INTRODUCTION

Research to Prevention (R2P) is a USAID-funded task order led by Johns Hopkins University (JHU) that aims to improve HIV prevention programs in the countries most affected by the HIV epidemic. Central to this is the need to develop capacity in low- and middle-income countries in all aspects of the research process. By building capacity in applied research and data utilization, in-country organizations will be better equipped to guide programs and influence national policy.

To achieve this goal, R2P developed a one-year micro-grant and research training program. In 2009 and 2010, the R2P Small Grants Program provided researchers from developing countries the opportunity to develop research skills, conduct independent research, and build working relationships with other grantees. Each year, three partner organizations were awarded small grants of $50,000 for proposed research focusing on a specific theme in HIV prevention. The theme for the 2009 awards was alcohol abuse as a behavioral risk factor for HIV infection.

The 2009 competition was open to host-country nationals from low- and middle-income countries. After review by a committee at JHU, grants were awarded to the following organizations: The Center for Community Health Research and Development (Vietnam), the Centre de Communications et d’Éducation pour la Sante et le Développement (the Democratic Republic of Congo [DRC]) and the Miz-Hasab Research Center (Ethiopia). This document describes the capacity-building activities of the R2P Small Grants Program and summarizes the projects completed by the 2009 grantees.1

Overview of the R2P Small Grants Program

The R2P Small Grants Program was designed to build capacity through multiple channels. Organizations not only received financial resources needed to undertake a research project, but were also offered training and technical assistance by JHU faculty members, and the opportunity to learn from other grantees.

Training workshop: Developing Research Skills and Establishing Working Relationships

At the start of the award period, Principal Investigators and co-Investigators were invited to attend a one-week training course in Baltimore, Maryland. Travel was funded by R2P. Core R2P team members and JHU faculty led courses on qualitative and quantitative research methods, research ethics, and translating findings into interventions. The workshop allowed the six researchers to further develop their study designs, sampling plans, data collection instruments, and plans of analysis.

A secondary objective of the workshop was to promote the establishment of working
relationships and the exchange of ideas with other researchers in the field of HIV prevention, particularly those engaged in similar research at JHU. It presented the opportunity for these six researchers working on the single research topic (i.e., alcohol use and HIV risk) to collaborate in their research and begin to build a global network of like-minded organizations. It also set the stage for ongoing mentoring between R2P researchers and grantees.

Research Projects and Key Findings
Using the skills and the relationships gained through the workshop, grantees conducted their respective research projects with regular technical assistance and feedback from Baltimore. The following pages offer a summary of these projects, as well as examples of capacity building and lessons learned for each project.

Project 1: Alcohol, stigma, and sexual risk among MSM in Hanoi, Vietnam

Organization Profile: Center for Community Health Research and Development
The Center for Community Health Research and Development (CCRD) is a non-governmental organization (NGO) in Hanoi, Vietnam, specializing in public health research and evidence-based interventions throughout Vietnam. Founded in 2002, CCRD has grown to employ 20 full-time staff members with diverse technical backgrounds, and was recently selected by USAID as one of the three first local NGOs eligible for direct funding for a community-based HIV program. Visit http://www.ccrd.org.vn/ for more information on CCRD's work.

Project details
CCRD used their small grant to conduct a research project entitled, “Alcohol abuse, stigma, and sexual risks: triple burden among men who have sex with men in Hanoi, Vietnam.” While high levels of stigma and alcohol consumption have been documented among Vietnamese MSM, CCRD knew of no studies that considered the relationships between stigma, alcohol abuse, and sexual behaviors in this population. This study sought to explore these relationships to inform the development of more targeted, effective interventions for this high-risk group.

The cross-sectional study proceeded in two phases. First, the team mapped venues frequented by MSM in Hanoi (10 locations) and conducted in-depth interviews with 5 key informants knowledgeable about the MSM community. Results informed the development of a behavioral survey questionnaire that contained sections on sexual behaviors, alcohol consumption, experiences of stigma, and mental health. Respondent Driven Sampling (RDS) was then used to recruit a probability sample of 450 MSM to complete the piloted survey.

Key results
Descriptive findings reported by CCRD include:

- Over half of all MSM respondents reported high levels of alcohol consumption (i.e., drinking 3 or more drinks at 2 or more occasions per week).
- Eighty percent of all respondents reported having sexual intercourse after drinking alcohol in the previous 30 days.
- Over 60% of all participants reported having anal intercourse with 2 or more male partners in the last 30 days, and inconsistent condom use was common.
- The majority had not been tested for HIV in the past 12 months.

Multivariate regression models revealed the following:

- Participants were less likely to use condoms if they reported having sex after drinking alcohol, using alcohol during the most recent sex, or ever having unwanted sex due alcohol consumption.
- Presence of mental health problems such as depression almost doubled a participant’s risk of not using condoms.
- Participants who experienced enacted stigma (such as discrimination at work or by friends) had nearly twice the odds of being depressed than participants who had not experienced enacted stigma.
- Participants with a depressive disorder consumed alcohol at a level 5.4 times higher than those without a depressive disorder.

