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Abstract | This study uses data from the Drug Use Monitoring in Australia program to examine the impact of the COVID-19 pandemic on the methamphetamine market in Australia. Since the pandemic began, the availability and quality of methamphetamine have decreased, prices have increased (from $17.50–$50 per point to $50–$250 per point) and consumption has declined. The impact of the pandemic varied by location, with more disruption observed in Perth relative to Brisbane and Adelaide. The COVID-19 pandemic appears to have restricted the supply of methamphetamine in Australia, resulting in higher prices and lower consumption of the drug.

Declines in methamphetamine supply and demand in Australia during the COVID-19 pandemic

Alexandra Voce, Tom Sullivan and Laura Doherty

Illicit drug markets are generally resilient to external pressures (Bouchard 2007). Nonetheless, there have been several significant and unexpected disruptions to the supply of illicit drugs within Australia, which have corresponded with increased prices and reduced drug-related harms. A well-known example occurred during the early 2000s, when regions of Australia reported a 'heroin drought'—a sudden decrease in the availability of heroin, a sharp increase in purity-adjusted price, and a decline in overdoses (Moore et al. 2005).

The global spread of the coronavirus disease COVID-19 and the associated social and economic restrictions appear to have disrupted the supply of methamphetamine and other illicit drugs in Australia (EMCDDA 2020; Peacock et al. 2020; Voce et al. 2020). Data collected through the Drug Use Monitoring in Australia (DUMA) program in Perth indicated that the price of methamphetamine increased from $30 to $100 per point during the pandemic, while availability and quality decreased substantially. Recent wastewater data also suggest Australian capital cities experienced a decrease in methamphetamine and cannabis use, and an increase in heroin use, in the early stages of the pandemic (Australian Criminal Intelligence Commission 2020). In contrast, methamphetamine, heroin and cannabis use increased in regional areas (Australian Criminal Intelligence Commission 2020). These data suggest the impact of COVID-19 in Australia may vary for different types of drugs and be location-specific.

The current study aimed to examine the relationship between methamphetamine supply and demand during the COVID-19 pandemic. This study used self-reported data from police detainees in Perth, Brisbane, Adelaide and Sydney.

Method

This study used data from the Australian Institute of Criminology's DUMA program, which collects information from police detainees about their drug use, criminal offending and sociodemographic characteristics (Doherty & Sullivan 2020). This study used data obtained in July and August 2020 from the core DUMA survey and a specially-designed COVID-19 addendum. The survey interviewed 446 police detainees in Perth, Brisbane, Adelaide and Sydney. Most respondents were men (85%, *n*=381) and non-Indigenous (70%, *n*=313), and they had a median age of 34 years (mean=35 years, interquartile range (IQR)=27–42).

Analysis

This bulletin presents two sets of analyses to better understand the methamphetamine market during the pandemic. The first analysis examined patterns of methamphetamine use (including frequency and quantity of use) and perspectives on the market (including availability, quality, price and number of dealers) among DUMA detainees who had used methamphetamine in the 30 days before interview (referred to as past-month users; *n*=174). These data were compared with averaged data collected every six months under the DUMA program between July–August 2017 and January–February 2020. This pre-pandemic reference period allowed the authors to account for seasonal variations in drug use patterns (eg higher rates of drug use during summer holidays) and to include January 2020, the period immediately preceding the COVID-19 outbreak in Australia.

The second analysis focused on DUMA detainees who had used methamphetamine in the early stages of the pandemic, in April or May 2020 (*n*=154). It investigated the extent to which they believed their patterns of drug use and the methamphetamine market had changed compared with before the pandemic. Eighty-one percent (*n*=125) of this group (referred to as April–May methamphetamine users) were also past-month methamphetamine users examined in the first analysis. The April–May methamphetamine users were asked questions such as whether they had obtained larger quantities of methamphetamine than usual to ensure they did not run out of personal supplies, and whether they had used other drugs as a substitute because of difficulties obtaining methamphetamine.

Pearson's chi-square tests (χ^2) were used to identify relationships between categorical variables, with Fisher's exact test used when one or more of the cells had expected frequencies of five or less. Wilcoxon's rank-sum test was used to identify differences in median values between groups (ie before and during the pandemic). Effect size is reported for statistically significant findings, using phi (ϕ) or Cramér's *V* for binary variables and Cohen's *d* for continuous variables. To preserve the largest sample size possible, detainees were excluded from analysis only for variables for which data were missing, or if the detainee provided a 'don't know' response.

