



NC CoOp Notes

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

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Spring 2007

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, Siler City 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.

CDC has new recommendations for human immunodeficiency virus (HIV) testing intended for all health-care providers in the public and private sectors.

For patients in all health-care settings

- ♦ HIV screening is recommended for patients in all health-care settings after the patient is notified that testing will be performed unless the patient declines (opt-out screening).
- ♦ Persons at high risk for HIV infection should be screened for HIV at least annually.
- ♦ Separate written consent for HIV testing should not be required; general consent for medical care should be considered sufficient to encompass consent for HIV testing.
- ♦ Prevention counseling should not be required with HIV diagnostic testing or as part of HIV screening programs in health-care settings.

For pregnant women

- ♦ HIV screening should be included in the routine panel of prenatal screening tests for all pregnant women.
- ♦ HIV screening is recommended after the patient is notified that testing will be performed unless the patient declines (opt-out screening).
- ♦ Separate written consent for HIV testing should not be required; general consent for medical care should be considered sufficient to encompass consent for HIV testing.
- ♦ Repeat screening in the third trimester is recommended in certain jurisdictions with elevated rates of HIV infection among pregnant women.

For more information you can go to CDC Website or you can call CDC's National Prevention Information Network telephone number at 1-800-458-5231.



The Pregnant Women's CoOp is an extension of our intervention work in NC CoOp, NC Women's CoOp, and NC Women's CoOp II. Beginning this spring, we will conduct our interviews at drug treatment sites and at our long-standing Raleigh and Durham field sites.

We plan to recruit up to 100 women from several community-based treatment facilities in the Triangle area. Women are eligible for our study if they are:

- ♦ At least 16 weeks pregnant
- ♦ African-American
- ♦ Have used an illegal drug in the past 12 months
- ♦ Currently in some form of drug treatment (either in-patient or outpatient)

Our randomized clinical trial will allow us to determine whether our adapted intervention works well in a community setting. We also want to know whether there are any differences between women who got the intervention versus women who did not in terms of their substance use and HIV risk behaviors. If the intervention works, we want to know what aspects were particularly useful to women in the study.

The Woman-Focused HIV Prevention with Pregnant African-Americans In Treatment (Pregnant Women's CoOp) is funded under grant number 1R01 DA020852-01 from NIDA



Women's CoOp II

Data collection for Women CoOp II will wrap-up July 31st, 2007. Many of us have been working on this project for nearly 10 years now and are sorry



to see the end of this important study. At the same time, we are excited by the current and future

studies to adapt the Women's CoOp intervention for other populations in North Carolina, such as the Pregnant Women's CoOp (see notes below) and our plans for a Young Women's CoOp. To date, 450 women have completed Intake 1 and 399 completed Intake 2. 6-month follow-up 342; women have completed Intake I and 399 have completed Intake 2. Six month follow-ups we have 342, 12 month follow-ups we have 210 and 18 month follow-ups we have 164. Our follow-up rates are 80% for 6 months (n=342), 82% for 12 months (n=210) and 85% for 18 months (n=164). Our field staff will be in full force to relocate the remaining women during the final push of

Latina Health Project

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

The intervention will include elements of

- ♦ psychoeducation
- ♦ skill-building tasks
- ♦ social support and networking
- ♦ empowerment, and
- ♦ providing linkages to health and social services for Spanish-speaking clients

PCCV

What is the PCCV Project? PCCV stands for Parent-Child Communication Video. This is a short term project, so please don't miss out on your opportunity to participate!

The Centers for Disease Control (CDC) have funded Danya International, Inc., to create a new parenting video for African American and Latino parents of children ages 10 to 14. Danya International, Inc. has contracted with Dr. K.K.

MPY

Danya International recently developed the MPY as a new screening instrument that assesses youth risk behaviors and problems among adolescents (11-19 years) through a grant from the National Institute on Drug Abuse (NIDA). Dr. K.K. Lam

data collection. If you know of women who have been in our study, please spread to word!

Special thanks to Theresa Fry (Durham Co.) and Shirley Brown (Wake Co.) for their leadership at the field sites and Elchico Williams who has been working with us for over 7 years! Your efforts are greatly appreciated by us and the women who participate in our studies! Here are some comments two of our recent clients shared:

Enjoyed women's co-op program to the utmost. I learned a lot of things in different areas and I also felt comfortable talking to everyone. Much care and concern was showed also love from the heart. I would to thank everyone for their help.

