A STUDY GUIDE BY KATY MARRINER

THE AGONY OF ECSTASY

http://www.metromagazine.com.au
http://www.theeducationshop.com.au

‘Being on ecstasy is like being in love, with everything and everyone around you. My name’s Lise. I’m twenty-eight and I took ecstasy every weekend for two years. Then my life fell completely to pieces. Now I want to know what ecstasy did to my brain and were all those nights of partying really worth it.’ – Lise

The Agony of Ecstasy, a documentary directed and produced by Katrina Lucas, tells the story of twenty-eight-year-old Lise’s decision to find out if her former ecstasy habit has damaged her health. Convinced that ecstasy use is behind her struggle with anxiety, depression and memory loss, Lise wants to know the truth about the ‘love drug’.
The Agony of Ecstasy is a suitable resource for use in student welfare programs and drug education programs at Years 10 – 12. Drug related student welfare programs support all students whether they use drugs or not. The

Curriculum links

The Agony of Ecstasy can be used as a resource in Year 10 English, Health and Physical Education and Media Arts. It is also relevant to the teaching of the General Capabilities: Personal and Social Capability and Ethical Understanding.

Suggested links:

English


Health and Physical Education


Media Arts

http://www.australiancurriculum.edu.au/the-arts/media-arts/curriculum/f-10?layout=1#level9-10

Personal and Social Capability


Ethical Understanding


The Agony of Ecstasy can be used as a resource in Years 11 and 12 English, Health and Human Development, Media, Sociology, Physical Education and Psychology. In addition, the documentary is also relevant to the teaching of vocational education training courses in Community Services. Teachers are recommended to consult the study designs for their state or territory.

Activities in this study guide allow students to:

• articulate their personal value system;
• critique behaviours and factors that influence the health and wellbeing of individuals;
• examine the use of illicit drugs both by individuals and society in general;
• discuss individual and societal attitudes to the use of illicit drugs;
• learn about the physical, legal and social consequences of illicit drug use;
• analyse the consequences of decision making;
• discuss how to make safe and healthy choices;
• evaluate, rethink and refine approaches to risk taking and difficult situations;
• use their own written and spoken texts to explore concepts and ideas and to clarify their own and others’ understanding.

The Agony of Ecstasy is a suitable resource for use in student welfare programs and drug education programs at Years 10 – 12. Drug related student welfare programs support all students whether they use drugs or not. The
Synopsis

While ecstasy may have positive connotations – we call it the love drug, hug drug, happy pill, eccy, essence, candy and disco biscuits – its effects can be deeply disturbing. When ecstasy first hit mainstream Australia in the late 1990s/early 2000s, a major UK survey showed that ecstasy users were 25 percent more likely to suffer a mental health disorder than the rest of the population.

Despite such warnings, ecstasy steadily gained in popularity, until a massive worldwide shortage in 2011 affected the availability of the drug. Now ecstasy use is on the rise again and in Australia is the most common illicit drug of choice after cannabis. According to the 2014 UN World Drug Report, Australians are the biggest users per capita in the world, with one in ten people over the age of 14 having tried it. This means thousands of young Australians could experience anxiety, depression, mood disorders or significant memory loss from taking ecstasy. What kind of impact is this having on our society?

Like many of her generation, 28-year-old university student Lise experimented with ecstasy when she was younger, taking up to four pills every weekend for about two years. She had heard about its detrimental effects on serotonin in the brain, but like all her friends she was having too much fun to care. Then the lows between the highs began to last much longer and were darker than ever and her moods fluctuated wildly. After a period of crippling anxiety and agoraphobia, Lise eventually lost her grip on reality and was rushed to a hospital psychiatric ward, where she was diagnosed with psychosis and then clinical depression.

After several months of intensive psychiatric treatment and counseling, Lise felt stable enough to enrol again at university, determined to pursue her passion for poetry and linguistics. But she’s now worried her ecstasy use may not only have triggered a possible life-long struggle with mental illness, but also caused other long-term damage, particularly to her memory and capacity for learning.

