**Introduction**

The Magistrates Early Referral Into Treatment program (MERIT) is a voluntary court diversion program that aims to address underlying drug use issues that contribute to criminal offending. Preliminary data obtained from the Western Sydney Local Health District (WSLHD) MERIT branch indicates that methamphetamine prevalence has significantly increased in the period 2011-2016. The aim of this study is to examine how the rise in methamphetamine (otherwise known as “ice”) use has contributed to changes in client demographics and program engagement.

**Findings**

Data collected from 1055 clients who participated in the WSLHD MERIT program shows changes in the proportion of clients nominating methamphetamine as their primary drug of concern over the last five years, compared to other drugs.

The proportion of people who use methamphetamine has increased from 18% in 2011 to 51% in 2016. This is in the context of markedly lower proportions of people using benzodiazepines, heroin, and other amphetamines across this time period. It is also of interest to note the reduction in people who use cannabis from 47% in 2011 to 31% in 2016. Recent research has suggested that although use of methamphetamine has not increased across the general population, users of other forms amphetamines (e.g. speed, base) appear to have switched to the more potent, higher purity crystalline form of the substance (i.e. methamphetamine).

Contrary to the popular characterisation of people who use methamphetamine as significantly more violent than other drug users, our data indicates that there was no difference between these two populations (25% for methamphetamine; 24% for other drug use) with regards to their likelihood of presenting to the MERIT program with violent offences.

Across the time period of 2011-2016 the proportion of clients presenting with violence offences increased for people who use methamphetamine from 15% to 30% which was comparable to the 21% to 37% increase for people who use other drugs. Despite finding that people who use methamphetamine are no more likely to be charged with violent offenses than people who use other drugs, we did find a difference between these populations with regards to the likelihood of having served previous gaol time and the likelihood of having served both short-term and long-term periods in custody.

**Conclusions and Implications**

Within the population of clients using drugs on the WSLHD MERIT program, people who use methamphetamine represent a distinct sub-sample. Our findings support previous research that suggests people who use methamphetamine are older, and previously used other drugs, which has clear implications for both policy and funding decisions. Funding treatment services for this client population would appear to be more effective and cost-efficient as compared to prevention-type strategies. Moreover, more research is needed into treatments that engage people who use methamphetamine.

The finding that clients who use methamphetamine were less likely to complete treatment and more likely to be non-compliant has important treatment implications. Therapeutic approaches such as motivational interviewing have been shown to be effective in working with people who use other amphetamines and struggle with treatment engagement. Motivational interviewing is conducted in a non-judgmental, client-focused style that helps clients develop their own intrinsic motivation to change and ultimately elicit desired behaviour change.

In addition to the benefits of motivational interviewing, our data underscore the importance of trauma informed care in working with people who use crystal methamphetamine. We found that this client population is more likely to have spent time in gaol, which previous research has noted increases the likelihood of a person having experienced previous trauma. A recognition and understanding of how this trauma has impacted a person’s life is essential to empathic, effective treatment.

**References**

4. Soren Ashley (Forensic Psychology Registrar, MERIT/Drug Court Caseworker): soren.ashley@health.nsw.gov.au
5. Daniel Rathbone (Forensic Psychology Registrar, MERIT/Drug Court Caseworker): daniel.rathbone@health.nsw.gov.au

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Contact:
- Soren Ashley (Forensic Psychology Registrar, MERIT/Drug Court Caseworker): soren.ashley@health.nsw.gov.au
- Daniel Rathbone (Forensic Psychology Registrar, MERIT/Drug Court Caseworker): daniel.rathbone@health.nsw.gov.au