

# 12. Research

This chapter outlines some of the research undertaken by relevant organisations in Australia during 1997–98. Research listed in the *Australian Illicit Drug Report 1996–97* as ‘complete’ does not appear in this 1997–98 report; research listed in the 1996–97 report as ‘in progress’ is updated here where possible; other, new research, both completed and in progress, is listed here. Readers are invited to contact the relevant research organisation for further details (see end of chapter).

This chapter could not have been compiled without the assistance of the following organisations:

- the Australian Drug Foundation, Melbourne;
- the Botany Department, University of Queensland;
- the National Centre for Education and Training on Addiction, Adelaide;
- the National Centre for Research into the Prevention of Drug Abuse, Perth;
- the National Drug and Alcohol Research Centre, University of New South Wales;
- the National Centre for Epidemiology and Population Health, Australian National University;
- the Department of Psychiatry Dandenong Hospital, Melbourne;
- Turning Point Alcohol and Drug Centre Inc., Melbourne;
- the Department of Anatomy and Histology and the Centre for Neuroscience, Flinders University;
- St Vincent’s Hospital Sydney Limited.

The National Drug and Alcohol Research Centre was unable to provide updates for the following research listed in *Australian Illicit Drug Report 1996–97*:

- a magnetic resonance imaging study of brain structure and function in long-term cannabis users;
- the acute effects of cannabis on cognitive functioning in dependent versus non-dependent individuals;
- cognitive changes associated with cessation of cannabis use;
- a randomised controlled trial of a brief intervention for cannabis dependence;
- patterns and correlates of cannabis dependence;
- quantifying the effects of partial decriminalisation on the prevalence of cannabis use in South Australia and the Australian Capital Territory;
- heroin use and HIV in New York and Sydney;
- levels and correlates of multiple drug dependency among heroin users;
- heroin purity, composition and smoking efficiency;
- an ethnographic study of heroin user lifestyles and economic behaviour;
- amphetamines and psychostimulants—transitions between amphetamine and heroin use;
- patterns of use and harms associated with illicit ketamine use;
- other drugs—patterns and correlates of anabolic steroid use;
- a pilot trial of benzodiazepine maintenance among high-dose benzodiazepine-dependent methadone patients;
- the needlestick risk assessment in prisons study (analysis of the syringes found in correctional centres);
- a randomised control trial of methadone maintenance among prisoners in New South Wales;
- the hepatitis C educational campaign for prisoners in New South Wales and New York;
- the national ecstasy/dance party project;
- a mathematical model of hepatitis C among injecting drug users;
- policing in Cabramatta;
- a comparative study of buprenorphine and methadone in the treatment of opioid dependence;
- a cost analysis of methadone maintenance treatment in New South Wales;

- a qualitative study of substance use among transgender groups;
- outcome evaluation of an adolescent treatment program;
- development of a standardised data set of treatment information on psychoactive substances;
- injecting drug use among people of Vietnamese origin in Melbourne and Sydney;
- changes to the Pharmaceutical Benefits Scheme and their effects on levels of prescription drug use in Australia.

## Cannabis

### Investigation of the issues in the regulation of cannabis possession, use and supply for the Drugs and Crime Prevention Committee, Parliament of Victoria

National Centre for Research into the Prevention of Drug Abuse

The task of this six-month project is to produce a discussion paper for broad public distribution in Victoria, to stimulate public debate about the options for cannabis control in the State. The following will be included in the paper:

- an overview of data on cannabis use and related harms in Victoria and elsewhere;
- a discussion of the harm-reduction approach;
- a consideration of the various legislative and regulatory models of cannabis control;
- a review of the international and Australian experience of applying such models;
- a consideration of possible impacts on young people and the 'gateway theory';
- a comparative assessment of the various regulatory options and specification of the most defensible and effective option for the Victorian context.

