

Australian Government Department of Health – Therapeutic Goods Administration

Key findings from tracking research relating to opioid
regulatory reforms and communications

Consumers

Report

7 March 2022

MELBOURNE CANBERRA SYDNEY BRISBANE

www.orima.com





Research objectives & methodology

Project objectives

Understand the **impact of the communication activities in relation to opioid regulations** and **track changes in target audiences' awareness, knowledge, perceptions and behaviours** compared to the developmental research



Measure and track target audiences' awareness, knowledge, perceptions and understanding in relation to pharmaceutical opioid prescription and use.



Measure and track target audiences' current behaviours in relation to opioids.






Measure target audiences' exposure to communications activities in relation to opioid regulations and safe opioid usage more broadly.



Understand the effectiveness of communications activities.

Research methodology

The research comprised a national online survey with four main target audience groups

	Target audience	Target quota	Sample achieved
	Current opioid consumers Currently prescribed or been prescribed in the last six months	n=500	n=519
	Potential opioid consumers Those who currently have a pain condition but are not currently using opioids	n=300	n=314
	General population Adults who do not prescribe opioids, have not been prescribed opioids and are not likely to be prescribed opioids	n=300	n=313
	Opioid prescribers Professionals who can prescribe medicine including GPs, specialists, other doctors (e.g. registrars and residents), dentists and nurse practitioners	n=250	n=250

The prescriber survey data was **weighted** at the data processing stage to balance obtained samples against known population characteristics. Data was weighted to population proportions by role, using the latest figures published by the Australian Health Practitioner Regulation Agency (AHPRA) in September 2021. Weighting was not undertaken for the consumer sample as population proportions are unknown, however loose quotas were applied in order to provide coverage by State / Territory broadly in line with that of the Australian population.

Research methodology

Presentation of results

Percentages from the quantitative survey presented in the report are based on the total number of valid responses made to the question being reported on. In most cases, results reflect those respondents who had a view and for whom the questions were applicable. 'Don't know / not sure' responses have only been presented where this aids in the interpretation of the results.

Results presented in the figures and tables throughout this report are all:

- Weighted results for prescribers unless otherwise stated, whilst sample sizes are all unweighted; and
- Unweighted results for consumers.

For stacked bar charts, numeric labels for categories that are less than three percent of the total proportion have been removed from the chart for clarity, and percentage results throughout the report may not sum to 100% due to rounding.

Base sizes may vary for questions asked of the same respondents due to respondents being able to select 'Prefer not to say' (or similar) throughout the survey (these responses were treated as missing in most cases – i.e. were removed from the valid response base).

Throughout this report, icons will be used to represent the key audience groups.



Current consumers



General population



Potential consumers



Prescribers

Quality assurance

This project was conducted in accordance with the international quality standard ISO 20252, the international information security standard ISO 27001, as well as the Australian Privacy Principles contained in the Privacy Act 1988 (Cth). ORIMA Research also adheres to the Privacy (Market and Social Research) Code 2021 administered by the Australian Data and Insights Association (ADIA).



Green and red arrows have been used throughout this report to denote results that are significantly higher/ lower compared to the previous year or subgroup at the 95% confidence level.

Respondent profile



Community demographic profile



	Current consumers (n=519)	Potential consumers (n=314)	General population (n=313)
Gender	52% Female 48% Male	52% Female 48% Male	50% Female 50% Male
Age	39% 18-39 years 47% 40-69 years 14% 70 or over years	25% 18-39 years 51% 40-69 years 24% 70 or over years	36% 18-39 years 53% 40-69 years 11% 70 or over years
Background	5% Aboriginal or Torres Strait Islander 7% Culturally and / or linguistically diverse	2% Aboriginal or Torres Strait Islander 9% Culturally and / or linguistically diverse	1% Aboriginal or Torres Strait Islander 16% Culturally and / or linguistically diverse
Gross annual income	40% Under \$60,000 35% \$60,000 – under \$120,000 23% \$120,000+	43% Under \$60,000 35% \$60,000 – under \$120,000 21% \$120,000+	33% Under \$60,000 42% \$60,000 – under \$120,000 26% \$120,000+
Life situation	59% Working in paid employment or self-employed 2% Studying 11% Unemployed 6% Caring duties 24% Retired	47% Working in paid employment or self-employed 9% Studying 8% Unemployed 7% Caring duties 37% Retired	65% Working in paid employment or self-employed 4% Studying 8% Unemployed 5% Caring duties 19% Retired

Changes to opioid regulations



Awareness of change to opioid regulations

Awareness of changes to opioid regulations increased for current consumers from 2020 and remained stable for potential consumers and general population. Most commonly those who had heard about changes recalled hearing about opioids (including codeine) requiring a prescription in general, but some respondents in each group recalled more specific changes.



20%[↑] of **current consumers** (up from 10% in 2020) were aware of changes to opioid regulations



10% of **potential consumers** (similar to 14% in 2020) were aware of changes to opioid regulations



8% of **general population** (similar to 6% in 2020) were aware of changes to opioid regulations

Top 3 things current consumers had heard (unprompted)

Base: Current consumers who had heard of changes that were made to opioid regulations (n=106)

- 39%** Opioids require a prescription
- 17%** Tighter conditions for prescribing opioids
- 17%** Codeine products now require a prescription

Top 3 things potential consumers had heard (unprompted)

Base: Potential consumers who had heard of changes that were made to opioid regulations (n=30)

- 37%** Opioids require a prescription
- 33%** Codeine products now require a prescription
- 17%** Smaller pack sizes/ reduced quantities/ fewer repeats

Top 3 things general population had heard (unprompted)

Base: General community who had heard of changes that were made to opioid regulations (n=25)

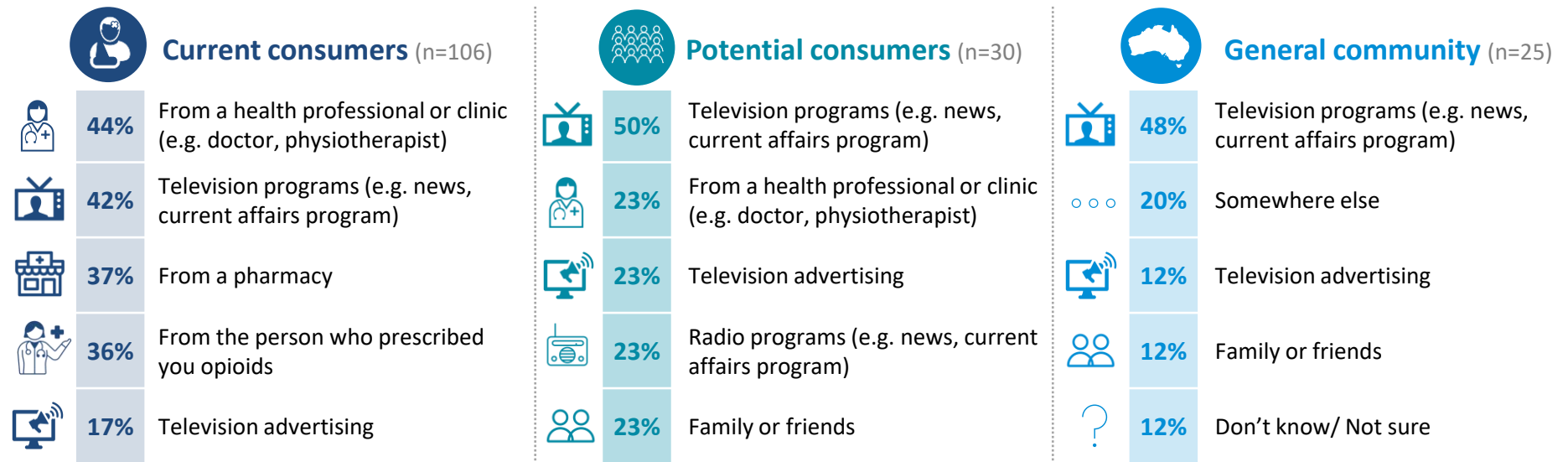
- 48%** Opioids require a prescription
- 32%** Codeine products now require a prescription
- 12%** SafeScript/ Qscript/ database recording patients' scripts

Channels of information

Television was a main channel of information about changes to opioid regulation, particularly television programs such as news and current affairs. Current consumers, and to a lesser extent potential consumers, were also likely to have heard about the changes from a health professional / clinic or pharmacy.

