

**NATIONAL DRUG AND
ALCOHOL RESEARCH CENTRE
ANNUAL REPORT 2008**



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Published by:

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CONTENTS

About the Centre	2
Chairman's Foreword	3
Advisory Board	4
Director's Report	5
NCPIC Report	6
DPMP Report	7
The Year in Review	8
Management Structure	13
Statistics	14
Postgraduate Program	15
Current Research Projects	16
Projects Completed in 2008	39
Appendices	
Appendix A – Acronyms	50
Appendix B – Staff List	51
Appendix C – Postgraduate Students	53
Appendix D – Research Grants and Funding	55
Appendix E – Seminars	58
Appendix F – Publications	60
Appendix G – Conference Presentations	67
Appendix H – External Lectures, Workshops and Presentations	74

ABOUT THE CENTRE

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

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

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

MISSION STATEMENT

The overall mission of NDARC is:

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

GOALS

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

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

FOREWORD

The more we learn, the more we realise we need to learn more. In my fleeting moments of frustration I am somewhat daunted by the task that still lies ahead. But when I look back over the path we have travelled since the days, thirty three years ago, when I first became involved in the drug and alcohol field, I am cheered by the knowledge that we know so much more than in those dark days of ignorance and prejudice towards the underlying causes, and the treatment and rehabilitation, of those suffering from addiction.

The recent publication of 'Pharmacotherapies for the Treatment of Opioid Dependence', edited by our own Richard Mattick, and co-authored by over forty experts is a stand out example of the role NDARC plays in facilitating knowledge transfer among researchers while providing a knowledge platform for all who seek to be better informed. It exemplifies the high standard that NDARC achieves on behalf of its stakeholders and the wider community. The book does this because it showcases the achievements of not only NDARC, but the other organisations represented by the authors. Furthermore it demonstrates the dedication, balance and integrity of purpose that has taken on the devils of ignorance and prejudice. Unfortunately these are very human devils which have, throughout history, shaped much of our destiny; to our great detriment. It is significant also because it personifies the quest for evidence based understanding of a problem that is so destructive in terms of human life and suffering and immensely costly in a world that is becoming increasingly short of resources to address the challenge.



More than once I have asked myself why, after twenty years of research, some of the seemingly simple questions remain unanswered. As Professor John Strang says in the Foreword to the book, "Today, with access to the extensive literature on this form of (opioid) treatment, decision making can be properly informed. But it is still often difficult to find balanced presentations of the large amount of data and opinions which are already out there in the public domain." It is because science alone is never the sole determinant.

Decision making is driven by many competing agendas, however our role as researchers is to continue the quest for greater and more informed knowledge of the problem area so that our decision makers can, when they turn to the evidence for guidance, have the best evidence available.

Once again I wish to thank those whose dedication has contributed to NDARC's continuing success: the University of New South Wales, the staff who continue to apply themselves with diligence and integrity, our collaborating partners and those nationally and internationally with whom we have so successfully engaged.

At the time of writing I have just learnt of our Director's intention to step down from the position in 2009. I am pleased however that we will not lose his services as a researcher. Richard Mattick's contribution in leading NDARC through a period of rapid growth and high achievement has been of the highest order.

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

The Hon. Kevin Rozzoli, AM
Chairman,
NDARC Advisory Board

ADVISORY BOARD

The Honourable Kevin Rozzoli, AM, Dip Law
Chairman,
NDARC Advisory Board

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Ms Virginia Hart, BA (Hons), M.Clin Psych, LLB(Hons)
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Drug Strategy Branch,
Population Health Division,
Australian Government Department of Health and Ageing

Mr David McGrath
Director,
Mental Health and Drug and Alcohol Programs,
NSW Department of Health

Dr Norman Swan, MBChB, FRCP, DCH, MD (Hon)
Host, The Health Report, Radio National,
Australian Broadcasting Corporation (ABC)

Professor Richard P Mattick, BSc, MPsych (Clinical), PhD
Director,
National Drug & Alcohol Research Centre

DIRECTOR'S REPORT

2008 was the year of review for NDARC. The Board of Management was renamed as the NDARC Advisory Board, the Faculty undertook a review of administrative functions resulting in a number of changes, and following a consultant's report and a formal review of NDARC's structure, five Assistant Directors were appointed, each with their own portfolio areas. A full description of the new structure is to be found under 'Management Structure' later in this report.

NCPIC continued to grow and settle in. As a centre within a centre, Jan Copeland has provided a report on NCPIC on the following page.

NDARC's staff numbers grew by another 20 people to 106 appointed staff, plus additional casuals, conjoints and honorary positions. In 2008 we welcomed new senior academic staff members Associate Professor Chris Doran, a health economist from the University of Queensland, Dr John Howard, a clinical psychologist from the Ted Noffs Foundation, and Professor Rob Sanson-Fisher, expert in preventative medicine and rural health at the University of Newcastle, who joined us on a part-time basis for one day per week, to undertake collaborative research at NDARC. We also welcomed a number of new Research Fellows, including externally funded fellows Stephanie Taplin (DoCS Fellowship) and Anton Clifford (NHMRC Training Fellowship). Existing researchers, Professors Maree Teesson and Louisa Degenhardt, both began their NHMRC Senior Fellowships in 2008.



As well as an influx of new people, we had to say goodbye to one of our longest-serving staff members. Heli Wolk joined NDARC as a Professional Officer soon after it was established. Over eighteen years, she watched NDARC grow and provided a range of support services, eventually undertaking the role of Financial Officer as the need arose. We hope that retirement brings Heli a well-deserved rest and time to pursue her other interests.

During 2008, a number of NDARC researchers were recognised for their outstanding research or contribution to the field. Congratulations to Nickie Newton for being chosen for the 2008 Deans list, a new award for the most outstanding postgraduate students in the Faculty of Medicine. Congratulations also to Rebecca McKetin, who was awarded a NSW Tall Poppy Award in October for her outstanding contribution to science. Only thirteen of the brightest scientists in NSW were chosen across all fields of science. Associate Professor Alison Ritter was selected to participate in the Prime Minister's 2020 Summit and Anjalee Cohen was selected to receive a 2009 Endeavour Research Fellowship to undertake research in Thailand. In October Associate Professor Kate Dolan was featured in *The Lancet* when she was the subject of their column 'Lunch with The Lancet' which talked about her ground-breaking work with drug users in developing countries.

The Comorbidity and Trauma Study was completed in 2008. This was a flagship project for NDARC, receiving a grant of \$2.5 million over five years from the NIH in the USA. A number of significant new projects were started after receiving grants. Marian Shanahan and Alison Ritter were awarded an ARC Discovery Grant of \$250,000 over three years; Shane Darke was awarded an NHMRC Project Grant of \$235,000 over three years; Alison Ritter received an NDLERF grant of \$378,000 over three years; and Tim Slade, Maree Teesson and Kath Mills share in an NHMRC Project Grant with the School of Psychiatry, with a \$360,000 share coming to NDARC over three years. With Chris Doran's transfer to NDARC, a number of grants were also transferred, including an NHMRC Capacity Building Grant worth \$1.5 million over four years.

Following a pilot period in 2007/08, NDARC was chosen by the United Nations Office in Vienna to provide secretariat services for the UN Reference Group on HIV/AIDS and Injecting Drug Use, a contract worth US\$300,000 from July 2008 to December 2009.

The biggest contract for 2008 however, was the renewal of NDARC's Core Funding. The previous five-year contract expired in June. With a change in government, and extensive scrutiny of Commonwealth expenditure, the Department of Health and Ageing extended our existing contract for six months while a new contract was investigated. Near the end of 2008, the Department announced that NDARC would receive a new contract with funding of \$8.8 million for the three years from 2009 to 2011.

Professor Richard P Mattick

INTRODUCTION

NCPIC REPORT



The National Cannabis Prevention and Information Centre (NCPIC) continued to consolidate and develop its service delivery, community information, and workforce development activities during 2008, its first full year of operation. It now has seventeen staff based at NDARC in addition to various project staff located with consortium partners nationally. The free national information and helpline is taking calls from cannabis users and their friends and families, and from clinicians seeking advice on cannabis related issues. The website has been very positively received and has now launched an information site for young people. The prize winning entry to the NCPIC school poster competition has been made available to schools nationally and the winning entries to the short film competition will be posted on YouTube in 2009. NCPIC's quarterly Bulletins and monthly E-Zines (produced in conjunction with consortium partners) are proving very popular and are leading to publications in peer reviewed journals.

The Clinical Services and Evaluation team saw the resignation of Dr Greg Martin who has returned to New Zealand. We thank him for his service and welcome Dr Melissa Norberg as the new team manager. She is a Senior Lecturer with a strong

track record in substance use and anxiety research in the USA. The team has also been joined this year by Dr Desiree Boughtwood and Ms Sally Rooke, who are conducting the postal and web-based brief intervention projects. The project *Identifying of Barriers and Facilitators to Cannabis Treatment* was completed in 2008 by Peter Gates. He has now become NCPIC's Database Development Manager and as a doctoral student, he is evaluating the helpline and its potential for delivering brief interventions. The Cannabis Clinical Guidelines are also nearing completion in mid 2009 when the dissemination arm of the project will commence.

The Community and Clinical Training team has also expanded during 2008. The Managers, Annie Bleeker (Youth and Community) and Ety Matalon (Clinical), have delivered more than a hundred workshops this year and have required administrative support to accomplish this extraordinary feat. The coming year will see the results of the prospective evaluation of these workshops, the introduction of the youth workforce training materials, developed by Dr John Howard, into our calendar, and additional training resources based on the new clinical guidelines. The findings of the project on cannabis and mental health first aid, undertaken through our partner ORYGEN, will also be disseminated in 2009.

The coming year will see two priority areas for the Centre being developed: indigenous communities and workforce/workplace resources. The former has arisen from the findings of the work of Associate Professor Alan Clough and colleagues that has identified the increased rates of cannabis use in remote indigenous communities and their concerns for the resulting harms. We have been working with a number of indigenous projects nationally in addition to the guidelines we commissioned with our consortium partner, NDRI, for primary health care providers in indigenous communities. Paul Dillon has been leading the work with seven indigenous communities nationally to assist us in the preparation of a range of additional community resources in 2009. We will be working with another of our consortium partners, NCETA, to develop resources for the workplace and targeted workforce training initiatives.

It is not possible to properly acknowledge all consortium partners, staff members and projects in such a brief report but they have all made a wonderful contribution and demonstrated the power of a genuine consortium to deliver a unique model of research, community and workforce education and training, and service delivery.

Professor Jan Copeland



DPMP REPORT



The Drug Policy Modelling Program (DPMP) has continued to develop new evidence to inform policy, engage with policy makers to shape better Australian drug policy and provide foundational research to underpin the work. The team grew to ten staff in 2008. I was joined by DPMP collaborators Professor Lorraine Mazerolle and Professor Margaret Hamilton as delegates to the Prime Minister's 2020 Summit.

DPMP's work spans three areas: generating new research evidence; translating evidence into information of use to decision makers; and studying policy making. In generating new research evidence, it was found that the decriminalisation reform in Portugal has led to significant reductions in the burden on the criminal justice system. In translating evidence into useful information for policy makers, it was found that patient fees in maintenance treatment are inequitable but modelling suggests that the costs to government, if it paid, would be substantial. In striving to understand policy processes, DPMP found that current Australian public opinion is favourable towards harm reduction responses, but most Australians do not approve

of illicit drug use; and that drug policy decision makers are more likely to access research through "Google®" than through the academic literature. These are just a few examples of how DPMP is generating new knowledge, translating this knowledge for policy makers and making sure DPMP is on the front foot in helping to shape policy.

The program has continued to engage with policy makers around Australia on various projects. For example the NDARC DPMP team are working with the ACT government to provide evidence that can inform drug treatment service delivery across the ACT, including within the new ACT prisons. The Western Australia Police (Alcohol and Drug Coordination Unit) and the Drug and Alcohol Office are jointly interested in exploring policy questions centred on licensed premises and related violence. In conjunction with Queensland Health and Police DPMP will build a Cannabis Diversion Model for the Queensland context. Work is continuing with NSW police examining policing responses to ecstasy. All these projects are concerned with topics of direct interest to the jurisdictional policy makers and enable DPMP to encourage better use of evidence in informing decision making.

Overall the DPMP has completed 14 projects, and has 29 further projects underway. In 2008, DPMP generated 7 technical reports, 11 peer-reviewed publications, one edited book and 16 book chapters. We were engaged in active international collaborations in New Zealand, Europe, Portugal and the USA. The DPMP has been successful in obtaining program funding of \$2,612,944 and is also linked to another \$2,188,495 of research funding for other projects associated with the Program. During 2008 we secured over a million dollars in new research funding, over and above the core program grant from the Colonial Foundation Trust.

Dr Jenny Chalmers is leading a DPMP project to explore the impact of drug prices on consumption. 2008 saw the completion of fieldwork involving interviews with over 100 drug consumers in Sydney, Wollongong and Newcastle. She was also part of a project funded by the ANCD to explore the accessibility, affordability and availability of opioid pharmacotherapy treatment in Australia. Jenny presented findings from the project in a range of forums over the year, including the annual conference of the International Society for the Study of Drug Policy.

Dr Caitlin Hughes completed a DPMP monograph summarising the key characteristics of diversion programs for drug-related offenders in Australia, and a system dynamics model of cannabis diversion within Australia. She also maintains the Australian (illicit) drug policy timeline which is an online resource providing a list of key events that have occurred in Australia between 1985 and the present. Caitlin presented her work on the impact of decriminalisation of drugs in Portugal at the annual conference for the British Society of Criminology.

Dr David Bright joined DPMP during 2008 and commenced working on a project that aims to both detail the methamphetamine supply chains and assess the returns on investment for law enforcement. David was awarded his PhD in 2008 in forensic psychology, which investigated "The influence of gruesome evidence on juror emotion and decision making".

Professor Alison Ritter



THE YEAR IN REVIEW

In 2008, Professor Shane Darke continued his research on the relationship between drug use and violence. NDLERF funded his study of violence amongst methamphetamine and heroin users, and his other work on violence included a comprehensive review of the toxicology of homicide offenders and victims, a study of the toxicology of NSW homicide victims, and the toxicology of NSW suicide victims. The latter two studies involved continuing collaboration with Associate Professor Johan Duflou of the NSW Department of



Forensic Medicine, who also collaborates with Shane in a study of the morphine concentrations in stomach contents of intravenous opioid overdose deaths.

Shane was the Acting Deputy Director of NDARC for a significant portion of 2008 and also continued in his role as Australasian Regional

Editor of *Addiction*. He obtained a grant from the Network of Alcohol and Other Drugs Agencies, in conjunction with Garth Popple, Director of We Help Ourselves, to study the effects of specific mental illness and substance use on early drop-out, retention rates and successful program completion at We Help Ourselves.

He also continued his research into aspects of drug overdose. A major NHMRC funded study commenced on organic brain damage after non-fatal overdose, in conjunction with Professor Skye McDonald of the School of Psychology and Dr Sharlene Kaye. Shane also collaborated with Sharlene in an analysis of the systemic disease associated with fatal methamphetamine toxicity. Shane and Sharlene were successful in obtaining a new NHMRC grant worth \$148,000 over two years to examine the diversion and misuse of stimulant medication for Attention Deficit Hyperactivity Disorder among illicit psychostimulant users.



In September, Dr Sharlene Kaye and Professor Louisa Degenhardt were invited to join the International Collaboration on ADHD and Substance Abuse (ICASA), a consortium comprising twenty-five clinical and research institutes across fifteen countries. ICASA will coordinate a program of international multi-site research into the prevalence of ADHD among dependent drug and alcohol users and the genetics of ADHD and comorbid Substance Use Disorders.

Professor Louisa Degenhardt began her five-year NHMRC Senior Research Fellowship in February 2008, ending her six years as chief investigator of NDARC's national surveillance projects. During 2008, Louisa was involved in a variety of internationally oriented projects, in line with the focus of her research fellowship. She continued her work as co-Chair of the Global Burden of Disease Expert Group on Mental Disorders and Illicit Drug Use which will lead to new estimates of the burden of disease attributable to illicit drug dependence. Louisa also continued her collaborative work with the World Mental Health Survey Consortium examining data from

over thirty countries on drug use and dependence, which led to several papers published during the year. As a member of the Secretariat of the Reference Group to the United Nations on HIV and Injecting Drug Use, she worked closely with Dr Bradley Mathers and other Reference Group members to produce a range of global reviews of evidence, including estimates of the number of people who inject drugs worldwide, and of those who may be living with HIV.



Her Australian-focused research continued, with several postgraduate students playing leading roles in this work. Louisa supervised six PhD students in 2008, two of whom submitted during the year. Her involvement in data linkage work also continued, with projects examining mortality among persons entering treatment for opioid dependence in NSW, and successful collaborations with other UNSW researchers leading to funding to examine the incidence of cancer among this cohort. The post-marketing surveillance study of suboxone drew to a close, with final results due in 2009. Similarly, the case-control study of opioid dependence and gene-environment interactions with childhood trauma (the CATS study) completed its recruitment and data collection, with the data now submitted for genetic analyses in 2009.

Professor Maree Teesson commenced her five-year NHMRC Senior Research Fellowship at the beginning of March 2008. During the year, Maree and her colleagues had outstanding grant success in the highly competitive NHMRC and ARC Discovery Program grant rounds. Maree is now a chief investigator on four large NHMRC grants and two ARC grants. Her recent grants cover descriptions of mental disorders in the general population (with Andrews, Slade, Baillie, Mewton and Mills); trials of new treatment interventions in comorbidity (with Mills, Sannibale, Baillie, Baker, Creamer, Back, Haber, Rapee, Kay-Lambkin and Brady); and trials of prevention interventions (with Vogl, Newton and Andrews).

Maree's collaborative work with her clinical research colleagues at Royal Prince Alfred Hospital has continued to be successful with a number of innovative international trials underway in alcohol pharmacotherapy (with Haber, Leung, Morely and Baillie). New research on the impact of binge drinking on brain development has led to a new collaboration with the Prince of Wales Medical Research Institute (Rae).

In 2008, Maree Teesson was engaged in important work describing the epidemiology of mental disorders across Australia (with Slade, Whiteford, Jonstone, Pirkis and Burgess) and this culminated in the release of data which had been collected on over 8000 Australians. Maree was also involved in a significant study on the translation of research into treatment guidelines for comorbidity in collaboration with Dr Kath Mills. During the year, Maree held a number of prestigious appointments outside NDARC, including



Chair of the NHMRC Postgraduate Fellowship Assessment Panels and provider of expert advice to government ministers on alcohol abuse and also on homelessness (with Burns).



In 2008, Associate Professor Kate Dolan continued her very active profile on the international front. Her main project supports the Centre's clinic for female drug users in Tehran, which opened in August 2007. The women were asked what they needed and they asked for a psychiatrist and warm winter clothes. There were unexpected lengthy delays in transferring funds to Iran due to increased sanctions from the US. Associate Professor Dolan also worked with Sarah Larney to finalise guidelines on drug treatment and detoxification for prisons in Asia funded by The World Health Organization. A number of Asian countries were surveyed on their demand reduction strategies in prison. Kate attended a meeting at the WHO's Western Pacific Regional Office in Manila to improve networking among WHO collaborating centres. Also in 2008, Kate Dolan continued working locally on a range of studies looking at hepatitis transmission in prisons and began work with UNSW colleagues on a project to examine the possibility of developing a vaccine for hepatitis C.

Associate Professor Chris Doran re-joined NDARC in February 2008. Chris was the lead health economist on the NEPOD project coordinated by NDARC over the period 2000-2003 and has spent the past five years at the University of Queensland working within the Centre for Burden of Disease and Cost-Effectiveness. Chris is a health economist with extensive experience in the area of priority setting and the identification of cost-effective health care interventions to reduce the burden of harm associated with drug and alcohol misuse. He has been a chief investigator on grants worth over \$20 million; published over 60 articles in peer-reviewed journals including *The Lancet* and *Addiction*; and has undertaken commissioned work for a range of organisations including the World Health Organisation, the United Nations Office on Drugs and Crime, and AusAID. Among other things, Chris is leading a large multi-state, NHMRC funded capacity building grant in the area of health economics. He is also a chief investigator on several multi-site grants funded by the NHMRC and the Pharmacy Guild of Australia; and is working on philanthropic and government funded projects in Vietnam and Singapore. Chris is also collaborating with other NDARC staff on a variety of projects, such as a cost benefit analysis of alcohol interventions in rural areas.



Associate Professor Anthony Shakeshaft continued to lead the largest randomised community trial aimed at reducing alcohol harms that has ever been conducted internationally. Outcomes to date include finalising the community-level data to inform interventions and measure the success of the project,

commencement of a number of simultaneously implemented interventions, publication of a number of reviews and data-based papers, numerous conference presentations and symposia and the completion of the first PhD student working on the project.

In addition to this innovative work, Anthony established the first Indigenous-specific research group within NDARC during 2008. It is well recognised that a disproportionately high degree of drug and alcohol harm is experienced by Indigenous Australians. The new group is currently working on integrating evidence-based practice into the routine delivery of health services within Aboriginal the Community-Controlled Health Services in NSW. The indigenous research is being led by Dr Anton Clifford and builds on his previous work in the field. Anton is funded by an NHMRC ATSI Fellowship for research on reducing alcohol harm in rural communities. The four year fellowship commenced in mid 2008. The team also includes Catherine Deans and Miranda Rose (part-time). A number of publications will emerge in 2009 and there are plans to extend the Indigenous research group to about five by 2010.



In 2008, Dr Lucy Burns was promoted to Senior Lecturer and took over leadership of the national surveillance projects: the Illicit Drug Reporting System (IDRS), Ecstasy and related Drugs Reporting System (EDRS) and the National Illicit Drug Indicators Project (NIDIP). She also continued her research on the health of marginalised populations, focusing on substance use by the homeless and by pregnant women. Together with colleagues from the University of Newcastle she was successful in obtaining a competitive grant from NSW Health to continue her work examining the impact of alcohol use in pregnancy. She was also successful with Dr Paul Flatau of Murdoch University in obtaining a grant from the Australian Housing and Urban Research Institute to examine the level of integration between mental health, drug and alcohol and homelessness services in Australia. Lucy continues to work with Dr Flatau and staff of Mission Australia to evaluate the impact of the delivery of flexible services, including drug and alcohol services to homeless men in Sydney.



Dr Erol Digiusto moved to NDARC in April 2008 to work on a project concerning injecting drug users with Professor Richard Mattick and Professor Robert Batey. Injecting drug users, the majority of whom are infected with hepatitis C, experience many barriers to receiving antiviral therapy for their hepatitis C. This project involves patients who are receiving methadone or buprenorphine maintenance treatment for heroin dependence and will evaluate a health service process designed to improve the effectiveness of shared care between the methadone clinics and nearby hepatitis C antiviral therapy services. The aims of the project are to increase the number of methadone and buprenorphine patients who undertake hepatitis C diagnostic assessment, who are appropriately referred to antiviral therapy services, and who undertake antiviral therapy.

THE YEAR IN REVIEW

Dr Wendy Swift, who was promoted to Senior Lecturer in 2008, continued her focus on cannabis. During the year she continued to lead a successful project with Louisa Degenhardt and Delyse Hutchinson from NDARC in collaboration with Professor George Patton, Dr Carolyn Coffey and Professor John Carlin from the Centre for Adolescent Health and Murdoch Children's Research Institute. This research examined the long-term impacts



of cannabis use in adolescence and young adulthood. The project concluded in December, producing 6 papers and three conference presentations. A further focus for Wendy in 2008 was developing earlier pilot work on cannabis potency and contamination. A comprehensive literature review arising from this study was published in 2008 and a

paper on the international key expert component is currently in draft. In 2008 she successfully obtained funding from NCPIC to conduct a demonstration project study analysing cannabis potency and the presence of potential contaminants in WA cannabis seizures. The collection of accurate and current data on this issue is crucial in providing appropriate and evidence-based information to the Australian public, cannabis users and their families, health practitioners and law-enforcement workers.

Wendy also continued her collaboration with Marian Shanahan, Alison Ritter and Maree Teesson on an ARC Discovery grant estimating the current socio-economic costs related to cannabis and the costs and benefits of alternate policy options. She collaborated with Laura Vogl on the CLIMATE Schools program and worked with Jan Copeland and Greg Martin on a study examining barriers and facilitators to treatment-seeking among cannabis users. Wendy was also a member of the Organising Committee for the 2008 APSAD Conference in Sydney.

Dr Katherine Mills continued work on her landmark NHMRC funded randomised controlled trial which examines an integrated intervention for PTSD and substance use disorders. With Teesson, Mattick, Burns, Sannibale, Proudfoot and Deady, Kath completed the draft of national guidelines on the management of co-occurring mental health conditions in alcohol and other drug treatment settings, funded by the Australian Government Department of Health and Ageing. Kath was also successful in her application for promotion to Senior Lecturer.



Dr Rebecca McKetin was awarded a NSW/ACT Young Tall Poppy Science Award for her research on methamphetamine, recognising her dedication to raising public awareness about research findings through the media and various public information seminars. In 2008, she continued to lead Australia's first longitudinal prospective cohort of dependent methamphetamine users (the Methamphetamine



Treatment Evaluation Study), which is due to be completed in 2009. This year also saw the completion of her previous NHMRC funded longitudinal study on methamphetamine psychosis which was undertaken in collaboration with Griffith University. Her other work has included a pilot treatment trial for methamphetamine use and depression, and a collaborative study on mental health and methamphetamine use among dance party patrons (with the Manly Drug Education and Counselling Centre), and ongoing involvement in the evaluation of the NSW Health Stimulant Treatment Programs. A new project commenced late in 2008 (with Lucy Burns and Matthew Dunn) examining attitudes towards, knowledge and prevalence of illicit drug use among professional athletes. This project is funded by the Australian Government Department of Health and Ageing.

Dr John Howard joined NDARC this year from the Ted Noffs Foundation. Half of his time was spent with NCPIC where he developed a training package for youth sector workers to enhance their capacity to provide more effective interventions for young people experiencing cannabis-related difficulties, and was also involved in a clinical project to provide brief interventions for young people referred by the Headspace project and the Brain Mind Research Institute. During the year, he co-supervised PhD candidate Melanie Simpson; led the development of national screening of young offenders with the Australian Institute of Criminology; and developed a project on collaborative service provision and outcomes for highly vulnerable young people with colleagues from the University of Melbourne, YSAS and Jesuit Social Services. His NDARC activities in 2008 included a study of drug use and co-occurring disorders among same sex-attracted people (with Roxburgh, Degenhardt and ACON). On the international front, he was involved in the activities of the UN Reference Group on HIV and IDU, completed an overview and discussion paper on building capacity for community-based treatment and care of young drug users in the Greater Mekong Subregion, and worked on a grant application with colleagues from Georgetown University to study drug use among young people in Egypt. He continued in 2008 as a Member of the Boards of NCETA and Family Drug Support and the Ministerial Council on Hepatitis, the NSW Child Death Review Team and ANCD's Asia-Pacific Issues Committee.



In 2008, Dr Tim Slade continued his role as a Senior Research Fellow providing biostatistical advice to staff and students at NDARC. He worked closely on a number of projects, most notably the Alcohol Action in Rural Communities (AARC) project with Courtney Breen and Anthony Shakeshaft. This work involved exploring the longitudinal reliability of measures of alcohol-related crime. He also continued to work closely with the Department of Health and Ageing on the 2nd Australian National Survey of Mental Health and Wellbeing, a large-scale population survey of the prevalence and impact of mental disorders in the general community. The initial results of this survey



were released in October 2008 and Tim took a lead role in writing up the government report as well as a series of six journal publications reporting on the results of the survey which are due for release in the Australian and New Zealand Journal of Psychiatry in mid 2009. Tim also continued to supervise the NDARC arm of a large multi-centre NHMRC project grant examining the contributions of epidemiological data to the revision of psychiatric and substance use classification systems. This project has begun to explore some enduring questions in the classification of substance use disorders (e.g. whether alcohol abuse and dependence are truly separate diagnoses).



Dr Stephanie Taplin joined NDARC in mid 2007 under a three-year post-doctoral research fellowship funded by the NSW Department of Community Services (DOCS). Her study, which commenced in 2008, examines child protection issues amongst mothers in the NSW Opioid Treatment Program. It aims to

increase our understanding of parental substance use via its examination of the characteristics of 200 mothers and their broader issues, looking at the interventions they and their children receive over a period of time, and how these affect outcomes for both the mothers and their children.

Dr Suzanne Czech joined NDARC in 2008 as part of Anthony Shakeshaft's research team working on Alcohol Action in Rural Communities (AARC). Suzanne's contribution to this project included the investigation, implementation, evaluation, and communication of effective strategies for reducing alcohol-related harm in rural communities, with a particular focus on examining strategies that reduce alcohol-related crime and road traffic crashes in twenty rural NSW communities. A key aspect of this role was establishing collaborative liaisons with a range of community representatives including the relevant road traffic authorities, law enforcement personnel, council members, liquor and licensee managers, and communicating awareness and feedback to the community as a whole through media channels. Suzanne led the analysis and preparation for three papers communicating the results of these objectives. Suzanne also contributed to research which examined the effectiveness of methods to identify and target high-risk periods for alcohol-related crime in specific communities.

Dr Frances Kay-Lambkin returned to her NHMRC Public Health Fellowship with NDARC in March on a part-time basis following maternity leave in 2007. Throughout 2008, she continued her focus on developing and evaluating internet-based treatments, with active



participation in a range of clinical research projects for people with depression, substance use problems, and unhealthy lifestyles. Frances was a member of two Australia-wide consortia that were successful in securing NHMRC project grant funding in 2008. The first of these is to trial a 'healthy lifestyles'

intervention, comprising psychological treatment,

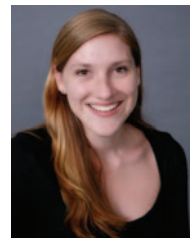
nutrition, physical activity and nicotine replacement therapy, among people with psychosis who are at risk of cardiovascular illness, across four sites in Australia. The second is to develop and trial an internet-based psychological treatment for alcohol use and comorbid depression, co-ordinated by colleagues at the Queensland University of Technology. These projects will commence in 2009. Late in 2008, Frances was a member of a successful group that won a Commonwealth tender to scope the existence and quality of internet sites associated with alcohol and other drug use. This year also saw the completion of the pilot of the first stepped care intervention package for people with amphetamine use and depression. Rebecca McKetin and Frances collaborated on this NSW Health-funded pilot study. Follow-up data are currently being collected, with data analysis to follow in 2009. In addition to these activities, Frances convened two symposia on e-technology at the annual Australasian Society of Psychiatric Research conference, was a senior author on four publications, and commenced a dissemination trial of a computer-based treatment for depression and substance use comorbidity (developed as part of her PhD) with a drug and alcohol service on the Central Coast in NSW. This final project has attracted two postgraduate students in Clinical Psychology, who will use the results for their theses in 2009.



Dr Jim Lemon returned to NDARC in December 2007 as a research fellow to provide collaborative input on various projects and also to pursue independent research. His first task was the completion of the monograph on Cannabis and Mental Health, which was completed in early 2008.

