

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

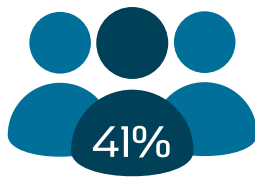
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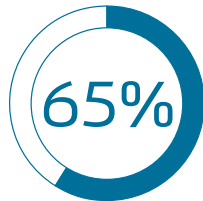
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## Key findings from the NSW sample:

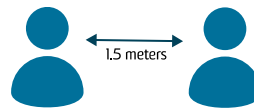
### COVID-19 BEHAVIOURS



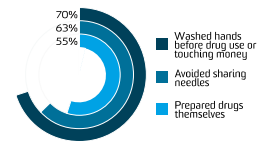
Two-in-five (41%) of the 2020 IDRS sample reported getting tested for COVID-19.



In the sample, 65% were worried about getting COVID-19.



The majority (94%) reported that they had practiced social distancing since March.

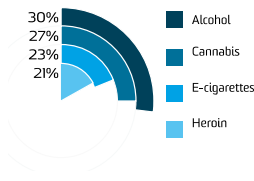


Harm reduction behaviours relating to COVID-19.

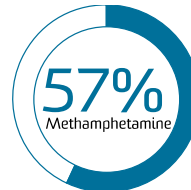
### CHANGES IN DRUG USE DURING COVID-19



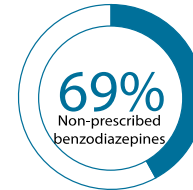
One-fifth (20%) of the entire sample reported a decrease in injecting frequency compared to before COVID-19 restrictions.



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

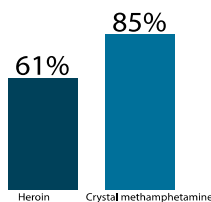


Methamphetamine was the most frequently endorsed drug that decreased in use (i.e. used less or stopped using) since COVID-19 restrictions.

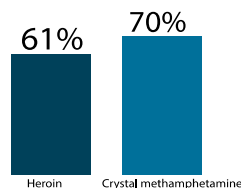


Non-prescribed benzodiazepines was the drug most frequently endorsed as no change in use since COVID-19 restrictions.

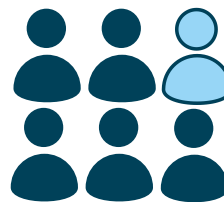
### CHANGES IN DRUG MARKETS AND TREATMENT



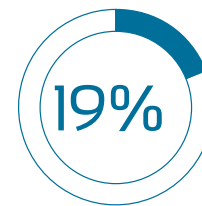
The majority of participants reported an increase in price for heroin and crystal methamphetamine.



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



One-in-six (15%) reported difficulties accessing sterile needles and syringes since COVID-19.



One-fifth of those in treatment since March (19%) reported any disruption to their drug treatment since COVID-19.

## 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].
- 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 [Illicit Drug Reporting System \(IDRS\)](#) 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 155 participants recruited in New South Wales from 24 June to 30 August 2020 (6 participants in June, 49 in July, 100 in August).