*Status: in progress*

### The social impact of the Cannabis Expiation Notice Scheme in South Australia

Drug and Alcohol Services Council; National Centre for Research into the Prevention of Drug Abuse; Department of Criminology, University of Melbourne; National Drug and Alcohol Research Centre; National Centre for Education and Training on Addiction

A number of separate research studies were formulated as part of the overall study plan:

- a statistical analysis of cannabis offences under the Cannabis Expiation Notice Scheme in South Australia since 1987;
- a statistical analysis of cannabis offenders in the Western Australian criminal justice system from 1993 to 1995;
- a cannabis offender interview study, comparing the impact of civil penalties for minor cannabis offences in South Australia with the impact of conviction in Western Australia;
- a survey of peak employer groups to compare employment impacts in South Australia and Western Australia;
- a study of the Cannabis Expiation Notice Scheme's effects on levels and patterns of cannabis use in South Australia;
- a survey of public awareness and knowledge of, and attitudes to, the Scheme;
- a study of costs associated with the Scheme's operation;
- a review of law-enforcement and other criminal justice attitudes, policies and practices relating to cannabis and cannabis laws in South Australia.

The study aimed to compare the social impacts of the two main models found in Australia for dealing with minor cannabis offences: total prohibition and prohibition with civil penalties. It also sought to evaluate in detail the operation and acceptability of an existing expiation scheme for minor cannabis offences—South Australia's Cannabis Expiation Notice Scheme. One of the main questions underlying the investigation was whether the reduction in criminal penalties that accompanies an expiation approach might lead to differing social consequences for offenders and for the community as a whole.

The findings of some of the individual studies are reported elsewhere in this chapter.

*Status: all complete*

## Cannabis offenders in the Western Australian criminal justice system

National Centre for Research into the Prevention of Drug Abuse

Proponents of cannabis law reform argue that many people who are convicted of minor cannabis offences have no prior criminal conviction and are otherwise law-abiding citizens. This study of criminal justice system data in a strict-prohibition jurisdiction (Western Australia) found that over 10 per cent of all charges and 85 per cent of all drug charges were for cannabis and that 90 per cent of these were for minor offences. Over 40 per cent of those charged with cannabis possession or use as their most serious offence had never before been arrested. Almost half of those first arrested for cannabis possession or use had not been re-arrested up to 10 years later. Younger first-time-arrested cannabis users were more likely to be re-arrested than older offenders. Almost all adult cannabis offenders who went to court were convicted and fined. Nearly 95 per cent of those imprisoned for possession or use of cannabis were imprisoned for fine default. The findings accord with earlier research showing that the vast majority of these offenders are, in all respects apart from their cannabis use, a non-criminal section of the community.

*Status: complete*

## Developing an appropriate school response to students using cannabis

Australian Drug Foundation

*From 1996-76 report*

This study is part of the Connect project. Research shows that if drug-using students can be retained in or reintegrated into the school system they are less at risk. Schools need practical strategies and guidelines on how to achieve this, not only for the welfare of the students involved but also for the welfare of other students and their families. Where a school has a welfare response in operation students are more likely to seek help before their drug use becomes problematic.

*Update for 1997-98 report*

This long-term project is continuing.

*Status: in progress—completion due in 1999*

## Cannabis and psychosis project

Department of Psychiatry, Dandenong Hospital

*From 1995-96 report*

The role of cannabis use in psychiatric illness remains quite uncertain, despite more than 20 years' research attention. Until recently little systematic research had been done to examine the role of cannabis in psychotic disorders such as schizophrenia. This project will examine the role of cannabis use in the onset and relapse of psychosis.

*From 1996-97 report*

Three inter-related projects are in progress or soon to commence. Their purpose is the development of a comprehensive assessment instrument to measure cannabis use in people with mental illness. The instrument consists of items that attempt to quantify cannabis use, establish certain diagnostic criteria, and examine the contextual variables associated with cannabis use. This is currently being piloted before being used in a survey of a representative sample of clients.

A second project, beginning in January 1998, will pilot an intervention for patients who suffer from psychosis and also use cannabis. The intervention will be individually tailored to meet a patient's needs and will be evaluated over a six-month follow-up period. Subjects will be randomly selected for inclusion in the study, using the survey just described, and their outcomes will be compared with a control group.

The effect of continuous cannabis use on the outcome of schizophrenia will also be assessed as a component of a naturalistic outcome study over three years (the SCAP project). This project involves regular monitoring of cannabis use and assessment with standardised outcome measures.

