Queensland Drug Trends 2019: Key findings from the Illicit Drug Reporting System (IDRS) Interviews

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IDRS

QUEENSLAND DRUG TRENDS 2019

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KEY FINDINGS FROM THE ILLICIT DRUG REPORTING SYSTEM (IDRS) INTERVIEWS

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Please note that as with all statistical reports there is the potential for minor revisions to data in this report over its life. Please refer to the online version at Drug Trends.

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Research Team

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Contributors

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Abbreviations

ACT	Australian Capital Territory
AUDIT-C	Alcohol Use Disorders Identification Test-Consumption
CPR	Cardiopulmonary resuscitation
EDRS	Ecstasy and Related Drugs Reporting System
GP	General Practitioner
IDRS	Illicit Drug Reporting System
IQR	Interquartile range
N (or n)	Number of participants
NDARC	National Drug and Alcohol Research Centre
NPS	New psychoactive substances
NSP	Needle and syringe program(s)
NSW	New South Wales
OTC	Over-the-counter
QLD	Queensland
SD	Standard deviation
VIC	Victoria
WA	Western Australia

Executive summary

Sample Characteristics

The QLD IDRS sample in 2019 was predominantly male with a mean age of 40, consistent with the QLD profile in previous years. About half of the participants (51%) reported that methamphetamine was their drug of choice and 38% of the QLD sample said heroin was the drug they injected most often in the past month.

Heroin

Recent (i.e., past six month) use of heroin has remained relatively stable amongst the QLD sample since monitoring began in 2000. The percentage of QLD participants reporting recent use increased significantly from 45% in 2018 to 63% in 2019. Almost one third (29%) of recent consumers reported daily use of heroin in 2019. The median price for one gram of heroin ($350) was one of the lowest observed over the course of monitoring.

Methamphetamine

Recent use of any methamphetamine has fluctuated over the years, with 68% of participants reporting recent use in 2019. The most common form of methamphetamine used was crystal (used by 65% in 2019), and has remained the most common form of methamphetamine used in QLD since 2011. The median price per point reported for powder ($50) and crystal ($50) have remained stable for the past four years. The median price per gram of crystal was reported to be $300 and has remained stable for the past three years.

Cocaine

Recent use of cocaine was low but has remained stable for several years (10% in 2019), with a median frequency of use on three days in the past six months.

Cannabis

Recent use of cannabis has remained relatively stable over recent years, with 65% of QLD participants reporting recent use in 2019. Almost a third of recent consumers reported using cannabis daily (31%), and 100% of participants who have recently used cannabis reported smoking it.

Pharmaceutical Opioids

Use of all forms of pharmaceutical opioids has remained stable or significantly declined in Queensland since monitoring of each opioid began. In 2019, morphine was the most common pharmaceutical opioid used non-prescribed (28%), followed by buprenorphine-naloxone (22%) and oxycodone (20%).

Other Drugs

NPS use was uncommon - only used by 8% of QLD participants in 2019. Non-prescribed benzodiazepines were used by 35% of the QLD sample. Alcohol and tobacco use has remained consistently high over the period of monitoring, with 62% and 94% reporting recent use of alcohol and tobacco, respectively, in 2019. Of recent tobacco consumers, 87% reported daily use.

Drug-Related Harms and Other Risks

Just over one-quarter (27%) of the QLD sample in 2019 reported overdosing on any drug in the preceding year, most commonly heroin. Two-fifths (40%) of participants reported reusing their own needles. Furthermore, one in ten participants engaged in receptive sharing (9%) and just over one in ten engaged in distributive sharing (13%). Over half (58%) of QLD participants reported that they were currently in some form of drug treatment. Half (49%) the sample self-reported that they had experienced a mental health problem in the preceding six months. Rates of self-reported criminal activity remained stable, with the most common crimes engaged in including drug dealing (39%) and property crime (31%).

IDRS

QUEENSLAND 2019 SAMPLE CHARACTERISTICS

42 years   **67%**

85%

1 Heroin

2 Methamphetamine

3 OST drug

In 2019, 109 people from Queensland participated in IDRS interviews.
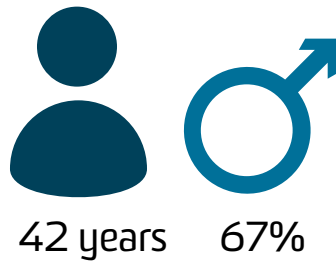
The mean age in 2019 was 42, and 67% identified as male.
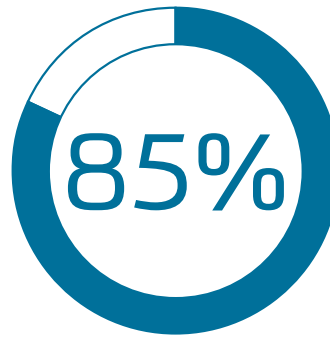
In the 2019 Queensland sample, 85% were unemployed.

The three most commonly injected drugs were heroin, methamphetamine, and opioid substituition therapy. drugs.

NALOXONE AND SEEKING HELP

21%   **27%**

2018   2019

58%

94%
69%
27%
27%

- Heard of naloxone
- Heard of take-home naloxone
- Trained in naloxone administration
- Heard of naloxone rescheduling
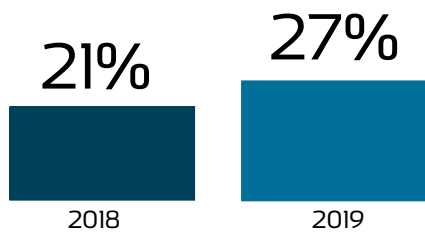
Non-fatal overdose in the previous 12 months remained stable at 27% (21% in 2018).
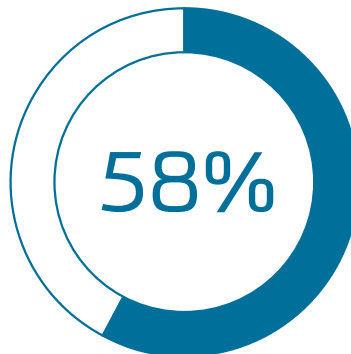
58% of IDRS participants reported that they were currently in drug treatment.
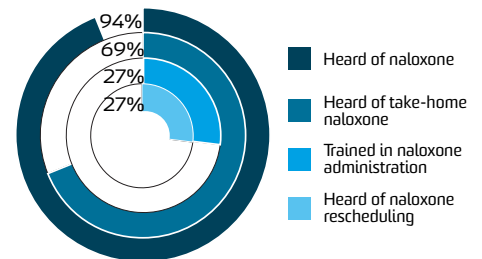
Queensland IDRS participant's knowledge of the take-home naloxone programe.

INJECTING RELATED RISKS AND HARMS

10%

13%

40%   **36%**

2018   2019

54%
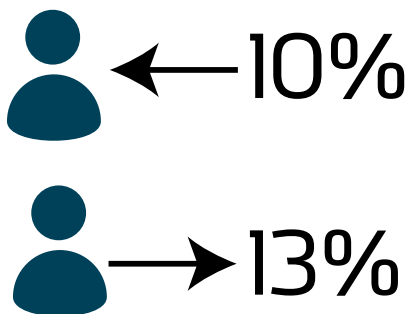
In 2019, 10% of the Queensland IDRS sample reported receptive needle sharing and 13% reported distributive needle sharing.
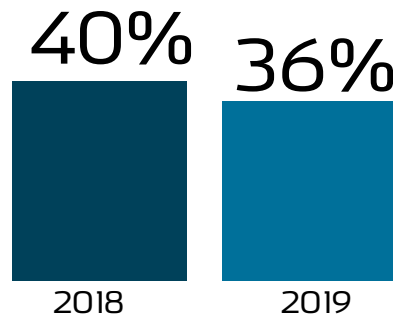
In 2019, just under two-fifths (36%) of the sample reported that they had re-used their own needles in the past month (40% in 2018).
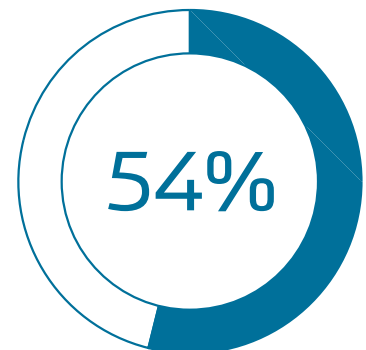
In 2019, over half (54%) of the Queensland sample reported having an injection-related health issue in the month preceding interview.

HEROIN

63%
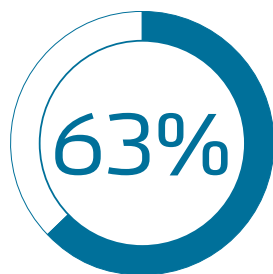
63% of Queensland IDRS participants reported using heroin in the past 6 months.

62%
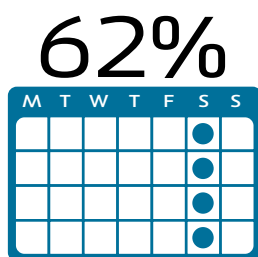
Of those who had recently consumed heroin, over three-fifths (62%) used it weekly or more.

78% 2018   86% 2019
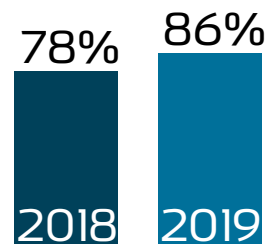
Of those who could comment 86% perceived heroin to be 'easy' or 'very easy' to obtain in 2019.

METHAMPHETAMINE

68% of Queensland 2019 IDRS participants reported past 6 month use of any methamphetamine.

20% Powder   65% Crystal
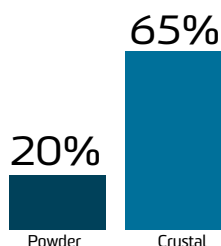
Of the entire sample, 20% had recently consumed powder, and 65% crystal methamphetamine.

97% Crystal   **100% Powder**
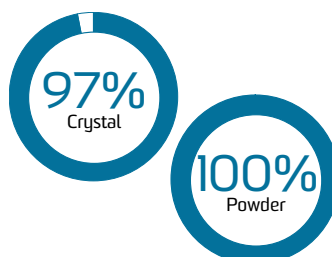
Injection was the main route of administration for crystal (97%) and powder (100%) among those who had consumed each form.

94%
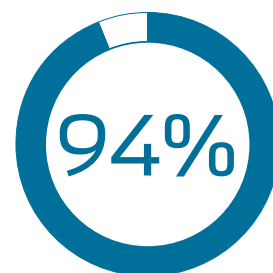
Of those who could comment 94% perceived crystal methamphetamine to be 'easy' or 'very easy' to obtain in 2019.

PHARMACEUTICAL OPIOIDS

28% 2018   29% 2019
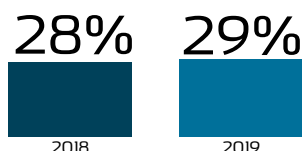
Past 6 month use of non-prescribed morphine was stable at 29% (28% in 2018)

19%
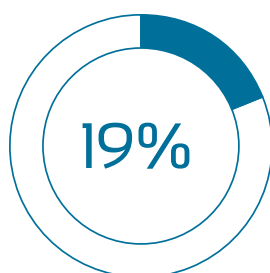
19% of Queensland IDRS participants reported using non-prescribed methodone in the past 6 months.

20%
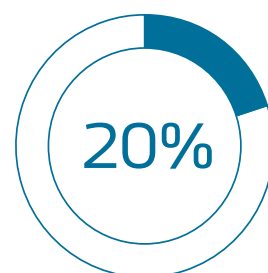
20% of Queensland IDRS participants reported using non-prescribed oxycodone in the past 6 months.

CANNABIS

Over two thirds (65%) of Queensland participants in the 2019 IDRS sample reported past 6 month use of cannabis.

61%
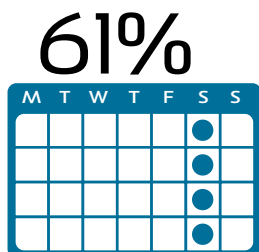
Of those who had consumed cannabis recently, 61% reported weekly or more frequent use.

100% Smoked

Of people who had consumed cannabis in the last 6 months, 100% had smoked it.

82% 2018   73% 2019
Hydro

78% 2018   62% 2019
Bush
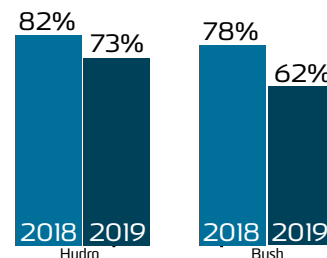
Of those who could comment, high percentages perceived bush and hydro to be 'easy' or 'very easy' to obtain.

Background

The [Illicit Drug Reporting System (IDRS)](#) is an ongoing illicit drug monitoring system which has been conducted in all states and territories of Australia since 2000, and forms part of [Drug Trends](#). The purpose of the IDRS is to provide a coordinated approach to monitoring the use, market features, and harms of illicit drugs.

The IDRS is designed to be sensitive to emerging trends, providing data in a timely manner, rather than describing issues in extensive detail. It does this by studying a range of data sources, including data from annual interviews with people who regularly inject drugs. This report focuses on the key results from the annual interview component of IDRS.

Methods

Full details of the [methods for the annual interviews](#) are available for download. To briefly summarise, participants were recruited using multiple methods (e.g., needle and syringe programs (NSP) and peer referral) and needed to: i) be at least 17 years of age (due to ethical requirements); ii) have injected at least monthly during the six months preceding interview; and iii) have been a resident for at least 12 months in the capital city in which they were interviewed. Following provision of informed consent and completion of a structured interview, participants were reimbursed $40 for their time and expenses incurred. A total of 902 participants were recruited across capital cities nationally (May-July 2019), with 109 participants interviewed in Brisbane and the Gold Coast, Queensland, during May-June 2019 (103 participants in 2018). About one-fifth (21%) of participants disclosed that they had participated in the QLD IDRS in 2018.

For normally distributed continuous variables, means and standard deviations (SD) are reported; for skewed data (i.e. skewness > ±1 or kurtosis > ±3), medians and interquartile ranges (IQR) are reported. Tests of statistical significance have been conducted between estimates for 2018 and 2019 and are reported when significance reaches $p<0.05$; **non-significant p-values are not reported**. Note that no corrections for multiple comparisons have been made and thus comparisons should be treated with caution. Values where cell sizes are ≤5 have been suppressed with corresponding notation ('-' has been used to denote this).

Interpretation of Findings

Caveats to interpretation of findings are discussed more completely in the [methods for the annual interviews](#) but it should be noted that these data are from participants recruited in capital cities, and thus do not reflect trends in regional and remote areas. Further, the results are not representative of all people who consume illicit drugs, nor of illicit drug use in the general population, but rather intended to provide evidence indicative of emerging issues that warrant further monitoring.

This report covers a subset of items asked of participants and does not include jurisdictional-level results beyond estimates of recent use of various substances, nor does it include implications of findings. These findings should be interpreted alongside analyses of other data sources for a more complete profile of emerging trends in illicit drug use, market features, and harms in Queensland (see section on 'Additional Outputs' below for details of other outputs providing such profiles).

Additional Outputs

[Infographics](#) from this report are available for download. There is a range of outputs from the IDRS triangulating key results from the annual interviews and other data sources and considering the implications of these findings, including [jurisdictional reports](#), [bulletins](#), and other resources available via the [Drug Trends webpage](#). This includes results from the [Ecstasy and Related Drugs Reporting System (EDRS)](#), which focuses on the use of ecstasy and other stimulants.

Please contact the research team at drugtrends@unsw.edu.au with any queries, to request additional analyses using these data, or to discuss the possibility of including items in future interviews.

1

Sample Characteristics

In 2019, the IDRS sample in QLD was predominantly male (67%) with a mean age of 42 (SD=10) (Table 1). The majority of the sample were unemployed (85%), with 87% reporting a government pension as their major source of income, although 61% reported having obtained a post-school qualification(s). Approximately 17% reported living in unstable accommodation (i.e., boarding house/hostel, shelter/refuge, or no fixed address) (Table 1).

Over half of participants in 2019 (51%) reported heroin as their drug of choice, while about a quarter (26%) reported methamphetamine as their drug of choice; whereas both drugs were endorsed by 39% of participants as their drug of choice in 2018 (Figure 1). These changes approached statistical significance (p=0.089 and 0.057 respectively).

For the first year since 2014, heroin was reported as the drug most often injected in the previous month (38%; compared to 24% in 2018; p=0.024), followed by methamphetamine (36%; compared to 40% in 2018) (Figure 2).

Table 1: Demographic characteristics of the sample, nationally and Queensland, 2015-2019

	National	Queensland				
	2019	**2019**	2018	2017	2016	2015
	N=902	**N=109**	N=103	N=103	N=91	N=98
Mean age (years; SD)	44 (9)	**42 (10)**	42 (9)	43	41 (8)	41 (10)
% Male	68	**67**	69	75	74	67
% Aboriginal and/or Torres Strait Islander	22*	**13**	17	16	19	7
% Sexual identity						
Heterosexual	87	**86**	85	85	88	93
Homosexual	3	**-**	-	-	-	-
Bisexual	8	**9**	13	12	8	-
Other	1	**-**	0	-	-	-
Median grade at school completed (IQR)	10 (9-11)	**10 (9-11)**	10 (9-11)	10 (9-12)	10 (9-11)	10 (9-11)
% Completed trade/tech qualification	57^	**50**	37	47	54	51
% Completed university/college		**13**	6	9	6	6
% Accommodation						
Own home (incl.. renting)~	70	**75**	58	61	56	72
Parents'/family home	6	**8**	7	-	7	7
Boarding house/hostel	6	**6**	15	13	14	8
Shelter/refuge	2	**-**	-	-	-	-
No fixed address	9	**10**	18	18	12	7
Other	-	**0**	0	-	8	-
% Employment status						
Unemployed	88	**85**	83	84	84	78
Full-time work	1	**-**	-	-	-	-
% Gov't pension, allowance or benefit main income source	89	**87**	91	85	92	85
Median income/week ($; IQR)	350 (275-450)	**323 (267-450)**	385 (295-475)	400 (310-475)	371 (290-475)	350 (278-450)

Note. ^Includes trade/technical and university qualifications. ~ Includes private rental and public housing. - Values suppressed due to small cell size (n≤5 but not 0). / denotes that this item was not asked in these years. *$p<0.050$; **$p<0.010$; ***$p<0.001$ for 2018 versus 2019.