Determined to get some answers to help her understand the lasting impact of ecstasy, Lise tracks down other former and current users on the street, a detective, psychologists and scientists. She also decides to reveal her past drug use to her mum who, until now, had no idea Lise had taken so much ecstasy years before.

According to the National Drug Strategy Household Survey, around half a million people are believed to take ecstasy every year in Australia, yet there has been very little research into what it does in the brain. Lise visits a lab at Sydney University and discovers that animal studies have shown the active ingredient of ecstasy – MDMA – can seriously damage some neurons. But does this evidence apply to the human brain and particularly her own?
To find out if she has suffered any long-term damage, Lise gets her brain tested at the Adelaide Brain Clinic, which involves a cognitive test and measurement of her brain’s electrical activity, with the aim to have her results compared with the average for females her age. She also decides to have her motor function skills tested as part of a scientific study into the long-term effects of ecstasy use on movement.

Her test results are unexpected and disturbing, and Lise is forced to dig deeper into her past and confront the true reasons for her ecstasy use. As a member of the ‘E’ Generation, can it ever be ‘happily ever after’ for her? Were all those fleeting moments of euphoria on ecstasy really worth it? And would she do it all again, knowing now the price she’s paid?

**Director Q & A | Katrina Lucas**

*Why were you interested in this topic?*

Although I’ve never been a massive drug-taker, I did do some experimenting with illicit drugs (including ecstasy) in my teens and early 20s. But even on those few occasions, I always felt there was the potential for recreational drugs to have a serious impact on my mental health. Thus it was hardly surprising when I learned that some of my friends, who had been much heavier drug users, were now suffering from lasting mental health problems, including severe anxiety and depression. The one common thread that linked these friends together was that they had all taken ecstasy over an extended period of time and although they had stopped using, their symptoms hadn’t diminished. I wanted to know how many other people were in the same situation.

I was also interested to know if there are real scientific links between increasing rates of mental illness and ecstasy use in Australia, and if the latest scientific research was pointing to serious long-term effects. When the opportunity came up to apply for ABC / Screen Australia’s Opening Shot documentary initiative for filmmakers under 35, I knew it could be a great chance to explore these issues.

*What do you want to leave the viewer thinking about?*

Ecstasy is far more common that most people realise. Even if you haven’t tried it, it’s most likely that you know someone who has. Despite its prevalence, most people know very little about the long-term effects and risks of ecstasy use, and I really wanted to bring more awareness to these issues in the hope of informing people regarding the choices they make around drug taking, but without pushing an ‘anti-drug’ agenda.

*What were the biggest challenges in making the film?*

Our biggest challenge was to find the right person to drive the narrative of the film. The candidate had to be willing to explain their mental health problems and also be honest about their past drug use. As both these issues are still quite taboo in society, several participants who we had lined up in the early stages of production dropped out as they ultimately felt uncomfortable about being involved in the film. It was thus a wonderful stroke of luck to meet Lise, who not only has a compelling story, but is also incredibly candid and articulate about herself and her past experiences. Furthermore her mother was willing to be involved in a very emotional scene in which they both speak honestly about their fears and anxieties around these issues.

**What were the most interesting things you learnt?**

One of the interesting things I learnt about in researching this program is the recent push, particularly in the UK, for scientific research into the immediate positive effects of MDMA on the brain, with the view to potentially use the drug in the clinical treatment of post-traumatic stress disorder. Although it’s an interesting premise, given the amount of scientific evidence to suggest the negative effects and potential toxicity, the scientists that I spoke to in the field of neuroscience and psychopharmacology consider it unlikely that MDMA would ever realistically be approved for clinical use.

**Principal Participant Q & A | Lise van Konkelenberg**

*Why did you want to make this film?*

The topic of ecstasy use and its link to mental illness is one that has greatly affected not just my life but the lives of my family, my friends, and millions of others around the world. Yet, still, it is a topic that is incredibly misunderstood. Drug users are still very much judged by society and viewed in a negative light, when in reality most young people have tried an illicit drug of some form or another. Because the culture exists behind closed doors and underground, a lot of misinformation is passed around, and the only way to combat this is to shine a light on the contemporary research and insight in the fields of drug use and mental health. By producing a candid, “in the raw” account of the effect of drug culture, it is possible to put a face on the issue and open up an approachable, safe dialogue between those whose lives are touched by addiction and mental illness, whether they partake in drug culture or not. I jumped at the honour of making a documentary as an important contribution to this process.