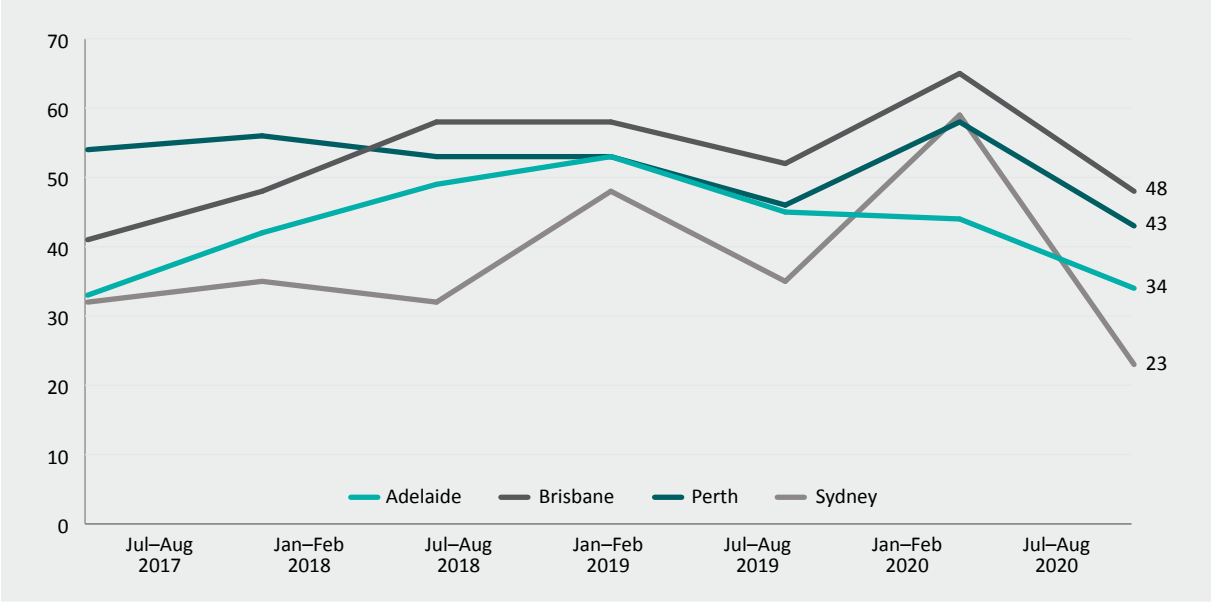
Results

Methamphetamine demand

Prevalence of past-month use

Nationally, the proportion of respondents who reported methamphetamine use in the past 30 days was significantly less in July–August 2020 (40%, *n*=174) relative to the average rate of past-month use before the pandemic (49%, *n*=1,690, $\chi^2(1)=13.6$, $p<0.001$, $\phi=0.06$). Past-month use in July–August was significantly lower than before the pandemic among respondents in Perth (43%, *n*=62 vs 53%, *n*=625; $\chi^2(1)=5.6$, $p=0.018$, $\phi=0.07$) and Sydney (23%, *n*=13 vs 40%, *n*=166; $\chi^2(1)=5.8$, $p=0.016$, $\phi=0.11$), but the decrease was not significant in Adelaide (34%, *n*=32 vs 44%, *n*=333) or Brisbane (48%, *n*=67 vs 53%, *n*=566) (Figure 1).

Figure 1: Past-month methamphetamine use by site, 2017–2020 (%)



Source: AIC DUMA collection 2017–20 [computer file]; see Table A1

Frequency of use

Overall the median number of days of methamphetamine use in the past month decreased significantly from 15 days before the pandemic to 10 days in July–August (z=2.0, p=0.048, d=0.13; see Table 1). Decreases in the frequency of use were statistically significant in Perth (z=2.0, p=0.044, d=0.18), marginally significant in Brisbane (z=2.0, p=0.050, d=0.29), but not significant in Sydney. Frequency of use increased in Adelaide but the change was not significant.

