Stigma snapshot: People who inject drugs 2025

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Stigma Snapshot

People who inject drugs 2025

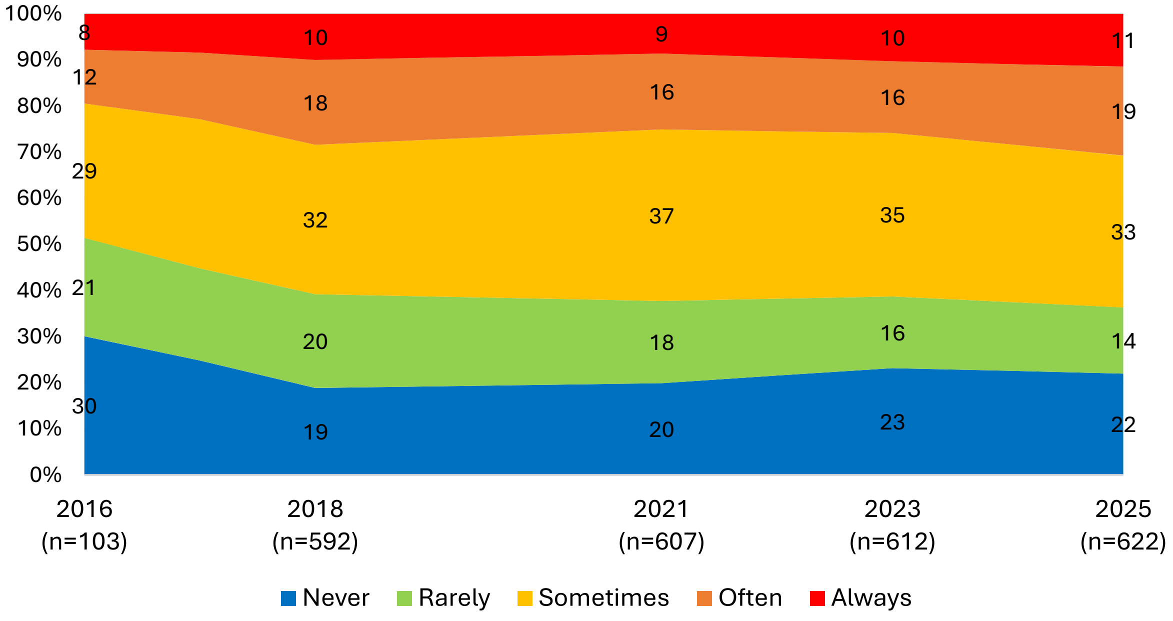
Stigma has a major impact on health outcomes for people living with blood borne viruses (BBVs) and sexually transmissible infections (STIs). The Australian Government Department of Health strategies for BBVs and STIs explicitly aim to 'eliminate the negative impact of stigma, discrimination, and legal and human rights issues on people's health'.

In 2025, a survey of people who inject drugs was conducted to investigate their experiences of stigma in relation to their injecting drug use. This followed on from previous surveys of people who inject drugs, which have been conducted periodically since 2016.

628 people completed the 2025 survey

57% male – 71% heterosexual – 28% Aboriginal or Torres Strait Islander
53% completed high school – 32% employed

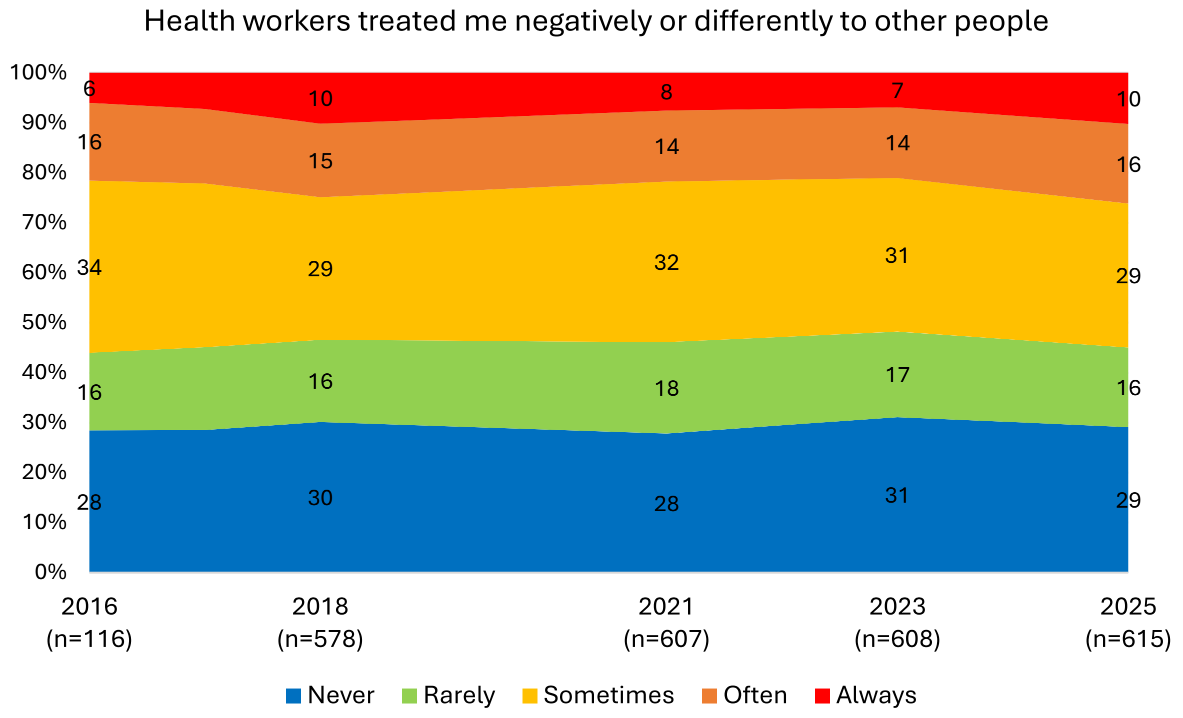
In the last 12 months, have you experienced any stigma or discrimination in relation to your injecting drug use?



