



Which individual, social and environmental influences shape different pathways of amphetamine type stimulant (ATS) use over the life course?

A systematic review and thematic synthesis of the qualitative literature

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Overview



- Background
- Aim and objectives
- Findings
- Strengths and limitations
- Conclusions

ATTUNE

Understanding Pathways to Stimulant Use across Europe





Prevalence of ATS use in Europe

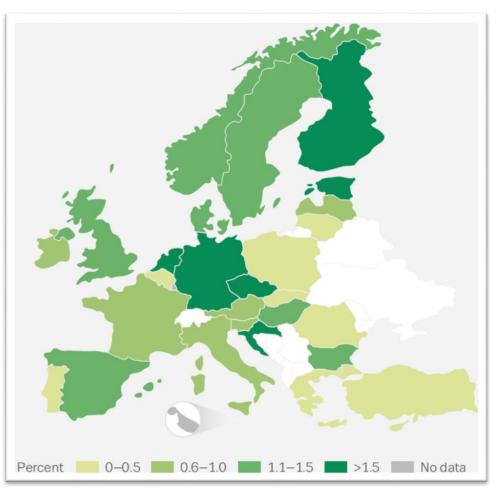


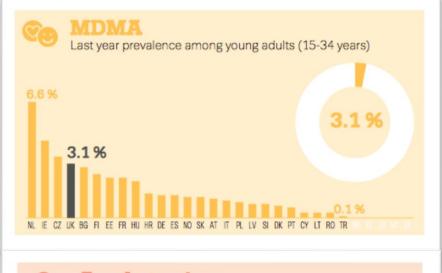
Fig 1: 12-month prevalence rates of amphetamine use in young adults (age: 13-34 yrs)¹

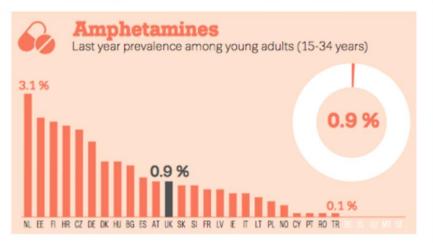






Prevalence of ATS use in England





"Nearly a million people (937,000) aged 16-59 said they had used an NPS at least once"

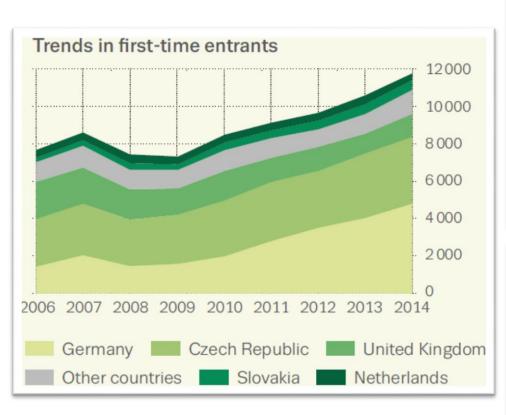
Crime Survey for England and Wales 2014/15

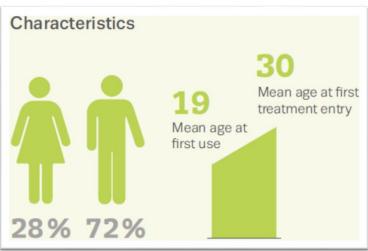


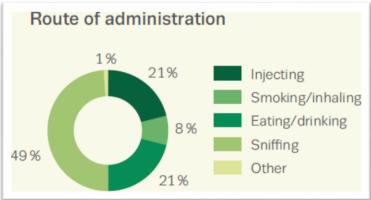
¹European Monitoring Centre for Drugs and Drug Addiction (2017) European Drug Report 2017: Trends and Developments



European ATS Treatment Data







¹European Monitoring Centre for Drugs and Drug Addiction (2017) European Drug Report 2017: Trends and Developments



Understanding Pathways to Stimulant Use across Europe

What we know...and what we don't

- Health impacts:
 - Mental health outcomes (depression, ATS-induced psychosis, suicidal ideation)
 - Increased risk of HIV and other STIs
- Social impacts:
 - On users themselves (stigma and discrimination)
 - On wider community (public amenity and safety)

But...

- Lack of effective prevention and treatment interventions
- Limited understanding of prevalence, natural history & risk factors:
 - Including the views, perspectives and experiences of individual ATS users themselves on what influences patterns of consumption.



Aim and objectives

<u>Aim</u>:

To identify which individual, social and environmental influences shaped different pathways of amphetamine type stimulant use at key moments across the life course.

