

RELATIONSHIPS AND INJECTING DYADS: IDENTIFYING KEY INTERPERSONAL FACTORS UNDERLYING INJECTING BEHAVIORS AND HEPATITIS C VIRUS (HCV) TRANSMISSION AMONG INJECTING PARTNERSHIPS

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Background: Evidence indicates injecting partnerships with close-ties (e.g., sexual, and family members) engage in needle/equipment sharing and contract HCV at higher rates. We aim to (1) identify interpersonal drivers of injecting risk and HCV transmission among people who inject drugs (PWID) and (2) propose an expanded theoretical framework reflective of the dyadic-level of risk.

Methods: Between 2014 and 2015 we conducted semi-structured interviews with young adults PWID about their injecting partners. Open-ended questions elicited narratives on interpersonal dynamics influencing injecting behavior, and relationship-level barriers/facilitators protecting against HCV transmission, across partners. Using a grounded theory approach, we inductively coded and analyzed 35 transcripts and field-notes.

Results: Findings build on existing theory by identifying and illustrating how cooperation, intimacy, power, trust and risk perception operate with in the micro-level of the risk environment. Cooperation relates to the extent partners help each other out when it comes to drugs and injecting. Intimacy, during earlier stages is more superficial resembling the lure of chemistry. As partners spend more time together, intimacy becomes more authentic and is where drug using patterns and routines develop. Power dynamics (the power ratio within partnerships) develop from a reliance on partners for drugs, preparing drugs, or injecting themselves. Trust, develops from observed or assumed information about partner, leads to expectations of “letting your guard down” when injecting. Risk perception, derived from a partner’s street reputation or shared experiences, informs a partner’s risk profile. While findings illustrate factors acting individually to influence dyadic drug use. More often factors work synergistically, resulting in additive effects. Findings reflect the temporal nature of interpersonal dynamics.

Conclusion: Our findings illustrate the powerful influence of interpersonal factors on drug using behaviors and injecting dyads ability to negotiate injecting behaviors. Our goal is to describe the role of injecting related interpersonal factors and the dyadic interaction as an important conceptual and analytic dimension when considering HCV risk for PWID.