The aim of the studies is to improve the measurement and detection of cannabis use while initiating evaluation of outcomes using both experimental and naturalistic methods. The potential for improvement of outcomes is substantial given the high level of cannabis use in the population with psychotic illness.

*Update for 1997-98 report*

The project is continuing.

*Status: in progress*

## Randomised treatment program for self-defined problem cannabis users

Turning Point Alcohol and Drug Centre Inc.

The project involved two groups: one provided with a self-steering needs-based program; the other provided with a standard psycho-educational, relapse-prevention program. Qualitative interviews were held to determine participants' experiences with cannabis. The project was evaluated.

*Status: complete*

### **Trial of two cannabis interventions**

Turning Point Alcohol and Drug Centre Inc.

The principal objective of the trial was to assess the acceptability and efficacy of an integrated brief intervention for the treatment of self-defined problem cannabis users. The project involved a single session of therapy, incorporating a cognitive behavioural approach and motivational interviewing. Participants were also provided with a self-help book. Post-treatment follow-up at one and three months found significant reductions in both the quantity and frequency of use and reported positive changes in a number of lifestyle areas such as going out more, getting on better with family, and increased interest in leisure activities.

*Status: complete*

### **Effects of cannabis on driving**

Turning Point Alcohol and Drug Centre Inc.

This project is investigating the effects of marijuana on the driving performance of young novice drivers. Using driving simulators, the drivers' performance is compared with that of older, more experienced drivers following the ingestion of marijuana, alcohol or a combination of both drugs. The research will examine the effects of the drugs under a variety of simulated conditions, including those that require a response to an emergency situation or performance of a subsidiary task. It will also examine whether drivers can predict their performance on the basis of the way they feel after taking these drugs. The cannabis for the project is being obtained from the United States.

*Status: in progress*

### **Isotopic and micromorphological variation in cannabis to determine provenance**

Tricia Denton (nee Court)  
Botany Department, University of Queensland

*From 1996–97 report*

Studies involving isotopic and micromorphological analyses have been well researched in the past for agricultural and ecological purposes and are known to provide information about climatic conditions influencing plants during growth. This research project aims to characterise the effects of environmental influences (such as water availability, temperature, the level of sunlight received and the type of fertiliser used) on leaf micromorphology and stable isotope signatures. This information reveals the kind of environmental conditions a plant has experienced during growth and so has application for criminal investigations involving cannabis.

*Update for 1997–98 report*

Research has been completed and the report is being written.

*Status: in progress*

## **Heroin**

### **Feasibility of providing naloxone to heroin users for peer administration to prevent fatal heroin-related overdose**

National Centre for Research into the Prevention of Drug Abuse

Heroin overdose is a major cause of death among heroin users and non-fatal heroin overdoses are common. Most deaths attributed to heroin overdose occur in the company of others, mostly other users, and witnesses rarely call an ambulance or seek help, often because of concern about police being involved. Research suggests that instant death following injecting is rare, yet in more cases users have died more than three hours after injection. In most cases of heroin overdose either or both of the central nervous system depressants benzodiazepine or alcohol were present in the blood.

Naloxone hydrochloride is an injectable narcotic antagonist that reverses the respiratory, sedation and hypotension effects of acute narcosis. Some experts have suggested that it be provided to heroin users for administration by their peers in an overdose situation. The current project, funded by the Health Department

of Western Australia, aims to determine the feasibility of conducting a trial of the provision of naloxone to heroin users for peer administration and to design such a trial. The project will include a literature review, establishment of an expert informant group, data collection with heroin users, examination of medico-legal and supply questions, development and piloting of a protocol for administration, and trial design.

*Status: in progress*

### New treatment options for heroin-dependent people

National Centre for Epidemiology and Population Health

Although a trial of heroin prescription will not proceed in the near future in Australia, many other countries are exploring the option and the National Centre for Epidemiology and Population Health is involved in a range of collaborative projects to trial treatment alternatives—buprenorphine, LAAM (levo-alpha-acetyl methadol), naltrexone and slow-release oral morphine. Trials of buprenorphine and naltrexone in withdrawal will be conducted in the Australian Capital Territory in collaboration with the Alcohol and Drug Program of ACT Community Care, Turning Point Alcohol and Drug Centre Inc., the Langton Centre and the National Drug and Alcohol Research Centre. The National Centre for Epidemiology and Population Health is also collaborating with the National Drug and Alcohol Research Centre on national evaluation of the trials and with Turning Point on a range of Victorian trials.

