

NATIONAL DRUG AND
ALCOHOL RESEARCH CENTRE
2007 ANNUAL REPORT



NDARC

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UNSW

Sydney NSW 2052

22-32 King Street,
Randwick NSW 2031

Telephone: (02) 9385 0333

Facsimile: (02) 9385 0222

<http://ndarc.med.unsw.edu.au>

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ABOUT THE CENTRE

The National Drug and Alcohol Research Centre (NDARC) is a premier research institution in Australia and is recognised internationally as a Research Centre of Excellence. NDARC was established at The University of New South Wales (UNSW) in May 1986 and officially opened in November 1987. It is funded by the Australian Government as part of the National Drug Strategy. NDARC is situated on the University of New South Wales Randwick campus in the eastern suburbs of Sydney.

The Centre is multidisciplinary and collaborates with medicine, psychology, social science and other schools at UNSW, as well as with a range of other institutions and individuals in Australia and overseas. Facilities at the Centre include a computer network, a document archive with an extensive bibliographic database, as well as seminar and conference facilities. NDARC also engages in collaborative projects with other researchers throughout Australia to provide a national focus for research in the alcohol and other drugs field, and has links with researchers overseas.

In addition to the research conducted at NDARC, other activities include an Annual Symposium and a range of special conferences and educational workshops. NDARC researchers have a strong record of contributions to scientific journals and other publications, and NDARC also produces its own Research Monographs and Technical Report Series. In conjunction with the National Drug Research Institute in Perth (NDRI), NDARC also produces a free quarterly newsletter, CentreLines, to increase communication between the national research centres, other researchers and workers in the alcohol and other drugs field within Australia.

MISSION STATEMENT

The overall mission of NDARC is:

“To conduct high quality research and related activities that increase the effectiveness of the Australian and International treatment and other intervention responses to alcohol and other drug related harm”.

Goals

In order to increase the effectiveness of the Australian treatment response to drug problems four goals need to be met:

- (1) to improve our understanding of the nature and extent of alcohol and other drug-related harms to which treatment and other interventions should be directed;
- (2) to increase knowledge on the range and effectiveness of treatment and other interventions that is aimed at reducing forms of alcohol and other drug related harm;
- (3) to increase knowledge among treatment and intervention providers about which programs are effective and which individuals are most suited to them;
- (4) to increase the community’s knowledge of appropriate and effective treatment and other intervention programs for alcohol and drug-related problems.



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FOREWORD



Recent hauls of illicit drugs with a street value of many millions of dollars have highlighted the continuing problem of substance abuse in our community. Additionally the political debate on the 'alcopops' issue has focused a spotlight on teenage binge drinking. When we line these up with the continuing campaign against cigarette smoking it can be seen that there is still great scope and relevance for the research work being carried out by the team at NDARC.

I do not intend to repeat what is said in the body of this report. Those who make the time to read the material contained in the following pages will find it makes for fascinating reading. Suffice to say that after twenty years the organisation remains vibrant, productive and hugely relevant.

The dramatic growth of the Centre in recent years is a combination of this acute relevance and the high calibre of research conducted by the Centre, which has placed it at the forefront of the international quest to find practical answers.

Growth of the magnitude experienced by the Centre is not without its problems and this year the Board has focused on ensuring that its administrative and managerial systems are adequate to meet this challenge. Change even when it is the result of success always brings stress. It is a credit to all who have been involved in the change process that this stress has been kept to a minimum.

I wish to thank all who have contributed to what I think will be a successful outcome, and those who have been able to recognise and accept that change must occur.

I wish to thank the Director, Richard Mattick, and his executive team for their leadership and every member of staff for a magnificent effort. In the long run we are only as good as the research we produce and we can all take pride in what has been achieved.

I once again have pleasure in commending this Annual Report for your diligent attention.

A handwritten signature in black ink, appearing to read 'Kevin Rozzoli'.

The Hon. Kevin Rozzoli, AM
Chairman,
NDARC Board of Management

YEAR IN REVIEW: 2007 – DIRECTORS REPORT



The 2007 year was enormously productive for the Centre. NDARC celebrated its 20th year of research as a National Centre and also developed and established the cannabis consortium, now known as the National Cannabis Prevention and Information Centre (NCPIC). This consortium brings

together a wide range of national and internationally renowned researchers with the broad aim to disseminate cannabis-related research and to inform service delivery and community activities.

Establishment of the new Centre commenced in July, with Associate Professor Jan Copeland as Acting Director. Following international advertisements calling for expressions of interest from senior academics in relevant fields, or seasoned management professionals with extensive relevant leadership experience, Jan Copeland was confirmed as Director and Professor in October 2007. Professor Copeland immediately commenced a recruitment drive including advertisements for an Intervention Development Manager; a National Clinical Training Manager; a National Education and Training Manager; a Community Communications Manager and an Executive Assistant to the Director of NCPIC. The key planning and development work was completed by the end of the year including the Strategic Plan 2007-2010, the Annual Work Plan 2007-2008 and the NCPIC Communications Strategy 2007-2010. Preparations for the free national cannabis information and helpline and for the website were completed and the services will be provided from early in 2008. As a Chief Investigator on the NCPIC and member of the NCPIC Management Committee, I am pleased with the terrific progress to date, and congratulate the NCPIC Director and all the staff.

My own research continued with staff from Western Sydney on the AERF-funded study of the treatment of 1000 people with excessive drinking and concurrent anxiety (Sitharthan and Mattick), and I continued supervision of PhD and postdoctoral staff. It has been impressive to see the progress of the post-market surveillance study of Suboxone and other opioid pharmacotherapies (Degenhardt, Mattick and Larance), an important study nationally and internationally. Courtney Breen continued her work on alcohol in rural communities under supervision by Dr Shakeshaft and myself. We also continued the updates of the important and influential Cochrane Collaboration reviews on methadone and buprenorphine (Mattick and Breen).

In 2007, I helped to draft the WHO/UN Guidelines for Psychosocially-assisted Pharmacological Treatment of Opioid Dependence and completed work on Cannabis and Mental Health for the Australian Government, producing an influential document (McLaren and Mattick). Work on modafinil for treatment of amphetamine dependence (Shearer, Darke, Mattick) with clinical partners nicely dovetailed with the large NHMRC cohort study (McKetin, Ross, Mattick, Ali and Lubman) on an amphetamine-using treatment cohort. Work on the Health Evaluation Research Outcome Network study (Mattick and Burns) continued to build our capacity in data linkage of large datasets with important publications forthcoming.

The NIH Comorbidity and Trauma Study of the genetics of opioid dependence (Mattick, Degenhardt, Martin and Nelson) ran well, and will finalise data collection in 2008. I was invited to continue for a further term on the Prime Minister's Australian National Council on Drugs (ANCD), and to serve again on the NSW Health Minister's Expert Advisory Group on Drugs. I also served on the Alcohol Beverages Advertising Code Adjudication Panel. Finally, the United Nations Office in Vienna provided funds to NDARC (Mattick, Degenhardt, Mathers, Dolan and Wodak) to run a Secretariat to the UN Reference Group on HIV/AIDS and Injecting Drug Use.

Associate Professor Maree Teesson, in addition to her excellent support as the Deputy Director of the Centre during 2007, is to be congratulated for her promotion to Professor and her success in being awarded a 5 year NHMRC Senior Research Fellowship to commence in March 2008. In 2007 Professor Teesson and her colleagues had outstanding grant success in the highly competitive National Health and Medical Research Council and Australian Research Council grant rounds. Maree is now a principal or co-investigator on six NHMRC grants (the maximum allowable) and two Australian Research Council grants. Her recent grants cover descriptions of mental disorders in the general population, trials of new treatment interventions in comorbidity and alcohol dependence and trials of prevention interventions. In 2007 Professor Teesson also held a number of prestigious appointments outside NDARC, including Chair of the NHMRC Post Graduate Fellowship Assessment Panels.

In November 2007, Associate Professor Louisa Degenhardt was appointed as Professor of Epidemiology within the Centre. Shortly after this appointment however, Professor Degenhardt, like Professor Teesson, was awarded a 5 year NHMRC Senior Research Fellowship which she agreed to take up in February 2008. Also in December 2007, Professor Degenhardt was one of only two UNSW researchers who were recognised by the inaugural National Health and Medical Research Council (NHMRC) awards for their outstanding contributions to health and medical research. The awards, which were presented in Canberra, are designed to show the NHMRC's appreciation to the research and ethics community for their scientific research, innovation and leadership. Professor Degenhardt was awarded an NHMRC Achievement Award for her work in the area of the epidemiology of illicit drug use and related morbidity, and on the co-morbidity between drug use and mental disorders.

Associate Professor Alison Ritter transferred her Drug Policy Modelling Program to NDARC in mid-2006. The DPMP aims to improve Australian drug policy by creating evidence that will assist policy makers to develop sound, evidence-informed decisions; provide tools for policy-makers to understand and use the evidence; and to study how policy actually gets made. In 2007 the DPMP established itself as a significant program of activity, recruiting an additional five core staff to NDARC (including academic researchers Dr Jenny Chalmers and Dr Caitlin Hughes), and further staff to its three other sites at Griffith University, McFarlane Burnet Centre and the Australian National University. During the year the DPMP group completed 7 research projects and made progress on 17 current projects, enrolled 5 new PhD students and secured

more than a million dollars in additional research funding. Current research includes work on the social costs of cannabis, amphetamines and heroin; systematic reviews of what works in law enforcement, prevention, treatment and harm reduction; a Melbourne injecting study providing longitudinal information, modelling the pharmacotherapy supply and demand to examine accessibility and affordability of treatments across Australia; and simulated models that examine policy scenarios in local drug markets.

Associate Professor Kate Dolan continues a very active profile on the international front. Much of her time was taken up with supporting the Centre's clinic for female drug users in Tehran, Iran. The Clinic, which opened in August 2007, offers a range of services such as a needle and syringe program, methadone maintenance treatment, sexual health services, contraception and family planning, primary healthcare, counselling, employment training and a drop-in centre. The clinic employs ten staff and will be evaluated by local researchers. Professor Dolan, Dr Brad Mathers and Sarah Larney also developed guidelines on drug treatment and detoxification for prisons in Asia at the request of The World Health Organization. A number of Asian countries were surveyed on their demand reduction strategies in prison. Associate Professor Dolan was also awarded a new two-year grant of \$300,000 by the United Nations Office on Drugs and Crime to do research on pre-release methadone maintenance programs in compulsory rehabilitation centres in China.

In 2007, Associate Professor Dolan continued working locally on a range of studies looking at hepatitis transmission in prison, hepatitis treatment and began work with UNSW colleagues on a project to examine the possibility of developing a vaccine for hepatitis C. She also worked with Sarah Larney to examine if harm reduction could be integrated into an abstinence-based therapeutic community, namely We Help Ourselves. At first glance this may seem to be a contradiction, but the organisation has successfully integrated harm reduction into its service.

In addition to her work for NCPIC, Professor Copeland delivered a week long training session in Islamabad, Pakistan for the UNODC on developing intervention services for women with alcohol and other drug related problems. This year also saw the successful completion of three major ecstasy projects for Professor Copeland and Mr Paul Dillon's research group: the evaluation of peer led interventions (conducted by Ms Annie Bleeker); the development of materials on ecstasy and related drugs for primary health care practitioners (Mr Ed Silins); and a randomised controlled trial of The Ecstasy Check-up (Mr Greg Martin).

Professor Shane Darke, with Dr Sharlene Kaye, Dr Joanne Ross and Dr Rebecca McKetin, commenced work on a new three year NDLERF grant to look at comparative rates of violent crime amongst methamphetamine and opioid users. In late 2007, Professor Darke was also awarded a new three year NHMRC Project Grant worth \$235,000 commencing 2008 for a project on organic brain damage after non-fatal opioid overdose.

Dr Sharlene Kaye completed the analysis of psychostimulant-related (methamphetamine and MDMA) deaths in Australia, which has been an ongoing three year Commonwealth funded project headed up by Professor Shane Darke. Dr Kaye has an article in press from that study.

Dr Laura Vogl commenced her three year ARC Postdoctoral Fellowship in 2007, awarded for work on fear, sadness and alcohol use in adolescence. The fellowship was incorporated into a Discovery Program grant with Professors Maree Teesson and Gavin Andrews, and is NDARC's first grant from the Australian Research Council. A second ARC Discovery grant to commence in 2008 was announced late in 2007 for a group comprising Associate Professor Alison Ritter, Dr Wendy Swift, Professor Maree Teesson and Ms Marian Shanahan to undertake research on the economic consequences of cannabis policy.

Dr Lucy Burns continued her work (Mattick & Burns) using linked data to examine the impact of substance use in pregnancy through the Health Evaluation Research Outcomes Network (HERON), funded under an NHMRC Capacity Building Grant. Her focus during the year was examining the impact of smoking in pregnancy and also the effects of methadone retention on neonatal outcomes. This body of work was expanded by undertaking a study with colleagues at the Royal Prince Alfred Hospital to examine the maternal health of women who use substances during pregnancy. Dr Burns developed a program of work examining the relationship between substance use and homelessness. Together with colleagues at the Haymarket Foundation she examined emerging high risk trends in this group, and with colleagues at Mission Australia, UNSW School of Psychology and Murdoch University, will in 2008 examine the impact of enhanced and flexible service delivery on the health and social outcomes of homeless people.

Dr Anthony Shakeshaft has continued with the complex and large-scale community-based randomised clinical trials to reduce alcohol harms in rural communities, working with Professor Robert Sanson-Fisher from the University of Newcastle, and other external collaborators. He also worked with Dr Anton Clifford on alcohol problems among indigenous Australians, with a focus on intervention. Dr Clifford was awarded an NHMRC Training Fellowship to commence in 2008.

2007 saw the successful establishment of a longitudinal cohort of methamphetamine treatment entrants under the Methamphetamine Treatment Evaluation Study (MATES). MATES is being led by Dr Rebecca McKetin, with Joanne Ross and myself from NDARC, in collaboration with researchers from various institutions around Australia (QADREC, ORYGEN, Turning Point, University of Adelaide, University of Newcastle and Griffith University), and it is funded by the National Health and Medical Research Council with supplementary funding from the Australian Government Department of Health and Ageing. In total, 400 methamphetamine treatment entrants, and a comparison group of 100 out-of-treatment dependent methamphetamine users, have been recruited into this study. The cohort is currently being followed up post-treatment to determine whether existing drug treatment services in our community reduce methamphetamine dependence. Preliminary findings from the study are very encouraging, but highlight

the high level of psychiatric symptoms in this population. A one-day forum was hosted by NDARC in late 2007 to discuss the findings from the study with participating agencies and to profile research developments in stimulant treatment. Other research activities led by Dr McKetin include a joint venture with the Manly Drug Education and Counselling Centre (MDECC) on mental health and methamphetamine use among people attending dance/club events, a recently completed joint NSW Health research project into methamphetamine use in rural NSW, and ongoing involvement with the evaluation of the NSW Health Stimulant Treatment Programs.

Dr Katherine Mills commenced the first randomised controlled trial of an integrated intervention for PTSD and substance use disorders to be conducted internationally. She also received funding from the Australian Government Department of Health and Ageing to develop national guidelines on the management of co-occurring mental health conditions in alcohol and other drug treatment settings, working with Proudfoot, Teesson & Mattick. It was a particularly successful year for Dr Mills as she received two prestigious awards: a UNSW Vice-Chancellor's Postdoctoral Fellowship and the APSAD Early Career Award for excellence in science and research.

In 2007, Dr Delyse Hutchinson was a recipient of a UNSW Goldstar Award for a project to establish a large cohort of pregnant women, partners and their babies, in order to assess the impact of parental substance use on family functioning and infant development. The project is a collaborative study with NDRI, WA and the funding is currently being used to determine feasibility and conduct a pilot study. Dr Hutchinson was also the recipient of a UNSW Vice-Chancellor's Postdoctoral Award to conduct research on the specific effects of parental alcohol use and misuse on young children and families in Australia using data from Growing Up in Australia (the Longitudinal Study of Australian Children: LSAC). This award, which will be taken up in 2009, will involve collaboration with researchers from NCEPH at the ANU.

Dr Wendy Swift, who is employed part-time, continued her focus on cannabis in 2007 with a number of research projects examining cannabis-related harms and their management. During the year she led a collaborative project (funded by Australian Government Department of Health and Ageing) with colleagues at the Centre for Adolescent Health, which involved secondary analyses of cannabis use in the Victorian Adolescent Cohort Study. This landmark longitudinal population study of approximately 2000 Victorian secondary students commenced in 1992 and examined the long-term impacts of cannabis use in adolescence and young adulthood. The first paper on diagnostic orphans was accepted for publication in late 2007.

A further focus for Dr Swift in 2007 was completing pilot work (with Jen McLaren and Peter Gates from NDARC and Steve Allsop from NDRI) examining cannabis potency and contamination. Currently there is no legal imperative to test for cannabis potency in Australia, but the issues of potency and the potential contamination of cannabis (e.g., with pesticides) have been prominent in the international debate about the legal status of cannabis. The collection of accurate and current data on this issue is crucial in providing appropriate and evidence-based information.

Dr Sannibale spent much of 2007 establishing the framework of her randomised controlled trial of treatment for alcohol use problems and comorbid post-traumatic stress disorder, an NHMRC project grant received with collaborators Associate Professor Teesson, Associate Professor Sitharthan, Professor Creamer and Dr Mills. Dr Sannibale and her colleagues, Dr Kylie Sutherland and Ms Kirsty Taylor, developed and integrated treatment manuals which will be implemented in the trial. Participant recruitment to the study commenced in November.

In late 2007, Dr Sannibale, Dr Andrew Baillie (CIA), Professor Maree Teesson, Professor Ronald Rapee and Professor Paul Haber secured NHMRC Project grant funding for a new project titled *Randomised Controlled Trial of Treatment for Alcohol Use Problems and Social Phobia*. This three-year grant will commence in 2008 and will test the relative efficacy of combined treatment for alcohol use and social phobia compared with alone treatment alone. Dr Sannibale is also continuing her longstanding collaboration with Haber, Baillie and Teesson on a randomized controlled trial of structured stepped-care intervention for psychiatric comorbidity for individuals with alcohol dependence, a study based at Drug Health Services, Royal Prince Alfred Hospital.

Dr Tim Slade joined NDARC in July 2007 as a senior research fellow in biostatistics. The aim of this new position was to build the capacity for NDARC to carry out sophisticated biostatistical analysis of new and existing data sets as well as aid in the design of new projects. Within the scope of this position, Dr Slade also has an integral role (working closely with the Commonwealth Department of Health and Ageing) in the design and analysis of the 2nd Australian National Survey of Mental Health and Wellbeing. The survey represents a snapshot of the mental health of Australians ten years on from the first Australian mental health survey, with a greater emphasis on the impact of mental and substance use disorders on the health care system. The data will be due for release at the end of 2008 and Dr Slade will play a major role in reporting the findings from this survey. Before the end of the year, Dr Slade (with Andrews, Teesson, Mills and Baillie) was awarded a large multi-centre 3-year NHMRC Project Grant to examine the contributions of epidemiological data to the revision of psychiatric and substance use classification systems to commence in 2008.

RESEARCH DISSEMINATION

In 2007, NDARC maintained a focus on the effective dissemination of research, and promotion of a better understanding of drug and alcohol issues within the Australian community. NDARC's mission is to conduct high quality research and related activities to increase the effectiveness of the Australian and international treatment and other intervention responses to alcohol and other drug related harm. A key strategy in achieving this mission is to increase knowledge in the drug and alcohol sector, and general community, about effective treatments and other interventions for alcohol and drug problems.

Utilisation of the mass media as one of the strategies to achieve this goal, continued to produce dividends, both in

terms of the provision of informed comment on topical drug and alcohol issues, and also in good coverage of NDARC media releases by media outlets, helping to promote NDARC research findings nationally.

All major drug types received attention, and press releases were issued from the Centre's research efforts, covering diverse topics such as drug use and homicide deaths, methamphetamine treatment, alcohol prevention and young men, post-traumatic stress disorder and drug dependence, and changes in the drug market. These press releases are available on the NDARC website.

The NDARC web site (www.ndarc.med.unsw.edu.au) is a major resource and centre for research dissemination. It lists the series of NDARC Technical Reports and Monographs, as well as information about NDARC research projects, news, drug information, drug trends, research publications and seminars.

NDARC is continually being asked to provide information and training to a wide variety of drug and alcohol workers, teachers, law enforcement personnel and government workers, as well as to members of the public. To assist in coping with this demand, the NDARC Education Trust (NET) was established some years back to develop and distribute booklets, fact sheets, training courses and seminars. NET also organises the NDARC Annual Symposium.

In 2007 the Annual Symposium for NDARC was a special celebration. Although NDARC was first established at the UNSW May 1986, we were not officially opened until November 1987. This means that the Centre celebrated its 20th year of research in 2007. In a relatively young sector (nationally), this achievement was marked by a two-day Symposium program that featured a number of speakers who influenced NDARC's past development, who will influence its future directions, and who have worked with and around NDARC for a number of years. These speakers included Emeritus Professor Ian Webster (founding Director), Professor Wayne Hall (previous NDARC Director), Professor Margaret Hamilton (member of the Australian National Council on Drugs and former Director of Turning Point Alcohol and Drug Centre), Ms Virginia Hart (Assistant Secretary, Drug Strategy Branch, Department of Health and Ageing), Dr Don Weatherburn (Director of the NSW Bureau of Crime Statistics and Research), and Professor Paul Haber (Area Medical Director, Drug Health Services, Royal Prince Alfred Hospital). The Symposium was well attended, with treatment workers, police personnel, educators, as well as government and non-government representatives attending from around Australia.

The drug and alcohol information booklets have proved extremely popular with both field workers and drug users, and are listed with an order form on the NDARC web site. CentreLines is a free newsletter produced in conjunction with colleagues at NDRI to increase communications between researchers and workers in the field. Back issues of CentreLines are also available on the NDARC web site.

Through the NDARC Education Trust, the annual NDARC Symposium, its work with the media, a commitment to providing research findings and evidence-based comment to

government and non-government bodies, CentreLines magazine, information booklets, and presentations to schools, drug and alcohol organisations, divisions of General Practice, and the annual NDARC Symposium, NDARC has committed enormous resources to the dissemination of information to the drug and alcohol sector, policy makers and the general community.

STAFFING

NDARC grew substantially during 2007. As at 31 December, there were 86 staff members employed by NDARC (including academic staff, support staff and part-time staff), plus 10 conjoint and honorary appointments. Casual staff and visiting academics have not been included in the count, nor were a number of new positions which had interviews in 2007 for appointments to commence in January 2008. A full list of 2007 staff is given in Appendix B.



