2020 – 2021 SNAPSHOT

120 MEMBERS
MARC’S MEMBERSHIP HAS GROWN TO 120 ACADEMICS FROM ACROSS MONASH MAKING IT ONE OF THE LARGEST ADDICTION RESEARCH CENTRES IN THE WORLD.

198 PUBLICATIONS
OUR MEMBERS PUBLISHED 198 PEER-REVIEWED JOURNAL ARTICLES IN THE FIELD OF ADDICTION, WITH 69% PUBLISHED IN Q1 JOURNALS.

$9.1M
OUR MEMBERS RECEIVED OVER $9.1M IN FUNDING TO COMPLETE ADDICTION BASED RESEARCH.

124 MEDIA MENTIONS
MARC RESEARCHERS APPEARED IN THE MEDIA MORE THAN 120 TIMES, INCLUDING ACROSS RADIO, TV, ONLINE & PRINT MEDIA.

2 SCHOLARSHIPS
WE AWARDED TWO MARC CENTRE FOR MEDICINE USE AND SAFETY (CMUS) COLLABORATIVE PHD SCHOLARSHIPS.

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ABOUT US

The Monash Addiction Research Centre (MARC) brings together world-leading expertise from across Monash University and the sector to provide solutions to the challenges of addiction.

We have 120 academic members across 30 departments in six faculties and two institutes, making us one of the largest addiction centres in the world.

Our mission is to provide national thought leadership, education, and research excellence to develop, deliver and evaluate effective policy and practice approaches for addiction.

USING DATA FOR IMPACT
We generate and leverage multiple unique datasets, and provide timely and accessible insights to drive policy and practice change.

TRANSFORMING PRACTICE
We work to transform practice through co-designing, trialling and implementing novel evidence-based approaches. We work with community partners in the Frankston-Mornington Peninsula, those with lived experience of addiction, and other key stakeholders to develop local solutions that can be scaled nationally.

CHANGING THE CONVERSATION
We directly address stigma and community perceptions of addiction by bringing together multiple perspectives, including lived experience, through thought leadership, expert commentary and evidence dissemination.

ENABLING THE WORKFORCE
We build the expertise of individuals working in addiction and other frontline workforces, and the capacity of the treatment sector more broadly. We achieve this through development and delivery of short courses, embedded addiction curricula and work-integrated learning opportunities. We work with government partners to deliver effective reforms in addiction and mental health care.

OUR AIM

MARC is dedicated to finding solutions that transform the way we think about and respond to addiction.

visit us at: monash.edu/medicine/ehcs/marc
We are pleased to present the Monash Addiction Research Centre’s Annual Report for 2020-2021.

Despite another challenging year due to the impacts of COVID-19 and ongoing lockdowns, MARC has continued to forge ahead with its activities and initiatives aimed at strengthening the reputation of the Centre, and building opportunities for PhD students and early to mid-career researchers within MARC.

Our members have had another successful year, securing more than $9M in research funding and publishing over 198 peer-reviewed articles. This success continues to demonstrate the enormous impact our members are making in the field of addiction, and the importance of interdisciplinary collaboration in finding solutions to the challenges of addiction.

Since August last year, we have delivered ten webinars as part of our interdisciplinary webinar series, attracting over 2000 registrations in total. The series brings together addiction researchers, clinicians and other experts to discuss emerging research and challenges in the addiction field, with 25 of our members participating in the webinars and presenting their research.

We have also continued to offer professional development opportunities for our EMCRs, delivering online workshops covering social media, data linkage, productive writing techniques and science communication. In July this year, we established the MARC PhD network, which brings together Monash PhD students from various disciplines, departments and faculties interested in or currently undertaking addiction-related research. The network connects students researching similar areas, encourages collaboration, promotes students’ work, and provides opportunities to participate in addiction-related research events and networking opportunities.

Over the past 12 months, the Centre has been actively involved in several submissions and inquiries, including the Royal Commission into Victoria’s Mental Health System, the Inquiry into the Use of Cannabis in Victoria, the Australian Commission on Safety and Quality in Health Care - National Opioid Analgesic Stewardship Program, and the Public Consultation for the Post-market Review of Opiate Dependence Treatment Program Medicines. The recommendations made to these inquiries and programs are informed by the collaborative work of the Centre and are part of our ongoing policy and advocacy work.

On behalf of MARC, we would like to thank our advisory board, our members, research partners and the community for their ongoing support and contribution to the Centre and we look forward to seeing everyone in 2022.

A MESSAGE FROM THE DIRECTORS

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PROFESSOR DAV LUBMAN
Director

ASSOCIATE PROFESSOR SUZANNE NIELSEN
Deputy Director
In January this year, MARC Director, Professor Dan Lubman, was appointed a Member of the Order of Australia (AM) in the Australia Day Honours List for his significant service to medical education, research, treatment and policy in the field of addiction. Dan received his official AM at an Investiture Ceremony held at Government House in April 2021.

Reflecting on his appointment Dan said he was thrilled and humbled to be recognised in this way, and the acknowledgement was a reflection of how perceptions of addiction are changing.

“Addiction remains the most stigmatised health condition, but to be honoured in this way recognises the importance of addressing a public health issue that costs Australia and Australian families so much. I’m just delighted that our continued efforts to improve health outcomes for Australians affected by addiction have been recognised in this way.”
MARC Theme Leaders

MARC’s theme leader group takes on the collective responsibility for informing the strategic direction of the Monash Addiction Research Centre (MARC) and sharing information relating to MARC activities and opportunities. Theme leaders represent each of the three research themes within MARC, acting as a conduit for information between MARC and the departments and faculties in which they are based.

