

# centre lines

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## issuing **forth**

Does alcohol advertising impact on young people's drinking?



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## contents

<b>edspace</b> .....	1
<b>headspace</b> .....	2
Steve Allsop asks, "What do alcohol promotions really do?"	
<b>issuing forth</b> .....	2
Matthew Winter and Rob Donovan review the alcohol industry's evidence on the impact of alcohol advertising on young people	
<b>NDRI news</b> .....	4
■ 20th anniversary research symposium	
■ NDRI team wins top university award for practical solutions to Indigenous alcohol and drug issues	
■ NDRI researcher wins APSAD peer award	
<b>project notes</b> .....	5
■ An examination of injecting drug use sites in Vancouver: The influence of social and physical context on drug-related harms and public health interventions	
■ Enhancing the management of alcohol-related problems among Indigenous Australians	
■ Investigating the efficacy of pharmaceutical cessation aids in naturalistic settings	
■ Illicit Drug Reporting System	
■ Ecstasy and Related Drugs Reporting System	
<b>abstracts</b> .....	6
Summaries of recently published articles	
<b>recent publications</b> .....	7
<b>staff list</b> .....	8

## ed**space**

Welcome to the final issue of *CentreLines* for 2006.

In this edition we are very pleased to include contributions from some of our 'new' Tier 1 colleagues, (see *CentreLines* Issue 19, August 2006, page 4) Professor Rob Donovan and Geoffrey Jalleh, from the Centre for Behavioural Research in Cancer Control at Curtin.

The main theme for this issue of *CentreLines* is the controversial area of alcohol advertising and promotion. In *Headspace* NDRI Director Steve Allsop discusses some of the issues surrounding the relationship between alcohol promotion and hazardous drinking. In *Issuing Forth*, Rob Donovan, together with colleague Matthew Winter from Curtin's School of Marketing, dispute the argument that alcohol advertising has no influence on alcohol consumption amongst young people.

*Project Notes* includes an item by Geoffrey Jalleh and colleagues, outlining a new NHMRC-funded study to investigate the efficacy of pharmaceutical cessation aids for tobacco smoking in naturalistic settings.

We hope that you enjoy the final issue of *CentreLines* for 2006, and offer you our best wishes for a safe and happy festive season.

**Rachael Lobo**  
Editor

**NDRI**  
national drug research institute

# headspace

## Alcohol promotion and hazardous drinking

Much drug research is conducted and interpreted in a contentious environment. For example, research into the impact of alcohol promotion is often published and interpreted along partisan lines. There are those who claim that advertising does not contribute much to drinking behaviour – it might influence brand preference, but it does not influence decisions such as whether to drink, or when and how much might be drunk on any given occasion by individuals or groups. Interestingly, some of these same people endorse mass education and marketing campaigns as preferred methods to prevent and reduce alcohol related harm. Alternatively, many of those who reasonably interpret the available evidence to indicate that mass media campaigns do little to prevent or reduce alcohol problems will argue that alcohol advertising and promotions contribute to hazardous drinking. Observers who are unfamiliar with the field might justifiably be somewhat confused.

As Winter and Donovan indicate in *Issuing Forth* in this issue of *CentreLines*, one of the problems is that assessing the impact of alcohol advertising and other promotions is no easy task. Such promotions occur in a highly complex and changing environment where there are myriad influences on drinking behaviours. Unfortunately, many investigations are not capable of answering

the sophisticated questions of how advertising might have an impact on the whole population or on subgroups such as young people.

Alcohol advertising and other promotions are part of the fabric of Australian media, sport, leisure and entertainment (witness the number of times that alcohol advertisements are identified as the most popular/most recalled/most amusing). Concern about the possible impact of these promotions has resulted in a number of countries controlling when they can be shown (eg not to be broadcast when children are likely to comprise a large proportion of the audience) and controlling their nature (eg alcohol consumption should not be associated with business or sexual success).

In Australia, many commentators have complained that voluntary codes of conduct are variously interpreted and/or sometimes ignored. There have been some spectacular examples of the latter, including a relatively recent campaign by a well-known brewer, promoting their homebrew kits, who invited us to 'drink her pretty for less than \$10.00'. If we are concerned about such breaches, a large proportion of the population appears to be unaware of the complaints procedure. When complaints have been made, the adjudication process is often slow and many campaigns are



likely to be over by the time a determination is reached. It appears that while some members of the relevant industries comply with the voluntary codes, others simply ignore them, or interpret them in a manner that is, at best, subjective.

