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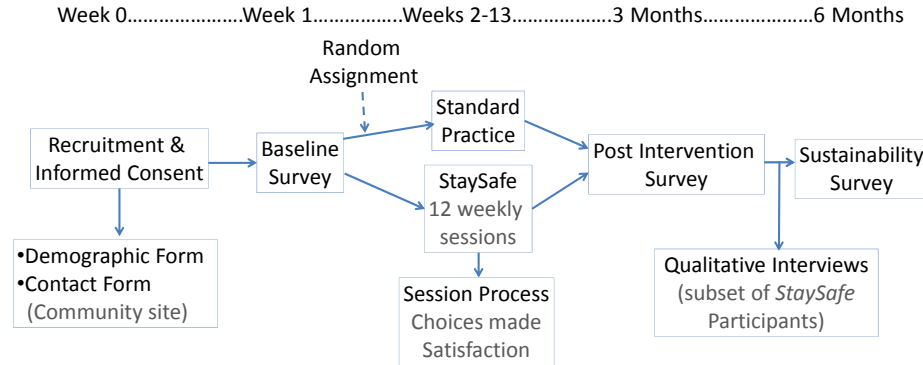
## StaySafe

- ❖ Programming to address HIV and Hepatitis B & C is lacking for many probationers
- ❖ *StaySafe* is a 12-session decision-making tablet app that is designed to help probationers make better decisions regarding health risk behaviors
- ❖ *StaySafe* works by developing and repeatedly practicing an Analytically Created Schema (WORK IT) to help participants make more informed decisions regarding health behaviors
- ❖ *StaySafe* is designed to be self-administered in brief 10-minute sessions requiring minimal staff assistance and training

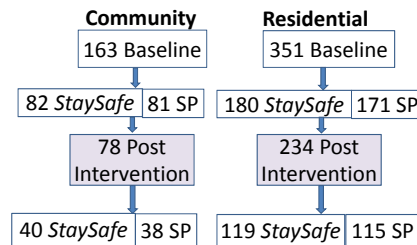
## METHODS

- ❑ Participants were 263 men and 251 women on probation in three large counties in Texas in community corrections or at short-term (6 months) residential treatment centers
- ❑ All volunteer, consented participants were asked to complete a Baseline Survey and Post Intervention Survey (3 months after Baseline)
- ❑ Participants were randomly assigned after the Baseline Survey to complete up to 12 *StaySafe* sessions or to Standard Practice (SP)
- ❑ Post Intervention outcome measures included Decision-Making and Knowledge, Confidence and Motivation regarding HIV, testing, and avoiding risks
- ❑ *StaySafe* and SP participants were compared on Post Intervention measures controlling for the Baseline score
- ❑ A small sample of 17 participants in the *StaySafe* group who completed at least six *StaySafe* sessions were asked to complete a brief semi-structured interview about their experiences using *StaySafe*

## Research Design



## Sample



## Demographics

	Community	Residential
Male	56%	49%
Female	44%	51%
Black	40%	29%
White	49%	61%
More than one	8%	9%
Hispanic	28%	33%
18-29 years old	39%	40%
30-39 years old	33%	36%
40-66 years old	27%	24%
Age range	18-66	18-62

## Participation -- *StaySafe* Sessions

# of Sessions Completed	Community	Residential	Total
1	81	169	250
6	53	149	202
12	23	90	113
average	7.2	10.2	9.2

## *StaySafe* Participation Notes

- Attrition from Baseline to Post Intervention surveys was higher in the Community sample
- 88% of Residential participants in the *StaySafe* arm completed at least 6 *StaySafe* sessions and over half (53%) completed all 12 sessions.
- Almost two-thirds (65%) of Community participants in the *StaySafe* arm completed at least 6 *StaySafe* sessions and more than one-fourth (28%) completed all 12 sessions.
- Community corrections participants who completed more sessions were more likely to be –
  - ✓ Older
  - ✓ Married
  - ✓ Have previous alcohol treatment

## *StaySafe* Outcomes

**Decision-Making** (10=disagree strongly; 50=agree strongly)  
 (residential sample)

	<i>StaySafe</i>	SP	p
Dependent Decision making	36.9	34.9	.087
<b>Rational Decision making</b>	<b>43.9</b>	<b>40.6</b>	<b>.018</b>
<b>Decision Making</b>	<b>39.7</b>	<b>36.8</b>	<b>.006</b>

Subscales:

**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."

Pre-post increases in Decision-Making were associated with –

- ✓ More education
- ✓ Less prior testing for STD

So can you give an example of using WORK IT to help you make a decision in your everyday life?