Science

- **Professor Antonio Verdejo-Garcia**
  Turner Institute for Brain and Mental Health
- **Professor Paul Deterre**
  Burnet Institute
- **Associate Professor Debbie Scott**
  Turning Point
- **Professor Philip Mendis**
  Department of Social Work
- **Dr. Laura Alfrey**
  School of Curriculum Teaching & Inclusive Education
- **Dr. Jennifer Schumann**
  Department of Forensic Medicine
- **Dr. Jenni Iломаки**
  Centre for Medicine Use Safety
- **Dr. Katharina Voigt**
  Turner Institute for Brain and Mental Health

Prevention and Treatment

- **Professor Paul Deterre**
  Burnet Institute
- **Dr. Liz Sturgess**
  Department of Social Work
- **Associate Professor Sonja de New**
  Centre for Health Economics
- **Dr. Rowan Ogil**
  Turning Point
- **Dr. Michael Sawic**
  Turning Point
- **Dr. Tina Lam**
  Monash Addiction Research Centre
- **Dr. Fraser Tull**
  BehaviourWorks

Culture and Policy

- **Professor Antonio Verdejo-Garcia**
  Turner Institute for Brain and Mental Health
- **Dr. Jennifer Schumann**
  Department of Forensic Medicine
- **Dr. Katharina Voigt**
  Turner Institute for Brain and Mental Health
- **Dr. Liz Sturgess**
  Department of General Practice
- **Dr. Katharina Voigt**
  Turner Institute for Brain and Mental Health
- **Dr. Jenni Iломаки**
  Centre for Medicine Use Safety
- **Professor Aron Shlonsky**
  Department of Social Work
- **Associate Professor Victoria Manning**
  Centre for Health Economics

Early to Mid-Career Researcher Committee

The Centre formed an Early to Mid-Career Researcher (EMCR) sub-committee to support EMCR’s, including PhD students, by offering professional support and developmental opportunities. The EMCR committee organises and attends quarterly networking events, workshops and other professional development opportunities. Our EMCR committee representatives for 2020/2021 are:

- **Associate Professor Suzanne Nielsen**
  Monash Addiction Research Centre
- **Dr. Tina Lam**
  Monash Addiction Research Centre
- **Dr. Rowan Ogil**
  Turning Point
- **Dr. Liz Sturgess**
  Department of General Practice
- **Dr. Katharina Voigt**
  Turner Institute for Brain and Mental Health
- **Dr. Jenni Iломаки**
  Centre for Medicine Use Safety
MARC ADVISORY BOARD

MARC’s external Advisory Board comprises representatives from a broad range of key stakeholders and partners who bring together a wealth of leadership and expertise. The board assists MARC in its mission to provide national solutions to the problems of addiction by increasing the visibility of the Centre across the community and supporting the work of our members.

Chair

Mietta Gibson has a commerce degree from Deakin University and has had a successful career in Human Resources for companies such as Daimler, Fiat Chrysler, World Vision and MYOB. In recent years, Mietta has been working as a consultant along with leaders and teams at a variety of organisations to create positive and inspiring workplaces.

Ms Gibson has been fortunate to have been involved with the Gibson Family foundation, a small foundation interested in creating impact in areas such as mental health. She coordinated support from the foundation to Turning Point and MARC to create video stories documenting the lived experience of people with addiction.

Being chair of the MARC Advisory Board is a great opportunity for Mietta to combine her professional experience, her lived experience of having a family member with addiction and mental health issues, and to represent her Mornington Peninsula community.

MIETTA GIBSON
Chair

Board Members

BETH ALLEN
Acting Director, Children & Families Policy Branch, Children and Families Division, Victorian Department of Health and Human Services

SAM BIONDI
Executive Officer, Victorian Alcohol and Drugs Association

ADJUNCT ASSOCIATE PROFESSOR CHRISTOPHER CARTER CEG, North Western Melbourne Primary Health Network (NWMPHN)

PROFESSOR DAVID COPOLON AO
Pro Vice-Chancellor (Major Campuses and Student Engagement), Monash University

PROFESSOR KIM CORNISH
(SIR JOHN MONASH DISTINGUISHED PROFESSOR) Director, Turner Institute for Brain and Mental Health

ASSOCIATE PROFESSOR TONY WALKER
CEO, Ambulance Victoria

AC GLENN WEIR
Assistant Commissioner, Eastern Region, Victoria Police

MELISSA ARDICA
Director, Alcohol and Other Drugs Policy, Victorian Department of Health and Human Services

ELIZABETH DEVENY
CEO, South Eastern Melbourne Primary Health Network (SEMPHN)

ROD MACKINTOSH
Executive Officer, Frankston Mornington Peninsula Primary Care Partnership

DR ALISON DNYER
Executive Director, Research (Chief Medical Officer), Eastern Health

DICK GROSS
Councillor, City of Port Phillip

HEATHER PICKARD
CEO, Self Help Addiction Resource Centre

FELICITY TOPP
CEO, Peninsula Health
MARC researchers have been awarded more than $9 million in research funding to conduct research relating to addiction, substance use and related behaviours. The below examples of funding success demonstrate the strength of interdisciplinary collaboration amongst our members.

**FUNDING SUCCESS**

### SWiPE away the booze - a novel brain-training smartphone app to reduce alcohol consumption

**Investigators:** A/Prof Victoria Manning, Prof Dan Lubman, Dr Joshua Garfield, and Mr Hugh Piercy.

Eighteen percent of Australians aged 18 and over drink at hazardous levels, whilst one in five will experience an alcohol use disorder. Exposure to alcohol-related cues (such as images, sounds and advertisements featuring alcohol) is known to induce cravings which can lead to further alcohol use. This poses a particular challenge for individuals trying to cut-down or abstain, as alcohol-related cues are largely unavoidable in Australian society. These alcohol-related cues can subconsciously capture our attention and motivate us to seek, and subsequently consume alcohol, and this tendency is called a ‘Cognitive Bias’.

Research shows that a form of computerised ‘brain-training’ called Cognitive Bias Modification (CBM) can reduce these impulses and reduce the likelihood of alcohol consumption after just four 15-minute training sessions. However, this intervention is currently only offered in face-to-face treatment, and so is inaccessible to the thousands of Australians who choose not to, or are unable to access face-to-face treatment.

