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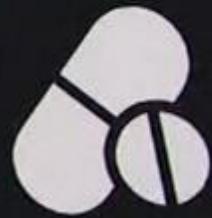
What aspects of a drug checking service are important
in a high-cost drug market?

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No funding was received for this project; there are no conflicts to declare

**PILL
TESTING
SAVES
LIVES**



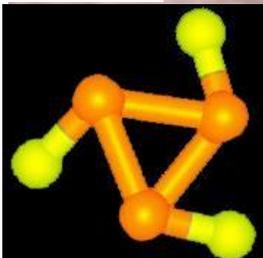
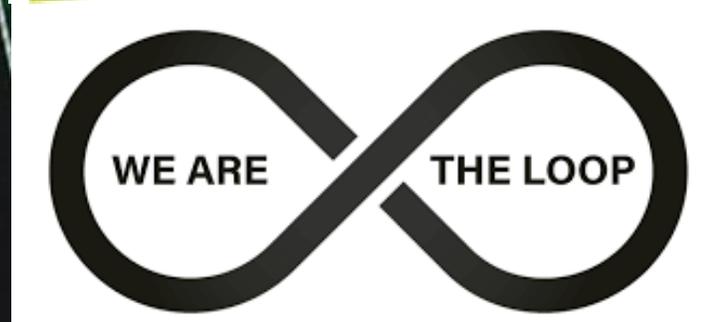
#JustTestIt