Figure 1: Drug of choice, Queensland, 2000-2019
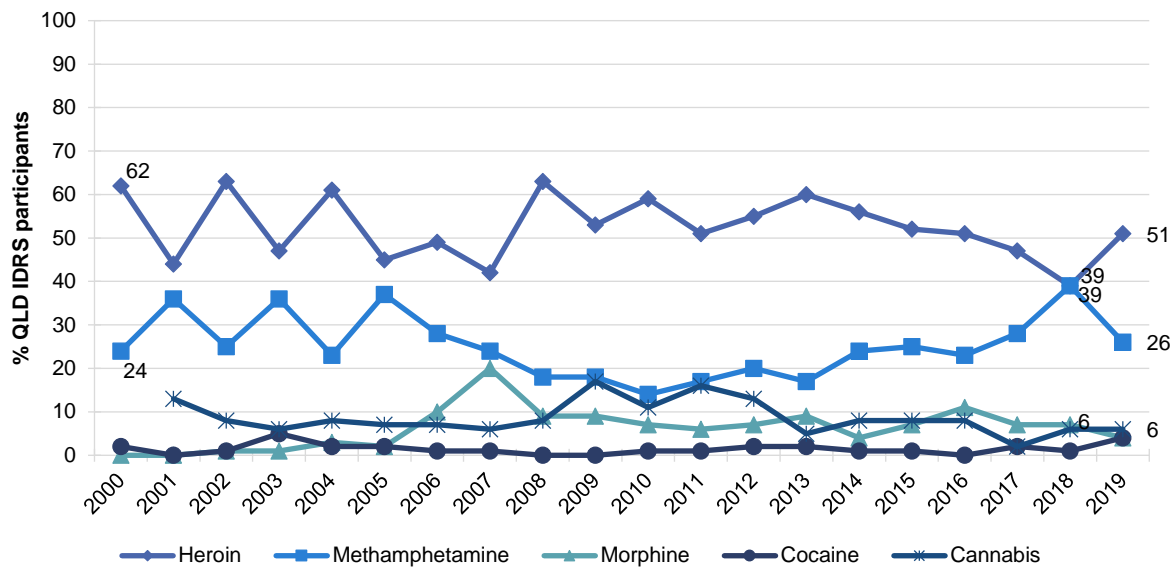
Note. Substances listed in this figure are the primary endorsed; nominal percentages have endorsed other substances. Data labels have been removed from figures with small cell size (i.e. n≤5 but not 0). *p<0.050; **p<0.010; ***p<0.001 for 2018 versus 2019.

Figure 2: Drug injected most often in the past month Queensland, 2000-2019
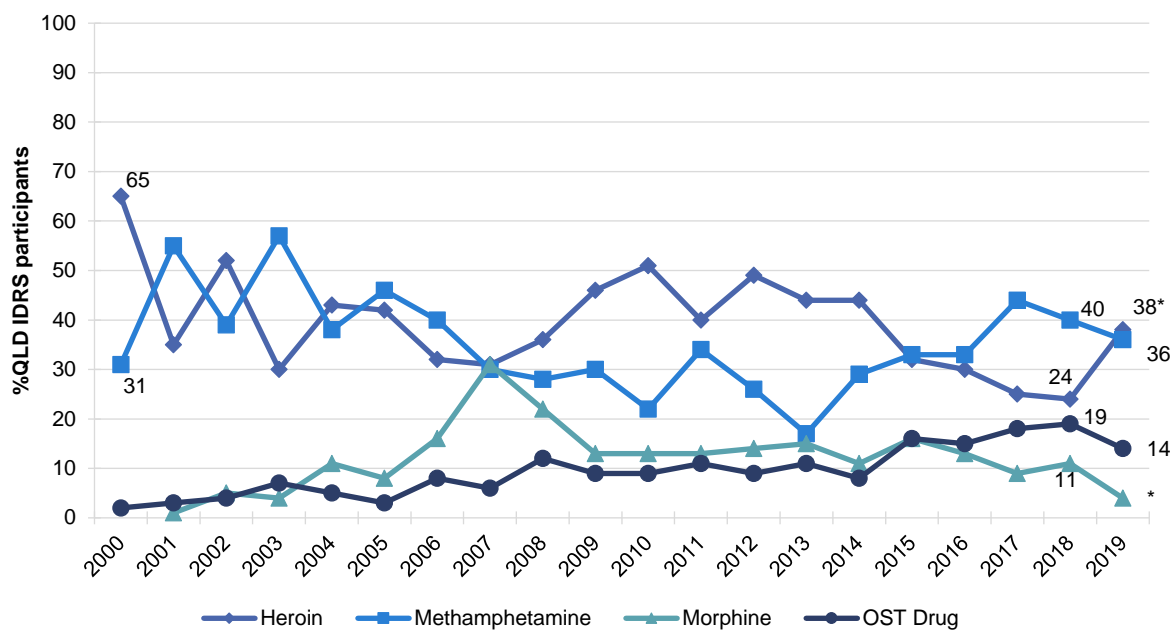
Note. OST: opioid substitution therapy, including methadone, buprenorphine and buprenorphine-naloxone. Substances listed in this figure are the primary endorsed; nominal percentages have endorsed other substances. Data labels have been removed from figures with small cell size (i.e. n≤5 but not 0). *p<0.050; **p<0.010; ***p<0.001 for 2018 versus 2019.

Figure 3: Weekly or more frequent substance use in the past six months, Queensland, 2000-2019
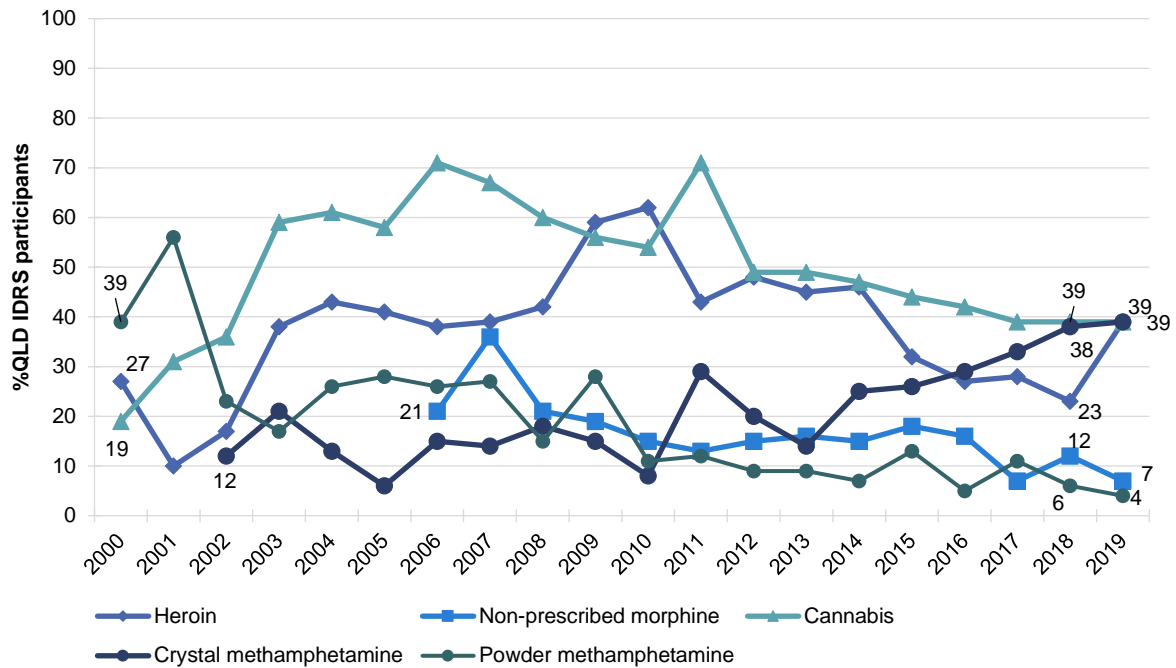
Note. These figures are of the entire sample. Data labels have been removed from figures with small cell size (i.e. n≤5 but not 0).
*$p<0.050$; **$p<0.010$; ***$p<0.001$ for 2018 versus 2019.

2

Heroin

Participants were asked about their recent (past six month) use of heroin (including homebake). Participants typically describe heroin as white/off-white rock, brown/beige rock or white/off-white powder. Homebake is a form of heroin made from pharmaceutical products and involves the extraction of diamorphine from pharmaceutical opioids such as codeine and morphine.

Patterns of Consumption

Recent Use (past 6 months): 63% of the total sample reported recently using heroin, the highest proportion recorded since 2014 (66%). This represents a significant increase from the proportion reporting recent using in 2018 (45%, p=0.006) (Figure 4).

Frequency of Use: Among those with recent use of heroin, 29% reported daily use in 2019 (higher than the 13% in 2018, p=0.005). The median number of days used in the last six months in 2019 was 48 (IQR=6-180), equivalent to approximately twice a week 2019, but not statistically more than the 24 days (IQR=6-72) in 2018 (p=0.267) (Figure 4).

Routes of Administration: All participants who had recently used heroin reported injecting it, consistent with 2018. A small number (n≤5) also reported smoking it in the last 6 months

Quantity: The median amount used by participants in a typical session was 0.2 grams (IQR=0.1-0.5), consistent with 2018 (median = 0.2, IQR = 0.1-0.25).

Figure 4: Past six month use and frequency of use of heroin, Queensland, 2000-2019
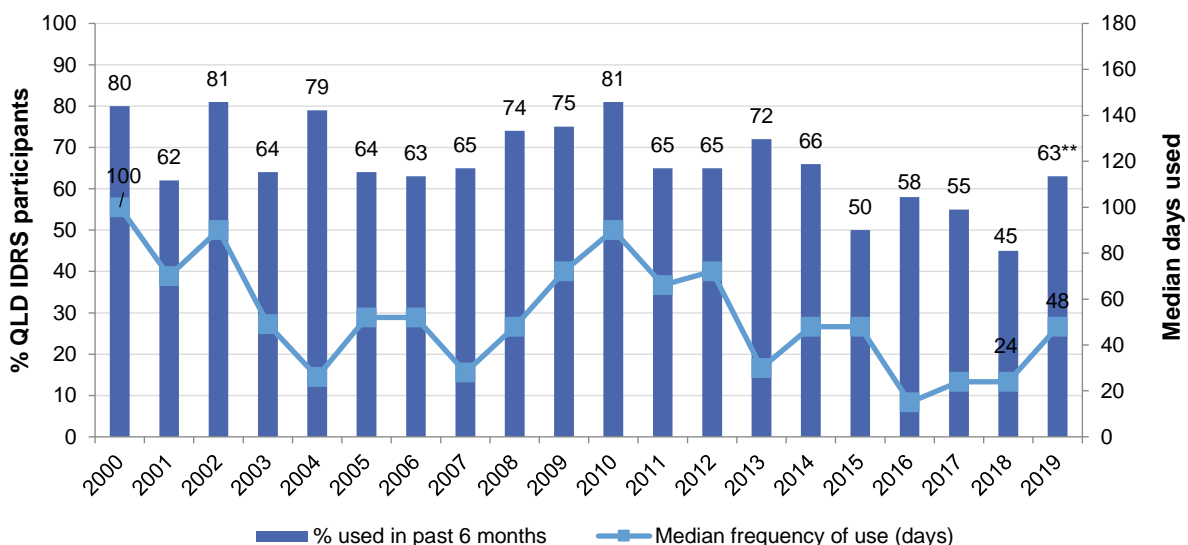
Note. Median days computed among those who reported recent use (maximum 180 days). Median days rounded to the nearest whole number. Data labels have been removed from figures with small cell size (i.e. n≤5 but not 0). *p<0.050; **p<0.010; ***p<0.001 for 2018 versus 2019.

Market Trends

Price: The median price per cap/point of heroin in 2019 was $50 (IQR=$50-100, n=38); the median price per gram was $350 (IQR=$350-420, n=13) (Figure 5).

Perceived Purity: Among those who were able to comment in 2019 (n=64), perceived purity was varied with 23% perceiving it as 'high', 25% as 'medium' and 31% as low; compared to 2018: 5% 'high', 46% 'medium', and '39%' low (Figure 6).

Perceived Availability: Among those who were able to comment in 2019 (n=65), 43% each reported that heroin was either 'very easy' or 'easy' to obtain, compared to 24% and 54% respectively in 2018 (Figure 7, see following page).

Figure 5: Median price of heroin per cap and gram, Queensland, 2000-2019
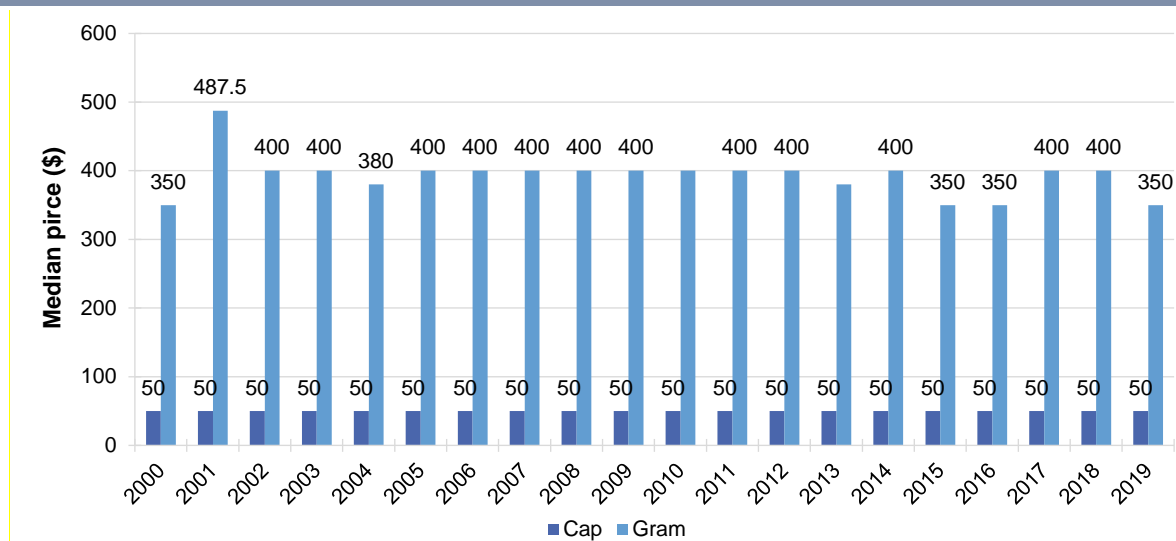
Note. Among those who commented. Price for a gram of heroin was not collected in 2000. Data labels have been removed from figures with small cell size (i.e. n≤5 but not 0). *p<0.050; **p<0.010; ***p<0.001 for 2018 versus 2019.

Figure 6: Current perceived purity of heroin, Queensland, 2000-2019
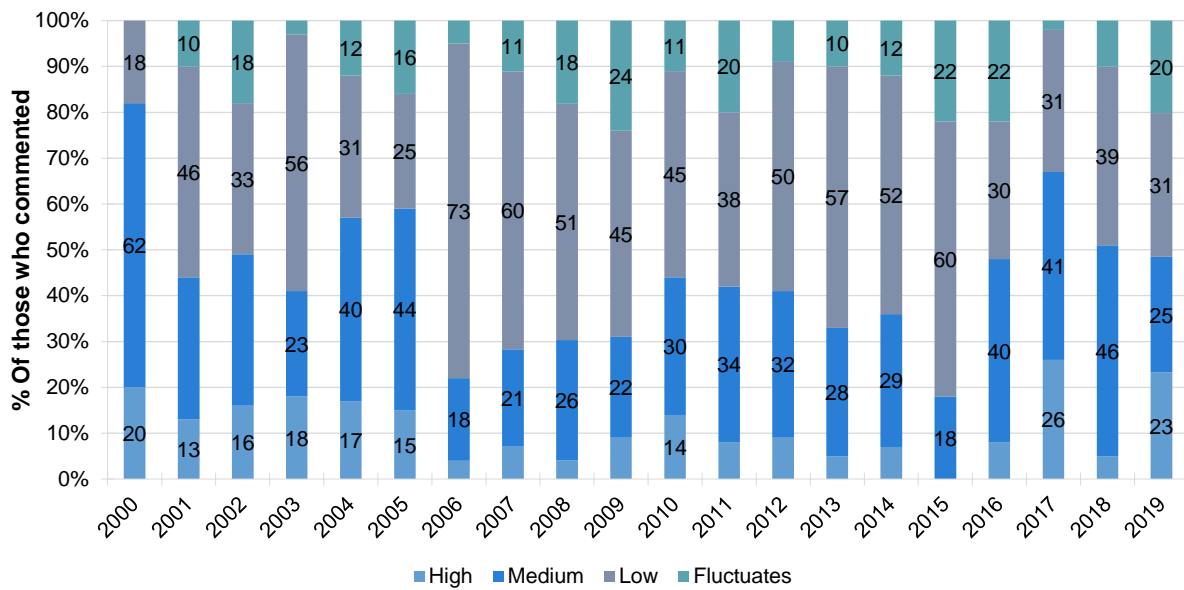
Note. The response 'Don't know' was excluded from analysis. Data labels have been removed from figures with small cell size (i.e. n≤5 but not 0). *$p<0.050$; **$p<0.010$; ***$p<0.001$ for 2018 versus 2019.

Figure 7: Current perceived availability of heroin, Queensland, 2000-2019
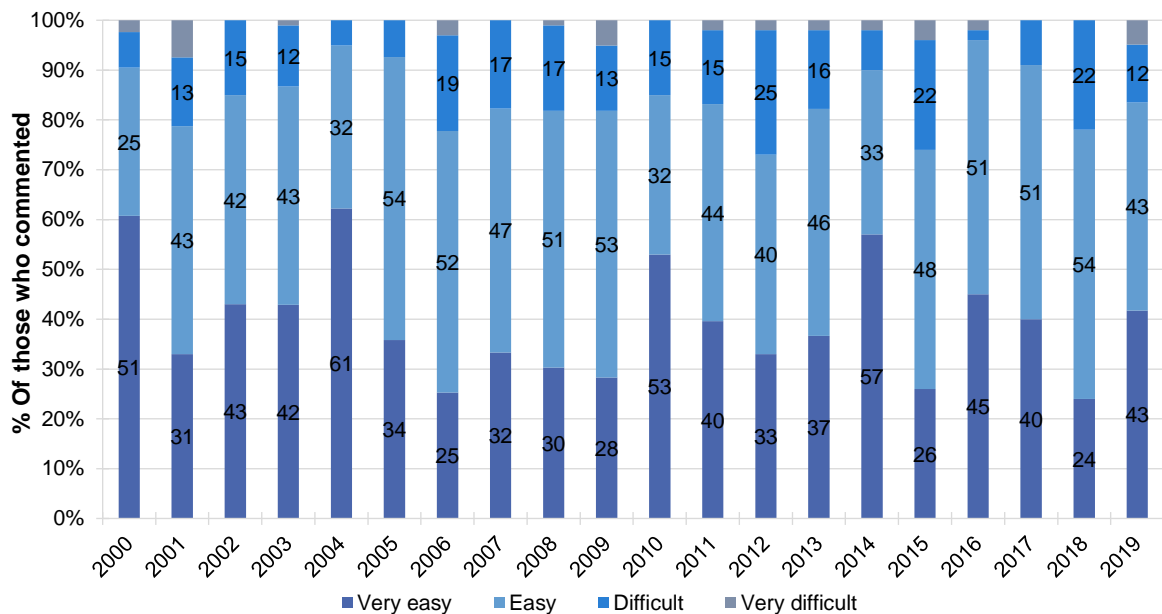
Note. The response 'Don't know' was excluded from analysis. Data labels have been removed from figures with small cell size (i.e. n≤5 but not 0). *$p<0.050$; **$p<0.010$; ***$p<0.001$ for 2018 versus 2019.

