

**Society for Prevention Research
18th Annual Meeting**

Pre-Conference Workshop

**Integrating Primary Prevention for Substance Use and Mental Health
with Prevention of HIV/AIDS and Other Associated Consequences of
Risky Sexual Behavior among At-Risk Youth**

June 1, 2010

8:30 am -- 5:00 pm

Background and Purpose:

The 2010 SPR meeting will focus on different levels of analysis and intervention for prevention. This focus also will include attention to translation science and the transfer of knowledge to new settings, populations, and modalities for prevention. This workshop will draw on those themes, and also build on the plenary from last year's SPR which highlighted sexual behavior and interventions to reduce HIV/AIDS, sexually transmitted disease and other conditions related to risky sexual behavior.

HIV prevention continues to be a concern in the United States, particularly for youth populations and especially among ethnic/racial minority and sexual minority youth. Rates of new infection are particularly high among young racial/ethnic minority men who have sex with men (MSM). For example, the number of new HIV cases among African-American MSM is highest among those who are 18-25. It also is concerning that young MSM are 2-3 times as unlikely to know their HIV status as older MSM. Relatively few prevention interventions with evidence of efficacy target youth and the modalities represented in these interventions often require expensive one-on-one professional contact or multiple group sessions, which may be difficult to sustain in the community. Another consideration is the range of developmental differences in this age group, as young people socially, cognitively, and behaviorally move from adolescence toward the greater autonomy of adult life. Different subgroups also may have needs that have not, until recently been well-documented, in the research literature. For example, there is evidence that risk and protective factors for development of problem behaviors (drug use, psychiatric disorder, etc.) among gay youth may mirror those of youth, in general, yet these youth may be exposed to discrimination and higher rates of coercive sexual experiences there which are relevant to the development of identity and effective behavioral self-regulation. HIV+ youth, regardless of background, face additional challenges in terms of health care, stigma, and balancing their lives with a chronic disease. There is a need for better interventions to prevent the acquisition and transmission of HIV among youth and to address the larger issues of social, sexual, emotional, and cognitive development. It is evident that primary prevention interventions, originally, designed to prevent drug use and psychiatric disorder also affect these outcomes, as well although their utility for youth who are at elevated risk for HIV infection are less clear. The lessons learned from primary prevention may be helpful in understanding how to

address the multiple simultaneous problems that are related to risky sexual behavior and its consequences.

The purpose of this workshop will be to bring together researchers from HIV prevention, primary prevention of drug use and psychiatric disorder, and those who have experience with evaluating risk and protective factors for sexual risk, drug use, and other key variables. The objective is to brainstorm new directions for HIV prevention research among youth, with particular attention to at-risk populations such as ethnic/racial minority and sexual minority youth. There is a need to better address developmental needs of these youth, while learning from the broader fields of HIV prevention and prevention of substance use and psychiatric disorder. Consideration will be given to important milestones and experiences which may shape sexual and drug use risk behavior, as well as consideration of different intervention modalities and systems for service delivery. This will be an opportunity for researchers to consider ways to translate what has been learned from primary prevention directed at substance use and mental health to HIV prevention. It also will be an opportunity to consider levels of analysis and prevention intervention beyond the individual or small group.

Specific learning Objectives:

- 1.) Participants will increase their understanding of behavioral and contextual factors which influence sexual and drug use risk behaviors in youth at-risk for HIV acquisition, particularly members of ethnic/racial and/or sexual minorities.
- 2.) Participants will increase their understanding of current interventions for the primary prevention of substance use and psychiatric disorder and their implications for behaviors relevant to HIV acquisition and transmission, such as sexual behavior, acquisition of sexually transmitted disease and justice system involvement.
- 3.) Participants will gain understanding of currently available HIV prevention interventions targeting youth.
- 4.) Participants will work together to brainstorm and articulate potential new intervention models to prevent HIV acquisition and transmission among youth, with consideration of new modalities and venues, as well as developmental and cultural needs of at-risk populations.