Capacity building
The time spent on this study allowed CCRD to build rapport with the MSM community in Hanoi, establishing the organization as a trusted research group among this population. At the technical level, R2P assistance enabled researchers to learn and implement RDS, a sampling technique used to recruit hard-to-reach populations. As the first CCRD study to employ RDS methodology, the project represented an important learning opportunity that will inform future research initiatives.
The CCRD team has worked with R2P to utilize and disseminate study findings. In 2013, CCRD was one of five partner organizations awarded a $10,000 Data Utilization and Dissemination Small Grant from R2P. The team is currently working with R2P staff to develop a health communication book based on results from the study. The book is designed to reach audiences beyond the academic realm, using photographs and personal narratives to illustrate the link between alcohol, stigma, and HIV-risk in the MSM community. CCRD will also hold a conference in November 2013 to present the book to stakeholders and discuss the importance of research-based health communication.

Lessons learned
In addition to the direct correlations between drinking and experiences of discrimination and between drinking and HIV risk, the data indicate an indirect relationship between discrimination and drinking through mental health status. Many MSM that reported experiencing discrimination also experienced problems related to mental health, such as depression. This mediating relationship between discrimination, mental health, and alcohol use suggests that psychological services are essential to ensure the effectiveness of interventions designed to decrease alcohol abuse or stigma among MSM.

Project 1: Alcohol consumption and HIV infection among adolescents and young adults in the Democratic Republic of the Congo

Organization Profile: Centre de Communications et d’Éducation pour la Sante et le Développement

The Centre de Communications et d’Éducation pour la Sante et le Développement (CESD) was established in 2004 as one of the first Congolese NGOs specializing in health communication, education, and promotion. With headquarters in Kinshasa, CESD staff partners with local and international organizations to conduct health research, increase public awareness, and improve current and future programming efforts throughout the Democratic Republic of the Congo (DRC). More information of CESD can be found at http://www.cesd-rdc.org/.

Project details

CESD used the R2P Small Grant to conduct a study titled, “The role of alcohol consumption in HIV infection among adolescents and young adults in the Democratic Republic of the Congo (DRC).” Specifically, the study aimed to (1) determine the prevalence and correlates of alcohol drinking among these age-groups, and (2) determine whether alcohol drinking is associated with unsafe sex in Kinshasa, DRC.

The survey utilized both qualitative and quantitative research methods. Eight focus group discussions (4 with adolescents, 4 with young adults) were held to better understand the drinking habits of teenagers and young adults, types of alcohol consumed, venues where drinking tended to take place, and their perceptions of their behavior after consuming alcohol. These results were used to create a behavioral survey administered by 23 trained interviewers from CESD and the Kinshasa School of Public Health. Using a multistage sampling scheme, interviewers recruited and interviewed a reported 1396 participants.

Key results

Descriptive findings reported by CESD researchers include:

- Over two-thirds of all adolescents and young adults sampled had ever used alcohol.
- A significant proportion of those who reported drinking alcohol also report drinking at high levels (i.e., more than 1.5 litres at a time).
- A notable proportion of teenagers and young adults started drinking alcohol while living with their biological parents.
- The median age of onset of alcohol consumption was 16 years; this coincides with the median age of onset of sexual intercourse.
- The proportion of respondents who had ever had a sexually transmitted infection (STI) was greater among those who had consumed alcohol than among those who had never consumed alcohol.

Additionally, bivariate analysis revealed that level of alcohol intake was associated with:

- Older age
- Male gender
- Not currently attending school
- Not practicing a religion
- Not living with biological parents
- Having an income-generating activity or job
- Being sexually active

Voice from the field

This grant gave us the opportunity to apply the RDS method to better understand MSM, a hidden population in Vietnam. This is the first time we have conducted research about MSM using this method – in fact, it is the first time we used the RDS method.

– Trang Dang, Senior Researcher for CCRD
Capacity building

This large-scale survey provided capacity building opportunities for both CESD staff and local researchers. The substantial target sample size (1500) required CESD to recruit and train individuals from CESD and the Kinshasa School of Public Health to serve as interviewers. A total of 23 interviewers and 7 supervisors received an 8-day training on the study questionnaire and overall study methodology.

Lessons learned

Results from the survey indicated that alcohol use is common among adolescents and young adults in Kinshasa, DRC and is associated with HIV-related risk factors such as having an STI. Health communication efforts surrounding HIV among these populations should consider alcohol consumption and its associated risk factors. Notably, participants indicated that alcohol consumption often begins within the family context (such as during holiday celebrations) and continues after the child leaves home. Interventions should therefore not be limited to adolescents and young adults; parents, too, should be made aware of the adverse effects of alcohol and the need to communicate with their children.

