

DRUG CHECKING IN AUSTRALIA: DESIRED SERVICE DESIGN FEATURES AMONG A SAMPLE OF PEOPLE WHO USE HEROIN

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Background:

To-date, the drug checking debate in Australia has mainly focused on 'festival' settings, with people who inject drugs and/or use heroin largely excluded from the conversation. This paper aims to examine support for drug checking among a sample of people who use heroin, and to identify desired service design features.

Methods:

Survey of 72 people who had used heroin in the past six months, recruited from Kirketon Road Centre and Rankin Court, Sydney, Australia.

Results:

The vast majority (93%; n=67) of participants reported that they would like to be able to access a drug checking service to have their drugs tested, with almost all these participants (97%; n=65) reporting that it would be 'acceptable' to give up a pinhead's worth of their drugs for testing. Among those who wanted to be able to access a drug checking service, 99% reported that they would like to have their drugs tested for purity, and 93% for contents (psychoactive and non-psychoactive). The preferred locations for a drug checking service were supervised injecting centers (73%), and needle and syringe programs (53%). The length of time that people were willing to wait to receive the results varied, although most (66%) reported they would be willing to wait between 1-29 minutes. Interestingly, most participants had no concerns about drug checking (60%), although 37% did report concern about potentially being targeted by police. Almost all participants (99%) reported that they would like to receive drug alerts, with SMS (76%) and in-person (when attending a health service; 34%) being the preferred modes of communication.

Conclusion:

People who inject drugs and/or use heroin desire objective information about the contents and/or purity of their drugs. It is essential that this population are included in the drug checking conversation, with consideration given to their desired service design features.

Disclosure of Interest Statement:

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