





DRNS 2019 Annual Conference

Supported by the SSA

25th November 2019 Radisson Blu Hotel Glasgow

Drugs research: priorities for the future

Conference report

Introduction

On the 25th November 2019, the Drugs Research Network Scotland (DRNS) held their second annual conference titled Drugs research: priorities for the future. Supported by the Society for the Study of Addiction, the one-day conference was designed to help the Scottish drugs research community to produce more effective and impactful research. The day included a series of presentations and workshops, as well as academic posters authored by researchers from across the UK. The event was fully subscribed, and we hosted around 140 delegates, including academic and peer researchers, Masters and PhD students, researchers from the NHS, third sector service providers, and people with lived/living experience of drug use. This report provides a summary of the event. All conference outputs, including videos and slides from presentations, graphics and photographs are available on the DRNS website at drns.ac.uk/conference2019/



Conference programme

09.15 – 09.45 Registration and refreshments 09.45 – 10.00 Welcome
Prof. Catriona Matheson, DRNS Convenor. Opening Address Mr Joe Fitzpatrick MSP, Minister for Public Health, Sport and Wellbeing, Scottish Government. 10.00 – 10.30 Plenary Speaker Professor Roy Robertson, University of Edinburgh What research has led to policy or practice changes that improved the lives or care of your patients 10.30 – 11.00 Plenary Speaker Dr Magdalena Harris, London School of Hygiene & Tropical Medicine Researching injecting related risk and protection: the importance of peer and community involvements 11.00 – 11.20 Break 11.20 – 12.50 Parallel Sessions Families. Chair: Dr Anne Whittaker, University of Stirling. Health, Social Care & Wellbeing. Chair: Dr Alison Munro, University of Dundee. Harms. Chair: Dr Aileen O'Gorman, University of the West of Scotland. Blood Borne Viruses. Chair: Dr Emily Tweed, University of Glasgow. Prevention. Chair: Professor Betsy Thom, Middlesex University London. 12.50 – 13.45 Lunch Plenary Speaker Professor Adam Winstock, University College London Scotland and the challenges of moderation. 14.15 - 14.45 Plenary Speaker Professor Fiona Measham, University of Liverpool Partnerships in Research: reflections on unlikely, unusual and productive partnerships. Coffee/tea available (to take into workshop sessions)
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15.00 – 16.30 A. An introduction to realist evaluation
Dr Fiona Harris, University of Stirling.
B. Literature review methodologies
Dr Steve McGillivray, University of Dundee.
C. An introduction to complex systems thinking
Dr Mark McCann and Dr Claudia Zucca, University of Glasgow.
D. Putting peers at the centre of research on reducing harms: reflections on the SHARPOS project
Josh Dumbrell, Wez Steele, Peer Navigators, The Salvation Army. Dr Hannah Carver, University of Stirling.
E. Academic Input to the Drug Related Death Crisis Professor Catriona Matheson, University of Stirling.
16.30 – 16.45 Closing notes
Dr Tessa Parkes, DRNS Deputy Convenor and Professor Anthony Shakeshaft, University of New South Wales, Sydney, Australia.

Plenary presentations

All the plenary presentations are available on the <u>DRNS website</u> and linked here:

Patient care: What research and policy initiatives have made a difference? Professor Roy Robertson, University of Edinburgh.

Researching injecting related risk and protection: the importance of peer and community involvement

Dr Magdalena Harris, London School of Hygiene & Tropical Medicine.

Scotland and the challenges of moderation Professor Adam Winstock, University College London.



Partnerships in Research: reflections on unlikely, unusual and productive partnerships Professor Fiona Measham, University of Liverpool.

Parallel session summaries

Families

Chair: Professor Anne Whittaker, University of Stirling, DRNS Families Theme Lead. Current research includes pregnant women, children, mothers, fathers and family members affected by substance use.