The extent and costs of alcohol related problems, and the pervasiveness of alcohol advertising and other promotions, demand that we have informed debate about the impact of the various promotions. Winter and Donovan highlight some of the methodological challenges we must meet to ensure that we develop a quality evidence base. However, it should not just be an imperative for those in public health to demonstrate that alcohol promotion contributes to undesirable drinking behaviour – the alcohol and advertising industries have a responsibility to ensure that, through their promotions, they do not contribute to hazardous drinking.

**Steve Allsop**

# issuing forth

## Does alcohol advertising impact on young people's drinking? A review of the alcohol industry's case

*Does alcohol advertising increase alcohol consumption amongst adolescents? The alcohol industry maintains that advertising has no influence on alcohol consumption amongst youth. It bases its stance largely on the findings of a substantial number of studies that use market-response models and econometric techniques to determine the impact of variations in aggregate alcohol advertising expenditure on aggregate alcohol sales over time. However, a review of this body of research has identified a number of flaws that collectively raise serious doubts as to the worth of the alcohol industry's evidence.*

### Why decreasing alcohol consumption levels amongst teenagers and young adults is so important

The harms associated with alcohol consumption amongst youth are well-established, widely recognised, and have been described as an "an international public health crisis"<sup>1</sup>. Alcohol abuse is the leading illegal drug problem amongst youth in the Western world and one of the leading causes of premature death amongst adolescents, with the economic costs associated with underage drinking in the USA being estimated at \$53 billion annually.

The extent of the harms associated with alcohol abuse amongst youth is sobering. Alcohol's causal role in a range of physical, mental and social harms to adolescents has been clearly established. In the shorter term, alcohol consumption has been found to directly relate to elevated risk of adolescent mortality and morbidity from violence, depression, suicide, homicide, eating disorders, substance abuse, "date-rape", health-related problems relating to risky and unplanned sexual behaviours, and reckless driving. Additionally, alcohol consumption amongst adolescents has been directly linked to increased social harms including property damage, unplanned pregnancies, increased criminal behaviour, increased conflict with parents, poorer academic performance, strained personal relationships, as well as harm to related parties such as those in other vehicles involved in motor vehicle accidents, victims of violence and family and friends of the drinker. In the longer term, adolescents have a greater risk of physiological harm from alcohol abuse than do mature adults, with virtually no organ within the body immune to its harm. For example, adolescents have a greater risk of memory loss and decreased bone growth, neurological damage, and alcohol addiction developing later in life.



**Matthew Winter**



**Rob Donovan**

### Does alcohol advertising influence alcohol consumption amongst adolescents?

Given the levels of harm from alcohol consumption experienced by youth and the societies in which they live, substantial research has been conducted to identify the key factors influencing levels of alcohol consumption. The influence of alcohol advertising has been particularly well researched, perhaps because of its ongoing prominence in the mass media. In the ongoing debate about the influence of alcohol advertising on alcohol consumption amongst youth, findings that alcohol advertising positively influences alcohol consumption and related attitudes, intentions and knowledge, have principally been based on studies with individuals that utilise an experimental design. Conversely, the alcohol industry and related stakeholders have relied primarily on the results of a number of market-level studies based on industry-level market data.

### Market-response models

Market-response studies adopt an econometric approach to determine the effect an independent variable (eg advertising expenditure) has on a dependent variable (eg alcohol consumption) over time, whilst controlling for other independent variables (eg price, consumer income, distribution, restrictions and other factors).

Different econometric approaches have been used to estimate the effect of alcohol advertising on total alcohol consumption, with the majority of such studies failing to find any significant relationship between alcohol advertising and alcohol consumption. More than a dozen of these market-response studies have used aggregate / industry-level advertising expenditure data and aggregate-level data on total alcohol sales. They have repeatedly found that variations in total advertising expenditure have an insignificant effect on total alcohol consumption, and have subsequently concluded that no relationship exists between alcohol advertising and alcohol demand.

However a small number of market-response studies have yielded contrasting results, based on data from much smaller geographic areas. Utilising cross-sectional measures of levels of alcohol advertising within specific geographic locations, three studies found that increases in advertising expenditure in a particular geographic location did result in corresponding (and relatively immediate) increases in overall alcohol consumption within that area.

### The impact of the findings of the market-level studies

The elusiveness of consistent market-level findings in demonstrating that alcohol advertising increases alcohol consumption has been used by alcohol advertisers and related stakeholders to reject suggestions that alcohol advertising can increase alcohol consumption amongst youth. Instead they maintain that alcohol advertising's principal role is to increase brand equity and maintain or increase market share against rivals. Findings of the aggregate-level market response studies have subsequently been used to support the industry's view that there are no conclusive findings relating to alcohol advertising contributing to increased consumption amongst children and adolescents, and other vulnerable consumer groups.

