

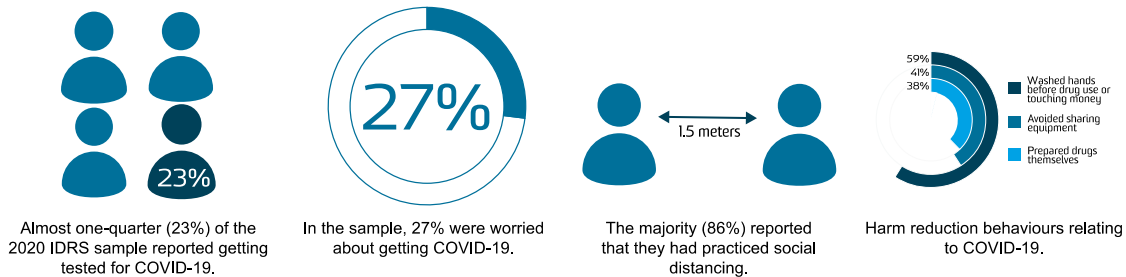
# Impact of COVID-19 and associated restrictions on people who inject drugs in Tasmania: Findings from the Illicit Drug Reporting System 2020

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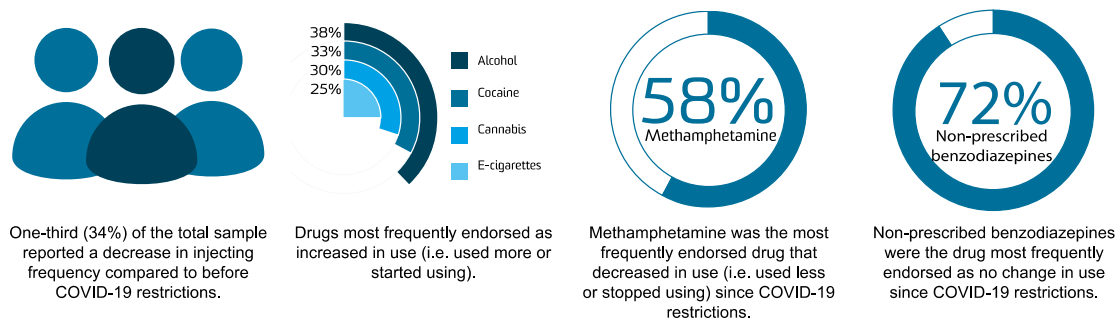
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## Key findings from the Tasmania sample:

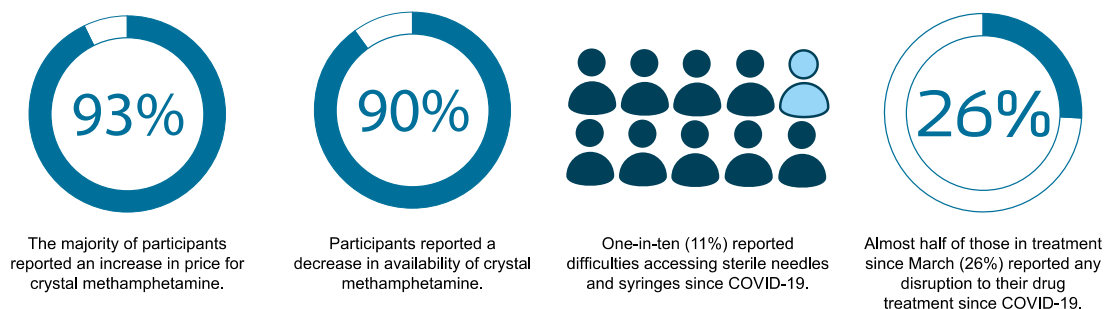
### COVID-19 BEHAVIOURS



### CHANGES IN DRUG USE DURING COVID-19



### CHANGES IN DRUG MARKETS AND TREATMENT



## 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 that are particularly heavily engaged in substance 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 74 participants recruited in Tasmania, from 2 July to 11 September 2020 (22 participants in July, 42 in August and 10 in September).

