

B E B A S H I

INTERVIEWER TRAINING MANUAL

Overcoming Barriers to Condom Use, STD Screening and Treatment
In a High Risk Population:
A Research and Demonstration Project

PROJECT OVERVIEW

This project, entitled "Overcoming Barriers to Condom Use, STD Screening and Treatment in a High Risk Population", has been funded by the Centers for Disease Control for three years beginning September 1989 and ending September 1992.

Project Goals and Objectives

The overall project goals are to increase the availability of STD (Sexually Transmitted Disease) services and to conduct community outreach promoting STD screening and treatment and condom use among those at greatest risk of exposure to STDs. To meet these goals, new STD screening and treatment services will be offered to the population of Health District 5 at Quality Community Health Care (Quality CHC) and at Health Center #5 which is administered by the Philadelphia Department of Health. As part of the project, outreach efforts will link residents with STD services at both STD clinics (Quality CHC and Health Center #5) and will attempt to increase condom use in the target area. Research will chart changes in community attitudes and behaviors as a result of the STD service and outreach program.

The service intervention and research components of this project are designed to focus on the needs of the populations at highest risk in this community. They are: residents of public housing, clients using homeless shelters and food distribution programs; pregnant and postpartum women who are non-compliant with prenatal care or who have addiction problems; drug users in treatment programs; prostitutes; and drug users not in treatment.

Description of the Primary Intervention: STD Services and Outreach Components

The project target area, Health District 5, has the highest levels of reported STDs in Philadelphia but has no STD clinic. To increase the availability of STD screening and treatment services, a walk-in STD screening and treatment service will be opened at a neighborhood community health center (Quality CHC) and STD services will be expanded at Health Center #5 as of March, 1990. Both sites will provide a full range of STD services to men and women. The STD services will include aggressive efforts to get clients back for follow-up treatment and regular rescreening. Patients who test positive will be counseled and encouraged to have their sexual partners treated.

Outreach workers will be used to improve access to STD treatment and screening services, plus increase street-level knowledge and attitudes regarding STDs and condom use. Outreach workers will promote and make referral to the STD services at both clinics. They will also provide on-the-street STD counseling and information, distribute educational materials and condoms, discuss HIV prevention and refer residents to HIV counseling, if necessary.

Description of the Research Components

The research objectives focus on the evaluation of the primary intervention which is an aggressive outreach linked to accessible STD services. We will determine whether there is increased community and client knowledge of STDs and condom use, and whether community residents are responding to the outreach workers' message by accessing STD services. Following are the research components:

1. The Community Survey. The community survey will be administered twice: once before the beginning of STD services to establish a baseline and again 2 years later. The survey will assess knowledge, attitudes, and behaviors regarding condoms and STDs in Health District 5 and in a comparison community (Health District 4).

You, as interviewers, will be administering the community survey. Please refer to Section IV entitled "The Community Survey" for more information.

2. The Client Survey. Three hundred clients of Quality Community Health Care will be surveyed twice: once immediately after their first clinic visit and once again 6 months later. These client surveys will be compared to surveys of 150 respondents from the Philadelphia Housing Development who haven't used the clinics. The client survey will be used to assess the effectiveness of outreach workers in contacting members of the target community, in increasing compliance with STD treatment regimes, and in increasing treatment of sexual partners. It will also be used to assess the effect of clinic visits on knowledge of STDs and attitudes regarding condom use. Health clinic staff at Quality Community Health Care will administer the client survey.

3. Ethnographic field study. Field workers, using ethnographic methods, will interview 20 community members over 2 years to gain a more in-depth understanding of any changes in attitudes or condom use documented in the community survey.

FUNDING

As the recipient of funds from the CDC, the Family Planning Council (FPC) will monitor all aspects the project. BEBASHI, a subcontractor, will hire and manage the interviewers, who will conduct the community survey, and the field workers who will undertake the ethnographic field study. Philadelphia Health Management Corporation (PHMC), another subcontractor, will hire and manage the outreach workers.

THE COMMUNITY SURVEY

In February and March 1990, interviewers hired and managed by BEBASHI will administer the 15-minute community survey to 800 residents of Health Districts 4 and 5.

Objective

The community survey will be conducted to study the community over time and to assess the effectiveness of the outreach efforts to contact community members. It will gather information about access to health care, attitudes and communication about STDs, knowledge about condoms and STDs, sexual behavior, condom use behavior, attitudes towards condoms, STD history and treatment, and background information about the respondent.

