

**Community Planning Group
Literature & Education Committee
Meeting Minutes**

Wednesday, December 16th, 2009

12:00 - 2:00 pm

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

Present: Jennifer Chapman (Co-Chair), Arti Chhabria, Terri Clark, Christopher Collins, Antonio Davis, Alison Lin

Staff: Joseph Ellis, Monica Getahun, Mari Ross-Russell

Excused: Dawn Marie Acero, Wesley Anderson, Dionna Samuel, Val Sowell

Absent: Yexsy Alicea (Co-Chair), Tyreef King, Roberta Waite

Call to Order

J. Chapman called the meeting to order at 12:22 pm.

Approval of Agenda

The group took a moment to review the agenda for the day's meeting. **Motion:** J. Chapman moved and T. Clark seconded to approve the document. **Motion Passed:** All in favor.

Approval of Minutes (*August 26th & November 4th, 2009*)

The group spent some time reviewing a draft of the minutes from their November meeting. **Motion:** Afterwards, J. Chapman moved and T. Clark seconded to approve the draft of the minutes included in the handouts. **Motion Passed:** All in favor.

J. Ellis informed the group that they still had an unapproved set of minutes from their August meeting. He explained that not enough of the three committee members who had been in attendance in August had since been to a meeting to approve the draft. M. Ross-Russell stated that, once one of the individuals reviewed the draft, the committee could approve the document by general consensus.

Report of Staff

None

Report of Co-Chairs

None

Discussion Items:

• **Lit & Ed Calendar**

J. Chapman took a moment to explain the committee's ongoing process of reviewing interventions to the new members of the committee. She said that the Lit and Ed Committee had been reviewing all of the programs in the CDC's Compendium as well as

any additional programs in use locally to determine which ones would be included in Philadelphia's next prevention plan. She told the new members that the committee was using data from the prevention intervention information binders, which had been compiled by OHP staff members, and any other sources they could find to make determinations about their thirteen selected factors. T. Clark clarified that the thirteen factors had come from suggestions in worksheet 13 of the AED guidance, which the committee then revised and had approved by the CPG. J. Chapman told the group that, after they had finished reviewing programs, they would assign a weight to each of the factors in order to further pare down their list of programs. In closing, she said that there were only a few programs left for the committee to review, most of which would be done at the current meeting.

In response to a question by A. Lin, J. Chapman noted that there was no limit on the number of programs that could be included in the prevention plan. M. Getahun added that the committee had been approving most of the programs they reviewed because they did not yet have much information on program feasibility. She said that, when the Health Department provided the committee with the information on program feasibility, the list would almost certainly be pared down. Looking through the factors, A. Lin asked what specific partner connections the committee should be looking for in their program reviews. M. Getahun replied that the committee had added the factor for partner connections in response to the CDC's strengthening language on the need for prevention programs to be mindful of the sexual and needle-sharing partners of high-risk individuals. She clarified that the language was still somewhat vague and, therefore, the committee was simply noting any mention of partners in program descriptions.

The group then spent some time reviewing their calendar. M. Getahun noted that the CDC had added a number of interventions to the compendium since the group started their review of programs. She said that, hopefully, the panel discussions would remove a significant number of programs from the committee's list before they began weighting their factors.

- **Finish Review of Interventions**

- **Communal-Effectance AIDS Prevention – APPROVED w/ RESERVATIONS**

- Targets a specific population?
Low-income single heterosexual inner-city females attending urban clinics
- Targets a specific behavior?
Reduce risk behaviors and enhance HIV-preventive psychosocial and structural factors
- Effectiveness?
Significantly less self reported episodes of unprotected sex
Also tested for STI and HIV at follow up with no changes in status
- Sound theoretical basis?
Social Learning Theory

Conservation of Resources Theory
Theory of Gender and Power

- Norms, Values, Consumer Preferences?
Female facilitators
- Intervention Feasibility?
Cost – 6 sessions 1.5 – 2 hours each, by trained staff.
Materials – no package available
- Other considerations – none
PCRS connection – no language

Although the group generally approved of Communal-Effectance AIDS Prevention, they opted to set reservations to their approval because an intervention package was not yet available.

