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Program acceptability of a text-messaged based HIV prevention program for gay, bisexual, and queer adolescent males

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* Thank you for your interest in this presentation. Please note that analyses included herein are preliminary. More recent, finalized analyses may be available by contacting CIPHR.



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Introduction: Sexual minority teen men bear a disproportionate HIV burden

- Adolescent gay, bisexual, and queer men (AGBM) bear a disproportionate HIV incidence burden, accounting for 72% of new HIV infections among young people
- Gay, bisexual and other sexual minority young men are more likely than other adolescents to have not used a condom at last intercourse.
- Few validated prevention programs are available for sexual minority youth and none exist for teens 16 years of age and younger.

(Centers for Disease Control and Prevention, 2014; Mustanski, 2011; Centers for Disease Control and Prevention, 2013; Everett, 2014)

Introduction: Text messaging is a promising intervention delivery method

- Adolescent teens send and receive an average of 30 text messages per day, and it is the primary mode of communication between peers, and is preferred over other communication modes.
- Cell phone ownership is high across racial and ethnic groups and income levels.
- Recent reviews suggest optimism for mHealth interventions.

(Lenhart, Ling, Campbell, Purcell, 2010; Head, Noar, Iannarino, Harrington, 2013; Catalani, Philbrick, Fraser, Mechai, Israelski, 2013)
Image from: <http://www.magicsoftware.com/media/2012-year-text-messaging-died>



Guy2Guy Eligibility criteria

- 14-18 years of age
- Cisgender (male sex assigned at birth and male gender identity)
- Self-identify as: gay, bisexual, and/or queer
- Owns cell phone
- Enrolled in unlimited text messaging plan
- Has texted for at least 6 months
- Plans to have cell phone number for at least 6 months



Image from <http://newsfeed.time.com/2011/05/08/sex-affiliate-is-glee-gay-teen-propaganda/>

Guy2Guy: Program description

- Text-messaging-based healthy sexuality and HIV-prevention program specifically for gay, bisexual, and queer teen guys
- Six-module program based upon the Information-Motivation-Behavior Model of HIV Preventive Behavior
- Randomized controlled trial (n=302)
- We balanced the sample on sexual identity and sexual experience.
- Recruitment targets included: age (i.e., 40% were 14-15 years of age), race, ethnicity, and urbanicity
- Intervention content tailored on sexual experience. Features included a Text Buddy and G2Genie
- Control group was blinded and attention matched

Example intervention group messages

- 1 A guy asked me: "I've been with my partner for a while. We're committed and don't want to use condoms anymore. I know we're supposed to use 'em. What do we do?"
By far, the healthiest thing to do is to keep using condoms. Many couples agree to keep using condoms for the first few years of their relationship.
- 2 If you want to know the steps to healthfully deciding when to stop using condoms in a relationship, text "g2genie safe decisions". (hint: testing is key)
- 3 We have sex for lots of reasons: It feels good. It can be a very personal way of showing your partner you care about them. And, sometimes it's a way to fit in.
- 4 Sometimes guys have sex for emotional relief, curiosity; *hormones* (especially when we're teens); and sometimes, for the fun or thrill of it.
It can feel like adults are constantly telling you not to have sex. I've heard of guys having sex to rebel against what they are being told not to do.
- 5 Guys have also told me that they sometimes have sex because they're lonely. They think that if they make someone else feel good, they might not feel as alone.
- 6 Sometimes guys tell me that they have sex because they feel the need to hurry things or to make their partner happy. Sometimes, too, guys are forced into sex.
- 7 Sex can complicate things. There can be miscommunication during sex, and sometimes you feel awkward around each other afterwards.
- 8 Some guys say that it wasn't as good as they thought it'd be. And once you have sex, you might worry about HIV / other STDs that you didn't worry about before.
- 9 All in all, there are good and bad things when it comes to having sex as a teen. Text your buddy about how you can increase the good and reduce the bad things.