*Status: in progress*

### New pharmacotherapies project

Turning Point Alcohol and Drug Centre Inc.

The new pharmacotherapies project is a comprehensive three-year program of research into four new drug treatments for heroin dependence. The research program has been divided into two groups: primary trials and subsidiary projects. The primary trials are concerned with gathering data on the effectiveness of each drug. The subsidiary projects, which focus on specific hypotheses of interest, will collect data within each primary trial.

The primary trials are

- LAAM implementation trial
- buprenorphine implementation trial
- naltrexone treatment outcome study
- slow-release oral morphine pilot study
- methadone withdrawal using buprenorphine.

The subsidiary projects are

- driving safety
- pregnancy
- Aboriginal and Torres Strait Islander communities
- neuropsychological functioning
- pharmacokinetics
- Vietnamese community
- health economics.

*Status: the trials commenced in June 1998 and the full program of research is due for completion in June 2001*

### Non-fatal heroin overdose study

Turning Point Alcohol and Drug Centre Inc.

This collaborative project with the Victorian Ambulance Service provides data on and analysis of non-fatal heroin overdoses in the Melbourne metropolitan area. The information gained will serve as an important indicator of heroin-related harm. Monthly reports on non-fatal heroin overdose rates will be provided to the Victorian Department of Human Services.

*Status: in progress*

## Amphetamines and psychostimulants

### Evaluation of urinary isomer monitoring for the distinguishing source of amphetamine

St Vincent's Hospital Sydney Limited

Forty amphetamine-dependent drug users are being recruited for this study. Half will be prescribed therapeutic amphetamine and the remainder will receive the usual care. The project is being conducted from the Kirketon Road Centre in Sydney's Kings Cross. The aim is to determine whether urine analysis can distinguish between drug users who take only therapeutic amphetamine and users who take street amphetamine (with or without therapeutic amphetamine). The original intention was to distinguish between the two groups using urinary isomer monitoring, but since the pilot study was conducted controls of precursor chemicals have changed the nature of street amphetamine to methamphetamine. Accordingly, urinary testing now

consists of distinguishing between methamphetamine and amphetamine. Recruitment is almost complete and follow-up will be completed in January 1999.

*Status: in progress*

## Psychostimulant use and reckless or violent behaviour

National Centre for Research into the Prevention of Drug Abuse

This project developed a methodology for interviewing police suspects, to investigate whether they had experienced reckless or violent (including criminal) behaviour that appears to be associated with use of psychostimulants and other licit or illicit drugs. The project also determined whether the suspects attributed such behaviour to their use of such drugs. The results contribute to an understanding of some of the possible consequences of psychostimulant use—reckless and violent behaviour—and offer some evidence relating patterns of criminal behaviour to patterns of drug use, so that changes in criminal behaviour that might occur as a result of changes in drug use can be better predicted.

*Status: complete*

## Electrophysiological investigation of cocaine sensitisation, or how addictive drugs change long-term brain function

Dr Donald Cameron

Department of Anatomy and Histology and the Centre for Neuroscience, Flinders University

Psychostimulant drugs such as cocaine and amphetamine can be highly addictive and there is mounting evidence to suggest that they may (along with other drugs of abuse) permanently change the way the brain functions. Specifically, repeated exposure to cocaine augments well-defined behavioural responses. In humans, this is characterised by drug craving and intense anxiety reactions that can sometimes lead to paranoid psychosis. In experimental animals, continued exposure leads to an increase in the locomotor response to the drug. This phenomenon, called sensitisation, is extremely enduring in both humans and experimental animals. Once established, sensitisation persists in the absence of further drug intake.

