IDRS

AUSTRALIAN DRUG TRENDS 2021

Key Findings from the National Illicit Drug Reporting System (IDRS) Interviews

AUSTRALIAN DRUG TRENDS 2021: KEY FINDINGS FROM THE NATIONAL ILLICIT DRUG REPORTING SYSTEM (IDRS) INTERVIEWS

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Please note that as with all statistical reports there is the potential for minor revisions to data in this report over its life. Please refer to the online version at Drug Trends.

Please contact the Drug Trends team with any queries regarding this publication: drugtrends@unsw.edu.au

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Acknowledgements

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Research Team

The National Drug and Alcohol Research Centre (NDARC), UNSW Sydney, coordinated the IDRS. The following researchers and research institutions contributed to the IDRS in 2021:

- Antonia Karlsson, Julia Uporova, Daisy Gibbs, Rosie Swanton, Olivia Price, Udesha Chandrasena, Professor Louisa Degenhardt, Professor Michael Farrell, Dr Rachel Sutherland and Dr Amy Peacock, National Drug and Alcohol Research Centre, University of New South Wales, New South Wales;
- Emma Woods and Professor Paul Dietze, Burnet Institute, Victoria;
- Yalei Wilson and Associate Professor Raimondo Bruno, School of Psychology, University of Tasmania, Tasmania;
- Dr Seraina Agramunt and Professor Simon Lenton, National Drug Research Institute, Curtin University, Western Australia;
- Chris Moon, Northern Territory Department of Health, Northern Territory; and
- Catherine Daly, Dr Natalie Thomas, Dr Jennifer Juckel and Dr Caroline Salom, Institute for Social Science Research, The University of Queensland, Queensland.

We would like to thank past and present members of the research team.

Participants

We would like to thank all the participants who were interviewed for the IDRS in the present and in previous years.

Contributors

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We acknowledge the traditional custodians of the land on which the work for this report was undertaken. We pay respect to Elders past, present, and emerging.

Abbreviations

ACT	Australian Capital Territory
Alpha PVP	α-Pyrrolidinopentiophenone
CBD	Cannabidiol
EDRS	Ecstasy and Related Drugs Reporting System
GBL	Gamma-butyrolactone
GHB	Gamma-hydroxybutyrate
GP	General Practitioner
HCV	Hepatitis C Virus
HIV	Human immunodeficiency virus
IDRS	Illicit Drug Reporting System
IQR	Interquartile Range
LSD	*d*-lysergic acid
MDA	3,4-methylenedioxyamphetamine
MDMA	3,4-methylenedioxymethamphetamine
MDPV	Methylenedioxypyrovalerone
N (or n)	Number of Participants
NDARC	National Drug and Alcohol Research Centre
NPS	New Psychoactive Substances
NSP	Needle and Syringe Program
NSW	New South Wales
NT	Northern Territory
OTC	Over-the-Counter
PBS	Pharmaceutical Benefits Scheme
PCR	Polymerase Chain Reaction
QLD	Queensland
RNA	Ribonucleic Acid
SA	South Australia
SD	Standard Deviation
TAS	Tasmania
TGA	Therapeutic Goods Administration
UNSW	University of New South Wales
VIC	Victoria
WA	Western Australia

Executive Summary

The IDRS sample is a sentinel group of people aged 18 years or older who injected illicit drugs at least once monthly in the preceding six months and resided in the capital cities of Australia. Participants were recruited via advertisements in needle syringe programs 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 in 2021 from June-July. Interviews in 2020 and 2021 were delivered face-to-face as well as via telephone, due to COVID-19 restrictions being imposed in various jurisdictions throughout the data collection periods. This methodological change should be factored into all comparisons of data from the 2020 and 2021 sample relative to previous years.**

Sample Characteristics

The IDRS sample in 2021 (N=888) differed in some ways to the sample in 2020. Despite these differences, the 2021 sample predominantly identified as male (65%) with a mean age of 45, mostly consistent with the national profile in previous years. A significant change was observed in the drug of choice nominated by participants (p<0.001), with methamphetamine (45%) surpassing heroin (40%) for the first time since monitoring began. There was also a significant change in the drug injected most often in the past month (p<0.001), with methamphetamine being nominated as the drug injected most often by 53% of the sample, the highest per cent since monitoring began. Similarly, there was an increase in weekly or more frequent methamphetamine use compared to 2020 (58% versus 48%; p<0.001) whereas a decrease in weekly or greater use of heroin (37% versus 51%; p<0.001) was reported.

COVID-19 Impact

This brief section was included to summarise data collected specifically related to COVID-19 and associated restrictions; subsequent sections reflect standard annual reporting. In 2021, 46% of the national sample had been tested for SARS-CoV-2 by the time of interview and no one had been diagnosed with the virus. The majority (72%) of participants were 'not at all' worried about contracting COVID-19, and 18% of participants reported that they had quarantined for 14 or more days due to a possible exposure in the past 12 months. Ten per cent had received at least one dose of the COVID-19 vaccine by the time of interview.

Heroin

Recent (i.e., past six month) use of any heroin decreased from 63% in 2020 to 50% in 2021 (p<0.001), although there was large jurisdictional variation (e.g., n≤5 of participants in the NT sample versus 78% in the ACT sample). Median frequency of use also decreased, from 96 days in 2020 to 72 days in 2021 (p=0.008). Further, there were significant changes in perceived purity (p<0.001) and availability (p=0.024), with more participants perceiving heroin to be of 'high' purity (24%) and 'very easy' to obtain (40%) in 2021 compared to 2020 (14% and 35%, respectively). The price of a point of heroin also increased, from $70 in 2020 to $80 in 2021 ($p$=0.026).

Methamphetamine

Recent use of any methamphetamine has been gradually increasing since 2010. In 2021, 80% reported recent use, a significant increase from 2020 (72%; p<0.001) but similar to the per cent reporting use in 2019 (78%). Crystal was the most common form of methamphetamine used by participants (78%), followed by powder (12%) and base (3%). Relative to 2020, frequency of use increased from a median of 48 days to 72 days in 2021 (p=0.008), the highest frequency of use observed since monitoring began. The price of a point of crystal methamphetamine decreased from $100 in 2020 to $50 in 2021 ($p$<0.001), returning to the median price observed between 2016-2019. There were significant

changes in perceived purity (p<0.001) and availability (p<0.001). Specifically, more participants perceived purity to be 'high' (14% in 2020 versus 28% in 2021) and availability as 'very easy' (17% in 2020 versus 46% in 2021).

Cocaine

Recent use of cocaine and frequency of use has generally decreased amongst the national sample since the beginning of monitoring (35% in 2001). In 2021, recent use of cocaine remained stable relative to 2020 (15% versus 17% in 2020). Median frequency of use remained stable at three days.

Cannabis

In 2020 and 2021, recent use of non-prescribed cannabis was reported by the lowest per cent since monitoring began (67%, respectively). Frequency of non-prescribed use remained stable at a median of 180 days (160 days in 2020). Just over half (51%) of people who had recently used non-prescribed cannabis reported using cannabis daily (48% in 2020). The price of a gram was stable for both bush and hydroponic cannabis, whereas a significant decrease was observed for the price on an ounce of bush in 2021 ($200) relative to 2020 ($250; p=0.038).

Pharmaceutical Opioids

Non-prescribed use of most forms of pharmaceutical opioids has mainly remained stable or significantly declined since monitoring of each opioid first began. In 2021, morphine was the most common pharmaceutical opioid used in a non-prescribed context (16%). Six per cent of the national sample reported recent non-prescribed fentanyl use, stable from 6% in 2020. There was a significant decrease of those reporting recent use of any methadone in 2021 relative to 2020 (35% versus 43% in 2020; p=0.002), although non-prescribed use remained stable at 13%.

Other Drugs

Use of NPS has remained low and stable over the period of monitoring. In 2021, 7% reported recent use, the lowest per cent since monitoring began. Use of 'new' drugs that mimic the effects of cannabis and opioids were reported by 4% and 1%, respectively. Recent use of e-cigarettes (18%) significantly increased compared to 2020 (13%; p=0.002), whilst use of all other monitored drugs remained stable. One-in-ten reported recent use of GHB /GBL/1,4-BD.

Drug-Related Harms and Other Associated Behaviours

Nearly one in five participants (17%) reported overdosing on any drug in the preceding year, most commonly heroin (9%). Over one in three (37%) had ever been trained in naloxone administration and 4% of the sample had ever been resuscitated with naloxone by somebody trained through the take-home naloxone program. One-quarter of the sample reported driving within three hours of consuming an illicit or non-prescribed drug in the past six months and 4% reported driving while over the perceived legal limit of alcohol. In 2021, 6% of participants reported receptive sharing of a needle or syringe and 10% reported distributive sharing in the past month. One in four participants (26%) reported to have experienced injection-related problems in the past month, most commonly nerve damage (11%). Nearly two-fifths of the sample were currently in any drug treatment (37%), a decrease relative to 2020 (48%; p<0.001). Over two-fifths of participants in 2021 (44%) reported that they had received a hepatitis C virus (HCV) antibody test in the past year, 40% had received an RNA test and 9% reported having a current HCV infection. Fourteen per cent of participants reported that they or someone else had ever tested the content and/or purity of their illicit drugs in Australia, with 8% undertaking this in the past year. Self-reported mental health problems in the past six months and past month criminal activity remained stable in 2021 (47% and 39%, respectively).

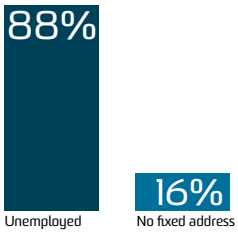
IDRS Illicit Drug Reporting System

2021 SAMPLE CHARACTERISTICS

In 2021, 888 people from all Australian capital cities participated in IDRS interviews.

45 years 65%

The mean age in 2021 was 45, and 65% identified as male.

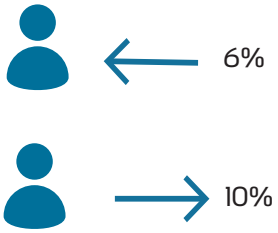


In the 2021 sample, 88% were unemployed and 16% had no fixed address.

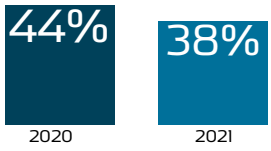
- Injected heroin
- Injected methamphetamine
- Injected other drug

Participants were recruited on the basis that they had injected drugs at least monthly in the previous 6 months.

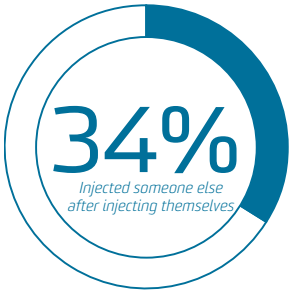
INJECTING RELATED RISKS AND HARMS



In 2021, 6% of the IDRS sample reported receptive needle sharing, and 10% reported distributive needle sharing.



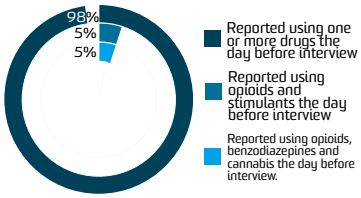
The number of people who re-used their own needles reduced from 44% in 2020 to 38% 2021.



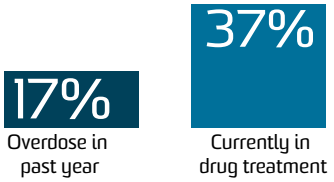
In the national sample, 34% of participants reported injecting someone else after injecting themselves.

In 2021, 26% of the national sample reported having an injection-related health issue in the month preceding interview.

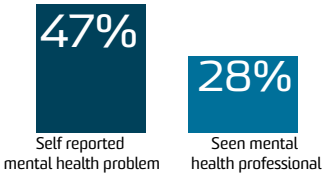
OTHER HARMS AND HELP-SEEKING



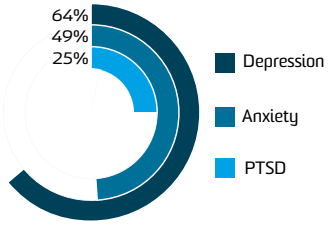
IDRS participants' use of drugs the day before interview participation, 2021.



In the 2021 sample, 17% had experienced a non-fatal overdose in the previous 12 months and 37% were currently in drug treatment.

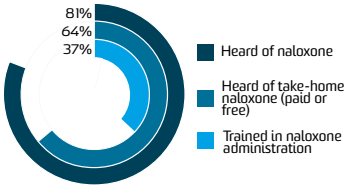


In the sample, 47% self reported a mental health problem in the six months prior to interview, and 28% had seen a mental health professional.



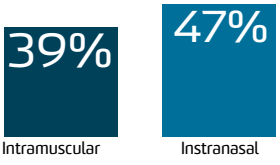
Of those who commented, the top three most common mental health issues reported were depression (64%), anxiety (49%) and PTSD (25%).

NALOXONE AND HARM REDUCTION



IDRS participants' knowledge of, and participation in, the take home naloxone program remained stable in 2021.

Of those who reported having heard of naloxone, 29% had used naloxone to resuscitate someone who had overdosed.

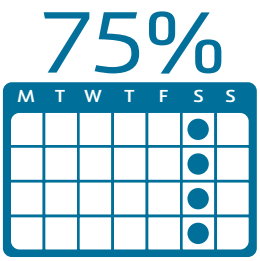


Of those who reported ever accessing naloxone, 39% received intramuscular naloxone and 47% intranasal naloxone.

In 2021, 8% of the sample reported that they or someone else had tested the content and/or purity of their illicit drugs in Australia in the past year.

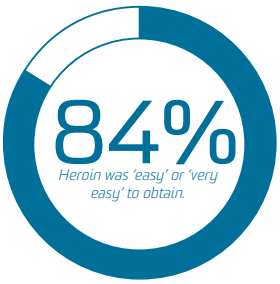
HEROIN

Past 6 month use of heroin decreased to 50% in the 2021 IDRS sample (63% 2020).



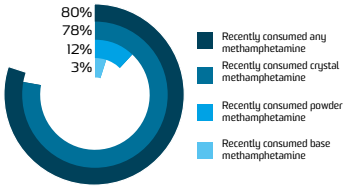
Of those who had recently consumed heroin, 75% used it weekly or more often, a decrease from 80% in 2020.

The median reported price for a point of heroin was $80 in 2021, an increase from $70 in 2020.

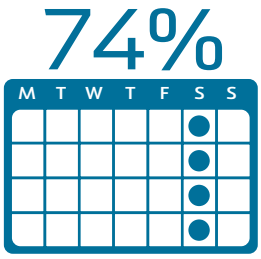


Of those who could comment 84% perceived heroin to be 'easy' or 'very easy' to obtain, up from 77% in 2020.

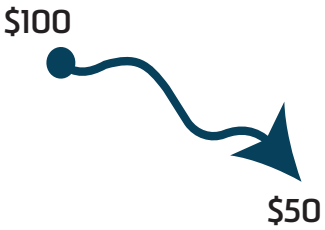
METHAMPHETAMINE



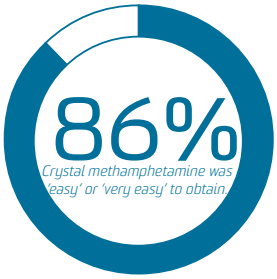
Past 6 month use of any (80%) and crystal (78%) methamphetamine increased since 2020, while recent use of powder (12%) and base (3%) decreased.



Of those who had recently used any form of methamphetamine, 74% used it at least weekly, an increase from 68% in 2020.



The median reported price for a point of methamphetamine was $50 in 2021, a decrease from $100 in 2020.



Of those who could comment, 86% perceived crystal methamphetamine to be 'easy' or 'very easy' to obtain in 2021, an increase from 48% in 2020.

OTHER DRUGS

Non-prescribed morphine

Past 6 month use of non-prescribed morphine was stable at 15% in the 2020 IDRS sample and 16% in 2021.

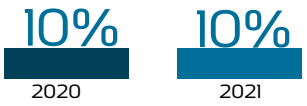
Non-prescribed fentanyl

Past 6 month use of non-prescribed fentanyl was stable at 6% in the 2020 IDRS sample and 6% in 2021.

Non-prescribed pregabalin

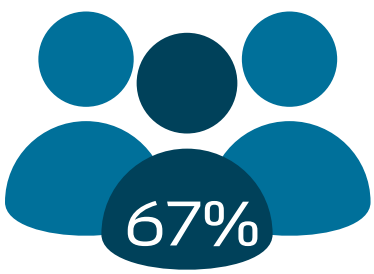
Past 6 month use of non-prescribed pregabalin was stable at 14% in the 2020 IDRS sample and 16% in 2021.

GHB/GBL/1,4-BD

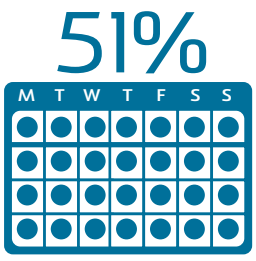


Past 6 month use of GHB/GBL/1,4-BD was stable at 10% in the 2020 IDRS sample and 10% in 2021.

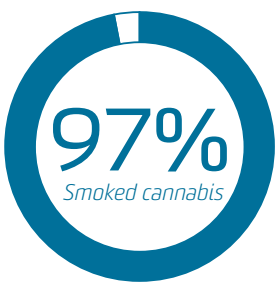
CANNABIS



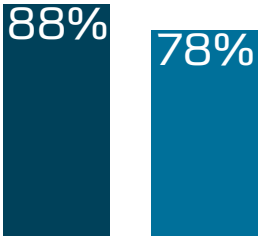
Past 6 month use of any cannabis was stable at 67% in the 2020 IDRS sample and 67% in 2021.



Of those who had consumed cannabis recently, half reported daily use (51%).



Of people who had consumed cannabis in the last 6 months, 97% had smoked it.



Of those who could comment 88% perceived hydro and 78% perceived bush to be 'easy' or 'very easy' to obtain.

1

Background and Methods

The Illicit Drug Reporting System (IDRS) interviews are conducted annually with a sentinel group of people who regularly inject drugs, recruited from all capital cities of Australia (N=888 in 2021). The results from the IDRS interviews are not representative of all people who consume drugs, nor of illicit drug use in the general population, but this is not the aim of these data. Rather, these data are intended to provide evidence indicative of emerging issues that warrant further monitoring. These findings should be interpreted alongside analyses of other data sources for a more complete profile of emerging trends in illicit drug use, market features, and harms in Australia.

Background

The Illicit Drug Reporting System (IDRS) is an ongoing illicit drug monitoring system which has been conducted in all states and territories of Australia since 2000, and forms part of Drug Trends. The purpose of the IDRS is to provide a coordinated approach to monitoring the use, market features, and harms of illicit drugs.

The IDRS is designed to be sensitive to emerging trends, providing data in a timely manner, rather than describing issues in extensive detail. It does this by studying a range of data sources, including data from annual interviews with people who regularly inject drugs and from secondary analyses of routinely-collected indicator data. This report focuses on the key results from the annual interview component of the IDRS.

Methods

IDRS 2000-2019

Full details of the methods for the annual interviews are available for download. To briefly summarise, participants were recruited using multiple methods (e.g., needle and syringe programs (NSP) and peer referral) and needed to: i) be at least 17 years of age (due to ethical requirements); ii) have injected non-prescribed or illicit drugs at least monthly during the six months preceding interview; and iii) have been a resident of the capital city in which the interview took place for ten of the past 12 months. Interviews took place in varied locations negotiated with participants (e.g., treatment services, coffee shops or parks), and were conducted using REDCap (Research Electronic Data Capture), a software program to collect data on laptops or tablets. Following provision of written informed consent and completion of a structured interview, participants were reimbursed $40 cash for their time and expenses incurred.

IDRS 2020-2021: COVID-19 Impacts on Recruitment and Data Collection

Given the emergence of COVID-19 and the resulting restrictions on travel and people's movement in Australia (which first came into effect in March 2020), face-to-face interviews were not always possible due to the risk of infection transmission for both interviewers and participants. For this reason, all methods in 2020 were similar to previous years as detailed above, with the exception of:

1. Means of data collection: Interviews were conducted via telephone across all jurisdictions in 2020, with some jurisdictions (NT and TAS) also offering face-to-face interviews;
2. Means of consenting participants: Participants' consent to participate was collected verbally prior to beginning the interview;
3. Means of reimbursement: Participants were given the option of receiving $40 reimbursement via one of three methods, comprising bank transfer, PayID or gift voucher, where completing the interview via telephone; and
4. Age eligibility criterion: Changed from 17 years old to 18 years old.

In 2021, a hybrid approach was used whereby interviews were conducted either face-to-face (with participants reimbursed with cash) or via telephone/videoconference (with participants reimbursed via bank transfer or other electronic means). Face-to-face interviews were the preferred methodology, however the introduction of restrictions by various jurisdictional governments throughout the recruitment period meant that telephone interviews were conducted when required (i.e., in accordance with government directives) or when requested by services. Consent was collected verbally for all participants.

A total of 888 participants were recruited across capital cities nationally (June-July, 2021). The sample sizes recruited from the capital city in each jurisdiction were: Sydney, NSW n=150; Melbourne, VIC n=148; Adelaide, SA n=101; Canberra, ACT n=100; Hobart, TAS n=95; Brisbane and Gold Coast, QLD n=101; Darwin, NT n=94; and Perth, WA n=99. Of this number, 196 interviews were conducted via telephone: Sydney, NSW n=62; Melbourne, VIC n=27; Adelaide, SA n=2; Canberra, ACT n=0; Hobart, TAS n=0; Brisbane, QLD n=73; Darwin, NT n=0; and Perth, WA n=32.

Data Analysis

For normally distributed continuous variables, means and standard deviations (SD) are reported; for skewed data (i.e., skewness > ±1 or kurtosis > ±3), medians and interquartile ranges (IQR) are reported. Tests of statistical significance have been conducted between estimates for 2020 and 2021. Note that no corrections for multiple comparisons have been made and thus comparisons should be treated with caution. Values where cell sizes are ≤5 have been suppressed with corresponding notation (zero values are reported). References to 'recent' use and behaviours refers to the past six-month time period.

Interpretation of Findings

Caveats to interpretation of findings are discussed more completely in the methods for the annual interviews but it should be noted that these data are from participants recruited in capital cities, and thus do not reflect trends in regional and remote areas. Further, the results are not representative of all people who consume illicit drugs, nor of illicit drug use in the general population, but rather are intended to provide evidence indicative of emerging issues that warrant further monitoring.

This report covers a subset of items asked of participants and does not include jurisdictional-level results beyond estimates of recent use of various substances, nor does it include implications of findings. These findings should be interpreted alongside analyses of other data sources for a more complete profile of emerging trends in illicit drug use, market features, and harms in Australia (see section on 'Additional Outputs' below for details of other outputs providing such profiles).

Differences in the methodology, and the events of 2020-2021, must be taken into consideration when comparing 2020-2021 data to previous years, and treated with caution.

Additional Outputs

Infographics from this report are available for download. There are a range of outputs from the IDRS which triangulate key results from the annual interviews and other data sources and consider the implications of these findings, including jurisdictional reports, bulletins, and other resources available via the Drug Trends webpage. This includes results from the Ecstasy and Related Drugs Reporting System (EDRS), which focuses on the use of ecstasy and other stimulants.

Please contact the research team at drugtrends@unsw.edu.au with any queries, to request additional analyses using these data, or to discuss the possibility of including items in future interviews.

2

Sample Characteristics

Participants were asked questions about select sociodemographic characteristics, as well as key drug use characteristics of interest.

Sample Characteristics

In 2021, there was a significant change in recruitment methods compared to 2020 (p<0.001), with fewer participants being recruited via NSPs (54% versus 63% in 2020), and more via word-of-mouth (38% versus 25% in 2020). Seventeen per cent of the 2021 sample had taken part in the 2020 interview (16% of the 2020 sample had taken part in the 2019 interview; p=0.884).

A significant change in gender identity was observed in 2021 compared to 2020 (p=0.027), with more participants identifying as male (65% versus 59% in 2020). The mean age of the sample was 45 years (SD=10; 44 years in 2020; SD=9; p=0.216) (Table 1). The majority of the sample (88%) were unemployed at the time of interview (88% in 2020; p=0.724), although nearly three-fifths (58%; 62% in 2020; p=0.085) of the sample reported having received a post-school qualification(s). The vast majority of participants (95%) reported receiving a government pension, allowance or benefit in the past month, stable from 2020 (94%; p=0.660). The median weekly income in 2021 was $358 (IQR=300-460), significantly lower than reported in 2020 ($500; IQR=421-555; p<0.001).

There was a significant change in drug of choice in 2021 compared to 2020 (p<0.001), with methamphetamine (45% versus 33% in 2020) surpassing heroin (40% versus 50% in 2020) for the first time since monitoring began in 2000 (Figure 1). There was also a significant change in the drug injected most often in the past month (p<0.001), with methamphetamine reported as the drug injected most often by over half of the sample (53% versus 41% in 2020), the highest percentage recorded since monitoring began (Figure 2). Inversely, there was a decrease in participants reporting that heroin was the drug injected most often in the past month (34% versus 46% in 2020).

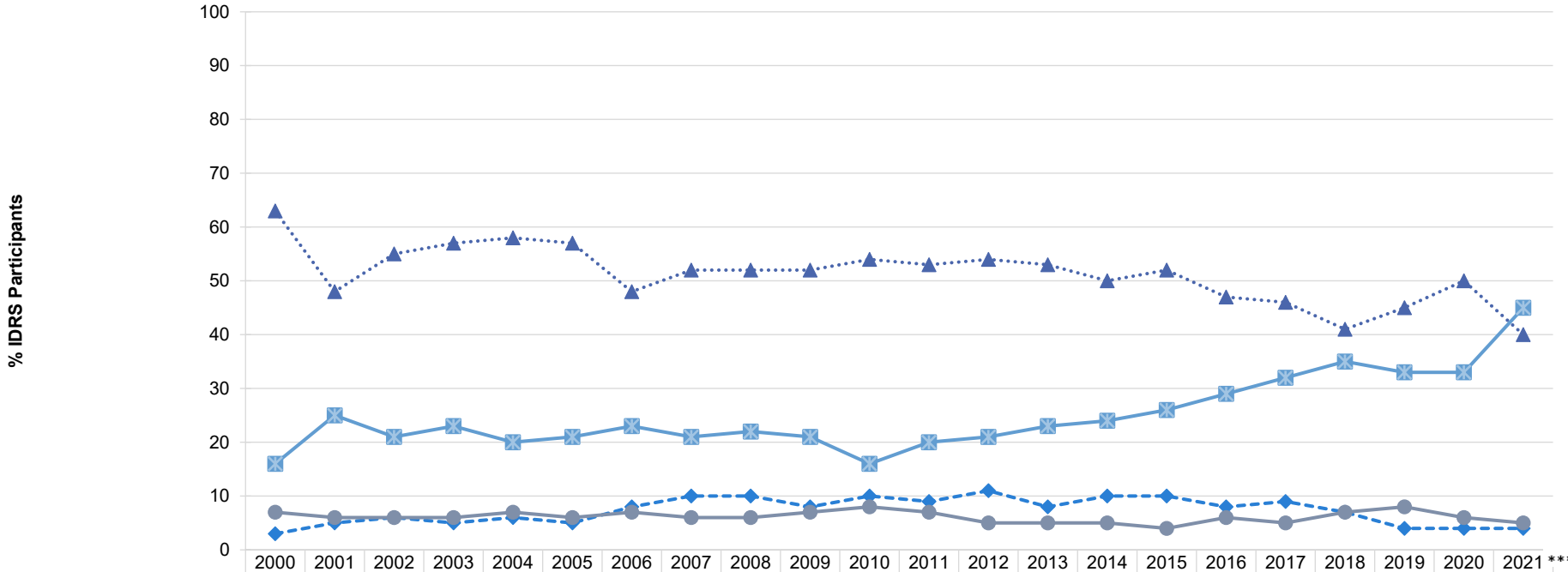
In addition, there was an increase in weekly or more frequent consumption of crystal methamphetamine in 2021 compared to 2020 (57% versus 47%; p<0.001), the highest percentage recorded since monitoring began (Figure 3). In contrast, significantly fewer participants reported weekly or more frequent use of powder methamphetamine (6%; 8% in 2020; p=0.022) and heroin (37% versus 51% in 2020; p<0.001) (Figure 3).

Table 1: Demographic characteristics of the sample, nationally and by jurisdiction, 2019-2021

	National			NSW	ACT	VIC	TAS	SA	WA	NT	QLD
	N=902	N=884	N=888	N=150	N=100	N=148	N=95	N=101	N=99	N=94	N=101
	2019	2020	2021								
Mean age (years; SD)	44 (10)	44 (9)	**45 (10)**	47 (10)	44 (9)	44 (9)	42 (9)	45 (10)	45 (10)	45 (12)	44 (10)
% Gender			*								
Female	31	40	**34**	28	30	28	28	43	42	35	47
Male	68	59	**65**	70	70	72	71	57	58	65	53
Non-binary	1	1	**0**	-	0	0	-	0	0	0	0
% Aboriginal and/or Torres Strait Islander	22	18	**23***	25	19	26	16	20	13	37	28
% Sexual identity											
Heterosexual	87	86	**82**	73	88	83	83	93	85	77	80
Homosexual	3	4	**4**	9	-	6	-	-	-	-	-
Bisexual	8	8	**11**	13	8	10	13	6	10	19	12
Queer	1	1	**1**	-	-	-	-	0	0	-	-
Other	1	1	**1**	-	-	0	0	0	-	0	-
Mean years of school education (range)	10 (1-12)	10 (1-12)	**10 1-12)***	10 (1-12)	10 (6-12)	10 (5-12)	10 (7-12)	10 (7-12)	10 (6-12)	10 (2-12)	10 (5-12)
% Post-school qualification(s)^	57	62	**58**	63	57	42	59	59	68	52	65
% Current employment status											
Unemployed	88	88	**88**	89	88	96	86	88	86	83	83
Full time work	1	3	**2**	-	-	-	-	-	-	7	-
% Past month gov't pension, allowance or benefit	93	94	**95**	97	98	96	96	96	92	91	93
Current median income/week ($; IQR)	300 (275-450)	500 (421-555)	**358 (300-460)*****	348 (300-442)	375 (295-450)	378 (300-450)	375 (300-500)	315 (280-438)	363 (325-495)	384 (300-475)	356 (300-490)
% Current accommodation											
Own home (inc.renting)~	70	69	**66**	82	75	44	65	73	53	73	69
Parents'/family home	6	6	**5**	-	-	7	9	6	7	-	-
Boarding house/hostel	6	9	**9**	4	-	14	7	-	15	9	13
Shelter/refuge	2	2	**2**	-	-	-	-	0	-	-	0
No fixed address	15	12	**16**	8	14	24	18	15	21	10	14
Other	1	1	**2**	-	-	9	0	-	-	-	-

Note. ^Includes trade/technical and university qualifications. ~ Up until and including 2019, 'own home' included private rental and public housing. In 2020, these were separated out. - Values suppressed due to small cell size (n≤5 but not 0). / denotes that this item was not asked in these years. *p<0.050; **p<0.010; ***p<0.001 for 2020 versus 2021 for the national sample.

