

Examining Self-Efficacy and Readiness to Change in Regards to Alcohol Use Disorders: the WELL Program

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Background

- Evidence-based behavioral health interventions (EBI) aim to educate their target population in hopes of effecting behavior modification.
- The greater self-efficacy and readiness to change in the individual, the more likely they are to achieve and maintain behavior modifications.
- Alcohol use disorders (AUD) are more frequent in people living with HIV/AIDS (PLWHA) than in the general population.
- High risk alcohol use impacts HIV disease progression including failure to link, engage, and retain patients in care, medication adherence, and resistance to antiretroviral medications ultimately leading to poor health outcomes.

Hypothesis

- Participation in the WELL (Wellness through Empowerment, Learning, and Living) program increases self-efficacy and readiness to change leading to a greater reduction in drinking compared to the treatment as usual (TAU) group.

Methods

- The WELL intervention program consists of five sessions designed to reduce alcohol use, risky sexual behavior, improve knowledge of biomedical consequences of alcohol, and overall health in PLWHA.
- Participants were recruited from the University Medical Center-New Orleans HIV Outpatient Clinic.
 - Inclusion criteria:** HIV positive, 18 years or older, alcohol use of more than 4 drinks in men and 3 drinks for women in the last week, and consumption of 6+ drinks on one occasion.
- The General Self-Efficacy Scale and Socrates v8 were completed to assess confidence and readiness to change behavior, respectively.
- Alcohol use was measured by the Timeline Follow-Back method (TLFB).
- Generalized Estimating Equations were used to analyze the effects of the intervention on behaviors.
- All analyses were completed using SAS version 9.4.



Results

	Group	
	TAU % (n=102)	WELL % (n=100)
Gender, % (n)		
Male	71.6 (73)	71.0 (71)
Female	25.5(26)	29.0 (29)
Transgender	2.9 (3)	0
Race % (n)		
African American	80.4 (82)	78.0 (78)
White	17.7 (18)	19.0(19)
Other	1.0(1)	3.0 (3)
Hispanic or Latino	3.9(4)	1.0(1)
Age, mean ± SD	47.2 ± 9.93	48.8 ± 4.39

Figure 1. Mean General Self-Efficacy Scale scores of participants with an HIV diagnosis of less than 15 years at baseline and 3 months post intervention by treatment groups. WELL participants have a significant change at post-intervention (p-value = 0.011).