The following presentations were given during the session:

- Dr Louise Marryat, Centre for Clinical Brain Sciences, Edinburgh Neuroscience, Edinburgh
 University: Developing a new cohort of children born to women who used opioids in
 pregnancy using administrative data: insights into cohort creation and linking of
 administrative datasets.
- Penelope Laycock, University of Strathclyde: Adult Children of Problem Drinkers in Glasgow: Preliminary Findings.
- Katherine Long, Corra Foundation: Connections are Key: Unlocking the Heart of Relationship-Based Practice.
- Professor Anne Whittaker: Engaging opioid-dependent men in a whole family parenting and child welfare intervention: lessons learned from the PuP4Dads study.



Health, Social Care & Wellbeing

Chair: Dr Alison Munro, University of Dundee, DRNS Health, Social Care and Wellbeing Theme Lead.

This session presented research on factors affecting the health, social care and wellbeing of people who use drugs. These include exploring barriers to care, the influence of systems and services on uptake and outcomes of treatments and factors associated with recovery from multiple disadvantage. In her introduction to this session, Alison outlined the diverse set of tasks associated with this area and suggested that commonalities are found.

The following presentations were given during the session:

Andrew Radley, NHS Practitioners, with collaborators from University of Dundee, "Clinical
effectiveness of Pharmacy-led versus conventionally delivered antiviral treatment for
Hepatitis C in patients receiving opioid substitution therapy". He highlighted the complex
range of factors underlying effectiveness and the importance of treating patients with dignity
and respect, alongside the practicalities of being able to access treatment from pharmacies

- and its positive impact. He discussed the possibilities of being able to provide medication assisted treatment to large numbers of patients. He demonstrated how this pharmacy led approach was an accessible and valued community asset.
- Cassandra Baino, Scottish Graduate Entry Medicine, "Evaluating and communicating Hepatitis C Cascades of Care data: A journey towards elimination in Tayside, Scotland". Cassandra produced a novel, systematic way of codifying Hepatitis C Virus (HCV) data and a way of communicating with a Cascade of Care. She shared the HCV data in Tayside, Scotland, to provide examples of insights gained from communicating data in this way. She described the importance of understanding the journey of people with Hep C and asked what the next steps could be for people in recovery.
- Dimitar Karadzhov, PhD Candidate, Centre for Health Policy, University of Strathclyde, "'False Strength': Exploring the Role of Problem Substance Use in the Personal Recovery in Adults Transitioning out of Chronic Homelessness: A Transatlantic Qualitative Study." Dimitar's research is a collaboration with the Citizenship, Recovery and Inclusive Society Partnership (CRISP) and sets out to understand the experience of personal recovery in individuals with serious mental illness who have been chronically homeless. He is interested in understanding the lived experience and how mental health and substance use affect drug recovery.
- Dr Trina Ritchie, Lead Clinician, Greater Glasgow and Clyde Alcohol and Drug Services, "Barriers to Optimal Methadone and Buprenorphine Doses". Trina highlighted the work that is currently taking place via peer research with people who use services and with staff through focus groups. She highlighted some of the issues with NHS staff feeling stressed and outlined parental training as important and discussed how we can talk about drugs and ensure schools have useful information, which captures the reality of substance use.



Harms

Chair: Dr Aileen O'Gorman, University of the West of Scotland, DRNS Harms Theme Lead.

The Harms session focussed primarily on the broader social harms associated with drug use and drugrelated deaths and the risk environment inhabited by people who use drugs in Scotland. This session took the form of panel presentations followed by small group discussions with the session participants.

- Dr Aileen O'Gorman, "Risk environments and social autopsies: the context of drug-related harms and drug-related deaths".
- Kirsten Trayner, PhD Candidate, Glasgow Caledonian University and Honorary Epidemiologist, Health Protection Scotland, "Increased risk of HIV and other drug-related harms associated with injecting in public places".
- Rowan Anderson, "Gender specific harms: the experience by women who use drugs".
- Frances Matthewson, Public Health and Deborah Stewart, NHS Highland, "Drug related deaths of young people in NHS Highland".
- Dr Eilidh Moir, Drug Death Analyst, NHS Tayside, "Drug related deaths in Tayside".

