

## Drug Use ‘Normal’ Among Australian Youth?

**Dr Cameron Duff, Director of the Centre for Youth Drug Studies at The Australian Drug Foundation gave an insightful presentation to the August SPIN meeting on the normalisation of drug use amongst a cohort of Australian youth.**

The normalisation thesis as held by Parker (*Illegal Leisure*, 1998) consists of seven key features:

- Drugs availability
- Drug trying
- Drug use (regular, recent)
- Being ‘drugwise’
- Future behavioural intentions
- ‘Cultural accommodation of the illicit’
- Risk-taking as a life skill

If evidence can be found of all seven tenants then we have normalisation.

The potential implications of normalisation holds great relevance to those of us working in the alcohol and other drug field as it may affect the drug policies under which we all work.

Both Duff and Parker agree that once drug use becomes normalised the state needs to move away from policies around the deterrence of drug use to those with a focus on the management of drug use and related risks and harms.

Dr Duff conducted his study amongst punters at three bars and clubs in the Chapel St precinct in Stonnington. What he found was evidence of high levels of ‘party drug’ use, both by individuals and within peer groups, relatively wide availability of ‘party drugs’, support for the normalisation thesis amongst party drug users, support for the ‘cultural accommodation of the illicit’ and a ‘drugwise’ cohort.

If this is the case, that drug use is becoming (or has become) normalised amongst certain sectors of society then the following questions need to be asked:

- Is prevention still a realistic policy objective?
- How should drug education be delivered and coordinated?
- How should we perceive of ‘drug use’ as a cultural practice?
- How should we seek to reduce the harms associated with drug use?
- What do we know about people who use drugs?
- Can/should we attempt to change people’s drug use behaviours?
- How are we to ‘live with drugs’?

Some food for thought!

## Southcity Psych Services

**As part of the community psychiatry placements, a senior Alfred psychiatry registrar is given the opportunity to spend one session per week for a period of either six or twelve months with us here at Southcity Clinic.**

It is in this capacity that we would like to welcome on board our newest psych registrar Dr Sam Margis. Sam will be with us here at the clinic for the next six months.

Sam comes to us having trained extensively in the southern metropolitan region of Melbourne. He has experience working with psychiatric presentations across the age spectrum in both

metropolitan and rural settings.

He enjoys squash, downhill skiing and architecture!

All the staff at the Southcity would like to take this opportunity to welcome Sam to the clinic.



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# Welcome

## Dr Dinara Kouchaeva

Dr Dinara (Dina) Kouchaeva is the new addiction medicine trainee at Southcity Clinic.

Dina completed her training in medicine in Russia and has been working in general practice for the past four years. However, she decided last year that she wanted to specialise in treating drug and alcohol problems, especially among women. She therefore started to work as a medical officer at Moreland Hall Drug and Alcohol Centre in Coburg and has now commenced a weekly session at Southcity Clinic for the next six months.

Staff and patients at the Clinic have warmly welcomed Dina. Her enthusiasm and willingness to learn should ensure that her rotation is pleasant and successful.



## Jura Fail

Jura Fail joined the Southcity team in August as a locum clinician, and will be with us until December.

Jura comes to us with a great wealth of experience in social work. She started her career in psychiatric services in public hospital settings and then moved into the disability field. For some time she managed the commonwealth government disability services program before moving back into clinical work in aged care. She also brings with her clinical experience in counselling in the drug and alcohol sector.

