

centre lines

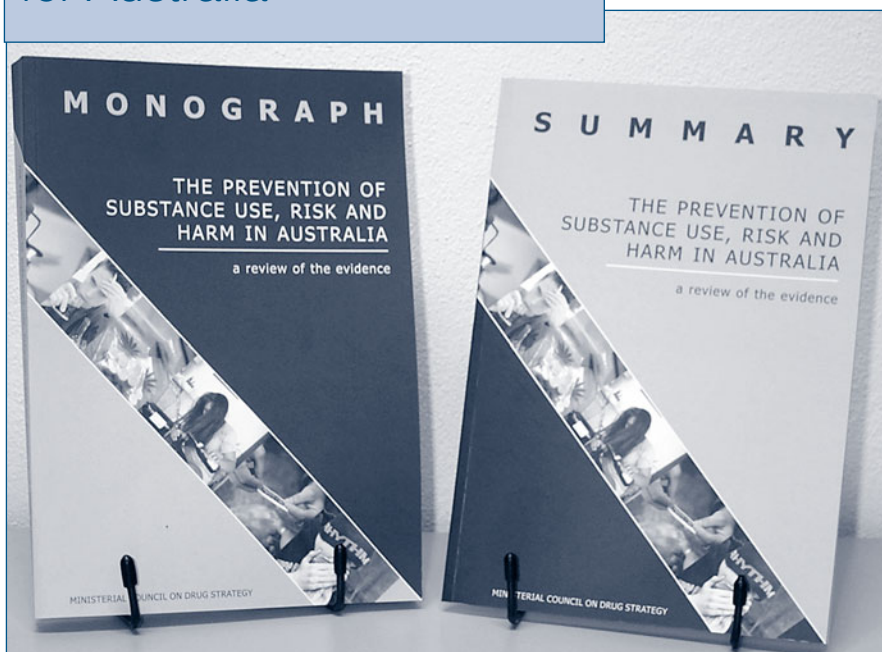
NDRI (13)

August 2004

A bi-monthly newsletter from the National Centres for Drug and Alcohol Research
Published this issue by the National Drug Research Institute, Perth

issuing **forth**

Preventing drug use, risk and harm: A new resource for Australia



Funded by the
National Drug Strategy

Registered by Australia Post –
Print Post Publication No
PP236697/00013
ISSN 1034-7259

contents

edspace	1
headspace	2
Dennis Gray pays tribute to Professor Tim Stockwell	
issuing forth	3
Wendy Loxley discusses the recently published prevention monograph, <i>The prevention of substance use, risk and harm in Australia</i>	
project notes	4
■ Social, cultural and economic processes in illicit drug markets and their implications for public health	
■ Pouring practices of 65-75 year old current drinkers: Implications for drinking guidelines and estimates of risk	
■ The relationship between non-fatal overdose of pharmaceutical medications, suicidality and depression	
■ The consequences of loss and grief among Aboriginal town camp residents in Alice Springs: The role of alcohol and other drugs	
abstracts	6
Summaries of recently published articles	
recent publications	7
Summaries of recently published articles	
staff list	8

edspace

Welcome to the winter edition of CentreLines.

In *Headspace*, Acting Director Dennis Gray pays tribute to the work of Professor Tim Stockwell. As NDRI's Director for eight years, Professor Stockwell made an outstanding contribution to prevention research in Australia. He also worked tirelessly to build NDRI's reputation as a leader in the field, both nationally and internationally. He leaves us to take up a position at the University of Victoria in British Columbia. We wish him well.

In *Issuing Forth*, Wendy Loxley outlines the major findings from the long awaited prevention monograph, *The prevention of substance use, risk and harm in Australia*. The monograph ranks the scientific evidence for 159 prevention strategies covering all drug types and all age groups, with a particular focus on children and young people.

NDRI offers scholarships to research students interested in working in the prevention field. In this month's *Project Notes*, our four PHD students provide an overview of their research to date.

I hope you enjoy this issue of CentreLines. For further information, I invite you to visit the NDRI website at www.ndri.curtin.edu.au.

Sheridan Webb

Editor

CentreLines is a joint publication from the National Drug Research Institute, Perth and the National Drug and Alcohol Research Centre, Sydney. It is published bi-monthly and produced alternately by each centre.

A tribute to Professor Tim Stockwell

The last time I wrote this column was 12 months ago and I was looking forward to a new era at NDRI. This time, I am looking back at the end of an era. It is with much regret that we say goodbye to Tim Stockwell who has been NDRI's Director for the past eight years. Tim has left us for the University of Victoria in British Columbia, Canada, where he will take up the position of Professor and Director of the new Centre for Addictions Research of British Columbia. This provides a great opportunity and challenge for Tim as he will be establishing the Centre from 'scratch'.

Tim joined the National Centre for Research into the Prevention of Drug Abuse (NCRPDA) – as NDRI was then named – as Associate Professor and Deputy Director in 1988. He came to the NCRPDA from the Exeter Health Authority, in the United Kingdom, where he held the post of Principal Clinical Psychologist – a position that included the development and evaluation of community-based prevention and treatment services. When Professor David Hawkes stood down from the Directorship of NCRPDA in October 1995, Tim took over as acting Director and was appointed to the Directorship in June 1996.