Channels of information (Top 5)

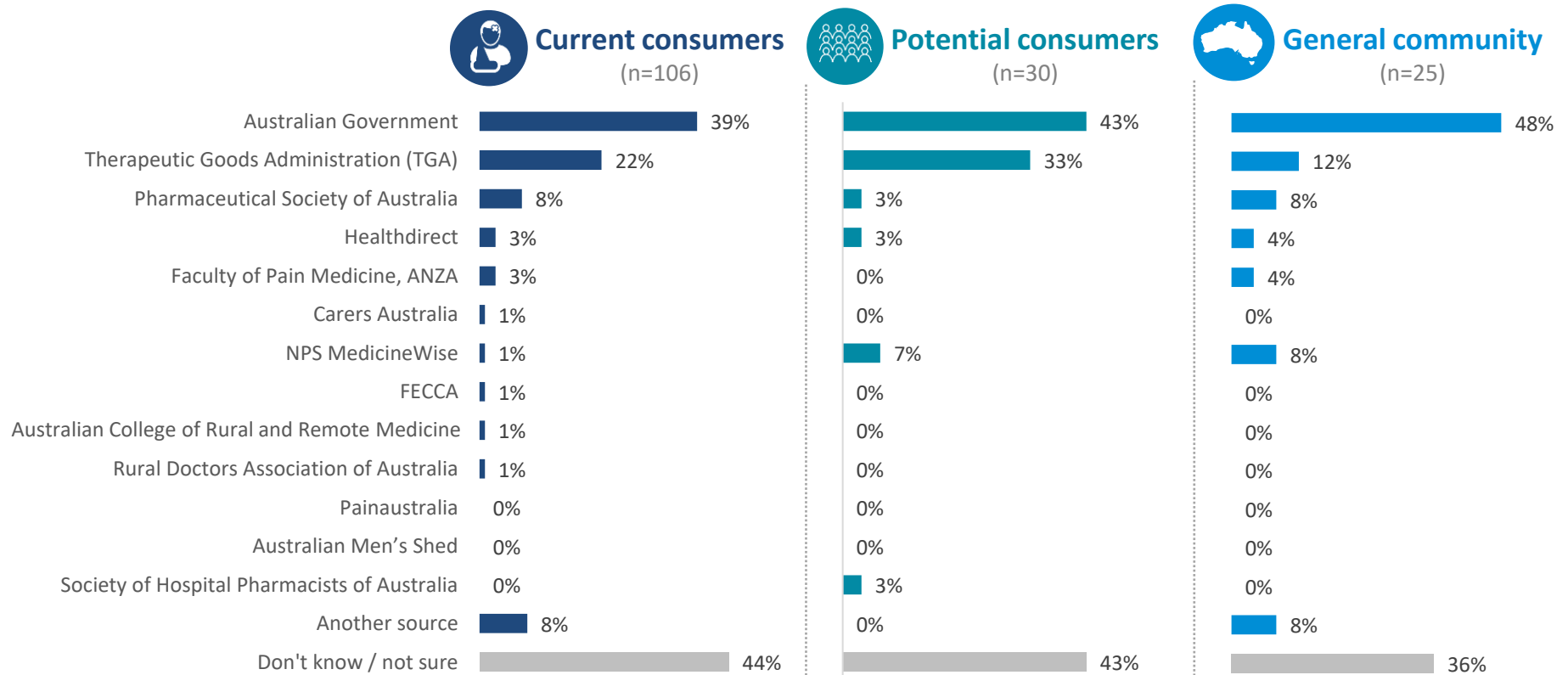
Base: Those aware of changes that were made to opioid regulations



Sources of information







The Australian Government and Therapeutic Goods Administration were the main sources of information about opioid regulations among all groups. Only a minority of respondents recalled the source of information as being from community organisations. However, a notable proportion of all groups were not sure about the source of information.

Sources of information about changes to opioid regulations Base: Those aware of changes that were made to opioid regulations



Perceptions of changes to regulations

Overall, perceptions of changes to regulations largely reflected personal relevance of opioid usage – i.e. the general community perceived the impact of changes to be most positive, followed by potential consumers and current consumers.

Perceptions of impact of regulatory changes Base: Those aware of changes that were made to opioid regulations			 Current consumers (n=91-106)	 Potential consumers (n=23-29)	 General community (n=18-24)
 Personal impact	Positive	12%	10%	17%	
	No impact	50%	72%	67%	
	Negative	38%	17%	17%	
 Impact on family and friends	Positive	13%	19%	25%	
	No impact	67%	50%	67%	
	Negative	20%	31%	8%	
 Impact on Australia as a whole	Positive	65%	65%	89%	
	No impact	15%	9%	0%	
	Negative	20%	26%	11%	

Campaign diagnostics



Exposure to information about opioid safety and alternatives

Current consumers were most likely to have seen or heard information about opioid safety and alternatives to opioids in the last 12 months. Unprompted awareness was very low among all groups, however recall of information was much higher upon prompting.



62% of **current consumers** were exposed to information about the risks and impacts associated with opioids, using them safely or alternatives

Unprompted: 5% Prompted: 61%



55% of **potential consumers** were exposed to information about the risks and impacts associated with opioids, using them safely or alternatives

Unprompted: 3% Prompted: 55%



39% of **general population** were exposed to information about the risks and impacts associated with opioids, using them safely or alternatives

Unprompted: 2% Prompted: 39%

Top 3 things heard (unprompted)

Base: Current consumers who recalled information without prompting (n=25)

- 20%** Information about safe usage/ risks of using opioids (e.g. addiction, dependency, side effects)
- 12%** Alternative non-opioid medication to treat pain
- 12%** Alternative non-medication treatment for pain

Top 3 things heard (unprompted)

Base: Potential consumers who recalled information without prompting (n=10)

- 50%** Information about safe usage/ risks of using opioids (e.g. addiction, dependency, side effects)
- 20%** Alternative non-opioid medication to treat pain
- 10%** Information about specific opioid medications

Top 3 things heard (unprompted)

Base: General population who recalled information without prompting (n=6)

- 67%** Information about safe usage/ risks of using opioids (e.g. addiction, dependency, side effects)
- 17%** Tighter conditions for prescribing opioids
- 17%** Alternative non-medication treatment for pain

Exposure to information about opioid safety and alternatives

When prompted, the majority of respondents had heard some information about opioid safety and alternatives to opioids in the last 12 months – prompted awareness was highest among current consumers, followed by potential consumers and the general community. As expected, general community respondents reported lower awareness across all statements, whereas current and potential consumers had broadly similar levels of awareness.