Example control group messages

- 1 Today is going to be a good day! Be proud of your body. No matter how tall you are or how much you weigh: It's your body. Love it!
- 2 Be real about things you can change. Accept yourself for who you are – for both your strengths and weaknesses (and trust me: we all have weaknesses).
- 3 For things you don't like about yourself, think about how they make you *you* and unique. Maybe you are shy. This probably also helps you be a better listener!
- 4 Now you try it: think about one thing you don't like, and then think about some advantage that it might actually give you.
- 5 Think of reasons why you love yourself. What qualities do you have that other people enjoy about you? I know you can come up with at least 3 things!
- 6 Maybe you're a good listener? Funny? Kind-hearted? Perhaps you have a unique talent? A nice smile? Kind eyes?

Screening and enrollment

Recruitment spanned 4.5 months: June – October, 2014:
 1,522 screeners were received →
 1,111 screeners appeared eligible (73%) →
 600 youth were contacted (54%) →
 494 youth responded (82%) →
 345 youth spoke with study staff on the phone (70%) →
 323 (94%) were eligible or the bin had not yet been filled →
 302 (93%) completed the survey and were randomized

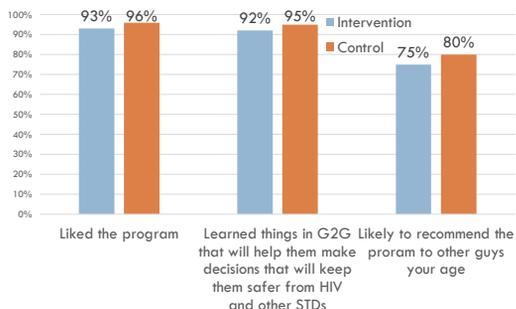


Picture from: <http://www.hercampus.com/love/everything-you-need-know-about-condoms-were-scared-ask>

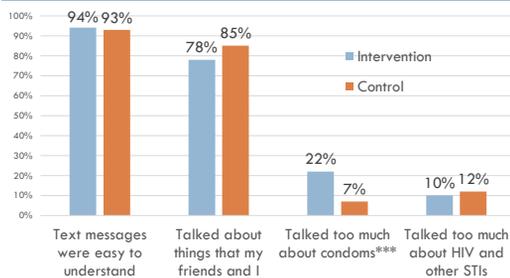
Participant demographics (n=302)

Personal characteristics	Control (n=152)	Intervention (n=150)	P-value
Demographic characteristics			
Age (Range: 14-16)	16.3 (1.4)	16.0 (1.3)	.07
Non-white race	34.2% (52)	30.7% (46)	.51
Hispanic ethnicity	23.7% (36)	20.7% (31)	.53
Sexual identity			
Gay	69.1% (105)	76.0% (114)	.18
Bisexual	39.5% (60)	36.7% (55)	.62
Queer	7.9% (12)	8.7% (13)	.81
Sexual experience			
Vaginal sex	14.5% (22)	11.3% (17)	.42
Receptive anal sex	36.8% (56)	38.0% (57)	.84
Insertive anal sex	36.2% (18)	31.3% (47)	.37

Program acceptability

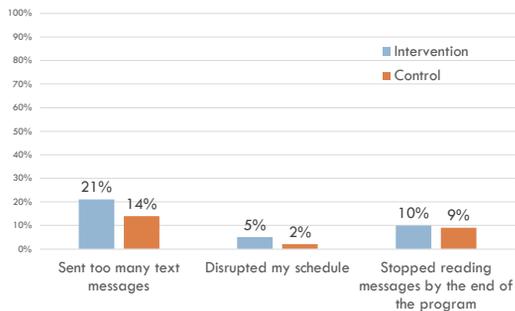


Program content



*** p<.001

Messaging protocol



Intervention group components

Intervention program components were also well-received:

- 70% of intervention participants agreed or strongly agreed that they liked G2Genie and
- 60% agreed or strongly agreed they liked having a Text Buddy.



Image from: <http://news.health.com/2015/08/26/only-1-in-5-gay-teen-boys-get-hiv-test/>

Conclusions

1. Program acceptability data suggests that an HIV prevention program delivered via text messaging, a mode widely endorsed by youth, is engaging and can give youth the confidence to engage in HIV preventive behaviors.
2. The attention-matched control group, which appears to have been successfully blinded, also appears to be well received.
3. Future programs may consider combining healthy sexuality with other important youth health topics, including self-esteem and bullying.

Thank you!

For more information, please contact:

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Image from: <http://www.nyoyouth.org/finding-yourself-as-a-gay-teen-comes-first>