

Unity is the key: building research capacity in the AOD treatment sector

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Aim: the symposium is designed to describe the efforts to build research capacity of the AOD workforce in NSW and the potential it has for improving outcomes for people accessing treatment services.

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PRESENTATION 1: What is the research capacity of alcohol and other drug services in NSW?

Presenting Author: Dr Robert Stirling

Background: Building research capacity across the health system is crucial for maintaining and improving outcomes for people accessing services. However, little is known about the research capacity of the AOD sector. The aim of the study was to assess the baseline research capacity of the NSW AOD sector, exploring multiple factors that may influence capacity.

Method: Staff from LHD and NGO AOD services in NSW completed a survey using the Research Capacity and Culture (RCC) tool. Overall median research capacity scores are presented for the RCC subscales (organisational, team and individual). Comparisons were conducted by service type (LHD/ NGO), geographical location (metropolitan/rural) and affiliation with a research network (yes/no). Qualitative questions explored barriers and enablers to research.

Results: Overall RCC scores indicated moderate research capacity at all levels. Organisational capacity scored significantly higher than the team and individual level. No differences in RCC scores existed between NGOs and LHDs. Metropolitan services scored higher at the organisational level than rural services. LHDs affiliated with a research network scored significantly higher than non-affiliated LHD services. Key research barriers were inadequate time and funding. Motivators included skill development and problem-identification requiring change.

Discussions and Conclusions: The results from this study indicate that NSW AOD services have moderate research capacity. Whilst there were few significant differences between NGO and LHD research capacity, different workforce characteristics may require different research development strategies. The data provides a baseline measure to assess improvements in the future.

Implications for Practice or Policy: The barriers and motivators identified in this study can be used to inform targeted responses that enhance capacity.

PRESENTATION 2: The NSW Drug and Alcohol Clinical Research and Improvement Network (DACRIN): Enhancing clinical research capacity across the AOD sector

Presenting Author: Michelle Hall

Background: Australia's first Alcohol and Other Drug (AOD) clinical research network, DACRIN, led by practicing clinician researchers, collaborate to identify clinically relevant research questions; design and conduct studies; share infrastructure; and provide evidence about real-world interventions, is key to enhancing research capacity across AOD services.

Method: DACRIN, currently represented by thirteen organisations from NSW publicly funded Local Health District and Network (LHD/Ns), and Non-Government Organisation (NGO) AOD services, enables high quality and meaningful research through established collaborations and partnerships; and seeks to harness the significant experience of founding members to enhance research capacity in less experienced AOD member services.

Effectiveness /Acceptability /Implementation: With support from the NSW Ministry of Health, DACRINs membership more than doubled between 2019 and 2023 from six to thirteen member organisations.

DACRIN activity helps build research capacity in DACRIN member organisations through research collaboration opportunities. Since inception, DACRIN member organisations have collaborated in over 40 multicentre studies, DACRIN investigators have been awarded over seven million dollars in grant funding and DACRIN clinician researchers have published over 30 manuscripts.

Conclusions and Next Steps: Recognising that membership is largely representative of metropolitan LHDs, with moderate research capacity, DACRIN is seeking to extend membership to rural and remote LHDs and additional NGO organisations who have an interest in developing capacity in clinical research, ultimately providing support to, and enhancing research capacity across all NSW AOD services.

Implications for Practice or Policy: Further connecting rural and remote LHD and NGO, and potentially other NSW jurisdictional, AOD services under the auspice of DACRIN will help enable greater efficiencies throughout NSW AOD and NGO sector research, increase research capacity, and enhance evidence-informed practice to improve the safety, efficiency, outcomes and consumer experiences of AOD services.

PRESENTATION 3: How is NSW Health helping to build the research capacity of alcohol and other drug services in NSW?

Presenting Authors: Dr Joanne Ross and Kevin Street

Background: The NSW 'Special Commission of Inquiry into the Drug Ice' made several recommendations for improving outcomes for consumers of AOD services, many of which are reliant on services having sufficient research capacity to improve the evidence base for clinical practice. The NSW Ministry of Health's Centre of Alcohol and Other Drugs (CAOD) is developing a targeted response to improve research capacity in AOD services.

Approach: CAOD recognises the need for collaboration across the AOD sector to maximise research capacity and help deliver outcomes that matter to consumers of AOD services. CAOD grant funding strongly encourages research partnerships between AOD services, universities and consumers to improve capacity and capability.

Key Findings: In addition to continued funding of the Drug and Alcohol Clinical Research and Innovation Network (DACRIN), CAOD is funding NGO and LHD research capacity building activities and is establishing an AOD research grant round that will have research capacity building as one of its objectives. To enhance capacity for consumer informed research, additional positions on the Centre's Consumer Informed AOD Research and Analysis Working Group have been funded, and members will help shape the research activities of the Centre. Developing capacity for research in Aboriginal services is a priority.

Discussions and Conclusions: The CAOD's targeted research capacity building initiatives represent an initial step towards building capacity in NGO and LHD AOD services.

Implications for Practice or Policy: It will be important to monitor the impact of the CAOD's initiatives for building and maintaining the research capacity of AOD services.

PRESENTATION 4: 'We are already facing diversity': Co-developing an AoD health literacy resource for LGBTQIA+ young people.

Presenting Author: Dr Emily Deans

Background: Youth Solutions is a non-profit youth AoD prevention and harm reduction service operating in Campbelltown, NSW. Youth Solutions is committed to ensuring that health literacy resources are appropriate, informed by good evidence and where able, include end consumers in the design process.

Methods: Utilising qualitative methods, the team conducted in depth semi structured interviews with young people (n=15) from the LGBTQIA+ community about their AoD needs, resources available, and how health promotion services can better provide for their communities. Open coding and constant comparative method was used to identify themes in the data to inform a video brief to develop an AoD education resource.

Key Findings: Participants had a range of recommendations about AoD education resources, relaying that messages must be simple, embedded in a harm reduction approach, and spotlight substances which are socially accepted and highly accessible. Participants suggested that AoD health resources should give indicators for when someone might be developing an addiction and point to where to access support. Participants expressed their disappointment in resources which singled out LGBTQIA+ people, requesting for stripped back animation to avoid stereotyping and to be championed by an animator from the LGBTQIA+ community.

Conclusions and Next Steps: This study saw the coproduction of an AoD health education video resource for LGBTQIA+ young people. The video resource is now being embedded in Youth Solutions' workshop delivery to young people aged 12 – 25 years in the Macarthur and Wingecarribee regions of New South Wales.

Implications for Practice: Co-production can be challenging and learnings from this project include: the importance of sharing equal space and incorporating consumer and staff input, provide several avenues and options for consumers to be involved, so their capacity to contribute is considered. Remember to continue the conversation by evaluating the resource and embed strategies to do this in the budget.