

THE NATIONAL STIGMA INDICATOR PROJECT: KEY FINDINGS AND LESSONS REGARDING PEOPLE LIVING WITH HCV AND PEOPLE WHO INJECT DRUGS

Authors: Treloar C, Cama E, Broady T, Brener L, Hopwood M and de Wit J¹
¹ Centre for Social Research in Health, UNSW Australia, Sydney, NSW Australia 2052

Background:

In 2015, the Australian Government funded a national project to monitor stigma among people living with blood borne viruses and sexually transmitted infections as part of the national monitoring project to meet the goals of the National BBV/STI Strategies. This project measured experienced stigma (among people living with HCV and people who inject drugs) and expressed stigma (among health workers and the general public).

Methods:

A “stigma indicator” was applied to four groups of participants via online surveys: (1) people who live with HCV (n=108); (2) people who inject drugs (n=124); (3) a representative sample of the Australian population (n=900); (4) a sample of health workers (n=339).

Results:

More than half of participants reported experiencing stigma within the last 12 months related to their injecting drug use (59%) or hepatitis C status (56%). 17% of people who inject drugs reported that they ‘often’ or ‘always’ experienced stigma or discrimination compared to 6% in relation to hepatitis C status. Among the general public, 87% indicated that they would behave negatively toward someone who injected drugs and 66% indicated the same for people living with HCV.

While health workers reported infrequent instances of discrimination against people with any of the attributes listed, discrimination against people who inject drugs was more common than any other group (35%). Nearly half (43%) of health workers did not feel stigmatised because of the area in which they were employed, though 36% reported ‘sometimes’ or ‘often’ feeling stigmatised.

Conclusion:

Stigma remains a salient experience and a critical barrier to treatment access and ongoing care for affected communities, despite the availability of “better” HCV treatments. These results will be discussed in relation to the key strategies from the literature regarding stigma reduction interventions.

Disclosure of Interest Statement: None to report.