CDUHR SCIENTIFIC BRIEF

Racial/Ethnic Disparities in HIV Rates Among Persons Who Inject Drugs Globally and Their Implications for the Prevention of HIV: Results from a Systematic Review & Meta-Analysis

Background

There are an estimated 16 million people who inject drugs (PWID) across the globe, and nearly 20% of these (approximately 3 million individuals) are infected with HIV. In many locations, substantial proportions of PWID belong to racial and ethnic minority groups. These individuals appear to experience an increased likelihood of HIV infection compared to the racial/ethnic majority. Of concern, the higher rates of HIV infection among minorities may have a number of negative implications for controlling the HIV epidemic among PWID, including multiple reinforcing sources of stigmatization based on racial/ethnic minority status, injecting drug use, and HIV/AIDS, and reluctance on the part of PWID to utilize existing services for fear of stigmatization. However, little is known about racial/ethnic disparities in HIV prevalence among PWID, which has limited our abilities to make recommendations to reduce such disparities.

This Scientific Brief summarizes initial findings from a recent systematic review and meta-analysis conducted by CDUHR Investigator Dr. Don Des Jarlais and colleagues to understand racial/ethnic disparities in HIV prevalence among PWID around the world, and to provide recommendations for reducing these disparities.

Methods

- The study followed PRISMA guidelines (Preferred Reporting Items for Systematic Reviews and Meta-Analyses; http://www.prisma-statement.org/).
- Research reports were included if: (1) HIV prevalence was measured by lab testing; (2) the sample was recruited from a setting other than an HIV treatment location (where all would be HIV infected), or data were presented separately for PWID; and (3) HIV prevalence was reported by racial/ethnic group status.
- A total of 72 studies met these inclusion criteria from the more than 35,000 research reports screened, providing 144 minority group/majority group comparisons.
- For each country, odds ratios (ORs) were calculated for HIV prevalence among each racial/ethnic minority group and contrasted with the national racial/ethnic majority group.

Major Findings

Overall, persons who inject drugs and belong to racial/ethnic minority groups are twice as likely to be HIV seropositive than majority group PWID from the same country (weighted summary OR=2.06). These disparities are particularly high in the U.S. and China. However, heterogeneity among studies was substantial, suggesting important differences in the social determinants of HIV infection.

Conclusions and Policy Recommendations

- Combined HIV prevention programs and new biomedical interventions can dramatically reduce and possibly eliminate injection-related transmission of HIV, including among racial/ethnic minority PWID.
- However, the political will and infrastructure needed to provide high-quality and high-coverage services to minority PWID may be lacking in many countries. Further, increased police presence and criminal retribution in locations with resources for PWID can impede the effectiveness of these programs and interventions.
- The likelihood of reduced financial resources and recent policy decisions against evidence-based programming make it likely that the problem of HIV among minority PWID will become worse in the near future.
- Increases in HIV prevalence within communities of PWID have the potential to trigger further transmission of HIV to individuals who do not inject drugs through unsafe sexual behavior.
- Addressing racial/ethnic disparities in HIV infection among PWID is a fundamental issue in the fight against HIV, particularly in the context of growing emphasis on policies based on scientific evidence and human rights.


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