

Readiness To Change HIV/HCV Risk Behavior Among Young African American IDUs .

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Objective:

To examine the differential effects of self-efficacy and self-esteem on stimulating readiness to change HIV/HCV sexual and drug use risk behaviors in a cohort of young African American IDUs participating in a longitudinal study comparing the relative efficacy of three HIV/HCV risk reduction interventions.

Methods:

part of a National Institute on Drug Abuse (NIDA) - funded harm reduction intervention study, 228 young incarcerated African American IDUs were tested for HBV and HCV (Abbott Laboratories) and interviewed using an audio computer-assisted interview schedule (ACASI) designed with the Questionnaire Development System (QDS) software. Data collected included participant demographics, high risk injection practices including sharing syringes, cookers, cotton, rinse water, and backloading, high risk sexual behavior practices, as well as measures of readiness to change, self efficacy and self-esteem.

Methods:

Baseline participants were randomized into one of three intervention arms:

1- Basic counseling and testing arm with pre and post test counseling using a standard CDC protocol

2- Pharmacy Syringe Purchase— Participants were taught how to purchase syringes at pharmacies (permitted by Louisiana law) without calling attention to themselves and threatening pharmacy personnel

3- Brief client centered behavioral intervention using Motivational Interviewing techniques

Methods:

Three Measures of Readiness to Change

Intention not to Share Syringes

Intention to Purchase Syringes at a Pharmacy

Intention to use Condoms

Each was measured at baseline and 6 month follow-up using a 5 point scale ranging from 1=never to 5=always

Methods:

Infection Risk Scale-- measured at baseline and 6 month follow-up. The scale is a summary measure of the autonomous responses (0=no, 1=yes) to 5 self reported infection risk behaviors (range 0-5; Chronbach's alpha=.86)

Preparing Syringes

Preparing Cookers

Preparing Rinse Water

Preparing Cotton

Backloading

Methods: Self Esteem and Self Efficacy measured at baseline and 6 month follow-up

Self-Esteem– (Rosenberg, 1965)– 10 item scale where participants are asked to respond to questions about themselves on a 4 point scale ranging from (0) strongly disagree to (3) strongly agree Chronbach's alpha = .82; range 0-10. Example: "I feel that I have a number of good qualities"

Self Efficacy– HIV/HCV– 2 item scale- self report of self efficacy related to prevention of HIV/HCV infection; range from 0= low self efficacy to 6= high self efficacy; Chronbach's alpha=.74. Example: "How much can you do to keep from getting HIV/AIDS?" and "How much can you do to keep from getting Hepatitis C?"

Results:

Of the 228 participants interviewed at baseline, 7 were deceased at 6 month follow-up, 28 were re-incarcerated and 10 were lost to follow-up. With the exception of gender there were no differences in the demographics of participants completing only baseline data and those completing both baseline and 6 month follow-up (Table 1). Similarly there were no differences in baseline and 6 month participant characteristics across intervention arms (Table 2).

Table 1 Comparison of Participants who completed 6 month follow-up and those who completed only baseline interviews

<u>Characteristic</u>	<u>Baseline</u>	<u>6 month</u>	<u>statistic</u>
	(N=69)	(N=159)	
Mean Age	25.09	24.74	t=.774
Mean # incarcerations	9.22	9.20	t=.007
Mean age 1 st injection	20.46	20.48	t=.045
Mean times in drug Tx	1.81	1.42	t=1.41
Mean mo. Income	\$1249.00	\$1138.48	t=.618
Male	64(92.8%)	159(100%)	$\chi^2=11.78$
Single never married	48(69.6%)	126(79.2%)	$\chi^2=4.71$
High School	41(59%)	110(69%)	$\chi^2=4.89$
Homeless	12(17.4%)	36(22.6%)	$\chi^2=.798$
CV+	46(67.6%)	109(69.4%)	$\chi^2=.070$
BV+	1(1.5%)	9(5.7%)	$\chi^2=++$

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Chi square not computed due to cell count less than 5

Table 1 (cont.) Comparison of Participants who completed 6 month follow-up and those who completed only baseline interviews

Characteristic	Only Baseline (N=69)	6 month (N=159)	Statistic
Intervention Arm			
Control	24(34.8%)	65(40.9%)	$\chi^2=.07$
PSP	31(44.9%)	62(39.0%)	$\chi^2=.07$
CCBI	14(20.3%)	32(20.1%)	$\chi^2=.07$

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Chi square not computed due to cell count less than 5

