



# Difficulty accessing drug treatment among a national sample of people who regularly inject drugs, Australia, 2023

Udesha Chandrasena, Rachel Sutherland and Amy Peacock

This report was prepared by the National Drug and Alcohol Research Centre, UNSW Sydney

For further information: [u.chandrasena@unsw.edu.au](mailto:u.chandrasena@unsw.edu.au)

## Introduction

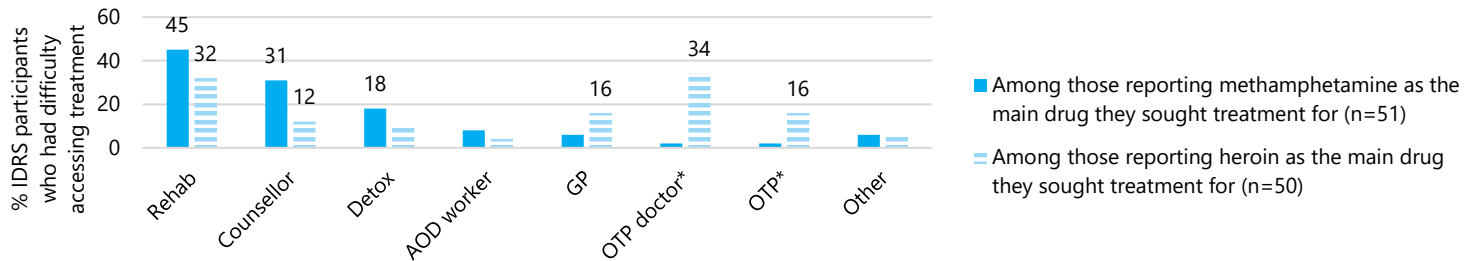
It is estimated that up to 500,000 people in Australia are unable to access alcohol and other drug (AOD) treatment (1). Difficulties in accessing treatment can increase risk of harm (2) and health care costs (1). This study aimed to examine whether people who inject drugs experience difficulty accessing treatment, and if so, what services they have difficulty accessing and the barriers to access among a sample of people in Australia who regularly inject drugs.

## Results

Using data from the [2023 Illicit Drug Reporting System](#) (N=820), which comprised surveys with 820 people in Australia who regularly inject drugs, recruited from all capital cities via harm reduction services and word-of-mouth, we found that:

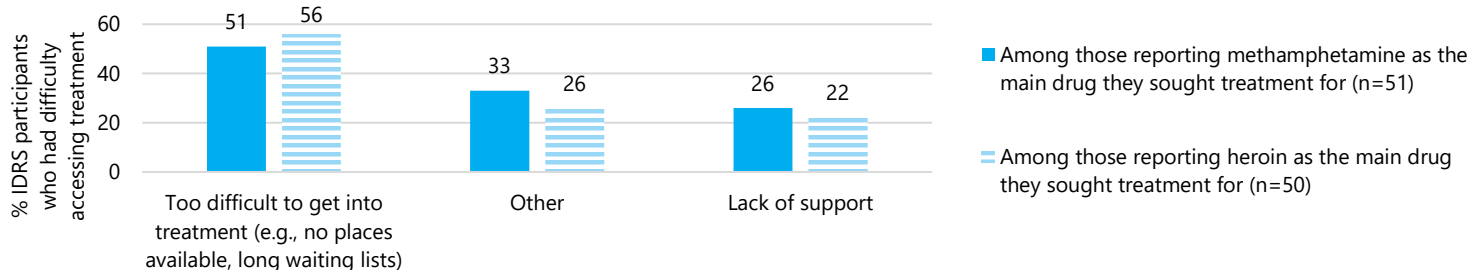
- ❖ 14% of the 2023 sample reported difficulty accessing drug treatment in the last six months, of which 43% and 42%, respectively, reported methamphetamine and heroin as the main drug they sought treatment for last time.

Figure 1: Types of drug treatment services participants had difficulty accessing in the past six months, nationally, 2023



Note. Y axis reduced to 60% to improve visibility. The response option 'Don't know' was excluded from analysis. Per cent suppressed due to small cell size (n≤5 but not 0). \*OTP refers to opioid treatment therapy.

Figure 2: Reasons for difficulty accessing treatment, nationally, 2023



Note. Y axis reduced to 60%. The response option 'Don't know' was excluded from analysis. Reasons with low endorsement (n≤5 but not 0) are not shown.

## Discussion

In 2023, 45% of the IDRS sample reported accessing some form of treatment in the past six months (3), while 14% reported difficulty accessing treatment. The most common service participants seeking treatment for methamphetamine had trouble accessing was rehabilitation services, while those seeking treatment for heroin most commonly reported difficulty finding a prescribing OTP doctor. The most common reason for difficulties in access was related to limited treatment spaces and excessive waiting times among both groups. This was followed by a further 33% and 26% of participants seeking treatment for methamphetamine and heroin, respectively, having difficulty due to 'other' reasons. Collectively, these reasons spanned regulatory-level issues such as lack of access to Medicare, service-level issues such as inability to meet the specific rules and requirements of the service, and individual-level issues such as resolving logistical problems. These different types of barriers complicate efforts to increase access to treatment through greater funding and service provision alone. It emphasises the need for increased involvement of people who are seeking or already engaged in treatment in forming and implementing best practice strategies to overcome the macro-, meso- and micro-level challenges faced by people attempting to access care.

**References:**[1] Ritter A et al. New horizons: the review of alcohol and other drug treatment services in Australia. Drug policy modelling program, NDARC. 2014 Jul 6. (2) Rombouts SA et al. Evidence based models of care for the treatment of alcohol use disorder in primary health care settings: a systematic review. BMC Family Practice. 2020 Dec;21:1-7. (3) Sutherland R et al. Australian Drug Trends 2023: Key Findings from the National Illicit Drug Reporting System (IDRS) Interviews. Sydney: NDARC, UNSW Sydney; 2023. DOI: 10.26190/tjt1-8454.

**Recommended citation:** Chandrasena U, Sutherland R, Peacock A. Difficulty accessing drug treatment among a national sample of people who regularly inject drugs, Australia, 2023. Drug Trends Bulletin Series. Sydney: National Drug and Alcohol Research Centre, UNSW Sydney; 2024. Available from: <https://doi.org/10.26190/unsworks/30388>