

FLIPSIDE

The Association of Participating Service Users



STIGMA

No. 43 Autumn 2017

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Art:

Front cover: St Kilda street art
Back cover: Livesofsubstance.org
Page 5: Watcher One by Brendan
Page 9: Stigmus by Russell Chilcott
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Editorial

Sociologist Erving Goffman defined stigma as a deeply discrediting attribute, which disqualifies the individual from full social acceptance. This entails that those who are stigmatised are not being seen as fully human, which tacitly justifies discriminative behaviour.

In Goffman's terms, stigma around drug use falls in the category of "blemishes of individual character". In other words, drug use is seen as a consequence of a character weakness and a personal failure to comply with the established social norms.

Stigma overshadows the person and an individual's entire identity gets reduced to the stigmatised attribute. Just like a Jew in Nazi Germany was reduced to being a dehumanised member of his category, so is a drug user primarily seen as a drug user, and not as a mother, brother, son, an intelligent person, talented musician, good friend, spiritual person or anything else that makes up our personal identities. The events in the Philippines under President Duterte are testimony that this comparison is not exaggerated. Over 7,000 people have been murdered in the Philippines since June 2016, their only guilt being drug use, and this massacre still continues.

Fortunately things are not as grim in Australia. Significant progress has been made since the AIDS epidemic in the 1980's to shift the view of drug use from a moral failure to a health issue. However, the moral failure perspective is still strong and our war on drugs approach supports such a view. In a war on drugs context, the war on stigma can make only a limited progress.

Stigma is real. Stigma kills. Stigma prevents people from getting a job, education or housing. Stigma takes many forms, from criminal records checks to suspicious glances while you're waiting for methadone in a pharmacy. It's in the AOD professionals' assumption that you should settle for the dole and a commission housing flat as the highest possible achievement, and it's in the media images of ice users before and after.

Maybe "thou shalt love thy neighbour as thyself" is too much to ask, but how about "thou shalt respect thy neighbour as thyself"? Because it's as simple as that: give the same respect that you expect.

Our contributors have generously embraced the hard task of writing about their experiences with stigma. This was a particularly difficult topic to write about, so they deserve a special thank you.

Edita

The war on drugs

According to *The Age* (April 3, 2016), 'Australia spends nearly \$2 billion each year addressing drug issues'. Nearly two-thirds of this is spent on law enforcement, with minuscule amounts directed to prevention, treatment and harm reduction. Despite billions of dollars being spent to halt drug abuse, they are cheaper, purer and in greater supply than ever before'. As Albert Einstein said, 'The definition of insanity is doing something over and over again and expecting a different result'. It almost defies belief that this insanity has been going on for the past 50 years, since the disgraced US President, Richard Nixon, proclaimed his infamous 'war on drugs', the true purpose of which was to create a political diversion by creating the perception of fear and uncertainty among the U.S. population. 'Did we know we were lying about the drugs? Of course we did!' admitted Nixon's senior adviser, John Erlichman. But the lie had already been enthusiastically swallowed by governments around the world, including ours, for the same self-serving political reasons that it continues to provide for government policy today. It's a lot easier to act the tough guy in politics than to do the hard yards and commit to the funding of effective education and health care support which a decriminalisation program requires.

A key policy of the 'war' has been prohibiting the use of drugs by making their possession for personal use a crime. It is the prosecution of this futile, flawed policy that requires billions of dollars to be spent annually on law enforcement resources, including the judicial system, police and prisons. But the price the victims of this system pay cannot simply be measured in monetary terms, significant as these may be. It is a price they will continue to pay for the rest of their lives. It is, of course, related to the stigma associated with having a criminal record, in addition to the stigma associated with drug use.

The shame that many people feel because of the stigma associated with drug use prevents a significant number from seeking help. The added fear of being prosecuted and saddled with a criminal record also acts as a powerful deterrent when it comes to seeking aid. Apart from the actual restrictions regarding job possibilities such a record imposes, the stigma surrounding it can significantly affect other employment opportunities and workplace relationships. The stigma of a criminal record can also have a profound effect on a person's social life and be a significant obstacle to the development of personal relationships as well.