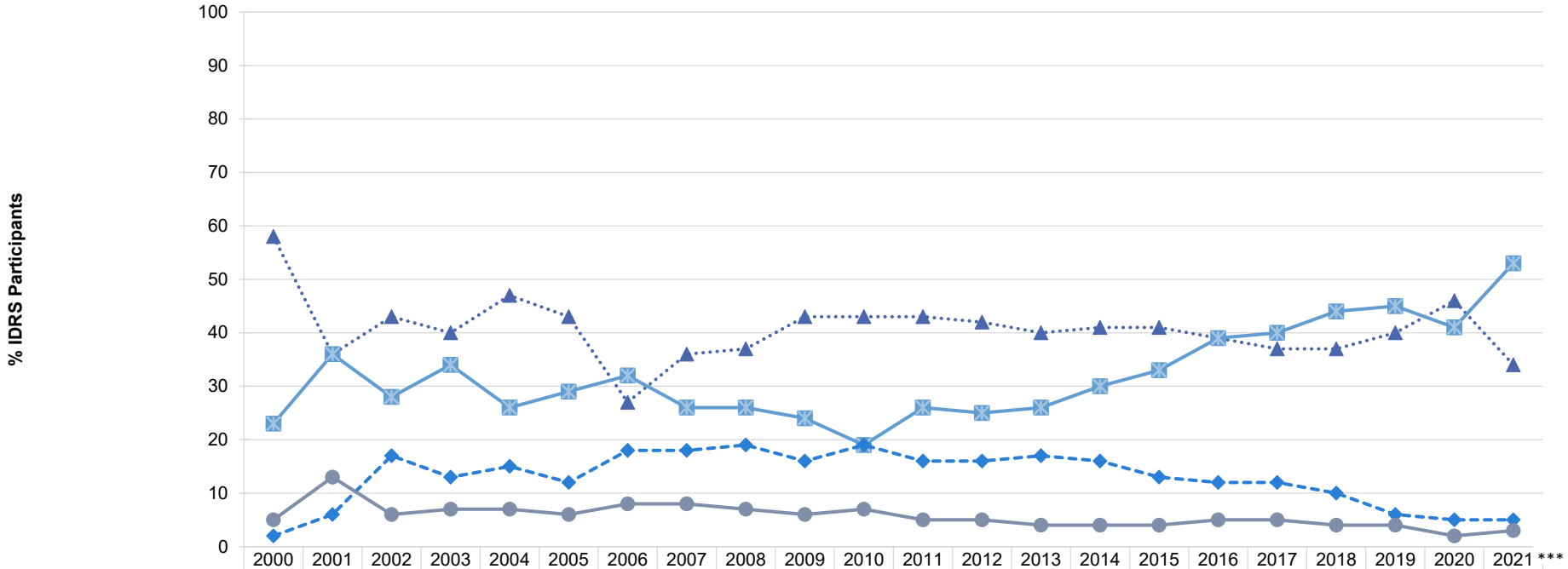
Figure 1: Drug of choice, nationally, 2000-2021



	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021 ***
Heroin	63	48	55	57	58	57	48	52	52	52	54	53	54	53	50	52	47	46	41	45	50	40
Methamphetamine	16	25	21	23	20	21	23	21	22	21	16	20	21	23	24	26	29	32	35	33	33	45
Morphine	3	5	6	5	6	5	8	10	10	8	10	9	11	8	10	10	8	9	7	4	4	4
Cannabis	7	6	6	6	7	6	7	6	6	7	8	7	5	5	5	4	6	5	7	8	6	5

Note. Participants could only endorse one substance. Substances listed in this figure are the primary endorsed; a nominal per cent endorsed other substances. *p<0.050; **p<0.010; ***p<0.001 for 2020 versus 2021.

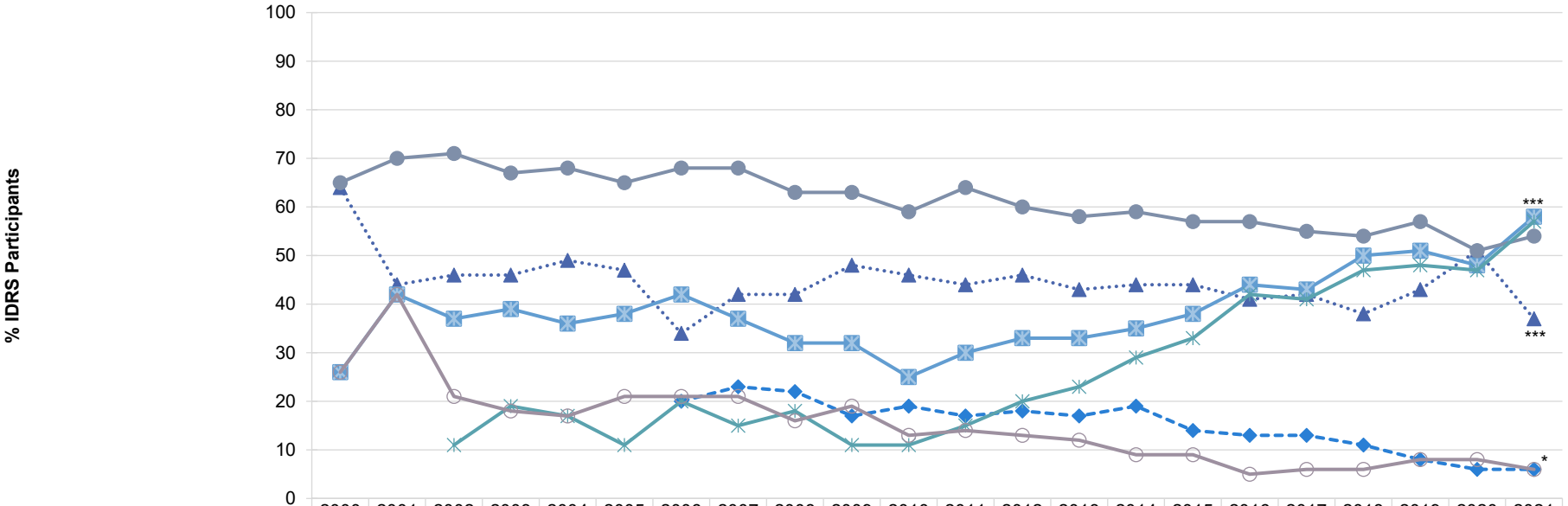
Figure 2: Drug injected most often in the past month, nationally, 2000-2021



	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021 ***
Heroin	58	36	43	40	47	43	27	36	37	43	43	43	42	40	41	41	39	37	37	40	46	34
Methamphetamine	23	36	28	34	26	29	32	26	26	24	19	26	25	26	30	33	39	40	44	45	41	53
Morphine	2	6	17	13	15	12	18	18	19	16	19	16	16	17	16	13	12	12	10	6	5	5
Methadone	5	13	6	7	7	6	8	8	7	6	7	5	5	4	4	4	5	5	4	4	2	3

Note. Participants could only endorse one substance. Substances listed in this figure are the primary endorsed; a nominal per cent endorsed other substances. *p<0.050; **p<0.010; ***p<0.001 for 2020 versus 2021.

Figure 3: Weekly or more frequent substance use in the past six months, nationally, 2000-2021



	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
Heroin	64	44	46	46	49	47	34	42	42	48	46	44	46	43	44	44	41	42	38	43	51	37
Any methamphetamine	26	42	37	39	36	38	42	37	32	32	25	30	33	33	35	38	44	43	50	51	48	58
Non-prescribed morphine	/	/	/	/	/	/	20	23	22	17	19	17	18	17	19	14	13	13	11	8	6	6
Cannabis	65	70	71	67	68	65	68	68	63	63	59	64	60	58	59	57	57	55	54	57	51	54
Crystal methamphetamine	/	/	11	19	17	11	20	15	18	11	11	15	20	23	29	33	42	41	47	48	47	57
Powder methamphetamine	26	42	21	18	17	21	21	21	16	19	13	14	13	12	9	9	5	6	6	8	8	6

Note. Computed of the entire sample regardless of whether they had used the substance in the past six months. Non-prescribed morphine frequency of use not asked until 2006. Crystal methamphetamine frequency of use not asked in 2000-2001. / Not asked. *p<0.050; **p<0.010; ***p<0.001 for 2020 versus 2021.

3

COVID-19

Participants were asked about COVID-19 testing, diagnosis and vaccination.

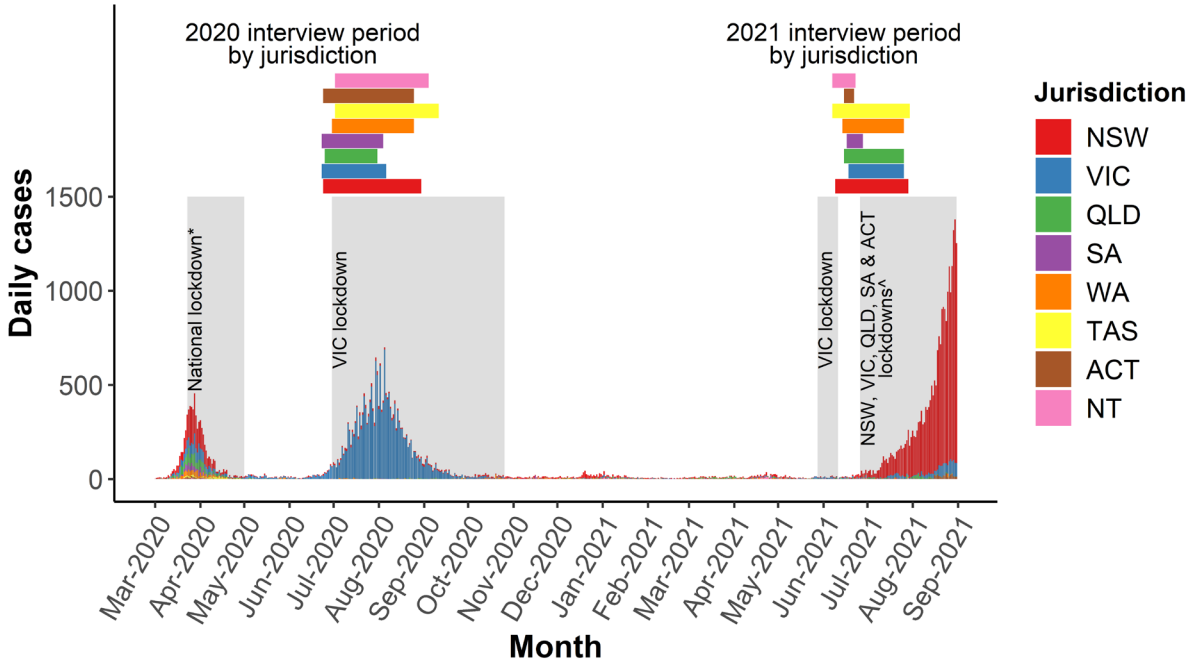
Background

The first COVID-19 diagnosis occurred in Australia on 25 January 2020, with a rapid increase in cases throughout March (peak 455 cases 28 March 2020) which declined shortly thereafter (<20 cases per day nationally from 20 April 2020). There was a resurgence in cases from late June 2020, largely based in Victoria (peak 686 cases 5 August 2020), which subsequently declined from September onwards (<20 cases per day from 23 September 2020) (Figure 4). The third wave of cases occurred from late June 2021 onwards, largely in NSW (peak 1293 cases 30 August 2021, not including cases from 1 September 2021 onwards) and a couple of months later in VIC (peak 86 cases 29 August 2021, not including cases from 1 September 2021 onwards). The number of cases in other jurisdictions during this third wave did not exceed 30 cases per day (as of 31 August 2021).

As a nation of federated states and territories, public health policy including restrictions on movement and gatherings varies by jurisdiction. However, restrictions on gatherings were implemented across jurisdictions from early March 2020; by the end of March, Australians could only leave their residence for essential reasons. These restrictions were eased across May-June 2020, again with variation across jurisdictions (notably, significant restrictions being enforced again in Victoria from July-October 2020). Restrictions were re-introduced in Victoria from 27 May to 10 June, 2021, and in NSW from 26 June 2021 onwards, with other jurisdictions (VIC, QLD, SA and ACT) introducing restrictions shortly thereafter. Lockdowns of less than one-week were also introduced during the interviewing period, for example in the NT and WA, however these are not displayed in Figure 4.

Notably, most of the 2021 IDRS surveys occurred before the most recent wave of cases and subsequent introduction of restrictions. Specifically, 58% (n=511) of all interviews were conducted before 26 June 2021 (when restrictions were first introduced in NSW).

Figure 4: Timeline of COVID-19 in Australia and IDRS data collection period, 2020-2021



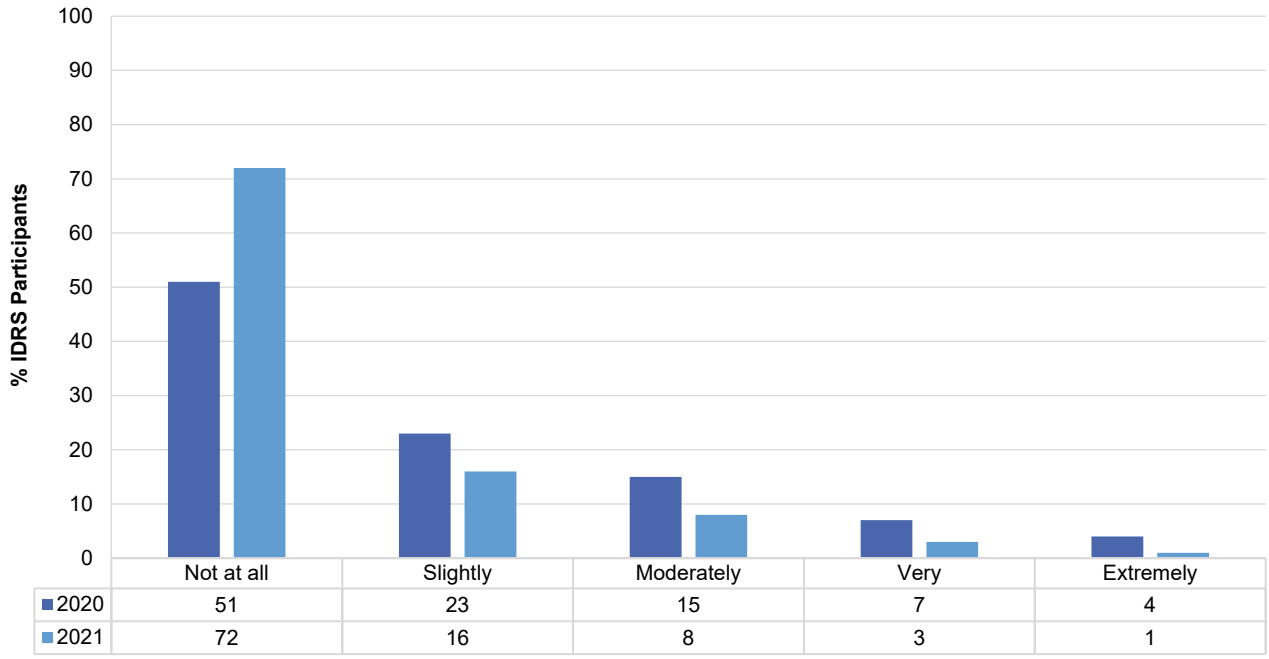
Note. Data obtained from http://www.covid19data.com.au. Only lockdowns of >7 days and affecting at least an entire city are displayed. *national stay-at-home orders began lifting dependent on jurisdiction from May 1 2020. ^NSW lockdown 26 June 2021 onwards; VIC lockdowns 14 July-27 July 2021 and 5 August 2021 onwards; SA lockdown 20 July-27 July; Southeast QLD lockdown 31 July-8 August 2021; ACT lockdown 12 August 2021 onwards.

COVID-19 Testing and Diagnosis

In 2021, nearly half (46%) of the IDRS sample had been tested for SARS-COV-2 by the time of interview (20% in 2020), and no participants had been diagnosed with the virus. Eighteen per cent of participants reported that they had quarantined for 14 or more days due to a possible exposure since January 2020; 4% in the past month, 9% two-six months ago, and 5% 7-12 months ago. One in ten participants (10%) had received at least one dose of the COVID-19 vaccine at the time of interview.

When asked how worried participants currently were of contracting COVID-19, 28% reported some level of concern: 16% responded that they were 'slightly' concerned, 8% reported 'moderately', 3% reported 'very' and 1% reported being 'extremely' concerned (Figure 5). Further, over two-thirds (68%) of participants reported that they would be concerned about their health if they did contract COVID-19, with 15% reporting that they would be 'slightly' concerned, 16% reporting 'moderately', 22% reporting 'very' and 15% reporting that they would be 'extremely' concerned.

Figure 5: Current concern related to contracting COVID-19, nationally, 2020-2021



	Not at all	Slightly	Moderately	Very	Extremely
2020	51	23	15	7	4
2021	72	16	8	3	1

Note. The response 'Don't know' was excluded from analysis.

4

Heroin

Participants were asked about their recent (past six month) use of heroin and of homebake heroin. Participants typically describe heroin as white/off-white rock, brown/beige rock or white/off-white powder. Homebake is a form of heroin made from pharmaceutical products and involves the extraction of diamorphine from pharmaceutical opioids such as codeine and morphine.

Patterns of Consumption

Recent Use (past 6 months)

Despite some fluctuation over the years, recent use of any heroin has been decreasing over time. In 2021, recent use of heroin reached the lowest percentage since monitoring began (50%) and was significantly lower compared to 2020 (63% in 2020; $p<0.001$) (Figure 6). Consistent with previous years, marked differences across jurisdictions can be observed, ranging from less than one in twenty participants in NT to almost four-fifths of participants in the ACT reporting recent use. SA recorded the greatest significant decrease in 2021 relative to 2020 (23% versus 47%, respectively; $p=0.001$), followed by QLD (43% in 2021 versus 64% in 2020; $p=0.003$) and VIC (76% in 2021 versus 86% in 2020, $p=0.049$), whilst use in the other jurisdictions remained stable (Table 2).

Frequency of Use

Median frequency of use nationally was equivalent to three days a week in the past six months (2021; median 72 days, IQR=24-180), a significant decrease from four days a week in 2020 (96 days, IQR=30-180; $p=0.008$) (Figure 6). Weekly or more frequent use also declined, from 80% of people who reported recent use in 2020 to 75% in 2021 ($p=0.045$), and daily use declined from 36% of people who reported recent use in 2020 to 28% in 2021 ($p=0.015$). No one reported daily use in the NT sample, whereas a significant decrease in the ACT sample was observed in 2021 relative 2020 (26% of people who reported recent use versus 45%, respectively; $p=0.018$). The VIC sample had the highest per cent of participants reporting daily heroin use (39% of people who reported recent use).

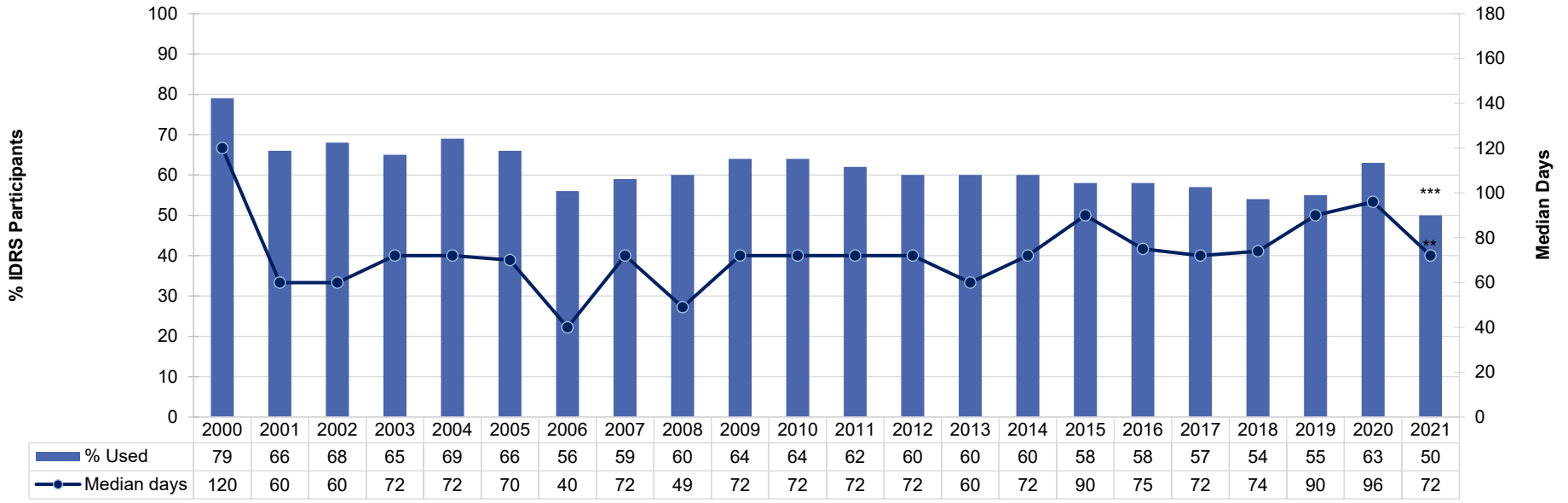
Routes of Administration

Injecting remained the most common route of administration among people who consumed heroin, with 100% reporting heroin injection in the past six months (100% in 2020; $p=0.588$). Participants who reported injecting did so on a median of 72 days (IQR=24-180), down from 96 days in 2020 (IQR=30-180; $p=0.003$). Few participants reported smoking (5%; 7% in 2020; $p=0.222$) and snorting (2%; 1% in 2020; $p=0.878$) heroin.

Quantity

Of those who reported recent use and responded (n=429), the median amount of heroin used per day in the last six months was 0.20 grams (IQR=0.10-0.40; 0.20 grams in 2020; IQR=0.10-0.50; $p=0.026$). The median maximum amount of heroin used per day in the last six months was 0.40 grams (IQR=0.20-1.00; maximum quantity of heroin was not collected in 2020).

Figure 6: Past six month use and frequency of use of heroin, nationally, 2000-2021



	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
% Used	79	66	68	65	69	66	56	59	60	64	64	62	60	60	60	58	58	57	54	55	63	50
Median days	120	60	60	72	72	70	40	72	49	72	72	72	72	60	72	90	75	72	74	90	96	72

Note. Median days computed among those who reported recent use (maximum 180 days). Median days rounded to the nearest whole number. *p<0.050; **p<0.010; ***p<0.001 for 2020 versus 2021.

Table 2: Past six month use of heroin, by jurisdiction, 2000–2021

%	NSW	ACT	VIC	TAS	SA	WA	NT	QLD
2000	95	92	97	38	73	80	56	86
2001	96	83	90	24	65	55	36	62
2002	96	89	94	21	48	64	22	81
2003	97	88	90	26	55	63	16	64
2004	95	91	86	19	60	69	34	79
2005	88	86	89	19	61	69	24	64
2006	81	71	76	9	60	53	12	63
2007	88	72	85	-	67	57	7	65
2008	83	86	85	-	51	59	14	74
2009	94	78	79	12	72	71	13	75
2010	92	78	85	8	64	69	5	81
2011	87	79	81	19	57	79	9	65
2012	89	74	84	9	52	80	11	65
2013	83	75	83	10	41	75	17	72
2014	85	75	83	13	43	79	7	66
2015	91	79	74	-	49	75	14	50
2016	86	70	77	7	37	78	7	58
2017	80	74	80	15	52	66	13	55
2018	83	75	83	8	35	67	9	45
2019	82	77	85	15	28	62	-	63
2020	78	85	86	24	47	69	-	64
2021	**75**	**78**	**76***	**11**	**23****	**61**	**-**	**43****

Note. - Values suppressed due to small cell size (n≤5 but not 0). *p<0.050; **p<0.010; ***p<0.001 for 2020 versus 2021.

Price, Perceived Purity and Perceived Availability

Price

In 2021, the reported median price for heroin nationally was $300 for one gram (IQR=250-400; n=73), a significant decrease from $400 in 2020 (IQR=250-550; n=95; p=0.004). The median last price per cap has remained stable over the years, with a median price of $50 per cap in 2021 (IQR=50-74; n=38) and 2020 (IQR=50-100; n=25; p=0.399) (Figure 7). Additionally, participants reported a median price of $80 per point (0.10 of a gram; IQR=50-100; n=225), a significant increase from $70 in 2020 (IQR=50-100; n=259; p=0.026).

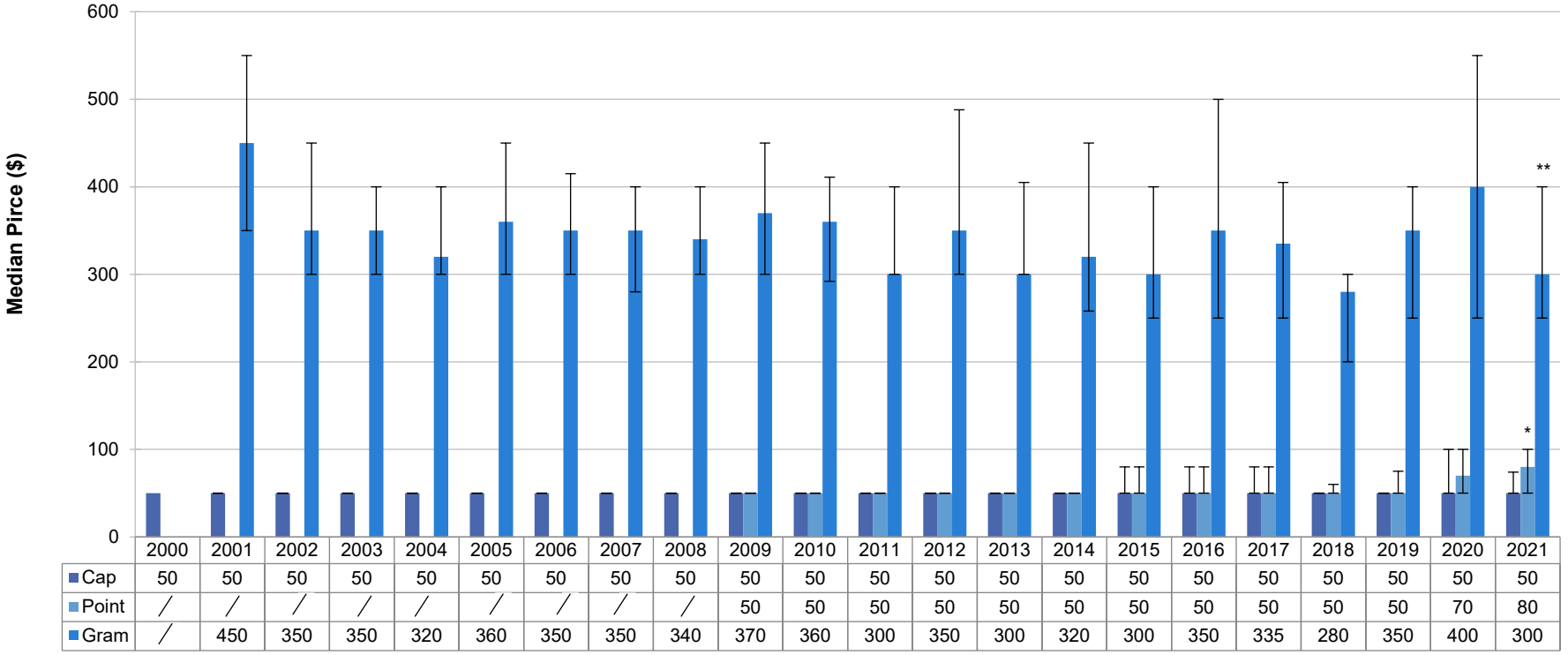
Perceived Purity

Among those who were able to comment (n=421 in 2021), there was a significant change in the perceived purity of heroin in 2021 relative to 2020 (p<0.001). Specifically, there was an increase in participants reporting the perceived purity of heroin to be 'high' (24%; 14% in 2020) and fewer reported 'low' (28%; 44% in 2020) (Figure 8).

Perceived Availability

Among those who were able to comment (n=435 in 2021), there was a significant change in the perceived availability of heroin in 2021 relative to 2020 (p=0.024). While participants' reports of heroin being 'easy' to obtain remained similar at 44% in 2021 (42% in 2020), there was an increase in those perceiving heroin to be 'very easy' to obtain in 2021 relative to 2020 (40% versus 35% in 2020) (Figure 9).

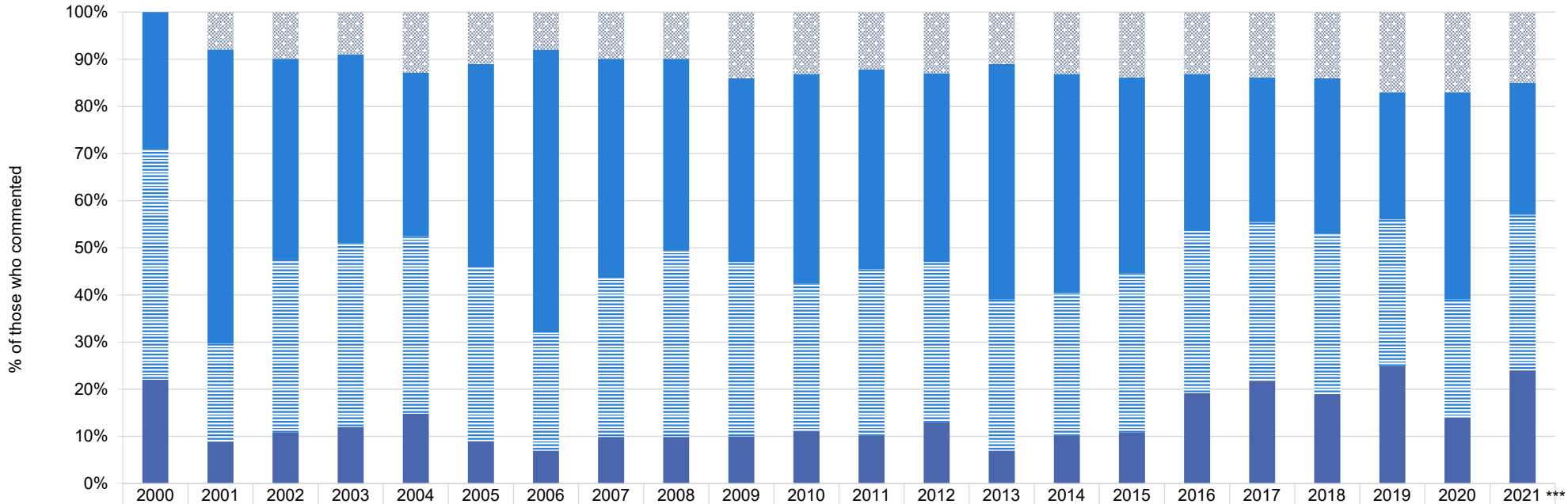
Figure 7: Median price of heroin per cap, point and gram, nationally, 2000-2021



	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
Cap	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50
Point	/	/	/	/	/	/	/	/	/	50	50	50	50	50	50	50	50	50	50	50	70	80
Gram	/	450	350	350	320	360	350	350	340	370	360	300	350	300	320	300	350	335	280	350	400	300

Note. Among those who commented. Price for a gram of heroin was not collected in 2000. Between 2009-2017 a cap was referred to as cap/point and in 2018 these measures were separated as their own response options. / Not asked. The error bars represent the IQR. *p<0.050; **p<0.010; ***p<0.001 for 2020 versus 2021.

