

INSIDE THIS ISSUE:

2011 National Drug and Alcohol Awards Recognise 'best of the best'
– See pages 5–9

EDITORIAL

Focus on Viral Hepatitis and Ageing for Older Opioid Users



**By Annie Madden,
Executive Officer,
Australian Injecting
and Illicit Drug Users
League (AIVL)**

As part of recognising World Hepatitis Day and National Hepatitis Awareness Week 2011, the Australian Injecting and Illicit Drug Users League (AIVL) held a national forum in Canberra and online on Friday 29 July 2011.

The Forum had a specific focus on issues relating to viral hepatitis (particularly hepatitis C), and ageing for older opioid users, and included a range of highly regarded expert speakers from the sector.

The general theme of health and ageing also provided an opportunity for AIVL to launch a new report titled *"Double Jeopardy: Older Injecting Opioid Users in Australia"* which aims to bring attention to some of the emerging health and social issues for this group within the Australian community.

The Discussion Paper's Executive Summary captures key sentiments and provides a clear picture of issues discussed in the publication.

EXECUTIVE SUMMARY

We live in an ageing society. Australians are now living longer than ever before and this marked increase in life expectancy is expected to continue throughout the 21st century.

The Australian Government has adopted a proactive approach to ageing and promotes the concept of "positive ageing". As part of its approach, the government has funded a number of population based studies to track cohorts of ageing Australians into older age with a broad focus on health and well being. None of these studies, however, examines licit or illicit drug use or the experience of ageing through the lens of people who inject opioids.

In keeping with general population trends, the ageing nature of opioid injectors has become apparent in recent years. This stands in stark contrast to the youth focus of our National Drug Strategy 2010-15 and its emphasis on early intervention and drug prevention.

Continued on page 2



The Federal Member for Fraser, Dr Andrew Leigh MP (centre) with Professor Ian Webster AO, Patron of ADCA (right), and Professor Robin Room, President of the ADCA Board, at the launch of DAW 2011.

EDITORIAL – Focus on Viral Hepatitis and Ageing for Older Opioid Users**Continued from page 1**

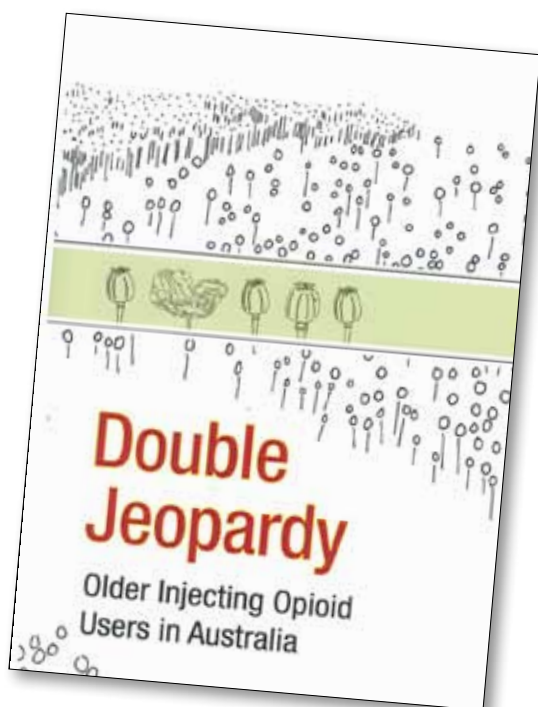
Similarly, a strong youth focus is reflected in the body of literature about illicit drug use. The association between drug use and death and destruction is so pronounced in popular culture that it may well come as a surprise to many that illicit drug users have a future and an old age to look forward to.

Equally, many drug users, who did not anticipate or prepare for old age and retirement, are also surprised to find themselves still here and advancing in years. In all, this tendency to associate illicit drug use with young people has diverted attention away from older cohorts of drug users and as a result, little is known about ageing in relation to illicit drug use.

The idea for the Discussion Paper was first suggested by members of AIVL's constituency, many of whom are reaching older age themselves. As soon as we were alerted to this emerging demographic and the changing composition of the drug using community, AIVL was keen to draw attention to the issue and to explore the needs and concerns of older drug users.

As the first stage of the process, a wide-ranging peer-driven paper was developed by AIVL to use as a starting point for discussion. This larger paper was then used to map the key issues and from there inform the development of this much briefer discussion paper for publication.

Having drawn on the broader experiences collected, this discussion paper primarily sets out to document the existence of a cohort of injecting drug users aged 40 years or more in Australia and to estimate the possible size of this group. It also aims to explore the experience of advancing age from a drug user perspective and to examine the interrelationship between ageing and illicit drug use.

**DEFINITIONS**

Definitions of "old" or "older" are somewhat arbitrary in the literature and a broad range of markers are used to delineate old age. For the purposes of the Discussion Paper, however, "older opioid users" are those who are aged 40 years and above. The term "opioid users" is used to indicate regular users of any opioid, both licit and illicit.

METHODS

The Discussion Paper was developed in several distinct stages. Initially, in order to establish the existence of the target group and to estimate the possible number of older opioid users in Australia, AIVL drew quantitative information from a range of national surveys including the Annual National Needle and Syringe Survey, the Illicit Drug Reporting System (IDRS) and the National Opioid Pharmacotherapy Statistics Annual Data Collection.

