



5th June 2006

Statement to the Senate Enquiry into Amphetamines and Other Synthetic Drugs

**Committee Secretary
Parliamentary Joint Committee on the Australian Crime Commission
Senate Enquiry into Amphetamines and Other Synthetic Drugs
Department of the Senate, Parliament of Australia**

Dear Secretary,

On behalf of VIVAIDS inc., the parent organisation of the RaveSafe program, and the staff, volunteers, community members and supporters who enable RaveSafe to make a positive contribution to the health of young Victorians, I am grateful for this opportunity to submit to the Senate Enquiry into Amphetamines and Other Synthetic Drugs.

VIVAIDS Inc is a community-based association that is dedicated to reducing individual and societal harms associated with illicit and injecting drug use, promoting the health of people who use drugs and contributing to a social, policy and service environment that maximises opportunities for individuals affected by drug use to make safer, informed decisions and to participate more fully in the social, economic and cultural life of the community.

VIVAIDS attracts funding from the Victorian Department of Human Services to conduct the following project activities:

- Drug Overdose /Adverse effects recognition, prevention and response education
- Pharmacotherapy Advocacy, Mediation and Support service (to assist providers and recipients of methadone and buprenorphine treatments)
- Hepatitis C Prevention, Education and Support Service
- RaveSafe Peer education – harm reduction for drug users in the dance scene
- Young Drug Users Peer Education –focusing on innovative approaches to improving young drug users' awareness of blood-borne viruses and other drug-related harms

In addition to these project-specific activities, VIVAIDS conducts the following activities under an organisational health education and promotion plan:

- Contributing to collaborative action to reduce drug-related harm and to improve community health and safety by working with other community

organisations, health and human service providers and with state, national and local governments;

- Contributing to the knowledge and evidence base around drug related harms and interventions through partnerships with research organisations
- Contributing to best practice by providing education and training to health and human service providers who work directly with people who use drugs
- Contributing to informed discussion and debate on issues affecting drug users in the wider community.

In past years, VIVAIDS has been contracted by the Victorian Department of Justice to provide drug overdose prevention education for prison inmates and people on community corrections orders. A tender to resume this project is currently under consideration with the Department.

VIVAIDS has been incorporated since 1987. As the name suggests, the primary focus in the early years was HIV prevention. Since that time, the scope and brief of the organisation has broadened to include other priority issues such as hepatitis B and hepatitis C, heroin overdose, more recently amphetamine use and adverse events, supporting users in treatment and promoting the rights and health of people who use drugs and their families. VIVAIDS is currently undergoing a Strategic Review process. Up dating the name of the organisation so that it reflects the wider range of issues addressed is being considered in the course of this review.

RaveSafe, as a program of VIVAIDS, aims to increase the capacity of individuals and organisations involved in Victoria's rave, outdoor festival and dance party scenes to reduce the potential harms of drug use.

History

A group of ravers (participants in the dance-party community) initially formed RaveSafe in 1995. It was operated purely voluntarily by a group of dedicated peers who recognised that by sharing their knowledge and experience of drug use, the harms associated with party drug use could be significantly reduced.

Since 1997, RaveSafe has been funded by the Victorian Department of Human Services (DHS) and administered by VIVAIDS from 1999 onwards. In 2003, the program was promoted to a 3 year funding cycle, which continues today.

The Project

RaveSafe is a harm reduction focused, peer education program that hosts a chill out space at 12 – 15 indoor and outdoor dance events every year. Each event can range in size from 500 to 20, 000 people and can take place over one night or up to four days. Due to current funding restrictions, we do not attend nightclubs.

In addition to this service provision, RaveSafe works with promoters and organisers of events to ensure that minimal standards of safety are maintained. RaveSafe has also contributed in cross sectoral collaboration with emergency medical and first aid providers, promoters, venue managers, police and government regulators and administrators towards ensuring that dance-party events are conducted in a safe, responsible and lawful manner, while respecting the enjoyment and amenity of patrons and neighbours. Some outcomes of this collaboration include the voluntary

guidelines for the provision of drinking water, launched by the Victorian Minister for Health in 2004 and the Safer Party Guidelines, released in 2005.

RaveSafe provides a unique service at events by providing partygoers with up to date and relevant information about safer drug use and related health issues. Our chill out space provides peers at an event a place to sit down and relax with non-judgemental peer educators.

