

## Appendix A. Overview of the Mpowerment Project

These program materials describe:

- The need for an HIV prevention program for young gay/bisexual men
- Why young gay/bisexual men engage in high-risk sex
- The type of prevention program needed in this community

These materials also include details on the Mpowerment Project:

- Guiding principles
- Operating structure
- Program components, their core elements and key characteristics
- Step-by-step process for starting an Mpowerment Project in your community

**Please note:** The materials on the following pages have been reproduced from the Mpowerment Project Replication Package. References to pages, figures, modules, or appendices refer to the Replication Package modules, rather than this document.



# Overview

## of the Mpowerment Project

Young gay/bisexual men – those between the ages of 18 and 29 – continue to engage in high rates of unprotected anal intercourse and are becoming infected with HIV at alarming rates. HIV Prevention Planning Councils across the country consistently identify young gay and bisexual men as one of the highest priority groups for HIV prevention efforts.

The Mpowerment Project is a model HIV prevention program that has been designed specifically to address the needs of young gay/bisexual men. Scientific studies demonstrate that the program reduces the rates of unprotected anal intercourse among this group. The scientific articles demonstrating the effectiveness of the Mpowerment Project can be found at the end of this manual.

### Objectives

- To describe: ① how and why the Mpowerment Project was developed; ② its theoretical basis; ③ its Core Elements and key characteristics; ④ the scientific evidence of its effectiveness and its cost-effectiveness; and ⑤ the steps to starting the Project in your community.



## Need for HIV Prevention Program for Young Gay/Bisexual Men

### Young Gay and Bisexual Men Have Unprotected Sex

In 1990, we conducted one of the first surveys about the sexual risk-taking behavior of young gay/bisexual men. We found that 43% of the young men (ages 18-29) from three medium-sized West Coast communities reported unprotected anal sex during the past 6 months (*Hays, Kegeles, & Coates, 1990*). Many other studies have found that younger gay/bisexual men report having more unprotected anal sex than their older peers (*Mansergh & Marks, 1998*). These studies have taken place in many different cities and with a variety of different groups including: gay bar patrons (*Kelly et al., 1995*), bathhouse goers (*Richwald, Morisky, Kyle, & Kristal, 1988*), men in couples (*Hoff et al., 1997*), and gay organization members (*Buchanan, Poppen, & Reisen, 1996*)—just to name a few.

A scientific survey of thousands of young MSM (ages 15-22) in 7 communities (*Baltimore, Dallas, Los Angeles, Miami, New York, Seattle, and the San Francisco Bay Area*) found that 41% reported unprotected anal sex during the past 6 months (*Valleroy et al., 2000*).

Additionally, rates of unprotected sex have increased. In a study following 510 young gay men over time (ages 18-29 at recruitment) 37% of young MSM in 1993/4 reported unprotected anal sex during the past 30 days, but by 1996/7, that figure had grown to 50% (*Ekstrand, Stall, Paul, Osmond, & Coates, 1999*). Almost half of the men who reported unprotected anal sex in 1996/7 said that it occurred with a partner of unknown or different HIV status.

### Young Gay/Bisexual Men Are Getting HIV

The seven city survey of young MSM described above found that over 7% of the men ages 15-22 were already HIV-positive, and over 14% of the young African American MSM were HIV-positive. Additionally, over 10% of the young men tested positive for hepatitis-B.

Another large (over 2900 young men) survey of men aged 23-29 in all of these same cities (*except San Francisco*) found that 13% of all the men were HIV-positive, and 32% of the African American MSM were infected with HIV (*McFarland et al., 2001*). This study also concluded that 4.4% of the men were becoming newly infected each year.

Additionally, four other North American studies found a greater risk of getting infected with HIV among groups of younger MSM (*Mansergh & Marks, 1998*).

A 1992-93 study of randomly-selected gay/bisexual men aged 18-29 in San Francisco found that an alarming 17.9% of the men were already infected with HIV, with an estimated 2.6% more becoming newly infected each year (*Osmond et al., 1994*). Among 27- to 29-year-olds, 29% were already HIV-positive.

Other researchers have found equally disturbing results. In a 1995 study of 87 young gay/bisexual men aged 18-24 in New York City, 9% were found to be HIV-positive (*Dean & Meyer, 1995*).

Younger gay/bisexual men have consistently been at higher risk for HIV infection since the epidemic began. This is true despite the fact that most of today's young

Rates of unprotected sex among young MSM are increasing.



gay/bisexual men initiated their sex lives when information about AIDS and guidelines for preventing HIV infection were widely known. Clearly, these findings indicate that it is extremely important to reach young gay/bisexual men with effective HIV prevention programs.



### **A variety of factors contribute to the high sexual risk-taking of young gay/bisexual men**

## **Why do Young Gay/Bisexual Men Engage in High-Risk Sex?**

#### **Individual Factors**

Since the bulk of AIDS cases among gay/bisexual men occur among men in their thirties and forties, many young gay/bisexual men perceive AIDS to be associated with older gay/bisexual men. Thus, they feel it is safe to have unprotected sex with other young men. Young people tend to have heightened feelings of invulnerability, which may cause them to engage in risky behaviors of all sorts. For example, in focus groups conducted with young gay/bisexual men, participants expressed the view that those who were likely to have AIDS were “older gay men with mustaches who go to leather bars.” By and large, young men know how HIV is transmitted, and those who engage in unprotected intercourse generally admit that their behavior puts them at risk for HIV transmission. Nonetheless, with their feelings of invulnerability, they feel the negative consequences “won’t happen to me.” Consequently, young gay/bisexual men tend not to seek out AIDS prevention services. Community organizations consistently report that very few young men attend their HIV prevention activities, such as safer sex workshops. An effective HIV prevention program would need to overcome this major barrier.

