

BACK TO BASICS: PARTYING WITH METHAMPHETAMINE IN SOUTH AUSTRALIA

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I am talking about methamphetamine in a South Australian sample of party drug users, and the data that I am presenting comes from the Party Drugs Initiative (PDI), which you have already heard quite a bit about. The project is conducted in South Australia by DASC (Drug and Alcohol Services Council) and is funded by the National Drug Law Enforcement Research Fund. I will not go into too much detail about the Party Drugs Initiative, but I will say that the party drugs module has been conducted by DASC in South Australia for the past four years, and that was the earlier version of the PDI which evolved from the RDRS study. I would also like to acknowledge the support of NDARC, as well as the party drug users and key informants that participated, without whom we would not have this project at all.

Today's presentation will give you a snapshot of the South Australian, or more specifically the Adelaide PDI sample, in terms of their drug use patterns; looking at how they are different and speculating why that may be, particularly with regards to methamphetamine use, but also looking at whether we have a sub group of heavier or more frequent users. I will touch briefly on the harms associated with that use, and in covering these areas I am really raising the question: "what are the implications of use being a bit different?"

To start with I want to explain a point of methodology and terminology to ensure you understand what I am talking about. We ask users to distinguish between the three main forms of methamphetamine that are available in Australia; the first being powder, which is more commonly known as speed, which comes in various different colours. The base or more pasty form, which in South Australia tends to come as a wet, semi-crystalline, jellyish solution; and also the much purer crystal or 'ice' form, which looks like crushed up ice or sugar. So this is how I will refer to them, as powder, base and crystal.

Looking at the demographics of the sample in South Australia, they have a mean age of around 24 years, about 63% of them are male, and they are largely well-educated, and either employed or studying full time. You can also see that this does not differ very much from the national sample – so basically the demographics of the South Australia sample are very similar to the national sample.

When we look at the South Australian sample's drug use patterns we can also see that they are poly drug users, having used a median of seven drug types in the last six months. There is only a small proportion, 5%, that have injected any drug in the last six months. The patterns of ecstasy use in the South Australian sample are also similar to the national sample, with a median of twelve days use in the last six months, which is roughly equivalent to fortnightly use. A median of two ecstasy pills per session are used in an average session, and the most is four in a heavy session. Also 95% report mainly using their ecstasy by swallowing.

This graph (refers to screen) shows the proportion of the South Australian sample reporting use of each drug in the last six months, remembering that this sample is recruited on the basis of their ecstasy use, so there is 100% there. But you can also see that alcohol, cannabis and tobacco are widely used. What is most different here from the national sample is the breakdown of the methamphetamine types. The prevalence or use of powder and crystal forms of methamphetamine is similar to what we have seen nationally, but we have an escalated prevalence of base use. This shows that the proportion reporting base use in South Australia is basically double that reported in most of the other jurisdictions around Australia.

The South Australian sample also report using base more frequently during the same time period than any other jurisdiction. We have a median of seven days use in the last six months and that is roughly double most of the other jurisdictions except for Queensland. The next two slides look at the trends in methamphetamine use in South Australia over the four years that we have collected data. This shows the trend in the proportion reporting recent use (in the last six months) since 2000 – the most dramatic change has been the rise and drop in crystal, from 80% reporting use in 2002 to about 50% reporting use in 2003. There has also been a slight decrease in use of the other forms of methamphetamine since last year as well. In terms of the frequency of use, over the same time frame there has been a rise in the median reported days of use of each of the forms in 2002, when they were all at 10 days, and they have all dropped in 2003. And again this is most dramatic for the crystal.

We can get some clues as to why these trends are happening from the data we collect, which reflects the state of the market for methamphetamine in South Australia. We ask users to report their perceptions of purity and availability as well as price of the different forms of methamphetamine. As you would expect, there is a higher proportion of the sample reporting crystal as having high purity than powder and base. So it does not seem as though people are turning to using base as they think it is of better quality or more pure than crystal. The price for base and crystal is reported to be the same - \$25 per point or \$200 per gram for either base or crystal. So again this does not appear to be the reason why people are turning towards using base. However, a larger proportion believe it is easy or very easy to obtain base methamphetamine as compared to crystal – 74% compared to 53%. Users were also reporting that the availability of crystal methamphetamine had decreased since 2002.