Key Peer Educators

The 12 Key Peer Educators (KPE) are volunteers recruited from the dance scene. RaveSafe conducts an initial two-day training course and thereafter runs fortnightly training with the Coordinator and experts in the field that helps to keep the KPEs up to date with a myriad of drug related issues. All KPEs are required to have a current Level 2 First Aid Certificate and undertake specialised training in overdose recognition and management, working with people experiencing mental health problems and dealing with intoxicated and potentially aggressive people in a productive, non-violent way.

At an event, the KPE's have a range of roles and responsibilities. These include the distribution of 'safer party packs', drug information, fruit, earplugs, condoms, lube, dust masks, sunscreen, provide injecting equipment discretely upon request, as well as monitoring people and the venue for safety. KPEs serve as active listening posts for people who may have some concerns around their drug use and offer information and referral advice on a wide range of health and related issues, including safe sex / sexual health, drug driving and how to get home safely from an event, penalties for drug offences and where to get legal advice, diet, sleep, drug treatments and services etc.

The peer education model was utilised for its ease of access into this hard to reach population and because it builds upon capacity within the target population to inform, disseminate and give credibility to health promoting messages and strategies. 'Inside information and knowledge from personal experience play an important role in establishing credibility, trust, and belief (Wye 2006¹), A considerable body of literature and the experience of many community and youth oriented organisations attest to the effectiveness of peer education as a means of engagement and education in relation to young people in general and to people who use illicit drugs in particular.

Young people who use illicit drugs recreationally tend to be highly sceptical of information they perceive as coming from "official sources" and are much more likely to act upon information that is accessed through a credible source and that is framed within a context of relevance to the young people. It is arguable that illicit drug use is no more prevalent within the dance-party scene than in any context in which young people congregate for entertainment and socialisation. What the dance scene provides is a supportive, communitarian social environment where peer-mediated approaches to harm reductive health promotion may enjoy the support and respect of participants. Participants in dance or rave parties at venues and festivals frequently talk about acting in ways that benefit the "scene" and display a sense of altruism and concern for what happens in their community. The "ownership" of RaveSafe and its health messages by partygoers is strongly in evidence throughout RaveSafe's

¹ Wye S.Q. A Framework for peer education by drug-user organisations [2006], AVIL, Canberra

evaluation data and is a strong indicator of the strength of the peer-education model of health education.

Resources

The 'safer party packs' distributed by RaveSafe are small enough for partygoers to conveniently put in their pocket. The inclusion of a condom, lube, Chlamydia card and info on GHB make it a comprehensive health promotion resource for partygoers. A lollipop is included to make people pick up the whole pack, eat the lollipop and keep the rest to read later. After an event, we rarely find packs or information provided by RaveSafe discarded.

"I like the approach taken by the info booklet. It's written in a way that young people can associate with and respond to"²

This financial year we have given out over 40 000 resources, including 7000 safer party packs, and its components.

A Safe Place

We also provide a space for people who do not need first aid assistance, but are not coping with their drug experience; they can sit in a comfortable, safe space, and be supported and monitored by one of our KPE's. We liaise closely with paramedics and ambulance services, referring people on if they require additional attention, including first aid. When a person recovers, we are able to give them comprehensive information to assist in preventing the incident in the future. This can include; safer drinking guidelines, drug effects, interactions with other drugs and specific drug information.

"Good to see some real info, not Government bullshit"²

Contributing to healthier outcomes through a collaborative effort

The monitoring of venues through the 'RaveSafe Venue Audit' given to event organisers has been a major strategy of the project. At the end of an event RaveSafe communicates anything of concern to the organiser and DHS, to ensure that an appropriate response to any issues arising can be formulated. As an example, it was RaveSafe who first identified that some venues dismantled the cold water taps in bathrooms, making patrons pay (if they had the money) upward of \$5 for a 300ml bottle of water. This led to increased prevalence of dehydration from both alcohol and other drugs. RaveSafe highlighting of this issue encouraged DHS to implement 'Voluntary Guidelines for the Provision of Free or Low Cost Cold Water by Venues'³.