During the year, Jim had three other papers accepted, two as sole author and one as a member of an international team, all derived from work performed prior to returning to NDARC. Other papers are under review at present. Throughout the year he planned and organised a survey of liquor vendors and underage drinkers to clarify the social interactions that occur during the purchase of alcoholic beverages by or for underage drinkers.

Dr Kristy Martire joined NDARC in February 2008 as a Research Fellow focusing on the interrelationship between drugs and crime. Together with Sarah Larney, Kristy has analysed data gathered from participants in the Magistrates Early Referral Into Treatment (MERIT) program, a court diversion initiative for offenders with a history of substance use. Two research bulletins are currently in press based upon these analyses. She also began an evaluation of the Connections Project, a through-care program for incarcerated offenders engaged in pharmacotherapy treatment in New South Wales. Kristy was awarded a research grant from New South Wales Health to work with Sandra Sunjic from Justice Health, and Libby Topp and Devon Indig from the Centre for Health Research in Criminal Justice, to investigate the relationship between financial sanctions and rehabilitation outcomes for incarcerated offenders.



THE YEAR IN REVIEW

Dr Claudia Sannibale and her research team, Kylie Sutherland, Kirsty Taylor, Delphine Bostock-Matusko, Marie Peek-O'Leary and Alicia Visser continued to recruit into their treatment trial for alcohol use problems and comorbid PTSD. The researchers in this collaborative study (which includes Professor Creamer from the



Australian Centre for Posttraumatic Mental Health, A/Professor Sitharthan from the Australian Centre for Addiction Research and NDARC researchers Maree Teesson and Kath Mills) have screened over 100 enquiries, conducted in-depth assessments, and provided three months of manual guided and

supervised cognitive behaviour therapy to study participants. The study has attained high treatment retention rates, a major achievement in a population of individuals with complex needs and presentation. Early results are very promising, with participants in both treatment conditions showing marked, clinically significant, improvements in symptoms of PTSD and alcohol use problems.

Claudia is also a chief investigator on several other externally funded treatment trials, including *"Novel treatments for alcohol dependence: a randomized controlled trial of structured stepped-care intervention for psychiatric comorbidity"*, which is approaching its completion of recruitment at Royal Prince Alfred Hospital; a *"Randomised controlled trial of treatment for alcohol use disorders and social phobia"*, which, under the leadership of Andrew Baillie, at Macquarie University, is expected to commence recruitment in 2009; and Mills' randomized controlled trial *"The efficacy of an intervention for PTSD among illicit drug users"*, which is continuing to recruit and is achieving excellent results.

In 2008, Dr Joanne Ross began work on a new study of suicide risk assessment and prevention strategies, and also worked with Shane Darke on his NDLERF project which examines the rates of violent crime among methamphetamine users. She also worked with Rebecca McKetin and Richard Mattick on the Meth-Amphetamine Treatment Evaluation Study (MATES), and with Lucy Burns on the establishment of a cohort of substance-using pregnant women. Joanne was promoted to Senior Lecturer in 2008.



Dr Laura Vogl continued to work on her ARC Post-doctoral Fellowship, awarded for a project on fear, sadness and alcohol use in adolescents. She has also been conducting research on the adolescent prevention series, CLIMATE Schools. In collaboration with Maree Teesson, Nicole Newton, Wendy Swift, Paul Dillon

and Rebecca McKetin, Laura has worked on the development and evaluation a computer-based interactive program for adolescents aimed at preventing or minimising drug and alcohol abuse. The program has various modules for different ages and various drug and alcohol scenarios. During 2008, Laura evaluated the cannabis and psychostimulants module used by Year 10 high school students.

In July 2008, Dr Matthew Dunn was appointed as Associate Lecturer within the Centre. Working alongside Lucy Burns and Wendy Swift, Matthew is coordinating a project funded by the Sport Branch of the Department of Health and Ageing to investigate attitudes toward, knowledge of, and prevalence of illicit drug use among Australian professional and non-professional athletes. This involves working with some of Australia's elite athletes from a diverse group of sports, including rugby league, athletics, netball and softball.



MANAGEMENT STRUCTURE

NDARC ADVISORY BOARD

In 2008 the former NDARC Board of Management had its terms of reference reviewed, and was renamed, at the Vice-Chancellor's request, to become the new NDARC Advisory Board. The new Board held their inaugural meeting in October 2008, with the Honourable Kevin Rozzoli, AM, continuing as the Chair. Other members of the Advisory Board were: Professor Les Field, DVC Research, UNSW; Professor Peter Smith, Dean of the Faculty of Medicine, UNSW; Ms Virginia Hart, Assistant Secretary, Drug Strategy Branch, Commonwealth Department of Health and Ageing; Mr Norman Swan, Host of The Health Report, ABC Radio National; Mr David McGrath, Director of Mental Health, Health and Alcohol Programs, NSW Department of Health; Mr Keith Evans, Executive Director, Drug & Alcohol Services South Australia (DASSA) and Professor Richard Mattick, Director of NDARC.

In regular attendance at the NDARC Advisory Board meetings are also: Mr Darius Everett, Drug Strategy Branch, Commonwealth Department of Health & Ageing; Professor Terry Campbell, AM, Associate Dean Research, Faculty of Medicine; Ms Shale Preston, Executive Officer, NDARC; Ms Heli Wolk, Professional Officer, NDARC (to August 2008); Ms Cris Corpus, Senior Finance Officer, NDARC (from September 2008). The Advisory Board meets approximately four times per year.

EXECUTIVE COMMITTEE

Following the rapid growth in staff numbers and research projects at NDARC, a review of the management structure resulted in the establishment of a new Executive Committee, comprising the Director, five new Assistant Director positions and the Executive Officer. The five Assistant Directors each have their own portfolio area, two being the existing research leaders who are responsible for the two major programs, NCPIC and DPMP, and the three new portfolios created from the reorganisation of existing NDARC activities.

Members of the Executive Committee for 2008 were: Professor Richard Mattick, Director of NDARC (Chair); Professor Jan Copeland, Assistant Director of NDARC and Director of NCPIC; Associate Professor Alison Ritter, Assistant Director of NDARC and Director of DPMP; Professor Maree Teesson, Assistant Director responsible for Research & Development; Professor Louisa Degenhardt, Assistant Director responsible for Strategy and International; Associate Professor Anthony Shakeshaft, Assistant Director responsible for Finance; and Ms Shale Preston, Executive Officer. The Executive Committee is the major decision-making body in NDARC, and is responsible for the overall direction and management of the Centre. Meetings are scheduled monthly.

RESEARCH COMMITTEE

Research issues and activities are discussed at the Research Committee. In 2008 this committee comprised: Professor Richard Mattick (Chair); Professor Jan Copeland; Professor Shane Darke; Professor Louisa Degenhardt; Professor Maree Teesson; Associate Professor Kate Dolan; Associate Professor Chris Doran; Associate Professor Alison Ritter; Dr Lucy Burns; Dr Jenny Chalmers; Dr Erol Digiusto; Dr John Howard; Dr Rebecca McKetin; Dr Kath Mills; Dr Joanne Ross; Dr Anthony Shakeshaft; Dr Tim Slade; Dr Wendy Swift; Dr David Bright; Dr Anjalee Cohen; Dr Matthew Dunn; Dr Suzanne Czech; Dr Caitlin Hughes; Dr Delyse Hutchinson; Dr Sharlene Kaye; Dr Jim Lemon; Dr Kristy Martire; Dr Claudia Sannibale; Dr Kylie Sutherland; Dr Stephanie Taplin; Dr Laura Vogl; Ms Marian Shanahan; Ms Alys Havard; Dr Brad Mathers (Staff Representative); Ms Fiona Shand (PhD Representative) Ms Karen Price; Ms Shale Preston; Ms Heli Wolk (Finance Officer to August); Ms Cris Corpus (Senior Finance Officer from September)

FINANCE COMMITTEE

The Finance and Administration Committee oversees NDARC's financial and administrative areas, and is responsible for creating and monitoring annual budget models and forecasts. The group meets twice monthly and in 2008 comprised: Professor Richard Mattick (Chair), Ms Shale Preston, Ms Karen Price, Ms Sandi Steep, and Ms Heli Wolk (up to August 2008) with Ms Cris Corpus and Ms Lin Chin (from September 2008).

OTHER COMMITTEES

Other committees, which continued as in previous years, were the Library Committee (comprising Professor Shane Darke, Dr Sharlene Kaye, Dr Wendy Swift, Ms Eva Congreve), the NDARC Employee Assistance Team (NEAT) Committee (Dr Sharlene Kaye, Dr Matthew Dunn, Ms Sarah Larney, Dr Kath Mills, A/Professor Alison Ritter) and various Steering Committees for individual projects. The Travel Committee, Computing Committee and Accommodation Committee were discontinued and the functions transferred to the administrative staff.

STAFF MEETINGS

Staff Meetings are held on the first Thursday of every month and staff members are encouraged to take their turn in chairing the meetings. These meetings provide general information, acknowledge staff achievements, discuss current projects and provide an opportunity for staff to share ideas and raise issues.

STATISTICS

STAFFING

The staff numbers at NDARC continued to grow through 2008. As at 31 December, there were 106 staff members employed by NDARC (including full-time and part-time academic staff, research staff and support staff), plus 9 conjoint appointments. Casual staff and visiting academics have not been included in the count. A full list of 2008 staff is given in Appendix B.



The Faculty of Medicine undertook a review of NDARC's administrative functions during April and May. The Review Committee comprised Judith Davoren (chair) Bronwyn Turner, Jo-Anne Tee, Tony Gardner and Marcus Walsh. Whilst acknowledging that NDARC's administrative support had improved considerably over the previous 18 months, the Review Committee made various structural recommendations, and wanted to see the appointment of a qualified Financial Officer to cope with the increasing complexity and volume of financial administration.

As a result of the review, Ms Heli Wolk retired after eighteen years of service and two Senior Financial Officers were appointed. The new position of Manager of Operations and Development was also reviewed, resulting in a transfer of some duties to the Executive Officer, and the position narrowing to cover mainly communications and media liaison. After making a large contribution in a very short time, Ms Karen Price chose to leave NDARC and return to the government sector late in 2008.

Administrative Staff



Shale Preston



Cris Corpus



Lin Chin



Julie Hodge



Carla Santos



Caroline Santosa

FUNDING

The Australian Government Dept of Health and Ageing has traditionally awarded funding by financial year. However, in 2008, the five year contract ended in June, and was followed by a six month extension, with a new three year contract to start on 1 January 2009. For ease of comparison, the previous year has been converted from the 2006-07 financial year reported in last year's Annual Report, to reflect core funding for the 2007 calendar year. 2008 is the period from 1 January to 31 December 2008.

Core Funding Component	2008 \$	2007 \$
Baseline Core Funding	1,760,420	1,637,127
Two Scholarships	53,146	51,580
Core Projects	913,068	943,352
TOTAL CORE FUNDING	2,726,634	2,632,059

NDARC also received funds: from Commonwealth Government granting agencies, including the NHMRC, ARC and NDLERF; from NSW State Government Departments, including NSW Health, DoCS, Bureau of Crime Statistics and RTA; from charities, foundations and professional organisations; and from international bodies, such as the United Nations, World Health Organisation and the USA National Institutes of Health. In addition to the Core Funding, further expenditure of approximately \$12 million was incurred during the 2008 calendar year from research grants and fellowships awarded to NDARC from other of sources. Details of these research funds can be found in Appendix D.

DISSEMINATION

Research findings are disseminated through media briefings, seminars, conference presentations, and publications. Media enquiries covered a variety of topics such as ecstasy; heroin, methamphetamines, alcohol, drug testing at work, naltrexone implants and the 2020 Summit. There was a large focus on teenage binge drinking following comment by the Prime Minister. NDARC provided information and/or commentary for ABC Radio, *The Sydney Morning Herald*, *The Melbourne Age*, *The Daily Telegraph*, *Cleo Magazine*, and various television news reports. Louisa Degenhardt's paper on a global view of alcohol, tobacco, cannabis and cocaine use was picked up by the *Wall St Journal*, *Time Magazine*, *Washington Post*, *USA Today* and various other international media.

NDARC provides information and training to a wide variety of drug and alcohol workers, teachers, law enforcement personnel and government workers, as well as to members of the public. The NDARC Education Trust (NET) distributes booklets, fact sheets, runs training courses and seminars.

Details of the publications, conference presentations, seminars, workshops and invited lectures can be found in the appendices at the end of this report.

POSTGRADUATE PROGRAM

NDARC had 24 postgraduate students enrolled during 2008, a large increase on our previous numbers. Congratulations to Dr Elizabeth Maloney and Dr Greg Martin, who were awarded their doctorates in 2008. Congratulations also to James Shearer, who has submitted his thesis and will be awarded his PhD early in 2009. James received three 1's from his markers (award without changes) - a rare result, not easily obtained.

Ten NDARC students were selected to give presentations at the SPHCM 6th Annual Research Student Conference in November, and several were involved in national and international conferences (listed in Appendix G).

Full details of the 2008 postgraduate students, their supervisors and thesis titles, are listed in Appendix C.

NDARC has a very active postgraduate program, offering both PhD and Masters by Research degrees in a wide variety of topic areas, depending on student background and interest. Students are enrolled through the School of Public Health & Community Medicine, but supervised through NDARC. A number of postgraduate scholarships are funded by the Centre, and advertised periodically when they are available. Prospective students are also encouraged to apply for NHMRC scholarships or Australian Postgraduate Awards (APAs), which are offered by the Australian Government.

Examples of recent PhD topics include:

- Criminality among substance users with comorbid post-traumatic stress disorders
- Alcohol-related harm in rural communities.
- Childhood trauma and opioid dependence.
- The cannabis information and helpline: evaluation and impact on the community, families and individuals.

- Morbidity associated with pharmacotherapies for opioid dependence.
- Prevalence and consequences of child maltreatment among heroin dependent cases and matched controls.
- Assessing the social, health and economic aspects of alcohol in Australia.
- Opioid dependency treatment in closed setting in South East Asia.
- The impact of public opinion on illicit drug policy.
- Initiation, persistence and cessation of cannabis use and subsequent mental health outcomes.
- Alcohol-related hospital emergency department presentations.
- The latent structure of common psychiatric disorders across age cohorts.
- Treatment of drug use in pregnancy
- A comparative study of the diversion and injection of methadone, buprenorphine and buprenorphine-naloxone.
- Suicidality in the general population.
- Testing the usefulness of a social cognition model of treatment within a therapeutic community setting.
- Assessing the economic consequences of cannabis policy options.
- Patterns of substance abuse and mental health comorbidity in a heroin dependent group.
- The development and efficacy of a computer-based prevention program for alcohol and cannabis use.
- An investigation of alternate substitution pharmacotherapies for the treatment of opioid dependence.



Alys Havard



Elizabeth Maloney



Ed Silins



Courtney Breen



Elizabeth Conroy



Emma Barrett



Nicky Newton



Francis Matthew-Simmons



Sarah Larney



Amy Gibson



Paul Nelson



Fiona Shand

CURRENT PROJECTS

EPIDEMIOLOGY

National Illicit Drug Indicators Project (NIDIP)

NDARC Staff: Lucy Burns and Amanda Roxburgh

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

Design and Method: To date NIDIP has identified a comprehensive range of data sources, and produced reviews of drug-related data indicators at a national level as well as within New South Wales. These indicators include: information on population patterns of drug use from national surveys, data on deaths due to drug overdoses, drug-related morbidity and drug treatment data, indicators of drug purity and seizures, and drug-related crime data. Analyses of these indicators are published on a regular basis. The project currently publishes bulletins on drug-related deaths and drug-related hospital presentations on an annual basis on the NDARC website. These bulletins, along with reports and peer-reviewed journal articles aim to provide as comprehensive an overview as possible of trends in drug use and related harms in Australia over time.

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

Date Commenced: June 2002

Expected Date of Completion: Ongoing

Funding: Australian Government Department of Health and Ageing

Mortality among Opioid Dependent Persons in Pharmacotherapy, NSW 1985-2006

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

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

Aims: The aims of this project are to:

- Examine overall mortality rates of persons enrolled in NSW opioid maintenance treatment (methadone or buprenorphine) between 1985 and 2006.
- Examine possible changes in both the rates and causes of mortality over this period.
- Examine the rates and causes of mortality according to factors such as age and gender.
- Examine the impact of opioid maintenance treatment on rates and causes of mortality among this cohort.

Design and Method: The study involves an historical cohort linking identified individuals in existing datasets on opioid maintenance treatment and mortality. All people who commenced an episode of methadone or buprenorphine treatment in NSW between 1985 and 2006 (approximately 45,000 people) have been included in the study. Data on all patients entering methadone or buprenorphine treatment since 1985 are kept by NSW Health; these data have been linked to mortality and causes of death data managed by the Australian Institute of Health and Welfare. Predictors of mortality have been examined using Poisson regression, stratified according to the different causes of death. Other analyses include: predictors of treatment retention, analysed using survival analysis; whether the incidence of any causes of death have changed over time; and how treatment exposure has impacted on mortality rates.

Progress: After obtaining ethics approval and employing a professional research officer, the following has been undertaken:

- The Pharmaceutical Drugs of Addiction System (PHDAS) data has been successfully linked to the National Death Index by AIHW, including clerical review by the PRP.
- Extensive data cleaning and preparation has been done on the linked data, including auditing against PHDAS hard copy files.

- Analysis conducted on the predictors of length of time in the first treatment program, overall mortality rates over time, causes of mortality, and risk of death in treatment and out of treatment.
- Two papers have been published and two conference presentations made.

Date Commenced: June 2007

Expected Date of Completion: December 2009

Funding: National Health and Medical Research Council (NHMRC)

The Health and Psychological Consequences of Ecstasy Use

NDARC Staff: Louisa Degenhardt, Ed Silins and Natasha Sindich

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

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

Date Commenced: December 2006

Expected Date of Completion: December 2008

Funding: Australian Government Department of Health and Ageing

Secretariat of the Reference Group to the United Nations on HIV and Injecting Drug Use

NDARC Staff: Richard Mattick, Louisa Degenhardt, Bradley Mathers, John Howard and Hammad Ali

Other Investigators: Alex Wodak (St Vincents Hospital)

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

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

- Coordination of the Reference Group.
- Management of key-indicator data holdings which are used to monitor global trends in injecting drug use and HIV as well as coverage of HIV prevention and care for injecting drug users.
- Provision of ad-hoc technical support to UNAIDS co-sponsor agencies.
- Production of the Reference Group's biannual reports (Global and Regional Trends in the Epidemiology of Injecting Drug Use and HIV, and Estimates of HIV Prevention and Care Service Coverage for Injecting Drug Users).
- Production of thematic research papers on topics of current concern.
- Management of the Reference Group website.
- Dissemination of information.

Date Commenced: April 2007

Expected Date of Completion: December 2011

Funding: The United Nations Office on Drugs and Crime

Using Epidemiology to Inform Psychiatric Classification (DSM-V and ICD-11)

NDARC Staff: Tim Slade, Maree Teesson and Katherine Mills

Other Investigators: Gavin Andrews (School of Psychiatry, UNSW), Andrew Baillie (Macquarie University), Mark Oakley Brown (Monash University) and Ayelet Meron Ruscio (University of Pennsylvania, USA).

Aims: The project aims to:

- Develop, using epidemiological data, models of the typology of mental disorders that lead to improvements in the classification systems.
- Contribute to the American Psychiatric Association's revision of DSM-IV to DSM-V and the World Health Organization's revision of ICD-10 to ICD-11.

CURRENT PROJECTS

Design and Method: This project relies on the appropriate application of statistical methodology to existing and future epidemiological data sets with the express aim of achieving valid, useful and empirically-supported classification systems. Data will be derived from three epidemiological surveys of mental disorders and the research plan will follow in three sequential and iterative stages:

- Identification and documentation of the key diagnostic parameters around 13 mental disorders.
- Identification of the latent structure of each of 13 major mental disorders with particular attention on the boundaries separating each disorder from normality. It is expected that the outcomes of this stage will address the following fundamental questions: (a) Is this disorder best conceived within a categorical or continuous framework? (b) Does the latent disorder correspond to one or more existing diagnostic categories, a variant or a subtype of an existing category, or an entirely new grouping? (c) What is the relation of the disorder to milder pathological states? (d) Is there evidence for meaningful subtypes or lower-order factors within the disorder, and if so, to what extent are they consistent with subtypes specified by current classification systems or contemporary theory? (e) Is there meaningful dimensional variation among affected cases that would support the addition of a severity score to the diagnostic criteria?
- Evaluation of the structural findings to determine their practical utility for DSM-V and ICD-11. It is expected that the outcomes of this stage will answer the following fundamental questions: (a) What are the best symptoms to identify each mental disorder at the latent level? (b) Should symptoms be differentially weighted in the diagnostic calculation? (c) Are these criteria applicable across all subtypes of the same disorder? (d) What are the best thresholds to identify categorical mental disorders? (e) Can defensible thresholds be identified for truly dimensional disorders? (f) What are the costs and benefits of making changes to the classification systems?

Date Commenced: January 2008

Expected Date of Completion: December 2010

Funding: National Health and Medical Research Council (NHMRC)

Global Burden of Disease: mental disorders and illicit drug use expert group

NDARC Staff: Louisa Degenhardt and Paul Nelson

Other Investigators: Harvey Whitford, Amanda Baxter and An Pham (University of Queensland)

Rationale: The original Global Burden of Disease (GBD) Study was commissioned by the World Bank in 1991 and provided burden of disease estimates for the year 1990.

New estimates for 2001 were published as part of the second revision of the Disease Control Priorities Project. The principle guiding the burden of disease approach is that best estimates of incidence, prevalence, and mortality can be generated through the careful analysis of all available sources of information in a country or region (corrected for bias). The disability-adjusted life year, or DALY, was developed to assess burden of disease: a time-based measure that combines years of life lost due to premature mortality and years of life lost due to time lived in health states less than ideal.

The current study will involve a complete systematic assessment of the data on all diseases and injuries, and produce comprehensive and comparable estimates of the burden of diseases, injuries and risk factors for two time periods: 1990 and 2005. Improved techniques and new data will be used. As part of the GBD Study, researchers at NDARC and the Queensland Centre for Mental Health Research at the University of Queensland are currently undertaking research that will determine the global burden of disease of illicit drug use and dependence, and mental health disorders. This represents the work of the Mental Disorders and Illicit Drug Use Expert Group.

Aims: The GBD study has two major objectives:

- To produce estimates of the burden of diseases and injuries, and to assess risk factors, for the years 1990 and 2005 organised in 21 regions covering the globe.
- To develop a series of tools for use by specific audiences, to standardise and broaden burden of disease research and analysis, and to produce publications tailored to policymakers and a non-research audience.

As part of the first GBD Study objective, the Mental Disorders and Illicit Drug Use Expert Group aims to produce estimates of the burden of disease associated with mental health disorders and illicit drug use and dependence.

Design and Method: The GBD Study will take three years to complete. The project will examine more than 175 diseases and injuries, and more than 45 risk factors, in 21 regions of the world. Systematic reviews of the prevalence, incidence and duration of mental health disorders and associated mortality and disabling sequelae will be conducted by the Mental Disorders and Illicit Drug Use Expert Group. Additionally, exposure and effects of risk factors will be assessed. Expert Groups will communicate their figures at defined intervals with other Expert Groups and with the Core Team to ensure consistency across conditions, and will be subjected to external peer review. NDARC is collecting data on the following drug groups:

- Heroin and other opioids
- Amphetamine type stimulants
- Cocaine
- Cannabis

Benefits: The GBD study will provide four key benefits as a source of accurate knowledge and a vital tool for informed decision-making.

- Systematic and objective analysis is ensured by separating epidemiological assessment from advocacy, creating evidence-based pictures of health patterns that can subsequently motivate responsible policy formulation and research.
- Balanced assessment of health problems, which combines information on disease and risk factor causes of premature mortality, morbidity, and disability.
- Assessment of the magnitude of health problems using standard units of measurement, such as disability-adjusted life years (DALYs).
- Focus on education, training and transparency.

Progress: Systematic reviews of mortality, prevalence, incidence and remission/duration of dependence on heroin and other opioids, amphetamine type stimulants, cocaine and cannabis have been conducted, and data extracted. The comparative risk assessment for illicit drugs is underway.

Date Commenced: July 2007

Expected Date of Completion: December 2010

Funding: National Health and Medical Research Council (NHMRC) Fellowship

Study on HIV Incidence Among IDUs in Northern Shan States, Burma

NDARC Staff: Kate Dolan, Richard Mattick and Sarah Larney

Aims: The aim of this project is to study the incidence of HIV transmission among IDUs and DUs living in Lashio Township in the Northern Shan States of Burma, as part of the monitoring mechanism to detect the impact of harm reduction initiatives in this area. Changes in HIV risk behaviours among IDUs, and awareness of HIV/AIDS and STI among them and their families will also be studied. In addition, community perceptions of the environmental security related to drug use will be studied.

Design and Method: The program will monitor the HIV seropositivity status of drug users living in the Lashio Township area along with HIV risk behaviours. A cohort of drug users will be recruited and they will be followed up for two years to determine the incidence of HIV infection as well as other indicators of interest.

Date Commenced: January 2008

Expected Date of Completion: December 2009

Funding: AusAid

Alcohol Related Crime in the Sydney Local Government Area

NDARC Staff: Stephanie Love and Anthony Shakeshaft

Other Investigators: Elissa Wood (NHS Kingston, UK)

Aims: To apply a surrogate measure of alcohol-related crime to Sydney LGA to determine whether rates of crime have increased over time.

Design and Method: Longitudinal data analysis using routinely collected police data, modified to improve the reliability of the measure.

Progress: The initial analyses have been completed and the report is currently available on the City of Sydney Council website for public comment. The data showed an increase in alcohol-related crime in Kings Cross between 2000 and 2007 and in Darlinghurst for the same time period. The most likely explanation for the increase in Kings Cross is the density of alcohol outlets and the high proportion of them that are open late at night, while the most likely explanation for Darlinghurst is the substantial increase in the number of alcohol outlets over that time period. Annual updates of the analysis are to be conducted.

Date Commenced: November 2007

Expected Date of Completion: March 2012

Funding: City of Sydney Council

Alcohol Use in Pregnancy

NDARC Staff: Lucy Burns, Anthony Shakeshaft and Emma Black

Other Investigators: Jenny Powers (University of Newcastle), Deborah Loxton (University of Newcastle), Elizabeth Elliott (Sydney University) and Adrian Dunlop (Hunter New England Area Health Service)

Aims: The project has the following objectives:

- To provide a comprehensive account of the distribution of alcohol use and harms associated with pregnancy in the Australian context; triangulating data from the NSW Admitted Patient Data Collection and the NSW Midwives Data Collection.
- To examine the effect of the Australian alcohol drinking guidelines on alcohol consumption among pregnant women before and after the 2001 guidelines were introduced, using the Australian Longitudinal Study on Women's Health quantitative data (1996-2006).
- To examine views and experiences of alcohol use in pregnancy, and utilisation of current health services, identifying the experiences of both pregnant women and health service providers.

CURRENT PROJECTS

- To develop a formal questionnaire, based on these findings, to identify the perceived needs of women at-risk of an alcohol-related pregnancy.

Design and Method: The methodology has been matched against the aims

- For Aim 1, using these data we will plot a number of maternal characteristics of alcohol-related pregnancies including reasons for admission, statistical local areas of residence and hospital codes to determine geographical indicators of risk. We will also plot neonatal outcomes including low birth weight, poor growth, prematurity and transfer rates to specialist care.
- Aim 2 analyses will assess the effect of the 2001 alcohol guidelines by comparing drinking patterns and their underlying factors among women who were pregnant in 1996, 2000, 2003 or 2006. We will plot these longitudinal alcohol patterns against time since pregnancy and change in alcohol guidelines to determine whether the change in alcohol guidelines has altered women's drinking pattern in pregnancy. We will use longitudinal analyses to identify the relationships between underlying risk factors and drinking patterns during pregnancy.
- While the quantitative analyses (Aims 1 and 2) will determine risk factors for unsafe alcohol use during pregnancy, Aim 3 will elaborate on those findings by establishing what influences women's decisions about drinking during pregnancy, and by exploring the perceptions of service providers about these decisions. To meet this aim a number of focus groups will be conducted with high risk women, women in the general community and health service providers.
- The new Aim 4 questionnaire will form the basis of a pre-intervention measure, to be used in a community capacity building intervention, aimed at addressing the unmet needs of pregnant women with regard to alcohol harm.

Progress: Aims 1 and 3 are currently underway; Aim 2 paper has been completed and submitted for peer review, and Aim 4 will be addressed upon completion (or near-completion) of Aims 1-3.

Date Commenced: April 2008

Expected Date of Completion: Early 2010

Funding: NSW Health

IDENTIFICATION OF POTENTIAL HARMS

Cannabis Cohort Research Consortium

NDARC Staff: Delyse Hutchinson and Richard Mattick (coordinating investigators) with Jan Copeland, Louisa Degenhardt, Elizabeth Maloney, Marian Shanahan, Edmund Silins, Wendy Swift, Maree Teesson and Laura Vogl

Other Investigators: Steve Allsop (National Drug Research Institute), Tanya Caldwell (Australian National University), David Fergusson (University of Otago, NZ), Wayne Hall (University of Queensland), Jake Najman (Queensland Alcohol and Drug Research and Education Centre), George Patton (University of Melbourne), Richie Poulton (University of Otago, NZ), Bryan Rodgers (Australian National University) and John Toumbourou (Deakin University)

Aims: The Consortium aims to foster relations among partners; identify limitations in knowledge on patterns and causes of cannabis use, potential harms and adverse outcomes; examine priority issues in an efficient and timely way through secondary data analysis of existing national and international cohorts; and, provide health and policy feedback to the commonwealth, health professionals and the public.

Design and Method: The consortium is a newly developing collaboration which stemmed from the need to better address pressing questions about the relationship between cannabis, other drug use, life-course outcomes (e.g., early school drop-out) and mental health in children and young adults. Longitudinal cohort research provides the best available methodology for assessing these relationships. The Consortium aims to achieve its goals by involving partners in capacity building activities, and by providing capacity to allow collaborative work to proceed to high-level grant application stage. Collaboration between researchers involved in existing cohorts allows for better assessments of relationships to be made, uses existing data more efficiently and increases opportunities for knowledge translation.

Progress: A pilot study has been completed which aimed to determine the feasibility of combining data from the Christchurch Health and Development Study (CHDS), the Mater University Cohort Study (MUSP) and the Victorian Adolescent Health Cohort Study (2000 Stories), to potentially strengthen associations between early cannabis use and educational outcomes. Findings are currently being prepared for publication. Additionally, a framework for measuring cannabis use is in the initial stages of development and a review which assesses the link between cannabis and psychosis is being prepared for publication. Several aspects of the Consortium's work will be presented at the ARACY Conference, Melbourne.

Date Commenced: August 2006

Expected Date of Completion: Ongoing

Funding: Australian Research Alliance for Children and Youth (ARACY)

Ten-Year Follow Up of a Cohort of Heroin Dependent Prisoners

NDARC Staff: Sarah Larney and Kate Dolan

Rationale: Methadone maintenance treatment (MMT) is an effective treatment for opioid dependence that reduces criminal activity and mortality. This study will analyse these negative outcomes for a group of men recruited in prison in 1997-1998.