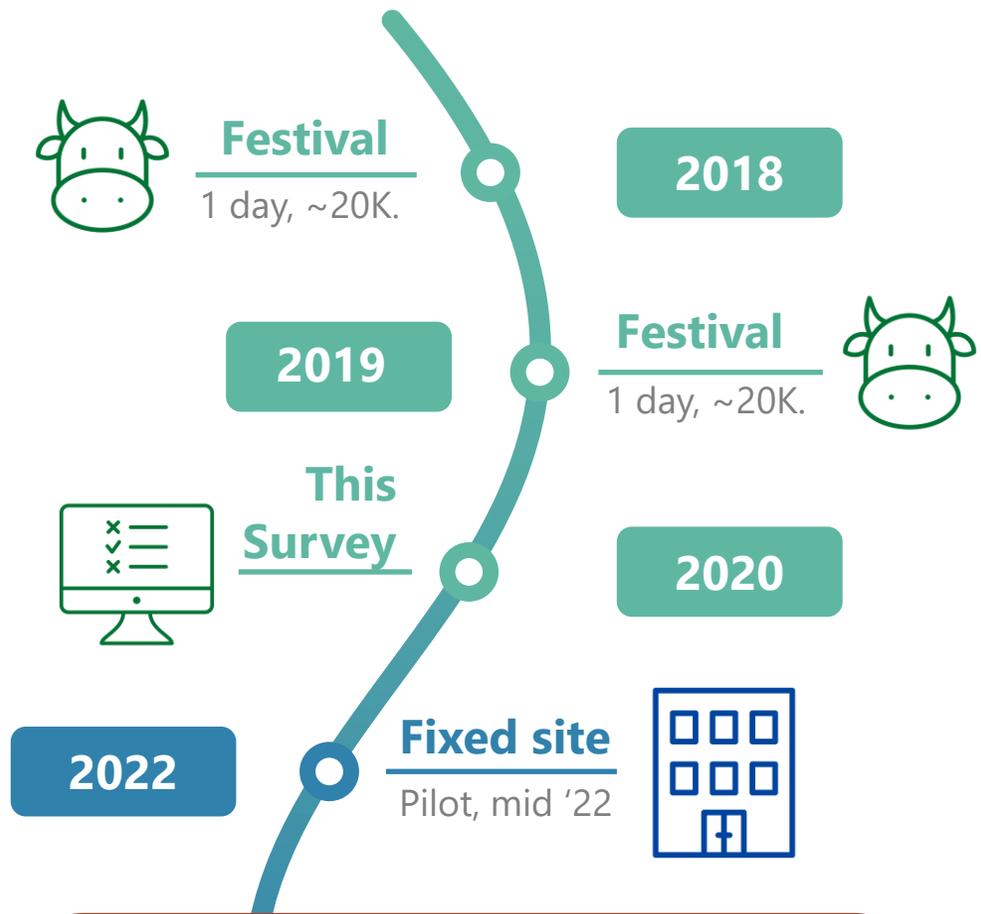


Kosmicare

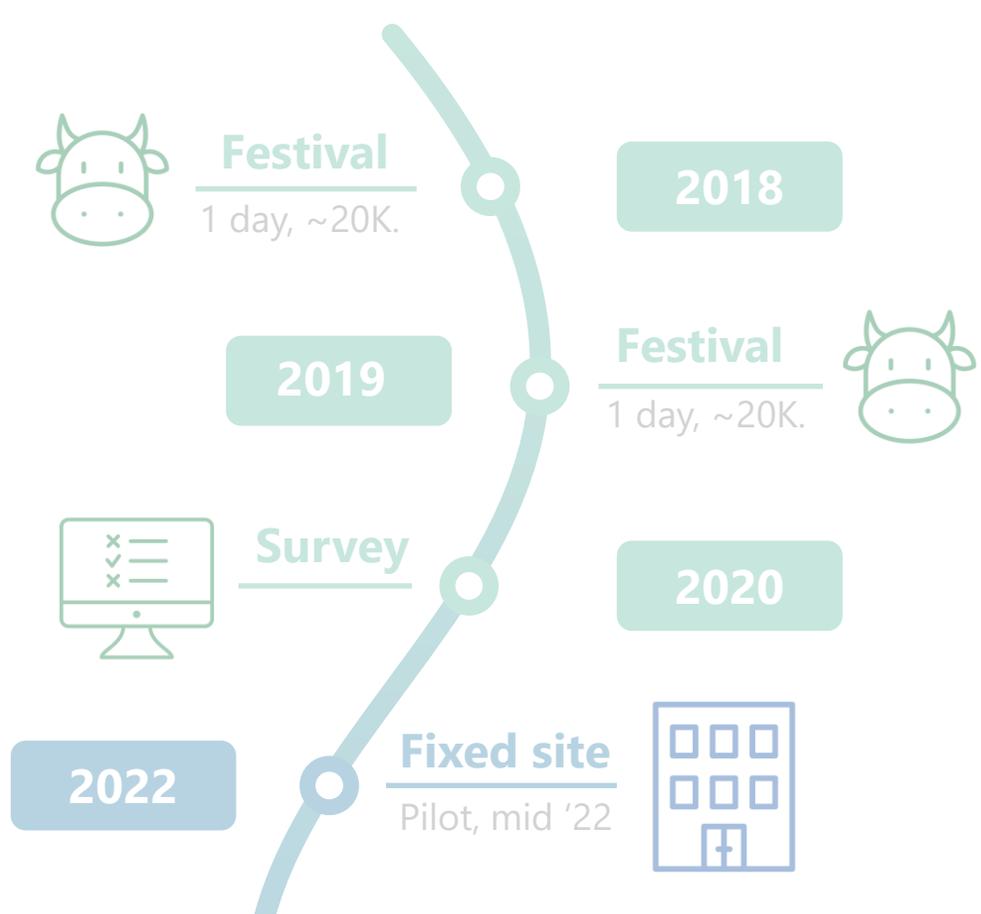


Netherlands Institute of Mental Health and Addiction





Australian timeline of active drug checking services



Australian timeline of active drug checking services

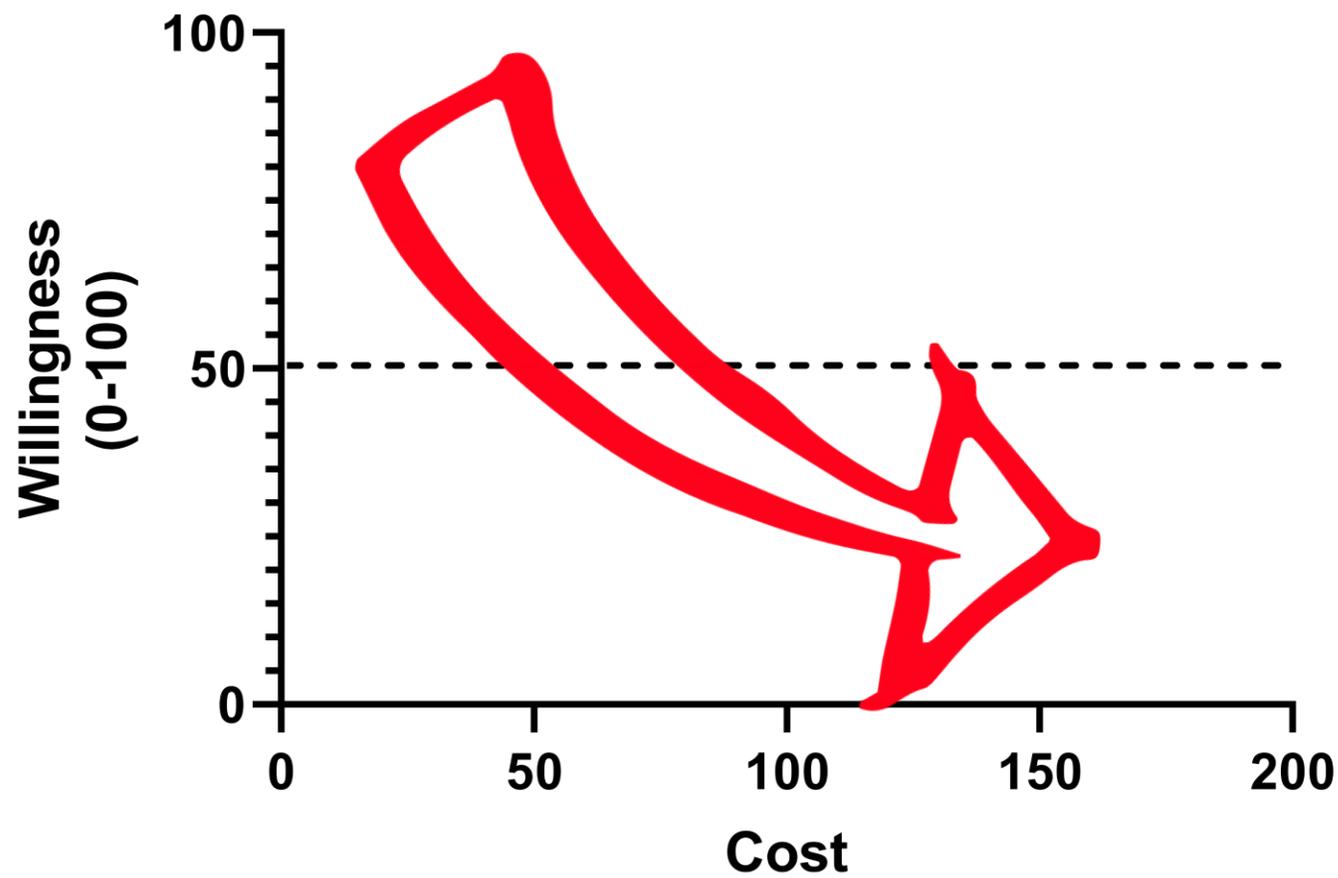


Drugs are expensive in Australia – will people really be keen to test?