RaveSafe works in collaboration with a range of local community based organisations such as the Australian Drug Foundation, Fitzroy Legal Service and Enlighten to develop a community based response to the harms associated with alcohol and other party drugs. These strategic partnerships help to build our combined knowledge of alcohol and other drug related issues affecting the rave, outdoor festival and dance party scene.

RaveSafe Survey

² VIVAIDS with Centre For Youth Drug Studies, RaveSafe Survey, 2005

³ B. Pike et al, DHS, 2003

The RaveSafe Survey is completed with peers while at events by the KPE's. The Key findings from the surveys are;

- "RaveSafe is very well received by its peers as a site of 'real' drug information in contrast to main stream health organisations.
- Very low numbers of recreational drug users would go to health practitioners or other formal sources for harm minimisation advice.
- Peers and their own experiences are nominated as the most likely sources of harm minimisation advice.
- There is evidence of high risk taking while under the influence of party drugs.
- Ecstasy and related recreational drug use is prolific amongst Melbourne partygoers and suggests a culture of 'normalisation'.
- In situ peer education may appear to be the most effective and credible method of harm minimization.⁴ "

Key Partners, Enlighten and RaveSafe.

The parallel principles of Enlighten and RaveSafe in the provision of harm reduction information and strategies to party drug users have resulted in a closer partnership between the two organisations.

Enlightens involvement on the RaveSafe reference group has proved invaluable. Due to the independent community-based nature of Enlighten, they are able to advocate and address issues that RaveSafe, as a partner in government-funded programs, finds more problematic.

Enlighten has researched and produced a number of accurate and reliable harm reduction resources targeted towards party drug users. When RaveSafe required this information, instead of reproducing effort, we added Enlighten pamphlets to our stall. We are now continuing this relationship as we together update and revamp these pamphlets. Enlightens advice and feedback helps to ensure that RaveSafe's services continue to be relevant and appropriate to the needs of the target population. Enlighten, hopefully, recognises the value of RaveSafe's work in delivering one-on-one interventions to drug users at risk of harm and our capacity, as a funded organisation, to make a consistent, high quality contribution to collaborative effort across the sector and to help ensure that party-goers' perspectives are considered and their health needs addressed.

When Enlighten and RaveSafe are attending an event together, the two services set up in adjacent marquees. This enables RaveSafe and Enlighten to focus on their individual purpose, and refer people as needed easily between them. This collaboration has assisted many people comprehend the harm reduction messages the services provide.

ISSUES OF CONCERN:

Mainstream Harms

Just a month after finding precursors for 4 million Ecstasy tablets in Melbourne suburb Brunswick, a tonne of MDMA tablets were seized at the City's waterfront – that's at least 3 million doses of Ecstasy!⁵ This has apparently done little to dampen

⁴ VIVAIDS with Centre For Youth Drug Studies, RaveSafe Survey, 2005

⁵ The Australian 'Four Million Ecstasy Tablets Off The Street' 11/03/05

supply, suggesting that the prevalence of Ecstasy and related drug use in Victoria is high and clearly is not confined to raves, outdoor festivals and dance parties. This pattern of increased demand and use of all Methamphetamines is supported by numerous studies.⁶

The movement of Party Drugs into mainstream venues (eg nightclubs, pubs, bars, and private homes) is concerning to RaveSafe as this population is currently out of our project's brief, and receive little, if any, effective harm reduction messages. Moreover the community-minded altruism of the rave / dance party scene, where the welfare of individuals is acknowledged as a concern for all, is absent or at least far less evident in mainstream venues, such as nightclubs and bars. Proprietors are less likely to be cooperative about reducing drug-related harms, as it is felt that acknowledging that illicit drug use occurs on their premises would endanger their liquor licences and thereby their livelihoods. There is some evidence that younger and more naïve patrons may be at increased risk of drug-related harms at some venues due to predatory or unscrupulous behaviour from other patrons. Again, this points the urgent need for education and community-capacity building in this area, which remains beyond the scope of RaveSafe's funded brief and current capacity.

Most of the common illicit drugs are used in the nightclub scene. Methamphetamine, 3,4-Methylenedioxymethamphetamine (MDMA or ecstasy), Cannabis and Gamma-Hydroxybutyrate (GHB) are particularly common. Unfortunately, the harms associated with use of these substances can be maximised without appropriate education through adverse reactions and interactions where more than one drug is used, the unpredictable purity and strength of the drugs available and, in particular, the admixture of alcohol to the mix. The prevalence of Methamphetamines in combination with Alcohol is an emerging trend while the interaction of GHB and Alcohol is particularly concerning, due to a greatly increased risk of overdose.