Blood Borne Viruses

Chair: Dr Emily Tweed, University of Glasgow, DRNS Blood Borne Viruses Lead.

The following presentations were given during the session:

- Madeleine Caven, University of Dundee, "Impact of Hepatitis C treatment on substance use and injecting behaviour: a systematic review".
- Dr Norah Palmateer, NHS Tayside, "Reduction In The Population Prevalence Of Chronic HCV
 Among People Who Inject Drugs Associated With Major Scale-Up Of Direct-Acting Antiviral
 Therapy In Community Drug Services".
- Madeleine Caven, University of Dundee, "Hepatitis C Diagnosis and Treatment, Impact on Engagement and Behaviour of People Who Inject Drugs, the Hooked C project".
- Jennifer Kelly, Pharmacist Independent Prescriber, Glasgow Alcohol Drug Recovery Service,
 "Eliminating Hepatitis C in at risk groups Achieving 100% testing in city centre opioid agonist therapy cohort and ensuring successful linkage to treatment".

Prevention

Chair: Professor Betsy Thom, Middlesex University London DRNS Prevention Theme Lead.

Following a short introductory talk, the session offered participants an opportunity to consider what is needed to develop drug prevention policy, practice and research at national and local levels. In her presentation "Prevention approaches in Scotland – where to now?" Betsy outlined that substance use prevention aims to stop or delay people from beginning to use psychoactive substances. It can also help those who have started to use to avoid the development of substance use disorders and associated health and social problems. Prevention also has a broader intent: to encourage the healthy and safe development of children and young people, so they can realise their talents and potential. It does this by helping them positively engage with their families, schools, peers, workplace and society.

Workshop summaries

An introduction to realist evaluation

Dr Fiona Harris, University of Stirling

The question of what difference context makes to outcomes was asked. This question was explored and unpacked during this workshop with reference to 'realist evaluation'. Attendees were introduced to the methodology and taken through practical applications of this theory-driven approach. 'Context-Mechanism-Outcomes' (CMO) configurations were developed through group discussion.

Literature review methodologies

Dr Stephen MacGillivray, University of Dundee

Steve introduced attendees to the fundamental skills required to carry out a systematic review. He covered the early key methodological stages of undertaking a systematic review, specifically: (i) how to formulate review questions; (ii) how to construct and run searches for relevant literature; (iii) how to screen the literature; and (iv) how to report the findings of the search.

Steve outlined the databases which are used for reviews and the many different types of reviews. He described that they can be thought of as both systematic and unsystematic, qualitative or quantitative or both. A systematic review should be a robust, reproducible synthesis of research, and be both methodological and rigorous. He described the process of designing a protocol, as the most important part of the review and the question asked within this as the most important part of the protocol. The Research strategy should focus on Population, Intervention and Comparison.

An introduction to complex systems thinking

Dr Mark McCann and Dr Claudia Zucca, University of Glasgow

In their introductory talk, Mark and Claudia explained the meaning of the term 'complex systems thinking' and the methods and tools used to adopt this approach. The workshop gave an overview of how systems thinking works and provided some practical examples of how to use systems thinking in practice.

Their talk highlighted the importance of complex systems thinking for population health as it draws attention to the fact that relationships between the components of a system are not uni-causal and one directional but are related in multiple and complex ways, often instable and changing. A 'system', they suggested, can be defined in many ways e.g. a road system, a hospital clinic or GP surgery, a system of processes. Some systems are 'simple' e.g. the road system in Glasgow —which could be compared with the road system in Manhattan along a number of dimensions. Complex systems generate many different interactions —including possibly some outside the system. For instance, complex systems thinking is appropriate for looking at drug related deaths, where multiple factors from individual to policy and systems level factors interact to result in the national picture of drug-related deaths. This formed the topic of the small group discussions that followed the presentation.

