

BACKGROUND:

- ★High prevalence of SDU has been described in several samples of men who have sex with men (MSM).
- ★Mindfulness-based interventions (MBI) increase well-being and enhance-stress management.

OBJECTIVE:

To assess the effectiveness of a mindfulness-based program, as a complement of individual psychosocial interventions in a sample of MSM engaged in sexualized drug use (SDU).

METHODS:

- ★**Participants:** The MBI was offered to 12 MSM in an interdisciplinary psychosocial program in Apoyo Positivo (NGO,Madrid). 5 of them were enrolled (scheduling issues).
- ★**Assessment Procedures:** All of 12 participants completed self-administered questionnaires prior to intervention (emotional & mindfulness related variables). At the end of the intervention those 5 participants completed the same as the baseline.

TABLE 1. Psychological & mindfulness assessment

MEASURES
Hospital Anxiety and Depression scale (HADS)
Perceived Stress Scale (PSS)
Positive and Negative Affect Schedule questionnaire (PANAS)
Five Facets of Mindfulness Questionnaire (FFMQ)
Self-Compassion Scale (SCS)

- ★**Mindfulness-based Intervention:** 2-hour group sessions per week and homework per day, from April to June, 2017. We designed a variation of the MBSR approach focused mainly on dealing with stress, including also some issues from Mindfulness-based Cognitive Therapy (MBCT) and Mindful Self-compassion (MSC). Session themes & main practices are displayed in Table 2.

TABLE 2. Content of the sessions in our MBI

1	What is Mindfulness & Automatic Pilot: Raisin meditation
2	Perceptions and reality: Body Scan Meditation
3	Awareness and breathing & Mindful yoga: Walking Meditation & Yoga (I)
4	Stress: responding vs. reacting & Finding your compassionate voice: One Minute Meditation & Loving-kindness Meditation
5	Coping with stress & Mindful yoga: Full Yoga Session (II)
6	Emotional regulation & Thoughts are not facts: 3 minute breathing space & Labelling Thoughts/Emotions & Mountain Meditation
7	Managing difficult emotions & Self-compassion & Self-care: The Soften-Allow-Soothe & Compassionate Embrace
8	Social- support & Developing a personal practice: Final Meditation

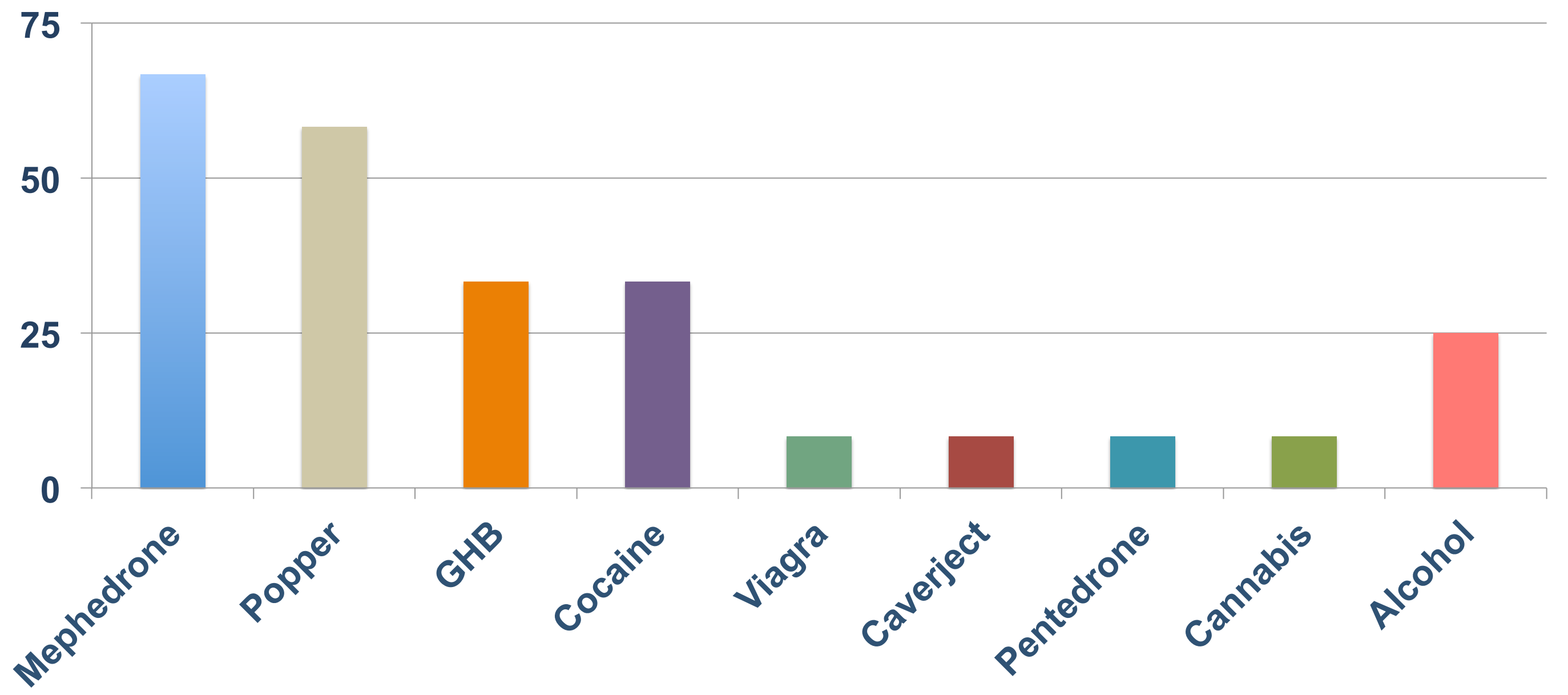
- ★**Statistical Procedures:** The non-parametric Wilcoxon-Singed Rank test was conducted to calculate the differences between pre and post intervention.