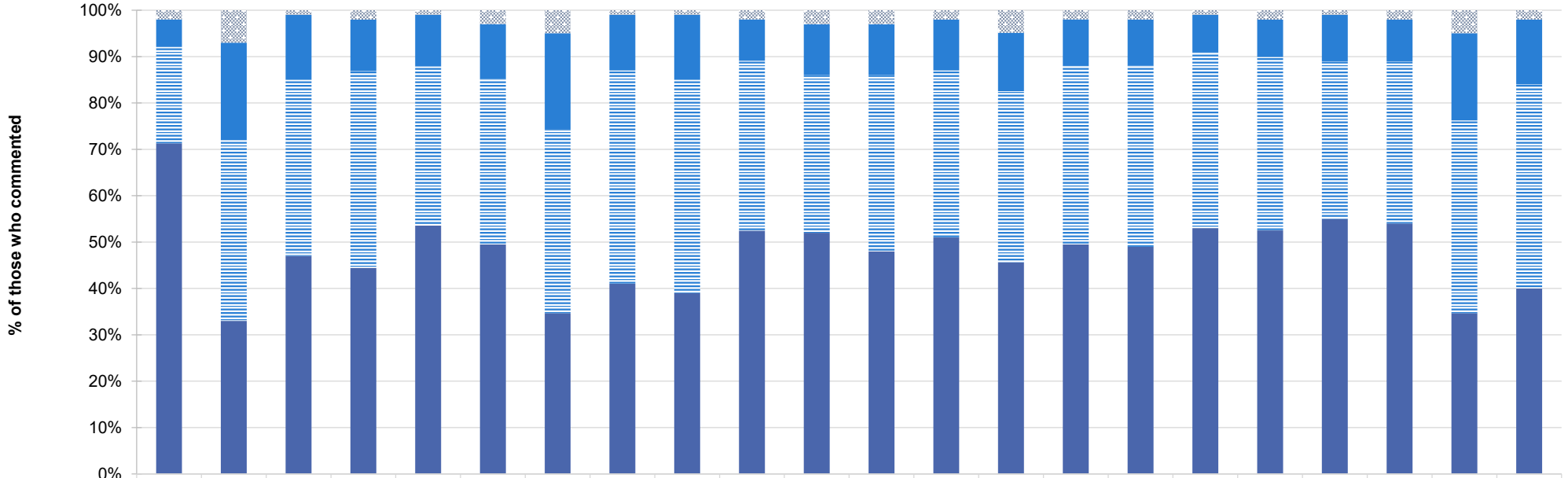
Figure 8: Current perceived purity of heroin, nationally, 2000-2021



	2000 (n=623)	2001 (n=578)	2002 (n=568)	2003 (n=570)	2004 (n=602)	2005 (n=591)	2006 (n=486)	2007 (n=510)	2008 (n=491)	2009 (n=501)	2010 (n=520)	2011 (n=485)	2012 (n=504)	2013 (n=475)	2014 (n=499)	2015 (n=460)	2016 (n=451)	2017 (n=430)	2018 (n=422)	2019 (n=455)	2020 (n=485)	2021 *** (n=421)
Fluctuates	-	8	10	9	13	11	8	10	10	14	13	12	13	11	13	14	13	14	14	17	17	15
Low	29	63	43	40	35	43	60	47	41	39	44	42	40	50	46	42	33	31	33	27	44	28
Medium	49	21	37	39	38	37	25	34	40	37	31	35	34	32	30	34	34	34	34	31	25	33
High	22	9	11	12	15	9	7	10	10	10	11	10	13	7	10	11	19	22	19	25	14	24

Note. The response 'Don't know' was excluded from analysis. - Values suppressed due to small cell size (n≤5 but not 0). *p<0.050; **p<0.010; ***p<0.001 for 2020 versus 2021.

Figure 9: Current perceived availability of heroin, nationally, 2000-2021



	2000 (n=678)	2001 (n=598)	2002 (n=579)	2003 (n=586)	2004 (n=627)	2005 (n=603)	2006 (n=481)	2007 (n=518)	2008 (n=506)	2009 (n=512)	2010 (n=532)	2011 (n=492)	2012 (n=519)	2013 (n=487)	2014 (n=515)	2015 (n=471)	2016 (n=457)	2017 (n=449)	2018 (n=438)	2019 (n=476)	2020 (n=496)	2021 * (n=435)
Very difficult	2	7	1	2	1	3	5	1	1	2	3	3	2	5	2	2	1	2	1	2	5	2
Difficult	6	21	14	11	11	12	21	12	14	9	11	11	11	13	10	10	8	8	10	9	19	14
Easy	21	39	38	42	34	36	40	46	46	37	34	38	36	38	39	39	38	37	34	35	42	44
Very easy	72	33	47	44	53	50	35	41	39	53	52	48	51	47	50	49	53	52	55	54	35	40

Note. The response 'Don't know' was excluded from analysis. *p<0.050; **p<0.010; ***p<0.001 for 2020 versus 2021.

5

Methamphetamine

Participants were asked about their recent (past six month) use of various forms of methamphetamine, including powder (white particles, described as speed), base (wet, oily powder) and crystal (clear, ice-like crystals).

Patterns of Consumption (any methamphetamine)

Recent Use (past 6 months)

Recent use of any methamphetamine (powder, base and crystal) peaked in 2003 (89%), before declining to 60% in 2010. In the following years, the per cent of participants reporting recent use of any methamphetamine has been gradually increasing. Indeed, there was a significant increase in the per cent of participants reporting any methamphetamine use in 2021 (80%) compared to 2020 (72%), (p<0.001), returning to levels observed in 2019 and 2018 (Figure 10).

In all jurisdictions, at least 70% of participants reported recent use of methamphetamine in 2021, ranging from 74% in the NSW sample to 89% in the TAS sample. A significant increase between 2020 and 2021 was observed in QLD (63% versus 79% respectively; p=0.020) and VIC (66% versus 79% respectively; p=0.012) (Table 3).

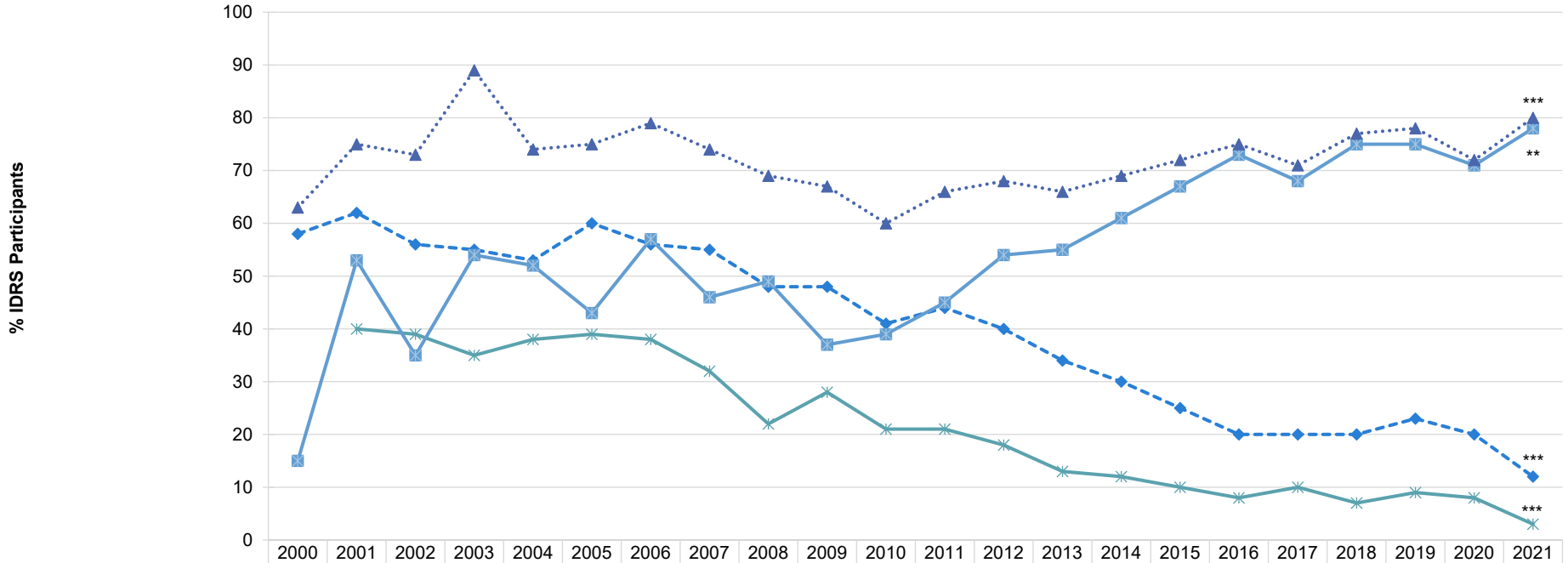
Frequency of Use

Frequency of use significantly increased from a median of 48 days (IQR=12-108) in 2020 to a median of 72 days in 2021 (IQR=20-120; p=0.008) (Figure 11). The per cent of people who had recently used methamphetamine reporting weekly or more frequent use also significantly increased from 68% in 2020 to 74% in 2021 (p=0.012). Significant increases in daily use among people who had recently used methamphetamine were observed in the NT (26%; 11% in 2020; p=0.044) and VIC (19%; 8% in 2020; p=0.021) samples relative to 2020.

Forms of Methamphetamine

The forms of methamphetamine used by participants have shifted over time, with use of powder and base methamphetamine decreasing and use of crystal methamphetamine increasing (Figure 10). In 2021, crystal methamphetamine continued to be the most reported form of methamphetamine (78%; 71% in 2020; p=0.001), followed by powder (12%; 20% in 2020; p<0.001) and base methamphetamine (8%; 3% in 2020; p<0.001), both of which decreased in 2021.

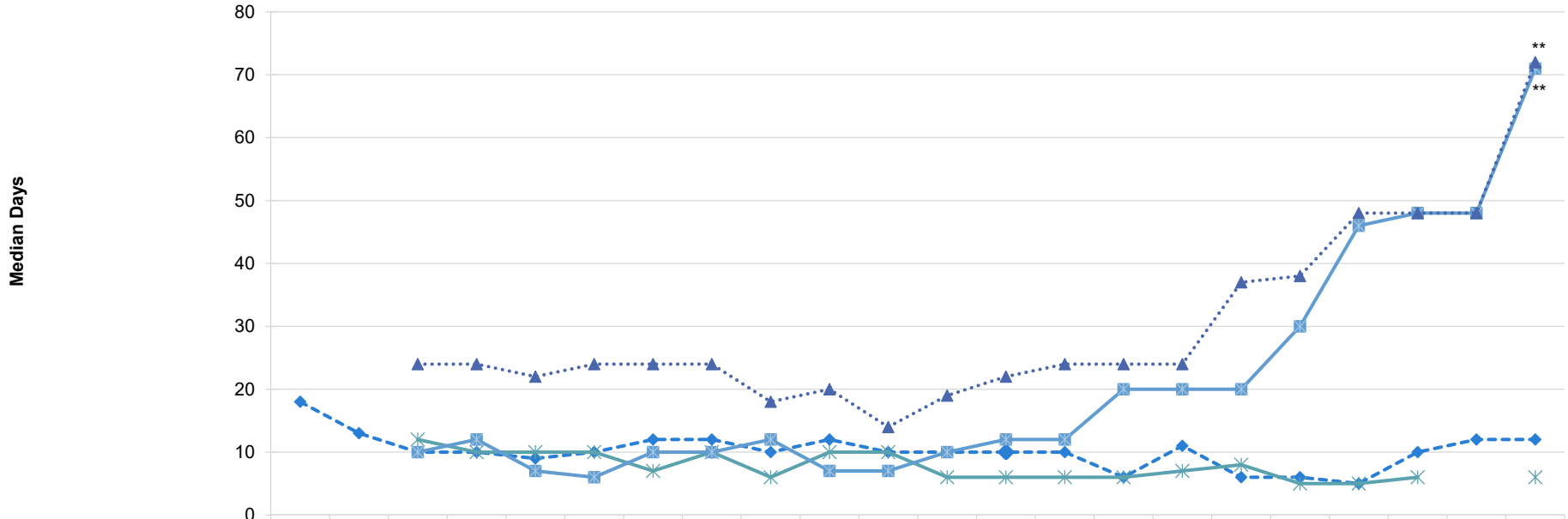
Figure 10: Past six month use of any methamphetamine and of methamphetamine powder, base, and crystal, nationally, 2000-2021



	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
Powder	58	62	56	55	53	60	56	55	48	48	41	44	40	34	30	25	20	20	20	23	20	12
Base#	/	40	39	35	38	39	38	32	22	28	21	21	18	13	12	10	8	10	7	9	8	3
Crystal	15	53	35	54	52	43	57	46	49	37	39	45	54	55	61	67	73	68	75	75	71	78
Any Methamphetamine	63	75	73	89	74	75	79	74	69	67	60	66	68	66	69	72	75	71	77	78	72	80

Note. #Base asked separately from 2001 onwards (/ Not asked). 'Any methamphetamine' includes crystal, powder, base and liquid methamphetamine combined from 2000-2018, and crystal, powder and base methamphetamine combined from 2019 onwards. Figures for liquid not reported historically due to small numbers. *p<0.050; **p<0.010; ***p<0.001 for 2020 versus 2021.

Figure 11: Frequency of use of any methamphetamine and of methamphetamine powder, base, and crystal, nationally, 2000-2021



	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
Powder	18	13	10	10	9	10	12	12	10	12	10	10	10	10	6	11	6	6	5	10	12	12
Base	/	/	12	10	10	10	7	10	6	10	10	6	6	6	6	7	8	5	5	6	/	6
Crystal	/	/	10	12	7	6	10	10	12	7	7	10	12	12	20	20	20	30	46	48	48	71
Any Methamphetamine	/	/	24	24	22	24	24	24	18	20	14	19	22	24	24	24	37	38	48	48	48	72

Note. Median days computed among those who reported recent use (maximum 180 days). Median days rounded to the nearest whole number. Y axis reduced to 80 days to improve visibility of trends. Collection of frequency of use data for base and crystal commenced in 2002 (/ Not asked). Frequency of use data was not collected in 2020 for base methamphetamine. *p<0.050; **p<0.010; ***p<0.001 for 2020 versus 2021.

Table 3: Past six month use of any methamphetamine, by jurisdiction, 2000–2021

%	NSW	ACT	VIC	TAS	SA	WA	NT	QLD
2000	40	68	53	83	52	85	74	71
2001	51	82	76	85	81	92	70	83
2002	48	70	73	84	85	85	72	81
2003	53	71	79	88	72	90	71	89
2004	56	81	71	91	71	85	70	81
2005	58	73	79	95	78	75	72	78
2006	72	92	81	83	78	86	64	82
2007	62	83	74	88	74	70	68	78
2008	74	74	68	74	69	74	57	59
2009	57	75	70	80	61	63	55	70
2010	57	59	60	70	74	64	36	59
2011	60	73	65	77	66	64	55	71
2012	72	77	67	77	79	72	48	53
2013	75	66	61	74	75	72	43	58
2014	75	76	77	70	75	66	37	72
2015	66	81	74	72	76	71	67	67
2016	77	83	73	75	77	65	71	70
2017	69	80	66	69	76	70	66	74
2018	76	85	78	79	83	67	75	72
2019	76	79	70	81	90	79	90	68
2020	77	65	66	77	81	73	83	63
2021	**74**	**75**	**79***	**89**	**88**	**82**	**76**	**79***

Note. *p<0.050; **p<0.010; ***p<0.001 for 2020 versus 2021.

Patterns of Consumption (by form)

Methamphetamine Powder

Recent Use (past 6 months): Nationally, the use of methamphetamine powder has decreased over time. In 2021, recent use declined to 12%, the lowest percentage of use since monitoring began (20% in 2020; $p<0.001$) (Figure 10). Most jurisdictions have reflected this trend, with some fluctuation over time. A significant decrease in recent use of methamphetamine powder was observed in TAS (16%; 43% in 2020; $p<0.001$), WA (9%; 36% in 2020; $p<0.001$) and NSW (n≤5; 11% in 2020; $p=0.009$) (Table 4).

Frequency of Use: Nationally, frequency of use remained stable in 2021 at a median of 12 days (IQR=3-72; 12 days in 2020; IQR=3-60; $p=0.473$) (Figure 11). In 2021, just under half (47%) of those who had recently used methamphetamine powder reported weekly or more frequent use, stable from 43% in 2020 ($p=0.640$).

Routes of Administration: Most (95%) people who had recently used methamphetamine powder reported injecting powder in the past six months (93% in 2020; $p=0.456$) and reported doing so on a median of 12 days (IQR=3-72), stable relative to 2020 (12 days; IQR=3-71; $p=0.831$). Over a quarter (26%) reported smoking powder methamphetamine (21% in 2020; $p=0.399$).

Quantity: Of those who reported recent use and responded (n=101), the median amount of powder used on a typical day in the past six months was 0.20 grams (IQR=0.10-0.40; 0.20 grams in 2020; IQR=0.10-0.40; $p=0.725$). The median maximum amount of powder used per day in the last six months was 0.40 grams (IQR=0.20-1.00; n=98; maximum quantity of powder was not collected in 2020).

Methamphetamine Base

Recent Use (past 6 months): Base has typically been the least commonly used form of methamphetamine since monitoring commenced in 2001. Though some fluctuations have occurred, recent base use has gradually declined overtime. Indeed, the per cent of participants reporting recent use of base significantly declined to 3% in 2021 (8% in 2020; $p<0.001$), largely driven by a decline in the SA sample. No one reported recent use in VIC and WA, whereas 8% of participants from QLD and the ACT samples reported recent use.

Frequency of Use: Frequency of use remained relatively low in 2021, at a median of 6 days (IQR=2-30; n=25; frequency data not collected in 2020).

Routes of Administration: Injecting was reported to be the most common route of administration amongst people who had used methamphetamine powder (100%; 97% in 2020), with few participants reporting smoking (n≤5; n≤5 in 2020). Due to small numbers reporting recent use, significance testing for routes of administration were not undertaken.

Quantity: Of those who reported recent use and responded (n=19), the median amount of base used on a typical day in the past six months was 0.20 grams (IQR=0.10-0.50). The median maximum amount of base used per day in the last six months was 0.50 grams (IQR=0.20-0.60; n=21; average and maximum quantity of base were not collected in 2020).

Methamphetamine Crystal

Recent Use (past 6 months): Reports of recent use of crystal methamphetamine have been increasing since 2009 (Figure 10), surpassing powder methamphetamine from 2012 onwards. In 2021, recent use significantly increased to 78% of the national sample (71% in 2020; $p=0.001$), indicating the highest per cent of recent use since monitoring commenced in 2000. At the jurisdictional level, recent use ranged from 74% in NSW, ACT and NT samples, to 85% in the TAS sample in 2021 (Table 6). A significant increase in the per cent reporting use between 2020 and 2021 was observed in QLD (78%; 63% in 2020, $p=0.030$) and VIC (78%; 64% in 2020; $p=0.008$) samples.

Frequency of Use: Median days of use significantly increased from 48 days in 2020 (IQR=12-100) to 71 days in 2021 (IQR=20-110; *p*=0.002) (Figure 11). Among those who had recently used crystal methamphetamine, frequency of use on a weekly or more basis also significantly increased in 2021 (73%; 66% in 2020; *p*=0.006), though daily use remained stable (18%; 16% in 2020; *p*=0.338).

Routes of Administration: Consistent with previous years, the most common route of administration was injecting (97%; 95% in 2020; *p*=0.072), followed by smoking (37%; 35% in 2020; *p*=0.529). Participants who reported injecting did so on a median of 60 days (IQR= 20-96), a significant increase from 45 days in 2020 (IQR= 12-96; *p*=0.008). There was large jurisdictional variation in the per cent of participants nominating smoking as a route of administration. The VIC sample (57%) had the highest per cent of people who had recently used crystal methamphetamine nominating smoking as a route of administration, whereas few participants (n≤5) reported smoking in the NT sample.

Quantity: Of those who reported recent use and responded (n=675), the median amount of crystal used on an average day of consumption in the past six months was 0.20 grams (IQR=0.10-0.20; 0.10 grams in 2020; IQR=0.10-0.20; *p*=0.493). The median maximum amount of crystal used per day in the last six months was 0.30 grams (IQR=0.20-0.50; n=666; maximum quantity of crystal recently used was not collected in 2020).

Table 4: Past six month use of powder methamphetamine, by jurisdiction, 2000-2021

%	NSW	ACT	VIC	TAS	SA	WA	NT	QLD
2000	32	63	49	77	51	81	70	58
2001	42	63	74	45	47	87	63	80
2002	39	51	70	35	56	77	67	55
2003	31	48	70	51	53	71	60	58
2004	35	41	65	60	44	61	60	61
2005	38	59	75	76	39	61	69	65
2006	49	58	71	54	39	66	57	54
2007	35	55	65	63	42	61	58	62
2008	38	37	64	61	34	61	50	35
2009	33	46	65	56	33	54	50	46
2010	29	48	53	56	29	51	25	41
2011	30	46	49	67	36	43	43	40
2012	17	42	39	70	34	45	46	30
2013	14	29	23	61	40	48	31	37
2014	17	36	25	50	34	39	16	31
2015	13	15	18	49	32	34	25	27
2016	17	18	9	33	19	18	24	27
2017	10	20	15	30	18	16	19	34
2018	11	23	16	22	31	12	17	34
2019	13	27	11	35	44	26	15	20
2020	11	13	10	43	35	36	-	19
2021	**-****	**13**	**7**	**16*****	**34**	**9*****	**-**	**19**

Note. - Values suppressed due to small cell size (n≤5 but not 0). **p*<0.050; ***p*<0.010; ****p*<0.001 for 2020 versus 2021.

Table 5: Past six month use of base methamphetamine, by jurisdiction, 2001-2021

%	NSW	ACT	VIC	TAS	SA	WA	NT	QLD
2001	23	36	32	52	59	56	18	75
2002	23	30	20	74	65	56	21	42
2003	32	13	18	46	51	40	30	50
2004	31	25	11	72	46	45	26	60
2005	38	28	13	79	61	54	16	40
2006	43	32	15	55	52	37	25	53
2007	41	32	8	48	42	22	20	48
2008	33	18	5	25	37	13	10	34
2009	36	21	13	55	31	12	16	41
2010	29	18	3	40	43	8	6	30
2011	17	17	11	39	35	6	12	37
2012	15	15	11	43	32	6	7	21
2013	12	6	3	17	31	11	7	22
2014	12	-	3	19	30	8	-	22
2015	6	10	4	9	26	-	-	20
2016	11	5	0	-	24	-	6	14
2017	8	11	3	-	30	7	7	20
2018	9	8	-	-	8	-	10	14
2019	8	8	-	-	24	-	-	16
2020	4	-	-	8	28	8	-	10
2021	**-**	**8**	**0**	**-**	**-*** **	**0***	**-**	**8**

Note. Base asked separately from 2001 onwards. - Values suppressed due to small cell size (n≤5 but not 0). *p<0.050; **p<0.010; ***p<0.001 for 2020 versus 2021.

Table 6: Past six month use of crystal methamphetamine, by jurisdiction, 2000-2021

%	NSW	ACT	VIC	TAS	SA	WA	NT	QLD
2000	14	17	9	6	11	51	6	13
2001	29	72	52	56	58	85	24	75
2002	25	34	26	20	56	74	20	39
2003	38	65	50	69	48	80	34	60
2004	45	73	41	52	48	83	32	51
2005	38	62	29	50	46	68	21	36
2006	57	88	53	56	49	76	29	55
2007	50	80	43	38	41	56	29	39
2008	69	68	39	32	49	61	28	40
2009	46	57	32	26	30	43	15	46
2010	48	48	36	20	60	40	18	37
2011	53	57	53	26	44	46	28	50
2012	68	66	59	43	56	64	26	44
2013	74	61	55	45	57	59	30	50
2014	74	72	75	54	60	53	26	58
2015	65	79	71	59	70	64	60	62
2016	77	78	73	73	73	75	62	69
2017	69	79	63	65	72	69	60	69
2018	76	85	77	76	79	64	74	70
2019	74	77	68	76	89	75	87	65
2020	75	63	64	77	80	69	83	63
2021	**74**	**74**	**78****	**85**	**83**	**80**	**74**	**78***

Note. *p<0.050; **p<0.010; ***p<0.001 for 2020 versus 2021.

Price, Perceived Purity and Perceived Availability

Methamphetamine Powder

Questions pertaining to the price, perceived purity and availability of methamphetamine powder were not asked of participants in 2020, meaning that significance testing between 2021 and 2020 figures cannot be undertaken.

Price: The median price for a point (0.10 of a gram) of methamphetamine powder has remained stable at $50 (IQR=50-80; n=69) across the duration of monitoring (Figure 12). In contrast, the median price of one gram has fluctuated over time, with a gram reported to be $225 in 2021 (IQR=156-388; n=10).

Perceived Purity: Perceptions regarding the perceived purity of powder methamphetamine were mixed. Among those who commented in 2021 (n=107), purity was most commonly perceived as 'medium' (36%), with almost equal percentages reporting that purity was 'high' (25%) or 'low' (24%) (Figure 14).

Perceived Availability: Of those who commented in 2021 (n=109), just under two-thirds of participants reported methamphetamine powder to be 'very easy' (32%) or 'easy' (32%) to obtain. The remaining one-third perceived it as 'difficult' (23%) or 'very difficult' (13%) to obtain (Figure 16).

Methamphetamine Base

Questions pertaining to the price, perceived purity and availability of methamphetamine base were not asked of participants in 2021 or 2020. For historical information, please refer to the 2019 IDRS National Report.

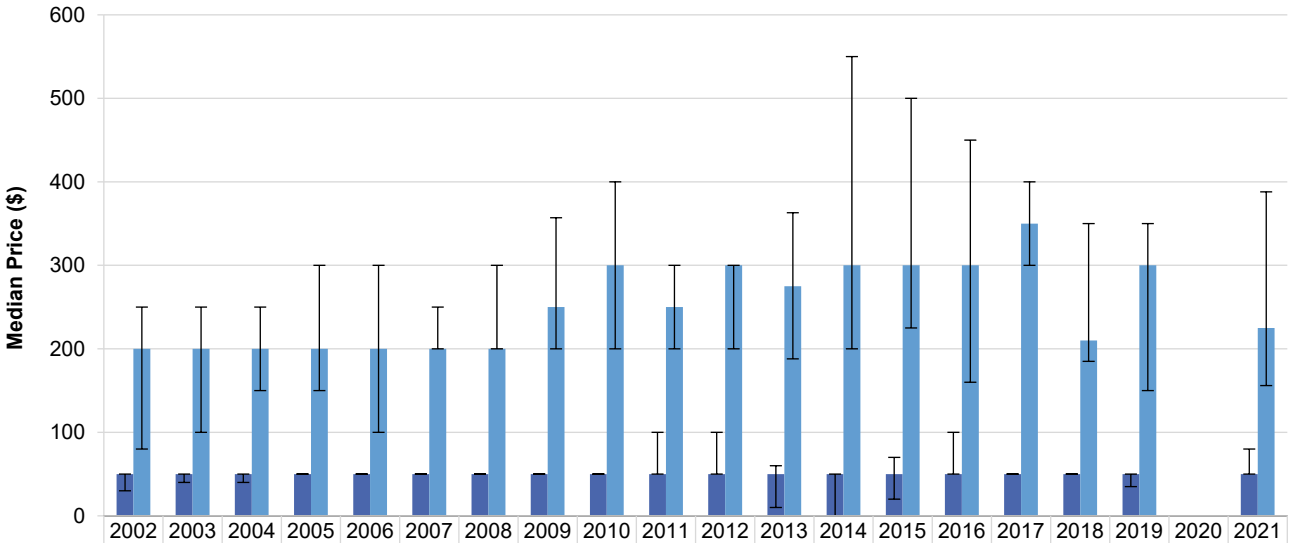
Methamphetamine Crystal

Price: The median price for a point (0.10 of a gram) of crystal significantly decreased in 2021 ($50; IQR=50-100; n=438; $100 in 2020; IQR=60-150; n=435; $p<0.001$), returning to the same median price observed from 2016-2019. Across the years, the median price of a gram of crystal has ranged between $250 and $600. Relative to 2020, the median price for a gram of crystal significantly decreased to $400 (IQR=300-500; n=67) in 2021 ($500 in 2020; IQR=363-700; n=51; $p=0.003$) (Figure 13).

Perceived Purity: Among those that were able to comment (n=623 in 2021), there was a significant change in the perceived purity of methamphetamine crystal ($p<0.001$). Twenty-eight per cent of participants, nationally, perceived the purity of crystal to be 'high', an increase relative to 2020 (14%). In contrast, one-fifth (21%) perceived purity to be 'low', a decrease from 40% in 2020 (Figure 15).

Perceived Availability: Of those who commented (n=641 in 2021), the perceived availability of methamphetamine crystal significantly changed between 2020 to 2021 ($p<0.001$). Specifically, there was a decrease in the percentage of participants who reported crystal methamphetamine to be 'difficult' to obtain (12% versus 33% in 2020) (Figure 17).

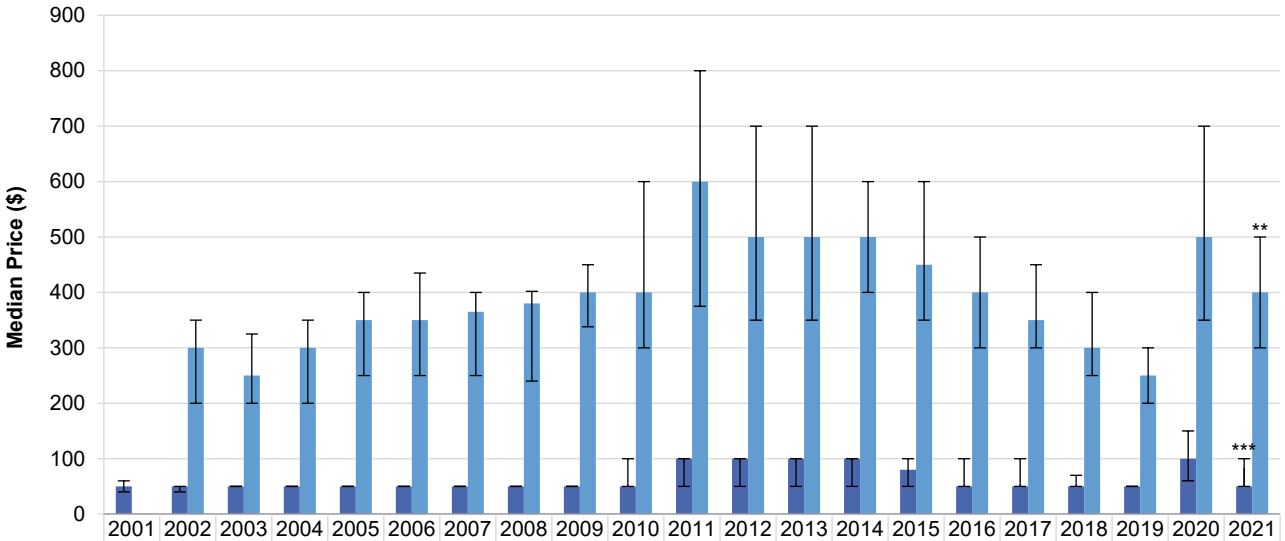
Figure 12: Median price of powder methamphetamine per point and gram, nationally, 2002-2021



	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
Point	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	/	50
Gram	200	200	200	200	200	200	200	250	300	250	300	275	300	300	300	350	210	300	/	225

Note. Among those who commented. Price data for powder not collected in 2020 (/ Not asked), therefore statistical significance testing has not been undertaken between 2020 and 2021. The error bars represent the IQR.

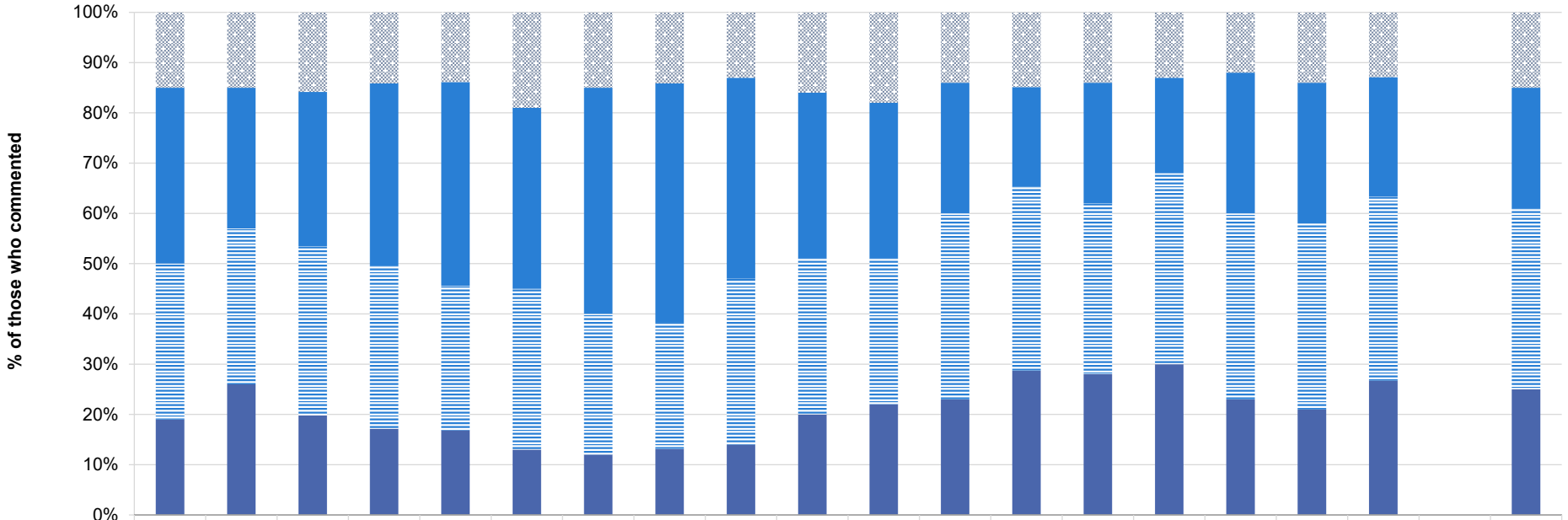
Figure 13: Median price of methamphetamine crystal per point and gram, nationally, 2001-2021



	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
Point	50	50	50	50	50	50	50	50	50	50	100	100	100	100	80	50	50	50	50	100	50
Gram	/	300	250	300	350	350	365	380	400	400	600	500	500	500	450	400	350	300	250	500	400

Note. Among those who commented. No data available for gram in 2001 (/ Not asked). The error bars represent the IQR. *p<0.050; **p<0.010; ***p<0.001 for 2020 versus 2021.

