The Alcohol and Drug Abuse Research Unit (ADARU) was established at the South African Medical Research Council (MRC) at the beginning of 2001, although its origins lie in the activities of the Centre for Epidemiological Research in Southern Africa and other MRC entities. Initial challenges included attracting external funding, recruiting new staff, developing the skills of junior staff, publishing in international journals and building national and international collaborative networks.

ADARU currently comprises a core staff of 33 members who work on 22 projects spanning substance use epidemiology and associated consequences, intervention studies with at-risk populations and services research. A large component of this portfolio focuses on the link between alcohol and other drug use and human immunodeficiency virus (HIV) risk behaviour, with funding from the US Centers for Disease Control and Prevention.

Junior staff members are encouraged to develop independent research interests and pursue PhD studies. Research outputs, such as the 20 papers that were published in 2010 and the 35 conference presentations from that year, form an important part of the unit’s research translation activities. We engage actively with policy processes at the local, provincial, national and international levels, and have given particular attention to alcohol policy in recent years. The paper includes an analysis of major challenges currently facing the unit and how we are attempting to address them.

The article listed the rating scale used by ADARU staff to determine whether a potential new research project should be considered. Each item is rated out of 5 and each rating is then multiplied by the associated weights and the products summed and adjusted to give a score out of 100.

<table>
<thead>
<tr>
<th>Discussion area</th>
<th>Weight</th>
</tr>
</thead>
<tbody>
<tr>
<td>Policy relevance</td>
<td>20</td>
</tr>
<tr>
<td>Feasibility to impact on policy in short- to medium-term</td>
<td>5</td>
</tr>
<tr>
<td>Priority substance abuse issue in South Africa</td>
<td>10</td>
</tr>
<tr>
<td>Opportunities for enhancing/improving understandings of the science</td>
<td>20</td>
</tr>
<tr>
<td>Opportunity to broaden our research focus/Balance our research portfolio</td>
<td>5</td>
</tr>
<tr>
<td>Opportunity to go to greater depth in an area we are already working in</td>
<td>5</td>
</tr>
<tr>
<td>Will move us to under-researched populations</td>
<td>5</td>
</tr>
<tr>
<td>Opportunities for publishing</td>
<td>20</td>
</tr>
<tr>
<td>Burden on research staff (including unrealistic time frames)</td>
<td>-5</td>
</tr>
<tr>
<td>Burden on support staff</td>
<td>-10</td>
</tr>
<tr>
<td>Burden on infrastructure (office space, equipment)</td>
<td>-5</td>
</tr>
<tr>
<td>Opportunity for balancing spread of projects among staff</td>
<td>5</td>
</tr>
<tr>
<td>Opportunities for staff development</td>
<td>20</td>
</tr>
<tr>
<td>Income generation potential</td>
<td>5</td>
</tr>
<tr>
<td>Broaden our funding base</td>
<td>20</td>
</tr>
<tr>
<td>Nice people to work with (collaborative, pay on time)</td>
<td>20</td>
</tr>
</tbody>
</table>

It ends with some thoughts on what the unit intends doing to enhance the quality of its research, the capacity of its staff and its international standing.
SELECTION CRITERIA FOR INCLUSION

- Peer-reviewed journal article.
- Published publications (excluding: in press, advanced or submitted publication)
- Affiliated to the South African Medical Research Council (SAMRC)
- Indexed for an impact factor.
- The first Unit listed in a collaborative SAMRC journal article will have the article appear in their publication list.
- Primary source of information is Scopus. Other databases include, ISI Web of Science, Journal Citation Reports, Google Scholar, and SciVerse.

JOURNAL IMPACT FACTOR

The journal impact factor is the average number of times articles from the journal published in the past two years have been cited in the Journal Citation Reports (JCR) year.

The impact factor is calculated by dividing the number of citations in the JCR year by the total number of articles published in the two previous years. An impact factor of 1.0 means that, on average, the article published one or two years ago have been cited one time. An impact factor of 2.5 means that, on average, the articles published one or two years ago have been cited two and a half times. Cited articles may be from the same journal; most citing articles are from different journals.