#### **Interpersonal Factors**

Young men are often exploring their sexuality, which may lead to a willingness to try a variety of sexual activities—both high and low risk—with multiple partners. Due to their lack of experience, young men may be less skilled at making safer sex hot and enjoyable. Young gay/bisexual men also may have less experience talking to their partners about safer sex and may be reluctant to insist on using condoms every time.

Coming out as gay or bisexual can be a period of emotional turbulence for young men. During this process, many may experience low self-esteem and depression, in part due to homophobic responses from others. As a consequence, they may be less motivated to engage in safer sex and less confident about their ability to communicate to partners their desire for safer sex.

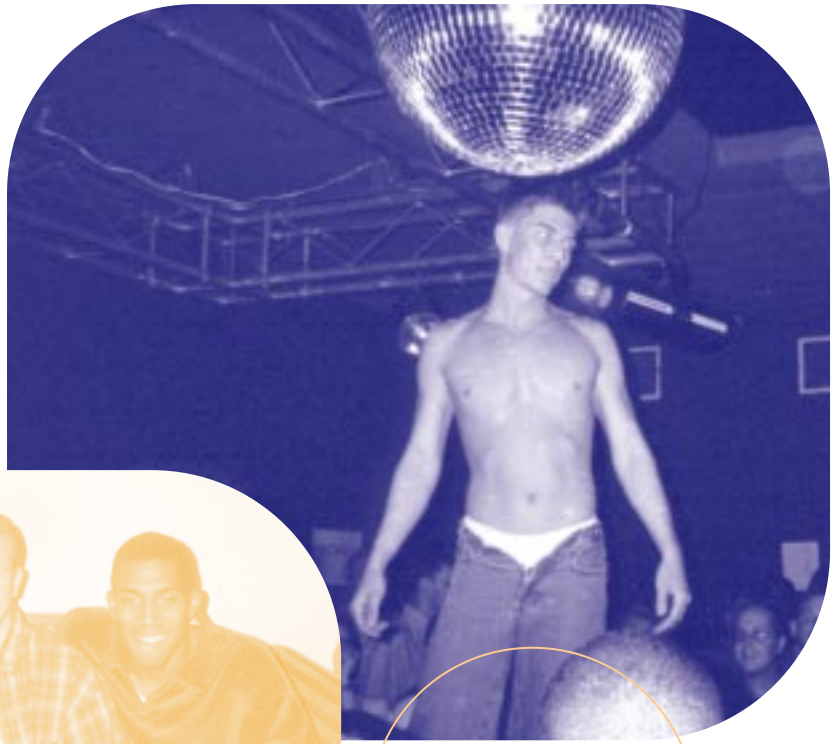
Further, protecting one’s health is not necessarily the main concern of young gay/bisexual men. Interpersonal motivations may be more pressing—wanting to fit in, to find companionship and intimacy—and these may contribute to unsafe sex. For these men, unsafe sex is most likely to occur with a boyfriend—someone whose affection is very important to them.

#### **Cultural Factors**

Young gay/bisexual men of color may feel additional pressures that decrease their motivation for safer sex. Many feel isolated due to conflicts they experience between their sexual orientation and their cultural norms. These young men may feel alienated from their birth culture, yet may also have difficulty feeling at home in the larger gay community because it is often perceived as primarily white and rejecting of men of color. Many of these men of color across the U.S. lack prevention programs that adequately address their needs.

## Community Factors

The norms within the young gay subculture's social scene also may not be conducive to safer sex. In many communities, gay bars and public cruising settings provide the main opportunities for young gay/bisexual men to meet and socialize. Both are sex-charged environments, and the bar scene's emphasis on alcohol sets the stage for engaging in sex while high—a behavior that consistently has been found to contribute to unsafe sex. Many young gay/bisexual men also meet sexual partners through the Internet and “dating” or “party” phone lines, which offer little, if any, HIV prevention information. In addition, some young bisexual men may socialize almost entirely with heterosexual friends and so rarely encounter HIV prevention information that is relevant to their experiences.



The norms within the young gay subculture's social scene are not always conducive to safer sex.

## What Type of Prevention Program is Needed?

Since multiple factors contribute to HIV risk-taking among young gay/bisexual men, “multi-level” prevention programs are needed that address this wide range of factors.

There is a grave public misperception that the gay community has been saturated with AIDS prevention services. This myth ignores the fact that, each year, new young men “come out” as gay or bisexual who have not been exposed to the prevention campaigns of previous years. Thus, HIV prevention for young gay/bisexual men must be ongoing and dynamic.

We know that men who report having unprotected sex in the past are more likely to have unprotected sex again in the future. Therefore, to have the greatest impact, HIV prevention programs must intervene at an early point in young men’s sexual initiation and continue to reinforce safer sex norms.

Recognizing the critical need for HIV prevention programs for young gay/bisexual men, Dr. Susan Kegeles and Dr. Robert Hays, research psychologists at the Center for AIDS Prevention Studies (CAPS) at the University of California, San Francisco, applied for funding to the National Institute of Mental Health (NIMH) to design, implement, and evaluate a community-level HIV prevention program for young gay/bisexual men. Their five-year grant was awarded in 1990. They developed their initial ideas for the program by drawing from the findings of their surveys of young gay/bisexual men; from a series of focus groups with young gay/bisexual men; and from the research literature in social, developmental, and community psychology.