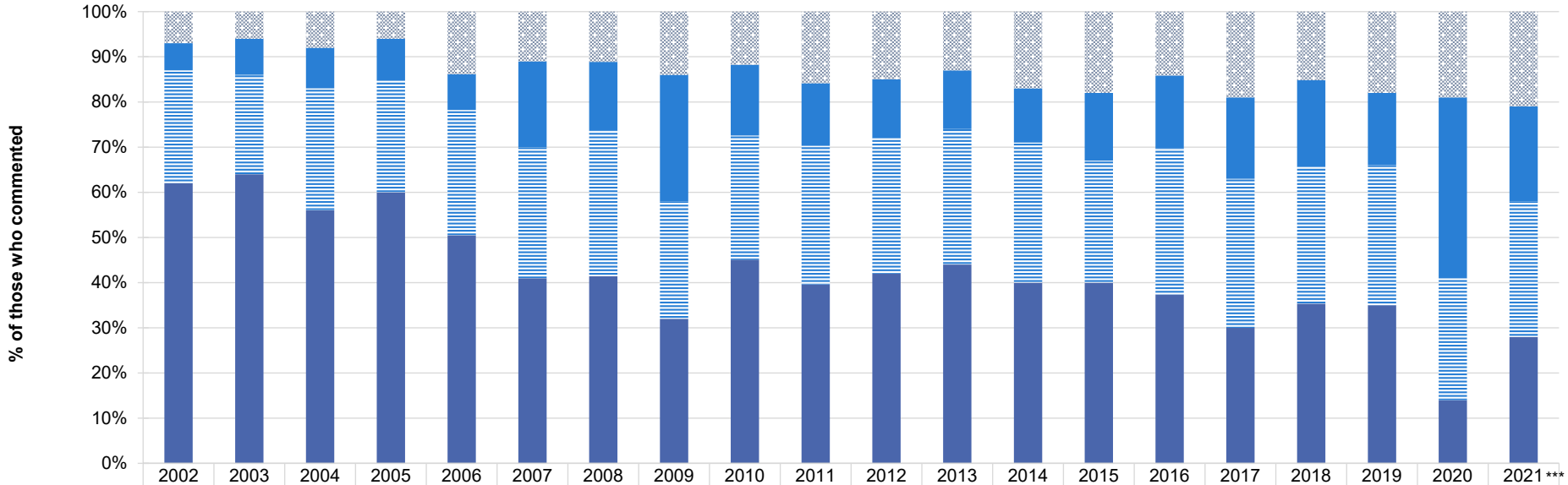
Figure 14: Current perceived purity of powder methamphetamine, nationally, 2002-2021



	2002 (n=380)	2003 (n=433)	2004 (n=419)	2005 (n=487)	2006 (n=439)	2007 (n=435)	2008 (n=342)	2009 (n=363)	2010 (n=291)	2011 (n=313)	2012 (n=288)	2013 (n=239)	2014 (n=192)	2015 (n=171)	2016 (n=112)	2017 (n=139)	2018 (n=139)	2019 (n=165)	2020	2021 (n=107)
Fluctuates	15	15	16	14	14	19	15	14	13	16	18	14	15	14	13	12	14	13	/	15
Low	35	28	31	36	41	36	45	47	40	33	31	26	20	24	19	28	28	24	/	24
Medium	31	31	34	32	29	32	28	25	33	31	29	37	37	34	38	37	37	37	/	36
High	19	26	20	17	17	13	12	13	14	20	22	23	29	28	30	23	21	27	/	25

Note. Methamphetamine asked separately for the three different forms from 2002 onwards. The response 'Don't know' was excluded from analysis. Data on perceived purity of powder not collected in 2020 (/ Not asked), therefore statistical significance testing has not been undertaken between 2020 and 2021.

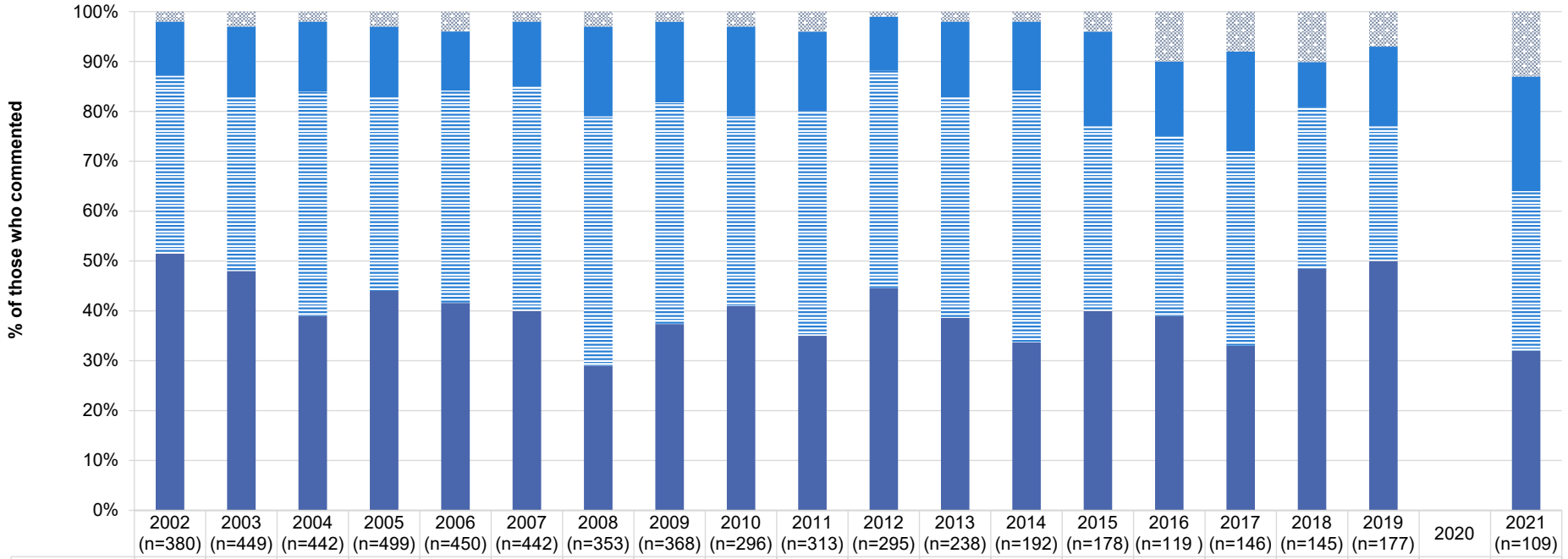
Figure 15: Current perceived purity of crystal methamphetamine, nationally, 2002-2021



	2002 (n=209)	2003 (n=395)	2004 (n=389)	2005 (n=314)	2006 (n=397)	2007 (n=320)	2008 (n=312)	2009 (n=241)	2010 (n=244)	2011 (n=299)	2012 (n=364)	2013 (n=375)	2014 (n=441)	2015 (n=473)	2016 (n=525)	2017 (n=508)	2018 (n=561)	2019 (n=613)	2020 (n=536)	2021*** (n=623)
Fluctuates	7	6	8	6	14	11	11	14	12	16	15	13	17	18	14	19	15	18	19	21
Low	6	8	9	9	8	19	15	28	16	14	13	13	12	15	16	18	19	16	40	21
Medium	25	22	27	25	28	29	32	26	28	31	30	30	31	27	32	33	30	31	27	30
High	62	64	56	60	51	41	41	32	46	40	42	44	40	40	37	30	35	35	14	28

Note. Methamphetamine asked separately for the three different forms from 2002 onwards. The response 'Don't know' was excluded from analysis. *p<0.050; **p<0.010; ***p<0.001 for 2020 versus 2021.

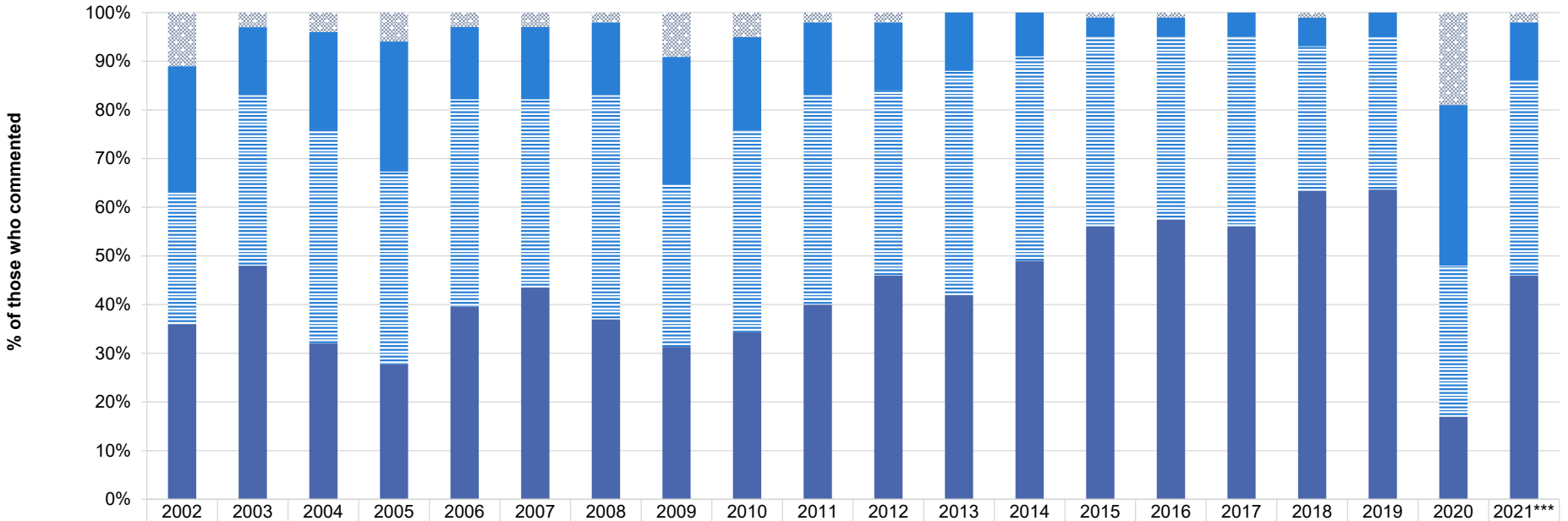
Figure 16: Current perceived availability of powder methamphetamine, nationally, 2002-2021



	2002 (n=380)	2003 (n=449)	2004 (n=442)	2005 (n=499)	2006 (n=450)	2007 (n=442)	2008 (n=353)	2009 (n=368)	2010 (n=296)	2011 (n=313)	2012 (n=295)	2013 (n=238)	2014 (n=192)	2015 (n=178)	2016 (n=119)	2017 (n=146)	2018 (n=145)	2019 (n=177)	2020	2021 (n=109)
Very difficult	2	3	2	3	4	2	3	2	3	4	1	2	2	4	10	8	10	7	/	13
Difficult	11	14	14	14	12	13	18	16	18	16	11	15	14	19	15	20	9	16	/	23
Easy	36	35	45	39	43	45	50	44	38	45	44	45	51	37	36	39	32	27	/	32
Very easy	52	48	39	44	42	40	29	37	41	35	45	39	34	40	39	33	48	50	/	32

Note. Methamphetamine asked separately for the three different forms from 2002 onwards. The response 'Don't know' was excluded from analysis. Data on perceived availability of powder not collected in 2020 (/ Not asked), therefore statistical significance testing has not been undertaken between 2020 and 2021.

Figure 17: Current perceived availability of crystal methamphetamine, nationally, 2002-2021



	2002 (n=215)	2003 (n=410)	2004 (n=402)	2005 (n=319)	2006 (n=400)	2007 (n=326)	2008 (n=317)	2009 (n=242)	2010 (n=247)	2011 (n=307)	2012 (n=375)	2013 (n=379)	2014 (n=451)	2015 (n=501)	2016 (n=545)	2017 (n=526)	2018 (n=582)	2019 (n=638)	2020 (n=553)	2021*** (n=641)
Very difficult	11	3	4	6	3	3	2	9	5	2	2	0	0	1	1	0	1	0	19	2
Difficult	26	14	20	27	15	15	15	26	19	15	14	12	9	4	4	5	6	5	33	12
Easy	27	35	44	40	43	39	46	33	41	43	38	46	42	39	38	39	30	31	31	40
Very easy	36	48	32	28	40	44	37	31	34	40	46	42	49	56	58	56	64	63	17	46

Note. Methamphetamine asked separately for the three different forms from 2002 onwards. The response 'Don't know' was excluded from analysis. *p<0.050; **p<0.010; ***p<0.001 for 2020 versus 2021.

6

Cocaine

Participants were asked about their recent (past six month) use of various forms of cocaine. Cocaine hydrochloride, a salt derived from the coca plant, is the most common form of cocaine available in Australia. ‘Crack’ cocaine is a form of freebase cocaine (hydrochloride removed), which is particularly pure. ‘Crack’ is most prevalent in North America and infrequently encountered in Australia.

Patterns of Consumption

Recent Use (past 6 months)

The per cent reporting recent use of cocaine has generally decreased over the period of monitoring. In 2021, 15% of the IDRS sample reported cocaine use in the past six months, stable from 17% in 2020 (p=0.143) (Figure 18). The per cent reporting use in 2021 varied across jurisdictions, ranging from five or less participants in the NT sample to 18% of the QLD sample. Overall, the per cent reporting recent cocaine use has remained relatively stable in each of the jurisdictions over time except for a substantial decrease in NSW (Table 7).

Frequency of Use

Median frequency of use at the national level has varied between two and eight days, with a median of three days (IQR=1-5; n=130) observed in 2021, stable from 2020 (3 days; IQR=1-6; p=0.897) (Figure 18). Of those who had recently used cocaine and commented (n=130), almost one-tenth (8%) reported weekly or more frequent use, consistent with 2020 (8%; p=0.977).

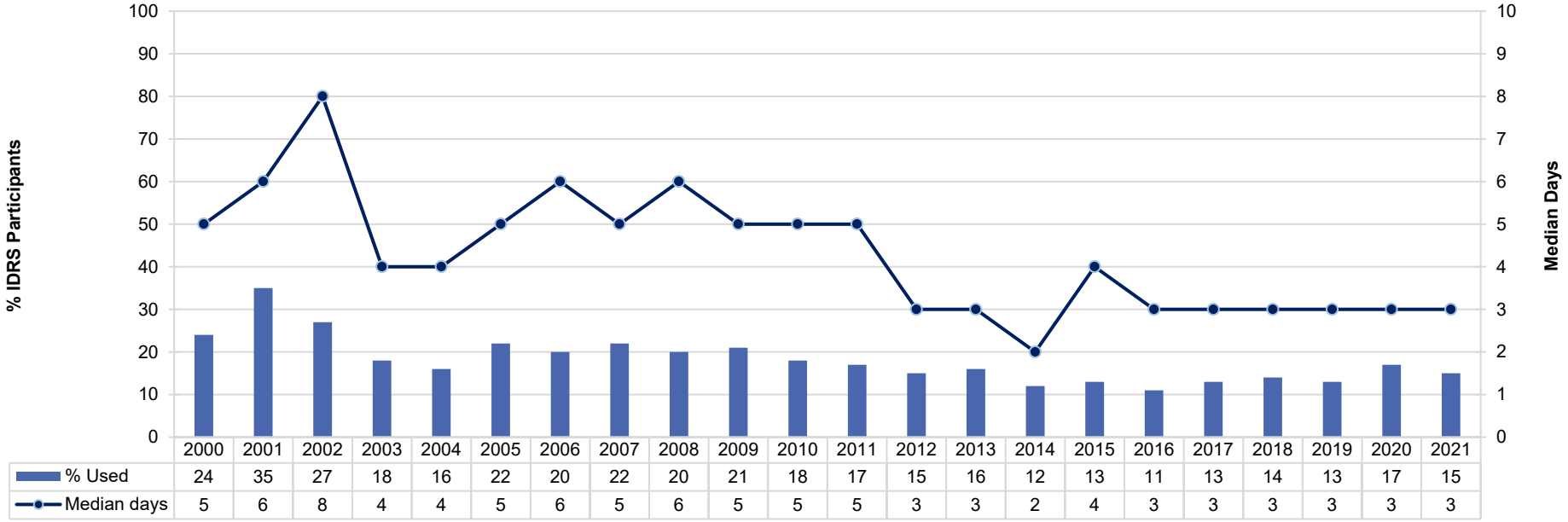
Routes of Administration

No statistically significant changes in route of administration were observed between 2020 and 2021; snorting proved to be the most common route amongst those reporting recent use (58%; 55% in 2020; p=0.720), followed by injecting (50%; 52% in 2020; p=0.722). A smaller per cent reported smoking (5%; 7% in 2020; p=0.455) and swallowing (n≤5; 4% in 2020) cocaine.

Quantity

Of those who reported recent use and responded (n=104), the median amount of cocaine used on an average day of consumption in the six months preceding interview was 0.30 grams (IQR=0.10-1.00; 0.30 grams in 2020; IQR=0.10-0.50; p=0.155).

Figure 18: Past six month use and frequency of use of cocaine, nationally, 2000-2021



	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
% Used	24	35	27	18	16	22	20	22	20	21	18	17	15	16	12	13	11	13	14	13	17	15
Median days	5	6	8	4	4	5	6	5	6	5	5	5	3	3	2	4	3	3	3	3	3	3

Note. Median days computed among those who reported recent use (maximum 180 days). Median days rounded to the nearest whole number. Y axis reduced to 10 days to improve visibility of trends.
*p<0.050; **p<0.010; ***p<0.001 for 2020 versus 2021.

Table 7: Past six month use of cocaine, by jurisdiction, 2000-2021

%	NSW	ACT	VIC	TAS	SA	WA	NT	QLD
2000	63	15	13	6	20	22	18	13
2001	84	40	28	8	27	32	13	28
2002	79	18	17	12	26	17	10	15
2003	53	13	13	9	13	10	-	16
2004	47	10	10	-	6	15	10	10
2005	60	20	15	8	16	19	10	11
2006	67	8	19	12	8	10	8	9
2007	63	18	22	-	7	16	9	15
2008	58	18	24	-	-	15	-	13
2009	61	22	15	-	10	12	12	15
2010	57	6	14	-	12	15	-	13
2011	47	8	17	7	12	10	-	13
2012	44	16	9	11	7	15	-	-
2013	41	16	11	-	9	15	7	11
2014	32	15	10	8	7	7	-	9
2015	34	12	9	-	13	11	-	8
2016	25	8	10	6	6	10	-	9
2017	21	18	12	11	10	10	9	9
2018	26	14	15	11	10	12	6	9
2019	21	15	10	6	16	12	9	10
2020	23	19	17	16	14	18	-	19
2021	**15**	**16**	**18**	**16**	**16**	**17**	**-**	**12**

Note. - Values suppressed due to small cell size (n≤5 but not 0). *p<0.050; **p<0.010; ***p<0.001 for 2020 versus 2021.

Price, Perceived Purity and Perceived Availability

Questions pertaining to the price, perceived purity and availability of cocaine were not asked of participants in 2020, meaning that significance testing between 2021 and 2020 figures cannot be undertaken.

Price

The median price for one gram of cocaine was reported to be $350 (n=37; IQR=300-400) and $90 for a point/cap (n=9; IQR=50-100) in 2021. The median price for one gram of cocaine has fluctuated considerably since monitoring first commenced (Figure 19).

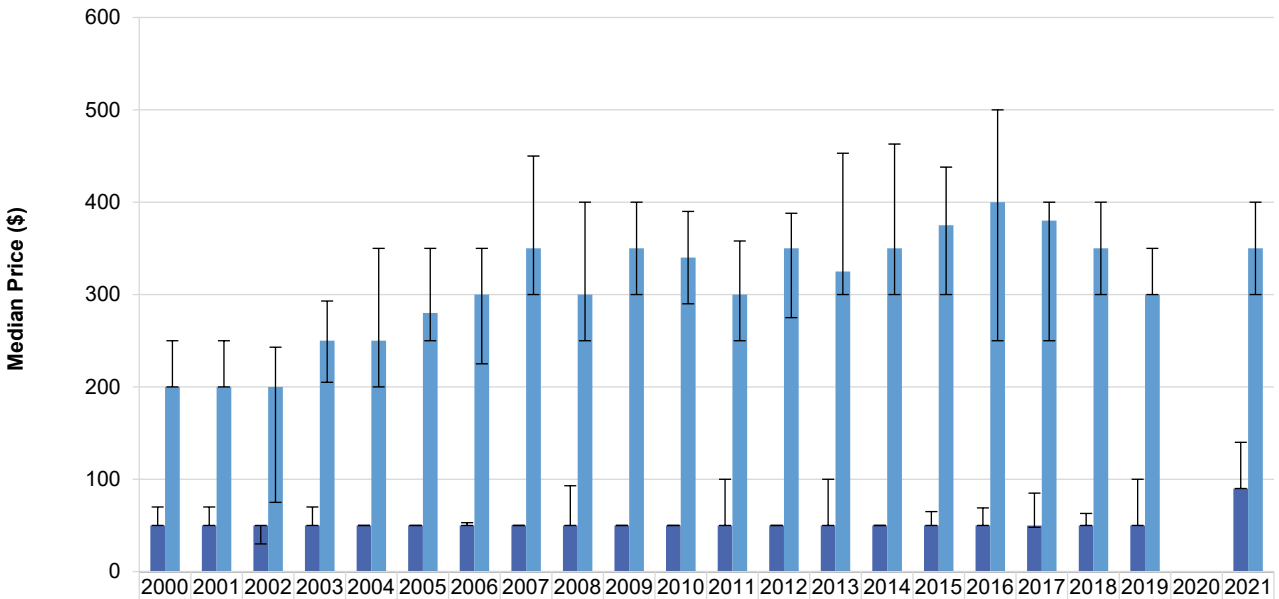
Perceived Purity

Of those who were able to comment in 2021 (n=64), almost equal percentages perceived cocaine to be of ‘high’ (33%) or ‘medium’ (30%) purity (Figure 20).

Perceived Availability

Amongst those able to comment in 2021 (n=64), the largest per cent reported cocaine to be ‘easy’ to obtain in 2021 (45%), with a further 23% reporting it to be ‘very easy’ to obtain (Figure 21). These findings are consistent with reports of perceived availability in 2018 and 2019.

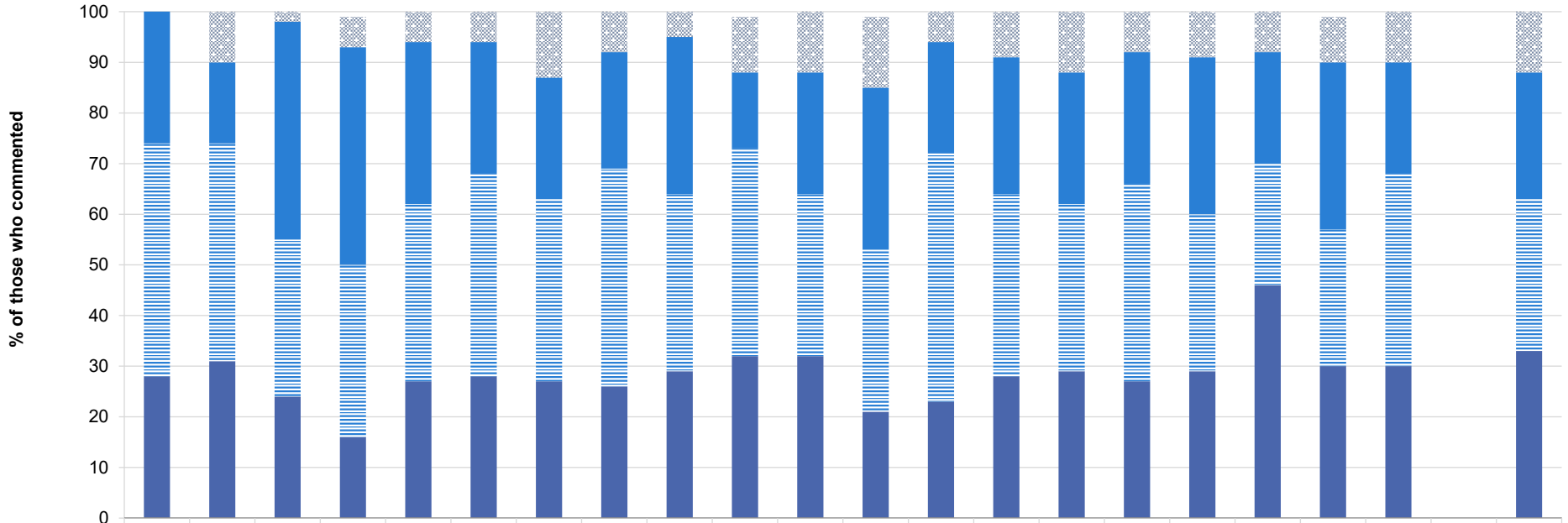
Figure 19: Median price of cocaine per cap/point and gram, nationally, 2000-2021



	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
Cap/Point	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	/	90
Gram	200	200	200	250	250	280	300	350	300	350	340	300	350	325	350	375	400	380	350	300	/	350

Note. Among those who commented. The error bars represent IQR. Price data not collected in 2020 (/ Not asked), therefore statistical significance testing has not been undertaken between 2020 and 2021.

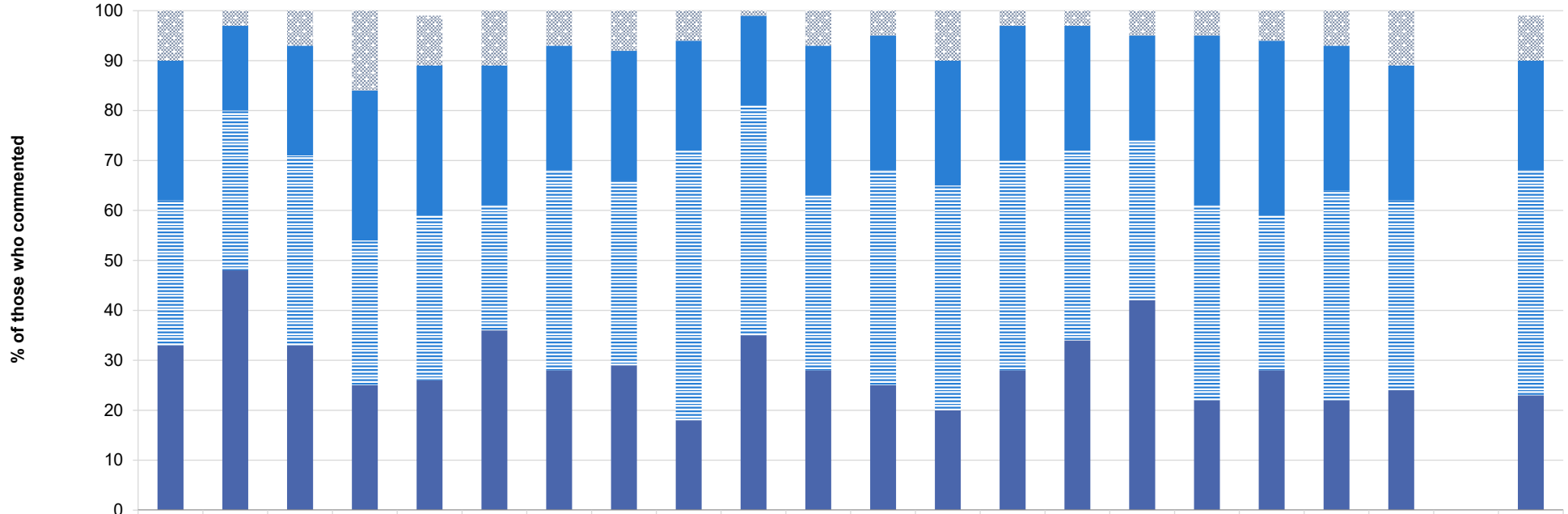
Figure 20: Current perceived purity of cocaine, nationally, 2000-2021



	2000 (n=138)	2001 (n=208)	2002 (n=160)	2003 (n=111)	2004 (n=100)	2005 (n=149)	2006 (n=132)	2007 (n=140)	2008 (n=97)	2009 (n=111)	2010 (n=104)	2011 (n=84)	2012 (n=74)	2013 (n=64)	2014 (n=51)	2015 (n=62)	2016 (n=42)	2017 (n=46)	2018 (n=66)	2019 (n=79)	2020	2021 (n=64)
Fluctuates	0	10	3	6	6	6	13	9	5	11	13	14	7	9	12	8	10	9	9	10	/	13
Low	27	16	43	43	32	26	24	23	31	15	24	32	22	27	26	26	31	22	33	22	/	25
Medium	46	43	31	34	35	40	36	43	35	41	32	32	49	36	33	39	31	24	27	38	/	30
High	28	31	24	16	27	28	27	26	29	32	32	21	23	28	29	27	29	46	30	30	/	33

Note. The response 'Don't know' was excluded from analysis. Purity data not collected in 2020 (/ Not asked), therefore statistical signifiance testing has not been undertaken between 2020 and 2021.

Figure 21: Current perceived availability of cocaine, nationally, 2000-2021



	2000 (n=158)	2001 (n=222)	2002 (n=252)	2003 (n=119)	2004 (n=106)	2005 (n=154)	2006 (n=134	2007 (n=148)	2008 (n=103)	2009 (n=116)	2010 (n=108)	2011 (n=83)	2012 (n=80)	2013 (n=64)	2014 (n=53)	2015 (n=62)	2016 (n=41)	2017 (n=51)	2018 (n=69)	2019 (n=84)	2020	2021 (n=64)
Very difficult	10	3	7	16	10	11	7	8	6	2	7	5	10	3	4	5	5	6	7	11	/	9
Difficult	28	17	22	30	30	28	25	26	22	18	30	27	25	27	25	21	34	35	29	27	/	22
Easy	29	32	38	29	33	25	40	37	54	46	35	43	45	42	38	32	39	31	42	38	/	45
Very easy	33	48	33	25	26	36	28	29	18	35	28	25	20	28	34	42	22	28	22	24	/	23

Note. The response 'Don't know' was excluded from analysis. Availability data not collected in 2020 (/ Not asked), therefore statistical signifiance testing has not been undertaken between 2020 and 2021.

7

Cannabis

Participants were asked about their recent (past six month) use of indoor-cultivated cannabis via a hydroponic system ('hydro') and outdoor-cultivated cannabis ('bush'), as well as hashish and hash oil.

Patterns of Consumption

In this chapter, data from 2021, and from 2000-2016, refers to non-prescribed cannabis use only, while data from 2017-2020 refers to 'any' cannabis use (including hydroponic and bush cannabis, hashish and hash oil). While comparison between 2020 and 2021 and previous years should be treated with caution, the relatively recent legalisation of medicinal cannabis in Australia lends confidence that estimates are relatively comparable.

