

**Community Planning Group
Literature & Education Committee**

Meeting Minutes of

Wednesday, December 15, 2010

12:00 p.m. – 2:00 p.m.

Office of HIV Planning, 340 N. 12th Street, Suite 203, Philadelphia, PA 19107

Present: Wesley Anderson, Jennifer Chapman (Co-Chair), Terri Clark (Co-Chair), Antonio Davis, Katie Dunphy

Excused: Chris Collins, Lisa Espinosa, Tyreef King, Alison Lin

Staff: Briana Morgan, Mari Ross-Russell, Nishika Vidanage

Call to Order:

J. Chapman called the meeting to order at 12:28 p.m.

Approval of Agenda:

J. Chapman presented the agenda for approval. **Motion:** J. Chapman moved, A. Davis seconded to approve the agenda. **Motion passed:** All in favor.

Approval of Minutes (*17 November 2010*):

J. Chapman presented the November 17, 2010 minutes for approval. The minutes were approved by general consensus.

Report of Staff:

None.

Report of Co-Chairs:

None.

Discussion Items:

• **Intervention Worksheets**

Final scoring for the interventions, and discussion on the interventions, was as follows:

Motivational Interviewing

	Targets a Specific Population	Targets a Specific Behavior	Effectiveness	Based on Sound Theory	Norms/ Values	Feasibility
T. Clark	8	5	3	8	3	1
A. Davis	8	8	8	8	5	1

(Note: T. Clark's scores had been submitted at a previous meeting.)

After some discussion, the group determined that this intervention was geared toward both IDU and heterosexual populations. A. Davis then stated that this intervention was meant to reduce risk, and participants were less likely to have high risk transactions within 3-6 months. He went on to say that he had given this intervention a 3 for “based on sound theory” since it was based on the stages of change. J. Chapman replied that this intervention was based on two sound theories, so they may want to give this an 8. A. Davis agreed. A. Davis then stated that he had given this a score of 5 for norms/values since it addressed gender-specific behaviors. He also noted that he had given this an 8 for feasibility, even though there was no package available. J. Chapman explained that they typically gave interventions a 1 when there were no packages available since they would be difficult to implement, and A. Davis agreed with this change in score.

Communal Affectance – AIDS Prevention

	Targets a Specific Population	Targets a Specific Behavior	Effectiveness	Based on Sound Theory	Norms/ Values	Feasibility
T. Clark	8	5	3	8	1	1
A. Davis	8	5	2	8	5	1

(Note: T. Clark’s scores had been submitted at a previous meeting.)

A. Davis stated that this invention targeted the heterosexual population, with specifications. He then reviewed his other scores, including a score of 3 for “based on sound theory.” J. Chapman replied that this intervention was based on three theories, so she would have given this an 8. A. Davis agreed to give this intervention a score of 8 for “based on sound theory.” J. Chapman then stated that she had given this a score of 1 for norms/values. She went on to say that this intervention included women looking at women’s behaviors as well as a female facilitator, so she would change her score to a 5. She also noted that this did not have an intervention package available, so she had given this a 1 for feasibility. A. Davis agreed with this score.

TEACH

	Targets a Specific Population	Targets a Specific Behavior	Effectiveness	Based on Sound Theory	Norms/ Values	Feasibility
T. Clark	8	5	5	1	8	1
J. Chapman	8	5	5	1	8	1

T. Clark stated that this intervention was designed with peer education in mind, for those incarcerated and newly released. She went on to say that this did not target a specific behavior, but was more of a general education, treatment, and advocacy intervention, so she had given this a 1. J. Chapman replied that she agreed with this statement, but she had given this a 5 for “targets a specific behavior.” T. Clark then agreed to give this a 5, since the intervention included skills-building. She went on to

say that she was unsure how to score this for effectiveness, although she knew this was a successful program at Philadelphia FIGHT. She then asked if anyone had insight on this intervention. A. Davis stated that this intervention allows participants to speak out more while engaging in the community. He went on to say that TEACH helps participants to view stigma differently as well as help others with disclosure issues.