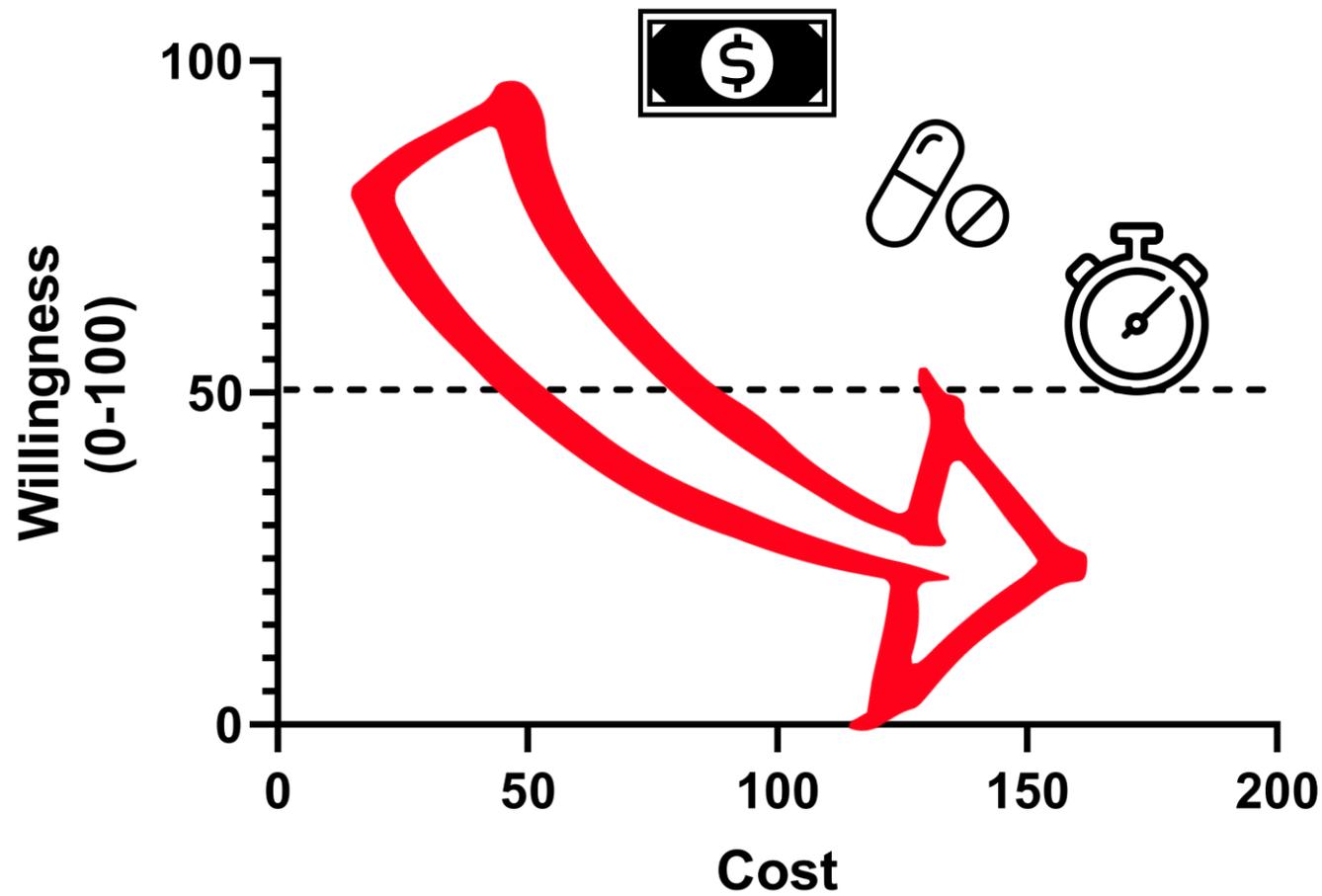
Source: UNODC World Drug Report

How do you really examine this? Behavioural economics



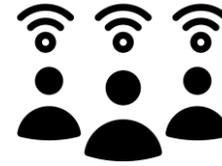
Probability discounting function

How do you really examine this? Behavioural economics

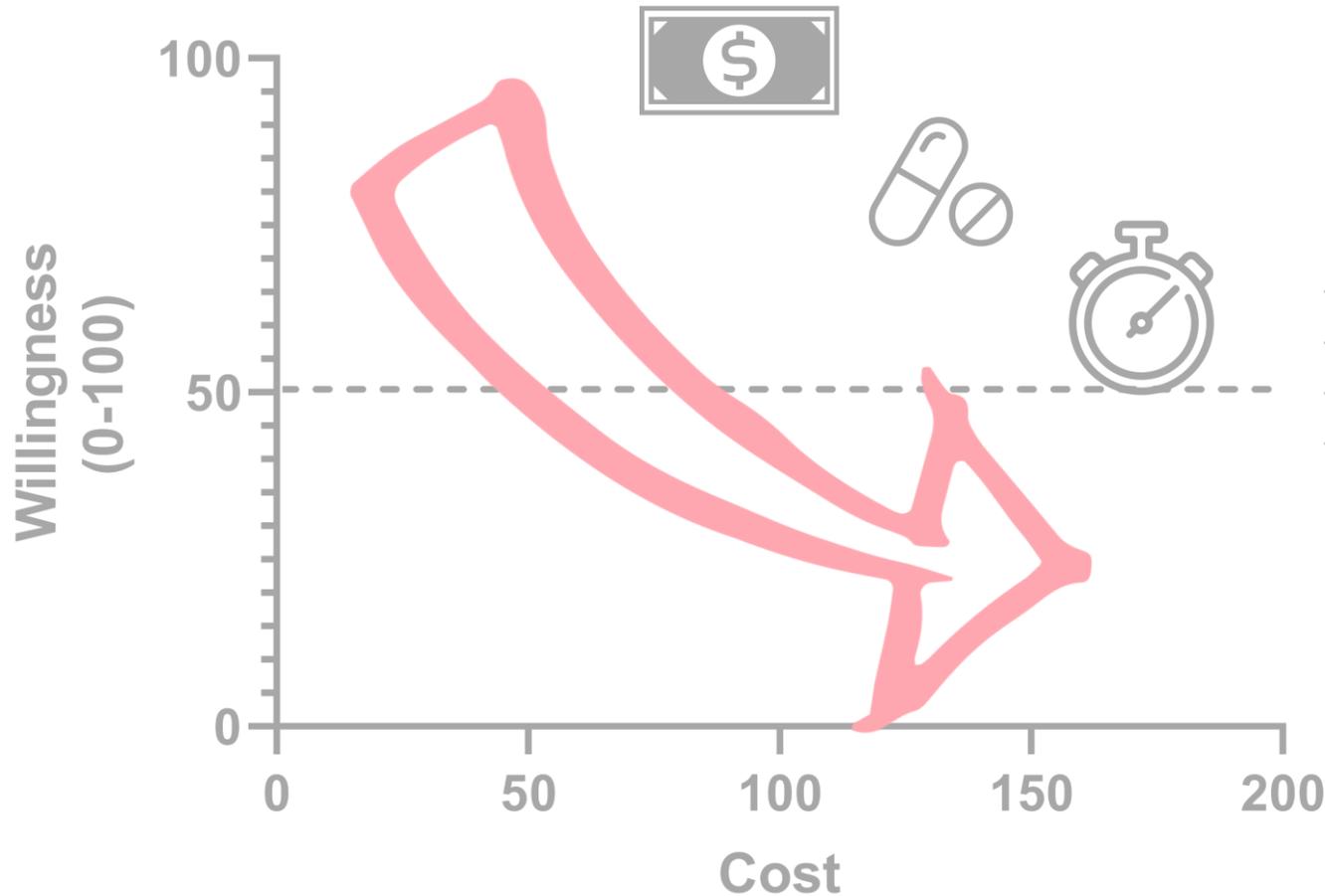


Probability discounting function

How do you really examine this? Behavioural economics



515 Australians that use ecstasy responding to 2 vignettes



Probability discounting function

STUDY 1



Onsite festival testing

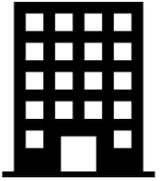
- MDMA yes/no
- MDMA yes/no + other yes/no
- MDMA dose + other yes/no
- MDMA dose + other dose



How willing to use (costs)

- \$ (free-\$200)
- Dose required (scrape-2 pills)
- Time for result (0-400 min)

STUDY 2



Service type

- On-site festival
- On-site near club
- Fixed site (CBD)
- Mail-in



How willing to use

- \$ (free-\$200)
- Dose required (scrape-2 pills)



Study 1: Onsite festivals

