Intended risk reduction behaviours following an unexpected result at Queensland's first fixed-site community drug checking service: A cross-sectional analysis

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Introduction: Drug checking in Australia is predominantly delivered at events, with limited evidence from fixed-site community services[1-3]. An unexpected result (contains a substance the client did not anticipate) is known to prompt changes in intended risk-reduction behaviour but with limited examination in fixed-site settings[2]. A review of the literature reveals that in addition to the current research, only one other study has adopted robust quantitative methods to explore this question[4]. CheQpoint, Queensland's first fixed-site community drug checking service, provides the first opportunity to examine this in an Australian setting.

Methods: Data from 248 samples submitted to CheQpoint between April 2024 and April 2025 were analysed using a retrospective observational design. Multivariable logistic regression was applied to estimate associations between detection of an unexpected psychoactive substance and clients' intended risk-reduction behaviour (intention to dispose of sample or take a smaller amount) controlling for a set of known covariates.

Results: Of 248 clients (median age 35 (IQR 26-46); 72% cisgender men), 35.9% intended to reduce their risk. Intention was reported by 76.9% of clients who received an unexpected result versus 31.1% whose sample contained only their expected substance. An adjusted model found receiving an unexpected result carried more than six times the odds of intended risk reduction (aOR 6.24; 95% CI 2.32–16.78; $p<0.001$).

Discussions and Conclusions: This association was stronger than the twofold effect reported in the literature[4]. This difference may partly reflect that CheQpoint measured intended risk reduction, whilst the comparative literature measured actual risk reduction[4]. CheQpoint also served a less opioid-dependent population than the comparative literature[4].

Implications on communities, practice, policy and/or First Nations communities: Receiving an unexpected result heightens a client's willingness to reduce risk but willingness was also common among clients whose results were expected. As services expand nationally, this data supports embedding harm-reduction services in every DCS health conversation.

References:

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Disclosure of Interest Statement:
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