Table 1: Frequency of methamphetamine use before and during the pandemic

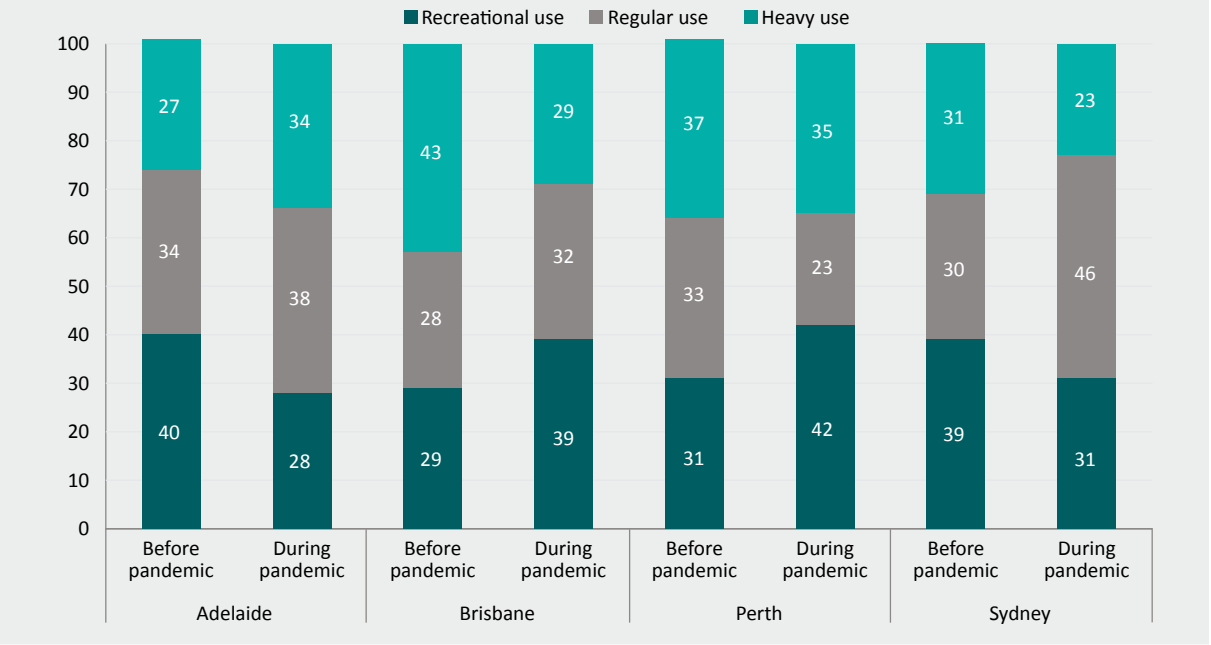
	Adelaide		Brisbane		Perth		Sydney		Total	
	Median	IQR	Median	IQR	Median	IQR	Median	IQR	Median	IQR
Days of use (frequency)										
During pandemic	16	5–27	10^	4–27	10*	1–27	10	4–15	10*	3–27
Before pandemic	10	4–25	20^	5–28	15*	4–29	10	3–25	15*	4–28

**statistically significant at p<0.01, *statistically significant at p<0.05, ^marginally significant at p=0.05
Note: IQR=interquartile range
Source: AIC DUMA collection 2017–20 [computer file]

In July–August 2020, one-third of past-month users (38%, n=65) reported recreational methamphetamine use (1–5 days in the past month), 31 percent (n=53) reported regular use (6–20 days in the past month) and 32 percent (n=55) reported heavy use (more than 20 days in the past month). Methamphetamine users in Brisbane were significantly less likely to report heavy use in July–August compared with before the pandemic (29%, n=19 vs 43%, n=243; $\chi^2(1)$=5.0, p=0.026, ϕ=0.09; see Figure 2 and Table A2). There were no other differences in the pattern of heavy, regular and recreational users before the pandemic and in July–August 2020.

The April–May methamphetamine users were also asked how their frequency of use had changed compared with before the pandemic, with half reporting no change in frequency of use (48%, n=71). Thirty percent (n=45) reported using methamphetamine less often and 22 percent (n=32) reported using methamphetamine more often. Detainees in Perth were more likely than those at other sites to report a decrease in frequency of methamphetamine use (44%, n=21 vs 24%, n=24; $\chi^2(2)$=6.5, p=0.038, V=0.21). In contrast, 17 percent (n=6) of methamphetamine users in Adelaide reported a decrease in frequency of methamphetamine use.

Figure 2: Methamphetamine market segmentation before and during the pandemic (%)



Note: Percentages may not total 100 due to rounding
Source: AIC DUMA collection 2017–20 [computer file]; see Table A2

Quantity of use

In July–August 2020, past-month methamphetamine users reported using the same quantity of methamphetamine as they had consumed before the pandemic (median=0.25 grams, IQR=0.25–0.5). However, median quantity of use in Adelaide increased from 0.25 to 0.5 grams during the pandemic (z=–3.12, p=0.002, d=–0.07) (Table 2).