The tasks were carried out in small groups without full feedback so answers may have differed between groups. (They are available on the feedback sheets). The main point of the exercise was to let participants get the feel for how complex systems thinking worked and how to go about it.

Putting peers at the centre of research on reducing harms: reflections on the SHARPS project

Josh Dumbrell, Wez Steele, Peer Navigators, The Salvation Army. Dr Hannah Carver, University of Stirling.

Peer Navigators Josh and Wez shared their experiences as Peer Navigators as part of the National Institute for Health Research funded SHARPS study (Supporting Harm Reduction through Peer Support). They discussed their experiences of being involved in the co-design of a psychologically informed peer led harm reduction intervention, and in the day to day running of the study which included recruiting and retaining participants, and data collection. They offered insights on all these aspects from their perspective as peers. Josh and Wez then facilitated a group discussion/activity, focusing on how peers could be more fully and meaningfully involved in research, across all stages of the research process.



Academic Input to the Drug Related Death Crisis

Professor Catriona Matheson, University of Stirling.

Professor Matheson's session focused on the role of academics in responding to the DRD crisis. The challenge of missing evidence was discussed along with challenges plus issues delegates wanted to raise

- Competition for metabolic pathways.
- Effect of mega-doses
- Consistency of toxicology evaluations/reporting
- How do we communicate harm reduction information effectively and reduce risk of unintended consequences?
 - Challenge of multi-agency coordination.
 - o Framing concerns correctly through objective reporting and networks

- Experience of care/children in custody in NDRDD
- A&E studies of drugs other than NPS
- Audit as well as research, to find out whether standards for treatment and care are being met
- Lots of evidence already exists in ADPs.

The importance of timelines and potential solutions to effect these were also discussed:

- Using secondments not tenders would be faster
- Harnessing latent workforce Masters students and registrar projects
- Using network to disseminate project opportunities
- More resources for collecting and releasing data no increase in findings commensurable to increase in number of deaths, therefore, fresh data is needed. View that the current DRD reporting is not fit for purpose in 2019
- Using network to support dissemination and publication of local work
- An executive lead that is accountable for DRD doesn't currently exist
- Protecting time of staff responsible for this as currently they are 'maxed out'.



Closing notes

Closing notes were given by Dr Tessa Parkes, Deputy Convenor, DRNS in which she outlined how the constructive discussion throughout the day had brought together important discourse regarding drugs research and our priorities going forward. A summary was given by Professor Anthony Shakeshaft, University of New South Wales, Sydney, Australia. The aim of the event was to share knowledge to help shape policy and practice informed by an understanding of peoples' needs. He gave examples of DRNS goals being operationalised, as seen during the conference. These goals include informing policy

and practice with robust evidence; and fostering knowledge exchange, for example, by hosting events like this. Understanding and responding to the needs of those with lived experience would be important in aligning these goals with practice. Anthony outlined that as DRNS approaches a potential second phase, it is faced with both challenges and opportunities. He suggested that DRNS should retain its firm focus on impact, positively impacting Scotland's drugs problem by developing and enhancing the evidence base. Anthony also gave an overview of the challenges and opportunities for DRNS going forward:

- Roy R: need to at least consider radical change?
- Parallel sessions: lack of evidence about 'what works'
- Reflect on the DRNS model?
- Why Most Clinical Research Is Not Useful (PLoS Medicine)

In the context of this, Anthony asked, how much descriptive research do we need before we act?

Posters

DRNS were delighted to welcome the following authors who each displayed a poster of their drug related research during the conference. The posters were judged by Dr Gillian Tober, Addiction Psychologist, trainer and co-founder of RESULT.

Cassandra Baiano from Scottish Graduate Entry Medicine was awarded the prize for best poster, £200 towards conference attendance and other professional development activities.

