

Reduced Alcohol Use and Improved Wellness in Persons Living With HIV: The WELL Program



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Background

- HIV infection continues to disproportionately impact vulnerable populations including racial/ethnic minorities who are at greatest risk of comorbidities.
- People living with HIV (PLWH) have a 2-3 fold higher prevalence of alcohol use disorders (AUD), and approximately 8-12% are classified as heavy drinkers.
- Alcohol misuse can impact HIV disease through decreased adherence to antiretroviral therapy (ART) and increased risk for comorbid conditions.

Objectives

 Evaluate the impact of the evidence-based WELL (Wellness through Empowerment, Learning, and Living) Intervention Program on risky alcohol consumption and overall health and well-being in a population of PLWH under care.

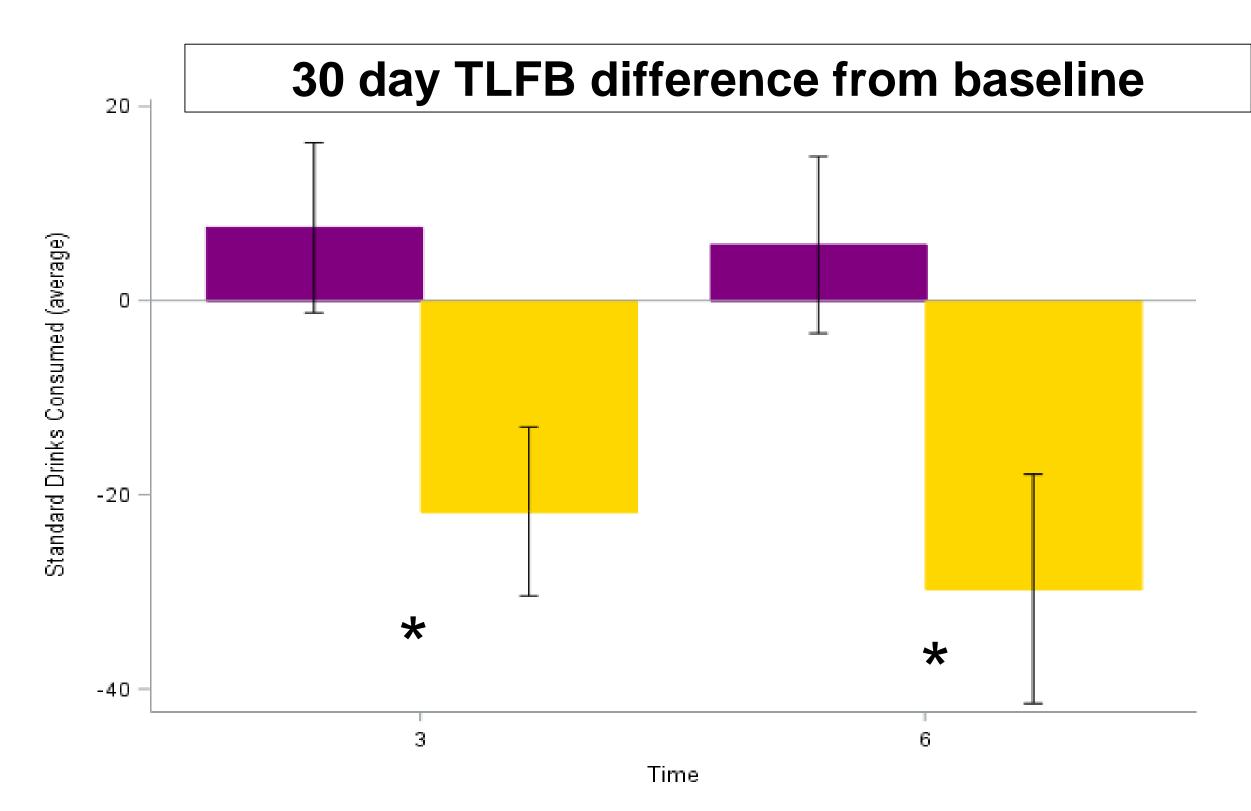
Methods

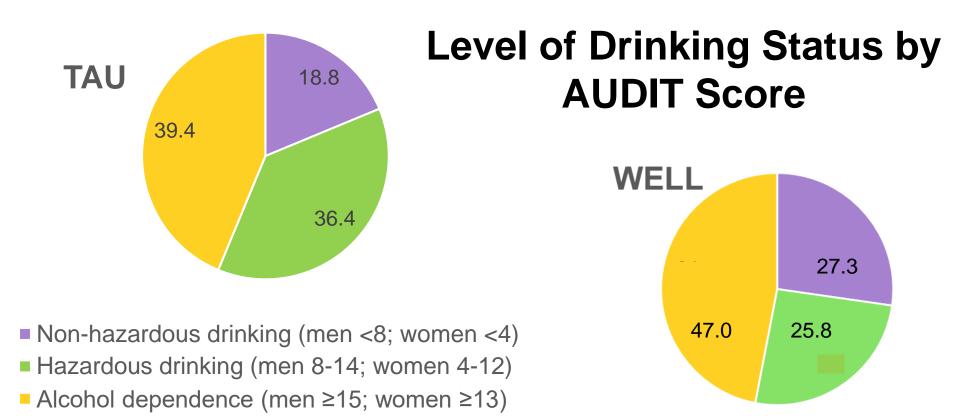
- A total of 202 patients from the University Medical Center-New Orleans HIV Outpatient (HOP) Clinic were randomized to treatment as usual (TAU), n=102, or the Intervention (WELL), n=100.
 - *Inclusion criteria:* Ages 18 and older, HIV positive, AUDIT-C score greater than 4-men/3-women, and that the person has had more than 6 drinks on one occasion.
 - Exclusion criteria: a pending legal case.
- Data was collected on alcohol use, drug use, condom use, and treatment participation
- Data was collected at baseline, weekly during the intervention sessions, and at 3, 6, and 12 month follow-up visits.
- A repeated measures analysis with unstructured co-variance was used to analyze the effects of the intervention on behaviors and clinical outcomes.
- All analyses completed using SAS version 9.4.