They pilot tested the program in Santa Cruz, CA. Based on encouraging results there, they refined the program and implemented it in a second community (Eugene, OR), where it was named the Mpowerment Project. Following the program’s success in Eugene, it was replicated in Santa Barbara, CA. In 1995, Drs. Kegeles and Hays received a second five-year grant from the NIMH to further develop the program for use in major metropolitan areas across the U.S. Dr. Greg Rebchook, a research psychologist who had worked at a department of public health and at a community-based organization, joined the team in 1996. This new grant enabled them to implement the Mpowerment Project in Albuquerque, NM in 1997-1998 and in Austin, TX in 1999-2000.

## History of the Mpowerment Project

## Guiding Principles of the Mpowerment Project

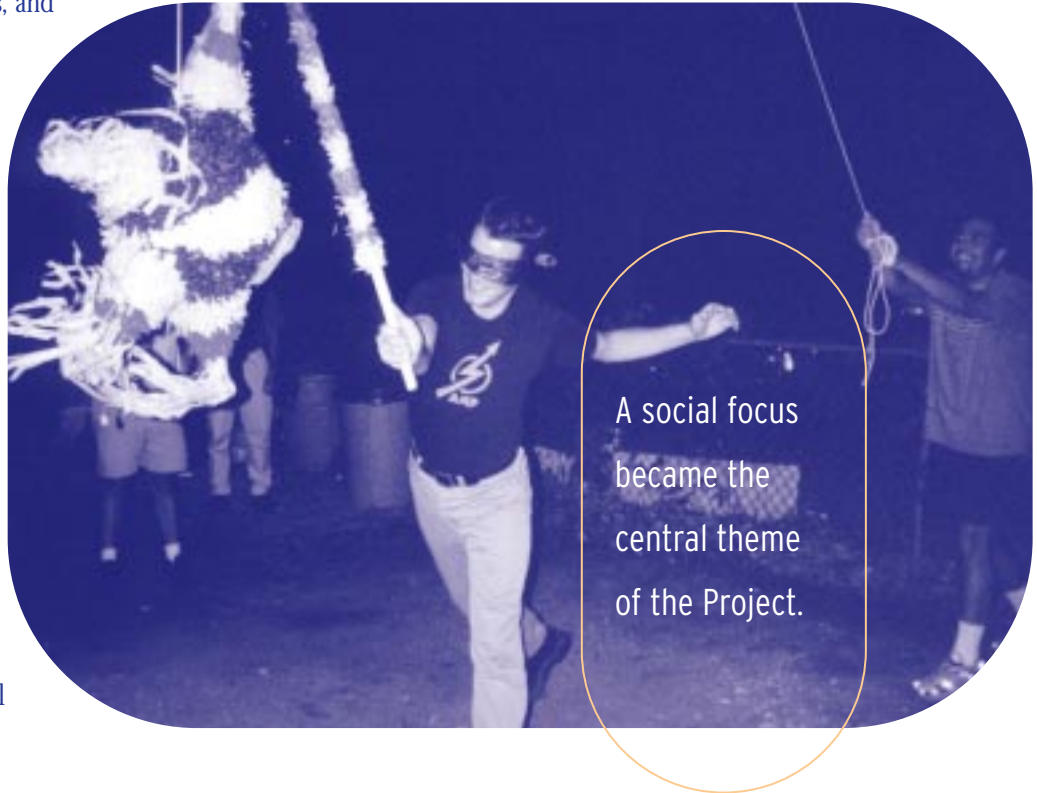
Our research, as well as many other studies, has identified critical issues and guiding principles that serve as the foundation for this community-level HIV prevention program. The guiding principles are described below, and are used to guide all parts of the Mpowerment Project. Scientific articles that describes the program’s underlying scientific theories can be found at the end of this manual.



## Young Men Are Very Concerned With Social and Self-Esteem Issues

HIV prevention is not in itself particularly motivating or captivating for young gay/bisexual men. AIDS is only one threat among many that young gay/bisexual men confront in a homophobic society where gay-bashing, discrimination, and battles over gay rights are commonplace. Young gay/bisexual men may be dealing simultaneously with issues of self-esteem, alienation, isolation, cultural/social identity, racism (in the gay community and in society in general), family problems, and financial, education, and employment pressures.

A successful HIV prevention intervention for young gay/bisexual men therefore needs to tie HIV risk-reduction to the satisfaction of other needs, such as developing friendships, having fun, and enhancing self-esteem. Through focus groups, it became clear that social concerns—such as how to meet and have fun with other young gay/bisexual men—were highly motivating. Thus, a social focus became the central theme of the Project.



A social focus became the central theme of the Project.

## Peer Influences Are Strong Among Young Gay/Bisexual Men

Another key issue guiding the development of the Mpowerment Project has been the recognition that peer influence plays a major role in the lives of young gay/bisexual men. Numerous studies have shown that—regarding almost any type of behavior, whether it be smoking, drugs, fashion, political attitudes, or others—one's peers are the most credible sources of information and “peer pressure” is one of the most highly effective forms of influence. In order for a program of this type to be effective with this particular group, it needed to be peer-based.

## Building Healthy Community Among Young Gay/Bisexual Men

Our surveys have shown that many young gay/bisexual men are frustrated with their local gay communities because there are few places to go to meet other young men and where they can safely be themselves. The Mpowerment Project creates settings where young men can express their identities with each other, find support, and band together to take action on issues of importance to them. Other areas of research have shown that organizing people in this manner makes a positive impact on the community's health (*Minkler, 1990*).