Note: This graph excludes 17 participants who responded 'N/A' in 2016.
'N/A' was not provided as a response option after 2016.

In 2025, more than three-quarters of participants (78%) reported experiencing stigma within the last 12 months in relation to their injecting drug use, including 30% who reported that they ‘often’ or ‘always’ experienced stigma. While there has been no significant change in overall experiences of stigma over time, the proportion of participants who reported ‘rarely’ experiencing stigma related to their injecting drug use within the past 12 months decreased from 21% in 2016 to 14% in 2025. This corresponded with a slight increase in more frequent experiences of stigma, though this was not statistically significant.

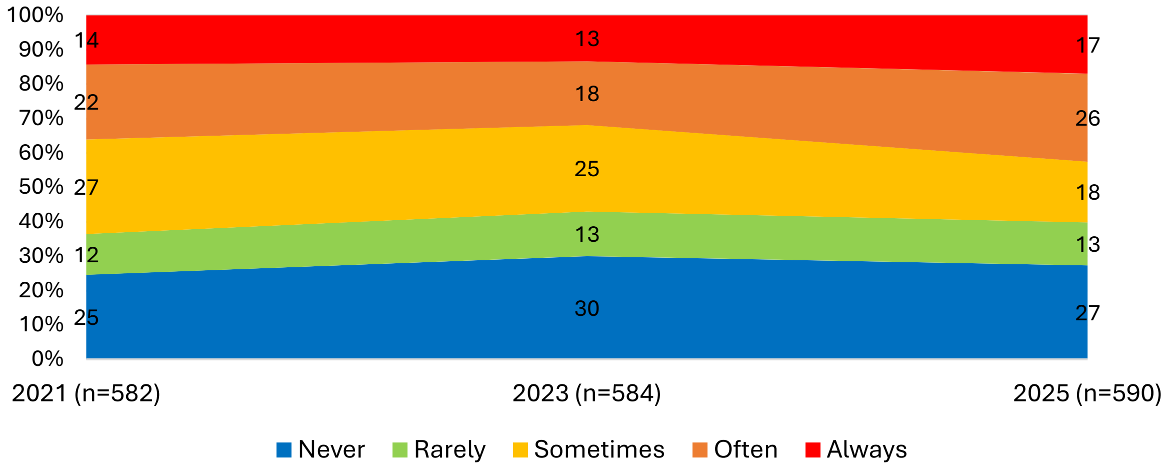
In 2025, 71% of participants reported experiencing any negative treatment by health workers because of their injecting drug use within the past 12 months, including 26% who indicated that this was ‘often’ or ‘always’ the case. These proportions have all remained stable since 2016.