The presenters have a range of relevant experience have distinguished themselves in one or more areas related to this workshop. Dr. Jenkins (Chair) has worked in areas related to social and behavioral epidemiology, and the development, evaluation, and dissemination/adaptation of prevention interventions. Dr. Kellam has been involved in foundational work in the field of prevention, including consideration of developmental epidemiology and the development and evaluation of school-based prevention programs for children. Dr. Haggerty has done important work in the area of long-term effects of primary prevention programs with particular attention to sexual risk behavior. Dr. Stall has done pioneering work in a number of areas of HIV prevention, primarily among gay men, but also with injection drug users and his recent work clearly shows the importance of linking the kind of developmental epidemiology and intervention development that has typified work in prevention of mental health and substance abuse disorders with considerations for reducing sexual risks. Dr. Lightfoot has extensive experience conducting HIV

prevention research with high risk youth and applying developmental principles to risk reduction. Dr. Koenig has been involved with the small number of studies that have attempted to integrate prevention and care among HIV-positive youth. Her work has integrated epidemiological, clinical, and psychosocial perspectives. Dr. Harper has a long history of working with youth-serving organizations and conducting community participatory research with urban youth in Chicago. His work highlights the importance of looking at multiple levels of analysis and understanding ways to bridge academia and urban communities.

Agenda:

8:30-9:00am

Welcoming Remarks

Richard A. Jenkins, Chair (NIDA)

Dr. Jenkins will briefly discuss the objectives of this workshop and how it evolved from the plenary from last year's SPR which focused on sexual behavior. The workshop will draw on integrate what is known about principles for prevention from interventions to prevent mental health and substance use disorders, as well as principles from interventions to reduce sexual and drug use risks in youth and adults. It also will focus on application of these principles to work with populations at elevated risk for HIV infection, including ethnic/racial and sexual minorities.

9:00-9:40am

Title: The Developmental Epidemiologically Based Prevention Strategy: Impact of a Universal Classroom-Based Intervention on Young Adult Problem Outcomes

Sheppard Kellam (Johns Hopkins University & American Institutes of Research) -- 30 minutes

Dr. Kellam will discuss what has been learned about early antecedent risk factors for problem outcomes in adolescence, young adulthood and beyond. He will describe how this lead to developmental, epidemiologically-based randomized field trials testing whether interventions directed at early antecedents could reduce the long-term risk of the problem outcomes. Much of the attention on antecedents has focused early aggressive, disruptive behavior, which has been the target of a universal classroom behavior management method called the Good Behavior Game (GBG). Dr. Kellam will describe how the GBG was tested in multi-level randomized field trials in Baltimore public schools and how the GBG has been found to bring about short, intermediate and long term impact by ages 19-21. Impact has included reductions in drug and alcohol abuse and dependency disorders, regular smoking, delinquency and incarceration for violent crimes, suicidal ideation and attempts, and reduced use of school based services. In more recent analyses impact was found on sexually transmitted infections and on high risk sex behavior such as not using condoms. The principles of using developmental epidemiological strategies for prevention research will be described, using the impact of GBG on problem outcomes for illustration.

Q& A—10 min.

9:40-10:20am

Title: Unintended Effects of Social Developmental Interventions: Long-term Outcomes and the Prevention of Risky Sexual Behavior

Kevin Haggerty (University of Washington) – 30 min

Dr. Haggerty will discuss some of the debates regarding influences on sexual behavior and the potential developmental roles of social competency and prosocial behaviors. On this basis, researchers have argued for the need to expand the range of interventions to reduce risky sexual behavior among adolescents and young adults by implementing interventions aimed at improving general social competency and promoting prosocial behaviors. Dr. Haggerty will highlight how social development-focused prevention interventions have demonstrated sustained long term effects on risky sexual behaviors. he will share and discuss long term effects from the Seattle Social Development Project as well as two year follow-up data from Parents Who Care. The session aims to help participants understand current universal substance abuse prevention interventions and their implications for behaviors relevant to risky sexual behavior.