Although the broad areas of the brain that are changed by psychostimulants and other addictive drugs have been identified, little is known about how the circuits of brain cells (neurons) in these areas function. This study is aimed at finding out which specific neurons change their function in response to repeated drug exposure. The researchers are using specialised techniques that enable them to record the electrical signals from neurons in small samples of rat brain tissue taken from animals that have been sensitised to cocaine. They can then use antibody imaging techniques to identify the chemicals used as messengers by these brain cells. The neurons that are being studied play an integral role in the brain's reward system and are the primary target for almost all drugs of addiction. The observation that this system sensitises to such drugs provides not only a clinically relevant phenomenon that can be modelled in experimental animals but also an example of long-term adaptation in the brain.

The experiments will provide important basic information about how drugs of abuse act in the brain and vital clues for the rational treatment of addiction. In addition, information will be gained about the ways in which the brain's long-term functioning can be altered.

*Status: in progress*

## Policy

### Model Criminal Code drugs chapter

Model Criminal Code Officers Committee, Federal Attorney-General's Department

*From 1995–96 report*

This project involves a comprehensive review of all legislation in Australia covering serious offences connected with illicit drugs.

*From 1996–97 report*

A discussion paper on serious drug offences was released in June 1997 in book form. It represents the views of the Model Criminal Code Officers Committee.

*Update for 1997-98 report*

Model Criminal Code: Chapter 6 'Serious drug offences', by the Model Criminal Code Officers Committee, published in October 1998.

Since the 1980 Williams Royal Commission there have been calls for more uniform drug laws between the various Australian jurisdictions to prevent the manipulation of different offences and penalties by criminals and to simplify the task of enforcing these laws. Often effective drug law enforcement involves interstate and

Commonwealth taskforces. In view of the national and international market in illicit drugs, it is only sensible that Australia should have a common approach to the most serious criminal conduct involving the trade in drugs in every jurisdiction. This report deals with the most serious drug offences: trafficking, cultivating, supplying drugs to children, and offences relating to property derived from serious drug offences. The Committee took into account the comments it received in consultations on the discussion paper issued in June 1997.

*Status: complete*

## Prisons

### Treatment and testing policy evaluation

Turning Point Alcohol and Drug Centre Inc.

This project provided an evaluation of the Department of Corrections policy toward offenders on community-based orders with treatment (for drug abuse) and testing (for example, urinalysis) conditions attached to them. The hypothesis to be tested—that clients matched to programs do better than those who are not matched—was tested by comparing outcomes from matched and unmatched groups.

*Status: complete*

### Evaluation of prison methadone program

St Vincent's Hospital Sydney Limited

New South Wales has the largest prison methadone program in the world. Three hundred and sixty heroin-injecting inmates have been recruited for this study: half of them were allocated randomly to usual care and the other half were admitted to the prison methadone program. Both groups were followed for four months. Experimental and control groups provided self-report data at baseline and during follow-up. The primary aim of the study is to evaluate the effectiveness of prison methadone programs on heroin use in jail. This outcome is being determined by scalp hair analysis for morphine (as a marker of heroin). Recruitment is almost complete. Follow-up will be complete in early 1999.

*Status: in progress*

## General

### Parenting in the sociocultural context of illicit drug or harmful alcohol use

National Centre for Epidemiology and Population Health

There is little empirical information about how 'good parenting' is understood and practised or about the factors that make it difficult for parents in various circumstances to meet their ideals. There is also little empirical information about strategies that parents can use to reduce harms and how agencies can assist in this process.

This study aims to investigate parenting by mothers who use illicit drugs or who drink harmful amounts of alcohol and to compare this with parenting by other groups of mothers. In-depth interviews with mothers will be conducted in an attempt to elucidate the experiences, meanings and practices of parenting in the context of the mothers' lives. The study will develop supportive and harm-reduction strategies. The next stage will be to assess the implementation of these strategies through consultation with informants in relevant health and welfare services.

*Status: in progress*

### Developing responses to drug use by lesbian, gay, bisexual, transgender and 'queer' communities

Louise Crompton, Australian Drug Foundation

Although drug use is a concern for all Australians, little is known about patterns of drug use and needs in lesbian, gay and allied communities. An action research project is being run jointly by the ALSO Foundation and the Australian Drug Foundation. The first stage of the project is funded jointly by VicHealth and the Lance Reichstein Foundation. The aims of the project are to consult with the lesbian, gay, transgender, bisexual and queer communities in order to ascertain the roles and meanings of drug use in the communities, gain an indication of patterns and levels of drug use, and ascertain the level of concern about drug use. This information will be used to develop a number of strategies to deal with community concerns; these strategies will then be tested and evaluated.

