



# dart

Volume 3 • Edition 1  
September 1995

*special edition*

## LAW & ORDER

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- ★ scapegoating youth
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come out to play
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- ★ hep c   ★ body adornment
- ★ and more ...



**Contributions** to *dart* are needed and encouraged. Please send your poetry, letters, articles, stories, graphics and photos to QulVAA at 93 Brunswick Street, Fortitude Valley Q 4006. If you want to discuss your idea please drop in or call 3252-5390. The views expressed in this magazine are those of the contributors and do not necessarily reflect the views of either the editors or the publishers. **This issue:** Vol 3/ No 1 **Editors:** Tracey Wing & Alex Wightman **Design:** Linda Carroli **Publisher:** QulVAA

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Well, it's been a long time coming (long enough for people to phone and ask if they are still on our mailing list), but this edition of *Dart* is finally a reality.

Why a law and order edition? Why not? The law and all its ins and injustices continue to play an important role in everything we do at QUIVAA. Issues of userphobia, discrimination, confidentiality, media representation and of course, health, would be very different if our drug laws were different.

One of the functions QUIVAA is funded for is to lobby on behalf of users' rights, and that includes equality in the eyes of the law.

Drug law reform is a murky, complex and lumbering beast, but slowly and surely, as laws become more unworkable, change is happening. It's not happening fast enough though, and while all we can do is keep chipping away at the edges, that will continue to be the case. Our submission on the draft Criminal Code was a frustrating document. Finding the balance between what we'd like to see changed and what we knew might be changed (the distance between these two hands is considerable), was difficult. read the article by Alex, *Taking The Law Into Our Own Hands*, and tell us what you think.

The next edition of *dart* will be a collaborative effort with GAIN, the Gold Coast user group, and will be a poster edition. We are seeking submissions for this now, the closing date is October 9. If you have any artwork, stories, etc, send them in, or call me at QUIVAA. Phone: [07] 3252-5390. I love youse all, Tracey Wing

**FUCK SAFE, SHOOT CLEAN**

# a POSTCARD from Sydney

March 1995

Friday evening and the sun setting in the western sky. On board the 426 Bus to Newtown towards the RSL for drinks and dinner and the usual meeting to exchange and replenish our supplies for the weekend fun.

It has been a while since I was in this fine and grungy city for, this time, a well deserved holiday. And so, on to my adventure. The 'looking for clues' type that happens when it's Friday night and cashed up and hungry...

Watching and waiting at the pub didn't take long as some of the regulars were still setting up shop at the established venues and times and there was a good selection to chose from. Quality and quantity varied slightly and the overall impression was good. The scene had changed but not the players. Oh joy. I tried the rocky brown speed for a change at the suggestion of my friends, the brown being the accepted norm in this area of town, and after that had settled in, we ventured off to Surry Hills for further shopping. There is plenty to go around of the fast, and as luck would have it, lots of slow for those of that inclination, very pure and not so cheap but well worth it as long as you were careful with trying it out. My contented bliss. The major newspapers were running stories of misadventure of people who had o.deed because of the purity so be careful of the compressed white. Please.....

The laid back affair of pot or grass was never in doubt with selected viewing and sampling of domestic products. Conversations included gardening tips for better tips, hydroponics being the done thing, for alas Sydney has fewer sunny days than Brizburg and the punters are now getting value for dollar without having to resort to black market activities.

It was good to settle back in backyard gardens with a coffee and a few choice buds to settle those jangled brain cells and chill out for a while. Gettin' on and off into the wild blue yonder for entertainment wherever we may roam. Overall, the exchange programs may be facing funding cuts with the possibility of user pays situation to complement the scenario. The mobiles were only operating every other day/night but were well attended with helpful information exchanged as well as safe and clean equipment for safe partying. No hassles from the police who were on the street beat at the times of the mobile exchange. All in all, a tiring but very enjoyable time in Sydney. My next port of call will be the Byron Bay Blues Festival at Easter. Should be a hoot. More about these events in my next article,

But for now, lust for life and play safe ...

**Phillip R.**



## Gender Clinic

catering especially for Transgenderists has opened at 484 Adelaide St. It is open every Wednesday afternoon from 1.30-5.30pm, by appointment. More info on the clinic and its services is available by contacting (07) 846 3787.

**Hep C Support Group** meets every last Thursday of the month at 6pm, Wesley Mission Building, Ann St.

**Hepatitis C Council of Qld** has new contact details. A recorded message on 3229-3767 will refer you to counselling services. The office is now at Room D3, 308 Edward Street, Brisbane.

**ATSI Project** Charlon Davidson is the Aboriginal & Torres Strait Islander worker at Quivaa. She is doing a project on Murri Injectors. If you would like some information about this project call Charlon on 252 5390.

## Work, Live or Play in West Moreton Area

Quivaa is currently doing a project in your area, looking at recommendations for new services for users. If you would like to have input into this project please fill in the survey that is being distributed in these areas or contact Josy on 252 5390/015 378 506

more news on page 11 ➡



# taking the LAW into our own hands

by alex wightman

**The Queensland government has avoided its responsibility to incorporate sensible public health policy and drug law reform into the states criminal justice system.**



The labour government had undertaken to extensively review the Criminal Code on election to government and consequently established a Criminal Code Review Committee to report on necessary changes which reflected community standards of criminal and non-criminal behaviour. However, on 15 December 1994, the Queensland Department of Justice and the Attorney General released the draft Criminal Code which largely ignored the recommendations of the Review Committee. Instead the draft Code standardised language, increased penalties and integrated the various pieces of ancillary legislation into a single code. The major objective of modernising the Criminal Code to reflect a more realistic standard of what should and should not constitute criminal behaviour was ignored.

The community and government sectors were given little time to respond to the draft Code as public submissions closed on February 17 which in view of the size gave little time for comprehensive responses. Despite this a number of organisations and health professionals submitted their responses to the code. Particular attention was given to the impact that the sections on sexual offences, prostitution, and drugs would have on HIV/AIDS education, prevention and harm reduction strategies.

Before dealing with the drug offences in detail, it is important to understand the two other major areas of concern.

## *sexual offences*

Submissions from the Queensland AIDS Council (QuAC) identified the inconsistency concerning anal and vaginal intercourse. The legal age for vaginal intercourse is 16 while 18 remains the legal age for anal intercourse. The discriminatory nature of these provisions and the impediments they place on young homosexual men in accessing safe sex information was not considered in the draft Code.

The draft Code also continues to criminalise sex between consenting minors. This ignores the realities of contemporary sexual behaviour and deters the development of targeted educational strategies for young people.(1)

Also problematic is the definition of rape as limited to penile penetration as it excludes oral, digital and penetration by objects. These are instead defined as aggravated sexual assault. Abortion remains illegal. These issues are the subject of intense criticism by the Coalition of Women for a Realistic Criminal Code who have held public rallies against the draft Code.