*What was the best/most interesting thing about the process?*

The most interesting experience was being able to meet and talk with truly intelligent minds doing research in the area, not to mention several people whose lives it has af-
fected personally, and learn of their experiences; people like Professor Iain McGregor at Sydney University, who can barely contain his enthusiasm for pharmacology and new therapeutic treatments (such as oxytocin for therapy), and is such a wealth of knowledge.

Furthermore, as someone who is very interested in documentary and filmmaking, learning about the process was incredibly enriching, seeing the project progress from a concept and bare bones treatment to an overload of information that needed to be edited into a cohesive narrative (and putting those final touches on the voiceovers – I loved being a voice actor).

What were the biggest challenges?

Because the issue of drug use and mental health is so personal and has for decades existed behind closed doors, finding interviewees who were willing to discuss their experiences on camera or to contribute to the film was difficult for us, and understandably so – even I struggled at times with a subject as intimate as mental health. As we progressed we all realised how huge and complicated the issue truly is, so deciding what material to include that would best introduce viewers to the subject (and how they could find out more) was also a challenge. For example while filming voxpops on Hindley street, we had the opportunity to meet and talk with several people who contribute to online resources such as pillreports.com, erowid.com and reddit.com/r/mdma, which are supportive digital communities designed around education and the proliferation of (sometimes lifesaving) information, but of course we couldn’t include all of them so had to decide which was the most relevant.

What are you doing now?

Continuing my studies, research and work into the increasingly overlapping fields of documentary, literature and media. You can find me at my blog infinitemonkeyson.wordpress.com where I keep myself very busy!
Discussion 1: What is ecstasy?

Methylenedioxymethamphetamine (MDMA)

Ecstasy is the common name for methylenedioxymethamphetamine (MDMA). The illegal drug is a stimulant and a hallucinogen. Common slang terms for ecstasy include the ‘love drug’, ‘E’, ‘XTC’, ‘eggs’, ‘disco biscuits’ and ‘eccies’. Ecstasy comes in a tablet form and is usually swallowed. The pills come in different colours and sizes and are often imprinted with a picture or symbol.

Ecstasy increases the activity of three neurotransmitters: serotonin; dopamine; and norepinephrine. It also activates the release of oxytocin, sometimes called the ‘love hormone’. Ecstasy gives people a burst of energy, making them feel alert and alive. It makes sounds and colours more intense. People feel more talkative or sociable, and often feel closer to others.

There are usually three phases experienced when taking ecstasy:
- Coming up
- Plateauing
- Coming down

• Ecstasy is a stimulant and a hallucinogen drug.

What is a stimulant drug?
What is a hallucinogen drug?

• Ecstasy was first made in Germany in 1914 as a drug to reduce appetite but was never marketed.

When did ecstasy become illegal? Why is ecstasy illegal?

Common effects of ecstasy

Ecstasy speeds up the workings of the central nervous system and alters the user’s perception of reality. The effects of ecstasy depend on the strength of the dose and on the physical attributes and state of mind of the person taking the drug. Its effects begin within 20 minutes of taking the drug and might last for 6 to 8 hours.

Some of the immediate effects of ecstasy include:
- Feelings of confidence, happiness and benevolence
- Accelerated heart rate and breathing
- Rise in blood pressure
- Sweating and dehydration
- Nausea
- Jaw clenching and teeth grinding
- Loss of appetite
- Hallucinations
- An increased urge for sex
- Loss of inhibitions.

In high doses ecstasy can cause seizures and vomiting. The symptoms of overdose include a sharp rise in body temperature and blood pressure, dizziness, cramps, heart palpitations and vomiting. People with certain physical and psychiatric disorders are at greater risk of harm if they take ecstasy.