It has been fifteen years since Portugal decriminalised drug use with very positive results. Spain, Italy, The Netherlands, Switzerland, Germany, Mexico, Columbia and Peru are among a growing number of countries that have followed suit. What will Australia do? Probably nothing while the current bunch of troglodytes are in control in Canberra. Or maybe we'll get yet another 'Enquiry', which will end up tossed in the 'too hard' rubbish bin, like all the others.

Alex A.

The gaps in my resume need some explaining...

by Brendan

It's not that I've not been working, but AA doesn't give references
I could tell you that I've been travelling or cared for a sick relative
But that would be a lie and that's not my preference
Still I've got a great personality; in fact it's quite addictive

It should be my job as the qualifications I have, the experience I possess
I just need someone to believe in me, a chance to turn things around
But if I tell you I have problems that my life's been a mess
Will you reach out to catch me, to stop me from hitting the ground?

I doubt it, as it hasn't happened before and I can't risk it now, but I do
You smile, nervously and say 'I don't mind a drink myself'
But addiction to meth aint like having the flu
So you show me the door and I return back to my shelf

You think I don't know that I have a problem?
That it takes work to stay on the narrow remaining straight?
I've got a lifetime of stuff I can share, you should see my album
But the understanding isn't there and before it's even begun it is all too late



Chemists

Stigma...What does this word mean to me?? I googled it. I was particularly interested to read the definition which relates to Christ and the physical marks left permanently on his body after the Crucifixion.

I have my scars too... hidden under my three-quarter length sleeves

As a former heroin user I know stigma well. I used secretly for many years, holding down jobs and raising my son solo, whilst listening to everyday ignorant people blame “drug addicts” for every vandalism, theft, bashing... But what was surprising was that in recovery I experienced stigma in wholly new ways.

How naive I was to think I would be supported in a pharmacy program. They are in fact meant to be part of your “care” team and work in conjunction with your doctor. Mwahahaha! It is a rare occurrence in my experience, and I have many years of chemists up my three-quarter sleeve. I am on a pharmacotherapy program. I take suboxone. I enter through a different door to regular customers.

People remain hidden because stigma is not addressed, because of shame. Health deteriorates because of disgrace and lives are lost. People die! Someone’s mother, brother, sister, son, daughter, uncle, auntie.

There are punitive rules and laws around the program. If you don’t come for 3 days you need another script. But you can’t just get another doctor. Why not? Because there aren’t enough prescribing doctors. Why? Because of stigma and stereotypes perpetrated by the media where complex conditions are made simple.

STIGMA. Chemists that want to look under your tongue. Looking at you sideways if you pick up a product. All of them creating separate spaces for the dishonoured to gather. Signing papers, prices ranging from \$7 a day to \$100 a month. Pharmacists boasting of how the junkies bought them their second home or a new boat. Making it impossible for those who are homeless or flat broke. Where does this lead? What happens? You score again, you fuck up again, the shame creeps in, the eternal cycle continues. Disgrace.



And this is when you are trying to transition back into a more stable and functional life.

When people are in their early days of trying to stop, and are only new to the chemist program it can be a total mind fuck and humiliating experience to be judged or penalised because you’re running a bit late or are \$2 short of a payment. If you are lucky enough to get a job, you have to deal with the closing times that don’t take into account the travel time from your job. Coming up with excuses why you MUST finish at 4, not being able to tell people why.

STIGMA. It keeps you connected to the old world in ways you never expected. Guilty until proven innocent.

I make NO apologies for who I was, but I can’t fully embrace who I might be whilst these issues remain unaddressed. Don’t make it feel like a privilege. You can’t have it both ways, society. When in the past I have asked greedy chemists am I paying for days or doses, because you can’t have it both ways. And if you’re clever you can pick up 2 or 3 days a week and pay less, all within the legal framework they created.

You will be punished if you change chemists. It’s almost like a job interview - new place, new rules. And a bunch of different chemists. Some can’t hide their distaste.

The other day in my chemist I saw a pamphlet for people addicted to pain killers with all the support and sympathy the street addict doesn’t get. Because these were prescribed by a doctor legitimately, therefore their pain is in a different category to ours. I wish I had that pamphlet with me so I could quote from it. It was glossy and coloured – expensive. The overriding tone was one of gentle sympathy – that if you or a family member found themselves “accidentally” addicted to pain killers not to worry, it wasn’t your fault, no need to hide or feel ashamed, because help is out there for you and your family. I felt really angry when I read this. As if anyone gets intentionally addicted.