To address this gap, Turning Point researchers developed “SWiPE”, a new smartphone app which aims to deliver personalised-CBM freely to users across Australia, regardless of time or place. The open-label pilot study recruited 500 people who wanted to reduce their drinking, to study whether SWiPE was feasible, acceptable to users, and whether it helped people drink less alcohol and on fewer days. Participants completed at least two sessions of CBM each week for four weeks by repeatedly ‘swiping away’ pictures of specific alcoholic beverages they wanted to avoid drinking, and swiping images towards themselves that represented positive alternative activities they wanted to engage in more frequently (e.g., hobbies, recreational activities, friends, family, pets, etc.).

The development of a personalised, smartphone-delivered CBM app is a world-first and holds the potential to offer a convenient, anonymous and readily available tool to help reduce alcohol cravings and consumption at times when individuals need it most. This project is funded by the Australian Research Council (ARC) under the Special Research Initiative for Australian Society, History and Culture.

### Alcohol consumption practices during COVID-19

**Investigators:** Dr Michael Sasic, A/Prof Steven Roberts, Dr Karla Elliott, Dr Brady Robards, Dr Rodney Gayer, Dr Tristan Duncan, Lily Curtis.

Environmental, health and financial crises faced by countries like Australia are anticipated to grow. In addition to health effects, crises, such as the global coronavirus pandemic (COVID-19), can transform common social and cultural practices like alcohol consumption.

Important measures to prevent the transmission of COVID-19, like physical distancing and self-isolation, have had profound implications for people’s ability to meet socially, and for employment, care, and mental health. The potential impacts of the pandemic raise questions of pressing national and international significance about likely changes in how, why, and where people consume alcohol.

Research conducted to date has measured changes in alcohol consumption rates and harms during the COVID-19 pandemic. Building on this useful work, the current project will take an in-depth look at alcohol consumption practices in Australia and will share insights about the social and cultural impacts of the pandemic by providing practical recommendations that will contribute to new and improved policy responses during and beyond the crisis.

The team of Monash University, Turning Point and La Trobe University researchers will use qualitative research methods, including analysing participants’ social media timelines, to understand meanings and practices of alcohol consumption during the pandemic and as restrictions have eased.

This project is funded by the Australian Research Council (ARC) under the Special Research Initiative for Australian Society, History and Culture.

### Enabling evidence-informed policy to address Australia’s opioid crisis

**Investigators:** A/Prof Suzanne Nielsen, Prof Simon Bell, Prof Grant Russell, Samantha Lalic, Paul Santilippo, Dr Georgia Richards, Prof Dan Lubman.

Australia has seen a near doubling of opioid-related mortality in the past decade. Three Australians die every day from opioids and most of these deaths are linked to prescription opioids. Recently, a range of state and national policy changes have been made to address the growing number of opioid-related deaths.

There is little evidence to know if and how these policy levers work. From international research we know that commonly implemented opioid policy interventions can be ineffective, or worse, can cause harm, yet we have limited Australian data to understand outcomes. This knowledge gap must be bridged to know if policy changes will address or worsen Australia’s looming opioid crisis. This project will generate high-quality Australian-specific evidence to address these gaps using the internationally unique Population Level Analyses and Reporting tool (POLAR) primary care dataset linked in near-real time to hospital outcome data to quickly understand policy impact.

The project aims to determine the effect of policy change on: (i) opioid prescribing; (ii) opioid-related harm; and (iii) harms from other substances’ transition to illicit opioid use.

The project will link primary care and hospital data to examine the impacts of these policy changes on opioid prescribing, opioid-related harm, and other unintended harm following key policy changes to provide policy makers and clinicians with timely evidence of the impact of opioid-related policy on prescribing and harms. The project represents a collaboration between MARC, the Centre for Medicine Use and Safety and the Monash University Department of General Practice.

This project is funded by a National Health and Medical Research Council (NHMRC) Ideas Grant.
National Ambulance Surveillance System - Alcohol and Other Drugs

Investigators: Prof Dan Lubman, A/Prof Debbie Scott, Dr Rowan Ogeil.

Turning Point provides the Australian Institute of Health Welfare (AIHW) with comprehensive and timely data on AOD-related harms in the Australian population. Clinical records from state and territory-based ambulance services are provided to Turning Point in an electronic format.

A team of specially trained research assistants scrutinise and code each record, capturing the information in a purpose-built, internationally unique database. The research assistants have on-going coding training, and coding audits are performed routinely to ensure inter- and intra-coder reliability.

The data captures more than 140 variables including information on patient demographics, scene details (e.g. date of attendance, time of attendance, police co-attendance, GPS coordinates where available, postcodes), patient physical condition (vital signs, patient outcome (e.g. transported to hospital), 13 illicit drugs, 82 pharmaceutical medications, other substances (including alcohol or inhalants) and intent. This data forms the basis of a novel surveillance system that identifies AOD related harms, and is subsequently used to inform policy and interventions.

This project is funded by the Australian Institute of Health and Welfare (AIHW).


MMP-1: MDMA-assisted Psychotherapy for Post-Traumatic Stress Disorder

Investigators: Dr Paul Likoakosky, Prof Surend Sundram, Prof Murat Yucel (2020-2023).

Post-Traumatic Stress Disorder (PTSD) is a debilitating condition linked to substantial distress, low quality of life, and increased suicidality, with a lifetime prevalence of about 12% in Australia. Given the chronicity of PTSD, high rates of treatment dropout, and limited recovery with current medications, a large proportion of PTSD patients do not have adequate treatment options. The combined neurobiological effects of 3,4-methylenedioxymethamphetamine (MDMA) induce feelings of trust, positive mood, and elevated psychotherapeutic engagement can provide optimal conditions for conducting interventions that may otherwise prove too overwhelming for individuals suffering from trauma. MDMA in combination with psychotherapy has been shown to be safe and highly effective for treating intractable PTSD.