BART – APPROVED

- Targets a specific population?
African American adolescents
- Targets a specific behavior?
Increase abstinence and sound decision-making
Eliminate sexual risk behaviors
- Effectiveness?
Decreased initiation of sexual activity and increased condom use for those who had started
- Sound theoretical basis?
Information Motivation Behavior Model
Social Learning Theory
- Intervention Feasibility?
Materials – package available
- Other considerations
Performed locally and nationally and is well respected
PCRS connection – program encourages sharing info with partner, friends and family

Project Connect – APPROVED

- Targets a specific population?
Minority inner city heterosexual couples
- Targets a specific behavior?

Increase safer sex practices among partners and relationship communication

- Effectiveness?
High retention rates and significant increases in proportion of protected vaginal sex acts compared to control groups
- Sound theoretical basis?
Aids Risk Reduction Model
Bronfenbrenner's Ecological Perspective
- Intervention Feasibility?
Cost – Inexpensive – six 2-hour sessions facilitated by graduate students (Masters in Social Work (MSW) or social work graduate student), set in hospital outpatient clinic.
- Other considerations
PCRS connection – partners included in the program

Cuidate – APPROVED

- Targets a specific population?
Latino youth
- Targets a specific behavior?
Increase condom use, abstinence, and the skills and self efficacy in negotiating abstinence and condom use
- Effectiveness?
Reduced sexual activity, number of sex partners, and unprotected sex acts, and increased condom use
- Sound theoretical basis?
Social Cognitive Theory, Theory of Reasoned Action, Theory of Planned Behavior
- Norms, Values, Consumer Preferences?
Incorporates salient aspects of Latino culture
- Intervention Feasibility?
Materials – package being developed by the Replicating Effective Program (REP) Project
- Other considerations
Developed in Philadelphia as an adaptation of Be Proud Be Responsible
Targets Latinos but does not exclude other youth
PCRS connection – discusses gender role expectations and designed for a mixed group, not gender segregated

In response to a question by T. Clark, M. Ross-Russell explained that the REP Project was a CDC initiative that made user-friendly intervention packages for programs that had been proven to work.

EXPLORE – APPROVED w/Reservations

- Targets a specific population?
HIV-seronegative MSM
- Targets a specific behavior?
Reduce unprotected anal sex, specifically serodiscordant receptive
- Effectiveness?
Inconclusive – 85% retention over the course of 10 sessions but only 18 % reduction in HIV incidence, which is not statistically significant
- Sound theoretical basis?
Information-Motivation- Behavior Skill Model; Motivational Enhancement; Social Learning Theory
- Intervention Feasibility?
Cost – inexpensive – delivered by counselors with 40 hours of training and can be delivered by phone
Materials – available from the New York Blood Center
- Other considerations
Performed in 6 major cities; excluded individuals in monogamous relationships; based on the non-significant effect of the intervention on the primary outcome of the study, HIV incidence, the EXPLORE team does not recommend use of the intervention in its present form
PCRS connection – None

The group generally approved of the EXPLORE program. However, they opted only to approve it with reservations because the team that tested the program did not recommend using it in its present form because its primary outcome effect was insignificant.

Female Condom Skills Training

The group did not review this program because they could not find any information on it in the binder. However, they decided to review Female Condom Skills Training at a later time if they could find information on it.

Personalized Cognitive Risk Reduction Counseling – APPROVED

- Targets a specific population?
HIV-seronegative MSM who have undergone repeat HIV testing
- Targets a specific behavior?