I enjoyed doing the study, I sure do hope it help in the research. I was a terrible mess when I started. But today I am clean, have been clean one year. It took me 20 years to get clean. I love all the ladies here, great study, need more of them.



To learn more about the needs and barriers to care among newly immigrated Latinas in the Triangle, in the Summer and Fall of 2006 we gathered data from 10 experts in Latina health and 40 first-generation Latinas from the Triangle. Results of this formative work were used to begin adapting the Women's CoOp intervention into a 5-session community-based intervention for Spanish-speaking Latinas. In December 2006, we submitted an NIH grant application to further develop and pilot test the intervention with a sample of 100 newly immigrated Latinas.

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



Lam on several other projects over the past three years but this time she and her team are focused on testing this new parenting video. We are asking parents to let their voices be heard and get involved. Our goal is to get 115 parents of children ages 10 to 14 by the beginning of June.

If you are a parent with children between the ages of 10-14 call the Family CoOp field site at 919-682-3354 to schedule an appointment.



has received a subcontract from Danya to field test the MPY in Triangle area health clinics. This instrument offers adolescents a private, computer-administered screening that gives personalized feedback about their behavioral and



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 about ways you can donate.

Thank you so much!



As we do every year RTI is participating in the 2007 AIDS walk please check out the website for more information www.aidswalkandride.com

If you are interested in walking with us please contact Rachel Middlesteadt Ellerson at rachelm@rti.org or (919)541-7255. Keep in mind they are also looking for volunteers as well.

MPY (continued)

health risk behaviors and how to reduce these risks. We are very excited about setting up MPY sites in community centers and with some great youth providers.

To be eligible for this study you must be in a community health center, be between 11 and 19 years of age, provide written informed consent (self or parent, as applicable) for them to participate, provide informed, written assent to participate if a minor, be able to speak and read English, and be able to provide contact information. Youth of all racial and ethnic backgrounds will be invited to participate in the study.

For more information on the study please contact Cassie Williams at 919-316-3749 or cawilliams@rti.org.

ADASI

Data collection for the Adolescent Drug and Alcohol Screening Instrument was completed in November 2006. Dr. K.K. Lam and the entire project team want to extend a special THANK YOU to the participating sites who made our data collection efforts possible! During an 11 week period, we were able to enroll 172 youth (aged 12-15) in the study. This would not have been possible without the incredible support of the following sites:

- ♦ Biltmore Hills
- ♦ Boys Club of Wake County
- ♦ Cornwallis Housing Community
- ♦ Fayette Place Housing Community
- ♦ John Avery Boys and Girls Club
- ♦ McDougal Terrace Housing Community
- ♦ Wake Teen

FORT

As the FORT project comes to a close this month, Dr. K.K. Lam and her team would like to say a special thank you to all the field staff, peer consultants, and participants who have been involved with this project over the last year and a half. We have really enjoyed working together with moms and children aged 8-12 who attended the intervention, and helped them enhance communications, especially about drugs and sex, and to strengthen family relationships. Planning for next steps in reaching these families is underway.

M*A*S*H – Men's Attitudes on Sex and Health

Dr. Zule and RTI were recently invited to join a new cooperative agreement from the Centers for Disease Control and Prevention (CDC) to work with gay and bisexual men that use methamphetamine. The goals of the project, which is called M*A*S*H (Men's Attitudes on Sex and Health), are to help these men in the Raleigh-Durham area reduce their meth use or their risk for getting or spreading HIV while using meth. Other members of the cooperative agreement are operating in New York City, Los Angeles and San Diego, making our project unique in its focus on a smaller metro area where meth use patterns are less well studied.

Starting in the spring, M*A*S*H will run for two years out of our Wake County site. The first year will consist of interviews and focus groups to learn more about meth use and effectively involving gay/bisexual men in substance use research. In the second year, it will recruit 80 men to test a pilot motivational intervention to reduce their meth use and/or risk-taking behaviors.

Rural-Urban Health Study

This study, funded by NIDA, has entered its second year of recruitment in Wake, Durham and Johnston counties, and a new field site has opened in Siler City, located in Chatham County. The project is part of a cooperative agreement studying HIV transmission among networks of drug users and men who have sex with men (MSM). In the first year of recruitment, 940 participants received an interview on their risk behaviors and underwent HIV/STD screening. Preliminary analysis of year one data reveals a group with heightened risk of getting or spreading disease:

- ♦ 15% of the women and 20% of the men reported engaging in sex with men and women during the past 6 months
- ♦ Another 10% of men reported engaging only in sex with men.
- ♦ 30% of sexual events involved unprotected sex acts.
- ♦ 29% of the participants reported having other sexual partners while involved with the sexual partner being discussed
- ♦ Participants perceived that 44% of their partners had additional sexual partners as well.