## Method

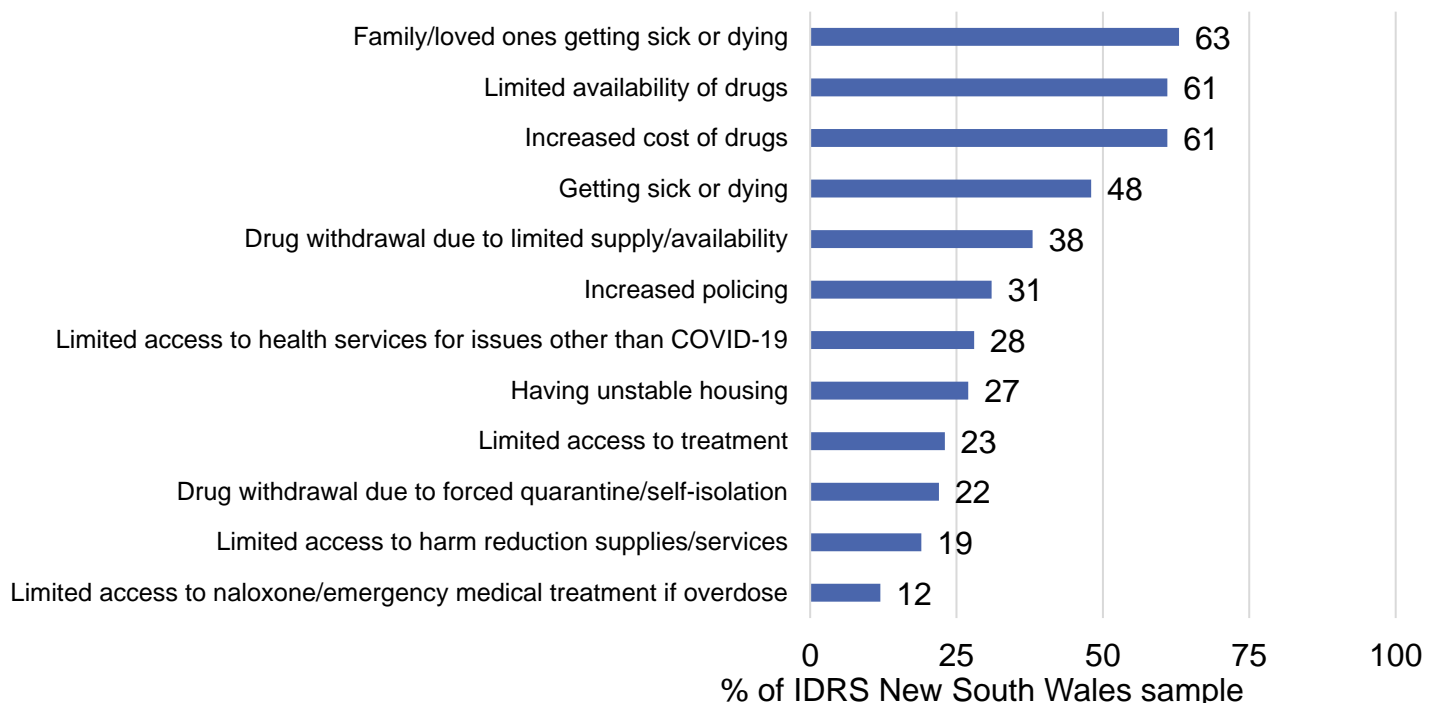
- IDRS interviews are conducted with a sentinel sample of people aged 18 or older who have injected drugs at least once monthly in the preceding six months and resided in Sydney, New South Wales for the last 12 months.
- Participants are recruited via advertisements in needle syringe programs and other 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) and participants were reimbursed electronically to manage risk of COVID-19 transmission.
- 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  $\leq 5$  participants report an outcome to protect confidentiality.
- The NSW IDRS sample were demographically similar to those recruited in 2019 and in earlier years, being mostly male (61%) with a median age of 44 years (IQR 39-50).

## Findings

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

- 41% said they had been tested for COVID-19. None had been diagnosed with COVID-19.
- 65% said they were currently worried about getting COVID-19.
- At the time of the interview, 94% reported they had been social distancing, 83% reported home isolation, and  $\leq 5$  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 (63% of the sample) or they themselves becoming unwell (48%; **Figure 1**).
- Issues related to drug markets (e.g., increased cost, limited availability of illicit drugs), as well as concern about drug withdrawal due to limited supply, were commonly cited.

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



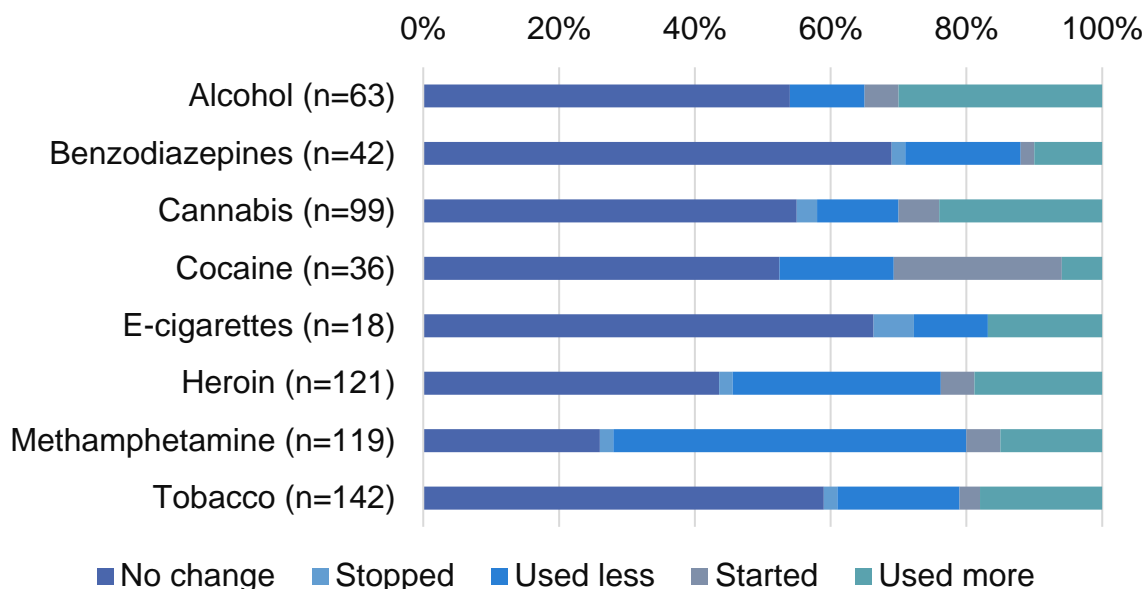
### Social impacts of COVID-19 and associated restrictions

