

KEEP IT UP! 2.0

Best Evidence – Risk Reduction

INTERVENTION DESCRIPTION

Target Population

- HIV-negative young men who have sex with men (MSM)

Goals of Intervention

- Reduce incident sexually transmitted infections (STIs)
- Reduce condomless anal sex

Brief Description

Keep It Up! 2.0 is an online and interactive individual-level intervention. It is delivered via computers or tablets, and uses a variety of content (e.g., videos, interactive animation, and games) to increase HIV knowledge, motivate and teach safer behaviors, and instill self-efficacy for HIV prevention strategies. The intervention consists of seven modules based on a particular setting or situation relevant to YMSM. The modules include developmentally appropriate behavior change content. For example, a soap opera-style video following diverse YMSM highlights the risks of assuming a partner's HIV status and monogamy in relationships. The importance of HIV testing, skills for negotiating condom use, and the limits of serosorting among HIV-negative YMSM are also topics discussed. Booster sessions are provided three and six months after the intervention. The first booster provides information on biomedical prevention strategies and focuses on the importance of repeat HIV testing. The second booster focuses on HIV prevention in romantic relationships. During each booster, participants are given the opportunity to review prior content and update previously set goals.

Theoretical Basis

- Information-Motivation-Behavioral Skills (IMB) Model of HIV risk behavior change

Intervention Duration

- Three sessions ≥ 24 hours apart and totaling approximately one hour; three and six month booster sessions

Intervention Settings

- Online

Deliverer

- eHealth modules

Delivery Methods

- Games
- Interactive animation
- Videos

Structural Components

There are no structural components reported for this study

INTERVENTION PACKAGE INFORMATION

An intervention package is not available at this time. Please visit <http://isgmh.northwestern.edu/keepitup/> for more information about the intervention, or contact **Brian Mustanski**, Department of Medical Social Sciences, Feinberg School of Medicine and Institute for Sexual and Gender Minority Health and Wellbeing, Northwestern University, 625 North Michigan Avenue, Suite 1400, Chicago, IL 60611.

Email: brian@northwestern.edu for details on intervention materials.

EVALUATION STUDY AND RESULTS

The original evaluation was conducted between 2013 and 2015 primarily in three cities: Atlanta, Georgia; Chicago, Illinois; and New York, NY.

Key Intervention Effects

- Reduced STIs
- Reduced condomless anal sex with casual male partners

Study Sample

The baseline sample of 901 participants is characterized by the following:

- 37% white, 29% Latino/Hispanic, 24% black or African American, 10% other
- 86% gay, 11% bisexual, 2% straight/other
- 53% 18-24 years old, 47% 25-29 years old
- 13% graduate degree, 46% college; 28% some college; 12% high school or less

Recruitment Settings

Community-based HIV testing organizations, health department clinics, street outreach, and local and national advertising

Eligibility Criteria

Men were eligible to participate if they were between the ages of 18 and 29 years, assigned male at birth and had a current male gender identity, received an HIV-negative test during screening, reported at least one act of condomless anal sex with a male partner in the prior 6 months, had not been in a monogamous relationship for more than 6 months, were able to read English at an eighth grade level, and had an email address.

Assignment Method

Men (n = 901) were randomized to 1 of 2 study arms: Keep It Up! 2.0 Intervention (N = 445) or eHealth control condition (N = 456).

Comparison Group

The eHealth control condition consisted of seven modules completed across three sessions. Topics on HIV/STI transmission, health impacts, treatment, and prevention were provided through static text and images. The content was not tailored to YMSM.

Relevant Outcomes Measured and Follow-up Time

- Incident STIs (i.e., urethral and rectal gonorrhea and chlamydia) were measured at 12 months.
- Sex behaviors (including any condomless anal sex with casual partners; number of casual male condomless anal sex acts; and number of condomless anal sex partners during the past 3 months) were measured at 3, 6, and 12 months. The 12-month follow up was conducted 6 months after the second booster session.

Participant Retention

- Keep It Up! 2.0 Intervention
 - 82% retained at 3 months after the intervention
 - 78% retained at 6 months after the intervention
 - 84% retained at 12 months after the intervention (6 months after the last booster session)
 - 82% completed STI testing
- eHealth Control
 - 90% retained at 3 months after the intervention
 - 84% retained at 6 months after the intervention
 - 87% retained at 12 months after the intervention (6 months after the last booster session)
 - 83% completed STI testing

Significant Findings

- Intervention participants were significantly less likely (40%) to report any STI than control participants at 12 months (6 months after the last booster) (Risk Ratio (RR) = 0.60, 95% CI: 0.38-0.95, p = 0.01).
- Comparing time trends between groups, the relative reduction in STI for intervention participants versus control participants was 68% (RR = 0.32, 95% CI: 0.17-0.60, p = 0.0004).
- A significantly smaller percentage of intervention participants reported any condomless anal sex with a casual male partner in the past 3 months than control participants at 12 months (6 months after the last booster session) (Prevalence Ratio (PR) = 0.83, 95% CI:0.70-0.99, p = 0.04).

Considerations

- There were no significant intervention effects at 12 months (6 months after the last booster session) for self-reported incident HIV diagnoses, number of casual male condomless anal sex acts and number of condomless anal sex partners.

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REFERENCES AND CONTACT INFORMATION

Mustanski, B., Parsons, J. T., Sullivan, P. S., Madkins, K., Rosenberg, E., & Swann, G. (2018). [Biomedical and Behavioral Outcomes of Keep It Up!: An eHealth HIV Prevention Program RCT](#). *American Journal of Preventive Medicine*, 55(2), 151-158.

Website for more information: <http://isgmh.northwestern.edu/keepitup/>

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