Q& A—10 min.

10:20-10:35am Break

10:35-11:15am

Title: The Development of Overlapping Epidemics among Young Gay Men: Risk and Resilience Factors

Ron Stall (University of Pittsburgh) – 30 min.

Dr. Stall will present evidence that a set of co-occurring psychosocial epidemics are operating in tandem to form a syndemic, or synergistic epidemic, among young gay men, a population at particularly elevated risk for HIV infection. The presentation will present a theory of syndemic production among young gay men, as well as the evidence for syndemic production in this population using data from large scale surveys. The presentation also will present evidence for the existence of substantial resilience in this population, and suggest ways that these strengths can be tapped for health promotion activities. The presentation will highlight commonalities in risk and resilience factors among gay youth and the general population, while also highlighting special concerns in addressing the needs of gay youth.

Q& A—10 min.

11:15-11:55am

Title: HIV/AIDS Prevention among High Risk Youth: Addressing Hard to Reach, Multi-Problem Youth

Marguerita Lightfoot (University of California-San Francisco) – 30 min.

Dr. Lightfoot will present findings from efforts to adapt effective HIV prevention programs to the need of the most at-risk youth. This presentation will examine a hypothesized model of protective factors for multiple problem behavior in a sample of runaway and homeless youth, a population at high risk for involvement in problem behaviors including substance use, sexual risk behavior, and delinquency. Though homeless youth are clearly a vulnerable population with numerous problem behaviors, Dr. Lightfoot will describe malleable protective factors that can be targeted and modified by prevention programs to decrease the likelihood of involvement in risky behaviors are less apparent. She will discuss implications for adaptation and development of HIV preventive interventions for runaway/homeless youth.

Q& A—10 min.

11:55-1:00pm Lunch on your own

1:00-1:40pm

Title: Characteristics and Prevention Needs of Adolescents with HIV Infection

Linda J. Koenig (Centers for Disease Control and Prevention) – 30 min.

Dr. Koenig will highlight the needs of youth who already have acquired HIV infection. It has estimated that as many as 50% of new HIV infections may take place in individuals between the ages of 15 and 24. In addition to these newly infected individuals, there are a growing number of children who were infected perinatally who, due to availability of highly effective therapy are surviving to adolescence and young adulthood. Dr. Koenig will describe the unique sets of clinical and psychosocial issues in each of these populations. She will provide a broad overview of the domestic HIV epidemic among youth, which will focus on epidemiology (demographic characteristics and trends), psychosocial issues (family/peer relationships and social support, sexual relationships and transmission risk, coping and mental health), and clinical/health challenges (medication management, serostatus disclosure, educational/vocational needs and transition to adult services). In addition, Dr. Koenig will describe the developmentally targeted prevention interventions that have been designed to promote medication adherence, sexual risk reduction and quality of life for these young people.

Q& A—10 min.

1:40-2:20pm

Collaborative Community-Based HIV Prevention Research for Youth at Risk for HIV

Gary W. Harper (DePaul University) – 30 min.

Dr. Harper will discuss efforts to conduct collaborative participatory research that engages both community members and community organizations that serve ethnic minority/sexual minority youth. Collaborative partnerships between community-based organizations (CBOs) and universities that actively involve youth in prevention research can serve to give youth a rare opportunity to have a voice in the development of prevention efforts that will eventually target them and their peers. By involving community entities, the products of HIV prevention research are typically more applicable to “real world” settings, and can be used by CBOs and activist groups for making the case that critical social change efforts are urgently needed, and often require attention to structural and community-level modalities to facilitate change and enable programs to develop. Dr. Harper will describe how to give voice to the struggles and successes of these young people through scientifically sound collaborative community research brings greater focus to ethnic minority/sexual minority youths' lives so that social action can occur. Dr. Harper will describe the issues in engaging community members and organizations from an academic base and the multiple levels of analysis needed to fully understand the issues faced by minority youth, particularly youth who are members of both ethnic/racial and sexual minorities, including the historical, social, and structural factors that negatively affect marginalized youth and increase their risk for HIV infection.