- More than two-in-five (45%) reported that the income they received in the month prior to interview was more than what they earned in February 2020, 6% said less, and 49% said a similar amount.
- One-in-twenty (5%) reported that they had been given new shelter/short term housing or put up in a hotel since March.
- When asked about financial difficulties they had experienced in the four weeks prior to interview, 43% reported being unable to buy food or going without meals, while approximately one-third reported being unable to pay household/phone bills on time, asking for financial help from friends/family, and asking for help from welfare/community organisations (37%, 36% and 28%, respectively).

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

- One-third (32%) reported injecting at a different frequency during the last month compared to the month of February 2020. Of these, 62% reported a decrease in injecting frequency (20% 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.
- 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 commonly reported no change in use of each drug (**Figure 2**). The notable exceptions were heroin (19% used more, 31% used less) and methamphetamine (52% used less), 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.**

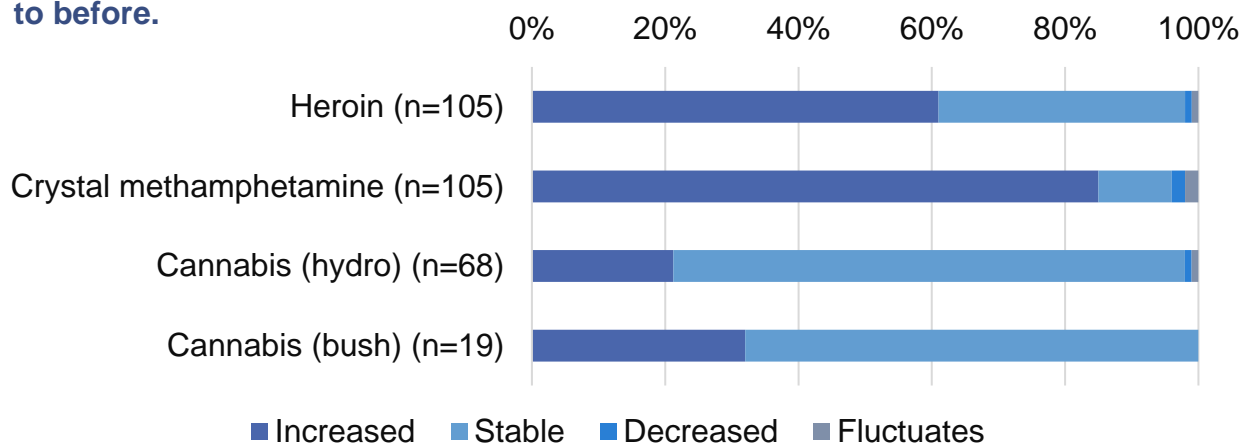


Note. Estimates reflect reports on non-prescribed use for pharmaceutical medicines .