INTRAMURAL RESEARCH UNITS

ALCOHOL AND DRUG ABUSE


BIOSTATISTICS


BIOMEDICAL INFORMATICS
None

CHRONIC DISEASES OF LIFESTYLE RESEARCH UNIT
Parker W, Steyn NP, McHiza Z, Nthangeni G, Mbhenyane X, Dannhauser A, et al. Dietitians in South Africa require more competencies in public health nutrition and management to address the nutritional needs of South Africans. Ethnicity and Disease. 2013;23(1):87-94. [Impact factor: 0.902] [Citations: 0]


CLINICAL AND BIOMETICAL TB
None

DIABETES DISCOVERY PLATFORM
None

ENVIRONMENT AND HEALTH RESEARCH UNIT

GENDER AND HEALTH
None

HEALTH INFORMATICS RESEARCH AND DEVELOPMENT
None

HEALTH PROMOTION
None

HEALTH SYSTEMS

Dewing S, Mathews C, Schaay N, Cloete A, Louw J, Simbayi L. “It’s important to take your medication everyday okay?” An evaluation of counselling by lay counsellors for arv adherence support in the Western Cape, South Africa. AIDS and Behavior. 2013;17(1):203-12. [Impact factor: 3.494] [Citations: 0]
HIV PREVENTION
[Impact factor: 4.092]
[Citations: 0]

[Impact factor: 53.298]
[Citations: 1]

IKS
None

MALARIA
None

MRC/UWC DIABETES
None

NATIONAL CARDIOVASCULAR AND METABOLIC DISEASE
None

NUTRITIONAL INTERVENTION
None

ONCOLOGY
None

PROMEC
None

SAAVI
None

SA COCHRANE CENTRE
None

SAFETY AND PEACE PROMOTION
None

TB EPIDEMIOLOGY AND INTERVENTION
None

TELEMEDICINE
None

WEB AND MEDIA TECHNOLOGIES
None
### EXTRAMURAL RESEARCH UNITS

#### ANXIETY AND STRESS DISORDERS
None

#### BIOINFORMATICS CAPACITY DEVELOPMENT
None

#### CANCER EPIDEMIOLOGY
None

#### CENTRE FOR MOLECULAR AND CELLULAR BIOLOGY


#### DEVELOPMENT PATHWAYS
None

#### DIARRHEAL PATHOGENS
None

#### DRUG DISCOVERY AND DEVELOPMENT
None

#### EXERCISE AND SPORTS MEDICINE


#### HEALTH POLICY
None

#### HUMAN GENETICS
None

#### INFLAMMATION AND IMMUNITY
None

#### INTER-UNIVERSITY CAPE HEART

#### MATERNAL AND INFANT HEALTH CARE STRATEGIES
None

#### MEDICAL IMAGING
None

#### MOLECULAR MYCOBACTERIOLOGY

#### OESOPHAEGAL CANCER
None

#### RESPIRATORY AND MENINGEAL PATHOGENS

#### RURAL PUBLIC HEALTH AND HEALTH TRANSITION
Sartorius K, Sartorius B, Tollman S, Schatz E, Kirsten J, Collinson M. Rural poverty dynamics and refugee communities in South Africa: a Spatial-temporal model. Population, Space and Place 2013 Jan; 19(1): 103-123. [Impact factor: 1.815] [Citation: 0]
RESEARCH GRANTS RECEIVED

HIV Prevention Research Unit:
Funding received from National Institute of Health (NIH) for ‘South Africa MRC Prevention Trials Unit - $7 478 654

Gender and Health Research Unit:
Funding received from Oak Foundation for ‘SVR 12’ – R4 180 955

Burden of Disease Research Unit:
Funding received from Western Cape Department of Health for ‘Provision of a consultancy service for Mortality Surveillance and Evidence for Injury Prevention for a 3-year period’ – R2 414 090

Dr Gita Ramjee

Dr Rachel Jewkes

Dr Debbie Bradshaw