The alcohol industry has further claimed that much policy relating to the regulation of alcohol advertising has been formulated in the absence of any scientific basis for linking advertising to the consumption of alcohol, and have used the findings of the industry-level market response studies to influence policy conclusions and media commentary in various countries around the world. (For example: the Health Minister in the United Kingdom publicly stated in 2003 that "there is no evidence to suggest that there is a clear link between the advertising and promotion of alcoholic drinks and alcohol consumption or misuse"; a spokesperson for the Beer Institute in Washington DC commented that "ads help drive brand preference among adults, but the evidence

shows that they do not have any deleterious effect on youth."; and a journalist in an alcohol industry magazine wrote that "alcohol ads maintain or increase market share against rival drink brands, rather than increasing overall consumption. It's a simple business truth, but one that some evidently still need to hear.")

### Methodological and theoretical flaws associated with the use of market-response models

However, whilst the aggregate level market-response studies provide the alcohol industry with 'ammunition' to use in the debate on the impact of alcohol advertising on alcohol consumption amongst youth, the validity of using aggregate market-response models to establish the impact of alcohol advertising on alcohol consumption has repeatedly been questioned. From a methodological perspective, the confounding effects of variations in social, cultural and economic influences between and within the data used, as well as the considerable variation in how individual researchers decide how to handle missing or imperfect data at the aggregate level, increase the complexity of such modelling and necessitates assumptions being made that decrease the generalisability of any findings. Variations in the content, execution and media mix utilised within alcohol advertising are ignored (ie all ads are assumed to have the same effect), as is the subsequent impact of any advertising restrictions or price competition within the industry (ie alcohol advertising restrictions have been found to result in increased price competition, with lower prices in turn resulting in increased demand.). Market response models also ignore research demonstrating consumers are actively involved in the communication process, and ignore complications such as advertising wear-out and feedback (ie advertising's impact increases to a certain level of frequency of exposure, after which it has little additional effect, so variation in advertising expenditure after this point will have little or no impact on demand.)

Saffer<sup>2</sup> identified perhaps the major flaw associated with the use of aggregate-level national advertising expenditures that have been used in most market-response studies. Data used for these studies are almost exclusively from mature markets, hence there is relatively little variation in expenditure over time as a proportion of the total. What variation there is occurs in the area of diminishing marginal returns on advertising spend, where each additional dollar spent is generating less and less impact on the target audience. Such data are widely considered inappropriate for use in regression analysis because of the lack of statistically meaningful variation within the data, and so cannot reliably be used to determine the impact of alcohol advertising on total alcohol consumption within a given population.

The theoretical basis for using aggregate-level market response models to determine the impact of advertising in general (as opposed to alcohol advertising specifically) has been questioned by a number of researchers, based on the consistently low advertising elasticities generated

and observed industry practice. If advertising expenditures generate relatively low increases in sales - advertising elasticities identified by such studies are generally in the range of 0.0 to 0.20 - then advertising expenditure would decrease over time as marketers diverted these resources into more productive marketing initiatives rather than advertising which generated insufficient sales to recover the costs of that advertising. Instead, advertising expenditures continue to rise in the long-term, providing evidence that such models fail to adequately describe the relationship between advertising and sales.

Another flaw in the use of market-response models to make conclusions about the influence of alcohol advertising on adolescents (or other vulnerable groups of consumers) is that market-level findings cannot be generalised across all individuals and sub-groups of individuals within a market. There is no basis to an assumption of homogeneity within the market for alcohol. Hastings et al (p298)<sup>3</sup> state: "Arguably the slight and inconsistent influence of alcohol advertising on population level consumption reported in many econometric studies actually reflects an averaging of minimal influences on older, established drinkers and larger effects on immature younger drinkers". Research findings support this, with Dunn and Yniguez<sup>4</sup> establishing that alcohol advertising's greatest impact is specifically on younger, inexperienced drinkers who use the content of alcohol advertising as a key influence on their alcohol-related decisions. Alcohol advertising's influence on levels of consumption subsequently decreases as consumers' own experiences play a greater role in consumption decisions.

The deductive reasoning advanced by alcohol companies and related stakeholders, that, because there is no significant relationship between aggregate alcohol advertising and aggregate alcohol consumption, there is therefore no significant relationship between alcohol advertising and alcohol consumption amongst youth, appears fallacious. Additionally, the assumption underpinning the industry's argument, that individual consumers of alcohol within a market are homogenous in terms of response to alcohol advertising, directly contradicts the alcohol industry's own standard marketing practices associated with target marketing and market segmentation.

