



# NC CoOp Notes

*A newsletter serving the communities of Durham, Wake, Orange, and Johnston Counties, North Carolina*

Vol 7, No. 1

Summer 2006

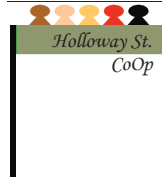
## Working in the Community, Supporting People Where They Are

The mission of the CoOp Studies is to help substance abusers and their families in community-based settings. The aims of our research include reducing substance use, HIV/STI/HCV-risk, sexual violence, and comorbid conditions; and increasing risk protective factors that improve health and well-being.

Our work involves collaborating with communities to address social problems by:

- ♦ using nontraditional outreach methods to reach populations that typically do not access services,
- ♦ fostering community participation to develop and evaluate appropriate interventions, and
- ♦ sharing the findings with the community

Under the direction of Dr. Wendee Wechsberg, we have field sites in Durham, Smithfield and Raleigh, North Carolina, and in South Africa.. In each community, we forge partnerships between RTI's scientific expertise and community agencies and community advisory boards made up of citizens and professionals dedicated to improving the lives of substance abusers.

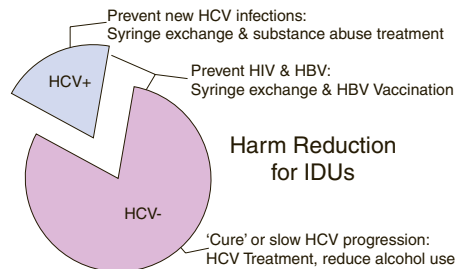


## Project Spotlight: Holloway Street CoOp—Curbing Alcohol Use Among IDUs

Infection with the hepatitis C virus (HCV) and heavy alcohol use are two potential consequences of substance abuse that negatively affect the health and quality of life of injecting drug users (IDUs):

- ♦ HCV infection is common among IDUs, with 50% to 90% of IDUs infected in cities around the world. HCV causes liver disease, and one in five persons infected progresses to cirrhosis within 20 years.
- ♦ From a quarter to a half of IDUs also drink alcohol heavily, which has been shown to impede current HCV treatments and to have its own negative effects on liver function and general quality of life.

The Holloway Street CoOp provides IDUs with a motivational intervention to help reduce a range of HCV- and HIV-related risk behaviors, including heavy drinking.



Since July 2003, 858 out-of-treatment IDUs have enrolled in the study at our Raleigh and Durham field sites. Baseline data show that more than half of these IDUs were HCV positive, and 57% met criteria for either “harmful” or “hazardous” drinking. These individuals scored significantly lower on all quality of life subscales, including those which measured physical functioning, bodily pain, social functioning, and mental health.

Preliminary results from 365 participants at 6-month follow-up suggest that this motivational intervention is impacting the drinking habits these IDUs and that the intervention shows promise as a viable tool for community-based organizations and health care professionals to help HCV-infected IDUs live longer, healthier lives whether or not they are receiving treatment for hepatitis.

The Holloway Street CoOp is funded under grant number RO1 DA13763-01 A2 from NIDA.

## Women's Studies

### Women's CoOp II



Following the success of the first Women's CoOp study in Durham and Wake Counties from 1999–2002, Dr. Wechsberg and the project staff began a follow-up study in March 2004.

This study aims to determine the longer term effects of the original Women's CoOp and offer booster sessions for risk reduction. In this study, women are

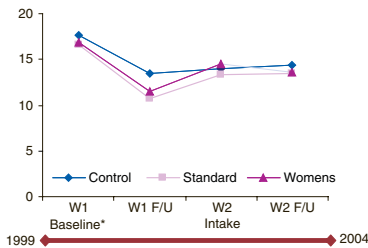


interviewed at intake and at 6-, 12-, and 18-month follow-ups. In addition, in-depth interviews and focus groups are conducted with a smaller sample of women.