Table 2: Quantity of methamphetamine use before and during the pandemic

	Adelaide		Brisbane		Perth		Sydney		Total	
	Median	IQR	Median	IQR	Median	IQR	Median	IQR	Median	IQR
Grams used per session (quantity)										
During pandemic	0.5**	0.25–0.63	0.25	0.15–0.5	0.25	0.25–0.5	0.25	0.25–0.5	0.25	0.25–0.5
Before pandemic	0.25**	0.25–0.5	0.25	0.18–0.5	0.38	0.25–0.5	0.25	0.25–0.5	0.25	0.25–0.5

**statistically significant at p<0.01
Note: IQR=interquartile range
Source: AIC DUMA collection 2017–20 [computer file]

The April–May methamphetamine users were also asked about changes in their quantity of use, with more than half (55%, n=82) reporting no change in the average quantity of methamphetamine used. Almost one-third (28%, n=41) reported using smaller amounts and 17 percent (n=26) reported using larger amounts. Respondents in Adelaide were less likely than detainees at other sites to report using smaller amounts during the pandemic (11%, n=4 vs 32%, n=37; $\chi^2(2)$=6.0, p=0.040, V=0.20).

Almost one-third of the April–May methamphetamine users (30%, *n*=44) also bought larger quantities of methamphetamine during the pandemic to avoid a possible shortage in product (see Table A3). This proportion was similar at each site.

Substitution

The April–May methamphetamine users were also asked if they had used other substances as a substitute for methamphetamine during the pandemic, with 28 percent (*n*=41) reporting substitution (see Table A4). Adelaide detainees were significantly less likely than detainees at other sites to use other substances (14%, *n*=5 vs 32%, *n*=36; $\chi^2(1)=4.02$, *p*=0.045, $\phi=0.16$). Substitute substances included cannabis (54%, *n*=22), GHB (gamma-hydroxybutyrate; 20%, *n*=8), cocaine (17%, *n*=7), ecstasy (10%, *n*=4), alcohol (10%, *n*=4), benzodiazepines (7%, *n*=3), LSD (lysergic acid diethylamide; 5%, *n*=2), nicotine (2%, *n*=1), heroin (2%, *n*=1), other opiates (7%, *n*=3), antipsychotic medication (2%, *n*=1), and other prescription drugs (5%, *n*=2).