## Method

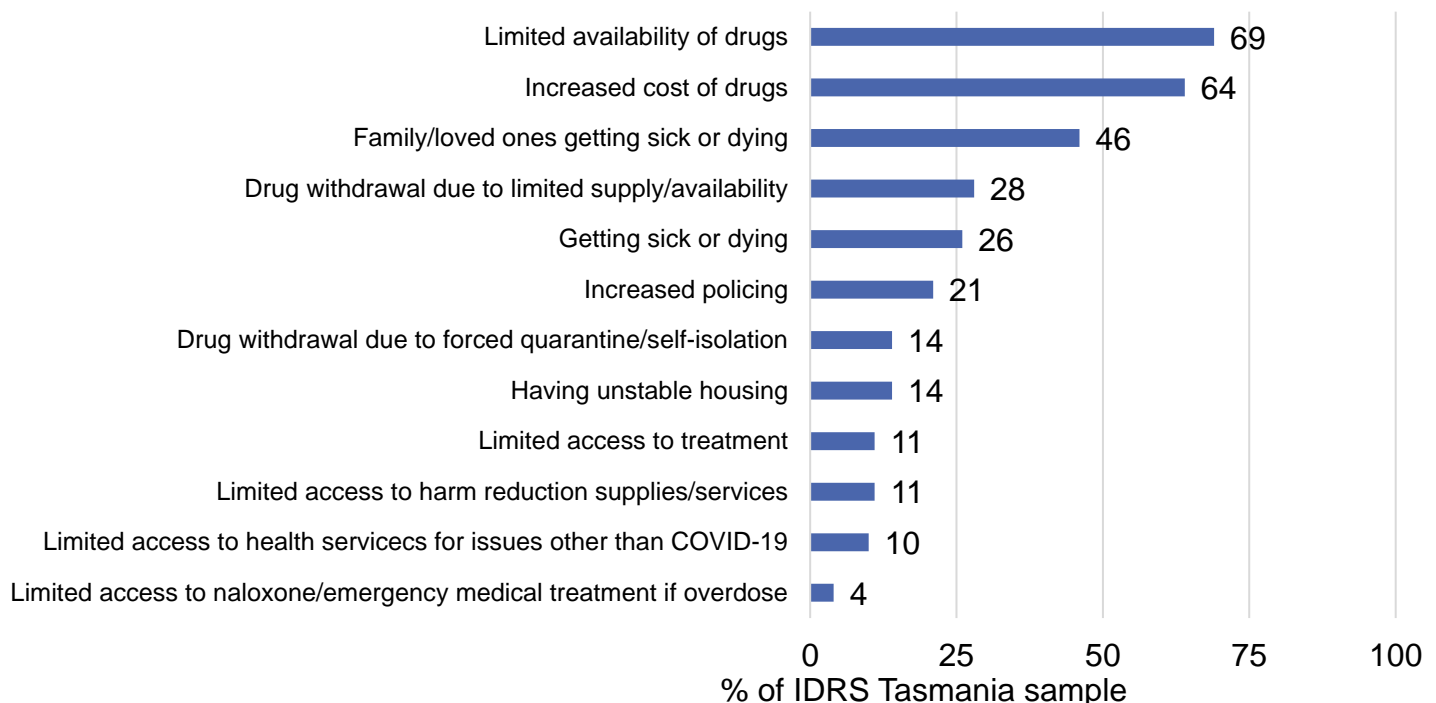
- IDRS interviews are conducted with a sentinel sample of people aged 18 or older who have injected drugs at least once monthly in the preceding six months and resided in Hobart, Tasmania for the last 12 months.
- Participants are recruited via advertisements in needle syringe programs and other harm 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, there were 28 interviews completed via phone and 46 face-to-face interviews. Participants who completed phone interviews 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 study protocol remained otherwise unchanged. Findings are suppressed where  $\leq 5$  participants report an outcome to protect confidentiality.
- The Tasmanian IDRS sample are demographically similar to those recruited in 2019 and in earlier years, being mostly male (78%) with a median age of 43 years (IQR 38 – 50; 40 years in 2019; IQR 34-46;  $p=0.014$ ). Note the IDRS sample in 2020 is smaller relative to 2019 (74 versus 99, respectively).

## Findings

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

- 23% said they had been tested for COVID-19. None had been diagnosed with COVID-19.
- 27% said they were currently worried about getting COVID-19.
- At the time of the interview, 86% reported they had been social distancing, 55% reported home isolation, and small numbers reported quarantine since March 2020 ( $\leq 5$ ).
- Participants reported a number of concerns related to the COVID-19 pandemic, namely around family or friends getting sick or dying (46% of the sample) or they themselves becoming unwell (26%; **Figure 1**).
- Issues related to drug markets (e.g., increased cost, limited availability of illicit drugs and associated withdrawal), as well as increased policing, were commonly cited.

