The Queensland Alcohol and Drug Research and Education Centre (QADREC) was established in 1996 as a co-operative venture between Queensland Health (QH) and The University of Queensland (UQ). QADREC is a national and international leader in the development of drug and alcohol related teaching and research and is contributing to world’s best practice in its field. The centre is engaged with many government and community based organisations in Queensland, as well as undertaking ongoing collaborative work with research centres and professional organisations at the national level.

QADREC’s mission is to inform policy and guide practice through outstanding research and excellent teaching in the alcohol and other drug field.
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In 2001 we were struggling to maintain our teaching program as part of the Graduate Health Studies program. This program no longer exists and QADREC postgraduate teaching is now included in the Master of Public Health program. In 2011 QADREC had record numbers of students.

In 2001 there were no NHMRC/ARC funded projects and effectively no publications in major international journals. QADREC staff are now involved in a large number of NHMRC/ARC funded projects and frequently publish their findings in major international journals. QADREC has a strong research program with a substantial number of PhD candidates contributing to the effort. QADREC's research program is intended to contribute to policy and practice and, it is in this context that the field currently confronts some major policy problems.

Since the mid-1980s there has been a persistent concern about the impact of licit and illicit drugs on the health of the population. Despite changes in the type and magnitude of problems posed by particular drugs, it is now clear that substance use will continue to pose major concerns for those working in the health sector as well the criminal justice system. The decade from the mid-1980s was characterised by a growth in opiate (heroin) use. Interestingly, there was a decline in tobacco use. Amphetamines and cannabis reached their peak of popularity at about the same time as heroin use declined. More recently there has been a greatly increased concern about the health consequences of alcohol use and misuse. In the last few years the problem of prescription drug addiction has grown rapidly. In the United States there are now more deaths attributed to prescription opioids than to heroin. While the problems posed by specific drugs appear to change, the preconceptions of policy makers in government do not appear to adapt as readily to changes in patterns of use. Continuing efforts to apprehend and incarcerate importers and suppliers of illicit substances periodically receive positive publicity. The police repeatedly report 'record' seizures of illicit drugs. Rarely are these record seizures accompanied by evidence that the supply of illicit drugs to users has diminished. While our enforcement efforts may continue and even be found to be increasingly effective – Queensland in particular has had high levels of illicit drug seizures in recent years – there are countervailing trends that render doubtful the end user impact of these criminal justice policy approaches.

Policy makers appear to have difficulty adapting to the changing character of drug use. Even over as short a period of time as one or two years the problems to be addressed appear to change. There has, recently, been a rapid increase in synthetic drugs. Synthetic drugs often involve chemical additives to herbs or other products with the intent of altering mood or emotional state. In 2010 it has been estimated that some 40 new illicit drug products were marketed, and a greater number of new products entered the market in 2011. Many of these products are purchased from 'herb' stores or over the internet. Their rapid proliferation is intended to circumvent legislative prohibitions related to their use. Drug developers argue that they are forced to develop new ‘drugs’ rapidly – and that it is possible to do so more or less on a few days notice. This process is producing some unintended consequences which may negatively impact on the health of the population. Many of the new drugs may be harmless (or very harmful) – we cannot know because their use is prohibited so soon after
their development. It would be a major concern if law enforcement efforts had the unintended consequence of encouraging the use of more harmful products. Most workers in the drug and alcohol field now accept that approximately one in three young people will experiment with illicit drugs – and that perhaps half of this group will become regular users of illicit drugs at some stage of their lives. If abstinence from illicit drugs is not a viable goal then efforts to reduce harm should include a variable scale of response with greater efforts to discourage the use of more harmful drugs or their use in more harmful ways.

Drug use should be more broadly understood in a social, cultural and economic context. Drug markets are global issues, rather than local concerns. It has been estimated that illicit drugs now comprise some 8% of world trade. In developing countries the economic pressures to produce and market illicit drugs continue unabated despite the imposition of very severe penalties. The number of illicit drugs users around the world continues to increase. In Australia, despite some fluctuations over time, there are now more persons who use illicit drugs than there were some 20 years ago when the government of Australia declared ‘a war on drugs’ (the same claim can be made about the USA). Improved communication and channels of trade and commerce all contribute to better access to illicit drugs. Changes in population characteristics (one of the main predictors of illicit drug use is having parents whose marriage has broken down, or is of poor quality) also contribute to a willingness of young people to experiment with illicit drugs.

At the core of the current problems is developing a more effective set of policies. In relation to illicit drugs there is a divide, even conflict, between those who advocate a criminal justice paradigm and those who are advocates of a public health approach. This is more a dispute about means than ends. In a rational discourse the dispute could be resolved by accessing the evidence. It should be possible to agree on some shared outcomes (reduced levels of drug use, reduced need/demand for services, reduced death rates) and judgments about the extent to which alternative policies have achieved these outcomes. It is to these types of policy debates that QADREC will seek to contribute in 2012 and beyond.

Each year we regret the departure of some QADREC staff. We need to thank and wish well the staff who left QADREC in 2011, namely: Kobie Mulligan, Leith Morris and Megan Garrett. We were pleased to welcome Anton Clifford, Tina Belovic, Mohsina Khatun and Maria Plotnikova to the QADREC staff in 2011.

Jake M Najman PhD FASSA
Professor of Medical Sociology
and Director of QADREC
QADREC is part of the School of Population Health within the Faculty of Health Sciences. The location of QADREC within the School of Population Health (SPH) has provided some important synergies. Head of School, Professor Alan Lopez, has been unfailingly supportive of QADREC’s inclusion in the school and of its development as a centre of research and teaching. Being in a school with a strong research and teaching culture provides a supportive environment for QADREC staff. Moreover, the Faculty of Health Sciences is internationally renowned for health education and research and contributes significantly to UQ’s ranking among the world’s leading research institutions.

The SPH is a large multidisciplinary school with some eight disciplines represented. The location of QADREC within the school has provided access to and support from some of the leading statisticians and epidemiologists in Australia. QADREC has a particularly close research relationship with the Epidemiology-Biostatistics group and benefits from their advice and support. We share a member of staff (Assoc Professor Rosa Alati) and work closely with Professor Gail Williams and Assoc Professor Abdullah Mamun. Dr Peter Baker has consulted with us on a number of projects. Professor Williams frequently provides advice to QADREC staff on a range of statistical matters. Additional contact with colleagues in the Australian Centre for International and Tropical Health (ACITH) has also been fruitful. QADREC staff members are currently working with a colleague in Papua New Guinea (Justin Pulford) on a project to assess levels of substance use in that country. QADREC also consults with the Health Promotion group in relation to relevant projects.

In 2009 the SPH moved to an international standard Masters of Public Health degree format. The intent of this change was to develop a more portable degree structure. Such a structure means that MPH graduates at UQ will have their degrees recognised not only in North America but parts of Europe as well. Coincident with this change in course structure, Queensland Health accepted the MPH as a qualification appropriate for career enhancements for their workforce. QADREC revised its program structure to be consistent with the SPH requirements and now offers 6 courses as its contribution to the 12 courses required for a MPH. Thus those who graduate with an MPH (ATOD) are the best prepared drug and alcohol workers in Australia from a public health and public policy perspective.

Additional synergies with the SPH are evident in the teaching of courses outside the 6 specific ATOD courses. Dr Reza Hayatbakhsh teaches a major course in epidemiology while Dr Anton Clifford and Mr Clinton Kempnich teach courses in Indigenous health. This provides an opportunity to incorporate drug and alcohol content within the broader range of courses taught in the SPH.
In conjunction with teaching, training and other educational activities, QADREC conducts a targeted research program. This research program operates from a public health perspective, focusing on the determinants and contexts of alcohol and other drug use problems. QADREC also takes an explicitly policy-oriented approach, undertaking research to support evidence-based supply reduction strategies, for the prevention and treatment of drug-related harm, and harm reduction initiatives.
Research Area 1
Substance use over the life course

Genetic and environmental contributions to the life course of the common mental disorders

Funding
$1,474,526, NHMRC project grant, 2011-2014.

Researchers
Prof Jake Najman, Prof Gail M Williams, Prof John McGrath, Prof David McIntyre, Assoc Prof Michael O’Callaghan, Dr William Bor, Assoc Prof Alexandra Clavarino, Assoc Prof Abdullah A Mamun, Dr James Scott, Assoc Prof Naomi Wray, Assoc Prof Rosa Alati, Dr Reza Hayatbakhsh, Dr Ryan Mills, Assoc Prof Leonie Callaway.