Table 2 Descriptive characteristics by intervention arm at follow-up

Characteristic	CT	PCP	CCBI	statistic
	(N=65)	(N=62)	(N=32)	
Mean Age	24.35	25.18	24.69	f=1.14
Mean # incarcerations	8.07	11.38	7.00	f=1.26
Mean age 1 st injection	19.91	21.20	20.26	f=1.91
Mean times in drug Tx	1.40	1.57	1.16	f=1.41
Mean mo. Income	\$952.21	\$1133.03	\$1522.31	f=2.58
Male	65(92.8%)	62(100%)	32(100%)	χ^2 =na
Single never married	46(70.8%)	51(82.3%)	29(90.6%)	χ^2 =5.70
High School	44(67.7%)	44(71.0%)	22(68.8%)	χ^2 =.163
Homeless	17(26.2%)	11(17.7%)	8 (25%)	χ^2 =1.41
CV+	47(74.6%)	42(67.7%)	20 (62.5%)	χ^2 =1.60
3V+	4(6.3%)	4(6.5%)	1 (3.1%)	χ^2 =++

Chi square not computed due to cell count less than 5

Table 3 High Risk Injection Practices at baseline and 6 month follow-up by intervention arm

Characteristic	CT	PCP	CCBI	statistic
Shared Syringes				
baseline	28(43.0%)	29(47.0%)	15(47.0%)	$\chi^2=4.64$
6mo follow up	11(17.0%)	9(15.0%)	9(28.0%)	$\chi^2=2.91$
Shared Cookers				
baseline	29(44.6%)	34(54.8%)	15(46.9%)	$\chi^2=1.40$
6mo follow up	16(25.0%)	21(34.0%)	6(19.0%)	$\chi^2=3.76$
Shared Rinse Water				
baseline	27(41.5%)	28(45.2%)	16(50.0%)	$\chi^2=.632$
6mo follow up	12(18.0%)	16(26.0%)	6(19.0%)	$\chi^2=.539$
Shared Cotton				
baseline	26(40.0%)	28(45.2%)	13(40.6%)	$\chi^2=.384$
6mo follow up	14(22.0%)	15(24.0%)	6(19.0%)	$\chi^2=.539$
Unloaded				
baseline	18(27.7%)	23(37.1%)	9(28.1%)	$\chi^2=1.51$
6mo follow up	7(11.0%)	10(16.0%)	8(25.0%)	$\chi^2=3.21$
Mean Injection Risk Score				
baseline	1.97	2.29	2.13	$f=.424$
6 month follow-up	.923	1.15	1.09	$f=.311$

High Risk Injection Practices

As Table 3 demonstrates, all participants significantly reduced their high risk injecting practices

Changes in high risk injecting practices were equivocal across intervention arms

Table 4 Readiness to change risk behavior at baseline and 6 month follow-up by intervention arm

Characteristic	CT (N=65)	PCP (N=62)	CCBI (N=32)	Statistic
Want to not share needles in future				
baseline	62(95.4%)	62(100%)	32(100%)	$\chi^2=.1.50$
6mo follow up	61(93.8%)	61(98.4%)	31(96.9%)	$\chi^2=.972$
Want to use pharmacies to purchase syringes				
baseline	8(12.3%)	17(27.4%)	5(15.6%)	$\chi^2=15.74$
6mo follow up	24(36.9%)	25(40.3%)	12(37.5%)	$\chi^2=1.41$
Want to use condoms in the future				
baseline	47(72.3%)	46(74.2%)	25(78.1%)	$\chi^2=6.17$
6 month follow-up	42(64.6%)	39(62.9%)	20(62.5%)	$\chi^2=.725$

Table 4 Self Esteem, and HIV/HCV Self Efficacy by Intervention Arm assignment

Characteristic	CT	PCP	CCBI	Statistic
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Mean Self Esteem Score

baseline	19.02	18.34	18.91	f=.220
6mo follow up	17.05	17.79	19.00	f=.876

Mean HIV/HCV Self Efficacy Score

baseline	5.00	5.40	4.75	f=1.807
6mo follow up	4.48	5.03	5.06	f=1.564

Correlations Among Self-Esteem, HIV/HCV Self-Efficacy, HIV/HCV Self-Efficacy, HIV/HCV Risk Behavior and Readiness to Change Risk Behavior

Self-esteem and HIV/HCV self-efficacy are significantly positively correlated at both baseline and six-month follow-up ($r=.23$ $p\leq.01$; $r=.43$ $p\leq.01$)

Self-esteem is significantly inversely correlated to injection risk behavior scores at 6-month follow-up ($r=.24$ $p\leq.01$)

Self-esteem is significantly positively correlated with intention to not share syringes ($r=.20$ $p\leq.05$), intention to use pharmacies to purchase syringes ($r=.21$ $p\leq.01$) but not to intention to use condoms ($r=.15$ $p=ns$)

Conclusions:

The findings from this study support our clinical experiences with IDUs seeking substance abuse treatment and strongly suggest that increasing self-esteem and self efficacy can both promote recovery and reduce HIV/HCV related high risk behaviors. Therefore, employing HIV/HCV interventions that increase self-esteem and self-efficacy are likely to result in significant reduction of HIV and HCV high risk injecting practices and should be incorporated into risk reduction programs targeting young injecting populations.