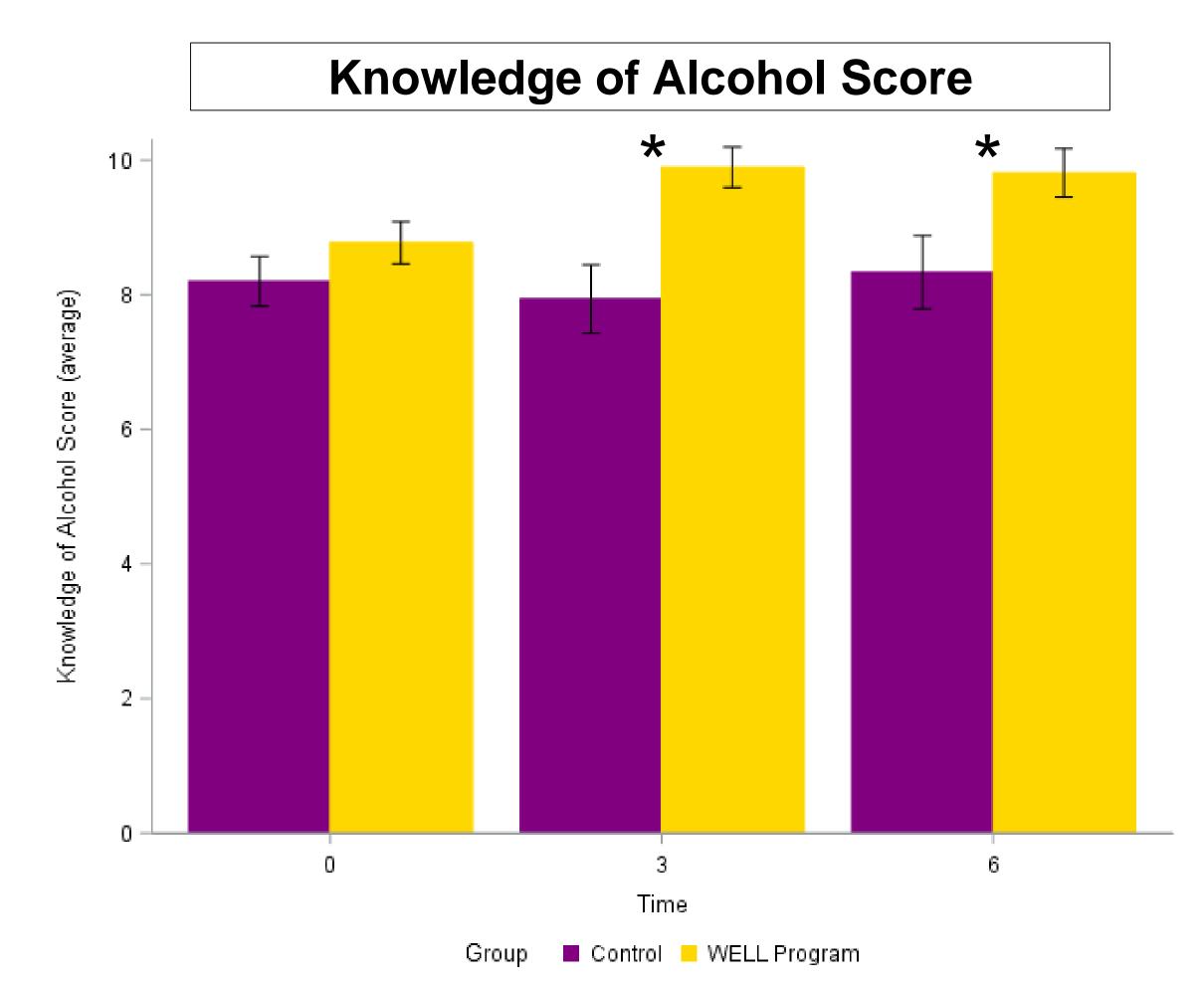
Results

Overview of WELL Intervention Sessions		
Session topics	Objectives	
1) Healthcare Participation	 Learn to be an active healthcare participant Learn consequences of ART non-adherence and strategies for overcoming barriers to adherence 	
2) Reducing the Harm of Alcohol and Drug Use	 Learn standard drink amounts and identify problematic alcohol use Understand the harms of alcohol and drug use Learn alcohol harm reduction techniques 	
3) Harm Reduction Using Latex	 Identify the harm of unsafe sexual practices Learn harm reduction techniques using latex 	
4) Negotiating Harm Reduction with Partners5) Healthy Lifestyle	 Learn condom negotiation and communication skills using didactic, visual, and role-play demonstrations Learn coping skills and stress management Improve knowledge regarding nutritional 	
Choices	guidelines and food hygiene	

Participant Character	Participant Characteristics (N=202)		
	TAU	WELL	
	% (n=102)	% (n=100)	
Gender			
Male	71.6	71.0	
Female	25.5	29.0	
Transgender	2.9	0	
Race			
Black	79.4	77.0	
White	17.7	19.0	
Other	2.9	4.0	
Age, mean ± SD	47.4 ± 9.9	48.8 ± 9.4	
Education			
<12	35.3	37.0	
12th Grade	44.1	45.0	
13+ Grade	20.6	17.0	
Employment			
Full-time	12.3	5	
Part-time	15.4	3.0	
Retired	1.5	4.0	
On or Applying for disability benefits	50.0	67.0	
Unemployed	20.6	21.0	







Low Medication Adherence

- WELL participants, on average, showed a decrease in the number of standard drinks consumed in the follow-up time period (p=0.02).
- WELL participants report an increase in knowledge regarding the impact of alcohol use on HIV from baseline. They also score significantly higher than the TAU participants at 3 months (p=0.001) and 6 months (p=0.02).
- Proportion of low ART adherence decreased among the WELL-participants.
- WELL participants lowered their reported sexual risk taking behaviors at follow-up compared to baseline.

Conclusions

Discussion

These findings suggest that the WELL program is effective in improving healthy behavior and adaptive coping strategies that can lead to reduced alcohol use and improved health outcomes.



 The development of additional strategies to sustain these positive behavioral changes over time are a necessity.

Acknowledgements

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