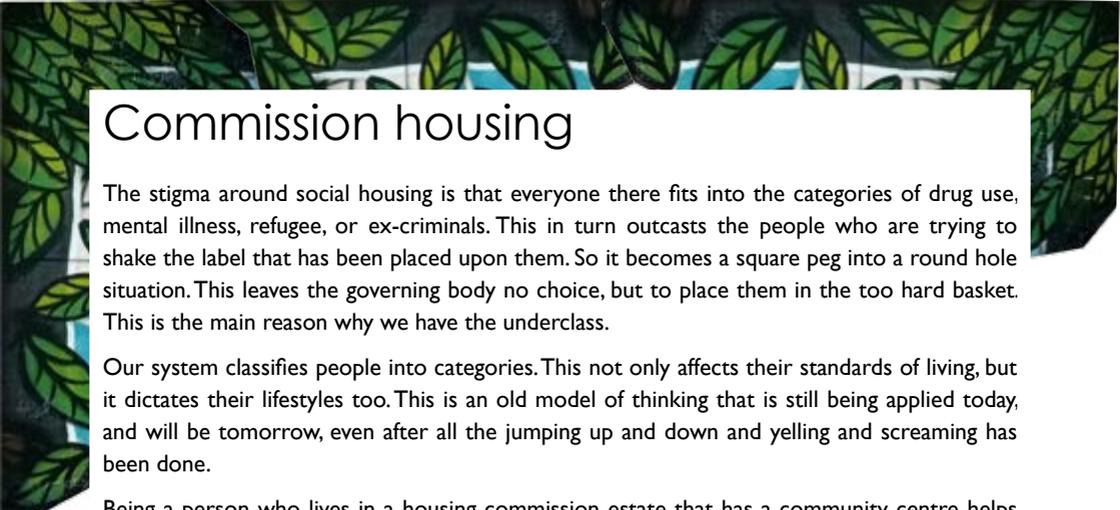
I don’t necessarily want to sound angry. But I am. I get really angry at how defeated all this can make you feel if you are having a down day. Trying to maintain everything in the face of judgement.

Sometimes I could scream YOU KNOW NOTHING ABOUT ME OR MY LIFE. If I told someone I was a victim of incest or domestic violence which led me to dull my pain through heroin use would they treat me any better? Any differently?

When your doctor tries to find you a chemist near you they always say something like “yes we have one spot vacant”. LUCKY ME! Like I have won a prize. Like I beat the guy who had no shoes when he wanted to join your program. Like I should be happy you take \$100 a month from me to keep me waiting hidden and under surveillance. Like I want this degradation.

The great hypocrisy! The great lie! Somehow society will like you better clean. Mwahahahahahahaha!

DW



Commission housing

The stigma around social housing is that everyone there fits into the categories of drug use, mental illness, refugee, or ex-criminals. This in turn outcasts the people who are trying to shake the label that has been placed upon them. So it becomes a square peg into a round hole situation. This leaves the governing body no choice, but to place them in the too hard basket. This is the main reason why we have the underclass.

Our system classifies people into categories. This not only affects their standards of living, but it dictates their lifestyles too. This is an old model of thinking that is still being applied today, and will be tomorrow, even after all the jumping up and down and yelling and screaming has been done.

Being a person who lives in a housing commission estate that has a community centre helps get a better understanding of others. Community centre provides for us programs that are structured to suit each person's needs, such as drug and alcohol courses and counselling, computer courses, family planning, relationship building, cooking, budgeting, basic literacy courses and sport. This helps a person have a better understanding of battles their neighbours have gone through to become a member of the community, let alone in trying to become an Australian citizen.

I know I am one of the above mentioned people. It's not about being type cast into a said category that society says "he, you or I must fit into". This is the easy way out for a lot of people that I have come into contact with over my 45 odd years of living in and around social housing. Seeing and listening to what other people have done and are doing with their predicament that stereotyping has placed upon them, regardless of what the government of the time is placing upon them. For it's not the people that count, but just the numbers. This issue has arisen many a times in the past and no doubt will again, because it is a social issue that cannot be dealt with by throwing money at it.