"Yeah. For one, I stay away from unsavory places, .... I look at my options. I don't have to go there. I don't have to go to a bar. Because that's dangerous territory for me. Because like I said before, it was my use of alcohol and going to clubs that I was introduced to HIV. And so I know to stay away from it. I'm implementing that in my life. So the answer is really simple once you make up your mind that's what you're going to do."

## Acknowledgments

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## StaySafe Outcomes

### HIV Knowledge (10=disagree strongly; 50=agree strongly)

	StaySafe	SP	p
Community	42.0	39.3	.084
<b>Residential</b>	<b>42.2</b>	<b>39.4</b>	<b>.016</b>

Subscales:

#### HIV Knowledge (Residential)

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

#### Confidence (Residential)

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

Pre-post increases in HIV Knowledge were associated with –

#### Community sample

✓ Being female

✓ Unemployed prior to probation

✓ **More StaySafe sessions completed**

#### Residential sample

✓ Unemployed prior to probation

### Avoiding Risky Sex (10=disagree strongly; 50=agree strongly)

	StaySafe	SP	p
Community	41.9	40.0	.227
<b>Residential</b>	<b>42.9</b>	<b>40.9</b>	<b>.012</b>

Subscales:

#### Knowledge (Residential)

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

#### Motivation (Residential)

▪You have promised yourself to avoid risky sex activities.

Pre-post increases in Avoiding Risky Sex were associated with –

#### Community sample

✓ Being married

✓ Unemployed prior to probation

✓ **More StaySafe sessions completed**

#### Residential sample

✓ Unemployed prior to probation

✓ Less frequent prior testing for HIV

### HIV Test Planning (10=disagree strongly; 50=agree strongly)

	StaySafe	SP	p
Community	43.1	40.4	.087
<b>Residential</b>	<b>44.3</b>	<b>40.9</b>	<b>.001</b>

Subscales:

#### Knowledge (Community, Residential)

▪You know what to do to get tested for HIV

Pre-post increases in HIV Test Planning were associated with –

#### Community sample

✓ Being older

✓ Being married

✓ **More StaySafe sessions completed**

#### Residential sample

✓ Higher education

✓ Unemployed prior to probation

### Risk Reduction Skills (10=disagree strongly; 50=agree strongly)

	StaySafe	SP	p
Community	43.4	42.4	.498
<b>Residential</b>	<b>44.0</b>	<b>41.9</b>	<b>.009</b>

Subscales:

#### Knowledge (Residential)

▪You know how to stand up for yourself when someone tries to pressure you to take a risk.

#### Confidence (Residential)

▪During the past month, your confidence in decision making about HIV risks in the “real world” has increased.

Pre-post increases in Risk Reduction Skills were associated with –

#### Community sample

✓ Being older

✓ Being married

✓ Not injecting

✓ Less injection risk

#### Residential sample

✓ Being White

✓ Higher education

✓ Unemployed prior to probation

✓ Prior alcohol treatment

✓ **More StaySafe sessions completed**

## Conclusions

❖ Participants in both community and residential settings were willing to complete multiple *StaySafe* sessions. Although residential settings were conducive to completing more weekly sessions, completion of *StaySafe* sessions in community settings was encouraging given the scheduling issues and other barriers in those settings.

❖ Differential factors were significantly related to improved outcomes for the Community and Residential samples

❖ Completing more *StaySafe* sessions was associated with greater change in Knowledge and Confidence around HIV and risk reduction

❖ There is support for the notion that *StaySafe* can help prepare participants in short-term residential settings to make better decisions and have better strategies for reducing risk behaviors when they return to the community

❖ Participants who completed *StaySafe* sessions, compared to those in standard practice, reported significantly–

- ✓ Better decision-making skills
- ✓ More knowledge about HIV
- ✓ More knowledge and motivation to avoid risky sex
- ✓ More knowledge around HIV test planning
- ✓ More knowledge and confidence around risk reduction skills