MANAGEMENT STRUCTURE

NDARC's Board of Management met four times during 2007 with Kevin Rozzoli continuing as Chairman. The list of members is detailed at the front of this report.

The Research Committee is the main operational committee overseeing the activities of the Centre and in 2007 comprised: Professor Richard Mattick (Chair); Associate Professor Maree Teesson; Professor Shane Darke; Associate Professor Jan Copeland; Associate Professor Louisa Degenhardt; Associate Professor Kate Dolan; Associate Professor Alison Ritter, Dr Lucy Burns; Dr Jenny Chalmers, Dr Caitlin Hughes, Dr Delyse Hutchinson; Dr Sharlene Kaye, Dr Rebecca McKetin; Dr Kath Mills, Dr Joanne Ross; Dr Claudia Sannibale; Dr Anthony Shakeshaft; Dr Tim Slade, Dr Kylie Sutherland, Dr Wendy Swift; Dr Laura Vogl, Mr Paul Dillon; Ms Marian Shanahan; Ms Alys Havard, Ms Amy Gibson, Ms Elizabeth Maloney, Mr Brad Mathers, Ms Shale Preston; Ms Heli Wolk.

The Research Committee meets monthly, immediately after the NDARC Staff Meeting, to maintain regular checks on the progress of projects listed in the Strategic Plan, to regularly review the progress of PhD students, and to assess the Centre's success in enacting its Strategic Plan. To ensure that they are as efficient as possible, the meetings are rostered to deal with a distinct subject area each month. These areas are as follows: administration, research activities, and research directions.

In addition to the Research Committee, the Executive Advisory Group met regularly to discuss issues around strategic direction. The members of this committee in 2007 were Professor Richard

Mattick (Chair); Associate Professor Maree Teesson; Professor Shane Darke; Associate Professor Jan Copeland; Associate Professor Louisa Degenhardt; Associate Professor Kate Dolan; Dr Rebecca McKetin; Dr Anthony Shakeshaft; Mr Paul Dillon; and Ms Shale Preston.

The Finance & Administration Committee was responsible for overseeing NDARC's financial and administrative processes, and for constructing and monitoring the annual budgets and forecasts. This group is scheduled to meet twice per month, and in 2007 comprised: Professor Richard Mattick (Chair); Associate Professor Maree Teesson; Ms Sandi Steep, Ms Shale Preston; and Ms Heli Wolk.

The Staff Meeting continues to be held on the first Thursday in every month and members of staff take turns to chair these meetings. The remaining management structure of the Centre (i.e. Computing Committee, Library Committee, Accommodation Committee, and regularly-meeting steering committees for all major projects) remained as they have been in past years.

FUNDING

Allocation for base-line core funding from the Australian Government Department of Health and Ageing for the financial year 2006/07 was \$1,585,413. This was expended as follows:

	2005-2006 \$	2006-2007 \$
SALARIES	1,149,018	1,276,385
OPERATIONAL	331,833	324,458
EQUIPMENT AND FURNITURE	39,243	13,974
TOTAL	1,520,094	1,614,817

Further expenditure of \$6,819,210 was incurred during the 2007 calendar year from research grants and fellowships awarded to NDARC from a variety of sources. Details of these research funds can be found in Appendix C.

POSTGRADUATE STUDENTS

NDARC offers both PhD and Masters Degrees by research in a wide variety of topic areas, depending on student background and interest. Congratulations to Dr Heather Proudfoot and Dr Laura Vogl who were awarded their doctorates in 2007. Further congratulations to Greg Martin and Elizabeth Maloney who recently submitted their PhD theses for assessment. Examples of current PhD projects include:

- Criminology among substance users with comorbid post-traumatic stress disorders
- Reducing alcohol-related harm in rural communities in NSW
- Prevalence and consequences of child maltreatment among heroin dependent cases and matched controls
- Mortality associated with pharmacotherapies for opioid dependence
- Alcohol related health issues in rural NSW

- Alcohol-related emergency department presentations
- Opioid dependency treatment in closed setting in South East Asia
- Monitoring the implementation of buprenorphine-naloxone (Suboxone®) in Australia
- The impact of public opinion on illicit drug policy
- The development of a computer-based drug and alcohol prevention program for Year 8 students
- Assessing the economic consequences of cannabis policy options
- Patterns of substance abuse and mental health comorbidity in a heroin dependent group
- Agonist pharmacotherapy for psychostimulant dependence
- Treatment of drug use in pregnancy

RESEARCH SUPERVISION

The following postgraduate research supervision was undertaken by NDARC staff during 2007.

Barrett, E. (2007-present). *Criminality among substance users with comorbid post-traumatic stress disorders*. Full-time PhD in School of Public Health & Community Medicine, UNSW. Supervision by Dr Kath Mills. Expected date of submission December 2010.

Bashford, J. (2002-present). *Development of cannabis screening questionnaire*. Full-time PhD in School of Psychology, Massey University. Joint supervision by Prof Jan Copeland and Dr Wendy Swift. Submitted and awarded in 2007.

Breen, C. (2004-present). *Reducing alcohol-related harm in rural communities in NSW*. Part-time PhD in School of Public Health & Community Medicine, UNSW. Joint supervision by Dr Anthony Shakeshaft and Prof Richard Mattick. Expected date of submission February 2010.

Conroy, E. (2005-present). *Prevalence and consequences of child maltreatment among heroin dependent cases and matched controls*. Full-time PhD in School of Public Health & Community Medicine, UNSW. Joint supervision by Prof Louisa Degenhardt and Dr Ward. Expected date of submission August 2008.

Gibson, A. (2005-present). *Mortality associated with pharmacotherapies for opioid dependence*. Full-time PhD in School of Public Health & Community Medicine, UNSW. Joint supervision by Prof Louisa Degenhardt and Dr Lucy Burns. Expected date of submission June 2009.

Havard, A. (2007-present). *Alcohol related health issues in rural NSW*. Full-time PhD in School of Public Health & Community Medicine, UNSW. Supervision by Dr Anthony Shakeshaft. Expected date of submission January 2011.

Indig, D. (2005-present). *Alcohol-related emergency department presentations*. Full-time PhD in School of Public Health & Community Medicine, UNSW. Joint supervision by Prof Jan Copeland and Dr Kate Conigrave. Expected date of submission December 2008.

Larance, B. (2006-present). *A comparative study of the diversion and injection of methadone, buprenorphine and buprenorphine-naloxone*. Full-time PhD in School of Public Health & Community Medicine, UNSW. Joint supervision by Prof Louisa Degenhardt and Prof Richard Mattick. Expected date of submission March 2010.

Larney, S. (2007-present). *Opioid dependency treatment in closed setting in South East Asia*. Full-time PhD in School of Public Health & Community Medicine, UNSW. Supervision by A/Prof Kate Dolan. Expected date of submission June 2010.

Maloney, E. (2005-present). *Patterns of suicidal behaviour, comorbidity and drug use among opioid dependent subjects and matched control subjects*. Full-time PhD in School of Public Health & Community Medicine, UNSW. Joint supervision by Prof Louisa Degenhardt and Prof Shane Darke. Submitted.

Mammen, K. (2006-present). *Monitoring the implementation of buprenorphine-naloxone (Suboxone®) in Australia*. Full-time PhD in School of Public Health & Community Medicine, UNSW. Joint supervision by A/Prof James Bell and Prof Richard Mattick. Expected date of submission January 2010.

Martin, G. (2002-present). *Brief motivational intervention for adolescent cannabis users*. Part-time PhD in School of Public Health & Community Medicine, UNSW. Joint supervision by Prof Jan Copeland and Prof Shane Darke. Submitted.

Matthew-Simmons, F. (2007-present). *The impact of public opinion on illicit drug policy*. Full-time PhD in School of Public Health & Community Medicine, UNSW. Supervision by A/Prof Alison Ritter. Expected date of submission January 2011.

Newton, N. (2006-present). *CLIMATE Schools: The development of a computer-based drug and alcohol prevention program for Year 8 students*. Full-time PhD in School of Public Health & Community Medicine, UNSW. Joint supervision by Prof Maree Teesson and Prof Gavin Andrews. Expected date of submission December 2008.

Shanahan, M. (2007-present). *Assessing the economic consequences of cannabis policy options*. Full-time PhD in School of Public Health & Community Medicine, UNSW. Supervision by A/Prof Alison Ritter. Expected date of submission January 2011.

Shand, F. (2007-present). *Patterns of substance abuse and mental health comorbidity in a heroin dependent group*. Full-time PhD in School of Public Health & Community Medicine, UNSW. Supervision by Prof Louisa Degenhardt. Expected date of submission January 2011.

Shearer, D. (2005-present). *Agonist pharmacotherapy for psychostimulant dependence*. Full-time PhD in School of Public Health & Community Medicine, UNSW. Joint supervision by Prof Shane Darke and Prof Alex Wodak. Expected date of submission June 2008.

Wallace, C. (2006-present). *Treatment of drug use in pregnancy*. Part-time PhD in School of Public Health & Community Medicine, UNSW. Supervision by Dr Lucy Burns. Expected date of submission December 2010.

EPIDEMIOLOGY

TITLE: HEALTH EVALUATION AND RESEARCH OUTCOMES NETWORK (HERON): SUBSTANCE USE IN PREGNANCY STREAM

NDARC Staff: Lucy Burns and Richard Mattick

Other Investigators: Bruce Armstrong, Richard Taylor, Christine Roberts, Anne Cricker and Judy Simpson (University of Sydney); Louisa Jorm (NSW Health); Dianne O'Connell (Cancer Council of NSW); Elizabeth Sullivan (National Perinatal Statistics Unit, UNSW); and Anthony Zwi (School of Public Health and Community Medicine, UNSW)

Aims: To assess the magnitude and outcomes of substance use in pregnancy.

Design and Method: The overall aim of HERON is to use population health datasets to explore issues of clinical or policy significance to guide health policy and service provision. In the perinatal stream of this project HERON will provide information for service planning for pregnant drug users. Using retrospective and prospective methods the maternal and neonatal outcomes of babies born to substance-dependent women will be explored. Included will be the relative outcomes for pregnant women receiving methadone and other pharmacotherapies for opioid dependence. The project will link the Methadone Database with the Midwives Data Collection and other relevant databases.

Progress: Data analysis using linked data is continuing in this project. To date, publications have been undertaken in the areas of alcohol use in pregnancy, illicit drug use in pregnancy, the impact of methadone retention on neonatal outcomes, the prevalence and correlates of neonatal abstinence syndrome and the impact of smoking in pregnancy. Currently analysis is underway examining the morbidity and mortality of infants born to women who use substances during pregnancy.

Date Commenced: January 2004

Expected Date of Completion: January 2009

Funding: National Health and Medical Research Council

TITLE: NATIONAL ILLICIT DRUG INDICATORS PROJECT

NDARC Staff: Louisa Degenhardt and Amanda Roxburgh

Aims: The aims of the National Illicit Drug Indicators Project (NIDIP) are to provide epidemiological data on trends over time in drug-related harms, to complement other Australian monitoring systems such as the Illicit Drug Reporting System (IDRS) and the Ecstasy and Related Drugs Reporting System (EDRS), and to improve the understanding of, and systematically track changes in, drug-related harms for both illicit and prescription drugs.

Design and Method: To date NIDIP has identified a comprehensive range of data sources, and produced reviews of drug-related data indicators at a national level as well as within

New South Wales. These indicators include: information on population patterns of drug use from national surveys, data on deaths due to drug overdoses, drug-related morbidity and drug treatment data, indicators of drug purity and seizures, and drug-related crime data. Analyses of these indicators are published on a regular basis. The project currently publishes bulletins on drug-related deaths on an annual basis on the NDARC website, and is in the process of establishing a similar reporting mechanism for drug-related hospital presentations. These bulletins, along with reports and peer-reviewed journal articles aim to provide as comprehensive an overview as possible of trends in drug use and related harms in Australia over time.

Benefits: NIDIP was established in the recognition that there was a greater need for the regular dissemination of trends in the epidemiology of drug-related harms in Australia. It was also established to provide comparable monitoring at an international level as there is increasing recognition among international organisations and countries of the need for evidence based decision making in order to respond effectively to drug-related problems, particularly given the transborder issues associated with global drug trafficking. The recognition of a national and internationally comparable approach to illicit drug-related surveillance and monitoring is highlighted through a number of countries with illicit drug data collections in place (e.g. the Community Epidemiology Working Group on Illicit Drugs (CEWG) in the U.S. and the European Union European Monitoring Centre for Drugs and Drug Addiction (EMCDDA)) as well as international efforts to coordinate global drug trends. The benefits of NIDIP then, include the enhanced dissemination of information on trends in harms related to heroin and psychostimulant use and prescription drug use, and a greater evidence base for the development of policy responses and interventions in relation to these harms. NIDIP also provides comparable monitoring of trends at an international level.

Date Commenced: June 2002

Expected Date of Completion: Ongoing

Funding: Australian Government Department of Health and Ageing

TITLE: MORTALITY AMONG OPIOID DEPENDENT PERSONS IN PHARMACOTHERAPY, NSW 1985-2006

NDARC Staff: Louisa Degenhardt, Lucy Burns, Amy Gibson and Richard Mattick

Other Investigators: Wayne Hall (University of Queensland), Matthew Law (National Centre in HIV Epidemiology and Clinical Research, UNSW), Tony Butler (National Drug Research Institute) and Janaki Amin (Justice Health; NSW Health)

Aims: The aims of this project are to:

- examine overall mortality rates of persons enrolled in NSW opioid maintenance treatment (methadone or buprenorphine) between 1985 and 2006
- examine possible changes in both the rates and causes of mortality over this period

- examine the rates and causes of mortality according to factors such as age and gender
- examine the impact of opioid maintenance treatment on rates and causes of mortality among this cohort

Design and Method: The study involves an historical cohort linking identified individuals in existing datasets on opioid maintenance treatment and mortality. All people who commenced an episode of methadone or buprenorphine treatment in NSW between 1985 and 2006 (an estimated 44,000 people) will be included in the study. Data on all patients entering methadone or buprenorphine treatment since 1985 are kept by NSW Health; these data will be linked to mortality and causes of death data managed by the Australian Institute of Health and Welfare.

Predictors of mortality will be examined using survival analysis, stratified according to the different categories of death noted. Other analyses include whether the incidence of any causes of death have changed over time, whether any known changes to drug treatment policy and drug market availability have impacted on survival, and how treatment exposure has impacted on mortality rates.

Date Commenced: June 2007

Expected Date of Completion: July 2009

Funding: National Health and Medical Research Council

TITLE: THE HEALTH AND PSYCHOLOGICAL CONSEQUENCES OF ECSTASY USE

NDARC Staff: Louisa Degenhardt, Edmund Silins and Natasha Sindich

Aims: Despite increasing attention by the media and community, there has never been a comprehensive synthetic review of the existing literature on the characteristics, use and harms related to ecstasy (MDMA). This review will examine a range of issues that constitute a repeated source of debate in the community which may include: the effects of MDMA; the role of uncertain purity and contents of 'ecstasy' tablets; patterns of ecstasy use worldwide; correlates of ecstasy use; the acute and long term effects of the drug; the potential neurotoxicity of MDMA; the issues of ecstasy 'dependence'; potential effects upon physical and cognitive functioning; and evidence on the association between ecstasy use and mental health.

Design and Method: To identify the relevant literature, a comprehensive search strategy will be applied. The following electronic databases will be searched: Medline, Embase, PsycInfo, Science Citation Index, Ovid and International Bibliography of the Social Sciences. 'Grey literature' and the journals not indexed in the above databases will be searched comprehensively through specialist addiction libraries and websites.

Date Commenced: December 2006

Expected Date of Completion: December 2008

Funding: Australian Government Department of Health and Ageing

TITLE: SECRETARIAT OF THE REFERENCE GROUP TO THE UNITED NATIONS ON HIV AND INJECTING DRUG USE

NDARC Staff: Richard Mattick, Louisa Degenhardt, Kate Dolan, Alex Wodak, Benjamin Phillips and Bradley Mathers

Aims: The overall objective of the Reference Group is to advise relevant UNAIDS (the United Nations Joint Program on HIV/AIDS) co-sponsors, especially the United Nations Office on Drugs and Crime (UNODC) and the World Health Organisation (WHO), and the UNAIDS Secretariat, as well as other members of the UN Interagency Task Team on injecting drug use, on effective approaches to HIV prevention and care among injecting drug use. The Reference Group comprises individuals selected for their expertise in the epidemiology of injecting drug use, HIV prevention or treatment.

The National Drug and Alcohol Research Centre was appointed to undertake the role of Secretariat of the Reference Group for 2007.

Design and Method: The primary tasks of the Secretariat include:

- coordination of the Reference Group
- management of key-indicator data holdings which are used to monitor global trends in injecting drug use and HIV as well as coverage of HIV prevention and care for injecting drug users
- provision of ad-hoc technical support to UNAIDS co-sponsor agencies
- production of the Reference Group's annual reports:
- global and regional trends in the epidemiology of injecting drug use and HIV
- estimates of HIV prevention and care service coverage for injecting drug users
- production of thematic research papers on topics of current concern
- management of the Reference Group website
- dissemination of information

Date Commenced: April 2007

Expected Date of Completion: December 2008

Funding: The United Nations Office in Vienna

IDENTIFICATION OF POTENTIAL HARMS

TITLE: OPIOID DEPENDENCE: CANDIDATE GENES AND GENETIC X ENVIRONMENT INTERACTIONS – COMORBIDITY AND TRAUMA STUDY (CATS)

NDARC Staff: Richard Mattick, Louisa Degenhardt, Maree Teesson, Fiona Shand, Elizabeth Conroy, Greg French and Bridget Callaghan

Other Investigators: Elliot Nelson, Michael Lynskey and Andrew Heath (Washington University, USA), Nick Martin (Queensland Institute of Medical Research), Bill Rawlinson (Prince of Wales Hospital)

Aims: The study aims to:

- identify polymorphisms and/or mutations in candidate genes to be typed in cases and controls
- assess retrospectively childhood trauma to enable its inclusion as a risk modifying variable
- analyse genotype and interview data to test for candidate gene effects on opioid dependence, and the moderation by history of childhood trauma
- identify patterns of comorbidity amongst cases and controls

Design and Method: This is a case-control genetic association study of opioid dependence with the inclusion of childhood trauma history as a potential confounding variable. Researchers are interviewing and collecting blood samples from 1500 opioid dependent cases and 1500 non-dependent controls, matched by age, sex and employment status. Childhood trauma and psychiatric comorbidities are measured by a computerised, structured interview which will enable DSM-III and DSM-IV-R diagnoses to be made. Participants will be recruited over 3 years, with interviews being conducted at NDARC, methadone clinics, and community centres in the greater Sydney area.

The study is being conducted in collaboration with Washington University, St Louis; the Queensland Institute of Medical Research, Brisbane; and the Prince of Wales Hospital, Randwick. NDARC will be responsible for the collection of blood samples and interview data from participants, and the genetic analysis will occur at QIMR and Washington University.

Progress: As at November 2007, 96 per cent of the sample has been recruited and interviewed. Recruitment of controls has been more difficult than expected, with only one third of the participants interviewed being controls. Case recruitment in the Sydney area has been completed at most methadone clinics, and interviews have been conducted in Wollongong, Blue Mountains, and the Central Coast. Preliminary data analysis has been conducted. One manuscript has been accepted for publication. Alternative recruitment strategies are being trialled, pending approval from the UNSW ethics committee.

Date Commenced: November 2004

Expected Date of Completion: June 2009

Funding: National Institute of Drug Abuse, NIH, USA

TITLE: AN EXAMINATION OF CONTENTS OF CONFISCATED INJECTING EQUIPMENT AND NEEDLESTICK INJURIES IN PRISONS

NDARC Staff: Kate Dolan and Sarah Larney

Aims: The aims of this project are:

- to provide evidence, other than self-report data, on the level of syringe sharing that occurs in prison
- to provide evidence, other than self-report data, on the level of syringe cleaning that occurs in prison
- to provide evidence, other than self-report data, of HIV positive and/or hepatitis C positive inmates engaging in syringe sharing in prison

Progress: Approval was initially obtained to conduct this study in Western Australia and Victoria. Prison officers in these states have completed a survey about their experiences with needles and syringes in prison, including needlestick injuries. Approximately 30 syringes have been collected from these states. Approval has also recently been obtained to collect syringes from New South Wales prisons. Once these syringes have been collected, the contents of the stored syringe will be tested for HIV and hepatitis C antibodies and the presence of bleach. A type of DNA test will also be conducted to determine the minimum number of individuals who have used the syringe. Results from the syringe testing are expected to be available by 2008. Prison officers in Western Australia and Victoria have completed surveys regarding their experiences with needles and syringes in prison, including needlestick injuries. Prison officers in NSW will be requested to complete this survey also. Survey results from all three states will be available in 2008.

Date Commenced: April 2005

Expected Date of Completion: March 2008

Funding: Unilife Medical Solutions through Unitract Syringe Pty Ltd

TITLE: AN EMPIRICAL INVESTIGATION OF PSYCHOSIS PRONENESS AMONG AMPHETAMINE USERS: CURRENT AND PREDICTIVE VALIDITY

NDARC Staff: Rebecca McKetin and Maree Teesson

Other Investigators: Sharon Dawe (Griffith University), David Kavanagh and John Saunders (University of Queensland), Ross Young (Queensland University of Technology)

Aims: This project is being conducted through Griffith University in collaboration with the National Drug and Alcohol Research Centre. The project aims to investigate:

- the relationship between dose, pattern and duration of amphetamine use and emergent psychotic symptoms
- the relative contribution of amphetamine dose, schizotypal features and family history of schizophrenia on the increase of positive psychotic symptoms

- the progression of psychotic symptoms over time, and specifically what is the evidence for the development of sensitisation to amphetamine such that smaller doses precede an increase in psychotic symptoms

Design and Method: A cohort of 300 methamphetamine users will be recruited from needle and syringe exchange programs in inner Brisbane and Sydney. The cohort will undergo a detailed assessment of psychosis and drug use history at baseline, and will then be followed up at one-month intervals over one year. Follow-up interviews will include assessment of current positive psychotic symptoms and drug use. Psychotic symptoms and diagnostic status will be measured using the Diagnostic Interview for Genetic Studies and the Brief Psychiatric Rating Scale. Premorbid schizotypal features will be assessed using the Premorbid Schizophrenia-spectrum Traits measure and the Oxford-Liverpool Inventory of Feelings and Experiences. Drug use will be assessed for the preceding 30 days using Timeline FollowBack method.

Progress: Data collection is underway for this project in Brisbane, Melbourne and Sydney, and will be completed around mid-2008.

