HOMELESSNESS, UNSTABLE HOUSING AND RISK OF HIV AND HEPATITIS C VIRUS ACQUISITION AMONG PEOPLE WHO INJECT DRUGS – A SYSTEMATIC REVIEW AND META-ANALYSIS

Arum C¹, Fraser H¹, Artenie AA¹, Bivegete S¹, Trickey A¹, Alary M^{2,3,4}, Astemborski J⁵, Debeck K^{6,7}, Dietze P^{8,9}, Dumchev K¹⁰, Hayashi K^{6,7}, Hellard M^{8,11,12,13}, Hickman M¹, Hope V¹⁴, Iversen J¹⁵, Judd A¹⁶, Kaberg M^{17,18}, Kurth AE¹⁹, Cherutich P²⁰, Leclerc P^{21,22}, Lim AG¹, Maher L^{15,8}, Macgregor L¹, Mehta SH⁵, Morris M²³, Ong JJ^{1,24}, Page K²⁵, Platt L²⁴, Prins M^{26,27}, Sack-Davis R^{8,11}, van Santen DK^{8,28}, Solomon SS⁵, Sypsa V²⁹, Todd CS ³⁰, Valencia J³¹, Van Den Boom W⁸, Strathdee SA³², Walker JG¹, Ward Z¹, <u>Stone S</u>¹, Peter Vickerman ¹

- ^{1.} Population Health Sciences, University of Bristol, Bristol, UK;
- ^{2.} Institut national de santé publique du Québec, Québec, Canada
- ^{3.} Département de médecine sociale et préventive, Université Laval, Québec, Canada
- ^{4.} Johns Hopkins University, Baltimore, USA
- ^{5.} British Columbia Centre on Substance Use, Vancouver, Canada,
- ^{6.} Simon Fraser University, Vancouver, Canada
- ^{7.} Burnet Institute, Melbourne, Australia
- ^{8.} National Drug Research Institute, Curtin University, Perth, Australia.
- ^{9.} Ukrainian Institute on Public Health Policy, Kyiv, Ukraine
- ^{10.} Department of Epidemiology and Preventive Medicine, Monash University
- ^{11.} Doherty Institute and School of Population and Global Health, University of Melbourne
- ^{12.} Department of Infectious Diseases, The Alfred Hospital, Melbourne, Australia
- ^{13.} Liverpool John Moores University, Liverpool, United Kingdom
- ^{14.} Kirby Institute for Infection and Immunity, UNSW Sydney, Australia
- ^{15.} University College London, London, UK
- ^{16.} Stockholm Needle Exchange, Stockholm Centre for Dependency Disorders, Stockholm, Sweden
- ^{17.} Department of Medicine Huddinge, Division of Infectious Diseases, Karolinska Institutet, Karolinska University Hospital Huddinge, Stockholm, Sweden
- ^{18.} Yale School of Nursing, Yale University, Connecticut, USA
- ^{19.} Ministry of Health, Kenya
- ^{20.} Université de Montréal, École de santé publique, Montreal, Canada,
- ^{21.} Direction régionale de Santé Publique CIUSSS du Centre-Sud-de-l'Île-de-Montréal, Montreal, Canada
- ^{22.} University of California San Francisco, San Francisco, USA
- ^{23.} London School of Hygiene and Tropical Medicine, London, United Kingdom,
- ^{24.} University of New Mexico, Albuquerque, USA
- ^{25.} Department of Infectious Diseases, Public Health Service of Amsterdam
- ^{26.} Division of Infectious Diseases, Amsterdam Infection and Immunity Institute, Amsterdam University Medical Center, University of Amsterdam, Amsterdam, the Netherlands
- ^{27.} Department of Infectious Disease Research and Prevention, Public Health Service of Amsterdam
- ^{28.} National and Kapodistrian University of Athens, Athens, Greece
- ^{29.} Global Health, Population, & Nutrition, FHI360, Durham, North Carolina, USA
- ^{30.} Harm Reduction Unit "SMASD", Department of Addictions and Mental Health; Madrid; Spain
- ^{31.} Division of Infectious Diseases and Global Public Health, Department of Medicine, University of California San Diego, La Jolla, CA USA.

Background People who inject drugs (PWID) are a key population for HIV and hepatitis C virus (HCV) infection and experience high levels of homelessness and unstable housing. We assessed whether homelessness or unstable housing is associated with HIV or HCV acquisition risk among PWID.

Methods We searched MEDLINE, Embase and PsycINFO databases for studies published from January 2000 to September 2020 that estimated HIV and/or HCV incidence among community-recruited PWID, without language restriction. We contacted authors of studies that reported HIV or HCV incidence but did not report on an association with homelessness or unstable housing, to request data. We extracted and pooled data using random-effects meta-analyses to quantify the associations between recent (current or within last year) homelessness or unstable housing and HIV or HCV acquisition risk. We assessed risk of bias using the Newcastle-Ottawa Scale, and between-study heterogeneity using the l^2 -statistic and p-value for heterogeneity.

Results We included 37 studies with 70 estimates (26 for HIV;44 for HCV). Studies originated from 16 countries including in North America, Europe, Australia, East Africa, and Asia. Pooling unadjusted estimates, recent homelessness or unstable housing was associated with an increased risk of acquiring HIV (crude relative risk[cRR] 1.55; 95% confidence interval [CI] 1.23–1.95; I²=62.7%; p-value=0.00018; n=17) and HCV (cRR 1.65; 95%CI 1.44-1.90; I²=44.8%; p-value<0.0001; n=27). Associations for both HIV (adjusted RR [aRR]:1.39; 95%CI:1.06-1.84; p-value=0.019; n=9) and HCV (aRR:1,64; 95%CI:1.43-1.89; p-value<0.0001; n=14) persisted when pooling adjusted estimates. For HIV, the association for unstable housing (cRR:1.82; 95%CI:1.13-2.95; p-value=0.014; n=5) was higher than for homelessness (cRR:1.44; 95%CI:1.12-1.85; p-value=0.0044; n=11).

Conclusion Homelessness or unstable housing are associated with increased HIV and HCV acquisition risk among PWID. Findings support the development of interventions which simultaneously address homelessness and HIV or HCV infection in this population.

Disclosure of Interest: Dr Stone has no conflicts of interest to report. No pharmaceutical grants were received in the development of this study.