

Executive Summary

The IDRS sample is a sentinel group of people aged 18 years or older who injected illicit drugs ≥ 6 days in the preceding six months and resided in Perth, Western Australia (WA). Participants were recruited via advertisements in needle and syringe programs, pharmacies providing Opioid Agonist Therapy (OAT), and other harm reduction services, as well as via peer referral. The results are not representative of all people who use illicit drugs, nor of use in the general population. **Data were collected between June and July 2024. In Perth, WA, interviews in 2020 and 2021 were delivered face-to-face as well as via telephone, while in 2022, they were only conducted via telephone to reduce the risk of COVID-19 transmission. All interviews prior to 2020 were conducted face-to-face. In 2023 and 2024, they were again delivered face-to-face as well as via telephone. This methodological change should be factored into all comparisons of data from the 2020-2024 samples relative to previous years.**

Sample Characteristics

The IDRS sample recruited from Perth, WA in 2024 (N=103) was fairly consistent with the Perth profile in previous years, whereby two thirds (69%) were male, with a median age of 46 years. The majority (82%) of the sample were unemployed at the time of interview, and most (87%) had received a government pension/allowance or benefit in the month prior to interview. The median income per week showed a significant increase, from \$395 in 2023 to \$450 in 2024 ($p=0.008$). Sexual identities remained consistent with 2023 with most participants reporting being heterosexual (90%). Participants typically endorsed heroin as their drug of choice in 2024 (64%; 55% in

2023), followed by methamphetamine (24%; 38% in 2023).

Heroin

After a steady resurgence in recent (i.e., past six month) heroin use up until 2016, a downward trend has been observed since 2017. However, the percentage of respondents who reported recent use of heroin has remained stable between 2023 (63%) and 2024 (70%). There was a significant increase in the frequency of heroin use in 2024, participants reported using heroin on an average of 90 days (IRQ=72-180) compared to 80 days in 2023 (IRQ=17-168; $p=0.028$). There was also a significant increase in weekly use of heroin in 2024 (88%) compared to 2023 (71%; $p=0.022$). In 2024, participants reported injecting heroin on an average of 90 days (IRQ=72-180) a significant increase compared to 80 days in 2023 (IRQ=16-168; $p=0.025$). Perceived purity and availability of heroin remained stable between 2023 and 2024, while there was a significant decrease in the median price of one point of heroin from \$150 in 2023 to \$100 in 2024 ($p<0.001$).

Methamphetamine

Recent use of any methamphetamine has fluctuated over the years, showing a general downward trend since monitoring began until 2009, which was followed by an upward trend since 2012. Consistent with the fluctuating use of methamphetamines, there was a significant reduction in recent use of methamphetamines in 2024 (65%; 79% in 2023; $p=0.044$). However, there was a significant increase in daily use of any methamphetamines in 2024 (24%) compared to 2023 (9%; $p=0.021$). The use of base and powder methamphetamine has decreased throughout the years which was driven by an increase in the use of crystal

methamphetamine (65% in 2024), the most commonly used form since 2011 in Perth. 2024 saw a significant reduction in the participants reporting use of methamphetamine powder ($n \leq 5$) compared to 2023 (10%; $p=0.046$). Most participants (73%) reported weekly or more frequent use of any methamphetamine in 2024 (65% in 2023), with a significant increase in daily use of methamphetamine in 2024 (24%; 9% in 2023; $p=0.021$).

The recent use of crystal methamphetamine (65%) significantly decreased in 2024 (79% in 2023; $p=0.044$). However, there was a significant increase in the daily use of crystal methamphetamine (23%) in 2024 (9% in 2023; $p=0.038$). There was also a significant decrease in the number of participants who reported swallowing crystal methamphetamine in 2024 ($n \leq 5$) compared to 2023 (10%; $p=0.038$). Of the participants who reported recent use of crystal methamphetamine the median typical amount used per day was 0.2 grams (IQR=0.1-0.2) a significant increase from 2023 (0.1 grams; IQR=0.1-0.3; $p=0.043$). The median amount used per day in 2024 was 0.3 grams (IQR=0.2-0.6), which was also a significant increase from 2023 (0.2 grams; IQR=0.1-0.3); $p=0.014$).

The perceived purity and availability of crystal and powder methamphetamine remained stable between 2023 and 2024. However, the reported median price of crystal methamphetamine significantly decreased from \$80 for one point in 2023 to \$50 in 2024 ($p=0.004$).