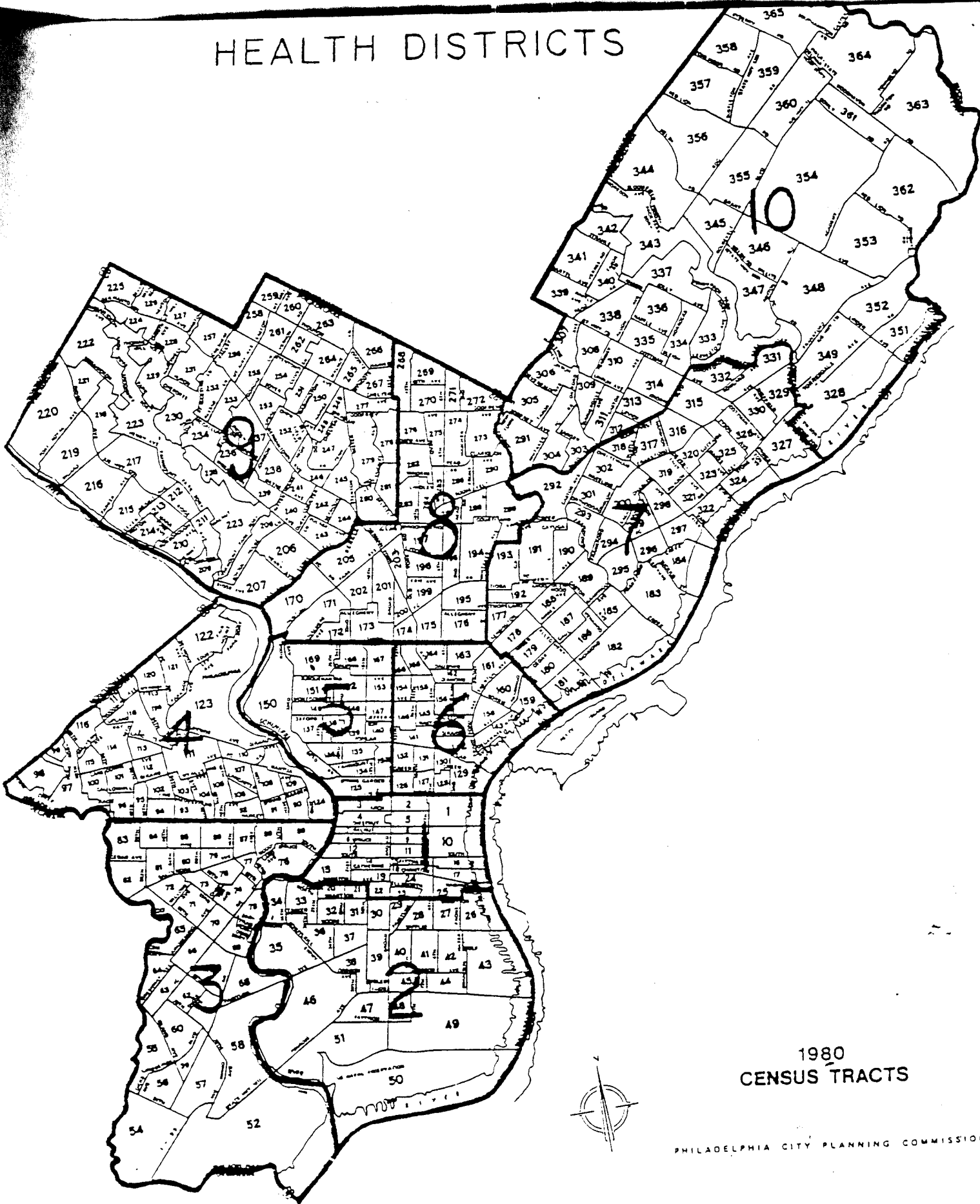
Methodology

The interviewers will administer the community survey to randomly selected residents of Health District 5 (the target area where outreach efforts and STD services will be available) and to residents of Health District 4 (a comparison area with similar demographic characteristics). Two years after the project outreach and STD services begin in March 1990, another randomly selected group of residents from each Health District will be surveyed.

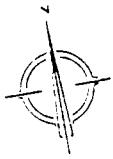
Comparisons of the results from the two health districts will allow us to determine whether the residents in both districts have similar characteristics and knowledge, attitudes, and behavior about STDs and condom use. We will also discover whether the interventions (the outreach plan and initiation of STD clinics) in Health District 5 have successfully changed knowledge, attitudes, or behaviors.

Four hundred residents from Health District 5 and another 400 from Health District 4 will be randomly chosen to participate in the community survey before project outreach and STD services begin in March 1990. (Two years after the beginning of project services, interviewers will administer a second community survey to another 400 randomly chosen residents from Health District 5 and to 400 from Health District 4.)

HEALTH DISTRICTS



1980
CENSUS TRACTS



PHILADELPHIA CITY PLANNING COMMISSION