CHANGES IN INJECTING DRUG USE PATTERN AND RISK BEHAVIOURS BEFORE AND DURING IMPRISONMENT: THE AUSHEP STUDY

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Background:
People who inject drugs are over-represented in the prisons globally. In Australian prisons, where approximately half of the people in prison report ever having injected drugs, opioid agonist therapy (OAT) is available, but there are no needle and syringe programs (NSP). This study assessed injecting drug use patterns before and during imprisonment in a national study of people in Australian prisons (AusHep Study).

Methods:
Randomly selected individuals from 23 representative prisons across Australia were invited to participate (2022-23). Interview-based surveys were conducted to collect data on injecting drug use behaviours in the 'one month before current imprisonment' (pre-prison) and 'during the past month in the current imprisonment' (in-prison). McNemar test was used to compare pre-prison and in-prison risk behaviours.

Results:
Among 1,599 participants (98% participation; 89% male; 49% ever injected drugs), 368 (23%) injected drugs only pre-prison, 41 (3%) injected drugs only in-prison, and 180 (11%) injected drugs both pre-prison and in-prison (Figure). The latter population were included in the analysis (n=180; 98% male; median age 32 years; median duration in prison 7 months). A higher proportion injected daily or more often pre-prison (77%, n=138) compared to in-prison (58%, n=105; p<0.001). By contrast, a higher proportion shared needles/syringes in-prison (93%, n=167) compared to pre-prison (36%, n=65; p<0.001). Higher proportions reported amphetamine and heroin as their most commonly injected drugs pre-prison (68%/n=125 and 25%/n=45, respectively) compared to in-prison [5%/n=9 (p<0,001) and 1%/n=2 (p<0.001), respectively]. However, a higher proportion reported buprenorphine as the most commonly injected drug in-prison (93%, n=167), compared to pre-prison (3%, n=6; p=<0.001). Among 167 participants reporting in-prison buprenorphine injecting, 13% (n=22) were receiving OAT in prison (n=18 received buprenorphine).

Conclusion:
Following imprisonment, increased needle/syringe sharing and a shift to opioid injecting were common, re-enforcing the need for improved OAT coverage and prison-based NSP.

Disclosure of Interest Statement:

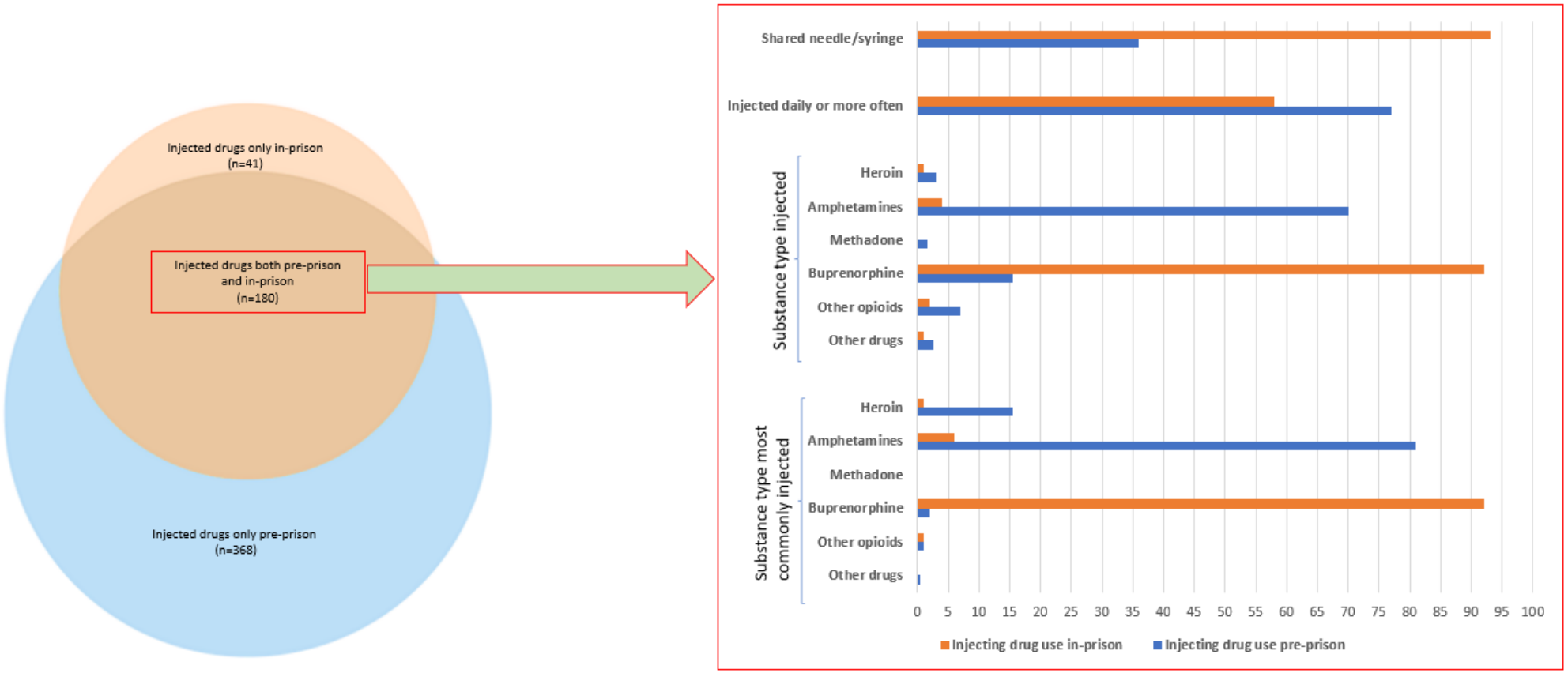

Figure: Injecting drug use behaviours before and during imprisonment