PROGRAM ABSTRACT

TITLE VOLUNTARY COUNSELING AND TESTING FOR FEMALE SEX WORKERS (VCT PROGRAM)

SUMMARYThe spread of HIV remains a growing concern in China. Sexual
transmission, especially among high-risk groups such as sex
workers, is thought to play a large role in its increasing prevalence
rates. Since early identification of serostatus among newly infected
individuals is key to preventing virus transmission, the Voluntary
Counseling and Testing (VCT) Program was designed to bring STI
testing and STI/HIV education to female sex workers in China. This
program aims to increase STI/HIV testing, awareness of infection,
STI/HIV knowledge, and consistent use of condoms in order to
ultimately reduce rates of STI infections.

The VCT Program is composed of a pre-test counseling session, STI testing, and a post-test counseling session. During the first 25minute VCT counseling session, the counselor introduces the program and works with the participant to: complete a risk assessment; identify challenges related to risk reduction; create a risk reduction plan; and practice condom use skills. After the first counseling session, the participant completes STI/HIV testing and schedules a post-test counseling session when the results are available. During the 20-minute post-test counseling session, the counselor reviews and interprets the test results and checks to make sure the participant understands the implications of any positive results. The counselor also reviews common STI symptoms and discusses with the participant how she might implement the risk reduction plan including changes to the plan, condom skills, and other issues related to risk reduction.

A randomized controlled study evaluated the efficacy of the VCT Program compared to standard of care STI testing and treatment. Female sex workers (N=278) completed baseline and 6-month postprogram questionnaires (measuring demographic information, knowledge of STIs/HIV and condom use, condom use self-efficacy, and consistent condom use) and STI testing (for gonorrhea, chlamydia, trichomoniasis, syphilis, and genital warts). All women who tested positive for any STI were provided with free treatment.

	Effects of the VCT Program on STI/HIV knowledge and perceptions were analyzed with paired t tests and chi-square tests. A generalized linear model was also used to control for the influence of potential confounders (e.g., education level) on STI/HIV knowledge. Multivariate logistic regression was used to analyze the effect of the program on condom use and STI rates, while controlling for any potential confounding factors (e.g., age, marital status).		
	knowledge than the control group, the V knowledge of STI sy .05); and condom us significantly greater control group (p < .0 control group tester	bited significantly larger control group ($p < .001$) /CT group showed signifi- mptoms ($p < .001$); HIV t se ($p < .01$). The VCT group increase in consistent co 05). Finally, significantly d positive for an STI at the als in the VCT group.). Compared to the icant increases in ransmission modes (p < up demonstrated a ondom use than the more individuals in the
Global HIV Archive Category	✓ Sexual risk reduction (secondary)	Community mobilization	Antiretroviral adherence
	☑ HIV testing and education (primary)	□ Reproductive health	☑ High-risk populations (secondary)
	•	egories reflect the main r ntent categories may be ram.	
Implementation Level	☑ Individual (implemented one-on-one)	Couple/ family (implemented with a couple or family)	□ Group (implemented in small groups)
	□ Structural (imple economic, political, levels)		
Implementation Setting	☑ Community (implemented through community-based organizations	☐ School (implemented in schools)	□ Clinic (implemented in clinics)

	The <i>VCT Program</i> may also be im individuals living with HIV or at		
Original Target Population	The original <i>VCT Program</i> was implemented in a suburban area of Nanning in southern China. Participants were female sex workers recruited from entertainment establishments (restaurants, barbershops, hair-washing rooms). They were at least 18 years old with a mean age of about 24 years. More than half (62%) were Han ethnicity, most lived with other female sex workers (72%), and most reported having a stable partner (72%).		
	female sex workers. This progra testing content and approach m	hay be useful in increasing testing different types of communities and	
Program Components	Booster sessions for participants	Formalized curriculum	
		Medication adherence and	
	 Community outreach/ mobilization Condem demonstration 	routine clinic visits	
		Motivational interviewing	
	 Condom demonstration Continual assessment of progress 	Multi-year program	
		Needs assessment	
	Educational materials	Peer education/ counseling	
	(e.g., leaflets, posters,	□ Presentations	
	comics, magazines)	☑ Role Plays	
	Electronic media (e.g., radio, cell phones,	Stakeholder investment	
	internet, videos)	☑ STI/HIV testing	
Program Length	The <i>VCT Program</i> consists of two sessions and an STI exam for each participant. Each VCT session is approximately 20 – 25 minutes in length. The STI exam lasts about 15 minutes.		
Staffing Requirements/ Training	counselors. The training duratio	0	