In his time at NDRI – alone and with colleagues – Tim developed numerous research initiatives, attracted over \$4.5 million in research grants, published over 150 refereed journal articles, book chapters and books or monographs as well as a large number of other articles and making numerous conference presentations. The list of research projects in which he has been involved is too numerous to mention; however, there are several inter-related projects that deserve special mention. The focus of much of Tim's work has been upon alcohol policy issues and has included documenting patterns of consumption and related harm and the development of broad-brush interventions.

In the mid-1990s, Tim led the Measurement of Alcohol Problems for Policy Project which systematically documented levels of alcohol consumption and related harm on a regional basis across Western Australia¹ More recently, with Tanya Chikritzhs and others, he has led the National Alcohol Indicators Project which – among other outputs – has included six statistical bulletins that track trends in alcohol consumption and related harm on a state and territory basis.² Related to these projects has been Tim's interest in developing better methodologies for measuring consumption and harm. This has included going beyond simply measuring aggregate levels of consumption to measuring patterns of consumption. It was work in this area that led to his work with an international team which developed for the World Health Organisation an *International Guide for Monitoring Alcohol-Related Problems, Consumption and Harm*.³

Tim's research into ways to reduce problem drinking and its harmful consequences has also been wide-ranging. It includes evaluation of the efficacy of Australian state and territory liquor licensing legislation, work on strategies for reducing harm in licensed drinking settings, and standard drinks labelling.⁴⁻⁶ Tim was also part of the team that developed the National Health and Medical Research Council's revised *Australian Alcohol Guidelines*.⁷ Another focus of Tim's research into harm reduction strategies was alcohol taxation – a focus reflected in his evaluation of the Northern Territory's Living With Alcohol Program,⁸ among other work.

As well as documenting the harms associated with problem drinking and identifying effective ways of addressing them, Tim also conducted research into community support for such interventions. This work included documentation of public opposition to extended trading hours, evaluation of the level of support for standard drink labelling and other intervention measures.

In addition to his prodigious research output, Tim also found time to undertake editorial duties on such prestigious journals as *Addiction* and the *British Journal of Addiction*, to be an active member of various professional organisations including the Kettil Bruun Society for Social and Epidemiological Research on Alcohol and the Australian Professional Society for Alcohol and Drugs, and to be a Director of the Alcohol Education and Rehabilitation Foundation.

Importantly, Tim is not simply a researcher. Equally important has been his role in disseminating the outcomes on his research activities. This role has had many facets and has included: membership on advisory bodies such as the World Health Organisation Strategy Advisory Committee on Alcohol, the National Expert Advisory Committee on Alcohol and the National Alcohol Research Priorities Steering Committee; expert testimony to parliamentary inquiries and to the drug summits held in Western Australia and New South Wales; numerous invited presentations to international and national symposia and conferences; and a plethora of media interviews and commentaries. Although sometimes attacked by representatives of the alcohol industry as being partisan, it is important to note that Tim has been scrupulous in ensuring that his activities in this area have been firmly grounded in the research evidence. Tim's research and the dissemination of his research findings have made a significant contribution to alcohol policy and to the continuing evolution of Australian's National Drug Policy.

On top of all these contributions, Tim has been an effective Director of the National Drug Research Institute. He has steered NDRI through two major, and praiseworthy reviews of its activities. Under his directorship, there has been a steady increase in the depth and breadth of the NDRI's research

activities and with his encouragement and guidance there has been a blossoming in the careers of Institute research personnel.



Tim's most recent contribution has been the role that he played with Wendy Loxley and John Toumbourou in the development of the 'Prevention Monograph' (which is the subject of Wendy Loxley's piece in Issuing Forth). With Wendy and John, Tim brought together a large team of specialist alcohol and other drug researchers which conducted a rigorous review of 159 preventive interventions and their efficacy. It is important to note, as Wendy does in her piece also, that the Monograph is not intended for use as a prevention 'cookbook' – with intervention ratings used to unreflectively select interventions for implementation. Few of the interventions reviewed are unequivocally shown to be ineffective. Statements to the effect that the evidence for the efficacy of many interventions is limited are simply that – they are not statements that the interventions do not work. Where there is evidence that particular interventions can be efficacious, it is also important to be aware of the conditions that facilitate their effectiveness. Despite this caution, however, the Prevention Monograph represents a major research effort. What it clearly illustrates is that there is a need for greater investigation of the impact of many commonly used intervention strategies. The national drug research centres – and other research institutions – are clearly in a position to take leadership in furthering such research. In no small part this is due to Tim's efforts. We are saddened by his departure but wish Tim well and look forward to future collaborative research activities with him.

Dennis Gray

References

1. Stockwell, T., Masters, L., Phillips, M., et al. (1995). *The Mapping of Alcohol Problems for Policy (MAPP) Project*. Perth: National Centre for Research into the Prevention of Drug Abuse, Curtin University of Technology.
2. Chikritzhs, T., Catalano, P., Stockwell, T., et al. (2003). *Australian Alcohol Indicators, 1990–2001: Patterns of Alcohol Use and Related Harms for Australian States and Territories*. National Drug Research Institute, Curtin University of Technology and Turning Point, Alcohol and Drug Centre.
3. Stockwell, T.R., Chikritzhs, T., Dawson, D., et al. (2000). *International Guide for Monitoring Alcohol-Related Problems, Consumption and Harm*. Prepared for the World Health Organization, Geneva, Switzerland.