This open-label trial with 25 participants will examine the safety and efficacy of MDMA-assisted psychotherapy for treating PTSD in an Australian cohort, alongside innovations in assessing treatment mechanism and response prediction. Participants will undergo three MDMA-sessions embedded within a defined program of psychotherapy. Led by the Clinical Psychopharmacological Research Lab within the Department of Psychiatry and the Turner Institute, this trial will be conducted at BrainPark, a state-of-the-art research facility at Monash University.

This project is funded by the National Centre for Healthy Ageing - Living Labs Program.

Determining the impacts of COVID-19 restrictions on people who use drugs

Investigators: Prof Paul Diceto, Prof Lisa Maher, Prof Matthew Hickman, A/Prof Joseph Doyle, Prof Mark Stone, A/Prof Bernadette Wani, Dr Keith Sutton, Dr Anna Wilkenson, Dr Brendan Quin.

Most published work on the impacts of COVID-19 on patterns of drug use relies on information collected from cross-sectional studies of convenience samples of people who use drugs. In this study we take advantage of the SuperMIX and VMAX cohort studies of people who inject drugs and people who smoke methamphetamine, both of which recruited samples before the COVID-19 pandemic, to determine the impacts of COVID-19 on patterns of drug use and harm in Victoria.

We are also sampling key cohort members who have experienced impacts of lockdowns and associated restrictions for in-depth qualitative interviews about the effects of these restrictions on their lives. Preliminary analyses show major impacts on drug prices that correspond with reductions in use during the extended lockdown in Melbourne in 2020.

This project is funded by the National Health and Medical Research Council (NHMRC).
Below are some highlights of the addiction-related research completed by our members in the 2020/2021 year.

Development of Goal Management Training+ (GMT+) for methamphetamine use disorder through collaborative design

Investigators: Alexandra Anderson, Alex Robinson, Eden Potter, Bronte Kerley, Prof Daphne Flynn, Prof Dan Lubman, Prof Antonio Verdejo-Garcia.

Current gold-standard behavioural treatments for stimulant use disorders do not address executive dysfunctions that are associated with poorer treatment outcomes, and have limited acceptability and efficacy. This project, led by MARC member Antonio Verdejo-Garcia, employed a collaborative design approach to tailor Goal Management Training (GMT), a cognitive remediation program originally designed for brain injury, for methamphetamine use disorder (MUD). We collaborated with consumers living with MUD, clinical service providers, and design researchers in healthcare.

The end product, GMT+, is a four-week group-based program that targets four underlying cognitive processes, including attention, impulse control, goal setting, and decision-making. It includes reimagined design and materials, is sensitive to the clinical needs of consumers, and has evidence of initial consumer acceptability. We are currently conducting a pilot trial to assess the feasibility and efficacy of GMT+ at improving executive functions and clinical outcomes during residential treatment for MUD.

This project was funded by the National Centre for Clinical Research on Emerging Drugs (NCCRED) and the Monash Addiction Research Centre (MARC).


Understanding the rates and characteristics of Victorian emergency department attendances for commonly used pharmaceutical opioids

We compared harms across the nine individual pharmaceutical opioids most commonly sold and found there were up to 27 fold, between supply-adjusted rates of overdose. The highest supply-adjusted overdose rates were for codeine and oxycodeone and the lowest were for tapentadol and fentanyl. These rates appeared related to availability rather than opioid potency. We found variations in presentation characteristics such as self-harm and severity of presentation by gender and age.

In summary, we found that in Victoria, rates and characteristics of emergency department presentations for pharmaceutical opioids show distinct variations by opioid type.

This study was funded by an untied educational grant from Seqirus (CSL).


A randomised controlled trial of Cognitive Bias Modification training during early recovery from alcohol dependence

Investigators: A/Prof Victoria Manning, Prof Antonio Verdejo-Garcia, Prof Dan Lubman, Dr Petra Staiger, Dr Kate Hall (2017-2020).

This cognitive bias modification (CBM) research project aimed to test whether four short sessions of “brain-training”, using a laptop and joystick and delivered while clients are using a computer, can reduce alcohol use after discharge from treatment. The majority of people relapse to alcohol use after leaving withdrawal treatment, usually within a few weeks. One potential reason for this is that many people with an alcohol use disorder appear to develop “approach bias” towards alcohol, meaning an automatic tendency to approach alcohol in response to signals (such as images, smells, etc.) that remind them of alcohol. This “approach bias” might not be fully under one’s conscious control.

Our randomised controlled trial (RCT) compared a computerised CBM training task designed to dampen approach bias to another similar task that used the same images and equipment, but which was not specifically designed to change approach bias, to see whether the CBM task leads to higher rates of abstinence from alcohol after people leave residential withdrawal treatment. We recruited 300 participants from four residential withdrawal units around Melbourne from 2017-2019. We followed-up participants two weeks, three months, six months, and one year after they left withdrawal treatment. This project was funded by the National Health and Medical Research Council (NHMRC).


The R2C Program: A randomised controlled trial of a telephone-based intervention for alcohol misuse

Investigators: Prof Dan Lubman, Prof Amanda Baker, Prof Petra Staiger, Prof David Best, A/Prof Victoria Manning, Dr Kate Hall, A/Prof John Reynolds, Prof Anthony Harris, Dr Jasmin Grigg.

Alcohol use and related harm is a significant issue for many Australians. However, few people seek help from traditional alcohol and other drug treatment services due to concerns about privacy, experiences of shame and stigma, time constraints (e.g., due to work or child care responsibilities), or thinking the problem isn’t serious enough to warrant conventional treatment. Many barriers to seeking help for alcohol use problems can be overcome through treatment programs that are delivered by telephone. These programs provide confidential support, at times convenient to the individual, and can be accessed from anywhere in Australia, though research evidence is limited to services delivering support to aid smoking cessation. This trial aimed to determine the efficacy of the Ready2Change (R2C) telephone-delivered intervention in reducing alcohol problem severity among a community sample of individuals with alcohol use problems.

