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# Racial Variations of the Injection Route of Administration among Injection Drug Users in the United States: A Comparative Trend Analysis

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## Introduction

The objective of this research is to address the variations in the injection route of administration among racial groups who are injection drug users in the United States and how that contributes to their vulnerability to HIV/AIDS behaviors and hospital admissions.

## Data Collection

Responses were collected from 96 urban areas among injection drug users in the United States. The dataset: *The Community Vulnerability and Responses to Drug-User-Related HIV/AIDS, 1990-2013 [96 Metropolitan Statistical Areas, United States]* (ICPSR 36575)<sup>1</sup> was used.

## Methods

A comparative trend analysis assessed the various route of administration among four racial groups (Blacks, Latinos, Whites, and other races), who are injection drug users, in the United States. Utilizing a stepwise model building procedure in SPSS version 24, ANOVA test calculated the various coefficients and means using four linear regression models that were compared.

An assessment was conducted on the various injection route of administration of the racial groups that contributed to the ratio of injection drug users who were admitted to the health centers for heroin, crack, or cocaine admissions. Specifically, Whites were compared to Blacks, Latinos, and other races to ascertain the various variations in the injection route of administration that contributed to the likelihood of admissions in the health centers.

## Results

Whites were statistically significantly associated with injection as a tertiary route of administration for heroin, crack, or cocaine ( $\beta=0.004$ ,  $P<0.05$ , **P=0.002**, 95% CI: 0.001 - 0.006) than Blacks, Latinos, and other races.

All racial groups were observed with statistical significance for injection as a primary route of administration ( $P<0.05$ , **P=0.000**), but Whites who are injection drug users were more likely to have been prescribed hospital admissions for utilizing both tertiary and primary injection route of administration ( $P<0.05$ , **P=0.000**) than any other racial group in the United States.

Injection Route of Administration	Racial Groups	P Values
Tertiary route of administration for heroin, crack, or cocaine	Whites only	0.002
Primary route of administration for heroin, crack, or cocaine	All racial groups	0.000

## Conclusion

It's imperative to understand the true likelihood of injection route of administration among racial groups that is crucial for attaining successes in HIV prevention. Health workers may be able to eliminate discrepancies resulting in wrongful or ineffective screening generalizations of injection route of administration among racial groups.

Also, newer drug treatment technologies or therapies for addressing drug injector prevention among Whites should focus on addressing both primary and tertiary injection route of administration, as well as high tendencies for injection drug-use hospital admissions among Whites.

## Keywords

Injection Route of Administration, Racial Disparities, Health Disparities, HIV infections , Injection Drug Users , Comparative Trend Analysis

## References

1.Friedman, Samuel R. *The Community Vulnerability and Responses to Drug-User-Related HIV/AIDS, 1990-2013 [96 Metropolitan Statistical Areas, United States]*. Ann Arbor, MI: Inter-university Consortium for Political and Social Research [distributor], 2017-08-08. <https://doi.org/10.3886/ICPSR36575.v1>