

Best-Evidence Woman-Focused HIV Prevention (Adaptations of the Women's CoOp)

RTI International has successfully developed, adapted, implemented, and evaluated gender interventions that target vulnerable women in the United States, South Africa, and Eastern Europe. Under the direction of Dr. Wendee M. Wechsberg, our woman-focused interventions aim to develop women's personal power by reducing substance use, strengthening negotiation skills for sexual protection, preventing sexual violence, and reducing HIV acquisition. We also work to keep women living with HIV healthy.

Original Women's CoOp

Women's CoOp I Study, 1998–2003

Funded by the National Institute on Drug Abuse (NIDA)

To address the impact of HIV among African American women who use crack cocaine, a culturally specific HIV intervention—the Women's CoOp (WC)—was developed in North Carolina. This intervention was effective in reducing sexual risk and increasing self-sufficiency. It is listed as a “best-evidence” intervention by the Centers for Disease Control and Prevention (CDC).

Women's CoOp II Study, 2004–2010

Funded by NIDA

This study determined the long-term effects of the WC intervention and booster sessions to help sustain risk reduction. Women who had been in the WC were found to be in a low-risk group at long-term follow-up.

Adapting the Women's CoOp to Vulnerable Populations Globally

The WC intervention has since been translated and adapted to vulnerable populations in different settings around the world.

United States

Pregnant Women's CoOp, 2005–2010

Funded by NIDA

This study pilot tested the WC among pregnant African American women in substance abuse treatment in North Carolina. The study compared an adapted version of the intervention tailored to pregnant women with standard services offered in substance abuse treatment programs.

At 6-month follow-up, results indicated marked reductions in homelessness, use of cocaine and illegal drugs, and involvement in physical violence; there was also an increase in knowledge of HIV at this follow-up for both the control and intervention conditions.

Young Women's CoOp, North Carolina, 2007–2013

Funded by CDC

This study adapted the WC to reach sexually active, vulnerable African American women aged 16–19 who were at risk for dropping out of school. The study focused on issues related to returning to school, pregnancy and parenting, social support, and healthy relationships. At 3-month follow-up, participants were significantly less likely to report sex without a condom at last sex compared to controls.

Young Women-Focused HIV Prevention: Seek & Test in North Carolina Clinics, 2015–to date

Funded by NIDA

This study is developing and testing the efficacy of an adaptation of the WC delivered by a mobile health application compared with face-to-face delivery to reduce substance use and sexual risk among African American women aged 18–25 from three counties in North Carolina.



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South Africa

The Women's Health CoOp, 2003–2010

Funded by the National Institute on Alcohol Abuse and Alcoholism (NIAAA)

The Women's Health CoOp (WHC) was adapted to reach sex workers and vulnerable women who use substances in Pretoria, South Africa. Sex workers in the WHC were significantly less likely to report physical abuse by a main partner and had a significant reduction in drug use compared to sex workers in the control. The WHC is listed in the USAID Compendium of Gender Studies in Africa and has been packaged for implementation in many settings.

Western Cape Women's Health CoOp, 2007–2013

Funded by the Eunice Kennedy Shriver National Institute of Child Health and Human Development (NICHD)

This study tested the effectiveness of combining voluntary counseling and testing with the WHC among vulnerable women. This was the first trial in South Africa with women who use drugs to demonstrate that supplementing voluntary counseling and testing with a woman-focused intervention results in greater abstinence from drug use.

Couples' Health CoOp, 2008–2014

Funded by the NIAAA

This trial recruited men and their main female sex partners in Cape Town to participate in the Couples' Health CoOp (CHC) intervention, aimed at reducing substance use, violence, and sexual risk behaviors among couples. Women in the CHC were less likely to be HIV positive at follow-up; men in the CHC were less likely to report heavy drinking and more likely to report condom use at follow-up than in other conditions.



Combination Prevention for Vulnerable Women in South Africa (WHC+), 2011–to date

Funded by NIDA

This study is designed to reach vulnerable women who use substances in Pretoria, South Africa. The Women's Health CoOp Plus (WHC+) combines a biomedical strategy (test, treat, and retain in care) with the WHC to maximize the efficacy of both strategies. If efficacious, this intervention could help reduce the HIV epidemic in South Africa.

Implementation Research for Vulnerable Women in South Africa, 2014–to date

Funded by the NIAAA

This study is developing and testing an implementation strategy for sustainability by integrating the WHC into existing health clinics and substance abuse rehabilitation centers in South Africa for women living with HIV. This project is assessing barriers and facilitators associated with acceptability and long-term program sustainability.

Expanding HIV Testing and Prevention to Reach Vulnerable Young Women, 2015–to date

Funded by NIDA

This study is reaching female adolescents aged 16–19 who use substances and have dropped out of school in Cape Town. This study aims to test the efficacy of an adaptation of the WHC intervention, increase uptake of HIV counseling and testing and linkage to effective substance abuse treatment and other support services.

Future Directions

Future plans are under way to include PrEP use, mHealth, and vulnerable women in other regions of the world.

More Information

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