Recent Use (past 6 months)

Over the course of monitoring, at least two in three participants nationally have reported recent use of cannabis. In 2021, over two-thirds of the national sample reported recent non-prescribed use (67%), stable from 2020 (67%; *p*=0.787) (Figure 22). In all jurisdictions, the per cent reporting recent non-prescribed cannabis use has declined over time and remained stable between 2021 and 2020 (Table 8).

Frequency of Use

In 2021, median frequency of non-prescribed use in the past six months was 180 days (i.e., daily; IQR=45-180), similar to 2020 (160 days; IQR=24-180; *p*=0.150) (Figure 22). Just over half (51%) of those who had recently used non-prescribed cannabis reported daily use (48% in 2020; *p*=0.337).

Routes of Administration

Smoking remained the most common route of administration (97%; 97% in 2020; *p*=0.842). A smaller per cent reported inhaling/vaporising (8%; 8% in 2020; *p*=0.700) and swallowing (5%; 5% in 2020) non-prescribed cannabis.

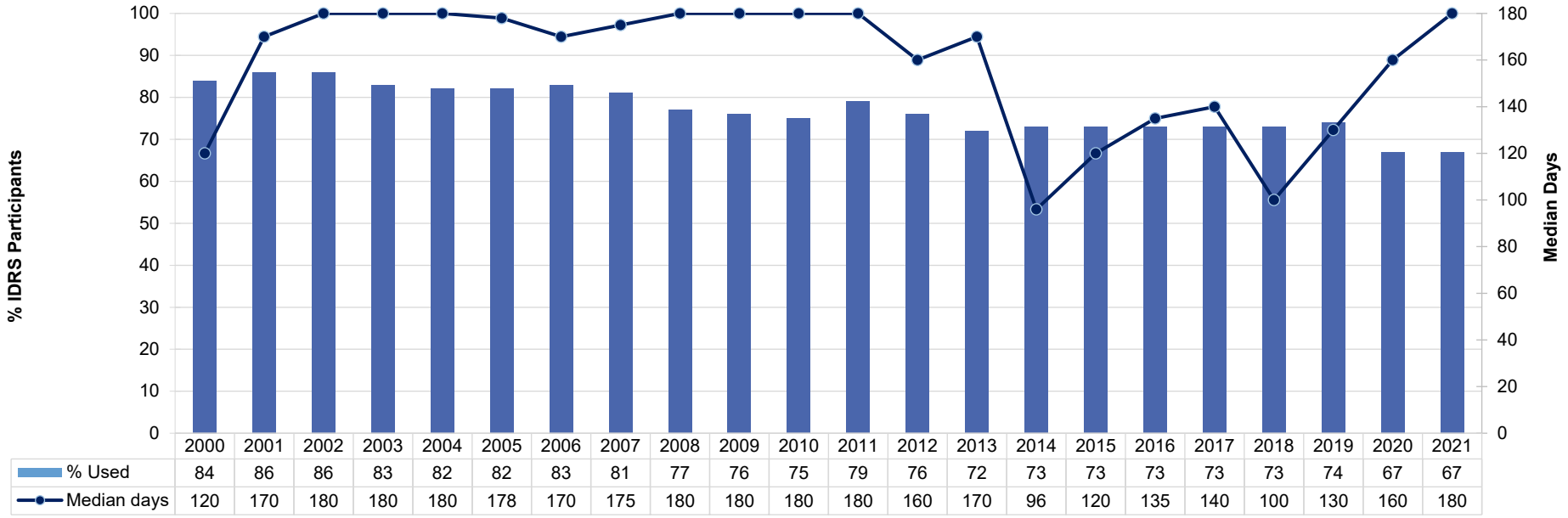
Quantity

Of those who reported recent use of non-prescribed cannabis and commented (n=563), the median typical amount used on the last occasion of use was one gram (IQR=1.00-2.00; n=303; 1.00 gram in 2020; IQR=0.80-2.00; *p*=0.052) or 2.5 cones (IQR=2-4; n=204; 2 cones in 2020; IQR=1-4; *p*=0.423) or one joint (IQR=1-2; n=56; 1 joint in 2020; IQR=1-1; *p*=0.156).

Forms of Cannabis

Of those who had used non-prescribed cannabis in the past six months and commented (n=571), 91% reported recent use of hydroponic cannabis (89% in 2020; *p*=0.390), and under two-fifths (37%) reported recent use of outdoor-grown 'bush' cannabis (39% in 2020; *p*=0.409). A smaller percentage reported having used hashish (4%; 6% in 2020; *p*=0.111), hash oil (3%; 4% in 2020; *p*=0.669) and non-prescribed pharmaceutical CBD oil (2%; data not collected in 2020) in the preceding six months.

Figure 22: Past six month use and frequency of use of non-prescribed cannabis, nationally, 2000-2021



	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
% Used	84	86	86	83	82	82	83	81	77	76	75	79	76	72	73	73	73	73	73	74	67	67
Median days	120	170	180	180	180	178	170	175	180	180	180	180	160	170	96	120	135	140	100	130	160	180

Note. Median days computed among those who reported recent use (maximum 180 days). Median days rounded to the nearest whole number. *p<0.050; **p<0.010; ***p<0.001 for 2020 versus 2021.

Table 8: Past six month use of non-prescribed cannabis, by jurisdiction, 2000-2021

%	NSW	ACT	VIC	TAS	SA	WA	NT	QLD
2000	72	84	85	90	88	90	84	84
2001	83	85	88	94	85	91	81	82
2002	80	89	87	91	85	98	83	82
2003	79	86	88	88	80	81	83	76
2004	80	85	81	87	83	84	75	75
2005	80	89	86	87	80	76	79	76
2006	80	90	83	88	77	80	84	85
2007	79	83	83	87	81	69	83	84
2008	80	80	74	86	75	64	78	82
2009	79	81	79	89	61	72	79	69
2010	72	81	81	79	66	70	72	77
2011	81	87	85	78	69	71	71	79
2012	72	81	85	81	61	79	71	70
2013	80	75	80	71	61	61	67	67
2014	77	74	75	82	75	69	62	70
2015	79	81	76	73	74	60	72	60
2016	76	69	77	74	73	70	72	64
2017	79	76	71	73	73	73	59	70
2018	76	79	70	81	70	77	60	67
2019	73	79	76	76	79	72	72	65
2020	64	77	69	72	67	66	60	64
2021	**65**	**75**	**66**	**67**	**67**	**69**	**59**	**68**

Note. *p<0.050; **p<0.010; ***p<0.001 for 2020 versus 2021.

Price, Perceived Potency and Perceived Availability

Price

Consistent with previous years, the median price per gram of non-prescribed hydroponic cannabis nationally was $20 (IQR=20-25; n=184; $20 in 2020; IQR=20-25; n=155; p=0.941), and $20 for bush (IQR=11-20; n=70; $20 in 2020; IQR=17-25; n=65; p=0.112). The price per ounce of hydroponic cannabis was $290 in 2021 (IQR=250-324; n=66), stable from 2020 ($300; IQR=250-350; n=119; p=0.103), whereas the price per ounce of non-prescribed bush cannabis decreased significantly in 2021 ($200; IQR=200-250; n=34) compared to 2020 ($250; IQR=200-300; n=119; p=0.038) (Figure 23).

Perceived Potency

Among those that were able to comment (hydroponic: n=455; bush: n=212 in 2021), there were no significant differences in perceived potency of non-prescribed cannabis between 2021 and 2020 (hydroponic: p=0.095; bush: p=0.074). Nearly three-fifths (58%) perceived hydroponic cannabis to be of 'high' potency (49% in 2020) followed by 28% perceiving it to be of 'medium' potency (33% in 2020). In contrast, the per cent reporting bush to be of 'high' potency was 33% in 2021 (32% in 2020), with the larger per cent perceiving it to be of 'medium' potency (43%; 44% in 2020) (Figure 24).

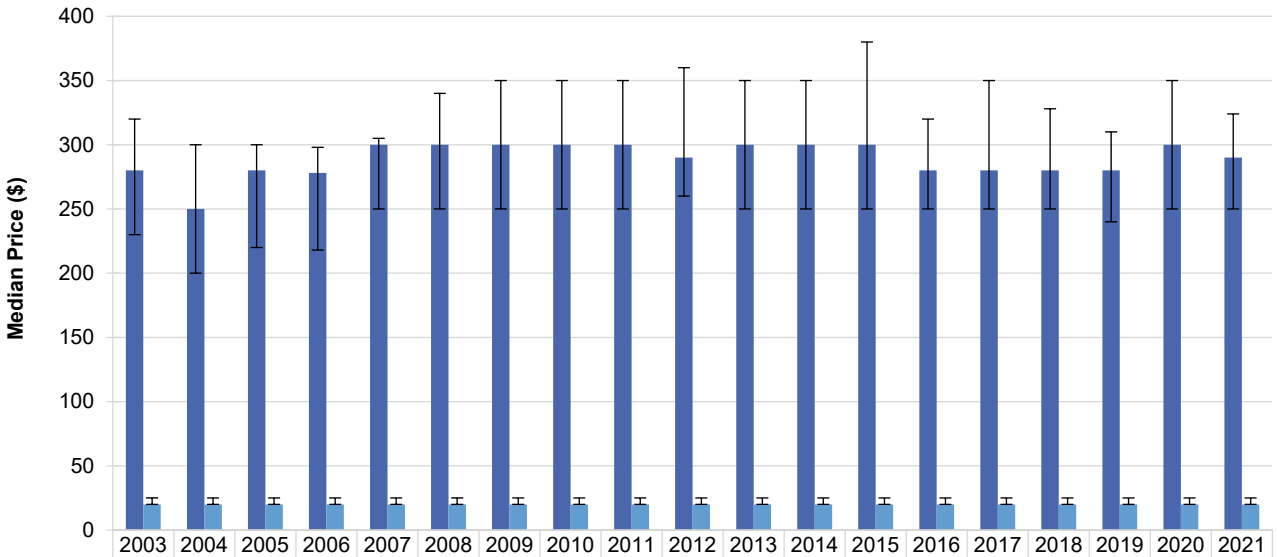
Perceived Availability

There was a significant change in the perceived availability of non-prescribed hydroponic cannabis in 2021 compared to 2020 (p<0.001). Specifically, of those that commented in 2021 (n=463), nearly half (49%) perceived hydroponic cannabis to be 'very easy' to obtain (33% in 2020), followed by almost two-fifths (39%) perceiving it to be 'easy' to obtain (48% in 2020). In contrast, there were no changes in the perceived availability of non-prescribed bush cannabis between 2021 and 2020 (p=0.955). Of

those that commented in 2021 (n=212), over two-fifths (42%) reported that bush cannabis was 'easy' to obtain (44% in 2020), followed by 36% perceiving it to be 'very easy' to obtain (24% in 2020) (Figure 25).

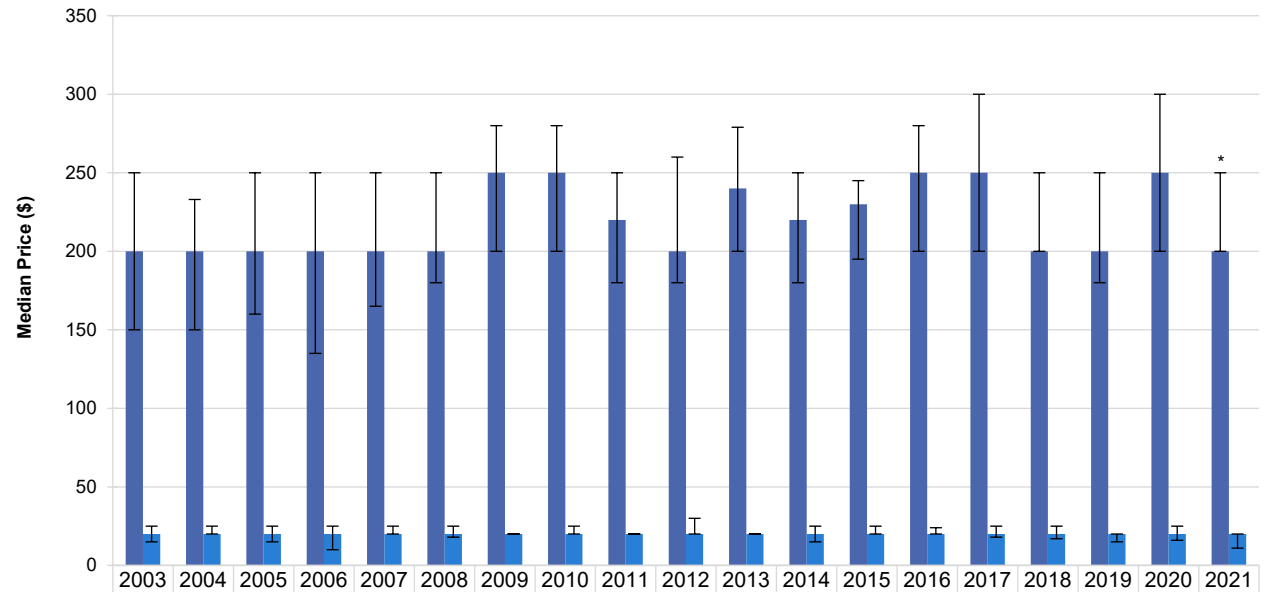
Figure 23: Median price of non-prescribed hydroponic (a) and bush (b) cannabis per ounce and gram, nationally, 2003-2021

(A) Hydroponic cannabis



	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
Ounce	280	250	280	278	300	300	300	300	300	290	300	300	300	280	280	280	280	300	290
Gram	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20

(B) Bush cannabis

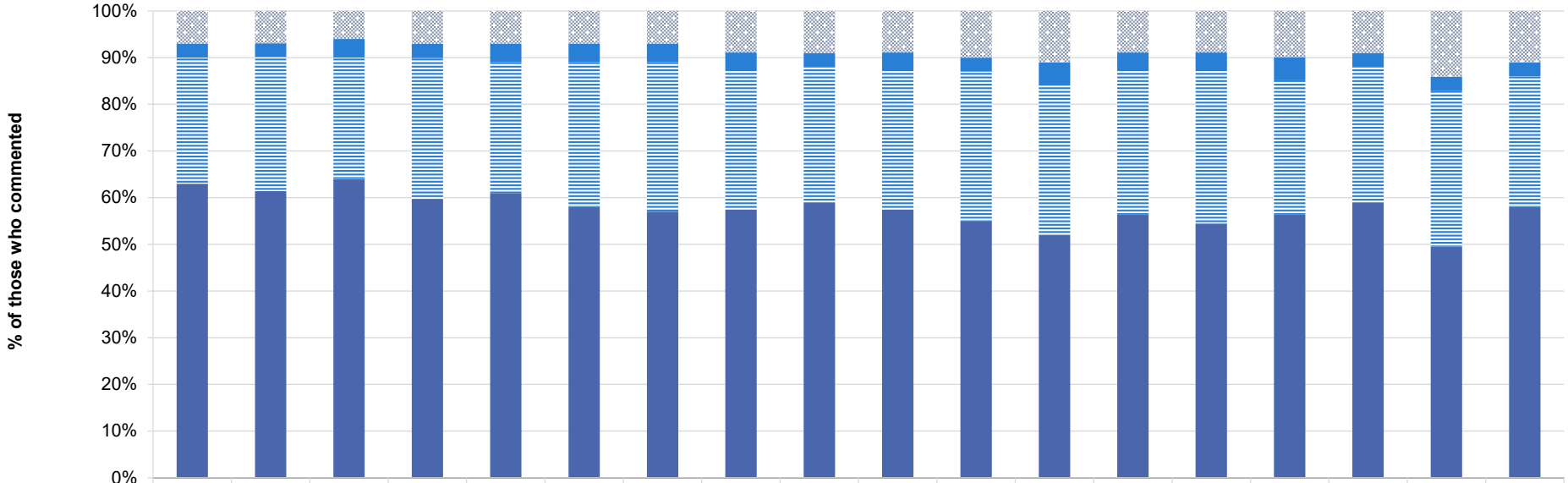


	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
Ounce	200	200	200	200	200	200	250	250	220	200	240	220	230	250	250	200	200	250	200
Gram	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20	20

Note. Among those who commented. From 2003 onwards hydroponic and bush cannabis data collected separately. The error bars represent the IQR. *p<0.050; **p<0.010; ***p<0.001 for 2020 versus 2021.

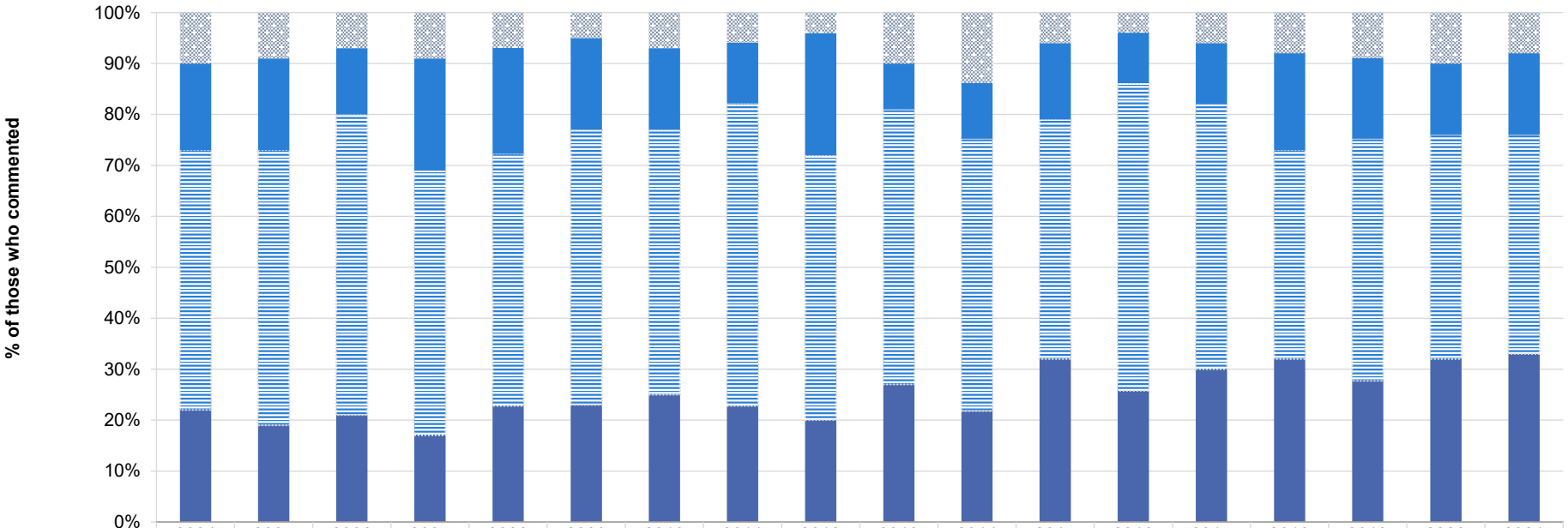
Figure 24: Current perceived potency of non-prescribed hydroponic (a) and bush (b) cannabis, nationally, 2004-2021

(A) Hydroponic cannabis



	2004 (n=710)	2005 (n=661)	2006 (n=646)	2007 (n=508)	2008 (n=552)	2009 (n=526)	2010 (n=485)	2011 (n=549)	2012 (n=526)	2013 (n=461)	2014 (n=479)	2015 (n=435)	2016 (n=447)	2017 (n=418)	2018 (n=445)	2019 (n=475)	2020 (n=348)	2021 (n=455)
Fluctuates	7	7	6	7	7	7	7	9	9	9	10	11	9	9	10	9	14	11
Low	3	3	4	3	4	4	4	4	3	4	3	5	4	4	5	3	3	3
Medium	27	29	26	30	28	31	32	30	29	30	32	32	31	33	29	29	33	28
High	63	62	64	59	61	58	57	58	59	58	55	52	57	55	57	59	49	58

(B) Bush cannabis

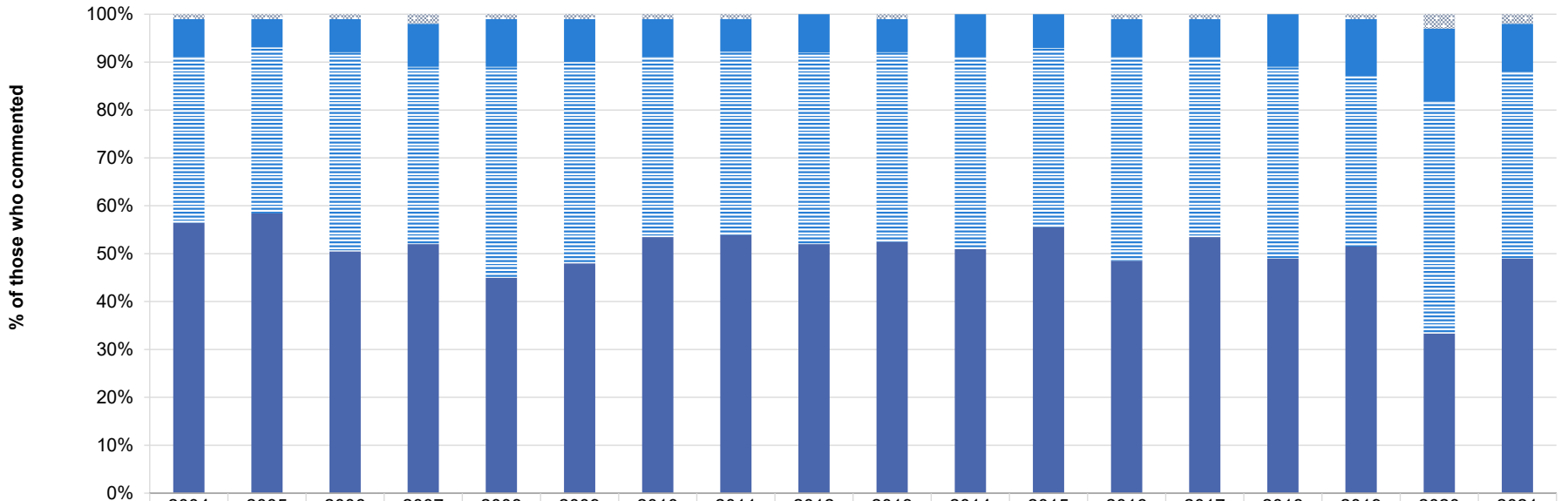


	2004 (n=469)	2005 (n=450)	2006 (n=302)	2007 (n=310)	2008 (n=283)	2009 (n=328)	2010 (n=279)	2011 (n=237)	2012 (n=224)	2013 (n=207)	2014 (n=205)	2015 (n=186)	2016 (n=168)	2017 (n=181)	2018 (n=198)	2019 (n=275)	2020 (n=157)	2021 (n=212)
Fluctuates	10	9	7	9	7	5	7	6	4	10	14	6	4	6	8	9	10	8
Low	17	18	13	22	21	18	16	12	24	9	11	15	10	12	19	16	14	16
Medium	51	54	59	52	50	54	52	60	52	54	54	47	61	52	41	48	44	43
High	22	19	21	17	23	23	25	23	20	27	22	32	26	30	32	28	32	33

Note. The response 'Don't know' was excluded from analysis. Hydroponic and bush cannabis data collected separately from 2004 onwards. *p<0.050; **p<0.010; ***p<0.001 for 2020 versus 2021.

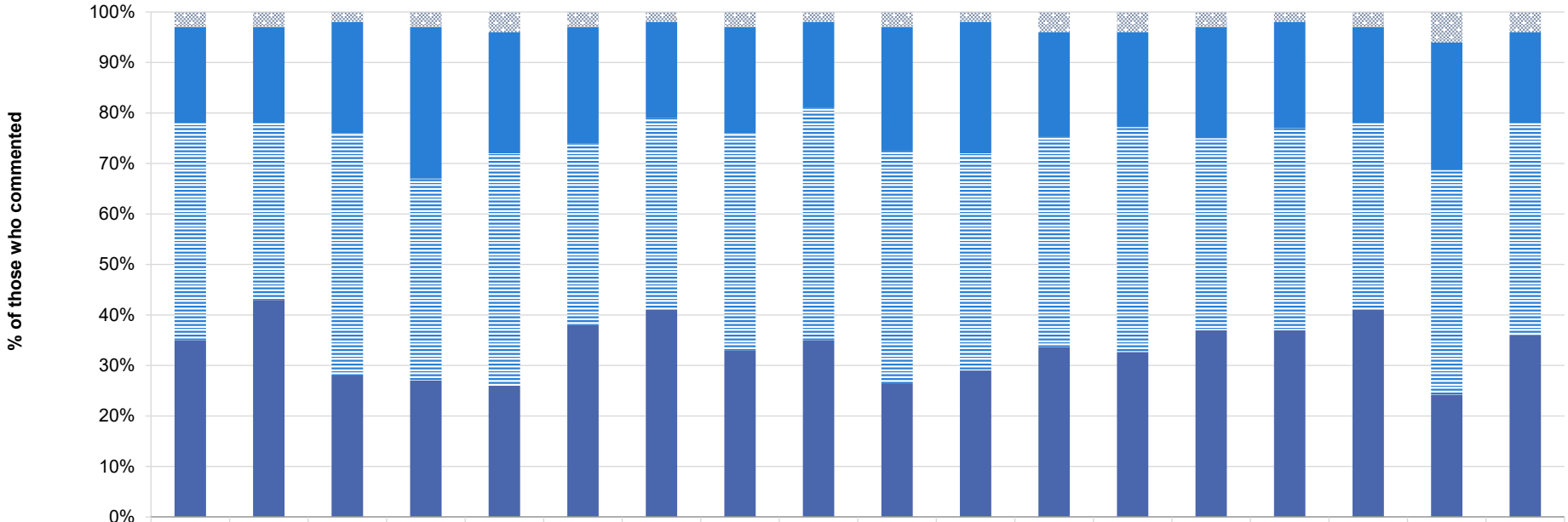
Figure 25: Current perceived availability of non-prescribed hydroponic (a) and bush (b) cannabis, nationally, 2004-2021

(A) Hydroponic cannabis



	2004 (n=724)	2005 (n=671)	2006 (n=643)	2007 (n=514)	2008 (n=558)	2009 (n=529)	2010 (n=484)	2011 (n=548)	2012 (n=535)	2013 (n=464)	2014 (n=485)	2015 (n=442)	2016 (n=447)	2017 (n=426)	2018 (n=455)	2019 (n=480)	2020 (n=351)	2021 *** (n=463)
Very difficult	1	1	1	2	1	1	1	1	0	1	0	0	1	1	0	1	3	2
Difficult	8	6	7	9	10	9	8	7	8	7	9	7	8	8	11	12	15	10
Easy	35	35	42	37	44	42	38	39	40	40	40	37	43	38	40	36	48	39
Very easy	57	59	51	52	45	48	54	55	52	53	51	55	49	54	49	52	33	49

(B) Bush cannabis



	2004 (n=458)	2005 (n=462)	2006 (n=303)	2007 (n=315)	2008 (n=283)	2009 (n=318)	2010 (n=288)	2011 (n=240)	2012 (n=230)	2013 (n=204)	2014 (n=211)	2015 (n=188)	2016 (n=166)	2017 (n=181)	2018 (n=202)	2019 (n=279)	2020 (n=160)	2021 (n=212)
Very difficult	3	3	2	3	4	3	2	3	2	3	2	4	4	3	2	3	6	4
Difficult	19	19	22	30	24	23	19	21	17	25	26	21	19	22	21	19	25	18
Easy	43	35	48	40	46	36	38	43	46	47	43	42	45	38	40	37	44	42
Very easy	35	43	28	27	26	38	41	33	35	27	29	34	33	37	37	41	24	36

Note. The response 'Don't know' was excluded from analysis. Hydroponic and bush cannabis data collected separately from 2004 onwards. *p<0.050; **p<0.010; ***p<0.001 for 2020 versus 2021.

8

Pharmaceutical Opioids

The following section describes recent (past six month) use of pharmaceutical opioids amongst the sample. Terminology throughout this chapter refers to **prescribed use:** use of pharmaceutical opioids obtained by a prescription in the person's name; **non-prescribed use:** use of pharmaceutical opioids obtained from a prescription in someone else's name; and **any use**: use of pharmaceutical opioids obtained through either of the above means. Contact the Drug Trends team (drugtrends@unsw.edu.au) for information on price and perceived availability of non-prescribed pharmaceutical opioids.

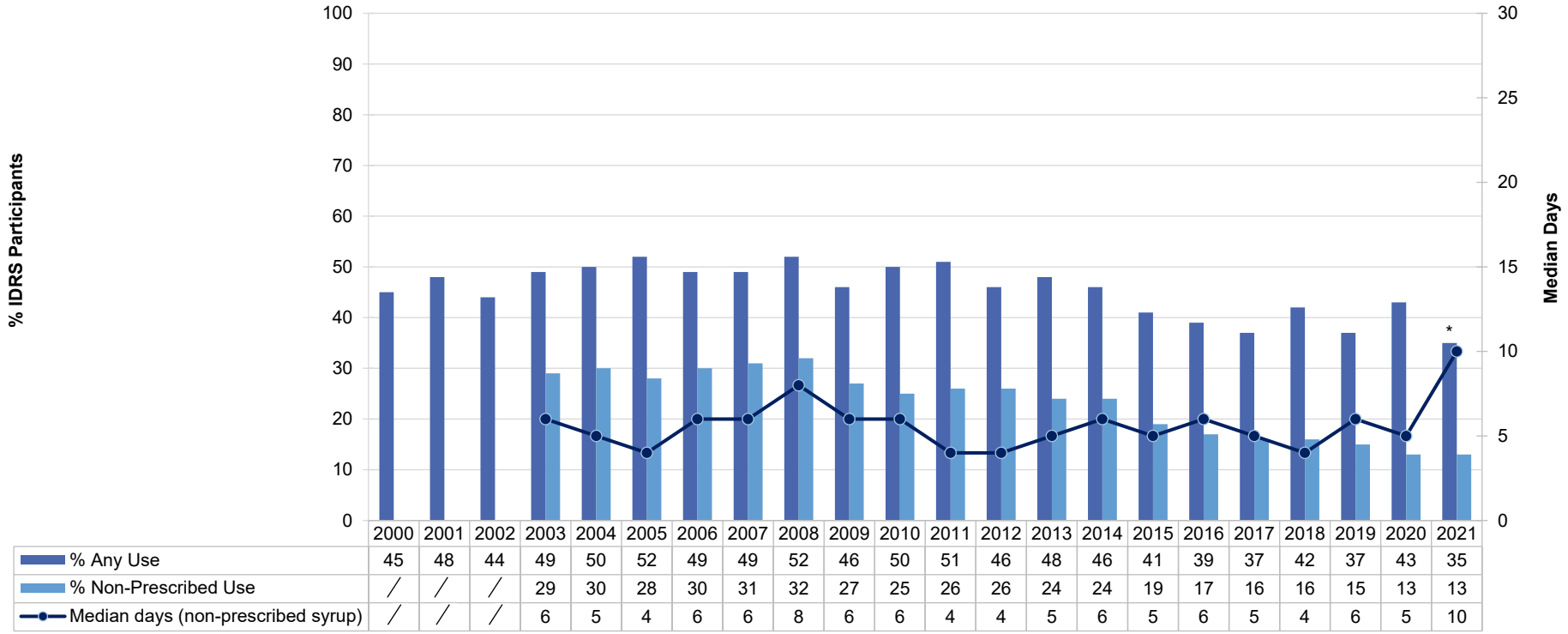
Methadone

Any Recent Use (past 6 months): Methadone use (including liquid and tablets) has generally ranged between one-third and half of participants reporting any recent use over the course of monitoring. In 2021, 35% of participants reported recent use of any methadone (prescribed and non-prescribed), a significant decrease from 43% in 2020 (p=0.002) (Figure 26). The per cent reporting any non-prescribed use has steadily been declining since 2015 but remained stable in 2021 (13%). Indeed, methadone use historically has largely consisted of prescribed use (25% in 2021; 34% in 2020; p<0.001), with the per cent reporting non-prescribed use peaking at 32% in 2008 and declining to 13% nationally in 2020 and 2021, the lowest percentage reported over the period of monitoring (Figure 26). The per cent reporting non-prescribed use varies by jurisdiction, from 32% in the TAS sample to 5% in the VIC sample (Table 9).