Aims: To determine:

- If the duration of methadone treatment is associated with reductions in court appearances and time incarcerated.
- If opioid-using prisoners released from prison on MMT have reduced court appearances and incarceration episodes compared to opioid-using prisoners released from prison while not on MMT.
- If the duration of methadone treatment is associated with reductions in mortality among ex-prisoners.
- If opioid-using prisoners released from prison on MMT are less likely to die than opioid-using prisoners released from prison not on MMT.

Design and Method: Outcomes for 382 opioid-using prisoners recruited in 1997-1998 will be examined by linking methadone treatment records, court appearance records, imprisonment records and mortality records.

Progress: Ethical approval for the project has been received and data linkage has commenced.

Date Commenced: April 2008

Expected Date of Completion: March 2010

Funding: National Drug Law Enforcement Research Fund (NDLERF)

Attitudes Towards, Knowledge of, and Prevalence of Illicit Drug Use among Elite Athletes

NDARC Staff: Matthew Dunn, Johanna Thomas, Wendy Swift, Lucy Burns and Richard Mattick

Aims: The aim of this study is to investigate a range of substance use issues among a sample of elite athletes in Australia. The study will involve:

- Assessing knowledge about illicit drugs among this group.

- Assessing lifetime and past-year substance use.
- Examining the sources of information which athletes use to inform their knowledge of illicit drugs.
- Exploring attitudes towards illicit drug policies.
- Identifying the need for resources, education programs and policy approaches.

Design and Method: This study will consist of two components. Firstly, a cross-sectional sample of 700 elite athletes from a range of national sporting organisations. For this component, participants will self-complete a structured interview schedule. The second component will involve interviews with key experts who, through the nature of their employment (such as trainers, coaches, and other personnel from sports institutions /organisations), are in regular contact with athletes. Key experts will be interviewed using a semi-structured interview schedule.

Date Commenced: July 2008

Expected Date of Completion: December 2010

Funding: Australian Government Department of Health and Ageing

The Characteristics of Cannabis in Australia

NDARC Staff: Wendy Swift and Paul Dillon

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

Rationale: There is little detailed information about the Australian cannabis market, including the chemical characteristics of the locally available cannabis product. The collection of accurate and current data is crucial for providing appropriate, evidence-based information to the Australian public, to cannabis users and their families, and to health, law-enforcement and other related practitioners. The study builds on recently completed pilot work on cannabis potency and contamination.

Aims: This study aims to establish a methodology to assess the characteristics of the locally available cannabis product, and to use this methodology to collect information on cannabis seizures in Western Australia.

Design and Method: Chemical analyses of cannabis seizures will be informed by a recent pilot project comprising a literature review and interviews with an international group of key experts on potency and contamination. This research has identified substantial variability in cannabis potency but an overall trend towards a modest increase in the US and some European countries. It has also identified the potential for contamination of available cannabis product with naturally occurring fungi and moulds, as well as pesticides. We will conduct laboratory analysis of cannabis seizures in the WA jurisdiction over a 6 to 12 month period. These analyses will:

CURRENT PROJECTS

- Measure potency: the ratio of % of the active ingredient THC to % of the chemical cannabidiol (CBD) (n=approx. 200 samples).
- Screen for a selected number of contaminants based on those identified in pilot work, (maximum n=100 samples), such as natural contaminants (e.g., moulds, bacteria and fungi), growth enhancers and pesticides.
- Collect, where available, information on type and provenance of each seizure, and related information (e.g., presence of pesticides at seizure) that may prove useful in linking cultivation methods to the outcomes of interest.

Benefits: The project has several potential public health and law enforcement benefits, including:

- The provision of important Australian data on the characteristics of cannabis, which can aid in the education of users and health professionals about the health risks associated with market practices.
- The protocol may serve as a model to be expanded to other jurisdictions to provide routine monitoring and to measure longitudinal changes (e.g., in potency) that may result from policy, law enforcement and public health strategies.
- Contributing to increasing the capacity of health, education and law enforcement programs to be seen as credible sources of information about the effects of cannabis.
- Intersectoral collaboration between NCPIC (including its consortium members NDARC and NDRI) and the Forensic Science Laboratory at the Chemistry Centre of Western Australia (CCWA).

Progress: A project meeting was held in Perth in October 2008 to finalise the methodology and logistics of sampling and testing. The project is currently awaiting final clearance from the WA Police Service prior to commencing analyses.

Date Commenced: September 2008

Expected Date of Completion: September 2009

Funding: Australian Government Department of Health and Ageing via the National Cannabis Prevention and Information Centre (NCPIC)

Impact of Parental Substance Use on Infant Development and Family Functioning: a pilot study

NDARC Staff: Delyse Hutchinson, Elizabeth Maloney, Richard Mattick and Lucy Burns

Other Investigators: Steve Allsop (National Drug Research Institute), Jake Najman (Queensland Alcohol and Drug Research and Education Centre), Elizabeth Elliott (University of Sydney; Children's Hospital at Westmead) and Sue Jacobs (Royal Prince Alfred Hospital)

Aims: The aims of the pilot study are to:

- Establish the feasibility of recruiting and following up a group of pregnant women (including a subsample of high risk women attending a specialist drug and alcohol pregnancy service), and the feasibility of recruiting their partners.
- Monitor alcohol use patterns and mental health in pregnant women and their partners.
- Examine the relationship of maternal and paternal alcohol use and mental health with obstetric and neonatal outcomes for mothers and infants.
- Determine how prenatal alcohol use and mental health problems in pregnant women and their partners impact on infant development (physical, cognitive, behavioural and emotional) and family functioning (family cohesion, conflict, and parent-infant attachment).

Design and Method: 100 pregnant women and their partners will be recruited during the prenatal period. Parents are eligible to participate in the study from conception up to 40 weeks gestation. Participants will be recruited through antenatal services attached to the major hospitals in Sydney. Participants will also be recruited through specialist drug and alcohol antenatal services to ensure that an adequate number of parents with substance use problems are included in the sample. Infants will be assessed at 12 months of age.

There will be five assessment waves in the cohort study: Baseline (Trimester 1: conception to 12 weeks), Follow-up I (Trimester 2: 13 weeks to 27 weeks), Follow-up II (Trimester 3: 28 weeks onwards), Follow-up III (60 days Postnatal) and Follow-up IV (Infant age 12 months). Mothers will be assessed at all time points, partners will be assessed at Baseline and Follow-up IV, and infant assessments will be conducted postnatally and at Follow-up IV. Multi-method assessments will be utilised including interview, questionnaire and observational assessment measures. DNA is also being collected via cheek swab for assess epigenetic changes over the first year of life (epigenetics refer to the programming of gene expression by environmental exposures such as drug use, stress, or diet).

Progress: 68 women recruited to date from the general antenatal clinic. Over 90% of partners have agreed to participate. Preliminary findings presented at the Langton Centre 'Meeting of the Minds' seminar series. To date, 44 8-week postnatal follow-ups have been completed, with genetic data collected and currently being stored at the Murdoch Children's Research Institute in Melbourne. Recruitment of the high risk sample of women from the drugs in pregnancy treatment service due to commence shortly. A number of grant applications have been submitted over the last year to help recruit 100 families.

Date Commenced: March 2008

Expected Date of Completion: Ongoing

Funding: UNSW Goldstar Award for 2008

HEALTH ECONOMICS

Building Capacity in Health Economics

NDARC Staff: Chris Doran

Other Investigators: Rob Carter (Deakin University), Jeff Richardson (Monash University), Jan Barendregt, Theo Vos, Wayne Hall and Tim Coelli (University of Queensland) and David Evans (World Health Organisation)

Aims: This proposal aims to build research capacity and methodological sophistication in economic evaluation and priority setting in health. An unprecedented critical mass of Australian experts in economic evaluation will be created who can then train a new generation of researchers. The proposed outcomes are:

- An increased number of independent researchers with expertise in economic evaluation/priority setting who develop their own research programs.
- Establish a critical mass of researchers who can improve the standard and acceptance of economic evaluation and priority setting methods in health, including priority setting for Indigenous Australians and other groups with special needs.
- Value-adding to existing priority setting and economic evaluation projects by validating methods and developing new approaches.
- Effective linkages between researchers and policy makers, advocates and other stakeholders to increase appreciation of the use of economic evaluation and priority setting in health policy and clinical practice.
- Research transfer through workshops, presentations and peer-reviewed publications.

Design and Method: The project will address the following:

- Assess the impact of economic evaluation and priority setting methods on resource allocation in Australia to better understand the methodological, conceptual, practical and political barriers to its use.
- Establish a critical mass of researchers who can improve the standard and acceptance of economic evaluation and priority setting methods in health, including priority setting for Indigenous Australians and other groups with special needs.
- Add value to existing priority setting and economic evaluation projects by validating methods and developing new approaches.
- Develop effective linkages between researchers and policy makers, advocates and other stakeholders to increase appreciation of the use of economic evaluation and priority setting in health policy and clinical practice.

- Promote research transfer through workshops, presentations and peer-reviewed publications.

Progress: The grant commenced in 2007 with the team meeting to: refine the priority areas; discuss mentor arrangements and discuss recruitment strategies for team investigators; re-assess deliverables in accordance with budget cuts and progress sub-contracts between the collaborating universities. Professor Carter relocated from University of Melbourne to Deakin University during 2007 and Professor Doran relocated from the University of Queensland to NDARC in early 2008. Collaborative agreements were not signed until December 2007 and research began in April 2008. Four postgraduate fellows have commenced work on the grant (three in Melbourne and one in Queensland).

Date Commenced: April 2008

Expected Date of Completion: April 2012

Funding: National Health and Medical Research Council (NHMRC)

DRUG MARKET ANALYSIS AND SUPPLY REDUCTION

The Illicit Drug Reporting System (IDRS)

NDARC Staff: Lucy Burns, Natasha Sindicich, Jennifer Stafford, Benjamin Phillips, Joanne Cassar and Richard Mattick

Other Investigators: Chris Moon and Tania Davidson (NT Dept of Health and Community Services), Rosa Alati and Rebecca Rainbow (Queensland Alcohol and Drug Research and Education Centre), Robyn Vial and Nancy White (Drug and Alcohol Services SA), Raimondo Bruno and Barbara de Graaff (University of Tasmania), Danielle Horyniak (Burnet Institute) and Simon Lenton (National Drug Research Institute)

Aims: The aims of this project are:

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

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

- A quantitative survey of injecting drug users (IDU).
- A semi-structured interview with key experts (KE), who are professionals working in the illicit drug field, and have regular contact with and/or specialised knowledge of illicit drug users, dealers or manufacture.

CURRENT PROJECTS

- A collation of existing indicator data on drug-related issues.

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

Progress: The IDRS is an ongoing project that is conducted annually in all Australian jurisdictions. In 2008, over 900 IDU were interviewed across Australia, providing information on their use patterns, drug markets and related issues. Key experts from a range of professions provided information on the ecstasy and related drug users they had contact with. Indicator data including Australian Customs Service seizures, purity analysis, overdose and treatment data were examined. In 2008, the annual National Drug Trends Conference was held in Sydney in November, in conjunction with the annual Australasian Professional Society on Alcohol and other Drugs (APSAD) conference, where a summary of jurisdictional drug trends findings was provided, in addition to a national overview and presentations on specific areas of interest arising from the data, to relevant health professionals, law enforcement, and policy makers. Throughout the year, quarterly bulletins outlining current drug trends or issues of interest were also disseminated. These bulletins are available on the NDARC website to ensure broader dissemination.

Date Commenced: January 1997

Expected Date of Completion: Ongoing

Funding: Australian Government Department of Health and Ageing

The Ecstasy and Related Drugs Reporting System (EDRS)

NDARC Staff: Lucy Burns, Natasha Sindicich, Jennifer Stafford, Joanne Cassar, Benjamin Phillips, Laura Scott and Richard Mattick

Other Investigators: Fabian Kong (Burnet Institute), Raimondo Bruno and Allison Matthews (University of Tasmania), Robyn Vial and Nancy White (Drug & Alcohol Services South Australia), Rosa Alati and Lucy Kennedy (Queensland Alcohol and Drug Research and Education Centre), and Simon Lenton (National Drug Research Institute)

Aims: The aims of this project are:

- To describe the characteristics of a sample of current regular ecstasy users interviewed in each capital city of Australia.
- To examine the patterns of ecstasy and related drug (ERDs) use of these samples.

- To document the current price, purity and availability of ERDs across Australia.
- To examine the incidence and nature of harms related to the use of ERDs.
- To identify emerging trends in the ERDs market that may require further investigation.

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

The EDRS uses a similar methodology to the Illicit Drug Reporting System (IDRS). Regular ecstasy users are interviewed as they were identified as a group of drug users that are able to provide the required information on patterns of ecstasy and related drugs (ERDs) use, the current availability, price and purity of ERDs and perceived drug-related health issues associated with ERDs use. A semi-structured survey of experts in the field of ERDs (e.g. party promoters, treatment providers and law enforcement personnel) is also conducted and indicator data (e.g. purity of drug seizures and overdose rates) are analysed. These data sources are examined together to identify convergent trends in ERDs use and markets.

Progress: The EDRS was conducted successfully in every state and territory in 2008. Over seven hundred regular ecstasy users were interviewed, providing information on their drug use patterns, ERD markets and related issues. Key experts from a range of professions provided information on the ecstasy and related drug users they had contact with. Indicator data including Australian Customs Service seizures, purity analysis and treatment data were examined. In 2008, the annual National Drug Trends Conference was held in Sydney in November, in conjunction with the annual Australasian Professional Society on Alcohol and other Drugs (APSAD) conference, where a summary of jurisdictional drug trends findings was provided, in addition to a national overview and presentations on specific areas of interest arising from the data, to relevant health professionals, law enforcement, and policy makers. Throughout the year, quarterly bulletins outlining current drug trends or issues of interest were also disseminated. These bulletins are available on the NDARC website to ensure broader dissemination.

Date Commenced: January 2003

Expected Date of Completion: Ongoing

Funding: Australian Government Department of Health and Ageing

PREVENTION AND EARLY INTERVENTIONS

Alcohol Action in Rural Communities (AARC)

NDARC Staff: Courtney Breen, Josh Byrnes, Anton Clifford, Suzanne Czech, Catherine Deans, Chris Doran, Alys Havard, Hector Navarro, Stephanie Love, Richard Mattick and Anthony Shakeshaft

Other Investigators: Rob Sanson-Fisher (University of Newcastle), Ann Roche (Flinders University), and Catherine D'Este (University of Newcastle)

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

Design and Method: The community action approach used in this study involves the systematic and coordinated implementation of a range of intervention strategies across whole communities. The simultaneous and sustained implementation of a number of complementary interventions aims to maximise their combined effect, even though the interventions themselves may be of variable effectiveness. This approach will be evaluated using a randomised controlled trial design. Ten matched pairs of rural communities were identified and one community in each pair was randomly allocated to the intervention condition, and the other to the control condition. Alcohol-related harm will be measured using alcohol-related problems (as measured by a community survey), alcohol-related criminal incidents, alcohol-related traffic accidents, alcohol-caused hospital admissions and alcohol-related emergency department presentations. This project will also undertake a cost-benefit economic analysis to determine whether the community action approach is associated with positive net social benefits.

Progress: Pre-test data continue to be analysed and written-up for publication. A number of interventions have occurred and are continuing: GP training in screening and brief intervention; web-based self-screening and advice; access to controlled drinking program by correspondence; high school interactive education session; self-screening and advice in chemists; workplace policies and practices; targeting weekends at high-risk of alcohol-related harm; feedback of results and alcohol harms through local media; program targeting young people at high-risk of alcohol harm; drink-driving campaigns; the Good Sports program; financial advice; parenting resources; and liquor accords. The post-test survey will be conducted in March 2010 and the final results analysed and written up by July 2010.

Date Commenced: January 2004

Expected Date of Completion: July 2010

Funding: Alcohol Education and Rehabilitation Foundation (AERF)

CLIMATE Schools: the development and evaluation of an interactive computer based prevention program for cannabis and psychostimulants

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

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

Background: The CLIMATE Schools Alcohol Module for Year 7/8 students was completed in 2004 and trialled over ensuing years. It utilised a cartoon-based soap opera which allowed students to learn about preventive strategies in real-life contexts. Results showed that the CLIMATE Schools program was more effective than standard alcohol prevention education for minimising alcohol-related harm, and increasing young people's skills and awareness. Further modules are being developed in collaboration with students, teachers and experts, to enable teachers to implement a sequence of developmentally appropriate drug prevention programs in schools.

Aims: To develop and evaluate the effectiveness of an evidence-based, computer-driven, prevention program to reduce use and harms associated with psychostimulants and cannabis, in order to build on the advantages demonstrated by the earlier CLIMATE Schools: Alcohol Module.

Design and Method: An interactive computer based prevention program, *CLIMATE Schools: Psychostimulant and Cannabis Module* was developed for evaluation with Year 10 students, using a cluster randomized controlled trial. The trial is designed to assess the impact of the CLIMATE intervention on students' knowledge of cannabis and psychostimulants, attitudes towards their use, drug use behaviour (e.g., lifetime use, recent use and frequency of use) and intention to use cannabis and psychostimulant in the future.

Progress: The RCT evaluating the CLIMATE Schools: Psychostimulant and Cannabis Module is currently underway. This RCT involves 21 schools across New South Wales and the Australian Capital Territory. The trial will be completed in 2009 with final data collected in April/May and the results will be available in August 2009.

Date Commenced: June 2006

Expected Date of Completion: September 2009

Funding: Australian Government Department of Health and Ageing, AERF, ARC, NHMRC

CURRENT PROJECTS

Alcohol Use During Pregnancy: formative intervention research

NDARC Staff: Delyse Hutchinson

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

Rationale: Exposure to alcohol during the prenatal period remains the leading cause of preventable birth defects and developmental problems in Australia and as such has generated increase attention from policy, research and health practitioners. A large proportion of women reduce or stop alcohol use when they find out that they are pregnant, however, there is a proportion of women who continue to drink in moderation, and an additional group who continue to drink to risky levels while pregnant.

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

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

Design and Method: The study is designed to assess factors that contribute to alcohol consumption during pregnancy, and to identify potential intervention strategies to reduce alcohol consumption during pregnancy. The study targets pregnant women who attend public hospitals in Perth, and who are in their second or third trimester of pregnancy. Participants have identified themselves as current alcohol drinkers, 18 years of age or older, and who have English as their primary language. There are two components to this study. They are as follows:

Part A: Quantitative Project

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

Part B: Qualitative Project

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

Date Commenced: October 2006

Expected Date of Completion: December 2009

Funding: National Drug Research Institute

TREATMENT AND OTHER INTERVENTIONS

The Introduction of Suboxone® (buprenorphine-naloxone) in Australia: monitoring the extent of diversion and related harms

NDARC Staff: Louisa Degenhardt, Richard Mattick, Briony Larance and Susannah O'Brien

Other Investigators: Robert Ali (Drug & Alcohol Services South Australia); James Bell (South East Sydney and Illawarra Area Health Service); Adam Winstock and Nick Lintzeris (Sydney South West Area Health Service)

Aims: Buprenorphine-naloxone (Suboxone®) was registered in Australia in 2005 by the Therapeutic Goods Administration and has been available on the Pharmaceutical Benefits Scheme since April 2006. The present study monitors the extent of diversion and injection of buprenorphine-naloxone over the three years following its release.

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

- Interviews with regular injecting drug users (through the Illicit Drug Reporting System).
- Interviews with pharmacotherapy clients (methadone, buprenorphine and buprenorphine-naloxone clients in NSW, Vic and SA).
- Interviews with key experts (e.g. clinicians, pharmacists, NSP workers, outreach workers).
- A postal survey of authorised prescribers.
- Prescription data.
- Indicator data (e.g. NSP data, NCIS).

Progress: The project commenced in March 2006. An Advisory Committee (made up of AOD specialists and researchers from across Australia) was established to inform the methodology and development of the project. The above methodology was agreed and ethical approval was obtained from UNSW and the relevant health services. Interviews with regular injecting drug users for the Illicit Drug Reporting System were conducted in 2006, 2007 and 2008. Data was collected for the first cross-sectional survey of approximately 400 pharmacotherapy clients (NSW, Vic and SA), including detailed interviews with 39 key experts and the national postal survey of prescribers. Early findings have been presented at various conferences and two papers submitted.

Date Commenced: March 2006

Expected Date of Completion: March 2009

Funding: Reckitt Benckiser Pty Ltd

The Efficacy of an Intervention for Post Traumatic Stress Disorder (PTSD) Among Illicit Drug Users

NDARC Staff: Katherine Mills, Maree Teesson, Claudia Sannibale, Emma Barrett, Philippa Farrugia, Sabine Merz and Julia Rosenfeld

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

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

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

Design and Method: A randomised controlled trial is being conducted to address the research aims. One-hundred and three participants were recruited from alcohol and other drug treatment services in greater Sydney and via advertisements. Participants were randomised to one of two groups stratified according to gender: (i) those who receive the intervention (n=55), and (ii) those who receive standard care (n=48).

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

Progress: Recruitment for the randomised controlled trial commenced in April 2007. Follow-up of participants is continuing.

Date Commenced: January 2007

Expected Date of Completion: December 2011

Funding: National Health and Medical Research Council and NSW Health

Integrating Treatment for Alcohol Use Problems and Comorbid PTSD

NDARC Staff: Claudia Sannibale, Maree Teesson, Katherine Mills, Kylie Sutherland, Kirsty Taylor Delphine Bostock-Matusko and Marie-Andree Peek-O'Leary

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

Aims: The study aims to determine the efficacy of an integrated cognitive behaviour therapy (CBT) intervention for PTSD and alcohol use problems in the treatment of these disorders in the general community. It aims to compare treatment for these problems delivered simultaneously with treatment for alcohol use alone.

Design and Method: This is a randomised controlled trial of CBT for PTSD and alcohol use problems. To be eligible, participants are required: to be 18 years or older; consume alcohol at risky levels (drinking ≥ 29 drinks per week for men and ≥ 15 drinks per week for women); meet diagnostic criteria for PTSD; be currently stable in terms of self-harm, suicide intent or psychosis; and have basic literacy in English. Participants are recruited from the general community, GPs, psychiatrists, specialist drug and alcohol and anxiety clinics, and a range of organizations. Recruitment and treatment is currently underway at four sites in Sydney (NDARC, Centre for Addiction Research, Western Sydney Area Health, Drug Health Services, Royal Prince Alfred Hospital and Liverpool Hospital, Sydney South Western Area Health Service and Herbert Street Clinic, Northern Sydney Central Coast Area Health Service)

Progress: One hundred and forty-four individuals have enquired about participation of which over 100 have been screened and 40 have been recruited to the study. Twenty-five post-treatment follow-up assessments have been completed to date which are showing marked, clinically significant, improvements in symptoms of PTSD and alcohol use problems in the study sample.

Date Commenced: June 2007

Expected Date of Completion: June 2010

Funding: National Health and Medical Research Council (NHMRC)

CURRENT PROJECTS

Development and Evaluation of Specialist Services for Female Drug Users in Iran

NDARC Staff: Kate Dolan

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

Aims: The aims of this project are as follows:

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

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

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

Date Commenced: May 2007

Expected Date of Completion: November 2009

Funding: The Drosos Foundation, Switzerland

Clinical Guidelines for the Management of Cannabis Use Disorder

NDARC Staff: Annie Frewen and Jan Copeland

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

Design and Method: The Cannabis Guidelines are being developed in accordance with the NHMRC Clinical Practice Guidelines, and a process influenced by Finnish researcher Kettil Bruun, to reach clinical consensus. Therefore, they will be based on a synthesis of the best

available evidence (as identified by a background literature review and a further paper that makes clinical recommendations based on the evidence) and a consensus among a multidisciplinary panel of experts (including academics and clinicians).

Progress: The Guidelines are in the final steps of consultation. In early 2009, the guidelines will be circulated to all clinicians and experts involved in the workshop and/or background papers. The Guidelines will be tailored to reflect feedback from these individuals and will then go through the process of gaining external feedback. The final draft of the Guidelines is due to be submitted to the Australian Government Department of Health and Ageing in May 2009.

Date Commenced: August 2007

Expected Date of Completion: May 2009

Funding: Australian Government Department of Health and Ageing

Child Protection and Mothers in Substance Abuse Treatment

NDARC Staff: Stephanie Taplin and Richard Mattick

Aims: Parental substance misuse has become an issue of major concern to child protection agencies - when and how to intervene when children are in the care of parents who are misusing substances. Anecdotal reports suggest that significant numbers of parents are entering drug treatment services in response to the involvement of the child protection system in NSW. Entering treatment and ceasing drug use may be a condition of retaining parental responsibility for their children. There have been very few studies that have examined the relationship between substance abuse treatment and child welfare outcomes. This study aims to increase our knowledge and understanding of these complex relationships by undertaking a study with a group of women in opioid pharmacological treatment in NSW.

Design and Method: The main study involves the recruitment of 200 women who are in pharmacological treatment in NSW and who have a child or children under the age of 16 years. Women will be asked to complete a one-off face-to-face interview about their own histories, and their involvement with both drug treatment programs and child protection services. Information will be predominantly collected via interview, but their consent will also be sought to access their drug treatment and child protection records (where relevant). Key informant interviews are also being conducted with service providers to obtain background information about the way agencies are working in this area.

Progress: The literature has been reviewed as part of the initial stage of the project and the detailed study design has largely been completed. Ethics approvals have been obtained from the UNSW Ethics Committee and also through the National Ethics Application process.

Key informant interviews commenced in late 2008 with the main study component expected to be underway in early 2009.

Date Commenced: February 2008

Expected Date of Completion: March 2011

Funding: NSW Department of Community Services and UNSW

Suicide Risk Assessment and Intervention Strategies: current practices among drug and alcohol treatment providers

NDARC Staff: Joanne Ross, Shane Darke, Erin Kelly and Kate Hetherington

Aims: This project has the following aims:

- To examine existing suicide risk assessment and intervention strategies used by drug and alcohol treatment providers, in order to document and understand current practice in residential rehabilitation services.
- To identify additional or under-utilised opportunities for intervention.
- If appropriate, to outline the core components of a potential suicide risk assessment tool for drug and alcohol workers.

Design and Method: This study employs a cross-sectional design. A semi-structured questionnaire is being used to interview treatment agency staff responsible for the case management of drug and alcohol clients about their current suicide risk assessment practices. The questionnaire examines the frequency and extent of current screening practices, barriers to conducting suicide assessments, perceived needs in terms of assessment tools, and knowledge of suicide risk factors. The Clinical Managers of these services are also being asked about current policies and procedures relating to suicide risk assessment. All generalist residential rehabilitation services across Australia (N=73) are being invited to participate.

Progress: Questionnaires for the study have been designed and ethics clearance obtained. Interviewing will commence early in 2009.

Date Commenced: December 2008

Expected Date of Completion: November 2009

Funding: Australian Government Department of Health and Ageing

Evaluation of the Connections Project

NDARC Staff: Kristy Martire

Aims: The Connections Project is run through Justice Health to improve continuity of care for adult prisoners with histories of drug use who are released back into the community. This project will analyse existing Connections Project data to:

- Describe Connections patients and change over time.
- Describe major domains of service delivery.
- Report characteristics and predictors of project completers and non-completers.
- Report on reincarceration and participation in community Opioid Treatment Programs (OTP).

Design and Method: Analysis of the existing Connections dataset was undertaken in order to fulfil the aims of the project. The report was based upon data available from 829 patients assessed for Connections eligibility, 285 of whom also completed post-participation questionnaires. Reincarceration and OTP participation data were also available for 843 and 725 of these patients respectively. Results were reported on the basis of gender and Indigenous status, as well as program completion status. Regression analyses were conducted to predict completion status and amount of time spent in the community post-release.

Date Commenced: July 2008

Expected Date of Completion: September 2009

Funding: Justice Health, NSW Health

Fine-Related Debt among Substance-Using Offenders

NDARC Staff: Kristy Martire and Devon Indig

Other Investigators: Sandra Sunjic, Libby Topp (Justice Health)

Aims: To investigate the prevalence and magnitude of fine-related debt among substance-using offenders, and the physical and psychological impact of these debts (and associated sanctions) upon the broader social functioning of these individuals.

Design and Method: Participants in the Justice Health Connections program were recruited for participation in the debt study. Participants were asked about the presence and magnitude of various forms of debt, as well as fines specifically. They were also asked to rate the stress, significance and impact of the various forms of debt. With consent, this information was then linked to State Debt Recover Office records of outstanding fines, as well as the Connections participant database. Descriptive analyses will be conducted relating to the prevalence, magnitude and impact of fine related debt.

CURRENT PROJECTS

Comparisons will be made between the broader social functioning of those with no or low levels of debt, or with low or no concern regarding their debt, as opposed to those with high levels of debt or debt related stress.

Progress: Data analysis has begun.

Date Commenced: October 2008

Expected Date of Completion: October 2009

Funding: NSW Health Drug and Alcohol Research Grants Program

Magistrates Early Referral Into Treatment (MERIT) Research Bulletins

NDARC Staff: Kristy Martire and Sarah Larney

Aims: To conduct three research studies relating to the MERIT program, participant characteristics, and health/criminal justice outcomes.

Design and Method: Analysis of existing datasets was undertaken in order to explore three issues identified by the Crime Prevention Division and the MERIT steering committee:

- Aboriginal participation in MERIT.
- Women and the MERIT program.
- Principal drug of concern and MERIT/RAD outcomes.

Overall program activity data was analysed for approximately 10, 500 individuals referred to MERIT between August 2004 and June 2008. In addition, referral, service provision, health outcomes and criminal justice data was analysed for various subsets of this total population. Statistical comparisons were made both between groups of interest (i.e., by gender, Indigenous status and principal drug type), as well as pre- and post-MERIT participation.

Progress: The first research bulletin, *Women and the MERIT Program*, was ready for publication at the end of 2008.

Date Commenced: July 2008

Expected Date of Completion: September 2009

Funding: Crime Prevention Division, NSW Attorney Generals Department

Magistrates Early Referral Into Treatment (MERIT) Annual Report 2007

NDARC Staff: Kristy Martire and Sarah Larney

Aims: To produce the 2007 Annual Report for the MERIT program.

Design and Method: The 2007 Annual Report describes program activity, program exits, health outcomes, factors associated with program completion and criminal justice outcomes for those individuals referred to the MERIT program during 2007. Analysis was conducted on an existing dataset of 2,949 referred defendants.