In this double-blind RCT, 344 participants identified as experiencing alcohol problems in the community were randomly assigned to receive R2C or another brief intervention (i.e. minimal input control group), with follow-ups assessing alcohol use, psychological and social health assessed post-intervention, 3, 6 and 12 months later.

The outcomes of this project are expected to make a significant contribution to the health and well-being of Australians who are otherwise unlikely to seek treatment from traditional alcohol and other drug treatment services, as well as generate substantial cost savings for the health system and broader community.

This project was funded by the National Health and Medical Research Council (NHMRC).


Women’s Voice: A platform for meaningful consumer representation in addiction treatment for women at risk of homelessness

Investigators: Dr Shalini Arunogiri, Ms Davinia Rizzo

Women’s Voice is a consumer-focused project, aiming to understand the perspectives of women with a lived experience of addiction and homelessness, and their experiences in accessing addiction treatment. The project was conducted between 2019-2021 and involved focus groups and stakeholder interviews with consumers and key service providers across Melbourne. The project also utilised live scribing to develop a graphic record of the main themes expressed by consumers in qualitative focus groups. The project provided insights into how to develop a useful and meaningful platform for consumer feedback for women living with addiction and homelessness.

This project was funded by the Victorian Women’s Trust - Jean McCaughey Social Justice Sub Fund.


Investigating influence: an analysis of Australian ‘dangerous consumption’ research funding and outcomes

Investigators: A/Prof Charles Livingstone, Maggie Johnson, Cassandra de Lacy-Valdon.

This project investigated the extent to which significant gambling industry actors are also major political donors. There are serious deficiencies in the Australian system of recording and reporting Australian political donations and donors, particularly at the Federal level. Thus, voters rarely have the opportunity to know what entities or interests have donated to political parties until at least 18 months after donations have been made. Further, donations below a high threshold (currently over $14,500) do not have to be disclosed.

This project examined available records to compile a list of donations and presented case studies identifying specific instances of close political engagement by gambling industry actors, together with some temporal correlation of political decisions. This project has been running for some time as a continuing research project of significant public interest under the broad banner of ‘Gambling industry influence’.


The MonCOG Project: Validating a neurocognitive framework for addictive behaviours

Investigators: Prof Murat Yucel, Dr Rico Lee, Dr Sam Chamberlain.

The cognitive neuroscience of addictive behaviours has been hampered by a convoluted landscape of neurocognitive functions and definitions, as well as a predominant focus on cross-sectional convenience sampling. This NHMRC project grant-funded study recruited a large, population-representative Australian sample (N=1,000) to shed light on the unique and shared contributions of a range of NIMH-RDoC constructs to addiction-related outcomes. A further MRFF investigator grant funded the follow-up of a subset of young adults aged 18-34 re-assessed prospectively over six months to allow for modelling of temporal relationships. Sophisticated structural equation modeling and machine learning techniques will be utilised to derive a more accurate understanding of how we can best measure neurocognition and how these constructs are mechanistically linked to addiction-related outcomes in the general community. Data collected from these studies will also contribute to a living, normative database sitting behind a purpose-built digital assessment tool at BrainPark.

This project is jointly funded by the National Health and Medical Research Council (NHMRC) and the Medical Research Future Fund (MRFF).


The politics of the Medically Supervised Injecting Room debate

Investigator: Prof. Philip Mendes

This project analysed the political and ideological factors impacting on the supervised injecting facility debate in Victoria, including the role of political parties, the views of the media, the perspectives of local community groups, and the impact of other supportive and critical stakeholders.

It seems that policy agendas and outcomes have been influenced by a range of factors including philosophical contests between prohibitionist and harm reduction philosophy, varied beliefs in the value of research evidence, a mixture of political expediency, populism and principled politics, and the influence of local community advocacy campaigns.

As experts in their field, MARC members regularly contribute thought leadership pieces for the leading publisher of research-based news and analysis, The Conversation, and Monash University’s thought leadership platform, Lens.

Opioids continue to be the leading cause of overdose deaths in Australia. What else can we do? - The Conversation

Dr Amanda Roxburgh, Prof Paul Dietze, A/Prof Suzanne Nielsen

Opioid-related deaths in Australia have been on an upward trend in recent years, having doubled since 2006. Most opioid deaths in Australia involve pharmaceutical opioids, though heroin deaths have increased over the past five years. Among all opioid deaths, just over half of people overdosing have a history of injecting drugs and substance use problems. However, a large driver of increasing opioid deaths here and internationally has been the increase in prescribing and use of pharmaceutical opioids. Australia has introduced a range of strategies to manage and restrict supply, and one key response has been to provide opioid against treatment. Yet because of barriers to treatment, only around half take up this treatment. MARC’s Dr Amanda Roxburgh, A/Prof Suzanne Nielsen and Prof Paul Dietze say we need to double treatment capacity to meet the demand for people who may benefit from opioid against treatment. Read more

A mental disorder, not a personal failure: why now is the time for Australia to rethink addiction - The Conversation

Prof Dan Lubman AM

In simple terms, addiction is the inability to stop consuming a drug or cease an activity, even if it is causing physical or psychological harm. A common misconception is that addiction is the result of a lack of willpower or poor self-control. But in reality, it is a complex health disorder with a range of biological, developmental and environmental risk factors, including trauma, social isolation or exclusion, and genetics. Around one in four Australians will develop a mental health disorder. The Royal Commission into Victoria’s Mental Health System adopted recommendations to implement youth mental health hubs, some of which will soon be rolled out in priority areas across the state. Youth mental health hubs provide mental health and social services in one location and have a range of specialists on site, such as trained mental health clinicians, sexual health support counselors and psychiatrists. The hubs are co-designed by experts and youth with lived experience, on equal grounds, and are a youth friendly, one-stop-shop for support ranging from referrals, assessment, therapies and intervention. Dr Christine Grove says that while having all services in one location works well, it doesn’t necessarily mean a coordinated, collaborative approach to care is provided. If we are to ensure more young people access the care they need, greater investment is needed to improve existing hubs or co-design new ones. Read more

Will Australia legalise ecstasy and magic mushrooms to treat mental illness? Here’s why it’s still too soon - The Conversation

Dr Martin Williams

The Therapeutic Goods Administration (TGA) evaluates a range of proposals around the provision of medical treatments in Australia, one of which is the decision to allow psychiatrists to prescribe MDMA and psilocybin to treat mental illness. The TGA has deferred its final decision to down-schedule MDMA and psilocybin to a schedule B (controlled drug) pending a review into the therapeutic value, risks and benefits to public health outcomes for these substances, however psychedelic drugs for the treatment of mental illness does represent a promising area and any new treatment which could help people suffering. According to Dr Martin Williams, until Australia engages in further research into the therapeutic potential of these drugs, it is too soon to make them available as medicines. Read more

Read more thought leadership pieces from MARC members below.