## *prostitution*

SQWISI's (Self Help for Queensland Workers in the Sex Industry) response to the draft Code was that it continues to marginalise sex workers (2). The current and draft Code effectively forces sex workers to work alone by criminalising all forms of organised prostitution. Legally operating sex workers in Queensland are placed at greater risk of sexual violence. It also removes support mechanisms for the worker in demanding safe sex. The ability to provide health education to a scattered and underground industry is extremely impaired, and sex workers are less willing to keep materials pertaining to safe sexual practices (eg. lube) while they can be presented as evidence of an offence. (3)

## *drug offences*

The Queensland Intravenous AIDS Association (QUIVAA) was particularly concerned with the drug misuse offence provisions included in the bill. The *Drugs Misuse Act 1986* was a notorious piece of legislation that imposed a range of severe penalties and applied excessive and sweeping police powers to the enforcement of those laws. Following amendments to the *Drugs Misuse Bill* by the Labour administration and the recommendations of the Criminal Justice Commission (4), it was expected that non indictable offences for cannabis would be included in the draft Code. In addition, it was expected police powers would be curbed.

Neither of these expectations were met. The provisions for drug offences in the draft Code were a direct translation of the current act. While the specific police powers had been removed from the draft, this was because all police matters are to be consolidated into the new Police Powers Bill which was not available for public scrutiny.

The preamble to QUIVAA's submission stated that the major harm associated with drugs was a direct result of its illegal status (5), and called for the decriminalisation of drug possession for personal use, decriminalisation for low levels of drug supply, and the state regulation of drug supply.

Given the unlikelihood of these recommendations being adopted, QUIVAA limited its response within the framework of prohibition adopted in the draft Code and instead attempted to address those parts of the bill that most impacted on health.

The *Drugs Misuse Offences* is comprised of 15 sections. It is set out in Part 3 of Chapter 4 Acts Injurious to the Public In General (Section 166). What is a Dangerous Drug' determines

what is considered a dangerous drug through reference to 5 Schedules. The drugs included are similar to those in other parts of Australia and are consistent with the international treaties to which Australia are signatories. (6)

QUIVAA argued that the inclusion of these drugs (and the non inclusion of others) was based on ideological and moral grounds and called for the schedules to be reassessed so that the rationale of a substances illegality be based on the socio-medical harm associated with it.

Section 167 defines a drug dependant person for the purposes of the act. A drug dependant person under this section is any person who, through repeated administration, demonstrated impaired control in either taking or seeking drugs, and who is likely to suffer mental or physical distress if the administration of the drug were stopped. The purpose of this definition is to provide a mitigating circumstance in sentencing. QUIVAA argued that functions of addiction often went beyond purely medical matters, and that any such provision (which seeks to ameliorate the punitive nature of the law on individual users) needed to take socio-economic and psychological matters into account as indicators of impaired control for the purpose of lighter sentencing.

Section 168 sets out the charge for trafficking, and provides a maximum sentence of 25 years imprisonment in the case of a Schedule 1 drug and 20 years imprisonment for Schedule 2 substances. (7)

Section 169 'Supplying a Dangerous Drug' is complicated by the division of the charges into normal supply and aggravated supply. Aggravated supply is defined in subsection 2 as supply to a person who: is a child; has a intellectual disability; is within an educational institution (excluding tertiary and Adult education); is in prison; or doesn't realise that they are being supplied a drug. The maximum penalty is 25 years for aggravated supply of a Schedule 1 drug, 20 years if not aggravated, 20 years for aggravated supply of a Schedule 2 drug, and 15 years for a Schedule 2 drug if not aggravated.

QUIVAA's primary criticism was that the severity of these provisions reflected a view that drug supply was conducted by organised and predatory criminal persons, a view that is largely incorrect to the Australian situation.(8) QUIVAA recommended that a charge of simple supply be created that applied a non-custodial sentence to cases where the supply of the drug was conducted in an essentially social setting to people known by the supplier. This reflects the majority of Australians experiences in purchasing drugs. QUIVAA further argued that aggravated supply should take into account the growing



## taking the law into our own hands

prevalence of drug use amongst minors, and that such severe sentencing would alienate young people from health services and harm minimisation strategies, and would force them to rely on more sporadic and possibly more dangerous street supply.

Section 170 sets a penalty of 20 years for offences relating to possession of property derived from trafficking or supply.

This also relates to offences committed outside of Queensland.

Section 171 relates to the production of a dangerous drug. The severity of the sentence depends upon whether the drug produced was Schedule 1 or 2, the amount (determined by schedule 3 and 4) (9), and whether or not the person is drug dependent. Thus for a Schedule 1 drug: at Schedule 4 quantity attracts 25 years; between Schedule 3 and 4 quantities also attracts a 25 maximum unless the judge considers the person to be drug dependant, in which case it is 20 years, and if it is less than Schedule 3, 20 years. A Schedule 2 drug will attract 20 years if it is at least of the schedule 3 amount, and 15 in other cases.

QUIVAA limited its responses to this section to the charges of possession set out in Section 172. The sentencing penalties for possession are the same as the provisions for production (except that lower than schedule 3 amounts of both Schedule 1 and 2 attract 15 years). QUIVAA considers it is ridiculous that cases of possession could be viewed as being of the same severity as a supply purely on the basis of a quantity of the drug found. It did not believe that the police should be able to bring charges equal in sentencing to supply without proof of an actual offence of supply being committed. Schedule 3 amounts in particular are not unusual amounts of the substance to be in someone's possession particularly a poly-drug user engaged in a short binge or a person living in an isolated area. QUIVAA thereby recommended that all possession sentences be reduced to reflect less serious offences contained in the bill rather than attracting the second highest legally available sentencing options. That all references to schedule three amounts be deleted and that all matters of possession be standardised into a single charge and were directed to non-custodial sentencing.

QUIVAA further called for the draft Code to be standardised with provisions in SA, Victoria and

the ACT which have effectively decriminalised quantities of cannabis as being for personal use. Failing this QUIVAA requested that those people requiring cannabis for medical purposes be exempt, especially those receiving treatment for HIV/AIDS.

Section 173 imposes a penalty of 15 years for the possession of implements involved in drug use. This does not apply to a needle or syringe. QUIVAA stated this contradicted the harm minimisation aims of both the National and State drug strategies which seek to encourage a move away



from injecting drug use to alternative forms of administration. Section 173 also conflicts with recommendation 8.22 of the IGCA. It directly affects persons willingness to have in their possession those 'things' which facilitate non-injection and also those 'things' such as tourniquets, swabs and water which are required for aseptic injection. This section also makes it a crime to supply a needle unless one falls into the authorised class of persons. QUIVAA argued that this unnecessarily criminalised drug users who distributed to their network of friends and associates and was a direct impediment to safe injection. Two year imprisonment is also prescribed for the unsafe disposal of needles.

Section 174 creates the offence of permitting a place to be used for a drugs misuse offence. QUIVAA recommended that the onus of proof should reside with the state to prove that a person knew their premise were being used for a drug offence.

Section 176 defines an attempt to commit an offence as actually being the offence. QUIVAA considered this was too open to police abuse and that it should be removed.

QUIVAA also commented on section 370 which established the evidentiary provisions for

an offence and recommended that these provisions reflect the Health Act 1937 in allowing an independent analysis of drugs seized. It also argued that an amendment be made to the Evidence Act that excludes the trace elements in safely disposed needles from being used as evidence of possession. This discourages safe disposal and return. It further argued that in line with IGCA recommendation 8.33 that evidence of needles, syringes, and injecting material should be inadmissible as evidence.