Reducing unprotected anal sex with non-primary partners of unknown or discordant HIV status

- Effectiveness?
Significant decrease in percent of unprotected anal sex compared to those receiving standard HIV counseling alone
- Sound theoretical basis?
Gold's model of "on-line" versus "off-line" self-appraisal of risk behavior; Model of Relapse Prevention
- Intervention Feasibility?
Cost – inexpensive – one 1-hour session held at testing clinic by either a licensed mental health professional or counselor
Materials – no package available
- Other considerations
Inclusion of sex diary in the program did not change outcomes.
PCRS connection – None explicitly mentioned

Although the members of the Lit & Ed Committee approved of the Personal Cognitive Risk Reduction Counseling program, they questioned how it would be possible to follow up with clients since recruitment was done at anonymous testing sites.

STD/AIDS Risk Reduction Trial (START) – APPROVED

- Targets a specific population?
Young men soon to be released from prison
- Targets a specific behavior?
Eliminate or reduce risk behaviors for HIV, STD, and Hepatitis
- Effectiveness?
At three months, participants were significantly less likely to report unprotected vaginal or anal sex
- Sound theoretical basis?
No explicit theoretical basis, based on behavior change strategies and principles
- Intervention Feasibility?
Cost – approximately 4-7 hours of sessions before and after release from prison over a period of 14 weeks
Materials – package being developed by the REP Project
- Other considerations
Not currently many, if any, programs targeting the population
PCRS connection – counseling for at-risk partners

Safe in the City - APPROVED

- Targets a specific population?
STD clinic patients who are Heterosexual adults
- Targets a specific behavior?
Prevent new STD infections through risk reduction training
- Effectiveness?
During 14 months of follow up, significantly fewer STDs were diagnosed for patients receiving the program than those receiving standard STD care alone.
- Sound theoretical basis?
Information-Motivation- Behavior Skill Model; Social Cognitive Theory; Theory of Planned Behavior
- Intervention Feasibility?
Cost – incredibly inexpensive, consists only of a video and posters
- Other considerations
PCRS connection – develops skills to facilitate partner treatment

M. Getahun pointed out that the study group would not have been able to determine whether client behavior changes had simply resulted from the fact that those in the program had recently acquired an STD infection. However, the group still opted to approve of the program because it was inexpensive and easy to implement.

Sistering, Informing, Healing, Living, and Empowering (SIHLE) – APPROVED

- Targets a specific population?
Sexually-experienced African American adolescent girls
- Targets a specific behavior?
Reduce sexual risk behaviors, STDs, and pregnancy through enhancing skills and mediators of HIV prevention behaviors
- Effectiveness?
High retention rates and significant reductions in unprotected sex, STD infections, and pregnancy; also increased reports of condom use
- Sound theoretical basis?
Social Cognitive Theory, Theory of Gender and Power
- Intervention Feasibility?
Cost – four 4-hour sessions
Materials – package and training currently being developed by DEBI project
- Other considerations

PCRS connection – None

Sister-to-Sister (GLI and ILI) – APPROVED w/Reservations

- Targets a specific population?
Inner city African American female clinic patients

- Targets a specific behavior?
Eliminate or reduce sex risk behaviors and prevent new STD infections

- Effectiveness?
Inconclusive, “no significant effects...at six month follow up” but the GLI had a marginally significant effect in reducing STD infections and the ILI had a marginally significant effect in increasing condom use after 12 months.

- Sound theoretical basis?
Social Cognitive Theory

- Norms, Values, Consumer Preferences?
“culturally-sensitive” and “gender-appropriate”

- Intervention Feasibility?
Cost – one session (200 minutes for GLI; 20 minutes for ILI) delivered by nurses with over 10 years of experience
Materials – package being developed by the REP Project

- Other considerations
PCRS connection – no explicit mention

T. Clark suggested that the group investigate how the developers of Sister-to-Sister felt about the program’s efficacy when compared to other interventions that they had developed, such as Be Proud Be Responsible, BART, and Sisters Savings Sisters. She felt that D. Samuel might be able to get the program developers to discuss the matter with the committee. The rest of the group agreed and opted to approve Sister-to-Sister only with reservations until they ascertained whether they could get more information.