## Empowerment Promotes More Lasting Changes in Behavior

A fourth guiding principle is the desire that the Project serves a mobilizing and empowering function within the young gay/bisexual men's community. From research in other areas of behavior change (*Rappaport, 1981*), it is clear that when individuals are actively involved in finding and implementing solutions to their problems, any changes they make in their behavior are more likely to last. Thus, providing young gay/bisexual men with a mechanism for designing and running the intervention activities themselves seemed most likely to foster a sense of ownership of the program and a sense of personal commitment to HIV prevention.

## Community-Wide Change Occurs Through Interpersonal Networks

The program's design draws from the theory of diffusion of innovations (*Rogers, 1995*), which states that members of a social system are most likely to adopt new behavioral practices (i.e., safer sex) when they see their peers adopting the behavior and communicating that they feel it is desirable and important. Community change thus comes about through a process of informal communication and modeling by peers within their interpersonal networks. The Mpowerment Project facilitates a process for young gay/bisexual men to actively communicate with each other about safer sex and encourage each other to practice it. The goal is for safer sex to become the mutually accepted norm.

All activities designed to promote safer sex are fun, uplifting, and sex-positive.

## Gay-Positive and Sex-Positive Messages Encourage Behavior Change

One final guiding principle of the Mpowerment Project is that the program enriches and strengthens young gay/bisexual men's pride about who they are and encourages them to explore and celebrate their sexuality by not just focusing on condom use but by including a wide variety of safer sexual behaviors. Materials produced by the Project show positive images of young gay/bisexual men, which reflect the diversity of the community. All activities designed to promote safer sex are fun, uplifting, and sex-positive; fear and shame-inducing approaches are avoided.



## Operating Structure of the Mpowerment Project

### Core Group

In keeping with the program's empowerment philosophy, the Project is run by a Core Group of 12 to 20 young gay/bisexual men from the community. With the help of other volunteers, they coordinate and conduct all Project activities. The Core Group meets weekly and is empowered to make key Project decisions. These include deciding upon a name for the Project, planning Project activities, and developing Project materials.



## Project Coordinators

Coordinators are the Project's paid staff who are responsible for organizing all aspects of the Project, including volunteers and activities. They are the starting point for the diffusion process that spreads the safer sex message to young gay/bisexual men throughout the community. A main aspect of their job is to facilitate the empowerment of the young men who join the Project as volunteers.

## Project Volunteers

Volunteers from the young gay/bisexual men's community carry out the bulk of Project activities. Project volunteers are different from Core Group members in that volunteers may want to only get involved with the Project on a limited basis, perhaps helping out with a specific event. They may not desire or be able to devote as much time to the Project as Core Group members. Project volunteer input is extremely important to the overall functioning and success of the Project. Each time a young gay or bisexual man volunteers for the Project, they encounter—and hopefully join—a community of young gay/bisexual men who support each other and who stress the importance of consistently having safer sex.

## Community Advisory Board

The Core Group is assisted by a Community Advisory Board comprised of men and women from the AIDS, gay and lesbian, public health, and university communities. Board members meet monthly with the Core Group to offer advice on Project activities. They also provide a link between the Project and their respective organizations and communities. One key role of the advisory board is to generate ideas and support for continuing the Project beyond the initial funding period. The Community Advisory Board is not responsible for monitoring how funds are spent or for evaluating the program.

## Implementing Agency

A local, community-based service organization (such as an AIDS organization or gay/lesbian/bisexual/transgender community center) or health department oversees the general operation of the Mpowerment Project by providing funding and supervision. Depending on your funding situation, a stand-alone Project may be possible. Alternatively, a consortium of community agencies could sponsor the Project. Although the latter two possibilities are less likely, we mention them in order to highlight the different ways in which the Mpowerment Project could be funded.

A representative from the sponsoring agency—typically the individual in charge of HIV prevention for MSM—supervises the Project Coordinators, and also works closely with the Core Group and Community Advisory Board. This person is responsible for insuring that the program operates as intended and continues to accomplish its objectives.

Project volunteers are extremely important to the overall functioning and success of the Project.





## Project Space for Young Gay/Bisexual Men

Ideally the Project has its own physical space, which serves as the headquarters for the Project and as a community center for young gay and bisexual men. The Project space is where the Project holds most of its social events and staff meetings. During certain hours it also serves as a drop-in center where young men can meet and socialize. The center provides participants with information about other community organizations and services, and makes referrals to these agencies as appropriate. Safer sex materials are also freely available there.

## Program Components

The Mpowerment Project includes four main components:

- \* formal outreach
- \* small group sessions
- \* informal outreach
- \* an ongoing publicity campaign

Each component is essential, and together they work synergistically to create an effective program.

### Formal Outreach

Formal outreach includes two components: outreach teams and outreach events.

Outreach teams of young men go to settings frequented by young gay/bisexual men to promote safer sex. This often includes “zaps” at local bars or a performance at the local community’s gay pride festival. Zaps are very brief activities that attract attention and promote safer sex in a fun and entertaining manner.

Since most communities typically have few settings where young gay/bisexual men can socialize, a major aspect of the Mpowerment Project’s formal outreach performances is the creation of events that will attract young gay/bisexual men and where safer sex can be promoted. These are called outreach events. Young men who attend the outreach events can then be invited to join other activities such as Core Group and M-groups.

The Project sponsors a wide range of outreach events designed to appeal to each segment of the young gay/bisexual men’s community. Depending on the ideas generated by the Core Group, these activities can include such things as weekly video parties, house parties, discussion groups, picnics, community forums, hikes, large dance parties, etc. Mpowerment Project outreach events are designed to be fun, and they are planned so that safer sex promotion can be incorporated into the event in some way.