People who use drugs face unique challenges under hard lockdown. The government’s support is vital - The Conversation

A/Prof Suzanne Nielsen

The uncomfortable truth about drug overdose and suicide - Monash Lens

Prof Dan Lubman, A/Prof Suzanne Nielsen, A/Prof Debbie Scott

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Responsible gambling – a bright shining lie Crown Resorts and others can no longer hide behind - The Conversation

A/Prof Charles Livingstone

Therapeutic potential of MDMA and psilocybin

Dr Martin Williams

The Therapeutic Goods Administration (TGA) evaluates a range of proposals around the provision of medical treatments in Australia, one of which is the decision to allow psychiatrists to prescribe MDMA and psilocybin to treat mental illness. The TGA has deferred its final decision to down-schedule MDMA and psilocybin to a schedule B (controlled drug) pending a review into the therapeutic value, risks and benefits to public health outcomes for these substances, however psychedelic drugs for the treatment of mental illness does represent a promising area and any new treatment which could help people suffering. According to Dr Martin Williams, until Australia engages in further research into the therapeutic potential of these drugs, it is too soon to make them available as medicines. Read more

Read more thought leadership pieces from MARC members below.

People who use drugs face unique challenges under hard lockdown. The government’s support is vital - The Conversation

A/Prof Suzanne Nielsen

The uncomfortable truth about drug overdose and suicide - Monash Lens

Prof Dan Lubman, A/Prof Suzanne Nielsen, A/Prof Debbie Scott

How a simple brain training program could help you stay away from alcohol - The Conversation

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Reassessing the social context of illicit drug use and addiction - Monash Lens

Prof Philip Mendes

In Australia, a survey conducted at Sydney’s King’s Cross injecting facility reported 98 percent of regular users had a history of trauma, with users often seeing drug use as a solution to deep-seated social, economic, and emotional problems. Research led by Professor Philip Mendes found problematic substance use is particularly apparent in two disadvantaged population groups: young people transitioning from out-of-home care; and Australians of working age on unemployment payments, with the latter being subject to conditional welfare such as compulsory income management. Despite key assumptions by government that income management programs will reduce forms of individual and community harm associated with alcohol and other (AOD) use, Professor Mendes’ study highlights that IM doesn’t address the underlying social, psychological and medical causes of AOD use, or the many complex factors involved in pathways to addiction management or abstention. While structural solutions to illicit drug use may offer some answers, addressing the underlying emotional or psychological affliction that leads to drug dependence is crucial. Read more

Youth anxiety and depression are at record levels. Mental health hubs could be the answer - The Conversation

Dr Christine Grove

In response to the ongoing decline in young people’s mental health and the growing number of young people presenting at emergency rooms due to a lack of other treatment options, the Royal Commission into Victoria’s Mental Health System adopted recommendations to implement youth mental health hubs, some of which will soon be rolled out in priority areas across the state. Youth mental health hubs provide mental health and social services in one location and have a range of specialists on site, such as trained mental health clinicians, sexual health support counselors and psychiatrists. The hubs are co-designed by experts and youth with lived experience, on equal grounds, and are a youth friendly, one-stop-shop for support ranging from referrals, assessment, therapies and intervention. Dr Christine Grove says that while having all services in one location works well, it doesn’t necessarily mean a coordinated, collaborative approach to care is provided. If we are to ensure more young people access the care they need, greater investment is needed to improve existing hubs or co-design new ones. Read more

The conversation around addiction and mental health is the time for Australia to rethink addiction - Monash Lens

The Conversation

Dr Martin Williams

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Building addiction research capacity

- Delivered 10 interdisciplinary webinars attracting over 2000 registrations.
- Delivered quarterly EMCR workshops, including social media, data linkage, productive writing techniques, and science communication.
- Established the MARC PhD network.
- Recruitment of a Research Fellow and two Research Officers

MARC interdisciplinary webinar series

Since August last year, MARC has delivered 10 webinars in its interdisciplinary series, showcasing 25 MARC researchers, one international guest speaker, and attracting over 2000 registrations. In addition, we established the Monash Addiction Research Centre YouTube channel which houses all of our webinars and provides audiences with ongoing access to the series. We have received several requests from external stakeholders to use the recordings as part of their professional development materials.

EMCR events

MARC has continued to offer professional development opportunities for our EMCRs, delivering four online workshops over the past 12 months covering social media, data linkage, productive writing techniques and science communication.

PhD network

The MARC PhD network brings together Monash PhD students from various disciplines, departments, and faculties interested in or currently undertaking addiction-related research. Chaired by Louisa Picco, and co-chaired by Helena Cangadis-Douglass and Monica Jung, the network connects students researching similar areas, encourages collaboration, promotes students’ work, and provides opportunities to participate in addiction-related research events, professional development, workshops, and networking opportunities.

Building our team

In July 2020, Dr Ali Cheetham joined MARC as Research Officer working on the ‘Enhancing Pharmacist Involvement in Care in Medically Assisted Treatment for Opioid Dependence’ (EPIC-MATOD). In May 2021, we welcomed Dr Leanne Francia as Research Officer working on the ‘Mapping the Alcohol and other Drug Patient Journey’ project, and Dr Ting Xia as Research Fellow working on the NHMRC-funded project using linked primary care and hospital data to examine the impact of changing opioid policy on opioid prescribing and opioid-related harms.