Many have tried to fix this social issue with a band-aid and a promise that it will never happen again. I know that it cannot be fixed by making 'one area, one race' and another elsewhere, for this has also been tried before and failed at every attempt. And every attempted fix will fail again in the future if it is not addressed in the right way.

I know that this current government wants to privatise the commission housing, as doing that would bring the profit, but the people that need the help would not be getting it. For all of the land that these estates are on has increased fifty to eighty percent in recent years and that is why our premier wants the private sector to be the landlords, just like in the project that was announced for the Prahran estate.

I do not have all of the answers. Maybe a coalition of people from these estates could have the answers to help provide a working solution to this ever expanding problem that is biting at the heels of this and other governments.

Anonymous

APSU believes that people who use alcohol and other drug treatment services are the reason the system exists; their needs, strengths and expertise should drive the system. APSU is run by service users for service users and has an active member base. We invite you to join us in having a say. APSU membership is free, confidential and open to anyone interested in voicing their opinions and ideas on the issues facing service users today. We need your help to give us all a fair go. To become a member please fill out the form below and post to: **140 Grange Road, Carnegie VIC 3163** or fax to: **03 9572 3498** or go to: www.apsuonline.org.au to register online.

MEMBERSHIP APPLICATION

I wish to become a member of APSU and I would like to:

- Receive the quarterly APSU FLIPSIDE magazine
 Be sent information on how to become involved

I am a: Service user Service provider Family member Other

How did you find out about APSU? _____

Language spoken at home: _____

Cultural identity: _____

Age: 16-25 25-35 36-45 46-65 over 65

Other issues: Physical disability Mental health Visual Hearing
 Speech Acquired brain injury

Name: _____

Address: _____

City/Suburb: _____ Postcode: _____

Phone: _____ Mobile: _____

Email: _____

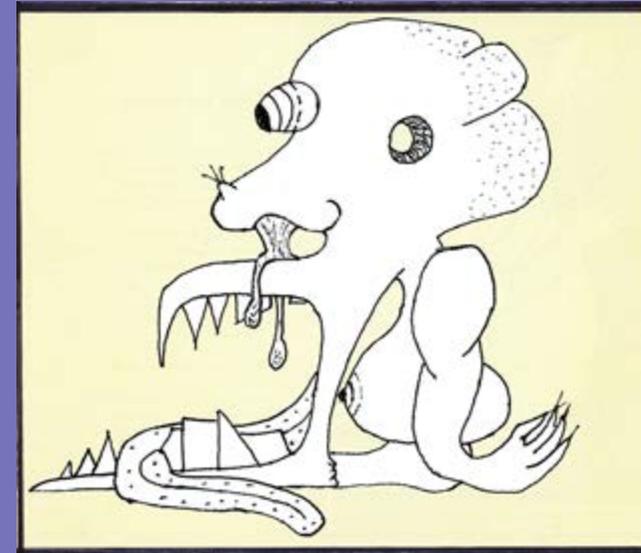
Signature: _____ Date: _____

Wallowing in the lowest depths and up to the highest heights, there travels a miserable monster with implements of degradation and neglect, whom everyone must wish dead and be distressed to see alive.

This is Stigmus.

He is only visible to me. I think he chooses not to be apparent to others but he is the tool of many.

I can't recall exactly when he came into my life. He may have been around for much of the time but for the most part he went un-noticed. I had a very busy life with a hectic schedule. Scoring, using and resting left little time to focus on anything else.



There came a day when I decided to 'down tools' and try and better myself. It was in that moment of partial clarity that the extent of his influence gripped me. It was as though the bastard had moved in! I couldn't go anywhere without him, we had a shared life. Anytime I tried to make good he was 'the elephant in the room' and fucked it up. Applying for a job, visiting family and friends, simple things weren't anymore. He constantly came between me and whatever.

In my quest for wellness and during the re-hash of my social life, I eventually met a variety of folk that recognised my predicament and side stepped him to talk to me. Some spoke of their own experiences with a similar monster, others bore witness to the devastation he laid and were speaking out.