For example, at dances, the outreach team may perform a theatrical performance piece to motivate young men about safer sex and generate interest in becoming involved with the Mpowerment Project. Likewise, during intermission at video parties, a safer sex video may be shown.

The outreach team uses playful, entertaining approaches to educate young men about safer sex and to encourage them to adopt and maintain safer behaviors over time. The Project also develops materials for distribution at its performances. These may include safer sex information and motivational messages, condoms, lubricants, and invitations to Mpowerment activities.

## M-Groups

The second major component of the Project is the M-group. M-groups are peer-led, one-time meetings of 8 to 10 young gay or bisexual men. The groups last from 2 to 3 hours and are usually held at the Project space, but they can also be held in participants' homes or at other locations convenient for young men.

The M-group focuses on factors identified in research as contributing to unsafe sex among young gay/bisexual men.

### M-Groups help participants:

- \* clear up misconceptions about safer sex
- \* increase the enjoyment of safer sex
- \* build communication skills for negotiating safer sex
- \* address interpersonal issues that may interfere with safer sex
- \* learn how to support their friends to have safer sex

Since not all men who engage in high-risk sexual behaviors are likely to attend these sessions, the M-groups also train participants how to talk informally with their friends outside the group to encourage them to practice safer sex. In this way, the men who do attend an M-group can carry the safer sex message to their friends and acquaintances who do not attend a group.

The format of the M-group was developed through a series of focus groups with young gay/bisexual men. It was designed to be enjoyable and interactive, and it includes structured exercises, informal discussion, and role-plays. The M-groups are promoted as a fun way for young gay/bisexual men to meet other young men, to find out about the Project, and to hear how other young men are dealing with issues of importance to them such as sex, dating, and relationships. All young men in the community who are interested in being involved with the Mpowerment Project are encouraged to attend an M-group as a sort of “entry” or introduction to the Project’s goals and philosophy.

The Project should strive to recruit 15-20% of the estimated number of young gay/bisexual men in the community to attend an M-group. According to diffusion theory, if this proportion of a population adopts an innovation—in this case, safer sex—the innovation can then be conveyed through the community’s natural social networks and bring about community-wide change.

## Informal Outreach

Informal outreach consists of young gay/bisexual men communicating with their friends in casual conversations about the need to engage in safer sex. The goal is to develop a process of communication that promotes safer sex across the entire community.

Young men learn how to conduct informal outreach while attending the M-groups. In the groups, they are asked to make a commitment to speak with several of their friends, give them safer sex packages, and invite them to an M-group. Participants also receive buttons, key chain lanyards, or some other visible item with the Mpowerment Project logo, which they are asked to wear to show their support for the Project and its mission. It is hoped that these items may trigger conversations among their acquaintances about the Project. They also serve as a reminder to young men about the community norm for safer sex that the Project is seeking to establish. Throughout



the life of the Project, participants are reminded to talk with and encourage their friends to be safe. In many communities there are subtle pressures that make it difficult for young men to talk with each other about personal or sensitive topics. To overcome these barriers, Coordinators role model informal outreach for everyone else in the program and they help motivate all Core Group members and other program participants to conduct informal outreach with their friends.

### Publicity Campaign

The fourth component of the Mpowerment Project is an ongoing publicity campaign that the Project conducts within the gay community to communicate its goals and activities. The publicity campaign employs a variety of approaches to reach young gay/bisexual men.

#### Publicity campaigns use

- ❖ articles, columns, community listings, and advertisements in the alternative press, including gay newspapers
- ❖ posters and fliers in settings frequented by young gay/bisexual men
- ❖ Internet web pages, chat rooms, and e-mail distribution lists
- ❖ “word of mouth” publicity by Core Group members and volunteers within their informal social networks
- ❖ university or local gay-themed radio shows

#### The publicity campaign's goals

- ❖ to establish an awareness of the program and its legitimacy
- ❖ to invite young men to become involved with the program and its activities
- ❖ to provide a continual reminder of the norm for safer sex within the young gay/bisexual men's community

The Mpowerment Project does not advertise via the mainstream media to avoid the program's becoming known within the broader community as a program primarily for young gay/bisexual men. Young men who are not comfortable being associated with a publicly gay-identified organization are often reluctant to become involved in such groups. Keeping a low profile also minimizes the chances that homophobic individuals may become convinced that the Project is somehow “promoting homosexuality” and so attempt to obstruct its work or even shut it down.

## Getting Started

The goal of this section is to guide you through the general steps of starting an Mpowerment Project in your community. Developing a timeframe to start a Project differs from community to community and from budget to budget. Each community must adapt these steps to its

Project's goals, funding for the program, and level of interest they are able to generate within the community.

Each of these steps is described in detail throughout the manual. It is important to refer to each relevant section of the manual as you go through the following twelve start-up steps. We hope that this section will be a useful tool to help you establish a reasonable, systematic timeline for creating your program's operating structure and implementing the various program components.

Keep in mind that many of these steps overlap. You can work on more than one simultaneously. You do not necessarily complete one step before beginning another. For example, you will be meeting with leaders in your community to promote awareness of your Project during the same time that you will be conducting your community assessment to establish a Core Group. In addition, many of these steps are on-going once they have begun. For example, you will continue to conduct publicity and sponsor outreach events throughout the life of your Project. These steps do not "end" per se.