3

Methamphetamine

Participants were asked about their recent (past six month) use of various forms of methamphetamine, including powder (white particles, described as speed), base (wet, oily powder), crystal (clear, ice-like crystals), and liquid.

Recent Use (past 6 months)

In 2019, 68% of participants reported recent use of any methamphetamine (powder, base and crystal), compared to 72% in 2018 (Figure 8, see following page).

Frequency of Use

In 2019, frequency of use increased marginally to a median of 42 days (IQR=10-98, n=73; 30 days in 2018, IQR=10-90, n=73) (Figure 9). The proportion of people reporting weekly or more frequent use (of those who had recently used any methamphetamine) also remained stable compared to 2018 (67% versus 59% in 2018) (Figure 9, see following page).

Forms of Methamphetamine

Of those who had used methamphetamine in the six months preceding interview in 2019 (n=74), 96% used crystal methamphetamine (97% in 2018), followed by powder (30%; 47% in 2018; p=0.028) and base (23%; 19% in 2018).

Figure 8: Past six month use of methamphetamine forms, Queensland, 2000-2019
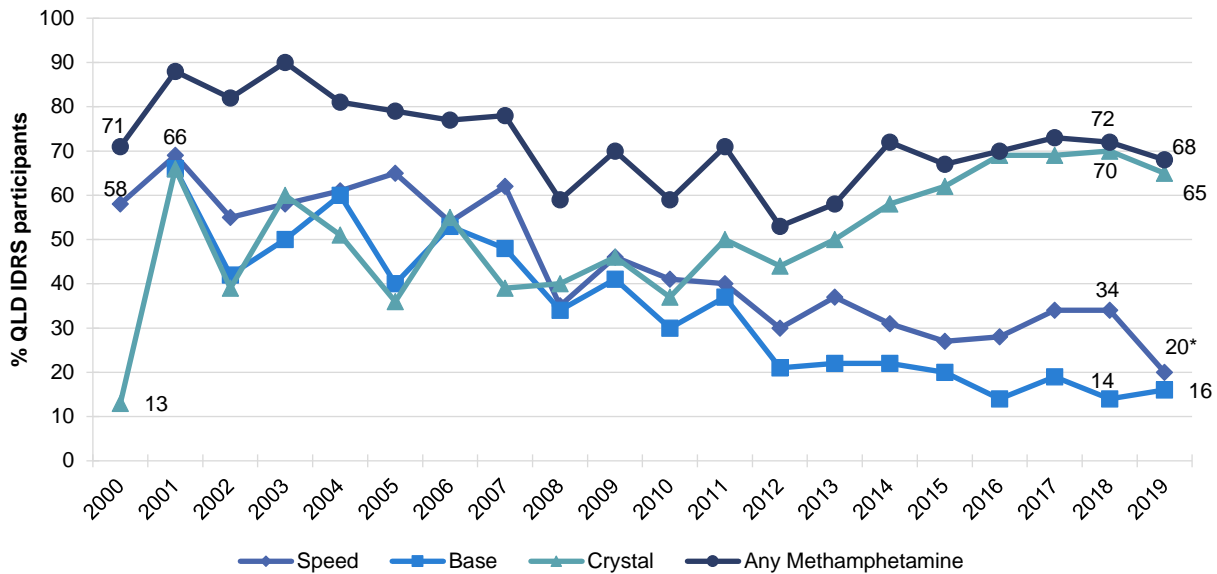
Note. Base asked separately from 2001 onwards. 'Any methamphetamine' includes crystal, powder, base and liquid methamphetamine combined. Figures for liquid not reported historically due to small numbers. Data labels have been removed from figures with small cell size (i.e. n≤5 but not 0). *$p<0.050$; **$p<0.010$; ***$p<0.001$ for 2018 versus 2019.

Figure 9: Frequency of use of methamphetamine forms, Queensland, 2000-2019
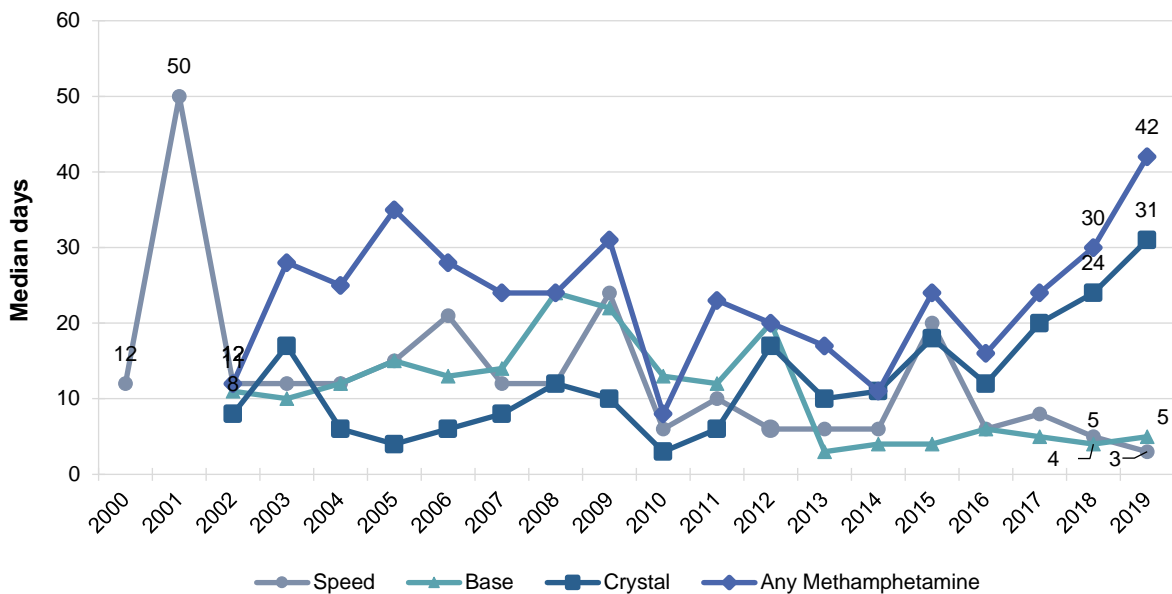
Note. Median days computed among those who reported recent use (maximum 180 days). Median days rounded to the nearest whole number. Y axis reduced to 90 days to improve visibility of trends. Median days used base and crystal not collected in 2000-2001. Data labels have been removed from figures with small cell size (i.e. n≤5 but not 0). *$p<0.050$; **$p<0.010$; ***$p<0.001$ for 2018 versus 2019.

Patterns of Consumption

Powder Methamphetamine

Recent Use (past 6 months): In 2019 20% of participants reported recent use of powder methamphetamine; continuing a decreasing trend, and significant decrease from 2018 (34%, p=0.024) (Figure 8).

Frequency of Use: The median number of days participants reported using powder methamphetamine in the last 6 months was 3 (IQR=2-12) in 2019, compared to 5 days (IQR=2-11) in 2018 (Figure 9).

Routes of Administration: Among people who recently used powder methamphetamine (n=22), the most common route of administration remained injecting (100% for 2019 and 2018) followed by smoking (18% in 2019 vs 9% in 2018).

Quantity: The median amount of powder used in a typical day was in 0.2 grams (IQR=0.1-0.3, n=21).

Base Methamphetamine

Recent Use (past 6 months): Sixteen percent of participants reported recent use of base, remaining relatively stable since 2012. In 2018, 14% of participants reported recent use of base (Figure 8).

Frequency of Use: The median frequency of use for base in 2019 was 5 days (IQR=2-10), remaining low (4 days in 2018; IQR=2-12) (Figure 9).

Routes of Administration: Among people who recently used base methamphetamine (n=17), the most common route of administration was injecting (100% for 2019 and 2018).

Quantity: The median amount of base used in a typical day remained stable at 0.2 grams (IQR=0.1-0.7, n=16).

Crystal Methamphetamine

Recent Use (past 6 months): In 2019, 65% of participants reported recent use of crystal methamphetamine, similar to 2018 (70%), and remaining relatively stable since 2015 (Figure 8).

Frequency of Use: The median number of days participants reported using crystal in the last six months was 31 (IQR=10-105), continuing a rising trend (24 days in 2018; IQR=7-90). Among people who recently used crystal methamphetamine, 14% reported daily use, compared to 11% in 2018 (Figure 9).

Routes of Administration: Among people who recently used crystal methamphetamine (n=71), the most common route of administration remained injecting (97% for 2019 vs 100% 2018), followed by smoking (42%) which increased significantly from 2018 (21% in 2018, p=0.006).

Quantity: The median amount of crystal used in a typical day remained stable at 0.2 grams (IQR=0.1-0.3, n=70).

Market Trends

Methamphetamine Powder

Price: In 2019 the median price per point remained stable at $50 (IQR=$46-50, n=12; in 2018 IQR=$50-$50). Only three participants reported purchasing by the gram (ranging from $50-300) so median data are not presented (Figure 10).

Perceived Purity: Among those who were able to comment in 2019 (n=13), most perceived the purity of speed as 'medium' (39%), followed by 'low' (31%), with equal numbers rating is as 'high' and 'fluctuates' (15%). In 2018, 50% rated purity as 'medium' and 43% as 'high' (Figure 11).

Perceived Availability: Among those who were able to comment in 2019 (n=14), 86% reported that it was 'very easy' or 'easy' to obtain, similar to 2018 (87%) (Figure 12).

Methamphetamine Crystal

Price: In 2019, the median price per point remained stable at $50 (IQR=$30-50, n=50); as did the price per gram at $300 (IQR=$255-300, n=20) (Figure 13).

Perceived Purity: Among those who were able to comment in 2019 (n=68), the purity of ice was most commonly perceived as 'medium' (34%), followed by 'high' (27%), with the remaining viewing it as 'low' (16%) or 'fluctuating' (24%); in 2018 purity was most commonly reported as 'high' (43%) or 'medium' (34%) (Figure 14).

Perceived Availability: Among those who were able to comment in 2019 (n=69), most reported that it was 'very easy' (68%) or 'easy' (26%) to obtain; compared to 52% and 44% respectively in 2018 (Figure 15).

Methamphetamine Base

Price: Data for price are not presented due to low numbers (n≤5).

Perceived Purity: Among those who were able to comment in 2019 (n=12), most perceived the purity of base as 'medium' (50%) or 'high' (42%); data were not reported in 2018 due to low numbers.

Perceived Availability: Among those who were able to comment in 2019 (n=12), 67% reported that it was 'very easy' or 'easy' to obtain base; data were not reported in 2018 due to low numbers.

*Figures for price, purity and availability of methamphetamine base not presented due to low numbers.

Figure 10: Median price of powder methamphetamine per point and gram, Queensland, 2002-2019
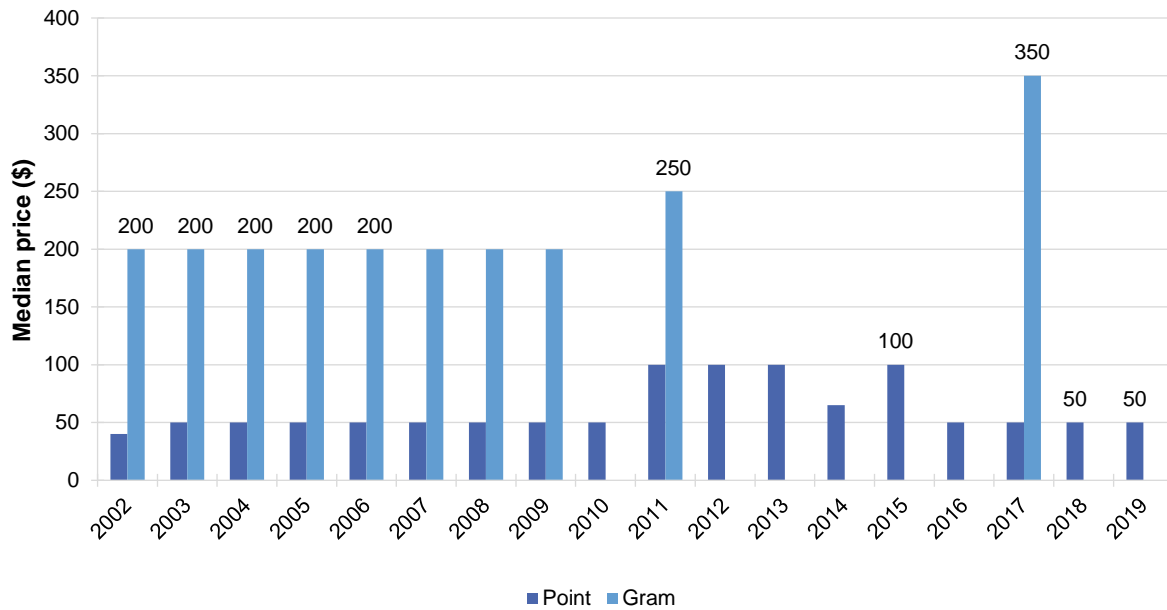
Note. Among those who commented. Data not presented where n≤5. *$p<0.050$; **$p<0.010$; ***$p<0.001$ for 2018 versus 2019.

Figure 11: Current perceived purity of powder methamphetamine, Queensland, 2002-2019
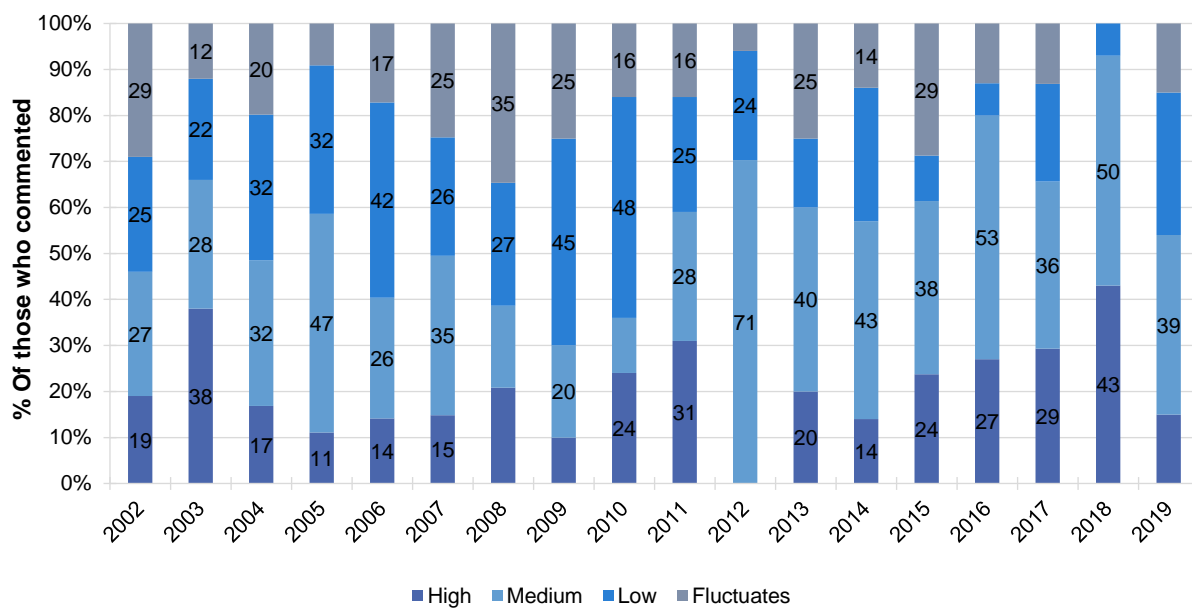
Note. Methamphetamine asked separately for the three different forms from 2002 onwards. The response 'Don't know' was excluded from analysis. Data labels have been removed from figures with small cell size (i.e. n≤5 but not 0). *$p<0.050$; **$p<0.010$; ***$p<0.001$ for 2018 versus 2019.

Figure 12: Current perceived availability of powder methamphetamine, Queensland, 2002-2019
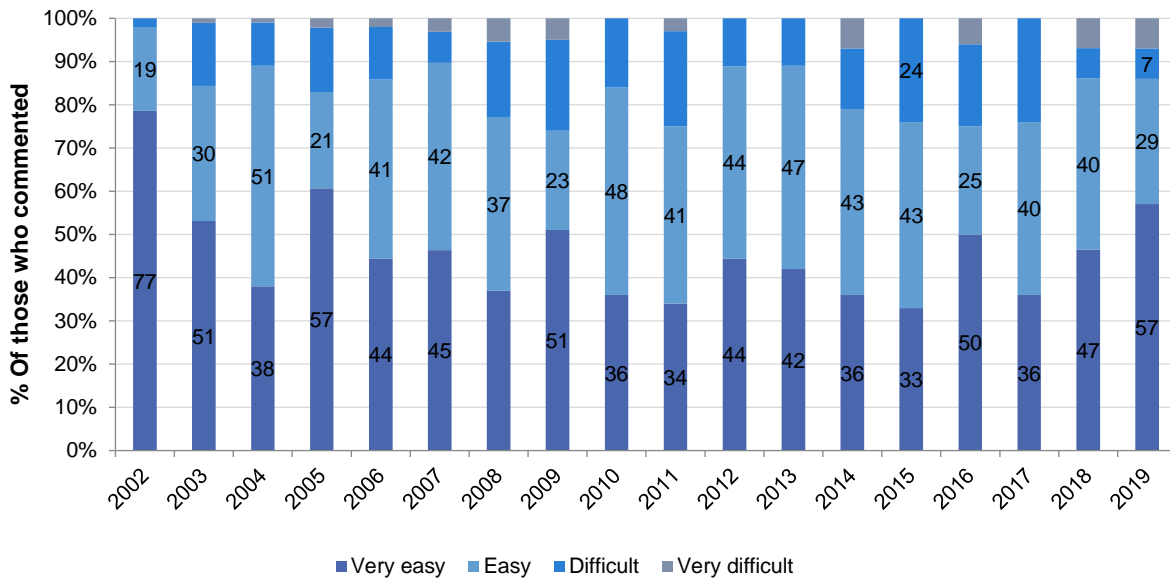
Note. Methamphetamine asked separately for the three different forms from 2002 onwards. The response 'Don't know' was excluded from analysis. Data labels have been removed from figures with small cell size (i.e. n≤5 but not 0). *$p<0.050$; **$p<0.010$; ***$p<0.001$ for 2018 versus 2019.