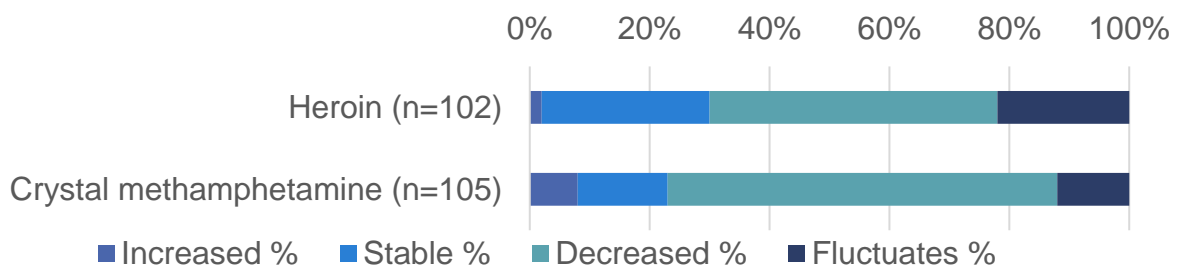
### Changes in drug markets with COVID-19 restrictions

- Participants who commented most commonly reported crystal methamphetamine and heroin as increased in price since the beginning of March 2020 compared to before (85% and 61%, respectively **Figure 3**). Price of cannabis was reported as stable.
- Two in three participants who commented said that the purity of crystal methamphetamine (65%) had declined since the beginning of March 2020 compared to before, and 48% reported a decline in the purity of heroin (**Figure 4**).
- Participants who commented most commonly reported availability of illicit drugs as more difficult, with 70% and 61% noting a decline in availability for crystal methamphetamine and heroin, respectively (**Figure 5**).

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

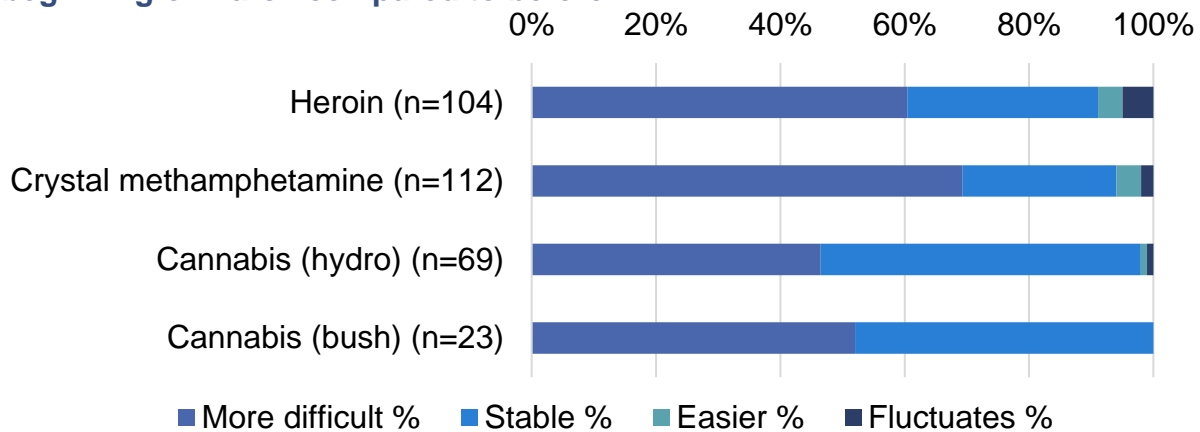


**Figure 4. Change in perceived purity of heroin and crystal methamphetamine since March 2020 compared to before.**



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 beginning of March compared to before.**