		ORAL AND POSTER PRESENTATIONS	
Martin	Anderson	Evaluating the implementation of the San Patrignano drug recovery model in Scotland	
Cassandra	Baiano	Evaluating and Communicating Hepatitis C Cascades of Care Data: A Journey Towards Elimination in Tayside, Scotland	
Harriet	Bloomfield	Understanding the motivations and context behind non-prescribed benzodiazepine use in the UK: a mixed-methods analysis	
Hannah	Carver	Supporting harm reduction through peer support (SHARPS): Testing the feasibility and acceptability of a peer-delivered, relational intervention for people with problem substance use who are homeless, to improve health outcomes, quality of life and social functioning, and reduce harms.	
Madeleine	Adeleine Caven Hepatitis C Diagnosis and Treatment, Impact on Engagement and Beha People Who Inject Drugs, the Hooked C project.		
		Impact of Hepatitis C treatment on substance use and injecting behaviour: a systematic review	
		A Geographic Information System (GIS) mapping exercise to assess the need for Injecting Equipment Provision (IEP) services and overdose prevention activities in Tayside.	
		"Ask a Friend" Identifying the hidden population: Former intravenous drug users who are no longer in contact with services. A respondent driven sampling protocol.	
Dimitar	Karadzhov	Dual recovery in Problem Substance Use and Homelessness	

Penelope	Laycock	Adult Children of Problem Drinkers in Glasgow: Preliminary Findings	
Katherine	Long	Connections are Key: Getting to the Heart of Relationship-Based Practice	
Louise	Marryat	Developing a new cohort of children born to women who used opioids in pregnancy using administrative data: insights into cohort creation and linking of administrative datasets	
Frances	Matthewson	Review of Drug Related Deaths (DRD) of Younger People in Highland (age 16-25)	
Joanna	Miler	Provision of peer support at the intersection of homelessness and substance use services: a 'state of the art' review.	
Eilidh	Moir	Drug Deaths in Tayside: An ongoing analysis	
Norah	Palmateer	Reduction In The Population Prevalence Of Chronic HCV Among People Who Inject Drugs Associated With Major Scale-Up Of Direct-Acting Antiviral Therapy In Community Drug Services	
Claire	Parks	Unexpected Detection of Fentanyl in Fatalities in Scotland	
Andrew Radley		SuperDOT-C: Pharmacy-led versus conventionally delivered antiviral treatment for hepatitis C in patients receiving opioid substitution therapy	
		Using a systems-thinking approach to elucidate programme theory underpinning the effectiveness of SuperDOT-C: a pharmacy-led test and treat pathway for people with hepatitis c infection prescribed opioid substitution therapy	
opioid agonist therapy cohort and ensuring successful lir		Eliminating Hepatitis C in at risk groups - Achieving 100% testing in city centre opioid agonist therapy cohort and ensuring successful linkage to treatment	
		Improved recovery outcomes with injectable prolonged-release buprenorphine in an opioid agonist therapy clinic in Glasgow	
		Novel benzodiazepine-type drug use in opioid agonist clinics in Glasgow	
Joe	Schofield	Developing national research infrastructure and activity: the role of a new drugs research network.	
Alice	Seywright	Synthetic Cannabinoid Receptor Agonists in Post-Mortem Casework in Scotland	
Kirsten	Trayner	Increased risk of HIV and other-related harms associated with injecting in public places: national bio-behavioural survey of people who inject drugs	
Emily	Tweed	How does 'inclusion health' feature in UK-relevant policy reviews of health inequalities? A document analysis	
Anne	Whittaker	Engaging opioid-dependent men in a whole family parenting and child welfare intervention: lessons learned from the PuP4Dads study.	