Participants were given the following text:

“You are at the first day of a multi-day festival, and you have a small number of ‘ecstasy’ pills. There is a booth at the festival that offers a drug checking service. There are signs on the front of the booth stating that the service is supported by the festival organisers and that police have agreed to keep a distance from the area and that you won’t be prosecuted for using the service. At the booth, staff introduce themselves and let you know that the checking service will....either

1) tell you if the pill contains MDMA or not but cannot tell you if other drugs are present in the pill (n=126)

2) tell you if the pill contains MDMA or not and if other drugs are present in the pill (n=141)

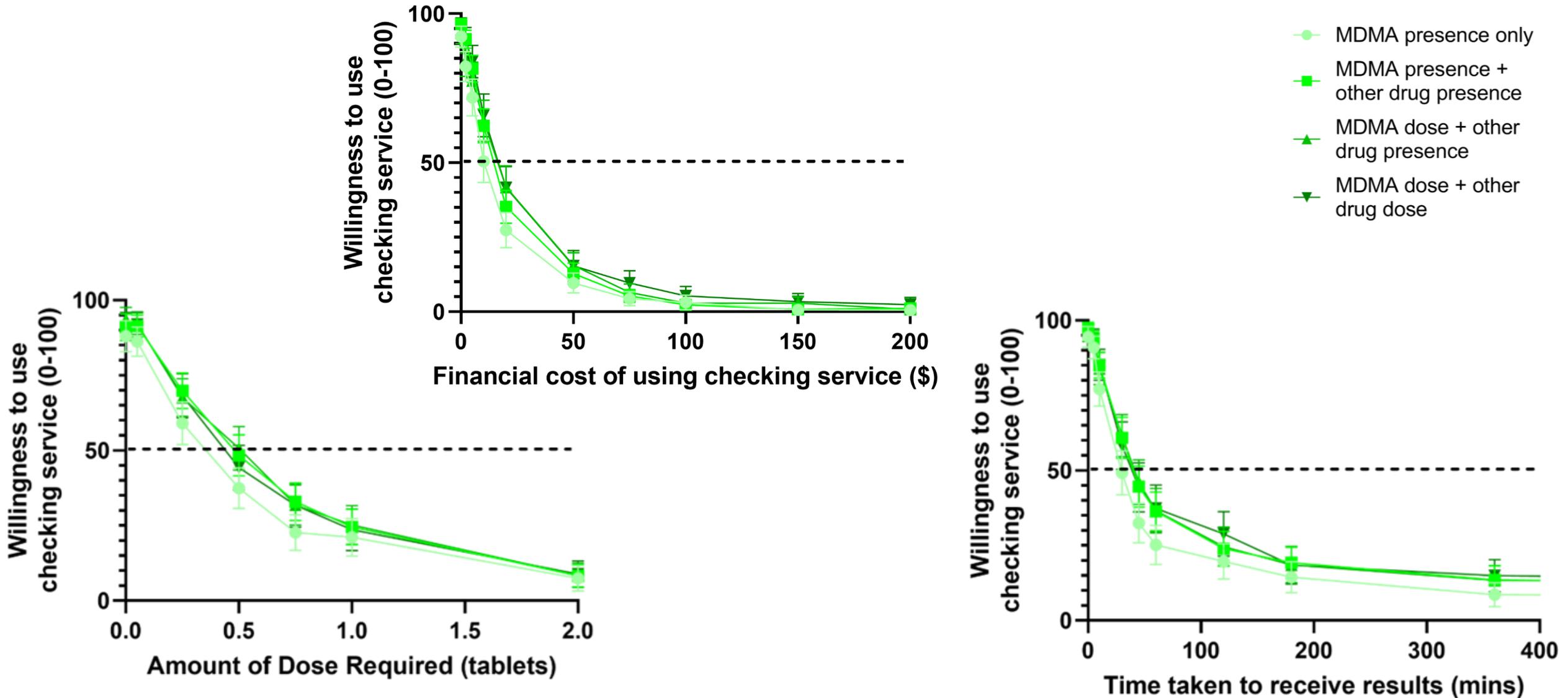
3) tell you how much MDMA is present in the pill if it is there, and if there are other drugs present in the pill (but not how much of these are present) (n=121)

