

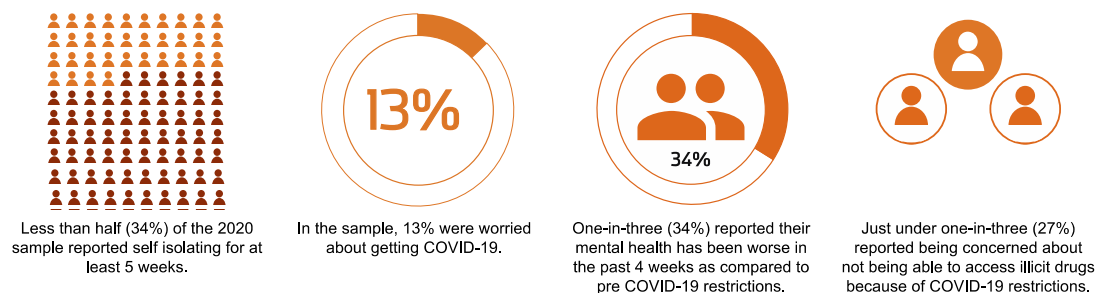
Impacts of COVID-19 and associated restrictions on people who use illicit stimulants in Northern Territory: Findings from the Ecstasy and Related Drugs Reporting System 2020

Olivia Price & Amy Peacock

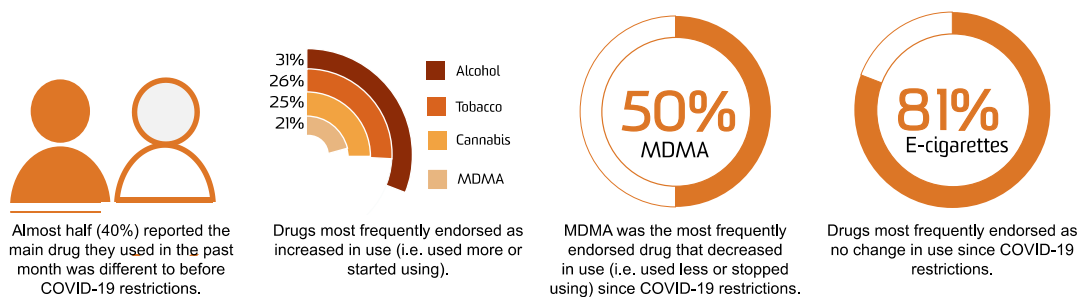
Key findings from the Northern Territory sample:



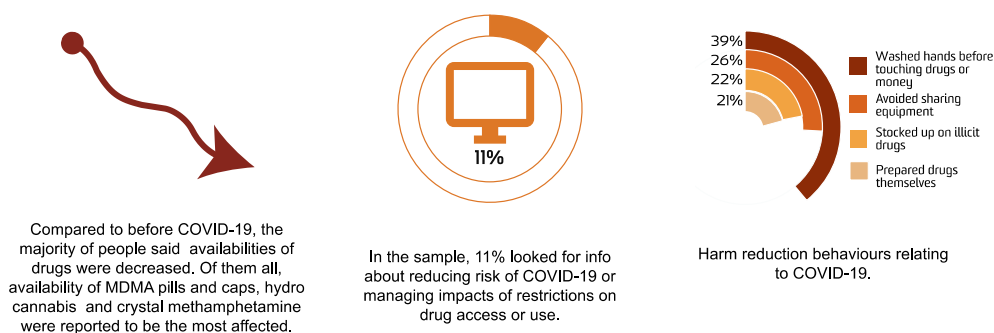
COVID-19 BEHAVIOURS



CHANGES IN DRUG USE DURING COVID-19



OTHER BEHAVIOURS DURING COVID-19



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Background

- The COVID-19 pandemic and restrictions on travel and gathering have likely had [major impacts](#) on drug supply, use and harms [1] and there have been [significant challenges](#) with delivery of drug treatment and harm reduction services [2].
- People who use drugs may also be at increased risk of COVID-19 transmission because of the social nature of drug procurement and use.
- There have been urgent calls for evidence regarding the experiences of people who use drugs during the COVID-19 pandemic to inform public health efforts.
- The [Ecstasy and Related Drugs Reporting System \(EDRS\)](#) is an illicit drug monitoring system which has operated in Australia since 2003, and includes annual interviews with people who regularly use ecstasy and other illicit stimulants [3].
- Recognising the critical need for information, the EDRS project has been adapted to collect important data on people's experiences during COVID-19.
- **This output represents findings from 100 interviews undertaken in Darwin, Northern Territory between 29th April and 31st July 2020, as part of the EDRS.**