Frequency of Use: Frequency of non-prescribed methadone syrup use in the past six months remained stable in 2021 (10 days; IQR=2-35; 5 days in 2020; IQR=2-30; p=0.188) (Figure 26).

Recent Injection: Of those who had recently use methadone syrup or tablets (n=313), nearly two-fifths (37%) of participants reported recently injecting methadone, a significant increase relative to 2020 (26%; p=0.003). Participants in 2021 reported injecting methadone on a median of 24 days (IQR=3-71), stable from 2020 (22 days; IQR=3-51; p=0.943).

Figure 26: Past six month use (prescribed and non-prescribed) and frequency of use of non-prescribed methadone, nationally, 2000-2021



	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
% Any Use	45	48	44	49	50	52	49	49	52	46	50	51	46	48	46	41	39	37	42	37	43	35
% Non-Prescribed Use	/	/	/	29	30	28	30	31	32	27	25	26	26	24	24	19	17	16	16	15	13	13
Median days (non-prescribed syrup)	/	/	/	6	5	4	6	6	8	6	6	4	4	5	6	5	6	5	4	6	5	10

Note. Includes methadone syrup and tablets except where otherwise specified. Non-prescribed use not distinguished in 2000-2002 (/ Not asked). Median days computed among those who reported recent use (maximum 180 days). Median days rounded to the nearest whole number. Y axis reduced to 30 days to improve visibility of trends. *p<0.050; **p<0.010; ***p<0.001 for 2020 versus 2021.

Table 9: Past six month non-prescribed use of methadone, by jurisdiction, 2003-2021

%	NSW	ACT	VIC	TAS	SA	WA	NT	QLD
2003	20	27	13	76	33	18	39	18
2004	29	30	11	75	19	20	35	28
2005	19	34	11	60	27	27	41	22
2006	28	39	11	63	28	32	33	20
2007	24	34	21	66	27	31	33	20
2008	27	35	21	70	17	19	45	27
2009	36	26	20	68	10	11	32	11
2010	27	25	19	58	17	13	27	15
2011	25	25	22	53	15	27	30	16
2012	26	27	21	47	14	31	27	12
2013	29	29	12	51	20	24	13	16
2014	29	27	21	51	9	20	16	17
2015	25	16	17	36	11	14	17	14
2016	21	12	13	40	6	13	14	19
2017	19	13	7	39	6	-	18	19
2018	20	13	11	42	-	9	8	18
2019	22	15	7	29	8	-	13	19
2020	17	7	10	26	9	11	-	20
2021	**19**	**14**	**5**	**32**	**7**	**6**	**10**	**13**

Note. Includes methadone syrup and tablets. - Values suppressed due to small cell size (n≤5 but not 0). From 2000-2002, the IDRS did not distinguish between prescribed and non-prescribed methadone use. *p<0.050; **p<0.010; ***p<0.001 for 2020 versus 2021.

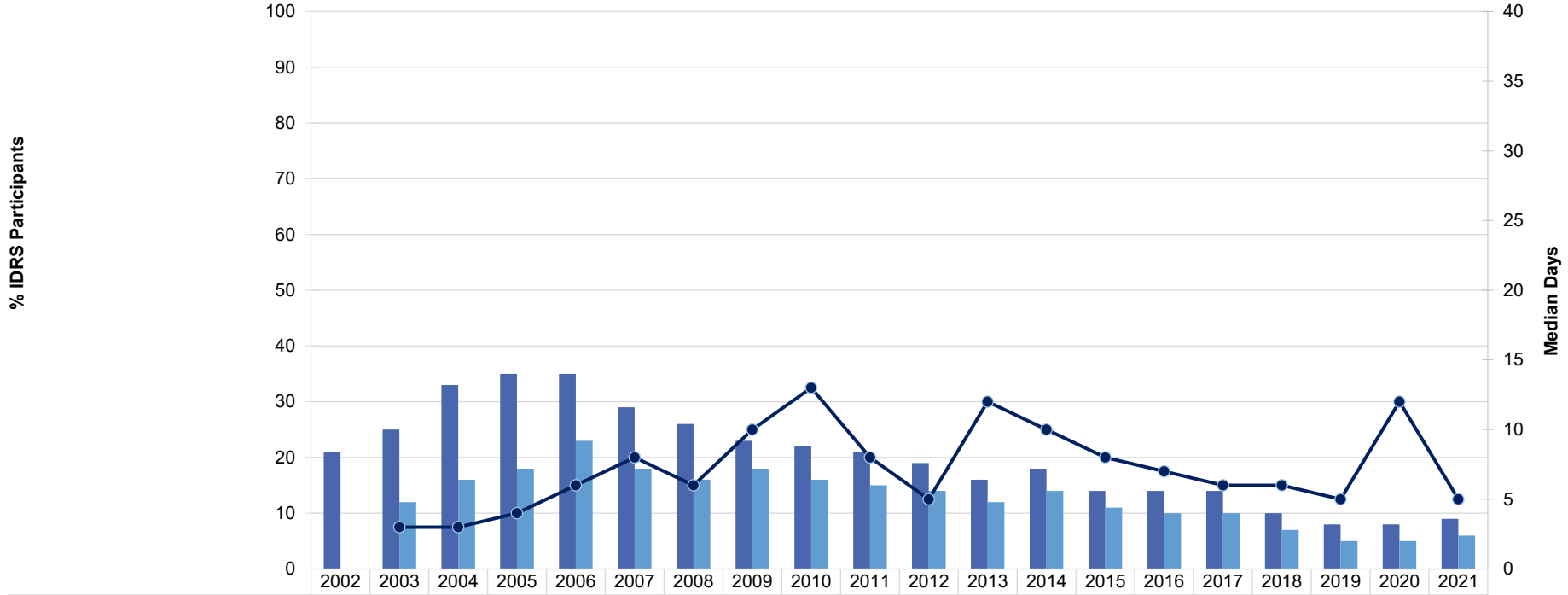
Buprenorphine

Any Recent Use (past 6 months): The per cent reporting recent buprenorphine tablet use has declined from 2006 onwards (Figure 27). In 2021, 9% of the sample reported recent use of any buprenorphine in tablet form, stable from 8% in 2020 (p=0.581). Two per cent reported prescribed use (3% in 2020; p=0.242), whereas 6% reported non-prescribed use (5% in 2020; p=0.130) (Figure 27).

Frequency of Use: Median days of non-prescribed use in 2021 was 5 days (IQR=2-49; 12 days in 2020; IQR=3-48; p=0.259).

Recent Injection: Of those who had recently use buprenorphine (n=76), 68% reported recently injecting buprenorphine, stable relative to 2020 (62%; p=0.508). Participants in 2021 reported injecting buprenorphine on a median of 8 days (IQR=2-72), also stable from 2020 (23 days; IQR=3-125; p=0.246).

Figure 27: Past six month use (prescribed and non-prescribed) and frequency of use of non-prescribed buprenorphine, nationally, 2002-2021



	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
% Any Use	21	25	33	35	35	29	26	23	22	21	19	16	18	14	14	14	10	8	8	9
% Non-Prescribed Use	/	12	16	18	23	18	16	18	16	15	14	12	14	11	10	10	7	5	5	6
Median days (non-prescribed)	/	3	3	4	6	8	6	10	13	8	5	12	10	8	7	6	6	5	12	5

Note. Non-prescribed use not distinguished in 2002 (/ Not asked). Median days computed among those who reported recent use (maximum 180 days). Median days rounded to the nearest whole number. Y axis reduced to 40 days to improve visibility of trends. *p<0.050; **p<0.010; ***p<0.001 for 2020 versus 2021.

Table 10: Past six month non-prescribed use of buprenorphine, by jurisdiction, 2003-2021

%	NSW	ACT	VIC	TAS	SA	WA	NT	QLD
2003	5	-	32	-	10	18	13	7
2004	8	-	35	-	12	23	15	20
2005	8	15	29	-	14	34	20	20
2006	19	34	29	6	14	32	14	30
2007	16	28	26	6	11	19	-	31
2008	7	25	19	-	12	18	18	25
2009	18	23	25	12	9	16	-	31
2010	13	27	21	-	9	18	8	27
2011	12	21	18	6	8	11	8	33
2012	13	20	19	6	9	14	10	22
2013	11	16	9	9	7	10	20	16
2014	22	12	12	11	-	19	12	19
2015	9	11	12	13	6	8	10	17
2016	11	8	4	10	-	9	16	26
2017	13	14	6	9	7	10	-	25
2018	-	9	5	11	-	8	-	12
2019	4	-	-	-	0	-	-	15
2020	5	0	0	11	-	9	0	14
2021	**5**	**-**	**-**	**11**	**-**	**-**	**-**	**20**

Note. In 2002, the IDRS interview did not distinguish between prescribed and non-prescribed use. Values suppressed due to small cell size (n≤5 but not 0). *p<0.050; **p<0.010; ***p<0.001 for 2020 versus 2021.

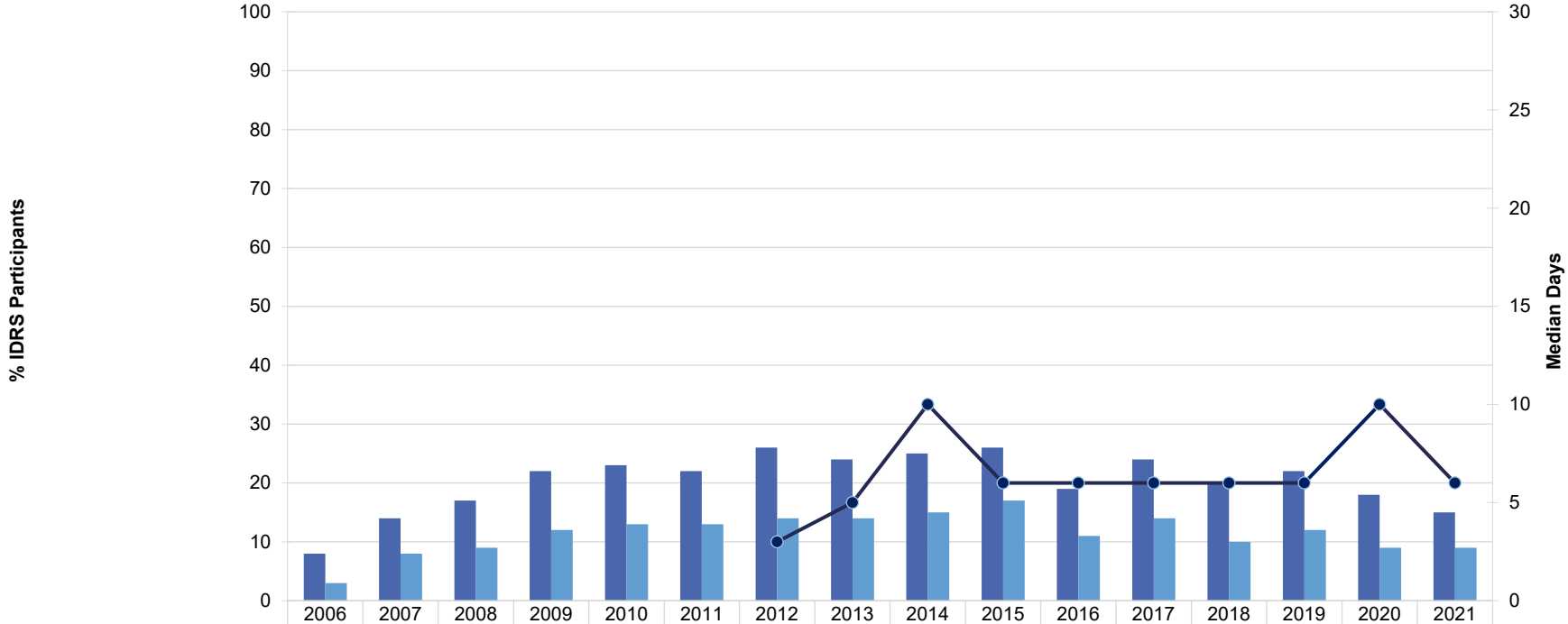
Buprenorphine-Naloxone

Any Recent Use (past 6 months): The per cent reporting any recent buprenorphine-naloxone use has remained relatively stable over the past decade. In 2021, 15% of the sample reported recent use of any buprenorphine-naloxone, stable from 2020 (18%; p=0.147). Seven per cent reported recent prescribed use in 2021, a significant decrease from 2020 (10%; p=0.015), whilst almost one-tenth (9%) reported non-prescribed use, stable from 2020 (9%; p=0.991) (Figure 28). There were no jurisdictional changes in the per cent reporting recent non-prescribed use (Table 11).

Frequency of Use: Frequency of non-prescribed use remained relatively stable in 2021 at a median of 6 days (IQR=2-49; 10 days in 2020; IQR=2-25; p=0.571) (Figure 28).

Recent Injection: Of those who had recently used buprenorphine-naloxone (n=135), over two-fifths (41%) of participants reported injecting it, stable from 35% in 2020 (p=0.377). Participants reported injecting buprenorphine-naloxone on a median of 6 days (IQR=2-90) in the past six months (24 days in 2020; IQR=2-90; p=0.384).

Figure 28: Past six month use (prescribed and non-prescribed) and frequency of use of non-prescribed buprenorphine-naloxone, nationally, 2006-2021



	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
% Any Use	8	14	17	22	23	22	26	24	25	26	19	24	20	22	18	15
% Non-Prescribed Use	3	8	9	12	13	13	14	14	15	17	11	14	10	12	9	9
Median days (non-prescribed film)	/	/	/	/	/	/	3	5	10	6	6	6	6	6	10	6

Note. From 2006-2011 participants were asked about the use of buprenorphine-naloxone tablet; / Not asked; from 2012-2016 participants were asked about the use of buprenorphine-naloxone tablet and film; from 2017 onwards participants were asked about the use of buprenorphine–naloxone film only. Median days of non-prescribed use computed among those who reported recent use (maximum 180 days), and is only reported from 2012 onwards to capture film use. Median days rounded to the nearest whole number. Y axis reduced to 30 days to improve visibility of trends. *p<0.050; **p<0.010; ***p<0.001 for 2020 versus 2021.

Table 11: Past six month non-prescribed use of buprenorphine-naloxone (any form), by jurisdiction, 2006-2021

%	NSW	ACT	VIC	TAS	SA	WA	NT	QLD
2006	-	-	5	-	-	9	-	7
2007	-	6	13	-	-	15	-	24
2008	-	10	18	-	-	12	-	16
2009	6	11	14	-	9	28	8	22
2010	-	12	24	-	8	17	15	21
2011	8	12	29	-	-	14	14	11
2012#	9	9	23	11	18	22	8	15
2013	9	11	17	9	9	22	19	22
2014	15	16	15	11	9	18	20	16
2015	11	12	17	13	15	19	22	27
2016	11	7	14	7	6	-	9	23
2017^	14	13	11	14	14	16	10	24
2018	9	16	12	12	-	7	-	18
2019	11	14	10	7	8	16	10	22
2020	-	-	4	23	11	12	-	15
2021	**-**	**9**	**5**	**21**	**10**	**13**	**-**	**11**

Note. Data collected from 2006 onwards. # Includes 'tablet' and 'film' forms from 2012-2016. ^ Includes only 'film' form from 2017 onwards. - Values suppressed due to small cell size (n≤5 but not 0). *p<0.050; **p<0.010; ***p<0.001 for 2020 versus 2021.

Morphine

Any Recent Use (past 6 months): After remaining relatively stable from 2001-2007, the per cent reporting recent morphine use has been declining from 2008 onwards (Figure 29). In 2021, 19% of the national sample had recently used any morphine (19% in 2020), the lowest percentage reporting recent use since the commencement of monitoring. Nationally, this per cent mostly comprised non-prescribed use (16% in 2021; 15% in 2020; *p*=0.600), with non-prescribed use lowest in the VIC sample (6%) and highest in the TAS sample (40%) (Table 12). Four per cent of the national sample in 2021 reported recent prescribed use (4% in 2020; *p*=0.612).

Frequency of Use: Frequency of non-prescribed morphine use has fluctuated over time, though remained stable in 2021 at a median of 10 days (IQR=3-54; 12 days in 2020; IQR=3-90; *p*=0.676) (Figure 29).

Recent Injection: Of those who had recently used morphine (n=167), the majority (84%) reported injecting it, stable relative to 2020 (85%; *p*=0.915). Those who reported injecting morphine did so on a median of 11 days (IQR=3-90) in the six months preceding interview, stable from 2020 (12 days; IQR=3-90; *p*=0.926).

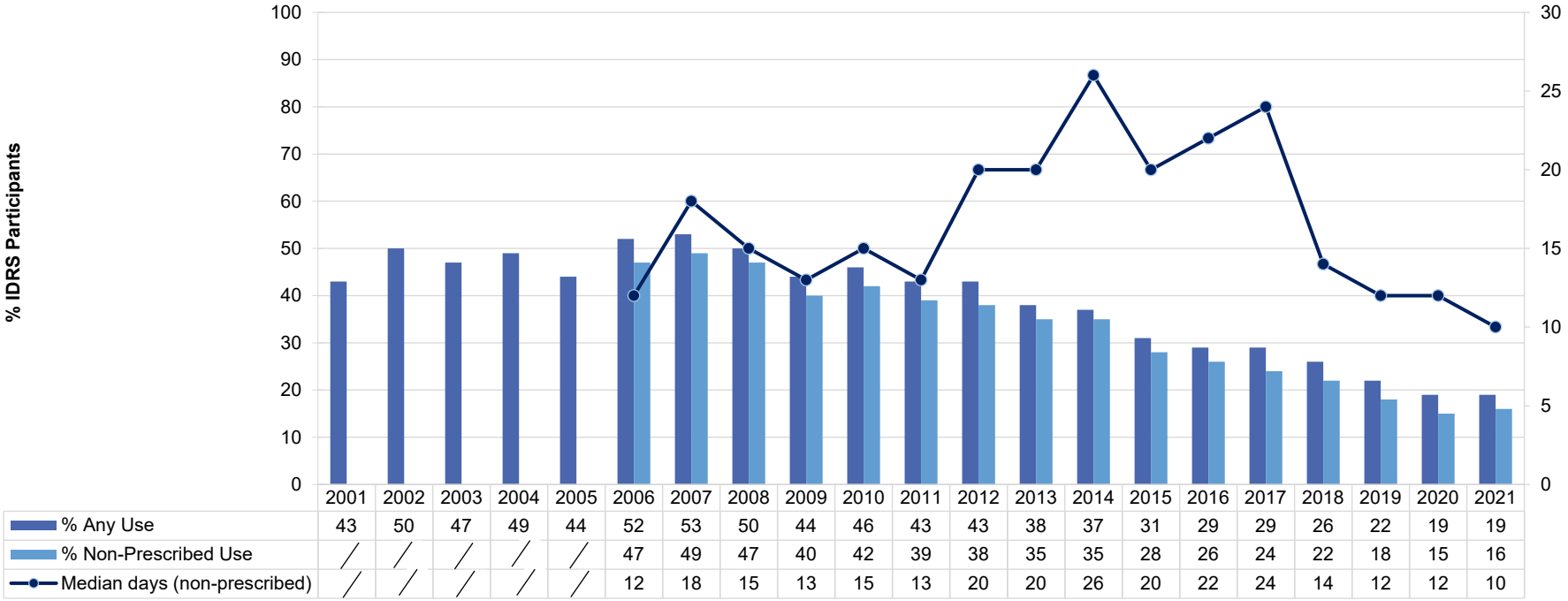
Oxycodone

Any Recent Use (past 6 months): After a gradual increase from 2005 to 2012, the per cent reporting recent oxycodone use has been declining (Figure 30). In 2021, 14% of the national sample had recently used any oxycodone, stable relative to 2020 (14%; *p*=0.972). Five per cent of the sample reported prescribed use (4% in 2020; *p*=0.074), and nearly one-tenth (9%) reported non-prescribed use (11% in 2020; *p*=0.420). The per cent reporting non-prescribed oxycodone use has declined across all jurisdictions from 2012 onwards (Table 13).

Frequency of Use: In 2021, participants reported using non-prescribed oxycodone on a median of four days (IQR=2-12; 4 days in 2020; IQR=2-12, *p*=0.878).

Recent Injection: Of those who had recently used oxycodone (n=120), over two-fifths (43%) of participants reported injecting it, a significant reduction relative to 2020 (63%; *p*=0.002). The median days injected in the past six months remained stable (5 days; IQR=2-14; 5 days in 2020; IQR=2-24; *p*=0.537).

Figure 29: Past six month use (prescribed and non-prescribed) and frequency of use of non-prescribed morphine, nationally, 2001-2021



	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
% Any Use	43	50	47	49	44	52	53	50	44	46	43	43	38	37	31	29	29	26	22	19	19
% Non-Prescribed Use	/	/	/	/	/	47	49	47	40	42	39	38	35	35	28	26	24	22	18	15	16
Median days (non-prescribed)	/	/	/	/	/	12	18	15	13	15	13	20	20	26	20	22	24	14	12	12	10

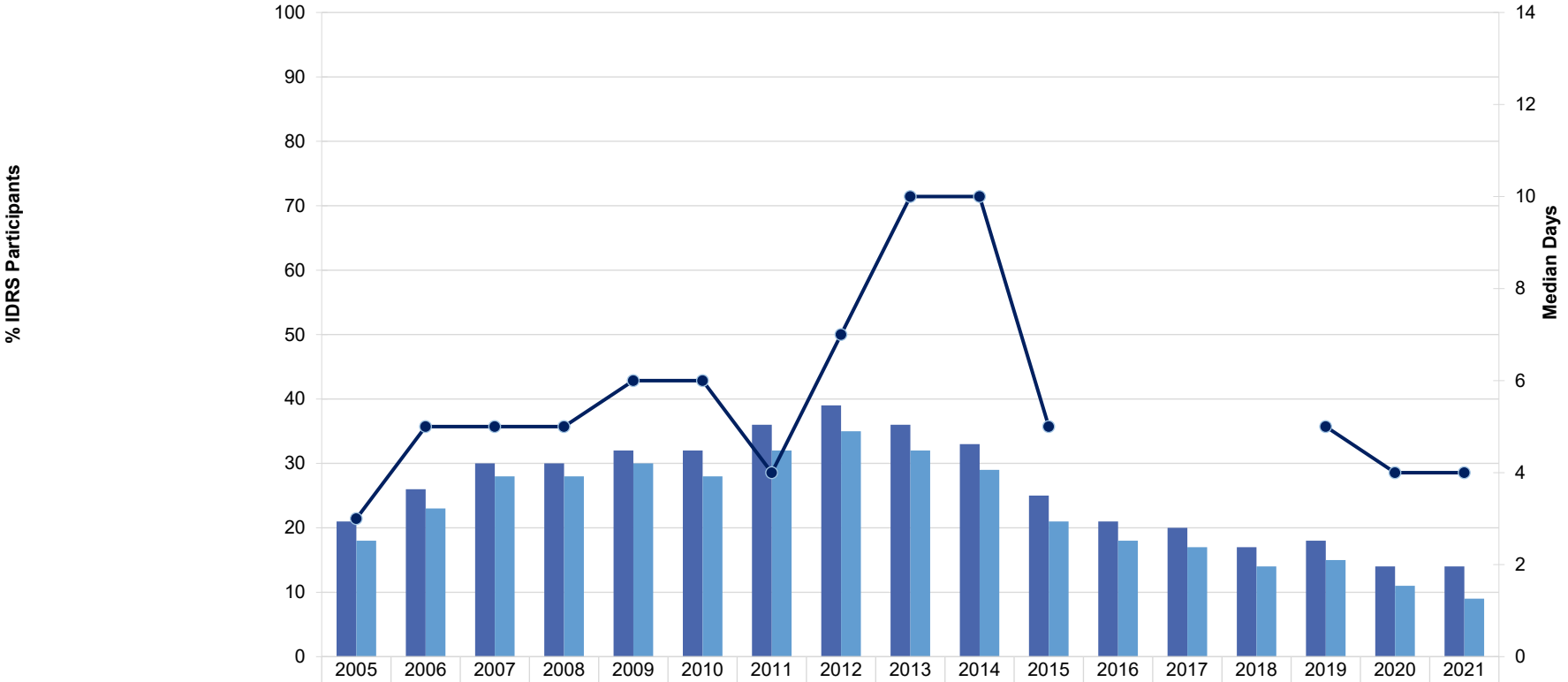
Note. Non-prescribed use not distinguished in 2001-2005 (/ Not asked). Median days computed among those who reported recent use (maximum 180 days). Median days rounded to the nearest whole number. Y axis reduced to 30 days to improve visibility of trends. *p<0.050; **p<0.010; ***p<0.001 for 2020 versus 2021.

Table 12: Past six month non-prescribed use of morphine, by jurisdiction, 2006-2021

%	NSW	ACT	VIC	TAS	SA	WA	NT	QLD
2006	31	52	31	58	48	52	70	51
2007	34	53	37	67	41	45	73	57
2008	31	35	40	81	30	31	85	51
2009	28	38	31	81	22	33	61	38
2010	31	36	30	73	24	28	89	38
2011	21	30	33	73	20	33	72	39
2012	21	30	27	64	23	43	69	34
2013	19	23	20	65	22	37	74	38
2014	25	12	24	71	20	27	80	32
2015	19	20	13	47	20	19	69	29
2016	16	12	10	51	18	16	71	33
2017	16	21	7	42	12	18	60	26
2018	17	10	10	47	7	14	54	29
2019	13	11	9	26	10	15	40	28
2020	7	8	8	38	11	18	32	21
2021	**9**	**9**	**6**	**40**	**8**	**16**	**36**	**18**

Note. From 2001-2005, the IDRS did not distinguish between prescribed and non-prescribed morphine. *p<0.050; **p<0.010; ***p<0.001 for 2020 versus 2021.

Figure 30: Past six month use (prescribed and non-prescribed) and frequency of use of non-prescribed oxycodone, nationally, 2005-2021



	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
% Any Use	21	26	30	30	32	32	36	39	36	33	25	21	20	17	18	14	14
% Non-Prescribed Use	18	23	28	28	30	28	32	35	32	29	21	18	17	14	15	11	9
Median days (non-prescribed)	3	5	5	5	6	6	4	7	10	10	5	⁄	⁄	⁄	5	4	4

Note. From 2005-2015, participants were asked about recent use and frequency of use for any oxycodone; from 2016-2018, recent use and frequency of use for oxycodone was broken down into three types: tamper resistant ('OP'), non-tamper proof (generic) and 'other oxycodone' (/ median days non-prescribed use missing from 2016-2018). From 2019, recent use for oxycodone was broken down into four types: tamper resistant ('OP'), non-tamper proof (generic), 'other oxycodone' and oxycodone-naloxone, while frequency of use was asked for any oxycodone. Median days of non-prescribed use computed among those who reported recent use (maximum 180 days). Median days rounded to the nearest whole number. Y axis reduced to 14 days to improve visibility of trends. *p<0.050; **p<0.010; ***p<0.001 for 2020 versus 2021.

Table 13: Past six month non-prescribed use of oxycodone, by jurisdiction, 2005-2021

%	NSW	ACT	VIC	TAS	SA	WA	NT	QLD
2005	14	14	16	30	11	39	11	16
2006	18	22	24	29	20	42	7	21
2007	26	23	28	36	20	44	11	39
2008	27	27	25	53	15	23	28	26
2009	27	27	25	56	9	29	35	34
2010	33	13	28	60	17	20	22	26
2011	34	23	37	45	23	30	26	34
2012	46	34	26	56	26	48	19	29
2013	40	17	23	61	18	33	23	37
2014	40	16	22	47	21	27	22	38
2015	21	15	19	27	25	18	23	24
2016	23	12	10	28	16	17	18	22
2017	27	9	8	29	13	14	14	18
2018	16	10	10	28	-	15	11	18
2019	21	14	5	22	13	11	12	20
2020	9	8	7	24	11	8	9	15
2021	**9**	**-**	**7**	**17**	**9**	**15**	**-**	**10**

Note. Data on oxycodone use not collected from 2000-2005. - Values suppressed due to small cell size (n≤5 but not 0). *p<0.050; **p<0.010; ***p<0.001 for 2020 versus 2021.

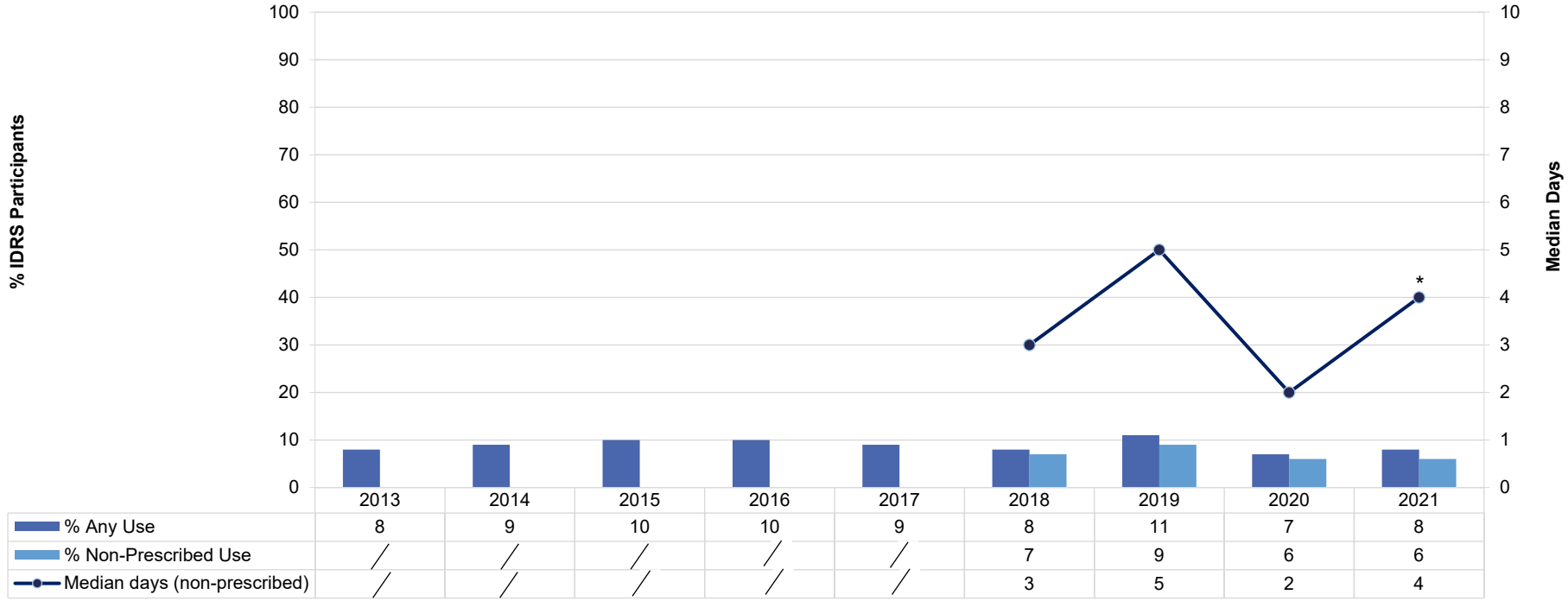
Fentanyl

Any Recent Use (past 6 months): The per cent reporting recent use of fentanyl has remained low since monitoring began (Figure 31), with 8% reporting recent use in 2021 (7% in 2020; *p*=0.698) (Figure 31). Six per cent reported non-prescribed use (6% in 2020; *p*=0.724) and 2% reported prescribed use (1% in 2020; *p*=0.127). Non-prescribed use was highest in the TAS and the ACT samples (12% and 10%, respectively) (Table 14).