Date Commenced: June 2005

Expected Date of Completion: June 2008

Funding: National Health and Medical Research Council

TITLE: THE ROLE OF CANNABIS DEPENDENCE AS A RISK FACTOR FOR METHAMPHETAMINE PSYCHOSIS

NDARC Staff: Rebecca McKetin and Maree Teesson

Aims: To determine whether cannabis use increases the risk of psychotic symptoms among methamphetamine users.

Design and Method: This project will be implemented as a PhD Candidature and will build on existing research on methamphetamine use and psychosis being carried out at NDARC.

Progress: The establishment of the PhD candidature has been abandoned and the project will now be implemented through the appointment of a research officer. The project will utilise data collected through ongoing NHMRC projects on methamphetamine use and psychosis. The first study carried out within this context has found that dependent methamphetamine users who engage in heavy cannabis use have a higher prevalence of psychotic symptoms compared to those who do not smoke cannabis. This research has been presented at the World Psychiatric Association congress in November 2007, and it is currently being written up as an NDARC technical report. Further work will examine whether and how changes in cannabis use over time among this population impact on psychotic symptoms.

Date Commenced: June 2006

Expected Date of Completion: June 2009

Funding: Australian Government Department of Health and Ageing

TITLE: DEMOGRAPHICS, CIRCUMSTANCES, TOXICOLOGY AND MAJOR ORGAN PATHOLOGY OF PSYCHOSTIMULANT-RELATED DEATHS IN AUSTRALIA

NDARC Staff: Shane Darke, Sharlene Kaye and Rebecca McKetin

Other Investigators: Johan Dufloy (Central and Southwestern Sydney Area Health Service; and University of Sydney)

Aims: This project aims to investigate illicit psychostimulant-related death in Australia. The National Coroners Information System (NCIS) contains information from the coronial files of all Australian states and territories, including case demographics, circumstances of death, toxicology reports and autopsy reports. Information from the NCIS database will be used to investigate deaths where illicit psychostimulants are implicated in the cause of death. Drug classes examined will include amphetamine and amphetamine-type stimulants (ATS), such as MDMA and MDA. Specifically, the demographic profiles, circumstances of death, toxicology and major organ pathology of cases will be examined.

Design and Method: Cases in the NCIS database where illicit psychostimulants are noted as a direct cause of death, an antecedent cause of death, or a significant associated condition contributing to death, will be selected. Drug classes examined will include amphetamine and ATS. De-identified case information, e.g. age, gender, circumstances of death, toxicology results and autopsy results will be entered into a separate database maintained by, and restricted to, the nominated investigators.

Progress: Three hundred and sixty-five cases of methamphetamine-related death have been identified and analysed. The findings have been released in an oral presentation to the Australian Government Department of Health and Ageing and a scientific paper reporting these findings is currently under consideration for publication in *Addiction*. Eighty-two cases of death related to MDMA have been identified and analysed, and a scientific paper reporting the findings is in the final stages of preparation.

Date Commenced: July 2005

Expected Date of Completion: June 2008

Funding: Australian Government Department of Health and Ageing

TITLE: REVIEW MONOGRAPH ON CANNABIS AND MENTAL HEALTH

NDARC Staff: Jennifer McLaren, Richard Mattick and Lisa Robins

Aims: The aim of this project is to provide a comprehensive analysis and review of existing data and expert opinion of the link between cannabis use and mental health. The information gathered through this review will be presented in a way so that it is useable and accessible to policy makers as well as researchers and other professionals in the field.

This review will provide clear information about the link between cannabis and mental health to inform:

- the public debate on this issue
- the development of relevant Australian Government initiatives

Design and Method: Over 12 months, the literature in the area will be systematically reviewed and summarised, routine data analysed, and experts in the field consulted. Additionally, secondary analysis of original data from the major longitudinal cohort studies assessing the relationship between cannabis and mental health will be conducted. A Review Committee will be established to guide the project. The Review committee will be comprised of well-established researchers in the field.

Date Commenced: January 2007

Expected Date of Completion: March 2008

Funding: Australian Government Department of Health and Ageing

TITLE: THE ESTABLISHMENT OF A COHORT OF SUBSTANCE USING PREGNANT WOMEN AND THEIR BABIES

NDARC Staff: Lucy Burns, Delyse Hutchinson, Joanne Ross and Wendy Swift

Other Investigators: Paul Haber (Royal Prince Alfred Hospital; University of Sydney) and Christine Stephens (Hunter New England Area Health Service).

Rationale: In recommendations made from the 1999 NSW Drug Summit it was noted that targeting early childhood interventions in vulnerable and disadvantaged families and communities can make all the difference in preventing harm and equipping young people to resist drug abuse in the longer term. It was also noted that these initiatives should begin before birth and continue as a top priority until the child is 3 years old. Yet despite this, substance abuse continues to be significant contributing factor in both serious child neglect and child death, and has led the authors of the most recent Child Death Review annual report to note the need for urgent action to reduce this serious preventable harm. In order to prevent child harm associated with parental substance use, however, it is first necessary to describe the population at risk. This study represents the first step in filling that need by establishing the feasibility and pilot data necessary for the establishment of the first Australian longitudinal health and social outcome study of pregnant drug dependent women and their children.

Aims: This cohort study will have the potential to answer a number of important policy questions such as what are the patterns and types of drugs used in pregnancy and what constitutes optimal antenatal and postnatal care arrangements for these women. At the broader level it will set the baseline for monitoring the growth and development of a group of

potentially “at risk” children, and for the identification of factors associated both with harm and resilience and “windows of opportunity” for harm reduction.

Design and Method: The design is a cross-sectional survey measuring maternal and neonatal health. Approximately twenty pregnant, drug using women will be recruited. A literature review on the most cost-effective methods of recruitment and retention of these women in research has been undertaken.

Progress: The data collection and literature review have been undertaken and analysis is underway.

Date Commenced: January 2007

Expected Date of Completion: June 2008

Funding: NSW Health, Drug and Alcohol Council Research Grants program 2006-2007

TITLE: EMERGING TRENDS IN DRUG USE AND HIGH RISK BEHAVIOURS AMONG THE HOMELESS

NDARC Staff: Lucy Burns, Katherine Mills, Maree Teesson and Sarah Larney

Other Investigators: Kevin Rozzoli, Kay Elson and Gavin Frost (Haymarket Foundation)

Aims: The present study aims to determine the mental health, physical health and drug use patterns of homeless people in metropolitan Sydney; examine the challenges these issues currently present to clients and service providers alike; and to provide the framework for a large-scale cross sectional study of these issues in rural and metropolitan NSW.

Design and Method: A cross-sectional design has been employed in this study. The socio-demographic, psychiatric, drug use characteristics and patterns of service utilisation of 100 people seen in inner-city services will be examined. To date ninety people have been recruited. The research team includes directors from the Haymarket Foundation and this facility has been used to recruit participants. A survey of service providers is also being undertaken to examine the current major issues experienced when dealing with these individuals and to provide suggestions on how these challenges may be addressed. This data will be open-ended and coded up according to common themes.

Date Commenced: January 2007

Expected Date of Completion: June 2008

Funding: NSW Health Drug and Alcohol Program Research Grants

TITLE: SECONDARY ANALYSIS OF THE RELATIONSHIP BETWEEN CANNABIS USE, DEPENDENCE MENTAL HEALTH AND ASSOCIATED OUTCOMES IN THE VICTORIAN ADOLESCENT COHORT STUDY

NDARC Staff: Wendy Swift, Louisa Degenhardt, Bianca Calabria and Delyse Hutchinson

Other Investigators: George Patton and Carolyn Coffey (The Royal Children’s Hospital Melbourne); John Carlin (Murdoch Children’s Research Institute); Wayne Hall (University of Queensland); and Steve Allsop (National Drug Research Institute)

Aims: There is much current concern and publicity about the relationship between cannabis use and dependence, mental health, other drug use and related psychosocial outcomes, particularly among young people. While there is a growing body of evidence suggesting a relationship, the nature of the relationship is complex and there are many methodological issues which may affect the conclusions that can be drawn. Longitudinal research provides a sound methodology for investigating these issues, and large, well-controlled cohort studies are increasingly contributing to the evidence base. While much published longitudinal research emanates from overseas, there are excellent Australian birth and adolescent cohorts that have collected a wealth of data which can also address the longitudinal psychosocial impact of cannabis use among young people.

This project is a collaboration with the Victorian Adolescent Cohort Study (VACS), which commenced in 1992. It aims to conduct secondary analyses and produce peer-reviewed papers on 4 related areas around the long-term impacts of cannabis use in adolescence and young adulthood: the relationship between cannabis and other drug use, the natural history of cannabis use (patterns of use, abuse and dependence), cannabis use and mental health (especially depression and anxiety) and cannabis use and life transitions.

Design and Method: The VACS has collected 8 waves of data from a representative sample of Victorian adolescent school children, who are now in their late 20s. One class from each school entered the cohort in the latter part of the ninth school year (wave 1) and the second class six months later, early in the tenth school year (wave 2). Participants were subsequently reviewed at 4 six-month intervals during the teens (waves 3 to 6) with two follow-up waves in young adulthood aged 20-21 years (wave 7) and 24-25 years (wave 8). Wave 9 is currently being collected. The first 6 surveys alone created one of the most comprehensive pictures of adolescent development available. This information has been used to improve the health of future generations by influencing policy and informing prevention programs. The 8th survey was completed in 2001-2003. At this time, 1520 participants were surveyed (76% retention). This cohort study has collected comprehensive information on a range of issues, including: mental health, drug use, personality, relationships, and physical and sexual health.

Secondary analyses will be conducted using data from the 8 waves of the cohort. Wave 9 data will be included in relevant analyses if collection is completed during the life of the project. The following areas will be examined (NB: many of these issues are inter-related):(i) the relationship between cannabis and other drug use; (ii) the natural history of cannabis use; (iii) cannabis use and mental health; and (iv) cannabis use and life transitions.

Date Commenced: March 2007

Expected Date of Completion: December 2008

Funding: Australian Government Department of Health and Ageing

TITLE: CANNABIS COHORT RESEARCH CONSORTIUM

NDARC Staff: Delyse Hutchinson, Richard Mattick, Edmund Silins, Jennifer McLaren, Louisa Degenhardt, Wendy Swift, Jan Copeland and Maree Teesson. Other NDARC staff affiliated with the consortium include Marian Shanahan, Greg Martin, Laura Vogl, Lucy Burns, John Howard and Tim Slade.

Other Investigators: Steve Allsop (National Drug Research Institute), David Fergusson (Christchurch School of Medicine and Health Sciences, NZ), Richie Poulton (Dunedin Multidisciplinary Health and Development Research Unit, NZ), Wayne Hall (University of Queensland), Jake Najman (Queensland Alcohol and Drug Research and Education Centre), George Patton (University of Melbourne), Bryan Rodgers (National Centre for Epidemiology and Population Health) and John Toumbourou (Deakin University)

Aims: The Cannabis Cohort Research Consortium brings together a wide range of researchers with the broad aim to plan, conduct and disseminate cannabis research in a number of priority areas. Specifically, the Consortium aims to:

- identify limitations in knowledge on patterns of cannabis use and harms
- examine these limitations through secondary data analysis
- provide health and policy relevant feedback to the community and health professionals

Design and Method: Longitudinal cohort studies, or studies which follow a sample of the general population over time, provide the best available methodology for investigating the association between cannabis use and a range of adverse health and other outcomes. Existing Australian and New Zealand birth and adolescent cohorts provide unique and important information on cannabis and other drug use, mental health and psychosocial factors. These large data sets will be analysed. Findings will be disseminated in a variety of ways including peer-reviewed publications and the E-Zines, bulletins and workshops of the National Cannabis Prevention and Information Centre (NCPIC), which is a collaboration of seven key organisations concerned with cannabis-related issues and is led by NDARC.

Progress: Priority research areas already identified include:

- the natural history of cannabis use
- early life predictors of cannabis uptake
- identification of critical child, adolescent and adult developmental time points at which interventions for cannabis use are likely to be effective
- impacts of cannabis use on mental health
- links between cannabis use and criminal offending
- impacts of cannabis use on educational and occupational attainment

Date Commenced: August 2006

Expected Date of Completion: Ongoing

DRUG MARKET ANALYSIS AND SUPPLY REDUCTION

TITLE: THE ILLICIT DRUG REPORTING SYSTEM (IDRS)

NDARC Staff: Louisa Degenhardt, Jennifer Stafford, Emma Black, Gabrielle Campbell, Natasha Sindichich and Richard Mattick

Other Investigators: Chris Moon and Tania Davidson (NT Dept of Health and Community Services); Stuart Kinner and Meg Richardson (Queensland Alcohol and Drug Research and Education Centre); Robert Ali, Robyn Vial and Nancy White (Drug and Alcohol Services SA); Raimondo Bruno and Barbara de Graaff (University of Tasmania); Brendan Quinn (Turning Point Alcohol & Drug Centre); James Fetherston and Simon Lenton (National Drug Research Institute)

Aims: The aims of this project are:

- to monitor the price, purity, availability and patterns of use of heroin, methamphetamine, cocaine and cannabis
- to identify emerging trends in illicit drug markets in Australia that require further investigation

Design and Method: The IDRS analyses three main sources of information to document drug trends:

- a quantitative survey of injecting drug users (IDU)
- a semi-structured interview with key experts (KE), who are professionals working in the illicit drug field, and have regular contact with and/or specialised knowledge of illicit drug users, dealers or manufacture
- a collation of existing indicator data on drug-related issues

Data from these three sources are compared against each other to determine the convergent validity of trends detected. The data sources complement each other in the nature of the information they provide. Data from each year's IDRS studies are compared to earlier findings to determine changes in drug trends over time. The strengths of the IDRS are the ability to compare data across jurisdictions as well as over time.

Progress: The IDRS is an ongoing project that is conducted annually in all Australian jurisdictions. In 2006, over 900 IDU were interviewed across Australia, providing information on their use patterns, drug markets and related issues. Key experts from a range of professions provided information on the ecstasy and related drug users they had contact with. Indicator data including Australian Customs Service seizures, purity analysis, overdose and treatment data were examined. A national overview and presentations on specific areas of interest arising from the data were presented to relevant health professionals, law enforcement, and policy makers. Throughout the year, quarterly bulletins outlining current drug trends or issues of interest were also disseminated. These bulletins are available on the NDARC website.

Date Commenced: January 1997

Expected Date of Completion: Ongoing

Funding: Australian Government Department of Health and Ageing

TITLE: THE ECSTASY AND RELATED DRUGS REPORTING SYSTEM (EDRS)

NDARC Staff: Louisa Degenhardt, Emma Black, Jennifer Stafford, Matthew Dunn, Gabrielle Campbell and Richard Mattick

Other Investigators: Brendan Quinn (Turning Point Alcohol & Drug Centre); Dr Raimondo Bruno and Allison Matthews (University of Tasmania); Robert Ali, Robyn Vial and Dr Nancy White (Drug & Alcohol Services South Australia); Stuart Kinner and Ana Urbancic-Kenny (Queensland Alcohol and Drug Research and Education Centre); Jessica George and Simon Lenton (National Drug Research Institute)

Aims: The aims of this project are:

- to describe the characteristics of a sample of current regular ecstasy users interviewed in each capital city of Australia
- to examine the patterns of ecstasy and related drug (ERDs) use of these samples
- to document the current price, purity and availability of ERDs across Australia
- to examine the incidence and nature of harms related to the use of ERDs
- to identify emerging trends in the ERDs market that may require further investigation

Design and Method: Previously known as the Party Drugs Initiative, the EDRS is coordinated by the National Drug and Alcohol Research Centre, and is conducted by different research institutions in each Australian state and territory.

The EDRS uses a similar methodology to the Illicit Drug Reporting System (IDRS). Regular ecstasy users are interviewed as they were identified as a group of drug users that are able to provide the required information on patterns of ecstasy

and related drugs (ERDs) use, the current availability, price and purity of ERDs and perceived drug-related health issues associated with ERDs use. A semi-structured survey of experts in the field of ERDs (e.g. party promoters, treatment providers and law enforcement personnel) is also conducted and indicator data (e.g. purity of drug seizures and overdose rates) are analysed. These data sources are examined together to identify convergent trends in ERDs use and markets.

Progress: The EDRS was conducted successfully in every state and territory in 2007. Over seven hundred regular ecstasy users were interviewed, providing information on their drug use patterns, ERD markets and related issues. Key experts from a range of professions provided information on the ecstasy and related drug users they had contact with. Indicator data including Australian Customs Service seizures, purity analysis and treatment data were examined. Throughout the year, quarterly bulletins outlining current drug trends or issues of interest were disseminated. These bulletins are available on the NDARC website. More detailed findings from each jurisdiction, and a national overview, are documented in comprehensive reports.

Date Commenced: January 2003

Expected Date of Completion: Ongoing

Funding: Australian Government Department of Health and Ageing

PREVENTION AND EARLY INTERVENTIONS

TITLE: ALCOHOL ACTION IN RURAL COMMUNITIES (AARC)

NDARC Staff: Anthony Shakeshaft, Richard Mattick, Courtney Breen, Alys Havard, Elissa Wood and Pota Hatzopoulos

Other Investigators: Rob Sanson-Fisher (University of Newcastle), Ann Roche (National Centre for Education on Training and Addiction), Chris Doran and Catherine D'Este (University of Queensland)

Aims: This project aims to conduct a cost-benefit analysis of a community action intervention strategy to reduce alcohol-related harm in rural communities in NSW.

Design and Method: The community action approach used in this study involves the systematic and coordinated implementation of a range of intervention strategies across whole communities. The simultaneous and sustained implementation of a number of complementary interventions aims to maximise their combined effect, even though the interventions themselves may be of variable effectiveness. This approach will be evaluated using a randomised controlled trial design. Ten matched pairs of rural communities were identified and one community in each pair was randomly allocated to the intervention condition, and the other to the control condition. Alcohol-related harm will be measured using alcohol-related problems (as measured by a community survey), alcohol-related criminal incidents, alcohol-related traffic accidents, alcohol-

caused hospital admissions and alcohol-related emergency department presentations. This project will also undertake a cost-benefit economic analysis to determine whether the community action approach is associated with positive net social benefits.

Progress: All pre-test data, with the exception of emergency department presentations and hospital admissions, have been obtained and analysed. Through an open community forum, meetings with key stakeholders and local media, experimental communities have been provided with tailored feedback on the level of alcohol harm experienced by their community. The first round of interventions has been implemented and completed. Included among these interventions were: school-based education; training GPs in screening and conducting brief interventions; training of workplaces in minimising harm arising from alcohol-related issues; and provision of a screening tool for use in pharmacies. Follow-up community meetings have been held, from which a second round of interventions arose. Interventions currently underway include: a panel discussion for parents on the secondary supply of alcohol, designated driver programs, a coordinated community approach to high risk weekends, the Good Sports program, education and work experience opportunities for at-risk young people, an empowerment program for Indigenous health workers, and the continual feedback of data to community members. Other interventions have been offered on an ongoing basis, including: the provision of relevant resources on the AARC webpage; web-based screening and brief intervention; and access to a free controlled drinking by correspondence program.

Date Commenced: January 2004

Expected Date of Completion: December 2009

Funding: Alcohol Education and Rehabilitation Foundation (AERF)

TITLE: CLIMATE SCHOOLS: PSYCHOSTIMULANT AND CANNABIS MODULE: THE DEVELOPMENT AND EVALUATION OF AN INTERACTIVE COMPUTER BASED PREVENTION PROGRAM FOR PSYCHOSTIMULANTS AND CANNABIS

NDARC Staff: Laura Vogl, Maree Teesson, Nicola Newton, Wendy Swift, Catherine Deans, Alys Havard, Paul Dillon, and Rebecca McKetin

Other Investigators: Gavin Andrews (School of Psychiatry, UNSW)

Aims: Psychostimulants and cannabis have emerged as two of the three most commonly used illicit drugs among Australian school students (inhalants is the third), providing a compelling argument to develop a new CLIMATE Schools module for these substances. Hence, the aim of the current project is to develop and evaluate the effectiveness of an evidence-based, computer-driven, prevention program to reduce use and harms associated with psychostimulants and cannabis in high school students.

Design and Method: Two modules have been developed to enable teachers to implement a developmentally appropriate sequence of drug prevention programs in schools. CLIMATE Schools: Cannabis and Alcohol Module is designed for Year 8 students, and CLIMATE Schools: Psychostimulant and Cannabis Module for Year 10 students. These programs have been designed to compliment the existing CLIMATE Schools: Alcohol Module (Year 7/8). The CLIMATE Schools programs have been developed in collaboration with students, teachers and experts in the areas of alcohol, cannabis and psychostimulants.

A cluster randomised controlled trial (RCT) has commenced to evaluate CLIMATE Schools: Cannabis and Alcohol Module. The RCT to assess the efficacy of CLIMATE Schools: Psychostimulant and Cannabis Module will commence in April 2008. In both RCTs, twenty schools will be randomly allocated either to receive the module or to receive drug education as usual. To determine program efficacy, outcome measures will be collected on four separate occasions: pre, immediate post, 6 and 12 month follow-up. The outcomes of focus will be: psychostimulant and cannabis use, harmful consequences associated with use and other factors that may mediate program efficacy.

Date Commenced: June 2006

Expected Date of Completion: December 2008

Funding: Australian Government Department of Health and Ageing

TITLE: ALCOHOL USE DURING PREGNANCY: FORMATIVE INTERVENTION RESEARCH

NDARC Staff: Delyse Hutchinson

Other Investigators: Nyanda McBride and Susan Carruthers (National Drug Research Institute) and Carol Bower (Telethon Institute for Child Health Research)

Aims: The aims of this formative research study are to:

- Collect qualitative and quantitative information from women attending public hospital antenatal clinics in Perth, Western Australia, about their pregnancy and antenatal alcohol related experiences
- Identify potential intervention targets, strategies and components that may impact on alcohol use during pregnancy for use in future intervention research

Design and Method: There are two components to this study. They are as follows:

Part A: Quantitative Project

This survey of approximately 400 pregnant women who consume alcohol will provide information about frequency and quantity of alcohol use, details of pregnancy history, and insights into potential intervention components, targets and strategies.

Part B: Qualitative Project

This research involves focus groups with pregnant women who consume alcohol. The primary aim of the focus groups is to identify potential intervention components, targets and strategies.

