Cooperative Agreement for AIDS Community-Based Outreach/Intervention Research Program, 1992-1998: [United States]

Bibliographic Description

Title: Cooperative Agreement for AIDS Community-Based Outreach/Intervention Research Program, 1992-1998: [United States]

Alternate Title: Co-op Agree AIDS, 1992-1998

Principal Investigator(s): United States Department of Health and Human Services. National Institutes of Health. National Institute on Drug Abuse

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Scope of Study

Summary: The purpose of the Cooperative Agreement (CA) Research Program was to monitor risk factors, risk behaviors, and rates of HIV seroprevalence and seroincidence among out-of-treatment, multi-ethnic/racial injection drug users and crack cocaine users. The program evaluated the efficacy of experimental interventions designed to prevent, eliminate, or reduce HIV risk behaviors and developed new treatment interventions. All participants received the standard intervention, which consisted of street-based outreach and HIV prevention counseling. Those assigned to enhanced interventions received more counseling sessions, educational videos, social gatherings, and support group activities. The public-use data file contains 31,088 respondent records, collected from 21 CA program facilities in the United States and one facility each in Puerto Rico and Brazil. Hence, the process data file contains 23 records of facility information that can be linked to individual respondents. Respondent interviews include a baseline Risk Behavior Assessment (completed prior to first intervention) and a Follow-Up Assessment, conducted either three months or six months after the baseline survey. Respondent data were augmented with eligibility information, biological markers of drug use, HIV test results, and intervention assignment. At baseline and post-intervention, the surveys measured drug use and drug treatment, sexual activity and sex for money/drugs, arrests, work/income, HIV/STD/pregnancy status, perceptions of risk, and risk reduction behaviors. The process questionnaires were completed by staff or principal investigators at the 23 site locations. Process data describe the program structure and process, other intervention projects in the community, needle exchange programs and pharmacy syringe sales, and local HIV infection rates. Drugs reported on include alcohol, marijuana/hashish, crack/cocaine, heroin (including speedball), non-prescription methadone, other opiates, and amphetamines.

Subject Term(s): AIDS, counseling, drug abuse, drug education, drug offenders, health education, HIV, intervention, outreach programs, race, risk assessment, risk factors, treatment

Geographic Coverage: United States

Time Period: 1992 - 1998

Date(s) of Collection: 1992 - 1998

Unit of Observation: individualfacility

Universe: Multi-ethnic/racial male and female drug injectors and crack users at risk for HIV in the United States.

Data Type: clinical data, survey data

Data Collection Notes: Data were collected and prepared for release by CSR Incorporated, Washington, DC.

To protect the privacy of respondents, all variables that could be used to identify individual clients or facilities have been encrypted, collapsed, or removed from the public use files. These modifications should not affect the analytic uses of the public use files.

All participants received the standard intervention, while those assigned to the enhanced intervention received more sessions. Additional information about the study interventions can be found in the codebook.

The original study protocol allowed for a follow-up window of six months. However, these guidelines were amended and the window expanded to fifteen months or longer in order to permit assessments of migrant populations, high rates of incarceration, or other difficulties making follow-up contact. In addition, some sites opted for a three-month follow-up window. To identify the follow-up time period, users should refer to the variable XDRBFINT, which records number of days between baseline and follow-up surveys.

Respondents were administered either the six-month Risk Behavior Follow-Up Assessment (RF4) or the three-month Risk Behavior Follow-Up Assessment (RF5), but not both. However, about 42 percent of respondents are missing a Follow-Up Assessment form. Under these circumstances (i.e., when the client was lost to follow-up), efforts were made to complete a Client Participation Summary form approximately 9 to 15 months after the baseline interview.

Responses to questions from the RF4 and RF5 surveys can be compared to responses from the RB3 to identify changes between two points in time. The common variable names were copied from RB3 when possible and prefixed by a capital "F" to indicate "Follow-Up". For variables not common with RB3, the variable naming convention is "F + sectionletter + other identifying characters".

Most, but not all records, contain post-intervention process and attrition data captured by the Client Participation Summary (CPS/CP2) forms. The majority of records (24,409) have both CPS variables and CP2 variables. The CPS variables are urine test and follow-up HIV test results, reason lost to follow-up, presence of needle tracks, referrals, and number and length of intervention sessions. The CP2 variables include all of the CPS variables plus detailed intervention process information, number and length of enhanced intervention sessions, and unscheduled session participation. There were 3,807 records with only the CPS variables and 2,872 records missing both CPS and CP2 variables.

Specific instruments were used to collect HIV test results at baseline (BHT3), three-month follow-up (FHT33), and 6-month follow-up (FHT36). Every HT3 instrument includes ELISA test results.

Methodology

Sample: The Cooperative Agreement (CA) used a randomized and quasi-experimental design. Respondents were recruited using a targeted sampling strategy that employed mapping geographic areas of local drug use activity and HIV infection. These ethnographic and epidemiologic sampling techniques were utilized at the individual and community level. Each site had a monthly recruitment goal of 35 multi-ethnic/racial male (70 percent) and female (30 percent) drug injectors and crack users who were at risk for HIV. Respondents were eligible if they had self-reported injection, crack, or cocaine use within the past 30 days, were at least 18 years of age at the time of baseline, were not currently enrolled in treatment, and had not been interviewed by the National AIDS Demonstration Research program or the CA program within the past year. Individuals or communities were randomly assigned to a standard or enhanced intervention track.

Mode of Data collection: -

Extent of Processing: Performed consistency checks. Standardized missing values. Created online analysis version with question text. Checked for undocumented or out-of-range codes.

Access and Availability

Note: Some instruments administered as part of this study may contain contents from copyrighted instruments. Reproductions of the instruments are provided solely as documentation for the analysis of the data associated with this collection. Please contact the data producers for information on permissions to use the instruments for other purposes.

Restrictions: Users are reminded by the National Institute on Drug Abuse that these data are to be used solely for statistical analysis and reporting of aggregated information and not for the investigation of specific individuals or organizations.

Original Release: 2001-11-16

Version History: The last update of this study occurred on 2008-10-23.

2008-10-23 - New files were added. These files included one or more of the following: Stata setup, SAS transport (CPORT), SPSS system, Stata system, SAS supplemental syntax, and Stata supplemental syntax files, and tab-delimited ASCII data file.

Dataset(s): DS1: Respondent Data

DS2: Process Data