Frequency of Use: In 2021, participants reported non-prescribed use on a median of four days (IQR=2-11) in the past six months, a significant increase relative to 2020 (2 median days; IQR=1-7; *p*=0.046).

Recent Injection: Of those who had recently used fentanyl (n=69), the majority (83%) reported injecting it (91% in 2020; *p*=0.273) and had done so on a median of three days (IQR=1-7) in the past six months (2 days in 2020; IQR=1-6; *p*=0.461).

Figure 31: Past six month use (prescribed and non-prescribed) and frequency of use of non-prescribed fentanyl, nationally, 2013-2021



	2013	2014	2015	2016	2017	2018	2019	2020	2021
% Any Use	8	9	10	10	9	8	11	7	8
% Non-Prescribed Use	/	/	/	/	/	7	9	6	6
Median days (non-prescribed)	/	/	/	/	/	3	5	2	4

Note. Data on fentanyl use not collected from 2000-2012; from 2013-2017, the IDRS did not distinguish between prescribed and non-prescribed use (/ Not asked). Median days computed among those who reported recent use (maximum 180 days). Median days rounded to the nearest whole number. Y axis reduced to 10 days to improve visibility of trends. *p<0.050; **p<0.010; ***p<0.001 for 2020 versus 2021.

Table 14: Past six month non-prescribed use of fentanyl, by jurisdiction, 2018-2021

%	NSW	ACT	VIC	TAS	SA	WA	NT	QLD
2018	6	6	8	0	-	8	-	16
2019	11	10	7	-	-	9	13	13
2020	8	9	-	-	10	11	-	-
2021	**7**	**10**	**-**	**12**	**6**	**6**	**-**	**-**

Note. Data on fentanyl use not collected from 2000-2012; from 2013-2017, the IDRS did not distinguish between prescribed and non-prescribed use. - Values suppressed due to small cell size (n≤5 but not 0). *p<0.050; **p<0.010; ***p<0.001 for 2020 versus 2021.

Other Opioids

Participants were asked about prescribed and non-prescribed use of other opioids (Table 15). In 2021, one-tenth (10%) of participants reported any recent use of codeine, with 6% reporting prescribed use (7% in 2020; p=0.357), and 5% reporting non-prescribed use (4% in 2020; p=0.438). Of those who reported recent use and commented (n=89), 2% reported recent injection, stable from 7% in 2020 (p=0.300).

In 2021, 8% reported any recent use of tramadol (7% in 2020; p=0.305), with 4% reporting prescribed use (4% in 2020; p=0.829) and 5% reporting non-prescribed use (4% in 2020; p=0.357). Of those reporting recent use (n=74), over one-tenth (11%) reported recent injection (8% in 2020; p=0.826).

Two per cent of the sample reported recent use of tapentadol in 2021 (1% in 2020; p=0.567), with 1% reporting prescribed use (1% in 2020; p=0.461). Small numbers (n≤5) reported recent non-prescribed use in 2021 (n≤5 in 2020) and no one reported recent injection (n≤5 in 2020; p=0.126)

Very few participants (n≤5) reported any recent use of other opioids (Table 15).

Table 15: Past six month use of other opioids, nationally, 2019-2021

%	2019 (N=899)	2020 (N=880)	2021 (N=887)
Codeine^			
Prescribed use	14	7	6
Non-prescribed use	9	4	5
Any injection#	5	7	2
Tramadol			
Prescribed use	10	4	4
Non-prescribed use	7	4	5
Any injection#	9	8	11
Tapentadol			
Prescribed use	-	1	1
Non-prescribed use	1	-	-
Any injection#	-	-	0

Note. - Values suppressed due to small cell size (n≤5 but not 0). ^Includes high and low dose. #Of those who reported past six month use. *p<0.050; **p<0.010; ***p<0.001 for 2020 versus 2021.

9

Other Drugs

Participants were asked about their recent (past six month) use of various other drugs, including use of new psychoactive substances, non-prescribed use (i.e., use of a medicine obtained from a prescription in someone else's name) of other pharmaceutical drugs, and use of licit substances (e.g., alcohol, tobacco).

New Psychoactive Substances (NPS)

NPS are often defined as substances which do not fall under international drug control, but which may pose a public health threat. However, there is no universally accepted definition, and in practicality the term has come to include drugs which have previously not been well-established in recreational drug markets.

Recent Use (past 6 months): In 2021, 6% reported any recent NPS use, the lowest per cent observed since monitoring began (8% in 2020; *p*=0.379) (Table 16). 'New' drugs that mimic the effects of cannabis were the most commonly used NPS (4%), although use was infrequent (median 2 days; IQR=1-120). A small per cent (1%) reported use of new drugs that mimic the effects of opioids.

Table 16: Past six month use of new psychoactive substances, nationally, 2013-2021

%	2013	2014	2015	2016	2017	2018	2019	2020	2021
	N=887	N=898	N=888	N=877	N=888	N=905	N=902	N=884	N=887
'New' drugs that mimic the effects of opioids	/	/	/	/	-	-	2	1	**1**
'New' drugs that mimic the effects of ecstasy	/	/	/	/	1[#]	1	2	-	**1**
'New' drugs that mimic the effects of amphetamine or cocaine	4	4	3	4	/	2	1	2	**1**
'New' drugs that mimic the effects of cannabis	9	8	8	8	5	5	6	5	**4**
'New' drugs that mimic the effects of psychedelic drugs	/	/	/	/	1[#]	2	1	1	**-**
'New' drugs that mimic the effects of benzodiazepines	/	/	/	/	/	-	1	-	**1**
Any of the above	12	11	10	11	8	11	11	8	**6**

Note. - Values suppressed due to small cell size (n≤5 but not 0). / denotes that this item was not asked in these years. [#]In 2017, participants were asked about use of 'new drugs that mimic the effects of ecstasy or psychedelic drugs'. **p*<0.050; ***p*<0.010; ****p*<0.001 for 2020 versus 2021.

Non-Prescribed Pharmaceutical Drugs

Benzodiazepines

Recent Use (past 6 months): The per cent reporting non-prescribed benzodiazepine use has been gradually decreasing, from 46% in 2007 when monitoring commenced to 29% in 2021, the lowest per cent recorded since monitoring began (31% in 2020; *p*=0.282) (Figure 32). Of the total sample, 16% reported use of non-prescribed alprazolam (15% in 2020; *p*=0.841) and 22% reported use of non-prescribed other benzodiazepines (24% in 2020; *p*=0.520).

Frequency of Use: In 2021, people who had used non-prescribed benzodiazepines reported a median of six days (IQR=2-24; 3 days in 2020; IQR=2-10; *p*=0.004) and 12 days (IQR=3-48; 10 days in 2020; IQR=3-24; *p*=0.520) of non-prescribed use of alprazolam and other benzodiazepines, respectively.

Recent Injection: In 2021, 7% of participants who had recently used non-prescribed benzodiazepines reported injecting as a route of administration (6% in 2020; *p*=0.830). Additionally, 4% of participants who had recently used any benzodiazepines (including alprazolam, prescribed or non-prescribed) reported injecting as a route of administration (4% in 2020; *p*=0.987).

Pharmaceutical Stimulants

Recent Use (past 6 months): Non-prescribed use of pharmaceutical stimulants (e.g., dexamphetamine, methylphenidate, modafinil) has decreased since monitoring began (Figure 32). One-fifth (18%) reported recent use in 2006, declining to 6% in 2021 (8% in 2020; *p*=0.191).

Frequency of Use: Frequency of non-prescribed use remained stable at three days in 2021 (IQR=2-8; 3 days in 2020; IQR=1-12; *p*=0.483).

Recent Injection: Over one-third (35%) of those who had recently used non-prescribed pharmaceutical stimulants reported that they had injected it (42% in 2020; *p*=0.562) on a median of four days (IQR=3-7; 2 days in 2020; IQR=2-10; *p*=0.320).

Antipsychotics

Recent Use (past 6 months): The per cent of the sample reporting recent use of non-prescribed antipsychotics (asked as 'Seroquel' from 2011-2018) has gradually decreased over time, with 5% reporting use in 2021, the lowest per cent since monitoring began (6% in 2020; *p*=0.318) (Figure 32).

Frequency of Use: There was an increase in frequency of use in 2021 (median 7 days; IQR=4-30) compared to 2020 (median 4 days; IQR=2-10; *p*=0.039).

Recent Injection: No one reported recent injection of antipsychotics in 2021 (not asked in 2020).

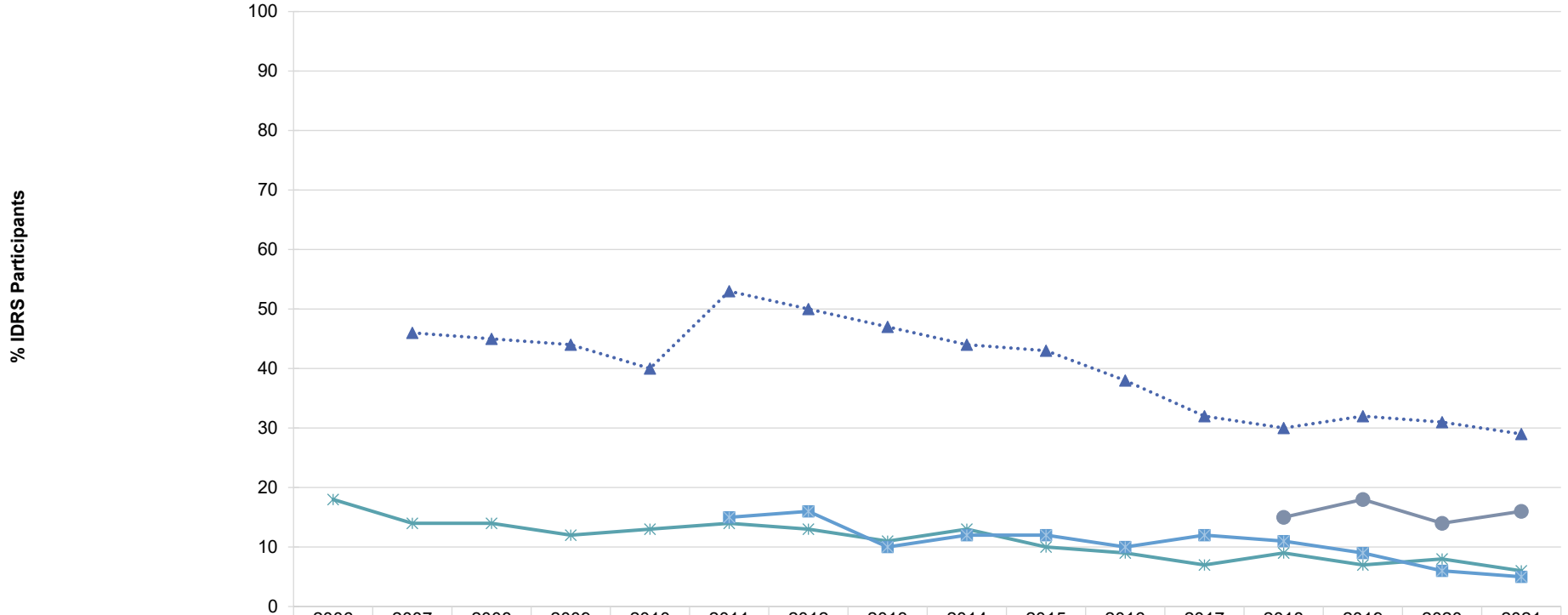
Pregabalin

Recent Use (past 6 months): In 2021, 16% of the national sample reported non-prescribed pregabalin use in the six months preceding interview (14% in 2020; *p*=0.245) (Figure 32), with the highest per cent of use observed in the TAS and QLD samples (23% and 22%, respectively).

Frequency of Use: Non-prescribed use was infrequent, with a reported median of six days of use in 2021 (IQR=2-24), consistent with 2020 reports (median 6 days; IQR=2-24; *p*=0.859).

Recent Injection: Of those who had recently used non-prescribed pregabalin, 6% reported recent injection (11% in 2020; *p*=0.208) on a median of 5 days (IQR=2-11; not asked in 2020).

Figure 32: Past six month use of non-prescribed pharmaceutical drugs, nationally, 2006-2021



	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
Benzodiazepines	/	46	45	44	40	53	50	47	44	43	38	32	30	32	31	29
Pharmaceutical stimulants	18	14	14	12	13	14	13	11	13	10	9	7	9	7	8	6
Antipsychotics	/	/	/	/	/	15	16	10	12	12	10	12	11	9	6	5
Pregabalin	/	/	/	/	/	/	/	/	/	/	/	/	15	18	14	16

Note. Non-prescribed use is reported. Participants were first asked about antipsychotics in 2011 (asked as 'Seroquel' 2011-2018) and pregabalin in 2018. Pharmaceutical stimulants were separated into prescribed and non-prescribed from 2006 onwards, and benzodiazepines were separated into prescribed and non-prescribed in 2007. / Not asked. *p<0.050; **p<0.010; ***p<0.001 for 2020 versus 2021.

Licit and Other Drugs

Steroids

Recent Use (past 6 months): Reports of recent use of non-prescribed steroids have remained consistently low (between <1% and 3%) since monitoring began in 2010. Few participants (n≤5) reported recent use in 2021.

Alcohol

Recent Use (past 6 months): Fifty-two per cent of the sample reported recent use of alcohol in 2021 (54% in 2020; *p*=0.338) (Figure 33).

Frequency of Use: Median frequency of use amongst those who reported alcohol use in 2021 was 36 days (IQR=6-150; 24 days in 2020; IQR=6-96; *p*=0.153), with 22% reporting daily use (19% in 2020; *p*=0.272).

Tobacco

Recent Use (past 6 months): Tobacco use has remained relatively high since the IDRS began. In 2021, the majority of the national sample reported recent use (90%; 89% in 2020; *p*=0.374) (Figure 33).

Frequency of Use: Frequency of use remained high among those reporting recent use at a median of 180 days (IQR=180-180 days; 180 days in 2020; IQR=180-180; *p*=0.836), with 91% reporting daily use in 2021 (91% in 2020).

E-cigarettes

Recent Use (past 6 months): There was a significant increase in recent e-cigarette use in 2021 (18%; 13% in 2020; *p*=0.002), returning to the percentages observed in 2018 and 2019 (Figure 33).

Frequency of Use: Frequency of use remained stable in 2021 at a median of 19 days (IQR=5-120; 20 days in 2020; IQR=3-160; *p*=0.624), with 23% of recent consumers reporting daily use (24% in 2020; *p*=0.985).

Forms Used: Among those who reported recent use and commented (n=150), the majority (88%) reported using e-cigarettes containing nicotine (74% in 2020; *p*=0.003), followed by 9% who reported using e-cigarettes containing cannabis (n≤5 in 2020; *p*=0.097) and 9% who reported using e-cigarettes containing both nicotine and cannabis (5% in 2020; *p*=0.042). Twelve per cent reported using e-cigarettes that contained neither cannabis nor nicotine (17% in 2020; *p*=0.065).

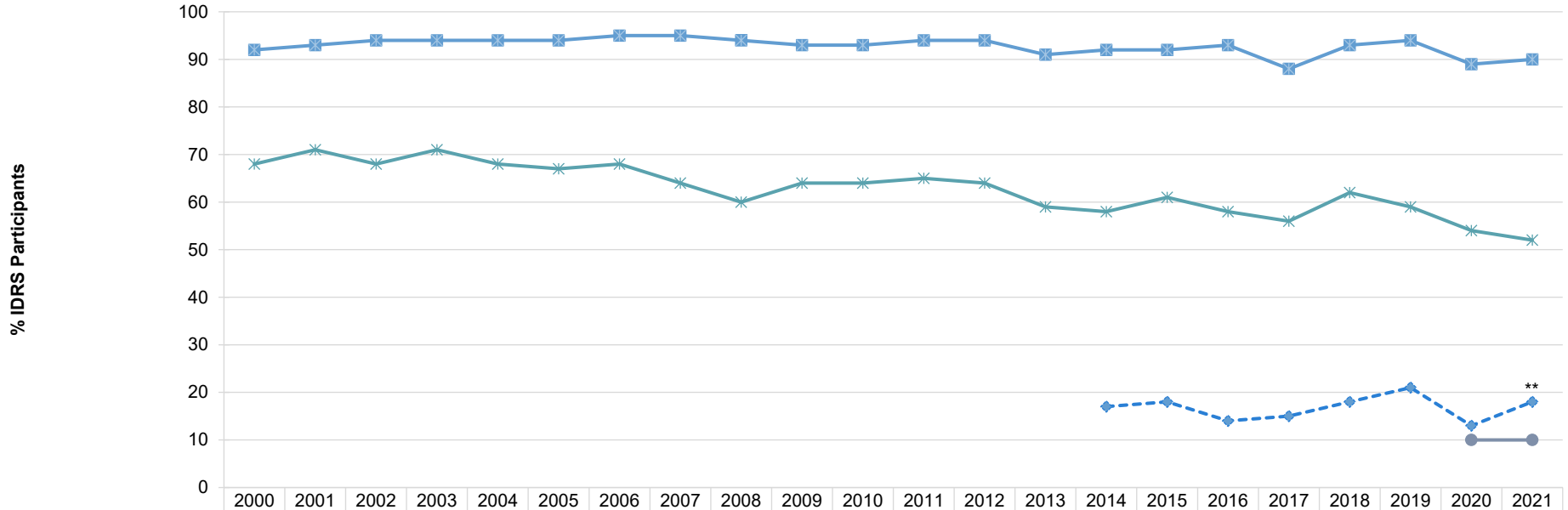
Reason for Use: Nearly two-fifths (38%) of those who had recently used e-cigarettes in 2021 reported that they did not use e-cigarettes as a smoking cessation tool, a significant decrease from 2020 (57%; *p*=0.002).

GHB/GBL/1, 4-BD

Recent Use (past 6 months): In 2021, 10% of the sample reported recent use of GHB/GBL/1,4-BD (10% in 2020; *p*=0.964) (Figure 33).

Recent Injection: Of those that reported recent use, 6% reported injection as a route of administration (n≤5 in 2020).

Figure 33: Past six month use of licit and other drugs, nationally, 2000-2021



	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
Alcohol	68	71	68	71	68	67	68	64	60	64	64	65	64	59	58	61	58	56	62	59	54	52
Tobacco	92	93	94	94	94	94	95	95	94	93	93	94	94	91	92	92	93	88	93	94	89	90
E-cigarettes	/	/	/	/	/	/	/	/	/	/	/	/	/	/	17	18	14	15	18	21	13	18
GHB/GBL/1,4-BD	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	10	10

Note. Participants were first asked about e-cigarettes in 2014. Participants were first asked about GHB/GBL/1,4-BD in 2020. / Not asked. *p<0.050; **p<0.010; ***p<0.001 for 2020 versus 2021.

10

Drug-Related Harms and Other Associated Behaviours

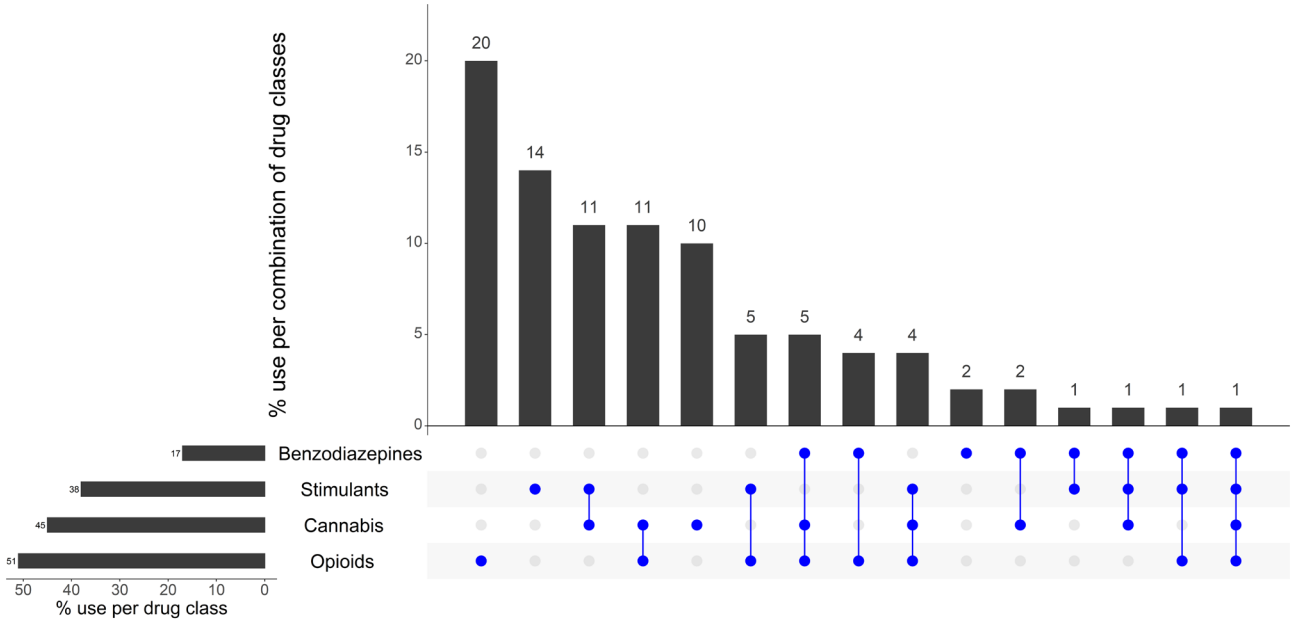
Participants were asked about various drug-related harms and associated behaviours, including non-fatal overdose, injecting risk, drug treatment, mental health and crime. It should be noted that the following data refer to participants' understandings of these behaviours (e.g., may not represent medical diagnoses in the case of reporting on health conditions).

Polysubstance Use

In 2021, the majority (98%) of the sample reported using one or more drugs (including alcohol, tobacco and prescription medications) on the day preceding interview. Of those who reported using one or more drugs (n=865), the most commonly used substances were tobacco (73%), opioids (51%), cannabis (45%), stimulants (38%), and benzodiazepines (17%).

Approximately one-in-ten participants reported concurrent use of cannabis and stimulants (11%) and cannabis and opioids (11%) on the day preceding interview (Figure 34). Twenty per cent of respondents reported using opioids alone, whilst 14% reported using stimulants alone.

Figure 34: Use of opioids, stimulants, benzodiazepines and cannabis on the day preceding interview and most common drug pattern profiles, nationally, 2021



Note. % calculated out of total IDRS 2021 sample. The horizontal bars represent the per cent of participants who reported use of each drug class on the day preceding interview; the vertical columns represent the per cent of participants who used the combination of drug classes represented by the blue circles. Participants who did not report use of any of the four drug classes depicted are not shown in the figure but are counted in the denominator. 'Stimulants' includes methamphetamine, cocaine, MDA, MDMA, OTC stimulants and/or pharmaceutical stimulants. 'Opioids' includes heroin, methadone, morphine, oxycodone, buprenorphine, buprenorphine-suboxone, fentanyl, other pharmaceutical opioids (codeine, tapentadol, tramadol, etc). Use of benzodiazepines, opioids and stimulants could be prescribed or non-prescribed use. Y axis reduced to 23% to improve visibility of trends.

Overdose Events

Non-Fatal Overdose

There has been some variation in the way questions about overdose have been asked over the years.

In 2021, participants were asked about their past 12-month experience of overdose where symptoms aligned with the examples provided and effects were outside their normal experience, or they felt professional assistance may have been helpful. We specifically asked about:

- **Opioid overdose** (e.g., reduced level of consciousness, respiratory depression, turning blue, collapsing and being unable to be roused). Participants who reported this experience were asked to identify all opioids involved in such events in the past 12 months;

- **Non-opioid overdose** (e.g., nausea, vomiting, chest pain, tremors, increased body temperature, increased heart rate, seizure, extreme paranoia, extreme anxiety, panic, extreme agitation, hallucinations). Drugs other than opioids were split into the following:
  - **Stimulant overdose:** Stimulant drugs include ecstasy, methamphetamine, cocaine, MDA, methylone, mephedrone, pharmaceutical stimulants and stimulant NPS (e.g., MDPV, Alpha PVP); and
  - **Other drug overdose: '**Other drugs' include (but are not limited to) alcohol, cannabis, GHB/GBL/1,4-BD, amyl nitrite/alkyl nitrite, benzodiazepines and LSD.

It is important to note that overdose episodes reported across the drug types may not be unique given high rates of polysubstance use amongst the sample. Each year we compute the total per cent of participants who have experienced any past 12-month overdose event by looking for any endorsement across the drug types queried (see below); however, please note that estimates may vary over time because of changes in how questions have been asked.

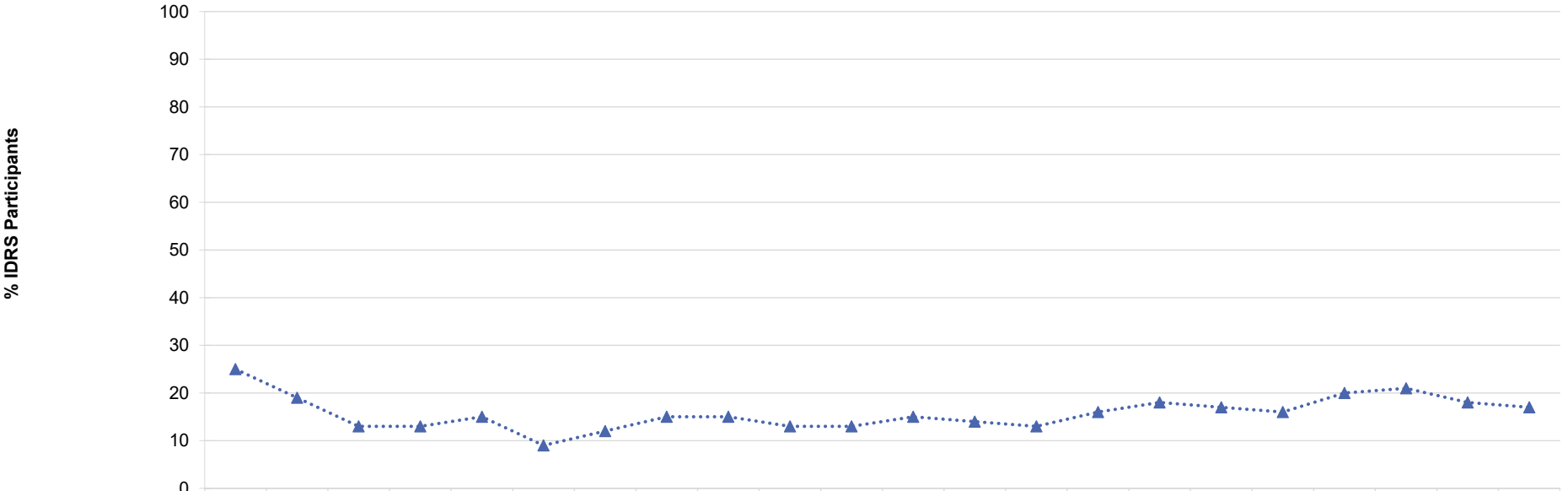
After some fluctuations from 2000-2006 (likely due to differences in the way questions regarding overdose were asked), the per cent reporting **any past 12-month non-fatal overdose** remained relatively stable from 2007-2017. After a slight increase in 2018 and 2019 (20% and 21%, respectively; p=0.691), the per cent reporting any past 12-month non-fatal overdose in 2021 remained relatively stable (17%; 18% in 2020) (Figure 35). In 2021, the per cent reporting any past 12-month non-fatal overdose was highest in the NSW and VIC samples (24%, respectively) and lowest in the NT sample (n≤5) (Table 17).

Eleven per cent reported a **non-fatal overdose following opioid use** in the past 12 months (13% in 2020; p=0.300), whilst 7% reported a **non-fatal overdose following stimulant use** in the past 12 months (6% in 2020; p=0.351) (Table 17).

The most commonly cited substance involved in past year non-fatal overdoses was heroin (9% of the total sample in 2021). Participants who had overdosed on an opioid had done so on a median of one occasion (IQR=1-2) in the last 12 months. Among those that had overdosed on an opioid in the past year and commented (n=98), 34% reported that an ambulance had attended their most recent overdose, 43% reported receiving Narcan®, 19% were admitted to an emergency department and 14% reported receiving oxygen. Twenty-four per cent reported not receiving any treatment. The most commonly cited drugs involved in participants' most recent opioid overdose were benzodiazepines (including alprazolam, 31%), alcohol (20%), cannabis (20%) and crystal methamphetamine (16%).

Please contact the Drug Trends team (drugtrends@unsw.edu.au) to request further findings regarding non-fatal overdose in the IDRS sample.

Figure 35: Past 12-month any non-fatal overdose, nationally, 2000-2021



	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
Past 12 month	25	19	13	13	15	9	12	15	15	13	13	15	14	13	16	18	17	16	20	21	18	17

Note. Estimates from 2000-2005 refer to heroin and morphine non-fatal overdose only. *p<0.050; **p<0.010; ***p<0.001 for 2020 versus 2021.

Table 17: Past 12-month non-fatal overdose by drug type, nationally and by jurisdiction, 2020-2021

	National		NSW	ACT	VIC	TAS	SA	WA	NT	QLD
	N=884	**N=888**	**N=150**	**N=100**	**N=148**	**N=95**	**N=101**	**N=99**	**N=94**	**N=101**
	2020	**2021**								
% Any opioid	N=881 13	**N=882 11**	16	7	20	-	6	10	-	14
% Heroin overdose	N=882 11	**N=880 9**	15	6	18	-	-	8	0	12
% Methadone overdose	N=881 1	**N=880 1**	-	0	-	-	0	0	0	-
% Morphine overdose	N=881 <1	**N=880 1**	-	0	-	-	0	-	0	-
% Oxycodone overdose	N=881 0	**N=880 0**	0	0	0	0	0	0	0	-
% Stimulant	N=883 3	**N=885 4**	6	-	-	-	8	-	0	-
% Other drug overdose										
% Other overdose	N=883 3	**N=885 3**	-	-	5	-	-	8	-	0
% Any drug overdose	N=880 18	**N=882 17**	24	13	24	15	14	20	-	19

Note. Participants reported on whether they had overdosed following use of the specific substances; other substances may have been involved on the occasion(s) that participants refer to. From 2015-2018, the stimulant overdose percentage represents participants who reported that they had consumed a stimulant drug prior to their most recent past 12-month 'other drug' overdose and therefore may be an underestimation. – Values suppressed due to small numbers (n≤5 but not 0). N is the number who responded (denominator). *p<0.050; **p<0.010; ***p<0.001 for 2020 versus 2021 for national estimates.

Naloxone Program and Distribution

Naloxone is a short-acting opioid antagonist that has been used for over 40 years to reverse the effects of opioids. In 2012, a take-home naloxone program commenced in the ACT (followed by NSW, VIC, and WA) through which naloxone was made available to peers and family members of people who inject drugs for the reversal of opioid overdose. In early 2016, the Australian Therapeutic Goods Administration (TGA) placed 'naloxone when used for the treatment of opioid overdose' on a dual listing of Schedule 3 and Schedule 4, meaning naloxone can be purchased OTC at pharmacies without a prescription, and at a reduced cost via prescription. In 2020 and 2021, under the take home naloxone pilot program, naloxone was made available free of charge and without a prescription in NSW, SA and WA. Furthermore, naloxone nasal spray (Nyxoid) is now available in Australia as a PBS-listing, which is expected to increase use of naloxone in the community.

Awareness of Naloxone: From 2013-2021, there has been no significant change in the per cent of the national sample who have heard of naloxone, with over four in five participants reporting awareness of naloxone in each year (81% in 2021) (Figure 36). There was large variation across the jurisdictions in the per cent of participants who had heard of naloxone. The ACT sample (96%) had the highest per cent of participants who reported having ever heard of naloxone, whilst the NT sample (45%) had the lowest per cent (Table 18).

Awareness of Take-Home Programs (training program): In 2021, over three-fifths of participants (64%) had heard about the take-home naloxone programs (65% in 2020*;* p=0.547) (Figure 36). In

2021, knowledge regarding the take-home naloxone program (and participation in this program) was highest among the ACT sample (88% and 58%, respectively), followed by the WA sample (80% and 56%, respectively) (Table 18).

