

# Impact of COVID-19 and associated restrictions on people who inject drugs in Australia: Findings from the Illicit Drug Reporting System 2020

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## Key findings from the national sample:

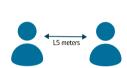
#### **COVID-19 BEHAVIOURS**



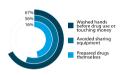
One-fifth (20%) of the 2020 IDRS sample reported getting tested for COVID-19



In the sample, 50% were worrie about getting COVID-19.



The majority (89%) reported that they had practiced social distancing since March



Harm reduction behaviours relating to COVID-19.

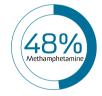
#### **CHANGES IN DRUG USE DURING COVID-19**



One-quarter (25%) of the total sample reported a decrease in injecting frequency compared to before COVID-19 restrictions.



Drugs most frequently endorsed as increased in use (i.e. used more or started using).



Methamphetamine was the most frequently endorsed drug that decreased in use (i.e. used less or stopped using) since COVID-19 restrictions.

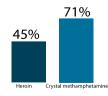


Non-prescribed benzodiazepines were the drug most frequently endorsed as no change in use since COVID-19 restrictions.

#### CHANGES IN DRUG MARKETS AND TREATMENT



The majority of participants reported an increase in price for heroin and crystal methamphetamine.



Participants reported a decrease in availability of both heroin and crystal methamphetamine.



One-in-ten (12%) reported difficulties accessing sterile needles and syringes since COVID-19.



Almost half of those in treatment since March reported any disruption to their drug treatment since COVID-19.

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# **Background**

- The COVID-19 pandemic and restrictions on travel and gathering have likely had <u>major impacts</u> on drug supply, use and harms [1], and there have been <u>significant challenges</u> with delivery of drug treatment and harm reduction services [2].
- It is anticipated that impacts of COVID-19 restrictions and gatherings will be particularly felt by those reporting more problematic patterns of use, including those people who inject drugs (PWID).
- The <u>Illicit Drug Reporting System (IDRS)</u> is an illicit drug monitoring system which has operated in Australia since 2000, and includes annual interviews with PWID recruited from capital cities [3].
- Recognising the critical need for information, the IDRS project has been adapted to collect important data on people's experiences during COVID-19.
- This output presents findings from 884 interviews (100 ACT, 78 NT, 155 NSW, 98 QLD, 100 SA, 74 TAS, 179 VIC, 100 WA), from 23 June to 9 September (111 participants in June, 515 in July, 235 in August, 23 in September).

#### Method

- IDRS interviews are conducted with a sentinel sample of people aged 18 or older who have injected drugs at least once monthly in the preceding six months and resided in a capital city for the last 12 months.
- Participants are recruited via advertisements in needle syringe programs and other harm reduction services and via peer referral.
- In previous years, participants completed a one-hour face-to-face interview, and were reimbursed \$40 for time and expenses.
- In 2020, interviews were completed via phone instead of face-to-face in most jurisdictions and participants were reimbursed electronically to manage risk of COVID-19 transmission. In TAS and NT, some participants were recruited faceto-face.
- In 2020, the interview length was reduced and the content adapted to include COVID-19 specific items, anchored to implementation of restrictions in Australia at the beginning of March 2020.
- The age eligibility criterion was increased from 17 to 18 in 2020.
- The study protocol remained otherwise unchanged. Findings are suppressed where ≤5 participants report an outcome to protect confidentiality.
- The IDRS sample are demographically similar to those recruited in 2019 and in earlier years, with a median age of 44 years (IQR 38 50), although with fewer males (59% versus 68% in 2019).

















