Impact of a Cognitive Behavioral Intervention on Changes over Time in Depression, Alcohol Problems, and Sexual Risk Behaviors among HIV-Positive Haitians


Objective: This study tested the effectiveness of a cognitive-behavioral intervention for reducing transmission risk behaviors among HIV+ alcohol users in Haiti.

Background: Within the Caribbean, Haiti has the highest number of adults living with HIV. Systemic institutional factors, coupled with sociocultural and behavioral sexual norms require interventions that address the psychosocial factors associated with risky behaviors.

Methods: A cognitive-behavioral intervention designed to reduce sexual transmission risk behaviors was implemented among a sample of 145 HIV-positive Haitians; 126 controls were on a waiting-list for the CB intervention (total N = 271). Data were collected at baseline, post-intervention, and 3- and 6-month follow-up. A latent growth curve analysis was used to assess whether the rate of change from baseline in negative behaviors was associated with intervention status. The hypothesis was that reductions in negative coping styles (e.g., giving up, avoidance), alcohol problems, and depression, would have an impact on reduced number of sex partners and unprotected sex acts.

Results: Participation in the intervention predicted less negative coping over time than reported by the control group. Further, participation in the CB intervention had a significant indirect effect on less depressive affect and fewer alcohol problems (p < .01) than the control group. These effects were mediated through the negative coping style declining slope (decreasing over time). The declining alcohol problems slope predicted a decline in unprotected sex and fewer partners. Both the intervention and negative coping style slope indirectly predicted less unprotected sex and fewer sex partners over time (p < .05, p < .01 respectively) mediated through declining alcohol problems.

Conclusions: These findings demonstrate the effectiveness of a cognitive-behavioral intervention in reducing negative coping, which in turn reduced depressive symptoms and problems with alcohol over time. In turn, fewer problems with alcohol predicted fewer sexual partners and less unprotected sex, thus indicating less transmission risk behaviors. The findings of this study highlight the role that efficacious psychological interventions can play in reducing HIV risk in vulnerable populations. Many factors related to psychological health influence engagement in risky behaviors and increase the vulnerability of persons with HIV.

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Brief Summary:

A cognitive-behavioral intervention was found to be effective in decreasing transmission risk behavior among HIV+ alcohol users in Haiti. Such scalable interventions addressing mental health and psychosocial factors are critical to decreasing alcohol problems and other factors driving the HIV epidemic.