The research will follow a concurrent design, using a quantitative survey based on the 1995 National Drug Strategy Household Survey to measure patterns of drug use and using in-depth interviews and focus groups to determine meanings, attitudes and concerns relating to drug use at the individual and community levels. Given the diversity of the lesbian, gay, bisexual, transgender and queer communities, the sampling strategy was aimed at gaining maximum variation within the limitations of the project. Particular attempts were made to reach subgroups that have been routinely omitted from previous research, such as non-identified members of the communities and those in rural areas.

Surveys were distributed by post and 518 have been received, the return rate being 37.61 per cent. Twenty interviews and two focus groups were conducted with community members and health professionals. Both the qualitative and the quantitative data are being analysed.

*Status: in progress*

## Evaluation of a community-based drug law–enforcement model for intersectoral harm reduction

National Centre for Research into the Prevention of Drug Abuse

This project, which is jointly operated by the Criminology Department of the University of Melbourne and the National Centre for Research into the Prevention of Drug Abuse at Curtin University, has been funded by the National Police Research Unit to evaluate the National Community Based Approach to Drug Law Enforcement project, trialing the development and implementation of drug action teams and drug reference groups across Australia. There were two trial sites in Western Australia, one in New South Wales and one in Victoria. The National Centre for Research into the Prevention of Drug Abuse is responsible for evaluation of the Western Australian trials. The trials will be managed by project officers appointed by the relevant police services. The evaluators monitored the processes and outcomes of each trial during a four-month feasibility stage commencing in January 1998 and will monitor for a further 12-month operational stage for each feasible trial site.

*Status: in progress*

## Developing a model of protective factors for adolescent drug use

National Centre for Epidemiology and Population Health

Australian survey data are being used to develop a model of protective factors for adolescent drug use. This involves collaboration with the Centre for Adolescent Health in Melbourne.

*Status: in progress*

## Novice injecting drug users and hepatitis C: assessing the risks and designing harm-reduction messages

National Centre for Research into the Prevention of Drug Abuse

There is an epidemic of hepatitis C among injecting drug users in Australia. Since the discovery of the virus in 1989 and the subsequent development of an antibody test, a number of studies have identified high prevalence rates of hepatitis C among injecting drug users—rates between 15 per cent among those injecting for between one and two years and 100 per cent among those reporting injecting for eight or more years. The hepatitis C virus is considerably more infectious than the HIV/AIDS virus. National cross-sectional studies of injecting drug users demonstrate that measures of HIV risk behaviour, such as the drug use subscale of the HIV/AIDS Risk-taking Behaviour Scale, do not correlate well with hepatitis C seropositivity rates among participants.

The aim of phase one of this study is to investigate the act of drug injection and drug–using network relationships in an attempt to identify specific behaviours by which injecting drug users may be exposed to blood and hence risk exposure to hepatitis C. Injection occasions have been videotaped and analysed to identify actions or events involving exposure to blood. Thirty injecting occasions were observed. Of those, 16 behaviours were identified through which hepatitis C could be transmitted through exposure to another person’s blood. Ten of these are termed ‘real’ risks because one of the injected reported being hepatitis C antibody positive; the remainder are termed ‘possible risks’, either because those present reported having been tested for hepatitis C antibodies and receiving a negative result or because their status was unknown.

Phase two of the study is investigating the following among a study group of novice injecting drug users:

- knowledge;
- attitudes and injecting behaviours in relation to hepatitis C;
- variance in social factors identified in phase one as having an impact on injecting behaviour;

- drug-use lifestyle and drug-use histories (retrospective);
- immersion in drug-use culture in the first two years of injecting drug use.

Although Australian research shows that the duration of injecting drug use is strongly correlated with hepatitis C seropositivity, little is known about how drug-using careers develop over time and the impact this may have on risk of exposure. A retrospective investigation of progression through drug using careers will provide an insight into how lifestyles, knowledge, attitudes, behaviours, and the risk of exposure to hepatitis C change during the initial stages of injecting drug use.