Methamphetamine supply

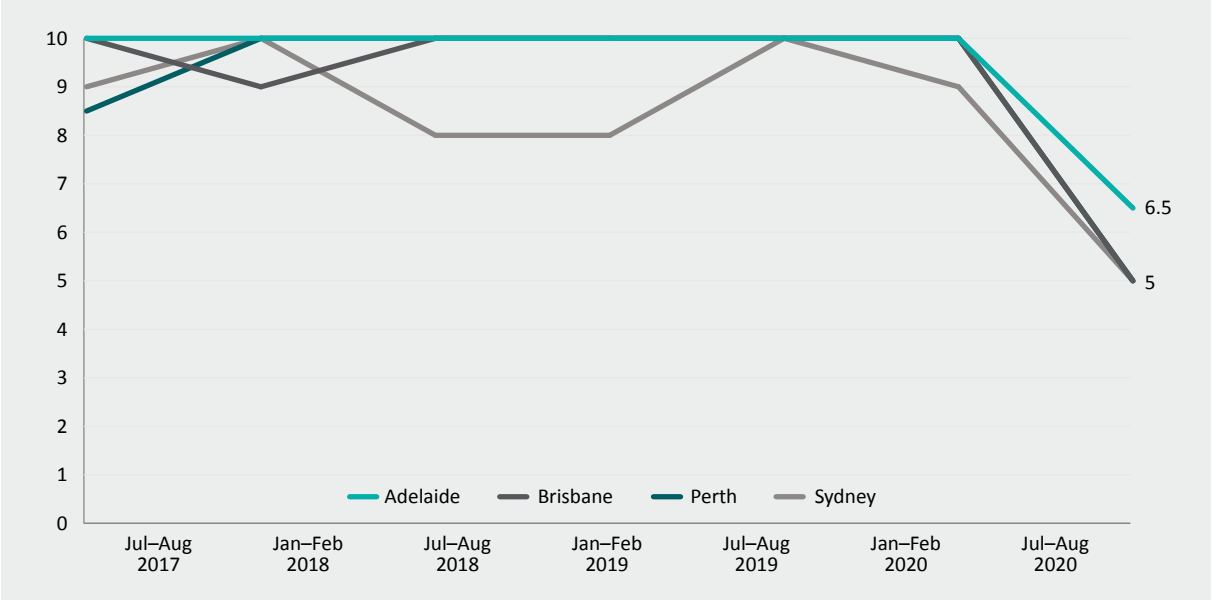
Availability

Past-month methamphetamine users rated the availability of methamphetamine on a scale from one (extremely hard or impossible to get) to 10 (readily available or overabundant). The median availability rating for methamphetamine in July and August 2020 (see Figure 3, Table A5) was five out of 10 (IQR=3–9). This was significantly lower than the median availability rating of 10 out of 10 in the averaged data collected every six months under the DUMA program before the pandemic (IQR=8–10; *z*=11.9, *p*<0.001, *d*=1.2). There were statistically significant decreases in availability ratings in all four sites:

- Perth (median=5, IQR=1–8 vs median=10, IQR=7–10; *z*=7.3, *p*<0.001, *d*=1.3);
- Brisbane (median=5, IQR=3–8 vs median=10, IQR=8–10; *z*=8.0, *p*<0.001, *d*=1.3);
- Adelaide (median=7, IQR=5–10 vs median=10, IQR=8–10; *z*=4.3, *p*<0.001, *d*=1.1); and
- Sydney (median=5, IQR=3–7 vs median=9, IQR=7–10; *z*=2.9, *p*=0.004, *d*=1.0).

Of the April–May methamphetamine users asked about methamphetamine availability, 58 percent (*n*=84) reported that it had become harder to buy compared with before the pandemic. Perth detainees were significantly more likely than those at other sites to report a decrease in availability (74%, *n*=34 vs 51%, *n*=50; $\chi^2(2)=6.88$, *p*=0.037, *V*=0.22). In contrast, Brisbane detainees were significantly more likely than other detainees to report an increase in availability (24%, *n*=12 vs 6%, *n*=6; $\chi^2(2)=9.54$, *p*=0.008, *V*=0.26). Adelaide detainees were more likely than other detainees to report no change in availability (50%, *n*=17 vs 23%, *n*=25; $\chi^2(2)=10.8$, *p*=0.004, *V*=0.27).

Figure 3: Median ratings of methamphetamine availability, 2017–2020



Note: Availability ratings ranged from 1 (extremely hard or impossible to get) to 10 (readily available or overabundant)
Source: AIC DUMA collection 2017–20 [computer file]; see Table A5

Number of dealers

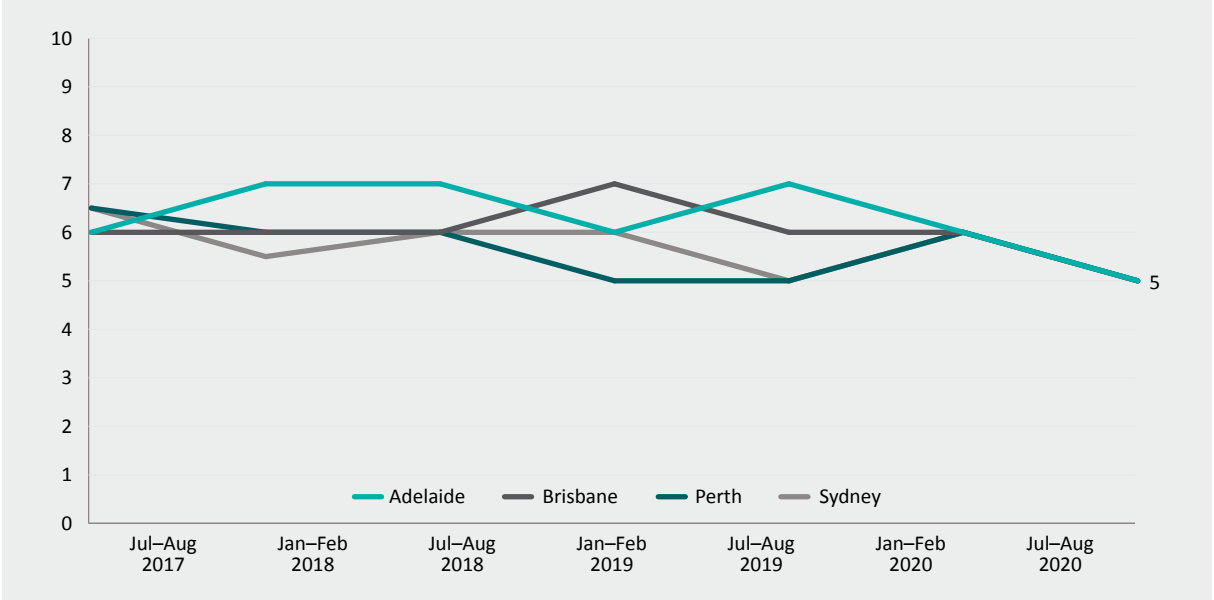
Past-month methamphetamine users were significantly more likely to report that the number of people selling methamphetamine (46%, *n*=65) had recently decreased compared with averaged data collected every six months under the DUMA program before the pandemic (8%, *n*=116; $\chi^2(2)=184.9$, $p<0.001$, $V=0.34$). This same pattern was observed at the site level, with notable proportions of respondents in Perth (44%, *n*=22), Brisbane (44%, *n*=23), Sydney (54%, *n*=7) and Adelaide (48%, *n*=13) reporting a recent decrease in the number of methamphetamine dealers (See Table A6).

