

**DRR<sub>2</sub>**

**Using *StaySafe* for improving decision making and increasing confidence to avoid risky behaviors**

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**Overview**

- We will present preliminary comparisons of *StaySafe* vs SP participants in community and residential probation settings at three months after baseline.
- Comparisons on measures relevant to *StaySafe* objectives –
  - Decision-making
  - Talking with helpful others about avoiding HIV risks and HIV prevention or treatment
  - Knowledge, Confidence and Motivation to avoid health risk behaviors

**Survey Data**

**Community**

155 Baseline

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79 StaySafe | 76 SP

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69 Post Intervention

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34 StaySafe | 35 SP

**Residential**

203 Baseline

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104 StaySafe | 99 SP

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101 Post Intervention

↓

50 StaySafe | 51 SP

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**Demographics**

	Community	Residential
% Male	57%	66%
% Female	43%	34%
% Black	40%	32%
% White	49%	62%
% More than one	9%	5%
% Hispanic	20%	32%
% 18-29	26%	46%
% 30-39	41%	29%
% 40-65	33%	25%
Age range	21-65	18-59

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**Decision-Making**— residential sample

	StaySafe	SP	p
Dependent Decision making	3.69	3.49	.087
Rational Decision making	4.39	4.06	.018
Decision Making	3.97	3.68	.006

**Subscales:** Response set: (1=disagree strongly to 5=agree strongly)

**Dependent Decision making** (relevant to “W” in WORK IT)

- “I use the advice of other people in making important decisions.”

**Rational Decision making** (relevant to “O” in WORK IT)

- “When making a decision, I consider various options in terms of a specific goal.”

**Decision Making**

- “You think about probable results of your actions.”

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**Talk about HIV risks and prevention or treatment with helpful persons**—Community sample

How often have you talked with...	StaySafe	SP	p
your <b>counselor</b> about avoiding HIV risks	.21	.11	.306
a <b>trusted friend or advisor</b> about avoiding HIV risks	.35	.23	.262
a <b>family member</b> about avoiding HIV risks	.29	.17	.233
your <b>counselor</b> about HIV prevention or treatment	.18	.09	.270
a <b>trusted friend or advisor</b> about HIV prevention or treatment	.32	.17	.147
a <b>family member</b> about HIV prevention or treatment	.24	.14	.334

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### Knowledge

	StaySafe	SP	p
Community	42.0	39.3	.084
Residential	42.2	39.4	.016

Subscales: Response set: (1=disagree strongly to 5= agree strongly)

**HIV Knowledge (C, R)**

- You know enough to teach others about how to avoid getting HIV from sexual activities.

**Confidence (R)**

- You feel very confident that you could be a role model for others in helping reduce HIV risks.

**Motivation**

- Even if it means being embarrassed, you will talk to others about your HIV/AIDS concerns.

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### Avoid Risky Sex

	StaySafe	SP	p
Community	41.9	40.0	.227
Residential	42.9	40.9	.012

Subscales: Response set: (1=disagree strongly to 5= agree strongly)

**Knowledge (R)**

- You have learned to think ahead in order to make less risky decisions about sex.

**Confidence**

- You are confident that you could avoid having sex if a condom wasn't going to be used.

**Motivation (R)**

- You have promised yourself to avoid risky sex activities.

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### HIV Test Planning

	StaySafe	SP	p
Community	43.1	40.4	.087
Residential	44.3	40.9	.001

Subscales: Response set: (1=disagree strongly to 5= agree strongly)

**Knowledge (C, R)**

- You know what to do to get tested for HIV

**Motivation (R)**

- If you "slip" and engage in risky drug use, you will get tested for HIV.
- If you "slip" and engage in risky sex, you will get tested for HIV.

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### Conclusions

**Research Goal**

Develop and test the use of an easy-to-use affordable tool aimed at impacting public health by helping people on probation make better decisions around health risk behaviors, especially HIV risks.

**Preliminary Findings**

Participants who completed StaySafe sessions report better decision-making skills, are more likely to talk with helpful others about HIV prevention and treatment and avoiding HIV risks. They also report being more knowledgeable about HIV, more confident and motivated to avoid risky sex, and to make better decisions about HIV testing.

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### Clinical Impact

StaySafe can be a useful and easy to use tool in probation settings including community supervision and residential probation substance abuse treatment settings. It provides a platform staff can use to address sensitive subjects such as HIV risks.

People in residential settings are more likely to complete more sessions and remain in the study longer than those in community settings; however, the meaning of outcome measures including reports of decision-making skills and knowledge, confidence and motivation around HIV risks differ between the two settings due to the confined nature of the residential setting.

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