### Conclusions and recommendations

Until disaggregated market data specific to youth become available, the use of market-response models to determine the impact of alcohol advertising on adolescents (and other vulnerable consumer groups) appears inappropriate. However, few authors acknowledge the methodological and theoretical limitations associated with this approach. It is suggested that inherent flaws in this approach should be acknowledged by researchers to a far greater extent than has been the case to date.

Furthermore, a more appropriate approach appears to lie in the use of consumer-based research designs exploring the impact of

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exposure to alcohol advertising on the individual – an approach highly consistent with the methodology adopted by alcohol marketers themselves when evaluating and seeking to maximise the impact and effectiveness of their own advertising campaigns.

**Matthew Winter\* & Rob Donovan\*^**

\* Innovation in Social Marketing and Advertising Policy AORE, School of Marketing, Curtin University of Technology

^ National Drug Research Institute and Centre for Behavioural Research in Cancer Control, Division of Health Sciences, Curtin University of Technology

## References

1. **Jernigan, D.H. and Mosher, J.F.** (2005) Perspectives. *Journal of Public Health Policy*, 26, 287-291.
2. **Saffer, H.** (1996) Studying the effects of alcohol advertising on consumption. *Alcohol Health and Research World*, 20/4, 266-272.
3. **Hastings, G., Anderson, S., Cooke, E., and Gordon, R.** (2005) Alcohol marketing and young people's drinking: A review of the research. *Journal of Public Health Policy*, 26, 296-311.

4. **Dunn, M. and Yniguez, R.** (1999) Experimental demonstration of the influence of alcohol advertising on the activation of alcohol expectancies. *Experimental and Clinical Psychopharmacology*, 7/4, 473-483.

A more comprehensive version of this paper is available by emailing [L.Fielder@curtin.edu.au](mailto:L.Fielder@curtin.edu.au)

# NDRI news

## 20th Anniversary International Research Symposium



**Day 1 speakers (from left): Tim Stockwell, Margaret Hamilton, Sally Casswell, Neal Blewett, Kate Graham and Eric Single**

In September, to mark the 20<sup>th</sup> year of its operation, the National Drug Research Institute hosted a 2-day international research symposium in Perth. The event, *“Responding to drug problems: Lessons from the past, future challenges and opportunities”*, was supported by the Australian Government Department of Health and Ageing, the WA Drug and Alcohol Office and the Alcohol Education and Rehabilitation Foundation.

The symposium brought together 150 participants including leading academics, prevention specialists, law enforcers, and policy makers. Delegates listened to an eminent collection of speakers from across Australia, New Zealand, Canada, the USA and the Philippines talk on drug and alcohol policy, prevention and harm minimisation.

Keynote speakers reflected on the aims of the national drug strategy, the achievements of the drug and alcohol research sector in Australia and examined current challenges and future directions for the field.

Papers from the meeting will be available on the NDRI website at [www.ndri.curtin.edu.au](http://www.ndri.curtin.edu.au) and there are also plans to publish a special issue of *Drug and Alcohol Review* based upon selected symposium presentations.

## NDRI team wins top university award for practical solutions to Indigenous alcohol and drug issues



**Indigenous Research Team with Curtin VC Jeanette Hackett (far right)**

NDRI's Indigenous Research Team has won a Curtin University of Technology Vice-Chancellor's 2006 Award for Excellence for its work addressing the prevention of alcohol and other drug misuse in Indigenous communities. Curtin Vice-Chancellor Professor Jeanette Hackett said the Awards for Excellence recognise and reward outstanding contributions to the University and the wider community.

“The work of NDRI's Indigenous Research Team is widely recognised as having a practical impact in addressing Indigenous drug and alcohol drug issues in this country,” Professor Hackett said. “Particularly impressive is the team's willingness and ability to work with Indigenous communities to help build their capacity to address such issues themselves.”

The VC's award follows recognition of the Indigenous Research Team for Excellence in Research at the National Drug and Alcohol Awards in June. The team comprises Associate Professor Gray, Professor Sherry Siggers (also Director of the Centre for Social Research at Edith Cowan University), Anna Stearne, Donna Campbell, Jane Ulrik, Violet Bacon and Ed Garrison.

## NDRI researcher wins APSAD peer award



**Tanya Chikritzhs**

Tanya Chikritzhs, a Senior Research Fellow at NDRI, has won a coveted Australasian professional award voted on by her peers. Dr Chikritzhs was awarded the Australasian Professional Society on Alcohol and other Drugs (APSAD) Early Career Award at the recent APSAD conference in Cairns.

The award recognises an outstanding contribution to reducing the harms associated with alcohol and other drug use in the region. Dr Chikritzhs won the award for producing research that has had significant influence on alcohol policy and practice. Her work includes the National Alcohol Indicators Project, which measures the harm caused by alcohol in Australia.

