

MANY MEN, MANY VOICES (3MV)

Best Evidence – Risk Reduction

INTERVENTION DESCRIPTION

Intended Population

- Black men who have sex with men (MSM) of HIV-negative or unknown HIV serostatus

Goals of Intervention

- Reduce unprotected insertive and receptive anal intercourse
- Reduce the number of sex partners
- Increase consistent condom use during anal intercourse
- Increase testing for HIV and other sexually transmitted infections (STIs)

Brief Description

Many Men, Many Voices (3MV) is a group-level intervention that addresses behavioral and social determinants and other factors influencing the HIV/STI risk and protective behaviors of black MSM. The other factors include cultural, social, and religious norms, identity of black MSM and their degree of connectedness to the black and gay communities, HIV/STI interactions, sexual relationship dynamics, and the social influences of racism and homophobia. The intervention consists of 6 consecutive 2- to 3-hour sessions delivered during a weekend retreat (half-day Friday and all-day Saturday and Sunday). Rather than a singular emphasis on condom use, 3MV uses a menu of behavior change options for HIV/STI prevention. Session 1 (The Culture of black MSM) helps participants recognize how racism and homophobia are related to sexual and substance use risk behaviors. Session 2 (STI/HIV Prevention for black MSM) describes the roles of “Tops” and “Bottoms” as they relate to sexual relationship dynamics and the risk of STI and HIV transmission. Session 3 (STI/HIV Risk Assessment and Prevention Options) helps participants personalize their own risk by building a menu of behavioral options (e.g., abstinence, mutual monogamy between 2 HIV-seronegative partners, consistent condom use) to reduce HIV/STI transmission risk. Session 4 (Intentions to Act & Capacity for Change) enhances participants’ intentions to change their own risky behaviors and guides them toward safer sex behaviors. During Session 5 (Relationship issues: Partner selection, Communication & Negotiation), participants recognize power and control dynamics in their relationships, and are encouraged to select and implement a relationship-focused risk-reduction behavior change option with their partner(s). Session 6 (Social Support & Problem Solving to Maintain Change) involves participants role-playing communication and negotiation strategies, provides peer support to promote problem solving, and identifies effective risk-reduction strategies if relapse should occur.

Theoretical Basis

- Social Cognitive Theory
- Behavioral Skills Acquisition Model
- Transtheoretical Model of Behavior Change
- Decisional Balance Model

Intervention Duration

- Six consecutive 2- to 3-hour sessions during a weekend retreat

Intervention Setting

- Retreat facility

Deliverer

- Two trained black MSM peer co-facilitators

Delivery Methods

- Discussion
- Role playing
- Risk-reduction plan

INTERVENTION PACKAGE INFORMATION

An intervention package is not available at this time. Please contact **Leo Wilton**, Binghamton University, State University of New York, University Downtown Center, Room 413, 67 Washington Street, Binghamton, NY 13901.

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EVALUATION STUDY AND RESULTS

The original evaluation was conducted in New York City, NY between 2005 and 2006.

Key Intervention Effects

- Reduced unprotected anal intercourse with casual sex partners
- Reduced number of male sex partners

Study Sample

The analytic study sample of 338 men is characterized by the following:

- 68% Black or African American, 17% Caribbean/West Indian, 11% Afro-Latino, 3% Mixed ancestry, 1% African
- 99% male, 1% transgender
- 78% gay, 18% bisexual, 2% unsure of sexual orientation, 1% heterosexual
- Mean age of 30 years, range: 18-72 years
- 93% completed high school education or more

Recruitment Settings

Venues (i.e. black gay pride festivals, nightclubs) and public areas/communities throughout New York City

Eligibility Criteria

Men were eligible if they self-identified as a black MSM (i.e., self-identified as gay, bisexual or same gender-loving, or as being sexually active with other men, or sexually or emotionally attracted to other men), were 18

years of age or older, willing to attend and participate in an HIV/STI prevention intervention retreat delivered outside of New York City without their primary partner or boyfriend and discuss male-to-male sexual behavior in a group setting, had not previously participated in the Many Men, Many Voices intervention, reported their HIV serostatus as HIV-negative or unknown, and resided in New York City with no plans to relocate within 6 months.

Assignment Method

Black MSM (N = 338) were randomly assigned to 1 of 2 groups: Many Men, Many Voices intervention (n = 164) or wait-list control (n = 174).

Comparison Group

The wait-list control group was scheduled to receive a delayed intervention 6 months following the completion of their baseline assessment.

Relevant Outcomes Measured and Follow-up Time

- Sex behaviors during past 3 months (including number of male sex partners, number of episodes of unprotected insertive or receptive intercourse acts with main or casual partners, condom use during insertive or receptive anal intercourse with main or casual male sex partners, number of episodes of unprotected and protected vaginal and anal sex with women) were measured at 3- and 6-months post-intervention.

Participant Retention

- Many Men, Many Voice Intervention (3MV)
 - 73% retained at 3 months
 - 77% retained at 6 months
- Wait List Control
 - 72% retained at 3 months
 - 76% retained at 6 months

Significant Findings

- At the 3-month follow-up, the 3MV intervention participants reported having significantly fewer male (main or casual) sex partners compared to the wait-list control participants ($p = .04$).
- At the 6-month follow-up, the 3MV intervention participants reported significantly fewer episodes of any unprotected anal intercourse with casual partners ($p = .012$) and unprotected insertive anal intercourse with casual partners ($p = .005$) compared to the wait-list control participants.
- Across the 2 follow-up time periods, the 3MV intervention participants reported significantly fewer episodes of unprotected insertive anal intercourse with casual partners compared to the wait-list control participants ($p = .015$).

Considerations

- At the 6-month follow-up, the 3MV intervention participants were significantly more likely to report HIV testing behavior compared to the wait-list control participants ($p = .023$). Across the 2 follow-up time periods, the HIV testing behavior was significantly higher among participants in the 3MV intervention group compared to those in the wait-list control group ($p = .016$).
- There were no significant intervention effects on any unprotected anal intercourse with main partners or STI testing behavior at the 3- or 6-month follow-ups, but the direction of all changes was protective and favored intervention participants.

REFERENCES AND CONTACT INFORMATION

Wilton, L., Herbst, J. H., Coury-Doniger, P., Painter, T. M., English, G., Alvarez, M. E., Scahill, M., Roberson, M. A., Lucas, B., Johnson, W. D., & Carey, J. W. (2009). [Efficacy of an HIV/STI prevention intervention for Black men who have sex with men: Findings from the Many Men, Many Voices \(3MV\) Project](#). *AIDS and Behavior*, 13(3), 532-544. doi: 10.1007/s10461-009-9529-y

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