Clubs

Drugs

& Social Media

Peer Survey Data and Social Media for Harm Reduction Messaging

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## Acknowledgement of Country

I would like to begin by acknowledging the traditional custodians of the land from which I am speaking, the Bunurong/Boonwurrung and Wurundjeri/Woiwurrung people of the Kulin nation of Naarm/Melbourne, who have tended this land for thousands of years.

I would like to pay my respects to Elders past, present and acknowledge that sovereignty was never ceded. This always was and always will be Aboriginal land.

We feel it is also important to highlight the disproportionate and persistent harms that colonial prohibitionist drug policies have on Aboriginal and Torres Strait Islander people.

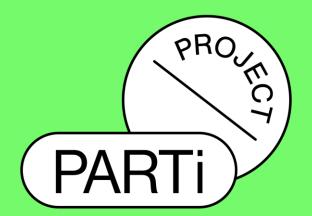
Victorian Aboriginal Legal Service – vals.org.au











#### **ECSTASY**

Blamed for 20 hospital admissions from Chapel Street precinct:

Three dead after overdosing on 'bad batch' of ecstasy in Melbourne, court told.

Lillebuen, S. (2017). Ecstasy blamed for 20 hospitalisations in Chapel Street precinct. [online] The Age. Available at: ttps://www.theage.com.au/national/victoria/ecstasy-blamed-for-twenty-hospitalisations-along-chapel-street-precinct-20170115-gtrs4z.html [Accessed 30 Jan. 2025].





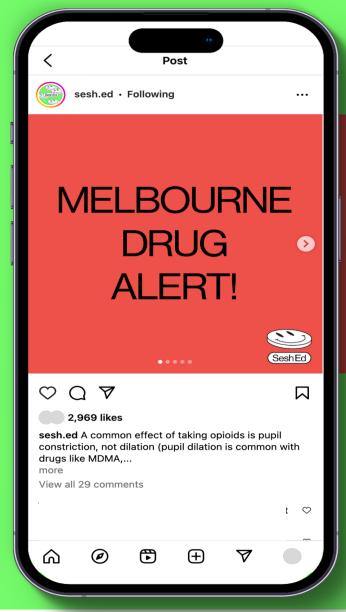






## (SeshEd)

- ☐ Content written by peers, for peers
- ☐ Popular posts are seen by up to 90k+ accounts
- ☐ State drug alerts EDNAV
- ☐ Engaging with our community



A yellow powder containing the potent opioid 'protonitazene' is being mis-sold as ketamine in Melbourne











## How to brew Harm Reduction resources: The Peer Way

- ☐ Pick a topic relevant to our community
- ☐ Research peer-reviewed articles and scientific literature
- ☐ Check online drug taking community resources erowid, psychonaut wiki, bluelight etc
- ☐ Ask friends, family and the community for their experiences and ideas on the topic
- ☐ We add our own personal experiences and knowledge
- ☐ Synthesize and increase accessibility of info











## SESH.ED Survey

- 468 respondents; an increase from 136 previously
- The survey was open for 5 weeks in early 2024
- We recorded responses anonymously and kept participant data confidential.













(SeshEd)

Male, 25, VIC:

"I like how it's genuinely educational, judgement free, risk reducing, and alerts the community about dangers when they come up (like dangerous drugs in circulation)"









## Survey Demographics

Age: avg 24 years (min 18, max 56)

| 18 - 21 yrs | 31% (145 respondents) |
|-------------|-----------------------|
| 22 - 25 yrs | 34% (157 respondents) |
| 26 - 30 yrs | 21% (100 respondents) |
| 31 - 40 yrs | 10% (49 respondents)  |
| 41+ yrs     | 3% (15 respondents)   |

• Female: 48%; Male: 44%

NB, genderqueer, agender or prefer not to say: 7%

• Vic: 86%, NSW: 9%, other states / internationally: 5%

LGBTQIA+: 43%









# Why do respondents use drugs?

**Partying** 

Manage mental or physical health

Social situations (not parties)