In accepting the award, Dr Chikritzhs said: “It's a great honour to have your work recognised by your peers. It's very important to me that our research makes a real difference in the community by informing the way we minimise and respond to the harm caused by our favourite drug, alcohol.”

# project notes

An examination of injecting drug use sites in Vancouver: The influence of social and physical context on drug-related harms and public health interventions

**Will Small, Mark Tyndall, Jean Shoveller and David Moore**

Injecting drug use may result in severe health consequences including increased risk of viral infections such as HIV and hepatitis C, soft tissue infections and drug overdose. Recently, with increasing attention being paid to the impact of environment on individual and public health, intervention efforts for injecting drug users have moved beyond the modification of individual behaviour and focused on modifying the environments in which people inject drugs. These structural interventions require knowledge of social and ecological factors which influence health and risk behaviour among injecting drug users.

This project is using ethnographic methods to investigate three types of injecting settings in the Downtown Eastside of Vancouver, Canada: private injecting spaces (such as homes), public injecting spaces (such as alleys), and Vancouver's supervised injecting facility, InSite. The project is examining how the social and physical context of each setting influences the ability of injecting drug users to employ HIV and HCV-prevention measures and safer injecting practices. The findings of this research will build important knowledge about the health vulnerabilities of injecting drug users in Vancouver's Downtown Eastside. Also, this research will provide information on the impact of current interventions, and inform future structural interventions addressing injecting drug use.

Enhancing the management of alcohol-related problems among Indigenous Australians

**Dennis Gray, Steve Allsop, Sherry Saggars, Ted Wilkes and Coralie Ober**

The objective of this multi-stage research program is to enhance the access of Indigenous Australians to quality treatment for alcohol-related problems. In Stage 1 of the project an expert advisory committee will identify priority intervention areas and a call will be made for the submission of expressions-of-interest in conducting research projects in those areas in collaboration with Indigenous community-controlled organisations. On the basis of these submissions, we will commission the preparation of reviews and research proposals in six priority areas which will be undertaken in Stage 2. In Stage 3 these proposals will be independently reviewed and presented at a national workshop. Depending on the balance between priorities, project costs and available resources, five or six projects will be selected for funding. In Stage 4, the commissioned projects will be undertaken over a 12 to 18 month period. In Stage 5, based on the research findings, we will develop a comprehensive set of recommendations for enhancing the management of alcohol-related problems and a plan for implementation of those recommendations.

Investigating the efficacy of pharmaceutical cessation aids in naturalistic settings

**Geoffrey Jalleh, Rob Donovan, Ron Borland, Mike Daube, Owen Carter and Mohammad Siahpash**

Currently around 3 million Australians, or 19.5% of people aged 14 years and over, smoke tobacco daily. Tobacco smoking is a major risk factor for coronary heart disease, stroke, peripheral vascular disease and a variety of cancers. It is responsible for the greatest disease burden in Australia, accounting for around 12% of the total burden in males and 7% in females. At any one time, over one-third of Australian smokers reportedly intend to quit within the next six months. However the vast majority of attempts to quit are unsuccessful (around 90%). A number of pharmaceutical cessation aids have become available to Australian smokers within the past decade, including nicotine replacement therapy (NRT) in the form of patches, gum, lozenges, nasal sprays, and the antidepressant bupropion. Blinded randomised controlled trials have consistently shown that smokers are around two to three times more likely to quit if using these aids. NRT has been available to Australian smokers without the need for a medical prescription since 1997 and bupropion has been subsidised by the Pharmaceutical Benefits Scheme (PBS) since 2001. The potential benefit of these aids is great, and if realised, justify the large amount of money spent on such (the Commonwealth Government has spent in excess of \$133 million subsidising cessation pharmaceuticals in the past four years alone). However, it is not clear whether the wide availability of these pharmaceutical cessation aids has helped increase the rate of smoking cessation in Australian smokers. To date the evidence is equivocal and there is a strong case to be made that pharmaceutical cessation aids are far less effective in naturalistic settings than they are in clinical trials. The Centre for Behavioural Research in Cancer Control (CBRCC) has been awarded \$575,000 by the National Medical and Health Research Council (NHMRC) to conduct a combined longitudinal and cross-sectional telephone survey of 1,300 Australian smokers staggered on a quarterly basis over three years to capture information about their attitudes, beliefs and manner in which they use cessation pharmaceuticals and relate these to their quit attempts, non-quit attempts and relapses. The aim of the study is to determine: whether cessation pharmaceuticals are indeed less effective in naturalistic settings than suggested by clinical trials; whether the expectancies of smokers towards cessation pharmaceuticals is predictive of their subsequent use; whether use of cessation pharmaceuticals in conjunction with behavioural counselling is more efficacious; and whether greater compliance with cessation pharmaceutical treatment regimes is predictive of higher rates of successful quitting. Data collection is scheduled to commence in January 2007.

