



Short communication

## Gender differences in circumstances surrounding first injection experience of rural injection drug users in the United States



April M. Young<sup>a,b,\*</sup>, Nika Larian<sup>c</sup>, Jennifer R. Havens<sup>b</sup>

<sup>a</sup> Emory University Rollins School of Public Health, Department of Behavioral Sciences and Health Education, 1518 Clifton Road, Atlanta, GA 30322, USA

<sup>b</sup> Center on Drug and Alcohol Research, Department of Behavioral Science, University of Kentucky College of Medicine, 333 Waller Avenue, Lexington, KY 40504, USA

<sup>c</sup> Transylvania University, 300 North Broadway, Lexington, KY 40508, USA

### ARTICLE INFO

#### Article history:

Received 9 July 2013

Received in revised form

23 September 2013

Accepted 14 October 2013

Available online 27 October 2013

#### Keywords:

Gender

Injection drug use

Nonmedical use of prescription drugs

Risk behavior

Rural

### ABSTRACT

**Background:** Research has demonstrated that there can be substantial gender differences in circumstances surrounding initiation of injection drug use; however, little is known about the gendered dynamics of first injection in rural areas where syringe exchange is inaccessible or among those who predominantly inject prescription medications. The present study examines gender differences in first injection experience among rural residents who predominantly inject prescription opioids.

**Methods:** Interview-administered questionnaires collected data from a sample of injection drug users ( $n = 394$ ) recruited from Appalachian Kentucky using respondent-driven sampling.

**Results:** Women were more likely to have initiated injection due to social-pressure ( $p = 0.001$ ), received the drugs as a gift ( $p = 0.011$ ), initiated in their partner's home ( $p = 0.004$ ) and in their partner's presence ( $p < 0.001$ ), been injected by their partner ( $p < 0.001$ ), used an unclean syringe ( $p = 0.026$ ), and received the syringe from their partner ( $p < 0.001$ ). Women were also more likely to report having engaged in sexual intercourse before or after initiation ( $p < 0.001$ ). Men were more likely to have personally purchased the drugs ( $p = 0.002$ ), to have acquired the syringe from a pharmacy/clinic ( $p = 0.004$ ), and to have injected with a friend ( $p = 0.001$ ) or family member ( $p = 0.020$ ). Men were also more likely to have a friend administer the first injection ( $p = 0.007$ ).

**Conclusions:** In this population of rural drug users, notable gender differences in injection initiation were observed. Social pressure played a more substantial role in women's first injection experience, and male partners had an integral role in women's initiation.

© 2013 Elsevier Ireland Ltd. All rights reserved.

### 1. Introduction

Injection drug use is a well-established risk factor for blood-borne infections such as HIV and hepatitis C (HCV; Alter, 2002; Centers for Disease Control and Prevention, 2009), as well as drug dependence (Gossop et al., 1994; Strang et al., 1999) and overdose (Gossop and Griffiths, 1996). Numerous contextual factors influence drug users' likelihood of initiating injection, and the circumstances surrounding the first injection experience are often laden with complex sociocultural norms, particularly those associated with gender. While both sexes commonly report curiosity as the motivation for initiating, women are more likely to cite social network influences (e.g., desire to emulate network members'

behavior, pressure from network members, encouragement by sexual partner) as a reason to start injecting (Frajzyngier et al., 2007). At first injection, women are less likely than men to administer the injection (Draus and Carlson, 2006; Evans et al., 2003; Frajzyngier et al., 2007; Goldsamt et al., 2010), more likely to share equipment (Barnard, 1993; Evans et al., 2003; Frajzyngier et al., 2007; Macrae and Aalto, 2000; Neaigus et al., 2007; Tortu et al., 2003), and more likely to be injected by men, particularly their sexual partners (Crofts et al., 1996; Diaz et al., 2002; Frajzyngier et al., 2007). Male partners also often facilitate women's initiation by purchasing or obtaining the drugs (Bryant and Treloar, 2007; Simmons et al., 2012). These phenomena can be driven by gender norms (Davies et al., 1996; Simmons et al., 2012) and feelings of trust and intimacy (Davies et al., 1996; Macrae and Aalto, 2000; Martin, 2010; Neaigus et al., 1995; Simmons et al., 2012). The drug-using and sexual networks of female injection drug users often have greater overlap than do men's, thus potentially exacerbating women's risk of blood-borne infection (Latkin et al., 1998).

While these studies have provided insight into gender differences in injection practices in urban settings and among users

\* Corresponding author at: Center on Drug and Alcohol Research, Department of Behavioral Science, University of Kentucky, 333 Waller Avenue, Lexington, KY 40504, USA. Tel.: +1 859 323 6553; fax: +1 859 323 5350.

E-mail addresses: [amyoun2@emory.edu](mailto:amyoun2@emory.edu), [april.young@uky.edu](mailto:april.young@uky.edu) (A.M. Young), [nika.larian@gmail.com](mailto:nika.larian@gmail.com) (N. Larian), [jennifer.havens@uky.edu](mailto:jennifer.havens@uky.edu) (J.R. Havens).

