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Correlates and comparisons of use of a variety of drugs and associated harms in various high and middle-income countries

Editorial

In 2021, COVID-19 continued to confound, and sometimes devastate, our family, social and working lives. We hope for and work towards a less disrupted, peaceful and more environmentally sustainable and equitable 2022. Despite the difficulties faced by researchers around the world, we have remained committed to making important contributions, we have adapted and found better ways to connect virtually, and we have continued to collaborate on projects and co-author papers that increase our understanding of the use of, and harm linked to, alcohol, other drugs and gambling.

This second issue of Volume 9 of IJADR for 2021, includes papers on (a) marijuana use among college students in the United States of America (USA) and Sweden (Litt et al., 2021); (b) socio-economic determinants of alcohol consumption in South Africa (Rashied, 2021); (c) alcohol-related family violence in Australia (Willoughby et al., 2021); and (d) a study of adults who used methamphetamine (MA) that compared socio-demographic and clinical characteristics of those with and without childhood exposure to household MA and alcohol use in Thailand (Rattanasumawong et al., 2021).

This set of papers highlights the diversity of drug use and sometimes associated problems in different countries. This issue contains papers from both high income (Australia, Sweden and the USA; Litt et al., 2021; Willoughby et al., 2021) and middle income (Thailand and South Africa; Rashied, 2021; Rattanasumawong et al., 2021) countries, which together represent five continents. Two articles focus on alcohol while the other two are drugs concerned with other (mariiuana methamphetamine). The papers also have some commonalities. For example, three out of four papers use secondary data from large surveys, two of which include household samples while the third paper includes university samples. Two papers provide insights into how others' and especially family members' use of alcohol and/or other drugs can have far-reaching consequences in terms of harm (violence) to others, and over time, in terms of subsequent use of alcohol and other drugs by the family members' offspring.

Studies of university student populations within countries are common throughout the world, as students provide a readily accessible and relatively keen sample base. It is less common to compare student samples and their drug use across countries and Litt and colleagues (2021) take the opportunity to summarise use of marijuana in two countries with very different legal and policy approaches to allowing and controlling its use. Given these different settings, it is not surprising that the prevalence of use was greater in the USA than in Sweden. That the correlates of harm were alike is interesting and speaks to the continuing similarities of drug use in student sub-cultures in high-income countries.

The second secondary analysis paper, authored by Rashied (2021), examined socio-economic correlates of alcohol consumption and binge drinking among a nationally representative sample of adults aged 15 years and older in South Africa. Examples of factors identified as associated with binge drinking include sociodemographic factors (e.g., age and sex), community factors (e.g., perceiving alcohol and drug use in the neighbourhood as fairly or very common) and individual factors (e.g., greater risk of depression among men and frequently exercising among women). It was surprising that 2.3% of pregnant women reported binge drinking, as higher rates of binge drinking during pregnancy have been observed previously in South Africa (Popova et al., 2016); a country where very high rates of fetal alcohol spectrum disorder (FASD) have been detected (e.g. May et al., 2017; Urban et al., 2015).

Willoughby and colleagues (2021) accessed secondary data from a large representative national alcohol and other drug use survey to analyse the prevalence and correlates of 'being physically or verbally abused or put in fear from a family member or partner deemed by the victim to be under the influence of alcohol'. In Australia, alcoholrelated family violence defined in this way was selfreported by 5.9% of participants in the previous year. This percentage is low relative to previous figures, but of concern given many family violence statistics describe lifetime experiences, and this figure includes only that proportion of family violence that is self-reported as alcohol-related. Consistent with studies in Australia and overseas, women and socio-economically disadvantaged, risky drinking and regional participants were more likely to report alcohol-related family violence.

The study by Rattanasumawong and colleagues (2021) among adult users of methamphetamine (MA) in Thailand gives us a glimpse into some of the long-term correlates of exposure to alcohol and MA use in the household

during childhood. Those who had greater exposure to alcohol and/or MA use in the household displayed more serious clinical features of MA use. The results suggest that the type of drug to which one is exposed does matter: number of episodes of exposure to MA use during childhood was associated with number of episodes of lifetime MA use (but not with alcohol use) during adulthood; and conversely, number of episodes of childhood household exposure to alcohol use was associated with the largest number of drinks ever had in a 24-hour period (but not with number of episodes of lifetime MA use).

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