Figure 13: Median price of crystal methamphetamine per point and gram, Queensland, 2002-2019
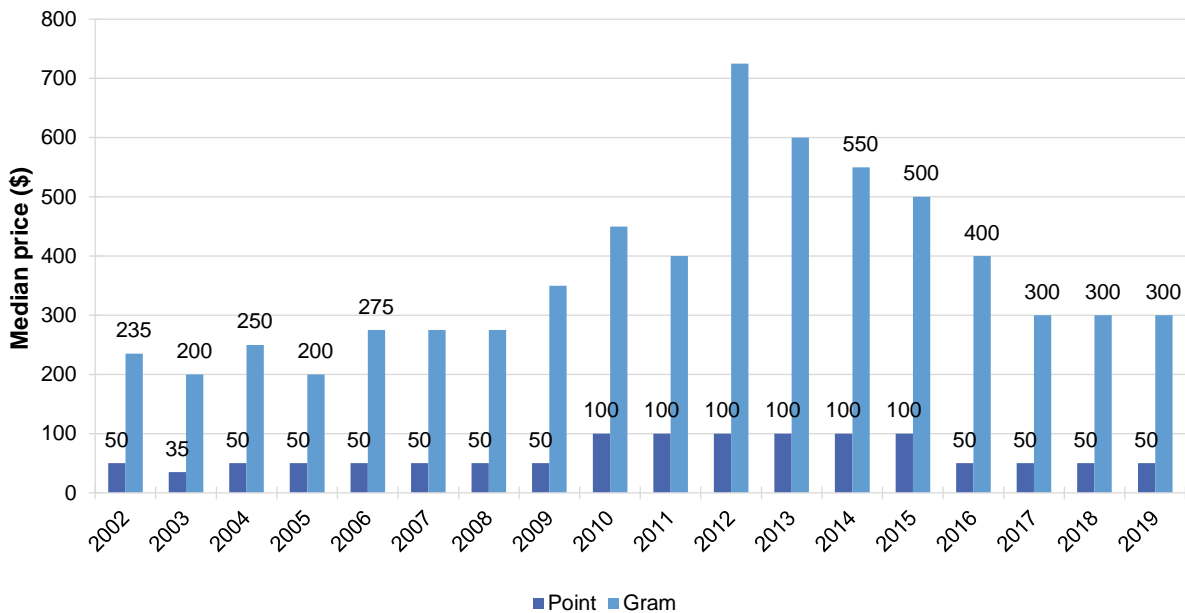
Note. Among those who commented. No data available for gram in 2001. Data labels have been removed from figures with small cell size (i.e. n≤5 but not 0). *$p<0.050$; **$p<0.010$; ***$p<0.001$ for 2018 versus 2019.

Figure 14: Current perceived purity of crystal methamphetamine, Queensland, 2002-2019
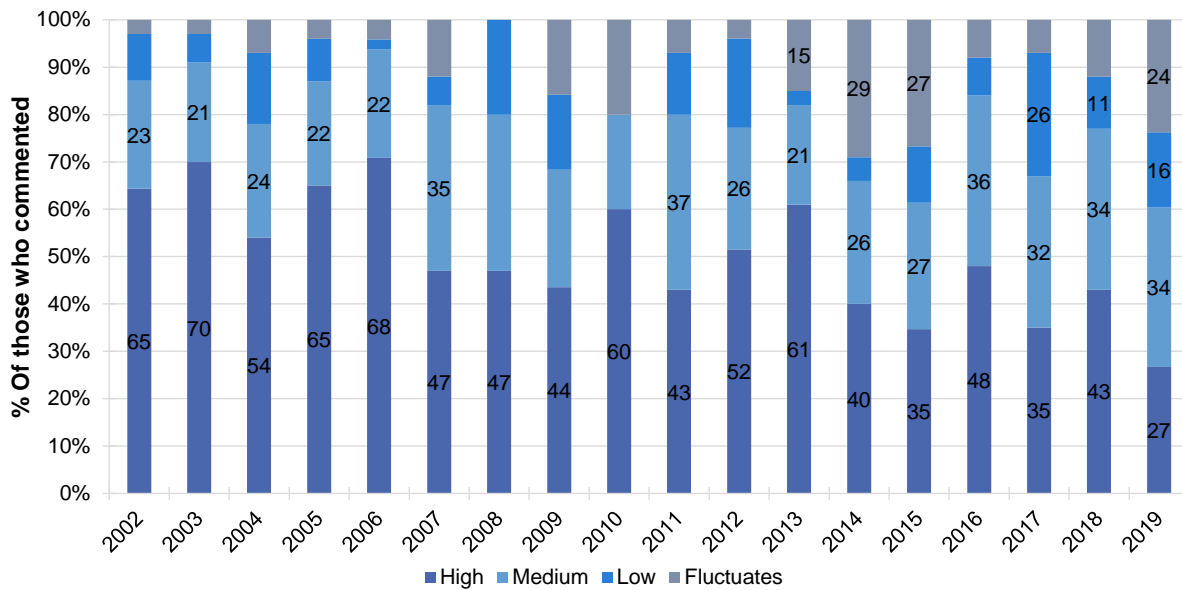
Note. Methamphetamine asked separately for the three different forms from 2002 onwards. The response 'Don't know' was excluded from analysis. Data labels have been removed from figures with small cell size (i.e. n≤5 but not 0). *$p<0.050$; **$p<0.010$; ***$p<0.001$ for 2018 versus 2019.

Figure 15: Current perceived availability of crystal methamphetamine, Queensland, 2002-2019
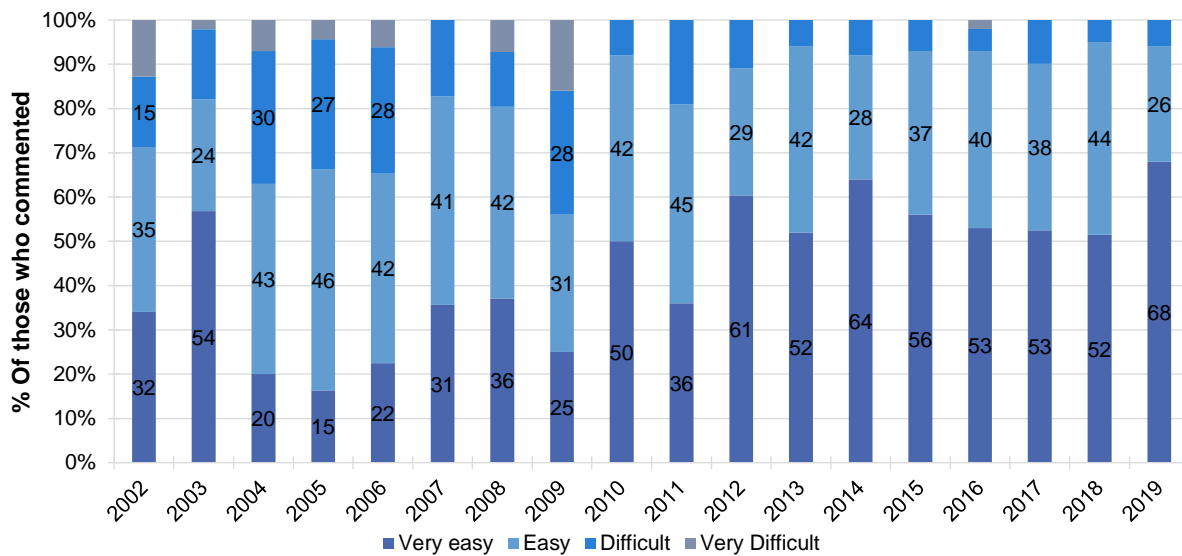
Note. Methamphetamine asked separately for the three different forms from 2002 onwards. The response 'Don't know' was excluded from analysis. Data labels have been removed from figures with small cell size (i.e. n≤5 but not 0). *$p<0.050$; **$p<0.010$; ***$p<0.001$ for 2018 versus 2019.

4

Cocaine

Participants were asked about their recent (past six month) use of various forms of cocaine. Cocaine hydrochloride, a salt derived from the coca plant, is the most common form of cocaine available in Australia. 'Crack' cocaine is a form of freebase cocaine (hydrochloride removed), which is particularly pure. 'Crack' is most prevalent in North America and infrequently encountered in Australia.

Patterns of Consumption

Recent Use (past 6 months)

In 2019, 10% of participants reported having recently used cocaine, continuing the trend of low levels of use (9% in 2018) (Figure 16).

Frequency of Use

The median number of days used in the last six months was 3 (IQR=2-6), compared to one day in 2018 (IQR=1-2) (Figure 16).

Routes of Administration

Among participants who had recently used cocaine, the most frequent routes of administration in 2019 were snorting (73%) and injecting (64%), compared to 33% and 56% respectively in 2018.

Quantity

In 2019, the median amount used in a typical day was 1.25 grams (IQR=0.20-1.88, n=8), compared to 0.1 grams in 2018 (IQR=0.1-0.4; p=0.046). Results should be interpreted with caution due to low numbers.

Figure 16: Past six month use and frequency of use of cocaine, Queensland, 2000-2019
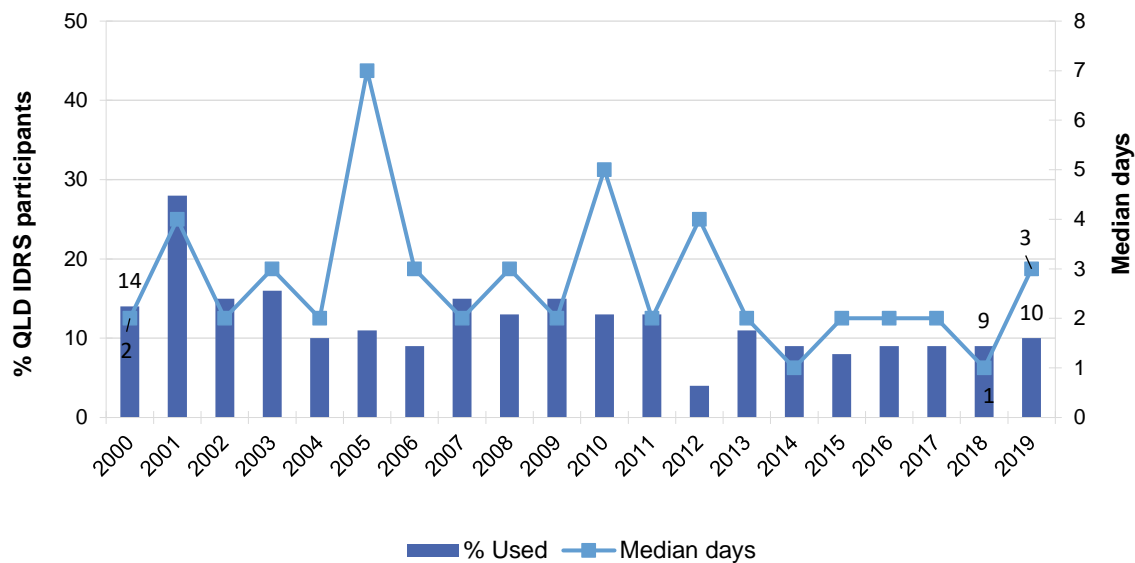
Note. Median days computed among those who reported recent use (maximum 180 days). Median days rounded to the nearest whole number. Y axis reduced to 90 days to improve visibility of trends. Data labels have been removed from figures with small cell size (i.e. n≤5 but not 0). *$p<0.050$; **$p<0.010$; ***$p<0.001$ for 2018 versus 2019

Market Trends

Price: In 2019, the median price per gram was reported as $330 (IQR=300-450, n=7). Data for 2018 were not presented due to low numbers (n≤5).

Perceived Purity: Nine participants commented on the purity of cocaine in 2019.

Perceived Availability: Nine participants commented on the availability of cocaine in 2019: seven of those reported that it was "very easy" or "easy" to obtain.

Due to historically low numbers of respondents commenting on the price, perceived purity and availability of cocaine figures and significance testing are not presented. Please refer to the National IDRS Report for further information.

5

Cannabis

Participants were asked about their recent (past six month) use of indoor-cultivated cannabis via a hydroponic system ('hydro') and outdoor-cultivated cannabis ('bush'), as well as hashish and hash oil.

Patterns of Consumption

Recent Use (past 6 months)

The proportion of participants using cannabis has remained relatively stable in recent years with 65% reporting recent use in 2019 and 67% in 2018 (Figure 17).

Frequency of Use

The median number of days cannabis was used in the last six months was 60 (IQR=9-180), increasing but not significantly so from 27 days (IQR=11-179) in 2018. Among those who had used cannabis recently, 31% used it on a daily basis, compared to 25% in 2018 (Figure 17).

Routes of Administration

Among those who had recently used cannabis, all (100%) reported smoking it in the last six months (versus 97% in 2018). Small numbers of participants reported using by inhaling/vaporising (9% vs 10% in 2018) and swallowing (≤5 in 2019 and 2018).

Quantity

The median amount of cannabis used in a typical day in 2019 was 1 gram (IQR=1-2 grams, n=23, also 1 gram in 2018, IQR=1-1 gram), or 3 cones (IQR=2-5, n=29 vs 2 in 2018, IQR=2-3, n=31).

Forms Used

Among those who had recently used cannabis, nearly all (96%) had used hydroponic cannabis in the last six months (94% in 2018); 48% had used bush cannabis (as in 2018), while smaller numbers had used hash oil (15% vs 5% in 2018) and hashish (9% vs 8% in 2018). Hydroponic cannabis was most commonly reported as the form used most (87% vs 86% in 2018), with the remainder specifying bush (13% vs 14% in 2018).

Figure 17: Past six month use and frequency of use of cannabis, Queensland, 2000-2019
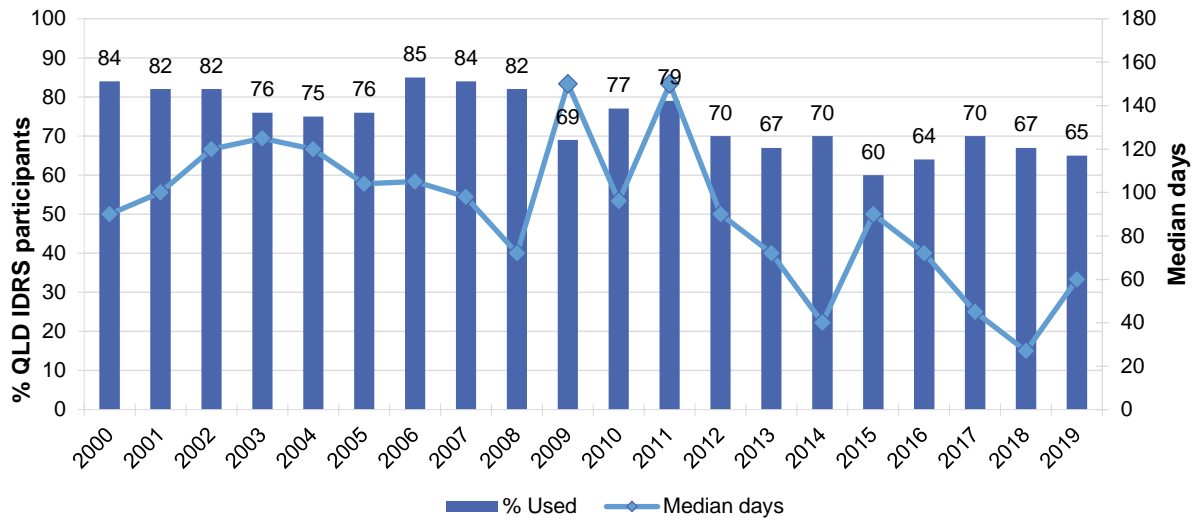
Note. Median days computed among those who reported recent use (maximum 180 days). Median days rounded to the nearest whole number. Data labels have been removed from figures with small cell size (i.e. n≤5). *p<0.050; **p<0.010; ***p<0.001 for 2018 versus 2019.

Market Trends

Hydroponic Cannabis

Price: The median price per gram of hydroponic cannabis in 2019 remained stable at $20 (IQR=$20-20, n=17); the price median price per ounce was $300 (IQR=$280-300, n=12; not reported in 2018 due to low numbers) (Figure 18).

Perceived Potency: Among those who were able to comment in 2019 (n=49), over half perceived the strength of hydroponic cannabis as 'high' (53%), 29% reported it as 'medium' and 6% as low, with the remaining reported it as 'fluctuating' (12%). In 2018, hydroponic cannabis was perceived as 'high' or 'medium' (42% each), 'low' (7%) and 'fluctuating' (10%) potency (Figure 19).

Perceived Availability: Among those who were able to comment in 2019 (n=49), most participants reported that it was 'very easy' (47%) or 'easy' (35%) to obtain hydroponic cannabis, with the remaining perceiving it as 'difficult' (18%). In 2018, these proportions were 20%, 53% and 24%, respectively (Figure 20).

Bush Cannabis

Price: The median price per gram of bush in 2019 was $20 (IQR=$17.5-$21.25, n=6); the median price per ounce was $260 (IQR=$237.5-$305, n=10). Yearly comparisons are not made here due to small sample size (Figure 18).

Perceived Potency: Among those who were able to comment in 2019 (n=25), the strength of bush was perceived as 'high' (24%), 'medium' (36%), and low (20%); compared to 2018 where the proportions were 42%, 50% and 8% respectively (n=12) (Figure 19).

Perceived Availability: Among those who were able to comment in 2019 (n=26), most participants perceived that it was 'very easy' or 'easy' (39% each) to obtain bush while the remainder said that it was 'difficult' (23%). In 2018, these proportions were 39%, 23% and 31%, respectively (Figure 20).

Figure 18: Median price of hydroponic (A) and bush (B) cannabis per ounce and gram, Queensland, 2003-2019

(A) Hydroponic cannabis
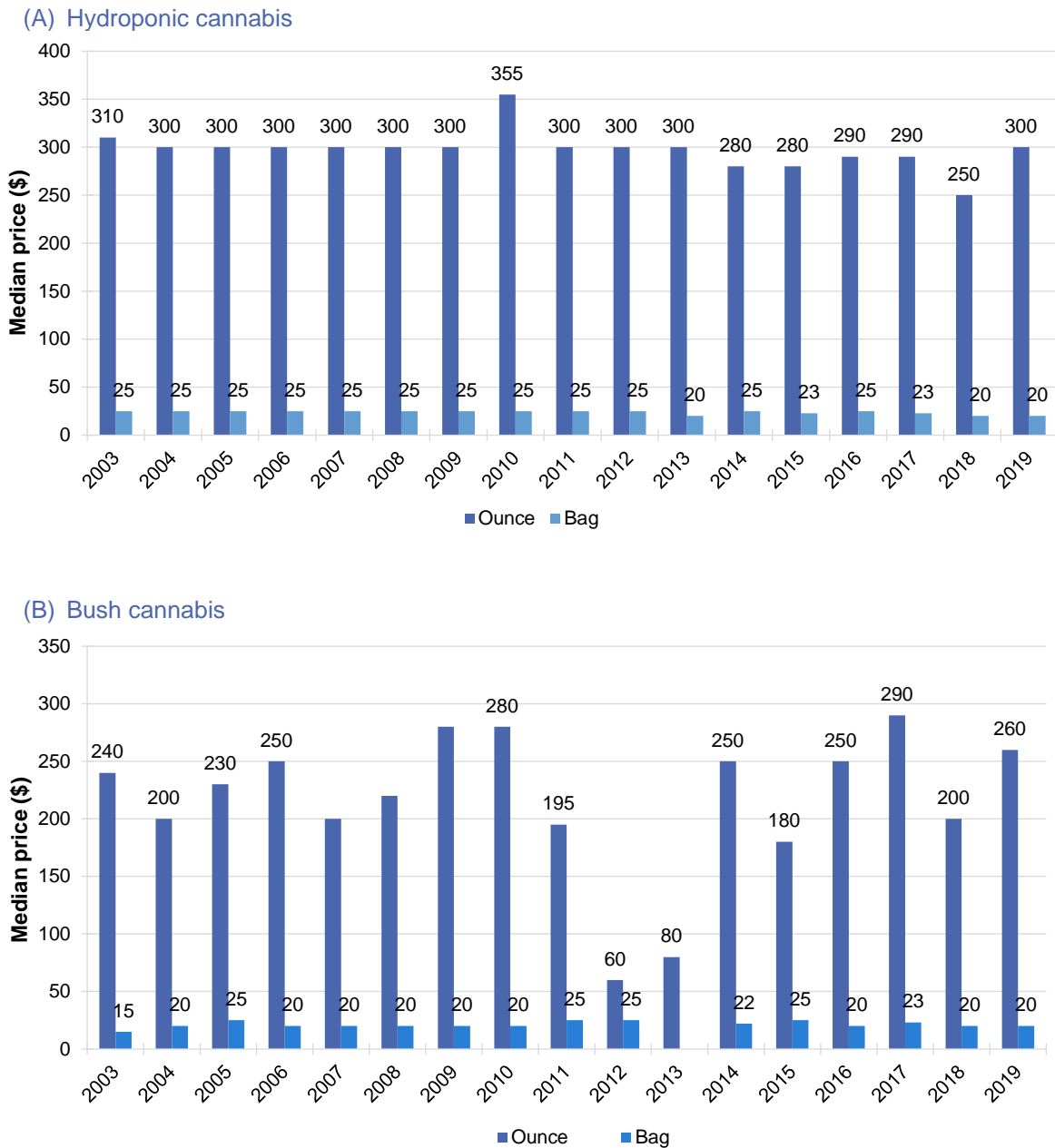
(B) Bush cannabis

Note. Among those who commented. From 2003 onwards hydroponic and bush cannabis data collected separately. Data labels have been removed from figures with small cell size (i.e. n≤5 but not 0). *p<0.050; **p<0.010; ***p<0.001 for 2018 versus 2019.