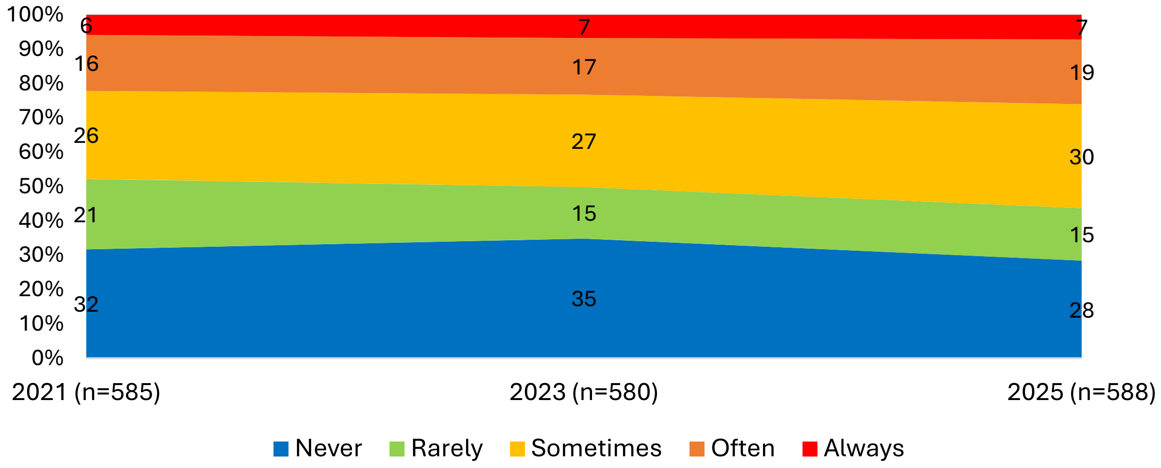
Note: This graph excludes 9 participants who responded ‘N/A’ in 2016.
‘N/A’ was not provided as a response option after 2016.

Participants were asked additional questions about steps they had taken to avoid being treated negatively by health services, which is indicative of reduced access to care due to stigma. In 2025, most participants indicated that at some point in the past 12 months, they had not told health workers about their drug use (73%), not attended a follow-up appointment (72%), delayed accessing health care (65%), downplayed their need for pain relief medication (61%), or looked for different services (59%). The proportion of participants who downplayed their need for pain relief medication decreased from 69% in 2021 to 61% in 2025. Not disclosing drug use became more frequent between 2021 and 2025, with the proportion who ‘sometimes’ did this decreasing (from 27% to 18%) and the proportion who ‘often’ or ‘always’ did so increasing (from 36% to 43%). There was also a decrease in the proportion who ‘rarely’ delayed accessing health care (from 16% to 11%), with a corresponding increase in the proportion who ‘always’ delayed accessing health care (from 4% to 7%).

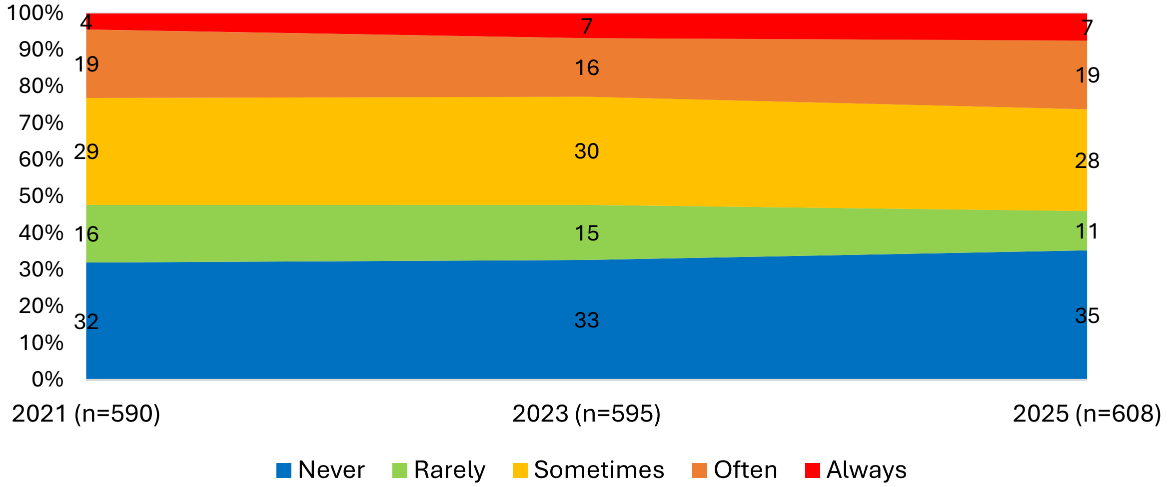
Not told health workers about your drug use