Seen or heard information in the last 12 months

Base: All respondents



Current consumers

61% Prompted awareness



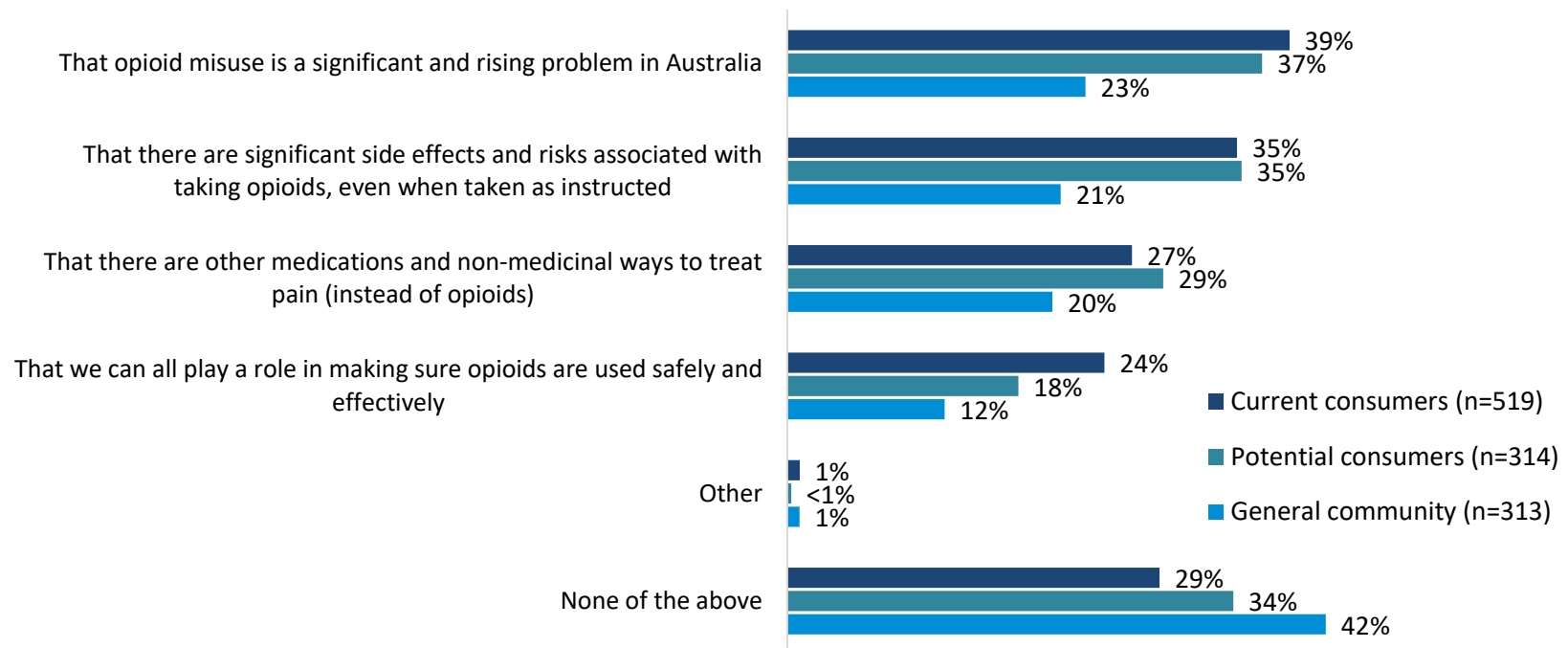
Potential consumers

55% Prompted awareness



General community

39% Prompted awareness

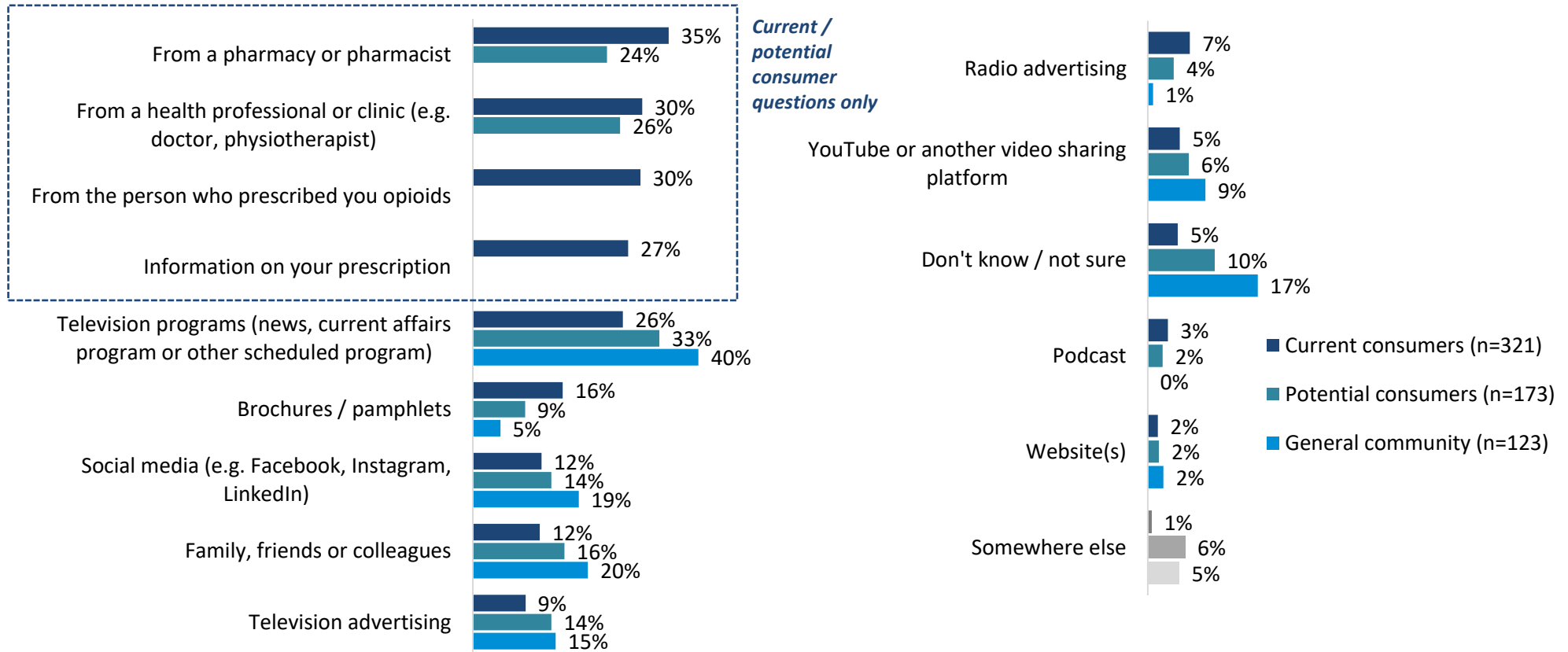


Channels of information

Current consumers who had seen or heard information about opioids were most likely to have been exposed to this information through medical sources, such as a pharmacy, health professional or the person who prescribed them the opioids. General community respondents were most likely to have been exposed through television programs (e.g. news, current affairs).

Channel of information about opioids

Base: Respondents who had seen / heard information about opioids in last 12 months

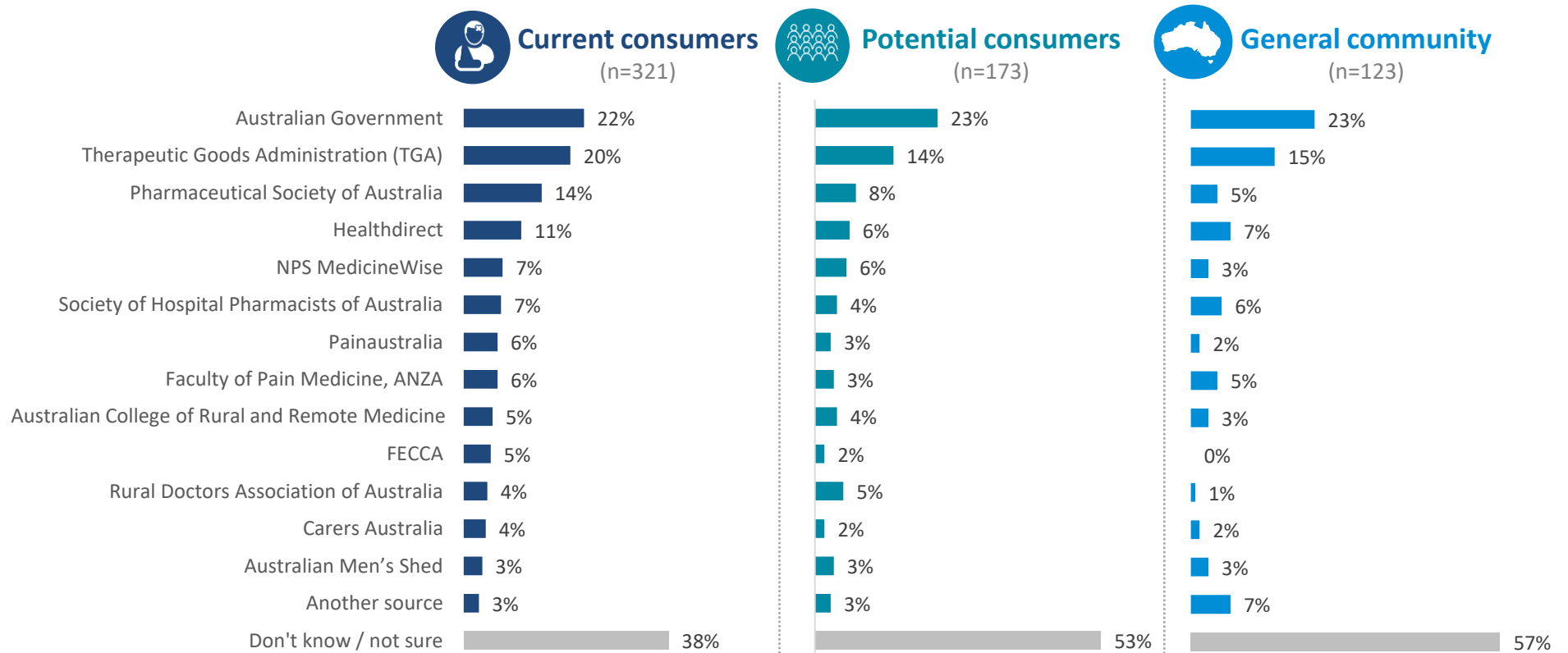


Sources of information

The Australian Government and Therapeutic Goods Administration were the main sources of information about opioid regulations among all groups. Smaller, but notable, proportions of respondents (particularly current consumers) recalled the source of information as being from community organisation partners. However, many respondents were not sure what the source of information they saw / heard was.