T. Clark asked if TEACH was currently being done in other cities, and also asked if anyone present knew who had developed the curriculum. The group replied that this was not being done anywhere else and they did not know who developed it. M. Ross-Russell then stated that they had contacted FIGHT, but they had received a response that they would not reply to the questions since the intervention was not funded with prevention dollars. She went on to say that this intervention was difficult to categorize, since it fell under prevention but was generally done with people that are positive or believed to be positive. She then added that TEACH had been in existence for approximately 15 years. T. Clark stated that it seemed as though TEACH began as a grassroots intervention, and then evolved to meet needs over time. She went on to say that she was surprised that no one had done a more rigorous evaluation of the intervention in an effort to get more funding for it. M. Ross-Russell replied that it was possible that the intervention was being done in other cities under a different name, or that other cities had used TEACH as a model.

T. Clark stated that she would give TEACH a score of 8 for effectiveness since it had been running for so long at multiple sites, and J. Chapman agreed with this reasoning. J. Chapman then stated that they did not know if TEACH had been tested before it was implemented. T. Clark and J. Chapman agreed to give this a 5 for effectiveness, and A. Davis and W. Anderson agreed with this as well.

T. Clark then stated that they had no information for “based on sound theory,” and suggested that they give this intervention a score of 1. J. Chapman agreed. T. Clark went on to suggest giving this intervention a score of 8 for norms/values since it was very student-centered.

T. Clark next stated that she was unsure about a score for feasibility, since this had continuously been done at FIGHT, but did not receive prevention funding. M. Ross-Russell replied that this intervention would probably be fundable under CDC, since they were able to fund preventions that target people they think or know are positive. She explained that a person that learned about their status and the history of the disease would be more comfortable with disclosure. J. Chapman stated that this intervention would definitely receive an 8 for feasibility at that organization, but they had no way to know if FIGHT would share materials with other organizations. T. Clark and J. Chapman ultimately agreed to give this intervention a score of 1 for feasibility.

Protect and Respect

	Targets a Specific Population	Targets a Specific Behavior	Effectiveness	Based on Sound Theory	Norms/Values	Feasibility
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T. Clark	8	8	3	8	5	1
J. Chapman	8	8	3	8	5	1

J. Chapman stated that the target population for this intervention would be HIV+ women in clinical care. She went on to say that data was pending so she did not know how to score this intervention for effectiveness. T. Clark replied that she had given this intervention a score of 3 for effectiveness since it was currently being researched, and J. Chapman agreed with this. J. Chapman then stated that this intervention specified that it was designed to support women. She went on to say that there was no information related to feasibility, so she had given this intervention a score of 1 for that factor. T. Clark agreed with this reasoning.

Community PROMISE

	Targets a Specific Population	Targets a Specific Behavior	Effectiveness	Based on Sound Theory	Norms/ Values	Feasibility
T. Clark	8	5	8	8	8	8
J. Chapman	8	5	8	8	8	8

T. Clark stated that this intervention aimed to increase condom use and increase cleaning works. She went on to say that this had been done at multiple sites over time, and was based on several theories. She next stated that this was based on role model stories and had a package available, so she had score this intervention high for both norms/values and feasibility.

M. Ross-Russell then asked if the panels had recommended pairing this intervention with something else, and T. Clark agreed. T. Clark explained that the panelists had also talked about using other organizations’ stories, and that they had also discussed whether or not they needed multiple organizations providing the same intervention to MSM, since it was a community-level intervention. J. Chapman noted that there were five communities involved in the study, but Philadelphia solely focused on MSM.

RAPP

	Targets a Specific Population	Targets a Specific Behavior	Effectiveness	Based on Sound Theory	Norms/ Values	Feasibility
T. Clark	8	5	8	8	8	8
J. Chapman	N/A	N/A	N/A	N/A	N/A	N/A

T. Clark stated that was a community-level intervention that used peers. She went on to say that this was run from 1993-1996 at multiple sites, and based on several different theories. She then stated that this intervention did have a package available, but she was not sure how many similarities or differences this had to Community PROMISE. J. Chapman noted that she had not yet scored this intervention, but would submit her scores later.