The next stage comprised an exploratory review of the literature about older opioid users. In addition, a small qualitative study was conducted with older opioid users who completed face to face interviews or responded to an online questionnaire circulated by AIVL to its member organisations.

In total, 24 older opioid injectors were interviewed for the study and a further 17 respondents completed the online questionnaire. The research conducted by AIVL is referred to throughout the Discussion Paper as "The AIVL Study of Older Opioid Injectors 2010". AIVL also encouraged discussion about ageing in relation to injecting drug use via the AIVL e-list (a national peer-based discussion list), and solicited feedback from its members to early drafts of the paper.

KEY FINDINGS

Several national studies, including The Australian NSP Survey *National Data Report, 2002-2006*, and Australian Drug Trends: *Findings from the Illicit Drug Reporting System* document a growing proportion of older opioid users and a trend towards ageing.

In addition, both surveys indicate a decrease in the number of participants in younger age categories. The National Opioid Pharmacotherapy Statistics Annual Data Collection demonstrates a similar trend towards ageing and is another key source, which reports the increasing age of opioid users. The fact that these large sample studies consistently report the increasing average age of participants as well as increasing numbers of older age participants provides strong indication that opioid users are getting older.

Although it is difficult to accurately estimate the number of injecting drug users of any age, there may be as many as 30 000 regular opioid users in Australia aged 40 years, and over and up to 80 000 infrequent or non-dependent opioid users.

Continued on page 12



From the CEO's desk

In early July, ADCA was well represented at the tax "day of action" at Parliament House in Canberra coordinated by National Alliance for Action on Alcohol (NAAA).

ADCA's Patron, Professor Ian Webster AO; Board President, Professor Robin Room; and policy staff were among public health and other experts from around Australia who met with more than 50 Parliamentarians to lobby for alcohol taxation to be placed on October's Tax Forum agenda.

The Minister for Health and Ageing, the Hon Nicola Roxon MP, acknowledged this effort by confirming that alcohol taxation will be on the Tax Forum agenda. While this is seen as a step in the right direction, a great deal of work is yet to be done.

In summary, the "day of action" occurred during a week in which the political agenda was focused on the carbon tax, and the introduction of tobacco plain packaging Legislation into Parliament. Despite this competitive environment, NAAA's activities resulted in some high quality media outcomes.

There was also widespread coverage across major online newspapers including more than 190 regional Fairfax-owned titles which syndicated the article written by *The SMH* and *The Age* health reporter, Mark Metherell.

It should be noted that this "day of action" followed a letter sent by ADCA in early June to the Treasurer, the Hon Wayne Swan MP, seeking confirmation that alcohol taxation will be on the agenda.

Since this initiative and the "day of action", the NAAA has written to the Treasurer stating disappointment there is no public health representation on the invitation list for the Forum, and that at a minimum, public health representation should be ensured in the final academic and community groups.

It goes without saying that ADCA, as a member of the NAAA, strongly supports the NAAA position. There is no escaping that "alcohol-related harm is a cultural disgrace" and the Tax Forum presents us with the opportunity to take affirmative action.

LETTER TO THE EDITOR

On 4 August, *The Canberra Times* published ADCA's Letter to the Editor regarding support for the introduction of a proposed needle and syringe program (NSP) at Canberra's Alexander Maconochie Centre (AMC).

ADCA stated that the initiative... *"will not only deliver immediate significant health benefits for prisoners and prison staff, but will help to ensure that prisoners when released will have less chance of introducing hepatitis C into the wider Canberra community."*

As the National Peak advocating on behalf of the alcohol and other drugs (AOD) sector, the Alcohol and other Drugs Council of Australia (ADCA) strongly supports recommendations contained in the report "Balancing access and safety" prepared by the Public Health Association of Australia (PHAA) for the ACT Government and released on World Hepatitis Day, 28 July 2011.

Unfortunately, recent public and media commentary on this initiative has been very negative and ill informed. It would appear there are some people in Canberra who are prepared to sensationalise or rail against issues such as the NSP proposal without having actually read or considered the evidence base documented in the PHAA report derived from extensive consultations with health and corrections sectors in Australia, and in overseas prison settings that have introduced NSPs.

The fact that 65 per cent of prisoners in the AMC have hepatitis C is a sad indictment on our society and the corrections institutions where they may have started their jail terms prior to being repatriated to the AMC.

We acknowledge this presents many challenges including an appreciation of the operational sensitivities associated with such a program, and which will need to be carefully managed.

ADCA believes that implementation of the NSP at the AMC will provide an opportunity to not only "pilot" the initiative, mitigate community and media opposition to harm minimisation, reduce stigma around hepatitis C, and help to enhance community understanding/ acceptance of programs aimed at improving the health and wellbeing of prisoners in a corrections environment."

ADCA and the AOD sector face a number of challenges over the coming months as the Department of Health and Ageing progresses the national healthcare agenda on behalf of the Federal Government.

With the cessation of the Ministerial Council on Drug Strategy on 30 June, the Intergovernmental Committee on Drugs (IGCD) is coordinating the implementation of the National Drug Strategy 2010-15, and is supported by four standing committees on alcohol, tobacco, illicit drugs, and pharmaceuticals.

ADCA has accepted an invitation to become a member of the Standing Committee on Alcohol and on 4 July participated in discussions concerning development of the National Alcohol Strategy, collaboration between the IGCD and the National Preventative Health Agency, labelling, the Tax Forum, and associated alcohol-related matters.