Date Commenced: October 2006

Expected Date of Completion: December 2008

TREATMENT AND OTHER INTERVENTIONS

TITLE: METHAMPHETAMINE TREATMENT COHORT STUDY

NDARC Staff: Richard Mattick, Rebecca McKetin, Joanne Ross and Erin Kelly

Other Investigators: Robert Ali (Drug & Alcohol Services South Australia; and the University of Adelaide) and Dan Lubman (University of Melbourne). Associates are Jake Najman (Queensland Alcohol and Drug Research and Education Centre), Amanda Baker (University of Newcastle), Nicole Lee (Turning Point Alcohol & Drug Centre), Sharon Dawe (Griffith University) and Matthew Law (National Centre for HIV Epidemiology and Clinical Research, UNSW).

Aims: To conduct the first Australian treatment cohort study of dependent methamphetamine users, examining:

- rates of psychiatric disorders (Major Depression, Panic Disorder, Agoraphobia, Social Phobia, and Generalized and Anxiety Disorder) and psychotic symptoms among people seeking treatment for methamphetamine dependence
- the characteristics of those entering treatment for methamphetamine dependence, in terms of abstinence rates, criminal involvement, general health functioning, and contact with health services and the criminal justice system
- differences between the characteristics of those entering treatment and dependent methamphetamine users not seeking treatment in terms of their level of drug use, psychiatric morbidity, criminal involvement and general health functioning
- factors predictive of abstinence, psychiatric morbidity, criminal involvement and contact with the health and criminal justice system

Design and Method: The study will consist of a longitudinal follow-up of 400 methamphetamine users: 300 people receiving treatment for methamphetamine use and a comparison group of 100 out-of-treatment dependent methamphetamine users. Participants will be interviewed at baseline, 3 months and 12 months. Treatment modalities included will be counselling, residential rehabilitation and withdrawal management. The main predictor variable in the study will be treatment exposure (treatment retention, treatment completion and dose of treatment measured in days of treatment exposure/ counselling sessions). The main outcome measure will be level of methamphetamine use at 3 month and 12 month follow-up (days of abstinence, diagnosis of methamphetamine

dependence, severity of methamphetamine dependence). Other data collected will include rates of psychiatric diagnoses (DSM-IV diagnosis of Major Depression, Panic Disorder, Agoraphobia, Social Phobia, and Generalized and Anxiety Disorder); symptoms of psychosis; treatment experience; criminal involvement; HIV risk-taking; and contact the health and criminal justice system.

Progress: Data collection is underway for this project, and the recruitment of participants is on schedule. Base line recruitment of methamphetamine treatment entrants is complete (n=300) and recruitment of the non-treatment comparison group will be completed in early 2008 (73 of the anticipated 100 have been recruited). Follow-up interviews (both 3 month and 12 month) are underway. The current 3 month and 12 month follow-up rates are 82% and 79% respectively, with a further 8% being incarcerated or deceased at the time of follow-up.

Date Commenced: June 2005

Expected Date of Completion: June 2009

Funding: National Health and Medical Research Council

TITLE: TWO CONCURRENT RANDOMISED PLACEBO CONTROLLED TRIALS OF MODAFINIL IN METHAMPHETAMINE AND COCAINE DEPENDENCE

NDARC Staff: Richard Mattick, James Shearer, Rebecca McKetin and Shane Darke

Other Investigators: Alex Wodak, (St Vincent’s Hospital), Ingrid van Beek (Kirketon Road Centre) and John Lewis (Pacific Laboratory Medicine Services)

Aims: Modafinil is a novel wake promoting agent which may have potential in the treatment of psychostimulant dependence withdrawal symptoms including low mood, excessive sleepiness, poor concentration and drug craving thereby protecting against relapse. Modafinil is well tolerated with few major side effects and appears to have a low abuse liability. The aim of the two studies is to evaluate the safety and efficacy of modafinil (200 mg/day over 10 weeks), and a brief cognitive behavioural therapy (CBT) program for psychostimulant (cocaine and methamphetamine) dependence.

Design and Method: Two concurrent randomised placebo controlled trials will be conducted at the Kirketon Road Centre, a primary health care centre and Rankin Court, an alcohol and drug treatment centre, both located in inner city Sydney. Recruitment targets are 60 for the amphetamine study and 30 in the cocaine study. Subjects in both studies will be randomised equally to two groups. The experimental groups will receive a modafinil dose of 200 mg/day under a weekly script for 10 weeks. The control group will receive placebo under equivalent conditions. Both groups are offered a four-session manualised brief CBT intervention designed for amphetamine users. Treatment efficacy will be primarily evaluated by a between group comparison of the proportion of urine samples negative for psychostimulant over 10 weeks. Safety will be evaluated by between group comparison of side effects and

adverse events. Self-reported stimulant use, other drug use and retention will be compared between groups. Improvements in health and psychosocial harms associated with regular stimulant use and patterns of use will also be compared.

Benefits: The project is an original and rigorous contribution to the development of effective treatments in an area where few treatments currently exist and treatment need is great and growing. Results will be of wide national and international interest to service providers, research, policy makers and stimulant users.

Date Commenced: July 2005

Expected Completion Date: January 2008

Funding: Australian Government Department of Health and Ageing

TITLE: THE DEVELOPMENT OF STANDARDISED TREATMENT MONITORING TOOL FOR USE BY RESEARCHERS AND CLINICIANS: THE AUSTRALIAN ALCOHOL TREATMENT OUTCOME MEASURE (AATOM)

NDARC Staff: Jan Copeland, Alison Ritter, Peter Gates and Melanie Simpson

Other Investigators: Nicole Lee (Turning Point Alcohol & Drug Centre) and Larry Pierce (Network of Alcohol and Other Drug Agencies)

Aims: The project aims to develop a standardised instrument (questionnaire) designed to measure outcomes for individuals in treatment for alcohol use in Australia. A further aim of the project will be to assess the feasibility of implementing this instrument into routine clinical practice in Australia.

Design and Method: The Alcohol Treatment Outcome Measure (AATOM) will comprise of two versions: one intended for use amongst clinicians for the purpose of routine treatment outcome monitoring for service development or funding requirements (AATOM-C) and one for use amongst researchers (AATOM-R). This study will also examine the psychometric properties of the AATOM-R including biological validation. The feasibility of conducting routine, ongoing outcome monitoring with the AATOM-C will be assessed in a range of treatment settings and modalities. This phase of the project will utilise a software version of the AATOM to facilitate the collection, collation and reporting of data. It will also include a formal assessment of clinician attitudes towards routine outcome monitoring in general and the use of the AATOM in particular.

Progress: The project has completed psychometric data collection and recruitment to the feasibility study will be completed in February 2008. The technical report, describing the psychometric properties of the AATOM-C, has been published. The report on the AATOM-R, to be written by Turning Point, will be completed by December 2007. The software version of the AATOM (the E-AATOM) has been developed and disseminated to non-government organisations throughout NSW.

Date Commenced: July 2007

Expected Date of Completion: April 2008

Funding: Alcohol Education and Rehabilitation Fund (AERF)

TITLE: IDENTIFICATION OF BARRIERS AND FACILITATORS TO CANNABIS TREATMENT

NDARC Staff: Jan Copeland, Peter Gates, Stephanie Taplin, Greg Martin and Wendy Swift

Aims: Individuals with cannabis-related problems are under-represented in specialist treatment services, and frequently those who do enter treatment are already experiencing significant problems. It is vital to identify factors that act as barriers to treatment-seeking and influences that facilitate entry into treatment. Policy and clinical practices that address these issues will promote earlier entry into treatment, and a reduction in cannabis-related harms to individuals, their families and the Australian community.

Design and Method: The project has four components:

- Examination of the published research literature on the facilitators and barriers to entry into illicit drug treatment in general, and cannabis treatment in particular, to inform development of the survey instrument. This will be presented as a brief literature review of 2,500 words.
- The conduct of a face-to-face survey of a total of 100 adolescents and adults in cannabis treatment in the Greater Sydney area. No more than 20% of the sample will have co-morbid dependence on other drugs.
- The conduct of a face-to-face survey of 100 adults and adolescents in the Greater Sydney area stratified by levels of cannabis use (50 daily or near daily users over the past 3 months, and 50 weekly users over the same period). No more than 20% of the sample will have co-morbid dependence on other drugs.
- The conduct of two secure, online surveys that will target families of cannabis users, who may have attempted to gain access to treatment for their family members, and frequent cannabis users across Australia, for their views on the barriers and facilitators into treatment and information sources.

Progress: The literature review as well as the recruitment and interviewing of a total sample of 330 participants have been completed. Data have been analysed and a technical report is in the process of peer review. The results are soon to be published in peer-reviewed journals.

Date Commenced: July 2007

Expected Date of Completion: October 2008

TITLE: METHAMPHETAMINE TREATMENT COHORT STUDY – ESTABLISHMENT OF A MULTI-SITE STUDY**NDARC Staff:** Rebecca McKetin, Joanne Ross and Richard Mattick**Other Investigators:** Jake Najman and Shelley Cogger (Queensland Alcohol and Drug Research and Education Centre)**Rationale:** Australia has a substantial and growing population of dependent methamphetamine users: methamphetamine accounts for 96% of psychostimulant treatment episodes in Australia, around one-third of all injecting drug use, and is the leading cause of psychosis due to substance use. Currently there is a dearth of information on the effectiveness of treatment provided to this population within a community setting. NDARC has been funded by the National Health and Medical Research Council (NHMRC) to establish a Methamphetamine Treatment Cohort Study in Sydney to examine (a) treatment outcome at 3 months and 12 months post treatment, (b) comorbid mental health disorders among methamphetamine users in treatment, and (c) the impact of comorbid mental health disorders on treatment outcome and vice versa.**Design and Method:** The current study will expand the Sydney Methamphetamine Treatment Cohort Study to include a second recruitment site in Brisbane. An additional 100 treatment participants from this second site using the same methodology employed under the Methamphetamine Treatment Cohort Study. This arm of the study will be undertaken by the Queensland Alcohol and Drug Research and Education Centre (QADREC).**Progress:** Data collection is underway for this project, and the recruitment of participants is on schedule. Baseline recruitment of the cohort (100 methamphetamine treatment entrants) has been completed, as have 3 month follow-up interviews (follow-up rate 81%). One year follow-up interviews with the cohort are currently underway.**Date Commenced:** June 2005**Expected Date of Completion:** June 2008**Funding:** Australian Government Department of Health and Ageing**TITLE:** THE INTRODUCTION OF BUPRENORPHINE-NALOXONE (SUBOXONE®) IN AUSTRALIA: EXTENT OF DIVERSION AND RELATED HARMS**NDARC Staff:** Louisa Degenhardt, Richard Mattick, Briony Larence and Susannah O'Brien**Other Investigators:** Robert Ali (Drug & Alcohol Services South Australia); James Bell (South East Sydney and Illawarra Area Health Service); Adam Winstock and Nick Lintzeris (Sydney South West Area Health Service)**Aims:** Buprenorphine-naloxone (Suboxone®) was registered in Australia in 2005 by the Therapeutic Goods Administration and has been available on the Pharmaceutical Benefits Scheme

since April 2006. The present study monitors the extent of diversion and injection of buprenorphine-naloxone over the three years following its release.

Design and Method: Comparisons will be made between the three main pharmacotherapies for opioid dependence (methadone, buprenorphine and buprenorphine-naloxone). The study will triangulate data from the following sources:

- Interviews with regular injecting drug users (through the Illicit Drug Reporting System)
- Interviews with pharmacotherapy clients (methadone, buprenorphine and buprenorphine-naloxone clients in NSW, Vic and SA)
- Interviews with key experts (e.g. clinicians, pharmacists, NSP workers, outreach workers)
- A postal survey of authorised prescribers
- Prescription data
- Secondary indicators of morbidity and mortality (e.g. hospital, emergency department, law enforcement and coronial data)

The study will also review the international experience of buprenorphine-naloxone and the Australian policy context (national and jurisdictional).

Progress: The project commenced in March 2006. An Advisory Committee (made up of AOD specialists and researchers from across Australia) was established to inform the methodology and development of the project. The above methodology was agreed and ethical approval has been obtained from UNSW and the relevant health services. Interviews with regular injecting drug users for the Illicit Drug Reporting System were conducted in 2006 and 2007. All other 2007 data collection is completed; including the first cross-sectional survey of approximately 400 pharmacotherapy clients (NSW, Vic and SA), detailed interviews with 39 key experts and the national postal survey of prescribers. Preparations are being made for 2008 data collection.**Date Commenced:** March 2006**Expected Date of Completion:** March 2009**Funding:** Reckitt Benckiser Pty Ltd.**TITLE:** CLINICAL GUIDELINES FOR THE MANAGEMENT OF CANNABIS USE DISORDER**NDARC Staff:** Amie Frewen and Jan Copeland**Rationale:** The philosophy of evidence-based practice is based upon the notion that clinical practice should be guided by a hierarchy of research evidence in addition to clinical consensus, and the formulation of evidence-based clinical guidelines is a basic tenet of this approach to practice. Such guidelines are grounded in the best available research gathered from a systematic review of the literature, and the levels of evidence are graded. In the area of cannabis use, there is a particularly

strong case for developing evidence-based guidelines given the inconsistency of clinical practice and the paucity of research evidence.

Aims: To develop clinical guidelines for the management of cannabis use disorder.

Design and Method: Using the “Kettil Brrun” method of reaching clinical consensus, the process involves three stages:

- A ‘trigger paper’ that reviews the literature.
- A ‘discussant paper’ that assesses the trigger paper and begins to develop recommendations for turning the evidence into clinical practice.
- A reference group that reads both the trigger paper and discussant paper and meets to discuss and develop consensus on the guidelines in a workshop format.

Progress: A project manager was employed in September 2007 and various methods for developing clinical guidelines for the project were researched. The ‘Kettil Brrun’ method was agreed upon and key areas for the guidelines were subsequently defined by the working group. The working group also identified key experts in the cannabis field who were approached to write trigger and discussant papers in eight key areas.

Date Commenced: August 2007

Expected Date of Completion: February 2009

Funding: Australian Government Department of Health and Ageing

TITLE: THE EFFICACY OF PEER-LED INTERVENTIONS WITH ECSTASY AND RELATED DRUGS (ERDS) USERS

NDARC Staff: Annie Bleeker, Paul Dillon and Jan Copeland

Aims: The aim of this project is to test the effectiveness of peer led dissemination of health information for ecstasy and related drugs (ERDs) users using a unique message about serotonin syndrome.

Design and Method: A quasi-experimental study design will be utilised over four study sites – three in Australia and one in the Netherlands.

A literature review will be written on the efficacy of peer led interventions. Using the review, a Peer Training Program will be designed, developed and implemented. Utilising information collected from the project ‘Development of materials on ecstasy and related drugs (ERDs) for primary health care practitioners’ a unique message relating to serotonin syndrome will be created and incorporated into the Training Program. The trained peers will then attend 12 events over the 2006/2007 summer across three sites in Australia (with cases and controls) where they will disseminate a series of safer partying messages, including the serotonin message.

A series of instruments will be designed to measure process mechanisms and assess the effectiveness of the peer program. Follow-up interviews will be conducted with cases and controls.

Progress: Four study sites have been chosen and organisations have been identified to assist in the peer intervention. Sydney, Adelaide and Canberra will be the three Australian sites with the Australian Red Cross conducting the intervention in all three jurisdictions. Keep-It-Simple (KIS) will also be a part of the Sydney project. Unity, a peer project run out of Jellinek in Amsterdam, The Netherlands, will be the overseas partner. Peers have been recruited in all jurisdictions and training has been conducted. Two messages have been chosen – the original serotonin syndrome message, as well as a water message which was put forward by Jellinek. Resources promoting the messages (information brochures, t-shirts, water bottles, etc) have been developed. Dance festivals have been identified in all jurisdictions for both the control and the intervention components of the study and negotiations are currently underway with organisers and promoters to ensure that the peer interventions can take place at these events. Data has been collected from all four study sites and is being analysed. Full report on the project will be completed by end of January 2008 and forwarded to the Department of Health and Ageing.

Date Commenced: February 2006

Expected Date of Completion: January 2008

Funding: Australian Government Department of Health and Ageing; ACT Department of Health

TITLE: THE EFFICACY OF AN INTERVENTION FOR POST TRAUMATIC STRESS DISORDER (PTSD) AMONG ILLICIT DRUG USERS

NDARC Staff: Maree Teesson, Katherine Mills and Claudia Sannibale

Other Investigators: Amanda Baker (University of Newcastle); Sally Hopwood (Westmead Hospital); Sudie Back (Medical University of South Carolina, USA); Kathleen Brady (Medical University of South Carolina, USA)

Aims: The present study is the first randomised controlled trial to examine the efficacy of an integrated therapy for PTSD and illicit drug use disorders.

Specifically, the aims of the study are to:

- evaluate the efficacy of an integrated intervention for PTSD and illicit drug use disorders by comparing the treatment outcomes of those who receive the intervention with those who receive standard care for their drug use
- identify factors that influence the efficacy of the integrated intervention including:
 - subject characteristics: demographic, drug use, and psychological factors
 - treatment characteristics: treatment compliance
- to assess the feasibility of implementing the intervention as measured by treatment retention and client satisfaction

Design and Method: A randomised controlled trial will be conducted to address the research aims. Individuals entering outpatient substance abuse treatment at participating treatment agencies will be screened for PTSD by agency clinicians. Participants will be randomised to two groups stratified according to PTSD severity and gender: (i) those who receive the intervention (n=80), and (ii) those who receive standard care (n=80).

The intervention is a modified version of Concurrent Treatment of PTSD and Substance Dependence developed in the United States. The intervention consists of thirteen, 90 minute sessions involving cognitive behavioural therapy with exposure techniques. All participants will be followed-up at 6 weeks, 3 months and 9 months post baseline. Baseline and follow-up interviews will include validated instruments to measure demographics, substance use and dependence, substance use and PTSD treatment history, criminal involvement, general physical and mental health, trauma exposure and PTSD, depression, anxiety, borderline personality disorder, and health service utilisation.

Progress: Recruitment for the randomised controlled trial commenced in April 2007. As of December 2007, 24 participants have been recruited into the study.

Date Commenced: January 2007

Expected Date of Completion: January 2010

Funding: National Health and Medical Research Council and NSW Health

TITLE: INTEGRATING TREATMENT FOR ALCOHOL USE PROBLEMS AND COMORBID PTSD

NDARC Staff: Claudia Sannibale, Maree Teesson, Katherine Mills, Kylie Sutherland, Kirsty Taylor and Delphine Bostock-Matusko

Other Investigators: Thiagarajan Sitharthan and Alicia Visser (Australian Centre for Addiction Research), and Mark Creamer (Australian Centre for Post-traumatic Mental Health)

Aims: The study aims to determine the efficacy of an integrated CBT intervention for PTSD and alcohol use problems in the treatment of these disorders in the general community. The manual guided intervention is based on empirically supported treatment and integrates imaginal exposure with CBT for alcohol use disorder. The study compares treatment for these problems delivered simultaneously with treatment for alcohol use alone.

Design and Method: This study is a randomised controlled trial in which participants will be allocated to one of two treatment conditions: integrated treatment for alcohol use problems and PTSD (Integrated) or treatment for alcohol use problems alone combined with empathic (Supportive) therapy. Two hundred and sixty four participants over the age of 18 years who consume alcohol at risky levels (drinking ≥ 29 drinks per week for men and ≥ 15 drinks per week for women) and meet criteria for PTSD, will be recruited to the study from

four sites in Sydney (NDARC, Centre for Addiction Research, Western Sydney Area Health, Drug Health Services, Royal Prince Alfred Hospital, Sydney South Western Area Health Service and Herbert Street Clinic, Northern Sydney Central Coast Area Health Service). Recruitment will target the general community, GPs, psychiatrists, and specialist drug and alcohol and anxiety clinics.

Date Commenced: June 2007

Expected Date of Completion: June 2010

Funding: National Health and Medical Research Council

TITLE: DEVELOPMENT AND EVALUATION OF SPECIALIST SERVICES FOR FEMALE DRUG USERS IN IRAN

NDARC Staff: Kate Dolan and Bradley Mathers

Other Investigators: Dr Bijan Nassirimanesh, Persepolis (NGO) and Dr Azarakhsh Mokri (Tehran University of Medical Sciences, Iran)

Aims: The aims of this project are as follows:

- to improve the health, welfare and social functioning of women who use drugs including those who inject drugs, are former prisoners or engage in commercial sex work in Tehran
- to design, deliver and evaluate a co-ordinated range of services to meet the immediate health and welfare needs of this vulnerable population
- to provide services that are non-judgemental, professional, culturally sensitive, accessible and acceptable to Iranian women in this target population

Design and Method: The activities to be carried out in this program of work are as follows:

- to design programs and establish a women only community based clinic to provide a range of services including: methadone maintenance treatment, sexual health services, needle syringe program, contraception and family planning, primary healthcare, counselling, employment training, legal services and a drop in centre
- to design and establish a pre-release prison methadone maintenance program for female prisoners with treatment continued after release in the community at the Women's Clinic
- to undertake research and produce evidence on the efficacy of project activities including a study of the prison methadone program

Date Commenced: May 2007

Expected Date of Completion: November 2008

Funding: The Drosos Foundation, Switzerland

TITLE: STEPS THROUGH AMPHETAMINES: COGNITIVE BEHAVIOUR THERAPY (CBT) FOR REGULAR AMPHETAMINE USE AND DEPRESSION: A STEPPED CARE APPROACH

NDARC Staff: Rebecca McKetin, Maree Teesson, Frances Kay-Lambkin, Erin Kelly and Kate Hetherington

Other Investigators: Amanda Baker (University of Newcastle), Robert Batey (NSW Health), Nicole Lee (Turning Point Alcohol & Drug Centre)

Aims: This pilot study aims to assess the efficacy of a stepped care cognitive behavioural therapy (CBT) intervention among regular amphetamine users with comorbid depression. Specifically, this includes:

- Formalise a stepped care model of treatment incorporating a range of psychological interventions shown in previous research to be effective in reducing amphetamine use and depressive symptomatology.
- Trial the stepped care model of treatment among a target group of 20 people who are both regular users of amphetamines and who currently report moderate symptoms of depression. Provision of treatment in this group will be contingent on their response (amphetamine use and depression) to a previously provided step in treatment.
- Compare the 'stepped care' group with a 'standard' treatment group of 20 people who are both regular users of amphetamines and who currently report moderate symptoms of depression. All people in this group will receive all components of treatment regardless of response.
- Compare outcomes for amphetamine use, depression, general functioning, etc. between groups.
- Use the results of this study to inform an application for a large, competitive grant.

Design and Method: Forty regular amphetamine users with comorbid depression will be recruited across two sites, NDARC and the Centre for Mental Health Studies in Newcastle. All participants at NDARC will receive a full course of integrated CBT for amphetamine use and depression, independent of treatment response, while participants at the Centre for Mental Health Studies will receive a stepped care intervention, with provision of treatment contingent on response to previous intervention. The intervention consists of a detailed mental health and drug and alcohol assessment, followed by up to 12 one hour sessions of CBT. Assessment of progress will be conducted at 5 weekly intervals, and used to plan subsequent treatment in the stepped care condition. An independent research team member will carry out a 20 week follow-up assessment with each participant.