To date, the following study milestones have been achieved:

- ◆ 429 women have reenrolled in the follow-up study (from a possible 762)
- ◆ 292 women have returned for their 6-month follow-up appointment
- ◆ 137 women have returned for their 12-month follow-up appointment
- ◆ 120 have returned for their 18-month follow-up appointment

Although about one quarter of the women report that they have stopped using crack, women in all three treatment conditions (woman-focused, standard, and control) are using crack an average of 15 days in the past month.



As described by one woman in our study, "... it's like an ongoing process, and I'm not going to get to the end because I keep going the same old thing over and over again. And I know I can stop if I really I wanted to, but it's like I don't want to...you feel like you're missing something."

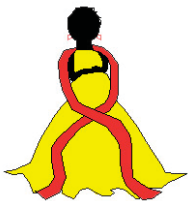
The findings have raised important questions that need to be investigated in future research:

- ◆ Why do some women stop using crack and more women have long-term crack careers?
- ◆ What environmental factors lead to relapse and higher risk behaviors?
- ◆ How can barriers to treatment be reduced for African-American women?
- ◆ Should boosters be more frequent and more intense?
- ◆ Are our expectations for recovery from crack too high?

The NC Women's Cooperative Agreement for the Woman-Focused HIV Prevention/Intervention (NC Women's CoOp) is funded under grant number RO1 DA11609 from NIDA.



## Pregnant Women's CoOp



Dr. Wechsberg recently received a grant award to modify and pilot test the Women's CoOp intervention with pregnant African-American women in substance abuse treatment. This new study will adapt and modify the Women's CoOp to focus on pregnant African-American women

- ◆ who use crack,
- ◆ are currently in substance abuse treatment, and
- ◆ are at risk for HIV or are HIV positive.

The project team will pilot test this newly developed intervention. Data collection will begin in fall 2006, and we anticipate enrolling 100 women into a randomized trial comparing the woman-focused intervention with a treatment as usual.

To get input on the issues affecting them and how these issues should be addressed in the intervention, we have conducted focus groups with HIV-positive and HIV-negative women who use drugs. To obtain feedback to inform the intervention as well as recruitment and retention strategies, we held two expert panel meetings with area physicians, substances abuse treatment providers, and others who were familiar with the study population.

The Woman-Focused HIV Prevention with Pregnant African-Americans in Treatment (Pregnant Women's CoOp) is funded under grant number 1 RO1 DA020852-01 from NIDA.



## Latina Health Project

To reach and serve Latinas in the Triangle area, we are adapting the Women's Health CoOp intervention for Spanish-speaking women. The Latina Health Project aims are to develop a community-based intervention to reduce risks of depression, HIV, and intimate partner violence among Latinas.

The intervention will include elements of

- ◆ psychoeducation,
- ◆ skill-building tasks,
- ◆ social support, and
- ◆ empowerment.

It will also provide links and referrals to health and social services.



## Donations Please!

We are in need of donations for the North Carolina field sites, including adult, children's and baby clothing; books; magazines; toiletries, etc. Your donations are greatly appreciated and will be put to good use! Please contact Rachel Middlesteadt Ellerson at 919-541-7255 or email [rachelm@rti.org](mailto:rachelm@rti.org) about ways you can donate. Thank you so much!



## Our Newest Field Site in Johnston County

Ride down Highway 70 South out of Raleigh for about half an hour and you will come to Smithfield, North Carolina, population around 12,000. The town, which sits in one of the state's most agricultural counties, is also home to SATEI's newest community-based project, the Rural-Urban Health Study, which began in December 2005 and has enrolled more than 65 participants to date. The site, located on South Brightleaf Boulevard and staffed by two Johnston County natives, Elizabeth Parrish and Yulonda Moody, held an open house on June 29, 2006, for area agencies working with groups at risk for HIV.

With the help of experts in Latina health, we are developing the intervention and will translate the focus group materials into Spanish. In July and August 2006, we will conduct focus groups with 10 expert reviewers and 40 Spanish-speaking adult Latinas who are at-risk for depression, HIV, and intimate partner violence. In September 2006, we will submit an NIH grant application to further develop and pilot test the intervention.

