

2GETHER

Best-Evidence for the Risk Reduction Chapter



POPULATION

- Young male couples

KEY INTERVENTION EFFECTS

- Decreased condomless anal sex
- Decreased number of condomless anal sex partners
- Decreased sexually transmitted infections (STIs)

BRIEF DESCRIPTION

2GETHER teaches couples to use relationship skills to improve relational functioning and sexual health via a telehealth delivery model. The intervention includes the following:

- Three videoconferencing group sessions led by two trained facilitators aimed at building skills
 - Before each session, participants view self-paced video modules that address communication skills, coping with stress, relationship satisfaction, and HIV transmission
- Two videoconferencing individual couple coaching sessions on 1) implementing skills and 2) sexual health
 - Participants build and strengthen communication and problem-solving skillsets
 - Sexual health session focuses on sexual satisfaction, preferences for monogamy or non-monogamy, building a relationship agreement, and HIV prevention strategies
 - Participants without HIV or who do not know their HIV status receive HIV testing
 - Participants with HIV and participants on PrEP receive medication adherence counseling

DURATION: 5 sessions with 10 hours of total content

SETTING: Videoconferencing, video modules

STUDY YEARS: 2018 – 2020

STUDY DESIGN: Randomized controlled trial (RCT)

DELIVERERS: Trained facilitators

DELIVERY METHODS: Videoconferencing sessions, individual modules, group discussion, skills building, plan development, educational videos

STUDY SAMPLE

The baseline intervention sample of n = 200 male participants is characterized by the following:

- 58% White persons
 - 23% Hispanic, Latino, or Latina persons
 - 8% Black or African American persons
 - 6% Asian persons
 - 3% persons who identify as another race/ethnicity
 - 1% Native Hawaiian or Pacific Islander persons
 - 1% Native American or Alaskan Native persons
- Mean age = 28 years

STRUCTURAL COMPONENTS

There are no structural components reported for this study.

KEY INTERVENTION EFFECTS (see **Primary Study** for all outcomes)

- Intervention participants reported a smaller number of condomless anal sex partners while not on PrEP or ART adherent than control participants at 3-months, 6-months, and 12-months post-intervention (3-months beta = -1.23 standard deviation [SD] = .50; 6-months beta = -.95 SD = .49; 12-months beta = -1.68 SD = .72, all $p < 0.05$) and a greater decline over time in the number of condomless anal sex partners while not on PrEP or ART adherent compared to control participants (beta = -.46 SD = .23, $p < 0.05$).
- Intervention participants reported a smaller number of condomless anal sex acts while not on PrEP or ART adherent than control participants at 3-months, 6-months, 9-months, and 12-months post-intervention (3-months beta = -1.28 SD = .65; 6-months beta = -1.09 SD = .56; 9-months beta = -1.43 SD = .59; 12-months beta = -1.46 SD = .72, all $p < 0.05$) and a greater decline over time in the number of condomless anal sex acts while not on PrEP or ART adherent compared to control participants (beta = -.48 SE = .25, $p < 0.05$).
- Intervention participants were less likely to have a positive test result for rectal STIs than control participants at 12-months post-intervention (beta = -1.74 SD = .81, $p < 0.05$).

CONSIDERATIONS

- Intervention participants were more likely to report the presence of a relationship agreement at the 6- and 12-month follow-up. They were also more likely to report breaking the relationship agreement at the 6-month follow-up compared to control participants.
- Intervention participants reported fewer marijuana-related problems at the 3- and 6-month follow-up compared to control participants.
- Nearly all regions of the United States were reached with the telehealth approach which shows the potential to reach people who might not otherwise have access to affirming services.

ADVERSE EVENTS

- The author did not report adverse events.

FUNDING

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PRIMARY STUDY

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PLEASE CONTACT STUDY AUTHOR FOR TRAINING AND INTERVENTION MATERIALS.

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