Figure 19: Current perceived potency of hydroponic (a) and bush (b) cannabis, Queensland, 2004-2019
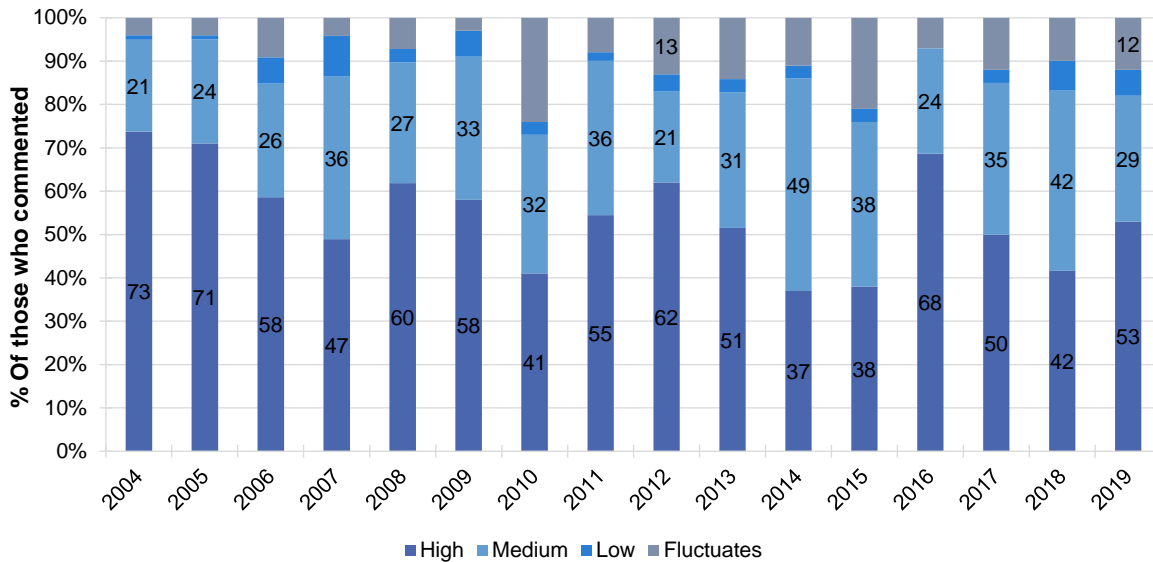
(A) Hydroponic cannabis
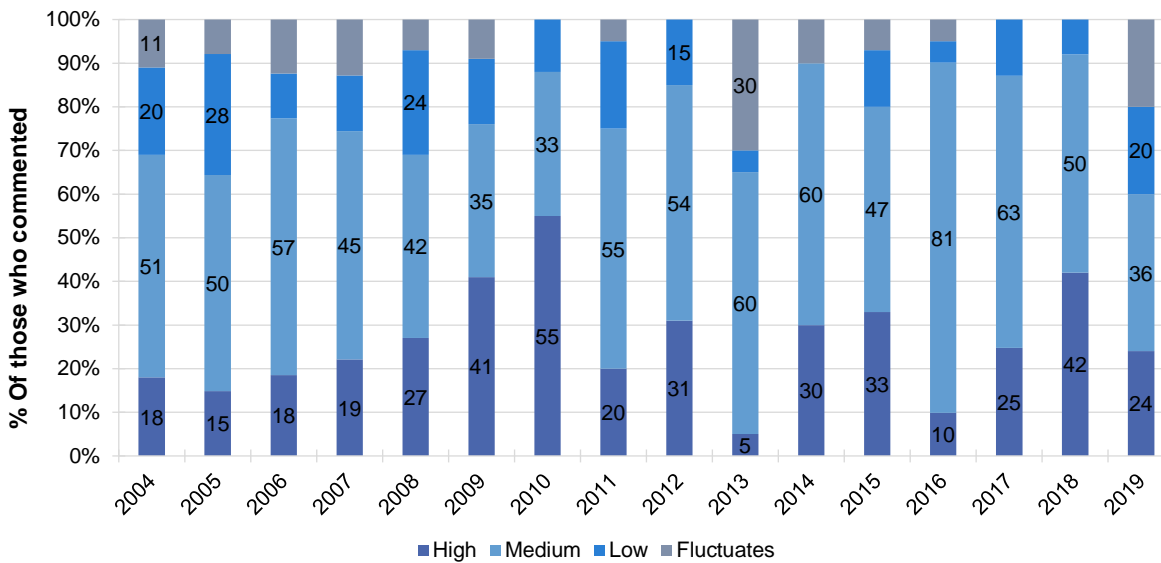
(B) Bush cannabis

Note. The response 'Don't know' was excluded from analysis. Hydroponic and bush cannabis data collected separately from 2004 onwards. Data labels have been removed from figures with small cell size (i.e. n≤5 but not 0). *p<0.050; **p<0.010; ***p<0.001 for 2018 versus 2019.

Figure 20: Current perceived availability of hydroponic (a) and bush (b) cannabis, Queensland, 2004-2019
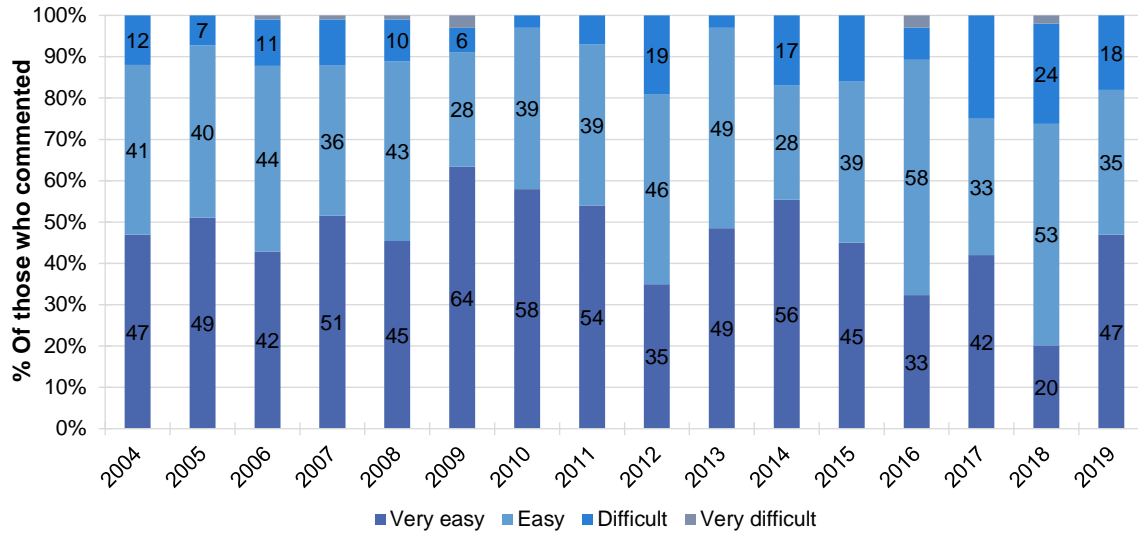
(A) Hydroponic cannabis
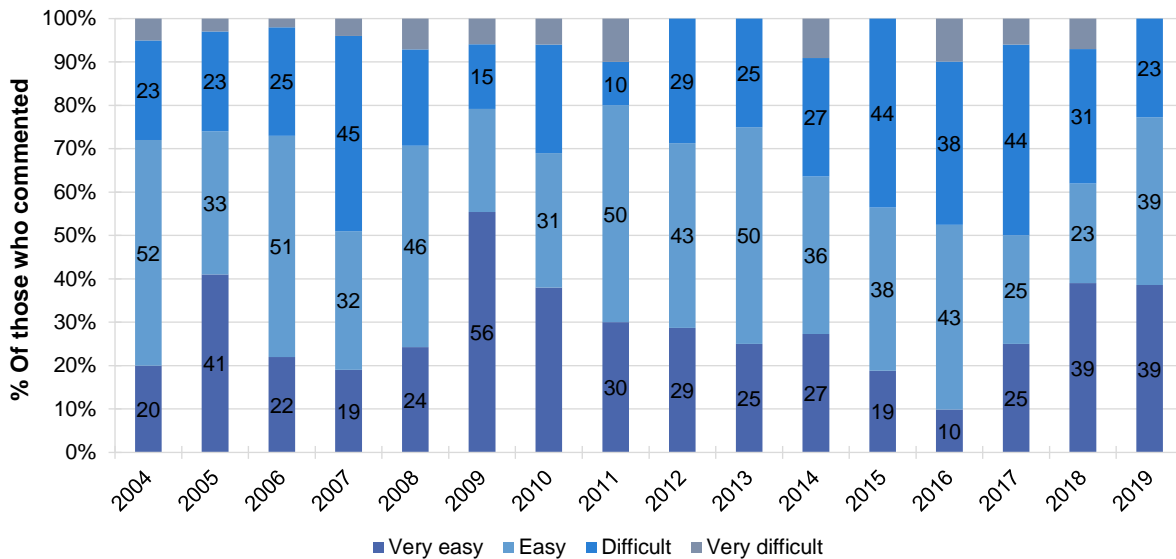
(B) Bush cannabis

Note. The response 'Don't know' was excluded from analysis. Hydroponic and bush cannabis data collected separately from 2004 onwards. Data labels have been removed from figures with small cell size (i.e. n≤5 but not 0). $*p<0.050$; $**p<0.010$; $***p<0.001$ for 2018 versus 2019.

6

Pharmaceutical opioids

The following section describes rates of recent (past six month) use of pharmaceutical opioids amongst the sample. Terminology throughout refers to:

- **prescribed use:** use of pharmaceutical opioids obtained by a prescription in the person's name;
- **non-prescribed use:** use of pharmaceutical opioids obtained from a prescription in someone else's name; and
- **any use:** use of pharmaceutical opioids obtained through either of the above means.

For information on price and perceived availability for non-prescribed pharmaceutical opioids, contact the Drug Trends team.

Methadone

Recent Use (past 6 months): In 2019, 37% of participants reported any use of methadone in the last 6 months, remaining stable from 2018 where 36% reported any recent use. Recent prescribed use was reported by 26% of participants, similar to the 28% reported in 2018 (p=0.686). Recent non-prescribed use was reported by 19% of participants, also remaining stable from 2018 (18%) (Figure 21).

Frequency of Use: The median frequency of use for any methadone in 2019 was 138 days (IQR=7-180, n=40) compared to 180 days (IQR=7-180) in 2018. The median days used for prescribed methadone was 180 (IQR=84-180, n=28), while the median days used for non-prescribed methadone was 6 days (IQR=3-59, n=18) (Figure 21).

Routes of Administration: For prescribed methadone, nearly all participants reported swallowing (93% versus 100% in 2018) and 32% reported injecting (versus 45% in 2018). The median days methadone was injected was 48 (IQR=34-93, n=9, versus 72 in 2018).

For non-prescribed methadone, 19% reported swallowing (versus 26% in 2018), while 100% reported injecting (versus 95% in 2018. The median days non-prescribed methadone was injected was 6 (IQR=3-54, n=18; versus 4 in 2018, IQR=1-24, n=18).

Figure 21: Past six month use (prescribed and non-prescribed) and frequency of use of methadone, Queensland, 2000-2019
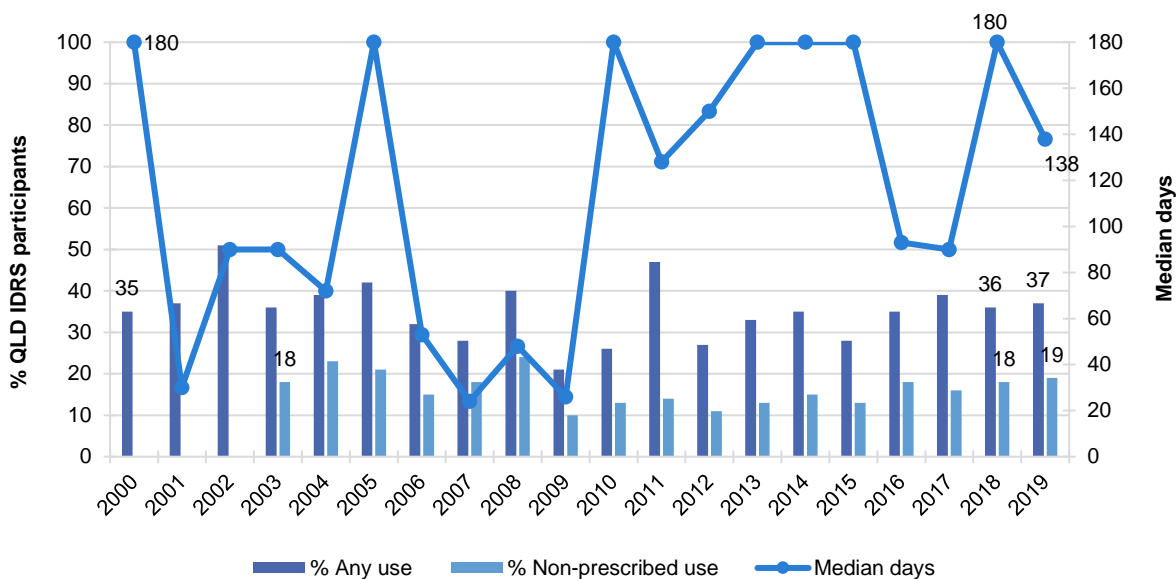
Note. Includes methadone syrup and tablets. Non-prescribed use not distinguished 2000-2002. Median days computed among those who reported recent use (maximum 180 days). Median days rounded to the nearest whole number. Data labels have been removed from figures with small cell size (i.e. n≤5 but not 0). *p<0.050; **p<0.010; ***p<0.001 for 2018 versus 2019.

Buprenorphine-Naloxone

Recent Use (past 6 months): In 2019, 35% of participants reported recently using buprenorphine-naloxone, remaining stable from 2018 (also 35%). Recent prescribed use was reported by 20% of participants, similar to the 23% reported in 2018 (p=0.582). Recent non-prescribed use was reported by 22% of participants, similar to the 18% reporting non-prescribed use in 2018 (Figure 22).

Frequency of Use: The median days for any use in 2019 was 54 (IQR=5-180, n=38), compared to 93 days in 2018. The median days used for prescribed buprenorphine-naloxone was 158 (IQR=53-180, n=22 vs 180 days), while the median days used for non-prescribed use was 7 days (IQR=3-30, n=23) (Figure 22).

Routes of Administration: For prescribed buprenorphine-naloxone, most participants reported swallowing (82%, vs 79% in 2018) and 46% reported injecting (vs 58 in 2018). Participants reported a median of 90 days (IQR=22-169, n=10, vs 81 in 2018) injecting prescribed buprenorphine-naloxone.

For non-prescribed buprenorphine-naloxone, 38% reported swallowing, while 75% reported injecting, compared to 11% (p=0.044) and 95% respectively in 2018. The median days injected was 7 (IQR=3-23, n=18, vs 12 in 2018).

Figure 22: Past six month use (prescribed and non-prescribed) and frequency of use of buprenorphine-naloxone, Queensland, 2006-2019
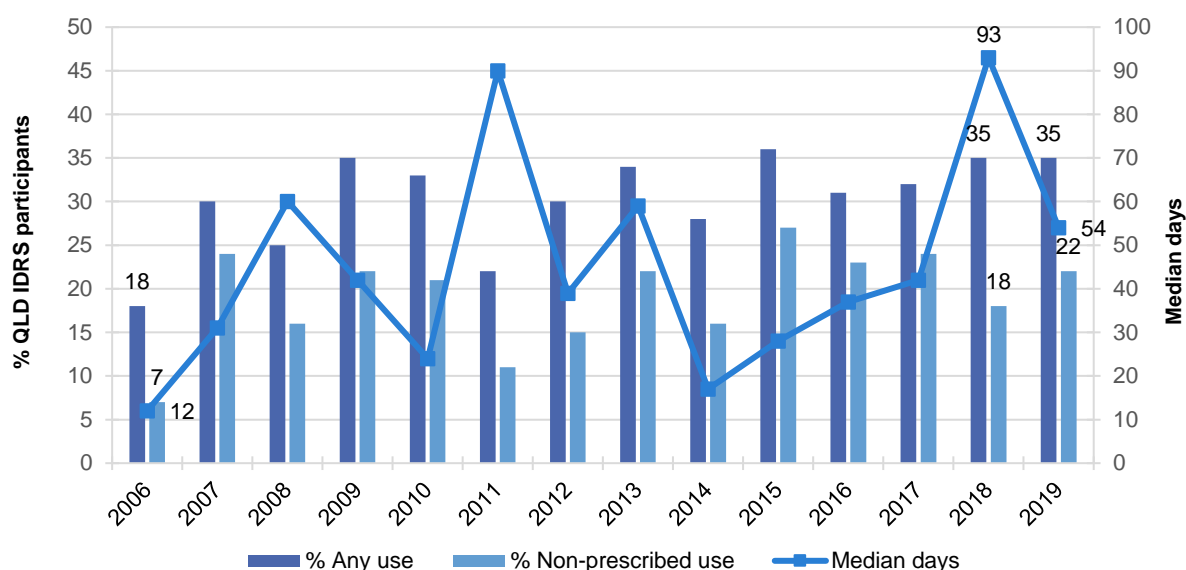
Note. From 2006-2011 participants were asked about the use of buprenorphine-naloxone tablet; from 2012-2015 participants were asked about the use of buprenorphine-naloxone tablet and film; from 2016- 2019 participants were asked about the use of buprenorphine–naloxone film only. Median days computed among those who reported recent use (maximum 180 days). Median days rounded to the nearest whole number. Y axis reduced to 50% and 100 days to improve visibility of trends. Data labels have been removed from figures with small cell size (i.e. n≤5 but not 0). *p<0.050; **p<0.010; ***p<0.001 for 2018 versus 2019.