Q& A—10 min.

2:20pm-2:35pm Break

2:35-4:00pm Breakout Sessions

Participants in the workshop will be asked to break into small groups for the purpose of identifying an at-risk population and making use of the presentations to design a novel proposal for addressing HIV risk and related factors in that population. The proposals should take into account developmental factors, the broad understanding of risk and protective factors that can address sexual risk and co-occurring, developmentally related problems, and the need to consider settings, ecology, and participation from at-risk populations and associated service delivery systems. Consideration of structural, community, and organizationally-focused interventions will be encouraged, as well as interventions that target individuals, their social networks, and small groups. The presenters will make themselves available to the breakout groups to answer questions and foster transfer of learning.

4:00-5:00pm Group Discussion

The group will reconvene for the purpose of presenting their proposals and discussing the use of developmental concepts, different levels of problem analysis and consideration of settings and structural factors, as well as issues in gaining entry into communities and settings.

Target Audience: Prevention investigators who are interested in developing research relating to sexual behavior and its consequences (particularly HIV/AIDS and STDs) among youth

Methods: There will be opportunities for didactic learning, as well as small group, interactive learning

Materials: Participants will receive a complete list of slides and a summary of the small group discussions and plans

Meeting Chair:

Richard A. Jenkins, PhD

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Richard A. Jenkins, PhD is a Health Scientist Administrator in the Prevention Research Branch, Division of Epidemiology, Services & Prevention Research at the National Institute on Drug Abuse (NIDA), where he serves as the primary program officer for HIV/AIDS prevention research. Dr. Jenkins is a clinical –community psychologist with expertise in a variety of areas related to HIV prevention, including social and behavioral epidemiology; development, evaluation and dissemination/adaptation of prevention interventions; behavioral and social issues related to biomedical HIV prevention; and cross-cultural issues in HIV prevention. Dr. Jenkins came to NIDA from the Centers for Disease Control & Prevention (CDC) in 2006 and has been involved in trans-NIH efforts such as the HIV Prevention Trial Network, the HIV Vaccine Trial Network, the Adolescent Trials Network, and the Centers for AIDS Research. At CDC, he was responsible for cooperative agreements related to HIV prevention community planning and evaluation of factors related to recent HIV infection, while also serving in a number of research capacities for CDC-Thailand. Prior to that, he was a senior scientist at the Henry M. Jackson Foundation and involved in developing behavioral and social research related to HIV vaccine trials. He is a fellow of the American Psychological Association and recently received an award for Distinguished Contributions to the practice of Community Psychology by the Society for Community Research and Action.

Invited Speakers:

Kevin Haggerty, PhD

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Kevin Haggerty, MSW, is Assistant Director of the Social Development Research Group, University of Washington, School of Social Work. He is the Principal Investigator of the NIDA funded Health Disparities Family Connections study and Co-PI, project director of the NIDA funded Raising Healthy Children project. Mr. Haggerty has specialized in the development and testing of programs to prevent substance use, early sexual initiation, delinquency and violence, at the community, school and family levels. He has been involved in the development and testing of the Focus on Families program for parents in methadone treatment, Staying

Connected with your Teen, for parents of middle school youth, the school-based Raising Healthy Children program and the Communities that Care operating system for community prevention planning. Mr. Haggerty is an international trainer and speaker in the areas of substance abuse and delinquency prevention and has written extensively in the field, including journal articles and book chapters.