Old Business

None

New Business

A. Davis informed the group that he would be traveling with an organization to discuss HIV policy with legislators. As a result, he asked what the best source of information would be concerning the state of the local epidemic. M. Ross-Russell suggested that he review the Epidemiological Profile and AACO’s Quarterly Report.

T. Clark asked whether the committee would need to select a new Co-Chair in the near future as Y. Alicia had not been to a meeting in four consecutive months. J. Ellis

informed the group that Y. Alicia had been excused from their September meeting, but that she had not responded to any meeting reminders since then. T. Clark offered to help out with the Co-Chair duties as long as Y. Alicia was absent, clarifying that she would give up the position upon Y. Alicia's return. M. Ross-Russell replied that, in keeping with proper procedure, she would first attempt to contact Y. Alicia about the matter specifically. She said that she would let the committee know whether she had received a response at their next meeting.

M. Ross-Russell asked the group whether they could delay their panel discussions until March to allow sufficient time to plan for the meetings after an announcement was made at the provider meeting in January. The members of the committee supported the idea.

Review/Next Steps

- At their December meeting, the members of the Lit & Ed Committee reviewed their calendar and continued with their review of interventions.
- Their next meeting will be held on Wednesday, January 27th, from 12:00 – 2:00 pm.

Announcements

None

Adjournment

The meeting was adjourned by general consensus at 2:16 pm.

Respectfully Submitted,

Joseph Ellis, Staff

Handouts Distributed at the Meeting:

- Meeting Agenda
- Meeting Minutes (*August 26th & November 4th, 2009*)
- Literature & Education Calendar 2009 - 2010
- OHP Meeting Calendar

COMMUNITY PLANNING GROUP (CPG)

Literature & Education Committee

Wednesday, December 16th, 2009

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 (*August 26th, 2009 & November 4th, 2009*)

Report of Staff

Report of Co-Chairs

Discussion Items:

- **Lit & Ed Calendar**
- **Finish Review of Interventions**

Old Business

New Business

Review/Next Steps

Announcements

Adjournment

*The next meeting of the Lit & Ed Committee will be on **Wednesday, January 27th, 2010***

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**

Wednesday, November 4th, 2009

12:00 - 2:00 pm

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

Present: Jennifer Chapman (Co-Chair), Terri Clark

Staff: Joseph Ellis, Monica Getahun, Mari Ross-Russell

Excused: Dawn Marie Acero, Wesley Anderson, Arti Chhabria, Christopher Collins, Antonio Davis, Tyreef King, Alison Lin, Dionna Samuel, Val Sowell, Roberta Waite

Absent: Yexsy Alicea (Co-Chair)

Call to Order

J. Chapman called the meeting to order at 12:47 pm.

Approval of Agenda

The group took a moment to review the agenda for the day's meeting. **Motion: J. Chapman moved and T. Clark seconded to approve the document. Motion Passed: All in favor.**

Approval of Minutes (*August 26th & September 23rd, 2009*)

The group spent some time reviewing a draft of the minutes from their September meeting. **Motion: Afterwards, J. Chapman moved and T. Clark seconded to approve the draft of the minutes included in the handouts. Motion Passed: All in favor.**

Report of Staff

None

Report of Co-Chairs

None

Discussion Items:

• **Lit & Ed Calendar**

M. Getahun reminded the group that they had planned to give the CPG a presentation at the planning body's next meeting in order to report and explain their decisions on programs for heterosexual populations. She said that the Planning Priorities Committee also would be presenting on their process but believed that there would be enough time at the meeting for two presentations. J. Chapman felt that the group should continue with their original plan of presenting their decisions on heterosexual interventions at the November CPG meeting and the rest of the group agreed.