I am comforted in my new life alongside such courageous people that he is outnumbered as we expose him for what he is and put the squeeze on.

He is still around, but his power is weakening and soon his name will be lost on me.

Russell Chilcott

Scars

Stigma was a mark branded on a slave or criminal but now is regarded as a mark of disgrace associated with a particular circumstance, quality, or reputation of a person. Stigma is also the part of a pistil (ovary surface of a plant) that receives the pollen during pollination or insemination.

All of these definitions are relevant to me when discussing alcohol or other drug use.

My story began like so many others. I came from a lower middle class family and had aspirational and intelligent high school educated parents who wanted their kids to get a better education than they did. The schools my parents sent me to were associated with my dad's Catholic association. So, I copped a hammering from some neighbourhood kids who had marked me as 'different' and worthy of ridicule because of the uniform I wore. My experience of stigma had begun, even though I wasn't aware of it.

Responding with violence to stigma and ridicule didn't work. I just got beaten up. Being aloof didn't work. I still got beaten up. As kids, we don't understand stigma or exclusion, we understand feeling sad and hurt. My response was to allow my hurt to manifest into petty crime such as violence, theft, vandalising and graffiti as well as self-harm. Now I had the stigma of a trouble maker in my family and in my neighbourhood. My dad's ferocious response to my troubled relationship with the world led me to avoid being near him or even asking other family members for advice and support. I hung out at my friends' houses, mostly, which undoubtedly unsettled their parents.



Before I turned 10 I was physically and sexually abused at one of the Catholic schools I attended. My behaviour had me separated from my peers and left me vulnerable to predators. There was no-one I trusted enough to share this extra burden of humiliation. My life had turned from what I thought was not so

bad, really, into some grubby, corrupt, brutal, barbaric pit of shit. I had not planned to be attractive to old men who should've been my keepers. I wasn't emotionally or physically strong enough to protect myself and no-one else put their hand up to protect me, maybe because no-one knew, cared, or would have believed me. By the time I reached my teens I was marked and scarred by other peoples' opinions. That I had the odd black eye or swollen face didn't seem to concern anyone, except my mum. She had so much on her plate with a truck-load of other kids that she didn't need the aggravation of my troubles. It was best that I kept out of the way and kept those disgraceful parts of my person pretty much a secret

By the time I became a teenager I was pretty emotionally knackered. I had no moral compass. The majority of adults I knew were unreliable, hypocritical or predatory. My response was to drink alcohol until nothing mattered. We drinkers and drug takers seem to join others with the similar interests, so, by the middle teenage years my peer group was mainly focused on risk-taking activities involving constant use of booze, pills and powders, driving other peoples' cars as fast as possible, having sex as often as possible, seeing live music and going to dance clubs to sell amphetamines and barbiturates.



After some legal issues, my probation officer (a Catholic priest) spent our first session telling me about how my life was a disgrace and how my drug and alcohol use and criminal activity would haunt me and affect my future and my family. Our next few sessions involved him asking about my sexual activity and him playing with himself at his desk. I felt like I must have had a sign around my neck reading, "This guy's so fucked up that you can do what you like" so that those responsible for my welfare didn't need to care. I had contact with the Children's and the Magistrates Court by the time I turned 18. Court appearances were like a badge of honour. The track marks on my arm were my medals.

I accepted discriminatory behaviour because I thought I deserved it.

My dad's funeral was on a rainy December afternoon when I was still 18. My dad and I never reconciled but I was really sad for my mum. I had several siblings but we had almost no contact and didn't communicate. My companions comforted me. The armed robbers, the drug dealers, my dance club and drug using buddies. An associate came along to offer support and showed me his stolen police badge and revolver, and as weird as this sounds,

he thought it would comfort me (and I found out a few days later that his landlord's body was in the boot of his car). These were my friends and they were loyal to me. No-one else was, understandably.

