



NATIONAL DRUG AND  
ALCOHOL RESEARCH CENTRE

## **NEW STUDY EXAMINES INJECTING DRUG USE IN RURAL AUSTRALIA**

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Injecting drug users who live in rural areas are more likely to report injecting morphine and use benzodiazepines than their metropolitan counterparts, according to a study released today. They are also less likely to use needle syringe programs and wait a significantly longer time between testing for blood borne viruses, such as HIV and hepatitis.

Fifty per cent (50%) of the rural IDU interviewed had ever injected morphine compared to 21% of the metropolitan users. This use of morphine is consistent with recent increases in morphine prescriptions nationally. The changes may also be due to recent reductions in heroin availability, which lead to significant changes in drug use. It is likely that rural markets, which are probably supplied via the larger markets, may have been more vulnerable.

The study released by the National Drug and Alcohol Research Centre (NDARC) from the University of New South Wales interviewed 260 injecting drug users (IDU), 164 from rural areas and 96 from metropolitan areas.

Associate Professor Kate Dolan was one of the authors of the report.

“There is a great deal of research examining IDU who live in metropolitan areas, however, we know little about those who reside in rural areas,” said Dr Dolan. “This research gives us an insight into a hidden population that we knew very little about previously.”

Rural injectors reported drug use to be highly stigmatised, with many participants complaining of their community’s views of drug users and pharmacotherapy (e.g. methadone) clients.

Many rural participants also commented on the expense of buying new needles/syringes from vending machines and reported the cost to be a major disincentive and access barrier. There were also complaints about the location of vending machines being in obvious spots in town centres. These problems were compounded by poor public transport, especially as many IDU did not have access to private transport.

Quality of life was also examined in the study, with rural injectors reporting a lower global quality of life score than their metropolitan participants. Areas examined included health, housing, partnership, family and money.

“This study quite clearly shows that there are a number of areas of concern that affect rural injectors,” said Dr Dolan. “We have a great track record in Australia in preventing HIV amongst IDU, if we wish this to continue we need to focus attention on rural issues, particularly areas such as stigma, access to treatment and service provision.”

“Australia has probably the best needle and syringe program in the world. However this study highlights a few areas where improvements are needed, particularly in relation to access to injecting equipment.”

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For further information contact Paul Dillon

9385 0226 (W)  
0419 402 099 (M)