ADCA also took part in the National Stakeholder Forum on 9 August and contributed to the identification of major issues for the IGCD to consider in relation to alcohol, treatment and reducing harms associated with drug and alcohol misuse, emerging issues in illicit drug use, and tobacco.

As agreed at a meeting with the Australian National Council on Drugs (ANCD) in May, ADCA will make a formal presentation on AOD issues from a national peak perspective at the ANCD Regional Consultation Forum in Brisbane on 20 September. The Forum aims to be a collage of opinions, ideas and resolutions across a range of areas which will be shared with a number of key decision makers and stakeholders and placed on the ANCD website.

David Templeman, ADCA Chief Executive Officer

Make Alcohol Health Warning Labels Mandatory

Leading health experts are urging the Federal Government to make new alcohol health warning labels mandatory to help reduce the harms caused by alcohol.

The labels, unveiled on 16 August by the Alcohol Education & Rehabilitation Foundation (AER Foundation), include messages that drinking any alcohol can harm unborn babies, damage young developing brains and increase the risk of cancer.

The call comes as the Australia and New Zealand Food Regulation Ministerial Council reviews recommendations into alcohol labelling and follows the release of the alcohol industry's voluntary consumer information labels on alcohol products.

The AER Foundation consulted with leading Australian health experts to create the proposed health warning labels (see *actual size illustrations*). Other messages warn against drinking and driving, and the risk of injury.

AER Foundation Chief Executive, Mr Michael Thorn, says the labels reflect existing international and Australian evidence that the most effective labels are specific, unambiguous, take into account the current NHMRC guidelines, and include a range of rotating messages.

"Consumers should be armed with clear information on the harms that result from alcohol misuse," Mr Thorn said. "International research on health warning labels tells us that they are effective in both raising awareness of health risks and changing people's health behavior. We need warnings as part of a comprehensive approach – but proper warnings, not feeble warnings that suit the drinks industry's interests."

Mr Thorn stressed that the labels need to be mandatory, government regulated, and developed independently of the alcohol industry.

"Health warning labels need to be implemented and administered by the government, not the alcohol industry. All of the evidence says that alcohol industry regulation does not work," he said.

"What we propose supports the position set out by the National Preventive Health Taskforce in 2009. We also support the approach taken in the Ministerial Council's recent *Labelling Logic* report, chaired by former Federal Health Minister, Dr Neal Blewett."

The AER Foundation's expert reference group includes University of Western Australia Health Promotion Evaluation Unit Director, Professor Simone Pettigrew; Director of the Centre for Behavioural Research in Cancer and internationally recognised expert, Professor Melanie Wakefield; Australian Medical Association Manager of Public Health Policy, Maurice Rickard; the AER Centre for Alcohol Policy Research, Claire Wilkinson; the Victorian Health Promotion Foundation Manager of Alcohol, Tobacco and UV, Brian Vandenberg; and the Director of the Centre for Health Initiatives at the University of Wollongong, Professor Sandra Jones.

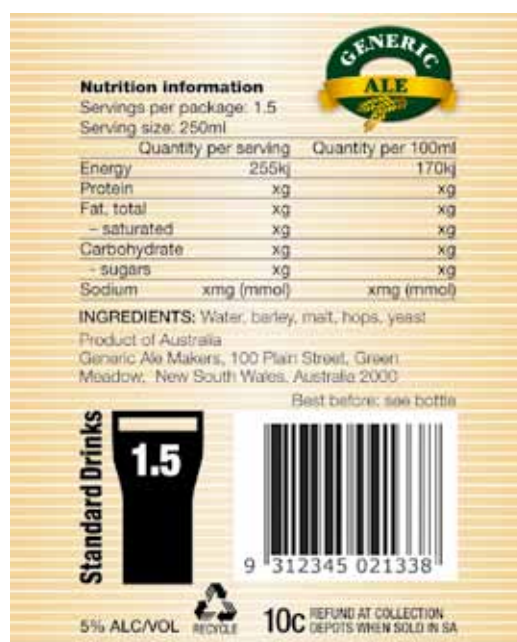
A policy paper has also been released by the AER Foundation and details the requirements of the proposed health warning label regime for alcohol products including:

- that there be at least five health warning labels, including one specifically relating to drinking during pregnancy
- health warning labels should comprise both text and symbol. The labels need to be placed consistently on the front of the product and clearly distinguishable from the rest of the label
- they should be implemented as part of a comprehensive public education regime; and
- the labels should be evaluated and refreshed at least every three years.

The AER Foundation is also calling for the inclusion of a full list of ingredients and a nutritional information panel on alcohol products to end the anomaly exempting alcohol from the conditions that apply to most other Australian food and beverage products.



Proposed label for front of bottle.



Proposed label for back of bottle.

2011 National Drug and Alcohol Awards

Recognise 'best of the best'

The 2011 National Drug and Alcohol Awards (NDAA) presented at a gala function in Sydney on 24 June recognised the "best of the best" in eight categories specific to the alcohol and other drugs (AOD) sector across Australia.

Also announced was the winner of the Prime Minister's Award for Excellence and Outstanding Contribution to Drug and Alcohol Endeavours, Judge Roger Dive, as well as the induction of Mr David McDonald and Professor Robyn Richmond into the National Drug and Alcohol Awards Honour Roll.

