Engaging African Americans Living with HIV and Serious Mental Illness: Piloting Prepare2Thrive—A Peer-Led Intervention

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What Is the Problem?

- Historically and currently, African American individuals have been disproportionately affected by human immunodeficiency virus (HIV) compared with individuals of other races/ethnicities.
- African American individuals living with both HIV and serious mental illness (SMI) face even more health disparities than those living with HIV but not SMI.
- High treatment engagement (e.g., taking medications, attending mental and physical health care appointments) is essential for managing both HIV and SMI.
- Many barriers exist to improving treatment engagement in African American adults living with HIV and SMI, and these occur at multiple levels (e.g., individual attitudes, patient–provider relationships, discrimination, and stigma).
- To date, no interventions have targeted treatment engagement in this vulnerable population.

What Are the Findings?

- Our culturally adapted, four-session, group-level intervention—designed and implemented by a team including African American adults living with HIV and SMI—is feasible and was rated as acceptable by participants.
- From before to after the intervention, participants confidence in their ability to engage in their HIV treatment improved and mental health appointment attendance increased.
- On average, participants adherence to their HIV medication regimen increased by 8%, and among participants who attended all four intervention sessions, their adherence increased by 17.5%.

Who Should Care Most?

- African American adults living with HIV and SMI.
- Healthcare providers seeking peer-delivered and culturally sensitive interventions to improve treatment engagement among African American individuals with multiple health conditions.
- Academics and clinicians interested in using community-based participatory research to improve health and wellness among African American adults living with HIV and SMI.
Recommendations for Action

- Peer-led and culturally tailored interventions for improving treatment engagement may be particularly useful among African American adults living with HIV and SMI.
- Continue creating interdisciplinary teams comprised of community members to develop and test evidence-based practices that address health disparities in those communities.
- Provide funding for such research and collaborations at the foundation, university, and government levels.