

## KEY FINDINGS

- The Australian NSP Survey (ANSPS) functions as a strategic early-warning system designed to monitor blood borne viral (BBV) infections and associated risk behaviour among people who inject drugs.
- The ANSPS has been conducted annually since 1995 and NSP attendees have participated on more than 45,000 occasions. Around two thirds of Australia's ~75 primary NSP services participate in the ANSPS.
- The ANSPS has resulted in numerous publications, including annual National Data Reports as well as 17 peer-reviewed publications in scientific journals.

### Demographic characteristics

- The median age of respondents was relatively stable at 27 to 29 years over the period 1995 to 2001, with an incremental increase in all subsequent years, from 30 years in 2002 to 39 years in 2014. There was a concomitant decline in the proportion of respondents aged less than 25 years over the same period, from 25% in 2002 to 6% in 2014.
- The proportion of new initiates (0-3 years since first injection) declined from around one in four in the late 1990s to one in ten over the period 2010 to 2014. The median time since first injection more than doubled from a low of seven years in 1998 to 19 years in 2014. The median age at first injection remained unchanged at 18-19 years in all survey years.
- The proportion of respondents from an Indigenous background increased over the survey period, from 5% in 1995 to 14% in 2014.

### Drugs last injected

- While there were temporal shifts in the patterns of drugs injected as reported by ANSPS respondents over the past 20 years, heroin and methamphetamine remained the two most commonly reported drugs last injected in all years 1995 to 2014.
- Heroin was the most commonly reported drug last injected in the late 1990s, reported by more than half of ANSPS respondents during this period. However, since 2001, prevalence of heroin as the last drug injected remained relatively stable and was reported by around one third of ANSPS respondents in most years.
- Methamphetamine was reported as the drug last injected by less than half of survey respondents in all survey years. Prevalence of methamphetamine injection increased suddenly in 2001 and remained stable over the period 2001 to 2006 when it was reported by around one third of ANSPS respondents. Prevalence declined to one quarter of respondents over the

period 2006 to 2009, however, prevalence increased again over the period 2010 to 2014 and methamphetamine was reported as the last drug injected by one third of respondents in 2014.

- The proportion of respondents who reported last injecting pharmaceutical opioids increased from 6% in 2001 to 16% in 2010. Since 2010, prevalence has declined, with 11% of respondents last injecting this class of drugs in 2014.
- The proportion of ANSPS respondents who reported last injecting performance and image-enhancing drugs (PIEDs) was stable at 2% to 3% over the period 1995 to 2010, however, prevalence increased from 2% in 2010 to 7% in 2014.
- Among new initiates, 20% reported last injecting opioids (heroin and pharmaceutical opioids), 32% reported last injecting methamphetamine and 38% reported last injecting PIEDs in 2014.

### **Injection risk behaviour**

- Reports of public injection in the month preceding survey participation declined from more than half of all ANSPS respondents in the late 1990s to one third of respondents in 2014.
- Prevalence of reuse and receptive sharing of syringes and drug preparation equipment has declined since collection of these data began in 1997, 1995 and 1999 respectively.
- Reports of re-use of syringes declined from 33% in 1997 to 21% in 2014, prevalence of receptive syringe sharing declined from 31% in 1995 to 16% in 2014 and reports of receptive sharing of drug preparation equipment declined from 54% in 1999 to 30% in 2014.

### **HIV antibody prevalence**

- HIV antibody prevalence remained low at 2.1% or less in all survey years, with prevalence of 1.7% observed in 2014.
- HIV antibody prevalence was stable over the period 2010 to 2014, except among men, where prevalence increased from 1.3% in 2010 to 2.1% in 2014.
- HIV prevalence was highest among respondents who reported male homosexual identity, with this group comprising between 2% to 5% of annual survey samples. HIV prevalence ranged from 14% in 2000 to 38% in 2009 among this sub-population and was 30% in 2014.
- In 2014, the median age of HIV antibody positive respondents was 44 years and more than half reported last injecting methamphetamine.

### **HCV antibody prevalence**

- HCV antibody prevalence was high, with more than half of ANSPS respondents testing HCV antibody positive in most survey years. HCV antibody prevalence was highest at 60% or greater in 1995 and between 2004 and 2008. HCV antibody prevalence was stable at 53% to 54% in all years over the period 2010 to 2014.
- HCV antibody prevalence was highest among respondents aged 35 years or older and among respondents who initiated injection more than 10 years prior to survey participation.
- Among new initiates, HCV antibody prevalence was highest in the period following changes to heroin markets, with prevalence of 38% in 2002. HCV prevalence subsequently declined to >20%, a finding that supports a decline in HCV incidence in recent years.
- In 2014, the median age of HCV antibody positive respondents was 41 years and prevalence was highest among respondents who reported last injecting opioids (including heroin), with two thirds of this sub-population exposed to HCV.

## Testing and treatment uptake

- More than three quarters of ANSPS respondents reported a history of HIV and HCV testing in all survey years. However, the proportion of respondents reporting BBV testing in the previous 12 months declined to around one in two for both HIV and HCV in 2014.
- Among respondents with self-reported and serologically confirmed exposure to HCV infection, the proportion who reported currently receiving hepatitis C antiviral treatment was low at 2% or less in all survey years. Notwithstanding, the proportion of respondents who reported a history of HCV treatment increased over the decade 2005 to 2014, with around one in ten respondents reporting a history of HCV treatment in 2014.
- The proportion of respondents who reported a history of Opioid Substitution Therapy (OST) increased from 55% in 2000 to 63% in 2014. There was a concurrent increase in the proportion of respondents reporting current OST, from 28% in 2000 to 38% in 2014.