4. **Stockwell, T. (ed.)**. (1994). *The Appropriateness and Efficacy of Liquor Licensing Laws in Australia*. Australian Government Publishing Service, Canberra.
5. **Stockwell, T.** (1997). Harm reduction and licensed drinking settings. In: Erickson P, Riley D, Cheung Y, O'Hare P. (eds.) *New Public Health Policies and Programs for the Reduction of Drug Related Harm*. Toronto: University of Toronto Press.
6. **Stockwell, T. and Single, E.** (1997) Standard unit labelling on alcohol containers. In: Plant, M., Single, E. and Stockwell, T. (Eds.) *Alcohol: Minimising the Harm*. London: Freedom Association Press.
7. National Health and Medical Research Council. (2001). *Australian Alcohol Guidelines: Health Risks and Benefits*. Canberra: National Health and Medical Research Council.
8. **Stockwell, T.R., Chikritzhs, T., Hendrie, D., et al.** (2001). The public health and safety benefits of the Northern Territory's Living With Alcohol program. *Drug and Alcohol Review*, 20 (2), 167–180.

issuing forth

Preventing drug use, risk and harm: A new resource for Australia

Much can be done to prevent or lessen drug use and drug-related harm, and in recent years there have been significant increases in knowledge of how best to go about this. As many readers would know, in 2001 the Australian Government Department of Health and Ageing commissioned a comprehensive review of Australian and international scientific literature and experience relating to prevention in the context of drug supply, use and harm. The objective of the review was to establish an integrated map of the systems, pathways and strategies that act as interconnections among and between risk factors, protective factors and outcomes related to the prevention of drug-related harm.

The commission was undertaken by a consortium of researchers from the National Drug Research Institute (NDRI) in Perth and the Centre for Adolescent Health (CAH) in Melbourne, and was headed by myself from NDRI, Associate Professor John Toumbourou from CAH and Professor Tim Stockwell from NDRI. The review is now complete and has been published by the Australian Government Department of Health and Ageing as a Monograph and a separate Summary. Details of how these volumes can be obtained are below.

To undertake the review, we identified the major patterns of drug use and drug-related risk and harm in Australia, using the most contemporary data; overviewed social and structural determinants of health and drug use, internationally and in Australia, with a particular concern for Indigenous Australians; reviewed the literature on risk and protective factors relating to drug use and other psychosocial problems; and reviewed the evidence for a range of prevention strategies. 'Prevention' was interpreted very broadly, and the strategies encompassed measures that prevent or delay the onset of drug use as well as measures that protect against risk, and reduce the harms associated with drug supply and use. One hundred and fifty nine strategies were reviewed and rated for effectiveness. We included every drug type identified by the National Drug Strategy and, where possible, distinguished between different age groups, from conception to old age. Finally, we considered the implications of these findings for further research and interventions.

Our approach to the task was inclusive. Both NDRI and CAH are fortunate in employing some of the most experienced researchers in Australia in the areas of licit and illicit drug use, Indigenous

substance use and childhood and adolescent health, and we made extensive use of their expertise as well as seeking input from experts in other institutions who assisted with the identification of material, preparation of drafts, and review. The Monograph was completely reviewed and revised on three separate occasions, the last of which involved national and international peer review.

Rating of interventions was undertaken with a six point scale relating to the extent and outcomes of published research. We gave preference to the highest standard of research available, starting with Cochrane and Campbell Collaborations and proceeding to other systematic reviews, reviews published in peer-reviewed literature and individual published studies. Where peer-reviewed literature was not available we used material from institutional and other reports and, wherever possible, assessed the level of confidence that could be placed in the literature. It will be immediately apparent that many interventions, particularly those pertaining to illicit drug use, have had insufficient published evaluation and research for judgements about their effectiveness to be made. The Monograph thus provides an assessment of areas where more research and evaluation is needed.

The Monograph is too large to be summarised in a few paragraphs, but some of the major points can be outlined. We commenced with a consideration of the main features of risky drug use patterns in Australia which are summarised below.

- There has been a dramatic reduction in levels of smoking in Australia in recent decades, but smoking rates by young people, and young women in particular, are a concern.
- Alcohol consumption in Australia has recently increased slightly overall, and more markedly among young people. Two-thirds of the alcohol that is consumed in Australia is done so in a risky manner, and for young adults that figure is 90%.
- Cannabis is the most widely used illicit drug in Australia. Around 10% of people become regular heavy users of cannabis and risk long-term health consequences and dependence. Cannabis use during adolescence is associated with later mental health and conduct problems, though the causal processes remain unclear.

- Early use of tobacco and alcohol is predictive of later problems with tobacco dependence, alcohol and illicit drugs. Use of alcohol and tobacco at an early age predicts progression to heavier drug use, even after adjusting for known developmental risk factors. Adolescent use of cannabis significantly increases the risk of later use of other illicit drugs, but only a minority of cannabis users progress to use of other illicit drugs.
- Injection is the main risk behaviour in relation to health-related harms from other illicit drug use. Injection of opiates poses a risk of overdose, especially if other CNS depressant drugs have also been consumed. Sharing of injecting equipment and associated paraphernalia is a major risk factor for the spread of blood-borne viruses.

