdrawal are already struggling to deal with. Would a reasonable person do this to their son or daughter when they are trying to do their best to deal with their problems?

Then there will be those that such measures as smoking bans keep out of detoxes and rehabs. It is the wider community who will be paying for this consequence by, overdoses, increased spread of blood borne viruses. and increased crime. As a result of increased crime, more money will need to be invested in the criminal justice system.

Why not spend this money on creating specialised non-smoking detoxes and rehabs for those wanting to give up tobacco along with alcohol and other drugs. This is more preferable than limiting the choices for those who already have so few options.

Hello my name is Nicotine

You might know me well, I'm more than I seem. I'll be your best friend through stresses and doubts, then I'll never leave your side, even when I'm put out.

I'll make you cough and smelly too, I'm good at that, it's what I do.

And once we've met, in my smoke you'll delight. But try to give me up and you may get a fright.

For I am much stronger than heroin or pills. Because many more people, I manage to kill.

Not only that, the earth I destroy, this is my destiny, it's what I enjoy.

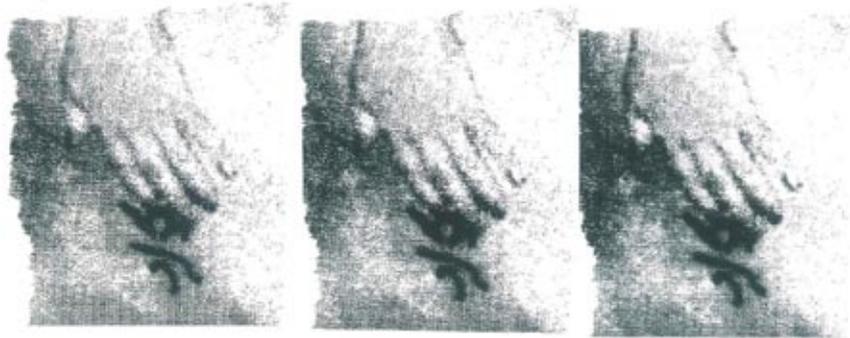
I need lots of your cash if you want me around, but you won't care, your addiction is sound.

So come and join me in my campaign to destroy your wellbeing through illness and pain

So your health and your money, I can slowly drain.

And if you give me up, I hope we meet again.

Fiona



The Association of Participating Service Users (APSU) is a service area of the Self Help Addiction Resource Centre (SHARC)