At that time, I couldn't find any reason to limit or address my drug use. Over the years I've had many jobs and way too many relationships. I've been sacked from jobs I've been good at for being a drug user, not because I'm crap at the job, but because all drug users are 'lying, thieving junkies' and are 'a danger to workplace safety and security'. I've had jobs where my drug use has been a secret and I've had to listen to employers and co-workers discussing sending all 'drunks' and 'addicts' to either Tasmania or to a life of hard labour. This didn't seem to be the place to espouse the complexity of human life or to discuss compassion for human frailties, not that I was too au fait with those concepts at the time. Intimate



relationships were good for a while. I was a good man, loyal to my 'friends', but I was an addict and there was never too much of a good thing. Just like drugs, lovers kept popping up at unexpected times and I found it too hard to say no.

I had a few cracks at abstinence over the years and made steps forward but relapse interfered with the progress. I accepted discriminatory behaviour because I thought I deserved it. I have been thrown out of doctors' rooms, been fired from jobs, had a business partnership dissolved, been divorced, ejected from a yacht club etc etc. I will probably always be one of those people 'known to police'.

The road to eliminating stigma from my life continues even after more than 18 years of abstaining from drug use or the associated criminality. I'm closer to my biological family but the scars of my alcohol and drug use are still visible to me and to them and our relationships are more cordial than anything else.

Finally, allowing myself to be pollinated with a new set of values was, and is, a struggle. Looking for and finding some kind of self-love and forgiveness is the blossom that can make your life flower. I chose commitment to change and let love in. I'm working on forgiveness! I now own a house, have a stable relationship and a magnificent child and a dog. I still have to heal the remaining marks that stigma has left. The past made me the man that I am, but a strong future is up to me.

NJ

Stigma the enigma

by V.R.

approaches me
stigma the enigma
asks me to tea
'why not' i say
i'll share a cuppa with thee

so on a bright sunny day
at the curb of a quiet village
i sit with stigma
the enigma, and drink tea
and talk of everything
without restraint

as I walk away
when our time is done
i don't know i'm different
I don't know I'm stained
with the reproach of ignorance
by a slap on the face

for deep down inside of me
clutching onto my soul
now lives a parasite
toxic and old
hijacking my words
and changing my code

and as i go forward, now
mindless, i'm seen
but quickly avoided
humoured; never believed
forgotten, told that i'm bad
from friends i once had

i cower, alone
in my own little world
not sure what i've done
but of one thing i'm sure
guilty I must be,
or they wouldn't hate me

turning to loathe me-myself
i scrape and i scour
looking for something inside
to devour
'why was i born?'
will I recover?

eternal I'm like this
lost to the day
when blindly i encountered
stigma one day

and innocently agreed
to have some tea

how would I know, that fiend
would trick me, and steal
my goodness from me?
bury itself in the folds
of my insides,
the velvet where I bleed?

and grow there
and fester
and turn me to worms
and blame me, like
somehow the idea
was mine?

no, I've found you
and noted that you,
your lies
and your loathing,
have an undying need
for supremacy

and the thing that you fed on
more than anything else
was weakness,
and belief
that the loss i encountered
was all my own fault

you counted on me
never finding my own;
the answer i needed
to let you go,
disguising yourself
as me all along

but to each comes the day
when truth is revealed
when you weren't expecting
my strength i would feel
and there, now you are gone
lost to all hell

i hope that you die there
but never before
you wear all the
toxic pain that i bore
cause at the end of the day
my friend, it's all yours.



Introducing Livesofsubstance.org

A new website that aims to challenge addiction stigma

In 2014 Curtin University's Social Studies of Addiction Concepts (SSAC) research team began work on an innovative project that would underpin Australia's first dedicated website presenting carefully researched personal stories of alcohol or other drug addiction, dependence or habit – www.livesofsubstance.org.

Why this website now? The media has long been filled with stories of drug use and addiction, but these stories often rely on stereotypes and offer few clues about the range of people affected by addiction issues, the variety of experiences people have and the many ways they cope and even thrive. Livesofsubstance.org aims to fill in the many gaps in public discussions of addiction, to counter stigmatising misconceptions, and to promote understanding and more effective community responses.

Drawing on in-depth qualitative interviews, the website presents detailed life stories of people who consider themselves to have an addiction, dependence or drug habit. Also presented are key themes found in the interviews, including how people cope with the stigma associated with addiction and drug use. As these quotes illustrate, stigma has a big impact on people's daily lives, shaping their experience of healthcare and their relationships with family, friends and work colleagues:

"They have got their own view and told me not to go to their house and things like that. It really hurt me. It really hurt me. After that, all I wanted to do was use more."