Date Commenced: December 2008

Expected Date of Completion: September 2009

Funding: Crime Prevention Division, NSW Attorney Generals Department

Improving Shared Healthcare for Methadone Patients with Hepatitis C

NDARC Staff: Erol Digiusto, Julia Purchas and Richard Mattick

Other Investigators: Robert Batey (Wyong Hospital), Pooba Govender (Denison Street Clinic, Wollongong), Robert Anderson (Bungora Drug & Alcohol Centre, Wollongong), Paul Webster (Drug & Alcohol Service, Port Macquarie), Sally McKenna (Wyong Hospital), Paul McGeown (Riverlands Drug & Alcohol Centre, Lismore), Jack Kehoe (Praxis Centre Drug & Alcohol Service, Coffs Harbour), Francis Haldar (Scott Street Clinic, Liverpool), Martin Veysey (Gosford Hospital), Andrew Eakin (Hastings Day Surgery, Port Macquarie), John Wenman (Coffs Harbour Base Hospital), Mark Cornwell North Coast Area Health Service), John Quin (Bigge Park Centre, Liverpool), David Gillespie (Port Macquarie Base Hospital), Rowena Friend (forensic psychology student)

Aims: This study is to evaluate an intervention process, the aim of which is to develop and sustainably establish a collaborative shared-care environment which optimally supports methadone patients in undertaking diagnostic assessment and antiviral therapy for hepatitis C. More specific aims are to increase the number of methadone patients who:

- undertake diagnostic assessment;
- are referred to hepatitis C antiviral therapy services;
- are assessed as being suitable for antiviral therapy;
- undertake and adhere to antiviral therapy.

Design and Method: We are conducting this study through methadone and hepatitis C clinics in NSW metropolitan and regional locations in order to compare the process and outcomes of Usual Care (at Control locations) with the effects of Collaborative Shared Care (at Intervention locations). The intervention involves identifying site-specific service development and shared-care goals with the clinicians at the methadone and hepatitis clinics; visiting the intervention sites to conduct training sessions and discuss relevant clinical guidelines; regularly communicating with intervention-site clinicians to monitor and support implementation of the agreed service development processes; regularly contacting recruited patients to monitor their progress.

Progress: Nine methadone clinics linked to six hepatitis C therapy services are participating in the study, training workshops have been conducted, and patient recruitment is underway.

Date Commenced: April 2008

Expected Date of Completion: June 2010

Funding: NSW Health and an anonymous charitable foundation

The Michael Project Evaluation

NDARC Staff: Lucy Burns, Elizabeth Conroy and Emma Black

Other Investigators: Paul Flatau (Murdoch University), Kathryn Taylor (Murdoch University), Richard Bryant (Psychology, UNSW), Tim Marchant, Anne Hampshire, Kathryn di Nicola and Karen Larsen (Mission Australia)

Rationale: The Michael Project is a three-year collaboration between Mission Australia (MA) and a philanthropic individual which aims to develop a holistic approach to dealing with the issues of homelessness. The Michael Project works with homeless men in the greater metropolitan Sydney area who are clients of MA Supported Accommodation Assistance Program (SAAP) services. These services currently address a variety of needs including (but not limited to) outreach and comprehensive case management, specialist support and therapeutic programs, crisis and transitional accommodation, brokerage, education and vocational programs, and health care. The Michael Project will enhance these existing services through four integrated programs: Client Wellbeing and Counselling Intervention; Self-care and Health; Missionbeat Outreach Nurse; and Social Inclusion Skills Development.

Aims: The current study aims to evaluate the impact of the Michael Project on key outcomes associated with each of the five integrated programs. Specifically, this study aims to:

- Collect baseline data on a proportion of clients accessing five Sydney-based MA services to provide detailed information on the risk factors for homelessness among this client group.
- Collect follow-up information 3-months and 12-months post-baseline to assess changes in key client outcomes over time (e.g. substance use, quality of life, health status).
- Assess the impact of the number of MP services provided on key client outcomes (e.g. substance use, quality of life, health status).
- Identify key indicators of continued homelessness (homelessness risk factors).

Design and Method: Face-to-face longitudinal quantitative survey upon entry to a MA service (baseline), 3 months following entry, and 12 months

following entry. Qualitative component involving qualitative interviews with participants 12 months post-baseline, focus groups with service providers and service managers, and semi-structured self-complete survey with case workers. Evaluation of routine indicator data collected in relation to the Medibeat Nurse service.

Progress: Interviews and data collection are underway. The first release of baseline results is expected in late 2009.

Date Commenced: February 2008

Expected Date of Completion: December 2010

Funding: Private benefactor, via Mission Australia

Screening and Brief Intervention in Aboriginal Controlled Community Health Services in Rural NSW

NDARC Staff: Anton Clifford, Catherine Deans and Anthony Shakeshaft

Aims: To implement best-evidence screening and brief intervention for alcohol misuse into routine delivery in Aboriginal Community Controlled Health Services (ACCHSs) in rural NSW.

Design and Method: Pre/post intervention design using mixed methods to measure both the implementation process (qualitative and quantitative indicators) and intervention outcomes (quantitative indicators).

Progress: All pre-intervention data have been collected, staff training is completed and the qualitative process measure data have been obtained for analysis. All ACCHSs involved in the project have implemented screening and brief intervention and will continue with support from the project staff and locally identified and trained clinical staff.

Date Commenced: July 2008

Expected Date of Completion: September 2009

Funding: Australian Government Department of Health and Ageing, via the National Drug Research Institute (NDRI)

Evaluation of the Cannabis Check-Up among Young Cannabis Users with Co-Occurring Mental Health Conditions

NDARC Staff: Melissa Norberg, Robert Battisti and Jan Copeland

Aims: To assess the effects of a brief intervention, utilising motivational interviewing, functional analysis, and psychoeducational techniques, on cannabis-related

CURRENT PROJECTS

outcomes and motivation and perceived ability to reduce cannabis use. The intervention is designed to be an adjunct to treatment-as-usual, with a view to increase readiness for substance use change among young people with a mental health condition who are also regular users of cannabis.

Design and Method: This study will recruit participants from the Brain and Mind Research Institute (BMRI) or one of its subsidiaries/associates. Participants will be 50 young people (aged 14-25) who are receiving treatment for a mental health condition and regularly use cannabis. Participants will complete a baseline assessment, three sessions of treatment, and one- and three-month follow-up assessments. Half of the participants will have a delayed onset of treatment (three months), during which time they will receive treatment-as-usual, followed by additional follow-up assessments. Via the identification of maladaptive patterns of substance use behaviours, problem-solving around alternate, adaptive, behaviours, and the establishment of clear goals and values, it is anticipated that participants will feel more able to reduce/cease their cannabis use. Outcomes will be evaluated via measures of dependence, cannabis use, readiness and ability to change. The study therapist will participate in an 8-hour training workshop and receive fortnightly supervision. The independent evaluator will receive training in the delivery of the study assessments.

Progress: The project manager has recently been hired. A therapist and evaluator are currently being sought.

Date Commenced: December 2008

Expected Date of Completion: June 2010

Funding: Australian Government Department of Health and Ageing

Exploring the Relationship between Cannabis Use and Criminal Offending among Adults and Adolescents

NDARC Staff: Melanie Simpson, Jan Copeland and John Howard

Aims: To explore the relationship between cannabis use and criminal offending among both adults and adolescents.

Design and Method: This project is comprised of three smaller studies. The first is a prospective follow-up study of 300 young offenders aged 14-21 years recruited through community youth services and youth detention facilities. The second is an in-depth qualitative study of 20 heavy cannabis using young offenders. Half of the participants will have used cannabis prior to committing crime, while half will have initiated cannabis use after committing their first crime. The third study involves the secondary analysis of the Drug Use Monitoring Australia (DUMA) study data. This study will examine data collected from four sites across Australia between the years of 2000 and 2007, and will focus specifically on adult detainees over 18 years of age.

Progress: The study has received ethics approval and approval from DUMA and the Australian Institute of criminology. Recruitment will commence early 2009.

Date Commenced: July 2008

Expected Date of Completion: December 2010

Funding: Australian Government Department of Health and Ageing

Mail-Based Intervention for Cannabis Use

NDARC Staff: Tracey Wright, Melissa Norberg, Karina Hickey, and Jan Copeland

Aims: The project aims to test the effectiveness of mail-based psychological treatment for cannabis use and related problems.

Design and Method: The intervention is delivered by post; therefore, unlike with electronic therapies, no pre-existing technology is required to complete the treatment. The project uses cognitive-behavioural therapy, motivational interviewing and adherence techniques, along with relapse prevention methods. Participants receive six treatment modules, with feedback delivered four times, all via mail. The study employs a pre/post design to evaluate the feasibility and potential efficacy of the treatment.

Progress: Recruitment for the study has just commenced.

Date Commenced: October 2008

Expected Date of Completion: April 2010

Funding: Australian Government Department of Health and Ageing

Computer-Delivered Interventions for Substance Use: a meta-analysis

NDARC Staff: Sally Rooke, Jan Copeland and David Allsop

Aims: To quantify the overall effectiveness of computer-delivered interventions for substance use. In addition to determining the overall effectiveness of the interventions, the findings could suggest directions for future computer-delivered substance use interventions.

Design and Method: Meta-analysis of 44 effect sizes from randomised controlled trials, based on the responses of 10,773 individuals. Moderator variables will include age, gender, substance type, methodological quality, outcome variable, treatment location, treatment format (web or offline), inclusion of entertaining elements, provision of normative feedback, availability of

a discussion feature, number of treatment sessions, emphasis on relapse prevention, level of therapist involvement, and follow-up period.

Progress: Studies have been located and relevant data entered.

Date Commenced: November 2008

Expected Date of Completion: April 2009

Funding: Australian Government Department of Health and Ageing

Effects of Repeated Exposure to a Graphic Smoking Warning Image

NDARC Staff: Sally Rooke and Jan Copeland

Aims: To evaluate the effectiveness of a graphic smoking warning image in changing attitudes toward smoking, and to assess the speed and extent of habituation associated with repeated exposure to the image.

Design and Method: Repeated measures design involving 100 participants. Participants will report smoking status and attitudes toward smoking and cancer before viewing a graphic image of mouth cancer seven times over seven to 14 days.

Progress: Eighty participants have completed the study.

Date Commenced: July 2008

Expected Date of Completion: June 2009

Funding: Australian Government Department of Health and Ageing

Efficacy Study of the Cannabis Telephone Information and Helpline (CIH)

NDARC Staff: Peter Gates, Jan Copeland and Melissa Norberg

Aims: This study is designed to evaluate the Cannabis Information and Helpline (CIH). The study will establish who calls the CIH, what they expect from the service, how satisfied they are with the call, and how the call was helpful to them. In addition, we will investigate trends in counselling style as well as characteristics of callers and associations with call outcomes.

Design and Method: This study has two phases. First, CIH callers ($N = 200$) are asked to give consent to participate in a 15 minute phone interview. The interview assesses callers' satisfaction with the service and the counsellor that answered the phone, various aspects of the call, such as how easy it was for them to reach a

counsellor, what happened during the call, and how the call was helpful to them. Secondly, the data routinely collected by CIH will be analysed to identify patterns and if certain types of callers and counsellor behaviours are associated with differential outcomes.

Progress: Ethics approval has been granted, and Lifeline have confirmed CIH requirements can be met. Recruitment will commence early 2009.

Date Commenced: August 2008

Expected Date of Completion: August 2011

Funding: Australian Government Department of Health and Ageing

Telephone Counselling via the Cannabis Information and Helpline

NDARC Staff: Peter Gates, Jan Copeland and Melissa Norberg

Aims: This study is designed to develop a brief telephone-based cannabis treatment and compare the effectiveness of this treatment against a control condition.

Design and Method: This study will recruit participants who phone the Cannabis Information and Helpline requesting assistance in reducing their own cannabis use. Treatment effectiveness will be assessed by reduction in cannabis use and general improvements in quality of life. Three hundred thirty-six participants will be randomised into two groups: immediate treatment or three-months delayed treatment. Treatment is four sessions of cognitive-behavioural and motivational enhancement therapy. Treatment delivery is meant to be flexible, in that successful patients will continue to learn new skills during each session, whereas unsuccessful participants will undergo motivational interviewing and problem-solving techniques in an effort to address their lack of improvement. Participants will be interviewed pre-treatment, immediately post-treatment, and at one- and three-months post-treatment.

Progress: Ethics approval has been granted. Counsellors will be trained within the next few months.

Date Commenced: August 2008

Expected Date of Completion: August 2011

Funding: Australian Government Department of Health and Ageing

CURRENT PROJECTS

Web-Based Intervention for Cannabis Use

NDARC Staff: Sally Rooke, Jan Copeland and Melissa Norberg

Aims: To evaluate the efficacy of a web-based cognitive behavioural therapy (CBT) intervention in treating cannabis use and related problems.

Design and Method: This study is a two-group randomised controlled trial involving 800 participants. Participants assigned to the control condition will be sent a link to an educational resource relating to cannabis use. Participants assigned to the experimental condition will be sent a link to the intervention website, which will contain six CBT modules, assessments with feedback, and several optional extras. Between-groups comparisons will be conducted at post intervention and at a three-month follow-up. Primary outcome variables will be cannabis use, abuse, and dependence.

Progress: The website content plan is finished, and website development has commenced.

Date Commenced: October 2008

Expected Date of Completion: December 2010

Funding: Australian Government Department of Health and Ageing

Characteristics of Successful Versus Unsuccessful Cannabis Quitters

NDARC Staff: Sally Rooke and Melissa Norberg

Aims: This study will profile characteristics (demographics, cannabis use history, personality traits, mental health) and quitting strategies of individuals who have successfully quit using cannabis versus individuals who have attempted to quit, but have not been successful.

Design and Method: Participants will be classified into one of two-groups: individuals who used to smoke cannabis, but have abstained for at least a year, or individuals who currently use cannabis and have made at least one unsuccessful attempt to quit. Groups will be compared in terms of quitting strategies, demographics, and psychological characteristics.

Progress: The questionnaire has been designed and is awaiting ethics approval.

Date Commenced: December 2008

Expected Date of Completion: April 2010

Funding: Australian Government Department of Health and Ageing

Self-Managed Change from Problematic Cannabis Use: a web-based survey

NDARC Staff: Anthony Arcuri, John Howard and Jan Copeland

Aims: To determine how people achieve change (either reduction or cessation) from self-defined problematic cannabis use without the assistance of formal treatments.

Design and Method: An original survey has been designed and posted on the web. The survey investigates: (1) cannabis use history and related physical and psychological symptoms; (2) the decision to change cannabis use; (3) initial attempts to change cannabis use (and to manage withdrawal, if present); (4) sustained attempts to change cannabis use; and (5) associated life changes (including physical and psychological symptoms) and lapses since changing cannabis use. Given the exploratory nature of this study, survey items are a combination of forced-choice and open-ended questions, to be analysed using both inferential statistical methods and qualitative analyses, where appropriate.

Progress: The questionnaire has been designed and will go live on the web early 2009.

Date Commenced: October 2008

Expected Date of Completion: March 2010

Funding: Australian Government Department of Health and Ageing

Qualitative Study of Mental Health and Mental Health Treatment among Young Cannabis and Psychostimulant Users in Residential Substance Abuse Treatment

NDARC Staff: Anthony Arcuri, John Howard and Jan Copeland

Aims: To explore mental health difficulties of young people with problematic cannabis and/or psychostimulant use in residential substance use treatment and to ascertain past barriers to treatment for mental health and substance use difficulties and what these young people find most helpful in their current treatment program.

Design and Method: This study is being conducted in collaboration with the Ted Noffs Foundation (TNF), with residents of their Program for Adolescent Life Management (PALM). At least 12 PALM residents will be interviewed, depending on when theoretical saturation (when no new information seems to emerge from the data analysis) is reached. The data from the interviews will be analysed using a grounded theory approach, with the assistance of the NVivo software package. The grounded theory approach has been chosen for its

particular usefulness in understanding topic areas that are under-researched.

Progress: Protocol has been finalised and interviewing will commence early 2009.

Date Commenced: June 2008

Expected Date of Completion: March 2010

Funding: Australian Government Department of Health and Ageing

INFORMATION AND TRAINING

Guidelines on the Management of Co-Occurring Alcohol and Other Drug and Mental Health Conditions in Alcohol and Other Drug Treatment Settings

NDARC Staff: Katherine Mills, Mark Deady, Heather Proudfoot, Claudia Sannibale, Richard Mattick, Maree Teesson and Lucy Burns

Aims: As part of the National Comorbidity Initiative, the Australian Government Department of Health and Ageing funded NDARC to develop guidelines on the management of comorbid mental health conditions in AOD treatment settings. The purpose of these Guidelines is to provide AOD workers with up-to-date, evidence-based information on the management of comorbid mental health conditions in AOD treatment settings. They are based on the best available evidence and draw upon the experience and knowledge of clinicians, researchers, consumers and carers.

- Increase AOD workers' knowledge and awareness of mental health conditions.
- Improve the confidence and skills of AOD workers working with clients with comorbid mental health conditions.
- Provide guiding principles for working with clients with comorbid mental health conditions.
- Improve AOD workers' ability to identify mental health conditions.
- Provide practical information on the management of comorbid mental health conditions.
- Provide information regarding the treatment of comorbid mental health conditions.
- Provide information regarding referral processes.
- Provide resources that may be used to facilitate all of the above.

Design and Method: The Guidelines are based on a comprehensive review of the best available evidence and the experience of an expert panel of academic researchers, clinicians, consumers and carer. In developing the Guidelines, we have relied where possible on evidence from well designed research

studies. Where this evidence was not available, recommendations were based upon appropriate clinical experience.

Progress: A draft of the Guidelines was completed and submitted to the Australian Government Department of Health and Ageing in June 2008. The Guidelines are undergoing pilot testing in non-government organization AOD treatment services across Australia. Based on the feedback received from the pilot the Guidelines may be revised before being disseminated to all AOD treatment services across Australia in late 2009.

Date Commenced: January 2008

Expected Date of Completion: December 2009

Funding: Australian Government Department of Health and Ageing

Monograph of the InterGovernmental Committee on Drugs Working Party on Fetal Alcohol Spectrum Disorders

NDARC Staff: Lucy Burns, Emma Black

Other Investigators: Elizabeth Elliott (University of Sydney)

Rationale: The Intergovernmental Committee on Drugs (IGCD) Fetal Alcohol Spectrum Disorder (FASD) Working Party was first established in 2006, at the request of the Ministerial Council on Drug Strategy, to advise on the developments in Australia and overseas in regard to FASD and to identify best practice approaches to reduce the incidence of FASD, particularly in Indigenous communities. The Working Party has commissioned a monograph to examine the current status of research, policy and practice regarding alcohol use in pregnancy in Australia.

Aims: This project aims to examine the current status of research, policy and practice regarding alcohol use in pregnancy in Australia, particularly in relation to fetal alcohol spectrum disorder (FASD). The findings will identify areas where additional attention is required and enhancements to existing practices might improve the current situation with regard to prevention, early intervention and long term management of this preventable condition.

Design and Method: The existing research will be identified and reviewed, the findings will be analysed, and we will systematically group and compile the information into one cohesive body to be published as a monograph. Topic areas include: the prevalence and correlates of alcohol use in pregnancy, services available for pregnant women, the effects of alcohol exposure during pregnancy, the epidemiology of FASD, prevention, health professionals' knowledge and practice, professional education and workforce development, services and interventions, policy, and the economic impact of FASD in Australia.

Date Commenced: May 2007

CURRENT PROJECTS

Expected Date of Completion: September 2009

Funding: Australian Government Department of Health and Ageing; Drug and Alcohol Services South Australia

Program of International Research and Training (PIRT)

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

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

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

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

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

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

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

- A literature review to identify 50 key documents on HIV prevention, treatment and care for injecting drug users. This project was conducted for the International Harm Reduction Association (IHRA), with funding from AVERT.
- A qualitative study of the process by which We Help Ourselves, an abstinence-based therapeutic community, introduced harm reduction strategies into their service model. This project was funded by the World Health Organization Western Pacific Regional Office.
- A rapid assessment of drug use, HIV prevalence and HIV risk behaviours in prisons in Jakarta, Indonesia in 2005.

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

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

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

Date Commenced: March 2003

Expected Date of Completion: Ongoing

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

DRUG POLICY MODELLING PROGRAM

DRUG POLICY MODELLING Program (DPMP)

NDARC Staff: Alison Ritter, Jenny Chalmers, Marian Shanahan, Caitlin Hughes, David Bright, Michael Lodge, Rachel Ngui, Katrina Grech, Francis Matthew-Simmons, Colleen Faes, Irmgard Zeiler (Visiting Fellow)

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

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

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

- Build systems and approaches to enhance evidence-informed illicit drug policy
- Develop and adapt new tools and methods for policy-makers
- Show the value of these tools by dealing with specific problems raised by policy-makers
- Create new ideas and insights for new policy
- Conduct rigorous research that provides independent, balanced, non-partisan analysis and improves the quality of the evidence
- Evaluate the effectiveness of the tools, methods, policy support and new interventions

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

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

1. Generating new evidence for illicit drugs policy

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

- Melbourne Injecting Drug User Cohort Study (MICS) (Burnet Institute DPMP Team)
- Problem-Oriented and Partnership Policing: An evaluation of the LEAPS (Liquor Enforcement & Proactive Strategies) (Griffith DPMP team)
- Reducing the Methamphetamine Problem in Australia: Evaluating Innovative Partnerships Between Police, Pharmacies and Other Third Parties (Griffith DPMP team)
- Integration and Implementation Sciences: Providing Concepts and Methods for Synthesising Disciplinary and Practice-based Knowledge and Connecting Research with Practice (ANU DPMP team)
- Structural analysis of the Australian heroin drought (Overseas DPMP team)
- Developing a common metric to evaluate policy options (the Policy Outcome Index) (NDARC DPMP team)
- Australian drug policy: an overview report on drug use and harms and their relationship to policy (NDARC DPMP team)
- The influence of drug prices on the patterns of drug consumption of methamphetamine users (NDARC DPMP team)
- Exploring socio-demographics and drug use (NDARC DPMP team)
- Drug law enforcement performance monitoring: The persistence of simplistic measures and barriers to moving forward (NDARC DPMP team)

2. Translating the evidence

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

- Interactive modelling platform for drug policy problems (HEMA Consulting)
- Assessing the economic consequences of cannabis policy options (NDARC DPMP team)
- Opioid Pharmacotherapy Review (NDARC DPMP Team)

CURRENT PROJECTS

- Examining the relative cost effectiveness of different types of law enforcement interventions directed towards methamphetamine (NDARC DPMP team)
- Modelling the Hepatitis C virus: the role of treatment and reinfection (NDARC DPMP team)
- Bibliography of grey literature in the drugs policy areas (online) (NDARC DPMP team and ISSDP)
- Support for Phase 2 of the evaluation of the Cannabis Infringement Notice Scheme in Western Australia (NDRI)
- Identifying current and alternate police options for intervening with MDMA (NDARC DPMP team)
- Consultation and modelling in relation to the ACT AOD treatment service system (NDARC DPMP team, HEMA Consulting and Critical Connections)
- The development of a Harm Index for use by Victoria Police (NDARC DPMP team)
- Building a Queensland Cannabis Diversion Model (NDARC DPMP team)
- Modelling policies for licensed venues in Perth for WA Police (NDARC DPMP team, HEMA Consulting, and Turning Point)

3. Studying policy-making

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

- Public opinion, the media, and illicit drug policy in Australia (NDARC DPMP team)
- An analysis of Australian illicit drug policy coordination (NDARC DPMP team)
- The Australian (illicit) drug policy timeline: 1985-2008 (online)
- Track Marks (AIVL)

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

Date Commenced: July 2007

Expected Date of Completion: July 2011

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

PROJECTS COMPLETED IN 2008

Development of Guidelines: drug detoxification and drug treatment in areas of high HIV prevalence or risk and closed institutions

NDARC Staff: Kate Dolan, Bradley Mathers and Sarah Larney

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

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

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

Date Commenced: February 2006

Funding: World Health Organisation, Western Pacific Regional Office

An Examination of Contents of Confiscated Injecting Equipment and Needlestick Injuries in Prisons

NDARC Staff: Kate Dolan and Sarah Larney

Aims: The aims of this project were to:

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

Design and Method: This study involved a cross-sectional survey and testing of biological samples. Prison officers in Western Australia and Victoria completed a

survey about their experiences with needles and syringes in prison, including needlestick injuries. Approximately 30 syringes were collected from these states and the contents were tested for hepatitis C virus RNA.

Benefits: This study has highlighted needlestick injuries as an occupational health and safety concern for prison officers.

Date Commenced: April 2005

Funding: Unilife Medical Solutions through Unitract Syringe Pty Ltd

The Efficacy of Peer-Led Interventions With Ecstasy and Related Drugs (ERDs) Users

NDARC Staff: Annie Bleeker, Ed Silins, Paul Dillon and Jan Copeland

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

Design and Method: A quasi-experimental study design was utilised over four study sites – three in Australia and one in the Netherlands. Unfortunately different research methodologies were utilised in the Netherlands and their data were not comparable with data collected from the Australian sites. Although reference is made to the peer education methodology from the Netherlands study, all information presented in the final report is based on the Australian research study.

A literature review on the efficacy of peer led interventions forms the first part of the project report. Using the review, a Peer Training Program was designed, developed and implemented in all research sites. Utilising information collected from a past NDARC project ('Development of materials on ecstasy and related drugs (ERDs) for primary health care practitioners') a unique message relating to serotonin syndrome was created and incorporated into the training program. The trained peers then attended 18 events over the 2006/2007 summer across three sites in Australia (with cases and controls) where they will disseminate a series of safer partying messages, including the serotonin message.

A series of instruments were designed to measure process mechanisms and assess the effectiveness of the peer education with ecstasy and related drug users. Follow-up interviews were conducted three months after the intervention messages were given to cases and controls. A total of 661 baseline interviews were conducted with ecstasy users at dance events in three study sites in Australia and a total of 349 follow up

PROJECTS COMPLETED IN 2008

interviews were conducted with the sample to assess if health messages had been retained three months later.

Findings: The results of the study indicate that there was a good recall of health messages disseminated to ERDs users using a peer-led methodology. At the three month follow-up, there was a high free recall of the two unique messages that were provided only to the experimental group (cases). The 'serotonin syndrome' message was recalled by 64% of cases at baseline interview and by 46% at follow-up interview, indicating that a significant proportion of the study population remembered what they had discussed with a peer educator at an event three months earlier.

Date Commenced: February 2006

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

Review on Cannabis and Mental Health

NDARC Staff: Jennifer McLaren, Jim Lemon, Lisa Robins and Richard Mattick

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

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

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

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

Benefits: The project resulted in a National Drug Strategy monograph entitled 'Cannabis and Mental Health: Put Into Context', available on the NDARC website. It has become a useful resource for researchers, policy makers and mental health professionals.

Date Commenced: January 2007

Funding: Australian Government Department of Health and Ageing

Demographics, Circumstances, Toxicology and Major Organ Pathology of Psychostimulant-Related Deaths in Australia

NDARC Staff: Shane Darke, Sharlene Kaye and Rebecca McKetin

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

Aims: This project aimed to investigate illicit psychostimulant-related death in Australia. The National Coroners Information System (NCIS) contains information from the coronial files of all Australian states and territories, including case demographics, circumstances of death, toxicology reports and autopsy reports. Information from the NCIS database was used to investigate deaths where illicit psychostimulants were implicated in the cause of death.

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

Findings: Methamphetamine has contributed to a substantial number of deaths in Australia. Cardiovascular pathology was detected in a substantial proportion of decedents. Users need to be informed of the potential harms of methamphetamine use, particularly those associated with the cardiotoxicity of methamphetamine and the use of methamphetamine in conjunction with other drugs.

MDMA has contributed to a clinically significant number of deaths in Australia. The prevalence of cardiovascular pathology was similar to that among methamphetamine and cocaine fatalities. Future studies examining MDMA-related morbidity and mortality in the context of other risk factors are recommended. Overall, the current study highlights the need to educate users about the potential harms of MDMA use, particularly that in conjunction with other stimulants, opioids and alcohol, which are known to increase overall toxicity.

Date Commenced: July 2005

Funding: Australian Government Department of Health and Ageing

Methamphetamine Treatment Evaluation Study (MATES)

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

Other Investigators: Jake Najman (Queensland Alcohol and Drug Research and Education Centre), Robert Ali (Drug & Alcohol Services South Australia; and the University of Adelaide), Dan Lubman (University of Melbourne), Shelley Cogger (Queensland Alcohol and Drug Research and Education Centre), Amanda Baker (University of Newcastle), Nicole Lee (Turning Point Alcohol & Drug Centre), Sharon Dawe (Griffith University) and Abdullah Mamun (University of Queensland)

Rationale: Evidence-based treatment options for methamphetamine dependence remain scarce, yet over 15,000 people enter treatment for methamphetamine use each year in Australia. The purpose of this study was to determine whether the treatment that they receive is effective in reducing methamphetamine use and related harms. The study had a particular focus on comorbid mental health issues, such as psychosis, depression and anxiety.

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

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

Design and Method: A prospective longitudinal cohort study of 501 methamphetamine users: 400 people receiving treatment for methamphetamine use and a comparison group of 101 out-of-treatment dependent methamphetamine users. Participants were interviewed at baseline (treatment entry) and subsequently at 3 months (n = 404) and 12 months (n = 376) post-treatment. Treatment modalities included were: counselling, residential rehabilitation and withdrawal management. Methamphetamine use at follow-up was examined by exposure to drug treatment. Other variables examined in the study included psychiatric disorders, psychotic symptoms, crime, HIV risk, health service utilisation and general health and well-being.

Benefits: The project has documented the level of psychiatric comorbidity among methamphetamine treatment entrants and it has demonstrated the effectiveness of community-based treatment options for reducing methamphetamine use and related health and social problems.

Date Commenced: June 2005

Funding: National Health and Medical Research Council (\$709,500) and the Australian Government Department of Health and Ageing (\$175,000)

The Role of Cannabis Dependence as a Risk Factor for Methamphetamine Psychosis

NDARC Staff: Rebecca McKetin and Maree Teesson

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

Design and Method: This project utilized data collected through separate NHMRC projects on methamphetamine use and psychosis, and built on existing research being carried out at NDARC

Findings: The study determined that heavy cannabis use is associated with an increased likelihood of psychotic symptoms among methamphetamine treatment entrants, but that this relationship is largely attributable to factors that co-occur with heavy cannabis use (i.e., heavier methamphetamine use, younger age of initiation into drug use, and comorbid psychiatric disorders). After adjusting for these confounds, no significant relationship was found between level of cannabis use and current psychotic symptoms.

Date Commenced: June 2006

Funding: Australian Government Department of Health and Ageing

An Empirical Investigation of Psychosis Proneness among Amphetamine Users: current and predictive validity

NDARC Staff: Rebecca McKetin and Maree Teesson

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

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

PROJECTS COMPLETED IN 2008

- The relationship between dose, pattern and duration of amphetamine use and emergent psychotic symptoms.
- The relative contribution of amphetamine dose, schizotypal features and family history of schizophrenia on the increase of positive psychotic symptoms.
- The progression of psychotic symptoms over time, and specifically what was the evidence for the development of sensitisation to amphetamine such that smaller doses precede an increase in psychotic symptoms.

