

Abstract category: D16 HIV-related stigma, layered stigmas, and marginalized identities

**Title: Voices on stigma: People who inject drugs and the experience of living with infectious diseases in Portugal**

Authors: A. Martins<sup>1</sup>, C. Carvalho<sup>1</sup>, H. Barros<sup>1</sup>, P. Grenfell<sup>2</sup>, T. Rhodes<sup>2</sup>

Institution(s): <sup>1</sup>*Institute of Public Health - University of Porto, Porto, Portugal,* <sup>2</sup>*Centre for Research on Drugs and Health Behaviour, London School of Hygiene and Tropical Medicine, London, United Kingdom*

**Text:** **Background:** People who inject drugs (PWID) are particularly vulnerable to infectious diseases such as HIV, hepatitis C (HCV) and tuberculosis (TB), and those who live with such infections experience multiple layers of stigma. This analysis explores the impact of living with an infectious disease on the meanings and experiences of stigmatization constructed by PWID.

**Methods:** Between December 2010 and March 2011, a purposive sample of PWID was recruited by health professionals working in nine HIV, TB and HCV treatment centers and other harm reduction services located in two cities of Portugal. Semi-structured interviews were conducted to 30 participants with an average age of 40 years, most of whom were male. An inductive, iterative analytical approach was used, drawing on grounded theory.

**Results:** The disclosure of the infection was managed differently by participants: those who chose not to reveal their serum-status, due to fear of negative reactions, and those who told their families and friends, with varying responses of support and rejection.

The majority of participants reported having felt discriminated against due to their disease status, especially HIV, largely due to a lack of awareness, or less health literacy among family members and in wider society. Discrimination, they stated, occurs equally in health care settings, with noticeable difference between services specifically working with PWID and mainstream health services. A hierarchy of infectious diseases, where HIV assumes the greatest significance and HCV the least, was the norm among those living with co-infections: HCV was seen as normal and ubiquitous and therefore less stigmatising, while HIV was still widely seen as a fatal disease.

**Conclusions:** Efforts to sensitize mainstream healthcare providers to PWIDs' complex health needs and to improve wider HIV and HCV literacy among PWID, their support networks and the wider community, will be needed to tackle stigma and discrimination experienced by this marginalized population.

Country of research: Portugal

Related to women and girls: No

Related to children: No

Towards an HIV Cure Symposium: No

Ethical research declaration: Yes