

Regional trends in drug use in Queensland: a pilot study

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Key findings:

- This bulletin reports on the results of a pilot study that involved face to face interviews with sentinel groups of people who regularly use drugs in Brisbane, the Gold Coast, and Townsville, to explore the utility of regional data collection on drug use, markets and harm for surveillance purposes
- We found regional variation in drug of choice, drug injected most often, drug treatment engagement and mental health status of participants
- While heroin was the drug of choice for the overall QLD sample, Townsville participants were more likely to report methamphetamine as their drug of choice
- Townsville participants were less likely to report being in drug treatment than those in Brisbane or the Gold Coast
- The methodology used in capital cities proved effective in regional areas.

Introduction

To date, existing research on trends in drug use, availability, and related harms, as well as outcomes amongst people who use drugs, has typically focused solely on capital city markets. With the exception of findings from wastewater analysis and the National Drug Strategy Household Survey (NDSHS), there is scant ongoing data collection on regional variations in drug use (1, 2).

Data from the NDSHS indicate there are important variations in substance use and related harms by geographical location (3). However, data that are more specific and collected annually are needed to understand the drivers behind variations in use, supply, and harms, as well as to inform timely event responses in these locations. The lack of regional data also has wider-reaching implications, including the prevention of appropriate input (based on local knowledge) to service provision decisions at State and Federal levels.

To address this gap in knowledge, a pilot study was conducted in Townsville, a large regional centre in Queensland, where data were collected using methods established by the Illicit Drugs Reporting System (IDRS) and Ecstasy and Related Drugs Reporting System (EDRS) studies carried out annually in Australia's capital cities. This bulletin demonstrates applicability of the methodology to regional areas and reports on the findings of that study, with a focus on people who inject drugs (PWID) as only a small number of EDRS interviews were conducted in Townsville.

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Method

This bulletin draws on data from the 2019 Illicit Drug Reporting System (IDRS) and Ecstasy and Related Drugs Reporting System (EDRS) in Queensland. In 2019, the Institute for Social Science Research at The University of Queensland and the National Drug & Alcohol Research Centre at The University of NSW provided seed funding to conduct additional IDRS and EDRS interviews at a regional site, Townsville, in addition to the data collected annually in Brisbane and the Gold Coast. An experienced interviewer flew to Townsville and conducted interviews with participants following eligibility criteria congruent with other sites.

Participants for the 2019 QLD IDRS were 129 PWID who injected regularly and were recruited from Brisbane (n=75), the Gold Coast (n=34), and Townsville (n=20). Participants at each location were recruited through services such as needle and syringe programs and peer-referral. Interviews were held at service venues: Queensland Injectors Health Network (QulHN) Townsville, Brisbane and Burleigh Heads and Biala Harm Reduction Centre in Brisbane.

Participants in the EDRS were people who reported use of ecstasy and other stimulants, and who did not regularly inject, recruited from South East QLD (n=100) and Townsville (n=8). EDRS participants were recruited via social media with interviews held in local cafés.

Participants were administered structured questionnaires in face-to-face interviews that canvassed a broad range of topics including participant demographic characteristics, drug use patterns and perceptions of key issues such as price, purity and availability of a range of drugs. Details of the methods of the IDRS and EDRS have been published elsewhere [4].

For the purposes of this Bulletin we examined the differences in drug-related trends between Brisbane, the Gold Coast, and Townsville. Statistical tests were conducted on IDRS data across the three locations and are reported when significance reached $p < 0.05$. Note that no corrections for multiple comparisons have been made as sample sizes are relatively small; thus comparisons should be treated with caution. Due to time constraints, the Townsville EDRS sample was small; commentary on the EDRS is thus limited to anecdotal observations.

Results

Sample characteristics

Table 1 shows the characteristics of participants recruited for the survey of PWID in the 2019 QLD IDRS. Across all sites, most participants were male and aged over 40 years old; the majority of participants were unemployed, with government benefits the predominant source of income. One quarter of the Townsville IDRS sample were of Aboriginal and Torres Strait Islander descent, which was higher than for other locations. EDRS participants were typically younger (mean age 20 years), male, with many at least partially employed and/or studying. Fewer identified as being of Aboriginal and Torres Strait Islander descent. Townsville EDRS participants were largely similar to those from Brisbane and Gold Coast.