Design and Method: A cohort of 158 methamphetamine users was recruited from needle and syringe exchange programs in inner Brisbane, Melbourne and Sydney. The cohort underwent a detailed assessment of psychosis and drug use history at baseline, using the PRISM (Psychiatric Research Interview for Substance and Mental Disorders), and was then followed up at one-month intervals over one year. Follow-up interviews included assessment of drug use (Timeline Follow Back method) and positive psychotic symptoms (Brief Psychiatric Rating Scale) in the previous 30 days. Traits measure of psychosis included the Oxford-Liverpool Inventory of Feelings and Experiences.

Benefits: Data collection for the project is complete and analysis and reporting will occur in 2009. The data from this project will help researchers and mental health professionals to understand the relationship between methamphetamine use and psychotic symptoms.

Date Commenced: June 2005

Funding: National Health and Medical Research Council

Management of Cannabis and Psychostimulant Use among General Practice Patients

NDARC Staff: Amie Frewen, Anthony Arcuri and Jan Copeland

Aims: The aim of this study was to explore the management of cannabis- and psychostimulant-related problems in Australian general practice.

Design and Method: Data from the Bettering the Evaluation and Care of Health (BEACH) study of general practice between April 2000 and March 2007 were analysed.

Findings: During 2000 and 2007, GPs in Australia managed illicit drug use about 55,000 times per year. Of these cases, cannabis and psychostimulants made up 3.2% and 1.6%, respectively. Cannabis and psychostimulant users only differed on one demographic variable. Cannabis users were younger than psychostimulant users. Clinically, GPs were more likely to manage cannabis users than psychostimulant users concurrently for psychotic symptoms, but were less likely

to treat them with antipsychotics. GPs preferred to manage cannabis users' psychotic symptoms by providing advice or referring them to an allied health professional. Conversely, GPs were more likely to prescribe psychostimulant users with an antipsychotic and/or an anxiolytic for their presenting drug problem.

Benefits: Workforce and training gaps have been identified among GPs. Given that GPs detected such low rates of cannabis and psychostimulant use in their practice, GPs are in need of training aimed at detecting drug use. One solution would entail providing GPs with psychometrically sound screening tools. Once GPs are fluent in identifying drug use, they may benefit from training in brief interventions so that they can intervene with drug users early.

Date Commenced: January 2008

Funding: Australian Government Department of Health and Ageing

The Development of a Standardised Treatment Monitoring Tool for Use by Researchers and Clinicians: the Australian Alcohol Treatment Outcome Measure (AATOM)

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

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

Aims: The overall aim was to develop a reliable and valid alcohol treatment outcome measurement tool to serve the needs of health professionals and their clients, policy makers, funding bodies and the research community.

Design and Method: Two versions of the Australian Alcohol Treatment Outcome Measure (AATOM) were developed. The AATOM-C was intended for use amongst clinicians for the purpose of routine treatment outcome monitoring, for service development and to assist with fulfilling funding requirements. The AATOM-R was developed for use amongst the research community and is considerably more detailed than the AATOM-C. NDARC was primarily responsible for the development of the AATOM-C, whilst Turning Point was responsible for the development of the AATOM-R.

The development of the AATOM-C was divided into three phases:

- Phase One – Literature review and content development.
- Phase Two – Reliability and validity testing.
- Phase Three – A 12-month feasibility study.

Benefits: The results of the study demonstrated that the AATOM-C is, overall, a valid and reliable instrument,

taking on average 11 minutes to administer. It has the potential to be a very useful clinical tool for those working within the alcohol treatment field. It can assist with treatment planning and tracking client progress throughout the course of treatment and after treatment completion.

Date Commenced: July 2007

Funding: Alcohol Education and Rehabilitation Fund (AERF)

Two Concurrent Randomised Placebo Controlled Trials of Modafinil in Methamphetamine and Cocaine Dependence

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

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

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

Design and Method: Two concurrent randomised placebo controlled trials were conducted at the Kirketon Road Centre, a primary health care centre and Rankin Court, an alcohol and drug treatment centre, both located in inner city Sydney. Recruitment targets were 60 for the amphetamine study and 30 for the cocaine study. Subjects in both studies were randomised equally to two groups. The experimental groups received a modafinil dose of 200 mg/day under a weekly script for 10 weeks. The control group received placebo under equivalent conditions. Both groups were offered a four-session manualised brief CBT intervention designed for amphetamine users. Treatment efficacy was primarily evaluated by a between-group comparison of the proportion of urine samples negative for psychostimulant over 10 weeks. Safety was evaluated by between-group comparison of side effects and adverse events. Self-reported stimulant use, other drug use and retention were compared between groups. Improvements in health and psychosocial harms associated with regular stimulant use and patterns of use were also compared.

Findings: Treatment retention was equivalent between the groups. There were no statistically significant between-group differences in treatment outcome measures for the combined methamphetamine/cocaine sample. The degree of uptake of counselling was the most significant predictor of better post treatment

outcomes. There were no medication-related serious adverse events. Adverse events were generally mild and consistent with known pharmacological effects.

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

Date Commenced: July 2005

Funding: Australian Government Department of Health and Ageing

Health Evaluation and Research Outcomes Network (HERON): substance use in pregnancy stream

NDARC Staff: Lucy Burns and Richard Mattick

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

Rationale: More than 250,000 women give birth in Australia each year and pregnancy is the single most important reason for admission to hospital, accounting for the highest number of occupied bed days. Of these women, approximately 83,000 have epidural analgesia, 42,000 have caesarean sections and 30,000 have instrumental births. Some 50,000 mothers will be separated from babies who require nursery care and 6,500 infants will have prolonged admissions to Neonatal Intensive Care Units (NICU). Despite the substantial health care costs associated with maternal and infant health, there has been little research in Australia about how these services might best be provided. Population health data sets will be used to explore issues of clinical and policy significance to guide health policy and service provision.

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

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

PROJECTS COMPLETED IN 2008

Benefits: HERON brought together key research and service institutions to build capacity in methodologically advanced research with population health data sets in order to address key issues in health policy and planning. In Australia at present, such data sets are used mainly for simple *descriptive* reports. They are rarely used for more detailed analyses to address research or policy issues, especially when to do so would require multiple data sources, record linkage or complex analytical methods. To date, publications have been produced in the areas of alcohol use in pregnancy, illicit drug use in pregnancy, the impact of methadone retention on neonatal outcomes, the prevalence and correlates of neonatal abstinence syndrome and the impact of smoking in pregnancy. Articles examining the morbidity and mortality of infants born to women who use substances during pregnancy are expected to be published in 2009.

Date Commenced: January 2004

Funding: National Health and Medical Research Council

Secondary Analysis of the Relationship Between Cannabis Use, Dependence, Mental Health and Associated Outcomes in the Victorian Adolescent Cohort study

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

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

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

Aims: This project involved a collaboration with the Victorian Adolescent Cohort Study (VACS), which commenced in 1992. It aimed to conduct secondary analyses and produce peer-reviewed papers on four related areas around the long-term impacts of cannabis use in adolescence and young adulthood: the

relationship between cannabis and other drug use, the natural history of cannabis use (patterns of use, abuse and dependence), cannabis use and mental health (especially depression and anxiety) and cannabis use and life transitions.

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

Secondary analyses were conducted using data from the eight waves of the cohort. Wave 9 data, which became available during the project, were included in some relevant analyses. The following areas were examined:

- The relationship between cannabis and other drug use.
- The natural history of cannabis use.
- Cannabis use and mental health.
- Cannabis use and life transitions.

Benefits: The Victorian Adolescent Cohort Study is one of the most comprehensive pictures of adolescent development available, influencing policy and informing prevention programs. This study builds on this study to investigate the relationships between cannabis use, mental health, and related issues. There is still much uncertainty and ongoing debate over these relationships. Longitudinal research provides a sound methodology for investigating these issues, and this presents a real opportunity to understand these important relationships in an Australian context.

Date Commenced: March 2007

Funding: Australian Government Department of Health and Ageing

A National Survey of Australian Clinicians' Attitudes to Interventions for Cannabis Use Disorder

NDARC Staff: Amie Frewen, and Jan Copeland

Aims: To investigate Australian health professionals' perceived skills and attitudes towards the treatment of cannabis use and related problems.

Design and Method: A postal or online version of a questionnaire assessing knowledge, skills and attitudes towards cannabis treatment was distributed to drug and alcohol clinicians (N =179) across Australia. Fifty-three clinicians completed the survey.

Findings: Clinicians responding to the survey were typically female (57%), in a management role (51%) and had approximately 10 years of experience in the field. Although many clinicians reported that they only had an undergraduate education and received supervision solely on an as-needed basis, they also reported treating complex cases. Sixty-five percent of their clients used cannabis and many were noted to have high rates of co-occurring mental health problems and other drug use. Generally, clinicians offered cannabis users counselling from a cognitive-behavioural approach. Clinicians reported that most of their cannabis-using clients attended between 2 and 5 individual sessions.

Benefits: Workforce and training issues were identified. As clients often present with complex issues, clinicians need access to ongoing training and supervision in order to maximise their ability to manage the issues effectively.

Date Commenced: June 2007

Funding: Australian Government Department of Health and Ageing

Emerging Trends in Drug Use and High Risk Behaviours among the Homeless

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

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

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

Design and Method: A cross-sectional design was employed in this study. Face-to-face interviews were conducted with 106 male and female clients from an inner-city service for homeless, substance-using adults. The interview included questions on homelessness history, physical health, mental health, substance use,

health service utilisation and violent victimisation in the previous 12 months.

Benefits: Homeless populations typically have elevated levels of drug and alcohol dependence and mental and physical illnesses. These co-morbidities suggest complex challenges for service providers working with this group. However, little work had previously been conducted on identifying the health and substance use patterns of homeless people. Results from this study provide valuable information to guide policy makers and service providers.

Date Commenced: January 2007

Funding: NSW Health Drug and Alcohol Program Research Grants

The Establishment of a Cohort of Substance-Using Pregnant Women and Their Babies

NDARC Staff: Lucy Burns, Delyse Hutchinson, Jo Ross, Wendy Swift, Elizabeth Conroy

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

Rationale: It is well known that the association between maternal substance use and poor obstetrical outcomes is complicated by the significant physical and psychosocial morbidity associated with substance use disorders. Studies have previously found high exposure to violence, poor physical health, and moderate/severe psychological distress among substance-using pregnant women. These factors are rarely examined together and yet a holistic picture is necessary to gain an understanding of the health needs of the mother-child (fetus) dyad.

Aims: The aim of the study was therefore to describe the clinical and psychosocial characteristics of pregnant women attending the substance use antenatal clinic of a large public hospital in Sydney. The information was collected as a prerequisite to the design of a clinical service that could better meet the needs of both mother and child.

Design and Method: The design was a cross-sectional survey measuring maternal and neonatal health. Face-to-face interviews were conducted with 23 pregnant women known to have a substance use problem. These women were recruited from RPAH Drug Health Services and the specialist antenatal clinic. The interview included questions on obstetric history, obstetric complications, substance use, physical health, mental health, violent victimisation, and health service utilisation.

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

PROJECTS COMPLETED IN 2008

development of a group of potentially 'at risk' children, and for the identification of factors associated both with harm and resilience and 'windows of opportunity' for harm reduction. A key finding of the study was the low contraceptive use among the women. A follow-on project aimed at identifying barriers to effective contraceptive use and the feasibility of establishing a sexual health clinic for substance using women has recently been funded by NSW Health.

Date Commenced: January 2007

Funding: NSW Health, Drug and Alcohol Council Research Grants Program

CLIMATE Schools: the development and evaluation of an interactive computer based prevention program for alcohol and cannabis

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

Other Investigators: Gavin Andrews (UNSW)

Background: The CLIMATE Schools Alcohol Module for Year 7/8 students was completed in 2004 and trialled over ensuing years. It utilised a cartoon-based soap opera which allowed students to learn about preventive strategies in real-life contexts. Results showed that the CLIMATE Schools program was more effective than standard alcohol prevention education for minimising alcohol-related harm, and increasing young people's skills and awareness. Further modules are being developed in collaboration with students, teachers and experts, to enable teachers to implement a staged sequence of drug prevention programs in schools.

Aims: To develop and evaluate the effectiveness of an evidence-based, internet-driven, prevention program for the prevention of alcohol and cannabis use and related harms.

Design and Method: An interactive computer based prevention program, *CLIMATE Schools: Alcohol and Cannabis Module* was developed for evaluation with Year 8/9 students, using a cluster randomized controlled trial. The trial was designed to assess the impact of the CLIMATE intervention on students' knowledge of alcohol and cannabis, attitudes towards their use, and alcohol and drug use behaviour, and involved 764 students from 10 independent schools across Sydney.

Findings: The results are promising. Compared to the control group, students in the intervention group showed significant improvements in alcohol and cannabis knowledge at end of the course and at the six and twelve month follow-ups. In addition, the intervention group showed a reduction in frequency of cannabis use at the six month follow-up, a reduction in average weekly alcohol consumption at the six and twelve month follow-ups, and a reduction in frequency of drinking to excess twelve months after the intervention. No differences

between groups were found on alcohol expectancies, cannabis attitudes, or alcohol and cannabis harms.

Benefits: The CLIMATE Schools: Alcohol and Cannabis Module was found to be effective in reducing alcohol and cannabis use up to 12 month following the intervention. As such, it proved to be an effective, invaluable and cost-effective prevention resource, in an area in which there is a current dearth of prevention programs. The added benefits of adding this program to the existing suite of CLIMATE Modules is that it will allow for the potential transfer of important prevention skills to the use of other illicit drugs such as cannabis.

Date Commenced: June 2006

Funding: Australian Government Department of Health and Ageing, AERF, ARC, NHMRC

Opioid Dependence: Comorbidity and Trauma Study (CATS)

NDARC Staff: Richard Mattick, Louisa Degenhardt, Fiona Shand, Elizabeth Conroy, Michelle Torok, Caitlin McCue, Cherie Kam, Greg French

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

Rationale: Opiate dependence is a major societal problem worldwide that is often associated with increased criminal activity, overdose, and physical and mental health problems. Opiate dependence risk has a strong genetic component. However, no reports thus far have definitively demonstrated an association of the presence of one or more specific genes with opiate dependence risk. Further, opiate dependent persons report extremely high rates of childhood trauma. Genetically-informative designs have suggested that childhood trauma is often followed by the development of substance dependence. Animal investigations suggest that this relationship may be biologically mediated with the hypothalamic-pituitary axis particularly implicated.

Aims: The study aimed to:

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

Design and Method: This was a case-control genetic association study of opioid dependence with the inclusion of childhood trauma history as a potential confounding variable. Researchers interviewed and

collected blood samples from 1500 opioid dependent cases and 500 non-dependent controls, matched by age, sex and employment status. Childhood trauma and psychiatric comorbidities were measured by a computerised, structured interview which enabled DSM-III and DSM-IV-R diagnoses to be made. Participants were recruited over 3.5 years, with interviews being conducted at NDARC, methadone clinics, and community centres in the greater Sydney area. The study was conducted in collaboration with Washington University, St Louis; the Queensland Institute of Medical Research, Brisbane; and the Prince of Wales Hospital, Randwick. NDARC was responsible for the collection of blood samples and interview data from participants, and the genetic analysis occurred at QIMR and Washington University.

Benefits: The design of the study allows for the identification of genes associated specifically with opioid dependence. This genetic analysis is currently underway. The interaction between genes and environmental risk factors is also being tested. In addition, the extensive interview data collected enables a thorough examination of the characteristics of the population, as well as relationships between mental health, childhood trauma, polydrug dependence, and suicidality. The genetic data has become part of a larger international study examining the genes associated with clearance versus chronicity of HCV. Data from the study have provided the basis for three PhD theses: Elizabeth Maloney has completed a thesis examining suicidality; Elizabeth Conroy has completed a thesis examining the associations between childhood maltreatment and mental health in this population; and Fiona Shand is working on a thesis examining the relationship between polysubstance dependence and mental health.

Date Commenced: November 2004

Funding: National Institute of Drug Abuse, NIH, USA

Identification of Barriers and Facilitators to Cannabis Treatment

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

Aims: Individuals with cannabis-related problems are under-represented in specialist treatment services, and frequently those who do enter treatment are already experiencing significant problems. The aims of the project were to examine barriers and facilitators to entry into cannabis treatment in Australia from the perspectives of cannabis users in treatment, cannabis users in the community, and their families.

Design and Method: The project had four components:

- Examination of the published research literature on the facilitators and barriers to entry into illicit drug treatment in general, and cannabis treatment in particular, to inform development of the survey instrument. This was presented as a brief literature review of 2,500 words.

- The conduct of a face-to-face survey of a total of 100 adolescents and adults in cannabis treatment in the Greater Sydney area. No more than 20% of the sample to have co-morbid dependence on other drugs.
- The conduct of a face-to-face survey of 100 adults and adolescents in the Greater Sydney area stratified by levels of cannabis use (50 daily or near daily users over the past 3 months, and 50 weekly users over the same period). No more than 20% of the sample to have co-morbid dependence on other drugs.
- The conduct of two secure, online surveys targeting families of cannabis users, who may have attempted to gain access to treatment for their family members, and frequent cannabis users across Australia, for their views on the barriers and facilitators into treatment and information sources.

Benefits: The findings from this study will assist policy and clinical practices that address issues related to barriers and facilitators into cannabis treatment. These new policies and practices should, in turn, promote earlier entry to treatment and a reduction in cannabis related harms for individuals, their families and the Australian community. The project has presented findings to a number of national and international conferences. The final report and technical report have been approved and published. Peer reviewed journal articles will be submitted.

Date Commenced: July 2007

Funding: Australian Government Department of Health and Ageing

Steps Through Amphetamines: cognitive behaviour therapy (CBT) for regular amphetamine use and depression - a stepped care approach

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

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

Rationale: There is clear evidence to suggest that amphetamine use is common and increasing both in Australia and internationally, and has also been associated with increased psychological and social problems. A stepped care approach has been recommended in several mental health areas, and has recently been suggested as the optimal strategy for addressing amphetamine use.

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

PROJECTS COMPLETED IN 2008

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

Design and Method: Regular amphetamine users with comorbid depression were recruited across two sites (NDARC in Sydney and the Centre for Mental Health Studies in Newcastle). To be eligible for the study, participants had to be using amphetamine at least once a week during the month prior to entry to the study, and reporting moderate levels of depression for the two weeks prior to entry.

Sydney site - All participants had access to integrated psychological treatment with a dual focus on depression and amphetamine use according to the following schedule: a detailed mental health and drug/alcohol assessment (initial assessment); a brief (1-session) feedback and goal setting treatment session and the provision of self-help material (Step 1) with an assessment at week 5; up to 4-sessions of intervention with an integrated focus (Step 2) with an assessment at week 10; up to 4-sessions of intervention with an integrated focus (Step 3) with an assessment at week 15; up to 4-sessions of intervention with an integrated focus (Step 4) with assessment at week 20.

Newcastle site - Trial of stepped care intervention with provision of treatment contingent on response to a previous intervention. After the initial assessment, the Step 1 intervention was provided to all participants, followed by an assessment at week 5. Participants were given Step 2 intervention where indicated, with an amphetamine, depression or integrated focus. Those who 'responded' to Step 1 had the option of entering the monitoring phase and proceeding straight to the next assessment. An assessment was done at week 10, and Step 3 intervention was provided where indicated with an amphetamine, depression or integrated focus. Once again 'responders' had the option of entering the monitoring phase and proceeding straight to the next assessment. An assessment was done at week 15, followed by Step 4 intervention where indicated with an amphetamine, depression or integrated focus. Again 'responders' had the option of entering the monitoring phase and proceeding straight to the next assessment. Final assessment was undertaken at week 20.

The decision to step treatment up (offer the next level) or down (offer a previous step or move onto monitoring) was based on the following factors:

- Client preference.
- Clinical judgment.
- Assessment results relative to the baseline and/or the previous assessment regarding improvement or otherwise in amphetamine use only, in depression only, or in both depression and amphetamine use.

Participants at the Newcastle site could also elect a singular focus on amphetamine use, on depression or an integrated treatment targeting both depression and amphetamine use.

Findings: This pilot study has provided important information regarding the willingness of amphetamine users with depression to participate in a stepped care intervention. In general, participants did not like receiving the one-session Step 1 intervention and then no contact until the 5-week interim assessment. Much of the study dropout occurred at this point. Future replications should consider altering this first step to incorporate more sessions.

Given the choice, Newcastle participants selected a sole focus on amphetamine use as their Step 2 intervention, and then opted for integrated treatment targeting both amphetamine use and depression simultaneously as subsequent steps in treatment. Depression was never selected as the singular focus of treatment, despite reported levels of depression in the severe range at the initial assessment for this group. Although not statistically significant, this approach seemed to benefit the Newcastle participants, who reported lower depression and amphetamine use relative to their Sydney counterparts who received a predetermined integrated treatment at every step.

On average, participants at both sites attended three treatment sessions and three assessment occasions over the study period. Higher (although not statically significantly higher) attendance occurred at the Newcastle site where participants and clinicians were able to tailor the focus and frequency of sessions within the stepped care framework. In general, heavier amphetamine users attended (and reported benefit from) a higher number of sessions across both sites.

It would appear that stepped care is feasible within this population, however a flexible schedule of sessions over a lengthy period may be helpful to heavier users with co-existing depression. Amphetamine users with depression will attend treatment over the longer term, although flexibility and assertive outreach is required by treatment providers.

Date Commenced: December 2007

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

DRUG POLICY MODELLING PROGRAM (DPMP)

NDARC Staff: Alison Ritter, Jenny Chalmers, Marian Shanahan, Caitlin Hughes, David Bright, Michael Lodge, Rachel Ngui, Katrina Grech, Francis Matthew-Simmons, Colleen Faes, Irmgard Zeiler (Visiting Fellow)

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

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

Program: DPMP is a broad program of research comprising a large number of smaller projects. The program commenced in 2007 with the goal of creating valuable new drug policy insights, ideas and interventions that will allow Australia to respond with alacrity and success to illicit drug use. A full description of the program and its aims can be found on page 37 under *Current Research*.

While the broader program continues, the following **component projects** were completed in 2008:

- A comparative analysis of research into illicit drugs in the European Union (NDARC DPMP)
- Cannabis Diversion Model – A National Model (NDARC DPMP team)
- A review of Australian public opinion surveys on illicit drugs (NDARC DPMP team)
- A summary of diversion programs for drug and drug-related offenders in Australia (NDARC DPMP team)
- SimHero: Policing Australia's 'heroin drought': Using an agent-based model to simulate alternative outcomes (HEMA Consulting, Griffith DPMP team, NDARC DPMP team)

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

APPENDICES

APPENDIX A

ACRONYMNS

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

APPENDIX B

STAFF LIST

Academic Staff

Richard Mattick	Professor, Director of NDARC
Jan Copeland	Professor, Director of NCPIC
Louisa Degenhardt	Professor
Shane Darke	Professor
Rob Sanson-Fisher	Professor
Maree Teesson	Professor
Kate Dolan	Associate Professor
Chris Doran	Associate Professor
Alison Ritter	Associate Professor
Lucy Burns	Senior Lecturer
Jenny Chalmers	Senior Research Fellow
Erol Digiusto	Senior Research Fellow
John Howard	Senior Lecturer
Rebecca McKetin	Senior Research Fellow
Katherine Mills	Senior Lecturer
Melissa Norberg	Senior Lecturer
Joanne Ross	Senior Lecturer
Anthony Shakeshaft	Senior Lecturer
Tim Slade	Senior Research Fellow
Wendy Swift	Senior Lecturer
David Bright	Research Fellow
Anton Clifford	Research Fellow
Anjalee Cohen	Research Fellow
Suzanne Czech	Lecturer
Caitlin Hughes	Research Fellow
Delyse Hutchinson	Research Fellow
Sharlene Kaye	Research Fellow
Frances Kay-Lambkin	Research Fellow
Jim Lemon	Research Fellow
Kristy Martire	Research Fellow
Heather Proudfoot	Research Fellow
Claudia Sannibale	Research Fellow
Stephanie Taplin	Research Fellow
Laura Vogl	Research Fellow
Natacha Carragher	Research Fellow
Matthew Dunn	Associate Lecturer
Amy Johnston	Research Associate
Kylie Sutherland	Research Associate

Research Staff

Anthony Arcuri	Senior Research Officer
Emma Barrett	Research Officer
Emma Black	Senior Research Officer
Annette Bordon	Research Officer
David Bosanquet	Research Officer
Delphine Bostock-Matusko	Research Officer
Desiree Boughtwood	Senior Research Officer
Courtney Breen	Senior Research Officer
Joshua Byrnes	Research Officer
Bianca Calabria	Research Officer
Gabrielle Campbell	Senior Research Officer
Joanne Cassar	Research Officer

Shelley Cogger	Research Officer
Elizabeth Conroy	Senior Research Officer
Mark Deady	Research Officer
Catherine Deans	Research Officer
Philippa Farrugia	Research Officer
Amie Frewen	Senior Research Officer
Peter Gates	Senior Research Officer
Amy Gibson	Senior Research Officer
Katrina Grech	Research Officer
Rachel Grove	Research Officer
Ali Hammad	Senior Research Officer
Pota Hatzopoulos	Research Officer
Kate Hetherington	Research Officer
Karina Hickey	Research Assistant
Aspasia Karageorge	Research Officer
Erin Kelly	Research Officer
Briony Larance	Senior Research Officer
Sarah Larney	Research Officer
Stephanie Love	Research Officer
Elizabeth Maloney	Senior Research Officer
Bradley Mathers	Senior Research Officer
Frances Matthew-Simmons	Research Assistant
Jen McLaren	Senior Research Officer
Sabine Merz	Research Psychologist
Hector Navarro	Research Officer
Paul Nelson	Research Officer
Rachel Ngui	Senior Research Officer
Julie Nos	Research Officer
Susannah O'Brien	Senior Research Officer
Michael Otim	Senior Research Officer
Marie Peek-O'Leary	Research Officer
Benjamin Phillips	Research Officer
Deb Randall	Senior Research Officer
John Redmond	Research Assistant (NCPIC)
Anna Roberts	Research Officer
Lisa Robins	Research Officer
Sally Rooke	Senior Research Officer
Julia Rosenfeld	Research Psychologist
Amanda Roxburgh	Senior Research Officer
Cathie Sammut	Research Officer
Sagari Sarkar	Research Officer
Laura Scott	Research Officer
Marian Shanahan	Health Economist
Fiona Shand	Senior Research Officer
Edmund Silins	Senior Research Officer
Melanie Simpson	Research Officer
Natasha Sindicich	Research Officer
Jenny Stafford	Senior Research Officer
Rachel Sutherland	Research Officer
Kirsty Taylor	Research Psychologist
Michelle Torok	Research Officer
Elissa Wood	Research Officer

APPENDICES

Administrative & Professional Staff

Annie Bleeker	National Community Training Manager (NCPIC)
Clare Chenoweth	Communications Officer (NCPIC)
Lin Chin	Senior Finance Officer
Eva Congreve	Archivist
Crisanta Corpus	Senior Finance Officer
Paul Dillon	National Communications Manager (NCPIC)
Colleen Faes	Personal Assistant
Julie Hodge	Executive Assistant
Michael Lodge	Senior Research Policy Officer
Greg Martin	Intervention Development Manager (NCPIC)
Etty Matalon	National Clinical Training Manager (NCPIC)
Gem Mathieu	Executive Assistant, NCPIC
Anton Perkins	Administrative Officer
Shale Preston	Executive Officer
Karen Price	Manager, Operations and Development
Pearl Pulmano	Executive Assistant
Carla Santos	Executive Assistant
Caroline Santoso	Administrative Assistant
Nicholas Scheuer	Statistical Officer
Barbara Toson	Statistician/Biostatistician
Heli Wolk	Professional Officer

Conjoint Appointments

Wayne Hall	Conjoint Professor
James Bell	Conjoint Associate Professor
Kate Conigrave	Conjoint Associate Professor
Johan Duflo	Conjoint Associate Professor
Paul Haber	Conjoint Associate Professor
Andrea Mant	Conjoint Associate Professor
Rob Sanson-Fischer	Conjoint Associate Professor
Amanda Baker	Conjoint Associate Professor
Ingrid van Beek	Conjoint Senior Lecturer
Jeff Ward	Conjoint Senior Lecturer
Adam Winstock	Conjoint Senior Lecturer
Alex Wodak	Conjoint Senior Lecturer

Visiting Researchers

Robert Ali	Visiting Fellow
John Lewis	Visiting Fellow
Irmgard Zeiler	Visiting Fellow

APPENDIX C

POSTGRADUATE STUDENTS

Barrett, Emma (2007-present).

Criminality among substance users with comorbid post-traumatic stress disorders.

Full-time PhD in the School of Public Health & Community Medicine, UNSW. Supervision by Dr Kath Mills. Expected date of submission is December 2010.

Breen, Courtney (2004-present).

Reducing alcohol-related harm in rural communities in NSW.

Part-time PhD in the School of Public Health & Community Medicine, UNSW. Joint supervision by Dr Anthony Shakeshaft and Prof Richard Mattick. Expected date of submission is February 2010.

Byrnes, Joshua (2008-present).

Assessing the social, health and economic aspects of alcohol in Australia.

Full-time PhD in the School of Public Health & Community Medicine, UNSW. Joint supervision by Dr Chris Doran and Dr Anthony Shakeshaft. Expected date of submission is June 2011.

Conroy, Elizabeth (2005-present).

Prevalence and consequences of child maltreatment among heroin dependent cases and matched controls.

Full-time PhD in the School of Public Health & Community Medicine, UNSW. Joint supervision by Prof Louisa Degenhardt and Dr Ward. Submitted early 2009.

Gibson, Amy (2005-present).

Morbidity associated with pharmacotherapies for opioid dependence.

Full-time PhD in the School of Public Health & Community Medicine, UNSW. Joint supervision by Prof Louisa Degenhardt and Dr Lucy Burns. Expected date of submission is June 2009.

Havard, Alys (2007-present).

Alcohol related health issues in rural NSW.

Full-time PhD in the School of Public Health & Community Medicine, UNSW. Joint supervision by Dr Anthony Shakeshaft and Dr Kate Conigrave. Expected date of submission is January 2011.

Indig, Devon (2005-present).

Alcohol-related emergency department presentations.

Full-time PhD in the School of Public Health & Community Medicine, UNSW. Joint supervision by Prof Jan Copeland and Dr Kate Conigrave. Expected date of submission is March 2009.

Larance, Briony (2006-present).

A comparative study of the diversion and injection of methadone, buprenorphine and buprenorphine-naloxone.

Full-time PhD in the School of Public Health & Community Medicine, UNSW. Joint supervision by Prof Louisa Degenhardt and Prof Richard Mattick. Expected date of submission is March 2010.

Larney, Sarah (2007-present).

Opioid dependency treatment in closed setting in South East Asia.

Full-time PhD in the School of Public Health & Community Medicine, UNSW. Supervision by A/Prof Kate Dolan. Expected date of submission is June 2010.

Maloney, Elizabeth (2005-2008).

Patterns of suicidal behaviour, comorbidity and drug use among opioid dependent subjects and matched control subjects.

Full-time PhD in the School of Public Health & Community Medicine, UNSW. Joint supervision by Prof Louisa Degenhardt and Prof Shane Darke. Awarded in 2008.