Safer Sex Skills Building

	Targets a Specific Population	Targets a Specific Behavior	Effectiveness	Based on Sound Theory	Norms/ Values	Feasibility
A. Lin	8	8		1	3	5
W. Anderson	N/A	N/A	N/A	N/A	N/A	N/A

A. Lin’s responses included the following. The target population for this intervention was heterosexually active women in drug treatment, and included five sessions at 90 minutes each. This intervention had lower retention rates, but did have a package available.

Doing Something Different

	Targets a Specific Population	Targets a Specific Behavior	Effectiveness	Based on Sound Theory	Norms/ Values	Feasibility
W. Anderson	-	-	-	-	-	-
A. Lin	5	5	2	1	3	5

A. Lin’s responses included the following. The target population for this intervention was heterosexual inner city STD clinic patients. This intervention aimed to increase condom use and prevent new STD infections. It included one single skill-building group session beginning with a video. This intervention had no effectiveness for decreasing STDs for women but was effective for men. No theory was cited. An intervention package was available, and the video was supposed to include cultural values, but it may not have been updated for 20 years. A. Lin’s responses suggested rejecting this intervention overall since it was out of date.

T. Clark suggested that the group identify which interventions had yet to be assigned for scoring. M. Ross-Russell replied that they had some interventions that were not yet assigned, as well as others that had been assigned but not yet scored. T. Clark suggested that they first list those that had not been assigned at all.

The group identified prison case management, MPowerment, Partnership for Health, Popular Opinion Leader, ARK, and Real Men as interventions that had not yet been assigned for scoring. T. Clark noted that she would follow up on prison case management. J. Chapman added that there was not currently a package available for Real Men, but volunteered to follow up on this. W. Anderson then stated that there was not a package available for ARK. M. Ross-Russell replied that they may have originally accepted ARK with reservations due to the lack of availability of a package, but the group had since begun rejecting interventions that did not have a package. She then went on to say that they were making a distinction between interventions with a note that a package was being written and those with no package at all, but it would be important to consider how long the package had been in development. She explained

that they would not be able to implement an intervention if there was no package available. T. Clark then added that they had not yet scored Street Smart, Teen Health, or the Health Resource Centers (HRCs).

T. Clark then asked how they should handle scoring for the HRCs. M. Ross-Russell replied that the HRCs fell under the school district, and volunteered to follow up on this. She went on to say that she did not believe that any outside information was available regarding the HRCs, so they would need to gather any information on the HRCs from them directly.

T. Clark then asked if they should use the panel discussion questions to gather information about prison case management. M. Ross-Russell replied that they did not have a panel on prison case management, so having answers to these questions would be helpful. T. Clark then stated that she had received a response regarding prison case management from a colleague, and that the colleague had suggested that she fill out the responses herself. She went on to say that she would provide the written responses before the next meeting.

The group then determined that scoring for Partnership for Health had already been assigned to C. Collins and L. Espinosa. After discussion on the outstanding interventions, T. Clark suggested sending emails to committee members to let them know which worksheets were missing, and asking them to submit scores for the interventions.

M. Ross-Russell stated that the group would next need to decide whether they would like to establish a minimum score for interventions to be able to continue forward. She explained that they had rejected some interventions already, while they had wanted more information on others. She went on to say that it would be important for the group to have a rationale for their scoring on all interventions, whether the scores were discussed in the committee meetings or submitted individually.

T. Clark stated that they would hope to have responses from the committee members before their January meeting. M. Ross-Russell stated that it would be important for committee members to include a rationale for the scoring if they chose not to discuss the interventions at the meetings. J. Chapman asked if Office staff would have sufficient time to compile the scores if they were submitted a week before the meeting, and M. Ross-Russell agreed. J. Chapman then suggested that T. Clark send an email requesting the responses by January 19, 2011, while she would personally send a reminder a week before the due date.

