People living with HIV who inject or have injected non-prescription drugs: evidence of substantial differences in health inequalities and experiences of clinical care

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Introduction and Aims: This study aimed to investigate differences in treatment and health characteristics associated with current, past, or no injecting drug use (IDU) among a sample of people living with HIV in Australia.

Design and Methods: Data were extracted from the HIV Futures 9 study; a cross-sectional survey of people living with HIV across Australia conducted in 2018. Chi-square and ANOVA analyses were used to compare clinical care satisfaction, difficulty paying for treatment, major physical comorbidities, current mental diagnoses, STI screening, STI diagnoses and social connectedness characteristics for those who reported current (last 12 months; n=106), past (more than 12 months ago; n=126), or no IDU (n=508; total N=740).

Results: Current IDU was associated with higher rates of STI testing and diagnoses, and higher social connectedness than past or no IDU. Compared to no IDU, past and current IDU was associated with a greater number of mental illness diagnoses and difficulty in affording healthcare. Past IDU was associated with a greater number of physical comorbidities and lower satisfaction with clinical care than current or no IDU.

Discussions and Conclusions: While both HIV positive IDU groups experience unique health inequalities, past IDU appears to be related to greater dissatisfaction of navigating healthcare than individuals with current IDU experience. Higher social connection and the types of services being accessed by individuals who currently inject may play a role in service satisfaction. Attempts should be made to identify relevant clinical settings for those with past IDU experience and improve their healthcare experiences.

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