	depend upon the size of the population you wish to serve.	
Program Materials	The <i>VCT Program</i> package contains most of the materials needed to implement the program.	
	 With the guidance provided in the Advance Preparation section of the Counselor Training Manual you will need to create/select the following materials for the counselor training sessions: Case studies/ role play scenarios Videos Sample lab reports 	
	 Additionally, you will need to obtain the following materials for the counseling sessions: Penis model/proxy and condoms (for the condom demonstration) Pens/pencils and paper Appointment cards Referral information for additional medical/psychosocial services 	
A NOTE ABOUT Adaptation	The Global HIV Archive program package includes a Customized Adaptation Handbook to help program staff successfully adapt the <i>VCT Program</i> for new settings and target populations. The Adaptation Handbook details a set of pragmatic, easy-to-follow steps to facilitate making changes to the program, while preserving the components that made – or are believed to have made – it effective in the first place.	
A NOTE ABOUT Evaluation	Each Global HIV Archive program package contains the original evaluation instruments used to evaluate the program. In the original evaluation of the VCT Program, participants completed a self- administered questionnaire at baseline and 6-months post- program. These questionnaires are included in the Original Evaluation Materials booklet.	
	The program package also includes an Evaluation Resource Guide, containing select questions to assess relevant HIV outcomes such as risk from sexual behaviors and condom use self efficacy.	
	If you would like to conduct an evaluation with your population, it is important to assess the applicability of the original studies' survey	

questions to your context/setting. For instance, some questions contain region-specific language and terminology that you might need to adapt to make relevant to your population. Pre-test the instrument with a small group of individuals representative of your population prior to administering it to the entire group. This pretest may reveal in advance potentially problematic questions.

Program Acquisition And Implementation Costs Global HIV Archive program packages are available in boxed, flashdrive, and downloadable formats. The cost of this Global HIV Archive program package includes:

- *Quick Guide to Program Package* a roadmap to get oriented to the *VCT Program* and tips for how to get started
- User's Guide an overview of the VCT Program including information about the original implementation and evaluation
- *Counselor Training Manual* a guide to training counselors about the program
- *Counselor's Manual* a comprehensive guide detailing counseling session components
- Handouts & Worksheets photocopy masters of documents needed for the counselor training and VCT counseling sessions
- *Customized Adaptation Handbook* a guide to customize adaptations to the *VCTProgram*
- Original Evaluation Instruments surveys used to measure the effectiveness of the original implementation and other evaluation information, including:
 - Study Procedure Flow Chart
 - Outreach Worker Recruitment Training Manual
 - Data Collectors' Handbook
 - Study Survey Field Guide
 - Baseline Survey
 - 6-Month Follow-up Survey
- *Evaluation Resource Guide* a set of scales to consider using when evaluating HIV prevention program effectiveness

The following program materials are also available in Chinese:

• Checklist for VCT Program Package – a one-page guide of Chinese documents available

	 Counselor Training Manual (广西高危妇女干预项目VCT咨询员培训教学大纲) - a guide to training counselors about the program
	 Counselor's Manual (广西高危妇女干预项目vcr咨询干预手册) - a comprehensive guide detailing counseling session components
	 Original Evaluation Instruments – surveys used to measure the effectiveness of the original implementation and other evaluation information, including: Study Procedure Flow Chart (高危妇女VCT干预项目的工作程序) Outreach Worker Recruitment Training Manual (横县高危妇女STD/HIV预防研究项目外展工作人员培训方案) Data Collectors Handbook (高危妇女HIV/STD干预项目 问卷调查人员工作手册) Study Survey Field Guide (问卷调查工作人员备忘录) Baseline Survey (服务行业工作人员调查问卷) 6-Month Follow-up Survey (服务行业工作人员调查问卷)
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Bibliography	Li, Xiaoming et al,. (2006). Short-Term Effect of a Cultural Adaptation of Voluntary Counseling and Testing Among Female Sex Workers in China: A Quasi-Experimental Trial. <i>AIDS Education and Prevention</i> , 18(5), 406-419.