Quality

Past-month methamphetamine users also rated the quality of methamphetamine on a scale from one (extremely poor quality or purity) to 10 (excellent quality or purity). The overall median quality rating for methamphetamine in July and August 2020 was five out of 10 (IQR=2–7), significantly lower than average quality ratings in prior quarters (median=6, IQR=5–8; $z=5.4$, $p<0.001$, $d=1.2$). This decrease was significant in Brisbane (median=5, IQR=3–6 vs median=6, IQR=5–8; $z=4.1$, $p<0.001$, $d=0.5$) and Adelaide (median=5, IQR=2–6 vs median=6, IQR=5–8; $z=3.7$, $p<0.001$, $d=0.7$), but not in Perth or Sydney (Figure 4, Table A7).

More than half of the April–May methamphetamine users (56%, *n*=82) also reported that methamphetamine quality was lower in April–May than before the pandemic. Thirty-four percent (*n*=49) reported no change in quality, whereas 10 percent (*n*=15) reported higher quality. Methamphetamine users in Perth were more likely than users elsewhere to report that quality had reduced (74%, *n*=34 vs 48%, *n*=48; $\chi^2(2)=8.6$, $p=0.014$, $V=0.24$). Methamphetamine users in Brisbane were more likely than users elsewhere to report no change (45%, *n*=23 vs 27%, *n*=26; $\chi^2(2)=12.2$, $p=0.002$, $V=0.29$).

Figure 4: Median ratings of methamphetamine quality, 2017–2020



Note: Quality ratings ranged from 1 (extremely poor quality or purity) to 10 (excellent quality or purity)
Source: AIC DUMA collection 2017–20 [computer file]; see Table A7

Price

In July–August 2020, DUMA respondents reported the price of methamphetamine was $50–$250 per point, up from $17.50–$50 per point in January and February 2020. Most April–May methamphetamine users (82%, *n*=117) also reported methamphetamine had become more expensive relative to before the pandemic, whereas small proportions reported the price had remained stable (10%, *n*=15) or decreased (8%, *n*=11). Respondents in Adelaide were most likely to report methamphetamine had become more expensive (94%, *n*=29), followed by those in Perth (93%, *n*=43), Sydney (80%, *n=12*) and Brisbane (65%, *n*=33). Brisbane methamphetamine users were more likely than those at other sites to report that prices had decreased (18%, *n*=9 vs 2%, *n*=2; $\chi^2(2)=17.0$, $p<0.001$, $V=0.34$) (see Table A8).

Discussion

The COVID-19 pandemic appears to have disrupted the methamphetamine market in major Australian cities. Nationally, police detainees reported a decrease in the availability and quality of methamphetamine, and fewer methamphetamine dealers. These shifts in the market were suggested by analyses of the perspectives of past-month methamphetamine users and those who had used in the early stages of the pandemic in April–May. It is likely that methamphetamine traffickers were unable to operate as normal due to the restrictions on international, interstate and intrastate travel, and interruptions to international mail and air, land and sea freight.