Gary W. Harper, PhD MPH

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Gary W. Harper, Ph.D., M.P.H. is a Professor in the Department of Psychology and Director of the Master of Public Health Program at DePaul University, Chicago, Illinois. Dr. Harper is a member of the Behavioral Leadership Group within the National Institutes of Health's (NIH) Adolescent Medicine Trials Network for HIV/AIDS Interventions, and the NIH Office of AIDS Research Advisory Council. Dr. Harper's research has focused on the health promotion and prevention needs of young people who experience varying degrees of oppression and marginalization, with a focus on giving voice to the social justice needs of young people. He has worked to create developmentally and culturally appropriate HIV prevention and treatment programs for various groups of adolescents, including homeless youth, urban African American and Latina female youth, African American and Latino gay/bisexual/questioning male youth, youth living with HIV, and primary school children/rural youth in Kenya. He conducts this work in collaboration with community agencies and community members. Dr. Harper has conducted research and service work in a range of urban communities throughout the US, as well as in urban and rural communities in Kenya. Dr. Harper has been involved in various forms of adolescent-focused HIV prevention, treatment, research, advocacy, and community organizing for over 24 years. He also addresses other areas of community health intervention, as well as the formation of community-university partnerships to improve research and service delivery. Dr. Harper has received local, regional, and national awards for his commitment to research, mentoring, and community service.

Sheppard Kellam MD

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Sheppard G. Kellam, MD is a public health psychiatrist who has played a major role in establishing concepts and methods for prevention science, as well as contributing to knowledge about early risk factors and their malleability. He led three the three epidemiologically based randomized field trials testing preventive interventions directed at early antecedents of the long-

term outcomes that provide the data base for this application, including the follow-up of the 2,311 first graders from the first generation of Baltimore population based randomized prevention trials to age 19 to 21 as they made the transition to young adulthood. This work was done in close collaboration with the Baltimore City Public School System (BCPSS). These large-scale population based randomized field trials have been supported by NIMH, NIDA, and NICHD. His theoretical, methodological, and substantive contributions began with the early intervention studies in Woodlawn, an African American community on the South Side of Chicago, from 1963 through 1982. He and colleagues coined the name *developmental epidemiology*, i.e., mapping the variation in developmental paths leading to health or disorders in defined populations. This work was done in close harmony with a board of Woodlawn community organization leaders. It led to developing and implementing a developmental epidemiological prevention research strategy that precisely aimed interventions at early risk factors and, using randomized designs, examined not only main effects but the variation in impact on developmental paths and outcomes. From 1982-1993 Dr. Kellam was Chair of the Department of Mental Hygiene (now the Department of Mental Health) in the Johns Hopkins Bloomberg School of Public Health. He was Founding Director of the NIMH Hopkins Prevention Research Center that supported the earlier work. Recognizing the vital need to bridge the traditional gap between public education and public health prevention research, in March of 2000 he accepted an invitation of the American Institutes for Research to come full time to AIR and develop a new *Center for Integrating Education and Prevention Research in Schools (Ed/Prev)*. In 1996 he was awarded the Rema Lapouse Award for lifetime contributions to public health and prevention science by the Mental Health, Epidemiology, and Statistics Sections of the American Public Health Association. In 1999 the World Federation for Mental Health presented him their Distinguished Public Mental Health Award for his work in advancing the science for prevention of mental and behavioral disorders. He was the first President elected by the full membership of the Society for Prevention Research from 1998-2001. In 2004 he was elected a Fellow of the Academy of Experimental Criminology. In 2008 he was awarded the Presidential Award of the Society for Prevention Research. In 2008 as well he was awarded the Director's Special Appreciation Award by NIDA. For the last several years he has been Professor Emeritus of the Johns Hopkins Bloomberg School of Public Health and is now Founding Director of the AIR Center for Integrating Education and Prevention Research in Schools in addition to the Hopkins Prevention Research Center.