The 300 guests were also treated to entertainment provided by the Sydney Gay and Lesbian Choir, and singer/songwriter Robyn.

Hosted by the Australian National Council on Drugs (ANCD), with support from other NDAA Committee members – the Alcohol and other Drugs Council of Australia (ADCA), the Australian Drug Foundation (ADF), and the Ted Noffs Foundation – the Australian Defence Force was recognised as the new sponsor of the Excellence in Prevention Award for 2012.

PRIME MINISTER'S AWARD

In a message read on behalf of the Prime Minister, the Hon Julia Gillard MP, she said:

Every day, thousands of dedicated professionals offer their experience, expertise and compassion to those struggling with the consequences of drug use.

Their interventions help protect public health, reduce crime, and enable users to come to terms with their condition and regain control of their future.

If these are difficult endeavours, they are never thankless. Rather our hardworking drug and alcohol workers have the nation's gratitude and admiration.

In that spirit, I offer my sincerest congratulations to Judge Roger Dive, a worthy recipient of the 2011 Prime Minister's Award for Excellence and Outstanding Contribution to Drug and Alcohol Endeavours.



Judge Roger Dive.

Judge Dive, a Senior Judge of the New South Wales Drug Court, has worked tirelessly to promote a humane and practical response to offenders with alcohol and drug problems, using the courts to reduce the negative effects of drugs and alcohol on individuals and society.

The innovative work of Judge Dive and his colleagues on the Drug Court is mirrored by a web of government and non-government services across all our States and Territories – a partnership that succeeds through cooperation, goodwill and a shared belief that what we are doing really can make a difference. Therefore I send my best wishes to Judge Dive and to all his colleagues in the sector, whose work is also honoured by this special award.

I know you will keep doing great things to save and transform lives.

NDAA HONOUR ROLL

Mr David McDonald and Professor Robyn Richmond were inducted into the National Drug and Alcohol Awards Honour Roll which acknowledges individuals who have provided a significant contribution over the course of their careers to working to reduce harms from alcohol and other drug use.

Mr McDonald is a social scientist who has worked tirelessly to improve the health and wellbeing of people affected by alcohol, tobacco and other drug issues throughout his career. His contributions to evidence informed alcohol, tobacco and other drugs (ATOD) public policy span decades, and are reflected in the range of recent ATOD-related appointments and positions he has held.

He has been awarded a huge range of ATOD related research grants and consultancies over the last three decades demonstrating his dedication to ensuring that the ATOD sector's public health initiatives and policy are carefully designed, rigorously implemented, and appropriately evaluated.

Professor Robyn Richmond was recognised for her exceptional and sustained contributions extending over 30 years to reducing the impacts and negative effects of alcohol and tobacco use in Australia.

Professor Richmond continues to have a stellar career in public health research specifically focussed on improving health outcomes through reducing risky alcohol consumption and smoking cessation, and she has implemented evidence based interventions in a variety of ways and in different contexts.

Her career can be characterised as a pioneer of new areas of research in alcohol and tobacco use as an educator to doctors, nurses and medical students, as a mentor for junior researchers and colleagues in alcohol and tobacco who have gone on to be highly successful themselves.

Continued on page 6

2011 National Drug and Alcohol Awards Recognise 'best of the best'

Continued from page 5

EXCELLENCE IN SCHOOL EDUCATION

Wollumbin High School was judged the winner of the Excellence in School Drug Education Category with its "Life Without Drugs" initiative.

The project and curriculum units were based on the Australian Secondary Schools Alcohol and Drug Survey, and highlighted the percentage of teenagers reported to be not using drugs.

The drug education programs focussed on what works best for students. The increased use of technology amongst teenagers became a key idea when trying to find a medium to reach Wollumbin students.

The program focused on the four key areas of 1) creation of a website; 2) interactive lessons using Moodle and One Note; 3) a Cross KLA Task with Art, English and PDHPE; and 4) text messaging.

From the outset it became obvious that the use of social networking sites and or websites by students were mediums most frequented, and research focussed on the use of Facebook and Myspace sites.

EXCELLENCE IN RESEARCH

The Alcohol Education and Research (AER) Centre for Alcohol Policy Research won the Excellence in Research Award for the report titled *The Range and Magnitude of Alcohol's Harm to Others*.

The research is the first comprehensive assessment anywhere of the extent to which alcohol misuse harms people other than the drinker.

The research identifies that alcohol's harm to others totals an economic cost of at least \$20 billion every year. The study looked at critical questions such as:

- 1) How many Australians are affected by the drinking of others?
- 2) Who is affected?
- 3) What is the relationship between those affected and the drinker?
- 4) How are Australians affected or harmed?
- 5) What are the costs for others – in trouble, time and money?

The findings portray the tens of thousands of Australians who are affected by others' drinking and are hospitalised, assaulted, injured in road crashes, victims of child maltreatment, and counselled in the alcohol and drug treatment system.

The survey numbers demonstrate that literally millions of people are affected by the public nuisance, noise and fear

associated with others' drinking, and that an estimated 1.2 million people were affected by drinkers they live with or are related to.

EXCELLENCE IN CREATING HEALTHY SPORTING COMMUNITIES

The Eastern Football League (EFL) took out the Excellence in Creating Healthy Sporting Communities category that was sponsored by the Australian Sports commission.

The League operates in the eastern suburbs of Melbourne, providing Australian Football with 48 clubs, and a total of 440 teams. The 13 000 registered players range in age from seven to veterans.