Ravesafe is also concerned about patrons' safety getting home from venues and the danger that drug and alcohol affected drivers pose to themselves and to other road users.

There needs to be a program like RaveSafe that can attend nightclubs to raise awareness of emerging harms, such as rogue Ecstasy batches containing adulterants like Para-methoxyamphetamine or Dextromorphan. Awareness of drug-driving issues and the potentiating effects of alcohol taken with other drugs is another area where consumer education is much needed.

Highly dangerous drug moves into Nightclubs?

GHB (gamma hydroxyl-butyrate) overdoses are a major concern, and have constituted a public health issue since Two Tribes 2004 – an event from which the media reported 13 overdoses. (Non-fatal adverse reactions where transient paralysis, coma and respiratory depression led to hospital admissions or emergency department attendance).

Whilst RaveSafe's educational activities have contributed to a reduction in GHB overdoses at raves, outdoor festivals and dance parties, GHB overdoses have if anything increased in the club environment where there are no initiatives in place to reduce drug related harm.⁷

⁶ Australian Crime Commission Illicit Drug Data Report 2003-2004 and 2004 National Drug Strategy Household Survey 05/04/05

⁷ Alan Eade, Metropolitan Ambulance Service - Alan.Eade@mas.vic.gov.au

Unfortunately, one of the strategies adopted by other organisations has been to encourage stigma and the marginalisation of people who use GHB. RaveSafe and VIVAIDS submit that pushing a drug-using population into the margins of society and stigmatising them is a short-sighted strategy that in the end can lead to more, not less, drug-related harms. The emerging trend of peers and venues discriminating against GHB users has increased the chances of harm arising from this drug. Peers have stated that 'I would break-up a friendship, even with my best friend, if I found out they were using G'⁸ this has forced GHB users to use covertly, not informing their friends that they are taking the drug. This has resulted in their peers not recognising the first signs of GHB overdoses and not getting them the timely help they require. GHB users also report consuming alcohol while under the influence of GHB to demonstrate an appearance of normality, greatly increasing their chances of overdose and death because of the dangerous combination these drugs make.

Discrimination is compounded by venue owners ostracizing suspected GHB users by black banning them from clubs and evicting punters who are GHB-affected without support or assistance. This unconscionable behaviour demonstrates a need for education, not just of drug related harms, but of a venue operators' duty of care towards their patrons, as well as best practice strategies for responding to overdoses and related issues.

It appears GHB users are hesitant to call emergency services in an event of an overdose which could lead to loss of friendship and a lifetime ban from their favourite club. Friends may even attempt to counteract the overdose by administering speed (amphetamine) or letting them 'sleep' it off instead of getting medical assistance. A highly publicised example of this happening resulted in the death Ms Davis in a car park after mistakenly drinking from a water bottle that contained GHB. State Coroner Mr. Johnstone recommended that programs should be developed to educate the public on reducing drug related harm, in particular teaching drug users how to recognise and respond appropriately to drug induced unconscious and coma.⁹

Sniffer Dogs

VIVAIDS and RaveSafe are very concerned that the use of Passive Alert Detection (PAD) Dogs or sniffer dogs on Melbourne streets to "provide safer entertainment precincts."¹⁰ Evidence from drug users and witnesses tends to suggest that such operations, while showing the public that police are "doing something" are in fact ineffective and counter productive and in many cases are likely to increase the risk of drug-related harms.

Young partygoers state that they are often harassed by police in public view and searched while their peers, and possibly thousands of other people watch. Police find that 73% of people searched in this very public and time-consuming way, do not actually have an illegal substance on them.¹¹ Coming in contact with smoke from cannabis at an event is enough for a sniffer dog to give a positive notification.