M. Getahun asked the group whether they wanted to convene again on November 18th before the next CPG meeting in order to solidify plans for their presentation. T. Clark noted that she would not be available for any meetings on the 18th. J. Chapman did not believe that it would be necessary for the group to reconvene in two weeks. She felt that the group would be able to sufficiently plan for their presentation by email before the next CPG meeting. The rest of the group supported the idea and J. Chapman said that she would email the committee members who had not yet returned their completed worksheets for the programs they had reviewed.

As the members of the Lit & Ed Committee had decided not to schedule another meeting for November, M. Getahun asked them whether they wanted to reschedule their next meeting for December 16th, the day of the next CPG meeting. T. Clark felt that the 16th was a sensible day for the group's next meeting. She then suggested that the committee use the December meeting to finish reviewing the prevention programs so that they could present the last of their results to the CPG before the end of the year. J. Chapman agreed with the idea; however, she felt that the beginning of the December meeting should be used to explain the process to any new members in attendance and to coordinate the committee's remaining planning work. The rest of the group agreed.

J. Chapman reminded the group that, after they had finished reviewing prevention programs, they still had to weight their factors and plan for the prevention provider panel discussions. M. Ross-Russell reported that she had submitted a request to AACO for a list of prevention providers in the area and the services they offered. However, she said that, although she had yet to receive a response from the grantee, OHP staff had been invited to attend a provider meeting in January, at which they could solicit participants for the panel discussions. She then suggested that the committee hold the panel discussions before weighting the factors because the providers' insights could greatly affect the weighting process. Additionally, she pointed out that the new members of the committee would likely do a better job of weighting the factors if they were given more time to understand the process. The rest of the group agreed.

- **Planning for CPG Workgroup Session**

J. Chapman stated that the committee's forthcoming presentation to the CPG would not be very different from the last update they had given the planning body. As a result, she noted that the PowerPoint developed for the last presentation could be used again after some minor revisions were made. M. Getahun supported the statement; however, she noted that, unlike the last presentation, the CPG would receive the explanations for the group's decisions a few days before the meeting.

- **Populations Summary Sheets**

M. Getahun directed the group's attention to the three handouts that gave a brief overview of research on MSM, youth, and PLWHA populations. The members of the Lit & Ed Committee then spent some time reviewing the documents in order to better inform their decisions about programs for the populations (see handouts for more details). While the group was reviewing the handout entitled *Brief Overview of Research on MSM Populations*, J. Chapman asked what the overall incidence numbers in Philadelphia had

been in 2007. After referring to the *Philadelphia Integrated Epidemiological Profile, 2009*, the group determined that a total of 675 new cases of HIV or AIDS had been recorded in Philadelphia in 2007.

- **Homework Report**

SUMIT – DENIED

J. Chapman started the process by reporting on the programs she had reviewed since the group's last meeting. She told the group that, although she had fully reviewed the program SUMIT, she did not feel it would be necessary for the committee to discuss every factor. She explained that, in her review, she had found that the lead author of the program's research recommended using other proven programs instead of SUMIT because the intervention had only led to modest change in one outcome that had not been sustained in the 6-month follow up. As a result, she felt that the program should be rejected and the rest of the group agreed.

Healthy Living Project – APPROVED

- Targets a specific population?
HIV positive men and women at risk of transmitting HIV
- Targets a specific behavior?
Designed to improve quality of life in broad areas of health – mental physical and emotional
- Effectiveness?
Yes – reduced unprotected acts with people of negative or unknown status
- Sound theoretical basis?
Social Action Theory
- Norms, Values, Consumer Preferences?
Yes – the deliverer is supposed to be a member of the targeted community.
- Intervention Feasibility?
Adaptability – Yes, the program was tested in three large cities, utilizing community agencies
Cost – fifteen 90-minutes sessions delivered over the course of a year with nothing else required besides staff.
Materials – a package is available
- Other considerations
PCRS connection – the program seeks to manage symptoms of depression to avoid unwanted consequences for clients, their friends, and their partners.

