Correlations between injecting frequency and housing stability trajectories evolving concomitantly over one year: results from a cohort study of PWID in Montréal, Canada

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Background / objectives

- Compared to stably housed PWID, unstably housed PWID are at higher risks of negative outcomes, including unsafe injecting and HCV.
- Unstable housing favours drug injecting initiation/relapse, while injecting hampers attainment of stable housing. The correlation between injecting frequency and housing stability over time remains poorly understood.
- Objectives: (1) to identify trajectories of injecting frequency and housing stability over 12 months among HCV-uninfected PWID; (2) to determine population estimates for all trajectories; (3) to evaluate how injecting frequency and housing stability trajectories correlate over time.

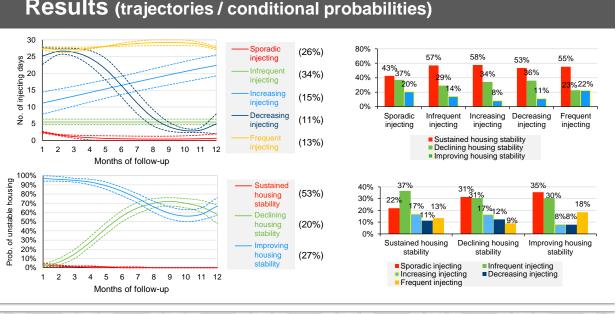
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Methods

- Study design and participants:
 - HEPCO cohort: active PWID, follow-up x3 months
 - Inclusion criteria: enrolled from 2011-2016, HCV RNA– at ≥1 visit, observations gathered for ≥6 out of 12 months

• Variables of interest:

- Injecting frequency: number of injecting days in each of the past 3 months (0-30 injecting days per month)
- Housing stability: type of accommodation lived in the longest in each of the past 3 months (unstable / stable)
- Statistical analysis: group-based *dual* trajectory modelling (PROC TRAJ in SAS, developed by Nagin, Jones, et al.)



Results (trajectories / conditional probabilities)

Conclusions / implications

- \odot PWID with stable injecting frequencies (sporadic, infrequent, frequent injecting) were more likely to improve housing stability compared to those with varying injecting frequencies (increasing, decreasing injecting).
- \odot The association between frequent injecting and improving housing is novel, yet a better understanding of underlying mechanisms is needed.
- \odot Findings are consistent with the evidence of a protective effect of stable housing on drug injecting frequency, and support interventions to improve housing stability among drug using populations.



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 Participants

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