Table 1: Demographic characteristics of the QLD IDRS sample recruited from Brisbane, Gold Coast and Townsville, 2019

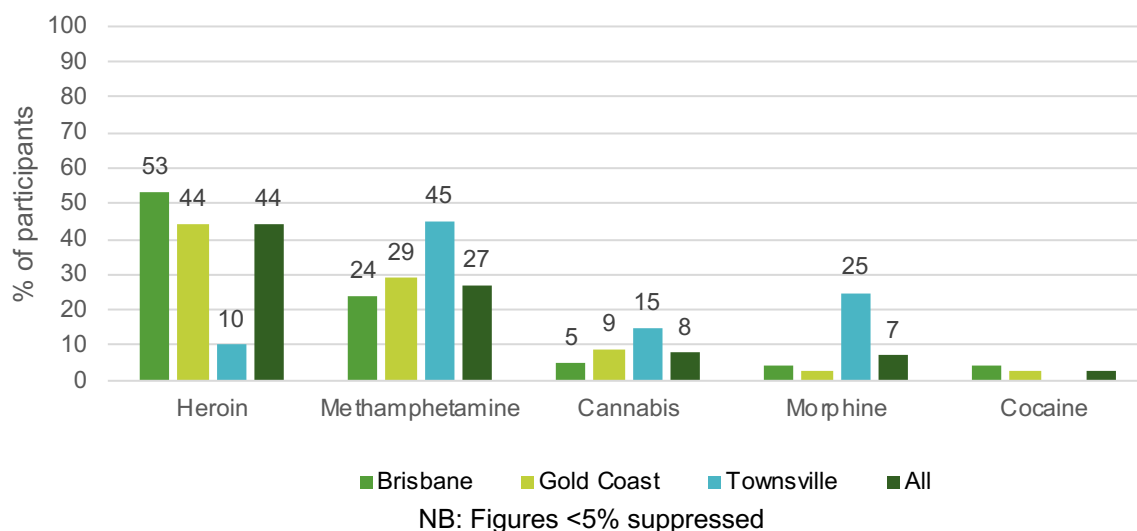
	Brisbane n=75	Gold Coast n=34	Townsville n=20	Total n=129
Median age (years; range)	41 (19-68)	46 (29-65)	47 (28-62)	42 (19-68)
% Male	69%	62%	55%	65%
% Aboriginal and/or Torres Strait Islander	12%	15%	25%	15%
% Unemployed	84%	88%	85%	85%

Drug of Choice

Figure 1 shows that the drug of choice nominated by IDRS participants differed significantly by region. The drug of choice nominated by the greatest percentage of the overall IDRS Queensland sample was heroin, followed by methamphetamine, cannabis, morphine and cocaine. Among the Brisbane and Gold Coast samples, heroin was the most nominated drug of choice (53% and 44% respectively), followed by methamphetamine (24% and 29% respectively), cannabis (5% and 9% respectively), morphine and cocaine (figures <5% suppressed). In Townsville, the IDRS drug of choice most nominated was methamphetamine (45%), followed by morphine (25%) and cannabis (15%). The proportion favouring heroin (10%) was significantly lower than for the two southern locations ($p < 0.05$).

EDRS participants favoured cannabis and ecstasy as drug of choice and drug most often used; Townsville participants were more likely to have recently used methamphetamine than those from southern locations.

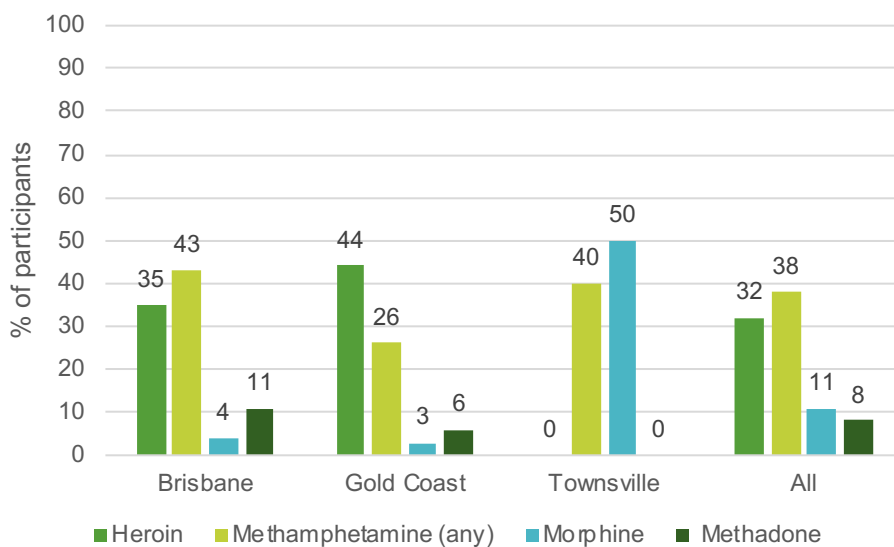
Figure 1: Drug of choice for the QLD IDRS sample: Brisbane, Gold Coast, Townsville, 2019



Drug injected most often in the last month

As shown in Figure 2, the drug injected most often in the past month varied significantly between the three locations ($p < 0.05$). In Brisbane, the drug injected most often was methamphetamine, while on the Gold Coast it was heroin. Although the most common drug of choice in Townsville was methamphetamine, the drug injected most often was morphine (50%) - significantly higher than the other two locations ($p < 0.05$), followed by methamphetamine. These data reflected variations in participants' reports of availability of these substances (data not shown). EDRS participants did not typically inject drugs, but more of the Townsville group had injected at least once during the past six months.