EFL football is more than a game, it is the biggest service club in many suburbs and communities and provides a source of local pride, meaning and relevance. The club is also a meeting place and is a venue for fun and entertainment.

It teaches family and community values, provides a continuity of tradition, history and a sense of belonging, and teaches specific skills and in turn self-esteem and worth among individuals.

The EFL secured the position of the first sporting body nationally to have 100 per cent membership of the Good Sports program in 2010. In 2011, the EFL continued to work with Good Sports to encourage clubs already involved to extend their involvement, and for new clubs to the EFL to commit to the program.

EXCELLENCE IN AOD MEDIA REPORTING

The Health Reporter for *The Sunday Age* in Melbourne, Ms Jill Stark, was the winner of the Excellence in Alcohol and Other Drug Media Reporting for a series of articles that initially investigated the relationship between Australian sporting codes and the alcohol industry.

She also wrote on State and Federal Government alcohol policy, and attempts to change the nation's binge drinking culture.

Her article in April this year titled "*Here's to me*" focussed on her own drinking habits over the years which made her decide that she "needed a spell back on dry land".

This insightful feature not only topped off Jill's earlier coverage of alcohol and other drugs issues, but showed her journalistic professionalism and willingness to go that one step further to encourage her reading audience to actually consider their own habits.

The content in her overall coverage had the potential to actually help to change community attitudes towards the excessive consumption of alcohol, and the misuse of other drugs, including pharmaceuticals.

2011 National Drug and Alcohol Awards Recognise 'best of the best'

EXCELLENCE IN LAW ENFORCEMENT

The Bourke Alcohol Working Group (BAWG), comprising Police, Aboriginal Health, New South Wales (NSW) Health, and Bourke Shire Council, was the outstanding entry in the Excellence in Law Enforcement category.

Bourke had a long history of alcohol-related crime and associated health issues, impacting on generations of local residents. And while many passionate people from various agencies had tried individually to bring about change, there had been limited support services.

The catalyst to bring about sustainable change and establish the Bourke Alcohol Working Group was the adverse health effects recorded at the local Hospital and medical centre.

Local NSW Police Sergeant Mick Williams developed the idea about bringing together committed people from multiple agencies to strive for positive outcomes with a lasting impact.

A two-day forum involving 80 subject experts was conducted in July 2008 with the outcome being the Bourke Five-year Alcohol Plan which is still ongoing. The BAWG was established with government and non-government organisation groups all working in a coordinated manner to progress community consultation and education.

This group is an outstanding example of how a multi-agency approach can have significant positive impacts on a community, particularly in a rural setting.



Representing the Bourke Alcohol Working Group were (from left): Superintendent Michael Robinson, formerly of Darling River Local Area Command now at Bathurst; Acting Superintendent Brett Greentree, formerly of Darling River now at Maitland; Alistair Ferguson, Chair of the Bourke Alcohol Working Group; and Superintendent Michael Thomas, current Commander of Darling River.

EXCELLENCE IN TREATMENT AND SUPPORT

The UnitingCare Moreland Hall's Catalyst Program was considered to be the standout entry in the Excellence in Treatment and Support Category.

Catalyst is a post-withdrawal community-based alcohol rehabilitation program designed to assist people in early recovery to make the necessary lifestyle changes to alleviate alcohol-related problems in both the short and long-term.

It provides a flexible, holistic model designed to maximise the integration of participants' learning into their daily lives. According to the service requirements established by the Department of Human Services, Catalyst was developed as a six-week, medium-intensity, post-withdrawal program.

The program's goals are to:

1. engage and retain clients in the treatment program
2. engage families in the treatment process
3. enhance client motivation for behaviour change
4. provide opportunities for the development of coping skills to support behaviour change decisions
5. achieve positive changes in client drinking behaviour and level of social functioning to improve quality of life
6. maximise engagement in individually tailored aftercare arrangements, and
7. ensure continuous program improvement.

EXCELLENCE IN PREVENTION AND COMMUNITY EDUCATION

The Western Australian (WA) Department of Health's Multi-Systemic Therapy (MST) Program won the Excellence in Prevention and Community Education Category.

The Program is an intensive four to six-month family-based intervention for severe behavioural disorders (ie conduct disorder) in young people aged 10 to 16.

Untreated conduct disorders predict adult mental health problems, substance abuse, criminality, interpersonal violence, unemployment, incarceration and premature death.

The Program was introduced in 2005 after several years of investigation of various national and international evidence-based programs. It was located within a suite of hospital and clinic-based child and adolescent mental health services and programs.

The program is composed of two small teams each with four clinicians who are primarily young clinical psychologists, and an Indigenous mental health professional.

This is the first mental health MST service in Australia and was established with a robust longitudinal research component to measure the intervention's effectiveness within an Australian population context.

Continued on page 8

2011 National Drug and Alcohol Awards Recognise 'best of the best'

Continued from page 7

EXCELLENCE IN SERVICES FOR YOUNG PEOPLE

Hello Sunday Morning (HSM), a non-denominational charity (DGR registered) established to empower individuals to contribute and shift the cultural dependence on alcohol, was declared the winning nomination for Excellence in Services for Young People.