Progress: Recruitment for the study is currently underway at both sites.

Date Commenced: December 2007

Expected Date of Completion: November 2008

Funding: NSW Mental Health, Drug and Alcohol Comorbidity Research Grants Program 2006-2007

INFORMATION AND TRAINING

TITLE: PROGRAM OF INTERNATIONAL RESEARCH AND TRAINING (PIRT)

NDARC Staff: Kate Dolan, Alex Wodak, Richard Mattick, Sarah Larney and Bradley Mathers

Rationale: In 2002 the Centre established the Program of International Research and Training (PIRT) under the management of Associate Professor Kate Dolan. PIRT functions as the international arm of NDARC's core business. To date the activities of this program have focused on developing and transitional countries.

Aims: To facilitate research and training to minimise the harms from drug use and to increase the effectiveness of drug treatment internationally by:

- building capacity into research in drug treatment within developing countries
- building capacity for monitoring drug use and drug problems in developing countries
- building alliances between Australia and developing countries in terms of understanding drug trends and law enforcement
- encouraging policy relevant research consistent with national strategies and cultures

Design and Method: PIRT works on a range of issues encompassing licit and illicit drug use and related harms. The geographical focus of our work is the Asia-Pacific region. Particular areas of specialisation include:

- HIV prevention for injecting drug users
- methadone maintenance treatment in community and prison settings
- HIV prevention in prisons and other closed settings

Research: PIRT conducts original research and encourages collaboration with international partner organisations. PIRT staff have conducted rapid assessments of drug use and HIV in community and prison settings. Examples of past and current research projects include:

- a literature review to identify 50 key documents on HIV prevention, treatment and care for injecting drug users. This project was conducted for the International Harm Reduction Association (IHRA), with funding from AVERT.
- a qualitative study of the process by which We Help Ourselves, an abstinence-based therapeutic community, introduced harm reduction strategies into their service model. This project was funded by the World Health Organization Western Pacific Regional Office.

- a rapid assessment of drug use, HIV prevalence and HIV risk behaviours in prisons in Jakarta, Indonesia in 2005.
- a rapid assessment HIV/AIDS and drug use in Mongolia in 2006.
- a report on drug demand reduction strategies in closed settings in China, Indonesia and Vietnam. 'Closed settings' is a term encompassing prisons, work camps and compulsory drug treatment centres. This report will identify the various drug education and treatment programs available to detainees of closed settings in these three countries. This project is funded by the United Nations Office on Drugs and Crime Regional Centre (UNODC) for East Asia.
- a report on HIV prevention, treatment and care (PTC) in prisons in India, Indonesia, Thailand and Nepal. This comprehensive report includes an introduction to the issues of HIV PTC in prison; an analysis of HIV PTC in prisons in each of the above countries; a regional summary of HIV PTC; and recommendations for improving HIV PTC in prisons. This project was funded by the World Health Organization South-East Asia Regional Office.
- production of a training manual on harm reduction, drug use and HIV prevention for the World Health Organization Western Pacific Regional Office (WHO WPRO).
- funded by the Drosos Foundation and in collaboration with the Iran Prisons Organisation, The Persepolis Centre and the Iran National Centre of Addiction Studies, the establishment of a primary health care centre with MMT for female IDUs in Tehran, Iran in 2007.
- development of guidelines for drug detoxification management and drug dependency treatment in closed settings in South-East Asia. This project is funded by WHO WPRO and completion is expected by mid-2007.

Training: PIRT is actively involved in providing training to health care workers, law enforcement personnel and researchers. PIRT trainers have conducted courses in Australia, Indonesia, Iran, Taiwan and Cambodia. Broadly, training programs focus on HIV prevention and harm reduction for injecting drug users. Areas of training expertise include:

- drug treatment, in particular, substitution treatment
- needle and syringe programs
- outreach to injecting drug users
- HIV prevention and harm reduction in prison
- monitoring and evaluation
- research dissemination

Date Commenced: March 2003

Expected Date of Completion: Ongoing

Funding: Australian Government Department of Health and Ageing; United Nations Office on Drugs and Crime; World Health Organisation; Family Health International; and The Drosos Foundation

TITLE: DEVELOPMENT OF GUIDELINES: DRUG DETOXIFICATION AND DRUG TREATMENT IN AREAS OF HIGH HIV PREVALENCE OR RISK AND CLOSED INSTITUTIONS

NDARC Staff: Kate Dolan, Bradley Mathers and Sarah Larney

Aims: This project aims to develop two sets of guidelines covering drug detoxification and drug treatment for use in compulsory drug treatment facilities in China, Malaysia and Vietnam. The guidelines will deal with detoxification and treatment for a range of substances including alcohol, opiates, amphetamine type substances (ATS), benzodiazepines and barbiturates. The detoxification guidelines will include both medicated and non-medicated detoxification protocols relevant for use in prisons and drug rehabilitation centres. The treatment guidelines will detail protocols for various treatment modalities including methadone maintenance treatment, cognitive behavioural therapy, self-help programs and therapeutic communities.

Design and Method: The project will involve a review of current evidence based drug detoxification and drug treatment practice. A 'fact finding' mission to China, Malaysia and Vietnam will be conducted to observe closed settings and conduct a situational analysis.

A training package will be produced and delivered on how to use the guidelines to closed setting staff in China, Malaysia and Vietnam.

Date Commenced: February 2006

Expected Date of Completion: October 2008

Funding: World Health Organisation, Western Pacific Regional Office

DRUG POLICY MODELLING PROGRAM

TITLE: DRUG POLICY MODELLING PROGRAM (DPMP)

NDARC Staff: Alison Ritter, Jenny Chalmers, Marian Shanahan, Caitlin Hughes, Louise Salkeld, Francis Matthew-Simmons, Colleen Faes, Doris Behrens (Visiting Fellow)

Other Investigators: Gabriele Bammer (Australian National University), Lorraine Mazerolle (Griffith University), Paul Dietze (Burnet Institute), Pascal Perez (HEMA Consulting)

Technical Advisers: Peter Reuter (University of Maryland, USA), Jonathan P. Caulkins (Carnegie Mellon University, USA), Margaret Hamilton (University of Melbourne)

Aims: The goal of DPMP is to create valuable new drug policy insights, ideas and interventions that will allow Australia to respond with alacrity and success to illicit drug use. DPMP focuses on a comprehensive approach to drug policy that explores dynamic interactions between law enforcement, prevention, treatment and harm reduction. The work includes development of the evidence-base for policy; developing and using dynamic models of drug issues to better inform policy decision-making; and ongoing study of the policy-making processes in Australia. The aims of DPMP are to:

- illicit drug policy
- develop and adapt new tools and methods for policy-makers
- show the value of these tools by dealing with specific problems raised by policy-makers
- create new ideas and insights for new policy
- conduct rigorous research that provides independent, balanced, non-partisan analysis and improves the quality of the evidence
- evaluate the effectiveness of the tools, methods, policy support and new interventions

Design and Method: DPMP is a broad program of research comprising a large number of smaller projects. Research teams are located at the ANU, Griffith University and the Burnet Institute, with the core team located at NDARC. Our team spans multiple disciplines: Complex Systems Science, Criminology, Economics, Epidemiology, Integration and Implementation Sciences, Public Health and Medicine, Public Policy and Political Science, Psychology, Sociology and Systems Thinking.

Progress: Work across the DPMP teams can be categorised under three areas: generating new evidence for illicit drugs policy; translating the evidence; and studying policy-making.

1. Generating new evidence for illicit drugs policy

DPMP is undertaking sound innovative research to improve the evidence base for illicit drugs policy. We are particularly interested in generating evidence that facilitates comparisons across the four streams that make up illicit drugs policy: reducing the supply of drugs, preventing uptake of drug use, treatments for drug dependent people and reducing the harms to drug users and the community. There are many current projects within DPMP concerned with generating new evidence, including:

- Problem-Oriented and Partnership Policing: An evaluation of the LEAPS (Liquor Enforcement & Proactive Strategies) (Griffith DPMP team)
- Reducing the Methamphetamine Problem in Australia: Evaluating Innovative Partnerships Between Police, Pharmacies and Other Third Parties (Griffith DPMP team)
- Australian Drug Treatment Outcomes: What do we know and should we know? (NDARC DPMP team)

- Structural analysis of the Australian heroin drought (Overseas DPMP team)
- Melbourne Injecting Drug User Cohort Study (MIX) (Burnet Institute DPMP team)
- The price elasticity of demand for methamphetamine (NDARC DPMP team)
- Developing a common metric to evaluate policy options (the Harm Index) (NDARC DPMP team)
- Australian drug policy: an overview report on drug use and harms and their relationship to policy (NDARC DPMP team)
- Methods for research integration – dialogue and common metrics (in collaboration with Land & Water Australia) (ANU DPMP team)
- A comparative analysis of research into illicit drugs in the European Union (NDARC DPMP team)
- A summary of diversion programs for drug and drug-related offenders in Australia (NDARC DPMP team)

2. Translating the evidence

Projects in this area are designed to translate research evidence for the policy community. One central tool in translating evidence is the use of models; models in DPMP allow exploration of ‘what if’ scenarios to aid decision making. Different types of modelling, including system dynamics and agent-based modelling are used as part of DPMP. In addition, another aspect of evidence translation is working directly with policy makers around Australia on current policy problems. The DPMP projects in this category include:

- Modelling cannabis diversion programs in Australia (NDARC DPMP team)
- Developing a model to assess the economic consequences of cannabis policy options (NDARC DPMP team)
- Examining the economic consequences of different types of law enforcement interventions directed towards methamphetamine (NDARC DPMP team)
- Supply and Demand for Pharmacotherapy Treatment in Australia (NDARC DPMP team)
- SimHero – modelling the impacts of policing strategies in the context of a major heroin shortage (HEMA Consulting, DPMP team)
- Working with Victoria Police on their Drug Harm Index (NDARC DPMP team)
- Working with ACT Health on drug treatment service systems, including for the planned new ACT prison ((NDARC DPMP team with HEMA Consulting)
- Working with NSW Police on responses to ecstasy users (NDARC DPMP team)

3. Studying policy-making

Finally, having evidence and usable models is not enough to influence policy. We know that evidence is only one input into the policy processes. DPMP is therefore also studying how policy is developed and ways to improve our understanding of the threats to evidence-informed policy. Projects within this area include:

- A review of Australian public opinion surveys on illicit drugs (NDARC DPMP team)
- Public Opinion, the media, and illicit drug policy in Australia (NDARC DPMP team)
- A conceptual analysis of drug policies (University of Canberra)
- Governmental systems of coordination in Australian drug policy (NDARC DPMP team)
- Integration and Implementation Sciences: Providing Concepts and Methods for Synthesising Disciplinary and Practice-based Knowledge and Connecting Research with Practice (ANU DPMP team)

Full details of the work in progress can be found on the DPMP website at <http://dpmp.unsw.edu.au>

Date Commenced: July 2007

Expected Date of Completion: July 2011

Funding: DPMP is funded by a core grant from the Colonial Foundation Trust and receives specific project funding from other sources: NHMRC Researcher Support, ANCD, NDLERF, and the ARC.

PROJECTS COMPLETED IN 2007

TITLE: ALCOHOL AND OTHER DRUG USE IN SIX NON-ENGLISH SPEAKING (NESB) COMMUNITIES

NDARC Staff: Jan Copeland

Other Investigators: Michelle Toms, Kelvin Chambers and Richard Taylor (Drug and Alcohol Multicultural Education Centre)

Aims: This study partially replicated the previous series of studies of NESB community's patterns of alcohol and other drug use conducted by the Drug and Alcohol Multicultural Education Centre (DAMEC) over the last decade. This series of surveys over three years aimed to determine the prevalence and patterns of alcohol and other drug use in Chinese, Vietnamese, Arabic-speaking, Spanish-speaking, Italian and Pacific Islander communities in NSW.

Design and Method: A random household survey was conducted in high prevalence areas for each language group.

Benefits: The study findings will assist policy makers and service providers to estimate the needs of particular language and cultural groups with regard to alcohol and other drug information and service provision.

Date Commenced: March 2004

Funding: Alcohol Education and Rehabilitation Fund

TITLE: ILLICIT DRUG USE IN AUSTRALIA: EPIDEMIOLOGY, USE PATTERNS AND ASSOCIATED HARMS

NDARC Staff: Maree Teesson and Joanne Ross

Rationale: In 2000 a report prepared by the National Drug and Alcohol Research Centre (NDARC), entitled *Illicit Drug Use in Australia: Epidemiology, Use Patterns and Associated Harm*, was published as a National Drug Strategy Monograph, and was used as the primary evidence base for the National Drugs Campaign. In 2006 the Australian Government announced additional funding for a further phase of the National Drugs Campaign, which was to focus on emerging trends in illicit drug use, as well as a campaign to raise public awareness of links between illicit drug use and mental health problems. In order to support the development of these campaigns, the Australian Government Department of Health and Ageing requested that NDARC update the original report, including any changes in the epidemiology, use patterns and harms associated with illicit drug use.

Aims:

- To provide an evidence base for the National Drugs Campaign
- To examine the Australian epidemiology, use patterns and associated harm of heroin, meth/amphetamines, cocaine, cannabis, ecstasy and LSD

Design and Method: The major illicit drug classes that NDARC was commissioned to examine in this report were heroin, meth/amphetamine, cocaine, cannabis, ecstasy and LSD. For each drug class the major literature pertaining to Australian use patterns and harms was examined. Within each drug class, information is presented on the following areas:

- Epidemiology – Estimates of the number of lifetime and current users of each drug class, based upon household surveys and studies specifically designed to estimate the number of drug users.
- Characteristics of users of the drug – A review of what is known of the demographic characteristics of the users of each drug based upon studies conducted in Australia.
- Drug use patterns – Examines the patterns of drug use in Australia, including frequency of use, routes of administration, and associated polydrug use.
- Associated psychopathology – Explores the relationship between each drug class and mental health problems.
- Other harms associated with the use of the drug – Provides a review of what is currently known about the specific harms associated with each drug, including overdose, blood borne viruses and dependence.
- Current trends in the use of the drug – Examines what is known about trends in the use of each of these drugs in Australia, including trends in the prevalence of use, the demographic characteristics of users and routes of administration.
- Summary – Presents a brief summary of the major features of the use of each drug in Australia, and any projected trends in such use.

Benefits: This project provided an evidence base for the National Drug Strategy Campaign.

Date Commenced: November 2006

Funding: Commonwealth Department of Health & Ageing

TITLE: AN EXAMINATION OF CANNABIS POTENCY AND CONTAMINATION IN AUSTRALIA

NDARC Staff: Wendy Swift, Paul Dillon, Jennifer McLaren and Peter Gates

Other Investigators: Steve Allsop (National Drug Research Institute) and Colin Priddis (Chemistry Centre, WA)

Rationale: There was little detailed information about the Australian cannabis market, yet widespread speculation about several of its aspects, including the domination of highly potent cannabis and contamination of local cannabis product by substances such as pesticides and moulds. One major concern associated with cannabis potency is that more potent cannabis is responsible for a perceived increased in mental health problems, particularly among young people. However, to date, there was little data on cannabis potency with which

to support these claims. This pilot study aimed to gain a better understanding of cannabis potency and the presence of contaminants in Australian cannabis.

Aims: This innovative, collaborative study aimed to improve our understanding of potency and contamination in cannabis available on the Australian market. It used various methodologies to identify, and discuss the implications of, trends in cannabis potency and the presence of contaminants.

Design and Method: The pilot study comprised (i) a literature review, (ii) consultations with key experts on potency and contamination, and (iii) an online survey of growers and users addressing their knowledge and beliefs about potency and contamination.

Benefits: This study provided important Australian data on potency and contamination. This can aid in the education of users and health professionals about the health risks associated with market practices. These data will also be used to inform a future study of Australian cannabis seizures, which will analyse cannabis potency trends and the presence of contaminants identified from the pilot study.

Date Commenced: June 2006

Funding: National Drug and Alcohol Research Centre

TITLE: AN EXPLORATORY STUDY EXAMINING FACTORS ASSOCIATED WITH INHALANT USE AND CESSATION AMONGST URBAN YOUNG PEOPLE

NDARC Staff: Jan Copeland, Paul Dillon and Cath Finney-Lamb

Rationale: According to the second national survey on the use of over the counter and illicit substances conducted in 1999, 32% of 12 year old males and 37% of females had ever experimented with inhalants. Little research had been conducted on the experiences of non-Aboriginal inhalant users, for example, how inhalants are used, which substances are favoured, and motivations for inhalant use and cessation. Anecdotal information suggested that the reasons why young people stop use of inhalants is because of the unpleasant after-effects or because they go onto using other drugs.

Aims: This study was conducted to provide a better understanding of why many young people stop using inhalants, so as to inform the development of prevention programs for young people around inhalant use. This research aimed to:

- identify and describe motivations for inhalant use
- identify and describe motivations for cessation of inhalant use

Design and Method: A qualitative study was conducted to enable detailed descriptions of the range of motivations for possible inhalant use. In-depth interviews were conducted with people who had previously used inhalants, but had ceased their use in the previous 6 months. A thematic analysis was conducted on the data.

Benefits: This study has provided new information about types of inhalant use and cessation of inhalant use amongst polydrug users, as well as motivations or deterrents specific to inhalant use. The results also provide insights into the following themes and concepts in the literature: treating inhalants as a single 'class' of drugs; the perception of inhalants as 'gutter drugs'; episodic patterns of inhalant use; sequence of initiation in drugs; and patterns of use in rural and urban areas.

Date Commenced: December 2005

Funding: Australian Government Department of Health and Ageing

TITLE: DEMAND REDUCTION IN PRISONS AND COMPULSORY DRUG TREATMENT SETTINGS IN CHINA, VIETNAM AND INDONESIA

NDARC Staff: Kate Dolan and Sarah Larney

Other Investigators: Benjamin Phillips (St. Vincent's Hospital)

Aims: To document the availability of demand reduction interventions such as education and drug treatment in prisons and other closed settings in China, Vietnam and Indonesia.

Design and Method: A comprehensive literature review was undertaken. Key informants in each country were asked to provide unpublished reports and complete a survey on drug treatment and other demand reduction strategies provided in prisons and closed settings in their country.

Benefits: The report has highlighted the lack of effective drug treatment options for drug dependent detainees in these countries and provides recommendations for improving this situation.

Date Commenced: January 2006

Funding: United Nations Office on Drugs and Crime (Bangkok)

TITLE: THE PFIZER HEALTH REPORT: AUSTRALIAN ATTITUDES TOWARDS CANNABIS

NDARC Staff: Wendy Swift, Jan Copeland and Paul Dillon

Aims: This project aimed to obtain population-based data on Australian's attitudes towards the physical health, mental health and social effects of cannabis use, their sources of information on cannabis use and their attitudes towards interventions to reduce cannabis-related harm.

Design and Method: This research was conducted among a representative sample of approximately 1000 Australian households as part of the Pfizer Health Report Series. The Health Report surveys were conducted about 4 times a year, with various organisations invited to submit research questions to form an omnibus survey. This study involved self-completion of 28 questions on attitudes towards cannabis use.

Benefits: There is little currently known about the Australian public's attitudes and beliefs towards cannabis use. This study may help in developing appropriately targeted Australian education campaigns on the effects of cannabis.

Date Commenced: August 2006

Funding: Pfizer; National Drug and Alcohol Research Centre

TITLE: A QUALITATIVE FIELD STUDY OF USERS OF PERFORMANCE AND IMAGE ENHANCING DRUGS

NDARC Staff: Paul Dillon, Jan Copeland, Briony Larence and Cath Finney-Lamb

Other Investigators: Sophie Pointer, Robert Ali and Victoria Dennington (Drug & Alcohol Services South Australia) and Jo Taylor and Jackie Ruddock (Streetwize)

Aims: To explore the motivations, behaviours, risks and physical and psychological harms associated with the use of performance and image enhancing drugs (PIEDs).

Design and Method: There were three components to this study:

- A comprehensive review of the national and international literature in respect of the use of PIEDs for reasons other than improved elite sporting performance
- A national qualitative survey of current and past users of PIEDs from three target groups – adolescent males aged 16 years and above; members of the gay community; and employees in the security industry
- A qualitative survey of key informants who have knowledge of PIEDs users in the three target groups

Date Commenced: July 2005

Funding: Australian Government Department of Health and Ageing

TITLE: TRENDS IN DRUG USE AND DRIVING AMONG NIGHTCLUB ATTENDEES

NDARC Staff: Louisa Degenhardt, Paul Dillon and Joanne Ross

Rationale: This study was conducted in anticipation of the introduction of roadside saliva testing in New South Wales.

Aims: The aim of the study was to:

- Document the demographics and drug use history of nightclub attendees prior to the introduction of roadside drug testing in Sydney;
- Document the ways in which nightclub attendees reported travelling to and from nightclubs;
- Examine nightclub attendees' drug driving behaviour and their risk perception of the effects of different drugs upon driving ability; and

- Document the knowledge of roadside drug testing prior to its introduction by the NSW Government.

Design and Method: The study utilised a brief questionnaire, designed to be easily administered within the club setting. To enhance valid reports of drug use, and driving under the influence, participants were permitted to self-complete the drug use and driving sections. The questionnaire was administered in two inner-city venues, in Sydney, NSW. Attempts were made to recruit a number of different venues from different areas of Sydney; however, many venues were reluctant to become involved. Two inner-city dance venues agreed to participate and recruitment at these venues took place over two weekends in November 2006.

Date Commenced: November 2006

Funding: NSW Police via NSW Road and Traffic Authority

TITLE: A RANDOMISED TRIAL OF EFFECTIVENESS AND COST EFFECTIVENESS OF SUPERVISED VERSUS UNSUPERVISED ADMINISTRATION OF BUPRENORPHINE-NALOXONE FOR HEROIN DEPENDENCE

NDARC Staff: Marian Shanahan

Other Investigators: James Bell and Anni Ryan (The Langton Centre); Adrian Dunlop (Turning Point Alcohol & Drug Centre); Adam Winstock (South Western Sydney Area Health Service); Robert Batey (Royal Newcastle Hospital)

Aims: To compare the effectiveness and cost effectiveness of combination buprenorphine-naloxone (Suboxone®) in the treatment of heroin dependence under two conditions – supervised and unsupervised.