4) tell you how much MDMA is present in the pill if it is there, and if there are other drugs present in the pill and how much of these are present (n=107)

...Once the test results are back, you can talk about them with a health worker confidentially”. **How willing would you be to use this service if it....**

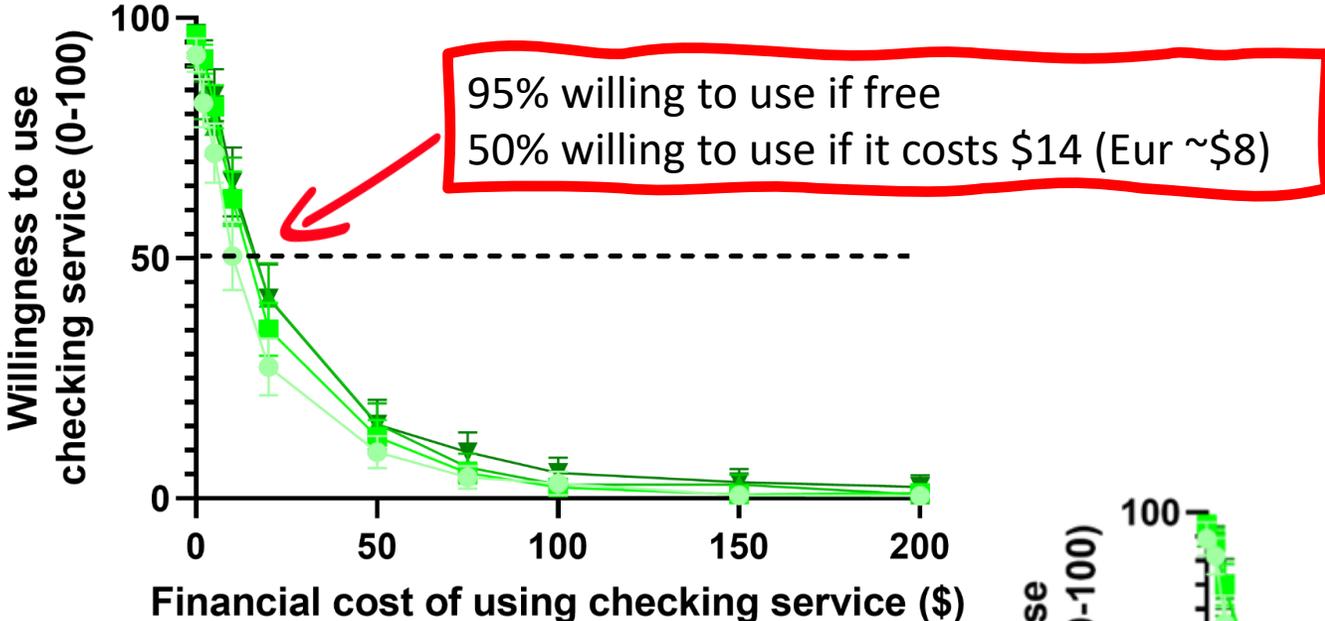
Onsite festival testing

It made no difference how much information the testing provided

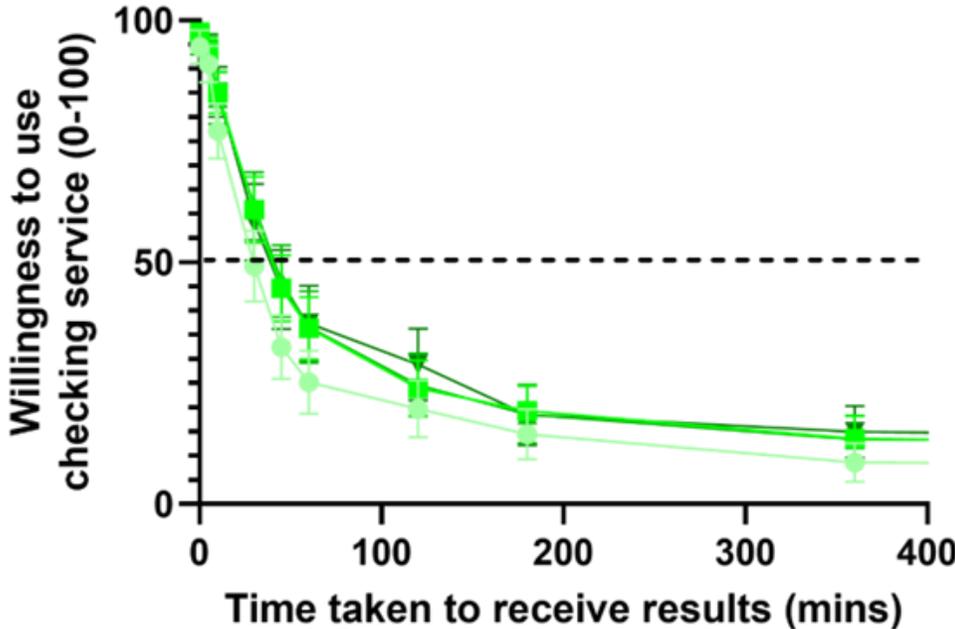
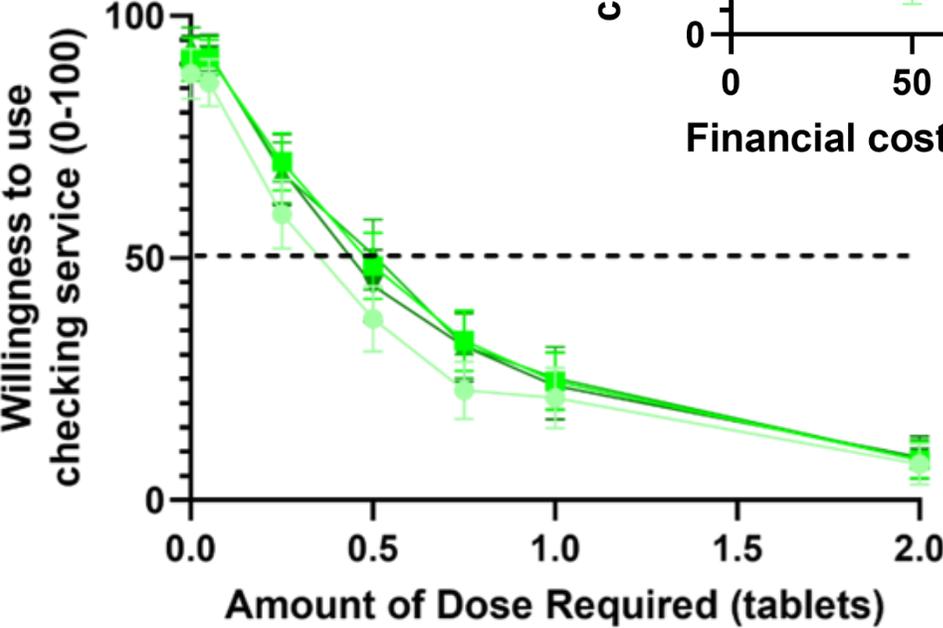


