**THE EFFICACY OF PSYCHOSOCIAL INTERVENTIONS TO REDUCE SEXUAL AND DRUG BLOOD BORNE VIRUS RISK BEHAVIOURS AMONG PEOPLE WHO INJECT DRUGS: A SYSTEMATIC REVIEW AND META-ANALYSIS**

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**Backgound:** Preventing people who inject drugs (PWID) transmitting or becoming infected with blood borne viruses such as HIV, Hepatitis C and Hepatitis B is an important public health issue. Opiate substitution therapy (methadone or buprenorphine) and needle exchanges have reduced these viruses but psychosocial interventions could further prevent their spread. **Aims:** To determine the efficacy of psychosocial interventions (e.g. CBT, contingency management, skills training) in reducing sexual and drug risk behaviours among PWID compared to control interventions.

**Methods:** A systematic review was conducted and a meta-analysis performed, using a random effects model. Randomized control trials (RCTs) published during 2000- May 2015 in MEDLINE, PsycINFO, CINAHL, Cochrane Collaboration and Clinical trials were included.

**Results:** 31 and 25 RCTS were included in the systematic review and meta-analysis respectively. Psychosocial interventions were more efficacious in reducing any injecting risk behaviour (standardized mean difference (SMD) –0.29; 95% confidence interval (CI) –0.43, –0.15), sharing of needle/syringes (SMD –0.44; 95% CI –0.71, –0.17), sharing other injecting paraphernalia (SMD –0.21; 95% CI –0.33, –0.08) and unprotected sex (SMD –0.30; 95% CI –0.58, –0.02).

**Conclusions:** Psychosocial interventions are effective in reducing sexual and drug risk behaviours among PWID. Such interventions should be included with other harm reduction approaches (e.g. OST, needle/syringe exchange) to address blood borne virus transmission among PWID. Limitations include the heterogeneity of interventions.

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