There are strong indications that the government intends to place the draft Code before Parliament on 28 March 1995, around which protests and a picket of parliament have been planned by the Coalition of Women for a Realistic Criminal Code. There is little confidence that the government intends to enact a Code which reflects anything other than the reactionary stance inherent in parliamentary politics. This is reflected in the rejection by the labour government of its own Review Committee into the Criminal Code, and the rejection of the Criminal Justice Commissions reports into cannabis and the sex industry. The ultimate farce is the 'community' consultation process which effectively required under resourced community organisations to allocate limited resources to respond to issues the government had no intention of addressing realistically other than as an exercise in political expediency to the idea of consultation.

The labour government's commitment to HIV/AIDS education and prevention in Queensland is alarming if recent comments by the new Health Minister are any indication of current trends. Although his position on needle and syringe exchanges is satisfactory given the limited time in office the reactionary responses to legitimate education programs (The Bubble Boy Campaign & Queensland Mardi-Gras Float), the increasing community concerns that greater departmental censorship is on the cards and the threatened introduction of cost recovery in NSEP leads QUIVAA to believe that HIV/AIDS education and prevention in Queensland is being eroded by the labour government.



## references

1. *Queensland Criminal Code: A Submission On Behalf Of The Queensland AIDS Council for the Department of Justice and Attorney General Queensland AIDS Council* 1995.
2. Oral data from JoAnne Blain, SQWISI, 13/3/95.
3. See *Legal Issues Relating To HIV/AIDS, Sex Workers And Their Clients*, Intergovernmental Committee on AIDS Legal Working Party (1991), for more background.
4. *Report On Cannabis And The Law in Queensland*, Criminal Justice Commission 1994.
5. There is a huge amount of material of this. In particular look at Russell Fox & Ian Matthews, 'Drugs Policy: Fact, Fiction And The Future', The Federation Press 1992, and G. Wardlaw, 'Drug Control Policies and Organised Crime' in M. Findlay & R. Hogg (ed) *Understanding Crime and Criminal Justice*, The Law Book Company 1988.
6. Most notably the 1961 Single Convention, the 1972 amending Protocol, and the Psychotropic Substances Convention, 1971.
7. Schedule 1 drugs are Heroin, Cocaine, Phencyclidine and Lysergide. Schedule 2 is an extensive list including amphetamines, codeine, cannabis methadone, ecstasy etc. Schedule 5 relates to substances commonly found in medicines or other products and defines exception eg Codeine except where it is compounded and in preparation of less than 30mg etc.
8. Wardlaw (op cit) & Fox (op cit) p.13.
9. Schedule 4 quantities relate to Schedule 1 drugs, thus heroin and cocaine 200g, Phencyclidine 50g Lysergide .4g. Schedule 3 sets the lesser quality of these drugs eg Heroin 2g, Lysergide .004g and sets quantities for Schedule 2 substances eg Amphetamine 2g, Cannabis 500g.

## need someone to listen?

We offer a **sensitive** and **confidential** service for people up to 25 years whose lifestyle involves drug use. You can discuss relationships, family, finances, lifestyles or whatever you are struggling with. Our counsellors have a great deal of experience in working with young people who are using drugs and are sensitive to the emotional and relationship difficulties they sometimes experience. Give us a call or make an appointment. We are a free and friendly service.

**Youth Program • The Hothouse**  
**29 Grimes Street, Auchenflower.**  
**Phone: 3870-9122**



# scally & wags goats scape

## *law & order issues in queensland*

The beginning of the 1990's saw a focus of law and order rhetoric on the Fortitude Valley area, which was in the process of changing from a derelict inner city area frequented by homeless people and street dwellers, to a revitalised inner city area with increased money making potential. While the pollie-speak around the Fortitude Valley issue was that groups of mainly Aboriginal youths were holding Valley traders and shoppers to ransom, the view of many welfare workers in the Valley were not as simplistic.

Many workers felt that this area had become the home of many marginalised people and that their presence in the Valley was seen by Valley traders as interfering with their businesses and their ability to make money from the new clientele in the Valley. In order to overcome this problem, the issue, which was stripped of all the emotive arguments, was essentially one about the use of public space was turned into a law and order issue. As such, the Queensland Police Service were involved as agents of social control to enforce the values of the most powerful and organised group in the Valley - the Valley businesspeople.

In 1995, the claim is that the Valley has been cleaned up. Certainly, there are less streeties on the streets, less Aboriginal people in the parks and in the mall, and fewer of the Valley characters to be seen. The problem is all but gone. However, what none of the Valley business people or state or local politicians have asked is

**Law and order issues seem to get a big response from the public, and Queensland has a long and recent history of examples of law and order issues that have been used to gain political mileage. The Springbok tour in the early 1970's and the SEQEB strikes in the early 1980's are two examples of this.**

where has the problem gone?

Have the marginalised people of the Valley literally disappeared or are they simply waiting to appear elsewhere, when they are needed to become the focus of yet another law and order hue and cry in Brisbane?

Considering that we are approaching another election in Queensland, and that there has been a great deal of media focus in recent weeks on the "Toombul Boys", it seems timely to raise these questions.

Since January this year I have worked with young people in the inner city areas of Brisbane. I work as part of a team whose roles include outreach work with young people who are disadvantaged and at risk. Initially our work centred on the Valley and City Mall, however our contact with young people in these areas was minimal, perhaps due to the installation of large numbers of security cameras and a sometimes undercover but always visible police presence.

In the course of this work, we talked with police officers who told us that there were num-

bers of young people who were hanging out at Toombul shopping centre. A riot was reported in local papers, which had all the characteristics of a gang war, and young people were accused of standing over Thursday night shoppers, and threatening the life of a young woman who allegedly gave evidence to the police concerning the



Toombul Boys.

It was decided that we should spend time at Toombul to make an assessment of the situation and try to link up with young people who were part of, or had knowledge of the group.

Our first observation was that there were unquestionably a large number of young people who seemed to be using particular areas of Toombul shopping centre, at least on Thursday nights which is when we were at Toombul. These young people congregated outside the upstairs entrance to the food court, where there is also an amusement centre - seemingly a logical place for young people to congregate. It was also apparent that these young people were from a diversity of ethnic groups: Aboriginal, possibly Samoan, some Chinese and Vietnamese and young Anglo Australians. It was also evident that there were a



large number of plain clothes police officers, as well as two ATSI Liaison Officers who were on speaking terms with the young Murri people there.

We sat outside watching the young people watching the detectives. At no stage were the young people abusive, threatening or even unruly. They were not drinking, in fact many of them were not even smoking cigarettes. At 9:30, one of the young Murri people announced that they were going to catch a bus home and this group moved off together. Very shortly after, we realised that the police had also disappeared.

We located the police, and the young people the police had apparently followed, outside the Toombul railway station. The police appeared to be questioning the young people - although the young people later said they had no idea why they were being questioned - but none of the young people we spoke with had been charged with any offence.

