The Early Intervention Program is a sexual health and substance use program based in the University of Cincinnati Hospital Emergency Department. Patients are tested for HIV and screened for risk factors including LGBTQ+ identity and intravenous drug use (IVDU). HIV is a public health crisis, with LGBTQ+ and IVDU patients being at an increased risk for HIV (Moore, 2011). There is a quantity of research done on these groups separately, but not much comparing the two.

This study was a qualitative review of data collected by the Early Intervention Program (EIP). Data was collected by EIP, de-identified, and stored securely in a database. Data was selected based on the date it was collected.

Data was pulled from the database and compiled by EIP’s data manager. Sample included new HIV positives that identified as either LGBTQ+, IVDU or both. Data from IVDU and LGBTQ+ was compared, and demographic data was analyzed as well.

Both LGBTQ+ and IVDU had the same rate of new HIV infection. Of new positives, 14 were cisgender men, 5 were cisgender women, and one person was a transgender female.

Both LGBTQ+ and IVDU have a high burden of disease as compared to those who are not LGBTQ+ and do not inject drugs.

Both LGBTQ+ and IVDU deserve tailored efforts based upon their risk factors in order to stop the spread of HIV.

Targeting efforts by HIV risk factor may not address the testing and risk reduction needs for straight, cisgender, non-IVDU patients.