Ecstasy may also contribute to death in a number of ways, including:
- Cardiac arrest
- Stroke
- Kidney failure
- Hyperthermia (overheating) and dehydration
- Dilutional hyponatremia (when the user ‘drowns’ their brain by drinking too much water)
There is no safe level of drug use. Use of any drug always carries some risk. It is important to be careful when taking any type of drug.

Ecstasy is generally made in illegal laboratories, which means the person taking it has no idea if the dose will be strong or weak, or even if it will contain any MDMA at all. It is possible for ecstasy tablets to contain little or no MDMA. They may contain other chemicals such as amphetamines, PMA or ketamine that may have unexpected or dangerous effects. ‘Fillers’ like chalk and household cleaning products are often used in the manufacture of ecstasy.

In *The Agony of Ecstasy*, an ecstasy user explains that the pill report is a ‘reliable’ starting point to determine the quality of the ecstasy.

Lise investigates the pill report website. What does her research reveal? What are the advantages and disadvantages of such a website?

Where can individuals locate reliable information about illicit drugs such as ecstasy? Why is it necessary for users of illicit drugs to be informed consumers?

2. Drawing on *The Agony of Ecstasy* and a range of print and electronic resources, complete the table.

<table>
<thead>
<tr>
<th>FACTS</th>
<th>MYTHS</th>
<th>EFFECTS</th>
<th>RISKS</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
4. Is ecstasy addictive?

In *The Agony of Ecstasy*, Lise interviews people who are enjoying a night out. A twenty-year-old man admits to taking ecstasy on ‘a big occasion’ like a music festival and not being all that worried about the risks. Another man admits to having used ecstasy once every couple of months but that he is now less inclined to take the drug. He believes that he can have fun without substances now. A woman tells Lise, ‘A day or two after you take it there is a definite low period you feel, and I think that maybe if there’s other factors in your life it can just exacerbate them.’

5. Lise: Tonight I’m gonna go to a club. I’m going to try and remember why, why I did it the first place, what it was like to be there, be in that environment. See why people take it these days.

What do Lise’s street interviews reveal about ecstasy use and ecstasy users?

6. Lise: It’s an entire culture structured around an artificial feeling.

Lise visits a nightclub. Why does the experience prove disappointing? Do you agree with Lise’s views about electronic music parties?
7. What impact can ecstasy use have on individual's life?

<table>
<thead>
<tr>
<th>ECSTASY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical</td>
</tr>
<tr>
<td>Social</td>
</tr>
<tr>
<td>Emotional</td>
</tr>
<tr>
<td>Psychological</td>
</tr>
<tr>
<td>Legal</td>
</tr>
<tr>
<td>Economic</td>
</tr>
</tbody>
</table>
1. What does Lise’s conversation with her mother reveal about:
   o Lise;
   o her mother;
   o their relationship.

   Lise’s mum admits that had she known about her daughter’s ecstasy use that she would have been furious. There was no time to be angry when Lise’s ecstasy use was exposed.

   The emergency that surrounded the disclosure meant that her mother’s response was fear.

2. Lise did not seek support for her ill health until it escalated to an emergency situation.

   Why do you think Lise was reluctant to seek support?

   Working as a class, discuss the support that individuals who are suffering from drug dependence and drug-related ill health can access.

3. Mum: But there was almost comfort in there being something that may have caused it.

   Lise: Something to blame.

   How did the revelation of Lise’s ecstasy use shape Lise’s and her mother’s response to Lise’s breakdown?

Discussion 3: Breaking the law

Lise: When I was doing ecstasy, it was pretty easy to get hold of. I want to find out if anything’s changed, so I’m meeting detective Steve Taylor from a South Australian drug taskforce.

1. Of what significance is Lise’s conversation with Detective Chief Inspector Steve Taylor?

   Ecstasy is an illegal drug. It is illegal to use, possess, sell or make ecstasy, or bring it into the country.

   Drug laws in Australia distinguish between those who use drugs and those who supply or traffic drugs. The penalty received for an offence differs with the type of offence, prior convictions and the amount of drug, but fines can be heavy and being sent to prison is a possibility.