Sources of information about opioid safety and alternatives

Base: Respondents who had seen / heard information about opioids in last 12 months

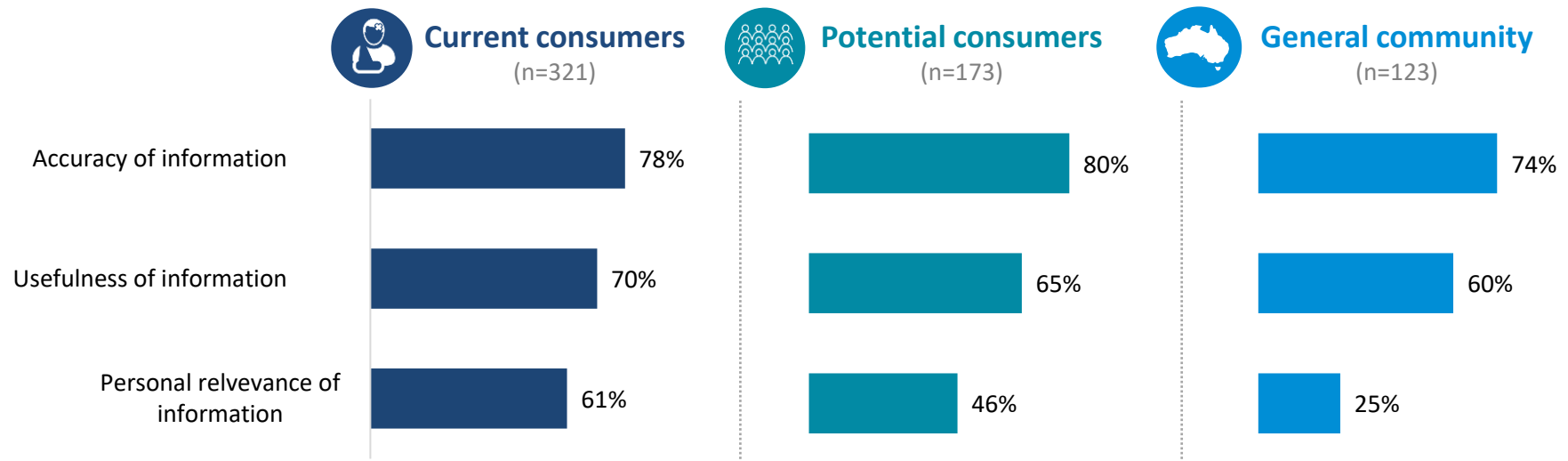


Perceptions of information

Ratings for accuracy and usefulness of information were fairly high and consistent across all groups. Unsurprisingly, personal relevance was higher for current consumers and potential consumers, compared to the general community.

Perceptions of information about opioid safety and alternatives (% of respondents who rated information seen/heard highly)

Base: Respondents who had seen / heard information about opioids in last 12 months



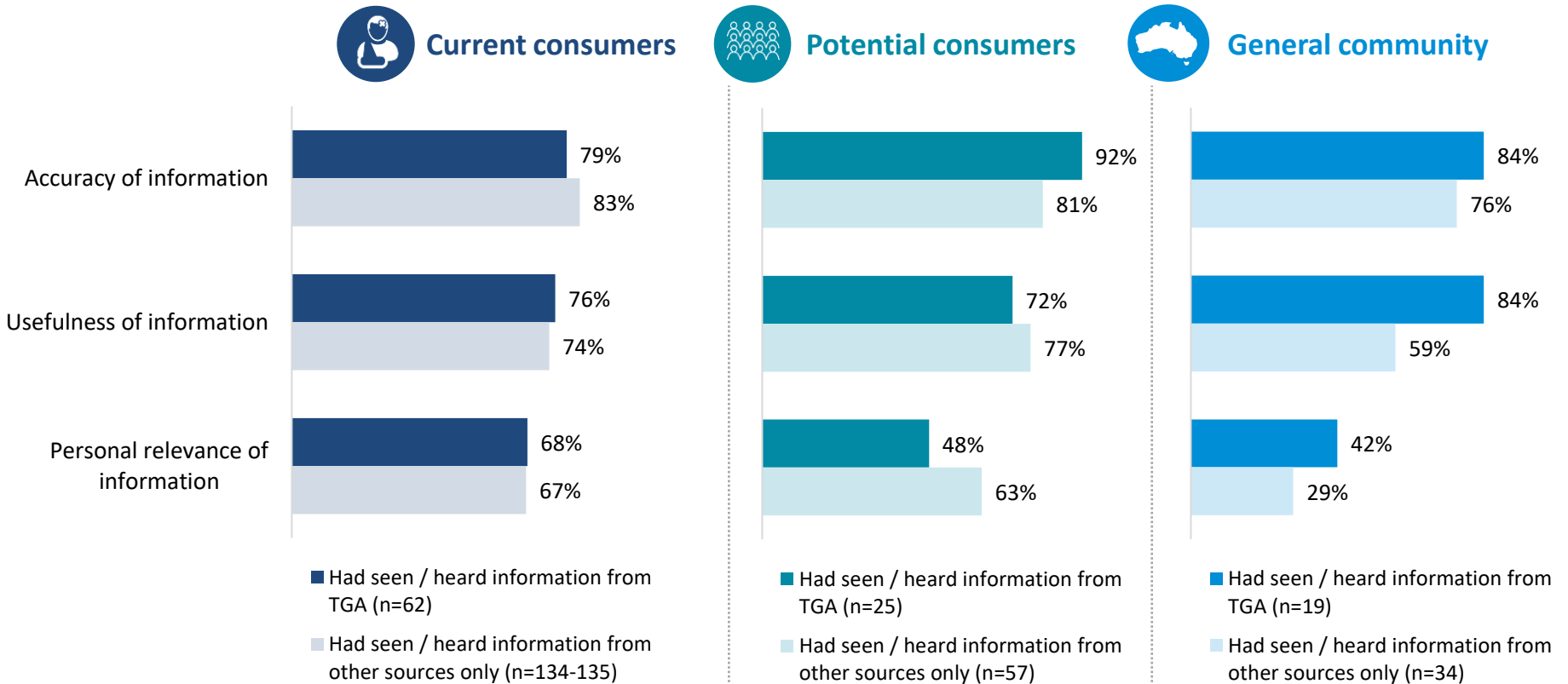
Among those exposed, **24%** of current consumers indicated they felt **more negative** (up from 18% in 2020) about taking opioids after being exposed to information about using opioids safely or alternatives, whereas **19%** felt **more positive** than before (up from 12%).

Perceptions of information by source

Perceptions of information were broadly similar between those who had seen / heard information from TGA and those who had seen / heard information from other sources only. While some differences were observed for the general community, these were not statistically significant.