Background
Birth cohort studies have attained a niche importance in the generation of knowledge about the early life origins and causes of a wide range of health problems including those characterised by mental illness and/or substance abuse. Papers from the Dutch Famine Study, the successive British birth cohort studies and the Christchurch and Dunedin studies have contributed to knowledge in a range of areas. These birth cohort studies have two important advantages. Firstly, they ‘begin at the beginning’ and, secondly, they can contribute to our understanding of the factors that contribute to disease over different stages of the life course. They are ideally suited to address cause-effect nature of associations.

Birth cohort studies are a long-term project. Beginning at the beginning usually means there is a delay of 15 or 20 years before important outcomes can be observed. Birth cohort studies generally require large numbers of respondents, necessary to identify less common outcomes, and they also require high levels of subject retention. It is difficult to find funding agencies prepared to support this type of long-term project.

Because of the resource-intensive nature of these studies they are best conceived as vehicles for a wide number of research questions. At one level such studies represent a resource, a data-gathering project across a wide range of disciplinary topics. The Mater University of Queensland Study of Pregnancy (MUSP) and its outcomes is a pre-birth cohort study which has recruited a large sample of women in early pregnancy: these women and their children have now been followed for up to 21 years. Current data collection will be to 30 years after the birth of the child. The MUSP has produced a diverse range of more than 180 published papers. These papers focus on predicting the characteristics of those young people with alcohol, nicotine and/or illicit drug use disorders. Our papers also address the cause-effect association between selected forms of substance use and mental health and cognitive outcomes. A number of these papers cross topic area and discipline boundaries. For example, a series of papers have appeared addressing the long-term impact of substance use in pregnancy.

2011 Highlights
In 2011 the team commenced work on the 30-year follow-up of children born to the cohort. This data collection is funded by two large NHMRC project grants (Genetic and environmental contributions to the life course of the common mental disorders, $1,474,526.60 over a period of 4 years, 2011-2014) (The aetiology of alcohol use disorders in adulthood: A generational perspective, $610,520 over a period of 3 years, 2011-2013) and include the collection of biological samples to assess gene-environment interactions in the aetiology of substance abuse disorders.

2012 Aims
Data collection will continue until 2013. Data analysis and paper preparation continues on the existing MUSP data set.
The aetiology of alcohol use disorders in adulthood: A generational perspective

**Funding**

$610,520, NHMRC project grant, 2011–2013.

**Researchers**

Rosa Alati, Gail Williams, Penelope Lind, Naomi Wray, William Bor, John Whitfield, Jake Najman, Abdullah Mamun, Alexandra Clavarino

**Background**

The aim of this study is to identify the aetiology of alcohol disorders from alcohol exposure in-utero up to drinking problems by age 30. In particular, the study will investigate 1) the long term effects of alcohol consumed by mothers during pregnancy on their offspring’s own alcohol use and 2) the role of biological, cognitive and genetic factors in worsening or moderating the development of alcohol disorders in adulthood.

Our final aim is to undertake an exploratory genetic association study of top associated variants identified from genome-wide association studies of alcohol dependence.

In order to identify pathways to problem drinking from pre-birth to age 30, the researchers will: 1) Collect measures of alcohol use and abuse on 4000 children from the Mater University Study of Pregnancy who are currently aged 30 years, for whom biological, developmental and environmental information is available from pregnancy to 21 years of age. 2) Investigate pathways to alcohol abuse and dependence in adulthood.

**Hypotheses**

- In-utero alcohol exposure is associated with alcohol problems in adulthood
- The strongest pathway to alcohol abuse and dependence in adulthood involves early onset of alcohol use in adolescence, after taking into account individual, familial and other environmental factors
- Cognitive function and IQ in adolescence and early adulthood mediate the effect of early adolescent drinking on alcohol problems in adults
- Specific genetic variants which are known to be associated with alcohol dependence are the strongest predictors of worsening or recovery from problem drinking at age 30, after taking into account individual, familial and other factors

**2011 highlights**

The project started in mid-2011 with ethics clearance from both the Mater Hospital and The University of Queensland. Data collection has commenced and 300 offspring have been tracked and interviewed.

**2012 aims**

Continue and intensify the tracking and interviewing of participants. It will take all of 2012 to collect the relevant data.

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The illicit drug reporting system (IDRS)

**Funding**


**Researchers**

Rosa Alati, Fairlie McIlwraith, Tina Belovic

**Background**

The IDRS is an annual, national illicit drug monitoring system funded by the Australian Government Department of Health and Ageing. It identifies emerging trends in illicit drug use associated health and social issues and price, purity, availability, and purchasing patterns. Each year QADREC conducts the Queensland arm of the IDRS, triangulating information from three sources:

- Structured interviews with a purposive sample of 100 people who regularly inject illicit drugs
- Semi-structured interviews with key experts in the alcohol and other drug sector (eg. needle and syringe program workers, police, social workers)
- Existing indicator data from relevant government and non-government agencies

**2011 highlights**

- Successful completion of the 2011 monitoring project
- Presentation at the Drug and Alcohol Nurses of Australasia Conference in Melbourne
- Presentation at the Drug Trends Conference in Sydney
- Paper with QADREC IDRS team as lead authors submitted for publication.

**2012 aims**

- Renewal of the IDRS contract in 2012, with QADREC continuing to manage the Queensland arm of this national study
- Completion and publication of the 2011 Queensland IDRS report
- Dissemination of the Queensland IDRS report to stakeholders and key experts
- Dissemination of quarterly IDRS bulletins
- Presentation of selected findings from the 2011 IDRS at local and national seminars
- Publication of papers from Queensland and national data.
Research Area 1 Substance use over the life course (continued)

The ecstasy and related drug reporting system (EDRS)

The EDRS is an ongoing collaboration with the National Drug and Alcohol Research Centre (NDARC), University of New South Wales (UNSW).

**Funding**


**Researchers**

Rosa Alati, Fairlie McIlwraith, Tina Belovic

The EDRS is an annual, national drug market monitoring system funded by the Australian Government Department of Health and Ageing. It serves as an early warning system for trends in ecstasy and related drug use, attendant risk behaviours and harms, and changes in the drug market. Each year QADREC conducts the Queensland arm of the EDRS, triangulating information from three sources:

- Structured interviews with a purposive sample of 100 people from Brisbane and the Gold Coast who regularly use ecstasy
- Semi-structured interviews with key experts whose work brings them into contact with people who regularly use ecstasy (outreach workers, police, party promoters)
- Existing indicator data from government and non-government agencies.

2011 highlights

- Successful completion of the 2011 monitoring project
- Poster presentation at the Drug Trends Conference in Sydney
- Acceptance of paper co-authored by the QADREC IDRS team:
  - Emerging psychoactive substance use among regular ecstasy users in Australia. Drug and Alcohol Dependence (in press)
- Paper co-authored by the QADREC IDRS team with Sophie Hickey as lead author submitted to Drug and Alcohol Review.

2012 aims

- Renewal of funding for the EDRS in 2012, with QADREC continuing to manage the Queensland arm of this national study
- Completion and publication of the Queensland 2011 EDRS report
- Dissemination of the Queensland EDRS report to stakeholders and key experts
- Authorship of the March edition of the quarterly EDRS bulletin
- Dissemination of quarterly EDRS bulletins
- Presentation of selected findings from the 2011 EDRS at local and national seminars
- Publication of papers from Queensland and national data.
Drug use by a community sample of young amphetamine-type stimulant users in South-East Queensland: A longitudinal study

This is an ARC Linkage Project conducted by QADREC in partnership with Queensland Health (QH) and the Crime and Misconduct Commission (CMC).

Funding
Total 2008–2011: $962,078
ARC Linkage funding $381,798
QH and CMC funding $278,316
Balance of $301,964 in-kind from QH and the CMC
2011: Additional funding: $45,000 from Queensland Health

Researchers

Background
Drug Use by a Community Sample of Young Amphetamine-Type Stimulant (ATS) Users in South-East Queensland documents the natural history of ecstasy and methamphetamine use in a population sample and assesses the impact of health and law enforcement interventions on patterns of use. The study involves a sample of young adult ATS users and a comparison group of young adults who had never used ATS at the commencement of the study. The inclusion of a comparison group enables stronger inferences to be made about the factors associated with ATS use among young adults.