Design and Method: This study was conducted at The Langton Centre, Royal Newcastle Hospital, and Bankstown Hospital in NSW, and at Turning Point in Victoria. This randomised control trial, recruited subjects on days 3-5 post inception to buprenorphine. Heroin users seeking maintenance treatment were randomly allocated to either supervised (daily administration) or unsupervised (weekly dispensed) medication for 3 months. All subjects received buprenorphine-naloxone, weekly clinical reviews, and research interviews at baseline and 3 months. The hypothesis of the study was that retention in treatment would be superior in unsupervised subjects. Primary end-points were retention in treatment, and heroin use at 3 months. Costs of treatment were measured, and cost-effectiveness of supervised and unsupervised treatment compared.

Benefits: This study has demonstrated that daily attendance for observed dosing was not a deterrent for continuing treatment among this group of heroin users. The costs of treatment for the non-observed dosing group were significantly less.

Date Commenced: November 2003

Funding: Reckittbenckiser and NSW Health

TITLE: DEVELOPMENT OF MATERIALS ON ECSTASY AND RELATED DRUGS (ERDS) FOR PRIMARY HEALTH CARE PRACTITIONERS

NDARC Staff: Jan Copeland, Paul Dillon and Edmund Silins

Other Investigators: Iain McGregor (University of Sydney); David Caldicott (Royal Adelaide Hospital); Robert Ali (Drug & Alcohol Services South Australia); and Ann Roche (National Centre for Education on Training and Addiction)

Rationale: The use of a range of pharmaceuticals and supplements, in a variety of combinations, for contradictory purposes suggests there is a need for harm reduction information on the risks associated with this practice. Particular attention should be placed on informing ERDs users of the potentially fatal serotonin syndrome which is more likely to develop from combining ecstasy and other serotonergic drugs with antidepressants.

Aims: The aims of the study were to:

- examine the relationship between ERDs and antidepressant use, including patterns and harms of current use
- examine the sources of pharmaceuticals among ERDs users
- examine the role of GPs in the prescription of antidepressants to ERDs users
- identify gaps in knowledge about ERDs and their side effects among GPs
- examine the management of young people presenting to GPs for antidepressants, including screening for ERDs use
- examine the management of ERDs-related presentations to Accident and Emergency Rooms of major Australian hospitals
- inform key personnel at Accident and Emergency Rooms of major Australian hospitals on the findings of current ERDs-related research
- inform the development of information materials on ERDs-related issues

Design and Method: Questionnaires were distributed to 2000 GPs stratified to include metropolitan and non-metropolitan areas across Australia; presentations were delivered to frontline healthcare professionals at 12 hospitals in 8 major centres around Australia and attending healthcare professionals completed a questionnaire; in-depth interviews were conducted with 30 ERDs users who had recently combined ecstasy and antidepressant drugs.

Benefits: The findings from the study will inform the development of resource materials on ERDs for healthcare practitioners and also guide the development of prevention and harm minimisation materials for ERDs users.

Date Commenced: January 2006

Funding: Australian Government Department of Health and Ageing

TITLE: REVISE AND REDESIGN OF THE DRINKING DECISIONS: YOUNG PEOPLE AND DRINKING BOOKLET

NDARC Staff: Paul Dillon, Jan Copeland, Cath Finney-Lamb, Fiona Shand and Laura Vogl

Rationale: In 2003 the resource Drinking decisions: Young people and drinking was developed by the AGDHA. NDARC was contracted to revise and re-develop this resource. It was noted that this booklet was specifically designed for those young people (17-25 year olds) who may have problems with their drinking but needed to be made more 'youth-friendly'.

Aims: The aims of this project were as follows:

- to redevelop and redesign the resource Drinking decisions: Young people and drinking so that it is appealing, credible and useful to its target audience, i.e. 17-25 year-olds who are problem drinkers
- to run a series of focus groups with young adults to assess what information on alcohol they feel should be included in the resource. These focus groups would also gather information on the style, language and content appropriate for the target group
- to focus test the resource once it has been developed to ensure that the style, language and content is appropriate for the target group

Design and Method: Two phases of focus testing were conducted, and were to assist in the development of the resource.

The first phase explored general reactions to Drinking

Decisions: Young people and drinking and to several proposed graphic designs for a new resource. This was conducted to inform the development of an updated version of the original resource. Three to four focus groups were conducted with young people aged 17 to 25 years. Information was collected on general reactions to each proposed design, e.g., the relative attractiveness of each design, perceived audience, and interest generated in reading the resource. Information was also collected on the messages and content of the original booklet, and young people's opinions on what types of resources they would use.

The second phase of focus group testing was conducted after an updated version of the resource had been developed. This phase explored in detail young people's reactions to the revised resource. Four to six focus groups will be conducted with young people aged 17 to 25 years. The focus groups collected young people's comments on the appeal of the resource. Detailed information was collected on young people's reactions to the artwork and images, font, length of the booklet, tone and readability, information provided in each section, and messages received.

Participants were offered \$30 for travel reimbursement and out of pocket expenses. The groups were taped and comprehensive notes were made by listening to the tapes.

Benefits: Drinking Decisions is a resource that has been developed after a great deal of consultation with the target group. It is the only available resource that deals with young people aged between 17-25 years who may have a alcohol problem and offers some simple suggestions on how to deal with the issue appropriately.

Output: Both phases of the project were conducted with two different 'sets' of young people – university students and young people who are not at university. Based on these consultations, an updated version of Drinking decisions: Young people and drinking was developed. Some of the changes that were made to the booklet included: The title of the booklet was changed to Drinking Decisions to reflect participants' concerns that the term 'young people' made it appear that the resource was designed for people under the age of 18 years.

Rather than a booklet, the resource now became a foldout resource. Content was dramatically cut and a number of the sections removed as both groups felt that the resource was much too long. Many of the participants regarded some of the sections as condescending and others as irrelevant to the target group, e.g. some commented that some of the messages were far more targeted towards younger people aged between 15-17 years who have had little experience with alcohol.

Much of the language was adjusted to suit the target group and the tone altered to reflect participants' concerns. The booklet has been printed and is available through the Australian Government Department of Health and Ageing's Publications Department.

Date Commenced: September 2006

Funding: Australian Government Department of Health and Ageing

TITLE: ESTIMATING THE COST-SAVINGS OF REDUCED CRIME WHILE ON METHADONE TREATMENT

NDARC Staff: Marian Shanahan, Kate Hetherington and Richard Mattick

Other Investigators: Don Weatherburn (Bureau of Crime Statistics & Research NSW)

Aims: To estimate the cost-savings (cost-offset) of crimes averted through the use of methadone/ buprenorphine maintenance for heroin users in NSW between January 1 1999 and December 31 2000.

Design and Method: Using previously linked data on a group who were enrolled in the NSW methadone treatment program, the costs of treatment, and the costs of recorded offences both on and off methadone treatment were estimated. The costs of treatment and costs of crime while on treatment were compared to the cost of crime including gaol while off treatment.

Findings: The sample spent more free time on-methadone (53%) than off-methadone (47%) with a large preponderance of the time spent out of gaol (92%). Despite this, the largest component of costs was gaol, which accounted for 65% of the total while methadone treatment accounted for approximately 25% of the total costs and the costs of crime excluding gaol was about 10% of the total. Additional analyses found that for every day in treatment the cost of crime decreased by more than the cost of treatment suggesting that at a minimum treatment pays for itself.

Benefits: This study provided an estimate in dollars, of one of the benefits of this expanded NSW Pharmacotherapy Program by estimating the cost savings due to decreased crime.

Date Commenced: February 2006

Funding: NSW Health

TITLE: CLIMATE SCHOOLS: ALCOHOL MODULE – THE DEVELOPMENT AND EVALUATION OF A UNIVERSAL COMPUTER DRIVEN SCHOOL-BASED PREVENTION PROGRAM FOR PROBLEMS WITH ALCOHOL MISUSE AND RELATED HARMS

NDARC Staff: Laura Vogl, Maree Teesson and Paul Dillon

Other Investigators: Helen van Vliet and Gavin Andrews (School of Psychiatry, UNSW)

Aims: To develop and evaluate an evidence-based computer delivered alcohol misuse prevention program for school students.

Design and Method: The development of the Climate Schools: Alcohol Module program was completed in January 2004. This involved the collaboration of teachers, students, police and specialists in the area of alcohol and other drug research. The program was designed to be embedded in the NSW Personal Development, Health and Physical Education Curriculum. The program consists of six interactive computer-driven lessons and a range of other classroom activities. Climate Schools: Alcohol Module utilises a cartoon-based soap opera which allows students to learn about preventive strategies in real-life contexts. A longitudinal cluster randomized controlled trial involving 1435 Year 8 students (13 years old) from 16 schools was utilized to evaluate the program. Schools were randomly assigned to complete the Climate Schools program or to receive alcohol education as usual. Students were followed for a two year period after the intervention. Data was collected in 2005 and 2006, and analysis completed in 2007.

Findings: Follow-up results demonstrated that the Climate Schools: Alcohol Module was more effective than standard alcohol prevention education for increasing young people's knowledge about skills required to minimize alcohol related harm and for decreasing young people's expectations regarding the positive social benefits of drinking alcohol. The program was considerably more effective in decreasing average alcohol consumption, alcohol misuse and related harms for females than standard alcohol prevention programs delivered in schools.

For males, immediately after the intervention, Climate Schools: Alcohol Module was more effective than standard alcohol education programs for decreasing average alcohol consumption and delaying the onset of use of alcohol. However, these differences in consumption were not sustained six months after the program had been completed. These differences are consistent with other school-based drug education programs which have also found superior prevention outcomes for females. Climate Schools: Alcohol Module was positively evaluated by both students and teachers. Teachers rated this program to be better than other drug education programs and students were keen to learn other educational topics using this delivery format.

Start Date: March 2003

Funding: Australian Government Department of Health and Ageing and the National Drug and Alcohol Research Centre

TITLE: ASSESSING THE HOSPITAL COSTS RELATED TO ADMISSION WITH ANY INDICATION OF ILLICIT DRUG OR ALCOHOL USE

NDARC Staff: Louisa Degenhardt, Marian Shanahan, Steve Riddell and Amanda Roxburgh

Aims: To build on the existing work of the National Illicit Drug Indicators Project, this project examined the cost trends of hospital separations where an illicit drug was recorded. These trends were examined by drug type, across time, disease category as well as other characteristics such as age, gender and hospital type.

Design and Method: This project used data from the National Hospital Morbidity Database (NHMD) for the years 1999/2000 to 2004/05 and used the Australian Refined Diagnostic Related Groups (AR-DRG) and their associated Cost Weights to assess cost trends for cases where there was an indication of illicit drug use. Methods such as aetiological fractions were used to estimate the proportion of each separation which was directly attributable to an illicit drug.

Benefits: The results from this current study are be useful in improving our understanding of both the cost implications to the health care system from the use different types of illicit drugs and alcohol, and the extent to which variations in the use of illicit drugs and alcohol over time impact upon the use of hospital resources.

Date Commenced: July 2006

Funding: Australian Government Department of Health and Ageing

TITLE: THE ECSTASY CHECK-UP: DEVELOPMENT AND FEASIBILITY STUDY OF A BRIEF INTERVENTION FOR ECSTASY-RELATED PROBLEMS

NDARC Staff: Jan Copeland, Greg Martin and Paul Dillon

Aims: Rates of ecstasy use have continued to rise over the past 10-15 years, particularly among young people. This intervention project targeted people who used ecstasy but were not necessarily seeking assistance to reduce or cease their ecstasy use. There are no existing services which specifically target this group. Earlier work has shown brief motivational interventions to be useful in ameliorating problematic alcohol and cannabis use. We believed the development of a brief intervention that specifically targets ecstasy use is warranted, would fill a gap in existing services, and had the potential to reduce problematic ecstasy use and related harms. This study aimed to provide data on the feasibility of the intervention and included an assessment of ecstasy-related risk perception among users.

Design and Method: This project developed and assessed the feasibility of a Check-up style model that incorporated a brief motivational enhancement and cognitive-behavioural intervention. A randomised controlled trial was conducted with 25 participants who received the Ecstasy Check-up (ECU) and 25 participants who received only brief educational material. Both groups received a brief assessment of their ecstasy related risk-perception. This study provided further information on patterns of use and risk-perception in addition to the feasibility of the intervention and an indicator of its ability to attract clients and of their treatment outcome three months post assessment. The advantage of a small randomised controlled trial is that it provided an indication of the effect of the intervention controlling for the influence of time.

Benefits: The positive findings of this study will encourage the further development and testing of the Ecstasy Check-up model.

Date Commenced: May 2006

Funding: Australian Government Department of Health and Ageing

TITLE: A STUDY OF MORTALITY AMONG PARTICIPANTS IN A DOUBLE BLIND RANDOMISED CONTROLLED TRIAL OF THE EFFICACY OF METHADONE AND BUPRENORPHINE IN THE TREATMENT OF OPIOID DEPENDENCE

NDARC Staff: Richard Mattick, Amy Gibson, Susannah O'Brien and Louisa Degenhardt

Other Investigators: Jason White and Robert Ali (University of Adelaide)

Aims: This study aimed to look at the mortality in a group of study participants recruited to a randomised controlled trial of buprenorphine or methadone to compare the impact of treatment on mortality and causes of death.

Design and Method: A multi-site randomized controlled trial using a double blind, double dummy design. Three treatment centres (two in Sydney, one in Adelaide) recruited a total of 405 heroin dependent people who were randomly allocated to methadone or buprenorphine maintenance treatment in a study that commenced in 1996. This study obtained Births, Deaths

and Marriages mortality and cause of death data for these subjects. Predictors of mortality in the two treatment groups were analysed using the study baseline and follow up data.

Benefits: There are few RCT studies directly comparing outcomes of methadone and buprenorphine maintenance treatment, and this was the first study to compare the mortality and causes of death in a group of subjects from such a study.

Date Commenced: January 2006

Funding: National Drug and Alcohol Research Centre

TITLE: ACCESS ALL AREAS – DVD RESOURCE FOR IN AND OUT OF TREATMENT DRUG USERS

NDARC Staff: Adam Winstock

Other Investigators: Alison Fettell (Health Matters)

Aims: The DVD was designed to be suitable for people already in treatment for opioid dependence and injecting drug users not currently in treatment. For people in treatment, the aim was to improve retention, the therapeutic relationship with service providers, and the clinical benefits attainable from treatment. The DVD also aimed to inform, attract and engage opioid dependent drug users into treatment, with a view to increasing their understanding of the benefits and risks of treatment and factors impacting the way treatment is delivered. The DVD provided clients with clinicians' perspectives on how client stability is assessed and how decisions are made regarding a client's dose and the provision of takeaway doses. In addition, information was provided on other common health problems encountered by injecting drug users such as blood-borne viruses (BBVs), pain and dental health problems, and the role of other professionals including pharmacists, paramedics, child protection workers, needle syringe programs, and the police. A paper reported on the pilot evaluation of a selection of questions from the DVD conducted with opioid drug users currently on methadone or buprenorphine treatment, as well as those not currently in treatment.

Design and Method: Following funding from the Australian Government Department of Health and Ageing, a consultation process was undertaken with state and territory drug user organisations to identify core questions regarding treatment for opioid dependence. National experts were recruited from various disciplines to answer these questions on film. The answers provided by experts were non contentious, since in general they reflected the existing evidence base or existing treatment guidelines in Australia. The major problem in the development of the DVD was obtaining sufficiently succinct and simple explanations from experts who were each requested to keep their responses to between 2-5 minutes. The result is a 3½ hour DVD entitled Access All Areas including 47 common questions regarding opioid treatment and related areas, with each question answered by one to three clinical experts. The DVD is supplemented by a discussion section, case scenarios demonstrating consultations between a prescriber and patient and 3 user stories describing the benefits and problems of treatment from consumer perspective. Draft responses were

subsequently edited by the researchers, an expert review group including consumer representatives. The DVD format was chosen to ensure as wide as possible access to the resource, particularly for people with low levels of literacy.

Benefits: A national resource is now available that provides an important new source of information on drug treatment and risks. It is suitable for those in treatment, those out of treatment, and has extensive utility as a teaching and training tool for doctors and other health care/allied health care workers. It provides a unique resource to help improve treatment uptake and improve everyone's understanding and expectation of treatment. It aims to make treatment transparent.

Date Commenced: January 2007

Funding: Australian Government Department of Health and Ageing

TITLE: DRUG POLICY MODELLING PROGRAM (DPMP)

NDARC Staff: Alison Ritter, Jenny Chalmers, Marian Shanahan, Caitlin Hughes, Louise Salkeld, Francis Matthew-Simmons, Colleen Faes, Doris Behrens (Visiting Fellow)

Other Investigators: Gabriele Bammer (Australian National University), Lorraine Mazerolle (Griffith University), Paul Dietze (Burnet Institute), Pascal Perez (HEMA Consulting)

Technical Advisors: Peter Reuter (University of Maryland, USA), Jonathan P. Caulkins (Carnegie Mellon University, USA), Margaret Hamilton (University of Melbourne)

Aims: The goal of DPMP is to create valuable new drug policy insights, ideas and interventions that will allow Australia to respond with alacrity and success to illicit drug use. DPMP focuses on a comprehensive approach to drug policy that explores dynamic interactions between law enforcement, prevention, treatment and harm reduction. The work includes development of the evidence-base for policy; developing and using dynamic models of drug issues to better inform policy decision-making; and ongoing study of the policy-making processes in Australia. The aims of DPMP are to:

- build systems and approaches to enhance evidence-informed illicit drug policy
- develop and adapt new tools and methods for policy-makers
- show the value of these tools by dealing with specific problems raised by policy-makers
- create new ideas and insights for new policy
- conduct rigorous research that provides independent, balanced, non-partisan analysis and improves the quality of the evidence
- evaluate the effectiveness of the tools, methods, policy support and new interventions

Design and Method: DPMP is a broad program of research comprising a large number of smaller projects. Research teams are located at the ANU, Griffith University and the Burnet Institute, with the core team located at NDARC. Our team spans multiple disciplines: Complex Systems Science, Criminology, Economics, Epidemiology, Integration and Implementation Sciences, Public Health and Medicine, Public Policy and Political Science, Psychology, Sociology and Systems Thinking.

While the broader program continues, the following component projects have been completed:

- Priority areas in illicit drug policy: perspectives of policy makers (NDARC DPMP team)
- Where do policy makers go to source research evidence? (NDARC DPMP team)
- The impact of Portugal's decriminalisation of drugs (NDARC DPMP team with Beckley Foundation)
- Working estimates of the social costs per gram and per user for cannabis, cocaine, opiates and amphetamines (Turning Point DPMP team)
- Models of policy making to inform the use of evidence (NDARC DPMP team)
- SimDrugPolicing: An adaptation of SimDrug to explore three policing scenarios (HEMA Consulting)
- Uncertainty and Risk: Multidisciplinary Perspectives (ANU DPMP team)
- A bibliography of prison-based drug treatment (NDARC DPMP team)

Full details of completed projects can be found on the DPMP website at <http://dpmp.unsw.edu.au>

Date Commenced: July 2007

Funding: DPMP is funded by a core grant from the Colonial Foundation Trust and receives specific project funding from other sources: NHMRC Researcher Support, ANCD, NDLERF, and the ARC.

GLOSSARY

ACTDH	ACT Dept of Health
AGDHA	Australian Government Department of Health and Ageing
AERF	Alcohol Education and Rehabilitation Foundation Ltd
APSAD	Australasian Professional Society on Alcohol and Other Drugs
ARC	Australian Research Council
CF	Colonial Foundation
CLIMATE	Clinical Management & Treatment Education
DASSA	Drug & Alcohol Services South Australia
DEST	Department of Education, Science and Training
DH	Department of Health, NSW
DPMP	Drug Policy Modelling Programme
DROSOS	Drosos Foundation, Switzerland
EDRS	Ecstasy and related Drugs Reporting System
GU	Griffith University
HERON	Health Evaluation Research Outcomes Network
IDRS	Illicit Drugs Reporting System
MDECC	Manly Drug Education & Counselling Centre
NCETA	National Centre for Education on Training and Addiction
NCPIC	National Cannabis Prevention and Information Centre
NDARC	National Drug & Alcohol Research Centre
NDLERF	National Drug Law Enforcement Research Fund
NDRI	National Drug Research Institute
NHMRC	National Health and Medical Research Council
NIH	National Institute of Health (USA)
NBCSR	NSW Bureau of Crime Statistics and Research
PTSD	Post Traumatic Stress Disorder
QADREC	Queensland Alcohol and Drug Research and Education Centre
RB	Reckitt Benckiser
RTA	Roads & Traffic Authority, NSW
SALV	Salvation Army
SCHER	Schering Pty Ltd
TP	Turning Point Alcohol & Drug Centre
UNEW	University of Newcastle
UNAIDS	United Nations Programme on HIV/AIDS
UNODC	United Nations Office on Drugs and Crime
UNOV	United Nations Office in Vienna
UNSW	The University of New South Wales
WHO	World Health Organisation
WU	Washington University, USA

APPENDIX A SEMINARS

IN-HOUSE SEMINARS

Feb 15 **Toxicology of homicide victims, 1996-2005**
Shane Darke

Feb 22 **Methamphetamine psychosis**
Rebecca McKetin

Mar 8 **Key findings of the 2006 IDRS/EDRS**
Matthew Dunn, Gabrielle Campbell and Emma Black

Mar 15 **National drug indicators project:
Key findings**
Amanda Roxburgh

Apr 12 **Effectives and cost-efficiency of two methods of
suboxone dosing**
Marian Shanahan

Apr 19 **Reforming drug policy in Portugal:
Lessons from abroad**
Caitlin Hughes

Apr 26 **Mothers, kids and drugs**
Lucy Burns

May 17 **Social anxiety among heroin users**
Fiona Shand

Jun 14 **Borderline personality disorder, impulsivity
and attempted suicide**
Elizabeth Maloney

Jun 21 **Inhalants**
Paul Dillon

Jul 12 **Alcohol action in rural communities:
Corowa**
Elissa Wood

Jul 19 **Dietary supplements, illicit substances and the
intention to use steroids**
Matthew Dunn

Aug 9 **Alcohol-related presentations to the emergency
department at Inverell Hospital**
Alys Havard

Aug 16 **Hospital separations in Australia, 1999-2005**
Steve Riddell

Sep 13 **Diversion of opioid-replacement therapies**
Briony Larance

Sep 20 **Heroin overdose: facts and myths**
Shane Darke

Oct 11 **Concurrent treatment of PTSD and substance use:
A case-control comparison**
Katherine Mills

Oct 18 **Potency and purity of cannabis:
an update**
Wendy Swift

Nov 15 **An RCT of stepped care for alcohol dependence,
depression and anxiety**
Claudia Sannibale