The Latina Health Project is funded by grants from the UNC Center for AIDS Research and RTI International.



## Family Studies

### FORT

Families Overcoming Risks Together



(FORT) is a family health study that started data collection in June 2005 in the Durham field site. Dr. K.K. Lam, Cassie Williams, and the FORT team have developed a family intervention to help mothers prevent drug use and risky sex behaviors among their children aged 8 to 12.

The intervention consists of weekly sessions for mothers, children, and families. To date, 94 families have enrolled, and 54 families have returned for their 3-month follow-up appointment. Preliminary follow-up focus group findings suggest that the FORT intervention shows promise for positive familial change:

Families Overcoming Risks Together is funded under grant number 1R21 DA17452-01 from NIDA.



### PAWS



The Partnership for Adolescent Wellness Study (PAWS) completed nearly 2 years of data collection in March 2005. Data were collected in the Durham and Wake field sites.

Dr. Lam and the PAWS team

conducted interviews with 208 mothers who were current crack users and their adolescent children (aged 12 to 17), and collected data from teachers, community providers, and faith-based leaders.

Preliminary data suggest that youth, family, peer, and community factors influence risk behaviors among youths. Currently, we are working with CDC to analyze the data and prepare manuscripts to report the findings.

We also held a community provider forum in March 2006 to share the findings about the multiple influences on youth behaviors and to help develop recommendations for how best to serve these families.

The Partnership for Adolescent Wellness Study (PAWS) is funded under Cooperative Agreement number R18/CCR420942 from the Centers for Disease Control and Prevention.



## Coming Soon to the Family CoOp

This summer, Dr. Lam and the project team will evaluate a screening instrument for youth substance use in 12- to 15-year-olds and their parents in neighborhood settings that offer health services. Through a NIDA grant, Danya International has recently developed the Adolescent Drug and Alcohol Screening Instrument (ADASI), a new screening instrument that offers adolescents a private, computer-administered drug and alcohol screening that gives personalized feedback about their health risk behaviors and how to reduce these risks.

The Adolescent Drug and Alcohol Screening Instrument (ADASI) is funded under subcontract agreement number Dii-0071-01-TDAPA-RTI.

At our Durham site, the project team will also field test a new parenting video for parents of 10- to 14-year-olds. Through a CDC contract, Danya International has recently developed the Parent Child Communication Video (PCCV) and an accompanying booklet for parents to help them talk more effectively to their children about how to avoid health risk behaviors. The purpose of this study is to determine whether the experience of watching the video and reading the booklet

- ◆ increases parents' knowledge about communication strategies,
- ◆ increases parents' comfort level when talking to their child(ren), and
- ◆ initiates any behavior change.

The Parent Child Communication Video Project (PCCV) is funded under subcontract agreement number Dii-0147-PCCV-RTI.



### Rural-Urban Health Study

This project, part of the Sexual Acquisition and Transmission of HIV Cooperative Agreement Program (SATH-CAP), is studying HIV/STI transmission from high-risk to low-risk groups. The study targets for interview hard-drug users (i.e., methamphetamine, cocaine, crack, and heroin), men who have sex with men, and sexual partners of these groups. Enrollment began in Wake and Durham Counties in September 2005 and in Johnston County in December 2005. As of March 31, 2006, 475 individuals have been enrolled in the study.

Several interesting preliminary findings have emerged:

- ◆ to date, the HIV rate in this study population (14%) is significantly higher than in any of our previous studies;
- ◆ the number of men reporting sex with both men and women is higher than anticipated, indicating potential pathways for HIV from traditionally high-risk groups to the population at large; and
- ◆ drug use (particularly stimulants) is common among study participants and linked to other risk behaviors, such as group sex, sex trading, and sex while high.

We expect to open another field site in Chatham or Vance County by the end of summer 2006. In addition to quantitative data collection, qualitative interviewing continues in the field, and a new component to define and study the broader social, sexual, and drug-using networks in these counties will launch this summer.