MARC PHD STUDENTS

The Monash Addiction Research Centre funds PhD scholarships, including top-up scholarships for students undertaking addiction research. Our current PhD funded students and top-up scholars are:

PhD Scholarships

Helena Cangadis-Douglass

‘Utilising routinely collected primary health care data to understand prescribing trajectories of opioids’

Monica Jung

‘Utilising primary health care data to understand and optimise prescribing of drugs of dependence’

PhD Top-up Scholars

Michael Curtis

‘Understanding the impact of opioid substitution therapy programs on drug use, health service utilisation, morbidity and mortality among young people who inject drugs following release from prison’

Louisa Picco

‘Implementation of prescription drug monitoring programs: Measuring the intended and unintended outcomes of identifying high-risk opioid use’

Dr Pallavi Prathivadi

‘Improving opioid prescribing in Australian general practice’

EHCS Scholarship Students

MARC welcomed three Eastern Health Clinical School Scholarship (EHCS) students; medical students Lucas Neumaier, Surina Butler and Rachel Nielsen. Lucas, Surina and Rachel worked on a systematic review project titled ‘Do we need tailored opioid prevention strategies for women?’ The project investigated whether the prevalence and characteristics of fatal and non-fatal opioid overdoses differ for women, and looked to identify subpopulations with an increased risk or unique needs. The project team also included A/Prof Suzanne Nielsen, Dr Tina Lam, Louisa Picco, Dr Leanne Francia, Dr Anna Olsen and Wai Chung Tse.
MARC submission to the Australian Commission on Safety and Quality in Health Care - National Opioid Analgesic Stewardship Program

In collaboration with Peninsula Health and the Centre for Medicine Use and Safety, MARC members made a submission to the Australian Commission on Safety and Quality in Health Care to inform the development of the National Opioid Analgesic Stewardship Program. The submission was informed by collaborative work between MARC and Peninsula Health on opioid stewardship and work by CMUS PhD Candidate Laura Dowd and Professor Simon Bell, who have looked at opioid stewardship in long-term care facilities.

The submission provided feedback on a discussion paper drafted to support public consultation on the use of opioid analgesics in emergency departments, perioperative and surgical services. The Commission is also interested in analgesics in emergency departments, perioperative and facilities.

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MARC welcomes all of the recommendations, including those that support improving outcomes for people living with mental illness and substance use or addiction. The recommendations are the provision for dedicated research, education and training, and a priority to increase the number of addiction specialists in Victoria.

MARC Director, Professor Dan Lubman, attended the sitting, saying: "It was wonderful to see the Government’s commitment to deliver on all of the recommendations outlined in the report, and it’s exciting for what can be achieved together moving forward.

MARC member, Dr Melissa Petrakis, was also in attendance in her capacity as Senior Lecturer, Department of Social Work and Tandem Board Chair, representing family members and carers across Victoria, having been an expert witness to the Commission last year.

Dr Petrakis noted: "It was important to hear both sides of parliament offer bipartisan commitment to invest in mental health. Their work is to not just fill in potholes but, as Royal Commission Chair Penny Armytage AM attested, to build a new road. A lived experience led design of that road is the next step for genuine reform."

MARC presents at the Inquiry into use of Cannabis in Victoria

In April 2021, Professor Dan Lubman AM and Dr Christine Grove presented the MARC and Turning Point joint submission to the Inquiry into the Use of Cannabis in Victoria.

At a public hearing of the Victorian Parliament’s Legal and Social Issues Committee, Professor Lubman and Dr Grove detailed how the submission’s recommendations would help improve health outcomes. Recommendations included the need to implement public health campaigns and school-based health education programs to ensure children, young people, and adults develop critical health literacy in relation to drug use and mental health, and build their help-seeking skills.

The submission also noted the negative impacts of criminalisation and emphasised the need for improved diversion programs that adopt a public health approach to cannabis use and keep people out of the criminal justice system.

Soothing light on gambling harms

The Royal Commission into the Casino Operator and Licence in Victoria has done much more than unearth the many wrongdoings of Crown Melbourne; it has presented an enormous opportunity to shed light on gambling harms.

Every day, an Australian struggling with their gambling dies by suicide. Inadequate statutory obligations, weak regulatory oversight, and a lack of services for people with gambling addiction, all contribute to this horrifying statistic.

The system is broken and in need of urgent reform.

Onus is wrongly placed on vulnerable people with gambling addiction to do what their condition prevents them from doing; that is to ‘gamble responsibly’. How does one ‘gamble responsibly’? The onus should instead be placed on gambling operators that at best, are failing to support, and at worst, are exploiting, vulnerable people with addiction.

In May 2021, the Monash Addiction Research Centre together with Turning Point made a joint submission to the Royal Commission. Among its many recommendations were calls to cap the number of machines in areas of socio-economic disadvantage; develop a quality and outcomes framework and optimal care pathways for gambling disorders; and a campaign that tackles stigma and normalises help-seeking for gambling addiction.

On October 26, the landmark final report from the Royal Commission into the Casino Operator and Licence was handed down. The Victorian Government’s swift introduction of legislation to appoint a Special Manager to oversee Crown’s rehabilitation and establish an adequately resourced and empowered Victorian Gambling and Casino Control Commission has been welcomed.

MARC Director, Prof Dan Lubman AM, says the legislation is an important first step in reforming a broken industry and protecting vulnerable Victorians experiencing gambling harms.

"Together we can build a gambling industry not based on the proceeds of crime or the exploitation of vulnerable people and give people struggling with gambling the help and support they need and deserve,” he said.

Read the submission here.
MARC has continued its strong media presence across various media platforms with our members regularly providing expert public commentary to mainstream media outlets including ABC News, ABC Radio, SBS News, The Guardian and The Age.