Cocaine

Similar to previous years, in 2023, cocaine use amongst people who inject drugs in Perth was infrequent and sporadic. Recent use of cocaine significantly reduced to 9%

(21% in 2023; $p=0.020$), on a median of two days (2 days in 2023). There was a significant decrease in the number of participants who reported injecting cocaine in 2024 ($n \leq 5$) compared to 2023 (57%; $p=0.042$).

Cannabis and/or Cannabinoid-Related Products

Recent use of non-prescribed cannabis and/or cannabinoid-related products remained stable, with 60% of participants reporting recent use in 2024 (66% in 2023). Whilst there was a significant reduction in the use of hydroponic cannabis, it remained the form most commonly used (88%; 98% in 2023; $p=0.028$), followed by bush cannabis (32%). Smoking remained the most common route of administration in 2024 (97%), while the number of participants who reported inhaling/vaporising ($n \leq 5$) as their route of administration in 2024 remained stable. Perceived purity, availability, and price of hydroponic and bush cannabis remained stable between 2023 and 2024.

Pharmaceutical Opioids

Recent use of all forms of pharmaceutical opioids remained stable in 2024, though an overall downward trend was observed since monitoring of each opioid first began. No significant differences in terms of non-prescribed recent use, nor frequency of use, were observed for methadone, buprenorphine-naloxone, morphine, codeine, tapentadol or tramadol between 2023 and 2024. There was a significant decrease in the frequency of non-prescribed use of buprenorphine tablets in 2024 (1 day (IQR=1-2)) compared to 2023 (7 days; IQR=5-24; $p=0.044$). Conversely, there was a significant increase in the frequency of non-prescribed use of oxycodone in 2024 (24 days (IQR=3-75)) compared to 2023 (2 days (IQR=1-3);

$p=0.025$). Furthermore, there was a significant decrease in participants reporting recent use of any (prescribed or non-prescribed) fentanyl between 2024 ($n \leq 5$) and 2023 (13%; $p=0.049$).

Other Drugs

There was a significant reduction in the recent use of use of any NPS between 2023 (12%) and 2024 (0%; $p < 0.001$). No significant differences in terms of non-prescribed recent use nor frequency of use were observed for benzodiazepines (e.g., Valium, Diazepam, Xanax, Kalma), pharmaceutical stimulants, antipsychotics, Unisom, or gabapentin between 2023 and 2024. There was a significant reduction in the frequency of use of pregabalin between 2023 (15 days (IQR=5- 54)) and 2024 (5 days (IQR=2-13); $p=0.032$). Alcohol use continued trending downward over the course of monitoring, with 52% reporting recent use in 2024 compared to 80% in 2023. While tobacco use has remained consistently high but stable over the period of monitoring, with 81% reporting recent use in 2024 (87% in 2023). Furthermore, there was a significant decrease in the recent use of non-prescribed e-cigarettes in 2024 (34%; 54% in 2023; $p=0.009$). Frequency of non-prescribed use of e-cigarettes remained stable in 2024 (120 days, 150 days in 2023). However, there was a significant decrease in participants reporting recent use of non-prescribed e-cigarettes in 2024 (34%; 54% in 2023; $p=0.009$). Twenty-three per cent of participants reported recent use of smoked or non-smoked illicit tobacco products.

Drug-Related Harms and Other Behaviours

Polysubstance use and bingeing

In 2024, 57% of the sample reported using two or more drugs (excluding tobacco and e-cigarettes) on the day preceding interview.

Forty-seven per cent of the Perth sample had binged on one or more drugs for 48 hours or more in the six months preceding interview (47% in 2023).

Injecting behaviours and equipment access

In 2024, 8% of participants reported receptive sharing of a needle or syringe (11% in 2023) and 15% reported distributive sharing in the past month (13% in 2023). Forty-four per cent of the sample reported that they had re-used their own needles in the past month (41% in 2023). Sixteen per cent of the 2024 sample reported sharing other equipment (including swabs, water, tourniquets, etc.), a significant decrease from 2023 (29%; $p=0.031$). There was a significant increase in the number of participants reporting using water when injecting in the month prior to the interview (93%; 84% in 2023; $p=0.049$).

Participants reported a significant increase in the number of times they injected in the past month (30 times; IQR=12-31) in 2024 compared to 2023 (16 times; IQR=8-30; $p=0.001$). Only 12% of participants reported difficulties accessing needles in the past month (14% in 2023; $p=0.827$).

