

PARTNER INJECTION AS A CORRELATE OF HEPATITIS C AMONG JUSTICE-INVOLVED WOMEN IN ONE US STATE

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Background:

Injection drug use (IDU) is a leading cause of hepatitis C virus (HCV) transmission, yet limited research focuses on correlates of HCV among high-risk groups of individuals who use drugs, such as women in the criminal justice system. The purpose of this study is to describe self-reported injection drug use patterns and HCV status among justice-involved women and their sex partners in one US sample.

Methods:

Data were collected from incarcerated women (N=500) as part of the NIDA-funded Justice Community Opioid Innovation Network (JCOIN). Women were randomly selected from eight jails in one U.S. state (Kentucky), screened for opioid use disorder, and consented. Analyses examined self-reported HCV status, IDU practices, and IDU practices by recent main and casual sex partners.

Results:

About a third (40.8%) of women in the study self-reported being diagnosed with HCV, the majority of whom (92.4%) were diagnosed more than a year before entering jail. Women who self-reported being HCV-positive were more likely to report lifetime (98.0% vs. 64.1%, $p<.001$) and recent (91.7% vs. 48.6%, $p<.001$) injection drug use when compared to women who reported being HCV negative. In addition, women who self-reported being HCV positive were significantly more likely to report having casual (48.5% vs. 30.3%, $p<.001$) and main (66.2% vs. 45.9%, $p<.001$) sex partners who also injected drugs.

Conclusion:

Because IDU is a robust correlate of HCV status, findings from this study indicate that high-risk injection practices among partners of women involved in the criminal justice system is critical for understanding their HCV risk behaviors. Findings are limited to a justice-involved sample in one US state. Implications for clinical assessment, intervention development, and future research will be discussed.

Disclosure of Interest Statement:

No conflicts of interest to report