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Mpowerment

Programming Connection

USA
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Evidence brief

The Mpowerment (MP) program is a community-level intervention designed to help prevent HIV among young men who have sex with men (MSM). The program works to address psychosocial factors (e.g., one's sense of agency) that can affect sexual risk behaviours.^{1,2} The MP program is one of the [Effective Interventions – High Impact Prevention](#) programs of the Centers for Disease Control and Prevention (CDC)³ and has been previously evaluated and found to have positive outcomes.²

A recent study that focused on outcomes of MP delivery in racial/ethnic minority communities found positive psychosocial changes, a reduction in sexual risk taking and an increase in HIV testing among participants when MP was delivered to a group of young MSM of colour.¹

Mpowerment (MP) program description

The MP program is tailored to the needs of the local community. A [logic model](#)⁴ provided by the CDC helps to guide program implementation.

MP targets a variety of factors (e.g., beliefs, social support, peer influence and community empowerment) that can reduce sexual risk behaviours and increase HIV testing in participants. The program includes six core elements that are intended to work together, although there is no requirement that participants attend activities; participants are free to attend as many elements of the MP program as they wish.¹ The core elements of MP are as follows:^{1,2}

- A **core group** of 12 to 15 young men serve as the project's decision-making body; the group's work can include designing project materials and outreach methods.
- **Formal outreach** includes young MSM going to places frequented by young MSM to deliver safer sex messages/education.
- **M-groups** (small peer-led group meetings) last 3 hours and focus on factors contributing to unsafe sex among young MSM (e.g., misperceptions about safer sex, having poor sexual communication skills).
- **Informal outreach** includes young MSM having casual conversations with their friends about the need for safer sex.
- **Publicity** is targeted at young MSM to provide messaging related to safer sex and to recruit participants.
- A **project space** is established where young MSM can meet and socialize.

The CDC recommends that volunteers and a project coordinator deliver and oversee MP and that a Community Advisory Board be convened³ to provide advice to the core group.²

Using a repeated measures design, participants of the study completed baseline and follow-up surveys at 3 and 6 months. An individual's participation in M-group was considered to be the start of their involvement in MP because M-groups provided the most significant dose of the intervention.¹

Results¹

- Significant improvements in participants' belief that they have the capacity to participate in safer sex were found at the 3 and 6 month follow ups (i.e., follow ups 1 and 2) compared with the baseline survey, and participants' self-acceptance as an MSM improved by follow-up 2, as compared to baseline.
- More exposure to MP (measured by a score that considered participation in and weight of the core elements noted above) was associated with significant improvements in perceived social norms about safer sex and HIV testing among gay/bisexual/transgender friends, as well as increased discussions about safer sex among gay/bisexual/transgender friends.
- Participants reported significantly higher levels of HIV testing (in the past 6 months) at both follow-up points (54% at baseline to 65% at follow-up 1 to 70% at follow-up 2).
- Participants reported a significant reduction in condomless sex with any partner at follow-up 1, but this change was not sustained at follow-up 2 (40% at baseline to 34% at follow-up 1 to 41% at follow-up 2).
- No significant changes in participants' reports of engaging in condomless sex with non-primary partners, while intoxicated or high (injection drugs), with a partner of unknown HIV status or in the context of transactional sex were found.

What does this mean for service providers?

The MP program has been adapted in [Canada](#) and may provide service providers with a way to promote new biomedical prevention strategies (e.g., pre-exposure prophylaxis) and empower individuals to take control of and manage their sexual health. The adaptable nature of MP allows for elements of the program such as outreach locations, the project space and program publicity to be tailored to individual target communities. The MP program has been shown to be successful in increasing testing within racially/ethnically diverse communities of young MSM¹ and could be further explored and used to promote testing among young MSM.

Related resources:

[Mpowerment](#) - Bright Idea

[Are you a baller?](#) - Bright Idea

[Sexual Health Information Project](#) - Case Study

[YouthCo Mpowerment Program](#) (BC)

[Mpowerment Effective Interventions](#) (CDC)

[Mpowerment Implementation Planning Tool and M&E Activities](#) (CDC)

[Mpowerment Project page - mpowerment.org](#)

References:

1. [a. b. c. d. e. f. g.](#) Shelley G, Williams W, Uhl G et al. An evaluation of Mpowerment on individual-level HIV risk behavior, testing, and psychosocial factors among young MSM of color: The monitoring and evaluation of MP (MEM) Project. *AIDS Education and Prevention*. 2017;29(1):24-37.
2. [a. b. c. d.](#) Kegeles SM, Hays RB, Coates TJ. The MP Project: A community-level HIV prevention intervention for young gay men. *American Journal of Public Health*. 1996;86:1129-36. Available from: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1380625/pdf/amjph00519-0075.pdf>
3. [a. b.](#) Centers for Disease Control and Prevention. Effective interventions: HIV prevention that works. High impact prevention: Mpowerment. 2017. Available from: <https://effectiveinterventions.cdc.gov/en/HighImpactPrevention/Interventions/Mpowerment.aspx>

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