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Developing and testing of an interactive internet-based intervention to reduce sexual harm of sexualised drug use (‘chemsex’) among men who have sex with men in Hong Kong

Submission date
15/03/2021

Recruitment status
No longer recruiting

Registration date
17/03/2021

Overall study status
Completed

Last Edited
09/01/2023

Condition category
Infections and Infestations

[X] Prospectively registered
[X] Protocol
[_] Statistical analysis plan
[X] Results
[_] Individual participant data

Plain English summary of protocol

Background and study aims
Sexualised drug use, known as 'chemsex' or 'chemfun', is the practice of intentionally using illicit drugs before or during sexual activates to enhance sexual arousal and pleasure. This practice, however, poses harmful risks to sexual health. Chemsex is common among men who have sex with men (MSM). Chemsex has been found to increase the likelihood of engaging in other risky sexual behaviours that might increase the spread of sexually transmitted infections (STIs) and HIV.

We propose this trial because chemsex, which is an emerging issue among MSM, substantially increases the risk of HIV and STIs. In spite of this, there has been very limited research evaluating the effectiveness of interventions or health promotion programmes that specifically aim to reduce the intention to engage in chemsex and the actual chemsex behaviours among MSM.

Who can participate?
Men who have sex with men aged over 18 years.

What does the study involve?
Participants will be allocated to one of two groups, with an equal chance of being in either group (like tossing a coin). Participants and researchers will not have a choice in the treatment given. Participants in the first group will receive a web-based treatment containing interactive content that aims to:
1. Lower the desire to use drugs at sex by enhancing participants’ knowledge of chemsex, including negative health impacts, risks, social stigmas, and legal consequences
2. Foster a positive attitude towards consistent condom use
3. Foster a positive attitude toward regular HIV/STI testing
4. Increase the self-efficacy of refusing chemsex

5. Improve participants' perceived self-efficacy in making informed decisions on HIV/STI prevention in both sober and drug-influenced sex
6. Set expectations that consistent condom use and regular HIV/STI testing are normative

The second group will receive only web-based information without sexual health components.

Participants in both groups will be evaluated before starting the web-based treatment and three months after starting the web-based treatment.

What are the possible benefits and risks of participating?
One possible benefit is that participants can enhance their sexual health knowledge. There is no significant risk in the study.

Where is the study run from?
School of Nursing, University of Hong Kong (Hong Kong)

When is the study starting and how long is it expected to run for?
From June 2020 to February 2022

Who is funding the study?
Council for the AIDS Trust Fund, Hong Kong (Hong Kong)

Who is the main contact?
Dr Edmond Pui Hang Choi, h0714919@connect.hku.hk

Contact information

Type(s)
Scientific

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Additional identifiers

EudraCT/CTIS number

Nil known

IRAS number

ClinicalTrials.gov number
Nil known

Secondary identifying numbers
Nil known

Study information

Scientific Title
Developing and testing of an interactive internet-based intervention to reduce sexual harm of sexualised drug use ('chemsex') among men who have sex with men in Hong Kong

Study objectives
Participants receiving the internet-based intervention will be more likely to exhibit better self-efficacy in refusing risky sexual behaviours and chemsex, lower intention to engage in chemsex and chemsex behaviours, higher condom use consistency, and more HIV and STI testing, compared to MSM in the control group.

Ethics approval required
Old ethics approval format

Ethics approval(s)
Approved 28/10/2020, Institutional Review Board of the University of Hong Kong/Hospital Authority Hong Kong West Cluster (Room 901, 9/F, Administration Block, Queen Mary Hospital, 102 Pokfulam Road, Hong Kong; +852 2255 4086; hkwirb@ha.org.hk), ref: HKU/HA HKW IRB: UW 20-650

Study design
Randomized controlled trial

Primary study design
Interventional

Secondary study design
Randomised controlled trial

Study setting(s)
Internet/virtual

Study type(s)
Prevention

Participant information sheet
Not available in web format, please use contact details to request a participant information sheet.

Health condition(s) or problem(s) studied
Safe sex to prevent sexually transmitted infections (STI)

Interventions
Participants will be randomly assigned to either the intervention group or control group via computer-generated block randomisation (with blocks of size 4) on a 1:1 randomisation ratio; no stratification will be applied. Men who have sex with men will be recruited and randomly allocated into either the intervention (n = 125) or control group (n = 125). Subjects in the intervention group will receive the web-based intervention containing interactive content that aims to:
1. Lower the desire to use drugs at sex by enhancing participants' knowledge of chemsex, including negative health impacts, risks, social stigmas, and legal consequences
2. Foster a positive attitude towards consistent condom use
3. Foster a positive attitude toward regular HIV/STI testing
4. Increase the self-efficacy of refusing chemsex
5. Improve participants' perceived self-efficacy in making informed decisions on HIV/STI prevention in both sober and drug-influenced sex
6. Set expectations that consistent condom use and regular HIV/STI testing are normative

Participants in the control group will receive a web-based intervention without any sexual health information and without any interactive components. The contents for the control group will only include educational materials on general health information.

Intervention Type
Behavioural

Primary outcome measure
Self-efficacy in refusing risky sexual behaviours and chemsex as measured using the Chinese version of Drug Avoidance Self-Efficacy Scale (DASES), the Self-Efficacy for Sexual Safety scale, and the traditional Chinese version of the Condom Self-Efficacy Scale (CSES) at baseline and 3 months

Secondary outcome measures
1. Intention to have chemsex measured using participant interview at baseline and 3 months
2. Actual engagement in chemsex measured using participant interview at baseline and 3 months
3. Practice of condomless sex both sober and drug-influenced measured using participant interview at baseline and 3 months
4. The number of HIV/STI tests in the previous three months measured using participant interview at baseline and 3 months

Overall study start date
29/06/2020

Completion date
16/02/2022

Eligibility

Key inclusion criteria

1. Cisgender men who have sex with men
2. Aged ≥18 years
3. Internet access
4. Able to read and understand Chinese

Participant type(s)
Other

Age group
Adult

Lower age limit
18 Years

Sex
Male

Target number of participants
250

Total final enrolment
316

Key exclusion criteria
Does not meet inclusion criteria

Date of first enrolment
15/06/2021

Date of final enrolment
05/11/2021

Locations

Countries of recruitment
Hong Kong

Study participating centre
School of Nursing, The University of Hong Kong
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Sponsor information

Organisation
University of Hong Kong

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Sponsor type
University/education

Website
http://www.hku.hk/

ROR
https://ror.org/02zhqgq86

Funder(s)

Funder type
Government

Funder Name
Council for the AIDS Trust Fund, Hong Kong

Results and Publications

Publication and dissemination plan
Results will be published in peer-reviewed journals.

Intention to publish date
30/06/2022

Individual participant data (IPD) sharing plan

The data sharing plans for the current study are unknown and will be made available at a later date

IPD sharing plan summary

Data sharing statement to be made available at a later date

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Protocol article		13/04/2021	15/04/2021	Yes	No
Results article	primary and secondary results	05/01/2023	09/01/2023	Yes	No