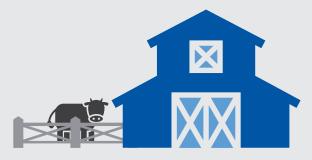




The April 2020 collection covers around **56 per cent** of Australia's population—about **13.1 million Australians**.



Capital city cocaine and heroin average consumption exceeded regional consumption.



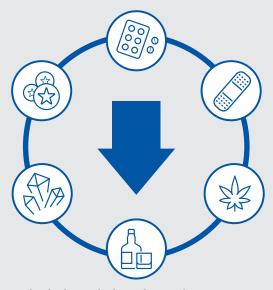
Regional nicotine, alcohol, methylamphetamine, MDMA, MDA, oxycodone, fentanyl and cannabis average consumption exceeded capital city consumption.

Of the drugs measured with available dose data, **alcohol** and **nicotine** remain the most consumed, with **methylamphetamine** the most consumed illicit drug.

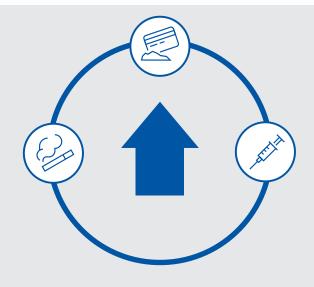




Between December 2019 and April 2020, the population-weighted average capital city consumption of:



alcohol, methylamphetamine, MDMA, oxycodone, fentanyl and cannabis **decreased**

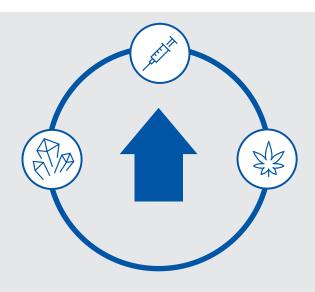


nicotine, cocaine and heroin increased

Between December 2019 and April 2020, the population-weighted average regional consumption of:



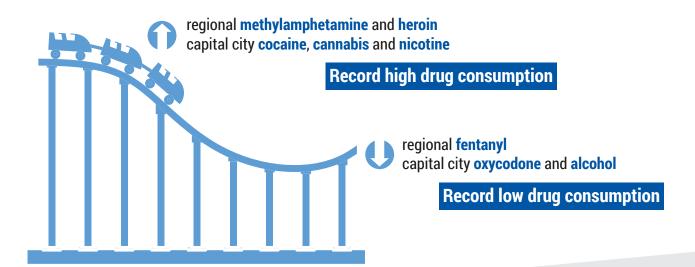
nicotine, alcohol, cocaine, MDMA, oxycodone and fentanyl decreased



methylamphetamine, heroin and cannabis increased



IMPACT OF COVID-19



Price increases have not been a reliable indicator that consumption will decrease—in some places consumption has risen with prices.

Variations exist in drug prices across jurisdictions and drug types, with some wholesale prices changing more than street prices.



Many of the price variations are still within historical ranges



Major regional drug markets, such as those for **methylamphetamine**, **heroin** and **cannabis**, have actually seen increases in consumption during the COVID-19 period.



In one jurisdiction in June 2020, average MDMA capital city consumption exceeded methylamphetamine consumption for the first time anywhere in Australia since the Program commenced.





There is no evidence in the wastewater data that the mooted significant decrease in **heroin** consumption actually occurred, and hence there was no tangible displacement to the **illicit pharmaceutical opioids** market.

The **cannabis** market was not negatively impacted during the COVID period to the extent of other major drug markets, despite highly inflated prices in some areas.

This is likely because almost all of the market is supplied from domestic sources and cultivation occurs nationally.