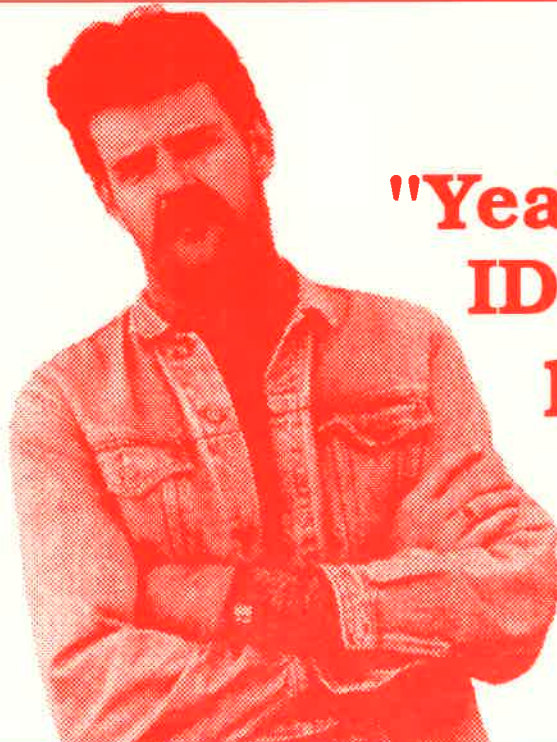
Many of the young people claimed to know about a group called the Toombul Boys, but denied that the reports in the press and the subsequent action by police were warranted. So we return to the original theme of this article.

Are the Toombul Boys the threat they are being described as, or are they a convenient platform to whip up the law and order issue in another area, to increase police presence, and to validate the fact that some citizens are welcome in public spaces while others are not? Perhaps the real question is whether we are moving forward as a society which seeks to incorporate our differences, or whether we are regressing hopelessly towards the politics of fear. Maybe I've just had a bad dream and this is still really the era of John and not the Year of Tolerance.



Vics is a long term study of injecting drug users conducted by the Macfarlane Burnet Centre in Melbourne. Since it began in 1990, we have enrolled some 400 participants and have interviewed them on a range of subjects, particularly risk factors for HIV, Hep B and Hep C. Our aim was to interview participants every 4 - 6 months, though of course this has not been possible,

and with time has become increasingly more difficult. This is **final call** to all VICS participants. We would like to interview all those enrolled in the study one last time before September '95, when the study will finish (payment \$30). Wherever you are, even if you are interstate or overseas and regardless of whether you are still using or not. You are still an important part of the VICS story. The successful completion of the study depends on your help. Please contact us as soon as possible. Jenny: [03] 489-8578 • Michael: [03] 646-2618 • John: [03] 417-1562 • Frans: [03] 850-7954. Answering machine: [03] 482-3143.



**"Yeah, I'm an IDU. Got a problem with that?"**

# Searching *Spirit* for the

by a sister of yahi

Our connection with our Spiritual Ancestors was abruptly cut over 200 years ago, therefore our cultural beliefs and values have gone through a transition of stages from practicing of a full cultural awareness to a non-existence (Christian run missions) to now – **picking up the pieces of our past.**

This separation from our spiritual beliefs has been effective in creating alcohol and substance abuse within our communities, which has for 200 years been left to accelerate with devastating effects upon the Indigenous community.

Given that Spirituality shaped us (Aboriginal People) as a nation before European interference, it should be the starting point to build a solid foundation for national unity of the Australian Aboriginal people.

Letting go of the past and building our future with our Culture and Spirituality intact will in effect combat or make effective in roads into solutions to the problems of alcohol and substance abuse.

**When we get back to our spiritual beliefs, then and only then will our spirits begin the healing process.**

The following is an extract from *The Book of Yahi*, a book dedicated to the restoration of indigenous spiritual beliefs.

## Articles of Faith

1. We believe in the eternity of the universe which is the embodiment of an eternal intelligence of infinite power and wisdom, who's forming force and sustaining power is responsible for all things both visible and invisible. This supreme intelligence, we call the Godhead. And in unity with this Godhead, coming from this Godhead, and being part of this Godhead, of the same substance, power and eternity, is a multitude of beings known to us as the great Gods of the universe, of which our own God **Baiaame** is one among that number.

2. We believe that **Baiaame** is this Archetype of the **Koori** peoples and represents and stands for all that is good among our people, that **Baiaame** was appointed by the grand council of the great Gods as the supreme ruler and overlord of this land of **Pamanyungan** (Australia) and its native people thereof.

3. We believe that the spirit within mortal beings consists of two major elements. One is negative and the other of positive content, and that the part of negative content is a small awareness which in time will grow and increase into an intelligent personality, and that the part of positive content, embodies the wisdom and eternity of the supreme God which forms itself as the conscience within man, and will exert itself upon the negative content, that a being may be formed in the image of God's own eternity. That these two parts combined proceeds as a small spark of like from the supreme Godhead to become

embodied in flesh. This small spark, yet unborn is the **Inapatua**.

4. We believe that the **Inapatua** on becoming embodied in flesh is born into this world by the parent beings, that they may fully develop itself and start exerting itself upon the negative factors, thus beginning the process of forging the child's eternal future.

5. We believe that this mortal level of existence **Tya** with its troubles and tribulations, with its rewards and punishments is so designed to forge the spirits within beings to a greater strength that the eternal part within us may form and eventually fully emerge. Thus ensuring us of everlasting existence. That in time we experience other existences in other interdimensional worlds.

6. We believe that the negative content within us which forms the major part of our striving force, which is **Ego** with the selective power of free will, working in harmony with the positive force which guides our selections in its form of conscience, will produce goodness which will eventually forge these two elements into a unity of oneness. And as two colours blended together will produce a colour of entirely difference form, so these two elements within us, on becoming a oneness, produces an entirely different element which is the essence of eternal existence. Thus it is assured that we will attain everlasting salvation from death of spirit.

7. We believe that **Baiaame** took upon himself flesh on two occasions. The first occasion for the



establishing of the **Koori** people upon the land and ensuring the future of the race. And on the second occasion for the establishing of the laws and codes of living, that his children may make their journey through life a righteous one, thus eventually attaining eternal life.

8. We believe that **Baiaime** on leaving this Earth, returned to the world of the Gods, taking his place in the Divine Council of Gods, in the seat of the overlords, and that on the petition of prayers from the good and upright people, he will heed requests and grant

results according to his supreme wisdom. The prayers of the unrighteous are as this wisps of smoke and are scattered upon the winds and never reach him, as those things that are unholy cannot reach into the heavens.

9. It is the greatest of all wishes by the great Gods that man through his recognition of Divine things and good upright living, proceeds through life ever forward towards everlastingness, realising that they whom constantly go against their consciences and the laws of God, eventually extinguish that eternal part within them sinking into the wretchedness of unclean living, feeling

within themselves that pangs of desperation and fear. It is for that reason that the ministers of the Church of **Baiaime** must be faithful people by which the pure word of God is preached, realising

that even in the most sinful person, a small amount of good remains. Thus it becomes their duty, to re-enforce this small amount of good, building upon it in the interests of the persons eventual salvation.