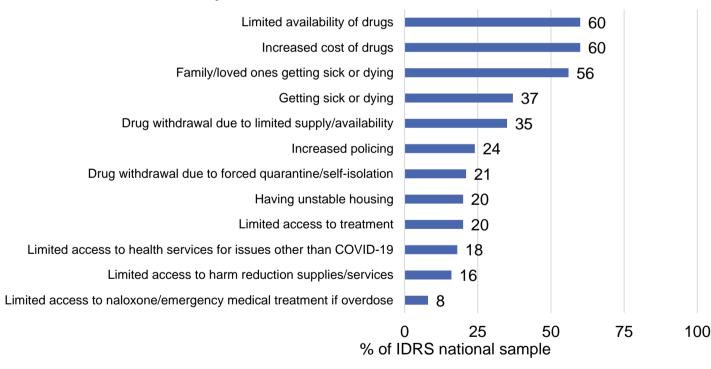


## **Findings**

## Experience of COVID-19 testing, diagnosis and restrictions

- 20% said they had been tested for COVID-19. None had been diagnosed with COVID-19.
- 50% said they were currently worried about getting COVID-19.
- At the time of the interview, 89% reported they had been social distancing, 70% reported home isolation, and 1% participants reported quarantine since March 2020.
- Participants reported a number of concerns related to the COVID-19 pandemic, namely around family or friends getting sick or dying (56% of the sample) or they themselves becoming unwell (37%; **Figure 1**).
- Issues related to drug markets (e.g., increased cost, limited availability of illicit drugs), as well as increased policing, were also commonly cited.

Figure 1. The percentage of the IDRS sample endorsing potential concerns related to the COVID-19 pandemic.























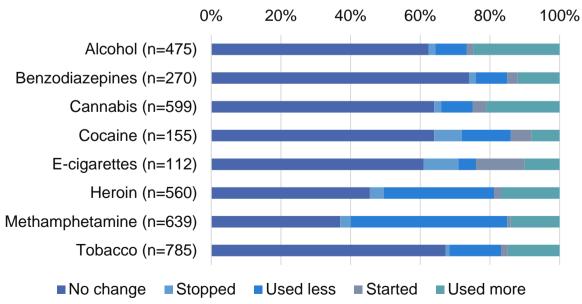
## Social impacts of COVID-19 and associated restrictions

- One-in-twenty (5%) reported that they had been given new shelter/short term housing or put up in a hotel since March 2020.
- Almost half (44%) reported that the income they received in the month prior to interview was more than what they earned in February 2020, 8% said less, and 48% said a similar amount.
- When asked about financial difficulties they had experienced in the four weeks prior to interview, 38% reported being unable to buy food or going without meals, while approximately one-third reported asking for financial help from friends/family, being unable to pay household/phone bills on time and asking for help from welfare/community organisations (34%, 31% and 28%, respectively).

## Changes in drug use with COVID-19 and associated restrictions

- One-third (36%) reported injecting at a different frequency during the last month compared to the month of February 2020. Of these, 70% reported a decrease in injecting frequency (25% of total sample).
- One-in-ten (12%) reported that the drug they injected most during the last month was different to the drug most injected in February 2020.
- Participants who reported past six month use of each drug were asked about changes in their use since the beginning of March 2020 compared to before. Participants mostly reported no change in use of each drug, except for methamphetamine (Figure 2). The drugs most commonly reported as decreased or ceased in use were heroin and methamphetamine, with frequently cited reasons being that these drugs were more expensive or less available.

Figure 2. Change in drug use since March 2020 compared to before amongst people who report use in the past six months.



Note. Estimates reflect reports on non-prescribed use for pharmaceutical medicines .



















## Changes in drug markets with COVID-19 restrictions

- Participants who commented most commonly reported heroin and crystal methamphetamine as increased in price since the beginning of March 2020 compared to before (62% and 91%, respectively; Figure 3). Price of cannabis was most commonly reported as stable.
- 59% and 50% of those who commented said that the purity of crystal methamphetamine and heroin, respectively, had declined since the beginning of March 2020 compared to before (**Figure 4**).
- 71% and 45% of those who commented noted a decline in availability for crystal methamphetamine and heroin, respectively, since March 2020 as compared to before (**Figure 5**).

Figure 3. Change in price of select illicit drugs since March 2020 compared to before.

