

forestownick-monteinsbetto

Episode 3 - What Workers Say: Health care professionals engaging gay and bisexual men using crystal for sex

VOICEOVER

Crystal Clear: Negotiating Pleasures and Risk around Sex on Crystal.

This podcast series is part of the Crystal Pleasures and Sex between Men project.

Please assess your own capacity to listen, in case this podcast is triggering or upsetting to you.

This podcast is recorded on Bedegal Land.

The host of this podcast series is Tobin Saunders. Tobin is a proud, gay, HIV-positive health-educator and peer-activist. He -respected agitator for social change.

TOBIN

dgement about crystal methamphetamine.

Crystal is commonly used in combination with sex among gay and bisexual men in Australia.

Today we will be talking to sexual health clinicians, harm reduction practitioners and those working in the alcohol and other drugs treatment sectors. The Crystal Pleasures and Sex between Men project identified an opportunity for workforce development between these three sectors.

We have guests on this podcast from each of these areas, services to find out the strengths and gaps in each area, and how they think they can work better

CAROL

One needs to, sort of, look at what the situation is in different places in Australia. One thing that I have actually found in my research basically,

perhaps we could talk to them about PrEP use and STI care. So that they are able to give those services to men who do visit them.

I can talk about clinical settings. One of the things that we can use, and we might think about developing in collaboration with people in the future, is, for example, tools like including a simple set of questions to adopt to solicit information in clinical settings about chemsex, for example. That can be actually used in various clinical settings including drug and alcohol, including GP practices.

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TOBIN

Like sexual health, the harm reduction sector is a crucial service in reducing the risks associated with crystal use especially for gay and bisexual men who choose to inject. But how does harm reduction fit in with sexual health and AOD treatment services?

Next we will hear from an interview with George, a 38 year old man in Melbourne.

EXCERPT

I think health promotion comes into play a lot in terms of creating a dialogue. Bgecwug vj g rguu ku talked about, the less context there is within our community and within communities where men have sex with men. We need targeted advertising and targeted health promotion. I also want to o cmg uwtg vj cvvj gtg u o guuci kpi ct wpf. kh wctg uxtwi i nkpi . yg cnigcf mp y vj cv wctg wukpi kv. Lkmg vj cvu e o o p mp y ngf i g p y Y g cnigcf j cxg uxckukeu cpf f cxc v mp y vj cvku already happening. S h t i f u ucmg. xcmmcd wkv! Bgecwug y g f p vxcmmgp wi j cd wkv hggnet gcvkpi rr twwpkkgu h t r g r ng v dg cdng v uc . xg i vc r t dngo t lwuvycpv to have c ej cvcd wkv. E

And I guess that could be sensitive too, because you have confidentiality and you have clients that may be needing to share their story over and over again as they get support from different agencies?

GARETH

Yes sure, nobody wants to repeat their story to 6 or 7 different people. So those kind of warm handovers are always done with permission of the clients. And most of the time, people agree to

over and over again.

TOBIN

So Bram really, the sectors are not as siloed as many of us might be led to believe?

BRAM

Not in my view, no.

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