Introduction

Growing up in Los Angeles, I was exposed to a lot at a very young age. I had to grow up fast. I was not exposed to some things first hand, but a lot of what I was exposed to was because I was constantly surrounded by older people and social activists. I learned a lot growing up because of where I grew up. Living in L.A., I am surrounded by people in many different situations, financially and mentally. L.A. is definitely a melting pot, and I'm proud to have grown up with such diversity.

This past summer, I participated in an internship at the Fashion Institute of Design and Manufacturing (FIDM) in East L.A. It is really dangerous for a female to walk around East L.A. at night by herself. I've learned to be smart regarding my surroundings and to be aware of what is around me in order to be safe. Within the past year, two of my good friends were held at gunpoint in the L.A. area; the guys were just walking outside their homes and were robbed. Although living in L.A. can be dangerous, I cannot live in fear; I choose to make it a better place, even with the smallest acts.

People who want to change the world inspire me. I want to have a positive impact on the people who live in L.A. I want to make change. I want to do art, not just for the sole purpose of making myself happy, but for the purpose of making an impact on others. I chose to study a subject that the average person does not think about on a daily basis but is a huge issue facing our world today. Promoting awareness and educating people about heroin use and the spread of HIV/AIDS is a huge concern for society. A lot of people subconsciously understand heroin use and HIV/AIDS is a problem, but they do not act on the problem. People might think that HIV/AIDS is mostly in Africa, and since they never see heroin addicts, they feel it should not concern them. Both heroin use and HIV/AIDS are so prevalent, yet people cannot see what is going on around them. Getting addicted to heroin and getting HIV/AIDS can happen to anyone.

A huge problem with heroin use is that it can lead to getting HIV/AIDS. Heroin is highly addictive and can lead to HIV/AIDS, but with proper prevention, treatment, research and awareness education, the world can stop the HIV/AIDS epidemic.

Background

Where does heroin come from?

Heroin was derived from morphine in 1874 ("Heroin Overview: Origin and History" 1). In 1898, the Bayer pharmaceutical company of Germany first marketed heroin as a tuberculosis treatment and a substitute for those addicted to morphine (*The Truth about Heroin* 1):

There have been at least two major heroin epidemics in the United States. The first one began after World War II and the second began in the late 1960s. During the first epidemic, the highest incidence of use occurred in the late 1940s and early 1950s; during the second, the highest incidence occurred between 1971 and 1977... At the time of the second epidemic, heroin use was prevalent among enlisted men serving in Vietnam during the Vietnam War. From 1969 to 1971, opiates were cheaply available in that country. Because most of the enlisted men were 18-20 years old and not allowed to buy liquor on the base, they may have had an added incentive to try heroin as an available alternative. The most common way the enlisted men used heroin was by snorting it or mixing it with tobacco or marijuana and smoking it." ("Heroin Overview: Origin and History" 1)

In the 1990s, the death rate of heroin addicts was 20 times higher than the rest of the population (*The Truth about Heroin* 1). Heroin is usually "sold in a white or brownish powder form or as a black sticky substance known as 'black tar' heroin" ("Heroin Overview: Origin and History" 1). "Heroin found on the streets is usually mixed with other drugs or substances such as sugar, starch, powdered milk, talc, baking soda, caffeine, cocaine, or quinine" ("Heroin Overview: Origin and History" 1).

How does the government respond to heroin addiction?

Heroin addiction first became a serious problem in the U.S., and so the government had to respond. In the late 19th century, Great Britain and Germany had already created laws to control dangerous drugs (Scott 1). Under the U.S. Constitution, only individual states could regulate medicine and drugs (Scott 1). In the late 19th century, some states enacted laws restricting morphine and cocaine – only physicians could prescribe the drugs (Scott 1). However, people could still obtain the drugs over-the-counter by visiting another state without the restriction (Scott 1). This era was also a time when door-to-door salesmen would sell cure-alls and tonics that contained morphine, cocaine, and/or heroin (Scott 1). At the end of the 19th century, historians estimate over a quarter of million (of 76 million total) Americans were addicted to opium, morphine, or cocaine (Scott 1). After many years of resistance, manufacturers of cure-alls were required by the Pure Food & Drug Act of 1906 to label all of the ingredients in their products - "including 'soothing syrups' for bawling babies, and 'cures' for chronic ills such as consumption or even drug addiction, which previously had not declared (sometimes denied) their content of opium, cocaine or cannabis" (Scott 1). In 1914, President Wilson signed the Harrison Narcotic Act - the act enabled the federal government to control medical transactions involving opium derivatives and cocaine via tax (Scott 1). Specifically, the Act stated:

