POWER
Best Evidence – Risk Reduction

INTERVENTION DESCRIPTION

Target Population
• Black men who have sex with men and women (MSMW)

Goals of Intervention
• Increase HIV risk knowledge
• Increase safe sex practices

Brief Description
POWER is an individual-level intervention delivered in real time by a virtual facilitator online. The intervention focuses on providing culturally relevant information on HIV risk and protection, and increasing motivation and behavioral skills to promote adoption of safe practices. Publically available video clips (e.g. YouTube) are used to introduce new concepts, promote interactions and dispel myths. Skills-building exercises help participants learn and practice problem solving, communication, and sexual negotiation skills. Facilitators help participants set goals and develop strategies for improving sexual health. Participants also receive feedback from facilitators on sexual health plans and reinforcement for positive behavior.

Theoretical Basis
• Information, Motivation and Behavioral Skills model

Intervention Duration
• Three 60-90 minute sessions delivered 3 weeks

Intervention Setting
• Home
• Safe space to use a private laptop
• Study office

Deliverer
• Online facilitator

Delivery Methods
• Goal setting
• Role playing
• Skills building exercises
• Video clips
INTERVENTION PACKAGE INFORMATION

An intervention package is not available at this time. Please contact M. Isabel Fernandez, Behavioral Health Promotion Program, College of Osteopathic Medicine, Nova Southeastern University, 2000 S. Dixie Highway, Suite 108, Miami, Florida 33133.

Email: mariafer@nova.edu for details on intervention materials.

EVALUATION STUDY AND RESULTS

The original evaluation was conducted in the Chicago metropolitan area between 2008 and 2013.

Key Intervention Effects
- Reduced condomless anal/vaginal sex

Study Sample
The analytic study sample of 211 men is characterized by the following:
- 93% black or African American, 2% black Latino, 5% other
- 84% bisexual, 7% gay, 6% unsure, questioning or other, 3% heterosexual
- 77% unemployed or economically disadvantaged
- Mean age of 44.7 years

Recruitment Settings
Chain referral, community based agencies, project website

Eligibility Criteria
Men living in the greater Chicago metropolitan area were eligible if they identified as a black male, were at least 18 years of age, had both a male and female sex partner in the past 12 months, had two or more sex partners and had condomless sex with either a man or woman in the past 3 months, had not injected drugs in the past 12 months, and did not identify as transgender.

Assignment Method
MSMW (N = 211) were randomized to 1 of 2 study arms: POWER Intervention (n = 108) or HEALTH comparison (n = 103).

Comparison Group
The health education comparison (HEALTH) consisted of one 3 to 4 hour session focused on health issues disproportionately impacting black men. Participants learned strategies to improve their physical and sexual health including preventing sexually transmitted infections (STI), proper use of condoms, and where to access STI/HIV testing. Participants also identified barriers to achieving better physical and sexual health, and discussed ways to live a healthier life.
Relevant Outcomes Measured and Follow-up Time

- Sex behaviors (including number of main, non-main, and female partners; instances of condomless vaginal and anal sex during the past 3 months) were measured at the 3-month follow up.

Participant Retention

- POWER Intervention
  - 78% retained at 3 months

- HEALTH Comparison
  - 80% retained at 3 months

Significant Findings

- Intervention participants were significantly less likely to report any condomless vaginal or anal intercourse than comparison participants at 3 months post-intervention (aOR = 0.49; 95% CI 0.25-0.98; p = 0.044)
- Intervention participants were significantly less likely to report condomless anal intercourse with male partners than comparison participants at 3 months post-intervention (aOR = 0.55; 95% CI 0.34-0.91; p = 0.020).
- Intervention participants were significantly less likely to report any condomless vaginal or anal intercourse with a serodiscordant partner than comparison participants at 3 months post-intervention (aOR = 0.59; 95% CI 0.36-0.96; p = 0.035)
- Intervention participants were significantly less likely to report any serodiscordant anal intercourse with male partners than comparison participants at 3 months post-intervention (aOR = 0.47; 95% CI 0.26-0.85; p = 0.012)

Considerations

- There were no significant intervention effects at 3 months on several relevant sex behavior outcomes (including condomless vaginal or anal sex with female partners; sex with serodiscordant female partners; mean number of sex partners; insertive or receptive condomless anal sex with male partners by transmission risk [for HIV-positive men, defined as any insertive condomless anal sex; for HIV-negative men, defined as any receptive condomless anal sex])
- There are no substantial missing data (<10%), no significant difference between study arms in attrition, and no significant associations between variables of interest and attrition.

Funding Sources

Centers for Disease Control and Prevention (grant number 5UR6PS001095)
REFERENCES AND CONTACT INFORMATION


Researcher: M. Isabel Fernandez, PhD
Behavioral Health Promotion Program
College of Osteopathic Medicine
Nova Southeastern University
2000 S. Dixie Highway, Suite 108
Miami, FL 33133
Email: mariafer@nova.edu