Methods

- EDRS interviews are with a sentinel sample of people aged 18 or older who have used ecstasy and other illicit stimulants at least once monthly in the preceding six months and resided in a capital city for the last 12 months.
- Participants are recruited via social media and peer referral, complete a one hour interview, and are reimbursed \$40 for time and expenses.
- In 2020, interviews were completed via phone or videoconference (instead of face-to-face) and participants were reimbursed electronically to manage risk of COVID-19 transmission.
- The interview length was reduced and content adapted to include COVID-19 specific items, anchored to implementation of restrictions in Australia at the beginning of March 2020. The study protocol remained otherwise unchanged.
- The Northern Territory sample interviewed were demographically similar to those recruited in 2019 and in earlier years, being mostly male (58%) and young (median age 23; IQR 20-28).

Results

Social impacts of COVID-19

- 26% said their living situation had changed since the beginning of March 2020.
- 26% said they were receiving more income (from any source) in the past month as compared to the month of February 2020, 32% less money, and 42% a similar amount.

Results Continued

Experience of COVID-19 testing, diagnosis and restrictions

- 15% said they had been tested for COVID-19. None had been diagnosed with COVID-19.
- 70% reported home isolation (i.e., staying at home and only leaving for essential activities) and 10% being in quarantine since March 2020.
- At interview, one-third (34%) had been practicing home isolation for ≥ 5 weeks.
- 13% were currently worried about contracting COVID-19.

Changes in drug use with COVID-19 restrictions

- 40% of participants reported that the main drug they used in the past month was different to the main drug they used in February 2020. The most common change was from reporting ecstasy/MDMA in February to cannabis in the past month.
- 72% reported a change in frequency of use of ecstasy/MDMA and related drugs in the past month relative to frequency of use in February 2020. The majority of these (65%) reported reducing or ceasing their use.
- 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 most commonly reported reducing use of ecstasy/MDMA and ketamine, and no change in use of other drugs (Figure 1).
- Primary reasons cited for decreasing use comprised fewer opportunities to be with people/go out and decreased availability of the drug, and for increasing use comprised “more bored” and spending more time with people who use the drug, although these vary across substances.