**Table 1**  
Characteristics of first injection experience by gender (n = 394).

	Total – n (%)	Male – n (%)	Female – n (%)	p-Value
Age at first injection – median (IQR)	24.0 (20.0–30.0)	24.0 (20.0–28.0)	24.0 (20.0–30.0)	0.237
Reason for first injection				
Curiosity <sup>a</sup>	243 (65.5)	155 (71.1)	88 (57.5)	0.053
Social pressure <sup>b</sup>	59 (15.0)	23 (10.0)	36 (22.1)	0.011 <sup>†</sup>
Emotional distress <sup>c</sup>	17 (4.3)	7 (3.0)	10 (6.1)	0.201
Transitioned from oral/nasal	30 (7.6)	23 (10.0)	7 (4.3)	0.130
Injection was normative <sup>d</sup>	18 (4.6)	7 (3.0)	11 (6.7)	0.196
Other	16 (4.1)	8 (3.5)	8 (3.5)	0.176
Condition at first injection				
Sober	194 (49.2)	114 (49.4)	80 (49.1)	0.813
Intoxicated (drugs or alcohol)	174 (44.2)	106 (45.9)	68 (41.7)	0.541
Ill from withdrawal	26 (6.6)	11 (4.8)	15 (9.2)	0.055
Source of drugs for first injection				
Received as a gift	134 (34.0)	61 (26.4)	73 (44.8)	0.005 <sup>**</sup>
Purchased	253 (64.2)	168 (72.7)	85 (52.1)	0.002 <sup>**</sup>
Other	7 (1.8)	2 (0.9)	5 (3.1)	–
Location of first injection				
Personal residence	294 (74.6)	173 (74.9)	121 (74.2)	0.936
Partner's home	21 (5.3)	3 (1.3)	18 (11.0)	0.004 <sup>**</sup>
Dealer's home	5 (1.3)	4 (1.7)	1 (0.6)	–
Car	24 (6.1)	14 (6.1)	10 (6.1)	0.984
Party	15 (3.8)	12 (5.2)	3 (1.8)	0.023 <sup>†</sup>
Public space	15 (3.8)	12 (5.2)	3 (1.8)	0.224
Hotel	5 (1.0)	2 (0.7)	3 (1.4)	–
Other	6 (1.5)	3 (1.3)	3 (1.3)	0.815
Who was present at first injection				
Alone	62 (15.7)	44 (19.0)	18 (11.0)	0.518
Friend	223 (67.2)	141 (75.4)	82 (56.6)	0.001 <sup>**</sup>
Partner	66 (19.9)	13 (7.0)	53 (36.6)	<0.001 <sup>**</sup>
Immediate family	20 (6.0)	16 (8.6)	4 (2.8)	0.020 <sup>†</sup>
Extended family and/or in-laws	28 (8.4)	17 (9.1)	11 (7.6)	0.590
Other	8 (2.4)	6 (3.2)	2 (1.4)	–
Sexual behavior at first injection				
Before injecting	20 (5.1)	6 (2.6)	14 (8.6)	0.045 <sup>†</sup>
After injecting	57 (14.5)	19 (8.2)	38 (23.3)	<0.001 <sup>**</sup>
Aware of HIV risk posed by IDU	283 (71.8)	174 (75.3)	109 (66.9)	0.411
Time passed between becoming a regular injector				
Never became a regular injector	142 (36.0)	82 (35.5)	60 (36.8)	0.462
Less than one week	114 (28.9)	61 (26.4)	53 (32.5)	0.475
Less than six months	85 (21.6)	52 (22.5)	33 (20.2)	0.534
Less than one year	17 (4.3)	13 (5.6)	4 (2.5)	0.188
Less than 5 years	29 (7.4)	18 (7.8)	11 (6.7)	0.652
More than 5 years	7 (1.8)	5 (2.2)	2 (1.2)	0.470

IQR: interquartile range; IDU: injection drug use.

<sup>a</sup> Includes: “curious to know”, “didn’t know what to expect”, “felt adventuresome”.

<sup>b</sup> Includes: “felt pressured into it”, “wanted to be cool”, “Sister talked [me] into it”.

<sup>c</sup> Includes: “depressed/having problems”, “marital problems”.

<sup>d</sup> Includes: “best friend/partner was [injecting] and [I] ... gave it a try”, “everyone was doing it”.

<sup>†</sup>  $p < 0.05$ .

<sup>\*\*</sup>  $p < 0.01$ .

of heroin, cocaine, and crack (e.g., Bryant and Treloar, 2007; Frajzyngier et al., 2007; Simmons et al., 2012), little is known about gender differences in injection among rural drug users or among users who primarily inject prescription medications. Some research suggests that injection of prescription medications is more prevalent among drug users in rural areas compared to those from urban settings (Young et al., 2010), and that use of prescription opioids, particularly oxycodone, may hasten the transition from non-injection to injection (Young and Havens, 2011). Furthermore, most of the studies conducted to date on initiation of injection have been based in urban areas where syringe exchange programs are available and/or where possession of drug paraphernalia is not criminalized (Bryant and Treloar, 2007; Frajzyngier et al., 2007; Novelli et al., 2005; Sherman et al., 2005; Simmons et al., 2012). This may present a significant gap in understanding given evidence suggesting that syringe availability and policing practices can have a major influence on drug users’ ability to practice risk reduction (Cooper et al., 2005).

The present study was conducted in rural Appalachian Kentucky, where drug paraphernalia laws prohibit the possession of syringes and syringe exchange is unavailable (Kentucky Legislative Research Commission, 2005, 2010). Illicit prescription drug use is prevalent in this population (Kentucky State Epidemiological Outcomes Workgroup, 2011; Young et al., 2012; Zhang et al., 2008) and, unlike many urban populations examined in previous research, the most common drug used at initiation of injection is OxyContin® (Young and Havens, 2011). Furthermore, previous research has identified differences in use of illicit drugs such as heroin and marijuana in this population, speculatively attributed to complex gender norms, roles, and stereotypes (Shannon et al., 2011). No study to the authors’ knowledge has examined gender differences in injection initiation in this population; therefore, the purpose of the present study was to describe and compare the first injection experience of male and female nonmedical users of prescription drugs recruited from rural Appalachia.

Download English Version:

<https://daneshyari.com/en/article/7507254>

Download Persian Version:

<https://daneshyari.com/article/7507254>

[Daneshyari.com](https://daneshyari.com)