

RESEARCH ARTICLE

Competing forces of withdrawal and disease avoidance in the risk networks of people who inject drugs

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Abstract

We analyze a network of needle-sharing ties among 117 people who inject drugs (PWID) in rural Puerto Rico, using exponential random graph modeling to examine whether network members engage in partner restriction to lower their risk of contracting HIV or hepatitis C (HCV), or in informed altruism to prevent others from contracting these infections. Although sharing of used syringes is a significant risk factor for transmission of these diseases among PWID, we find limited evidence for partner restriction or informed altruism in the network of reported needle-sharing ties. We find however that sharing of needles is strongly reciprocal, and individuals with higher injection frequency are more likely to have injected with a used needle. Drawing on our ethnographic work, we discuss how the network structures we observe may relate to a decision-making rationale focused on avoiding withdrawal sickness, which leads to risk-taking behaviors in this poor, rural context where economic considerations often lead PWID to cooperate in the acquisition and use of drugs.

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Introduction

Sharing injection equipment with another person when using drugs can be risky but can potentially also have some benefits. Common risks include the possibility of infection with HIV or the hepatitis C virus (HCV). These risks compete with the potential benefits (or avoidance of negative consequences) that may come from *not* purchasing clean works, such as saving money and time, or avoiding potentially incriminating possession of paraphernalia. When people use drugs with others, maintaining good relationships with co-injectors, who are often an important source of assistance, may also factor into the decision to share injection equipment [1–3]. These benefits and risks are reckoned by individuals in view of their past, their present, their envisioned future, and the surrounding social environment. Here, we examine the role of the HIV and HCV infection status in structuring needle-sharing networks among people who inject drugs (PWID) in rural Puerto Rico.

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