

Contraception use and menstrual health experiences amongst injecting and non-injecting groups of women who regularly use drugs in Australia

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Background:

Research has reported poorer menstrual health and lower use of contraception amongst women who use drugs compared to the general population. Evidence is dated however and does not consider heterogeneity among this group. We describe the experiences of menstruation and contraception-use between two samples of women who regularly use drugs in Australia.

Methods:

People who regularly (\geq monthly) use ecstasy and/or other illegal stimulants (n=738; Ecstasy and Related Drugs Reporting System [EDRS]) or inject illegal drugs (n=880; Illicit Drugs Reporting System [IDRS]) were surveyed April–June, 2024. People assigned female sex at birth were asked about their current use of contraception and their menstrual health in the past 12 months; data were descriptively analysed.

Results:

Women in IDRS (n=272) were older than EDRS (n=329) women (median 45 vs 23 years). About two-thirds of women in EDRS reported having experienced irregular periods (62%), heavy periods (64%), or severe period pain (69%) in the last 12 months, and 23% reported having ever had trouble affording period products in that time. About one-quarter reported that they were not currently using contraception (28%), whereas 22% reported currently using oral contraceptive pill and 27% reported condom use. About half of IDRS women reported ever experiencing irregular periods (49%), heavy periods (54%), or severe period pain (51%) within the last 12 months, and 27% reported having trouble affording period products. About two-thirds reported that they were not currently using contraception (68%), whereas 3% reported oral contraceptive pill use and 10% reported condom use.

Conclusion:

These data suggest that there is heterogeneity in experiences of SRH among different populations of women who use drugs. Collection and visibility of data which describe the experiences of these groups is an essential foundational step to understanding the burden of these experiences, and any need for policy change.

Disclosure of Interest Statement:

The authors declare no disclosures of interest.