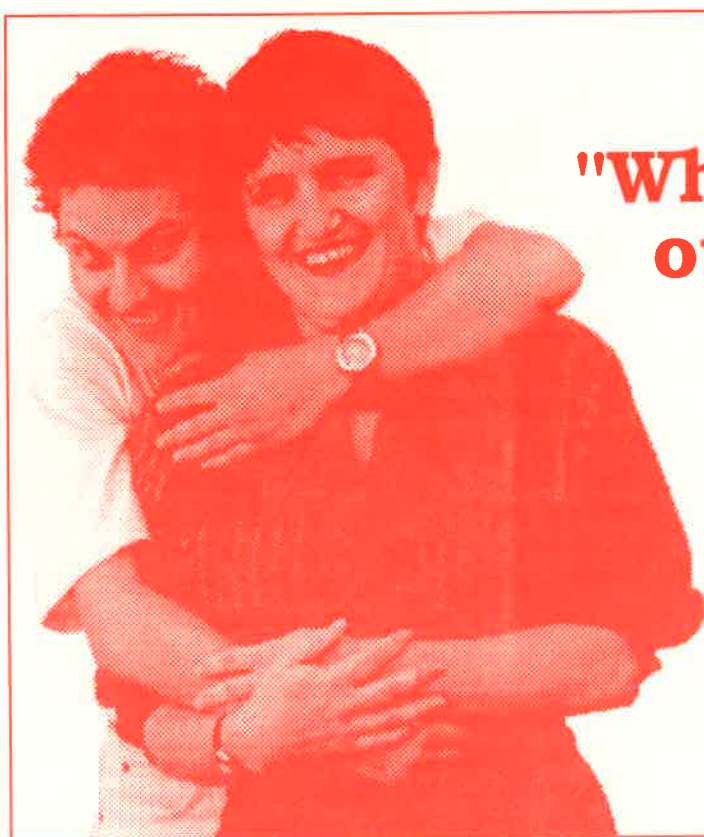
10. Those of the Church of **Baiaime** will not condemn those of another belief as evil or sinners, for regardless of religious doctrines there is still nevertheless within people, a part of the supreme Good, which apart from and outside of their religious doctrines, impresses itself upon

their natures motivating them towards their eternal destiny. Do not speak words of condemnation against any God, unless it be fully proven that this god is false. Keep no person in the Church against their will, nor cause disharmony among family units, for those married couples of mixed beliefs must learn to live in harmony. Cause not evil or suffering to any person in the name of the cause.

### ***Baiaime***

*He looks on with ever watchful eye  
A tender sadness within his heart  
Out own true God Baiaime  
Why did we from his ways depart?*

*He is us and we him  
He is the sum-total of our way  
But now he sadly shakes his head  
Why have my children gone astray?*



**"When I found  
out my mum  
was an IDU,  
I blamed  
myself.  
Now she's  
my dealer."**

# hitting

by tracey wing

As many of you will know, (and for those of you who don't) in late March, the latest gay men's safe sex campaign, known as the "Bubble Boy" campaign was launched by the QLD AIDS Council.

# us where

The 'swap cards', which were produced in packs for the campaign, were almost immediately banned from distribution by the QLD Chief Censor, after the cards were referred to him by the newly

# it hurts

■ ■ ■

appointed health minister, Jim Elder. A decision regarding the card's exemption from the censorship ruling, on the grounds they are for health education, is still being waited for. Meanwhile, the cards are gathering dust and gay men are continuing to contract HIV.

There's a lot of issues, for us as HIV workers and for QUIVAA as an organisation, which come up as a result of a decision like this. What I'm going to talk about is how these situations bring the spectre of censorship closer to home periodically, and what the effect of working in the shadow of that spectre can have on our ability to reach our target group with relevant and appropriate information.

Firstly I'll clear up any notion that the swap cards were censored because of the information on them, or the way it was presented. Without casting aspersions on the cards and campaign, they aren't saying anything that hasn't been said and distributed in other education material, it's just the wrapper which is different. Explicit language and photos of gay men engaging in sexual activity have been used in a number of printed resources which have been around for some time, without a peep

from politicians or the censors. Come in to QUIVAA and have a look at '6 Tips for hard cocks', or the 'Going Down?' leaflet. There's an arty black and white poster on the wall of a man giving another man a blow job, and we've got some attractive postcards showing men doing things to each other which hardly involve social cups of tea.

The point is, regardless whether the people involved say it is, outrage over unusually explicit material being released for the first time therefore endangering the moral hygiene of children everywhere, is not the reason the cards were censored.

What is the reason then? On a small scale it is a matter of political points scoring. With a state election just around the corner, the opposition saw the opportunity for some cheap publicity and went for it. They dragged out the tired old excuse of fearing for the untainted heterosexuality of the state's youth, and the media and Chief Censor lapped it up.

On a larger scale, I think it's ok to sound like a broken record and blame the government, opposition and society in general, all of which continue to support this sort of homophobic bullshit without so much as a by-your-leave. Without harping on about it too much, consider what would have happened in a perfect non-homophobic world. The opposition leader would have jumped up and down, the media would have labelled her a homophobe, the health minister would have told her where to get off, and the rest of us would have breathed a sigh of relief that they didn't win the last election. The cards would now be reaching and educating the people they were meant for and we at QUIVAA would be having a giggle at the photo that's supposed to represent safe injecting, (sorry guys you're meant to stick the needle in your arm not wave it around your head!)

But where does this leave us? It means we start to question every new resource we want to produce. Experience has showed us that the best way to educate specific groups about sex and drugs is to talk about and show specific behaviours in all their graphic detail, and do it in the language and style that is appropriate and relevant to that specific group. But if we have to worry about our resources getting past the censor before it gets to the people, we waste precious time and effort trying to second guess what the censor will allow. Worse, with the fear that our material will not be allowed to reach the intended target group, we are more likely to make mistakes and produce something that doesn't work. If this happens, we have to answer



to the same funding body which even now is changing our service agreement so it will include an obligatory 'consultation' with them before a new resource can go to print. In other words, we have to show them everything first so they can demand it be changed if they don't like it. If we do produce something that is ineffectual, this same funding body, not to mention our peers, want to know why. Why are we wasting time, effort and money? Why are we wasting the 'AIDS dollar'? Perhaps the worst thing about a scenario like this is that it could lead our peers, our "target" population, to question our relevance to them, and could certainly undermine our faith in our own abilities as educators.

We expected and deserved better from the health minister, who's name, at least until he shows some evidence of having a spine and some decent advisers, shall remain Mud. Next time we put out a pamphlet which seems to be pussy-footing around something to do with hitting up or fucking, instead of getting straight to the point, you'll know why ...



thought the calendar was promoting drug use.

At first I thought we were stuffed. No amount of argument, negotiation and throwing their own policies at them made any difference, an election was coming up, and Health Advancement bureaucrats had long ago sold their souls so as to tow the government line. They were not prepared to risk another Bubbleboy controversy

and risk damaging the government's chances of re-election. However, back at the QUIVAA office, we decided that bureaucracy and power-mongering was not going to stop us from getting life saving information to the communities that need it. So we decided to raise the money ourselves.

It took three days. then followed the nightmare of starting from scratch (QUAC backed off faster than a health minister from his

own statement) and we had three days to produce a calendar which had to be printed, folded and stapled in 36 hours if it was going to be ready for the Pride Fair Day. Needless to say, the staff and volunteers, who are used to working miracles, did it. We did it by ourselves, just us and the community. Sure we were lucky it was only a small project si it didn't cost too much or take too long, but it brought home to me that is the government and/or the Health Department won't live up to their responsibilities and promises, then we can do it for ourselves.

If you would like a calendar (it's financial year, so 10 months are still useable, and the info on all the months will always be), there are still some available at QUIVAA. A gold coin donation, if you can afford it, is gratefully accepted and goes towards a reprint if necessary.

This time we were able to say whatever we wanted, unfortunately, that won't always be the case.