M. Ross-Russell stated that the group should also consider when they would like to present their results to the full CPG. J. Chapman suggested presenting the results in March, but T. Clark replied that she would not be present at the March CPG meeting. J. Chapman then asked if they would be able to conduct the presentation in April. M. Ross-Russell replied that this would probably be acceptable, although she would need to speak with the grantee about any presentations they might have scheduled in

preparation for concurrence. She then noted that the committee would also need to review their results internally before their presentation.

Old Business:

None.

New Business:

None.

Review/Next Steps:

None.

Announcements:

A. Davis stated that ACT UP would be caroling at the mayor's house on December 23 to raise awareness about housing for PLWA.

Adjournment:

The meeting was adjourned by general consensus at 2:03 p.m.

Respectfully Submitted by,

Briana L. Morgan, Staff

Handouts distributed at the meeting:

- Meeting Agenda
- Meeting Minutes from November 17, 2010
- OHP Calendar

COMMUNITY PLANNING GROUP (CPG)
Literature & Education Committee

Wednesday, December 15, 2010

12:00 - 2:00 pm

The Office of HIV Planning, 340 N. 12th Street, Suite 203, Philadelphia

Call to Order/Introductions

Approval of Agenda

Approval of Minutes (*November 17, 2010*)

Report of Staff

Report of Co-Chairs

Discussion Items:

- **Intervention Worksheets**
- **Next Steps**

Old Business

New Business

Review/Next Steps

Announcements

Adjournment

*The next meeting of the Lit & Ed Committee will be on
Wednesday, January 26, 2010 from 12:00 p.m. – 2:00 p.m.
at the Office of HIV Planning, 340 N. 12th Street, Suite 203, Philadelphia.
Please refer to the Office of HIV Planning's attached Calendar of Events or its website, www.hivphilly.org, for
updated committee meeting information.*

Please contact the office at least 5 days in advance if you require special assistance

**Community Planning Group
Literature & Education Committee
Meeting Minutes of
Wednesday, November 17, 2010
12:00 p.m. – 2:00 p.m.**

Office of HIV Planning, 340 N. 12th Street, Suite 203, Philadelphia, PA 19107

Present: Jennifer Chapman (Co-Chair), Terri Clark (Co-Chair), Katie Dunphy, Tyreef King

Absent: Antonio Davis

Excused: Wesley Anderson, Christopher Collins, Alison Lin

Staff: Briana Morgan, Mari Ross-Russell, Nishika Vidanage

Call to Order:

J. Chapman called the meeting to order at 12:30 p.m.

Approval of Agenda:

J. Chapman presented the agenda for approval. **Motion:** J. Chapman moved, T. Clark seconded to approve the agenda. **Motion passed:** All in favor.

Approval of Minutes (27 October 2010):

J. Chapman presented the October 27, 2010 minutes for approval. **Motion:** J. Chapman moved, T. Clark seconded to approve the October 27, 2010 minutes. **Motion passed:** All in favor.

Report of Staff:

M. Ross-Russell stated that D. Acosta had provided the group with the Interventions & Public Health Strategies coming out of the CDC, noting that he would discuss this at the full CPG meeting. She explained that Philadelphia already did many of the things included on the list, but they would want to review all of the recommended items. She went on to say that they could also consider how to incorporate parts of the list into their Plan, such as needle exchange. T. Clark asked if CBOs would be able to include syringe exchange in their menu of services. M. Ross-Russell replied that she was not sure what the city's requirements for running a syringe exchange program would be. T. Clark stated that Prevention Point might also be able to extend its services to partner agencies.

