

THE WORKSHOP

Best Evidence – Risk Reduction

INTERVENTION DESCRIPTION

Intended Population

- People who use drugs (PWUD) (i.e., heroin or cocaine) and experience depressive symptoms living in an urban area with high HIV prevalence and unrecognized HIV infection

Goals of Intervention

- Increase condom use
- Reduce injection risk behavior
- Reduce depressive symptoms

Brief Description

The Workshop is a group-level intervention (with one individual-level session) comprised of ten 90-minute workshops delivered over five weeks. It utilizes a Cognitive Behavioral Therapy (CBT) approach to help individuals identify negative thoughts and social and environmental stressors. The Workshop also aims to alter perspectives on thinking, social interactions, and environments to: (1) improve mood; (2) plan mood-boosting non-drug/alcohol-based activities; and (3) reduce sexual and drug-related behaviors that are associated with HIV infection.

Theoretical Basis

- Cognitive Behavioral Therapy

Intervention Duration

- Ten 90-minute sessions delivered over five weeks

Intervention Setting

- Research clinic in a mixed residential and commercial neighborhood

Deliverers

- Lay male/female co-facilitators with high school diplomas or GEDs with experience in delivering group HIV prevention interventions to PWUD

Delivery Methods

- Cognitive behavioral therapy
- Goal setting/plan
- Homework
- Practice
- Risk reduction plan
- Skills building
- Social support/acknowledgement (graduation ceremony)

Structural Components

There are no structural components reported for this study.

INTERVENTION PACKAGE INFORMATION

An intervention package is not available at this time. Please contact Karin Tobin, 2213 McElderry Street, 2nd Floor, Baltimore, Maryland 21205.

Email: ktobin2@jhu.edu for details on intervention materials.

EVALUATION STUDY AND RESULTS

The original evaluation study was conducted in Baltimore, Maryland between 2010 and 2012.

Key Intervention Effects

- Increased condom use with non-main partner

Study Sample

The baseline study sample of 315 PWUDs is characterized by the following:

- 85% Black or African-American persons
- 13% White persons
- 1% persons who identify as another race/ethnicity
- 57% male persons
- 43% female persons
- Mean age of 44 years
- 47% completed high school/GED, 41% completed 1-11 years education, 12% completed some college
- 38% persons who experienced homelessness in the past six months
- 49% diagnosed with depression
- 11% persons with HIV
- 47% reported injection drug use in past six months

Recruitment Settings

Street-based outreach, flyers, and advertisements in local papers and referrals from community agencies

Eligibility Criteria

Men and women between the ages of 18 and 55 were eligible if they (1) scored greater than or equal to 16 and less than 40 on the Center for Epidemiologic Studies–Depression scale (CES-D), (2) reported at least one drug related behavior that increases the chances of HIV transmission (defined as self-report injection drug use 3 or more times in the past week or crack use in the prior 6 months), and (3) at least one sexual behavior that increases the chances of HIV transmission, (defined as having two or more sex partners in the past 90 days, having a sex partner who injected drugs or smoked crack, or having a sex partner with HIV). Participants were excluded if they reported being enrolled in another HIV prevention or depression study in the past 3 years or if they reported acute psychiatric symptoms such as active psychosis or suicidal ideation.

Assignment Method

PWUD (N = 315) were randomized to 1 of 2 study arms: The Workshop intervention group (n = 162) or a comparison group (n = 153). A computerized program was used to assign individuals, in the order that they arrived using a two-block design, stratified by sex to ensure equivalent numbers in the two arms.

Comparison Group

- The control condition consisted of a single, one-hour, group session in which a trained female facilitator presented various mental health resources available in the community. Participants received \$25 for completing the group session.

Relevant Outcomes Measured and Follow-up Time

- Condom use (including condom use during vaginal and anal sex with main and non-main partners during the past ninety days) was measured at the 6- and 12-month post-intervention follow-ups.
- Drug behaviors (including illicit drug use and injection drug use during the past 6 months) were measured at the 6- and 12-month post-intervention follow-ups.
- A binary measure of injection risk was created by combining three injection drug use behaviors: needle sharing, injection equipment sharing, and drug splitting.

Participant Retention

- The Workshop
 - 90% retained at 6 months
 - 85% retained at 12 months
- Comparison
 - 90% retained at 6 months
 - 85% retained at 12 months

Significant Findings

- Intervention participants had higher odds of 100% condom use with non-main partners than control participants at 6 months post-intervention (Odds Ratio [OR] = 1.99, 95% Confidence Interval [CI]:1.03-3.83, $p < 0.05$).*

*Adjusted for having seen a mental health provider at baseline

Considerations

Additional significant positive findings on non-relevant outcomes

- Intervention participants reported a significantly greater reduction in CES-D score than control participants at 12 months post-intervention (Mean change: -2.83, 95% CI: -5.28 - -0.38, $p < 0.05$).*

*Adjusted for having seen a mental health provider at baseline

Non-significant findings on relevant outcomes

- There were no significant intervention effects at 6 or 12-month follow-ups on injection drug risk.
- The intervention effect on condom use with main partners was not significant at the 6 or 12-month assessment.
- The intervention effect on condom use with non-main partners was not significant at the 12-month assessment.

Negative findings

- None reported

Other related findings

- None reported

Implementation research-related findings

- None reported

Process/study execution findings

- Following each session, facilitators completed session summary forms that were reviewed by the lead author.
- To monitor fidelity, a random selection of 10% of the audio-recorded sessions were reviewed by the lead author and evaluated based on adherence to curriculum scripting and activities.

Adverse effects

- None reported

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REFERENCES AND CONTACT INFORMATION

Tobin, K., Davey-Rothwell, M. A., Nonyane, B. A., Knowlton, A., Wissow, L., & Latkin, C. A. (2017). [RCT of an integrated CBT-HIV intervention on depressive symptoms and HIV risk](#). *PLoS ONE*, *12*, e0187180. doi: 10.1371/journal.pone.0187180

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