Methamphetamine users also reported an increase in the price of methamphetamine, with the price per point rising from $17.50–$50 before the pandemic to $50–$250 during the pandemic. This may reflect attempts by dealers to financially compensate for the decrease in methamphetamine sales caused by a lack of product or changes in the cost at which dealers bought methamphetamine from their suppliers. Respondents also reported a significant reduction in methamphetamine quality, suggesting a rise in the purity-adjusted price. These national trends are consistent with data from the Ecstasy and Related Drugs Reporting System, which found that one-third of respondents reported methamphetamine was more difficult to obtain compared with before the pandemic (Peacock et al. 2020).

The current study also suggested police detainees consumed less methamphetamine during the pandemic than previously. The proportion of past-month methamphetamine users decreased, and recent methamphetamine users consumed the drug on fewer days during the past month. Interestingly, users did not change the quantity of methamphetamine consumed in an average session in response to the pandemic.

This research also revealed variations between different methamphetamine markets in Australia. The drug market in Perth appeared the most adversely affected by the pandemic, with most methamphetamine users in Perth reporting a decrease in availability (74%), lower quality (74%) and higher prices (93%). Perth has been identified as a hotspot for methamphetamine use among police detainees, with 59 percent of detainees testing positive to the drug during 2019 (Doherty & Sullivan 2020). This city may have been particularly impacted due to its remote location and the intra- and interstate travel restrictions. However, DUMA data also suggest the methamphetamine market in Perth may be recovering, with the proportion of past-month users rising from 38 percent in April–June to 43 percent in July–August (Voce et al. 2020).

In Brisbane, methamphetamine supply during the COVID-19 pandemic appeared more resilient. Brisbane detainees were more likely to report an increase in availability, and no change in quality or price, relative to detainees elsewhere. Similarly, methamphetamine demand was relatively stable in Adelaide during the pandemic. Adelaide methamphetamine users reported using methamphetamine in larger quantities during the pandemic than before the pandemic. Despite increases in the price of methamphetamine, Adelaide detainees were also less likely than detainees elsewhere to substitute other drugs for methamphetamine, and were more likely to report no change in availability. These differences may also suggest demand for methamphetamine in Adelaide is less sensitive to price increases than elsewhere. Price elasticity of demand for illicit drugs appears to be country-specific (Payne et al. 2020) and these findings may suggest elasticity also differs between Australia's widely-dispersed cities.

Overall, one-third of methamphetamine users purchased larger quantities of the drug than usual because they anticipated a possible decrease in supply because of the pandemic. Due to difficulties accessing methamphetamine, one-third also reported using other drugs as a substitute for methamphetamine during the pandemic. Cannabis and GHB were common substitutes for methamphetamine. These results are concerning, as the risk of drug overdose may increase when an individual has access to a large personal supply of a drug (Dietze & Peacock 2020), uses a new substance for the first time, or uses multiple drugs simultaneously or concurrently within a brief period (Lalica et al. 2018).

The current research demonstrates the importance of collecting information about price and consumption to understand what is happening in a market (Moore et al. 2005). The findings also illustrate the diversity of drug markets in Australia and reaffirm the need to geographically target drug related law enforcement interventions (Mazerolle, Eggins & Higginson 2020).

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Appendix

Table A1: Prevalence of past-month methamphetamine use compared with before the pandemic

	Adelaide		Brisbane		Perth		Sydney		Total	
	n	%	*n*	%	*n*	%	*n*	%	*n*	%
During pandemic	32	34	67	48	62	43	13	23	174	40
Before pandemic	333	44	566	53	625	53	166	40	1,690	49

Source: AIC DUMA collection 2017–20 [computer file]

Table A2: Frequency of methamphetamine use compared with before the pandemic

Market segmentation	Adelaide		Brisbane		Perth		Sydney		Total	
	n	%	*n*	%	*n*	%	*n*	%	*n*	%
Recreational use										
During pandemic	9	28	26	39	26	42	4	31	65	38
Before pandemic	130	40	161	29	188	31	64	39	543	33
Regular use										
During pandemic	12	38	21	32	14	23	6	46	53	31
Before pandemic	110	34	160	28	199	33	50	30	519	31
Heavy use										
During pandemic	11	34	19	29	22	35	3	23	55	32
Before pandemic	88	27	243	43	225	37	51	31	607	36
Changes in frequency of methamphetamine use since the beginning of the pandemic										
Used less often	17	6	12	24	21	44	6	40	45	30
No change in use	20	57	27	54	17	35	7	47	71	48
Used more often	9	26	11	22	10	21	2	13	32	22