Onsite festival testing

It made no difference how much information the testing provided

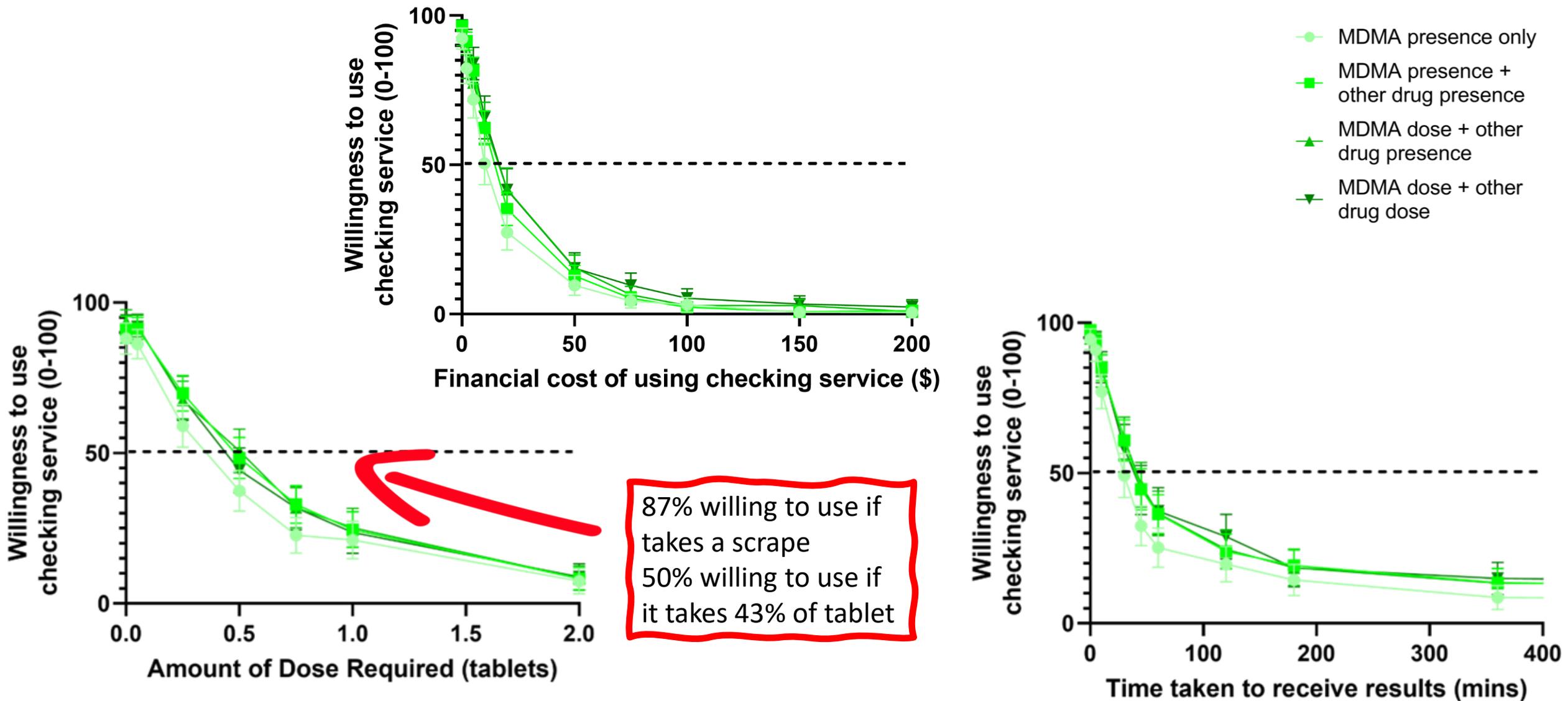


- MDMA presence only
- MDMA presence + other drug presence
- ▲ MDMA dose + other drug presence
- ▼ MDMA dose + other drug dose