Mammen, Kristie (2006-present). *Monitoring the implementation of buprenorphine-naloxone (Suboxone®) in Australia.*

Full-time PhD in the School of Public Health & Community Medicine, UNSW. Joint supervision by A/Prof James Bell and Prof Richard Mattick. Expected date of submission is January 2010.

Martin, Greg (2002-2008).

Brief motivational intervention for adolescent cannabis users.

Part-time PhD in the School of Public Health & Community Medicine, UNSW. Joint supervision by Prof Jan Copeland and Prof Shane Darke. Awarded in 2008.

Matthew-Simmons, Francis (2007-present).

The impact of public opinion on illicit drug policy.

Full-time PhD in the School of Public Health & Community Medicine, UNSW. Supervision by A/Prof Alison Ritter. Expected date of submission is January 2011.

Mewton, Louise (2008-present).

Mental disorders in young people: evidence from the 2nd Australian National Survey of Mental Health and Wellbeing.

Full-time PhD in the School of Public Health & Community Medicine, UNSW. Joint supervision by Prof Maree Teesson and Dr Tim Slade. Expected date of submission is June 2011.

Navarro, Hector (2008-present).

Cost benefit analysis of a community action intervention strategy to reduce alcohol-related harm in rural NSW.

Full-time PhD in the School of Public Health & Community Medicine, UNSW. Joint supervision by Dr Anthony Shakeshaft and Dr Chris Doran. Expected date of submission is November 2011.

Nelson, Paul (2008-present).

Longitudinal study of drug use, health and offending outcomes for young offenders.

Full-time PhD in the School of Public Health & Community Medicine, UNSW. Supervision by Prof Louisa Degenhardt. Expected date of submission is June 2011.

APPENDICES

Newton, Nicola (2006-present).

CLIMATE Schools: The development of a computer-based drug and alcohol prevention program for Year 8 students.
Full-time PhD in the School of Public Health & Community Medicine, UNSW. Joint supervision by Prof Maree Teesson and Prof Gavin Andrews. Expected date of submission is March 2009.

Savage, Stewart (2008-present).

An investigation of alternate substitution pharmacotherapies for the treatment of opioid dependence.

Full-time PhD in the School of Public Health & Community Medicine, UNSW. Joint supervision by Prof R Mattick and Dr Nicholas Lintzeris. Expected date of submission is June 2011.

Shanahan, Marian (2007-present).

Assessing the economic consequences of cannabis policy options.

Full-time PhD in the School of Public Health & Community Medicine, UNSW. Supervision by A/Prof Alison Ritter. Expected date of submission is January 2011.

Shand, Fiona (2007-present).

Patterns of substance abuse and mental health comorbidity in a heroin dependent group.

Full-time PhD in the School of Public Health & Community Medicine, UNSW. Supervision by Prof Louisa Degenhardt. Expected date of submission is January 2011.

Shearer, James (2005-present).

Agonist pharmacotherapy for psychostimulant dependence.

Full-time PhD in the School of Public Health & Community Medicine, UNSW. Joint supervision by Prof Shane Darke and Prof Alex Wodak. Submitted December 2008.

Silins, Edmund (2008-present).

Initiation, persistence and cessation of cannabis use and subsequent mental health outcomes.

Full-time PhD in the School of Public Health & Community Medicine, UNSW. Joint supervision by Dr Delyse Hutchinson and Dr Tim Slade. Expected date of submission is June 2011.

Simpson, Melanie (2008-present).

High risk users project: cannabis use and crime.

Full-time PhD in the School of Public Health & Community Medicine, UNSW. Joint supervision by Prof Jan Copeland and Dr Judy Putt. Expected date of submission is November 2011.

Wallace, Catherine (2006-present).

Treatment of drug use in pregnancy.

Part-time PhD in the School of Public Health & Community Medicine, UNSW. Supervision by Dr Lucy Burns. Expected date of submission is December 2010.

APPENDIX D

RESEARCH GRANTS AND FUNDING

PROJECTS	Funding Source	Total Award	Expenditure 2007	Expenditure 2008
Centre Core Funding with 6 month ext to December 2008 (includes projects funded from Core Grant)	AGDHA	\$8,149,235 (5.5 years)	\$2,574,854	\$2,915,708
Illicit drug reporting system extension (IDRS)	AGDHA	\$735,025 (4 years)*	\$202,284	\$346,493
Ecstasy and Related Drugs Reporting System (EDRS)	AGDHA	\$1,417,582 (5 years)*	\$519,452	\$491,634
The evaluation of treatment outcomes for methamphetamine users	AGDHA	\$175,000 (3 years)*	\$69,034	\$21,765
Psychostimulant mortality, coronary disease and other serious health effects study	AGDHA	\$149,229 (4 years)	\$49,138	\$29,351
National Drug Strategy monograph on the health and psychological effects of Ecstasy	AGDHA	\$89,738 (2 years)	\$60,086	\$25,398
CLIMATE Schools: Psychostimulant and cannabis module	AGDHA	\$250,046 (3 years)*	\$184,969	\$1,887
Illicit drug use in Australia - epidemiology, use patterns and associated harm	AGDHA	\$23,400	\$16,897	\$6,503
To develop a DVD resource for the treatment of opioid users	AGDHA	\$177,000	\$156,933	\$20,067
Secondary analysis of the relationship between cannabis use, dependence, mental health and associated outcomes in the Victorian Adolescent Cohort Study	AGDHA	\$190,349 (2 years)*	\$35,494	\$154,855
Monograph on Cannabis and Mental Health	AGDHA	\$126,177	\$89,259	\$36,918
Development of Clinical Guidelines for the Management of Cannabis Use Disorder	AGDHA	\$238,631 (2 years)*	\$28,336	\$72,364
Identification of barriers to, and facilitators to cannabis treatment	AGDHA	\$189,920 (2 years)*	\$57,787	\$93,198
Review of literature on the secondary supply of alcohol to minors	AGDHA	\$36,140	\$8,340	\$27,800
Pilot Trial of "Alcohol Treatment Guidelines for Indigenous Australians" and evidence-based brief intervention in two Aboriginal Communities	AGDHA	\$17,826 (2 years)*	\$7,956	\$9,870
Second National Survey of Mental Health and Well Being	AGDHA	\$82,175 (2 years)*	\$7,024	\$75,151
Establishment of the National Cannabis Prevention & Intervention Centre (NCPIC)	AGDHA	\$11,579,090 (4 years)*	\$180,013	\$3,180,006
The development of standardised treatment monitoring tool for use by researchers and clinicians: AATOM	AERF	\$350,000 (2 years)	\$79,965	\$40,012
Reducing alcohol related harm in rural communities: A randomised control trial	AERF (via UNEW)	\$1,200,000 (5 years)*	\$317,950	\$432,942
Fear, Sadness and Alcohol Use in Adolescence: a test of new curriculum models to prevent adverse outcomes	ARC	\$270,000 (3 years)*	\$43,141	\$101,627
Drug Policy Modelling Program (DPMP) - stage two	CF	\$7,661,973 (5 years)*	\$657,971	\$1,374,183
Development and evaluation of specialist services for female drug users in Iran	DROSOS	\$277,778 (2 years)*	\$92,082	\$114,386
Treating comorbid post traumatic stress disorder (PTSD) & amphetamine dependence	HAC	\$50,000	\$41,456	\$8,544
Evaluation of the MDECC parent's prepared program	MDECC	\$34,722 (3 years)*	\$19,244	\$3,137
A review of the literature on the effect of methamphetamine use on violent behaviour	NBCSR	\$19,928	\$2,500	\$17,428
Comparative Rates of Violent Crime Amongst Methamphetamine and Opioid Users	NDLERF	\$194,051 (3 years)*	\$38,578	\$77,761
Using population health data to improve health services, policy and planning (HERON)	NHMRC (via USyd)	\$497,367 (5 years)*	\$97,484	\$133,098
An empirical investigation of psychosis proneness in amphetamine users	NHMRC (via GU)	\$160,750 (3 years)*	\$75,398	\$35,056

APPENDICES

PROJECTS - Continued	Funding Source	Total Award	Expenditure 2007	Expenditure 2008
Longitudinal treatment outcomes for methamphetamine dependence: a treatment cohort study	NHMRC	\$720,500 (4 years)*	\$254,343	\$120,030
The efficacy of an intervention for PTSD among illicit drug users	NHMRC	\$558,125 (3 years)*	\$108,902	\$192,074
Integrating Treatment for Alcohol Use Problems and Comorbid PTSD	NHMRC	\$651,725 (3 years)*	\$68,183	\$211,935
Longitudinal study of opioid maintenance treatment in NSW: mortality among opioid dependent persons in pharmacotherapy 1985-2006	NHMRC	\$144,500 (2 years)*	\$43,637	\$66,488
Opioid dependence: candidate genes and GxE effects (comorbidity and trauma study)	NIH (via WU)	\$1,293,783 (5 years)*	\$343,583	\$24,836
Post-marketing surveillance of buprenorphine-naloxone (Suboxone)	RB	\$359,655 (3 years)*	\$141,275	\$160,050
Opioid Pharmacotherapy Review	SALV (via ANCD)	\$55,687	\$70,406	\$1,987
Investigating the availability and nature of Hepatitis C antiviral therapy in NSW particularly for illicit drug users	SCHER	\$6,097	\$4,525	\$1,467
Secretariat for the UN Reference Group on HIV/AIDS and Injecting Drug Use, Particularly in Developing and Transitional Countries	UNOV	\$118,761	\$106,805	\$11,956
Pre-release methadone maintenance programs in compulsory rehabilitation centres in China (US\$252,918)	UNODC	\$297,548 (2 years)*	\$35,371	\$39,472
Development of guidelines: Drug detoxification and drug treatment in areas of high prevalence or risk and closed institution	WHO	\$186,000 (2 years)*	\$23,591	\$20,281
Developing a model to assess the economic consequences of cannabis policy options	ARC	\$244,310 (3 years)*	\$0	\$53,064
National Comorbidity Clinical Guidelines	AGDHA	\$159,500	\$0	\$96,760
Enhancing the management of alcohol-related problems amongst indigenous Australians	AGDHA	\$142,295 (2 years)*	\$0	\$55,298
Athletes and Illicit Drug Use	AGDHA	\$240,454 (2 years)*	\$0	\$111,225
Suicide Risk Assessment and Intervention Strategies: current practice among drug and alcohol treatment providers	AGDHA	\$160,042 (2 years)*	\$0	\$9,948
Second National Survey of Mental Health and Well Being	AGDHA	\$220,480 (2 years)*	\$0	\$17,612
The Range and Magnitude of Alcohol's Harm to Others	AERF (via TP)	\$94,174 (2 years)*	\$0	\$2,568
The statistical relationship between alcohol-related crime and liquor outlets in the City of Sydney	CCS	\$16,063 (5 years)*	\$0	\$7,090
Foetal Alcohol Spectrum Disorder Monograph	DASSA	\$12,430 (2 years)*	\$0	\$6,715
Alcohol Use in Pregnancy	HAC	\$99,710 (2 years)*	\$0	\$26,256
Michael Project	MA	\$114,266 (3 years)*	\$0	\$9,735
Examining the relative cost effectiveness of different types of law enforcement directed towards methamphetamine	NDLERF	\$377,813 (3 years)*	\$0	\$88,508
The long-term impact of methadone maintenance treatment on criminal behaviour and imprisonment	NDLERF	\$54,353 (2 years)*	\$0	\$13,953
Organic Brain Damage After Non-Fatal Opioid Overdose	NHMRC	\$235,500 (3 years)*	\$0	\$35,485
Using Epidemiology to Inform Psychiatric Classification	NHMRC	\$363,300 (3 years)*	\$0	\$89,649
Building Capacity in Health Economic Evaluation	NHMRC	\$1,502,000 (4 years)*	\$0	\$249,919
Impact of Parental Substance Use on Infant Development and Family Functioning	UNSW	\$40,000	\$0	\$40,000
Sub-Total for Projects		\$46,850,597 (1-5 years)	\$7,830,857	\$12,702,070

SCHOLARSHIPS & FELLOWSHIPS	Funding Source	Total Award	Expenditure 2007	Expenditure 2008
Career Development Award - Responding to illicit drugs in Australia: towards evidence-based strategic policy	NHMRC	\$441,250 (5 years)*	\$90,673	\$92,500
Public Health Fellowship - Developing & disseminating effective treatments for depression & substance use comorbidity	NHMRC	\$269,000 (4 years)*	\$51,091	\$40,734
Senior Research Fellowship for M Teesson	NHMRC	\$607,500 (5 years)*	\$0	\$121,500
Senior Research Fellowship for L Degenhardt	NHMRC	\$607,500 (5 years)*	\$0	\$121,500
Reducing alcohol-related harm in rural Aboriginal communities	NHMRC	\$259,000 (4 years)*	\$0	\$57,995
Child Protection and Mothers in Substance Abuse Treatment - Fellowship	DOCS	\$201,000 (3 years)*	\$0	\$61,686
Vice-Chancellor's Postdoctoral Fellowship	UNSW	\$288,000 (3 years)*	\$90,185	\$96,966
PhD Scholarship	AERF	\$121,709 (4 years)*	\$33,369	\$38,751
PhD Scholarship	DH	\$133,653 (4 years)*	\$41,133	\$32,501
PhD Scholarship	NHMRC	\$70,025 (3.5 years)*	\$0	\$20,007
Australian Postgraduate Awards (3)	DEST	\$210,074 (3.5 years)*	\$9,980	\$60,021
Faculty Support for Research Fellow Salary Top-Ups	UNSW	\$108,674 (for 2008)*	\$59,508	\$108,674
Faculty Support for Research Fellow Projects	UNSW	\$135,000 (for 2008)*	\$45,000	\$134,979
Sub-Total for Scholarships & Fellowships		\$3,452,384 (1-5 years)	\$420,939	\$987,814

INFRASTRUCTURE	Funding Source	Annual Award	Expenditure 2007	Expenditure 2008
Faculty Support for Research Infrastructure	UNSW	\$728,407 (for 2008)*	\$481,771	\$997,929
DVC Strategic Support for Research Infrastructure	UNSW	\$616,045 (for 2008)*	\$327,730	\$758,616
Sub-Total for Infrastructure		\$1,344,452	\$809,501	\$1,756,545

GRAND TOTAL of Research Awards to NDARC		\$51,647,433 (1-5 years)	\$9,061,297	\$15,446,429
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* Indicates Continuing Project

APPENDICES

APPENDIX E

2008 SEMINARS

In House Seminars

Feb 14	Toxicology and circumstances of completed suicide by non-substance ingestion Shane Darke	Jul 24	The CLIMATE Schools Cannabis Module Nicola Newton
Feb 21	Alcohol use and sex work by Cambodian 'beer girls' Sarah Larney	Aug 14	Substance use, posttraumatic stress and violent crime Emma Barrett
Feb 28	Potency and Contamination of Cannabis – Views of Key Experts Peter Gates	Aug 21	ADHD and substance abuse: challenges for research and international collaboration Geurt van de Glind, Trimbos Institute, The Netherlands
Mar 13	Barriers and Facilitators to Cannabis Treatment Peter Gates	Sep 11	Are non-fatal opioid overdoses misclassified suicide attempts? Comparing the associated correlates Elizabeth Maloney
Mar 20	Methamphetamine Treatment Evaluation Study (MATES) Rebecca McKetin, Cathie Sammut, Kate Hetherington, Rachel Sutherland and Erin Kelly	Sep 18	New Australian trends in pharmaceutical opioids Amanda Roxburgh
Apr 10	Epidemiology and Nosology Tim Slade	Oct 9	Multidisciplinary collaborations towards improving illicit drug policy: the example of the Drug Policy Modelling Program Alison Ritter
Apr 17	Alcohol and the adolescent brain Maree Teesson	Oct 16	Reducing alcohol related harm amongst indigenous Australians: Identifying opportunities for indigenous community controlled health care services Anton Clifford
May 8	The effectiveness of peer harm reduction interventions for Ecstasy users Annie Bleeker	Nov 13	Comparing physical and mental health scores in Sydney Regular Drug User Surveys Laura Scott
May 15	Substance use in pregnancy: an overview Lucy Burns	Nov 20	The AARC Project: methods and results to date Anthony Shakeshaft
Jun 12	The economic costs of Cannabis policy Marian Shanahan		
Jun 19	Anabolic-androgenic steroid users: What do we know, why do we want to know, and how can we find out? Matthew Dunn		
Jul 10	Secondary analyses of Cannabis use in the Victorian Adolescent Cohort Study Wendy Swift		

Invited Seminars

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| <p>Mar 20 Overseas experience of groin injecting: clinical and conceptual issues.
Dr Deborah Zador
Clinical Director, Drug & Alcohol Central Planning, Justice Health</p> | <p>Sep 5 The Psychobiology of Recreational MDMA or Ecstasy
Professor Andy Parrot, School of Human Sciences, Swansea University, Wales</p> |
| <p>Apr 24 Respiratory depression associated with opioid use.
Dr Nick Lintzeris
Senior Staff Specialist, Drug Health Services, SSWAHS</p> | <p>Sep 25 HCV and the management of drug and alcohol patients.
Professor Robert Batey
Professor of Medicine (UNSW) at Bankstown Hospital</p> |
| <p>May 22 Drug and alcohol research in the criminal justice sector.
Dr Devon Indig & Dr Libby Topp
Department of Juvenile Justice</p> | <p>Sep 29 From health research to social research: Privacy, methods, approaches
Professor Leslie Roos
Manitoba Centre for Health Policy and Evaluation, University of Manitoba</p> |
| <p>Jun 26 Assessing and measuring mental health symptoms in cannabis users.
Dr Adam Winstock
Senior Staff Specialist, Drug Health Services, SSWAHS</p> | <p>Oct 23 The changing face of therapeutic communities.
Mr Garth Popple
Executive Director, We Help Ourselves, and Co-Deputy Chair of the Australian National Council on Drugs</p> |
| <p>Jul 24 Motivational Interviewing: An Accidental Avalanche.
Professor William R. Miller
Emeritus Distinguished Professor of Psychology & Psychiatry, University of New Mexico</p> | <p>Nov 27 Does ADHD exist and how does it relate to substance abuse behaviours?
Professor David Hay
Department of Psychology, Curtin University</p> |
| <p>Aug 28 Preliminary results from the NHMRC DAISI trial: depression and alcohol - integrated versus single focus intervention.
A/Professor Amanda Baker
NHMRC Senior Research Fellow, Centre for Brain and Mental Health Research, University of Newcastle</p> | <p>Dec 11 Dimensions, prototypes, and spectrums: Toward DSM-V
Professor Robert Krueger
Department of Psychiatry, Washington University</p> |

APPENDIX F

2008 PUBLICATIONS

REPORTS & MONOGRAPHS

DPMP Monograph Series

16. Hughes, C., & Ritter, A. (2008) *A Summary of Diversion Programs for Drug and Drug-Related Offenders in Australia*. National Drug and Alcohol Research Centre, Sydney.

17. Matthew-Simmons, F., Love, S., & Ritter, A. (2008) *A Review of Australian Public Opinion Surveys on Illicit Drugs*. National Drug and Alcohol Research Centre, Sydney.

Australian Drug Trends Series

1. Black, E., Roxburgh, A., Degenhardt, L., Bruno, R., Campbell, G., de Graaff, B., Fetherston, J., Kinner, S., Moon, C., Quinn, B., Richardson, M., Sindicich, N. & White, N. (2008). *AUSTRALIAN DRUG TRENDS 2007: Findings from the Illicit Drug Reporting System (IDRS)*. National Drug and Alcohol Research Centre, Sydney

2. Sindicich, N. & Degenhardt, L., (2008). *NSW DRUG TRENDS 2007: Findings from the Illicit Drug Reporting System (IDRS)*. National Drug and Alcohol Research Centre, Sydney.

3. Campbell, G. & Degenhardt, L., (2008). *ACT DRUG TRENDS 2007: Findings from the Illicit Drug Reporting System (IDRS)*. National Drug and Alcohol Research Centre, Sydney.

4. Quinn, B. (2008). *VICTORIAN DRUG TRENDS 2007: Findings from the Illicit Drug Reporting System (IDRS)*. National Drug and Alcohol Research Centre, Sydney.

5. de Graaff, B. & Bruno, R., (2008). *TASMANIAN DRUG TRENDS 2007: Findings from the Illicit Drug Reporting System (IDRS)*. National Drug and Alcohol Research Centre, Sydney.

6. White, N., Vial, R. & Ali, R. (2008). *SA DRUG TRENDS 2007: Findings from the Illicit Drug Reporting System (IDRS)*. National Drug and Alcohol Research Centre, Sydney.

7. Fetherston, J. & Lenton, S. (2008). *WA DRUG TRENDS 2007: Findings from the Illicit Drug Reporting System (IDRS)*. National Drug and Alcohol Research Centre, Sydney.

8. Moon, C. (2008). *NT DRUG TRENDS 2007: Findings from the Illicit Drug Reporting System (IDRS)*. National Drug and Alcohol Research Centre, Sydney.

9. Richardson, M. & Kinner, SA. (2008). *QLD DRUG TRENDS 2007: Findings from the Illicit Drug Reporting System (IDRS)*. National Drug and Alcohol Research Centre, Sydney.

10. Black, E., Dunn, M., Degenhardt, L., Campbell, G., George, J., Kinner, SA., Matthews, A., Quinn, B., Roxburgh, A., Urbancic-Kenny, A. & White, N. (2008).

AUSTRALIAN TRENDS IN ECSTASY AND RELATED DRUG MARKETS 2007: Findings from the Ecstasy and Related Drugs Reporting System (EDRS). National Drug and Alcohol Research Centre, Sydney.

11. Dunn, M. & Degenhardt, L. (2008). *NSW TRENDS IN ECSTASY AND RELATED DRUG MARKETS 2007: Findings from the Ecstasy and Related Drugs Reporting System (EDRS)*. National Drug and Alcohol Research Centre, Sydney.

12. Campbell, G. & Degenhardt, L. (2008). *ACT TRENDS IN ECSTASY AND RELATED DRUG MARKETS 2007: Findings from the Ecstasy and Related Drugs Reporting System (EDRS)*. National Drug and Alcohol Research Centre, Sydney.

13. Quinn, B. (2008). *VICTORIAN TRENDS IN ECSTASY AND RELATED DRUG MARKETS 2007: Findings from the Ecstasy and Related Drugs Reporting System (EDRS)*. National Drug and Alcohol Research Centre, Sydney.

14. Matthews, A. & Bruno, R. (2008). *TASMANIAN TRENDS IN ECSTASY AND RELATED DRUG MARKETS 2007: Findings from the Ecstasy and Related Drugs Reporting System (EDRS)*. National Drug and Alcohol Research Centre, Sydney

15. White, N., Vial, R. & Ali, R. (2008). *SA TRENDS IN ECSTASY AND RELATED DRUG MARKETS 2007: Findings from the Ecstasy and Related Drugs Reporting System (EDRS)*. National Drug and Alcohol Research Centre, Sydney.

16. George, J. & Lenton, S. (2008). *WA TRENDS IN ECSTASY AND RELATED DRUG MARKETS 2007: Findings from the Ecstasy and Related Drugs Reporting System (EDRS)*. National Drug and Alcohol Research Centre, Sydney.

17. Campbell, G. & Degenhardt, L. (2008). *NT TRENDS IN ECSTASY AND RELATED DRUG MARKETS 2007: Findings from the Ecstasy and Related Drugs Reporting System (EDRS)*. National Drug and Alcohol Research Centre, Sydney.

18. Urbancic-Kenny, A., Richardson, M. & Kinner, SA. (2008). *QLD TRENDS IN ECSTASY AND RELATED DRUG MARKETS 2007: Findings from the Ecstasy and Related Drugs Reporting System (EDRS)*. National Drug and Alcohol Research Centre, Sydney.

NDARC Technical Report Series

292. Wardlaw, G. (2008). *Final Report: Illicit Drug Reporting System. Consultant's report to the Commonwealth Department of Human Services and Health*. National Drug and Alcohol Research Centre, Sydney.

293. Calabria, B., Phillips, B., Singleton, J., Mathers, B., Congreve, E., Degenhardt, L., & McLaren, J. (2008). *Searching the grey literature to access information on drug and alcohol research*. National Drug and Alcohol Research Centre, Sydney.

294. Hetherington, K., & McKetin, R. (2008). *The contribution of cannabis use to psychotic symptoms among methamphetamine treatment entrants.* National Drug and Alcohol Research Centre, Sydney.

295. Cogger, S., McKetin, R., Ross, J., & Najman, J. (2008). *Methamphetamine Treatment Evaluation Study (MATES): Findings from the Brisbane Site.* National Drug and Alcohol Research Centre, Sydney.

296. Simpson, M., Copeland, J., & Lawrinson, P. (2008). *The Australian Alcohol Treatment Measure (AATOM-C): Findings of the 12-month feasibility study.* National Drug and Alcohol Research Centre, Sydney.

297. Winstock, A., Lea, T., & Molan, J. (2008). *NSW Community Pharmacy Survey: SWAT Report 2,* National Drug and Alcohol Research Centre, Sydney.

298. Winstock, A., Molan, J., & Lea, T. (2008). *Survey of New South Wales Opioid Treatment Program Public Clinics: SWAT Report 3,* National Drug and Alcohol Research Centre, Sydney.

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Baxter, A., Somerville, A., Pham, A., Ventura, A., Scheurer, R., Calabria, B., McLaren, J., Roberts, A., Degenhardt, L. & Whiteford H. for the Mental Disorders and Illicit Drug Use Expert Group (2008). *Summary of data collected and decision rules used in making regional and global estimates: Anxiety Disorders.* Queensland Centre for Mental Health Research, Brisbane.

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Degenhardt, L.J. (2008) *Comparative risk assessment for cannabis use. Global Burden of Disease Mental Disorders and Illicit Drug use Expert Group, Illicit drug discussion Paper No. 10,* National Drug and Alcohol Research Centre, Sydney.

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APPENDICES

Weatherburn, D., Grunseit, AC. & Donnelly, N. (2008) 'Correlates of physical violence at school: A multilevel analysis of Australian high school students', in *Australian Journal of Social Issues*, vol **43(4)**, pp. 523-527.

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APPENDIX G

2008 CONFERENCE PRESENTATIONS

Arcuri, A. *Do young cannabis users require residential treatment?* Presentation to the 13th International 2nd World Conference of the Association of Psychology and Psychiatry for Adults and Children (APPAC), Athens Greece, May 20-23.

Barrett, E. *The relationship between substance use, PTSD and perpetration of violent crime.* UNSW School of Public Health and Community Medicine 6th Annual Research Student Conference, Sydney, 13 November 2008.

Barrett, E., Mills, K., Teesson M. *Posttraumatic Stress Disorder, Substance Use and the Perpetration of Violent Crime.* Poster presentation at the 15th Australasian Conference on Traumatic Stress (ACOTS), Melbourne, 11-13 September.

Barrett, E., Mills, K., Teesson M. *The relationship between substance use disorder, PTSD and criminal behaviour.* Australasian Professional Society of Alcohol and Other Drugs (APSAD) Conference 2008, Sydney, 23-26 November.

Bleeker, A. *From research to practice: the feasibility of peer-led interventions to deliver health information to ecstasy and related drug users.* Australasian Professional Society of Alcohol and Other Drugs (APSAD) Conference 2008, Sydney, 23-26 November.

Bleeker, A., Silins, E., Dillon, P., Copeland. *Lesson learned: what are the effective components of a peer education for ecstasy and related drug users.* Club Health 2008 - The 5th International Conference on Nightlife, Substance Use & Health Related Issues, Ibiza Spain, 23-25 June.

Breen, C. *Examining alcohol consumption in rural NSW.* UNSW School of Public Health and Community Medicine 6th Annual Research Student Conference, Sydney, 13 November 2008.

Burns, L. *Infant mortality among drug dependent women.* Poster presentation at The College on Problems of Drug Dependence 70th Annual Meeting, San Juan, Puerto Rico, 14-19 June.

Burns, L. *National Illicit Drug Reporting System overview.* 2008 National Drug Trends Conference, Sydney, 23 November.

Burns, L., Black, E., Sindicich, N., Stafford, J., Conroy, E. *Homelessness among sentinel samples of regular drug users: what do we know?* Australasian Professional Society of Alcohol and Other Drugs (APSAD) Conference 2008, Sydney, 23-26 November.

Burns, L., Conroy, E., Black, E., Larney, S. *Homelessness and substance use.* NDARC Annual Symposium, Sydney, 31 July-1 August.

Burns, L., Conroy, E., Haber, P., Hutchinson, D. *Characteristics of substance-using women attending a public antenatal clinic.* Poster presentation at The Fourth European Association of Addiction Therapy Conference, Florence Italy, 13-15 October.

Burns, L., Conroy, E., Haber, P., Hutchinson, D. *Characteristics of substance-using pregnant women attending a public antenatal clinic.* Australasian Professional Society of Alcohol and Other Drugs (APSAD) Conference 2008, Sydney, 23-26 November.

Burns, L., Conroy, E., Larney, S., Mills, K., Teesson, M. *Drug use and high risk behaviours among the homeless.* Public Health Congress, Brisbane, 7-9 July.

Burns, L., Larney, S., Conroy, E., Mills, K., Teesson, M. *Emerging trends in drug use and high risk behaviours among the homeless.* Poster presentation at The Fourth European Association of Addiction Therapy Conference, Florence Italy, 13-15 October.

Burns, L., Mattick, RP. *Infant mortality among drug dependent women.* The Fourth European Association of Addiction Therapy Conference, Florence Italy, 13-15 October.

Burns, L., Randall, D., Law, M., Hall, W., Butler, T., Bell, J., Degenhardt, L. *Opioid agonist pharmacotherapy in New South Wales from 1985 to 2006: Patient characteristics and predictors of treatment retention.* Poster presentation at the Australasian Professional Society of Alcohol and Other Drugs (APSAD) Conference 2008, Sydney, 23-26 November.

Chalmers, J. *A system dynamics model of Australian opioid pharmacotherapy maintenance treatment.* Presentation at the 2nd Annual Conference of the International Society for the Study of Drug Policy, Lisbon Portugal, 3-4 April.

Clifford, A. *Development and adaptation of an intervention to enhance the delivery of evidence-based screening and brief intervention (SBI) for alcohol in Aboriginal Community Controlled Health Services.* CRIAH Aboriginal Health Research Conference, Sydney, 29-30 April.

Clifford, A. *Alcohol screening and brief intervention in Aboriginal healthcare settings in Australia: towards evidence-based practice.* Presentation to the 2008 International Society of Addiction Medicine Congress 10th Annual Scientific Meeting, Capetown South Africa, 17-20 November.

Conroy, E., Burns, L., Haber, P., Hutchinson, D. *Characteristics of substance-using pregnant women attending a public antenatal clinic.* International Addiction Summit, Melbourne, 10-12 July.

Conroy, E., Burns, L., Haber, P., Hutchinson, D. *Characteristics of substance-using pregnant women attending a public antenatal clinic.* The Fourth European Association of Addiction Therapy Conference, Florence Italy, 13-15 October.

Conroy, E., Degenhardt, L., Ward, J., Nelson, E. *Risk for major depressive episode associated with type but not severity of child maltreatment among an opioid-dependent sample and a matched control group.* Poster presentation at the International Addiction Summit, Melbourne, 10-12 July.