Illicit Drug Reporting System

**James Fetherston and Simon Lenton**

The Illicit Drug Reporting System (IDRS) has now completed its seventh year of operation in Western Australia. Commencing in 1999 it initially used data collected from key experts such as drug

counsellors, emergency department workers and members of the law enforcement sector combined with existing formalised data sources like phone calls to the Alcohol and Drug Information Service (ADIS), police seizures and purity analysis and callouts to overdoses. The following year the project was expanded to include interviews with regular injecting drug users (IDU) as a valuable sentinel population, triangulating this new information with the data already collected.

Funded by the Australian Government Department of Health and Ageing, the IDRS seeks to act as an "early warning system" by timely detection of emerging trends in illicit drug markets. Operating in capital cities in all Australian jurisdictions, over the years the IDRS has demonstrated how the illicit drug markets of each city, Perth being no exception, possess features that distinguish each of them from other drug markets in Australia.

Findings from the 2006 WA IDRS reveal ongoing impacts of the continuing heroin shortage or "drought". Whilst heroin remains the most commonly cited drug of choice amongst the sample, user reports of the drugs' purity remain poor and its availability has reportedly declined. Furthermore, WA remains one of the most expensive, if not the most expensive jurisdiction in which to purchase heroin in Australia. These factors appear to have resulted in a fall both in numbers of injecting drug users reporting having used heroin in the six months prior to the survey and also to their rates of use of the drug.

In response to the ongoing shortage of affordable high quality heroin, 2006 witnessed a continuation of trends observed the previous year with regards to the increasing use of other non-heroin opiates, in particular pharmaceutical preparations. Although gradual increases in the use of this class of drugs had been observed in previous years, 2006 became the first year in which these other opiates displaced heroin as the drugs most injected amongst the IDU sample.

The 2006 IDRS IDU survey also incorporated a module investigating prevalence of blood-borne viruses (BBV) such as HIV, HCV and HBV amongst the IDU sample. It also sought to examine rates of testing, vaccination and drug users' motivations for doing so. Findings from the BBV module were presented at the 2006 Drug Trends Conference in Cairns in November.

Ecstasy and Related Drugs Reporting System

**Jessica George and Simon Lenton**

The Ecstasy and Related Drugs Reporting System (EDRS), formerly known as the Party Drugs Initiative (PDI), has been operating in Western Australia (WA) since 2003. The EDRS developed from the Illicit Drug Reporting System (IDRS) and together the projects act as complementary early warning systems designed to identify emerging trends in various illicit drug markets and in patterns of use. Like the IDRS, a triangulated approach is used for the EDRS methodology and comprised of: interviews with regular ecstasy users (REU); interviews with "key experts" working in relevant fields such as law enforcement, health and entertainment industries; and statistical data such as drug seizures and analysis of purity. Both projects are conducted on an annual basis in the capital city of every Australian jurisdiction and

## project notes

continued..

coordinated nationally by the National Drug and Alcohol Research Centre (NDARC) in Sydney. In 2006, the EDRS was funded by the Australian Government Department of Health and Ageing.

With regards to the REU samples in WA over the 2003-2006 data collection period, demographics remained largely unchanged. REU were typically in their early twenties, of English speaking background, and had completed at least Year 11 of secondary education. Approximately half the samples had tertiary qualifications and the majority were either employed or studying. General patterns of ecstasy use were also consistent across the WA samples since 2003. On average, ecstasy was used approximately three times a month with two

tablets taken in a typical session. Polydrug use was characteristic across the annual samples with use of other drugs reported both in conjunction with, and independent of, ecstasy use. Over two thirds of REU in all years reported use of alcohol, cannabis, tobacco, speed powder and crystal methamphetamine in the preceding six months.

While the overall prevalence of the use of other substances remained high in 2006, when compared to last year's sample, significant decreases were found in the use of particular drugs. Both lifetime and recent use (last six months) of speed powder significantly decreased in 2006. This corresponded to reports that speed was less available and to a decrease in the proportion of

REU who reported being able to purchase speed from their main dealer. Similar decreases in rates of use were found for recent use of LSD, and for both lifetime and recent use of MDA, ketamine, and inhalants (amyl nitrate and nitrous oxide). However, rates of use of all other drugs, including crystal methamphetamine and cocaine, remained much the same as last year and no significant increases were found for any drug type. While rates of use in WA decreased or did not change from last year, when compared to the national data for 2006, WA continued to exhibit the highest rates of lifetime use for both crystal methamphetamine and pharmaceutical stimulants.