In general, we have suggested that four levels of intervention to reduce risky drug use harm in Australia are needed. Some comments about these interventions follow.

- **Universal interventions to prevent tobacco use and risky alcohol use.**
- **Universal interventions to reduce the supply of, and demand for, licit and illicit drugs.**
- **Targeted interventions to address vulnerable and disadvantaged groups with particular attention to Indigenous Australians.**
- **Treatment, brief intervention and harm reduction approaches for adolescents and adults with emerging or developed risky drug use patterns.**

It is clear that patterns of drug use and related harms are not distributed randomly across the population, but, rather, that there are defined groups in contemporary Australia that are over-represented in risky drug use and general ill-health. Children with multiple developmental and social risk factors and few protection factors are more likely to drink in a risky fashion, smoke, use illicit drugs, experience mental health problems and exhibit conduct disorder. It is also clear that early initiation of, and frequent, youth drug use is most clearly predicted by the cumulative number of risk factors, rather than by any specific risk factor.



Analysis of a major Victorian data set of high school students, undertaken for this review, found, however, that most weekly tobacco smoking and binge drinking was evident amongst students with average rather than high levels of risk factors. This suggests that prevention strategies for legal drugs need to be universal in their application and relevance to all young people. In contrast, most illicit drug use was evident amongst students with high levels of risk factors suggesting that illicit drug intervention strategies for young people need to be targeted.

Universal regulatory interventions for legal drugs in the general community are essential. Regulation of the supply of both tobacco and alcohol products, supported by a range of public education measures, is strongly supported in the research literature, as is maintenance of price by taxation and other initiatives. Restrictions of sales of both alcohol and tobacco to minors can be effectively enforced. There is strong evidence that public education campaigns can contribute to reductions in smoking and risky alcohol use, but usually only if they support other policy measures such as tax increases and law enforcement.

The role of law enforcement is central to the prevention of illicit drug use. Laws shape community values and opinions about drug use. On the one hand, they express social disapproval that reinforces social norms against illicit drug use, and on the other hand, they act as a deterrent

against use. The impact of laws prohibiting the sale, supply and use of certain drugs is, however, very hard to ascertain from current scientific evidence. Acknowledging the difficulties of working in this area, a major investment in research is recommended to improve the future evidence base for illicit drugs policy.

Reduction of the demand for drugs across the general population is achieved by a number of different means. Treatment for drug problems is one of the best ways of assisting users to reduce, or abstain from, use. The efficacy of programs addressing alcohol and drug use in the workplace is a matter of debate, particularly in relation to drug testing. Community-based programs are vital because the community is a primary locus of demand reduction. Mass media campaigns are a common means of community education and prevention in Australia with variable success.

In conclusion, our review suggests that investments in prevention should aim to maximise the potential for early childhood development, while also acknowledging that development and socialisation have ongoing threads in later years. The benefits that could flow from such investments range from the maximising of human potential through to increasing productivity and achievement, with ultimate outcomes for improving both the wealth and well-being of the nation.

Wendy Loxley

References

1. **Loxley, W., Toumbourou, J.W., Stockwell, T., Haines, B., Scott, K., Godfrey, C., Waters, E., Patton, G., Fordham, R., Gray, D., Marshall, J., Siggers, S., Sanci, L. and Williams, J.** (2004). *The Prevention of Substance Use, Risk and Harm in Australia: A Review of the Evidence*. Canberra: Australian Government Department of Health and Ageing.
2. **Loxley, W., Toumbourou, J.W., Stockwell, T.** (2004). *The Prevention of Substance Use, Risk and Harm in Australia: A Review of the Evidence*. Summary. Canberra: Australian Government Department of Health and Ageing.

The pdf of both volumes can be obtained from the following website:
http://www.health.gov.au/pubhlth/publicat/document/metadata/mono_prevention.htm

Bound copies can be obtained by ringing (02) 6289-7297

We thank the following for their input: Susan Carruthers, Tanya Chikritzhs, Edward Helmes, David Hill, Simon Lenton, Toni Makkai, Richard Mattick, Richard Midford, Pamela Snow, Catherine Spooner, Vicki White and Alex Wodak.

Professors Sally Casswell, Richard Catalano, Ross Homel and Jim Orford undertook the final review.

project notes

Social, cultural and economic processes in illicit drug markets and their implications for public health

Robyn Dwyer

This PhD research is concerned with the social, cultural and economic processes that constitute street-level illicit drug market participation, and the implications of these for public health. These processes are being investigated through an ethnographic study of an active and highly visible street drug market situated in Footscray, an inner-Western suburb of Melbourne.

The primary research focus is with drug market participants of Vietnamese ethnicity who face considerable social and economic disadvantage and who are especially vulnerable to an array of drug-related harms. The research is located at the intersection of urban and medical anthropology, and public health, bringing anthropological perspectives and methods to bear on understandings of drug-related harm among these populations.

