

"We're gonna want to know the label's right": Co-designing a drug checking service for anabolic-androgenic steroid (AAS) consumers

Piatkowski, T.,^{1,3,4} Puljevic, C.,^{2,3} Francis, C.,³ Kill, E.,^{3,4} Ferris, J.^{2,4} & Dunn, M.^{3,5}

Contact: t.piatkowski@griffith.edu.au

1 Griffith University
2 University of Queensland
3 The Loop, Australia
4 Queensland Injectors Voice for Advocacy and Action
5 Deakin University



Introduction

- Of the current harm reduction initiatives available drug checking is presently surrounded by the most contention in Australia [1].
- Drug checking is an integrated service allowing consumers to have their substances analysed and receive harm reduction advice [2].
- With the advent of drug checking in Queensland, where there is a high proportion of anabolic-androgenic steroid (AAS) consumers, this study scoped the needs of previously under considered group of substance consumers.

Methods

- This study conducted exploratory interviews and thematic analysis with 15 AAS consumers regarding AAS testing practice and what a drug checking service for AAS should look like

Results

- A narrative was developed with four overarching themes – see Table 1.
- Currently, AAS consumer's feel unsupported by Australia's harm reduction framework and consistently utilise private drug checking services – see Figure 1 for example.
- Overwhelmingly, consumer's indicate support and need for a drug checking service which caters to AAS.

Discussion and Conclusions

- This preliminary study indicates that AAS consumers are feeling poorly represented in public health responses to substance use. AAS consumers are concerned regarding the state of 'underground' product available to them and are supportive of a drug testing service which considers their unique needs.
- The data suggest testing services provide presence and purity information which is provided through anonymous and confidential means.
- Integrated harm reduction through resources and peer-led frameworks are highly sought after among this consumer group.

Implications for Practice

- Awareness and Accessibility:** Increase awareness about AAS risks and offer drug checking services to AAS users. Educate them about harms and encourage participation in testing.
- Tailored Support:** Create targeted interventions for AAS users. Offer detailed composition info and accessible test results through a web platform to empower informed choices.
- Real-time Transparency:** Use a web platform for real-time data sharing. Encourage suppliers to improve AAS quality by showcasing testing outcomes publicly.
- Confidentiality and Trust:** Provide confidential harm reduction support through fixed sites and online platforms. Respect trust while promoting safer substance use decisions.

Table 1. Participant Quotes

"You're basically playing Russian Roulette": Dangers of current AAS use
Albert: Well, it's like playing Russian roulette isn't it. Literally it's Russian roulette. You're putting something into body thinking that it's something and it certainly had to be either cooking oil or one of the I've heard stories of guys using like not knowing but injecting and having it smell like either like Rosemary oil or sesame seed oil and ending up with massive sort of welts and acne and It's almost infected sort of injection sites because they're like, I think it's, I think it's testosterone. I'll use it. And then I have this shit growing out of their arm or their leg, you know what I mean?

Respected Brands: The social and peer networks dictating supply
Paul: I guess there's probably some well not trusted, but there's well respected brands.

Henry: It's underground stuff. You know, it's not from a it's not from a chemist or a or a doctor or anything like that.
Paris: I think that it's all about finding the most reliable source you can and just trusting that it's you know, it's guessing isn't it? It's a bit of risk.

"Yeah, we're gonna want to know the label's right": Service design for AAS consumers
Bryce: Yeah, we're gonna want to know the label's right. So, presence. The concentration because you know. It's all well and good that this is testosterone but if it's under 50 milligrams per mil and it says 250 mil, I need to use five times as much. And that means the drugs five times as expensive as well.

Alexis: The compound. The purity. If there's anything that shouldn't be in there.

Henry: If you've got web portal you can log into, you can see what things were, what they are. Now, you know if you've been testing for a couple of years, you can see how things are going and that sort of stuff.

Integrating drug checking and harm reduction into public health response
Phoebe: I think with regards to harm reduction, say they had that service accessible where they could test their gear. I think if they found out what they would what either they were taking currently all they had plans to take was fake or underdosed overdose or contaminated etc., They may be less inclined to take that.



Figure 1. Privatised testing reagent kits available in Australia

References

[1] Ritter, A. (2020). Making drug policy in summer—drug checking in Australia as providing more heat than light. *Drug and Alcohol Review*, 39(1), 12-20. <https://doi.org/10.1111/dar.13018>

[2] Barratt, M.J. and Measham, F. (2022). "What is drug checking, anyway?", *Drugs, Habits and Social Policy*, 23(3). 176-187. <https://doi.org/10.1108/DHS-01-2022-0007>