In addition, we have added the Health Connections Survey to the study to gather additional data on the social ties within networks of drug users and MSM.

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

Holloway Street CoOp

The Holloway Street CoOp stopped field operations in November, 2006. Of 856 out-of-treatment injectors enrolled, 73% of eligible participants returned for follow-up interviews at 6 months and 71% at 12 months. Just looking at data collected at enrollment yielded these findings:

- ♦ Harmful/hazardous drinking patterns and methamphetamine use were associated with self-reported physical, emotional, mental and social functioning (to be published in Drug & Alcohol Dependence).
- ♦ Methamphetamine use during heterosexual sexual encounters was associated with increased sexual risk, such as anal sex, and anal and vaginal sex during the same encounter (to be published in Sexually Transmitted Diseases).
- ♦ Use of dead space syringes (which retain more fluid than other types) was associated with HIV and HCV infection (presented at XVI International AIDS Conference).
- ♦ African-American participants were less likely to obtain syringes from pharmacies and more likely to report being afraid to carry them (presented at 2006 College of Problems on Drug Dependence annual meeting).

We are currently looking at results from our follow-up interviews to determine the effectiveness of our intervention. These results will be shared in future newsletters.

For more information on these programs, please contact:

Rachel Middlesteadt Ellerson.....	919-541-7255
Field Coordinator.....	rachelm@rti.org
Dr. Wendee Wechsberg.....	919-541-6422
Women's CoOps & South Africa CoOps.....	wmw@rti.org
Dr. K.K. Lam.....	919-485-5603
MPY, FORT, ADASI, & PCCV.....	kkklam@rti.org
Dr. William Zule.....	919-541-2797
Holloway Street CoOp, SATH-CAP & MASH.....	zule@rti.org
Dr. Rhonda Karg.....	919-316-3516
Latina Health Project.....	rkarg@rti.org

Employment Opportunities at Study Sites

For more information, please contact
Rachel Middlesteadt Ellerson:
919-541-7255 or 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.

Active CAB Members

Dr. Craig C Brookins.....	Director, Africana Studies, N.C. State University
Jacqueline S. Clements.....	HIV Test Counselor, Lincoln Community Health Center
Dr. Tad Clodfelter, Jr.....	Chief Executive Officer, SouthLight, Inc.
Jacquelyn Clymore.....	Executive Director, Alliance of AIDS Services-Carolina
Mike Gauss.....	Chair, Board of Trustees, St. John's Metropolitan Community Church
Gibbie Harris.....	Director, Wake County Health Department
Trudy Harris-Adeeyo.....	Community Member at Large
Rev. Dumas A. Harshaw, Jr.....	Pastor, First Baptist Church Raleigh
Franklin Ingram.....	Community Member at Large
Jeri Jeffreys.....	Director, SHAPE Program, Women's Center of Wake County
Stella Kirkendale.....	CORE Community Program Manager, Family Health International
Floyd Laisure.....	Director, Boys and Girls Club
Ann Milligan-Barnes.....	Nurse, Durham County Health Department
Jan Muller.....	Co-Chair, Triangle Community Works
Rev. Michael D. Page.....	Pastor, Antioch Baptist Church
Gudrun Parmer.....	Director, Durham County Criminal Justice
Joyce Snipes.....	Nurse, Lincoln Community Health Center
Yvonne Torres.....	HIV/STD Program Manager, Wake County Health Department
Linda Warren.....	Community Member at Large
Samuel Williams.....	Community Outreach Educator, Wake County Human Services

To reach us in the community:

Wake County Field Site

Telephone: 919-838-0494
221-B Southeast Street, Raleigh, NC 27601

Johnston County Field Site

Telephone: 919-963-5025
201-1 South Brightleaf Boulevard,
Smithfield, NC 27577

Siler City Field Site

Telephone: 919-942-1039
125 North Fir. Ave. Siler City, NC 27344

Durham County Field Site

Telephone: 919-956-2854 or 919-682-3354
Antioch Baptist Church
1415 Holloway Street, Durham, NC 27703



New Web Site

We have a 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.

www.rti.org/satei