This study is valuable in its potential for informing the evidence base to address ATS uptake and ATS use trajectories and harms. This has implications for the development of strategies enabling young Australians to make healthy choices regarding ATS and other drug use, and for broader economic and social benefits arising from healthy and productive individuals, families and communities. The study is providing data for policy development and resource allocation and contributing to a greater understanding of the ATS market in South-East Queensland.

2011 highlights
- Preparation and submission of journal articles
- Preliminary analysis of qualitative data
- Submission of final report to ARC
- Additional interim funding secured from QH
- 24-30 month follow-up of participants conducted (Internet survey)
- Ongoing high rates of participant retention
- New funding application submitted
- Research involvement of postgraduate and honours students

2012 aims
- Prepare a series of articles for publication
- Secure funding for additional longitudinal data collection (for a total of five years follow-up)
- Conduct three year follow-up interviews
- Maintain a high level of participant engagement
- Research findings dissemination to Queensland youth drug and alcohol sector workforce
**Research Area 2**
**Substance use in pregnancy**

**Changing patterns of substance use 2001–2006 by pregnant women**

**Researchers**
Jake Najman, Reza Hayatbakhsh, Ann Kingsbury, Vicki Flenady (unfunded project)

The Mater Mothers Hospital (Brisbane) has a long history of using routine data collections to monitor changes in patterns of health and the health related behaviour of pregnant women. Over the period 2001–6 every pregnant woman (N=25,000+) has been administered a standard substance use inventory. A number of research papers have been based upon this routine data collection. The most recent involves an analysis of the birthweight of children born to mothers using cannabis in pregnancy.

**2011 highlights**
Preparation and publication of research papers

**2012 aims**
Validation study of the self-reports of substance use taken from the medical history.

**A thirty-year study of the health and lifestyle of pregnant women: An exploratory study**

**Funding**
Total $30,000 (UQ QADREC $10,000, Mater Medical Research Institute $20,000)

**Researchers**
Ann Kingsbury, Vicki Flenady, Jake Najman, Reza Hayatbakhsh, David McIntyre, Anne Tremellen, Shelley Wilkinson

This study will examine the extent to which obstetrically relevant health behaviour of pregnant women has changed over a thirty year period. It is an observational study of a cohort of pregnant women being recruited at their booking-in visit at Mater Mothers’ Hospital. Recruitment commenced on 20 June 2011 and was extended from three to six months following a boost in funding. Women are invited to participate in a survey comprising the original MUSP Phase A questionnaire (amended) and a comprehensive alcohol and drug use assessment. In addition routinely collected data consisting of women’s demographics, health measures, previous obstetric history and birth outcomes will be included in the analysis.

Outcome measures will include women’s pregnancy preparedness; women’s anxiety, stress and depression in pregnancy; self-reported tobacco, alcohol and other substance use; quality of partner relationship; work and home life and women’s demographics; health measures in pregnancy and level of physical activity; and antenatal care and pregnancy outcomes. This is the first phase of a birth cohort study with the potential to become a longitudinal study.

**Impact of parental alcohol, tobacco and other substance use on infant development and family functioning**

*This study is a collaboration between the UNSW, UQ, Curtin University of Technology and the University of Sydney.*

**Funding**
2010–2012 NHMRC Project Grant, $1,910,470. Administering institution, UNSW

**Researchers**
Richard Mattick, Delyse Hutchinson, Lucy Burns, Steve Allsop, Jake Najman, Elizabeth Elliot

**Aims**
- To examine the extent to which substance use is interrelated among couples during pregnancy and whether partners influence each other’s substance use over time
- To determine whether prenatal alcohol, tobacco and other substance use by pregnant women and their partners negatively impact on infant development and family functioning over time.

**2011 highlights**
- Ongoing data collection; 70% response rate with over 50% of all pregnant women agreeing to be followed up.

**2012 aims**
- Begin data analysis and drafting of papers.
Passports to advantage: Health and capacity building as a basis for social integration

Collaborating organisations: Queensland Corrective Services; Queensland Health; The Burnet Institute.

Funding
$1,445,000 NHMRC, 2007–2011.

Project Team
Chief Investigators: Dr Stuart Kinner *, Dr Rosa Alati*, Prof Nick Lennox *, Prof Konrad Jamrozik *, Dr Melissa Haswell-Eikins *, Prof Gail Williams †, Assoc Prof Fran Boyle*, Ms Coralie Ober*, Dr Susan Vlack *, Dr Alun Richards *

Staff: Ms Heather Clarke*, Ms Erin Mallon*, Ms Helen Taylor*.

RHD Students: Ms Kate van Dooren*, Ms Rebecca Winter*
* QADREC; † Burnet Institute, Melbourne; ‡ School of Population Health; †† External collaborator

Background
Prisoners are a group characterised by chronic social disadvantage, high rates of risky drug use and poor physical and mental health. Many prisoners enter custody with these problems and, despite the existence of intervention programs in prison, many leave prison with the same problems. This is particularly true of women and Indigenous prisoners.

Consistent with project timelines, baseline data collection commenced in 2008 in four prisons in South-East Queensland, and during 2009 data collection commenced in three prisons in far-north Queensland: two in Townsville and one in Cairns. Baseline data collection finished on 2 July 2010 with N=1,325 participants recruited into the cohort. The project involves three follow-up interviews approximately one, three and six months post-release.

2011 highlights
During 2011 follow-up interviews were completed, including those respondents who had returned to custody during this time. Data cleaning and analysis is on-going, and a summary of findings for participants is in preparation.

The project continues to be the subject of invited presentations at national and international meetings, and a large number of papers are in preparation. In 2011 Cls Kinner and Lennox, along with other investigators, commenced a large NHMRC project grant (#1002463) to build on the Passports project through prospective record linkage and abstraction of prison health records, and to establish a similar cohort (N=1,000) in Western Australia. This new project will establish the largest and most comprehensive cohort of ex-prisoners ever studied, internationally.
Research Area 3
Evaluations/assessments of treatment and community based projects (continued)

The acceptability and feasibility of Community Reinforcement Approach (CRA) and Community Reinforcement and Family Training intervention (CRAFT) for the treatment of alcohol misuse and related harms among Indigenous Australians

This study is a partnership between the National Drug & Alcohol Research Centre, UNSW, Yoorana Gunya Family Violence Healing Centre Aboriginal Corporation and Lyndon Community (drug and alcohol treatment agency).

Funding
2010–2011 ARC Partnership Grant. Administering Institution, NDARC, UNSW, $80,000.

Researchers
Anthony Shakeshaft, Anton Clifford, Komla Tsey, Chris Doran, Julaine Allan, Miranda Rose, Rod MacQueen and Bianca Calabria.

Aims
• Review family-based approaches to examine the potential effectiveness of CRA and CRAFT for reducing alcohol-related harms among Indigenous Australians
• Examine the acceptability of, and preferences for, CRA and CRAFT intervention components among Indigenous Australian clients of an Aboriginal community controlled health care service and drug and alcohol treatment agency
• Adapt CRA and CRAFT in collaboration with Aboriginal Health Workers to optimise its feasibility for delivery to Indigenous Australians

2011 highlights
• A systematic review of family-based intervention approaches was submitted and accepted for publication by the Journal of Studies on Alcohol and Drugs
• The acceptability survey administered to 116 indigenous clients of an Aboriginal community controlled health care service and drug and alcohol treatment agency
• Healthcare practitioners from Lyndon Community trained and certified in delivery of the CRAFT intervention.
• CRA and CRAFT clinical practice manuals tailored to enhance their suitability for delivery by healthcare practitioners in indigenous-specific health care settings and programs

2012 aims
To publish collaborative research papers, specifically concerning the acceptability of CRA and CRAFT for Indigenous Australians and process of tailoring CRA and CRAFT for delivery to Indigenous Australians.

Farm and Fishing Workers use of drugs and alcohol
A collaboration between Lyndon Community (NGO Drug and Alcohol Service), Monash University, Charles Sturt University and The University of Queensland.

