

## **CONDITIONAL ECONOMIC INCENTIVES TO REDUCE HIV RISKS AMONG MALE SEX WORKERS: BASELINE RESULTS FROM A RANDOMIZED PILOT IN MEXICO**

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### **Extended Abstract (2-4 pages)**

This pilot project has three aims. First, it will test the feasibility and acceptability of a conditional economic incentives (CEI) program to incentivize self-protection and health-care-seeking behaviors among male sex workers (MSW) in Mexico City. The working hypothesis is that a program with modest economic incentives to stay free of sexually transmitted infections (STI) can be implemented among MSW to incentivize condom use and reduction of sex partners. We hypothesize that CEI treatment groups will exhibit greater program participation and retention rates as compared to the control group. Second, it will obtain estimates of the effect of CEI on primary outcomes: reported condom use and reported number of sexual partners. Our working hypothesis is that there will be a dose-response effect where participants with progressively higher CEI will show more protective behaviors than the controls. We hypothesize that higher levels of CEI will be associated with higher rates of reported condom use and greater reductions in the number of sex partners. Third, it will examine the degree to which CEI impact secondary outcomes: incident cases of STI, and prices for commercial sex transactions. The working hypothesis is that the CEI treatment groups will have reduced rates of STI and they will face lower prices for commercial sex transactions.

We will present the baseline results for MSW (inclusion criteria: male, self-identified as sex worker who has been paid to have sex with other men within the last 6 months, ages 18-30), recruited in Mexico City (n=210) from various sites including Alameda Central, Metro Hidalgo, Ciudad Neza, Zona Rosa and Clínica Condesa (largest HIV Clinic in Mexico City). After completing baseline assessment, participants were then randomized into 3 groups: control, treatment 1 and treatment 2. In Treatment 1 (n=70), participants receive a medium conditional incentive (\$500 pesos/each time) only if they are free of STIs at months 6 and 12. Participants in Treatment 2 (n=70) receive high incentive (\$1000 pesos/each time) only if they are free of STIs at months 6 and 12. Controls (n=70) will not receive any CEI even if they are free of STIs at months 6 and 12. However, everyone will receive inconvenience fee (\$100 pesos/each time at baseline, month 6 and month 12). All incentives will be given out in the form of supermarket vouchers and are small enough so that undue risk, such as use of drugs or alcohol, is minimized.

Eligible participants who completed the baseline interview, STI testing, and the prevention workshop were randomly assigned to either the two intervention arms or the control group. Randomization was double-blind until the time of assignment; afterwards, blinding was not

possible given the nature of the intervention. All participants will be followed for the duration of the 12-month intervention.

All eligible men took part in a standard 3-hour HIV education workshop after completing baseline measures, and before random assignment to a research arm. All received HIV/STI testing at Clinica Condesa; those infected were offered treatment (for curable STI). Chronic STIs such as HIV and Hepatitis B were tested but were not used for the conditioning. Any participant that became HIV positive can continue in the trial, and was referred to treatment as indicated by the Mexico City treatment guidelines.

There was also a standard 15 min. counseling session after receipt of baseline STI results. The STI testing and counseling was conducted at Clinica Condesa (largest HIV clinic in Mexico City with over 5000 patients on HIV treatment) in collaboration with the Mexican School of Public Health/National Institute of Public Health (INSP) through the Consortium of HIV Research (CISIDAT), and Brown University.

**PUBLIC HEALTH RELEVANCE:** The overall objective of the current application is to implement a pilot project offering conditional economic incentives (CEI) for HIV/STI prevention among male sex workers (MSW) in Mexico City, to test feasibility and acceptability, and to gather preliminary evidence on effects sizes to inform a future efficacy trial. CEI are an innovative structural approach for HIV prevention, which so far has not been tested in concentrated epidemic settings.

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