### Starting an Mpowerment Project

- Step 1** Locate Coordinators for the Project by writing letters to agencies, placing ads in local gay/bisexual, alternative newspapers and university newspapers (see **Module 3: Operating Structure**).
- Step 2** Hire and train Project Coordinator or Coordinators (see **Module 3: Operating Structure**).
- Step 3** Perform baseline evaluations of sexual risk behavior in your community before the program is implemented (see **Module 8: Evaluation**).
- Step 4** Conduct community assessment (see **Module 2: Community Assessment**). The community assessment helps you to identify:

The different groups of young gay/bisexual men (including what social spaces exist and where the different groups hang out)

Resources (e.g., spaces in which to hold events; gay/lesbian/bisexual community groups, especially those that attract young gay/bisexual men)

People in the community who are relevant to Project (e.g., potential Community Advisory Board members, organizations that might support the Project, places where you can advertise to or recruit young gay/bisexual men)

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- Step 5** Meet with community leaders and relevant agencies to inform them of the Project (see **Modules 2: Community Assessment** and **Module 3: Operating Structure**).
- Step 6** Assemble a Core Group (see **Module 3: Operating Structure**). This involves two major steps:
  - Identifying potential Core Group members from the different segments of the young gay/bisexual men's community
  - Describing the Project to them and inviting them to a Core Group meeting
- Step 7** Coordinators and Core Group (with approval from implementing agency) choose Project space and furnish it (see **Module 4: Project Space**).
- Step 8** Meet with potential Community Advisory Board members, and invite them to join the Community Advisory Board (see **Module 3: Operating Structure**).
- Step 9** Identify and train additional M-group facilitators if you only have one Coordinator (see **Module 6: M-groups**).
- Step 10** Initiate outreach events to attract men to the Project and to begin community-building (see **Module 5: Outreach**).
- Step 11** Begin process of Core Group selecting Project name, logo, and tagline (see **Module 3: Operating Structure** and **Module 7: Publicity**).
- Step 12** Develop Project promotional materials and develop publicity plan (see **Module 7: Publicity**).

### Hoped For Results

Taken as a whole, the Mpowerment Project establishes a community mobilization process that is designed to be self-perpetuating, and that sets in motion an ever-widening diffusion process by which young men communicate with each other about HIV risk-reduction. Given the ongoing, multifaceted nature of the intervention activities, it is hoped that virtually all young gay/bisexual men in the community will be reached through at least one of the Project activities. Ideally, most young gay/bisexual men will hear risk-reduction messages through several sources. If this happens, it is more likely that this message will sink in and that they will consistently practice safer sex.

# Core Elements and their Key Characteristics

The following chart lists the Mpowerment Project's **8** Core Elements and **1** Optional Element.

**Core Elements** are intervention components that should be maintained with as much fidelity as possible to ensure program effectiveness.

**Key characteristics**, listed in bullets, represent desired qualities about each Core Element.

The key characteristics are based on the Guiding Principles of the Project.

## Core Element 1 Core Group

- \* Makes important decisions
- \* Bases decisions on the Project's guiding principles
- \* Membership has racial/ethnic/socioeconomic diversity
- \* Meetings are fun, social, productive, and scheduled regularly
- \* Engages in reflective analysis of all parts of Project, own role in Project, and issues facing young gay/bisexual men

## Core Element 2 Volunteers

- \* Represent diverse racial/ethnic/socioeconomic backgrounds
- \* Make important decisions
- \* Learn new skills and conduct meaningful/interesting work
- \* Support and encourage each other about safer sex
- \* Encounter warm, appreciative, social, and welcoming atmosphere

## Core Element 3 Coordinators

- \* Understand HIV prevention and community building
- \* Knowledgeable about local young gay/bisexual men's community
- \* Demonstrate leadership skills
- \* Oversee all Project activities
- \* Promote diverse racial/ethnic/socioeconomic involvement
- \* Support Core Group and volunteers to develop and implement activities
- \* Begin the safer sex diffusion process
- \* Engages in reflective analysis of all parts of Project, own role in Project, and issues facing young gay/bisexual men

## Core Element 4 Project Space

- \* Safe and comfortable
- \* Accessible and appealing location
- \* Displays safer sex posters and literature
- \* Condoms and lubricant available
- \* Referral information available

## Core Element 5 Formal Outreach

- \* Promotes safer sex
- \* Sponsors fun and appealing events and engaging performances
- \* Helps build community
- \* Provides social opportunities
- \* Creates opportunities for positive peer influence
- \* Recruits for M-groups and other Project activities
- \* Empowers Project volunteers
- \* Scheduled regularly

## Core Element 6 Informal Outreach

- \* Diffuses a norm of safer sex
- \* Uses peer influence to change behavior
- \* Achieved through non-judgmental and supportive peer interactions
- \* Reinforced through other Project activities

## Core Element 7 M-Groups

- \* Facilitated by well-trained and skilled Project staff and/or volunteers
- \* Address young gay/bisexual men's important issues
- \* Create social opportunities
- \* Eroticize safer sex
- \* Teach and motivate informal outreach
- \* Teach sexual negotiation skills
- \* Encourage Project involvement and volunteerism
- \* Scheduled regularly

## Core Element 8 Publicity Campaign

- \* Creates attractive and informative materials
- \* Reminds young gay/bisexual men of safer sex
- \* Reaches all young gay/bisexual men in community
- \* Targets young gay/bisexual men, not general community

## Optional Element 9 Community Advisory Board

- \* Serves as resource for Core Group
- \* Does not have day to day decision-making power
- \* Uses available local expertise
- \* Not a required Core Element