Buprenorphine

Recent Use (past 6 months): Although prescribing practices have shifted towards buprenorphine-naloxone in recent years, the use of buprenorphine alone was still common in Queensland in 2019, with 23% reporting any recent use (21% in 2018). Recent prescribed use was reported by 12% of participants (also 12% in 2018) and recent non-prescribed use was reported by 15% of participants (12% in 2018) (Figure 23).

Frequency of Use: The median days for any use in 2019 was 24 (IQR=4-90, n=25), compared to 156 days in 2018 (IQR=5-180, n=22). The median days used for prescribed buprenorphine was 180 (IQR=72-180, n=13; also 180 days in 2018, IQR=180-180), while the median days used for non-prescribed use was 6 days (IQR=4-12, n=16; median = 8 days in 2018, IQR=2-22) (Figure 23).

Routes of Administration: For prescribed buprenorphine (n=13), most participants reported swallowing (85%, versus 83% in 2018, n=12) and 62% reported injecting (versus 67% in 2018). Participants reported a median of 57 days (IQR=11-135, n=8, vs 48 days in 2018, IQR=24-180) injecting prescribed buprenorphine.

For non-prescribed buprenorphine (n=16), 44% reported swallowing, while 63% reported injecting, compared to 17% and 100% (p=0.017) respectively in 2018. The median days injected was 9 (IQR=4-60, n=10, versus 7 days in 2018, IQR=2-22, n=12).

Figure 23: Past six month use (prescribed and non-prescribed) and frequency of use of buprenorphine, Queensland, 2006-2019
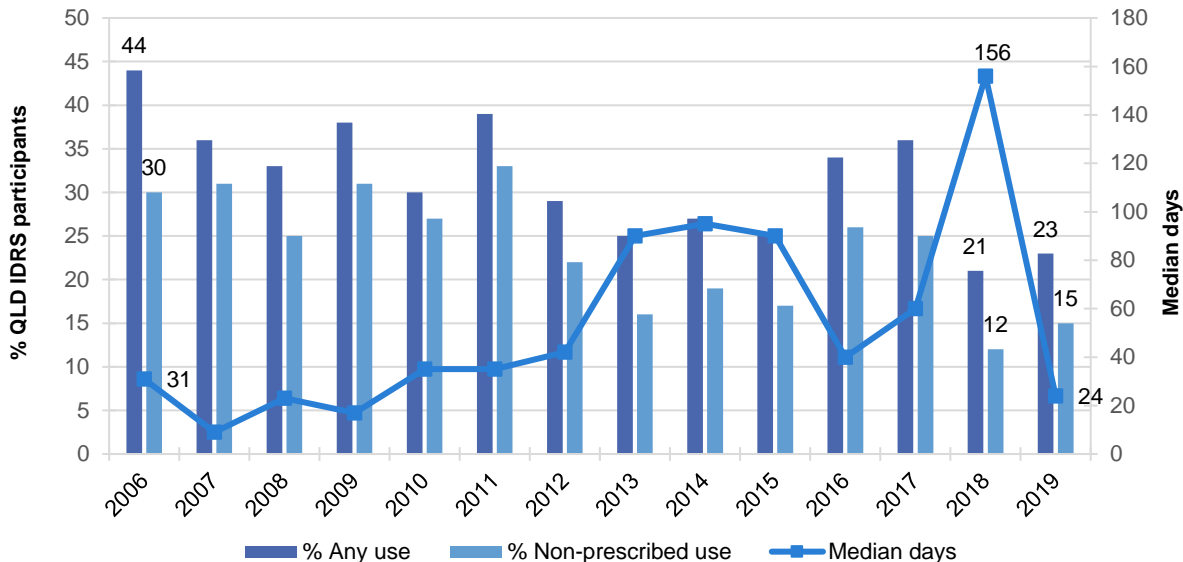
Note. Median days computed among those who reported recent use (maximum 180 days). Median days rounded to the nearest whole number. Y axis reduced to 50% and 100 days to improve visibility of trends. Data labels have been removed from figures with small cell size (i.e. n≤5 but not 0). *p<0.050; **p<0.010; ***p<0.001 for 2018 versus 2019.

Morphine

**Recent Use (past 6 months):** In 2019, 31% of participants had recently used any morphine, remaining stable from 2018 (32%). Recent prescribed use was reported by 6% (versus 8% in 2018, p=0.507), while recent non-prescribed use was reported by 28% in 2019 (versus 29% in 2018) (Figure 24).

Frequency of Use: The median frequency of use for any morphine was 10 days (IQR=3-69, n=33; compared to 12 days in 2018, IQR=1-100, n=33). The median days used for prescribed morphine was 135 days (IQR=44-180, n=6) and was 5 days (IQR=2-47, n=29) for non-prescribed morphine in the previous 6 months (Figure 24).

Routes of Administration: For prescribed morphine, all six participants reported injecting. The median days injected was 135 (IQR=44-180, n=6).

Nearly all those who had used non-prescribed morphine reported injecting (97%, vs 96% in 2018) and a small number reported swallowing (13%, versus 10% in 2018). The median days injected was 6 (IQR=2-41, n=28).

Figure 24: Past six month use (prescribed and non-prescribed) and frequency of use of morphine, Queensland, 2002-2019
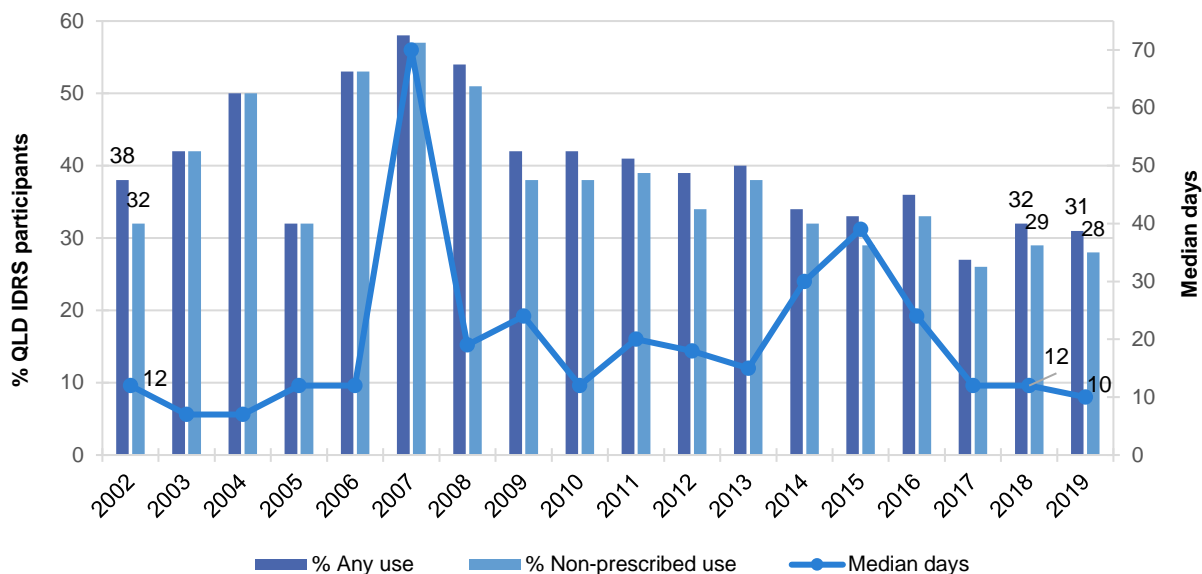
Note. Median days computed among those who reported recent use (maximum 180 days). Y axis reduced to 60% and 75 days to improve visibility of trend. Median days rounded to the nearest whole number. Data labels have been removed from figures in years 2018 and 2019 with small cell size (i.e. n≤5 but not 0). *p<0.050; **p<0.010; ***p<0.001 for 2018 versus 2019.

Oxycodone

Recent Use (past 6 months): In 2019, 23% of participants reported recently using oxycodone, remaining stable from 2018 (also 23%). Recent prescribed use was reported by 6% (versus 5% in 2018), while recent non-prescribed use was reported by 20% in 2019 (versus 18% in 2018) (Figure 25).

Frequency of Use: The median number of days any oxycodone was used in the last six months was 8 (IQR=2-40, n=25), compared to 9 days in 2018. Prescribed oxycodone was used more often; the median days used for prescribed oxycodone was 84 days (IQR=2-180, n=6) and was 8 days (IQR=2-26, n=22) for non-prescribed use in the previous 6 months (Figure 25).

Routes of Administration: For prescribed oxycodone, five out of the six (83%) participants reported swallowing.

Most who had recently used non-prescribed oxycodone reported injecting (82%, versus 89% in 2018) and a smaller number reported swallowing (27%). The median days injected was 8 (IQR=2-30 n=18).

Figure 25: Past six month use (prescribed and non-prescribed) and frequency of use of oxycodone, Queensland, 2005-2019
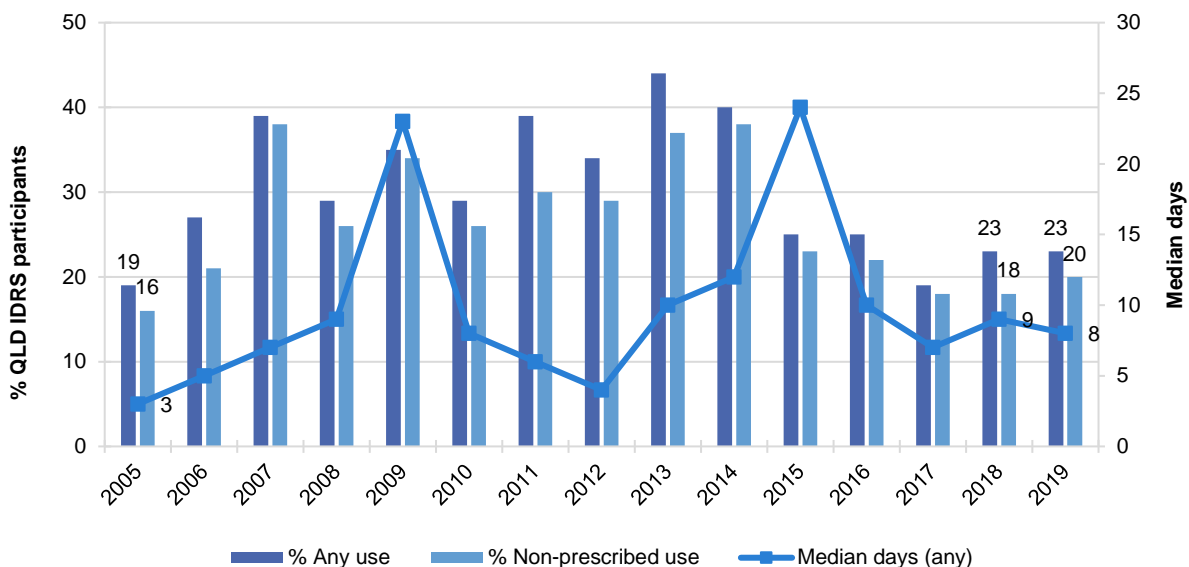
Note. From 2005-2015 participants were asked about any oxycodone; from 2016-2019, oxycodone was broken down into three types: tamper resistant ('OP'), non-tamper proof (generic) and 'other oxycodone'. Median days computed among those who reported recent use (maximum 180 days). Median days rounded to the nearest whole number. Y axis reduced to 50% and 30 days to improve visibility of trends. Data labels have been removed from figures in years 2017 and 2018 with small cell size (i.e. n≤5 but not 0). *p<0.050; **p<0.010; ***p<0.001 for 2018 versus 2019.

Fentanyl

Recent Use (past 6 months): In 2019, 15% of participants reported recently using fentanyl, remaining stable from 2018 (16%). Thirteen percent of participants reported non-prescribed use (versus 16% in 2018) (Figure 26).

Frequency of Use: The median number of days any fentanyl was used in the last six months was 5 (IQR=3-39, n=16), compared to 4 days in 2018 (Figure 26).

Routes of Administration: Among those who had recently used non-prescribed fentanyl, all (100%) had used by injecting (as in 2018). The median days fentanyl was injected was 5 (IQR=2-20, n=14).

Figure 26: Past six-month use (prescribed and non-prescribed) and frequency of use of fentanyl, Queensland, 2013-2019
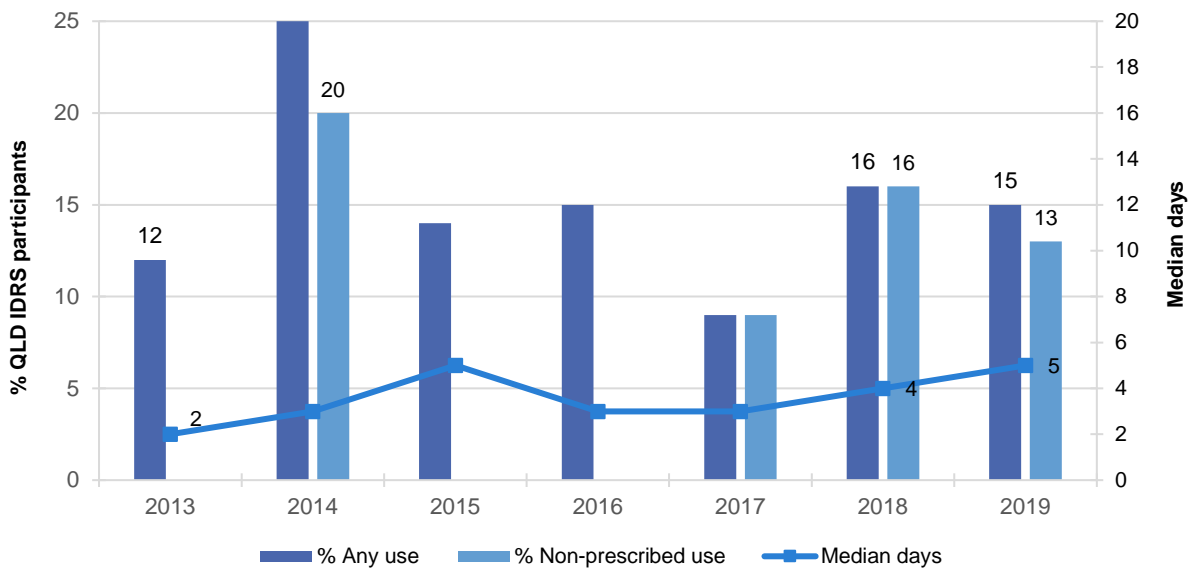
Note. Data on fentanyl use not collected from 2000-2012, and data on any non-prescribed use not collected 2013-2017. For the first time in 2018, use was captured as prescribed versus non-prescribed. Median days computed among those who reported recent use (maximum 180 days). Median days rounded to the nearest whole number. Y axis reduced to 25% and 90 days to improve visibility of trends. Data labels have been removed from figures in years 2017 and 2018 with small cell size (i.e. n≤5 but not 0). *p<0.050; **p<0.010; ***p<0.001 for 2018 versus 2019.

Codeine

Before the 1st February 2018, people could access low-dose codeine products (<30mg, e.g., Nurofen Plus) over-the-counter (OTC), while high-dose codeine (≥30mg, e.g., Panadeine Forte) required a prescription from a doctor. On the 1st February 2018, legislation changed so that all codeine products, low- and high-dose, now require a doctor's prescription to access.

Up until 2017, participants were only asked about use of OTC codeine for non-pain purposes. Additional items on prescribed and non-prescribed use of prescription low-dose and prescription high-dose codeine were included in IDRS 2018 and 2019.

Recent Use (past 6 months): In 2019, 18% of participants reported recently using any form of codeine, similar to 2018 when 20% reported any recent use. Recent prescribed use was reported by 12% of participants (versus 10% in 2018), while non-prescribed use was reported by 10% of participants (versus 3% in 2018). More participants reported use of high dose codeine (13%) than low dose (6%).

Recent Use (past 6 months) for Non-Pain Purposes: No participants reported use of low dose codeine for non-medical/pain purposes. It is unclear if this decline was due to the legislative changes detailed above, or to a change in the way this question was asked (i.e. participants could only report use occurring prior to rescheduling in February 2018) (Figure 27).

Frequency of Use: The median number of days use for any codeine in the last six months was 4 (IQR=2-34, n=20), compared to 9 days in 2018. Median days used for prescribed codeine was 5 (IQR= 2.5-60, n=13), while median days of non-prescribed use was two (IQR=1-7, n=11).

Figure 27: Past six month use and frequency of low-dose codeine (for non-pain purposes), Queensland, 2012-2019
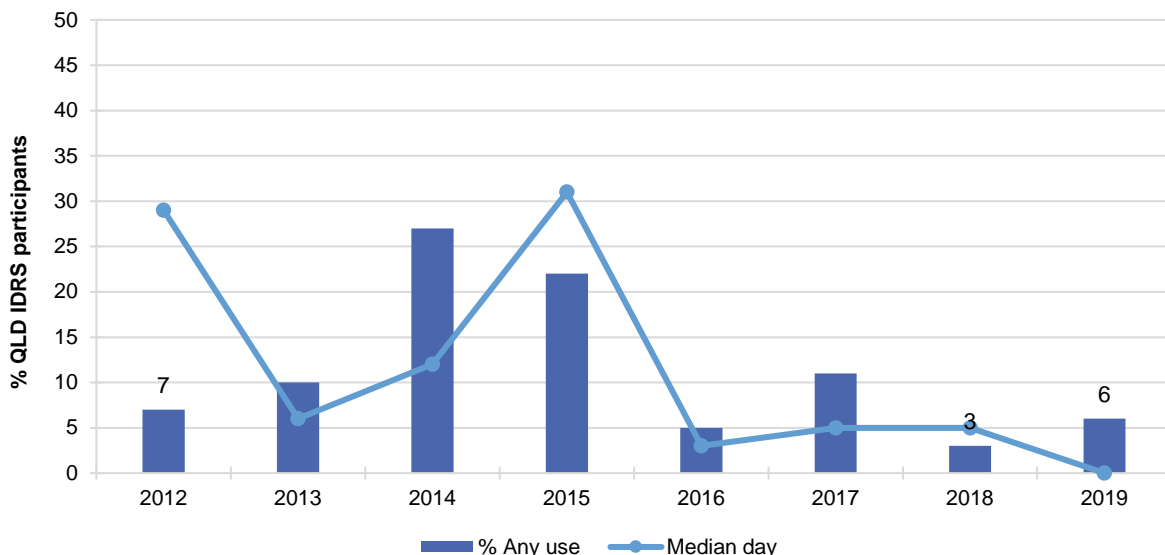
Note. Median days computed among those who reported recent use (maximum 180 days). Median days rounded to the nearest whole number. Y axis reduced to 50% and 90 days to improve visibility of trends. Differences between 2017 and 2018 data should be viewed with caution due to differences in the way questions were asked in 2018 (i.e. participants could only report use occurring in the last six months but prior to rescheduling in February 2018). Data labels have been removed from figures in years 2017 and 2018 with small cell size (i.e. n≤5 but not 0). *p<0.050; **p<0.010; ***p<0.001 for 2018 versus 2019.