Funding

Researchers
Julaine Allan, Margaret Alston, Jane Dowling, Anton Clifford, Patrick Ball

Aims
• Examine farming and fishing workers’ drug and alcohol use and the way this is supported or encouraged by workplace culture
• Identify healthcare interventions to reduce drug and alcohol use among farming and fishing workers that are consistent with their needs, preferences and workplace culture
• Develop a national farming and fishing workforce specific drug and alcohol intervention package for implementation and evaluation

2011 highlights
Completion of:
• Key informant focus group interviews with 46 farming and fishing industry specific employers and businesses;
• In-depth interviews and surveys with 70 farming and fishing workers; and
• Draft of report for RIDIC

2012 aims
Publish collaborative research papers, specifically concerning the experiences, patterns and predictors of drug and alcohol use among farming and fishing workers.
Research Area 4
Substance use/abuse by Indigenous Australians

Queensland injecting drug survey (QuIDS)
QuIDS is a collaboration between QADREC, Queensland Health (QH), the Queensland Aboriginal Health Council (QAIHC) and the National Centre for HIV Epidemiology and Clinical Research (NCHECR) at the University of New South Wales.

Funding
2010: $200,000 from Queensland Health’s Aboriginal and Torres Strait Islander Health development branch.

Project Team
Project Advisory Group: Coralie Ober, Jake Najman, Andrew Young (QH), Robert Kemp (QH), James Ward (NCHECR), Vanessa Gela (QuIHN), Sidney Williams (QAIHC)
Chief Investigators: Jake Najman, Sidney Williams, James Ward, Robert Kemp
Associate Investigators: Andrew Smirnov, Abhi Dev, Suzanna Henderson

The project also relies on the support and involvement of a number of local organisations throughout Queensland, including; needle and syringe programs, community controlled organisations, Queensland Injectors Health Network (QuIHN), and Alcohol, Tobacco and Other Drugs (ATODS).

Background
Injecting drug use is an important health issue affecting both individuals and communities throughout Queensland. While there is growing concern about injecting drug use among people of Aboriginal and/or Torres Strait Islander (ATSI) descent, there is little quantitative research in this area. Key policy initiatives at the national and state levels have identified Aboriginal and Torres Strait Islander people as a priority population for research.

This project has recruited and conducted structured interviews with 570 people who inject drugs, from a number of urban and regional centres throughout Queensland. Participants have completed a questionnaire about patterns of use, levels of drug dependence, blood borne viruses, risky behaviour and the different social, cultural and health issues that may relate to the outcomes of injecting drug use. This study is unique in its inclusion of a matched comparison group; approximately half of the sample identified as Indigenous allowing for important comparisons to be made between groups.

Primary aims
The major aims of this research are as follows:
- Review demographic and social characteristics of diverse user populations
- Review the mental health status of Indigenous injecting drug users (IDU)
- Assess the prevalence of blood-borne viral infections and other injection related health issues in both Indigenous and non-Indigenous IDU
- Assess behavioural aspects of injecting drug use, including the relationship between injecting drug use and engagement in other illicit activities
- Determine ‘user-understandings’ of injection and associated risks
- Evaluate ‘user-perception’ of existing programs and services, including the needle and syringe programs

Comparisons for all aims will be made between Indigenous and non-Indigenous IDUs.

Further aims
- Help to facilitate peer education through extensive IDU networks in Queensland
- Foster closer relationships between health services for drug users and Indigenous IDU within a coordinated care framework
- Provide peer education initiatives for Indigenous IDUs
- Assist in developing the evidence base for initiatives to ‘Close the Gap’

2011 highlights
- Interviewers and local supervisors trained
- Fieldwork completed, with 570 interviews conducted with IDUs across Queensland
- Goal of 50% Aboriginal and Torres Strait Islander participation achieved
- Basic analysis of results completed

2012 aims
- Interviewers and supervisors will reconvene to interpret the data
- A project report will be submitted to QH ATSI development branch
- Easy-to-understand findings will be disseminated to local organisations, supervisors and participants
- A number of papers will be prepared for submission
The cost-effectiveness of a family-based intervention for Indigenous Australians with high-risk alcohol use

This study is a collaboration between the National Drug & Alcohol Research Centre (NDARC), UNSW, Lyndon Community (NGO Drug and Alcohol Service), UQ and James Cook University.

Funding
2010–2012 NHMRC Project Grant Administering Institution, NDARC, UNSW, $212,000.

Researchers
Anthony Shakeshaft, Anton Clifford, Komla Tsey, Chris Doran, Julaine Allan, Miranda Rose, Rod MacQueen and Bianca Calabria.

Background
Indigenous Australians experience a disproportionately high burden of alcohol-related harm relative to non-Indigenous Australians. These harms are typically cumulative, extending beyond the individual to the family and community. The number of Indigenous-specific intervention programs to address these harms appears less than optimal, and there have been few rigorous evaluations of Indigenous-specific alcohol interventions that have been implemented. There is evidence from empirical studies that family-based approaches can be effective for reducing alcohol-related harms among high-risk drinkers and the negative effects of alcohol misuse on other family members. The potential strength of relationships between Indigenous individuals, their families and communities suggests that family–based approaches are likely to be appropriate and effective for reducing alcohol-related harms among Indigenous Australians.

Aims
This study aims to evaluate the cost-effectiveness of an individually-focused Community Reinforcement intervention (CR), and a family-focused Community Reinforcement and Family Training intervention (CRAFT), for reducing alcohol-related harms among Indigenous Australians with high-risk alcohol use, and for improving psychological and family functioning among their family members.

2011 highlights
- Tailoring of CRA and CRAFT clinical practice manuals to enhance their suitability for delivery by healthcare practitioners in Indigenous-specific health care settings and programs
- Development of CRA and CRAFT treatment outcome questionnaires in collaboration with Aboriginal health workers and drug and alcohol workers
- A confirmatory factor analysis of the Alcohol Use Disorders Identification Tool (AUDIT) in a sample of urban and rural Indigenous Australians.

2012 aims
To deliver the CRA and CRAFT interventions to Indigenous Australians through an Aboriginal community controlled health service and NGO drug and alcohol treatment agency and evaluate their impact for reducing alcohol-related harms among Indigenous Australians with high-risk alcohol use, and for improving psychological and family functioning among their family members.
Reducing alcohol-related harm in rural Aboriginal communities: Integrating clinical care and community development

This is a postdoctoral research fellowship transferred from NDARC, UNSW to the School of Population Health, UQ, June 2011.

Funding
2008–2012, NHMRC Training (Postdoctoral) Fellowship in Aboriginal & Torres Strait Islander Health Research, $279,000.

Researcher
Anton Clifford

Aim
This study involves working with rural Aboriginal Community Controlled Health Services (ACCHSs) and their communities to implement and evaluate evidence-based clinical and community interventions for reducing alcohol-related harms among rural Indigenous Australians.

2011 highlights
• Completed demonstration trial of implementing evidence-based alcohol screening and brief intervention (SBI) in four ACCHSs
• Publication of three papers: two critical reviews of evaluations of behavioural risk factor interventions targeting Indigenous Australians, and one qualitative study of factors influencing delivery of evidence-based alcohol SBI in ACCHSs
• Submission of three papers for peer review: one a review of study designs used in evaluations of health interventions targeting Indigenous Australians, and the other the evaluation of the effect of training and outreach support on the delivery of alcohol SBI in ACCHSs

2012 aim
To publish research papers on the process of implementing alcohol SBI in ACCHSs; and the process and impact of an intervention on enhancing alcohol screening and intervention in an Indigenous substance misuse service.
Major research collaborations

Can parents teach their children to drink alcohol responsibly? Or is one drop a drop too many?

This study is a collaboration between UNSW, UQ and the University of Newcastle.

Funding
ARC DP 1096668, $760,000 to the UNSW, 2009–2013.

Researchers
Richard Mattick, Jake Najman, Kypros Kypri, Tim Slade, Laura Vogl, Delyse Hutchinson.

Background
Parents provide their children with alcohol as they believe it is their responsibility to teach them when, where and how to drink. The impact of parents supplying alcohol is well understood but may be unintentionally harmful. This research will explore the consequences of parental supply within the broader context of parent, child and peer relationships. It will help to determine how parental supply influences the different patterns of adolescent alcohol consumption over time, providing essential information to help parents prevent alcohol misuse in their children. Parents can play a pivotal role in prevention of alcohol misuse but at present we don’t know exactly how. This research will help to provide that understanding.

The Cannabis Cohort Research Consortium (CCRC)

This consortium is an unfunded collaboration between: Christchurch Health and Development Study (CHDS), University of Otago, Christchurch, NZ; Mater University Study of Pregnancy (MUSP), UQ, Brisbane; Australian Temperament Project (ATP), Australian Institute of Family Studies, Canberra; Victoria Adolescent Health Cohort Study (VAHCS), Royal Children’s Hospital, Melbourne.