To tell the *HSM* story, Natalie Hertz who is the operations/ Communications Manager at *HSM*, has provided the following insightful article:

When Chris Raine, a 23-year-old advertising manager, decided it was time to say Hello Sunday Morning to a more fulfilling Sunday than his usually wasted day, he never expected it to grow into an international movement.

In 2009, Chris committed to 12 months of sobriety and used an online blog titled "*Hello Sunday Morning*" (*HSM*) to hold himself accountable to his commitment, in order to challenge Australia's embedded drinking culture.

This blog became a space in which he could reflect upon his experiences over the 12 months and allow others to follow his progress.

In July 2010, *HSM* became a registered charity, with roughly 50 participants, and three part-time staff. Up until March 2011, there were only 150 people around Australia who had committed to an extended period of sobriety through this program.

Since April, *HSM* has experienced a huge influx of media attention combined with backing from universities and alcohol and other drug-related organisations, which has contributed to a large surge in numbers, taking *HSM* participation levels to over 1600 in a mere four months. There are now also three full-time staff and three contractors working for *HSM*.

"I'm amazed to see how quickly this organisation has grown, when two years ago people laughed when I said I was giving up alcohol for 12 months," Chris said recently.

"We've created a community of individuals from all over the country, and now internationally, who are there to achieve the same thing through their own personal goals. And what we're noticing is that these individuals are becoming their own support network and providing encouraging words via the blog to other HSM participants."

HSM currently operates in three Australian universities and has numerous others in the works. After focusing on speaking engagements in university colleges and halls of residence this year, *HSM* recognised that there is a demand among student leaders for a change and a call to action to address the current drinking culture within university life.

Universities have therefore become a strong focus for the *HSM* strategic direction. *HSM's* experience within the university sector has highlighted a gap in the services available for students looking to challenge the current embedded drinking culture.

The program has been adopted within university colleges, where groups of 12-15 students are harnessed and guided through the three-month process.

The *HSM* research team is currently using these student pilot programs for extensive research and analysis of the program itself, and the impact it is having on participants.

Findings of this research aims to show the effects of removing alcohol from an individual's life, including the impact on their social, professional and most importantly personal life.

While research is continuing, results to date indicate positive changes on all three of these areas. One University of Queensland student stated: *"...it made me question why and when alcohol should have a place in my life."* Another

Chris Raine who established *Hello Sunday Morning*.



2011 National Drug and Alcohol Awards Recognise 'best of the best'

said: "...life is so much EASIER now without drinking – I am in love with my NEW life."

In collaboration with the Alcohol Education and Rehabilitation Foundation (AERF), *HSM* will celebrate the publication of this full research report at the end of August to highlight why doing a *HSM* is advantageous to individuals, and identify the benefits of participating in the period of sobriety.

The research report will reflect the leading contribution from Dr Nick Carah from the University of Queensland who specialises in Media and Communications, and various other professionals from alcohol and other drugs (AOD) organisations, including Occupational Therapy Masters students from the University of Sydney, and a Clinical Consultant from the Alcohol and Drug Foundation Queensland (ADFQ). The report will outline primary and longitudinal research.

HSM's primary research focuses on understanding the social impact of the program. This is operationalised through the improvements and changes in *HSMers'* lives during and after completing their *HSM*. Points of interest will include relationships, study, work, civic engagement, and long-term changes in alcohol use.

The longitudinal research has involved more detailed and academically rigorous testing of *HSM's* effect on participants with smaller pilot cohorts of 10 students per university. These participants have regular contact with a clinical consultant from ADFQ.

This research focuses on quantifying four key dimensions of alcohol-related impact on each individual and tracking the changes that occur over the course of their *HSM*, three months after completion, six months post, and one year following their *HSM*.

The results of these surveys will also be contrasted against the qualitative information provided via the public blog.

The tests being used are 1) Alcohol Outcome Expectancies; 2) Depression, Anxiety and Stress; 3) Quality of Life (World Health Organization); and 4) Alcohol Use Disorder Identification Test (AUDIT).

HSM celebrated its first birthday on 1 July after having won the National Drug and Alcohol Award for Excellence in Services for Young People. This award has spurred on the efforts of *HSM* staff to spread the idea and direction of *HSM* further than it has ever gone before.

"The award and the thousands of *HSMers* it honours is testament to the fact that there are people out there that believe we can change this culture of ours. Our goal has always been to be a part of a behavioural shift in this drinking culture – to be recognised at a national level tells us we're heading in the right direction," Chris said.

Progressively, as *HSM* continues to expand the idea and brand, the organisation and program itself are becoming recognised as a credible and alternative solution in the AOD sector.

Enlisting the support of Alex Dyson, a Triple J Breakfast Presenter, *HSM* has been able to call on its first Celebrity Ambassador to highlight to the youth of Australia that alcohol isn't necessary for having fun.

Alex is the first of hopefully many to come Ambassadors who will assist in promoting *HSM* to the greater public. See his blog at http://hellosundaymorning.com.au/members/Alex_Dyson/.

Furthermore, as *HSM* expands and gains greater recognition it is hoped that the organisation will receive the support of more individuals, foundations and organisations working towards the same goal of wanting to change the drinking culture that Australians currently indulge in.

On August 1, *HSM* was launched in New Zealand, focusing particularly on universities in Christchurch and Dunedin. This received the same positive response that *HSM* has enjoyed in Australia.

Communities are seeing the endless possibilities that are achievable if everyone has the chance to engage in a *HSM*. It is hoped that this initial international launch will be the beginning of *HSM* as a recognised international organisation, open to people from all over the world.