We are very fortunate that she was available to take up the locum position with Southcity and look forward to her input



### The Clinic

The Clinic is a service of Southcity GP Services. It's mission is to:

*To provide optimum treatment in the Southern Metropolitan Region of Melbourne for substance dependent people with difficult and complex needs.*

*To provide effective training, consultancy and support services for health practitioners involved in providing treatment for substance dependent patients.*

### Southcity GP Services

Chair:	Jill Grogan	9903 1177
Chief Executive Officer:	Lyndon Crick	9276 3256

### Southcity Clinic

Director:	Benny Monheit
Medical Practitioner:	Danusia Pietrzak
Service Development Manager:	Lurline Waters
Senior Clinician and Social Worker:	Wendy Mence
Clinician	Jura Fail
Education Officer:	Dahni Houseman
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### Newsletter

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Contributions to the newsletter are welcome. Send contributions to [dhouseman@southcityclinic.com.au](mailto:dhouseman@southcityclinic.com.au) or fax to 9525 7369. Southcity reserves the right to accept, edit or reject material submitted for publication.

For information regarding advertising space and costs call Michael Simone on 9276 3256.

The publication of articles, notices and advertisements in this newsletter does not imply the endorsement of Southcity.

### Web Site

[www.southcityclinic.com.au](http://www.southcityclinic.com.au)

**Call the Clinic on: 9525 7399**

**Fax us on: 9525 7369**

## Oral Health, Hep C and Methadone

**The July SPIN meeting was an informative session run by Dr Andrew Neil of The Dental Fix at the Inner South Community Health Service's (ISCHS) Prahran site. The presentation left us with a few key take home messages to pass on to our clients around oral hygiene.**

Three key preventative procedures are as follows:

**Oral Hygiene**—incorporating: fluoride toothpaste, brushing after breakfast and dinner, no food/drink after brushing except water, limiting food and sugar intake to meal times, rinse and spit after taking methadone

**Dental Visits**—should be regular, ideally six monthly after all work is completed (although this is currently problematic as the waiting list at ISCHS is currently 18 months)

**Salivary Replacement**—chewing sugar free gum, frequent sipping of water.

The idea behind prevention is that restorative dental work can be extremely difficult and very expensive. Examples of treatment are extraction costing \$100-\$250 per tooth and root canal therapy and coronal restoration costing \$1500-\$2500 per tooth.

It is key to raise issues around oral health with our clients. We need to stress fluoride therapy (tooth paste, gel), encourage dental visits, and recommend brushing after each meal.

*For more information about services offered by The Dental Fix call 9525 1300, to make an appointment call 9520 3177.*

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# Thinking Drinking

**National Drug Action Week is held each year in June. This year Southcity Clinic conducted a lively seminar entitled *Thinking Drinking*. The focus was on treatment options for problem drinkers and was aimed at both health professionals and the broader public.**

The first of a panel of speakers was Geoff Munro from the Community Alcohol Action Network at the Australian Drug Foundation. His presentation set problem drinking in the context of the pervasiveness of alcohol marketing in our community and the increasing emphasis on brand recognition.

Dr Alan Gijbsbers from the Melbourne Clinic and the Royal Melbourne Hospital then reminded the audience that most problems with alcohol result from intoxication rather than from someone who is alcohol dependent or an “alcoholic”. He emphasised that any treatment needs to match the person’s readiness to change their drinking behaviour. The ‘happy user’, who has little insight into the harms associated with their drinking, is not yet ready to change, so treatment is not likely to be successful.

Kaylene Rowe, from the Salvation Army Bridge Program, presented some of the options for withdrawing safely from problematic alcohol use, either at home or in a residential setting. She emphasised that withdrawal is rarely an instant cure and that most people attempt a number of withdrawals before achieving longer-term success.

Dr Benny Monheit, medical director of Southcity Clinic, pointed out that people tend to get better over time and that brief interventions by a GP or health worker can be very effective in reducing risky levels of drinking. We also now have very safe medications that can reduce cravings for alcohol and so help prevent relapse into drinking.



(photo l-r: Geoff Munro, Alan Gijbsbers, Tracy Bartram, Kaylene Rowe, Benny Monheit)

The highlight of the evening was a personal presentation by the entertainer and motivational speaker, Tracy Bartram. Tracy gave a very personal, if at times hilarious, insight into her own battle with alcohol. This certainly added a dimension to the evening that couldn’t be matched by clinical presentations.