Researchers
NDARC: Richard Mattick, Delyse Hutchinson, Louisa Degenhardt, Wendy Swift
CHDS: David Fergusson
MUSP: Jake Najman, Gail Williams, Reza Hayatbakhsh
VAHCS: George Patton
ATP: John Toumborou

Background
MUSP – ongoing since 1981 – refer to Research section
ATP – a longitudinal study of the psychosocial development of a sample of Australian children born between September 1982 and January 1983. 2443 infants were recruited at 4-6 months old. Approximately two-thirds of the families were still participating after 24 years.
CHDS – a longitudinal study of a birth cohort of 1265 children born in the Christchurch urban region in 1977. These children included 97% of all live births occurring during the recruitment period. The cohort has been studied on 22 occasions from birth to age 30 years.
VAHCS – a longitudinal study of a representative sample of mid-secondary adolescents resident in Victoria. A total of 2032 participants were recruited in 1992 at the end of Year 9 (wave 1) or the start of Year 10 (wave 2) and reviewed on four occasions in adolescence and three in adulthood.

The Cannabis Cohort Research Consortium (CCRC) is a developing collaboration which stemmed from the need to better address pressing questions about the relationship between cannabis, other drug use, life-course outcomes and mental health in children and young adults. The CCRC is a multi-organisational and multi-disciplinary international collaboration of researchers which consists of highly experienced individuals with expert knowledge from across the disciplines of psychiatry, psychology, child and adolescent health, cannabis and other substance use, biomedicine, health and development, prevention, intervention and knowledge translation. The Consortium brings together researchers from some of the largest and most prolific longitudinal studies in the world. The CCRC 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.

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.

2011 highlights
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 Study of Pregnancy (MUSP) and the Victorian Adolescent Health Cohort Study (2000 Stories), to potentially strengthen associations between early cannabis use and educational outcomes. A paper is under review which uses structural equation modelling to examine potential reciprocal relationships between cannabis use and depression across several cohorts. An NHMRC grant application was successful which extended the work of the pilot study.
Due to the success of the collaboration, the Consortium has been selected by the Australian Research Alliance for Children and Youth (ARACY) as a case study of a ‘network in action’ and promoted to ARACY members and others interested in collaboration management.

**2012 aims**

To publish collaborative research papers, specifically concerning the relationship between cannabis use, anxiety/depression and antisocial behaviour.

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**Opioid, analgesic and psychostimulant prescription use in Queensland and Australia**

**Researchers**

Jake Najman, Samantha Hollingworth, Wayne Hall  
Staff: Kelsey Hall

In Australia, there are emerging concerns about the increasing prescription of pharmaceutical drugs with the potential for causing harm. Opioid analgesics and psychostimulants (stimulants), in particular, can be misused, cause dependence and be diverted to illicit markets. There has been little research done to investigate trends across Australian jurisdictions of the extent of actual consumption of these drugs. There is a concern that the available national data may be incomplete and that efforts to monitor changing trends over time in opioid drug prescribing may be subject to error and possible bias.

It is likely that Pharmaceutical Benefits Scheme (PBS) data, particularly with regard to analgesics and stimulants, may underestimate the use. Fortunately we can obtain data on both under co-payment and private prescription volumes. Queensland is one of the few jurisdictions that monitor all Schedule 8 prescriptions including both PBS, under co-payment and private prescriptions. The Drugs of Dependence Unit (DDU) in Queensland Health maintains a prescription database of this information.

Using data from the Drug Utilisation Sub-committee of the Pharmaceutical Benefits Advisory Committee, we will investigate the concordance between the PBS and non-subsidised data and DDU data for Schedule 8 drug prescriptions in Queensland. The difference between the two sources will be extrapolated to all of Australia to ascertain the extent of non-subsidised prescribing. We will determine whether PBS data of Schedule 8 drug prescriptions could be a reliable measure of total prescription volumes for those states that do not undertake state based monitoring.

**2012 aims**

To draft papers for publication.

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**Other collaborations**

**Khon Kaen University, Thailand**

Under terms of a Memorandum of Agreement for Academic Cooperation between The University of Queensland and Khon Kaen University, Thailand, Associate Professor Manop Kanato, Department of Community Medicine, MD-KKU, Director of the ISAN (Northeast Thai) Substance Abuse Academic Network, KKU, arranged a visit to QADREC on 17 June 2011. The purpose of the visit was to introduce four Khon Kaen PhD students in Community Medicine to the ATOD Studies, and the work carried out in QADREC. Particular interests of the students were:

- Mr Worapol Nunun – Club drugs  
- Mr Wirat Watanaphithuk – Inhalant users  
- Mrs Siriluk Jaichuang – Substance abuse among migrant workers  
- Mrs Kittima Momen – Drugs literacy and community intervention

Over the course of a half-day, Prof Najman and various QADREC staff members presented briefly on their areas of research and education, and Professor Kanato and colleagues discussed drug research in Thailand. The outcome was an interesting exchange of knowledge and new understanding of cultural issues.

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**University of Isfahan in Iran**

Dr Reza Hayatbakhsh established a collaboration with a group of clinical researchers at the University of Isfahan in Iran. The research team studies the effect of physical exercise and rehabilitation on quality of life, physical capacity and mental health of patients affected by chronic diseases such as multiple sclerosis, heart failure and Parkinson disease. As a result of the collaboration the following paper was published:


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**University of New South Wales**

Dr Hayatbakhsh also established a collaboration with UNSW investigating the relationships between cannabis and other drug use, mental health, early-life factors and life-course outcomes. (NHMRC Project Grant administered by the University of NSW).
As figures 1 and 2 indicate QADREC staff have reason to be pleased with their research performance. Figure 1 only includes funds and grants directly available to QADREC and for which QADREC staff have primary financial responsibility. This figure does not include a number of grants which involve QADREC staff as principal investigators but where the grant is awarded to a first-named investigator who is in another group within the SPH (eg. Associate Professors Mamun and Alati), or at another centre/location (eg. Professor Richard Mattick, NDARC; Ms Ann Kingsbury, Mater Mothers Hospital).

Figure 1 shows that QADREC’s annual budget now averages over $1,000,000 per year. Although the amounts have increased modestly since 2005-6, the major thrust of the change is that QADREC research funds are now derived from three sources. A substantial component of QADREC funding is now derived from NHMRC competitive research grants. The QH allocation has grown and now comprises about 25% of total QADREC funding. The School of Population Health now also makes a significant financial contribution to QADREC.

Figure 2 indicates what these changes have meant in terms of publications. It is clear that there has been a substantial increase in research papers appearing in refereed journal and that this increase has only levelled off in recent years.
Alcohol Tobacco and Other Drug (ATOD) Program

Since the extensive revision of QADREC teaching programs in 2010 a number of quality improvement initiatives have been implemented within the overall program. The systematic review of courses, coupled with actions flowing from student feedback evaluations (SECATS), have led to improved delivery methods. These enhancements have incorporated up-to-date information via the inclusion of most recent theory, research and policy applications. Many areas of the ATOD field have been subject to rapid changes in recent times therefore QADREC courses need to reflect this.

Each year QADREC identifies courses that need updating. This ensures courses and content are kept highly relevant for those in the field of substance use and other multi-disciplines across the gamut of public health. The diversity of students undertaking QADREC courses is great with current students coming from the ranks of service providers, policy analysts, educators, researchers and those looking to begin a career in the ATOD field.

In 2011 QADREC extended its teaching efforts with the appointment of Andrew Smirnov to the teaching staff. Sue Conrad has also been appointed and is currently updating Substance Use and Misuse among Indigenous People (INDH7001). Over 2010–11 Kobie Mulligan developed two new courses (Alcohol Related Harm, PUBH7028 and Drugs and Young People, PUBH7029).

QADREC courses, leading to the degrees offered, can be broadly divided into three categories. Firstly, some courses offer a substantive focus on the type of substance and understanding the factors that are important in relation to the uses of that substance (separately for alcohol, tobacco and illicit drugs). A second set of courses deal with matters that are common to understanding substance use, for example changes in substance use over the early life course, policy issues that are of generic significance, and substance use in Indigenous communities. The third set of courses is ‘skills’ based and is part of a common core within the School of Population Health (eg. epidemiology, biostatistics).

Figure 1 presents a typical QADREC degree structure. Candidates are able to select more courses in their areas of interest and expertise.

