

RESEARCH AND TECHNICAL SUPPORT AT RTI INTERNATIONAL

HIV Prevention



Government and private-sector clients around the world rely on RTI for independent, objective, and scientifically rigorous research and technical services in support of HIV prevention programs. We work to ensure that programs are adapted to the communities they serve.

RTI supports programs that focus on key issues in prevention and promotion of behavior change, including

- Programs for men who have sex with men
- Programs for intravenous drug users and other substance abusers
- Prevention of mother-to-child transmission
- Condoms and male circumcision
- Routine and voluntary counseling and testing
- Management of sexually transmitted infections
- Community mobilization and community-based interventions.

We design, develop, and field-test HIV prevention interventions that can be adapted to those most at risk. We work to integrate HIV prevention into broader systems for health care delivery and education, as well as other local and national efforts. Our research approach includes

- Community advisory boards and local experts
- Field sites located in inner-city and rural communities
- Participant recruitment via snowball sampling, respondent-driven sampling, and outreach workers who are well known in the community
- Referrals to community health and social services
- Follow-up assessments to determine long-term effects.

Capabilities in HIV Prevention

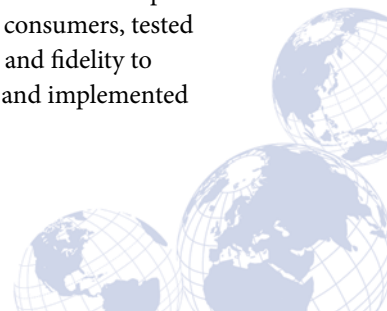
- Adaptation of evidence-based interventions
- Health communication and social marketing research
- Randomized controlled trials to determine intervention effectiveness
- Social epidemiological methods
- Social and sexual network analysis

Key Project Highlights

With decades of experience in the field, we understand how to launch, scale up, and sustain successful programs. We have particular experience with interventions that target high-risk populations or specific social sectors, and with community-based interventions.

Evaluating Social Marketing Campaigns for HIV Prevention

Since 2004, RTI has assisted the CDC's Division of HIV/AIDS Prevention in evaluating materials and campaigns that communicate evidence-based recommendations related to HIV testing and behavioral screening. We have conducted formative research to guide the development of materials for both providers and consumers, tested materials to assure appropriateness and fidelity to campaign objectives, and designed and implemented process and outcome evaluations.



Collaborative HIV/STD Prevention

Working on behalf of the U.S. National Institute of Mental Health (NIMH), RTI serves as the coordinating center for a two-armed, randomized, community-level trial in China, India, Peru, Russia, and Zimbabwe. The trial tested the effectiveness of the Community Popular Opinion Leader (C-POL) intervention model in reducing risk behaviors that can increase HIV and STI incidence. C-POLs serve as behavior change agents among friends and neighbors, to strengthen norms about safer sexual behavior and encourage risk reduction. Currently, RTI is working with NIMH and the study sites to analyze the data and document the lessons learned. Study results will be released to provide guidance for further global research on preventing the spread of HIV and other STIs.

Adapting Our “Best Evidence” Intervention

With funding from the U.S. National Institute on Drug Abuse (NIDA) and the National Institute on Alcohol Abuse and Alcoholism, RTI developed, implemented, and evaluated innovative interventions that target hard-to-reach populations such as crack-using urban African-American women in the United States. We then adapted these interventions for Black and Coloured South African women who abuse alcohol and other drugs.

The original woman-focused study has been operating for 10 years, and the U.S. Centers for Disease Control and Prevention (CDC) has found it to be a “best evidence” HIV behavioral prevention intervention. RTI has recently adapted this intervention for pregnant African-American women who abuse drugs and for injecting drug-using women in Russia. We are also adapting it for at-risk African-American teens, as well as conducting cost and cost-effectiveness analyses of several of these studies.

U.S. Department of Defense HIV/AIDS Prevention Program (DHAPP)

RTI is providing monitoring and evaluation expertise to the DHAPP for their 73 country programs worldwide. We have developed annual and semi-annual reports, as well as reports specific to each Combatant Command. RTI also trained field

staff—country program managers and uniformed personnel—in DHAPP reporting requirements, and we provide support personnel for administrative assistance.

HIV Risk Among Women Who Use Methamphetamines

With funding from NIDA, RTI is studying the associations between methamphetamine use and HIV risk among women. We will develop recommendations for gender-specific and culturally appropriate interventions at the individual, interpersonal, and structural levels.

Combating HIV/AIDS in Ugandan Workplaces

With funding from the U.S. Department of Labor, RTI implemented a 4-year project to stem HIV infections in Ugandan informal-sector workplaces. The program supported four approaches:

- “ABC” HIV prevention methods
- Prevention of mother-to-child transmission
- Reduction of HIV/AIDS-related stigma and discrimination
- Mitigation of the impact of HIV/AIDS among workers and their families.

Working with local community- and faith-based organizations, RTI developed and implemented education and awareness campaigns that reached nearly a quarter million informal-sector workers and family members. We successfully selected and trained hundreds of peer educators to provide HIV/AIDS outreach to their fellow workers, typically on a one-on-one basis. The program also strengthened the capacity of 45 local community-based organizations to better implement HIV/AIDS prevention programs.

For more information, please contact

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