## abstracts

### A survey of regular ecstasy users' knowledge and practices around determining pill content and purity: Implications for policy and practice

**Jennifer Johnston, Monica Barratt, Craig Fry, Stuart Kinner, Mark Stoové, Louisa Degenhardt, Jessica George, Rebecca Jenkinson, Matthew Dunn and Raimondo Bruno**

*International Journal of Drug Policy, 2006, 17 (6), pp 464-472*

**Objective:** To examine the methods used by a sample of regular ecstasy users to determine the content and purity of ecstasy pills, their knowledge of the limitations of available pill testing methods, and how pill test results would influence their drug use behaviour.

**Method:** Data were collected from regular ecstasy users ( $n = 810$ ) recruited from all eight capital cities of Australia. Data were analysed using multiple logistic regression and chi-square ( $\chi^2$ ) tests of association. Open-ended responses were coded for themes.

**Results:** The majority of the sample (84%) reported attempting to find out the content and purity of ecstasy at least some of the time, most commonly asking friends or dealers. Less than one quarter (22%) reported personal use of testing kits. There was a moderate level of awareness of the limitations of testing kits among those who reported having used them. Over half (57%) of those reporting personal use of testing kits reported that they would not take a pill if test results indicated that it contained ketamine and over three quarters (76%) reported that they would not take an "unknown" pill (producing no reaction in a reagent test). Finally, a considerable majority (63%) expressed interest in pill testing should it be more widely available.

**Conclusions:** The majority of regular ecstasy users sampled in this Australian study report

previous attempts to determine the content and purity of pills sold as ecstasy. Although only a small proportion have used testing kits, many report that they would do so if they were more widely available. The results of pill tests may influence drug use if they indicate that pills contain substances which ecstasy users do not want to ingest or are of unknown content. More detailed research examining ways in which pill testing may influence drug use is required to inform evidence-based policy.

### When is a little knowledge dangerous? Circumstances of recent heroin overdose and links to knowledge of overdose risk factors

**Paul Dietze, Damien Jolley, Craig Fry, Gabriele Bammer and David Moore**

*Drug and Alcohol Dependence, 2006, 84, (3), pp 223-230*

**Objectives:** To describe the circumstances surrounding recent heroin overdose among a sample of heroin overdose survivors and the links to their knowledge of overdose risk.

**Methods:** A cross-sectional survey of 257 recent non-fatal heroin overdose survivors was undertaken to examine self-reported knowledge of overdose risk reduction strategies, behaviour in the 12 hours prior to overdose and attributions of overdose causation.

**Results:** Most of the overdoses occurred in public spaces as a result of heroin use within 5 minutes of purchasing the drug. A substantial number of overdoses occurred with no one else present and/or involved the concomitant use of other drugs. While knowledge of at least one overdose prevention strategy was reported by 90% of the sample, less than half of the sample knew any single strategy. Furthermore knowledge of the dangers of mixing benzodiazepines and/or alcohol with heroin was associated with an increased likelihood of such mixing being

reported prior to overdose.

**Conclusions:** While heroin users can articulate knowledge of key overdose risk reduction strategies, this knowledge was not generally associated with a reduction in risk behaviours but was in some cases associated with increased reports of overdose risk behaviours. Further research is required in order to better understand this paradoxical effect, focussing on risk reduction education amenable to the social contexts in which heroin use takes place.

### Engagement, reciprocity and advocacy: Ethical harm reduction practice in research with injecting drug users

**Peter Higgs, David Moore and Campbell Aitken**

*Drug and Alcohol Review, 2006, 25, (5), pp 419-423*

In this paper, we contribute to the ethical challenges of harm reduction-based research by describing and reflecting on our experiences of initiating and maintaining relationships with research participants during an innovative neighbourhood-based study of the social and molecular epidemiology of the hepatitis C virus among injecting drug users over a 2-year period. We show through examples of our work how recruitment to our study had practical value for both researchers and study participants including advocacy and reciprocity. We argue that the recruitment process needed to be flexible, able to cope with the demands of

the street drug market, and that we as researchers need to engage participants in their own environments as much as possible. We conclude with a series of recommendations for other researchers such as the need to employ appropriately skilled researchers who are flexible, innovative and comfortable in street settings, and for the setting of realistic time-frames for preliminary research, data collection and feedback and analysis.

# recent publications

## MONOGRAPHS AND TECHNICAL REPORTS

**Hunt, N., Lenton, S. and Witton, J.** (2006) *Cannabis and mental health: Responses to the emerging evidence*. The Beckley Foundation Drug Policy Programme, London.

