Selecting Effective Behavioral Interventions for Men who have Sex with Men

Simple Steps for Success

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Behavioral Interventions

- If proven to work under research conditions, called Effective Behavioral Interventions – EBIs
- Those being diffused by CDC, called DEBIs (Diffusion of Effective Behavioral Interventions)
- Choosing an EBI or DEBI which best matches your community and your agency is more likely to be effective in the real world
How To Select an Intervention

- Need to get answers to two questions:
  - Is this the best Intervention for the target population?
  - Does your agency have the resources to implement and maintain this Intervention?
How do you get the answers?

- Follow 5 Steps to Selecting an Intervention
  - Conduct A Community Assessment
  - Choose Target Population and Risk Behavior
  - Examine Interventions for Chosen Population
  - Assess Agency Capacity
  - Select a Matching Intervention
Step 1 - Community Assessment

- Assess the community’s HIV prevention needs through observations, interviews, data collection, collaboration, etc.

- What are the populations? Subpopulations?
- What are their specific risk behaviors?
- What are their specific prevention needs?
Community Assessment

**Means:**
- Physically going out into the community (bars, cruising areas, parties, bookstores, etc)
- Mapping activity (draw a simple picture)
- Finding out about activity (what is happening when and where)
- Interviewing people who see activity, work with the population, are a member of it, etc.
- Getting closer to the community and gaining access to them

**Does Not Mean**
- Collecting own data
- Conducting a big needs assessment
- Spending a lot of time, money or resources
Step 2 – Choose Population/Behavior

- Choose population and identify their risk behavior to target for change based on information from Community Assessment
  - What is the main target population?
  - Is there a subpopulation?
  - Who and what behavior are you specifically looking to target with an intervention?
Step 3 – Examine Interventions

- Examine interventions to find a good fit for your community
  - Which interventions target your chosen population?
  - Which intervention best fits the populations needs (works to modify an identified risk behavior)?

- For info on EBIs, http://www.cdc.gov/hiv/topics/research/prs/evidence-based-interventions.htm
- For info on DEBIs, www.effectiveinterventions.org
Step 4 – Assess Agency Capacity

- Assess the Agency’s ability to plan and implement an intervention using all available resources/tools.
  - Does the Agency have the capacity to implement the intervention (staff, expertise, funding, materials, etc.)
  - Does the Agency have the ability to recruit and retain work with the population?
  - Does the Agency have the ability to implement and maintain an intervention with fidelity (without changing it)?
- There are agency readiness self assessment tools and other resources for agency’s to use at [www.effectiveinterventions.org](http://www.effectiveinterventions.org)
Step 5 – Select Intervention

- Select an intervention based on information from Community and Agency Assessments
  - Which intervention is the best match for your community and your agency? Needs to fit both.
  - Create a detailed Implementation Plan, Propose an Intervention and Prepare Your Agency to Implement and Maintain the Intervention over time
Interventions and the Community

- Organizations proposing interventions should consider the work of the CT HIV Planning Consortium (CHPC) and DPH or other funders (priority populations/interventions, data, and RFP guidelines)
- Organizations need to identify target populations in their community and then interventions appropriate for them
- Organizations must demonstrate the target populations need for prevention services and how the intervention meets that need as well as how the agency can meet it
- Effective interventions should always begin with an up-to-date community assessment of each target population proposing to work with in the community – things change
Interventions and DPH

- DPH’s HIV Prevention Unit puts out a Request for Proposals (RFP) every three years for prevention services.
- DPH bases the RFP on CHPC Priority Populations/Interventions.
- DPH’s HIV Prevention Unit supports the use of Evidence-based Interventions for all Populations.
- DPH Prevention Unit staff are assigned as Intervention Specialists to oversee the implementation of the interventions.
- Intervention specialists can identify capacity building assistance and or training needs.
Future Goals

- Continue to fund appropriate science-based prevention interventions for all populations including MSM, why?
  - Cost effective, Extensive research already done, Easy to replicate and monitor
  - Appropriate interventions have been researched, proven effective and are culturally appropriate

- Ensure Interventions target populations that have been identified as high priority including MSM
Future Goals continued...

- Ensure chosen interventions are those that will have the greatest impact reducing HIV incidence
- Ensure that more interventions are available for gay men and men who have sex with men
Immediate Next Steps

- CHPC Priority Setting Process (In Progress)
  - Identify target populations and interventions for them and rank them in terms of priority
- DPH RFP Process (Fall 2010?)
  - RFP based on priorities set by CHPC and other recommendations
- Organizations Respond to RFP (Fall 2010?)
  - Propose target populations and interventions based on CHPC priorities and RFP guidelines
For More Information

- For DEBI info
  www.effectiveinterventions.org

- For 2009 CDC Compendium
  http://www.cdc.gov/hiv/topics/research/prs/evidence-based-interventions.htm

- For DPH funded interventions
  www.ct.gov/dph