Perceptions of information about opioid safety and alternatives (% of respondents who rated information seen/ heard highly)

Base: Respondents who had seen / heard information about opioids in last 12 months and recalled source of information





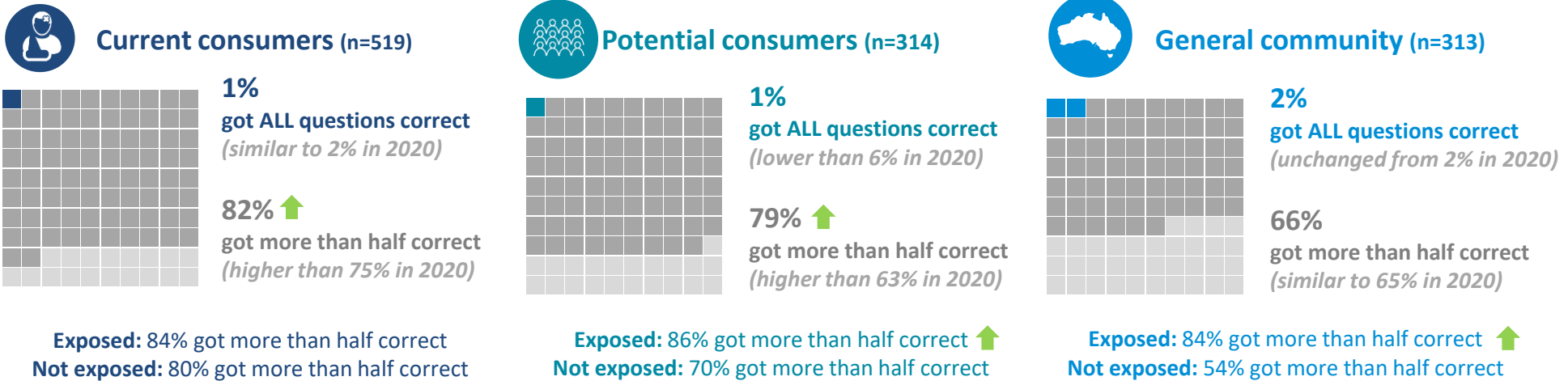
Awareness and knowledge

Overall opioid literacy

Current and potential consumers demonstrated an overall increase in their awareness and knowledge about opioids compared to 2020, as measured by a battery of knowledge and attitudinal questions, while there was no change among the general community. Exposure to information about opioid safety was associated with higher opioid literacy among potential consumers and the general community, but not current consumers.

Overall opioid literacy

Base: All consumers and general community







↑ ↓ Statistically significant increase / decrease compared to 2020 or higher / lower compared to other subgroups

Awareness of opioids

Awareness of the term ‘opioid’ increased among potential consumers, and remained stable for current consumers and the general community. Consistent with 2020, only around half of current opioid consumers were aware that they were taking an opioid medication.

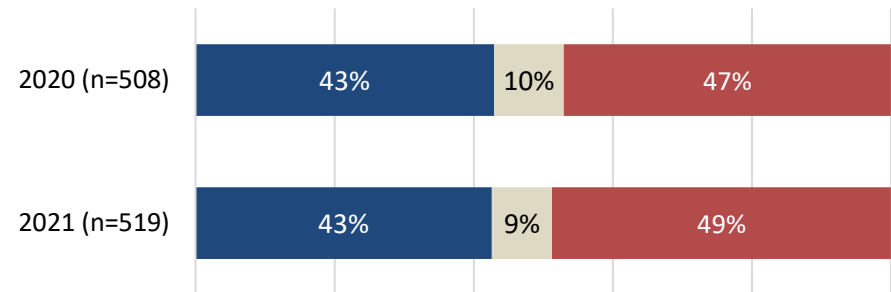
Awareness of term ‘opioid’ (% yes)

Base: All consumers and general community

	2020	2021
 Current consumers (n=519)	82%	84%
 Potential consumers (n=314)	72%	79% 
 General community (n=313)	65%	67%

Consumers awareness of own drugs as opioids

Base: All current consumers



- Correctly identified all of own medication as an opioid
- Correctly identified at least one of own medication as an opioid
- Did not correctly identify any of own medication as an opioid

Awareness and knowledge about opioids

Awareness of most statements remained in line with 2020, however a greater proportion of all groups were aware that the TGA was the regulatory body for medicines and medical devices in Australia. Awareness remained lowest in relation to specific ways to stop taking opioids and safe ways of disposing opioid medication. Exposure analysis suggests that communications activities increased awareness and knowledge among potential consumers and the general community, but not current consumers.

Current consumers		Potential consumers		General community		Awareness and knowledge about opioids (% correct)
2020 (n=508)	2021 (n=519)	2020 (n=330)	2021 (n=314)	2020 (n=330)	2021 (n=313)	
85%	87%	83%	85%	75%	77%	Opioids can be addictive [True]
84%	86%	82%	82%	75%	74%	Opioids are used to treat pain [True]
80%	84%	71%	75%	65%	65%	All opioid medications require a prescription [True]
77%	80%	74%	74%	65%	64%	Taking opioids can have significant side effects even when taken as prescribed [True]
68%	77%	70%	79%	59%	74%	The TGA is the regulatory body for medicines and medical devices in Australia [True]
71%	75%	63%	62%	58%	60%	Taking opioids is as safe as taking Panadol or Nurofen [False]
70%	67%	66%	72%	53%	53%	If you have been taking them for a long time, there are specific ways to stop taking opioids [True]
65%	60%	61%	64%	52%	52%	Safe ways to dispose of opioid medication(s) include flushing them down the toilet or throwing them in the bin [False]



Potential consumers and general community respondents exposed to information about opioid safety or alternatives were more likely to get each statement correct – however, exposure to information was not associated with greater awareness among current consumers, except that opioids can have significant side effects even when taken as prescribed

Awareness of key messages

Awareness across nearly all key campaign messages improved compared to pre-campaign levels among both current and potential consumers and remained generally stable among the general community. The most notable increases were in awareness of key messages that related to the Australian Government’s introduction of smaller pack sizes, improved information and tighter conditions for prescribing opioids.

Awareness of key messages (% fully + partially aware)

Base: All consumers and general community

	Current consumers		Potential consumers		General community	
	2020 (n=588)	2021 (n=519)	2020 (n=575)	2021 (n=314)	2020 (n=330)	2021 (n=313)
Opioids are serious medications that can have negative impacts, even when used as directed	90%	94% ↑	85%	90% ↑	79%	83%
Prescription opioids are a type of medicine usually used for pain relief	90%	93% ↑	81%	89% ↑	75%	80%
We can all play a role by being aware of side effects, asking health professionals about other ways to treat pain; and only taking opioids that are directly prescribed	89%	91%	82%	88% ↑	78%	75%
People will still have access to opioids where it’s medically necessary and clinically appropriate	73%	84% ↑	66%	77% ↑	65%	67%
The Australian Government introduced tighter conditions for prescribing opioids, so they are only used where they have the most benefit to people	63%	75% ↑	51%	65% ↑	44%	54% ↑
The Australian Government introduced improved information about the risks and warnings of opioid usage to patients, doctors and other prescribers	47%	64% ↑	36%	46% ↑	33%	39%
The Australian Government introduced additional smaller pack sizes for people who only need short-term pain relief, for example, after some surgeries or injuries	41%	61% ↑	29%	44% ↑	30%	33%
Over 150 people are admitted to hospitals and emergency departments every day in Australia due to harm from opioids, with two-thirds of these due to prescription opioids.	53%	59% ↑	41%	54% ↑	42%	40%






Statistically significant increase / decrease compared to 2020

Attitudes and perceptions



Consumer attitudes towards opioids and pain management

Consistent with 2020, consumers who were experiencing longer-term pain (i.e. from CNCP or in palliative care) generally held more negative attitudes and fewer positive attitudes. Perceptions among each group were broadly similar to 2020 across all attitudinal statements.

Attitude	Overall consumers		 Potential		 Acute short-term		 CNCP		 Cancer / palliative	
	2020	2021	2020 (n=480-574)	2021 (n=247-310)	2020 (n=112-136)	2021 (n=140-156)	2020 (n=270-302)	2021 (n=198-235)	2020 (n=51-55)	2021 (n=44-51)
I only take my opioid medication when I absolutely need it	84%	82%	-	-	89%	84%	84%	85%	69%	75%
Managing my medications is ultimately my responsibility	84%	82%	86%	82%	82%	80%	84%	85%	80%	88%
I am open to trying other treatments instead of opioids	77%	77%	0%	0%	79%	77%	77%	81%	75%	73%
I'll do anything to make sure I don't become dependent on opioids	81%	76% 	85%	79%	80%	77%	80%	72%	63%	80%
I'm willing to accept the risks of taking opioids because of how much it helps me	66%	64%	-	-	65%	55%	68%	70%	56%	71%
I take opioids because I feel like it's my only option for managing my pain	56%	56%	-	-	44%	41%	61%	60%	54%	63%
If I did get addicted to opioids, I'd be able to deal with it	47%	45%	40%	35%	46%	49%	56%	54%	57%	59%
Making sure my pain is managed is my doctor's responsibility	46%	43%	47%	40%	46%	46%	37%	42%	62%	46%
Taking opioids makes me feel good	31%	34%	-	-	29%	34%	25%	28%	45%	48%
I feel embarrassed about using opioids	22%	23%	-	-	18%	20%	15%	19%	44%	40%

Consumer and general community attitudes towards opioids and pain management

Current consumers' additional attitudes towards opioids, medications and pain management were largely stable between 2020 and 2021. Potential consumers and the general community demonstrated greater variability with some significant declines in agreement recorded across various statements.