**Doing it yourself = giving the finger to the people in power who don't care if you live or die ...**

**silence = death**

## Trying To Get Bent censorship, elections and the next time

In May this year, myself, Dermot and Darryl from the Queensland AIDS Council, and Kelly, a freelance desk-top publisher, began work on a queers and drugs calendar, to be released during the Brisbane Lesbian and Gay Pride Festival in June/July. We had sent in a submission to Health Advancement, a section of the QLD Health Department, outlining the project and its contents, in a bid to get one of the SNAP grants on offer in February. Our submission was approved in April, and we were given the go-ahead to start work on the calendar, with a \$4000 budget to work with. The money to be received once Health Advancement had approved the content of the calendar.

In the time leading up to us having the first draft of the calendar text ready for inspection in mid-June, two things happened. The first, QUAC's bubble burst, and their gay men's swap cards were banned from distribution amid much controversy. The second, a state election was announced for July 22. These two events were seemingly unconnected, however, combined they resulted in Health Advancement withdrawing our funding, under the guise of saying that they

## about Hep C

The following letter was received by the Editors of *Dart*

Dear Editors,

We are writing this letter in response to Jeff Ward's recent article on Hepatitis C in which he reports that the response of our Governments to "this major health crisis" is "not much".

It may be fair to say that Commonwealth and State Governments are not doing enough in response to Hepatitis C in Queensland for the benefit of your readers we would like to list some of these below:

1. Preparation of the latest information about Hepatitis C (in the form of a series of Facts Sheets) which were sent to all registered medical practitioners in Queensland as well as to community groups (including QuiVAA). To our knowledge no other State or Territory has managed anything similar.
2. Formation of Brisbane's Support Group and Queensland Hepatitis C Council - It is true that QuiVAA has played an instrumental part in establishing these groups, but so have but so have representatives of Queensland Health as a number of other individuals who have put a large amount of time and effort into the groups.
3. Research into the epidemiology of Hepatitis C in Queensland - A number of research projects have been undertaken and are under way. These projects are crucial to strategic targeting of prevention programs.
4. Responding to telephone enquiries about Hepatitis C in Queensland - People at Queensland have responded to up to 10 calls a day from general public about Hepatitis C. We have also talked to groups of general practitioners and support groups outside of Brisbane about Hepatitis C.
5. Promoting the availability of sterile injecting equipment, education programs for both users and people who influence them and the fostering of user self organisation.  
It is important to remember that not sharing equipment is absolutely necessary to prevent the spread of Hepatitis C and other blood born diseases. Needle exchanges and other user education are integral to this and should not be overlooked as a Hepatitis C prevention strategy.
6. Funding for attendance at conferences and meetings - It is important to remember that Queensland Health provided the funding for two (2) staff from QuiVAA and a QLD Health employee to attend the National Hepatitis C symposium. Also a representative from youth link was funded by the Tropical Public Health Unit (part of Queensland Health) to attend the national Symposium's satellite meeting on Prevention of Hepatitis C.

Preventing the spread through injecting drug use both Hepatitis C and HIV means never sharing equipment which may have been contaminated with blood. There is no mystery about Hepatitis C. The main problem is that it is already common in the injecting drug using community that a single incident of sharing could be enough to get infected. there are large numbers of injecting drug users who are not infected and who may never get infected. There are large numbers of injecting drug users who don't share. HIV infection is almost as common as Hepatitis C in injecting drug users in New York and some other cities in the USA and elsewhere.

There, because it is so common, a single incident of needle sharing could be enough to get infected with HIV. The response in Australia to quickly provide needles syringes to in getting drug stopped that from happening here. However, Hepatitis C was already amongst us when the needle exchanges came aboard in Australia. This just means that people have to be even more careful. this means NEVER sharing, not even for the first time.

We hope that Queensland Health will continue to work together with QuiVAA and other community based organisations to try to halt the spread of Hepatitis C. Working together means co-operating rather than confronting, and acknowledging what has been done as well as criticising for what has been done. The partnership is not just a set of nice words in a Strategy document, it is a living, working human relationship and that relationship like all others needs care, attention and mutual support.

Yours faithfully

Phil Carswell

Adrian Buzzolic

Linda Selvey

HIV/AIDS Section Prevention & Control

don't forget to send in your articles, stories, poems, pictures or letters for the next issue of *dart*



**Life for me these last few weeks has been one continuous fuck up and I don't seem to be able to get it all under any sort of control at all.**

I've lost a real close friend who died from an overdose of drugs and also the most important person in my life, my mother and all I've done to cope is to take drugs. I feel so much like a gutless whimp that it isn't funny and I don't feel all that good about myself, my self-esteem is non-existent.

I don't have much faith left in what life has to offer me and I can't see any real reason for living as the doctors have said that I have emphysema with a cancerous legion in my right lung and a benign tumour on my prostate gland, that if it isn't operated on within 3-6 months will more than likely end up becoming terminal and because I'm a public hospital patient on an invalid pension there isn't much chance of me getting to have the operations I need in that time period, so I guess what I'm trying to say is that the doctors predictions on how long they expect me to live (1 year) is probably going to be right and it really scares the shit out of me and I really don't have the guts to commit suicide and I wish I did as I can't really handle the pain anymore that I am going through. This all sounds like I feel sorry for myself and that I am

looking for someone to pity me but I'm not, because of the lifestyle I have chosen to live when I was younger, I never ever thought for one moment of the long term effects of my drinking, popping pills and shooting "speed and heroin" usage and smoking dope, life when I was young was one long party that is now slowly killing me as each day goes by and there isn't one thing I can do about it except maybe pray for a miracle that doctors can operate in the time they've nominated, but unless I

win lotto or suddenly come into a lot of money there isn't much chance of that happening. All I can now do is live each day to the fullest and try real hard not to use any drugs but even that seems to be impossible to do because I don't really want to feel my emotions or expose how I really feel.

Through the lifestyle I chose to live, I have been to boys homes and gaols eleven times and have been sentenced to a total of twenty years and I have served fifteen and a half years in real time of that twenty years and when you consider that at the time of writing this letter. I am 45 1/2 years old, then it all works out that I've spent 1/3 of my life behind bars and a crime history that spans 20 years and all the crimes I've committed have been done to supply drugs for what I thought was to have a good time. I never ever thought that I was addicted to drugs or that drugs were a problem or that the using of those drugs were going to be responsible for the illnesses that are now killing me slowly today.

Today I can only hope that whoever gets to read this learns from the mistakes that I made and never use drugs or abuse their lives the way I did and if they are just starting out to use them I can only hope this letter scares them enough to stop before it's too late, because no amount of "fun and good times" is worth the shit I've put my life through and the lives of my family and parents. You will end up being a very lonely and having no one who trust, loves or even gives a fuck about you.

Don't feel sorry for me or pity me, but just learn from a fuckwit, would be know-it-all who has been there and who didn't get to hear a true story about the results of using drugs and alcohol over a long period of time, it is too late to save my life but there is still a chance for any young person who reads this and also remember I not only regret my past but I'm also ashamed of it and remember you do need friends and real friends will listen when you need to talk about problems and real friends won't judge you but offer their help.