⁸ Anon, Smile Police forum, www.smilepolice.com 2005

⁹ Laphorne K., Druggies could have saved GHB victim, Sun Herald, Victoria, 27may06

¹⁰ Minister for Police and Emergency services, Media Release: New Recruits to Sniff Out Nightclub Drugs, 11/05/04, Department of Premier and Cabinet

¹¹ NSW Ombudsman, Discussion paper, 2004, NSW Government

"[After concluding the fruitless search] the cop asked me if I had been anywhere in the past 48 hrs where cannabis was being smoked and I just laughed and waved my hand in front of us and said "here" ..."¹²

The use of PAD dogs around the queue, the entrance and recently inside an event in Victoria counteracts the harm reduction messages RaveSafe and other services convey. The KPE's have received reports on several occasions that normally responsible people have, on catching sight of the police and their dogs, consumed all the drugs they have in their possession, even though it was originally planned to consume these drugs in several small doses over the night. This has noticeably lead to many extremely intoxicated people at events the PAD dogs have attended. Intoxicated people's erratic behaviour may lead to harmful consequences for themselves and other people. Obviously, consuming a drug in quantities much higher than the normal dose for the individual's level of tolerance, or taking drugs in combination that were originally intended to be taken singly and at different times can greatly increase the risk of overdose and adverse drug reactions.

The use of dogs could also influence Injecting Drugs users to dispose of their dirty syringes unsafely. This might occur because the drug users fear that police might use the presence of syringes as evidence for possession and use charges, but also to avoid being exposed in a highly public search in front of peers and the dance community where this mode of drug administration is usually frowned upon. Inappropriate disposal of used injecting equipment constitutes a public health risk in its own right, diminishes public amenity and feelings of safety and undermines public support for important public health programs such as NSPs, which protect Australia from epidemics such as HIV, Hepatitis B and Hepatitis C. Unfortunately, confronted with the prospect of both prosecution and public shaming, many individuals will not think rationally of the wider good, but will react instinctively in self-preservation mode.

Consuming drugs earlier in the night than intended, or even disposing of drugs because of the fear of detection by a PAD dog operation may lead people to acquire drugs of unknown provenance at the event, from unknown sources. While RaveSafe does not encourage or condone drug use, one of the strategies we suggest for reducing unintended poisonings with adulterants / substitute drugs like PMA and to avoid taking higher than intended doses is to acquire their drugs through reliable, regular sources.

There is no evidence that publicising police attendance at an event discourages people from taking or carrying drugs. There is substantial anecdotal evidence that the threat of PAD dogs has lead to a few people taking all of their drugs before they attend the venue, and has also resulted in many people hiding or disguising the drugs they plan to consume in an unsafe and dangerous way. Drugs dissolved in soft drinks or food can inadvertently be taken by another person. Drugs stored in body cavities may be absorbed into the blood stream all at once.

It has also been reported to RaveSafe KPE's that some people are switching to potentially more dangerous drugs that are rumoured to be not easily detectable by PAD dogs, for example GHB, LSD and so called 'research chemicals'. The potential for harm is thereby increased, especially for those who are relatively inexperienced in the use of these drugs.

VIVAIDS concludes that PAD dog policing has the potential to maximise drug-related harms and that it is also ineffective and cost-inefficient as a supply reduction and

¹² Party-Goer, Earthcore Forum, www.earthcore.com.au

demand reduction tool. The NSW Ombudsman's discussion paper reports that the median amount of Cannabis found was 1.6gms, Amphetamine 0.86 gm, Ecstasy 0.7gms and Cocaine 0.89gms.¹³ These quantities are well under the maximum quantities for which possession charges may be levied and below deemable amounts for which trafficking charges may be applied. This would tend to suggest that most of the individuals who are harassed and detained for a search by PAD Dogs are users of drugs and not dealers or manufacturers. These tactics do not seem to have made any impression upon people's intentions to use illicit drugs recreationally, nor is there any noticeable impact upon the availability or even the cost of ecstasy, amphetamines and similar drugs in the community.

Harm Reduction – sending the wrong message?

Some community members may have legitimate concerns that harm reduction strategies such as RaveSafe's non-judgemental peer education, like pill testing, might send the wrong message to young people. VIVAIDS and RaveSafe's response to this is to state that harm reduction education is in no way incompatible or at cross-purposes with demand reduction strategies or with law-enforcement's role in reducing the availability of illicit drugs. All three arms of the Harm Minimisation framework established under the National Drug Strategy, supply reduction, demand reduction and harm reduction, play an important role in reducing the negative impacts of drugs upon individuals and the community in general.