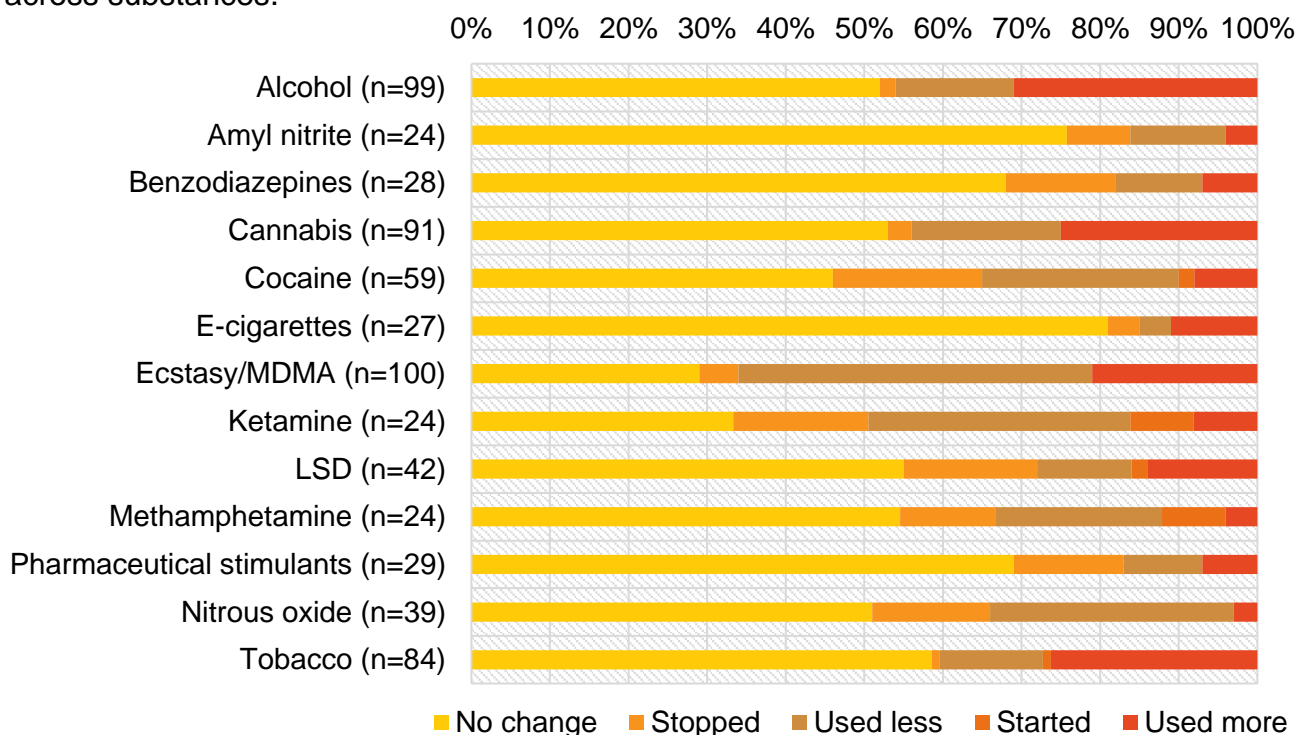


Figure 1. Change in drug use since March 2020 compared to before amongst people who report use in the past six months, Northern Territory. Estimates reflect non-prescribed use for pharmaceutical medicines.

Results Continued

Perceived availability of substances

- Participants were asked about the perceived availability of substances since March 2020 as compared to before (Figure 2).
- Participants reported that most drugs were harder to obtain, while bush cannabis and LSD remained as relatively stable.
- 27% of participants reported being concerned about not being able to access illicit drugs because of COVID-19 restrictions.

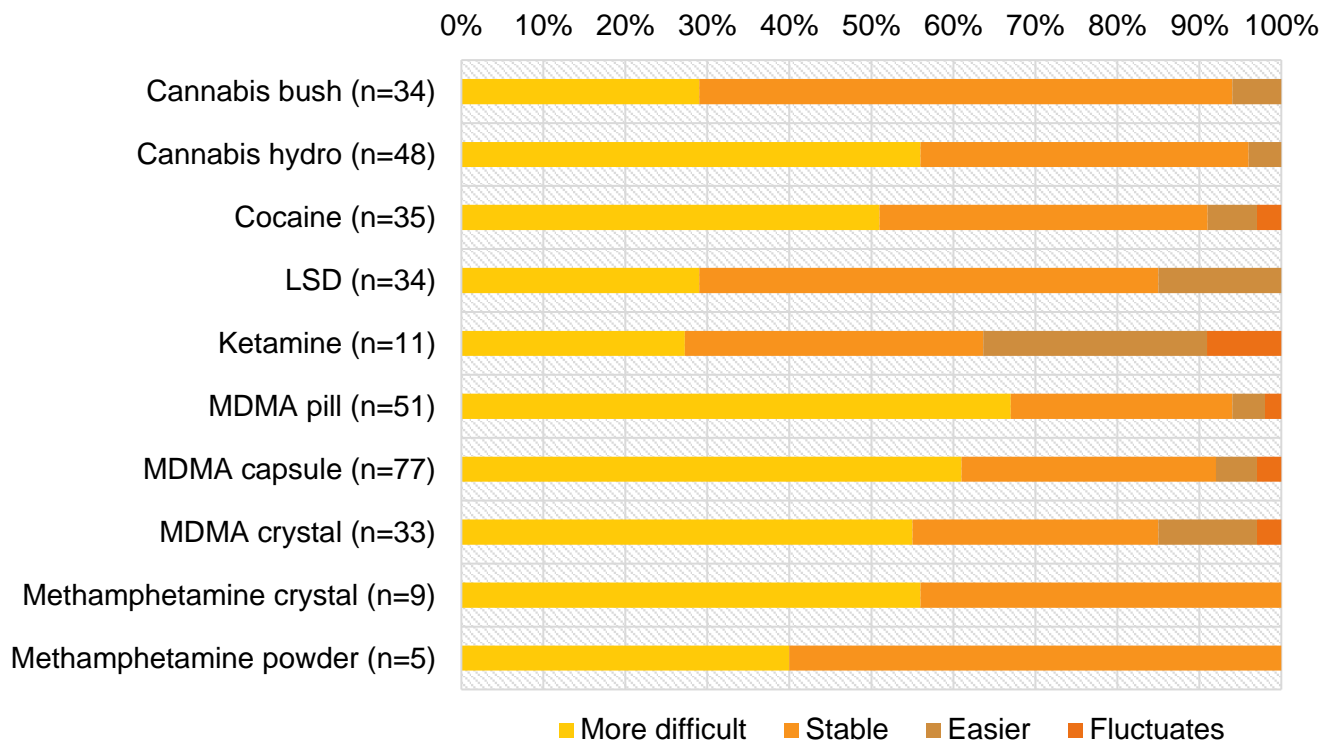
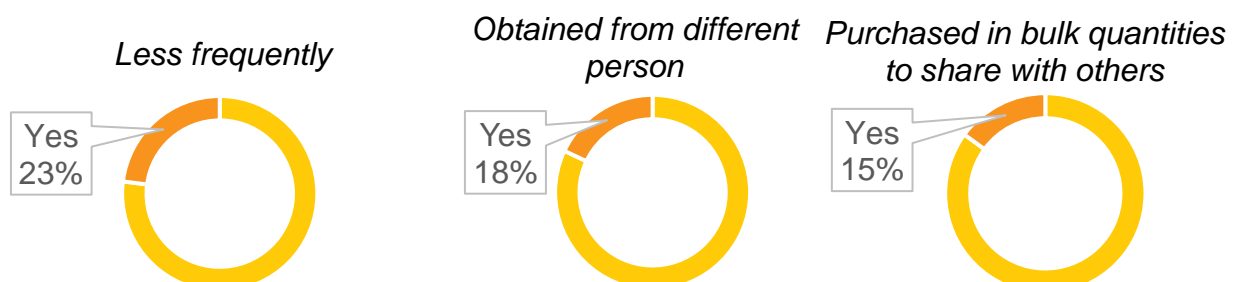