A third (31%) of the sample reported experiencing injection-related problems in the past month (41% in 2023).

Overdose, naloxone and drug checking

Nineteen per cent of participants reported experiencing a non-fatal overdose in the 12 months preceding interview on any drug (17% in 2023), with 18% reporting a past year non-fatal opioid overdose (14% in 2023).

The number of respondents who reported having accessed naloxone in the past year remained stable in the last year, 63% in 2023 and 58% in 2024. There was a significant reduction in respondents who reported receiving training in naloxone administration in the last year from 44% in 2023 to 21% in 2024 ($p < 0.001$). The number of participants who reported ever being trained in naloxone administration also showed a decrease in 2024 (49%; 63% in 2023; $p = 0.050$). The number of participants who reported that they had ever resuscitated someone using naloxone remained stable, 44% in 2023 to 41% in 2024.

In 2024, 12% of participants reported that they or someone else had ever tested the contents and/or purity of their illicit drugs in Australia (15% in 2023), with 7% reporting doing so in the past year (9% in 2023). Of the participants who reported testing the contents of their illicit drugs, most (86%) reported using colorimetric or reagent test kits.

Dependence, treatment and Hepatitis C

Seventy percent of participants scored five or above on the Severity of Dependence Scale (SDS; 56% in 2023), indicating possible dependence relating to opioids, and 41% scored four or above (42% in 2023), indicating possible dependence relating to methamphetamine.

Two fifths (43%) of the sample reported being in any drug treatment for their substance use (48% in 2023), with methadone continuing to be the most common treatment received in 2024 (18%; 31% in 2023). Of the participants who were currently in treatment in 2024, a significant number (18%) of them reported being dissatisfied with the treatment (4% in 2023; $p = 0.050$).

Half of participants in 2024 (52%) reported that they had received a hepatitis C virus (HCV) antibody test in the past year (51% in 2023), while 38% had received a PCR or RNA test (48% in 2023). There was a significant reduction in the number of respondents who reported they had been tested for human immunodeficiency virus (HIV) in the past six months in 2024 (23%) compared to 2023 (38%; $p = 0.035$).

Sexual activity, mental health and health service access

Two fifths (41%) of the participants reported engaging in sexual activity in the past month (49% in 2023). Eighteen per cent of the participants reported having a recent sexual health check in the past six months, a significant decrease from 2023 (39%; $p = 0.002$). Participants reporting that they had ever had a sexual health check (60%) also showed a significant decrease compared to 2023 (75%; $p = 0.025$).

Self-reported mental health problems in the past six months remained stable in 2024 (47%; 52% in 2023). The two most commonly reported problems were anxiety (64%; 43% in 2023) and depression (62%; 73% in 2023).

The K10 score remained stable between 2023 and 2024 ($p = 0.070$), with 38% of

participants having a score of 30 or more (28% in 2023).

Most participants (81%) reported accessing any health service for alcohol and/or drug (AOD) support in the six months preceding interview in 2024 (89% in 2023). Primary services reported by participants for AOD support in 2024 were NSPs (63%; 42% in 2023; $p=0.005$), followed by GPs (43%; 45% in 2023), pharmacies (38%; not reported in 2023), and peer-based harm reduction services (22%; 57% in 2023; $p<0.001$).

Ninety-eight per cent of participants reported using a health service for any reason in 2024 (99% in 2023). Primary services included GPs (81%; 73% in 2023) and pharmacies (76%, not recorded in 2023). There was a significant increase in people accessing NSP's (67%) for any health reason in 2024 (44% in 2023; $p=0.001$). However, a significant decrease in the number of individuals (22%) utilising peer-based harm reduction services (61% in 2023; $p<0.001$).

Driving, contact with police and modes of purchasing illicit drugs

Eighty-one per cent of those who had driven recently reported driving within three hours of consuming an illicit or non-prescribed drug in the past six months (69% in 2023) and few participants ($n\leq 5$) reported driving while over the perceived legal limit of alcohol (12% in 2023).

Forty-seven per cent of participants reported engaging in 'any' crime in the past month in 2024 (40% in 2023), with 20% arrested in the past year (24% in 2023), and 48% reporting a lifetime prison history (59% in 2023).

Almost one quarter of participants (24%) reported a drug-related encounter with the

police that did not result in charge or arrest (21% in 2023).

In 2024, the most popular means of arranging the purchase of illicit or non-prescribed drugs in the 12 months preceding the interview was face-to-face (72%; 70% in 2023).