Figure 2: Drug injected most often in the past month by QLD IDRS sample: Brisbane, Gold Coast, and Townsville, 2019



Self-reported injection-related health issues

Overall, half of the Queensland IDRS participants reported experiencing an injection-related health issue in the last month, with significant variations between the three locations examined ($p < 0.05$): 56% of Brisbane participants, 50% of Gold Coast participants and 25% of Townsville participants. The issues reported most frequently by Brisbane and Gold Coast participants were experiencing a 'dirty hit' (35% and 26%, respectively) and nerve damage (23% and 24%, respectively). In Townsville, the most commonly reported issues were skin abscesses or cellulitis (20%), followed by experiencing a 'dirty hit' and having blood clots near the surface of the skin (both 10%).

Self-reported non-fatal opioid overdose

There were significant variations in reported rates of opioid (specifically heroin) overdose in the last 12 months across the three locations; 24% of Brisbane participants reported overdosing on heroin, compared to 12% of Gold Coast participants. None of the Townsville participants reported having overdosed on heroin in the last 12 months.

Awareness of naloxone to prevent opioid overdose

The majority of the Queensland sample had heard of naloxone (90%), but there was significant variation between the three locations examined (Table 2; $p < 0.05$). Almost all participants in Brisbane and on the Gold Coast had heard about naloxone (93% and 94% respectively), compared to only 70% of Townsville participants. At least half of participants at all sites were aware of Take Home Naloxone programs; fewer had heard that naloxone was available without a prescription.

Table 2: Awareness of naloxone in QLD IDRS sample: Brisbane, Gold Coast and Townsville, 2019

	Brisbane	Gold Coast	Townsville	All (2019)
Heard of naloxone	93%	94%	70%**	90%
Heard of Take Home Naloxone programs	68%	71%	55%	67%
Heard of naloxone rescheduling	28%	24%	45%	26%

NB: ** $p < 0.01$) for comparison with Brisbane

Drug Treatment

Participants' engagement with drug treatment varied significantly across the three locations: 53% of Brisbane participants were currently in a drug treatment program, compared to 65% of Gold Coast participants, while only one participant from Townsville reported being in drug treatment ($p < 0.05$).

Mental Health

Almost half (49%) of the overall Queensland IDRS sample reported having experienced a mental health problem in the six months before the interview, with no significant variation across the three locations examined. Some differences were seen between locations regarding the specific conditions reported (figures suppressed due to small numbers). Over half of the Queensland IDRS sample reported experiencing mental health problems, with little variation across locations.

Implications

Although the results presented here should be interpreted with caution due to the small sample size, these pilot data suggest distinct regional variations in trends in drug use, availability, service access, and mental health status of people who inject drugs. Larger regional samples are likely to further highlight these differences.

This study demonstrates capacity to reach and learn first-hand from the experiences of people who regularly use illicit drugs in regional Australia. Region-specific data can and should inform health and social service development and decisions in regional areas; we cannot assume that trends observed in capital cities, and interventions modelled on these data, will be appropriate or applicable to regional contexts.

References

1. Sweeney, K. (2020, March 09). National Wastewater Drug Monitoring Program-Ninth report. Retrieved June 17, 2020, from <https://www.acic.gov.au/publications/reports/national-wastewater-drug-monitoring-program-ninth-report>
2. National Drug Strategy Household Survey 2019 - Australian Institute of Health and Welfare. (2019, April 12). Australian Institute of Health and Welfare. <https://www.aihw.gov.au/about-our-data/our-data-collections/national-drug-strategy-household-survey/2019-ndshs>
3. Roche, A., & McEntee, A. (2017). Ice and the outback: Patterns and prevalence of methamphetamine use in rural Australia. *Australian Journal of Rural Health*, 25(4), 200-209.
4. Peacock, A., Uporova, J., Karlsson, A., Gibbs, D., Swanton, R., Kelly, G., Price, O., Bruno, R., Dietze, P., Lenton, S., Salom, C., Degenhardt, L., & Farrell, M. (2019). Illicit Drug Reporting System (IDRS) Interviews: Background and Methods. Sydney, National Drug and Alcohol Research Centre, UNSW Sydney

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