7

Other Drugs

New Psychoactive Substances (NPS)

NPS are often defined as substances which do not fall under international drug control, but which may pose a public health threat. However, there is no universally accepted definition, and in practicality the term has come to include drugs which have previously not been well-established in recreational drug markets.

In 2019, 8% of participants reported recent use of any NPS, similar to 5% in 2018. This continues a trend of low recent use among IDRS participants (range between 1%-6% for 2013-2017).

Recent of use of all NPS was low, with drugs that mimic the effects of opioids the most commonly used (but reported by ≤5 participants).

Non-Prescribed Pharmaceutical Drugs

Benzodiazepines

Recent Use (past 6 months): In 2019, 35% of participants reporting having recently used non-prescribed benzodiazepines, compared to 31% in 2018. Non-prescribed benzodiazepine use has remained relatively stable over time excluding peaks in 2011 and 2013 (Figure 28).

Frequency of Use: In 2019, non-prescribed use of alprazolam and 'other' benzodiazepines was used on a median of four days (IQR=2-12, n=22; 5 days in 2018; IQR=1-20, n=18) and six days (IQR=4-20, n=26; 11 days in 2018; IQR=4-33, n=24), respectively.

Routes of Administration: All participants who had used alprazolam in 2019 reported swallowing (89% in 2018) with small numbers (n≤5 in both years) reporting injecting. All participants reported swallowing 'other' benzodiazepines in both 2019 and 2018, with no reports of injecting.

Pharmaceutical Stimulants

Few participants (6%) had recently used pharmaceutical stimulants, compared to 8% in 2018, with small numbers (n≤5) reporting injecting. Median frequency of use was seven days in the past 6 months (IQR=1-38, n=6) (Figure 28).

Anti-Psychotics

Non-prescribed use of antipsychotics (asked as 'Seroquel' until 2019) has remained stable (between 6-16%) since data were first collected in 2011. In 2019, 6% of participants had recently used anti-psychotics, compared to 8% in 2018. Median frequency of use was 24 days in the past six months (IQR=2-48, n=7), compared to 2 days in 2018; however, this should be interpreted with caution due to the low numbers reporting recent use (Figure 28). For further information, please refer to the National Report, or contact the Drug Trends team.

Pregabalin

Recent Use (past 6 months): In 2019, 40% of participants reported recently using any form (licit or illicit) of pregabalin (42% in 2018). Prescribed use was reported by 17% of participants (20% in 2018) and non-prescribed use was reported by 26% (24% in 2018).

Frequency of Use: Median days used for any form of pregabalin was 14 days (IQR=3-99; 48 days in 2018, IQR=4-180). Prescribed use was on a median of 144 days (IQR=30-180; 180 in 2018, IQR=180-180, p=0.013), while non-prescribed use was on a median of 5 days (IQR=2-14; also 5 days in 2018, IQR=3-20).

Routes of Administration: Swallowing was the main route of administration used for both prescribed and non-prescribed pregabalin (94% and 100% respectively; 100% for both in 2018), with very few participants (n≤5) reporting any injection.

Figure 28: Past six month use of other drugs, Queensland, 2002-2019
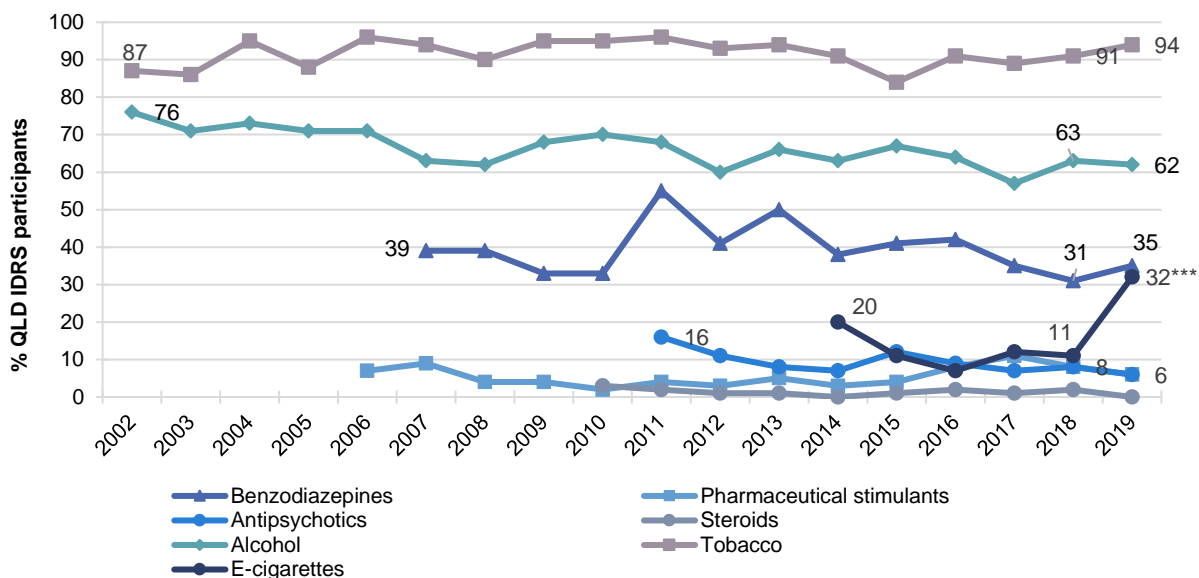
Note. Non-prescribed use is reported for prescription medicines (i.e., benzodiazepines, anti-psychotics, and pharmaceutical stimulants). Participants were first asked about steroids in 2010, anti-psychotics in 2011 (asked as 'Seroquel' until 2019) and e-cigarettes in 2014. Pharmaceutical stimulants were separated into prescribed and non-prescribed from 2006 onwards, and benzodiazepines were separated into prescribed and non-prescribed in 2007; Data labels have been removed from figures in years 2017 and 2018 with small cell size (i.e. n≤5 but not 0). *p<0.050; **p<0.010; ***p<0.001 for 2018 versus 2019.

Licit and Other Drugs

Steroids

No participants reported use of steroids in the last six months (Figure 28). For further information, please refer to the [National Report](#) or contact the Drug Trends team.

Alcohol

**Recent Use (past 6 months):** In 2019, 62% of participants had recently used alcohol; similar to the 63% reported in 2018 (Figure 28).

Frequency of Use: Median days used in 2019 was 20 (IQR=6-48; 19 in 2018, IQR=4-72). In 2019, 30% of participants reported weekly or more use of alcohol, similar to 29% in 2018.

Tobacco

Recent Use (past 6 months): Almost all (94%) of participants reported recent use of tobacco in 2019, compared to 91% in 2018 (p=0.510) (Figure 28).

Frequency of Use: Median days used was 180 (IQR=180-180, consistent with 2018), with 87% of recent tobacco consumers reporting daily use (93% in 2018).

E-cigarettes

Recent Use (past 6 months): The proportion of participants who reported recent use of e-cigarettes in 2019 (32%) increased significantly from 2018 (11%; p<0.001) (Figure 28).

Frequency of Use: Median days used was 20 (IQR=2-90; 24 in 2018, IQR=1-48). In 2019, 20% of participants who had recently used e-cigarettes reported doing so on a daily basis, compared to no participants in 2018 (p=0.009).

8

Drug-Related Harms and Other Risk Factors

Polysubstance Use

Nearly all participants (97%) reported using one or more drugs on the day preceding the interview in 2019.

The most commonly used substance was tobacco (83%), with opioids the most commonly used illicit substance (65%). Other substances were used by less than one third of participants; cannabis (30%), stimulants (27%), and benzodiazepines (33%).

Almost one third (31%) of the total sample reported using a combination of opioids, stimulants and/or benzodiazepines on the day preceding interview, with the most common combination being opioids and benzodiazepines (19%) and opioids and stimulants (6%) (Figure 29).

Figure 29: Use of opioids, stimulants and benzodiazepines on the day preceding interview, Queensland, 2019
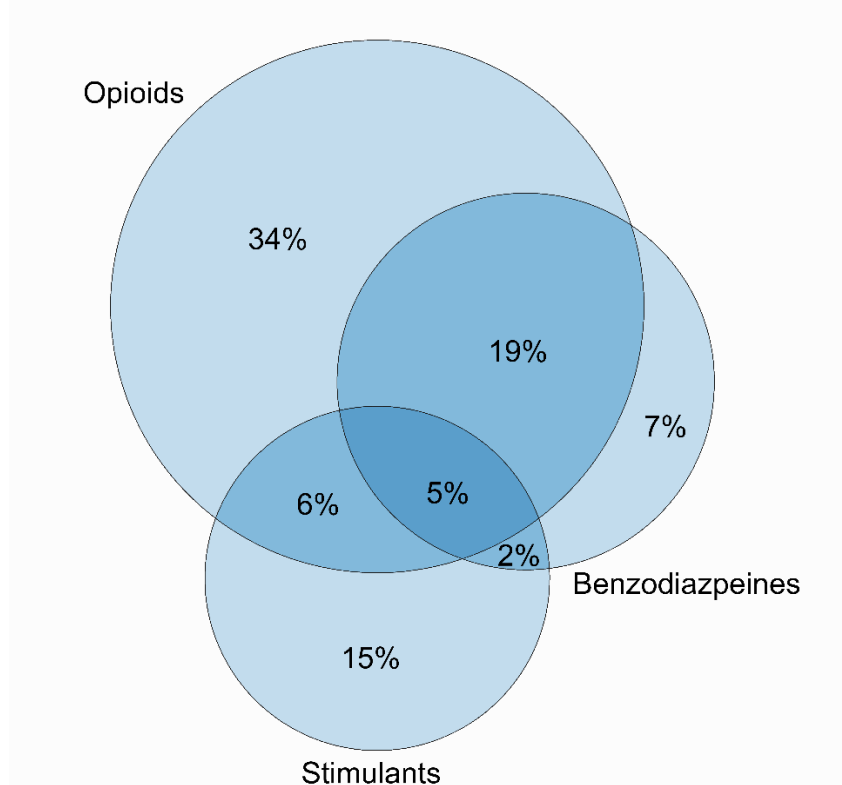
Note. This figure captures those who had used stimulants, opioids and/or benzodiazepines on the day preceding interview (97%; n=109). The figure is not to scale.

AUDIT-C

Participants of the IDRS were asked the Alcohol Use Disorders Identification Test-Consumption (AUDIT-C) as a valid measure of identifying hazardous drinking. In 2019, the sample mean score on the AUDIT-C was 3 (SD=3, range=0-11) (Table 2). In men a score of 5 or greater indicates possible risky drinking, while in women a score of 4 or more suggests risky drinking. Just over one-third (36%) scored in the risky level in 2019, similar to 25% in 2018, with no gender differences observed in either year.

Table 2: AUDIT-C score, Queensland, 2016-2019				
	2019 **(n=109)**	**2018** **(n=103)**	**2017** **(n=89)**	**2016** **(n=91)**
Mean AUDIT-C score (SD)	**3.3 (3)**	3 (4)	4 (4)	4 (4)
Score of concern (%)	**36**	25	37	33

Note. Highest possible score is 12. *$p<0.050$; **$p<0.010$; ***$p<0.001$ for 2018 versus 2019.

Overdose

Non-Fatal Overdose

There has been some variation in the way questions about overdose have been asked over the years. In 2019, participants were asked about their past 12-month experience of overdose where symptoms aligned with examples provided and effects were outside their normal experience or they felt professional assistance may have been helpful. We specifically asked about:

- **opioid overdose** (e.g. reduced level of consciousness, respiratory depression, turning blue, collapsing and being unable to be roused). Participants who reported this experience were asked to identify all opioids involved in such events in the past 12 months;

- **stimulant overdose** (e.g. nausea and vomiting, chest pains, tremors, increased body temperature or heart rate, seizure, extreme paranoia, hallucinations, anxiety or panic); and

- **'other drug' overdose** including alcohol, cannabis, amyl nitrite/alkyl nitrite, benzodiazepines, NPS, pharmaceutical stimulants or any other drug.

It is important to note that events reported across the drug types may not be unique given high rates of polysubstance use amongst the sample. Each year we compute the total per cent of participants who have experienced any past 12-month overdose event by looking for any endorsement across the drug types queried (see below) but note that estimates may vary over time because of changed nuance in asking by drug type.

Just over one-quarter of participants (27%) reported experiencing a non-fatal overdose in the past 12 months, similar to the 21% reported in 2018 (Figure 30). Opioid overdoses were the most common form of non-fatal overdose (24% of participants), with heroin the drug most commonly involved (85% of opioid overdoses) (Table 3).

Of those who had overdosed on heroin in the last year (n=21), 24% reported receiving Narcan® on the occasion of their last overdose; 38% reported that an ambulance had attended, and 24% reported receiving CPR from a friend, partner, or peer. Nearly a quarter (24%) reported receiving no treatment on their last occasion of overdose.

Please contact the Drug Trends team (drugtrends@unsw.edu.au) to request further findings regarding non-fatal overdose in the IDRS sample.

Figure 30: Lifetime and past 12 month non-fatal overdose, Queensland, 2000-2019
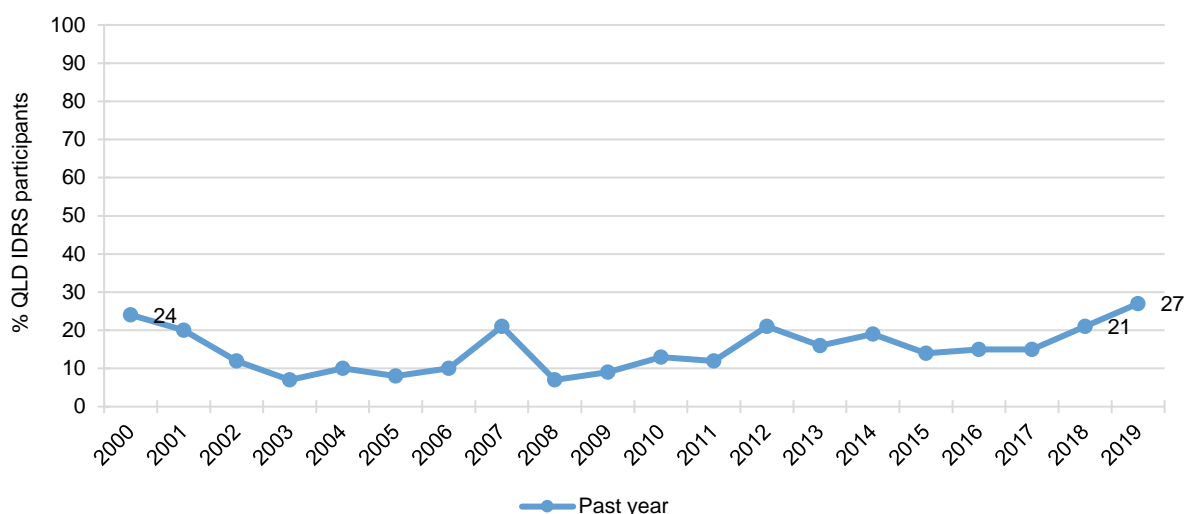
Note. Estimates from 2000-2005 refer to heroin and morphine non-fatal overdose only. Data labels have been removed from figures in years 2017 and 2018 with small cell size (i.e. n≤5). *$p<0.050$; **$p<0.010$; ***$p<0.001$ for 2018 versus 2019.

Table 3: Past year non-fatal overdose by drug type, Queensland, 2015-2019

	National 2019	Queensland 2019	2018	2017	2016	2015
Heroin overdose	N=890 12	**N=109 20**	N=103 8	N=103 7	N=91 7	N=81 6
Methadone overdose	N=890 1	**N=109 0**	N=98 -	N=69 -	N=91 -	N=98 0
Morphine overdose	N=890 1	**N=109 -**	N=98 -	N=62 -	N=91 -	N=97 -
Oxycodone overdose	N=890 -	**N=109 -**	N=98 -	N=91 -	N=91 0	N=97 -
Other drug overdose (including stimulants)	N=889 8	**N=109 5**	N=97 -	N=91 5	N=91 5	N=94 6
Other drug overdose (not including stimulants)	N=887 3	**N=109 -**	n/a	n/a	n/a	n/a
Any drug overdose	N=890 21	**N=109 27**	N=98 21	N=91 15	N=91 15	N=98 14

Note. Participants reported on whether they had overdosed following use of the specific substances; other substances may have been involved on the occasion(s) that participants refer to. – Values suppressed due to small numbers (n≤5 but not 0). n/a participants not asked. *$p<0.050$; **$p<0.010$; ***$p<0.001$ for 2018 versus 2019.

Naloxone Program and Distribution

Naloxone is a short-acting opioid antagonist that has been used for over 40 years to reverse the effects of opioids. In 2012, a take-home naloxone program commenced in the ACT (followed by NSW, VIC, and WA) through which naloxone was made available to peers and family members of people who inject drugs for the reversal of opioid overdose. In early 2016, the Australian Therapeutic Goods Administration placed 'naloxone when used for the treatment of opioid overdose' on a dual listing of Schedule 3 and Schedule 4, meaning naloxone can be purchased OTC at pharmacies without a prescription, and at a reduced cost via prescription.

Awareness of Naloxone and Training Programs: In 2019, 94% of participants indicated that they were familiar with Naloxone; the highest proportion reported since data collection began (85% in 2013), and a significant increase from 2018 (80%, p=0.003). There was also a significant increase in the proportion of participants who reported they were familiar with the take-home naloxone programs (69%, versus 45% in 2018; p<0.001) (Figure 31).

Participation in Training Programs: The proportion who had been trained in naloxone administration increased to 27% in 2019 from 12% in 2018 (p=0.04) (Figure 31).

Awareness of Naloxone Scheduling and Products: The proportion of participants aware that naloxone is available over the counter remained relatively stable (27% in 2019, 25% in 2018) (Figure 31).

Use of Naloxone to Reverse Overdose: Of those who had completed the take-home naloxone program (n=29), 41% (n=12) had subsequently used the naloxone to resuscitate someone who had overdosed.

The number of participants who reported being resuscitated with naloxone by someone who had been trained through the take-home naloxone program and reported that they had obtained naloxone OTC without a prescription from a pharmacy were too low to report (n≤5).

