

THE ISSUE

The Australian response to COVID-19 is unprecedented in modern times. Changes to border controls, regulations around physical distancing and prohibitions on public gatherings are anticipated to have profound impacts on drug markets and people who use drugs.¹ Since 2008 the Burnet Institute has conducted the Melbourne Injecting Drug User Cohort Study (MIX) and its extension, SuperMIX, which involves annual interviews with a sample of around 1,300 people who inject drugs. This study provides a unique opportunity to compare information from participants collected before, during and after the COVID-19 restrictions to examine their impacts on people who use/inject drugs. We have also modified the SuperMIX questionnaire to collect additional information specific to COVID-19 restrictions. This Bulletin presents initial findings from analyses of these data that will be monitored and updated in coming weeks as further interviews are completed and additional impacts identified.

Methods

The Burnet Fieldwork Team conducted 60 interviews with SuperMIX members between March 29 (the date we started using the modified questionnaire) and May 1. Below, we present findings from COVID-specific questions and comparisons between data from these 60 interviews and 104 interviews conducted with different participants over the period Jan-Feb 2020 (before COVID-19 restrictions). These initial cross-sectional analyses will be supplemented by longitudinal analyses examining how COVID-19 has impacted on individuals over time.

INITIAL FINDINGS

Social impacts of COVID-19 restrictions to date

- 19% of those interviewed after March 29 (n=60) reported changes in employment, with most reporting losing working hours
- 95% of those interviewed after March 29 reported no changes in accommodation

Drug Use Impacts

Heroin: 75% of the total sample (n=164) reported heroin use since their last interview

- Of these participants, 80% of those interviewed after March 29 reported heroin use in the past month, a small decline from those interviewed pre-COVID (86%)
- No participants reported wanting to use heroin but not being able to

Methamphetamine: 50% of the cohort reported crystal methamphetamine use since their last interview

- Of these participants, 74% of those interviewed after March 29 reported crystal methamphetamine use in the past month, a small decline from the pre-COVID sample (81%)
- <5 participants reported wanting to use crystal methamphetamine but not being able to

Benzodiazepines: 57% of the cohort reported benzodiazepine use since their last interview

- Of these participants, 82% of those interviewed after March 29 reported benzodiazepine use in the past month, almost identical to the pre-COVID sample (84%)

Pregabalin: 30% of the cohort reported Pregabalin use since their last interview

- Of these people, 56% of those interviewed after March 29 reported Pregabalin use in the past month, less than the number observed pre-COVID (74%)

Alcohol: 48% of the cohort reported alcohol use since their last interview

- Around half of the sample reported consuming alcohol and this did not change over time. A small percentage (11%) reported increased frequency of alcohol consumption but there was no evidence of any substitution of other drugs with alcohol.

Smoking: 91% of the cohort report smoking tobacco

- 13% of these people reported smoking more as a result of COVID restrictions

Drug Purchasing Impacts

Heroin:

- 20% of those interviewed after 29 March indicated that they had wanted to purchase heroin in the last month but were unable to because of supply, financial and transport issues.
- Heroin prices remained stable, an estimated \$310 per gram after 29 March compared to \$307 per gram pre-COVID. However, there was wide variation in prices paid across both periods.
- 40% of those who purchased heroin after 29 March believed that the purity was weaker than normal.



Methamphetamine:

- Few people interviewed after 29 March indicated that they had difficulties purchasing methamphetamine.
- An apparent increase in methamphetamine prices, from an estimated \$320 per gram after 29 March compared to \$285 per gram pre-COVID was not statistically significant, reflecting the wide variation in prices paid across both periods.
- 47% of those who purchased after 29 March believed the purity was weaker than normal but 35% believed the purity was greater than normal.

Injecting Behaviour

Few participants (<5) interviewed after 29 March reported difficulties accessing injecting equipment

Injecting networks:

- Participants reported the percentage of their total number of injections that took place on their own. The average of these percentage was 45 for participants interviewed before COVID as well as those interviewed after March 29.
- 17% of those interviewed after 29 March reported injecting with fewer people as a result of COVID

Injecting frequency:

- A small number (10%) of those interviewed after 29 March reported a decrease in injecting frequency as a direct result of COVID restrictions

Treatment Impacts

Opioid Agonist Treatment (OAT):

- There was a non-significant decline in the number of participants reporting current OAT before (52%) and after (41%) COVID restrictions
- 10% of those on methadone interviewed after 29 March reported receiving more takeaway doses

Overall Impressions

- Most participants reported that there had been little impact of COVID-19 restrictions on their drug purchase and use patterns at this early stage.

CONCLUSION

While these data indicate only limited impacts of COVID-19 restrictions on drug use and related behaviours among the SuperMIX cohort, most apparent in relation to sourcing heroin, the number of interviews conducted to date is small. There was no clear evidence of drug substitution but some indication of increased alcohol and tobacco use by those interviewed after 29 March. Changes in reported prices paid for drugs and drug use patterns will continue to be monitored over time.

IMPLICATIONS

- Further monitoring is needed to assess the impact of COVID-19 restrictions on the cohort, particularly in relation to the impact of potential changes in illicit drug markets/supply, policy changes related to OAT, and the wider social and economic impacts on this cohort of vulnerable and marginalised people.

References

1. Dietze, P. & Peacock, A. (in press). Illicit drug use and harms in Australia in the context of COVID-19 and associated restrictions: anticipated consequences and initial responses. *Drug Alcohol Rev.*

Prepared by Paul Dietze, Lisa Maher and Mark Stoove and the Burnet Institute Fieldwork Team – 5 May 2020

For complete details, contact Professor Paul Dietze (paul.dietze@burnet.edu.au).