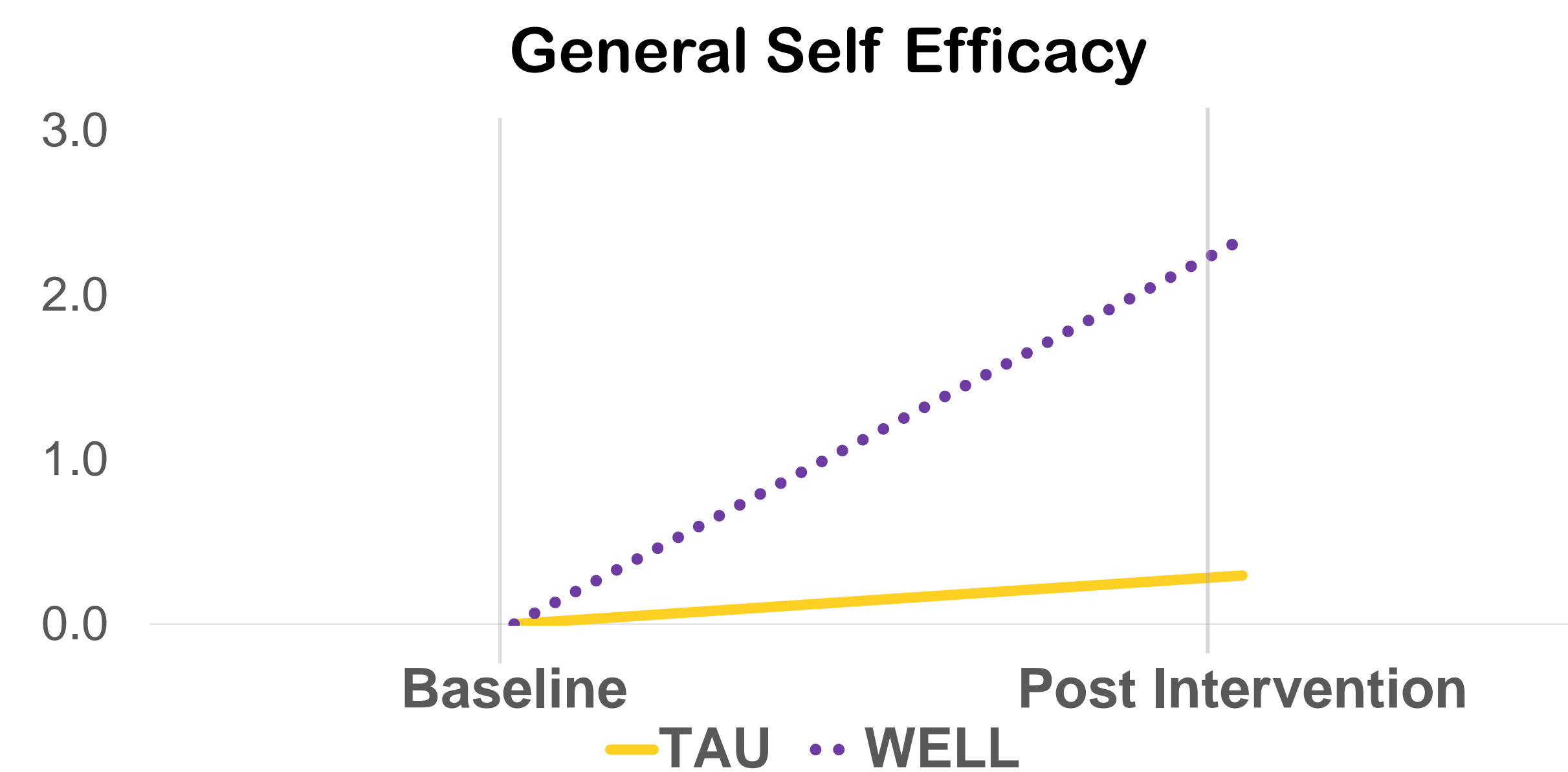


Figure 2. Mean Readiness to Change scores at baseline and 3 months post intervention by treatment groups. There were no significant changes in either treatment group.