Key topics of investigation include: (1) drug market participants' perceptions of risk and how these are socially and culturally constructed; (2)

the relationship between risk perceptions, trust and drug-related harms (e.g. overdose, transmission of blood-borne viruses); (3) the relationships between illicit drug markets, social and economic marginalisation and drug-related harm; and (4) the interactions between Vietnamese street-level drug users and other sub-populations of illicit drug users (e.g. those of Anglo-Celtic descent).

Twelve months of ethnographic research amongst street-based injecting drug users in Footscray has been completed. In this time, contact has been established with several networks of research participants and extensive data collected through fieldwork and participant observation, informal conversations, in-depth interviews and observations.

Themes emerging from the data include the impact of policing on drug user practices, the interaction between Vietnamese drug users and those from Anglo-Australian backgrounds, the social context of benzodiazepine injection, and the high degree of marginalisation from services for street-based illicit drug users, particularly those of Vietnamese background. A short break from field research is now planned in order to review the data collected so far and to reassess the sampling frame, before the second and final phase of field research commences.

Pouring practices of 65-75 year old current drinkers:

Implications for drinking guidelines and estimates of risk

Celia Wilkinson

In Australia, as in most western societies, the use of alcohol, tobacco and other drugs is responsible for significant mortality and morbidity as well as economic and social harm. Conversely, for many people alcohol forms part of an enjoyable and healthy lifestyle (National Health and Medical Research Council, 2001).

To provide Australians with knowledge that will enable them to enjoy alcohol while minimising harmful consequences the National Health and Medical Research Council (NHMRC) developed the "Australian Alcohol Guidelines: Health Risks and Benefits" with recommendations for "low risk" drinking (National Health and Medical Research Council, 2001). The NHMRC working party (National Health and Medical Research Council, 2001) did, however, concede that there are limitations in the evidence base from which the Australian Alcohol Guidelines have been derived. One specific area that the NHMRC working party cited as needing further research was alcohol use amongst older people.

On Census night, 7 August 2001 there were 2,370,878 Australians aged 65 years and over,

representing 13% of the total population (Australian Bureau of Statistics, 2002). Over the next 50 years the older population is expected to reach 6.5 million people, representing 25% of the total population (Australian Bureau of Statistics, 2000). With the significant ageing of the Australian population the NH&MRC's recommendation for further research on alcohol use amongst older people is timely.

It is the overall aim of this research is to investigate: key informant recommendations for specific drinking guidelines for older people; the pouring practices of a group of 65-75 year olds; and analyse the 2004 National Drug Strategy Household Survey (NDSHS) data based upon the preceding results and produce revised estimates for the prevalence of at risk drinking amongst Australian 65-75 year old current drinkers. Such information will have implications for drinking guidelines and harm reduction initiatives related to older people.

The relationship between non-fatal overdose of pharmaceutical medications, suicidality and depression

Penny Heale

Suicide accounts for a substantial number of deaths in Australia every year, while the prevalence of non-fatal suicide attempts is even greater. One of the most common methods of both completed and attempted suicide is overdose on prescription or over-the-counter medication. Such events are frequently, but not always, associated with depressive illness.

This issue will be examined using Emergency Department (ED) data from of a major Melbourne public hospital. The study involves a 12-month audit of all relevant presentations to the ED, in-depth interviews with a convenience sub-sample of pharmaceutical medication overdose survivors, and an observational study of the work of the ED in relation to such cases.

The objectives of the study are to (1) assess the contribution medication overdose presentations make to the overall caseload of the ED, (2) to characterise patients presenting following a medication overdose, (3) to document what type of medications are implicated in overdoses presenting to the ED, (4) to document how patients have typically acquired the medications used in an overdose, (5) to better understand the relationship between suicidal intent, suicidal ideation and depression among this group of patients, (6) to document individual patient experiences of the emergency medical system following medication overdose, and (7) to describe the experience of conducting research with a vulnerable population in a complex and sensitive environment.

Data collection commenced in October 2003 and is progressing well. Penny plans to complete her thesis in 2005. This project is a collaborative

undertaking between Turning Point Alcohol and Drug Centre, NDRI, and St. Vincent's Hospital Emergency Department. It is partly funded via a grant from Beyond Blue, the National Depression Initiative.

The consequences of loss and grief among Aboriginal town camp residents in Alice Springs:

The role of alcohol and other drugs

Jane Ulrik

This research is being conducted in the 18 camps incorporated under the umbrella of Tangentyere Council which provide services to the 1400-2000 Aboriginal people who live in and around Alice Springs.

Loss and grief play a constant and significant role in the everyday lives of these residents. The literature documents the role of alcohol and ill health and supports the view that the abuse of alcohol and other substances is a major social and health problem. Substance misuse is implicated in mental ill-health, morbidity and mortality and the associated loss and grief has been identified by mental health services as a significant factor in the social and emotional well-being of these individuals.

In general the objectives of the project are:

1. to describe loss, its meaning and impact among Aboriginal Town Camp residents in Alice Springs and the role of alcohol and other drugs;
2. to identify factors which make people vulnerable or resilient in the face of loss and grief;
3. identify strategies to help Aboriginal Town Camp residents deal with issues associated with loss and enable them to better function, work and care for family; and
4. to identify strategies to enable service providers to better deal with issues associated with the loss and grief of their Aboriginal clientele.

This is a cross sectional descriptive study, relying primarily on qualitative research methods, using in-depth unstructured interviews and observational data collection techniques.