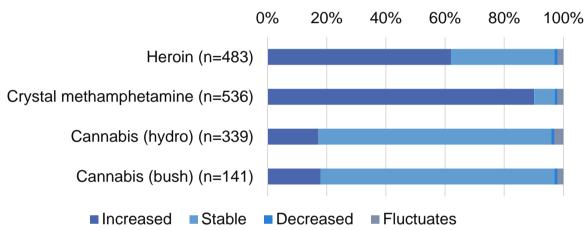
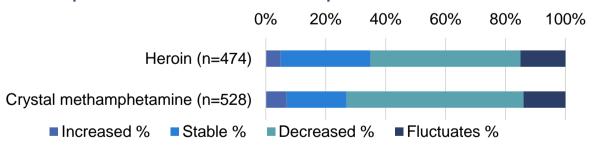


Figure 4. Change in perceived purity of heroin and crystal methamphetamine since March 2020 compared to before.



Note. Data on perceived purity were only collected for heroin and crystal methamphetamine.













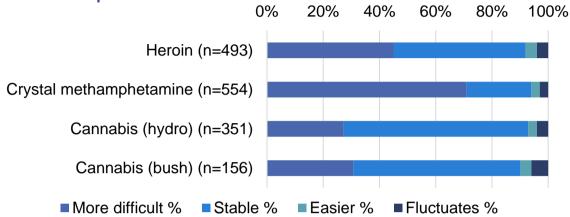








Figure 5. Change in perceived availability of select illicit drugs since the March 2020 compared to before.



## Changes in drug treatment and harm reduction service access

- When asked about drug treatment in the past six months, 5% reported being in drug treatment before March 2020, 7% since March, and 43% both before and since March.
- Of those in treatment since March 2020 (n=441), half (49%) reported any disruption to their drug treatment in that same period. Most commonly reported disruptions were appointments moving to phone/video rather than face-to-face (34%) and changed hours of service (17%).
- Of those who reported being on opioid agonist therapy (OAT) since March 2020 (n=373), 6% reported that they were put on a new treatment (most commonly changing to methadone and changing to buprenorphine depot injections).
- Most participants reported no change in aspects of OAT treatment since March 2020 (Figure 6). Of participants who reported OAT sine March 2020, the most common changes reported were an increase in take-away doses (25%) and an increase in dose (14%).
- Most reported that their satisfaction with their drug treatment was the same compared to before March (81%), while 9% said better and 10% said worse. Of those who did not report recent treatment (n=463), 12% reported difficulties accessing treatment in the past six months (9% since March 2020).
- One-in-ten (12%) reported difficulties accessing sterile needles and syringes since March 2020. Of these, 50% reported re-using their own needles more than normal as a result.
- 5% reported difficulties in safely disposing of used needles and syringes in a disposal unit since March 2020.











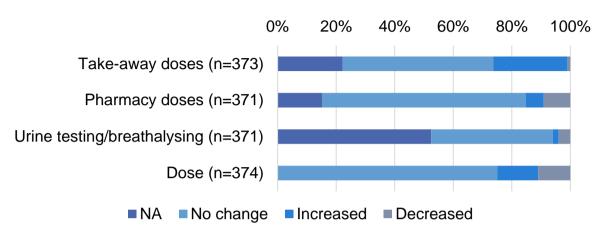








Figure 6. Change in aspects of drug treatment since March 2020 as compared to before among those reporting recent OAT.



