



*The Staying Safe Study:
Addressing Injection Risk Behaviors,
HCV Infection and Overdose among
Young Injectors in New York City*

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Background

- Nationwide, there is an expanding cohort of young (< 30 years of age), recently-initiated PWID linked to the current opioid epidemic.
- Incidence of acute HCV is increasing nationwide among PWID under age 30.
- Harm reduction efforts have led to major declines in HIV infection among PWID, but the effect on HCV has been markedly less pronounced.
- The threshold of risk reduction necessary to avoid HCV via the parenteral route is significantly higher than for HIV, due both to HCV's higher background prevalence in PWID populations and the hardness of HCV.
- This new generation of young PWID is vulnerable to HCV and HIV infection through the use of non-sterile injection equipment which may undermine the feasibility of eliminating HCV in New York State.

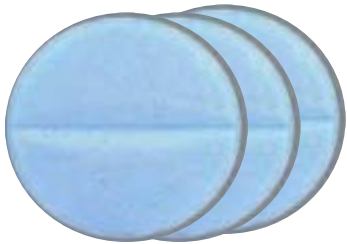
Methods

- Participants were recruited using Respondent-Driven Sampling (RDS), a form of chain-referral sampling designed to engage hard-to-reach populations.
- Eligibility Criteria: opioid use (either nonmedical PO use or heroin use) in the past month; ages 18-29; live in New York City; speak English; and able to provide informed consent.
- Structured assessment queried: socio-demographics; age of initiation into use of various opioids and other drugs and drug injection; drug-use and injection practices; and overdose experiences.
- HIV and HCV status was assessed with rapid antibody testing
- Unless otherwise noted, this analysis is restricted to the 66% (353/539) of the total sample who reported ever injecting drugs or the 63% (337/539) who reported injecting in the past 12 months.

Characteristics of Lifetime Injectors (n=353)

- Mean Age: 24 (SD=3)
- Gender: Female: 34%; Male: 65%; Transgender: 1%
- Ever Homeless: 70%
- Race-Ethnicity
 - White: 73%
 - Latino/a: 19%
 - Non-White/Non-Latino/a: 8%
- Education
 - Some high school: 19%
 - High school diploma or GED: 38 %
 - Some college: 37%
- Annual Household Income while Growing Up:
 - \$0-50,000: 36%
 - \$51,000-100,000: 33%
 - >\$101,000: 23%
 - Don't Know: 8%
- Ever Overdosed: 56%

Opioid Use Trajectory



**Initiation of
Nonmedical PO Use**

Mean Age=16.5
(SD=3.0)

**Heroin
Initiation**

Mean Age: 19.1 (3.5)

1st Heroin Injection

Mean Age: 20.4 (3.7)

1st PO Injection (59%)

Mean Age: 20.6 (3.6)

Injection Risk Behavior (n=337)

- **Distributive Sharing (past 12 months)**
 - o 51% distributed used syringes
 - o 31% to 1-2 people
 - o 20% to 3 or more people
- **Receptive Sharing (past 12 months)**
 - o 40% injected with a non-sterile syringe
 - o 33% received a non-sterile syringe from 1-2 people
 - o 7% received a non-sterile syringe 3 or more people
- **Sharing Cookers (past 12 months)**
 - o 59% shared cookers in the past year
 - o 32% with 1-2 people
 - o 27% with 3 or more people

Syringe Sources (n=337)

	Last 12 months %	Last 30 days %
Pharmacy/drug store	86%	69%
Syringe Exchange Program	52%	40%
Friend or acquaintance	41%	26%
Sex partner	15%	9%
Purchased on the street	7%	1%
Purchased from a dealer	7%	1%
Any relative, including parents	5%	1%
Doctor's office, hospital, or clinic	4%	1%