INVITED SEMINARS

Jan 18 **Providing an earlier warning of drug use trends: a model, results and experiences from Norway and UK**

Jane Mounteney

Research Fellow, Section for Social Medicine,
University of Bergen, Norway

Feb 8 **Temporal sequencing of comorbid disorders**

Dr Sudie Back

Clinical Neurosciences Division, Department of
Psychiatry & Behavioural Sciences, Medical University
of South Carolina

Mar 22 **The work of ACON**

Nicky Bath (Manager AOD), *Stevie Clayton* (CEO) &
Adrian Lovney (President) AIDS Council of NSW

Apr 17 **The drugs-sex connection among women
methamphetamine users: Findings from an
in-depth qualitative study**

Dr Alison Hamilton

Integrated Substance Abuse Program, UCLA

Apr 26 **Comorbidity amongst admissions to the Ted Noffs
Foundation**

Dr John Howard

Director Clinical Training and Research, Ted Noffs
Foundation

May 14 **Seeking Safety – a treatment manual for PTSD and
substance use**

Professor Lisa Najavits

Boston University School of Medicine

May 24 **Does supervision reduce recidivism?
A comparison of supervised and
unsupervised bonds**

Dr Don Weatherburn

Director of the NSW Bureau of Crime Statistics and
Research

Jun 28 **Toxicology and the law**

Dr Anthony Moynham

Forensics Branch, NSW Police

Jul 26 **Research into substance misuse in
aboriginal communities**

Kate Conigrave

School of Public Health, University of Sydney

Jul 26 **Social determinants of health 1, harm reduction nil
A/Professor Mark Tyndall**

Epidemiology Program Director at the British Columbia
Centre for Excellence in HIV/AIDS, University of British
Columbia, and Head of the Division of Infectious
Diseases at St. Paul's Hospital, Vancouver

Aug 23 **The Medically Supervised Injection Centre: an update**

Dr Ingrid van Beek

Director of the Medically Supervised Injection Centre

Sep 27 **The first 12 months of the NSW stimulant treatment
programme trial**

Dr Alex Wodak

Director D&A Services, St Vincent's Hospital

Oct 26 **Aboriginal child health: the SEARCH study**

Dr Anna Williamson

Study Manager, SEARCH (Study of Environment,
Aboriginal Resilience and Child Health), Sax Institute

Nov 28 **Attitudes and beliefs towards OMT among
Norwegian health staff**

Linn Gjersing

University of Oslo, Norway

**Naltrexone implants in Norway – an overview of
past and current research and clinical experiences."**

Nikolaj Kunoe

University of Oslo, Norway

APPENDIX B
STAFF LIST

Richard Mattick	Director/Professor	Julia Rosenfeld	Research Psychologist
Maree Teesson	Deputy Director/Associate Professor	Anton Perkins	Administrative Officer
Jan Copeland	Professor	Jamie Dunbar	Research Nurse
Shane Darke	Professor	Gregory French	Research Nurse
Louisa Degenhardt	Professor	Emma Barrett	Research Officer
Kate Dolan	Associate Professor	David Bosanquet	Research Officer
Alison Ritter	Associate Professor	Delphine Bostock	Research Officer
Anthony Shakeshaft	Senior Lecturer	Matusko	
Jenny Chalmers	Senior Research Fellow	Joshua Byrnes	Research Officer
Rebecca McKetin	Senior Research Fellow	Bianca Calabria	Research Officer
Tim Slade	Senior Research Fellow	Bridget Callaghan	Research Officer
Anton Clifford	Lecturer	Shelley Cogger	Research Officer
Suzanne Czech	Lecturer	Matthew Dunn	Research Officer
Joanne Ross	Lecturer	Pota Hatzopoulos	Research Officer
Wendy Swift	Lecturer	Alys Havard	Research Officer
Lucy Burns	Research Fellow	Kate Hetherington	Research Officer
Caitlin Hughes	Research Fellow	Grace Ho	Research Officer
Delyse Hutchinson	Research Fellow	Erin Kelly	Research Officer
Sharlene Kaye	Research Fellow	Sarah Larney	Research Officer
Frances Kay-Lambkin	Research Fellow	Elizabeth Maloney	Research Officer
Jim Lemon	Research Fellow	Caitlin McCue	Research Officer
Katherine Mills	Research Fellow	Julie Nos	Research Officer
Heather Proudfoot	Research Fellow	Benjamin Phillips	Research Officer
Claudia Sannibale	Research Fellow	Lisa Robins	Research Officer
Laura Vogl	Research Fellow	Cathie Sammut	Research Officer
Amy Johnston	Research Associate	Sagari Sarkar	Research Officer
Kylie Sutherland	Research Associate	Melanie Simpson	Research Officer
Shale Preston	Executive Officer (Research)	Natasha Sindicich	Research Officer
Paul Dillon	Media Liaison/Information Manager	Jess Singleton	Research Officer
Marian Shanahan	Health Economist	Rachel Sutherland	Research Officer
Anthony Arcuri	Senior Research Officer	Michelle Torok	Research Officer
Emma Black	Senior Research Officer	Elissa Wood	Research Officer
Annie Bleeker	Senior Research Officer	Miriam Wyzenbeek	Research Officer
Courtney Breen	Senior Research Officer	Pearl Pulmano	Executive Assistant
Gabrielle Campbell	Senior Research Officer	Julie Hodge	Executive Assistant
Elizabeth Conroy	Senior Research Officer	Carla Santos	Executive Assistant
Catherine Deans	Senior Research Officer	Colleen Faes	Personal Assistant
Amie Frewen	Senior Research Officer	Louise Salkeld	PA/Research Assistant
Peter Gates	Senior Research Officer		
Amy Gibson	Senior Research Officer		
Briony Larence	Senior Research Officer		
Greg Martin	Senior Research Officer		
Bradley Mathers	Senior Research Officer		
Jen McLaren	Senior Research Officer		
Susannah O'Brien	Senior Research Officer		
Steven Riddell	Senior Research Officer		
Amanda Roxburgh	Senior Research Officer		
Fiona Shand	Senior Research Officer		
James Shearer	Senior Research Officer		
Ed Silins	Senior Research Officer		
Jenny Stafford	Senior Research Officer		
Stephanie Taplin	Senior Research Officer		
Heli Wolk	Professional Officer		
Nicolas Scheuer	Statistical Officer		
Robert Stapleton	Statistical Officer		
Eva Congreve	Archivist		
Kirsty Taylor	Research Psychologist		
Sabine Merz	Research Psychologist		

CONJOINT APPOINTMENTS

Wayne Hall	Conjoint Professor
Amanda Baker	Conjoint A/Prof
James Bell	Conjoint A/Prof
Katherine Conigrave	Conjoint A/Prof
Johan Duflou	Conjoint A/Prof
Paul Haber	Conjoint A/Prof
Andrea Mant	Conjoint A/Prof
Jeffery Ward	Conjoint Sr Lecturer
Adam Winstock	Conjoint Sr Lecturer
Alex Wodak	Conjoint Sr Lecturer

VISITING FELLOWS

Robert Ali	Visiting Fellow
Doris Behrens	Visiting Fellow
Erol Digiusto	Visiting Fellow
Nicolas Rasmussen	Visiting Fellow

APPENDIX C RESEARCH GRANTS AND FUNDING

Projects	Funding Source	Total Award (\$)	Expenditure 2006	Expenditure 2007
Illicit drug reporting system	AGDHA	\$1,858,833 (5 years)*	\$369,811	\$398,409
Illicit drug statistical analysis	AGDHA	\$783,029 (4 years)*	\$204,339	\$218,404
Psychostimulant position	AGDHA	\$626,246 (5 years)*	\$122,616	\$139,290
Health economist position	AGDHA	\$427,253 (5 years)*	\$84,451	\$42,101
Illicit drug reporting system extension	AGDHA	\$458,752 (3 years)*	\$198,775	\$202,284
Monitoring party drug markets in Australia	AGDHA	\$984,153 (3 years)*	\$402,946	\$519,452
Executive officer research	AGDHA	\$168,033 (2 years)	\$81,145	\$85,591
Two concurrent randomized placebo controlled trials of modafinil in amphetamine and cocaine dependence	AGDHA	\$262,252 (3 years)*	\$95,155	\$104,372
The development of materials on ecstasy and related drugs (ERDS) for primary healthcare practitioners	AGDHA	\$153,485 (2 years)	\$76,029	\$77,456
The feasibility of peer led interventions to educate ecstasy and related drug users across two Australian and one International site	AGDHA	\$290,330 (2 years)	\$83,977	\$206,353
Development of a brief intervention for ecstasy-related problems – The ecstasy check up	AGDHA	\$113,739 (2 years)	\$39,307	\$74,432
The evaluation of treatment outcomes for methamphetamine users	AGDHA	\$175,000 (3 years)	\$57,886	\$69,034
Psychostimulant mortality, coronary disease and other serious health effects study	AGDHA	\$149,229 (4 years)*	\$46,094	\$49,138
The role of cannabis dependence as a risk factor for methamphetamine psychosis (PhD candidate)	AGDHA	\$175,000 (4 years)*	\$1,752	\$32,816
Assessing the hospital costs related to admissions with any indication of illicit drug or alcohol use	AGDHA	\$52,672	\$30,843	\$21,829
National Drug Strategy monograph on the health and psychological effects of ecstasy	AGDHA	\$89,738 (2 years)	\$4,254	\$60,086
Drinking decisions: Young people and drinking	AGDHA	\$24,000 (2 years)	\$11,530	\$12,470
The development of standardised treatment monitoring tool for use by researchers and clinicians: AATOM	AERF	\$350,000	\$142,197	\$79,965
Reducing alcohol related harm in rural communities: A randomised control trial	AERF (via UNEW)	\$1,200,000 (5 years)*	\$309,533	\$317,950
Drug policy modelling program – stage two	CF	\$7,661,973 (5 years)*	\$119,745	\$657,971
The establishment of a cohort of substance abusing women and their babies	DH	\$18,524	\$4,275	\$14,249
Cost savings on reduced crime while on methadone treatment	DH	\$26,622	\$17,329	\$9,293
Evaluation of the MDECC parent's prepared program	MDECC	\$34,722 (3 years)*	\$2,697	\$19,244
The emergence of potent forms of methamphetamine in Sydney	NDLERF	\$245,781	\$7,779	\$16,913
A multisite randomised controlled trial of the adolescent cannabis check-up	NHMRC	\$218,305 (2 years)	\$51,070	\$3,185
Using population health data to improve health services, policy and planning	NHMRC	\$497,367 (5 years)*	\$103,420	\$97,484

APPENDIX C RESEARCH GRANTS AND FUNDING

Projects	Funding Source	Total Award (\$)	Expenditure 2006	Expenditure 2007
Longitudinal treatment outcomes for methamphetamine dependence: a treatment cohort study	NHMRC	\$720,500 (4 years)*	\$215,020	\$254,343
An empirical investigation of psychosis proneness in amphetamine users	NHMRC (via GU)	\$160,750 (3 years)*	\$19,021	\$75,398
Post-marketing surveillance of buprenorphine-naloxone (Suboxone)	RB	\$359,655 (3 years)*	\$64,445	\$141,275
DPMP research services	TP	\$45,000	\$41,419	\$3,581
Development of guidelines: Drug detoxification and drug treatment in areas of high prevalence or risk and closed institution	WHO	\$186,000 (2 years)*	\$133,906	\$23,591
Opioid dependence: Candidate genes and GxE effects (comorbidity and trauma study)	NIH (via WU)	\$1,293,783 (5 years)*	\$403,206	\$343,583
Career Advancement Fund grants	UNSW	\$31,000	\$14,072	\$7,142
CLIMATE Schools: Psychostimulant and cannabis module	AGDHA	\$250,046 (3 years)*	–	\$184,969
Illicit drug use in Australia – epidemiology, use patterns and associated harm	AGDHA	\$23,400	–	\$16,897
To develop a DVD resource for the treatment of opioid users	AGDHA	\$177,000	–	\$156,933
Monograph on Cannabis and Mental Health	AGDHA	\$126,177	–	\$89,259
Pilot trial of “Alcohol Treatment Guidelines for Indigenous Australians” and an evidence-based brief intervention in two Aboriginal communities	AGDHA	\$13,750 (2 years)*	–	\$7,956
Secondary analysis of the relationship between cannabis use, dependence, mental health and associated outcomes in the Victorian Adolescent Cohort Study	AGDHA	\$190,349 (2 years)*	–	\$35,494
Development of clinical guidelines for the management of cannabis use disorder	AGDHA	\$238,631 (2 years)*	–	\$28,336
Identification of barriers to, and facilitators to cannabis treatment	AGDHA	\$189,920 (2 years)*	–	\$57,787
Review of literature on the secondary supply of alcohol to minors	AGDHA	\$36,140	–	\$8,340
Second national survey of Mental Health and Well Being	AGDHA	\$55,319 (2 years)*	–	\$7,024
Establishment of the National Cannabis Prevention & Intervention Centre (NCPIC)	AGDHA	\$11,579,090 (4 years)*	–	\$180,013
Peer led interventions with ecstasy and related drugs (ERD) users	ACTDH	\$40,000	–	\$40,000
Fear, sadness and alcohol use in adolescence: a test of new curriculum models to prevent adverse outcomes	ARC	\$270,000 (3 years)*	–	\$43,141
Emerging trends in drug use and high risk behaviours among the homeless	DH	\$19,024	–	\$19,024
Treating comorbid post traumatic stress disorder (PTSD) & amphetamine dependence	DH	\$50,000	–	\$41,456
Development and evaluation of specialist services for female drug users in Iran	DROSOS	\$277,778 (2 years)*	–	\$92,082
Comparative rates of violent crime amongst methamphetamine and opioid users	NDLERF	\$194,051 (3 years)*	–	\$38,578
The efficacy of an intervention for PTSD among illicit drug users	NHMRC	\$558,125 (3 years)*	–	\$108,902
Integrating treatment for alcohol use problems and comorbid PTSD	NHMRC	\$651,725 (3 years)*	–	\$68,183
Longitudinal study of opioid maintenance treatment in NSW: mortality among opioid dependent persons in pharmacotherapy 1985-2006	NHMRC	\$144,500 (2 years)*	–	\$43,637
A review of the literature on the effect of methamphetamine use on violent behaviour	NBCSR	\$19,928	–	\$2,500

APPENDIX C RESEARCH GRANTS AND FUNDING

Projects	Funding Source	Total Award (\$)	Expenditure 2006	Expenditure 2007
Trends in drug use and driving among nightclub attendees	RTA	\$25,478	–	\$25,478
Opioid pharmacotherapy review	SALV	\$55,687	–	\$70,406
Investigating the availability and nature of Hepatitis C antiviral therapy in NSW particularly for illicit drug users	SCHER	\$6,097	–	\$4,525
Secretariat for the UN Reference Group on HIV/AIDS and Injecting Drug Use, particularly in Developing and Transitional Countries	UNOV	\$118,761	–	\$106,805
Pre-release methadone maintenance programs in compulsory rehabilitation centres in China (US\$252,918)	UNODC	\$297,548 (2 years)*	–	\$35,371
SUB-TOTALS FOR PROJECTS (OVER 1 TO 5 YEARS)		\$35,450,249	\$3,560,044	\$5,891,781

Infrastructure	Funding Source	Total Award (\$)	Expenditure 2006	Expenditure 2007
Faculty support for research infrastructure	UNSW	\$581,797	\$385,188	\$481,771
DVC strategic support for research infrastructure	UNSW	\$477,500	–	\$327,730
SUB-TOTAL FOR INFRASTRUCTURE 2007		\$1,059,297	\$1,059,297	\$809,501

Scholarships & Fellowships	Funding Source	Total Award (\$)	Expenditure 2006	Expenditure 2007
Career Development Award – Responding to illicit drugs in Australia: towards evidence-based strategic policy	NHMRC	\$441,250	\$66,608	\$90,673
Public Health Fellowship – Developing & disseminating effective treatments for depression & substance use comorbidity	NHMRC	\$269,000	–	\$51,091
Research Fellowship	AERF	\$305,130	\$91,276	\$111,201
Vice-Chancellor's Postdoctoral Fellowship	UNSW	\$288,000	–	\$90,185
Postgraduate Scholarships (2)	AGDHA	\$148,669	\$57,102	\$43,426
PhD Scholarship	AERF	\$121,709	\$20,170	\$33,369
PhD Scholarship	DH	\$133,653	\$38,850	\$41,133
SUB-TOTALS FOR SCHOLARSHIPS & FELLOWSHIPS (OVER 3 TO 5 YEARS)		\$404,031	\$116,122	\$117,928
GRAND TOTAL OF AWARDS TO NDARC (OVER 1 TO 5 YEARS)		\$36,913,577	\$4,061,354	\$6,819,210

* Continuing Project

APPENDIX D
PUBLICATIONS

NDARC MONOGRAPHS

60. O'Brien, S., Black, E., Degenhardt, L., Roxburgh, A., Campbell, G., de Graaff, B., Fetherston, J., Jenkinson, R., Kinner, S., Moon, C., & White, N. (2007). *Australian Drug Trends 2006: Findings from the Illicit Drug Reporting System (IDRS)*. National Drug and Alcohol Research Centre

61. Dunn, M., Degenhardt, L., Campbell, G., George, J., Johnston, J., Kinner, S., Matthews, A., Newman J., & White, N. (2007). *Australian Trends in Ecstasy and Related Drug Markets 2006: Findings from the Ecstasy and Related Drugs Reporting System (EDRS)*. National Drug and Alcohol Research Centre

TECHNICAL REPORTS

262. O'Brien, S., Day, C., Black, E., Thetford, C., & Dolan, K. (2007). *Injecting drug users' understanding of Hepatitis C*. National Drug and Alcohol Research Centre.

263. Larney, S., Corcoran, K., Wodak, A., & Dolan, K., on behalf of the World Health Organization Regional Office for the Western Pacific. (2007). *The Integration of harm reduction into abstinence-based therapeutic communities: A case study of We Help Ourselves*. National Drug and Alcohol Research Centre.

264. Shanahan, M., Hetherington, K., Mattick, R., & Weatherburn, D. (2007). *Estimating the cost-savings of reduced crime while in methadone treatment*. National Drug and Alcohol Research Centre.

265. Gibson, A., Larance, B., Roxburgh, A., Degenhardt, L., & Black, E. (2007). *The extent of diversion of fentanyl for non-medical purposes in Australia: What do we know?* National Drug and Alcohol Research Centre.

266. Larney, S., Mathers, B. & Dolan, K. (2007). *Illicit drug treatment in prison: detoxification, drug-free units, therapeutic communities and opioid substitution treatment*. National Drug and Alcohol Research Centre.

267. White, N., Vial, R. & Ali, R. (2007). *SA Drug Trends 2006: Findings from the Illicit Drug Reporting System (IDRS)*. National Drug and Alcohol Research Centre.

268. Fetherston, J. & Lenton, S. (2007). *WA Drug Trends 2006: Findings from the Illicit Drug Reporting System (IDRS)*. National Drug and Alcohol Research Centre.

269. Campbell, G. & Degenhardt, L. (2007). *ACT Drug Trends 2006: Findings from the Illicit Drug Reporting System (IDRS)*. National Drug and Alcohol Research Centre.

270. Black, E., Roxburgh, A. & Degenhardt, L. (2007). *NSW Drug Trends 2006: Findings from the Illicit Drug Reporting System (IDRS)*. National Drug and Alcohol Research Centre.

271. Moon, C. (2007). *NT Drug Trends 2006: Findings from the Illicit Drug Reporting System (IDRS)*. National Drug and Alcohol Research Centre.

272. Kinner, S. & Lloyd, B. (2007). *QLD Drug Trends 2006: Findings from the Illicit Drug Reporting System (IDRS)*. National Drug and Alcohol Research Centre.

273. de Graaff, B. & Bruno, R. (2007). *Tasmanian Drug Trends 2006: Findings from the Illicit Drug Reporting System (IDRS)*. National Drug and Alcohol Research Centre.

274. Jenkinson, R. & Quinn, B. (2007). *VIC Drug Trends 2006: Findings from the Illicit Drug Reporting System (IDRS)*. National Drug and Alcohol Research Centre.

275. George, J. & Lenton, S. (2007). *WA Trends in Ecstasy and Related Drug Markets 2006: Findings from the Ecstasy and Related Drugs Reporting System (EDRS)*. National Drug and Alcohol Research Centre.

276. Campbell, G. & Degenhardt, L. (2007). *ACT Trends in Ecstasy and Related Drug Markets 2006: Findings from the Ecstasy and Related Drugs Reporting System (EDRS)*. National Drug and Alcohol Research Centre.

277. Dunn, M. & Degenhardt, L. (2007). *NSW Trends in Ecstasy and Related Drug Markets 2006: Findings from the Ecstasy and Related Drugs Reporting System (EDRS)*. National Drug and Alcohol Research Centre.

278. Moon, C. & Newman, J. (2007). *NT Trends in Ecstasy and Related Drug Markets 2006: Findings from the Ecstasy and Related Drugs Reporting System (EDRS)*. National Drug and Alcohol Research Centre.

279. Richardson, M, Kinner, S. & Llyod, B. (2007). *Queensland Trends in Ecstasy and Related Drug Markets 2006: Findings from the Ecstasy and Related Drugs Reporting System (EDRS)*. National Drug and Alcohol Research Centre.

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APPENDIX E

CONFERENCE PRESENTATIONS

Barrett E, Merz S, Rosenfeld J, Mills K, Teesson M, Hopwood S, Back S, Brady K, Baker A and Sannibale C.

Concurrent Treatment of PTSD and Substance Use: A Case Example.

Conference of the Australasian Society of Traumatic Stress Studies, Ballarat, September.

Black, E. *IDRS Key Findings: What has happened to the heroin market?* National Drug Trends Conference, Sydney, 15 October.

Black, E., Sindicich, N. *What is the Illicit Drug Reporting System?* Statewide Needle & Syringe Program Workers' Meeting, Sydney, 27-28 September.

Burns, L., Mattick, RP & Wallace, C. *69th Methadone in pregnancy: Retention in treatment and neonatal outcomes.* Poster presented at the Annual scientific meeting of the College on Problems of Drug Dependence, Quebec, Canada, 20 June.

Burns, L. *Substance use in pregnancy: An Australian perspective.* Presentation at Pregnancy and Addiction Satellite Meeting, College on Problems of Drug Dependence, Quebec, Canada, June 18.

Burns, L., Mattick, R.P. & Wallace, C. *Smoking patterns and outcomes in a population of pregnant women who also use other substances.* Drug and Alcohol Nurses of Australasia, Regional Perspectives in Practice, Whyalla, 13 July.