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



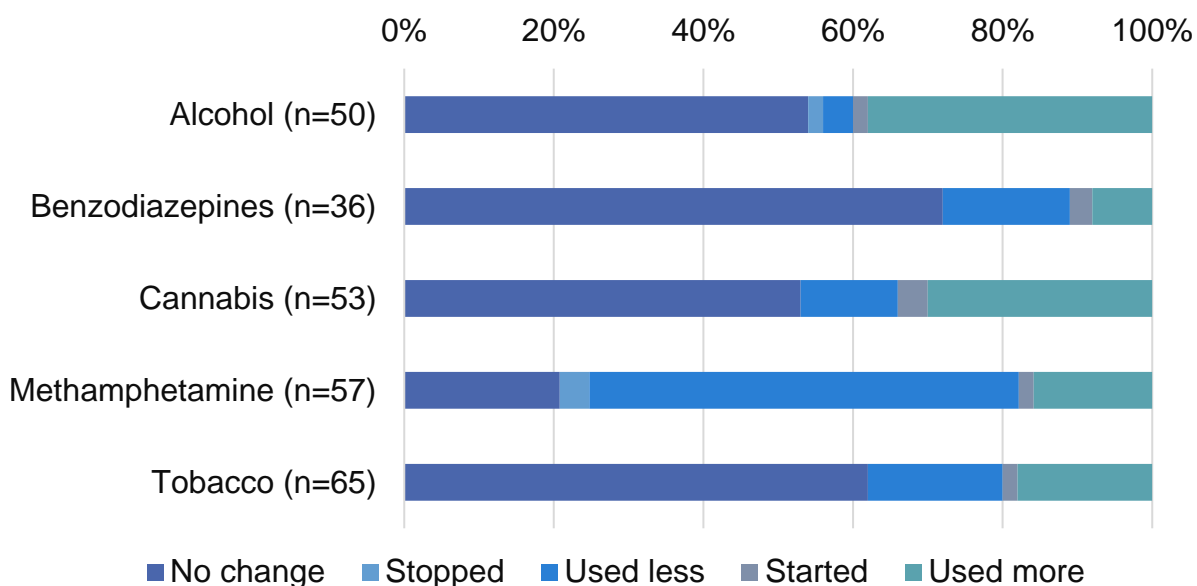
### Social impacts of COVID-19 and associated restrictions

- Just over one in twenty participants (7%) 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, 35% reported being unable to buy food or going without meals, while approximately one-third reported asking for financial help from friends/family, and being unable to pay household/phone bills on time (34% and 28% respectively).

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

- Two in five (42%) reported injecting at a different frequency during the last month compared to the month of February. Most of these individuals (81%) were injecting less often (34% of the total sample).
- One in five (19%) 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 reported no change in use of each drug, except for methamphetamine (58% reported a decrease in use) (Figure 2), with frequently cited reasons being that methamphetamine was more expensive or less available.

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

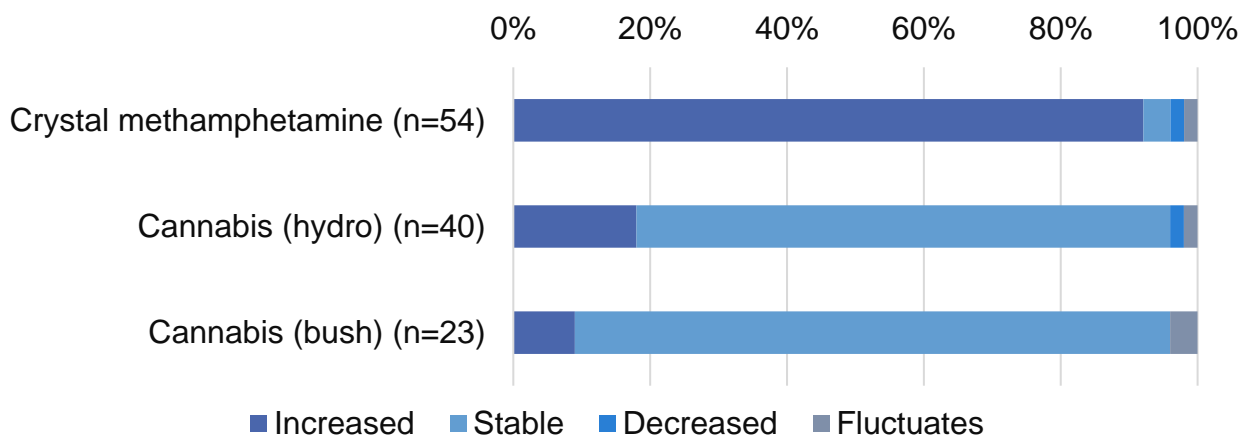


Note. Estimates reflect reports on non-prescribed use for pharmaceutical medicines .

