

Connect: A Couples-level Intervention for Relationships Living with or At Risk for HIV/STIs

Program Overview

Connect is a relationship-based intervention that teaches couples techniques and skills to enhance the quality of their relationship, communication, and shared commitment to safety and health. The program is based on the AIDS Risk Reduction Model, which organizes behavior change into three phases—recognize risk, commit to change, and act on strategies—and on the Ecological Perspective which emphasizes the personal, relational, and societal influences on behavior. **Connect** integrates family therapy techniques commonly used at the Ackerman Institute for the Family, which allow couples to harness their strengths and resources, and to work together to solve shared problems. Testing for HIV/STIs and medication adherence within a continuum of care are part of the **Connect** intervention.

Focus Population

Heterosexual, MSM, and transgender couples with their main sex and/or drug using partners

Research Results

In the original research trials of the **Connect** intervention, the following results were found among participating couples at 3- and 12-months after the intervention:

- ♥ Significantly increased the proportion of protected sex acts
- ♥ Significantly increased the rates of 100% condom use

Package Contents *

- ♥ An implementation manual covering intervention planning, implementation, maintenance, and evaluation
- ♥ Intervention overview video and a collection of intervention topic videos
- ♥ A training self-refresher, including a collection of training video vignettes on another diskette
- ♥ Materials for reproduction, such as readiness assessment and evaluation forms, myth/fact cards, commitment contract, and educational posters

Core Elements

1. Working with sexual and/or drug using partners together in structured, facilitated sessions emphasizing the relationship as the focus of change.
2. Creating a prevention and/or risk reduction strategy customized to the partners' relationship history, characteristics and agreements.
3. Identifying how gendered expectations, stereotypes, stigma and power imbalances influence decisions regarding behavioral and biomedical prevention approaches.
4. Using modeling, practice, and goal setting to promote mastery in communication, negotiation, problem-solving and social support enhancement within partnerships to reduce risks.
5. Enhancing skills to navigate family, community and structural-level barriers that impact risk reduction and access to care.
6. Facilitating linkage to care and other needed services to address co-occurring issues.

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El-Bassel, N., Witte, S., Gilbert, L., Wu E., Chang, M., Hill, J., and Steinglass, P. (2003). The efficacy of a relationship-based HIVSTD prevention program for heterosexual couples. *American Journal of Public Health* 93(6):963-969.

El-Bassel, N., Jemmott, J. B., Landis, J. R., Pequegnat, W., Wingood, G. M., Wyatt, G. E., & Bellamy, S. L. (2010). National Institute of Mental Health multisite Eban HIV/STD prevention intervention for African American HIV serodiscordant couples: a cluster randomized trial. *Archives of Internal Medicine*, 170(17), 1594-1601. PMID: 20625011

The NIMH Multisite HIV Prevention Trial Group (Witte, Co-investigator, New York site). (2008). Methodological overview of an African American couple-based HIV/STD prevention trial. *Journal of Acquired Immune Deficiency Syndromes*, 49, s3-s14.

The NIMH Multisite HIV Prevention Trial Group (Witte, Co-investigator, New York site). (2008). Eban HIV/STD risk reduction intervention: Conceptual basis and procedures. *Journal of Acquired Immune Deficiency Syndromes*, 49,s15-s27.

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www.effectiveinterventions.cdc.gov

*Package Contents are also available at the website and downloadable via password. Passwords are available at the time of training and by contacting the person/number at the website above.