**McBride, N., Farrington, F., Meuleners, L. and Midford, R.** (2006) *The School Health and Alcohol Harm Reduction Project (SHAHRP). Details of intervention development and research procedures*. National Drug Research Institute, Perth.

## PUBLISHED ARTICLES, CHAPTERS AND BOOKS

**Allsop, S., Chikritzhs, T. and Rechichi, V.** (2006) Alcohol and teenagers: Risky business. *Issues*, 74, pp 15-19.

**Chikritzhs, T. and Brady, M.** (2006) Substance use in the 2002 NATSISS in assessing the evidence on indigenous socioeconomic outcomes: A focus on the 2002 NATSISS. *The Australian National University*, 26, pp 231-247. ANU E Press, Canberra.

**Degenhardt, L., Black, E., Breen, C., Bruno, R., Kinner, S., Roxburgh, A., Fry, C., Jenkinson, R., Ward, J., Fetherston, J., Weekley, J. and Fischer, J.** (2006) Trends in morphine prescriptions, illicit morphine use and associated harms among regular injecting drug users in Australia. *Drug and Alcohol Review*, 25, pp 403-412.

**Dietze, P., Jolley, D., Fry, C., Bammer, G. and Moore, D.** (2006) When is a little knowledge dangerous? Circumstances of recent heroin overdose and links to knowledge of overdose risk factors. *Drug and Alcohol Dependence*, 84, (3), pp 223-230.

**Higgs, P., Moore, D. and Aitken, C.** (2006) Engagement, reciprocity and advocacy: Ethical harm reduction practice in research with injecting drug users. *Drug and Alcohol Review*, 25, (5), pp 419-423.

**Lenton, S.** (2006) Cannabis, health and the law. In *Proceedings of the Australasian Schizophrenia Conference*, 40, (2), pp A120.

**Johnston, J., Barratt, M.J., Fry, C.L., Kinner, S., Stoové, M., Degenhardt, L., George, J., Jenkinson, R., Dunn, M. and Bruno, R.** (2006) A survey of regular ecstasy users' knowledge and practices around determining pill content and purity: Implications for policy and practice. *International Journal of Drug Policy*, 17, (6), pp 464-472.

**Lenton, S.** (2006). What's the deal on Dope? *Issues*, 74, pp 38-40.

Midford, R. (2006). Preventing alcohol problems in a changing world: What does community action offer? *DrugInfo*, 5, (1), pp 217.

**Midford, R.** (2006) Should parents buy the booze for leavers' week. *The West Australian, Health + Medicine*, 15 November, pp 5.

**Northcote, J. and Lyons, Z.** (2006) Research on homelessness and substance use: Where do we go from here? *Parity*, 19, (8), pp 25.

**Northcote, J., Lyons, Z., Allsop, S., Howard, J. and Evans, L.** (2006) Working with homeless people who use alcohol and other drugs: Devising a resource guide for frontline practitioners. *Parity*, 19, (8), pp 30.



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Dennis Gray	Professor, Deputy Director
Simon Lenton	Associate Professor, Deputy Director
Fran Davis	Business Manager
Colin Binns	Professor
Rob Donovan	Professor
Peter Howat	Professor
Andy Lee	Professor
Wendy Loxley	Associate Professor
Richard Midford	Associate Professor
David Moore	Associate Professor
Tanya Chikritzhs	Senior Research Fellow
Nyanda McBride	Senior Research Fellow
Bruce Maycock	Senior Lecturer
Susan Carruthers	Research Fellow
Owen Carter	Research Fellow
Paul Catalano	Research Fellow
Ed Garrison	Research Fellow
Jocelyn Grace	Research Fellow
Geoffrey Jalleh	Research Fellow
Jeremy Northcote	Research Fellow
Fredrik Welander	Research Fellow
Andrew Joyce	Lecturer
James Fetherston	Research Associate
Jessica George	Research Associate
Zaza Lyons	Research Associate
Richard Pascal	Research Associate
Anna Stearne	Research Associate
Andreia Schineanu	Research Officer
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Paul Jones	Computer Systems Officer
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Robyn Dwyer	PhD Student
Rachael Green	PhD Student
Penny Heale	PhD Student
Amy Pennay	PhD Student
Christine Siokou	PhD Student
Jane Ulrik	PhD Student
Celia Wilkinson	PhD Student

### Adjunct Appointments

David Hawks	Professorial Fellow
Kate Graham	Professor
Sherry Siggers	Professor
Tim Stockwell	Professor
Peter d'Abbs	Associate Professor
Richard Fordham	Senior Research Fellow
Kevin Boots	Research Fellow
Neil Donnelly	Research Fellow
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www.ndri.curtin.edu.au

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University of New South Wales  
Sydney NSW 2052  
www.ndarc.med.unsw.edu.au