Mpowerment – APPROVED

- Targets a specific population?
Young gay and bisexual men ages 18 - 29

- Targets a specific behavior?
Reduce unprotected sex acts and increase condom usage
- Sound theoretical basis?
Diffusion of Innovation Theory
- Norms, Values, Consumer Preferences?
The CLI is run by a core group of gay men from the community
- Intervention Feasibility?
Cost – fairly inexpensive – run by core group of men from community and paid staff, campaign is run by word of mouth
Adaptability – Yes, run by community members
- Other considerations
PCRS connection – condom use skills training

Be Proud Be Responsible – APPROVED

- Targets a specific population?
African American male adolescents
- Targets a specific behavior?
Reduce positive thoughts about risky behavior
- Effectiveness?
At 3 month follow up, reports of significantly less sexual activity and fewer reports of unprotected sex and partners with multiple other sexual partners.
- Sound theoretical basis?
Social Cognitive Theory, Theory of Reasoned Action, and Planned Behaviors
- Norms, Values, Consumer Preferences?
Materials are tailored to the targeted population
- Intervention Feasibility?
Adaptability – T. Clark informed the group that the program had already been successfully adapted for females locally.
Cost – minimal – six sessions with materials available online.
- Other considerations
Performed locally
PCRS connection – Condom negotiation skills

Sisters Saving Sisters – APPROVED (with Reservations)

- Targets a specific population?
Sexually active, African American and Latina, inner-city, adolescent females
- Targets a specific behavior?
To eliminate or reduce unprotected sex, to reduce the number of sexual partners, and to prevent new STD infections
- Sound theoretical basis?
Social Cognitive Theory, Theory of Reasoned Action, and Planned Behaviors
- Norms, Values, Consumer Preferences?
The group determined that the program was culturally relevant to the target population due to its high retention rates. Additionally, the program specifies the need for an African American deliverer.
- Intervention Feasibility?
Low Cost – the single, 250-minute session intervention is delivered in a hospital setting by an African American woman with at least a college degree and experience working with inner city adolescents.
- Other considerations
Originated in Philly, but not currently funded locally.
PCRS connection – Condom negotiation skills

The group decided to approve Sisters Saving Sisters with reservations after they learned that the program did not currently have an intervention packet available. T. Clark stated that an intervention packet would be essential for the program because of the numerous games involved in its delivery.

FOY (Focus On Youth) + ImPACT – APPROVED

- Targets a specific population?
High risk, African American youth living in low-income urban community sites
- Targets a specific behavior?
Reducing truancy, substance abuse, and sexual risk behavior
- Sound theoretical basis?
Protection Motivation Theory
- Norms, Values, Consumer Preferences?
No evidence of youth involvement in program design but the intervention is supposed to be carried out in community settings
- Intervention Feasibility?
Cost – 1.5 hour sessions held each week for 9 weeks; package available

Staff – One facilitator and an assistant group leader
Adaptability – The program has operated in Baltimore

- Other considerations
The addition of ImPACT involves parents/guardians in the program.
PCRS connection – N/A

FOY (without ImPACT) – DENIED

T. Clark informed the group that the two versions of FOY were different in ways other than the addition of ImPACT. She explained that FOY without ImPACT targeted naturally formed peer friendship groups to address social approval, peer pressure, and condom usage. She noted that the program did not address truancy. M. Getahun pointed out that FOY had been developed from 1993-1996 while the version with the addition of ImPACT had been developed later, from 1999-2002. As a result, she speculated that the latter version might simply have been an update of the earlier FOY. M. Ross-Russell agreed and then pointed out that the addition of ImPACT changed FOY from a promising- to a best-evidence intervention. T. Clark suggested that the group recommend the use of FOY with the addition of ImPACT and deny the earlier version of the program. The rest of the group agreed.