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Table 1: 2011 Enrolments in QADREC Programs

<table>
<thead>
<tr>
<th>Program Type</th>
<th>Enrolments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Graduate Certificate (ATOD)</td>
<td>27</td>
</tr>
<tr>
<td>Graduate Diploma (ATOD)</td>
<td>6</td>
</tr>
<tr>
<td>Masters (ATOD)</td>
<td>40</td>
</tr>
<tr>
<td>Electives</td>
<td>106</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>179</strong></td>
</tr>
</tbody>
</table>

2011 Courses

HPRM7004 – Introduction to substance use and misuse

Course Co-ordinator: Ms Kobie Mulligan and Mr Clinton Kempnich

This course provides a general understanding of the core concepts surrounding alcohol and drug use and the concepts and behaviours associated with drug use are described. Key elements include drug actions and styles of use, links between drug use and government policy, health initiatives, epidemiology, socio-cultural issues, policing and media. Stereotypical views and images are challenged as students undertake exercises and review key articles to
enhance skills relating to transfer of theory into practice. HPRM7004 is one of two compulsory courses to be undertaken at all levels of the ATOD programs and is offered both internally and externally.

**HPRM7005 – Assessment and interventions for substance misuse**

Course Co-ordinator: Mr Clinton Kempnich

This course addresses assessment and treatment options for substance abuse with the emphasis on critical evaluation of their efficacy and effectiveness. It covers screening in various settings, brief interventions, specialist behavioural and pharmacological therapies, and community interventions. HPRM7005 is the second of two compulsory courses to be undertaken at all levels of the ATOD programs.

**INDH7001 – Substance use and misuse among Indigenous People**

Course Co-ordinator: Mr Clinton Kempnich

The purpose of this course is to introduce non-Indigenous health professionals to an Indigenous perspective on substance use and abuse. It looks at ATOD use by Indigenous people; culture; adverse effects and policy response; prevention; treatment; and community.

**PUBH7124 – Tobacco cessation and control**

Course Co-ordinator: Mr Clinton Kempnich

This course describes the history of the 20th century tobacco smoking epidemic and the consequences for population health and public policy. It equips students to carry out detailed analyses of the prevalence of tobacco use and tobacco-related harm in Australia and other countries, as well as tobacco control policy and programs at the regional, national and international levels. The course enables students to assess the effectiveness of tobacco cessation strategies. These processes of analysis and assessment are critical to developing effective responses, at population and individual levels, to the considerable burden of tobacco related illness.

**PUBH7028 – Alcohol related harm**

Course Co-ordinator: Ms Kobie Mulligan

This course examines patterns of alcohol use from a national and international perspective, social and community factors influencing alcohol use, legislation to control the distribution and sale of alcohol and population efforts to limit the harms associated with alcohol use/misuse.

Alcohol use and misuse represent a major component of health however, patterns of alcohol misuse have not greatly changed in the last 20 years. The policy advances that have characterised other areas of health-related substance use have not been implemented nor had an impact on patterns of alcohol use.

**PUBH7029 – Youth drug use**

Course Co-ordinator: Mr Clinton Kempnich; internal teaching Andrew Smirnov

This course provides students with a framework for understanding the changing patterns of drug use and drug-related harms amongst young people. Licit and illicit use of legally available drugs and use of illegal drugs will be investigated. Cultural representations of drug use and policy responses are critically analysed and evaluated.

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**ATOD Studies Graduates make a difference**

Maria Pau
Founder and Chairwoman of the Board of Coaching With Substance, Inc.

Being able to complete my Master of Public Health majoring in alcohol, tobacco and other drugs studies has given me the edge that I need. I have recently started my own charity called Coaching With Substance, Inc and every course has helped me solidify my objectives of delivering a cutting edge coaching service dedicated to people with substance use and abuse issues.

The flexibility of being able to do it in my own time allowed me to finish the course in two years, along with starting and running my charity. The information and knowledge I have received is current, which enabled me to be considered for a PhD project I have been dreaming of and working hard for.

I would recommend this course to anyone serious in becoming an expert, or dreaming of progressing rapidly, in the field of substance use and abuse.
Table 2: Student Enrolments in ATOD Courses, 2004 – 2011

<table>
<thead>
<tr>
<th>Course Code</th>
<th>2004</th>
<th>2005</th>
<th>2006</th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
<th>2010</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>PUBH7124 Tobacco Cessation and Control</td>
<td>9</td>
<td>4</td>
<td>9</td>
<td>15</td>
<td>24</td>
<td>16</td>
<td>32</td>
<td>37</td>
</tr>
<tr>
<td>HPRM7004 Introduction to Substance Use and Misuse</td>
<td>29</td>
<td>27</td>
<td>18</td>
<td>31</td>
<td>30</td>
<td>35</td>
<td>39</td>
<td>66</td>
</tr>
<tr>
<td>HPRM7016 Recent Developments in Substance Use and Misuse</td>
<td>18</td>
<td>21</td>
<td>9</td>
<td>13</td>
<td>9</td>
<td>10</td>
<td>20</td>
<td>n/a</td>
</tr>
<tr>
<td>HPRM7005 Assessment and Interventions for Substance Misuse</td>
<td>26</td>
<td>18</td>
<td>21</td>
<td>22</td>
<td>32</td>
<td>17</td>
<td>17</td>
<td>32</td>
</tr>
<tr>
<td>HPRM7006 Alcohol and Drug Harm Minimisation and Policy Development</td>
<td>10</td>
<td>5</td>
<td>5</td>
<td>9</td>
<td>8</td>
<td>5</td>
<td>n/a</td>
<td>n/a</td>
</tr>
<tr>
<td>PUBH7009 Substance Use and Misuse in Special Populations</td>
<td>22</td>
<td>22</td>
<td>22</td>
<td>35</td>
<td>33</td>
<td>26</td>
<td>19</td>
<td>n/a</td>
</tr>
<tr>
<td>INDH7001 Substance Use and Misuse among Indigenous People</td>
<td>12</td>
<td>11</td>
<td>9</td>
<td>5</td>
<td>10</td>
<td>9</td>
<td>5</td>
<td>10</td>
</tr>
<tr>
<td>HPRM7015 Counselling for Substance Misuse and Dependence</td>
<td>13</td>
<td>7</td>
<td>7</td>
<td>7</td>
<td>10</td>
<td>9</td>
<td>n/a</td>
<td>n/a</td>
</tr>
<tr>
<td>PUBH7028 Alcohol Related Harm</td>
<td>–</td>
<td>–</td>
<td>–</td>
<td>–</td>
<td>–</td>
<td>–</td>
<td>12</td>
<td>20</td>
</tr>
<tr>
<td>PUBH7029 Youth Drug Use</td>
<td>–</td>
<td>–</td>
<td>–</td>
<td>–</td>
<td>–</td>
<td>–</td>
<td>14</td>
<td></td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>139</strong></td>
<td><strong>115</strong></td>
<td><strong>100</strong></td>
<td><strong>137</strong></td>
<td><strong>156</strong></td>
<td><strong>127</strong></td>
<td><strong>144</strong></td>
<td><strong>179</strong></td>
</tr>
</tbody>
</table>

Lectures

**Jake Najman**
Course Coordinator for Bachelor of Social Science courses:
- SOCY2179 Sex, Drugs & Disease: Health of the Marginalised
- SOCY1030 Introduction to Health, Illness and Society
15 April: Guest Lecturer for NURS1002, Adolescents and Young Adults.
Epidemiology of alcohol and tobacco use in pregnancy – Ipswich Campus.
18 April: Guest Lecturer for PUBH7670 Injury Epidemiology & Prevention
1. Childhood poverty leads to mental illness
2. Childhood poverty leads to trauma

**Reza Hayatbakhsh**
Course coordinator for PUBH2007, Health Research Methods (133 students enrolled in 2011).

**Andrew Smirnov**
September: Guest lecture for POLS2703 Principles of Research: Social and Comparative Perspectives.

**Anton Clifford**
Course Coordinator for INDH7002 Issues in Aboriginal & Torres Strait Islander Health.

**Clinton Kempnich**
Course Coordinator for INDH2109 Alcohol and substance use and ATSI people (taught as part of Bachelor of Health Sciences).
Guest lecturer for:
- PHRM2030 Social and Professional Aspects of Pharmacy
- Year 1 Bachelor of Medicine Bachelor of Surgery (MBBS) Social Problem of Alcohol and Rehabilitation
- Aboriginal and Torres Strait Islander Alcohol & Other Drugs Training. Delivered for the Queensland Aboriginal and Islander Health Council (QAICH).
COMMUNITY EDUCATION

2011 Students graduation
CHC30108 Certificate III Community Services Work (Alcohol and Other Drugs)
CHC30108 Certificate III Community services work (alcohol & other drugs)

QADREC has continued to be involved in the delivery of the CHC30108 Certificate III Community Services Work (Alcohol and Other Drugs). Current students come from sites such as QH, ATODS, Queensland Indigenous Alcohol Diversion Program (QIADP), welfare reform, Indigenous community-controlled rehabilitation programs and Indigenous community-controlled health services and are employed in a range of different occupations.