APPENDICES

Conroy, E., Degenhardt, L., Ward, J., Nelson, E., Mattick, RP. *Child maltreatment as a risk factor for psychiatric comorbidity among persons with opioid dependence.* Poster presentation at the Australasian Professional Society of Alcohol and Other Drugs (APSAD) Conference 2008, Sydney, 23-26 November.

Conroy, E., Larney, S., Burns, L., Mills, K., Teesson, M. *Health and substance use issues among homeless persons in inner Sydney.* Poster presentation at the International Addiction Summit, Melbourne, 10-12 July.

Copeland, J. *Interventions for cannabis use disorder.* Invited address to the 1st Annual ATDC Conference, Hobart, 28-30 April.

Copeland, J. *What we know about cannabis?* Presentations to the North Queensland District Officer in Charge Conference, Cairns, 30 May.

Copeland, J. *A new approach to the community reduction of cannabis use: The Australian National Cannabis Prevention and Information Centre.* Poster presentation at The College on Problems of Drug Dependence 70th Annual Meeting, San Juan, Puerto Rico, 14-19 June.

Copeland, J. *Overview of the National Cannabis Prevention and Information Centre.* Presentation to the NDARC Annual Symposium, Sydney, 1 August.

Copeland, J. *Cannabis: implications for treatment in residential settings.* Keynote presentation to the Australian Therapeutic Communities Association Conference, Byron Bay, 9 September.

Copeland, J. *Clinical Interventions for Cannabis: what's new at NCPIC?* Presented at the Australasian Professional Society of Alcohol and Other Drugs (APSAD) Conference 2008, Sydney, 25 November.

Deady, M., Mills, K., Proudfoot, H., Sannibale, C., Teesson, M., Mattick, RP. *An overview of the National Comorbidity Clinical Guidelines.* Australian Therapeutic Communities Association Conference, Byron Bay, 9-11 September.

Degenhardt, L. *Crystal methamphetamine among the GLBT community.* Panel presented at Harm Reduction 2008 - International Harm Reduction Association's 19th International Conference, Barcelona Spain, 11-15 May.

Degenhardt, L. *Data reported for the 2005 UNGASS reporting round on coverage of injecting drug users with HIV prevention and care services.* Paper presented at the UNAIDS Monitoring and Evaluation Meeting, Geneva Switzerland, 28 May.

Degenhardt, L. *Cannabis use and mental health, and estimating the global burden of disease attributable to cannabis dependence.* Symposium paper presented at The College on Problems of Drug Dependence 70th Annual Meeting, San Juan, Puerto Rico, 14-19 June.

Degenhardt, L. *The global epidemiology of pharmaceutical opioid injection and the association with HIV.* Poster presentation at the NIDA International Forum, San Juan, Puerto Rico, 14-19 June.

Degenhardt, L. *Estimating the global burden of disease attributable to mental disorders and illicit drug dependence.* Paper presented at the 2008 World Mental Health Survey Consortium Annual Meeting, Annapolis USA, 8-13 July.

Degenhardt, L. *Estimating the global burden of disease attributable to illicit drug dependence.* Paper presented at the NDARC Annual Symposium, Sydney, 31 July-1 August.

Degenhardt, L., Dunn, M., Campbell, G., Roxburgh, A. *The epidemiology of "ecstasy" use and related harm - what do we know?* 43rd Annual Conference of the Australian Psychological Society, Hobart, 23-26 September.

Degenhardt, L., Dunn, M., Campbell, G., Roxburgh, A., Topp, L. *The epidemiology of ecstasy use and harms in Australia.* Psychobiology of MDMA Symposium, Swinburne University Melbourne, 11 September.

Degenhardt, L., Larance, B., Mathers, B., Azim, T., Kamarulzaman, A., Mattick, R., Panda, S., Toufik, A., Tyndall, M., Wiessing, L., Wodak, A., on behalf of the Reference Group to the United Nations on HIV and Injecting Drug Use. *Essential treatment and diverted medication: A review of the injection of pharmaceutical opioids - how does the Asian experience compare to the global situation.* Poster presentation at Response Beyond Borders - 1st Asian Consultation on the Prevention of HIV Related to Drug Use, Goa India, 28-31 January.

Degenhardt, L., Larance, L., Mathers, Phillips, B., Azim, T., Kamarulzaman, A., Mattick, R., Panda, S., Toufik, A., Tyndall, M., Wiessing, L., Wodak, A. *A global review of the injection of pharmaceutical opioids: Essential treatment and diverted medication.* Oral presentation at Harm Reduction 2008 - International Harm Reduction Association's 19th International Conference, Barcelona Spain, 11-15 May.

Degenhardt, L., Mathers, B. *The epidemiology of methamphetamine use and association with HIV in Asia.* Response Beyond Borders - 1st Asian Consultation on the Prevention of HIV Related to Drug Use, Goa India, 28-31 January.

Degenhardt, L., Mathers, B. *The global state of research on injecting drug use and HIV.* Plenary address presented at Harm Reduction 2008 - International Harm Reduction Association's 19th International Conference, Barcelona Spain, 11-15 May.

Degenhardt, L., Mathers, B., Guarinieri, M., Panda, S., Phillips, B., Strathdee, S., Tyndall, M., Wiessing, L., Wodak, A., on behalf of the Reference Group to the United Nations on HIV and Injecting Drug Use. *Methamphetamine injecting in Asia: a review of the evidence on use and associations with HIV and other harm.* Oral presentation at Response Beyond Borders - 1st Asian Consultation on the Prevention of HIV Related to Drug Use, Goa India, 28-31 January.

Degenhardt, L., Mathers, B., Phillips, B., and the Reference Group to the United Nations on HIV and Injecting Drug Use. *The global epidemiology of methamphetamine use and HIV: What do we know?* Opening invited keynote address at the First Global Conference on Methamphetamine, Prague, Czech Republic, 15-16 September.

Degenhardt, L., Mathers, B., Roberts, A., Phillips, B., Toskin, I., Rugg, D., de Lay, P. *Knowledge behaviour and HIV prevention coverage among injecting drug users (IDU) in low- and middle- income countries (LMIC): lessons from the 2005 UNGASS reporting round.* Poster presentation at the XVII International AIDS Conference, Mexico City Mexico, 3-8 August.

Degenhardt, L., Randall, D., Burns, L., Hall, W., Law, M., Butler, T. *Opioid pharmacotherapy and mortality in NSW from 1985 to 2006: rates, patterns and risks both in and out of treatment.* Australasian Professional Society of Alcohol and Other Drugs (APSAD) Conference 2008, Sydney, 23-26 November.

Degenhardt, L., Roxburgh, A., Dunn, M., Campbell, G., Bruno, R., Kinner, S., George, J., Quinn, B., White, N., Topp, L. *The epidemiology of ecstasy use and harms in Australia.* Invited keynote presentation at the Psychobiology of MDMA Symposium, Swinburne University Melbourne, 11 September.

Degenhardt, L., Roxburgh, A., Dunn, M., Campbell, G., Bruno, R., Kinner, S., George, J., Quinn, B., White, N., Topp, L. *The epidemiology of ecstasy use and harms in Australia.* Invited paper presented at the 43rd Annual Conference of the Australian Psychological Society, Hobart, 23-26 September.

Digiusto, E., McPherson, M., Ang, J., Leist, T. *Management of depression and other mental health problems among opioid maintenance patients with hepatitis C in NSW.* Sixth Australian Viral Hepatitis Conference, Brisbane, 20-22 October.

Digiusto, E., Rawstorne, P. *Is It Really Crystal Clear That USING Methamphetamine Causes People To Engage In Unsafe Sex?* Australasian Professional Society of Alcohol and Other Drugs (APSAD) Conference 2008, Sydney, 23-26 November.

Dillon, P. *Introduction to NCPIC.* Invited address to the Drug Court of NSW Practitioners' Conference, Sydney, 2 May.

Dillon, P. *Cannabis: What do we know?* Presentation to the Mental Health Services (TheMHS) Conference, Auckland, New Zealand, 3 September.

Doran, CM. *The role of cost-effectiveness analysis in health care priority setting.* Invited address to the Third Singapore Public Health and Occupational Medicine Conference, Singapore, 16-17 September.

Dunn, M. *How can those who work in the entertainment industry help monitor trends in drug use and drug-related harm?* Club Health 2008 - The 5th International Conference on Nightlife, Substance Use & Health Related Issues, Ibiza Spain, 23-25 June.

Dunn, M., Burns, L., Roxburgh, A. *Anabolic-androgenic steroid use in Australia: What do we know, why do we want to know, and how can we find out?* Poster presentation at Australasian Professional Society of Alcohol and Other Drugs (APSAD) Conference 2008, Sydney, 23-26 November.

Dunn, M., Degenhardt, L., Black, E., Bruno, R., Campbell, G., George, J., Matthews, A., White, N. *BBI risk behaviours of regular ecstasy users: Implications for health promotion campaigns.* 10th Social Research Conference on HIV, Hepatitis C and Related Diseases, Sydney, 27-28 March.

Dunn, M., Kinner, S., Degenhardt, L. *Club drugs? Exploring the locations of ecstasy and related drug use.* Club Health 2008 - The 5th International Conference on Nightlife, Substance Use & Health Related Issues, Ibiza Spain, 23-25 June.

Dunn, M., Mazanov, J., Sitharthan, G. *Predicting future anabolic-androgenic steroid use intentions with current substance use: Findings from an Internet-based survey.* Australasian Professional Society of Alcohol and Other Drugs (APSAD) Conference 2008, Sydney, 23-26 November.

Frewen, A. *Management of cannabis- versus psychostimulant-related issues among general practice patients.* Poster presentation at the General Practice and Primary Health Care Research Conference: Health for All? Hobart, 4-6 June.

Frewen, A. *Cannabis: What do we know about cannabis?* Pre-conference presentation to The Mental Health Services (TheMHS) Conference, Auckland New Zealand, 2 September.

Frewen, A. *Cannabis: What do we know about cannabis and mental health?* Presentation to The Mental Health Services (TheMHS) Conference, Auckland New Zealand, 3 September.

Frewen, A. *Cannabis: What do we know about treatment?* Presentation to The Mental Health Services (TheMHS) Conference, Auckland New Zealand, 3 September.

Frewen, A. *Development of clinical guidelines.* Presented as part of the session 'Clinical interventions for cannabis-related problems: What's new at NCPIC?' at the Australasian Professional Society of Alcohol and Other Drugs (APSAD) Conference 2008, Sydney, 23-26 November.

Gates, P. *Barriers and Facilitators to Cannabis Treatment.* Presentation to the Australian Drug Foundation Winter School Conference, Brisbane, 12-14 May.

Gates, P. *Barriers and Facilitators to Cannabis Treatment.* Presentation to the NDARC Annual Symposium, Sydney, 31 July-1 August.

Gates, P. *Barriers and facilitators to treatment for cannabis users.* Presentation as part of the session 'Clinical interventions for cannabis-related problems: What's new at NCPIC?' at the Australasian Professional Society of Alcohol and Other Drugs (APSAD) Conference 2008, Sydney, 23-26 November.

Gates, P., Swift, W., McLaren, J., Dillon, P., Allsop, S. *Cannabis potency and contamination: views of key experts.* Poster presentation at The College on Problems of Drug Dependence 70th Annual Meeting, San Juan, Puerto Rico, 14-19 June.

Howard, J. *Residential treatment for young cannabis users – necessary and appropriate?* Presentation to the Australian Therapeutic Communities Association Conference, Byron Bay, 9 September.

Howard, J. *Do young cannabis users require residential treatment?* Presentation to Australian Psychological Society Annual Conference, Hobart, Tasmania, September 17-23, 2008.

Howard, J. *Is residential treatment for young cannabis users necessary?* Presentation to European Forensic Child and Adolescent Psychiatry, Psychology and other involved professions, 10th Anniversary Congress on Mental Health, Delinquency and Juvenile Justice, Amsterdam Netherlands, 21-24 October.

APPENDICES

Howard, J. *Spaced Out: cannabis, young people and residential treatment.* Paper presented at Adolescent Health 2008: 7th Annual Australian and New Zealand Adolescent Health Conference, Melbourne, 5-7 November.

Hughes, C. *Impacts from the Portuguese decriminalization of illicit drugs: What we know, what remains unclear and why we need to know more.* Presentation at the British Society of Criminology Conference 2008, Huddersfield UK, 9-11 July.

Hughes, C. *Modelling Cannabis Diversion.* Australasian Professional Society of Alcohol and Other Drugs (APSAD) Conference 2008, Sydney, 23-26 November.

Kaye, S., Darke, S., Duflou, J., McKetin, R. *Demographics, toxicology and major organ pathology of methamphetamine-related deaths in Australia.* Australasian Professional Society of Alcohol and Other Drugs (APSAD) Conference 2008, Sydney, 23-26 November.

Kelly, E., McKetin, R., Baillie, A. *Treatment-seeking and motivation to reduce methamphetamine use amongst a community sample of methamphetamine users.* Australasian Professional Society of Alcohol and Other Drugs (APSAD) Conference 2008, Sydney, 23-26 November.

Larney, S. *Meta-analysis of opioid substitution treatment in prisons.* UNSW School of Public Health and Community Medicine 6th Annual Research Student Conference, Sydney, 13 November 2008.

Larney, S., Conroy, E., Mills, K., Burns, L., Teesson, M. *Post-traumatic stress disorder amongst homeless, substance-using adults.* Poster presentation at the Australasian Professional Society of Alcohol and Other Drugs (APSAD) Conference 2008, Sydney, 23-26 November.

Larance, B., Degenhardt, L., Mattick, R., O'Brien, S., Ali, R., Bell, J., Lintzeris, N., Winstock, A. *The diversion and injection of buprenorphine-naloxone: preliminary findings from the post-marketing surveillance studies.* Australasian Professional Society of Alcohol and Other Drugs (APSAD) Conference 2008, Sydney, 23-26 November.

Larance, B., Degenhardt, L. *Surveillance studies monitoring the extent of diversion and injection of buprenorphine-naloxone in Australia: Preliminary findings.* Harm Reduction 2008 - International Harm Reduction Association's 19th International Conference, Barcelona Spain, 11-15 May.

Larance, B., Degenhardt, L. *The diversion and injection of opioid substitution treatment (OST) following the introduction of buprenorphine-naloxone: Preliminary findings from surveillance studies in Australia.* Presented at Europad (European Opiate Addiction Treatment Association) 8th European Congress on Heroin Addiction and Related Clinical Problems, Sofia Bulgaria, 29-31 May.

Larney, S., Dolan, K., Wodak, A. *Meta-analysis of opioid substitution treatment in prisons.* UNSW School of Public Health and Community Medicine 6th Annual Research Student Conference, Sydney, 13 November.

Larney, S., Dolan, K. *HIV prevention, treatment and care in prisons in India, Indonesia, Thailand and Nepal.* Poster presentation at the International Harm Reduction Conference, Barcelona, Spain, 12-15 May.

Larney, S., Dolan, K., Wodak, A. *Prison methadone maintenance treatment: Implementation and meta-analytic review.* Harm Reduction 2008 - International Harm Reduction Association's 19th International Conference, Barcelona Spain, 11-15 May.

Maher, L., Dore, G., Lloyd, A., (on behalf of the UNSW HCV Vaccine Initiative). *Issues and challenges in preparing for candidate hepatitis C virus (HCV) vaccine trials in people who inject drugs.* Poster presentation at NIDA International Forum, Puerto Rico: 14-19 June.

Maher, L., Dore, G., Treloar, C., Rawlinson, W., White, P., Dolan, K., Zekry, A., Madden, A., Loveday, S., Kaldor, J., Lloyd, A., (on behalf of the UNSW HCV Vaccine Initiative). *Preparedness for candidate HCV vaccine trials in people who inject drugs: Challenges and opportunities.* Oral presentation at Harm Reduction 2008 - International Harm Reduction Association's 19th International Conference, Barcelona Spain, 11-15 May.

Maher, L., Dore, G., Treloar, C., Rawlinson, W., White, P., Dolan, K., Zekry, A., Madden, A., Loveday, S., Kaldor, J., Lloyd, A., (on behalf of the UNSW HCV Vaccine Initiative). *Preparing for candidate HCV vaccine trials in people who inject drugs: Lessons learned from HIV.* Poster presentation at the XVII International AIDS Conference, Mexico City Mexico, 3-8 August.

Maher, L., Dore, G., Treloar, C., Rawlinson, W., White, P., Dolan, K., Zekry, A., Madden, A., Loveday, S., Kaldor, J., Lloyd, A., (on behalf of the UNSW HCV Vaccine Initiative). *Preparedness for candidate hepatitis C vaccine trials in people who inject drugs: challenges and opportunities.* Oral presentation at the Sixth Australian Viral Hepatitis Conference, Brisbane, 20-22 October.

Martin, G. *Barriers and facilitators to cannabis treatment.* Poster presentation at the NIDA International Forum, San Juan, Puerto Rico, 13-17 June.

Martin, G. *Brief motivational intervention for regular ecstasy users: A randomised trial.* Poster presentation at The College on Problems of Drug Dependence 70th Annual Meeting, San Juan, Puerto Rico, 14-19 June.

Matalon, E. *ACCU - The Adolescent Cannabis Check-Up.* Presentation at the Australian Drug Foundation Winter School Conference, Brisbane, 12-14 May.

Matalon, E. *Quitting Cannabis: a brief Intervention for cannabis use disorder.* Presentation at the Australian Drug Foundation Winter School Conference, Brisbane, 12-14 May.

Matalon, E. *A brief Intervention for cannabis related problems within the workplace.* Presentation at the 9th International Mental Health Conference, Gold Coast, 14-16 August.

Matalon, E. *ACCU - The Adolescent Cannabis Check-Up.* Presentation at the 26th Council of Remote Area Nurses of Australia Conference, Cairns, 14 September

Matalon, E. *ACCU - The Adolescent Cannabis Check-Up.* Presentation at the Adolescent Health 2008: 7th Annual Australian and New Zealand Adolescent Health Conference, Melbourne, 5-7 November.

Matalon, E. *Quitting Cannabis: a brief Intervention for cannabis use disorder.* Australasian Professional Society of

Alcohol and Other Drugs (APSAD) Conference 2008, Sydney, 23-26 November.

Matalon, E. *Quitting Cannabis: a brief Intervention for cannabis use disorder.* 13th NSW Rural Mental Health Conference, Hunter Valley, 26-28 November.

Mathers, B., Degenhardt, L., Guarinieri, M., Panda, S., Phillips, B., Strathdee, S., Tyndall, M., Wiessing, L., Wodak, A. *The world of meth/amphetamine injecting: A global review of the evidence on use and associations with HIV and other harm.* Oral presentation at Harm Reduction 2008 - International Harm Reduction Association's 19th International Conference, Barcelona Spain, 11-15 May.

Mathers, B., Degenhardt, L., Phillips, B., Roberts, A., on behalf of the Reference Group to the United Nations on HIV and Injecting Drug Use. *Improving global estimates of injecting drug use and HIV among people who inject drugs.* Oral presentation at the XVII International AIDS Conference, Mexico City Mexico, 3-8 August.

Mathers, B., Degenhardt, L., Roberts, A., Phillips, B., Toskin, I., Rugg, D., de Lay, P. *Knowledge, behaviour and HIV prevention coverage among injecting drug users (IDU) in low and middle income countries (LMIC): lessons from the 2005 UNGASS reporting round.* Poster presentation at the XVII International AIDS Conference, Mexico City Mexico, 3-8 August.

Matthew-Simmons, F. *Public opinion, the media, and illicit drug policy in Australia.* UNSW School of Public Health and Community Medicine 6th Annual Research Student Conference, Sydney, 13 November 2008.

Matthew-Simmons, F. *Public Opinion of Illicit Drug Policy: Zero Tolerance, Harm Minimisation, or Legalisation?* Australasian Professional Society of Alcohol and Other Drugs (APSAD) Conference 2008, Sydney, 23-26 November.

Matthews, G., Hellard, M., Haber, P., Yeung, B., Marks, P., Rawlinson, W., Lloyd, A., Kaldor, J., Dore, G., on behalf of the ATAHc Study Group. *Frequency of rapid virological response and its utility as a predictor of treatment outcome in individuals treated within the Australian trial in acute hepatitis C (ATAHC).* Oral Presentation at the Sixth Australian Viral Hepatitis Conference, Brisbane, 20-22 October.

Mattick, R., Cohen, A. *Overview of Evaluation Studies on Substance Abuse Prevention and Treatment Effectiveness.* The United Nations Office of Drugs and Crime (UNODC) Technical Seminar on Drug Addiction Prevention and Treatment: From Research to Practice, Vienna Austria, 16-18 December.

Merz, S., Mills, K., Rosenfeld, J., Barrett, M., Teesson, M., Back, S., Baker, A., Sannibale, C. *Concurrent treatment of substance use disorder and PTSD: A case-control comparison.* Australasian Professional Society of Alcohol and Other Drugs (APSAD) Conference 2008, Sydney, 23-26 November.

Mewton, L. *Age-based item bias in the DSM-IV criteria assessing cannabis use disorders.* UNSW School of Public Health and Community Medicine 6th Annual Research Student Conference, Sydney, 13 November 2008.

Mills, K. *Preliminary findings of a randomised controlled trial of an integrated treatment for PTSD and substance use*

disorders. Australian Drug Foundation Winter School Conference, Brisbane, 12-14 May.

Mills, K., Deady, M., Proudfoot, H., Sannibale, C., Teesson, M., Mattick, R. *Guidelines for AOD workers on the management of co-occurring mental health conditions.* Australasian Professional Society of Alcohol and Other Drugs (APSAD) Conference 2008, Sydney, 23-26 November.

Mills, K., Deady, M., Proudfoot, H., Sannibale, C., Teesson, M., Mattick, R., Burns, L. *The development of national guidelines for the management of co-occurring mental health conditions in alcohol and other drug treatment settings.* Plenary presentation at Creating Synergy V- Creating Synergy Between Research and Practice Within Drug & Alcohol & Mental Health, Wollongong, 12-13 June.

Mills, K., Deady, M., Proudfoot, H., Sannibale, C., Teesson, M., Mattick, R., Burns, L. *Guidelines for managing comorbidity.* NDARC Annual Symposium, Sydney, August 2008.

Mills, K., Teesson, M., Darke, S., Ross, J. *Methodological and participant characteristics associated with retention in longitudinal studies of substance users.* Poster presentation at the Australasian Professional Society of Alcohol and Other Drugs (APSAD) Conference 2008, Sydney, 23-26 November.

Mohsenifar, S., Nassirimanesh, B., Dolan, K., Mokri, A. *Specialist services for female drug users in Iran.* Poster presentation at the Harm Reduction 2008 - International Harm Reduction Association's 19th International Conference, Barcelona Spain, 11-15 May.

Nelson, P. *Improved screening for drug and alcohol problems in juvenile offenders.* Presentation at the School of Public Health and Community Medicine 6th Annual Research Student Conference, UNSW, 18 November.

Newton, N.C., Teesson, M., Vogl, L., Andrews, G. *Climate Schools: The development and evaluation of a Year 8 computerised evidence-based alcohol and cannabis misuse prevention program.* Presented at the NDARC Annual Symposium, Sydney, 31 July-1 August.

Newton, N.C., Teesson, M., Vogl, L., Andrews, G. *Climate Schools: Cannabis and Alcohol Module: A cluster randomised controlled trial for the prevention of alcohol and cannabis use in adolescents.* Australasian Professional Society of Alcohol and Other Drugs (APSAD) Conference 2008, Sydney, 23-26 November.

Phillips, B. *A Global Review of the Injection of Pharmaceutical Opioids: Essential treatment and diverted medication.* Harm Reduction 2008 - International Harm Reduction Association's 19th International Conference, Barcelona Spain, 11-15 May.

Ritter, A. *The development of an Australian drug policy index.* Presentation at the 2nd Annual Conference of the International Society for the Study of Drug Policy, Lisbon Portugal, 3-4 April.

Ritter, A. *Eagles and borders: a systems view of ATOD issues.* Keynote address at The First Annual ATDC Conference: ATOD Practice, Integration & Development, Hobart, 28-30 April.

APPENDICES

Ritter, A. *The Drug Policy Modelling Program: An overview and update.* NDARC Annual Symposium. Sydney, 31July-1 August.

Ritter, A. *Opioid Pharmacotherapy Review.* Victorian Alcohol and Drug Treatment Service Providers Conference, Melbourne, 7 November.

Ritter, A. *Opioid Pharmacotherapy maintenance: supply and demand and service system modelling.* Poster presentation at the Australasian Professional Society of Alcohol and Other Drugs (APSAD) Conference 2008, Sydney, 23-26 November.

Ritter, A. *The use of modelling to advance opioid pharmacotherapy maintenance.* Australasian Professional Society of Alcohol and Other Drugs (APSAD) Conference 2008, Sydney, 23-26 November.

Ritter, A., Chalmers, J., McDonnell, G., Heffernan, M. *Opioid pharmacotherapy maintenance: supply and demand and service system modelling.* Poster presentation at The College on Problems of Drug Dependence 70th Annual Meeting, San Juan, Puerto Rico, 14-19 June.

Rosenfeld, J., Mills, K., Merz, S., Barrett, M., Teesson, M., Back, S., Baker, A., Sannibale C. *Concurrent treatment of substance use disorder and PTSD: Does dissociation interfere?* Australasian Professional Society of Alcohol and Other Drugs (APSAD) Conference 2008, Sydney, 23-26 November.

Ross, J., McKetin, R., Darke, S., Teesson, M. *Attempted suicide and psychopathology among entrants to treatment for drug dependence.* 12th European Symposium on Suicide and Suicidal Behaviour, Glasgow UK, 27-30 August.

Roxburgh, A., Burns, L. *What do we know about prescription opioid use and related harms in Australia.* Australasian Professional Society of Alcohol and Other Drugs (APSAD) Conference 2008. Sydney, 23-26 November.

Sannibale, C., Sutherland, K., Taylor, K., Peek-O'Leary, M., Bostock-Matusko, D., Teesson, M., Mills, K., Sitharthan, T., Creamer, M. *Who presents for treatment of posttraumatic stress disorder and alcohol use problems?* Poster presentation at the Australasian Professional Society of Alcohol and Other Drugs (APSAD) Conference 2008, Sydney, 23-26 November.

Scott, L. *Comparing physical and mental health scores in the Sydney regular drug user surveys.* 2008 National Drug Trends Conference, Sydney, 23 November.

Scott, L., Burns, L. *High risk alcohol use amongst a group of regular injecting drug users.* Poster presentation at the Australasian Professional Society of Alcohol and Other Drugs (APSAD) Conference 2008, Sydney, 23-26 November.

Shanahan, M. *A practical introduction to Economic evaluation: (CEA, CBA, COI, RO - what are they?).* National Conference 2008: Best Practice in Corrections, Sydney, 20-21 October.

Shanahan, M. *Costs and benefits of cannabis policies.* UNSW School of Public Health and Community Medicine 6th Annual Research Student Conference, Sydney, 13 November 2008.

Shand, F. *Polydrug use and mental health amongst a sample of heroin users.* UNSW School of Public Health and Community Medicine 6th Annual Research Student Conference, Sydney, 13 November 2008.

Shakeshaft A. *Alcohol and interventions (or what Canberra might have been).* Keynote address at the First Annual ACT Alcohol and Other Drug Sector Conference, Canberra, 25 June.

Shakeshaft A. *Alcohol Action in Rural Communities: methods.* NDARC Annual Symposium. Sydney, 31July-1 August.

Shakeshaft A. *Alcohol intervention in rural communities (exploring what we can do with what we've got).* Keynote address at the NSW Health Department's inaugural Drug and Alcohol Research Colloquium, Sydney, August.

Silins, E. *Initiation, persistence and cessation of cannabis use: subsequent mental health outcomes.* UNSW School of Public Health and Community Medicine 6th Annual Research Student Conference, Sydney, 13 November 2008.

Silins, E., Bleeker, A., Copeland, J., Dillon, P., Simpson, M. *Ecstasy users' perceptions of peer educators and their information in Australia and the Netherlands.* Poster presentation at the Psychobiology of MDMA Symposium, Swinburne University Melbourne, 11 September.

Silins, E., Bleeker, A., Copeland, J., Dillon, P., Devlin, K., van Baakum, F., Jamin, J., Simpson, M. *Perceptions of peer educators and their information sources: a study of 926 ecstasy users in Australia and the Netherlands.* Australasian Professional Society of Alcohol and Other Drugs (APSAD) Conference 2008, Sydney, 23-26 November.

Silins, E., Copeland, J., Dillon, P. *Patterns and harms of pharmaceutical drug use among ecstasy users.* Club Health 2008 - The 5th International Conference on Nightlife, Substance Use & Health Related Issues, Ibiza Spain, 23-25 June.

Simpson, M. *The Australian Alcohol Treatment Outcome Measure for Clinicians (AATOM-C): psychometric properties and field testing.* Australian Drug Foundation Winter School Conference, Brisbane, 12-14 May.

Sindicich, N. *National Ecstasy and related Drug Reporting System (EDRS) overview.* 2008 National Drug Trends Conference, Sydney, 23 November.

Slade, T., Teesson, M., Baillie, A., Grove, R. *A taxometric exploration of alcohol and cannabis use problems in a community sample.* Poster presentation at The College on Problems of Drug Dependence 70th Annual Meeting. San Juan, Puerto Rico, 14-19 June.

Slade, T., Grove, R. Teesson, M., Baillie, A. *DSM-V and ICD-11: Exploring the distinction between abuse and dependence in the nosology of substance use disorders.* Oral presentation at the Australasian Society for Psychiatric Research conference, Newcastle, NSW, 2-5 December.

Slade, T. *Australian National Survey of Mental Health and Wellbeing 2007 (NSMHWB2): Initial findings - prevalence and correlates.* Oral presentation at the Australasian Society for Psychiatric Research conference, Newcastle, NSW, 2-5 December.

Stafford, J. *What are the Illicit Drug Reporting System (IDRS) and Ecstasy and related Drug Reporting System (EDRS) and what do they tell us?* 2008 National Drug Trends Conference, Sydney, 23 November.

Sutherland, R., McKetin, R. *Arrest rates among methamphetamine users and their correlates.* Australasian Professional Society of Alcohol and Other Drugs (APSAD) Conference 2008, Sydney, 23-26 November.

Swift, W. *Secondary analyses of cannabis use in the Victorian Adolescent Cohort Study.* Paper presented at the NDARC Annual Symposium, Sydney, 1 August.

Swift, W., Coffey C., Carlin, J.B., Degenhardt, L., Calabria, B., Patton, G.C. *Adolescent cannabis users at age 24: trajectories of ongoing problematic use.* Poster presentation at The College on Problems of Drug Dependence 70th Annual Meeting, San Juan, Puerto Rico, 14-19 June.

Swift, W., Coffey, C., Carlin, J.B., Degenhardt, L., Calabria, B., Patton, G.C. *Trajectories of adolescent cannabis use to problematic use in young adulthood.* Paper presented to the Australasian Professional Society of Alcohol and Other Drugs (APSAD) Conference 2008, Sydney, 23-26 November.