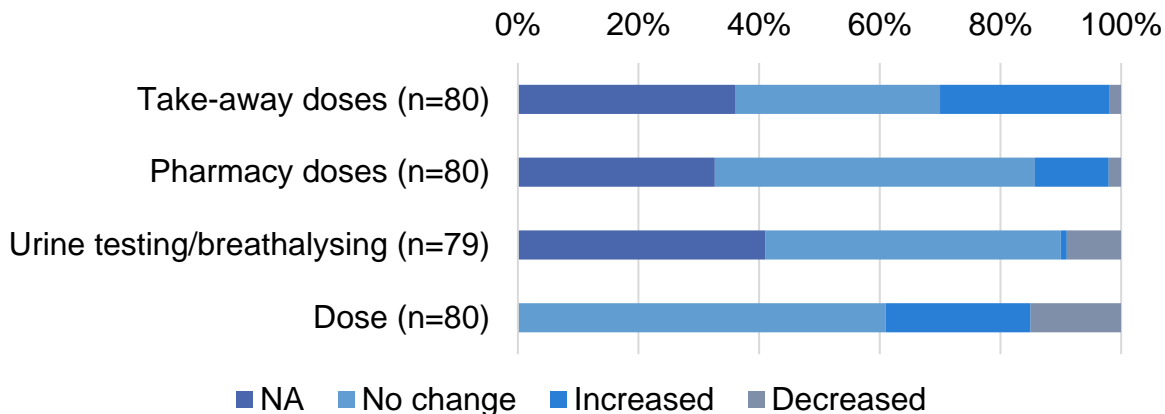


### *Changes in drug treatment and harm reduction service access*

- When asked about drug treatment in the past six months, 5% reported being in drug treatment before March, 8% since March, and 52% both before and since March.
- Of those in treatment since March (n=93), 54% reported any disruption to their drug treatment in that same period. Most commonly reported disruptions for those in treatment since March were appointments moving to phone/video rather than face-to-face (35%) and changed hours of service (26%).
- Of those who reported being on opioid agonist therapy (OAT) since March (n=80), 5% reported that they were put on a new treatment (split between starting methadone and starting buprenorphine-naloxone).
- In regard to changes in aspects of treatment since March, most reported that number of take-away doses, pharmacy doses and urine testing/breathalysing remained mostly stable. Over one-quarter (28%) reported an increase in take-away doses (Figure 6).
- Most reported that their satisfaction with their drug treatment was the same compared to before March (78%), while 12% said better and 10% said worse. Of those who did not report recent treatment (n=68), 21% reported difficulties accessing treatment in the past six months (19% since March 2020).
- One-in-seven (15%) reported difficulties accessing sterile needles and syringes since March. Of this group, 35% reported re-using their own needles more than normal as a result.
- 6% reported difficulties in safely disposing of used needles and syringes in a disposal unit since March.



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

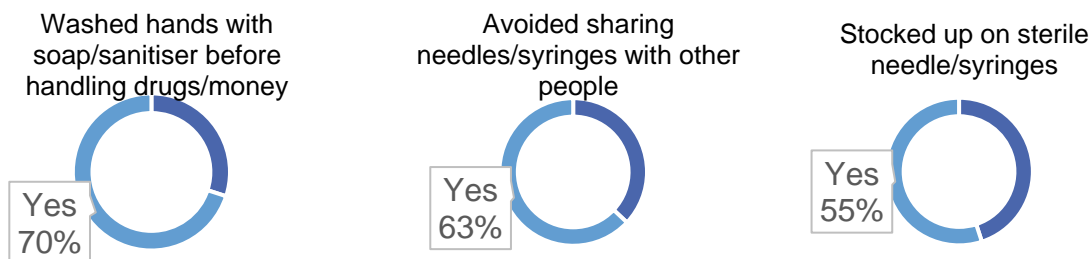


### Physical and mental health

- One-in-eight participants (12%) reported experiencing an accidental opioid overdose in the past 12 months (19% in the 2019 NSW sample for comparison).
- In 2020, 6% experienced an opioid overdose before March, ≤5 participants since March, and 5% both before and since March.
- Two-in-five participants (40%) reported accessing take-home naloxone during the past year (20% before March and 26% since March).
- Less than 5 participants reported difficulties accessing naloxone during the past year.
- 25% reported resuscitating someone with naloxone during the past year (15% before March and 10% since March).
- 14% reported an increase in reusing their own needles since March, while less than five participants reported an increase in any needle sharing (either receptive or distributive), as compared to the month of February.
- 17% reported that they injected alone more since March as compared to before.
- 51% reported experiencing withdrawal from any drug during the past year (3% before March, 19% since March and 29% both before and since March).
- When asked about their current physical health as compared to before March, 16% said it was better, 57% said similar, and 27% said worse.
- When asked about their current mental health as compared to before March, 20% said it was better, 45% said similar, and 35% 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 (70%), avoiding sharing needles/syringes with others (63%), stocking up on sterile needles/syringes (55%) and preparing the drugs themselves (55%).
- 37% 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 (13% from a harm reduction service, 10% from an online forum).



## Conclusions

- Most participants reported no change in their use of various drugs since COVID-19 restrictions compared to before March. Methamphetamine and heroin were the most commonly reported as decreased in use.
- Of those commenting, the majority reported crystal methamphetamine to have increased in price, with over half reporting purity of crystal methamphetamine had declined since the beginning of March compared to before. Perceived availability of methamphetamine was commonly reported as more difficult to obtain
- More than half of the participants reported a disruption to their drug treatment since March, but mostly in the mode of delivery (e.g., phone/video instead of face-to-face).
- Most participants engaged in some form of harm reduction behaviour 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.



## 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., 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.

## 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;
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## Other acknowledgements

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## Suggested citation

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