*Status: in progress*

### The blood-borne virus project

Turning Point Alcohol and Drug Centre Inc.

The aim was to investigate the risk practices of injecting drug users in relation to hepatitis B, hepatitis C and HIV and to develop a new instrument for risk assessment.

*Status: complete*

### Testing for blood-borne viral infections in injecting drug users

National Centre for Research into the Prevention of Drug Abuse

The high rate of transmission of blood-borne viral infections (such as hepatitis B, hepatitis C and HIV) among injecting drug users and the seriousness of the resulting diseases mean that injecting drug users are commonly tested for blood-borne viral infections, particularly if they attend drug-treatment clinics. The assumption appears to be that if injecting drug users know their serostatus they are in a better position to protect both themselves and their communities through behaviour change and improved health care. Yet the HIV testing literature suggests that this assumption is oversimplified, and there is little or no contemporary literature that examines the human factors involved in being tested for hepatitis B or C or being vaccinated against hepatitis B.

Australian research shows that injecting drug users being tested for all three viruses experience difficulties with all aspects of being tested. Among these difficulties are lack of willingness to change behaviour; the intimidatory nature of the testing procedure; failure to understand the meaning of test results, which may result from inadequate pre-and post-test counselling; over-testing; and uncertainty about serostatus.

The study investigated the human factors involved in testing injecting drug users for hepatitis B, hepatitis C and HIV and vaccination against hepatitis B. Users recruited from drug treatment, youth, sexual health and needle exchange agencies, and from the street were interviewed about the behavioural, cognitive and affective aspects of the decision to be tested, the test procedure and test outcomes, and similar matters relating to vaccination against hepatitis B. Service providers across the country were also interviewed. The study aimed to elucidate areas of confusion, anxiety or difficulty in testing that can arise, so that testing and referral agencies and health professionals can improve testing practices, including, but not exclusively, pre-and post-test counselling.

*Status: complete*

### Mathematical modelling of the hepatitis C epidemic among injecting drug users

St Vincent's Hospital Sydney Limited

It is proposed to determine whether current prevention strategies will be sufficient to control the hepatitis C epidemic among injecting drug users, assuming that more intensive implementation of these strategies may be attempted.

*Status: the project is awaiting funding*

### National trial of the Illicit Drug Reporting System

National Drug and Alcohol Research Centre, Turning Point Alcohol and Drug Centre Inc., Drug and Alcohol Services Council

Following a successful pilot of the Illicit Drug Reporting System in Sydney, the National Drug and Alcohol Research Centre was commissioned by the Commonwealth Department of Health and Family Services to conduct a second-stage, multi-state trial of the System. It was intended that the System provide a coordinated approach to the monitoring of data associated with the use of heroin, cocaine, amphetamines and cannabis and that the resultant information be used as an early warning indicator of the availability and use of the main drug categories. The second stage of the trial was conducted in Sydney, Melbourne and Adelaide, where between July and September 1997 surveys of injecting drug users were conducted.

The results of these studies are published by the National Drug and Alcohol Research Centre in the following reports:

- *Victorian Drug Trends 1997: findings from the Illicit Drug Reporting System* (technical report no. 59);
- *NSW Drug Trends 1997: findings from the Illicit Drug Reporting System* (technical report no. 56);
- *South Australian Drug Trends 1997: findings from the Illicit Drug Reporting System* (technical report no. 57);
- *Drug Trends 1997: a comparison of drug use and trends in three Australian States—results from a national trial of the Illicit Drug Reporting System.*

The Illicit Drug Reporting System trials for 1998 have commenced in Sydney, Melbourne and Adelaide.

*Status: the Sydney, Melbourne and Adelaide studies for 1997 are complete*

## Drugs booklet evaluation

Turning Point Alcohol and Drug Centre Inc.

The aim was to evaluate, by telephone survey, the *Drugs Information Household Booklet*, which was distributed to all homes in Victoria.

*Status: complete*

## MOTIV

Turning Point Alcohol and Drug Centre Inc.

The aim of MOTIV (formerly the Northcote project) was to develop a group-based data and analysis program for offenders in the community who are motivated to change.

*Status: complete*

## Randomised controlled trial of the Methadone Access Program

Turning Point Alcohol and Drug Centre Inc.