"I hope our efforts in New Zealand will be a compelling invitation for people to stand up and expect more of their Sunday mornings and ultimately, expect more of the country's relationship with alcohol as people have done in Australia," Chris said.

HSM's growth over the past year wouldn't have been possible without the support of many individuals and organisations. To ensure we have continued growth and success in the coming year *HSM* reiterates its call for any individuals and/ or organisations, who are progressive thinkers, can see the value in investing in social endeavours, and who have the capacity to bring about cultural change, to take up the challenge.

To find out more about *HSM* visit www.hellosundaymorning.com.au or contact Natalie on nat@hellosundaymorning.com.au.



DAW 2011 'Sets the Bar' for DAW 2012

Drug Action Week (DAW) 2011 was an outstanding success, surpassing expectations with nearly 800 DAW activities registered, and another 350 direct enquiries handled.

The preliminary estimate is that some 300 000 people were directly involved in the 800 scheduled activities.

Overall, DAW events in the Australian Capital Territory, New South Wales, Queensland, Victoria, and Western Australia surpassed previous years, with slight drops in South Australia, Tasmania, and the Northern Territory.

To achieve these results, a range of communication tools were used and included the DAW website, a series of You Tube announcements, the DAW community service announcement (CSA), media releases focussing on the overarching theme plus supporting themes, interview opportunities on radio and television, as well as the print media.

DAW 2011 met its project/ communication objectives by focussing on:

- generating and growing participation in DAW across the AOD, health, education, community, policing, and media sectors; and
- reaching the widest possible audience in regional/ rural and metropolitan Australia.

While the DAW website and You Tube announcements were public communication platforms, the CSA was submitted to national television networks, the Rural Health Education Foundation satellite television network, and Imparja television in Central Australia.

The preliminary estimate is that this exposure, negotiated free of charge by ADCA, was worth in excess of \$800 000.

DAW's media release stream started with the launch of the national initiative by the Federal Member for Fraser, Dr Andrew Leigh MP, at Parliament House on 14 June, and concluded two weeks later on Friday, 24 June.

These were lodged with the Parliament Press Gallery in Canberra, circulated electronically to all metropolitan and rural/ remote print/ radio/ television outlets, and sent directly to targeted health and wellbeing journalists. There were some 272 relevant media reports during the period that reached a total cumulative audience of 3.757 million readers/ viewers/ listener.

In launching DAW, Dr Leigh said that Australia hasn't always been behind the rest of the world when it comes to drugs and alcohol...

"We were one of the first countries in the world to introduce Random Breath Testing, which has saved thousands of lives over recent decades. We were among the first to introduce a Drug Court – recognising that you're more likely to cut crime if you treat addiction as well as punishing wrongdoing. That pragmatic approach, let's see what works, is the hallmark of a successful treatment strategy. And it's sensible, evidence-based policies that we're pursuing today."

Leading up to DAW and during the actual week, the media take-up and interest was very high with wide-ranging and lengthy interviews on ABC/ commercial/ community radio.

CEO ADCA, David Templeman, undertook major radio interviews for networks centred in Renmark, Canberra, Sydney, Bundaberg, Perth, Kalgoorlie, and Lithgow – averaging around eight minutes each, with one for an Islamic community radio station in Western Sydney running for 30 minutes.

While these are standouts, briefer interviews were broadcast in centres such as Newcastle, Orange, Rockhampton, Albury/ Wodonga, Wollongong, Hobart, Launceston, Alice Springs, Tamworth, Wagga Wagga, Mount Isa, Toowoomba, Broome, Bunbury, Sale, Mount Gambier, Geraldton, and Mackay. These interviews/ messages were also covered by mainstream networks.

It's also important to appreciate the competitive media stories we were up against during DAW, in particular the anniversary of the Rudd dismissal, live cattle export, the carbon tax debate, the volcanic ash cloud fallout, and Australia's economic standing.

A comprehensive project plan for the delivery of DAW 2012 is under development for the week which will run from 17 to 23 June. The National Drug and Alcohol Awards for 2012 will be hosted by the Australian Drug Foundation (ADF) in Melbourne on Friday, 22 June.



The Federal Member for Fraser, Dr Andrew Leigh MP, launched Drug Action Week (DAW) 2011 at Parliament House, Canberra, on 14 June (refer page 10 for DAW report).



NDSIS Update



**Jane Shelling,
Manager National
Drugs Sector
Information Service**

When ADCA members who are studying hear about the many services available from the NDSIS, their first comment is... "I wish I'd known about you sooner!"

If you are studying this year or considering study next year remember the team from the NDSIS are here to help. There are resources available regardless of the level you are at, so visit our website or phone/email our Reference Librarian Lisa to discuss your information needs.

ASSIGNMENT HELP FROM OUR WEBSITE (<http://ndsis.adca.org.au>)

- Select the "Ask a Librarian" link and complete the form asking for help with your assignment or any alcohol and other drugs (AOD)/ mental health related enquiry.

Go to Research Tools for the following:

- "Did you see that report" is a monthly listing of all Australian AOD-related reports published within that month. Links to the full text are available.
- The "Alcohol & other Drugs Statistics" page is an up-to-date listing of Australian, State and Territory alcohol, drug use, and tobacco statistics. This page is regularly updated with the latest available statistics.
- The "AOD Research Skills" page assists users in database search skills, citation skills and evidence based research. It has links to online tutorials.