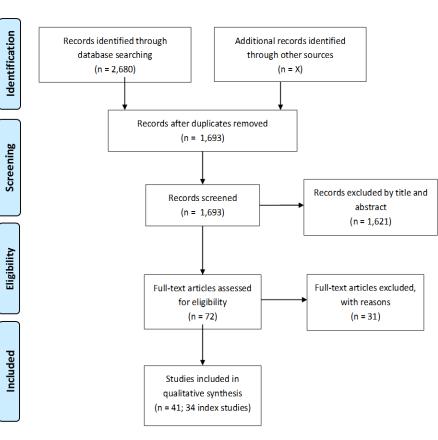
Method:

- Searched MEDLINE; PsycINFO; EMBASE; and PROQUEST (social science premium collection) 2000-2017;
- Search strategy informed by 'SPIDER' tool (Sample, Phenomenon of Interest, Design, Evaluation, Research type);
- Any qualitative design; any setting; ATS users aged 13+;
- Extracted data were analysed according to:
 - Individual, social and environmental influences;
 - Critical points on possible drug use pathway (initiation, continuation, increase and decrease).
- Thematically synthesised



Overview of included studies

- 34 unique studies (41 papers):
 - In-depth interviews, focus groups, ethnographies
- Demographics:
 - 14-58 years
 - Varied gender, ethnicity, sexual orientation, SES
- Substance use:
 - Poly-substance users
 - Mephedrone & other NPS stimulants
- Location:
 - North America (17); South America (2); Europe (6) Australia and New Zealand (4); South East Asia (5)







Initiation

"Mephedrone, Charge,
Charleeze, Ice Gold. I chose these
because they mimic my drugs of
choice...They're easier to come by
obviously, as all you have to do is
walk into a shop and buy them."
Female, 28 (Van Hout &

Female, 28 (Van Hout & Brennan, 2011)

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"I have a lot of depression issues and stuff...I was trying every single drug to see which one would make me happier. Speed for me, it's like a medication."

Male, 24 (Fast et al. 2014)

Social 122

"We were working, and I guess working overtime, and I was really exhausted, really tired and [a supervisor at work] said: "Here, I got something to make you feel better."

Male, 41 (Boeri, et al. 2009)



Conclusion



Continuation

"It wasn't that I thought it was safe-but you could buy it in bulk, legally. It was easy to get, and it was cheap."

Female, 19 (McElrath & Van Hout, 2011)

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Legal status

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"I am not a drug addict. I only use [ice] when I feel like doing it. I am educated, so I know when it is and when it is not the time to use drugs."

Male, 24 (Vu et al, 2012)

Mental health

"You just get lot more intimate, so you talk about deeper things rather than just your everyday conversation about what happened or what has happened, get into, like, deep talks and opinions and all that sort of stuff"

Male, 18 (Farrugia, 2015)





Increase/Relapse

"I had lost my job, my brother's company, and everything. Well, when I was here in Tijuana, I had to come to terms with what's done is done, and there is nothing left to do."

Male, 47 (Ojeda et al, 2011)

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try to get off it [meth] but
then I do feel quite normal on
it. But without it I don't. So I
think being on speed balances
me out. It's like an
antidepressant for me, makes
me feel like other people."
Female, NR (Duff & Moore,
2015)

"I go through times when I

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"I was falling behind in my bills. I wanted to work. I wanted to keep up. I was running my company and...It was really hard. Life's hard when you work for yourself. The day doesn't stop at 5 o'clock"

Male, 41 (Boeri, 2009)





Decrease/Abstinence

"If I hadn't been taken away from it and put in prison for 9 months ... I would have been right back on it... I was one of the lucky ones. I got forced to go to prison. And, right away I got into drug rehab."

Female, NR (Haight et al, 2009)

"I'm a very strong-minded person because I just stopped cold turkey and most people cannot do that. I just decided it was stupid for me to be not only ruining my health, but ultimately it was going to ruin my life..." Female, 21 (Boeri, 2009)

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"I don't hang around some people. I try to do stuff with my time. I have a job. When I'm not working, I try to go out and mow the lawn or mow my Grandma's yard. I've picked up hobbies. I go fishing and stuff like that."

Male, 20 (Sexton et al, 2008)





Strengths and limitations



- First review in area
- Geographically diverse literature
- Range of social and economic contexts

- Ongoing tensions around qualitative syntheses
- Low-moderate quality of evidence
- Limited environmental data





Conclusions

- Diverse and interrelated range of influencers shape ATS pathways
 - Mental health, trauma, performance enhancement
 - Social norms, networks of use → access, availability, acceptability
- Heterogeneous group of users
 - Common factors shape pathways but 'one size' unlikely to fit all
- Findings inform ongoing ATTUNE study, future policy and practice





