E. TYPES AND SATURDAY MGHT FEVERS -The "STAYING ALIVE" Campaign

by Steve Harding, Education Officer, Eastern Health Board Tutor in Addiction Studies - Trinity College

In the middle part of the 1980s New York Magazine published an article about a drug which, although first synthesised in Germany in 1912, had re-emerged in therapeutic trials on the East Coast of America and was now finding it s way onto the illicit streetmarkets. The drug 3, **METHYLENE** was DIOXYMETH AMPHETAMINE (MDMA). Young people in small numbers were experimenting with the drug and describing extremely pleasurable sensations - hence the compound rapidly became known as Ecstasy. The reporter however was unimpressed and probably unperturbed as he wrote: -

Given that Ecstasy isn t much of an aphrodisiac and doesn t pack the wallop of any number of other party drugs, it seems possible that it will be little more than a passing fad among recreational users - an ultimately disappointing street drug, something tried once because of all the hype and then discarded . (Klein. J. Cited in Cohen. R. 1998)

Klein's prediction may well have been correct had it not been for other developments happening simultaneously in the music world. In the mid 1980s new sounds began to emerge from nightclubs in Chicago, New York and Detroit. The beat was faster, the rhythm relentless, a new generation Dancing to it s own beat. Peddled under different names as House, Garage, or Techno music that involved a DJ concocted combination of synthesised percussion tracks and high energy Eurobeat sounds that reached 120-130 beats per minute, the music spread. The names continued to change as the beat soared even higher, from American House to Acid House and ultimately to Rave. Looking back, it seems like it was almost a challenge to see how far and how fast Disc Jockeys could push their audi- I ence.

In 1988 the Ibiza Party Set made their I own discovery when they mixed a cocktail of Acid House music and Ecstasy and \(\) found the energy they needed to dance j the night away. Little did the participants j know, in what has become known as the j

Summer of Love, the effect their discovery was going to have on a generation of young people.

From all-night illegal raves involving hundreds and even thousands of young people, the culture spread like a whirlwind picking up momentum as it made it's way across Europe and back to America and back again. New sounds were added, the beat intensified, soaring to over 160 to 170 beats per minute. New names emerged to try and capture the particular nuances of each rhythm change, which often left even the club Progressive House, goers confused. Jungle, Trance, Gabba, Speed Garage, Acid Techno, Drum & Bass, Triphop. Collectively they have all, in recent years found refuge under the general umbrella title of Dance Culture.

Of more significance however has been the growing acceptability of a culture which only recently was confined to open spaces, abandoned mills, vacant warehouses or backstreet clubs and is now found in the hottest night-spots in town. Dance Culture has been subsumed into night-clubs across the entire country in Ireland and with it there is much anecdotal evidence to strongly suggest it has been accompanied by Ecstasy and other dance drugs such as Amphetamines (speed) and more recently, Cocaine.

HLOT PROJECT

Early in 1998 concerned by reports of young people leaving or being ejected from nightclubs and suffering adverse reactions requiring attendance Accident and Emergency Departments of city hospitals, a small committee was organised to consider an appropriate response. The group comprised of representatives from the Eastern Health Board, Dun Laoghaire Rathdown Local Drugs Task Force (L.D.T.F.) and the Garda S och na, and following a number of preliminary meetings decided to conduct a pilot scheme in the South Dublin region. Using a grant of £5,000 secured from The L.D.T.F., the committee contracted the Release Drugs Agency in London, who

had many year s experience in this area, to advise on an appropriate plan of action.

Following brief research of the Dublin Dance Scene and consultations between Release and the committee, a pilot project emerged which operated under the premise that if we can t interact with young people directly in night-clubs the next best thing is to work with the people who do and so the Dublin Dance Safety Initiative was born. The programme was designed in three phases with scope to extend as required.

Phase 1 involved working directly with owners and managers of nightclubs

Phase 2 involved training for Door Supervisors (or Bouncers as they are more commonly referred to)

Phase 3 involved getting accurate information to young people in the setting in which they were taking the drugs i.e. the nightclubs

Media reports emerging from the U.K. and picked up by the Irish media had coined the phrase Saturday Night Fever in reference to the number of young people turning up in casualty departments as a result of drug use and suffering extremely high temperatures, organ damage and hyperthermia. As plans for the Dublin pilot project developed, it somehow seemed appropriate (at least to one Bee Gee's fan) that a natural response to Saturday Night Fever was to launch a Staying Alive campaign.