This project was a controlled evaluation of MAP (the Methadone Access Program), an innovative approach to the delivery of methadone treatment. The aims were as follows:

- to examine MAP's ability to attract and retain in-treatment dependent heroin users not attracted to conventional methadone-maintenance treatments;
- to evaluate MAP's efficacy in reducing heroin use and a range of associated harms (such as HIV risk practices, criminality, social dysfunction and psychopathology).

*Status: complete*

## Using rapid-assessment procedures to examine injecting drug use in an Aboriginal community

National Centre for Education and Training on Addiction

The main aim of this project was to develop rapid-assessment procedures for examining the practices of injecting drug users in a rural Aboriginal community. These procedures will be used to determine the level of knowledge about the spread of infectious diseases in the Aboriginal injecting drug user population. Once the data have been analysed, the Aboriginal Drug and Alcohol Council will use them to develop interventions aimed at reducing the harm associated with injecting drug use in Aboriginal communities.

*Status: complete*

## Drug use and street culture among Indochinese youth

Dr Simon de Burgh, The Langton Centre

*From 1995–96 report*

There has been much recent public concern about drug use among young people of Indochinese background, yet health professionals know little about them. This group is thought to avoid standard medical facilities, so the health system has little opportunity to influence risk behaviour. It is known that heroin use tends to be by inhalation; understanding the reasons for the transition from inhaling to injecting has great importance for limiting the spread of hepatitis B and C and HIV. Many street youths of Indochinese background will talk more freely in a group environment. Their own accounts of street culture, including drug use and their relationship with the health system, are examined.

*From 1996–97 report*

Interviewing is almost complete.

*Status: no update available for 1997–98*

## Contacts

### **Australian Drug Foundation**

PO Box 818  
North Melbourne VIC 3051  
Ph. 03 9278 8100  
Fax 03 9328 3008

### **Dr Simon de Burgh**

The Langton Centre  
Corner Nobbs & South Dowling Sts  
Surry Hills NSW 2010  
Ph. 02 9332 8777

### **Dr Donald Cameron**

Department of Anatomy and Histology and Centre  
for Neuroscience  
Flinders University  
Bedford Park SA 5042  
Ph. 08 8204 4280

### **National Centre for Epidemiology and Population Health**

The Australian National University  
Canberra ACT 0200  
Ph. 02 6249 0716  
Fax 02 6249 0740  
Email Gabriele.Bammer@nceph.anu.edu.au  
Feasibility research website: <http://www-nceph.anu.edu.au/pub/opioids/opioids.htm>

### **National Centre for Education and Training on Addiction**

Level 3B  
Mark Oliphant Building  
Science Park Adelaide  
Bedford Park SA 5042  
Ph. 08 8201 7535  
Fax 08 8201 7550  
Email nceta@flinders.edu.au

### **Turning Point Alcohol and Drug Centre Inc.**

54–62 Gertrude Street  
Fitzroy VIC 3965  
Ph. 03 9254 8061  
Fax 03 9416 3420

### **National Centre for Research into the Prevention of Drug Abuse**

GPO Box U 1987  
Perth WA 6001  
Ph. 08 9368 2055  
Fax 08 9367 8141

### **Botany Department, University of Queensland**

Tricia Denton (nee Court)  
Botany Department  
University of Queensland  
St Lucia QLD 4067  
Ph. 07 3365 2755  
Fax 07 33651699  
Email t.court@botany.uq.edu.au

### **St Vincent's Hospital Sydney Limited**

Alcohol and Drug Service  
Dr Alex Wodak  
Ph. 02 9361 2632  
Fax 02 9361 2498

### **Department of Psychiatry, Dandenong Hospital**

Tim Rolfe  
Department of Psychiatry  
Dandenong Hospital  
Dandenong VIC 3175  
Ph. 03 9797 8235

### **National Drug and Alcohol Research Centre**

University of New South Wales  
Sydney NSW 2052  
Ph. 02 9398 9333  
Fax 02 9399 7143

### **Drug and Alcohol Services Centre**

161 Greenhill Road  
Parkside SA 5063  
Ph: 08 8274 3333  
Fax: 08 8373 0749