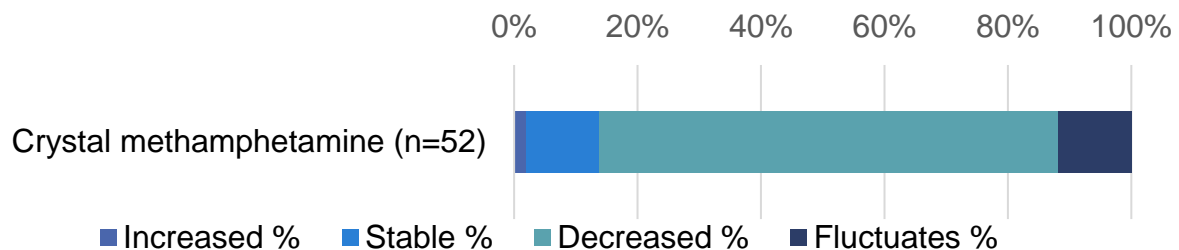
### Changes in drug markets with COVID-19 restrictions

- Participants who commented most commonly reported crystal methamphetamine as increased in price since the beginning of March compared to before (93%) (**Figure 3**). Price of cannabis was typically reported as stable.
- Three-quarters of participants who commented said that the purity of crystal methamphetamine had declined since the beginning of March compared to before (75%; **Figure 4**).
- Participants who commented mostly commonly reported a decline in the availability of crystal methamphetamine (90%; **Figure 5**).

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

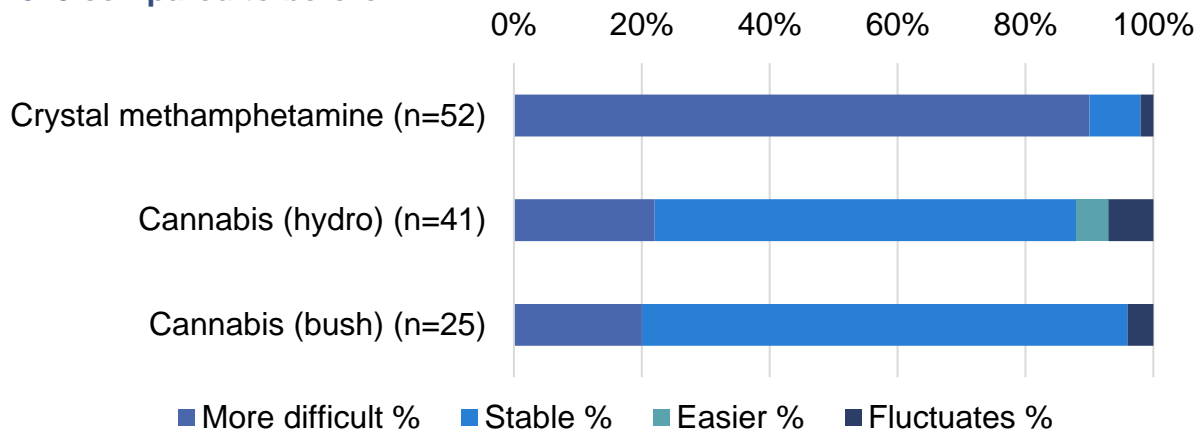


**Figure 4. Change in perceived purity of crystal methamphetamine since March 2020 compared to before.**



Note. Data were collected only for heroin and crystal methamphetamine, with small numbers (n≤5) reporting on heroin.

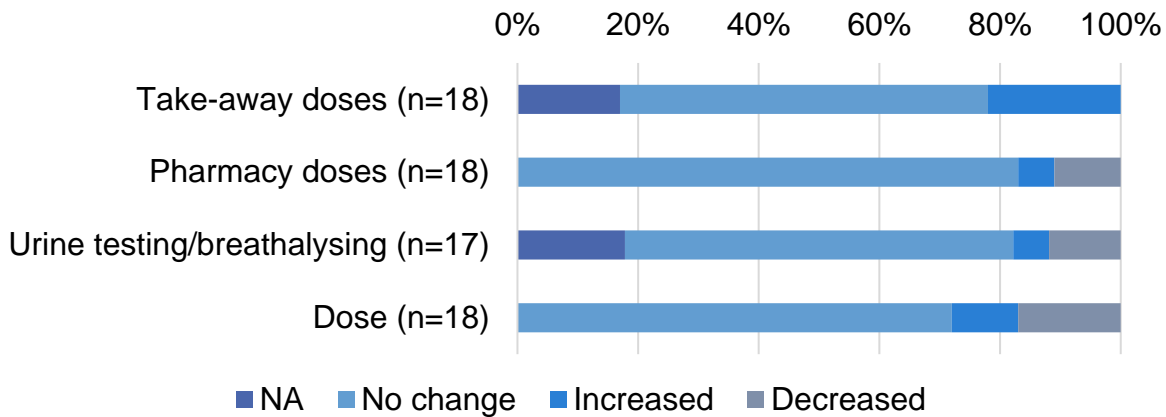
**Figure 5. Change in perceived availability of select illicit drugs since March 2020 compared to before.**