"I don't know if things have changed over the years but I feel like people in organisations that work with drug users now are encouraged to be professional, so it's sort of 'us' and 'them'. Like when I used to work in outreach programs and NSPs I don't remember much distinction being made between clients of the program and people that worked at the program. But now there's a complete gulf, they are not the same kind of people at all. So yeah, I don't like standing behind the bullet-proof glass and being the client, and being seen as a drug user and that's all there is to me, you know. And that's how I'm being dealt with."

"When I was pregnant, for instance, it was suggested that I stay on methadone because it was better for the baby, so I did. So I was doing what I was medically told to do, but then in the hospital, my baby was treated really differently. All the other mothers had their information sheets with them on the bed and mine were kept behind the counter, and groups of nurses and students would be brought through and they'd be 'Here's our little narcotic abstinence syndrome baby', like they were convinced he was going through withdrawals and he wasn't at all. He was the most healthy baby you could ever see in your life, you know."

"Talking to mum, she was like, 'Oh, you know, I can see that you are doing your thing but I still think it's a very bad thing. And I've seen all those people that started with a joint and ended up doing crack and blah, blah, blah.' And, you know, girls that came to lecture at her school who started with a joint and now they're prostitutes and selling themselves. Yeah, well I'm not. I started with a joint 15 years ago and I've got a full-time job. And I've got my degree, and I'm studying again. And, you know, I've got my relationship and everything's fine. But it's still very hard to convince them to see that side."

Check out Livesofsubstance.org to discover other experiences of stigma and discrimination, how people challenge stigma in their daily lives and much more.

In memoriam: Colin Hodder

Only today, when I'm writing this, I found out that Colin died four years ago.

Colin attended APSU's Peer Helper Training in 2012. He was in early recovery. He had only stopped using drugs few months before the training. He was feeling strong and was really eager to make it work. He came to his assessment early and he came early to every training session. He was soaking up information like a sponge. His favourite was the session on advocacy. After that session he told me "this is what I want to do", and his eyes were lit with passion.

After the training, Colin did his 12 hours of practical peer work in SHARC's Residential Support Service, working with young people. He also participated in a committee on gender sensitive practices in the AOD field. I tried to contact him a few times after that, but was unsuccessful, so I eventually gave up. Only today, on a cloudy February day, events led me to do an internet search and find Colin's Facebook page. That's how I found out that he passed away only 8 months after the training.

Colin was very clever. When talking to him, you could feel that your words were landing just at the right place. He was very sweet. He was listening to others with complete openness and interest. It felt like he had enough understanding for the entire world. He was sad. I don't know what Colin was sad about, but there was sadness about him, like there can be about some people who have a big heart and a lot of love, but have also felt the rough side of life.

Colin's existence touched me for a brief time, but in a profoundly human way. I thought he'd make it. I thought I had a great future advocate in front of me. And I still think that he would have had a great future, had he been around a little longer.

I wonder if I could have done something; if I could have reached out, or said something direct and personal, something strong enough to keep him here, to make his light shine longer and touch other souls.

And it angers me that politicians, law makers and the broader public don't see what I see. It angers me that people are placed in this broad category of "drug users" or "addicts", and the drug becomes bigger than the person. Because it is people we are talking about. Some beautiful people like Colin. And "drug user" or "addict" does not reflect even remotely everything he was.



Edita

LIVES of substance

Australia's first dedicated website
presenting carefully researched personal
experiences of alcohol or other drug
addiction, dependence or habit.

livesofsubstance.org

🐦 @LivesSubstance | Contact SSAC@curtin.edu.au

*This initiative is very worthwhile and
overdue. I am all in favour of anything that
de-mystifies drug users, and admits that
they are not really 'them' but 'us'.*

Kate Holden,
author of *In My Skin*



140 Grange Road, Carnegie VIC 3163
Ph: 03 9573 1736 Fax: 03 9572 3488
Email: apsu@sharc.org.au
www.apsuonline.org.au



Self-Help Addiction Resources Centre

APSU is a service of sharc