Burns, L. & Mattick, R.P. *The use of linked data to examine substance use in pregnancy.* 5th Health Services and Policy Research Conference, Auckland, NZ, 2-5 December.

Caldwell, TM., Hutchinson, D. & Rodgers, B. *Prevalence of alcohol misuse amongst parents of infants and young children.* Inaugural Longitudinal Study of Australian Children Conference, Melbourne, 3-4 December.

Campbell, G. *Nightclub attendees and their perceptions on the introduction of roadside drug testing (RDT) in Sydney, NSW.* 4th Australasian Drug Strategy Conference, Gold Coast, 22-25 October.

Chalmers, J. *Is Australia's Income Support System Designed to Minimise Harm? Negotiating Drug-dependency and the Income Support System.* APSAD Conference, Auckland NZ, 6 November.

Cogger, S., Najman, J., Kelly, E., Baker, A., McKetin, R. *Characteristics of Women Entering Treatment for Methamphetamine Use.* Combined Cutting Edge Addiction and Annual APSAD Conference, Auckland NZ, 5-7 November.

Copeland, J. *Australia's cannabis policy is best!* Invited paper. 2nd International Cannabis and Mental Health Conference, Kings College, London UK, 2 May.

Copeland, J. *Interventions for cannabis use disorder: an overview.* Invited paper. 2nd International Cannabis and Mental Health Conference, Kings College, London UK, 2 May.

Copeland, J. *Interventions for cannabis use disorder among adults and adolescents.* Presentation at Creating Synergy Conference, Creating Synergy between Prevention, Early Intervention and Treatment, Wollongong, 15 June.

Copeland, J. *The Adolescent Cannabis Check-up.* V World Congress of Behavioural and Cognitive Therapies, Barcelona, Spain, 13 July.

Copeland, J. *Identifying barriers around school based prevention programs for ecstasy and related drugs (ERDs).* 4th Australasian Drug Strategy Conference, Gold Coast, 22-25 October.

Degenhardt, L. *Temporal dynamics between cannabis, depression and psychosis among young adults with psychotic disorders.* Poster presented at the 69th Meeting of the College on Problems of Drug Dependence, Montreal, Canada, 16-21 June.

Degenhardt, L. *Hospital separations for illicit drug related psychotic episodes in Australia, 1993-2004.* Poster presented at the NIDA International Forum, Montreal, Canada, 16-21 June.

Degenhardt, L. *Towards a global view of drug use: Findings from the World Mental Health Surveys.* Paper presented at the World Mental Health Survey Consortium meeting, New Hampshire USA, 22-26 June

Degenhardt, L. *The importance and fluctuation of polydrug use among regular ecstasy users.* Trends in ecstasy and related drug markets, 2007. Paper presented at the 2007 Drug Trends Conference, Sydney, 15 October.

Dillon, P. *Methamphetamine and club health in Australia: What's it's impact? How have we responded and how effective are our harm reduction messages?* 18th International Conference on the Reduction of Drug Related Harm, Warsaw, Poland, 14 May.

Dillon, P. *Current trends in ecstasy and related drugs (ERDs).* Presentation at Creating Synergy Conference, Creating Synergy between Prevention, Early Intervention and Treatment, Wollongong, 14 June.

Dillon, P. *Ecstasy and mental health: What does the current research tell us?* Presentation at Anex Illegal Drugs and Mental Health Conference, Melbourne, 4 September.

Dillon, P. *Performance and image-enhancing drugs (PIEDs): Reasons, risks and responses.* Keynote presentation at 2007 National Conference on Injecting Drug Use, Glasgow, Scotland, 15 October.

Dillon, P. *Dealing with the media: Experience from Australia.* Presentation at 2007 National Conference on Injecting Drug Use, Glasgow, Scotland, 16 October.

Dolan, K. *Drugs and HIV: An international review.* Indonesian National Conference on HIV, Surabaya, Indonesia, 6 February.

Dunn, M. *Patterns of ecstasy purchase and use: Findings from the Ecstasy and Related Drugs Reporting System.* 4th Australasian Drug Strategy Conference, Gold Coast, 22-25 October.

Dunn, M. *Initiation to injecting drug use amongst regular ecstasy users.* APSAD Conference, Auckland NZ, 5-7 November.

Hetherington, K., McKetin, R., Proudfoot, H., Mattick, R. *Social Phobia and Panic Disorder among methamphetamine treatment entrants; Prevalence, correlates and impact on treatment outcome.* Combined Cutting Edge Addiction and Annual APSAD Conference, Auckland NZ, 5-7 November.

Hughes, C. *Beyond the rhetoric: Converting political doctrine into pragmatic drug policy reform.* First Annual Conference of the International Society for the Study of Drug Policy (ISSDP), Oslo, Norway, 23 March.

Hughes, C. *How should Australia assess the outcomes from drug law enforcement? A critical review of the outcome measures.* 20th Anniversary Australian and New Zealand Society of Criminology Conference, Adelaide Convention Centre, Adelaide, 26 September.

Hughes, C. *What role should research play in illicit drug policy making? A case study of the decriminalisation of illicit drug use in Portugal.* 20th Anniversary Australian and New Zealand Society of Criminology Conference, Adelaide Convention Centre, Adelaide, 26 September.

Indig, D. *Detection of alcohol-related emergency department presentations: Who is being missed?* Presentation at the 33rd Annual Alcohol Epidemiology Symposium of the Kettil Bruun Society, Budapest Hungary, 7 June.

Indig, D. *Detection of drug and alcohol emergency department presentations: Who is being missed?* Poster presentation at the College on Problems of Drug Dependence 69th Annual Meeting, Quebec City Canada, 20 June.

Kaye, S. *Demographics, toxicology and cardiovascular pathology of methamphetamine-related deaths in Australia.* Presentation at 18th International Conference on the Reduction of Drug Related Harm, Warsaw, Poland, 15 May.

Kelly, E., McKetin, R., Baillie, A. *Is the Readiness to Change Questionnaire a valid measure for use among treatment-seeking methamphetamine users?* Combined Cutting Edge Addiction and Annual APSAD Conference, Auckland NZ, 5-7 November.

Larney S, Burns L, Mills K, Teesson M. *Health and substance use among homeless people in inner Sydney: Preliminary results.* Poster presented at the combined Cutting Edge Addiction and APSAD Conference, Auckland NZ, 5-7 November.

Larney, S. *An international review of prison methadone maintenance treatment.* Poster presented at the combined Cutting Edge Addiction and APSAD Conference, Auckland NZ, 5-7 November.

Larney, S. *An international Review of prison methadone maintenance treatment.* Paper presented at the 2nd International Prisoner Health Conference, Varna, Bulgaria, 25 September.

Larney, S. *Needlestick injuries among prison officers in two Australian states.* Paper presented at the 2nd International Prisoner Health Conference, Varna, Bulgaria, 25 September.

Maloney, E. *Investigating the co-occurrence of self-mutilation and suicide attempts among opioid dependent cases and matched controls.* Paper presented at the combined Cutting Edge Addiction and APSAD Conference, Auckland NZ, 5-7 November.

McKetin, R., Wyzenbeek, M., Lubman, D., Dawe, S., Ali R. *The relationship between cannabis use and the prevalence of psychotic symptoms among dependent methamphetamine users.* World Psychiatric Association Congress, Melbourne, 28 November-1 December.

McKetin, R. Lubman D., Ross, J., Ho, G. *Major Depression among methamphetamine treatment entrants: Prevalence and relationship to substance use.* Combined Cutting Edge Addiction and Annual APSAD Conference, Auckland NZ, 5-7 November.

McKetin, R., Lubman, D., Dawe, S., Ali, R. *The relationship between hostility and psychotic symptoms among methamphetamine treatment entrants.* Combined Cutting Edge Addiction and Annual APSAD Conference, Auckland NZ, 5-7 November.

McKetin, R., Cogger, S. Lubman, D., Dawe, S., Ali, R. *Prevalence of psychotic symptoms among methamphetamine treatment entrants.* Combined Cutting Edge Addiction and Annual APSAD Conference, Auckland NZ, 5-7 November.

Mills K, Teesson M, Ross J, Darke S. *A prospective study of trauma exposure and the development of PTSD among people with heroin dependence.* Combined Cutting Edge Addiction and Annual APSAD Conference, Auckland NZ, 6 November.

Plüddemann A., Flisher A. J., Parry C. D. H., McKetin R. *Methamphetamine use, sexual risk, aggression and mental health among school-going adolescent.* Presentation at the NIDA International Forum meeting, Quebec City, Canada, 15-18 June.

Ritter, A. *An Integrated, Comprehensive Approach to Illicit Drug Policy – Results from the First Stage of the Drug Policy Modelling Program.* First Annual Conference of the International Society for the Study of Drug Policy (ISSDP), Oslo, Norway, 23 March.

Ritter, A. *Straight Thinking: Psychomotor/Cognitive Performance in Drug-Dependent Patients.* Understanding Buprenorphine: Safer Options in the Treatment of Opioid Dependence Conference, Prague, 19 April.

Ritter, A. *Strategies of addiction policies in Australia: the introduction of buprenorphine-naloxone.* Paper presented at the 3rd European Association of Addiction Therapy, Vienna, Austria, 11 September.

Ritter, A. *Where do policy makers go to find research evidence?* Paper presented at the Combined APSAD and Cutting Edge Addiction Conference, Auckland, New Zealand, 5 November.

Roxburgh, A. *Drug dependence and associated risks among female street-based sex workers.* Poster presented at 18th International Conference on the Reduction of Drug Related Harm, Warsaw, Poland, 13-17 May.

Roxburgh, A. *PTSD and associated risks among female street-based sex workers.* Poster presented at 18th International Conference on the Reduction of Drug Related Harm, Warsaw, Poland, 13-17 May.

Roxburgh, A. *The effects of the market withdrawal of temazepam gel capsules on benzodiazepine injecting in Sydney, Australia.* Poster presented at 18th International Conference on the Reduction of Drug Related Harm, Warsaw, Poland, 13-17 May.

Roxburgh, A. *Sex workers, drug use and blood borne viral infections, a global perspective – Session Chair.* 18th International Conference on the Reduction of Drug Related Harm, Warsaw Poland 15 May 2007.

Roxburgh, A. *Post-traumatic stress disorder and comorbid drug use among female street-based sex workers in Sydney.* The Anex Illegal Drugs and Mental Health conference, Melbourne, 3-4 September.

Roxburgh, A. *What do we know about methamphetamine in Australia?* 11th National Chemical Diversion Congress, Hobart, 18-20 September.

Roxburgh, A. *Cannabis use in Australia – has it halved or is it hidden?* The Australian National Drug Trends Conference, Sydney, 15 October.

Roxburgh, A. *The epidemiology of methamphetamine use and harm in Australia: Recent trends and their implications.* 4th Australasian Drug Strategy Conference, Gold Coast, 22-25 October.

Sammut, C. McKetin, R. Lubman, D., Kelly, E. *Screening for Major Depression among methamphetamine treatment entrants: Choosing a cut-off on the Kessler Psychological Distress Scale (K10).* Combined Cutting Edge Addiction and Annual APSAD Conference, Auckland NZ, 5-7 November.

Sarkar, S., McKetin, R. *The relationship between childhood Conduct Disorder and psychiatric morbidity in dependent methamphetamine users.* Combined Cutting Edge Addiction and Annual APSAD Conference, Auckland NZ, 5-7 November.

Shand, F. *The effect of comorbid substance use disorders on treatment outcome for anxiety disorders.* Australian Association for Cognitive Behavioural Therapy Conference, Gold Coast, 9 October.

Silins, E. *Ecstasy (MDMA), antidepressants and serotonin syndrome: Implications for intervention in general medical practice.* Poster presentation at the College on Problems of Drug Dependence 69th Annual Scientific Meeting, Quebec City, Canada, 18 June.

Silins, E. *Methamphetamine-related hospital presentations: A media beat-up?* 4th Australasian Drug Strategy Conference, Gold Coast, 22-25 October.

Wallace, C. *Methamphetamine use in rural and regional New South Wales.* Combined Cutting Edge Addiction and Annual APSAD Conference, Auckland NZ, 7 November.

APPENDIX F

EXTERNAL LECTURES, WORKSHOPS,
PRESENTATIONS

Black, E. *Key Findings of the 2006 IDRS and EDRS.* Presentation to the Australian Capital Territory Police, April.

Black, E. *Ecstasy and related drug use: Findings from the NSW 2006 Ecstasy and Related Drugs Reporting System (EDRS).* Presentation at a training program for the Australian Drug Information Service (ADIS), July.

Burns, L. *The extent and outcomes of substance use in pregnancy.* Presentation to community child health trainees and paediatrician, Prince of Wales Hospital, Sydney, 23 August.

Copeland, J. *Cannabis Treatment.* Indonesian-Australian Specialised Training Project in Australia – Phase III. Sydney, 12 February.

Copeland, J. *Developing treatment services for women with alcohol and other drug problems.* United Nations Office on Drugs and Crime, Islamabad, Pakistan, 5-9 March.

Copeland, J. *Adolescent substance use: influences and responses.* Invited paper to the UNSW Medical Student's Society, Sydney, 31 May.

Copeland, J. *Cannabis research: What we know now.* Milton Lugar Symposium, Odyssey House, Sydney, 19 June.

Copeland, J. *Interventions for cannabis use disorder and the NCPIC.* NSW Health Seminar Series, Sydney, 8 September.

Darke, S. *Australian Treatment Outcome Study: What have we learnt?* NSW Health Department, 11 May.

Darke, S. *Heroin overdose: Facts and myths.* Deans Lecture Series, Faculty of Medicine, University of New South Wales, 16 May.

Darke, S. *Residential rehabilitation: Heroin abstinence and drug-related problems two years after treatment entrance.* Illawarra Drug and Alcohol/Mental Health. Wollongong, 30 May.

Darke, S. *Trends in drug use over the past 20 years.* Milton Lugar Symposium, Odyssey House, Sydney, 19 June.

Darke, S. *Heroin overdose: facts and myths.* European Monitoring Centre for Drugs and Drug Abuse, Lisbon, Portugal, 26 July.

Darke, S. *Heroin overdose: facts and myths.* National Centre for HIV Epidemiology and Clinical Research, Sydney, 5 September.

Degenhardt, L. *What do we know about methamphetamine use in Australia?* Talk given at the Australian Inter-Governmental Committee on Drugs, Hobart, 20 February.

Degenhardt, L. *Monitoring systems in Australia: Methods and trends in the epidemiology of drug use and harm.* Talk given at the United Nations Office On Drugs and Crime's Expert Meeting on Drug Monitoring Systems, Vienna, 11-15 May.

Degenhardt, L. *What do we know about methamphetamine use in Australia?* Talk given at the NSW Liberal Party Special Issues Group, Sydney, 4 October 4.

Dillon, P. *Ecstasy and related drugs (ERDs).* Presentation to the Indonesian Drug and Alcohol Training Program, New South Global Consulting, Sydney, 5 February.

Dolan, K. *Prisons and Drugs.* Presentation to the UNODC Project Advisory Committee meeting, Cambodia, 18-20 July

Dolan, K. *Disseminating Research Findings.* Training course, part 2, Surabaya Workshop, Indonesia

Hughes, C. *What drives policy reform? Assessing the adequacy of contemporary public policy theories for understanding drug policy reform in Portugal and Australia.* Centre for Health Economics Research & Evaluation (CHERE), CHERE, UTS, 29 May.

Martin, G. *The Ecstasy Check-Up.* Presentation at the NDARC Canberra Seminar Series, Canberra, 1 August.

Mattick, R. *Research: What have we learned?* Milton Lugar Symposium, Odyssey House, 19 June.

McKetin, R. *Methamphetamine: Assessing Neuropsychological Functioning.* University of Sydney, Sydney 15 November.

McKetin, R. *Ice and psychosis.* University of Sydney (Westmead Hospital). Sydney, 30 October.

McKetin, R. *Methamphetamine: Facts and myths.* University of New South Wales Brain Sciences Colloquium, Sydney, 13 September.

McKetin R. & Ross J. *Baseline findings from the Methamphetamine Treatment Evaluation Study (MATES).* Methamphetamine Treatment Forum, Sydney, 17 November

Mills, K. *Post traumatic stress disorder and substance use disorders.* Kirkeaton Road Centre, Kings Cross, 3 May.

Mills, K. *Post traumatic stress disorder and substance use disorders.* Invited seminar, Northern Sydney Central Coast Psychology Inservice Day, North Ryde, June.

Mills, K. *Post traumatic stress disorder and its impact on substance users.* Invited seminar, NSW Health, North Sydney, August.

Mills, K. *How common is post traumatic stress disorder among people with substance use disorders and how should we treat it?* Invited lecture at Westmead Hospital Department of Medical Psychology Lecture Series, Westmead, October.

Ritter, A. *Evidence-based drug policy – myth or reality? The ways in which research evidence is used or not used in policy making processes.* Presentation to Families and Friends of Drug Law Reform, ACT Legislative Assembly, Canberra, 6 February.

Ritter, A. *Policy-making on illicit drugs: some challenges and new approaches.* Social Policy Research Centre (SPRC) Seminar Series, SPRC, UNSW, 15 May.

Ritter, A. *Toward evidence-based illicit drug policy: the Drug Policy Modelling Program (DPMP)*. School of Public Health & Community Medicine (SPHCM) Seminar Series, SPHCM UNSW, 30 May.

Ritter, A. *Using models to advance illicit drug policy: Australian experiences*. Presentation at the Department of Mathematical Methods in Economics, Vienna Institute of Technology, Vienna, 17 September.

Ritter, A. *An overview of the Drug Policy Modelling Program*. Presentation to the Research and Analysis Branch, United Nations Office on Drugs and Crime, Vienna, 14 September.

Ritter, A. *Simulations to aid policy decision making*. Presentation at the 2007 DPMP Seminar, Sydney, 22 August.

Ritter, A. *Priority areas and policy practice projects*. Presentation at the 2007 DPMP Seminar, Sydney, 22 August.

Ritter, A. *Measuring, comparing and valuing the effects of drug policies: the drug harm index*. Presentation at the 2007 DPMP Seminar, Sydney, 22 August.

Ritter, A. *Examining the relative cost-effectiveness of different types of law enforcement interventions directed towards methamphetamine*. Presentation at the 2007 DPMP Seminar, Sydney, 22 August.

Ritter, A. *The opioid pharmacotherapy review*. Presentation to the Intergovernmental Committee on Drugs (IGCD), Brisbane, 19 July.

Ritter, A. *Policy-making on illicit drugs: Some challenges and new approaches*. Mental Health & Drug Policy Office, NSW Health, Sydney, 17 July.

Ritter, A. *Evidence-based drug policy – myth or reality?* Family Drug Support 10th Anniversary, Sydney, 20 June.

Roxburgh, A. *The National Illicit Drug Indicators Project: An overview and case study of the findings*. Presentation to the NSW Health Department, Sydney, 15 May.

Roxburgh, A. *Drug dependence and mental health among street-based sex workers in Sydney*. Presentation to the Sex workers working party meeting at the Aids Council of NSW, Sydney, 27 June.

Roxburgh, A. *Benzodiazepine use and injection among IDU in Australia*. Presentation at the NDARC Seminar Series, Australian Government Dept of Health & Ageing, Canberra, 1 August.

Sannibale, C. *Trauma and substance abuse: PTSD and alcohol use problems*. Presentation to Northern Sydney Central Coast Psychology In-service Day, 22 June.

Sannibale, C. *Description of two current projects: PTSD and alcohol use problems and Operationalising Stepped Care in drug and alcohol treatment*. Presentation to the NSW Health Psychologists in Training, Sydney, 25 June.

Sannibale, C. *PTSD and alcohol use problems: A randomized controlled trial of treatment*. Presentation to clinical staff, Drug Health Services, Royal Prince Alfred Hospital, 20 August.

Sannibale, C. *A randomized controlled trial of stepped care for alcohol dependence and co-existing depression and anxiety*. NDARC in-house seminar, Sydney, 15 November.

Shakeshaft, A. *Alcohol harms: a social perspective*. Presentation to the Indonesian drug and alcohol training program, New South Global Consulting, Sydney, 1 February.

Shakeshaft, A. *Alcohol harms: a social perspective*. Presentation to the Indonesian drug and alcohol training program, New South Global Consulting, Sydney, 15 February.

Shakeshaft, A. *Alcohol Treatment Guidelines for Indigenous Australians*. Invited panellist, Rural Health Education Foundation's training broadcast seminar series, Sydney, 26 March.

Shakeshaft, A. *Alcohol Action in Rural Communities (AARC): A randomised controlled trial*. Presentation to the NSW Health Department, Sydney, 15 May.

Shakeshaft, A. *Alcohol and its impact: a community perspective*. Invited panellist, AIDS Council of NSW, Sydney, 16 May.

Shakeshaft, A. *Alcohol interventions in hospital Emergency Departments reduce harm, not consumption*. Presentation at the NDARC Canberra Seminar Series, Canberra, 1 August.

Shakeshaft, A. *Alcohol harms in the community: the role of the health sector*. Presentation to UNSW medical students, UNSW, Sydney, 15 August.

Shanahan, M. *Producing more and better economic evidence to inform policy? Observations from drug and alcohol research*. Presentation to Sax Institute. Policy and Research Exchange, 6 June.

Shanahan, M. *Cost-offset of reduced crime while on methadone treatment: Are there any savings?* Presentation to NSW Health Drug and Alcohol Branch, 3 April.

Shanahan, M. *Cost-offset of reduced crime while on methadone treatment: Are there any savings?* Presentation to Health Economics Seminar Series 2007, 19 June.

Shanahan, M. *Estimating the costs of drug related hospital separations in Australia for the years 1999/00 to 2004/05*. Presentation at the NDARC Canberra Seminar Series, Canberra, 1 August.

Swift, W. *Cannabis and driving: What do we know?* Presentation at the NDARC Canberra Seminar Series, Canberra, 1 August.

Vogl, L. *Developing evidence-based drug prevention programs*. Presentation to the Indonesian drug and alcohol training program, New South Global Consulting, Sydney, 8-9 March.

Vogl, L. *Substance Use Disorders*. Presentation to Macquarie University Clinical Masters Course: Advanced Psychopathology, Sydney, 3 May.

Vogl, L. *Climate Schools: The efficacy of a school-based prevention program for problems with alcohol use*. Presentation at the NDARC Canberra Seminar Series, Canberra, 1 August.

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**National Drug and Alcohol
Research Centre**

UNSW

Sydney NSW 2052

22-32 King Street,
Randwick NSW 2031

Telephone: (02) 9385 0333

Facsimile: (02) 9385 0222

<http://ndarc.med.unsw.edu.au/ndarc.nsf>