TLC (Together Learning Choices) – APPROVED (with Reservations)

- Targets a specific population?
HIV+ adolescents 13-29 (only program to target positive youths reviewed)
- Targets a specific behavior?
Enhance health behaviors and condom use and eliminate or reduce unprotected sex and drug use
- Sound theoretical basis?
Social Action Theory
- Norms, Values, Consumer Preferences?
Male and female co-facilitators in order to mix the gender groups
- Intervention Feasibility?
Twenty-three 2-hour sessions, package available

T. Clark noted that the group would have to determine the availability of the materials for TLC before they could fully approve the program. J. Chapman agreed and stated that she would also like to know why the program had only received a promising-evidence designation. She felt that the TLC's low retention rates should not weigh heavily against the program since it targeted such a difficult population.

Street Smart – APPROVED

- Targets a specific population?
High-risk runaway youth, ages 11 – 18 years, males and females of various ethnicities (45% were dropouts)
- Targets a specific behavior?
Eliminate or reduce sex risk behaviors and substance abuse through the development of coping skills and self awareness
- Effectiveness?
Reduced unprotected sex (maintained significant level after 21 months)
- Sound theoretical basis?
Social Learning Theory
- Intervention Feasibility?
Cost – 10 sessions (9 small group and 1 individual) delivered over 3 week period; intervention package available; minimal materials required.
Staff – one shelter staff person and one trained facilitator
- Other considerations
Large homeless youth population in Philadelphia
PCRS connection – N/A

J. Chapman stated that, as with TLC, the targeted population of Street Smart was difficult to work with and so low retention rates should not be weighted too heavily against the program. She then stated her approval for the program because all of its other aspects seemed positive, especially since the population it targeted was large in Philadelphia. The rest of the group agreed.

LIFT – APPROVED (with Reservations)

- Targets a specific population?
HIV positive individuals with childhood sexual abuse histories
- Targets a specific behavior?
Eliminate or reduce risk behavior and teach coping skills for abuse and positivity
- Effectiveness?
Shown to significantly reduce risky sexual behaviors
- Sound theoretical basis?
Cognitive Theory of Stress and Coping
Cognitive Behavioral Treatment Strategies for Sexual Trauma

- Intervention Feasibility?
Cost – expensive, requires four therapists and two clinical psychologists
- Other considerations
No intervention package available
PCRS connection – outcomes showed reduced unprotected sex with all partners

J. Chapman informed the group that she had recently seen a presentation on LIFT that was delivered by one of the program’s designers. She believed that the program was very new, which she felt could explain why an intervention package was not yet available. She said that the program seemed as though it would be incredibly effective but noted that the likely cost would be prohibitive. She suggested that the group approve LIFT with reservations based on whether or not the program’s requirement for clinical psychologists could be altered. The rest of the group agreed.

Old Business

None

New Business

None

Review/Next Steps

- The committee reviewed their calendar and rescheduled their December meeting.
- Afterwards, the committee continued with their review of prevention programs.

Announcements

None

Adjournment

The meeting was adjourned by general consensus at 2:39 pm.

Respectfully Submitted,

Joseph Ellis, Staff

Handouts Distributed at the Meeting:

- Meeting Agenda
- Meeting Minutes (*September 23rd, 2009*)
- Brief Overview of Research on MSM Populations
- Brief Overview of Research on Youth Populations
- Brief Overview of Research on PLWHA Populations
- OHP Meeting Calendar

Literature and Education Committee

2009-2010

Tasks to complete

<p><u>October</u></p>	<p><u>November</u></p>	<p><u>December</u></p> <ul style="list-style-type: none">• Complete reviews of Heterosexual, IDU, and MSM programs
<p><u>February</u></p> <ul style="list-style-type: none">• Panel discussions• Continue narrowing list of programs	<p><u>March</u></p> <ul style="list-style-type: none">• Panel discussions	<p><u>April</u></p> <ul style="list-style-type: none">• Assign weights to factors (Worksheets 15-16)
<p><u>June</u></p>	<p><u>July</u></p>	<p><u>August</u></p>