	Current consumers		Potential consumers		General community	
	2020 (n=524-585)	2021 (n=467-513)	2020 (n=513-575)	2021 (n=266-310)	2020 (n=254-325)	2021 (n=240-304)
Opioids are a serious medication that should be taken with care	88%	86%	92%	88%	88%	86%
I feel comfortable to question my doctor's medical advice and treatment plan	79%	81%	83%	76% ↓	77%	69% ↓
I trust in what my doctor prescribes and recommends to me	80%	78%	85%	77% ↓	76%	73%
Unsafe and ineffective usage of prescription opioids is a problem in Australia	69%	71%	72%	73%	76%	65% ↓
I shouldn't have to put up with any pain	64%	69%	56%	58%	57%	52%
I generally avoid taking any kind of medication if I can	63%	59%	75%	59% ↓	70%	63%
I would never become addicted to opioids	59%	57%	60%	52% ↓	55%	44% ↓
I am generally scared of being in pain	40%	46% ↑	36%	39%	41%	39%
Only certain people are likely to become dependent on opioids	34%	37%	30%	25%	27%	23%

Behaviours



Current opioid usage

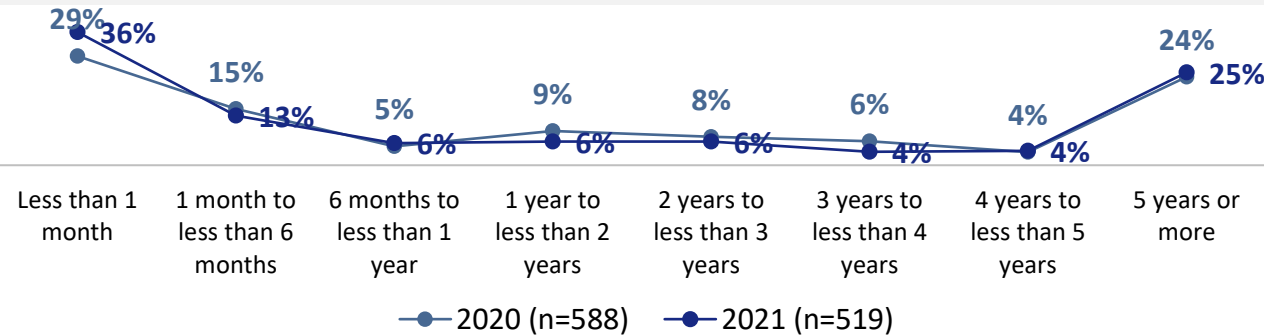
Opioid medications consumers were taking (Multiple response)

Consumers were currently taking the following opioid medications:

41%	Codeine	3%	Morphine or hydromorphone	3%	Fentanyl patches
13%	Oxycodone	6%	Tapentadol	3%	Methadone
10%	Tramadol	2%	Buprenorphine	2%	Pethidine (2021, n=517)

How long consumers had been taking opioid medications

Around half of current consumers (51%) had been taking opioid medications for **1 year or more**



Conditions consumers were taking opioid medications for (Multiple response)

Around half of current consumers (48%) were taking opioid medications to treat **chronic non-cancer pain**

2020	2021	2020	2021		
54%	48%	Chronic pain	6%	7%	Pain related to cancer
34%	39%	Pain from a recent injury or surgery	3%	2%	Other
24%	28%	Pain related to another illness			

(2020, n=588 and 2021, n=519)

Who and where consumers went to (Multiple response)

2020 (n=588)	2021 (n=519)	
73%	69%	Consumer's regular General Practitioner
20%	17%	A specialist doctor (e.g. oncologist)
15%	17%	A hospital doctor
11%	12%	A pain specialist
8%	10%	A GP (not the consumer's regular GP)
6%	5%	A dentist
1%	<1%	A nurse practitioner

The majority were prescribed opioid medications at a **GP / medical clinic** – primarily mid-sized (around 5 to 10 GPs, 38%)

2020 (n=508)	2021 (n=519)	
80%	83%	A GP / medical clinic
25%	30%	In hospital – another department
14%	18%	In hospital – the emergency department
9%	8%	A pain clinic
7%	6%	A dentist clinic

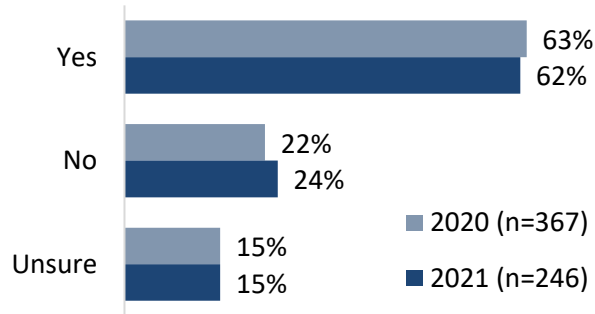
Percentages are based on the total number of valid responses made to the question being reported on. Percentages may not sum to 100% due to rounding.

Information- seeking and alternative ways to treat pain



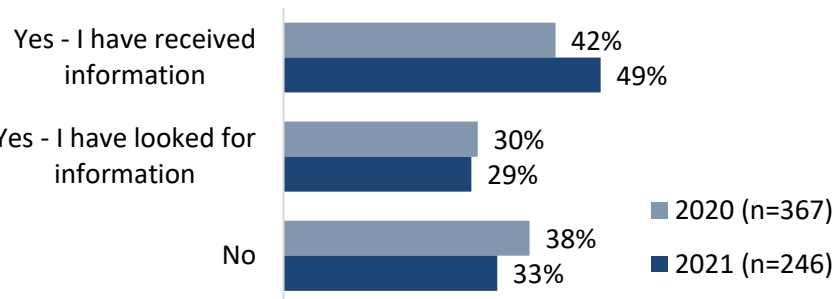
Provided with information at the time of prescription (from the person who was prescribing)

As in 2020, just over six in ten current consumers recalled being provided with information about their opioid medication at the time of prescription.



Received or looked for information after prescription (Multiple response)

Two thirds (67%) of current consumers received or looked for information about their opioid medication after it was prescribed, slightly higher than 62% in 2020.



Alternative ways to treat pain (Multiple response)

A total of 87% current consumers (slightly up from 80% in 2020) had been suggested/ offered other pain treatments and 89% reporting having tried other pain treatment options (slightly up from 86%).



% suggested by their prescriber

2020 (n=508) 2021 (n=518)



% respondent tried

2020 (n=508) 2021 (n=519)

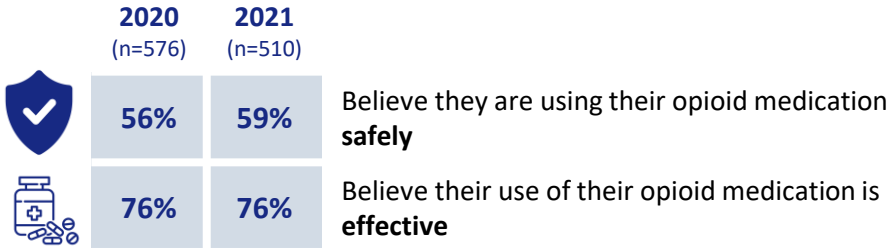
Alternative Treatment	2020 (n=508)	2021 (n=518)	2020 (n=508)	2021 (n=519)
A medication other than opioids (e.g. paracetamol)	47%	42%	57%	55%
A non-medical treatment (e.g. icing, heat packs, rest, exercise)	45%	40%	55%	50%
Treatment by a physiotherapist, osteopath, chiropractor or similar allied health professional	37%	33%	40%	38%
A different opioid medication	29%	27%	34%	33%
Treatment by a pain specialist	20%	25%	20%	21%
Treatment by a psychologist or similar allied health professional	14%	12%	13%	15%
Other	0%	2%	1%	2%
None of these have been suggested to me/ I have not tried any of these	11%	12%	9%	6%
Don't know	8%	10%	5%	5%

Safe, effective and self-limiting behaviours



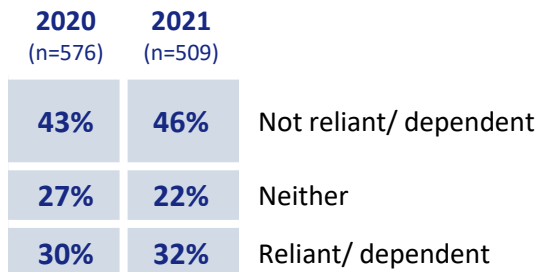
Safety and effectiveness of opioid medication

Compared to 2020, similar proportions of current consumers perceived their usage of their opioid medication to be safe and effective.



