



TURNING POINT

HIV Risk Reduction for Injection Drug Users & Their Sex Partners

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FOCUS

- Injection Drug Users & Their Non-injecting Partners
- Gay/Bisexual Men
- STD Clinic Clients
- Women
- Minority Specific
- Other

SUMMARY

TURNING POINT originally part of the National AIDS Demonstration Research (NADR) Project funded through the National Institute on Drug Abuse during the late 1980s. Like the other NADR grant programs, *TURNING POINT* was designed to conduct aggressive outreach to locate and provide HIV/AIDS prevention services to injection drug users (IDUs) and their sex partners. The program aims to reduce HIV infection risk by helping IDUs recognize: (1) the behaviors that make them susceptible to contracting HIV, (2) the severity of AIDS, (3) the benefits of specific HIV risk reduction behaviors, (4) the barriers to the adoption of risk reduction behavior, and (5) their personal ability to execute risk reduction behaviors.

ORIGINAL SITE

- Community-Based
- Clinic-Based

APPROACH

- Behavioral Skills Development
- Community Outreach
- Condom Education/Access
- HIV/STD Education
- Needle Cleaning/Exchange
- Self Efficacy/Self-Esteem

The program includes HIV antibody blood testing at intake; the provision of HIV/AIDS information within a Health Belief Model; and the use of video presentations, role plays, hands-on demonstrations of proper needle decontamination and condom use, and printed materials.

The original evaluation of *TURNING POINT* compared the effectiveness of the Standard three-session intervention to the six-session Enhanced intervention. Of the 276 IDUs who reported unsafe needle risk behavior at baseline, 58% in the standard intervention and 71% in the enhanced intervention reported safer needle-use practices at the six-month follow-up assessment.

SUITABLE FOR USE IN

COMPONENTS

- Behavioral Skills Practice
- Group Discussion
- HIV Antibody Testing/Counseling
- Lectures
- Peer Counseling/Instruction

TURNING POINT is suitable for use in medical clinics, public health settings, and other medically-oriented agencies and organizations. Note that the site's facilities must include the capacity to draw blood for HIV antibody testing by certified personnel, such as trained nurses or phlebotomists, and the capacity to test the blood samples or to arrange for sample testing.

- Role Play
- Safer Sex Communication/Negotiation
- Video
- Other

ORIGINAL INTERVENTION SAMPLE

Age, Gender

average age about 37, 73% male

Race/Ethnicity

79% African-American, 18% White, and 3% Other Race/Ethnicity

PROGRAM LENGTH

The Standard Intervention includes three sessions: (1) HIV Antibody Pre-test Counseling; (2) HIV Risk; and (3) HIV Antibody Post-test Counseling. The Enhanced Intervention includes the three sessions in the Standard Intervention as well as three more intensive sessions: (4) HIV/AIDS Pathology; (5) Drug-Addiction, and (6) Safe Sex and Relationships. Each session lasts between 60 and 120 minutes. The sequencing of the final three Enhanced sessions is flexible.

Three booster sessions are also included. These sessions cover material previously presented in the curriculum and are designed to reinforce the HIV/AIDS prevention message. Each of these sessions lasts about 60 to 75 minutes each.

STAFFING REQUIREMENTS/TRAINING

Both the Standard and Enhanced Interventions are delivered by a *Counselor-Educator (CE)*. Although there are no special training requirements for the CE, persons with prior psychoeducational experience are recommended. Also, the program includes the administration of HIV antibody tests which must be completed by a nurse or phlebotomist.

HAPPA PROGRAM PACKAGE

The HAPPA Program Package for this program includes:

- ▶ *Turning Point User's Guide*
- ▶ Facilitator's Manual
- ▶ *A Slide Atlas to Differential Diagnosis in HIV Disease binder*
- ▶ HAPPA Adaptation Workbook
- ▶ Activity Masters packet
- ▶ HAPPA Evaluation Assistance Kit (includes the Evaluation Questionnaire)
- ▶ Process Evaluation Instrument
- ▶ Telephone technical support on implementation and evaluation for 1 year