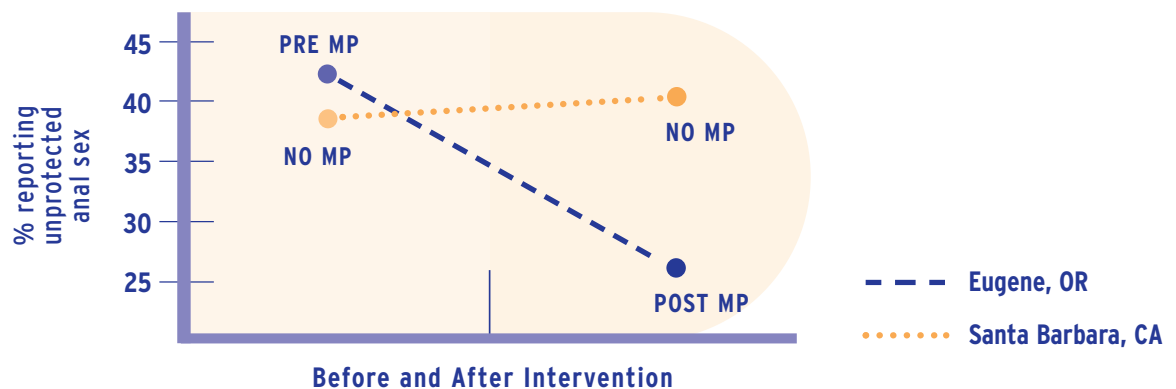
## Effectiveness of the Mpowerment Project

To evaluate the effectiveness of the Mpowerment Project, researchers chose two mid-sized communities where the Mpowerment Project could be implemented and evaluated. The two communities were Eugene, Oregon and Santa Barbara, California. Before the Mpowerment Project was implemented in either community, young gay/bisexual men in both communities were surveyed about their sexual behavior in order to obtain baseline information. The Mpowerment Project was then implemented in Eugene for eight months. During this time, Santa Barbara was without the Mpowerment Project, although safer sex posters were placed by other agencies at the city's only gay bar, at HIV testing sites and on the college campus. When the Mpowerment Project ended in Eugene, young gay/bisexual men in both communities were again surveyed. The Mpowerment Project was then implemented in Santa Barbara. At the end of the Mpowerment Project in Santa Barbara, the young gay/bisexual men in both communities were surveyed for a third time.

### Impact on Sexual Risk Behavior

The Mpowerment Project has been shown to reduce rates of unprotected anal intercourse among young gay/bisexual men in communities in which it has been implemented.

As shown in the figure below, following implementation of the program in Eugene, the rates of unprotected anal intercourse reported by young gay/bisexual men decreased from 41% to 30%. Thus, the rates of men who reported engaging in any unprotected anal intercourse decreased by 27% from pre-intervention levels. Specifically, there was a 45% reduction in unprotected anal intercourse from pre-intervention levels with non-primary partners, and a 24% reduction from pre-intervention levels with boyfriends. These declines represent changes that were occurring within the entire community, not just those men who directly participated in the program. In Santa Barbara, where the intervention had not yet occurred, the rates remained stable at 39% and 40%.



The program was then implemented in Santa Barbara. The program's effectiveness was replicated there, with researchers observing similar declines in rates of unprotected anal intercourse.

Our most study looked at the impact of the Mpowerment Project since HAART (Highly Active Anti-retroviral Therapy) — the drug “cocktail” — has become available. Our data showed that the intervention resulted in a slight decrease (-12%) in risk behavior among young gay/bisexual men in Albuquerque, NM while during the same time period, the risk behaviors in the our comparison communities rose dramatically. Young gay/bisexual men in Phoenix, AZ reported a 24% increase in unprotected anal sex, and young men in Austin, TX reported a 42% increase. At the time these data were collected, neither Austin nor Phoenix had an Mpowerment Project in their communities. Thus, this analysis showed the Mpowerment Project successfully staved off an increase in risk behavior.



## Intervention Activities

### Most Likely to Reach High Risk-Taking Men

The ability to reach young gay/bisexual men who engage in high-risk sexual practices is critical to a successful HIV prevention program. Therefore, we examined the data from

evaluation surveys to identify which program activities were most successful in reaching these men. The table below provides a breakdown of the results. These results show what proportion of men who were in our evaluation surveys participated in the various parts of the program.

Which intervention activities reached the young gay/bisexual men who engaged in high-risk sexual practices before the program was implemented.

PROGRAM ACTIVITY	% PARTICIPATING	
	Eugene, OR	Santa Barbara, CA
Heard of Mpowerment Project	85%	63%
Experienced outreach activities	61%	53%
Attended large outreach events	59%	40%
Attended a video night or visited center	59%	40%
Received invite from friend to M-group	32%	43%
Attended an M-group	19%	33%
Helped with formal outreach	12%	17%
Member of Core Group	10%	23%

Clearly, the high risk-taking men were most likely to be reached by social events and outreach (whether via formal or informal channels). However, many were also reached by their friends who had previously attended M-groups and had then become more involved in Mpowerment Project programs. Although many of the men who attended M-groups were not engaging in high-risk sexual behaviors, some of the friends they contacted were. Therefore, although M-groups should not be considered the most important part of the Mpowerment Project, they do have the potential to reach many more men than actually attend them.

*For more information on the evaluation study, see the following two articles:*

Kegeles, SM, Hays, RB, Coates, TJ. (1996). *The Mpowerment Project: A community-level HIV prevention intervention for young gay men.* American Journal of Public Health, 86 (8), 1129-1136 and

Kegeles, SM, Hays, RB, Pollack, LM, Coates, TJ. (1999). *Mobilizing young gay/ bisexual men for HIV prevention: a two-community study.* AIDS, 13 (13), 1753-1762.