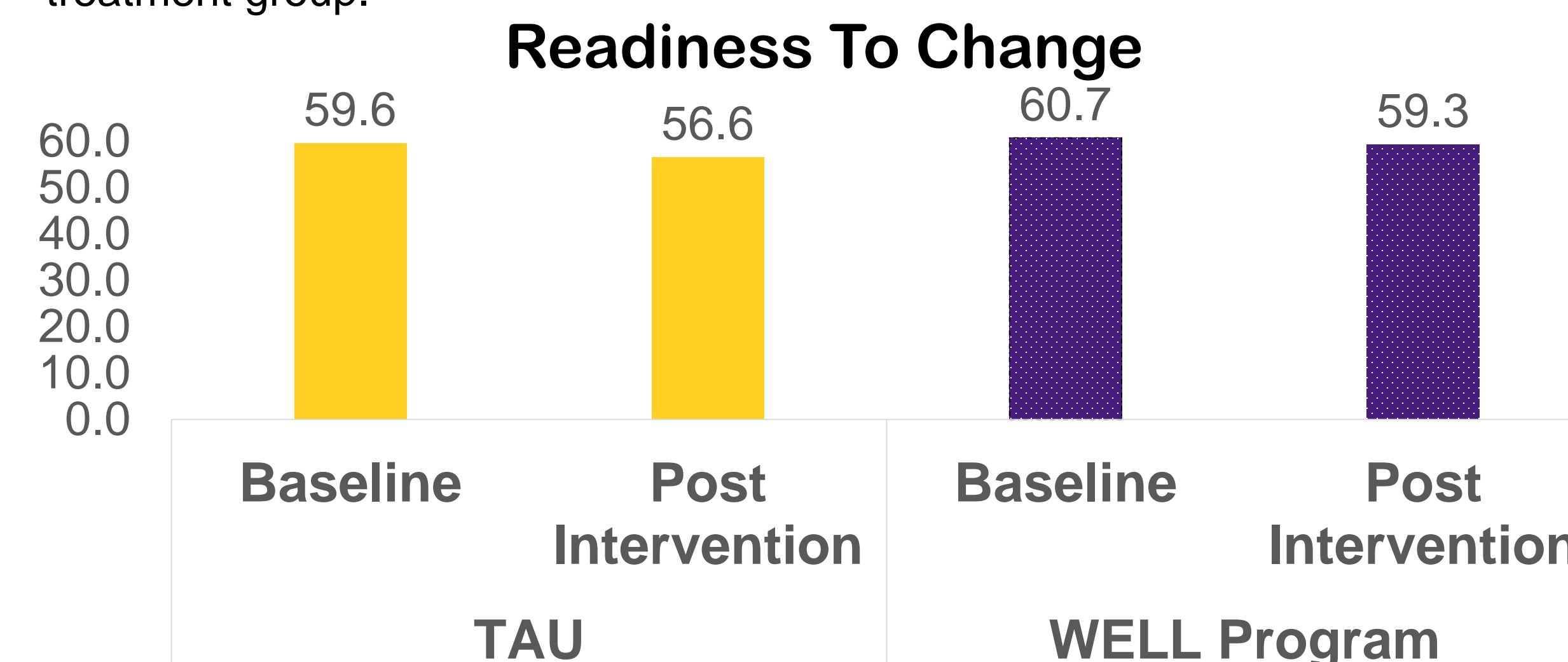
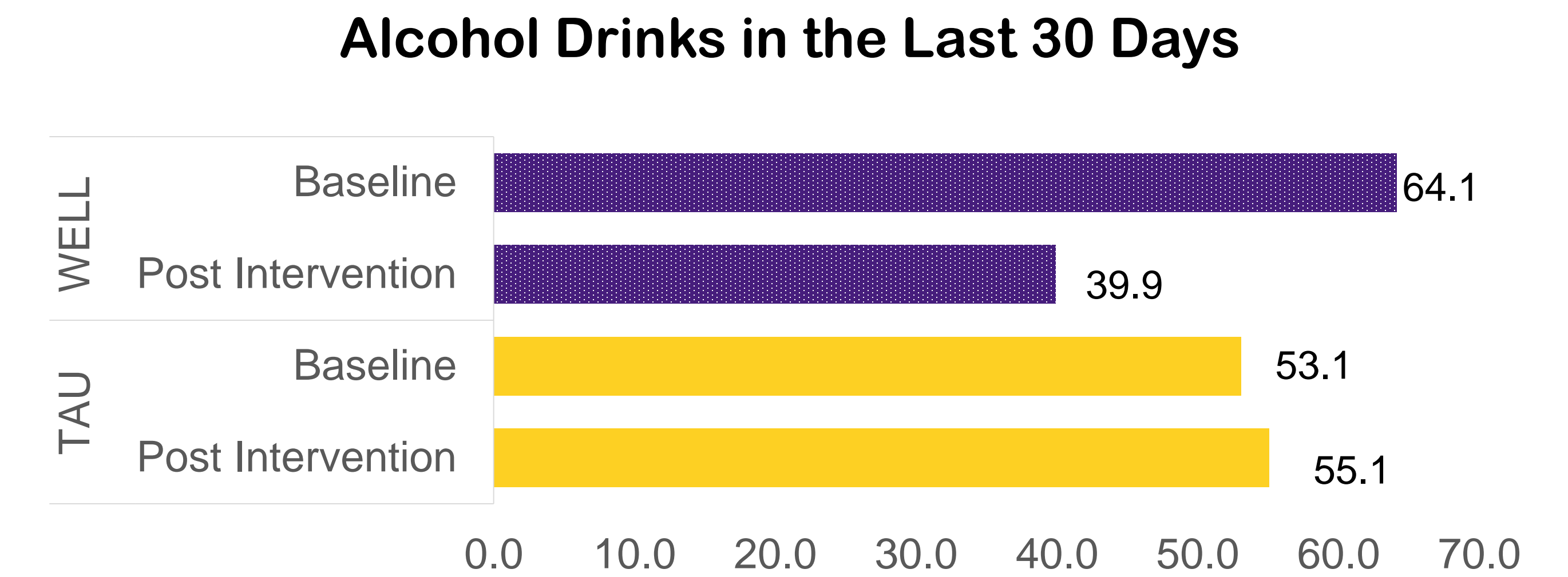


Figure 3. Mean scores for alcohol use at baseline and 3-month post intervention by treatment groups. There was a significant decrease in WELL participants compared to TAU participants. (p-value= 0.002)



Discussion

- WELL participants with an HIV diagnosis of <15 years had a significant change in self-efficacy at 3-mos (p-value=0.011).
- Alcohol use had a statistically significant decrease among WELL participants in the Time Line Follow Back (Drinks/30 days= -24.23) compared to TAU (Drinks/30 days= 1.98) (p-value=0.002).

Conclusion

- Our findings provide evidence that participation in the WELL intervention program decreases risky alcohol use.
- Sustainability of these behavioral changes require further investigation over time. Additional assessments are in progress to include 6- and 12-month post-intervention data.

Acknowledgement

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