HIV and HCV Prevalence

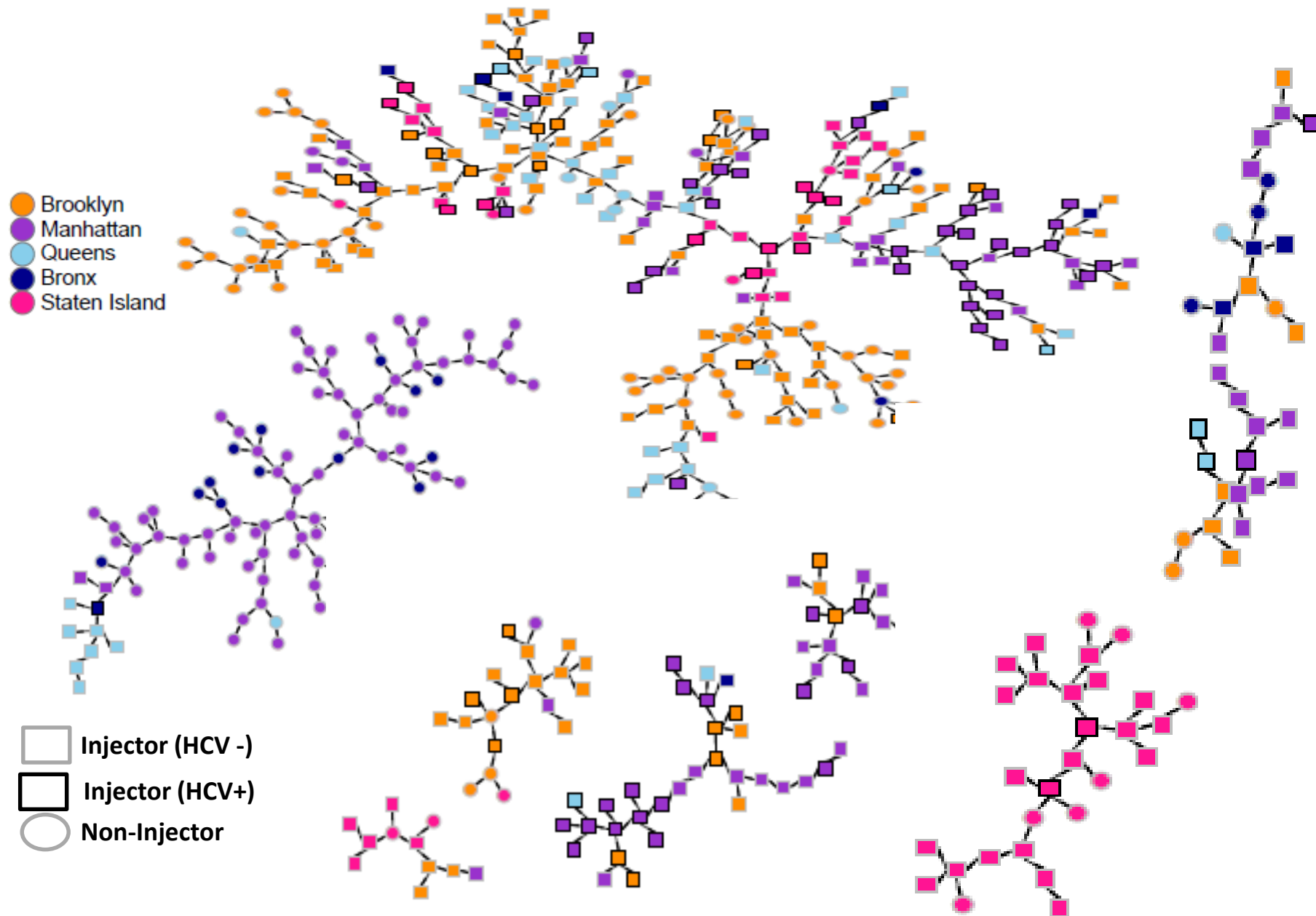
- 30% (n=105) of PWID tested HCV antibody-positive.
- 0.8 % (n=3) tested HIV antibody-positive.

HCV Antibody Status by Years of Injection (n=352)

Years Injection	HCV-	HCV+	Prevalence	Incidence per 100 PY
< 1 year	42	0	0%	0
1 year	42	6	13%	13
2 years	37	10	21%	12
3 years	28	8	22%	8
4 years	29	6	17%	5
5 years	16	18	53%	14
6 years	17	8	32%	6
7 years	12	9	43%	8
8 yrs or more	25	39	61%	
Total	248	104	30%	9

Incidence = total # HCV positive/(total # injecting years for HCV- + 0.5* total # injecting years for HCV+). This equation assumes HCV occurs at the midpoint between drug injection initiation and the time of survey. Also assumes that those injecting for <1 year have been injecting for 0.5 years total.

HCV & IDU in Recruitment Chains (n=539)



Summary of Analysis

- In multivariable analysis, testing HCV-positive was associated with
 - lifetime homelessness;
 - injecting with 8 or more people in past 3 months;
 - having been incarcerated 3 or more times; and
 - injecting 7 or more years.
- In a separate analysis, knowing any opioid user(s) older than 29 was associated with testing HCV-positive.



- Staying Safe Intervention

Young people who have recently transitioned to injection drug use are at significant risk for exposure to the hepatitis C virus (HCV) relative to older people who inject drugs.

Staying Safe (Ssafe) is a strengths based, socio-behavioral HCV-prevention intervention that is tailored to the new generation of young adult opioid injectors, many of whom initiated opioid use with the nonmedical use of prescription opioids.

Ssafe motivates and teaches young injectors planning skills and drug use management strategies to enable long-term risk avoidance and the implementation of healthy protective behaviors.

Content is presented in a small group format through guided discussions and role playing exercises, and relies heavily on interactive participation by group members to foster peer based learning.

Recruitment Flyer



DO YOU WANT TO LEARN HOW TO STAY SAFE?

- **ARE YOU A YOUNG ADULT BETWEEN THE AGES OF 18 & 29?**
- **DO YOU USE HEROIN OR Rx OPIOIDS?**

If you answered **YES** to the questions above, you may be eligible to participate in our study, get **FREE** HCV & HIV testing and be compensated for your time!

For more information, contact or visit us:

The Staying Safe Intervention

235 Eldridge Street | 1st Floor | New York | New York 10002

Tel | 917.261.6456

Monday -Friday 10AM-5:30PM

<http://bit.ly/ssafe>

Ssafe Incentive Schedule

TRIAL EVENT	COMPENSATION DUE
INITIAL SCREENING & BIO-TESTING	\$30
BASELINE	\$40
INTERVENTION: 4 SESSIONS	\$25/Session Or \$100/Cycle
3-MONTH FOLLOW UP	\$40
6-MONTH FOLLOW UP & BIO TESTING	\$50
9-MONTH FOLLOW UP	\$60
12-MONTH FOLLOW UP & BIO TESTING	\$70
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TOTAL COMPENSATION	\$390

ADDITIONAL COMPENSATION	
TRIAL EVENT	COMPENSATION DUE
QUALITATIVE INTERVIEW	\$40
REFERRAL – ELIGIBLE FOR SCREENING	\$20/per person

Study Coupons

- We can give up to 3 coupons to anyone interested in referring participants.
- For each “screenable” participants the person who refers will receive 20\$
- There is no limit in number of referrals
- Easy methods to redeem payment