

# HIV prevention measures must include behavioral strategies to work, says APA

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A drug that has been shown to prevent HIV infection in a significant number of cases must be combined with behavioral approaches if the U.S. health care establishment is to succeed in reducing the spread of the virus, according to the American Psychological Association.

"Exclusive reliance on a drug to prevent HIV or any sexually transmitted disease could actually result in a worse outcome if those at risk don't understand how their own behavior affects treatment," said Perry N. Halkitis, PhD, chair of APA's Committee on Psychology and AIDS. "We know that [medical intervention](#) depends on human behavior. The fact that only 28 percent of HIV-positive Americans in care achieve full [viral suppression](#) suggests very clearly that any medical intervention depends fully on behavioral as well as social and political factors."

A [Food and Drug Administration](#) panel recommended on May 10 that the FDA approve the drug Truvada to prevent [HIV infection](#). APA has been monitoring the use of this and other drugs to prevent and treat HIV/AIDS. While heartened by the addition of Truvada to the treatment mix, APA believes [HIV prevention](#) treatment must include both medical and behavioral approaches in order to succeed. In February, APA passed a resolution emphasizing the need for prevention research that incorporates strategies to deal with mental health, and substance abuse issues, behavior change and adherence. Entitled "Combination Biomedical and Behavioral Approaches to Optimize HIV Prevention," the resolution calls upon Congress, the executive branch and other governmental and nongovernmental agencies to increase support for

further research to identify and disseminate effective strategies to prevent and treat HIV and other sexually transmitted infections.

"Truvada by itself is not a magic bullet," Halkitis said. "The research to date shows that individuals taking the drug have had challenges adhering to the need to take it every day. It's also important for anyone taking it as a [preventive measure](#) to continue to practice safe sex. These are all behaviors that need to be guided by multidisciplinary health care teams that include psychologists." APA President Suzanne Bennett Johnson, PhD, agreed, warning. "if people taking the drug are not fully adherent and then contract HIV, that could lead to drug resistance."

APA's resolution cites research that shows a combination of behavioral and biomedical approaches work best to prevent HIV and other sexually transmitted infections. It references a 2010 study that tested adherence to Truvada within a group of men at high risk for infection, which found that 91 percent of those who later tested positive for HIV showed no detectable levels of the drug in their bloodstream, meaning they were not taking the drug as prescribed.

The resolution also points out that drugs "may be out of reach for certain populations (e.g., human trafficking victims, sex workers, people living in poverty, children, etc.)." According to news reports, [Truvada](#) costs between \$11,000 and \$14,000 per year, making it inaccessible to many.

Provided by American Psychological Association

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