DRUG DATABASE (www.drug.org.au)

Don't forget to use the Drug database to search for journal articles, reports or books. There are over 85 000 items and you can select and request any of them directly from the database itself. Alternatively using your membership number and email address, enter the ADCA "members only" area for direct access to full text journal articles.

READ

You can access articles yourself or we can email them to you – books are available for loan across Australia. If you would like us to purchase a book that would help you with your study let us know.

Addiction research methods. Edited by Peter G. Miller, John Strang, 2010.

The book provides a clear, comprehensive and practical guide to research design, methods and analysis within the context of the field of alcohol and other drugs. The reader is introduced to fundamental principles and key issues; and is orientated to available sources of information and key literature.

Critical reading: making sense of research papers in life sciences and medicine. Ben Yudkin, 2006.

Readers who accept scientific papers uncritically may misunderstand results, misinterpret the experimental significance of techniques, over or underestimate the importance of findings and waste time and resources on flawed or unnecessary experiments. Critical Reading is aimed at everyone who needs to read original research papers.

Essential epidemiology: an introduction for students and health professionals. Penny Webb, Chris Bain and Sandi Pirozzo, 2005.

A clear and practical introduction to epidemiology for students in all areas of health, new edition on its way.

Judging the research: tools for best practice. Petra Bywood, *Of Substance*: 4 (3) July 2006

Research: making a start. Jane Shelling, *Of Substance*: 7 (3) July 2009

Tips and Tricks for New Players SURVEY

The third edition of *Tips and Tricks* has been distributed (but let us know if you would like a copy).

The NDSIS is now looking for feedback to improve future editions. To help us please take a minute (yes it's that short) to fill out this quick survey or email us your comments ndsis@adca.org.au

www.surveymonkey.com/s/8CRJGMB

EDITORIAL – Focus on Viral Hepatitis and Ageing for Older Opioid Users

Continued from page 2

Since patterns of drug use tend to be fluid rather than fixed, the evidence suggests that these categories are not mutually exclusive and many of the latter group will experience periods of regular and/or dependent use, just as dependent drug users may have periods of non use and/or periods on pharmacotherapy.

Although the size of this group is questionable, the existence of a cohort of older opioid users is not. Equally indisputable are the specific needs of older opioid users and their sense of unmet need.

Respondents interviewed for the "AIVL Study of Older Opioid Injectors 2010" raised a wide range of issues and concerns. Health figured high on the list of respondents' priorities as well as financial and employment issues and family matters. Most identified poverty, unstable housing and future hopelessness as key issues.

In keeping with drug users in general, older opioid users report considerable difficulty when attempting to access health and welfare services – many present as severely disadvantaged in relation to the social determinants of health and suffer from numerous health conditions which are of no concern to non-users of similar age.

Despite the similar experiences of discrimination reported by other groups of drug users including younger people who inject drugs, the older drug users interviewed for this study reported a greater degree of discrimination or experienced it more intensely. It would seem that older injecting drug users are considered beyond help and redemption due to their advanced age. As a result they are judged even more harshly than their younger counterparts who, according to popular thinking, may yet 'see the light' and move away from illicit drug use.

AIVL conceived of this Discussion Paper as an initial investigation into the issue of ageing in relation to illicit opioid injecting, in response to an identified need within drug user

networks. It is in no way the definitive word on the issue and in many ways it asks as many questions as it answers.

However, AIVL trusts that the discussion paper will open the door and encourage further interest and inquiry into this emerging issue in Australia.

CONCLUSION

AIVL trusts that this Discussion Paper will stimulate further debate and help to draw attention to the issue of ageing in conjunction with opioid injecting. The survival of larger numbers of opioid injectors into older age has already changed the composition of the drug using community and will continue to do so well into the future.

However, it remains to be seen what the full implication of these changes will be and how they will impact on the drug using community and society as a whole.

To download a full version of "*Double Jeopardy: Older Injecting Opioid Users In Australia*" visit the AIVL website at www.aivl.org.au where you can also watch and download a video of the AIVL "*Hepatitis and Older Opioid Users*" Forum.

Other materials from the forum including the special edition of the AIVL Research and Policy Update with summaries of the keynote presentations from the Forum, and AIVL's national media release "*Older Injecting Drug Users – We're Alive, But Will We Survive*" can also be accessed from the site.

Further information on AIVL's other publications and activities can also be found at www.aivl.org.au or by calling the AIVL office on 02 6279 1600.



ADCA News is the member newsletter of the Alcohol and other Drugs Council of Australia (ADCA) and is published five times a year.

The views expressed by contributors to ADCA News are not necessarily those of ADCA. All URLs were correct at the time of printing. While contributions are welcome, final content is at the discretion of the Editor.

Editor: Brian Flanagan, Manager ADCA Strategic Communications and Policy, brian.flanagan@adca.org.au

Design: Kylie Smith Design

Copyright © 2011 ADCA and its licensors. All rights reserved.

Print Post Approved 248831/0003

ISSN 1446-8573



ADCA office contact details:

PO Box 269 Woden ACT 2606

1st Floor 17 Napier Close Deakin ACT 2600

Tel: 02 6215 9800 Fax: 02 6281 0995

Email: adca@adca.org.au

Web: www.adca.org.au