Title: Differences in methamphetamine use patterns, experiences of related harms and utilisation of professional support among metropolitan vs. regional and rural users of methamphetamine in Victoria

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Introduction/Aims: Limited research has examined methamphetamine use in non-metropolitan Australia. This study describes the characteristics, patterns of methamphetamine use, related harms and service utilisation trends among study participants recruited in metropolitan Victoria (Melbourne) versus three major Victorian regional hubs.

Method: This paper presents baseline data from an ongoing prospective cohort study. Eligible participants were aged >18 years and reported >monthly methamphetamine use in the past six months. Inference for descriptive comparisons in prevalence was determined using Pearson chi-squared tests of independence.

Results: Participants (N=732) were recruited between June 2016-April 2017. While there were no differences between the urban and non-metropolitan sites overall with regard to participant gender (61% vs. 61% male, respectively), Melbourne-based participants were significantly (p<0.05) more likely to be older (mean age=35 vs. 32 years), non-heterosexual (24% vs. 8%), non-Indigenous (97% vs. 81%) and employed (39% vs. 13%). Lifetime and recent crystalline methamphetamine/‘ice’ use was significantly more prevalent among regional/rural participants compared to those from Melbourne (97% vs. 87%). Non-metropolitan participants were significantly more likely to report combining methamphetamine and other substances (98% vs. 86%). There were no significant differences in use frequency or amount of methamphetamine last used across sites overall. Generally, rates of lifetime and recent methamphetamine-related service access were comparable across urban and non-metropolitan participants; however, there were differences between specific sites. Regional/rural participants were significantly more likely to report methamphetamine-related legal and financial problems and lower self-perceived social support.

Discussion/Conclusions: Our findings provide a unique empirical insight into methamphetamine use in non-metropolitan Victoria. More harmful use patterns among non-metropolitan participants, yet comparable levels of professional support utilisation, indicates the potential for greater adverse consequences among regional/rural methamphetamine users.

Implications for Practice/Policy/Translational Research: Targeted harm reduction and referral initiatives, and education of service providers, could address problematic methamphetamine use in non-metropolitan areas of Victoria.
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