**Enjoyment** 

New Experiences

Sexual enhancement or personal development

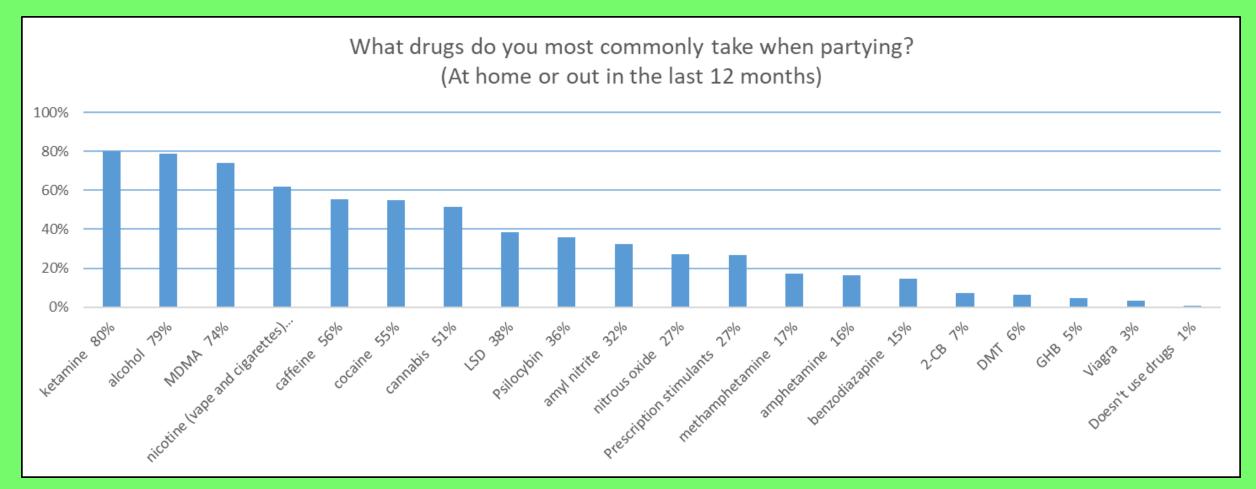








## What drugs do people use?











## Experiences of drug harm

#### Make me feel SAFE:

"Looking after mates"

"Friends"

"Safe spaces"

"Pill testing and Dancewize"

"Good event staff"

#### Make me feel UNSAFE:

"Police"

"Security"

"Sniffer dogs"

"Aggressive people"

"Drink spiking"

"Event staff"











(Sesh Ed)

#### Male, 25, VIC:

'Safe: Appropriate medical and non-medical (ie dancewize) support, proactive/ supportive security, friends, friendly people Unsafe: Cops, aggressive security and angry/ violent people'









# Types of harm reduction strategies people were most likely to use

- Use substances around people you trust (Over 75%)
- Eat food prior to using substances (Over 75%)
- Monitor water intake (Over 75%)
- Self-care before and after (Over 75%)

- Seek advice or information on drug effects and related harms from a trusted source (friend).
- Communicate what drugs you are taking with someone you trust
- Obtained drugs from a trusted source
- Avoiding potentially harmful drug combinations
- Time your dose before taking more
- Set drug consumption limits
   (e.g only \_\_ amount tonight)









## Where to access Harm Reduction Information?

## Preferred Sources:

- 86% Use **Sesh.ed** to find information on drugs
- **78%** Friends or peers

86% want drug information created by peers (people who use drugs).

## Barriers to accessing information:

- "I'm worried about getting in trouble from police"
- "Trouble finding the right information"









## Key Messages

Harm Reduction content needs to evolve to meet the needs of young people who take drugs.

Community input and engagement is essential for relatability, authenticity and meeting the community where they are at.

Male, 25, VIC:

"It's hecking educational!"









#### Female, 35, VIC:

"It contains non-judgemental information and guides that make me feel safer making choices for myself. The great design and youthful tone also make me feel comfortable sending info on to my friends without it seeming preachy. The drug contamination warnings are also super helpful."









## Summary

- Young people face barriers to getting harm reduction info
- They do get info from peers
- Sesh.ed spreads info to community/ peers/ friends

Non-binary, 24, VIC:
"I encourage my
younger siblings who
are just getting into
partying to follow"









### Conclusion

Young people who use drugs will take steps to reduce the risks to themselves and their community if given the information to do so.









Questions?

**Questions?** 

Questions?



**Questions?** 

Questions?

Thank you to Better
Health Network, Thorne
Harbour Health and
EDNAV; most importantly
all the peers in the
community.