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

- When asked about drug treatment in the past six months, small numbers ( $\leq 5$ ) reported being in drug treatment before March only, 7% since March only, and 27% both before and since March.
- Of those in treatment since March ( $n=25$ ), 26% reported any disruption to their drug treatment in that same period. The most commonly reported disruption was that appointments had moved to phone/video rather than face-to-face (21%).
- Of those who reported being on opioid agonist therapy (OAT) since March ( $n=18$ ), small numbers ( $\leq 5$ ) reported that they were put on a new treatment.
- In regard to changes in aspects of treatment since March, most of those on OAT either did not have any takeaway doses (17%) or had no change in takeaway doses (61%). Most (83%) did not have any change in frequency to pharmacy dispensing of doses. Most participants reported that urine testing/breathalysing and dosage of medications remained mostly stable (**Figure 6**).
- Most reported that their satisfaction with their drug treatment was the same compared to before March (78%), while 11% said better and 11% said worse.
- Of those who did not report recent treatment ( $n=54$ ), 9% reported difficulties accessing treatment in the past six months (6% since March 2020).
- One-in-ten (11%) reported difficulties accessing sterile needles and syringes since March.
- Small numbers ( $\leq 5$ ) 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 as compared to before among those reporting recent OAT.**



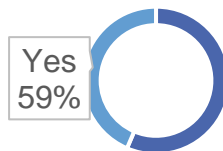
### *Physical and mental health*

- One-in-ten participants (9%) reported experiencing an accidental opioid overdose in the past 12 months (similar to the 10% among the 2019 sample for comparison).
- One-in-five participants (19%) reported accessing take-home naloxone during the past year (n=5 before March and 16% since March).
- 10% reported that they injected alone more since March as compared to before.
- 57% reported experiencing withdrawal from any drug during the past year (9% before March, 12% since March and 35% both before and since March).
- When asked about their current physical health as compared to before March, 16% said it was better, 59% said similar, and 25% said worse.
- When asked about their current mental health as compared to before March, 24% said it was better, 44% said similar, and 32% said worse.

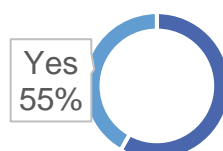
## Precautions to reduce risk of COVID-19 and impacts of restrictions

- 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 (59%), avoiding sharing needles/syringes with others (55%), avoiding sharing other drug use equipment ( e.g. pipes, bongs) with others (41%), and preparing their own drugs (38%).
- 23% 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 (10% received information from a harm reduction service and small numbers (n≤5) reported receiving information from any other source).

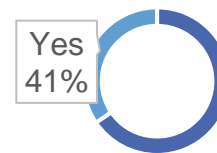
*Washed/sanitised hands before handling drugs/money*



*Avoided sharing needles/syringes with other people*



*Avoided sharing other drug use equipment*



## Conclusions

- A quarter of participants in Tasmania were concerned about contracting COVID-19 and a similar rate had been tested. Most participants had been social distancing in response to the virus.
- Many noted concerns about the impact of COVID-19 on local drug markets. Most saliently, approximately one third reported injecting less frequently and substantial proportions reported that methamphetamine in particular was less available, less potent, and higher cost than before the virus emerged.
- There is a need for education and support for practical behaviours that PWID can take to reduce their risks of COVID-19 infection during the process of drug use. Only a minority had sought such information or enacted particular strategies in this area.
- It is important to note that the IDRS only engages with a sentinel sample of people who are frequently injecting in Hobart, and that trends identified here do not generalise to all people who inject drugs nor the issues facing consumers across the whole state. In addition, these findings only relate to the short-term impacts of COVID-19 on consumers. We will be examining longer term impacts in future reports.



## References

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## Participating researchers and research centres

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