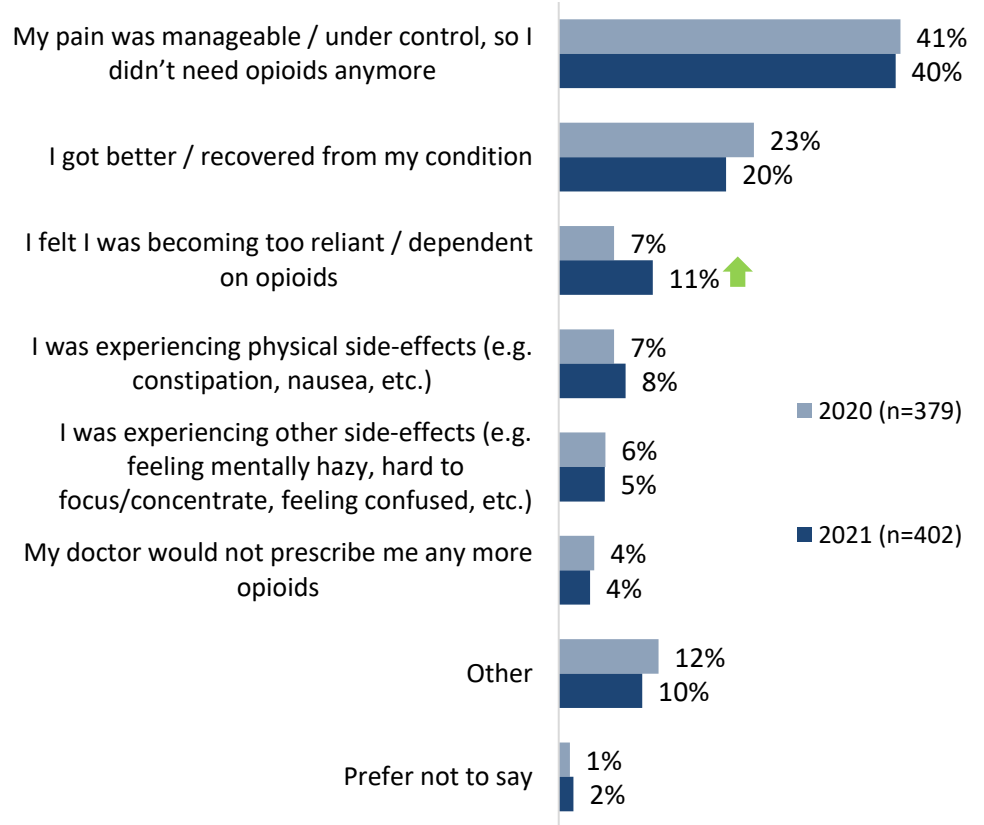
Perceived dependence on opioid medication

Just under one third of current consumers felt that they were reliant/ dependent on their opioid medication, consistent with 2020.



Self-limiting behaviours

Two thirds (67%) of current consumers (similar to 64% in 2020) had tried to reduce or stop taking their opioid medication. The most common reason for trying to reduce/ stop was that their pain was manageable or under control.



Statistically significant increase / decrease compared to 2020

Behaviours by exposure

Exposure analysis suggests that exposure to information about opioids is associated with greater information seeking behaviour and higher likelihood of trying alternative pain treatments. Those exposed to information were also more likely to feel they were reliant / dependent on opioids – indicating greater cut-through of opioids information among this important audience.

Safety and effectiveness of opioid medication

Exposed (n=309-318)	Not exposed (n=185-192)	
60%	56%	Believe they are using their opioid medication safely
74%	78%	Believe their use of their opioid medication is effective

Received or looked for information after prescription

(Multiple response)

Exposed (n=321)	Not exposed (n=198)	
56%	36%	Received information after prescription
33%	24%	Looked for information after prescription

Perceived dependence on opioid medication

Exposed (n=317)	Not exposed (n=192)	
38%	58%	Not reliant / dependent
39%	20%	Reliant / dependent

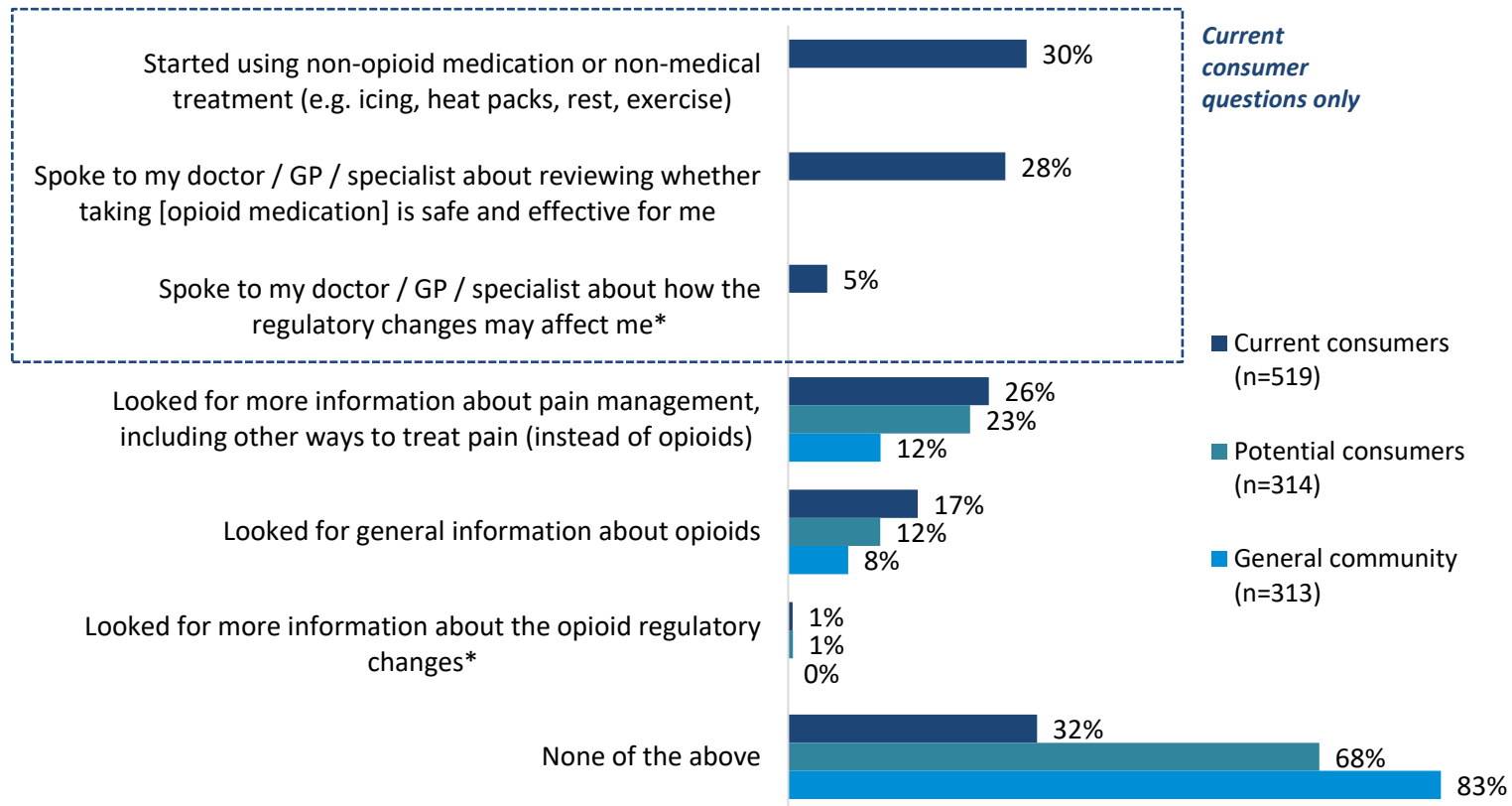
Self-limiting behaviours and alternative treatments

Exposed (n=211-321)	Not exposed (n=142-198)	
70%	62%	Tried to reduce or stop taking opioid medication
93%	81%	Tried at least one alternative pain treatment option
63%	54%	Tried two or more alternative pain treatment options

Statistically significantly higher / lower compared to other subgroups

Actions taken in the past 12 months

The majority of current consumers (68%) took some action relating to opioids in the past 12 months, significantly higher than potential consumers (32%) and the general community (17%). Current consumers most commonly reported starting to use non-opioid medication or non-medical treatments and speaking to their medical practitioner whether taking their opioid medication is safe and effective for them. The most commonly reported action amongst potential consumers and the general community was looking for more information about pain management.