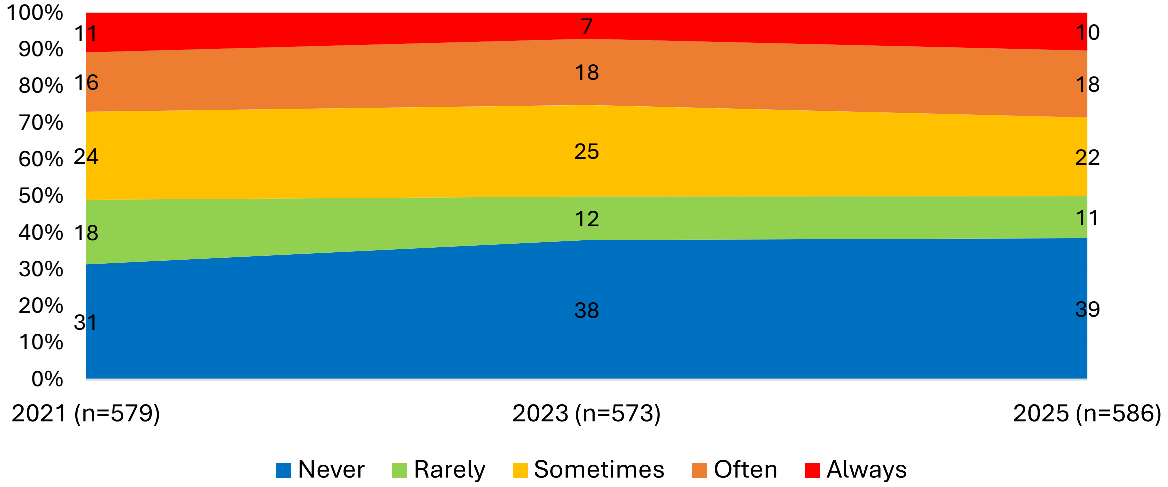
Not attended a follow-up appointment



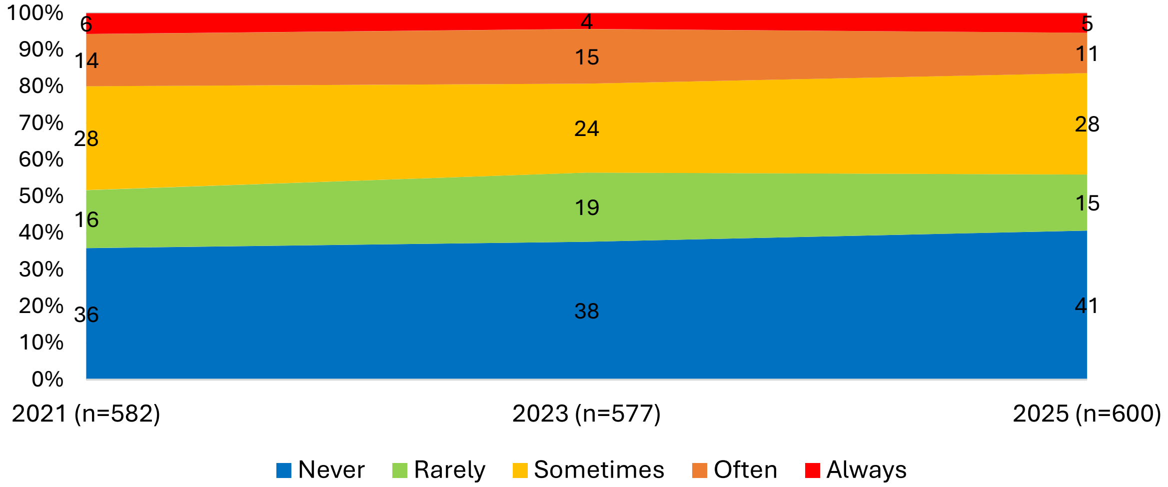
Delayed accessing health care



Downplayed your need for pain relief medication



Looked for different services



Stigma and discrimination continue to be commonly experienced by people who inject drugs, with no meaningful change over time. This remains the case within health care settings, where over 70% of participants reported being treated negatively by health workers within the past 12 months. These findings are even more striking considering similar proportions of participants (59%-73%) reported using different strategies to actively avoid being treated in a negative way by health services, which results in decreased access to health care for PWID. While downplaying need for pain relief medication decreased in frequency over time, not disclosing drug use to health workers and delaying access to health care became more frequent. However, data are cross-sectional and therefore changes across time must be interpreted with caution. These findings nevertheless highlight the significant barriers that stigma and discrimination can create to allowing people who inject drugs to access the quality of health care they need.

The Stigma Indicators Monitoring Project will continue to monitor experiences of stigma and discrimination reported by people who inject drugs, as well as negative behaviour expressed by health care professionals and the general public. Wide-ranging initiatives are required to address stigma towards people who inject drugs within health care systems and throughout society more broadly.

If the results presented here have upset you in any way, we encourage you to seek mental health support from Lifeline (13 11 44) or peer support from AIVL (1 800 692 485).

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We would like to acknowledge the invaluable support of the Australian Injecting & Illicit Drug Users League (AIVL) and their member organisations in assisting with recruiting survey participants.

We would also like to thank everyone who completed the survey.

For more information on this project, please see the project website.

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