An Act To provide for the registration of, with collectors of internal revenue, and to impose a special tax on all persons who produce, import, manufacture, compound, deal in, dispense, sell, distribute, or give away opium or coca leaves, their salts, derivatives, or preparations, and for other purposes. ("A History of Opiate Opioid Laws in the United States" 1)

Doctors could still prescribe the drugs, so the Act was not very successful, until revisions were made so they could not prescribe the drug to addicts ("A History of Opiate Opioid Laws in the United States" 1). In 1924, the government introduced the Heroin Act, which "[p]rohibited manufacture, importation and possession of heroin illegal – even for medicinal use" ("A History of Opiate Opioid Laws in the United States" 1).

Where did HIV/AIDS come from and how did the public & government respond?

Although there are a couple of theories about how HIV/AIDS was transmitted to humans, there is no dispute that the strain of the HIV evolved from the simian immunodeficiency virus (SIV) (Carmichael 1). It all started in Los Angeles, California in June of 1981 when the Center for Disease Control (CDC) published a bulletin stating that five homosexual men had gotten a rare form of pneumonia and their physicians did not know where the pneumonia had come from (Densham 641). Two of the five men had already died and the other three were seriously ill; these were the first five reported cases in America of a deadly disease soon to become a worldwide public health problem (Densham 641). The doctors who had reported about the rare

pneumonia had found that the men had no helper T-cells, which usually help the body's immune system fight against infection ("25 Years of AIDS" 1). In the summer of 1981, Dr. Gerald Friedland of the Bronx started to see patients with the same rare form of pneumonia, but his patients were all injecting drug users ("25 Years of AIDS" 1). These drug addicts were frequent users of New York's "shooting galleries", where people rented syringes to shoot up drugs ("25 Years of AIDS" 1). Also, another doctor in the Bronx was seeing that his pediatric patients of drug addicts were suffering from "immune suppression" ("25 Years of AIDS" 1).

In 1982, the CDC published a report that three heterosexual males, who were hemophiliacs, were also suffering from the rare pneumonia. The "[h]emophiliacs [were] treated with a clotting factor known as Factor VIII, made from the pooled plasma of thousands of donors" ("25 Years of AIDS" 1). A virus would be small enough to get through the filtering process, so people realized anyone could get the virus through blood ("25 Years of AIDS" 1). In 1982 the virus was named acquired immunodeficiency syndrome (AIDS) ("25 Years of AIDS" 1).

In 1983, the CDC reported two women who had sex with infected men had showed signs of AIDS – AIDS was something that could be spread sexually, not just in homosexual men. ("25 Years of AIDS" 1). In January of 1983, the CDC held a meeting to discuss blood donation guidelines in order to protect the blood supply; however, gay activists were concerned about discrimination and stigma, while blood industry executives did not want to lose money by developing a new screening policy ("25 Years of AIDS" 1). Although guidelines were published in March, it took two years for the blood test to be ready to identify HIV; meanwhile, 35,000 Americans were infected from contaminated blood and blood products ("25 Years of AIDS" 1). It is scary to think that a simple blood transfusion could lead to HIV/AIDS. Although it is expensive to test everyone's blood and trust everyone's sexual practices, I still believe everyone's blood should be tested before donating. Although the FDA has banned blood donations from men who have sex with other men, gay activists still believe that the policy needs to change.

At the World Health Organization's (WHO) first meeting in 1983, representatives came together to discuss the international implications of AIDS, which had been found in many different countries, and how European countries had stopped importing blood from America ("25 Years of AIDS" 1). In 1983 a researcher in Paris discovered evidence that showed AIDS was caused by an infectious virus ("25 Years of AIDS" 1). In 1983 a CDC epidemiologist, Dr. Joseph McCormick, and his team traveled to Kinshasa, Zaire (now Democratic Republic of Congo), and found 38 infected patients, both men and women; his team discovered that "everybody…was susceptible to AIDS" ("25 Years of AIDS" 1).

In 1984, Dr. Robert Gallo, a virologist, isolated and developed a blood test to identify the virus ("25 Years of AIDS" 1). Many activists voiced concerns about civil rights and confidentiality regarding the blood test, while others questioned whether they should get tested if there was no treatment ("25 Years of AIDS" 1). Although the director of San Francisco's Department of Public health ordered all 14 of the city's bathhouses to be closed (these were places gay men would go to have sex), the bathhouses sued to reopen and won because people's behavior caused AIDS, not the bathhouses themselves ("25 Years of AIDS" 1).