Queensland Health, ATODS and the Department of Health and Ageing provide funding for the program, while the Western Australia Department of Health, Drug and Alcohol Office is an RTO and supports the delivery of the program.

To ensure that the program objectives are met in Queensland, a collaborative partnership has been established between QADREC, the Queensland Aboriginal & Islander Health Council (QAIHC) and the Queensland Substance Misuse Council (QISMC).

Twenty-two students graduated on the 6th August 2011, and a new intake of some twenty-three students commenced on 3 October 2011. The Certificate IV is now programmed to commence in 2012.

Indigenous risk impact screen (IRIS) and brief intervention (BI)

The IRIS and BI program provides a culturally secure and validated screening instrument and brief intervention designed to meet the specific needs of Aboriginal and Torres Strait Islander communities in Queensland and across Australia. IRIS is a two-factor validated and culturally appropriate screen that measures alcohol and other drug use and associated mental health issues in Indigenous populations from 18 years onwards.

The IRIS was developed in response to recommendations from both national and state reports that identified alcohol and other drug issues as the cause and symptom of health and environmental factors affecting the lives of Aboriginal and Torres Strait Islander peoples.

The IRIS program seeks to:

- Provide timely advice to clients and families about the extent and nature of their substance misuse and possible interventions and treatment pathways
- Enable both mainstream and Aboriginal and Torres Strait Islander service providers and health agencies to better target their response to meet the needs of Indigenous clients
- Provide community workers with support that will enable them to address the alcohol and other drug issues that affect their Indigenous clients in urban, regional and rural areas
- Ensure its sustainability by encouraging the uptake of the IRIS tool through the provision of training and ongoing support to workers and agencies from health, community control, corrections, government and non-government sectors.

Since 2006, implementation of the IRIS program across Queensland has been funded by the Australian Government Department of Health and Ageing (DOHA). In 2009 DOHA extended funding for the IRIS program to allow the program to be rolled out across Australia. QADREC’s Coralie Ober has been the driving force behind the implementation.

The IRIS training program has been developed:

- as a two-day IRIS Tool Kit training that trains workers to use the screen in a culturally secure manner
- as a follow-up four-day Train the Trainer workshop that enables workers to continue to train other workers locally in the use of the IRIS
In 2011 both two and four day workshops were delivered across Australia as follows:

<table>
<thead>
<tr>
<th>Dates</th>
<th>Sites</th>
<th>Dates</th>
<th>Sites</th>
</tr>
</thead>
<tbody>
<tr>
<td>15 – 18 Feb</td>
<td>Woombrinda QLD</td>
<td>29 – 31 Aug</td>
<td>Gove NT</td>
</tr>
<tr>
<td>24 – 25 Feb</td>
<td>Gold Coast QLD</td>
<td>12 – 14 Sept</td>
<td>Hobart TAS</td>
</tr>
<tr>
<td>2 – 4 Mar</td>
<td>Sydney NSW</td>
<td>15 – 16 Sept</td>
<td>Launceston TAS</td>
</tr>
<tr>
<td>7 – 8 Mar</td>
<td>Sydney NSW</td>
<td>19 – 20 Sept</td>
<td>Burnie TAS</td>
</tr>
<tr>
<td>10 – 11 Mar</td>
<td>Newcastle NSW</td>
<td>24 – 28 Oct</td>
<td>Darwin NT</td>
</tr>
<tr>
<td>22 – 25 Mar</td>
<td>Adelaide SA</td>
<td>7 – 10 Nov</td>
<td>Adelaide SA</td>
</tr>
<tr>
<td>4 – 8 Apr</td>
<td>Sydney NSW</td>
<td>5 – 7 Dec</td>
<td>Sydney NSW</td>
</tr>
<tr>
<td>30 May – 3 Jun</td>
<td>Cairns QLD</td>
<td>12 – 14 Dec</td>
<td>Melbourne VIC</td>
</tr>
<tr>
<td>20- 23 Jun</td>
<td>Darwin NT</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Dynamic of Fetal Alcohol Spectrum Disorders. Presented by Diane Malbin, FASCETS (Fetal Alcohol Syndrome Consultation, Education and Training Services, Inc., Oregon

### Conference presentations

Alati, R.

2-4 May: Science informing practice are there ‘safe’ trajectories of alcohol consumption in adolescence? 6th International Conference on Drugs and Young People, Melbourne.

Hayatbakhsh, R.


McIlwraith, F.


17 October: Online drug use and purchase patterns (EDRS), Drug Trends Conference, Sydney


Najman, J. M.

1 March: QNADA Conference, Brisbane. 1) Trends in illicit drug and other drugs – workforce implications 2) Strengthening the evidence

16 June: 6th Annual Happiness and Its Causes conference, panel member on bringing up confident, happy children.

10 September: Teachers are Teachers 2011 Early Childhood Conference. Fetal and early childhood determinants of adult health and well being.

Clifford, A


Ober, C


QADREC Seminar series

As a process of information dissemination and knowledge exchange, the QADREC Seminar Series is presented free of charge to provide forums for practitioners, educators, policy makers and the general public to meet and discuss pertinent alcohol or drug issues and current research findings. In 2011, the following five presentations took place:


30 March: USA Approaches to Preventing Underage Drinking: A Consideration of Policy Alternatives. Presented by Ralph W Hingson, Sc.D., MPH, Executive member International Council on Alcohol, Drugs, & Traffic Safety (ICADTS), Director, Division of Epidemiology and Prevention Research, National Institute on Alcohol Abuse and Alcoholism (NIAAA), USA.

31 March: Methamphetamine: Epidemiology, Psychosis and Treatment Outcomes. Presented by Rebecca McKetin, NDARC, UNSW

25 October: Drug Trends in the United States – How Different from Australia? Presented by Professor Jane Maxwell, Addiction Research Institute, University of Texas, Austin

8 December: Prevention as a Function of Reducing Fear and Reactivity, of Breaking the “No Solution, No Problem”
Other presentations

**Hickey, S**


**Najman, J.**


1. Alcohol and drugs do not mix
2. Alcohol and drug use: What do we know and what should we do?

20 June: Presentation with Gail Williams on the MUSP longitudinal study.

SPH Research Opportunities Showcase

1 July: Does adversity over the early life course lead to mental illness in young adults?

SPH Seminar Series

5 December: Alcohol and Other Drugs: Substance Abuse in Adults.
Clinical Professional Development (CPD) Study Day for Nurses
1. Learning about the psychology of addiction
2. Illicit drugs an overview

**Ober, C**

2 November: Some techniques for working with clients who have AOD issues, Social and Emotional Well-being Workforce Regional Forum for Central, South West & South East Queensland, Caloundra.

14–15 November: Facilitated FASD workshop in Brisbane for the National Drug Research Institute (NDRI) Curtin University.

16–17 November: Consultations with organisations in Cairns on FASD for the National Drug Research Institute (NDRI) Curtin University.

**Clifford, A**

17 November: Indigenous Australians and alcohol. Australian Red Cross Training Forum, Brisbane.

Media coverage

**Fairlie McIlwraith**

Brisbane Times, 16 November 2011. By Georgia Waters

Tripping out: LSD rates climb

Fairlie McIlwraith, senior research officer with the Queensland Alcohol and Drug Research and Education Centre, said there had been an increase in LSD use lately.

“LSD is reasonably inexpensive for the effect that [users] get from it,” she said. “It has increased in popularity recently. It’s not that people are using huge amounts or regularly but more people are using it, it’s just an upward trend.”

In Australia, illicit drug use has risen from 13.4 per cent prevalence in the population over 14 in 2007 to 14.7 per cent in 2010, according to the National Drug Strategy Household Survey, and ecstasy and cannabis remain the most commonly used illicit drugs.