This data is backed up by what we know about local production of methamphetamine in South Australia, which so far is predominantly production of the base form of methamphetamine. And this slide (refers to screen), which was provided by South Australia police, shows the escalation in the detection of clandestine laboratories since 1998, rising from 8 labs detected in 1998 to 45 detected last year. The numbers for 2004, if they continue at the same rate, will be above last year, so we have a continuing rise in clandestine lab detections in South Australia which I am not sure is happening anywhere else except Queensland.

To summarise what I have said so far, we see a different pattern of methamphetamine use in South Australia from the national sample and from most other states. Specifically we see higher prevalence and frequency of base use, and that seems to be reflective more of our local market rather than the demographic or drug use patterns of our sample. But what we have also been hearing in South Australia, from both

users and key informants, is that there appears to be a group of users particularly associated with the hardcore music scene that use methamphetamine frequently and are more likely to use ketamine and GHB.

So I did some rough analysis of the data to see if we could identify that, by splitting the sample into frequent base users (those using on more than the median seven days in the last six months) and compared them to the rest of the party drug using sample. We found no significant difference in the age or gender of the sample, but the frequent base users were significantly more likely to be past or recent injectors, and also more likely to have used a number of other drugs more frequently, in particular ecstasy, other forms of methamphetamine, MDA and GHB. They also reported use of more ecstasy and base in a typical session on average compared to the rest of the sample.

This slide (refers to screen) shows the proportion of the sample that report typically using other drugs, either with ecstasy or when coming down from ecstasy, and the sample has been split again into frequent base users and the rest of the sample. There is a general tendency towards frequent base users to also use other drugs in combination with ecstasy – the numbers are pretty small, and the only one that was significant was base use, with frequent base users more likely to combine base with ecstasy.

We also saw that frequent base users were significantly more likely to have binged and to have done so for a longer time. We have a greater proportion of frequent users reporting use of ecstasy, methamphetamine, other types of methamphetamine, alcohol and cannabis during a binge compared to the rest of the sample, with these differences being significant only for base and cannabis use.

I am briefly going to touch on some of the harms or side effects experienced by the South Australian sample. There was a median of 17 acute side effects reported as attributable to recent party drug use, and by far the most commonly involved drugs were ecstasy and base methamphetamine. We also saw that while ecstasy was predominantly held responsible for the harms related to social, financial or work and study aspects of people's lives, methamphetamine was also considered as problematic. And you would expect this generally to be worse for frequent users of methamphetamine.

So to summarise, party drug users in South Australia are much the same of others around Australia in their demographics, their patterns of ecstasy use and in being poly drug users, but they do have a higher prevalence of base methamphetamine use and that is most likely reflective of the local production of this form, and the fact that it is cheap and more widely available than crystal. There is also some evidence from the analysis I have just described of a sub group of users which use base frequently, that are more likely to inject, to use other drugs more frequently, to use more ecstasy and base in a typical session, to use other drugs in combination with ecstasy, and to binge and to binge longer. We also know that side effects and harms are most often attributed to ecstasy and base use, and that increased frequency of use is likely to be associated with increased frequency of harms.

Implications: These are rough analyses, but they point to the fact that we have enough evidence to look more closely at patterns of methamphetamine use, perhaps in relation to specific scenes within the club culture, to highlight what groups are more susceptible to harms particularly in relation to bingeing and combination drug use. The use of base is quite specific to South Australia but that does not mean the same thing is not happening in other states with other forms of methamphetamine, in particular crystal, and even that we will not see that happening in South Australia if we do get an influx of crystal. So that is why the Party Drug Initiative is so important to keep track of what is happening and how that might change.

Thank you.