In 1985, the first international AIDS conference was held mainly to discover the science behind AIDS. They talked about how AIDS was prevalent in Africa. Dr. Max Essex from Harvard, suggested that AIDS originated from the African green monkey, but some of his test results were tainted by people who had been exposed to malaria. Many African leaders did not like that their continent was considered the origin of the epidemic. People become unsure of the future projections because a lot of information has been inaccurate in the past. ("25 Years of AIDS" 1).

In the 1980s, AIDS hysteria was rampant:

Too often in America, fear and ignorance have led to public actions that later were recognized as blights on our historical record. In the 1950s, fear of communism spawned unfounded persecution of intellectuals and artists, and during World War II paranoia prompted the internment of Japanese-Americans... Now with the AIDS crisis, public hysteria has surfaced again, stimulating irrational, insensitive and sometimes illegal responses. Such actions threaten to tarnish our history again, and could be as paralyzing as the disease itself...According to a poll published in December [of 1985] by the Los Angeles Times, 50 percent of the adults surveyed supported a quarantine of AIDS patients, 48 percent would approve of identity cards for those who test positive for antibodies to the virus that causes AIDS and 15 percent favored tattooing AIDS victims. (Phair 1)

It is not right or fair that people with HIV/AIDS should have to identify themselves. The disease is not airborne – people should not give in to their fear. Since "[t]he virus is transmitted only through intimate sexual contact, sharing contaminated needles, receiving infected blood or blood products, or from mother to fetus[,]...[t]here has been no evidence of infection following exposure to drinking glasses, doorknobs, showers, toilet seats or food touched by an AIDS victim" – there is no reason to give in to "the emotional disease—hysteria—that has accompanied it" (Phair 1).

Heroin Addiction

For those who use heroin, they understand that they have an addiction. 90% of them say they wish they had never tried it if they had known the side effects that would follow. Many people on the Russell Brand BBC documentary said heroin was highly addictive because they enjoyed the feeling of being high on heroin. The high was completely different than the high from any other drug, but when they were not on heroin, they felt horrible. Russell Brand stated: "I believe that it [heroin addiction] is a disease" ("Russell Brand BBC Documentary 'I Took Drugs Every Day'" 1). Many addicts feel anxious, physically sick, and depressed when they are not on heroin. Their bodies miss the "feel-good" chemicals that are released during the high. Once the user is addicted, their whole life's goal is to get high off of heroin. Regarding fame, ladies, and fortune, Brand states, "I'd rather be a drug addict. If I didn't have my program, I'd be a drug addict today in a second" ("Russell Brand BBC Documentary 'I Took Drugs Every Day'" 1). Only "abstinence-based recovery is the true solution to the problem of alcoholism and addiction", while it helps "to have a program and a method to have a life free away from drugs" ("Russell Brand BBC Documentary 'I Took Drugs Every Day'" 1).

Being addicted to heroin literally makes people do things they said they would never do because of their addiction and the withdrawal symptoms. Addicts lose their ability to care about their family or loved ones as they are so consumed with getting high. The withdrawal symptoms are so horrible that the addicts cannot live without their next fix. Addicts will even sell their bodies in order to get a hold of heroin. They lose everything that they ever had when they are hooked on heroin. Some will steal money, sell their kids, and completely lose their identity in their quest for more heroin; a friend of addicts remembers seeing his friends sell their kids for drugs ("Drug Free World: Substance & Alcohol Abuse, Education & Prevention." 1).

Even though recovering addicts know that heroin is bad for them, they still want to get high every day; Brand stated, "I took drugs every single day," ("Russell Brand BBC Documentary 'I Took Drugs Every Day'" 1). Their body wants the high and feels its absence. The withdrawal is physically and mentally horrible without the drug, so users decide, regardless of how bad heroin is for them, to shoot up ("Russell Brand BBC Documentary 'I Took Drugs Every Day'" 1).

HIV/AIDS

HIV (Human Immunodeficiency Virus) causes AIDS (Acquired Immune Deficiency Syndrome); the HIV virus can only affect humans. HIV causes the body's immune system to shut down, so people with the virus are more susceptible to getting sick. Anyone can get HIV/AIDS because it is not genetic. HIV can be transmitted from someone infected to someone who is not infected through blood, semen, vaginal secretions, unprotected sex, direct blood contact, through shared syringes in drug use, infections from blood transfusions and other accidents in hospital settings, before/during birth between an infected mother and child, and through breastfeeding. ("Frequently Asked Questions About HIV/AIDS.")