M. Ross-Russell then stated that there were certain areas that had been identified through the gap analysis. She explained that poverty was driving the epidemic, and those areas that were most affected had lower education levels and property values with higher numbers of single parent households, utility shut-offs, abandoned houses, and drug addiction. She went on to say that counseling and testing would be at the top of their list for these areas. K. Dunphy asked if they had reviewed high school drop-out rates in

those areas. M. Ross-Russell replied that the newer census did not include information on educational attainment by year at the census tract level, but they had included teen pregnancy. She went on to say that the city had data on morbidity and pregnancy by census tract, and they also had data on age at pregnancy as well as the trimester at which the mother received prenatal care. She added that the Literature & Education Committee may need to review the gap analysis in the future, and that they could also consider matching interventions to different communities based on their needs.

Report of Co-Chairs:

None.

Discussion Items:

- **Review of Panelist Comments**

B. Morgan reviewed points from the previous meeting, as outlined in the CPG minutes. T. Clark stated that R. Burns had mentioned that the AACO review board could be a barrier since it was a time-consuming process. She then stated that they had also discussed how many providers they truly needed to conduct Community PROMISE. She went on to say that the Get REAL stories were very similar, and SafeGuards was doing this intervention using those stories. She then explained that each organization had stated that they did different things, but this could be a duplication or coordination issue. M. Ross-Russell asked if they had talked about the evaluation component during that panel. T. Clark replied that R. Burns described a survey used when people came in for testing. B. Morgan noted that Brian Green had mentioned a community-level survey conducted several times per year in which they asked community members if they had seen the stories, but there was no way to determine which organization's stories they had seen or whether they had changed their behavior. T. Clark stated that this intervention should probably include an evaluation component done in conjunction with getting tested. J. Chapman stated that all of the panelists had talked about problems in keeping the interest of the peer advocates along the way.

M. Ross-Russell stated that they had some interventions that had not been represented on panels, but if they kept doing panels to include those that did not originally participate, they would run out of time. She asked the group if they would like to continue with make-up panels, or if they would prefer to simply ask those that did not participate for answers to their questions. J. Chapman replied that they should try to obtain the answers, explaining that it would be most important to get in touch with representatives for local interventions and accepted with reservations interventions. T. Clark stated that they had not heard from Teens Linked to Care, Project TEACH, RAPP, Project Respect, Protect and Respect, Health Resources Centers, Prison Case Management, and TEACH Outside. M. Ross-Russell noted that it could be difficult to hold a make-up panel since the CPG did not usually meet in December. J. Chapman suggested emailing those that had not participated, and having committee members make follow-up phone calls if they did not get responses. K. Dunphy then volunteered to give the questions to the representatives for TEACH and TEACH Outside.

- **Intervention Worksheets**

Final scoring for the interventions, and discussion on the interventions, was as follows:

Safety Counts

	Targets a Specific Population	Targets a Specific Behavior	Effectiveness	Based on Sound Theory	Norms/ Values	Feasibility
T. Clark	8	8	8	8	8	8
J. Chapman	8	8	8	8	8	8

J. Chapman stated that the target population for this intervention would be active crack and IV drug users out of treatment. T. Clark gave this intervention a score of 8 for norms/values since peers were involved, and it used goal setting as well. J. Chapman stated that she had originally given this intervention a 3 for norms/values, but changed her score to an 8 based on T. Clark's statement. T. Clark added that they had had great feedback on this from Prevention Point.

Be Proud, Be Responsible

	Targets a Specific Population	Targets a Specific Behavior	Effectiveness	Based on Sound Theory	Norms/ Values	Feasibility
T. Clark	8	8	8	8	5	8
J. Chapman	8	8	8	8	5	8

T. Clark stated that she used an adapted version of this intervention, originally targeted for urban male adolescents.

Intensive AIDS Education

	Targets a Specific Population	Targets a Specific Behavior	Effectiveness	Based on Sound Theory	Norms/ Values	Feasibility
T. Clark	8	3	3	1	1	1
J. Chapman	8	5	3	1	1	1

J. Chapman stated that the target population for this intervention would be incarcerated male drug users. She noted that she had given this a 5 for targets a specific behavior, since they allowed the facilitator to target the behaviors identified by the participants. T. Clark stated that she did not like this intervention, and there was no packet available. J. Chapman noted that there was no theoretical basis, and the intervention was developed almost twenty years ago. The two agreed that it did not seem that youth were involved in the development of the intervention.