Radio, print and online media

**The Age - 30 June 2020**
Poker machines used to launder cash and avoid tax

**Mirage News - 9 July 2020**
Distress and pain key reasons for prescription opioid abuse

**Australian Pharmacy - 15 July 2020**
These are the reasons people misuse prescription opioids

**2GB - 23 July 2020**
Crown Casino’s plans to introduce EFTPOS machines at gambling tables

**ABC Radio National - 1 August 2020**
Wheelchair fitness, alcohol and sport

**AJP.com.au - 14 August 2020**
Prescription opioid: A needed discussion

**Nine News - 18 August 2020**
Australian casinos lost $14m each day during lockdown

**The wire - 31 August 2020**
Opioids the leading cause of overdose death in Australia

**ABC Radio Sydney - 12 October 2020**
The rise in profits for online gambling companies during the COVID-19 pandemic

**ABC News Radio - 19 October**
Crown Casino investigated over potential money laundering breaches

**SBS - 20 October 2020**
Ten Australians confront their addictions in a powerful new documentary series

**ABC Mid North Coast - 20 October 2020**
Professor Lubman explains the extent of gambling in Australia

**AJP.com.au - 21 October 2020**
Naloxone needed opioids and harm

**InSights - 26 October 2020**
Opioid prescribing: personalised approach is way forward

**The Guardian - 2 November 2020**
Addiction is a chronic health condition – why isn’t it treated like one?

**Australia Pharmacist - 4 November 2020**
Risk factors for long-term opioid misuse

**RRR Radiotherapy - 15 November 2020**
Discussing the new SBS documentary ‘Addicted Australia’

**The Quirky MumMaPodcast - 16 November 2020**
Fiona O’Laughlin’s battle against the drug that kills you as kick it

**Business News Australia - 20 November 2020**
It’s hard to see how Crown resorts can be found fit and proper to run Sydney’s Barangaroo casino

**ABC News - 30 November 2020**
How gambling authorities missed Crown’s criminal ties

**PortNews - 4 December 2020**
Alcohol harm greatest in three life stages

**Health Report ABC Radio National - 7 December 2020**
Rewiring the brain to prevent alcohol relapse

**Mirage News - 11 December 2020**
Oxycodone-related ambulance presentations are more likely to be seen in persons with mental health issues

**The Age - 17 December 2020**
Where were the controls? Crown’s performance needed closer scrutiny

**The Age - 10 February 2021**
Changing Crown’s board is not enough. It’s time for tough regulation

**The Age - 26 February 2021**
Dirty money fears as poker machine losses top pre-pandemic levels

**ABC News - 9 March 2021**
New rules for opioids leaves few options for Aussies in pain

**The Age - 11 March 2021**
A cheap heat pack to replace opioids for back pain? It may work

**Australian Financial Review - 17 March 2021**
Victorian royal commission into crown resorts starts next week

**Asia-Pacific Biotech News - 4 April 2021**
New Brain-Training to Prevent Alcohol Relapse

**ABC Radio - 16 April 2020**
Discussing gambling behaviour, and how exposure to it can lead to gambling intentions and behaviours

**InSight+ - 26 April 2021**
Co-prescribing naloxone: taking the stigma out

**Cosmos - 26 April 2021**
Opioids and overdose risk

**AJP.com.au - 30 April 2021**
Pharmacists, GPs urged to co-prescribe naloxone

**NewsGP - 30 April 2021**
Should GPs routinely prescribe naloxone to people who use opioids?

**The Age - 10 May 2021**
‘Game changer’ treatment cuts heroin use

**Cosmos magazine - 28 May 2021**
Can games tell if you are impulsive? A new computer game can assess people’s level of distraction

**The Guardian - 30 May 2021**
The psychologists signing up for psychedelic therapy training: ‘Amazing things can happen’

**NewsGP - 3 June 2021**
How can opioid deaths be reduced?

**The Age - 11 June 2021**
Melbourne’s first safe injecting room fulfilling its purpose research finds

**The Guardian - 19 June 2021**
I’m living proof how Melbourne’s drug injecting room has changed and saved lives

**Radio 2M - 26 June 2021**
International Day Against Drug Abuse and Illicit Trafficking
OUR COLLABORATORS

Members of the Monash Addiction Research Centre collaborate with a diverse range of local, national and international research and clinical partners. The agencies listed below represent some of our key partnerships with research organisations, health services and community associations.

Alfred Health
Ambulance Victoria
Area 4 Pharmacotherapy Network
Association of Participating Service Users
Australian Institute of Family Studies
Australian National University
Australian Research Council
Barwon Health
Beyond Blue
Bouverie Centre
Burnet Institute
Cancer Council Victoria
Chisholm TAFE
Deakin University
Defence Health
Department of Health and Human Services, Victoria
Department of Health, Commonwealth
Eastern Health
Eastern Health Foundation
Eastern Melbourne PHN
Foundation for Alcohol Research and Education (FARE)
La Trobe University
Monash Health
Movember
National Drug and Alcohol Research Centre (NDARC), University of New South Wales
National Drug Research Institute (NDRI), Curtin University
Nurses and Midwives Health Program Victoria
Penington Institute
Peninsula Health
Responding to Alcohol and Drugs in the Frankston and Mornington Peninsula (RAD-FMP)
Self Help Addiction Resource Centre (SHARC)
Sheffield Hallam University, UK
St Vincent’s Hospital, Melbourne
Turning Point
University of Melbourne
University of Newcastle
University of Oregon, USA
University of Queensland
University of Sydney
University of Tasmania
University of Wollongong
VicHealth
Victorian Alcohol and Drug Association (VAADA)
Victorian Responsible Gambling Foundation
Windana
World Health Organisation
Youth Support + Advocacy Service (YSAS)

The NCHA has a new home within the Ngarnga Centre to house its Healthy Ageing Data Platform.


FURTHER INFORMATION

Any enquiries or comments regarding this publication including requests regarding use or reproduction should be directed to the Monash Addiction Research Centre

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