When HIV enters the body, it can take 6-12 weeks (maybe even 10 years) before any symptoms show up. However, until someone takes a blood test to see if he is HIV+, he will not know for sure, which is why it is important to get tested. The early symptoms of HIV seem like the flu -- fevers, rashes, cold sweats, and chills -- which only lasts for a couple days. Some people do not even notice the symptoms. ("Frequently Asked Questions About HIV/AIDS.")

When HIV becomes AIDS, the immune system is severely damaged and the infected are highly susceptible to common illnesses that most healthy people would not be. Most of the common illnesses become more serious infections and diseases for those with AIDS. The estimated time frame for those with HIV to receive an AIDS diagnosis is 7-10 years. ("Frequently Asked Questions About HIV/AIDS.")

For someone living as HIV+, it is very helpful to have a friend to provide the emotional support and help create a safe place. They should also find a healthcare provider to get an evaluation of how their immune system is doing. Some people might be very fearful that they will never find love because of their disease, but having emotional support is key to having success mentally and feeling comfortable in their own skin. ("Frequently Asked Questions About HIV/AIDS.")

As for those with HIV/AIDS, there is antiretroviral therapy available as treatment. "In 2012, around 9.7 million people living with HIV had access to antiretroviral therapy in low- and middle-income countries" ("2013 Global Fact Sheet" 1). These countries were able to increase investments for HIV – 53% of HIV related spending. In order to find a cure and provide treatments for HIV/AIDS, money is needed, so governments have to be willing to spend the money to invest in a cure. ("2013 Global Fact Sheet" 1)

Heroin addiction contributes to the spread of HIV/AIDS

Injecting drug use is one of the causes of HIV in the U.S ("Substance Abuse/Use."). If an addict is injecting drugs, he can get HIV from sharing syringes or other equipment ("works") with an HIV-infected addict ("Substance Abuse/Use."). Although HIV can also be spread through unprotected sex and sex with drug-using partners, drinking alcohol or using other drugs can increase one's chance of HIV because being drunk or high affects one's cognitive thinking when making hard decisions and lowers one's inhibitions ("Substance Abuse/Use.").

The way to prevent HIV/AIDS and heroin use is through awareness

Because the sharing of needles among addicts contributes to the spread of HIV, a controversial and proposed solution to the problem are programs that provide clean, non-touched, syringes for addicts. Some people believe that giving out clean needles promotes increased drug use; however, national and international studies have shown that syringe service programs do not increase drug use. In fact, studies show that the programs are quite effective in lowering blood-borne illnesses like HIV and Hepatitis among injecting drug users (IDUs) when combined with treatment and prevention service centers. "Injection drug users who do not enter treatement are up to six times more likely to become infected with HIV than those who enter and remain in treatment" ("Principles of Drug Addiction Treatment: A Research-Based Guide (Third Edition)" 1) These programs protect IDUs, sexual partners, and children who would be high atrisk for HIV. They also serve as key pathways to health information treatment. Since evidence has been shown that syringe service programs do not increase drug use but helps lower the occurrences of HIV and other diseases, the government is now able to fund syringe service programs (funded since December of 2009). ("Substance Abuse/Use" 1)

One of the ways to prevent the spread of HIV/AIDS is through awareness and education. There were 35.3 million people living with HIV in the world in 2012. Since the epidemic started, around 75 million people have been infected with HIV. However, new infections have dropped by 33% since 2001. There has been a drop in the number of newly infected people worldwide from 2001 to 2012 (from 3.4 million to 2.3 million). "New HIV infections among adults and adolescents decreased by 50% or more in 26 countries between 2001 and 2012. New HIV infections among children have declined by 52% since 2001" ("2013 Global Fact Sheet" 1). Also, AIDS-related deaths dropped by 30% since peaking in 2005. "Since the start of the epidemic an estimated 36 million people have died of AIDS-related illnesses ("2013 Global Fact Sheet" 1). The numbers do not lie. People have more information regarding HIV/AIDS and are more involved with stopping the spread of HIV/AIDS and finding a cure ("2013 Global Fact Sheet" 1).