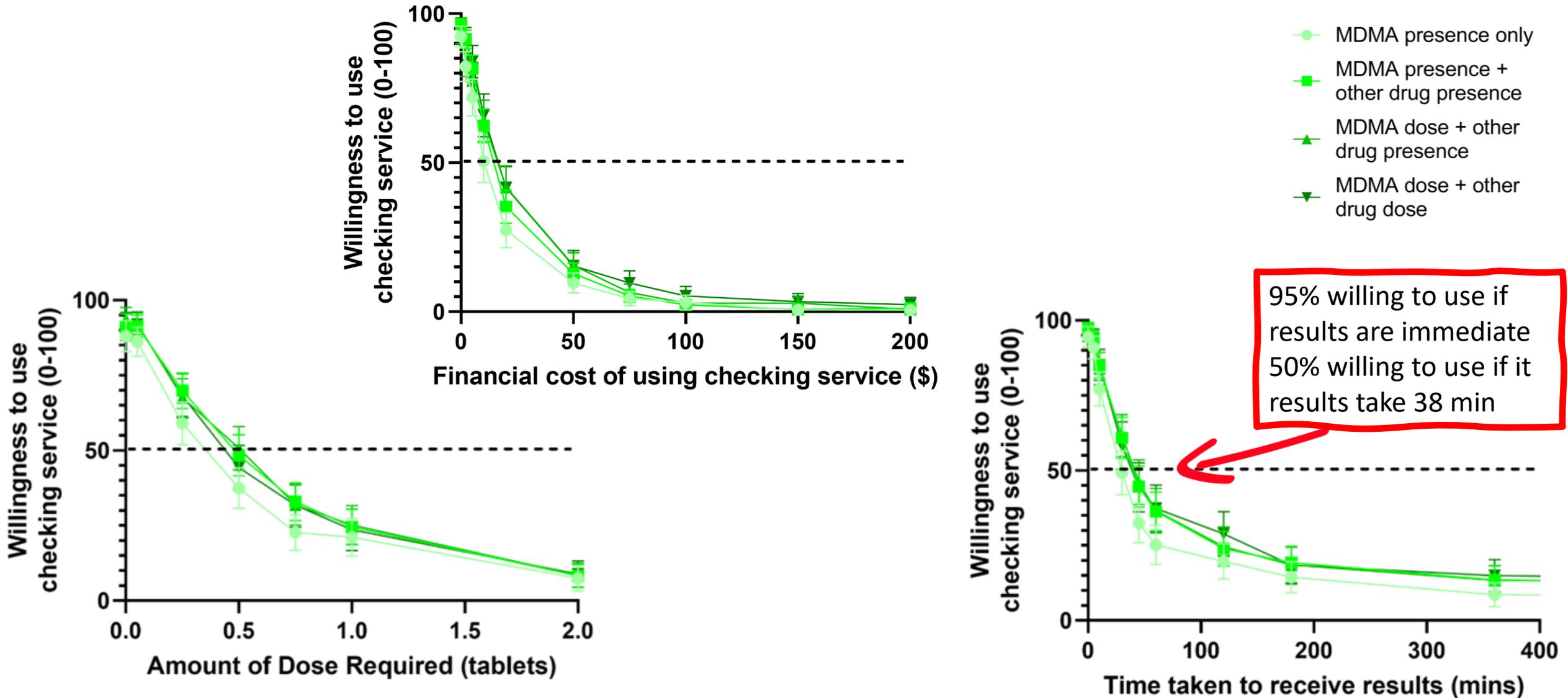
Onsite festival testing

It made no difference how much information the testing provided



Onsite festival testing

It made no difference how much information the testing provided



Study 2: Service models

Participants were given a similar vignette describing one of 4 service types:

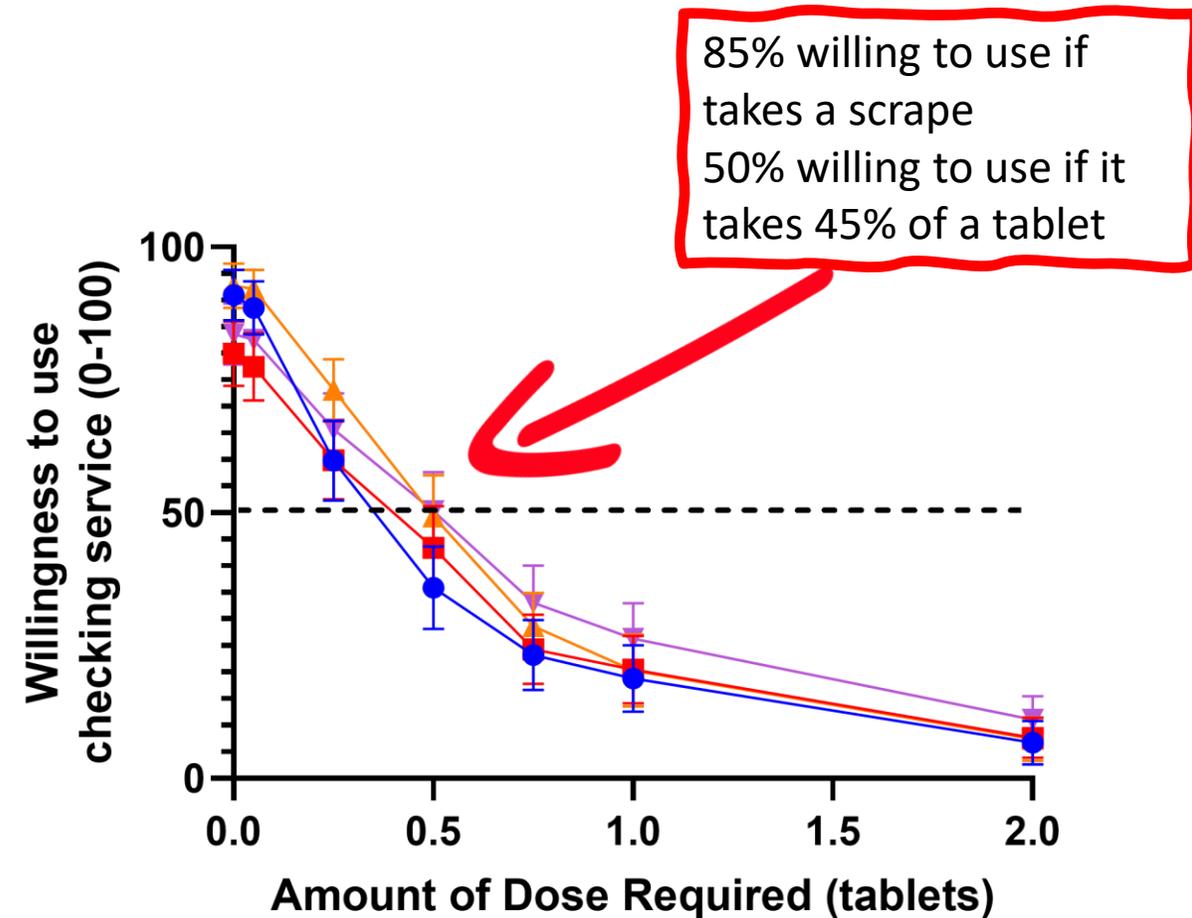
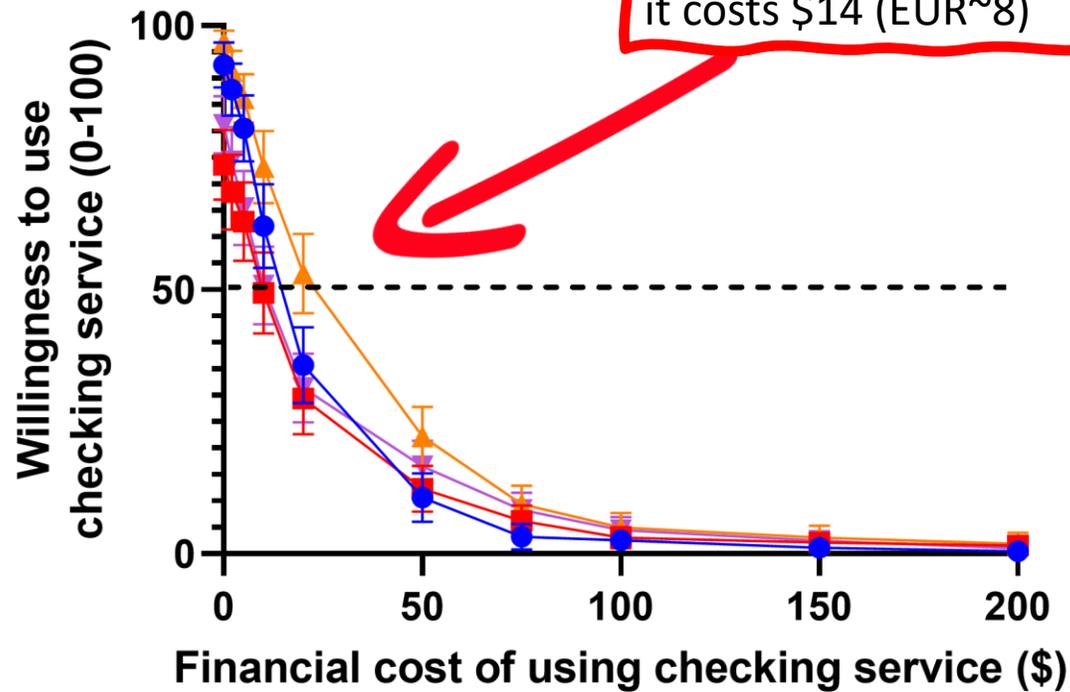
- 1) Service located at a festival, providing information about the presence (not dose) of multiple tablet components; brief delay for results (30-60min), with direct feedback from health professional (n=123)
- 2) Service located at a multi-service mobile bus stationed in nightclub district, providing information about the presence (not dose) of multiple tablet components; long delay (1-2weeks) for results, with direct feedback from health workers (n=139)
- 3) Fixed site in CBD open weekdays; providing information about the presence (not dose) of multiple tablet components; brief delay for results (5-10min), with direct feedback from health professional (n=118)
- 4) Mail-in service; providing information about the presence and dose of multiple tablet components; long delay (2 weeks) for results that are posted on a public website (n=140)

They were asked: *How willing would you be to use this service if it....*

Comparing models of service

It made no difference what type of service was offered

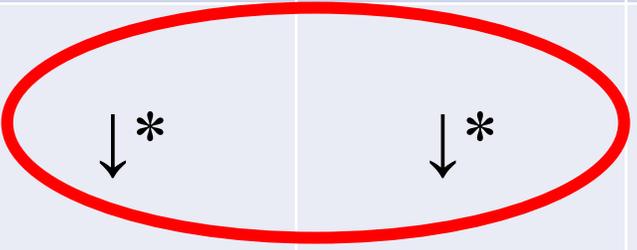
- On-site (festival)
- On-site (near club)
- ▲ Fixed site (CBD)
- ▼ Mail-in



What makes people more or less willing to engage with checking services?

We used the Health Belief model to understand what was associated with how much people were willing to 'spend' to use a drug checking program (AUC)

	Financial costs (\$)		Dose (tablets)		Time (min)
	Study 1 Festivals	Study 2 Sites	Study 1 Festivals	Study 2 Sites	Study 1 Festivals
Benefits (e.g.: checking would make me feel less anxious about the potential adverse effects of ecstasy)	ns	↑***	↑~	↑***	ns
Barriers (e.g.: I would be too embarrassed to use a checking service)	ns	↓***	↓*	↓*	↓~
Susceptibility (e.g: the unknown nature or ecstasy makes it likely that I'll accidentally take something that will have an adverse effect)	ns	ns	↓*	↓*	ns



These analyses control for: interest in using checking, sex, income, lifetime ecstasy use, previous testing and the vignette seen.

How does this fit with what we're seeing at the first fixed site service?

- Thursday 10AM-1PM
- Friday 6-9PM
- General community health centre
- ~100 tests/month
- Many only bringing scrapes
- Wait time can be >30 min
- Service costs >>> budget

CanTEST
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