*These questions were only asked of those who had heard of changes that were made to opioid regulations in the last 12 years



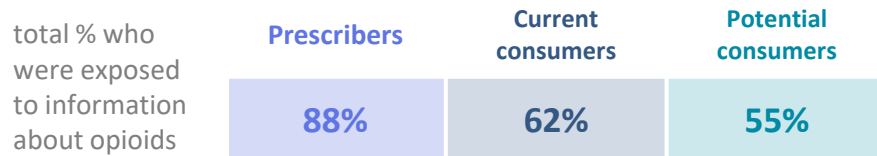
Consumers compared to prescribers

Campaign diagnostics



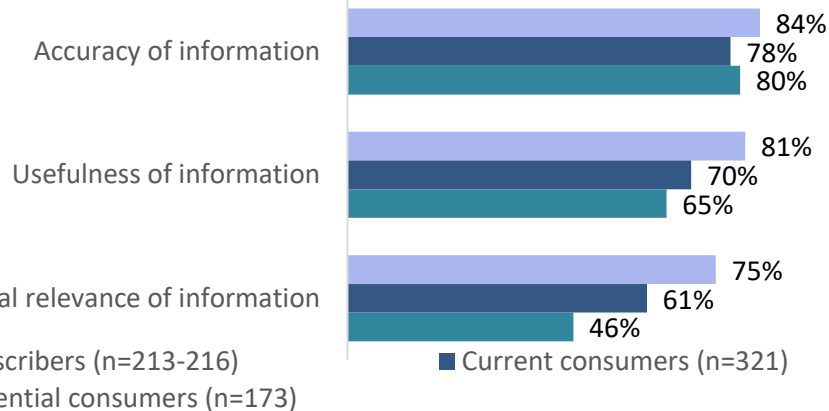
Exposure to information

Prescribers were much more likely than consumers to have seen or heard some information about opioid safety or alternatives in the past 12 months. The leading channels of awareness for prescribers were industry sources, whilst consumers were most likely to be exposed to information through their pharmacy/ pharmacist. Consumers were also more likely to have been exposed to information through television programs compared to prescribers.



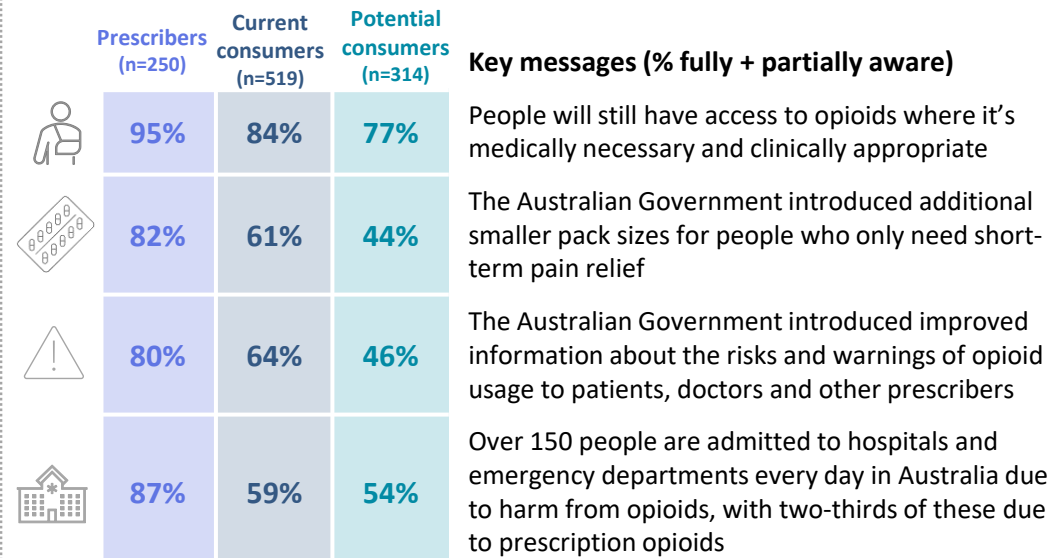
Perceptions of information

Ratings for accuracy and usefulness of information were very positive and similar among both consumers and prescribers. However, personal relevance was higher for prescribers.

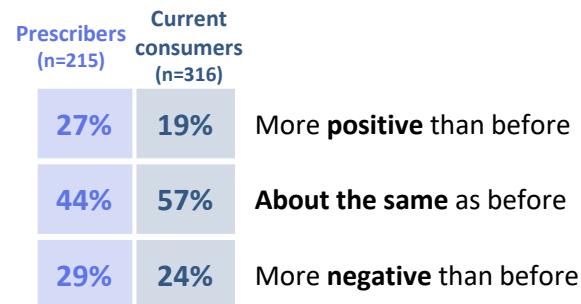


Awareness of key messages

In 2021, prescribers demonstrated higher awareness across all comparable key campaign messages compared to consumers.



Impact of information



A somewhat higher proportion of prescribers felt more positive following exposure to information.

Behaviours



Perceptions of safety and effectiveness of opioid medication

Survey results suggest that prescribers tend to overestimate the safety of their patients' opioid usage, reporting that on average over four-fifths (84%) of patients taking opioids were doing so safely. However, only around three fifths (59%) were categorised as such from the consumer survey. Perceptions of effectiveness were much more similar between the two groups.

Prescribers
(n=341)

Current consumers
(n=510)



84%

% of patients perceived to be using opioid medications safely on average by prescribers vs % of consumers who reported using their opioids medication safely

59%

73%

% of patients perceived to be using opioid medications effectively on average by prescribers vs % of consumers who reported using their opioids medication effectively

76%



Perceptions of dependency, weaning and tapering

The proportion of current consumers who indicated they had tried to reduce or stop taking their opioid medication was moderately higher than the proportion of prescribers who reported they encouraged their patients to do so.

Prescribers
(n=250-299)

Current consumers
(n=353-509)



30%

% of patients perceived to be dependent on their medication by prescribers vs % of consumers who felt they are reliant or dependent on their opioid medication

32%



57%

% of patients who were encouraged to wean or taper off their dosage by prescribers vs % of consumers who have tried to reduce or stop taking their opioid medication

67%

Key insights



Key insights

01 **The majority of current and potential consumers had been exposed to information about opioid safety or alternative treatments**



Unprompted recall of information was very low, but the majority of consumers recalled seeing or hearing some information upon prompting

02 **Medical professionals and resources were the key channels of information about opioids for current and potential consumers**



Most current consumers had seen or heard information from a pharmacy / pharmacist, a health professional or clinic, the person who prescribed them opioids and information on their prescription – reinforcing the importance of continuing to reach consumers through these channels

03 **Consumers identified as currently least likely to self-limit and having the greatest opioid dependency were most likely to have seen/ heard information about opioid safety and alternatives**



This finding suggests that the information has reached those consumers that need it the most – to inform, encourage and equip them to moderate their usage.

04 **Awareness across nearly all key campaign messages improved compared to pre-campaign levels among both current and potential consumers**



More generally, current and potential consumers demonstrated an overall increase in their awareness and knowledge about opioids

05 **Consumers' attitudes towards opioids, medications and pain management remained largely unchanged between 2020 and 2021**



As in 2020, consumers who were experiencing longer-term pain (i.e. from CNCP or in palliative care) held more negative attitudes and fewer positive attitudes

06 **Exposure to information about opioids was associated with greater information seeking behaviour and higher likelihood of trying alternative pain treatments**



Current consumers at the aggregate level were slightly more likely to have tried at least one alternative pain treatment option compared to 2020

This project was conducted in accordance with international quality standard ISO 20252 and the Australian Privacy Principles contained in the Privacy Act 1988.

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