Figure 31: Take-home naloxone program and distribution, Queensland, 2013-2019
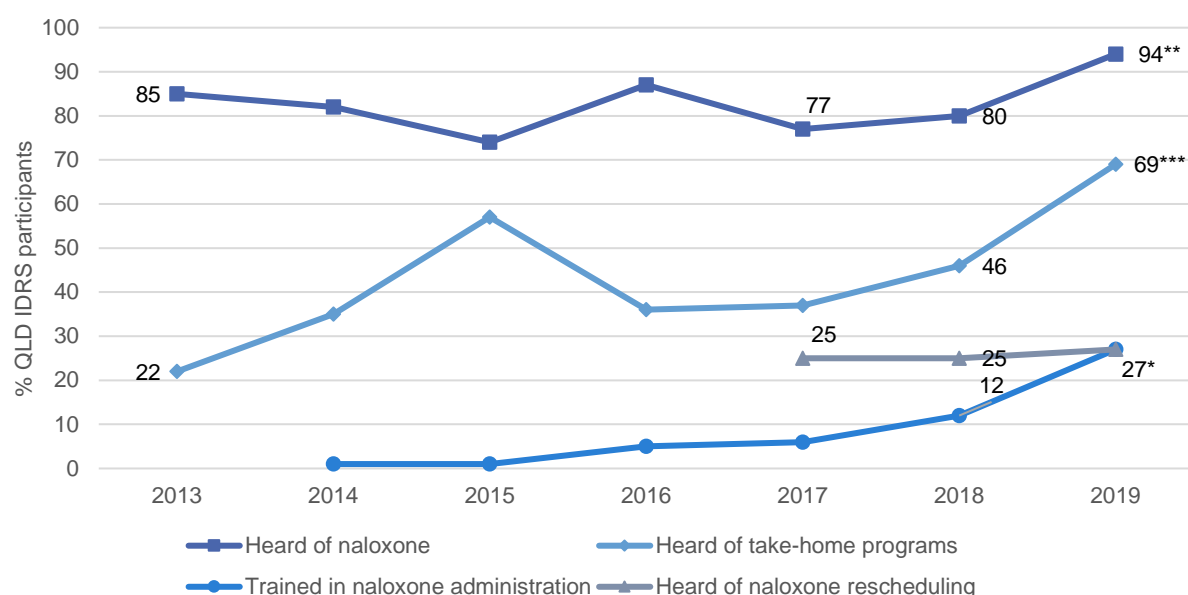
Note. Data labels have been removed from figures in years 2017 and 2018 with small cell size (i.e. n≤5 but not 0). *p<0.050; **p<0.010; ***p<0.001 for 2018 versus 2019.

Injecting Risk Behaviours and Harms

Injecting Risk Behaviours

In 2019, one in ten participants in this sample reported receptive sharing (9%), and just over one in ten reported distributive sharing (13%) in the past month (Figure 32, Table 4).

Regarding injecting behaviour in the past month, 41% reported that they had injected someone else after injecting themselves, while 23% were injected by someone else who had previously injected (Table 4).

In 2019, 40% of participants reported re-using their own needles or syringes in the past month, suggesting the decreases since 2009 may have plateaued (33%; 35% in 2018; p=0.498) (Figure 32, Table 4).

Most participants (77%) reported that they had last injected in a private home (76% in 2018), with a public toilet (14%; 8% in 2018) the next most common location (Table 4).

Figure 32: Borrowing and lending of needles and sharing of injecting equipment in the past month, Queensland, 2000-2019
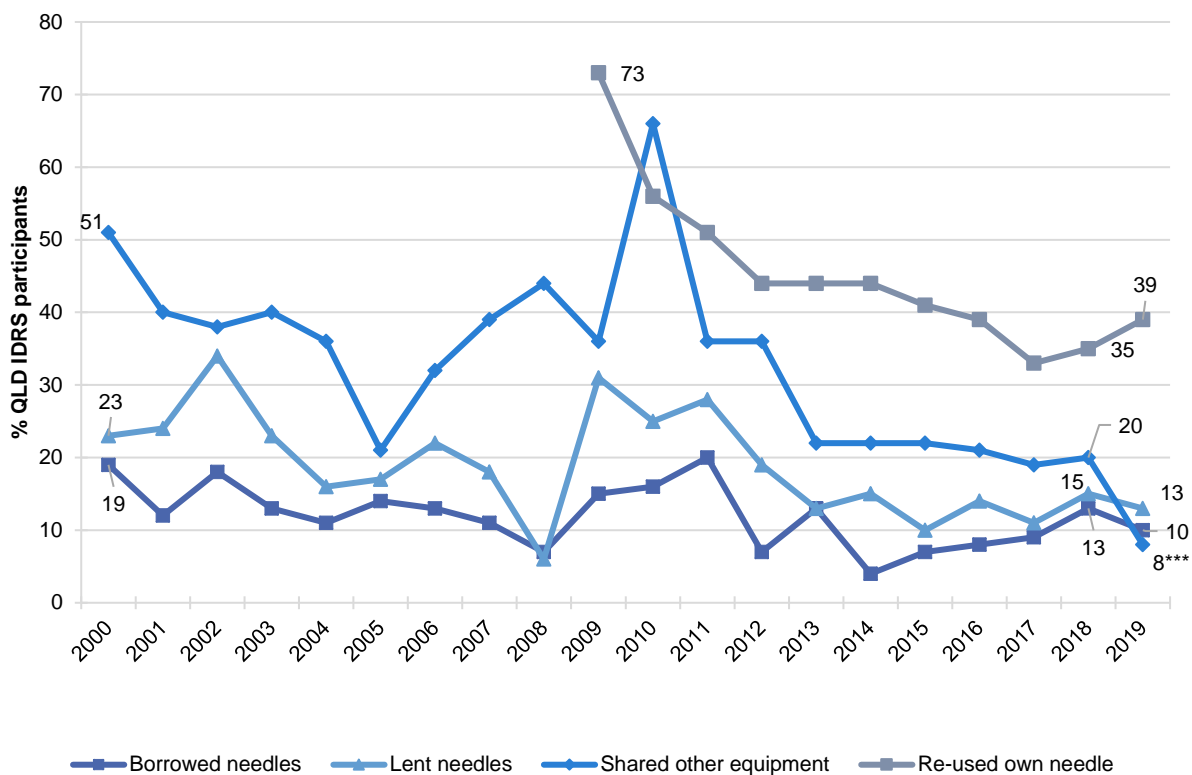
Note. Data collection for 'reused own needle' started in 2008. Borrowed (receptive sharing): used a needle after someone else. Lent (distributive sharing): somebody else used a needle after them. Data labels have been removed from figures in years 2018 and 2019 with small cell size (i.e. n≤5 but not 0). *p<0.050; **p<0.010; ***p<0.001 for 2018 versus 2019.

Table 4: Sharing and re-using needles and injecting equipment in the past month, Queensland, 2014-2019

	National	Queensland					
	2019 n=893	2019 n=109	2018 n=103	2017 n=103	2016 n=91	2015 n=98	2014 n=100
% Injecting behaviours past month							
Borrowed a needle	8	**9**	13	9	8	7	4
Lent a needle	11	**13**	15	11	14	10	15
Shared any injecting equipment ^	5	**7**	20	19	21	22	22
Shared spoon/mixing container #	86	-	65	75	79	64	77
Shared filter #	-	-	15	35	26	13	9
Shared tourniquet #	43	-	30	60	16	36	14
Shared water #	45	-	25	40	37	27	14
Shared swabs #	21	-	15	30	0	0	0
Shared wheel filter #	-	**0**	-	15	-	-	0
% Reused own needle	44	**39**	36	33	39	41	44
% Reused own injecting equipment ^	28	**27**	52	50	65	48	55
% Injected partner/friend after injecting self (with either a new or used needle)	35	**41**	36	25	29	/	/
% Somebody else injected them after injecting themselves (with either a new or used needle)	21	**23**	17	18	19	/	/
% Location of last injection							
Private home	77	**76**	76	74	79	90	80
Car	4	**5**	-	-	6	-	12
Street/car park/beach	7	-	10	6	8	-	-
Public toilet	7	**14**	8	12	8	-	-
Other	5	-	-	-	-	-	-

Note. ^ Includes spoons, water, tourniquets and filters; excludes needles/syringes. # amongst those who reported sharing any injecting equipment. ˜ New or used needle. Borrowed (receptive): used a needle after someone else. Lent (distributive): somebody else used a needle after them. - Values suppressed due to small cell size (n≤5 but not 0). / Participants first asked about injecting other and being injected by others in 2016. *p<0.050; **p<0.010; ***p<0.001 for 2018 versus 2019.

Self-Reported Injection-Related Health Problems

In 2019, over half (54%) of participants reported an injection-related health issue in the month preceding interview, compared to 79% in 2018 (Figure 33, see following page). Note that this difference may be impacted by changes in the injection-related problems included in the questionnaire in 2019; 'scarring/bruising' and 'difficulty injecting' were not included, which were previously the most commonly reported problems.

The problems most commonly identified by participants in 2019 were dirty hits (32%), nerve damage (23%), skin abscesses or cellulitis (15%) and artery injection (15%) (Figure 33).

Figure 33: Injection-related issues in the past month, Queensland, 2019
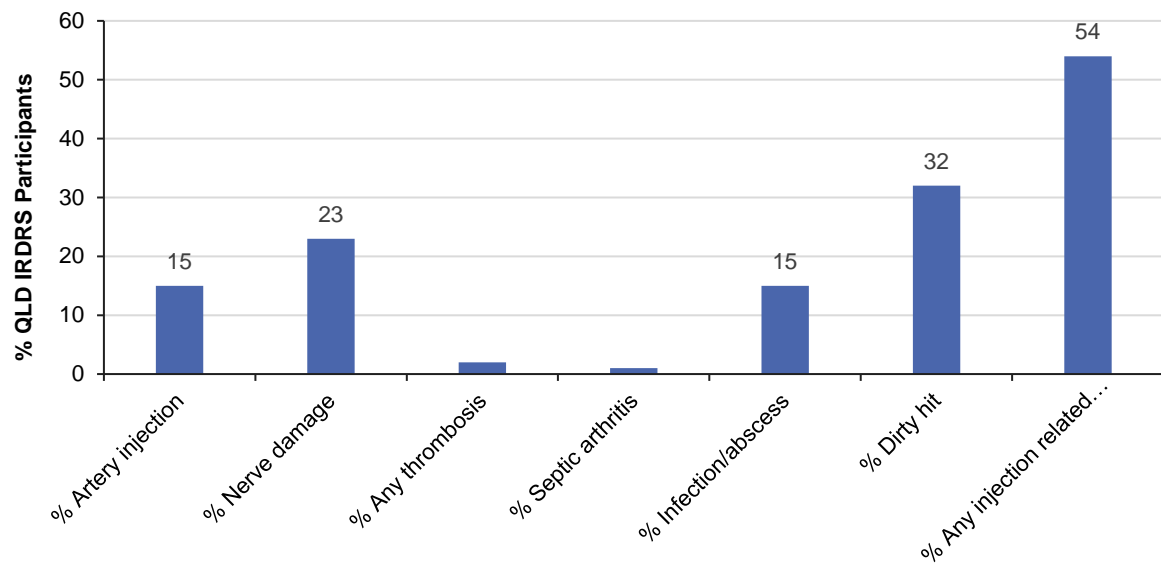
Note. Y axis reduced to 60% to improve visibility of trends. Data labels have been removed from figures with small cell sizes (i.e. n≤5 but not 0).

Drug Treatment

Nearly three-fifths (58%) of participants reported that they were currently in some form of treatment for their substance use in 2019. Among those receiving treatment, the most common forms were methadone (43%) and drug counselling (40%) (Table 5).

Of those people who had used methamphetamine in the past year (n=81), 15% reported receiving treatment for their methamphetamine use from a drug treatment centre in the same period (18% of those who reported weekly or more frequent use of methamphetamine).

A small number of participants (n≤5) reported that they had recently tried but were unable to access drug treatment.

Table 5: Current drug treatment, nationally and Queensland, 2014-2019

	National N=901 2019	Queensland					
		N=109 2019	N=103 2018	N=103 2017	N=91 2016	N=98 2015	N=100 2014
% Current drug treatment	41	**58**	54	54	46	39	53
Methadone	25	**43**	52	49	44	47	49
Buprenorphine	2	**14**	14	15	21	21	15
Buprenorphine-naloxone	9	**25**	43	25	16	18	23
Drug counselling	9	**40**	14	10	14	-	9
Other	5	**16**	-	0	-	-	-

Note. For treatment types, percentages are of those who are in treatment. Wording of items changed in 2018 from 'main type of treatment' to 'current treatment/s'. Numbers suppressed when n≤5 (but not 0). *$p<0.050$; **$p<0.010$; ***$p<0.001$ for 2018 versus 2019.
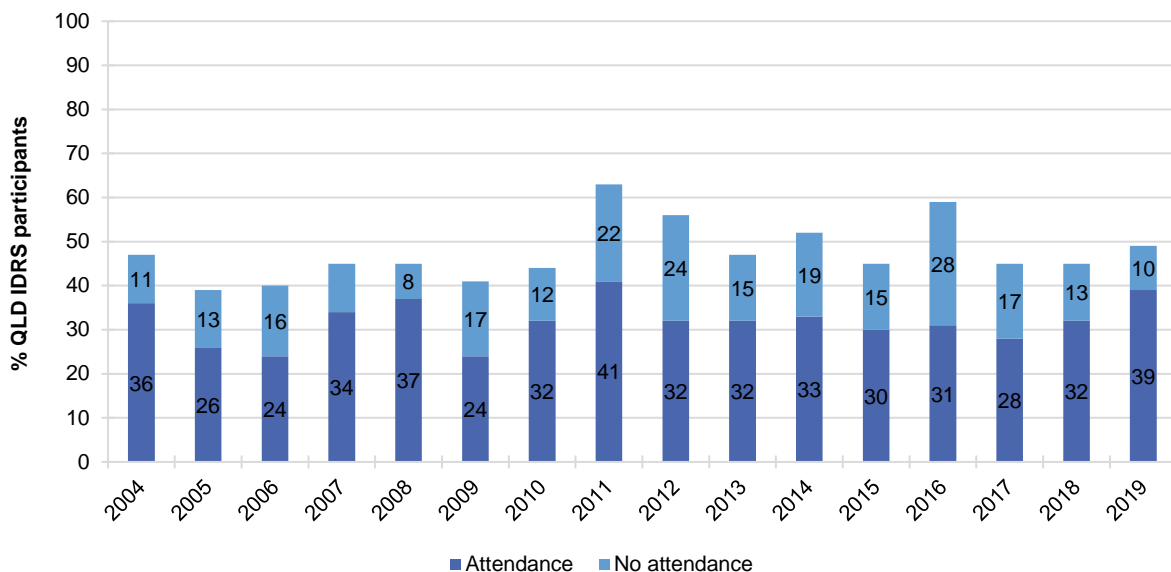
Mental Health

In 2019, 49% of the sample self-reported that they had experienced a mental health problem in the preceding six months compared to 46% in 2018 (Figure 34).

Amongst this group, the most commonly reported problems were anxiety (67%), depression (54%) and post-traumatic stress disorder (33%). Five or fewer participants reported experiencing all other mental health problems.

Nearly two in five (39%) participants (79% of those who reported a mental health problem; compared to 71% in 2018) had seen a mental health professional during the last six months, most commonly a GP (62% of those who had sought treatment), psychiatrist (41%), psychologist (26%), or a counsellor (36%) (Figure 34).

Of those who reported a mental health problem and seeing a mental health professional, 71% had been prescribed medication for their mental health problem in the preceding six months, compared to 88% in 2018.

Figure 34: Self-reported mental health problems and treatment seeking in the past six months, Queensland, 2004-2019

Note. Stacked bar graph of % who self-reported a mental health problem, disaggregated by the percentage who reported attending a health professional versus the percentage who have not. *p<0.050; **p<0.010; ***p<0.001 for 2018 versus 2019.
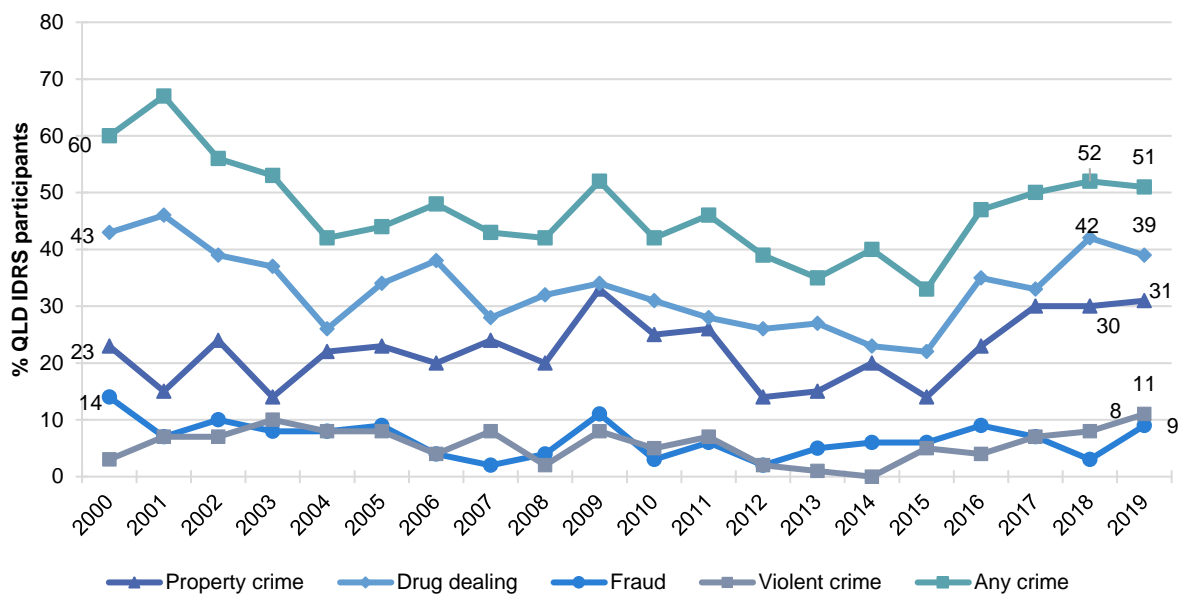
Crime

Approximately two-fifths (42%) of participants reported being arrested in the 12 months preceding interview, consistent with previous years (41% in 2018) (Figure 35).

Two-thirds (65%) of participants reported a history of imprisonment, also consistent with previous years (64% in 2018).

Self-reported criminal activity in the previous month has fluctuated since monitoring first began, with 39% reporting drug dealing and 31% reporting property crime in the past month in 2019 (Figure 35). One in ten (12%) of participants reported being the victim of violent crime in the past month, a similar figure to 2018 (9%).

Figure 35: Self-reported criminal activity in the past month, Queensland, 2000-2019

Note. 'Any crime' comprises the percentage who report any property crime, drug dealing, fraud and/or violent crime in the past month. Data labels have been removed from figures in years 2018 and 2019 with small cell size (i.e. n≤5). *$p<0.050$; **$p<0.010$; ***$p<0.001$ for 2018 versus 2019.