

Lessons learned from Project IMPACT: What makes an acceptable intervention for HIV-uninfected men who have sex with men presenting for integrated treatment of crystal methamphetamine abuse and HIV risk reduction counseling.

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ABSTRACT

Background: Crystal methamphetamine (crystal) use among men who have sex with men (MSM), globally, has been robustly associated with increased HIV sexual risk taking. Improving intervention acceptability for HIV-uninfected MSM presenting for treatment may be helpful to more effectively intervene on co-occurring crystal use and HIV sexual risk behavior.

Methods: In 2009, exit interviews were conducted with 15 HIV-uninfected MSM with crystal dependence who completed a 10-session, open phase pilot trial of behavioral activation therapy and HIV risk reduction counseling. The intervention was geared toward reengaging men in life activities without using crystal, by treating stimulant-associated depression, in order to increase the uptake of sexual risk reduction counseling. Qualitative exit interviews assessed programmatic strengths, areas for improvement, and ways to enhance the intervention’s acceptability.

Results: Participants strongly endorsed the intervention model. Several themes emerged concerning intervention acceptability: (1) integration of intervention into daily life: weekly meeting times with therapists, reminder calls, tracking progress logs (syllabi), and daily homework were cited as important in helping to bring the intervention into the fold of daily life and providing a structure in which to accomplish behavioral change goals; (2) visual aids: activities with visual aids depicting costs and risks of substance use and sexual risk behaviors were reported to be especially effective; (3) monetary incentives: participants reflected that the effectiveness of any intervention hinged on the individuals’ dedication to getting clean, but that monetary incentives proved essential to their retention; (4) need for MSM cultural competence: culturally competent facilities and providers experienced at serving MSM and substance users were uniformly described as “very important.”

Conclusions: Crystal-dependent MSM seeking substance treatment respond favorably to interventions emphasizing: life structure, pleasurable activities without crystal, and visualization of the impact (potential and real) of high-risk sexual behavior and substance use, and offer that monetary incentives.