2. Make a ‘Fact or Fiction’ poster to educate your peers about the legal issues related to drug possession, use and cultivation by young people.


Discussion 4: Owning up

Lise: I look back on my behaviour at that time and I feel that I was very unstable and unbalanced.

All drugs have the potential for harm. For any drug there is a continuum of use and an associated continuum of harm, from non-use to hazardous use. As use increases, so does the potential for harm. No use is abstinence. It is difficult to guarantee safe use so the term safer use is used. Hazardous use may cause harm depending on the person, drug and environment. Harmful use causes damage to the health of the drug user and generally has adverse social consequences.

After two years of using ecstasy, Lise was suffering mental ill health. She remembers feeling incredibly anxious for several months and then losing all sense of reality. Lise was admitted to hospital and was then placed in twice weekly care. During this time, she experienced severe depression and suicidal thoughts.

In The Agony of Ecstasy Lise asks her mother if she knew that her daughter was taking ecstasy. Lise’s mum replies, ‘No, never dreamed that it would be anything more than marijuana.’ Lise’s mum is surprised by her daughter’s revelations about her ecstasy habit. She believed that Lise was ‘too intelligent’ to take such a risk. Her mum is shocked to learn that Lise sometimes brought ecstasy into the family home.

1. Professor McGregor: Yes so these guys here have been given MDMA. These are two male rats who have never met before. Normally they would check each other out a little bit and then retreat to opposite ends. But on ecstasy they come together and cuddle.

   Professor McGregor: if you give very very high doses of ecstasy to rats, mice or monkeys, then you will show this long-term depletion of serotonin in the brain. But unfortunately for people who take ecstasy, we were able to show lasting deficits, lasting problems with anxiety and sociability, with even quite small doses.

   Professor McGregor: Interestingly, if you look several weeks or months later at these rats who had a little bit of ecstasy,
there was no problem with their serotonin levels, that was all good. So there may be a disturbance in the oxytocin system of the brain.

Professor McGregor: And it may well be that certain people with certain genotypes should really avoid it because it’s going to play long term havoc with their social behaviour and mood.

At Sydney University, Professor Iain McGregor and his team have been researching the long term effects of MDMA use on rats.

Summarise Professor McGregor’s findings.


Why is it easier for Professor McGregor to predict how ecstasy will affect the rats behaviour but is less able to predict the affect of ecstasy on human behaviour?

Draw an annotated diagram to explain the way that ecstasy affects the human brain. Your diagram should explain:

- the areas of the brain that are sensitive to the effects of ecstasy
- how ecstasy works
- the short term effects of ecstasy on the brain
- the long term effects of ecstasy on the brain
- the life threatening effects of ecstasy on the brain

2. Professor McGregor: I guess I would say how do you feel? Do you feel like you’re less sociable than you used to be do you feel like you’re more anxious? Everyone’s response is different to a drug.

Lise is concerned that her ecstasy habit may have ruined her oxytocin system.

Is Lise reassured by Professor McGregor’s answer?

What is oxytocin? What role does it play in regulating human behaviour?

3. Lise: I think the one I’m most concerned about is my empathy, after experiencing psychosis and depression you kind of lose the ability to connect with other people, and that would be the worst for me, if that never came back. In terms of intelligence, I’m pretty cocky in that area so it would be a blow to the ego if anything’s wrong there – but I do know that my memory and my focus are kind of off these days so I wouldn’t be surprised if there where some results in that area.

Lise decides to have her brain tested at the Adelaide Brain Clinic. Psychologist Dr Richard Clark begins by measuring then analysing, the electrical activity in Lise’s brain. This test is called a quantitative electroencephalography (QEEG). The second test Lise undertakes is cognitive, that measures memory, learning, attention and self-regulation.

What do the cognitive and QEEG tests reveal?

4. Professor Jason White at the University of South Australia is studying how MDMA impacts on vital functions. Having undertaken cognitive and QEEG testing, Lise decides to continue her investigation.

What do the movement tests reveal?

5. Lise: I’ve been tearing off all my fingernails, so you know, my anxiety is little bit high. But I feel very much that I’m going to walk out of this stronger, knowing what’s going on, knowing more about myself and knowing how to work on what damage I could have possibly done.