From a man in the pain of loneliness, **Garth H.**



more



### **Quivaa's Cheap Fruit & Veg Co-op**

If you are interested in contributing a small amount of money in return for a big box of yummys. Quivaa is hoping to start a fruit & veg Co-op. If there is enough interest in this idea let us know by phoning Tracy or Josy at Quivaa or 252 5390

**Free Food** We are organising one day a week to have a shared meal Nothing fancy, but filling, good food. Everyone is welcome If you have any spare bring it along otherwise come and share ours. We hope to make it a regular event, if there is enough interest. The first meal will be on October 21 at 93 Brunswick St, Valley

**Playgroup** Inside this edition of *Dart* you will find a survey about whether you as parents would use a playgroup that was specifically run by and for IDU parents and their children. This playgroup would be a member of the playgroup association and have access to great toys and books and would also be able to provide some health services for women and children. This would be a free, safe, non-judgemental group. If you are interested, please fill in the survey and return to Tracy Green at Quivaa or come in or phone and have a talk about it. Ph: 252 5390

There has been some controversy about a recently made Quivaa resource with the title, "it's gonna hurt but it should do you no harm".

It is the first in a series involved with safe guidelines for skin puncturing body adornment. This area is one that for a myriad of reasons has never had an education strategy directed at it, even though tattooing alone is now responsible for 30% of Hepatitis C transmissions. IDU's are responsible for 46%.

go the hack!

The first resource was designed for those accessing services and the second was going to be a set of guidelines for service providers. In this particular area of the community so much is unspoken and as the old adage goes it is ignorance and silence that kills.

The unfavourable response from certain sections of the health department is disheartening as it seems that one stigmatised group at risk, will receive non-judgemental treatment and yet others, that admittedly challenge a lot of things in the mainstream mind, exist and have as much right to education with a view to prevention.

Issues like tattooing, piercing, branding and self-mutilation have and it seems unfortunately to be destined always, to be deemed abhorrent to the average citizen, however to other individuals these practices are empowering and can not remain under the blanket and hope that your daughter never ends up participating in such confronting behaviours. As we who do not find skin puncturing body adornment as a practice of the dysfunctional, criminal or mentally ill desperately need information and effective education so as to avoid Hepatitis C and possible HIV.

Anyway the most trouble was caused by the closing phrase "go the hack!". Ridiculous to some it would seem that go the hack would be interpreted as go and hack rather than positive message it is intended to be. Recently, I was fortunate enough to talk to Bill Walsh of the Cosmic Psychos who in 1989 released a recording entitled *Go The Hack*.

**V:** So following the release of *Go The Hack* no doubt there was a gaggle of mutilation fans whose numbers were on the increase at your gigs.

**B:** Well no more than usual.

**V:** Can you tell me what you believe "go the hack" to mean? Did you ever expect that it would be viewed as a negative phrase?

**B:** It's a real Aussie kind of expression. It is definitely positive. Taking into consideration the place the phrase has in popular culture it is difficult to strip it back to original meaning.

We consult text in the hope of garnering the true meaning of 'hack'. Nearest at hand being the illustrious *The Pocket Macquarie Thesaurus ...*

**HACK** *n* 1 axe 2 car 3 cut 4 horse 5 kick 6 platform 7 rack 8 shelf 9 writer 10 cut 11 damage 12 dislike 13 kick 15 roughen  
*adj* 10 mediocre

Well I'm glad we did that. Everything is so much clearer.

**B:** There is sometimes this thing that I've noticed about the denial of the validity of colloquialisms. You can't have the people making up their own language, having their own voices.

**V:** Maybe even somewhat of colonialist attitude.

**B:** Yep. So many new words added to dictionaries every edition. So many new words spoken by people and the evolution of their meaning. Back to hack ... 'Go the hack' probably most simply explained is like, find your own boundary and keep going until you bump up against it, do your best, have as much from something as you can get, go for it, onwards.

**V:** What lead you to entitling your record, *Go The Hack*?

**B:** Fred Negro actually came up with it, so blame him.

On the following page is a copy of the pamphlet in question. Furthering the quest, I'd like to call for any feedback offered as to how offensive it is to you? Please direct any response to Vic at Quivaa, 9-5 weekdays. ph: 252-5390.



**Guidelines for skin puncturing procedures  
for body adornment (tattooing,  
body piercing, branding, self-mutilation  
and other body modification)  
for those accessing the service.**

it's gonna hurt  
but it  
should  
do you  
no harm

### **tattooing**

Your first tattoo can be a very daunting experience especially if you don't know your tattooist before you arrive with the design you want to put in your skin forever more in your hot little hand.

You no doubt have gone to a great deal of trouble deciding on the design of the tattoo, you should go to a certain amount of trouble choosing your tattooist not only for their ability to accurately render the tattoo but also the sterility of the practices undertaken in their studio.

You are going to pay fairly dearly and this should mean that new needles are used on you. If this is not the practice in your chosen tattoo studio then at least the needles should have been through an autoclave sterilisation.

New ink in a well should be used also as small amounts of blood are transferred from the dipping process into the well of ink. Blood is the thing to be concerned about.

HIV and maybe more likely Hepatitis C are passed on from person to person via traces of blood. If your tattooist seems cagey about explaining the sterilisation process undertaken at the studio or doesn't wear gloves (if they aren't concerned about their own well-being, they're not going to care much about you!) then go somewhere else.

If you've agreed to let a friend tattoo you who isn't working in a studio all the same things apply.

### **body piercing**

The first thing you should do is make sure that the piercer knows what they are doing. There are 12 facio-cranial nerves that no piece of metal should ever go near and that's just in you face.

A new hollow needle should be used for every client, every piercing. After-piercing care is extremely important and if any pus or bloody muck oozes out of piercing it should be cleaned carefully with something gentle like sunlight soap not medi swabs. Your piercer should give you some instructions as to after-care.

Don't get hold of an 18 gauge needle from an exchange and pierce yourself and your friends. You can't tell by looking at someone what is coursing through their veins.

### **branding**

Because of the high temperatures involved in the process of branding it is quite a safe activity as far as blood borne virus' go. Look after your new wound (Not too well though, you do want a nice scar) yourself and don't let anyone else come into contact with any mucky bandages or tissues you've used.

### **self-mutilation**

If you are going to slash up use a new razor blade and don't smear your blood on anyone else

except yourself. As mentioned above, burns are the most sterile way of mutilating. When worrying your wounds dispose of the scabs (go on eat 'em) and anything you use to wipe up bloody muck where no one else can come in to contact with them.



### **last word**

When undergoing any of the above procedures look after your general health so you have a better chance of healing up nicely. Don't take any shit about the choices you have made to modify your body from its original state. Make sure your reasons are clear to yourself not necessarily those around you. Go the hack!

more



**Heroin Trials** The final report for the ACT heroin trials is complete. It has a 26 person task force at work on the recommendations (QUIVAA has copies for interested persons). It looks like starting next year if all goes well. Stage One is 40 participants on either heroin, methadone or a combination of both (random selection). Methadone doses will remain oral. The heroin doses will be in injectable form, to be self-administered under supervision.

The trial selection criteria is:

- a) proof of residence in the ACT since 1993. Please don't move to the ACT to try and be a trial participant. You won't qualify and could put the trial in jeopardy
- b) past or current participation in the methadone program in the ACT.

