

Honors program: UConn AIDS/HIV program selected as one of top in U.S.

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STORRS — An HIV/AIDS prevention program developed by researchers at the University of Connecticut has been selected as one of the top performing in the country by the U.S. Centers for Disease Control and Prevention, and is being implemented around the world.

Research scientist and clinical psychologist Deborah H. Cornman is the associate director of university's Center for Health, Intervention, and Prevention, or CHIP, which created the "Options" program that she has been administering for about 10 years.

The CDC estimates that there were approximately 56,000 new cases of HIV infections reported nationally in 2006, which is the most recent data available.

"Options" was selected by the CDC as one of eight intervention programs that was included in the "2008 Compendium of Evidence-based HIV prevention interventions" publication.

The CDC annually publishes a compendium highlighting programs that have been scientifically proven to reduce HIV and other sexually transmitted diseases, risky behaviors, or promote safe behaviors.

In Connecticut, a study that ran from October 2000 through August 2003 recruited about 500 HIV-positive patients from two state HIV clinics and found that risky behavior decreased significantly among those who participated in the "Options" program, compared with those who did not, researchers said.

Uphill battle

"We know the uphill battle that HIV prevention faces at this point in the epidemic given the increasing number of people living with HIV," Richard Wolitski, acting director of the CDC's Division of HIV and AIDS Prevention, said in a statement.

Referring to health care organizations and schools, Wolitski said, "These partners have an urgent need for additional proven interventions to add to their HIV prevention toolkit."

With funding support from the U.S. Health Resources and Service Administration, HRSA, "Options" has expanded to 15 health care facilities throughout the country and also is being implemented in other countries, including eight HIV clinics in South Africa and military hospitals in Mozambique and Uganda.

CDC funded the UConn program to develop manuals including implementation, protocol, risk reduction strategies, and training for clinics and private practitioners, Cornman said. The manuals are available in hard copy and electronic form.

Based on studies, about a third of HIV positive people do not practice safe behavior, Cornman said.

"One of the greatest concerns are about those who don't know they are HIV positive, however this program is not designed for those who have not been tested," Cornman said.

Integrates prevention and treatment

“Options” is of the few programs with demonstrated effectiveness that integrates prevention and treatment in a health care setting, she said.

“Why not make integrated treatment available to them?” Corman asked. “They are a captive audience because you are taking advantage of the fact that they are coming in for treatment.”

This program has been shown to be effective in the United States in 2006, Cornman said, and it was shown to be effective in South Africa in a small study published in 2008.

“Now we are working on a large-scale trial in South Africa in 16 clinics,” Cornman said, which is funded by the United States National Institutes of Health.

They also have received funding through the President Emergency Plan for AIDS Relief, or PEPFAR, to do a version of the “Options” program in Mozambique and Ethiopia, where Cornman has been implementing the program.

“We go into a setting and see what resources they have and learn about the culture and make modifications,” Cornman said.

“In South Africa, the adherence counseling is delivered by lay counselors as opposed to physicians in the United States, while in Ethiopia it will likely be nurses who will deliver the program,” Cornman said, adding that in Mozambique they work with peer educators to develop and deliver the information.

They are looking for the program to be feasible, acceptable, and sustainable over time, Cornman said.

Myths about about AIDS

“We heard that drinking water that the African potato was soaking in will get rid of AIDS,” Cornman said.

Additionally, there is still a social stigma in Africa in terms of the gender imbalance, Cornman said, adding, “There are a lot of issues we deal with.”

Sensitivity to societal differences and cultural expectations are key to success.

For example, Cornman said, “How do you empower women safely when a woman who is financially dependent might get thrown out if she demands he wear a condom?”

The counseling program uses motivational interviewing to encourage people to chose safer behavior, working collaboratively with them to have them come up with strategies, along with lots of role playing.

“It’s not telling them what to do, it is respecting the patient as an expert in their own life situation,” Cornman said. “We want the solution to come from the patient.”

In the United States, the “Options” program has been shown to reduce unprotected sex for those who were in the program while those not in the program increased over time.

“If you don’t intervene, the likelihood of unprotected sex incidents will increase over time,” Cornman said.

“It’s very exciting,” Cornman said of the CDC’s recognition. “And what’s happened is that people are contacting me out ‘Options.’ It is very important for us to get these programs that have been shown to be effective get out to the communities.”