The final part of the seminar was a mini hypothetical ably facilitated by Dr Alan Gijbsbers. The case of ‘Anna’ and her drinking problem was progressively revealed to the panel of speakers. This provided an engaging context to what the panel members had presented earlier in the evening.

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# Depression and Partner Abuse—Uncovering Domestic Violence

**It is difficult for both health care providers and patients to raise the issue of domestic violence and partner abuse, yet we know that talking about it is often the first step in treating a range of health problems including depression.**

If you want answers to the following questions or want to build of your skills in dealing with this difficult area of general practice, or if you’re a GP and you just want to earn 15 Group One and mental health points, join us for this interactive workshop.

- What are the signs I need to look for?
- How do I raise the issue and how do I then respond to what my patient tells me?
- Are the needs of children in the family being met?
- How can I help my patient overcome the fears of disclosure?
- What are my duties of care and what documentation is required?

**Date:** Thursday 21 October 2004  
**Time:** 6.30 for 7.00 to 10.00pm  
**Venue:** Ashley Ricketson Centre  
Caulfield General Medical Centre  
260 Kooyong Road, Caulfield (entry 2)

**Speakers include:** Dr Kelsey Hegarty, Dept of General Practice, Melbourne University  
Dr Angela Taft, Centre for the Study of Mothers and Children’s Health

**RACGP Points:** 15 Group One + Mental Health points

To register contact Jill Day at Southcity GP Services by phone on 9276 3256 or email: [jill@isemdgp.org.au](mailto:jill@isemdgp.org.au)

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# My Experiences at Southcity Clinic

Dr Larry Osborne

**From the evidence that is available, my clinical practice in addiction medicine meets the relevant clinical benchmarks. However, I was seeking an environment where I could explore my clinical practice in the context of a team setting with the goal of improving the overall standards of care for my patient population. The opportunity of working at Southcity Clinic fulfilled this objective.**

Meeting with colleagues on a weekly basis, the opportunity of discussing difficult clinical issues in a supportive environment, being challenged about blind spots in thinking about the fundamental clinical problems and writing notes which were as much for colleagues as for myself provided opportunities to reflect on my work and to attend to areas where competencies needed to be improved. The experience has reinforced for me the basic proposition that this kind of work requires skill development above and beyond the more traditional areas of competencies in diagnosis and management of clinical problems.

The benefits are clear: the team develops a more complete understanding of the patient's world and additional opportunities for effective interventions are opened up and none in the team is left feeling as if they are carrying the whole burden of the patient's dilemmas.

Most of the patients seen at the Clinic are formal or informal referrals from other service providers. It was important to

communicate with these providers as quickly and as comprehensively as possible. This component of the work was relatively new to me and I had to rethink my approach to the consultation and its follow up to meet to ensure this continuity of care. Again these skills need development and reinforcement and cannot be seen as a given from the GP perspective.

The challenge now is for me to take these experiences back to the daily process of providing care to the patients. I now have a number of additional skills to do this and more importantly I recognise the limitations in providing the best possible care to patients when working in an isolated situation.

I wish to thank all the staff at Southcity, the patients and other colleagues for this important professional development opportunity.



## Upcoming Education Sessions at Southcity Clinic

**Southcity's SPIN sessions provide ongoing education, information and support to primary health care practitioners engaged in the management of people experiencing problems with substance use.**

Tuesday 5 October  
**Eating Disorders and Substance Use**  
Victorian Centre of Excellence In Eating Disorders (CEED)

Tuesday 9 November  
**Ethics and Drug Treatment**  
Dr Alan Gijbers, RMH & The Melbourne Clinic

*To register for any session, call Dahni Houseman at the Clinic on 9525 7399 or by e-mail to [dhouseman@southcityclinic.com.au](mailto:dhouseman@southcityclinic.com.au).*

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