YOUNG MEN'S HEALTH PROJECT

Best Evidence – Risk Reduction

INTERVENTION DESCRIPTION

Target Population

• High-risk[‡], young gay and bisexual men

Goals of Intervention

- Reduce unprotected anal intercourse⁺
- Reduce substance use

Brief Description

Young Men's Health Project is an individual-level intervention consisting of 4 motivational interviewing sessions delivered to young gay and bisexual men. The intervention provides information about club drugs and the risk of sex without condoms to enhance motivation and personal responsibility and to establish goals for reducing substance abuse and condomless sex. Session 1 includes an overview of the motivational interviewing approach and its focus on individual readiness for change. Participants identify which of the two target behaviors they would like to work on first, complete a plan for change that addresses goals and barriers, and are encouraged to commit to change. Session 2 focuses on the target behavior not addressed in session 1 and discusses how the two behaviors interact, followed by feedback on both behaviors and a decisional balance exercise to identify the pros and cons of the behaviors. Session 3 involves reviewing progress, assessing readiness to change, addressing motivation, and affirming gains and commitment. Session 4 includes a final review and revision of participants' goals and change plan and provides information about community resources and support services available.

Theoretical Basis

• Motivational Interviewing

Intervention Duration

• Four 1-hour sessions delivered over 12 weeks

Intervention Setting

Research center

Deliverer

• Master's- and PhD-level therapists with training in motivational interviewing

Delivery Methods

- Counseling
- Discussion

- Exercises
- Goal setting/plan

INTERVENTION PACKAGE INFORMATION

Intervention materials are available from Jeffrey T. Parsons, Center for HIV/AIDS Educational Studies and Training, Department of Psychology, Hunter College of the City University of New York, 695 Park Avenue, New York, NY 10065.

Email: jparsons@chestnyc.org for details on intervention materials.

EVALUATION STUDY AND RESULTS

The original evaluation was conducted in New York City, New York between 2007 and 2010.

Key Intervention Effects

• Reduced unprotected anal intercourse⁺

Study Sample

The analytic sample of 143 men is characterized by the following:

- 37% white, 29% Hispanic/Latino, 21% black or African American, 13% other or multiple races
- 100% male
- 92% gay, 8% bisexual
- 100% HIV-negative/status unknown (based on self-report)
- 6% did not complete high school, 13% graduated high school or obtained a GED, 42% completed some college, and 39% graduated college

Recruitment Settings

Venues catering to gay and bisexual men (e.g., bars, clubs, sex venues, streets in predominantly gay neighborhoods, and LGBT community events), flyers, recruitment cards, advertisements, internet chat rooms, and friend referral

Eligibility Criteria

Men were eligible if they lived in the NYC metropolitan area, were 18 to 29 years of age, reported having negative or unknown HIV status, and reported ≥5 days of drug use (specifically cocaine, methamphetamine, gamma hydroxybutyrate, ecstasy, ketamine or popper use) and ≥1 incidence of unprotected anal intercourse⁺ with a high risk male partner (HIV-positive or unknown status main partner, or casual partner of any HIV status) in the past 90 days.

Assignment Method

Men (N = 143) were randomized to 1 of 2 study arms: the Young Men's Health Project (n = 73) or an education comparison (n = 70).

Comparison Group

The education comparison group received factual information about club drug use and HIV sexual risk reduction delivered individually in four 1-hour sessions over 12 weeks. Educators delivered these topics through educational video segments and discussion.

Relevant Outcomes Measured and Follow-up Time

• Sex behaviors in the past 30 days (defined as the number of days of unprotected anal intercourse⁺ with a casual partner) were measured at 3, 6, 9, and 12 months post-baseline, which translates to assessments immediately after and 3, 6, and 9 months after intervention completion.

Participant Retention

- Young Men's Health Project Intervention
 - 84% retained immediately post-intervention
 - 74% retained at 3 months post-intervention
 - $_{\odot}$ 75% retained at 6 months post-intervention
 - $_{\odot}$ 81% retained at 9 months post-intervention
- Education Comparison
 - o 89% retained immediately post-intervention
 - 79% retained at 3 months post-intervention
 - 81% retained at 6 months post-intervention
 - $_{\odot}$ 77% retained at 9 months post-intervention

Significant Findings

 Across the five assessments (baseline to 9-months post-intervention), the number of days of unprotected anal intercourse⁺ with a casual partner in the past 30 days decreased significantly more among intervention participants than among control participants (OR = 0.76, 95% CI = 0.68, 0.85, p < 0.001); this effect remained significant when controlling for drug use (Adj OR = 0.79, 95% CI = 0.70, 0.89, p < 0.001).

Considerations

 Across the five assessments (baseline to 9-months post-intervention), the number of days of drug use in the past 30 days decreased significantly more among intervention participants than among control participants (p < 0.001).

‡High risk defined as being HIV-negative or HIV-status unknown, using club drugs, and having condomless anal sex with a high-risk male partner

†Unprotected sex measured as sex without a condom

REFERENCES AND CONTACT INFORMATION

Parsons, J. T., Lelutiu-Weinberger, C., Botsko, M., & Golub, S. A. (2014). <u>A randomized controlled trial utilizing</u> <u>Motivational Interviewing to reduce HIV risk and drug use in young gay and bisexual men</u>. *Journal of Consulting and Clinical Psychology, 82,* 9-18.

Researcher: Jeffrey T. Parsons, PhD Center for HIV Educational Studies and Training Departments of Psychology and Public Health Hunter College of the City University of New York 695 Park Avenue New York, NY 10065 Email: jparsons@chestnyc.org