Feedback

We are grateful to delegates who took the time to complete our post-event feedback form. It was great to read your positive comments and thoughtful suggestions for future DRNS conferences. Positive feedback generally focussed on the following:

- The event was relevant to delegate's knowledge and practice/studies.
- The workshop and parallel sessions were considered to be very good.
- There was felt to be a good mix of academic research and more qualitative input on lived experience.
- Delegates appreciated the chance to hear about work being done by around Scotland and the network opportunities this allowed.

Common suggestions for change for next year's event were:

- The evident issues with the venue, which detracted from the event content.
- Improved use of the roving mic, as some audience questions could not be heard.
- Several suggestions for a different venue than Glasgow, as it has been held there for the last two years.
- It was felt that more opportunities for early career researchers within the forum would be good, perhaps including a dedicated poster session.

All feedback received is being used to inform future events.

Acknowledgments

We would like to offer our sincere thanks to all our speakers, workshop facilitators, and poster authors for sharing their knowledge and experiences on the day. For helping us to capture the conference content, we are grateful to our video recorder and editor Alex Dunedin; our photographer Rory Matheson; our graphic illustrator Graham Ogilvie and all our volunteers who helped take notes.

Thanks also go to the Society for the Study of Addiction for supporting the event and, last but not least, we would like to thank all of our delegates for attending our first conference and making the event a success through their attendance, networking and contributions.



Delegate list

At the time of booking, all delegates were asked to indicate if they consented for their details to be included in the conference report. This delegate list includes details of those who gave opt-in permission and who provided full contact details.

First Name	Surname	Job Title	Company
Martin	Anderson		
Marie	Wilson		
Emma	Fletcher	Consultant in Public Health Medicine	NHS Tayside
APRIL	SHAW		······································
Andy	Perkins	Director	Figure 8 Consultancy Service Ltd
Justina	Murray	CEO	Scottish Families Affected By Alcohol and Drugs
John	Burns		
Matthew	Gilbert-Straw	Grant Advisor	Corra Foundation
Matt	Jay		
Kayleigh	Lavornia		
Dimitar	Karadzhov		
John	Holleran	Families & Communities Manager	Scottish Families Affected by Alcohol & Drugs
colin	hepburn	Student	Glasgow Kelvin College
zoe	swithenbank	PhD Student	Liverpool John Moores University
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Faith	Ougham	student	UWS
Gillian	Burton	PhD Student	University of Stirling/GCU
Tess	Parkes	Director	Salvation Army Centre for Addiction Services and Research
David	Orr		Ethypharm
Margaret	Graham McDonald	Fellow	EUPATI
Vic	Walker	Head of Service	CrossReach
Bashiru	Sani	Student	University of Glasgow
Tracey	Price	PhD Researcher	University of Stirling
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	•	Manager	
Anne	Savage Williams	Lecture	Abertay University
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Anthony	Shakeshaft	Deputy Director	Australia National Drug and Alcohol Research Centre, UNSW,
Catherine	Foley	Research Fellow	Australia
Emily	Tweed	Clincal Lecturer/PhD researcher	MRC/CSO Social and Public Health Sciences Unit
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harriet	Bloomfield		
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DAVID	LIDDELL	CEO	Scottish Drugs Forum
Aileen	O'Gorman	Senior Lecturer/Programme Leader CDAS	University of the West of Scotland

		Consistint above sistin	
Duncan	Hill	Specialist pharmacist in substance misuse	NHS Lanarkshire
Amy	McEwan	PhD Student	Glasgow Caledonian University
Robin	Falconer	MPH Student	University of Stirling
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Ambreen	Bonnet	Student	UWS
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fraser	gallacher	Student	University of the West of Scotland
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Hazel	Harris		
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Eilidh	Moir		
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D	A	Partnership Drugs Initiative	Comp Foundation
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Betsy	Thom	Professor	Middlesex University London
Hector	Williams	Researcher	Independent Researcher
Peter	Hillen	Lecturer	Edinburgh Napier University
Andrew	McAuley	Sr Research Fellow	Glasgow Caledonian University