RaveSafe's role is at the Harm Reduction end of the spectrum. While other agencies and strategies have the task of working to reduce the uptake and distribution of illegal drug use, RaveSafe's role is to work with the people who are already using illicit drugs to help them reduce their risks of harm. These are people's children, their brothers and sisters, their students and workers and the risks of harm attended upon their choice to use drugs that are currently illegal are very real. While many sections of society may disapprove of their choices around illicit drugs, society nevertheless has a considerable interest in helping these young people to remain alive and well and to maximise their chances of contributing to society.

Unfortunately, many young people perceive an inconsistency and an injustice in our current drug laws, because drugs like alcohol and tobacco are legally sold, taxed and consumed while drugs such as cannabis and MDMA attract criminal sanctions. Most people do not believe that cannabis and ecstasy are harmless, but because tobacco and alcohol are many times more harmful, they conclude that the legal distinction between licit and illicit drugs is arbitrary and not based upon science, logic or even a consistent moral argument. In this setting, services or educational messages that are perceived as being demand-reduction oriented or that seem to propagate the "prohibition" line evoke suspicion and incredulity from many young adults, whether they choose to use illegal drugs or not.

This suspicion and hostility towards the "government line" is regrettable because it places many people at greatly increased risk of drug-related harm. Drug prevention messages that are identified with a "say no to drugs approach" are rejected by young people out of hand. This means that really important harm reduction messages would be rejected as well. As all illicit drugs are equally illegal and because the illegality is not recognised as a direct correlate of a drug's potential for harm, it becomes difficult to suggest to drug users that methamphetamine might be more harmful than MDMA or that LSD might be more potentially damaging than cannabis.

¹³ NSW Ombudsman, Discussion paper, 2004, NSW Government

The capacity to convey factual, health promoting and harm reductive information to this audience relies critically upon credibility. To attain and maintain credibility, it is essential that both the message and the messenger are accepted at face value and are not perceived as being laden with or carrying as a subtext an extraneous "message" or aim around abstinence or zero tolerance. While it is not appropriate for Ravesafe to encourage or condone illegal drug-use, it is critical that we recognise and accept the reality that people make their own choices around these issues. We cannot provide people with information that may help them to make safer choices if our service and our educational content does not enjoy the trust of the target community.

Additionally, to enjoy trust and confidence, our information has to be well-researched and factual. Moreover, it has to be framed in ways that ring true to the lived experience of the individuals we are addressing or to the cultural narrative and values of the rave-dance culture. Because we enjoy the trust and confidence of people at risk of drug-related harms, we can provide individuals with information that can assist them in avoiding or reducing the risk of harm. We can tell them, without moral prejudgement, exactly what the harms are that can arise from the use of methamphetamines, GHB, LSD and cannabis. Our information always acknowledges that not using a drug, or using less of a drug, are the simplest ways of reducing drug-related harm. And yet, because RaveSafe is seen as being from and for the rave / dance-culture community, people will still approach us when they have concerns about their own or their friends safety and will take home, absorb and in many cases act upon the safety and harm reducing information we provide.

Does RaveSafe send the wrong message? The Victorian Coroner, in investigating the death of a young nurse outside a Melbourne nightclub last February has publicly called for more education for young people about how to recognise and respond appropriately to illicit drug-related overdoses.

Should Ravesafe be concerned about sending the "right" anti-drug, demand reduction oriented message, we would not be in a position to oblige the coroner and help to maintain the lives and health of the many thousands of young Victorians who currently use drugs recreationally. Should we hold our own counsel and not help drug users stay alive and healthy, in the hope that somehow less people will start to use drugs? Even if there were compelling evidence to suggest that this might occur, whose children should we protect and whose should we condemn? However, VIVAIDS and RaveSafe consider that a decision to use an illicit drug does not place a citizen outside the social contract. Everyone has an equal right to factual, scientifically based information that may help them maintain their health. We provide factual information that individuals may use to make safer choices. This includes information on the drug laws. It is neither logically nor morally sustainable to act upon the premise that withholding the truth is sending the right message.

We sincerely thank this enquiry for the opportunity of describing our activities and raising these issues of concern.

Yours faithfully,

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