## Cost Effectiveness of Project

We conducted a cost-effectiveness analysis of the Mpowerment Project. We were able to estimate how many HIV infections were avoided by implementing the Mpowerment Project. We then compared the cost of HIV infections with the cost of the program and found that the Mpowerment Project was cost-effective. It is one of the most cost effective HIV prevention programs that have been assessed. The results of the cost-effectiveness study can be found in: Kahn JG, Kegeles SM, Hays R, Beltzer N. (2001). Cost-effectiveness of the Mpowerment Project, a community-level intervention for young gay men. *Journal of Acquired Immunity Deficiency Virus and Human Retroviruses*, 27, 482-491.

## References

- Buchanan, D. R., Poppen, P. J., & Reisen, C. A. (1996). *The nature of partner relationship and AIDS sexual risk-taking in gay men*. *Psychology & Health*, 11(4), 541-555.
- Dean, L., & Meyer, I. (1995). *HIV prevalence and sexual behavior in a cohort of New York City gay men (aged 18-24)*. *Journal of Acquired Immune Deficiency Syndromes and Human Retrovirology*, 8(2), 208-211.
- Ekstrand, M. L., Stall, R. D., Paul, J. P., Osmond, D. H., & Coates, T. J. (1999). *Gay men report high rates of unprotected anal sex with partners of unknown or discordant HIV status*. *AIDS*, 13(12), 1525-1533.
- Hays, R. B., Kegeles, S. M., & Coates, T. J. (1990). *High HIV risk-taking among young gay men*. *AIDS*, 4, 901-907.
- Hays, R. B., Rebchook, G. M., & Kegeles, S. M. (in press). *The Mpowerment Project: Community-Building With Young Gay and Bisexual Men to Prevent HIV*. *American Journal of Community Psychology*.
- Hoff, C. C., Stall, R., Paul, J., Acree, M., Daigle, D., Phillips, K., Kegeles, S., Jinich, S., Ekstrand, M., & Coates, T. J. (1997). *Differences in sexual behavior among HIV discordant and concordant gay men in primary relationships*. *Journal of Acquired Immune Deficiency Syndromes and Human Retrovirology*, 14(1), 72-78.
- Kahn, J. G., Kegeles, S. M., Hays, R., & Beltzer, N. (2001). *Cost-effectiveness of the Mpowerment Project, a community-level intervention for young gay men*. *Journal of Acquired Immune Deficiency Syndromes*, 27(5), 482-491.
- Kegeles, S. M., Hays, R. B., & Coates, T. M. (1996). *The Mpowerment Project: A community-level HIV prevention intervention for young gay men*. *American Journal of Public Health*, 86(8), 1129-1136.
- Kegeles, S. M., Hays, R. B., Pollack, L. M., & Coates, T. J. (1999). *Mobilizing young gay and bisexual men for HIV prevention: a two-community study*. *AIDS*, 13(13), 1753-1762.
- Kegeles, S., Rebchook, G., Hays, R., and Pollack, L. (July, 2002). *HIV prevention efforts for young gay/bisexual men*. XIV International Conference on HIV/AIDS. Barcelona, Spain.
- Kelly, J. A., Sikkema, K. J., Winett, R. A., Solomon, L. J., Roffman, R. A., Heckman, T. G., Stevenson, L. Y., Perry, M. J., Norman, A. D., & Disiderato, L. J. (1995). *Factors predicting continued high-risk behavior among gay men in small cities: Psychological, behavioral, and demographic characteristics related to unsafe sex*. *Journal of Consulting and Clinical Psychology*, 63(1), 101-107.
- Mansergh, G., & Marks, G. (1998). *Age and risk of HIV infection in men who have sex with men*. *AIDS*, 12, 1119-1128.
- McFarland, W., Katz, M., Stoyanoff, S., Shehan, D., LaLota, M., Celentano, D., Koblin, B., Torian, L., & Thiede, H. (2001). *HIV incidence among young men who have sex with men--Seven US Cities, 1994--2000*. *MMWR*, 50(21), 440-444.
- Minkler, M. (1990). *Improving health through community organization*. In K. Glanz & F. M. Lewis & B. K. Rimer (Eds.), *Health behavior and health education: theory, research, and practice*. San Francisco: Jossey-Bass.
- Osmond, D. H., Page, K., Wiley, J., Garrett, K., Shepard, H. W., Moss, A. R., Schragar, L., & Winkelstein, W. (1994). *HIV infection in homosexual and bisexual men 18 to 29 years of age: The San Francisco young men's health study*. *American Journal of Public Health*, 84(12), 1933-1937.
- Rappaport, J. (1981). *In praise of paradox: A social policy of empowerment over prevention*. *American Journal of Community Psychology*, 9(1).
- Richwald, G. A., Morisky, D. E., Kyle, G. R., & Kristal, A. R. (1988). *Sexual activities in bathhouses in Los Angeles County: Implications for AIDS prevention education*. *Journal of Sex Research*, 25(2), 169-180.
- Rogers, E. M. (1995). *Diffusion of Innovations (4th ed.)*. New York: The Free Press.
- Valleroy, L. A., MacKellar, D. A., Karon, J. M., Rosen, D. H., McFarland, W., Shehan, D. A., Stoyanoff, S. R., LaLota, M., Celentano, D. D., Koblin, B. A., Thiede, H., Katz, M. H., Torian, L. V., & Janssen, R. S. (2000). *HIV Prevalence and Associated Risks in Young Men Who Have Sex With Men*. *JAMA*, 284(2), 198-204.