Horizons

	Targets a Specific Population	Targets a Specific Behavior	Effectiveness	Based on Sound Theory	Norms/ Values	Feasibility
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T. Clark	8	8	3	8	5	1
J. Chapman	8	8	3	8	5	1

T. Clark stated that the target population for this intervention would be sexually active heterosexual adolescent African-American females seeking health services. She went on to say that this intervention increased condom use and decreased STIs. J. Chapman stated that this included role playing on informing male partners about STD status, discouraged and reduced the amount of douching after sex, and also taught persuasive communication techniques. T. Clark then changed her original score of 5 for targets a specific behavior to an 8 based on J. Chapman's statement. J. Chapman then stated that this intervention was based on the theory of gender power and social cognitive theory. T. Clark then changed her original score of 3 for based on sound theory to an 8 based on J. Chapman's statement. She noted that there was no packet available. Jennifer stated that she knew the person that had developed this intervention, so she would contact him to see if there was a packet available.

Teaching Learning Choices

	Targets a Specific Population	Targets a Specific Behavior	Effectiveness	Based on Sound Theory	Norms/ Values	Feasibility
T. Clark	8	8	8	5	8	8
J. Chapman	8	8	8	5	8	8

J. Chapman stated that the target population for this intervention was HIV+ adolescent and young adult clinic patients. T. Clark stated that this intervention had been replicated in several cities. J. Chapman then changed her original score of 5 for effectiveness to an 8 based on T. Clark's statement. She noted that there was not much information on norms/values, but that she would be willing to score this at an 8 based on the interventions this person had developed in the past. T. Clark then stated that this intervention was previously called "Teens Linked to Care," who they had not heard from on their panels.

START

	Targets a Specific Population	Targets a Specific Behavior	Effectiveness	Based on Sound Theory	Norms/ Values	Feasibility
T. Clark	8	5	8	8	3	5
J. Chapman	8	5	8	8	3	5

T. Clark stated that the target population for this intervention would be young heterosexual men recently released from prison. She noted that this had been conducted at multiple sites over time. J. Chapman stated that she had given this a 1 for theory since she could not find a reference to a specific theory. T. Clark replied that her notes included a basis in harm reduction and motivational interviewing, though she had not been able to find this information right away. J. Chapman then changed her original

score of 1 for based on sound theory to an 8 based on T. Clark's statement. M. Ross-Russell noted that this intervention had been accepted, but the package was currently being developed. J. Chapman volunteered to send an email to ask about the packet, although this intervention had been developed about ten years ago.

Explore

	Targets a Specific Population	Targets a Specific Behavior	Effectiveness	Based on Sound Theory	Norms/ Values	Feasibility
W. Anderson	-	-	-	-	-	-
A. Lin	8	8	8	8	1	8

After some discussion on this intervention, the group realized that this was an intervention they had rejected because the team that had developed it did not recommend using it.

Cuidate

	Targets a Specific Population	Targets a Specific Behavior	Effectiveness	Based on Sound Theory	Norms/ Values	Feasibility
W. Anderson	-	-	-	-	-	-
A. Lin	8	8	5	8	8	8

A. Lin's responses included the following. The target population for this intervention was Latino youth, and the intervention included six one-hour modules delivered over a minimum of two days to groups of 6 – 10 youth. The intervention was based on Be Proud, Be Responsible and increased abstinence and condom use. This was piloted in Philadelphia from 2000 – 2003, and reduced sexual activity and sex partners as well as unprotected sex. This intervention was based on social cognitive theory, theory of planned behavior, and theory of reasoned action. This was a culturally-based group level intervention that incorporated cultural beliefs. This had a package available. T. Clark and J. Chapman agreed with this scoring.