To date, the fieldwork has been completed and the analysis of the data is providing a wealth of information rich data, knowledge and expertise. A number of strategies have been developed and support structures identified. Loss and grief are constant, compounding and devastating for all residents, especially the vulnerable. Resilience provides an avenue for healing and restoring cultural protocols and dignity.

It is anticipated that the draft thesis will be complete by the end of 2004.

Director (Professor) National Drug Research Institute Curtin University of Technology

The National Drug Research Institute (NDRI) was established in 1986 with funding from the Australian Government's National Drug Strategy and is now the largest research Institute at Curtin. NDRI's mission is to conduct and disseminate high quality research that contributes to the prevention of harmful drug use and the reduction of drug related harm in Australia. NDRI has Collaborating Centre status with a number of national and International organisations. The Institute's main themes of research are determined by nationally identified priorities and NDRI's research strengths. At present these include alcohol and other drug policy, national monitoring, community interventions, school education programs, ethnographic research, preventing harms from injecting drug use, and substance abuse among Indigenous Australians.

The successful candidate will be an outstanding academic and leader, possessing a doctorate in an appropriate discipline and a strong research record in a field of direct relevance to the prevention of harmful drug use and the reduction of drug related harm.

The appointee will be expected to conduct high quality research, provide leadership and foster excellence in research in initiatives to reduce the uptake of harmful drug use and minimise the harmful effects of licit and illicit drug use in Australian society. They will be expected to maintain and develop excellent relationships with stakeholders at a local, national and international level and to provide quality management of NDRI and its staff.

For further information contact:

Professor Charles Watson
Executive Dean, Division of Health Sciences
Telephone +61 8 9266 7466
facsimile +61 8 9266 2608
Email c.watson@curtin.edu.au

Closing date: 5pm. Monday 11 October 2004

abstracts

Makin Tracks: Final evaluation report

Dennis Gray and Annalee Stearne

National Drug Research Institute, Perth, 2004.

This project, which began in October 1999, was funded by the Australian Department of Health and Ageing, to develop strategies to reduce solvent misuse in selected Aboriginal communities in South Australia.

The National Drug Research Institute (NDRI) evaluated the project. NDRI recorded the time and activities of the project staff, under these categories: strengthening and supporting existing programs; working directly with people at risk of substance misuse; networking and promoting Makin Tracks activities; project planning and administration; staff development and conference attendance; travel to communities; and, leave and 'sorry business'. Every three months the record sheets were used to report to the project Steering Committee.

At the end of the project, two Aboriginal staff members from NDRI conducted 29 interviews with people who were involved with the project including ADAC staff members and representatives of government and community organisations.

The Makin Tracks project team had four objectives that directed the work of the project. Part way through the project the second and third objectives were modified, and the fourth was introduced in May 2001 as an alternative.

The report highlights elements of the project that contribute to the successful implementation of Aboriginal substance misuse projects in general.

Pot, politics and the press - reflections on cannabis law reform in Western Australia

Simon Lenton

Drug and Alcohol Review, 2004, 23, (2), 223-233.

Windows of opportunity for changing drug laws open infrequently and they often close without legislative change being affected. In this paper the author, who has been intimately involved in the process, describes how evidence-based recommendations to 'decriminalize' cannabis have recently been progressed through public

debate and the political process to become law in Western Australia (WA).

The Cannabis Control Bill 2003 passed the WA Parliament on 23 September. The Bill, the legislative backing behind the Cannabis Infringement Notice (CIN) Scheme, came into effect on 22 March 2004. This made WA the fourth Australian jurisdiction, after South Australia, the Australian Capital Territory and the Northern Territory, to adopt a prohibition with civil penalties scheme for minor cannabis offences.

This paper describes some of the background to the scheme, the process by which it has become law, the main provisions of the scheme and its evaluation. It includes reflections on the role of politics and the press in the process. The process of implementation and evaluation are outlined by the author, foreshadowing an ongoing opportunity to understand the impact of the change in legislation

Governing street-based injecting drug users: A critique of heroin overdose prevention in Australia

David Moore

Social Science and Medicine, 2004, 59, (7), 1547-1557.

This article provides a critical analysis of existing approaches to the prevention of heroin overdose in Australia. It draws on almost two years of ethnographic research with street-based injecting drug users, street-based sex workers and service providers in Melbourne, Australia's second largest city, and on recent anthropological and sociological work on governmentality.

The substantive sections of the article demonstrate that: (1) heroin overdose prevention in Australia contains implicit or explicit assumptions of rationality and personal autonomy, continues to emphasise individual behaviour change and inscribes a self-disciplined, self-aware, self-regulating subject; and (2) ethnographic data on the social, cultural and economic realities – the 'lived experience' – of street-based injecting drug use and sex work suggest that much overdose prevention is irrelevant or inappropriate.

The paper concludes by arguing that the 'chaotic' practices of street-based IDUs and sex workers arise in response to particular 'risk environments', and that individually focused overdose prevention strategies will prove ineffective if the macro- and micro-aspects of risk environments remain unaddressed.

