

Evidence of increase in injecting drug use found in 190 countries, report global reviews

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Credit: AI-generated image ([disclaimer](#))

Evidence of an increase in injecting drug use at a global level highlights the need for improved coverage of interventions to prevent and manage drug-related harms among people who inject drugs (PWID), say two new reviews led by researchers at the National Drug and Alcohol Research Center (NDARC) and the Kirby Institute at UNSW Sydney.

Published today in *The Lancet Global Health*, the first review found evidence of injecting [drug](#) use (IDU) among people aged 15 to 64 years in 190 [countries](#) that comprise more than 99% of the [global population](#), an increase of 10 countries since the previous review in 2017.

This included eight countries in sub-Saharan Africa and two in the Caribbean.

Lead researcher, NDARC's Scientia Professor Louisa Degenhardt, said the landscape had changed since the last review, including increased support for research across multiple [low-income](#) and [middle-income countries](#), shifts in patterns of drug use, the development of targets for reductions in HIV and viral hepatitis infection, and the inclusion of drug dependence treatment as one of the United Nations Sustainable Development Goals.

"Quantifying the size of the population of PWID, their demographic characteristics, and the extent of their exposure to risk behaviors and environments is essential to enable effective health policy planning," Prof. Degenhardt said.

"We had a wide focus on personal, environmental and structural risks in light of increasing recognition that a holistic view is needed to understand how to best respond to these changes."

Professor Jason Grebely from the Kirby Institute said the review looked at the prevalence of HIV, hepatitis B virus (HBV) and hepatitis C virus (HCV) infection, the characteristics of PWID and patterns of drug use and risk history.

"Injecting [drug use](#) has now been documented in most countries and territories in the world, and HIV and HCV infection are prevalent in many populations of PWID," Professor Grebely said.

The results show that PWID are at risk of police arrest, incarceration, sex work, and the experience of homelessness or unstable housing.

"All of these risk environments are associated with increased blood-borne virus transmission," Prof. Degenhardt said.

"There is a clear need to address the structural and environmental drivers of vulnerability, risk, and harm."

Estimating harm reduction programs

The second review, also published in *The Lancet Global Health*, updates 2017 estimates of global coverage of needle and syringe exchange programs (NSPs), opioid agonist treatment (OAT), and other harm reduction services that target PWID such as supervised consumption facilities, drug checking services, and take-home naloxone (THN) programs. Naloxone is a drug that can temporarily reverse opioid overdose.

The review found 90 countries—where 75% of the PWID population live—are implementing OAT and 94 countries are implementing NSPs (88% of the global PWID population).

Only five countries (2% of the global PWID population) are providing high coverage of both services.

Far fewer countries are implementing THN programs, supervised consumption facilities, and drug checking services, with nine countries—Australia, Mexico, Canada, U.S., France, Germany, Portugal, Spain, and Switzerland—implementing all five services.

"Globally, most PWID do not have access to harm reduction services designed to reduce the public health burden and improve quality of life,"

Prof. Degenhardt said.

"While there has been some progress toward improved service coverage, upscaling is required to respond to the clinical and social harms that many people face."

Key facts:

- Evidence of IDU was documented in 190 of 207 countries or territories that comprise more than 99% of the global population aged 15–64 years.
- Globally, 14.8 million people aged 15–64 years are estimated to inject drugs.
- Evidence suggests that there are 2.76 million women and 12.065 million men who inject drugs globally, and that 0.4% of PWID identify as transgender.
- The amount of available data on key health and social risks among people who inject drugs varied widely across countries and regions. It is estimated that 24.8% of people who inject drugs globally had experienced recent homelessness or unstable housing, 58.4% had a lifetime history of incarceration, and 14.9% had recently engaged in sex work, with substantial geographical variation.
- Injecting and sexual risk behavior varied considerably geographically, as did risks of harms. Globally, it is estimated that 15.2% of people who inject drugs are living with HIV, 38.8% have a current HCV infection, 18.5% have recently overdosed, and 31.7% have had a recent skin or soft tissue infection.

More information: Louisa Degenhardt et al, Epidemiology of injecting drug use, prevalence of injecting-related harm, and exposure to behavioural and environmental risks among people who inject drugs: a

systematic review, *The Lancet Global Health* (2023). [DOI: 10.1016/S2214-109X\(23\)00057-8](https://doi.org/10.1016/S2214-109X(23)00057-8)

Samantha Colledge-Frisby et al, Global coverage of interventions to prevent and manage drug-related harms among people who inject drugs: a systematic review, *The Lancet Global Health* (2023). [DOI: 10.1016/S2214-109X\(23\)00058-X](https://doi.org/10.1016/S2214-109X(23)00058-X)

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