SiHLE

	Targets a Specific Population	Targets a Specific Behavior	Effectiveness	Based on Sound Theory	Norms/ Values	Feasibility
W. Anderson	-	-	-	-	-	-
A. Lin	8	8	5	8	8	8

K. Dunphy stated PHMC had a grant to conduct this intervention. A. Lin's responses included the following. The target population for this intervention was youth, and it was an adaptation of SISTA. This intervention aimed to reduce sexual encounters, risk behaviors, and STDs/pregnancy as well as enhance skills. It was conducted in Birmingham, AL from 1995-2002 with 522 participants. This intervention increased

consistent condom use, reduced unprotected vaginal sex, and reduced the number of sex partners. It was based on social cognitive theory and theory of gender and power. This was a peer-led training conducted over four three-hour sessions, that had a package and training available. J. Chapman and T. Clark agreed with this scoring.

Living in the Face of Trauma (LIFT)

	Targets a Specific Population	Targets a Specific Behavior	Effectiveness	Based on Sound Theory	Norms/ Values	Feasibility
A. Lin	8	8	5	8	3	1
W. Anderson	-	-	-	-	-	-

A. Lin's responses included the following. The target population for this intervention was HIV+ adults with childhood sexual abuse (CSA) histories. This intervention eliminated or reduced sexual transmission risk behavior, improved coping with abuse, and increased positive change in CSA-related trauma symptoms. This was evaluated in New York City from 2002-2004 with 247 HIV+ men and women, and reduced unprotected sex acts with all partners. This was based on cognitive theory of stress and coping. There was nothing to address norms/values, but the intervention had okay retention rates. There was no intervention package, and the intervention required two clinical psychologists and two clinical social workers for fifteen 90-min sessions. M. Ross-Russell stated that the group could choose to recommend this intervention, but it was an incredibly expensive intervention that could only be given in very specific settings.

Real Men Are Safe (REMAS)

	Targets a Specific Population	Targets a Specific Behavior	Effectiveness	Based on Sound Theory	Norms/ Values	Feasibility
A. Lin	5	8	8	3	1	8
W. Anderson	-	-	-	-	-	-

A. Lin's responses included the following. The target population for this intervention was sexually active men in drug treatment. The intervention materials were appropriate for men that have sex exclusively with women as well as MSM. This intervention aimed to reduce unprotected vaginal and anal sex occasions. Participants had significantly fewer sexual intercourse in last 90 days. This intervention was based on the information-motivation-behavioral change model. The norms/values for this intervention was unknown, and the setting for the intervention included methadone clinics and psychosocial outpatient clinics. This intervention did have a package available, but the group was unable to locate this intervention in their binders.

Brief Alcohol Intervention for Needle Exchangers (BRAINE)

	Targets a Specific Population	Targets a Specific Behavior	Effectiveness	Based on Sound Theory	Norms/ Values	Feasibility
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A. Lin	8	5	3	3	5	1
W. Anderson	-	-	-	-	-	-

A. Lin's responses included the following. The target population for this intervention was active IDU who are also heavy alcohol users. This intervention aimed to have participants set goals, reduce or eliminate IDU risk behaviors, and reduce alcohol use. The original evaluation was conducted in Providence from 1998-2000 and reduced sharing of injection equipment, but did not meet "best" due to the small sample size. This was an individualized one-on-one intervention. This included one 60 minute session and one 30-45 minute session delivered one month apart, and there was no intervention package available.

Old Business:

None.

New Business:

None.

Review/Next Steps:

None.

Announcements:

None.

Adjournment:

Motion: C. Collins moved, A. Lin seconded to adjourn the meeting at 2:10 p.m. **Motion passed: All in favor.**

Respectfully Submitted by,

Briana L. Morgan, Staff

Handouts distributed at the meeting:

- Meeting Agenda
- Meeting Minutes from October 27, 2010
- OHP Calendar