Project 3: Female Sex Workers in Adama City, Ethiopia

Organization Profile: Miz-Hasab Research Center

The Miz-Hasab Research Center (MHRC) is a licensed private research center located in Addis Ababa, Ethiopia. Since 1997, researchers at MHRC have conducted local, regional, and national level research (both quantitative and qualitative) on reproductive health and population and development. The center also offers short-term training and workshop facilitations for local researchers and NGOs. Read more about MHRC at http://miz-hasab.org/whoweare.html.

Project details

Noting a lack of targeted interventions for female sex workers (FSW) in Ethiopia, MHRC used the R2P Small Grant to conduct a study entitled, “Associations between FSWs’ characteristics, sexual behavior, and alcohol use with HIV risk in urban Ethiopia: the case of Adama City.” The cross-sectional survey sought to (1) describe the socio-demographic and behavioral characteristics of FSWs in Adama, and (2) examine associations between HIV risk (defined as condom use with regular non-paying clients) and FSW characteristics.

Researchers conducted an exploratory visit to Adama to collect formative data on FSW. Based on the findings, a draft survey questionnaire and in-depth interview guide were developed and piloted among 24 FSWs randomly selected from 6 establishments (i.e., bars, hotels, and nightclubs). Survey data was then collected from 350 FSWs from a total of 63 establishments. In addition, 4 researchers conducted in-depth interviews with 16 FSW and 15 owners/supervisors of establishments.

Key results

Descriptive findings reported by researchers include:

- FSW in the study tended to be single, Coptic Christians, and had completed primary school. The average age was 22 years old.
- Most FSW reported using condoms with all clients, with the exception of regular non-paying clients (63%). This was true even when clients offered higher prices for sex without condoms.
- Approximately 90% of FSW reported that they drank alcohol. Drinking almost always took place while working.
- A significant majority (82%) of FSWs had a drink during their last sexual relation with regular or new paying client. However, most indicated that even with alcohol they are unlikely to have sex without condoms.
- Most FSW had voluntarily tested for HIV in the last 12 month (average 3 times).

Chi-square tests revealed that lower HIV risk was significantly associated with the following characteristics:

- Older age at first drink
- Lower monthly income
- Dissatisfaction with sex work
- Harmful drinking behavior
- The perception that drinking does not affect the ability to insist on condom use
- Condom use at first sex
- No or little perceived risk for HIV
- No current regular sexual partner
- Greater knowledge of STI symptoms in males and females

Capacity building

The R2P Small Grant helped to build capacity in MHRC in both research skills and data dissemination. In addition to the standard training in Baltimore, the study supervisor and researchers underwent thorough training in-country, covering areas as varied as the study context, methodology, confidentiality, interviewing techniques, and quality control. Additionally, researchers at JHU and MHRC worked collaboratively to develop a peer-reviewed article based on the study findings.
The article, “Work-related violence and inconsistent condom use with non-paying partners among female sex workers in Adama City, Ethiopia,” reported that work-related violence is common among FSW, and significantly associated with unprotected sex with regular, non-paying partners. Authors suggest that interventions targeting violence against FSW be developed and implemented in Adama.

Lessons learned
Encouragingly, FSW in Adama had a high rate of condom use and HIV testing. But researchers often looked to qualitative research to help interpret some surprising findings. For example, condom use was associated with harmful drinking behavior as well as the belief that drinking does not affect condom negotiation. This may be due to FSW being aware of personal tolerance levels; it may also be that the measures used in the study are not appropriate for this population. In-depth interviews suggested that while many FSW felt remorse about drinking significant amounts of alcohol. However, the behavior was reportedly related to FSW’s increased confidence to approach clients and negotiate fees when drinking. In turn, FSWs found it challenging to easily reduce their alcohol consumption in this context. Future research should further explore findings such as these to provide appropriate programming and policy recommendations.

Conclusions: R2P Small Grants Program
The 2009 Small Grants Program provided the technical and financial means for three local-level organizations to conduct research exploring alcohol use as a risk factor for HIV risk – an important theme in HIV prevention. Through continued communication with R2P staff, information-sharing between organizations, and on-the-ground application, grantees gained essential skills in research design, development, implementation, analysis, and dissemination.

Based on the success of the 2009 program, a second round of Small Grants were awarded to three organizations the following year. The 2010 program incorporated feedback received from CCRD, CESD, and MHRC on how to maximize capacity-building opportunities throughout the award period. This included: (1) site visits by R2P staff to monitor field work and provide in-person support, (2) a more formal reporting system better tracked ongoing communication between R2P and grantees, and (3) an application process that was open to non-research groups. Information on the 2010 program can be found online at http://www.jhsph.edu/r2p.