The Sexual Acquisition and Transmission Agreement Project (SATH-CAP) is funded under grant number 1U01DA.017373-01 from NIDA.



**For more information on these programs, please contact:**

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 Dr. Wendee Wechsberg.....919-541-6422  
 Women's CoOps & South Africa CoOps.....[wmw@rti.org](mailto:wmw@rti.org)  
 Dr. K.K. Lam.....919-485-5603  
 PAWS, FORT, ADASI, & PCCV.....[kklam@rti.org](mailto:kklam@rti.org)  
 Dr. William Zule.....919-541-2797  
 Holloway Street CoOp & SATH-CAP.....[zule@rti.org](mailto:zule@rti.org)  
 Dr. Rhonda Karg.....919-316-3516  
 Latina Health Project.....[rkarg@rti.org](mailto:rkarg@rti.org)

**Employment Opportunities at Study Sites**

For more information, please contact  
 Rachel Middlesteadt Ellerson:  
 919-541-7255 or [rachelm@rti.org](mailto:rachelm@rti.org)

**The Important Role of our Community Advisory Board**

The Community Advisory Board (CAB) is made up of representatives from the community, NGOs, government, and professionals from Durham, Wake, and Johnston Counties. CAB members provide input and valuable support to help make our work more effective. The CAB can help identify other resources and services for participants in the CoOp studies, identify gaps and/or difficulties in the projects, and help to interpret the findings. If you are interested in serving on our CAB and having the opportunity to work on cutting-edge research, please contact Rachel Middlesteadt Ellerson at 919-541-7255 or email [rachelm@rti.org](mailto:rachelm@rti.org).

**Remaining 2006 CAB Meeting Dates: September 12, December 12**

**Active CAB Members**

Craig Brookins.....North Carolina State University  
 Jacqueline S. Clements..... Lincoln Community Health Center  
 Tad Clodfelter, Jr..... Southlight  
 Jacquelyn Clymore..... Alliance of AIDS Services-Carolina  
 Ted FitzGerald..... Family Health International  
 Gibbie Harris..... Wake County Health Department  
 Trudy Harris-Adeeyo..... Southlight  
 Rev. Dumas A. Harshaw, Jr.,.....First Baptist Church Raleigh  
 Franklin Ingram..... Community Member at Large  
 Jeri Jefferys..... Women's Center of Wake County  
 Stella S. Kirkendale..... Family Health International  
 Floyd Laisure..... John Avery Boys and Girls Clubs  
 Ann Milligan-Barnes..... Durham County Health Department  
 Rev. Michael D. Page..... Antioch Baptist Church  
 Grudun Parmer..... Durham County Criminal Justice Resource Center  
 Joyce Snipes..... Durham County Health Department  
 Yvonne Torres..... Wake County Health Department  
 Linda Warren..... Community Member at Large  
 Samuel Williams..... Wake County Health Department

**To reach us in the community:**

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Telephone: 919-838-0494

231-B Southeast Street, Raleigh, NC 27601

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 Elsie McKeithan Valerie Smith  
 Joyce Stancil-Williams Cherri Swails

**Johnston County Field Site**

Telephone: 919-963-5025

201-1 South Brightleaf Boulevard, Smithfield,  
 NC 27577

**Field Staff**

Yulonda Moody Elizabeth Parrish

**Durham County Field Site**

Telephone: 919-956-2854 or 919-682-3354

Antioch Baptist Church

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 Theresa Frye Danielle Gary  
 Felicia Kelly-McClain Tia Rouse  
 Alisha Scott B.J. Tatum  
 Brenda Taylor Loretta Taylor  
 John Townsend Nichole Weedon  
 Alphonso Williams Elchico Williams



**New Web Site**

We are creating a new Web site with information about our community-based research efforts in North Carolina and South Africa. It will highlight ongoing projects investigating the impact of HIV and HCV and substance use on underserved populations, such as African-American women, rural men who have sex with men, and African-American pregnant women. In the near future, we will be adding links to our publications and presentations. Look for our new Web site in August!

[www.rti.org/satei](http://www.rti.org/satei)