Taplin, S. *Contact With Birth Parents - What Does The Research Say?* Invited keynote speaker at Foster Parents Support Network Conference. Sydney. 14 June.

Taplin, S. *How Effective is 'Treatment' for the Children of Substance Misusers?* Paper presented at the Australasian Professional Society of Alcohol and Other Drugs (APSAD) Conference 2008, Sydney, 23-26 November.

Taplin, S., Mattick, R.P. *Parental Substance Use, Child Protection and Drug Treatment Services.* Paper presented at Association of Children's Welfare Agencies (ACWA) Conference, Sydney. 18-20 August.

Teesson, M. *Comorbidity.* Invited Keynote Address at the Australian Drug Foundation Winter School Conference, Brisbane, 12-14 May.

Teesson, M. *Alcohol and Adolescent Brain Development.* Milton Luger One Day Forum, Sydney, 24 June.

Teesson, M. *Alcohol and the Adolescent Brain.* NDARC Annual Symposium. Sydney, 31 July-1 August.

Teesson, M. *Comorbidity: overview.* Invited presentation at The Mental Health Services (TheMHS) Conference, Auckland New Zealand, 2 September.

APPENDIX H

EXTERNAL LECTURES, WORKSHOPS & SEMINARS

Bleeker, A. *Cannabis – Everything You Need to Know.*
Presentation to Lifeline Australia Sydney 9 January & 3 March.

Bleeker, A. *Cannabis – Everything You Need to Know.*
Presentation to Youth Coalition of ACT Canberra 19 & 20 February.

Bleeker, A. *Cannabis – Everything You Need to Know.*
Presentation to NDARC Education Trust Sydney 18 March & 8 April.

Bleeker, A. *Cannabis – Everything You Need to Know.*
Presentation to Central Bayside Health Parkdale 14 April.

Bleeker, A. *Cannabis – Everything You Need to Know.*
Presentation to Youth Substance Abuse Service Fitzroy 15 April.

Bleeker, A. *Cannabis – Everything You Need to Know.*
Presentation to Dept of Justice, Melbourne 16 & 18 April.

Bleeker, A. *Cannabis – Everything You Need to Know.*
Presentation to St Vincent de Paul/Quin House Melbourne 17 April.

Bleeker, A. *Cannabis – Everything You Need to Know.*
Presentation to Youth Block Camperdown 30 April.

Bleeker, A. *Cannabis – Everything You Need to Know.*
Presentation to Foundation House Rozelle 7 & 21 May.

Bleeker, A. *Cannabis – Everything You Need to Know.*
Presentation to Bridges Bundaberg and ATODS Townsville 14 & 15 May.

Bleeker, A. *Cannabis – Everything You Need to Know.*
Presentation to Marist Youth Care Blacktown 20 May.

Bleeker, A. *Cannabis – Everything You Need to Know.*
Presentation to Greater Southern Area D & A Service Queanbeyan 23 May.

Bleeker, A. *Cannabis – Everything You Need to Know.*
Presentation to . ATODS Hobart & ATODS Launceston 28 & 29 May

Bleeker, A. *Cannabis – Everything You Need to Know.*
Presentation to Marist Youth Care Blacktown 3 June.

Bleeker, A. *Cannabis – Everything You Need to Know.*
Presentation to D & A Services Wagga Wagga 5 June.

Bleeker, A. *Cannabis – Everything You Need to Know.*
Presentation to Lyndon Community Orange 11 June.

Bleeker, A. *Cannabis – Everything You Need to Know.*
Presentation to Family Life Sandringham 7 July.

Bleeker, A. *Cannabis – Everything You Need to Know.*
Presentation to Edmund Rice Community Services Doonside 29 July.

Bleeker, A. *Cannabis – Everything You Need to Know.*
Presentation to Adolescent Services Prince of Wales Hospital 31 July.

Bleeker, A. *Cannabis – Everything You Need to Know.*
Presentation to WA Health Perth 5 August.

Bleeker, A. *Cannabis – Everything You Need to Know.*
Presentation to Royal Brisbane Hospital 11 August.

Bleeker, A. *Cannabis – Everything You Need to Know.*
Presentation to Princess Alexandra Hospital Buranda 12 August.

Bleeker, A. *Cannabis – Everything You Need to Know.*
Presentation to Miami Community Health Gold Coast 13 August.

Bleeker, A. *Cannabis – Everything You Need to Know.*
Presentation to Network of Alcohol and Other Drug Agencies Redfern 20 August.

Bleeker, A. *Cannabis – Everything You Need to Know.*
Presentation to TAFE Counselling Service Sydney 21 August.

Bleeker, A. *Cannabis – Everything You Need to Know.*
Presentation to Family Drug Support Penrith 23 August.

Bleeker, A. *Cannabis – Everything You Need to Know.*
Presentation to Matthew Talbot Woolloomooloo 28 August.

Bleeker, A. *Cannabis – Everything You Need to Know.*
Presentation to ATODS Mackay, Bridges Bundaberg & ATODS Fraser Coast , 1-3 September.

Bleeker, A. *Cannabis – Everything You Need to Know.*
Presentation to ATODS Townsville & ATODS Cairns 9-11 September.

Bleeker, A. *Cannabis – Everything You Need to Know.*
Presentation to TAFE Meadowbank 17 September.

Bleeker, A. *Cannabis – Everything You Need to Know.*
Presentation to NT Health Dept Darwin 22-25 September.

Bleeker, A. *Cannabis – Everything You Need to Know.*
Presentation to South Australian Network for Drug & Alcohol Services Adelaide 20-22 October.

Bleeker, A. *Cannabis – Everything You Need to Know.*
Presentation to Ted Noffs Canberra 28 & 29 October.

Bleeker, A. *Cannabis – Everything You Need to Know.*
Presentation to Youth Coalition of ACT Canberra 30 October.

Bleeker, A. *Cannabis – Everything You Need to Know.*
Presentation to AOD Services Alice Springs 5 & 6 November.

Bleeker, A. *Cannabis – Everything You Need to Know.*
Presentation to NT Dept Health Katherine 4 December.

Bleeker, A. *Cannabis – Everything You Need to Know.*
Presentation to Youth Coalition of ACT Canberra 10 December.

Bright, D. *Examining consequences of different types of law enforcement interventions directed towards methamphetamine.* Presentation at the 2008 DPMP Seminar, Sydney, 7-8 August.

Burns, L. *Homelessness: Research directions.* Presentation to the Federal Minister for Housing, the Hon Tanya Plihersek, July.

Burns, L. *Pregnancy and Addiction: The impact of substance abuse during pregnancy on neonatal outcomes in Australia.* International Committee-Workshop at The College on Problems of Drug Dependence 70th Annual Meeting, San Juan, Puerto Rico, 14-19 June.

Burns, L., Hutchinson, D., Maloney, E., Taylor, D., Black, E., Mattick, R.P. *The impact of alcohol on the family and pregnant woman.* Report to the Intergovernmental Committee on Drugs on the National Fetal Alcohol Spectrum Disorder Workshop "Responding to Alcohol Use in Pregnancy - Where to from here?", Adelaide, August.

Burns, L., Black, E. *Economic impact of FASD.* Report to the Intergovernmental Committee on Drugs on the National Fetal Alcohol Spectrum Disorder Workshop "Responding to Alcohol Use in Pregnancy - Where to from here?", Adelaide, August.

Chalmers, J. *Supply and demand for pharmacotherapy maintenance treatment.* Presentation at the 2008 DPMP Seminar, Sydney, 7-8 August.

Chalmers, J. *Exploring socio-demographics and drug use.* Presentation at the 2008 DPMP Seminar, Sydney, 7-8 August.

Chalmers, J. *Australian Opioid Pharmacotherapy Review.* Presentation at the Australasian Opioid Treatment Program Managers AGM, held in conjunction with the APSAD Conference, Sydney, 23 November.

Clifford, A. *Strategies for improving the provision of evidence-based alcohol screening and brief intervention in Aboriginal Community Controlled Health Services.* Aboriginal Health & Medical Research Council (AH&MRC), Sydney, 24 June.

Cohen, A. *Youth Culture and Methamphetamine Use in Northern Thailand.* Guest lecture in Drugs across Cultures course at Macquarie University, Sydney, 26 May.

Copeland, J. *Alcohol, tobacco and illicit drug use in Australia.* Presentation to the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) expert meeting on the key indicator "Prevalence and patterns of drug use among general population", Lisbon Portugal, 26 June.

Copeland, J. *Overview of cannabis treatment and policy in Australia.* Invited address to the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) expert meeting, Lisbon Portugal, 27 June.

Copeland, J. *Measurement of cannabis use and related problems.* Invited address to the 2008 Annual Expert meeting, Lisbon, Portugal, 27 June

Copeland, J. *The use of, knowledge about and attitudes towards alcohol, tobacco and other drugs among six culturally and linguistically diverse (CALD) communities in greater Sydney: A commentary.* Presentation at DAMEC Project Launch: Sydney, 2 December.

Copeland, J. *Interventions for cannabis use.* Cannabis and Psychosis in Adolescence and Adulthood International Meeting, Barcelona, Spain, 10 October.

Copeland, J. *Cannabis dependence and its management in indigenous communities.* Cape York and Torres Strait Islands Community Cannabis Workshop, Cairns, 6 November.

Copeland, J. *National Cannabis Prevention and Information Centre (NCPIC): An overview.* Presentation to the Intergovernmental Committee on Drugs, Sydney, 20 February.

Copeland, J. *National Cannabis Prevention and Information Centre (NCPIC): An overview.* Presentation to the Australian National Council on Drugs, Sydney, 4 March.

Degenhardt, L. & Mathers, B. *New estimates of injecting drug use and HIV prevalence among people who inject drugs in Asia.* United Nations Regional Task Force on Injecting Drug Use and HIV/AIDS for Asia and the Pacific, Bangkok, Thailand. 4-5 November.

Degenhardt, L. & Mathers, B. *The Reference Group to the UN on HIV and injecting drug use: Mandate, methods and issues making IDU prevalence estimates.* Meeting of the UNAIDS Reference Group on Estimates, Modelling and Projections: estimation of the size of high risk groups and HIV prevalence in high risk groups in concentrated epidemics: Amsterdam, 9-10 December.

Dillon, P. *Cannabis: What do we know?* Cape York and Torres Strait Islands Community Cannabis Workshop, Cairns, 5 November.

Dolan, K. Workshop on establishing the WHO Network for HIV and Health in WPRO, Manila.

Dolan, K. Workshop. National Corrections Drug Strategy for Australia, Melbourne.

Doran, C.M. *Assessing Cost-Effectiveness (ACE) of interventions to reduce burden of harm from alcohol misuse.* Presented to the ACE Prevention Steering Committee, Melbourne, March.

Doran, C.M. *Cost-effectiveness analysis in the Australian health care system: ACE alcohol as a case study.* Presented to the Strategic Planning Division, Ministry of Health, Singapore, April.

Doran, C.M. *Health economics and priority setting.* Presented to the Strategic Planning Division, Ministry of Health, Singapore, June.

Doran, C.M. *Cost-effectiveness analysis in Vietnam: tobacco and road traffic injuries as priority areas.* Four day workshop sponsored by Atlantic Philanthropies. Hanoi, Vietnam, June.

Dunn, M. *Trends in drug use among a sentinel group of drug users: Focusing on A&TSI, GLBT and the young.* Presentation to ACON, 4 February.

Dunn, M. (February, 2008). *Ecstasy and Related Drugs.* Presentation to the Manly Drug Education and Counselling Centre, Sydney, 7 February.

Dunn, M. *Ecstasy and related drug use in NSW, 2007.* Presentation to the ACON GLBT AOD Interagency Meeting, Sydney, 17 April.

APPENDICES

Dunn, M. E, K, G, meth and Charlie. Presentation for the NDARC Education Trust Seminar Series, Sydney, 28 May.

Dunn, M. *Drug use trends and BBVI risk behaviours.* Presentation to the Sydney South West Area Health Service, Sydney, 18 August.

Dunn, M. E, K, G, ice and Charlie. Presentation to the NSW Department of Education and Training, Sydney, 11 December.

Frewen, A. *Promising medications for the treatment of cannabis use disorder.* Presentation to the 'Cannabis: the truth behind the headlines' - NET Training Day, Albion Centre, Sydney, March 18, 2008.

Gates, P. *Barriers and Facilitators to Cannabis Treatment.* Presentation to the 'Cannabis: the truth behind the headlines' - NET Training Day, Albion Centre, Sydney, March 18.

Hickey, K. *Cannabis – Everything You Need to Know.* Presentation to Barwon Youth Geelong 19 & 20 November.

Hickey, K. *Cannabis – Everything You Need to Know.* Presentation to Aboriginal Health & Medical Research Council Surry Hills 23 October.

Howard, J. *ACCU - The Adolescent Cannabis Check-Up.* Presentation to Barwon Youth Geelong 20 November.

Howard, J. *ACCU - The Adolescent Cannabis Check-Up.* Presentation to Barwon Youth Warrnambool 21 November.

Howard, J. *ACCU - The Adolescent Cannabis Check-Up.* Presentation to NT Dept Health Katherine 4 December.

Howard, J. *Quitting Cannabis 1-6 Brief Intervention for Cannabis Use.* Presentation to Barwon Youth Geelong 19 November.

Howard, J. *Young People & Cannabis.* Presentation to Youth Coalition of ACT Canberra 10 December.

Howard, J. *Cannabis use among young people: Contexts, trends and treatments.* Presentation to Rivendell Professional Development Seminar, Rivendell Child, Adolescent and Family Mental Health Service, Concord, November 14, 2008.

Howard, J. *Young people, cannabis and other drugs.* Workshop for NSW Department of Community Services staff, Bankstown, 18 September, 2008.

Howard, J. *Young people and cannabis.* Presentation to Academic Clinical Meeting, Department of Child and Adolescent Psychiatry, Prince of Wales Hospital, Randwick, July 3, 2008.

Hughes, C. *The effects of the Portuguese decriminalisation of illicit drugs.* Presentation at Turning Point Alcohol and Drug Centre, Melbourne, 25 February.

Hughes, C. *The Drug Policy Modelling Program: new approaches to informing policy, practice and research.* Presentation at the Criminal Justice Research Network, UNSW, Sydney, March.

Hughes, C. *Policy practice project: Working with the NSW Police on responses to ecstasy users.* Presentation at the 2008 DPMP Seminar, Sydney, 7-8 August.

Hughes, C., Ritter, A., Badham, J. and Lodge, M. *The Cannabis Diversion Model.* Presentation to the Justice Modelling Group and Centre for Excellence in Policing and Security, Griffith University, Brisbane, August.

Larney, S. *Blood borne viral infections and needle and syringe programs in prison.* Australian Federation of AIDS Organisations Workshop, Sydney, 7 November.

Matalon, E. *ACCU - The Adolescent Cannabis Check-Up.* Presentation to Youth Coalition of ACT Canberra 19 February.

Matalon, E. *ACCU - The Adolescent Cannabis Check-Up.* Presentation to NDARC Education Trust Sydney 18 March, 8 April & 9 May.

Matalon, E. *ACCU - The Adolescent Cannabis Check-Up.* Presentation to Central Bayside Community Health Parkdale 14 May.

Matalon, E. *ACCU - The Adolescent Cannabis Check-Up.* Presentation to St Vincent de Paul/Quin House Melbourne 17 April.

Matalon, E. *ACCU - The Adolescent Cannabis Check-Up.* Presentation to Bridges Bundaberg 14 May.

Matalon, E. *ACCU - The Adolescent Cannabis Check-Up.* Presentation to Marist Youth Blacktown 20 May.

Matalon, E. *ACCU - The Adolescent Cannabis Check-Up.* Presentation to Greater Southern Area D & A Service Queanbeyan 23 May.

Matalon, E. *ACCU - The Adolescent Cannabis Check-Up.* Presentation to Marist Youth Blacktown 3 June.

Matalon, E. *ACCU - The Adolescent Cannabis Check-Up.* Presentation to D & A Services Wagga Wagga 5 June.

Matalon, E. *ACCU - The Adolescent Cannabis Check-Up.* Presentation to Nepean Hospital Youth D & A Services 10 June.

Matalon, E. *ACCU - The Adolescent Cannabis Check-Up.* Presentation to Youth Block Camperdown 25 June.

Matalon, E. *ACCU - The Adolescent Cannabis Check-Up.* Presentation to Sutherland Cannabis Clinic 23 July.

Matalon, E. *ACCU - The Adolescent Cannabis Check-Up.* Presentation to Edmund Rice Community Services Doonside 29 July.

Matalon, E. *ACCU - The Adolescent Cannabis Check-Up.* Presentation to Adolescent Services Prince of Wales Hospital 31 July.

Matalon, E. *ACCU - The Adolescent Cannabis Check-Up.* Presentation to D & A Office Mount Lawley 6 August.

Matalon, E. *ACCU - The Adolescent Cannabis Check-Up.* Presentation to Network of Alcohol & Other Drug Agencies Redfern 20 August.

Matalon, E. *ACCU - The Adolescent Cannabis Check-Up.* Presentation to TAFE Counselling Service Sydney 21 August.

Matalon, E. *ACCU - The Adolescent Cannabis Check-Up.* Presentation to Sutherland Hospital Caringbah 27 August.

Matalon, E. *ACCU - The Adolescent Cannabis Check-Up.* Presentation to ATODS Mackay, Bridges Bundaberg & ATODS Fraser Coast, 1-3 September.

Matalon, E. *ACCU - The Adolescent Cannabis Check-Up.* Presentation to ATODS Townsville 9 September.

Matalon, E. *ACCU - The Adolescent Cannabis Check-Up.* Presentation to ATODS Cairns 11 September.

Matalon, E. *ACCU - The Adolescent Cannabis Check-Up.* Presentation to TAFE Meadowbank 17 September.

Matalon, E. *ACCU - The Adolescent Cannabis Check-Up.* Presentation to Sutherland Cannabis Clinic 1 October.

Matalon, E. *ACCU - The Adolescent Cannabis Check-Up.* Presentation to South Australian Network for Drug and Alcohol Services Adelaide 20, 21 & 22 October.

Matalon, E. *ACCU - The Adolescent Cannabis Check-Up.* Presentation to Ted Noffs Canberra 9 December.

Matalon, E. *Cannabis - Everything You Need to Know.* Presentation to Aboriginal Medical Service Nowra 16 July.

Matalon, E. *Cannabis - Everything You Need to Know.* Presentation to 'Get It Together' Forum, DOCS Sydney 15 October.

Matalon, E. *ACCU - The Adolescent Cannabis Check-Up.* Presentation to .

Matalon, E. *Quitting Cannabis 1-6 Brief Intervention for Cannabis Use.* Presentation to Youth Coalition of ACT Canberra 20 February.

Matalon, E. *Quitting Cannabis 1-6 Brief Intervention for Cannabis Use.* Presentation to NDARC Education Trust Sydney 18 March & 8 April.

Matalon, E. *Quitting Cannabis 1-6 Brief Intervention for Cannabis Use.* Presentation to Central Bayside Community Health Service Parkdale 14 April.

Matalon, E. *Quitting Cannabis 1-6 Brief Intervention for Cannabis Use.* Presentation to Youth Substance Abuse Service Fitzroy 15 April.

Matalon, E. *Quitting Cannabis 1-6 Brief Intervention for Cannabis Use.* Presentation to Dept of Justice Melbourne 16 & 18 April.

Matalon, E. *Quitting Cannabis 1-6 Brief Intervention for Cannabis Use.* Presentation to St Vincent de Paul/Quin House Melbourne 17 April.

Matalon, E. *Quitting Cannabis 1-6 Brief Intervention for Cannabis Use.* Presentation to Youth Block Camperdown 30 April.

Matalon, E. *Quitting Cannabis 1-6 Brief Intervention for Cannabis Use.* Presentation to Foundation House Rozelle 7 & 21 May.

Matalon, E. *Quitting Cannabis 1-6 Brief Intervention for Cannabis Use.* Presentation to Bridges Bundaberg 14 May.

Matalon, E. *Quitting Cannabis 1-6 Brief Intervention for Cannabis Use.* Presentation to ATODS Townsville 15 May.

Matalon, E. *Quitting Cannabis 1-6 Brief Intervention for Cannabis Use.* Presentation to Marist Youth Blacktown 20 May.

Matalon, E. *Quitting Cannabis 1-6 Brief Intervention for Cannabis Use.* Presentation to Greater Southern Area D & A Service Queanbeyan 23 May.

Matalon, E. *Quitting Cannabis 1-6 Brief Intervention for Cannabis Use.* Presentation to ATODS Hobart 28 May.

Matalon, E. *Quitting Cannabis 1-6 Brief Intervention for Cannabis Use.* Presentation to ATODS Launceston 29 May.

Matalon, E. *Quitting Cannabis 1-6 Brief Intervention for Cannabis Use.* Presentation to Lyndon Community Orange 11 June.

Matalon, E. *Quitting Cannabis 1-6 Brief Intervention for Cannabis Use.* Presentation to Youth Services Sutherland 3 July.

Matalon, E. *Quitting Cannabis 1-6 Brief Intervention for Cannabis Use.* Presentation to Family Life Sandringham 7 & 8 July.

Matalon, E. *Quitting Cannabis 1-6 Brief Intervention for Cannabis Use.* Presentation to Aboriginal Medical Service Nowra 16 July.

Matalon, E. *Quitting Cannabis 1-6 Brief Intervention for Cannabis Use.* Presentation to Royal Brisbane Hospital 11 August.

Matalon, E. *Quitting Cannabis 1-6 Brief Intervention for Cannabis Use.* Presentation to Princess Alexandra Hospital Buranda 12 August.

Matalon, E. *Quitting Cannabis 1-6 Brief Intervention for Cannabis Use.* Presentation to Miami Community Health Gold Coast 13 August.

Matalon, E. *Quitting Cannabis 1-6 Brief Intervention for Cannabis Use.* Presentation to TAFE Counselling Service Sydney 21 August.

Matalon, E. *Quitting Cannabis 1-6 Brief Intervention for Cannabis Use.* Presentation to Sydney University Counselling Service 25 August.

Matalon, E. *Quitting Cannabis 1-6 Brief Intervention for Cannabis Use.* Presentation to Sutherland Hospital Caringbah 27 August.

Matalon, E. *Quitting Cannabis 1-6 Brief Intervention for Cannabis Use.* Presentation to ATODS Mackay, Bridges Bundaberg & ATODS Fraser Coast, 1- 3 September.

Matalon, E. *Quitting Cannabis 1-6 Brief Intervention for Cannabis Use.* Presentation to ATODS Townsville 9 September.

Matalon, E. *Quitting Cannabis 1-6 Brief Intervention for Cannabis Use.* Presentation to ATODS Cairns 11 September.

Matalon, E. *Quitting Cannabis 1-6 Brief Intervention for Cannabis Use.* Presentation to TAFE Meadowbank 17 September.

APPENDICES

Matalon, E. *Quitting Cannabis 1-6 Brief Intervention for Cannabis Use.* Presentation to Sutherland Cannabis Clinic 1 October.

Matalon, E. *Quitting Cannabis 1-6 Brief Intervention for Cannabis Use.* Presentation to South Australian Network for Drug and Alcohol Services Adelaide 20, 21 & 22 October.

Matalon, E. *Quitting Cannabis 1-6 Brief Intervention for Cannabis Use.* Presentation to Wyong Cannabis Clinic 19 November.

Matalon, E. *Quitting Cannabis 1-6 Brief Intervention for Cannabis Use.* Presentation to Herbert St Clinic Sydney 3 December.

Matalon, E. *Quitting Cannabis 1-6 Brief Intervention for Cannabis Use.* Presentation to Ted Noffs Canberra 9 December.

B Mathers, L Degenhardt. *Examination of the measurement of the "quality and intensity" of HIV prevention services for people who inject drugs UNAIDS.* MERG Technical Work Group on the monitoring and evaluation of HIV prevention of most at risk populations, Geneva, Switzerland, 29-30 October 2008

Mills, K. *Can people with substance use disorders be treated for post traumatic stress disorder?* [Invited seminar] Double Trouble Workshop. Conference of the Australasian Professional Society of Alcohol and Other Drugs. Sydney, November.

Mills, K. *Substance use disorders and PTSD: Epidemiology and evidence based treatments.* NSCCAHS psychiatry case forum, Royal North Shore Hospital, St Leonards, June.

Mills, K. *Treating co-occurring PTSD and substance use disorders* [Invited seminar]. Albion Street Centre, Surry Hills, May.

Mills, K. *Comorbid mental health and substance use disorders* [Invited lecture]. Graduate Certificate of Mental Health Nursing, University of Technology, Kuringai, April.

Mills, K. *Post traumatic stress disorder in patients with substance use disorders: Clinical considerations and new research* [Invited seminar]. The Langton Centre, Surry Hills, April.

Phillips, B. *What has happened to the heroin market? Findings from the 2007 Illicit Drug Reporting System (IDRS).* NSW 2008 Statewide NSP Workers Meeting, Sydney.

Ritter, A. *The Drug Policy Modelling Program Overview.* Burnet Institute, Melbourne, 7 November.

Ritter, A. *The Drug Policy Modelling Program: SimDrug Models.* AIVL National Meeting, Canberra, October.

Ritter, A. *Multidisciplinary collaborations towards improving illicit drug policy: the example of the Drug Policy Modelling Program.* Criminal Justice Research Group Seminar, Parramatta, 16 October.

Ritter, A. *Multidisciplinary collaborations towards improving illicit drug policy: the example of the Drug Policy Modelling Program.* The George Institute, Sydney, 8 October.

Ritter, A. *Developing Policy Session.* Presented to AIPM Police Executive Leadership Program (PELP), Manly, 25 September.

Ritter, A. *The use of modelling to inform illicit drug policy: examples from the Drug Policy Modelling Program.* Australian Institute of Criminology Occasional Seminar, Canberra, 17 September.

Ritter, A. *The Drug Policy Modelling Program: An overview.* Presentation at the Network of Alcohol and Drug Agencies (NADA), Sydney, 25 August.

Ritter, A. *Policy practice projects: how go they?* Presentation at the 2008 DPMP Seminar, Sydney, 7-8 August.

Ritter, A. *Australian drug policy: an overview of report on use, harms and relationships to policy.* Presentation at the 2008 DPMP Seminar, Sydney, 7-8 August.

Ritter, A. *Developing policy.* Lecture to the Australian Institute of Police Management, Manly, 30 June.

Ritter, A. *The development of national clinical guidelines for cannabis.* Workshop Facilitator, Sydney, 1-2 May.

Ritter, A. *Feedback from the 2020 Summit: reflections on process and outcome.* Family and Friends of Drug Law Reform, Canberra, 8 May.

Ritter, A. *The Drug Policy Modelling Program Overview.* Presentation at the Langton Centre, Meeting of the Minds program, Sydney, 18 March.

Ritter, A. *Measuring for successful drug policy.* Presentation at the 2008 Parliamentary Drug Policy Roundtable, Wellington, New Zealand, 19-21 February.

Ritter, A. *The Drug Policy Modelling Program Harm Index.* Presentation at the Interagency Committee on Drugs (IACD), New Zealand, 19-21 February.

Ritter, A. *An overview of the Drug Policy Modelling Program.* Presentation at the Interagency Committee on Drugs (IACD), Wellington, New Zealand, 19-21 February.

Ritter, A. *Connecting research with policy: Where do policy makers go to find research evidence?* Presentation at National Centre in HIV Epidemiology and Clinical Research, Sydney, 16 January.

Sannibale, C. *Substance use disorders: prevalence, course and treatment.* Lecture to Health Education students, Dunmore College, Macquarie University, 4 April.

Sannibale, C., Sutherland, K. *Treatment of PTSD and comorbid alcohol use,* Psychiatric Grand Rounds, Royal Prince Alfred Hospital, Sydney South Western Area Health Service, 4 August.

Sannibale, C., Sutherland, K. *Evidence for the treatment of PTSD and alcohol use disorders.* Fairfield Drug Health Services, Sydney South Western Area Health Service, 17 September.

Sannibale, C. *Treatment of PTSD and alcohol use disorder.* Presentation to Community Mental Health Service Staff, Sydney South Western Area Health Service, 15 October.

Sannibale, C. *Substance Use Disorders: Assessment and Treatment,* Workshop in the Advanced Adult Psychopathology Disorders lecture stream for Doctor of Clinical Psychology candidates. 24 October.

Sannibale, C., Baillie, A. *Comorbid Alcohol Use Disorders: Assessment and Treatment*, Clinical Focus Seminar presented to the Anxiety Practitioners Network, 21 November.

Shakeshaft A. *Community level measures of alcohol related harm*. Presentation to Bergen Clinics, Section for Social Medicine, Bergen, Norway, January.

Shakeshaft A. *Community measures of alcohol related harm and tailored community interventions*. Presentation at the University of Ireland, Maynooth, Ireland, January.

Shakeshaft A. *Alcohol Action in Rural Communities (AARC): a randomised controlled trial*. Presentation to the Social and Public Health Sciences Unit, Glasgow, UK, July.

Shanahan, M. and Ngui, R. *Developing a model to assess the economic consequences of cannabis policy options*. Presentation at the 2008 DPMP Seminar, Sydney, 7-8 August.

Shanahan, M. *Introduction to Economic Evaluation*. University of Melbourne, Melbourne, May.

Shanahan, M. *An Introduction to economic evaluation & cost-effectiveness analysis and measuring outcomes*. In a workshop: *An introduction to the application of cost effectiveness analysis in health*. University of Sydney, Sydney, March.

Shanahan, M. *Legislative policy options for cannabis*. Presentation at Turning Point Alcohol and Drug Centre, Melbourne, 25 February.

Silins, E. K, G, Ice & Charlie: *What are they? What are their effects? What are their potential harms?* 1 hour training session/lecture, Albion Centre, Albion St, Sydney, 25 May.

Sindicich, N. and Roxburgh A. *Ecstasy and related drugs in Australia*. Lecture given to Masters students at the school of Public Health. University of Sydney, 11 September.

Swift W. *Cannabis potency and contamination: Issues and evidence*. Paper presented to the National Drug Research Institute, Curtin University, Perth, October 20.

Taplin S. *Contact visits for children in out-of-home care*. Invited presentation at Children's Court Clinic Authorised Clinicians Professional Development Day, Sydney. 11 April.

Vogl, L. *Drugs: Guiding parent*. Newington College Sydney NSW, 27 March.

Vogl, L. *Substance Use Disorders*. Presentation to Macquarie University Clinical Masters Course: Advanced Psychopathology, Sydney 1 May.

Vogl, L. *Drug use in adolescents: Guiding parents*. Orange, 11 September.

Vogl, L. *CLIMATE Schools: Delivering evidence based drug education*. Celebrating Safely, Orange. 12 September

Vogl, L. *Drugs*. Casimir Catholic College Sydney NSW, 20 June.

Vogl, L. *CLIMATE Schools: Delivering evidence based drug education*. Australian Government Department of Education, Employment and Workplace Relations: Drug Education Workshop. 30 October.

Vogl, L. *Young people and risk taking*. Bossley Park High School, December.



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