Lise: My memory is fine, all of my cognitive functions are very, very strong, my emotive functions are very strong. There was an issue with my sense of self-regulation, which is things like self esteem, my belief in myself, my opinion of how I fit in the world and my opinion of social interactions. That was all very, very low.

How does Lise view the results? How will she act on this knowledge?
Discussion 6: Self reflection

Lise admits that when she was on ecstasy that she couldn’t do anything. She dropped out of university three times. She claims that she achieved absolutely nothing.

1. Lise: It’s not nice to look back on this. I feel sad for myself that I was so clearly unhappy but didn’t realise it.

Lise finds the diary that she kept during her drug-taking days – a record of her thoughts when she was on ecstasy.

What does Lise think and feel about the diary? Why do you think she has kept the diary? What therapeutic purpose might the diary serve now that Lise has stopped taking ecstasy?

2. Mum: So these results you’re seeing as being positive?

Lise: I’m taking them in a positive way.

Lise shares the results of the tests with her mother.

How does Lise’s mum respond to the results?

3. Lise has now returned to studying and is pursuing her goals of writing and research.

What role is Lise’s shed playing in her recovery?

Explain the significance and the symbolism of Lise’s meditation machine.

Participants

Lise van Konkelenberg
Robyn van Konkelenberg
Detective
Chief Inspector Steve Taylor
Professor Iain McGregor
Dr Richard Clark
Professor Jason White
Dr Gabrielle Todd
Dr Dominic Thewlis

The Agony of Ecstasy online

https://www.facebook.com/theagonyofoe
Key Creatives

Budaya Productions
Budaya Productions is an independent production company based in Adelaide, South Australia. The company creates documentaries and collaborates with other filmmakers, as well as a diverse range of communities.


Katrina Lucas - Writer | Director | Producer
As a creative producer and director, Katrina Lucas’ documentary film work has screened on both big and small screens in Australia and internationally. In 2009 she was the recipient of the South Australian Screen Awards (SASA) Emerging Producer Award, and in 2011 directed an educational film about Melbourne street art that was nominated for an ATOM award. Recently Lucas produced AFI-nominated director Shalom Almond’s documentary My Long Neck (2013), which premiered at DocWeek 2014. Lucas is currently producing the Screen Australia Signature documentary funded Driving My Mother Sane for filmmaker Paul Gallasch. Her next project as director follows a pop girl group with intellectual disabilities as they create and release their debut album.

Lauren Drewery - Writer | Executive Producer
Lauren Drewery works as a writer, producer, director and story editor in partnership with filmmakers in Australia, Canada, the US and Italy. She was executive producer/script editor on My Long Neck (2013), Project Baby (2012) and Chasing Shadows (2011). Drewery also directed The Graduate from Sudan (2009), and was a writer/producer on The Lost Ship of Venice for Discovery/France 5 (2007), Born to Fly for Nat Geo International (2006), and the PBS series Secret Files.

Juju Haifawi - Co-Writer | Co-Producer
Juju Haifawi is an experienced arts producer, having worked for Gorgeous Festival and MIMM Festival in Adelaide and as curator for numerous group exhibitions. Haifawi currently works at a national NGO as a facilitator for artists living with mental illness, as well as being a visual artist and designer herself. Her designs have been featured in various galleries around Australia as well as on the children’s television program The Fairies for Channel 7. Haifawi’s personal life has been impacted by ecstasy use and mental illness, which is why she took this project on board.

Mark Andersson - Cinematographer | Editor
As a cinematographer and editor with a strong background in observational documentary, Mark Andersson’s films have screened on SBS, ABC, NITV, Australia Network, Al Jazeera and at numerous national and international festivals. Andersson has won a number of ACS awards for his cinematography, and previously shot two of the Opening Shot programs for ABC2 in 2012 – ‘Love Heart Baby’ and ‘Meatwork’. Andersson is currently shooting and editing the behind the scenes/DVD extras for the Foxtel miniseries Deadline Gallipoli.