Under-reporting of alcohol consumption in household surveys: a comparison of quantity-frequency, graduated-frequency and recent recall

Tim Stockwell, Tanya Chikritzhs, Mark Cooper -Stanbury, Paul Catalano and Cid Mateo

Addiction, 2004, 99, 1024-1033.

Aim: To compare alternative survey methods for estimating a) levels of at risk alcohol consumption b) total volume of alcohol consumed per capita in comparison with estimates from sales data and investigate reasons for under-reporting.

Setting: The homes of respondents who were eligible and willing to participate.

Participants: 21,674 Australians aged 14 and older.

Design: A 2001 national household survey of drug use, experiences and attitudes with weights applied for age, sex, geographic location and day of week of interview.

Measures: Self-completion questionnaire using Quantity-Frequency and Graduated-Frequency methods plus two questions about consumption 'yesterday': one in standard drinks, another with empirically-based estimates of drink size and strength.

Results: The highest estimate of age 14+ per capita consumption of 7.00 litres of alcohol derived from recall of consumption 'yesterday' or 71% of the official estimate. When amount consumed 'yesterday' was recalled in standard drinks this estimate was 5.27 litres. Graduated-Frequency questions yielded higher estimates than did Quantity-Frequency questions both for total volume (5.25 v 4.34 litres) and also for the proportion of the population at risk of long-term alcohol-related harm (10.6% v 8.1%). With the detailed 'yesterday' method 61% of all consumption was on heavy drinking days.

Conclusions: Questions about typical quantities of alcohol consumed can lead to underestimates, as do questions about drinking 'standard drinks' of alcohol. Recent recall methods encourage fuller reporting of volumes, enable use of empirically derived estimates of alcohol content of drinks and accurate estimates of unrecorded consumption. However, they do not capture longer-term drinking patterns. It is recommended that both recent recall and measures of longer term drinking patterns are included in national surveys.

recent publications

MONOGRAPHS AND TECHNICAL REPORTS

Breen, C., Degenhardt, L., Roxburgh, A., Bruno, R., Fetherston, J., Jenkinson, R., Kinner, S., Moon, C., Proudfoot, P., Ward, J. and Weekley, J. (2004). *Australian Drug Trends 2003: Findings from the Illicit Drug Reporting System (IDRS)*. NDARC, Sydney.

Gray, D. (2004). *Report on the Alcohol and Other Drugs Forum on Priorities for the Delivery of Treatment Services Across the Northern Territory*. National Drug Research Institute, Curtin University of Technology, Perth, Western Australia.

Gray, D. and Stearne, A.E. (2004). *Makin Tracks: Final Evaluation Report*. National Drug Research Institute, Curtin University of Technology, Perth, Western Australia.

Gray, D., Watts, S. and Haines, B. (2004). *Alcohol and Other Drug Education and Training for Indigenous Workers: A Literature Review*. Aboriginal Drug and Alcohol Council and National Drug Research Institute, Curtin University of Technology, Perth, Western Australia.

Loxley, W., Toumbourou, J. and Stockwell, T.R. (2004). *The Prevention of Substance Use, Risk and Harm in Australia. A Review of the Evidence. Summary*. Australian Government Department of Health and Ageing.

Loxley, W., Toumbourou, J., Stockwell, T.R., Haines, B., Scott, K., Godfrey, C., Waters, E. and Patton, G., Fordham, R., Gray, D., Marshall, J., Ryder, D., Siggers, S., Sanci, L. and Williams, J. (2004). *The Prevention of Substance Use, Risk and Harm in Australia: A Review of the Evidence*. National Drug Research Institute and

the Centre for Adolescent Health, Curtin University of Technology, Perth, Western Australia.

McBride, N., Farrington, F. and Kennedy, C. (2004). *The School Health and Alcohol Harm Reduction Project (SHAHRP) National Dissemination Project - Final Report*. National Drug Research Institute, Curtin University of Technology, Perth, Western Australia.

McBride, N., Farrington, F. and Kennedy, C. (2004). *The SHAHRP National Dissemination Project. Final Report*. National Drug Research Institute, Curtin University of Technology, Perth, Western Australia.

Young, D.J., Stockwell, T.R., Cherpitel, C., MacDonald, S., Borges, G. and Giesbrecht, N. (2004). *Emergency Room Injury Presentations as a Surrogate Measure of Alcohol-related Problems in the Community: A Multilevel Analysis of an International Study*. National Drug Research Institute, Curtin University of Technology, Perth, Western Australia.

PUBLISHED ARTICLES, CHAPTERS AND BOOKS

Clough, A., Cairney, S., d'Abbs, P., Parker, R., Maruff, P., Gray, D. and O'Reilly, B. (2004). Measuring exposure to cannabis use and other substance use in remote Indigenous populations in northern Australia: A 'community epidemiology' approach using proxy respondents. *Addiction Research and Theory*, 12, (3), 261-274.

Lenton, S. (2004). Pot, politics and the press - reflections on cannabis law reform in Western Australia. *Drug and Alcohol Review*, 23, (2), 223-233.

McBride, N. and Farrington, F. (2004). School Health and Alcohol Harm Reduction Project. Changing students' alcohol related behaviours through classroom lessons. *Education and Health*, 22, (1).

McBride, N. and Farrington, F. (2004). School Health and Alcohol Harm Reduction Project. *Education and Health*, 22, (2), 19-23.

