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The Difference is Research

## Introduction

- In many high-income countries, the population of people who inject illicit drugs is ageing.
- There is increasing recognition that drug use accelerates age-related pathophysiological processes, which means that people who use drugs are likely to experience greater age-related declines in functioning than their peers of similar chronological age.
- These age-related declines are likely to be exacerbated by existing disadvantage, such as financial insecurity and stigma/discrimination, however little is known about the extent to which people who inject drugs are concerned about these issues.

## Aim

This study examines:

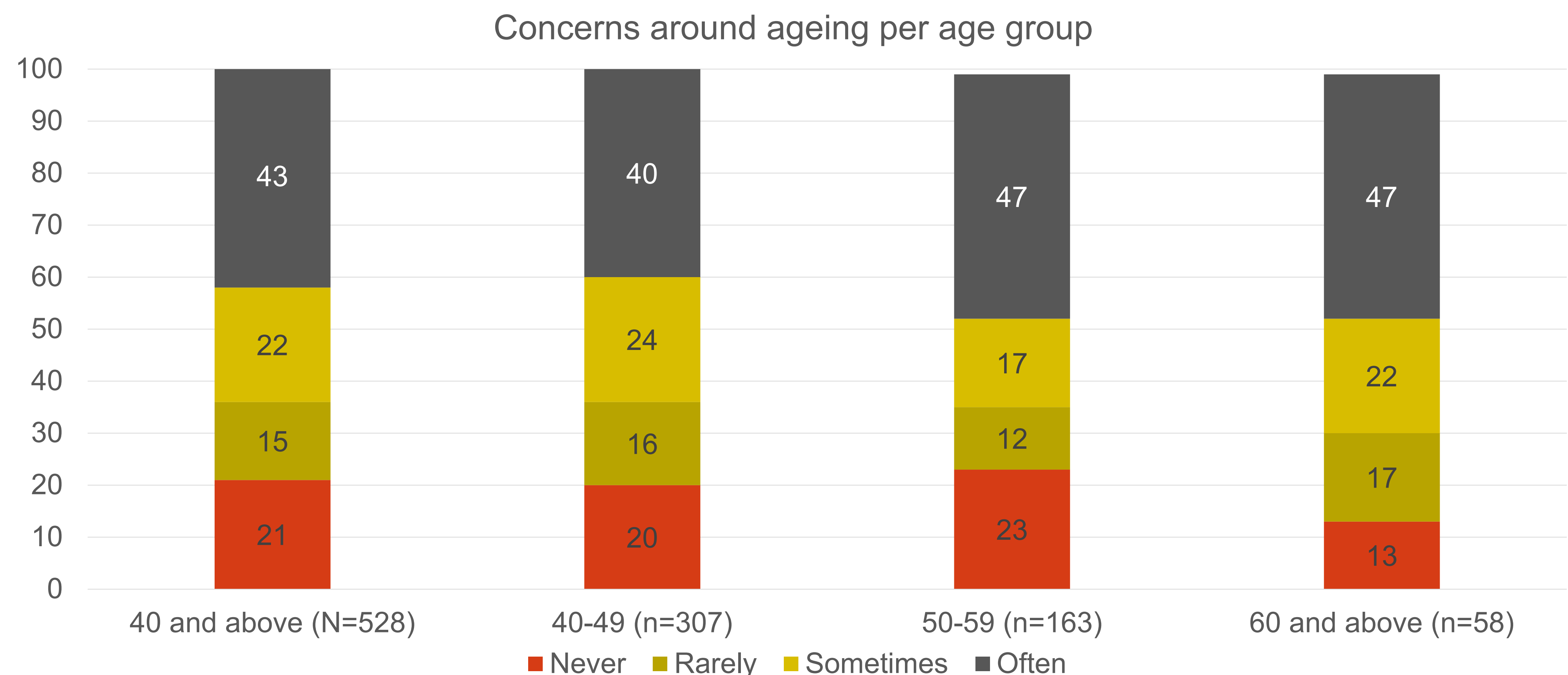
1. The extent to which people who inject drugs think about ageing, and whether this differs across age groups.
2. The main concerns identified by participants aged ≥40 in relation to the next 10-20 years of their life.

## Methods

- Interviews were conducted with people who regularly inject illicit drugs, recruited from capital cities across Australia as part of the Illicit Drug Reporting System (IDRS) (1).
- 820 participants were recruited in June-July 2023 through health services and word-of-mouth.
- To be eligible, participants must have been at least 18 years of age, have lived in a capital city for 10 months out of 12 months preceding the interview and to have injected illicit drugs at least six times in the last six months.
- Those aged ≥40 years (n=528) were asked how often they thought about ageing/getting older (Never, Rarely, Sometimes, Often) and how concerned they were about the specific situations that may occur over the next 10-20 years (not at all concerned, not too concerned, moderately concerned, very concerned).

## Results

When asked how often they think about ageing and getting older, two in five participants aged ≥40 years (43%) reported thinking about it 'often' and one in five (22%) thought about it 'sometimes'. There was no difference in the level of concern across age groups ( $p=0.777$ ).



When asked about specific areas of concern, differences across age groups were observed. Specifically, chi-square analyses revealed that there were significant differences across age groups for 'losing your independence' ( $p=0.009$ ), 'having to enter an aged care facility' ( $p<0.001$ ) and 'ongoing access to medications' ( $p=0.031$ ), all of which were more commonly endorsed by those aged ≥60 compared to those aged 40-49 and 50-59. Significant differences were also observed across age groups for 'not having a secure place to live' ( $p=0.032$ ), with a higher proportion of the 40-49 age group reporting being moderately or very concerned (49%) about this compared to the other two groups (38%, respectively).

	% Endorse being moderately/very concerned			p value
	40-49	50-59	60+	
Being in poor health	57	56	62	0.733
Losing your independence	42	42	63	<b>0.009</b>
Not having close relationships with your family and friends	47	42	38	0.323
Not having financial security	60	52	60	0.246
Losing your memory or other mental abilities	55	54	69	0.134
Not having a secure place to live	49	38	38	<b>0.032</b>
Having to enter an aged care facility	21	33	49	<b>&lt;0.001</b>
Ongoing access to medications (e.g., accessing methadone in aged care facilities)	26	28	42	<b>0.031</b>
Experiencing stigma or discrimination in aged care facilities because of your drug use	21	28	27	0.260

Note. The response option 'Don't know' was excluded from analysis. \* $p<0.050$ ; \*\* $p<0.010$ ; \*\*\* $p<0.001$

## Implications & Conclusions

The increasing age of people who inject drugs has significant implications for health service provision and has been identified as a research priority. However, little is known about the extent to which people who inject drugs themselves think about ageing, and what specific concerns they have about getting older, with previous research showing that many people who inject drugs had never thought they would live to become an aged person (2). Given the extent and heterogeneity of concerns identified in the current study, healthcare providers should work closely with people who inject drugs (e.g., co-design) to ensure that services are appropriate to address the varied needs and concerns of this ageing population. By addressing these concerns and providing appropriate resources and support, individuals can have a greater sense of security and ownership as they navigate the ageing process.

## References

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- (2). Australian Injecting & Illicit Drug Users League (AVIL). A hidden population: Supporting healthy ageing for people who inject drugs and/or receive pharmacotherapies. Sydney: AVIL; 2019.

## Acknowledgements and more information

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