**Backyard drug makers selling ‘legal highs’ online**

Sydney Morning Herald October 18, 2011 by Sally Corderoy

A senior researcher at the Queensland Alcohol & Drug Research and Education Centre, Fairlie McIlwraith, said her research into the internet habits of ecstasy users indicated that about 10 per cent had used the internet to buy drugs and 2 per cent to buy the ingredients for drugs. About 5 per cent had sold drugs online.

But about 60 per cent of users employed the internet to research information about different drugs, she said. The most common website used was a “pill reports” website in which users and drug sellers posted reviews of ecstasy tablets.

QADREC

- PhD supervision
- Professional associations and committees
- Awards
- Staff
- Funding
- Publications
PhD supervision

QADREC staff provide PhD thesis advice and supervision to a significant number of candidates. A number of these candidates do additional work with QADREC staff, and are involved in ongoing teaching and research. For this latter group, the relationship between the supervisor and the PhD candidate tends to be collegial and focused on mentoring the candidate.

Professor Jake Najman

<table>
<thead>
<tr>
<th>PhD Candidate</th>
<th>Project</th>
<th>Area of Study</th>
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<tbody>
<tr>
<td>Sophie Hickey</td>
<td>The health outcomes of Indigenous Australians from birth to adulthood in an urban setting</td>
<td>Social Science</td>
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<tr>
<td>Ryan Mills</td>
<td>Child abuse and neglect – characteristics and outcomes in a birth cohort</td>
<td>Population Health</td>
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<tr>
<td>Jane Fischer</td>
<td>Drug use and Quality of Life</td>
<td>Pharmacy</td>
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<tr>
<td>Andrew Smirnov</td>
<td>Amphetamines in Queensland</td>
<td>Population Health</td>
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<tr>
<td>Coralie Ober</td>
<td>Indigenous Risk Impact Screen (IRIS) Project</td>
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<tr>
<td>Sadmir Ciketic</td>
<td>Cost-effectiveness evaluation of amphetamine treatment intervention</td>
<td>Population Health</td>
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<tr>
<td>Ivan Doolan</td>
<td>Youth in detention</td>
<td>Social Science</td>
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<td>Ann Kingsbury</td>
<td>Does maternal substance use and mental health in pregnancy impact on the woman’s health in later life?</td>
<td>Population Health</td>
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<tr>
<td>Robert Kemp</td>
<td>The development of the Needle and Syringe Program and associated drug related harm reduction responses in Queensland</td>
<td>Population Health</td>
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<td>Caroline Salom</td>
<td>Impact of maternal mental health and substance use on the substance use comorbidities of their children</td>
<td>Population Health</td>
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<td>William Bor</td>
<td>Economic change, maternal, child and youth well-being</td>
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<tr>
<td>Divey Rattan</td>
<td>Predictors of smoking cessation, obesity and mental health in middle aged women and young adults: A life course approach</td>
<td>Population Health</td>
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Dr Rosa Alati

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<tr>
<td>Kaelene Dingle</td>
<td>What predicts if young people have a delayed entry into adulthood?</td>
<td>Population Health</td>
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<tr>
<td>Simon Forsyth</td>
<td>NHMRC prisoner mortality data linkage project</td>
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<tr>
<td>Megan Williams</td>
<td>Indigenous ex-prisoners (Passports Project)</td>
<td>Population Health</td>
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Dr Reza Hayatbakhsh

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<td>Mohammad Soltani</td>
<td>Patterns of subjective sleep quality in middle-aged Australian women: Correlates, predictors and consequences</td>
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Dr Anton Clifford

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<tbody>
<tr>
<td>Bianca Calabria</td>
<td>The evaluation of family-focused intervention to reduce alcohol-related harms among Indigenous Australians</td>
<td>NDARC, UNSW</td>
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</table>
Professional associations and committees

QADREC membership
- Australian National Council on Drugs (ANCD)
- Australian Professional Society on Alcohol and Other Drugs (APSAD)
- Drug Arm
- Hepatitis Council of Queensland
- National Alliance for Action on Alcohol (NAAA)

Rosa Alati
- Member of Association for Research between Italy and Australasia (ARIA).

Reza Hayatbakhsh
- Member of Cannabis Cohort Research Consortium (CCRC), NDARC, UNSW.
- Member of SPH Research and Research Training Division (RRTD) in 2011.

Clinton Kempnich
- Member of the Australian Winter School Organising Committee.
- Member of ATODS Service Improvement Education Training and Reference Group.
- Member of UQ Teaching and Review Committee.
- Member of UQ Postgraduate Coursework Committee.

Jake Najman
- The Australian Sociological Association (TASA), International Sociological Association (ISA).
- Fellow of the Academy of Social Sciences of Australia (FASSA).
- Chair of Scientific Advisory Committee of the National Centre in HIV Social Research (NCHSR-SAC), UNSW.
- Faculty Board of Social Behavioural Science (SBS).
- Queensland Government Alcohol and Drug Services Reform Steering Committee.
- Chair of Research Committee of the Queensland Fertility Group.
- Member of the Cannabis Cohort Research Consortium (CCRC), NDARC, UNSW.
- Assessor of 2010 NHMRC Project Grant applications.

Coralie Ober
- Co-Deputy Chair, of the National Indigenous Drug and Alcohol Committee (NIDAC)
- Co-Chair of the NDS Sub Group for the Development of NDS Aboriginal & Torres Strait Islander Peoples Strategy 2013-2015
- Board member of the National Drug Research Institute (NDRI) Curtin University, Perth
- Member of the Queensland Aboriginal & Islander Health Council (QAIHC)
- Member of the Queensland Indigenous Substance Misuse Council (QISMC)
- Member of the Indigenous Working Group Alcohol & Drug Council Australia
- Chairperson Galangoor Duwalami Aboriginal & Torres Strait Islander Primary Health Care Service
- Queensland Coordinator of IGCD Workforce Development & Capacity Building Project
- Consultant to National Drug Law Enforcement Research Fund (NDLERF); advice, information and assessment of funding applications to the NDLERF Board of Management.

Awards

Najman, J. M.
May 2011: Awarded $2,000 for a Q-index score in the top five in the Humanities and Social Sciences
June 2011: 2011 Lee Greenaway Award for outstanding contribution in the field of drug and alcohol research – awarded at the 2011 Australian Winter School Conference.

Hayatbakhsh, R.
25 March: SPH Research Incentive Award for research performance in 2010.

Sophie Hickey
Staff of 2011

Jake Najman
PhD, FASSA
Director

Clinton Kempnich
MPH, BB(Hlth Admin), Grad DipED
Deputy Director, Teaching

Reza Hayatbakhsh
MD, PhD
Deputy Director, Research

Rosa Alati
PhD
Senior Research Fellow

Coralie Ober
PhD candidate
Senior Research Technician

Andrew Smirnov
BA, Grad DipLIB
Lecturer

Kobie Mulligan
BLJS, MSocSc (Legal & Justice)
Lecturer

Yvonne Flanagan
B Soc Sc
Administration Officer

Kelsey Hall
Student – B Psych Sci
Administration

Leith Morris
BPsych (Hons), MSEPsych
Senior Research Technician

Anton Clifford
PhD
Senior Research Fellow

Fairlie McIlwraith
MSocSc PhD
Senior Research Officer

Sophie Hickey
BA (Hons)
Research Assistant

Suzanna Henderson
BSc PsyC
Project Manager

Tina Belovic
BA BSocSc
Research Assistant

Maria Plotnikova
PhD
Biostatistician

No picture available at the time of publication:

Sue Conrad
BHSci (Hons)
Research Assistant
Funding 2011

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<tr>
<td>QADREC Core</td>
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<td>School of Population Heath – academic support</td>
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<td>School of Population Heath – teaching support</td>
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<td>Genetic and environmental contributions to the life course of the common mental disorders</td>
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<td>EDRS</td>
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<td>IDRS</td>
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<td>Passports to Advantage: Health and Capacity Building as a Basis for Social Integration</td>
<td>$160,000</td>
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<td>QuIDS</td>
<td>$14,162</td>
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<td>Coralie Ober – administration support (QH)</td>
<td>$10,000</td>
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<td>Investigating the Relationships between Cannabis and other Drug Use</td>
<td>$5,000</td>
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<td>Jake Najman Incentive Award</td>
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<td>Anton Clifford NHMRC Fellowship</td>
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<td>TOTAL</td>
<td>$1,064,023</td>
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Publications

Peer-reviewed journal articles


Published conference presentations presented at Australian Professional Society on Alcohol and other Drugs Conference, 2011


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The University of Queensland
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