Why was the study done?
This purpose of this study was to determine how poor social conditions (i.e. low socioeconomic status, substance abuse and mental illness) affect individuals’ risks of developing HIV and/or Hepatitis C virus (HCV) in British Columbia. This study analyzed provincial data on HIV and HCV collected over time between the years 1990 and 2013.

What were the main findings?
The study found that poor social conditions did raise individual risk of being infected with HIV/HCV in British Columbia. Factors most commonly associated with HIV/HCV infected groups were male sex, problematic alcohol use, injection drug use, mental illness, Hepatitis B virus (HBV) infection, and low levels of interaction between individuals and the rest of society (social deprivation) and material disadvantage. Being male, living in an urban area, and mental illness had the strongest association with individuals infected with HIV. Urban residence, problematic alcohol use, social and material deprivation and injection drug use were major risk factors for HIV and HCV co-infected individuals and for those with acute (short-term) HCV infection. Problematic alcohol use was associated with those with chronic HCV infection in addition to injection drug use and material and social deprivation.

How can these findings be used?
Poor social conditions and the co-occurrence of infections (HIV/HCV) require integration of testing, care, treatment and support services for infections, substance use and mental illness. Those with HCV infection and HIV/HCV co-infection may require more services than those with chronic HCV infection and HIV. Therefore HIV, HCV and HIV/HCV groups require targeted programs to support the needs specific to each population.

What is the reference for this study?