

DRUG USE STIGMA AND DRUG-RELATED HARMS AMONG PEOPLE WHO INJECT DRUGS IN INDIA

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Background

Valid stigma measures are essential for characterizing the epidemiology of stigma and informing and evaluating stigma reduction interventions. We assessed the psychometric properties of a novel theory-driven drug use stigma scale, characterized the population-level distribution of stigma, and examined associations between stigma and drug-related harms among people who inject drugs (PWID) in India.

Methods

From 2022-2024, 4432 individuals who reported injecting drugs in the prior 24 months were recruited using respondent-driven sampling (RDS) across six Indian cities (~750/city). Participants completed interviewer-administered surveys assessing psychosocial constructs including drug use stigma (25 items), and drug use and health outcomes, and provided blood for hepatitis C virus (HCV) antibody testing. We evaluated stigma scale structure using confirmatory factor analysis (CFA) and examined the population-level distribution of stigma domains using the RDS-II estimator. We examined associations of various stigma domains with drug-related harms (e.g., HCV antibody prevalence, non-fatal overdose) adjusted for sociodemographic and behavioral factors via multivariable random-effects logistic regression models.

Results

The median age was 29-years (IQR=24-35); 97% were men. CFA supported a seven-factor higher-order structure comprising enacted stigma (from family, healthcare workers, & society), anticipated stigma (from family, healthcare workers, & society), and internalized stigma domains (e.g., Root Mean Square Error of Approximation=0.070). Stigma burden varied by stigma domain and city, with high internalized stigma levels overall (median score, 1.8 [IQR=1.2-2.0]; theoretical range=0-3). Experiencing higher levels of various stigma domains were significantly associated with higher HCV prevalence and non-fatal overdose in the past 6 months (e.g., adjusted odds ratio=1.81 [95%CI=1.18-2.78] and 1.93 [95%CI=1.15-3.24] respectively, for internalized stigma tertiles 1 vs. 3) (*Figure*).

Conclusion

A multidimensional stigma scale with strong psychometric performance demonstrated a high burden of drug-related stigma and significant associations with HCV infection and overdose. Stigma should be a key target of multilevel interventions to support HCV elimination and improve the health of PWID.

Disclosure of Interest Statement

SHM reports the receipt of products from Abbott Laboratories not related to this study. SSS reports receipts of a grant and honoraria from Gilead Sciences not related to this study. SSS also reports the receipts of grants, products and honoraria from Abbott Laboratories not related to this study. SSS serves on the Board of Trustees for the YR Gaitonde Medical Educational and Research Foundation and the Board of Directors for the Serious Fun Children's Network.

Figure. Associations of drug use stigma domains with (A) HCV infection and (B) non-fatal overdose among people who inject drugs in India. *Estimates were adjusted for age, sex, education, homelessness, incarceration history, duration of injection drug use, injection frequency, and HIV status.