Note: Excludes 'don't know' responses. Sample size may vary as cases were excluded due to missing data
Source: AIC DUMA collection 2017–20 [computer file]

Table A3: Quantity of methamphetamine use

	Adelaide		Brisbane		Perth		Sydney		Total	
	n	%	*n*	%	*n*	%	*n*	%	*n*	%
Changes in quantity of methamphetamine used per session since the beginning of the pandemic										
Smaller amounts	4	11	14	27	16	33	7	47	41	28
No change	24	69	28	55	25	52	5	33	82	55
Larger amounts	7	20	9	18	7	15	3	20	26	17
Purchased larger quantities of methamphetamine during the pandemic										
Yes	7	20	19	38	13	27	5	33	44	30
No	28	80	31	62	35	73	10	67	104	70

Note: Excludes 'don't know' responses. Sample size may vary as cases were excluded due to missing data
Source: AIC DUMA collection 2020 [computer file]

Table A4: Use of other drugs as a substitute for methamphetamine

	Adelaide		Brisbane		Perth		Sydney		Total	
	n	%	*n*	%	*n*	%	*n*	%	*n*	%
Yes	5	14	15	29	17	35	4	27	41	28
No	30	86	36	71	31	65	11	73	108	72

Note: Excludes 'don't know' responses
Source: AIC DUMA collection 2020 [computer file]

Table A5: Methamphetamine availability

	Adelaide		Brisbane		Perth		Sydney		Total	
	Median	IQR	Median	IQR	Median	IQR	Median	IQR	Median	IQR
Current availability (on a scale from 1–10)										
During pandemic	7	5–10	5	3–8	5	1–8	5	3–7	5	3–9
Before pandemic	10	8–10	10	8–10	10	7–10	9	7–10	10	8–10
	n	%	*n*	%	*n*	%	*n*	%	*n*	%
Availability compared to before the pandemic										
Harder to get	16	47	24	48	34	74	10	71	84	58
No change	17	50	14	28	9	20	2	14	42	29
Easier to get	1	3	12	24	3	7	2	14	18	13

Note: Availability ratings ranged from 1 (extremely hard or impossible to get) to 10 (readily available or overabundant). IQR=interquartile range. Excludes 'don't know' responses
Source: AIC DUMA collection 2020 [computer file]

Table A6: Changes in number of methamphetamine dealers compared with before the pandemic

	Adelaide		Brisbane		Perth		Sydney		Total	
	n	%	*n*	%	*n*	%	*n*	%	*n*	%
Decreased										
During pandemic	13	48	23	44	22	44	7	54	65	46
Before pandemic	15	6	43	9	45	8	13	10	116	8
No change										
During pandemic	9	33	17	33	15	30	4	31	45	32
Before pandemic	102	40	207	41	186	35	43	32	538	38
Increased										
During pandemic	5	19	12	23	13	26	2	15	32	23
Before pandemic	135	54	255	51	303	57	79	59	772	54

Note: Excludes 'don't know' responses
Source: AIC DUMA collection 2017–20 [computer file]

Table A7: Methamphetamine quality

	Adelaide		Brisbane		Perth		Sydney		Total	
	Median	IQR	Median	IQR	Median	IQR	Median	IQR	Median	IQR
Current availability (on a scale from 1–10)										
During pandemic	5	2–6	5	3–6	5	2–7	5	4–7	5	2–7
Before pandemic	6	5–8	6	5–8	6	4–8	6	4–8	6	5–8
	n	%	*n*	%	*n*	%	*n*	%	*n*	%
Quality compared to before the pandemic										
Lower	21	62	19	37	34	74	8	53	82	56
No change	12	35	23	45	9	20	5	33	49	34
Higher	1	3	9	18	3	7	2	13	15	10

Note: Quality ratings ranged from 1 (extremely poor quality or purity) to 10 (excellent quality or purity). IQR=interquartile range. Excludes 'don't know' responses

Source: AIC DUMA collection 2020 [computer file]

Table A8: Changes in methamphetamine price since the pandemic

	Adelaide		Brisbane		Perth		Sydney		Total	
	n	%	*n*	%	*n*	%	*n*	%	*n*	%
Cheaper	0	0	9	18	2	4	0	0	11	8
No change	2	6	9	18	1	2	3	20	15	10
More expensive	29	94	33	65	43	93	12	80	117	82

Note: Excludes 'don't know' responses

Source: AIC DUMA collection 2017–20 [computer file]

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