Midford, R. and Cooper, M. (2004). The Party Safe Project - How local people can work together for health improvements in a country town. *Healthway News*, (36). 12-13.

Moore, D. (2004). Governing street-based injecting drug users: A critique of heroin overdose prevention in Australia. *Social Science and Medicine*, 59, (7), 1547-1557.

Moore, D. and Dietze, P. (2004). Overdose prevention and street-based injecting drug use: Why we're heading in the wrong direction. In Harper, K. *Services Directory for Drug and Alcohol Services*. Fitzroy Legal Service, Fitzroy. 288-290

Stockwell, T.R. (2004). Responsible alcohol service: Challenging society and the law. *Of Substance*, 2, (2). 20-23

Stockwell, T.R., Donath, S., Cooper-Stanbury, M., Chikritzhs, T., Catalano, P. and Mateo, C. (2004). Under-reporting of alcohol consumption in household surveys: A comparison of quantity-frequency, graduated-frequency and recent recall. *Addiction*, 99, 1024-1033.

Stempel, P., Siggers, S., Gray, D. and Stearne, A.E. (2004). *Indigenous Drug and Alcohol Projects: Elements of Best Practice*. ANCD Research Paper No. 8. Australian National Council on Drugs, Canberra.

Public Conference

Community action as a means of preventing alcohol and other drug problems

This conference will be convened in conjunction with the triennial Kettil Bruun Society thematic meeting to further develop the scientific understanding of community action as a means of preventing alcohol and other drug problems. It will feature presentations from a number of national and international researchers and project implementers.

Where:	Perth, Western Australia
When:	Friday, 4th March
Cost:	A\$165 (incl. GST), morning tea and lunch included
Conference Convener:	Associate Professor Richard Midford
Convening Organisation:	National Drug Research Institute (NDRI)

Further information on venue, topics and presenters will be available in October 2004.

Please register your interest with Pauline Taylor-Perkins, email P.Taylor-Perkins@curtin.edu.au to receive conference updates and registration details.

staff list

National Drug Research Institute

Staff as at 1 August 2004

Dennis Gray	Acting Director, Associate Professor
Simon Lenton	Deputy Director, Senior Research Fellow
Fran Davis	Business Manager
Wendy Loxley	Associate Professor
Richard Midford	Associate Professor
Nyanda McBride	Senior Research Fellow
David Moore	Senior Research Fellow
Susan Carruthers	Research Fellow
Tanya Chikritzhs	Research Fellow
Ed Garrison	Research Fellow
Francoise Chanteloup	Research Associate
James Fetherston	Research Associate
Richard Pascal	Research Associate
Brooke Sputore	Research Associate
Anna Stearne	Research Associate
Philippa Greaves	Clerical Officer
Maggie Halls	Resource Officer
Paul Jones	Computer Systems Officer
Moira Saunders	Media Relations Intern
Pauline Taylor-Perkins	Administrative Assistant
Sheridan Webb	Media Liaison Officer
Susan Wilson	Secretary
Alison Dale	PhD Student
Robyn Dwyer	PhD Student
Penny Heale	PhD Student
Jane Ulrik	PhD Student
Celia Wilkinson	PhD Student

Adjunct Appointments

Emeritus Prof David Hawks	Professorial Fellow
Prof Kathryn Graham	Professor
Dr Steve Allsop	Professorial Fellow
Prof Eric Single	Professor
Dr Sherry Siggers	Associate Professor
Dr Richard Fordham	Senior Research Fellow
Dr Toni Makkai	Senior Research Fellow
Mr Kevin Boots	Research Fellow
Mr Neil Donnelly	Research Fellow

Honorary Staff

Prof Colin Binns	Professorial Fellow
Dr Peter d'Abbs	Senior Research Fellow

feedback & subscriptions

We welcome your feedback on all issues discussed in CentreLines. If you would like to write to us, please send all correspondence to the Editor at the address below.

If you currently subscribe to CentreLines and require future issues to be sent to a new address, please fill out the Change of Address form.

If you would like to be included on the CentreLines subscription list, please fill out the New Subscriber form. Please indicate on the form whether you wish to receive all issues, or only those focusing on treatment (NDARC issues) or prevention (NDRI issues).

Please return completed forms to:

CentreLines, National Drug Research Institute
Curtin University of Technology, GPO Box U1987, Perth WA 6845
Fax (08) 9266 1611

New Subscriber Details

Please add me to the mailing list for my free copies of *CentreLines*.

Name: Ms / Mr / Dr _____
Title: _____
Organisation: _____
Department: _____
Address: _____
Postcode: _____
Phone No: _____
Fax No: _____
Issues Required: NDARC NDRI Both

Change of Address

Please alter my details on the mailing list for my free copy of *CentreLines*.

Name: Ms / Mr / Dr _____
Title: _____
Organisation: _____
Department: _____
Address: _____
Postcode: _____
Phone No: _____
Fax No: _____
Issues Required: NDARC NDRI Both

National Drug Research Institute
Curtin University of Technology
GPO Box U1987 Perth WA 6845
www.ndri.curtin.edu.au

National Drug and Alcohol Research Centre
University of New South Wales
Sydney NSW 2052
www.ndarc.med.unsw.edu.au