



HIV/AIDS services in private substance abuse treatment programs

A.J. Abraham, L.A. O'Brien, B.E. Bride & P.M. Roman

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Background: HIV infection among substance abusers is a growing concern in the United States. Little research, however, has examined the provision of HIV/AIDS services in substance abuse treatment programs.

Methods: This study examines the provision of onsite HIV/AIDS services in a nationally representative sample of 345 privately funded substance abuse treatment programs. Data were collected via face-to-face interviews with administrators and/or clinical directors of treatment programs in 2007–2008.

Results: Results show that larger programs and programs with a higher percentage of both African American and injection drug using (IDU) patients were more likely to offer onsite HIV/AIDS support groups and a dedicated HIV/AIDS treatment track. Multinomial logistic regression reveals that the odds of offering onsite HIV testing services were higher for hospital based programs, programs providing medical services onsite, and programs with higher percentages of African American patients, relative to the odds of offering no HIV testing or referring patients to an external provider for HIV testing services. The odds of providing onsite testing were lower for outpatient-only treatment programs, relative to the odds of offering no HIV testing or referring patients to an external provider for HIV testing services.

Conclusions: Our findings highlight critical barriers to the adoption of onsite HIV/AIDS services and suggest treatment programs are missing the opportunity to significantly impact HIV-related health outcomes.