MANAGERS AND OWNERS GROUP

An initial attempt to engage the attention of Managers and Owners was extremely disappointing but, as it later transpired, this reluctance resulted from a genuine fear that if they became involved, it might indicate that their clubs had a drug problem. A follow-up was much more successful but by this time the committee had secured the backing of the Chairman of the Irish Night-Club Industry Association who also happened to own a night-club in the area and, through his encouragement coupled with some timely media coverage, numbers increased significantly. Following some very fruitful

meetings a training programme was devised for the owners/managers group. This training was subsequently held on two afternoons and over forty representatives from fifteen venues attended. The response to the subject matter was well received, as was the open discussion of different perspectives for everyone involved. Another positive outcome was that appropriate training for door supervisors was identified and the content agreed. There was also a strong indication that if suitable material is produced for distribution to club goers or for display in key locations that, while they won t distribute it they would facilitate drug workers/volunteers carrying out this role inconspicuously. A sample of some Release material including wall posters on five dance drugs and a small credit card size information booklet called a Vital Information Pack (VIP) received guarded support provided they would not be construed as encouraging drug use.

DOOR SUPERVISORS

By agreement with the Owners and Managers a ten session course was designed for Door Supervisors which included:

- # Exploration of Attitudes
- # Drug Legal Aspects
- # Basic First Aid (4 sessions)
- # Health and Safety Issues
- # Fire Safety Demonstration and Discussion
- # Evaluation Identifying Future Training

Of the twenty-two participants who signed up for the course only fourteen subsequently attended and of these, eight staff were awarded certificates.

Any feelings of disappointment at the outcome of this phase were quickly dispelled as the overall benefits gained from both programmes were reviewed. Barriers had been broken down; clubs that were reluctant to say drugs might be a problem were now more open to ask the Garda for help. From the committee s point of view much was learned which will be invaluable in future management group training and which can also readily be passed on to other areas of the country contemplating a similar strategy.

PHASE3

Phase 3 is concerned with getting accurate, current and relevant information to young people in the setting in which Dance Drugs are used. The difficulties of

this phase have not been underestimated. Night-clubs are first and foremost, fun venues, and any health promotion message whether it concerns HIV prevention, safer sex or drug use needs to be imaginative, inconspicuous and above all relevant. Scare tactics, however must be avoided at all costs. Drug education cannot be based on worse case scenarios with misleading or inaccurate information. Young people will switch off if the information doesn t tally up with their own experiences (Williamson 1997).

The VIP booklet produced by Release adopts a very pragmatic approach and, while it doesn t encourage drug use, it provides information that attempts to be balanced and relevant and recognises that the person reading the booklet may be using drugs. Sometimes referred to as harm reduction, it is no more than a secondary prevention measure to somebody who has, for whatever reason, decided to say no to the message. Drawing an analogy from our favourite drug, Alcohol, it is somewhat akin to the type of information often passed on to recreational drinkers not to mix drinks, not to drink on an empty stomach, to eat a sandwich first or drink a pint of milk. While it is possible to argue with this viewpoint of comparing illegal street drugs to alcohol, few could argue with an underlying philosophy that aims to keep young people alive and safe even if their choice of drug is alien to a culture adults grew up in.

The Staying Alive campaign phase 3 does not intend to encourage use, far from it in fact. But it does recognise that last year there were over 700,000 Ecstasy tablets seized which obviously poses the question how many were not seized and who is using them and where?

WHERE NEXT?

In the coming months the VIP booklets are being evaluated by club goers both in club settings and college venues to assess their impact and relevance for a young audience who may or may not be part of the chemical using generation. It has now been decided to employ two young researchers to carry out observational research across Dublin nightspots. This will hopefully provide a clearer picture of what is really happening in a wide variety of nightclubs. Has the dance culture which has waltzed it s way into even the most middle of the road dance venues brought with it a proportion of dance drugs users or is it just another urban myth? This piece of research will hopefully provide some clues.

A further key development is the establishment of a working group comprising of key personnel drawn from the Eastern Health Board, Local Drugs Task Force, Garda, and Club Owners. This committee aims to produce a document, which hopefully will form the template for a code of good practice for safety at dance events similar to codes produced for some U.K. cities such as London and Glasgow. This report and the research report should be ready by early next year and it is the committee s intention to highlight the issues by holding a one-day National Conference targeting staff from dance venues across the country.

CONCLUSION

It would be nice to think that recreational drug use in night-clubs will disappear but, to date, there is very little evidence to suggest that it will. It may possibly change and indeed the mighty drinks and beverages industries are doing their utmost to win back some of the business they have lost to the love drug. Already through aggressive marketing of Alcopops and high content caffeine drinks, they are making inroads, but whether they will satisfy this generation s insatiable thirst to dance only time will tell. The omens are not particularly good. Only last June a young journalist sampling at first hand the power of the nightclub atmosphere was urged to write: -

The atmosphere is electric, the club is sexually charged. Complete strangers connect with each other. The music builds. The remorseless rhythm pounds on and on. Hands shoot up in the air and clubbers scream for more. The booming base kicks back in and the rhythm rolls on. The atmosphere is almost tribal as the rhythm soars relentlessly. When it finally reaches a crescendo, the club erupts the chemical generation are par-(Cormac O Keefe Irish Independent June 22 1999).

The Staying Alive campaign is not about dampening the party but merely aims to keep a young generation alive so that they too can grow up and grow old and in turn moralise about the chemical generation of the next millennium.

References available on request from The Office For Health Gain