## Physical and mental health

- One-in-ten participants (13%) reported experiencing an accidental opioid overdose in the past 12 months (15% in the 2019 sample for comparison).
- In 2020, 8% experienced an opioid overdose before March, 2% since March, and 3% both before and since March.
- One-third of participants (30%) reported accessing take-home naloxone during the past year (18% before March and 15% since March).
- Less than one-in-twenty (3%) reported difficulties accessing naloxone during the past year (1% before March and 2% since March).
- 14% reported resuscitating someone with naloxone during the past year (8% before March and 6% since March).
- 9% reported an increase in reusing their own needles since March, while 2% reported an increase in any needle sharing (either receptive or distributive), as compared to the month of February.
- 13% reported that they injected alone more since March as compared to before.
- 54% reported experiencing withdrawal from any drug during the past year (7% before March, 14% since March and 33% both before and since March). When asked about their last experience of withdrawal, 73% of participants said it was involuntary.
- When asked about their current physical health as compared to before March, 15% said it was better, 61% said similar, and 23% said worse.
- When asked about their current mental health as compared to before March, 18% said it was better, 50% said similar, and 32% said worse.



















## Precautions to reduce risk of COVID-19 and impacts of restrictions

- The most commonly reported behaviours to reduce the risk of contracting COVID-19 or impacts of restrictions while obtaining or using drugs were washing hands with soap/sanitiser before handling drugs/money (67%), avoiding sharing needles/syringes with others (56%), preparing their drugs themselves (47%) and avoiding sharing other drug use equipment with others (42%).
- 28% reported seeking information on how to reduce risks of getting COVID-19 while obtaining or using drugs, or how to avoid impacts of restrictions on drug use (11% from a harm reduction service, 6% from a GP).

Washing hands with soap/sanitiser before handling drugs/money

Avoiding sharing needles/syringes with other people

Prepared your drugs yourself







## **Conclusions**

- Most participants reported no change or a decrease in their illicit drug use since COVID-19 restrictions compared to before March.
- Crystal methamphetamine and heroin were commonly perceived to be increased in price and decreased in purity and availability, while cannabis remained stable across these indicators.
- Participants reported negative effects on mental and physical health since COVID-19 and associated restrictions.
- For those in treatment since March, few reported change in satisfaction after COVID-19 restrictions were introduced and the main change to treatment cited was appointments moving to phone or videoconference rather than faceto-face. For those not in treatment, a small proportion reported difficulties accessing treatment since March.
- A small per cent of the sample reported changes to their injecting practices since the introduction of COVID-19 restrictions.
- Many engaged in in harm reduction behaviours to reduce the risk of COVID-19 transmission while obtaining or using drugs.
- It is important to note that the IDRS is a sentinel sample and does not represent everyone that uses drugs.
- It is critical to continue to monitor impacts, particularly amongst those populations who report more regular or dependent use of drugs.
- More extensive findings on impacts of COVID-19 and associated restrictions among this sample will be reported in future outputs from the project.





















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# Participating researchers and research centres

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- Cristal Hall, Dr Campbell Aitken and Professor Paul Dietze, Burnet Institute;
- Tanya Wilson and Associate Professor Raimondo Bruno, School of Psychology, University of Tasmania;
- Catherine Daly, Dr Jennifer Juckel, Leith Morris and Dr Caroline Salom, Institute for Social Science Research, The University of Queensland;
- Dr Seraina Agramunt and Professor Simon Lenton, National Drug Research Institute, Curtin University; and
- Chris Moon, Northern Territory Department of Health.

# Other acknowledgements

- The people who inject drugs who participated in the IDRS survey.
- The agencies that assisted with recruitment and interviewing.
- The members of the Drug Trends Advisory Committee and the Australian Injecting & Illicit Drug Users League (AIVL) for their contribution to the IDRS.
- The IDRS is funded by the Australian Government under the Drug and Alcohol Program.

# Suggested citation

Peacock, A., Price, O., Karlsson, A., Uporova, J., Chan, R., Swanton, R., Gibbs, D., Bruno, R., Dietze, P., Salom, C., Lenton, S., Agramunt, S., Hall, C., Wilson, T., Daly, C., Moon, C., Degenhardt, L., & Farrell, M. (2020). Impact of COVID-19 and associated restrictions on people who inject drugs in Australia: Findings from the Illicit Drug Reporting System 2020. Drug Trends Bulletin Series. Sydney: National Drug and Alcohol Research Centre, UNSW Sydney.















