

P3 Primary Prevention for Positives

If every new HIV infection involves an HIV+ person, why do most prevention programs only target HIV- persons? In the Fall of 2000, AIDS Partnership California (APC) initiated the primary Prevention for Positives (P3) Initiative, awarding grants to six ethnic minority CBOs to conduct formative research on what people of color with HIV want and need in an HIV prevention program. Three CBOs also developed HIV prevention programs based on the formative research findings. Because little is known about the prevention needs of people with HIV, conducting formative research is key to developing interventions that are effective, culturally competent, and welcomed by the community served.

HIV+ African American sex workers and substance users

CAL-PEP and Tranquillium Center
Oakland and Richmond, CA

Target audience

CAL-PEP serves primarily African Americans, sex workers, drug users and homeless persons in Alameda County, CA. Tranquillium serves primarily HIV+ persons in Richmond, CA. For the P3 project, CAL-PEP and Tranquillium

focused on HIV+ African American sex workers (current or former) and drug users. These clients also may experience homelessness, mental health concerns and domestic violence.

Why African American sex workers and substance users?

- In Alameda County in 2000, 57% of all AIDS cases were among African Americans.
- In 2000, 31% of all new AIDS cases were among heterosexuals and 13% among IDUs.
- Of the IDU cases, 73% were among African Americans.
- CAL-PEP has a 17-year history of serving sex workers at risk for HIV infection.

Findings about clients

CAL-PEP and Tranquillium conducted 24 key informant interviews with the following results:

- 95% were in **primary care** (taking medications and/or going to provider visits)
- Reported **modes of transmission** were
 - 40% unprotected sex
 - 20% IDU
 - 20% MSM
 - 20% unsure - either unsafe sex or drug use
- Over 50% said they **did not use condoms with their main partner** if their partner was HIV+.
- All who reported having an **HIV-main partner used condoms.**
- 40% reported **former or current sex work**, and all of those used condoms with their "johns" or customers.
- Over 25% reported **speaking to young people about being HIV+** in schools and churches.
- Half of the women felt comfortable **disclosing their status to friends or loved ones**, whereas 83% of the men had already disclosed.

P3 Primary Prevention for Positives

HIV+ African American sex workers and substance users

" My partner hates using condoms, so sometimes we don't. At first it was like, since we both have it [HIV], let's just do it [have sex]. I learned that we may have different strains and could infect each other worse. "

-Male, 41 years old, HIV+ 11 years

Findings about prevention programs

- HIV prevention messages need to be more visible and "real."
- Messages should be in places where regular folks go, such as grocery stores, post offices, beauty supply/barber shops and in high-risk social networks.
- Messages should be more "real" and graphic about what it's like to have HIV/AIDS.
- Participants mentioned smoking ads, "HIV stops with me" and it-could-happen-to-me ads as being effective.
- More outreach should be done to people who don't know their status.
- HIV+ persons should be trained to speak at various venues and deliver prevention messages. Many believed that when they speak about getting HIV, they can prevent even one person from becoming infected.
- When asked what was the one thing that could have helped in keeping them from becoming infected, 83% said abstinence and safer sex/safer drug use.

*www.hivstopswithme.com

Next steps

- Move toward integrated services model for CBOs.
- Further explore P3 programming to those who are less informed (clients tend to know more).
- Further explore the idea of realistic portrayal of HIV within a cultural context.
- Explore social marketing campaign: "Are you HIV+ What are you doing to find out? To prevent giving/getting HIV?"
- Continue with support, technical assistance and evaluation via APC and others.
- Continue with collaborations.

Surprising findings/ Lessons learned

- Participants were very honest in answering intimate questions and were candid about their family and personal lives.
- Participants were eager to come to individual interviews-we exceeded recruitment goals.
- Using existing outreach staff for referrals and calling participants several times to remind them of their appointments helped in recruitment.

AIDS Partnership California (APC) is a private-public funding collaborative that includes foundation and corporate funders and the California State Office of AIDS. APC is a program of Northern California Grantmakers, an association of 160 foundations and corporate giving programs.
116 New Montgomery St., Suite 742
San Francisco, CA 94105
Phone: 877.624.2755 Fax: 415.777.1714
Email: apc@ncg.org
www.aidspartnershipca.org