Linda J. Koenig, PhD

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Dr. Linda Koenig is a senior scientist in the Prevention Research Branch, Division of HIV/AIDS Prevention, at the U.S. Centers for Disease Control and Prevention in Atlanta. Prior to this position, she served as Chief of the Social and Behavioral Studies Section, and Assistant Chief for Behavioral Science for Mother-Child Transmission, Pediatric & Adolescent Studies in the Division's Epidemiology Branch. Dr. Koenig has led five multi-center HIV studies, many addressing the social and behavioral aspects of HIV in children, adolescents and new mothers. She led the development of the HEART adherence intervention, and most recently, the

Adolescent Impact intervention to improve health and reduce risk behavior in HIV-positive adolescents. She has authored or coauthored over 50 scientific papers and chapters in the areas of psychosocial and behavioral issues for HIV-positive youth, medication adherence, and adolescent mental health, and is the editor of "From Child Sexual Abuse to Adult Sexual Risk", an APA continuing education book. Her service commendations include the DHHS Secretary's Award for Distinguished Service and nomination for the CDC Charles C. Shepard Award for Excellence in Science. Dr. Koenig received her Ph.D. in psychology from Northwestern University and completed an NIMH postdoctoral fellowship at Stanford University. Prior to joining CDC in 1997, she was on faculty at Emory University where she taught undergraduate and graduate studies and directed the clinical psychology training program.

Marguerita Lightfoot, PhD

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Dr. Marguerita Lightfoot is Co-Director of director of the Center for AIDS Prevention Studies (CAPS) and Director of the Technology and Information Exchange (TIE) Core. Dr. Lightfoot is a counseling psychologist whose research has included HIV prevention work in the juvenile justice system and with runaway and homeless youths in Los Angeles. One particular focus of her research with adolescents has been to adapt and utilize interactive and engaging delivery of HIV preventive activities on computers. In addition, she has worked as a Mental Health Clinician at a mental health clinic that served primarily low-income people of color. She's conducted psychotherapy with predominately African American and Latino adults, couples, and families infected and/or affected by HIV. She is particularly interested in developing cost-effective interventions that are easily translatable with utility in community settings and utilizes new technologies to engage disenfranchised individuals in health promotion activities. She has a unique ability to determine the programmatic needs of the most vulnerable populations and develop programs that are cutting-edge and likely to successfully engage these populations to increase mental health functioning and well-being. A notable, ongoing research project has been adapting interventions to reduce HIV-related risk among urban street youths and youths living with HIV in Uganda.

Ronald D. Stall, PhD, MPH

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Dr. Stall is Professor and Chair of the Department of Behavioral and Community Health Sciences in the Graduate School of Public Health at the University of Pittsburgh. The primary foci of his research have been in HIV prevention and behavioral epidemiology, both in the United States and abroad. He has conducted numerous research projects in the areas of substance abuse epidemiology, smoking, aging, mental health, and housing as health care. He has been instrumental in providing recognition of the simultaneous, overlapping epidemics of mental health and substance use problems experienced by gay men and the developmental bases for these “syndemic” conditions. Although a great deal of his research has been conducted among gay men, he also has worked with other populations at high risk of HIV infection, including injection drug users. Before coming to the University of Pittsburgh, Dr. Stall served as chief of the Prevention Research Branch of the Division of HIV/AIDS Prevention with the National Center for HIV, STD and TB Prevention of the Centers for Disease Control and Prevention (CDC) and prior to that, served on the faculty of the University of California at San Francisco, where he was a longtime collaborator with UCSF’s Center for AIDS Prevention Studies (CAPS) on projects including the AIDS Behavioral Research Project, the San Francisco Men’s Health Study and the Urban Men’s Health Study. Dr. Stall has co-edited several books and special issues of journals, including “Collaborative Community Research: Partnerships Between Research and Practice,” of Health Education and Behavior; “Intravenous Drug Use and AIDS: Preventing the Second Wave of the Epidemic,” of the Journal of Drug Issues; and the book “Anthropology and Epidemiology: Interdisciplinary Approaches to the Study of Health and Disease.” He currently serves on the editorial boards of several journals: Social Aspects of AIDS, AIDS Education and Prevention, Journal of Sex Research and AIDS Care. He also has served on editorial boards of Medical Anthropology Quarterly and Drug and Alcohol Dependence and has previously been a member of NIH’s “Behavioral and Social Science Approaches to Preventing of HIV/AIDS” study section.