BASELINE CHARACTERISTICS:

Table 3. Baseline of a sample of 12 assessed MSM-SUD

	DATA
Age. Median (IQR)	37 (30-40)
HIV+. N (%)	10 (83.3)
Spanish born. N (%)	8 (66.7)
Completed secondary or college N (%)	12 (100)
Working full time. N (%)	8 (66.7)
Monthly income ≥ 1000 euros. N (%)	7 (58.3)
Living with. N (%)	
Alone	4 (33.3)
Couple or friends	5 (41.6)
In a stable relationship. N (%)	2 (16.7)
Slamming ever in life. N (%)	7 (58.3)

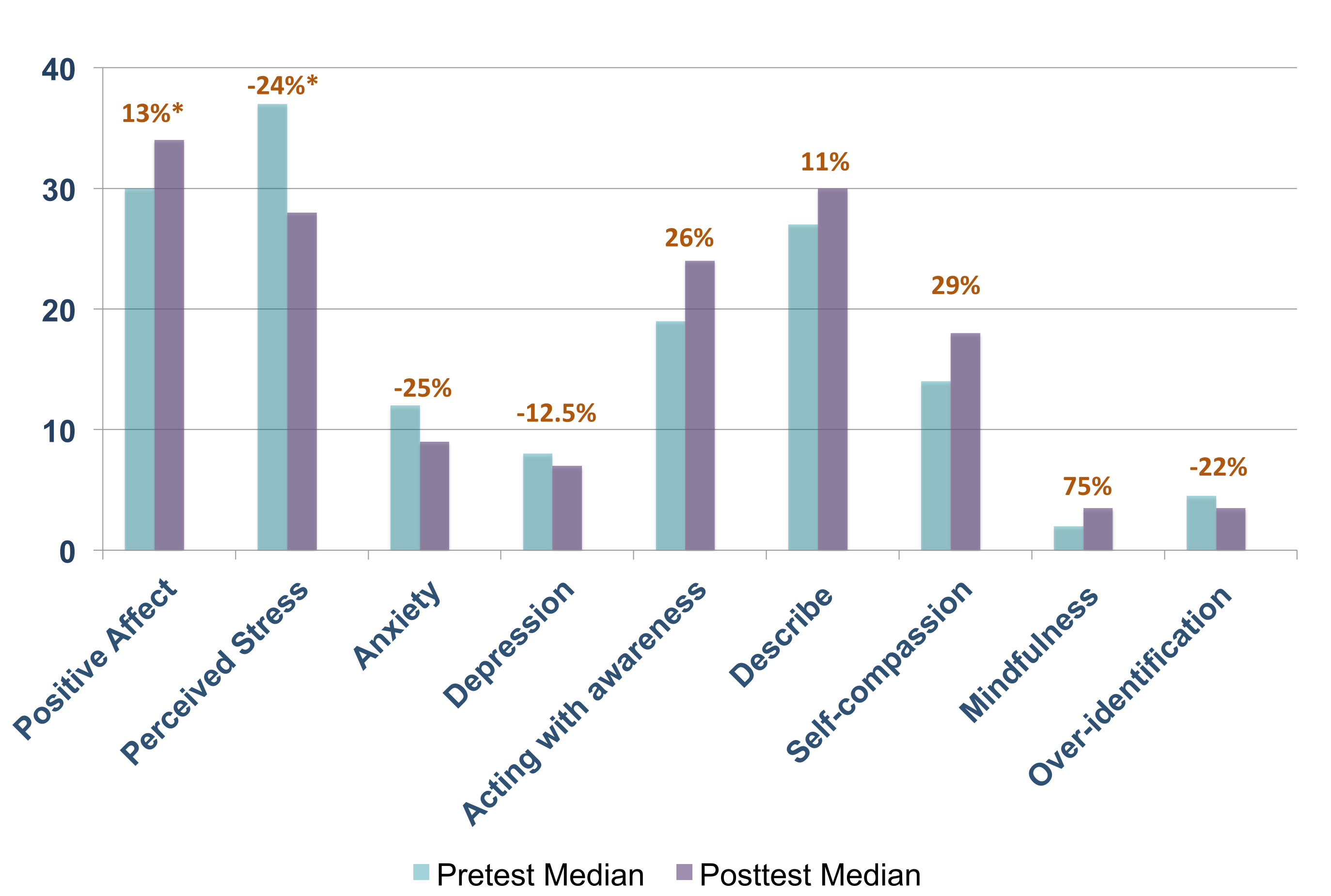
Graphic 1. Main drugs used during sex. N=12 (%)



RESULTS:

After the intervention, participants significantly increased positive affect and reduced perceived stress. The following categories all demonstrated a positive trend toward statistical significance: anxiety, depression, acting with awareness, describing, self-compassion, mindfulness and over-identification (Graphic 2). All participants revealed high levels of satisfaction (median (IQR)=9 (8-9.5)) on a 1-10 rating scale. No participant had any prior meditation experience.

Graphic 2. Pre and post-intervention differences. N=5 (%)



CONCLUSIONS:

Participants in our MBI appear to have experienced therapeutic changes in distress and mindfulness related variables. MBI in MSM engaged in SDU in addition to specific individual psychotherapy might be a potential treatment strategy.