Stage One goes on for 8 moths. If it is successful, they will go on to Stage Two. This will run for 10 months, and will be the same as Stage One, but with an additional 40 participants. Stage Three – or the actual trial – will add another two cities, and have a total of 250 participants. This stage is not expected to happen till 1999, assuming there can be changes to the state, federal and international drug legislation.

**Sorbitol: Methadone Additive.** Methadone injectors beware! Caramel and other sugar compounds (additives), have replaced former sugar additives in methadone. Another additive SORBITOL has also been included. The makes injecting methadone syrup *much* more dangerous, due to the effect it (sorbitol) has of increasing the acidic content of your blood. This can result in the *fata*/blood disease 'Lactic Acidosis'. Take care!

### World AIDS Day

The World AIDS Day ceremony is at St Stephen's Cathedral this year. The theme is Shared Rights, Shared Responsibilities and will be held at 7pm, December 1. Go and show your

support, remember friends and relatives.

### The QUIVAA Exchange

It's all happening in the QUIVAA exchange and drop-in centre folks. What you need is what we've got. That includes injecting equipment, information, advice, support and a friendly smile. We've also got a return rate higher than anywhere in the state and it's thanks to you people out there bringing back your used fits. Keep up the good work! Tracey is the exchange worker – ask for her by name. Don't forget to spread the word and not the virus. If you have friends who could do with some info/advice, and haven't seen us, let them know! Remember, just as we're proud to supply you, we want you to be proud of who you are and the choices you make. We are all in this together and together we can end the AIDS crisis. **FUCK SAFE – SHOOT CLEAN (and be proud).** There are more exchanges listed on the back cover.



**"Which one of us is an IDU? One of us? All of us? It depends on if there's enough to go around."**



in session with

dr Spoon



## Police As Visitors

**When it comes to inconsiderate house guests, like anybody, I've had a few. In terms of being consistently annoying though, it would have to be the police who win hands down. That this is so, disproves a favourite theory of my mothers; that neat dressing is an indication of good manners.**

For a start their sense of timing can be atrocious. The other day I was sitting quietly at home mixing up an after work taste, when suddenly the front door swung off its hinges and in stormed three policemen. They were waving a piece of paper that they said was an invitation when I knew I hadn't sent out any invites on account of only having enough drugs for one person.

It put me in an awful position. If I put the needle into my arm before they reached the living room, I knew I would feel so rude for not being able to offer them anything. If I didn't do it, I felt certain that they would probably demand my drugs and not even share them with me.

I'm sorry, call me rude, but I took the first option. Well the way they reacted you would have thought I had burst into their house and taken the last of their drugs.

I offered them a seat but instead they asked me to stand and demanded that I produce more drugs. I explained that I didn't have any left but for some reason they wouldn't

believe me. Now, when my friends ask me if I have any drugs left and I say "no", they will accept that there are none available and the topic of conversation will move onto something else.

The boys in blue however couldn't take no for an answer. I mean I've had friends who never talked about anything but drugs, but that was because all they did was take drugs. That I can sort of understand; its boring, but comprehensible. But when people who don't take drugs, visit you in a frenzied manner with a dodgy invite and then want to talk about nothing but drugs, well personally I find it a bit much.

Either they had atrocious hearing or bad short term memories, for they kept asking me the same questions over and over. Given the extreme state of their disappointment, I thought it best not to tell them that it was heroin that I had just taken. It made me wonder: Does the police force choose people with bad manners or do they train them to have bad manners?

If that wasn't enough they then said they were going to go through my house with a fine tooth comb and began to dismantle everything. At this stage I found it a real struggle to remain polite. Once they had completely destroyed my house, finding of course no drugs (I had told them there were none), they left. No thank you for having them over, no invitation to visit them, I was quite shocked.

After putting my house back together, I gave the whole event some thought and concluded that there needs to be some serious changes made to police training.

A) They need to be taught that it is rude to visit people they don't know without an invitation.

B) If they persist in this they should always bring their own drugs.

C) It is rude to doubt the sincerity of a host and to ask the same question over and over. In fact I think they need training in how to have a conversation. They will never have any friends otherwise.

D) If they pick something up they should put it back where they found it. If they break something they should fix it or at least offer to pay to have it fixed.

E) Given the level of conversation I experienced with the police and their one track minds I think the required reading list should be broadened. As a last resort if it is only drugs that trainee police want to read about then they should be given "Fear and loathing in Las Vegas" or NUAA News, not Fred Niles guide to better living.

next dart deadline Oct 9

STREET  
FITS

Here is a list of the main needle exchanges around Brisbane. You can also ring ADIS (Alcohol and Drug Information Service) on 236 2414, 24 hours a day.



If you have any questions about these exchanges, call QUIVAA. If you're a bit suss about using any exchanges (for fear of being busted or discriminated etc.) call us for a chat & we'll help you find the right exchange service for you. You don't have to exchange fits, you can either pick-up, drop off, or both. You can also get information and referrals onto services you need. These services are all free, and work hard to help you stay safe!

where  
to get  
'em

**QUIVAA** 93 Brunswick St, Valley.  
Mon - Thurs 9 - 5, Fri 9 - Midnight.  
Ph 3252 5390.

**BIALA** 270 Roma St, City.  
24 hours a day. Ph 236 2400.

**BRISBANE YOUTH SERVICE (BYS)**  
836 Brunswick St, New Farm  
Mon - Fri 11 - 3. Ph 254 1131.

**ALFRED STREET CLINIC**  
162 Alfred St, Fortitude Valley. Friday nights,  
5pm - 8pm.  
Ph: 227 7095 or 227 7091

**QUEENSLAND AIDS COUNCIL (QUAC)**  
32 Peel St, Sth Brisbane.  
Mon - Fri 9 - 5. Ph 844 1990.

**SELF HEALTH FOR QLD WORKERS IN  
THE SEX INDUSTRY (SQWISI)**  
65 Vulture St West End.  
Mon - Fri 9 - 5. Ph 844 4565.

**BODYLINE SPA AND SAUNA**  
43 Ipswich Rd Woolloongabba.  
Sun - Thu 12pm - 3am & Fri - Sat  
12pm - 7am. Ph 391 4285

**GLADSTONE RD MEDICAL CENTRE**  
38 Gladstone Rd Highgate Hill  
9 - 7pm Mon - Fri. Ph 844 9599.

**AICHS (Aboriginal & Islander  
Community Health)**  
12 Hubert St Woolloongabba.  
Mon - Fri 9 - 5. Ph 891 6060

**INALA COMMUNITY HEALTH**  
Wirraway Pde Inala. Mon - Fri 8.30 - 5pm.  
Ph 372 4244

**LOGAN YOUTH SERVICES**  
2 Rowan St, Kingston. Mon - Fri 9 - 5pm.  
Ph 208 8199

**UNI OF QUEENSLAND** Health Service, St  
Lucia. Mon - Fri 8 - 5pm. Ph 365 6210

**GRIFFITH UNIVERSITY** Health Service -  
Nathan. Mon - Fri 8 - 4.30pm.  
Ph 875 7299

**REDLAND HOSPITAL** Accident &  
Emergency. 24Hrs. Ph 286 5700

**WYNNUM HOSPITAL** Accident &  
Emergency. 24Hrs. Ph 393 3122

**LOGAN HOSPITAL** Accident &  
Emergency. 24Hrs. Ph 299 8899