After estimating there were 200,000 injecting drug users (IDUs) in Iran, the country set out to launch a harm reduction program among IDUs. They found most of the surveyed 405 IDUs were male, single and from 20-39 years old "with 72.7% history of imprisonment" (Eskandarieh et al. 588). Most had a history of addiction treatment and were users of opioid, heroin, and crack. 18.8% of the IDUs were infected with HIV/AIDS. The researchers concluded that "prevention programs about harm reduction, treatment and counseling should include young IDUs as a core focus of their intervention structure" (Eskandarieh et al. 588). Focusing on the youth is important since they represent the future world, the future generation. If they are reached and educated at an earlier age, they are less likely to get HIV/AIDS. (Eskandarieh et al. 588)

There are many different organizations that provide support and education for those infected and their loved ones. Schools provide education regarding HIV/AIDS prevention and awareness. On December 1st, we celebrated World AIDS Day. Regarding World AIDS Day, a writer for the Los Angeles Daily News wrote:

While World AIDS Day began as a day of remembrance and awareness, the observance has evolved into a worldwide campaign to encourage HIV testing and eradicate transmission... 'Los Angeles County is at a crossroads...The disease burden for HIV is increasing steadily, as people living with HIV are living longer and an estimated 1,500 to 2,500 people are newly infected annually.' About 58,000 people live with HIV in L.A. County, deemed the second largest epicenter of HIV/AIDS in the United States. (Abram 1)

It is depressing and heartbreaking to learn that my city is suffering so much, so I want to do what I can to spread awareness to stop the spread of HIV/AIDS.

Conclusion

Although heroin is extremely addictive and its use may cause HIV/AIDS, the right treatment and smart prevention habits, research, and spreading awareness education to the world can end the current HIV/AIDS epidemic. When heroin walks into someone's life, it is introducing him to death because heroin is so dangerous, yet one of the best feelings he will ever have. His body will never be able to experience that amazing feeling again until that next hit. Heroin takes over his life, making him desperate enough to share syringes, which makes him susceptible to HIV/AIDS. The HIV/AIDS epidemic is serious, but it is preventable by not sharing needles and demonstrating safe sex practices. The next step is finding a cure for this disease – medicines are available to help the infected survive, but more research and money is needed to help find a cure. Healthy people look down upon those with HIV/AIDS because of their fear and ignorance, which causes isolation and loneliness. If the rest of the world gives emotional support to those with HIV/AIDS, there is a chance that the stigma surrounding AIDS can be eradicated. Lastly, everyone needs to know how to prevent HIV/AIDS and what it does to the body, so people will have less of a chance of contracting HIV/AIDS and can make this world better, safer, and more protected from the disease.

I am inspired by the works of Banksy because one of the ways I want to promote awareness is through street art. Banksy is a household name in the UK, perhaps best known for his compelling stencil graffiti, found throughout major cities on walls and billboards. He avoids the abstraction of traditional tags, instead creating (often photo-realistic) urban street art images that respond to a given context and contain some form of social commentary. Of course, *these are all highly illegal*, which is part of the reason Banksy shields his identity (Urbanist 1). Banksy inspires me because his work sends a really big and controversial message; his work causes me to stop and really look and think about his art. He keeps his identity a secret, which makes his work more intriguing. With Banksy, there is always a message in his art, a deeper meaning or commentary, despite how simple the actual art may be.

Retna is another artist who inspires me because he uses different language scripts in his street art. Retna has created an original alphabet, fusing together influences from ancient Incan and Egyptian hieroglyphics, Arabic, Hebrew, Asian calligraphy, and graffiti ... As a youth of African-American, El Salvadorian and Cherokee descent growing up in Los Angeles, Retna (real

name Marquis Lewis) was mesmerized by the gang graffiti that surrounded him. He began practicing the art form, and adopted the name Retna from a Wu-Tang Clan song. In the midnineties he began making murals on walls, trains and freeway overpasses throughout the city (More Intelligent Life 1). Retna was the first street artist I recognized because I live in L.A. and my friend went to high school with him. His art is different; I really like how detailed his portraits are, and how sentimental and personal his work is. Although there are a lot of artists in L.A., Retna still pursued his dream and did not let his surroundings affect him in a negative way. He bases his art from his life growing up in L.A.

In order to promote awareness about heroin addiction and HIV/AIDS, I would like to throw fundraising events to partner with nonprofit organizations. I would like to participate in the AIDS WALK Los Angeles and possibly work for the AIDS Project Los Angeles (APLA) and other similar organizations that promote and support AIDS awareness.

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