Figure 2. Change in perceived availability since March 2020 as compared to before, amongst those confident commenting (Northern Territory). 'Don't know' responses are excluded.

Obtaining illicit drugs

- 50% reported no change in their means of obtaining illicit drugs since the beginning of March 2020.
- Most common changes in means of obtaining illicit drugs since March 2020 reported amongst the Northern Territory sample were:



Results Continued

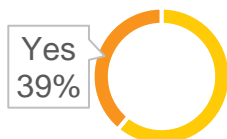
Physical and mental health

- 15% reported experiencing a stimulant overdose in the past 12 months (11% before March, ≤5 since March, and ≤5 both before and since March).
- ≤5 reported being in drug treatment in the past 6 months (≤5 before March and 0% since March).
- ≤5 reported any difficulties in accessing health services for alcohol and/or drug support since March.
- 34% rated their mental health as worse in the past month compared to February 2020; 33% rated it as similar, and 33% as better.

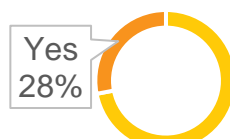
Precautions to reduce COVID-19 transmission and impacts of restrictions on drug acquisition and use

- 11% of participants reported directly seeking information on reducing COVID-19 transmission risk while using drugs or how to avoid impacts of restrictions on drug procurement and use. Common sources of information were social media and online forums or fact sheets.
- Participants were asked about changing a range of behaviours explicitly to reduce COVID-19 transmission risk or impacts of restrictions when using or acquiring drugs. Most commonly endorsed responses include:

Washed hands with soap/sanitiser before handling drugs/money



Avoiding sharing drug use equipment (e.g. pipes, bongs)



Stocked up on illicit/non-prescribed drugs



Conclusions

- Most participants in the Northern Territory reported no change or a decrease in their illicit drug use since COVID-19 restrictions compared to before March 2020, although changes in use varied by drug. Perceptions of illicit drug availability were mostly that it had become more difficult.
- Participants reported varying impacts on mental health, and most had engaged in some precautions to reduce the risk of COVID-19 transmission while using drugs or avoid impacts of restrictions on drug use.
- It is critical to continue to monitor impacts, particularly amongst those populations who report more regular or dependent use of drugs (e.g., through the [Illicit Drug Reporting System](#) and [SuperMIX](#) interviews with people who regularly inject drugs).
- More extensive findings on COVID-19 impacts will be reported in future outputs from the project.

References

1. Dietze, P. & Peacock, A. (2020). [Illicit drug use and harms in Australia in the context of COVID-19 and associated restrictions: anticipated consequences and initial responses](#). Drug and Alcohol Review.
2. Dunlop, A., et al (2020). [Challenges in maintaining treatment services for people who use drugs during the COVID-19 pandemic](#). Harm Reduction Journal, 17, 1-7.
3. Peacock, A., Karlsson, A., Uporova, J., Gibbs, D., Swanton, R., Kelly, G., Price, O., Bruno, R., Dietze, P., Lenton, S., Salom, C., Degenhardt, L., & Farrell, M. (2019). [Ecstasy and Related Drugs Reporting System \(EDRS\) Interviews: Background and Methods](#). Sydney, National Drug and Alcohol Research Centre, UNSW Sydney.

Participating Researchers and Research Centres

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