Participation in Training Programs: In 2021, nearly two-fifths (37%) had been trained in how to administer naloxone in their lifetime (34% in 2020; *p*=0.320) (Figure 36). Participation in the naloxone training programs ranged from 9% in the TAS sample to 58% in the ACT sample (Table 18). Over half of those participating in the naloxone training program had completed their last naloxone training via a needle and syringe program (NSP; 52%), followed by 15% via a health service and 12% via a drug treatment service.

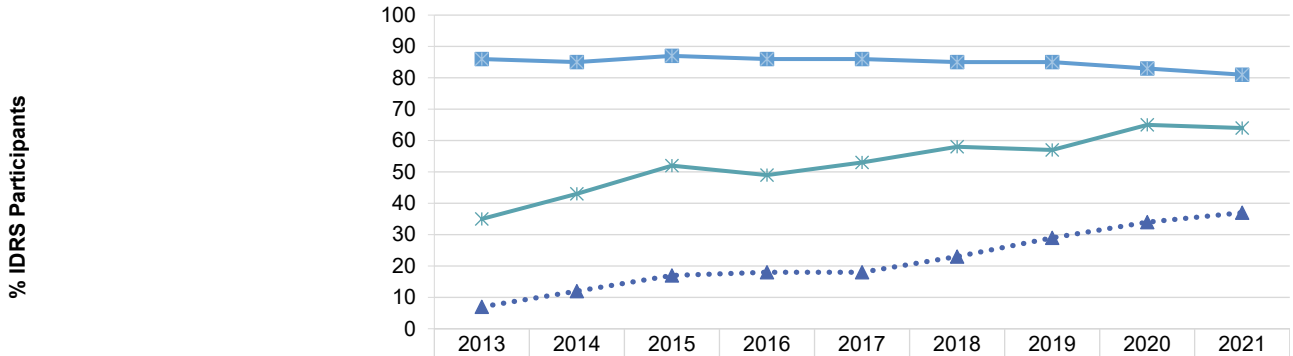
Accessed Naloxone: In 2021, 67% of those who had heard about take-home naloxone programs reported having ever accessed naloxone, with 4% of the total sample reporting that they had tried to access naloxone but been unsuccessful. Out of those that had never accessed or had trouble accessing naloxone (n=485), the reasons why they had not accessed it were 'didn't consider myself/my peers at risk of overdose' (22%), 'don't use opioids' (20%) and 'didn't know you could access naloxone' (13%).

Of those who reported to have accessed naloxone and could respond (n=361), on the last occasion nearly two-fifths (39%) received the intramuscular naloxone and nearly half (47%) received intranasal naloxone. On the last occasion over half (52%) accessed naloxone via a needle and syringe program (NSP), followed by a health service (15%) and a drug treatment service (12%). The majority (96%) did not have to pay the last time they accessed naloxone. Of those that had accessed naloxone and could respond (n=364), over half (51%) reported that they 'always' had naloxone on hand when using opioids in the past month, followed by 18% reporting 'never', 10% 'often', 8% 'sometimes' and 7% 'rarely'.

Use of Naloxone to Reverse Overdose: In 2021, of those that reported to have heard about naloxone and could respond (n=716), over one-quarter (29%) reported that they had resuscitated someone using narcan/naloxone at least once in their lifetime (23% in 2020; *p*=0.089). Of those who reported past year opioid overdose and could respond (n=96), over-one third (36%) reported that they had been resuscitated by a peer using narcan/naloxone.

In 2021, of those that responded (n=886), 4% reported that they had ever been resuscitated by a peer using narcan/naloxone (5% in 2020; *p*=0.276).

Figure 36: Take-home naloxone program and distribution, nationally, 2013-2021



	2013	2014	2015	2016	2017	2018	2019	2020	2021
Heard of naloxone	86	85	87	86	86	85	85	83	81
Heard of take-home programs	35	43	52	49	53	58	57	65	64
Trained in naloxone administration	7	12	17	18	18	23	29	34	37

Note. *p<0.050; **p<0.010; ***p<0.001 for 2020 versus 2021.

Table 18: Awareness of take-home naloxone program and distribution, by jurisdiction, 2021

	NSW N=150	ACT N=100	VIC N=148	TAS N=95	SA N=101	WA N=99	NT N=94	QLD N=101
% Heard of naloxone	93	96	90	84	58	90	45	81
% Heard of the take-home naloxone program	74	88	77	53	32	80	34	60
% Trained in naloxone administration	44	58	53	9	17	56	13	30

Note. N is the number who responded (denominator).

Injecting Risk Behaviours and Harms

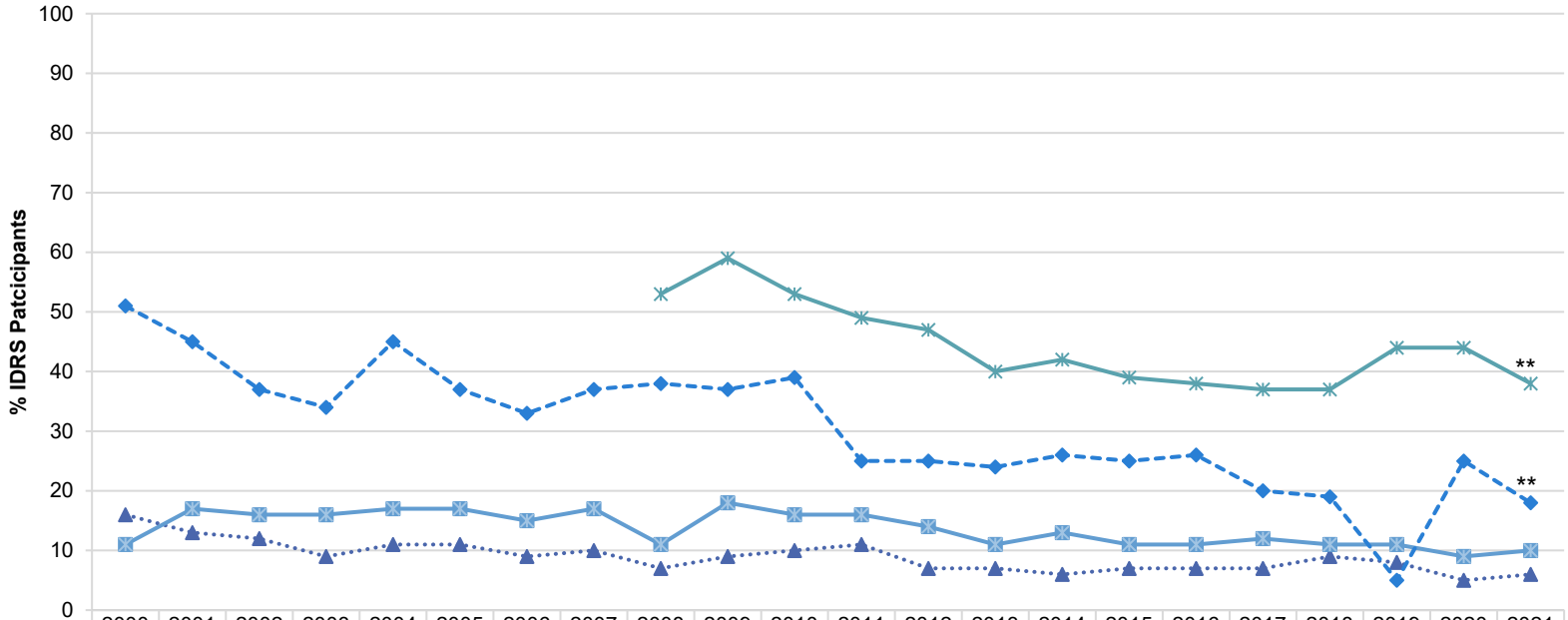
Injecting Risk Behaviours

In 2021, 6% nationally reported receptive sharing (5% in 2020; p=0.753) and 10% reporting distributive sharing (9% in 2020; p=0.698) in the past month. The per cent who had shared other injecting equipment (e.g., spoons, tourniquet, water, and filters) in the month preceding interview more than halved between 2000 (51%) and 2011 (25%) and remained relatively stable from 2011-2020 (notwithstanding a sharp decline in 2019). In 2021, the per cent reporting that they had shared other injecting equipment in the past month (18%) declined relative to 2020 (25%; p=0.001) (Figure 37). The per cent of the sample who reported re-using their own needles in the past month also declined from 2008 to 2018, however increased and then stabilised in 2019-2020, before declining again in 2021 (38%; 44% in 2020; p=0.006) (Figure 37).

Over one-third (34%) of the 2021 sample reported that they had injected someone else after injecting themselves in the past month (32% in 2020; p=0.369) and 18% had been injected by someone else (17% in 2020; p=0.868).

Consistent with previous years, most participants (83%) in the national sample reported that they had last injected in a private home (83% in 2020; p=0.489) (Table 19). Twelve per cent of VIC participants reported last injecting at the Medically Supervised Injecting Room, whereas few participants (n≤5) reported last injecting at the Sydney Medically Supervised Injecting Centre.

Figure 37: Borrowing and lending of needles and sharing of injecting equipment in the past month, nationally, 2000-2021



	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
Borrowed needles	16	13	12	9	11	11	9	10	7	9	10	11	7	7	6	7	7	7	9	8	5	6
Lent needles	11	17	16	16	17	17	15	17	11	18	16	16	14	11	13	11	11	12	11	11	9	10
Shared other equipment	51	45	37	34	45	37	33	37	38	37	39	25	25	24	26	25	26	20	19	5	25	18
Re-used needle	/	/	/	/	/	/	/	/	53	59	53	49	47	40	42	39	38	37	37	44	44	38

Note. Data collection for 'reused own needle' started in 2008 (/ Not asked). Borrowed (receptive): used a needle after someone else. Lent (distributive): somebody else used a needle after them. *p<0.050; **p<0.010; ***p<0.001 for 2020 versus 2021.

Table 19: Sharing needles and injecting equipment in the past month, nationally and by jurisdiction, 2020-2021

	National		NSW	ACT	VIC	TAS	SA	WA	NT	QLD
	N=884	**N=888**	**N=150**	**N=100**	**N=148**	**N=95**	**N=101**	**N=99**	**N=94**	**N=101**
	2020	**2021**								
% Injecting behaviours past month										
Borrowed a needle	N=8805	**N=8806**	N=1487	N=100-	N=1474	N=93-	N=100-	N=9910	N=94-	N=9910
Lent a needle	N=8759	**N=87710**	N=1489	N=10011	N=1458	N=927	N=1007	N=9913	N=94-	N=9922
Shared any injecting equipment ^	N=87725	**N=88118****	N=14921	N=9920	N=14724	N=938	N=10117	N=9913	N=94-	N=9928
Reused own needle	N=87844	**N=88038****	N=14939	N=10046	N=14735	N=9238	N=10139	N=9951	N=9414	N=9838
Injected partner/friend after self˜	N=87832	**N=88234**	N=15026	N=10027	N=14745	N=9339	N=10135	N=9936	N=9414	N=9848
Somebody else injected them after injecting themselves˜	N=87817	**N=88018**	N=14917	N=10017	N=14719	N=9319	N=10020	N=9917	N=947	N=9822
% Location of last injection	N=878	**N=884**	N=149	N=100	N=148	N=94	N=101	N=99	N=94	N=99
Private home	83	**83**	87	89	66	93	91	70	91	87
Car	5	**4**	5	-	-	-	0	10	-	-
Street/car park/beach	5	**4**	5	-	11	-	-	-	-	-
Public toilet	4	**4**	-	-	4	-	7	14	0	-
Medically supervised injecting Centre/Room	3	**3**	-	/	12	/	/	/	/	/
Other	1	**2**	-	-	-	0	0	-	-	-

Note. ^ Includes spoons, water, tourniquets and filters; excludes needles/syringes. ˜ With a new or used needle. Borrowed (receptive): used a needle after someone else. Lent (distributive): somebody else used a needle after them. - Values suppressed due to small cell size (n≤5 but not 0). N is the number who responded (denominator). / Not asked. *p<0.050; **p<0.010; ***p<0.001 for 2020 versus 2021 for national estimates.

Self-Reported Injection-Related Health Problems

In 2021, over one-quarter (26%) of the national sample reported having an injection-related health issue in the month preceding interview, stable from 2020 (29%; p=0.155) (Table 20). The most common injection-related health issue reported by participants was nerve damage (11%; 12% in 2020; p=0.380), followed by any infection/abscess (8%; 8% in 2020) and a dirty hit (7%; 8% in 2020; p=0.510).

Table 20: Injection-related issues in the past month, nationally and by jurisdiction, 2020-2021

	National		NSW	ACT	VIC	TAS	SA	WA	NT	QLD
	N=879	N=885	N=149	N=99	N=148	N=95	N=101	N=98	N=94	N=101
	2020	2021								
% Artery Injection	7	**6**	9	8	-	8	6	-	-	10
% Nerve damage	12	**11**	13	-	7	7	13	13	0	27
% Any thrombosis	7	**6**	7	-	9	6	6	-	0	8
Blood clot	6	**5**	7	-	7	-	6	-	0	7
Deep vein thrombosis	2	**1**	-	-	-	-	0	0	0	-
% Any infection/ abscess	8	**8**	9	-	7	8	12	14	-	9
Skin abscess	7	**7**	8	-	7	7	10	10	-	-
Other serious infection (e.g. sepsis, osteomyelitis)	2	**1**	0	0	-	-	-	-	0	-
Endocarditis	-	**1**	-	0	-	-	-	0	0	-
% Dirty hit	8	**7**	11	-	5	-	11	10	-	13
% Any injection related problem	29	**26**	32	18	24	23	29	33	-	42

Note. In 2020, 'sepsis' and osteomyelitis were combined. - Values suppressed due to small cell size (n≤5 but not 0). *p<0.050; **p<0.010; ***p<0.001 for 2020 versus 2021 for national estimates.

Drug Treatment

In 2021, nearly two-fifths (37%) reported that they were currently in any drug treatment for their substance use (most commonly methadone), which was a significant decrease relative to 2020 (48%; p<0.001) (Table 21).

In 2021, of those not currently in treatment (n=557), 13% reported having difficulties accessing treatment in the past six months. Among the participants that experienced difficulties accessing treatment (n=66), methamphetamine (60%) and heroin (27%) were the main substances for which participants intended to seek treatment. Residential rehabilitation/therapeutic community (41%), counsellor (25%), detoxification (19%), GP (14%) and opioid substitution program (10%) were the main services that people had tried to access.

Table 21: Current drug treatment, nationally and by jurisdiction, 2020-2021

	National		NSW	ACT	VIC	TAS	SA	WA	NT	QLD
	N=884	N=886	N=149	N=100	N=148	N=95	N=101	N=99	N=94	N=101
	2020	2021								
% Current drug treatment	48	**37*** **	50	52	34	29	24	46	11	45
Methadone	31	**24** **	37	36	26	12	15	27	6	22
Buprenorphine	2	**2**	-	-	0	-	-	-	-	5
Buprenorphine-naloxone	8	**5***	4	8	-	6	-	8	-	11
Buprenorphine depot injection	2	**2**	-	-	-	0	-	-	-	0
Drug counselling	11	**8***	11	6	-	11	6	9	-	16
Other	4	**4**	-	-	-	-	-	-	-	-

Note. - Values suppressed due to small cell size (n≤5 but not 0). *p<0.050; **p<0.010; ***p<0.001 for 2020 versus 2021 for national estimates.

Bloodborne Virus Testing and Treatment

In 2021, over two-fifths (44%) of participants reported that they had received a hepatitis C virus (HCV) antibody test in the past year (a decrease relative to 2020; 31%; p<0.001), 40% had received an RNA test (36% in 2020; p=0.108) and 9% reported having a current HCV infection (11% in 2020; p=0.363) (Table 22). Twelve per cent of the total sample reported that they had received HCV treatment in the past year, of which the majority (69%; n=72) reported that their treatment had been successful.

Over four-fifths of the sample (84%) reported having ever had a test for human immunodeficiency virus (HIV) (31% within the past six months), with the vast majority reporting that they had never received a positive diagnosis (96%) (Table 22).

Table 22: HCV and HIV testing and treatment, nationally and by jurisdiction,2020-2021

%	National		NSW	ACT	VIC	TAS	SA	WA	NT	QLD
	N=884	N=888	N=150	N=100	N=148	N=95	N=101	N=99	N=94	N=101
	2020	2021								
Past year Hepatitis C test (n)										
Past year hepatitis C antibody test	N=861 31	N=868 44***	N=147 41	N=99 64	N=145 57	N=86 55	N=100 37	N=99 38	N=94 27	N=98 29
Past year hepatitis C PCR or RNA test	N=829 36	N=839 40	N=145 43	N=96 52	N=144 50	N=81 53	N=98 27	N=86 36	N=94 23	N=95 32
Current hepatitis C status (n)										
Currently have hepatitis C	N=836 11	N=826 9	N=143 7	N=96 10	N=136 14	N=82 7	N=96 10	N=91 7	N=91 7	N=91 9
Past year treatment for hepatitis C (n)										
Received treatment in past year	N=854 9	N=862 12	N=147 14	N=99 20	N=144 13	N=85 12	N=100 10	N=97 8	N=92 7	N=98 8
Most recent treatment was successful (among those who had received treatment in past year)	N=80 72	N=100 69	N=20 75	N=20 55	N=18 72	N=10 60	N=10 60	N=8 -	N=6 -	N=8 100
HIV test (n)		N=727	N=147	N=97	N=143	N=87	N=99	N=98	N=94	N=99
HIV test in past 6 months	/	31	N=150 39	N=100 43	N=148 39	N=95 32	N=101 25	N=99 20	N=94 9	N=101 23
HIV test more than 6 months ago	/	53	N=147 52	N=97 42	N=143 52	N=87 48	N=99 55	N=98 69	N=94 50	N=99 58
HIV status (n)		N=727	N=147	N=96	N=143	N=84	N=98	N=98	N=94	N=99
Lifetime HIV positive diagnosis	/	3	7	-	5	0	-	-	-	-

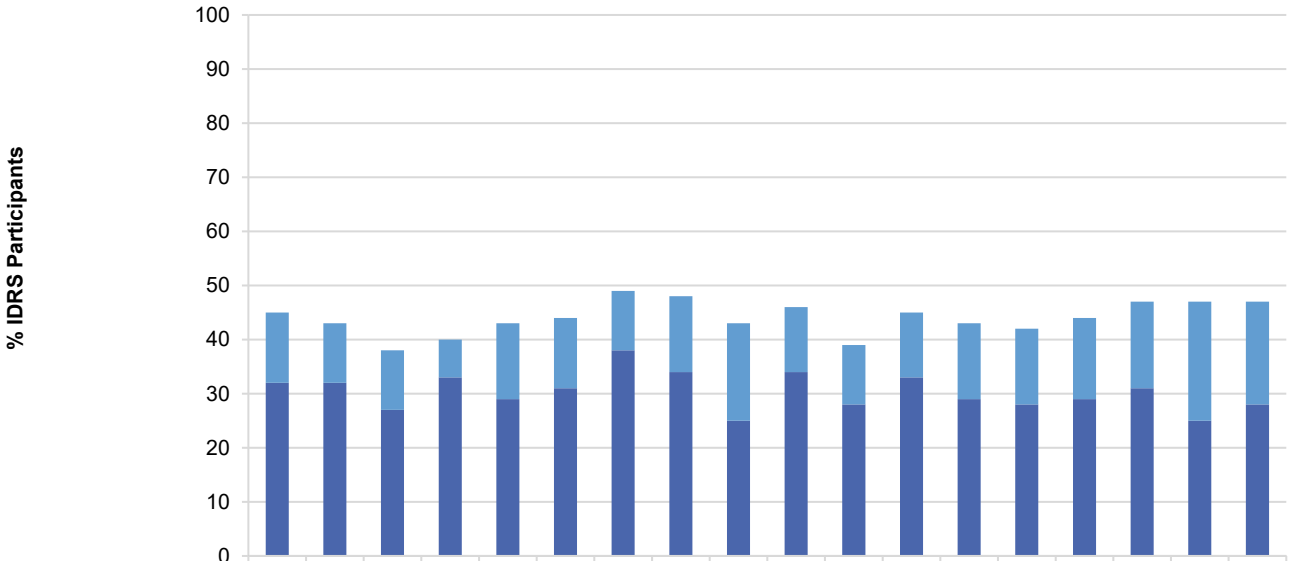
Note. - Values suppressed due to small numbers (n≤5 but not 0). N is the number who responded (denominator). Timeframes for HCV and HIV differ; i.e., HCV questions focus on lifetime and past year; HIV questions focus on lifetime and past six months. / Not asked. *p<0.050; **p<0.010; ***p<0.001 for 2020 versus 2021 for national estimates.

Mental Health

In 2021, 47% of the sample self-reported that they had experienced a mental health problem in the preceding six months, stable from 2020 (47%; p=0.747) (Figure 38). Amongst those who had experienced a mental health problem, the most commonly reported problems were depression (64%; 70% in 2020; p=0.486) and anxiety (49%; 55% in 2020; p=0.288). Smaller proportions reported post-traumatic stress disorder (25%), schizophrenia (15%) and bipolar disorder (12%).

One-quarter of the total sample (28%; 58% of those who reported a mental health problem) had seen a mental health professional during the past six months, stable from 2020 (53%; p=0.131). Three-quarters (75%) of those who reported having seen a health professional about a mental health problem had been prescribed medication for their mental health problem in the preceding six months (73% in 2020; p=0.766).

Figure 38: Self-reported mental health problems and treatment seeking in the past six months, nationally, 2004-2021



	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
No treatment seeking	13	11	11	7	14	13	11	14	18	12	11	12	14	14	15	16	22	19
Treatment seeking	32	32	27	33	29	31	38	34	25	34	28	33	29	28	29	31	25	28

Note. The combination of the per cent who report treatment seeking and no treatment is the per cent who reported experiencing a mental health problem in the past six months. *p<0.050; **p<0.010; ***p<0.001 for 2020 versus 2021.

Driving

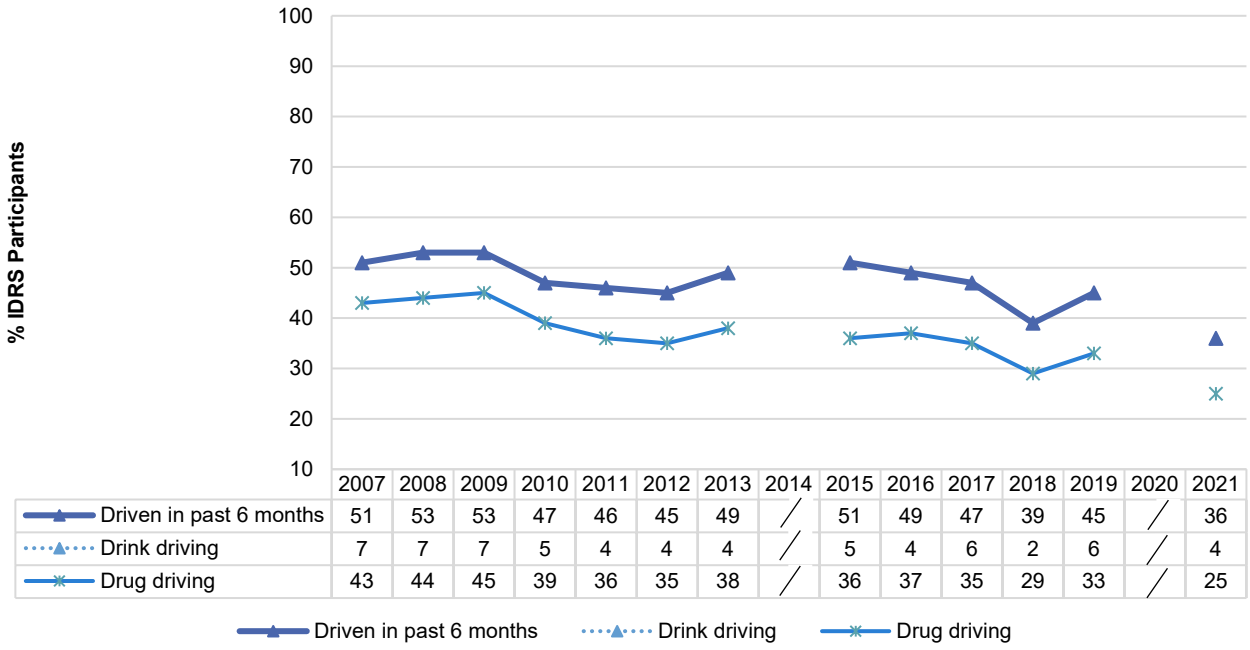
Of the national sample, over one-third (36%) had driven a car, motorcycle or other vehicle in the last six months. Four per cent of the sample reported driving while over the perceived legal limit of alcohol (12% of those who had driven recently) and 25% reported driving within three hours of consuming an illicit or non-prescribed drug in the last six months (70% of those who had driven recently) (Table 23). Among those who reported driving within three hours of consuming an illicit or non-prescribed drug in the last six months, the majority reported using crystal methamphetamine prior to driving (59%), followed by heroin and cannabis (35%, respectively).

Table 23: Driving behaviour in the last six months, nationally and by jurisdiction, 2021

	National	NSW	ACT	VIC	TAS	SA	WA	NT	QLD
	N=875	**N=148**	**N=96**	**N=147**	**N=91**	**N=101**	**N=99**	**N=94**	**N=99**
% Driven in last six months	**36**	32	22	29	43	38	41	43	47
% Driven over the legal alcohol limit in the last six months	**(N=867) 4**	(N=146) -	(N=96) -	(N=147) 5	(N=89) 10	(N=100) -	(N=99) -	(N=93) -	(N=97) 7
% Driven within three hours of consuming illicit drug(s) last six months	**(N=871) 25**	(N=147) 21	(N=96) 19	(N=147) 18	(N=89) 30	(N=101) 23	(N=99) 35	(N=94) 24	(N=871) 37
% Tested for drug driving by police roadside drug testing last six months	**(N=872) 9**	(N=148) 9	(N=96) 8	(N=147) 7	(N=89) 11	(N=101) 10	(N=99) 12	(N=94) 9	(N=98) 9
% Breath tested for alcohol by police roadside testing last six months	**(N=874) 13**	(N=148) 11	(N=96) 8	(N=147) 7	(N=90) 13	(N=101) 15	(N=99) 23	(N=94) 11	(N=99) 14

Note: Questions about driving behaviour were not asked in 2020.

Figure 39: Self-reported driving in the past six months, over the (perceived) legal limit for alcohol and three hours following illicit drug use, nationally, 2007-2021



	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
Driven in past 6 months	51	53	53	47	46	45	49	/	51	49	47	39	45	/	36
Drink driving	7	7	7	5	4	4	4	/	5	4	6	2	6	/	4
Drug driving	43	44	45	39	36	35	38	/	36	37	35	29	33	/	25

Note. Computed of the entire sample. Questions about driving behaviour were first asked about in 2007. Questions about driving behaviour not asked in 2014 and 2020 (/ Not asked).

Drug Checking

Drug checking is a common strategy used to test the purity and contents of illicit drugs.

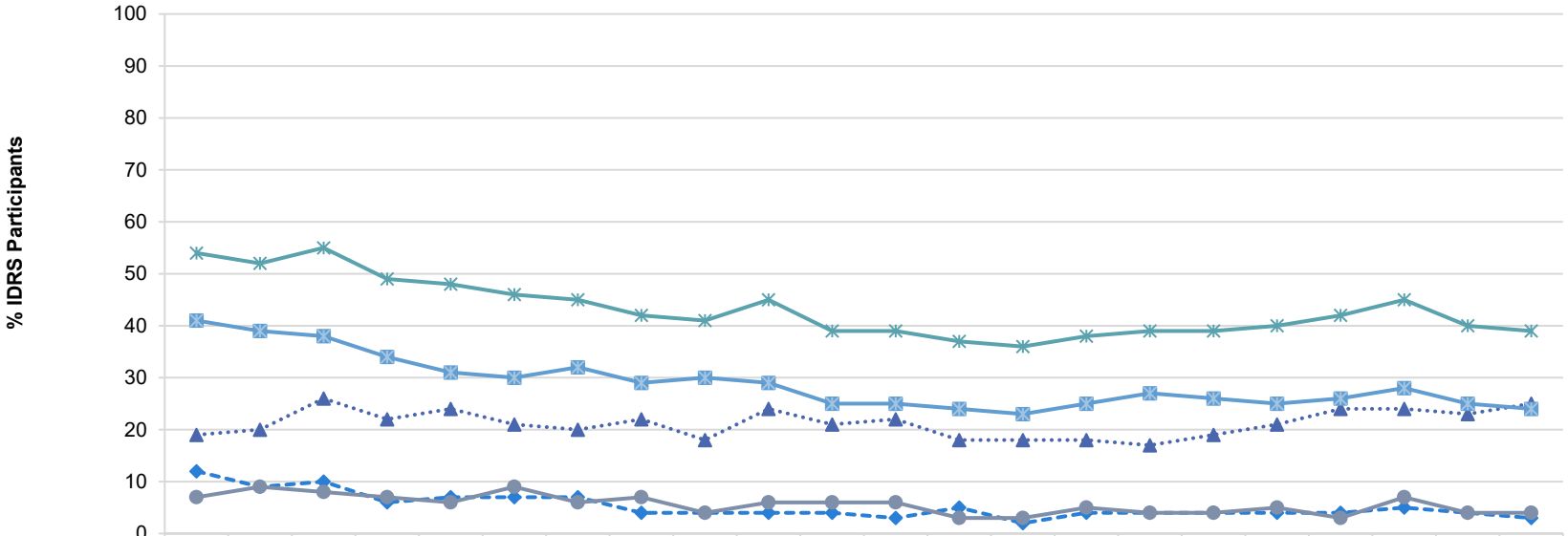
In 2021, 14% of participants reported that they or someone else had ever tested the content and/or purity of their illicit drugs in Australia (8% in the past year). Of those who reported that they or someone else had tested their illicit drugs in the past year (n=69), nearly half (48%) reported using colorimetric or reagent test kits, followed by 47% using testing strips (e.g., BTNX fentanyl strips or other immunoassay testing strips). Of those who had used testing strips (n=27), 59% reported getting a positive detection for fentanyl.

Crime

The per cent of participants reporting past month criminal activity declined from 2000 to 2010, stabilising from 2010 onwards. Property crime and selling drugs for cash profit remained the most common self-reported crimes in 2021 (25% and 24%, respectively), with few participants reporting past month violent crime (4%; 4% in 2020; p=0.696) or fraud (3%; 4% in 2020; p=0.365) (Figure 40). In 2021, there was a significant increase in those who reported being a victim of a crime involving violence (e.g., assault) in the month preceding interview (16%; 12% in 2020; p=0.016).

In 2021, 31% of the sample had been arrested in the past year (26% in 2020; p=0.050). This ranged from 15% in the NT sample to 39% in both the VIC and QLD samples. Three-fifths of the national sample (60%) reported a lifetime prison history in 2021, stable compared to 2020 (56%; p=0.080). This ranged from 52% in the SA sample to 71% in the VIC sample.

Figure 40: Self-reported criminal activity in the past month, nationally, 2000-2021



	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
Property crime	19	20	26	22	24	21	20	22	18	24	21	22	18	18	18	17	19	21	24	24	23	25
Drug dealing	41	39	38	34	31	30	32	29	30	29	25	25	24	23	25	27	26	25	26	28	25	24
Fraud	12	9	10	6	7	7	7	4	4	4	4	3	5	2	4	4	4	4	4	5	4	3
Violent crime	7	9	8	7	6	9	6	7	4	6	6	6	3	3	5	4	4	5	3	7	4	4
Any crime	54	52	55	49	48	46	45	42	41	45	39	39	37	36	38	39	39	40	42	45	40	39

Note. 'Any crime' comprises the per cent who report any property crime, drug dealing, fraud and/or violent crime in the past month. *p<0.050; **p<0.010; ***p<0.001 for 2020 versus 2021